



2024 Incentive Formulary Unlimited (List of Covered Drugs)

**PLEASE READ: THIS DOCUMENT CONTAINS INFORMATION
ABOUT THE DRUGS WE COVER IN THIS PLAN**

This formulary was updated on 10/1/2024. For more recent information or other questions, please contact The Health Plan Pharmacy Services at 1.800.624.6961 extension 7914, or visit www.healthplan.org.

Pharmacy Benefit Programs

Prescription drugs are an integral component of a comprehensive health maintenance plan. Pharmacy benefit programs at The Health Plan are developed through recommendations of participating physicians and pharmacists. This group of professional health care providers, known as the Pharmacy and Therapeutics Committee, evaluates therapeutic classes of drugs and recommends coverage guidelines for our pharmacy benefit programs. The committee uses current medical and pharmaceutical literature along with recommendations of experts in various clinical specialties in its evaluation of our pharmacy benefit programs. The result is a list of drugs (formulary) to allow for the availability of appropriate medications for our members' needs. Also, the formulary and coverage guidelines allow prescription costs and your premium to be maintained at affordable levels.

Definitions

Prescription – Drugs which can only be dispensed upon order (prescription) by a qualified provider of care. Additionally, only drugs which are labeled “Caution: Federal law prohibits dispensing without prescription” will be considered eligible.

Generic Drug – A drug available as a chemically and therapeutically equivalent copy of a brand-name drug. It is usually available from several manufacturers.

Brand Drug – A prescription item only available from a single-source supplier.

Multi-Source Brand Drugs – Brand-name drugs which are manufactured by more than one producer. These agents are usually available as generic equivalents.

How to Use Your Prescription Benefit

Please present The Health Plan ID card to the pharmacist with your prescription. You will be required to pay a copayment (“copay”) at the time of service based on the prescription plan in which you are enrolled. Your copayment levels are found under the pharmacy benefit section Pharmacy Benefit of your Summary of Benefits. Your ID card also contains important information to allow the pharmacy to correctly submit your claim. Please take it with you to the pharmacy.

Specialty Pharmacy Program

Specialty drugs are high-cost medications including drugs manufactured by biotechnology. Specialty drugs may be administered by injection, oral, transdermal, or inhaled. Specialty drugs are used to treat very specific diseases and require extensive management for safety and effectiveness. Dosages need to be monitored for effect and adjustments might be needed for adequate response to effectively treat the disease.

Specialty drugs require prior authorization to assure appropriate candidate for the drug. Additionally, oversight is an integral part of the prior authorization process. Dispensing might be limited to pharmacies with specific skills and distribution programs to assure proper delivery of these medications. Diseases targeted to receive therapy are, but not limited to, rheumatoid arthritis, severe chronic psoriasis, multiple sclerosis, hepatitis C, hemophilia, certain cancers, growth deficiency, cystic fibrosis and Crohn's disease.

Coverage for these agents is provided under your Specialty Pharmacy Benefit.

Drugs Requiring Prior Authorization

Certain medications are eligible for coverage only after a patient-specific approval has been authorized. Patient-specific criteria may include age, gender, and clinical conditions determined by the physician for authorization to be granted for a specific drug. A coverage determination request can be made by the member, member's representative or physician. To request a coverage determination please contact pharmacy services at 1.800.624.6961, ext. 7914. Standard requests for coverage determinations will be processed within 5 days. Requests for non-urgent coverage determinations received after 5pm will be processed the next business day. Urgent requests for coverage determinations will be processed within 48 hours.

Quantity per Dispensing Event (QPDE rules)

Generally, The Health Plan allows dispensing of approved medications up to a 34-day supply per co-pay at the retail pharmacy network. Quantity per dispensing event rules (QPDE) set thresholds that reduce exposure to unnecessary cost, without creating obstacles to access for most members. Drugs that are subject to QPDE rules usually have specific limitations for use approved by the FDA. Examples include drugs to treat migraine headaches. These drugs, known as "triptans," are to be used in specific doses up to a defined number of headaches per month. The QPDE rules allow this specific number of triptan medications to be dispensed per 34-day benefit period. To inquire about QPDE limits to request an exemption, have your provider contact pharmacy services at 1.800.624.6961, ext. 7914.

Non-Formulary Coverage Review

Certain non-formulary medications are eligible for coverage only after a patient-specific approval has been authorized. Patient-specific criteria may include age, gender, and clinical conditions determined by the physician for authorization to be granted for a specific drug. A non-formulary exception request can be made by the member, member's representative or physician. To request an exception please contact pharmacy services at 1.800.624.6961, ext. 7914. Standard requests for exceptions will be processed within 5 business days of receipt of the request. Requests for non-urgent coverage determinations received after 5pm will be processed the next business day. Urgent requests for coverage determinations will be processed within two business days of receipt or 72 hours, whichever is less.

Generic Difference Policy

(copayment policy for multi-source drugs)

If a prescription order specifies that a brand-name drug must be dispensed when the generic equivalent is available, or the prescription order allows for generic substitution and the member elects to have the prescription filled with a brand-name drug instead, the member must pay the brand copayment plus the difference between The Health Plan cost of a brand-name and its generic equivalent (i.e., The Health Plan only pays for the generic cost). Please note: Non-formulary brand versions of generic drugs require coverage review as outlined above.

Out-of-Area Emergencies

In situations of emergency need for a prescription outside The Health Plan service area, please contact The Health Plan for the location of a participating pharmacy in that area. Present The Health Plan ID card with the emergency prescription and pay your copayment. If no pharmacy in the area participates with The Health Plan, purchase the emergency prescription and send your receipt to The Health Plan. You will be reimbursed in full, less your applicable copayment, for the prescription provided the prescription meets the guidelines specified in this document.

Exclusions and Limitations

The following will not be covered or paid for by The Health Plan:

- The charge for any prescription refill other than the number set by the prescriber. Additionally, no refills dispensed more than one year from the date or the original prescription.
- The charge for any prescription, oral or topical, that is prescribed for cosmetic purposes.
- The charge for any medications not FDA-approved for use in the general population.
- Off label use of a drug which is not medically accepted. The Health Plan uses the same guidelines as CMS for determining whether a proposed use is medically accepted.
- The charge for a drug not prescribed by a HealthPlan qualified provider except in an emergency situation.
- The charge for any medication covered by any Worker's Compensation or occupational disease laws, any other group policy, or government program which is not The Health Plan's program.
- Dental-related prescriptions such as, but not limited to, oral fluorides, dental mouth washes, devices used in dental therapy. Certain oral fluoride products may be covered as a preventative medication.
- The charge for prescription drugs or devices used to promote weight loss.
- Prescriptions used to treat sexual dysfunction, either oral or topical, or devices used for impotence.
- Appliances and therapeutic devices which may require a prescription are not covered. These include, but are not limited to, garments, splints, bandages, or braces regardless of intended use.
- Charges for lost or stolen prescription drugs unless noted within your Summary of Benefits. Please contact The Health Plan for details.
- Certain legend drugs when any version or strength become available over the counter.
- The charges for prescriptions related to non-covered services.

- The charge for any prescription prescribed to enhance athletic performance.
- Drugs prescribed to shorten the duration of the common cold.
- Drugs for treatment of infertility.
- Any packaging material, other than the standard pharmacy packaging.
- Nutritional and/or dietary supplements.
- Charges for the administration of any drug.
- Drugs consumed at the time and place where dispensed or where the prescription order is issued including, but not limited to, samples provided by a physician. This does not include any drugs used in conjunction with a diagnostic service or other drugs covered under medical supplies.
- Herbal or homeopathic products.
- Compound drugs unless there is at least one ingredient that requires a prescription.
- Allergenic extracts.
- Diagnostic agents.
- The cost of shipping or delivering a drug.
- Outpatient drugs for which the manufacturer seeks to require that associated tests or monitoring services be purchased exclusively from the manufacturer as a condition of sale.
- Pharmaceutical samples.

Pain Management Program and Opiate/Opioid Management

Pain Management Program will apply to plans within the value program.

The acute use of opioid medications for moderate to severe pain from acute injury, medical treatment or surgical procedure will be limited. The first fill of an opioid medication will be limited to a 5 day supply. This limit is for the first fill of an opioid medication for a member who has no history of opioid usage in the past 130 days.

For those members needing further management of their pain, a prior authorization will be required if:

- The opioid exceeds 80 morphine milligram equivalents
- Is taken for greater than 90 consecutive days
- Is a long acting opioid
- Is being taken with a medication that could

cause respiratory depression.

A pharmacist will review the case to evaluate that the opioid is being utilized safely and appropriately. Additionally, the member can be limited to one prescriber and one pharmacy, if needed.

Formulary medications will be preferred over non-formulary medications. Step therapy rules will be applied when reviewing a request for non-formulary medications. Also, dosing and quantities may be limited.

This Guidebook includes information accurate at the time it was collected from Express Scripts' systems and may not reflect actual benefit setup details at later times.

Table of Contents

ANTI - INFECTIVES	3
ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS	9
AUTONOMIC & CNS DRUGS, NEUROLOGY & PSYCH	15
CARDIOVASCULAR, HYPERTENSION & LIPIDS	27
DERMATOLOGICALS/TOPICAL THERAPY	34
DIAGNOSTICS & MISCELLANEOUS AGENTS	42
EAR, NOSE & THROAT MEDICATIONS	44
ENDOCRINE/DIABETES	44
GASTROENTEROLOGY	54
IMMUNOLOGY, VACCINES & BIOTECHNOLOGY	58
IMMUNOLOGY	61
MUSCULOSKELETAL & RHEUMATOLOGY	61
OBSTETRICS & GYNECOLOGY	64
OPHTHALMOLOGY	69
RESPIRATORY, ALLERGY, COUGH & COLD	73
UROLOGICALS	77
VITAMINS, HEMATINICS & ELECTROLYTES	78
Index	82

List of Abbreviations

ACA: Affordable Care Act.

LA: Limited Availability. This prescription may be available only at certain pharmacies. For more information, please call Customer Service.

OTC: Over the Counter. An OTC drug is a non-prescription drug.

PA: Prior Authorization. The Plan requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval before you fill your prescriptions. If you don't get approval, we may not cover the drug.

QL: Quantity Limit. For certain drugs, the Plan limits the amount of the drug that we will cover.

ST: Step Therapy. In some cases, the Plan requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, we may not cover Drug B unless you try Drug A first. If Drug A does not work for you, we will then cover Drug B.

Drug Name	Drug Tier	Requirements / Limits
ANTI - INFECTIVES		
ANTIFUNGAL AGENTS		
ANCOBON	3	PA
BREXAFEMME	3	ST; QL (99 per 99 days)
<i>clotrimazole</i>	1	
CRESEMBA	2	PA
DIFLUCAN	3	
<i>fluconazole oral suspension for reconstitution</i>	1	
<i>fluconazole oral tablet 100 mg, 200 mg, 50 mg</i>	1	
<i>fluconazole oral tablet 150 mg</i>	1	QL (99 per 99 days)
<i>flucytosine</i>	1	PA
<i>griseofulvin microsize</i>	1	
<i>griseofulvin ultramicrosize</i>	1	
<i>itraconazole</i>	1	QL (99 per 99 days)
<i>ketoconazole</i>	1	
NOXAFIL ORAL SUSP, DELAYED RELEASE FOR RECON	2	PA
NOXAFIL ORAL SUSPENSION	3	PA
<i>nystatin</i>	1	
ORAVIG	3	
<i>posaconazole</i>	1	PA
SPORANOX	3	QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
<i>terbinafine hcl</i>	1	
VFEND	3	PA
VIVJOA	6	PA; QL (99 per 99 days)
<i>voriconazole</i>	1	PA
ANTIVIRALS		
<i>abacavir</i>	1	
<i>abacavir-lamivudine</i>	1	
<i>acyclovir</i>	1	
<i>adefovir</i>	1	
<i>amantadine hcl</i>	1	
APRETUDE	5	PA
APTIVUS	2	
<i>atazanavir</i>	1	
BARACLUDE	2	
BEYFORTUS	2	ACA
BIKTARVY	2	
CABENUVA	5	PA; QL (99 per 99 days)
CIMDUO	2	
<i>darunavir</i>	1	
DESCOVY	2	
DOVATO	2	
EDURANT	2	
<i>efavirenz</i>	1	
<i>efavirenz-emtricitabin-tenofov</i>	1	
<i>efavirenz-lamivudine-tenofov disop</i>	1	
<i>emtricitabine</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>emtricitabine-tenofovir (tdf) oral tablet 100-150 mg, 133-200 mg, 167-250 mg</i>	1	
<i>emtricitabine-tenofovir (tdf) oral tablet 200-300 mg</i>	1	ACA
EMTRIVA ORAL CAPSULE	3	
EMTRIVA ORAL SOLUTION	2	
<i>entecavir</i>	1	
EPCLUSA	5	PA; QL (99 per 99 days)
EPIVIR	3	
<i>etravirine</i>	1	
EVOTAZ	3	
<i>famciclovir</i>	1	QL (99 per 99 days)
FLUMADINE	3	
<i>fosamprenavir</i>	1	
FUZEON	2	PA; QL (99 per 99 days)
GENVOYA	2	
HARVONI	5	PA; QL (99 per 99 days)
INTELENCE ORAL TABLET 100 MG, 200 MG	3	
INTELENCE ORAL TABLET 25 MG	2	
ISENTRESS	2	
ISENTRESS HD	2	
JULUCA	2	
KALETRA	3	

Drug Name	Drug Tier	Requirements / Limits
LAGEVRIO (EUA)	2	QL (99 per 99 days)
<i>lamivudine</i>	1	
<i>lamivudine-zidovudine</i>	1	
LIVTENCITY	3	PA; QL (99 per 99 days)
<i>lopinavir-ritonavir</i>	1	
<i>maraviroc</i>	1	
<i>nevirapine</i>	1	
NORVIR ORAL POWDER IN PACKET	2	
NORVIR ORAL TABLET	3	
ODEFSEY	2	
<i>oseltamivir</i>	1	QL (99 per 99 days)
PAXLOVID	2	QL (99 per 99 days)
PREVYMIS	2	QL (99 per 99 days)
PREZISTA ORAL SUSPENSION	2	
PREZISTA ORAL TABLET 150 MG, 75 MG	2	
PREZISTA ORAL TABLET 600 MG, 800 MG	3	
RELENZA DISKHALER	3	QL (99 per 99 days)
RETROVIR	3	
REYATAZ ORAL CAPSULE	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
REYATAZ ORAL POWDER IN PACKET	2	
<i>ribavirin</i>	1	PA
<i>rimantadine</i>	1	
<i>ritonavir</i>	1	
SELZENTRY ORAL SOLUTION	2	
SELZENTRY ORAL TABLET	3	
SUNLENCA	6	PA
SYMFI	2	
SYMFI LO	2	
SYMTUZA	2	
SYNAGIS	5	PA; LA
TAMIFLU	3	QL (99 per 99 days)
TEMBEXA	3	
<i>tenofovir disoproxil fumarate</i>	1	
TIVICAY	2	
TIVICAY PD	2	
TRIUMEQ	2	
TRIUMEQ PD	2	
TROGARZO	5	PA
TYBOST	3	
<i>valacyclovir</i>	1	QL (99 per 99 days)
VALCYTE	3	
<i>valganciclovir</i>	1	
VEMLIDY	2	
VIRACEPT	2	
VIRAZOLE	3	PA

Drug Name	Drug Tier	Requirements / Limits
VIREAD ORAL POWDER	2	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	2	
VIREAD ORAL TABLET 300 MG	3	
VOSEVI	5	PA; QL (99 per 99 days)
XOFLUZA	3	QL (99 per 99 days)
ZEPATIER	5	PA; QL (99 per 99 days)
ZIAGEN	3	
<i>zidovudine</i>	1	
CEPHALOSPORINS		
<i>cefaclor</i>	1	
<i>cefadroxil</i>	1	
<i>cefдинир</i>	1	
<i>cefixime</i>	1	
<i>cefpodoxime</i>	1	
<i>cefprozil</i>	1	
<i>cefuroxime axetil</i>	1	
<i>cephalexin</i>	1	
ERYTHROMYCINS & OTHER MACROLIDES		
<i>azithromycin</i>	1	
<i>clarithromycin</i>	1	
DIFICID	3	QL (99 per 99 days)
<i>e.e.s. 400</i>	1	
E.E.S. GRANULES	3	
ERYPED 200	3	
ERYPED 400	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>ery-tab oral tablet, delayed release (dr/ec) 250 mg, 333 mg</i>	1	
ERY-TAB ORAL TABLET, DELAYED RELEASE (DR/EC) 500 MG	3	
<i>erythrocin (as stearate)</i>	1	
<i>erythromycin</i>	1	
<i>erythromycin ethylsuccinate</i>	1	
ZITHROMAX	3	
ZITHROMAX TRI-PAK	3	
ZITHROMAX Z-PAK	3	
MISCELLANEOUS ANTIINFECTIVES		
AEMCOLO	3	QL (99 per 99 days)
<i>albendazole</i>	1	QL (99 per 99 days)
ALINIA	2	QL (99 per 99 days)
ARAKODA	3	QL (99 per 99 days)
ARIKAYCE	5	PA; LA
<i>atovaquone</i>	1	
<i>atovaquone-proguanil</i>	1	QL (99 per 99 days)
BENZNIDAZOLE	2	QL (99 per 99 days)
BETHKIS	6	PA; QL (99 per 99 days)
BILTRICIDE	3	

Drug Name	Drug Tier	Requirements / Limits
CAYSTON	5	PA; LA; QL (99 per 99 days)
<i>chloroquine phosphate</i>	1	
CLEOCIN HCL	3	
CLEOCIN PEDIATRIC	3	
<i>clindamycin hcl</i>	1	
<i>clindamycin pediatric</i>	1	
COARTEM	2	QL (99 per 99 days)
CYCLOSERINE	2	
<i>dapsone</i>	1	
DARAPRIM	6	PA
EMVERM	2	QL (99 per 99 days)
<i>ethambutol</i>	1	
FLAGYL	3	
HUMATIN	6	
<i>hydroxychloroquine</i>	1	
IMPAVIDO	2	PA; QL (99 per 99 days)
<i>isoniazid</i>	1	
<i>ivermectin</i>	1	PA; QL (99 per 99 days)
KITABIS PAK	5	PA; QL (99 per 99 days)
KRINTAFEL	3	QL (99 per 99 days)
<i>linezolid</i>	1	PA
MALARONE	3	QL (99 per 99 days)
MALARONE PEDIATRIC	3	QL (99 per 99 days)

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Drug Name	Drug Tier	Requirements / Limits
<i>mefloquine</i>	1	QL (99 per 99 days)
MEPRON	3	
<i>metronidazole</i>	1	
MYCOBUTIN	3	
NEBUPENT	3	QL (99 per 99 days)
<i>neomycin</i>	1	
<i>nitazoxanide</i>	1	QL (99 per 99 days)
<i>paromomycin</i>	1	
PASER	3	
<i>pentamidine</i>	1	QL (99 per 99 days)
<i>praziquantel</i>	1	
PRETOMANID	3	PA
PRIFTIN	2	
<i>primaquine</i>	1	QL (99 per 99 days)
<i>pyrazinamide</i>	1	
<i>pyrimethamine</i>	1	PA
QUALAQUIN	3	QL (99 per 99 days)
<i>quinine sulfate</i>	1	QL (99 per 99 days)
<i>rifabutin</i>	1	
<i>rifampin</i>	1	
SIRTURO	2	PA; LA
SOLOSEC	2	QL (99 per 99 days)
STROMEKTOL	3	PA; QL (99 per 99 days)
<i>tinidazole</i>	1	QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
TOBI PODHALER	5	PA; QL (99 per 99 days)
<i>tobramycin</i>	4	PA; QL (99 per 99 days)
<i>tobramycin in 0.225 % nacl</i>	4	PA; QL (99 per 99 days)
TOBRAMYCIN WITH NEBULIZER	6	PA; QL (99 per 99 days)
TRECTOR	3	
XENLETA	3	
XIFAXAN	2	PA; QL (99 per 99 days)
ZYVOX	3	PA
PENICILLINS		
<i>amoxicillin</i>	1	
<i>amoxicillin-pot clavulanate</i>	1	
<i>ampicillin</i>	1	
AUGMENTIN	2	
AUGMENTIN ES-600	3	
AUGMENTIN XR	3	
<i>dicloxacillin</i>	1	
MOXATAG	3	
<i>penicillin v potassium</i>	1	
QUINOLONES		
BAXDELA	2	QL (99 per 99 days)
CIPRO	3	
<i>ciprofloxacin</i>	1	
<i>ciprofloxacin hcl</i>	1	
FACTIVE	3	
<i>levofloxacin</i>	1	
<i>moxifloxacin</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>ofloxacin</i>	1	
SULFA'S & RELATED AGENTS		
BACTRIM	3	
BACTRIM DS	3	
<i>sulfadiazine</i>	1	
<i>sulfamethoxazole-trimethoprim</i>	1	
<i>sulfatrim</i>	1	
TETRACYCLINES		
ACTICLATE	3	ST
<i>avidoxy</i>	1	
AVIDOXY DK	3	ST
<i>demeclocycline</i>	1	
<i>doxycycline hyclate oral capsule</i>	1	
<i>doxycycline hyclate oral tablet 100 mg, 20 mg</i>	1	
<i>doxycycline hyclate oral tablet 150 mg, 50 mg, 75 mg</i>	1	ST
<i>doxycycline hyclate oral tablet, delayed release (dr/ec)</i>	1	ST
<i>doxycycline monohydrate oral capsule 100 mg, 50 mg, 75 mg</i>	1	
<i>doxycycline monohydrate oral capsule 150 mg</i>	1	ST
<i>doxycycline monohydrate oral capsule, ir - delay rel, biphasic</i>	1	ST

Drug Name	Drug Tier	Requirements / Limits
<i>doxycycline monohydrate oral suspension for reconstitution</i>	1	
<i>doxycycline monohydrate oral tablet</i>	1	
<i>minocycline</i>	1	
<i>mondoxyne nl</i>	1	
MONODOX	3	ST
<i>morgidox</i>	1	
MORGIDOX 1X 50	3	ST
MORGIDOX 1X100	3	ST
NUZYRA	3	QL (99 per 99 days)
TARGADOX	3	ST
<i>tetracycline oral capsule</i>	1	
<i>tetracycline oral tablet</i>	1	ST
VIBRAMYCIN	3	ST
URINARY TRACT AGENTS		
<i>fosfomicin tromethamine</i>	1	
FURADANTIN	3	
MACROBID	3	
MACRODANTIN	3	
<i>methenamine hippurate</i>	1	
<i>methenamine mandelate</i>	1	
<i>nitrofurantoin</i>	1	
<i>nitrofurantoin macrocrystal</i>	1	
<i>nitrofurantoin monohyd/m-cryst</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
PRIMSOL	3	
<i>trimethoprim</i>	1	

VANCOMYCIN		
<i>vancomycin</i>	1	QL (99 per 99 days)

ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS

ADJUNCTIVE AGENTS

KEPIVANCE	5	PA
<i>leucovorin calcium</i>	1	
MESNEX	2	
XGEVA	5	PA; QL (99 per 99 days)

ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS

ABECMA	6	PA
<i>abiraterone</i>	4	PA; QL (99 per 99 days)
ABRAXANE	6	PA
ADAKVEO	5	PA
ADCETRIS	5	PA
ALECENSA	5	PA; QL (99 per 99 days)
ALIQOPA	5	PA; LA
ALKERAN	3	
ALUNBRIG	5	PA; QL (99 per 99 days)
AMTAGVI	5	PA
<i>anastrozole</i>	1	
AROMASIN	3	
ARRANON	6	PA
ASPARLAS	6	PA
ASTAGRAF XL	3	PA

Drug Name	Drug Tier	Requirements / Limits
AUGTYRO	6	PA
AYVAKIT	6	PA; LA; QL (99 per 99 days)
<i>azacitidine</i>	4	PA
AZASAN	3	
<i>azathioprine</i>	1	
BALVERSA	5	PA; LA
BAVENCIO	5	PA; LA
BELEODAQ	6	PA
BELRAPZO	6	PA
<i>bendamustine intravenous recon soln</i>	4	PA
BENDAMUSTINE INTRAVENOUS SOLUTION	6	PA
BENDEKA	5	PA
BESPONSА	5	PA
BEVACIZUMAB	3	PA
<i>bexarotene</i>	4	PA
<i>bicalutamide</i>	1	
BLINCYTO	5	PA
BORTEZOMIB INJECTION RECON SOLN 1 MG, 2.5 MG	5	PA
<i>bortezomib injection recon soln 3.5 mg</i>	4	PA
BORTEZOMIB INTRAVENOUS	5	PA
BOSULIF	5	PA; QL (99 per 99 days)
BREYANZI	6	PA
BRUKINSA	5	PA; LA

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Drug Name	Drug Tier	Requirements / Limits
CABOMETYX	5	PA; LA; QL (99 per 99 days)
CALQUENCE (ACALABRUTINIB MAL)	5	PA; LA; QL (99 per 99 days)
<i>capecitabine</i>	4	PA; QL (99 per 99 days)
CAPRELSA	5	PA; LA; QL (99 per 99 days)
CARVYKTI	5	PA
CASODEX	3	
CELLCEPT	3	
COMETRIQ	5	PA; QL (99 per 99 days)
COPIKTRA	6	PA; LA; QL (99 per 99 days)
COSELA	6	PA
COTELLIC	5	PA; LA; QL (99 per 99 days)
<i>cyclophosphamide oral capsule</i>	1	
CYCLOPHOSPHAMIDE ORAL TABLET	3	
<i>cyclosporine</i>	1	
<i>cyclosporine modified</i>	1	
CYRAMZA	5	PA
DANYELZA	6	PA
DARZALEX	5	PA; LA
DARZALEX FASPRO	6	PA

Drug Name	Drug Tier	Requirements / Limits
DAURISMO	6	PA; QL (99 per 99 days)
<i>decitabine</i>	4	PA
DROXIA	2	
ELAHERE	6	PA
ELIGARD	5	PA
ELIGARD (3 MONTH)	5	PA
ELIGARD (4 MONTH)	5	PA
ELIGARD (6 MONTH)	5	PA
ELREXFIO	6	PA
ELZONRIS	5	PA
EMPLICITI	6	PA
ENHERTU	6	PA
ENSPRYNG	5	PA
ERBITUX	5	PA
<i>eribulin</i>	4	PA
ERIVEDGE	5	PA; QL (99 per 99 days)
ERLEADA	5	PA; QL (99 per 99 days)
<i>erlotinib</i>	4	PA; QL (99 per 99 days)
ERWINASE	6	PA
<i>etoposide</i>	1	
EULEXIN	3	
<i>everolimus (antineoplastic)</i>	4	PA; QL (99 per 99 days)
<i>everolimus (immunosuppressive)</i>	1	
EVOMELA	6	PA
<i>exemestane</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
FARESTON	3	
FEMARA	3	
FENSOLVI	5	PA
FIRMAGON KIT W DILUENT SYRINGE	5	PA
<i>fludarabine</i>	1	
FOLOTYN	5	PA
FYARRO	6	PA
GAMIFANT	5	PA
GAVRETO	5	PA; LA; QL (99 per 99 days)
GAZYVA	5	PA
<i>gefitinib</i>	4	PA; QL (99 per 99 days)
<i>gengraf</i>	1	
GILOTRIF	5	PA; QL (99 per 99 days)
GLEOSTINE	2	
GLIADEL WAFER	3	
HALAVEN	5	PA
HEPZATO (50 MM CATHETER)	6	
HYCAMTIN	5	PA
HYDREA	3	
<i>hydroxyurea</i>	1	
ICLUSIG	5	PA; QL (99 per 99 days)
IDHIFA	5	PA; LA; QL (99 per 99 days)
<i>imatinib</i>	4	PA; QL (99 per 99 days)
IMBRUVICA	5	ST; QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
IMDELLTRA	6	PA
IMFINZI	5	PA; LA
IMJUDO	6	PA
IMLYGIC	6	PA
IMURAN	3	
INLYTA	5	PA; QL (99 per 99 days)
IRESSA	6	PA; QL (99 per 99 days)
ISTODAX	5	PA
IWILFIN	5	PA; LA
IXEMPRA	5	PA
JAKAFI	5	ST; QL (99 per 99 days)
JELMYTO	6	PA
JEMPERLI	6	PA
JEVTANA	5	PA
KADCYLA	5	PA
KANJINTI	5	PA
KEYTRUDA	5	PA
KIMMTRAK	5	PA
KISQALI	5	PA; QL (99 per 99 days)
KOSELUGO	6	PA
KYMRIAH	5	PA
KYPROLIS	5	PA
<i>lanreotide</i>	4	PA; QL (99 per 99 days)
<i>lapatinib</i>	4	PA; QL (99 per 99 days)
<i>lenalidomide</i>	4	PA; QL (99 per 99 days)
LENVIMA	5	PA; QL (99 per 99 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>letrozole</i>	1	
LEUKERAN	2	
<i>leuprolide</i>	4	PA
LIBTAYO	5	PA
LONSURF	5	PA
LOQTORZI	5	PA
LORBRENA	5	PA; QL (99 per 99 days)
LUMAKRAS	6	PA
LUNSUMIO	5	PA
LUPKYNIS	5	PA; QL (99 per 99 days)
LUPRON DEPOT	5	PA
LUPRON DEPOT (3 MONTH)	5	PA
LUPRON DEPOT (4 MONTH)	5	PA
LUPRON DEPOT (6 MONTH)	5	PA
LYNPARZA	5	PA; QL (99 per 99 days)
LYSODREN	5	
LYTGOBI	5	PA; LA
MARGENZA	6	PA
MATULANE	5	PA
<i>megestrol</i>	1	
MEKINIST	5	PA; QL (99 per 99 days)
<i>mercaptopurine</i>	1	
<i>methotrexate sodium</i>	1	
<i>methotrexate sodium (pf)</i>	1	
<i>mitoxantrone</i>	4	PA
MONJUVI	6	PA

Drug Name	Drug Tier	Requirements / Limits
MVASI	6	PA
MYCAPSSA	6	PA; LA; QL (99 per 99 days)
<i>mycophenolate mofetil</i>	1	
<i>mycophenolate sodium</i>	1	
MYFORTIC	3	
MYHIBBIN	2	
MYLERAN	2	
MYLOTARG	5	PA; LA
<i>nelarabine</i>	4	PA
NEORAL	3	
NERLYNX	5	PA; LA
NEXAVAR	6	PA; LA; QL (99 per 99 days)
NILANDRON	3	PA
<i>nilutamide</i>	1	PA
NINLARO	5	PA; QL (99 per 99 days)
NUBEQA	5	PA; LA; QL (99 per 99 days)
<i>octreotide acetate</i>	4	PA
ODOMZO	5	PA; LA; QL (99 per 99 days)
OGSIVEO	6	PA
OJEMDA	5	PA
ONIVYDE	5	PA
OPDIVO	5	PA
OPDUALAG	5	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
ORGOVYX	6	PA; LA; QL (99 per 99 days)
ORSERDU	5	PA; QL (99 per 99 days)
PACLITAXEL PROTEIN-BOUND	5	PA
PADCEV	6	PA
<i>pazopanib</i>	4	PA; QL (99 per 99 days)
PEMAZYRE	5	PA; LA; QL (99 per 99 days)
PERJETA	5	PA
PHESGO	5	PA
PIQRAY	5	PA
POLIVY	6	PA
POMALYST	5	PA; LA
PORTRAZZA	6	PA
POTELIGEO	5	PA
PRALATREXATE	5	PA
PROGRAF ORAL CAPSULE	3	
PROGRAF ORAL GRANULES IN PACKET	2	
PURIXAN	5	PA
RETEVMO	6	PA; LA; QL (99 per 99 days)
REVLIMID	5	PA; LA; QL (99 per 99 days)
REZUROCK	3	PA; QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
<i>romidepsin intravenous recon soln</i>	4	PA
ROMIDEPSIN INTRAVENOUS SOLUTION	6	PA
ROZLYTREK	5	PA; LA; QL (99 per 99 days)
RUXIENCE	5	PA
RYBREVANT	6	PA
RYDAPT	5	PA; QL (99 per 99 days)
RYLAZE	6	PA
SANDIMMUNE	3	
SANDOSTATIN	6	PA
SAPHNELO	6	PA
SARCLISA	6	PA
SCEMBLIX	5	PA; QL (99 per 99 days)
SIGNIFOR	5	PA
<i>sirolimus</i>	1	
SOLTAMOX	3	
SOMATULINE DEPOT	5	PA; QL (99 per 99 days)
<i>sorafenib</i>	4	PA; QL (99 per 99 days)
SPRYCEL	5	PA; QL (99 per 99 days)
STIVARGA	5	PA; QL (99 per 99 days)
<i>sunitinib malate</i>	4	PA; QL (99 per 99 days)
SUTENT	6	PA; QL (99 per 99 days)
SYLVANT	5	PA

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Drug Name	Drug Tier	Requirements / Limits
TABLOID	3	
TABRECTA	5	PA
<i>tacrolimus</i>	1	
TAFINLAR	5	PA; QL (99 per 99 days)
TAGRISSEO	5	PA; LA; QL (99 per 99 days)
TALVEY	6	PA
TALZENNA ORAL CAPSULE 0.1 MG, 0.35 MG	5	PA
TALZENNA ORAL CAPSULE 0.25 MG, 0.5 MG, 0.75 MG, 1 MG	5	PA; QL (99 per 99 days)
<i>tamoxifen</i>	1	
TARCEVA	6	PA; QL (99 per 99 days)
TARGETIN	6	PA
TASIGNA	5	PA; QL (99 per 99 days)
TAZVERIK	6	PA; LA
TECARTUS	6	PA
TECENTRIQ	5	PA; LA
TECVAYLI	6	PA
TEMODAR	5	PA
<i>temozolomide</i>	4	PA
<i>temsirolimus</i>	4	PA
THALOMID	5	PA; QL (99 per 99 days)
TIBSOVO	5	PA
TIVDAK	6	PA
<i>topotecan</i>	4	PA
<i>toremifene</i>	1	

Drug Name	Drug Tier	Requirements / Limits
TORISEL	6	PA
TORPENZ	5	PA; QL (99 per 99 days)
TRAZIMERA	5	PA
TREANDA	6	PA
<i>tretinoin (antineoplastic)</i>	1	
TREXALL	3	
TRIPTODUR	5	PA
TRODELVY	6	PA
TUKYSA	6	PA; LA; QL (99 per 99 days)
TURALIO	6	PA; LA; QL (99 per 99 days)
TYKERB	6	PA; LA; QL (99 per 99 days)
UNITUXIN	5	PA
VECTIBIX	5	PA
VELCADE	6	PA
VENCLEXTA	5	PA; LA; QL (99 per 99 days)
VENCLEXTA STARTING PACK	5	PA; QL (99 per 99 days)
VERZENIO	5	PA; LA; QL (99 per 99 days)
VIDAZA	6	PA
VIJOICE	5	PA; QL (99 per 99 days)
VITRAKVI	5	PA; LA; QL (99 per 99 days)

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Drug Name	Drug Tier	Requirements / Limits
VIZIMPRO	5	PA; QL (99 per 99 days)
VONJO	5	PA; QL (99 per 99 days)
VORANIGO	6	PA
VOTRIENT	6	PA; QL (99 per 99 days)
VYXEOS	5	PA
WELIREG	6	PA; LA
XALKORI	5	PA; QL (99 per 99 days)
XELODA	6	PA; QL (99 per 99 days)
XERMELO	5	PA; LA; QL (99 per 99 days)
XOSPATA	5	PA; LA; QL (99 per 99 days)
XTANDI	5	PA; QL (99 per 99 days)
YERVOY	5	PA
YESCARTA	5	PA
YONDELIS	5	PA
ZALTRAP	5	PA
ZELBORAF	5	PA; QL (99 per 99 days)
ZEPZELCA	6	PA
ZIRABEV	5	PA
ZOLADEX	5	PA
ZOLINZA	5	PA; QL (99 per 99 days)
ZORTRESS	3	
ZYDELIG	5	PA; QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
ZYKADIA	5	PA; QL (99 per 99 days)
ZYNLONTA	6	PA
ZYNYZ	5	PA

AUTONOMIC & CNS DRUGS, NEUROLOGY & PSYCH

ANTICONVULSANTS

APTIOM	3	
BRIVIACT	3	ST
<i>carbamazepine</i>	1	
CARBATROL	3	
CELONTIN	3	
<i>clobazam</i>	1	PA
<i>clonazepam</i>	1	
DEPAKOTE	3	ST
DEPAKOTE ER	3	ST
DEPAKOTE SPRINKLES	3	ST
DIACOMIT	5	PA
<i>diazepam</i>	1	
DILANTIN	2	
DILANTIN EXTENDED	3	
DILANTIN INFATABS	3	
DILANTIN-125	3	
<i>divalproex</i>	1	
ELEPSIA XR	3	ST
EPIDIOLEX	5	PA; LA
<i>epitol</i>	1	
EQUETRO	3	
<i>ethosuximide</i>	1	
<i>felbamate</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
FELBATOL	3	
FYCOMPA	2	
<i>gabapentin oral capsule</i>	1	
<i>gabapentin oral solution</i>	1	
<i>gabapentin oral tablet</i>	1	
<i>gabapentin oral tablet extended release 24 hr</i>	1	ST
GRALISE	3	ST
<i>lacosamide</i>	1	
LAMICTAL XR STARTER (BLUE)	3	ST
LAMICTAL XR STARTER (GREEN)	3	ST
LAMICTAL XR STARTER (ORANGE)	3	ST
<i>lamotrigine</i>	1	
<i>levetiracetam</i>	1	
<i>methsuximide</i>	1	
MYSOLINE	3	
NAYZILAM	2	PA; QL (99 per 99 days)
<i>oxcarbazepine</i>	1	
OXTELLAR XR	3	ST
<i>phenobarbital</i>	1	
PHENYTEK	3	
<i>phenytoin</i>	1	
<i>phenytoin sodium extended</i>	1	
<i>pregabalin oral capsule</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>pregabalin oral solution</i>	1	
<i>pregabalin oral tablet extended release 24 hr</i>	1	PA
<i>primidone</i>	1	
QUDEXY XR	3	ST
<i>roweepra</i>	1	
<i>rufinamide</i>	1	PA
SPRITAM	3	ST
<i>subvenite</i>	1	
<i>subvenite starter (blue) kit</i>	1	
<i>subvenite starter (green) kit</i>	1	
<i>subvenite starter (orange) kit</i>	1	
SYMPAZAN	3	PA
TEGRETOL	3	
TEGRETOL XR	3	
<i>tiagabine</i>	1	
<i>topiramate oral capsule, sprinkle</i>	1	
<i>topiramate oral capsule, extended release 24hr</i>	1	ST
<i>topiramate oral capsule, sprinkle, er 24hr</i>	1	ST
<i>topiramate oral tablet</i>	1	
TROKENDI XR	3	ST
<i>valproic acid</i>	1	
<i>valproic acid (as sodium salt)</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
VALTOCO	2	PA; QL (99 per 99 days)
<i>vigabatrin</i>	4	PA; LA; QL (99 per 99 days)
<i>vigadrone</i>	4	PA; QL (99 per 99 days)
<i>vigpoder</i>	4	PA; QL (99 per 99 days)
XCOPRI	3	QL (99 per 99 days)
XCOPRI MAINTENANCE PACK	3	QL (99 per 99 days)
XCOPRI TITRATION PACK	3	QL (99 per 99 days)
ZARONTIN	3	
<i>zonisamide</i>	1	
ZTALMY	5	PA; LA
ANTIPARKINSONISM AGENTS		
<i>apomorphine</i>	4	PA; QL (99 per 99 days)
AZILECT	3	ST
<i>benztropine</i>	1	
<i>bromocriptine</i>	1	
<i>carbidopa</i>	1	PA
<i>carbidopa-levodopa</i>	1	
<i>carbidopa-levodopa-entacapone</i>	1	
DUOPA	6	PA
<i>entacapone</i>	1	
INBRIJA	5	PA; QL (99 per 99 days)
LODOSYN	3	PA
MIRAPEX ER	3	
NEUPRO	3	

Drug Name	Drug Tier	Requirements / Limits
NOURIANZ	6	PA; LA; QL (99 per 99 days)
PARLODEL	3	
<i>pramipexole</i>	1	
<i>rasagiline</i>	1	
<i>ropinirole</i>	1	
RYTARY	3	
<i>selegiline hcl</i>	1	
SINEMET	3	
TASMAR	3	PA
<i>tolcapone</i>	1	PA
<i>trihexyphenidyl</i>	1	
MIGRAINE & CLUSTER HEADACHE THERAPY		
AIMOVIG AUTOINJECTOR	2	PA; QL (99 per 99 days)
AJOVY AUTOINJECTOR	2	PA; QL (99 per 99 days)
AJOVY SYRINGE	2	PA; QL (99 per 99 days)
<i>almotriptan malate</i>	1	QL (99 per 99 days)
<i>dihydroergotamine</i>	1	PA
<i>eletriptan</i>	1	QL (99 per 99 days)
EMGALITY PEN	2	PA; QL (99 per 99 days)
EMGALITY SYRINGE	2	PA; QL (99 per 99 days)
ERGOMAR	3	
<i>ergotamine-caffeine</i>	1	
FROVA	3	ST; QL (99 per 99 days)
<i>frovatriptan</i>	1	QL (99 per 99 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>migergot</i>	1	
MIGRANAL	3	ST; QL (99 per 99 days)
<i>naratriptan</i>	1	QL (99 per 99 days)
NURTEC ODT	2	PA; QL (99 per 99 days)
QULIPTA	2	PA; QL (99 per 99 days)
REYVOW	3	PA; QL (99 per 99 days)
<i>rizatriptan</i>	1	QL (99 per 99 days)
<i>sumatriptan</i>	1	QL (99 per 99 days)
<i>sumatriptan succinate</i>	1	QL (99 per 99 days)
<i>sumatriptan-naproxen</i>	1	ST; QL (99 per 99 days)
TOSYMRA	3	ST; QL (99 per 99 days)
TRUDHESA	3	ST; QL (99 per 99 days)
UBRELVY	2	PA; QL (99 per 99 days)
ZEMBRACE SYMTOUCH	3	ST; QL (99 per 99 days)
<i>zolmitriptan nasal</i>	1	ST; QL (99 per 99 days)
<i>zolmitriptan oral</i>	1	QL (99 per 99 days)
ZOMIG	3	ST; QL (99 per 99 days)
MISCELLANEOUS NEUROLOGICAL THERAPY		
ADLARITY	3	ST
ARICEPT	3	ST

Drug Name	Drug Tier	Requirements / Limits
AUSTEDO	5	PA; LA; QL (99 per 99 days)
AUSTEDO XR	5	PA; QL (99 per 99 days)
AUSTEDO XR TITRATION KT(WK1-4)	5	PA; QL (99 per 99 days)
<i>dalfampridine</i>	4	PA; QL (99 per 99 days)
<i>dichlorphenamide</i>	4	PA
<i>donepezil oral tablet 10 mg, 5 mg</i>	1	
<i>donepezil oral tablet 23 mg</i>	1	ST
<i>donepezil oral tablet, disintegrating</i>	1	
<i>edaravone</i>	4	PA
EVRYSDI	6	PA; LA; QL (99 per 99 days)
EXELON PATCH	3	ST
FIRDAPSE	5	PA; LA
<i>galantamine</i>	1	
HORIZANT	3	ST
INGREZZA	6	PA; LA; QL (99 per 99 days)
INGREZZA INITIATION PK(TARDIV)	6	PA; QL (99 per 99 days)
INGREZZA SPRINKLE	6	PA; LA; QL (99 per 99 days)
<i>memantine oral capsule, sprinkle, er 24hr</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>memantine oral solution</i>	1	
<i>memantine oral tablet</i>	1	
MEMANTINE ORAL TABLETS,DOSE PACK	3	
NAMENDA TITRATION PAK	3	
NAMENDA XR	3	
NAMZARIC	2	ST
NUEDEXTA	2	PA
NULIBRY	6	PA
<i>ormalvi</i>	4	PA
RADICAVA	5	PA
RADICAVA ORS STARTER KIT SUSP	5	PA
<i>rivastigmine</i>	1	
<i>rivastigmine tartrate</i>	1	
SKYSONA	5	PA
SPINRAZA (PF)	5	PA; QL (99 per 99 days)
TEGSEDI	5	PA; LA; QL (99 per 99 days)
<i>tetrabenazine</i>	4	PA; QL (99 per 99 days)
TYSABRI	5	PA; LA; QL (99 per 99 days)
ZEPOSIA	5	PA; QL (99 per 99 days)
ZEPOSIA STARTER KIT (28-DAY)	5	PA; QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
ZEPOSIA STARTER PACK (7-DAY)	5	PA; QL (99 per 99 days)
ZOLGENSMA	5	PA
MUSCLE RELAXANTS & ANTISPASMODIC THERAPY		
<i>baclofen oral suspension</i>	1	
<i>baclofen oral tablet 10 mg, 20 mg, 5 mg</i>	1	
BACLOFEN ORAL TABLET 15 MG	2	
<i>carisoprodol</i>	3	
<i>carisoprodol-aspirin</i>	3	
<i>carisoprodol-aspirin-codeine</i>	3	ST
<i>chlorzoxazone</i>	1	
<i>cyclobenzaprine</i>	1	
DANTRIUM	3	
<i>dantrolene</i>	1	
LORZONE	3	PA
<i>meprobamate</i>	3	
<i>metaxalone</i>	1	
<i>methocarbamol</i>	1	
NORGESIC	3	
NORGESIC FORTE	3	
<i>orphenadrine citrate</i>	1	
<i>orphenadrine-asa-caffeine</i>	1	
<i>orphengesic forte</i>	1	
<i>pyridostigmine bromide oral syrup</i>	1	
PYRIDOSTIGMINE BROMIDE ORAL TABLET 30 MG	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>pyridostigmine bromide oral tablet 60 mg</i>	1	
<i>pyridostigmine bromide oral tablet extended release</i>	1	
SOMA	3	
<i>tanlor</i>	1	
<i>tizanidine</i>	1	
<i>vanadom</i>	3	
VYVGART	6	PA
VYVGART HYTRULO	6	PA
ZANAFLEX	3	
NARCOTIC ANALGESICS		
<i>acetaminophen-caff-dihydrocod</i>	1	ST
<i>acetaminophen-codeine</i>	1	ST
<i>ascomp with codeine</i>	1	ST
BELBUCA	2	ST; QL (99 per 99 days)
BRIXADI	5	
<i>buprenorphine</i>	1	ST
<i>buprenorphine hcl</i>	1	
<i>butalbital-acetaminop-caf-cod</i>	1	ST
<i>butalbital-acetaminophen</i>	1	
<i>butalbital-acetaminophen-caff</i>	1	
<i>butalbital-aspirin-caffeine</i>	1	
<i>codeine sulfate</i>	1	ST
<i>codeine-bitalbital-asa-caff</i>	1	ST

Drug Name	Drug Tier	Requirements / Limits
DILAUDID	3	ST
<i>diskets</i>	1	ST
DSUVIA	3	
<i>endocet</i>	1	ST
ESGIC	3	PA
<i>fentanyl</i>	1	ST; QL (99 per 99 days)
<i>fentanyl citrate</i>	1	ST; QL (99 per 99 days)
FIORICET	3	PA
FIORICET WITH CODEINE	3	ST
<i>hydrocodone bitartrate</i>	1	ST; QL (99 per 99 days)
<i>hydrocodone-acetaminophen</i>	1	ST
<i>hydrocodone-ibuprofen</i>	1	ST
<i>hydromorphone oral liquid</i>	1	ST
<i>hydromorphone oral tablet</i>	1	ST
<i>hydromorphone oral tablet extended release 24 hr</i>	1	ST; QL (99 per 99 days)
<i>hydromorphone rectal</i>	1	ST
HYSINGLA ER	2	ST; QL (99 per 99 days)
<i>levorphanol tartrate</i>	1	ST
<i>meperidine</i>	3	ST
<i>methadone injection</i>	1	
<i>methadone oral</i>	1	ST
<i>methadose</i>	1	ST
<i>morphine concentrate</i>	1	ST

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>morphine oral capsule, er multiphase 24 hr</i>	1	ST; QL (99 per 99 days)
<i>morphine oral capsule, extend. release pellets</i>	1	ST; QL (99 per 99 days)
<i>morphine oral solution</i>	1	ST
<i>morphine oral tablet</i>	1	ST
<i>morphine oral tablet extended release</i>	1	ST; QL (99 per 99 days)
<i>morphine rectal</i>	1	ST
MS CONTIN	3	ST; QL (99 per 99 days)
NALOCET	3	ST
<i>oxycodone</i>	1	ST
<i>oxycodone-acetaminophen</i>	1	ST
OXYCONTIN	2	ST; QL (99 per 99 days)
<i>oxymorphone oral tablet</i>	1	ST
<i>oxymorphone oral tablet extended release 12 hr</i>	1	ST; QL (99 per 99 days)
<i>prolate</i>	1	ST
ROXICODONE	3	ST
SUBLOCADE	5	
<i>tencon</i>	1	
TREZIX	3	ST
NON-NARCOTIC ANALGESICS		
<i>adult aspirin regimen</i>	3	ACA; OTC
ANAPROX DS	3	ST
ANJESO	3	
ARTHROTEC 50	3	ST

Drug Name	Drug Tier	Requirements / Limits
ARTHROTEC 75	3	ST
<i>aspirin</i>	1	ACA; OTC
<i>aspirin childrens</i>	1	ACA; OTC
<i>bayer low dose aspirin</i>	1	ACA; OTC
<i>buprenorphine-naloxone</i>	1	
<i>butorphanol injection</i>	1	ST
<i>butorphanol nasal</i>	1	ST; QL (99 per 99 days)
CAMBIA	3	ST; QL (99 per 99 days)
<i>celecoxib oral capsule 100 mg</i>	1	
<i>celecoxib oral capsule 200 mg, 400 mg, 50 mg</i>	1	ST
DAYPRO	3	ST
<i>diclofenac potassium oral capsule</i>	1	
<i>diclofenac potassium oral powder in packet</i>	1	ST; QL (99 per 99 days)
<i>diclofenac potassium oral tablet 25 mg</i>	1	ST
<i>diclofenac potassium oral tablet 50 mg</i>	1	
<i>diclofenac sodium</i>	1	
<i>diclofenac-misoprostol</i>	1	
<i>diflunisal</i>	1	
DISALCID	3	
EC-NAPROSYN	3	ST
<i>ecotrin low strength</i>	1	ACA; OTC
<i>etodolac</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
EUFLEXXA	5	PA
FELDENE	3	ST
<i>fenoprofen</i>	1	ST
FLECTOR	2	ST; QL (99 per 99 days)
<i>flurbiprofen</i>	1	
<i>ibu</i>	1	
<i>ibuprofen</i>	1	
<i>indomethacin oral capsule</i>	1	
<i>indomethacin oral capsule, extended release</i>	1	
<i>indomethacin oral suspension</i>	1	ST
<i>indomethacin rectal</i>	1	
<i>ketoprofen oral capsule 25 mg</i>	1	ST
<i>ketoprofen oral capsule 50 mg, 75 mg</i>	1	
<i>ketoprofen oral capsule, ext rel. pellets 24 hr</i>	1	ST
<i>ketorolac</i>	1	QL (99 per 99 days)
<i>kiprofen</i>	1	ST
KLOXXADO	2	QL (99 per 99 days)
LICART	2	ST; QL (99 per 99 days)
LODINE	3	ST
<i>lofena</i>	1	ST
LOTREXONE	3	
<i>meclofenamate</i>	1	
<i>mefenamic acid</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>meloxicam</i>	1	QL (99 per 99 days)
<i>meloxicam submicronized</i>	1	ST; QL (99 per 99 days)
MONOVISC	5	PA
<i>nabumetone</i>	1	
NALFON	3	ST
<i>naloxone injection</i>	1	
<i>naloxone nasal</i>	1	QL (99 per 99 days)
NALTREX	3	
<i>naltrexone</i>	1	
NAPROSYN	3	ST
<i>naproxen oral suspension</i>	1	ST
<i>naproxen oral tablet</i>	1	
<i>naproxen oral tablet, delayed release (dr/ec)</i>	1	
<i>naproxen sodium</i>	1	
NARCAN	3	QL (99 per 99 days)
OPVEE	3	
ORTHOVISC	5	PA
<i>oxaprozin</i>	1	
<i>pentazocine-naloxone</i>	3	ST
<i>piroxicam</i>	1	
REXTOVY	2	QL (99 per 99 days)
<i>salsalate</i>	1	
SPRIX	6	ST; QL (99 per 99 days)
<i>st joseph aspirin</i>	1	ACA; OTC
<i>st. joseph aspirin</i>	3	ACA; OTC

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Drug Name	Drug Tier	Requirements / Limits
<i>sulindac</i>	1	
TOLECTIN 600	3	ST
<i>tolmetin</i>	1	ST
<i>tramadol</i>	1	ST; QL (99 per 99 days)
<i>tramadol-acetaminophen</i>	1	ST; QL (99 per 99 days)
VIVITROL	5	
ZUBSOLV	2	
PSYCHOTHERAPEUTIC DRUGS		
ABILIFY ASIMTUFI	2	
ABILIFY MAINTENA	2	
ABILIFY MYCITE MAINTENANCE KIT	3	QL (99 per 99 days)
ABILIFY MYCITE STARTER KIT	3	QL (99 per 99 days)
ADASUVE	3	
ADZENYS XR- ODT	3	ST
<i>alprazolam</i>	1	
<i>alprazolam intensol</i>	1	
<i>amitriptyline</i>	1	
<i>amitriptyline-chlordiazepoxide</i>	1	
<i>amoxapine</i>	1	
<i>amphetamine sulfate</i>	1	PA
ANAFRANIL	3	
<i>aripiprazole oral solution</i>	1	
<i>aripiprazole oral tablet</i>	1	QL (99 per 99 days)
<i>aripiprazole oral tablet, disintegrating</i>	1	QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
ARISTADA	2	
ARISTADA INITIO	2	
<i>armodafinil</i>	1	PA; QL (99 per 99 days)
<i>asenapine maleate</i>	1	QL (99 per 99 days)
ATIVAN	3	
<i>atomoxetine</i>	1	PA
AUVELITY	3	ST; QL (99 per 99 days)
AZSTARYS	2	ST
BELSOMRA	3	ST; QL (99 per 99 days)
<i>bupropion hcl oral tablet</i>	1	
<i>bupropion hcl oral tablet extended release 24 hr</i>	1	QL (99 per 99 days)
<i>bupropion hcl oral tablet sustained-release 12 hr</i>	1	QL (99 per 99 days)
<i>buspirone</i>	1	
CAPLYTA	3	QL (99 per 99 days)
<i>chlordiazepoxide hcl</i>	1	
<i>chlorpromazine</i>	1	
<i>citalopram oral solution</i>	1	
<i>citalopram oral tablet</i>	1	QL (99 per 99 days)
<i>clomipramine</i>	1	
<i>clonidine hcl</i>	1	PA
<i>clorazepate dipotassium</i>	1	
<i>clozapine</i>	1	
CLOZARIL	3	

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Drug Name	Drug Tier	Requirements / Limits
COTEMPLA XR-ODT	3	ST
DAYTRANA	3	ST
DAYVIGO	3	ST; QL (99 per 99 days)
<i>desipramine</i>	1	
DESOXYN	3	PA
DESVENLAFAXIN E	3	ST; QL (99 per 99 days)
<i>desvenlafaxine succinate</i>	1	ST; QL (99 per 99 days)
DEXEDRINE SPANSULE	3	ST
<i>dexmethylphenidate</i>	1	PA
<i>dextroamphetamine sulfate</i>	1	PA
<i>dextroamphetamine-amphetamine</i>	1	PA
<i>diazepam</i>	1	
<i>diazepam intensol</i>	1	
<i>doxepin oral capsule</i>	1	
<i>doxepin oral concentrate</i>	1	
<i>doxepin oral tablet</i>	1	ST; QL (99 per 99 days)
<i>duloxetine oral capsule, delayed release(dr/ec) 20 mg, 30 mg, 60 mg</i>	1	QL (99 per 99 days)
<i>duloxetine oral capsule, delayed release(dr/ec) 40 mg</i>	1	ST; QL (99 per 99 days)
EDLUAR	3	ST; QL (99 per 99 days)
EMSAM	3	
<i>ergoloid</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>escitalopram oxalate oral solution</i>	1	ST
<i>escitalopram oxalate oral tablet</i>	1	QL (99 per 99 days)
<i>estazolam</i>	1	
<i>eszopiclone</i>	1	QL (99 per 99 days)
FANAPT	3	QL (99 per 99 days)
FETZIMA	2	ST; QL (99 per 99 days)
<i>fluoxetine oral capsule 10 mg, 40 mg</i>	1	QL (99 per 99 days)
<i>fluoxetine oral capsule 20 mg</i>	1	
<i>fluoxetine oral capsule, delayed release(dr/ec)</i>	1	ST; QL (99 per 99 days)
<i>fluoxetine oral solution</i>	1	
<i>fluoxetine oral tablet 10 mg</i>	1	ST; QL (99 per 99 days)
<i>fluoxetine oral tablet 20 mg, 60 mg</i>	1	ST
<i>fluphenazine hcl</i>	1	
<i>flurazepam</i>	1	
<i>fluvoxamine oral capsule, extended release 24hr</i>	1	ST; QL (99 per 99 days)
<i>fluvoxamine oral tablet</i>	1	QL (99 per 99 days)
GEODON	3	QL (99 per 99 days)
<i>guanfacine</i>	1	PA
HALCION	3	
<i>haloperidol</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>haloperidol lactate</i>	1	
HETLIOZ	6	PA; QL (99 per 99 days)
HETLIOZ LQ	6	PA; QL (99 per 99 days)
IGALMI	3	
<i>imipramine hcl</i>	1	
<i>imipramine pamoate</i>	1	
INVEGA	3	QL (99 per 99 days)
INVEGA SUSTENNA	3	
INVEGA TRINZA	3	
JORNAY PM	3	ST
<i>lisdexamfetamine oral capsule</i>	1	PA
<i>lisdexamfetamine oral tablet, chewable</i>	1	ST
<i>lithium carbonate</i>	1	
<i>lithium citrate</i>	1	
LITHOBID	3	
<i>lorazepam</i>	1	
<i>lorazepam intensol</i>	1	
<i>loxapine succinate</i>	1	
LUMRYZ	5	ST; QL (99 per 99 days)
<i>lurasidone</i>	1	QL (99 per 99 days)
LYBALVI	3	QL (99 per 99 days)
MARPLAN	3	
METADATE CD	3	ST
<i>methamphetamine</i>	1	PA
METHYLIN	3	PA
<i>methylphenidate</i>	1	ST

Drug Name	Drug Tier	Requirements / Limits
<i>methylphenidate hcl oral cap,er sprinkle,biphasic 40-60</i>	1	ST
<i>methylphenidate hcl oral capsule, er biphasic 30-70</i>	1	PA
<i>methylphenidate hcl oral capsule,er biphasic 50-50</i>	1	PA
<i>methylphenidate hcl oral solution</i>	1	PA
<i>methylphenidate hcl oral tablet</i>	1	PA
<i>methylphenidate hcl oral tablet extended release</i>	1	PA
<i>methylphenidate hcl oral tablet extended release 24hr</i>	1	PA
<i>methylphenidate hcl oral tablet, chewable</i>	1	PA
MIDAZOLAM ORAL SYRUP 10 MG/5 ML (2 MG/ML)	3	
<i>midazolam oral syrup 2 mg/ml</i>	1	
<i>mirtazapine</i>	1	
MKO (MIDAZOLAM-KETAMINE-ONDAN)	3	
<i>modafinil</i>	1	PA; QL (99 per 99 days)
<i>molindone</i>	1	
MYDAYIS	3	ST
NARDIL	3	
<i>nefazodone</i>	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>nortriptyline</i>	1	
NUPLAZID	6	PA; QL (99 per 99 days)
<i>olanzapine</i>	1	QL (99 per 99 days)
<i>olanzapine-fluoxetine</i>	1	
<i>oxazepam</i>	3	
<i>paliperidone</i>	1	QL (99 per 99 days)
PAMELOR	3	
PARNATE	3	
<i>paroxetine hcl oral suspension</i>	1	ST
<i>paroxetine hcl oral tablet</i>	1	QL (99 per 99 days)
<i>paroxetine hcl oral tablet extended release 24 hr</i>	1	ST; QL (99 per 99 days)
<i>paroxetine mesylate(menop.sym)</i>	1	ST; QL (99 per 99 days)
PAXIL CR	3	ST; QL (99 per 99 days)
PAXIL ORAL SUSPENSION	3	ST
PAXIL ORAL TABLET	3	ST; QL (99 per 99 days)
<i>perphenazine</i>	1	
<i>perphenazine-amitriptyline</i>	1	
<i>phenelzine</i>	1	
<i>pimozide</i>	1	
<i>procentra</i>	1	PA
<i>protriptyline</i>	1	
QELBREE	3	ST

Drug Name	Drug Tier	Requirements / Limits
<i>quetiapine</i>	1	QL (99 per 99 days)
QUVIVIQ	3	ST; QL (99 per 99 days)
<i>ramelteon</i>	1	QL (99 per 99 days)
REMERON	3	
REMERON SOLTAB	3	
RESTORIL	3	
REXULTI	3	QL (99 per 99 days)
RISPERDAL CONSTA	2	
RISPERDAL ORAL SOLUTION	3	
RISPERDAL ORAL TABLET	3	QL (99 per 99 days)
<i>risperidone microspheres</i>	1	
<i>risperidone oral solution</i>	1	
<i>risperidone oral tablet</i>	1	QL (99 per 99 days)
<i>risperidone oral tablet, disintegrating</i>	1	QL (99 per 99 days)
RYKINDO	2	
SECUADO	3	QL (99 per 99 days)
<i>sertraline oral concentrate</i>	1	
<i>sertraline oral tablet</i>	1	QL (99 per 99 days)
SILENOR	3	ST; QL (99 per 99 days)

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Drug Name	Drug Tier	Requirements / Limits
SODIUM OXYBATE	5	ST; LA; QL (99 per 99 days)
SUNOSI	2	PA; QL (99 per 99 days)
SYMBYAX	3	
<i>tasimelteon</i>	6	PA; QL (99 per 99 days)
<i>temazepam</i>	3	
<i>thioridazine</i>	1	
<i>thiothixene</i>	1	
<i>tranylcypromine</i>	1	
<i>trazodone</i>	1	
<i>triazolam</i>	1	
<i>trifluoperazine</i>	1	
<i>trimipramine</i>	1	
TRINTELLIX	3	ST; QL (99 per 99 days)
<i>venlafaxine oral capsule, extended release 24hr</i>	1	QL (99 per 99 days)
<i>venlafaxine oral tablet</i>	1	QL (99 per 99 days)
<i>venlafaxine oral tablet extended release 24hr</i>	1	ST; QL (99 per 99 days)
VERSACLOZ	3	
<i>vilazodone</i>	1	ST; QL (99 per 99 days)
VRAYLAR	3	QL (99 per 99 days)
VYVANSE ORAL CAPSULE	3	ST
VYVANSE ORAL TABLET, CHEWABLE	2	ST

Drug Name	Drug Tier	Requirements / Limits
WAKIX	6	PA; LA; QL (99 per 99 days)
XYWAV	5	ST; LA; QL (99 per 99 days)
<i>zaleplon</i>	1	QL (99 per 99 days)
<i>zenzedi oral tablet 10 mg, 5 mg</i>	1	PA
ZENZEDI ORAL TABLET 15 MG, 2.5 MG, 20 MG, 30 MG, 7.5 MG	3	PA
<i>ziprasidone hcl</i>	1	QL (99 per 99 days)
<i>zolpidem</i>	1	QL (99 per 99 days)
ZULRESSO	5	PA
ZURZUVAE	5	QL (99 per 99 days)
ZYPREXA	3	QL (99 per 99 days)
ZYPREXA RELPREVV	3	
ZYPREXA ZYDIS	3	QL (99 per 99 days)

CARDIOVASCULAR, HYPERTENSION & LIPIDS

ANTIARRHYTHMIC AGENTS

<i>amiodarone</i>	1	
BETAPACE	3	ST
BETAPACE AF	3	ST
<i>disopyramide phosphate</i>	3	
<i>dofetilide</i>	1	
<i>flecainide</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>mexiletine</i>	1	
MULTAQ	2	
<i>pacerone</i>	1	
<i>propafenone</i>	1	
<i>quinidine gluconate</i>	1	
<i>quinidine sulfate</i>	1	
<i>sotalol</i>	1	
<i>sotalol af</i>	1	
SOTYLIZE	2	
ANTIHYPERTENSIVE THERAPY		
ACCUPRIL	3	
ACCURETIC	3	
<i>acebutolol</i>	1	
ALDACTONE	3	
<i>aliskiren</i>	1	
ALTACE	3	
<i>amiloride</i>	1	
<i>amiloride-hydrochlorothiazide</i>	1	
<i>amlodipine</i>	1	
<i>amlodipine-benazepril</i>	1	
<i>amlodipine-olmesartan</i>	1	
<i>amlodipine-valsartan</i>	1	
<i>amlodipine-valsartan-hcthiazid</i>	1	
<i>atenolol</i>	1	
<i>atenolol-chlorthalidone</i>	1	
<i>benazepril</i>	1	
<i>benazepril-hydrochlorothiazide</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>betaxolol</i>	1	
<i>bisoprolol fumarate</i>	1	
<i>bisoprolol-hydrochlorothiazide</i>	1	
<i>bumetanide</i>	1	
<i>candesartan</i>	1	
<i>candesartan-hydrochlorothiazid</i>	1	
<i>captopril</i>	1	
<i>captopril-hydrochlorothiazide</i>	1	
CARDIZEM	3	
CARDIZEM CD	3	
CARDIZEM LA	3	
CARDURA ORAL TABLET 1 MG	3	QL (99 per 99 days)
CARDURA ORAL TABLET 2 MG, 4 MG, 8 MG	3	ST; QL (99 per 99 days)
CARDURA XL	3	QL (99 per 99 days)
<i>cartia xt</i>	1	
<i>carvedilol</i>	1	
<i>carvedilol phosphate</i>	1	
CATAPRES-TTS-1	3	QL (99 per 99 days)
CATAPRES-TTS-2	3	QL (99 per 99 days)
CATAPRES-TTS-3	3	QL (99 per 99 days)
<i>chlorthalidone</i>	1	
<i>clonidine</i>	1	QL (99 per 99 days)
<i>clonidine hcl</i>	1	
COREG CR	3	

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Drug Name	Drug Tier	Requirements / Limits
CORGARD	3	ST
DEMSER	3	PA
DIBENZYLINE	3	PA
<i>diltiazem</i>	1	
<i>dilt-xr</i>	1	
DIURIL	3	
<i>doxazosin</i>	1	QL (99 per 99 days)
DYRENIUM	3	
EDECRIN	3	ST
<i>enalapril maleate</i>	1	
<i>enalapril-hydrochlorothiazide</i>	1	
<i>eplerenone</i>	1	
<i>epoprostenol</i>	4	PA
<i>eprosartan</i>	1	
<i>ethacrynic acid</i>	1	
<i>felodipine</i>	1	
FLOLAN	5	PA
<i>fosinopril</i>	1	
<i>fosinopril-hydrochlorothiazide</i>	1	
<i>furosemide</i>	1	
<i>guanfacine</i>	1	
<i>hydralazine</i>	1	
<i>hydrochlorothiazide</i>	1	
<i>indapamide</i>	1	
INSPRA	3	
<i>irbesartan</i>	1	
<i>irbesartan-hydrochlorothiazide</i>	1	
<i>isosorbide-hydralazine</i>	1	
<i>isradipine</i>	1	

Drug Name	Drug Tier	Requirements / Limits
KERENDIA	2	PA; QL (99 per 99 days)
<i>labetalol</i>	1	
LASIX	3	ST
<i>lisinopril</i>	1	
<i>lisinopril-hydrochlorothiazide</i>	1	
LOPRESSOR	3	ST
<i>losartan</i>	1	
<i>losartan-hydrochlorothiazide</i>	1	
LOTENSIN	3	
LOTENSIN HCT	3	
<i>matzim la</i>	1	
<i>methyldopa</i>	1	
<i>methyldopa-hydrochlorothiazide</i>	1	
<i>metolazone</i>	1	
<i>metoprolol succinate</i>	1	
<i>metoprolol ta-hydrochlorothiaz</i>	1	
<i>metoprolol tartrate</i>	1	
<i>metirosine</i>	1	PA
<i>minoxidil</i>	1	
<i>moexipril</i>	1	
<i>nadolol</i>	1	
<i>nebivolol</i>	1	
<i>nicardipine</i>	1	
<i>nifedipine oral capsule</i>	3	
<i>nifedipine oral tablet extended release</i>	1	
<i>nifedipine oral tablet extended release 24hr</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>nimodipine</i>	1	
<i>nisoldipine</i>	1	
NYMALIZE	3	
<i>olmesartan</i>	1	
<i>olmesartan-amlodipin-hcthiazid</i>	1	
<i>olmesartan-hydrochlorothiazide</i>	1	
ORENITRAM	6	PA; QL (99 per 99 days)
ORENITRAM MONTH 1 TITRATION KT	6	PA; QL (99 per 99 days)
ORENITRAM MONTH 2 TITRATION KT	6	PA; QL (99 per 99 days)
ORENITRAM MONTH 3 TITRATION KT	6	PA; QL (99 per 99 days)
<i>perindopril erbumine</i>	1	
<i>phenoxybenzamine</i>	1	PA
<i>pindolol</i>	1	
<i>prazosin</i>	1	
PRESTALIA	3	ST
PROCARDIA XL	3	ST
<i>propranolol</i>	1	
<i>propranolol-hydrochlorothiazid</i>	1	
<i>quinapril</i>	1	
<i>quinapril-hydrochlorothiazide</i>	1	
<i>ramipril</i>	1	
REMODULIN	6	PA
<i>spironolactone</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>spironolacton-hydrochlorothiaz</i>	1	
SULAR	3	ST
<i>telmisartan</i>	1	
<i>telmisartan-amlodipine</i>	1	
<i>telmisartan-hydrochlorothiazid</i>	1	
TENORETIC 50	3	ST
TENORMIN	3	ST
<i>terazosin</i>	1	QL (99 per 99 days)
<i>tiadylt er</i>	1	
TIAZAC	3	
<i>timolol maleate</i>	1	
<i>torseamide</i>	1	
<i>trandolapril</i>	1	
<i>trandolapril-verapamil</i>	1	
<i>treprostinil sodium</i>	4	PA
<i>triamterene</i>	1	
<i>triamterene-hydrochlorothiazid</i>	1	
UPTRAVI INTRAVENOUS	6	PA; LA
UPTRAVI ORAL	5	PA; LA; QL (99 per 99 days)
<i>valsartan</i>	1	
<i>valsartan-hydrochlorothiazide</i>	1	
VASERETIC	3	
VASOTEC	3	
<i>veletri</i>	4	PA
<i>verapamil</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
VERELAN PM	3	ST
ZESTORETIC	3	
ZESTRIL	3	
CARDIAC GLYCOSIDES		
<i>digoxin</i>	1	
LANOXIN	3	
COAGULATION THERAPY		
ADVATE	5	PA
ADYNOVATE	5	PA
ADZYNMA	6	PA
AFSTYLA	5	PA
ALPHANATE	5	PA
ALPHANINE SD	5	PA
ALPROLIX	5	PA
ALTUVIIIO	5	PA
AMICAR	3	
<i>aminocaproic acid</i>	1	
ARIXTRA	6	PA
<i>aspirin-dipyridamole</i>	1	
BENEFIX	5	PA
BRILINTA	2	
CABLIVI	5	PA; LA
CEPROTIN (BLUE BAR)	5	PA
CEPROTIN (GREEN BAR)	5	PA
<i>cilostazol</i>	1	
<i>clopidogrel</i>	1	
COAGADEX	5	PA
CORIFACT	5	PA
<i>dabigatran etexilate</i>	1	PA
<i>dipyridamole</i>	1	

Drug Name	Drug Tier	Requirements / Limits
DOPTELET (15 TAB PACK)	5	PA; LA; QL (99 per 99 days)
EFFIENT	3	
ELIQUIS	2	PA
ELIQUIS DVT-PE TREAT 30D START	2	PA
ELOCTATE	5	PA
<i>enoxaparin</i>	4	PA
ESPEROCT	5	PA
FEIBA NF	5	PA
FIBRYGA	6	PA
<i>fondaparinux</i>	4	PA
FRAGMIN	5	PA
HEMGENIX	5	PA
HEMLIBRA	5	PA
HEMOFIL M HIGH	5	PA
HEMOFIL M LOW	5	PA
HEMOFIL M MID	5	PA
HEMOFIL M SUPER HIGH	5	PA
<i>hep flush-10 (pf)</i>	1	PA
<i>heparin (porcine)</i>	1	PA
HEPARIN (PORCINE) IN 0.9% NACL	3	PA
<i>heparin (porcine) in 5 % dex</i>	1	PA
<i>heparin (porcine) in nacl (pf) intravenous parenteral solution</i>	1	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
HEPARIN (PORCINE) IN NACL (PF) INTRAVENOUS SYRINGE	3	PA
<i>heparin lock flush (porcine)</i>	1	PA
<i>heparin lockflush(porcine)(pf)</i>	1	PA
HEPARIN(PORCINE) IN 0.45% NACL INTRAVENOUS PARENTERAL SOLUTION 12,500 UNIT/250 ML	3	PA
<i>heparin(porcine) in 0.45% nacl intravenous parenteral solution 25,000 unit/250 ml, 25,000 unit/500 ml</i>	1	PA
<i>heparin, porcine (pf) injection solution</i>	1	PA
<i>heparin, porcine (pf) injection syringe 5,000 unit/0.5 ml</i>	1	PA
HEPARIN, PORCINE (PF) INJECTION SYRINGE 5,000 UNIT/ML	3	PA
<i>heparin, porcine (pf) intravenous</i>	1	PA
HEPARIN, PORCINE (PF) SUBCUTANEOUS	3	PA
HUMATE-P	5	PA
IDELVION	5	PA
<i>jantoven</i>	1	

Drug Name	Drug Tier	Requirements / Limits
JIVI	5	PA
KOATE	6	PA
KOGENATE FS	5	PA
KOVALTRY	5	PA
NOVOEIGHT	5	PA
NPLATE	5	PA
OBIZUR	5	PA
<i>pentoxifylline</i>	1	
PHYTONADIONE (VITAMIN K1) INJECTION SOLUTION 1 MG/0.5 ML	2	PA
<i>phytonadione (vitamin k1) injection solution 10 mg/ml</i>	1	PA
PHYTONADIONE (VITAMIN K1) INJECTION SYRINGE	2	PA
<i>phytonadione (vitamin k1) oral</i>	1	PA; QL (99 per 99 days)
<i>prasugrel</i>	1	
PROFILNINE	5	PA
PROMACTA	5	PA; LA
RIASTAP	5	PA
ROCTAVIAN	5	PA
SEVENFACT	5	PA
TAVALISSE	5	PA; LA; QL (99 per 99 days)
TRETTEN	5	PA
<i>vitamin k</i>	1	PA
<i>vitamin k1</i>	1	PA
VONVENDI	5	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>warfarin</i>	1	
WILATE	5	PA
XARELTO	2	PA
XARELTO DVT-PE TREAT 30D START	2	PA
XYNTHA	5	PA
XYNTHA SOLOFUSE	5	PA
ZONTIVITY	3	PA

LIPID/CHOLESTEROL LOWERING AGENTS

<i>amlodipine-atorvastatin</i>	1	QL (99 per 99 days)
<i>atorvastatin oral tablet 10 mg, 20 mg</i>	1	ACA; QL (99 per 99 days)
<i>atorvastatin oral tablet 40 mg, 80 mg</i>	1	QL (99 per 99 days)
CADUET	3	ST; QL (99 per 99 days)
<i>cholestyramine (with sugar)</i>	1	
<i>cholestyramine light</i>	1	
<i>colesevelam</i>	1	
COLESTID	3	ST
<i>colestipol</i>	1	
EVKEEZA	6	PA
<i>ezetimibe</i>	1	ST
<i>ezetimibe-simvastatin</i>	1	QL (99 per 99 days)
<i>fenofibrate</i>	1	
<i>fenofibrate micronized</i>	1	
<i>fenofibrate nanocrystallized</i>	1	
<i>fenofibric acid</i>	1	

Drug Name	Drug Tier	Requirements / Limits
FIBRICOR	3	ST
FLOLIPID	3	ST; QL (99 per 99 days)
<i>fluvastatin</i>	1	ACA; QL (99 per 99 days)
<i>gemfibrozil</i>	1	
<i>icosapent ethyl</i>	1	PA
JUXTAPID	5	PA; LA
LESCOL XL	3	ST; QL (99 per 99 days)
LIVALO	3	ST; QL (99 per 99 days)
LOPID	3	
<i>lovastatin</i>	1	ACA; QL (99 per 99 days)
NEXLETOL	2	PA
NEXLIZET	2	PA
<i>niacin</i>	1	
NIACOR	3	
<i>omega-3 acid ethyl esters</i>	1	PA
<i>pitavastatin calcium</i>	1	ACA; QL (99 per 99 days)
<i>pravastatin</i>	1	ACA; QL (99 per 99 days)
<i>prevalite</i>	1	
QUESTRAN	3	ST
QUESTRAN LIGHT	3	ST
REPATHA PUSHTRONEX	2	PA
REPATHA SURECLICK	2	PA
REPATHA SYRINGE	2	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>rosuvastatin oral tablet 10 mg, 5 mg</i>	1	ACA; QL (99 per 99 days)
<i>rosuvastatin oral tablet 20 mg, 40 mg</i>	1	QL (99 per 99 days)
ROSZET	3	ST; QL (99 per 99 days)
<i>simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	1	ACA; QL (99 per 99 days)
<i>simvastatin oral tablet 80 mg</i>	1	QL (99 per 99 days)
VASCEPA	2	PA
ZYPITAMAG	3	ST; QL (99 per 99 days)

MISCELLANEOUS CARDIOVASCULAR AGENTS

CAMZYOS	5	PA; QL (99 per 99 days)
ENTRESTO	2	QL (99 per 99 days)
ENTRESTO SPRINKLE	2	QL (99 per 99 days)
<i>ivabradine</i>	1	PA
<i>ranolazine</i>	1	
VERQUVO	2	QL (99 per 99 days)
VYNDAMAX	5	PA
VYNDAQEL	5	PA

NITRATES

GONITRO	3	
ISORDIL	3	
ISORDIL TITRADOSE	3	
<i>isosorbide dinitrate</i>	1	
<i>isosorbide mononitrate</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>nitro-bid</i>	1	
NITRO-DUR	3	
<i>nitroglycerin</i>	1	
NITROLINGUAL	3	
NITROMIST	3	
NITROSTAT	3	
<i>nitro-time</i>	1	

DERMATOLOGICALS/TOPICAL THERAPY

ANTIPSORIATIC / ANTISEBORRHEIC

<i>acitretin</i>	1	
ANALPRAM-HC	3	ST
<i>calcipotriene</i>	1	QL (99 per 99 days)
<i>calcipotriene-betamethasone topical ointment</i>	1	ST; QL (99 per 99 days)
<i>calcipotriene-betamethasone topical suspension</i>	1	QL (99 per 99 days)
<i>calcitriol</i>	1	
ENSTILAR	2	ST; QL (99 per 99 days)
EPIFOAM	3	ST
<i>hydrocortisone-pramoxine</i>	1	ST
OVACE	3	
OVACE PLUS	3	
OVACE PLUS SHAMPOO	3	
OVACE PLUS WASH	3	
PLEXION NS	3	
PRAMOSONE	3	ST

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Drug Name	Drug Tier	Requirements / Limits
<i>selenium sulfide</i>	1	
SKYRIZI	5	PA; QL (99 per 99 days)
SOTYKTU	5	PA; QL (99 per 99 days)
SPEVIGO INTRAVENOUS	5	PA
SPEVIGO SUBCUTANEOUS	6	PA
STELARA INTRAVENOUS	6	PA
STELARA SUBCUTANEOUS	5	PA; QL (99 per 99 days)
<i>sulfacetamide sodium</i>	1	
TACLONEX	3	QL (99 per 99 days)
TALTZ AUTOINJECTOR	5	PA; QL (99 per 99 days)
TALTZ AUTOINJECTOR (2 PACK)	5	PA; QL (99 per 99 days)
TALTZ AUTOINJECTOR (3 PACK)	5	PA; QL (99 per 99 days)
TALTZ SYRINGE SUBCUTANEOUS SYRINGE 20 MG/0.25 ML, 40 MG/0.5 ML	5	PA
TALTZ SYRINGE SUBCUTANEOUS SYRINGE 80 MG/ML	5	PA; QL (99 per 99 days)
TERSI FOAM	3	
TREMFYA	5	PA; QL (99 per 99 days)
VECTICAL	3	

Drug Name	Drug Tier	Requirements / Limits
VTAMA	3	ST; QL (99 per 99 days)
WYNZORA	3	ST; QL (99 per 99 days)
ZORYVE	3	ST; QL (99 per 99 days)
BURN THERAPY		
SILVADENE	3	
<i>silver sulfadiazine</i>	1	
<i>ssd</i>	1	
MISCELLANEOUS DERMATOLOGICALS		
ADBRY	5	PA; QL (99 per 99 days)
AMELUZ	3	
<i>ammonium lactate</i>	1	
CANTHARIDIN IN ACETONE	3	
CIBINQO	5	PA; QL (99 per 99 days)
CORTANE-B	3	
<i>doxepin</i>	1	ST; QL (99 per 99 days)
DUPIXENT PEN	5	PA; QL (99 per 99 days)
DUPIXENT SYRINGE	5	PA; QL (99 per 99 days)
EFUDEX	3	
EUCRISA	2	ST; QL (99 per 99 days)
FLUOROPLEX	3	
<i>fluorouracil</i>	1	
HYFTOR	6	PA
IODOFLEX	3	
IODOSORB	3	

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Drug Name	Drug Tier	Requirements / Limits
LEVULAN	3	
<i>methoxsalen</i>	1	
<i>methyl salicylate</i>	1	
OPZELURA	3	PA; QL (99 per 99 days)
PANRETIN	3	PA
<i>pimecrolimus</i>	1	ST; QL (99 per 99 days)
<i>podofilox topical gel</i>	1	ST; QL (99 per 99 days)
<i>podofilox topical solution</i>	1	
<i>prudoxin</i>	1	ST; QL (99 per 99 days)
REGRANEX	2	QL (99 per 99 days)
SCENESSE	6	PA
<i>tacrolimus</i>	1	ST; QL (99 per 99 days)
TOLAK	3	
VALCHLOR	5	PA
VYJUVEK	6	PA
<i>wintergreen oil</i>	1	
YCANTH	6	
ZONALON	3	ST; QL (99 per 99 days)
THERAPY FOR ACNE		
ABSORICA	3	
<i>acutane</i>	1	
ACZONE	3	ST
<i>adapalene-benzoyl peroxide</i>	1	
AKLIEF	3	ST
ALTRENO	3	
<i>amnesteem</i>	1	

Drug Name	Drug Tier	Requirements / Limits
AMZEEQ	3	ST
ARAZLO	3	PA
<i>avar</i>	1	
AVAR LS	3	ST
<i>azelaic acid</i>	1	
AZELEX	3	ST
BENZAMYCIN	3	ST
<i>benzebro</i>	1	
BENZEPRO (MICROSPHERES)	3	ST
<i>benzoyl peroxide</i>	1	
<i>bp 10-1</i>	1	ST
<i>brimonidine</i>	1	PA
<i>claravis</i>	1	
CLEOCIN T	3	ST; QL (99 per 99 days)
<i>clindacin</i>	1	QL (99 per 99 days)
CLINDACIN ETZ TOPICAL KIT	3	ST
<i>clindacin etz topical swab</i>	1	
<i>clindacin p</i>	1	
CLINDACIN PAC	3	ST
<i>clindamycin phosphate topical foam</i>	1	QL (99 per 99 days)
<i>clindamycin phosphate topical gel</i>	1	QL (99 per 99 days)
<i>clindamycin phosphate topical gel, once daily</i>	1	ST; QL (99 per 99 days)
<i>clindamycin phosphate topical lotion</i>	1	QL (99 per 99 days)

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Drug Name	Drug Tier	Requirements / Limits
<i>clindamycin phosphate topical solution</i>	1	QL (99 per 99 days)
<i>clindamycin phosphate topical swab</i>	1	
<i>clindamycin-benzoyl peroxide</i>	1	
<i>clindamycin-tretinoin</i>	1	
<i>dapsone</i>	1	
EPIDUO FORTE	3	ST
EPSOLAY	3	ST
<i>ery pads</i>	1	
<i>erygel</i>	1	
<i>erythromycin with ethanol</i>	1	
<i>erythromycin-benzoyl peroxide</i>	1	
EVOCLIN	3	ST; QL (99 per 99 days)
FINACEA	2	ST
<i>isotretinoin</i>	1	
<i>ivermectin</i>	1	QL (99 per 99 days)
METROCREAM	3	ST
METROGEL	3	ST
<i>metronidazole</i>	1	
MIRVASO	2	PA
<i>neuac</i>	1	
NEUAC KIT	3	ST
ONEXTON	3	ST
PACNEX	3	ST
PLEXION	3	ST

Drug Name	Drug Tier	Requirements / Limits
PLEXION CLEANSING CLOTHS	3	ST
PR BENZOYL PEROXIDE	3	ST
RETIN-A	3	
RETIN-A MICRO PUMP	3	
RHOFADE	3	PA
<i>rosadan topical cream</i>	1	
<i>rosadan topical gel</i>	1	
ROSADAN TOPICAL KIT, CLEANSER AND GEL	3	ST
ROSADAN TOPICAL KIT, CLEANSER AND CREAM	3	ST
ROSULA	3	ST
<i>rosula cleansing cloths</i>	1	
SOOLANTRA	3	ST; QL (99 per 99 days)
<i>sss 10-5</i>	1	
<i>sulfacetamide sodium-sulfur</i>	1	
<i>sulfacleanse 8-4</i>	1	ST
SUMADAN	3	ST
SUMADAN XLT	3	ST
SUMAXIN	3	ST
SUMAXIN CP	3	ST
SUMAXIN TS	3	ST
<i>tazarotene</i>	1	PA
<i>tretinoin</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>tretinoin microspheres</i>	1	
TWYNEO	3	ST
VANOXIDE-HC	3	ST
<i>zenatane</i>	1	
ZIANA	3	ST
TOPICAL ANESTHETICS		
COCAINE	3	
<i>dermacinrx lidocaine</i>	1	ST
GOPRELTO	3	
<i>lidocaine hcl</i>	1	
<i>lidocaine hcl-hydrocortison ac</i>	1	
<i>lidocaine topical adhesive patch,medicated</i>	1	ST
<i>lidocaine topical ointment</i>	1	QL (99 per 99 days)
<i>lidocaine viscous</i>	1	
<i>lidocaine-prilocaine topical cream</i>	1	QL (99 per 99 days)
<i>lidocaine-prilocaine topical kit</i>	1	
<i>lidocaine iii</i>	1	ST
<i>lidocaine iv</i>	1	ST
<i>lidocaine v</i>	1	ST
<i>lidocort</i>	1	
NUMBRINO	3	
NYNUTEY	3	
<i>tridacaine ii</i>	1	ST
XARACOLL	3	
ZTLIDO	2	ST
TOPICAL ANTIBACTERIALS		

Drug Name	Drug Tier	Requirements / Limits
ALTABAX	3	ST; QL (99 per 99 days)
CENTANY	3	ST; QL (99 per 99 days)
CENTANY AT	3	ST; QL (99 per 99 days)
<i>gentamicin</i>	1	QL (99 per 99 days)
KLARON	3	ST
<i>lugols</i>	1	
<i>mafenide acetate</i>	1	
<i>mupirocin</i>	1	QL (99 per 99 days)
NEO-SYNALAR	3	
NEO-SYNALAR KIT	3	
<i>strong iodine</i>	1	
<i>sulfacetamide sodium (acne)</i>	1	
SULFAMYLON	2	
XEPI	3	ST; QL (99 per 99 days)
TOPICAL ANTIFUNGALS		
CICLODAN KIT TOPICAL COMBO PACK	3	
CICLODAN KIT TOPICAL SOLUTION	3	ST
<i>ciclodan topical cream</i>	1	QL (99 per 99 days)
<i>ciclodan topical solution</i>	1	
<i>ciclopirox topical cream</i>	1	QL (99 per 99 days)
<i>ciclopirox topical gel</i>	1	QL (99 per 99 days)

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Drug Name	Drug Tier	Requirements / Limits
<i>ciclopirox topical shampoo</i>	1	QL (99 per 99 days)
<i>ciclopirox topical solution</i>	1	
<i>ciclopirox topical suspension</i>	1	QL (99 per 99 days)
<i>ciclopirox-ure-camph-menth-euc</i>	1	
<i>clotrimazole</i>	1	QL (99 per 99 days)
<i>clotrimazole-betamethasone</i>	1	QL (99 per 99 days)
<i>econazole</i>	1	QL (99 per 99 days)
EXELDERM	3	QL (99 per 99 days)
EXTINA	3	ST; QL (99 per 99 days)
JUBLIA	3	ST
<i>ketconazole topical cream</i>	1	QL (99 per 99 days)
<i>ketconazole topical foam</i>	1	ST; QL (99 per 99 days)
<i>ketconazole topical shampoo</i>	1	QL (99 per 99 days)
<i>ketodan</i>	1	ST; QL (99 per 99 days)
<i>ketodan kit</i>	1	ST
<i>klayesta</i>	1	QL (99 per 99 days)
LOPROX (AS OLAMINE)	3	QL (99 per 99 days)
LOPROX KIT	3	QL (99 per 99 days)
<i>naftifine</i>	1	QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
NAFTIN	3	QL (99 per 99 days)
<i>nyamyc</i>	1	QL (99 per 99 days)
<i>nystatin</i>	1	QL (99 per 99 days)
<i>nystatin-triamcinolone</i>	1	QL (99 per 99 days)
<i>nystop</i>	1	QL (99 per 99 days)
<i>oxiconazole</i>	1	QL (99 per 99 days)
<i>tavaborole</i>	1	ST
TOPICAL ANTIVIRALS		
<i>acyclovir</i>	1	PA; QL (99 per 99 days)
DENAVIR	3	
<i>peniclovir</i>	1	
ZOVIRAX	3	PA; QL (99 per 99 days)
TOPICAL CORTICOSTEROIDS		
<i>ala-cort</i>	1	
ALA-SCALP	3	ST
<i>alclometasone</i>	1	
<i>amcinonide</i>	1	ST
<i>apexicon e</i>	1	ST
<i>beser</i>	1	ST
<i>betamethasone dipropionate</i>	1	
<i>betamethasone valerate topical cream</i>	1	
<i>betamethasone valerate topical foam</i>	1	ST

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Drug Name	Drug Tier	Requirements / Limits
<i>betamethasone valerate topical lotion</i>	1	
<i>betamethasone valerate topical ointment</i>	1	
<i>betamethasone, augmented</i>	1	
BRYHALI	3	ST
CAPEX	3	ST
<i>clobetasol scalp</i>	1	QL (99 per 99 days)
<i>clobetasol topical cream</i>	1	QL (99 per 99 days)
<i>clobetasol topical foam</i>	1	ST; QL (99 per 99 days)
<i>clobetasol topical gel</i>	1	QL (99 per 99 days)
<i>clobetasol topical lotion</i>	1	ST; QL (99 per 99 days)
<i>clobetasol topical ointment</i>	1	QL (99 per 99 days)
<i>clobetasol topical shampoo</i>	1	ST; QL (99 per 99 days)
<i>clobetasol topical spray, non-aerosol</i>	1	ST; QL (99 per 99 days)
<i>clobetasol-emollient topical cream</i>	1	QL (99 per 99 days)
<i>clobetasol-emollient topical foam</i>	1	ST; QL (99 per 99 days)
CLOBEX	3	ST; QL (99 per 99 days)
<i>clocortolone pivalate</i>	1	
<i>clodan</i>	1	ST; QL (99 per 99 days)
CLODAN KIT	3	ST; QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
CORDRAN	3	ST; QL (99 per 99 days)
CORDRAN TAPE LARGE ROLL	3	ST
DERMA- SMOOTHE/FS BODY OIL	3	ST
DERMA- SMOOTHE/FS SCALP OIL	3	ST
<i>desonide topical cream</i>	1	
<i>desonide topical gel</i>	1	ST
<i>desonide topical lotion</i>	1	ST
<i>desonide topical ointment</i>	1	
<i>desoximetasone</i>	1	ST
<i>diflorasone</i>	1	ST; QL (99 per 99 days)
DIPROLENE (AUGMENTED)	3	ST
DUOBRII	3	ST; QL (99 per 99 days)
<i>fluocinolone</i>	1	
<i>fluocinolone and shower cap</i>	1	
<i>fluocinonide</i>	1	QL (99 per 99 days)
<i>fluocinonide-e</i>	1	QL (99 per 99 days)
<i>flurandrenolide</i>	1	ST; QL (99 per 99 days)
<i>fluticasone propionate topical cream</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>fluticasone propionate topical lotion</i>	1	ST
<i>fluticasone propionate topical ointment</i>	1	
<i>halcinonide</i>	1	ST
<i>halobetasol propionate topical cream</i>	1	
<i>halobetasol propionate topical foam</i>	1	ST
<i>halobetasol propionate topical ointment</i>	1	
HALOG	3	ST
<i>hydrocortisone</i>	1	
<i>hydrocortisone butyrate topical cream</i>	1	QL (99 per 99 days)
<i>hydrocortisone butyrate topical lotion</i>	1	ST; QL (99 per 99 days)
<i>hydrocortisone butyrate topical ointment</i>	1	ST; QL (99 per 99 days)
<i>hydrocortisone butyrate topical solution</i>	1	ST; QL (99 per 99 days)
<i>hydrocortisone valerate</i>	1	
KENALOG	3	ST; QL (99 per 99 days)
<i>mometasone</i>	1	
NUCORT	3	ST
OLUX	3	ST; QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
PANDEL	3	ST
<i>prednicarbate</i>	1	
PROCTOCORT	3	ST
<i>scalacort</i>	1	
SCALACORT DK	3	ST
SYNALAR	3	ST
SYNALAR CREAM KIT	3	ST
SYNALAR OINTMENT KIT	3	ST
SYNALAR TS	3	ST
TEXACORT	3	ST
TOPICORT	3	ST
<i>tovet emollient</i>	1	ST; QL (99 per 99 days)
<i>triamcinolone acetonide topical aerosol</i>	1	ST; QL (99 per 99 days)
<i>triamcinolone acetonide topical cream</i>	1	
<i>triamcinolone acetonide topical lotion</i>	1	
<i>triamcinolone acetonide topical ointment 0.025 %, 0.1 %, 0.5 %</i>	1	
<i>triamcinolone acetonide topical ointment 0.05 %</i>	1	ST
<i>triderm topical cream 0.1 %</i>	1	
<i>triderm topical cream 0.5 %</i>	1	ST
TOPICAL ENZYMES		
NEXOBRID	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
SANTYL	2	QL (99 per 99 days)
TOPICAL SCABICIDES / PEDICULICIDES		
<i>crotan</i>	1	
ELIMITE	3	
EURAX	3	
<i>malathion</i>	1	
OVIDE	3	
<i>permethrin</i>	1	
<i>spinosad</i>	1	
ULESFIA	3	
DIAGNOSTICS & MISCELLANEOUS AGENTS		
IRRIGATING SOLUTIONS		
<i>lactated ringers</i>	1	
<i>neomycin-polymyxin b gu</i>	1	
PHYSIOLYTE	3	
PHYSIOSOL IRRIGATION	3	
<i>ringer's</i>	1	
SORBITOL	3	
SORBITOL-MANNITOL	3	
<i>tis-u-sol pentalyte</i>	1	
MISCELLANEOUS AGENTS		
<i>acamprosate</i>	1	
<i>acetic acid</i>	1	
AGRYLIN	3	
<i>anagrelide</i>	1	
ARALAST NP	5	PA; LA
BUPHENYL	6	PA

Drug Name	Drug Tier	Requirements / Limits
<i>caffeine citrate</i>	1	
CARBAGLU	5	PA; LA
<i>carglumic acid</i>	4	PA
CARNITOR	3	
CARNITOR (SUGAR-FREE)	3	
<i>cevimeline</i>	1	
CHEMET	2	PA
<i>deferasirox</i>	4	PA
<i>deferiprone</i>	4	PA
<i>disulfiram</i>	1	
<i>droxidopa</i>	6	PA
EMPAVELI	5	PA
ENDARI	6	PA
ENJAYMO	5	PA
EVOXAC	3	
EXSERVAN	6	PA
FABHALTA	5	PA
FERRIPROX (2 TIMES A DAY)	5	PA
FERRIPROX ORAL SOLUTION	5	PA
FERRIPROX ORAL TABLET	6	PA
GIVLAARI	6	PA
GLASSIA	5	PA; LA
<i>glutamine (sickle cell)</i>	4	PA
INCRELEX	5	PA; LA
JOENJA	6	PA; QL (99 per 99 days)
KORSUVA	6	
LAMZEDE	5	PA
<i>levocarnitine</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>levocarnitine (with sugar)</i>	1	
LITFULO	6	PA; QL (99 per 99 days)
LITHOSTAT	3	
METOPIRONE	3	
<i>midodrine</i>	1	
<i>nitisinone</i>	4	PA; LA
NITYR	5	PA; LA
OLPRUVA	6	PA
ORFADIN	6	PA; LA
PHEBURANE	5	PA
<i>pilocarpine hcl</i>	1	
PROLASTIN-C	5	PA; LA
PYRUKYND	6	PA; LA; QL (99 per 99 days)
RADIOGARDASE	3	
RECLAST	6	PA
REVCOVI	5	PA; LA
REZDIFFRA	5	PA; QL (99 per 99 days)
RILUTEK	3	PA
<i>riluzole</i>	1	PA
<i>risedronate</i>	1	QL (99 per 99 days)
SALAGEN (PILOCARPINE)	3	
<i>sodium chloride 0.9 %</i>	1	PA
<i>sodium chloride injection</i>	1	PA
<i>sodium chloride irrigation</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>sodium phenylbutyrate</i>	1	PA
SOHONOS	6	PA; LA; QL (99 per 99 days)
SOLIRIS	5	PA
SYPRINE	3	PA
TEGLUTIK	6	PA
THIOLA EC	6	PA
TIGLUTIK	6	PA
<i>tiopronin</i>	4	PA
<i>trientine</i>	1	PA
ULTOMIRIS	6	PA
VEOPOZ	6	PA
VOYDEYA	5	PA
<i>water for irrigation, sterile</i>	1	
XENPOZYME	5	PA
XURIDEN	5	PA
ZEMAIRA	5	PA; LA
ZOKINVY	6	PA; QL (99 per 99 days)
<i>zoledronic acid-mannitol-water</i>	4	PA
ZYNRELEF	3	
SMOKING DETERRENENTS		
<i>bupropion hcl (smoking deter)</i>	1	ACA
CHANTIX	3	ACA
CHANTIX CONTINUING MONTH BOX	3	ACA
CHANTIX STARTING MONTH BOX	3	ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
NICODERM CQ	2	ACA; OTC
NICORETTE BUCCAL GUM 2 MG	2	ACA; OTC
<i>nicorette buccal gum 4 mg</i>	1	ACA; OTC
NICORETTE BUCCAL LOZENGE	2	ACA; OTC
NICORETTE BUCCAL MINI LOZENGE	2	ACA; OTC
<i>nicotine</i>	1	ACA; OTC
<i>nicotine (polacrilex)</i>	1	ACA; OTC
NICOTROL NS	3	ACA
<i>quit 2</i>	1	ACA; OTC
<i>quit 4</i>	1	ACA; OTC
<i>stop smoking aid</i>	1	ACA; OTC
<i>varenicline</i>	1	ACA

EAR, NOSE & THROAT MEDICATIONS

MISCELLANEOUS AGENTS

ARESTIN	6	PA
<i>azelastine nasal spray, non-aerosol 137 mcg (0.1 %)</i>	1	QL (99 per 99 days)
<i>azelastine nasal spray, non-aerosol 205.5 mcg (0.15 %)</i>	1	
GELCLAIR	3	
GELX	3	
<i>ipratropium bromide</i>	1	QL (99 per 99 days)
<i>kourzeq</i>	1	
MUGARD	6	

Drug Name	Drug Tier	Requirements / Limits
<i>olopatadine</i>	1	QL (99 per 99 days)
<i>oralone</i>	1	
ORAMAGICRX	3	
PATANASE	3	QL (99 per 99 days)
<i>pilocarpine hcl</i>	1	
PROTHELIAL	6	PA
SALAGEN (PILOCARPINE)	3	
<i>triamcinolone acetonide</i>	1	

MISCELLANEOUS OTIC PREPARATIONS

<i>acetic acid</i>	1	
<i>ciprofloxacin hcl</i>	1	
DERMOTIC OIL	3	
<i>flac otic oil</i>	1	
<i>fluocinolone acetonide oil</i>	1	
<i>hydrocortisone-acetic acid</i>	1	
<i>ofloxacin</i>	1	

OTIC STEROID / ANTIBIOTIC

<i>ciprofloxacin-dexamethasone</i>	1	
CORTISPORIN-TC	3	
<i>neomycin-polymyxin-hc</i>	1	
OTOVEL	3	

ENDOCRINE/DIABETES

ADRENAL HORMONES

ACTHAR	6	PA
ACTHAR SELFJECT	6	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
CORTEF	3	
<i>cortisone</i>	1	
<i>deflazacort</i>	4	PA
<i>dexabliss</i>	1	PA
<i>dexamethasone intensol</i>	1	
<i>dexamethasone oral elixir</i>	1	
<i>dexamethasone oral solution</i>	1	
<i>dexamethasone oral tablet</i>	1	
<i>dexamethasone oral tablets, dose pack</i>	1	PA
<i>fludrocortisone</i>	1	
<i>hydrocortisone</i>	1	
MEDROL	3	
MEDROL (PAK)	3	
<i>methylprednisolone</i>	1	
<i>millipred</i>	1	
<i>millipred dp</i>	1	
ORAPRED ODT	3	
<i>prednisolone</i>	1	
<i>prednisolone sodium phosphate</i>	1	
<i>prednisone</i>	1	
<i>prednisone intensol</i>	1	
RAYOS	3	PA
TAPERDEX	3	PA
TARPEYO	6	PA; QL (99 per 99 days)
TRIESENCE (PF)	3	
XIPERE (PF)	6	
ZCORT	3	PA

Drug Name	Drug Tier	Requirements / Limits
ANTITHYROID AGENTS		
<i>methimazole</i>	1	
<i>potassium iodide</i>	1	
<i>propylthiouracil</i>	1	
SSKI	3	
BLOOD GLUCOSE MONITORING DEVICES & SUPPLIES		
FREESTYLE INSULINX	2	OTC
FREESTYLE INSULINX TEST STRIPS	2	OTC
FREESTYLE LITE STRIPS	2	OTC
FREESTYLE PRECISION NEO STRIPS	2	OTC
FREESTYLE TEST	2	OTC
ONETOUCH ULTRA TEST	2	OTC
ONETOUCH VERIO TEST STRIPS	2	OTC
PRECISION XTRA TEST	2	OTC
DIABETES, SUPPLIES, & DURABLE MEDICAL EQUIPMENT		
ACE AEROSOL CLOUD ENHANCER	2	
AEROCHAMBER MECHANICAL VENT	2	
AEROCHAMBER MINI	2	
AEROCHAMBER PLUS FLOW-VU	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
AEROCHAMBER PLUS Z STAT	2	
AEROTRACH PLUS	2	
AEROVENT PLUS	2	
BREATHERITE MDI SPACER	2	
COMPACT SPACE CHAMBER	2	
EASIVENT HOLDING CHAMBER	2	
FLEXICHAMBER	2	
GLUCAGON HCL	3	
LITEAIRE MDI CHAMBER	2	
MICROCHAMBER	2	
MICROSPACER	2	
OPTICHAMBER DIAMOND VHC	2	
POCKET CHAMBER	2	
PRIMEAIRE	2	
PROCHAMBER	2	
RITEFLO AEROCHAMBER	2	
SPACE CHAMBER	2	
VORTEX HOLDING CHAMBER	2	
GLUCOSE ELEVATING AGENTS		
BAQSIMI	2	QL (99 per 99 days)
<i>diazoxide</i>	1	
<i>glucagon emergency kit (human)</i>	1	QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
GVOKE	2	QL (99 per 99 days)
GVOKE HYPOPEN 2-PACK	2	QL (99 per 99 days)
GVOKE PFS 2-PACK SYRINGE	2	QL (99 per 99 days)
PROGLYCEM	3	
INSULIN SYRINGES/MISCELLANEOUS DURABLE MEDICAL EQU		
ACCU-CHEK GUIDE L1-L2 CTRL SOL	3	OTC
ACCU-CHEK SMARTVIEW CONTRL SOL	3	OTC
ACCUTREND GLUCOSE CONTROL	3	OTC
ADVOCATE REDI-CODE PLUS CTRL L	3	OTC
AGAMATRIX CONTROL HIGH	3	OTC
ASSURE 4 CONTROL SOLUTION	3	OTC
ASSURE DOSE NORMAL CONTROL	3	OTC
ASSURE PRISM CONTROL 1-2 SOLN	3	OTC
AT HOME A1C	3	OTC
BD INTEGRA NEEDLE	2	
BD MICROTAINER LANCET	2	OTC

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
BD SPECIALTY USE NEEDLES	2	
BD ULTRA-FINE NANO PEN NEEDLE	2	OTC
BLOOD GLUCOSE CONTROL, NORMAL	3	OTC
BREEZE 2 CONTROL SOLUTION,HIGH	3	OTC
CARESENS CONTROL A AND B	3	OTC
CARETOUCH CONTROL SOLN L2-L3	3	OTC
CEQR SIMPLICITY	2	
CLEVER CHOICE LEVEL 2 CONTROL	3	OTC
CONTOUR CONTROL SOLUTION, NML	3	OTC
CONTOUR NEXT LEV 2 CONTROL SOL	3	OTC
DEXCOM G6 RECEIVER	DME	ST; QL (99 per 99 days)
DEXCOM G6 SENSOR	DME	ST; QL (99 per 99 days)
DEXCOM G6 TRANSMITTER	DME	ST; QL (99 per 99 days)
DEXCOM G7 RECEIVER	DME	ST; QL (99 per 99 days)
DEXCOM G7 SENSOR	DME	ST; QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
DIATRUE CONTROL SOLN NORMAL	3	OTC
EASY PLUS II HIGH CONTROL	3	OTC
EASY STEP HIGH CONTROL SOLN	3	OTC
EASY TALK HIGH CONTROL	3	OTC
EASY TALK PLUS II LOW CONTROL	3	OTC
EASY TOUCH BLU CTRL SOLN-L1,L3	3	OTC
EASY TRAK II CTRL SOLN-NORMAL	3	OTC
EASY TRAK LOW CONTROL	3	OTC
EASYMAX 15 LEVEL 2	3	OTC
EASYMAX NORMAL CONTROL	3	OTC
ELEMENT COMPACT NORMAL CONTROL	3	OTC
ELEMENT NORMAL CONTROL	3	OTC
EMBRACE EVO LEVEL 1	3	OTC
EMBRACE GLUCOSE CONTROL LOW	3	OTC
EMBRACE TALK CONTROL-LOW (L1)	3	OTC

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
EVERSENSE E3 SENSOR-HOLDER	DME	ST
EVERSENSE E3 SMART TRANSMITTER	DME	ST; QL (99 per 99 days)
EVOLUTION NORMAL CONTROL	3	OTC
FORA 6 CONNECT MULTIFUNCTN MTR	3	OTC
FORA GTEL MULTI-FUNCTN MONITOR	3	OTC
FORA KETONE CONTROL SOLN-L1	3	OTC
FORA NORMAL CONTROL	3	OTC
FORA TN'G ADV MOBILE MULTI MTR	3	OTC
FORA TN'G ADVANCE MULTI-FN MTR	3	OTC
FORA TN'G ADVANCE PRO MONITOR	3	OTC
FORACARE GDH LOW CONTROL	3	OTC
FREESTYLE CONTROL	2	OTC
FREESTYLE FREEDOM	2	OTC
FREESTYLE FREEDOM LITE	2	OTC
FREESTYLE INSULINX	2	OTC

Drug Name	Drug Tier	Requirements / Limits
FREESTYLE LIBRE 14 DAY READER	DME	ST
FREESTYLE LIBRE 14 DAY SENSOR	DME	ST; QL (99 per 99 days)
FREESTYLE LIBRE 2 READER	DME	ST
FREESTYLE LIBRE 2 SENSOR	DME	ST; QL (99 per 99 days)
FREESTYLE LIBRE 3 PLUS SENSOR	DME	ST
FREESTYLE LIBRE 3 READER	DME	ST; QL (99 per 99 days)
FREESTYLE LIBRE 3 SENSOR	DME	ST; QL (99 per 99 days)
FREESTYLE LITE METER	2	OTC
GE100 CONTROL SOLUTION NORMAL	3	OTC
GENTEEL VACUUM LANCING DEVICE	3	OTC
GLUCOCARD 01 NORMAL CONTROL	3	OTC
GLUCOCOM CONTROL NORMAL	3	OTC
GLUCOSE CONTROL	3	OTC
GOJJI GLUCOSE CNTRL SOL-NORMAL	3	OTC
GOJJI KETONE CONTROL SOLN-L1	3	OTC

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
GOJJI MULTI-FUNCTIONAL METER	3	OTC
GUARDIAN 4 GLUCOSE SENSOR	DME	ST; QL (99 per 99 days)
GUARDIAN 4 TRANSMITTER	DME	ST; QL (99 per 99 days)
GUARDIAN CONNECT TRANSMITTER	DME	ST; QL (99 per 99 days)
GUARDIAN LINK 3 TRANSMITTER	DME	ST; QL (99 per 99 days)
GUARDIAN SENSOR 3	DME	ST; QL (99 per 99 days)
HEALTHPRO HIGH-LOW CONTROL	3	OTC
INFINITY CONTROL SOLUTION NORM	3	OTC
LANCETS	2	OTC
LANCING DEVICE	2	OTC
MEDISENSE	2	OTC
MEDISENSE GLUCOSE KETONE	2	OTC
MYGLUCOHEALTH CONTROL SOLUTION	3	OTC
NOVA MAX PLUS GLUC-KETON METER	3	OTC
NOVAMAX PLUS GLU-KET	3	OTC
OMNIPOD 5 G6 INTRO KIT (GEN 5)	2	QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
OMNIPOD 5 G6 PODS (GEN 5)	2	QL (99 per 99 days)
OMNIPOD CLASSIC PODS (GEN 3)	2	PA; QL (99 per 99 days)
OMNIPOD DASH INTRO KIT (GEN 4)	2	QL (99 per 99 days)
OMNIPOD DASH PODS (GEN 4)	2	PA; QL (99 per 99 days)
OMNIPOD GO PODS 10 UNITS/DAY	2	QL (99 per 99 days)
ON CALL EXPRESS CONTROL	3	OTC
ON CALL PLUS CONTROL	3	OTC
ON CALL VIVID CONTROL	3	OTC
ONETOUCH ULTRA CONTROL	2	OTC
ONETOUCH ULTRA2 METER	2	OTC
ONETOUCH VERIO FLEX METER	2	OTC
ONETOUCH VERIO MID CONTROL	2	OTC
ONETOUCH VERIO REFLECT METER	2	OTC
PIP GLUCOSE CONTROL SOLN L1-L2	3	OTC
PRECISION XTRA KETONE-GLUCOSE	2	OTC

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
PRECISION XTRA MONITOR	2	OTC
PRODIGY CONTROL SOLUTION, LOW	3	OTC
PRODIGY CONTROL SOLUTION,HIGH	3	OTC
REFUAH PLUS GLUCOSE CONTROL	3	OTC
RIGHTEST CONTROL SOLUTION HIGH	3	OTC
SMARTEST CONTROL	3	OTC
SOLUS V2 CONTROL SOLUTION,HIGH	3	OTC
TELCARE CONTROL	3	OTC
TRUE METRIX LEVEL 1	3	OTC
UNISTRIP LOW CONTROL	3	OTC
V-GO 20	2	
V-GO 30	2	
V-GO 40	2	
VIVAGUARD INO CTRL SOLN-L1,2,3	3	OTC
WAVESENSE CONTROL SOLUTION	3	OTC
INSULIN THERAPY		
BASAGLAR KWIKPEN U-100 INSULIN	3	

Drug Name	Drug Tier	Requirements / Limits
BASAGLAR TEMPO PEN(U-100)INSLN	3	
HUMALOG JUNIOR KWIKPEN U-100	2	
HUMALOG KWIKPEN INSULIN	2	
HUMALOG MIX 50-50 KWIKPEN	2	
HUMALOG MIX 75-25 KWIKPEN	2	
HUMALOG MIX 75-25(U-100)INSULN	2	
HUMALOG TEMPO PEN(U-100)INSULN	2	
HUMALOG U-100 INSULIN	2	
HUMULIN 70/30 U-100 INSULIN	2	
HUMULIN 70/30 U-100 KWIKPEN	2	
HUMULIN N NPH INSULIN KWIKPEN	2	
HUMULIN N NPH U-100 INSULIN	2	
HUMULIN R REGULAR U-100 INSULN	2	
HUMULIN R U-500 (CONC) INSULIN	2	
HUMULIN R U-500 (CONC) KWIKPEN	2	
INSULIN LISPRO	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
INSULIN LISPRO PROTAMIN-LISPRO	2	
LYUMJEV KWIKPEN U-100 INSULIN	2	
LYUMJEV KWIKPEN U-200 INSULIN	2	
LYUMJEV TEMPO PEN(U-100)INSULN	2	
LYUMJEV U-100 INSULIN	2	
MYXREDLIN	3	
SEMGLEE(INSULIN GLARGINE-YFGN)	2	
SEMGLEE(INSULIN GLARG-YFGN)PEN	2	
SOLIQUA 100/33	2	QL (99 per 99 days)
TOUJEO MAX U-300 SOLOSTAR	2	
TOUJEO SOLOSTAR U-300 INSULIN	2	
TRESIBA FLEXTOUCH U-100	2	
TRESIBA FLEXTOUCH U-200	2	
TRESIBA U-100 INSULIN	2	
MISCELLANEOUS HORMONES		
ALDURAZYME	5	PA

Drug Name	Drug Tier	Requirements / Limits
ANDRODERM	2	PA; QL (99 per 99 days)
BRINEURA	5	PA
<i>cabergoline</i>	1	QL (99 per 99 days)
<i>calcitonin (salmon) injection</i>	1	PA
<i>calcitonin (salmon) nasal</i>	1	
CERDELGA	5	PA; QL (99 per 99 days)
CEREZYME	5	PA
<i>cinacalcet</i>	1	ST
CRYSVITA	5	PA; QL (99 per 99 days)
<i>danazol</i>	1	
DDAVP	3	PA
DEPO-TESTOSTERONE	3	PA
<i>desmopressin injection</i>	4	PA
<i>desmopressin nasal spray, non-aerosol 10 mcg/spray (0.1 ml)</i>	1	PA
DESMOPRESSIN NASAL SPRAY, NON-AEROSOL 150 MCG/SPRAY (0.1 ML)	2	PA
<i>desmopressin oral</i>	1	
<i>doxercalciferol</i>	1	
ELAPRASE	5	PA
ELFABRIO	5	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
GALAFOLD	6	PA; LA; QL (99 per 99 days)
JATENZO	3	PA; QL (99 per 99 days)
<i>javygtor</i>	4	PA
JYNARQUE	6	PA; LA; QL (99 per 99 days)
KANUMA	5	PA
LUMIZYME	5	PA
MEPSEVII	5	PA
METHITEST	2	PA
<i>methyltestosterone</i>	1	PA
MIACALCIN	3	PA
<i>mifepristone</i>	4	PA
<i>miglustat</i>	4	PA; LA; QL (99 per 99 days)
MYALEPT	5	PA; LA
NAGLAZYME	5	PA; LA
NEXVIAZYME	6	PA
NOCDURNA (MEN)	3	PA; QL (99 per 99 days)
NOCDURNA (WOMEN)	3	PA; QL (99 per 99 days)
OPFOLDA	6	PA; QL (99 per 99 days)
ORLISSA	2	ST; QL (99 per 99 days)
PALYNZIQ	5	PA; LA; QL (99 per 99 days)
<i>paricalcitol intravenous</i>	1	PA
<i>paricalcitol oral</i>	1	ST

Drug Name	Drug Tier	Requirements / Limits
POMBILITI	6	PA
RAYALDEE	3	ST
<i>sapropterin</i>	4	PA
SOMAVERT	5	PA
STRENSIQ	5	PA; LA
SYNAREL	2	PA
TEPEZZA	6	PA
TERLIVAZ	6	
TESTOPEL	6	PA
<i>testosterone cypionate</i>	1	PA
<i>testosterone enanthate</i>	1	PA
TESTOSTERONE IMPLANT	3	PA
<i>testosterone transdermal</i>	1	PA; QL (99 per 99 days)
<i>tolvaptan</i>	4	PA; LA; QL (99 per 99 days)
VIMIZIM	5	PA
VOGELXO	3	PA; QL (99 per 99 days)
VOXZOGO	6	PA
XYOSTED	2	PA; QL (99 per 99 days)
ZEMPLAR INTRAVENOUS	3	PA
ZEMPLAR ORAL	3	ST
<i>zoledronic acid</i>	4	PA
<i>zoledronic acid-mannitol-water</i>	4	PA
ZOLEDRONIC AC-MANNITOL-0.9NACL	6	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
NON-INSULIN HYPOGLYCEMIC AGENTS		
<i>acarbose</i>	1	
ACTOPLUS MET	3	ST; QL (99 per 99 days)
ACTOS	3	ST; QL (99 per 99 days)
BYDUREON BCISE	2	ST; QL (99 per 99 days)
BYETTA	2	ST; QL (99 per 99 days)
CYCLOSET	3	
DUETACT	3	ST; QL (99 per 99 days)
FARXIGA	2	ST; QL (99 per 99 days)
<i>glimepiride</i>	1	
<i>glipizide</i>	1	
<i>glipizide-metformin</i>	1	
GLUCOTROL XL	3	
<i>glyburide</i>	1	
<i>glyburide micronized</i>	1	
<i>glyburide-metformin</i>	1	
GLYXAMBI	2	ST; QL (99 per 99 days)
JANUMET	2	QL (99 per 99 days)
JANUMET XR	2	QL (99 per 99 days)
JANUVIA	2	QL (99 per 99 days)
JARDIANCE	2	ST; QL (99 per 99 days)
<i>metformin oral solution</i>	1	ST

Drug Name	Drug Tier	Requirements / Limits
<i>metformin oral tablet</i>	1	
<i>metformin oral tablet extended release 24 hr</i>	1	QL (99 per 99 days)
<i>migliitol</i>	1	
MOUNJARO	2	ST; QL (99 per 99 days)
<i>nateglinide</i>	1	
OSENI	3	QL (99 per 99 days)
OZEMPIC	2	ST; QL (99 per 99 days)
<i>pioglitazone</i>	1	QL (99 per 99 days)
<i>pioglitazone-glimepiride</i>	1	QL (99 per 99 days)
<i>pioglitazone-metformin</i>	1	QL (99 per 99 days)
PRECOSE	3	
<i>repaglinide</i>	1	
RIOMET	3	ST
RYBELSUS	2	ST; QL (99 per 99 days)
<i>saxagliptin</i>	1	QL (99 per 99 days)
<i>saxagliptin-metformin</i>	1	QL (99 per 99 days)
SEGLUROMET	2	ST; QL (99 per 99 days)
STEGLATRO	2	ST; QL (99 per 99 days)
SYMLINPEN 120	2	ST; QL (99 per 99 days)
SYMLINPEN 60	2	ST; QL (99 per 99 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
SYNJARDY	2	ST; QL (99 per 99 days)
SYNJARDY XR	2	ST; QL (99 per 99 days)
TRIJARDY XR	2	ST
TRULICITY	2	ST; QL (99 per 99 days)
XIGDUO XR	2	ST; QL (99 per 99 days)

THYROID HORMONES		
<i>adthyza</i>	1	
ARMOUR THYROID	2	
ERMEZA	3	ST
<i>euthyrox</i>	1	
<i>levo-t</i>	1	
<i>levothyroxine</i>	1	
<i>levoxyl</i>	1	
<i>liothyronine</i>	1	
<i>niva thyroid</i>	1	
<i>np thyroid</i>	1	
<i>thyroid (pork)</i>	1	
<i>unithroid</i>	1	

GASTROENTEROLOGY		
ANTIDIARRHEALS & ANTISPASMODICS		
<i>anaspaz</i>	1	
<i>belladonna alkaloids-opium</i>	1	ST
<i>chlordiazepoxide-clidinium</i>	1	
<i>dicyclomine</i>	1	
<i>diphenoxylate-atropine</i>	1	

Drug Name	Drug Tier	Requirements / Limits
DONNATAL	3	
<i>ed-spaz</i>	1	
<i>glycopyrrolate</i>	1	
<i>hyoscyamine sulfate</i>	1	
<i>hyosyne</i>	1	
LEVBID	3	
LEVSIN	3	
LEVSIN/SL	3	
LOMOTIL	3	
<i>loperamide</i>	1	
<i>methscopolamine</i>	3	
MOTOFEN	3	
NULEV	3	
<i>opium tincture</i>	1	
<i>oscimin</i>	1	
<i>oscimin sl</i>	1	
<i>phenobarb-hyoscy-atropine-scop</i>	1	
<i>phenohydro</i>	1	
ROBINUL	3	
ROBINUL FORTE	3	
SYMAX DUOTAB	3	
<i>symax fastabs</i>	1	
<i>symax-sl</i>	1	
<i>symax-sr</i>	1	

MISCELLANEOUS AGENTS		
AURYXIA	3	
<i>lanthanum</i>	1	QL (99 per 99 days)
LOKELMA	2	QL (99 per 99 days)
RENVELA	3	QL (99 per 99 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>sevelamer carbonate</i>	1	QL (99 per 99 days)
<i>sevelamer hcl</i>	1	QL (99 per 99 days)
<i>sodium polystyrene sulfonate</i>	1	
<i>sps (with sorbitol)</i>	1	
VELPHORO	2	QL (99 per 99 days)
VELTASSA	2	ST; QL (99 per 99 days)

MISCELLANEOUS GASTROINTESTINAL AGENTS

<i>alosetron</i>	1	
<i>alvimopan</i>	1	
ANA-LEX KIT	3	
ANALPRAM-HC RECTAL CREAM 1-1 %	3	
ANALPRAM-HC RECTAL CREAM 2.5-1 %	3	ST
<i>anucort-hc</i>	1	
<i>aprepitant</i>	1	QL (99 per 99 days)
APRISO	3	
AZULFIDINE	3	
AZULFIDINE EN-TABS	3	
<i>balsalazide</i>	1	
<i>betaine</i>	4	PA
<i>budesonide</i>	1	
BYLVAY	6	PA; LA; QL (99 per 99 days)
CHENODAL	5	PA; LA

Drug Name	Drug Tier	Requirements / Limits
CHOLBAM ORAL CAPSULE 250 MG	5	PA
CHOLBAM ORAL CAPSULE 50 MG	5	PA; QL (99 per 99 days)
<i>citrate of magnesia</i>	1	ACA; OTC
<i>citroma</i>	1	ACA; OTC
<i>clearlax</i>	1	ACA; OTC
COLAZAL	3	
COMPAZINE	3	
<i>compro</i>	1	
<i>constulose</i>	1	
CORTENEMA	3	
CREON	2	
<i>cromolyn</i>	1	
<i>dronabinol</i>	1	PA
<i>dulcolax (magnesium hydroxide)</i>	1	ACA; OTC
ENTYVIO	5	PA
<i>enulose</i>	1	
GASTROCROM	3	
GATTEX 30-VIAL	6	PA
<i>gavilax</i>	1	ACA; OTC
<i>gavilyte-c</i>	1	ACA
<i>gavilyte-g</i>	1	ACA
<i>gavilyte-n</i>	1	ACA
<i>generlac</i>	1	
<i>gentle laxative (bisacodyl)</i>	1	ACA; OTC
<i>gentle laxative (mag hydrox)</i>	1	ACA; OTC
<i>gentlelax</i>	1	ACA; OTC
GOLYTELY	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>granisetron hcl</i>	1	QL (99 per 99 days)
<i>hemmorex-hc</i>	1	
<i>hydrocortisone</i>	1	
<i>hydrocortisone acetate</i>	1	
<i>hydrocortisone-pramoxine rectal cream 1-1 %</i>	1	
<i>hydrocortisone-pramoxine rectal cream 2.5-1 %, 2.5-1 % (4g)</i>	1	ST
INFLECTRA	5	PA
KRISTALOSE	3	
<i>lactulose</i>	1	
<i>laxative (bisacodyl)</i>	1	ACA; OTC
<i>laxative peg 3350</i>	1	ACA; OTC
<i>lidocaine hcl-hydrocortison ac rectal cream</i>	1	
LIDOCAINE HCL-HYDROCORTISON AC RECTAL GEL	3	
<i>lidocaine hcl-hydrocortison ac rectal kit</i>	1	
<i>lidocaine-hydrocortisone-aloe</i>	1	
LINZESS	2	QL (99 per 99 days)
LIVMARLI	6	PA
<i>lubiprostone</i>	1	QL (99 per 99 days)
<i>magnesium citrate</i>	1	ACA; OTC
MARINOL	3	PA

Drug Name	Drug Tier	Requirements / Limits
<i>meclizine</i>	1	
<i>mesalamine</i>	1	
<i>mesalamine with cleansing wipe</i>	1	
<i>metoclopramide hcl</i>	1	
<i>milk of magnesia</i>	1	ACA; OTC
<i>milk of magnesia concentrated</i>	1	ACA; OTC
MOVANTIK	2	QL (99 per 99 days)
<i>natura-lax</i>	1	ACA; OTC
<i>nitroglycerin</i>	1	
OCALIVA	5	PA; LA; QL (99 per 99 days)
OMVOH	5	PA
OMVOH PEN	5	PA; QL (99 per 99 days)
<i>ondansetron</i>	1	QL (99 per 99 days)
<i>ondansetron hcl</i>	1	QL (99 per 99 days)
<i>onelax magnesium citrate</i>	1	ACA; OTC
<i>oral saline laxative</i>	1	ACA; OTC
PANCREAZE	2	
<i>peg 3350-electrolytes</i>	1	ACA
<i>peg3350-sod sul-nacl-kcl-asb-c</i>	1	ACA
<i>peg-electrolyte soln</i>	1	ACA
PENTASA ORAL CAPSULE, EXTENDED RELEASE 250 MG	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
PENTASA ORAL CAPSULE, EXTENDED RELEASE 500 MG	3	
<i>phosphate laxative</i>	1	ACA; OTC
<i>polyethylene glycol 3350</i>	1	ACA; OTC
<i>powderlax</i>	1	ACA; OTC
<i>prochlorperazine</i>	1	
<i>prochlorperazine maleate</i>	1	
PROCORT	3	
PROCTOCORT	3	ST
<i>procto-med hc</i>	1	
<i>proctosol hc</i>	1	
<i>proctozone-hc</i>	1	
<i>purelax</i>	1	ACA; OTC
REBYOTA	6	
RECTIV	2	
REGLAN	3	
RELISTOR	2	ST
ROWASA	3	
<i>scopolamine base</i>	1	
SFROWASA	3	
SKYRIZI INTRAVENOUS	5	PA
SKYRIZI SUBCUTANEOUS	5	PA; QL (99 per 99 days)
<i>smoothlax</i>	1	ACA; OTC
<i>sodium,potassium,mag sulfates</i>	1	ACA
SUCRAID	5	PA
<i>sulfasalazine</i>	1	
SYMPROIC	2	

Drug Name	Drug Tier	Requirements / Limits
SYNDROS	3	PA
<i>trimethobenzamide</i>	1	
TRULANCE	2	
UCERIS ORAL	3	
UCERIS RECTAL	2	
URSO FORTE	3	
<i>ursodiol</i>	1	
VARUBI	2	QL (99 per 99 days)
VIBERZI	2	
VIOKACE	2	
VOWST	6	
<i>women's gentle laxative(bisac)</i>	1	ACA; OTC
ZENPEP	2	
ZYMFENTRA	5	PA; QL (99 per 99 days)
ULCER THERAPY		
<i>amoxicil-clarithromy-lansopraz</i>	1	QL (99 per 99 days)
<i>bismuth subcit k-metronidz-ten</i>	1	
<i>cimetidine</i>	1	
<i>cimetidine hcl</i>	1	
CYTOTEC	3	
<i>dexlansoprazole oral capsule,biphase delayed releas 30 mg</i>	1	ST; QL (99 per 99 days)
<i>dexlansoprazole oral capsule,biphase delayed releas 60 mg</i>	1	ST

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>esomeprazole magnesium oral capsule, delayed release(dr/ec)</i>	1	
<i>esomeprazole magnesium oral granules dr for susp in packet 10 mg, 20 mg</i>	1	ST; QL (99 per 99 days)
<i>esomeprazole magnesium oral granules dr for susp in packet 40 mg</i>	1	ST
<i>famotidine</i>	1	
<i>lansoprazole oral capsule, delayed release(dr/ec) 15 mg</i>	1	QL (99 per 99 days)
<i>lansoprazole oral capsule, delayed release(dr/ec) 30 mg</i>	1	
<i>lansoprazole oral tablet, disintegrat, delay rel 15 mg</i>	1	ST; QL (99 per 99 days)
<i>lansoprazole oral tablet, disintegrat, delay rel 30 mg</i>	1	ST
<i>misoprostol</i>	1	
<i>nizatidine</i>	1	
OMECLAMOX-PAK	3	QL (99 per 99 days)
<i>omeprazole oral capsule, delayed release(dr/ec) 10 mg, 20 mg</i>	1	QL (99 per 99 days)
<i>omeprazole oral capsule, delayed release(dr/ec) 40 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>pantoprazole oral tablet, delayed release (dr/ec) 20 mg</i>	1	QL (99 per 99 days)
<i>pantoprazole oral tablet, delayed release (dr/ec) 40 mg</i>	1	
PEPCID	3	
<i>rabeprazole</i>	1	
<i>sucralfate</i>	1	
TALICIA	2	QL (99 per 99 days)
VOQUEZNA	3	ST
VOQUEZNA DUAL PAK	3	
VOQUEZNA TRIPLE PAK	3	

IMMUNOLOGY, VACCINES & BIOTECHNOLOGY

ANTIVIRALS

<i>ribavirin</i>	4	ST
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BIOTECHNOLOGY DRUGS

ARCALYST	6	PA; QL (99 per 99 days)
FULPHILA	5	PA; QL (99 per 99 days)
ILARIS (PF)	5	PA; LA
LEUKINE	5	PA
MOZOBIL	6	PA
NIVESTYM	5	PA
<i>plerixafor</i>	4	PA
PROCRIT	5	PA
PROLEUKIN	5	PA
REBLOZYL	6	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
RETACRIT	5	PA
XOLREMDI	6	PA
ZIEXTENZO	5	PA; QL (99 per 99 days)
ZYNTEGLO	5	PA
GROWTH HORMONES		
EGRIFTA SV	5	PA
GENOTROPIN	5	PA
GENOTROPIN MINIQUICK	5	PA
NGENLA	5	PA
OMNITROPE	5	PA
SEROSTIM	5	PA
INTERFERONS		
ACTIMMUNE	5	PA
ALFERON N	2	PA
PEGASYS	5	PA; QL (99 per 99 days)
MULTIPLE SCLEROSIS AGENTS		
AVONEX	5	PA; QL (99 per 99 days)
BAFIERTAM	5	PA; QL (99 per 99 days)
BETASERON	5	PA; QL (99 per 99 days)
<i>dimethyl fumarate</i>	4	PA; QL (99 per 99 days)
<i>fingolimod</i>	4	PA; QL (99 per 99 days)
<i>glatiramer</i>	4	PA; QL (99 per 99 days)
<i>glatopa</i>	4	PA; QL (99 per 99 days)
KESIMPTA PEN	5	PA; QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
LEMTRADA	6	PA; QL (99 per 99 days)
MAVENCLAD (10 TABLET PACK)	6	PA; LA; QL (99 per 99 days)
MAVENCLAD (4 TABLET PACK)	6	PA; LA; QL (99 per 99 days)
MAVENCLAD (5 TABLET PACK)	6	PA; LA; QL (99 per 99 days)
MAVENCLAD (6 TABLET PACK)	6	PA; LA; QL (99 per 99 days)
MAVENCLAD (7 TABLET PACK)	6	PA; LA; QL (99 per 99 days)
MAVENCLAD (8 TABLET PACK)	6	PA; LA; QL (99 per 99 days)
MAVENCLAD (9 TABLET PACK)	6	PA; LA; QL (99 per 99 days)
MAYZENT	5	PA; QL (99 per 99 days)
MAYZENT STARTER(FOR 1MG MAINT)	5	PA; QL (99 per 99 days)
MAYZENT STARTER(FOR 2MG MAINT)	5	PA; QL (99 per 99 days)
OCREVUS	5	PA; QL (99 per 99 days)
PLEGRIDY	5	PA; QL (99 per 99 days)
PONVORY	5	PA; QL (99 per 99 days)
PONVORY 14-DAY STARTER PACK	5	PA; QL (99 per 99 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
REBIF (WITH ALBUMIN)	5	PA; QL (99 per 99 days)
REBIF REBIDOSE	5	PA; QL (99 per 99 days)
REBIF TITRATION PACK	5	PA; QL (99 per 99 days)
<i>teriflunomide</i>	4	PA; QL (99 per 99 days)
VUMERITY	5	PA; QL (99 per 99 days)

VACCINES & MISCELLANEOUS IMMUNOLOGICALS

ABRYSVO (PF)	2	ACA
ACTHIB (PF)	2	ACA
ADACEL(TDAP ADOLESN/ADULT)(PF)	2	ACA
AFLURIA TRIV 2024-2025	2	ACA
AFLURIA TRIV 2024-2025 (PF)	2	ACA
ALYGLO	6	PA
AREXVY (PF)	2	ACA
ASCENIV	6	PA
BEXSERO	2	ACA
BIOTHRAX	2	
BIVIGAM	6	PA
BOOSTRIX TDAP	2	ACA
CAPVAXIVE	2	ACA
CUVITRU	6	PA
CYTOGAM	5	PA
DAPTACEL (DTAP PEDIATRIC) (PF)	2	ACA
DENGVAXIA (PF)	2	ACA
DYSPORT	5	PA

Drug Name	Drug Tier	Requirements / Limits
ENGERIX-B (PF)	2	ACA
ENGERIX-B PEDIATRIC (PF)	2	ACA
FLEBOGAMMA DIF	6	PA
FLUAD TRIV 2024-25(65Y UP)(PF)	2	ACA
FLUARIX TRIV 2024-2025 (PF)	2	ACA
FLUBLOK TRIV 2024-2025 (PF)	2	ACA
FLUCELVAX TRIV 2024-2025	2	ACA
FLUCELVAX TRIV 2024-2025 (PF)	2	ACA
FLULAVAL TRIV 2024-2025 (PF)	2	ACA
FLUMIST TRIVALENT 2024-2025	2	ACA
FLUZONE HIGH-DOSE TRIV 24-25	2	ACA
FLUZONE TRIV 2024-2025	2	ACA
FLUZONE TRIV 2024-2025 (PF)	2	ACA
GAMASTAN	5	PA
GAMMAGARD LIQUID	5	PA
GAMMAGARD S-D (IGA < 1 MCG/ML)	5	PA
GAMMAPLEX	6	PA
GAMMAPLEX (WITH SORBITOL)	6	PA
GAMUNEX-C	5	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
GARDASIL 9 (PF)	2	ACA
GRASTEK	2	PA
HAVRIX (PF)	2	ACA
HEPLISAV-B (PF)	2	ACA
HIBERIX (PF)	2	ACA
HIZENTRA	6	PA
HYQVIA	6	PA
IMOVAX RABIES VACCINE (PF)	2	
INFANRIX (DTAP) (PF)	2	ACA
IPOL	2	ACA
IXCHIQ (PF)	2	
IXIARO (PF)	2	
KINRIX (PF)	2	ACA
MENQUADFI (PF)	2	ACA
MENVEO A-C-Y-W-135-DIP (PF)	2	ACA
M-M-R II (PF)	2	ACA
MRESVIA (PF)	2	ACA
MYOBLOC	5	PA
OCTAGAM	6	PA
ODACTRA	2	PA
ORALAIR	5	PA
PANZYGA	6	PA
PEDIARIX (PF)	2	ACA
PEDVAX HIB (PF)	2	ACA
PENBRAYA (PF)	2	ACA
PENTACEL (PF)	2	ACA
PNEUMOVAX-23	2	ACA
PREHEVBRIO (PF)	2	ACA
PREVNAR 20 (PF)	2	ACA
PRIORIX (PF)	2	ACA

Drug Name	Drug Tier	Requirements / Limits
PRIVIGEN	6	PA
PROQUAD (PF)	2	ACA
QUADRACEL (PF)	2	ACA
RABAVERT (PF)	2	
RAGWITEK	2	PA
RECOMBIVAX HB (PF)	2	ACA
ROTARIX	2	ACA
ROTATEQ VACCINE	2	ACA
SHINGRIX (PF)	2	ACA
STAMARIL (PF)	2	
TDVAX	2	ACA
TENIVAC (PF)	2	ACA
TICOVAC	2	
TRUMENBA	2	ACA
TWINRIX (PF)	2	ACA
TYPHIM VI	2	
VAQTA (PF)	2	ACA
VARIVAX (PF)	2	ACA
VAXCHORA VACCINE	2	
VAXELIS (PF)	2	ACA
VAXNEUVANCE (PF)	2	ACA
VIVOTIF	2	
XEMBIFY	5	PA
YF-VAX (PF)	2	

IMMUNOLOGY

INTERLEUKINS

<i>imiquimod</i>	1	
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MUSCULOSKELETAL & RHEUMATOLOGY

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
GOUT THERAPY		
<i>allopurinol oral tablet 100 mg, 300 mg</i>	1	
ALLOPURINOL ORAL TABLET 200 MG	2	
<i>colchicine oral capsule</i>	1	ST
<i>colchicine oral tablet</i>	1	
<i>febuxostat</i>	1	ST
GLOPERBA	3	
KRYSTEXXA	5	PA
MITIGARE	2	ST
<i>probenecid</i>	1	
<i>probenecid-colchicine</i>	1	
ZYLOPRIM	3	
OSTEOPOROSIS THERAPY		
ACTONEL	3	ST; QL (99 per 99 days)
<i>alendronate</i>	1	QL (99 per 99 days)
AELVIA	3	ST; QL (99 per 99 days)
BINOSTO	3	ST; QL (99 per 99 days)
EVISTA	3	
FORTEO	5	PA; QL (99 per 99 days)
FOSAMAX	3	ST; QL (99 per 99 days)
FOSAMAX PLUS D	3	ST; QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
<i>ibandronate intravenous</i>	4	PA
<i>ibandronate oral</i>	1	QL (99 per 99 days)
<i>raloxifene</i>	1	
<i>risedronate</i>	1	QL (99 per 99 days)
<i>teriparatide subcutaneous pen injector 20 mcg/dose (600mcg/2.4ml)</i>	4	PA; QL (99 per 99 days)
TERIPARATIDE SUBCUTANEOUS PEN INJECTOR 20 MCG/DOSE (620MCG/2.48ML)	6	PA; QL (99 per 99 days)
TYMLOS	5	PA; QL (99 per 99 days)
OTHER RHEUMATOLOGICALS		
ACTEMRA ACTPEN	5	PA; QL (99 per 99 days)
ACTEMRA INTRAVENOUS	5	PA
ACTEMRA SUBCUTANEOUS	5	PA; QL (99 per 99 days)
ADALIMUMAB-ADAZ	5	PA; QL (99 per 99 days)
ADALIMUMAB-ADBAM	5	PA; QL (99 per 99 days)
ADALIMUMAB-ADBAM(CF) PEN CROHNS	5	PA; QL (99 per 99 days)
ADALIMUMAB-ADBAM(CF) PEN PS-UV	5	PA; QL (99 per 99 days)
ADALIMUMAB-RYVK	5	PA; QL (99 per 99 days)
ARAVA	3	QL (99 per 99 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
BENLYSTA INTRAVENOUS	5	PA
BENLYSTA SUBCUTANEOUS	5	PA; QL (99 per 99 days)
CYLTEZO(CF)	5	PA; QL (99 per 99 days)
CYLTEZO(CF) PEN	5	PA; QL (99 per 99 days)
CYLTEZO(CF) PEN CROHN'S-UC-HS	5	PA; QL (99 per 99 days)
CYLTEZO(CF) PEN PSORIASIS-UV	5	PA; QL (99 per 99 days)
DEPEN TITRATABS	3	PA
ENBREL	5	PA; QL (99 per 99 days)
ENBREL MINI	5	PA; QL (99 per 99 days)
ENBREL SURECLICK	5	PA; QL (99 per 99 days)
HUMIRA (ONLY NDCS STARTING WITH 00074)	5	PA; QL (99 per 99 days)
HUMIRA PEN (ONLY NDCS STARTING WITH 00074)	5	PA; QL (99 per 99 days)
HUMIRA(CF) (ONLY NDCS STARTING WITH 00074)	5	PA; QL (99 per 99 days)
HUMIRA(CF) PEN (ONLY NDCS STARTING WITH 00074)	5	PA; QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
HUMIRA(CF) PEN CROHNS-UC-HS (ONLY NDCS STARTING WITH 00074)	5	PA; QL (99 per 99 days)
HUMIRA(CF) PEN PEDIATRIC UC (ONLY NDCS STARTING WITH 00074)	5	PA; QL (99 per 99 days)
HUMIRA(CF) PEN PSOR-UV-ADOL HS (ONLY NDCS STARTING WITH 00074)	5	PA; QL (99 per 99 days)
HYRIMOZ PEN CROHN'S-UC STARTER	5	PA; QL (99 per 99 days)
HYRIMOZ PEN PSORIASIS STARTER	5	PA; QL (99 per 99 days)
HYRIMOZ(CF)	5	PA; QL (99 per 99 days)
HYRIMOZ(CF) PEDI CROHN STARTER	5	PA; QL (99 per 99 days)
HYRIMOZ(CF) PEN	5	PA; QL (99 per 99 days)
<i>leflunomide</i>	1	QL (99 per 99 days)
OTEZLA ORAL TABLET 20 MG	5	PA
OTEZLA ORAL TABLET 30 MG	5	PA; QL (99 per 99 days)
OTEZLA STARTER ORAL TABLETS,DOSE PACK 10 MG (4)-20 MG (51)	5	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
OTEZLA STARTER ORAL TABLETS,DOSE PACK 10 MG (4)-20 MG (4)-30 MG (47)	5	PA; QL (99 per 99 days)
<i>penicillamine</i>	1	PA
RASUVO (PF)	2	ST
RIDAURA	2	
RINVOQ	5	PA; QL (99 per 99 days)
RINVOQ LQ	5	PA; QL (99 per 99 days)
SAVELLA	2	ST; QL (99 per 99 days)
SIMLANDI(CF) AUTOINJECTOR	5	PA; QL (99 per 99 days)
SIMPONI	5	PA; QL (99 per 99 days)
SIMPONI ARIA	6	PA
TYENNE	5	PA
TYENNE AUTOINJECTOR	5	PA
XELJANZ	5	PA; QL (99 per 99 days)
XELJANZ XR	5	PA; QL (99 per 99 days)

OBSTETRICS & GYNECOLOGY

DIAPHRAGMS AND OTHER NON-ORAL CONTRACEPTIVES

CAYA CONTOURED	2	ACA
DUREX AVANTI BARE REAL FEEL	3	ACA; OTC

Drug Name	Drug Tier	Requirements / Limits
DUREX TROPICAL CONDOM	3	ACA; OTC
FC2 FEMALE CONDOM	2	ACA; OTC
FEMCAP	2	ACA
KYLEENA	5	
LILETTA	6	
MIRENA	5	ACA
PARAGARD T 380A	5	ACA
SKYLA	5	
TRUSTEX-RIA NON-LUB CONDOMS	2	ACA; OTC
WIDE-SEAL DIAPHRAGM	3	ACA
ESTROGENS & PROGESTINS		
ACTIVELLA	3	
ANGELIQ	3	
<i>camila</i>	1	ACA
CLIMARA	3	QL (99 per 99 days)
COMBIPATCH	2	
<i>covaryx</i>	1	
<i>covaryx h.s.</i>	1	
<i>deblitane</i>	1	ACA
DELESTROGEN	3	
DEPO-ESTRADIOL	2	
DEPO-PROVERA	3	ACA; QL (99 per 99 days)
DEPO-SUBQ PROVERA 104	3	QL (99 per 99 days)
<i>dotti</i>	1	QL (99 per 99 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
DUAVEE	2	
<i>eemt</i>	1	
<i>eemt hs</i>	1	
<i>emzahh</i>	1	ACA
<i>errin</i>	1	ACA
ESTRACE	3	
ESTRADIOL IMPLANT	3	
<i>estradiol oral</i>	1	
<i>estradiol transdermal</i>	1	QL (99 per 99 days)
<i>estradiol vaginal</i>	1	
<i>estradiol valerate</i>	1	
<i>estradiol-norethindrone acet</i>	1	
ESTRATEST F.S.	3	
<i>estrogens-methyltestosterone</i>	1	
EVAMIST	3	QL (99 per 99 days)
<i>fyavolv</i>	1	
<i>heather</i>	1	ACA
<i>incassia</i>	1	ACA
<i>jencycla</i>	1	ACA
<i>jinteli</i>	1	
<i>lyleq</i>	1	ACA
<i>lyllana</i>	1	QL (99 per 99 days)
<i>lyza</i>	1	ACA
<i>medroxyprogesterone intramuscular</i>	1	ACA; QL (99 per 99 days)
<i>medroxyprogesterone oral</i>	1	
MENOSTAR	3	QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
<i>mimvey</i>	1	
<i>nora-be</i>	1	ACA
<i>norethindrone (contraceptive)</i>	1	ACA
<i>norethindrone acetate</i>	1	
<i>norethindrone ac-eth estradiol</i>	1	
OPILL	2	ACA; OTC
PREMARIN	2	
<i>progesterone</i>	4	PA
<i>progesterone micronized</i>	1	
PROMETRIUM	3	
PROVERA	3	
<i>sharobel</i>	1	ACA
<i>tulana</i>	1	ACA
<i>yuvafem</i>	1	
MISCELLANEOUS OB/GYN		
ANNOVERA	3	ACA; QL (99 per 99 days)
CERVIDIL	3	
CLEOCIN	3	
<i>clindamycin phosphate</i>	1	
CLINDESSE	3	
<i>eluryng</i>	1	ACA
<i>enilloring</i>	1	ACA
<i>etonogestrel-ethinyl estradiol</i>	1	ACA
<i>fem ph</i>	1	
GYNAZOLE-1	3	
<i>haloette</i>	1	ACA
<i>metronidazole</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>miconazole-3</i>	1	
MIFEPREX	3	PA
<i>mifepristone</i>	1	PA
MYFEMBREE	2	PA
NEXPLANON	5	ACA
<i>norelgestromin-ethin.estradiol</i>	1	ACA
NUVESSA	3	
ORIAHNN	2	PA
PREPIDIL	3	
RELAGARD	3	
<i>terconazole</i>	1	
<i>tranexamic acid</i>	1	
TRIMO-SAN JELLY	2	
<i>vandazole</i>	1	
VCF CONTRACEPTIVE FILM	2	OTC
VCF CONTRACEPTIVE GEL	2	ACA; OTC
VEOZAH	3	
XACIATO	2	
<i>xulane</i>	1	ACA
<i>zafemy</i>	1	ACA
ORAL CONTRACEPTIVES & RELATED AGENTS		
<i>afirmelle</i>	1	ACA
<i>after pill</i>	1	ACA; OTC; QL (99 per 99 days)
AFTERA	3	ACA; OTC; QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
<i>altavera (28)</i>	1	ACA
<i>alyacen 1/35 (28)</i>	1	ACA
<i>alyacen 7/7/7 (28)</i>	1	ACA
<i>amethia</i>	1	ACA
<i>amethyst (28)</i>	1	ACA
<i>apri</i>	1	ACA
<i>aranelle (28)</i>	1	ACA
<i>ashlyna</i>	1	ACA
<i>aubra</i>	1	ACA
<i>aubra eq</i>	1	ACA
<i>aurovela 1.5/30 (21)</i>	1	ACA
<i>aurovela 1/20 (21)</i>	1	ACA
<i>aurovela 24 fe</i>	1	ACA
<i>aurovela fe 1.5/30 (28)</i>	1	ACA
<i>aurovela fe 1-20 (28)</i>	1	ACA
<i>aviane</i>	1	ACA
<i>ayuna</i>	1	ACA
<i>azurette (28)</i>	1	ACA
<i>balziva (28)</i>	1	ACA
BEYAZ	3	ST; ACA
<i>blisovi 24 fe</i>	1	ACA
<i>blisovi fe 1.5/30 (28)</i>	1	ACA
<i>blisovi fe 1/20 (28)</i>	1	ACA
<i>briellyn</i>	1	ACA
<i>camrese</i>	1	ACA
<i>camrese lo</i>	1	ACA
<i>caziant (28)</i>	1	ACA
<i>charlotte 24 fe</i>	1	ACA
<i>chateal (28)</i>	1	ACA
<i>chateal eq (28)</i>	1	ACA
<i>cryselle (28)</i>	1	ACA

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Drug Name	Drug Tier	Requirements / Limits
<i>curae</i>	1	ACA; OTC; QL (99 per 99 days)
<i>cyred</i>	1	ACA
<i>cyred eq</i>	1	ACA
<i>dasetta 1/35 (28)</i>	1	ACA
<i>dasetta 7/7/7 (28)</i>	1	ACA
<i>daysee</i>	1	ACA
<i>desog-e.estradiol/e.estradiol</i>	1	ACA
<i>dolishale</i>	1	ACA
<i>drospirenone-e.estradiol-lm.fa</i>	1	ACA
<i>drospirenone-ethinyl estradiol</i>	1	ACA
<i>econtra ez</i>	1	ACA; OTC; QL (99 per 99 days)
<i>econtra one-step</i>	1	ACA; OTC; QL (99 per 99 days)
<i>elinest</i>	1	ACA
ELLA	2	ACA; QL (99 per 99 days)
<i>enpresse</i>	1	ACA
<i>enskyce</i>	1	ACA
<i>estarylla</i>	1	ACA
<i>ethynodiol diac-eth estradiol</i>	1	ACA
<i>falmina (28)</i>	1	ACA
<i>finzala</i>	1	ACA
<i>gemmily</i>	1	ACA
<i>hailey</i>	1	ACA
<i>hailey 24 fe</i>	1	ACA
<i>hailey fe 1.5/30 (28)</i>	1	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>hailey fe 1/20 (28)</i>	1	ACA
<i>her style</i>	1	ACA; OTC; QL (99 per 99 days)
<i>iclevia</i>	1	ACA
<i>isibloom</i>	1	ACA
<i>jaimiess</i>	1	ACA
<i>jasmiel (28)</i>	1	ACA
<i>jolessa</i>	1	ACA
<i>joyeaux</i>	1	ACA
<i>juleber</i>	1	ACA
<i>junel 1.5/30 (21)</i>	1	ACA
<i>junel 1/20 (21)</i>	1	ACA
<i>junel fe 1.5/30 (28)</i>	1	ACA
<i>junel fe 1/20 (28)</i>	1	ACA
<i>junel fe 24</i>	1	ACA
<i>kaitlib fe</i>	1	ACA
<i>kalliga</i>	1	ACA
<i>kariva (28)</i>	1	ACA
<i>kelnor 1/35 (28)</i>	1	ACA
<i>kelnor 1/50 (28)</i>	1	ACA
<i>kurvelo (28)</i>	1	ACA
<i>l norgest/e.estradiol-e.estradiol</i>	1	ACA
<i>larin 1.5/30 (21)</i>	1	ACA
<i>larin 1/20 (21)</i>	1	ACA
<i>larin 24 fe</i>	1	ACA
<i>larin fe 1.5/30 (28)</i>	1	ACA
<i>larin fe 1/20 (28)</i>	1	ACA
<i>layolis fe</i>	1	ACA
<i>leena 28</i>	1	ACA
<i>lessina</i>	1	ACA
<i>levonest (28)</i>	1	ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>levonorgest-eth.estradiol-iron</i>	1	ACA
<i>levonorgestrel</i>	1	ACA; OTC; QL (99 per 99 days)
<i>levonorgestrel-ethinyl estrad</i>	1	ACA
<i>levonorg-eth estrad triphasic</i>	1	ACA
<i>levora-28</i>	1	ACA
<i>lojaimiess</i>	1	ACA
<i>loryna (28)</i>	1	ACA
<i>low-ogestrel (28)</i>	1	ACA
<i>lo-zumandimine (28)</i>	1	ACA
<i>lutera (28)</i>	1	ACA
<i>marlissa (28)</i>	1	ACA
<i>merzee</i>	1	ACA
<i>mibelas 24 fe</i>	1	ACA
<i>microgestin 1.5/30 (21)</i>	1	ACA
<i>microgestin 1/20 (21)</i>	1	ACA
<i>microgestin 24 fe</i>	1	ST; ACA
<i>microgestin fe 1.5/30 (28)</i>	1	ACA
<i>microgestin fe 1/20 (28)</i>	1	ACA
<i>mili</i>	1	ACA
<i>mono-linyah</i>	1	ACA
<i>my choice</i>	1	ACA; OTC; QL (99 per 99 days)
<i>my way</i>	1	ACA; OTC; QL (99 per 99 days)
<i>necon 0.5/35 (28)</i>	1	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>new day</i>	1	ACA; OTC; QL (99 per 99 days)
<i>nikki (28)</i>	1	ACA
<i>noreth-ethinyl estradiol-iron</i>	1	ACA
<i>norethindrone ac-eth estradiol</i>	1	ACA
<i>norethindrone-e.estradiol-iron</i>	1	ACA
<i>norgestimate-ethinyl estradiol</i>	1	ACA
<i>nortrel 0.5/35 (28)</i>	1	ACA
<i>nortrel 1/35 (21)</i>	1	ACA
<i>nortrel 1/35 (28)</i>	1	ACA
<i>nortrel 7/7/7 (28)</i>	1	ACA
<i>nylia 1/35 (28)</i>	1	ACA
<i>nylia 7/7/7 (28)</i>	1	ACA
<i>nymyo</i>	1	ACA
<i>ocella</i>	1	ACA
<i>opcicon one-step</i>	1	ACA; OTC; QL (99 per 99 days)
<i>option-2</i>	1	ACA; OTC; QL (99 per 99 days)
<i>philith</i>	1	ACA
<i>pimtreea (28)</i>	1	ACA
PLAN B ONE-STEP	2	ACA; OTC; QL (99 per 99 days)
<i>portia 28</i>	1	ACA
<i>reclipsen (28)</i>	1	ACA
<i>rivelsa</i>	1	ACA
<i>setlakin</i>	1	ACA
<i>simliya (28)</i>	1	ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>simpesse</i>	1	ACA
<i>sprintec (28)</i>	1	ACA
<i>sronyx</i>	1	ACA
<i>syeda</i>	1	ACA
TAKE ACTION	3	ACA; OTC; QL (99 per 99 days)
<i>tarina 24 fe</i>	1	ACA
<i>tarina fe 1/20 (28)</i>	1	ACA
<i>tilia fe</i>	1	ACA
<i>tri-estarylla</i>	1	ACA
<i>tri-legest fe</i>	1	ACA
<i>tri-linyah</i>	1	ACA
<i>tri-lo-estarylla</i>	1	ACA
<i>tri-lo-marzia</i>	1	ACA
<i>tri-lo-mili</i>	1	ACA
<i>tri-lo-sprintec</i>	1	ACA
<i>tri-mili</i>	1	ACA
<i>tri-nymyo</i>	1	ACA
<i>tri-sprintec (28)</i>	1	ACA
<i>trivora (28)</i>	1	ACA
<i>tri-vylibra</i>	1	ACA
<i>tri-vylibra lo</i>	1	ACA
<i>turqoz (28)</i>	1	ACA
<i>tydemy</i>	1	ACA
<i>velivet triphasic regimen (28)</i>	1	ACA
<i>vestura (28)</i>	1	ACA
<i>vienna</i>	1	ACA
<i>violele (28)</i>	1	ACA
<i>volnea (28)</i>	1	ACA
<i>vyfemla (28)</i>	1	ACA
<i>vylibra</i>	1	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>wera (28)</i>	1	ACA
<i>wymzya fe</i>	1	ACA
YAZ (28)	3	ST; ACA
<i>zarah</i>	1	ACA
<i>zovia 1-35 (28)</i>	1	ACA
<i>zumandimine (28)</i>	1	ACA
OXYTOCICS		
<i>methylergonovine</i>	1	QL (99 per 99 days)
OPHTHALMOLOGY		
ANTIBIOTICS		
AZASITE	2	
<i>bacitracin</i>	1	
<i>bacitracin-polymyxin b</i>	1	
BETADINE OPHTHALMIC PREP	3	
<i>ciprofloxacin hcl</i>	1	
<i>erythromycin</i>	1	
<i>gatifloxacin</i>	1	
<i>gentamicin</i>	1	
<i>levofloxacin</i>	1	
<i>moxifloxacin</i>	1	
MOXIFLOXACIN (PF)-BSS	3	PA
MOXIFLOXACIN-SOD CHLOR,ISO(PF)	3	PA
NATACYN	2	
<i>neomycin-bacitracin-polymyxin</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>neomycin-polymyxin-gramicidin</i>	1	
<i>neo-polycin</i>	1	
OCUFLOX	3	
<i>ofloxacin</i>	1	
<i>polycin</i>	1	
<i>polymyxin b sulf-trimethoprim</i>	1	
<i>povidone-iodine</i>	1	
<i>tobramycin</i>	1	
TOBRAMYCIN-VANCOMYCIN	3	
TOBREX	3	
VIGAMOX	3	
ANTIVIRALS		
<i>trifluridine</i>	1	
ZIRGAN	3	
BETA-BLOCKERS		
<i>betaxolol</i>	1	
BETOPTIC S	3	
<i>carteolol</i>	1	
<i>levobunolol</i>	1	
<i>timolol maleate</i>	1	
<i>timolol maleate (pf)</i>	1	
CHOLINESTERASE INHIBITOR MIOTICS		
PHOSPHOLINE IODIDE	5	
CYCLOPLEGIC MYDRIATICS		
ATROPINE OPTHALMIC (EYE) DROPS 0.01 %, 0.025 %, 0.05 %	3	

Drug Name	Drug Tier	Requirements / Limits
<i>atropine ophthalmic (eye) drops 1 %</i>	1	
<i>atropine ophthalmic (eye) ointment</i>	1	
CYCLOGYL	3	
<i>cyclopentolate</i>	1	
<i>cyclopen-tropic-phenyleph-watr</i>	1	
CYCLOPENT-TROPIC-PHEN-KETR-WAT	3	
<i>homatropaire</i>	1	
MYDCOMBI	3	
MYDRIACYL	3	
PHENYLEPH-TROPICAMIDE IN WATER	3	
<i>tropicamide</i>	1	
DIRECT ACTING MIOTICS		
MIOCHOL-E	3	
<i>pilocarpine hcl</i>	1	
MISCELLANEOUS OPHTHALMOLOGICS		
AKTEN (PF)	3	
<i>alaway</i>	1	OTC
ALCAINE	3	
<i>allergy eye (ketotifen)</i>	1	OTC
<i>altacaine</i>	1	
ALTAFLUOR BENOX	3	
<i>azelastine</i>	1	
BEOVU	6	PA
<i>bepotastine besilate</i>	1	
BEVACIZUMAB	3	PA

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Drug Name	Drug Tier	Requirements / Limits
BYOOVIZ	5	PA
CEQUA	3	PA; QL (99 per 99 days)
<i>children's alaway</i>	1	OTC
CIMERLI	5	PA
<i>cromolyn</i>	1	
<i>cyclosporine</i>	1	PA; QL (99 per 99 days)
CYCLOSPORINE IN KLARITY	3	
CYSTARAN	5	PA
DEXAMET-MOXIFL-KETORO-NACL(PF)	3	
<i>epinastine</i>	1	
<i>eye allergy itch relief</i>	1	OTC
<i>eye allergy itch-redness rlf</i>	1	OTC
<i>eye itch relief</i>	1	OTC
FLUORESC EIN-BENOXINATE	3	
<i>fluorescein-proparacaine</i>	1	
IHEEZO (PF)	3	
<i>ketotifen fumarate</i>	1	OTC
KLARITY (CHONDROITIN) (PF)	3	
LASTACAFT ONCE DAILY RELIEF	3	ST; OTC
LUXTURNA	5	PA
MIEBO (PF)	2	PA; QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
MYDRIATIC4(TROP-PROP-PE-KTRLC)	3	
<i>olopatadine</i>	1	
OMIDRIA	3	
OXERVATE	5	PA
PATADAY ONCE DAILY RELIEF	3	OTC
PATADAY TWICE DAILY RELIEF	3	OTC
PHOTREXA CROSS-LINKING KIT	3	
PHOTREXA VISCOUS	3	
PREDNISOLN SP-MOXIFLOX-BROMFEN	3	
PREDNISOLONE ACETATE-BROMFENAC	3	
PREDNISOLONE ACETATE-NEPAFENAC	3	
PREDNISOLONE-MOXIFLO-NEPAFENAC	3	
PREDNISOLONE-MOXIFLOX-BROMFEN	3	
<i>proparacaine</i>	1	
RESTASIS	3	PA; QL (99 per 99 days)
RESTASIS MULTIDOSE	2	PA; QL (99 per 99 days)
<i>tetracaine hcl</i>	1	
TETRACAINE HCL (PF)	3	

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Drug Name	Drug Tier	Requirements / Limits
TYRVAYA	3	PA
VEVYE	3	PA; QL (99 per 99 days)
<i>wal-zyr (ketotifen)</i>	1	OTC
XDEMVY	5	QL (99 per 99 days)
XIIDRA	2	PA; QL (99 per 99 days)
ZADITOR	2	OTC
NON-STEROIDAL ANTI-INFLAMMATORY AGENTS		
ACULAR	3	ST
ACULAR LS	3	ST
<i>bromfenac</i>	1	
<i>diclofenac sodium</i>	1	
<i>flurbiprofen sodium</i>	1	
ILEVRO	3	
<i>ketorolac</i>	1	
PROLENSA	3	
ORAL DRUGS FOR GLAUCOMA		
<i>acetazolamide</i>	1	
<i>methazolamide</i>	1	
OTHER GLAUCOMA DRUGS		
<i>bimatoprost</i>	1	ST
BRIMONIDINE-DORZOLAMIDE	3	
BRIMONIDINE-DORZOLAMIDE (PF)	3	
<i>brimonidine-timolol</i>	1	
<i>brinzolamide</i>	1	
COMBIGAN	3	
<i>dorzolamide</i>	1	

Drug Name	Drug Tier	Requirements / Limits
DORZOLAMIDE (PF)	3	
<i>dorzolamide-timolol</i>	1	
<i>dorzolamide-timolol (pf)</i>	1	
<i>latanoprost</i>	1	ST
LUMIGAN	3	ST
<i>miostat</i>	1	
SIMBRINZA	3	
<i>tafluprost (pf)</i>	1	ST
TIMOLOL-BRIMONIDI-DORZOLAM(PF)	3	
<i>travoprost</i>	1	ST
VYZULTA	3	ST
STEROID-ANTIBIOTIC COMBINATIONS		
DEXAMETH-MOXIFLOX(PF)-NACL,ISO	3	
MAXITROL	3	
<i>neomycin-bacitracin-poly-hc</i>	1	
<i>neomycin-polymyxin b-dexameth</i>	1	
<i>neomycin-polymyxin-hc</i>	1	
<i>neo-polycin hc</i>	1	
PREDNISOLONE SOD PH-MOXIFLOX	3	
PREDNISOLONE-MOXIFLOXACIN HCL	3	
TOBRADEX	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>tobramycin-dexamethasone</i>	1	
STEROIDS		
<i>dexamethasone sodium phosphate</i>	1	
DEXTENZA	3	
DEXYCU (PF)	3	
<i>difluprednate</i>	1	
EYSUVIS	2	PA; QL (99 per 99 days)
<i>fluorometholone</i>	1	
FML LIQUIFILM	3	ST
ILUVIEN	6	PA
INVELTYS	3	ST
LOTEMAX OPHTHALMIC (EYE) DROPS,GEL	3	ST
LOTEMAX OPHTHALMIC (EYE) DROPS,SUSPENSION	3	
LOTEMAX OPHTHALMIC (EYE) OINTMENT	3	ST
LOTEMAX SM	3	ST
<i>loteprednol etabonate ophthalmic (eye) drops,gel</i>	1	
<i>loteprednol etabonate ophthalmic (eye) drops,suspension 0.2 %</i>	1	ST

Drug Name	Drug Tier	Requirements / Limits
<i>loteprednol etabonate ophthalmic (eye) drops,suspension 0.5 %</i>	1	
OZURDEX	5	PA
PRED FORTE	3	
<i>prednisolone acetate</i>	1	
PREDNISOLONE ACETATE (PF)	3	
<i>prednisolone sodium phosphate</i>	1	
RETISERT	6	PA
STEROID-SULFONAMIDE COMBINATIONS		
<i>sulfacetamide-prednisolone</i>	1	
SULFONAMIDES		
<i>sulfacetamide sodium</i>	1	
SYMPATHOMIMETICS		
ALPHAGAN P	3	
<i>apraclonidine</i>	1	
<i>brimonidine</i>	1	
IOPIDINE	3	
VASOCONSTRICTOR DECONGESTANTS		
CYCLOMYDRIL	3	
<i>phenylephrine hcl</i>	1	
RESPIRATORY, ALLERGY, COUGH & COLD		
ANTIHISTAMINE & ANTIALLERGENIC AGENTS		
<i>adrenalin</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
AUVI-Q	2	QL (99 per 99 days)
<i>carbinoxamine maleate oral liquid</i>	1	
<i>carbinoxamine maleate oral tablet 4 mg</i>	1	
<i>carbinoxamine maleate oral tablet 6 mg</i>	1	ST
<i>cetirizine</i>	1	
CLARINEX	3	QL (99 per 99 days)
<i>clemastine</i>	1	
<i>cyproheptadine</i>	1	
<i>desloratadine</i>	1	QL (99 per 99 days)
<i>dexchlorpheniramine maleate</i>	1	
DIPHEN	3	
EPINEPHRINE HCL (PF)	3	
<i>epinephrine injection auto-injector</i>	1	QL (99 per 99 days)
<i>epinephrine injection syringe</i>	1	
EPIPEN	2	QL (99 per 99 days)
EPIPEN JR	2	QL (99 per 99 days)
<i>hydroxyzine hcl</i>	1	
<i>hydroxyzine pamoate</i>	1	
KARBINAL ER	3	ST
<i>levocetirizine oral solution</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>levocetirizine oral tablet</i>	1	QL (99 per 99 days)
<i>promethazine</i>	1	
<i>promethegan</i>	1	
RYCLORA	3	
RYVENT	3	ST
SYMJEPI	2	QL (99 per 99 days)
VISTARIL	3	
COUGH & COLD THERAPY		
<i>benzonatate</i>	1	
BROMFED DM	3	
<i>brompheniramine-pseudoeph-dm</i>	1	
CLARINEX-D 12 HOUR	3	QL (99 per 99 days)
HYCODAN (WITH HOMATROPINE)	3	
<i>hydrocodone-chlorpheniramine</i>	1	
<i>hydrocodone-homatropine</i>	1	
<i>hydromet</i>	1	
<i>promethazine vc</i>	1	
<i>promethazine-codeine</i>	1	
<i>promethazine-dm</i>	1	
RESPA-AR	3	
TUXARIN ER	3	
PULMONARY AGENTS		
ACCOLATE	3	
<i>acetylcysteine</i>	DME	
ADEMPAS	5	PA; LA; QL (99 per 99 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
ADRENALIN	3	
ADVAIR HFA	2	ST; QL (99 per 99 days)
AIRDUO DIGIHALER	3	ST; QL (99 per 99 days)
AIRSUPRA	2	
<i>albuterol sulfate inhalation hfa aerosol inhaler</i>	1	QL (99 per 99 days)
<i>albuterol sulfate inhalation solution for nebulization</i>	DME	
<i>albuterol sulfate oral</i>	1	
<i>alyq</i>	4	PA; QL (99 per 99 days)
<i>ambrisentan</i>	4	PA; LA; QL (99 per 99 days)
ANORO ELLIPTA	2	QL (99 per 99 days)
<i>arformoterol</i>	DME	QL (99 per 99 days)
ARNUITY ELLIPTA	2	QL (99 per 99 days)
ASMANEX HFA	2	QL (99 per 99 days)
ASMANEX TWISTHALER	2	QL (99 per 99 days)
ATROVENT HFA	3	QL (99 per 99 days)
<i>azelastine-fluticasone</i>	1	ST; QL (99 per 99 days)
<i>bosentan</i>	4	PA; QL (99 per 99 days)
BREO ELLIPTA	2	ST; QL (99 per 99 days)
<i>breynd</i>	1	ST; QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
BREZTRI AEROSPHERE	2	QL (99 per 99 days)
BRONCHITOL	6	PA
BROVANA	3	QL (99 per 99 days)
<i>budesonide</i>	DME	QL (99 per 99 days)
<i>budesonide-formoterol</i>	1	ST; QL (99 per 99 days)
CINRYZE	5	PA; QL (99 per 99 days)
COMBIVENT RESPIMAT	2	QL (99 per 99 days)
<i>cromolyn</i>	DME	
DULERA	2	ST; QL (99 per 99 days)
DYMISTA	3	ST; QL (99 per 99 days)
ELIXOPHYLLIN	3	
<i>epinephrine hcl</i>	1	
FASENRA	5	PA; QL (99 per 99 days)
FASENRA PEN	5	PA; QL (99 per 99 days)
<i>flunisolide</i>	1	ST; QL (99 per 99 days)
<i>fluticasone propionate</i>	1	QL (99 per 99 days)
<i>fluticasone propion-salmeterol</i>	1	ST; QL (99 per 99 days)
<i>formoterol fumarate</i>	DME	QL (99 per 99 days)
HAEGARDA	6	PA; LA; QL (99 per 99 days)
HYPER-SAL	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>icatibant</i>	4	PA; QL (99 per 99 days)
<i>ipratropium bromide</i>	DME	
<i>ipratropium-albuterol</i>	DME	QL (99 per 99 days)
KALBITOR	6	PA; QL (99 per 99 days)
KALYDECO	5	PA; QL (99 per 99 days)
<i>levalbuterol hcl</i>	DME	
<i>mometasone</i>	1	ST; QL (99 per 99 days)
<i>montelukast</i>	1	
<i>nebusal inhalation solution for nebulization 3 %</i>	DME	
NEBUSAL INHALATION SOLUTION FOR NEBULIZATION 6 %	DME	
NUCALA	5	PA; LA; QL (99 per 99 days)
OFEV	5	PA; QL (99 per 99 days)
OPSUMIT	5	PA; LA; QL (99 per 99 days)
OPSYNVI	5	PA; QL (99 per 99 days)
ORKAMBI	5	PA; QL (99 per 99 days)
ORLADEYO	6	PA; LA; QL (99 per 99 days)
<i>pirfenidone</i>	4	PA; QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
<i>pulmosal</i>	1	
PULMOZYME	5	PA
QVAR REDIHALER	2	QL (99 per 99 days)
REVATIO INTRAVENOUS	6	
REVATIO ORAL	6	PA; QL (99 per 99 days)
<i>roflumilast oral tablet 250 mcg</i>	1	PA; QL (99 per 99 days)
<i>roflumilast oral tablet 500 mcg</i>	1	PA
RUCONEST	5	PA; QL (99 per 99 days)
RYALTRIS	3	ST; QL (99 per 99 days)
<i>sajazir</i>	4	PA; QL (99 per 99 days)
<i>sildenafil (pulm.hypertension) intravenous</i>	4	PA
<i>sildenafil (pulm.hypertension) oral</i>	4	PA; QL (99 per 99 days)
SINUVA	6	PA
<i>sodium chloride</i>	DME	
SPIRIVA RESPIMAT	2	QL (99 per 99 days)
SPIRIVA WITH HANDIHALER	2	QL (99 per 99 days)
STIOLTO RESPIMAT	2	QL (99 per 99 days)
STRIVERDI RESPIMAT	2	QL (99 per 99 days)
SYMBICORT	3	ST; QL (99 per 99 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
SYMDEKO	5	PA; QL (99 per 99 days)
<i>tadalafil (pulm. hypertension)</i>	4	PA; QL (99 per 99 days)
TAKHZYRO	5	PA; LA; QL (99 per 99 days)
<i>terbutaline</i>	1	
TEZSPIRE	5	PA; QL (99 per 99 days)
THEO-24	3	
<i>theophylline</i>	1	
<i>tiotropium bromide</i>	1	
TRACLEER ORAL TABLET	6	PA; LA; QL (99 per 99 days)
TRACLEER ORAL TABLET FOR SUSPENSION	5	PA; LA; QL (99 per 99 days)
TRELEGY ELLIPTA	2	QL (99 per 99 days)
TRIKAFTA	5	PA; QL (99 per 99 days)
TYVASO	5	PA
TYVASO DPI	5	PA
TYVASO REFILL KIT	5	PA
TYVASO STARTER KIT	5	PA
VENTAVIS	6	PA
WINREVAIR	5	PA
<i>wixela inhub</i>	1	ST; QL (99 per 99 days)
XHANCE	2	ST; QL (99 per 99 days)

Drug Name	Drug Tier	Requirements / Limits
XOLAIR	5	PA; LA; QL (99 per 99 days)
YUPELRI	2	QL (99 per 99 days)
<i>zafirlukast</i>	1	
<i>zileuton</i>	1	PA
ZYFLO	3	PA

UROLOGICALS

ANTICHOLINERGICS & ANTISPASMODICS

<i>darifenacin</i>	1	
<i>fesoterodine</i>	1	
<i>flavoxate</i>	1	
GEMTESA	3	
<i>mirabegron</i>	1	
MYRBETRIQ	2	
<i>oxybutynin chloride</i>	1	
OXYTROL	3	ST; QL (99 per 99 days)
<i>solifenacin</i>	1	
<i>tolterodine</i>	1	
<i>trospium</i>	1	

BENIGN PROSTATIC HYPERPLASIA (BPH) THERAPY

<i>alfuzosin</i>	1	
<i>dutasteride</i>	1	ST
<i>dutasteride-tamsulosin</i>	1	ST
<i>finasteride</i>	1	
FLOMAX	3	ST
PROSCAR	3	ST
<i>silodosin</i>	1	
<i>tamsulosin</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
CHOLINERGIC STIMULANTS		
<i>bethanechol chloride</i>	1	
MISCELLANEOUS UROLOGICALS		
CYSTAGON	5	LA
ELMIRON	2	
K-PHOS NO 2	3	
K-PHOS ORIGINAL	2	
<i>methen-sod phos-meth blue-hyos</i>	1	
ORACIT	3	
OXLUMO	6	PA
<i>potassium citrate</i>	1	
RENACIDIN	2	
<i>sodium citrate-citric acid</i>	1	
URELLE	3	
<i>uretron d-s</i>	1	
URIBEL TABS	3	
<i>urimar-t</i>	1	
<i>uro-458</i>	1	
UROCIT-K 10	3	
UROCIT-K 15	3	
<i>urogesic-blue</i>	1	
<i>uro-mp</i>	1	
UROQID-ACID NO.2	3	
<i>uro-sp</i>	1	
<i>uryl</i>	1	
URINARY ANESTHETICS		
<i>phenazopyridine</i>	1	
VITAMINS, HEMATINICS & ELECTROLYTES		

Drug Name	Drug Tier	Requirements / Limits
ELECTROLYTES		
<i>calcium acetate(phosphat bind)</i>	1	QL (99 per 99 days)
EFFER-K ORAL TABLET, EFFERVESCENT 10 MEQ, 20 MEQ	3	
<i>effer-k oral tablet, effervescent 25 meq</i>	1	
GALZIN	3	
<i>klor-con</i>	1	
<i>klor-con 10</i>	1	
<i>klor-con 8</i>	1	
<i>klor-con m10</i>	1	
<i>klor-con m15</i>	1	
<i>klor-con m20</i>	1	
<i>klor-con/ef</i>	1	
K-TAB	3	
<i>lugols</i>	1	
<i>potassium chloride</i>	1	
<i>strong iodine</i>	1	
MISCELLANEOUS VITAMINS, HEMATINICS, & ELECTROLYTES		
DOJOLVI	6	PA; LA
VITAMINS & HEMATINICS		
<i>b complex 1 (with folic acid)</i>	1	ACA; OTC
<i>b complex-vitamin c-folic acid</i>	1	ACA; OTC
<i>balanced b-100</i>	1	ACA; OTC
<i>bal-care dha</i>	1	
BAL-CARE DHA ESSENTIAL	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
<i>b-complex with vitamin c</i>	1	ACA; OTC
<i>classic prenatal</i>	1	ACA; OTC
<i>c-nate dha</i>	1	
<i>complete natal dha</i>	1	
<i>dialyvite 800</i>	1	ACA; OTC
DUET DHA WITH OMEGA-3	3	
<i>ferocon</i>	1	ACA; OTC
<i>fluoride (sodium)</i>	1	ACA; OTC
<i>folic acid</i>	1	ACA; OTC
<i>folitab</i>	1	ACA; OTC
<i>foltabs 800</i>	1	ACA; OTC
<i>full spectrum b-vitamin c</i>	1	ACA; OTC
<i>kobee</i>	1	ACA; OTC
KOSHER PRENATAL PLUS IRON	3	
<i>ludent fluoride</i>	1	ACA; OTC
MARNATAL-F	3	
<i>m-natal plus</i>	1	
<i>multi-vitamin with fluoride</i>	1	ACA; OTC
<i>mvc-fluoride</i>	1	ACA; OTC
<i>mynatal</i>	1	
<i>mynatal plus</i>	1	
<i>mynatal-z</i>	1	
NATACHEW (FE BIS-GLYCINATE)	3	
NEONATAL COMPLETE	3	
NEONATAL PLUS VITAMIN	3	
NEONATAL-DHA	3	

Drug Name	Drug Tier	Requirements / Limits
NESTABS	3	
NESTABS ABC	3	
NESTABS DHA	3	
<i>newgen</i>	1	
OB COMPLETE ONE	3	
OB COMPLETE PETITE	3	
OB COMPLETE PREMIER	3	
OB COMPLETE WITH DHA	3	
<i>one daily prenatal</i>	1	ACA; OTC
<i>pnv-select</i>	1	
<i>pr natal 400</i>	1	
<i>pr natal 400 ec</i>	1	
<i>pr natal 430</i>	1	
<i>pr natal 430 ec</i>	1	
<i>prenal chew</i>	1	
<i>prenal pearl</i>	1	
<i>prenal true</i>	1	
PRENATA	3	
<i>prenatabs fa</i>	1	
<i>prenatabs rx</i>	1	
<i>prenatal</i>	1	ACA; OTC
<i>prenatal complete</i>	1	ACA; OTC
<i>prenatal multi-dha (algal oil)</i>	1	ACA; OTC
<i>prenatal multivitamins</i>	1	ACA; OTC
<i>prenatal one daily</i>	1	ACA; OTC
<i>prenatal plus</i>	1	
<i>prenatal plus (calcium carb)</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
PRENATAL PLUS DHA	3	
PRENATAL PLUS VITAMIN-MINERAL	3	
<i>prenatal vit no.179-iron-folic</i>	1	ACA; OTC
<i>prenatal vitamin</i>	1	ACA; OTC
<i>prenatal vitamin with minerals</i>	1	ACA; OTC
PRENATE DHA (FERR ASP GLYCIN)	3	
PRENATE ELITE (IRON ASP GLYC)	3	
PRENATE ENHANCE	3	
PRENATE MINI (FERR ASP GLYCIN)	3	
PRENATE PIXIE	3	
PRENATE RESTORE	3	
PRENATE STAR	3	
PRIMACARE	3	
PROVIDA OB	3	
<i>rena-vite</i>	1	ACA; OTC
R-NATAL OB	3	
SELECT-OB	3	
SELECT-OB (FOLIC ACID)	3	
SELECT-OB + DHA	3	
<i>se-natal 19 chewable</i>	1	
<i>se-natal-19</i>	1	
<i>soluvita</i>	1	ACA; OTC

Drug Name	Drug Tier	Requirements / Limits
<i>soluvita a,c,d with fluoride</i>	1	ACA; OTC
<i>stress formula with iron</i>	1	ACA; OTC
<i>stress formula with iron(sulf)</i>	1	ACA; OTC
<i>super b maxi complex</i>	1	ACA; OTC
<i>super b-50 complex</i>	1	ACA; OTC
<i>super quintis</i>	1	ACA; OTC
THRIVITE RX	3	
TRICARE	3	
<i>tricon</i>	1	ACA; OTC
<i>trinatal rx 1</i>	1	
<i>trinate</i>	1	
TRISTART DHA	3	
<i>tri-vitamin with fluoride</i>	1	ACA; OTC
VENOFER	2	PA
VITAFOL FE PLUS	3	
VITAFOL GUMMIES	3	
VITAFOL ULTRA	3	
VITAFOL-OB	3	
VITAFOL-OB+DHA	3	
VITAFOL-ONE	3	
VITAMEDMD ONE RX	3	
VITAMEDMD REDICHEW RX	3	
<i>vitamin b complex-folic acid</i>	1	ACA; OTC
<i>vitamins a,c,d and fluoride</i>	1	ACA; OTC

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Drug Name	Drug Tier	Requirements / Limits
VITATRUE	3	
<i>wesnatal dha complete</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>wesnate dha</i>	1	
<i>westab plus</i>	1	
<i>westgel dha</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

Index

A		
<i>abacavir</i>	3	
<i>abacavir-lamivudine</i>	3	
ABECMA.....	9	
ABILIFY ASIMTUFII.....	23	
ABILIFY MAINTENA.....	23	
ABILIFY MYCITE MAINTENANCE KIT	23	
ABILIFY MYCITE STARTER KIT	23	
<i>abiraterone</i>	9	
ABRAXANE.....	9	
ABRYSVO (PF).....	60	
ABSORICA.....	36	
<i>acamprosate</i>	42	
<i>acarbose</i>	53	
ACCOLATE.....	74	
ACCU-CHEK GUIDE L1-L2 CTRL SOL	46	
ACCU-CHEK SMARTVIEW CONTRL SOL	46	
ACCUPRIL.....	28	
ACCURETIC.....	28	
<i>accutane</i>	36	
ACCU-TREND GLUCOSE CONTROL.....	46	
ACE AEROSOL CLOUD ENHANCER.....	45	
<i>acebutolol</i>	28	
<i>acetaminophen-caff-</i> <i>dihydrocod</i>	20	
<i>acetaminophen-codeine</i>	20	
<i>acetazolamide</i>	72	
<i>acetic acid</i>	42, 44	
<i>acetylcysteine</i>	74	
<i>acitretin</i>	34	
ACTEMRA.....	62	
ACTEMRA ACTPEN.....	62	
ACTHAR.....	44	
ACTHAR SELFJECT.....	44	
ACTHIB (PF).....	60	
ACTICLATE.....	8	
ACTIMMUNE.....	59	
ACTIVELLA.....	64	
ACTONEL.....	62	
ACTOPLUS MET.....	53	
ACTOS.....	53	
ACULAR.....	72	
ACULAR LS.....	72	
<i>acyclovir</i>	3, 39	
ACZONE.....	36	
ADACEL(TDAP ADOLESN/ADULT)(PF) 60		
ADAKVEO.....	9	
ADALIMUMAB-ADAZ.....	62	
ADALIMUMAB-ADB.....	62	
ADALIMUMAB-ADB(CF) PEN CROHNS	62	
ADALIMUMAB-ADB(CF) PEN PS-UV	62	
ADALIMUMAB-RYVK.....	62	
<i>adapalene-benzoyl peroxide</i>	36	
ADASUVE.....	23	
ADBRY.....	35	
ADCETRIS.....	9	
<i>adefovir</i>	3	
ADEMPAS.....	74	
ADLARITY.....	18	
<i>adrenalin</i>	73	
ADRENALIN.....	75	
<i>adthyza</i>	54	
<i>adult aspirin regimen</i>	21	
ADVAIR HFA.....	75	
ADVATE.....	31	
ADVOCATE REDI-CODE PLUS CTRL L.....	46	
ADYNOVATE.....	31	
ADZENYS XR-ODT.....	23	
ADZYNMA.....	31	
AEMCOLO.....	6	
AEROCHAMBER MECHANICAL VENT... ..	45	
AEROCHAMBER MINI.....	45	
AEROCHAMBER PLUS FLOW-VU.....	45	
AEROCHAMBER PLUS Z STAT.....	46	
AEROTRACH PLUS.....	46	
AEROVENT PLUS.....	46	
<i>afirmelle</i>	66	
AFLURIA TRIV 2024-2025 60		
AFLURIA TRIV 2024-2025 (PF).....	60	
AFSTYLA.....	31	
<i>after pill</i>	66	
AFTERA.....	66	
AGAMATRIX CONTROL HIGH.....	46	
AGRYLIN.....	42	
AIMOVIG AUTOINJECTOR	17	
AIRDUO DIGIHALER.....	75	
AIRSUPRA.....	75	
AJOVY AUTOINJECTOR..	17	
AJOVY SYRINGE.....	17	
AKLIEF.....	36	
AKTEN (PF).....	70	
<i>ala-cort</i>	39	
ALA-SCALP.....	39	
<i>alaway</i>	70	
<i>albendazole</i>	6	
<i>albuterol sulfate</i>	75	
ALCAINE.....	70	
<i>alclometasone</i>	39	
ALDACTONE.....	28	
ALDURAZYME.....	51	
ALECENSA.....	9	
<i>alendronate</i>	62	
ALFERON N.....	59	
<i>alfuzosin</i>	77	
ALINIA.....	6	
ALIQOPA.....	9	
<i>aliskiren</i>	28	
ALKERAN.....	9	
<i>allergy eye (ketotifen)</i>	70	
<i>allopurinol</i>	62	
ALLOPURINOL.....	62	
<i>almotriptan malate</i>	17	
<i>alosetron</i>	55	
ALPHAGAN P.....	73	
ALPHANATE.....	31	
ALPHANINE SD.....	31	
<i>aprazolam</i>	23	
<i>aprazolam intensol</i>	23	
ALPROLIX.....	31	
ALTABAX.....	38	
<i>altacaine</i>	70	
ALTACE.....	28	
ALTAFLUOR BENOX.....	70	
<i>altavera (28)</i>	66	
ALTRENO.....	36	

ALTUVIIIIO	31	ANGELIQ	64	ASSURE DOSE NORMAL	
ALUNBRIG	9	ANJESO	21	CONTROL	46
<i>alvimopan</i>	55	ANNOVERA.....	65	ASSURE PRISM CONTROL	
<i>alyacen 1/35 (28)</i>	66	ANORO ELLIPTA.....	75	1-2 SOLN	46
<i>alyacen 7/7/7 (28)</i>	66	<i>anucort-hc</i>	55	ASTAGRAF XL.....	9
ALYGLO	60	<i>apexicon e</i>	39	AT HOME A1C	46
<i>alyq</i>	75	<i>apomorphine</i>	17	<i>atazanavir</i>	3
<i>amantadine hcl</i>	3	<i>apraclonidine</i>	73	ATELVIA	62
<i>ambrisentan</i>	75	<i>aprepitant</i>	55	<i>atenolol</i>	28
<i>amcinonide</i>	39	APRETUDE	3	<i>atenolol-chlorthalidone</i>	28
AMELUZ	35	<i>apri</i>	66	ATIVAN.....	23
<i>amethia</i>	66	APRISO.....	55	<i>atomoxetine</i>	23
<i>amethyst (28)</i>	66	APTIOM.....	15	<i>atorvastatin</i>	33
AMICAR.....	31	APTIVUS	3	<i>atovaquone</i>	6
<i>amiloride</i>	28	ARAKODA	6	<i>atovaquone-proguanil</i>	6
<i>amiloride-hydrochlorothiazide</i>		ARALAST NP	42	<i>atropine</i>	70
.....	28	<i>aranelle (28)</i>	66	ATROPINE	70
<i>aminocaproic acid</i>	31	ARAVA.....	62	ATROVENT HFA.....	75
<i>amiodarone</i>	27	ARAZLO.....	36	<i>aubra</i>	66
<i>amitriptyline</i>	23	ARCALYST	58	<i>aubra eq</i>	66
<i>amitriptyline-chlordiazepoxide</i>		ARESTIN	44	AUGMENTIN.....	7
.....	23	AREXVY (PF)	60	AUGMENTIN ES-600.....	7
<i>amlodipine</i>	28	<i>arformoterol</i>	75	AUGMENTIN XR	7
<i>amlodipine-atorvastatin</i>	33	ARICEPT	18	AUGTYRO.....	9
<i>amlodipine-benazepril</i>	28	ARIKAYCE	6	<i>aurovela 1.5/30 (21)</i>	66
<i>amlodipine-olmesartan</i>	28	<i>aripiprazole</i>	23	<i>aurovela 1/20 (21)</i>	66
<i>amlodipine-valsartan</i>	28	ARISTADA.....	23	<i>aurovela 24 fe</i>	66
<i>amlodipine-valsartan-hcthiiazid</i>		ARISTADA INITIO.....	23	<i>aurovela fe 1.5/30 (28)</i>	66
.....	28	ARIXTRA	31	<i>aurovela fe 1-20 (28)</i>	66
<i>ammonium lactate</i>	35	<i>armodafinil</i>	23	AURYXIA.....	54
<i>amnesteem</i>	36	ARMOUR THYROID	54	AUSTEDO	18
<i>amoxapine</i>	23	ARNUITY ELLIPTA.....	75	AUSTEDO XR.....	18
<i>amoxicil-clarithromy-</i>		AROMASIN.....	9	AUSTEDO XR TITRATION	
<i>lansopraz</i>	57	ARRANON	9	KT(WK1-4).....	18
<i>amoxicillin</i>	7	ARTHROTEC 50.....	21	AUVELITY	23
<i>amoxicillin-pot clavulanate</i>	7	ARTHROTEC 75.....	21	AUVI-Q.....	74
<i>amphetamine sulfate</i>	23	ASCENIV.....	60	<i>avar</i>	36
<i>ampicillin</i>	7	<i>ascomp with codeine</i>	20	AVAR LS	36
AMTAGVI.....	9	<i>asenapine maleate</i>	23	<i>aviane</i>	66
AMZEEQ	36	<i>ashlyna</i>	66	<i>avidoxy</i>	8
ANAFRANIL.....	23	ASMANEX HFA	75	AVIDOXY DK.....	8
<i>anagrelide</i>	42	ASMANEX TWISTHALER 75		AVONEX	59
ANA-LEX KIT	55	ASPARLAS.....	9	<i>ayuna</i>	66
ANALPRAM-HC.....	34, 55	<i>aspirin</i>	21	AYVAKIT	9
ANAPROX DS	21	<i>aspirin childrens</i>	21	<i>azacitidine</i>	9
<i>anaspaz</i>	54	<i>aspirin-dipyridamole</i>	31	AZASAN.....	9
<i>anastrozole</i>	9	ASSURE 4 CONTROL		AZASITE	69
ANCOBON	3	SOLUTION	46	<i>azathioprine</i>	9
ANDRODERM.....	51			<i>azelaic acid</i>	36

<i>azelastine</i>	44, 70	<i>benazepril</i>	28	BIVIGAM.....	60
<i>azelastine-fluticasone</i>	75	<i>benazepril-hydrochlorothiazide</i>	28	BLINCYTO.....	9
AZELEX.....	36	<i>bendamustine</i>	9	<i>blisovi 24 fe</i>	66
AZILECT.....	17	BENDAMUSTINE.....	9	<i>blisovi fe 1.5/30 (28)</i>	66
<i>azithromycin</i>	5	BENDEKA.....	9	<i>blisovi fe 1/20 (28)</i>	66
AZSTARYS.....	23	BENEFIX.....	31	BLOOD GLUCOSE CONTROL, NORMAL....	47
AZULFIDINE.....	55	BENLYSTA.....	63	BOOSTRIX TDAP.....	60
AZULFIDINE EN-TABS....	55	BENZAMYCIN.....	36	<i>bortezomib</i>	9
<i>azurette (28)</i>	66	<i>benzebro</i>	36	BORTEZOMIB.....	9
B		BENZEPRO (MICROSPHERES).....	36	<i>bosentan</i>	75
<i>b complex 1 (with folic acid)</i>	78	BENZNIDAZOLE.....	6	BOSULIF.....	9
<i>b complex-vitamin c-folic acid</i>	78	<i>benzonatate</i>	74	<i>bp 10-1</i>	36
<i>bacitracin</i>	69	<i>benzoyl peroxide</i>	36	BREATHERITE MDI SPACER.....	46
<i>bacitracin-polymyxin b</i>	69	<i>benztropine</i>	17	BREEZE 2 CONTROL SOLUTION,HIGH.....	47
<i>baclofen</i>	19	BEOVU.....	70	BREO ELLIPTA.....	75
BACLOFEN.....	19	<i>bepotastine besilate</i>	70	BREXAFEMME.....	3
BACTRIM.....	8	<i>beser</i>	39	BREYANZI.....	9
BACTRIM DS.....	8	BESPONSA.....	9	<i>breyna</i>	75
BAFIERTAM.....	59	BETADINE OPHTHALMIC PREP.....	69	BREZTRI AEROSPHERE...75	
<i>balanced b-100</i>	78	<i>betaine</i>	55	<i>briellyn</i>	66
<i>bal-care dha</i>	78	<i>betamethasone dipropionate</i>	39	BRILINTA.....	31
BAL-CARE DHA ESSENTIAL.....	78	<i>betamethasone valerate</i> ..	39, 40	<i>brimonidine</i>	36, 73
<i>balsalazide</i>	55	<i>betamethasone, augmented</i> ..	40	BRIMONIDINE- DORZOLAMIDE.....	72
BALVERSA.....	9	BETAPACE.....	27	BRIMONIDINE- DORZOLAMIDE (PF)....	72
<i>balziva (28)</i>	66	BETAPACE AF.....	27	<i>brimonidine-timolol</i>	72
BAQSIMI.....	46	BETASERON.....	59	BRINEURA.....	51
BARACLUDE.....	3	<i>betaxolol</i>	28, 70	<i>brinzolamide</i>	72
BASAGLAR KWIKPEN U- 100 INSULIN.....	50	<i>bethanechol chloride</i>	78	BRIVIACT.....	15
BASAGLAR TEMPO PEN(U- 100)INSLN.....	50	BETHKIS.....	6	BRIXADI.....	20
BAVENCIO.....	9	BETOPTIC S.....	70	BROMFED DM.....	74
BAXDELA.....	7	BEVACIZUMAB.....	9, 70	<i>bromfenac</i>	72
<i>bayer low dose aspirin</i>	21	<i>bexarotene</i>	9	<i>bromocriptine</i>	17
<i>b-complex with vitamin c</i>	79	BEXSERO.....	60	<i>brompheniramine-pseudoeph- dm</i>	74
BD INTEGRA NEEDLE....	46	BEYAZ.....	66	BRONCHITOL.....	75
BD MICROTAINER LANCET.....	46	BEYFORTUS.....	3	BROVANA.....	75
BD SPECIALTY USE NEEDLES.....	47	<i>bicalutamide</i>	9	BRUKINSA.....	9
BD ULTRA-FINE NANO PEN NEEDLE.....	47	BIKTARVY.....	3	BRYHALI.....	40
BELBUCA.....	20	BILTRICIDE.....	6	<i>budesonide</i>	55, 75
BELEODAQ.....	9	<i>bimatoprost</i>	72	<i>budesonide-formoterol</i>	75
<i>belladonna alkaloids-opium</i> ..	54	BINOSTO.....	62	<i>bumetanide</i>	28
BELRAPZO.....	9	BIOTHRAX.....	60	BUPHENYL.....	42
BELSOMRA.....	23	<i>bismuth subcit k-metronidz-tcn</i>	57	<i>buprenorphine</i>	20
		<i>bisoprolol fumarate</i>	28	<i>buprenorphine hcl</i>	20
		<i>bisoprolol-hydrochlorothiazide</i>	28		

<i>buprenorphine-naloxone</i>	21	CAPVAXIVE.....	60	CENTANY AT.....	38
<i>bupropion hcl</i>	23	CARBAGLU.....	42	<i>cephalexin</i>	5
<i>bupropion hcl (smoking deter)</i>	43	<i>carbamazepine</i>	15	CEPROTIN (BLUE BAR) ...	31
<i>buspirone</i>	23	CARBATROL.....	15	CEPROTIN (GREEN BAR)	31
<i>butalbital-acetaminop-caf-cod</i>	20	<i>carbidopa</i>	17	CEQUA	71
<i>butalbital-acetaminophen</i>	20	<i>carbidopa-levodopa</i>	17	CEQUR SIMPLICITY	47
<i>butalbital-acetaminophen-caff</i>	20	<i>carbidopa-levodopa-</i> <i>entacapone</i>	17	CERDELGA.....	51
<i>butalbital-aspirin-caffeine</i>	20	<i>carbinoxamine maleate</i>	74	CEREZYME.....	51
<i>butorphanol</i>	21	CARDIZEM.....	28	CERVIDIL	65
BYDUREON BCISE	53	CARDIZEM CD.....	28	<i>cetirizine</i>	74
BYETTA.....	53	CARDIZEM LA.....	28	<i>cevimeline</i>	42
BYLVAY	55	CARDURA	28	CHANTIX	43
BYOOVIZ.....	71	CARDURA XL	28	CHANTIX CONTINUING MONTH BOX.....	43
C		CARESENS CONTROL A AND B.....	47	CHANTIX STARTING MONTH BOX.....	43
CABENUVA.....	3	CARETOUCH CONTROL SOLN L2-L3	47	<i>charlotte 24 fe</i>	66
<i>cabergoline</i>	51	<i>carglumic acid</i>	42	<i>chateal (28)</i>	66
CABLIVI.....	31	<i>carisoprodol</i>	19	<i>chateal eq (28)</i>	66
CABOMETRYX.....	10	<i>carisoprodol-aspirin</i>	19	CHEMET	42
CADUET.....	33	<i>carisoprodol-aspirin-codeine</i>	19	CHENODAL	55
<i>caffeine citrate</i>	42	CARNITOR.....	42	<i>children's alaway</i>	71
<i>calcipotriene</i>	34	CARNITOR (SUGAR-FREE)	42	<i>chlordiazepoxide hcl</i>	23
<i>calcipotriene-betamethasone</i>	34	<i>carteolol</i>	70	<i>chlordiazepoxide-clidinium</i> ..	54
<i>calcitonin (salmon)</i>	51	<i>cartia xt</i>	28	<i>chloroquine phosphate</i>	6
<i>calcitriol</i>	34	<i>carvedilol</i>	28	<i>chlorpromazine</i>	23
<i>calcium acetate(phosphat bind)</i>	78	<i>carvedilol phosphate</i>	28	<i>chlorthalidone</i>	28
CALQUENCE (ACALABRUTINIB MAL)	10	CARVEDILOL.....	28	<i>chlorzoxazone</i>	19
CAMBIA.....	21	CARVYKTI	10	CHOLBAM	55
<i>camila</i>	64	CASODEX.....	10	<i>cholestyramine (with sugar)</i> .	33
<i>camrese</i>	66	CATAPRES-TTS-1.....	28	<i>cholestyramine light</i>	33
<i>camrese lo</i>	66	CATAPRES-TTS-2.....	28	CIBINQO	35
CAMZYOS	34	CATAPRES-TTS-3.....	28	<i>ciclodan</i>	38
<i>candesartan</i>	28	CAYA CONTOURED	64	CICLODAN KIT	38
<i>candesartan-</i> <i>hydrochlorothiazid</i>	28	CAYSTON	6	<i>ciclopirox</i>	38, 39
CANTHARIDIN IN ACETONE	35	<i>caziant (28)</i>	66	<i>ciclopirox-ure-camph-menth-</i> <i>euc</i>	39
<i>capecitabine</i>	10	<i>cefaclor</i>	5	<i>cilostazol</i>	31
CAPEX.....	40	<i>cefadroxil</i>	5	CIMDUO.....	3
CAPLYTA	23	<i>cefdinir</i>	5	CIMERLI.....	71
CAPRELSA	10	<i>cefixime</i>	5	<i>cimetidine</i>	57
<i>captopril</i>	28	<i>cefprozime</i>	5	<i>cimetidine hcl</i>	57
<i>captopril-hydrochlorothiazide</i>	28	<i>cefprozil</i>	5	<i>cinacalcet</i>	51
		<i>cefuroxime axetil</i>	5	CINRYZE.....	75
		<i>celecoxib</i>	21	CIPRO	7
		CELLCEPT	10	<i>ciprofloxacin</i>	7
		CELONTIN	15	<i>ciprofloxacin hcl</i>	7, 44, 69
		CENTANY.....	38	<i>ciprofloxacin-dexamethasone</i>	44

<i>citalopram</i>	23	COARTEM	6	CYCLOGYL	70
<i>citrate of magnesium</i>	55	COCAINE	38	CYCLOMYDRIL	73
<i>citroma</i>	55	<i>codeine sulfate</i>	20	<i>cyclopentolate</i>	70
<i>claravis</i>	36	<i>codeine-butalbital-asa-caff</i> ..	20	<i>cyclopen-tropic-phenyleph-</i>	
CLARINEX	74	COLAZAL	55	<i>watr</i>	70
CLARINEX-D 12 HOUR	74	<i>colchicine</i>	62	CYCLOPENT-TROPIC-	
<i>clarithromycin</i>	5	<i>colesevelam</i>	33	PHEN-KETR-WAT	70
<i>classic prenatal</i>	79	COLESTID	33	<i>cyclophosphamide</i>	10
<i>clearlax</i>	55	<i>colestipol</i>	33	CYCLOPHOSPHAMIDE	10
<i>clemastine</i>	74	COMBIGAN	72	CYCLOSERINE	6
CLEOCIN	65	COMBIPATCH	64	CYCLOSET	53
CLEOCIN HCL	6	COMBIVENT RESPIMAT ..	75	<i>cyclosporine</i>	10, 71
CLEOCIN PEDIATRIC	6	COMETRIQ	10	CYCLOSPORINE IN	
CLEOCIN T	36	COMPACT SPACE		KLARITY	71
CLEVER CHOICE LEVEL 2		CHAMBER	46	<i>cyclosporine modified</i>	10
CONTROL	47	COMPAZINE	55	CYLTEZO(CF)	63
CLIMARA	64	<i>complete natal dha</i>	79	CYLTEZO(CF) PEN	63
<i>clindacin</i>	36	<i>compro</i>	55	CYLTEZO(CF) PEN	
<i>clindacin etz</i>	36	<i>constulose</i>	55	CROHN'S-UC-HS	63
CLINDACIN ETZ	36	CONTOUR CONTROL		CYLTEZO(CF) PEN	
<i>clindacin p</i>	36	SOLUTION, NML	47	PSORIASIS-UV	63
CLINDACIN PAC	36	CONTOUR NEXT LEV 2		<i>cyproheptadine</i>	74
<i>clindamycin hcl</i>	6	CONTROL SOL	47	CYRAMZA	10
<i>clindamycin pediatric</i>	6	COPIKTRA	10	<i>cyred</i>	67
<i>clindamycin phosphate</i> ..	36, 37,	CORDRAN	40	<i>cyred eq</i>	67
65		CORDRAN TAPE LARGE		CYSTAGON	78
<i>clindamycin-benzoyl peroxide</i>		ROLL	40	CYSTARAN	71
.....	37	COREG CR	28	CYTOGAM	60
<i>clindamycin-tretinoin</i>	37	CORGARD	29	CYTOTEC	57
CLINDESSE	65	CORIFACT	31	D	
<i>clobazam</i>	15	CORTANE-B	35	<i>dabigatran etexilate</i>	31
<i>clobetasol</i>	40	CORTEF	45	<i>dalfampridine</i>	18
<i>clobetasol-emollient</i>	40	CORTENEMA	55	<i>danazol</i>	51
CLOBEX	40	<i>cortisone</i>	45	DANTRIUM	19
<i>clocortolone pivalate</i>	40	CORTISPORIN-TC	44	<i>dantrolene</i>	19
<i>clodan</i>	40	COSELA	10	DANYELZA	10
CLODAN KIT	40	COTELLIC	10	<i>dapsone</i>	6, 37
<i>clomipramine</i>	23	COTEMPLA XR-ODT	24	DAPTACEL (DTAP	
<i>clonazepam</i>	15	<i>covaryx</i>	64	PEDIATRIC) (PF)	60
<i>clonidine</i>	28	<i>covaryx h.s.</i>	64	DARAPRIM	6
<i>clonidine hcl</i>	23, 28	CREON	55	<i>darifenacin</i>	77
<i>clopidogrel</i>	31	CRESEMBA	3	<i>darunavir</i>	3
<i>clorazepate dipotassium</i>	23	<i>cromolyn</i>	55, 71, 75	DARZALEX	10
<i>clotrimazole</i>	3, 39	<i>crotan</i>	42	DARZALEX FASPRO	10
<i>clotrimazole-betamethasone</i> ..	39	<i>cryselle (28)</i>	66	<i>dasetta 1/35 (28)</i>	67
<i>clozapine</i>	23	CRYSVITA	51	<i>dasetta 7/7/7 (28)</i>	67
CLOZARIL	23	<i>curae</i>	67	DAURISMO	10
<i>c-nate dha</i>	79	CUVITRU	60	DAYPRO	21
COAGADEX	31	<i>cyclobenzaprine</i>	19	<i>daysee</i>	67

DAYTRANA	24	<i>dexchlorpheniramine maleate</i>	31
DAYVIGO	24	.....	74
DDAVP	51	DEXCOM G6 RECEIVER ..	47
<i>deblitane</i>	64	DEXCOM G6 SENSOR	47
<i>decitabine</i>	10	DEXCOM G6	
<i>deferasirox</i>	42	TRANSMITTER.....	47
<i>deferiprone</i>	42	DEXCOM G7 RECEIVER ..	47
<i>deflazacort</i>	45	DEXCOM G7 SENSOR	47
DELESTROGEN	64	DEXEDRINE SPANSULE ..	24
<i>demeclocycline</i>	8	<i>dexlansoprazole</i>	57
DEMSEER.....	29	<i>dexmethylphenidate</i>	24
DENAVIR.....	39	DEXTENZA.....	73
DENGVAXIA (PF).....	60	<i>dextroamphetamine sulfate</i> ..	24
DEPAKOTE.....	15	<i>dextroamphetamine-</i>	
DEPAKOTE ER.....	15	<i>amphetamine</i>	24
DEPAKOTE SPRINKLES ..	15	DEXYCU (PF)	73
DEPEN TITRATABS	63	DIACOMIT	15
DEPO-ESTRADIOL.....	64	<i>dialyvite 800</i>	79
DEPO-PROVERA	64	DIATRUE CONTROL SOLN	
DEPO-SUBQ PROVERA	104	NORMAL.....	47
.....	64	<i>diazepam</i>	15, 24
DEPO-TESTOSTERONE... 51		<i>diazepam intensol</i>	24
<i>dermacinrx lidocan</i>	38	<i>diazoxide</i>	46
DERMA-SMOOTH/FS		DIBENZYLINE	29
BODY OIL	40	<i>dichlorphenamide</i>	18
DERMA-SMOOTH/FS		<i>diclofenac potassium</i>	21
SCALP OIL	40	<i>diclofenac sodium</i>	21, 72
DERMOTIC OIL	44	<i>diclofenac-misoprostol</i>	21
DESCOVY	3	<i>dicloxacillin</i>	7
<i>desipramine</i>	24	<i>dicyclomine</i>	54
<i>desloratadine</i>	74	DIFICID	5
<i>desmopressin</i>	51	<i>diflorasone</i>	40
DESMOPRESSIN.....	51	DIFLUCAN.....	3
<i>desog-e.estradiol/e.estradiol</i> 67		<i>diflunisal</i>	21
<i>desonide</i>	40	<i>difluprednate</i>	73
<i>desoximetasone</i>	40	<i>digoxin</i>	31
DESOXYN.....	24	<i>dihydroergotamine</i>	17
DESVENLAFAXINE	24	DILANTIN.....	15
<i>desvenlafaxine succinate</i>	24	DILANTIN EXTENDED.....	15
<i>dexabliss</i>	45	DILANTIN INFATABS	15
<i>dexamethasone</i>	45	DILANTIN-125.....	15
<i>dexamethasone intensol</i>	45	DILAUDID	20
<i>dexamethasone sodium</i>		<i>diltiazem</i>	29
<i>phosphate</i>	73	<i>dilt-xr</i>	29
DEXAMETH-		<i>dimethyl fumarate</i>	59
MOXIFLOX(PF)-		DIPHEN	74
NACL,ISO.....	72	<i>diphenoxylate-atropine</i>	54
DEXAMET-MOXIFL-		DIPROLENE	
KETORO-NACL(PF)	71	(AUGMENTED).....	40
		<i>dipyridamole</i>	31
		DISALCID	21
		<i>diskets</i>	20
		<i>disopyramide phosphate</i>	27
		<i>disulfiram</i>	42
		DIURIL.....	29
		<i>divalproex</i>	15
		<i>dofetilide</i>	27
		DOJOLVI	78
		<i>dolishale</i>	67
		<i>donepezil</i>	18
		DONNATAL.....	54
		DOPTELET (15 TAB PACK)	
		.....	31
		<i>dorzolamide</i>	72
		DORZOLAMIDE (PF).....	72
		<i>dorzolamide-timolol</i>	72
		<i>dorzolamide-timolol (pf)</i>	72
		<i>dotti</i>	64
		DOVATO	3
		<i>doxazosin</i>	29
		<i>doxepin</i>	24, 35
		<i>doxercalciferol</i>	51
		<i>doxycycline hyclate</i>	8
		<i>doxycycline monohydrate</i>	8
		<i>dronabinol</i>	55
		<i>drospirenone-e.estradiol-lm.fa</i>	
		.....	67
		<i>drospirenone-ethinyl estradiol</i>	
		.....	67
		DROXIA.....	10
		<i>droxidopa</i>	42
		DSUVIA	20
		DUAVEE.....	65
		DUET DHA WITH OMEGA-3	
		.....	79
		DUETACT	53
		<i>dulcolax (magnesium</i>	
		<i>hydroxide)</i>	55
		DULERA	75
		<i>duloxetine</i>	24
		DUOBRII	40
		DUOPA	17
		DUPIXENT PEN.....	35
		DUPIXENT SYRINGE.....	35
		DUREX AVANTI BARE	
		REAL FEEL	64
		DUREX TROPICAL	
		CONDOM	64

<i>dutasteride</i>	77	ELAPRASE.....	51	ENGERIX-B PEDIATRIC	
<i>dutasteride-tamsulosin</i>	77	ELEMENT COMPACT		(PF).....	60
DYMISTA.....	75	NORMAL CONTROL.....	47	ENHERTU	10
DYRENIUM	29	ELEMENT NORMAL		<i>enilloring</i>	65
DYSPORT.....	60	CONTROL	47	ENJAYMO	42
E		ELEPSIA XR	15	<i>enoxaparin</i>	31
<i>e.e.s. 400</i>	5	<i>eletriptan</i>	17	<i>enpresse</i>	67
E.E.S. GRANULES	5	ELFABRIO	51	<i>enskyce</i>	67
EASIVENT HOLDING		ELIGARD	10	ENSPRYNG.....	10
CHAMBER	46	ELIGARD (3 MONTH)	10	ENSTILAR.....	34
EASY PLUS II HIGH		ELIGARD (4 MONTH)	10	<i>entacapone</i>	17
CONTROL	47	ELIGARD (6 MONTH)	10	<i>entecavir</i>	4
EASY STEP HIGH		ELIMITE	42	ENTRESTO.....	34
CONTROL SOLN.....	47	<i>elinest</i>	67	ENTRESTO SPRINKLE.....	34
EASY TALK HIGH		ELIQUIS	31	ENTYVIO	55
CONTROL	47	ELIQUIS DVT-PE TREAT		<i>enulose</i>	55
EASY TALK PLUS II LOW		30D START	31	EPCLUSA	4
CONTROL	47	ELIXOPHYLLIN.....	75	EPIDIOLEX	15
EASY TOUCH BLU CTRL		ELLA.....	67	EPIDUO FORTE.....	37
SOLN-L1,L3	47	ELMIRON.....	78	EPIFOAM.....	34
EASY TRAK II CTRL SOLN-		ELOCTATE	31	<i>epinastine</i>	71
NORMAL.....	47	ELREXFIO.....	10	<i>epinephrine</i>	74
EASY TRAK LOW		<i>eluryng</i>	65	<i>epinephrine hcl</i>	75
CONTROL	47	ELZONRIS.....	10	EPINEPHRINE HCL (PF) ...	74
EASYMAX 15 LEVEL 2	47	EMBRACE EVO LEVEL 1.....	47	EPIPEN.....	74
EASYMAX NORMAL		EMBRACE GLUCOSE		EPIPEN JR	74
CONTROL	47	CONTROL LOW	47	<i>epitol</i>	15
EC-NAPROSYN.....	21	EMBRACE TALK		EPIVIR	4
<i>econazole</i>	39	CONTROL-LOW (L1).....	47	<i>eplerenone</i>	29
<i>econtra ez</i>	67	EMGALITY PEN.....	17	<i>epoprostenol</i>	29
<i>econtra one-step</i>	67	EMGALITY SYRINGE.....	17	<i>eprosartan</i>	29
<i>ecotrin low strength</i>	21	EMPAVELI.....	42	EPSOLAY	37
<i>edaravone</i>	18	EMPLICITI	10	EQUETRO	15
EDECRIIN.....	29	EMSAM	24	ERBITUX.....	10
EDLUAR.....	24	<i>emtricitabine</i>	3	<i>ergoloid</i>	24
<i>ed-spaz</i>	54	<i>emtricitabine-tenofovir (tdf)</i> ...	4	ERGOMAR	17
EDURANT.....	3	EMTRIVA.....	4	<i>ergotamine-caffeine</i>	17
<i>eemt</i>	65	EMVERM	6	<i>eribulin</i>	10
<i>eemt hs</i>	65	<i>emzahh</i>	65	ERIVEDGE	10
<i>efavirenz</i>	3	<i>enalapril maleate</i>	29	ERLEADA	10
<i>efavirenz-emtricitabin-tenofov</i> 3		<i>enalapril-hydrochlorothiazide</i>		<i>erlotinib</i>	10
<i>efavirenz-lamivu-tenofov disop</i>		.....	29	ERMEZA.....	54
.....	3	ENBREL	63	<i>errin</i>	65
<i>effer-k</i>	78	ENBREL MINI	63	ERWINASE	10
EFFER-K.....	78	ENBREL SURECLICK	63	<i>ery pads</i>	37
EFFIENT.....	31	ENDARI.....	42	<i>erygel</i>	37
EFUDEX	35	<i>endocet</i>	20	ERYPED 200.....	5
EGRIFTA SV	59	ENGERIX-B (PF)	60	ERYPED 400.....	5
ELAHERE.....	10			<i>ery-tab</i>	6

ERY-TAB.....	6	EVOTAZ.....	4	FIBRICOR.....	33
<i>erythrocin (as stearate)</i>	6	EVOXAC.....	42	FIBRYGA.....	31
<i>erythromycin</i>	6, 69	EVRYSDI.....	18	FINACEA.....	37
<i>erythromycin ethylsuccinate</i> ...	6	EXELDERM.....	39	<i>finasteride</i>	77
<i>erythromycin with ethanol</i>	37	EXELON PATCH.....	18	<i> fingolimod</i>	59
<i>erythromycin-benzoyl peroxide</i>		<i>exemestane</i>	10	<i>finzala</i>	67
.....	37	EXSERVAN.....	42	FIORICET.....	20
<i>escitalopram oxalate</i>	24	EXTINA.....	39	FIORICET WITH CODEINE	
ESGIC.....	20	<i>eye allergy itch relief</i>	71	.....	20
<i>esomeprazole magnesium</i>	58	<i>eye allergy itch-redness rlf</i> ...	71	FIRDAPSE.....	18
ESPEROCT.....	31	<i>eye itch relief</i>	71	FIRMAGON KIT W	
<i>estarylla</i>	67	EYSUVIS.....	73	DILUENT SYRINGE.....	11
<i>estazolam</i>	24	<i>ezetimibe</i>	33	<i>flac otic oil</i>	44
ESTRACE.....	65	<i>ezetimibe-simvastatin</i>	33	FLAGYL.....	6
<i>estradiol</i>	65	F		<i>flavoxate</i>	77
ESTRADIOL.....	65	FABHALTA.....	42	FLEBOGAMMA DIF.....	60
<i>estradiol valerate</i>	65	FACTIVE.....	7	<i>flecainide</i>	27
<i>estradiol-norethindrone acet</i>	65	<i>falmina (28)</i>	67	FLECTOR.....	22
ESTRATEST F.S.....	65	<i>famciclovir</i>	4	FLEXICHAMBER.....	46
<i>estrogens-methyltestosterone</i>	65	<i>famotidine</i>	58	FLOLAN.....	29
<i>eszopiclone</i>	24	FANAPT.....	24	FLOLIPID.....	33
<i>ethacrynic acid</i>	29	FARESTON.....	11	FLOMAX.....	77
<i>ethambutol</i>	6	FARXIGA.....	53	FLUAD TRIV 2024-25(65Y	
<i>ethosuximide</i>	15	FASENRA.....	75	UP)(PF).....	60
<i>ethynodiol diac-eth estradiol</i>	67	FASENRA PEN.....	75	FLUARIX TRIV 2024-2025	
<i>etodolac</i>	21	FC2 FEMALE CONDOM...64		(PF).....	60
<i>etonogestrel-ethinyl estradiol</i>		<i>febuxostat</i>	62	FLUBLOK TRIV 2024-2025	
.....	65	FEIBA NF.....	31	(PF).....	60
<i>etoposide</i>	10	<i>felbamate</i>	15	FLUCELVAX TRIV 2024-	
<i>etravirine</i>	4	FELBATOL.....	16	2025.....	60
EUCRISA.....	35	FELDENE.....	22	FLUCELVAX TRIV 2024-	
EUFLEXXA.....	22	<i>felodipine</i>	29	2025 (PF).....	60
EULEXIN.....	10	<i>fem ph</i>	65	<i>fluconazole</i>	3
EURAX.....	42	FEMARA.....	11	<i>flucytosine</i>	3
<i>euthyrox</i>	54	FEMCAP.....	64	<i>fludarabine</i>	11
EVAMIST.....	65	<i>fenofibrate</i>	33	<i>fludrocortisone</i>	45
<i>everolimus (antineoplastic)</i> ..	10	<i>fenofibrate micronized</i>	33	FLULAVAL TRIV 2024-2025	
<i>everolimus</i>		<i>fenofibrate nanocrystallized</i> ..	33	(PF).....	60
(<i>immunosuppressive</i>).....	10	<i>fenofibric acid</i>	33	FLUMADINE.....	4
EVERSENSE E3 SENSOR-		<i>fenoprofen</i>	22	FLUMIST TRIVALENT	
HOLDER.....	48	FENSOLVI.....	11	2024-2025.....	60
EVERSENSE E3 SMART		<i>fentanyl</i>	20	<i>flunisolide</i>	75
TRANSMITTER.....	48	<i>fentanyl citrate</i>	20	<i>fluocinolone</i>	40
EVISTA.....	62	<i>ferocon</i>	79	<i>fluocinolone acetonide oil</i> ...	44
EVKEEZA.....	33	FERRIPROX.....	42	<i>fluocinolone and shower cap</i>	40
EVOCLIN.....	37	FERRIPROX (2 TIMES A		<i>fluocinonide</i>	40
EVOLUTION NORMAL		DAY).....	42	<i>fluocinonide-e</i>	40
CONTROL.....	48	<i>fesoterodine</i>	77	FLUORESC EIN-	
EVOMELA.....	10	FETZIMA.....	24	BENOXINATE.....	71

<i>fluorescein-proparacaine</i>	71	<i>fosamprenavir</i>	4	GAMIFANT	11
<i>fluoride (sodium)</i>	79	<i>fosfomycin tromethamine</i>	8	GAMMAGARD LIQUID	60
<i>fluorometholone</i>	73	<i>fosinopril</i>	29	GAMMAGARD S-D (IGA < 1	
FLUOROPLEX.....	35	<i>fosinopril-hydrochlorothiazide</i>		MCG/ML).....	60
<i>fluorouracil</i>	35	.....	29	GAMMAPLEX	60
<i>fluoxetine</i>	24	FRAGMIN.....	31	GAMMAPLEX (WITH	
<i>fluphenazine hcl</i>	24	FREESTYLE CONTROL....	48	SORBITOL)	60
<i>flurandrenolide</i>	40	FREESTYLE FREEDOM....	48	GAMUNEX-C.....	60
<i>flurazepam</i>	24	FREESTYLE FREEDOM		GARDASIL 9 (PF).....	61
<i>flurbiprofen</i>	22	LITE	48	GASTROCROM	55
<i>flurbiprofen sodium</i>	72	FREESTYLE INSULINX...45,		<i>gatifloxacin</i>	69
<i>fluticasone propionate</i> ...40, 41,		48		GATTEX 30-VIAL	55
75		FREESTYLE INSULINX		<i>gavilax</i>	55
<i>fluticasone propion-salmeterol</i>		TEST STRIPS	45	<i>gavilyte-c</i>	55
.....	75	FREESTYLE LIBRE 14 DAY		<i>gavilyte-g</i>	55
<i>fluvastatin</i>	33	READER.....	48	<i>gavilyte-n</i>	55
<i>fluvoxamine</i>	24	FREESTYLE LIBRE 14 DAY		GAVRETO	11
FLUZONE HIGH-DOSE		SENSOR.....	48	GAZYVA	11
TRIV 24-25	60	FREESTYLE LIBRE 2		GE100 CONTROL	
FLUZONE TRIV 2024-2025		READER.....	48	SOLUTION NORMAL...48	
.....	60	FREESTYLE LIBRE 2		<i>gefitinib</i>	11
FLUZONE TRIV 2024-2025		SENSOR.....	48	GELCLAIR	44
(PF).....	60	FREESTYLE LIBRE 3 PLUS		GELX	44
FML LIQUIFILM.....	73	SENSOR.....	48	<i>gemfibrozil</i>	33
<i>folic acid</i>	79	FREESTYLE LIBRE 3		<i>gemmily</i>	67
<i>folitab</i>	79	READER.....	48	GEMTESA	77
FOLOTYN	11	FREESTYLE LIBRE 3		<i>generlac</i>	55
<i>foltabs 800</i>	79	SENSOR.....	48	<i>gengraf</i>	11
<i>fondaparinux</i>	31	FREESTYLE LITE METER48		GENOTROPIN.....	59
FORA 6 CONNECT		FREESTYLE LITE STRIPS 45		GENOTROPIN MINIQUICK	
MULTIFUNCTN MTR....	48	FREESTYLE PRECISION		.....	59
FORA GTEL MULTI-		NEO STRIPS.....	45	<i>gentamicin</i>	38, 69
FUNCTN MONITOR	48	FREESTYLE TEST	45	GENTEEL VACUUM	
FORA KETONE CONTROL		FROVA	17	LANCING DEVICE	48
SOLN-L1.....	48	<i>frovatriptan</i>	17	<i>gentle laxative (bisacodyl)</i>	55
FORA NORMAL CONTROL		<i>full spectrum b-vitamin c</i>	79	<i>gentle laxative (mag hydrox)</i> 55	
.....	48	FULPHILA.....	58	<i>gentlelax</i>	55
FORA TN'G ADV MOBILE		FURADANTIN	8	GENVOYA	4
MULTI MTR.....	48	<i>furosemide</i>	29	GEODON	24
FORA TN'G ADVANCE		FUZEON	4	GILOTRIF	11
MULTI-FN MTR	48	FYARRO.....	11	GIVLAARI.....	42
FORA TN'G ADVANCE PRO		<i>fyavolv</i>	65	GLASSIA	42
MONITOR	48	FYCOMPA.....	16	<i>glatiramer</i>	59
FORACARE GDH LOW		G		<i>glatopa</i>	59
CONTROL	48	<i>gabapentin</i>	16	GLEOSTINE	11
<i>formoterol fumarate</i>	75	GALAFOLD	52	GLIADEL WAFER.....	11
FORTEO	62	<i>galantamine</i>	18	<i>glimepiride</i>	53
FOSAMAX	62	GALZIN	78	<i>glipizide</i>	53
FOSAMAX PLUS D.....	62	GAMASTAN	60	<i>glipizide-metformin</i>	53

GLOPERBA.....	62	<i>hailey 24 fe</i>	67	<i>homatropaire</i>	70
<i>glucagon emergency kit</i>		<i>hailey fe 1.5/30 (28)</i>	67	HORIZANT.....	18
(<i>human</i>).....	46	<i>hailey fe 1/20 (28)</i>	67	HUMALOG JUNIOR	
GLUCAGON HCL.....	46	HALAVEN.....	11	KWIKPEN U-100.....	50
GLUCOCARD 01 NORMAL		<i>halcinonide</i>	41	HUMALOG KWIKPEN	
CONTROL.....	48	HALCION.....	24	INSULIN.....	50
GLUCOCOM CONTROL		<i>halobetasol propionate</i>	41	HUMALOG MIX 50-50	
NORMAL.....	48	<i>haloette</i>	65	KWIKPEN.....	50
GLUCOSE CONTROL.....	48	HALOG.....	41	HUMALOG MIX 75-25	
GLUCOTROL XL.....	53	<i>haloperidol</i>	24	KWIKPEN.....	50
<i>glutamine (sickle cell)</i>	42	<i>haloperidol lactate</i>	25	HUMALOG MIX 75-25(U-	
<i>glyburide</i>	53	HARVONI.....	4	100)INSULN.....	50
<i>glyburide micronized</i>	53	HAVRIX (PF).....	61	HUMALOG TEMPO PEN(U-	
<i>glyburide-metformin</i>	53	HEALTHPRO HIGH-LOW		100)INSULN.....	50
<i>glycopyrrolate</i>	54	CONTROL.....	49	HUMALOG U-100 INSULIN	
GLYXAMBI.....	53	<i>heather</i>	65	.....	50
GOJJI GLUCOSE CNTRL		HEMGENIX.....	31	HUMATE-P.....	32
SOL-NORMAL.....	48	HEMLIBRA.....	31	HUMATIN.....	6
GOJJI KETONE CONTROL		<i>hemmorex-hc</i>	56	HUMIRA (ONLY NDCS	
SOLN-L1.....	48	HEMOFIL M HIGH.....	31	STARTING WITH 00074)	
GOJJI MULTI-FUNCTIONAL		HEMOFIL M LOW.....	31	.....	63
METER.....	49	HEMOFIL M MID.....	31	HUMIRA PEN (ONLY NDCS	
GOLYTELY.....	55	HEMOFIL M SUPER HIGH.....	31	STARTING WITH 00074)	
GONITRO.....	34	<i>hep flush-10 (pf)</i>	31	.....	63
GOPRELTO.....	38	<i>heparin (porcine)</i>	31	HUMIRA(CF) (ONLY NDCS	
GRALISE.....	16	HEPARIN (PORCINE) IN		STARTING WITH 00074)	
<i>granisetron hcl</i>	56	0.9% NACL.....	31	.....	63
GRASTEK.....	61	<i>heparin (porcine) in 5 % dex</i>	31	HUMIRA(CF) PEN (ONLY	
<i>griseofulvin microsize</i>	3	<i>heparin (porcine) in nacl (pf)</i>		NDCS STARTING WITH	
<i>griseofulvin ultramicrosize</i>	3	.....	31	00074).....	63
<i>guanfacine</i>	24, 29	HEPARIN (PORCINE) IN		HUMIRA(CF) PEN	
GUARDIAN 4 GLUCOSE		NACL (PF).....	32	CROHNS-UC-HS (ONLY	
SENSOR.....	49	<i>heparin lock flush (porcine)</i>	32	NDCS STARTING WITH	
GUARDIAN 4		<i>heparin lockflush(porcine)(pf)</i>		00074).....	63
TRANSMITTER.....	49	.....	32	HUMIRA(CF) PEN	
GUARDIAN CONNECT		<i>heparin(porcine) in 0.45% nacl</i>		PEDIATRIC UC (ONLY	
TRANSMITTER.....	49	.....	32	NDCS STARTING WITH	
GUARDIAN LINK 3		HEPARIN(PORCINE) IN		00074).....	63
TRANSMITTER.....	49	0.45% NACL.....	32	HUMIRA(CF) PEN PSOR-	
GUARDIAN SENSOR 3.....	49	<i>heparin, porcine (pf)</i>	32	UV-ADOL HS (ONLY	
GVOKE.....	46	HEPARIN, PORCINE (PF).....	32	NDCS STARTING WITH	
GVOKE HYOPEN 2-PACK		HEPLISAV-B (PF).....	61	00074).....	63
.....	46	HEPZATO (50 MM		HUMULIN 70/30 U-100	
GVOKE PFS 2-PACK		CATHETER).....	11	INSULIN.....	50
SYRINGE.....	46	<i>her style</i>	67	HUMULIN 70/30 U-100	
GYNAZOLE-1.....	65	HETLIOZ.....	25	KWIKPEN.....	50
H		HETLIOZ LQ.....	25	HUMULIN N NPH INSULIN	
HAEGARDA.....	75	HIBERIX (PF).....	61	KWIKPEN.....	50
<i>hailey</i>	67	HIZENTRA.....	61		

HUMULIN N NPH U-100	<i>ibu</i>	22	IODOFLEX.....	35
INSULIN.....	<i>ibuprofen</i>	22	IODOSORB.....	35
HUMULIN R REGULAR U-	<i>icatibant</i>	76	IOPIDINE.....	73
100 INSULN.....	<i>iclevia</i>	67	IPOL.....	61
HUMULIN R U-500 (CONC)	ICLUSIG.....	11	<i>ipratropium bromide</i>	44, 76
INSULIN.....	<i>icosapent ethyl</i>	33	<i>ipratropium-albuterol</i>	76
HUMULIN R U-500 (CONC)	IDELVION.....	32	<i>irbesartan</i>	29
KWIKPEN.....	IDHIFA.....	11	<i>irbesartan-hydrochlorothiazide</i>	29
HYCANTIN.....	IGALMI.....	25	.....	29
HYCODAN (WITH	IHEEZO (PF).....	71	IRESSA.....	11
HOMATROPINE).....	ILARIS (PF).....	58	ISENTRESS.....	4
<i>hydralazine</i>	ILEVRO.....	72	ISENTRESS HD.....	4
HYDREA.....	ILUVIEN.....	73	<i>isibloom</i>	67
<i>hydrochlorothiazide</i>	<i>imatinib</i>	11	<i>isoniazid</i>	6
<i>hydrocodone bitartrate</i>	IMBRUVICA.....	11	ISORDIL.....	34
<i>hydrocodone-acetaminophen</i>	IMDELLTRA.....	11	ISORDIL TITRADOSE.....	34
<i>hydrocodone-</i>	IMFINZI.....	11	<i>isosorbide dinitrate</i>	34
<i>chlorpheniramine</i>	<i>imipramine hcl</i>	25	<i>isosorbide mononitrate</i>	34
<i>hydrocodone-homatropine</i> ..	<i>imipramine pamoate</i>	25	<i>isosorbide-hydralazine</i>	29
<i>hydrocodone-ibuprofen</i>	<i>imiquimod</i>	61	<i>isotretinoin</i>	37
<i>hydrocortisone</i>	IMJUDO.....	11	<i>isradipine</i>	29
<i>hydrocortisone acetate</i>	IMLYGIC.....	11	ISTODAX.....	11
<i>hydrocortisone butyrate</i>	IMOVAX RABIES VACCINE		<i>itraconazole</i>	3
<i>hydrocortisone valerate</i>	(PF).....	61	<i>ivabradine</i>	34
<i>hydrocortisone-acetic acid</i> ...	IMPAVIDO.....	6	<i>ivermectin</i>	6, 37
<i>hydrocortisone-pramoxine</i> ..	IMURAN.....	11	IWILFIN.....	11
56	INBRIJA.....	17	IXCHIQ (PF).....	61
<i>hydromet</i>	<i>incassia</i>	65	IXEMPRA.....	11
<i>hydromorphone</i>	INCRELEX.....	42	IXIARO (PF).....	61
<i>hydroxychloroquine</i>	<i>indapamide</i>	29	J	
<i>hydroxyurea</i>	<i>indomethacin</i>	22	<i>jaimiess</i>	67
<i>hydroxyzine hcl</i>	INFANRIX (DTAP) (PF).....	61	JAKAFI.....	11
<i>hydroxyzine pamoate</i>	INFINITY CONTROL		<i>jantoven</i>	32
HYFTOR.....	SOLUTION NORM.....	49	JANUMET.....	53
<i>hyoscyamine sulfate</i>	INFLECTRA.....	56	JANUMET XR.....	53
<i>hyosyne</i>	INGREZZA.....	18	JANUVIA.....	53
HYPERSAL.....	INGREZZA INITIATION		JARDIANCE.....	53
HYQVIA.....	PK(TARDIV).....	18	<i>jasmiel (28)</i>	67
HYRIMOZ PEN CROHN'S-	INGREZZA SPRINKLE.....	18	JATENZO.....	52
UC STARTER.....	INLYTA.....	11	<i>javygtor</i>	52
HYRIMOZ PEN PSORIASIS	INSPIRA.....	29	JELMYTO.....	11
STARTER.....	INSULIN LISPRO.....	50	JEMPERLI.....	11
HYRIMOZ(CF).....	INSULIN LISPRO		<i>jencycla</i>	65
HYRIMOZ(CF) PEDI	PROTAMIN-LISPRO.....	51	JEVTANA.....	11
CROHN STARTER.....	INTELENCE.....	4	<i>jinteli</i>	65
HYRIMOZ(CF) PEN.....	INVEGA.....	25	JIVI.....	32
HYSINGLA ER.....	INVEGA SUSTENNA.....	25	JOENJA.....	42
I	INVEGA TRINZA.....	25	<i>jolessa</i>	67
<i>ibandronate</i>	INVELTYS.....	73	JORNAY PM.....	25

<i>joyeaux</i>	67	<i>klor-con m20</i>	78	<i>larin fe 1.5/30 (28)</i>	67
JUBLIA	39	<i>klor-con/ef</i>	78	<i>larin fe 1/20 (28)</i>	67
<i>juleber</i>	67	KLOXXADO	22	LASIX	29
JULUCA.....	4	KOATE	32	LASTACRAFT ONCE DAILY	
<i>junel 1.5/30 (21)</i>	67	<i>kobee</i>	79	RELIEF.....	71
<i>junel 1/20 (21)</i>	67	KOGENATE FS.....	32	<i>latanoprost</i>	72
<i>junel fe 1.5/30 (28)</i>	67	KORSUVA.....	42	<i>laxative (bisacodyl)</i>	56
<i>junel fe 1/20 (28)</i>	67	KOSELUGO	11	<i>laxative peg 3350</i>	56
<i>junel fe 24</i>	67	KOSHER PRENATAL PLUS		<i>layolis fe</i>	67
JUXTAPID.....	33	IRON	79	<i>leena 28</i>	67
JYNARQUE.....	52	<i>kourzeq</i>	44	<i>leflunomide</i>	63
K		KOVALTRY	32	LEMTRADA.....	59
KADCYLA	11	K-PHOS NO 2.....	78	<i>lenalidomide</i>	11
<i>kaitlib fe</i>	67	K-PHOS ORIGINAL	78	LENVIMA.....	11
KALBITOR.....	76	KRINTAFEL.....	6	LESCOL XL.....	33
KALETRA	4	KRISTALOSE.....	56	<i>lessina</i>	67
<i>kalliga</i>	67	KRYSTEXXA.....	62	<i>letrozole</i>	12
KALYDECO.....	76	K-TAB.....	78	<i>leucovorin calcium</i>	9
KANJINTI.....	11	<i>kurvelo (28)</i>	67	LEUKERAN.....	12
KANUMA.....	52	KYLEENA	64	LEUKINE.....	58
KARBINAL ER.....	74	KYMRIAH.....	11	<i>leuprolide</i>	12
<i>kariva (28)</i>	67	KYPROLIS	11	<i>levalbuterol hcl</i>	76
<i>kelnor 1/35 (28)</i>	67	L		LEVBID	54
<i>kelnor 1/50 (28)</i>	67	<i>l norgest/e.estradiol-e.estrad</i>	67	<i>levetiracetam</i>	16
KENALOG.....	41	<i>labetalol</i>	29	<i>levobunolol</i>	70
KEPIVANCE	9	<i>lacosamide</i>	16	<i>levocarnitine</i>	42
KERENDIA	29	<i>lactated ringers</i>	42	<i>levocarnitine (with sugar)</i>	43
KESIMPTA PEN	59	<i>lactulose</i>	56	<i>levocetirizine</i>	74
<i>ketoconazole</i>	3, 39	LAGEVRIO (EUA).....	4	<i>levofloxacin</i>	7, 69
<i>ketodan</i>	39	LAMICTAL XR STARTER		<i>levonest (28)</i>	67
<i>ketodan kit</i>	39	(BLUE).....	16	<i>levonorgest-eth.estradiol-iron</i>	
<i>ketoprofen</i>	22	LAMICTAL XR STARTER		.....	68
<i>ketorolac</i>	22, 72	(GREEN).....	16	<i>levonorgestrel</i>	68
<i>ketotifen fumarate</i>	71	LAMICTAL XR STARTER		<i>levonorgestrel-ethinyl estrad</i>	68
KEYTRUDA.....	11	(ORANGE).....	16	<i>levonorg-eth estrad triphasic</i>	68
KIMMTRAK.....	11	<i>lamivudine</i>	4	<i>levora-28</i>	68
KINRIX (PF).....	61	<i>lamivudine-zidovudine</i>	4	<i>levorphanol tartrate</i>	20
<i>kiprofen</i>	22	<i>lamotrigine</i>	16	<i>levo-t</i>	54
KISQALI.....	11	LAMZEDE.....	42	<i>levothyroxine</i>	54
KITABIS PAK	6	LANCETS	49	<i>levoxyl</i>	54
KLARITY (CHONDROITIN)		LANCING DEVICE	49	LEVSIN.....	54
(PF).....	71	LANOXIN.....	31	LEVSIN/SL	54
KLARON	38	<i>lanreotide</i>	11	LEVULAN	36
<i>klayesta</i>	39	<i>lansoprazole</i>	58	LIBTAYO.....	12
<i>klor-con</i>	78	<i>lanthanum</i>	54	LICART.....	22
<i>klor-con 10</i>	78	<i>lapatinib</i>	11	<i>lidocaine</i>	38
<i>klor-con 8</i>	78	<i>larin 1.5/30 (21)</i>	67	<i>lidocaine hcl</i>	38
<i>klor-con m10</i>	78	<i>larin 1/20 (21)</i>	67	<i>lidocaine hcl-hydrocortison ac</i>	
<i>klor-con m15</i>	78	<i>larin 24 fe</i>	67	.....	38, 56

LIDOCAINE HCL-	<i>losartan-hydrochlorothiazide</i>	<i>mafenide acetate</i>	38
HYDROCORTISON AC .56	.....	<i>magnesium citrate</i>	56
<i>lidocaine viscous</i>	LOTEMAX	MALARONE	6
<i>lidocaine-hydrocortisone-aloe</i>	LOTEMAX SM.....	MALARONE PEDIATRIC....	6
.....	LOTENSIN	<i>malathion</i>	42
<i>lidocaine-prilocaine</i>	LOTENSIN HCT	<i>maraviroc</i>	4
<i>lidocan iii</i>	<i>loteprednol etabonate</i>	MARGENZA	12
<i>lidocan iv</i>	LOTREXONE	MARINOL	56
<i>lidocan v</i>	<i>lovastatin</i>	<i>marlissa (28)</i>	68
<i>lidocort</i>	<i>low-ogestrel (28)</i>	MARNATAL-F	79
LILETTA	<i>loxapine succinate</i>	MARPLAN.....	25
<i>linezolid</i>	<i>lo-zumandimine (28)</i>	MATULANE.....	12
LINZESS.....	<i>lubiprostone</i>	<i>matzim la</i>	29
<i>liothyronine</i>	<i>ludent fluoride</i>	MAVENCLAD (10 TABLET	
<i>lisdexamfetamine</i>	<i>lugols</i>	PACK)	59
<i>lisinopril</i>	LUMAKRAS.....	MAVENCLAD (4 TABLET	
<i>lisinopril-hydrochlorothiazide</i>	LUMIGAN	PACK)	59
.....	LUMIZYME	MAVENCLAD (5 TABLET	
LITEAIRE MDI CHAMBER	LUMRYZ	PACK)	59
.....	LUNSUMIO.....	MAVENCLAD (6 TABLET	
LITFULO	LUPKYNIS	PACK)	59
<i>lithium carbonate</i>	LUPRON DEPOT	MAVENCLAD (7 TABLET	
<i>lithium citrate</i>	LUPRON DEPOT (3	PACK)	59
LITHOBID	MONTH).....	MAVENCLAD (8 TABLET	
LITHOSTAT.....	LUPRON DEPOT (4	PACK)	59
LIVALO.....	MONTH).....	MAVENCLAD (9 TABLET	
LIVMARLI	LUPRON DEPOT (6	PACK)	59
LIVTENCITY	MONTH).....	MAXITROL	72
LODINE	<i>lurasidone</i>	MAYZENT.....	59
LODOSYN.....	<i>luter a (28)</i>	MAYZENT STARTER(FOR	
<i>lofena</i>	LUXTURNA	1MG MAINT)	59
<i>lojaimiess</i>	LYBALVI	MAYZENT STARTER(FOR	
LOKELMA	<i>lyleq</i>	2MG MAINT)	59
LOMOTIL.....	<i>lyllana</i>	<i>meclizine</i>	56
LONSURF.....	LYNPARZA.....	<i>meclofenamate</i>	22
<i>loperamide</i>	LYSODREN.....	MEDISENSE.....	49
LOPID	LYTGOBI	MEDISENSE GLUCOSE	
<i>lopinavir-ritonavir</i>	LYUMJEV KWIKPEN U-100	KETONE	49
LOPRESSOR	INSULIN.....	MEDROL	45
LOPROX (AS OLAMINE)..	LYUMJEV KWIKPEN U-200	MEDROL (PAK).....	45
LOPROX KIT	INSULIN	<i>medroxyprogesterone</i>	65
LOQTORZI.....	LYUMJEV TEMPO PEN(U-	<i>mefenamic acid</i>	22
<i>lorazepam</i>	100)INSULN	<i>mefloquine</i>	7
<i>lorazepam intensol</i>	LYUMJEV U-100 INSULIN	<i>megestrol</i>	12
LORBRENA .....	.....	MEKINIST	12
<i>loryna (28)</i>	<i>lyza</i>	<i>meloxicam</i>	22
LORZONE	M	<i>meloxicam submicronized</i>	22
<i>losartan</i>	MACROBID	<i>memantine</i>	18, 19
	MACRODANTIN	MEMANTINE.....	19

MENOSTAR.....	65	<i>metoprolol tartrate</i>	29	<i>modafinil</i>	25
MENQUADFI (PF).....	61	METROCREAM.....	37	<i>moexipril</i>	29
MENVEO A-C-Y-W-135-DIP (PF).....	61	METROGEL	37	<i>molindone</i>	25
<i>meperidine</i>	20	<i>metronidazole</i>	7, 37, 65	<i>mometasone</i>	41, 76
<i>meprobamate</i>	19	<i>metryrosine</i>	29	<i>mondoxyne nl</i>	8
MEPRON	7	<i>mexiletine</i>	28	MONJUVI	12
MEPSEVII	52	MIACALCIN	52	MONODOX	8
<i>mercaptopurine</i>	12	<i>mibelas 24 fe</i>	68	<i>mono-lynyah</i>	68
<i>merzee</i>	68	<i>miconazole-3</i>	66	MONOVISC.....	22
<i>mesalamine</i>	56	MICROCHAMBER.....	46	<i>montelukast</i>	76
<i>mesalamine with cleansing wipe</i>	56	<i>microgestin 1.5/30 (21)</i>	68	<i>morgidox</i>	8
MESNEX	9	<i>microgestin 1/20 (21)</i>	68	MORGIDOX 1X 50	8
METADATE CD	25	<i>microgestin 24 fe</i>	68	MORGIDOX 1X100	8
<i>metaxalone</i>	19	<i>microgestin fe 1.5/30 (28)</i>	68	<i>morphine</i>	21
<i>metformin</i>	53	<i>microgestin fe 1/20 (28)</i>	68	<i>morphine concentrate</i>	20
<i>methadone</i>	20	MICROSPACER.....	46	MOTOFEN.....	54
<i>methadose</i>	20	<i>midazolam</i>	25	MOUNJARO	53
<i>methamphetamine</i>	25	MIDAZOLAM.....	25	MOVANTIK	56
<i>methazolamide</i>	72	<i>midodrine</i>	43	MOXATAG.....	7
<i>methenamine hippurate</i>	8	MIEBO (PF).....	71	<i>moxifloxacin</i>	7, 69
<i>methenamine mandelate</i>	8	MIFEPREX	66	MOXIFLOXACIN (PF)-BSS	69
<i>methen-sod phos-meth blue- hyos</i>	78	<i>mifepristone</i>	52, 66	MOXIFLOXACIN-SOD CHLOR,ISO(PF).....	69
<i>methimazole</i>	45	<i>migergot</i>	18	MOZOBIL	58
METHITEST.....	52	<i>miglitol</i>	53	MRESVIA (PF)	61
<i>methocarbamol</i>	19	<i>miglustat</i>	52	MS CONTIN	21
<i>methotrexate sodium</i>	12	MIGRANAL	18	MUGARD	44
<i>methotrexate sodium (pf)</i>	12	<i>mili</i>	68	MULTAQ.....	28
<i>methoxsalen</i>	36	<i>milk of magnesia</i>	56	<i>multi-vitamin with fluoride</i> ...	79
<i>methscopolamine</i>	54	<i>milk of magnesia concentrated</i>	56	<i>mupirocin</i>	38
<i>methsuximide</i>	16	<i>millipred</i>	45	MVASI	12
<i>methyl salicylate</i>	36	<i>millipred dp</i>	45	<i>mvc-fluoride</i>	79
<i>methyl dopa</i>	29	<i>mimvey</i>	65	<i>my choice</i>	68
<i>methyl dopa- hydrochlorothiazide</i>	29	<i>minocycline</i>	8	<i>my way</i>	68
<i>methylergonovine</i>	69	<i>minoxidil</i>	29	MYALEPT	52
METHYLIN.....	25	MIOCHOL-E.....	70	MYCAPSSA.....	12
<i>methylphenidate</i>	25	<i>miostat</i>	72	MYCOBUTIN.....	7
<i>methylphenidate hcl</i>	25	<i>mirabegron</i>	77	<i>mycophenolate mofetil</i>	12
<i>methylprednisolone</i>	45	MIRAPEX ER.....	17	<i>mycophenolate sodium</i>	12
<i>methyltestosterone</i>	52	MIRENA	64	MYDAYIS	25
<i>metoclopramide hcl</i>	56	<i>mirtazapine</i>	25	MYDCOMBI.....	70
<i>metolazone</i>	29	MIRVASO.....	37	MYDRIACYL.....	70
METOPIRONE.....	43	<i>misoprostol</i>	58	MYDRIATIC4(TROP-PROP- PE-KTRLC).....	71
<i>metoprolol succinate</i>	29	MITIGARE	62	MYFEMBREE	66
<i>metoprolol ta-hydrochlorothiaz</i>	29	<i>mitoxantrone</i>	12	MYFORTIC	12
		MKO (MIDAZOLAM- KETAMINE-ONDAN)....	25	MYGLUCOHEALTH CONTROL SOLUTION ..	49
		M-M-R II (PF).....	61		
		<i>m-natal plus</i>	79		

MYHIBBIN.....	12	<i>neomycin-polymyxin b-</i>		<i>nitro-bid</i>	34
MYLERAN.....	12	<i>dexameth</i>	72	NITRO-DUR.....	34
MYLOTARG.....	12	<i>neomycin-polymyxin-</i>		<i>nitrofurantoin</i>	8
<i>mynatal</i>	79	<i>gramicidin</i>	70	<i>nitrofurantoin macrocrystal</i> ...	8
<i>mynatal plus</i>	79	<i>neomycin-polymyxin-hc</i> ..	44, 72	<i>nitrofurantoin monohyd/m-</i>	
<i>mynatal-z</i>	79	NEONATAL COMPLETE..	79	<i>cryst</i>	8
MYOBLOC.....	61	NEONATAL PLUS		<i>nitroglycerin</i>	34, 56
MYRBETRIQ.....	77	VITAMIN.....	79	NITROLINGUAL.....	34
MYSOLINE.....	16	NEONATAL-DHA.....	79	NITROMIST.....	34
MYXREDLIN.....	51	<i>neo-polycin</i>	70	NITROSTAT.....	34
N		<i>neo-polycin hc</i>	72	<i>nitro-time</i>	34
<i>nabumetone</i>	22	NEORAL.....	12	NITYR.....	43
<i>nadolol</i>	29	NEO-SYNALAR.....	38	<i>niva thyroid</i>	54
<i>naftifine</i>	39	NEO-SYNALAR KIT.....	38	NIVESTYM.....	58
NAFTIN.....	39	NERLYNX.....	12	<i>nizatidine</i>	58
NAGLAZYME.....	52	NESTABS.....	79	NOC DURNA (MEN).....	52
NALFON.....	22	NESTABS ABC.....	79	NOC DURNA (WOMEN).....	52
NALOCET.....	21	NESTABS DHA.....	79	<i>nora-be</i>	65
<i>naloxone</i>	22	<i>neuac</i>	37	<i>norelgestromin-ethin.estradiol</i>	
NALTREX.....	22	NEUAC KIT.....	37	.....	66
<i>naltrexone</i>	22	NEUPRO.....	17	<i>noreth-ethinyl estradiol-iron</i>	68
NAMENDA TITRATION		<i>nevirapine</i>	4	<i>norethindrone (contraceptive)</i>	
PAK.....	19	<i>new day</i>	68	.....	65
NAMENDA XR.....	19	<i>newgen</i>	79	<i>norethindrone acetate</i>	65
NAMZARIC.....	19	NEXAVAR.....	12	<i>norethindrone ac-eth estradiol</i>	
NAPROSYN.....	22	NEXLETOL.....	33	.....	65, 68
<i>naproxen</i>	22	NEXLIZET.....	33	<i>norethindrone-e.estradiol-iron</i>	
<i>naproxen sodium</i>	22	NEXOBRID.....	41	.....	68
<i>naratriptan</i>	18	NEXPLANON.....	66	NORGESIC.....	19
NARCAN.....	22	NEXVIAZYME.....	52	NORGESIC FORTE.....	19
NARDIL.....	25	NGENLA.....	59	<i>norgestimate-ethinyl estradiol</i>	
NATACHEW (FE BIS-		<i>niacin</i>	33	.....	68
GLYCINATE).....	79	NIACOR.....	33	<i>nortrel 0.5/35 (28)</i>	68
NATACYN.....	69	<i>nicardipine</i>	29	<i>nortrel 1/35 (21)</i>	68
<i>nateglinide</i>	53	NICODERM CQ.....	44	<i>nortrel 1/35 (28)</i>	68
<i>natura-lax</i>	56	<i>nicorette</i>	44	<i>nortrel 7/7/7 (28)</i>	68
NAYZILAM.....	16	NICORETTE.....	44	<i>nortriptyline</i>	26
<i>nebivolol</i>	29	<i>nicotine</i>	44	NORVIR.....	4
NEBUPENT.....	7	<i>nicotine (polacrilex)</i>	44	NOURIANZ.....	17
<i>nebusal</i>	76	NICOTROL NS.....	44	NOVA MAX PLUS GLUC-	
NEBUSAL.....	76	<i>nifedipine</i>	29	KETON METER.....	49
<i>necon 0.5/35 (28)</i>	68	<i>nikki (28)</i>	68	NOVAMAX PLUS GLU-KET	
<i>nefazodone</i>	25	NILANDRON.....	12	.....	49
<i>nelarabine</i>	12	<i>nilutamide</i>	12	NOVOEIGHT.....	32
<i>neomycin</i>	7	<i>nimodipine</i>	30	NOXAFIL.....	3
<i>neomycin-bacitracin-poly-hc</i>	72	NINLARO.....	12	<i>np thyroid</i>	54
<i>neomycin-bacitracin-</i>		<i>nisoldipine</i>	30	NPLATE.....	32
<i>polymyxin</i>	69	<i>nitazoxanide</i>	7	NUBEQA.....	12
<i>neomycin-polymyxin b gu</i>	42	<i>nitisinone</i>	43	NUCALA.....	76

NUCORT	41	<i>omega-3 acid ethyl esters</i>	33	<i>opium tincture</i>	54
NUEDEXTA	19	<i>omeprazole</i>	58	OPSUMIT.....	76
NULEV	54	OMIDRIA	71	OPSYNVI.....	76
NULIBRY	19	OMNIPOD 5 G6 INTRO KIT		OPTICHAMBER DIAMOND	
NUMBRINO	38	(GEN 5)	49	VHC.....	46
NUPLAZID	26	OMNIPOD 5 G6 PODS (GEN		<i>option-2</i>	68
NURTEC ODT.....	18	5).....	49	OPVEE	22
NUVESSA	66	OMNIPOD CLASSIC PODS		OPZELURA	36
NUZYRA	8	(GEN 3)	49	ORACIT	78
<i>nyamyc</i>	39	OMNIPOD DASH INTRO		<i>oral saline laxative</i>	56
<i>nylia 1/35 (28)</i>	68	KIT (GEN 4)	49	ORALAIR	61
<i>nylia 7/7/7 (28)</i>	68	OMNIPOD DASH PODS		<i>oralone</i>	44
NYMALIZE	30	(GEN 4)	49	ORAMAGICRX.....	44
<i>nymyo</i>	68	OMNIPOD GO PODS 10		ORAPRED ODT	45
NYNUTEY.....	38	UNITS/DAY	49	ORAVIG.....	3
<i>nystatin</i>	3, 39	OMNITROPE.....	59	ORENITRAM	30
<i>nystatin-triamcinolone</i>	39	OMVOH.....	56	ORENITRAM MONTH 1	
<i>nystop</i>	39	OMVOH PEN	56	TITRATION KT	30
O		ON CALL EXPRESS		ORENITRAM MONTH 2	
OB COMPLETE ONE	79	CONTROL	49	TITRATION KT	30
OB COMPLETE PETITE....	79	ON CALL PLUS CONTROL		ORENITRAM MONTH 3	
OB COMPLETE PREMIER	79	.....	49	TITRATION KT	30
OB COMPLETE WITH DHA		ON CALL VIVID CONTROL		ORFADIN	43
.....	79	.....	49	ORGOVYX	13
OBIZUR.....	32	<i>ondansetron</i>	56	ORIAHNN.....	66
OICALIVA.....	56	<i>ondansetron hcl</i>	56	ORLISSA	52
<i>ocella</i>	68	<i>one daily prenatal</i>	79	ORKAMBI	76
OCREVUS	59	<i>onelax magnesium citrate</i>	56	ORLADEYO	76
OCTAGAM.....	61	ONETOUCH ULTRA		<i>ormalvi</i>	19
<i>octreotide acetate</i>	12	CONTROL	49	<i>orphenadrine citrate</i>	19
OCUFLOX.....	70	ONETOUCH ULTRA TEST		<i>orphenadrine-asa-caffeine</i> ...	19
ODACTRA.....	61	.....	45	<i>orphengesic forte</i>	19
ODEFSEY.....	4	ONETOUCH ULTRA2		ORSERDU	13
ODOMZO	12	METER	49	ORTHOVISC	22
OFEV	76	ONETOUCH VERIO FLEX		<i>oscimin</i>	54
<i>ofloxacin</i>	8, 44, 70	METER	49	<i>oscimin sl</i>	54
OGSIVEO	12	ONETOUCH VERIO MID		<i>oseltamivir</i>	4
OJEMDA.....	12	CONTROL	49	OSENI	53
<i>olanzapine</i>	26	ONETOUCH VERIO		OTEZLA.....	63
<i>olanzapine-fluoxetine</i>	26	REFLECT METER	49	OTEZLA STARTER.....	63, 64
<i>olmesartan</i>	30	ONETOUCH VERIO TEST		OTOVEL	44
<i>olmesartan-amlodipin-</i>		STRIPS.....	45	OVACE	34
<i>hcthiamid</i>	30	ONEXTON.....	37	OVACE PLUS.....	34
<i>olmesartan-</i>		ONIVYDE.....	12	OVACE PLUS SHAMPOO.....	34
<i>hydrochlorothiazide</i>	30	<i>opcicon one-step</i>	68	OVACE PLUS WASH.....	34
<i>olopatadine</i>	44, 71	OPDIVO.....	12	OVIDE.....	42
OLPRUVA.....	43	OPDUALAG	12	<i>oxaprozin</i>	22
OLUX.....	41	OPFOLDA.....	52	<i>oxazepam</i>	26
OMECLAMOX-PAK	58	OPILL.....	65	<i>oxcarbazepine</i>	16

OXERVATE	71	PEGASYS	59	<i>pindolol</i>	30
<i>oxiconazole</i>	39	<i>peg-electrolyte soln</i>	56	<i>pioglitazone</i>	53
OXLUMO	78	PEMAZYRE	13	<i>pioglitazone-glimepiride</i>	53
OXTELLAR XR	16	PENBRAYA (PF)	61	<i>pioglitazone-metformin</i>	53
<i>oxybutynin chloride</i>	77	<i>peniclovir</i>	39	PIP GLUCOSE CONTROL	
<i>oxycodone</i>	21	<i>penicillamine</i>	64	SOLN L1-L2	49
<i>oxycodone-acetaminophen</i> ...	21	<i>penicillin v potassium</i>	7	PIQRAY	13
OXYCONTIN	21	PENTACEL (PF)	61	<i>pirfenidone</i>	76
<i>oxymorphone</i>	21	<i>pentamidine</i>	7	<i>piroxicam</i>	22
OXYTROL.....	77	PENTASA	56, 57	<i>pitavastatin calcium</i>	33
OZEMPIC	53	<i>pentazocine-naloxone</i>	22	PLAN B ONE-STEP	68
OZURDEX.....	73	<i>pentoxifylline</i>	32	PLEGRIDY	59
P		PEPCID	58	<i>plerixafor</i>	58
<i>pacerone</i>	28	<i>perindopril erbumine</i>	30	PLEXION	37
PACLITAXEL PROTEIN-		PERJETA	13	PLEXION CLEANSING	
BOUND.....	13	<i>permethrin</i>	42	CLOTHS.....	37
PACNEX.....	37	<i>perphenazine</i>	26	PLEXION NS.....	34
PADCEV	13	<i>perphenazine-amitriptyline</i> ..	26	PNEUMOVAX-23	61
<i>paliperidone</i>	26	PHEBURANE.....	43	<i>pnv-select</i>	79
PALYNZIQ.....	52	<i>phenazopyridine</i>	78	POCKET CHAMBER.....	46
PAMELOR.....	26	<i>phenelzine</i>	26	<i>podofilox</i>	36
PANCREAZE	56	<i>phenobarb-hyoscy-atropine-</i>		POLIVY	13
PANDEL	41	<i>scop</i>	54	<i>polycin</i>	70
PANRETIN	36	<i>phenobarbital</i>	16	<i>polyethylene glycol 3350</i>	57
<i>pantoprazole</i>	58	<i>phenohydro</i>	54	<i>polymyxin b sulf-trimethoprim</i>	
PANZYGA.....	61	<i>phenoxybenzamine</i>	30	.....	70
PARAGARD T 380A.....	64	<i>phenylephrine hcl</i>	73	POMALYST.....	13
<i>paricalcitol</i>	52	PHENYLEPH-		POMBILITI.....	52
PARLODEL	17	TROPICAMIDE IN		PONVORY	59
PARNATE	26	WATER.....	70	PONVORY 14-DAY	
<i>paromomycin</i>	7	PHENYTEK.....	16	STARTER PACK.....	59
<i>paroxetine hcl</i>	26	<i>phenytoin</i>	16	<i>portia 28</i>	68
<i>paroxetine</i>		<i>phenytoin sodium extended</i> ..	16	PORTRAZZA.....	13
<i>mesylate(menop.sym)</i>	26	PHESGO	13	<i>posaconazole</i>	3
PASER	7	<i>philit</i>	68	<i>potassium chloride</i>	78
PATADAY ONCE DAILY		<i>phosphate laxative</i>	57	<i>potassium citrate</i>	78
RELIEF	71	PHOSPHOLINE IODIDE....	70	<i>potassium iodide</i>	45
PATADAY TWICE DAILY		PHOTREXA CROSS-		POTELIGEO	13
RELIEF	71	LINKING KIT.....	71	<i>povidone-iodine</i>	70
PATANASE	44	PHOTREXA VISCOUS.....	71	<i>powderlax</i>	57
PAXIL	26	PHYSIOLYTE	42	PR BENZOYL PEROXIDE.....	37
PAXIL CR.....	26	PHYSIOSOL IRRIGATION.....	42	<i>pr natal 400</i>	79
PAXLOVID	4	<i>phytonadione (vitamin k1)</i>	32	<i>pr natal 400 ec</i>	79
<i>pazopanib</i>	13	PHYTONADIONE		<i>pr natal 430</i>	79
PEDIARIX (PF)	61	(VITAMIN K1)	32	<i>pr natal 430 ec</i>	79
PEDVAX HIB (PF).....	61	<i>pilocarpine hcl</i>	43, 44, 70	PRALATREXATE.....	13
<i>peg 3350-electrolytes</i>	56	<i>pimecrolimus</i>	36	<i>pramipexole</i>	17
<i>peg3350-sod sul-nacl-kcl-asb-c</i>		<i>pimozide</i>	26	PRAMOSONE	34
.....	56	<i>pimtree (28)</i>	68	<i>prasugrel</i>	32

<i>pravastatin</i>	33	<i>prenatal plus</i>	79	PRODIGY CONTROL	
<i>praziquantel</i>	7	<i>prenatal plus (calcium carb)</i>	79	SOLUTION, LOW	50
<i>prazosin</i>	30	PRENATAL PLUS DHA.....	80	PRODIGY CONTROL	
PRECISION XTRA		PRENATAL PLUS		SOLUTION,HIGH	50
KETONE-GLUCOSE	49	VITAMIN-MINERAL	80	PROFILNINE	32
PRECISION XTRA		<i>prenatal vit no.179-iron-folic</i>		<i>progesterone</i>	65
MONITOR	50	.....	80	<i>progesterone micronized</i>	65
PRECISION XTRA TEST...	45	<i>prenatal vitamin</i>	80	PROGLYCEM	46
PRECOSE	53	<i>prenatal vitamin with minerals</i>		PROGRAF.....	13
PRED FORTE	73	.....	80	PROLASTIN-C	43
<i>prednicarbate</i>	41	PRENATE DHA (FERR ASP		<i>prolate</i>	21
PREDNISOLN SP-		GLYCIN).....	80	PROLENSA	72
MOXIFLOX-BROMFEN	71	PRENATE ELITE (IRON ASP		PROLEUKIN	58
<i>prednisolone</i>	45	GLYC).....	80	PROMACTA.....	32
<i>prednisolone acetate</i>	73	PRENATE ENHANCE	80	<i>promethazine</i>	74
PREDNISOLONE ACETATE		PRENATE MINI (FERR ASP		<i>promethazine vc</i>	74
(PF).....	73	GLYCIN).....	80	<i>promethazine-codeine</i>	74
PREDNISOLONE ACETATE-		PRENATE PIXIE.....	80	<i>promethazine-dm</i>	74
BROMFENAC	71	PRENATE RESTORE	80	<i>promethegan</i>	74
PREDNISOLONE ACETATE-		PRENATE STAR.....	80	PROMETRIUM	65
NEPAFENAC	71	PREPIDIL	66	<i>propafenone</i>	28
PREDNISOLONE SOD PH-		PRESTALIA	30	<i>proparacaine</i>	71
MOXIFLOX.....	72	PRETOMANID.....	7	<i>propranolol</i>	30
<i>prednisolone sodium</i>		<i>prevalite</i>	33	<i>propranolol-</i>	
<i>phosphate</i>	45, 73	PREVNAR 20 (PF)	61	<i>hydrochlorothiazid</i>	30
PREDNISOLONE-		PREVYMIS.....	4	<i>propylthiouracil</i>	45
MOXIFLO-NEPAFENAC		PREZISTA	4	PROQUAD (PF).....	61
.....	71	PRIFTIN.....	7	PROSCAR.....	77
PREDNISOLONE-		PRIMACARE.....	80	PROTHELIAL	44
MOXIFLOXACIN HCL ..	72	<i>primaquine</i>	7	<i>protriptyline</i>	26
PREDNISOLONE-		PRIMEAIRE	46	PROVERA	65
MOXIFLOX-BROMFEN	71	<i>primidone</i>	16	PROVIDA OB.....	80
<i>prednisone</i>	45	PRIMSOL.....	9	<i>prudoxin</i>	36
<i>prednisone intensol</i>	45	PRIORIX (PF).....	61	<i>pulmosal</i>	76
<i>pregabalin</i>	16	PRIVIGEN	61	PULMOZYME.....	76
PREHEVBRIO (PF).....	61	<i>probenecid</i>	62	<i>purelax</i>	57
PREMARIN	65	<i>probenecid-colchicine</i>	62	PURIXAN	13
<i>prenal chew</i>	79	PROCARDIA XL.....	30	<i>pyrazinamide</i>	7
<i>prenal pearl</i>	79	<i>procentra</i>	26	<i>pyridostigmine bromide</i> ..	19, 20
<i>prenal true</i>	79	PROCHAMBER	46	PYRIDOSTIGMINE	
PRENATA	79	<i>prochlorperazine</i>	57	BROMIDE.....	19
<i>prenatabs fa</i>	79	<i>prochlorperazine maleate</i>	57	<i>pyrimethamine</i>	7
<i>prenatabs rx</i>	79	PROCORT.....	57	PYRUKYND.....	43
<i>prenatal</i>	79	PROCRIT	58	Q	
<i>prenatal complete</i>	79	PROCTOCORT.....	41, 57	QELBREE	26
<i>prenatal multi-dha (algal oil)</i>		<i>procto-med hc</i>	57	QUADRACEL (PF)	61
.....	79	<i>proctosol hc</i>	57	QUALAQUIN	7
<i>prenatal multivitamins</i>	79	<i>proctozone-hc</i>	57	QUDEXY XR.....	16
<i>prenatal one daily</i>	79			QUESTRAN.....	33

QUESTRAN LIGHT.....	33	<i>rena-vite</i>	80	<i>rivastigmine tartrate</i>	19
<i>quetiapine</i>	26	REVELA.....	54	<i>rivelsa</i>	68
<i>quinapril</i>	30	<i>repaglinide</i>	53	<i>rizatriptan</i>	18
<i>quinapril-hydrochlorothiazide</i>	30	REPATHA PUSHTRONEX	33	R-NATAL OB.....	80
<i>quinidine gluconate</i>	28	REPATHA SURECLICK	33	ROBINUL.....	54
<i>quinidine sulfate</i>	28	REPATHA SYRINGE.....	33	ROBINUL FORTE.....	54
<i>quinine sulfate</i>	7	RESPA-AR.....	74	ROCTAVIAN.....	32
<i>quit 2</i>	44	RESTASIS.....	71	<i>roflumilast</i>	76
<i>quit 4</i>	44	RESTASIS MULTIDOSE ...	71	<i>romidepsin</i>	13
QULIPTA.....	18	RESTORIL.....	26	ROMIDEPSIN.....	13
QUVIVIQ.....	26	RETACRIT.....	59	<i>ropinirole</i>	17
QVAR REDIHALER.....	76	RETEVMO.....	13	<i>rosadan</i>	37
R		RETIN-A.....	37	ROSADAN.....	37
RABAVERT (PF).....	61	RETIN-A MICRO PUMP ...	37	ROSULA.....	37
<i>rabeprazole</i>	58	RETISERT.....	73	<i>rosula cleansing cloths</i>	37
RADICAVA.....	19	RETROVIR.....	4	<i>rosuvastatin</i>	34
RADICAVA ORS STARTER KIT SUSP.....	19	REVATIO.....	76	ROSZET.....	34
RADIOGARDASE.....	43	REVCovi.....	43	ROTARIX.....	61
RAGWITEK.....	61	REVLIMID.....	13	ROTATEQ VACCINE.....	61
<i>raloxifene</i>	62	REXTOVY.....	22	ROWASA.....	57
<i>ramelteon</i>	26	REXULTI.....	26	<i>roweepra</i>	16
<i>ramipril</i>	30	REYATAZ.....	4, 5	ROXICODONE.....	21
<i>ranolazine</i>	34	REYVOW.....	18	ROZLYTREK.....	13
<i>rasagiline</i>	17	REZDIFFRA.....	43	RUCONEST.....	76
RASUVO (PF).....	64	REZUROCK.....	13	<i>rufinamide</i>	16
RAYALDEE.....	52	RHOFADE.....	37	RUXIENCE.....	13
RAYOS.....	45	RIASTAP.....	32	RYALTRIS.....	76
REBIF (WITH ALBUMIN).	60	<i>ribavirin</i>	5, 58	RYBELSUS.....	53
REBIF REBIDOSE.....	60	RIDAURA.....	64	RYBREVANT.....	13
REBIF TITRATION PACK	60	<i>rifabutin</i>	7	RYCLORA.....	74
REBLOZYL.....	58	<i>rifampin</i>	7	RYDAPT.....	13
REBYOTA.....	57	RIGHTEST CONTROL SOLUTION HIGH.....	50	RYKINDO.....	26
RECLAST.....	43	RILUTEK.....	43	RYLAZE.....	13
<i>reclipsen (28)</i>	68	<i>riluzole</i>	43	RYTARY.....	17
RECOMBIVAX HB (PF)	61	<i>rimantadine</i>	5	RYVENT.....	74
RECTIV.....	57	<i>ringer's</i>	42	S	
REFUAH PLUS GLUCOSE CONTROL.....	50	RINVOQ.....	64	<i>sajazir</i>	76
REGLAN.....	57	RINVOQ LQ.....	64	SALAGEN (PILOCARPINE)	43, 44
REGRANEX.....	36	RIOMET.....	53	<i>salsalate</i>	22
RELAGARD.....	66	<i>risedronate</i>	43, 62	SANDIMMUNE.....	13
RELENZA DISKHALER.....	4	RISPERDAL.....	26	SANDOSTATIN.....	13
RELISTOR.....	57	RISPERDAL CONSTA.....	26	SANTYL.....	42
REMERON.....	26	<i>risperidone</i>	26	SAPHNELO.....	13
REMERON SOLTAB.....	26	<i>risperidone microspheres</i>	26	<i>sapropterin</i>	52
REMODULIN.....	30	RITEFLO AEROCHAMBER	46	SARCLISA.....	13
RENACIDIN.....	78	<i>ritonavir</i>	5	SAVELLA.....	64
		<i>rivastigmine</i>	19	<i>saxagliptin</i>	53
				<i>saxagliptin-metformin</i>	53

<i>scalacort</i>	41	SKYRIZI.....	35, 57	<i>sronyx</i>	69
SCALACORT DK.....	41	SKYSONA.....	19	<i>ssd</i>	35
SCSEMBLIX.....	13	SMARTEST CONTROL.....	50	SSKI.....	45
SCENESSE.....	36	<i>smoothlax</i>	57	<i>sss 10-5</i>	37
<i>scopolamine base</i>	57	<i>sodium chloride</i>	43, 76	<i>st joseph aspirin</i>	22
SECUADO.....	26	<i>sodium chloride 0.9 %</i>	43	<i>st. joseph aspirin</i>	22
SEGLUROMET.....	53	<i>sodium citrate-citric acid</i>	78	STAMARIL (PF).....	61
SELECT-OB.....	80	SODIUM OXYBATE.....	27	STEGLATRO.....	53
SELECT-OB (FOLIC ACID)		<i>sodium phenylbutyrate</i>	43	STELARA.....	35
.....	80	<i>sodium polystyrene sulfonate</i>	55	STIOLTO RESPIMAT.....	76
SELECT-OB + DHA.....	80	<i>sodium,potassium,mag sulfates</i>		STIVARGA.....	13
<i>selegiline hcl</i>	17	.....	57	<i>stop smoking aid</i>	44
<i>selenium sulfide</i>	35	SOHONOS.....	43	STRENSIQ.....	52
SELZENTRY.....	5	<i>solifenacin</i>	77	<i>stress formula with iron</i>	80
SEMGLEE(INSULIN		SOLQUA 100/33.....	51	<i>stress formula with iron(sulf)</i>	80
GLARGINE-YFGN).....	51	SOLIRIS.....	43	STRIVERDI RESPIMAT.....	76
SEMGLEE(INSULIN		SOLOSEC.....	7	STROMECTOL.....	7
GLARG-YFGN)PEN.....	51	SOLTAMOX.....	13	<i>strong iodine</i>	38, 78
<i>se-natal 19 chewable</i>	80	SOLTAMOX.....	13	SUBLOCADE.....	21
<i>se-natal-19</i>	80	SOLUS V2 CONTROL		<i>subvenite</i>	16
SEROSTIM.....	59	SOLUTION,HIGH.....	50	<i>subvenite starter (blue) kit</i>	16
<i>sertraline</i>	26	<i>soluvita</i>	80	<i>subvenite starter (green) kit</i>	16
<i>setlakin</i>	68	<i>soluvita a,c,d with fluoride</i>	80	<i>subvenite starter (orange) kit</i>	16
<i>sevelamer carbonate</i>	55	SOMA.....	20	SUCRAID.....	57
<i>sevelamer hcl</i>	55	SOMATULINE DEPOT.....	13	<i>sucralfate</i>	58
SEVENFACT.....	32	SOMAVERT.....	52	SULAR.....	30
SFROWASA.....	57	SOOLANTRA.....	37	<i>sulfacetamide sodium</i>	35, 73
<i>sharobel</i>	65	<i>sorafenib</i>	13	<i>sulfacetamide sodium (acne)</i>	38
SHINGRIX (PF).....	61	SORBITOL.....	42	<i>sulfacetamide sodium-sulfur</i>	37
SIGNIFOR.....	13	SORBITOL-MANNITOL.....	42	<i>sulfacetamide-prednisolone</i>	73
<i>sildenafil (pulm.hypertension)</i>		<i>sotalol</i>	28	<i>sulfacleanse 8-4</i>	37
.....	76	<i>sotalol af</i>	28	<i>sulfadiazine</i>	8
SILENOR.....	26	SOTYKTU.....	35	<i>sulfamethoxazole-trimethoprim</i>	
<i>silodosin</i>	77	SOTYLIZE.....	28	.....	8
SILVADENE.....	35	SPACE CHAMBER.....	46	SULFAMYLON.....	38
<i>silver sulfadiazine</i>	35	SPEVIGO.....	35	<i>sulfasalazine</i>	57
SIMBRINZA.....	72	<i>spinosad</i>	42	<i>sulfatrim</i>	8
SIMLANDI(CF)		SPINRAZA (PF).....	19	<i>sulindac</i>	23
AUTOINJECTOR.....	64	SPIRIVA RESPIMAT.....	76	SUMADAN.....	37
<i>simliya (28)</i>	68	SPIRIVA WITH		SUMADAN XLT.....	37
<i>simpesse</i>	69	HANDIHALER.....	76	<i>sumatriptan</i>	18
SIMPONI.....	64	<i>spironolactone</i>	30	<i>sumatriptan succinate</i>	18
SIMPONI ARIA.....	64	<i>spironolacton-</i>		<i>sumatriptan-naproxen</i>	18
<i>simvastatin</i>	34	<i>hydrochlorothiaz</i>	30	SUMAXIN.....	37
SINEMET.....	17	SPORANOX.....	3	<i>sulfatrim</i>	8
SINUVA.....	76	<i>sprintec (28)</i>	69	SULINDAC.....	23
<i>sirolimus</i>	13	SPRITAM.....	16	SUMADAN.....	37
SIRTURO.....	7	SPRIX.....	22	SUMAXIN CP.....	37
SKYLA.....	64	SPRYCEL.....	13	SUMAXIN TS.....	37
		<i>sps (with sorbitol)</i>	55	<i>sunitinib malate</i>	13
				SUNLENCA.....	5
				SUNOSI.....	27

<i>super b maxi complex</i>	80	TALTZ AUTOINJECTOR (3		<i>terbutaline</i>	77
<i>super b-50 complex</i>	80	PACK).....	35	<i>terconazole</i>	66
<i>super quints</i>	80	TALTZ SYRINGE.....	35	<i>teriflunomide</i>	60
SUTENT.....	13	TALVEY	14	<i>teriparatide</i>	62
<i>syeda</i>	69	TALZENNA.....	14	TERIPARATIDE	62
SYLVANT	13	TAMIFLU	5	TERLIVAZ.....	52
SYMAX DUOTAB.....	54	<i>tamoxifen</i>	14	TERSI FOAM	35
<i>symax fastabs</i>	54	<i>tamsulosin</i>	77	TESTOPEL.....	52
<i>symax-sl</i>	54	<i>tanlor</i>	20	<i>testosterone</i>	52
<i>symax-sr</i>	54	TAPERDEX.....	45	TESTOSTERONE.....	52
SYMBICORT.....	76	TARCEVA	14	<i>testosterone cypionate</i>	52
SYMBYAX.....	27	TARGADOX.....	8	<i>testosterone enanthate</i>	52
SYMDEKO	77	TARGRETIN	14	<i>tetrabenazine</i>	19
SYMFI.....	5	<i>tarina 24 fe</i>	69	<i>tetracaine hcl</i>	71
SYMFI LO	5	<i>tarina fe 1/20 (28)</i>	69	TETRACAINE HCL (PF)....	71
SYMJEPI.....	74	TARPEYO.....	45	<i>tetracycline</i>	8
SYMLINPEN 120	53	TASIGNA	14	TEXACORT	41
SYMLINPEN 60	53	<i>tasimelteon</i>	27	TEZSPIRE	77
SYMPAZAN.....	16	TASMAR	17	THALOMID.....	14
SYMPROIC	57	<i>tavaborole</i>	39	THEO-24	77
SYMTUZA.....	5	TAVALISSE	32	<i>theophylline</i>	77
SYNAGIS.....	5	<i>tazarotene</i>	37	THIOLA EC	43
SYNALAR.....	41	TAZVERIK.....	14	<i>thioridazine</i>	27
SYNALAR CREAM KIT ...	41	TDVAX	61	<i>thiothixene</i>	27
SYNALAR OINTMENT KIT		TECARTUS	14	THRIVITE RX	80
.....	41	TECENTRIQ.....	14	<i>thyroid (pork)</i>	54
SYNALAR TS	41	TECVAYLI.....	14	<i>tiadylt er</i>	30
SYNAREL	52	TEGLUTIK	43	<i>tiagabine</i>	16
SYNDROS	57	TEGRETOL	16	TIAZAC	30
SYNJARDY	54	TEGRETOL XR.....	16	TIBSOVO.....	14
SYNJARDY XR	54	TEGSEDI	19	TICOVAC	61
SYPRINE	43	TELCARE CONTROL	50	TIGLUTIK	43
T		<i>telmisartan</i>	30	<i>tilia fe</i>	69
TABLOID	14	<i>telmisartan-amlodipine</i>	30	<i>timolol maleate</i>	30, 70
TABRECTA.....	14	<i>telmisartan-hydrochlorothiazid</i>		<i>timolol maleate (pf)</i>	70
TACLONEX	35	.....	30	TIMOLOL-BRIMONIDI-	
<i>tacrolimus</i>	14, 36	<i>temazepam</i>	27	DORZOLAM(PF)	72
<i>tadalafil (pulm. hypertension)</i>		TEMBEXA.....	5	<i>tinidazole</i>	7
.....	77	TEMODAR	14	<i>tiopronin</i>	43
TAFINLAR.....	14	<i>temozolomide</i>	14	<i>tiotropium bromide</i>	77
<i>tafluprost (pf)</i>	72	<i>temsirrolimus</i>	14	<i>tis-u-sol pentalyte</i>	42
TAGRISSO	14	<i>tencon</i>	21	TIVDAK.....	14
TAKE ACTION	69	TENIVAC (PF)	61	TIVICAY.....	5
TAKHZYRO.....	77	<i>tenofovir disoproxil fumarate</i>	5	TIVICAY PD.....	5
TALICIA.....	58	TENORETIC 50.....	30	<i>tizanidine</i>	20
TALTZ AUTOINJECTOR ..	35	TENORMIN.....	30	TOBI PODHALER	7
TALTZ AUTOINJECTOR (2		TEPEZZA.....	52	TOBRADEX	72
PACK).....	35	<i>terazosin</i>	30	<i>tobramycin</i>	7, 70
		<i>terbinafine hcl</i>	3	<i>tobramycin in 0.225 % nacl</i>	7

TOBRAMYCIN WITH NEBULIZER.....	7	TREXALL.....	14	TRUE METRIX LEVEL 1...50
<i>tobramycin-dexamethasone</i> ..	73	TREZIX.....	21	TRULANCE.....
TOBRAMYCIN- VANCOMYCIN	70	<i>triamcinolone acetonide</i> .41, 44		TRULICITY
TOBREX.....	70	<i>triamterene</i>	30	TRUMENBA.....
TOLAK	36	<i>triamterene-hydrochlorothiazid</i>	30	TRUSTEX-RIA NON-LUB CONDOMS
<i>tolcapone</i>	17	<i>triazolam</i>	27	TUKYSA.....
TOLECTIN 600	23	TRICARE.....	80	<i>tulana</i>
<i>tolmetin</i>	23	<i>tricon</i>	80	TURALIO.....
<i>tolterodine</i>	77	<i>tridacaine ii</i>	38	<i>turqoz (28)</i>
<i>tolvaptan</i>	52	<i>triderm</i>	41	TUXARIN ER.....
TOPICORT	41	<i>trientine</i>	43	TWINRIX (PF).....
<i>topiramate</i>	16	TRIESENCE (PF)	45	TWYNEO.....
<i>topotecan</i>	14	<i>tri-estarylla</i>	69	TYBOST.....
<i>toremifene</i>	14	<i>trifluoperazine</i>	27	<i>tydemy</i>
TORISEL	14	<i>trifluridine</i>	70	TYENNE
TORPENZ.....	14	<i>trihexyphenidyl</i>	17	TYENNE AUTOINJECTOR
<i>torsemide</i>	30	TRIJARDY XR.....	54	.....
TOSYMRA	18	TRIKAFTA	77	TYKERB
TOUJEO MAX U-300 SOLOSTAR	51	<i>tri-legest fe</i>	69	TYMLOS.....
TOUJEO SOLOSTAR U-300 INSULIN.....	51	<i>tri-linyah</i>	69	TYPHIM VI.....
<i>tovet emollient</i>	41	<i>tri-lo-estarylla</i>	69	TYRVAYA.....
TRACLEER	77	<i>tri-lo-marzia</i>	69	TYSABRI
<i>tramadol</i>	23	<i>tri-lo-mili</i>	69	TYVASO.....
<i>tramadol-acetaminophen</i>	23	<i>tri-lo-sprintec</i>	69	TYVASO DPI
<i>trandolapril</i>	30	<i>trimethobenzamide</i>	57	TYVASO REFILL KIT.....
<i>trandolapril-verapamil</i>	30	<i>trimethoprim</i>	9	TYVASO STARTER KIT ...
<i>tranexamic acid</i>	66	<i>tri-mili</i>	69	U
<i>tranylcypromine</i>	27	<i>trimipramine</i>	27	UBRELVY
<i>travoprost</i>	72	TRIMO-SAN JELLY	66	UCERIS
TRAZIMERA.....	14	<i>trinatal rx 1</i>	80	ULESFIA.....
<i>trazodone</i>	27	<i>trinate</i>	80	ULTOMIRIS
TREANDA.....	14	TRINTELLIX.....	27	UNISTRIP LOW CONTROL
TRECTOR.....	7	<i>tri-nymyo</i>	69	.....
TRELEGY ELLIPTA	77	TRIPTODUR.....	14	<i>unithroid</i>
TREMFYA.....	35	<i>tri-sprintec (28)</i>	69	UNITUXIN.....
<i>treprostinil sodium</i>	30	TRISTART DHA	80	UPTRAVI.....
TRESIBA FLEXTOUCH U- 100.....	51	TRIUMEQ.....	5	URELLE.....
TRESIBA FLEXTOUCH U- 200.....	51	TRIUMEQ PD.....	5	<i>uretron d-s</i>
TRESIBA U-100 INSULIN .51		<i>tri-vitamin with fluoride</i>	80	URIBEL TABS
<i>tretinoin</i>	37	<i>trivora (28)</i>	69	<i>urimar-t</i>
<i>tretinoin (antineoplastic)</i>	14	<i>tri-vylibra</i>	69	<i>uro-458</i>
<i>tretinoin microspheres</i>	38	<i>tri-vylibra lo</i>	69	UROCIT-K 10.....
TRETTEN	32	TRODELVY	14	UROCIT-K 15
		TROGARZO	5	<i>urogesic-blue</i>
		TROKENDI XR.....	16	<i>uro-mp</i>
		<i>tropicamide</i>	70	UROQID-ACID NO.2.....
		<i>trospium</i>	77	<i>uro-sp</i>
		TRUDHESA.....	18	URSO FORTE.....

<i>ursodiol</i>	57	<i>verapamil</i>	30	VOGELXO.....	52
<i>uryl</i>	78	VERELAN PM.....	31	<i>volnea (28)</i>	69
V		VERQUVO.....	34	VONJO.....	15
<i>valacyclovir</i>	5	VERSACLOZ.....	27	VONVENDI.....	32
VALCHLOR.....	36	VERZENIO.....	14	VOQUEZNA.....	58
VALCYTE.....	5	<i>vestura (28)</i>	69	VOQUEZNA DUAL PAK...58	
<i>valganciclovir</i>	5	VEVYE.....	72	VOQUEZNA TRIPLE PAK 58	
<i>valproic acid</i>	16	VFEND.....	3	VORANIGO.....	15
<i>valproic acid (as sodium salt)</i>	16	V-GO 20.....	50	<i>voriconazole</i>	3
<i>valsartan</i>	30	V-GO 30.....	50	VORTEX HOLDING	
<i>valsartan-hydrochlorothiazide</i>	30	V-GO 40.....	50	CHAMBER.....	46
VALTOCO.....	17	VIBERZI.....	57	VOSEVI.....	5
<i>vanadom</i>	20	VIBRAMYCIN.....	8	VOTRIENT.....	15
<i>vancomycin</i>	9	VIDAZA.....	14	VOWST.....	57
<i>vandazole</i>	66	<i>vienna</i>	69	VOXZOGO.....	52
VANOXIDE-HC.....	38	<i>vigabatrin</i>	17	VOYDEYA.....	43
VAQTA (PF).....	61	<i>vigadrone</i>	17	VRAYLAR.....	27
<i>varenicline</i>	44	VIGAMOX.....	70	VTAMA.....	35
VARIVAX (PF).....	61	<i>vigpoder</i>	17	VUMERITY.....	60
VARUBI.....	57	VIJOICE.....	14	<i>vyfemla (28)</i>	69
VASCEPA.....	34	<i>vilazodone</i>	27	VYJUVEK.....	36
VASERETIC.....	30	VIMIZIM.....	52	<i>vylibra</i>	69
VASOTEC.....	30	VIOKACE.....	57	VYNDAMAX.....	34
VAXCHORA VACCINE.....	61	<i>viorele (28)</i>	69	VYNDAQEL.....	34
VAXELIS (PF).....	61	VIRACEPT.....	5	VYVANSE.....	27
VAXNEUVANCE (PF).....	61	VIRAZOLE.....	5	VYVGART.....	20
VCF CONTRACEPTIVE		VIREAD.....	5	VYVGART HYTRULO.....	20
FILM.....	66	VISTARIL.....	74	VYXEOS.....	15
VCF CONTRACEPTIVE GEL		VITAFOL FE PLUS.....	80	VYZULTA.....	72
.....	66	VITAFOL GUMMIES.....	80	W	
VECTIBIX.....	14	VITAFOL ULTRA.....	80	WAKIX.....	27
VECTICAL.....	35	VITAFOL-OB.....	80	<i>wal-zyr (ketotifen)</i>	72
VELCADE.....	14	VITAFOL-OB+DHA.....	80	<i>warfarin</i>	33
<i>veletri</i>	30	VITAFOL-ONE.....	80	<i>water for irrigation, sterile</i> ...43	
<i>velivet triphasic regimen (28)</i>	69	VITAMEDMD ONE RX.....	80	WAVESENSE CONTROL	
VELPHORO.....	55	VITAMEDMD REDICHEW		SOLUTION.....	50
VELTASSA.....	55	RX.....	80	WELIREG.....	15
VEMLIDY.....	5	<i>vitamin b complex-folic acid</i> 80		<i>wera (28)</i>	69
VENCLEXTA.....	14	<i>vitamin k</i>	32	<i>wesnatal dha complete</i>	81
VENCLEXTA STARTING		<i>vitamin k1</i>	32	<i>wesnate dha</i>	81
PACK.....	14	<i>vitamins a,c,d and fluoride</i> ...80		<i>westab plus</i>	81
<i>venlafaxine</i>	27	VITATRUE.....	81	<i>westgel dha</i>	81
VENOFER.....	80	VITRAKVI.....	14	WIDE-SEAL DIAPHRAGM	
VENTAVIS.....	77	VIVAGUARD INO CTRL		.....	64
VEOPOZ.....	43	SOLN-L1,2,3.....	50	WILATE.....	33
VEOZAH.....	66	VIVITROL.....	23	WINREVAIR.....	77
		VIVJOA.....	3	<i>wintergreen oil</i>	36
		VIVOTIF.....	61	<i>wixela inhub</i>	77
		VIZIMPRO.....	15		

<i>women's gentle laxative(bisac)</i>	57
.....	57
<i>wymzya fe</i>	69
WYNZORA	35
X	
XACIATO	66
XALKORI	15
XARACOLL	38
XARELTO	33
XARELTO DVT-PE TREAT	
30D START	33
XCOPRI	17
XCOPRI MAINTENANCE	
PACK	17
XCOPRI TITRATION PACK	
.....	17
XDEMVI	72
XELJANZ	64
XELJANZ XR	64
XELODA	15
XEMBIFY	61
XENLETA	7
XENPOZYME	43
XEPI	38
XERMELO	15
XGEVA	9
XHANCE	77
XIFAXAN	7
XIGDUO XR	54
XIIDRA	72
XIPERE (PF)	45
XOFLUZA	5
XOLAIR	77
XOLREMDI	59
XOSPATA	15
XTANDI	15
<i>xulane</i>	66
XURIDEN	43
XYNTHA	33
XYNTHA SOLOFUSE	33
XYOSTED	52
XYWAV	27

Y	
YAZ (28)	69
YCANTH	36
YERVOY	15
YESCARTA	15
YF-VAX (PF)	61
YONDELIS	15
YUPELRI	77
<i>yuvafem</i>	65
Z	
ZADITOR	72
<i>zafemy</i>	66
<i>zafirlukast</i>	77
<i>zaleplon</i>	27
ZALTRAP	15
ZANAFLEX	20
<i>zarah</i>	69
ZARONTIN	17
ZCORT	45
ZELBORAF	15
ZEMAIRA	43
ZEMBRACE SYMTOUCH	18
ZEMPLAR	52
<i>zenatane</i>	38
ZENPEP	57
<i>zenzedi</i>	27
ZENZEDI	27
ZEPATIER	5
ZEPOSIA	19
ZEPOSIA STARTER KIT (28-	
DAY)	19
ZEPOSIA STARTER PACK	
(7-DAY)	19
ZEPZELCA	15
ZESTORETIC	31
ZESTRIL	31
ZIAGEN	5
ZIANA	38
<i>zidovudine</i>	5
ZIEXTENZO	59
<i>zileuton</i>	77
<i>ziprasidone hcl</i>	27
ZIRABEV	15

ZIRGAN	70
ZITHROMAX	6
ZITHROMAX TRI-PAK	6
ZITHROMAX Z-PAK	6
ZOKINVY	43
ZOLADEX	15
<i>zoledronic acid</i>	52
<i>zoledronic acid-mannitol-water</i>	
.....	43, 52
ZOLEDRONIC AC-	
MANNITOL-0.9NACL	52
ZOLGENSMA	19
ZOLINZA	15
<i>zolmitriptan</i>	18
<i>zolpidem</i>	27
ZOMIG	18
ZONALON	36
<i>zonisamide</i>	17
ZONTIVITY	33
ZORTRESS	15
ZORYVE	35
<i>zovia 1-35 (28)</i>	69
ZOVIRAX	39
ZTALMY	17
ZTLIDO	38
ZUBSOLV	23
ZULRESSO	27
<i>zumandimine (28)</i>	69
ZURZUVAE	27
ZYDELIG	15
ZYFLO	77
ZYKADIA	15
ZYLOPRIM	62
ZYMFENTRA	57
ZYNLONTA	15
ZYNRELEF	43
ZYNTEGLO	59
ZYNYZ	15
ZYPITAMAG	34
ZYPREXA	27
ZYPREXA RELPREVV	27
ZYPREXA ZYDIS	27
ZYVOX	7



This formulary was updated on 10/1/2024. For more recent information or other questions, please contact The Health Plan Pharmacy Services at 1.800.624.6961 extension 7914, or visit www.healthplan.org.