

North Carolina State Health Plan
 2018 Custom Formulary



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Therapeutic Class Medication List

Therapeutic Class Section 1

Please consider talking to your provider about prescribing formulary medications, which may help reduce your out-of-pocket costs. This list may help guide you and your doctor in selecting an appropriate medication.

The comprehensive formulary document is regularly updated. Please visit **www.shpnc.org** for the most up-to-date information. **This guide was current at the time of printing and is subject to change.**

To search for a medication name within this PDF document, use the **Control** and **F** keys on your keyboard, or go to **Edit** in the drop-down menu and select **Find/Search**. Type in the word or phrase you are looking for and click on **Search**.

Member guide to covered medications on the formulary

This guide lists the approved brand name and generic prescription medications that have been reviewed by the North Carolina State Health Plan (Plan). Please refer to this formulary guide for information about medications covered by this formulary, and present this guide to your provider if you require a prescription.

The prescription medications listed in the formulary or their tier placement may change from time to time due to a change in the cost of the medication and/or in the classification of the medication by the U.S. Food and Drug Administration (FDA) or nationally recognized medication databases (e.g., Medi-Span). For a more complete listing of medication coverage and costs, you may use our drug look up tool at www.shpnc.org. You may also call CVS Caremark® Customer Service at 1-888-321-3124 to verify prescription medication benefits.

A formulary is a list of prescription medications covered by a health plan. The Plan's Pharmacy & Therapeutics (P&T) Committee reviews medications at least quarterly. This includes ongoing reviews of clinical information about new medications and reviews of new safety and efficacy information about older medications. The majority of the Plan's P&T Committee is composed of practicing prescribers and pharmacists independent of the Plan. Tier placement of prescription medications in the formulary may be determined by: the effectiveness and safety of the medication, the cost of the medication, and/or the classification of the medications by the FDA or nationally recognized medication databases (e.g., Medi-Span).

Please refer to www.shpnc.org for detailed information regarding your pharmacy benefits, including out-of-pocket costs, prior authorization and step therapy medication requests, and applicable exclusions.

Formulary tiers

The Custom 6 Tier Formulary covers most medications approved by the FDA, within existing benefits. The plan design determines the member's payment obligation.

Definitions for the six-tiered benefit structure:

- **Tier 1:** The most cost-effective of non-specialty prescription medications; most are generic.
- **Tier 2:** Preferred brand non-specialty medications and some high cost generics.
- **Tier 3:** Non-preferred brand, including branded generics (also known as single source generics), non-specialty medications
- **Tier 4:** The most cost-effective of specialty medications; most are generic or biosimilar medications.
- **Tier 5:** Preferred brand specialty medications.
- **Tier 6:** Non-preferred brand specialty prescription medications.

Generic medications

In most cases, choosing a generic medication equivalent, when available, may mean significant savings to you. We encourage you to discuss with your provider whether a generic alternative is an available treatment option. Especially for medications that are taken daily and refilled frequently, you will experience the long-term savings of a lower medication payment month after month. **If you choose a brand name prescription medication and a generic equivalent is available, you may be subject to higher out-of-pocket expense.**

Compounded prescriptions

Compounded prescriptions contain two or more medications mixed together. Compounded prescriptions are processed according to member benefits. To be eligible for coverage, compounded medications must contain at least one ingredient that is defined as a prescription medication and must not be a copy of a commercially available product. Compounded medications may be subject to prior authorization and benefit exclusion.

Utilization Management: prior authorization, quantity limitations and step therapy medications

Certain medications may be subject to prior authorization, quantity limitations, or step therapy programs. The Plan's P&T Committee reviews and approves the clinical criteria for these programs.

- Medications that have prior authorization requirements must be reviewed by CVS Caremark for coverage determination before coverage can be authorized.
- Certain medications may also have limitations on the quantity and days' supply for coverage. Quantities in excess of the coverage limit must be reviewed and approved by CVS Caremark coverage determination before coverage can be authorized for amounts in excess of the limits.
- For coverage of step therapy medications, the Plan requires that the member has tried non-restricted formulary alternatives medications first. Coverage for step therapy medications may be provided without the use of a non-step therapy medication if the prescriber certifies in writing that the member has previously used non-restricted medications and the non-restricted medications have been detrimental to the member's health or have been ineffective in treating the same condition and, in the opinion of the prescriber, are likely to be detrimental to the member's health or ineffective in treating the condition in the future. Clinical rationale and documentation for exception requests may be required.

The FDA is responsible for approving medications for use based on clinical data proving the medication is safe and effective for that specific use. The Plan's utilization management programs follow FDA-approved uses for these medications. However, the Plan recognizes that in many cases, "off-label" (i.e., non-FDA approved) uses of prescription medications may be acceptable. In determining the acceptability of off-label uses, the Plan utilizes several sources of clinical information including but not limited to:

1. Nationally recognized clinical references including American Hospital Formulary Service Medication Information
2. The results of at least two randomized, controlled clinical studies that support a specific off-label use, and that are published in peer-reviewed professional medical journals
3. Consultations with internal and external physician experts regarding community standards. Additional searches for current supporting medical literature may be performed utilizing standard electronic databases.

Specialty medications

These medications, as classified by the Plan, have unique uses, treat complex medical conditions, require special dosing or monitoring, are typically prescribed by a specialist provider and/or require special patient education, training or coordination of care. Most specialty medications can be found on Tier 6, but some may be found on lower specialty Tiers 4 or 5.

Specialty medications will need to be filled with CVS Specialty™ pharmacy. These medications are identified in the specialty column of the formulary guide. Call the CVS Specialty customer service number at 1-800-237-2767 to determine the steps required to fill your specialty medication prescription.

Affordable Care Act

Please note, some medications may have limited or \$0 cost-sharing under the Affordable Care Act (ACA) for members enrolled in the 80/20 plan; examples of categories of medications that may be subject to limited or \$0 cost share include aspirin, breast cancer preventive, fluoride supplements, folic acid supplements, gonorrhea prophylaxis (newborn), iron supplements, tobacco cessation, vaccines, vitamin D supplements, and some contraceptive medications and devices. You may find additional information about these medications at: www.shpnc.org. These medications are identified in the ACA column of the formulary guide. Some medications are not covered unless the stipulations of the ACA criteria are met and are designated with an "A" in the drug tier column. If you do not find the medication you are searching for, consult or contact CVS Caremark customer service at 1-888-321-3124 to find out if the medication is available over the counter or is covered under your medical and/or pharmacy benefit.

Non-covered medications

The Plan has a custom closed formulary. In a "closed" formulary, certain drugs are not covered. This comprehensive formulary document notes drugs that are not covered by the Plan. This is applicable to the Traditional Pharmacy Benefit (which includes the 80/20 Plan and 70/30 Plan). Non-covered medications are designated in the formulary guide with an "NC." A formulary exception process is available to support Plan members who, per their prescriber, have a medical necessity to remain on a non-covered drug. The exception process is administered by CVS Caremark, the Plan's Pharmacy Benefit Manager.

Medical benefit specialty medications

Some specialty medications are covered under the medical benefit and are subject to office charges. These medications are usually administered by intramuscular injection or intravenous injection or infusion under provider supervision in an office, outpatient setting or through home infusion. Medical benefit specialty medications are designated in the formulary guide with an "M." Members may obtain prior authorization, and providers may contact Blue Cross and Blue Shield of North Carolina Customer Service at 1-888-234-2416.

Using the member guide to the Basic Formulary

The Medication List is organized into broad categories (e.g., ANALGESICS AND ANESTHETICS). The graphic below shows the information that is provided in each column of the medication list and is an example only. Please use the medication search function to find current information for medications on the medication list.

1	2	3
Drug Name	Drug Tier	Requirements/Limits
ANALGESICS		
ANALGESICS, OTHER		
OFIRMEV INJ 10MG/ML	1	PA
ANESTHETICS PV		
AMIDATE INJ 2MG/ML	4	PA, ST, QL, SP, ACA, PV
BREVITAL SOD INJ 2.5GM	5	PA, ST, QL, SP, ACA, PV
BREVITAL SOD INJ 500MG	5	PA, ST, QL, SP, ACA, PV
DIPRIVAN INJ	5	
DIPRIVAN INJ 100MG/ML	5	PV
DIPRIVAN INJ 200/20ML	5	
DIPRIVAN INJ 500/50ML	5	
<i>etomidate iv soln 2 mg/ml</i>	2	ST

- 1 The first column of the chart lists the medication name. Generic medications are listed in lowercase *italicized* letters. Brand name medications are CAPITALIZED.
Separate medication entries are required for some dosage forms such as extended-release and delayed-release.
- 2 The second column indicates the Tier level.
- 3 The third column shows how the medication is classified or whether any Utilization Management Program(s) apply. For instance SP indicates that the medication is classified as specialty, PV indicates that the medication is considered preventive, and ST notates that step therapy applies for this medication. A full list of abbreviations can be found under the LEGEND section of this document.

Abbreviation/acronym key

CAPITALIZED	Brand Name Medication
<i>italicized</i>	Generic Medication
cap	capsule
chew	chewable
conc	concentrate
cr	controlled-release
dr	delayed-release
ec	enteric coated
effer	effervescent
equiv	equivalent
er	extended-release
inhal	inhalation
inj	injection
liq	liquid
lot	lotion
nebu	nebulizer
odt	orally disintegrating tablet
oint	ointment
ophth	ophthalmic
osm	osmotic-release
powd	powder
sa	sustained action
sl	sublingual
sol/soln	solution
sr	sustained-release
suppos	suppository
susp	suspension
tab	tablet
td	transdermal
ACA	Affordable Care Act Copay
NC	Not Covered
PA	Prior Authorization
PV	Preventive
QL	Quantity Limit
SP	Specialty
ST	Step Therapy

NOTICE

This document contains references to brand-name prescription drugs that are trademarks or registered trademarks of pharmaceutical manufacturers not affiliated with North Carolina State Health Plan or CVS Caremark.

When viewing the formulary via the Internet, please be advised that this document is updated periodically and changes may appear prior to their effective date to allow for client notification.

NCSHP eff 10/01/2018

Drug Name	Drug Tier	Requirements/Limits
ANALGESICS		
COX-II INHIBITORS		
CELEBREX CAP 50MG	3	
CELEBREX CAP 100MG	3	
CELEBREX CAP 200MG	3	
CELEBREX CAP 400MG	3	
<i>celecoxib cap 50 mg</i>	1	
<i>celecoxib cap 100 mg</i>	1	
<i>celecoxib cap 200 mg</i>	1	
<i>celecoxib cap 400 mg</i>	1	
GOUT		
<i>allopurinol sodium for inj 500 mg</i>	1	
<i>allopurinol tab 100 mg</i>	1	
<i>allopurinol tab 300 mg</i>	1	
ALOPRIM INJ 500MG	3	
<i>colchicine cap 0.6 mg</i>	2	
<i>colchicine tab 0.6 mg</i>	2	
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	1	
COLCRYS TAB 0.6MG	2	
DUZALLO TAB 200-200	NC	
DUZALLO TAB 200-300	NC	
KRYSTEXXA INJ 8MG/ML	6	PA, SP
MITIGARE CAP 0.6MG	3	
<i>probenecid tab 500 mg</i>	1	
ULORIC TAB 40MG	2	
ULORIC TAB 80MG	2	
ZURAMPIC TAB 200MG	NC	
ZYLOPRIM TAB 100MG	3	
ZYLOPRIM TAB 300MG	3	
LOCAL ANESTHETICS		
ARTICADENT INJ DENTAL	1	
BUPIVAC HCL INJ 0.5%	NC	
BUPIVAC/NAACL INJ 0.9/0.2%	NC	
BUPIVAC/NAACL INJ 0.9/0.5%	NC	
BUPIVAC/NAACL INJ 0.25/0.9	NC	
BUPIVAC/NAACL INJ .9/.0625	NC	
<i>bupivacaine 0.75% in dextrose inj 8.25%</i>	1	
<i>bupivacaine hcl inj 0.5%</i>	1	
<i>bupivacaine hcl inj 0.25%</i>	1	
<i>bupivacaine hcl preservative free (pf) inj 0.5%</i>	1	
<i>bupivacaine hcl preservative free (pf) inj 0.25%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>bupivacaine hcl preservative free (pf) inj 0.75%</i>	1	
<i>bupivacaine inj 0.5% w/ epinephrine 1:200000</i>	1	
<i>bupivacaine inj 0.5% w/ epinephrine 1:200000 (pf)</i>	1	
<i>bupivacaine inj 0.25% w/ epinephrine 1:200000</i>	1	
<i>bupivacaine inj 0.25% w/ epinephrine 1:200000 (pf)</i>	1	
<i>bupivacaine inj spinal</i>	1	
CARBOCAINE INJ 1%	3	
CARBOCAINE INJ 1% PF	3	
CARBOCAINE INJ 1.5% PF	3	
CARBOCAINE INJ 2%	3	
CARBOCAINE INJ 2% PF	3	
<i>chloroprocaine hcl preservative free (pf) inj 1 2%</i>	1	
<i>chloroprocaine hcl preservative free (pf) inj 1 3%</i>	1	
CITANEST FOR INJ DENT 4%	3	
CITANEST INJ PLAIN 4%	3	
LIDO/DEXTROS INJ 5-7.5%	3	
LIDOCAINE HC INJ 200/10ML	NC	
<i>lidocaine hcl local inj 0.5%</i>	1	
<i>lidocaine hcl local inj 1%</i>	1	
<i>lidocaine hcl local inj 2%</i>	1	
<i>lidocaine hcl local preservative free (pf) inj 1 0.5%</i>	1	
<i>lidocaine hcl local preservative free (pf) inj 1 1%</i>	1	
<i>lidocaine hcl local preservative free (pf) inj 1 1.5%</i>	1	
<i>lidocaine hcl local preservative free (pf) inj 2 2%</i>	2	
<i>lidocaine hcl local preservative free (pf) inj 1 4%</i>	1	
<i>lidocaine inj 0.5% w/ epinephrine-1:200000</i>	1	
<i>lidocaine inj 1% w/ epinephrine-1:100000</i>	1	
<i>lidocaine inj 1.5% w/ epinephrine-1:200000</i>	1	
<i>lidocaine inj 2% w/ epinephrine-1:50000</i>	1	
<i>lidocaine inj 2% w/ epinephrine-1:100000</i>	1	
<i>lidocaine inj 2% w/ epinephrine-1:200000</i>	1	
LIDOCAINE INJ 400/20ML	NC	
MARCAINE INJ 0.5%	3	
MARCAINE INJ 0.25%	3	

Drug Name	Drug Tier	Requirements/Limits
MARCAINE INJ 0.75%	3	
MARCAINE INJ SPINAL	3	
MARCAINE/EPI INJ 0.5%	3	
MARCAINE/EPI INJ 0.25%	3	
NAROPIN INJ 2MG/ML	3	
NAROPIN INJ 5MG/ML	3	
NAROPIN INJ 7.5MG/ML	3	
NAROPIN INJ 10MG/ML	3	
NESACAINE INJ 1%	3	
NESACAINE INJ 2%	3	
NESACAINE INJ -MPF 2%	3	
NESACAINE INJ -MPF 3%	3	
<i>polocaine inj 1%</i>	1	
<i>polocaine inj 2%</i>	1	
<i>polocaine inj -mpf 1%</i>	1	
<i>polocaine inj -mpf 2%</i>	1	
<i>polocaine inj mpf 1.5%</i>	1	
ROPIVAC/NACL INJ 0.2-0.9%	NC	
<i>ropivacaine hcl inj 2 mg/ml</i>	1	
<i>ropivacaine hcl inj 5 mg/ml</i>	1	
<i>ropivacaine hcl inj 7.5 mg/ml</i>	1	
<i>ropivacaine hcl inj 10 mg/ml</i>	1	
ROPIVACAINE INJ 0.2%	NC	
ROPIVACAINE INJ 0.5%	NC	
<i>sensorcaine inj 0.5%</i>	1	
<i>sensorcaine inj 0.25%</i>	1	
<i>sensorcaine inj -mpf/epi</i>	1	
SENSORCAINE INJ -MPF/EPI	3	
<i>sensorcaine inj mpf0.25%</i>	1	
<i>sensorcaine inj mpf0.75%</i>	1	
<i>sensorcaine inj mpf 0.5%</i>	1	
<i>sensorcaine/ inj epi 0.5%</i>	1	
<i>sensorcaine/ inj epi 0.25</i>	1	
<i>tetracaine hcl inj 1%</i>	1	
XYLO-MPF/EPI INJ 1%	3	
XYLO-MPF/EPI INJ 1.5%	3	
XYLO-MPF/EPI INJ 2%	3	
XYLO/EPI 1%- INJ 1:100000	3	
XYLO/EPI INJ 0.5%	3	
XYLO/EPI INJ 2%	3	
XYLOCAINE INJ 0.5%	3	
XYLOCAINE INJ 1%	3	
XYLOCAINE INJ 2%	3	
XYLOCAINE INJ -MPF 1%	3	
XYLOCAINE INJ -MPF 2%	3	
<i>xylocaine inj dent 2%</i>	1	
XYLOCAINE INJ MPF 0.5%	3	

Drug Name	Drug Tier	Requirements/Limits
XYLOCAINE INJ MPF 1.5%	3	
ZINGO INJ 0.5MG	3	
MISCELLANEOUS		
<i>clonidine hcl inj (for epidural infusion) 100 mcg/ml</i>	1	
<i>clonidine hcl inj (for epidural infusion) 500 mcg/ml</i>	1	
DURACLON INJ	3	
PRIALT INJ 25MCG/ML	6	SP
PRIALT INJ 100MCG	6	SP
PRIALT INJ 500MCG	6	SP
NON-OPIOID ANALGESICS		
ALLZITAL TAB 25-325MG	NC	
<i>bupap tab 50-300mg</i>	2	
BUT/ASA/CAF TAB	NC	
<i>butalbital-acetaminophen tab 50-300 mg</i>	2	
<i>butalbital-acetaminophen tab 50-325 mg</i>	1	
<i>butalbital-acetaminophen-caffeine cap 50-300-40 mg</i>	NC	
<i>butalbital-acetaminophen-caffeine cap 50-325-40 mg</i>	NC	
<i>butalbital-acetaminophen-caffeine tab 50-325-40 mg</i>	1	
<i>butalbital-aspirin-caffeine cap 50-325-40 mg</i>	1	
<i>esgic cap</i>	NC	
ESGIC TAB	2	
FIORICET CAP	NC	
FIORINAL CAP	2	
LEVACET TAB	3	
OFIRMEV INJ 10MG/ML	3	
<i>tencon tab 50-325mg</i>	1	
VANATOL LQ SOL	3	
<i>zebutal cap</i>	NC	
NSAIDS		
CALDOLOR INJ 800/8ML	3	
<i>choline & magnesium salicylates liq 500 mg/5ml</i>	1	
DAYPRO TAB 600MG	2	
<i>diclofenac potassium tab 50 mg</i>	1	
<i>diclofenac sodium tab delayed release 25 mg</i>	1	
<i>diclofenac sodium tab delayed release 50 mg</i>	1	
<i>diclofenac sodium tab delayed release 75 mg</i>	1	
<i>diclofenac sodium tab er 24hr 100 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>diflunisal tab 500 mg</i>	1	
EC-NAPROSYN TAB 375MG	3	
<i>etodolac cap 200 mg</i>	1	
<i>etodolac cap 300 mg</i>	1	
<i>etodolac tab 400 mg</i>	1	
<i>etodolac tab 500 mg</i>	1	
<i>etodolac tab er 24hr 400 mg</i>	1	
<i>etodolac tab er 24hr 500 mg</i>	1	
<i>etodolac tab er 24hr 600 mg</i>	1	
FELDENE CAP 10MG	3	
FELDENE CAP 20MG	3	
<i>fenoprofen calcium cap 400 mg</i>	2	
<i>fenoprofen calcium tab 600 mg</i>	2	
FENOPROFEN CAP 200MG	NC	
<i>flurbiprofen tab 50 mg</i>	1	
<i>flurbiprofen tab 100 mg</i>	1	
<i>ibu tab 400mg</i>	1	
<i>ibu tab 600mg</i>	1	
<i>ibu tab 800mg</i>	1	
<i>ibuprofen susp 100 mg/5ml</i>	1	
<i>ibuprofen tab 400 mg</i>	1	
<i>ibuprofen tab 600 mg</i>	1	
<i>ibuprofen tab 800 mg</i>	1	
INDOCIN SUP 50MG	NC	
INDOCIN SUS 25MG/5ML	NC	
<i>indomethacin cap 25 mg</i>	1	
<i>indomethacin cap 50 mg</i>	1	
<i>indomethacin cap er 75 mg</i>	1	
<i>indomethacin sodium iv for soln 1 mg</i>	1	
<i>ketoprofen cap er 24hr 200 mg</i>	2	
<i>ketorolac tromethamine im inj 60 mg/2ml (30 mg/ml)</i>	1	
<i>ketorolac tromethamine inj 15 mg/ml</i>	1	
<i>ketorolac tromethamine inj 30 mg/ml</i>	1	
<i>ketorolac tromethamine tab 10 mg</i>	1	
<i>meclofenamate sodium cap 50 mg</i>	2	
<i>meclofenamate sodium cap 100 mg</i>	2	
<i>mefenamic acid cap 250 mg</i>	2	
<i>meloxicam tab 7.5 mg</i>	1	
<i>meloxicam tab 15 mg</i>	1	
MOBIC TAB 7.5MG	2	
MOBIC TAB 15MG	2	
<i>nabumetone tab 500 mg</i>	1	
<i>nabumetone tab 750 mg</i>	1	
NALFON CAP 400MG	3	ST
NAPRELAN TAB 375MG CR	NC	
NAPRELAN TAB 500MG CR	NC	

Drug Name	Drug Tier	Requirements/Limits
NAPRELAN TAB 750MG CR	NC	
NAPROSYN SUS 125/5ML	3	
<i>naproxen dr tab 375mg</i>	1	
<i>naproxen dr tab 500mg</i>	1	
<i>naproxen sodium tab 275 mg</i>	1	
<i>naproxen sodium tab 550 mg</i>	1	
<i>naproxen sodium tab er 24hr 375 mg (base equiv)</i>	2	PA
<i>naproxen sodium tab er 24hr 500 mg (base equiv)</i>	2	PA
<i>naproxen susp 125 mg/5ml</i>	2	
<i>naproxen tab 250 mg</i>	1	
<i>naproxen tab 375 mg</i>	1	
<i>naproxen tab 500 mg</i>	1	
<i>oxaprozin tab 600 mg</i>	1	
<i>piroxicam cap 10 mg</i>	1	
<i>piroxicam cap 20 mg</i>	1	
<i>salsalate tab 500 mg</i>	1	
<i>salsalate tab 750 mg</i>	2	
SPRIX SPR 15.75MG	NC	
<i>sulindac tab 150 mg</i>	1	
<i>sulindac tab 200 mg</i>	1	
TIVORBEX CAP 20MG	NC	
TIVORBEX CAP 40MG	NC	
<i>tolmetin sodium cap 400 mg</i>	2	
<i>tolmetin sodium tab 200 mg</i>	1	
<i>tolmetin sodium tab 600 mg</i>	2	
VIVLODEX CAP 5MG	NC	
VIVLODEX CAP 10MG	NC	
ZIPSOR CAP 25MG	3	ST
ZORVOLEX CAP 18MG	3	ST
ZORVOLEX CAP 35MG	3	ST

NSAIDS, COMBINATIONS

ARTHROTEC 50 TAB	NC	
ARTHROTEC 75 TAB	NC	
DERMA SILKRX PAK DICLOPAK	NC	
<i>diclofenac w/ misoprostol tab delayed release 50-0.2 mg</i>	2	
<i>diclofenac w/ misoprostol tab delayed release 75-0.2 mg</i>	1	
DUEXIS TAB 800-26.6	3	
NUDROXIPAK KIT DSDR-50	NC	
NUDROXIPAK KIT DSDR-75	NC	
NUDROXIPAK KIT E-400	NC	
NUDROXIPAK KIT I-800	NC	
NUDROXIPAK KIT M-15	NC	
NUDROXIPAK KIT N-500	NC	

Drug Name	Drug Tier	Requirements/Limits
PREVIDOLRX PAK ANALGESI	NC	
VIMOVO TAB 375-20MG	3	
VIMOVO TAB 500-20MG	3	

NSAIDS, TOPICAL

<i>diclofenac sodium gel 1%</i>	1	
<i>diclofenac sodium soln 1.5%</i>	2	
DICLOFONO GEL 1.6%	NC	
FLECTOR DIS 1.3%	3	
<i>klofensaid sol ii</i>	2	
PENNSAID SOL 2%	NC	
VOLTAREN GEL 1%	3	

OPIOID ANALGESICS

ABSTRAL SUB 100MCG	3	PA, QL
ABSTRAL SUB 200MCG	3	PA, QL
ABSTRAL SUB 300MCG	3	PA, QL
ABSTRAL SUB 400MCG	3	PA, QL
ABSTRAL SUB 600MCG	3	PA, QL
ABSTRAL SUB 800MCG	3	PA, QL
<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	1	QL
<i>acetaminophen w/ codeine tab 300-15 mg</i>	1	QL
<i>acetaminophen w/ codeine tab 300-30 mg</i>	1	QL
<i>acetaminophen w/ codeine tab 300-60 mg</i>	1	QL
<i>acetaminophen-caffeine-dihydrocodeine cap 320.5-30-16 mg</i>	1	QL
ACTIQ LOZ 200MCG	3	PA, QL
ACTIQ LOZ 400MCG	3	PA, QL
ACTIQ LOZ 600MCG	3	PA, QL
ACTIQ LOZ 800MCG	3	PA, QL
ACTIQ LOZ 1200MCG	3	PA, QL
ACTIQ LOZ 1600MCG	3	PA, QL
<i>alfentanil hcl iv soln 1000 mcg/2ml (500 mcg/ml) (base eq)</i>	1	
<i>alfentanil hcl iv soln 2500 mcg/5ml (500 mcg/ml) (base eq)</i>	1	
ALFENTANIL INJ 1000/2ML	3	
ALFENTANIL INJ 2500/5ML	3	
ARYMO ER TAB 15MG	NC	
ARYMO ER TAB 30MG	NC	
ARYMO ER TAB 60MG	NC	
<i>ascomp/cod cap 30mg</i>	1	
BELBUCA MIS 75MCG	2	QL, ST
BELBUCA MIS 150MCG	2	QL, ST
BELBUCA MIS 300MCG	2	QL, ST
BELBUCA MIS 450MCG	2	QL, ST
BELBUCA MIS 600MCG	2	QL, ST
BELBUCA MIS 750MCG	2	QL, ST

Drug Name	Drug Tier	Requirements/Limits
BELBUCA MIS 900MCG	2	QL, ST
BUPRENEX INJ 0.3MG/ML	3	
<i>buprenorphine hcl inj 0.3 mg/ml (base equiv)</i>	1	
<i>buprenorphine td patch weekly 5 mcg/hr</i>	NC	
<i>buprenorphine td patch weekly 7.5 mcg/hr</i>	NC	
<i>buprenorphine td patch weekly 10 mcg/hr</i>	NC	
<i>buprenorphine td patch weekly 15 mcg/hr</i>	NC	
<i>buprenorphine td patch weekly 20 mcg/hr</i>	NC	
<i>butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg</i>	2	
<i>butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg</i>	1	
<i>butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg</i>	1	
<i>butorphanol tartrate inj 1 mg/ml</i>	1	
<i>butorphanol tartrate inj 2 mg/ml</i>	1	
<i>butorphanol tartrate nasal soln 10 mg/ml</i>	1	PA, QL
BUTRANS DIS 5MCG/HR	2	QL, ST
BUTRANS DIS 7.5/HR	2	QL, ST
BUTRANS DIS 10MCG/HR	2	QL, ST
BUTRANS DIS 15MCG/HR	2	QL, ST
BUTRANS DIS 20MCG/HR	2	QL, ST
<i>codeine sulfate tab 15 mg</i>	1	PA, QL
<i>codeine sulfate tab 30 mg</i>	1	PA, QL
<i>codeine sulfate tab 60 mg</i>	1	PA, QL
CONZIP CAP 100MG	3	PA, QL, ST
CONZIP CAP 200MG	3	PA, QL, ST
CONZIP CAP 300MG	3	PA, QL, ST
DEMEROL INJ 25MG/0.5	3	
DEMEROL INJ 25MG/ML	3	
DEMEROL INJ 50MG/ML	3	
DEMEROL INJ 75MG/1.5	3	
DEMEROL INJ 75MG/ML	3	
DEMEROL INJ 100/2ML	3	
DEMEROL INJ 100MG/ML	3	
DILAUDID INJ 1MG/ML	NC	
DILAUDID INJ 2MG/ML	NC	
DILAUDID INJ 4MG/ML	NC	
DILAUDID LIQ 1MG/ML	3	PA, QL
DILAUDID TAB 2MG	3	PA, QL
DILAUDID TAB 4MG	3	PA, QL
DILAUDID TAB 8MG	3	PA, QL
DOLOPHINE TAB 5MG	3	QL, ST
DOLOPHINE TAB 10MG	3	QL, ST
DURAGESIC DIS 12MCG/HR	3	PA, QL, ST
DURAGESIC DIS 25MCG/HR	3	PA, QL, ST

Drug Name	Drug Tier	Requirements/Limits
DURAGESIC DIS 50MCG/HR	3	PA, QL, ST
DURAGESIC DIS 75MCG/HR	3	PA, QL, ST
DURAGESIC DIS 100MCG/H	3	PA, QL, ST
<i>duramorph inj 0.5mg/ml</i>	1	
<i>duramorph inj 1mg/ml</i>	1	
EMBEDA CAP 20-0.8MG	NC	
EMBEDA CAP 30-1.2MG	NC	
EMBEDA CAP 50-2MG	NC	
EMBEDA CAP 60-2.4MG	NC	
EMBEDA CAP 80-3.2MG	NC	
EMBEDA CAP 100-4MG	NC	
<i>endocet tab 2.5-325</i>	1	QL
<i>endocet tab 5-325mg</i>	1	QL
<i>endocet tab 7.5-325</i>	1	QL
<i>endocet tab 10-325mg</i>	1	QL
EXALGO TAB 8MG	3	PA, QL, ST
EXALGO TAB 12MG	3	PA, QL, ST
EXALGO TAB 16MG	3	PA, QL, ST
EXALGO TAB 32MG	3	PA, QL, ST
FENT/BUPIVAC INJ 0.20/125	NC	
FENT/ROPIVAC INJ 0.4/200	NC	
FENT/ROPIVAC INJ NAACL	NC	
FENTANYL CIT INJ 50MCG/ML	NC	
FENTANYL CIT INJ 100/2ML	NC	
FENTANYL CIT INJ 100MCG	3	
FENTANYL CIT INJ 250MCG	3	
FENTANYL CIT INJ BUPIVACA	NC	
FENTANYL CIT SOL 10MCG/ML	NC	
<i>fentanyl citrate lozenge on a handle 200 mcg</i>	1	PA, QL
<i>fentanyl citrate lozenge on a handle 400 mcg</i>	1	PA, QL
<i>fentanyl citrate lozenge on a handle 600 mcg</i>	1	PA, QL
<i>fentanyl citrate lozenge on a handle 800 mcg</i>	1	PA, QL
<i>fentanyl citrate lozenge on a handle 1200 mcg</i>	1	PA, QL
<i>fentanyl citrate lozenge on a handle 1600 mcg</i>	1	PA, QL
<i>fentanyl citrate pf soln cartridge 100 mcg/2ml</i>	1	
<i>fentanyl citrate preservative free (pf) inj 100 mcg/2ml</i>	1	
<i>fentanyl citrate preservative free (pf) inj 250 mcg/5ml</i>	1	
<i>fentanyl citrate preservative free (pf) inj 500 mcg/10ml</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>fentanyl citrate preservative free (pf) inj 1000 mcg/20ml</i>	1	
<i>fentanyl citrate preservative free (pf) inj 2500 mcg/50ml</i>	1	
FENTANYL INJ 50MCG/ML	NC	
<i>fentanyl td patch 72hr 12 mcg/hr</i>	1	PA, QL, ST
<i>fentanyl td patch 72hr 25 mcg/hr</i>	1	PA, QL, ST
FENTANYL TD PATCH 72HR 37.5 MCG/HR	1	PA, QL, ST
<i>fentanyl td patch 72hr 50 mcg/hr</i>	1	PA, QL, ST
FENTANYL TD PATCH 72HR 62.5 MCG/HR	1	PA, QL, ST
<i>fentanyl td patch 72hr 75 mcg/hr</i>	1	PA, QL, ST
FENTANYL TD PATCH 72HR 87.5 MCG/HR	1	PA, QL, ST
<i>fentanyl td patch 72hr 100 mcg/hr</i>	1	PA, QL, ST
FENTORA TAB 100MCG	2	PA, QL
FENTORA TAB 200MCG	2	PA, QL
FENTORA TAB 400MCG	2	PA, QL
FENTORA TAB 600MCG	2	PA, QL
FENTORA TAB 800MCG	2	PA, QL
FIORICET CAP CODEINE	3	
FIORINAL/COD CAP 30MG	3	
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	1	QL
<i>hydrocodone-acetaminophen tab 2.5-325 mg</i>	1	QL
<i>hydrocodone-acetaminophen tab 5-300 mg</i>	2	QL
<i>hydrocodone-acetaminophen tab 5-325 mg</i>	1	QL
<i>hydrocodone-acetaminophen tab 7.5-300 mg</i>	2	QL
<i>hydrocodone-acetaminophen tab 7.5-325 mg</i>	1	QL
<i>hydrocodone-acetaminophen tab 10-300 mg</i>	2	QL
<i>hydrocodone-acetaminophen tab 10-325 mg</i>	1	QL
<i>hydrocodone-ibuprofen tab 5-200 mg</i>	2	QL
<i>hydrocodone-ibuprofen tab 7.5-200 mg</i>	1	QL
<i>hydrocodone-ibuprofen tab 10-200 mg</i>	2	QL
HYDROM/ROPIV SOL 2/250ML	NC	
HYDROMORPHON INJ NAACL	NC	
HYDROMORPHON SUP 3MG	3	PA, QL
<i>hydromorphone hcl inj 1 mg/ml</i>	1	
<i>hydromorphone hcl inj 2 mg/ml</i>	1	
<i>hydromorphone hcl inj 4 mg/ml</i>	1	
<i>hydromorphone hcl liqd 1 mg/ml</i>	2	PA, QL
<i>hydromorphone hcl preservative free (pf) inj 10 mg/ml</i>	1	
<i>hydromorphone hcl tab 2 mg</i>	1	PA, QL
<i>hydromorphone hcl tab 4 mg</i>	1	PA, QL

Drug Name	Drug Tier	Requirements/Limits
<i>hydromorphone hcl tab 8 mg</i>	1	PA, QL
<i>hydromorphone hcl tab er 24hr deter 8 mg</i>	2	PA, QL, ST
<i>hydromorphone hcl tab er 24hr deter 12 mg</i>	2	PA, QL, ST
<i>hydromorphone hcl tab er 24hr deter 16 mg</i>	2	PA, QL, ST
<i>hydromorphone hcl tab er 24hr deter 32 mg</i>	2	PA, QL, ST
HYSINGLA ER TAB 20 MG	2	PA, QL, ST
HYSINGLA ER TAB 30 MG	2	PA, QL, ST
HYSINGLA ER TAB 40 MG	2	PA, QL, ST
HYSINGLA ER TAB 60 MG	2	PA, QL, ST
HYSINGLA ER TAB 80 MG	2	PA, QL, ST
HYSINGLA ER TAB 100 MG	2	PA, QL, ST
HYSINGLA ER TAB 120 MG	2	PA, QL, ST
<i>ibudone tab 5-200mg</i>	2	QL
<i>ibudone tab 10-200mg</i>	2	QL
INFUMORPH INJ 10MG/ML	3	
INFUMORPH INJ 25MG/ML	3	
IONSYS PAD 40MCG/AC	NC	
KADIAN CAP 10MG ER	3	PA, QL, ST
KADIAN CAP 20MG ER	3	PA, QL, ST
KADIAN CAP 30MG ER	3	PA, QL, ST
KADIAN CAP 40MG ER	3	PA, QL, ST
KADIAN CAP 50MG ER	3	PA, QL, ST
KADIAN CAP 60MG ER	3	PA, QL, ST
KADIAN CAP 80MG ER	3	PA, QL, ST
KADIAN CAP 100MG ER	3	PA, QL, ST
KADIAN CAP 200MG ER	3	PA, QL, ST
LAZANDA SPR 100MCG	NC	
LAZANDA SPR 300MCG	NC	
LAZANDA SPR 400MCG	NC	
<i>levorphanol tartrate tab 2 mg</i>	NC	
<i>lorcet hd tab 10-325mg</i>	1	QL
<i>lorcet plus tab 7.5-325</i>	1	QL
<i>lorcet tab 5-325mg</i>	1	QL
LORTAB ELX 10-300MG	3	QL
<i>meperidine hcl inj 10 mg/ml</i>	1	
<i>meperidine hcl inj 25 mg/ml</i>	1	
<i>meperidine hcl inj 50 mg/ml</i>	1	
<i>meperidine hcl inj 100 mg/ml</i>	1	
<i>meperidine hcl oral soln 50 mg/5ml</i>	1	PA, QL
<i>meperidine hcl tab 50 mg</i>	1	PA, QL
<i>meperidine hcl tab 100 mg</i>	2	PA, QL
<i>methadone con 10mg/ml</i>	2	QL, ST
<i>methadone hcl inj 10 mg/ml</i>	1	QL, ST
<i>methadone hcl soln 5 mg/5ml</i>	1	QL, ST

Drug Name	Drug Tier	Requirements/Limits
<i>methadone hcl soln 10 mg/5ml</i>	2	QL, ST
<i>methadone hcl tab 5 mg</i>	1	QL, ST
<i>methadone hcl tab 10 mg</i>	1	QL, ST
<i>methadone hcl tab for oral susp 40 mg</i>	1	
METHADONE INJ 10MG/ML	3	QL, ST
METHADOSE CON 10MG/ML	3	
METHADOSE SF CON 10MG/ML	3	
<i>methadose tab 40mg</i>	1	
<i>mitigo inj 10mg/ml</i>	1	
<i>mitigo inj 25mg/ml</i>	1	
MORPHABOND TAB 15MG ER	NC	
MORPHABOND TAB 30MG ER	NC	
MORPHABOND TAB 60MG ER	NC	
MORPHABOND TAB 100MG ER	NC	
MORPHIN/NAACL INJ 2MG-0.9%	NC	
MORPHIN/NAACL INJ 4MG-0.9%	NC	
MORPHIN/NAACL INJ 60/30ML	NC	
MORPHINE SUL INJ 2MG/ML	3	
MORPHINE SUL INJ 2MG/ML	NC	
MORPHINE SUL INJ 4MG/ML	3	
MORPHINE SUL INJ 5MG/ML	3	
MORPHINE SUL INJ 8MG/ML	3	
MORPHINE SUL INJ 10/0.7ML	3	
MORPHINE SUL INJ 10MG/ML	3	
MORPHINE SUL INJ 150/30ML	3	
MORPHINE SUL SUP 30MG	3	
<i>morphine sulfate beads cap er 24hr 30 mg</i>	1	PA, QL, ST
<i>morphine sulfate beads cap er 24hr 45 mg</i>	2	PA, QL, ST
<i>morphine sulfate beads cap er 24hr 60 mg</i>	2	PA, QL, ST
<i>morphine sulfate beads cap er 24hr 75 mg</i>	1	PA, QL, ST
<i>morphine sulfate beads cap er 24hr 90 mg</i>	2	PA, QL, ST
<i>morphine sulfate beads cap er 24hr 120 mg</i>	2	PA, QL, ST
<i>morphine sulfate cap er 24hr 10 mg</i>	2	PA, QL, ST
<i>morphine sulfate cap er 24hr 20 mg</i>	2	PA, QL, ST
<i>morphine sulfate cap er 24hr 30 mg</i>	2	PA, QL, ST
<i>morphine sulfate cap er 24hr 50 mg</i>	2	PA, QL, ST
<i>morphine sulfate cap er 24hr 60 mg</i>	2	PA, QL, ST
<i>morphine sulfate cap er 24hr 80 mg</i>	2	PA, QL, ST
<i>morphine sulfate cap er 24hr 100 mg</i>	2	PA, QL, ST
<i>morphine sulfate inj 8 mg/ml</i>	1	
<i>morphine sulfate inj 10 mg/ml</i>	1	
<i>morphine sulfate inj pf 0.5 mg/ml</i>	1	
<i>morphine sulfate inj pf 1 mg/ml</i>	1	
<i>morphine sulfate iv soln 1 mg/ml</i>	1	
<i>morphine sulfate iv soln 25 mg/ml</i>	1	
<i>morphine sulfate iv soln 50 mg/ml</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>morphine sulfate iv soln pf 4 mg/ml</i>	1	
<i>morphine sulfate iv soln pf 8 mg/ml</i>	1	
<i>morphine sulfate iv soln pf 10 mg/ml</i>	2	
<i>morphine sulfate oral soln 10 mg/5ml</i>	1	PA, QL
<i>morphine sulfate oral soln 20 mg/5ml</i>	1	PA, QL
<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	1	PA, QL
<i>morphine sulfate suppos 5 mg</i>	1	PA, QL
<i>morphine sulfate suppos 10 mg</i>	1	PA, QL
<i>morphine sulfate suppos 20 mg</i>	1	PA, QL
<i>morphine sulfate tab 15 mg</i>	1	PA, QL
<i>morphine sulfate tab 30 mg</i>	1	PA, QL
<i>morphine sulfate tab er 15 mg</i>	1	PA, QL, ST
<i>morphine sulfate tab er 30 mg</i>	1	PA, QL, ST
<i>morphine sulfate tab er 60 mg</i>	1	PA, QL, ST
<i>morphine sulfate tab er 100 mg</i>	1	PA, QL, ST
<i>morphine sulfate tab er 200 mg</i>	2	PA, QL, ST
MORPHINE/D5W INJ 50/25ML	NC	
MS CONTIN TAB 15MG ER	3	PA, QL, ST
MS CONTIN TAB 30MG ER	3	PA, QL, ST
MS CONTIN TAB 60MG ER	3	PA, QL, ST
MS CONTIN TAB 100MG ER	3	PA, QL, ST
MS CONTIN TAB 200MG ER	3	PA, QL, ST
<i>nalbuphine hcl inj 10 mg/ml</i>	1	
<i>nalbuphine hcl inj 20 mg/ml</i>	2	
NALOCET TAB 2.5-300	NC	
NORCO TAB 5-325MG	3	QL
NORCO TAB 7.5-325	3	QL
NORCO TAB 10-325MG	3	QL
NUCYNTA ER TAB 50MG	2	PA, QL, ST
NUCYNTA ER TAB 100MG	2	PA, QL, ST
NUCYNTA ER TAB 150MG	2	PA, QL, ST
NUCYNTA ER TAB 200MG	2	PA, QL, ST
NUCYNTA ER TAB 250MG	2	PA, QL, ST
NUCYNTA TAB 50MG	2	PA, QL
NUCYNTA TAB 75MG	2	PA, QL
NUCYNTA TAB 100MG	2	PA, QL
OPANA ER TAB 5MG	3	PA, QL, ST
OPANA ER TAB 7.5MG	3	PA, QL, ST
OPANA ER TAB 10MG	3	PA, QL, ST
OPANA ER TAB 15MG	3	PA, QL, ST
OPANA ER TAB 20MG	3	PA, QL, ST
OPANA ER TAB 30MG	3	PA, QL, ST
OPANA ER TAB 40MG	3	PA, QL, ST
OPANA TAB 5MG	3	PA, QL
OPANA TAB 10MG	3	PA, QL
OXAYDO TAB 5MG	NC	

Drug Name	Drug Tier	Requirements/Limits
OXAYDO TAB 7.5MG	NC	
<i>oxycodone hcl cap 5 mg</i>	2	PA, QL
<i>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</i>	2	PA, QL
<i>oxycodone hcl soln 5 mg/5ml</i>	2	PA, QL
<i>oxycodone hcl tab 5 mg</i>	1	PA, QL
<i>oxycodone hcl tab 10 mg</i>	1	PA, QL
<i>oxycodone hcl tab 15 mg</i>	1	PA, QL
<i>oxycodone hcl tab 20 mg</i>	1	PA, QL
<i>oxycodone hcl tab 30 mg</i>	1	PA, QL
<i>oxycodone hcl tab er 12hr deter 10 mg</i>	2	PA, QL, ST
<i>oxycodone hcl tab er 12hr deter 15 mg</i>	2	PA, QL, ST
<i>oxycodone hcl tab er 12hr deter 20 mg</i>	2	PA, QL, ST
<i>oxycodone hcl tab er 12hr deter 30 mg</i>	2	PA, QL, ST
<i>oxycodone hcl tab er 12hr deter 40 mg</i>	2	PA, QL, ST
<i>oxycodone hcl tab er 12hr deter 60 mg</i>	2	PA, QL, ST
<i>oxycodone hcl tab er 12hr deter 80 mg</i>	2	PA, QL, ST
<i>oxycodone w/ acetaminophen soln 5-325 mg/5ml</i>	1	QL
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	2	QL
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	1	QL
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	1	QL
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	1	QL
<i>oxycodone-aspirin tab 4.8355-325 mg</i>	1	QL
<i>oxycodone-ibuprofen tab 5-400 mg</i>	1	QL
OXYCONTIN TAB 10MG CR	2	PA, QL, ST
OXYCONTIN TAB 15MG CR	2	PA, QL, ST
OXYCONTIN TAB 20MG CR	2	PA, QL, ST
OXYCONTIN TAB 30MG CR	2	PA, QL, ST
OXYCONTIN TAB 40MG CR	2	PA, QL, ST
OXYCONTIN TAB 60MG CR	2	PA, QL, ST
OXYCONTIN TAB 80MG CR	2	PA, QL, ST
<i>oxymorphone hcl tab 5 mg</i>	1	PA, QL
<i>oxymorphone hcl tab 10 mg</i>	2	PA, QL
<i>oxymorphone hcl tab er 12hr 5 mg</i>	1	PA, QL, ST
<i>oxymorphone hcl tab er 12hr 7.5 mg</i>	2	PA, QL, ST
<i>oxymorphone hcl tab er 12hr 10 mg</i>	2	PA, QL, ST
<i>oxymorphone hcl tab er 12hr 15 mg</i>	2	PA, QL, ST
<i>oxymorphone hcl tab er 12hr 20 mg</i>	2	PA, QL, ST
<i>oxymorphone hcl tab er 12hr 30 mg</i>	2	PA, QL, ST
<i>oxymorphone hcl tab er 12hr 40 mg</i>	2	PA, QL, ST
<i>pentazocine w/ naloxone tab 50-0.5 mg</i>	2	PA, QL
PERCOCET TAB 2.5-325	3	QL

Drug Name	Drug Tier	Requirements/Limits
PERCOCET TAB 5-325MG	3	QL
PERCOCET TAB 7.5-325	3	QL
PERCOCET TAB 10-325MG	3	QL
PRIMLEV TAB 5-300MG	NC	
PRIMLEV TAB 7.5-300	NC	
PRIMLEV TAB 10-300MG	NC	
<i>remifentanil hcl for iv soln 1 mg</i>	1	
<i>remifentanil hcl for iv soln 2 mg</i>	1	
<i>remifentanil hcl for iv soln 5 mg</i>	1	
ROXICODONE TAB 5MG	3	PA, QL
ROXICODONE TAB 15MG	3	PA, QL
ROXICODONE TAB 30MG	3	PA, QL
ROXYBOND TAB 15MG	NC	
ROXYBOND TAB 30MG	NC	
SUBSYS SPR 100MCG	2	PA, QL
SUBSYS SPR 200MCG	2	PA, QL
SUBSYS SPR 400MCG	2	PA, QL
SUBSYS SPR 600MCG	2	PA, QL
SUBSYS SPR 800MCG	2	PA, QL
SUBSYS SPR 1200MCG	2	PA, QL
SUBSYS SPR 1600MCG	2	PA, QL
<i>sufentanil citrate inj 50 mcg/ml</i>	1	
<i>sufentanil citrate inj 100 mcg/2ml (50 mcg/ml)</i>	1	
<i>sufentanil citrate inj 250 mcg/5ml (50 mcg/ml)</i>	1	
SUFENTANIL INJ 50MCG/ML	3	
SUFENTANIL INJ 100/2ML	3	
SUFENTANIL INJ 250/5ML	3	
TRAMADOL HCL CAP 150MG ER	3	PA, QL, ST
<i>tramadol hcl cap er 24hr biphasic release 100 mg</i>	2	PA, QL, ST
<i>tramadol hcl cap er 24hr biphasic release 200 mg</i>	2	PA, QL, ST
<i>tramadol hcl cap er 24hr biphasic release 300 mg</i>	2	PA, QL, ST
<i>tramadol hcl tab 50 mg</i>	1	PA, QL
<i>tramadol hcl tab er 24hr 100 mg</i>	1	PA, QL, ST
<i>tramadol hcl tab er 24hr 200 mg</i>	1	PA, QL, ST
<i>tramadol hcl tab er 24hr 300 mg</i>	1	PA, QL, ST
<i>tramadol hcl tab er 24hr biphasic release 100 mg</i>	1	PA, QL, ST
<i>tramadol hcl tab er 24hr biphasic release 200 mg</i>	2	PA, QL, ST
<i>tramadol hcl tab er 24hr biphasic release 300 mg</i>	1	PA, QL, ST
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	1	QL

Drug Name	Drug Tier	Requirements/Limits
TREZIX CAP	1	QL
TYLENOL/COD TAB #3	3	QL
TYLENOL/COD TAB #4	3	QL
ULTIVA INJ 1MG	3	
ULTIVA INJ 2MG	3	
ULTIVA INJ 5MG	3	
ULTRACET TAB 37.5-325	3	QL
ULTRAM TAB 50MG	2	PA, QL
<i>verdrocet tab 2.5-325</i>	1	QL
<i>vicodin es tab 7.5-300</i>	2	QL
<i>vicodin hp tab 10-300mg</i>	2	QL
<i>vicodin tab 5-300mg</i>	2	QL
XTAMPZA ER CAP 9MG	3	PA, QL, ST
XTAMPZA ER CAP 13.5MG	3	PA, QL, ST
XTAMPZA ER CAP 18MG	3	PA, QL, ST
XTAMPZA ER CAP 27MG	3	PA, QL, ST
XTAMPZA ER CAP 36MG	3	PA, QL, ST
ZOHYDRO ER CAP 10MG	3	PA, QL, ST
ZOHYDRO ER CAP 15MG	3	PA, QL, ST
ZOHYDRO ER CAP 20MG	3	PA, QL, ST
ZOHYDRO ER CAP 30MG	3	PA, QL, ST
ZOHYDRO ER CAP 40MG	3	PA, QL, ST
ZOHYDRO ER CAP 50MG	3	PA, QL, ST

VISCOSUPPLEMENTS

EUFLEXXA INJ 10MG/ML	NC	
GEL-ONE INJ 30MG/3ML	2	PA
GELSYN-3 INJ 16.8/2ML	2	PA
GENVISC 850 INJ 25/2.5	3	PA
HYALGAN INJ 20MG/2ML	NC	
HYMOVIS INJ 24MG/3ML	NC	
MONOVISC INJ 88MG/4ML	NC	
ORTHOVISC INJ 15MG/ML	NC	
SUPARTZ FX INJ 25/2.5ML	2	PA
SYNVISC INJ 8MG/ML	NC	
SYNVISC ONE INJ 8MG/ML	NC	
VISCO-3 INJ 25/2.5ML	2	PA

ANTI-INFECTIVES

AMINOGLYCOSIDES

<i>amikacin sulfate inj 1 gm/4ml (250 mg/ml)</i>	2	
<i>amikacin sulfate inj 500 mg/2ml (250 mg/ml)</i>	2	
<i>gentamicin in saline inj 0.8 mg/ml</i>	1	
<i>gentamicin in saline inj 1 mg/ml</i>	1	
<i>gentamicin in saline inj 1.2 mg/ml</i>	1	
<i>gentamicin in saline inj 1.6 mg/ml</i>	1	
<i>gentamicin in saline inj 2 mg/ml</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>gentamicin sulfate inj 10 mg/ml</i>	1	
<i>gentamicin sulfate inj 40 mg/ml</i>	1	
<i>neomycin sulfate tab 500 mg</i>	1	
<i>paromomycin sulfate cap 250 mg</i>	2	
<i>streptomycin sulfate for inj 1 gm</i>	2	
<i>tobramycin sulfate for inj 1.2 gm</i>	2	
<i>tobramycin sulfate inj 1.2 gm/30ml (40 mg/ml) (base equiv)</i>	1	
<i>tobramycin sulfate inj 2 gm/50ml (40 mg/ml) (base equiv)</i>	1	
<i>tobramycin sulfate inj 10 mg/ml (base equivalent)</i>	1	
<i>tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv)</i>	1	
ZEMDRI INJ 500MG/10	NC	
ANTIBACTERIALS, CARBAPENEMS		
<i>doripenem for iv infusion 250 mg</i>	1	
<i>doripenem for iv infusion 500 mg</i>	1	
<i>imipenem-cilastatin intravenous for soln 250 mg</i>	1	
<i>imipenem-cilastatin intravenous for soln 500 mg</i>	2	
INVANZ INJ 1GM	3	
<i>meropenem iv for soln 1 gm</i>	2	
<i>meropenem iv for soln 500 mg</i>	1	
MERREM INJ 1GM	3	
MERREM INJ 500MG	3	
PRIMAXIN IV INJ 500MG	3	
VABOMERE INJ 2GM(1-1)	3	
ANTIBACTERIALS, CEPHALOSPORIN COMBINATIONS		
AVYCAZ INJ 2-0.5GM	3	
ZERBAXA INJ 1.5GM	3	
ANTIBACTERIALS, CEPHALOSPORINS, Fifth Generation		
TEFLARO INJ 400MG	3	
TEFLARO INJ 600MG	3	
ANTIBACTERIALS, CEPHALOSPORINS, First Generation		
<i>cefadroxil cap 500 mg</i>	1	
<i>cefadroxil for susp 250 mg/5ml</i>	2	
<i>cefadroxil for susp 500 mg/5ml</i>	2	
<i>cefadroxil tab 1 gm</i>	2	
CEFAZOL/DEX SOL 1GM	3	
CEFAZOL/DEX SOL 2GM	3	
CEFAZOLIN INJ 1GM/50ML	3	
CEFAZOLIN INJ 100GM	3	
CEFAZOLIN INJ 300GM	3	
<i>cefazolin sodium for inj 1 gm</i>	2	
<i>cefazolin sodium for inj 10 gm</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>cefazolin sodium for inj 20 gm</i>	1	
<i>cefazolin sodium for inj 500 mg</i>	1	
<i>cefazolin sodium for iv soln 1 gm</i>	1	
CEFAZOLIN SOL	NC	
<i>cephalexin cap 250 mg</i>	1	
<i>cephalexin cap 500 mg</i>	1	
<i>cephalexin cap 750 mg</i>	2	
<i>cephalexin for susp 125 mg/5ml</i>	1	
<i>cephalexin for susp 250 mg/5ml</i>	1	
<i>cephalexin tab 250 mg</i>	2	
<i>cephalexin tab 500 mg</i>	2	
DAXBIA CAP 333MG	NC	
KEFLEX CAP 250MG	3	
KEFLEX CAP 500MG	3	
KEFLEX CAP 750MG	3	

ANTIBACTERIALS, CEPHALOSPORINS, Fourth Generation

<i>cefepime hcl for inj 1 gm</i>	2	
<i>cefepime hcl for inj 2 gm</i>	1	
CEFEPIME INJ 1GM	3	
CEFEPIME INJ 2GM	3	
CEFEPIME/DEX INJ 1GM	3	
CEFEPIME/DEX INJ 2GM	3	
MAXIPIME INJ 1GM	3	
MAXIPIME INJ 2GM	3	

ANTIBACTERIALS, CEPHALOSPORINS, Second Generation

<i>cefaclor cap 250 mg</i>	1	
<i>cefaclor cap 500 mg</i>	1	
CEFACLOR ER TAB 500MG	3	
<i>cefaclor for susp 125 mg/5ml</i>	1	
<i>cefaclor for susp 250 mg/5ml</i>	2	
<i>cefaclor for susp 375 mg/5ml</i>	1	
CEFOTAN INJ 1GM/10ML	3	
CEFOTAN INJ 2GM	3	
CEFOTET/DEX INJ 1-3.58%	3	
CEFOTET/DEX INJ 2-2.08%	3	
<i>cefotetan disodium for inj 1 gm</i>	1	
<i>cefotetan disodium for inj 2 gm</i>	1	
<i>cefotetan disodium for inj 10 gm</i>	1	
CEFOXITIN INJ 1GM	3	
CEFOXITIN INJ 2GM	3	
<i>cefoxitin sodium for inj 10 gm</i>	1	
<i>cefoxitin sodium for iv soln 1 gm</i>	1	
<i>cefoxitin sodium for iv soln 2 gm</i>	1	
<i>cefprozil for susp 125 mg/5ml</i>	1	
<i>cefprozil for susp 250 mg/5ml</i>	1	
<i>cefprozil tab 250 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>cefprozil tab 500 mg</i>	1	
<i>cefuroxime axetil tab 250 mg</i>	1	
<i>cefuroxime axetil tab 500 mg</i>	1	
<i>cefuroxime sodium for inj 7.5 gm</i>	1	
<i>cefuroxime sodium for inj 750 mg</i>	1	
<i>cefuroxime sodium for iv soln 1.5 gm</i>	1	

ANTIBACTERIALS, CEPHALOSPORINS, Third Generation

<i>cefdinir cap 300 mg</i>	1	
<i>cefdinir for susp 125 mg/5ml</i>	1	
<i>cefdinir for susp 250 mg/5ml</i>	1	
<i>cefditoren pivoxil tab 200 mg (base equivalent)</i>	1	
<i>cefditoren pivoxil tab 400 mg (base equivalent)</i>	1	
<i>cefixime for susp 100 mg/5ml</i>	2	
<i>cefixime for susp 200 mg/5ml</i>	2	
<i>cefotaxime sodium for inj 1 gm</i>	1	
<i>cefotaxime sodium for inj 2 gm</i>	1	
<i>cefotaxime sodium for inj 10 gm</i>	1	
<i>cefotaxime sodium for inj 500 mg</i>	1	
<i>cefpodoxime proxetil for susp 50 mg/5ml</i>	2	
<i>cefpodoxime proxetil for susp 100 mg/5ml</i>	2	
<i>cefpodoxime proxetil tab 100 mg</i>	2	
<i>cefpodoxime proxetil tab 200 mg</i>	2	
<i>ceftazidime for inj 1 gm</i>	2	
<i>ceftazidime for inj 2 gm</i>	1	
<i>ceftazidime for inj 6 gm</i>	1	
CEFTAZIDIME/ SOL D5W 1GM	3	
CEFTAZIDIME/ SOL D5W 2GM	3	
CEFTRIAX/DEX INJ 1GM	3	
CEFTRIAX/DEX INJ 2GM	3	
CEFTRIAXONE INJ 100GM	3	
<i>ceftriaxone sodium for inj 1 gm</i>	1	
<i>ceftriaxone sodium for inj 2 gm</i>	1	
<i>ceftriaxone sodium for inj 10 gm</i>	1	
<i>ceftriaxone sodium for inj 250 mg</i>	1	
<i>ceftriaxone sodium for inj 500 mg</i>	1	
<i>ceftriaxone sodium for iv soln 1 gm</i>	1	
<i>ceftriaxone sodium for iv soln 2 gm</i>	1	
<i>ceftriaxone sodium in dextrose inj 20 mg/ml</i>	2	
<i>ceftriaxone sodium in dextrose inj 40 mg/ml</i>	1	
SPECTRACEF TAB 400MG	3	
SUPRAX CAP 400MG	2	
SUPRAX CHW 100MG	2	
SUPRAX CHW 200MG	2	

Drug Name	Drug Tier	Requirements/Limits
SUPRAX SUS 100/5ML	2	
SUPRAX SUS 200/5ML	2	
SUPRAX SUS 500/5ML	2	
<i>tazicef inj 1gm</i>	2	
TAZICEF INJ 1GM/50ML	3	
<i>tazicef inj 2gm</i>	1	
<i>tazicef inj 6gm</i>	1	

ANTIBACTERIALS, ERYTHROMYCINS/MACROLIDES

<i>azithromycin for susp 100 mg/5ml</i>	2	
<i>azithromycin for susp 200 mg/5ml</i>	1	
<i>azithromycin iv for soln 500 mg</i>	1	
<i>azithromycin powd pack for susp 1 gm</i>	2	
<i>azithromycin tab 250 mg</i>	1	
<i>azithromycin tab 500 mg</i>	1	
<i>azithromycin tab 600 mg</i>	1	
<i>clarithromycin for susp 125 mg/5ml</i>	2	
<i>clarithromycin for susp 250 mg/5ml</i>	2	
<i>clarithromycin tab 250 mg</i>	1	
<i>clarithromycin tab 500 mg</i>	1	
<i>clarithromycin tab er 24hr 500 mg</i>	1	
DIFICID TAB 200MG	2	
<i>e.e.s. 400 tab 400mg</i>	2	
E.E.S. GRAN SUS 200/5ML	NC	
<i>ery-tab tab 250mg ec</i>	2	
<i>ery-tab tab 333mg ec</i>	2	
<i>ery-tab tab 500mg ec</i>	2	
ERYPED SUS 200/5ML	NC	
ERYPED SUS 400/5ML	NC	
ERYTHROCIN INJ 500MG	3	
<i>erythrocin tab 250mg</i>	2	
<i>erythromycin ethylsuccinate for susp 200 mg/5ml</i>	2	
<i>erythromycin ethylsuccinate tab 400 mg</i>	2	
<i>erythromycin tab 250 mg</i>	2	
<i>erythromycin tab 500 mg</i>	2	
<i>erythromycin w/ delayed release particles cap 250 mg</i>	2	
ZITHROMAX INJ 500MG	3	
ZITHROMAX POW 1GM PAK	3	
ZITHROMAX SUS 100/5ML	3	
ZITHROMAX SUS 200/5ML	3	
ZITHROMAX TAB 250MG	3	
ZITHROMAX TAB 500MG	3	
ZITHROMAX TAB 600MG	3	
ZITHROMAX TAB TRI-PAK	3	
ZITHROMAX TAB Z-PAK	3	

ANTIBACTERIALS, FLUOROQUINOLONES

Drug Name	Drug Tier	Requirements/Limits
AVELOX INJ	3	
AVELOX TAB 400MG	3	
BAXDELA INJ 300MG	3	
BAXDELA TAB 450MG	3	
CIPRO (5%) SUS 250MG/5	3	
CIPRO (10%) SUS 500MG/5	3	
CIPRO I.V. INJ 400MG	3	
CIPRO TAB 250MG	3	
CIPRO TAB 500MG	3	
CIPRO XR TAB 500MG	3	
CIPRO XR TAB 1000MG	3	
<i>ciprofloxacin 200 mg/100ml in d5w</i>	1	
<i>ciprofloxacin 400 mg/200ml in d5w</i>	1	
<i>ciprofloxacin for oral susp 500 mg/5ml (10%) (10 gm/100ml)</i>	1	
<i>ciprofloxacin hcl tab 100 mg (base equiv)</i>	2	
<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>	1	
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	1	
<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	1	
<i>ciprofloxacin-ciprofloxacin hcl tab er 24hr 500 mg (base eq)</i>	2	
<i>ciprofloxacin-ciprofloxacin hcl tab er 24hr 1000 mg(base eq)</i>	2	
LEVAQUIN TAB 500MG	3	
LEVAQUIN TAB 750MG	3	
<i>levofloxacin in d5w iv soln 250 mg/50ml</i>	1	
<i>levofloxacin in d5w iv soln 500 mg/100ml</i>	2	
<i>levofloxacin in d5w iv soln 750 mg/150ml</i>	2	
<i>levofloxacin iv soln 25 mg/ml</i>	2	
<i>levofloxacin oral soln 25 mg/ml</i>	2	
<i>levofloxacin tab 250 mg</i>	1	
<i>levofloxacin tab 500 mg</i>	1	
<i>levofloxacin tab 750 mg</i>	1	
<i>moxifloxacin hcl 400 mg/250ml in sodium chloride 0.8% inj</i>	1	
<i>moxifloxacin hcl tab 400 mg (base equiv)</i>	1	
MOXIFLOXACIN INJ	NC	
<i>ofloxacin tab 300 mg</i>	2	
<i>ofloxacin tab 400 mg</i>	2	
ANTIBACTERIALS, PENICILLINS		
<i>amoxicillin & k clavulanate chew tab 200-28.5 mg</i>	1	
<i>amoxicillin & k clavulanate chew tab 400-57 mg</i>	2	
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	2	
<i>amoxicillin & k clavulanate for susp 400-571 mg/5ml</i>	1	
<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	1	
<i>amoxicillin & k clavulanate tab 250-125 mg</i>	2	
<i>amoxicillin & k clavulanate tab 500-125 mg</i>	1	
<i>amoxicillin & k clavulanate tab 875-125 mg</i>	1	
<i>amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg</i>	2	
<i>amoxicillin (trihydrate) cap 250 mg</i>	1	
<i>amoxicillin (trihydrate) cap 500 mg</i>	1	
<i>amoxicillin (trihydrate) chew tab 125 mg</i>	1	
<i>amoxicillin (trihydrate) chew tab 250 mg</i>	1	
<i>amoxicillin (trihydrate) for susp 125 mg/5ml</i>	1	
<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i>	1	
<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i>	1	
<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i>	1	
<i>amoxicillin (trihydrate) tab 500 mg</i>	1	
<i>amoxicillin (trihydrate) tab 875 mg</i>	1	
<i>ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm</i>	1	
<i>ampicillin & sulbactam sodium for inj 3 (2-1) gm</i>	1	
<i>ampicillin & sulbactam sodium for inj 15 (10-5) gm</i>	1	
<i>ampicillin & sulbactam sodium for iv soln 15 (10-5) gm</i>	1	
<i>ampicillin cap 500 mg</i>	1	
<i>ampicillin sodium for inj 1 gm</i>	1	
<i>ampicillin sodium for inj 2 gm</i>	1	
<i>ampicillin sodium for inj 10 gm</i>	1	
<i>ampicillin sodium for inj 125 mg</i>	1	
<i>ampicillin sodium for inj 250 mg</i>	1	
<i>ampicillin sodium for inj 500 mg</i>	1	
<i>ampicillin sodium for iv soln 1 gm</i>	1	
<i>ampicillin sodium for iv soln 2 gm</i>	2	
<i>ampicillin sodium for iv soln 10 gm</i>	1	
AUGMENTIN SUS 125/5ML	3	
AUGMENTIN SUS 250/5ML	3	
AUGMENTIN SUS ES-600	3	
AUGMENTIN TAB 500MG	3	
AUGMENTIN TAB 875MG	3	

Drug Name	Drug Tier	Requirements/Limits
AUGMENTIN XR TAB 12HR	3	
BACTOCILL INJ DEX 1GM	3	
BACTOCILL INJ DEX 2GM	3	
BICILLIN C-R INJ 900/300	3	
BICILLIN C-R INJ 1200000	3	
BICILLIN L-A INJ 600000	3	
BICILLIN L-A INJ 1200000	3	
BICILLIN L-A INJ 2400000	3	
<i>dicloxacillin sodium cap 250 mg</i>	1	
<i>dicloxacillin sodium cap 500 mg</i>	1	
MOXATAG TAB 775MG	3	
NAFCILLIN INJ 1GM/50ML	3	
NAFCILLIN INJ 2GM/100	3	
<i>nafcillin sodium for inj 1 gm</i>	1	
<i>nafcillin sodium for inj 2 gm</i>	1	
<i>nafcillin sodium for iv soln 1 gm</i>	1	
<i>nafcillin sodium for iv soln 2 gm</i>	1	
<i>nafcillin sodium for iv soln 10 gm</i>	1	
<i>oxacillin sodium for inj 1 gm (base equivalent)</i>	1	
<i>oxacillin sodium for inj 2 gm (base equivalent)</i>	1	
<i>oxacillin sodium for inj 10 gm (base equivalent)</i>	1	
PEN G PROC INJ 600000	3	
PENICILL GK/ INJ DEX 1MU	3	
PENICILL GK/ INJ DEX 2MU	3	
PENICILL GK/ INJ DEX 3MU	3	
<i>penicillin g potassium for inj 5000000 unit</i>	1	
<i>penicillin g potassium for inj 20000000 unit</i>	2	
<i>penicillin g sodium for inj 5000000 unit</i>	1	
<i>penicillin v potassium for soln 125 mg/5ml</i>	1	
<i>penicillin v potassium for soln 250 mg/5ml</i>	1	
<i>penicillin v potassium tab 250 mg</i>	1	
<i>penicillin v potassium tab 500 mg</i>	1	
<i>pfizerpen inj 5mu</i>	1	
<i>pfizerpen inj 20mu</i>	2	
<i>piperacillin sod-tazobactam na for inj 3.3752 gm (3-0.375 gm)</i>		
<i>piperacillin sod-tazobactam sod for inj 2.252 gm (2-0.25 gm)</i>		
<i>piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)</i>	2	
<i>piperacillin sod-tazobactam sod for inj 40.51 gm (36-4.5 gm)</i>		
UNASYN INJ 1.5GM	3	
UNASYN INJ 3GM	3	

Drug Name	Drug Tier	Requirements/Limits
UNASYN INJ 15GM	3	
ZOSYN INJ 2-0.25GM	3	
ZOSYN INJ 3-0.375G	3	
ZOSYN INJ 4-0.5GM	3	
ZOSYN INJ 36-4.5GM	3	
ZOSYN SOL 2-0.25GM	3	
ZOSYN SOL 3-0.375G	3	
ZOSYN SOL 4-0.50GM	3	

ANTIBACTERIALS, TETRACYCLINES

ACTICLATE TAB 75MG	3	
ACTICLATE TAB 150MG	3	
<i>avidoxy tab 100mg</i>	1	
<i>demeclocycline hcl tab 150 mg</i>	2	
<i>demeclocycline hcl tab 300 mg</i>	2	
DORYX MPC TAB 120MG	NC	
DORYX TAB 50MG	NC	
DORYX TAB 200MG	NC	
<i>doxy 100 inj 100mg</i>	2	
<i>doxycycline hyclate cap 50 mg</i>	1	
<i>doxycycline hyclate cap 100 mg</i>	1	
<i>doxycycline hyclate tab 20 mg</i>	1	
<i>doxycycline hyclate tab 75 mg</i>	2	
<i>doxycycline hyclate tab 100 mg</i>	1	
<i>doxycycline hyclate tab 150 mg</i>	2	
<i>doxycycline hyclate tab delayed release 75 mg</i>	2	
<i>doxycycline hyclate tab delayed release 100 mg</i>	1	
<i>doxycycline hyclate tab delayed release 150 mg</i>	2	
<i>doxycycline hyclate tab delayed release 200 mg</i>	2	
<i>doxycycline monohydrate cap 50 mg</i>	1	
<i>doxycycline monohydrate cap 75 mg</i>	2	
<i>doxycycline monohydrate cap 100 mg</i>	1	
<i>doxycycline monohydrate cap 150 mg</i>	2	
<i>doxycycline monohydrate for susp 25 mg/5ml</i>	2	
<i>doxycycline monohydrate tab 50 mg</i>	1	
<i>doxycycline monohydrate tab 75 mg</i>	1	
<i>doxycycline monohydrate tab 100 mg</i>	1	
<i>doxycycline monohydrate tab 150 mg</i>	2	
MINOCIN CAP 50MG	NC	
MINOCIN CAP 100MG	NC	
MINOCIN INJ 100MG	3	
<i>minocycline hcl cap 50 mg</i>	1	
<i>minocycline hcl cap 75 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>minocycline hcl cap 100 mg</i>	1	
<i>minocycline hcl tab 50 mg</i>	1	
<i>minocycline hcl tab 75 mg</i>	1	
<i>minocycline hcl tab 100 mg</i>	1	
<i>minocycline hcl tab er 24hr 45 mg</i>	2	
<i>minocycline hcl tab er 24hr 65 mg</i>	2	
<i>minocycline hcl tab er 24hr 90 mg</i>	2	
<i>minocycline hcl tab er 24hr 115 mg</i>	2	
<i>minocycline hcl tab er 24hr 135 mg</i>	1	
<i>mondoxyne nl cap 50mg</i>	1	
<i>mondoxyne nl cap 75mg</i>	2	
<i>mondoxyne nl cap 100mg</i>	1	
<i>morgidox cap 1x50mg</i>	1	
<i>morgidox cap 1x100mg</i>	1	
<i>morgidox cap 2x100mg</i>	1	
MORGIDOX KIT 1X50MG	NC	
SOLODYN TAB 55MG	3	ST
SOLODYN TAB 65MG	3	ST
SOLODYN TAB 80MG	3	ST
SOLODYN TAB 105MG	3	ST
SOLODYN TAB 115MG	3	ST
TARGADOX TAB 50MG	3	
<i>tetracycline hcl cap 250 mg</i>	2	
<i>tetracycline hcl cap 500 mg</i>	2	
VIBRAMYCIN CAP 100MG	3	
VIBRAMYCIN SUS 25MG/5ML	2	
VIBRAMYCIN SYP 50MG/5ML	2	
XIMINO CAP 45MG ER	NC	
XIMINO CAP 90MG ER	NC	
XIMINO CAP 135MG ER	NC	
ANTIFUNGALS		
ABELCET INJ 5MG/ML	3	
AMBISOME INJ 50MG	3	
<i>amphotericin b for inj 50 mg</i>	1	
ANCOBON CAP 250MG	3	
ANCOBON CAP 500MG	3	
BIO-STATIN CAP 500000	3	
BIO-STATIN CAP 1000000	3	
<i>bio-statin pow</i>	1	
CANCIDAS INJ 50MG	3	
CANCIDAS INJ 70MG	3	
<i>casprofungin acetate for iv soln 50 mg</i>	1	
<i>casprofungin acetate for iv soln 70 mg</i>	1	
<i>clotrimazole troche 10 mg</i>	2	
CRESEMBA CAP 186 MG	3	
CRESEMBA INJ 372MG	3	

Drug Name	Drug Tier	Requirements/Limits
DIFLUCAN SUS 10MG/ML	3	
DIFLUCAN SUS 40MG/ML	3	
DIFLUCAN TAB 50MG	3	
DIFLUCAN TAB 100MG	3	
DIFLUCAN TAB 150MG	3	
DIFLUCAN TAB 200MG	3	
ERAXIS INJ 50MG	3	
ERAXIS INJ 100MG	3	
<i>fluconazole for susp 10 mg/ml</i>	1	
<i>fluconazole for susp 40 mg/ml</i>	1	
<i>fluconazole in dextrose inj 200 mg/100ml</i>	1	
<i>fluconazole in dextrose inj 400 mg/200ml</i>	1	
<i>fluconazole in nacl 0.9% inj 200 mg/100ml</i>	1	
<i>fluconazole in nacl 0.9% inj 400 mg/200ml</i>	1	
<i>fluconazole tab 50 mg</i>	1	
<i>fluconazole tab 100 mg</i>	1	
<i>fluconazole tab 150 mg</i>	1	
<i>fluconazole tab 200 mg</i>	1	
FLUCONAZOLE/ INJ NAACL 100	3	
<i>flucytosine cap 250 mg</i>	2	
<i>flucytosine cap 500 mg</i>	1	
<i>griseofulvin microsize susp 125 mg/5ml</i>	1	
<i>griseofulvin microsize tab 500 mg</i>	2	
<i>griseofulvin ultramicrosize tab 125 mg</i>	2	
<i>griseofulvin ultramicrosize tab 250 mg</i>	2	
<i>itraconazole cap 100 mg</i>	2	
<i>ketoconazole tab 200 mg</i>	1	
MYCAMINE INJ 50MG	3	
MYCAMINE INJ 100MG	3	
NOXAFIL INJ 300/16.7	3	
NOXAFIL SUS 40MG/ML	3	
NOXAFIL TAB 100MG	3	
<i>nystatin susp 100000 unit/ml</i>	1	
<i>nystatin tab 500000 unit</i>	1	
ONMEL TAB 200MG	3	
ORAVIG TAB 50MG	3	
SPORANOX CAP 100MG	3	
SPORANOX CAP PULSEPAK	3	
SPORANOX SOL 10MG/ML	3	
<i>terbinafine hcl tab 250 mg</i>	1	
VFEND IV INJ 200MG	3	PA
VFEND SUS 40MG/ML	2	PA
VFEND TAB 50MG	2	PA
VFEND TAB 200MG	2	PA
<i>voriconazole for inj 200 mg</i>	1	PA
<i>voriconazole for susp 40 mg/ml</i>	1	PA
<i>voriconazole tab 50 mg</i>	1	PA

Drug Name	Drug Tier	Requirements/Limits
<i>voriconazole tab 200 mg</i>	2	PA
ANTIMALARIALS		
<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	1	PV
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	1	PV
<i>chloroquine phosphate tab 250 mg</i>	1	PV
<i>chloroquine phosphate tab 500 mg</i>	1	PV
COARTEM TAB 20-120MG	3	
DARAPRIM TAB 25MG	3	PA
MALARONE TAB 62.5-25	2	PV
MALARONE TAB 250-100	2	PV
<i>mefloquine hcl tab 250 mg</i>	1	PV
PRIMAQUINE TAB 26.3MG	3	PV
QUALAQUIN CAP 324MG	3	
<i>quinine sulfate cap 324 mg</i>	2	
ANTIRETROVIRALS, ANTIRETROVIRAL ADJUVANTS		
TYBOST TAB 150MG	2	QL, SP
ANTIRETROVIRALS, ANTIRETROVIRAL COMBINATIONS		
<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	1	QL, SP
<i>abacavir sulfate-lamivudine-zidovudine tab 300-150-300 mg</i>	1	QL, SP
ATRIPLA TAB	2	QL, SP
BIKTARVY TAB	2	
CIMDUO TAB 300-300	NC	
COMBIVIR TAB 150-300	2	QL, SP
COMPLERA TAB	2	QL, SP
DESCOVY TAB 200/25	2	QL, SP
EPZICOM TAB 600-300	3	QL, SP
EVOTAZ TAB 300-150	2	QL, SP
GENVOYA TAB	2	QL, SP
<i>lamivudine-zidovudine tab 150-300 mg</i>	1	QL, SP
ODEFSEY TAB	2	QL, SP
PREZCOBIX TAB 800-150	2	QL, SP
STRIBILD TAB	2	QL, SP
SYMFI LO TAB	NC	
SYMFI TAB	NC	
SYMTUZA TAB	NC	
TRIUMEQ TAB	2	QL, SP
TRIZIVIR TAB	2	QL, SP
TRUVADA TAB 100-150	2	QL, SP
TRUVADA TAB 133-200	2	QL, SP
TRUVADA TAB 167-250	2	QL, SP
TRUVADA TAB 200-300	2	PV, QL, SP
ANTIRETROVIRALS, CHEMOKINE RECEPTOR ANTAGONISTS		
SELZENTRY SOL 20MG/ML	2	QL, SP
SELZENTRY TAB 25MG	2	QL, SP

Drug Name	Drug Tier	Requirements/Limits
SELZENTRY TAB 75MG	2	QL, SP
SELZENTRY TAB 150MG	2	QL, SP
SELZENTRY TAB 300MG	2	QL, SP
ANTIRETROVIRALS, FUSION INHIBITORS		
FUZEON INJ 90MG	5	QL, SP
ANTIRETROVIRALS, INTEGRASE INHIBITORS		
ISENTRESS CHW 25MG	2	QL, SP
ISENTRESS CHW 100MG	2	QL, SP
ISENTRESS HD TAB 600MG	2	QL, SP
ISENTRESS POW 100MG	2	QL, SP
ISENTRESS TAB 400MG	2	QL, SP
TIVICAY TAB 10MG	2	QL, SP
TIVICAY TAB 25MG	2	QL, SP
TIVICAY TAB 50MG	2	QL, SP
ANTIRETROVIRALS, MISCELLANEOUS		
TROGARZO INJ 150MG/ML	6	SP
ANTIRETROVIRALS, NON-NUCLEOSIDE REVERSE TRANSCRIPTASE INHIBITORS		
EDURANT TAB 25MG	2	QL, SP
<i>efavirenz cap 50 mg</i>	1	QL, SP
<i>efavirenz cap 200 mg</i>	1	QL, SP
<i>efavirenz tab 600 mg</i>	1	QL, SP
INTELENCE TAB 25MG	2	QL, SP
INTELENCE TAB 100MG	2	QL, SP
INTELENCE TAB 200MG	2	QL, SP
<i>nevirapine tab 200 mg</i>	1	QL, SP
<i>nevirapine tab er 24hr 100 mg</i>	1	QL, SP
<i>nevirapine tab er 24hr 400 mg</i>	1	QL, SP
RESCRIPTOR TAB 100 MG	2	QL, SP
RESCRIPTOR TAB 200MG	2	QL, SP
SUSTIVA CAP 50MG	2	QL, SP
SUSTIVA CAP 200MG	2	QL, SP
SUSTIVA TAB 600MG	2	QL, SP
VIRAMUNE SUS 50MG/5ML	2	QL, SP
VIRAMUNE TAB 200MG	2	QL, SP
VIRAMUNE XR TAB 100MG	2	QL, SP
VIRAMUNE XR TAB 400MG	2	QL, SP
ANTIRETROVIRALS, NUCLEOSIDE REVERSE TRANSCRIPTASE INHIBITORS		
<i>abacavir sulfate soln 20 mg/ml (base equiv)</i>	1	QL, SP
<i>abacavir sulfate tab 300 mg (base equiv)</i>	1	QL, SP
<i>didanosine delayed release capsule 200 mg1</i>		QL, SP
<i>didanosine delayed release capsule 250 mg1</i>		QL, SP
<i>didanosine delayed release capsule 400 mg1</i>		QL, SP
EMTRIVA CAP 200MG	2	QL, SP

Drug Name	Drug Tier	Requirements/Limits
EMTRIVA SOL 10MG/ML	2	QL, SP
EPIVIR SOL 10MG/ML	2	QL, SP
EPIVIR TAB 150MG	2	QL, SP
EPIVIR TAB 300MG	2	QL, SP
<i>lamivudine oral soln 10 mg/ml</i>	1	QL, SP
<i>lamivudine tab 150 mg</i>	1	QL, SP
<i>lamivudine tab 300 mg</i>	1	QL, SP
RETROVIR CAP 100MG	2	QL, SP
RETROVIR INJ 10MG/ML	5	SP
RETROVIR SYP 50MG/5ML	2	QL, SP
<i>stavudine cap 15 mg</i>	1	QL, SP
<i>stavudine cap 20 mg</i>	1	QL, SP
<i>stavudine cap 30 mg</i>	1	QL, SP
<i>stavudine cap 40 mg</i>	1	QL, SP
VIDEX EC CAP 125MG	2	QL, SP
VIDEX EC CAP 200MG	2	QL, SP
VIDEX EC CAP 250MG	2	QL, SP
VIDEX EC CAP 400MG	2	QL, SP
VIDEX SOL 2GM	2	QL, SP
VIDEX SOL 4GM	2	QL, SP
ZERIT CAP 15MG	2	QL, SP
ZERIT CAP 20MG	2	QL, SP
ZERIT CAP 30MG	2	QL, SP
ZERIT CAP 40MG	2	QL, SP
ZERIT SOL 1MG/ML	2	QL, SP
ZIAGEN SOL 20MG/ML	2	QL, SP
ZIAGEN TAB 300MG	2	QL, SP
<i>zidovudine cap 100 mg</i>	1	QL, SP
<i>zidovudine syrup 10 mg/ml</i>	1	QL, SP
<i>zidovudine tab 300 mg</i>	1	QL, SP

ANTIRETROVIRALS, NUCLEOTIDE REVERSE TRANSCRIPTASE INHIBITORS

<i>tenofovir disoproxil fumarate tab 300 mg</i>	1	QL, SP
VIREAD POW 40MG/GM	2	QL, SP
VIREAD TAB 150MG	2	QL, SP
VIREAD TAB 200MG	2	QL, SP
VIREAD TAB 250MG	2	QL, SP
VIREAD TAB 300MG	2	QL, SP

ANTIRETROVIRALS, PROTEASE INHIBITORS

APTIVUS CAP 250MG	2	QL, SP
APTIVUS SOL	2	QL, SP
<i>atazanavir sulfate cap 150 mg (base equiv)</i>	1	QL, SP
<i>atazanavir sulfate cap 200 mg (base equiv)</i>	1	QL, SP
<i>atazanavir sulfate cap 300 mg (base equiv)</i>	1	QL, SP
CRIXIVAN CAP 200MG	2	QL, SP
CRIXIVAN CAP 400MG	2	QL, SP

Drug Name	Drug Tier	Requirements/Limits
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	1	QL, SP
INVIRASE CAP 200MG	2	QL, SP
INVIRASE TAB 500MG	2	QL, SP
KALETRA SOL	3	QL, SP
KALETRA TAB 100-25MG	2	QL, SP
KALETRA TAB 200-50MG	2	QL, SP
LEXIVA SUS 50MG/ML	2	QL, SP
LEXIVA TAB 700MG	2	QL, SP
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	1	QL, SP
NORVIR CAP 100MG	2	QL, SP
NORVIR POW 100MG	2	SP
NORVIR SOL 80MG/ML	2	QL, SP
NORVIR TAB 100MG	2	QL, SP
PREZISTA SUS 100MG/ML	2	QL, SP
PREZISTA TAB 75MG	2	QL, SP
PREZISTA TAB 150MG	2	QL, SP
PREZISTA TAB 600MG	2	QL, SP
PREZISTA TAB 800MG	2	QL, SP
REYATAZ CAP 150MG	2	QL, SP
REYATAZ CAP 200MG	2	QL, SP
REYATAZ CAP 300MG	2	QL, SP
REYATAZ POW 50MG	2	QL, SP
<i>ritonavir tab 100 mg</i>	1	QL, SP
VIRACEPT TAB 250MG	2	QL, SP
VIRACEPT TAB 625MG	2	QL, SP

ANTITUBERCULAR AGENTS

CAPASTAT SUL INJ 1GM	3	
<i>cycloserine cap 250 mg</i>	1	
<i>ethambutol hcl tab 100 mg</i>	1	
<i>ethambutol hcl tab 400 mg</i>	1	
<i>isoniazid inj 100 mg/ml</i>	1	
<i>isoniazid syrup 50 mg/5ml</i>	1	
<i>isoniazid tab 100 mg</i>	1	
<i>isoniazid tab 300 mg</i>	1	
MYAMBUTOL TAB 100MG	2	
MYAMBUTOL TAB 400MG	2	
PASER GRA 4GM	3	
PRIFTIN TAB 150MG	3	
<i>pyrazinamide tab 500 mg</i>	2	
RIFADIN CAP 150MG	2	
RIFADIN INJ 600 MG	3	
RIFAMATE CAP	3	
<i>rifampin cap 150 mg</i>	1	
<i>rifampin cap 300 mg</i>	1	
<i>rifampin for inj 600 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
RIFATER TAB	3	
SIRTURO TAB 100MG	3	
TRECTOR TAB 250MG	3	

ANTIVIRALS, CYTOMEGALOVIRUS AGENTS

<i>cidofovir iv inj 75 mg/ml</i>	1	
CYTOVENE INJ 500MG	3	
FOSCAVIR INJ 24MG/ML	3	
<i>ganciclovir sodium for inj 500 mg</i>	1	
PREVYMIS INJ 240/12	3	
PREVYMIS INJ 480/24	3	
PREVYMIS TAB 240MG	3	
PREVYMIS TAB 480MG	3	
VALCYTE SOL 50MG/ML	NC	
VALCYTE TAB 450MG	NC	
<i>valganciclovir hcl for soln 50 mg/ml (base equiv)</i>	2	
<i>valganciclovir hcl tab 450 mg (base equivalent)</i>	2	

ANTIVIRALS, HEPATITIS AGENTS, Hepatitis B

<i>adefovir dipivoxil tab 10 mg</i>	4	SP
BARACLUDE SOL .05MG/ML	5	SP
BARACLUDE TAB 0.5MG	6	SP
BARACLUDE TAB 1MG	6	SP
<i>entecavir tab 0.5 mg</i>	4	SP
<i>entecavir tab 1 mg</i>	4	SP
EPIVIR HBV SOL 5MG/ML	6	SP
EPIVIR HBV TAB 100MG	6	SP
HEPSERA TAB 10MG	6	SP
<i>lamivudine tab 100 mg (hbv)</i>	4	SP
VEMLIDY TAB 25MG	5	SP

ANTIVIRALS, HEPATITIS AGENTS, Hepatitis C

DAKLINZA TAB 30MG	NC	
DAKLINZA TAB 60MG	NC	
DAKLINZA TAB 90MG	NC	
EPCLUSA TAB 400-100	5	PA, QL, SP, for genotypes 1, 2, 3, 4, 5 and 6
HARVONI TAB 90-400MG	5	PA, QL, SP, only for genotypes 1, 4, 5 and 6
MAVYRET TAB 100-40MG	NC	
MODERIBA PAK 800/DAY	6	PA, QL, SP, ST
MODERIBA PAK 1200/DAY	6	PA, QL, SP, ST
<i>moderiba tab 200mg</i>	4	PA, QL, SP, ST
MODERIBA TAB 600/DAY	6	PA, QL, SP, ST
MODERIBA TAB 1000/DAY	6	PA, QL, SP, ST
REBETOL CAP 200MG	6	PA, QL, SP
REBETOL SOL 40MG/ML	6	PA, QL, SP

Drug Name	Drug Tier	Requirements/Limits
RIBAPAK PAK 800/DAY	6	PA, QL, SP, ST
RIBAPAK PAK 1200/DAY	6	PA, QL, SP, ST
RIBAPAK TAB 600/DAY	6	PA, QL, SP, ST
RIBAPAK TAB 1000/DAY	6	PA, QL, SP, ST
<i>ribasphere cap 200mg</i>	4	PA, QL, SP, ST
<i>ribasphere tab 200mg</i>	4	PA, QL, SP, ST
<i>ribasphere tab 400mg</i>	4	PA, QL, SP, ST
<i>ribasphere tab 600mg</i>	4	PA, QL, SP, ST
<i>ribavirin cap 200 mg</i>	4	PA, QL, SP
<i>ribavirin tab 200 mg</i>	4	PA, QL, SP
SOVALDI TAB 400MG	6	PA, QL, SP
TECHNIVIE TAB	NC	
VIEKIRA PAK TAB	NC	
VIEKIRA XR TAB	NC	
VOSEVI TAB	5	PA, QL, SP, for use in patients previously treated with an HCV regimen containing an NS5A inhibitor (for genotypes 1-6) or sofosbuvir without an NS5A inhibitor (for genotypes 1a or 3)
ZEPATIER TAB 50-100MG	NC	
ANTIVIRALS, HERPES AGENTS		
<i>acyclovir cap 200 mg</i>	1	
<i>acyclovir sodium iv soln 50 mg/ml</i>	1	
<i>acyclovir susp 200 mg/5ml</i>	2	
<i>acyclovir tab 400 mg</i>	1	
<i>acyclovir tab 800 mg</i>	1	
<i>famciclovir tab 125 mg</i>	1	
<i>famciclovir tab 250 mg</i>	1	
<i>famciclovir tab 500 mg</i>	1	
SITAVIG TAB 50MG	3	PA, ST
<i>valacyclovir hcl tab 1 gm</i>	1	
<i>valacyclovir hcl tab 500 mg</i>	1	
VALTrex TAB 1GM	NC	
VALTrex TAB 500MG	NC	
ZOVIRAX CAP 200MG	3	
ZOVIRAX SUS 200/5ML	3	
ZOVIRAX TAB 400MG	3	
ZOVIRAX TAB 800MG	3	
ANTIVIRALS, INFLUENZA AGENTS		
FLUMADINE TAB 100MG	3	
<i>oseltamivir phosphate cap 30 mg (base equiv)</i>	2	PA, QL

Drug Name	Drug Tier	Requirements/Limits
<i>oseltamivir phosphate cap 45 mg (base equiv)</i>	2	PA, QL
<i>oseltamivir phosphate cap 75 mg (base equiv)</i>	2	PA, QL
<i>oseltamivir phosphate for susp 6 mg/ml (base equiv)</i>	2	PA, QL
RAPIVAB INJ 200MG/20	3	
RELENZA MIS DISKHALE	2	PA, QL
<i>rimantadine hydrochloride tab 100 mg</i>	1	
TAMIFLU CAP 30MG	3	PA, QL
TAMIFLU CAP 45MG	3	PA, QL
TAMIFLU CAP 75MG	3	PA, QL
TAMIFLU SUS 6MG/ML	3	PA, QL
MISCELLANEOUS		
ALBENZA TAB 200MG	3	PA, QL
ALINIA SUS 100/5ML	3	
ALINIA TAB 500MG	3	
<i>atovaquone susp 750 mg/5ml</i>	2	
AZACTAM INJ 1GM	3	
AZACTAM INJ 2GM	3	
AZACTAM/DEX INJ 1GM	3	
AZACTAM/DEX INJ 2GM	3	
<i>aztreonam for inj 1 gm</i>	1	
<i>aztreonam for inj 2 gm</i>	1	
BACTRIM DS TAB 800-160	2	
BACTRIM TAB 400-80MG	2	
BENZNIDAZOLE TAB 12.5MG	3	
BENZNIDAZOLE TAB 100MG	3	
BILTRICIDE TAB 600MG	3	PA, QL
CAYSTON INH 75MG	6	PA, QL, SP
<i>chloramphenicol sodium succinate for iv inj 1 gm</i>		
CLEOCIN CAP 75MG	2	
CLEOCIN CAP 150MG	2	
CLEOCIN CAP 300MG	2	
CLEOCIN PED SOL 75MG/5ML	2	
CLEOCIN PHOS INJ 9GM/60ML	3	
CLEOCIN PHOS INJ 300/2ML	3	
CLEOCIN PHOS INJ 600/4ML	3	
CLEOCIN PHOS INJ 900/6ML	3	
CLEOCIN/D5W INJ 300MG	3	
CLEOCIN/D5W INJ 600MG	3	
CLEOCIN/D5W INJ 900MG	3	
CLIN SINGLE KIT USE	NC	
<i>clindamycin hcl cap 75 mg</i>	1	
<i>clindamycin hcl cap 150 mg</i>	1	
<i>clindamycin hcl cap 300 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	2	
<i>clindamycin phosphate in d5w iv soln 300 mg/50ml</i>	1	
<i>clindamycin phosphate in d5w iv soln 600 mg/50ml</i>	1	
<i>clindamycin phosphate in d5w iv soln 900 mg/50ml</i>	1	
<i>clindamycin phosphate inj 9 gm/60ml</i>	1	
<i>clindamycin phosphate inj 300 mg/2ml</i>	1	
<i>clindamycin phosphate inj 600 mg/4ml</i>	1	
<i>clindamycin phosphate inj 900 mg/6ml</i>	1	
<i>clindamycin phosphate iv soln 300 mg/2ml</i>	1	
<i>clindamycin phosphate iv soln 600 mg/4ml</i>	1	
<i>clindamycin phosphate iv soln 900 mg/6ml</i>	1	
<i>colistimethate sod for inj 150 mg (colistin base activity)</i>	1	
COLY-MYCIN M INJ 150MG	3	
CUBICIN RF SOL 500MG	3	
CUBICIN SOL 500MG	3	
DALVANCE SOL 500MG	3	
<i>daptomycin for iv soln 500 mg</i>	2	
DAPTOMYCIN SOL 350MG	3	
EMVERM CHW 100MG	2	PA, QL
FIRST-METRON SUS 100MG/ML	NC	
FIRVANQ SOL 25MG/ML	NC	
FIRVANQ SOL 50MG/ML	NC	
FLAGYL CAP 375MG	3	
FLAGYL TAB 250MG	3	
FLAGYL TAB 500MG	3	
FURADANTIN SUS 25MG/5ML	3	
HIPREX TAB 1GM	3	
IMPAVIDO CAP 50MG	3	
<i>ivermectin tab 3 mg</i>	1	
LINCOCIN INJ 300MG/ML	3	
<i>lincomycin hcl inj 300 mg/ml</i>	1	
<i>linezolid for susp 100 mg/5ml</i>	2	
<i>linezolid in sodium chloride iv soln 600 mg/300ml-0.9%</i>	1	
<i>linezolid iv soln 600 mg/300ml (2 mg/ml)</i>	1	
<i>linezolid tab 600 mg</i>	2	
MACROBID CAP 100MG	2	
MACRODANTIN CAP 25MG	NC	
MACRODANTIN CAP 50MG	NC	
MACRODANTIN CAP 100MG	NC	
MEPRON SUS	3	
<i>methenamine hippurate tab 1 gm</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>methenamine mandelate tab 0.5 gm</i>	1	
<i>methenamine mandelate tab 1 gm</i>	1	
METRONIDAZOL INJ 5MG/ML	3	
<i>metronidazole cap 375 mg</i>	2	
<i>metronidazole in nacl 0.79% iv soln 500 mg/100ml</i>	1	
<i>metronidazole tab 250 mg</i>	1	
<i>metronidazole tab 500 mg</i>	1	
MONUROL PAK GRANULES	3	
MYCOBUTIN CAP 150MG	3	
NEBUPENT INH 300MG	3	
<i>nitrofurantoin macrocrystalline cap 25 mg</i>	2	
<i>nitrofurantoin macrocrystalline cap 50 mg</i>	1	
<i>nitrofurantoin macrocrystalline cap 100 mg</i>	1	
<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg</i>	1	
<i>nitrofurantoin susp 25 mg/5ml</i>	2	
ORBACTIV SOL 400MG	3	
PENTAM 300 INJ 300MG	3	
<i>polymyxin b sulfate for inj 500000 unit</i>	1	
<i>praziquantel tab 600 mg</i>	1	
PRIMSOL SOL 50MG/5ML	3	
<i>rifabutin cap 150 mg</i>	2	
SIVEXTRO INJ 200MG	3	
SIVEXTRO TAB 200MG	3	
STROMECTOL TAB 3MG	3	
SULFADIAZINE TAB 500MG	3	
<i>sulfamethoxazole-trimethoprim iv soln 400-80 mg/5ml</i>	1	
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	1	
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	1	
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>	1	
<i>sulfatrim pd sus 200-40/5</i>	1	
SYNERCID INJ 500MG	3	
<i>tigecycline for iv soln 50 mg</i>	1	
TIGECYCLINE INJ 50MG	3	
TINDAMAX TAB 500MG	2	
<i>tinidazole tab 250 mg</i>	2	
<i>tinidazole tab 500 mg</i>	1	
<i>trimethoprim tab 100 mg</i>	1	
TYGACIL INJ 50MG	3	
VANCOGIN HCL CAP 125MG	2	
VANCOGIN HCL CAP 250MG	2	
VANCOMY/NACL INJ 1.5/300	3	

Drug Name	Drug Tier	Requirements/Limits
VANCOMY/NAACL INJ 1.25/250	3	
VANCOMY/NAACL INJ 1.75/500	1	
VANCOMY/NAACL INJ 2.5/500	1	
VANCOMY/NAACL INJ 2/500ML	1	
VANCOMY/NAACL INJ 750/150	NC	
VANCOMY/NAACL INJ 750/250	3	
VANCOMYC/D5W INJ 1.25/250	1	
VANCOMYC/DEX INJ 1GM	3	
VANCOMYC/DEX INJ 500MG	3	
<i>vancomycin hcl cap 125 mg</i>	2	
<i>vancomycin hcl cap 250 mg</i>	2	
<i>vancomycin hcl for inj 10 gm</i>	1	
<i>vancomycin hcl for inj 500 mg</i>	2	
<i>vancomycin hcl for inj 750 mg</i>	1	
<i>vancomycin hcl for inj 1000 mg</i>	2	
<i>vancomycin hcl for inj 5000 mg</i>	2	
VANCOMYCIN INJ 1 GM	NC	
VANCOMYCIN INJ 500MG	NC	
VANCOMYCIN INJ 750MG	NC	
VIBATIV INJ 750MG	3	
XIFAXAN TAB 200MG	3	
XIFAXAN TAB 550MG	2	
ZYVOX SOL 2MG/ML	3	
ZYVOX SUS 100MG/5M	3	
ZYVOX TAB 600MG	3	

ANTINEOPLASTIC AGENTS

ALKYLATING AGENTS

ALKERAN INJ 50MG	3	
ALKERAN TAB 2MG	2	
BENDEKA INJ 100/4ML	6	PA, SP
BICNU INJ 100MG	3	
BUSULFEX INJ 6MG/ML	3	
<i>carboplatin iv soln 50 mg/5ml</i>	1	
<i>carboplatin iv soln 150 mg/15ml</i>	1	
<i>carboplatin iv soln 450 mg/45ml</i>	1	
<i>carboplatin iv soln 600 mg/60ml</i>	1	
<i>cisplatin inj 50 mg/50ml (1 mg/ml)</i>	1	
<i>cisplatin inj 100 mg/100ml (1 mg/ml)</i>	1	
<i>cisplatin inj 200 mg/200ml (1 mg/ml)</i>	1	
CYCLOPHOSPH CAP 25MG	2	
CYCLOPHOSPH CAP 50MG	2	
<i>cyclophosphamide cap 50 mg</i>	1	
<i>cyclophosphamide for inj 1 gm</i>	1	
<i>cyclophosphamide for inj 2 gm</i>	1	
<i>cyclophosphamide for inj 500 mg</i>	1	
<i>dacarbazine for inj 100 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>dacarbazine for inj 200 mg</i>	1	
EMCYT CAP 140MG	2	
EVOMELA INJ 50MG	NC	
GLEOSTINE CAP 5MG	2	
GLEOSTINE CAP 10MG	2	
GLEOSTINE CAP 40MG	2	
GLEOSTINE CAP 100MG	2	
GLIADEL WAF 7.7MG	3	
HEXALEN CAP 50MG	2	
IFEX INJ 1GM	3	
IFEX INJ 3GM	3	
<i>ifosfamide for inj 1 gm</i>	1	
IFOSFAMIDE INJ 3GM	3	
<i>ifosfamide iv inj 1 gm/20ml (50 mg/ml)</i>	1	
<i>ifosfamide iv inj 3 gm/60ml (50 mg/ml)</i>	1	
LEUKERAN TAB 2MG	2	
<i>melphalan hcl for inj 50 mg (base equiv)</i>	1	
MUSTARGEN INJ 10MG	3	
MYLERAN TAB 2MG	2	
<i>oxaliplatin for iv inj 50 mg</i>	1	
<i>oxaliplatin for iv inj 100 mg</i>	1	
<i>oxaliplatin iv soln 50 mg/10ml</i>	1	
<i>oxaliplatin iv soln 100 mg/20ml</i>	1	
TEMODAR CAP 5MG	6	PA, SP, ST
TEMODAR CAP 20MG	6	PA, SP, ST
TEMODAR CAP 100MG	6	PA, SP, ST
TEMODAR CAP 140MG	6	PA, SP, ST
TEMODAR CAP 180MG	6	PA, SP, ST
TEMODAR CAP 250MG	6	PA, SP, ST
TEMODAR INJ 100MG	6	PA, SP, ST
<i>temozolomide cap 5 mg</i>	4	PA, SP
<i>temozolomide cap 20 mg</i>	4	PA, SP
<i>temozolomide cap 100 mg</i>	4	PA, SP
<i>temozolomide cap 140 mg</i>	4	PA, SP
<i>temozolomide cap 180 mg</i>	4	PA, SP
<i>temozolomide cap 250 mg</i>	4	PA, SP
TEPADINA INJ 15MG	6	PA, SP
TEPADINA INJ 100MG	6	PA, SP
THIOTEPA INJ 15MG	3	
TREANDA INJ 25MG	6	PA, SP
TREANDA INJ 100MG	6	PA, SP
VALCHLOR GEL 0.016%	6	PA, SP
YONDELIS INJ 1MG	6	SP
ZANOSAR INJ 1GM	3	
ANTIBIOTICS		
<i>adriamycin inj 10mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>adriamycin inj 20mg</i>	1	
<i>adriamycin inj 50mg</i>	1	
<i>adriamycin inj 200mg</i>	1	
<i>bleomycin sulfate for inj 15 unit</i>	1	
<i>bleomycin sulfate for inj 30 unit</i>	1	
COSMEGEN INJ 0.5MG	3	
<i>daunorubicin hcl inj 5 mg/ml (base equiv)</i>	1	
DAUNORUBICIN INJ 20MG/4ML	3	
DAUNORUBICIN INJ 50MG	3	
DOXIL INJ 2MG/ML	3	
<i>doxorubicin hcl for inj 10 mg</i>	1	
<i>doxorubicin hcl for inj 50 mg</i>	1	
<i>doxorubicin hcl inj 2 mg/ml</i>	1	
<i>doxorubicin hcl liposomal inj (for iv infusion) 2 mg/ml</i>	1	
ELLECE INJ 2MG/ML	3	
<i>epirubicin hcl iv soln 50 mg/25ml (2 mg/ml)</i>	1	
<i>epirubicin hcl iv soln 200 mg/100ml (2 mg/ml)</i>	1	
IDAMYCIN PFS INJ 5MG/5ML	3	
IDAMYCIN PFS INJ 10/10ML	3	
IDAMYCIN PFS INJ 20/20ML	3	
<i>idarubicin hcl iv inj 5 mg/5ml (1 mg/ml)</i>	1	
<i>idarubicin hcl iv inj 10 mg/10ml (1 mg/ml)</i>	1	
<i>idarubicin hcl iv inj 20 mg/20ml (1 mg/ml)</i>	1	
<i>lipodox 50 inj 2mg/ml</i>	1	
<i>mitomycin for iv soln 5 mg</i>	1	
<i>mitomycin for iv soln 20 mg</i>	1	
<i>mitomycin for iv soln 40 mg</i>	1	
MITOMYCIN SOL 20MG	6	SP
<i>mitoxantrone hcl inj conc 20 mg/10ml (2 mg/ml)</i>	4	PA, SP
<i>mitoxantrone hcl inj conc 25 mg/12.5ml (2 mg/ml)</i>	4	PA, SP
<i>mitoxantrone hcl inj conc 30 mg/15ml (2 mg/ml)</i>	4	PA, SP
VALSTAR SOL 40MG/ML	6	SP
ANTIMETABOLITES		
<i>adrucil inj 2.5g/50m</i>	1	
<i>adrucil inj 5gm/100m</i>	1	
<i>adrucil inj 500/10ml</i>	1	
ALIMTA INJ 100MG	3	
ALIMTA INJ 500MG	3	
ARRANON INJ 5MG/ML	3	
<i>azacitidine for inj 100 mg</i>	4	PA, SP
<i>capecitabine tab 150 mg</i>	4	PA, QL, SP

Drug Name	Drug Tier	Requirements/Limits
<i>capecitabine tab 500 mg</i>	4	PA, QL, SP
<i>cladribine iv soln 10 mg/10ml (1 mg/ml)</i>	1	
CLOLAR INJ 1MG/ML	3	
<i>cytarabine inj 20 mg/ml</i>	1	
<i>cytarabine inj pf 20 mg/ml</i>	1	
<i>cytarabine inj pf 100 mg/ml</i>	1	
DACOGEN INJ 50MG	6	PA, SP
<i>decitabine for inj 50 mg</i>	4	PA, SP
<i>floxuridine for inj 0.5 gm</i>	1	
<i>fludarabine phosphate for inj 50 mg</i>	1	
<i>fludarabine phosphate inj 25 mg/ml</i>	1	
<i>fluorouracil iv soln 1 gm/20ml (50 mg/ml)</i>	1	
<i>fluorouracil iv soln 2.5 gm/50ml (50 mg/ml)</i>	1	
<i>fluorouracil iv soln 5 gm/100ml (50 mg/ml)</i>	1	
<i>fluorouracil iv soln 500 mg/10ml (50 mg/ml)</i>	1	
FOLOTYN INJ 20MG/ML	6	PA, SP
FOLOTYN INJ 40MG/2ML	6	PA, SP
<i>gemcitabine hcl for inj 1 gm</i>	1	
<i>gemcitabine hcl for inj 2 gm</i>	1	
<i>gemcitabine hcl for inj 200 mg</i>	1	
GEMCITABINE INJ 1.5GM/15	3	
GEMCITABINE INJ 1GM/10ML	3	
GEMCITABINE INJ 2GM/20ML	3	
GEMCITABINE INJ 200MG	3	
GEMZAR INJ 1GM	3	
GEMZAR INJ 200MG	3	
<i>mercaptopurine tab 50 mg</i>	1	
<i>methotrexate sodium for inj 1 gm</i>	1	
<i>methotrexate sodium inj 50 mg/2ml (25 mg/ml)</i>	1	
<i>methotrexate sodium inj 250 mg/10ml (25 mg/ml)</i>	1	
<i>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)</i>	1	
<i>methotrexate sodium inj pf 250 mg/10ml (25 mg/ml)</i>	1	
<i>methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)</i>	1	
<i>methotrexate sodium tab 2.5 mg (base equiv)</i>	1	
PURIXAN SUS 20MG/ML	6	SP
TABLOID TAB 40MG	2	
TREXALL TAB 5MG	2	
TREXALL TAB 7.5MG	2	
TREXALL TAB 10MG	2	

Drug Name	Drug Tier	Requirements/Limits
TREXALL TAB 15MG	2	
VIDAZA INJ 100MG	6	PA, SP
XATMEP SOL 2.5MG/ML	3	
XELODA TAB 150MG	6	PA, QL, SP, ST
XELODA TAB 500MG	6	PA, QL, SP, ST

HORMONAL ANTINEOPLASTICS, ANDROGEN BIOSYNTHESIS INHIBITORS

YONSA TAB 125MG	NC	
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HORMONAL ANTINEOPLASTICS, ANTIANDROGENS

<i>bicalutamide tab 50 mg</i>	1	
CASODEX TAB 50MG	3	
ERLEADA TAB 60MG	NC	
<i>flutamide cap 125 mg</i>	1	
NILANDRON TAB 150MG	NC	
<i>nilutamide tab 150 mg</i>	1	
XTANDI CAP 40MG	5	PA, QL, SP
ZYTIGA TAB 250MG	5	PA, QL, SP
ZYTIGA TAB 500MG	5	PA, QL, SP

HORMONAL ANTINEOPLASTICS, ANTIESTROGENS

FARESTON TAB 60MG	3	
FASLODEX INJ 250/5ML	3	
SOLTAMOX SOL 10MG/5ML	3	PV
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	1	ACA, PV
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	1	ACA, PV

HORMONAL ANTINEOPLASTICS, AROMATASE INHIBITORS

<i>anastrozole tab 1 mg</i>	1	PV
ARIMIDEX TAB 1MG	2	PV
AROMASIN TAB 25MG	2	PV
<i>exemestane tab 25 mg</i>	2	PV
FEMARA TAB 2.5MG	2	PV
<i>letrozole tab 2.5 mg</i>	1	PV

HORMONAL ANTINEOPLASTICS, GONADOTROPIN RELEASING HORMONE ANTAGONISTS

FIRMAGON INJ 80MG	6	PA, SP
FIRMAGON INJ 120MG	6	PA, SP

HORMONAL ANTINEOPLASTICS, LUTEINIZING HORMONE-RELEASING HORMONE (LHRH) AGONISTS

ELIGARD INJ 7.5MG	5	PA, SP
ELIGARD INJ 22.5MG	5	PA, SP
ELIGARD INJ 30MG	5	PA, SP
ELIGARD INJ 45MG	5	PA, SP
<i>leuprolide acetate inj kit 5 mg/ml</i>	4	PA, SP
LUPRON DEPOT INJ 3.75MG	5	PA, SP
LUPRON DEPOT INJ 7.5MG	5	PA, SP

Drug Name	Drug Tier	Requirements/Limits
LUPRON DEPOT INJ 11.25MG	5	PA, SP
LUPRON DEPOT INJ 22.5MG	5	PA, SP
LUPRON DEPOT INJ 30MG	5	PA, SP
LUPRON DEPOT INJ 45MG	5	PA, SP
TRELSTAR MIX INJ 3.75MG	6	PA, SP
TRELSTAR MIX INJ 11.25MG	6	PA, SP
TRELSTAR MIX INJ 22.5MG	6	PA, SP
VANTAS KIT 50MG	6	PA, SP
ZOLADEX IMP 3.6MG	5	PA, SP
ZOLADEX IMP 10.8MG	5	PA, SP

HORMONAL ANTINEOPLASTICS, PROGESTINS

DEPO-PROVERA INJ 400/ML	3	
<i>hydroxyprogesterone caproate im in oil 1.25 gm/5ml</i>	1	
<i>megestrol acetate tab 20 mg</i>	1	
<i>megestrol acetate tab 40 mg</i>	1	

IMMUNOMODULATORS

POMALYST CAP 1MG	6	PA, QL, SP
POMALYST CAP 2MG	6	PA, QL, SP
POMALYST CAP 3MG	6	PA, QL, SP
POMALYST CAP 4MG	6	PA, QL, SP
REVLIMID CAP 2.5MG	5	PA, QL, SP
REVLIMID CAP 5MG	5	PA, QL, SP
REVLIMID CAP 10MG	5	PA, QL, SP
REVLIMID CAP 15MG	5	PA, QL, SP
REVLIMID CAP 20MG	5	PA, QL, SP
REVLIMID CAP 25MG	5	PA, QL, SP
THALOMID CAP 50MG	5	PA, QL, SP
THALOMID CAP 100MG	5	PA, QL, SP
THALOMID CAP 150MG	5	PA, QL, SP
THALOMID CAP 200MG	5	PA, QL, SP

KINASE INHIBITORS

AFINITOR DIS TAB 2MG	5	PA, QL, SP
AFINITOR DIS TAB 3MG	5	PA, QL, SP
AFINITOR DIS TAB 5MG	5	PA, QL, SP
AFINITOR TAB 2.5MG	5	PA, QL, SP
AFINITOR TAB 5MG	5	PA, QL, SP
AFINITOR TAB 7.5MG	5	PA, QL, SP
AFINITOR TAB 10MG	5	PA, QL, SP
ALECENSA CAP 150MG	6	PA, QL, SP
ALIQOPA INJ 60MG	NC	
ALUNBRIG TAB 30MG	NC	
BOSULIF TAB 100MG	5	PA, QL, SP
BOSULIF TAB 500MG	5	PA, QL, SP
BRAFTOVI CAP 50MG	NC	
BRAFTOVI CAP 75MG	NC	

Drug Name	Drug Tier	Requirements/Limits
CABOMETYX TAB 20MG	5	PA, QL, SP
CABOMETYX TAB 40MG	5	PA, QL, SP
CABOMETYX TAB 60MG	5	PA, QL, SP
CALQUENCE CAP 100MG	6	PA, QL, SP
CAPRELSA TAB 100MG	6	PA, QL, SP
CAPRELSA TAB 300MG	6	PA, QL, SP
COMETRIQ KIT 60MG	6	PA, QL, SP
COMETRIQ KIT 100MG	6	PA, QL, SP
COMETRIQ KIT 140MG	6	PA, QL, SP
COTELLIC TAB 20MG	6	PA, QL, SP
GILOTRIF TAB 20MG	6	PA, QL, SP
GILOTRIF TAB 30MG	6	PA, QL, SP
GILOTRIF TAB 40MG	6	PA, QL, SP
GLEEVEC TAB 100MG	NC	
GLEEVEC TAB 400MG	NC	
IBRANCE CAP 75MG	5	PA, QL, SP
IBRANCE CAP 100MG	5	PA, QL, SP
IBRANCE CAP 125MG	5	PA, QL, SP
ICLUSIG TAB 15MG	6	PA, QL, SP
ICLUSIG TAB 45MG	6	PA, QL, SP
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	4	PA, SP
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	4	PA, SP
IMBRUVICA CAP 70MG	6	PA, QL, SP
IMBRUVICA CAP 140MG	6	PA, QL, SP
IMBRUVICA TAB 140MG	6	PA, QL, SP
IMBRUVICA TAB 280MG	6	PA, QL, SP
IMBRUVICA TAB 420MG	6	PA, QL, SP
IMBRUVICA TAB 560MG	6	PA, QL, SP
INLYTA TAB 1MG	6	PA, QL, SP
INLYTA TAB 5MG	6	PA, QL, SP
IRESSA TAB 250MG	5	PA, SP
JAKAFI TAB 5MG	6	PA, QL, SP
JAKAFI TAB 10MG	6	PA, QL, SP
JAKAFI TAB 15MG	6	PA, QL, SP
JAKAFI TAB 20MG	6	PA, QL, SP
JAKAFI TAB 25MG	6	PA, QL, SP
KISQALI 200 PAK FEMARA	5	PA, QL, SP
KISQALI 400 PAK FEMARA	5	PA, QL, SP
KISQALI 600 PAK FEMARA	5	PA, QL, SP
KISQALI TAB 200DOSE	5	PA, QL, SP
KISQALI TAB 400DOSE	5	PA, QL, SP
KISQALI TAB 600DOSE	5	PA, QL, SP
LENVIMA CAP 8 MG	6	PA, QL, SP
LENVIMA CAP 10 MG	6	PA, QL, SP
LENVIMA CAP 14 MG	6	PA, QL, SP

Drug Name	Drug Tier	Requirements/Limits
LENVIMA CAP 18 MG	6	PA, QL, SP
LENVIMA CAP 20 MG	6	PA, QL, SP
LENVIMA CAP 24 MG	6	PA, QL, SP
MEKINIST TAB 0.5MG	6	PA, QL, SP
MEKINIST TAB 2MG	6	PA, QL, SP
MEKTOVI TAB 15MG	NC	
NEXAVAR TAB 200MG	5	PA, QL, SP
RYDAPT CAP 25MG	5	PA, QL, SP
SPRYCEL TAB 20MG	5	PA, QL, SP
SPRYCEL TAB 50MG	5	PA, QL, SP
SPRYCEL TAB 70MG	5	PA, QL, SP
SPRYCEL TAB 80MG	5	PA, QL, SP
SPRYCEL TAB 100MG	5	PA, QL, SP
SPRYCEL TAB 140MG	5	PA, QL, SP
STIVARGA TAB 40MG	6	PA, QL, SP
SUTENT CAP 12.5MG	5	PA, QL, SP
SUTENT CAP 25MG	5	PA, QL, SP
SUTENT CAP 37.5MG	5	PA, QL, SP
SUTENT CAP 50MG	5	PA, QL, SP
TAFINLAR CAP 50MG	5	PA, QL, SP
TAFINLAR CAP 75MG	5	PA, QL, SP
TAGRISSE TAB 40MG	6	PA, QL, SP
TAGRISSE TAB 80MG	6	PA, QL, SP
TARCEVA TAB 25MG	5	PA, QL, SP
TARCEVA TAB 100MG	5	PA, QL, SP
TARCEVA TAB 150MG	5	PA, QL, SP
TASIGNA CAP 50MG	NC	
TASIGNA CAP 150MG	NC	
TASIGNA CAP 200MG	NC	
<i>temsirolimus soln for iv infusion 25 mg/ml</i>	4	PA, QL
TORISEL SOL 25MG/ML	6	PA, SP
TYKERB TAB 250MG	5	PA, QL, SP
VERZENIO TAB 50MG	6	PA, QL, SP
VERZENIO TAB 100MG	6	PA, QL, SP
VERZENIO TAB 150MG	6	PA, QL, SP
VERZENIO TAB 200MG	6	PA, QL, SP
VOTRIENT TAB 200MG	5	PA, QL, SP
XALKORI CAP 200MG	6	PA, QL, SP
XALKORI CAP 250MG	6	PA, QL, SP
ZELBORAF TAB 240MG	6	PA, QL, SP
ZYDELIG TAB 100MG	6	PA, QL, SP
ZYDELIG TAB 150MG	6	PA, QL, SP
ZYKADIA CAP 150MG	6	PA, QL, SP
MISCELLANEOUS		
ADCETRIS INJ 50MG	6	PA, SP
ARZERRA CON 100/5ML	6	PA, SP

Drug Name	Drug Tier	Requirements/Limits
AVASTIN INJ	6	PA, SP
AVASTIN INJ 400/16ML	6	PA, SP
BAVENCIO INJ 20MG/ML	6	PA, SP
BELEODAQ INJ 500MG	6	PA, SP
BESPOUSA INJ 0.9MG	6	PA, SP
<i>bexarotene cap 75 mg</i>	4	PA, SP
BLINCYTO INJ 35MCG	6	PA, SP
CAMPATH INJ 30MG/ML	3	
CYRAMZA INJ 100/10ML	6	PA, SP
CYRAMZA INJ 500/50ML	6	PA, SP
DARZALEX SOL 100MG/5M	6	PA, SP
DARZALEX SOL 400MG/20	6	PA, SP
<i>dexrazoxane for inj 250 mg</i>	1	
<i>dexrazoxane for inj 500 mg</i>	1	
DROXIA CAP 200MG	3	
DROXIA CAP 300MG	3	
DROXIA CAP 400MG	3	
ELITEK INJ 1.5MG	3	
ELITEK INJ 7.5MG	3	
EMPLICITI INJ 300MG	6	PA, SP
EMPLICITI INJ 400MG	6	PA, SP
ERBITUX INJ 100MG	6	PA, SP
ERBITUX INJ 200MG	6	PA, SP
ERIVEDGE CAP 150MG	6	PA, QL, SP
ERWINAZE INJ 10000UNT	6	PA, SP
ETHYOL INJ 500MG	3	
FARYDAK CAP 10MG	NC	
FARYDAK CAP 15MG	NC	
FARYDAK CAP 20MG	NC	
FUSILEV INJ 50MG	6	PA, SP
GAZYVA INJ 25MG/ML	6	PA, SP
HERCEPTIN INJ 150MG	6	PA, SP
HERCEPTIN INJ 440MG	6	PA, SP
HYDREA CAP 500MG	2	
<i>hydroxyurea cap 500 mg</i>	1	
IDHIFA TAB 50MG	6	PA
IDHIFA TAB 100MG	6	PA
IMFINZI INJ 120/2.4	6	PA, SP
IMFINZI INJ 500/10	6	PA, SP
IMLYGIC INJ	6	PA, SP
ISTODAX OVR INJ 10MG	6	PA, SP
KADCYLA INJ 100MG	6	PA, SP
KADCYLA INJ 160MG	6	PA, SP
KEYTRUDA INJ 100MG/4M	6	PA, SP
KYMRIAH SUS	NC	
KYPROLIS SOL 30MG	6	PA, SP
KYPROLIS SOL 60MG	6	PA, SP

Drug Name	Drug Tier	Requirements/Limits
LARTRUVO INJ 10MG/ML	6	PA, SP
LARTRUVO INJ 190/19ML	6	PA, SP
<i>leucovorin calcium for inj 50 mg</i>	1	
<i>leucovorin calcium for inj 100 mg</i>	1	
<i>leucovorin calcium for inj 200 mg</i>	1	
<i>leucovorin calcium for inj 350 mg</i>	1	
<i>leucovorin calcium for inj 500 mg</i>	1	
<i>leucovorin calcium tab 5 mg</i>	1	
<i>leucovorin calcium tab 10 mg</i>	1	
<i>leucovorin calcium tab 15 mg</i>	2	
<i>leucovorin calcium tab 25 mg</i>	2	
LEVOLEUCOVOR INJ 175MG	NC	
<i>levoleucovorin calcium for iv inj 50 mg (base equiv)</i>	4	PA, SP
<i>levoleucovorin calcium inj 175 mg/17.5ml (base equiv)</i>	4	PA, SP
LONSURF TAB 15-6.14	6	PA, SP
LONSURF TAB 20-8.19	6	PA, SP
LUTATHERA SOL 370MBQ	NC	
LYNPARZA CAP 50MG	6	PA, QL, SP
LYNPARZA TAB 100MG	6	PA, QL, SP
LYNPARZA TAB 150MG	6	PA, QL, SP
LYSODREN TAB 500MG	2	
MATULANE CAP 50MG	2	
<i>mesna inj 100 mg/ml</i>	1	
MESNEX INJ 1GM	3	
MESNEX TAB 400MG	3	
METASTRON INJ	3	
MYLOTARG INJ 4.5MG	6	
NINLARO CAP 2.3MG	6	PA, SP
NINLARO CAP 3MG	6	PA, SP
NINLARO CAP 4MG	6	PA, SP
NIPENT INJ 10MG	3	
ODOMZO CAP 200MG	5	PA, QL, SP
ONCASPAR INJ 750/ML	6	PA, SP
OPDIVO INJ 40MG/4ML	6	PA, SP
OPDIVO INJ 100MG/10	6	PA, SP
OPDIVO INJ 240/24	6	PA, SP
PERJETA INJ 420/14ML	6	PA, SP
PHOTOFRIN INJ 75MG	3	
PORTRAZZA INJ 800/50ML	6	PA, SP
PROLEUKIN INJ 22MU	6	PA, SP
PROVENGE INJ	3	
QUADRAMET INJ	3	
RITUXAN INJ 100MG	6	PA, SP
RITUXAN INJ 500MG	6	PA, SP
RITUXAN INJ HYCELA	6	PA, SP

Drug Name	Drug Tier	Requirements/Limits
ROMIDEPSIN INJ 10MG	6	PA, SP
RUBRACA TAB 200MG	5	PA, QL, SP
RUBRACA TAB 250MG	5	PA, QL, SP
RUBRACA TAB 300MG	5	PA, QL, SP
SIKLOS TAB 100MG	NC	
SYLVANT SOL 100MG	6	PA, SP
SYLVANT SOL 400MG	6	PA, SP
SYNRIBO INJ 3.5MG	6	PA, SP
TARGRETIN CAP 75MG	6	PA, SP
TARGRETIN GEL 1%	6	PA, SP
TECENTRIQ INJ 1200/20	6	PA, SP
THERACYS INJ	3	
TIBSOVO TAB 250MG	NC	
TICE BCG INJ	3	
<i>tretinoin cap 10 mg</i>	2	
TRISENOX INJ 12MG/6ML	6	
UNITUXIN INJ	6	SP
VECTIBIX INJ 100MG	6	PA, SP
VECTIBIX INJ 400MG	6	PA, SP
VELCADE INJ 3.5MG	6	PA, SP
VENCLEXTA TAB 10MG	6	PA, SP
VENCLEXTA TAB 50MG	6	PA, SP
VENCLEXTA TAB 100MG	6	PA, SP
VENCLEXTA TAB START PK	6	PA, SP
VISTOGARD PAK 10GM	5	SP
VORAXAZE INJ 1000UNIT	6	SP
VYXEOS INJ 44-100MG	NC	
XOFIGO INJ 1100KBQ	NC	
YERVOY INJ 50MG	6	PA, SP
YERVOY INJ 200MG	6	PA, SP
YESCARTA INJ	NC	
ZALTRAP INJ 100/4ML	6	PA, SP
ZALTRAP INJ 200/8ML	6	PA, SP
ZEJULA CAP 100MG	6	PA, QL, SP
ZEVALIN KIT Y-90	3	
ZINECARD INJ 250MG	3	
ZINECARD INJ 500MG	3	
ZOLINZA CAP 100MG	5	PA, QL, SP
MITOTIC INHIBITORS		
ABRAXANE INJ 100MG	3	
<i>docetaxel for inj conc 20 mg/ml</i>	1	
<i>docetaxel for inj conc 80 mg/4ml (20 mg/ml)</i>	1	
DOCETAXEL INJ 20/0.5ML	3	
DOCETAXEL INJ 20MG/2ML	3	
DOCETAXEL INJ 20MG/ML	3	
DOCETAXEL INJ 80MG/2ML	3	

Drug Name	Drug Tier	Requirements/Limits
DOCETAXEL INJ 80MG/4ML	3	
DOCETAXEL INJ 80MG/8ML	3	
DOCETAXEL INJ 160/8ML	3	
DOCETAXEL INJ 160/16ML	3	
DOCETAXEL INJ NON-ALCO	3	
ETOPOPHOS INJ 100MG	3	
<i>etoposide cap 50 mg</i>	2	
<i>etoposide inj 1 gm/50ml (20 mg/ml)</i>	1	
<i>etoposide inj 100 mg/5ml (20 mg/ml)</i>	1	
<i>etoposide inj 500 mg/25ml (20 mg/ml)</i>	1	
HALAVEN INJ 1MG/2ML	6	PA, SP
IXEMPRA KIT INJ 15MG	6	PA, SP
IXEMPRA KIT INJ 45MG	6	PA, SP
JEVTANA INJ 60/1.5ML	6	PA, SP
MARQIBO INJ 5MG/31ML	6	SP
NAVELBINE INJ 10MG/ML	3	
NAVELBINE INJ 50MG/5ML	3	
<i>paclitaxel iv conc 30 mg/5ml (6 mg/ml)</i>	1	
<i>paclitaxel iv conc 100 mg/16.7ml (6 mg/ml)</i>	1	
<i>paclitaxel iv conc 150 mg/25ml (6 mg/ml)</i>	1	
<i>paclitaxel iv conc 300 mg/50ml (6 mg/ml)</i>	1	
TAXOTERE INJ 20MG/ML	3	
TAXOTERE INJ 80MG/4ML	3	
TENIPOSIDE INJ 50MG/5ML	3	
<i>toposar inj 1gm/50ml</i>	1	
<i>toposar inj 20mg/ml</i>	1	
<i>toposar inj 100/5ml</i>	1	
<i>toposar inj 500/25ml</i>	1	
<i>vinblastine sulfate inj 1 mg/ml</i>	1	
<i>vincasar pfs inj 1mg/ml</i>	1	
<i>vincristine sulfate iv soln 1 mg/ml</i>	1	
<i>vinorelbine tartrate inj 10 mg/ml (base equiv)</i>	1	
<i>vinorelbine tartrate inj 50 mg/5ml (10 mg/ml) (base equiv)</i>	1	
TOPOISOMERASE INHIBITORS		
CAMPTOSAR INJ 40MG/2ML	3	
CAMPTOSAR INJ 100/5ML	3	
CAMPTOSAR INJ 300/15ML	3	
HYCAMTIN CAP 0.25MG	6	PA, SP
HYCAMTIN CAP 1MG	6	PA, SP
HYCAMTIN INJ 4MG	3	
<i>irinotecan hcl inj 40 mg/2ml (20 mg/ml)</i>	1	
<i>irinotecan hcl inj 100 mg/5ml (20 mg/ml)</i>	1	
<i>irinotecan hcl inj 500 mg/25ml (20 mg/ml)</i>	1	
ONIVYDE INJ 4.3MG/ML	6	SP

Drug Name	Drug Tier	Requirements/Limits
<i>topotecan hcl for inj 4 mg</i>	1	
TOPOTECAN INJ 4MG/4ML	3	

CARDIOVASCULAR

ACE INHIBITOR/CALCIUM CHANNEL BLOCKER COMBINATIONS

<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>	1	PV
<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	1	PV
<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	1	PV
<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	1	PV
<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>	1	PV
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	1	PV
LOTREL CAP 5-10MG	2	PV
LOTREL CAP 5-20MG	2	PV
LOTREL CAP 10-20MG	2	PV
LOTREL CAP 10-40MG	2	PV
PRESTALIA TAB 3.5-2.5	NC	
PRESTALIA TAB 7-5MG	NC	
PRESTALIA TAB 14-10MG	NC	
TARKA TAB 2-180 CR	2	PV
TARKA TAB 2-240 CR	2	PV
TARKA TAB 4-240 CR	2	PV
<i>trandolapril-verapamil hcl tab er 1-240 mg</i>	1	PV
<i>trandolapril-verapamil hcl tab er 2-180 mg</i>	1	PV
<i>trandolapril-verapamil hcl tab er 2-240 mg</i>	1	PV
<i>trandolapril-verapamil hcl tab er 4-240 mg</i>	1	PV

ACE INHIBITOR/DIURETIC COMBINATIONS

ACCURETIC TAB 10-12.5	3	PV
ACCURETIC TAB 20-12.5	3	PV
ACCURETIC TAB 20-25MG	3	PV
<i>benazepril & hydrochlorothiazide tab 5-6.25 mg</i>	1	PV
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	1	PV
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	1	PV
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	1	PV
<i>captopril & hydrochlorothiazide tab 25-15 mg</i>	1	PV
<i>captopril & hydrochlorothiazide tab 25-25 mg</i>	1	PV
<i>captopril & hydrochlorothiazide tab 50-15 mg</i>	2	PV

Drug Name	Drug Tier	Requirements/Limits
<i>captopril & hydrochlorothiazide tab 50-25 mg</i>	1	PV
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	1	PV
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	1	PV
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	1	PV
<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	1	PV
<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg</i>	1	PV
<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i>	1	PV
<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i>	1	PV
LOTENSIN HCT TAB 10-12.5	3	
LOTENSIN HCT TAB 20-12.5	3	
LOTENSIN HCT TAB 20-25MG	3	
<i>moexipril-hydrochlorothiazide tab 7.5-12.5 mg</i>	1	PV
<i>moexipril-hydrochlorothiazide tab 15-12.5 mg</i>	1	PV
<i>moexipril-hydrochlorothiazide tab 15-25 mg</i>	1	PV
<i>quinapril-hydrochlorothiazide tab 10-12.5 mg</i>	1	PV
<i>quinapril-hydrochlorothiazide tab 20-12.5 mg</i>	1	PV
<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	1	PV
VASERETIC TAB 10-25MG	3	PV
ZESTORETIC TAB 10-12.5	3	PV
ZESTORETIC TAB 20-12.5	3	PV
ZESTORETIC TAB 20-25MG	3	PV
ACE INHIBITORS		
ACCUPRIL TAB 5MG	3	PV
ACCUPRIL TAB 10MG	3	PV
ACCUPRIL TAB 20MG	3	PV
ACCUPRIL TAB 40MG	3	PV
ALTACE CAP 1.25MG	3	PV
ALTACE CAP 2.5MG	3	PV
ALTACE CAP 5MG	3	PV
ALTACE CAP 10MG	3	PV
<i>benazepril hcl tab 5 mg</i>	1	PV
<i>benazepril hcl tab 10 mg</i>	1	PV
<i>benazepril hcl tab 20 mg</i>	1	PV
<i>benazepril hcl tab 40 mg</i>	1	PV
<i>captopril tab 12.5 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>captopril tab 25 mg</i>	1	PV
<i>captopril tab 50 mg</i>	1	PV
<i>captopril tab 100 mg</i>	1	PV
<i>enalapril maleate tab 2.5 mg</i>	1	PV
<i>enalapril maleate tab 5 mg</i>	1	PV
<i>enalapril maleate tab 10 mg</i>	1	PV
<i>enalapril maleate tab 20 mg</i>	1	PV
<i>enalaprilat iv inj 1.25 mg/ml</i>	1	
EPANED SOL 1MG/ML	3	PV
<i>fosinopril sodium tab 10 mg</i>	1	PV
<i>fosinopril sodium tab 20 mg</i>	1	PV
<i>fosinopril sodium tab 40 mg</i>	1	PV
<i>lisinopril tab 2.5 mg</i>	1	PV
<i>lisinopril tab 5 mg</i>	1	PV
<i>lisinopril tab 10 mg</i>	1	PV
<i>lisinopril tab 20 mg</i>	1	PV
<i>lisinopril tab 30 mg</i>	1	PV
<i>lisinopril tab 40 mg</i>	1	PV
LOTENSIN TAB 20MG	3	PV
LOTENSIN TAB 40MG	3	PV
<i>moexipril hcl tab 7.5 mg</i>	1	PV
<i>moexipril hcl tab 15 mg</i>	1	PV
<i>perindopril erbumine tab 2 mg</i>	1	PV
<i>perindopril erbumine tab 4 mg</i>	1	PV
<i>perindopril erbumine tab 8 mg</i>	1	PV
PRINIVIL TAB 5MG	3	PV
PRINIVIL TAB 10MG	3	PV
PRINIVIL TAB 20MG	3	PV
QBRELIS SOL 1MG/ML	3	
<i>quinapril hcl tab 5 mg</i>	1	PV
<i>quinapril hcl tab 10 mg</i>	1	PV
<i>quinapril hcl tab 20 mg</i>	1	PV
<i>quinapril hcl tab 40 mg</i>	1	PV
<i>ramipril cap 1.25 mg</i>	1	PV
<i>ramipril cap 2.5 mg</i>	1	PV
<i>ramipril cap 5 mg</i>	1	PV
<i>ramipril cap 10 mg</i>	1	PV
<i>trandolapril tab 1 mg</i>	1	PV
<i>trandolapril tab 2 mg</i>	1	PV
<i>trandolapril tab 4 mg</i>	1	PV
VASOTEC TAB 2.5MG	3	PV
VASOTEC TAB 5MG	3	PV
VASOTEC TAB 10MG	3	PV
VASOTEC TAB 20MG	3	PV
ZESTRIL TAB 2.5MG	3	PV
ZESTRIL TAB 5MG	3	PV
ZESTRIL TAB 10MG	3	PV

Drug Name	Drug Tier	Requirements/Limits
ZESTRIL TAB 20MG	3	PV
ZESTRIL TAB 30MG	3	PV
ZESTRIL TAB 40MG	3	PV
ADRENOLYTICS, CENTRAL		
CATAPRES TAB 0.1MG	2	PV
CATAPRES TAB 0.2MG	2	PV
CATAPRES TAB 0.3MG	2	PV
CATAPRES-TTS DIS 0.1/24HR	2	PV
CATAPRES-TTS DIS 0.2/24HR	2	PV
CATAPRES-TTS DIS 0.3/24HR	2	PV
<i>clonidine hcl tab 0.1 mg</i>	1	PV
<i>clonidine hcl tab 0.2 mg</i>	1	PV
<i>clonidine hcl tab 0.3 mg</i>	1	PV
<i>clonidine hcl td patch weekly 0.1 mg/24hr</i>	1	PV
<i>clonidine hcl td patch weekly 0.2 mg/24hr</i>	1	PV
<i>clonidine hcl td patch weekly 0.3 mg/24hr</i>	1	PV
<i>guanfacine hcl tab 1 mg</i>	1	PV
<i>guanfacine hcl tab 2 mg</i>	1	PV
<i>methyldopa tab 250 mg</i>	1	PV
<i>methyldopa tab 500 mg</i>	1	PV
<i>methyldopate hcl inj 250 mg/5ml</i>	1	
ADRENOLYTICS, CENTRAL/DIURETIC COMBINATIONS		
<i>methyldopa & hydrochlorothiazide tab 250-15 mg</i>		PV
<i>methyldopa & hydrochlorothiazide tab 250-25 mg</i>		PV
ALDOSTERONE RECEPTOR ANTAGONISTS		
ALDACTONE TAB 25MG	2	
ALDACTONE TAB 50MG	2	
ALDACTONE TAB 100MG	2	
CAROSPIR SUS 25MG/5ML	NC	
<i>eplerenone tab 25 mg</i>	1	
<i>eplerenone tab 50 mg</i>	1	
INSPIRA TAB 25MG	2	
INSPIRA TAB 50MG	2	
<i>spironolactone tab 25 mg</i>	1	
<i>spironolactone tab 50 mg</i>	1	
<i>spironolactone tab 100 mg</i>	1	
ALPHA BLOCKERS		
CARDURA TAB 1MG	3	
CARDURA TAB 2MG	3	
CARDURA TAB 4MG	3	
CARDURA TAB 8MG	3	
<i>doxazosin mesylate tab 1 mg</i>	1	
<i>doxazosin mesylate tab 2 mg</i>	1	
<i>doxazosin mesylate tab 4 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>doxazosin mesylate tab 8 mg</i>	1	
MINIPRESS CAP 1MG	3	
MINIPRESS CAP 2MG	3	
MINIPRESS CAP 5MG	3	
<i>prazosin hcl cap 1 mg</i>	1	
<i>prazosin hcl cap 2 mg</i>	1	
<i>prazosin hcl cap 5 mg</i>	1	
<i>terazosin hcl cap 1 mg (base equivalent)</i>	1	
<i>terazosin hcl cap 2 mg (base equivalent)</i>	1	
<i>terazosin hcl cap 5 mg (base equivalent)</i>	1	
<i>terazosin hcl cap 10 mg (base equivalent)</i>	1	

ANGIOTENSIN II RECEPTOR ANTAGONIST/CALCIUM CHANNEL BLOCKER COMBINATIONS

<i>amlodipine besylate-olmesartan medoxomil1 tab 5-20 mg</i>		PV
<i>amlodipine besylate-olmesartan medoxomil1 tab 5-40 mg</i>		PV
<i>amlodipine besylate-olmesartan medoxomil1 tab 10-20 mg</i>		PV
<i>amlodipine besylate-olmesartan medoxomil1 tab 10-40 mg</i>		PV
<i>amlodipine besylate-valsartan tab 5-160 mg</i>	1	PV
<i>amlodipine besylate-valsartan tab 5-320 mg</i>	1	PV
<i>amlodipine besylate-valsartan tab 10-160 mg</i>	1	PV
<i>amlodipine besylate-valsartan tab 10-320 mg</i>	1	PV
AZOR TAB 5-20MG	3	PV
AZOR TAB 5-40MG	3	PV
AZOR TAB 10-20MG	3	PV
AZOR TAB 10-40MG	3	PV
EXFORGE TAB 5-160MG	NC	
EXFORGE TAB 5-320MG	NC	
EXFORGE TAB 10-160MG	NC	
EXFORGE TAB 10-320MG	NC	
<i>telmisartan-amlodipine tab 40-5 mg</i>	1	PV
<i>telmisartan-amlodipine tab 40-10 mg</i>	1	PV
<i>telmisartan-amlodipine tab 80-5 mg</i>	1	PV
<i>telmisartan-amlodipine tab 80-10 mg</i>	1	PV
TWYNSTA TAB 40-5MG	3	PV
TWYNSTA TAB 40-10MG	3	PV
TWYNSTA TAB 80-5MG	3	PV
TWYNSTA TAB 80-10MG	3	PV

ANGIOTENSIN II RECEPTOR ANTAGONIST/CALCIUM CHANNEL BLOCKER/DIURETIC COMBINATIONS

Drug Name	Drug Tier	Requirements/Limits
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg</i>	1	PV
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg</i>	1	PV
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg</i>	1	PV
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg</i>	1	PV
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg</i>	1	PV
EXFORGEH/5- TAB 160-12.5	NC	
EXFORGEH/5- TAB 160-25	NC	
EXFORGEH/10- TAB 160-12.5	NC	
EXFORGEH/10- TAB 160-25	NC	
EXFORGEH/10- TAB 320-25	NC	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg</i>	1	PV
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg</i>	1	PV
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg</i>	1	PV
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg</i>	1	PV
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg</i>	1	PV
TRIBENZOR20- TAB 5-12.5MG	3	PV
TRIBENZOR40- TAB 5-12.5MG	3	PV
TRIBENZOR40- TAB 5-25MG	3	PV
TRIBENZOR40- TAB 10-12.5	3	PV
TRIBENZOR40- TAB 10-25MG	3	PV
ANGIOTENSIN II RECEPTOR ANTAGONIST/DIURETIC COMBINATIONS		
ATACAND HCT TAB 16-12.5	NC	
ATACAND HCT TAB 32-12.5	NC	
ATACAND HCT TAB 32-25MG	NC	
AVALIDE TAB 150-12.5	3	PV
AVALIDE TAB 300-12.5	3	PV
BENICAR HCT TAB 20-12.5	NC	
BENICAR HCT TAB 40-12.5	NC	
BENICAR HCT TAB 40-25MG	NC	
<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg</i>	1	PV
<i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg</i>	1	PV
<i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg</i>	1	PV
DIOVAN HCT TAB 80/12.5	NC	
DIOVAN HCT TAB 160-12.5	NC	

Drug Name	Drug Tier	Requirements/Limits
DIOVAN HCT TAB 160-25MG	NC	
DIOVAN HCT TAB 320-12.5	NC	
DIOVAN HCT TAB 320-25MG	NC	
EDARBYCLOR TAB 40-12.5	NC	
EDARBYCLOR TAB 40-25MG	NC	
HYZAAR TAB 50-12.5	3	PV
HYZAAR TAB 100-12.5	3	PV
HYZAAR TAB 100-25	3	PV
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	1	PV
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	1	PV
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	1	PV
<i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg</i>	1	PV
<i>losartan potassium & hydrochlorothiazide tab 100-25 mg</i>	1	PV
MICARDIS HCT TAB 40/12.5	3	PV
MICARDIS HCT TAB 80-25MG	3	PV
MICARDIS HCT TAB 80/12.5	3	PV
<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i>	1	PV
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i>	1	PV
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i>	1	PV
<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i>	1	PV
<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i>	1	PV
<i>telmisartan-hydrochlorothiazide tab 80-25 mg</i>	1	PV
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>	1	PV
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>	1	PV
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i>	1	PV
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>	1	PV
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	1	PV
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
ATACAND TAB 4MG	NC	
ATACAND TAB 8MG	NC	
ATACAND TAB 16MG	NC	
ATACAND TAB 32MG	NC	

Drug Name	Drug Tier	Requirements/Limits
AVAPRO TAB 75MG	3	PV
AVAPRO TAB 150MG	3	PV
AVAPRO TAB 300MG	3	PV
BENICAR TAB 5MG	NC	
BENICAR TAB 20MG	NC	
BENICAR TAB 40MG	NC	
<i>candesartan cilexetil tab 4 mg</i>	1	PV
<i>candesartan cilexetil tab 8 mg</i>	1	PV
<i>candesartan cilexetil tab 16 mg</i>	1	PV
<i>candesartan cilexetil tab 32 mg</i>	1	PV
COZAAR TAB 25MG	3	PV
COZAAR TAB 50MG	3	PV
COZAAR TAB 100MG	3	PV
DIOVAN TAB 40MG	NC	
DIOVAN TAB 80MG	NC	
DIOVAN TAB 160MG	NC	
DIOVAN TAB 320MG	NC	
EDARBI TAB 40MG	NC	
EDARBI TAB 80MG	NC	
<i>eprosartan mesylate tab 600 mg</i>	1	PV
<i>irbesartan tab 75 mg</i>	1	PV
<i>irbesartan tab 150 mg</i>	1	PV
<i>irbesartan tab 300 mg</i>	1	PV
<i>losartan potassium tab 25 mg</i>	1	PV
<i>losartan potassium tab 50 mg</i>	1	PV
<i>losartan potassium tab 100 mg</i>	1	PV
MICARDIS TAB 20MG	3	PV
MICARDIS TAB 40MG	3	PV
MICARDIS TAB 80MG	3	PV
<i>olmesartan medoxomil tab 5 mg</i>	1	PV
<i>olmesartan medoxomil tab 20 mg</i>	1	PV
<i>olmesartan medoxomil tab 40 mg</i>	1	PV
<i>telmisartan tab 20 mg</i>	1	PV
<i>telmisartan tab 40 mg</i>	1	PV
<i>telmisartan tab 80 mg</i>	1	PV
<i>valsartan tab 40 mg</i>	1	PV
<i>valsartan tab 80 mg</i>	1	PV
<i>valsartan tab 160 mg</i>	1	PV
<i>valsartan tab 320 mg</i>	1	PV
ANTIARRHYTHMICS		
ADENOCARD INJ 3MG/ML	3	
ADENOCARD INJ 6MG/2ML	3	
ADENOCARD INJ 12MG/4ML	3	
<i>adenosine iv soln 6 mg/2ml</i>	1	
<i>adenosine iv soln 12 mg/4ml</i>	1	
AMIODARO/D5W SOL 150/100	NC	

Drug Name	Drug Tier	Requirements/Limits
AMIODARO/D5W SOL 900/500	NC	
<i>amiodarone hcl inj 150 mg/3ml (50 mg/ml)</i>	1	
<i>amiodarone hcl inj 450 mg/9ml (50 mg/ml)</i>	1	
<i>amiodarone hcl inj 900 mg/18ml (50 mg/ml)</i>	1	
<i>amiodarone hcl tab 100 mg</i>	2	PV
<i>amiodarone hcl tab 200 mg</i>	1	PV
<i>amiodarone hcl tab 400 mg</i>	1	PV
BETAPACE AF TAB 80MG	NC	
BETAPACE AF TAB 120MG	NC	
BETAPACE AF TAB 160MG	NC	
BETAPACE TAB 80MG	NC	
BETAPACE TAB 120MG	NC	
BETAPACE TAB 160MG	NC	
CORVERT INJ 1MG/10ML	3	
<i>disopyramide phosphate cap 100 mg</i>	1	PV
<i>disopyramide phosphate cap 150 mg</i>	1	PV
<i>dofetilide cap 125 mcg (0.125 mg)</i>	4	PA, PV, SP
<i>dofetilide cap 250 mcg (0.25 mg)</i>	4	PA, PV, SP
<i>dofetilide cap 500 mcg (0.5 mg)</i>	4	PA, PV, SP
<i>flecainide acetate tab 50 mg</i>	1	PV
<i>flecainide acetate tab 100 mg</i>	1	PV
<i>flecainide acetate tab 150 mg</i>	1	PV
<i>ibutilide fumarate inj 1 mg/10ml</i>	1	
<i>lidocaine hcl iv inj 10 mg/ml</i>	1	
<i>lidocaine hcl iv inj 20 mg/ml</i>	1	
<i>lidocaine iv infusion in d5w inj 4 mg/ml</i>	1	
<i>lidocaine iv infusion in d5w inj 8 mg/ml</i>	1	
<i>mexiletine hcl cap 150 mg</i>	1	
<i>mexiletine hcl cap 200 mg</i>	2	
<i>mexiletine hcl cap 250 mg</i>	2	
MULTAQ TAB 400MG	2	PV
NEXTERONE INJ	3	
NORPACE CAP 100MG	2	PV
NORPACE CAP 100MG CR	2	PV
NORPACE CAP 150MG	2	PV
NORPACE CAP 150MG CR	2	PV
<i>pacerone tab 100mg</i>	2	PV
<i>pacerone tab 200mg</i>	1	PV
<i>pacerone tab 400mg</i>	1	PV
<i>procainamide hcl inj 100 mg/ml</i>	1	
PROCAINAMIDE INJ 500MG/ML	3	
<i>propafenone hcl cap er 12hr 225 mg</i>	2	PV
<i>propafenone hcl cap er 12hr 325 mg</i>	2	PV
<i>propafenone hcl cap er 12hr 425 mg</i>	2	PV

Drug Name	Drug Tier	Requirements/Limits
<i>propafenone hcl tab 150 mg</i>	1	PV
<i>propafenone hcl tab 225 mg</i>	1	PV
<i>propafenone hcl tab 300 mg</i>	1	PV
QUINIDINE GL INJ 80MG/ML	3	
<i>quinidine gluconate tab er 324 mg</i>	2	
<i>quinidine sulfate tab 200 mg</i>	1	
<i>quinidine sulfate tab 300 mg</i>	1	
RYTHMOL SR CAP 225MG	2	PV
RYTHMOL SR CAP 325MG	2	PV
RYTHMOL SR CAP 425MG	2	PV
<i>sorine tab 80mg</i>	1	PV
<i>sorine tab 120mg</i>	1	PV
<i>sorine tab 160mg</i>	1	PV
<i>sorine tab 240mg</i>	1	PV
<i>sotalol hcl (afib/afl) tab 80 mg</i>	1	PV
<i>sotalol hcl (afib/afl) tab 120 mg</i>	1	PV
<i>sotalol hcl (afib/afl) tab 160 mg</i>	1	PV
SOTALOL HCL INJ 150/10ML	3	
<i>sotalol hcl tab 80 mg</i>	1	PV
<i>sotalol hcl tab 120 mg</i>	1	PV
<i>sotalol hcl tab 160 mg</i>	1	PV
<i>sotalol hcl tab 240 mg</i>	1	PV
SOTYLIZE SOL 5MG/ML	3	PV
TIKOSYN CAP 125MCG	6	PA, PV, SP, ST
TIKOSYN CAP 250MCG	6	PA, PV, SP, ST
TIKOSYN CAP 500MCG	6	PA, PV, SP, ST
ANTILIPEMICS, BILE ACID RESINS		
<i>cholestyramine light powder 4 gm/dose</i>	1	PV
<i>cholestyramine light powder packets 4 gm</i>	1	PV
<i>cholestyramine powder 4 gm/dose</i>	1	PV
<i>cholestyramine powder packets 4 gm</i>	1	PV
<i>colesevelam hcl tab 625 mg</i>	1	
COLESTID FLA GRA 5/7.5GM	3	PV
COLESTID FLA GRA 5GM	3	PV
COLESTID GRA 5GM	3	PV
COLESTID POW 5GM	3	PV
COLESTID TAB 1GM	3	PV
<i>colestipol hcl granule packets 5 gm</i>	2	PV
<i>colestipol hcl granules 5 gm</i>	2	PV
<i>colestipol hcl tab 1 gm</i>	1	PV
<i>prevalite pow 4gm</i>	1	PV
<i>prevalite pow 4gm pk</i>	1	PV
QUESTRAN POW 4GM	3	PV
QUESTRAN POW 4GM LITE	3	PV
WELCHOL PAK 3.75GM	2	PV
WELCHOL TAB 625MG	2	PV

Drug Name	Drug Tier	Requirements/Limits
ANTILIPEMICS, CHOLESTEROL ABSORPTION INHIBITORS		
<i>ezetimibe tab 10 mg</i>	2	PV
ZETIA TAB 10MG	NC	
ANTILIPEMICS, FIBRATES		
ANTARA CAP 30MG	3	PV
ANTARA CAP 90MG	3	PV
<i>choline fenofibrate cap dr 45 mg (fenofibric acid equiv)</i>	1	PV
<i>choline fenofibrate cap dr 135 mg (fenofibric acid equiv)</i>	1	PV
<i>fenofibrate cap 50 mg</i>	1	PV
<i>fenofibrate cap 150 mg</i>	2	PV
<i>fenofibrate micronized cap 43 mg</i>	1	PV
<i>fenofibrate micronized cap 67 mg</i>	1	PV
<i>fenofibrate micronized cap 130 mg</i>	1	PV
<i>fenofibrate micronized cap 134 mg</i>	1	PV
<i>fenofibrate micronized cap 200 mg</i>	1	PV
<i>fenofibrate tab 40 mg</i>	2	PV
<i>fenofibrate tab 48 mg</i>	1	PV
<i>fenofibrate tab 54 mg</i>	1	PV
<i>fenofibrate tab 120 mg</i>	2	PV
<i>fenofibrate tab 145 mg</i>	1	PV
<i>fenofibrate tab 160 mg</i>	1	PV
<i>fenofibric acid tab 35 mg</i>	1	PV
<i>fenofibric acid tab 105 mg</i>	1	PV
FENOGLIDE TAB 40MG	3	PV
FENOGLIDE TAB 120MG	3	PV
FIBRICOR TAB 35MG	3	PV
FIBRICOR TAB 105MG	3	PV
<i>gemfibrozil tab 600 mg</i>	1	PV
LIPOFEN CAP 50MG	3	PV
LIPOFEN CAP 150MG	3	PV
LOPID TAB 600MG	3	PV
TRICOR TAB 48MG	NC	
TRICOR TAB 145MG	NC	
TRIGLIDE TAB 160MG	3	ST
TRILIPIX CAP 45MG	3	
TRILIPIX CAP 135MG	3	
ANTILIPEMICS, HMG-COA REDUCTASE INHIBITORS/COMBINATIONS		
ADVICOR TAB 500-20MG	NC	
ADVICOR TAB 750-20MG	NC	
ADVICOR TAB 1000-20	NC	
ADVICOR TAB 1000-40	NC	
ALTOPREV TAB 20MG ER	NC	
ALTOPREV TAB 40MG ER	NC	

Drug Name	Drug Tier	Requirements/Limits
ALTOPREV TAB 60MG ER	NC	
<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	1	PV
<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	1	PV
<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	1	PV
<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	1	PV
CRESTOR TAB 5MG	NC	
CRESTOR TAB 10MG	NC	
CRESTOR TAB 20MG	NC	
CRESTOR TAB 40MG	NC	
<i>ezetimibe-simvastatin tab 10-10 mg</i>	2	
<i>ezetimibe-simvastatin tab 10-20 mg</i>	2	
<i>ezetimibe-simvastatin tab 10-40 mg</i>	2	
<i>ezetimibe-simvastatin tab 10-80 mg</i>	2	
FLOLIPID SUS 20MG/5ML	NC	
FLOLIPID SUS 40MG/5ML	NC	
<i>fluvastatin sodium cap 20 mg</i>	1	PV
<i>fluvastatin sodium cap 40 mg</i>	1	PV
<i>fluvastatin sodium tab er 24 hr 80 mg</i>	2	PV
LESCOL XL TAB 80MG	NC	
LIPITOR TAB 10MG	NC	
LIPITOR TAB 20MG	NC	
LIPITOR TAB 40MG	NC	
LIPITOR TAB 80MG	NC	
LIVALO TAB 1MG	NC	
LIVALO TAB 2MG	NC	
LIVALO TAB 4MG	NC	
<i>lovastatin tab 10 mg</i>	1	PV
<i>lovastatin tab 20 mg</i>	1	PV
<i>lovastatin tab 40 mg</i>	1	PV
PRAVACHOL TAB 20MG	3	PV
PRAVACHOL TAB 40MG	3	PV
PRAVACHOL TAB 80MG	3	PV
<i>pravastatin sodium tab 10 mg</i>	1	PV
<i>pravastatin sodium tab 20 mg</i>	1	PV
<i>pravastatin sodium tab 40 mg</i>	1	PV
<i>pravastatin sodium tab 80 mg</i>	1	PV
<i>rosuvastatin calcium tab 5 mg</i>	1	PV
<i>rosuvastatin calcium tab 10 mg</i>	1	PV
<i>rosuvastatin calcium tab 20 mg</i>	1	PV
<i>rosuvastatin calcium tab 40 mg</i>	1	PV
<i>simvastatin tab 5 mg</i>	1	PV
<i>simvastatin tab 10 mg</i>	1	PV
<i>simvastatin tab 20 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>simvastatin tab 40 mg</i>	1	PV
<i>simvastatin tab 80 mg</i>	1	PV
VYTORIN TAB 10-10MG	3	PV
VYTORIN TAB 10-20MG	3	PV
VYTORIN TAB 10-40MG	3	PV
VYTORIN TAB 10-80MG	3	PV
ZOCOR TAB 5MG	3	PV
ZOCOR TAB 10MG	3	PV
ZOCOR TAB 20MG	3	PV
ZOCOR TAB 40MG	3	PV
ZOCOR TAB 80MG	3	PV
ZYPITAMAG TAB 1MG	NC	
ZYPITAMAG TAB 2MG	NC	
ZYPITAMAG TAB 4MG	NC	

ANTILIPEMICS, MICROSOMAL TRIGLYCERIDE TRANSFER PROTEIN INHIBITORS

JUXTAPID CAP 5MG	6	PA, QL, SP
JUXTAPID CAP 10MG	6	PA, QL, SP
JUXTAPID CAP 20MG	6	PA, QL, SP
JUXTAPID CAP 30MG	6	PA, QL, SP
JUXTAPID CAP 40MG	6	PA, QL, SP
JUXTAPID CAP 60MG	6	PA, QL, SP

ANTILIPEMICS, MISCELLANEOUS

KYNAMRO INJ 200MG/ML	6	PA, QL, SP
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ANTILIPEMICS, NIACINS

<i>niacin tab er 500 mg (antihyperlipidemic)</i>	1	PV
<i>niacin tab er 750 mg (antihyperlipidemic)</i>	2	PV
<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	1	PV
<i>niacor tab 500mg</i>	1	PV
NIASPAN TAB 500MG ER	3	PV
NIASPAN TAB 750MG ER	3	PV
NIASPAN TAB 1000 ER	3	PV

ANTILIPEMICS, OMEGA-3 FATTY ACIDS

LOVAZA CAP 1GM	3	PA
<i>omega-3-acid ethyl esters cap 1 gm</i>	1	PA
OMEGA-3/D-3 KIT WELLNESS	NC	
SURE RESULT KIT O3D3 SYS	NC	
VASCEPA CAP 0.5GM	2	PA
VASCEPA CAP 1GM	2	PA

ANTILIPEMICS, PCSK9 INHIBITORS

PRALUENT INJ 75MG/ML	NC	
PRALUENT INJ 150MG/ML	NC	
REPATHA INJ 140MG/ML	5	PA, QL, SP
REPATHA PUSH INJ 420/3.5	5	PA, QL, SP
REPATHA SURE INJ 140MG/ML	5	PA, QL, SP

Drug Name **Drug Tier** **Requirements/Limits**
BETA-BLOCKER/ANGIOTENSIN II RECEPTOR ANTAGONIST
COMBINATIONS

BYVALSON TAB 5-80MG	NC	
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BETA-BLOCKER/DIURETIC COMBINATIONS

<i>atenolol & chlorthalidone tab 50-25 mg</i>	1	PV
<i>atenolol & chlorthalidone tab 100-25 mg</i>	1	PV
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	1	PV
<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	1	PV
<i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg</i>	1	PV
CORZIDE TAB 40-5MG	3	PV
CORZIDE TAB 80-5MG	3	PV
DUTOPROL TAB 25-12.5	NC	
DUTOPROL TAB 50-12.5	NC	
DUTOPROL TAB 100-12.5	NC	
LOPRESS HCT TAB 50-25MG	2	PV
<i>metoprolol & hydrochlorothiazide tab 50-25 mg</i>	1	PV
<i>metoprolol & hydrochlorothiazide tab 100-25 mg</i>	1	PV
<i>metoprolol & hydrochlorothiazide tab 100-50 mg</i>	1	PV
<i>nadolol & bendroflumethiazide tab 40-5 mg</i>	1	PV
<i>nadolol & bendroflumethiazide tab 80-5 mg</i>	1	PV
<i>propranolol & hydrochlorothiazide tab 40-25 mg</i>	1	PV
<i>propranolol & hydrochlorothiazide tab 80-25 mg</i>	1	PV
TENORETIC TAB 50	2	PV
TENORETIC TAB 100	2	PV
ZIAC TAB 2.5/6.25	2	PV
ZIAC TAB 5-6.25MG	2	PV
ZIAC TAB 10/6.25	2	PV

BETA-BLOCKERS

<i>acebutolol hcl cap 200 mg</i>	1	PV
<i>acebutolol hcl cap 400 mg</i>	1	PV
<i>atenolol tab 25 mg</i>	1	PV
<i>atenolol tab 50 mg</i>	1	PV
<i>atenolol tab 100 mg</i>	1	PV
<i>betaxolol hcl tab 10 mg</i>	1	PV
<i>betaxolol hcl tab 20 mg</i>	1	PV
<i>bisoprolol fumarate tab 5 mg</i>	1	PV
<i>bisoprolol fumarate tab 10 mg</i>	1	PV
BREVIBLOC INJ 10MG/ML	3	
BREVIBLOC SOL	3	

Drug Name	Drug Tier	Requirements/Limits
BREVIBLOC SOL 10MG/ML	3	
BYSTOLIC TAB 2.5MG	2	PV
BYSTOLIC TAB 5MG	2	PV
BYSTOLIC TAB 10MG	2	PV
BYSTOLIC TAB 20MG	2	PV
<i>carvedilol phosphate cap er 24hr 10 mg</i>	2	
<i>carvedilol phosphate cap er 24hr 20 mg</i>	2	
<i>carvedilol phosphate cap er 24hr 40 mg</i>	2	
<i>carvedilol phosphate cap er 24hr 80 mg</i>	2	
<i>carvedilol tab 3.125 mg</i>	1	PV
<i>carvedilol tab 6.25 mg</i>	1	PV
<i>carvedilol tab 12.5 mg</i>	1	PV
<i>carvedilol tab 25 mg</i>	1	PV
COREG CR CAP 10MG	2	PV
COREG CR CAP 20MG	2	PV
COREG CR CAP 40MG	2	PV
COREG CR CAP 80MG	2	PV
COREG TAB 3.125MG	3	PV
COREG TAB 6.25MG	3	PV
COREG TAB 12.5MG	3	PV
COREG TAB 25MG	3	PV
CORGARD TAB 20MG	3	PV
CORGARD TAB 40MG	3	PV
CORGARD TAB 80MG	3	PV
<i>esmolol hcl inj 100 mg/10ml</i>	1	
ESMOLOL HCL SOL 2000/100	3	
ESMOLOL HCL SOL 2500/250	3	
HEMANGEOL SOL 4.28/ML	3	
INDERAL LA CAP 60MG	3	PV
INDERAL LA CAP 80MG	3	PV
INDERAL LA CAP 120MG	3	PV
INDERAL LA CAP 160MG	3	PV
INDERAL XL CAP 80MG	3	PV
INDERAL XL CAP 120MG	3	PV
INNOPRAN XL CAP 80MG	3	PV
INNOPRAN XL CAP 120MG	3	PV
KAPSPARGO CAP 25MG	NC	
KAPSPARGO CAP 50MG	NC	
KAPSPARGO CAP 100MG	NC	
KAPSPARGO CAP 200MG	NC	
<i>labetalol hcl iv soln 5 mg/ml</i>	1	
<i>labetalol hcl tab 100 mg</i>	1	PV
<i>labetalol hcl tab 200 mg</i>	1	PV
<i>labetalol hcl tab 300 mg</i>	1	PV
LOPRESSOR TAB 50MG	3	
LOPRESSOR TAB 100MG	3	PV

Drug Name	Drug Tier	Requirements/Limits
<i>metoprolol succinate tab er 24hr 25 mg (tartrate equiv)</i>	1	PV
<i>metoprolol succinate tab er 24hr 50 mg (tartrate equiv)</i>	1	PV
<i>metoprolol succinate tab er 24hr 100 mg (tartrate equiv)</i>	1	PV
<i>metoprolol succinate tab er 24hr 200 mg (tartrate equiv)</i>	1	PV
<i>metoprolol tartrate iv soln 5 mg/5ml</i>	1	
<i>metoprolol tartrate iv soln cart inj 5 mg/5ml (1 mg/ml)</i>	1	
<i>metoprolol tartrate tab 25 mg</i>	1	PV
<i>metoprolol tartrate tab 37.5 mg</i>	1	PV
<i>metoprolol tartrate tab 50 mg</i>	1	PV
<i>metoprolol tartrate tab 75 mg</i>	1	PV
<i>metoprolol tartrate tab 100 mg</i>	1	PV
<i>nadolol tab 20 mg</i>	1	PV
<i>nadolol tab 40 mg</i>	1	PV
<i>nadolol tab 80 mg</i>	1	PV
<i>pindolol tab 5 mg</i>	1	PV
<i>pindolol tab 10 mg</i>	1	PV
<i>propranolol hcl cap er 24hr 60 mg</i>	1	PV
<i>propranolol hcl cap er 24hr 80 mg</i>	1	PV
<i>propranolol hcl cap er 24hr 120 mg</i>	1	PV
<i>propranolol hcl cap er 24hr 160 mg</i>	1	PV
<i>propranolol hcl inj 1 mg/ml</i>	1	
<i>propranolol hcl oral soln 20 mg/5ml</i>	1	PV
<i>propranolol hcl oral soln 40 mg/5ml</i>	1	PV
<i>propranolol hcl tab 10 mg</i>	1	PV
<i>propranolol hcl tab 20 mg</i>	1	PV
<i>propranolol hcl tab 40 mg</i>	1	PV
<i>propranolol hcl tab 60 mg</i>	1	PV
<i>propranolol hcl tab 80 mg</i>	1	PV
TENORMIN TAB 25MG	3	PV
TENORMIN TAB 50MG	3	PV
TENORMIN TAB 100MG	3	PV
<i>timolol maleate tab 5 mg</i>	1	PV
<i>timolol maleate tab 10 mg</i>	1	PV
<i>timolol maleate tab 20 mg</i>	1	PV
TOPROL XL TAB 25MG	3	PV
TOPROL XL TAB 50MG	3	PV
TOPROL XL TAB 100MG	3	PV
TOPROL XL TAB 200MG	3	PV

CALCIUM CHANNEL BLOCKER/ANTILIPEMIC COMBINATIONS

<i>amlodipine besylate-atorvastatin calcium tab 2.5-10 mg</i>	2	PV
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Drug Name	Drug Tier	Requirements/Limits
<i>amlodipine besylate-atorvastatin calcium tab 2.5-20 mg</i>	2	PV
<i>amlodipine besylate-atorvastatin calcium tab 2.5-40 mg</i>	2	PV
<i>amlodipine besylate-atorvastatin calcium tab 5-10 mg</i>	2	PV
<i>amlodipine besylate-atorvastatin calcium tab 5-20 mg</i>	1	PV
<i>amlodipine besylate-atorvastatin calcium tab 5-40 mg</i>	2	PV
<i>amlodipine besylate-atorvastatin calcium tab 5-80 mg</i>	2	PV
<i>amlodipine besylate-atorvastatin calcium tab 10-10 mg</i>	1	PV
<i>amlodipine besylate-atorvastatin calcium tab 10-20 mg</i>	1	PV
<i>amlodipine besylate-atorvastatin calcium tab 10-40 mg</i>	2	PV
<i>amlodipine besylate-atorvastatin calcium tab 10-80 mg</i>	2	PV
CADUET TAB 5-10MG	3	PV
CADUET TAB 5-20MG	3	PV
CADUET TAB 5-40MG	3	PV
CADUET TAB 5-80MG	3	PV
CADUET TAB 10-10MG	3	PV
CADUET TAB 10-20MG	3	PV
CADUET TAB 10-40MG	3	PV
CADUET TAB 10-80MG	3	PV
CALCIUM CHANNEL BLOCKERS, DIHYDROPYRIDINES		
ADALAT CC TAB 30MG ER	3	PV
ADALAT CC TAB 60MG ER	3	PV
ADALAT CC TAB 90MG ER	3	
<i>afeditab tab 30mg cr</i>	1	PV
<i>afeditab tab 60mg cr</i>	1	PV
<i>amlodipine besylate tab 2.5 mg (base equivalent)</i>	1	PV
<i>amlodipine besylate tab 5 mg (base equivalent)</i>	1	PV
<i>amlodipine besylate tab 10 mg (base equivalent)</i>	1	PV
CARDENE IV INJ 40/200ML	3	
CARDENE IV SOL 20/200ML	3	
CLEVIPREX EMU 25/50ML	3	
CLEVIPREX EMU 50/100ML	3	
<i>felodipine tab er 24hr 2.5 mg</i>	1	PV
<i>felodipine tab er 24hr 5 mg</i>	1	PV
<i>felodipine tab er 24hr 10 mg</i>	1	PV
<i>isradipine cap 2.5 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>isradipine cap 5 mg</i>	1	PV
<i>nicardipine hcl cap 20 mg</i>	1	PV
<i>nicardipine hcl cap 30 mg</i>	1	PV
<i>nicardipine hcl iv soln 2.5 mg/ml</i>	1	
<i>nifedipine cap 10 mg</i>	1	PV
<i>nifedipine cap 20 mg</i>	1	PV
<i>nifedipine tab er 24hr 30 mg</i>	1	PV
<i>nifedipine tab er 24hr 60 mg</i>	1	PV
<i>nifedipine tab er 24hr 90 mg</i>	1	PV
<i>nifedipine tab er 24hr osmotic release 30 mg</i>	1	PV
<i>nifedipine tab er 24hr osmotic release 60 mg</i>	1	PV
<i>nifedipine tab er 24hr osmotic release 90 mg</i>	1	PV
<i>nimodipine cap 30 mg</i>	2	
<i>nisoldipine tab er 24hr 8.5 mg</i>	1	PV
<i>nisoldipine tab er 24hr 17 mg</i>	2	PV
<i>nisoldipine tab er 24hr 20 mg</i>	2	PV
<i>nisoldipine tab er 24hr 25.5 mg</i>	2	PV
<i>nisoldipine tab er 24hr 30 mg</i>	2	PV
<i>nisoldipine tab er 24hr 34 mg</i>	2	PV
<i>nisoldipine tab er 24hr 40 mg</i>	2	PV
NORVASC TAB 2.5MG	NC	
NORVASC TAB 5MG	NC	
NORVASC TAB 10MG	NC	
NYMALIZE SOL 60/20ML	3	
PROCARDIA CAP 10MG	3	PV
PROCARDIA XL TAB 30MG CR	3	PV
PROCARDIA XL TAB 60MG CR	3	PV
PROCARDIA XL TAB 90MG CR	3	PV
SULAR TAB 8.5MG	3	PV
SULAR TAB 17MG	3	PV
SULAR TAB 34MG	3	PV
CALCIUM CHANNEL BLOCKERS, NON-DIHYDROPYRIDINES		
CALAN SR TAB 120MG	3	PV
CALAN SR TAB 180MG	3	PV
CALAN SR TAB 240MG	3	PV
CALAN TAB 80MG	3	PV
CALAN TAB 120MG	3	PV
CARDIZEM CD CAP 120MG/24	NC	
CARDIZEM CD CAP 180MG/24	NC	
CARDIZEM CD CAP 240MG/24	NC	
CARDIZEM CD CAP 360MG/24	NC	
CARDIZEM LA TAB 120MG	NC	
CARDIZEM LA TAB 180MG	NC	
CARDIZEM LA TAB 240MG	NC	

Drug Name	Drug Tier	Requirements/Limits
CARDIZEM LA TAB 300MG/24	NC	
CARDIZEM LA TAB 360MG	NC	
CARDIZEM LA TAB 420MG/24	NC	
CARDIZEM TAB 30MG	NC	
CARDIZEM TAB 60MG	NC	
CARDIZEM TAB 120MG	NC	
<i>cartia xt cap 120/24hr</i>	1	PV
<i>cartia xt cap 180/24hr</i>	1	PV
<i>cartia xt cap 240/24hr</i>	1	PV
<i>cartia xt cap 300/24hr</i>	1	PV
<i>dilt-xr cap 120mg</i>	1	PV
<i>dilt-xr cap 180mg</i>	1	PV
<i>dilt-xr cap 240mg</i>	1	PV
<i>diltiazem cap 120mg cd</i>	1	PV
<i>diltiazem cap 180mg cd</i>	1	PV
<i>diltiazem cap 240mg cd</i>	1	PV
<i>diltiazem cap 300mg cd</i>	1	PV
<i>diltiazem hcl cap er 12hr 60 mg</i>	1	PV
<i>diltiazem hcl cap er 12hr 90 mg</i>	1	PV
<i>diltiazem hcl cap er 12hr 120 mg</i>	1	PV
<i>diltiazem hcl cap er 24hr 120 mg</i>	1	PV
<i>diltiazem hcl cap er 24hr 180 mg</i>	1	PV
<i>diltiazem hcl cap er 24hr 240 mg</i>	1	PV
<i>diltiazem hcl coated beads cap er 24hr 120 mg</i>	1	PV
<i>diltiazem hcl coated beads cap er 24hr 180 mg</i>	1	PV
<i>diltiazem hcl coated beads cap er 24hr 240 mg</i>	1	PV
<i>diltiazem hcl coated beads cap er 24hr 300 mg</i>	1	PV
<i>diltiazem hcl coated beads cap er 24hr 360 mg</i>	2	PV
<i>diltiazem hcl coated beads tab er 24hr 180 mg</i>	NC	
<i>diltiazem hcl coated beads tab er 24hr 240 mg</i>	NC	
<i>diltiazem hcl coated beads tab er 24hr 300 mg</i>	NC	
<i>diltiazem hcl coated beads tab er 24hr 360 mg</i>	NC	
<i>diltiazem hcl coated beads tab er 24hr 420 mg</i>	NC	
<i>diltiazem hcl extended release beads cap er 24hr 120 mg</i>	1	PV
<i>diltiazem hcl extended release beads cap er 24hr 180 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>diltiazem hcl extended release beads cap er 24hr 240 mg</i>	1	PV
<i>diltiazem hcl extended release beads cap er 24hr 300 mg</i>	1	PV
<i>diltiazem hcl extended release beads cap er 24hr 360 mg</i>	1	PV
<i>diltiazem hcl extended release beads cap er 24hr 420 mg</i>	1	PV
<i>diltiazem hcl iv soln 25 mg/5ml (5 mg/ml)</i>	1	
<i>diltiazem hcl iv soln 50 mg/10ml (5 mg/ml)</i>	1	
<i>diltiazem hcl iv soln 125 mg/25ml (5 mg/ml)</i>	1	
<i>diltiazem hcl tab 30 mg</i>	1	PV
<i>diltiazem hcl tab 60 mg</i>	1	PV
<i>diltiazem hcl tab 90 mg</i>	1	PV
<i>diltiazem hcl tab 120 mg</i>	1	PV
DILTIAZEM INJ 100MG	3	
<i>matzim la tab 180mg/24</i>	NC	
<i>matzim la tab 240mg/24</i>	NC	
<i>matzim la tab 300mg/24</i>	NC	
<i>matzim la tab 360mg/24</i>	NC	
<i>matzim la tab 420mg/24</i>	NC	
<i>taztia xt cap 120mg/24</i>	1	PV
<i>taztia xt cap 180mg/24</i>	1	PV
<i>taztia xt cap 240mg/24</i>	1	PV
<i>taztia xt cap 300mg/24</i>	1	PV
<i>taztia xt cap 360mg/24</i>	1	PV
TIAZAC CAP 120MG/24	3	PV
TIAZAC CAP 180MG/24	3	PV
TIAZAC CAP 240MG/24	3	PV
TIAZAC CAP 300MG/24	3	PV
TIAZAC CAP 360MG/24	3	PV
TIAZAC CAP 420MG/24	3	PV
<i>verapamil hcl cap er 24hr 100 mg</i>	1	PV
<i>verapamil hcl cap er 24hr 120 mg</i>	1	PV
<i>verapamil hcl cap er 24hr 180 mg</i>	1	PV
<i>verapamil hcl cap er 24hr 200 mg</i>	1	PV
<i>verapamil hcl cap er 24hr 240 mg</i>	1	PV
<i>verapamil hcl cap er 24hr 300 mg</i>	1	PV
<i>verapamil hcl cap er 24hr 360 mg</i>	1	PV
<i>verapamil hcl iv soln 2.5 mg/ml</i>	1	
<i>verapamil hcl tab 40 mg</i>	1	PV
<i>verapamil hcl tab 80 mg</i>	1	PV
<i>verapamil hcl tab 120 mg</i>	1	PV
<i>verapamil hcl tab er 120 mg</i>	1	PV
<i>verapamil hcl tab er 180 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>verapamil hcl tab er 240 mg</i>	1	PV
VERELAN CAP 120MG SR	3	PV
VERELAN CAP 180MG SR	3	PV
VERELAN CAP 240MG SR	3	PV
VERELAN CAP 360MG SR	3	PV
VERELAN PM CAP 100MG ER	3	PV
VERELAN PM CAP 200MG ER	3	PV
VERELAN PM CAP 300MG ER	3	PV

DIGITALIS GLYCOSIDES

<i>digitek tab 0.25mg</i>	1	
<i>digitek tab 0.125mg</i>	1	
<i>digox tab 0.25mg</i>	1	
<i>digox tab 0.125mg</i>	1	
<i>digoxin inj 0.25 mg/ml</i>	1	
<i>digoxin oral soln 0.05 mg/ml</i>	2	
<i>digoxin tab 125 mcg (0.125 mg)</i>	1	
<i>digoxin tab 250 mcg (0.25 mg)</i>	1	
LANOXIN INJ 0.25MG/1	3	
LANOXIN PED INJ 0.1MG/ML	3	
LANOXIN TAB 0.25MG	NC	
LANOXIN TAB 0.125MG	NC	
LANOXIN TAB 0.0625MG	NC	
LANOXIN TAB 0.1875MG	NC	

DIRECT RENIN INHIBITORS/DIURETIC COMBINATIONS

TEKTURNA HCT TAB 150-12.5	2	PV
TEKTURNA HCT TAB 150-25MG	2	PV
TEKTURNA HCT TAB 300-12.5	2	PV
TEKTURNA HCT TAB 300-25MG	2	PV
TEKTURNA TAB 150MG	2	PV
TEKTURNA TAB 300MG	2	PV

DIURETICS, CARBONIC ANHYDRASE INHIBITORS

<i>acetazolamide cap er 12hr 500 mg</i>	1	
<i>acetazolamide sodium for inj 500 mg</i>	1	
<i>acetazolamide tab 125 mg</i>	1	
<i>acetazolamide tab 250 mg</i>	1	
KEVEYIS TAB 50MG	6	PA, SP
<i>methazolamide tab 25 mg</i>	1	
<i>methazolamide tab 50 mg</i>	1	
NEPTAZANE TAB 25MG	3	

DIURETICS, DIURETIC COMBINATIONS

ALDACTAZIDE TAB 25/25	3	PV
ALDACTAZIDE TAB 50/50	3	PV
<i>amiloride & hydrochlorothiazide tab 5-50 mg</i>	1	PV
DYAZIDE CAP 37.5-25	3	PV
MAXZIDE TAB 75-50	3	PV

Drug Name	Drug Tier	Requirements/Limits
MAXZIDE-25 TAB	3	PV
<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	1	PV
<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	1	PV
<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	1	PV
<i>triamterene & hydrochlorothiazide tab 75-50 mg</i>	1	PV

DIURETICS, LOOP DIURETICS

<i>bumetanide inj 0.25 mg/ml</i>	1	
<i>bumetanide tab 0.5 mg</i>	1	
<i>bumetanide tab 1 mg</i>	1	
<i>bumetanide tab 2 mg</i>	1	
BUMEX TAB 0.5MG	3	
BUMEX TAB 1MG	3	
BUMEX TAB 2MG	3	
DEMADEX TAB 10MG	3	
DEMADEX TAB 20MG	3	
EDECRIN TAB 25MG	3	
<i>ethacrynate sodium for inj 50 mg</i>	1	
<i>ethacrynic acid tab 25 mg</i>	2	
<i>furosemide inj 10 mg/ml</i>	1	
<i>furosemide oral soln 8 mg/ml</i>	1	
<i>furosemide oral soln 10 mg/ml</i>	1	
<i>furosemide tab 20 mg</i>	1	
<i>furosemide tab 40 mg</i>	1	
<i>furosemide tab 80 mg</i>	1	
LASIX TAB 20MG	3	
LASIX TAB 40MG	3	
LASIX TAB 80MG	3	
SOD EDECRIN INJ 50MG	3	
<i>toremide tab 5 mg</i>	1	
<i>toremide tab 10 mg</i>	1	
<i>toremide tab 20 mg</i>	1	
<i>toremide tab 100 mg</i>	1	

DIURETICS, OSMOTIC DIURETICS

<i>mannitol iv soln 20%</i>	1	
<i>mannitol iv soln 25%</i>	1	
<i>osmitrol inj 5%</i>	1	
<i>osmitrol inj 10%</i>	1	
<i>osmitrol inj 15%</i>	1	
<i>osmitrol vfx inj 20%</i>	1	

DIURETICS, POTASSIUM-SPARING DIURETICS

<i>amiloride hcl tab 5 mg</i>	1	
DYRENIUM CAP 50MG	NC	
DYRENIUM CAP 100MG	NC	

Drug Name	Drug Tier	Requirements/Limits
DIURETICS, THIAZIDES AND THIAZIDE-LIKE DIURETICS		
<i>chlorothiazide sodium for inj 500 mg</i>	1	
<i>chlorothiazide tab 250 mg</i>	1	PV
<i>chlorothiazide tab 500 mg</i>	1	PV
<i>chlorthalidone tab 25 mg</i>	1	PV
<i>chlorthalidone tab 50 mg</i>	1	PV
DIURIL SUS 250/5ML	3	PV
<i>hydrochlorothiazide cap 12.5 mg</i>	1	PV
<i>hydrochlorothiazide tab 12.5 mg</i>	1	PV
<i>hydrochlorothiazide tab 25 mg</i>	1	PV
<i>hydrochlorothiazide tab 50 mg</i>	1	PV
<i>indapamide tab 1.25 mg</i>	1	PV
<i>indapamide tab 2.5 mg</i>	1	PV
<i>methyclothiazide tab 5 mg</i>	1	PV
<i>metolazone tab 2.5 mg</i>	1	
<i>metolazone tab 5 mg</i>	1	
<i>metolazone tab 10 mg</i>	1	
MICROZIDE CAP 12.5MG	3	PV
SOD DIURIL INJ 500MG	3	
HEART FAILURE		
BIDIL TAB	2	
CORLANOR TAB 5MG	2	PA
CORLANOR TAB 7.5MG	2	PA
ENTRESTO TAB 24-26MG	2	PA
ENTRESTO TAB 49-51MG	2	PA
ENTRESTO TAB 97-103MG	2	PA
MISCELLANEOUS		
<i>alprostadil inj 500 mcg/ml</i>	1	
ASCLERA INJ 0.5%	3	
ASCLERA INJ 1%	3	
<i>atropine sulfate inj 0.4 mg/ml</i>	1	
<i>atropine sulfate inj 1 mg/ml</i>	1	
<i>atropine sulfate inj 8 mg/20ml (0.4 mg/ml)</i>	1	
<i>cardioplegic soln</i>	1	
CORLOPAM INJ 10MG/ML	3	
DEMSEER CAP 250MG	3	
DIBENZYLINE CAP 10MG	3	
ETHAMOLIN INJ 5%	3	
<i>hydralazine hcl inj 20 mg/ml</i>	1	
<i>hydralazine hcl tab 10 mg</i>	1	PV
<i>hydralazine hcl tab 25 mg</i>	1	PV
<i>hydralazine hcl tab 50 mg</i>	1	PV
<i>hydralazine hcl tab 100 mg</i>	1	PV
<i>ibuprofen lysine iv soln 10 mg/ml (base equivalent)</i>	1	
<i>isoxsuprine hcl tab 10 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>isoxsuprine hcl tab 20 mg</i>	1	
<i>milrinone lactate in dextrose 5% iv soln 20 mg/100ml</i>	1	
<i>milrinone lactate in dextrose 5% iv soln 40 mg/200ml</i>	1	
<i>milrinone lactate iv soln 10 mg/10ml (base 1 equivalent)</i>	1	
<i>milrinone lactate iv soln 20 mg/20ml (base 1 equivalent)</i>	1	
<i>milrinone lactate iv soln 50 mg/50ml (base 1 equivalent)</i>	1	
<i>minoxidil tab 2.5 mg</i>	1	PV
<i>minoxidil tab 10 mg</i>	1	PV
NATRECOR INJ 1.5MG	3	
NEOPROFEN SOL 10MG/ML	3	
NIPRIDE RTU INJ 20/100ML	NC	
NIPRIDE RTU INJ 50/100ML	NC	
NITROPRESS INJ 25MG/ML	3	
<i>nitroprusside sodium iv soln 25 mg/ml</i>	1	
NORTHERA CAP 100MG	NC	
NORTHERA CAP 200MG	NC	
NORTHERA CAP 300MG	NC	
<i>papaverine hcl inj 30 mg/ml</i>	1	
<i>phenoxybenzamine hcl cap 10 mg</i>	2	
<i>phentolamine mesylate for inj 5 mg</i>	1	
PHENTOLAMINE MESYLATE FOR INJ 5 MG	1	
PLEGISOL SOL	3	
PROSTIN VR INJ 500MCG	3	
RANEXA TAB 500MG	2	
RANEXA TAB 1000MG	2	
SOTRADECOL INJ 1%	3	
SOTRADECOL INJ 3%	3	
VARITHENA AER 10MG/ML	6	SP
VECAMYL TAB 2.5MG	3	
<i>NITRATES, INJECTABLE</i>		
NITROGLYCER INJ 5MG/ML	3	
<i>nitroglycerin iv soln 100 mcg/ml in d5w</i>	1	
<i>nitroglycerin iv soln 200 mcg/ml in d5w</i>	1	
<i>nitroglycerin iv soln 400 mcg/ml in d5w</i>	1	
<i>NITRATES, ORAL</i>		
DILATRATE SR CAP 40MG	3	PV
ISORDIL TAB 5MG	2	PV
ISORDIL TAB 40MG	2	PV
<i>isosorbide dinitrate tab 5 mg</i>	1	PV
<i>isosorbide dinitrate tab 10 mg</i>	1	PV
<i>isosorbide dinitrate tab 20 mg</i>	1	PV
<i>isosorbide dinitrate tab 30 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>isosorbide dinitrate tab er 40 mg</i>	1	PV
<i>isosorbide mononitrate tab 10 mg</i>	1	PV
<i>isosorbide mononitrate tab 20 mg</i>	1	PV
<i>isosorbide mononitrate tab er 24hr 30 mg</i>	1	PV
<i>isosorbide mononitrate tab er 24hr 60 mg</i>	1	PV
<i>isosorbide mononitrate tab er 24hr 120 mg</i>	1	PV
<i>nitro-time cap 2.5mg cr</i>	1	PV
<i>nitro-time cap 6.5mg cr</i>	1	PV
<i>nitro-time cap 9mg cr</i>	1	PV
<i>nitroglycerin cap er 2.5 mg</i>	1	PV
<i>nitroglycerin cap er 6.5 mg</i>	1	PV
<i>nitroglycerin cap er 9 mg</i>	1	PV
NITRATES, SUBLINGUAL/TRANSLINGUAL		
GONITRO POW 400MCG	NC	
<i>nitroglycerin sl tab 0.3 mg</i>	1	
<i>nitroglycerin sl tab 0.4 mg</i>	1	
<i>nitroglycerin sl tab 0.6 mg</i>	1	
<i>nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)</i>	2	PV
NITROLINGUAL SPR PUMSPRA	3	PV
NITROMIST AER 400MCG	3	PV
NITROSTAT SUB 0.3MG	3	
NITROSTAT SUB 0.4MG	3	
NITROSTAT SUB 0.6MG	3	
NITRATES, TRANSDERMAL		
<i>minitran dis 0.1mg/hr</i>	1	PV
<i>minitran dis 0.2mg/hr</i>	1	PV
<i>minitran dis 0.4mg/hr</i>	1	PV
<i>minitran dis 0.6mg/hr</i>	1	PV
NITRO-BID OIN 2%	3	PV
NITRO-DUR DIS 0.1MG/HR	2	PV
NITRO-DUR DIS 0.2MG/HR	2	PV
NITRO-DUR DIS 0.3MG/HR	2	PV
NITRO-DUR DIS 0.4MG/HR	2	PV
NITRO-DUR DIS 0.6MG/HR	2	PV
NITRO-DUR DIS 0.8MG/HR	2	PV
<i>nitroglycerin td patch 24hr 0.1 mg/hr</i>	1	PV
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>	1	PV
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>	1	PV
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>	1	PV
PULMONARY ARTERIAL HYPERTENSION, ENDOTHELIN RECEPTOR ANTAGONISTS		
LETAIRIS TAB 5MG	5	PA, QL, SP
LETAIRIS TAB 10MG	5	PA, QL, SP
OPSUMIT TAB 10MG	5	PA, QL, SP
TRACLEER TAB 32MG	5	PA, QL, SP

Drug Name	Drug Tier	Requirements/Limits
TRACLEER TAB 62.5MG	5	PA, QL, SP
TRACLEER TAB 125MG	5	PA, QL, SP

PULMONARY ARTERIAL HYPERTENSION, PHOSPHODIESTERASE INHIBITORS

ADCIRCA TAB 20MG	NC	
REVATIO INJ	NC	
REVATIO SUS 10MG/ML	NC	
REVATIO TAB 20MG	NC	
<i>sildenafil citrate iv soln 10 mg/12.5ml (base equivalent)</i>	4	PA, SP
<i>sildenafil citrate tab 20 mg</i>	4	PA, QL, SP
<i>tadalafil tab 20 mg (pah)</i>	4	PA, QL, SP

PULMONARY ARTERIAL HYPERTENSION, PROSTACYCLIN RECEPTOR AGONISTS

UPTRAVI TAB 200/800	5	PA, SP
UPTRAVI TAB 200MCG	5	PA, SP
UPTRAVI TAB 400MCG	5	PA, SP
UPTRAVI TAB 600MCG	5	PA, SP
UPTRAVI TAB 800MCG	5	PA, SP
UPTRAVI TAB 1000MCG	5	PA, SP
UPTRAVI TAB 1200MCG	5	PA, SP
UPTRAVI TAB 1400MCG	5	PA, SP
UPTRAVI TAB 1600MCG	5	PA, SP

PULMONARY ARTERIAL HYPERTENSION, PROSTAGLANDIN VASODILATORS

<i>epoprostenol sodium for inj 0.5 mg</i>	4	PA, SP
<i>epoprostenol sodium for inj 1.5 mg</i>	4	PA, SP
FLOLAN INJ 0.5MG	5	PA, SP
FLOLAN INJ 1.5MG	5	PA, SP
ORENITRAM TAB 0.25MG	5	PA, SP
ORENITRAM TAB 0.125MG	5	PA, SP
ORENITRAM TAB 1MG	5	PA, SP
ORENITRAM TAB 2.5MG	5	PA, SP
ORENITRAM TAB 5MG	5	PA, SP
REMODULIN INJ 1MG/ML	6	PA, SP
REMODULIN INJ 2.5MG/ML	6	PA, SP
REMODULIN INJ 5MG/ML	6	PA, SP
REMODULIN INJ 10MG/ML	6	PA, SP
TYVASO REFIL SOL 0.6MG/ML	6	PA, QL, SP
TYVASO SOL 0.6MG/ML	6	PA, QL, SP
TYVASO START SOL 0.6MG/ML	6	PA, QL, SP
VELETRI INJ 0.5MG	6	PA, SP
VELETRI INJ 1.5MG	6	PA, SP
VENTAVIS SOL 10MCG/ML	6	PA, QL, SP
VENTAVIS SOL 20MCG/ML	6	PA, QL, SP

Drug Name	Drug Tier	Requirements/Limits
PULMONARY ARTERIAL HYPERTENSION, SOLUBLE GUANYLATE CYCLASE STIMULATORS		
ADEMPAS TAB 0.5MG	6	PA, QL, SP
ADEMPAS TAB 1.5MG	6	PA, QL, SP
ADEMPAS TAB 1MG	6	PA, QL, SP
ADEMPAS TAB 2.5MG	6	PA, QL, SP
ADEMPAS TAB 2MG	6	PA, QL, SP
VASOPRESSORS		
AKOVAZ SOL 50MG/ML	NC	
<i>dobutamine hcl inj 12.5 mg/ml</i>	1	
<i>dobutamine inj 1 mg/ml in d5w</i>	1	
<i>dobutamine inj 2 mg/ml in d5w</i>	1	
<i>dobutamine inj 4 mg/ml in d5w</i>	1	
<i>dopamine hcl inj 40 mg/ml</i>	1	
<i>dopamine hcl inj 80 mg/ml</i>	1	
<i>dopamine hcl inj 160 mg/ml</i>	1	
<i>dopamine inj 0.8 mg/ml in d5w</i>	1	
<i>dopamine inj 1.6 mg/ml in d5w</i>	1	
<i>dopamine inj 3.2 mg/ml in d5w</i>	1	
EPHEDRINE SU INJ 50MG/ML	NC	
<i>ephedrine sulfate inj 50 mg/ml</i>	1	
EPINEPHRINE INJ 1MG/ML	3	
GIAPREZA INJ 2.5MG	NC	
LEVOPHED INJ 1MG/ML	3	
<i>midodrine hcl tab 2.5 mg</i>	1	
<i>midodrine hcl tab 5 mg</i>	1	
<i>midodrine hcl tab 10 mg</i>	1	
<i>norepinephrine bitartrate iv soln 1 mg/ml</i>	1	
<i>phenylephrine hcl inj 10 mg/ml</i>	1	
VAZCULEP INJ 10MG/ML	3	
CENTRAL NERVOUS SYSTEM		
ANESTHETICS		
AMIDATE INJ 2MG/ML	3	
BREVITAL SOD INJ 2.5GM	3	
BREVITAL SOD INJ 500MG	3	
DIPRIVAN INJ	3	
DIPRIVAN INJ 200/20ML	3	
DIPRIVAN INJ 500/50ML	3	
<i>etomidate iv soln 2 mg/ml</i>	1	
FORANE SOL	3	
<i>isoflurane inhal soln</i>	1	
KETALAR INJ 10MG/ML	3	
<i>ketalar inj 50mg/ml</i>	1	
KETALAR INJ 100MG/ML	3	
<i>ketamine hcl inj 10 mg/ml</i>	1	
<i>ketamine hcl inj 50 mg/ml</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>ketamine hcl inj 100 mg/ml</i>	1	
PROPOFOL INJ 200/20ML	NC	
<i>propofol iv emul 200 mg/20ml (10 mg/ml)</i>	1	
<i>propofol iv emul 500 mg/50ml (10 mg/ml)</i>	1	
<i>propofol iv emul 1000 mg/100ml (10 mg/ml)</i>	1	
<i>propoven inj</i>	1	
<i>propoven inj 200/20ml</i>	1	
<i>propoven inj 500/50ml</i>	1	
<i>sevoflurane inhal soln</i>	1	
SUPRANE INH	3	
SUPRANE SOL	3	
<i>terrell sol</i>	1	
ULTANE SOL	3	

ANTIAXIETY, BENZODIAZEPINES

ALPRAZOLAM CON 1 MG/ML	3	
<i>alprazolam orally disintegrating tab 0.5 mg</i>	1	
<i>alprazolam orally disintegrating tab 0.25 mg</i>	1	
<i>alprazolam orally disintegrating tab 1 mg</i>	1	
<i>alprazolam orally disintegrating tab 2 mg</i>	2	
<i>alprazolam tab 0.5 mg</i>	1	
<i>alprazolam tab 0.5mg xr</i>	1	
<i>alprazolam tab 0.25 mg</i>	1	
<i>alprazolam tab 1 mg</i>	1	
<i>alprazolam tab 1mg xr</i>	1	
<i>alprazolam tab 2 mg</i>	1	
<i>alprazolam tab 2mg xr</i>	1	
<i>alprazolam tab 3mg xr</i>	1	
<i>alprazolam tab er 24hr 0.5 mg</i>	1	
<i>alprazolam tab er 24hr 1 mg</i>	1	
<i>alprazolam tab er 24hr 2 mg</i>	1	
<i>alprazolam tab er 24hr 3 mg</i>	1	
ATIVAN INJ 2MG/ML	3	
ATIVAN INJ 4MG/ML	3	
ATIVAN TAB 0.5MG	2	
ATIVAN TAB 1MG	2	
ATIVAN TAB 2MG	2	
<i>chlordiazepoxide hcl cap 5 mg</i>	1	
<i>chlordiazepoxide hcl cap 10 mg</i>	1	
<i>chlordiazepoxide hcl cap 25 mg</i>	1	
<i>clonazepam orally disintegrating tab 0.5 mg</i>	1	PV
<i>clonazepam orally disintegrating tab 0.25 mg</i>	1	PV
<i>clonazepam orally disintegrating tab 0.125 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>clonazepam orally disintegrating tab 1 mg</i>	1	PV
<i>clonazepam orally disintegrating tab 2 mg</i>	1	PV
<i>clonazepam tab 0.5 mg</i>	1	PV
<i>clonazepam tab 1 mg</i>	1	PV
<i>clonazepam tab 2 mg</i>	1	PV
<i>clorazepate dipotassium tab 3.75 mg</i>	1	
<i>clorazepate dipotassium tab 7.5 mg</i>	1	
<i>clorazepate dipotassium tab 15 mg</i>	1	
<i>diazepam con 5mg/ml</i>	1	
<i>diazepam conc 5 mg/ml</i>	1	
<i>diazepam inj 5 mg/ml</i>	2	
DIAZEPAM INJ 10MG/2ML	3	
<i>diazepam oral soln 1 mg/ml</i>	1	
<i>diazepam tab 2 mg</i>	1	
<i>diazepam tab 5 mg</i>	1	
<i>diazepam tab 10 mg</i>	1	
KLONOPIN TAB 0.5MG	3	PV
KLONOPIN TAB 1MG	3	PV
KLONOPIN TAB 2MG	3	PV
<i>lorazepam con 2mg/ml</i>	1	
<i>lorazepam conc 2 mg/ml</i>	1	
<i>lorazepam inj 2 mg/ml</i>	1	
<i>lorazepam inj 4 mg/ml</i>	1	
<i>lorazepam tab 0.5 mg</i>	1	
<i>lorazepam tab 1 mg</i>	1	
<i>lorazepam tab 2 mg</i>	1	
<i>oxazepam cap 10 mg</i>	1	
<i>oxazepam cap 15 mg</i>	1	
<i>oxazepam cap 30 mg</i>	1	
TRANXENE T TAB 7.5MG	3	
VALIUM TAB 2MG	2	
VALIUM TAB 5MG	2	
VALIUM TAB 10MG	2	
XANAX TAB 0.5MG	2	
XANAX TAB 0.25MG	2	
XANAX TAB 1MG	2	
XANAX TAB 2MG	2	
XANAX XR TAB 0.5MG	3	
XANAX XR TAB 1MG	3	
XANAX XR TAB 2MG	3	
XANAX XR TAB 3MG	3	
ANTI-ANXIETY, MISCELLANEOUS		
ANAFRANIL CAP 25MG	2	PV
ANAFRANIL CAP 50MG	2	PV
ANAFRANIL CAP 75MG	2	PV
<i>bupirone hcl tab 5 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>bupirone hcl tab 7.5 mg</i>	1	
<i>bupirone hcl tab 10 mg</i>	1	
<i>bupirone hcl tab 15 mg</i>	1	
<i>bupirone hcl tab 30 mg</i>	1	
<i>clomipramine hcl cap 25 mg</i>	1	PV
<i>clomipramine hcl cap 50 mg</i>	2	PV
<i>clomipramine hcl cap 75 mg</i>	2	PV
<i>fluvoxamine maleate cap er 24hr 100 mg</i>	2	PV
<i>fluvoxamine maleate cap er 24hr 150 mg</i>	2	PV
<i>fluvoxamine maleate tab 25 mg</i>	1	PV
<i>fluvoxamine maleate tab 50 mg</i>	1	PV
<i>fluvoxamine maleate tab 100 mg</i>	1	PV
<i>meprobamate tab 200 mg</i>	1	
<i>meprobamate tab 400 mg</i>	2	

ANTICONSULSANTS

APTIOM TAB 200MG	3	
APTIOM TAB 400MG	3	
APTIOM TAB 600MG	3	
APTIOM TAB 800MG	3	
BANZEL SUS 40MG/ML	3	PV
BANZEL TAB 200MG	3	PV
BANZEL TAB 400MG	3	PV
BRIVIACT INJ 50MG/5ML	3	PV
BRIVIACT SOL 10MG/ML	3	PV
BRIVIACT TAB 10MG	3	PV
BRIVIACT TAB 25MG	3	PV
BRIVIACT TAB 50MG	3	PV
BRIVIACT TAB 75MG	3	PV
BRIVIACT TAB 100MG	3	PV
<i>carbamazepine cap er 12hr 100 mg</i>	1	PV
<i>carbamazepine cap er 12hr 200 mg</i>	2	PV
<i>carbamazepine cap er 12hr 300 mg</i>	1	PV
<i>carbamazepine chew tab 100 mg</i>	1	PV
<i>carbamazepine susp 100 mg/5ml</i>	1	PV
<i>carbamazepine tab 200 mg</i>	1	PV
<i>carbamazepine tab er 12hr 100 mg</i>	1	PV
<i>carbamazepine tab er 12hr 200 mg</i>	2	PV
<i>carbamazepine tab er 12hr 400 mg</i>	2	PV
CARBATROL CAP 100MG	3	PV
CARBATROL CAP 200MG	3	PV
CARBATROL CAP 300MG	3	PV
CELONTIN CAP 300MG	3	PV
CEREBYX INJ 100/2ML	3	
CEREBYX INJ 500/10ML	3	
DEPACON INJ 100MG/ML	3	
DEPAKENE CAP 250MG	3	PV

Drug Name	Drug Tier	Requirements/Limits
DEPAKENE SOL 250/5ML	3	PV
DEPAKOTE ER TAB 250MG	3	PV
DEPAKOTE ER TAB 500MG	3	PV
DEPAKOTE SPR CAP 125MG	3	PV
DEPAKOTE TAB 125MG DR	3	PV
DEPAKOTE TAB 250MG DR	3	PV
DEPAKOTE TAB 500MG DR	3	PV
DIASTAT ACDL GEL 5-10MG	3	
DIASTAT ACDL GEL 12.5-20	3	
DIASTAT PED GEL 2.5M GEL	3	
<i>diazepam rectal gel delivery system 2.5 mg</i>	2	
<i>diazepam rectal gel delivery system 10 mg</i>	2	
<i>diazepam rectal gel delivery system 20 mg</i>	2	
DILANTIN CAP 30MG	3	PV
DILANTIN CAP 100MG	3	PV
DILANTIN CHW 50MG	3	PV
DILANTIN-125 SUS 125/5ML	3	PV
<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	1	PV
<i>divalproex sodium tab delayed release 125 mg</i>	1	PV
<i>divalproex sodium tab delayed release 250 mg</i>	1	PV
<i>divalproex sodium tab delayed release 500 mg</i>	1	PV
<i>divalproex sodium tab er 24 hr 250 mg</i>	1	PV
<i>divalproex sodium tab er 24 hr 500 mg</i>	1	PV
<i>epitol tab 200mg</i>	1	PV
<i>ethosuximide cap 250 mg</i>	2	PV
<i>ethosuximide soln 250 mg/5ml</i>	1	PV
FANATREX SUS 25MG/ML	NC	
<i>felbamate susp 600 mg/5ml</i>	1	PV
<i>felbamate tab 400 mg</i>	2	PV
<i>felbamate tab 600 mg</i>	2	PV
FELBATOL SUS 600/5ML	3	PV
FELBATOL TAB 400MG	3	PV
FELBATOL TAB 600MG	3	PV
<i>fosphenytoin sodium inj 100 mg/2ml (phenytoin equiv)</i>	1	
<i>fosphenytoin sodium inj 500 mg/10ml (phenytoin equiv)</i>	1	
FYCOMPA SUS 0.5MG/ML	2	PV
FYCOMPA TAB 2MG	2	PV
FYCOMPA TAB 4MG	2	PV
FYCOMPA TAB 6MG	2	PV
FYCOMPA TAB 8MG	2	PV

Drug Name	Drug Tier	Requirements/Limits
FYCOMPA TAB 10MG	2	PV
FYCOMPA TAB 12MG	2	PV
<i>gabapentin cap 100 mg</i>	1	
<i>gabapentin cap 300 mg</i>	1	
<i>gabapentin cap 400 mg</i>	1	
<i>gabapentin oral soln 250 mg/5ml</i>	1	
<i>gabapentin tab 600 mg</i>	1	
<i>gabapentin tab 800 mg</i>	1	
GABITRIL TAB 2MG	3	PV
GABITRIL TAB 4MG	3	PV
GABITRIL TAB 12MG	3	PV
GABITRIL TAB 16MG	2	PV
KEPPRA INJ 500/5ML	3	
KEPPRA SOL 100MG/ML	3	PV
KEPPRA TAB 250MG	3	PV
KEPPRA TAB 500MG	3	PV
KEPPRA TAB 750MG	3	PV
KEPPRA TAB 1000MG	3	PV
KEPPRA XR TAB 500MG	3	PV
KEPPRA XR TAB 750MG	3	PV
LAMICTAL CHW 5MG	3	PV
LAMICTAL CHW 25MG	3	PV
LAMICTAL KIT START 35	3	PV
LAMICTAL KIT START 49	3	PV
LAMICTAL KIT START 98	3	PV
LAMICTAL ODT KIT	3	PV
LAMICTAL ODT TAB 25MG	3	PV
LAMICTAL ODT TAB 50MG	3	PV
LAMICTAL ODT TAB 100MG	3	PV
LAMICTAL ODT TAB 200MG	3	PV
LAMICTAL TAB 25MG	3	PV
LAMICTAL TAB 100MG	3	PV
LAMICTAL TAB 150MG	3	PV
LAMICTAL TAB 200MG	3	PV
LAMICTAL XR KIT	3	PV
LAMICTAL XR TAB 25MG	3	PV
LAMICTAL XR TAB 50MG	3	PV
LAMICTAL XR TAB 100MG	3	PV
LAMICTAL XR TAB 200MG	3	PV
LAMICTAL XR TAB 250MG	3	PV
LAMICTAL XR TAB 300MG	3	PV
<i>lamotrigine orally disintegrating tab 25 mg</i>	2	PV
<i>lamotrigine orally disintegrating tab 50 mg</i>	2	PV
<i>lamotrigine orally disintegrating tab 100 mg</i>	2	PV
<i>lamotrigine orally disintegrating tab 200 mg</i>	2	PV

Drug Name	Drug Tier	Requirements/Limits
<i>lamotrigine tab 25 mg</i>	1	PV
<i>lamotrigine tab 25 mg (35) starter kit</i>	2	
<i>lamotrigine tab 25 mg (42) & 100 mg (7) starter kit</i>	2	
<i>lamotrigine tab 100 mg</i>	1	PV
<i>lamotrigine tab 150 mg</i>	1	PV
<i>lamotrigine tab 200 mg</i>	1	PV
<i>lamotrigine tab chewable dispersible 5 mg</i>	1	PV
<i>lamotrigine tab chewable dispersible 25 mg</i>	1	PV
<i>lamotrigine tab er 24hr 25 mg</i>	2	PV
<i>lamotrigine tab er 24hr 50 mg</i>	2	PV
<i>lamotrigine tab er 24hr 100 mg</i>	2	PV
<i>lamotrigine tab er 24hr 200 mg</i>	2	PV
<i>lamotrigine tab er 24hr 250 mg</i>	2	PV
<i>lamotrigine tab er 24hr 300 mg</i>	2	PV
LEVETIRACETA INJ 5MG/ML	3	
LEVETIRACETA INJ 10MG/ML	3	
LEVETIRACETA INJ 15MG/ML	3	
<i>levetiracetam in sodium chloride iv soln 500 mg/100ml</i>	1	
<i>levetiracetam in sodium chloride iv soln 1000 mg/100ml</i>	1	
<i>levetiracetam in sodium chloride iv soln 1500 mg/100ml</i>	1	
<i>levetiracetam inj 500 mg/5ml (100 mg/ml)</i>	2	
<i>levetiracetam oral soln 100 mg/ml</i>	1	PV
<i>levetiracetam tab 250 mg</i>	1	PV
<i>levetiracetam tab 500 mg</i>	1	PV
<i>levetiracetam tab 750 mg</i>	1	PV
<i>levetiracetam tab 1000 mg</i>	1	PV
<i>levetiracetam tab er 24hr 500 mg</i>	1	PV
<i>levetiracetam tab er 24hr 750 mg</i>	1	PV
MYSOLINE TAB 50MG	3	PV
MYSOLINE TAB 250MG	3	PV
NEURONTIN CAP 100MG	3	
NEURONTIN CAP 300MG	3	
NEURONTIN CAP 400MG	3	
NEURONTIN SOL 250/5ML	3	
NEURONTIN TAB 600MG	3	
NEURONTIN TAB 800MG	3	
ONFI SUS 2.5MG/ML	3	PV
ONFI TAB 10MG	3	PV
ONFI TAB 20MG	3	PV
<i>oxcarbazepine susp 300 mg/5ml (60 mg/ml)</i>	2	PV
<i>oxcarbazepine tab 150 mg</i>	1	PV
<i>oxcarbazepine tab 300 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>oxcarbazepine tab 600 mg</i>	1	PV
OXTELLAR XR TAB 150MG	2	PV
OXTELLAR XR TAB 300MG	2	PV
OXTELLAR XR TAB 600MG	2	PV
PEGANONE TAB 250MG	3	
PHENOBARB INJ 65MG/ML	3	
<i>phenobarbital elixir 20 mg/5ml</i>	1	PV
<i>phenobarbital sodium inj 130 mg/ml</i>	1	
<i>phenobarbital tab 15 mg</i>	1	PV
<i>phenobarbital tab 16.2 mg</i>	1	PV
<i>phenobarbital tab 30 mg</i>	1	PV
<i>phenobarbital tab 32.4 mg</i>	1	PV
<i>phenobarbital tab 60 mg</i>	1	PV
<i>phenobarbital tab 64.8 mg</i>	1	PV
<i>phenobarbital tab 97.2 mg</i>	1	PV
<i>phenobarbital tab 100 mg</i>	1	PV
PHENYTEK CAP 200MG	3	PV
PHENYTEK CAP 300MG	3	PV
<i>phenytoin chew tab 50 mg</i>	1	PV
<i>phenytoin chw 50mg</i>	1	PV
<i>phenytoin sodium extended cap 100 mg</i>	1	PV
<i>phenytoin sodium extended cap 200 mg</i>	1	PV
<i>phenytoin sodium extended cap 300 mg</i>	1	PV
<i>phenytoin sodium inj 50 mg/ml</i>	1	
<i>phenytoin susp 125 mg/5ml</i>	1	PV
<i>primidone tab 50 mg</i>	1	PV
<i>primidone tab 250 mg</i>	1	PV
QUDEXY XR CAP 25/24HR	3	
QUDEXY XR CAP 50/24HR	3	
QUDEXY XR CAP 100/24HR	3	
QUDEXY XR CAP 150/24HR	3	
QUDEXY XR CAP 200/24HR	3	
<i>roweepra tab 500mg</i>	1	PV
SABRIL POW 500MG	6	PA, PV, QL, SP
SABRIL TAB 500MG	6	PA, PV, QL, SP
SPRITAM TAB 250MG	NC	
SPRITAM TAB 500MG	NC	
SPRITAM TAB 750MG	NC	
SPRITAM TAB 1000MG	NC	
<i>subvenite kit start 49</i>	2	
TEGRETOL SUS 100/5ML	3	PV
TEGRETOL TAB 200MG	3	PV
TEGRETOL-XR TAB 100MG	3	PV
TEGRETOL-XR TAB 200MG	3	PV
TEGRETOL-XR TAB 400MG	3	PV
<i>tiagabine hcl tab 2 mg</i>	2	PV
<i>tiagabine hcl tab 4 mg</i>	2	PV

Drug Name	Drug Tier	Requirements/Limits
<i>tiagabine hcl tab 12 mg</i>	2	
<i>tiagabine hcl tab 16 mg</i>	1	
TOPAMAX SPR CAP 15MG	3	PV
TOPAMAX SPR CAP 25MG	3	PV
TOPAMAX TAB 25MG	3	PV
TOPAMAX TAB 50MG	3	PV
TOPAMAX TAB 100MG	3	PV
TOPAMAX TAB 200MG	3	PV
<i>topiramate cap er 24hr sprinkle 25 mg</i>	2	
<i>topiramate cap er 24hr sprinkle 50 mg</i>	2	
<i>topiramate cap er 24hr sprinkle 100 mg</i>	2	
<i>topiramate cap er 24hr sprinkle 150 mg</i>	2	
<i>topiramate cap er 24hr sprinkle 200 mg</i>	2	
<i>topiramate sprinkle cap 15 mg</i>	1	PV
<i>topiramate sprinkle cap 25 mg</i>	1	PV
<i>topiramate tab 25 mg</i>	1	PV
<i>topiramate tab 50 mg</i>	1	PV
<i>topiramate tab 100 mg</i>	1	PV
<i>topiramate tab 200 mg</i>	1	PV
TRILEPTAL SUS 300MG/5M	3	PV
TRILEPTAL TAB 150MG	3	PV
TRILEPTAL TAB 300MG	3	PV
TRILEPTAL TAB 600MG	3	PV
TROKENDI XR CAP 25MG	2	PV
TROKENDI XR CAP 50MG	2	PV
TROKENDI XR CAP 100MG	2	PV
TROKENDI XR CAP 200MG	2	PV
<i>valproate sodium inj 100 mg/ml</i>	2	
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i>	1	PV
<i>valproic acid cap 250 mg</i>	1	PV
VIMPAT INJ 200MG/20	2	PV
VIMPAT SOL 10MG/ML	2	PV
VIMPAT TAB 50MG	2	PV
VIMPAT TAB 100MG	2	PV
VIMPAT TAB 150MG	2	PV
VIMPAT TAB 200MG	2	PV
ZARONTIN CAP 250MG	3	PV
ZARONTIN SOL 250/5ML	3	PV
ZONEGRAN CAP 25MG	NC	
ZONEGRAN CAP 100MG	NC	
<i>zonisamide cap 25 mg</i>	1	PV
<i>zonisamide cap 50 mg</i>	1	PV
<i>zonisamide cap 100 mg</i>	1	PV
ANTIDEMENTIA		
ARICEPT TAB 5MG	3	
ARICEPT TAB 10MG	3	

Drug Name	Drug Tier	Requirements/Limits
ARICEPT TAB 23MG	3	
<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>	1	
<i>donepezil hydrochloride orally disintegrating tab 10 mg</i>	1	
<i>donepezil hydrochloride tab 5 mg</i>	1	
<i>donepezil hydrochloride tab 10 mg</i>	1	
<i>donepezil hydrochloride tab 23 mg</i>	2	
EXELON DIS 4.6MG/24	3	
EXELON DIS 9.5MG/24	3	
EXELON DIS 13.3/24	3	
<i>galantamine hydrobromide cap er 24hr 8 mg</i>	1	
<i>galantamine hydrobromide cap er 24hr 16 mg</i>	1	
<i>galantamine hydrobromide cap er 24hr 24 mg</i>	1	
<i>galantamine hydrobromide oral soln 4 mg/ml</i>	2	
<i>galantamine hydrobromide tab 4 mg</i>	1	
<i>galantamine hydrobromide tab 8 mg</i>	1	
<i>galantamine hydrobromide tab 12 mg</i>	1	
<i>memantine hcl cap er 24hr 7 mg</i>	1	
<i>memantine hcl cap er 24hr 14 mg</i>	2	
<i>memantine hcl cap er 24hr 21 mg</i>	2	
<i>memantine hcl cap er 24hr 28 mg</i>	2	
<i>memantine hcl oral solution 2 mg/ml</i>	2	
<i>memantine hcl tab 5 mg</i>	1	
<i>memantine hcl tab 5 mg (28) & 10 mg (21) titration pak</i>	2	
<i>memantine hcl tab 10 mg</i>	1	
NAMENDA TAB 5-10MG	3	
NAMENDA TAB 5MG	3	
NAMENDA TAB 10MG	3	
NAMENDA XR CAP 7MG	3	
NAMENDA XR CAP 14MG	3	
NAMENDA XR CAP 21MG	3	
NAMENDA XR CAP 28MG	3	
NAMENDA XR CAP TITRATIO	3	
NAMZARIC CAP	2	
NAMZARIC CAP 7-10MG	2	
NAMZARIC CAP 14-10MG	2	
NAMZARIC CAP 21-10MG	2	
NAMZARIC CAP 28-10MG	2	
RAZADYNE ER CAP 8MG	3	
RAZADYNE ER CAP 16MG	3	
RAZADYNE ER CAP 24MG	3	

Drug Name	Drug Tier	Requirements/Limits
RAZADYNE TAB 4MG	3	
RAZADYNE TAB 8MG	3	
RAZADYNE TAB 12MG	3	
<i>rivastigmine tartrate cap 1.5 mg</i>	1	
<i>rivastigmine tartrate cap 3 mg</i>	1	
<i>rivastigmine tartrate cap 4.5 mg</i>	1	
<i>rivastigmine tartrate cap 6 mg</i>	1	
<i>rivastigmine td patch 24hr 4.6 mg/24hr</i>	2	
<i>rivastigmine td patch 24hr 9.5 mg/24hr</i>	2	
<i>rivastigmine td patch 24hr 13.3 mg/24hr</i>	2	

ANTIDEPRESSANTS, MISCELLANEOUS

ALENZIN TAB 174MG	3	PV
ALENZIN TAB 348MG	3	PV
ALENZIN TAB 522MG	3	PV
<i>bupropion hcl tab 75 mg</i>	1	PV
<i>bupropion hcl tab 100 mg</i>	1	PV
<i>bupropion hcl tab er 12hr 100 mg</i>	1	PV
<i>bupropion hcl tab er 12hr 150 mg</i>	1	PV
<i>bupropion hcl tab er 12hr 200 mg</i>	1	PV
<i>bupropion hcl tab er 24hr 150 mg</i>	1	PV
<i>bupropion hcl tab er 24hr 300 mg</i>	1	PV
<i>chlordiazepoxide-amitriptyline tab 5-12.5 mg</i>	1	
<i>chlordiazepoxide-amitriptyline tab 10-25 mg</i>	1	
FORFIVO XL TAB 450MG	3	PV
<i>maprotiline hcl tab 25 mg</i>	1	PV
<i>maprotiline hcl tab 50 mg</i>	2	PV
<i>maprotiline hcl tab 75 mg</i>	1	PV
<i>mirtazapine orally disintegrating tab 15 mg</i>	1	PV
<i>mirtazapine orally disintegrating tab 30 mg</i>	1	PV
<i>mirtazapine orally disintegrating tab 45 mg</i>	1	PV
<i>mirtazapine tab 7.5 mg</i>	1	PV
<i>mirtazapine tab 15 mg</i>	1	PV
<i>mirtazapine tab 30 mg</i>	1	PV
<i>mirtazapine tab 45 mg</i>	1	PV
<i>nefazodone hcl tab 50 mg</i>	1	PV
<i>nefazodone hcl tab 100 mg</i>	2	PV
<i>nefazodone hcl tab 150 mg</i>	2	PV
<i>nefazodone hcl tab 200 mg</i>	1	PV
<i>nefazodone hcl tab 250 mg</i>	1	PV
REMERON SLTB TAB 15MG	3	PV
REMERON SLTB TAB 30MG	3	PV
REMERON SLTB TAB 45MG	3	PV
REMERON TAB 15MG	3	PV
REMERON TAB 30MG	3	PV
REMERON TAB 45MG	3	PV

Drug Name	Drug Tier	Requirements/Limits
<i>trazodone hcl tab 50 mg</i>	1	PV
<i>trazodone hcl tab 100 mg</i>	1	PV
<i>trazodone hcl tab 150 mg</i>	1	PV
<i>trazodone hcl tab 300 mg</i>	1	PV
WELLBUTRIN TAB 100MG SR	3	PV
WELLBUTRIN TAB 150MG SR	3	PV
WELLBUTRIN TAB 200MG SR	3	PV
WELLBUTRIN TAB XL 150MG	3	PV
WELLBUTRIN TAB XL 300MG	3	PV
ANTIDEPRESSANTS, MONOAMINE OXIDASE INHIBITORS (MAOIs)		
EMSAM DIS 6MG/24HR	3	PV
EMSAM DIS 9MG/24HR	3	PV
EMSAM DIS 12MG/24H	3	PV
MARPLAN TAB 10MG	3	PV
NARDIL TAB 15MG	2	PV
PARNATE TAB 10MG	2	PV
<i>phenelzine sulfate tab 15 mg</i>	1	PV
<i>tranylcypromine sulfate tab 10 mg</i>	2	PV
ANTIDEPRESSANTS, SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIs)		
CELEXA TAB 10MG	3	PV
CELEXA TAB 20MG	3	PV
CELEXA TAB 40MG	3	PV
<i>citalopram hydrobromide oral soln 10 mg/5ml</i>	1	PV
<i>citalopram hydrobromide tab 10 mg (base equiv)</i>	1	PV
<i>citalopram hydrobromide tab 20 mg (base equiv)</i>	1	PV
<i>citalopram hydrobromide tab 40 mg (base equiv)</i>	1	PV
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	1	PV
<i>escitalopram oxalate tab 5 mg (base equiv)</i>	1	PV
<i>escitalopram oxalate tab 10 mg (base equiv)</i>	1	PV
<i>escitalopram oxalate tab 20 mg (base equiv)</i>	1	PV
<i>fluoxetine hcl (pmd) cap 10 mg</i>	2	PV
<i>fluoxetine hcl (pmd) cap 20 mg</i>	2	PV
<i>fluoxetine hcl (pmd) tab 10 mg</i>	2	PV
<i>fluoxetine hcl (pmd) tab 20 mg</i>	2	PV
<i>fluoxetine hcl cap 10 mg</i>	1	PV
<i>fluoxetine hcl cap 20 mg</i>	1	PV
<i>fluoxetine hcl cap 40 mg</i>	1	PV
<i>fluoxetine hcl cap delayed release 90 mg</i>	2	PV

Drug Name	Drug Tier	Requirements/Limits
<i>fluoxetine hcl solution 20 mg/5ml</i>	1	PV
<i>fluoxetine hcl tab 10 mg</i>	1	PV
<i>fluoxetine hcl tab 20 mg</i>	1	PV
FLUOXETINE TAB 60MG	3	PV
LEXAPRO TAB 5MG	3	PV
LEXAPRO TAB 10MG	3	PV
LEXAPRO TAB 20MG	3	PV
<i>paroxetine hcl tab 10 mg</i>	1	PV
<i>paroxetine hcl tab 20 mg</i>	1	PV
<i>paroxetine hcl tab 30 mg</i>	1	PV
<i>paroxetine hcl tab 40 mg</i>	1	PV
<i>paroxetine hcl tab er 24hr 12.5 mg</i>	1	PV
<i>paroxetine hcl tab er 24hr 25 mg</i>	1	PV
<i>paroxetine hcl tab er 24hr 37.5 mg</i>	1	PV
PAXIL CR TAB 12.5MG	3	PV
PAXIL CR TAB 25MG	3	PV
PAXIL CR TAB 37.5MG	3	PV
PAXIL SUS 10MG/5ML	3	PV
PAXIL TAB 10MG	3	PV
PAXIL TAB 20MG	3	PV
PAXIL TAB 30MG	3	PV
PAXIL TAB 40MG	3	PV
PEXEVA TAB 10MG	3	PV, ST
PEXEVA TAB 20MG	3	PV, ST
PEXEVA TAB 30MG	3	PV, ST
PEXEVA TAB 40MG	3	PV, ST
PROZAC CAP 10MG	3	PV
PROZAC CAP 20MG	3	PV
PROZAC CAP 40MG	3	PV
SARAFEM TAB 10MG	3	
SARAFEM TAB 20MG	3	
<i>sertraline hcl oral concentrate for solution 20 mg/ml</i>	1	PV
<i>sertraline hcl tab 25 mg</i>	1	PV
<i>sertraline hcl tab 50 mg</i>	1	PV
<i>sertraline hcl tab 100 mg</i>	1	PV
TRINTELLIX TAB 5MG	2	PV
TRINTELLIX TAB 10MG	2	PV
TRINTELLIX TAB 20MG	2	PV
VIIBRYD KIT STARTER	2	PV
VIIBRYD TAB 10MG	2	PV
VIIBRYD TAB 20MG	2	PV
VIIBRYD TAB 40MG	2	PV
ZOLOFT CON 20MG/ML	3	PV
ZOLOFT TAB 25MG	3	PV
ZOLOFT TAB 50MG	3	PV
ZOLOFT TAB 100MG	3	PV

Drug Name	Drug Tier	Requirements/Limits
ANTIDEPRESSANTS, SEROTONIN NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIs)		
CYMBALTA CAP 20MG	NC	
CYMBALTA CAP 30MG	NC	
CYMBALTA CAP 60MG	NC	
DESVENLAFAX TAB 50MG ER	3	PV
DESVENLAFAX TAB 100MG ER	3	PV
<i>desvenlafaxine succinate tab er 24hr 25 mg (base equiv)</i>	2	PV
<i>desvenlafaxine succinate tab er 24hr 50 mg (base equiv)</i>	1	PV
<i>desvenlafaxine succinate tab er 24hr 100 mg (base equiv)</i>	1	PV
<i>desvenlafaxine tab er 24hr 50 mg</i>	2	PV
<i>desvenlafaxine tab er 24hr 100 mg</i>	2	PV
<i>duloxetine hcl enteric coated pellets cap 201 mg (base eq)</i>		PV
<i>duloxetine hcl enteric coated pellets cap 301 mg (base eq)</i>		PV
<i>duloxetine hcl enteric coated pellets cap 402 mg (base eq)</i>		PV
<i>duloxetine hcl enteric coated pellets cap 601 mg (base eq)</i>		PV
EFFEXOR XR CAP 37.5MG	NC	
EFFEXOR XR CAP 75MG	NC	
EFFEXOR XR CAP 150MG	NC	
FETZIMA CAP 20MG	3	PV
FETZIMA CAP 40MG	3	PV
FETZIMA CAP 80MG	3	PV
FETZIMA CAP 120MG	3	PV
FETZIMA CAP TITRATIO	3	PV
KHEDEZLA TAB 50MG ER	3	
KHEDEZLA TAB 100MG ER	3	
PRISTIQ TAB 25MG	3	PV
PRISTIQ TAB 50MG	3	PV
PRISTIQ TAB 100MG	3	PV
<i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)</i>	1	
<i>venlafaxine hcl cap er 24hr 75 mg (base equivalent)</i>	1	
<i>venlafaxine hcl cap er 24hr 150 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab 25 mg</i>	1	PV
<i>venlafaxine hcl tab 37.5 mg</i>	1	PV
<i>venlafaxine hcl tab 50 mg</i>	1	PV
<i>venlafaxine hcl tab 75 mg</i>	1	PV
<i>venlafaxine hcl tab 100 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>venlafaxine hcl tab er 24hr 37.5 mg (base equivalent)</i>	NC	
<i>venlafaxine hcl tab er 24hr 75 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab er 24hr 150 mg (base equivalent)</i>	NC	
VENLAFAXINE HCL TAB ER 24HR 225 MG (BASE EQUIVALENT)	2	PV
VENLAFAXINE TAB 37.5 ER	NC	
VENLAFAXINE TAB 75MG ER	NC	
VENLAFAXINE TAB 150MG ER	NC	

ANTIDEPRESSANTS, TRICYCLIC ANTIDEPRESSANTS (TCAs)

<i>amitriptyline hcl tab 10 mg</i>	1	PV
<i>amitriptyline hcl tab 25 mg</i>	1	PV
<i>amitriptyline hcl tab 50 mg</i>	1	PV
<i>amitriptyline hcl tab 75 mg</i>	1	PV
<i>amitriptyline hcl tab 100 mg</i>	1	PV
<i>amitriptyline hcl tab 150 mg</i>	1	PV
<i>amoxapine tab 25 mg</i>	1	PV
<i>amoxapine tab 50 mg</i>	1	PV
<i>amoxapine tab 100 mg</i>	1	PV
<i>amoxapine tab 150 mg</i>	1	PV
<i>desipramine hcl tab 10 mg</i>	1	PV
<i>desipramine hcl tab 25 mg</i>	1	PV
<i>desipramine hcl tab 50 mg</i>	1	PV
<i>desipramine hcl tab 75 mg</i>	1	PV
<i>desipramine hcl tab 100 mg</i>	2	PV
<i>desipramine hcl tab 150 mg</i>	2	PV
<i>doxepin hcl cap 10 mg</i>	1	PV
<i>doxepin hcl cap 25 mg</i>	1	PV
<i>doxepin hcl cap 50 mg</i>	1	PV
<i>doxepin hcl cap 75 mg</i>	1	PV
<i>doxepin hcl cap 100 mg</i>	1	PV
<i>doxepin hcl cap 150 mg</i>	1	PV
<i>doxepin hcl conc 10 mg/ml</i>	1	PV
<i>imipramine hcl tab 10 mg</i>	1	PV
<i>imipramine hcl tab 25 mg</i>	1	PV
<i>imipramine hcl tab 50 mg</i>	1	PV
<i>imipramine pamoate cap 75 mg</i>	2	PV
<i>imipramine pamoate cap 100 mg</i>	2	PV
<i>imipramine pamoate cap 125 mg</i>	2	PV
<i>imipramine pamoate cap 150 mg</i>	2	PV
NORPRAMIN TAB 10MG	2	PV
NORPRAMIN TAB 25MG	2	PV
<i>nortriptyline hcl cap 10 mg</i>	1	PV
<i>nortriptyline hcl cap 25 mg</i>	1	PV
<i>nortriptyline hcl cap 50 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>nortriptyline hcl cap 75 mg</i>	1	PV
<i>nortriptyline hcl soln 10 mg/5ml</i>	1	PV
PAMELOR CAP 10MG	2	PV
PAMELOR CAP 25MG	2	PV
PAMELOR CAP 50MG	2	PV
PAMELOR CAP 75MG	2	PV
<i>protriptyline hcl tab 5 mg</i>	1	PV
<i>protriptyline hcl tab 10 mg</i>	1	PV
SURMONTIL CAP 25MG	3	PV
SURMONTIL CAP 50MG	3	PV
SURMONTIL CAP 100MG	3	PV
TOFRANIL TAB 10MG	2	PV
TOFRANIL TAB 25MG	2	PV
TOFRANIL TAB 50MG	2	PV
<i>trimipramine maleate cap 25 mg</i>	1	PV
<i>trimipramine maleate cap 50 mg</i>	1	PV
<i>trimipramine maleate cap 100 mg</i>	2	PV

ANTIPARKINSONIAN AGENTS

<i>amantadine hcl cap 100 mg</i>	1	
<i>amantadine hcl syrup 50 mg/5ml</i>	1	
<i>amantadine hcl tab 100 mg</i>	1	
APOKYN INJ 10MG/ML	6	PA, SP
AZILECT TAB 0.5MG	3	
AZILECT TAB 1MG	3	
<i>benztropine mesylate inj 1 mg/ml</i>	1	
<i>benztropine mesylate tab 0.5 mg</i>	1	
<i>benztropine mesylate tab 1 mg</i>	1	
<i>benztropine mesylate tab 2 mg</i>	1	
<i>bromocriptine mesylate cap 5 mg (base equivalent)</i>	2	
<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	1	
<i>carbidopa & levodopa orally disintegrating tab 10-100 mg</i>	1	
<i>carbidopa & levodopa orally disintegrating tab 25-100 mg</i>	1	
<i>carbidopa & levodopa orally disintegrating tab 25-250 mg</i>	2	
<i>carbidopa & levodopa tab 10-100 mg</i>	1	
<i>carbidopa & levodopa tab 25-100 mg</i>	1	
<i>carbidopa & levodopa tab 25-250 mg</i>	1	
<i>carbidopa & levodopa tab er 25-100 mg</i>	1	
<i>carbidopa & levodopa tab er 50-200 mg</i>	1	
<i>carbidopa tab 25 mg</i>	2	
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	2	
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	2	
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	2	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	2	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	2	
COGENTIN INJ 1MG/ML	3	
COMTAN TAB 200MG	3	
DUOPA SUS 4.63-20	6	SP
ELDEPRYL CAP 5MG	3	
<i>entacapone tab 200 mg</i>	2	
GOCOVRI CAP 68.5MG	NC	
GOCOVRI CAP 137MG	NC	
LODOSYN TAB 25MG	3	
MIRAPEX ER TAB 0.75MG	3	
MIRAPEX ER TAB 0.375MG	3	
MIRAPEX ER TAB 1.5MG	3	
MIRAPEX ER TAB 2.25MG	3	
MIRAPEX ER TAB 3.75MG	3	
MIRAPEX ER TAB 3MG	3	
MIRAPEX ER TAB 4.5MG	3	
MIRAPEX TAB 0.5MG	3	
MIRAPEX TAB 0.25MG	3	
MIRAPEX TAB 0.75MG	3	
MIRAPEX TAB 0.125MG	3	
MIRAPEX TAB 1.5MG	3	
MIRAPEX TAB 1MG	3	
NEUPRO DIS 1MG/24HR	2	
NEUPRO DIS 2MG/24HR	2	
NEUPRO DIS 3MG/24HR	2	
NEUPRO DIS 4MG/24HR	2	
NEUPRO DIS 6MG/24HR	2	
NEUPRO DIS 8MG/24HR	2	
OSMOLEX ER TAB 129MG	NC	
OSMOLEX ER TAB 193MG	NC	
OSMOLEX ER TAB 258MG	NC	
PARLODEL CAP 5MG	3	
PARLODEL TAB 2.5MG	3	
<i>pramipexole dihydrochloride tab 0.5 mg</i>	1	
<i>pramipexole dihydrochloride tab 0.25 mg</i>	1	
<i>pramipexole dihydrochloride tab 0.75 mg</i>	1	
<i>pramipexole dihydrochloride tab 0.125 mg</i>	1	
<i>pramipexole dihydrochloride tab 1 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>pramipexole dihydrochloride tab 1.5 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 0.75 mg</i>	2	
<i>pramipexole dihydrochloride tab er 24hr 0.375 mg</i>	2	
<i>pramipexole dihydrochloride tab er 24hr 1.5 mg</i>	2	
<i>pramipexole dihydrochloride tab er 24hr 2.25 mg</i>	2	
<i>pramipexole dihydrochloride tab er 24hr 3 mg</i>	2	
<i>pramipexole dihydrochloride tab er 24hr 3.75 mg</i>	2	
<i>pramipexole dihydrochloride tab er 24hr 4.5 mg</i>	2	
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	2	
<i>rasagiline mesylate tab 1 mg (base equiv)</i>	2	
REQUIP TAB 0.5MG	3	
REQUIP TAB 0.25MG	3	
REQUIP TAB 1MG	3	
REQUIP TAB 2MG	3	
REQUIP TAB 3MG	3	
REQUIP TAB 4MG	3	
REQUIP TAB 5MG	3	
REQUIP XL TAB 2MG	3	
REQUIP XL TAB 4MG	3	
REQUIP XL TAB 6MG	3	
REQUIP XL TAB 8MG	3	
REQUIP XL TAB 12MG	3	
<i>ropinirole hydrochloride tab 0.5 mg</i>	1	
<i>ropinirole hydrochloride tab 0.25 mg</i>	1	
<i>ropinirole hydrochloride tab 1 mg</i>	1	
<i>ropinirole hydrochloride tab 2 mg</i>	1	
<i>ropinirole hydrochloride tab 3 mg</i>	1	
<i>ropinirole hydrochloride tab 4 mg</i>	1	
<i>ropinirole hydrochloride tab 5 mg</i>	1	
<i>ropinirole hydrochloride tab er 24hr 2 mg (base equivalent)</i>	1	
<i>ropinirole hydrochloride tab er 24hr 4 mg (base equivalent)</i>	1	
<i>ropinirole hydrochloride tab er 24hr 6 mg (base equivalent)</i>	1	
<i>ropinirole hydrochloride tab er 24hr 8 mg (base equivalent)</i>	2	
<i>ropinirole hydrochloride tab er 24hr 12 mg (base equivalent)</i>	2	
RYTARY CAP 95MG	3	

Drug Name	Drug Tier	Requirements/Limits
RYTARY CAP 145MG	3	
RYTARY CAP 195MG	3	
RYTARY CAP 245MG	3	
<i>selegiline hcl cap 5 mg</i>	1	
<i>selegiline hcl tab 5 mg</i>	1	
SINEMET CR TAB 25-100MG	3	
SINEMET CR TAB 50-200MG	3	
SINEMET TAB 10-100MG	3	
SINEMET TAB 25-100MG	3	
SINEMET TAB 25-250MG	3	
STALEVO 50 TAB	3	
STALEVO 75 TAB	3	
STALEVO 100 TAB	3	
STALEVO 125 TAB	3	
STALEVO 150 TAB	3	
STALEVO 200 TAB	3	
TASMAR TAB 100MG	3	
<i>tolcapone tab 100 mg</i>	1	
<i>trihexyphenidyl hcl elixir 0.4 mg/ml</i>	1	
<i>trihexyphenidyl hcl tab 2 mg</i>	1	
<i>trihexyphenidyl hcl tab 5 mg</i>	1	
XADAGO TAB 50MG	NC	
XADAGO TAB 100MG	NC	
ZELAPAR TAB 1.25MG	3	

ANTIPSYCHOTICS, ATYPICALS

ABILIFY MAIN INJ 300MG	2	
ABILIFY MAIN INJ 400MG	2	
ABILIFY TAB 2MG	NC	
ABILIFY TAB 5MG	NC	
ABILIFY TAB 10MG	NC	
ABILIFY TAB 15MG	NC	
ABILIFY TAB 20MG	NC	
ABILIFY TAB 30MG	NC	
<i>aripiprazole oral solution 1 mg/ml</i>	2	PV
<i>aripiprazole orally disintegrating tab 10 mg</i>	2	PV
<i>aripiprazole orally disintegrating tab 15 mg</i>	1	PV
<i>aripiprazole tab 2 mg</i>	2	PV
<i>aripiprazole tab 5 mg</i>	2	PV
<i>aripiprazole tab 10 mg</i>	2	PV
<i>aripiprazole tab 15 mg</i>	2	PV
<i>aripiprazole tab 20 mg</i>	2	PV
<i>aripiprazole tab 30 mg</i>	2	PV
ARISTADA INJ 441MG/1.	2	PV
ARISTADA INJ 662MG/2	2	PV
ARISTADA INJ 882MG/3	2	PV
ARISTADA INJ INITIO	NC	

Drug Name	Drug Tier	Requirements/Limits
<i>clozapine orally disintegrating tab 12.5 mg</i>	1	PV
<i>clozapine orally disintegrating tab 25 mg</i>	1	PV
<i>clozapine orally disintegrating tab 100 mg</i>	2	PV
<i>clozapine orally disintegrating tab 150 mg</i>	1	PV
<i>clozapine orally disintegrating tab 200 mg</i>	2	PV
<i>clozapine tab 25 mg</i>	1	PV
<i>clozapine tab 50 mg</i>	1	PV
<i>clozapine tab 100 mg</i>	1	PV
<i>clozapine tab 200 mg</i>	2	PV
CLOZARIL TAB 25MG	3	PV
CLOZARIL TAB 100MG	3	PV
FANAPT PAK	NC	
FANAPT TAB 1MG	NC	
FANAPT TAB 2MG	NC	
FANAPT TAB 4MG	NC	
FANAPT TAB 6MG	NC	
FANAPT TAB 8MG	NC	
FANAPT TAB 10MG	NC	
FANAPT TAB 12MG	NC	
FAZACLO TAB 12.5 ODT	3	PV
FAZACLO TAB 25MG ODT	3	PV
FAZACLO TAB 100 ODT	3	PV
FAZACLO TAB 150 ODT	3	PV
FAZACLO TAB 200 ODT	3	PV
GEODON CAP 20MG	3	PV
GEODON CAP 40MG	3	PV
GEODON CAP 60MG	3	PV
GEODON CAP 80MG	3	PV
GEODON INJ 20MG	3	
INVEGA SUST INJ 39/0.25	3	PV
INVEGA SUST INJ 78/0.5ML	3	PV
INVEGA SUST INJ 117/0.75	3	PV
INVEGA SUST INJ 156MG/ML	3	PV
INVEGA SUST INJ 234/1.5	3	PV
INVEGA TAB 1.5MG	3	PV
INVEGA TAB 3MG	3	PV
INVEGA TAB 6MG	3	PV
INVEGA TAB 9MG	3	PV
INVEGA TRINZ INJ 273MG	NC	
INVEGA TRINZ INJ 410MG	NC	
INVEGA TRINZ INJ 546MG	NC	
INVEGA TRINZ INJ 819MG	NC	
LATUDA TAB 20MG	2	PV
LATUDA TAB 40MG	2	PV
LATUDA TAB 60MG	2	PV
LATUDA TAB 80MG	2	PV
LATUDA TAB 120MG	2	PV

Drug Name	Drug Tier	Requirements/Limits
NUPLAZID TAB 17MG	6	PA, SP
<i>olanzapine for im inj 10 mg</i>	2	
<i>olanzapine orally disintegrating tab 5 mg</i>	2	PV
<i>olanzapine orally disintegrating tab 10 mg</i>	1	PV
<i>olanzapine orally disintegrating tab 15 mg</i>	2	PV
<i>olanzapine orally disintegrating tab 20 mg</i>	2	PV
<i>olanzapine tab 2.5 mg</i>	1	PV
<i>olanzapine tab 5 mg</i>	1	PV
<i>olanzapine tab 7.5 mg</i>	1	PV
<i>olanzapine tab 10 mg</i>	1	PV
<i>olanzapine tab 15 mg</i>	1	PV
<i>olanzapine tab 20 mg</i>	1	PV
<i>olanzapine-fluoxetine hcl cap 3-25 mg</i>	2	
<i>olanzapine-fluoxetine hcl cap 6-25 mg</i>	2	
<i>olanzapine-fluoxetine hcl cap 6-50 mg</i>	1	
<i>olanzapine-fluoxetine hcl cap 12-25 mg</i>	2	
<i>olanzapine-fluoxetine hcl cap 12-50 mg</i>	2	
<i>paliperidone tab er 24hr 1.5 mg</i>	2	PV
<i>paliperidone tab er 24hr 3 mg</i>	2	PV
<i>paliperidone tab er 24hr 6 mg</i>	2	PV
<i>paliperidone tab er 24hr 9 mg</i>	2	PV
PERSERIS INJ 90MG	NC	
PERSERIS INJ 120MG	NC	
<i>quetiapine fumarate tab 25 mg</i>	1	PV
<i>quetiapine fumarate tab 50 mg</i>	1	PV
<i>quetiapine fumarate tab 100 mg</i>	1	PV
<i>quetiapine fumarate tab 200 mg</i>	1	PV
<i>quetiapine fumarate tab 300 mg</i>	1	PV
<i>quetiapine fumarate tab 400 mg</i>	1	PV
<i>quetiapine fumarate tab er 24hr 50 mg</i>	2	PV
<i>quetiapine fumarate tab er 24hr 150 mg</i>	2	PV
<i>quetiapine fumarate tab er 24hr 200 mg</i>	2	PV
<i>quetiapine fumarate tab er 24hr 300 mg</i>	2	PV
<i>quetiapine fumarate tab er 24hr 400 mg</i>	2	PV
REXULTI TAB 0.5MG	3	PA, PV
REXULTI TAB 0.25MG	3	PA, PV
REXULTI TAB 1MG	3	PA, PV
REXULTI TAB 2MG	3	PA, PV
REXULTI TAB 3MG	3	PA, PV
REXULTI TAB 4MG	3	PA, PV
RISPERDAL INJ 12.5MG	2	PV
RISPERDAL INJ 25MG	2	PV
RISPERDAL INJ 37.5MG	2	PV
RISPERDAL INJ 50MG	2	PV
RISPERDAL SOL 1MG/ML	3	PV
RISPERDAL TAB 0.5MG	3	PV
RISPERDAL TAB 0.25MG	3	PV

Drug Name	Drug Tier	Requirements/Limits
RISPERDAL TAB 1MG	3	PV
RISPERDAL TAB 2MG	3	PV
RISPERDAL TAB 3MG	3	PV
RISPERDAL TAB 4MG	3	PV
<i>risperidone orally disintegrating tab 0.5 mg</i>	1	PV
<i>risperidone orally disintegrating tab 0.25 mg</i>	2	PV
<i>risperidone orally disintegrating tab 1 mg</i>	1	PV
<i>risperidone orally disintegrating tab 2 mg</i>	2	PV
<i>risperidone orally disintegrating tab 3 mg</i>	1	PV
<i>risperidone orally disintegrating tab 4 mg</i>	2	PV
<i>risperidone soln 1 mg/ml</i>	1	PV
<i>risperidone tab 0.5 mg</i>	1	PV
<i>risperidone tab 0.5mg od</i>	1	PV
<i>risperidone tab 0.25 mg</i>	1	PV
<i>risperidone tab 1 mg</i>	1	PV
<i>risperidone tab 1mg odt</i>	1	PV
<i>risperidone tab 2 mg</i>	1	PV
<i>risperidone tab 2mg odt</i>	2	PV
<i>risperidone tab 3 mg</i>	1	PV
<i>risperidone tab 4 mg</i>	1	PV
SAPHRIS SUB 2.5MG	3	PA, PV
SAPHRIS SUB 5MG	3	PA, PV
SAPHRIS SUB 10MG	3	PA, PV
SEROQUEL TAB 25MG	3	PV
SEROQUEL TAB 50MG	3	PV
SEROQUEL TAB 100MG	3	PV
SEROQUEL TAB 200MG	3	PV
SEROQUEL TAB 300MG	3	PV
SEROQUEL TAB 400MG	3	PV
SEROQUEL XR TAB 50MG	NC	
SEROQUEL XR TAB 150MG	NC	
SEROQUEL XR TAB 200MG	NC	
SEROQUEL XR TAB 300MG	NC	
SEROQUEL XR TAB 400MG	NC	
SYMBYAX CAP 3-25MG	3	
SYMBYAX CAP 6-25MG	3	
SYMBYAX CAP 6-50MG	3	
SYMBYAX CAP 12-25MG	3	
SYMBYAX CAP 12-50MG	3	
VERSACLOZ SUS 50MG/ML	3	PV
VRAYLAR CAP 1.5-3MG	2	PA, PV
VRAYLAR CAP 1.5MG	2	PA, PV
VRAYLAR CAP 3MG	2	PA, PV
VRAYLAR CAP 4.5MG	2	PA, PV
VRAYLAR CAP 6MG	2	PA, PV
<i>ziprasidone hcl cap 20 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>ziprasidone hcl cap 40 mg</i>	1	PV
<i>ziprasidone hcl cap 60 mg</i>	1	PV
<i>ziprasidone hcl cap 80 mg</i>	1	PV
ZYPREXA INJ 10MG	3	
ZYPREXA RELP INJ 210MG	3	
ZYPREXA RELP INJ 300MG	3	
ZYPREXA RELP INJ 405MG	3	
ZYPREXA TAB 2.5MG	3	PV
ZYPREXA TAB 5MG	3	PV
ZYPREXA TAB 7.5MG	3	PV
ZYPREXA TAB 10MG	3	PV
ZYPREXA TAB 15MG	3	PV
ZYPREXA TAB 20MG	3	PV
ZYPREXA ZYDI TAB 5MG	3	PV
ZYPREXA ZYDI TAB 10MG	3	PV
ZYPREXA ZYDI TAB 15MG	3	PV
ZYPREXA ZYDI TAB 20MG	3	PV

ANTIPSYCHOTICS, MISCELLANEOUS

ADASUVE INH 10MG	3	
CHLORPROMAZ INJ 25MG/ML	3	
CHLORPROMAZ INJ 50MG/2ML	3	
<i>chlorpromazine hcl tab 10 mg</i>	2	PV
<i>chlorpromazine hcl tab 25 mg</i>	2	PV
<i>chlorpromazine hcl tab 50 mg</i>	2	PV
<i>chlorpromazine hcl tab 100 mg</i>	2	PV
<i>chlorpromazine hcl tab 200 mg</i>	2	PV
<i>fluphenazine decanoate inj 25 mg/ml</i>	1	PV
<i>fluphenazine hcl elixir 2.5 mg/5ml</i>	1	PV
<i>fluphenazine hcl inj 2.5 mg/ml</i>	1	
<i>fluphenazine hcl oral conc 5 mg/ml</i>	1	PV
<i>fluphenazine hcl tab 1 mg</i>	1	PV
<i>fluphenazine hcl tab 2.5 mg</i>	2	PV
<i>fluphenazine hcl tab 5 mg</i>	2	PV
<i>fluphenazine hcl tab 10 mg</i>	2	PV
HALDOL DECAN INJ 50MG/ML	3	PV
HALDOL DECAN INJ 100MG/ML	3	PV
HALDOL INJ 5MG/ML	3	
<i>haloperidol decanoate im soln 50 mg/ml</i>	1	PV
<i>haloperidol decanoate im soln 100 mg/ml</i>	1	PV
<i>haloperidol lactate inj 5 mg/ml</i>	1	
<i>haloperidol lactate oral conc 2 mg/ml</i>	1	PV
<i>haloperidol tab 0.5 mg</i>	1	PV
<i>haloperidol tab 1 mg</i>	1	PV
<i>haloperidol tab 2 mg</i>	1	PV
<i>haloperidol tab 5 mg</i>	1	PV
<i>haloperidol tab 10 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>haloperidol tab 20 mg</i>	2	PV
<i>loxapine succinate cap 5 mg</i>	1	PV
<i>loxapine succinate cap 10 mg</i>	1	PV
<i>loxapine succinate cap 25 mg</i>	1	PV
<i>loxapine succinate cap 50 mg</i>	1	PV
ORAP TAB 1MG	3	
ORAP TAB 2MG	3	
<i>perphenazine tab 2 mg</i>	1	PV
<i>perphenazine tab 4 mg</i>	1	PV
<i>perphenazine tab 8 mg</i>	1	PV
<i>perphenazine tab 16 mg</i>	1	PV
<i>perphenazine-amitriptyline tab 2-10 mg</i>	1	
<i>perphenazine-amitriptyline tab 2-25 mg</i>	1	
<i>perphenazine-amitriptyline tab 4-10 mg</i>	1	
<i>perphenazine-amitriptyline tab 4-25 mg</i>	1	
<i>perphenazine-amitriptyline tab 4-50 mg</i>	1	
<i>pimozide tab 1 mg</i>	1	
<i>pimozide tab 2 mg</i>	1	
<i>thioridazine hcl tab 10 mg</i>	1	PV
<i>thioridazine hcl tab 25 mg</i>	1	PV
<i>thioridazine hcl tab 50 mg</i>	1	PV
<i>thioridazine hcl tab 100 mg</i>	1	PV
<i>thiothixene cap 1 mg</i>	1	PV
<i>thiothixene cap 2 mg</i>	1	PV
<i>thiothixene cap 5 mg</i>	1	PV
<i>thiothixene cap 10 mg</i>	2	PV
<i>trifluoperazine hcl tab 1 mg (base equivalent)</i>	1	PV
<i>trifluoperazine hcl tab 2 mg (base equivalent)</i>	1	PV
<i>trifluoperazine hcl tab 5 mg (base equivalent)</i>	1	PV
<i>trifluoperazine hcl tab 10 mg (base equivalent)</i>	1	PV

ATTENTION DEFICIT HYPERACTIVITY DISORDER

ADDERALL TAB 5MG	3	PA, QL
ADDERALL TAB 7.5MG	3	PA, QL
ADDERALL TAB 10MG	3	PA, QL
ADDERALL TAB 12.5MG	3	PA, QL
ADDERALL TAB 15MG	3	PA, QL
ADDERALL TAB 20MG	3	PA, QL
ADDERALL TAB 30MG	3	PA, QL
ADDERALL XR CAP 5MG	NC	
ADDERALL XR CAP 10MG	NC	
ADDERALL XR CAP 15MG	NC	
ADDERALL XR CAP 20MG	NC	
ADDERALL XR CAP 25MG	NC	

Drug Name	Drug Tier	Requirements/Limits
ADDERALL XR CAP 30MG	NC	
ADZENYS ER SUS 1.25MG	3	PA, QL
ADZENYS XR TAB 3.1MG	3	PA, QL
ADZENYS XR TAB 6.3MG	3	PA, QL
ADZENYS XR TAB 9.4MG	3	PA, QL
ADZENYS XR TAB 12.5MG	3	PA, QL
ADZENYS XR TAB 15.7 MG	3	PA, QL
ADZENYS XR TAB 18.8MG	3	PA, QL
<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine tab 5 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine tab 10 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine tab 15 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine tab 20 mg</i>	1	PA, QL
<i>amphetamine-dextroamphetamine tab 30 mg</i>	1	PA, QL
APTENSIO XR CAP 10MG	3	PA, QL
APTENSIO XR CAP 15MG	3	PA, QL
APTENSIO XR CAP 20MG	3	PA, QL
APTENSIO XR CAP 30MG	3	PA, QL
APTENSIO XR CAP 40MG	3	PA, QL
APTENSIO XR CAP 50MG	3	PA, QL
APTENSIO XR CAP 60MG	3	PA, QL
<i>atomoxetine hcl cap 10 mg (base equiv)</i>	2	PA, QL
<i>atomoxetine hcl cap 18 mg (base equiv)</i>	2	PA, QL
<i>atomoxetine hcl cap 25 mg (base equiv)</i>	2	PA, QL
<i>atomoxetine hcl cap 40 mg (base equiv)</i>	2	PA, QL
<i>atomoxetine hcl cap 60 mg (base equiv)</i>	2	PA, QL
<i>atomoxetine hcl cap 80 mg (base equiv)</i>	2	PA, QL
<i>atomoxetine hcl cap 100 mg (base equiv)</i>	2	PA, QL

Drug Name	Drug Tier	Requirements/Limits
<i>clonidine hcl tab er 12hr 0.1 mg</i>	2	
CONCERTA TAB 18MG	3	PA, QL
CONCERTA TAB 27MG	3	PA, QL
CONCERTA TAB 36MG	3	PA, QL
CONCERTA TAB 54MG	3	PA, QL
COTEMPLA TAB 8.6MG	NC	
COTEMPLA TAB 17.3MG	NC	
COTEMPLA TAB 25.9MG	NC	
DAYTRANA DIS 10MG/9HR	3	PA, QL
DAYTRANA DIS 15MG/9HR	3	PA, QL
DAYTRANA DIS 20MG/9HR	3	PA, QL
DAYTRANA DIS 30MG/9HR	3	PA, QL
DESOXYN TAB 5MG	3	PA, QL
DEXEDRINE CAP 5MG CR	3	PA, QL
DEXEDRINE CAP 10MG CR	3	PA, QL
DEXEDRINE CAP 15MG CR	3	PA, QL
<i>dexmethylphenidate hcl cap er 24 hr 5 mg</i>	1	PA, QL
<i>dexmethylphenidate hcl cap er 24 hr 10 mg</i>	1	PA, QL
<i>dexmethylphenidate hcl cap er 24 hr 15 mg</i>	1	PA, QL
<i>dexmethylphenidate hcl cap er 24 hr 20 mg</i>	2	PA, QL
<i>dexmethylphenidate hcl cap er 24 hr 25 mg</i>	2	PA, QL
<i>dexmethylphenidate hcl cap er 24 hr 30 mg</i>	1	PA, QL
<i>dexmethylphenidate hcl cap er 24 hr 35 mg</i>	2	PA, QL
<i>dexmethylphenidate hcl cap er 24 hr 40 mg</i>	2	PA, QL
<i>dexmethylphenidate hcl tab 2.5 mg</i>	1	PA, QL
<i>dexmethylphenidate hcl tab 5 mg</i>	1	PA, QL
<i>dexmethylphenidate hcl tab 10 mg</i>	1	PA, QL
<i>dextroamphetamine sulfate cap er 24hr 5 mg</i>	1	PA, QL
<i>dextroamphetamine sulfate cap er 24hr 10 mg</i>	2	PA, QL
<i>dextroamphetamine sulfate cap er 24hr 15 mg</i>	2	PA, QL
<i>dextroamphetamine sulfate oral solution 5 mg/5ml</i>	2	PA, QL
<i>dextroamphetamine sulfate tab 5 mg</i>	1	PA, QL
<i>dextroamphetamine sulfate tab 10 mg</i>	1	PA, QL
DYANAVEL XR SUS 2.5MG/ML	3	PA, QL
EVEKEO TAB 5MG	3	PA, QL
EVEKEO TAB 10MG	3	PA, QL
FOCALIN TAB 2.5MG	3	PA, QL

Drug Name	Drug Tier	Requirements/Limits
FOCALIN TAB 5MG	3	PA, QL
FOCALIN TAB 10MG	3	PA, QL
FOCALIN XR CAP 5MG	3	PA, QL
FOCALIN XR CAP 10MG	3	PA, QL
FOCALIN XR CAP 15MG	3	PA, QL
FOCALIN XR CAP 20MG	3	PA, QL
FOCALIN XR CAP 25MG	3	PA, QL
FOCALIN XR CAP 30MG	3	PA, QL
FOCALIN XR CAP 35MG	3	PA, QL
FOCALIN XR CAP 40MG	3	PA, QL
<i>guanfacine hcl tab er 24hr 1 mg (base equiv)</i>	1	
<i>guanfacine hcl tab er 24hr 2 mg (base equiv)</i>	1	
<i>guanfacine hcl tab er 24hr 3 mg (base equiv)</i>	1	
<i>guanfacine hcl tab er 24hr 4 mg (base equiv)</i>	1	
INTUNIV TAB 1MG	NC	
INTUNIV TAB 2MG	NC	
INTUNIV TAB 3MG	NC	
INTUNIV TAB 4MG	NC	
KAPVAY TAB 0.1 MG	3	
<i>metadate tab 20mg er</i>	2	PA, QL
<i>methamphetamine hcl tab 5 mg</i>	2	PA, QL
METHYLIN SOL 5MG/5ML	3	PA, QL
METHYLIN SOL 10MG/5ML	3	PA, QL
<i>methylphenidate hcl cap er 10 mg (cd)</i>	2	PA, QL
<i>methylphenidate hcl cap er 20 mg (cd)</i>	1	PA, QL
<i>methylphenidate hcl cap er 24hr 10 mg (la)</i>	2	
<i>methylphenidate hcl cap er 24hr 20 mg (la)</i>	2	PA, QL
<i>methylphenidate hcl cap er 24hr 30 mg (la)</i>	2	PA, QL
<i>methylphenidate hcl cap er 24hr 40 mg (la)</i>	1	PA, QL
<i>methylphenidate hcl cap er 24hr 60 mg (la)</i>	2	PA, QL
<i>methylphenidate hcl cap er 30 mg (cd)</i>	1	PA, QL
<i>methylphenidate hcl cap er 40 mg (cd)</i>	2	PA, QL
<i>methylphenidate hcl cap er 50 mg (cd)</i>	2	PA, QL
<i>methylphenidate hcl cap er 60 mg (cd)</i>	2	PA, QL
<i>methylphenidate hcl chew tab 2.5 mg</i>	2	PA, QL
<i>methylphenidate hcl chew tab 5 mg</i>	2	PA, QL
<i>methylphenidate hcl chew tab 10 mg</i>	2	PA, QL
<i>methylphenidate hcl soln 5 mg/5ml</i>	2	PA, QL
<i>methylphenidate hcl soln 10 mg/5ml</i>	2	PA, QL

Drug Name	Drug Tier	Requirements/Limits
<i>methylphenidate hcl tab 5 mg</i>	1	PA, QL
<i>methylphenidate hcl tab 10 mg</i>	1	PA, QL
<i>methylphenidate hcl tab 20 mg</i>	1	PA, QL
<i>methylphenidate hcl tab er 10 mg</i>	2	PA, QL
<i>methylphenidate hcl tab er 20 mg</i>	2	PA, QL
<i>methylphenidate hcl tab er 24hr 18 mg</i>	2	PA, QL
<i>methylphenidate hcl tab er 24hr 27 mg</i>	1	PA, QL
<i>methylphenidate hcl tab er 24hr 36 mg</i>	2	PA, QL
<i>methylphenidate hcl tab er 24hr 54 mg</i>	2	PA, QL
<i>methylphenidate hcl tab er osmotic release 2 (osm) 18 mg</i>	2	PA, QL
<i>methylphenidate hcl tab er osmotic release 2 (osm) 27 mg</i>	2	PA, QL
<i>methylphenidate hcl tab er osmotic release 2 (osm) 36 mg</i>	2	PA, QL
<i>methylphenidate hcl tab er osmotic release 2 (osm) 54 mg</i>	2	PA, QL
<i>methylphenidate hcl tab er osmotic release 3 (osm) 72 mg</i>	3	PA, QL
MYDAYIS CAP 12.5MG	2	PA, QL
MYDAYIS CAP 25MG	2	PA, QL
MYDAYIS CAP 37.5MG	2	PA, QL
MYDAYIS CAP 50MG	2	PA, QL
PROCENTRA SOL 5MG/5ML	3	PA, QL
QUILLICHEW CHW 20MG ER	3	PA, QL
QUILLICHEW CHW 30MG ER	3	PA, QL
QUILLICHEW CHW 40MG ER	3	PA, QL
QUILLIVANT SUS 25MG/5ML	3	PA, QL
RITALIN LA CAP 10MG	3	PA, QL
RITALIN LA CAP 20MG	3	PA, QL
RITALIN LA CAP 30MG	3	PA, QL
RITALIN LA CAP 40MG	3	PA, QL
RITALIN TAB 5MG	3	PA, QL
RITALIN TAB 10MG	3	PA, QL
RITALIN TAB 20MG	3	PA, QL
STRATTERA CAP 10MG	3	PA, QL
STRATTERA CAP 18MG	3	PA, QL
STRATTERA CAP 25MG	3	PA, QL
STRATTERA CAP 40MG	3	PA, QL
STRATTERA CAP 60MG	3	PA, QL
STRATTERA CAP 80MG	3	PA, QL
STRATTERA CAP 100MG	3	PA, QL
VYVANSE CAP 10MG	2	PA, QL
VYVANSE CAP 20MG	2	PA, QL
VYVANSE CAP 30MG	2	PA, QL
VYVANSE CAP 40MG	2	PA, QL
VYVANSE CAP 50MG	2	PA, QL

Drug Name	Drug Tier	Requirements/Limits
VYVANSE CAP 60MG	2	PA, QL
VYVANSE CAP 70MG	2	PA, QL
VYVANSE CHW 10MG	2	PA, QL
VYVANSE CHW 20MG	2	PA, QL
VYVANSE CHW 30MG	2	PA, QL
VYVANSE CHW 40MG	2	PA, QL
VYVANSE CHW 50MG	2	PA, QL
VYVANSE CHW 60MG	2	PA, QL
<i>zenzedi tab 2.5mg</i>	2	PA, QL
<i>zenzedi tab 5mg</i>	1	PA, QL
<i>zenzedi tab 7.5mg</i>	2	PA, QL
<i>zenzedi tab 10mg</i>	1	PA, QL
<i>zenzedi tab 15mg</i>	2	PA, QL
<i>zenzedi tab 20mg</i>	2	PA, QL
<i>zenzedi tab 30mg</i>	2	PA, QL

BOTULINUM TOXINS

BOTOX INJ 100UNIT	3	PA
BOTOX INJ 200UNIT	3	PA
DYSPORT INJ 300UNIT	3	PA
DYSPORT INJ 500UNIT	3	PA
MYOBLOC INJ 2500/0.5	3	PA
MYOBLOC INJ 5000/ML	3	PA
MYOBLOC INJ 10000/2	3	PA
XEOMIN INJ 50 UNIT	3	PA
XEOMIN INJ 100UNIT	3	PA
XEOMIN INJ 200UNIT	3	PA

DUCHENNE MUSCULAR DYSTROPHY

EMFLAZA SUS 22.75/ML	NC	
EMFLAZA TAB 6MG	NC	
EMFLAZA TAB 18MG	NC	
EMFLAZA TAB 30MG	NC	
EMFLAZA TAB 36MG	NC	
EXONDYS 51 SOL 100/2ML	6	PA, SP
EXONDYS 51 SOL 500/10ML	6	PA, SP

FIBROMYALGIA

LYRICA CAP 25MG	2	
LYRICA CAP 50MG	2	
LYRICA CAP 75MG	2	
LYRICA CAP 100MG	2	
LYRICA CAP 150MG	2	
LYRICA CAP 200MG	2	
LYRICA CAP 225MG	2	
LYRICA CAP 300MG	2	
LYRICA SOL 20MG/ML	2	
SAVELLA MIS TITR PAK	2	
SAVELLA TAB 12.5MG	2	

Drug Name	Drug Tier	Requirements/Limits
SAVELLA TAB 25MG	2	
SAVELLA TAB 50MG	2	
SAVELLA TAB 100MG	2	
HUNTINGTON'S DISEASE AGENTS		
AUSTEDO TAB 6MG	5	PA, QL, SP
AUSTEDO TAB 9MG	5	PA, QL, SP
AUSTEDO TAB 12MG	5	PA, QL, SP
<i>tetrabenazine tab 12.5 mg</i>	4	PA, QL, SP
<i>tetrabenazine tab 25 mg</i>	4	PA, QL, SP
XENAZINE TAB 12.5MG	NC	
XENAZINE TAB 25MG	NC	
HYPNOTICS, BENZODIAZEPINES		
DORAL TAB 15MG	3	PA, QL
<i>estazolam tab 1 mg</i>	1	PA, QL
<i>estazolam tab 2 mg</i>	1	PA, QL
<i>flurazepam hcl cap 15 mg</i>	1	PA, QL
<i>flurazepam hcl cap 30 mg</i>	1	PA, QL
HALCION TAB 0.25MG	3	PA, QL
MIDAZOL/D5W SOL 50/50ML	NC	
MIDAZOL/NAACL SOL 5MG/5ML	NC	
MIDAZOL/NAACL SOL 55/55ML	NC	
<i>midazolam hcl inj 2 mg/2ml (base equivalent)</i>	1	
<i>midazolam hcl inj 5 mg/5ml (base equivalent)</i>	1	
<i>midazolam hcl inj 5 mg/ml (base equivalent)</i>	1	
<i>midazolam hcl inj 10 mg/2ml (base equivalent)</i>	1	
<i>midazolam hcl inj 10 mg/10ml (base equivalent)</i>	1	
<i>midazolam hcl inj 25 mg/5ml (base equivalent)</i>	1	
<i>midazolam hcl inj 50 mg/10ml (base equivalent)</i>	1	
<i>midazolam hcl syrup 2 mg/ml (base equivalent)</i>	2	
<i>quazepam tab 15 mg</i>	2	PA, QL
RESTORIL CAP 7.5MG	3	PA, QL
RESTORIL CAP 15MG	3	PA, QL
RESTORIL CAP 22.5MG	3	PA, QL
RESTORIL CAP 30MG	3	PA, QL
<i>temazepam cap 7.5 mg</i>	1	PA, QL
<i>temazepam cap 15 mg</i>	1	PA, QL
<i>temazepam cap 22.5 mg</i>	1	PA, QL
<i>temazepam cap 30 mg</i>	1	PA, QL
<i>triazolam tab 0.25 mg</i>	1	PA, QL

Drug Name	Drug Tier	Requirements/Limits
<i>triazolam tab 0.125 mg</i>	1	PA, QL
HYPNOTICS, COMBINATIONS		
MET/KET/OND TRO 3-25-2MG	NC	
HYPNOTICS, NON-BENZODIAZEPINES		
AMBIEN CR TAB 6.25MG	3	PA, QL
AMBIEN CR TAB 12.5MG	3	PA, QL
AMBIEN TAB 5MG	3	PA, QL
AMBIEN TAB 10MG	3	PA, QL
AMYTAL SOD INJ 500MG	3	
BELSOMRA TAB 5MG	2	PA
BELSOMRA TAB 10MG	2	PA
BELSOMRA TAB 15MG	2	PA
BELSOMRA TAB 20MG	2	PA
BUTISOL SOD TAB 30MG	3	
<i>dexmedetomidine hcl in nacl 0.9% iv soln 200 mcg/50ml</i>	1	
<i>dexmedetomidine hcl in nacl 0.9% iv soln 400 mcg/100ml</i>	1	
<i>dexmedetomidine hcl inj 200 mcg/2ml (for 1 iv infusion)</i>	1	
EDLUAR SUB 5MG	3	PA, QL, ST
EDLUAR SUB 10MG	3	PA, QL, ST
<i>eszopiclone tab 1 mg</i>	1	PA, QL
<i>eszopiclone tab 2 mg</i>	1	PA, QL
<i>eszopiclone tab 3 mg</i>	1	PA, QL
HETLIOZ CAP 20MG	6	PA, QL, SP
INTERMEZZO SUB 1.75MG	NC	
INTERMEZZO SUB 3.5MG	NC	
LUNESTA TAB 1MG	NC	
LUNESTA TAB 2MG	NC	
LUNESTA TAB 3MG	NC	
NEMBUTAL SOD INJ 50MG/ML	3	
PRECEDEX INJ 80/20ML	3	
PRECEDEX INJ 100MCG	3	
PRECEDEX INJ 200/50ML	3	
PRECEDEX INJ 400/100	3	
ROZEREM TAB 8MG	NC	
SECONAL SOD CAP 100MG	3	
SONATA CAP 5MG	3	PA, QL
SONATA CAP 10MG	3	PA, QL
<i>zaleplon cap 5 mg</i>	1	PA, QL
<i>zaleplon cap 10 mg</i>	1	PA, QL
<i>zolpidem tartrate sl tab 1.75 mg</i>	2	PA, QL
<i>zolpidem tartrate sl tab 3.5 mg</i>	2	PA, QL
<i>zolpidem tartrate tab 5 mg</i>	1	PA, QL
<i>zolpidem tartrate tab 10 mg</i>	1	PA, QL
<i>zolpidem tartrate tab er 6.25 mg</i>	1	PA, QL

Drug Name	Drug Tier	Requirements/Limits
<i>zolpidem tartrate tab er 12.5 mg</i>	1	PA, QL
ZOLPIMIST SPR 5MG	NC	
HYPNOTICS, TRICYCLICS		
SILENOR TAB 3MG	2	
SILENOR TAB 6MG	2	
MIGRAINE, ERGOTAMINE DERIVATIVES		
CAFERGOT TAB 1-100MG	NC	
D.H.E. 45 INJ 1MG/ML	2	
<i>dihydroergotamine mesylate inj 1 mg/ml</i>	2	
<i>dihydroergotamine mesylate nasal spray 4 mg/ml</i>	2	QL
ERGOMAR SUB 2MG	3	
<i>ergotamine w/ caffeine tab 1-100 mg</i>	2	
<i>migergot sup 2/100</i>	1	
MIGRANAL SPR 4MG/ML	2	QL
MIGRAINE, MISCELLANEOUS		
AIMOVIG INJ 70MG/ML	NC	
AIMOVIG INJ 140DOSE	NC	
CAMBIA POW 50MG	3	ST
<i>isometheptene-dichloral-acetaminophen cap 65-100-325 mg</i>	2	
MIGRANOW PAK	NC	
MIGRAINE, SELECTIVE SEROTONIN AGONIST/NSAID COMBINATIONS		
<i>sumatriptan-naproxen sodium tab 85-500 mg</i>	2	PA, QL
TREXIMET TAB 10-60MG	2	PA, QL
TREXIMET TAB 85-500MG	2	PA, QL
MIGRAINE, SELECTIVE SEROTONIN AGONISTS		
<i>almotriptan malate tab 6.25 mg</i>	2	PA, QL
<i>almotriptan malate tab 12.5 mg</i>	2	PA, QL
AMERGE TAB 1MG	3	PA, QL
AMERGE TAB 2.5MG	3	PA, QL
AXERT TAB 12.5MG	3	PA, QL
<i>eletriptan hydrobromide tab 20 mg (base equivalent)</i>	2	PA, QL
<i>eletriptan hydrobromide tab 40 mg (base equivalent)</i>	2	PA, QL
FROVA TAB 2.5MG	3	PA, QL, ST
<i>frovatriptan succinate tab 2.5 mg (base equivalent)</i>	2	PA, QL
IMITREX INJ 4MG/0.5	3	PA, QL
IMITREX INJ 6MG/0.5	3	PA, QL
IMITREX SPR 5MG/ACT	3	PA, QL
IMITREX SPR 20MG/ACT	3	PA, QL
IMITREX TAB 25MG	3	PA, QL

Drug Name	Drug Tier	Requirements/Limits
IMITREX TAB 50MG	3	PA, QL
IMITREX TAB 100MG	3	PA, QL
MAXALT TAB 5MG	3	PA, QL
MAXALT TAB 10MG	3	PA, QL
MAXALT-MLT TAB 5MG	3	PA, QL
MAXALT-MLT TAB 10MG	3	PA, QL
<i>naratriptan hcl tab 1 mg (base equiv)</i>	1	PA, QL
<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	1	PA, QL
ONZETRA XSAI MIS 11MG	2	PA, QL
RELPAK TAB 20MG	3	PA, QL
RELPAK TAB 40MG	3	PA, QL
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i>	1	PA, QL
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i>	1	PA, QL
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	1	PA, QL
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	1	PA, QL
<i>sumatriptan nasal spray 5 mg/act</i>	2	PA, QL
<i>sumatriptan nasal spray 20 mg/act</i>	2	PA, QL
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	2	PA, QL
<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml</i>	2	PA, QL
<i>sumatriptan succinate solution auto-injector 6 mg/0.5ml</i>	2	PA, QL
<i>sumatriptan succinate solution cartridge 4 mg/0.5ml</i>	2	PA, QL
<i>sumatriptan succinate solution cartridge 6 mg/0.5ml</i>	2	PA, QL
<i>sumatriptan succinate tab 25 mg</i>	1	PA, QL
<i>sumatriptan succinate tab 50 mg</i>	1	PA, QL
<i>sumatriptan succinate tab 100 mg</i>	1	PA, QL
ZEMBRACE SYM INJ 3/0.5ML	2	PA, QL
<i>zolmitriptan orally disintegrating tab 2.5 mg</i>	1	PA, QL
<i>zolmitriptan orally disintegrating tab 5 mg</i>	1	PA, QL
<i>zolmitriptan tab 2.5 mg</i>	1	PA, QL
<i>zolmitriptan tab 5 mg</i>	1	PA, QL
ZOMIG SPR 2.5MG	2	PA, QL
ZOMIG SPR 5MG	2	PA, QL
ZOMIG TAB 2.5MG	3	PA, QL
ZOMIG TAB 5MG	3	PA, QL
ZOMIG ZMT TAB 2.5 MG	3	PA, QL
ZOMIG ZMT TAB 5MG ODT	3	PA, QL
MISCELLANEOUS		
AMPHADASE INJ 150/ML	3	

Drug Name	Drug Tier	Requirements/Limits
BLOXIVERZ INJ 5MG/10ML	3	
BLOXIVERZ INJ 10/10ML	3	
<i>ergoloid mesylates tab 1 mg</i>	1	
GUANIDINE TAB 125MG	3	
HYLENEX INJ 150 UNIT	3	
MACI MIS	NC	
NEOSTIG METH INJ 10/10ML	3	
NEOSTIGMINE INJ 5MG/10ML	3	
<i>neostigmine methylsulfate iv soln 5 mg/10 ml (0.5 mg/ml)</i>	1	
<i>neostigmine methylsulfate iv soln 10 mg/10 ml (1 mg/ml)</i>	1	
RADICAVA INJ 30MG	6	PA
REGONOL INJ 5MG/ML	3	
RILUTEK TAB 50MG	3	
<i>riluzole tab 50 mg</i>	2	
VITRASE INJ 200/ML	3	
MOOD STABILIZERS		
EQUETRO CAP 100MG	3	PV
EQUETRO CAP 200MG	3	PV
EQUETRO CAP 300MG	3	PV
<i>lithium carbonate cap 150 mg</i>	1	
<i>lithium carbonate cap 300 mg</i>	1	
<i>lithium carbonate cap 600 mg</i>	1	
<i>lithium carbonate tab 300 mg</i>	1	
<i>lithium carbonate tab er 300 mg</i>	1	
<i>lithium carbonate tab er 450 mg</i>	1	
LITHIUM SOL 8MEQ/5ML	3	
LITHOBID TAB 300MG CR	2	
MULTIPLE SCLEROSIS		
AMPYRA TAB 10MG	6	PA, QL, SP
AUBAGIO TAB 7MG	5	PA, PV, QL, SP
AUBAGIO TAB 14MG	5	PA, PV, QL, SP
AVONEX INJ 30MCG	6	PA, QL, SP
AVONEX KIT 30MCG	6	PA, QL, SP
AVONEX PEN KIT 30MCG	6	PA, QL, SP
AVONEX PREFL KIT 30MCG	6	PA, QL, SP
BETASERON INJ 0.3MG	5	PA, PV, QL, SP
COPAXONE INJ 20MG/ML	6	PA, PV, QL, SP, ST
COPAXONE INJ 40MG/ML	5	PA, PV, QL, SP
EXTAVIA INJ 0.3MG	NC	
GILENYA CAP 0.5MG	5	PA, PV, QL, SP
<i>glatiramer acetate soln prefilled syringe 40 mg/ml</i>	4	PA, QL, SP
<i>glatopa inj 20mg/ml</i>	4	PA, PV, QL, SP
LEMTRADA INJ 12/1.2ML	NC	
OCREVUS INJ 300/10ML	6	PA, QL, SP

Drug Name	Drug Tier	Requirements/Limits
PLEGRIDY INJ	6	PA, PV, QL, SP
PLEGRIDY INJ PEN	6	PA, PV, QL, SP
PLEGRIDY INJ STARTER	6	PA, SP
PLEGRIDY PEN INJ STARTER	6	PA, SP
REBIF INJ 22/0.5	5	PA, PV, QL, SP
REBIF INJ 44/0.5	5	PA, PV, QL, SP
REBIF REBIDO INJ 22/0.5	5	PA, PV, QL, SP
REBIF REBIDO INJ 44/0.5	5	PA, PV, QL, SP
REBIF REBIDO INJ TITRATN	5	PA, PV, QL, SP
REBIF TITRTN INJ PACK	5	PA, PV, QL, SP
TECFIDERA CAP 120MG	5	PA, PV, QL, SP
TECFIDERA CAP 240MG	5	PA, PV, QL, SP
TECFIDERA MIS STARTER	5	PA, PV, QL, SP
TYSABRI INJ 300/15ML	5	PA, PV, QL, SP

MUSCULOSKELETAL THERAPY AGENTS

AMRIX CAP 15MG	NC	
AMRIX CAP 30MG	NC	
<i>baclofen tab 10 mg</i>	1	
<i>baclofen tab 20 mg</i>	1	
<i>carisoprodol tab 250 mg</i>	2	
<i>carisoprodol tab 350 mg</i>	1	
<i>carisoprodol w/ aspirin & codeine tab 200-325-16 mg</i>	2	
<i>carisoprodol w/ aspirin tab 200-325 mg</i>	1	
<i>chlorzoxazone tab 250 mg</i>	2	
<i>chlorzoxazone tab 500 mg</i>	1	
<i>cyclobenzaprine hcl tab 5 mg</i>	1	
<i>cyclobenzaprine hcl tab 7.5 mg</i>	2	
<i>cyclobenzaprine hcl tab 10 mg</i>	1	
DANTRIUM CAP 25MG	2	
DANTRIUM CAP 50MG	2	
DANTRIUM IV INJ 20MG	3	
<i>dantrolene sodium cap 25 mg</i>	1	
<i>dantrolene sodium cap 50 mg</i>	1	
<i>dantrolene sodium cap 100 mg</i>	1	
FEXMID TAB 7.5MG	3	
GABLOFEN INJ 50MCG/ML	3	
GABLOFEN INJ 10000/20	3	
GABLOFEN INJ 20000/20	3	
GABLOFEN INJ 40000/20	3	
LIORESAL INT INJ 0.05MG/1	3	
LIORESAL INT INJ 10MG/5ML	3	
LIORESAL INT INJ 10MG/20	3	
LIORESAL INT INJ 40MG/20	3	
LORZONE TAB 375MG	3	
LORZONE TAB 750MG	3	
<i>metaxall tab 800mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>metaxalone tab 400 mg</i>	2	
<i>metaxalone tab 800 mg</i>	2	
<i>methocarbamol inj 1000 mg/10ml</i>	1	
<i>methocarbamol tab 500 mg</i>	1	
<i>methocarbamol tab 750 mg</i>	1	
<i>orphenadrine citrate inj 30 mg/ml</i>	1	
<i>orphenadrine citrate tab er 12hr 100 mg</i>	1	
<i>revonto inj 20mg</i>	1	
ROBAXIN INJ 100MG/ML	3	
ROBAXIN TAB 500MG	2	
ROBAXIN-750 TAB 750MG	2	
RYANODEX INJ 250MG	3	
SKELAXIN TAB 800MG	2	
SOMA TAB 250MG	3	
SOMA TAB 350MG	3	
<i>tizanidine hcl cap 2 mg (base equivalent)</i>	1	
<i>tizanidine hcl cap 4 mg (base equivalent)</i>	1	
<i>tizanidine hcl cap 6 mg (base equivalent)</i>	1	
<i>tizanidine hcl tab 2 mg (base equivalent)</i>	1	
<i>tizanidine hcl tab 4 mg (base equivalent)</i>	1	
ZANAFLEX CAP 2MG	3	
ZANAFLEX CAP 4MG	3	
ZANAFLEX CAP 6MG	3	
ZANAFLEX TAB 4MG	2	
MYASTHENIA GRAVIS		
ENLON INJ 150/15ML	3	
MESTINON SYP 60MG/5ML	2	
MESTINON TAB 60MG	2	
MESTINON TAB TIMESPAN	2	
<i>pyridostigmine bromide tab 60 mg</i>	1	
<i>pyridostigmine bromide tab er 180 mg</i>	2	
NARCOLEPSY/CATAPLEXY		
<i>armodafinil tab 50 mg</i>	1	PA
<i>armodafinil tab 150 mg</i>	2	PA
<i>armodafinil tab 200 mg</i>	2	PA
<i>armodafinil tab 250 mg</i>	2	PA
<i>modafinil tab 100 mg</i>	1	PA
<i>modafinil tab 200 mg</i>	1	PA
NUVIGIL TAB 50MG	NC	
NUVIGIL TAB 150MG	NC	
NUVIGIL TAB 200MG	NC	
NUVIGIL TAB 250MG	NC	
PROVIGIL TAB 100MG	3	PA
PROVIGIL TAB 200MG	3	PA
XYREM SOL 500MG/ML	6	PA, QL, SP
NEUROMUSCULAR BLOCKING AGENTS		

Drug Name	Drug Tier	Requirements/Limits
ANECTINE INJ 20MG/ML	3	
<i>atracurium besylate iv soln 100 mg/10ml</i>	1	
<i>atracurium besylate preservative free (pf) iv soln 50 mg/5ml</i>	1	
<i>cisatracurium besylate (pf) iv soln 10 mg/5ml (2 mg/ml)</i>	1	
<i>cisatracurium besylate (pf) iv soln 200 mg/20ml (10 mg/ml)</i>	1	
<i>cisatracurium besylate iv soln 20 mg/10ml (2 mg/ml)</i>	1	
MIVACRON INJ 10MG/5ML	3	
MIVACRON INJ 20/10ML	3	
NIMBEX INJ 2MG/ML	3	
NIMBEX INJ 10MG/ML	3	
<i>pancuronium bromide inj 1 mg/ml</i>	1	
QUELICIN INJ 20MG/ML	3	
ROCURON BRO SOL 100/10ML	NC	
<i>rocuronium bromide iv soln 50 mg/5ml (10 mg/ml)</i>	1	
<i>rocuronium bromide iv soln 100 mg/10ml (10 mg/ml)</i>	1	
<i>vecuronium bromide for inj 10 mg</i>	1	
<i>vecuronium bromide for inj 20 mg</i>	1	
POSTHERPETIC NEURALGIA (PHN)		
GRALISE STAR MIS 300/600	2	
GRALISE TAB 300MG	2	
GRALISE TAB 600MG	2	
HORIZANT TAB 300MG ER	2	
HORIZANT TAB 600MG ER	2	
PSYCHOTHERAPEUTIC-MISCELLANEOUS, AGENTS FOR NARCOTIC WITHDRAWAL		
LUCEMYRA TAB 0.18MG	NC	
PSYCHOTHERAPEUTIC-MISCELLANEOUS, ALCOHOL DETERRENENTS		
<i>acamprosate calcium tab delayed release 333 mg</i>	2	PV
ANTABUSE TAB 250MG	2	PV
ANTABUSE TAB 500MG	2	PV
<i>disulfiram tab 250 mg</i>	1	PV
<i>disulfiram tab 500 mg</i>	1	PV
VIVITROL INJ 380MG	6	PA, QL, SP
PSYCHOTHERAPEUTIC-MISCELLANEOUS, OPIOID ANTAGONISTS		
EVZIO INJ	NC	
<i>naloxone hcl inj 0.4 mg/ml</i>	2	
<i>naloxone hcl inj 4 mg/10ml</i>	2	
<i>naloxone hcl soln cartridge 0.4 mg/ml</i>	2	
<i>naloxone hcl soln prefilled syringe 2 mg/2ml</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>naltrexone hcl tab 50 mg</i>	1	PV
NALTREXONE IMP	NC	
NARCAN SPR	2	

PSYCHOTHERAPEUTIC-MISCELLANEOUS, PARTIAL OPIOID AGONIST/OPIOID ANTAGONIST COMBINATIONS

BUNAVAIL MIS 2.1-0.3	3	PV
BUNAVAIL MIS 4.2-0.7	3	PV
BUNAVAIL MIS 6.3-1MG	3	PV
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	1	PV
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	2	PV
SUBOXONE MIS 2-0.5MG	2	PV
SUBOXONE MIS 4-1MG	2	PV
SUBOXONE MIS 8-2MG	2	PV
SUBOXONE MIS 12-3MG	2	PV
ZUBSOLV SUB 0.7-0.18	2	
ZUBSOLV SUB 1.4-0.36	2	
ZUBSOLV SUB 2.9-0.71	2	
ZUBSOLV SUB 5.7-1.4	2	
ZUBSOLV SUB 8.6-2.1	2	
ZUBSOLV SUB 11.4-2.9	2	

PSYCHOTHERAPEUTIC-MISCELLANEOUS, PARTIAL OPIOID AGONISTS

<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	1	PA, PV
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	1	PA, PV
PROBUPHINE IMP KIT 74.2	NC	

PSYCHOTHERAPEUTIC-MISCELLANEOUS, PSEUDOBLUBBAR AFFECT AGENTS

NUDEXTA CAP 20-10MG	2	PA
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PSYCHOTHERAPEUTIC-MISCELLANEOUS, SMOKING DETERRENTS

<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	1	ACA, PV
CHANTIX PAK 0.5& 1MG	2	ACA, PV
CHANTIX PAK 1MG	2	ACA, PV
CHANTIX TAB 0.5MG	2	ACA, PV
CHANTIX TAB 1MG	2	ACA, PV
<i>cvs nicotine dis 7mg/24hr</i>	1	OTC; ACA, PV
<i>cvs nicotine dis 14mg/24h</i>	1	OTC; ACA, PV
<i>cvs nicotine gum 2mg cinn</i>	1	OTC; ACA, PV
<i>cvs nicotine gum 2mg mint</i>	1	OTC; ACA, PV
<i>cvs nicotine gum 2mg orig</i>	1	OTC; ACA, PV
<i>cvs nicotine gum 2mgfruit</i>	1	OTC; ACA, PV
<i>cvs nicotine gum 4mg cinn</i>	1	OTC; ACA, PV
<i>cvs nicotine gum 4mg mint</i>	1	OTC; ACA, PV
<i>cvs nicotine gum 4mg orig</i>	1	OTC; ACA, PV

Drug Name	Drug Tier	Requirements/Limits
<i>cvs nicotine gum 4mgfruit</i>	1	OTC; ACA, PV
<i>cvs nicotine loz 4mg mint</i>	1	OTC; ACA, PV
<i>cvs nts dis step 1</i>	1	OTC; ACA, PV
<i>eq nicotine dis 7mg/24hr</i>	1	OTC; ACA, PV
<i>eq nicotine dis 14mg/24h</i>	1	OTC; ACA, PV
<i>eq nicotine dis 21mg/24h</i>	1	OTC; ACA, PV
<i>eq nicotine gum 2mg cinn</i>	1	OTC; ACA, PV
<i>eq nicotine gum 2mg mint</i>	1	OTC; ACA, PV
<i>eq nicotine gum 2mg orig</i>	1	OTC; ACA, PV
<i>eq nicotine gum 2mgfruit</i>	1	OTC; ACA, PV
<i>eq nicotine gum 4mg cinn</i>	1	OTC; ACA, PV
<i>eq nicotine gum 4mg mint</i>	1	OTC; ACA, PV
<i>eq nicotine gum 4mg orig</i>	1	OTC; ACA, PV
<i>eq nicotine gum 4mg ref</i>	1	OTC; ACA, PV
<i>eq nicotine gum 4mg strt</i>	1	OTC; ACA, PV
<i>eq nicotine gum 4mgfruit</i>	1	OTC; ACA, PV
<i>eq nicotine loz 4mg chry</i>	1	OTC; ACA, PV
<i>eq nicotine loz 4mg mint</i>	1	OTC; ACA, PV
<i>eql nicotine gum 2mg</i>	1	OTC; ACA, PV
<i>eql nicotine gum 4mg</i>	1	OTC; ACA, PV
<i>eql nicotine loz 4mg chry</i>	1	OTC; ACA, PV
<i>eql nicotine loz 4mg mint</i>	1	OTC; ACA, PV
<i>gnp nicotine gum 2mg mint</i>	1	OTC; ACA, PV
<i>gnp nicotine gum 2mg orig</i>	1	OTC; ACA, PV
<i>gnp nicotine gum 4mg mint</i>	1	OTC; ACA, PV
<i>gnp nicotine gum 4mg orig</i>	1	OTC; ACA, PV
<i>gnp nicotine loz 4mg mint</i>	1	OTC; ACA, PV
<i>hm nicotine dis 14mg/24h</i>	1	OTC; ACA, PV
<i>hm nicotine dis 21mg/24h</i>	1	OTC; ACA, PV
<i>hm nicotine gum 2mg mint</i>	1	OTC; ACA, PV
<i>hm nicotine gum 4mg mint</i>	1	OTC; ACA, PV
<i>hm nicotine loz 4mg mint</i>	1	OTC; ACA, PV
<i>kls quit2 gum 2mg</i>	1	OTC; ACA, PV
<i>kls quit4 gum 4mg</i>	1	OTC; ACA, PV
<i>kls quit4 loz 4mg</i>	1	OTC; ACA, PV
<i>nicorelief gum 2mg mint</i>	1	OTC; ACA, PV
<i>nicorelief gum 2mg orig</i>	1	OTC; ACA, PV
<i>nicorelief gum 4mg mint</i>	1	OTC; ACA, PV
<i>nicorelief gum 4mg orig</i>	1	OTC; ACA, PV
<i>nicotine dis 7mg/24hr</i>	1	OTC; ACA, PV
<i>nicotine dis step 1</i>	1	OTC; ACA, PV
<i>nicotine dis step 2</i>	1	OTC; ACA, PV
<i>nicotine dis step 3</i>	1	OTC; ACA, PV
<i>nicotine gum 4mg</i>	1	OTC; ACA, PV
<i>nicotine loz mini 2mg</i>	1	OTC; ACA, PV
<i>nicotine pol gum 2mgfruit</i>	1	OTC; ACA, PV
<i>nicotine pol loz 4mg chry</i>	1	OTC; ACA, PV

Drug Name	Drug Tier	Requirements/Limits
<i>nicotine pol loz 4mg mint</i>	1	OTC; ACA, PV
<i>nicotine polacrilex gum 2 mg</i>	1	OTC; ACA, PV
<i>nicotine polacrilex gum 4 mg</i>	1	OTC; ACA, PV
<i>nicotine polacrilex lozenge 2 mg</i>	1	OTC; ACA, PV
<i>nicotine polacrilex lozenge 4 mg</i>	1	OTC; ACA, PV
<i>nicotine td dis 7mg/24hr</i>	1	OTC; ACA, PV
<i>nicotine td dis 14mg/24h</i>	1	OTC; ACA, PV
<i>nicotine td dis 21mg/24h</i>	1	OTC; ACA, PV
<i>nicotine td patch 24hr 7 mg/24hr</i>	1	OTC; ACA, PV
<i>nicotine td patch 24hr 14 mg/24hr</i>	1	OTC; ACA, PV
<i>nicotine td patch 24hr 21 mg/24hr</i>	1	OTC; ACA, PV
NICOTROL INH	3	ACA, PV
NICOTROL NS SPR 10MG/ML	3	ACA, PV
<i>qc nicotine gum 4mg</i>	1	OTC; ACA, PV
<i>ra nicotine dis 7mg/24hr</i>	1	OTC; ACA, PV
<i>ra nicotine dis 14mg/24h</i>	1	OTC; ACA, PV
<i>ra nicotine dis 21mg/24h</i>	1	OTC; ACA, PV
<i>ra nicotine gum 2mg</i>	1	OTC; ACA, PV
<i>ra nicotine gum 2mg cinn</i>	1	OTC; ACA, PV
<i>ra nicotine gum 2mg mint</i>	1	OTC; ACA, PV
<i>ra nicotine gum 2mgfruit</i>	1	OTC; ACA, PV
<i>ra nicotine gum 4mg</i>	1	OTC; ACA, PV
<i>ra nicotine gum 4mg frut</i>	1	OTC; ACA, PV
<i>ra nicotine gum 4mg mint</i>	1	OTC; ACA, PV
<i>ra nicotine loz 4mg mint</i>	1	OTC; ACA, PV
<i>sm nicotine dis 7mg/24hr</i>	1	OTC; ACA, PV
<i>sm nicotine dis 14mg/24h</i>	1	OTC; ACA, PV
<i>sm nicotine dis 21mg</i>	1	OTC; ACA, PV
<i>sm nicotine dis 21mg/24h</i>	1	OTC; ACA, PV
<i>sm nicotine gum 2mg</i>	1	OTC; ACA, PV
<i>sm nicotine gum 2mg mint</i>	1	OTC; ACA, PV
<i>sm nicotine gum 4mg</i>	1	OTC; ACA, PV
<i>sm nicotine gum 4mg mint</i>	1	OTC; ACA, PV
<i>sm nicotine loz 4mg mint</i>	1	OTC; ACA, PV
<i>sr nicotine gum 2mg</i>	1	OTC; ACA, PV
<i>stop smoking gum 2mg mint</i>	1	OTC; ACA, PV
<i>stop smoking gum 2mg orig</i>	1	OTC; ACA, PV
<i>stop smoking gum 4mg</i>	1	OTC; ACA, PV
<i>stop smoking loz 4mg mint</i>	1	OTC; ACA, PV
<i>sw nicotine gum 2mg mint</i>	1	OTC; ACA, PV
<i>sw nicotine gum 4mg</i>	1	OTC; ACA, PV
<i>sw nicotine loz 4mg mint</i>	1	OTC; ACA, PV
<i>tgt nicotine dis 7mg/24hr</i>	1	OTC; ACA, PV
<i>tgt nicotine dis 14mg/24h</i>	1	OTC; ACA, PV
<i>tgt nicotine dis 21mg/24h</i>	1	OTC; ACA, PV
<i>tgt nicotine gum 2mg mint</i>	1	OTC; ACA, PV
<i>tgt nicotine gum 2mg orig</i>	1	OTC; ACA, PV

Drug Name	Drug Tier	Requirements/Limits
<i>tgt nicotine gum 2mgfruit</i>	1	OTC; ACA, PV
<i>tgt nicotine gum 4mg</i>	1	OTC; ACA, PV
<i>tgt nicotine gum 4mg mint</i>	1	OTC; ACA, PV
<i>tgt nicotine gum 4mg orig</i>	1	OTC; ACA, PV
<i>tgt nicotine loz 4mg chry</i>	1	OTC; ACA, PV
<i>tgt nicotine loz 4mg mint</i>	1	OTC; ACA, PV
<i>thrive gum 2mg mint</i>	1	OTC; ACA, PV
ZYBAN TAB 150MG SR	2	PV

PSYCHOTHERAPEUTIC-MISCELLANEOUS, VASOMOTOR SYMPTOM AGENTS

BRISDELLE CAP 7.5MG	3	
<i>paroxetine mesylate cap 7.5 mg (base equiv)</i>	1	

SPINAL MUSCULAR ATROPHY

SPINRAZA INJ 12MG/5ML	NC	
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TARDIVE DYSKINESIA

INGREZZA CAP 40MG	NC	
INGREZZA CAP 80MG	NC	

ENDOCRINE AND METABOLIC

ACROMEGALY

<i>octreotide acetate inj 50 mcg/ml (0.05 mg/ml)</i>	4	PA, QL, SP
<i>octreotide acetate inj 100 mcg/ml (0.1 mg/ml)</i>	4	PA, QL, SP
<i>octreotide acetate inj 200 mcg/ml (0.2 mg/ml)</i>	4	PA, QL, SP
<i>octreotide acetate inj 500 mcg/ml (0.5 mg/ml)</i>	4	PA, QL, SP
<i>octreotide acetate inj 1000 mcg/ml (1 mg/ml)</i>	4	PA, QL, SP
SANDOSTATIN INJ 50MCG/ML	6	PA, QL, SP
SANDOSTATIN INJ 100MCG	6	PA, QL, SP
SANDOSTATIN INJ 500MCG	6	PA, QL, SP
SANDOSTATIN KIT LAR 10MG	NC	
SANDOSTATIN KIT LAR 20MG	NC	
SANDOSTATIN KIT LAR 30MG	NC	
SIGNIFOR LAR INJ 20MG	6	PA, QL, SP
SIGNIFOR LAR INJ 40MG	6	PA, QL, SP
SIGNIFOR LAR INJ 60MG	6	PA, QL, SP
SOMATULINE INJ 60/0.2ML	5	PA, QL, SP
SOMATULINE INJ 90/0.3ML	5	PA, QL, SP
SOMATULINE INJ 120/.5ML	5	PA, QL, SP
SOMAVERT INJ 10MG	5	PA, QL, SP
SOMAVERT INJ 15MG	5	PA, QL, SP
SOMAVERT INJ 20MG	5	PA, QL, SP
SOMAVERT INJ 25MG	5	PA, QL, SP

Drug Name	Drug Tier	Requirements/Limits
SOMAVERT INJ 30MG	5	PA, QL, SP
ANDROGENS		
ANADROL-50 TAB 50MG	3	PA
ANDRODERM DIS 2MG/24HR	2	PA
ANDRODERM DIS 4MG/24HR	2	PA
ANDROGEL GEL 1%(25MG)	NC	
ANDROGEL GEL 1%(50MG)	NC	
ANDROGEL GEL 1.62%	2	PA
AVEED INJ 750/3ML	6	PA, SP
DEPO-TESTOST INJ 100MG/ML	3	PA
DEPO-TESTOST INJ 200MG/ML	3	PA
FORTESTA GEL 10MG/ACT	NC	
METHITEST TAB 10MG	3	PA
<i>methyltestosterone cap 10 mg</i>	1	PA
NATESTO GEL 5.5MG	NC	
<i>oxandrolone tab 2.5 mg</i>	1	PA
<i>oxandrolone tab 10 mg</i>	1	PA
STRIANT MIS 30MG	3	PA
TESTIM GEL 1%(50MG)	NC	
TESTONE CIK KIT 200MG/ML	NC	
TESTOPEL MIS PELLETS	3	PA
<i>testosterone cypionate im inj in oil 100 mg/ml</i>	1	PA
<i>testosterone cypionate im inj in oil 200 mg/ml</i>	1	PA
<i>testosterone enanthate im inj in oil 200 mg/ml</i>	1	PA
<i>testosterone td gel 10mg/act (2%)</i>	2	PA
<i>testosterone td gel 12.5 mg/act (1%)</i>	NC	
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	2	PA
<i>testosterone td gel 50 mg/5gm (1%)</i>	1	PA
<i>testosterone td soln 30 mg/act</i>	2	PA
VOGELXO GEL 1%(50MG)	NC	
VOGELXO GEL PUMP 1%	NC	
ANTIDIABETICS, ALPHA-GLUCOSIDASE INHIBITORS		
<i>acarbose tab 25 mg</i>	1	PV
<i>acarbose tab 50 mg</i>	1	PV
<i>acarbose tab 100 mg</i>	1	PV
GLYSET TAB 25MG	3	PV
GLYSET TAB 50MG	3	PV
GLYSET TAB 100MG	3	PV
<i>miglitol tab 25 mg</i>	1	PV
<i>miglitol tab 50 mg</i>	2	PV
<i>miglitol tab 100 mg</i>	1	PV
PRECOSE TAB 25MG	2	PV
PRECOSE TAB 50MG	2	PV
PRECOSE TAB 100MG	2	PV

Drug Name	Drug Tier	Requirements/Limits
ANTIDIABETICS, AMYLIN ANALOGS		
SYMLINPEN 60 INJ 1000MCG	2	PV
SYMLINPEN 120 INJ 1000MCG	2	PV
ANTIDIABETICS, BIGUANIDE/SULFONYLUREA COMBINATIONS		
<i>glipizide-metformin hcl tab 2.5-250 mg</i>	1	PV
<i>glipizide-metformin hcl tab 2.5-500 mg</i>	1	PV
<i>glipizide-metformin hcl tab 5-500 mg</i>	1	PV
GLUCOVANCE TAB 2.5-500	3	PV
GLUCOVANCE TAB 5-500MG	3	PV
<i>glyburide-metformin tab 1.25-250 mg</i>	1	PV
<i>glyburide-metformin tab 2.5-500 mg</i>	1	PV
<i>glyburide-metformin tab 5-500 mg</i>	1	PV
ANTIDIABETICS, BIGUANIDES		
FORTAMET TAB 500MG	NC	
FORTAMET TAB 1000MG	NC	
GLUCOPHAGE TAB 500MG	3	PV
GLUCOPHAGE TAB 500MG XR	3	PV
GLUCOPHAGE TAB 750MG XR	3	PV
GLUCOPHAGE TAB 850MG	3	PV
GLUCOPHAGE TAB 1000MG	3	PV
GLUMETZA TAB 500MG	NC	
GLUMETZA TAB 1000MG	NC	
<i>metformin hcl tab 500 mg</i>	1	PV
<i>metformin hcl tab 850 mg</i>	1	PV
<i>metformin hcl tab 1000 mg</i>	1	PV
<i>metformin hcl tab er 24hr 500 mg</i>	1	PV
<i>metformin hcl tab er 24hr 750 mg</i>	1	PV
<i>metformin hcl tab er 24hr modified release 2 500 mg</i>	2	PV
<i>metformin hcl tab er 24hr modified release 2 1000 mg</i>	2	PV
<i>metformin hcl tab er 24hr osmotic 500 mg</i>	2	PV
<i>metformin hcl tab er 24hr osmotic 1000 mg</i>	2	PV
METFORMIN SOL 500/5ML	NC	
RIOMET SOL	NC	
RIOMET SOL 500/5ML	NC	
ANTIDIABETICS, DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITOR/BIGUANIDE COMBINATIONS		
<i>alogliptin-metformin hcl tab 12.5-500 mg</i>	NC	
<i>alogliptin-metformin hcl tab 12.5-1000 mg</i>	NC	
JANUMET TAB 50-500MG	2	PV
JANUMET TAB 50-1000	2	PV
JANUMET XR TAB 50-500MG	2	PV
JANUMET XR TAB 50-1000	2	PV
JANUMET XR TAB 100-1000	2	PV

Drug Name	Drug Tier	Requirements/Limits
JENTADUETO TAB 2.5-500	2	PV
JENTADUETO TAB 2.5-850	2	PV
JENTADUETO TAB 2.5-1000	2	PV
JENTADUETO TAB XR	2	PV
KAZANO 12.5- TAB 500MG	NC	
KAZANO 12.5- TAB 1000MG	NC	
KOMBIGLYZ XR TAB 2.5-1000	NC	
KOMBIGLYZ XR TAB 5-500MG	NC	
KOMBIGLYZ XR TAB 5-1000MG	NC	

**ANTIDIABETICS, DIPEPTIDYL PEPTIDASE-4 (DPP-4)
INHIBITOR/INSULIN SENSITIZER COMBINATIONS**

<i>alogliptin-pioglitazone tab 12.5-15 mg</i>	NC	
<i>alogliptin-pioglitazone tab 12.5-30 mg</i>	NC	
<i>alogliptin-pioglitazone tab 12.5-45 mg</i>	NC	
<i>alogliptin-pioglitazone tab 25-15 mg</i>	NC	
<i>alogliptin-pioglitazone tab 25-30 mg</i>	NC	
<i>alogliptin-pioglitazone tab 25-45 mg</i>	NC	
OSENI TAB 12.5-15	NC	
OSENI TAB 12.5-30	NC	
OSENI TAB 12.5-45	NC	
OSENI TAB 25-15MG	NC	
OSENI TAB 25-30MG	NC	
OSENI TAB 25-45MG	NC	

ANTIDIABETICS, DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS

<i>alogliptin benzoate tab 6.25 mg (base equiv)</i>	NC	
<i>alogliptin benzoate tab 12.5 mg (base equiv)</i>	NC	
<i>alogliptin benzoate tab 25 mg (base equiv)</i>	NC	
JANUVIA TAB 25MG	2	PV
JANUVIA TAB 50MG	2	PV
JANUVIA TAB 100MG	2	PV
NESINA TAB 6.25MG	NC	
NESINA TAB 12.5MG	NC	
NESINA TAB 25MG	NC	
ONGLYZA TAB 2.5MG	NC	
ONGLYZA TAB 5MG	NC	
TRADJENTA TAB 5MG	2	PV

**ANTIDIABETICS, INCRETIN MIMETIC AGENT/INSULIN
COMBINATIONS**

SOLIQUA INJ 100/33	2	
XULTOPHY INJ 100/3.6	3	

ANTIDIABETICS, INCRETIN MIMETIC AGENTS

ADLYXIN INJ 10/20MCG	NC	
ADLYXIN INJ 20MCG	NC	
BYDUREON INJ 2MG	NC	

Drug Name	Drug Tier	Requirements/Limits
BYDUREON PEN INJ 2MG	NC	
BYETTA INJ 5MCG	NC	
BYETTA INJ 10MCG	NC	
OZEMPIC INJ 2/1.5ML	2	
TANZEUM INJ 30MG	NC	
TANZEUM INJ 50MG	NC	
TRULICITY INJ 0.75/0.5	2	PV
TRULICITY INJ 1.5/0.5	2	PV
VICTOZA INJ 18MG/3ML	2	PV

ANTIDIABETICS, INSULIN SENSITIZER/BIGUANIDE COMBINATIONS

ACTOPLUS MET TAB 15-500MG	3	PV
ACTOPLUS MET TAB 15-850MG	3	PV
ACTOPLUS MET TAB XR	3	PV
<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i>	1	PV
<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>	1	PV

ANTIDIABETICS, INSULIN SENSITIZER/SULFONYLUREA COMBINATIONS

DUETACT TAB 30-2MG	3	PV
DUETACT TAB 30-4MG	3	PV
<i>pioglitazone hcl-glimepiride tab 30-2 mg</i>	2	PV
<i>pioglitazone hcl-glimepiride tab 30-4 mg</i>	2	PV

ANTIDIABETICS, INSULIN SENSITIZERS

ACTOS TAB 15MG	NC	
ACTOS TAB 30MG	NC	
ACTOS TAB 45MG	NC	
AVANDIA TAB 2MG	3	
AVANDIA TAB 4MG	3	
<i>pioglitazone hcl tab 15 mg (base equiv)</i>	1	PV
<i>pioglitazone hcl tab 30 mg (base equiv)</i>	1	PV
<i>pioglitazone hcl tab 45 mg (base equiv)</i>	1	PV

ANTIDIABETICS, INSULINS

AFREZZA POW 4&8 UNIT	NC	
AFREZZA POW 4/8/12UN	NC	
AFREZZA POW 4UNIT	NC	
APIDRA INJ SOLOSTAR	NC	
APIDRA INJ U-100	NC	
BASAGLAR INJ 100UNIT	2	PV
FIASP FLEX INJ TOUCH	2	PV
FIASP INJ 100/ML	2	PV
HUMALOG INJ 100/ML	NC	
HUMALOG KWIK INJ 100/ML	NC	
HUMALOG KWIK INJ 200/ML	NC	
HUMALOG MIX INJ 50/50	NC	

Drug Name	Drug Tier	Requirements/Limits
HUMALOG MIX INJ 50/50KWP	NC	
HUMALOG MIX INJ 75/25KWP	NC	
HUMALOG MIX SUS 75/25	NC	
HUMULIN BR INJ U-100	NC	OTC
HUMULIN INJ 70/30	NC	OTC
HUMULIN INJ 70/30KWP	NC	OTC
HUMULIN N INJ U-100	NC	OTC
HUMULIN N INJ U-100KWP	NC	OTC
HUMULIN N PN INJ U-100	NC	OTC
HUMULIN PEN INJ 70/30	NC	OTC
HUMULIN R INJ U-100	NC	OTC
HUMULIN R INJ U-500	2	
LANTUS INJ 100/ML	NC	
LANTUS INJ SOLOSTAR	NC	
LEVEMIR INJ	2	PV
LEVEMIR INJ FLEXTUOC	2	PV
NOVOLIN INJ 70/30	2	OTC
NOVOLIN N INJ U-100	2	OTC
NOVOLIN R INJ U-100	2	OTC
NOVOLOG INJ 100/ML	2	PV
NOVOLOG INJ FLEXPEN	2	PV
NOVOLOG INJ PENFILL	2	PV
NOVOLOG MIX INJ 70/30	2	PV
NOVOLOG MIX INJ FLEXPEN	2	PV
TOUJEO SOLO INJ 300IU/ML	NC	
TRESIBA FLEX INJ 100UNIT	2	PV
TRESIBA FLEX INJ 200UNIT	2	PV
ANTIDIABETICS, MEGLITINIDE/BIGUANIDE COMBINATIONS		
<i>repaglinide-metformin hcl tab 1-500 mg</i>	1	PV
<i>repaglinide-metformin hcl tab 2-500 mg</i>	1	PV
ANTIDIABETICS, MEGLITINIDES		
<i>nateglinide tab 60 mg</i>	1	PV
<i>nateglinide tab 120 mg</i>	1	PV
PRANDIN TAB 1MG	3	PV
PRANDIN TAB 2MG	3	PV
<i>repaglinide tab 0.5 mg</i>	1	PV
<i>repaglinide tab 1 mg</i>	1	PV
<i>repaglinide tab 2 mg</i>	1	PV
STARLIX TAB 60MG	3	PV
STARLIX TAB 120MG	3	PV
ANTIDIABETICS, MISCELLANEOUS		
CYCLOSET TAB 0.8MG	3	
ANTIDIABETICS, SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITOR/BIGUANIDE COMBINATIONS		
INVOKAMET TAB 50-500MG	NC	
INVOKAMET TAB 50-1000	NC	

Drug Name	Drug Tier	Requirements/Limits
INVOKAMET TAB 150-500	NC	
INVOKAMET TAB 150-1000	NC	
INVOKAMET XR TAB 50-500MG	NC	
INVOKAMET XR TAB 50-1000	NC	
INVOKAMET XR TAB 150-500	NC	
INVOKAMET XR TAB 150-1000	NC	
SEGLUROMET TAB 2.5-500	NC	
SEGLUROMET TAB 2.5-1000	NC	
SEGLUROMET TAB 7.5-500	NC	
SEGLUROMET TAB 7.5-1000	NC	
SYNJARDY TAB	2	PV
SYNJARDY TAB 5-500MG	2	PV
SYNJARDY TAB 5-1000MG	2	PV
SYNJARDY TAB 12.5-500	2	PV
SYNJARDY XR TAB	2	PV
SYNJARDY XR TAB 5-1000MG	2	PV
SYNJARDY XR TAB 10-1000	2	PV
SYNJARDY XR TAB 25-1000	2	PV
XIGDUO XR TAB 2.5-1000	2	PV
XIGDUO XR TAB 5-500MG	2	PV
XIGDUO XR TAB 5-1000MG	2	PV
XIGDUO XR TAB 10-500MG	2	PV
XIGDUO XR TAB 10-1000	2	PV

ANTIDIABETICS, SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS

FARXIGA TAB 5MG	2	PV
FARXIGA TAB 10MG	2	PV
INVOKANA TAB 100MG	NC	
INVOKANA TAB 300MG	NC	
JARDIANCE TAB 10MG	2	PV
JARDIANCE TAB 25MG	2	PV

ANTIDIABETICS, SODIUM-GLUCOSE CO-TRANSPORTER 2 INHIBITOR/DPP-4 INHIBITOR COMBINATIONS

GLYXAMBI TAB 10-5 MG	NC	
GLYXAMBI TAB 25-5 MG	NC	
QTERN TAB 10MG/5MG	2	

ANTIDIABETICS, SULFONYLUREAS

AMARYL TAB 1MG	3	PV
AMARYL TAB 2MG	3	PV
AMARYL TAB 4MG	3	PV
<i>chlorpropamide tab 100 mg</i>	1	PV
<i>chlorpropamide tab 250 mg</i>	2	PV
<i>glimepiride tab 1 mg</i>	1	PV
<i>glimepiride tab 2 mg</i>	1	PV
<i>glimepiride tab 4 mg</i>	1	PV
<i>glipizide tab 5 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>glipizide tab 10 mg</i>	1	PV
<i>glipizide tab er 24hr 2.5 mg</i>	1	PV
<i>glipizide tab er 24hr 5 mg</i>	1	PV
<i>glipizide tab er 24hr 10 mg</i>	1	PV
<i>glipizide xl tab 2.5mg</i>	1	PV
<i>glipizide xl tab 5mg</i>	1	PV
<i>glipizide xl tab 10mg</i>	1	PV
GLUCOTROL TAB 5MG	3	PV
GLUCOTROL TAB 10MG	3	PV
GLUCOTROL XL TAB 2.5MG	3	PV
GLUCOTROL XL TAB 5MG	3	PV
GLUCOTROL XL TAB 10MG	3	PV
<i>glyburide micronized tab 1.5 mg</i>	1	PV
<i>glyburide micronized tab 3 mg</i>	1	PV
<i>glyburide micronized tab 6 mg</i>	1	PV
<i>glyburide tab 1.25 mg</i>	1	PV
<i>glyburide tab 2.5 mg</i>	1	PV
<i>glyburide tab 5 mg</i>	1	PV
GLYNASE TAB 1.5MG	3	PV
GLYNASE TAB 3MG	3	PV
GLYNASE TAB 6MG	3	PV
<i>tolazamide tab 250 mg</i>	1	PV
<i>tolazamide tab 500 mg</i>	1	PV
<i>tolbutamide tab 500 mg</i>	1	PV

ANTIDIABETICS, SUPPLIES

ACCU-CHEK MIS MLTICLIX	NC	OTC
ACCU-CHEK TES ACTIVE	NC	OTC
ACCU-CHEK TES AVIVA	NC	OTC
ACCU-CHEK TES AVIVA PL	NC	OTC
ACCU-CHEK TES COMFORT	NC	OTC
ACCU-CHEK TES COMPACT	NC	OTC
ACCU-CHEK TES DRUM	NC	OTC
ACCU-CHEK TES SMART	NC	OTC
ACCUTREND TES GLUCOSE	NC	OTC
ACTI-LANCE MIS 28G	2	OTC; PV
ACTI-LANCE MIS LITE 28G	2	OTC; PV
ACTI-LANCE MIS SPEC 17G	2	OTC; PV
ACTI-LANCE MIS UNIV 23G	2	OTC; PV
ACTIVE 1ST MIS LANC 30G	2	OTC; PV
ACURA TES BLD GLUC	NC	OTC
ADV TRAVEL MIS LANC 28G	2	OTC; PV
ADVANCE TES INTUITIO	NC	OTC
ADVANCE TES MICRO-DW	NC	OTC
ADVocate SAFE MIS LANC 26G	2	OTC; PV
ADVocate MIS LANC 30G	2	OTC; PV
ADVocate MIS LANCETS	2	OTC; PV

Drug Name	Drug Tier	Requirements/Limits
ADVOCATE TES	NC	OTC
ADVOCATE TES REDI-COD	NC	OTC
ADVOCATE TES REDICODE	NC	OTC
AF LANCETS MIS THIN	2	OTC; PV
AGAMATRIX MIS 33G	2	OTC; PV
AGAMATRIX TES AMP	NC	OTC
AGAMATRIX TES JAZZ	NC	OTC
AGAMATRIX TES KEYNOTE	NC	OTC
AGAMATRIX TES PRESTO	NC	OTC
AQUALANCE MIS 30G	2	OTC; PV
ASSURE 3 TES	NC	OTC
ASSURE 4 TES	NC	OTC
ASSURE CMFRT MIS 28G	2	OTC; PV
ASSURE II TES	NC	OTC
ASSURE II TES CHECK	NC	OTC
ASSURE LANCE MIS 21G	2	OTC; PV
ASSURE LANCE MIS LOW FLOW	2	OTC; PV
ASSURE LANCE MIS MICRO	2	OTC; PV
ASSURE LANCE MIS SAFE 25G	2	OTC; PV
ASSURE LANCE MIS SAFE 30G	2	OTC; PV
ASSURE MIS LANCETS	2	OTC; PV
ASSURE PLUS MIS HIGH 18G	2	OTC; PV
ASSURE PLUS MIS LOW 25G	2	OTC; PV
ASSURE PLUS MIS MCRO 28G	2	OTC; PV
ASSURE PLUS MIS NORM 21G	2	OTC; PV
ASSURE PLUS MIS PEDIATRI	2	OTC; PV
ASSURE PRISM TES MULTI	NC	OTC
ASSURE PRO TES	NC	OTC
ASSURE TES PLATINUM	NC	OTC
AT LAST MIS LANCETS	2	OTC; PV
AT LAST TES	NC	OTC
AURORA LANCE MIS 30G	2	OTC; PV
AURORA LANCE MIS THIN 23G	2	OTC; PV
AUTO LANCET MIS	2	OTC; PV
AUTOCODE TES BLD GLUC	NC	OTC
AUTOLET PLAT MIS 1.8MM	2	OTC; PV
AUTOLET PLAT MIS 2.4MM	2	OTC; PV
AUTOLET PLAT MIS 3.0MM	2	OTC; PV
BAYER BREEZE MIS 2 TEST	NC	OTC
BAYER MICRLT MIS LANCETS	2	OTC; PV
BD LANCET UF MIS 30G	2	OTC; PV
BD LANCET UF MIS 33G	2	OTC; PV
BD MICROTAIN MIS LANCETS	2	OTC; PV
BD PEN NEEDL MIS 29GX1/2"	2	OTC; PV
BG STAR TES BLD GLUC	NC	OTC
BIOSCANNER TES GLUCOSE	NC	OTC
BLOOD GLUCOS TES	NC	OTC

Drug Name	Drug Tier	Requirements/Limits
BLOOD GLUCOS TES PREMIUM	NC	OTC
BLOOD GLUCOS TES STRIPS	NC	OTC
BULLSEYE MIS LANCETS	2	OTC; PV
BULLSEYE MIS MINI LNC	2	OTC; PV
CAREONE LANC MIS 28G	2	OTC; PV
CAREONE LANC MIS THIN 23G	2	OTC; PV
CARESENS N TES	NC	OTC
1ST CHOICE MIS LANCETS	2	OTC; PV
CLEANLET 28G MIS LANCETS	2	OTC; PV
CLEVER CHECK MIS	2	OTC; PV
CLEVER CHECK MIS 30G	2	OTC; PV
CLEVER CHEK TES	NC	OTC
CLEVER CHEK TES AUTO CD	NC	OTC
CLEVER CHEK TES VOICE	NC	OTC
CLEVER CHOIC TES MICRO	NC	OTC
CLEVR CHOICE TES AUTO-CD	NC	OTC
COAGUCHEK MIS LANCETS	2	OTC; PV
COMFORT ASSU MIS LANC 28G	2	OTC; PV
COMFORT ASSU MIS LANC 33G	2	OTC; PV
COMFORT MIS LANCETS	2	OTC; PV
COMFORTOUCH MIS LANCET	2	OTC; PV
CONFIRM/MICR TES GLUCOSE	NC	OTC
CONTOUR TES BLD GLUC	NC	OTC
CONTOUR TES NEXT	NC	OTC
CONTROL AST TES	NC	OTC
CONTROL TES	NC	OTC
COOL BLOOD TES GLUCOSE	NC	OTC
CVS ADVANCED TES GLUCOSE	NC	OTC
CVS LANCETS MIS 21G	2	OTC; PV
CVS LANCETS MIS 30G	2	OTC; PV
CVS LANCETS MIS 33G	2	OTC; PV
CVS LANCETS MIS ORIGINAL	2	OTC; PV
CVS LANCETS MIS THIN 26G	2	OTC; PV
CVS LANCETS MIS THIN 30G	2	OTC; PV
CVS LANCETS MIS THIN 33G	2	OTC; PV
D-CARE BLOOD TES GLUCOSE	NC	
DIASTAR EASY MIS LANCETS	2	OTC; PV
DIASTAR MIS LANCETS	2	OTC; PV
DIATRUE PLUS TES STRIPS	NC	OTC
DROPLET LANC MIS 30G	2	OTC; PV
DUO-CARE TES	NC	OTC
E-Z JECT MIS 21G	2	OTC; PV
E-Z JECT MIS 21G COLR	2	OTC; PV
E-Z JECT MIS 30G	2	OTC; PV
E-Z JECT MIS 32G COLR	2	OTC; PV
E-Z JECT MIS LANC 21G	2	OTC; PV
E-Z JECT MIS THIN 26G	2	OTC; PV

Drug Name	Drug Tier	Requirements/Limits
E-ZJECT LANC MIS 33G	2	OTC; PV
EASY COMFORT MIS 30G	2	OTC; PV
EASY COMFORT MIS LANC/30G	2	OTC; PV
EASY PLUS II TES BLD GLUC	NC	OTC
EASY PLUS TES BLD GLUC	NC	OTC
EASY STEP TES	NC	OTC
EASY TALK TES BLD GLUC	NC	OTC
EASY TOUCH MIS LANC/21G	2	OTC; PV
EASY TOUCH MIS LANC/23G	2	OTC; PV
EASY TOUCH MIS LANC/26G	2	OTC; PV
EASY TOUCH MIS LANC/28G	2	OTC; PV
EASY TOUCH MIS LANC/30G	2	OTC; PV
EASY TOUCH MIS LANC/32G	2	OTC; PV
EASY TOUCH MIS LANC/33G	2	OTC; PV
EASY TOUCH TES GLUCOSE	NC	OTC
EASY TOUCH TES STRIPS	NC	OTC
EASY TRAK TES BLD GLUC	NC	OTC
EASYGLUCO TES	NC	OTC
EASYGLUCO TES PLUS	NC	OTC
EASYMAX 15 TES	NC	OTC
EASYMAX TES	NC	OTC
EASYPLUS TES BLD GLUC	NC	OTC
EASYPRO PLUS TES	NC	OTC
EASYPRO TES BLD GLUC	NC	OTC
EASYTEST II MIS LANCETS	2	OTC; PV
EASYTEST MIS LANCETS	2	OTC; PV
ELEMENT TES	NC	OTC
ELEMNT COMPA TES STRIPS	NC	OTC
EMBRACE EVO TES	NC	OTC
EMBRACE LANC MIS THIN 30G	2	OTC; PV
EMBRACE PRO TES	NC	OTC
EMBRACE TES BLD GLUC	NC	OTC
EQL LANCETS MIS 21G COLR	2	OTC; PV
EQL LANCETS MIS 33G COLR	2	OTC; PV
EQL LANCETS MIS THIN 26G	2	OTC; PV
EQL LANCETS MIS THIN 30G	2	OTC; PV
EQL TRUETEST TES BLD GLUC	NC	OTC
EVENCARE + TES BLD GLUC	NC	OTC
EVENCARE G2 TES	NC	OTC
EVENCARE G3 TES	NC	OTC
EVENCARE TES BLD GLUC	NC	OTC
EVENCARE TES MINI	NC	OTC
EVOLUTION TES AUTOCODE	NC	OTC
EXACTECH TES	NC	OTC
EXACTECH TES R-S-G	NC	OTC
EZ SMART MIS LANCETS	2	OTC; PV
EZ SMART PLS TES BLD GLUC	NC	OTC

Drug Name	Drug Tier	Requirements/Limits
EZ SMART TES BLD GLUC	NC	OTC
EZ-LETS 21G MIS LANCETS	2	OTC; PV
EZ-LETS 23G MIS LANCETS	2	OTC; PV
EZ-LETS 26G MIS LANCETS	2	OTC; PV
EZ-LETS 28G MIS LANCETS	2	OTC; PV
EZ-LETS 30G MIS LANCETS	2	OTC; PV
FASTCLIX MIS LANCETS	NC	OTC
FIFTY50 GLUC TES 2.0	NC	OTC
FIFTY50 SAFE MIS LANCETS	2	OTC; PV
FINE 30 MIS	2	OTC; PV
FINGERSTIX MIS LANCETS	2	OTC; PV
FORA BLOOD TES GLUCOSE	NC	OTC
FORA D15G TES BLD GLUC	NC	OTC
FORA D20 TES BLD GLUC	NC	OTC
FORA D40/G31 TES GLUCOSE	NC	OTC
FORA G20 TES BLD GLUC	NC	OTC
FORA G30/V10 TES BLD GLUC	NC	OTC
FORA GD20 TES BLD GLUC	NC	OTC
FORA GD50 TES	NC	OTC
FORA LANCETS MIS 30G	2	OTC; PV
FORA MIS LANCETS	2	OTC; PV
FORA TN'G TES TN'G VOI	NC	OTC
FORA V10 TES BLD GLUC	NC	OTC
FORA V12 TES BLD GLUC	NC	OTC
FORA V20 TES BLD GLUC	NC	OTC
FORA V30A TES BLD GLUC	NC	OTC
FORACARE TES GD40	NC	OTC
FORACARE TES PREM V10	NC	OTC
FORACARE TES TST N GO	NC	OTC
FORTISCARE TES BLD GLUC	NC	OTC
FREESTYLE MIS LANCETS	2	OTC; PV
FREESTYLE MIS UNISTICK	2	OTC; PV
FREESTYLE TES	NC	OTC
FREESTYLE TES INSULINX	NC	OTC
FREESTYLE TES LITE	NC	OTC
FREESTYLE TES PREC NEO	NC	OTC
GE100 BLOOD TES GLUCOSE	NC	OTC
GENSTRIP 50 TES	NC	OTC
GENTLE-LET MIS 26G	2	OTC; PV
GENTLE-LET MIS 28G	2	OTC; PV
GENTLE-LET MIS LANCETS	2	OTC; PV
GENTLE-LET MIS PLATFORM	2	OTC; PV
GENULTIMATE TES	NC	OTC
GHT TEST TES STRIPS	NC	OTC
GLOBAL 28G MIS LANCETS	2	OTC; PV
GLOBAL 30G MIS LANCETS	2	OTC; PV
GLUCO PERFEC TES 3	NC	OTC

Drug Name	Drug Tier	Requirements/Limits
GLUCOCARD 01 TES PLUS	NC	OTC
GLUCOCARD 01 TES SENSOR	NC	OTC
GLUCOCARD TES EXPRESSI	NC	OTC
GLUCOCARD TES SHINE	NC	OTC
GLUCOCARD TES VITAL	NC	OTC
GLUCOCARD TES X-SENSOR	NC	OTC
GLUCOCOM MIS 28G	2	OTC; PV
GLUCOCOM MIS 30G	2	OTC; PV
GLUCOCOM MIS 33G	2	OTC; PV
GLUCOCOM TES	NC	OTC
GLUCONAVII TES STRIPS	NC	OTC
GLUCOSE TES STRIPS	NC	OTC
GLUCOSOURCE MIS LANCETS	2	OTC; PV
GMATE BLOOD TES GLUCOSE	NC	OTC
GMATE LANCET MIS 30G	2	OTC; PV
GNP LANCETS MIS	2	OTC; PV
GNP LANCETS MIS 21G	2	OTC; PV
GNP LANCETS MIS MICRO	2	OTC; PV
GNP LANCETS MIS SUP THIN	2	OTC; PV
GNP LANCETS MIS THIN	2	OTC; PV
GNP LANCETS MIS THIN 26G	2	OTC; PV
HAEMOLANCE MIS HIGH FLO	2	OTC; PV
HAEMOLANCE MIS LOW FLOW	2	OTC; PV
HAEMOLANCE MIS PLUS	2	OTC; PV
HAEMOLANCE MIS PLUS LOW	2	OTC; PV
HAEMOLANCE MIS PLUS MAX	2	OTC; PV
HAEMOLANCE MIS PLUS PED	2	OTC; PV
HAEMOLANCE MIS RETRACT	2	OTC; PV
HEALTHPRO TES STRIPS	NC	OTC
HLTHY ACCNTS MIS LANC 30G	2	OTC; PV
IN TOUCH LAN MIS 30G	2	OTC; PV
IN TOUCH TES BLOOD	NC	OTC
INCONTROL MIS LANC 28G	2	OTC; PV
INCONTROL MIS LANC 30G	2	OTC; PV
INCONTROL MIS LANC 33G	2	OTC; PV
INFINITY TES BLD GLUC	NC	OTC
KINNEY MIS LANCETS	2	OTC; PV
KINNEY THIN MIS LANCETS	2	OTC; PV
KROGER BLOOD TES GLUCOSE	NC	OTC
KROGER LANCE MIS	2	OTC; PV
KROGER LANCE MIS THIN	2	OTC; PV
KROGER LANCE MIS THIN 30G	2	OTC; PV
KROGER TES	NC	OTC
LANCET ALTER MIS SITE 26G	2	OTC; PV
LANCET CARRY MIS CASE	2	OTC; PV
LANCET MICRO MIS THIN 33G	2	OTC; PV
LANCET STAND MIS 21G	2	OTC; PV

Drug Name	Drug Tier	Requirements/Limits
LANCET SUPER MIS THIN 30G	2	OTC; PV
LANCET ULTRA MIS 28G	2	OTC; PV
LANCET ULTRA MIS FINE	2	OTC; PV
LANCET ULTRA MIS THIN 28G	2	OTC; PV
LANCET ULTRA MIS THIN 30G	2	OTC; PV
LANCETS MICR MIS THIN 33G	2	OTC; PV
LANCETS MIS	2	OTC; PV
LANCETS MIS 21G	2	OTC; PV
LANCETS MIS 21G COLR	2	OTC; PV
LANCETS MIS 23G	2	OTC; PV
LANCETS MIS 26G	2	OTC; PV
LANCETS MIS 28G	2	OTC; PV
LANCETS MIS 30G	2	OTC; PV
LANCETS MIS 31G	2	OTC; PV
LANCETS MIS 33G	2	OTC; PV
LANCETS MIS ORANGE	2	OTC; PV
LANCETS MIS ORIGINAL	2	OTC; PV
LANCETS MIS THIN	2	OTC; PV
LANCETS MIS THIN 26G	2	OTC; PV
LANCETS MIS THIN 30G	2	OTC; PV
LANCETS SUPR MIS THIN 28G	2	OTC; PV
LANCETS THIN MIS	2	OTC; PV
LANCETS THIN MIS 26G	2	OTC; PV
LANCETS THIN MIS 30G	2	OTC; PV
LANCETS ULTR MIS THIN	2	OTC; PV
LANCETS ULTR MIS THIN 28G	2	OTC; PV
LANCETS ULTR MIS THIN 30G	2	OTC; PV
LB LANCET MIS 28G	2	OTC; PV
LIBERTY NEXT TES GEN	NC	OTC
LIBERTY TES	NC	OTC
LIFESCAN MIS UNISTIK2	2	OTC; PV
LITE TOUCH MIS LANCETS	2	OTC; PV
LITETOUCH MIS LANCETS	2	OTC; PV
LONGS LANCET MIS STANDARD	2	OTC; PV
LONGS LANCET MIS THIN	2	OTC; PV
LONGS LANCET MIS ULTRA TH	2	OTC; PV
MAXIMA BLOOD TES GLUCOSE	NC	OTC
MEDICHOICE MIS LANCET	2	OTC; PV
MEDLANCE MIS 30G PLUS	2	OTC; PV
MEDLANCE MIS EXTR 21G	2	OTC; PV
MEDLANCE MIS LITE 25G	2	OTC; PV
MEDLANCE MIS PLUS	2	OTC; PV
MEDLANCE MIS PLUS 30G	2	OTC; PV
MEDLANCE MIS UNV 21G	2	OTC; PV
MEDLANCE PLS MIS 0.8MM	2	OTC; PV
MEDLANCE PLS MIS EXTR 21G	2	OTC; PV
MEDLANCE PLS MIS LITE 25G	2	OTC; PV

Drug Name	Drug Tier	Requirements/Limits
MEDLANCE PLS MIS UNIV 21G	2	OTC; PV
MEIJER BLOOD TES GLUCOSE	NC	OTC
MEIJER LANCE MIS COLOR	2	OTC; PV
MEIJER LANCE MIS UNIV 21G	2	OTC; PV
MEIJER LANCE MIS UNIV 30G	2	OTC; PV
MEIJER LANCE MIS UNIVERSA	2	OTC; PV
MEIJER MIS LANCETS	2	OTC; PV
MEIJER TES TRUETEST	NC	OTC
MEIJER TES TRUETRAC	NC	OTC
MICRO THIN MIS LANC 33G	2	OTC; PV
MICRODOT TES	NC	OTC
MICROLET MIS LANCETS	2	OTC; PV
MICROTAINER MIS LANCET	2	OTC; PV
MONOJECTOR MIS END CAPS	2	OTC; PV
MONOLET MIS LANCETS	2	OTC; PV
MONOLET OPD MIS LANCETS	2	OTC; PV
MONOLETTOR MIS LANCETS	2	OTC; PV
MYGLUCOHEALT MIS LANC 30G	2	OTC; PV
MYGLUCOHEALT TES BLD GLUC	NC	OTC
NEUTEK 2TEK TES STRIPS	NC	OTC
NEXGEN TES	NC	OTC
NO CODING TES BLD GLUC	NC	OTC
NOVA MAX TES GLUCOSE	NC	OTC
NOVA SAFETY MIS LANC 23G	2	OTC; PV
NOVA SAFETY MIS LANC 28G	2	OTC; PV
NOVA SURE MIS LANCETS	2	OTC; PV
OMNIPOD KIT STARTER	2	PV
OMNIPOD MIS 5 PACK	2	PV
ON CALL MIS LANCETS	2	OTC; PV
ON CALL PLUS MIS LANCETS	2	OTC; PV
ON CALL PLUS TES BLD GLUC	NC	OTC
ON CALL TES EXPRESS	NC	OTC
ON CALL VIVD TES BLD GLUC	NC	OTC
ON-THE-GO MIS LANC 30G	2	OTC; PV
ONETOUCH FP MIS LANCETS	2	OTC; PV
ONETOUCH MIS 30G	2	OTC; PV
ONETOUCH MIS COMBO	2	OTC; PV
ONETOUCH MIS LANCETS	2	OTC; PV
ONETOUCH TES ULTRA BL	2	OTC; PV
ONETOUCH TES VERIO	2	OTC; PV
ONETOUCH US MIS LANCETS	2	OTC; PV
OPTIUM TES	NC	OTC
OPTIUMEZ TES	NC	OTC
OPTUMRX TES BLD GLUC	NC	OTC
PC LANCETS MIS 30G	2	OTC; PV
PENLET II MIS REPL CAP	2	OTC; PV
PERFECT 28G MIS LANCETS	2	OTC; PV

Drug Name	Drug Tier	Requirements/Limits
PERFECT 30G MIS LANCETS	2	OTC; PV
PHARMACY COU MIS LANCETS	2	OTC; PV
POCKETCHEM TES EZ	NC	OTC
PRECISION MIS 28G	2	OTC; PV
PRECISION MIS 28G(T)	2	OTC; PV
PRECISION PT TES OF CARE	NC	OTC
PRECISION TES PCX	NC	OTC
PRECISION TES PCX PLUS	NC	OTC
PRECISION TES QID	NC	OTC
PRECISION TES SOF-TACT	NC	OTC
PRECISION TES XTRA	NC	OTC
PRESSURE ACT MIS LANCET	2	OTC; PV
PRESSURE ACT MIS LANCETS	2	OTC; PV
PRO COMFORT MIS 31G	2	OTC; PV
PRO COMFORT MIS LANCETS	2	OTC; PV
PRODIGY MIS 26G	2	OTC; PV
PRODIGY MIS 28G	2	OTC; PV
PRODIGY NO TES CODING	NC	OTC
PSS SAFE LAN MIS	2	OTC; PV
PSS SEL LANC MIS	2	OTC; PV
PSS SEL PLAT MIS	2	OTC; PV
PTS PANELS TES GLUCOSE	NC	OTC
PX LANCETS MIS 28G	2	OTC; PV
PX LANCETS MIS ULT THIN	2	OTC; PV
QC LANCETS MIS 28G	2	OTC; PV
QC LANCETS MIS 30G	2	OTC; PV
QUICKTEK TES	NC	OTC
QUINTET AC TES BLD GLUC	NC	OTC
QUINTET TES BLD GLUC	NC	OTC
RA E-ZJECT MIS 28G	2	OTC; PV
RA E-ZJECT MIS 33G	2	OTC; PV
RA E-ZJECT MIS THIN 26G	2	OTC; PV
RA E-ZJECT MIS THIN 28G	2	OTC; PV
RA E-ZJECT MIS ULT THIN	2	OTC; PV
RA TRUETEST TES	NC	OTC
REALITY MIS LANCETS	2	OTC; PV
REALITY TRIG MIS LANCETS	2	OTC; PV
REFUAH PLUS TES BLD GLUC	NC	OTC
RELION BLOOD TES GLUCOSE	NC	OTC
RELION LANCE MIS STND 21G	2	OTC; PV
RELION LANCE MIS THIN 26G	2	OTC; PV
RELION LANCE MIS THIN 30G	2	OTC; PV
RELION MICRO MIS THIN 33G	2	OTC; PV
RELION PRIME TES	NC	OTC
RELION PRIME TES GLUCOSE	NC	OTC
RELION TES ULTIMA	NC	OTC
RELION ULTRA MIS THIN 32G	2	OTC; PV

Drug Name	Drug Tier	Requirements/Limits
RELION ULTRA MIS THIN PLS	2	OTC; PV
REVEAL TES BLD GLUC	NC	OTC
RIGHTEST ALT MIS ADAPTOR	2	OTC; PV
RIGHTEST MIS GL300	2	OTC; PV
RIGHTEST TES GS100	NC	OTC
RIGHTEST TES GS300	NC	OTC
RIGHTEST TES GS550	NC	OTC
SAFE-T-LANCE MIS 21G	2	OTC; PV
SAFE-T-LANCE MIS 25G	2	OTC; PV
SAFE-T-LANCE MIS HI FLOW	2	OTC; PV
SAFE-T-LANCE MIS LOW FLOW	2	OTC; PV
SAFE-T-LANCE MIS NOR FLOW	2	OTC; PV
SAFE-T-PRO MIS LANCETS	2	OTC; PV
SAFE-T-PRO MIS PLUS	2	OTC; PV
SAFETY 21G MIS LANCETS	2	OTC; PV
SAFETY 28G MIS LANCETS	2	OTC; PV
SAFETY LET MIS LANCETS	2	OTC; PV
SAFETY MIS LANCETS	2	OTC; PV
SAFETY SEAL MIS 28G	2	OTC; PV
SAFETY SEAL MIS 30G	2	OTC; PV
SAPSCARE MIS TWIST	2	OTC; PV
SB LANCETS MIS THIN	2	OTC; PV
SB LANCETS MIS ULTR THN	2	OTC; PV
SIDE BUTTON MIS SAFETY	2	OTC; PV
SINGLE-LET MIS 23G	2	OTC; PV
SM LANCETS MIS 21G	2	OTC; PV
SM LANCETS MIS 33G	2	OTC; PV
SM LANCETS MIS THIN 26G	2	OTC; PV
SM LANCETS MIS THIN 30G	2	OTC; PV
SMART SENSE MIS LANC 21G	2	OTC; PV
SMART SENSE MIS LANC 26G	2	OTC; PV
SMART SENSE MIS LANC 30G	2	OTC; PV
SMART SENSE MIS LANC 33G	2	OTC; PV
SMART SENSE TES TEST	NC	OTC
SMARTEST MIS LANCETS	2	OTC; PV
SMARTEST TES BLD GLUC	NC	OTC
SOFT TOUCH MIS LANCETS	2	OTC; PV
SOFTCLIX MIS LANCETS	2	OTC; PV
SOLUS V2 MIS LANC 28G	2	OTC; PV
SOLUS V2 MIS LANC 30G	2	OTC; PV
SOLUS V2 TES AUDIBLE	NC	OTC
STERILANCE MIS 1.8MM	2	OTC; PV
STERILANCE MIS TL 28G	2	OTC; PV
STERILANCE MIS TL 30G	2	OTC; PV
STERILANCE MIS TL 32G	2	OTC; PV
SUPER THIN MIS LANC 28G	2	OTC; PV
SUPER THIN MIS LANCETS	2	OTC; PV

Drug Name	Drug Tier	Requirements/Limits
SUPREME TES	NC	OTC
SURE COMFORT MIS LANCETS	2	OTC; PV
SURE EDGE TES	NC	OTC
SURE-LANCE MIS 26G	2	OTC; PV
SURE-LANCE MIS LANCETS	2	OTC; PV
SURE-TEST TES EASYPLUS	NC	OTC
SURE-TOUCH MIS UNV LANC	2	OTC; PV
SURECHEK TES BLD GLUC	NC	OTC
SUREFLEX MIS LANCETS	2	OTC; PV
SURELITE MIS LANCETS	2	OTC; PV
TECHLITE AST MIS LANCETS	2	OTC; PV
TECHLITE MIS LANC 30G	2	OTC; PV
TECHLITE MIS LANCETS	2	OTC; PV
TELCARE TES BLD GLUC	NC	OTC
TGT LANCET MIS 23G	2	OTC; PV
TGT LANCET MIS 26G	2	OTC; PV
TGT LANCET MIS 28G	2	OTC; PV
TGT LANCET MIS 30G	2	OTC; PV
TGT LANCET MIS 33G	2	OTC; PV
TGT LANCET MIS ALTERNAT	2	OTC; PV
THIN LANCETS MIS	2	OTC; PV
THIN LANCETS MIS 26G	2	OTC; PV
THIN LANCETS MIS 30G	2	OTC; PV
THINLETS GP MIS 26G	2	OTC; PV
THINLETS MIS 28G(T)	2	OTC; PV
TRAVEL LANCE MIS 30G	2	OTC; PV
TRUE METRIX TES GLUCOSE	NC	OTC
TRUETEST TES	NC	OTC
TRUETEST TES BLD GLUC	NC	OTC
TRUETRACK TES	NC	OTC
TRUETRACK TES BLD GLUC	NC	OTC
TRUPLUS LANC MIS 26G	2	OTC; PV
TRUPLUS LANC MIS 28G	2	OTC; PV
TRUPLUS LANC MIS 30G	2	OTC; PV
TRUPLUS LANC MIS 33G	2	OTC; PV
ULTILET MIS 26G	2	OTC; PV
ULTILET MIS 28G	2	OTC; PV
ULTILET MIS 30G	2	OTC; PV
ULTILET MIS 33G	2	OTC; PV
ULTILET MIS LANCETS	2	OTC; PV
ULTILET MIS SAFETY	2	OTC; PV
ULTIMA TES	NC	OTC
ULTRA THIN MIS 28G	2	OTC; PV
ULTRA THIN MIS 30G	2	OTC; PV
ULTRA THIN MIS 31G	2	OTC; PV
ULTRA THIN MIS 33G	2	OTC; PV
ULTRA THIN MIS LANC 26G	2	OTC; PV

Drug Name	Drug Tier	Requirements/Limits
ULTRA THIN MIS LANC 28G	2	OTC; PV
ULTRA THIN MIS LANC 30G	2	OTC; PV
ULTRA THIN MIS LANCETS	2	OTC; PV
ULTRALANCE MIS 1.8MM	2	OTC; PV
ULTRATRAK TES ULTIMATE	NC	OTC
ULTRATRK PRO TES	NC	OTC
UNIFINE PNTP MIS 29GX12MM	NC	OTC
UNILET CMFR MIS TCH 28G	2	OTC; PV
UNILET CMFR MIS TCH 30G	2	OTC; PV
UNILET EX II MIS 28G	2	OTC; PV
UNILET EXCEL MIS 23G	2	OTC; PV
UNILET G.P MIS SUPR 23G	2	OTC; PV
UNILET G.P. MIS 21G	2	OTC; PV
UNILET GP 28 MIS ULT THIN	2	OTC; PV
UNILET LANC MIS 33G	2	OTC; PV
UNILET LANCE MIS 21G	2	OTC; PV
UNILET LANCE MIS 28G	2	OTC; PV
UNILET LANCE MIS 33G	2	OTC; PV
UNILET LANCT MIS 28G	2	OTC; PV
UNILET LANCT MIS 30G	2	OTC; PV
UNILET LANCT MIS 33G	2	OTC; PV
UNILET MIS 21G	2	OTC; PV
UNILET SUPER MIS 23G	2	OTC; PV
UNILET SUPER MIS G.P. 23G	2	OTC; PV
UNISTIK 1 MIS 2.4MM	2	OTC; PV
UNISTIK 1 MIS 3.0MM	2	OTC; PV
UNISTIK 2 MIS	2	OTC; PV
UNISTIK 2 MIS 1.8MM	2	OTC; PV
UNISTIK 2 MIS 2.4MM	2	OTC; PV
UNISTIK 2 MIS COMFORT	2	OTC; PV
UNISTIK 2 MIS EXTRA	2	OTC; PV
UNISTIK 2 MIS NEONATAL	2	OTC; PV
UNISTIK 2 MIS NORMAL	2	OTC; PV
UNISTIK 2 MIS SUPER	2	OTC; PV
UNISTIK 3 MIS 1.8MM	2	OTC; PV
UNISTIK 3 MIS COMFORT	2	OTC; PV
UNISTIK 3 MIS EXTRA	2	OTC; PV
UNISTIK 3 MIS GENT 30G	2	OTC; PV
UNISTIK 3 MIS NEONATAL	2	OTC; PV
UNISTIK 3 MIS NORMAL	2	OTC; PV
UNISTIK 3 MIS XTR 21G	2	OTC; PV
UNISTIK CZT MIS COMFORT	2	OTC; PV
UNISTIK CZT MIS NORMAL	2	OTC; PV
UNISTIK II MIS LANCETS	2	OTC; PV
UNISTIK SAFE MIS LANC 28G	2	OTC; PV
UNISTIK SAFE MIS LANC 30G	2	OTC; PV
UNISTIK TOUC MIS LANC 21G	2	OTC; PV

Drug Name	Drug Tier	Requirements/Limits
UNISTIK TOUC MIS LANC 23G	2	OTC; PV
UNISTIK TOUC MIS LANC 28G	2	OTC; PV
UNISTIK TOUC MIS LANC 30G	2	OTC; PV
UNISTRIP1 TES GENERIC	NC	OTC
UNIVERSAL 1 MIS 33G	2	OTC; PV
UNIVERSAL 1 MIS LANC 26G	2	OTC; PV
UNIVERSAL 1 MIS LANC 30G	2	OTC; PV
V-GO 20 KIT	3	PV
V-GO 30 KIT	3	PV
V-GO 40 KIT	3	PV
VICTORY TES AGM-4000	NC	OTC
VITALET PRO MIS	2	OTC; PV
VITALET PRO MIS PLUS	2	OTC; PV
VOCAL POINT TES BLD GLUC	NC	OTC
W&F LANCETS MIS 21G	2	OTC; PV
W&F LANCETS MIS 26G	2	OTC; PV
WAVESENSE TES PRESTO	NC	OTC
XPRESS TES BLD GLUC	NC	OTC

ANTIDOTES

ACETADOTE INJ 200MG/ML	3	
<i>acetylcysteine inj 200 mg/ml</i>	1	
ANDEXXA SOL 100MG	3	
ANTIZOL INJ 1GM/ML	3	
ATROPEN INJ 0.5MG	3	
ATROPEN INJ 0.25MG	3	
ATROPEN INJ 1MG	3	
ATROPEN INJ 2MG	3	
ATROPINE SUL INJ 1/2.5ML	NC	
ATROPINE SUL SOL 0.8/2ML	NC	
<i>atropine sulfate soln prefill syr 0.5 mg/5ml</i>	1	
<i>(0.1 mg/ml)</i>		
<i>atropine sulfate soln prefill syr 0.25 mg/5ml</i>	1	
<i>(0.05 mg/ml)</i>		
<i>atropine sulfate soln prefill syr 1 mg/10ml</i>	1	
<i>(0.1 mg/ml)</i>		
BAL IN OIL INJ 100MG/ML	3	
BRIDION SOL 200/2ML	NC	
BRIDION SOL 500/5ML	NC	
CALCIUM DISO INJ 1GM/5ML	3	
CETYLEV TAB 2.5GM	NC	
CETYLEV TAB 500MG	NC	
CHEMET CAP 100MG	3	
CYANOKIT INJ 5GM	3	
DIGIFAB INJ 40MG	3	
DUODOTE INJ	3	
<i>flumazenil iv soln 0.5 mg/5ml</i>	1	
<i>(0.1 mg/ml)</i>		
<i>flumazenil iv soln 1 mg/10ml</i>	1	
<i>(0.1 mg/ml)</i>		

Drug Name	Drug Tier	Requirements/Limits
<i>fomepizole inj 1 gm/ml (for iv infusion)</i>	1	
<i>methylene blue inj 1%</i>	1	
NITHIODOTE KIT	3	
PENTETATE CA SOL 200MG/ML	NC	
PENTETATE ZI SOL 200MG/ML	NC	
PHYSOS SALIC INJ 1MG/ML	3	
PRALIDOXIME INJ 600/2ML	3	
PRAXBIND INJ 2.5/50	3	
PROTOPAM CHL INJ 1GM	3	
PROVAYBLUE INJ	NC	
RADIOGARDASE CAP 0.5GM	3	
SOD NITRITE INJ 30MG/ML	3	
<i>sodium thiosulfate inj 25%</i>	1	
ANTI OBESITY AGENTS, INJECTABLE		
SAXENDA INJ 18MG/3ML	2	PA, PV
ANTI OBESITY AGENTS, ORAL		
ADIPEX-P CAP 37.5MG	3	PA, PV
ADIPEX-P TAB 37.5MG	3	PA, PV
BELVIQ TAB 10MG	2	PA, PV
BELVIQ XR TAB 20MG	2	PA, PV
<i>benzphetamine hcl tab 25 mg</i>	1	PA, PV
<i>benzphetamine hcl tab 50 mg</i>	1	PA, PV
CONTRAVE TAB 8-90MG	2	PA, PV
<i>diethylpropion hcl tab 25 mg</i>	1	PA, PV
<i>diethylpropion hcl tab er 24hr 75 mg</i>	1	PA, PV
LOMAIRA TAB 8MG	NC	
<i>phendimetrazine tartrate cap er 24hr 105 mg</i>	1	PA, PV
<i>phendimetrazine tartrate tab 35 mg</i>	1	PA, PV
<i>phentermine hcl cap 15 mg</i>	1	PA, PV
<i>phentermine hcl cap 30 mg</i>	1	PA, PV
<i>phentermine hcl cap 37.5 mg</i>	1	PA, PV
<i>phentermine hcl tab 37.5 mg</i>	1	PA, PV
QSYMIA CAP 3.75-23	NC	
QSYMIA CAP 7.5-46MG	NC	
QSYMIA CAP 11.25-69	NC	
QSYMIA CAP 15-92MG	NC	
REGIMEX TAB 25MG	3	PA, PV
XENICAL CAP 120MG	3	PA, PV
CALCIUM RECEPTOR ANTAGONISTS		
PARSABIV INJ 2.5-0.5	NC	
PARSABIV INJ 5MG/ML	NC	
PARSABIV INJ 10MG/2ML	NC	
SENSIPAR TAB 30MG	5	PA, SP
SENSIPAR TAB 60MG	5	PA, QL, SP
SENSIPAR TAB 90MG	5	PA, QL, SP

Drug Name	Drug Tier	Requirements/Limits
CALCIUM REGULATORS, BISPHOSPHONATES		
ACTONEL TAB 5MG	3	PV
ACTONEL TAB 30MG	3	PV
ACTONEL TAB 35MG	3	PV
ACTONEL TAB 150MG	3	PV
<i>alendronate sodium oral soln 70 mg/75ml</i>	1	PV
<i>alendronate sodium tab 5 mg</i>	1	PV
<i>alendronate sodium tab 10 mg</i>	1	PV
<i>alendronate sodium tab 35 mg</i>	1	PV
<i>alendronate sodium tab 40 mg</i>	1	
<i>alendronate sodium tab 70 mg</i>	1	PV
AELVIA TAB	3	PV
BINOSTO TAB 70MG	3	PV, ST
BONIVA INJ 3MG/3ML	3	PV
BONIVA TAB 150MG	3	PV
<i>etidronate disodium tab 200 mg</i>	2	
<i>etidronate disodium tab 400 mg</i>	1	
FOSAMAX + D TAB 70-2800	3	PV, ST
FOSAMAX + D TAB 70-5600	3	PV, ST
FOSAMAX TAB 70MG	3	PV
<i>ibandronate sodium iv soln 3 mg/3ml (base equivalent)</i>	1	PV
<i>ibandronate sodium tab 150 mg (base equivalent)</i>	1	PV
<i>pamidronate disodium for inj 30 mg</i>	1	
<i>pamidronate disodium for inj 90 mg</i>	1	
<i>pamidronate disodium iv soln 3 mg/ml</i>	1	
<i>pamidronate disodium iv soln 9 mg/ml</i>	1	
PAMIDRONATE INJ 6MG/ML	3	
RECLAST INJ 5/100ML	6	PA, PV, SP
<i>risedronate sodium tab 5 mg</i>	1	PV
<i>risedronate sodium tab 30 mg</i>	1	PV
<i>risedronate sodium tab 35 mg</i>	1	PV
<i>risedronate sodium tab 150 mg</i>	1	PV
<i>risedronate sodium tab delayed release 35 mg</i>	2	PV
<i>zoledronic acid inj conc for iv infusion 4 mg/5ml</i>	4	PA, SP
<i>zoledronic acid iv soln 5 mg/100ml</i>	4	PA, PV, SP
ZOLEDRONIC INJ 4MG/100	6	PA, SP
ZOMETA INJ 4MG/5ML	6	PA, SP
ZOMETA INJ 4MG/100	6	PA, SP
CALCIUM REGULATORS, CALCITONINS		
<i>calcitonin (salmon) nasal soln 200 unit/act</i>	1	PV
MIACALCIN INJ 200/ML	NC	
CALCIUM REGULATORS, PARATHYROID HORMONES		
FORTEO SOL 600/2.4	5	PA, QL, SP

Drug Name	Drug Tier	Requirements/Limits
NATPARA INJ 25MCG	6	PA, SP
NATPARA INJ 50MCG	6	PA, SP
NATPARA INJ 75MCG	6	PA, SP
NATPARA INJ 100MCG	6	PA, SP
TYMLOS INJ	5	PA, QL, SP
CARNITINE DEFICIENCY AGENTS		
CARNITOR INJ 1GM/5ML	3	
CARNITOR SF SOL 1GM/10ML	NC	
CARNITOR SOL 1GM/10ML	NC	
CARNITOR TAB 330MG	NC	
<i>levocarnitine oral soln 1 gm/10ml (10%)</i>	1	
<i>levocarnitine tab 330 mg</i>	1	
CONTRACEPTIVES, BIPHASIC		
<i>azurette tab 28 day</i>	1	ACA, PV
<i>bekyree tab</i>	1	ACA, PV
<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	1	ACA, PV
<i>kariva tab 28 day</i>	1	ACA, PV
<i>kimidess tab</i>	1	ACA, PV
LO LOESTRIN TAB 1-10-10	2	ACA, PV
MIRCETTE TAB 28 DAY	2	ACA, PV
<i>pimtrea tab</i>	1	ACA, PV
<i>viorele tab</i>	1	ACA, PV
CONTRACEPTIVES, CONTINUOUS		
<i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</i>	1	ACA, PV
CONTRACEPTIVES, EMERGENCY CONTRACEPTION		
<i>aftera tab 1.5mg</i>	2	OTC; ACA, PV
<i>econtra ez tab 1.5mg</i>	2	OTC; ACA, PV
ELLA TAB 30MG	3	ACA, PV
<i>fallback tab 1.5mg</i>	2	OTC; ACA, PV
<i>levonorgestrel tab 1.5 mg</i>	2	OTC; ACA, PV
<i>my way tab 1.5mg</i>	2	OTC; ACA, PV
<i>next choice tab 1.5mg</i>	2	OTC; ACA, PV
<i>opcicon tab 1.5mg</i>	2	OTC; ACA, PV
<i>option 2 tab 1.5mg</i>	2	OTC; ACA, PV
<i>react tab 1.5mg</i>	2	OTC; ACA, PV
<i>take action tab 1.5mg</i>	2	OTC; ACA, PV
CONTRACEPTIVES, EXTENDED CYCLE		
<i>amethia lo tab</i>	1	ACA, PV
<i>amethia tab</i>	1	ACA, PV
<i>ashlyna tab</i>	1	ACA, PV
<i>camrese lo tab</i>	1	ACA, PV
<i>camrese tab</i>	1	ACA, PV
<i>daysee tab</i>	1	ACA, PV
<i>introvale tab</i>	1	ACA, PV

Drug Name	Drug Tier	Requirements/Limits
<i>jolessa tab</i>	1	ACA, PV
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth 1 est tab 0.01mg(7)</i>	1	ACA, PV
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	1	ACA, PV
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	1	ACA, PV
LOSEASONIQUE TAB	3	ACA, PV
<i>quasense tab</i>	1	ACA, PV
SEASONIQUE TAB	3	ACA, PV
<i>setlakin tab</i>	1	ACA, PV
CONTRACEPTIVES, FOUR PHASE		
NATAZIA TAB	2	ACA, PV
CONTRACEPTIVES, IMPLANT		
NEXPLANON IMP 68MG	3	ACA, PV
CONTRACEPTIVES, INJECTABLE		
DEPO-PROVERA INJ 150MG/ML	2	ACA, PV
DEPO-SQ PROV INJ 104	2	ACA, PV
<i>medroxyprogesterone acetate im susp 150 mg/ml</i>	1	ACA, PV
<i>medroxyprogesterone acetate im susp prefilled syr 150 mg/ml</i>	1	ACA, PV
CONTRACEPTIVES, MISCELLANEOUS		
CAYA DPR	3	ACA, PV
FEMCAP MIS 22MM	3	ACA, PV
FEMCAP MIS 26MM	3	ACA, PV
FEMCAP MIS 30MM	3	ACA, PV
OMNIFLEX DPR	3	ACA, PV
PARAGARD IUD T380A	3	ACA, PV
WIDE-SEAL DPR KIT 60	3	ACA, PV
WIDE-SEAL DPR KIT 65	3	ACA, PV
WIDE-SEAL DPR KIT 70	3	ACA, PV
WIDE-SEAL DPR KIT 75	3	ACA, PV
WIDE-SEAL DPR KIT 80	3	ACA, PV
WIDE-SEAL DPR KIT 85	3	ACA, PV
WIDE-SEAL DPR KIT 90	3	ACA, PV
WIDE-SEAL DPR KIT 95	3	ACA, PV
CONTRACEPTIVES, MONOPHASIC, 20 mcg Estrogen		
<i>aubra tab 0.1-0.02</i>	1	ACA, PV
<i>aviane tab</i>	1	ACA, PV
BEYAZ TAB	3	ACA, PV
<i>blisovi 24 tab fe 1/20</i>	1	ACA, PV
<i>blisovi fe tab 1/20</i>	1	ACA, PV
<i>delyla tab 0.1-0.02</i>	1	ACA, PV
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg</i>	1	ACA, PV

Drug Name	Drug Tier	Requirements/Limits
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	1	ACA, PV
FALESSA KIT	3	ACA, PV
<i>falmina tab</i>	1	ACA, PV
<i>gianvi tab 3-0.02mg</i>	1	ACA, PV
<i>junel 1/20 tab</i>	1	ACA, PV
<i>junel fe 24 tab 1/20</i>	1	ACA, PV
<i>junel fe tab 1/20</i>	1	ACA, PV
<i>larin 24 tab fe 1/20</i>	1	ACA, PV
<i>larin fe tab 1/20</i>	1	ACA, PV
<i>larin tab 1/20</i>	1	ACA, PV
<i>larissia tab</i>	1	ACA, PV
<i>lessina tab</i>	1	ACA, PV
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	1	ACA, PV
LOESTRIN FE TAB 1/20	3	ACA, PV
LOESTRIN TAB 1/20-21	3	ACA, PV
<i>loryna tab 3-0.02mg</i>	1	ACA, PV
<i>lutera tab</i>	1	ACA, PV
<i>mibelas 24 chw fe</i>	1	ACA, PV
<i>microgestin tab 1/20</i>	1	ACA, PV
<i>microgestin tab fe 1/20</i>	1	ACA, PV
MINASTRIN 24 CHW FE	3	ACA, PV
<i>nikki tab 3-0.02mg</i>	1	ACA, PV
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	1	ACA, PV
<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	1	ACA, PV
<i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i>	1	ACA, PV
<i>norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</i>	1	ACA, PV
<i>orsythia tab</i>	1	ACA, PV
<i>rajani tab</i>	1	ACA, PV
<i>sronyx tab</i>	1	ACA, PV
<i>tarina fe tab 1/20</i>	1	ACA, PV
TAYTULLA CAP 1MG/20MC	3	ACA, PV
<i>vienva tab 0.1-20</i>	1	ACA, PV
YAZ TAB 3-0.02MG	3	ACA, PV
CONTRACEPTIVES, MONOPHASIC, 25 mcg Estrogen		
GENERESS FE CHW	3	ACA, PV
<i>kaitlib fe chw</i>	1	ACA, PV
<i>layolis fe chw</i>	1	ACA, PV
<i>norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i>	1	ACA, PV
CONTRACEPTIVES, MONOPHASIC, 30 mcg Estrogen		
<i>altavera tab</i>	1	ACA, PV

Drug Name	Drug Tier	Requirements/Limits
<i>apri tab</i>	1	ACA, PV
<i>blisovi fe tab 1.5/30</i>	1	ACA, PV
<i>chateal tab 0.15/30</i>	1	ACA, PV
<i>cryselle-28 tab 28 tabs</i>	1	ACA, PV
<i>cyred tab</i>	1	ACA, PV
DESOGEN-28 TAB	3	ACA, PV
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	1	ACA, PV
<i>elinest tab</i>	1	ACA, PV
<i>emoquette tab</i>	1	ACA, PV
<i>enskyce tab</i>	1	ACA, PV
<i>juleber tab</i>	1	ACA, PV
<i>junel 1.5/30 tab</i>	1	ACA, PV
<i>junel fe tab 1.5/30</i>	1	ACA, PV
<i>kurvelo tab 0.15/30</i>	1	ACA, PV
<i>larin fe tab 1.5/30</i>	1	ACA, PV
<i>larin tab 1.5/30</i>	1	ACA, PV
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	1	ACA, PV
<i>levora-28 tab 0.15/30</i>	1	ACA, PV
LOESTRIN 21 TAB 1.5/30	3	ACA, PV
LOESTRIN FE TAB 1.5/30	3	ACA, PV
<i>low-ogestrel tab</i>	1	ACA, PV
<i>marlissa tab 0.15/30</i>	1	ACA, PV
<i>microgestin tab 1.5/30</i>	1	ACA, PV
<i>microgestin tab fe1.5/30</i>	1	ACA, PV
<i>ocella tab 3-0.03mg</i>	1	ACA, PV
<i>portia-28 tab</i>	1	ACA, PV
<i>reclipsen tab</i>	1	ACA, PV
SAFYRAL TAB	2	ACA, PV
<i>syeda tab 3-0.03mg</i>	1	ACA, PV
YASMIN 28 TAB 3-0.03MG	3	ACA, PV
<i>zarah tab 3-0.03mg</i>	1	ACA, PV

CONTRACEPTIVES, MONOPHASIC, 35 mcg Estrogen

<i>alyacen tab 1/35</i>	1	ACA, PV
<i>balziva tab</i>	1	ACA, PV
<i>briellyn tab</i>	1	ACA, PV
<i>cyclafem tab 1/35</i>	1	ACA, PV
<i>dasetta tab 1/35</i>	1	ACA, PV
<i>estarylla tab 0.25-35</i>	1	ACA, PV
<i>femynor tab 0.25-35</i>	1	ACA, PV
<i>kelnor tab 1/35</i>	1	ACA, PV
<i>mono-linyah tab 0.25-35</i>	1	ACA, PV
<i>mononessa tab</i>	1	ACA, PV
<i>necon tab 0.5/35</i>	1	ACA, PV
<i>norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</i>	1	ACA, PV

Drug Name	Drug Tier	Requirements/Limits
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	1	ACA, PV
<i>nortrel tab 0.5/35</i>	1	ACA, PV
<i>nortrel tab 1/35</i>	1	ACA, PV
ORTHO-CYCLEN TAB 0.25/35	3	ACA, PV
ORTHO-NOVUM TAB 1/35	3	ACA, PV
<i>philith tab 0.4-35</i>	1	ACA, PV
<i>pirmella tab 1/35</i>	1	ACA, PV
<i>previfem tab</i>	1	ACA, PV
<i>sprintec 28 tab 28 day</i>	1	ACA, PV
<i>vyfemla tab 0.4-35</i>	1	ACA, PV
<i>wera tab 0.5/35</i>	1	ACA, PV
<i>wymzya fe chw 0.4mg-35</i>	1	ACA, PV
<i>zenchent tab</i>	1	ACA, PV
<i>zovia 1/35e tab</i>	1	ACA, PV
CONTRACEPTIVES, MONOPHASIC, 50 mcg Estrogen		
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	1	ACA, PV
<i>ogestrel tab</i>	1	ACA, PV
CONTRACEPTIVES, PROGESTIN INTRAUTERINE DEVICES		
KYLEENA IUD 19.5MG	2	ACA, PV
LILETTA IUD 52MG	3	ACA, PV
MIRENA IUD SYSTEM	2	ACA, PV
SKYLA IUD 13.5MG	2	ACA, PV
CONTRACEPTIVES, PROGESTIN ONLY		
<i>camila tab 0.35mg</i>	1	ACA, PV
<i>deblitane tab 0.35mg</i>	1	ACA, PV
<i>errin tab 0.35mg</i>	1	ACA, PV
<i>heather tab 0.35mg</i>	1	ACA, PV
<i>jencycla tab 0.35mg</i>	1	ACA, PV
<i>jolivette tab 0.35mg</i>	1	ACA, PV
<i>lyza tab 0.35mg</i>	1	ACA, PV
<i>nora-be tab 0.35mg</i>	1	ACA, PV
<i>norethindrone tab 0.35 mg</i>	1	ACA, PV
<i>norlyroc tab 0.35mg</i>	1	ACA, PV
ORTHO MICRON TAB 0.35MG	2	ACA, PV
<i>sharobel tab 0.35mg</i>	1	ACA, PV
CONTRACEPTIVES, TRANSDERMAL		
<i>xulane dis 150-35</i>	1	ACA, PV
CONTRACEPTIVES, TRIPHASIC		
<i>alyacen tab 7/7/7</i>	1	ACA, PV
<i>aranelle tab</i>	1	ACA, PV
<i>caziant pak</i>	1	ACA, PV
<i>cyclafem tab 7/7/7</i>	1	ACA, PV
<i>dasetta tab 7/7/7</i>	1	ACA, PV
<i>enpresse-28 tab</i>	1	ACA, PV

Drug Name	Drug Tier	Requirements/Limits
ESTROSTEP FE TAB	3	ACA, PV
<i>leena tab</i>	1	ACA, PV
<i>levonest tab</i>	1	ACA, PV
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	1	ACA, PV
<i>myzilra tab</i>	1	ACA, PV
<i>necon tab 7/7/7</i>	1	ACA, PV
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	1	ACA, PV
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	1	ACA, PV
<i>nortrel tab 7/7/7</i>	1	ACA, PV
ORTHO TRI- TAB CYCLEN	3	ACA, PV
ORTHO TRI- TAB CYCLN LO	3	ACA, PV
ORTHO-NOVUM TAB 7/7/7	3	ACA, PV
<i>pirmella tab 7/7/7</i>	1	ACA, PV
<i>tilia fe tab</i>	1	ACA, PV
<i>tri-estaryll tab</i>	1	ACA, PV
<i>tri-legest tab fe</i>	1	ACA, PV
<i>tri-linyah tab</i>	1	ACA, PV
<i>tri-lo tab estaryll</i>	1	ACA, PV
<i>tri-lo- tab marzia</i>	1	ACA, PV
<i>tri-lo- tab sprintec</i>	1	ACA, PV
TRI-NORINYL TAB 28	3	ACA, PV
<i>tri-sprintec tab</i>	1	ACA, PV
<i>trinessa lo tab</i>	1	ACA, PV
<i>trinessa tab</i>	1	ACA, PV
<i>trivora-28 tab</i>	1	ACA, PV
<i>velivet pak</i>	1	ACA, PV
CONTRACEPTIVES, VAGINAL		
NUVARING MIS	2	ACA, PV
ENDOMETRIOSIS		
<i>danazol cap 50 mg</i>	2	
<i>danazol cap 100 mg</i>	2	
<i>danazol cap 200 mg</i>	2	
LUPANETA KIT 3.75-5	6	PA, SP
LUPANETA KIT 11.25-5	6	PA, SP
ORILISSA TAB 150MG	NC	
ORILISSA TAB 200MG	NC	
SYNAREL SOL 2MG/ML	3	PA
ESTROGEN/PROGESTIN, ORAL		
ACTIVELLA TAB 0.5-0.1	3	
ACTIVELLA TAB 1-0.5MG	3	
<i>amabelz tab 0.5-0.1</i>	1	
<i>amabelz tab 1-0.5mg</i>	1	
ANGELIQ TAB 0.5-1MG	3	

Drug Name	Drug Tier	Requirements/Limits
ANGELIQ TAB 0.25-0.5	3	
<i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i>	1	
<i>estradiol & norethindrone acetate tab 1-0.51 mg</i>		
FEMHRT TAB 0.5-2.5	3	
<i>fyavolv tab 0.5-2.5</i>	1	
<i>fyavolv tab 1-5</i>	1	
<i>jevantique l tab 0.5-2.5</i>	1	
<i>jinteli tab 1mg-5mcg</i>	1	
<i>mimvey lo tab 0.5-0.1</i>	1	
<i>mimvey tab 1-0.5mg</i>	1	
<i>norethindrone acetate-ethinyl estradiol tab 1 0.5 mg-2.5 mcg</i>	1	
<i>norethindrone acetate-ethinyl estradiol tab 1 1 mg-5 mcg</i>		
PREFEST TAB	3	
PREMPHASE TAB	2	
PREMPRO TAB 0.3-1.5	2	
PREMPRO TAB 0.45-1.5	2	
PREMPRO TAB 0.625-5	2	
PREMPRO TAB .625-2.5	2	
ESTROGEN/PROGESTIN, TRANSDERMAL		
CLIMARA PRO DIS WEEKLY	2	
COMBIPATCH DIS .05/.14	2	
COMBIPATCH DIS .05/.25	2	
ESTROGEN/SELECTIVE ESTROGEN RECEPTOR MODULATOR COMBINATIONS		
DUAVEE TAB 0.45-20	2	
ESTROGENS, INJECTABLE		
DELESTROGEN INJ 10MG/ML	3	
DELESTROGEN INJ 20MG/ML	3	
DELESTROGEN INJ 40MG/ML	3	
DEPO-ESTRADI INJ 5MG/ML	3	
<i>estradiol valerate im in oil 20 mg/ml</i>	1	
<i>estradiol valerate im in oil 40 mg/ml</i>	1	
PREMARIN INJ 25MG	3	
ESTROGENS, ORAL		
<i>est estrogen tab mtest hs</i>	1	
<i>esterified estrogens & methyltestosterone tab 1.25-2.5 mg</i>	1	
ESTRACE TAB 0.5MG	3	
ESTRACE TAB 1MG	3	
ESTRACE TAB 2MG	3	
<i>estradiol tab 0.5 mg</i>	1	
<i>estradiol tab 1 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>estradiol tab 2 mg</i>	1	
<i>estrog/mtest tab 1.25-2.5</i>	1	
<i>estropipate tab 0.75 mg</i>	1	
MENEST TAB 0.3MG	3	
MENEST TAB 0.625MG	3	
MENEST TAB 1.25MG	3	
PREMARIN TAB 0.3MG	2	
PREMARIN TAB 0.9MG	2	
PREMARIN TAB 0.45MG	2	
PREMARIN TAB 0.625MG	2	
PREMARIN TAB 1.25MG	2	

ESTROGENS, TRANSDERMAL

ALORA DIS 0.1MG	3	
ALORA DIS 0.05MG	3	
ALORA DIS 0.025MG	3	
ALORA DIS 0.075MG	3	
CLIMARA DIS 0.1MG	3	
CLIMARA DIS 0.05MG	3	
CLIMARA DIS 0.06MG	3	
CLIMARA DIS 0.025MG	3	
CLIMARA DIS 0.075MG	3	
CLIMARA DIS 0.0375MG	3	
DIVIGEL GEL 0.5MG	2	
DIVIGEL GEL 0.25MG	2	
DIVIGEL GEL 1MG/GM	2	
ELESTRIN GEL 0.06%	3	
<i>estradiol td patch twice weekly 0.1 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.05 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.025 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.075 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.0375 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.1 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.05 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.06 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.025 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.075 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i>	1	
ESTROGEL GEL	3	
EVAMIST SPR 1.53MG	2	
MENOSTAR DIS 14MCG	3	
MINIVELLE DIS 0.1MG	2	

Drug Name	Drug Tier	Requirements/Limits
MINIVELLE DIS 0.05MG	2	
MINIVELLE DIS 0.025MG	2	
MINIVELLE DIS 0.075MG	2	
MINIVELLE DIS 0.0375MG	2	
VIVELLE-DOT DIS 0.1MG	3	
VIVELLE-DOT DIS 0.05MG	3	
VIVELLE-DOT DIS 0.025MG	3	
VIVELLE-DOT DIS 0.075MG	3	
VIVELLE-DOT DIS 0.0375MG	3	
ESTROGENS, VAGINAL		
ESTRACE VAG CRE 0.01%	2	
<i>estradiol vaginal cream 0.1 mg/gm</i>	2	
ESTRING MIS 2MG	2	
FEMRING MIS 0.1MG/24	3	
FEMRING MIS 0.05/24H	3	
IMVEXXY MAIN SUP 4MCG	NC	
IMVEXXY MAIN SUP 10MCG	NC	
IMVEXXY STRT SUP 4MCG	NC	
IMVEXXY STRT SUP 10MCG	NC	
PREMARIN VAG CRE 0.625MG	2	
VAGIFEM TAB 10MCG	3	
<i>yuvaferm tab 10mcg</i>	2	
FERTILITY REGULATORS, GNRH/LHRH ANTAGONISTS		
CETROTIDE KIT 0.25MG	5	PA, SP
GANIRELIX AC INJ	6	PA, SP
FERTILITY REGULATORS, OVULATION STIMULANTS, GONADOTROPINS		
BRAVELLE INJ 75UNIT	NC	
<i>chor gonadot inj 10000unt</i>	6	PA, SP
FOLLISTIM AQ INJ 300UNIT	NC	
FOLLISTIM AQ INJ 600UNIT	NC	
FOLLISTIM AQ INJ 900UNIT	NC	
GONAL-F INJ 450UNIT	5	PA, QL, SP
GONAL-F INJ 1050UNIT	5	PA, QL, SP
GONAL-F RFF INJ 75UNIT	5	PA, QL, SP
GONAL-F RFF INJ 300/0.5	5	PA, QL, SP
GONAL-F RFF INJ 450/0.75	5	PA, QL, SP
GONAL-F RFF INJ 900/1.5	5	PA, QL, SP
MENOPUR INJ 75UNIT	6	PA, SP
NOVAREL INJ 5000UNIT	NC	
<i>novarel inj 10000unt</i>	6	PA, SP
OVIDREL INJ	5	PA, SP
<i>pregnyl inj 10000unt</i>	6	PA, SP
FERTILITY REGULATORS, OVULATION STIMULANTS, SYNTHETIC		
<i>clomiphene citrate tab 50 mg</i>	1	PA
GAUCHER DISEASE		

Drug Name	Drug Tier	Requirements/Limits
CERDELGA CAP 84MG	5	PA, QL, SP
CEREZYME INJ 400UNIT	5	PA, QL, SP
ELELYSO INJ 200UNIT	NC	
<i>miglustat cap 100 mg</i>	4	
VPRIV INJ 400UNIT	6	PA, QL, SP
ZAVESCA CAP 100MG	6	PA, QL, SP

GLUCOCORTICOID COMBINATIONS

<i>betamethasone sod phosphate & acetate inj susp 6 (3-3) mg/ml</i>	1	
CELESTONE INJ SOLUSPAN	3	

GLUCOCORTICOIDS

BETAMETH SOD INJ 6MG/ML	3	
BETAMETH SOD INJ 12MG/2ML	3	
CORTEF TAB 5MG	3	
CORTEF TAB 10MG	3	
CORTEF TAB 20MG	3	
<i>cortisone acetate tab 25 mg</i>	1	
<i>deltasone tab 20mg</i>	1	
DEPO-MEDROL INJ 20MG/ML	3	
DEPO-MEDROL INJ 40MG/ML	3	
DEPO-MEDROL INJ 80MG/ML	3	
DEXAMETHASON CON 1MG/ML	3	
DEXAMETHASON SUS 8MG/ML	NC	
<i>dexamethasone elixir 0.5 mg/5ml</i>	1	
<i>dexamethasone sod phosphate preservative free inj 10 mg/ml</i>	1	
<i>dexamethasone sodium phosphate inj 4 mg/ml</i>	1	
<i>dexamethasone sodium phosphate inj 10 mg/ml</i>	1	
<i>dexamethasone sodium phosphate inj 20 mg/5ml</i>	1	
<i>dexamethasone sodium phosphate inj 100 mg/10ml</i>	1	
<i>dexamethasone sodium phosphate inj 120 mg/30ml</i>	1	
<i>dexamethasone soln 0.5 mg/5ml</i>	1	
<i>dexamethasone tab 0.5 mg</i>	1	
<i>dexamethasone tab 0.75 mg</i>	1	
<i>dexamethasone tab 1 mg</i>	1	
<i>dexamethasone tab 1.5 mg</i>	1	
<i>dexamethasone tab 2 mg</i>	1	
<i>dexamethasone tab 4 mg</i>	1	
<i>dexamethasone tab 6 mg</i>	1	
<i>dexamethasone tab therapy pack 1.5 mg (21)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>dexamethasone tab therapy pack 1.5 mg (35)</i>	1	
<i>dexamethasone tab therapy pack 1.5 mg (51)</i>	1	
DEXONTO 0.4% SOL 20MG/5ML	NC	
DEXPAK PAK 6 DAY	NC	
DEXPAK PAK 10 DAY	NC	
DEXPAK PAK 13 DAY	NC	
<i>hydrocortisone tab 5 mg</i>	1	
<i>hydrocortisone tab 10 mg</i>	1	
<i>hydrocortisone tab 20 mg</i>	1	
KENALOG-10 INJ 10MG/ML	3	
KENALOG-40 INJ 40MG/ML	3	
MEDROL TAB 2MG	3	
MEDROL TAB 4MG	3	
MEDROL TAB 8MG	3	
MEDROL TAB 16MG	3	
MEDROL TAB 32MG	3	
METHYLPR ACE INJ 80MG/ML	3	
METHYLPREDNI SUS 50MG/ML	NC	
<i>methylprednisolone acetate inj susp 40 mg/ml</i>	1	
<i>methylprednisolone acetate inj susp 80 mg/ml</i>	2	
<i>methylprednisolone sod succ for inj 40 mg (base equiv)</i>	1	
<i>methylprednisolone sod succ for inj 125 mg (base equiv)</i>	2	
<i>methylprednisolone sod succ for inj 1000 mg (base equiv)</i>	1	
<i>methylprednisolone tab 4 mg</i>	1	
<i>methylprednisolone tab 8 mg</i>	1	
<i>methylprednisolone tab 16 mg</i>	1	
<i>methylprednisolone tab 32 mg</i>	2	
<i>methylprednisolone tab therapy pack 4 mg (21)</i>	1	
MILLIPRED DP PAK 5MG	NC	
MILLIPRED SOL 10MG/5ML	NC	
MILLIPRED TAB 5MG	NC	
ORAPRED ODT TAB 10MG	2	
ORAPRED ODT TAB 15MG	2	
ORAPRED ODT TAB 30MG	2	
<i>prednisolone sod phos orally disintegr tab 10 mg (base eq)</i>	2	
<i>prednisolone sod phos orally disintegr tab 15 mg (base eq)</i>	2	
<i>prednisolone sod phos orally disintegr tab 30 mg (base eq)</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)</i>	2	
<i>prednisolone sod phosphate oral soln 10 mg/5ml (base equiv)</i>	2	
<i>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</i>	1	
<i>prednisolone sod phosphate oral soln 20 mg/5ml (base equiv)</i>	2	
<i>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)</i>	2	
<i>prednisolone syrup 15 mg/5ml (usp solution equivalent)</i>	1	
PREDNISON CON 5MG/ML	3	
<i>prednisone oral soln 5 mg/5ml</i>	2	
<i>prednisone tab 1 mg</i>	1	
<i>prednisone tab 2.5 mg</i>	1	
<i>prednisone tab 5 mg</i>	1	
<i>prednisone tab 10 mg</i>	1	
<i>prednisone tab 20 mg</i>	1	
<i>prednisone tab 50 mg</i>	1	
<i>prednisone tab therapy pack 5 mg (21)</i>	1	
<i>prednisone tab therapy pack 5 mg (48)</i>	1	
<i>prednisone tab therapy pack 10 mg (21)</i>	1	
<i>prednisone tab therapy pack 10 mg (48)</i>	1	
RAYOS TAB 1MG	NC	
RAYOS TAB 2MG	NC	
RAYOS TAB 5MG	NC	
SOLU-CORTEF INJ 100MG	3	
SOLU-CORTEF INJ 250MG	3	
SOLU-CORTEF INJ 500MG	3	
SOLU-CORTEF INJ 1000MG	3	
SOLU-MEDROL INJ 1GM	3	
SOLU-MEDROL INJ 2GM	3	
SOLU-MEDROL INJ 40MG	3	
SOLU-MEDROL INJ 125MG	3	
SOLU-MEDROL INJ 500MG	3	
SOLU-MEDROL INJ 1000MG	3	
TRIAMCINOLON INJ 40MG/ML	3	
TRIAMCINOLON INJ 80MG/2ML	3	
TRIAMCINOLON INJ 80MG/ML	NC	
<i>triamcinolone acetone inj susp 40 mg/ml</i>	1	
VERIPRED 20 SOL 20MG/5ML	3	
ZILRETTA INJ 32MG	NC	
GLUCOSE ELEVATING AGENTS		
GLUCAGEN INJ HYPOKIT	2	
GLUCAGON KIT 1MG	2	
PROGLYCEM SUS 50MG/ML	3	

Drug Name	Drug Tier	Requirements/Limits
HEREDITARY TYROSINEMIA TYPE 1 AGENTS		
ORFADIN CAP 2MG	5	PA, SP
ORFADIN CAP 5MG	5	PA, SP
ORFADIN CAP 10MG	5	PA, SP
ORFADIN CAP 20MG	5	PA, SP
ORFADIN SUS 4MG/ML	5	PA, SP
HUMAN GROWTH HORMONES		
GENOTROPIN INJ 0.2MG	NC	
GENOTROPIN INJ 0.4MG	NC	
GENOTROPIN INJ 0.6MG	NC	
GENOTROPIN INJ 0.8MG	NC	
GENOTROPIN INJ 1.2MG	NC	
GENOTROPIN INJ 1.4MG	NC	
GENOTROPIN INJ 1.6MG	NC	
GENOTROPIN INJ 1.8MG	NC	
GENOTROPIN INJ 1MG	NC	
GENOTROPIN INJ 2MG	NC	
GENOTROPIN INJ 5MG	NC	
GENOTROPIN INJ 12MG	NC	
HUMATROPE INJ 5MG	5	PA, SP
HUMATROPE INJ 6MG	5	PA, SP
HUMATROPE INJ 12MG	5	PA, SP
HUMATROPE INJ 24MG	5	PA, SP
NORDITROPIN INJ 5/1.5ML	NC	
NORDITROPIN INJ 10/1.5ML	NC	
NORDITROPIN INJ 15/1.5ML	NC	
NORDITROPIN INJ 30/3ML	NC	
NUTROPIN AQ INJ 10MG/2ML	NC	
NUTROPIN AQ INJ 20MG/2ML	NC	
NUTROPIN AQ INJ NUSPIN 5	NC	
OMNITROPE INJ 5.8MG	NC	
OMNITROPE INJ 5/1.5ML	NC	
OMNITROPE INJ 10/1.5ML	NC	
SAIZEN INJ 5MG	NC	
SAIZEN INJ 8.8MG	NC	
SEROSTIM INJ 4MG	6	PA, SP
SEROSTIM INJ 5MG	6	PA, SP
SEROSTIM INJ 6MG	6	PA, SP
ZOMACTON INJ 5MG	NC	
ZOMACTON INJ 10MG	NC	
ZORBTIVE INJ 8.8MG	6	PA, SP
HYPERPARATHYROID TREATMENT, VITAMIN D ANALOGS		
<i>calcitriol cap 0.5 mcg</i>	1	
<i>calcitriol cap 0.25 mcg</i>	1	
<i>calcitriol inj 1 mcg/ml</i>	1	
<i>calcitriol oral soln 1 mcg/ml</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>doxercalciferol cap 0.5 mcg</i>	1	
<i>doxercalciferol cap 1 mcg</i>	2	
<i>doxercalciferol cap 2.5 mcg</i>	2	
<i>doxercalciferol inj 4 mcg/2ml (2 mcg/ml)</i>	1	
HECTOROL INJ 2MCG/ML	3	
HECTOROL INJ 4MCG/2ML	3	
<i>paricalcitol cap 1 mcg</i>	1	
<i>paricalcitol cap 2 mcg</i>	2	
<i>paricalcitol cap 4 mcg</i>	1	
<i>paricalcitol iv soln 2 mcg/ml</i>	1	
<i>paricalcitol iv soln 5 mcg/ml</i>	1	
RAYALDEE CAP 30MCG	3	
ROCALTROL CAP 0.5MCG	2	
ROCALTROL CAP 0.25MCG	2	
ROCALTROL SOL 1MCG/ML	2	
ZEMPLAR CAP 1MCG	2	
ZEMPLAR CAP 2MCG	2	
ZEMPLAR INJ 2MCG/ML	3	
ZEMPLAR INJ 5MCG/ML	3	
INSULIN-LIKE GROWTH FACTORS		
INCRELEX INJ 40MG/4ML	6	PA, SP
MINERALOCORTICOIDS		
<i>fludrocortisone acetate tab 0.1 mg</i>	1	
MISCELLANEOUS		
ALDURAZYME INJ 2.9MG/5M	6	PA, SP
AMMONUL INJ 10%	3	
BRINEURA KIT 150/5ML	NC	
<i>cabergoline tab 0.5 mg</i>	1	
CARBAGLU TAB 200MG	6	PA, SP
CERVIDIL VAG MIS 10MG INS	3	
CRYSVITA INJ 10MG/ML	6	PA
CRYSVITA INJ 20MG/ML	6	PA
CRYSVITA INJ 30MG/ML	6	PA
CYSTADANE POW	6	SP
CYSTAGON CAP 50MG	5	PA, SP
CYSTAGON CAP 150MG	5	PA, SP
EGRIFTA SOL 1MG	6	PA, SP
ELAPRASE INJ 6MG/3ML	6	PA, SP
FABRAZYME INJ 5MG	6	PA, SP
FABRAZYME INJ 35MG	6	PA, SP
GALAFOLD CAP 123MG	NC	
H.P. ACTHAR INJ 80UNIT	6	PA, QL, SP
HEMABATE INJ 250MCG	3	
KANUMA INJ 20/10ML	6	PA, SP
KORLYM TAB 300MG	6	PA, QL, SP
LUMIZYME INJ 50MG	6	PA, SP

Drug Name	Drug Tier	Requirements/Limits
LUPR DEP-PED INJ 3M 30MG	5	PA, SP
LUPR DEP-PED INJ 7.5MG	5	PA, SP
LUPR DEP-PED INJ 11.25MG	5	PA, SP
LUPR DEP-PED INJ 15MG	5	PA, SP
MEPSEVII INJ 10MG/5ML	6	PA, SP
METHERGINE TAB 0.2MG	3	
METHY-BUPIVA SUS 8-5MG/ML	NC	
METHYL-BUPIV SUS 40-5MG	NC	
<i>methylergonovine maleate inj 0.2 mg/ml</i>	1	
MYALEPT INJ 11.3MG	6	PA, SP
NAGLAZYME INJ 1MG/ML	6	PA, SP
NITYR TAB 2MG	6	PA, SP
NITYR TAB 5MG	6	PA, SP
NITYR TAB 10MG	6	PA, SP
ONPATTRO SOL 10MG/5ML	NC	
<i>oxytocin inj 10 unit/ml</i>	1	
PITOCIN INJ 10UNT/ML	3	
PREPIDIL GEL 0.5MG/3G	3	
PROCYSBI CAP 25MG	6	PA, SP
PROCYSBI CAP 75MG	6	PA, SP
PROLIA SOL 60MG/ML	5	PA, QL, SP
PROSTIN E2 SUP 20MG	3	
RAVICTI LIQ 1.1GM/ML	NC	
SIGNIFOR INJ 0.3MG/ML	6	PA, QL, SP
SIGNIFOR INJ 0.6MG/ML	6	PA, QL, SP
SIGNIFOR INJ 0.9MG/ML	6	PA, QL, SP
<i>sodium benzoate & sodium phenylacetate iv soln 10-10%</i>	1	
STRENSIQ INJ 18/0.45	6	PA, SP
STRENSIQ INJ 28/0.7ML	6	PA, SP
STRENSIQ INJ 40MG/ML	6	PA, SP
STRENSIQ INJ 80/0.8ML	6	PA, SP
SUPPRELIN LA KIT 50MG	6	PA, SP
SYPRINE CAP 250MG	3	PA, ST
TRIAM-BUPIVA SUS 40-5MG	NC	
<i>trientine hcl cap 250 mg</i>	2	
TRIPTODUR SUS 22.5MG	NC	
VIMIZIM INJ 5MG/5ML	6	PA, SP
XGEVA INJ	6	PA, SP
XURIDEN POW 2GM	6	SP
PHENYLKETONURIA TREATMENT AGENTS		
KUVAN POW 100MG	6	PA, SP
KUVAN POW 500MG	6	PA, SP
KUVAN TAB 100MG	6	PA, SP
PALYNZIQ INJ 2.5/0.5	NC	
PALYNZIQ INJ 10/0.5ML	NC	
PALYNZIQ INJ 20MG/ML	NC	

Drug Name	Drug Tier	Requirements/Limits
PHOSPHATE BINDER AGENTS		
AURYXIA TAB 210MG	3	
<i>calcium acetate (phosphate binder) cap 667 mg (169 mg ca)</i>	1	
<i>calcium acetate (phosphate binder) tab 667 mg</i>	1	
FOSRENOL CHW 500MG	NC	
FOSRENOL CHW 750MG	NC	
FOSRENOL CHW 1000MG	NC	
FOSRENOL POW 750MG	NC	
FOSRENOL POW 1000MG	NC	
<i>lanthanum carbonate chew tab 750 mg (elemental)</i>	2	
<i>lanthanum carbonate chew tab 1000 mg (elemental)</i>	2	
PHOSLYRA SOL	2	
RENAGEL TAB 800MG	3	
REVELA PAK 0.8GM	3	
REVELA PAK 2.4GM	3	
REVELA TAB 800MG	3	
<i>sevelamer carbonate packet 0.8 gm</i>	2	
<i>sevelamer carbonate packet 2.4 gm</i>	2	
<i>sevelamer carbonate tab 800 mg</i>	2	
VELPHORO CHW 500MG	2	
POTASSIUM-REMOVING AGENTS		
<i>kionex pow</i>	1	
<i>kionex sus 15gm/60</i>	2	
LOKELMA PAK 5GM	NC	
LOKELMA PAK 10GM	NC	
<i>sodium polystyrene sulfonate oral susp 15 gm/60ml</i>	2	
<i>sodium polystyrene sulfonate powder</i>	1	
<i>sodium polystyrene sulfonate rectal susp 30 gm/120ml</i>	1	
<i>sps sus 15gm/60</i>	2	
VELTASSA POW 8.4GM	2	
VELTASSA POW 16.8GM	2	
VELTASSA POW 25.2GM	2	
PROGESTINS, INJECTABLE		
MAKENA INJ 250MG/ML	6	PA, SP
MAKENA INJ 275MG	6	PA, SP
<i>progesterone im in oil 50 mg/ml</i>	1	
PROGESTINS, ORAL		
AYGESTIN TAB 5MG	3	
<i>medroxyprogesterone acetate tab 2.5 mg</i>	1	
<i>medroxyprogesterone acetate tab 5 mg</i>	1	
<i>medroxyprogesterone acetate tab 10 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
MEGACE ES SUS 625/5ML	3	
<i>megestrol acetate susp 40 mg/ml</i>	1	
<i>megestrol acetate susp 625 mg/5ml</i>	2	
<i>norethindrone acetate tab 5 mg</i>	1	
<i>progesterone micronized cap 100 mg</i>	1	
<i>progesterone micronized cap 200 mg</i>	1	
PROMETRIUM CAP 100MG	3	
PROMETRIUM CAP 200MG	3	
PROVERA TAB 2.5MG	3	
PROVERA TAB 5MG	3	
PROVERA TAB 10MG	3	
PROGESTINS, VAGINAL		
CRINONE GEL 4% VAG	2	PA
CRINONE GEL 8% VAG	2	PA
ENDOMETRIN SUP 100MG	2	PA
SELECTIVE ESTROGEN RECEPTOR MODULATORS		
EVISTA TAB 60MG	3	PV
<i>raloxifene hcl tab 60 mg</i>	1	ACA, PV
THYROID AGENTS, ANTITHYROID AGENTS		
<i>iodine solution strong 5% (lugol's)</i>	1	
<i>methimazole tab 5 mg</i>	1	
<i>methimazole tab 10 mg</i>	1	
<i>propylthiouracil tab 50 mg</i>	1	
SSKI SOL 1GM/ML	3	
TAPAZOLE TAB 5MG	2	
TAPAZOLE TAB 10MG	2	
THYROID AGENTS, THYROID SUPPLEMENTS		
ARMOUR THYRO TAB 15MG	3	
ARMOUR THYRO TAB 30MG	3	
ARMOUR THYRO TAB 60MG	3	
ARMOUR THYRO TAB 90MG	3	
ARMOUR THYRO TAB 120MG	3	
ARMOUR THYRO TAB 180MG	3	
ARMOUR THYRO TAB 240MG	3	
ARMOUR THYRO TAB 300MG	3	
CYTOMEL TAB 5MCG	2	
CYTOMEL TAB 25MCG	2	
CYTOMEL TAB 50MCG	2	
<i>levo-t tab 25mcg</i>	1	
<i>levo-t tab 50mcg</i>	1	
<i>levo-t tab 75mcg</i>	1	
<i>levo-t tab 88mcg</i>	1	
<i>levo-t tab 100mcg</i>	1	
<i>levo-t tab 112mcg</i>	1	
<i>levo-t tab 125mcg</i>	1	
<i>levo-t tab 137mcg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>levo-t tab 150mcg</i>	1	
<i>levo-t tab 175mcg</i>	1	
<i>levo-t tab 200 mcg</i>	1	
<i>levo-t tab 300 mcg</i>	1	
LEVOTHYROXIN INJ 200MCG	3	
<i>levothyroxine sodium for iv inj 100 mcg</i>	1	
<i>levothyroxine sodium for iv inj 500 mcg</i>	1	
<i>levothyroxine sodium tab 25 mcg</i>	1	
<i>levothyroxine sodium tab 50 mcg</i>	1	
<i>levothyroxine sodium tab 75 mcg</i>	1	
<i>levothyroxine sodium tab 88 mcg</i>	1	
<i>levothyroxine sodium tab 100 mcg</i>	1	
<i>levothyroxine sodium tab 112 mcg</i>	1	
<i>levothyroxine sodium tab 125 mcg</i>	1	
<i>levothyroxine sodium tab 137 mcg</i>	1	
<i>levothyroxine sodium tab 150 mcg</i>	1	
<i>levothyroxine sodium tab 175 mcg</i>	1	
<i>levothyroxine sodium tab 200 mcg</i>	1	
<i>levothyroxine sodium tab 300 mcg</i>	1	
<i>levoxyl tab 25mcg</i>	1	
<i>levoxyl tab 50mcg</i>	1	
<i>levoxyl tab 75mcg</i>	1	
<i>levoxyl tab 88mcg</i>	1	
<i>levoxyl tab 100mcg</i>	1	
<i>levoxyl tab 112mcg</i>	1	
<i>levoxyl tab 125mcg</i>	1	
<i>levoxyl tab 137mcg</i>	1	
<i>levoxyl tab 150mcg</i>	1	
<i>levoxyl tab 175mcg</i>	1	
<i>levoxyl tab 200mcg</i>	1	
<i>liothyronine sodium iv soln 10 mcg/ml</i>	1	
<i>liothyronine sodium tab 5 mcg</i>	1	
<i>liothyronine sodium tab 25 mcg</i>	1	
<i>liothyronine sodium tab 50 mcg</i>	1	
NATURE THROI TAB 162.5MG	2	
NATURE-THROI TAB 16.25MG	2	
NATURE-THROI TAB 32.5MG	2	
NATURE-THROI TAB 48.75MG	2	
NATURE-THROI TAB 65MG	2	
NATURE-THROI TAB 81.25MG	2	
NATURE-THROI TAB 97.5MG	2	
NATURE-THROI TAB 113.75MG	2	
NATURE-THROI TAB 130MG	2	
NATURE-THROI TAB 146.25MG	2	
NATURE-THROI TAB 195MG	2	
NATURE-THROI TAB 260MG	2	
NATURE-THROI TAB 325MG	2	

Drug Name	Drug Tier	Requirements/Limits
<i>np thyroid tab 15mg</i>	1	
<i>np thyroid tab 30mg</i>	1	
<i>np thyroid tab 60mg</i>	1	
<i>np thyroid tab 90mg</i>	1	
SYNTHROID TAB 25MCG	2	
SYNTHROID TAB 50MCG	2	
SYNTHROID TAB 75MCG	2	
SYNTHROID TAB 88MCG	2	
SYNTHROID TAB 100MCG	2	
SYNTHROID TAB 112MCG	2	
SYNTHROID TAB 125MCG	2	
SYNTHROID TAB 137MCG	2	
SYNTHROID TAB 150MCG	2	
SYNTHROID TAB 175MCG	2	
SYNTHROID TAB 200MCG	2	
SYNTHROID TAB 300MCG	2	
THYROLAR-1 TAB 60MG	3	
THYROLAR-1/2 TAB 30MG	3	
THYROLAR-1/4 TAB 15MG	3	
THYROLAR-2 TAB 120MG	3	
THYROLAR-3 TAB 180MG	3	
TIROSINT CAP 13MCG	3	
TIROSINT CAP 25MCG	3	
TIROSINT CAP 50MCG	3	
TIROSINT CAP 75MCG	3	
TIROSINT CAP 88MCG	3	
TIROSINT CAP 100MCG	3	
TIROSINT CAP 112MCG	3	
TIROSINT CAP 125MCG	3	
TIROSINT CAP 137MCG	3	
TIROSINT CAP 150MCG	3	
TRIOSTAT INJ 10MCG/ML	3	
<i>unith direct tab 25mcg</i>	1	
<i>unith direct tab 50mcg</i>	1	
<i>unith direct tab 75mcg</i>	1	
<i>unith direct tab 88mcg</i>	1	
<i>unith direct tab 100mcg</i>	1	
<i>unith direct tab 112mcg</i>	1	
<i>unith direct tab 125mcg</i>	1	
<i>unith direct tab 150mcg</i>	1	
<i>unith direct tab 175mcg</i>	1	
<i>unith direct tab 200mcg</i>	1	
<i>unith direct tab 300mcg</i>	1	
<i>unithroid tab 25mcg</i>	1	
<i>unithroid tab 50mcg</i>	1	
<i>unithroid tab 75mcg</i>	1	
<i>unithroid tab 88mcg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>unithroid tab 100mcg</i>	1	
<i>unithroid tab 112mcg</i>	1	
<i>unithroid tab 125mcg</i>	1	
<i>unithroid tab 137mcg</i>	1	
<i>unithroid tab 150mcg</i>	1	
<i>unithroid tab 175mcg</i>	1	
<i>unithroid tab 200mcg</i>	1	
<i>unithroid tab 300mcg</i>	1	
WESTHROID TAB 32.5MG	3	
WESTHROID TAB 65MG	3	
WESTHROID TAB 97.5MG	3	
WESTHROID TAB 130MG	3	
WESTHROID TAB 195MG	3	
WP THYROID TAB 16.25MG	3	
WP THYROID TAB 32.5MG	3	
WP THYROID TAB 48.75MG	3	
WP THYROID TAB 65MG	3	
WP THYROID TAB 81.25MG	3	
WP THYROID TAB 97.5MG	3	
WP THYROID TAB 113.75MG	3	
WP THYROID TAB 130MG	3	
VASOPRESSIN RECEPTOR ANTAGONISTS		
JYNARQUE PAK 45-15MG	6	PA
JYNARQUE PAK 60-30MG	6	PA
JYNARQUE PAK 90-30MG	6	PA
SAMSCA TAB 15MG	5	PA, SP
SAMSCA TAB 30MG	5	PA, SP
VAPRISOL INJ 20/100ML	3	
VASOPRESSINS		
DDAVP INJ 4MCG/ML	3	
DDAVP SOL 0.01%	2	
DDAVP SPR 0.01%	2	
DDAVP TAB 0.1MG	2	
DDAVP TAB 0.2MG	2	
<i>desmopressin acetate inj 4 mcg/ml</i>	2	
<i>desmopressin acetate nasal spray soln 0.01%</i>	2	
<i>desmopressin acetate nasal spray soln 0.01% (refrigerated)</i>	2	
<i>desmopressin acetate tab 0.1 mg</i>	1	
<i>desmopressin acetate tab 0.2 mg</i>	1	
STIMATE SOL 1.5MG/ML	6	PA, PV, SP
VASOPRE/NAACL INJ 50/250ML	NC	
VASOPRE/NAACL INJ 100/100	NC	
VASOPRE/NAACL INJ 100/250	NC	
VASOPRES/D5W INJ 100/100	NC	

Drug Name	Drug Tier	Requirements/Limits
VASOSTRICT INJ 20UNT/ML	3	

GASTROINTESTINAL

ANTIDIARRHEALS

<i>diphen/atrop tab 2.5mg</i>	1	
<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	2	
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	1	
LOMOTIL TAB 2.5MG	2	
<i>loperamide hcl cap 2 mg</i>	1	
MYTESI TAB 125MG	3	
<i>opium tincture 1% (10 mg/ml) (morphine equiv)</i>	2	
<i>paregoric tincture 2 mg/5ml (morphine equivalent)</i>	2	

ANTIEMETICS

AKYNZEO CAP 300-0.5	3	PA, QL
AKYNZEO INJ 235-0.25	NC	
ALOXI INJ 0.25MG/5	3	PA, QL
ANZEMET TAB 50MG	3	PA, QL
ANZEMET TAB 100MG	3	PA, QL
<i>aprepitant capsule 40 mg</i>	2	PA, QL
<i>aprepitant capsule 80 mg</i>	2	PA, QL
<i>aprepitant capsule 125 mg</i>	2	PA, QL
<i>aprepitant capsule therapy pack 80 & 125 mg</i>	2	PA, QL
BONJESTA TAB 20-20MG	NC	
CESAMET CAP 1MG	3	PA, QL
<i>compro sup 25mg</i>	2	
DICLEGIS TAB 10-10MG	2	
DIMENHYDRIN INJ 50MG/ML	3	
<i>dronabinol cap 2.5 mg</i>	2	PA, QL
<i>dronabinol cap 5 mg</i>	2	PA, QL
<i>dronabinol cap 10 mg</i>	2	PA, QL
<i>droperidol inj 2.5 mg/ml</i>	1	
EMEND CAP 40MG	3	PA, QL
EMEND CAP 80MG	3	PA, QL
EMEND CAP 125MG	3	PA, QL
EMEND SOL 150MG	3	PA, QL
EMEND SUS 125MG	3	PA, QL
EMEND TRIPAC PAK 80 & 125	3	PA, QL
<i>granisetron hcl inj 0.1 mg/ml</i>	1	PA, QL
<i>granisetron hcl inj 1 mg/ml</i>	1	PA, QL
<i>granisetron hcl inj 4 mg/4ml (1 mg/ml)</i>	1	PA, QL
<i>granisetron hcl tab 1 mg</i>	1	PA, QL
MARINOL CAP 2.5MG	3	PA, QL
MARINOL CAP 5MG	3	PA, QL

Drug Name	Drug Tier	Requirements/Limits
MARINOL CAP 10MG	3	PA, QL
<i>meclizine hcl tab 12.5 mg</i>	1	
<i>meclizine hcl tab 25 mg</i>	1	
<i>metoclopramide hcl inj 5 mg/ml (base equivalent)</i>	1	
<i>metoclopramide hcl orally disintegrating tab 5 mg (base eq)</i>	2	
<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i>	1	
<i>metoclopramide hcl tab 5 mg (base equivalent)</i>	1	
<i>metoclopramide hcl tab 10 mg (base equivalent)</i>	1	
<i>ondansetron hcl inj 4 mg/2ml (2 mg/ml)</i>	1	PA, QL
<i>ondansetron hcl inj 40 mg/20ml (2 mg/ml)</i>	1	PA, QL
<i>ondansetron hcl oral soln 4 mg/5ml</i>	1	PA, QL
<i>ondansetron hcl tab 4 mg</i>	1	PA, QL
<i>ondansetron hcl tab 8 mg</i>	1	PA, QL
<i>ondansetron hcl tab 24 mg</i>	1	PA, QL
<i>ondansetron orally disintegrating tab 4 mg</i>	1	PA, QL
<i>ondansetron orally disintegrating tab 8 mg</i>	1	PA, QL
PALONOSETRON INJ 0.25/2ML	3	
<i>phenadoz sup 12.5mg</i>	2	
<i>phenadoz sup 25mg</i>	1	
PHENERGAN INJ 25MG/ML	3	
PHENERGAN INJ 50MG/ML	3	
<i>prochlorperazine edisylate inj 5 mg/ml</i>	1	
<i>prochlorperazine maleate tab 5 mg (base equivalent)</i>	1	
<i>prochlorperazine maleate tab 10 mg (base equivalent)</i>	1	
<i>prochlorperazine suppos 25 mg</i>	2	
<i>promethazine hcl inj 25 mg/ml</i>	1	
<i>promethazine hcl inj 50 mg/ml</i>	1	
<i>promethazine hcl suppos 12.5 mg</i>	2	
<i>promethazine hcl suppos 25 mg</i>	2	
<i>promethazine hcl suppos 50 mg</i>	2	
<i>promethazine hcl syrup 6.25 mg/5ml</i>	1	
<i>promethazine hcl tab 12.5 mg</i>	1	
<i>promethazine hcl tab 25 mg</i>	1	
<i>promethazine hcl tab 50 mg</i>	1	
<i>promethegan sup 12.5mg</i>	2	
<i>promethegan sup 25mg</i>	2	
<i>promethegan sup 50mg</i>	2	
REGLAN TAB 5MG	3	
REGLAN TAB 10MG	3	
SANCUSO DIS 3.1MG	2	PA, QL

Drug Name	Drug Tier	Requirements/Limits
<i>scopolamine td patch 72hr 1 mg/3days</i>	1	
SUSTOL INJ 10/0.4ML	NC	
SYNDROS SOL 5MG/ML	NC	
TIGAN CAP 300MG	3	
TIGAN INJ 100MG/ML	3	
TRANSDERM-SC DIS 1.5MG	3	
<i>trimethobenzamide hcl cap 300 mg</i>	1	
VARUBI INJ	2	PA, QL
VARUBI TAB 90MG	2	PA, QL
ZOFRAN SOL 4MG/5ML	3	PA, QL
ZOFRAN TAB 4MG	3	PA, QL
ZOFRAN TAB 4MG ODT	3	PA, QL
ZOFRAN TAB 8MG	3	PA, QL
ZOFRAN TAB 8MG ODT	3	PA, QL
ZUPLENZ MIS 4MG	3	PA, QL
ZUPLENZ MIS 8MG	3	PA, QL

ANTISPASMODICS

ANASPAZ TAB 0.125MG	2	
BELLA/OPIUM SUP 16.2-30	3	
BELLA/OPIUM SUP 16.2-60	3	
BENTYL CAP 10MG	2	
BENTYL INJ 10MG/ML	3	
<i>chlordiazepoxide hcl-clidinium bromide cap 5-2.5 mg</i>	2	
<i>dicyclomine hcl cap 10 mg</i>	1	
<i>dicyclomine hcl inj 10 mg/ml</i>	1	
<i>dicyclomine hcl oral soln 10 mg/5ml</i>	1	
<i>dicyclomine hcl tab 20 mg</i>	1	
DONNATAL ELX	3	
DONNATAL ELX GRAPE	3	
DONNATAL ELX MINT	3	
DONNATAL TAB	3	
DONNATAL TAB 16.2MG	3	
<i>ed-spaz tab 0.125mg</i>	2	
GLYCOPYRROLA INJ 0.6/3ML	NC	
GLYCOPYRROLA INJ 1MG/5ML	NC	
<i>glycopyrrolate inj 0.2 mg/ml</i>	1	
<i>glycopyrrolate inj 0.4 mg/2ml (0.2 mg/ml)</i>	1	
<i>glycopyrrolate inj 1 mg/5ml (0.2 mg/ml)</i>	1	
<i>glycopyrrolate inj 4 mg/20ml (0.2 mg/ml)</i>	2	
<i>glycopyrrolate tab 1 mg</i>	1	
<i>glycopyrrolate tab 2 mg</i>	1	
<i>hyoscyamine sulfate elixir 0.125 mg/5ml</i>	2	
<i>hyoscyamine sulfate soln 0.125 mg/ml</i>	1	
<i>hyoscyamine sulfate tab 0.125 mg</i>	1	
<i>hyoscyamine sulfate tab disint 0.125 mg</i>	2	
<i>hyoscyamine sulfate tab er 12hr 0.375 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>hyoscyamine sulfate tab sl 0.125 mg</i>	1	
<i>hyosyne dro 0.125/ml</i>	1	
<i>hyosyne elx 0.125/5</i>	2	
LEVBID TAB 0.375 ER	2	
LEVSIN INJ 0.5MG/ML	3	
LEVSIN TAB 0.125MG	2	
LEVSIN/SL SUB 0.125MG	2	
LIBRAX CAP 5-2.5MG	3	
<i>methscopolamine bromide tab 2.5 mg</i>	1	
<i>methscopolamine bromide tab 5 mg</i>	1	
<i>nulev tab 0.125mg</i>	2	
<i>oscimin sr tab 0.375mg</i>	1	
<i>oscimin sub 0.125mg</i>	1	
<i>oscimin tab 0.125mg</i>	2	
<i>phenohydro tab</i>	2	
<i>propantheline bromide tab 15 mg</i>	2	
ROBINUL FORT TAB 2MG	3	
ROBINUL INJ 0.2MG/ML	3	
ROBINUL TAB 1MG	3	
SYMAX DUOTAB TAB	3	
<i>symax-sl sub 0.125mg</i>	1	
<i>symax-sr tab 0.375mg</i>	1	
CHOLELITHOLYTICS		
ACTIGALL CAP 300MG	2	
CHENODAL TAB 250MG	3	PA
URSO 250 TAB 250MG	2	
URSO FORTE TAB 500MG	2	
<i>ursodiol cap 300 mg</i>	2	
<i>ursodiol tab 250 mg</i>	1	
<i>ursodiol tab 500 mg</i>	1	
H2-RECEPTOR ANTAGONISTS		
<i>cimetidine hcl soln 300 mg/5ml</i>	1	
<i>cimetidine tab 200 mg</i>	1	
<i>cimetidine tab 300 mg</i>	1	
<i>cimetidine tab 400 mg</i>	1	
<i>cimetidine tab 800 mg</i>	1	
<i>famotidine for susp 40 mg/5ml</i>	1	
<i>famotidine in nacl 0.9% iv soln 20 mg/50ml</i>	1	
<i>famotidine inj 20 mg/2ml</i>	1	
<i>famotidine inj 40 mg/4ml</i>	1	
<i>famotidine inj 200 mg/20ml</i>	1	
<i>famotidine tab 20 mg</i>	1	
<i>famotidine tab 40 mg</i>	1	
<i>nizatidine cap 150 mg</i>	1	
<i>nizatidine cap 300 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>nizatidine oral soln 15 mg/ml</i>	1	
PEPCID SUS 40MG/5ML	3	
PEPCID TAB 20MG	3	
PEPCID TAB 40MG	3	
<i>ranitidine hcl cap 150 mg</i>	1	
<i>ranitidine hcl cap 300 mg</i>	1	
<i>ranitidine hcl inj 50 mg/2ml (25 mg/ml)</i>	1	
<i>ranitidine hcl inj 150 mg/6ml (25 mg/ml)</i>	1	
<i>ranitidine hcl syrup 15 mg/ml (75 mg/5ml)</i>	1	
<i>ranitidine hcl tab 150 mg</i>	1	
<i>ranitidine hcl tab 300 mg</i>	1	
ZANTAC INJ 25MG/ML	3	
ZANTAC INJ 50MG/2ML	3	
ZANTAC TAB 300MG	3	
INFLAMMATORY BOWEL DISEASE, ORAL AGENTS		
APRISO CAP 0.375GM	2	
ASACOL HD TAB 800MG	NC	
AZULFIDINE TAB 500MG	3	
AZULFIDINE TAB 500MG EN	3	
<i>balsalazide disodium cap 750 mg</i>	1	
<i>budesonide delayed release particles cap 3 mg</i>	2	
COLAZAL CAP 750MG	NC	
DELZICOL CAP 400MG	NC	
DIPENTUM CAP 250MG	3	
ENTOCORT EC CAP 3MG DR	3	
GIAZO TAB 1.1GM	3	
LIALDA TAB 1.2GM	2	
<i>mesalamine tab delayed release 1.2 gm</i>	2	
<i>mesalamine tab delayed release 800 mg</i>	NC	
PENTASA CAP 250MG CR	2	
PENTASA CAP 500MG CR	2	
<i>sulfasalazine tab 500 mg</i>	1	
<i>sulfasalazine tab delayed release 500 mg</i>	1	
UCERIS TAB 9MG	2	
INFLAMMATORY BOWEL DISEASE, RECTAL AGENTS		
CANASA SUP 1000MG	2	
<i>colocort ene 100mg</i>	2	
CORTENEMA ENE 100MG	3	
CORTIFOAM AER 90MG	2	
<i>hydrocortisone enema 100 mg/60ml</i>	2	
<i>mesalamine enema 4 gm</i>	2	
<i>mesalamine rectal enema 4 gm & cleanser wipe kit</i>	2	
ROWASA KIT 4GM	3	
SFROWASA ENE 4GM	3	

Drug Name	Drug Tier	Requirements/Limits
UCERIS AER 2MG/ACT	3	
IRRITABLE BOWEL SYNDROME WITH CONSTIPATION/CHRONIC IDIOPATHIC CONSTIPATION		
AMITIZA CAP 8MCG	2	
AMITIZA CAP 24MCG	2	
LINZESS CAP 72MCG	2	
LINZESS CAP 145MCG	2	
LINZESS CAP 290MCG	2	
TRULANCE TAB 3MG	3	PA
IRRITABLE BOWEL SYNDROME WITH DIARRHEA		
<i>alosetron hcl tab 0.5 mg (base equiv)</i>	2	
<i>alosetron hcl tab 1 mg (base equiv)</i>	2	
LOTRONEX TAB 0.5MG	3	
LOTRONEX TAB 1MG	3	
VIBERZI TAB 75MG	2	
VIBERZI TAB 100MG	2	
LAXATIVES/STOOL SOFTENERS		
CASCARA EXT SAGRADA	3	
CLENPIQ SOL	3	
COLYTE/FLAVR SOL PACKS	3	
<i>constulose sol 10gm/15</i>	1	
<i>gavilyte-c sol</i>	2	PV
<i>gavilyte-g sol</i>	2	PV
<i>gavilyte-h kit</i>	1	ACA, PV
<i>gavilyte-n sol flav pk</i>	1	PV
GIALAX KIT	NC	
GOLYTELY SOL	3	PV
GOLYTELY SOL PINEAPPL	3	PV
KRISTALOSE PAK 10GM	3	
KRISTALOSE PAK 20GM	3	
<i>lactulose solution 10 gm/15ml</i>	1	
<i>mineral oil</i>	1	
MOVIPREP SOL	3	ACA, PV
NULYTELY SOL FLAV PKS	3	PV
OSMOPREP TAB 1.5GM	3	PV
PCP 100 KIT	NC	
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	2	PV
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm</i>	2	PV
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	1	PV
<i>peg-prep kit</i>	1	ACA, PV
<i>pegylax pow</i>	1	
PLENVU SOL	NC	
POLY-PREP KIT	NC	

Drug Name	Drug Tier	Requirements/Limits
<i>polyethylene glycol 3350 oral packet</i>	1	
<i>polyethylene glycol 3350 oral powder</i>	1	
PREPOPIK PAK	3	ACA, PV
SUPREP BOWEL SOL PREP KIT	2	ACA, PV
<i>trilyte sol</i>	1	PV
MISCELLANEOUS		
BUPHENYL POW	NC	
BUPHENYL TAB 500MG	NC	
CARAFATE SUS 1GM/10ML	2	
CARAFATE TAB 1GM	2	
CHOLBAM CAP 50MG	6	PA, SP
CHOLBAM CAP 250MG	6	PA, SP
<i>cromolyn sodium oral conc 100 mg/5ml</i>	2	
CUVPOSA SOL 1MG/5ML	3	
ENTEREG CAP 12MG	3	
<i>enulose sol 10gm/15</i>	1	
EVIVO LIQ	NC	OTC
GASTROCROM CON 100/5ML	3	
GATTEX KIT 5MG	6	PA, QL, SP
<i>generlac sol 10gm/15</i>	1	
KEPIVANCE INJ 6.25MG	3	
<i>lactulose (encephalopathy) solution 10 gm/15ml</i>	1	
OICALIVA TAB 5MG	6	PA, QL, SP
OICALIVA TAB 10MG	6	PA, QL, SP
RECTIV OIN 0.4%	3	
RESTORA RX CAP 60-1.25	3	
RESTORA SPRI PAK 15-0.25	NC	
<i>sodium phenylbutyrate oral powder 3 gm/teaspoonful</i>	4	PA, SP
<i>sodium phenylbutyrate tab 500 mg</i>	4	PA, SP
SUCRAID SOL 8500/ML	3	
<i>sucrafate tab 1 gm</i>	1	
VSL#3 DS PAK 900BIL	3	
XERMELO TAB 250MG	6	PA, SP
OPIOID-INDUCED CONSTIPATION		
MOVANTIK TAB 12.5MG	2	
MOVANTIK TAB 25MG	2	
RELISTOR INJ 8/0.4ML	NC	
RELISTOR INJ 12/0.6ML	NC	
RELISTOR TAB 150MG	NC	
SYMPROIC TAB 0.2MG	NC	
PANCREATIC ENZYMES		
CREON CAP 3000UNIT	2	
CREON CAP 6000UNIT	2	
CREON CAP 12000UNT	2	

Drug Name	Drug Tier	Requirements/Limits
CREON CAP 24000UNT	2	
CREON CAP 36000UNT	2	
PANCREAZE CAP	NC	
PANCREAZE CAP 4200UNIT	3	
PANCREAZE CAP 10500UNT	3	
PANCREAZE CAP 16800UNT	3	
PANCREAZE CAP 21000UNT	3	
PERTZYE CAP 4000UNIT	3	PA, SP
PERTZYE CAP 8000UNIT	3	PA, SP
PERTZYE CAP 16000U	3	PA, SP
VIOKACE TAB 10440	2	
VIOKACE TAB 20880	2	
ZENPEP CAP 3000UNIT	2	
ZENPEP CAP 5000UNIT	2	
ZENPEP CAP 10000UNT	2	
ZENPEP CAP 15000UNT	2	
ZENPEP CAP 25000UNT	2	
PROSTAGLANDINS		
CYTOTEC TAB 100MCG	2	
CYTOTEC TAB 200MCG	2	
<i>misoprostol tab 100 mcg</i>	1	
<i>misoprostol tab 200 mcg</i>	1	
PROTON PUMP INHIBITORS		
ACIPHEX SPR CAP 5MG	3	
ACIPHEX SPR CAP 10MG	3	
ACIPHEX TAB 20MG	3	
DEXILANT CAP 30MG DR	2	
DEXILANT CAP 60MG DR	2	
ESOMEPRAZOLE CAP 49.3MG	3	
<i>esomeprazole magnesium cap delayed release 20 mg (base eq)</i>	2	
<i>esomeprazole magnesium cap delayed release 40 mg (base eq)</i>	2	
<i>esomeprazole sodium for intravenous soln 20 mg (base equiv)</i>	1	
<i>esomeprazole sodium for intravenous soln 40 mg (base equiv)</i>	1	
<i>lansoprazole cap delayed release 15 mg</i>	1	
<i>lansoprazole cap delayed release 30 mg</i>	1	
<i>lansoprazole tab delayed release orally disintegrating 15 mg</i>	2	
<i>lansoprazole tab delayed release orally disintegrating 30 mg</i>	2	
NEXIUM CAP 20MG	NC	
NEXIUM CAP 40MG	NC	
NEXIUM GRA 2.5MG DR	NC	
NEXIUM GRA 5MG DR	NC	

Drug Name	Drug Tier	Requirements/Limits
NEXIUM GRA 10MG DR	NC	
NEXIUM GRA 20MG DR	NC	
NEXIUM GRA 40MG DR	NC	
NEXIUM I.V. INJ 40MG	3	
<i>omeprazole cap delayed release 10 mg</i>	1	
<i>omeprazole cap delayed release 20 mg</i>	1	
<i>omeprazole cap delayed release 40 mg</i>	1	
<i>omeprazole-sodium bicarbonate cap 20-1100 mg</i>	2	
<i>omeprazole-sodium bicarbonate cap 40-1100 mg</i>	2	
<i>omeprazole-sodium bicarbonate powd pack2 for susp 20-1680 mg</i>	2	
<i>omeprazole-sodium bicarbonate powd pack2 for susp 40-1680 mg</i>	2	
<i>pantoprazole sodium ec tab 20 mg (base equiv)</i>	1	
<i>pantoprazole sodium ec tab 40 mg (base equiv)</i>	1	
<i>pantoprazole sodium for iv soln 40 mg (base equiv)</i>	1	
PREVACID CAP 15MG DR	NC	
PREVACID CAP 30MG DR	NC	
PREVACID TAB 15MG STB	NC	
PREVACID TAB 30MG STB	NC	
PRILOSEC POW 2.5MG	3	ST
PRILOSEC POW 10MG	3	ST
PROTONIX INJ 40MG	3	
PROTONIX PAK	NC	
PROTONIX TAB 20MG	NC	
PROTONIX TAB 40MG	NC	
<i>rabeprazole sodium ec tab 20 mg</i>	1	
ZEGERID CAP 20-1100	NC	
ZEGERID CAP 40-1100	NC	
ZEGERID POW 20-1680	NC	
ZEGERID POW 40-1680	NC	
SALIVA STIMULANTS		
<i>cevimeline hcl cap 30 mg</i>	1	
EVOXAC CAP 30MG	2	
<i>pilocarpine hcl tab 5 mg</i>	1	
<i>pilocarpine hcl tab 7.5 mg</i>	1	
SALAGEN TAB 5MG	2	
SALAGEN TAB 7.5MG	2	
STEROIDS, RECTAL		
ANALPRAM HC CRE 2.5-1%	3	
ANALPRAM-HC CRE 1-1%	3	
ANALPRAM-HC LOT 2.5%	3	

Drug Name	Drug Tier	Requirements/Limits
ANALPRM SNGL CRE HC 2.5-1	3	
ANUSOL-HC CRE 2.5%	2	
<i>anusol-hc sup 25mg</i>	2	
<i>hydrocortisone acetate suppos 25 mg</i>	2	
<i>hydrocortisone acetate suppos 30 mg</i>	2	
<i>hydrocortisone acetate w/ pramoxine rectal cream 1-1%</i>	2	
<i>hydrocortisone acetate w/ pramoxine rectal cream 2.5-1%</i>	2	
<i>hydrocortisone rectal cream 1%</i>	1	
<i>hydrocortisone rectal cream 2.5%</i>	1	
<i>lidocaine-hydrocortisone acetate rectal gel kit 3-2.5%</i>	2	
<i>pramcort cre 1-1%</i>	2	
PROCORT CRE	3	
<i>procto-med cre hc 2.5%</i>	1	
<i>procto-pak cre 1%</i>	1	
PROCTOCORT CRE 1%	3	
PROCTOCORT SUP 30MG	3	
PROCTOFOAM AER HC 1%	2	
<i>proctosol hc cre 2.5%</i>	1	
<i>proctozone cre -hc 2.5%</i>	1	

ULCER THERAPY COMBINATIONS

<i>amoxicillin cap-clarithro tab-lansopraz cap dr therapy pack</i>	2	
OMECLAMOX- MIS PAK	3	
PYLERA CAP	2	

GENITOURINARY

BENIGN PROSTATIC HYPERPLASIA

<i>alfuzosin hcl tab er 24hr 10 mg</i>	1	
AVODART CAP 0.5MG	3	
CARDURA XL TAB 4MG	3	
CARDURA XL TAB 8MG	3	
CIALIS TAB 2.5MG	2	ST
CIALIS TAB 5MG	2	ST
<i>dutasteride cap 0.5 mg</i>	1	
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	1	
<i>finasteride tab 5 mg</i>	1	
FLOMAX CAP 0.4MG	3	
JALYN CAP	NC	
PROSCAR TAB 5MG	3	
RAPAFLO CAP 4MG	2	
RAPAFLO CAP 8MG	2	
<i>tamsulosin hcl cap 0.4 mg</i>	1	
UROXATRAL TAB 10MG	NC	

GENITOURINARY IRRIGANTS

Drug Name	Drug Tier	Requirements/Limits
<i>acetic acid irrigation soln 0.25%</i>	1	
<i>argyl saline sol 0.9%</i>	1	
<i>curity salin sol 0.9% irr</i>	1	
<i>glycine irrigation soln 1.5%</i>	1	
<i>neomycin-polymyxin b gu irrigation soln</i>	2	
RENACIDIN SOL	3	
RESECTISOL SOL 5%	3	
<i>sodium chloride irrigation soln 0.9%</i>	1	
SORBITOL SOL 3% IRR	3	
SORBITOL SOL 3.3% IRR	3	
SORBITOL-MAN SOL	3	

MISCELLANEOUS

<i>av-phos 250 tab neutral</i>	1	
<i>bethanechol chloride tab 5 mg</i>	1	
<i>bethanechol chloride tab 10 mg</i>	1	
<i>bethanechol chloride tab 25 mg</i>	1	
<i>bethanechol chloride tab 50 mg</i>	1	
<i>cytra k gra crystals</i>	1	
ELMIRON CAP 100MG	2	
FEM PH GEL	3	
<i>hyolev mb tab 81mg</i>	2	
<i>hyophen tab</i>	2	
INTRAROSA SUP 6.5MG	NC	
K-PHOS TAB	3	
K-PHOS TAB NEUTRAL	3	
K-PHOS TAB NO 2	3	
LITHOSTAT TAB 250MG	3	
<i>me/naphos/mb tab hyo 1</i>	2	
<i>methenamine-hyosc-meth blue-sod phos-phen sal cap 120 mg</i>	1	
ORACIT SOL	3	
<i>phenazo tab 200mg</i>	2	
<i>phenazopyridine hcl tab 100 mg</i>	2	
<i>phenazopyridine hcl tab 200 mg</i>	2	
<i>phospha 250 tab neutral</i>	1	
<i>phospho-trin tab 250 neut</i>	1	
<i>pot & sod citrates w/ cit ac soln 550-500-334 mg/5ml</i>	1	
<i>potassium citrate & citric acid soln 1100-334 mg/5ml</i>	1	
<i>potassium citrate tab er 5 meq (540 mg)</i>	2	
<i>potassium citrate tab er 10 meq (1080 mg)</i>	2	
<i>potassium citrate tab er 15 meq (1620 mg)</i>	1	
PYRIDIDIUM TAB 100MG	2	
PYRIDIDIUM TAB 200MG	2	
<i>relagard gel</i>	2	
RIMSO-50 SOL 50%	NC	

Drug Name	Drug Tier	Requirements/Limits
SHOHL'S SOL MODIFIED	3	
<i>sodium citrate & citric acid soln 500-334 mg/5ml</i>	1	
<i>taron gra crystals</i>	1	
THIOLA TAB 100MG	3	PA
URECHOLINE TAB 5MG	2	
URECHOLINE TAB 10MG	2	
URECHOLINE TAB 25MG	2	
URECHOLINE TAB 50MG	2	
<i>urelle tab</i>	2	
<i>uretron d/s tab</i>	2	
<i>uribel cap 118mg</i>	2	
<i>urimar-t tab</i>	2	
<i>uro-458 tab</i>	2	
<i>uroav-81 tab</i>	2	
UROCIT-K 5 TAB	2	
UROCIT-K 10 TAB	2	
UROCIT-K 15 TAB	2	
UROGESIC- TAB BLUE	3	
<i>uryl tab</i>	2	
<i>uta cap 120mg</i>	1	
<i>vilevev mb tab 81mg</i>	2	
<i>virt-phos tab 250 neut</i>	1	

URINARY ANTISPASMODICS

<i>darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv)</i>	2	
<i>darifenacin hydrobromide tab er 24hr 15 mg (base equiv)</i>	2	
DETROL LA CAP 2MG	NC	
DETROL LA CAP 4MG	NC	
DETROL TAB 1MG	3	
DETROL TAB 2MG	3	
DITROPAN XL TAB 5MG	3	
DITROPAN XL TAB 10MG	3	
DITROPAN XL TAB 15MG	3	
ENABLEX TAB 7.5MG	NC	
ENABLEX TAB 15MG	NC	
<i>flavoxate hcl tab 100 mg</i>	1	
GELNIQUE GEL 10%	3	
MYRBETRIQ TAB 25MG	2	
MYRBETRIQ TAB 50MG	2	
<i>oxybutynin chloride syrup 5 mg/5ml</i>	1	
<i>oxybutynin chloride tab 5 mg</i>	1	
<i>oxybutynin chloride tab er 24hr 5 mg</i>	1	
<i>oxybutynin chloride tab er 24hr 10 mg</i>	1	
<i>oxybutynin chloride tab er 24hr 15 mg</i>	1	
OXYTROL DIS 3.9MG/24	NC	

Drug Name	Drug Tier	Requirements/Limits
<i>tolterodine tartrate cap er 24hr 2 mg</i>	2	
<i>tolterodine tartrate cap er 24hr 4 mg</i>	2	
<i>tolterodine tartrate tab 1 mg</i>	1	
<i>tolterodine tartrate tab 2 mg</i>	1	
TOVIAZ TAB 4MG	2	
TOVIAZ TAB 8MG	2	
<i>tropium chloride cap er 24hr 60 mg</i>	2	
<i>tropium chloride tab 20 mg</i>	1	
VESICARE TAB 5MG	2	
VESICARE TAB 10MG	2	

VAGINAL ANTI-INFECTIVES

AVC CRE 15%	3	
CLEOCIN CRE 2% VAG	2	
CLEOCIN SUP 100MG	3	
<i>clindamycin phosphate vaginal cream 2%</i>	2	
CLINDESSE CRE 2%	3	
GYNAZOLE-1 CRE 2%	3	
METROGEL-VAG GEL 0.75%	2	
<i>metronidazole vaginal gel 0.75%</i>	2	
<i>miconazole 3 sup 200mg</i>	2	
NUVESSA GEL 1.3%	NC	
<i>terconazole vaginal cream 0.4%</i>	1	
<i>terconazole vaginal cream 0.8%</i>	1	PV
<i>terconazole vaginal suppos 80 mg</i>	2	
TRIMO-SAN GEL	NC	
<i>vandazole gel 0.75%</i>	2	

HEMATOLOGIC

ANTICOAGULANTS, INJECTABLE

ANGIOMAX INJ 250MG	3	
ARGATROBAN INJ 50MG/50M	3	
<i>argatroban inj 100mg/ml</i>	1	
ARGATROBAN INJ 125/125	3	
<i>argatroban inj 250 mg/2.5ml (concentrate for iv infusion)</i>	1	
ARGATROBAN INJ 250/250	NC	
ARIXTRA INJ 2.5/0.5	2	PV
ARIXTRA INJ 5/0.4ML	2	PV
ARIXTRA INJ 7.5/0.6	2	PV
ARIXTRA INJ 10/0.8ML	2	PV
BIVALIRUDIN INJ 250/50	NC	
BIVALIRUDIN INJ 500/100	NC	
<i>bivalirudin trifluoroacetate for iv soln 250 mg (base equiv)</i>	1	
DEFITELIO INJ 200/2.5	NC	
<i>enoxaparin sodium inj 30 mg/0.3ml</i>	2	PV
<i>enoxaparin sodium inj 40 mg/0.4ml</i>	2	PV

Drug Name	Drug Tier	Requirements/Limits
<i>enoxaparin sodium inj 60 mg/0.6ml</i>	2	PV
<i>enoxaparin sodium inj 80 mg/0.8ml</i>	2	PV
<i>enoxaparin sodium inj 100 mg/ml</i>	2	PV
<i>enoxaparin sodium inj 120 mg/0.8ml</i>	2	PV
<i>enoxaparin sodium inj 150 mg/ml</i>	2	PV
<i>enoxaparin sodium inj 300 mg/3ml</i>	2	PV
<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml</i>	2	PV
<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml</i>	2	PV
<i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml</i>	2	PV
<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i>	2	PV
FRAGMIN INJ 2500/0.2	2	PV
FRAGMIN INJ 5000/0.2	2	PV
FRAGMIN INJ 7500/0.3	2	PV
FRAGMIN INJ 10000/ML	2	PV
FRAGMIN INJ 12500UNT	2	PV
FRAGMIN INJ 15000UNT	2	PV
FRAGMIN INJ 18000UNT	2	PV
FRAGMIN INJ 95000UNT	2	PV
HEP SOD/D5W INJ 50UNT/ML	3	
HEP SOD/DEXT INJ 25000UNT	NC	
HEP SOD/NAACL INJ 12500UNT	3	
HEP SOD/NAACL INJ 25000UNT	3	
HEP SOD/NAACL INJ 25000UNT	NC	
<i>heparin sodium (porcine) 2 unit/ml in sodium chloride 0.9%</i>	1	
<i>heparin sodium (porcine) 40 unit/ml in d5w</i>	1	
<i>heparin sodium (porcine) 100 unit/ml in d5w</i>	1	
<i>heparin sodium (porcine) inj 1000 unit/ml</i>	2	
<i>heparin sodium (porcine) inj 5000 unit/ml</i>	1	
<i>heparin sodium (porcine) inj 10000 unit/ml</i>	2	
<i>heparin sodium (porcine) inj 20000 unit/ml</i>	2	
<i>heparin sodium (porcine) pf inj 5000 unit/0.5ml</i>	2	
IPRIVASK INJ 15MG	3	PV
LOVENOX INJ 30/0.3ML	3	PV
LOVENOX INJ 40/0.4ML	3	PV
LOVENOX INJ 60/0.6ML	3	PV
LOVENOX INJ 80/0.8ML	3	PV
LOVENOX INJ 100MG/ML	3	PV
LOVENOX INJ 120/0.8	3	PV
LOVENOX INJ 150MG/ML	3	PV

Drug Name	Drug Tier	Requirements/Limits
LOVENOX INJ 300/3ML	3	PV
ANTICOAGULANTS, MISCELLANEOUS		
ACD FORMULA SOL A	3	
ACD FORMULA SOL B	3	
ANTICOAG CIT SOL DEX SOL	3	
ANTICOAG CPD SOL	3	
ANTICOAGULNT SOL SOD CITR	3	
NOCLOT-50 SOL ACD-A	3	
TRICITRASOL CON	3	
ANTICOAGULANTS, ORAL		
BEVYXXA CAP 40MG	NC	
BEVYXXA CAP 80MG	NC	
COUMADIN TAB 1MG	2	PV
COUMADIN TAB 2.5MG	2	PV
COUMADIN TAB 2MG	2	PV
COUMADIN TAB 3MG	2	PV
COUMADIN TAB 4MG	2	PV
COUMADIN TAB 5MG	2	PV
COUMADIN TAB 6MG	2	PV
COUMADIN TAB 7.5MG	2	PV
COUMADIN TAB 10MG	2	PV
ELIQUIS TAB 2.5MG	2	PV
ELIQUIS TAB 5MG	2	PV
<i>jantoven tab 1mg</i>	1	PV
<i>jantoven tab 2.5mg</i>	1	PV
<i>jantoven tab 2mg</i>	1	PV
<i>jantoven tab 3mg</i>	1	PV
<i>jantoven tab 4mg</i>	1	PV
<i>jantoven tab 5mg</i>	1	PV
<i>jantoven tab 6mg</i>	1	PV
<i>jantoven tab 7.5mg</i>	1	PV
<i>jantoven tab 10mg</i>	1	PV
PRADAXA CAP 75MG	NC	
PRADAXA CAP 110MG	NC	
PRADAXA CAP 150MG	NC	
SAVAYSA TAB 15MG	NC	
SAVAYSA TAB 30MG	NC	
SAVAYSA TAB 60MG	NC	
<i>warfarin sodium tab 1 mg</i>	1	PV
<i>warfarin sodium tab 2 mg</i>	1	PV
<i>warfarin sodium tab 2.5 mg</i>	1	PV
<i>warfarin sodium tab 3 mg</i>	1	PV
<i>warfarin sodium tab 4 mg</i>	1	PV
<i>warfarin sodium tab 5 mg</i>	1	PV
<i>warfarin sodium tab 6 mg</i>	1	PV
<i>warfarin sodium tab 7.5 mg</i>	1	PV

Drug Name	Drug Tier	Requirements/Limits
<i>warfarin sodium tab 10 mg</i>	1	PV
XARELTO STAR TAB 15/20MG	2	PV
XARELTO TAB 10MG	2	PV
XARELTO TAB 15MG	2	PV
XARELTO TAB 20MG	2	PV

HEMATOPOIETIC GROWTH FACTORS

ARANESP INJ 10MCG	5	PA, SP
ARANESP INJ 25MCG	5	PA, SP
ARANESP INJ 40MCG	5	PA, SP
ARANESP INJ 60MCG	5	PA, SP
ARANESP INJ 100MCG	5	PA, SP
ARANESP INJ 150MCG	5	PA, SP
ARANESP INJ 200MCG	5	PA, SP
ARANESP INJ 300MCG	5	PA, SP
ARANESP INJ 500MCG	5	PA, SP
EPOGEN INJ 2000/ML	5	PA, SP
EPOGEN INJ 3000/ML	5	PA, SP
EPOGEN INJ 4000/ML	5	PA, SP
EPOGEN INJ 10000/ML	5	PA, SP
EPOGEN INJ 20000/ML	5	PA, SP
FULPHILA INJ 6/0.6ML	NC	
GRANIX INJ 300/0.5	6	PA, SP
GRANIX INJ 480/0.8	6	PA, SP
LEUKINE INJ 250MCG	6	PA, SP
MIRCERA INJ 50MCG	NC	
MIRCERA INJ 75MCG	NC	
MIRCERA INJ 100MCG	NC	
MIRCERA INJ 200MCG	NC	
MIRCERA SOL 30/0.3ML	NC	
MIRCERA SOL 150/0.3	NC	
NEULASTA INJ 6MG/0.6M	6	PA, QL, SP
NEULASTA KIT 6MG/0.6M	6	PA, QL, SP
NEUPOGEN INJ 300/0.5	NC	
NEUPOGEN INJ 300/ML	NC	
NEUPOGEN INJ 300MCG	NC	
NEUPOGEN INJ 480/0.8	NC	
NEUPOGEN INJ 480/1.6	NC	
NEUPOGEN INJ 480MCG	NC	
PROCRIT INJ 2000/ML	5	PA, SP
PROCRIT INJ 3000/ML	5	PA, SP
PROCRIT INJ 4000/ML	5	PA, SP
PROCRIT INJ 10000/ML	5	PA, SP
PROCRIT INJ 20000/ML	5	PA, SP
PROCRIT INJ 40000/ML	5	PA, SP
RETACRIT INJ 2000UNIT	NC	
RETACRIT INJ 3000UNIT	NC	

Drug Name	Drug Tier	Requirements/Limits
RETACRIT INJ 4000UNIT	NC	
RETACRIT INJ 10000UNT	NC	
RETACRIT INJ 40000UNT	NC	
ZARXIO INJ 300/0.5	4	PA, SP
ZARXIO INJ 480/0.8	4	PA, SP

HEMOPHILIA AGENTS

ADVATE INJ 250UNIT	5	PA, PV, SP
ADVATE INJ 500UNIT	5	PA, PV, SP
ADVATE INJ 1000UNIT	5	PA, PV, SP
ADVATE INJ 1500UNIT	5	PA, PV, SP
ADVATE INJ 2000UNIT	5	PA, PV, SP
ADVATE INJ 3000UNIT	5	PA, PV, SP
ADVATE INJ 4000UNIT	5	PA, PV, SP
ADYNOVATE INJ 250UNIT	NC	
ADYNOVATE INJ 500UNIT	NC	
ADYNOVATE INJ 750UNIT	NC	
ADYNOVATE INJ 1000UNIT	NC	
ADYNOVATE INJ 1500UNIT	NC	
ADYNOVATE INJ 2000UNIT	NC	
ADYNOVATE INJ 3000UNIT	NC	
AFSTYLA KIT 250UNIT	6	PA, SP
AFSTYLA KIT 500UNIT	6	PA, SP
AFSTYLA KIT 1000UNIT	6	PA, SP
AFSTYLA KIT 1500UNIT	6	PA, SP
AFSTYLA KIT 2000UNIT	6	PA, SP
AFSTYLA KIT 2500UNIT	6	PA, SP
AFSTYLA KIT 3000UNIT	6	PA, SP
ALPHANATE INJ VWF/HUM	6	PA, PV, SP
ALPHANINE SD INJ 500UNIT	6	PA, PV, SP
ALPHANINE SD INJ 1000UNIT	6	PA, PV, SP
ALPHANINE SD INJ 1500UNIT	6	PA, PV, SP
ALPROLIX INJ 250UNIT	6	PA, PV, SP
ALPROLIX INJ 500UNIT	6	PA, SP
ALPROLIX INJ 1000UNIT	6	PA, SP
ALPROLIX INJ 2000UNIT	6	PA, SP
ALPROLIX INJ 3000UNIT	6	PA, SP
ALPROLIX INJ 4000UNIT	6	PA, PV, SP
BEBULIN INJ 200-1200	6	PA, PV, SP
BENEFIX INJ 250UNIT	6	PA, PV, SP
BENEFIX INJ 500UNIT	6	PA, PV, SP
BENEFIX INJ 1000UNIT	6	PA, PV, SP
BENEFIX INJ 2000UNIT	6	PA, PV, SP
BENEFIX INJ 3000UNIT	6	PA, PV, SP
COAGADEX INJ 250UNIT	6	PA, SP
COAGADEX INJ 500UNIT	6	PA, SP
CORIFACT KIT	6	PV, SP

Drug Name	Drug Tier	Requirements/Limits
ELOCTATE INJ 250UNIT	NC	
ELOCTATE INJ 500UNIT	NC	
ELOCTATE INJ 750UNIT	NC	
ELOCTATE INJ 1000UNIT	NC	
ELOCTATE INJ 1500UNIT	NC	
ELOCTATE INJ 2000UNIT	NC	
ELOCTATE INJ 3000UNIT	NC	
ELOCTATE INJ 4000UNIT	NC	
ELOCTATE INJ 5000UNIT	NC	
ELOCTATE INJ 6000UNIT	NC	
FEIBA INJ	6	PA, PV, SP
FIBRYGA INJ 1MG	6	PA, SP
HELIXATE FS INJ 250UNIT	NC	
HELIXATE FS INJ 500UNIT	NC	
HELIXATE FS INJ 1000UNIT	NC	
HELIXATE FS INJ 2000UNIT	NC	
HELIXATE FS INJ 3000UNIT	NC	
HELIXATE FS SOL 250UNIT	NC	
HELIXATE FS SOL 500UNIT	NC	
HELIXATE FS SOL 1000UNIT	NC	
HEMLIBRA INJ 30MG/ML	6	PA, SP
HEMLIBRA INJ 60/0.4	6	PA, SP
HEMLIBRA INJ 105/0.7	6	PA, SP
HEMLIBRA INJ 150/ML	6	PA, SP
HEMOFIL M INJ 250UNIT	6	PA, PV, SP
HEMOFIL M INJ 500UNIT	6	PA, PV, SP
HEMOFIL M INJ 1000UNIT	6	PA, PV, SP
HEMOFIL M INJ 1700UNIT	6	PA, PV, SP
HUMATE-P SOL 250-600	6	PA, PV, SP
HUMATE-P SOL 500-1200	6	PA, PV, SP
HUMATE-P SOL 2400UNIT	6	PA, PV, SP
IDELVION SOL 250UNIT	NC	
IDELVION SOL 500UNIT	NC	
IDELVION SOL 1000UNIT	NC	
IDELVION SOL 2000UNIT	NC	
IDELVION SOL 3500UNIT	NC	
IXINITY INJ 250UNIT	6	PA, PV, SP
IXINITY INJ 500UNIT	6	PA, PV, SP
IXINITY INJ 1000UNIT	6	PA, PV, SP
IXINITY INJ 1500UNIT	6	PA, PV, SP
IXINITY INJ 2000UNIT	6	PA, PV, SP
IXINITY INJ 3000UNIT	6	PA, PV, SP
KOATE INJ 250UNIT	6	PA, PV, SP
KOATE INJ 500 UNIT	6	PA, PV, SP
KOATE INJ 1000UNIT	6	PA, PV, SP
KOATE-DVI INJ 250UNIT	6	PA, PV, SP
KOATE-DVI INJ 500UNIT	6	PA, PV, SP

Drug Name	Drug Tier	Requirements/Limits
KOATE-DVI INJ 1000UNIT	6	PA, PV, SP
KOGENATE FS INJ 250UNIT	5	PA, PV, SP
KOGENATE FS INJ 500UNIT	5	PA, PV, SP
KOGENATE FS INJ 1000UNIT	5	PA, PV, SP
KOGENATE FS INJ 2000UNIT	5	PA, PV, SP
KOGENATE FS INJ 3000UNIT	5	PA, PV, SP
KOVALTRY INJ 250UNIT	5	PA, PV, SP
KOVALTRY INJ 500UNIT	5	PA, PV, SP
KOVALTRY INJ 1000UNIT	5	PA, PV, SP
KOVALTRY INJ 2000UNIT	5	PA, PV, SP
KOVALTRY INJ 3000UNIT	5	PA, PV, SP
MONOCLATE-P INJ 1000UNIT	6	PA, PV, SP
MONOCLATE-P INJ 1500UNIT	6	PA, PV, SP
MONONINE INJ 1000UNIT	6	PA, PV, SP
NOVOEIGHT INJ 250UNIT	5	PA, PV, SP
NOVOEIGHT INJ 500UNIT	5	PA, PV, SP
NOVOEIGHT INJ 1000UNIT	5	PA, PV, SP
NOVOEIGHT INJ 1500UNIT	5	PA, PV, SP
NOVOEIGHT INJ 2000UNIT	5	PA, PV, SP
NOVOEIGHT INJ 3000UNIT	5	PA, PV, SP
NOVOSEVEN RT INJ 1MG	6	PA, SP
NOVOSEVEN RT INJ 2MG	6	PA, SP
NOVOSEVEN RT INJ 5MG	6	PA, SP
NOVOSEVEN RT INJ 8MG	6	PA, SP
NUWIQ INJ 250UNIT	5	PA, PV, SP
NUWIQ INJ 500UNIT	5	PA, PV, SP
NUWIQ INJ 1000UNIT	5	PA, PV, SP
NUWIQ INJ 2000UNIT	5	PA, PV, SP
NUWIQ KIT 250UNIT	6	PA, PV, SP
NUWIQ KIT 500UNIT	6	PA, PV, SP
NUWIQ KIT 1000UNIT	6	PA, PV, SP
NUWIQ KIT 2000UNIT	6	PA, PV, SP
OBIZUR INJ 500 UNIT	NC	
PROFILNINE INJ 500UNIT	6	PA, PV, SP
PROFILNINE INJ 1000UNIT	6	PA, PV, SP
PROFILNINE INJ 1500UNIT	6	PA, PV, SP
RECOMBINATE INJ	6	PA, PV, SP
RECOMBINATE INJ 220-400	6	PA, PV, SP
RECOMBINATE INJ 401-800	6	PA, PV, SP
RECOMBINATE INJ 801-1240	6	PA, PV, SP
RIASTAP SOL 1GM	6	PA, SP
RIXUBIS INJ 250 UNIT	6	PA, PV, SP
RIXUBIS INJ 500UNIT	6	PA, PV, SP
RIXUBIS INJ 1000UNIT	6	PA, PV, SP
RIXUBIS INJ 2000UNIT	6	PA, PV, SP
RIXUBIS INJ 3000UNIT	6	PA, PV, SP
TRETTEN INJ	6	PA, PV, SP

Drug Name	Drug Tier	Requirements/Limits
VONVENDI INJ 650UNIT	NC	
VONVENDI INJ 1300UNIT	NC	
WILATE INJ	6	PA, SP
XYNTHA INJ 250UNIT	5	PA, PV, SP
XYNTHA INJ 500UNIT	5	PA, PV, SP
XYNTHA INJ 1000UNIT	5	PA, PV, SP
XYNTHA INJ 2000UNIT	5	PA, PV, SP
XYNTHA SOLOF INJ 500UNIT	5	PA, PV, SP
XYNTHA SOLOF INJ 1000UNIT	5	PA, PV, SP
XYNTHA SOLOF INJ 2000UNIT	5	PA, PV, SP
XYNTHA SOLOF INJ 3000UNIT	5	PA, PV, SP
XYNTHA SOLOF KIT 250UNIT	5	PA, PV, SP
HEMOSTATICS, SYSTEMIC		
AMICAR SOL 0.25/ML	NC	
AMICAR TAB 500MG	3	
AMICAR TAB 1000MG	3	
<i>aminocaproic acid inj 250 mg/ml</i>	1	
CYKLOKAPRON INJ 100MG/ML	3	
LYSTEDA TAB 650MG	3	
<i>tranexamic acid iv soln 1000 mg/10ml (100 mg/ml)</i>	1	
<i>tranexamic acid tab 650 mg</i>	2	
HEMOSTATICS, TOPICAL		
ARTISS SOL 2ML	3	
ARTISS SOL 4ML	3	
ARTISS SOL 10ML	3	
MONSELS FERR SOL SUBSULF	3	
RECOTHROM SOL 5000UNIT	3	
RECOTHROM SOL 20000UNT	3	
THROMBIN KIT 5000UNIT	3	
THROMBIN-JMI KIT 5000UNIT	3	
THROMBIN-JMI KIT 20000UNT	3	
THROMBIN-JMI SOL 5000UNIT	3	
THROMBIN-JMI SOL 20000UNT	3	
THROMBOGEN KIT 10000UNT	3	
THROMBOGEN SOL 1000UNIT	3	
THROMBOGEN SOL 10000UNT	3	
TISSEEL SOL	3	
TISSEEL VH KIT 2ML	3	
TISSEEL VH KIT 4ML	3	
TISSEEL VH KIT 10ML	3	
HEREDITARY ANGIOEDEMA AGENTS		
BERINERT INJ 500UNIT	NC	
CINRYZE SOL 500 UNIT	6	PA, PV, SP
FIRAZYR INJ 30MG/3ML	6	PA, SP
HAEGARDA INJ 2000UNIT	6	PA, PV, SP

Drug Name	Drug Tier	Requirements/Limits
HAEGARDA INJ 3000UNIT	6	PA, PV, SP
KALBITOR INJ 10MG/ML	6	PA, SP
RUCONEST INJ 2100UNIT	5	PA, SP
IDIOPATHIC THROMBOCYTOPENIC PURPURA AGENTS		
NPLATE INJ 250MCG	6	PA, SP
NPLATE INJ 500MCG	6	PA, SP
PROMACTA TAB 12.5MG	6	PA, QL, SP
PROMACTA TAB 25MG	6	PA, QL, SP
PROMACTA TAB 50MG	6	PA, QL, SP
PROMACTA TAB 75MG	6	PA, QL, SP
TAVALISSE TAB 100MG	NC	
TAVALISSE TAB 150MG	NC	
IRON CHELATING AGENTS		
<i>deferoxamine mesylate for inj 2 gm</i>	4	PA, SP
<i>deferoxamine mesylate for inj 500 mg</i>	4	PA, SP
DESFERAL INJ 500MG	6	PA, SP
EXJADE TAB 125MG	6	PA, SP
EXJADE TAB 250MG	6	PA, SP
EXJADE TAB 500MG	6	PA, SP
FERRIPROX SOL 100MG/ML	NC	
FERRIPROX TAB 500MG	6	PA, SP
JADENU SPRKL GRA 90MG	6	PA, SP
JADENU SPRKL GRA 180MG	6	PA, SP
JADENU SPRKL GRA 360MG	6	PA, SP
JADENU TAB 90MG	6	PA, SP
JADENU TAB 180MG	6	PA, SP
JADENU TAB 360MG	6	PA, SP
MISCELLANEOUS		
ACTIVASE INJ 50MG	3	
ACTIVASE INJ 100MG	3	
CATHFLO ACTI INJ VASE	3	
CEPROTIN INJ 500 UNIT	6	SP
CEPROTIN INJ 1000UNIT	6	SP
<i>cilostazol tab 50 mg</i>	1	
<i>cilostazol tab 100 mg</i>	1	
DOPTELET TAB 20MG	NC	
ENDARI POW 5GM	6	PA, QL, SP
HESPAN INJ 6%/NAACL	3	
<i>hetastarch in sodium chloride inj 6-0.9%</i>	1	
HEXTEND SOL 6%	3	
<i>Imd 10%/d5w inj</i>	1	
<i>Imd 10%/nacl inj 0.9%</i>	1	
MULPLETA TAB 3MG	NC	
<i>pentoxifylline tab er 400 mg</i>	1	
<i>protamine sulfate inj 10 mg/ml</i>	1	
TNKASE KIT 50MG	3	

Drug Name	Drug Tier	Requirements/Limits
VOLUVEN INJ 6%/NAACL	3	
PAROXYSMAL NOCTURNAL HEMOGLOBINURIA (PNH) AGENTS		
SOLIRIS INJ 10MG/ML	6	PA, SP
PLATELET AGGREGATION INHIBITORS		
AGGRASTAT INJ 3.75/15	NC	
AGGRASTAT INJ 5/100ML	3	
AGGRASTAT INJ 12.5/250	3	
AGGRENOX CAP 25-200MG	3	PV
<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	2	PV
BRILINTA TAB 60MG	2	PV
BRILINTA TAB 90MG	2	PV
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	1	PV
<i>clopidogrel bisulfate tab 300 mg (base equiv)</i>	1	PV
CLOPIDOGREL MIS 75/81MG	NC	
<i>dipyridamole tab 25 mg</i>	1	PV
<i>dipyridamole tab 50 mg</i>	1	PV
<i>dipyridamole tab 75 mg</i>	1	PV
DURLAZA CAP 162.5MG	NC	
EFFIENT TAB 5MG	3	PV
EFFIENT TAB 10MG	3	PV
<i>eptifibatide iv soln 20 mg/10ml (2 mg/ml)</i>	1	
<i>eptifibatide iv soln 75 mg/100ml (0.75 mg/ml)</i>	1	
<i>eptifibatide iv soln 200 mg/100ml (2 mg/ml)</i>	1	
INTEGRILIN INJ	3	
INTEGRILIN INJ 0.75MG/1	3	
INTEGRILIN INJ 2MG/ML	3	
INTEGRILIN INJ 20/10ML	3	
KENGREAL SOL 50MG	NC	
PLAVIX TAB 75MG	NC	
PLAVIX TAB 300MG	NC	
<i>prasugrel hcl tab 5 mg (base equiv)</i>	2	PV
<i>prasugrel hcl tab 10 mg (base equiv)</i>	2	PV
REOPRO INJ 2MG/ML	3	
YOSPRALA TAB 81-40MG	NC	
YOSPRALA TAB 325-40MG	NC	
ZONTIVITY TAB 2.08MG	3	
PLATELET SYNTHESIS INHIBITOR		
AGRYLIN CAP 0.5MG	2	
<i>anagrelide hcl cap 0.5 mg</i>	2	
<i>anagrelide hcl cap 1 mg</i>	2	
STEM CELL MOBILIZERS		

Drug Name	Drug Tier	Requirements/Limits
MOZOBIL INJ	6	PA, SP
IMMUNOLOGIC AGENTS		
ALLERGENIC EXTRACTS		
GRASTEK SUB 2800BAU	2	PA, PV
ODACTRA SUB	3	PA
ORALAIR SUB 300 IR	2	PA, PV
RAGWITEK SUB	2	PA, PV
AUTOIMMUNE AGENTS		
ACTEMRA INJ 80MG/4ML	NC	
ACTEMRA INJ 162/0.9	NC	
ACTEMRA INJ 200/10ML	NC	
ACTEMRA INJ 400/20ML	NC	
CIMZIA KIT	5	PA, QL, SP
CIMZIA KIT STARTER	5	PA, QL, SP
CIMZIA PREFL KIT 200MG/ML	5	PA, QL, SP
COSENTYX INJ 150MG/ML	5	PA, QL, SP
COSENTYX INJ 300DOSE	5	PA, QL, SP
COSENTYX PEN INJ 150MG/ML	5	PA, QL, SP
COSENTYX PEN INJ 300DOSE	5	PA, QL, SP
ENBREL INJ 25/0.5ML	5	PA, QL, SP
ENBREL INJ 25MG	5	PA, QL, SP
ENBREL INJ 50MG/ML	5	PA, QL, SP
ENBREL MINI INJ 50MG/ML	5	PA, QL, SP
ENBREL SRCLK INJ 50MG/ML	5	PA, QL, SP
ENTYVIO INJ 300MG	NC	
HUMIRA INJ 10MG/0.2	5	PA, QL, SP
HUMIRA KIT 20MG/0.4	5	PA, QL, SP
HUMIRA KIT 40MG/0.8	5	PA, QL, SP
HUMIRA PEDIA INJ CROHNS	5	PA, QL, SP
HUMIRA PEN INJ 40MG/0.8	5	PA, QL, SP
HUMIRA PEN INJ CD/UC/HS	5	PA, QL, SP
HUMIRA PEN INJ PS/UV	5	PA, QL, SP
INFLECTRA INJ 100MG	NC	
KEVZARA INJ 150/1.14	5	PA, QL, SP
KEVZARA INJ 200/1.14	5	PA, QL, SP
KINERET INJ	NC	
OLUMIANT TAB 2MG	NC	
ORENCIA CLCK INJ 125MG/ML	5	PA, QL, SP
ORENCIA INJ 50/0.4	5	PA, QL, SP
ORENCIA INJ 87.5/0.7	5	PA, QL, SP
ORENCIA INJ 125MG/ML	5	PA, QL, SP
ORENCIA INJ 250MG	NC	QL
OTEZLA TAB 10/20/30	5	PA, QL, SP
OTEZLA TAB 30MG	5	PA, QL, SP
REMICADE INJ 100MG	NC	
RENFLEXIS INJ 100MG	NC	

Drug Name	Drug Tier	Requirements/Limits
SILIQ INJ 210/1.5	NC	
SIMPONI ARIA SOL 50MG/4ML	5	PA, QL, SP
SIMPONI INJ 50/0.5ML	5	PA, QL, SP
SIMPONI INJ 100MG/ML	5	PA, QL, SP
STELARA INJ 5MG/ML	NC	
STELARA INJ 45MG/0.5	5	PA, QL, SP
STELARA INJ 90MG/ML	5	PA, QL, SP
TALTZ INJ 80MG/ML	5	PA, QL, SP
TREMFYA INJ 100MG/ML	NC	
XELJANZ TAB 5MG	NC	
XELJANZ XR TAB 11MG	NC	

DISEASE-MODIFYING ANTIRHEUMATIC DRUGS (DMARDs)

ARAVA TAB 10MG	2	
ARAVA TAB 20MG	2	
CUPRIMINE CAP 250MG	3	PA, ST
DEPEN TITRA TAB 250MG	3	
<i>hydroxychloroquine sulfate tab 200 mg</i>	1	
<i>leflunomide tab 10 mg</i>	1	
<i>leflunomide tab 20 mg</i>	1	
OTREXUP INJ 10MG	NC	
OTREXUP INJ 12.5/0.4	NC	
OTREXUP INJ 15MG	NC	
OTREXUP INJ 17.5/0.4	NC	
OTREXUP INJ 20MG	NC	
OTREXUP INJ 22.5/0.4	NC	
OTREXUP INJ 25MG	NC	
PLAQUENIL TAB 200MG	2	
RASUVO INJ 7.5MG	5	PA, QL, SP
RASUVO INJ 10MG	5	PA, QL, SP
RASUVO INJ 12.5MG	5	PA, QL, SP
RASUVO INJ 15MG	5	PA, QL, SP
RASUVO INJ 17.5MG	5	PA, QL, SP
RASUVO INJ 20MG	5	PA, QL, SP
RASUVO INJ 22.5MG	5	PA, QL, SP
RASUVO INJ 25MG	5	PA, QL, SP
RASUVO INJ 30MG	5	PA, QL, SP
RIDAURA CAP 3MG	3	

IMMUNE GLOBULINS

ATGAM INJ 250MG	2	
BIVIGAM INJ 10%	M	
CARIMUNE NF INJ 6GM	M	
CUVITRU INJ 2GM/10ML	NC	
CUVITRU INJ 4GM/20ML	NC	
CUVITRU INJ 8GM/40ML	NC	
CUVITRU SOL 1GM/5ML	NC	
CYTOGAM INJ	M	

Drug Name	Drug Tier	Requirements/Limits
GAMMAGARD INJ 1GM/10ML	5	PA, SP
GAMMAGARD INJ 2.5GM/25	5	PA, SP
GAMMAGARD INJ 5GM/50ML	5	PA, SP
GAMMAGARD INJ 10GM/100	5	PA, SP
GAMMAGARD INJ 20GM/200	5	PA, SP
GAMMAKED INJ 1GM/10ML	5	PA, SP
GAMMAKED INJ 2.5GM/25	5	PA, SP
GAMMAKED INJ 5GM/50ML	5	PA, SP
GAMMAKED INJ 10GM/100	5	PA, SP
GAMMAKED INJ 20GM/200	5	PA, SP
GAMUNEX-C INJ 1GM/10ML	5	PA, SP
GAMUNEX-C INJ 2.5GM/25	5	PA, SP
GAMUNEX-C INJ 5GM/50ML	5	PA, SP
GAMUNEX-C INJ 10GM/100	5	PA, SP
GAMUNEX-C INJ 20GM/200	5	PA, SP
HEPAGAM B INJ	M	
HIZENTRA INJ 1GM/5ML	5	PA, SP
HIZENTRA INJ 2GM/10ML	5	PA, SP
HIZENTRA INJ 4GM/20ML	5	PA, SP
HIZENTRA INJ 10/50ML	5	PA, SP
HYPERHEP B INJ S/D	M	
HYPERRAB INJ 300UNIT	3	
HYPERRAB INJ 1500UNIT	3	
HYPERRAB S/D INJ 150/ML	3	
HYPERRAB S/D INJ 300/2ML	3	
HYPERRHO S/D INJ 50MCG	M	
HYPERRHO S/D INJ 300MCG	M	
HYPERTET S/D INJ 250/ML	3	
HYQVIA INJ 2.5-200	5	PA, SP
HYQVIA INJ 5-400	5	PA, SP
HYQVIA INJ 10-800	5	PA, SP
HYQVIA INJ 20-1600	5	PA, SP
HYQVIA INJ 30-2400	5	PA, SP
IMOGAM RABIE INJ 150/ML	3	
IMOGAM RABIE INJ 300/2ML	3	
MICRHOGAM PL INJ 50MCG	M	
NABI-HB INJ	M	
RHOGAM PLUS INJ 300MCG	M	
RHOPHYLAC INJ 1500/2ML	M	
THYMOGLOBULN INJ 25MG	2	
VARIZIG INJ 125UNIT	M	
WINRHO SDF INJ 1500UNIT	M	
WINRHO SDF INJ 2500UNIT	M	
WINRHO SDF INJ 5000UNIT	M	
WINRHO SDF INJ 15000UNT	M	

IMMUNOMODULATORS, INTERFERONS

Drug Name	Drug Tier	Requirements/Limits
ACTIMMUNE INJ 2MU/0.5	6	PA, SP
ALFERON N INJ 5MU/ML	6	SP
INTRON A INJ 10MU	6	PA, SP
INTRON A INJ 18MU	6	PA, SP
INTRON A INJ 25MU	6	PA, SP
INTRON A INJ 50MU	6	PA, SP
PEGASYS INJ	NC	
PEGASYS INJ 180MCG/M	NC	
PEGASYS INJ PROCLICK	NC	
PEGASYS KIT 180MCG/M	NC	
PEGINTRON KIT 50MCG	5	PA, SP
SYLATRON KIT 200MCG	6	PA, QL, SP
SYLATRON KIT 300MCG	6	PA, QL, SP
SYLATRON KIT 600MCG	6	PA, QL, SP
IMMUNOMODULATORS, MISCELLANEOUS		
ARCALYST INJ 220MG	6	PA, QL, SP
ZINPLAVA SOL 25MG/ML	NC	
IMMUNOSUPPRESSANTS, ANTIMETABOLITES		
AZASAN TAB 75 MG	2	
AZASAN TAB 100MG	2	
AZATHIOPRINE INJ 100MG	NC	
<i>azathioprine tab 50 mg</i>	1	
CELLCEPT CAP 250MG	2	PV, SP
CELLCEPT IV INJ 500MG	2	PV, SP
CELLCEPT SUS 200MG/ML	2	PV, SP
CELLCEPT TAB 500MG	2	PV, SP
IMURAN TAB 50MG	2	
<i>mycophenolate mofetil cap 250 mg</i>	1	PV, SP
<i>mycophenolate mofetil for oral susp 200 mg/ml</i>	1	PV, SP
<i>mycophenolate mofetil hcl for iv soln 500 mg (base equiv)</i>	1	PV, SP
<i>mycophenolate mofetil tab 500 mg</i>	1	PV, SP
<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i>	1	PV, SP
<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i>	1	PV, SP
MYFORTIC TAB 180MG	2	PV, SP
MYFORTIC TAB 360MG	2	PV, SP
IMMUNOSUPPRESSANTS, CALCINEURIN INHIBITORS		
ASTAGRAF XL CAP 0.5MG	2	PV, SP
ASTAGRAF XL CAP 1MG	2	PV, SP
ASTAGRAF XL CAP 5MG	2	PV, SP
<i>cyclosporine cap 25 mg</i>	1	PV, SP
<i>cyclosporine cap 100 mg</i>	1	PV, SP
<i>cyclosporine iv soln 50 mg/ml</i>	1	PV
<i>cyclosporine modified cap 25 mg</i>	1	PV, SP

Drug Name	Drug Tier	Requirements/Limits
<i>cyclosporine modified cap 50 mg</i>	1	PV, SP
<i>cyclosporine modified cap 100 mg</i>	1	PV, SP
<i>cyclosporine modified oral soln 100 mg/ml</i>	1	PV, SP
ENVARUSUS XR TAB 0.75MG	NC	
ENVARUSUS XR TAB 1MG	NC	
ENVARUSUS XR TAB 4MG	NC	
<i>gengraf cap 25mg</i>	1	PV, SP
<i>gengraf cap 100mg</i>	1	PV, SP
<i>gengraf sol 100mg/ml</i>	1	PV, SP
NEORAL CAP 25MG	2	PV, SP
NEORAL CAP 100MG	2	PV, SP
NEORAL SOL 100MG/ML	2	PV, SP
PROGRAF CAP 0.5MG	2	PV, SP
PROGRAF CAP 1MG	2	PV, SP
PROGRAF CAP 5MG	2	PV, SP
PROGRAF INJ 5MG/ML	2	PV, SP
SANDIMMUNE CAP 25MG	2	PV, SP
SANDIMMUNE CAP 100MG	2	PV, SP
SANDIMMUNE INJ 50MG/ML	2	PV, SP
SANDIMMUNE SOL 100MG/ML	2	PV, SP
<i>tacrolimus cap 0.5 mg</i>	1	PV, SP
<i>tacrolimus cap 1 mg</i>	1	PV, SP
<i>tacrolimus cap 5 mg</i>	1	PV, SP
IMMUNOSUPPRESSANTS, MISCELLANEOUS		
BENLYSTA INJ 120MG	6	PA, SP
BENLYSTA INJ 400MG	6	PA, SP
NULOJIX INJ 250MG	2	PV, SP
SIMULECT INJ 10MG	2	
SIMULECT INJ 20MG	2	
IMMUNOSUPPRESSANTS, RAPAMYCIN DERIVATIVE		
RAPAMUNE SOL 1MG/ML	2	PV, SP
RAPAMUNE TAB 0.5MG	2	PV, SP
RAPAMUNE TAB 1MG	2	PV, SP
RAPAMUNE TAB 2MG	2	PV, SP
<i>sirolimus tab 0.5 mg</i>	1	PV, SP
<i>sirolimus tab 1 mg</i>	1	PV, SP
<i>sirolimus tab 2 mg</i>	1	PV, SP
ZORTRESS TAB 0.5MG	2	PV, SP
ZORTRESS TAB 0.25MG	2	PV, SP
ZORTRESS TAB 0.75MG	2	PV, SP
MISCELLANEOUS		
ADAGEN INJ 250/ML	6	PA, SP
VACCINES		
ACTHIB INJ	2	ACA, PV
ADACEL INJ	2	ACA, PV
AFLURIA INJ 2017-18	2	ACA, PV

Drug Name	Drug Tier	Requirements/Limits
AFLURIA INJ PF 17-18	2	ACA, PV
AFLURIA QUAD INJ PF 17-18	2	ACA, PV
BEXSERO INJ	2	ACA, PV
BOOSTRIX INJ	2	ACA, PV
DAPTACEL INJ	2	ACA, PV
DIP/TET PED INJ 25-5LFU	2	ACA, PV
ENGERIX-B INJ 10/0.5ML	2	ACA, PV
ENGERIX-B INJ 20MCG/ML	2	ACA, PV
FLUAD INJ 2017-18	2	ACA, PV
FLUARIX QUAD INJ 2017-18	2	ACA, PV
FLUBLOK QUAD INJ 2017-18	2	ACA, PV
FLUBLOK SOL 2017-18	2	ACA, PV
FLUCLVX QUAD INJ 2017-18	2	ACA, PV
FLULAVAL QUA INJ 2017-18	2	ACA, PV
FLUMIST QUAD SUS 2015-16	2	ACA, PV
FLUVIRIN INJ 2017-18	2	ACA, PV
FLUZONE QUAD INJ 2017-18	2	ACA, PV
GARDASIL 9 INJ	2	ACA, PV
HAVRIX INJ 720UNIT	2	ACA, PV
HAVRIX INJ 1440UNIT	2	ACA, PV
HEPLISAV-B INJ 20MCG	2	ACA, PV
HIBERIX SOL 10MCG	2	ACA, PV
INFANRIX INJ	2	ACA, PV
IPOL INJ INACTIVE	2	ACA, PV
M-M-R II INJ	2	ACA, PV
MENACTRA INJ	2	ACA, PV
MENVEO INJ	2	ACA, PV
PEDIARIX INJ 0.5ML	2	ACA, PV
PEDVAX HIB INJ	2	ACA, PV
PENTACEL INJ	2	ACA, PV
PNEUMOVAX 23 INJ 25/0.5	2	ACA, PV
PREVNAR 13 INJ	2	ACA, PV
QUADRACEL INJ	2	ACA, PV
RECOMBIVA HB INJ 5MCG/0.5	2	ACA, PV
RECOMBIVA HB INJ 10MCG/ML	2	ACA, PV
RECOMBIVA-HB INJ 40MCG/ML	2	ACA, PV
ROTARIX SUS	2	ACA, PV
ROTATEQ SOL	2	ACA, PV
SHINGRIX INJ 50MCG	2	ACA, PV
STAMARIL INJ	3	
TENIVAC INJ 5-2LF	2	ACA, PV
TET/DIP TOX INJ 2-2 LF	2	ACA, PV
TRUMENBA INJ	2	ACA, PV
TWINRIX INJ	2	ACA, PV
VAQTA INJ 25/0.5ML	2	ACA, PV
VAQTA INJ 50UNT/ML	2	ACA, PV
VARIVAX INJ	2	ACA, PV

Drug Name	Drug Tier	Requirements/Limits
ZOSTAVAX INJ	2	ACA, PV
MISCELLANEOUS		
BULK CHEMICALS AND COMPOUNDING SUPPLIES		
DESONDIE POW	3	PA
DESONIDE POW MICRONIZ	3	PA
CONTINUOUS RENAL REPLACEMENT THERAPY SOLUTIONS		
PHOXILLUM SOL BK4/2.5	NC	
PRISMASOL SOL 0/0/1.2	3	
PRISMASOL SOL 0/2.5	3	
PRISMASOL SOL 2/0	3	
PRISMASOL SOL 2/3.5	3	
PRISMASOL SOL 4/0/1.2	3	
PRISMASOL SOL 4/2.5	3	
PRISMASOL SOL B22GK4/0	3	
DIAGNOSTIC AGENTS		
<i>cosyntropin for inj 0.25 mg</i>	2	
GLUCAGEN INJ 1MG	3	
THYROGEN INJ 1.1MG	6	SP
INFUSION SUPPLIES		
BACTER WATER INJ PARABENS	3	
<i>bd posiflush inj 0.9%</i>	1	
<i>flush syring inj 0.9%</i>	1	
<i>glycine diluent for injection</i>	1	
<i>heparin sod lock flush & nacl lock flush 100 unit/ml-0.9% kit</i>	1	
<i>heparin sodium (porcine) lock flush iv soln 1 unit/ml</i>	1	
<i>heparin sodium (porcine) lock flush iv soln 10 unit/ml</i>	1	
<i>heparin sodium (porcine) lock flush iv soln 100 unit/ml</i>	1	
HSA DILUENT SOL STERILE	3	
NACL/BACT INJ 0.9%BENZ	3	
PH 12 STERIL SOL FLOLAN	3	
<i>saline flush inj zr 0.9%</i>	1	
<i>saline injection bacteriostatic</i>	1	
<i>sash kit 100/ml</i>	1	
<i>sod chloride inj 0.9%</i>	1	
<i>sodium chloride flush iv soln 0.9%</i>	1	
<i>swabflush inj 0.9%</i>	1	
<i>water for inject, bacteriostatic benzyl alcohol</i>	1	
<i>water for injection</i>	1	
<i>water for iv injection</i>	2	
MEDICAL DEVICES AND SUPPLIES		
OMNITROPE 5 MIS DEVICE	NC	

Drug Name	Drug Tier	Requirements/Limits
OMNITROPE 5 MIS DEVICE	NC	OTC
OMNITROPE 10 MIS DEVICE	NC	OTC

NUTRITIONAL / SUPPLEMENTS

ALTERNATIVE MEDICINES

CO-BALAMIN CAP	NC
CO-VERATROL CAP	NC
HYLAFEM SUP	3
TRAUMEEL OIN	3

AMINO ACIDS

<i>acetylcysteine cap 600 mg</i>	1
<i>aminoam cap rms</i>	1
<i>aminorelief cap rms</i>	1
<i>cysteine hcl inj 50 mg/ml</i>	1
NUTRESTORE PAK 5GM	3
TRYPTOPHAN CAP 500MG	3

ELECTROLYTES, MISCELLANEOUS

D5W/LYTES INJ #48	3
D5W/NACL INJ 0.3%	3
D10W/NACL INJ 0.2%	3
D10W/NACL INJ 0.225%	3
<i>dextrose 2.5% w/ sodium chloride 0.45%</i>	1
<i>dextrose 5% in lactated ringers</i>	1
<i>dextrose 5% w/ sodium chloride 0.2%</i>	1
<i>dextrose 5% w/ sodium chloride 0.9%</i>	1
<i>dextrose 5% w/ sodium chloride 0.33%</i>	1
<i>dextrose 5% w/ sodium chloride 0.45%</i>	1
<i>dextrose 5% w/ sodium chloride 0.225%</i>	1
<i>dextrose 10% w/ sodium chloride 0.45%</i>	1
ELLIOTTS B INJ	3
GLYCOPHOS SOL 1MM/ML	3
<i>hyperlyte-cr inj</i>	1
IONOSOL-MB INJ /D5W	3
ISOLYTE-P INJ /D5W	3
ISOLYTE-S INJ	3
ISOLYTE-S INJ PH 7.4	3
<i>lactated ringer's solution</i>	1
NEUT INJ 4%	3
NORMOSOL -M INJ /D5W	3
NORMOSOL -R INJ	3
NORMOSOL -R INJ /D5W	3
NORMOSOL-R INJ PH 7.4	3
<i>nutrilyte inj</i>	1
PLASMA-LYTE INJ -148	3
PLASMA-LYTE INJ -A	3
<i>potassium phosphates inj 15 mm/5ml (phos) 22 meq/5ml (k)</i>	1

Drug Name	Drug Tier	Requirements/Limits
<i>potassium phosphates inj 45 mm/15ml (phos) 66 meq/15ml (k)</i>	1	
<i>potassium phosphates inj 150 mm/50ml (phos) 220 meq/50ml (k)</i>	1	
<i>ringer's solution</i>	1	
SOD BICARB SOL D5W	NC	
SOD LACTATE INJ 5MEQ/ML	3	
<i>sodium acetate inj 2 meq/ml</i>	1	
<i>sodium acetate inj 4 meq/ml</i>	1	
<i>sodium bicarbonate inj 4.2%</i>	1	
<i>sodium bicarbonate inj 7.5%</i>	1	
<i>sodium bicarbonate inj 8.4%</i>	1	
<i>sodium chloride inj 0.9%</i>	1	
<i>sodium chloride inj 0.45%</i>	2	
<i>sodium chloride inj 2.5 meq/ml (14.6%)</i>	1	
<i>sodium chloride inj 3%</i>	1	
<i>sodium chloride inj 4 meq/ml (23.4%)</i>	1	
<i>sodium chloride inj 5%</i>	1	
<i>sodium chloride iv soln 0.9%</i>	1	
<i>sodium phosphates inj 15 mm/5ml (phos) 20 meq/5ml (na)</i>	1	
<i>sodium phosphates inj 45 mm/15ml (phos) 60 meq/15ml (na)</i>	1	
<i>tpn electrol inj</i>	1	
ELECTROLYTES, POTASSIUM		
EFFER-K TAB 10MEQ	3	
EFFER-K TAB 20MEQ	3	
<i>effer-k tab 25meq ef</i>	1	
<i>k-effervesce tab 25meq ef</i>	1	
<i>k-prime tab 25meq ef</i>	1	
K-TAB TAB 8MEQ CR	3	
K-TAB TAB 10MEQ CR	2	
K-TAB TAB 20MEQ	3	
<i>k-vescent tab 25meq ef</i>	1	
<i>kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj</i>	1	
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.2% inj</i>	1	
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj</i>	1	
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.33% inj</i>	1	
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj</i>	1	
<i>kcl 20 meq/l (0.15%) in nacl 0.9% inj</i>	1	
<i>kcl 20 meq/l (0.15%) in nacl 0.45% inj</i>	1	
<i>kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 10.45% inj</i>		
<i>kcl 40 meq/l (0.3%) in nacl 0.9% inj</i>	1	
KCL/D5W/LACT INJ 20MEQ/L	3	
KCL/D5W/LACT INJ 40MEQ/L	3	
KCL/D5W/NACL INJ 0.3/0.9%	3	
KCL/D5W/NACL INJ 0.15/0.2	3	
<i>klor-con 8 tab 8meq er</i>	1	
<i>klor-con 10 tab 10meq er</i>	1	
<i>klor-con m10 tab 10meq er</i>	1	
KLOR-CON M15 TAB 15MEQ ER	3	
<i>klor-con m20 tab 20meq er</i>	1	
<i>klor-con spr cap 8meq</i>	1	
<i>klor-con spr cap 10meq</i>	1	
<i>klor-con/ef tab 25meq fr</i>	1	
MICRO-K CAP 8MEQ CR	2	
MICRO-K CAP 10MEQ CR	2	
<i>pot bicarbonate & chloride effer tab 25 meq</i>	1	
<i>pot chloride tab 25meq ef</i>	1	
<i>potassium acetate inj 2 meq/ml</i>	1	
<i>potassium bicarbonate effer tab 25 meq</i>	1	
<i>potassium chloride 20 meq/l (0.15%) in dextrose 5% inj</i>	1	
<i>potassium chloride 40 meq/l (0.3%) in dextrose 5% inj</i>	1	
<i>potassium chloride cap er 8 meq</i>	1	
<i>potassium chloride cap er 10 meq</i>	1	
<i>potassium chloride inj 2 meq/ml</i>	1	
<i>potassium chloride inj 10 meq/50ml</i>	1	
<i>potassium chloride inj 10 meq/100ml</i>	1	
<i>potassium chloride inj 20 meq/50ml</i>	1	
<i>potassium chloride inj 20 meq/100ml</i>	1	
<i>potassium chloride inj 40 meq/100ml</i>	1	
<i>potassium chloride microencapsulated crys 1 er tab 10 meq</i>	1	
<i>potassium chloride microencapsulated crys 1 er tab 20 meq</i>	1	
<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	2	
<i>potassium chloride oral soln 20% (40 meq/15ml)</i>	2	
<i>potassium chloride powder packet 20 meq</i>	2	
<i>potassium chloride tab er 8 meq (600 mg)</i>	1	
<i>potassium chloride tab er 10 meq</i>	1	
<i>potassium chloride tab er 20 meq (1500 mg)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
INTRAVENOUS NUTRITIONAL THERAPY, CARBOHYDRATES		
<i>dextrose inj 5%</i>	1	
<i>dextrose inj 10%</i>	1	
DEXTROSE INJ 20%	3	
<i>dextrose inj 25%</i>	1	
<i>dextrose inj 30%</i>	1	
DEXTROSE INJ 40%	3	
<i>dextrose inj 50%</i>	1	
<i>dextrose inj 70%</i>	1	
INTRAVENOUS NUTRITIONAL THERAPY, LIPIDS		
<i>intralipid inj 20%</i>	1	
INTRALIPID INJ 30%	3	
NEOKE MCT70 POW	NC	
<i>nutrilipid emu 20%</i>	1	
SMOFLIPID EMU	3	
INTRAVENOUS NUTRITIONAL THERAPY, MISCELLANEOUS		
KABIVEN EMU	3	
PERIKABIVEN EMU	3	
INTRAVENOUS NUTRITIONAL THERAPY, PROTEINS		
AMINOSYN 7% INJ /LYTES	3	
AMINOSYN II INJ 8.5%	3	
<i>aminosyn ii inj 8.5/lyte</i>	1	
AMINOSYN II INJ 10%	3	
AMINOSYN II INJ 15%	3	
AMINOSYN INJ 8.5%	3	
<i>aminosyn inj 8.5/lyte</i>	1	
AMINOSYN INJ 10%	3	
AMINOSYN M INJ 3.5%	3	
AMINOSYN-HBC INJ 7%	3	
AMINOSYN-PF INJ 7%	3	
AMINOSYN-PF INJ 10%	3	
AMINOSYN-RF INJ 5.2%	3	
CLINIMIX E INJ 2.75/D5W	3	
CLINIMIX E INJ 2.75/D10	3	
CLINIMIX E INJ 4.25/D5W	3	
CLINIMIX E INJ 4.25/D10	3	
CLINIMIX E INJ 4.25/D25	3	
CLINIMIX E INJ 5%/D15W	3	
CLINIMIX E INJ 5%/D20W	3	
CLINIMIX E INJ 5%/D25W	3	
CLINIMIX INJ 2.75/D5W	3	
CLINIMIX INJ 4.25/D5W	3	
CLINIMIX INJ 4.25/D10	3	
CLINIMIX INJ 4.25/D20	3	
CLINIMIX INJ 4.25/D25	3	
CLINIMIX INJ 5%/D15W	3	

Drug Name	Drug Tier	Requirements/Limits
CLINIMIX INJ 5%/D20W	3	
CLINIMIX INJ 5%/D25W	3	
<i>clinisol sf inj 15%</i>	1	
FREAMINE HBC INJ 6.9%	3	
FREAMINE III INJ 10%	3	
<i>hepatamine sol 8%</i>	1	
NEPHRAMINE INJ 5.4%	3	
<i>plenamine inj 15%</i>	1	
<i>premasol sol 6%</i>	1	
PREMASOL SOL 10%	3	
PROCALAMINE INJ 3%	3	
PROSOL INJ 20%	3	
TRAVASOL INJ 10%	3	
TROPHAMINE INJ 6%	3	
TROPHAMINE INJ 10%	3	

VITAMINS AND MINERALS, CALCIUM SUPPLEMENTS

CALCIFOL WAF	3	
<i>calcium chloride inj 10%</i>	1	
<i>calcium gluconate inj 10%</i>	1	
CALCIUM-FA WAF PLUS D	3	

VITAMINS AND MINERALS, FOLIC ACID/COMBINATIONS

CYFOLEX CAP	NC	
<i>folic acid inj 5 mg/ml</i>	1	
<i>folic acid tab 1 mg</i>	1	
FOLIXAPURE TAB 1-5000	NC	
NOXIFOL-D TAB	NC	
PUREFOLIX TAB 1-5000	NC	
REVESTA CAP 1MG-5750	NC	
ROXIFOL-D TAB 1-500	NC	

VITAMINS AND MINERALS, IRON/COMBINATIONS

ACTIVE FE TAB 75-1.25	3	
<i>chromagen cap</i>	1	
<i>corvita 150 tab</i>	1	
CORVITE 150 TAB	3	
CORVITE FE TAB	3	
FERAHEME INJ 510/17ML	3	
FERIVAFA CAP 110-1MG	3	
<i>ferocon cap</i>	1	
<i>ferottrinsic cap</i>	1	
FERRLECIT INJ 12.5MG/M	3	
FERRO-PLEX TAB	3	
FERROTRIN CAP	3	
FOLIVANE-F CAP	3	
FOLIVANE-PLS CAP	3	
<i>foltrin cap</i>	1	
FUSION PAK SPRINKLE	NC	

Drug Name	Drug Tier	Requirements/Limits
FUSION PLUS CAP	3	
<i>hematinic/fa tab</i>	1	
<i>hematogen cap</i>	1	
<i>hematogen cap forte</i>	1	
HEMATOGEN FA CAP	3	
HEMATRON-AF TAB	3	
<i>hemocyte-f tab</i>	1	
<i>icar-c plus tab</i>	1	
<i>iferex 150 cap forte</i>	1	
INFED INJ 50MG/ML	3	
INJECTAFER INJ 750/15ML	3	
INTEGRA F CAP	3	
INTEGRA PLUS CAP	3	
IROSPAN 24/6 MIS	3	
IS 24/6 MIS	3	
<i>k-tan plus cap</i>	1	
MAXFE TAB	3	
MULTIGEN PLS TAB	3	
MULTIGEN TAB	3	
MULTIGEN TAB FOLIC	3	
<i>myferon 150 cap forte</i>	1	
NEPHRON FA TAB	3	
NIFEREX TAB	3	
NUFERA TAB	3	
<i>poly-iron cap 150 fort</i>	1	
<i>polysacchari cap iron</i>	1	
PROFERRIN- TAB FORTE	3	
<i>purevit dual cap fe plus</i>	1	
<i>se-tan plus cap</i>	1	
<i>sod ferric gluc cmplx in sucrose iv soln 12.5 mg/ml (fe eq)</i>	1	
TANDEM F CAP	3	
TANDEM PLUS CAP	3	
TARON FORTE CAP	3	
<i>tl icon cap</i>	1	
<i>tl-hem 150 tab</i>	1	
<i>tricon cap</i>	1	
<i>trigels-f cap forte</i>	1	
VENOFER INJ 20MG/ML	3	
VITAMINS AND MINERALS, MISCELLANEOUS		
AQUASOL A INJ 50000/ML	3	
<i>ascorbic acid inj 500 mg/ml</i>	1	
CARDIOVID CAP PLUS	3	
<i>chromic chloride inj 40 mcg/10ml (4 mcg/ml) (elemental cr)</i>	1	
<i>cupric chloride inj 0.4 mg/ml</i>	1	
<i>cyanocobalamin inj 1000 mcg/ml</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>ergocalciferol cap 50000 unit</i>	1	
ESCAVITE CHW	3	PV
ESCAVITE D CHW	3	
<i>escavite lq dro 0.25-6mg</i>	1	PV
FLORIVA DRO 0.25MG	3	PV
FLORIVA DRO PLUS	3	PV
FLUORABON DRO	3	ACA, PV
<i>fluoritab chw 0.5mg f</i>	1	ACA, PV
<i>fluoritab chw 0.25mg f</i>	1	ACA, PV
<i>fluoritab chw 1mg f</i>	1	PV
<i>fluoritab chw 2.2mg</i>	1	PV
<i>fluoritab dro 0.125mg</i>	1	ACA, PV
<i>flura-drops dro 0.25mg f</i>	1	ACA
GALZIN CAP 25MG	3	
GALZIN CAP 50MG	3	
<i>hydroxocobalamin inj 1000 mcg/ml</i>	1	
<i>ludent chw 0.5mg f</i>	1	ACA, PV
<i>ludent chw 0.25mg f</i>	1	ACA, PV
<i>ludent chw 1mg f</i>	1	PV
MAGNEBIND TAB 400	3	
<i>magnesium chloride inj 200 mg/ml</i>	1	
MAGNESIUM SU INJ 2GM/50ML	3	
MAGNESIUM SU INJ 4G/100ML	3	
MAGNESIUM SU INJ 20/500ML	3	
MAGNESIUM SU INJ 40G/1000	3	
MAGNESIUM SU INJ 80MG/ML	3	
<i>magnesium sulfate in dextrose 5% iv soln 1 gm/100ml</i>	1	
<i>magnesium sulfate inj 50%</i>	1	
<i>magnesium sulfate iv soln 2 gm/50ml (40 mg/ml)</i>	1	
<i>magnesium sulfate iv soln 4 gm/50ml (80 mg/ml)</i>	1	
<i>magnesium sulfate iv soln 4 gm/100ml (40 mg/ml)</i>	1	
<i>magnesium sulfate iv soln 20 gm/500ml (40 mg/ml)</i>	1	
<i>magnesium sulfate iv soln 40 gm/1000ml (40 mg/ml)</i>	1	
<i>manganese chloride inj 0.1 mg/ml</i>	1	
MEPHYTON TAB 5MG	3	
MG SO4/D5W INJ 10MG/ML	3	
<i>multi vit/fl dro 0.5mg/ml</i>	1	
<i>multi-vit/fe dro /fl 0.25</i>	1	PV
<i>multi-vit/fl dro 0.5mg/ml</i>	1	PV
<i>multi-vit/fl dro /fe 0.25</i>	1	PV
MULTITRACE-4 INJ	3	

Drug Name	Drug Tier	Requirements/Limits
<i>multitrace-4 inj conc</i>	1	
MULTITRACE-4 INJ NEONATAL	3	
MULTITRACE-4 INJ PED	3	
<i>multitrace-5 inj</i>	1	
<i>multitrace-5 inj conc</i>	1	
MULTITRACE-5 INJ REGULAR	3	
MULTIV/FLUOR CHW 0.5-0.3	NC	
MULTIV/FLUOR CHW 0.25-0.3	NC	
MULTIV/FLUOR CHW 1-0.3MG	NC	
<i>multivit/fl chw 0.5mg</i>	1	PV
<i>multivit/fl chw 0.25mg</i>	1	PV
<i>multivit/fl chw 1mg</i>	1	PV
<i>multivit/fl dro 0.25mg</i>	1	
<i>multivit/fl dro 0.25mg</i>	1	PV
<i>mvc-fluoride chw 0.5mg</i>	1	PV
<i>mvc-fluoride chw 0.25mg</i>	1	PV
<i>mvc-fluoride chw 1mg</i>	1	PV
<i>nafrinse chw 1mg f</i>	1	PV
<i>nafrinse dro 0.125mg</i>	1	ACA, PV
NASCOBAL SPR 500MCG	3	
<i>niacin oral powder</i>	1	
<i>phytonadione inj 1 mg/0.5ml (2 mg/ml)</i>	1	
<i>phytonadione inj 10 mg/ml</i>	2	
<i>phytonadione tab 5 mg</i>	1	
POLY-VI-FLOR CHW 0.5MG	3	PV
POLY-VI-FLOR CHW 0.25MG	3	PV
POLY-VI-FLOR CHW 1MG	3	PV
POLY-VI-FLOR CHW W/IRON	3	PV
POLY-VI-FLOR MIS FS	3	PV
POLY-VI-FLOR MIS FS 0.5MG	NC	
POLY-VI-FLOR MIS FS 0.25	NC	
POLY-VI-FLOR SUS 0.25/ML	3	PV
POLY-VI-FLOR SUS /IRON	3	PV
POTABA CAP 500MG	3	
<i>potassium aminobenzoate packet 2 gm</i>	1	
<i>pyridoxine hcl inj 100 mg/ml</i>	1	
QUFLORA CHW	NC	
QUFLORA FE CHW	NC	
QUFLORA PED CHW 0.5MG	3	
QUFLORA PED CHW 0.25MG	3	
QUFLORA PED CHW 1MG	3	
QUFLORA PED DRO 0.5MG/ML	3	
QUFLORA PED DRO 0.25MG	3	
<i>selenious acid inj 40 mcg/ml</i>	1	
<i>sodium fluoride chew tab 0.5 mg f (from 1.1 mg naf)</i>	1	ACA, PV

Drug Name	Drug Tier	Requirements/Limits
<i>sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf)</i>	1	ACA, PV
<i>sodium fluoride chew tab 1 mg f (from 2.2 mg naf)</i>	1	PV
<i>sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)</i>	1	ACA, PV
<i>sodium fluoride tab 0.5 mg f (from 1.1 mg naf)</i>	1	ACA, PV
<i>sodium fluoride tab 1 mg f (from 2.2 mg naf)</i>	1	PV
TEXAVITE LQ LIQ	NC	
<i>thiamine hcl inj 100 mg/ml</i>	1	
TL-FLUORIVIT CHW	3	PV
TRACE ELEM 4 INJ PED	3	
TRI-VI-FLOR SUS 0.5MG/ML	3	PV
TRI-VI-FLOR SUS 0.25/ML	3	PV
<i>tri-vit/fluo dro 0.5mg</i>	1	PV
<i>tri-vit/fluo dro 0.25mg</i>	1	PV
<i>vit a/c/d/fl dro 0.25mg</i>	1	
<i>vitamax ped dro</i>	1	
WHEAT GERM OIL	3	
<i>zinc chloride inj 1 mg/ml</i>	1	
<i>zinc sulfate inj 1 mg/ml</i>	1	
<i>zinc sulfate inj 5 mg/ml</i>	1	
VITAMINS AND MINERALS, PRENATAL VITAMINS		
ATABEX EC TAB	3	PV
BAL-CARE MIS DHA	3	PV
C-NATE DHA CAP 28-1-200	3	PV
CITRANATAL CAP HARMONY	2	
CITRANATAL CAP MEDLEY	2	
CITRANATAL MIS 90 DHA	2	
CITRANATAL MIS B-CALM	2	PV
CITRANATAL PAK ASSURE	2	
CITRANATAL PAK DHA	2	
CITRANATAL TAB BLOOM	2	
CITRANATAL TAB RX	2	
CO-NATAL FA TAB 29-1MG	3	PV
COMPLETE NAT PAK DHA	3	PV
COMPLETENATE CHW	3	PV
CONCEPT DHA CAP	3	PV
CONCEPT OB CAP	3	PV
DOTHELLE DHA CAP	3	PV
DUET DHA 400 MIS 25-1-400	3	PV
DUET DHA MIS BALANCED	3	PV
<i>elite-ob tab</i>	1	PV
ENBRACE HR CAP	NC	
FOLET DHA PAK	3	

Drug Name	Drug Tier	Requirements/Limits
FOLET ONE CAP 38-1-225	3	
FOLIVANE-OB CAP	3	PV
HEMENATAL OB MIS + DHA	3	
HEMENATAL OB TAB 28-6-1MG	3	
<i>inatal gt tab</i>	1	PV
KOSHR PRENAT TAB 30-1MG	NC	
M-VIT TAB 27-1MG	3	PV
MARNATAL-F CAP	3	PV
MYNATAL CAP	3	PV
MYNATAL PLUS TAB	3	PV
MYNATAL TAB	3	PV
MYNATAL TAB ADVANCE	3	PV
MYNATAL-Z TAB	3	PV
MYNATE 90 TAB PLUS	3	PV
NATACHEW CHW	3	PV
NATALVIT TAB 75-1MG	3	PV
NATELLE ONE CAP	3	PV
NEEVO DHA CAP 27-1.13	3	PV
NESTABS ABC MIS	3	PV
NESTABS DHA PAK	3	PV
NESTABS ONE CAP	NC	
NESTABS TAB	3	PV
NEWGEN TAB 32-1MG	3	
NEXA PLUS CAP	3	
O-CAL FA TAB	3	PV
O-CAL TAB PRENATAL	3	PV
OB COMPLETE CAP GOLD	NC	
OB COMPLETE CAP ONE	3	PV
OB COMPLETE CAP PETITE	3	PV
OB COMPLETE TAB	3	PV
OB COMPLETE TAB PREMIER	3	PV
OB COMPLETE/ CAP DHA	3	PV
OBSTETRIX EC TAB	3	PV
OBSTETRIX PAK DHA	3	PV
PNV FOLIC AC TAB + IRON	3	PV
PNV OB+DHA PAK	3	PV
PNV PRENATAL TAB PLUS	3	PV
PNV TABS TAB 29-1MG	3	PV
<i>pnv-dha cap</i>	1	PV
PNV-DHA CAP DOCUSATE	3	PV
PNV-OMEGA CAP	3	PV
<i>pnv-select tab</i>	1	PV
PR NATAL 400 PAK	3	PV
PR NATAL 400 PAK EC	3	PV
PR NATAL 430 PAK	3	PV
PR NATAL 430 PAK EC	3	PV
PREFERA OB TAB	NC	

Drug Name	Drug Tier	Requirements/Limits
PREFERAOB CAP ONE	3	PV
PREFERAOB MIS +DHA	NC	
PRENA1 CHW	3	
PRENA1 PEARL CAP	3	
PRENA 1 TRUE MIS	3	PV
PRENAISSANCE CAP	3	PV
PRENAISSANCE CAP PLUS	3	PV
PRENAT PLUS TAB 27-1MG	3	PV
PRENATA CHW 29-1MG	3	PV
<i>prenatabs rx tab</i>	1	PV
PRENATAL 19 CHW 29-1MG	3	PV
<i>prenatal 19 chw tab</i>	1	PV
<i>prenatal 19 tab</i>	1	PV
PRENATAL 19 TAB 29-1MG	3	PV
PRENATAL DHA PAK 27-1-250	NC	
PRENATAL MIS COMPLEAT	3	PV
PRENATAL TAB 27-1MG	3	PV
PRENATAL TAB PLUS	3	PV
PRENATAL VIT TAB LOW IRON	3	PV
PRENATAL+FE TAB 29-1MG	3	PV
PRENATAL-U CAP 106.5-1	3	PV
PRENATE AM TAB 1MG	3	PV
PRENATE CAP ENHANCE	3	PV
PRENATE CAP ESSENT	3	PV
PRENATE CAP PIXIE	3	PV
PRENATE CAP RESTORE	3	PV
PRENATE CHW 0.6-0.4	3	PV
PRENATE DHA CAP	3	PV
PRENATE MINI CAP	3	PV
PRENATE TAB ELITE	3	PV
PREPLUS TAB 27-1MG	3	PV
PRETAB TAB 29-1MG	3	PV
PRIMACARE CAP	NC	
PROVIDA DHA CAP	NC	
PROVIDA OB CAP	3	PV
PUREFE OB CAP PLUS	3	PV
R-NATAL OB CAP 20-1-320	3	PV
REDICHEW RX CHW	3	
RELNATE DHA CAP	3	PV
SE-NATAL 19 CHW	3	PV
SE-NATAL 19 TAB	3	PV
SELECT-OB CHW	3	PV
SELECT-OB+ PAK DHA	3	PV
TARON-BC MIS	3	PV
TARON-C DHA CAP	3	PV
TARON-PREX CAP	3	PV
THRIVITE 19 TAB	3	PV

Drug Name	Drug Tier	Requirements/Limits
THRIVITE RX TAB 29-1MG	3	PV
TL FOLATE TAB	3	PV
TL-CARE DHA CAP 27-1-500	3	PV
TL-SELECT CAP	3	PV
TRI-TABS DHA MIS	3	
TRICARE CHW PRENATAL	NC	
TRICARE PRE CAP 27-1-500	3	PV
TRICARE PREN CAP DHA ONE	NC	
TRICARE TAB PRENATAL	3	
TRINATAL RX TAB 1	3	PV
<i>trinate tab</i>	1	PV
TRISTART DHA CAP	NC	
TRISTART ONE CAP 35-1-215	NC	
TRIVEEN-DUO PAK DHA	3	PV
ULTIMATECARE CAP ONE	3	PV
VENA-BAL MIS DHA	3	PV
VINATE DHA CAP 27-1.13	3	
VINATE II TAB	3	PV
VINATE M TAB	3	PV
VINATE ONE TAB	3	PV
VIRT NATE TAB	3	PV
VIRT NATE TAB 28-1MG	3	PV
VIRT-C DHA CAP	3	PV
VIRT-NATE CAP DHA	3	PV
VIRT-PN DHA CAP	3	PV
VIRT-PN PLUS CAP	3	PV
VIRT-PN TAB	3	PV
VITAFOL CAP ULTRA	3	PV
VITAFOL CHW GUMMIES	NC	
VITAFOL FE+ CAP	3	PV
VITAFOL-NANO TAB	3	
VITAFOL-OB PAK +DHA	3	PV
VITAFOL-OB TAB 65-1MG	3	PV
VITAFOL-ONE CAP	3	PV
VITAMEDMD CAP ONE RX	3	PV
VITAPEARL CAP	3	
VITATRUE MIS	3	PV
VIVA DHA CAP	3	PV
VOL-NATE TAB	3	PV
VOL-PLUS TAB	3	PV
VOL-TAB RX TAB	3	PV
VP-GGR-B6 TAB PRENATAL	3	PV
VP-HEME OB MIS + DHA	3	PV
VP-HEME OB TAB	3	PV
VP-HEME ONE CAP	3	PV
VP-HEME-OB TAB 28-6-1MG	3	PV
VP-PNV-DHA CAP	3	PV

Drug Name	Drug Tier	Requirements/Limits
ZATEAN-PN CAP DHA	3	PV
ZATEAN-PN CAP PLUS	3	PV

RESPIRATORY

ALPHA-1 ANTITRYPSIN DEFICIENCY

ARALAST NP INJ 500MG	6	PA, SP
ARALAST NP INJ 1000MG	6	PA, SP
GLASSIA INJ	6	PA, SP
PROLASTIN-C INJ 1000MG	6	PA, SP
ZEMAIRA INJ 1000MG	6	PA, SP

ANAPHYLAXIS TREATMENT AGENTS

ADRENALIN INJ 1MG/ML	3	
ADRENALIN INJ 30/30ML	3	
AUVI-Q INJ 0.3MG	NC	
AUVI-Q INJ 0.15MG	NC	
EPINEPH/NACL SOL 2/250ML	NC	
EPINEPHR/D5W SOL 2/250-5%	NC	
<i>epinephrine inj 30 mg/30ml</i>	1	
<i>epinephrine pf inj 1 mg/ml</i>	1	
<i>epinephrine pf soln prefilled syringe 1 mg/10ml (0.1 mg/ml)</i>	1	
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	2	
<i>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)</i>	2	
<i>epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000)</i>	2	
EPIPEN 2-PAK INJ 0.3MG	2	
EPIPEN-JR INJ 2-PAK	2	
EPISNAP KIT	NC	

ANTICHOLINERGIC/BETA AGONIST COMBINATIONS, LONG ACTING

ANORO ELLIPT AER 62.5-25	2	QL
BEVESPI AER 9-4.8MCG	2	QL
STIOLTO AER 2.5-2.5	2	QL
UTIBRON CAP NEOHALER	NC	

ANTICHOLINERGIC/BETA AGONIST COMBINATIONS, SHORT ACTING

COMBIVENT AER 20-100	2	
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) 1 mg/3ml</i>	1	

ANTICHOLINERGIC/BETA AGONIST/STEROID INHALANT COMBINATIONS

TRELEGY AER ELLIPTA	2	PV, QL
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ANTICHOLINERGICS

ATROVENT HFA AER 17MCG	3	
INCRUSE ELPT INH 62.5MCG	2	
<i>ipratropium bromide inhal soln 0.02%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
LONHALA MAGN SOL 25MCG	NC	
SEEBRI NEOHA CAP 15.6MCG	NC	
SPIRIVA AER 1.25MCG	2	PV
SPIRIVA CAP HANDIHLR	2	
SPIRIVA SPR 2.5MCG	2	
TUDORZA PRES AER 400/ACT	NC	
ANTIHIISTAMINE/DECONGESTANT COMBINATIONS		
CLARINEX-D TAB 2.5-120	3	
<i>prometh vc sol plain</i>	2	
<i>promethazine & phenylephrine syrup 6.25- 5 mg/5ml</i>	2	
RELHIST CHW	3	
SEMPREX-D CAP 8-60MG	3	
ANTIHIISTAMINES, LOW SEDATING		
<i>cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)</i>	1	
<i>levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)</i>	1	
<i>levocetirizine dihydrochloride tab 5 mg</i>	1	
ANTIHIISTAMINES, NONSEDATING		
CLARINEX SYP 0.5MG/ML	3	
CLARINEX TAB 5MG	3	
<i>desloratadine tab 5 mg</i>	1	
<i>desloratadine tab orally disintegrating 2.5 mg</i>	1	
<i>desloratadine tab orally disintegrating 5 mg</i>	1	
ANTIHIISTAMINES, SEDATING		
<i>allergy chld liq 12.5/5ml</i>	1	OTC
<i>allergy liq 12.5/5ml</i>	1	OTC
<i>allergy relf liq 12.5/5ml</i>	1	OTC
<i>brompheniramine tannate chew tab 12 mg</i>	1	
<i>carbinoxamine maleate soln 4 mg/5ml</i>	1	
<i>carbinoxamine maleate tab 4 mg</i>	1	
<i>carbinoxamine maleate tab 6 mg</i>	2	
<i>chld allergy liq 12.5/5ml</i>	1	OTC
<i>clemastine fumarate tab 2.68 mg</i>	1	
<i>cyproheptadine hcl syrup 2 mg/5ml</i>	1	
<i>cyproheptadine hcl tab 4 mg</i>	1	
<i>diphenhydramine hcl elixir 12.5 mg/5ml</i>	1	
<i>diphenhydramine hcl inj 50 mg/ml</i>	1	
<i>hydroxyzine hcl im soln 25 mg/ml</i>	1	
<i>hydroxyzine hcl im soln 50 mg/ml</i>	1	
<i>hydroxyzine hcl syrup 10 mg/5ml</i>	1	
<i>hydroxyzine hcl tab 10 mg</i>	1	
<i>hydroxyzine hcl tab 25 mg</i>	1	
<i>hydroxyzine hcl tab 50 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>hydroxyzine pamoate cap 25 mg</i>	1	
<i>hydroxyzine pamoate cap 50 mg</i>	1	
<i>hydroxyzine pamoate cap 100 mg</i>	1	
KARBINAL ER SUS 4MG/5ML	3	
<i>naramin liq</i>	1	OTC
<i>pediacare al liq 12.5/5ml</i>	1	OTC
<i>pharbedryl cap 50mg</i>	1	
RYVENT TAB 6MG	2	
<i>siladryl alr liq 12.5/5ml</i>	1	OTC
<i>total allerg liq 12.5/5ml</i>	1	OTC
VISTARIL CAP 25MG	3	
VISTARIL CAP 50MG	3	

ANTITUSSIVE COMBINATIONS, NON-OPIOID

<i>biotuss liq</i>	1	
<i>biotuss liq pediatric</i>	1	
<i>bromfed dm syp</i>	1	
CARBAPHEN 12 LIQ	3	
CARBAPHEN 12 SUS PED	3	
EXACTUSS LIQ	3	
GILTUSS LIQ	3	
<i>giltuss ped liq</i>	1	
GILTUSS TR TAB	3	
NEOTUSS PLUS LIQ	3	
<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	1	
<i>pseudoephed-bromphen-dm syrup 30-2-101 mg/5ml</i>	1	

ANTITUSSIVE COMBINATIONS, OPIOID

CODAR AR LIQ 2-8/5ML	3	
<i>hydrocod polst-chlorphen polst er susp 10-8 mg/5ml</i>	1	
<i>hydrocodone w/ homatropine syrup 5-1.5 mg/5ml</i>	1	
<i>hydrocodone w/ homatropine tab 5-1.5 mg</i>	1	
<i>hydromet syp 5-1.5/5</i>	1	
OBREDON SOL 2.5-200	3	
<i>prometh vc/ syp codeine</i>	2	
<i>promethazine w/ codeine syrup 6.25-10 mg/5ml</i>	1	
<i>promethazine-phenylephrine-codeine syrup 6.25-5-10 mg/5ml</i>	2	
<i>pseudoeph-chlorphen w/ hydrocodone soln 60-4-5 mg/5ml</i>	1	
TUSSICAPS CAP 5-4MG	3	
TUSSICAPS CAP 10-8MG	3	
TUSSIONEX SUS 10-8/5ML	3	
TUZISTRA XR SUS	3	

ANTITUSSIVES

Drug Name	Drug Tier	Requirements/Limits
<i>benzonatate cap 100 mg</i>	1	
<i>benzonatate cap 150 mg</i>	NC	
<i>benzonatate cap 200 mg</i>	1	
TESSALON PER CAP 100MG	2	

BETA AGONISTS, INHALANTS, Long Acting: Hand-held Active

Inhalation

ARCAPTA CAP 75MCG	3	PV, QL
SEREVENT DIS AER 50MCG	2	PV, QL
STRIVERDI AER 2.5MCG	2	PA, QL

BETA AGONISTS, INHALANTS, Long Acting: Nebulized Passive

Inhalation

BROVANA NEB 15MCG	3	PV, QL
PERFOROMIST NEB 20MCG	2	PV, QL

BETA AGONISTS, INHALANTS, Short Acting

<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	1	QL
<i>albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)</i>	1	QL
<i>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)</i>	1	QL
<i>albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)</i>	1	QL
<i>levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv)</i>	2	QL
<i>levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv)</i>	2	QL
<i>levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv)</i>	1	QL
<i>levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)</i>	2	QL
<i>levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)</i>	1	QL, ST
PROAIR HFA AER	2	QL
PROAIR RESPI AER	2	QL
PROVENTIL AER HFA	NC	
VENTOLIN HFA AER	NC	
XOPENEX CONC NEB 1.25/0.5	3	
XOPENEX HFA AER	NC	
XOPENEX NEB 0.31MG	3	QL
XOPENEX NEB 0.63MG	3	QL
XOPENEX NEB 1.25/3ML	3	QL

BETA AGONISTS, INJECTABLE

<i>isoproterenol hcl inj 0.2 mg/ml</i>	1	
ISUPREL INJ 0.2MG/ML	3	
<i>terbutaline sulfate inj 1 mg/ml</i>	1	

BETA AGONISTS, ORAL AGENTS

<i>albuterol sulfate syrup 2 mg/5ml</i>	1	
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Drug Name	Drug Tier	Requirements/Limits
<i>albuterol sulfate tab 2 mg</i>	1	
<i>albuterol sulfate tab 4 mg</i>	1	
<i>albuterol sulfate tab er 12hr 4 mg</i>	1	
<i>albuterol sulfate tab er 12hr 8 mg</i>	2	
<i>metaproterenol sulfate syrup 10 mg/5ml</i>	1	
<i>metaproterenol sulfate tab 10 mg</i>	1	
<i>metaproterenol sulfate tab 20 mg</i>	1	
<i>terbutaline sulfate tab 2.5 mg</i>	2	
<i>terbutaline sulfate tab 5 mg</i>	1	

CYSTIC FIBROSIS

BETHKIS NEB 300/4ML	5	PA, QL, SP
KALYDECO PAK 50MG	6	PA, QL, SP
KALYDECO PAK 75MG	6	PA, QL, SP
KALYDECO TAB 150MG	6	PA, QL, SP
KITABIS PAK NEB 300/5ML	6	PA, QL, SP
ORKAMBI TAB 100-125	6	PA, QL, SP
ORKAMBI TAB 200-125	6	PA, QL, SP
PULMOZYME SOL 1MG/ML	6	PA, QL, SP
SYMDEKO TAB 100-150	6	PA, QL, SP
TOBI NEB 300/5ML	NC	
TOBI PODHALR CAP 28MG	NC	
<i>tobramycin nebu soln 300 mg/5ml</i>	4	PA, QL, SP

DECONGESTANT/EXPECTORANT COMBINATIONS

GILPHEX TR TAB 10-388MG	3	
<i>phenylephrine-guaifenesin liqd 7.5-100 mg/5ml (1.5-20 mg/ml)</i>	1	

LEUKOTRIENE MODULATORS

ACCOLATE TAB 10MG	3	PV
ACCOLATE TAB 20MG	3	PV
<i>montelukast sodium chew tab 4 mg (base equiv)</i>	1	PV
<i>montelukast sodium chew tab 5 mg (base equiv)</i>	1	PV
<i>montelukast sodium oral granules packet 4 mg (base equiv)</i>	1	PV
<i>montelukast sodium tab 10 mg (base equiv)</i>	1	PV
SINGULAIR CHW 4MG	3	PV
SINGULAIR CHW 5MG	3	PV
SINGULAIR GRA 4MG	3	PV
SINGULAIR TAB 10MG	3	PV
<i>zafirlukast tab 10 mg</i>	1	PV
<i>zafirlukast tab 20 mg</i>	1	PV
<i>zileuton tab er 12hr 600 mg</i>	2	
ZYFLO CR TAB 600MG	3	PV
ZYFLO TAB 600MG	3	PV

MAST CELL STABILIZERS

Drug Name	Drug Tier	Requirements/Limits
<i>cromolyn sodium soln nebu 20 mg/2ml</i>	2	PV
MISCELLANEOUS		
<i>acetylcysteine inhal soln 10%</i>	2	
<i>acetylcysteine inhal soln 20%</i>	2	
CAFCIT INJ 60MG/3ML	3	
<i>caffeine & sodium benzoate inj 125-125 mg/ml (500 mg/2ml)</i>	1	
<i>caffeine citrate inj 60 mg/3ml (10 mg/ml base equiv)</i>	1	
<i>caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv)</i>	2	
CINQAIR INJ	NC	
CUROSURF SUS 120/1.5	3	
CUROSURF SUS 240/3ML	3	
DOPRAM INJ 20MG/ML	3	
FASENRA INJ 30MG/ML	6	PA, SP
HYPER-SAL NEB 7%	3	
HYPERSAL NEB 3.5%	3	
HYPERSAL NEB 7%	3	
INFASURF SUS 35MG/ML	3	
<i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)</i>	1	
<i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)</i>	1	
<i>nebusal neb 3%</i>	1	
NEBUSAL NEB 6%	3	
NUCALA INJ 100MG	6	PA, PV, SP
<i>pulmosal neb 7%</i>	1	
SCLEROSOL AER INTRAPLE	3	
<i>sodium chloride soln nebu 0.9%</i>	1	
<i>sodium chloride soln nebu 3%</i>	1	
<i>sodium chloride soln nebu 7%</i>	1	
<i>sodium chloride soln nebu 10%</i>	1	
STERIL TALC SUS 5GM	3	
STERITALC POW 2GM	3	
STERITALC POW 3GM	3	
STERITALC POW 4GM	3	
SURVANTA INH	3	
XOLAIR SOL 150MG	6	PA, PV, QL, SP
NASAL ANTIHISTAMINES		
ASTEPRO SPR 0.15%	3	
<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	1	
<i>azelastine hcl nasal spray 0.15% (205.5 mcg/spray)</i>	1	
<i>olopatadine hcl nasal soln 0.6%</i>	2	
PATANASE SPR 0.6%	3	

Drug Name	Drug Tier	Requirements/Limits
NASAL DECONGESTANTS		
ADRENALIN SOL 1:1000	3	
NASAL STEROIDS/COMBINATIONS		
BECONASE AQ SUS 0.042%	NC	
DYMISTA SPR 137-50	2	
<i>flunisolide nasal soln 25 mcg/act (0.025%)</i>	1	
<i>fluticasone propionate nasal susp 50 mcg/act</i>	1	
<i>mometasone furoate nasal susp 50 mcg/act</i>	1	
NASONEX SPR 50MCG/AC	3	
OMNARIS SPR	NC	
QNASL AER 80MCG	NC	
QNASL CHILD SPR 40MCG	NC	
SINUVA IMP 1350MCG	NC	
TICANASE PAK 50-2.7	NC	
TICASPRAY PAK	NC	
<i>triamcinolone acetonide nasal aerosol suspension 55 mcg/act</i>	1	
VERAMYST SPR 27.5MCG	NC	
XHANCE MIS 93MCG	3	
ZETONNA AER 37MCG	NC	
PHOSPHODIESTERASE-4 INHIBITORS		
DALIRESP TAB 250MCG	2	PV
DALIRESP TAB 500MCG	2	PV
PULMONARY FIBROSIS AGENTS		
ESBRIET CAP 267MG	5	PA, QL, SP
OFEV CAP 100MG	5	PA, QL, SP
OFEV CAP 150MG	5	PA, QL, SP
RESPIRATORY SYNCYTIAL VIRUS		
<i>ribavirin for inhal soln 6 gm</i>	1	
SYNAGIS INJ 50MG	6	PA, PV, SP
SYNAGIS INJ 100MG/ML	6	PA, PV, SP
VIRAZOLE INH 6GM	3	
STEROID INHALANTS		
AEROSPAN AER 80MCG	NC	
ALVESCO AER 80MCG	NC	
ALVESCO AER 160MCG	NC	
ARMONAIR AER 55/ACT	NC	
ARMONAIR AER 113/ACT	NC	
ARMONAIR AER 232/ACT	NC	
ARNUITY ELPT INH 50MCG	3	PV, QL
ARNUITY ELPT INH 100MCG	3	PV, QL
ARNUITY ELPT INH 200MCG	3	PV, QL
ASMANEX 7 AER 110MCG	2	PV, QL
ASMANEX 14 AER 220MCG	2	PV, QL

Drug Name	Drug Tier	Requirements/Limits
ASMANEX 30 AER 110MCG	2	PV, QL
ASMANEX 30 AER 220MCG	2	PV, QL
ASMANEX 60 AER 220MCG	2	PV, QL
ASMANEX 120 AER 220MCG	2	PV, QL
ASMANEX HFA AER 100 MCG	2	PV, QL
ASMANEX HFA AER 200 MCG	2	PV, QL
<i>budesonide inhalation susp 0.5 mg/2ml</i>	2	PV, QL
<i>budesonide inhalation susp 0.25 mg/2ml</i>	2	PV, QL
<i>budesonide inhalation susp 1 mg/2ml</i>	2	PV, QL
FLOVENT DISK AER 50MCG	2	PV, QL
FLOVENT DISK AER 100MCG	2	PV, QL
FLOVENT DISK AER 250MCG	2	PV, QL
FLOVENT HFA AER 44MCG	2	PV, QL
FLOVENT HFA AER 110MCG	2	PV, QL
FLOVENT HFA AER 220MCG	2	PV, QL
PULMICORT INH 90MCG	2	PV, QL
PULMICORT INH 180MCG	2	PV, QL
PULMICORT SUS 0.5MG/2	3	PV, QL
PULMICORT SUS 0.25MG/2	3	PV, QL
PULMICORT SUS 1MG/2ML	3	PV, QL
QVAR AER 40MCG	2	PV, QL
QVAR AER 80MCG	2	PV, QL
QVAR REDIIHA AER 80MCG	2	PV, QL
QVAR REDIIHAL AER 40MCG	2	PV, QL
STEROID/BETA AGONIST COMBINATIONS		
ADVAIR DISKU AER 100/50	2	PV, QL
ADVAIR DISKU AER 250/50	2	PV, QL
ADVAIR DISKU AER 500/50	2	PV, QL
ADVAIR HFA AER 45/21	2	PV, QL
ADVAIR HFA AER 115/21	2	PV, QL
ADVAIR HFA AER 230/21	2	PV, QL
AIRDUO RESPI INH 55-14	NC	
AIRDUO RESPI INH 113-14	NC	
AIRDUO RESPI INH 232-14	NC	
BREO ELLIPTA INH 100-25	2	PV, QL
BREO ELLIPTA INH 200-25	2	PV, QL
DULERA AER 100-5MCG	NC	
DULERA AER 200-5MCG	NC	
SYMBICORT AER 80-4.5	2	QL
SYMBICORT AER 160-4.5	2	QL
XANTHINES		
<i>aminophylline inj 25 mg/ml</i>	1	
<i>difil-g fort liq 100-100</i>	1	
ELIXOPHYLLIN ELX 80/15ML	3	
THEO-24 CAP 100MG CR	3	
THEO-24 CAP 200MG CR	3	

Drug Name	Drug Tier	Requirements/Limits
THEO-24 CAP 300MG CR	3	
THEO-24 CAP 400MG ER	3	
<i>theochron tab 100mg cr</i>	1	
<i>theochron tab 200mg cr</i>	1	
<i>theochron tab 300mg cr</i>	1	
THEOPHYL/D5W INJ 0.8MG/ML	3	
<i>theophylline soln 80 mg/15ml</i>	1	
<i>theophylline tab er 12hr 100 mg</i>	1	
<i>theophylline tab er 12hr 200 mg</i>	1	
<i>theophylline tab er 12hr 300 mg</i>	1	
<i>theophylline tab er 12hr 450 mg</i>	1	
<i>theophylline tab er 24hr 400 mg</i>	1	
<i>theophylline tab er 24hr 600 mg</i>	1	

TOPICAL

DERMATOLOGY, ACNE, Oral

ABSORICA CAP 10MG	3	PA
ABSORICA CAP 20MG	3	PA
ABSORICA CAP 25MG	3	PA
ABSORICA CAP 30MG	3	PA
ABSORICA CAP 35MG	3	PA
ABSORICA CAP 40MG	3	PA
<i>amnesteem cap 10mg</i>	2	PA
<i>amnesteem cap 20mg</i>	1	PA
<i>claravis cap 10mg</i>	2	PA
<i>claravis cap 20mg</i>	1	PA
<i>claravis cap 30mg</i>	2	PA
<i>claravis cap 40mg</i>	2	PA
<i>myorisan cap 10mg</i>	2	PA
<i>myorisan cap 20mg</i>	1	PA
<i>myorisan cap 30mg</i>	2	PA
<i>myorisan cap 40mg</i>	2	PA
<i>zenatane cap 10mg</i>	2	PA
<i>zenatane cap 20mg</i>	1	PA
<i>zenatane cap 30mg</i>	2	PA
<i>zenatane cap 40mg</i>	2	PA

DERMATOLOGY, ACNE, Topical

ACANYA GEL 1.2-2.5%	2	PA, ST
ACZONE GEL 5%	3	PA, ST
ACZONE GEL 7.5%	3	PA, ST
<i>adapalene cream 0.1%</i>	2	PA
<i>adapalene gel 0.1%</i>	1	PA
<i>adapalene gel 0.3%</i>	1	PA
<i>adapalene lotion 0.1%</i>	1	PA
<i>adapalene-benzoyl peroxide gel 0.1-2.5%</i>	2	PA
ATRALIN GEL 0.05%	2	PA
AVAR AER 9.5-5%	NC	

Drug Name	Drug Tier	Requirements/Limits
<i>avar cleanse emu 10-5%</i>	2	PA, ST
AVAR LS AER 10-2%	NC	
AVAR LS LIQ 10-2%	3	PA, ST
AVAR LS PAD 10-2%	3	PA, ST
AVAR PAD 9.5-5%	3	PA, ST
<i>avar-e emoll cre 10-5%</i>	2	PA, ST
<i>avar-e green cre 10-5%</i>	2	PA, ST
AVAR-E LS CRE 10-2%	3	PA, ST
<i>avita cre 0.025%</i>	2	PA
<i>avita gel 0.025%</i>	1	PA
AZELEX CRE 20%	3	PA, ST
BENZAC AC LIQ 5% WASH	3	PA, ST
BENZA CLIN GEL 1-5%	3	PA, ST
BENZA CLIN GEL 1-5% PUMP	3	PA, ST
BENZAMYCIN GEL 5-3%	3	
<i>benzepro aer 5.3%</i>	2	
<i>benzepro liq creamy</i>	2	
<i>benzepro mis 6%</i>	2	
BENZI Q GEL 5.25%	3	PA, ST
BENZI Q LS GEL 2.75%	3	PA, ST
<i>benziq wash liq 5.25%</i>	1	PA, ST
<i>benzoyl peroxide foam 5.3%</i>	2	OTC
<i>benzoyl peroxide foam 9.8%</i>	2	
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	2	
<i>bp 10-1 emu</i>	2	
<i>bp cleansing emu 10-4%</i>	2	
<i>bp foam aer 5.3%</i>	2	
<i>bp wash liq 2.5%</i>	2	
<i>bp wash liq 7%</i>	2	
CLEOCIN-T GEL 1%	3	PA, ST
CLEOCIN-T LOT 1%	3	PA, ST
CLEOCIN-T PAD 1%	3	PA, ST
CLEOCIN-T SOL 1%	3	PA, ST
<i>clindacin mis etz 1%</i>	1	
<i>clindacin-p pad 1%</i>	1	
CLINDAGEL GEL 1%	3	PA, ST
<i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</i>	1	
<i>clindamycin phosphate foam 1%</i>	2	
<i>clindamycin phosphate gel 1%</i>	1	
<i>clindamycin phosphate lotion 1%</i>	1	
<i>clindamycin phosphate soln 1%</i>	1	
<i>clindamycin phosphate swab 1%</i>	1	
<i>clindamycin phosphate-benzoyl peroxide gel 1-5%</i>	2	
<i>clindamycin phosphate-tretinoin gel 1.2-0.025%</i>	2	PA

Drug Name	Drug Tier	Requirements/Limits
<i>dapsone gel 5%</i>	2	
DIFFERIN CRE 0.1%	2	PA
DIFFERIN GEL 0.1%	2	PA
DIFFERIN GEL 0.3%	2	PA
DIFFERIN LOT 0.1%	2	PA
DUAC GEL 1.2-5%	3	PA, ST
EPIDUO FORTE GEL 0.3-2.5%	2	PA, ST
EPIDUO GEL 0.1-2.5%	2	PA, ST
<i>ery pad 2%</i>	1	
ERYGEL GEL 2%	3	PA, ST
<i>erythromycin gel 2%</i>	1	
<i>erythromycin pads 2%</i>	1	
<i>erythromycin soln 2%</i>	1	
EVOCLIN AER 1%	3	PA, ST
FABIOR AER 0.1%	3	PA, ST
INOVA 4/1 KIT ACNE CON	3	
INOVA 8/2 KIT ACNE CON	3	
INOVA KIT 4%	3	PA, ST
INOVA KIT 8%	3	PA, ST
KLARON LOT 10%	3	PA, ST
<i>neuac gel 1.2-5%</i>	1	
ONEXTON GEL 1.2-3.75	3	PA, ST
PLEXION CLTH PAD 9.8-4.8%	3	
PLEXION CRE 9.8-4.8%	3	PA, ST
PLEXION LIQ 9.8-4.8%	3	
PLEXION LOT 9.8-4.8%	3	PA, ST
<i>pr benzoyl liq 7% wash</i>	2	
RETIN-A CRE 0.1%	3	PA
RETIN-A CRE 0.05%	3	PA
RETIN-A CRE 0.025%	3	PA
RETIN-A GEL 0.01%	3	PA
RETIN-A GEL 0.025%	3	PA
RETIN-A MICR GEL 0.1%	2	PA
RETIN-A MICR GEL 0.1%PUMP	2	PA
RETIN-A MICR GEL 0.04%	2	PA
RETIN-A MICR GEL 0.04%PMP	2	PA
RETIN-A MICR GEL 0.06%	2	PA
RETIN-A MICR GEL 0.08%	2	PA
REZESOL LOT 2-6%	NC	
RIAX AER 5.5%	3	PA, ST
RIAX AER 9.5%	3	PA, ST
SOD SUL/SULF EMU 10-5%	2	
SOD SUL/SULF SUS 10-5%	2	
<i>sss 10-5 aer 10-5%</i>	1	
<i>sulfacetamide sodium lotion 10% (acne)</i>	1	
<i>sulfacetamide sodium w/ sulfur cleanser 9.8-4.8%</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>sulfacetamide sodium w/ sulfur cleanser 10-2%</i>	2	
<i>sulfacetamide sodium w/ sulfur cleansing pad 10-4%</i>	2	
<i>sulfacetamide sodium w/ sulfur cream 9.8-4.8%</i>	2	
<i>sulfacetamide sodium w/ sulfur cream 10-2%</i>	2	
<i>sulfacetamide sodium w/ sulfur cream 10-5%</i>	2	
<i>sulfacetamide sodium w/ sulfur emulsion 10-5%</i>	2	
<i>sulfacetamide sodium w/ sulfur lotion 9.8-4.8%</i>	2	
<i>sulfacetamide sodium w/ sulfur lotion 10-5%</i>	2	
<i>sulfacetamide sodium w/ sulfur susp 8-4%</i>	2	
<i>sulfacetamide sodium w/ sulfur wash 9-4%</i>	2	
<i>sulfacetamide sodium w/ sulfur wash 9-4.5%</i>	1	
<i>sulfacleanse sus 8-4%</i>	2	
SUMADAN KIT	3	PA, ST
SUMADAN WASH LIQ 9-4.5%	3	PA, ST
SUMADAN XLT KIT 9-4.5%	3	PA, ST
SUMAXIN CP KIT	3	PA, ST
SUMAXIN PAD 10-4%	3	PA, ST
SUMAXIN TS SUS 8-4%	3	PA, ST
SUMAXIN WASH LIQ 9-4%	3	PA, ST
<i>tazarotene cream 0.1%</i>	2	PA
TAZORAC CRE 0.1%	1	PA
TAZORAC CRE 0.05%	2	PA
TAZORAC GEL 0.1%	2	PA
TAZORAC GEL 0.05%	2	PA
<i>tretinoin cream 0.1%</i>	2	PA
<i>tretinoin cream 0.05%</i>	2	PA
<i>tretinoin cream 0.025%</i>	2	PA
<i>tretinoin gel 0.01%</i>	2	PA
<i>tretinoin gel 0.05%</i>	2	PA
<i>tretinoin gel 0.025%</i>	1	PA
<i>tretinoin microsphere gel 0.1%</i>	2	PA
<i>tretinoin microsphere gel 0.04%</i>	2	PA
VANOXIDE-HC LOT 5-0.5%	2	
VELTIN GEL	3	PA, ST
ZACLIR LOT 8%	3	PA, ST
ZIANA GEL	3	PA, ST
DERMATOLOGY, ACTINIC KERATOSIS		
AMELUZ GEL 10%	NC	

Drug Name	Drug Tier	Requirements/Limits
CARAC CRE 0.5%	NC	
<i>diclofenac sodium (actinic keratoses) gel 3%</i>	2	PA
EFUDEX CRE 5%	3	
FLUOROPLEX CRE 1%	3	
<i>fluorouracil cream 0.5%</i>	NC	
<i>fluorouracil cream 5%</i>	1	
<i>fluorouracil soln 2%</i>	1	
<i>fluorouracil soln 5%</i>	1	
<i>imiquimod cream 3.75%</i>	1	
<i>imiquimod cream 5%</i>	1	
LEVULAN KERA SOL 20%	3	
PICATO GEL 0.05%	2	
PICATO GEL 0.015%	2	
TOLAK CRE 4%	2	
ZYCLARA CRE 3.75%	2	
ZYCLARA PUMP CRE 2.5%	2	
ZYCLARA PUMP CRE 3.75%	2	

DERMATOLOGY, ANTI-INFECTIVE/ANTI-INFLAMMATORY COMBINATIONS

CORTISPORIN CRE 0.5%	3	
CORTISPORIN OIN 1%	3	
NEO-SYNALAR CRE	3	

DERMATOLOGY, ANTIBIOTICS

ALTABAX OIN 1%	3	
BACTROBAN CRE 2%	2	
BACTROBAN OIN NASAL 2%	3	
CENTANY OIN 2%	3	
<i>gentamicin sulfate cream 0.1%</i>	1	
<i>gentamicin sulfate oint 0.1%</i>	1	
<i>mupirocin calcium cream 2%</i>	2	
<i>mupirocin oint 2%</i>	1	
SILVADENE CRE 1%	2	
<i>silver sulfadiazine cream 1%</i>	1	
<i>ssd cre 1%</i>	1	
SULFAMYLON CRE 85MG/GM	3	
SULFAMYLON PAK 5%	3	

DERMATOLOGY, ANTIFUNGALS

ALA-QUIN CRE 3-0.5%	3	
ALCORTIN A GEL 1-2-1%	NC	
<i>ciclodan cre 0.77%</i>	1	
<i>ciclodan sol 8%</i>	1	PA
CICLODAN SOL KIT 8%	3	PA
<i>ciclopirox gel 0.77%</i>	2	
<i>ciclopirox olamine cream 0.77% (base equiv)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>ciclopirox olamine susp 0.77% (base equiv)</i>	1	
<i>ciclopirox shampoo 1%</i>	1	
<i>ciclopirox solution 8%</i>	1	PA
<i>clotrimazole cream 1%</i>	1	
<i>clotrimazole soln 1%</i>	1	
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	1	
<i>clotrimazole w/ betamethasone lotion 1-0.05%</i>	1	
<i>dermazene cre 1%</i>	2	
<i>econazole nitrate cream 1%</i>	1	
ECOZA AER 1%	3	
ERTACZO CRE 2%	3	
EXELDERM CRE 1%	3	
EXELDERM SOL 1%	3	
EXODERM LOT 25-1%	3	
EXTINA AER 2%	3	
<i>iodoquinol-hc cream 1%</i>	2	
<i>iodoquinol-hydrocortisone in aloe vehicle cream 1-1.9%</i>	2	
JUBLIA SOL 10%	2	PA
KERYDIN SOL 5%	3	PA
<i>ketoconazole cream 2%</i>	1	
<i>ketoconazole foam 2%</i>	2	
<i>ketoconazole shampoo 2%</i>	1	
LOPROX SHA 1%	3	
LOPROX SUS 0.77%	NC	
LOTRISONE CRE	3	
LUZU CRE 1%	2	
MENTAX CRE 1%	3	
<i>naftifine hcl cream 1%</i>	2	
<i>naftifine hcl cream 2%</i>	2	
NAFTIN CRE 2%	2	
NAFTIN GEL 1%	2	
NAFTIN GEL 2%	2	
NIZORAL SHA 2%	3	
<i>nyamyc pow 100000</i>	1	
<i>nystatin cream 100000 unit/gm</i>	1	
<i>nystatin oint 100000 unit/gm</i>	1	
<i>nystatin topical powder 100000 unit/gm</i>	1	
<i>nystatin-triamcinolone cream 100000-0.1 unit/gm-%</i>	2	
<i>nystatin-triamcinolone oint 100000-0.1 unit/gm-%</i>	2	
<i>nystop pow 100000</i>	1	
<i>oxiconazole nitrate cream 1%</i>	2	

Drug Name	Drug Tier	Requirements/Limits
OXISTAT CRE 1%	3	
OXISTAT LOT 1%	3	
PENLAC SOL 8%	3	PA
VUSION OIN	3	
VYTONER CRE 1-1.9%	3	
XOLEGEL GEL 2%	3	
DERMATOLOGY, ANTIPSORIATICS, INJECTABLE		
ILUMYA SOL 100MG/ML	NC	
DERMATOLOGY, ANTIPSORIATICS, ORAL		
<i>acitretin cap 10 mg</i>	2	PA
<i>acitretin cap 17.5 mg</i>	2	PA
<i>acitretin cap 25 mg</i>	2	PA
<i>methoxsalen rapid cap 10 mg</i>	2	
OXSORALEN-UL CAP 10MG	3	
SORIATANE CAP 10MG	3	PA
SORIATANE CAP 17.5MG	3	PA
SORIATANE CAP 25MG	3	PA
DERMATOLOGY, ANTIPSORIATICS, Topical		
<i>calcipotriene cream 0.005%</i>	2	
<i>calcipotriene oint 0.005%</i>	2	
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	1	
<i>calcipotriene-betamethasone dipropionate oint 0.005-0.064%</i>	2	
<i>calcitrene oin 0.005%</i>	2	
<i>calcitriol oint 3 mcg/gm</i>	2	
DOVONEX CRE 0.005%	3	
DRITHO-CREME CRE HP 1%	3	
ENSTILAR AER	3	
SORILUX AER 0.005%	3	
TACLONEX OIN	3	
TACLONEX SUS	3	
VECTICAL OIN 3MCG/GM	3	
ZITHRANOL SHA 1%	3	
DERMATOLOGY, ANTISEBORRHEICS		
ESKATA SOL 40%	NC	
GLYCOLIC ACD SOL 70%	3	
LOUTREX CRE	3	
OVACE PLUS AER 9.8%	NC	
OVACE PLUS CRE 10%	3	
OVACE PLUS GEL 10% WASH	3	
OVACE PLUS LIQ 10% WASH	3	
OVACE PLUS LOT 9.8%	3	
OVACE PLUS SHA 10%	3	
OVACE WASH LIQ 10%	3	
PROMISEB CRE	3	
PROMISEB KIT COMPLETE	3	

Drug Name	Drug Tier	Requirements/Limits
<i>selenium sulfide lotion 2.5%</i>	1	
<i>selenium sulfide shampoo 2.25%</i>	1	
SELRX SHA 2.3%	3	
SODIUM SULFA LIQ 10% WASH	3	
<i>sulfacetamide sodium cleansing gel 10%</i>	2	
<i>sulfacetamide sodium liquid 10%</i>	1	
<i>sulfacetamide sodium shampoo 10%</i>	2	
DERMATOLOGY, ANTISEPTICS/DISINFECTANTS		
ANASEPT SPR	NC	
BENZALKONIUM SOL 50%	3	
BENZALKONIUM SOL NF	3	
BUCALSEP SOL	3	
BUCALSEP SPR	3	
CHLORHEX GLU SOL 20%	3	
<i>forma-ray sol 20%</i>	1	
<i>formadon sol</i>	1	
FORMALDEHYDE SOL 37%	3	
<i>formaldehyde solution 10%</i>	1	
GLUTARALDEHY SOL 25%	3	
<i>hydrogen peroxide soln 30%</i>	1	
IODINE TIN 2%	3	
KERR TRIPLE MIS DYE SWAB	3	OTC
LUGOLS SOL STRONG	3	
<i>triple dye solution</i>	1	
DERMATOLOGY, ATOPIC DERMATITIS, Injectable		
DUPIXENT INJ 300/2ML	5	PA, QL, SP
DERMATOLOGY, ATOPIC DERMATITIS, Topical		
ELIDEL CRE 1%	2	PA
EUCRISA OIN 2%	3	ST
PROTOPIC OIN 0.1%	3	PA
PROTOPIC OIN 0.03%	3	PA
<i>tacrolimus oint 0.1%</i>	2	PA
<i>tacrolimus oint 0.03%</i>	2	PA
DERMATOLOGY, CORTICOSTEROID COMBINATIONS		
CORTANE-B LOT	3	
EPIFOAM AER 1%	3	
NOVACORT GEL	NC	
PRAMOSONE CRE 1-1%	3	
PRAMOSONE CRE 1-2.5%	3	
PRAMOSONE E CRE 1-2.5%	3	
PRAMOSONE LOT 1%	3	
PRAMOSONE LOT 2.5%	3	
PRAMOSONE OIN 1%	3	
PRAMOSONE OIN 2.5%	3	
<i>pramoxine-hc cream 1-2.5%</i>	2	
DERMATOLOGY, CORTICOSTEROIDS, High Potency		

Drug Name	Drug Tier	Requirements/Limits
<i>amcinonide cream 0.1%</i>	2	
<i>amcinonide lotion 0.1%</i>	2	
AMCINONIDE OIN 0.1%	3	
APEXICON E CRE 0.05%	NC	
<i>betamethasone dipropionate augmented cream 0.05%</i>	1	
<i>betamethasone dipropionate augmented lotion 0.05%</i>	1	
<i>betamethasone dipropionate cream 0.05%</i>	1	
<i>betamethasone dipropionate lotion 0.05%</i>	1	
<i>betamethasone dipropionate oint 0.05%</i>	1	
<i>desoximetasone cream 0.25%</i>	1	
<i>desoximetasone gel 0.05%</i>	2	
<i>desoximetasone oint 0.25%</i>	2	
<i>desoximetasone spray 0.25%</i>	1	
<i>diflorasone diacetate cream 0.05%</i>	2	
DIPROLENE AF CRE 0.05%	3	PA
DIPROLENE LOT 0.05%	3	PA
<i>fluocinonide cream 0.1%</i>	NC	
<i>fluocinonide cream 0.05%</i>	1	
<i>fluocinonide emulsified base cream 0.05%</i>	1	
<i>fluocinonide gel 0.05%</i>	1	
<i>fluocinonide oint 0.05%</i>	1	
<i>fluocinonide soln 0.05%</i>	1	
HALOG CRE 0.1%	NC	
HALOG OIN 0.1%	NC	
PSORCON CRE 0.05%	3	PA
SERNIVO SPR	NC	
TOPICORT CRE 0.25%	3	PA
TOPICORT GEL 0.05%	2	PA
TOPICORT OIN 0.25%	2	PA
TOPICORT SPR 0.25%	3	PA
<i>triamcinolone acetonide cream 0.5%</i>	1	
<i>triamcinolone acetonide oint 0.5%</i>	1	
VANOS CRE 0.1%	3	PA

DERMATOLOGY, CORTICOSTEROIDS, Low Potency

ALA SCALP LOT 2%	3	
<i>ala-cort cre 1%</i>	1	
<i>ala-cort cre 2.5%</i>	1	
<i>alclometasone dipropionate cream 0.05%</i>	1	
<i>alclometasone dipropionate oint 0.05%</i>	1	
CAPEX SHA 0.01%	2	
DERMA-SMOOTH OIL /FS BODY	2	
DERMA-SMOOTH OIL /FS SCLP	2	
DESONATE GEL 0.05%	3	PA
<i>desonide cream 0.05%</i>	1	
<i>desonide lotion 0.05%</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>desonide oint 0.05%</i>	1	
DESOWEN CRE 0.05%	2	PA
DESOWEN LOT 0.05%	2	PA
<i>fluocinolone acetonide cream 0.01%</i>	1	
<i>fluocinolone acetonide oil 0.01% (body oil)</i>	2	
<i>fluocinolone acetonide oil 0.01% (scalp oil)</i>	2	
<i>fluocinolone acetonide soln 0.01%</i>	2	
<i>hydrocortiso oin absorbas</i>	NC	
<i>hydrocortisone cream 1%</i>	1	
<i>hydrocortisone cream 2.5%</i>	1	
<i>hydrocortisone lotion 2.5%</i>	1	
<i>hydrocortisone oint 1%</i>	1	
<i>hydrocortisone oint 2.5%</i>	1	
MICORT-HC CRE 2.5%	NC	
NUCORT LOT 2%	3	
<i>scalacort lot 2%</i>	1	
SYNALAR SOL 0.01%	3	PA
TEXACORT SOL 2.5%	2	PA
TRIDESILON CRE 0.05%	2	PA
VERDESO AER 0.05%	3	PA

DERMATOLOGY, CORTICOSTEROIDS, Medium Potency

<i>betamethasone valerate aerosol foam 0.12%</i>	2	
<i>betamethasone valerate cream 0.1% (base 1 equivalent)</i>		
<i>betamethasone valerate lotion 0.1% (base 1 equivalent)</i>		
<i>betamethasone valerate oint 0.1% (base 1 equivalent)</i>	1	
<i>clocortolone pivalate cream 0.1%</i>	2	
CLODERM CRE 0.1%	3	PA
CLODERM CRE 0.1% PMP	3	PA
CORDRAN 80X3 TAP 4MCG/CM	3	PA
CORDRAN CRE 0.05%	3	PA
CORDRAN LOT 0.05%	3	PA
CORDRAN OIN 0.05%	3	PA
CUTIVATE LOT 0.05%	3	PA
<i>desoximetasone cream 0.05%</i>	2	
<i>desoximetasone oint 0.05%</i>	2	
ELOCON CRE 0.1%	3	PA
ELOCON OIN 0.1%	2	PA
<i>fluocinolone acetonide cream 0.025%</i>	1	
<i>fluocinolone acetonide oint 0.025%</i>	1	
<i>flurandrenolide cream 0.05%</i>	2	
<i>flurandrenolide lotion 0.05%</i>	2	
<i>flurandrenolide oint 0.05%</i>	2	
<i>fluticasone propionate cream 0.05%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>fluticasone propionate lotion 0.05%</i>	2	
<i>fluticasone propionate oint 0.005%</i>	1	
<i>hydrocortisone butyrate cream 0.1%</i>	2	
<i>hydrocortisone butyrate hydrophilic lipo base cream 0.1%</i>	2	
<i>hydrocortisone butyrate oint 0.1%</i>	2	
<i>hydrocortisone butyrate soln 0.1%</i>	2	
<i>hydrocortisone valerate cream 0.2%</i>	1	
<i>hydrocortisone valerate oint 0.2%</i>	2	
KENALOG AER SPRAY	3	PA
LOCOID CRE 0.1%	3	PA
LOCOID LIPO CRE 0.1%	3	PA
LOCOID LOT 0.1%	3	PA
LOCOID OIN 0.1%	3	PA
LOCOID SOL 0.1%	3	PA
LUXIQ AER 0.12%	3	PA
<i>mometasone furoate cream 0.1%</i>	1	
<i>mometasone furoate oint 0.1%</i>	1	
<i>mometasone furoate solution 0.1% (lotion)</i>	1	
PANDEL CRE 0.1%	3	PA
<i>prednicarbate cream 0.1%</i>	1	
<i>prednicarbate oint 0.1%</i>	1	
SYNALAR CRE 0.025%	3	PA
SYNALAR OIN 0.025%	3	PA
TOPICORT CRE 0.05%	3	PA
TOPICORT OIN 0.05%	2	PA
<i>triamcinolone acetonide aerosol soln 0.147 mg/gm</i>	2	
<i>triamcinolone acetonide cream 0.1%</i>	1	
<i>triamcinolone acetonide cream 0.025%</i>	1	
<i>triamcinolone acetonide lotion 0.1%</i>	1	
<i>triamcinolone acetonide lotion 0.025%</i>	1	
<i>triamcinolone acetonide oint 0.1%</i>	1	
<i>triamcinolone acetonide oint 0.025%</i>	1	
TRIANEX OIN 0.05%	3	PA
<i>triderm cre 0.1%</i>	1	
DERMATOLOGY, CORTICOSTEROIDS, Very High Potency		
<i>betamethasone dipropionate augmented gel 0.05%</i>	2	
<i>betamethasone dipropionate augmented oint 0.05%</i>	2	
<i>clobetasol e cre 0.05%</i>	1	
<i>clobetasol propionate cream 0.05%</i>	1	
<i>clobetasol propionate emulsion foam 0.05%</i>	2	
<i>clobetasol propionate foam 0.05%</i>	2	
<i>clobetasol propionate gel 0.05%</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>clobetasol propionate lotion 0.05%</i>	2	
<i>clobetasol propionate oint 0.05%</i>	2	
<i>clobetasol propionate shampoo 0.05%</i>	2	
<i>clobetasol propionate soln 0.05%</i>	1	
<i>clobetasol propionate spray 0.05%</i>	NC	
CLOBEX LOT 0.05%	2	PA
CLOBEX SHA 0.05%	2	PA
CLOBEX SPR 0.05%	NC	
<i>clodan sha 0.05%</i>	2	
<i>diflorasone diacetate oint 0.05%</i>	2	
DIPROLENE OIN 0.05%	2	PA
<i>halobetasol propionate cream 0.05%</i>	1	
<i>halobetasol propionate oint 0.05%</i>	1	
IMPOYZ CRE 0.025%	NC	
OLUX AER 0.05%	3	PA
OLUX-E AER 0.05%	NC	
TEMOVATE CRE 0.05%	3	PA
TEMOVATE OIN 0.05%	2	PA
ULTRAVATE CRE 0.05%	2	PA
ULTRAVATE LOT 0.05%	NC	
ULTRAVATE OIN 0.05%	2	PA

DERMATOLOGY, EMOLLIENTS

CERAVE LOT	3	OTC
<i>hyaluronate sodium (emollient) gel 0.2%</i>	1	
HYLIRA GEL 0.2%	3	
HYLIRA LOT 0.1%	3	
KERALAC CRE 47%	3	
LAC-HYDRIN CRE 12%	2	
<i>lactic acid (ammonium lactate) cream 12%</i>	1	
<i>lactic acid (ammonium lactate) lotion 10%</i>	1	
<i>lactic acid (ammonium lactate) lotion 12%</i>	1	
<i>lactic acid w/ vitamin e cream 10%-3500 unit/30gm</i>	1	
LATRIX XM EMU 45%	3	
NEOSALUS LOT	3	
<i>salrix sus 50%</i>	1	
<i>umecta mouss aer 40%</i>	1	
URALISS CRE 35%	NC	
URAMAXIN GEL 45%	3	
<i>ure-k cre 50%</i>	2	
<i>urea cream 39%</i>	2	
<i>urea cream 40%</i>	1	
<i>urea cream 45%</i>	1	
<i>urea cream 50%</i>	2	
<i>urea hydrati aer 35%</i>	2	
<i>urea in zinc undecylenate-lactic acid vehicle emulsion 50%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>urea lotion 40%</i>	2	
<i>urea nail gel 45%</i>	1	
UREA NAIL MIS 50%	3	
<i>urea suspension 40%</i>	1	
<i>urea-c40 lot 40%</i>	2	
UREVAZ CRE 44%	NC	
UTOPIC CRE 41%	3	
DERMATOLOGY, LOCAL ANALGESICS		
<i>lidocaine patch 5%</i>	2	PA, QL
LIDODERM DIS 5%	2	PA, QL
QUTENZA KIT 8% 1-PCH	6	SP
QUTENZA KIT 8% 2-PCH	6	SP
DERMATOLOGY, LOCAL ANESTHETICS		
ANACAINE OIN	3	
CETACAINE AER	3	
COCAINE HCL SOL 40MG/ML	NC	
<i>cocaine hcl soln 4%</i>	2	
GEBAUERS SPR AER /STRETCH	3	
<i>glydo gel 2%</i>	1	PA, QL
GOPRELTO SOL 40MG/ML	NC	
LIDOCAINE HC CRE 4.12%	NC	
<i>lidocaine hcl gel 2%</i>	1	PA, QL
<i>lidocaine hcl soln 4%</i>	1	PA, QL
<i>lidocaine oin 5%</i>	2	PA, QL
<i>lidocaine oin pak 5%</i>	2	PA, QL
<i>lidocaine oint 5%</i>	2	PA, QL
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	1	PA, QL
<i>lidocaine-tetracaine cream 7-7%</i>	2	
PAIN EASE AER MD STRM	3	
PAIN EASE AER MIST	3	
PLIAGLIS CRE 7-7%	NC	
<i>pramox gel 1%</i>	1	
SYNERA DIS 70-70MG	3	PA, QL
TETRAVEX GEL 2%	NC	
DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE		
ACUICYN LIQ	NC	
<i>acyclovir oint 5%</i>	2	
ALDARA CRE 5%	3	
ALEVICYN KIT PLUS	NC	
ALEVICYN SG GEL ANTIPRUR	NC	
ARNICA TIN FLOWER	3	
<i>arzol silver mis nitr app</i>	1	
ATOPICLAIR CRE	3	
AVENOVA SOL 0.01%	3	
AVENOVA SOL NEUTROX	3	
BEAU RX GEL	3	

Drug Name	Drug Tier	Requirements/Limits
BENSAL HP OIN	NC	
BENZOIN TIN NF	3	
<i>celacyn gel</i>	2	
CERACADE EMU	NC	
<i>ceramax cre</i>	2	
CONDYLOX GEL 0.5%	2	
DENAVIR CRE 1%	3	
DERMACINRX KIT COMBOPAK	NC	
DEXERYL CRE	3	
<i>doxepin hcl cream 5%</i>	2	PA, QL, ST
DRYSOL SOL 20%	3	
ELESTONE CRE	3	
ELESTONE CRE TWINPACK	3	
EMULSION SB EMU	NC	
ENTTY EMU SPRAY	NC	
EPICERAM EMU	NC	
GENADUR LIQ	3	
GORDOFILM SOL	3	
HPR AER	3	
HPR PLUS AER	NC	
HPR PLUS CRE	NC	
HPR PLUS KIT	NC	
HYCLODEX SOL 0.012%	NC	
HYLATOPIC AER PLUS	3	
HYLATOPIC CRE PLUS	3	
HYLATOPIC LOT PLUS	3	
KELARX GEL	NC	
KERALYT GEL 6%	3	
MB HYDROGEL KIT	NC	
NEOSALUS AER	3	
NEOSALUS CP CRE	3	
NEOSALUS CRE	3	
NIVATOPIC CRE PLUS	3	
NUVAIL SOL 16%	3	
PANRETIN GEL 0.1%	3	
PHLAG SPR	NC	
PODOCON SOL 25%	3	
<i>podofilox soln 0.5%</i>	1	
PR CREAM KIT	NC	
PRESERA AER	3	
PRUCLAIR CRE	3	
PRUDOXIN CRE 5%	3	PA, QL, ST
PRUMYX CRE	3	
PYROGALL ACD OIN	3	
RECEDO GEL	3	
<i>restizan gel</i>	2	
SALEX SHA 6%	3	

Drug Name	Drug Tier	Requirements/Limits
<i>salicylic ac liq 27.5%</i>	1	
<i>salicylic acid cream 6%</i>	1	
<i>salicylic acid er film-forming soln 28.5%</i>	2	
<i>salicylic acid film forming liquid 27.5%</i>	1	
<i>salicylic acid foam 6%</i>	2	
<i>salicylic acid gel 6%</i>	2	
<i>salicylic acid lotion 6%</i>	1	
<i>salicylic acid shampoo 6%</i>	1	
<i>salicylic acid soln 26%</i>	1	
<i>salisol fort sol 26%</i>	1	
<i>salitech lot forte</i>	1	
SALVAX AER 6%	3	
SANTYL OIN 250/GM	3	
SCAR MANAGE GEL	NC	
SILALITE PAK MIS	NC	
SILIPAC KIT	NC	
SILVER NITRA OIN 10%	3	
SILVER NITRA SOL 0.5%	3	
SILVER NITRA SOL 10%	3	
SILVER NITRA SOL 25%	3	
SILVER NITRA SOL 50%	3	
SYNERDERM EMU	NC	
TETRIX CRE	3	
TRI-CHLOR LIQ 80%	3	
TRIXYLITRAL MIS	NC	
TURPENTINE SOL SPIRITS	3	
VEREGEN OIN 15%	3	
VIRASAL LIQ 27.5%	3	
XALIX SOL 28%	NC	
XERALUX CRE	3	
XERESE CRE 5-1%	3	
XIAFLEX INJ 0.9MG	6	SP
ZONALON CRE 5%	3	PA, QL, ST
ZOVIRAX CRE 5%	3	
ZOVIRAX OIN 5%	3	

DERMATOLOGY, ROSACEA

<i>doxycycline (rosacea) cap delayed release 40 mg</i>	2	
FINACEA AER 15%	2	PA
FINACEA GEL 15%	2	PA
METROCREAM CRE 0.75%	3	
METROGEL GEL 1%	3	
METROLOTION LOT 0.75%	3	
<i>metronidazole cream 0.75%</i>	1	
<i>metronidazole gel 0.75%</i>	1	
<i>metronidazole gel 1%</i>	2	
<i>metronidazole lotion 0.75%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
MIRVASO GEL 0.33%	3	PA
NORITATE CRE 1%	NC	
ORACEA CAP 40MG	2	
RHOFADE CRE 1%	3	PA
<i>rosadan cre 0.75%</i>	1	
<i>rosadan gel 0.75%</i>	1	
SOOLANTRA CRE 1%	2	PA
DERMATOLOGY, SCABICIDES AND PEDICULICIDES		
<i>crotan lot 10%</i>	1	
ELIMITE CRE 5%	2	
EURAX CRE 10%	3	
EURAX LOT 10%	3	
<i>lindane shampoo 1%</i>	2	
<i>malathion lotion 0.5%</i>	2	
NATROBA SUS 0.9%	3	
OVIDE LOT 0.5%	2	
<i>permethrin cream 5%</i>	1	
SKLICE LOT 0.5%	3	
<i>spinosad susp 0.9%</i>	2	
SULF LIME SOL	3	
ULESFIA LOT 5%	3	
DERMATOLOGY, WOUND CARE PRODUCTS		
<i>alevicyn sol dermal</i>	2	
<i>levicyn sol dermal</i>	2	
REGRANEX GEL 0.01%	3	
<i>vashe cleans sol</i>	2	
IRRIGATION SOLUTIONS		
<i>argyl saline sol 100ml</i>	1	
<i>lactated ringer's for irrigation</i>	1	
<i>physiolyte sol</i>	1	
<i>physiosol sol irrigat</i>	1	
<i>ringer's solution for irrigation</i>	1	
<i>tis-u-sol sol</i>	1	
<i>water for irrigation, sterile irrigation soln</i>	1	
MOUTH/THROAT/DENTAL AGENTS, MISCELLANEOUS		
AQUORAL SPR	3	
ARESTIN MIS 1MG	3	
CAPHOSOL SOL	3	
<i>chlorhexidine gluconate soln 0.12%</i>	1	
DEBACTEROL SOL 30-50%	3	
<i>lidocaine hcl laryngotracheal soln 4%</i>	1	
<i>lidocaine hcl viscous soln 2%</i>	1	
NEUTRASAL POW	NC	
NUMOISYN LIQ	3	
NUMOISYN LOZ	3	
<i>oralone dent pst 0.1%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>paroex sol 0.12%</i>	1	
PERIDEX SOL 0.12%	3	
<i>periogard sol 0.12%</i>	1	
SALIVAMAX POW	NC	
<i>topex topical aer anesthetic</i>	1	
<i>triamcinolone acetonide dental paste 0.1%</i>	1	
MOUTH/THROAT/DENTAL AGENTS, PROTECTANTS		
EPISIL LIQ	2	
GELCLAIR GEL	3	
MUCOTROL WAF	3	
MUGARD LIQ	5	SP
ORAFATE PST 10%	3	
PROTHELIAL PST 10%	3	
OPHTHALMIC, ANTI-INFECTIVE/ANTI-INFLAMMATORY COMBINATIONS		
<i>bacitracin-polymyxin-neomycin-hc ophthalmic oint 1%</i>	1	
BLEPHAMIDE OIN S.O.P.	3	
BLEPHAMIDE SUS OP	3	
DEX/MOX/KETO SOL	NC	
DEXAM/MOXI SOL 1-5MG/ML	NC	
GATIFL-DEXAM SOL 0.5-0.1%	NC	
MAXITROL OIN 0.1% OP	3	
MAXITROL SUS 0.1% OP	3	
<i>neo-polycin oint hc 1% op</i>	1	
<i>neomycin-polymyxin-dexamethasone ophthalmic oint 0.1%</i>	1	
<i>neomycin-polymyxin-dexamethasone ophthalmic susp 0.1%</i>	1	
<i>neomycin-polymyxin-hc ophthalmic susp</i>	2	
PRED-G S.O.P OIN OP	3	
PRED-G SUS OP	3	
PRED-GATI SUS 1-0.5%	NC	
PRED-GATIFL- SUS BROMFENA	NC	
<i>sulfacetamide sodium-prednisolone ophthalmic soln 10-0.23(0.25)%</i>	1	
TOBRADEX OIN 0.3-0.1%	2	
TOBRADEX ST SUS 0.3-0.05	2	
TOBRADEX SUS 0.3-0.1%	3	
<i>tobramycin-dexamethasone ophthalmic susp 0.3-0.1%</i>	2	
TRIAM/MOXI SUS 15-1	NC	
ZYLET SUS 0.5-0.3%	2	
OPHTHALMIC, ANTI-INFECTIVES		
AZASITE SOL 1%	3	
<i>bacitracin ophthalmic oint 500 unit/gm</i>	2	
<i>bacitracin-polymyxin b ophthalmic oint</i>	1	

Drug Name	Drug Tier	Requirements/Limits
BESIVANCE SUS 0.6%	2	
BETADINE SOL 5% OP	3	
BLEPH-10 SOL 10% OP	3	
CILOXAN OIN 0.3% OP	2	
CILOXAN SOL 0.3% OP	3	
<i>ciprofloxacin hcl ophth soln 0.3%</i>	1	
<i>erythromycin ophth oint 5 mg/gm</i>	1	
<i>gatifloxacin ophth soln 0.5%</i>	1	
<i>gentak oin 0.3% op</i>	1	
<i>gentamicin sulfate ophth soln 0.3%</i>	1	
<i>levofloxacin ophth soln 0.5%</i>	1	
MITOSOL KIT 0.2MG	3	
MOXEZA SOL 0.5%	2	
<i>moxifloxacin hcl ophth soln 0.5% (base equiv)</i>	2	
MOXIFLOXACIN SOL 5MG/ML	NC	
<i>neo-polycin oin op</i>	2	
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	2	
<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	1	
NEOSPORIN SOL OP	3	
OCUFLOX DRO 0.3% OP	3	
<i>ofloxacin ophth soln 0.3%</i>	1	
<i>polycin oin op</i>	1	
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	1	
POLYTRIM SOL OP	3	
<i>sulfacetamide sodium ophth oint 10%</i>	2	
<i>sulfacetamide sodium ophth soln 10%</i>	1	
<i>tobramycin ophth soln 0.3%</i>	1	
TOBEX OIN 0.3% OP	3	
TOBEX SOL 0.3% OP	3	
VIGAMOX DRO 0.5%	3	
ZYMAXID SOL 0.5%	3	
OPHTHALMIC, ANTI-INFLAMMATORY, Nonsteroidal		
ACULAR LS SOL 0.4%	3	
ACULAR SOL 0.5% OP	3	
ACUVAIL SOL 0.45%	2	
<i>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</i>	2	
BROMSITE DRO 0.075%	NC	
<i>diclofenac sodium ophth soln 0.1%</i>	1	
<i>flurbiprofen sodium ophth soln 0.03%</i>	1	
ILEVRO DRO 0.3% OP	2	
<i>ketorolac tromethamine ophth soln 0.4%</i>	1	
<i>ketorolac tromethamine ophth soln 0.5%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
NEVANAC SUS 0.1%	2	
PROLENSA SOL 0.07%	3	
OPHTHALMIC, ANTI-INFLAMMATORY, Steroid Combinations		
PREDNIS/BROM SUS 1-0.075%	NC	
OPHTHALMIC, ANTI-INFLAMMATORY, Steroidal		
ALREX SUS 0.2%	3	
<i>dexamethasone sodium phosphate ophth soln 0.1%</i>	1	
DEXYCU SUS 9%	NC	
DUREZOL EMU 0.05%	2	
FLAREX SUS 0.1% OP	2	
<i>fluorometholone ophth susp 0.1%</i>	1	
FML FORTE SUS 0.25% OP	2	
FML LIQUIFLM SUS 0.1% OP	3	
FML OIN 0.1% OP	2	
ILUVIEN IMP 0.19MG	6	SP
LOTEMAX GEL 0.5%	3	
LOTEMAX OIN 0.5%	3	
LOTEMAX SUS 0.5%	3	
MAXIDEX SUS 0.1% OP	2	
OMNIPRED SUS 1% OP	NC	
OZURDEX IMP 0.7MG	6	SP
PRED FORTE SUS 1% OP	NC	
PRED MILD SUS 0.12% OP	2	
PRED SOD PHO SOL 1% OP	3	
<i>prednisolone acetate ophth susp 1%</i>	1	
RETISERT IMP 0.59MG	6	SP
TRIESENCE INJ 40MG/ML	3	
OPHTHALMIC, ANTIALLERGICS		
ALOCRI SOL 2%	3	
ALOMIDE SOL 0.1% OP	3	
<i>azelastine hcl ophth soln 0.05%</i>	1	
BEPREVE DRO 1.5%	3	
<i>cromolyn sodium ophth soln 4%</i>	1	
ELESTAT DRO 0.05%	3	
EMADINE SOL 0.05% OP	3	
<i>epinastine hcl ophth soln 0.05%</i>	1	
LASTACFT SOL 0.25%	2	
<i>olopatadine hcl ophth soln 0.1% (base equivalent)</i>	1	
<i>olopatadine hcl ophth soln 0.2% (base equivalent)</i>	1	
PATADAY SOL 0.2%	3	
PATANOL SOL 0.1% OP	3	
PAZEO DRO 0.7%	2	
OPHTHALMIC, ANTIFUNGALS		

Drug Name	Drug Tier	Requirements/Limits
NATACYN SUS 5% OP	3	
OPHTHALMIC, ANTIVIRALS		
<i>trifluridine ophth soln 1%</i>	2	
VIROPTIC SOL 1% OP	2	
ZIRGAN GEL 0.15%	3	
OPHTHALMIC, ARTIFICIAL TEARS/LUBRICANTS		
LACRISERT MIS 5MG OP	3	
OPHTHALMIC, BETA-BLOCKER/COMBINATIONS		
TIM/BRIM/DOR SOL	NC	
TIM/DORZ/LAT SOL	NC	
TIMOL/BRIM SOL DORZ/LAT	NC	
TIMOL/LATAN SOL	NC	
OPHTHALMIC, BETA-BLOCKERS, Nonselective		
BETAGAN SOL 0.5% OP	3	
BETIMOL SOL 0.5%	2	
BETIMOL SOL 0.25%	2	
<i>carteolol hcl ophth soln 1%</i>	1	
ISTALOL SOL 0.5% OP	3	
<i>levobunolol hcl ophth soln 0.5%</i>	1	
<i>metipranolol ophth soln 0.3%</i>	1	
<i>timolol maleate ophth gel forming soln 0.5%</i>	1	
<i>timolol maleate ophth gel forming soln 0.25%</i>	1	
<i>timolol maleate ophth soln 0.5%</i>	1	
<i>timolol maleate ophth soln 0.5% (once-daily)</i>	2	
<i>timolol maleate ophth soln 0.25%</i>	1	
TIMOPTIC OCU SOL 0.5% OP	3	
TIMOPTIC OCU SOL 0.25% OP	3	
TIMOPTIC SOL 0.5% OP	3	
TIMOPTIC SOL 0.25% OP	3	
TIMOPTIC-XE SOL 0.5% OP	3	
OPHTHALMIC, BETA-BLOCKERS, Selective		
<i>betaxolol hcl ophth soln 0.5%</i>	1	
BETOPTIC-S SUS 0.25% OP	2	
OPHTHALMIC, CARBONIC ANHYDRASE INHIBITOR/BETA-BLOCKER COMBINATIONS		
COSOPT PF SOL	3	
COSOPT SOL 22.3-6.8	3	
<i>dorzolamide hcl-timolol maleate ophth sol 22.3-6.8 mg/ml pf</i>	1	
<i>dorzolamide hcl-timolol maleate ophth soln 22.3-6.8 mg/ml</i>	1	
OPHTHALMIC, CARBONIC ANHYDRASE INHIBITOR/SYMPATHOMIMETIC COMBINATIONS		

Drug Name	Drug Tier	Requirements/Limits
BRIMO/DORZO SOL 0.15-2%	NC	
SIMBRINZA SUS 1-0.2%	2	
OPHTHALMIC, CARBONIC ANHYDRASE INHIBITORS		
AZOPT SUS 1% OP	2	
<i>dorzolamide hcl ophth soln 2%</i>	1	
DORZOLAMIDE SOL 2%	NC	
TRUSOPT SOL 2% OP	3	
OPHTHALMIC, DIAGNOSTIC PRODUCTS		
<i>ak-fluor inj 10% op</i>	1	
AK-FLUOR INJ 25% OP	3	
<i>altafluor sol 0.25-0.4</i>	1	
<i>bio glo tes 1mg op</i>	1	
<i>flucaine sol 0.25-0.5</i>	1	
<i>fluor-i-stri tes 1mg op</i>	1	
<i>fluorescein w/ benoxinate ophth soln 0.25-0.4%</i>	1	
<i>fluorescein w/ proparacaine ophth soln 0.25-0.5%</i>	1	
FLUORESCITE INJ 10% OP	3	
FLURA-SAFE SOL	3	
FUL-GLO TES 0.6MG OP	3	
<i>ful-glo tes 1mg op</i>	1	
<i>green glo mis 1.5mg</i>	1	
<i>lissamine green strips 1.5 mg</i>	1	
PAREMYD SOL 1-0.25%	3	
ROSE GLO TES 1.5MG	3	
OPHTHALMIC, DRY EYE DISEASE		
RESTASIS EMU 0.05%	2	PA
RESTASIS MUL EMU 0.05%	2	PA
XIIDRA DRO 5%	2	
OPHTHALMIC, MISCELLANEOUS		
AKTEN GEL 3.5%	3	
<i>altacaine sol 0.5% op</i>	2	
<i>altafrin sol 2.5% op</i>	1	
<i>altafrin sol 10% op</i>	1	
AMVISC INJ 12MG/ML	3	
AMVISC PLUS INJ 16MG/ML	3	
<i>bal salt sol op</i>	1	
<i>balanced sal sol op</i>	1	
BEVACIZUMAB INJ 2.75MG	NC	
BEVACIZUMAB INJ 3.75MG	NC	
<i>bss sol op</i>	1	
CYSTARAN SOL 0.44%	6	PA, SP
EYLEA INJ 2/0.05ML	6	PA, SP
GELFILM MIS OP	3	
HEALON5 INJ 23MG/ML	3	

Drug Name	Drug Tier	Requirements/Limits
HEALON GV INJ 14MG/ML	3	
HEALON INJ 10MG/ML	3	
JETREA INJ 1.25/ML	6	PA, SP
LUCENTIS INJ 0.3MG	NC	
LUCENTIS INJ 0.5MG	NC	
LUCENTIS SOL 0.3MG	6	PA, SP
LUCENTIS SOL 0.5MG	6	PA, SP
MACUGEN INJ	6	SP
<i>phenylephrine hcl ophth soln 2.5%</i>	1	
<i>phenylephrine hcl ophth soln 10%</i>	1	
PHOTREXA VIS SOL 0.146-20	NC	
PHOTREXA/PHO SOL VISC KIT	NC	
<i>proparacaine hcl ophth soln 0.5%</i>	1	
PROVISC INJ 1%	3	
<i>tetacaine sol 0.5% op</i>	2	
<i>tetracaine hcl ophth soln 0.5%</i>	2	
<i>tetravisc sol 0.5% op</i>	2	
<i>tetravisc sol forte</i>	2	
VISUDYNE INJ 15MG	6	SP
OPHTHALMIC, MYDRIATICS		
ATROPINE SUL OIN 1% OP	3	
<i>atropine sulfate ophth soln 1%</i>	1	
CYCLOGYL SOL 0.5% OP	3	
CYCLOGYL SOL 1% OP	3	
CYCLOGYL SOL 2% OP	3	
CYCLOMYDRIL SOL OP	3	
<i>cyclopentolate hcl ophth soln 0.5%</i>	1	
<i>cyclopentolate hcl ophth soln 1%</i>	1	
<i>cyclopentolate hcl ophth soln 2%</i>	1	
<i>homatropaire sol 5% op</i>	1	
<i>homatropine hbr ophth soln 5%</i>	1	
MYDRIACYL SOL 1% OP	3	
<i>tropicamide ophth soln 0.5%</i>	1	
<i>tropicamide ophth soln 1%</i>	1	
OPHTHALMIC, PARASYMPATHOMIMETICS		
ISOPTO CARP SOL 1% OP	3	
ISOPTO CARP SOL 2% OP	3	
ISOPTO CARP SOL 4% OP	3	
MIOCHOL-E SOL 1:100	3	
MIOSTAT INJ 0.01% OP	3	
PHOSPHOLINE SOL 0.125%OP	3	
<i>pilocarpine hcl ophth soln 1%</i>	1	
<i>pilocarpine hcl ophth soln 2%</i>	1	
<i>pilocarpine hcl ophth soln 4%</i>	1	
RHOPRESSA SOL 0.02%	NC	
OPHTHALMIC, PROSTAGLANDINS		

Drug Name	Drug Tier	Requirements/Limits
<i>bimatoprost ophth soln 0.03%</i>	1	
<i>latanoprost ophth soln 0.005%</i>	1	
LUMIGAN SOL 0.01%	2	
TRAVATAN Z DRO 0.004%	2	
XALATAN SOL 0.005%	3	
ZIOPTAN DRO 0.0015%	3	
OPHTHALMIC, SYMPATHOMIMETIC/BETA-BLOCKER COMBINATIONS		
COMBIGAN SOL 0.2/0.5%	2	
OPHTHALMIC, SYMPATHOMIMETICS		
ALPHAGAN P SOL 0.1%	2	
ALPHAGAN P SOL 0.15%	2	
<i>apraclonidine hcl ophth soln 0.5% (base equivalent)</i>	1	
<i>brimonidine tartrate ophth soln 0.2%</i>	1	
<i>brimonidine tartrate ophth soln 0.15%</i>	2	
IOPIDINE SOL 0.5% OP	3	
IOPIDINE SOL 1% OP	3	
OTIC, ANTI-INFECTIVE/ANTI-INFLAMMATORY COMBINATIONS		
CIPRO HC SUS OTIC	3	
CIPRODEX SUS 0.3-0.1%	2	
COLY-MYCIN S SUS OTIC	3	
<i>hydrocortisone w/ acetic acid otic soln 1-2%</i>	1	
<i>neomycin-polymyxin-hc otic soln 1%</i>	1	
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	1	
OTOVEL DRO	NC	
OTIC, ANTI-INFECTIVES		
<i>acetic acid otic soln 2%</i>	1	
CETRAXAL SOL 0.2%	3	
<i>ciprofloxacin hcl otic soln 0.2% (base equivalent)</i>	2	
FLOXIN SOL 0.3%	NC	
<i>ofloxacin otic soln 0.3%</i>	1	
OTIPRIO SUS 60MG/ML	NC	
OTIC, MISCELLANEOUS		
DERMOTIC OIL 0.01%	3	
<i>fluocinolone acetonide (otic) oil 0.01%</i>	2	

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AFINITOR TAB 7.5MG.....	41		

<i>(base equiv)</i>	200	<i>allopurinol tab 100 mg</i>	1
<i>albuterol sulfate syrup 2 mg/5ml</i>	200	<i>allopurinol tab 300 mg</i>	1
<i>albuterol sulfate tab 2 mg</i>	201	ALLZITAL TAB 25-325MG	4
<i>albuterol sulfate tab 4 mg</i>	201	<i>almotriptan malate tab 12.5 mg</i>	105
<i>albuterol sulfate tab er 12hr 4 mg</i>	201	<i>almotriptan malate tab 6.25 mg</i>	105
<i>albuterol sulfate tab er 12hr 8 mg</i>	201	ALOCRIIL SOL 2%.....	223
<i>alclometasone dipropionate cream 0.05%</i>	213	<i>alogliptin-metformin hcl tab 12.5-1000</i> <i>mg</i>	116
<i>alclometasone dipropionate oint 0.05%</i>	213	<i>alogliptin-metformin hcl tab 12.5-500 mg</i>	116
ALCORTIN A GEL 1-2-1%.....	209	<i>alogliptin-pioglitazone tab 12.5-15 mg</i>	117
ALDACTAZIDE TAB 25/25	68	<i>alogliptin-pioglitazone tab 12.5-30 mg</i>	117
ALDACTAZIDE TAB 50/50	68	<i>alogliptin-pioglitazone tab 12.5-45 mg</i>	117
ALDACTONE TAB 100MG.....	51	<i>alogliptin-pioglitazone tab 25-15 mg</i> ..	117
ALDACTONE TAB 25MG	51	<i>alogliptin-pioglitazone tab 25-30 mg</i> ..	117
ALDACTONE TAB 50MG	51	<i>alogliptin-pioglitazone tab 25-45 mg</i> ..	117
ALDARA CRE 5%	217	<i>alogliptin benzoate tab 12.5 mg (base</i> <i>equiv)</i>	117
ALDURAZYME INJ 2.9MG/5M	149	<i>alogliptin benzoate tab 25 mg (base</i> <i>equiv)</i>	117
ALECENSA CAP 150MG	41	<i>alogliptin benzoate tab 6.25 mg (base</i> <i>equiv)</i>	117
<i>alendronate sodium oral soln 70</i> <i>mg/75ml</i>	135	ALOMIDE SOL 0.1% OP	223
<i>alendronate sodium tab 10 mg</i>	135	ALOPRIM INJ 500MG.....	1
<i>alendronate sodium tab 35 mg</i>	135	ALORA DIS 0.025MG	143
<i>alendronate sodium tab 40 mg</i>	135	ALORA DIS 0.05MG.....	143
<i>alendronate sodium tab 5 mg</i>	135	ALORA DIS 0.075MG	143
<i>alendronate sodium tab 70 mg</i>	135	ALORA DIS 0.1MG	143
ALEVICYN KIT PLUS	217	<i>alose tron hcl tab 0.5 mg (base equiv)</i> 161	
ALEVICYN SG GEL ANTIPRUR	217	<i>alose tron hcl tab 1 mg (base equiv)</i> ..	161
<i>alevicyn sol dermal</i>	220	ALOXI INJ 0.25MG/5	156
<i>alfentanil hcl iv soln 1000 mcg/2ml (500</i> <i>mcg/ml) (base eq)</i>	7	ALPHAGAN P SOL 0.1%	227
<i>alfentanil hcl iv soln 2500 mcg/5ml (500</i> <i>mcg/ml) (base eq)</i>	7	ALPHAGAN P SOL 0.15%	227
ALFENTANIL INJ 1000/2ML	7	ALPHANATE INJ VWF/HUM	172
ALFENTANIL INJ 2500/5ML	7	ALPHANINE SD INJ 1000UNIT.....	172
ALFERON N INJ 5MU/ML	181	ALPHANINE SD INJ 1500UNIT.....	172
<i>alfuzosin hcl tab er 24hr 10 mg</i>	165	ALPHANINE SD INJ 500UNIT	172
ALIMTA INJ 100MG	38	ALPRAZOLAM CON 1 MG/ML.....	75
ALIMTA INJ 500MG	38	<i>alprazolam orally disintegrating tab 0.25</i> <i>mg</i>	75
ALINIA SUS 100/5ML	33	<i>alprazolam orally disintegrating tab 0.5</i> <i>mg</i>	75
ALINIA TAB 500MG	33	<i>alprazolam orally disintegrating tab 1 mg</i>	75
ALIQOPA INJ 60MG	41	<i>alprazolam orally disintegrating tab 2 mg</i>	75
ALKERAN INJ 50MG	36		
ALKERAN TAB 2MG	36		
<i>allergy chld liq 12.5/5ml</i>	198		
<i>allergy liq 12.5/5ml</i>	198		
<i>allergy relf liq 12.5/5ml</i>	198		
<i>allopurinol sodium for inj 500 mg</i>	1		

.....	75	AMBIEN CR TAB 6.25MG	104
<i>alprazolam tab 0.25 mg</i>	75	AMBIEN TAB 10MG.....	104
<i>alprazolam tab 0.5 mg</i>	75	AMBIEN TAB 5MG	104
<i>alprazolam tab 0.5mg xr</i>	75	AMBISOME INJ 50MG	25
<i>alprazolam tab 1 mg</i>	75	<i>amcinonide cream 0.1%</i>	213
<i>alprazolam tab 1mg xr</i>	75	<i>amcinonide lotion 0.1%</i>	213
<i>alprazolam tab 2 mg</i>	75	AMCINONIDE OIN 0.1%.....	213
<i>alprazolam tab 2mg xr</i>	75	AMELUZ GEL 10%.....	208
<i>alprazolam tab 3mg xr</i>	75	AMERGE TAB 1MG.....	105
<i>alprazolam tab er 24hr 0.5 mg</i>	75	AMERGE TAB 2.5MG	105
<i>alprazolam tab er 24hr 1 mg</i>	75	<i>amethia lo tab</i>	136
<i>alprazolam tab er 24hr 2 mg</i>	75	<i>amethia tab</i>	136
<i>alprazolam tab er 24hr 3 mg</i>	75	AMICAR SOL 0.25/ML.....	175
ALPROLIX INJ 1000UNIT	172	AMICAR TAB 1000MG	175
ALPROLIX INJ 2000UNIT	172	AMICAR TAB 500MG.....	175
ALPROLIX INJ 250UNIT.....	172	AMIDATE INJ 2MG/ML	74
ALPROLIX INJ 3000UNIT	172	<i>amikacin sulfate inj 1 gm/4ml (250</i>	
ALPROLIX INJ 4000UNIT	172	<i>mg/ml)</i>	16
ALPROLIX INJ 500UNIT.....	172	<i>amikacin sulfate inj 500 mg/2ml (250</i>	
<i>alprostadil inj 500 mcg/ml</i>	70	<i>mg/ml)</i>	16
ALREX SUS 0.2%	223	<i>amiloride & hydrochlorothiazide tab 5-50</i>	
ALTABAX OIN 1%	209	<i>mg</i>	68
<i>altacaine sol 0.5% op</i>	225	<i>amiloride hcl tab 5 mg</i>	69
ALTACE CAP 1.25MG.....	49	<i>aminoam cap rms</i>	185
ALTACE CAP 10MG.....	49	<i>aminocaproic acid inj 250 mg/ml</i>	175
ALTACE CAP 2.5MG.....	49	<i>aminophylline inj 25 mg/ml</i>	204
ALTACE CAP 5MG	49	<i>aminorelief cap rms</i>	185
<i>altafluor sol 0.25-0.4</i>	225	AMINOSYN-HBC INJ 7%	188
<i>altafrin sol 10% op</i>	225	AMINOSYN-PF INJ 10%	188
<i>altafrin sol 2.5% op</i>	225	AMINOSYN-PF INJ 7%	188
<i>altavera tab</i>	138	AMINOSYN-RF INJ 5.2%	188
ALTOPREV TAB 20MG ER	58	AMINOSYN 7% INJ /LYTES.....	188
ALTOPREV TAB 40MG ER	58	AMINOSYN II INJ 10%.....	188
ALTOPREV TAB 60MG ER	59	AMINOSYN II INJ 15%.....	188
ALUNBRIG TAB 30MG.....	41	<i>aminosyn ii inj 8.5/lyte</i>	188
ALVESCO AER 160MCG.....	203	AMINOSYN II INJ 8.5%.....	188
ALVESCO AER 80MCG.....	203	AMINOSYN INJ 10%	188
<i>alyacen tab 1/35</i>	139	<i>aminosyn inj 8.5/lyte</i>	188
<i>alyacen tab 7/7/7</i>	140	AMINOSYN INJ 8.5%.....	188
<i>amabelz tab 0.5-0.1</i>	141	AMINOSYN M INJ 3.5%.....	188
<i>amabelz tab 1-0.5mg</i>	141	AMIODARRO/D5W SOL 150/100	55
<i>amantadine hcl cap 100 mg</i>	89	AMIODARRO/D5W SOL 900/500	56
<i>amantadine hcl syrup 50 mg/5ml</i>	89	<i>amiodarone hcl inj 150 mg/3ml (50</i>	
<i>amantadine hcl tab 100 mg</i>	89	<i>mg/ml)</i>	56
AMARYL TAB 1MG	120	<i>amiodarone hcl inj 450 mg/9ml (50</i>	
AMARYL TAB 2MG	120	<i>mg/ml)</i>	56
AMARYL TAB 4MG	120	<i>amiodarone hcl inj 900 mg/18ml (50</i>	
AMBIEN CR TAB 12.5MG	104	<i>mg/ml)</i>	56

<i>amiodarone hcl tab 100 mg</i>	56	<i>2.5-10 mg</i>	48
<i>amiodarone hcl tab 200 mg</i>	56	<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	48
<i>amiodarone hcl tab 400 mg</i>	56	<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	48
<i>AMITIZA CAP 24MCG</i>	161	<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	48
<i>AMITIZA CAP 8MCG</i>	161	<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	52
<i>amitriptyline hcl tab 100 mg</i>	88	<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	52
<i>amitriptyline hcl tab 10 mg</i>	88	<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	52
<i>amitriptyline hcl tab 150 mg</i>	88	<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	52
<i>amitriptyline hcl tab 25 mg</i>	88	<i>amlodipine besylate-valsartan tab 10-160 mg</i>	52
<i>amitriptyline hcl tab 50 mg</i>	88	<i>amlodipine besylate-valsartan tab 10-320 mg</i>	52
<i>amitriptyline hcl tab 75 mg</i>	88	<i>amlodipine besylate-valsartan tab 5-160 mg</i>	52
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg</i>	53	<i>amlodipine besylate-valsartan tab 5-320 mg</i>	52
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg</i>	53	<i>amlodipine besylate tab 10 mg (base equivalent)</i>	64
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg</i>	53	<i>amlodipine besylate tab 2.5 mg (base equivalent)</i>	64
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg</i>	53	<i>amlodipine besylate tab 5 mg (base equivalent)</i>	64
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg</i>	53	<i>AMMONUL INJ 10%</i>	149
<i>amlodipine besylate-atorvastatin calcium tab 10-10 mg</i>	64	<i>amnestem cap 10mg</i>	205
<i>amlodipine besylate-atorvastatin calcium tab 10-20 mg</i>	64	<i>amnestem cap 20mg</i>	205
<i>amlodipine besylate-atorvastatin calcium tab 10-40 mg</i>	64	<i>amoxapine tab 100 mg</i>	88
<i>amlodipine besylate-atorvastatin calcium tab 10-80 mg</i>	64	<i>amoxapine tab 150 mg</i>	88
<i>amlodipine besylate-atorvastatin calcium tab 2.5-10 mg</i>	63	<i>amoxapine tab 25 mg</i>	88
<i>amlodipine besylate-atorvastatin calcium tab 2.5-20 mg</i>	64	<i>amoxapine tab 50 mg</i>	88
<i>amlodipine besylate-atorvastatin calcium tab 2.5-40 mg</i>	64	<i>amoxicillin (trihydrate) cap 250 mg</i>	22
<i>amlodipine besylate-atorvastatin calcium tab 5-10 mg</i>	64	<i>amoxicillin (trihydrate) cap 500 mg</i>	22
<i>amlodipine besylate-atorvastatin calcium tab 5-20 mg</i>	64	<i>amoxicillin (trihydrate) chew tab 125 mg</i>	22
<i>amlodipine besylate-atorvastatin calcium tab 5-40 mg</i>	64	<i>amoxicillin (trihydrate) chew tab 250 mg</i>	22
<i>amlodipine besylate-atorvastatin calcium tab 5-80 mg</i>	64	<i>amoxicillin (trihydrate) for susp 125 mg/5ml</i>	22
<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>	48	<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i>	22
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	48	<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i>	22
<i>amlodipine besylate-benazepril hcl cap</i>			

<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i>	22	<i>30 mg</i>	98
<i>amoxicillin (trihydrate) tab 500 mg</i>	22	<i>amphetamine-dextroamphetamine tab 5 mg</i>	98
<i>amoxicillin (trihydrate) tab 875 mg</i>	22	<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	98
<i>amoxicillin & k clavulanate chew tab 200-28.5 mg</i>	21	<i>amphotericin b for inj 50 mg</i>	25
<i>amoxicillin & k clavulanate chew tab 400-57 mg</i>	21	<i>ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm</i>	22
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	21	<i>ampicillin & sulbactam sodium for inj 15 (10-5) gm</i>	22
<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	22	<i>ampicillin & sulbactam sodium for inj 3 (2-1) gm</i>	22
<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	22	<i>ampicillin & sulbactam sodium for iv soln 15 (10-5) gm</i>	22
<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	22	<i>ampicillin cap 500 mg</i>	22
<i>amoxicillin & k clavulanate tab 250-125 mg</i>	22	<i>ampicillin sodium for inj 10 gm</i>	22
<i>amoxicillin & k clavulanate tab 500-125 mg</i>	22	<i>ampicillin sodium for inj 125 mg</i>	22
<i>amoxicillin & k clavulanate tab 875-125 mg</i>	22	<i>ampicillin sodium for inj 1 gm</i>	22
<i>amoxicillin & k clavulanate tab 500-125 mg</i>	22	<i>ampicillin sodium for inj 250 mg</i>	22
<i>amoxicillin & k clavulanate tab 875-125 mg</i>	22	<i>ampicillin sodium for inj 2 gm</i>	22
<i>amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg</i>	22	<i>ampicillin sodium for inj 500 mg</i>	22
<i>amoxicillin cap-clarithro tab-lansopraz cap dr therapy pack</i>	165	<i>ampicillin sodium for iv soln 10 gm</i>	22
<i>AMPHADASE INJ 150/ML</i>	106	<i>ampicillin sodium for iv soln 1 gm</i>	22
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	98	<i>ampicillin sodium for iv soln 2 gm</i>	22
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	98	<i>AMPYRA TAB 10MG</i>	107
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	98	<i>AMRIX CAP 15MG</i>	108
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	98	<i>AMRIX CAP 30MG</i>	108
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	98	<i>AMVISC INJ 12MG/ML</i>	225
<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	98	<i>AMVISC PLUS INJ 16MG/ML</i>	225
<i>amphetamine-dextroamphetamine tab 10 mg</i>	98	<i>AMYTAL SOD INJ 500MG</i>	104
<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	98	<i>ANACAINE OIN</i>	217
<i>amphetamine-dextroamphetamine tab 15 mg</i>	98	<i>ANADROL-50 TAB 50MG</i>	115
<i>amphetamine-dextroamphetamine tab 20 mg</i>	98	<i>ANAFRANIL CAP 25MG</i>	76
		<i>ANAFRANIL CAP 50MG</i>	76
		<i>ANAFRANIL CAP 75MG</i>	76
		<i>anagrelide hcl cap 0.5 mg</i>	177
		<i>anagrelide hcl cap 1 mg</i>	177
		<i>ANALPRAM-HC CRE 1-1%</i>	164
		<i>ANALPRAM-HC LOT 2.5%</i>	164
		<i>ANALPRAM HC CRE 2.5-1%</i>	164
		<i>ANALPRM SNGL CRE HC 2.5-1</i>	165
		<i>ANASEPT SPR</i>	212
		<i>ANASPAZ TAB 0.125MG</i>	158
		<i>anastrozole tab 1 mg</i>	40
		<i>ANCOBON CAP 250MG</i>	25
		<i>ANCOBON CAP 500MG</i>	25
		<i>ANDEXXA SOL 100MG</i>	133
		<i>ANDRODERM DIS 2MG/24HR</i>	115

ANDRODERM DIS 4MG/24HR.....	115	APTIVUS CAP 250MG	29
ANDROGEL GEL 1.62%.....	115	APTIVUS SOL.....	29
ANDROGEL GEL 1%(25MG).....	115	AQUALANCE MIS 30G.....	122
ANDROGEL GEL 1%(50MG).....	115	AQUASOL A INJ 50000/ML	190
ANECTINE INJ 20MG/ML	110	AQUORAL SPR	220
ANGELIQ TAB 0.25-0.5.....	142	ARALAST NP INJ 1000MG.....	197
ANGELIQ TAB 0.5-1MG	141	ARALAST NP INJ 500MG	197
ANGIOMAX INJ 250MG	168	<i>aranelle tab</i>	140
ANORO ELLIPT AER 62.5-25	197	ARANESP INJ 100MCG	171
ANTABUSE TAB 250MG.....	110	ARANESP INJ 10MCG.....	171
ANTABUSE TAB 500MG.....	110	ARANESP INJ 150MCG	171
ANTARA CAP 30MG	58	ARANESP INJ 200MCG	171
ANTARA CAP 90MG	58	ARANESP INJ 25MCG.....	171
ANTICOAG CIT SOL DEX SOL	170	ARANESP INJ 300MCG	171
ANTICOAG CPD SOL.....	170	ARANESP INJ 40MCG.....	171
ANTICOAGULNT SOL SOD CITR	170	ARANESP INJ 500MCG	171
ANTIZOL INJ 1GM/ML.....	133	ARANESP INJ 60MCG.....	171
ANUSOL-HC CRE 2.5%	165	ARAVA TAB 10MG	179
<i>anusol-hc sup 25mg</i>	165	ARAVA TAB 20MG	179
ANZEMET TAB 100MG	156	ARCALYST INJ 220MG	181
ANZEMET TAB 50MG	156	ARCAPTA CAP 75MCG.....	200
APEXICON E CRE 0.05%	213	ARESTIN MIS 1MG	220
APIDRA INJ SOLOSTAR.....	118	<i>argatroban inj 100mg/ml</i>	168
APIDRA INJ U-100	118	ARGATROBAN INJ 125/125	168
ALENZIN TAB 174MG.....	84	ARGATROBAN INJ 250/250	168
ALENZIN TAB 348MG.....	84	<i>argatroban inj 250 mg/2.5ml</i> <i>(concentrate for iv infusion)</i>	168
ALENZIN TAB 522MG.....	84	ARGATROBAN INJ 50MG/50M	168
APOKYN INJ 10MG/ML.....	89	<i>argyl saline sol 0.9%</i>	166
<i>apraclonidine hcl ophth soln 0.5% (base</i> <i>equivalent)</i>	227	<i>argyl saline sol 100ml</i>	220
<i>aprepitant capsule 125 mg</i>	156	ARICEPT TAB 10MG	82
<i>aprepitant capsule 40 mg</i>	156	ARICEPT TAB 23MG	83
<i>aprepitant capsule 80 mg</i>	156	ARICEPT TAB 5MG	82
<i>aprepitant capsule therapy pack 80 &</i> <i>125 mg</i>	156	ARIMIDEX TAB 1MG.....	40
APRISO CAP 0.375GM	160	<i>aripiprazole orally disintegrating tab 10</i> <i>mg</i>	92
<i>apri tab</i>	139	<i>aripiprazole orally disintegrating tab 15</i> <i>mg</i>	92
APTENSIO XR CAP 10MG	98	<i>aripiprazole oral solution 1 mg/ml</i>	92
APTENSIO XR CAP 15MG	98	<i>aripiprazole tab 10 mg</i>	92
APTENSIO XR CAP 20MG	98	<i>aripiprazole tab 15 mg</i>	92
APTENSIO XR CAP 30MG	98	<i>aripiprazole tab 20 mg</i>	92
APTENSIO XR CAP 40MG	98	<i>aripiprazole tab 2 mg</i>	92
APTENSIO XR CAP 50MG	98	<i>aripiprazole tab 30 mg</i>	92
APTENSIO XR CAP 60MG	98	<i>aripiprazole tab 5 mg</i>	92
APTIOM TAB 200MG.....	77	ARISTADA INJ 441MG/1.	92
APTIOM TAB 400MG.....	77	ARISTADA INJ 662MG/2	92
APTIOM TAB 600MG.....	77	ARISTADA INJ 882MG/3	92
APTIOM TAB 800MG.....	77		

ARISTADA INJ INITIO	92	ASMANEX 7 AER 110MCG	203
ARIXTRA INJ 10/0.8ML	168	ASMANEX HFA AER 100 MCG.....	204
ARIXTRA INJ 2.5/0.5	168	ASMANEX HFA AER 200 MCG.....	204
ARIXTRA INJ 5/0.4ML.....	168	<i>aspirin-dipyridamole cap er 12hr 25-200</i>	
ARIXTRA INJ 7.5/0.6	168	<i>mg.....</i>	177
<i>armodafinil tab 150 mg</i>	109	ASSURE 3 TES.....	122
<i>armodafinil tab 200 mg</i>	109	ASSURE 4 TES.....	122
<i>armodafinil tab 250 mg</i>	109	ASSURE CMFRT MIS 28G	122
<i>armodafinil tab 50 mg</i>	109	ASSURE II TES	122
ARMONAIR AER 113/ACT	203	ASSURE II TES CHECK.....	122
ARMONAIR AER 232/ACT	203	ASSURE LANCE MIS 21G.....	122
ARMONAIR AER 55/ACT	203	ASSURE LANCE MIS LOW FLOW	122
ARMOUR THYRO TAB 120MG	152	ASSURE LANCE MIS MICRO.....	122
ARMOUR THYRO TAB 15MG	152	ASSURE LANCE MIS SAFE 25G.....	122
ARMOUR THYRO TAB 180MG	152	ASSURE LANCE MIS SAFE 30G.....	122
ARMOUR THYRO TAB 240MG	152	ASSURE MIS LANCETS.....	122
ARMOUR THYRO TAB 300MG	152	ASSURE PLUS MIS HIGH 18G	122
ARMOUR THYRO TAB 30MG.....	152	ASSURE PLUS MIS LOW 25G	122
ARMOUR THYRO TAB 60MG.....	152	ASSURE PLUS MIS MCRO 28G	122
ARMOUR THYRO TAB 90MG.....	152	ASSURE PLUS MIS NORM 21G	122
ARNICA TIN FLOWER.....	217	ASSURE PLUS MIS PEDIATRI	122
ARNUITY ELPT INH 100MCG	203	ASSURE PRISM TES MULTI.....	122
ARNUITY ELPT INH 200MCG	203	ASSURE PRO TES.....	122
ARNUITY ELPT INH 50MCG.....	203	ASSURE TES PLATINUM	122
AROMASIN TAB 25MG	40	ASTAGRAF XL CAP 0.5MG	181
ARRANON INJ 5MG/ML	38	ASTAGRAF XL CAP 1MG	181
ARTHROTEC 50 TAB.....	6	ASTAGRAF XL CAP 5MG	181
ARTHROTEC 75 TAB.....	6	ASTEPRO SPR 0.15%	202
ARTICADENT INJ DENTAL.....	1	ATABEX EC TAB	193
ARTISS SOL 10ML.....	175	ATACAND HCT TAB 16-12.5	53
ARTISS SOL 2ML	175	ATACAND HCT TAB 32-12.5	53
ARTISS SOL 4ML	175	ATACAND HCT TAB 32-25MG	53
ARYMO ER TAB 15MG	7	ATACAND TAB 16MG.....	54
ARYMO ER TAB 30MG	7	ATACAND TAB 32MG.....	54
ARYMO ER TAB 60MG	7	ATACAND TAB 4MG.....	54
ARZERRA CON 100/5ML	43	ATACAND TAB 8MG.....	54
<i>arzol silver mis nitr app</i>	217	<i>atazanavir sulfate cap 150 mg (base</i>	
ASACOL HD TAB 800MG	160	<i>equiv)</i>	29
ASCLERA INJ 0.5%	70	<i>atazanavir sulfate cap 200 mg (base</i>	
ASCLERA INJ 1%.....	70	<i>equiv)</i>	29
<i>ascomp/cod cap 30mg</i>	7	<i>atazanavir sulfate cap 300 mg (base</i>	
<i>ascorbic acid inj 500 mg/ml</i>	190	<i>equiv)</i>	29
<i>ashlyna tab</i>	136	AELVIA TAB.....	135
ASMANEX 120 AER 220MCG	204	<i>atenolol & chlorthalidone tab 100-25 mg</i>	
ASMANEX 14 AER 220MCG.....	203	.....	61
ASMANEX 30 AER 110MCG.....	204	<i>atenolol & chlorthalidone tab 50-25 mg</i>	
ASMANEX 30 AER 220MCG.....	204	.....	61
ASMANEX 60 AER 220MCG.....	204	<i>atenolol tab 100 mg.....</i>	61

<i>atenolol tab 25 mg</i>	61	<i>atropine sulfate inj 0.4 mg/ml</i>	70
<i>atenolol tab 50 mg</i>	61	<i>atropine sulfate inj 1 mg/ml</i>	70
ATGAM INJ 250MG.....	179	<i>atropine sulfate inj 8 mg/20ml (0.4 mg/ml)</i>	70
ATIVAN INJ 2MG/ML	75	<i>atropine sulfate ophth soln 1%</i>	226
ATIVAN INJ 4MG/ML	75	<i>atropine sulfate soln prefill syr 0.25 mg/5ml (0.05 mg/ml)</i>	133
ATIVAN TAB 0.5MG.....	75	<i>atropine sulfate soln prefill syr 0.5 mg/5ml (0.1 mg/ml)</i>	133
ATIVAN TAB 1MG.....	75	<i>atropine sulfate soln prefill syr 1 mg/10ml (0.1 mg/ml)</i>	133
ATIVAN TAB 2MG.....	75	ATROPINE SUL INJ 1/2.5ML.....	133
AT LAST MIS LANCETS	122	ATROPINE SUL OIN 1% OP	226
AT LAST TES	122	ATROPINE SUL SOL 0.8/2ML	133
<i>atomoxetine hcl cap 100 mg (base equiv)</i>	98	ATROVENT HFA AER 17MCG	197
<i>atomoxetine hcl cap 10 mg (base equiv)</i>	98	AUBAGIO TAB 14MG	107
<i>atomoxetine hcl cap 18 mg (base equiv)</i>	98	AUBAGIO TAB 7MG	107
<i>atomoxetine hcl cap 25 mg (base equiv)</i>	98	<i>aubra tab 0.1-0.02</i>	137
<i>atomoxetine hcl cap 40 mg (base equiv)</i>	98	AUGMENTIN SUS 125/5ML.....	22
<i>atomoxetine hcl cap 60 mg (base equiv)</i>	98	AUGMENTIN SUS 250/5ML.....	22
<i>atomoxetine hcl cap 80 mg (base equiv)</i>	98	AUGMENTIN SUS ES-600.....	22
ATOPICLAIR CRE	217	AUGMENTIN TAB 500MG.....	22
<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	59	AUGMENTIN TAB 875MG.....	22
<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	59	AUGMENTIN XR TAB 12HR.....	23
<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	59	AURORA LANCE MIS 30G	122
<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	59	AURORA LANCE MIS THIN 23G	122
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	27	AURYXIA TAB 210MG	151
<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	27	AUSTEDO TAB 12MG	103
<i>atovaquone susp 750 mg/5ml</i>	33	AUSTEDO TAB 6MG.....	103
<i>atracurium besylate iv soln 100 mg/10ml</i>	110	AUSTEDO TAB 9MG.....	103
<i>atracurium besylate preservative free (pf) iv soln 50 mg/5ml</i>	110	AUTOCODE TES BLD GLUC.....	122
ATRALIN GEL 0.05%	205	AUTO LANCET MIS	122
ATRIPLA TAB	27	AUTOLET PLAT MIS 1.8MM	122
ATROPEN INJ 0.25MG.....	133	AUTOLET PLAT MIS 2.4MM	122
ATROPEN INJ 0.5MG	133	AUTOLET PLAT MIS 3.0MM	122
ATROPEN INJ 1MG	133	AUVI-Q INJ 0.15MG	197
ATROPEN INJ 2MG	133	AUVI-Q INJ 0.3MG	197
		<i>av-phos 250 tab neutral</i>	166
		AVALIDE TAB 150-12.5	53
		AVALIDE TAB 300-12.5	53
		AVANDIA TAB 2MG	118
		AVANDIA TAB 4MG	118
		AVAPRO TAB 150MG	55
		AVAPRO TAB 300MG	55
		AVAPRO TAB 75MG	55
		<i>avar-e emoll cre 10-5%</i>	206
		<i>avar-e green cre 10-5%</i>	206
		AVAR-E LS CRE 10-2%	206

AVAR AER 9.5-5%	205	<i>azithromycin tab 250 mg</i>	20
<i>avar cleanse emu 10-5%</i>	206	<i>azithromycin tab 500 mg</i>	20
AVAR LS AER 10-2%	206	<i>azithromycin tab 600 mg</i>	20
AVAR LS LIQ 10-2%	206	AZOPT SUS 1% OP	225
AVAR LS PAD 10-2%	206	AZOR TAB 10-20MG	52
AVAR PAD 9.5-5%	206	AZOR TAB 10-40MG	52
AVASTIN INJ	44	AZOR TAB 5-20MG	52
AVASTIN INJ 400/16ML	44	AZOR TAB 5-40MG	52
AVC CRE 15%	168	<i>aztreonam for inj 1 gm</i>	33
AVEED INJ 750/3ML	115	<i>aztreonam for inj 2 gm</i>	33
AVELOX INJ	21	AZULFIDINE TAB 500MG	160
AVELOX TAB 400MG	21	AZULFIDINE TAB 500MG EN	160
AVENOVA SOL 0.01%	217	<i>azurette tab 28 day</i>	136
AVENOVA SOL NEUTROX	217	B	
<i>aviane tab</i>	137	<i>bacitracin-polymyxin-neomycin-hc ophth</i>	
<i>avidoxy tab 100mg</i>	24	<i>oint 1%</i>	221
<i>avita cre 0.025%</i>	206	<i>bacitracin-polymyxin b ophth oint</i>	221
<i>avita gel 0.025%</i>	206	<i>bacitracin ophth oint 500 unit/gm</i>	221
AVODART CAP 0.5MG	165	<i>baclofen tab 10 mg</i>	108
AVONEX INJ 30MCG	107	<i>baclofen tab 20 mg</i>	108
AVONEX KIT 30MCG	107	BACTER WATER INJ PARABENS	184
AVONEX PEN KIT 30MCG	107	BACTOCILL INJ DEX 1GM	23
AVONEX PREFL KIT 30MCG	107	BACTOCILL INJ DEX 2GM	23
AVYCAZ INJ 2-0.5GM	17	BACTRIM DS TAB 800-160	33
AXERT TAB 12.5MG	105	BACTRIM TAB 400-80MG	33
AYGESTIN TAB 5MG	151	BACTROBAN CRE 2%	209
<i>azacitidine for inj 100 mg</i>	38	BACTROBAN OIN NASAL 2%	209
AZACTAM/DEX INJ 1GM	33	BAL-CARE MIS DHA	193
AZACTAM/DEX INJ 2GM	33	<i>balanced sal sol op</i>	225
AZACTAM INJ 1GM	33	BAL IN OIL INJ 100MG/ML	133
AZACTAM INJ 2GM	33	<i>balsalazide disodium cap 750 mg</i>	160
AZASAN TAB 100MG	181	<i>bal salt sol op</i>	225
AZASAN TAB 75 MG	181	<i>balziva tab</i>	139
AZASITE SOL 1%	221	BANZEL SUS 40MG/ML	77
AZATHIOPRINE INJ 100MG	181	BANZEL TAB 200MG	77
<i>azathioprine tab 50 mg</i>	181	BANZEL TAB 400MG	77
<i>azelastine hcl nasal spray 0.1% (137</i>		BARACLUDGE SOL .05MG/ML	31
<i>mcg/spray)</i>	202	BARACLUDGE TAB 0.5MG	31
<i>azelastine hcl nasal spray 0.15% (205.5</i>		BARACLUDGE TAB 1MG	31
<i>mcg/spray)</i>	202	BASAGLAR INJ 100UNIT	118
<i>azelastine hcl ophth soln 0.05%</i>	223	BAVENCIO INJ 20MG/ML	44
AZELEX CRE 20%	206	BAXDELA INJ 300MG	21
AZILECT TAB 0.5MG	89	BAXDELA TAB 450MG	21
AZILECT TAB 1MG	89	BAYER BREEZE MIS 2 TEST	122
<i>azithromycin for susp 100 mg/5ml</i>	20	BAYER MICRLT MIS LANCETS	122
<i>azithromycin for susp 200 mg/5ml</i>	20	BD LANCET UF MIS 30G	122
<i>azithromycin iv for soln 500 mg</i>	20	BD LANCET UF MIS 33G	122
<i>azithromycin powd pack for susp 1 gm 20</i>		BD MICROTAIN MIS LANCETS	122

BD PEN NEEDL MIS 29GX1/2.....	122	BENSAL HP OIN.....	218
<i>bd posiflush inj 0.9%</i>	184	BENTYL CAP 10MG.....	158
BEAU RX GEL	217	BENTYL INJ 10MG/ML.....	158
BEBULIN INJ 200-1200.....	172	BENZAC AC LIQ 5% WASH.....	206
BECONASE AQ SUS 0.042%	203	BENZAACLIN GEL 1-5%.....	206
<i>bekyree tab</i>	136	BENZAACLIN GEL 1-5%PUMP	206
BELBUCA MIS 150MCG.....	7	BENZALKONIUM SOL 50%	212
BELBUCA MIS 300MCG.....	7	BENZALKONIUM SOL NF	212
BELBUCA MIS 450MCG.....	7	BENZAMYCIN GEL 5-3%	206
BELBUCA MIS 600MCG.....	7	<i>benzepero aer 5.3%</i>	206
BELBUCA MIS 750MCG.....	7	<i>benzepero liq creamy</i>	206
BELBUCA MIS 75MCG	7	<i>benzepero mis 6%</i>	206
BELBUCA MIS 900MCG.....	8	BENZIQL GEL 5.25%	206
BELEODAQ INJ 500MG	44	BENZIQL LS GEL 2.75%	206
BELLA/OPIUM SUP 16.2-30	158	<i>benziql wash liq 5.25%</i>	206
BELLA/OPIUM SUP 16.2-60	158	BENZNIDAZOLE TAB 100MG	33
BELSOMRA TAB 10MG	104	BENZNIDAZOLE TAB 12.5MG	33
BELSOMRA TAB 15MG	104	BENZOIN TIN NF	218
BELSOMRA TAB 20MG	104	<i>benzonatate cap 100 mg</i>	200
BELSOMRA TAB 5MG	104	<i>benzonatate cap 150 mg</i>	200
BELVIQ TAB 10MG	134	<i>benzonatate cap 200 mg</i>	200
BELVIQ XR TAB 20MG	134	<i>benzoyl peroxide-erythromycin gel 5-3%</i>	206
<i>benazepril & hydrochlorothiazide tab 10- 12.5 mg</i>	48	<i>benzoyl peroxide foam 5.3%</i>	206
<i>benazepril & hydrochlorothiazide tab 20- 12.5 mg</i>	48	<i>benzoyl peroxide foam 9.8%</i>	206
<i>benazepril & hydrochlorothiazide tab 20- 25 mg</i>	48	<i>benzphetamine hcl tab 25 mg</i>	134
<i>benazepril & hydrochlorothiazide tab 5- 6.25 mg</i>	48	<i>benzphetamine hcl tab 50 mg</i>	134
<i>benazepril hcl tab 10 mg</i>	49	<i>benztropine mesylate inj 1 mg/ml</i>	89
<i>benazepril hcl tab 20 mg</i>	49	<i>benztropine mesylate tab 0.5 mg</i>	89
<i>benazepril hcl tab 40 mg</i>	49	<i>benztropine mesylate tab 1 mg</i>	89
<i>benazepril hcl tab 5 mg</i>	49	<i>benztropine mesylate tab 2 mg</i>	89
BENDEKA INJ 100/4ML.....	36	BEPREVE DRO 1.5%.....	223
BENEFIX INJ 1000UNIT.....	172	BERINERT INJ 500UNIT	175
BENEFIX INJ 2000UNIT.....	172	BESIVANCE SUS 0.6%.....	222
BENEFIX INJ 250UNIT	172	BESPONSA INJ 0.9MG	44
BENEFIX INJ 3000UNIT.....	172	BETADINE SOL 5% OP.....	222
BENEFIX INJ 500UNIT	172	BETAGAN SOL 0.5% OP	224
BENICAR HCT TAB 20-12.5	53	<i>betamethasone dipropionate augmented cream 0.05%</i>	213
BENICAR HCT TAB 40-12.5	53	<i>betamethasone dipropionate augmented gel 0.05%</i>	215
BENICAR HCT TAB 40-25MG	53	<i>betamethasone dipropionate augmented lotion 0.05%</i>	213
BENICAR TAB 20MG.....	55	<i>betamethasone dipropionate augmented oint 0.05%</i>	215
BENICAR TAB 40MG.....	55	<i>betamethasone dipropionate cream 0.05%</i>	213
BENICAR TAB 5MG	55	<i>betamethasone dipropionate lotion</i>	
BENLYSTA INJ 120MG	182		
BENLYSTA INJ 400MG	182		

0.05%.....	213	BICNU INJ 100MG.....	36
<i>betamethasone dipropionate oint 0.05%</i>		BIDIL TAB	70
.....	213	BIKTARVY TAB	27
<i>betamethasone sod phosphate & acetate</i>		BILTRICIDE TAB 600MG	33
<i>inj susp 6 (3-3) mg/ml</i>	145	<i>bimatoprost ophth soln 0.03%</i>	227
<i>betamethasone valerate aerosol foam</i>		BINOSTO TAB 70MG.....	135
<i>0.12%</i>	214	BIO-STATIN CAP 1000000	25
<i>betamethasone valerate cream 0.1%</i>		BIO-STATIN CAP 500000	25
<i>(base equivalent)</i>	214	<i>bio-statin pow</i>	25
<i>betamethasone valerate lotion 0.1%</i>		<i>bio glo tes 1mg op</i>	225
<i>(base equivalent)</i>	214	BIOSCANNER TES GLUCOSE.....	122
<i>betamethasone valerate oint 0.1% (base</i>		<i>biotuss liq</i>	199
<i>equivalent)</i>	214	<i>biotuss liq pediaterc</i>	199
BETAMETH SOD INJ 12MG/2ML.....	145	<i>bisoprolol & hydrochlorothiazide tab 10-</i>	
BETAMETH SOD INJ 6MG/ML	145	<i>6.25 mg</i>	61
BETAPACE AF TAB 120MG.....	56	<i>bisoprolol & hydrochlorothiazide tab 2.5-</i>	
BETAPACE AF TAB 160MG.....	56	<i>6.25 mg</i>	61
BETAPACE AF TAB 80MG	56	<i>bisoprolol & hydrochlorothiazide tab 5-</i>	
BETAPACE TAB 120MG	56	<i>6.25 mg</i>	61
BETAPACE TAB 160MG	56	<i>bisoprolol fumarate tab 10 mg</i>	61
BETAPACE TAB 80MG.....	56	<i>bisoprolol fumarate tab 5 mg</i>	61
BETASERON INJ 0.3MG.....	107	BIVALIRUDIN INJ 250/50.....	168
<i>betaxolol hcl ophth soln 0.5%</i>	224	BIVALIRUDIN INJ 500/100	168
<i>betaxolol hcl tab 10 mg</i>	61	<i>bivalirudin trifluoroacetate for iv soln 250</i>	
<i>betaxolol hcl tab 20 mg</i>	61	<i>mg (base equiv)</i>	168
<i>bethanechol chloride tab 10 mg</i>	166	BIVIGAM INJ 10%.....	179
<i>bethanechol chloride tab 25 mg</i>	166	<i>bleomycin sulfate for inj 15 unit</i>	38
<i>bethanechol chloride tab 50 mg</i>	166	<i>bleomycin sulfate for inj 30 unit</i>	38
<i>bethanechol chloride tab 5 mg</i>	166	BLEPH-10 SOL 10% OP.....	222
BETHKIS NEB 300/4ML.....	201	BLEPHAMIDE OIN S.O.P.....	221
BETIMOL SOL 0.25%.....	224	BLEPHAMIDE SUS OP	221
BETIMOL SOL 0.5%	224	BLINCYTO INJ 35MCG	44
BETOPTIC-S SUS 0.25% OP	224	<i>blisovi 24 tab fe 1/20</i>	137
BEVACIZUMAB INJ 2.75MG	225	<i>blisovi fe tab 1/20</i>	137
BEVACIZUMAB INJ 3.75MG	225	<i>blisovi fe tab 1.5/30</i>	139
BEVESPI AER 9-4.8MCG.....	197	BLOOD GLUCOS TES	122
BEVYXXA CAP 40MG.....	170	BLOOD GLUCOS TES PREMIUM	123
BEVYXXA CAP 80MG.....	170	BLOOD GLUCOS TES STRIPS	123
<i>bexarotene cap 75 mg</i>	44	BLOXIVERZ INJ 10/10ML	107
BEXSERO INJ	183	BLOXIVERZ INJ 5MG/10ML.....	107
BEYAZ TAB	137	BONIVA INJ 3MG/3ML	135
BG STAR TES BLD GLUC	122	BONIVA TAB 150MG	135
<i>bicalutamide tab 50 mg</i>	40	BONJESTA TAB 20-20MG	156
BICILLIN C-R INJ 120000.....	23	BOOSTRIX INJ.....	183
BICILLIN C-R INJ 900/300	23	BOSULIF TAB 100MG	41
BICILLIN L-A INJ 120000	23	BOSULIF TAB 500MG	41
BICILLIN L-A INJ 240000	23	BOTOX INJ 100UNIT.....	102
BICILLIN L-A INJ 600000.....	23	BOTOX INJ 200UNIT.....	102

<i>bp 10-1 emu</i>	206	<i>3 mg</i>	160
<i>bp cleansing emu 10-4%</i>	206	<i>budesonide inhalation susp 0.25 mg/2ml</i>	204
<i>bp foam aer 5.3%</i>	206	<i>budesonide inhalation susp 0.5 mg/2ml</i>	204
<i>bp wash liq 2.5%</i>	206	<i>budesonide inhalation susp 1 mg/2ml</i>	204
<i>bp wash liq 7%</i>	206	BULLSEYE MIS LANCETS	123
BRAFTOVI CAP 50MG	41	BULLSEYE MIS MINI LNC	123
BRAFTOVI CAP 75MG	41	<i>bumetanide inj 0.25 mg/ml</i>	69
BRAVELLE INJ 75UNIT	144	<i>bumetanide tab 0.5 mg</i>	69
BREO ELLIPTA INH 100-25	204	<i>bumetanide tab 1 mg</i>	69
BREO ELLIPTA INH 200-25	204	<i>bumetanide tab 2 mg</i>	69
BREVIBLOC INJ 10MG/ML	61	BUMEX TAB 0.5MG	69
BREVIBLOC SOL	61	BUMEX TAB 1MG	69
BREVIBLOC SOL 10MG/ML	62	BUMEX TAB 2MG	69
BREVITAL SOD INJ 2.5GM	74	BUNAVAIL MIS 2.1-0.3	111
BREVITAL SOD INJ 500MG.....	74	BUNAVAIL MIS 4.2-0.7	111
BRIDION SOL 200/2ML.....	133	BUNAVAIL MIS 6.3-1MG	111
BRIDION SOL 500/5ML.....	133	<i>bupap tab 50-300mg</i>	4
<i>briellyn tab</i>	139	BUPHENYL POW.....	162
BRILINTA TAB 60MG	177	BUPHENYL TAB 500MG	162
BRILINTA TAB 90MG	177	BUPIVAC/NAACL INJ .9/.0625	1
BRIMO/DORZO SOL 0.15-2%	225	BUPIVAC/NAACL INJ 0.25/0.9	1
<i>brimonidine tartrate ophth soln 0.15%</i>	227	BUPIVAC/NAACL INJ 0.9/0.2%	1
<i>brimonidine tartrate ophth soln 0.2%</i>	227	BUPIVAC/NAACL INJ 0.9/0.5%	1
BRINEURA KIT 150/5ML.....	149	<i>bupivacaine 0.75% in dextrose inj 8.25%</i>	1
BRISDELLE CAP 7.5MG	114	<i>bupivacaine hcl inj 0.25%</i>	1
BRIVIACT INJ 50MG/5ML.....	77	<i>bupivacaine hcl inj 0.5%</i>	1
BRIVIACT SOL 10MG/ML.....	77	<i>bupivacaine hcl preservative free (pf) inj</i> <i>0.25%</i>	1
BRIVIACT TAB 100MG	77	<i>bupivacaine hcl preservative free (pf) inj</i> <i>0.5%</i>	1
BRIVIACT TAB 10MG.....	77	<i>bupivacaine hcl preservative free (pf) inj</i> <i>0.75%</i>	2
BRIVIACT TAB 25MG.....	77	<i>bupivacaine inj 0.25% w/ epinephrine</i> <i>1:200000</i>	2
BRIVIACT TAB 50MG.....	77	<i>bupivacaine inj 0.25% w/ epinephrine</i> <i>1:200000 (pf)</i>	2
BRIVIACT TAB 75MG.....	77	<i>bupivacaine inj 0.5% w/ epinephrine</i> <i>1:200000</i>	2
<i>bromfed dm syp</i>	199	<i>bupivacaine inj 0.5% w/ epinephrine</i> <i>1:200000 (pf)</i>	2
<i>bromfenac sodium ophth soln 0.09%</i> <i>(base equiv) (once-daily)</i>	222	<i>bupivacaine inj spinal</i>	2
<i>bromocriptine mesylate cap 5 mg (base</i> <i>equivalent)</i>	89	BUPIVAC HCL INJ 0.5%.....	1
<i>bromocriptine mesylate tab 2.5 mg (base</i> <i>equivalent)</i>	89	BUPRENEX INJ 0.3MG/ML	8
<i>brompheniramine tannate chew tab 12</i> <i>mg</i>	198	<i>buprenorphine hcl-naloxone hcl sl tab 2-</i> <i>0.5 mg (base equiv)</i>	111
BROMSITE DRO 0.075%	222		
BROVANA NEB 15MCG	200		
<i>bss sol op</i>	225		
BUCALSEP SOL.....	212		
BUCALSEP SPR.....	212		
<i>budesonide delayed release particles cap</i>			

<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	111
<i>buprenorphine hcl inj 0.3 mg/ml (base equiv)</i>	8
<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	111
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	111
<i>buprenorphine td patch weekly 10 mcg/hr</i>	8
<i>buprenorphine td patch weekly 15 mcg/hr</i>	8
<i>buprenorphine td patch weekly 20 mcg/hr</i>	8
<i>buprenorphine td patch weekly 5 mcg/hr</i>	8
<i>buprenorphine td patch weekly 7.5 mcg/hr</i>	8
<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	111
<i>bupropion hcl tab 100 mg</i>	84
<i>bupropion hcl tab 75 mg</i>	84
<i>bupropion hcl tab er 12hr 100 mg</i>	84
<i>bupropion hcl tab er 12hr 150 mg</i>	84
<i>bupropion hcl tab er 12hr 200 mg</i>	84
<i>bupropion hcl tab er 24hr 150 mg</i>	84
<i>bupropion hcl tab er 24hr 300 mg</i>	84
<i>bupirone hcl tab 10 mg</i>	77
<i>bupirone hcl tab 15 mg</i>	77
<i>bupirone hcl tab 30 mg</i>	77
<i>bupirone hcl tab 5 mg</i>	76
<i>bupirone hcl tab 7.5 mg</i>	77
<i>BUSULFEX INJ 6MG/ML</i>	36
<i>BUT/ASA/CAF TAB</i>	4
<i>butalbital-acetaminophen-caffeine cap 50-300-40 mg</i>	4
<i>butalbital-acetaminophen-caffeine cap 50-325-40 mg</i>	4
<i>butalbital-acetaminophen-caffeine tab 50-325-40 mg</i>	4
<i>butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg</i>	8
<i>butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg</i>	8
<i>butalbital-acetaminophen tab 50-300 mg</i>	4
<i>butalbital-acetaminophen tab 50-325 mg</i>	4

<i>butalbital-aspirin-caffeine cap 50-325-40 mg</i>	4
<i>butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg</i>	8
<i>BUTISOL SOD TAB 30MG</i>	104
<i>butorphanol tartrate inj 1 mg/ml</i>	8
<i>butorphanol tartrate inj 2 mg/ml</i>	8
<i>butorphanol tartrate nasal soln 10 mg/ml</i>	8
<i>BUTRANS DIS 10MCG/HR</i>	8
<i>BUTRANS DIS 15MCG/HR</i>	8
<i>BUTRANS DIS 20MCG/HR</i>	8
<i>BUTRANS DIS 5MCG/HR</i>	8
<i>BUTRANS DIS 7.5/HR</i>	8
<i>BYDUREON INJ 2MG</i>	117
<i>BYDUREON PEN INJ 2MG</i>	118
<i>BYETTA INJ 10MCG</i>	118
<i>BYETTA INJ 5MCG</i>	118
<i>BYSTOLIC TAB 10MG</i>	62
<i>BYSTOLIC TAB 2.5MG</i>	62
<i>BYSTOLIC TAB 20MG</i>	62
<i>BYSTOLIC TAB 5MG</i>	62
<i>BYVALSON TAB 5-80MG</i>	61
C	
<i>C-NATE DHA CAP 28-1-200</i>	193
<i>cabergoline tab 0.5 mg</i>	149
<i>CABOMETYX TAB 20MG</i>	42
<i>CABOMETYX TAB 40MG</i>	42
<i>CABOMETYX TAB 60MG</i>	42
<i>CADUET TAB 10-10MG</i>	64
<i>CADUET TAB 10-20MG</i>	64
<i>CADUET TAB 10-40MG</i>	64
<i>CADUET TAB 10-80MG</i>	64
<i>CADUET TAB 5-10MG</i>	64
<i>CADUET TAB 5-20MG</i>	64
<i>CADUET TAB 5-40MG</i>	64
<i>CADUET TAB 5-80MG</i>	64
<i>CAFCIT INJ 60MG/3ML</i>	202
<i>CAFERGOT TAB 1-100MG</i>	105
<i>caffeine & sodium benzoate inj 125-125 mg/ml (500 mg/2ml)</i>	202
<i>caffeine citrate inj 60 mg/3ml (10 mg/ml base equiv)</i>	202
<i>caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv)</i>	202
<i>CALAN SR TAB 120MG</i>	65
<i>CALAN SR TAB 180MG</i>	65
<i>CALAN SR TAB 240MG</i>	65

CALAN TAB 120MG	65	CAPASTAT SUL INJ 1GM	30
CALAN TAB 80MG	65	<i>capecitabine tab 150 mg</i>	38
CALCIFOL WAF	189	<i>capecitabine tab 500 mg</i>	39
<i>calcipotriene-betamethasone</i>		CAPEX SHA 0.01%	213
<i>dipropionate oint 0.005-0.064%</i>	211	CAPHOSOL SOL	220
<i>calcipotriene cream 0.005%</i>	211	CAPRELSA TAB 100MG	42
<i>calcipotriene oint 0.005%</i>	211	CAPRELSA TAB 300MG	42
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>		<i>captopril & hydrochlorothiazide tab 25-15</i>	
.....	211	<i>mg</i>	48
<i>calcitonin (salmon) nasal soln 200</i>		<i>captopril & hydrochlorothiazide tab 25-25</i>	
<i>unit/act</i>	135	<i>mg</i>	48
<i>calcitrene oin 0.005%</i>	211	<i>captopril & hydrochlorothiazide tab 50-15</i>	
<i>calcitriol cap 0.25 mcg</i>	148	<i>mg</i>	48
<i>calcitriol cap 0.5 mcg</i>	148	<i>captopril & hydrochlorothiazide tab 50-25</i>	
<i>calcitriol inj 1 mcg/ml</i>	148	<i>mg</i>	49
<i>calcitriol oint 3 mcg/gm</i>	211	<i>captopril tab 100 mg</i>	50
<i>calcitriol oral soln 1 mcg/ml</i>	148	<i>captopril tab 12.5 mg</i>	49
CALCIUM-FA WAF PLUS D	189	<i>captopril tab 25 mg</i>	50
<i>calcium acetate (phosphate binder) cap</i>		<i>captopril tab 50 mg</i>	50
<i>667 mg (169 mg ca)</i>	151	CARAC CRE 0.5%	209
<i>calcium acetate (phosphate binder) tab</i>		CARAFATE SUS 1GM/10ML.....	162
<i>667 mg</i>	151	CARAFATE TAB 1GM.....	162
<i>calcium chloride inj 10%</i>	189	CARBAGLU TAB 200MG.....	149
CALCIUM DISO INJ 1GM/5ML	133	<i>carbamazepine cap er 12hr 100 mg</i>	77
<i>calcium gluconate inj 10%</i>	189	<i>carbamazepine cap er 12hr 200 mg</i>	77
CALDOLOR INJ 800/8ML.....	4	<i>carbamazepine cap er 12hr 300 mg</i>	77
CALQUENCE CAP 100MG.....	42	<i>carbamazepine chew tab 100 mg</i>	77
CAMBIA POW 50MG	105	<i>carbamazepine susp 100 mg/5ml</i>	77
<i>camila tab 0.35mg</i>	140	<i>carbamazepine tab 200 mg</i>	77
CAMPATH INJ 30MG/ML.....	44	<i>carbamazepine tab er 12hr 100 mg</i>	77
CAMPTOSAR INJ 100/5ML.....	47	<i>carbamazepine tab er 12hr 200 mg</i>	77
CAMPTOSAR INJ 300/15ML	47	<i>carbamazepine tab er 12hr 400 mg</i>	77
CAMPTOSAR INJ 40MG/2ML	47	CARBAPHEN 12 LIQ.....	199
<i>camrese lo tab</i>	136	CARBAPHEN 12 SUS PED	199
<i>camrese tab</i>	136	CARBATROL CAP 100MG	77
CANASA SUP 1000MG	160	CARBATROL CAP 200MG.....	77
CANCIDAS INJ 50MG	25	CARBATROL CAP 300MG.....	77
CANCIDAS INJ 70MG	25	<i>carbidopa-levodopa-entacapone tabs</i>	
<i>candesartan cilexetil-hydrochlorothiazide</i>		<i>12.5-50-200 mg</i>	89
<i>tab 16-12.5 mg</i>	53	<i>carbidopa-levodopa-entacapone tabs</i>	
<i>candesartan cilexetil-hydrochlorothiazide</i>		<i>18.75-75-200 mg</i>	90
<i>tab 32-12.5 mg</i>	53	<i>carbidopa-levodopa-entacapone tabs 25-</i>	
<i>candesartan cilexetil-hydrochlorothiazide</i>		<i>100-200 mg</i>	90
<i>tab 32-25 mg</i>	53	<i>carbidopa-levodopa-entacapone tabs</i>	
<i>candesartan cilexetil tab 16 mg</i>	55	<i>31.25-125-200 mg</i>	90
<i>candesartan cilexetil tab 32 mg</i>	55	<i>carbidopa-levodopa-entacapone tabs</i>	
<i>candesartan cilexetil tab 4 mg</i>	55	<i>37.5-150-200 mg</i>	90
<i>candesartan cilexetil tab 8 mg</i>	55	<i>carbidopa-levodopa-entacapone tabs 50-</i>	

200-200 mg.....	90	CARDURA TAB 8MG	51
<i>carbidopa & levodopa orally</i>		CARDURA XL TAB 4MG	165
<i>disintegrating tab 10-100 mg</i>	89	CARDURA XL TAB 8MG	165
<i>carbidopa & levodopa orally</i>		CAREONE LANC MIS 28G	123
<i>disintegrating tab 25-100 mg</i>	89	CAREONE LANC MIS THIN 23G	123
<i>carbidopa & levodopa orally</i>		CARESENS N TES.....	123
<i>disintegrating tab 25-250 mg</i>	89	CARIMUNE NF INJ 6GM.....	179
<i>carbidopa & levodopa tab 10-100 mg</i> ..	89	<i>carisoprodol tab 250 mg</i>	108
<i>carbidopa & levodopa tab 25-100 mg</i> ..	89	<i>carisoprodol tab 350 mg</i>	108
<i>carbidopa & levodopa tab 25-250 mg</i> ..	89	<i>carisoprodol w/ aspirin & codeine tab</i>	
<i>carbidopa & levodopa tab er 25-100 mg</i>		<i>200-325-16 mg</i>	108
.....	89	<i>carisoprodol w/ aspirin tab 200-325 mg</i>	
<i>carbidopa & levodopa tab er 50-200 mg</i>		.....	108
.....	89	CARNITOR INJ 1GM/5ML.....	136
<i>carbidopa tab 25 mg</i>	89	CARNITOR SF SOL 1GM/10ML	136
<i>carbinoxamine maleate soln 4 mg/5ml</i>		CARNITOR SOL 1GM/10ML.....	136
.....	198	CARNITOR TAB 330MG	136
<i>carbinoxamine maleate tab 4 mg</i>	198	CAROSPIR SUS 25MG/5ML.....	51
<i>carbinoxamine maleate tab 6 mg</i>	198	<i>carteolol hcl ophth soln 1%</i>	224
CARBOCAINE INJ 1.5% PF.....	2	<i>cartia xt cap 120/24hr</i>	66
CARBOCAINE INJ 1%	2	<i>cartia xt cap 180/24hr</i>	66
CARBOCAINE INJ 1% PF.....	2	<i>cartia xt cap 240/24hr</i>	66
CARBOCAINE INJ 2%	2	<i>cartia xt cap 300/24hr</i>	66
CARBOCAINE INJ 2% PF.....	2	<i>carvedilol phosphate cap er 24hr 10 mg</i>	
<i>carboplatin iv soln 150 mg/15ml</i>	36	.....	62
<i>carboplatin iv soln 450 mg/45ml</i>	36	<i>carvedilol phosphate cap er 24hr 20 mg</i>	
<i>carboplatin iv soln 50 mg/5ml</i>	36	.....	62
<i>carboplatin iv soln 600 mg/60ml</i>	36	<i>carvedilol phosphate cap er 24hr 40 mg</i>	
CARDENE IV INJ 40/200ML	64	.....	62
CARDENE IV SOL 20/200ML.....	64	<i>carvedilol phosphate cap er 24hr 80 mg</i>	
<i>cardioplegic soln</i>	70	.....	62
CARDIOVID CAP PLUS	190	<i>carvedilol tab 12.5 mg</i>	62
CARDIZEM CD CAP 120MG/24	65	<i>carvedilol tab 25 mg</i>	62
CARDIZEM CD CAP 180MG/24	65	<i>carvedilol tab 3.125 mg</i>	62
CARDIZEM CD CAP 240MG/24	65	<i>carvedilol tab 6.25 mg</i>	62
CARDIZEM CD CAP 360MG/24	65	CASCARA EXT SAGRADA.....	161
CARDIZEM LA TAB 120MG	65	CASODEX TAB 50MG.....	40
CARDIZEM LA TAB 180MG	65	<i>casprofungin acetate for iv soln 50 mg</i> .25	
CARDIZEM LA TAB 240MG	65	<i>casprofungin acetate for iv soln 70 mg</i> .25	
CARDIZEM LA TAB 300MG/24.....	66	CATAPRES-TTS DIS 0.1/24HR	51
CARDIZEM LA TAB 360MG	66	CATAPRES-TTS DIS 0.2/24HR	51
CARDIZEM LA TAB 420MG/24.....	66	CATAPRES-TTS DIS 0.3/24HR	51
CARDIZEM TAB 120MG.....	66	CATAPRES TAB 0.1MG.....	51
CARDIZEM TAB 30MG	66	CATAPRES TAB 0.2MG.....	51
CARDIZEM TAB 60MG	66	CATAPRES TAB 0.3MG.....	51
CARDURA TAB 1MG	51	CATHFLO ACTI INJ VASE.....	176
CARDURA TAB 2MG	51	CAYA DPR.....	137
CARDURA TAB 4MG	51	CAYSTON INH 75MG	33

<i>caziant pak</i>	140	CEFOXITIN INJ 1GM.....	18
<i>cefaclor cap 250 mg</i>	18	CEFOXITIN INJ 2GM.....	18
<i>cefaclor cap 500 mg</i>	18	<i>cefoxitin sodium for inj 10 gm</i>	18
CEFACLOR ER TAB 500MG	18	<i>cefoxitin sodium for iv soln 1 gm</i>	18
<i>cefaclor for susp 125 mg/5ml</i>	18	<i>cefoxitin sodium for iv soln 2 gm</i>	18
<i>cefaclor for susp 250 mg/5ml</i>	18	<i>cefpodoxime proxetil for susp 100</i>	
<i>cefaclor for susp 375 mg/5ml</i>	18	<i>mg/5ml</i>	19
<i>cefadroxil cap 500 mg</i>	17	<i>cefpodoxime proxetil for susp 50 mg/5ml</i>	
<i>cefadroxil for susp 250 mg/5ml</i>	17	.....	19
<i>cefadroxil for susp 500 mg/5ml</i>	17	<i>cefpodoxime proxetil tab 100 mg</i>	19
<i>cefadroxil tab 1 gm</i>	17	<i>cefpodoxime proxetil tab 200 mg</i>	19
CEFAZOL/DEX SOL 1GM	17	<i>cefprozil for susp 125 mg/5ml</i>	18
CEFAZOL/DEX SOL 2GM	17	<i>cefprozil for susp 250 mg/5ml</i>	18
CEFAZOLIN INJ 100GM.....	17	<i>cefprozil tab 250 mg</i>	18
CEFAZOLIN INJ 1GM/50ML.....	17	<i>cefprozil tab 500 mg</i>	19
CEFAZOLIN INJ 300GM.....	17	CEFTAZIDIME/ SOL D5W 1GM	19
<i>cefazolin sodium for inj 10 gm</i>	17	CEFTAZIDIME/ SOL D5W 2GM	19
<i>cefazolin sodium for inj 1 gm</i>	17	<i>ceftazidime for inj 1 gm</i>	19
<i>cefazolin sodium for inj 20 gm</i>	18	<i>ceftazidime for inj 2 gm</i>	19
<i>cefazolin sodium for inj 500 mg</i>	18	<i>ceftazidime for inj 6 gm</i>	19
<i>cefazolin sodium for iv soln 1 gm</i>	18	CEFTRIAX/DEX INJ 1GM	19
CEFAZOLIN SOL	18	CEFTRIAX/DEX INJ 2GM	19
<i>cefdinir cap 300 mg</i>	19	CEFTRIAZONE INJ 100GM.....	19
<i>cefdinir for susp 125 mg/5ml</i>	19	<i>ceftriaxone sodium for inj 10 gm</i>	19
<i>cefdinir for susp 250 mg/5ml</i>	19	<i>ceftriaxone sodium for inj 1 gm</i>	19
<i>cefditoren pivoxil tab 200 mg (base</i>		<i>ceftriaxone sodium for inj 250 mg</i>	19
<i>equivalent)</i>	19	<i>ceftriaxone sodium for inj 2 gm</i>	19
<i>cefditoren pivoxil tab 400 mg (base</i>		<i>ceftriaxone sodium for inj 500 mg</i>	19
<i>equivalent)</i>	19	<i>ceftriaxone sodium for iv soln 1 gm</i>	19
CEFEPIME/DEX INJ 1GM	18	<i>ceftriaxone sodium for iv soln 2 gm</i>	19
CEFEPIME/DEX INJ 2GM	18	<i>ceftriaxone sodium in dextrose inj 20</i>	
<i>cefepime hcl for inj 1 gm</i>	18	<i>mg/ml</i>	19
<i>cefepime hcl for inj 2 gm</i>	18	<i>ceftriaxone sodium in dextrose inj 40</i>	
CEFEPIME INJ 1GM	18	<i>mg/ml</i>	19
CEFEPIME INJ 2GM	18	<i>cefuroxime axetil tab 250 mg</i>	19
<i>cefixime for susp 100 mg/5ml</i>	19	<i>cefuroxime axetil tab 500 mg</i>	19
<i>cefixime for susp 200 mg/5ml</i>	19	<i>cefuroxime sodium for inj 7.5 gm</i>	19
CEFOTAN INJ 1GM/10ML	18	<i>cefuroxime sodium for inj 750 mg</i>	19
CEFOTAN INJ 2GM	18	<i>cefuroxime sodium for iv soln 1.5 gm</i> ..	19
<i>cefotaxime sodium for inj 10 gm</i>	19	<i>celacyn gel</i>	218
<i>cefotaxime sodium for inj 1 gm</i>	19	CELEBREX CAP 100MG	1
<i>cefotaxime sodium for inj 2 gm</i>	19	CELEBREX CAP 200MG	1
<i>cefotaxime sodium for inj 500 mg</i>	19	CELEBREX CAP 400MG	1
CEFOTET/DEX INJ 1-3.58%.....	18	CELEBREX CAP 50MG	1
CEFOTET/DEX INJ 2-2.08%.....	18	<i>celecoxib cap 100 mg</i>	1
<i>cefotetan disodium for inj 10 gm</i>	18	<i>celecoxib cap 200 mg</i>	1
<i>cefotetan disodium for inj 1 gm</i>	18	<i>celecoxib cap 400 mg</i>	1
<i>cefotetan disodium for inj 2 gm</i>	18	<i>celecoxib cap 50 mg</i>	1

CELESTONE INJ SOLUSPAN	145	<i>chlordiazepoxide-amitriptyline tab 5-12.5</i>	<i>mg</i>	<i>84</i>
CELEXA TAB 10MG.....	85	<i>chlordiazepoxide hcl-clidinium bromide</i>	<i>cap 5-2.5 mg</i>	<i>158</i>
CELEXA TAB 20MG.....	85	<i>chlordiazepoxide hcl cap 10 mg</i>	<i>75</i>	
CELEXA TAB 40MG.....	85	<i>chlordiazepoxide hcl cap 25 mg</i>	<i>75</i>	
CELLCEPT CAP 250MG	181	<i>chlordiazepoxide hcl cap 5 mg</i>	<i>75</i>	
CELLCEPT IV INJ 500MG	181	CHLORHEX GLU SOL 20%	212	
CELLCEPT SUS 200MG/ML.....	181	<i>chlorhexidine gluconate soln 0.12% ..</i>	<i>220</i>	
CELLCEPT TAB 500MG	181	<i>chlorprocaine hcl preservative free (pf)</i>	<i>inj 2%</i>	<i>2</i>
CELONTIN CAP 300MG	77	<i>chlorprocaine hcl preservative free (pf)</i>	<i>inj 3%</i>	<i>2</i>
CENTANY OIN 2%.....	209	<i>chloroquine phosphate tab 250 mg</i>	<i>27</i>	
<i>cephalexin cap 250 mg.....</i>	<i>18</i>	<i>chloroquine phosphate tab 500 mg</i>	<i>27</i>	
<i>cephalexin cap 500 mg.....</i>	<i>18</i>	<i>chlorothiazide sodium for inj 500 mg...</i>	<i>70</i>	
<i>cephalexin cap 750 mg.....</i>	<i>18</i>	<i>chlorothiazide tab 250 mg</i>	<i>70</i>	
<i>cephalexin for susp 125 mg/5ml</i>	<i>18</i>	<i>chlorothiazide tab 500 mg</i>	<i>70</i>	
<i>cephalexin for susp 250 mg/5ml</i>	<i>18</i>	<i>chlorpromazine hcl tab 100 mg.....</i>	<i>96</i>	
<i>cephalexin tab 250 mg</i>	<i>18</i>	<i>chlorpromazine hcl tab 10 mg</i>	<i>96</i>	
<i>cephalexin tab 500 mg</i>	<i>18</i>	<i>chlorpromazine hcl tab 200 mg.....</i>	<i>96</i>	
CEPROTIN INJ 1000UNIT	176	<i>chlorpromazine hcl tab 25 mg</i>	<i>96</i>	
CEPROTIN INJ 500 UNIT	176	<i>chlorpromazine hcl tab 50 mg</i>	<i>96</i>	
CERACADE EMU.....	218	CHLORPROMAZ INJ 25MG/ML.....	96	
<i>ceramax cre.....</i>	<i>218</i>	CHLORPROMAZ INJ 50MG/2ML.....	96	
CERAVE LOT	216	<i>chlorpropamide tab 100 mg</i>	<i>120</i>	
CERDELGA CAP 84MG.....	145	<i>chlorpropamide tab 250 mg</i>	<i>120</i>	
CEREBYX INJ 100/2ML	77	<i>chlorthalidone tab 25 mg</i>	<i>70</i>	
CEREBYX INJ 500/10ML.....	77	<i>chlorthalidone tab 50 mg.....</i>	<i>70</i>	
CEREZYME INJ 400UNIT	145	<i>chlorzoxazone tab 250 mg</i>	<i>108</i>	
CERVIDIL VAG MIS 10MG INS	149	<i>chlorzoxazone tab 500 mg</i>	<i>108</i>	
CESAMET CAP 1MG	156	CHOLBAM CAP 250MG	162	
CETACAINE AER	217	CHOLBAM CAP 50MG.....	162	
<i>cetirizine hcl oral soln 1 mg/ml (5</i>	<i>mg/5ml).....</i>	<i>cholestyramine light powder 4 gm/dose</i>	<i>.....</i>	<i>57</i>
CETRAXAL SOL 0.2%	227	<i>cholestyramine light powder packets 4</i>	<i>gm</i>	<i>57</i>
CETROTIDE KIT 0.25MG	144	<i>cholestyramine powder 4 gm/dose.....</i>	<i>57</i>	
CETYLEV TAB 2.5GM	133	<i>cholestyramine powder packets 4 gm ..</i>	<i>57</i>	
CETYLEV TAB 500MG.....	133	<i>choline & magnesium salicylates liq 500</i>	<i>mg/5ml.....</i>	<i>4</i>
<i>cevimeline hcl cap 30 mg</i>	<i>164</i>	<i>choline fenofibrate cap dr 135 mg</i>	<i>(fenofibric acid equiv)</i>	<i>58</i>
CHANTIX PAK 0.5& 1MG	111	<i>choline fenofibrate cap dr 45 mg</i>	<i>(fenofibric acid equiv)</i>	<i>58</i>
CHANTIX PAK 1MG.....	111	<i>chor gonadot inj 10000unt.....</i>	<i>144</i>	
CHANTIX TAB 0.5MG.....	111	<i>chromagen cap.....</i>	<i>189</i>	
CHANTIX TAB 1MG.....	111	<i>chromic chloride inj 40 mcg/10ml (4</i>		
<i>chateal tab 0.15/30.....</i>	<i>139</i>			
CHEMET CAP 100MG	133			
CHENODAL TAB 250MG	159			
<i>chld allergy liq 12.5/5ml</i>	<i>198</i>			
<i>chloramphenicol sodium succinate for iv</i>	<i>inj 1 gm</i>			<i>33</i>
<i>chlordiazepoxide-amitriptyline tab 10-25</i>	<i>mg</i>			<i>84</i>

<i>mcg/ml) (elemental cr).....</i>	190	.....	21
CIALIS TAB 2.5MG	165	<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	21
CIALIS TAB 5MG.....	165	.....	21
<i>ciclodan cre 0.77%</i>	209	CIPRO HC SUS OTIC	227
<i>ciclodan sol 8%</i>	209	CIPRO I.V. INJ 400MG.....	21
CICLODAN SOL KIT 8%	209	CIPRO TAB 250MG.....	21
<i>ciclopirox gel 0.77%.....</i>	209	CIPRO TAB 500MG.....	21
<i>ciclopirox olamine cream 0.77% (base</i>		CIPRO XR TAB 1000MG	21
<i>equiv)</i>	209	CIPRO XR TAB 500MG	21
<i>ciclopirox olamine susp 0.77% (base</i>		<i>cisatracurium besylate (pf) iv soln 10</i>	
<i>equiv)</i>	210	<i>mg/5ml (2 mg/ml).....</i>	110
<i>ciclopirox shampoo 1%.....</i>	210	<i>cisatracurium besylate (pf) iv soln 200</i>	
<i>ciclopirox solution 8%</i>	210	<i>mg/20ml (10 mg/ml)</i>	110
<i>cidofovir iv inj 75 mg/ml.....</i>	31	<i>cisatracurium besylate iv soln 20</i>	
<i>cilostazol tab 100 mg</i>	176	<i>mg/10ml (2 mg/ml)</i>	110
<i>cilostazol tab 50 mg</i>	176	<i>cisplatin inj 100 mg/100ml (1 mg/ml) .</i>	36
CILOXAN OIN 0.3% OP.....	222	<i>cisplatin inj 200 mg/200ml (1 mg/ml) .</i>	36
CILOXAN SOL 0.3% OP.....	222	<i>cisplatin inj 50 mg/50ml (1 mg/ml).....</i>	36
CIMDUO TAB 300-300.....	27	<i>citalopram hydrobromide oral soln 10</i>	
<i>cimetidine hcl soln 300 mg/5ml</i>	159	<i>mg/5ml.....</i>	85
<i>cimetidine tab 200 mg</i>	159	<i>citalopram hydrobromide tab 10 mg</i>	
<i>cimetidine tab 300 mg</i>	159	<i>(base equiv)</i>	85
<i>cimetidine tab 400 mg</i>	159	<i>citalopram hydrobromide tab 20 mg</i>	
<i>cimetidine tab 800 mg</i>	159	<i>(base equiv)</i>	85
CIMZIA KIT	178	<i>citalopram hydrobromide tab 40 mg</i>	
CIMZIA KIT STARTER	178	<i>(base equiv)</i>	85
CIMZIA PREFL KIT 200MG/ML.....	178	CITANEST FOR INJ DENT 4%	2
CINQAIR INJ	202	CITANEST INJ PLAIN 4%	2
CINRYZE SOL 500 UNIT	175	CITRANATAL CAP HARMONY.....	193
CIPRO (10%) SUS 500MG/5.....	21	CITRANATAL CAP MEDLEY.....	193
CIPRO (5%) SUS 250MG/5	21	CITRANATAL MIS 90 DHA	193
CIPRODEX SUS 0.3-0.1%	227	CITRANATAL MIS B-CALM	193
<i>ciprofloxacin-ciprofloxacin hcl tab er 24hr</i>		CITRANATAL PAK ASSURE.....	193
<i>1000 mg(base eq)</i>	21	CITRANATAL PAK DHA.....	193
<i>ciprofloxacin-ciprofloxacin hcl tab er 24hr</i>		CITRANATAL TAB BLOOM.....	193
<i>500 mg (base eq).....</i>	21	CITRANATAL TAB RX	193
<i>ciprofloxacin 200 mg/100ml in d5w.....</i>	21	<i>cladribine iv soln 10 mg/10ml (1 mg/ml)</i>	
<i>ciprofloxacin 400 mg/200ml in d5w.....</i>	21	.....	39
<i>ciprofloxacin for oral susp 500 mg/5ml</i>		<i>claravis cap 10mg.....</i>	205
<i>(10%) (10 gm/100ml)</i>	21	<i>claravis cap 20mg</i>	205
<i>ciprofloxacin hcl ophth soln 0.3%.....</i>	222	<i>claravis cap 30mg.....</i>	205
<i>ciprofloxacin hcl otic soln 0.2% (base</i>		<i>claravis cap 40mg.....</i>	205
<i>equivalent)</i>	227	CLARINEX-D TAB 2.5-120	198
<i>ciprofloxacin hcl tab 100 mg (base equiv)</i>		CLARINEX SYP 0.5MG/ML.....	198
.....	21	CLARINEX TAB 5MG	198
<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>		<i>clarithromycin for susp 125 mg/5ml</i>	20
.....	21	<i>clarithromycin for susp 250 mg/5ml</i>	20
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>		<i>clarithromycin tab 250 mg</i>	20

<i>clarithromycin tab 500 mg</i>	20	<i>clindamycin phosphate-benzoyl peroxide gel 1-5%</i>	206
<i>clarithromycin tab er 24hr 500 mg</i>	20	<i>clindamycin phosphate-tretinoin gel 1.2-0.025%</i>	206
CLEANLET 28G MIS LANCETS	123	<i>clindamycin phosphate foam 1%</i>	206
<i>clemastine fumarate tab 2.68 mg</i>	198	<i>clindamycin phosphate gel 1%</i>	206
CLENPIQ SOL	161	<i>clindamycin phosphate in d5w iv soln 300 mg/50ml</i>	34
CLEOCIN-T GEL 1%	206	<i>clindamycin phosphate in d5w iv soln 600 mg/50ml</i>	34
CLEOCIN-T LOT 1%	206	<i>clindamycin phosphate in d5w iv soln 900 mg/50ml</i>	34
CLEOCIN-T PAD 1%	206	<i>clindamycin phosphate inj 300 mg/2ml</i>	34
CLEOCIN-T SOL 1%	206	<i>clindamycin phosphate inj 600 mg/4ml</i>	34
CLEOCIN/D5W INJ 300MG	33	<i>clindamycin phosphate inj 900 mg/6ml</i>	34
CLEOCIN/D5W INJ 600MG	33	<i>clindamycin phosphate inj 9 gm/60ml</i>	34
CLEOCIN/D5W INJ 900MG	33	<i>clindamycin phosphate iv soln 300 mg/2ml</i>	34
CLEOCIN CAP 150MG	33	<i>clindamycin phosphate iv soln 600 mg/4ml</i>	34
CLEOCIN CAP 300MG	33	<i>clindamycin phosphate iv soln 900 mg/6ml</i>	34
CLEOCIN CAP 75MG	33	<i>clindamycin phosphate lotion 1%</i>	206
CLEOCIN CRE 2% VAG	168	<i>clindamycin phosphate soln 1%</i>	206
CLEOCIN PED SOL 75MG/5ML	33	<i>clindamycin phosphate swab 1%</i>	206
CLEOCIN PHOS INJ 300/2ML	33	<i>clindamycin phosphate vaginal cream 2%</i>	168
CLEOCIN PHOS INJ 600/4ML	33	CLINDESSE CRE 2%.....	168
CLEOCIN PHOS INJ 900/6ML	33	CLINIMIX E INJ 2.75/D10.....	188
CLEOCIN PHOS INJ 9GM/60ML	33	CLINIMIX E INJ 2.75/D5W.....	188
CLEOCIN SUP 100MG	168	CLINIMIX E INJ 4.25/D10.....	188
CLEVER CHECK MIS	123	CLINIMIX E INJ 4.25/D25.....	188
CLEVER CHECK MIS 30G.....	123	CLINIMIX E INJ 4.25/D5W.....	188
CLEVER CHEK TES	123	CLINIMIX E INJ 5%/D15W	188
CLEVER CHEK TES AUTO CD.....	123	CLINIMIX E INJ 5%/D20W	188
CLEVER CHEK TES VOICE	123	CLINIMIX E INJ 5%/D25W	188
CLEVER CHOIC TES MICRO	123	CLINIMIX INJ 2.75/D5W	188
CLEVIPREX EMU 25/50ML	64	CLINIMIX INJ 4.25/D10	188
CLEVIPREX EMU 50/100ML	64	CLINIMIX INJ 4.25/D20	188
CLEVR CHOICE TES AUTO-CD.....	123	CLINIMIX INJ 4.25/D25	188
CLIMARA DIS 0.025MG.....	143	CLINIMIX INJ 4.25/D5W	188
CLIMARA DIS 0.0375MG	143	CLINIMIX INJ 5%/D15W	188
CLIMARA DIS 0.05MG.....	143	CLINIMIX INJ 5%/D20W	189
CLIMARA DIS 0.06MG.....	143	CLINIMIX INJ 5%/D25W	189
CLIMARA DIS 0.075MG.....	143	<i>clinisol sf inj 15%</i>	189
CLIMARA DIS 0.1MG	143	CLIN SINGLE KIT USE	33
CLIMARA PRO DIS WEEKLY	142	<i>clobetasol e cre 0.05%</i>	215
<i>clindacin-p pad 1%</i>	206	<i>clobetasol propionate cream 0.05%</i>	215
<i>clindacin mis etz 1%</i>	206		
CLINDAGEL GEL 1%.....	206		
<i>clindamycin hcl cap 150 mg</i>	33		
<i>clindamycin hcl cap 300 mg</i>	33		
<i>clindamycin hcl cap 75 mg</i>	33		
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	34		
<i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</i>	206		

<i>clobetasol propionate emulsion foam 0.05%</i>	215	<i>mg/24hr</i>	51
<i>clobetasol propionate foam 0.05%</i>	215	<i>clopidogrel bisulfate tab 300 mg (base equiv)</i>	177
<i>clobetasol propionate gel 0.05%</i>	215	<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	177
<i>clobetasol propionate lotion 0.05%</i>	216	CLOPIDOGREL MIS 75/81MG	177
<i>clobetasol propionate oint 0.05%</i>	216	<i>clorazepate dipotassium tab 15 mg</i>	76
<i>clobetasol propionate shampoo 0.05%</i>	216	<i>clorazepate dipotassium tab 3.75 mg</i> ..	76
<i>clobetasol propionate soln 0.05%</i>	216	<i>clorazepate dipotassium tab 7.5 mg</i>	76
<i>clobetasol propionate spray 0.05%</i>	216	<i>clotrimazole cream 1%</i>	210
CLOBEX LOT 0.05%	216	<i>clotrimazole soln 1%</i>	210
CLOBEX SHA 0.05%	216	<i>clotrimazole troche 10 mg</i>	25
CLOBEX SPR 0.05%	216	<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	210
<i>clocortolone pivalate cream 0.1%</i>	214	<i>clotrimazole w/ betamethasone lotion 1-0.05%</i>	210
<i>clodan sha 0.05%</i>	216	<i>clozapine orally disintegrating tab 100 mg</i>	93
CLODERM CRE 0.1%	214	<i>clozapine orally disintegrating tab 12.5 mg</i>	93
CLODERM CRE 0.1% PMP.....	214	<i>clozapine orally disintegrating tab 150 mg</i>	93
CLOLAR INJ 1MG/ML	39	<i>clozapine orally disintegrating tab 200 mg</i>	93
<i>clomiphene citrate tab 50 mg</i>	144	<i>clozapine orally disintegrating tab 25 mg</i>	93
<i>clomipramine hcl cap 25 mg</i>	77	<i>clozapine tab 100 mg</i>	93
<i>clomipramine hcl cap 50 mg</i>	77	<i>clozapine tab 200 mg</i>	93
<i>clomipramine hcl cap 75 mg</i>	77	<i>clozapine tab 25 mg</i>	93
<i>clonazepam orally disintegrating tab 0.125 mg</i>	75	<i>clozapine tab 50 mg</i>	93
<i>clonazepam orally disintegrating tab 0.25 mg</i>	75	CLOZARIL TAB 100MG.....	93
<i>clonazepam orally disintegrating tab 0.5 mg</i>	75	CLOZARIL TAB 25MG	93
<i>clonazepam orally disintegrating tab 1 mg</i>	76	CO-BALAMIN CAP	185
<i>clonazepam orally disintegrating tab 2 mg</i>	76	CO-NATAL FA TAB 29-1MG.....	193
<i>clonazepam tab 0.5 mg</i>	76	CO-VERATROL CAP	185
<i>clonazepam tab 1 mg</i>	76	COAGADEX INJ 250UNIT.....	172
<i>clonazepam tab 2 mg</i>	76	COAGADEX INJ 500UNIT.....	172
<i>clonidine hcl inj (for epidural infusion) 100 mcg/ml</i>	4	COAGUCHEK MIS LANCETS	123
<i>clonidine hcl inj (for epidural infusion) 500 mcg/ml</i>	4	COARTEM TAB 20-120MG	27
<i>clonidine hcl tab 0.1 mg</i>	51	COCAINE HCL SOL 40MG/ML	217
<i>clonidine hcl tab 0.2 mg</i>	51	<i>cocaine hcl soln 4%</i>	217
<i>clonidine hcl tab 0.3 mg</i>	51	CODAR AR LIQ 2-8/5ML.....	199
<i>clonidine hcl tab er 12hr 0.1 mg</i>	99	<i>codeine sulfate tab 15 mg</i>	8
<i>clonidine hcl td patch weekly 0.1 mg/24hr</i>	51	<i>codeine sulfate tab 30 mg</i>	8
<i>clonidine hcl td patch weekly 0.2 mg/24hr</i>	51	<i>codeine sulfate tab 60 mg</i>	8
<i>clonidine hcl td patch weekly 0.3</i>		COGENTIN INJ 1MG/ML.....	90
		COLAZAL CAP 750MG	160
		<i>colchicine cap 0.6 mg</i>	1

<i>colchicine tab 0.6 mg</i>	1	CONTROL AST TES	123
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	1	CONTROL TES	123
COLCRYS TAB 0.6MG	1	CONZIP CAP 100MG	8
<i>colesevelam hcl tab 625 mg</i>	57	CONZIP CAP 200MG	8
COLESTID FLA GRA 5/7.5GM	57	CONZIP CAP 300MG	8
COLESTID FLA GRA 5GM	57	COOL BLOOD TES GLUCOSE	123
COLESTID GRA 5GM	57	COPAXONE INJ 20MG/ML	107
COLESTID POW 5GM	57	COPAXONE INJ 40MG/ML	107
COLESTID TAB 1GM	57	CORDRAN 80X3 TAP 4MCG/CM	214
<i>colestipol hcl granule packets 5 gm</i>	57	CORDRAN CRE 0.05%	214
<i>colestipol hcl granules 5 gm</i>	57	CORDRAN LOT 0.05%	214
<i>colestipol hcl tab 1 gm</i>	57	CORDRAN OIN 0.05%	214
<i>colistimethate sod for inj 150 mg</i> (colistin base activity)	34	COREG CR CAP 10MG	62
<i>colocort ene 100mg</i>	160	COREG CR CAP 20MG	62
COLY-MYCIN M INJ 150MG	34	COREG CR CAP 40MG	62
COLY-MYCIN S SUS OTIC	227	COREG CR CAP 80MG	62
COLYTE/FLAVR SOL PACKS	161	COREG TAB 12.5MG	62
COMBIGAN SOL 0.2/0.5%	227	COREG TAB 25MG	62
COMBIPATCH DIS .05/.14	142	COREG TAB 3.125MG	62
COMBIPATCH DIS .05/.25	142	COREG TAB 6.25MG	62
COMBIVENT AER 20-100	197	CORGARD TAB 20MG	62
COMBIVIR TAB 150-300	27	CORGARD TAB 40MG	62
COMETRIQ KIT 100MG	42	CORGARD TAB 80MG	62
COMETRIQ KIT 140MG	42	CORIFACT KIT	172
COMETRIQ KIT 60MG	42	CORLANOR TAB 5MG	70
COMFORT ASSU MIS LANC 28G	123	CORLANOR TAB 7.5MG	70
COMFORT ASSU MIS LANC 33G	123	CORLOPAM INJ 10MG/ML	70
COMFORT MIS LANCETS	123	CORTANE-B LOT	212
COMFORTOUCH MIS LANCET	123	CORTEF TAB 10MG	145
COMPLERA TAB	27	CORTEF TAB 20MG	145
COMPLETENATE CHW	193	CORTEF TAB 5MG	145
COMPLETE NAT PAK DHA	193	CORTENEMA ENE 100MG	160
<i>compro sup 25mg</i>	156	CORTIFOAM AER 90MG	160
COMTAN TAB 200MG	90	<i>cortisone acetate tab 25 mg</i>	145
CONCEPT DHA CAP	193	CORTISPORIN CRE 0.5%	209
CONCEPT OB CAP	193	CORTISPORIN OIN 1%	209
CONCERTA TAB 18MG	99	CORVERT INJ 1MG/10ML	56
CONCERTA TAB 27MG	99	<i>corvita 150 tab</i>	189
CONCERTA TAB 36MG	99	CORVITE 150 TAB	189
CONCERTA TAB 54MG	99	CORVITE FE TAB	189
CONDYLOX GEL 0.5%	218	CORZIDE TAB 40-5MG	61
CONFIRM/MICR TES GLUCOSE	123	CORZIDE TAB 80-5MG	61
<i>constulose sol 10gm/15</i>	161	COSENTYX INJ 150MG/ML	178
CONTOUR TES BLD GLUC	123	COSENTYX INJ 300DOSE	178
CONTOUR TES NEXT	123	COSENTYX PEN INJ 150MG/ML	178
CONTRAVE TAB 8-90MG	134	COSENTYX PEN INJ 300DOSE	178
		COSMEGEN INJ 0.5MG	38
		COSOFT PF SOL	224

COSOPT SOL 22.3-6.8.....	224	CUROSURF SUS 120/1.5.....	202
<i>cosyntropin for inj 0.25 mg</i>	184	CUROSURF SUS 240/3ML.....	202
COTELLIC TAB 20MG.....	42	CUTIVATE LOT 0.05%	214
COTEMPLA TAB 17.3MG.....	99	CUVITRU INJ 2GM/10ML.....	179
COTEMPLA TAB 25.9MG.....	99	CUVITRU INJ 4GM/20ML.....	179
COTEMPLA TAB 8.6MG	99	CUVITRU INJ 8GM/40ML.....	179
COUMADIN TAB 10MG	170	CUVITRU SOL 1GM/5ML.....	179
COUMADIN TAB 1MG.....	170	CUVPOSA SOL 1MG/5ML.....	162
COUMADIN TAB 2.5MG.....	170	CVS ADVANCED TES GLUCOSE	123
COUMADIN TAB 2MG.....	170	CVS LANCETS MIS 21G.....	123
COUMADIN TAB 3MG.....	170	CVS LANCETS MIS 30G.....	123
COUMADIN TAB 4MG.....	170	CVS LANCETS MIS 33G.....	123
COUMADIN TAB 5MG.....	170	CVS LANCETS MIS ORIGINAL	123
COUMADIN TAB 6MG.....	170	CVS LANCETS MIS THIN 26G.....	123
COUMADIN TAB 7.5MG	170	CVS LANCETS MIS THIN 30G.....	123
COZAAR TAB 100MG.....	55	CVS LANCETS MIS THIN 33G.....	123
COZAAR TAB 25MG.....	55	<i>cvs nicotine dis 14mg/24h</i>	111
COZAAR TAB 50MG.....	55	<i>cvs nicotine dis 7mg/24hr</i>	111
CREON CAP 12000UNT	162	<i>cvs nicotine gum 2mg cinn</i>	111
CREON CAP 24000UNT	163	<i>cvs nicotine gum 2mgfruit</i>	111
CREON CAP 3000UNIT.....	162	<i>cvs nicotine gum 2mg mint</i>	111
CREON CAP 36000UNT	163	<i>cvs nicotine gum 2mg orig</i>	111
CREON CAP 6000UNIT.....	162	<i>cvs nicotine gum 4mg cinn</i>	111
CRESEMBA CAP 186 MG	25	<i>cvs nicotine gum 4mgfruit</i>	112
CRESEMBA INJ 372MG	25	<i>cvs nicotine gum 4mg mint</i>	111
CRESTOR TAB 10MG	59	<i>cvs nicotine gum 4mg orig</i>	111
CRESTOR TAB 20MG	59	<i>cvs nicotine loz 4mg mint</i>	112
CRESTOR TAB 40MG	59	<i>cvs nts dis step 1</i>	112
CRESTOR TAB 5MG.....	59	<i>cyanocobalamin inj 1000 mcg/ml</i>	190
CRINONE GEL 4% VAG.....	152	CYANOKIT INJ 5GM.....	133
CRINONE GEL 8% VAG.....	152	<i>cyclafem tab 1/35</i>	139
CRIXIVAN CAP 200MG.....	29	<i>cyclafem tab 7/7/7</i>	140
CRIXIVAN CAP 400MG.....	29	<i>cyclobenzaprine hcl tab 10 mg</i>	108
<i>cromolyn sodium ophth soln 4%</i>	223	<i>cyclobenzaprine hcl tab 5 mg</i>	108
<i>cromolyn sodium oral conc 100 mg/5ml</i>		<i>cyclobenzaprine hcl tab 7.5 mg</i>	108
.....	162	CYCLOGYL SOL 0.5% OP.....	226
<i>cromolyn sodium soln nebu 20 mg/2ml</i>		CYCLOGYL SOL 1% OP	226
.....	202	CYCLOGYL SOL 2% OP	226
<i>crotan lot 10%</i>	220	CYCLOMYDRIL SOL OP.....	226
<i>cryselle-28 tab 28 tabs</i>	139	<i>cyclopentolate hcl ophth soln 0.5%</i> ...	226
CRYSVITA INJ 10MG/ML	149	<i>cyclopentolate hcl ophth soln 1%</i>	226
CRYSVITA INJ 20MG/ML	149	<i>cyclopentolate hcl ophth soln 2%</i>	226
CRYSVITA INJ 30MG/ML	149	<i>cyclophosphamide cap 50 mg</i>	36
CUBICIN RF SOL 500MG	34	<i>cyclophosphamide for inj 1 gm</i>	36
CUBICIN SOL 500MG	34	<i>cyclophosphamide for inj 2 gm</i>	36
<i>cupric chloride inj 0.4 mg/ml</i>	190	<i>cyclophosphamide for inj 500 mg</i>	36
CUPRIMINE CAP 250MG.....	179	CYCLOPHOSPH CAP 25MG.....	36
<i>curity salin sol 0.9% irr</i>	166	CYCLOPHOSPH CAP 50MG.....	36

<i>cycloserine cap 250 mg</i>	30	DAKLINZA TAB 90MG	31
CYCLOSET TAB 0.8MG	119	DALIRESP TAB 250MCG	203
<i>cyclosporine cap 100 mg</i>	181	DALIRESP TAB 500MCG	203
<i>cyclosporine cap 25 mg</i>	181	DALVANCE SOL 500MG	34
<i>cyclosporine iv soln 50 mg/ml</i>	181	<i>danazol cap 100 mg</i>	141
<i>cyclosporine modified cap 100 mg</i>	182	<i>danazol cap 200 mg</i>	141
<i>cyclosporine modified cap 25 mg</i>	181	<i>danazol cap 50 mg</i>	141
<i>cyclosporine modified cap 50 mg</i>	182	DANTRIUM CAP 25MG	108
<i>cyclosporine modified oral soln 100</i>		DANTRIUM CAP 50MG	108
<i>mg/ml</i>	182	DANTRIUM IV INJ 20MG	108
CYFOLEX CAP	189	<i>dantrolene sodium cap 100 mg</i>	108
CYKLOKAPRON INJ 100MG/ML	175	<i>dantrolene sodium cap 25 mg</i>	108
CYMBALTA CAP 20MG.....	87	<i>dantrolene sodium cap 50 mg</i>	108
CYMBALTA CAP 30MG.....	87	<i>dapsone gel 5%</i>	207
CYMBALTA CAP 60MG.....	87	DAPTACEL INJ	183
<i>cyproheptadine hcl syrup 2 mg/5ml</i> ...198		<i>daptomycin for iv soln 500 mg</i>	34
<i>cyproheptadine hcl tab 4 mg</i>	198	DAPTOMYCIN SOL 350MG.....	34
CYRAMZA INJ 100/10ML	44	DARAPRIM TAB 25MG	27
CYRAMZA INJ 500/50ML	44	<i>darifenacin hydrobromide tab er 24hr 15</i>	
<i>cyred tab</i>	139	<i>mg (base equiv)</i>	167
CYSTADANE POW.....	149	<i>darifenacin hydrobromide tab er 24hr 7.5</i>	
CYSTAGON CAP 150MG	149	<i>mg (base equiv)</i>	167
CYSTAGON CAP 50MG	149	DARZALEX SOL 100MG/5M	44
CYSTARAN SOL 0.44%	225	DARZALEX SOL 400MG/20.....	44
<i>cysteine hcl inj 50 mg/ml</i>	185	<i>dasetta tab 1/35</i>	139
<i>cytarabine inj 20 mg/ml</i>	39	<i>dasetta tab 7/7/7</i>	140
<i>cytarabine inj pf 100 mg/ml</i>	39	<i>daunorubicin hcl inj 5 mg/ml (base</i>	
<i>cytarabine inj pf 20 mg/ml</i>	39	<i>equiv)</i>	38
CYTOGAM INJ.....	179	DAUNORUBICIN INJ 20MG/4ML	38
CYTOMEL TAB 25MCG.....	152	DAUNORUBICIN INJ 50MG	38
CYTOMEL TAB 50MCG.....	152	DAXBIA CAP 333MG.....	18
CYTOMEL TAB 5MCG	152	DAYPRO TAB 600MG.....	4
CYTOTEC TAB 100MCG	163	<i>daysee tab</i>	136
CYTOTEC TAB 200MCG	163	DAYTRANA DIS 10MG/9HR.....	99
CYTOVENE INJ 500MG.....	31	DAYTRANA DIS 15MG/9HR.....	99
<i>cytra k gra crystals</i>	166	DAYTRANA DIS 20MG/9HR.....	99
D		DAYTRANA DIS 30MG/9HR.....	99
D-CARE BLOOD TES GLUCOSE.....	123	DDAVP INJ 4MCG/ML.....	155
D.H.E. 45 INJ 1MG/ML.....	105	DDAVP SOL 0.01%.....	155
D10W/NACL INJ 0.2%	185	DDAVP SPR 0.01%.....	155
D10W/NACL INJ 0.225%.....	185	DDAVP TAB 0.1MG	155
D5W/LYTES INJ #48	185	DDAVP TAB 0.2MG	155
D5W/NACL INJ 0.3%.....	185	DEBACTEROL SOL 30-50%.....	220
<i>dacarbazine for inj 100 mg</i>	36	<i>deblitane tab 0.35mg</i>	140
<i>dacarbazine for inj 200 mg</i>	37	<i>decitabine for inj 50 mg</i>	39
DACOGEN INJ 50MG	39	<i>deferoxamine mesylate for inj 2 gm</i> ..176	
DAKLINZA TAB 30MG	31	<i>deferoxamine mesylate for inj 500 mg</i>	
DAKLINZA TAB 60MG	31	.....	176

DEFITELIO INJ 200/2.5.....	168	<i>desipramine hcl tab 10 mg.....</i>	88
DELESTROGEN INJ 10MG/ML.....	142	<i>desipramine hcl tab 150 mg.....</i>	88
DELESTROGEN INJ 20MG/ML.....	142	<i>desipramine hcl tab 25 mg.....</i>	88
DELESTROGEN INJ 40MG/ML.....	142	<i>desipramine hcl tab 50 mg.....</i>	88
<i>deltasone tab 20mg.....</i>	145	<i>desipramine hcl tab 75 mg.....</i>	88
<i>delyla tab 0.1-0.02.....</i>	137	<i>desloratadine tab 5 mg.....</i>	198
DELZICOL CAP 400MG.....	160	<i>desloratadine tab orally disintegrating</i>	
DEMADEX TAB 10MG.....	69	<i>2.5 mg.....</i>	198
DEMADEX TAB 20MG.....	69	<i>desloratadine tab orally disintegrating 5</i>	
<i>demeclocycline hcl tab 150 mg.....</i>	24	<i>mg.....</i>	198
<i>demeclocycline hcl tab 300 mg.....</i>	24	<i>desmopressin acetate inj 4 mcg/ml ...</i>	155
DEMEROL INJ 100/2ML.....	8	<i>desmopressin acetate nasal spray soln</i>	
DEMEROL INJ 100MG/ML.....	8	<i>0.01%.....</i>	155
DEMEROL INJ 25MG/0.5.....	8	<i>desmopressin acetate nasal spray soln</i>	
DEMEROL INJ 25MG/ML.....	8	<i>0.01% (refrigerated).....</i>	155
DEMEROL INJ 50MG/ML.....	8	<i>desmopressin acetate tab 0.1 mg.....</i>	155
DEMEROL INJ 75MG/1.5.....	8	<i>desmopressin acetate tab 0.2 mg.....</i>	155
DEMEROL INJ 75MG/ML.....	8	DESOGEN-28 TAB.....	139
DEMSER CAP 250MG.....	70	<i>desogest-eth estrad & eth estrad tab</i>	
DENAVIR CRE 1%.....	218	<i>0.15-0.02/0.01 mg(21/5).....</i>	136
DEPACON INJ 100MG/ML.....	77	DESONATE GEL 0.05%.....	213
DEPAKENE CAP 250MG.....	77	DESONDIE POW.....	184
DEPAKENE SOL 250/5ML.....	78	<i>desonide cream 0.05%.....</i>	213
DEPAKOTE ER TAB 250MG.....	78	<i>desonide lotion 0.05%.....</i>	213
DEPAKOTE ER TAB 500MG.....	78	<i>desonide oint 0.05%.....</i>	214
DEPAKOTE SPR CAP 125MG.....	78	DESONIDE POW MICRONIZ.....	184
DEPAKOTE TAB 125MG DR.....	78	DESOWEN CRE 0.05%.....	214
DEPAKOTE TAB 250MG DR.....	78	DESOWEN LOT 0.05%.....	214
DEPAKOTE TAB 500MG DR.....	78	<i>desoximetasone cream 0.05%.....</i>	214
DEPEN TITRA TAB 250MG.....	179	<i>desoximetasone cream 0.25%.....</i>	213
DEPO-ESTRADI INJ 5MG/ML.....	142	<i>desoximetasone gel 0.05%.....</i>	213
DEPO-MEDROL INJ 20MG/ML.....	145	<i>desoximetasone oint 0.05%.....</i>	214
DEPO-MEDROL INJ 40MG/ML.....	145	<i>desoximetasone oint 0.25%.....</i>	213
DEPO-MEDROL INJ 80MG/ML.....	145	<i>desoximetasone spray 0.25%.....</i>	213
DEPO-PROVERA INJ 150MG/ML.....	137	DESOWYN TAB 5MG.....	99
DEPO-PROVERA INJ 400/ML.....	41	<i>desvenlafaxine succinate tab er 24hr 100</i>	
DEPO-SQ PROV INJ 104.....	137	<i>mg (base equiv).....</i>	87
DEPO-TESTOST INJ 100MG/ML.....	115	<i>desvenlafaxine succinate tab er 24hr 25</i>	
DEPO-TESTOST INJ 200MG/ML.....	115	<i>mg (base equiv).....</i>	87
DERMA-SMOOTH OIL /FS BODY.....	213	<i>desvenlafaxine succinate tab er 24hr 50</i>	
DERMA-SMOOTH OIL /FS SCLP.....	213	<i>mg (base equiv).....</i>	87
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EMEND CAP 40MG.....	156	<i>enoxaparin sodium inj 150 mg/ml</i>	169
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EMEND SOL 150MG.....	156	<i>enoxaparin sodium inj 30 mg/0.3ml</i>	168
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<i>tab 5-12.5 mg</i>	49	<i>ephedrine sulfate inj 50 mg/ml</i>	74
<i>enalapril maleate tab 10 mg</i>	50	EPICERAM EMU.....	218
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<i>epinephrine inj 30 mg/30ml</i>	197	<i>eql nicotine loz 4mg mint</i>	112
<i>epinephrine pf inj 1 mg/ml</i>	197	EQL TRUETEST TES BLD GLUC.....	124
<i>epinephrine pf soln prefilled syringe 1</i>		<i>eq nicotine dis 14mg/24h</i>	112
<i>mg/10ml (0.1 mg/ml)</i>	197	<i>eq nicotine dis 21mg/24h</i>	112
<i>epinephrine solution auto-injector 0.15</i>		<i>eq nicotine dis 7mg/24hr</i>	112
<i>mg/0.15ml (1:1000)</i>	197	<i>eq nicotine gum 2mg cinn</i>	112
<i>epinephrine solution auto-injector 0.15</i>		<i>eq nicotine gum 2mgfruit</i>	112
<i>mg/0.3ml (1:2000)</i>	197	<i>eq nicotine gum 2mg mint</i>	112
<i>epinephrine solution auto-injector 0.3</i>		<i>eq nicotine gum 2mg orig</i>	112
<i>mg/0.3ml (1:1000)</i>	197	<i>eq nicotine gum 4mg cinn</i>	112
EPIPEN-JR INJ 2-PAK.....	197	<i>eq nicotine gum 4mgfruit</i>	112
EPIPEN 2-PAK INJ 0.3MG	197	<i>eq nicotine gum 4mg mint</i>	112
<i>epirubicin hcl iv soln 200 mg/100ml (2</i>		<i>eq nicotine gum 4mg orig</i>	112
<i>mg/ml)</i>	38	<i>eq nicotine gum 4mg ref</i>	112
<i>epirubicin hcl iv soln 50 mg/25ml (2</i>		<i>eq nicotine gum 4mg strt</i>	112
<i>mg/ml)</i>	38	<i>eq nicotine loz 4mg chry</i>	112
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<i>epitol tab 200mg</i>	78	EQUETRO CAP 200MG	107
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EPIVIR HBV TAB 100MG	31	ERAXIS INJ 100MG	26
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EPIVIR TAB 300MG	29	ERBITUX INJ 200MG	44
<i>eplerenone tab 25 mg</i>	51	<i>ergocalciferol cap 50000 unit</i>	191
<i>eplerenone tab 50 mg</i>	51	<i>ergoloid mesylates tab 1 mg</i>	107
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EPOGEN INJ 2000/ML.....	171	<i>ergotamine w/ caffeine tab 1-100 mg</i>	105
EPOGEN INJ 20000/ML	171	ERIVEDGE CAP 150MG	44
EPOGEN INJ 3000/ML.....	171	ERLEADA TAB 60MG.....	40
EPOGEN INJ 4000/ML.....	171	<i>errin tab 0.35mg</i>	140
<i>epoprostenol sodium for inj 0.5 mg</i>	73	ERTACZO CRE 2%	210
<i>epoprostenol sodium for inj 1.5 mg</i>	73	ERWINAZE INJ 10000UNT.....	44
<i>eprosartan mesylate tab 600 mg</i>	55	<i>ery-tab tab 250mg ec</i>	20
<i>eptifibatide iv soln 200 mg/100ml (2</i>		<i>ery-tab tab 333mg ec</i>	20
<i>mg/ml)</i>	177	<i>ery-tab tab 500mg ec</i>	20
<i>eptifibatide iv soln 20 mg/10ml (2</i>		ERYGEL GEL 2%	207
<i>mg/ml)</i>	177	<i>ery pad 2%</i>	207
<i>eptifibatide iv soln 75 mg/100ml (0.75</i>		ERYPED SUS 200/5ML	20
<i>mg/ml)</i>	177	ERYPED SUS 400/5ML	20
EPZICOM TAB 600-300.....	27	ERYTHROCIN INJ 500MG	20
EQL LANCETS MIS 21G COLR	124	<i>erythrocin tab 250mg</i>	20
EQL LANCETS MIS 33G COLR	124	<i>erythromycin ethylsuccinate for susp 200</i>	
EQL LANCETS MIS THIN 26G.....	124	<i>mg/5ml</i>	20
EQL LANCETS MIS THIN 30G.....	124	<i>erythromycin ethylsuccinate tab 400 mg</i>	
<i>eql nicotine gum 2mg</i>	112	.....	20
<i>eql nicotine gum 4mg</i>	112	<i>erythromycin gel 2%</i>	207

<i>erythromycin ophth oint 5 mg/gm</i>	222	<i>estradiol tab 0.5 mg</i>	142
<i>erythromycin pads 2%</i>	207	<i>estradiol tab 1 mg</i>	142
<i>erythromycin soln 2%</i>	207	<i>estradiol tab 2 mg</i>	143
<i>erythromycin tab 250 mg</i>	20	<i>estradiol td patch twice weekly 0.025 mg/24hr</i>	143
<i>erythromycin tab 500 mg</i>	20	<i>estradiol td patch twice weekly 0.0375 mg/24hr</i>	143
<i>erythromycin w/ delayed release particles cap 250 mg</i>	20	<i>estradiol td patch twice weekly 0.05 mg/24hr</i>	143
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ESCAVITE D CHW	191	<i>estradiol td patch weekly 0.025 mg/24hr</i>	143
<i>escavite lq dro 0.25-6mg</i>	191	<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i>	143
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	85	<i>estradiol td patch weekly 0.05 mg/24hr</i>	143
<i>escitalopram oxalate tab 10 mg (base equiv)</i>	85	<i>estradiol td patch weekly 0.06 mg/24hr</i>	143
<i>escitalopram oxalate tab 20 mg (base equiv)</i>	85	<i>estradiol td patch weekly 0.075 mg/24hr</i>	143
<i>escitalopram oxalate tab 5 mg (base equiv)</i>	85	<i>estradiol vaginal cream 0.1 mg/gm</i> ...	144
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ESGIC TAB	4	<i>estradiol valerate im in oil 40 mg/ml</i> .	142
ESKATA SOL 40%	211	ESTRING MIS 2MG.....	144
<i>esmolol hcl inj 100 mg/10ml</i>	62	<i>estrog/mtest tab 1.25-2.5</i>	143
ESMOLOL HCL SOL 2000/100.....	62	ESTROGEL GEL.....	143
ESMOLOL HCL SOL 2500/250.....	62	<i>estropipate tab 0.75 mg</i>	143
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<i>esomeprazole magnesium cap delayed release 20 mg (base eq)</i>	163	<i>eszopiclone tab 1 mg</i>	104
<i>esomeprazole magnesium cap delayed release 40 mg (base eq)</i>	163	<i>eszopiclone tab 2 mg</i>	104
<i>esomeprazole sodium for intravenous soln 20 mg (base equiv)</i>	163	<i>eszopiclone tab 3 mg</i>	104
<i>esomeprazole sodium for intravenous soln 40 mg (base equiv)</i>	163	<i>ethacrynate sodium for inj 50 mg</i>	69
<i>estarylla tab 0.25-35</i>	139	<i>ethacrynic acid tab 25 mg</i>	69
<i>estazolam tab 1 mg</i>	103	<i>ethambutol hcl tab 100 mg</i>	30
<i>estazolam tab 2 mg</i>	103	<i>ethambutol hcl tab 400 mg</i>	30
<i>esterified estrogens & methyltestosterone tab 1.25-2.5 mg</i> .	142	ETHAMOLIN INJ 5%	70
<i>est estrogen tab mtest hs</i>	142	<i>ethosuximide cap 250 mg</i>	78
ESTRACE TAB 0.5MG.....	142	<i>ethosuximide soln 250 mg/5ml</i>	78
ESTRACE TAB 1MG.....	142	<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	140
ESTRACE TAB 2MG.....	142	ETHYOL INJ 500MG.....	44
ESTRACE VAG CRE 0.01%.....	144	<i>etidronate disodium tab 200 mg</i>	135
<i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i>	142	<i>etidronate disodium tab 400 mg</i>	135
<i>estradiol & norethindrone acetate tab 1-0.5 mg</i>	142		

<i>etodolac cap 200 mg</i>	5	EXFORGEH/10- TAB 160-25	53
<i>etodolac cap 300 mg</i>	5	EXFORGEH/10- TAB 320-25	53
<i>etodolac tab 400 mg</i>	5	EXFORGEH/5- TAB 160-12.5	53
<i>etodolac tab 500 mg</i>	5	EXFORGEH/5- TAB 160-25.....	53
<i>etodolac tab er 24hr 400 mg</i>	5	EXFORGE TAB 10-160MG.....	52
<i>etodolac tab er 24hr 500 mg</i>	5	EXFORGE TAB 10-320MG.....	52
<i>etodolac tab er 24hr 600 mg</i>	5	EXFORGE TAB 5-160MG	52
<i>etomidate iv soln 2 mg/ml</i>	74	EXFORGE TAB 5-320MG	52
ETOPOPHOS INJ 100MG	47	EXJADE TAB 125MG	176
<i>etoposide cap 50 mg</i>	47	EXJADE TAB 250MG	176
<i>etoposide inj 100 mg/5ml (20 mg/ml)</i> .	47	EXJADE TAB 500MG	176
<i>etoposide inj 1 gm/50ml (20 mg/ml)</i> ...	47	EXODERM LOT 25-1%	210
<i>etoposide inj 500 mg/25ml (20 mg/ml)</i>	47	EXONDYS 51 SOL 100/2ML	102
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EUCRISA OIN 2%	212	EXTAVIA INJ 0.3MG	107
EUFLEXXA INJ 10MG/ML	16	EXTINA AER 2%	210
EURAX CRE 10%.....	220	EYLEA INJ 2/0.05ML.....	225
EURAX LOT 10%.....	220	EZ-LETS 21G MIS LANCETS.....	125
EVAMIST SPR 1.53MG	143	EZ-LETS 23G MIS LANCETS.....	125
EVEKEO TAB 10MG	99	EZ-LETS 26G MIS LANCETS.....	125
EVEKEO TAB 5MG	99	EZ-LETS 28G MIS LANCETS.....	125
EVENCARE + TES BLD GLUC	124	EZ-LETS 30G MIS LANCETS.....	125
EVENCARE G2 TES.....	124	<i>ezetimibe-simvastatin tab 10-10 mg</i> ...	59
EVENCARE G3 TES.....	124	<i>ezetimibe-simvastatin tab 10-20 mg</i> ...	59
EVENCARE TES BLD GLUC.....	124	<i>ezetimibe-simvastatin tab 10-40 mg</i> ...	59
EVENCARE TES MINI	124	<i>ezetimibe-simvastatin tab 10-80 mg</i> ...	59
EVISTA TAB 60MG	152	<i>ezetimibe tab 10 mg</i>	58
EVIVO LIQ	162	EZ SMART MIS LANCETS.....	124
EVOCLIN AER 1%	207	EZ SMART PLS TES BLD GLUC	124
EVOLUTION TES AUTOCODE.....	124	EZ SMART TES BLD GLUC	125
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EVOTAZ TAB 300-150	27	FABIOR AER 0.1%	207
EVOXAC CAP 30MG	164	FABRAZYME INJ 35MG.....	149
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EXACTECH TES R-S-G	124	<i>fallback tab 1.5mg</i>	136
EXACTUSS LIQ	199	<i>falmira tab</i>	138
EXALGO TAB 12MG.....	9	<i>famciclovir tab 125 mg</i>	32
EXALGO TAB 16MG.....	9	<i>famciclovir tab 250 mg</i>	32
EXALGO TAB 32MG.....	9	<i>famciclovir tab 500 mg</i>	32
EXALGO TAB 8MG	9	<i>famotidine for susp 40 mg/5ml</i>	159
EXELDERM CRE 1%.....	210	<i>famotidine inj 200 mg/20ml</i>	159
EXELDERM SOL 1%.....	210	<i>famotidine inj 20 mg/2ml</i>	159
EXELON DIS 13.3/24	83	<i>famotidine inj 40 mg/4ml</i>	159
EXELON DIS 4.6MG/24.....	83	<i>famotidine in nacl 0.9% iv soln 20</i>	
EXELON DIS 9.5MG/24.....	83	<i>mg/50ml</i>	159
<i>exemestane tab 25 mg</i>	40	<i>famotidine tab 20 mg</i>	159
EXFORGEH/10- TAB 160-12.5	53	<i>famotidine tab 40 mg</i>	159

FANAPT PAK	93	<i>fenofibrate micronized cap 200 mg</i>	58
FANAPT TAB 10MG.....	93	<i>fenofibrate micronized cap 43 mg</i>	58
FANAPT TAB 12MG.....	93	<i>fenofibrate micronized cap 67 mg</i>	58
FANAPT TAB 1MG	93	<i>fenofibrate tab 120 mg</i>	58
FANAPT TAB 2MG	93	<i>fenofibrate tab 145 mg</i>	58
FANAPT TAB 4MG	93	<i>fenofibrate tab 160 mg</i>	58
FANAPT TAB 6MG	93	<i>fenofibrate tab 40 mg</i>	58
FANAPT TAB 8MG	93	<i>fenofibrate tab 48 mg</i>	58
FANATREX SUS 25MG/ML	78	<i>fenofibrate tab 54 mg</i>	58
FARESTON TAB 60MG	40	<i>fenofibric acid tab 105 mg</i>	58
FARXIGA TAB 10MG	120	<i>fenofibric acid tab 35 mg</i>	58
FARXIGA TAB 5MG.....	120	FENOGLIDE TAB 120MG	58
FARYDAK CAP 10MG	44	FENOGLIDE TAB 40MG	58
FARYDAK CAP 15MG	44	<i>fenoprofen calcium cap 400 mg</i>	5
FARYDAK CAP 20MG	44	<i>fenoprofen calcium tab 600 mg</i>	5
FASENRA INJ 30MG/ML.....	202	FENOPROFEN CAP 200MG.....	5
FASLODEX INJ 250/5ML	40	FENT/BUPIVAC INJ 0.20/125.....	9
FASTCLIX MIS LANCETS	125	FENT/ROPIVAC INJ 0.4/200	9
FAZACLO TAB 100 ODT	93	FENT/ROPIVAC INJ NAACL.....	9
FAZACLO TAB 12.5 ODT	93	FENTANYL CIT INJ 100/2ML.....	9
FAZACLO TAB 150 ODT	93	FENTANYL CIT INJ 100MCG	9
FAZACLO TAB 200 ODT	93	FENTANYL CIT INJ 250MCG	9
FAZACLO TAB 25MG ODT.....	93	FENTANYL CIT INJ 50MCG/ML.....	9
FEIBA INJ	173	FENTANYL CIT INJ BUPIVACA.....	9
<i>felbamate susp 600 mg/5ml</i>	78	<i>fantanyl citrate lozenge on a handle 1200</i>	9
<i>felbamate tab 400 mg</i>	78	<i>mcg</i>	9
<i>felbamate tab 600 mg</i>	78	<i>fantanyl citrate lozenge on a handle 1600</i>	9
FELBATOL SUS 600/5ML.....	78	<i>mcg</i>	9
FELBATOL TAB 400MG.....	78	<i>fantanyl citrate lozenge on a handle 200</i>	9
FELBATOL TAB 600MG.....	78	<i>mcg</i>	9
FELDENE CAP 10MG.....	5	<i>fantanyl citrate lozenge on a handle 400</i>	9
FELDENE CAP 20MG.....	5	<i>mcg</i>	9
<i>felodipine tab er 24hr 10 mg</i>	64	<i>fantanyl citrate lozenge on a handle 600</i>	9
<i>felodipine tab er 24hr 2.5 mg</i>	64	<i>mcg</i>	9
<i>felodipine tab er 24hr 5 mg</i>	64	<i>fantanyl citrate lozenge on a handle 800</i>	9
FEMARA TAB 2.5MG	40	<i>mcg</i>	9
FEMCAP MIS 22MM	137	<i>fantanyl citrate pf soln cartridge 100</i>	9
FEMCAP MIS 26MM	137	<i>mcg/2ml</i>	9
FEMCAP MIS 30MM	137	<i>fantanyl citrate preservative free (pf) inj</i>	10
FEMHRT TAB 0.5-2.5	142	<i>1000 mcg/20ml</i>	10
FEM PH GEL	166	<i>fantanyl citrate preservative free (pf) inj</i>	9
FEMRING MIS 0.05/24H.....	144	<i>100 mcg/2ml</i>	9
FEMRING MIS 0.1MG/24	144	<i>fantanyl citrate preservative free (pf) inj</i>	10
<i>femynor tab 0.25-35</i>	139	<i>2500 mcg/50ml</i>	10
<i>fenofibrate cap 150 mg</i>	58	<i>fantanyl citrate preservative free (pf) inj</i>	9
<i>fenofibrate cap 50 mg</i>	58	<i>250 mcg/5ml</i>	9
<i>fenofibrate micronized cap 130 mg</i>	58	<i>fantanyl citrate preservative free (pf) inj</i>	9
<i>fenofibrate micronized cap 134 mg</i>	58	<i>500 mcg/10ml</i>	9

FENTANYL CIT SOL 10MCG/ML.....	9	FIORINAL CAP.....	4
FENTANYL INJ 50MCG/ML.....	10	FIRAZYR INJ 30MG/3ML.....	175
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<i>fentanyl td patch 72hr 12 mcg/hr</i>	10	FIRMAGON INJ 80MG.....	40
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GLUCOVANCE TAB 2.5-500	116	<i>gnp nicotine gum 2mg orig</i>	112
GLUCOVANCE TAB 5-500MG.....	116	<i>gnp nicotine gum 4mg mint</i>	112
GLUMETZA TAB 1000MG.....	116	<i>gnp nicotine gum 4mg orig</i>	112
GLUMETZA TAB 500MG.....	116	<i>gnp nicotine loz 4mg mint</i>	112
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GONAL-F INJ 450UNIT	144	HALAVEN INJ 1MG/2ML	47
GONAL-F RFF INJ 300/0.5	144	HALCION TAB 0.25MG	103
GONAL-F RFF INJ 450/0.75	144	HALDOL DECAN INJ 100MG/ML	96
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GOPRELTO SOL 40MG/ML	217	<i>halobetasol propionate oint 0.05%</i>	216
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<i>granisetron hcl inj 0.1 mg/ml</i>	156	<i>haloperidol lactate inj 5 mg/ml</i>	96
<i>granisetron hcl inj 1 mg/ml</i>	156	<i>haloperidol lactate oral conc 2 mg/ml</i> ..	96
<i>granisetron hcl inj 4 mg/4ml (1 mg/ml)</i>	156	<i>haloperidol tab 0.5 mg</i>	96
<i>granisetron hcl tab 1 mg</i>	156	<i>haloperidol tab 10 mg</i>	96
GRANIX INJ 300/0.5	171	<i>haloperidol tab 1 mg</i>	96
GRANIX INJ 480/0.8	171	<i>haloperidol tab 20 mg</i>	97
GRASTEK SUB 2800BAU	178	<i>haloperidol tab 2 mg</i>	96
<i>green glo mis 1.5mg</i>	225	<i>haloperidol tab 5 mg</i>	96
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<i>griseofulvin ultramicrosize tab 125 mg</i>	26	HAVRIX INJ 720UNIT.....	183
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<i>guanfacine hcl tab 1 mg</i>	51	HEALON GV INJ 14MG/ML	226
<i>guanfacine hcl tab 2 mg</i>	51	HEALON INJ 10MG/ML	226
<i>guanfacine hcl tab er 24hr 1 mg (base equiv)</i>	100	HEALTHPRO TES STRIPS.....	126
<i>guanfacine hcl tab er 24hr 2 mg (base equiv)</i>	100	<i>heather tab 0.35mg</i>	140
<i>guanfacine hcl tab er 24hr 3 mg (base equiv)</i>	100	HECTOROL INJ 2MCG/ML	149
<i>guanfacine hcl tab er 24hr 4 mg (base equiv)</i>	100	HECTOROL INJ 4MCG/2ML	149
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		<i>hematogen cap</i>	190
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HEMLIBRA INJ 60/0.4.....	173	HIZENTRA INJ 1GM/5ML	180
<i>hemocyte-f tab</i>	190	HIZENTRA INJ 2GM/10ML	180
HEMOFIL M INJ 1000UNIT.....	173	HIZENTRA INJ 4GM/20ML	180
HEMOFIL M INJ 1700UNIT.....	173	HLTHY ACCNTS MIS LANC 30G	126
HEMOFIL M INJ 250UNIT	173	<i>hm nicotine dis 14mg/24h</i>	112
HEMOFIL M INJ 500UNIT	173	<i>hm nicotine dis 21mg/24h</i>	112
HEPAGAM B INJ	180	<i>hm nicotine gum 2mg mint</i>	112
<i>heparin sodium (porcine) 100 unit/ml in</i>		<i>hm nicotine gum 4mg mint</i>	112
<i>d5w</i>	169	<i>hm nicotine loz 4mg mint</i>	112
<i>heparin sodium (porcine) 2 unit/ml in</i>		<i>homatropaire sol 5% op</i>	226
<i>sodium chloride 0.9%</i>	169	<i>homatropine hbr ophth soln 5%</i>	226
<i>heparin sodium (porcine) 40 unit/ml in</i>		HORIZANT TAB 300MG ER	110
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<i>heparin sodium (porcine) lock flush iv</i>		HUMALOG MIX INJ 50/50	118
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<i>heparin sodium (porcine) pf inj 5000</i>		HUMATE-P SOL 500-1200	173
<i>unit/0.5ml</i>	169	HUMATROPE INJ 12MG	148
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HUMULIN N PN INJ U-100	119	hydrocortisone acetate suppos 30 mg	165
HUMULIN PEN INJ 70/30.....	119	hydrocortisone acetate w/ pramoxine	
HUMULIN R INJ U-100	119	rectal cream 1-1%	165
HUMULIN R INJ U-500	119	hydrocortisone acetate w/ pramoxine	
HYALGAN INJ 20MG/2ML	16	rectal cream 2.5-1%	165
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HYCAMTIN CAP 0.25MG.....	47	base cream 0.1%	215
HYCAMTIN CAP 1MG	47	hydrocortisone butyrate oint 0.1% ...	215
HYCAMTIN INJ 4MG	47	hydrocortisone butyrate soln 0.1%....	215
HYCLODEX SOL 0.012%	218	hydrocortisone cream 1%	214
hydralazine hcl inj 20 mg/ml	70	hydrocortisone cream 2.5%	214
hydralazine hcl tab 100 mg	70	hydrocortisone enema 100 mg/60ml .	160
hydralazine hcl tab 10 mg.....	70	hydrocortisone lotion 2.5%	214
hydralazine hcl tab 25 mg.....	70	hydrocortisone oint 1%	214
hydralazine hcl tab 50 mg.....	70	hydrocortisone oint 2.5%.....	214
HYDREA CAP 500MG	44	hydrocortisone rectal cream 1%	165
hydrochlorothiazide cap 12.5 mg	70	hydrocortisone rectal cream 2.5%.....	165
hydrochlorothiazide tab 12.5 mg.....	70	hydrocortisone tab 10 mg	146
hydrochlorothiazide tab 25 mg	70	hydrocortisone tab 20 mg	146
hydrochlorothiazide tab 50 mg	70	hydrocortisone tab 5 mg.....	146
hydrocodone-acetaminophen soln 7.5-		hydrocortisone valerate cream 0.2% .	215
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hydrocodone-acetaminophen tab 10-325		hydrocortiso oin absorbas	214
mg	10	hydrogen peroxide soln 30%	212
hydrocodone-acetaminophen tab 2.5-325		HYDROM/ROPIV SOL 2/250ML.....	10
mg	10	hydromet syp 5-1.5/5	199
hydrocodone-acetaminophen tab 5-300		hydromorphone hcl inj 1 mg/ml.....	10
mg	10	hydromorphone hcl inj 2 mg/ml.....	10
hydrocodone-acetaminophen tab 5-325		hydromorphone hcl inj 4 mg/ml.....	10
mg	10	hydromorphone hcl liqd 1 mg/ml	10
hydrocodone-acetaminophen tab 7.5-300		hydromorphone hcl preservative free (pf)	
mg	10	inj 10 mg/ml.....	10
hydrocodone-acetaminophen tab 7.5-325		hydromorphone hcl tab 2 mg	10
mg	10	hydromorphone hcl tab 4 mg	10
hydrocodone-ibuprofen tab 10-200 mg	10	hydromorphone hcl tab 8 mg	11
hydrocodone-ibuprofen tab 5-200 mg..	10	hydromorphone hcl tab er 24hr deter	12
hydrocodone-ibuprofen tab 7.5-200 mg		mg	11
.....	10	hydromorphone hcl tab er 24hr deter	16
hydrocodone w/ homatropine syrup 5-		mg	11
1.5 mg/5ml.....	199	hydromorphone hcl tab er 24hr deter	32
hydrocodone w/ homatropine tab 5-1.5		mg	11

<i>hydromorphone hcl tab er 24hr deter 8 mg</i>	11	HYPERRHO S/D INJ 300MCG	180
HYDROMORPHON INJ NACL.....	10	HYPERRHO S/D INJ 50MCG	180
HYDROMORPHON SUP 3MG.....	10	HYPERSAL NEB 3.5%	202
<i>hydroxocobalamin inj 1000 mcg/ml</i> ...	191	HYPERSAL NEB 7%	202
<i>hydroxychloroquine sulfate tab 200 mg</i>	179	HYPERTET S/D INJ 250/ML.....	180
<i>hydroxyprogesterone caproate im in oil 1.25 gm/5ml</i>	41	HYQVIA INJ 10-800.....	180
<i>hydroxyurea cap 500 mg</i>	44	HYQVIA INJ 2.5-200.....	180
<i>hydroxyzine hcl im soln 25 mg/ml</i>	198	HYQVIA INJ 20-1600	180
<i>hydroxyzine hcl im soln 50 mg/ml</i>	198	HYQVIA INJ 30-2400	180
<i>hydroxyzine hcl syrup 10 mg/5ml</i>	198	HYQVIA INJ 5-400	180
<i>hydroxyzine hcl tab 10 mg</i>	198	HYSINGLA ER TAB 100 MG.....	11
<i>hydroxyzine hcl tab 25 mg</i>	198	HYSINGLA ER TAB 120 MG.....	11
<i>hydroxyzine hcl tab 50 mg</i>	198	HYSINGLA ER TAB 20 MG	11
<i>hydroxyzine pamoate cap 100 mg</i>	199	HYSINGLA ER TAB 30 MG	11
<i>hydroxyzine pamoate cap 25 mg</i>	199	HYSINGLA ER TAB 40 MG	11
<i>hydroxyzine pamoate cap 50 mg</i>	199	HYSINGLA ER TAB 60 MG	11
HYLAFEM SUP.....	185	HYSINGLA ER TAB 80 MG	11
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HYLENEX INJ 150 UNIT.....	107	I	
HYLIRA GEL 0.2%	216	<i>ibandronate sodium iv soln 3 mg/3ml (base equivalent)</i>	135
HYLIRA LOT 0.1%	216	<i>ibandronate sodium tab 150 mg (base equivalent)</i>	135
HYMOVIS INJ 24MG/3ML	16	IBRANCE CAP 100MG	42
<i>hyolev mb tab 81mg</i>	166	IBRANCE CAP 125MG	42
<i>hyophen tab</i>	166	IBRANCE CAP 75MG.....	42
<i>hyoscyamine sulfate elixir 0.125 mg/5ml</i>	158	<i>ibudone tab 10-200mg</i>	11
<i>hyoscyamine sulfate soln 0.125 mg/ml</i>	158	<i>ibudone tab 5-200mg</i>	11
<i>hyoscyamine sulfate tab 0.125 mg</i>	158	<i>ibuprofen lysine iv soln 10 mg/ml (base equivalent)</i>	70
<i>hyoscyamine sulfate tab disint 0.125 mg</i>	158	<i>ibuprofen susp 100 mg/5ml</i>	5
<i>hyoscyamine sulfate tab er 12hr 0.375 mg</i>	158	<i>ibuprofen tab 400 mg</i>	5
<i>hyoscyamine sulfate tab sl 0.125 mg</i>	159	<i>ibuprofen tab 600 mg</i>	5
<i>hyosyne dro 0.125/ml</i>	159	<i>ibuprofen tab 800 mg</i>	5
<i>hyosyne elx 0.125/5</i>	159	<i>ibu tab 400mg</i>	5
HYPER-SAL NEB 7%	202	<i>ibu tab 600mg</i>	5
HYPERHEP B INJ S/D	180	<i>ibu tab 800mg</i>	5
<i>hyperlyte-cr inj</i>	185	<i>ibutilide fumarate inj 1 mg/10ml</i>	56
HYPERRAB INJ 1500UNIT	180	<i>icar-c plus tab</i>	190
HYPERRAB INJ 300UNIT.....	180	ICLUSIG TAB 15MG.....	42
HYPERRAB S/D INJ 150/ML	180	ICLUSIG TAB 45MG.....	42
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		IDAMYCIN PFS INJ 20/20ML.....	38
		IDAMYCIN PFS INJ 5MG/5ML.....	38
		<i>idarubicin hcl iv inj 10 mg/10ml (1 mg/ml)</i>	38

<i>idarubicin hcl iv inj 20 mg/20ml (1 mg/ml)</i>	38	IMITREX INJ 4MG/0.5.....	105
<i>idarubicin hcl iv inj 5 mg/5ml (1 mg/ml)</i>	38	IMITREX INJ 6MG/0.5.....	105
IDELVION SOL 1000UNIT	173	IMITREX SPR 20MG/ACT	105
IDELVION SOL 2000UNIT.....	173	IMITREX SPR 5MG/ACT.....	105
IDELVION SOL 250UNIT	173	IMITREX TAB 100MG	106
IDELVION SOL 3500UNIT.....	173	IMITREX TAB 25MG.....	105
IDELVION SOL 500UNIT	173	IMITREX TAB 50MG.....	106
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IDHIFA TAB 50MG	44	IMOGAM RABIE INJ 150/ML.....	180
<i>iferex 150 cap forte</i>	190	IMOGAM RABIE INJ 300/2ML.....	180
IFEX INJ 1GM.....	37	IMPAVIDO CAP 50MG	34
IFEX INJ 3GM.....	37	IMPOYZ CRE 0.025%.....	216
<i>ifosfamide for inj 1 gm</i>	37	IMURAN TAB 50MG	181
IFOSFAMIDE INJ 3GM	37	IMVEXXY MAIN SUP 10MCG.....	144
<i>ifosfamide iv inj 1 gm/20ml (50 mg/ml)</i>	37	IMVEXXY MAIN SUP 4MCG	144
<i>ifosfamide iv inj 3 gm/60ml (50 mg/ml)</i>	37	IMVEXXY STRT SUP 10MCG.....	144
ILEVRO DRO 0.3% OP	222	IMVEXXY STRT SUP 4MCG.....	144
ILUMYA SOL 100MG/ML	211	<i>inatal gt tab</i>	194
ILUVIEN IMP 0.19MG.....	223	INCONTROL MIS LANC 28G	126
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	42	INCONTROL MIS LANC 30G	126
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	42	INCONTROL MIS LANC 33G	126
IMBRUVICA CAP 140MG	42	INCRELEX INJ 40MG/4ML.....	149
IMBRUVICA CAP 70MG	42	INCRUSE ELPT INH 62.5MCG.....	197
IMBRUVICA TAB 140MG	42	<i>indapamide tab 1.25 mg</i>	70
IMBRUVICA TAB 280MG	42	<i>indapamide tab 2.5 mg</i>	70
IMBRUVICA TAB 420MG	42	INDERAL LA CAP 120MG	62
IMBRUVICA TAB 560MG	42	INDERAL LA CAP 160MG.....	62
IMFINZI INJ 120/2.4	44	INDERAL LA CAP 60MG.....	62
IMFINZI INJ 500/10	44	INDERAL LA CAP 80MG.....	62
<i>imipenem-cilastatin intravenous for soln 250 mg</i>	17	INDERAL XL CAP 120MG.....	62
<i>imipenem-cilastatin intravenous for soln 500 mg</i>	17	INDERAL XL CAP 80MG.....	62
<i>imipramine hcl tab 10 mg</i>	88	INDOCIN SUP 50MG	5
<i>imipramine hcl tab 25 mg</i>	88	INDOCIN SUS 25MG/5ML	5
<i>imipramine hcl tab 50 mg</i>	88	<i>indomethacin cap 25 mg</i>	5
<i>imipramine pamoate cap 100 mg</i>	88	<i>indomethacin cap 50 mg</i>	5
<i>imipramine pamoate cap 125 mg</i>	88	<i>indomethacin cap er 75 mg</i>	5
<i>imipramine pamoate cap 150 mg</i>	88	<i>indomethacin sodium iv for soln 1 mg</i> ...	5
<i>imipramine pamoate cap 75 mg</i>	88	INFANRIX INJ.....	183
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<i>imiquimod cream 5%</i>	209	INFED INJ 50MG/ML	190
		INFINITY TES BLD GLUC	126
		INFLECTRA INJ 100MG	178
		INFUMORPH INJ 10MG/ML	11
		INFUMORPH INJ 25MG/ML	11
		INGREZZA CAP 40MG	114
		INGREZZA CAP 80MG.....	114
		INJECTAFER INJ 750/15ML.....	190
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INNOPRAN XL CAP 120MG	62	INVIRASE TAB 500MG	30
INNOPRAN XL CAP 80MG	62	INVOKAMET TAB 150-1000	120
INOVA 4/1 KIT ACNE CON.....	207	INVOKAMET TAB 150-500	120
INOVA 8/2 KIT ACNE CON.....	207	INVOKAMET TAB 50-1000	119
INOVA KIT 4%	207	INVOKAMET TAB 50-500MG	119
INOVA KIT 8%	207	INVOKAMET XR TAB 150-1000	120
INSPRA TAB 25MG.....	51	INVOKAMET XR TAB 150-500	120
INSPRA TAB 50MG.....	51	INVOKAMET XR TAB 50-1000	120
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INTELENCE TAB 200MG.....	28	<i>cream 1-1.9%</i>	210
INTELENCE TAB 25MG.....	28	IONOSOL-MB INJ /D5W	185
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INTERMEZZO SUB 3.5MG.....	104	IOPIDINE SOL 0.5% OP	227
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INTRAROSA SUP 6.5MG	166	<i>ipratropium bromide inhal soln 0.02%</i>	
INTRON A INJ 10MU.....	181	197
INTRON A INJ 18MU.....	181	<i>ipratropium bromide nasal soln 0.03%</i>	
INTRON A INJ 25MU.....	181	<i>(21 mcg/spray)</i>	202
INTRON A INJ 50MU.....	181	<i>ipratropium bromide nasal soln 0.06%</i>	
<i>introvale tab</i>	136	<i>(42 mcg/spray)</i>	202
INTUNIV TAB 1MG	100	IPRIVASK INJ 15MG	169
INTUNIV TAB 2MG	100	<i>irbesartan-hydrochlorothiazide tab 150-</i>	
INTUNIV TAB 3MG	100	<i>12.5 mg</i>	54
INTUNIV TAB 4MG	100	<i>irbesartan-hydrochlorothiazide tab 300-</i>	
INVANZ INJ 1GM	17	<i>12.5 mg</i>	54
INVEGA SUST INJ 117/0.75	93	<i>irbesartan tab 150 mg.....</i>	55
INVEGA SUST INJ 156MG/ML	93	<i>irbesartan tab 300 mg.....</i>	55
INVEGA SUST INJ 234/1.5	93	<i>irbesartan tab 75 mg</i>	55
INVEGA SUST INJ 39/0.25	93	IRESSA TAB 250MG	42
INVEGA SUST INJ 78/0.5ML.....	93	<i>irinotecan hcl inj 100 mg/5ml (20</i>	
INVEGA TAB 1.5MG	93	<i>mg/ml)</i>	47
INVEGA TAB 3MG	93	<i>irinotecan hcl inj 40 mg/2ml (20 mg/ml)</i>	
INVEGA TAB 6MG	93	47
INVEGA TAB 9MG	93	<i>irinotecan hcl inj 500 mg/25ml (20</i>	
INVEGA TRINZ INJ 273MG	93	<i>mg/ml)</i>	47
INVEGA TRINZ INJ 410MG	93	IROSPAN 24/6 MIS	190
INVEGA TRINZ INJ 546MG	93	IS 24/6 MIS	190
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ISENTRESS HD TAB 600MG	28	IXINITY INJ 500UNIT	173
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LARTRUVO INJ 190/19ML	45	<i>(base equiv)</i>	200
LASIX TAB 20MG	69	<i>levabuterol hcl soln nebu 1.25 mg/3ml</i>	
LASIX TAB 40MG	69	<i>(base equiv)</i>	200
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LASTACRAFT SOL 0.25%	223	<i>mg/0.5ml (base equiv)</i>	200
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<i>1000 mg/100ml</i>	80	<i>mg/17.5ml (base equiv)</i>	45
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<i>.....</i>	198	<i>levothyroxine sodium tab 25 mcg.....</i>	153
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<i>levoxyl tab 25mcg</i>	153	<i>lidocaine inj 2% w/ epinephrine-1:100000</i>	2
<i>levoxyl tab 50mcg</i>	153	<i>lidocaine inj 2% w/ epinephrine-1:200000</i>	2
<i>levoxyl tab 75mcg</i>	153	<i>lidocaine inj 2% w/ epinephrine-1:50000</i>	2
<i>levoxyl tab 88mcg</i>	153	2
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<i>lidocaine-hydrocortisone acetate rectal gel kit 3-2.5%</i>	165	<i>linezolid in sodium chloride iv soln 600 mg/300ml-0.9%</i>	34
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	217	<i>linezolid iv soln 600 mg/300ml (2 mg/ml)</i>	34
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<i>lisinopril tab 2.5 mg</i>	50	<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	30
<i>lisinopril tab 20 mg</i>	50	LOPRESS HCT TAB 50-25MG	61
<i>lisinopril tab 30 mg</i>	50	LOPRESSOR TAB 100MG	62
<i>lisinopril tab 40 mg</i>	50	LOPRESSOR TAB 50MG	62
<i>lisinopril tab 5 mg</i>	50	LOPROX SHA 1%	210
<i>lissamine green strips 1.5 mg</i>	225	LOPROX SUS 0.77%	210
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LITE TOUCH MIS LANCETS	127	<i>lorazepam conc 2 mg/ml</i>	76
<i>lithium carbonate cap 150 mg</i>	107	<i>lorazepam inj 2 mg/ml</i>	76
<i>lithium carbonate cap 300 mg</i>	107	<i>lorazepam inj 4 mg/ml</i>	76
<i>lithium carbonate cap 600 mg</i>	107	<i>lorazepam tab 0.5 mg</i>	76
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<i>lithium carbonate tab er 450 mg</i>	107	<i>lorcet hd tab 10-325mg</i>	11
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<i>lmd 10%/nacl inj 0.9%</i>	176	<i>losartan potassium & hydrochlorothiazide tab 100-25 mg</i>	54
LOCOID CRE 0.1%	215	<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	54
LOCOID LIPO CRE 0.1%	215	<i>losartan potassium tab 100 mg</i>	55
LOCOID LOT 0.1%	215	<i>losartan potassium tab 25 mg</i>	55
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LOTRONEX TAB 1MG	161	LUZU CRE 1%	210
LOUTREX CRE	211	LYNPARZA CAP 50MG	45
<i>lovastatin tab 10 mg</i>	59	LYNPARZA TAB 100MG	45
<i>lovastatin tab 20 mg</i>	59	LYNPARZA TAB 150MG	45
<i>lovastatin tab 40 mg</i>	59	LYRICA CAP 100MG	102
LOVAZA CAP 1GM	60	LYRICA CAP 150MG	102
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<i>loxapine succinate cap 50 mg</i>	97	M-M-R II INJ	183
<i>loxapine succinate cap 5 mg</i>	97	M-VIT TAB 27-1MG	194
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LUMIGAN SOL 0.01%	227	MAGNESIUM SU INJ 2GM/50ML	191
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LUPR DEP-PED INJ 11.25MG	150	<i>magnesium sulfate iv soln 20 gm/500ml</i>	
LUPR DEP-PED INJ 15MG	150	<i>(40 mg/ml)</i>	191
LUPR DEP-PED INJ 3M 30MG	150	<i>magnesium sulfate iv soln 2 gm/50ml</i>	
LUPR DEP-PED INJ 7.5MG	150	<i>(40 mg/ml)</i>	191
LUPRON DEPOT INJ 11.25MG	41	<i>magnesium sulfate iv soln 40 gm/1000ml</i>	
LUPRON DEPOT INJ 22.5MG	41	<i>(40 mg/ml)</i>	191
LUPRON DEPOT INJ 3.75MG	40	<i>magnesium sulfate iv soln 4 gm/100ml</i>	
LUPRON DEPOT INJ 30MG	41	<i>(40 mg/ml)</i>	191
LUPRON DEPOT INJ 45MG	41	<i>magnesium sulfate iv soln 4 gm/50ml</i>	
LUPRON DEPOT INJ 7.5MG	40	<i>(80 mg/ml)</i>	191
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MARPLAN TAB 10MG	85	<i>medroxyprogesterone acetate tab 10 mg</i>	
MARQIBO INJ 5MG/31ML	47	151
MATULANE CAP 50MG	45	<i>medroxyprogesterone acetate tab 2.5</i>	
<i>matzim la tab 180mg/24</i>	67	<i>mg.....</i>	151
<i>matzim la tab 240mg/24</i>	67	<i>medroxyprogesterone acetate tab 5 mg</i>	
<i>matzim la tab 300mg/24</i>	67	151
<i>matzim la tab 360mg/24</i>	67	<i>mefenamic acid cap 250 mg</i>	5
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<i>meclizine hcl tab 25 mg</i>	157	<i>meloxicam tab 7.5 mg</i>	5
<i>meclofenamate sodium cap 100 mg</i>	5	<i>melphalan hcl for inj 50 mg (base equiv)</i>	
<i>meclofenamate sodium cap 50 mg</i>	5	37

<i>memantine hcl cap er 24hr 14 mg</i>	83	<i>metadate tab 20mg er</i>	100
<i>memantine hcl cap er 24hr 21 mg</i>	83	<i>metaproterenol sulfate syrup 10 mg/5ml</i>	
<i>memantine hcl cap er 24hr 28 mg</i>	83	201
<i>memantine hcl cap er 24hr 7 mg</i>	83	<i>metaproterenol sulfate tab 10 mg</i>	201
<i>memantine hcl oral solution 2 mg/ml</i> ..	83	<i>metaproterenol sulfate tab 20 mg</i>	201
<i>memantine hcl tab 10 mg</i>	83	METASTRON INJ.....	45
<i>memantine hcl tab 5 mg</i>	83	<i>metaxall tab 800mg</i>	108
<i>memantine hcl tab 5 mg (28) & 10 mg</i>		<i>metaxalone tab 400 mg</i>	109
<i>(21) titration pak</i>	83	<i>metaxalone tab 800 mg</i>	109
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<i>meperidine hcl inj 10 mg/ml</i>	11	<i>metformin hcl tab er 24hr osmotic 1000</i>	
<i>meperidine hcl inj 25 mg/ml</i>	11	<i>mg</i>	116
<i>meperidine hcl inj 50 mg/ml</i>	11	<i>metformin hcl tab er 24hr osmotic 500</i>	
<i>meperidine hcl oral soln 50 mg/5ml</i>	11	<i>mg</i>	116
<i>meperidine hcl tab 100 mg</i>	11	METFORMIN SOL 500/5ML	116
<i>meperidine hcl tab 50 mg</i>	11	<i>methadone con 10mg/ml</i>	11
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<i>meprobamate tab 200 mg</i>	77	<i>methadone hcl soln 10 mg/5ml</i>	12
<i>meprobamate tab 400 mg</i>	77	<i>methadone hcl soln 5 mg/5ml</i>	11
MEPRON SUS	34	<i>methadone hcl tab 10 mg</i>	12
MEPSEVII INJ 10MG/5ML	150	<i>methadone hcl tab 5 mg</i>	12
<i>mercaptapurine tab 50 mg</i>	39	<i>methadone hcl tab for oral susp 40 mg</i>	12
<i>meropenem iv for soln 1 gm</i>	17	METHADONE INJ 10MG/ML	12
<i>meropenem iv for soln 500 mg</i>	17	METHADOSE CON 10MG/ML.....	12
MERREM INJ 1GM	17	METHADOSE SF CON 10MG/ML.....	12
MERREM INJ 500MG.....	17	<i>methadose tab 40mg</i>	12
<i>mesalamine enema 4 gm</i>	160	<i>methamphetamine hcl tab 5 mg</i>	100
<i>mesalamine rectal enema 4 gm &</i>		<i>methazolamide tab 25 mg</i>	68
<i>cleanser wipe kit</i>	160	<i>methazolamide tab 50 mg</i>	68
<i>mesalamine tab delayed release 1.2 gm</i>		<i>methenamine-hyosc-meth blue-sod</i>	
.....	160	<i>phos-phen sal cap 120 mg</i>	166
<i>mesalamine tab delayed release 800 mg</i>		<i>methenamine hippurate tab 1 gm</i>	34
.....	160	<i>methenamine mandelate tab 0.5 gm</i> ...	35
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<i>methocarbamol tab 750 mg</i>	109	<i>.....</i>	100
<i>methotrexate sodium for inj 1 gm</i>	39	<i>methylphenidate hcl cap er 40 mg (cd)</i>	100
<i>methotrexate sodium inj 250 mg/10ml</i>		<i>.....</i>	100
<i>(25 mg/ml)</i>	39	<i>methylphenidate hcl cap er 50 mg (cd)</i>	100
<i>methotrexate sodium inj 50 mg/2ml (25</i>		<i>.....</i>	100
<i>mg/ml)</i>	39	<i>methylphenidate hcl cap er 60 mg (cd)</i>	100
<i>methotrexate sodium inj pf 1000</i>		<i>.....</i>	100
<i>mg/40ml (25 mg/ml)</i>	39	<i>methylphenidate hcl chew tab 10 mg.</i>	100
<i>methotrexate sodium inj pf 250 mg/10ml</i>		<i>methylphenidate hcl chew tab 2.5 mg</i>	100
<i>(25 mg/ml)</i>	39	<i>methylphenidate hcl chew tab 5 mg ..</i>	100
<i>methotrexate sodium inj pf 50 mg/2ml</i>		<i>methylphenidate hcl soln 10 mg/5ml</i>	100
<i>(25 mg/ml)</i>	39	<i>methylphenidate hcl soln 5 mg/5ml...</i>	100
<i>methotrexate sodium tab 2.5 mg (base</i>		<i>methylphenidate hcl tab 10 mg.....</i>	101
<i>equiv)</i>	39	<i>methylphenidate hcl tab 20 mg.....</i>	101
<i>methoxsalen rapid cap 10 mg</i>	211	<i>methylphenidate hcl tab 5 mg</i>	101
<i>methscopolamine bromide tab 2.5 mg</i>		<i>methylphenidate hcl tab er 10 mg</i>	101
<i>.....</i>	159	<i>methylphenidate hcl tab er 20 mg</i>	101
<i>methscopolamine bromide tab 5 mg ..</i>	159	<i>methylphenidate hcl tab er 24hr 18 mg</i>	101
<i>METHY-BUPIVA SUS 8-5MG/ML</i>	150	<i>.....</i>	101
<i>methyclothiazide tab 5 mg</i>	70	<i>methylphenidate hcl tab er 24hr 27 mg</i>	101
<i>METHYL-BUPIV SUS 40-5MG</i>	150	<i>.....</i>	101
<i>methyldopa & hydrochlorothiazide tab</i>		<i>methylphenidate hcl tab er 24hr 36 mg</i>	101
<i>250-15 mg</i>	51	<i>.....</i>	101
<i>methyldopa & hydrochlorothiazide tab</i>		<i>methylphenidate hcl tab er 24hr 54 mg</i>	101
<i>250-25 mg</i>	51	<i>.....</i>	101
<i>methyldopa tab 250 mg</i>	51	<i>methylphenidate hcl tab er osmotic</i>	
<i>methyldopa tab 500 mg</i>	51	<i>release (osm) 18 mg</i>	101
<i>methyldopate hcl inj 250 mg/5ml</i>	51	<i>methylphenidate hcl tab er osmotic</i>	
<i>methylene blue inj 1%</i>	134	<i>release (osm) 27 mg</i>	101
<i>methylergonovine maleate inj 0.2 mg/ml</i>		<i>methylphenidate hcl tab er osmotic</i>	
<i>.....</i>	150	<i>release (osm) 36 mg</i>	101
<i>METHYLIN SOL 10MG/5ML</i>	100	<i>methylphenidate hcl tab er osmotic</i>	
<i>METHYLIN SOL 5MG/5ML</i>	100	<i>release (osm) 54 mg</i>	101
<i>methylphenidate hcl cap er 10 mg (cd)</i>		<i>methylphenidate hcl tab er osmotic</i>	
<i>.....</i>	100	<i>release (osm) 72 mg</i>	101
<i>methylphenidate hcl cap er 20 mg (cd)</i>		<i>METHYLPR ACE INJ 80MG/ML</i>	146
<i>.....</i>	100	<i>methylprednisolone acetate inj susp 40</i>	
<i>methylphenidate hcl cap er 24hr 10 mg</i>		<i>mg/ml</i>	146
<i>(la)</i>	100	<i>methylprednisolone acetate inj susp 80</i>	
<i>methylphenidate hcl cap er 24hr 20 mg</i>		<i>mg/ml</i>	146
<i>(la)</i>	100	<i>methylprednisolone sod succ for inj 1000</i>	
<i>methylphenidate hcl cap er 24hr 30 mg</i>		<i>mg (base equiv)</i>	146
<i>(la)</i>	100	<i>methylprednisolone sod succ for inj 125</i>	
<i>methylphenidate hcl cap er 24hr 40 mg</i>		<i>mg (base equiv)</i>	146
<i>(la)</i>	100	<i>methylprednisolone sod succ for inj 40</i>	
<i>methylphenidate hcl cap er 24hr 60 mg</i>		<i>mg (base equiv)</i>	146
<i>(la)</i>	100	<i>methylprednisolone tab 16 mg</i>	146
<i>methylphenidate hcl cap er 30 mg (cd)</i>		<i>methylprednisolone tab 32 mg</i>	146

<i>methylprednisolone tab 4 mg</i>	146	<i>metronidazole gel 0.75%</i>	219
<i>methylprednisolone tab 8 mg</i>	146	<i>metronidazole gel 1%</i>	219
<i>methylprednisolone tab therapy pack 4 mg (21)</i>	146	<i>metronidazole in nacl 0.79% iv soln 500 mg/100ml</i>	35
METHYLPREDNI SUS 50MG/ML	146	<i>metronidazole lotion 0.75%</i>	219
<i>methyltestosterone cap 10 mg</i>	115	<i>metronidazole tab 250 mg</i>	35
<i>metipranolol ophth soln 0.3%</i>	224	<i>metronidazole tab 500 mg</i>	35
<i>metoclopramide hcl inj 5 mg/ml (base equivalent)</i>	157	<i>metronidazole vaginal gel 0.75%</i>	168
<i>metoclopramide hcl orally disintegrating tab 5 mg (base eq)</i>	157	METRONIDAZOL INJ 5MG/ML	35
<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i>	157	<i>mexiletine hcl cap 150 mg</i>	56
<i>metoclopramide hcl tab 10 mg (base equivalent)</i>	157	<i>mexiletine hcl cap 200 mg</i>	56
<i>metoclopramide hcl tab 5 mg (base equivalent)</i>	157	<i>mexiletine hcl cap 250 mg</i>	56
<i>metolazone tab 10 mg</i>	70	MG SO4/D5W INJ 10MG/ML	191
<i>metolazone tab 2.5 mg</i>	70	MIACALCIN INJ 200/ML	135
<i>metolazone tab 5 mg</i>	70	<i>mibelas 24 chw fe</i>	138
<i>metoprolol & hydrochlorothiazide tab 100-25 mg</i>	61	MICARDIS HCT TAB 40/12.5	54
<i>metoprolol & hydrochlorothiazide tab 100-50 mg</i>	61	MICARDIS HCT TAB 80-25MG.....	54
<i>metoprolol & hydrochlorothiazide tab 50-25 mg</i>	61	MICARDIS HCT TAB 80/12.5	54
<i>metoprolol succinate tab er 24hr 100 mg (tartrate equiv)</i>	63	MICARDIS TAB 20MG	55
<i>metoprolol succinate tab er 24hr 200 mg (tartrate equiv)</i>	63	MICARDIS TAB 40MG	55
<i>metoprolol succinate tab er 24hr 25 mg (tartrate equiv)</i>	63	MICARDIS TAB 80MG	55
<i>metoprolol succinate tab er 24hr 50 mg (tartrate equiv)</i>	63	<i>miconazole 3 sup 200mg</i>	168
<i>metoprolol tartrate iv soln 5 mg/5ml</i> ...	63	MICORT-HC CRE 2.5%.....	214
<i>metoprolol tartrate iv soln cart inj 5 mg/5ml (1 mg/ml)</i>	63	MICRHOGAM PL INJ 50MCG.....	180
<i>metoprolol tartrate tab 100 mg</i>	63	MICRO-K CAP 10MEQ CR	187
<i>metoprolol tartrate tab 25 mg</i>	63	MICRO-K CAP 8MEQ CR	187
<i>metoprolol tartrate tab 37.5 mg</i>	63	MICRODOT TES	128
<i>metoprolol tartrate tab 50 mg</i>	63	<i>microgestin tab 1/20</i>	138
<i>metoprolol tartrate tab 75 mg</i>	63	<i>microgestin tab 1.5/30</i>	139
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METROGEL-VAG GEL 0.75%	168	<i>microgestin tab fe1.5/30</i>	139
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<i>metronidazole cap 375 mg</i>	35	MICRO THIN MIS LANC 33G	128
<i>metronidazole cream 0.75%</i>	219	MICROZIDE CAP 12.5MG	70
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		MIDAZOL/NAACL SOL 55/55ML.....	103
		MIDAZOL/NAACL SOL 5MG/5ML.....	103
		<i>midazolam hcl inj 10 mg/10ml (base equivalent)</i>	103
		<i>midazolam hcl inj 10 mg/2ml (base equivalent)</i>	103
		<i>midazolam hcl inj 25 mg/5ml (base equivalent)</i>	103
		<i>midazolam hcl inj 2 mg/2ml (base equivalent)</i>	103
		<i>midazolam hcl inj 50 mg/10ml (base equivalent)</i>	103

<i>midazolam hcl inj 5 mg/5ml (base equivalent)</i>	103	<i>minocycline hcl cap 100 mg</i>	25
<i>midazolam hcl inj 5 mg/ml (base equivalent)</i>	103	<i>minocycline hcl cap 50 mg</i>	24
<i>midazolam hcl syrup 2 mg/ml (base equivalent)</i>	103	<i>minocycline hcl cap 75 mg</i>	24
<i>midodrine hcl tab 10 mg</i>	74	<i>minocycline hcl tab 100 mg</i>	25
<i>midodrine hcl tab 2.5 mg</i>	74	<i>minocycline hcl tab 50 mg</i>	25
<i>midodrine hcl tab 5 mg</i>	74	<i>minocycline hcl tab 75 mg</i>	25
<i>migergot sup 2/100</i>	105	<i>minocycline hcl tab er 24hr 115 mg</i>	25
<i>miglitol tab 100 mg</i>	115	<i>minocycline hcl tab er 24hr 135 mg</i>	25
<i>miglitol tab 25 mg</i>	115	<i>minocycline hcl tab er 24hr 45 mg</i>	25
<i>miglitol tab 50 mg</i>	115	<i>minocycline hcl tab er 24hr 65 mg</i>	25
<i>miglustat cap 100 mg</i>	145	<i>minocycline hcl tab er 24hr 90 mg</i>	25
MIGRANAL SPR 4MG/ML	105	<i>minoxidil tab 10 mg</i>	71
MIGRANOW PAK	105	<i>minoxidil tab 2.5 mg</i>	71
MILLIPRED DP PAK 5MG	146	MIOCHOL-E SOL 1:100	226
MILLIPRED SOL 10MG/5ML	146	MIOSTAT INJ 0.01% OP	226
MILLIPRED TAB 5MG	146	MIRAPEX ER TAB 0.375MG	90
<i>milrinone lactate in dextrose 5% iv soln 20 mg/100ml</i>	71	MIRAPEX ER TAB 0.75MG	90
<i>milrinone lactate in dextrose 5% iv soln 40 mg/200ml</i>	71	MIRAPEX ER TAB 1.5MG	90
<i>milrinone lactate iv soln 10 mg/10ml (base equivalent)</i>	71	MIRAPEX ER TAB 2.25MG	90
<i>milrinone lactate iv soln 20 mg/20ml (base equivalent)</i>	71	MIRAPEX ER TAB 3.75MG	90
<i>milrinone lactate iv soln 50 mg/50ml (base equivalent)</i>	71	MIRAPEX ER TAB 3MG	90
<i>mimvey lo tab 0.5-0.1</i>	142	MIRAPEX ER TAB 4.5MG	90
<i>mimvey tab 1-0.5mg</i>	142	MIRAPEX TAB 0.125MG	90
MINASTRIN 24 CHW FE	138	MIRAPEX TAB 0.25MG	90
<i>mineral oil</i>	161	MIRAPEX TAB 0.5MG	90
MINIPRESS CAP 1MG	52	MIRAPEX TAB 0.75MG	90
MINIPRESS CAP 2MG	52	MIRAPEX TAB 1.5MG	90
MINIPRESS CAP 5MG	52	MIRAPEX TAB 1MG	90
<i>minitran dis 0.1mg/hr</i>	72	MIRCERA INJ 100MCG	171
<i>minitran dis 0.2mg/hr</i>	72	MIRCERA INJ 200MCG	171
<i>minitran dis 0.4mg/hr</i>	72	MIRCERA INJ 50MCG	171
<i>minitran dis 0.6mg/hr</i>	72	MIRCERA INJ 75MCG	171
MINIVELLE DIS 0.025MG	144	MIRCERA SOL 150/0.3	171
MINIVELLE DIS 0.0375MG	144	MIRCERA SOL 30/0.3ML	171
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MINOCIN CAP 100MG	24	<i>mirtazapine orally disintegrating tab 30 mg</i>	84
MINOCIN CAP 50MG	24	<i>mirtazapine orally disintegrating tab 45 mg</i>	84
MINOCIN INJ 100MG	24	<i>mirtazapine tab 15 mg</i>	84
		<i>mirtazapine tab 30 mg</i>	84
		<i>mirtazapine tab 45 mg</i>	84
		<i>mirtazapine tab 7.5 mg</i>	84
		MIRVASO GEL 0.33%	220
		<i>misoprostol tab 100 mcg</i>	163

<i>misoprostol tab 200 mcg</i>	163	MONOLET OPD MIS LANCETS	128
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<i>mitigo inj 10mg/ml</i>	12	<i>mononessa tab</i>	139
<i>mitigo inj 25mg/ml</i>	12	MONONINE INJ 1000UNIT	174
<i>mitomycin for iv soln 20 mg</i>	38	MONOVISC INJ 88MG/4ML	16
<i>mitomycin for iv soln 40 mg</i>	38	MONSELS FERR SOL SUBSULF	175
<i>mitomycin for iv soln 5 mg</i>	38	<i>montelukast sodium chew tab 4 mg</i> (base equiv)	201
MITOMYCIN SOL 20MG	38	<i>montelukast sodium chew tab 5 mg</i> (base equiv)	201
MITOSOL KIT 0.2MG	222	<i>montelukast sodium oral granules packet</i> <i>4 mg (base equiv)</i>	201
<i>mitoxantrone hcl inj conc 20 mg/10ml (2</i> <i>mg/ml)</i>	38	<i>montelukast sodium tab 10 mg (base</i> <i>equiv)</i>	201
<i>mitoxantrone hcl inj conc 25 mg/12.5ml</i> <i>(2 mg/ml)</i>	38	MONUROL PAK GRANULES	35
<i>mitoxantrone hcl inj conc 30 mg/15ml (2</i> <i>mg/ml)</i>	38	<i>morgidox cap 1x100mg</i>	25
MIVACRON INJ 10MG/5ML	110	<i>morgidox cap 1x50mg</i>	25
MIVACRON INJ 20/10ML	110	<i>morgidox cap 2x100mg</i>	25
MOBIC TAB 15MG	5	MORGIDOX KIT 1X50MG	25
MOBIC TAB 7.5MG	5	MORPHABOND TAB 100MG ER	12
<i>modafinil tab 100 mg</i>	109	MORPHABOND TAB 15MG ER	12
<i>modafinil tab 200 mg</i>	109	MORPHABOND TAB 30MG ER	12
MODERIBA PAK 1200/DAY	31	MORPHABOND TAB 60MG ER	12
MODERIBA PAK 800/DAY	31	MORPHIN/NACL INJ 2MG-0.9%	12
MODERIBA TAB 1000/DAY	31	MORPHIN/NACL INJ 4MG-0.9%	12
<i>moderiba tab 200mg</i>	31	MORPHIN/NACL INJ 60/30ML	12
MODERIBA TAB 600/DAY	31	MORPHINE/D5W INJ 50/25ML	13
<i>moexipril-hydrochlorothiazide tab 15-</i> <i>12.5 mg</i>	49	<i>morphine sulfate beads cap er 24hr 120</i> <i>mg</i>	12
<i>moexipril-hydrochlorothiazide tab 15-25</i> <i>mg</i>	49	<i>morphine sulfate beads cap er 24hr 30</i> <i>mg</i>	12
<i>moexipril-hydrochlorothiazide tab 7.5-</i> <i>12.5 mg</i>	49	<i>morphine sulfate beads cap er 24hr 45</i> <i>mg</i>	12
<i>moexipril hcl tab 15 mg</i>	50	<i>morphine sulfate beads cap er 24hr 60</i> <i>mg</i>	12
<i>moexipril hcl tab 7.5 mg</i>	50	<i>morphine sulfate beads cap er 24hr 75</i> <i>mg</i>	12
<i>mometasone furoate cream 0.1%</i>	215	<i>morphine sulfate beads cap er 24hr 90</i> <i>mg</i>	12
<i>mometasone furoate nasal susp 50</i> <i>mcg/act</i>	203	<i>morphine sulfate cap er 24hr 100 mg</i>	12
<i>mometasone furoate oint 0.1%</i>	215	<i>morphine sulfate cap er 24hr 10 mg</i>	12
<i>mometasone furoate solution 0.1%</i> (lotion)	215	<i>morphine sulfate cap er 24hr 20 mg</i>	12
<i>mondoxyne nl cap 100mg</i>	25	<i>morphine sulfate cap er 24hr 30 mg</i>	12
<i>mondoxyne nl cap 50mg</i>	25	<i>morphine sulfate cap er 24hr 50 mg</i>	12
<i>mondoxyne nl cap 75mg</i>	25	<i>morphine sulfate cap er 24hr 60 mg</i>	12
<i>mono-lynyah tab 0.25-35</i>	139	<i>morphine sulfate cap er 24hr 80 mg</i>	12
MONOCLATE-P INJ 1000UNIT	174	<i>morphine sulfate inj 10 mg/ml</i>	12
MONOCLATE-P INJ 1500UNIT	174	<i>morphine sulfate inj 8 mg/ml</i>	12
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<i>morphine sulfate inj pf 1 mg/ml</i>	12	MUCOTROL WAF	221
<i>morphine sulfate iv soln 1 mg/ml</i>	12	MUGARD LIQ.....	221
<i>morphine sulfate iv soln 25 mg/ml</i>	12	MUPLETA TAB 3MG	176
<i>morphine sulfate iv soln 50 mg/ml</i>	12	MULTAQ TAB 400MG	56
<i>morphine sulfate iv soln pf 10 mg/ml</i> ..	13	<i>multi-vit/fe dro /fl 0.25</i>	191
<i>morphine sulfate iv soln pf 4 mg/ml</i>	13	<i>multi-vit/fl dro /fe 0.25</i>	191
<i>morphine sulfate iv soln pf 8 mg/ml</i>	13	<i>multi-vit/fl dro 0.5mg/ml</i>	191
<i>morphine sulfate oral soln 100 mg/5ml</i> <i>(20 mg/ml)</i>	13	MULTIGEN PLS TAB.....	190
<i>morphine sulfate oral soln 10 mg/5ml</i> .	13	MULTIGEN TAB.....	190
<i>morphine sulfate oral soln 20 mg/5ml</i> .	13	MULTIGEN TAB FOLIC.....	190
<i>morphine sulfate suppos 10 mg</i>	13	MULTITRACE-4 INJ.....	191
<i>morphine sulfate suppos 20 mg</i>	13	<i>multitrace-4 inj conc</i>	192
<i>morphine sulfate suppos 5 mg</i>	13	MULTITRACE-4 INJ NEONATAL.....	192
<i>morphine sulfate tab 15 mg</i>	13	MULTITRACE-4 INJ PED	192
<i>morphine sulfate tab 30 mg</i>	13	<i>multitrace-5 inj</i>	192
<i>morphine sulfate tab er 100 mg</i>	13	<i>multitrace-5 inj conc</i>	192
<i>morphine sulfate tab er 15 mg</i>	13	MULTITRACE-5 INJ REGULAR.....	192
<i>morphine sulfate tab er 200 mg</i>	13	MULTIV/FLUOR CHW 0.25-0.3	192
<i>morphine sulfate tab er 30 mg</i>	13	MULTIV/FLUOR CHW 0.5-0.3	192
<i>morphine sulfate tab er 60 mg</i>	13	MULTIV/FLUOR CHW 1-0.3MG	192
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MORPHINE SUL INJ 10MG/ML.....	12	<i>multivit/fl chw 0.5mg</i>	192
MORPHINE SUL INJ 150/30ML	12	<i>multivit/fl chw 1mg</i>	192
MORPHINE SUL INJ 2MG/ML	12	<i>multivit/fl dro 0.25mg</i>	192
MORPHINE SUL INJ 4MG/ML	12	<i>multi vit/fl dro 0.5mg/ml</i>	191
MORPHINE SUL INJ 5MG/ML	12	<i>mupirocin calcium cream 2%</i>	209
MORPHINE SUL INJ 8MG/ML	12	<i>mupirocin oint 2%</i>	209
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MOXEZA SOL 0.5%	222	MYAMBUTOL TAB 100MG	30
<i>moxifloxacin hcl 400 mg/250ml in</i> <i>sodium chloride 0.8% inj</i>	21	MYAMBUTOL TAB 400MG	30
<i>moxifloxacin hcl ophth soln 0.5% (base</i> <i>equiv)</i>	222	MYCAMINE INJ 100MG	26
<i>moxifloxacin hcl tab 400 mg (base equiv)</i>	21	MYCAMINE INJ 50MG	26
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MYDAYIS CAP 25MG	101	<i>nafcillin sodium for iv soln 1 gm</i>	23
MYDAYIS CAP 37.5MG	101	<i>nafcillin sodium for iv soln 2 gm</i>	23
MYDAYIS CAP 50MG	101	<i>nafrinse chw 1mg f</i>	192
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<i>myferon 150 cap forte</i>	190	<i>naftifine hcl cream 1%</i>	210
MYFORTIC TAB 180MG	181	<i>naftifine hcl cream 2%</i>	210
MYFORTIC TAB 360MG	181	NAFTIN CRE 2%	210
MYGLUCOHEALT MIS LANC 30G	128	NAFTIN GEL 1%	210
MYGLUCOHEALT TES BLD GLUC.....	128	NAFTIN GEL 2%	210
MYLERAN TAB 2MG	37	NAGLAZYME INJ 1MG/ML	150
MYLOTARG INJ 4.5MG	45	<i>nalbuphine hcl inj 10 mg/ml</i>	13
MYNATAL-Z TAB	194	<i>nalbuphine hcl inj 20 mg/ml</i>	13
MYNATAL CAP	194	NALFON CAP 400MG	5
MYNATAL PLUS TAB	194	NALOCET TAB 2.5-300	13
MYNATAL TAB	194	<i>naloxone hcl inj 0.4 mg/ml</i>	110
MYNATAL TAB ADVANCE	194	<i>naloxone hcl inj 4 mg/10ml</i>	110
MYNATE 90 TAB PLUS.....	194	<i>naloxone hcl soln cartridge 0.4 mg/ml</i>	110
MYOBLOC INJ 10000/2	102	<i>naloxone hcl soln prefilled syringe 2</i> <i>mg/2ml</i>	110
MYOBLOC INJ 2500/0.5	102	<i>naltrexone hcl tab 50 mg</i>	111
<i>myorisan cap 10mg</i>	205	NALTREXONE IMP	111
<i>myorisan cap 20mg</i>	205	NAMENDA TAB 10MG	83
<i>myorisan cap 30mg</i>	205	NAMENDA TAB 5-10MG	83
<i>myorisan cap 40mg</i>	205	NAMENDA TAB 5MG	83
MYRBETRIQ TAB 25MG	167	NAMENDA XR CAP 14MG	83
MYRBETRIQ TAB 50MG	167	NAMENDA XR CAP 21MG	83
MYSOLINE TAB 250MG	80	NAMENDA XR CAP 28MG	83
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<i>my way tab 1.5mg</i>	136	NAMZARIC CAP	83
<i>myzilra tab</i>	141	NAMZARIC CAP 14-10MG.....	83
N		NAMZARIC CAP 21-10MG.....	83
NABI-HB INJ	180	NAMZARIC CAP 28-10MG.....	83
<i>nabumetone tab 500 mg</i>	5	NAMZARIC CAP 7-10MG	83
<i>nabumetone tab 750 mg</i>	5	NAPRELAN TAB 375MG CR.....	5
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<i>nadolol & bendroflumethiazide tab 40-5</i> <i>mg</i>	61	NAPRELAN TAB 750MG CR.....	6
<i>nadolol & bendroflumethiazide tab 80-5</i> <i>mg</i>	61	NAPROSYN SUS 125/5ML	6
<i>nadolol tab 20 mg</i>	63	<i>naproxen dr tab 375mg</i>	6
<i>nadolol tab 40 mg</i>	63	<i>naproxen dr tab 500mg</i>	6
<i>nadolol tab 80 mg</i>	63	<i>naproxen sodium tab 275 mg</i>	6
NAFCILLIN INJ 1GM/50ML.....	23	<i>naproxen sodium tab 550 mg</i>	6
NAFCILLIN INJ 2GM/100.....	23	<i>naproxen sodium tab er 24hr 375 mg</i> <i>(base equiv)</i>	6
<i>nafcillin sodium for inj 1 gm</i>	23	<i>naproxen sodium tab er 24hr 500 mg</i> <i>(base equiv)</i>	6
<i>nafcillin sodium for inj 2 gm</i>	23		

<i>naproxen susp 125 mg/5ml</i>	6	<i>necon tab 0.5/35</i>	139
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<i>naproxen tab 375 mg</i>	6	NEEVO DHA CAP 27-1.13	194
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OMECLAMOX- MIS PAK	165	ONETOUCH MIS COMBO	128
<i>omega-3-acid ethyl esters cap 1 gm</i>	60	ONETOUCH MIS LANCETS	128
OMEGA-3/D-3 KIT WELLNESS	60	ONETOUCH TES ULTRA BL	128
<i>omeprazole-sodium bicarbonate cap 20-</i>		ONETOUCH TES VERIO	128
<i>1100 mg</i>	164	ONETOUCH US MIS LANCETS	128
<i>omeprazole-sodium bicarbonate cap 40-</i>		ONEXTON GEL 1.2-3.75.....	207
<i>1100 mg</i>	164	ONFI SUS 2.5MG/ML.....	80

ONFI TAB 10MG	80	ORENITRAM TAB 2.5MG	73
ONFI TAB 20MG	80	ORENITRAM TAB 5MG	73
ONGLYZA TAB 2.5MG	117	ORFADIN CAP 10MG	148
ONGLYZA TAB 5MG	117	ORFADIN CAP 20MG	148
ONIVYDE INJ 4.3MG/ML	47	ORFADIN CAP 2MG	148
ONMEL TAB 200MG	26	ORFADIN CAP 5MG	148
ONPATTRO SOL 10MG/5ML	150	ORFADIN SUS 4MG/ML	148
ONZETRA XSAI MIS 11MG	106	ORILISSA TAB 150MG	141
OPANA ER TAB 10MG	13	ORILISSA TAB 200MG	141
OPANA ER TAB 15MG	13	ORKAMBI TAB 100-125	201
OPANA ER TAB 20MG	13	ORKAMBI TAB 200-125	201
OPANA ER TAB 30MG	13	<i>orphenadrine citrate inj 30 mg/ml</i>	109
OPANA ER TAB 40MG	13	<i>orphenadrine citrate tab er 12hr 100 mg</i>	109
OPANA ER TAB 5MG	13	<i>orsythia tab</i>	138
OPANA ER TAB 7.5MG	13	ORTHO-CYCLEN TAB 0.25/35	140
OPANA TAB 10MG	13	ORTHO-NOVUM TAB 1/35	140
OPANA TAB 5MG	13	ORTHO-NOVUM TAB 7/7/7	141
<i>opcicon tab 1.5mg</i>	136	ORTHO MICRON TAB 0.35MG	140
OPDIVO INJ 100MG/10	45	ORTHO TRI- TAB CYCLEN	141
OPDIVO INJ 240/24	45	ORTHO TRI- TAB CYCLN LO	141
OPDIVO INJ 40MG/4ML	45	ORTHOVISC INJ 15MG/ML	16
<i>opium tincture 1% (10 mg/ml)</i> (<i>morphine equiv</i>)	156	<i>oscimin sr tab 0.375mg</i>	159
OPSUMIT TAB 10MG	72	<i>oscimin sub 0.125mg</i>	159
<i>option 2 tab 1.5mg</i>	136	<i>oscimin tab 0.125mg</i>	159
OPTIUM TES	128	<i>oseltamivir phosphate cap 30 mg (base</i> <i>equiv)</i>	32
OPTIUM TES	128	<i>oseltamivir phosphate cap 45 mg (base</i> <i>equiv)</i>	33
OPTUMRX TES BLD GLUC	128	<i>oseltamivir phosphate cap 75 mg (base</i> <i>equiv)</i>	33
ORACEA CAP 40MG	220	<i>oseltamivir phosphate for susp 6 mg/ml</i> (<i>base equiv</i>)	33
ORACIT SOL	166	OSENI TAB 12.5-15	117
ORAFATE PST 10%	221	OSENI TAB 12.5-30	117
ORALAIR SUB 300 IR	178	OSENI TAB 12.5-45	117
<i>oralone dent pst 0.1%</i>	220	OSENI TAB 25-15MG	117
ORAPRED ODT TAB 10MG	146	OSENI TAB 25-30MG	117
ORAPRED ODT TAB 15MG	146	OSENI TAB 25-45MG	117
ORAPRED ODT TAB 30MG	146	<i>osmitrol inj 10%</i>	69
ORAP TAB 1MG	97	<i>osmitrol inj 15%</i>	69
ORAP TAB 2MG	97	<i>osmitrol inj 5%</i>	69
ORAVIG TAB 50MG	26	<i>osmitrol vfx inj 20%</i>	69
ORBACTIV SOL 400MG	35	OSMOLEX ER TAB 129MG	90
ORENCIA CLCK INJ 125MG/ML	178	OSMOLEX ER TAB 193MG	90
ORENCIA INJ 125MG/ML	178	OSMOLEX ER TAB 258MG	90
ORENCIA INJ 250MG	178	OSMOPREP TAB 1.5GM	161
ORENCIA INJ 50/0.4	178	OTEZLA TAB 10/20/30	178
ORENCIA INJ 87.5/0.7	178		
ORENITRAM TAB 0.125MG	73		
ORENITRAM TAB 0.25MG	73		
ORENITRAM TAB 1MG	73		

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OTIPRIO SUS 60MG/ML	227	<i>oxybutynin chloride syrup 5 mg/5ml..</i>	167
OTOVEL DRO.....	227	<i>oxybutynin chloride tab 5 mg</i>	167
OTREXUP INJ 10MG	179	<i>oxybutynin chloride tab er 24hr 10 mg</i>	
OTREXUP INJ 12.5/0.4	179	.....	167
OTREXUP INJ 15MG	179	<i>oxybutynin chloride tab er 24hr 15 mg</i>	
OTREXUP INJ 17.5/0.4	179	.....	167
OTREXUP INJ 20MG	179	<i>oxybutynin chloride tab er 24hr 5 mg</i>	167
OTREXUP INJ 22.5/0.4	179	<i>oxycodone-aspirin tab 4.8355-325 mg</i>	14
OTREXUP INJ 25MG	179	<i>oxycodone-ibuprofen tab 5-400 mg.....</i>	14
OVACE PLUS AER 9.8%	211	<i>oxycodone hcl cap 5 mg</i>	14
OVACE PLUS CRE 10%	211	<i>oxycodone hcl conc 100 mg/5ml (20</i>	
OVACE PLUS GEL 10% WASH.....	211	<i>mg/ml)</i>	14
OVACE PLUS LIQ 10% WASH.....	211	<i>oxycodone hcl soln 5 mg/5ml</i>	14
OVACE PLUS LOT 9.8%	211	<i>oxycodone hcl tab 10 mg.....</i>	14
OVACE PLUS SHA 10%	211	<i>oxycodone hcl tab 15 mg.....</i>	14
OVACE WASH LIQ 10%.....	211	<i>oxycodone hcl tab 20 mg.....</i>	14
OVIDE LOT 0.5%	220	<i>oxycodone hcl tab 30 mg.....</i>	14
OVIDREL INJ	144	<i>oxycodone hcl tab 5 mg</i>	14
<i>oxacillin sodium for inj 10 gm (base</i>		<i>oxycodone hcl tab er 12hr deter 10 mg</i>	
<i>equivalent)</i>	23	.....	14
<i>oxacillin sodium for inj 1 gm (base</i>		<i>oxycodone hcl tab er 12hr deter 15 mg</i>	
<i>equivalent)</i>	23	.....	14
<i>oxacillin sodium for inj 2 gm (base</i>		<i>oxycodone hcl tab er 12hr deter 20 mg</i>	
<i>equivalent)</i>	23	.....	14
<i>oxaliplatin for iv inj 100 mg</i>	37	<i>oxycodone hcl tab er 12hr deter 30 mg</i>	
<i>oxaliplatin for iv inj 50 mg</i>	37	.....	14
<i>oxaliplatin iv soln 100 mg/20ml.....</i>	37	<i>oxycodone hcl tab er 12hr deter 40 mg</i>	
<i>oxaliplatin iv soln 50 mg/10ml.....</i>	37	.....	14
<i>oxandrolone tab 10 mg.....</i>	115	<i>oxycodone hcl tab er 12hr deter 60 mg</i>	
<i>oxandrolone tab 2.5 mg.....</i>	115	.....	14
<i>oxaprozin tab 600 mg</i>	6	<i>oxycodone hcl tab er 12hr deter 80 mg</i>	
OXAYDO TAB 5MG	13	.....	14
OXAYDO TAB 7.5MG	14	<i>oxycodone w/ acetaminophen soln 5-325</i>	
<i>oxazepam cap 10 mg</i>	76	<i>mg/5ml.....</i>	14
<i>oxazepam cap 15 mg</i>	76	<i>oxycodone w/ acetaminophen tab 10-325</i>	
<i>oxazepam cap 30 mg</i>	76	<i>mg</i>	14
<i>oxcarbazepine susp 300 mg/5ml (60</i>		<i>oxycodone w/ acetaminophen tab 2.5-</i>	
<i>mg/ml)</i>	80	<i>325 mg</i>	14
<i>oxcarbazepine tab 150 mg</i>	80	<i>oxycodone w/ acetaminophen tab 5-325</i>	
<i>oxcarbazepine tab 300 mg</i>	80	<i>mg</i>	14
<i>oxcarbazepine tab 600 mg</i>	81	<i>oxycodone w/ acetaminophen tab 7.5-</i>	
<i>oxiconazole nitrate cream 1%.....</i>	210	<i>325 mg</i>	14
OXISTAT CRE 1%	211	OXYCONTIN TAB 10MG CR.....	14
OXISTAT LOT 1%.....	211	OXYCONTIN TAB 15MG CR.....	14
OXSORALEN-UL CAP 10MG.....	211	OXYCONTIN TAB 20MG CR.....	14
OXTELLAR XR TAB 150MG	81	OXYCONTIN TAB 30MG CR.....	14
OXTELLAR XR TAB 300MG	81	OXYCONTIN TAB 40MG CR.....	14

OXYCONTIN TAB 60MG CR.....	14	PANCREAZE CAP.....	163
OXYCONTIN TAB 80MG CR.....	14	PANCREAZE CAP 10500UNT	163
<i>oxymorphone hcl tab 10 mg</i>	14	PANCREAZE CAP 16800UNT	163
<i>oxymorphone hcl tab 5 mg</i>	14	PANCREAZE CAP 21000UNT	163
<i>oxymorphone hcl tab er 12hr 10 mg</i> ...	14	PANCREAZE CAP 4200UNIT	163
<i>oxymorphone hcl tab er 12hr 15 mg</i> ...	14	<i>pancuronium bromide inj 1 mg/ml</i>	110
<i>oxymorphone hcl tab er 12hr 20 mg</i> ...	14	PANDEL CRE 0.1%	215
<i>oxymorphone hcl tab er 12hr 30 mg</i> ...	14	PANRETIN GEL 0.1%	218
<i>oxymorphone hcl tab er 12hr 40 mg</i> ...	14	<i>pantoprazole sodium ec tab 20 mg (base</i>	
<i>oxymorphone hcl tab er 12hr 5 mg</i>	14	<i>equiv)</i>	164
<i>oxymorphone hcl tab er 12hr 7.5 mg</i> ..	14	<i>pantoprazole sodium ec tab 40 mg (base</i>	
<i>oxytocin inj 10 unit/ml</i>	150	<i>equiv)</i>	164
OXYTROL DIS 3.9MG/24	167	<i>pantoprazole sodium for iv soln 40 mg</i>	
OZEMPIC INJ 2/1.5ML	118	<i>(base equiv)</i>	164
OZURDEX IMP 0.7MG	223	<i>papaverine hcl inj 30 mg/ml</i>	71
P		PARAGARD IUD T380A	137
<i>pacerone tab 100mg</i>	56	<i>paregoric tincture 2 mg/5ml (morphine</i>	
<i>pacerone tab 200mg</i>	56	<i>equivalent)</i>	156
<i>pacerone tab 400mg</i>	56	PAREMYD SOL 1-0.25%	225
<i>paclitaxel iv conc 100 mg/16.7ml (6</i>		<i>paricalcitol cap 1 mcg</i>	149
<i>mg/ml)</i>	47	<i>paricalcitol cap 2 mcg</i>	149
<i>paclitaxel iv conc 150 mg/25ml (6</i>		<i>paricalcitol cap 4 mcg</i>	149
<i>mg/ml)</i>	47	<i>paricalcitol iv soln 2 mcg/ml</i>	149
<i>paclitaxel iv conc 300 mg/50ml (6</i>		<i>paricalcitol iv soln 5 mcg/ml</i>	149
<i>mg/ml)</i>	47	PARLODEL CAP 5MG.....	90
<i>paclitaxel iv conc 30 mg/5ml (6 mg/ml)</i>		PARLODEL TAB 2.5MG	90
.....	47	PARNATE TAB 10MG	85
PAIN EASE AER MD STRM	217	<i>paroex sol 0.12%</i>	221
PAIN EASE AER MIST	217	<i>paromomycin sulfate cap 250 mg</i>	17
<i>paliperidone tab er 24hr 1.5 mg</i>	94	<i>paroxetine hcl tab 10 mg</i>	86
<i>paliperidone tab er 24hr 3 mg</i>	94	<i>paroxetine hcl tab 20 mg</i>	86
<i>paliperidone tab er 24hr 6 mg</i>	94	<i>paroxetine hcl tab 30 mg</i>	86
<i>paliperidone tab er 24hr 9 mg</i>	94	<i>paroxetine hcl tab 40 mg</i>	86
PALONOSETRON INJ 0.25/2ML.....	157	<i>paroxetine hcl tab er 24hr 12.5 mg</i>	86
PALYNZIQ INJ 10/0.5ML	150	<i>paroxetine hcl tab er 24hr 25 mg</i>	86
PALYNZIQ INJ 2.5/0.5	150	<i>paroxetine hcl tab er 24hr 37.5 mg</i>	86
PALYNZIQ INJ 20MG/ML	150	<i>paroxetine mesylate cap 7.5 mg (base</i>	
PAMELOR CAP 10MG	89	<i>equiv)</i>	114
PAMELOR CAP 25MG	89	PARSABIV INJ 10MG/2ML.....	134
PAMELOR CAP 50MG	89	PARSABIV INJ 2.5-0.5	134
PAMELOR CAP 75MG	89	PARSABIV INJ 5MG/ML	134
<i>pamidronate disodium for inj 30 mg</i> ..	135	PASER GRA 4GM.....	30
<i>pamidronate disodium for inj 90 mg</i> ..	135	PATADAY SOL 0.2%	223
<i>pamidronate disodium iv soln 3 mg/ml</i>		PATANASE SPR 0.6%	202
.....	135	PATANOL SOL 0.1% OP	223
<i>pamidronate disodium iv soln 9 mg/ml</i>		PAXIL CR TAB 12.5MG.....	86
.....	135	PAXIL CR TAB 25MG	86
PAMIDRONATE INJ 6MG/ML.....	135	PAXIL CR TAB 37.5MG.....	86

PAXIL SUS 10MG/5ML	86
PAXIL TAB 10MG	86
PAXIL TAB 20MG	86
PAXIL TAB 30MG	86
PAXIL TAB 40MG	86
PAZEO DRO 0.7%	223
PC LANCETS MIS 30G.....	128
PCP 100 KIT.....	161
<i>pediacare al liq 12.5/5ml</i>	<i>199</i>
PEDIARIX INJ 0.5ML.....	183
PEDVAX HIB INJ	183
<i>peg-prep kit</i>	<i>161</i>
<i>peg 3350-kcl-na bicarb-nacl-na sulfate</i>	
<i>for soln 236 gm</i>	<i>161</i>
<i>peg 3350-kcl-na bicarb-nacl-na sulfate</i>	
<i>for soln 240 gm</i>	<i>161</i>
<i>peg 3350-kcl-sod bicarb-nacl for soln</i>	
<i>420 gm</i>	<i>161</i>
PEGANONE TAB 250MG	81
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PEGASYS INJ 180MCG/M	181
PEGASYS INJ PROCLICK	181
PEGASYS KIT 180MCG/M	181
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<i>pegylax pow.....</i>	<i>161</i>
PEN G PROC INJ 600000.....	23
PENICILL GK/ INJ DEX 1MU	23
PENICILL GK/ INJ DEX 2MU	23
PENICILL GK/ INJ DEX 3MU	23
<i>penicillin g potassium for inj 20000000</i>	
<i>unit</i>	<i>23</i>
<i>penicillin g potassium for inj 5000000</i>	
<i>unit</i>	<i>23</i>
<i>penicillin g sodium for inj 5000000 unit</i>	
<i>.....</i>	<i>23</i>
<i>penicillin v potassium for soln 125</i>	
<i>mg/5ml.....</i>	<i>23</i>
<i>penicillin v potassium for soln 250</i>	
<i>mg/5ml.....</i>	<i>23</i>
<i>penicillin v potassium tab 250 mg</i>	<i>23</i>
<i>penicillin v potassium tab 500 mg</i>	<i>23</i>
PENLAC SOL 8%	211
PENLET II MIS REPL CAP.....	128
PENNSAID SOL 2%.....	7
PENTACEL INJ	183
PENTAM 300 INJ 300MG	35
PENTASA CAP 250MG CR	160
PENTASA CAP 500MG CR	160

<i>pentazocine w/ naloxone tab 50-0.5 mg</i>	
<i>.....</i>	<i>14</i>
PENTETATE CA SOL 200MG/ML.....	134
PENTETATE ZI SOL 200MG/ML.....	134
<i>pentoxifylline tab er 400 mg.....</i>	<i>176</i>
PEPCID SUS 40MG/5ML	160
PEPCID TAB 20MG	160
PEPCID TAB 40MG	160
PERCOCET TAB 10-325MG	15
PERCOCET TAB 2.5-325.....	14
PERCOCET TAB 5-325MG.....	15
PERCOCET TAB 7.5-325.....	15
PERFECT 28G MIS LANCETS	128
PERFECT 30G MIS LANCETS	129
PERFOROMIST NEB 20MCG	200
PERIDEX SOL 0.12%	221
PERIKABIVEN EMU	188
<i>perindopril erbumine tab 2 mg</i>	<i>50</i>
<i>perindopril erbumine tab 4 mg</i>	<i>50</i>
<i>perindopril erbumine tab 8 mg</i>	<i>50</i>
<i>perio gard sol 0.12%.....</i>	<i>221</i>
PERJETA INJ 420/14ML.....	45
<i>permethrin cream 5%</i>	<i>220</i>
<i>perphenazine-amitriptyline tab 2-10 mg</i>	
<i>.....</i>	<i>97</i>
<i>perphenazine-amitriptyline tab 2-25 mg</i>	
<i>.....</i>	<i>97</i>
<i>perphenazine-amitriptyline tab 4-10 mg</i>	
<i>.....</i>	<i>97</i>
<i>perphenazine-amitriptyline tab 4-25 mg</i>	
<i>.....</i>	<i>97</i>
<i>perphenazine-amitriptyline tab 4-50 mg</i>	
<i>.....</i>	<i>97</i>
<i>perphenazine tab 16 mg</i>	<i>97</i>
<i>perphenazine tab 2 mg.....</i>	<i>97</i>
<i>perphenazine tab 4 mg.....</i>	<i>97</i>
<i>perphenazine tab 8 mg.....</i>	<i>97</i>
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<i>pfizerpen inj 5mu</i>	<i>23</i>

PH 12 STERIL SOL FLOLAN.....	184	81
<i>pharbedryl cap 50mg</i>	199	<i>phenytoin sodium inj 50 mg/ml</i>	81
PHARMACY COU MIS LANCETS.....	129	<i>phenytoin susp 125 mg/5ml</i>	81
<i>phenadoz sup 12.5mg</i>	157	<i>philith tab 0.4-35</i>	140
<i>phenadoz sup 25mg</i>	157	PHLAG SPR	218
<i>phenazopyridine hcl tab 100 mg</i>	166	PHOSLYRA SOL.....	151
<i>phenazopyridine hcl tab 200 mg</i>	166	<i>phospha 250 tab neutral</i>	166
<i>phenazo tab 200mg</i>	166	<i>phospho-trin tab 250 neut</i>	166
<i>phendimetrazine tartrate cap er 24hr 105 mg</i>	134	PHOSPHOLINE SOL 0.125%OP	226
<i>phendimetrazine tartrate tab 35 mg</i> ..	134	PHOTOFRIN INJ 75MG.....	45
<i>phenelzine sulfate tab 15 mg</i>	85	PHOTREXA/PHO SOL VISC KIT.....	226
PHENERGAN INJ 25MG/ML	157	PHOTREXA VIS SOL 0.146-20.....	226
PHENERGAN INJ 50MG/ML	157	PHOXILLUM SOL BK4/2.5.....	184
PHENOBARB INJ 65MG/ML.....	81	<i>physiolyte sol</i>	220
<i>phenobarbital elixir 20 mg/5ml</i>	81	<i>physiosol sol irrigat</i>	220
<i>phenobarbital sodium inj 130 mg/ml</i> ..	81	PHYSOS SALIC INJ 1MG/ML.....	134
<i>phenobarbital tab 100 mg</i>	81	<i>phytonadione inj 10 mg/ml</i>	192
<i>phenobarbital tab 15 mg</i>	81	<i>phytonadione inj 1 mg/0.5ml (2 mg/ml)</i>	192
<i>phenobarbital tab 16.2 mg</i>	81	.....	192
<i>phenobarbital tab 30 mg</i>	81	<i>phytonadione tab 5 mg</i>	192
<i>phenobarbital tab 32.4 mg</i>	81	PICATO GEL 0.015%	209
<i>phenobarbital tab 60 mg</i>	81	PICATO GEL 0.05%.....	209
<i>phenobarbital tab 64.8 mg</i>	81	<i>pilocarpine hcl ophth soln 1%</i>	226
<i>phenobarbital tab 97.2 mg</i>	81	<i>pilocarpine hcl ophth soln 2%</i>	226
<i>phenohydro tab</i>	159	<i>pilocarpine hcl ophth soln 4%</i>	226
<i>phenoxybenzamine hcl cap 10 mg</i>	71	<i>pilocarpine hcl tab 5 mg</i>	164
<i>phentermine hcl cap 15 mg</i>	134	<i>pilocarpine hcl tab 7.5 mg</i>	164
<i>phentermine hcl cap 30 mg</i>	134	<i>pimozide tab 1 mg</i>	97
<i>phentermine hcl cap 37.5 mg</i>	134	<i>pimozide tab 2 mg</i>	97
<i>phentermine hcl tab 37.5 mg</i>	134	<i>pimtrea tab</i>	136
<i>phentolamine mesylate for inj 5 mg</i> ...	71	<i>pindolol tab 10 mg</i>	63
PHENTOLAMINE MESYLATE FOR INJ 5 MG	71	<i>pindolol tab 5 mg</i>	63
.....	71	<i>pioglitazone hcl-glimepiride tab 30-2 mg</i>	118
<i>phenylephrine-guaifenesin liqd 7.5-100 mg/5ml (1.5-20 mg/ml)</i>	201	.....	118
<i>phenylephrine hcl inj 10 mg/ml</i>	74	<i>pioglitazone hcl-glimepiride tab 30-4 mg</i>	118
<i>phenylephrine hcl ophth soln 10%</i>	226	.....	118
<i>phenylephrine hcl ophth soln 2.5%</i> ...	226	<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i>	118
PHENYTEK CAP 200MG	81	<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>	118
PHENYTEK CAP 300MG	81	<i>pioglitazone hcl tab 15 mg (base equiv)</i>	118
<i>phenytoin chew tab 50 mg</i>	81	.....	118
<i>phenytoin chw 50mg</i>	81	<i>pioglitazone hcl tab 30 mg (base equiv)</i>	118
<i>phenytoin sodium extended cap 100 mg</i>	81	.....	118
.....	81	<i>pioglitazone hcl tab 45 mg (base equiv)</i>	118
<i>phenytoin sodium extended cap 200 mg</i>	81	.....	118
.....	81	<i>piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)</i>	23
<i>phenytoin sodium extended cap 300 mg</i>	81		

<i>piperacillin sod-tazobactam sod for inj</i> 2.25 gm (2-0.25 gm)	23	POLY-VI-FLOR CHW 0.5MG.....	192
<i>piperacillin sod-tazobactam sod for inj</i> 4.5 gm (4-0.5 gm)	23	POLY-VI-FLOR CHW 1MG	192
<i>piperacillin sod-tazobactam sod for inj</i> 40.5 gm (36-4.5 gm)	23	POLY-VI-FLOR CHW W/IRON	192
<i>pirmella tab 1/35</i>	140	POLY-VI-FLOR MIS FS	192
<i>pirmella tab 7/7/7</i>	141	POLY-VI-FLOR MIS FS 0.25	192
<i>piroxicam cap 10 mg</i>	6	POLY-VI-FLOR MIS FS 0.5MG	192
<i>piroxicam cap 20 mg</i>	6	POLY-VI-FLOR SUS /IRON	192
PITOCIN INJ 10UNT/ML	150	POLY-VI-FLOR SUS 0.25/ML	192
PLAQUENIL TAB 200MG	179	<i>polycin oin op</i>	222
PLASMA-LYTE INJ -148	185	<i>polyethylene glycol 3350 oral packet</i> .	162
PLASMA-LYTE INJ -A	185	<i>polyethylene glycol 3350 oral powder</i>	162
PLAVIX TAB 300MG.....	177	<i>polymyxin b-trimethoprim ophth soln</i> 10000 unit/ml-0.1%	222
PLAVIX TAB 75MG.....	177	<i>polymyxin b sulfate for inj 500000 unit</i>	35
PLEGISOL SOL	71	<i>polysacchari cap iron</i>	190
PLEGRIDY INJ.....	108	POLYTRIM SOL OP	222
PLEGRIDY INJ PEN	108	POMALYST CAP 1MG	41
PLEGRIDY INJ STARTER.....	108	POMALYST CAP 2MG	41
PLEGRIDY PEN INJ STARTER	108	POMALYST CAP 3MG	41
<i>plenamine inj 15%</i>	189	POMALYST CAP 4MG	41
PLENVU SOL	161	<i>portia-28 tab</i>	139
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PLEXION CRE 9.8-4.8%	207	<i>pot & sod citrates w/ cit ac soln 550-500-</i> <i>334 mg/5ml</i>	166
PLEXION LIQ 9.8-4.8%.....	207	POTABA CAP 500MG.....	192
PLEXION LOT 9.8-4.8%	207	<i>potassium acetate inj 2 meq/ml</i>	187
PLIAGLIS CRE 7-7%.....	217	<i>potassium aminobenzoate packet 2 gm</i>	192
PNEUMOVAX 23 INJ 25/0.5	183	<i>potassium bicarbonate effer tab 25 meq</i>	187
<i>pnv-dha cap</i>	194	<i>potassium chloride 20 meq/l (0.15%) in</i> <i>dextrose 5% inj</i>	187
PNV-DHA CAP DOCUSATE	194	<i>potassium chloride 40 meq/l (0.3%) in</i> <i>dextrose 5% inj</i>	187
PNV-OMEGA CAP	194	<i>potassium chloride cap er 10 meq</i>	187
<i>pnv-select tab</i>	194	<i>potassium chloride cap er 8 meq</i>	187
PNV FOLIC AC TAB + IRON	194	<i>potassium chloride inj 10 meq/100ml</i>	187
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<i>podofilox soln 0.5%</i>	218	<i>potassium chloride microencapsulated</i> <i>crys er tab 10 meq</i>	187
<i>polocaine inj -mpf 1%</i>	3	<i>potassium chloride microencapsulated</i> <i>crys er tab 20 meq</i>	187
<i>polocaine inj -mpf 2%</i>	3	<i>potassium chloride oral soln 10% (20</i> <i>meq/15ml)</i>	187
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<i>potassium chloride powder packet 20 meq</i>	187	<i>pramipexole dihydrochloride tab er 24hr 2.25 mg</i>	91
<i>potassium chloride tab er 10 meq</i>	187	<i>pramipexole dihydrochloride tab er 24hr 3.75 mg</i>	91
<i>potassium chloride tab er 20 meq (1500 mg)</i>	187	<i>pramipexole dihydrochloride tab er 24hr 3 mg</i>	91
<i>potassium chloride tab er 8 meq (600 mg)</i>	187	<i>pramipexole dihydrochloride tab er 24hr 4.5 mg</i>	91
<i>potassium citrate & citric acid soln 1100-334 mg/5ml</i>	166	PRAMOSONE CRE 1-1%	212
<i>potassium citrate tab er 10 meq (1080 mg)</i>	166	PRAMOSONE CRE 1-2.5%	212
<i>potassium citrate tab er 15 meq (1620 mg)</i>	166	PRAMOSONE E CRE 1-2.5%	212
<i>potassium citrate tab er 5 meq (540 mg)</i>	166	PRAMOSONE LOT 1%	212
<i>potassium phosphates inj 150 mm/50ml (phos) 220 meq/50ml (k)</i>	186	PRAMOSONE LOT 2.5%	212
<i>potassium phosphates inj 15 mm/5ml (phos) 22 meq/5ml (k)</i>	185	PRAMOSONE OIN 1%	212
<i>potassium phosphates inj 45 mm/15ml (phos) 66 meq/15ml (k)</i>	186	PRAMOSONE OIN 2.5%	212
<i>pot bicarbonate & chloride effer tab 25 meq</i>	187	<i>pramox gel 1%</i>	217
<i>pot chloride tab 25meq ef</i>	187	<i>pramoxine-hc cream 1-2.5%</i>	212
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<i>pramcort cre 1-1%</i>	165	PRAVACHOL TAB 80MG	59
<i>pramipexole dihydrochloride tab 0.125 mg</i>	90	<i>pravastatin sodium tab 10 mg</i>	59
<i>pramipexole dihydrochloride tab 0.25 mg</i>	90	<i>pravastatin sodium tab 20 mg</i>	59
<i>pramipexole dihydrochloride tab 0.5 mg</i>	90	<i>pravastatin sodium tab 40 mg</i>	59
<i>pramipexole dihydrochloride tab 0.75 mg</i>	90	<i>pravastatin sodium tab 80 mg</i>	59
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<i>pramipexole dihydrochloride tab er 24hr 0.75 mg</i>	91	<i>prazosin hcl cap 2 mg</i>	52
		<i>prazosin hcl cap 5 mg</i>	52
		<i>pr benzoyl liq 7% wash</i>	207
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PREZISTA TAB 150MG.....	30	<i>prochlorperazine edisylate inj 5 mg/ml</i>	157
PREZISTA TAB 600MG.....	30	<i>prochlorperazine maleate tab 10 mg</i> <i>(base equivalent)</i>	157
PREZISTA TAB 75MG	30	<i>prochlorperazine maleate tab 5 mg (base</i> <i>equivalent)</i>	157
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PRIMLEV TAB 5-300MG	15	PROCTOCORT SUP 30MG	165
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PROFILNINE INJ 1500UNIT.....	174	<i>propafenone hcl tab 225 mg</i>	57
PROFILNINE INJ 500UNIT	174	<i>propafenone hcl tab 300 mg</i>	57
<i>progesterone im in oil 50 mg/ml</i>	151	<i>propranetheline bromide tab 15 mg</i>	159
<i>progesterone micronized cap 100 mg</i>	152	<i>propraparacaine hcl ophth soln 0.5%</i>	226
<i>progesterone micronized cap 200 mg</i>	152	PROPOFOL INJ 200/20ML.....	75
PROGLYCEM SUS 50MG/ML	147	<i>propofol iv emul 1000 mg/100ml (10</i>	
PROGRAF CAP 0.5MG	182	<i>mg/ml)</i>	75
PROGRAF CAP 1MG	182	<i>propofol iv emul 200 mg/20ml (10</i>	
PROGRAF CAP 5MG	182	<i>mg/ml)</i>	75
PROGRAF INJ 5MG/ML	182	<i>propofol iv emul 500 mg/50ml (10</i>	
PROLASTIN-C INJ 1000MG	197	<i>mg/ml)</i>	75
PROLENSA SOL 0.07%	223	<i>propoven inj</i>	75
PROLEUKIN INJ 22MU	45	<i>propoven inj 200/20ml</i>	75
PROLIA SOL 60MG/ML	150	<i>propoven inj 500/50ml</i>	75
PROMACTA TAB 12.5MG	176	<i>propranolol & hydrochlorothiazide tab</i>	
PROMACTA TAB 25MG	176	<i>40-25 mg</i>	61
PROMACTA TAB 50MG	176	<i>propranolol & hydrochlorothiazide tab</i>	
PROMACTA TAB 75MG	176	<i>80-25 mg</i>	61
<i>promethazine-dm syrup 6.25-15 mg/5ml</i>		<i>propranolol hcl cap er 24hr 120 mg</i>	63
.....	199	<i>propranolol hcl cap er 24hr 160 mg</i>	63
<i>promethazine-phenylephrine-codeine</i>		<i>propranolol hcl cap er 24hr 60 mg</i>	63
<i>syrup 6.25-5-10 mg/5ml</i>	199	<i>propranolol hcl cap er 24hr 80 mg</i>	63
<i>promethazine & phenylephrine syrup</i>		<i>propranolol hcl inj 1 mg/ml</i>	63
<i>6.25-5 mg/5ml</i>	198	<i>propranolol hcl oral soln 20 mg/5ml</i>	63
<i>promethazine hcl inj 25 mg/ml</i>	157	<i>propranolol hcl oral soln 40 mg/5ml</i>	63
<i>promethazine hcl inj 50 mg/ml</i>	157	<i>propranolol hcl tab 10 mg</i>	63
<i>promethazine hcl suppos 12.5 mg</i>	157	<i>propranolol hcl tab 20 mg</i>	63
<i>promethazine hcl suppos 25 mg</i>	157	<i>propranolol hcl tab 40 mg</i>	63
<i>promethazine hcl suppos 50 mg</i>	157	<i>propranolol hcl tab 60 mg</i>	63
<i>promethazine hcl syrup 6.25 mg/5ml</i>	157	<i>propranolol hcl tab 80 mg</i>	63
<i>promethazine hcl tab 12.5 mg</i>	157	<i>propylthiouracil tab 50 mg</i>	152
<i>promethazine hcl tab 25 mg</i>	157	PROSCAR TAB 5MG	165
<i>promethazine hcl tab 50 mg</i>	157	PROSOL INJ 20%	189
<i>promethazine w/ codeine syrup 6.25-10</i>		PROSTIN E2 SUP 20MG	150
<i>mg/5ml</i>	199	PROSTIN VR INJ 500MCG	71
<i>promethegan sup 12.5mg</i>	157	<i>protamine sulfate inj 10 mg/ml</i>	176
<i>promethegan sup 25mg</i>	157	PROTHELIAL PST 10%	221
<i>promethegan sup 50mg</i>	157	PROTONIX INJ 40MG	164
<i>prometh vc/ syp codeine</i>	199	PROTONIX PAK.....	164
<i>prometh vc sol plain</i>	198	PROTONIX TAB 20MG.....	164
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PROTOPIC OIN 0.03%	212
PROTOPIC OIN 0.1%	212
<i>protriptyline hcl tab 10 mg</i>	89
<i>protriptyline hcl tab 5 mg</i>	89
PROVAYBLUE INJ	134
PROVENGE INJ	45
PROVENTIL AER HFA	200
PROVERA TAB 10MG	152
PROVERA TAB 2.5MG	152
PROVERA TAB 5MG	152
PROVIDA DHA CAP	195
PROVIDA OB CAP	195
PROVIGIL TAB 100MG	109
PROVIGIL TAB 200MG	109
PROVISC INJ 1%	226
PROZAC CAP 10MG	86
PROZAC CAP 20MG	86
PROZAC CAP 40MG	86
PRUCLAIR CRE	218
PRUDOXIN CRE 5%	218
PRUMYX CRE	218
<i>pseudoeph-chlorphen w/ hydrocodone</i> <i>soln 60-4-5 mg/5ml</i>	199
<i>pseudoephed-bromphen-dm syrup 30-2-</i> <i>10 mg/5ml</i>	199
PSORCON CRE 0.05%	213
PSS SAFE LAN MIS	129
PSS SEL LANC MIS	129
PSS SEL PLAT MIS	129
PTS PANELS TES GLUCOSE	129
PULMICORT INH 180MCG	204
PULMICORT INH 90MCG	204
PULMICORT SUS 0.25MG/2	204
PULMICORT SUS 0.5MG/2	204
PULMICORT SUS 1MG/2ML	204
<i>pulmosal neb 7%</i>	202
PULMOZYME SOL 1MG/ML	201
PUREFE OB CAP PLUS	195
PUREFOLIX TAB 1-5000	189
<i>purevit dual cap fe plus</i>	190
PURIXAN SUS 20MG/ML	39
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<i>pyrazinamide tab 500 mg</i>	30
PYRIDIDIUM TAB 100MG	166
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<i>pyridostigmine bromide tab 60 mg</i>	109
<i>pyridostigmine bromide tab er 180 mg</i>	109
<i>pyridoxine hcl inj 100 mg/ml</i>	192
PYROGALL ACD OIN	218
Q	
QBRELIS SOL 1MG/ML	50
QC LANCETS MIS 28G	129
QC LANCETS MIS 30G	129
<i>qc nicotine gum 4mg</i>	113
QNASL AER 80MCG	203
QNASL CHILD SPR 40MCG	203
QSYMIA CAP 11.25-69	134
QSYMIA CAP 15-92MG	134
QSYMIA CAP 3.75-23	134
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QUALAQUIN CAP 324MG	27
<i>quasense tab</i>	137
<i>quazepam tab 15 mg</i>	103
QUDEXY XR CAP 100/24HR	81
QUDEXY XR CAP 150/24HR	81
QUDEXY XR CAP 200/24HR	81
QUDEXY XR CAP 25/24HR	81
QUDEXY XR CAP 50/24HR	81
QUELICIN INJ 20MG/ML	110
QUESTRAN POW 4GM	57
QUESTRAN POW 4GM LITE	57
<i>quetiapine fumarate tab 100 mg</i>	94
<i>quetiapine fumarate tab 200 mg</i>	94
<i>quetiapine fumarate tab 25 mg</i>	94
<i>quetiapine fumarate tab 300 mg</i>	94
<i>quetiapine fumarate tab 400 mg</i>	94
<i>quetiapine fumarate tab 50 mg</i>	94
<i>quetiapine fumarate tab er 24hr 150 mg</i>	94
<i>quetiapine fumarate tab er 24hr 200 mg</i>	94
<i>quetiapine fumarate tab er 24hr 300 mg</i>	94
<i>quetiapine fumarate tab er 24hr 400 mg</i>	94
<i>quetiapine fumarate tab er 24hr 50 mg</i>	94
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QUFLORA FE CHW	192

QUFLORA PED CHW 0.25MG	192	<i>ramipril cap 2.5 mg</i>	50
QUFLORA PED CHW 0.5MG.....	192	<i>ramipril cap 5 mg</i>	50
QUFLORA PED CHW 1MG	192	RANEXA TAB 1000MG	71
QUFLORA PED DRO 0.25MG	192	RANEXA TAB 500MG	71
QUFLORA PED DRO 0.5MG/ML	192	<i>ra nicotine dis 14mg/24h</i>	113
QUICKTEK TES	129	<i>ra nicotine dis 21mg/24h</i>	113
QUILLICHEW CHW 20MG ER.....	101	<i>ra nicotine dis 7mg/24hr</i>	113
QUILLICHEW CHW 30MG ER.....	101	<i>ra nicotine gum 2mg</i>	113
QUILLICHEW CHW 40MG ER.....	101	<i>ra nicotine gum 2mg cinn</i>	113
QUILLIVANT SUS 25MG/5ML	101	<i>ra nicotine gum 2mgfruit</i>	113
<i>quinapril-hydrochlorothiazide tab 10-12.5</i>		<i>ra nicotine gum 2mg mint</i>	113
<i>mg</i>	49	<i>ra nicotine gum 4mg</i>	113
<i>quinapril-hydrochlorothiazide tab 20-12.5</i>		<i>ra nicotine gum 4mg frut</i>	113
<i>mg</i>	49	<i>ra nicotine gum 4mg mint</i>	113
<i>quinapril-hydrochlorothiazide tab 20-25</i>		<i>ra nicotine loz 4mg mint</i>	113
<i>mg</i>	49	<i>ranitidine hcl cap 150 mg</i>	160
<i>quinapril hcl tab 10 mg</i>	50	<i>ranitidine hcl cap 300 mg</i>	160
<i>quinapril hcl tab 20 mg</i>	50	<i>ranitidine hcl inj 150 mg/6ml (25 mg/ml)</i>	
<i>quinapril hcl tab 40 mg</i>	50	.....	160
<i>quinapril hcl tab 5 mg</i>	50	<i>ranitidine hcl inj 50 mg/2ml (25 mg/ml)</i>	
QUINIDINE GL INJ 80MG/ML.....	57	.....	160
<i>quinidine gluconate tab er 324 mg</i>	57	<i>ranitidine hcl syrup 15 mg/ml (75</i>	
<i>quinidine sulfate tab 200 mg</i>	57	<i>mg/5ml)</i>	160
<i>quinidine sulfate tab 300 mg</i>	57	<i>ranitidine hcl tab 150 mg</i>	160
<i>quinine sulfate cap 324 mg</i>	27	<i>ranitidine hcl tab 300 mg</i>	160
QUINTET AC TES BLD GLUC	129	RAPAFLO CAP 4MG.....	165
QUINTET TES BLD GLUC	129	RAPAFLO CAP 8MG.....	165
QUTENZA KIT 8% 1-PCH	217	RAPAMUNE SOL 1MG/ML.....	182
QUTENZA KIT 8% 2-PCH	217	RAPAMUNE TAB 0.5MG	182
QVAR AER 40MCG.....	204	RAPAMUNE TAB 1MG.....	182
QVAR AER 80MCG.....	204	RAPAMUNE TAB 2MG.....	182
QVAR REDIHA AER 80MCG.....	204	RAPIVAB INJ 200MG/20.....	33
QVAR REDIHAL AER 40MCG	204	<i>rasagiline mesylate tab 0.5 mg (base</i>	
R		<i>equiv)</i>	91
R-NATAL OB CAP 20-1-320	195	<i>rasagiline mesylate tab 1 mg (base</i>	
<i>rabeprazole sodium ec tab 20 mg</i>	164	<i>equiv)</i>	91
RADICAVA INJ 30MG.....	107	RASUVO INJ 10MG.....	179
RADIOGARDASE CAP 0.5GM.....	134	RASUVO INJ 12.5MG	179
RA E-ZJECT MIS 28G.....	129	RASUVO INJ 15MG.....	179
RA E-ZJECT MIS 33G.....	129	RASUVO INJ 17.5MG	179
RA E-ZJECT MIS THIN 26G.....	129	RASUVO INJ 20MG.....	179
RA E-ZJECT MIS THIN 28G.....	129	RASUVO INJ 22.5MG	179
RA E-ZJECT MIS ULT THIN	129	RASUVO INJ 25MG.....	179
RAGWITEK SUB	178	RASUVO INJ 30MG.....	179
<i>rajani tab</i>	138	RASUVO INJ 7.5MG.....	179
<i>raloxifene hcl tab 60 mg</i>	152	RA TRUETEST TES	129
<i>ramipril cap 1.25 mg</i>	50	RAVICTI LIQ 1.1GM/ML	150
<i>ramipril cap 10 mg</i>	50	RAYALDEE CAP 30MCG	149

RAYOS TAB 1MG.....	147	RELION PRIME TES	129
RAYOS TAB 2MG.....	147	RELION PRIME TES GLUCOSE	129
RAYOS TAB 5MG.....	147	RELION TES ULTIMA	129
RAZADYNE ER CAP 16MG.....	83	RELION ULTRA MIS THIN 32G	129
RAZADYNE ER CAP 24MG.....	83	RELION ULTRA MIS THIN PLS	130
RAZADYNE ER CAP 8MG	83	RELISTOR INJ 12/0.6ML	162
RAZADYNE TAB 12MG	84	RELISTOR INJ 8/0.4ML	162
RAZADYNE TAB 4MG	84	RELISTOR TAB 150MG.....	162
RAZADYNE TAB 8MG	84	RELNATE DHA CAP	195
<i>react tab 1.5mg</i>	136	RELPAK TAB 20MG	106
REALITY MIS LANCETS	129	RELPAK TAB 40MG	106
REALITY TRIG MIS LANCETS	129	REMERON SLTB TAB 15MG.....	84
REBETOL CAP 200MG.....	31	REMERON SLTB TAB 30MG.....	84
REBETOL SOL 40MG/ML	31	REMERON SLTB TAB 45MG.....	84
REBIF INJ 22/0.5	108	REMERON TAB 15MG	84
REBIF INJ 44/0.5	108	REMERON TAB 30MG	84
REBIF REBIDO INJ 22/0.5	108	REMERON TAB 45MG	84
REBIF REBIDO INJ 44/0.5	108	REMICADE INJ 100MG	178
REBIF REBIDO INJ TITRATN	108	<i>remifentanil hcl for iv soln 1 mg</i>	15
REBIF TITRTN INJ PACK.....	108	<i>remifentanil hcl for iv soln 2 mg</i>	15
RECEDO GEL.....	218	<i>remifentanil hcl for iv soln 5 mg</i>	15
RECLAST INJ 5/100ML.....	135	REMODULIN INJ 10MG/ML	73
<i>reclipsen tab</i>	139	REMODULIN INJ 1MG/ML.....	73
RECOMBINATE INJ	174	REMODULIN INJ 2.5MG/ML	73
RECOMBINATE INJ 220-400	174	REMODULIN INJ 5MG/ML.....	73
RECOMBINATE INJ 401-800	174	RENACIDIN SOL	166
RECOMBINATE INJ 801-1240.....	174	RENAGEL TAB 800MG.....	151
RECOMBIVA-HB INJ 40MCG/ML	183	RENFLEXIS INJ 100MG	178
RECOMBIVA HB INJ 10MCG/ML.....	183	REVELA PAK 0.8GM	151
RECOMBIVA HB INJ 5MCG/0.5.....	183	REVELA PAK 2.4GM.....	151
RECOTHROM SOL 20000UNT	175	REVELA TAB 800MG.....	151
RECOTHROM SOL 5000UNIT.....	175	REOPRO INJ 2MG/ML.....	177
RECTIV OIN 0.4%	162	<i>repaglinide-metformin hcl tab 1-500 mg</i>	119
REDICHEW RX CHW	195	<i>repaglinide-metformin hcl tab 2-500 mg</i>	119
REFUAH PLUS TES BLD GLUC	129	<i>repaglinide tab 0.5 mg</i>	119
REGIMEX TAB 25MG.....	134	<i>repaglinide tab 1 mg</i>	119
REGLAN TAB 10MG	157	<i>repaglinide tab 2 mg</i>	119
REGLAN TAB 5MG	157	REPATHA INJ 140MG/ML.....	60
REGONOL INJ 5MG/ML.....	107	REPATHA PUSH INJ 420/3.5.....	60
REGANEX GEL 0.01%	220	REPATHA SURE INJ 140MG/ML	60
<i>relagard gel</i>	166	REQUIP TAB 0.25MG.....	91
RELENZA MIS DISKHALE	33	REQUIP TAB 0.5MG.....	91
RELHIST CHW	198	REQUIP TAB 1MG	91
RELION BLOOD TES GLUCOSE	129	REQUIP TAB 2MG	91
RELION LANCE MIS STND 21G.....	129	REQUIP TAB 3MG	91
RELION LANCE MIS THIN 26G	129	REQUIP TAB 4MG	91
RELION LANCE MIS THIN 30G	129		
RELION MICRO MIS THIN 33G	129		

REQUIP TAB 5MG	91	REVLIMID CAP 5MG	41
REQUIP XL TAB 12MG	91	<i>revonto inj 20mg</i>	109
REQUIP XL TAB 2MG	91	REXULTI TAB 0.25MG.....	94
REQUIP XL TAB 4MG	91	REXULTI TAB 0.5MG	94
REQUIP XL TAB 6MG	91	REXULTI TAB 1MG	94
REQUIP XL TAB 8MG	91	REXULTI TAB 2MG	94
RESCRIPTOR TAB 100 MG.....	28	REXULTI TAB 3MG	94
RESCRIPTOR TAB 200MG.....	28	REXULTI TAB 4MG	94
RESECTISOL SOL 5%	166	REYATAZ CAP 150MG.....	30
RESTASIS EMU 0.05%.....	225	REYATAZ CAP 200MG.....	30
RESTASIS MUL EMU 0.05%.....	225	REYATAZ CAP 300MG.....	30
<i>restizan gel</i>	218	REYATAZ POW 50MG.....	30
RESTORA RX CAP 60-1.25.....	162	REZESOL LOT 2-6%	207
RESTORA SPRI PAK 15-0.25	162	RHOFADE CRE 1%	220
RESTORIL CAP 15MG.....	103	RHOGAM PLUS INJ 300MCG	180
RESTORIL CAP 22.5MG.....	103	RHOPHYLAC INJ 1500/2ML.....	180
RESTORIL CAP 30MG.....	103	RHOPRESSA SOL 0.02%	226
RESTORIL CAP 7.5MG.....	103	RIASTAP SOL 1GM	174
RETACRIT INJ 10000UNT	172	RIAX AER 5.5%	207
RETACRIT INJ 2000UNIT.....	171	RIAX AER 9.5%	207
RETACRIT INJ 3000UNIT.....	171	RIBAPAK PAK 1200/DAY	32
RETACRIT INJ 40000UNT	172	RIBAPAK PAK 800/DAY.....	32
RETACRIT INJ 4000UNIT.....	172	RIBAPAK TAB 1000/DAY	32
RETIN-A CRE 0.025%.....	207	RIBAPAK TAB 600/DAY.....	32
RETIN-A CRE 0.05%	207	<i>ribasphere cap 200mg</i>	32
RETIN-A CRE 0.1%	207	<i>ribasphere tab 200mg</i>	32
RETIN-A GEL 0.01%.....	207	<i>ribasphere tab 400mg</i>	32
RETIN-A GEL 0.025%.....	207	<i>ribasphere tab 600mg</i>	32
RETIN-A MICR GEL 0.04%	207	<i>ribavirin cap 200 mg</i>	32
RETIN-A MICR GEL 0.04%PMP	207	<i>ribavirin for inhal soln 6 gm</i>	203
RETIN-A MICR GEL 0.06%	207	<i>ribavirin tab 200 mg</i>	32
RETIN-A MICR GEL 0.08%	207	RIDAURA CAP 3MG	179
RETIN-A MICR GEL 0.1%	207	<i>rifabutin cap 150 mg</i>	35
RETIN-A MICR GEL 0.1%PUMP	207	RIFADIN CAP 150MG.....	30
RETISERT IMP 0.59MG	223	RIFADIN INJ 600 MG.....	30
RETROVIR CAP 100MG	29	RIFAMATE CAP	30
RETROVIR INJ 10MG/ML.....	29	<i>rifampin cap 150 mg</i>	30
RETROVIR SYP 50MG/5ML	29	<i>rifampin cap 300 mg</i>	30
REVATIO INJ.....	73	<i>rifampin for inj 600 mg</i>	30
REVATIO SUS 10MG/ML	73	RIFATER TAB	31
REVATIO TAB 20MG.....	73	RIGHTEST ALT MIS ADAPTOR.....	130
REVEAL TES BLD GLUC.....	130	RIGHTEST MIS GL300	130
REVESTA CAP 1MG-5750	189	RIGHTEST TES GS100	130
REVLIMID CAP 10MG	41	RIGHTEST TES GS300	130
REVLIMID CAP 15MG	41	RIGHTEST TES GS550	130
REVLIMID CAP 2.5MG	41	RILUTEK TAB 50MG.....	107
REVLIMID CAP 20MG	41	<i>riluzole tab 50 mg</i>	107
REVLIMID CAP 25MG	41	<i>rimantadine hydrochloride tab 100 mg</i> 33	

RIMSO-50 SOL 50%	166	RITALIN TAB 10MG	101
<i>ringer's solution</i>	186	RITALIN TAB 20MG	101
<i>ringer's solution for irrigation</i>	220	RITALIN TAB 5MG	101
RIOMET SOL	116	<i>ritonavir tab 100 mg</i>	30
RIOMET SOL 500/5ML	116	RITUXAN INJ 100MG	45
<i>risedronate sodium tab 150 mg</i>	135	RITUXAN INJ 500MG	45
<i>risedronate sodium tab 30 mg</i>	135	RITUXAN INJ HYCELA.....	45
<i>risedronate sodium tab 35 mg</i>	135	<i>rivastigmine tartrate cap 1.5 mg</i>	84
<i>risedronate sodium tab 5 mg</i>	135	<i>rivastigmine tartrate cap 3 mg</i>	84
<i>risedronate sodium tab delayed release</i>		<i>rivastigmine tartrate cap 4.5 mg</i>	84
<i>35 mg</i>	135	<i>rivastigmine tartrate cap 6 mg</i>	84
RISPERDAL INJ 12.5MG.....	94	<i>rivastigmine td patch 24hr 13.3 mg/24hr</i>	
RISPERDAL INJ 25MG.....	94	.....	84
RISPERDAL INJ 37.5MG.....	94	<i>rivastigmine td patch 24hr 4.6 mg/24hr</i>	
RISPERDAL INJ 50MG.....	94	.....	84
RISPERDAL SOL 1MG/ML	94	<i>rivastigmine td patch 24hr 9.5 mg/24hr</i>	
RISPERDAL TAB 0.25MG.....	94	.....	84
RISPERDAL TAB 0.5MG.....	94	RIXUBIS INJ 1000UNIT.....	174
RISPERDAL TAB 1MG	95	RIXUBIS INJ 2000UNIT.....	174
RISPERDAL TAB 2MG	95	RIXUBIS INJ 250 UNIT	174
RISPERDAL TAB 3MG	95	RIXUBIS INJ 3000UNIT.....	174
RISPERDAL TAB 4MG	95	RIXUBIS INJ 500UNIT	174
<i>risperidone orally disintegrating tab 0.25</i>		<i>rizatriptan benzoate oral disintegrating</i>	
<i>mg</i>	95	<i>tab 10 mg (base eq)</i>	106
<i>risperidone orally disintegrating tab 0.5</i>		<i>rizatriptan benzoate oral disintegrating</i>	
<i>mg</i>	95	<i>tab 5 mg (base eq)</i>	106
<i>risperidone orally disintegrating tab 1 mg</i>		<i>rizatriptan benzoate tab 10 mg (base</i>	
.....	95	<i>equivalent)</i>	106
<i>risperidone orally disintegrating tab 2 mg</i>		<i>rizatriptan benzoate tab 5 mg (base</i>	
.....	95	<i>equivalent)</i>	106
<i>risperidone orally disintegrating tab 3 mg</i>		ROBAXIN-750 TAB 750MG	109
.....	95	ROBAXIN INJ 100MG/ML.....	109
<i>risperidone orally disintegrating tab 4 mg</i>		ROBAXIN TAB 500MG.....	109
.....	95	ROBINUL FORT TAB 2MG	159
<i>risperidone orally disintegrating tab 4 mg</i>		ROBINUL INJ 0.2MG/ML.....	159
.....	95	ROBINUL TAB 1MG.....	159
<i>risperidone soln 1 mg/ml</i>	95	ROCALTROL CAP 0.25MCG	149
<i>risperidone tab 0.25 mg</i>	95	ROCALTROL CAP 0.5MCG	149
<i>risperidone tab 0.5 mg</i>	95	ROCALTROL SOL 1MCG/ML	149
<i>risperidone tab 0.5mg od</i>	95	ROCURON BRO SOL 100/10ML	110
<i>risperidone tab 1 mg</i>	95	<i>rocuronium bromide iv soln 100 mg/10ml</i>	
<i>risperidone tab 1mg odt</i>	95	<i>(10 mg/ml)</i>	110
<i>risperidone tab 2 mg</i>	95	<i>rocuronium bromide iv soln 50 mg/5ml</i>	
<i>risperidone tab 2mg odt</i>	95	<i>(10 mg/ml)</i>	110
<i>risperidone tab 3 mg</i>	95	ROMIDEPSIN INJ 10MG	46
<i>risperidone tab 4 mg</i>	95	<i>ropinirole hydrochloride tab 0.25 mg</i> ...91	
RITALIN LA CAP 10MG.....	101	<i>ropinirole hydrochloride tab 0.5 mg</i>.....91	
RITALIN LA CAP 20MG.....	101	<i>ropinirole hydrochloride tab 1 mg</i>	91
RITALIN LA CAP 30MG.....	101		
RITALIN LA CAP 40MG.....	101		

<i>ropinirole hydrochloride tab 2 mg</i>	91	RYTARY CAP 95MG.....	91
<i>ropinirole hydrochloride tab 3 mg</i>	91	RYTHMOL SR CAP 225MG	57
<i>ropinirole hydrochloride tab 4 mg</i>	91	RYTHMOL SR CAP 325MG	57
<i>ropinirole hydrochloride tab 5 mg</i>	91	RYTHMOL SR CAP 425MG	57
<i>ropinirole hydrochloride tab er 24hr 12 mg (base equivalent)</i>	91	RYVENT TAB 6MG	199
<i>ropinirole hydrochloride tab er 24hr 2 mg (base equivalent)</i>	91	S	
<i>ropinirole hydrochloride tab er 24hr 4 mg (base equivalent)</i>	91	SABRIL POW 500MG	81
<i>ropinirole hydrochloride tab er 24hr 6 mg (base equivalent)</i>	91	SABRIL TAB 500MG	81
<i>ropinirole hydrochloride tab er 24hr 8 mg (base equivalent)</i>	91	SAFE-T-LANCE MIS 21G.....	130
ROPIVAC/NACL INJ 0.2-0.9%.....	3	SAFE-T-LANCE MIS 25G.....	130
<i>ropivacaine hcl inj 10 mg/ml</i>	3	SAFE-T-LANCE MIS HI FLOW	130
<i>ropivacaine hcl inj 2 mg/ml</i>	3	SAFE-T-LANCE MIS LOW FLOW	130
<i>ropivacaine hcl inj 5 mg/ml</i>	3	SAFE-T-LANCE MIS NOR FLOW	130
<i>ropivacaine hcl inj 7.5 mg/ml</i>	3	SAFE-T-PRO MIS LANCETS	130
ROPIVACAINE INJ 0.2%	3	SAFE-T-PRO MIS PLUS.....	130
ROPIVACAINE INJ 0.5%	3	SAFETY 21G MIS LANCETS.....	130
<i>rosadan cre 0.75%</i>	220	SAFETY 28G MIS LANCETS.....	130
<i>rosadan gel 0.75%</i>	220	SAFETY LET MIS LANCETS.....	130
ROSE GLO TES 1.5MG	225	SAFETY MIS LANCETS	130
<i>rosuvastatin calcium tab 10 mg</i>	59	SAFETY SEAL MIS 28G.....	130
<i>rosuvastatin calcium tab 20 mg</i>	59	SAFETY SEAL MIS 30G.....	130
<i>rosuvastatin calcium tab 40 mg</i>	59	SAFYRAL TAB	139
<i>rosuvastatin calcium tab 5 mg</i>	59	SAIZEN INJ 5MG.....	148
ROTARIX SUS.....	183	SAIZEN INJ 8.8MG	148
ROTATEQ SOL	183	SALAGEN TAB 5MG	164
ROWASA KIT 4GM.....	160	SALAGEN TAB 7.5MG	164
<i>rowepra tab 500mg</i>	81	SALEX SHA 6%.....	218
ROXICODONE TAB 15MG	15	<i>salicylic acid cream 6%</i>	219
ROXICODONE TAB 30MG	15	<i>salicylic acid er film-forming soln 28.5%</i>	219
ROXICODONE TAB 5MG.....	15	.....	219
ROXIFOL-D TAB 1-500	189	<i>salicylic acid film forming liquid 27.5%</i>	219
ROXYBOND TAB 15MG	15	.....	219
ROXYBOND TAB 30MG	15	<i>salicylic acid foam 6%</i>	219
ROZEREM TAB 8MG.....	104	<i>salicylic acid gel 6%</i>	219
RUBRACA TAB 200MG	46	<i>salicylic acid lotion 6%</i>	219
RUBRACA TAB 250MG	46	<i>salicylic acid shampoo 6%</i>	219
RUBRACA TAB 300MG	46	<i>salicylic acid soln 26%</i>	219
RUCONEST INJ 2100UNIT	176	<i>salicylic ac liq 27.5%</i>	219
RYANODEX INJ 250MG	109	<i>saline flush inj zr 0.9%</i>	184
RYDAPT CAP 25MG	43	<i>saline injection bacteriostatic</i>	184
RYTARY CAP 145MG.....	92	<i>salisol fort sol 26%</i>	219
RYTARY CAP 195MG.....	92	<i>salitech lot forte</i>	219
RYTARY CAP 245MG.....	92	SALIVAMAX POW	221
		<i>salrix sus 50%</i>	216
		<i>salsalate tab 500 mg</i>	6
		<i>salsalate tab 750 mg</i>	6
		SALVAX AER 6%.....	219
		SAMSCA TAB 15MG.....	155

SAMSCA TAB 30MG.....	155	<i>selegiline hcl cap 5 mg</i>	92
SANCUSO DIS 3.1MG	157	<i>selegiline hcl tab 5 mg</i>	92
SANDIMMUNE CAP 100MG	182	<i>selenious acid inj 40 mcg/ml</i>	192
SANDIMMUNE CAP 25MG	182	<i>selenium sulfide lotion 2.5%</i>	212
SANDIMMUNE INJ 50MG/ML	182	<i>selenium sulfide shampoo 2.25%</i>	212
SANDIMMUNE SOL 100MG/ML	182	SELRX SHA 2.3%	212
SANDOSTATIN INJ 100MCG	114	SELZENTRY SOL 20MG/ML	27
SANDOSTATIN INJ 500MCG	114	SELZENTRY TAB 150MG	28
SANDOSTATIN INJ 50MCG/ML	114	SELZENTRY TAB 25MG	27
SANDOSTATIN KIT LAR 10MG.....	114	SELZENTRY TAB 300MG	28
SANDOSTATIN KIT LAR 20MG.....	114	SELZENTRY TAB 75MG	28
SANDOSTATIN KIT LAR 30MG.....	114	SEMPREX-D CAP 8-60MG	198
SANTYL OIN 250/GM	219	SENSIPAR TAB 30MG	134
SAPHRIS SUB 10MG.....	95	SENSIPAR TAB 60MG	134
SAPHRIS SUB 2.5MG.....	95	SENSIPAR TAB 90MG	134
SAPHRIS SUB 5MG	95	<i>sensorcaine/ inj epi 0.25</i>	3
SAPSCARE MIS TWIST	130	<i>sensorcaine/ inj epi 0.5%</i>	3
SARAFEM TAB 10MG	86	<i>sensorcaine inj -mpf/epi</i>	3
SARAFEM TAB 20MG	86	SENSORCAINE INJ -MPF/EPI	3
<i>sash kit 100/ml</i>	184	<i>sensorcaine inj 0.25%</i>	3
SAVAYSA TAB 15MG.....	170	<i>sensorcaine inj 0.5%</i>	3
SAVAYSA TAB 30MG.....	170	<i>sensorcaine inj mpf0.25%</i>	3
SAVAYSA TAB 60MG.....	170	<i>sensorcaine inj mpf 0.5%</i>	3
SAVELLA MIS TITR PAK	102	<i>sensorcaine inj mpf0.75%</i>	3
SAVELLA TAB 100MG	103	SEREVENT DIS AER 50MCG.....	200
SAVELLA TAB 12.5MG	102	SERNIVO SPR.....	213
SAVELLA TAB 25MG	103	SEROQUEL TAB 100MG	95
SAVELLA TAB 50MG	103	SEROQUEL TAB 200MG	95
SAXENDA INJ 18MG/3ML	134	SEROQUEL TAB 25MG	95
SB LANCETS MIS THIN	130	SEROQUEL TAB 300MG	95
SB LANCETS MIS ULTR THN	130	SEROQUEL TAB 400MG	95
<i>scalacort lot 2%</i>	214	SEROQUEL TAB 50MG	95
SCAR MANAGE GEL	219	SEROQUEL XR TAB 150MG.....	95
SCLEROSOL AER INTRAPLE	202	SEROQUEL XR TAB 200MG.....	95
<i>scopolamine td patch 72hr 1 mg/3days</i>	158	SEROQUEL XR TAB 300MG.....	95
SE-NATAL 19 CHW	195	SEROQUEL XR TAB 400MG.....	95
SE-NATAL 19 TAB	195	SEROQUEL XR TAB 50MG	95
<i>se-tan plus cap</i>	190	SEROSTIM INJ 4MG.....	148
SEASONIQUE TAB.....	137	SEROSTIM INJ 5MG.....	148
SECONAL SOD CAP 100MG.....	104	SEROSTIM INJ 6MG.....	148
SEEBRI NEOHA CAP 15.6MCG.....	198	<i>sertraline hcl oral concentrate for</i> <i>solution 20 mg/ml</i>	86
SEGLUROMET TAB 2.5-1000.....	120	<i>sertraline hcl tab 100 mg</i>	86
SEGLUROMET TAB 2.5-500	120	<i>sertraline hcl tab 25 mg</i>	86
SEGLUROMET TAB 7.5-1000.....	120	<i>sertraline hcl tab 50 mg</i>	86
SEGLUROMET TAB 7.5-500	120	<i>setlakin tab</i>	137
SELECT-OB+ PAK DHA	195	<i>sevelamer carbonate packet 0.8 gm</i> ..	151
SELECT-OB CHW	195	<i>sevelamer carbonate packet 2.4 gm</i> ..	151

<i>sevelamer carbonate tab 800 mg</i>	151	SINGULAIR CHW 5MG	201
<i>sevoflurane inhal soln</i>	75	SINGULAIR GRA 4MG	201
SFROWASA ENE 4GM	160	SINGULAIR TAB 10MG	201
<i>sharobel tab 0.35mg</i>	140	SINUVA IMP 1350MCG.....	203
SHINGRIX INJ 50MCG	183	<i>sirolimus tab 0.5 mg</i>	182
SHOHL SOL MODIFIED	167	<i>sirolimus tab 1 mg</i>	182
SIDE BUTTON MIS SAFETY.....	130	<i>sirolimus tab 2 mg</i>	182
SIGNIFOR INJ 0.3MG/ML	150	SIRTURO TAB 100MG.....	31
SIGNIFOR INJ 0.6MG/ML	150	SITAVIG TAB 50MG.....	32
SIGNIFOR INJ 0.9MG/ML	150	SIVEXTRO INJ 200MG	35
SIGNIFOR LAR INJ 20MG	114	SIVEXTRO TAB 200MG	35
SIGNIFOR LAR INJ 40MG	114	SKELAXIN TAB 800MG.....	109
SIGNIFOR LAR INJ 60MG	114	SKLICE LOT 0.5%	220
SIKLOS TAB 100MG	46	SKYLA IUD 13.5MG	140
<i>siladryl alr liq 12.5/5ml</i>	199	SMARTEST MIS LANCETS.....	130
SILALITE PAK MIS.....	219	SMARTEST TES BLD GLUC.....	130
<i>sildenafil citrate iv soln 10 mg/12.5ml</i> (base equivalent)	73	SMART SENSE MIS LANC 21G.....	130
<i>sildenafil citrate tab 20 mg</i>	73	SMART SENSE MIS LANC 26G.....	130
SILENOR TAB 3MG	105	SMART SENSE MIS LANC 30G.....	130
SILENOR TAB 6MG	105	SMART SENSE MIS LANC 33G.....	130
SILIPAC KIT	219	SMART SENSE TES TEST.....	130
SILIQ INJ 210/1.5.....	179	SM LANCETS MIS 21G	130
SILVADENE CRE 1%.....	209	SM LANCETS MIS 33G	130
SILVER NITRA OIN 10%	219	SM LANCETS MIS THIN 26G	130
SILVER NITRA SOL 0.5%	219	SM LANCETS MIS THIN 30G	130
SILVER NITRA SOL 10%	219	<i>sm nicotine dis 14mg/24h</i>	113
SILVER NITRA SOL 25%	219	<i>sm nicotine dis 21mg</i>	113
SILVER NITRA SOL 50%	219	<i>sm nicotine dis 21mg/24h</i>	113
<i>silver sulfadiazine cream 1%</i>	209	<i>sm nicotine dis 7mg/24hr</i>	113
SIMBRINZA SUS 1-0.2%.....	225	<i>sm nicotine gum 2mg</i>	113
SIMPONI ARIA SOL 50MG/4ML	179	<i>sm nicotine gum 2mg mint</i>	113
SIMPONI INJ 100MG/ML	179	<i>sm nicotine gum 4mg</i>	113
SIMPONI INJ 50/0.5ML	179	<i>sm nicotine gum 4mg mint</i>	113
SIMULECT INJ 10MG	182	<i>sm nicotine loz 4mg mint</i>	113
SIMULECT INJ 20MG	182	SMOFLIPID EMU	188
<i>simvastatin tab 10 mg</i>	59	SOD BICARB SOL D5W	186
<i>simvastatin tab 20 mg</i>	59	<i>sod chloride inj 0.9%</i>	184
<i>simvastatin tab 40 mg</i>	60	SOD DIURIL INJ 500MG.....	70
<i>simvastatin tab 5 mg</i>	59	SOD EDECIN INJ 50MG.....	69
<i>simvastatin tab 80 mg</i>	60	<i>sod ferric gluc cmplx in sucrose iv soln</i> <i>12.5 mg/ml (fe eq)</i>	190
SINEMET CR TAB 25-100MG	92	<i>sodium acetate inj 2 meq/ml</i>	186
SINEMET CR TAB 50-200MG	92	<i>sodium acetate inj 4 meq/ml</i>	186
SINEMET TAB 10-100MG	92	<i>sodium benzoate & sodium</i> <i>phenylacetate iv soln 10-10%</i>	150
SINEMET TAB 25-100MG	92	<i>sodium bicarbonate inj 4.2%</i>	186
SINEMET TAB 25-250MG	92	<i>sodium bicarbonate inj 7.5%</i>	186
SINGLE-LET MIS 23G	130	<i>sodium bicarbonate inj 8.4%</i>	186
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<i>sodium chloride flush iv soln 0.9%</i>	184	SOFT TOUCH MIS LANCETS.....	130
<i>sodium chloride inj 0.45%</i>	186	SOLIQUA INJ 100/33.....	117
<i>sodium chloride inj 0.9%</i>	186	SOLIRIS INJ 10MG/ML.....	177
<i>sodium chloride inj 2.5 meq/ml (14.6%)</i>		SOLODYN TAB 105MG.....	25
<i>.....</i>	186	SOLODYN TAB 115MG.....	25
<i>sodium chloride inj 3%.....</i>	186	SOLODYN TAB 55MG.....	25
<i>sodium chloride inj 4 meq/ml (23.4%)</i>		SOLODYN TAB 65MG.....	25
<i>.....</i>	186	SOLODYN TAB 80MG.....	25
<i>sodium chloride inj 5%.....</i>	186	SOLTAMOX SOL 10MG/5ML.....	40
<i>sodium chloride irrigation soln 0.9%..</i>	166	SOLU-CORTEF INJ 1000MG.....	147
<i>sodium chloride iv soln 0.9%.....</i>	186	SOLU-CORTEF INJ 100MG.....	147
<i>sodium chloride soln nebu 0.9%</i>	202	SOLU-CORTEF INJ 250MG.....	147
<i>sodium chloride soln nebu 10%</i>	202	SOLU-CORTEF INJ 500MG.....	147
<i>sodium chloride soln nebu 3%</i>	202	SOLU-MEDROL INJ 1000MG.....	147
<i>sodium chloride soln nebu 7%</i>	202	SOLU-MEDROL INJ 125MG.....	147
<i>sodium citrate & citric acid soln 500-334</i>		SOLU-MEDROL INJ 1GM.....	147
<i>mg/5ml</i>	167	SOLU-MEDROL INJ 2GM.....	147
<i>sodium fluoride chew tab 0.25 mg f</i>		SOLU-MEDROL INJ 40MG.....	147
<i>(from 0.55 mg naf)</i>	193	SOLU-MEDROL INJ 500MG.....	147
<i>sodium fluoride chew tab 0.5 mg f (from</i>		SOLUS V2 MIS LANC 28G.....	130
<i>1.1 mg naf)</i>	192	SOLUS V2 MIS LANC 30G.....	130
<i>sodium fluoride chew tab 1 mg f (from</i>		SOLUS V2 TES AUDIBLE.....	130
<i>2.2 mg naf)</i>	193	SOMA TAB 250MG.....	109
<i>sodium fluoride soln 0.5 mg/ml f (from</i>		SOMA TAB 350MG.....	109
<i>1.1 mg/ml naf).....</i>	193	SOMATULINE INJ 120/.5ML.....	114
<i>sodium fluoride tab 0.5 mg f (from 1.1</i>		SOMATULINE INJ 60/0.2ML.....	114
<i>mg naf)</i>	193	SOMATULINE INJ 90/0.3ML.....	114
<i>sodium fluoride tab 1 mg f (from 2.2 mg</i>		SOMAVERT INJ 10MG.....	114
<i>naf)</i>	193	SOMAVERT INJ 15MG.....	114
<i>sodium phenylbutyrate oral powder 3</i>		SOMAVERT INJ 20MG.....	114
<i>gm/teaspoonful</i>	162	SOMAVERT INJ 25MG.....	114
<i>sodium phenylbutyrate tab 500 mg ...</i>	162	SOMAVERT INJ 30MG.....	115
<i>sodium phosphates inj 15 mm/5ml</i>		SONATA CAP 10MG.....	104
<i>(phos) 20 meq/5ml (na)</i>	186	SONATA CAP 5MG.....	104
<i>sodium phosphates inj 45 mm/15ml</i>		SOOLANTRA CRE 1%.....	220
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<i>sodium polystyrene sulfonate oral susp</i>		SORBITOL SOL 3.3% IRR.....	166
<i>15 gm/60ml.....</i>	151	SORBITOL SOL 3% IRR.....	166
<i>sodium polystyrene sulfonate powder</i>	151	SORIATANE CAP 10MG.....	211
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<i>30 gm/120ml</i>	151	SORIATANE CAP 25MG.....	211
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<i>sodium thiosulfate inj 25%.....</i>	134	<i>sorine tab 120mg</i>	57
SOD LACTATE INJ 5MEQ/ML.....	186	<i>sorine tab 160mg</i>	57
SOD NITRITE INJ 30MG/ML.....	134	<i>sorine tab 240mg</i>	57
SOD SUL/SULF EMU 10-5%.....	207	<i>sorine tab 80mg</i>	57
SOD SUL/SULF SUS 10-5%.....	207	<i>sotalol hcl (afib/af) tab 120 mg.....</i>	57
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<i>sotalol hcl tab 120 mg</i>	57	STARLIX TAB 60MG	119
<i>sotalol hcl tab 160 mg</i>	57	<i>stavudine cap 15 mg</i>	29
<i>sotalol hcl tab 240 mg</i>	57	<i>stavudine cap 20 mg</i>	29
<i>sotalol hcl tab 80 mg</i>	57	<i>stavudine cap 30 mg</i>	29
SOTRADECOL INJ 1%	71	<i>stavudine cap 40 mg</i>	29
SOTRADECOL INJ 3%	71	STELARA INJ 45MG/0.5	179
SOTYLIZE SOL 5MG/ML	57	STELARA INJ 5MG/ML	179
SOVALDI TAB 400MG	32	STELARA INJ 90MG/ML	179
SPECTRACEF TAB 400MG	19	STERILANCE MIS 1.8MM	130
<i>spinosad susp 0.9%</i>	220	STERILANCE MIS TL 28G	130
SPINRAZA INJ 12MG/5ML	114	STERILANCE MIS TL 30G	130
SPIRIVA AER 1.25MCG	198	STERILANCE MIS TL 32G	130
SPIRIVA CAP HANDHLR	198	STERIL TALC SUS 5GM	202
SPIRIVA SPR 2.5MCG	198	STERITALC POW 2GM	202
<i>spironolactone & hydrochlorothiazide tab</i> <i>25-25 mg</i>	69	STERITALC POW 3GM	202
<i>spironolactone tab 100 mg</i>	51	STERITALC POW 4GM	202
<i>spironolactone tab 25 mg</i>	51	STIMATE SOL 1.5MG/ML	155
<i>spironolactone tab 50 mg</i>	51	STIOLTO AER 2.5-2.5	197
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SPORANOX CAP PULSEPAK	26	<i>stop smoking gum 2mg mint</i>	113
SPORANOX SOL 10MG/ML	26	<i>stop smoking gum 2mg orig</i>	113
<i>sprintec 28 tab 28 day</i>	140	<i>stop smoking gum 4mg</i>	113
SPRITAM TAB 1000MG	81	<i>stop smoking loz 4mg mint</i>	113
SPRITAM TAB 250MG	81	STRATTERA CAP 100MG	101
SPRITAM TAB 500MG	81	STRATTERA CAP 10MG	101
SPRITAM TAB 750MG	81	STRATTERA CAP 18MG	101
SPRIX SPR 15.75MG	6	STRATTERA CAP 25MG	101
SPRYCEL TAB 100MG	43	STRATTERA CAP 40MG	101
SPRYCEL TAB 140MG	43	STRATTERA CAP 60MG	101
SPRYCEL TAB 20MG	43	STRATTERA CAP 80MG	101
SPRYCEL TAB 50MG	43	STRENSIQ INJ 18/0.45	150
SPRYCEL TAB 70MG	43	STRENSIQ INJ 28/0.7ML	150
SPRYCEL TAB 80MG	43	STRENSIQ INJ 40MG/ML	150
<i>sps sus 15gm/60</i>	151	STRENSIQ INJ 80/0.8ML	150
<i>sr nicotine gum 2mg</i>	113	<i>streptomycin sulfate for inj 1 gm</i>	17
<i>sronyx tab</i>	138	STRIANT MIS 30MG	115
<i>ssd cre 1%</i>	209	STRIBILD TAB	27
SSKI SOL 1GM/ML	152	STRIVERDI AER 2.5MCG	200
<i>sss 10-5 aer 10-5%</i>	207	STROMECTOL TAB 3MG	35
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STALEVO 125 TAB	92	SUBOXONE MIS 2-0.5MG	111
STALEVO 150 TAB	92	SUBOXONE MIS 4-1MG	111
STALEVO 200 TAB	92	SUBOXONE MIS 8-2MG	111
STALEVO 50 TAB	92	SUBSYS SPR 100MCG	15
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		SUBSYS SPR 1600MCG	15

SUBSYS SPR 200MCG	15	<i>sulfacetamide sodium w/ sulfur susp 8-4%</i>	208
SUBSYS SPR 400MCG	15	<i>sulfacetamide sodium w/ sulfur wash 9-4.5%</i>	208
SUBSYS SPR 600MCG	15	<i>sulfacetamide sodium w/ sulfur wash 9-4%</i>	208
SUBSYS SPR 800MCG	15	<i>sulfacleanse sus 8-4%</i>	208
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<i>sucralfate tab 1 gm</i>	162	<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	35
<i>sufentanil citrate inj 100 mcg/2ml (50 mcg/ml)</i>	15	<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	35
<i>sufentanil citrate inj 250 mcg/5ml (50 mcg/ml)</i>	15	<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>	35
<i>sufentanil citrate inj 50 mcg/ml</i>	15	SULFAMYLON CRE 85MG/GM	209
SUFENTANIL INJ 100/2ML.....	15	SULFAMYLON PAK 5%	209
SUFENTANIL INJ 250/5ML.....	15	<i>sulfasalazine tab 500 mg</i>	160
SUFENTANIL INJ 50MCG/ML.....	15	<i>sulfasalazine tab delayed release 500 mg</i>	160
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SULAR TAB 34MG	65	SULF LIME SOL.....	220
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<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	221	<i>sulindac tab 200 mg</i>	6
<i>sulfacetamide sodium cleansing gel 10%</i>	212	SUMADAN KIT	208
<i>sulfacetamide sodium liquid 10%</i>	212	SUMADAN WASH LIQ 9-4.5%	208
<i>sulfacetamide sodium lotion 10% (acne)</i>	207	SUMADAN XLT KIT 9-4.5%.....	208
<i>sulfacetamide sodium ophth oint 10%</i>	222	<i>sumatriptan-naproxen sodium tab 85-500 mg</i>	105
<i>sulfacetamide sodium ophth soln 10%</i>	222	<i>sumatriptan nasal spray 20 mg/act</i> ...	106
<i>sulfacetamide sodium shampoo 10%</i>	212	<i>sumatriptan nasal spray 5 mg/act</i>	106
<i>sulfacetamide sodium w/ sulfur cleanser 10-2%</i>	208	<i>sumatriptan succinate inj 6 mg/0.5ml</i>	106
<i>sulfacetamide sodium w/ sulfur cleanser 9.8-4.8%</i>	207	<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml</i>	106
<i>sulfacetamide sodium w/ sulfur cleansing pad 10-4%</i>	208	<i>sumatriptan succinate solution auto-injector 6 mg/0.5ml</i>	106
<i>sulfacetamide sodium w/ sulfur cream 10-2%</i>	208	<i>sumatriptan succinate solution cartridge 4 mg/0.5ml</i>	106
<i>sulfacetamide sodium w/ sulfur cream 10-5%</i>	208	<i>sumatriptan succinate solution cartridge 6 mg/0.5ml</i>	106
<i>sulfacetamide sodium w/ sulfur cream 9.8-4.8%</i>	208	<i>sumatriptan succinate tab 100 mg</i>	106
<i>sulfacetamide sodium w/ sulfur emulsion 10-5%</i>	208	<i>sumatriptan succinate tab 25 mg</i>	106
<i>sulfacetamide sodium w/ sulfur lotion 10-5%</i>	208	<i>sumatriptan succinate tab 50 mg</i>	106
<i>sulfacetamide sodium w/ sulfur lotion 9.8-4.8%</i>	208	SUMAXIN CP KIT	208
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SUPRANE SOL	75	SYMBYAX CAP 3-25MG	95
SUPRAX CAP 400MG	19	SYMBYAX CAP 6-25MG	95
SUPRAX CHW 100MG	19	SYMBYAX CAP 6-50MG	95
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SUSTIVA CAP 50MG	28	SYNJARDY XR TAB	120
SUSTIVA TAB 600MG	28	SYNJARDY XR TAB 10-1000.....	120
SUSTOL INJ 10/0.4ML	158	SYNJARDY XR TAB 25-1000.....	120
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<i>sw nicotine gum 4mg</i>	113	SYNTHROID TAB 150MCG	154
<i>sw nicotine loz 4mg mint</i>	113	SYNTHROID TAB 175MCG	154
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<i>tacrolimus cap 1 mg</i>	182	TAXOTERE INJ 80MG/4ML.....	47
<i>tacrolimus cap 5 mg</i>	182	TAYTULLA CAP 1MG/20MC.....	138
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<i>tacrolimus oint 0.1%</i>	212	<i>tazicef inj 1gm</i>	20
<i>tadalafil tab 20 mg (pah)</i>	73	TAZICEF INJ 1GM/50ML.....	20
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TAMIFLU CAP 75MG.....	33	<i>taztia xt cap 240mg/24</i>	67
TAMIFLU SUS 6MG/ML.....	33	<i>taztia xt cap 300mg/24</i>	67
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	40	<i>taztia xt cap 360mg/24</i>	67
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	40	TECENTRIQ INJ 1200/20.....	46
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<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i>	54	<i>terazosin hcl cap 5 mg (base equivalent)</i>	52
<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i>	54	<i>terbinafine hcl tab 250 mg</i>	26
<i>telmisartan-hydrochlorothiazide tab 80-25 mg</i>	54	<i>terbutaline sulfate inj 1 mg/ml</i>	200
<i>telmisartan tab 20 mg</i>	55	<i>terbutaline sulfate tab 2.5 mg</i>	201
<i>telmisartan tab 40 mg</i>	55	<i>terbutaline sulfate tab 5 mg</i>	201
<i>telmisartan tab 80 mg</i>	55	<i>terconazole vaginal cream 0.4%</i>	168
<i>temazepam cap 15 mg</i>	103	<i>terconazole vaginal cream 0.8%</i>	168
<i>temazepam cap 22.5 mg</i>	103	<i>terconazole vaginal suppos 80 mg</i>	168
<i>temazepam cap 30 mg</i>	103	<i>terrell sol</i>	75
<i>temazepam cap 7.5 mg</i>	103	TESSALON PER CAP 100MG.....	200
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<i>temozolomide cap 100 mg</i>	37	<i>testosterone td gel 50 mg/5gm (1%)</i>	115
<i>temozolomide cap 140 mg</i>	37	<i>testosterone td soln 30 mg/act</i>	115
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<i>temozolomide cap 250 mg</i>	37	<i>tetrabenazine tab 12.5 mg</i>	103
<i>temozolomide cap 5 mg</i>	37	<i>tetrabenazine tab 25 mg</i>	103
<i>temsirolimus soln for iv infusion 25 mg/ml</i>	43	<i>tetracaine hcl inj 1%</i>	3
<i>tencon tab 50-325mg</i>	4	<i>tetracaine hcl ophth soln 0.5%</i>	226
TENIPOSIDE INJ 50MG/5ML	47	<i>tetracycline hcl cap 250 mg</i>	25
TENIVAC INJ 5-2LF	183	<i>tetracycline hcl cap 500 mg</i>	25
<i>tenofovir disoproxil fumarate tab 300 mg</i>	29	TETRAVEX GEL 2%	217
TENORETIC TAB 100	61	<i>tetravisc sol 0.5% op</i>	226
TENORETIC TAB 50	61	<i>tetravisc sol forte</i>	226
TENORMIN TAB 100MG	63	TETRIX CRE	219
TENORMIN TAB 25MG	63	TEXACORT SOL 2.5%	214
TENORMIN TAB 50MG	63	TEXAVITE LQ LIQ.....	193
TEPADINA INJ 100MG	37	TGT LANCET MIS 23G.....	131
TEPADINA INJ 15MG	37	TGT LANCET MIS 26G.....	131
<i>terazosin hcl cap 10 mg (base equivalent)</i>	52	TGT LANCET MIS 28G.....	131
<i>terazosin hcl cap 1 mg (base equivalent)</i>	52	TGT LANCET MIS 30G.....	131
<i>terazosin hcl cap 2 mg (base equivalent)</i>	52	TGT LANCET MIS 33G.....	131
		TGT LANCET MIS ALTERNAT	131
		<i>tgt nicotine dis 14mg/24h</i>	113
		<i>tgt nicotine dis 21mg/24h</i>	113

<i>tgt nicotine dis 7mg/24hr</i>	113	THROMBIN-JMI KIT 20000UNT	175
<i>tgt nicotine gum 2mgfruit</i>	114	THROMBIN-JMI KIT 5000UNIT	175
<i>tgt nicotine gum 2mg mint</i>	113	THROMBIN-JMI SOL 20000UNT.....	175
<i>tgt nicotine gum 2mg orig</i>	113	THROMBIN-JMI SOL 5000UNIT	175
<i>tgt nicotine gum 4mg</i>	114	THROMBIN KIT 5000UNIT	175
<i>tgt nicotine gum 4mg mint</i>	114	THROMBOGEN KIT 10000UNT.....	175
<i>tgt nicotine gum 4mg orig</i>	114	THROMBOGEN SOL 10000UNT	175
<i>tgt nicotine loz 4mg chry</i>	114	THROMBOGEN SOL 1000UNIT	175
<i>tgt nicotine loz 4mg mint</i>	114	THYMOGLOBULN INJ 25MG	180
THALOMID CAP 100MG.....	41	THYROGEN INJ 1.1MG	184
THALOMID CAP 150MG.....	41	THYROLAR-1/2 TAB 30MG.....	154
THALOMID CAP 200MG.....	41	THYROLAR-1/4 TAB 15MG.....	154
THALOMID CAP 50MG	41	THYROLAR-1 TAB 60MG.....	154
THEO-24 CAP 100MG CR.....	204	THYROLAR-2 TAB 120MG	154
THEO-24 CAP 200MG CR.....	204	THYROLAR-3 TAB 180MG	154
THEO-24 CAP 300MG CR.....	205	<i>tiagabine hcl tab 12 mg</i>	82
THEO-24 CAP 400MG ER.....	205	<i>tiagabine hcl tab 16 mg</i>	82
<i>theochron tab 100mg cr</i>	205	<i>tiagabine hcl tab 2 mg</i>	81
<i>theochron tab 200mg cr</i>	205	<i>tiagabine hcl tab 4 mg</i>	81
<i>theochron tab 300mg cr</i>	205	TIAZAC CAP 120MG/24	67
THEOPHYL/D5W INJ 0.8MG/ML	205	TIAZAC CAP 180MG/24	67
<i>theophylline soln 80 mg/15ml</i>	205	TIAZAC CAP 240MG/24	67
<i>theophylline tab er 12hr 100 mg</i>	205	TIAZAC CAP 300MG/24	67
<i>theophylline tab er 12hr 200 mg</i>	205	TIAZAC CAP 360MG/24	67
<i>theophylline tab er 12hr 300 mg</i>	205	TIAZAC CAP 420MG/24	67
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<i>theophylline tab er 24hr 600 mg</i>	205	TICASPRAY PAK.....	203
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<i>thiamine hcl inj 100 mg/ml</i>	193	TIGAN CAP 300MG.....	158
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THIN LANCETS MIS 30G	131	TIGECYCLINE INJ 50MG.....	35
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<i>thioridazine hcl tab 100 mg</i>	97	<i>tilia fe tab</i>	141
<i>thioridazine hcl tab 10 mg</i>	97	TIM/BRIM/DOR SOL	224
<i>thioridazine hcl tab 25 mg</i>	97	TIM/DORZ/LAT SOL.....	224
<i>thioridazine hcl tab 50 mg</i>	97	TIMOL/BRIM SOL DORZ/LAT.....	224
THIOTEPA INJ 15MG	37	TIMOL/LATAN SOL	224
<i>thiothixene cap 10 mg</i>	97	<i>timolol maleate ophth gel forming soln</i> <i>0.25%</i>	224
<i>thiothixene cap 1 mg</i>	97	<i>timolol maleate ophth gel forming soln</i> <i>0.5%</i>	224
<i>thiothixene cap 2 mg</i>	97	<i>timolol maleate ophth soln 0.25%</i>	224
<i>thiothixene cap 5 mg</i>	97	<i>timolol maleate ophth soln 0.5%</i>	224
<i>thrive gum 2mg mint</i>	114	<i>timolol maleate ophth soln 0.5% (once-</i>	
THRIVITE 19 TAB.....	195		
THRIVITE RX TAB 29-1MG	196		

<i>daily</i>)	224	TNKASE KIT 50MG	176
<i>timolol maleate tab 10 mg</i>	63	TOBI NEB 300/5ML	201
<i>timolol maleate tab 20 mg</i>	63	TOBI PODHALR CAP 28MG	201
<i>timolol maleate tab 5 mg</i>	63	TOBRADEX OIN 0.3-0.1%	221
TIMOPTIC-XE SOL 0.5% OP.....	224	TOBRADEX ST SUS 0.3-0.05	221
TIMOPTIC OCU SOL 0.25% OP.....	224	TOBRADEX SUS 0.3-0.1%.....	221
TIMOPTIC OCU SOL 0.5% OP	224	<i>tobramycin-dexamethasone ophth susp</i>	
TIMOPTIC SOL 0.25% OP.....	224	<i>0.3-0.1%</i>	221
TIMOPTIC SOL 0.5% OP	224	<i>tobramycin nebu soln 300 mg/5ml</i>	201
TINDAMAX TAB 500MG.....	35	<i>tobramycin ophth soln 0.3%</i>	222
<i>tinidazole tab 250 mg</i>	35	<i>tobramycin sulfate for inj 1.2 gm</i>	17
<i>tinidazole tab 500 mg</i>	35	<i>tobramycin sulfate inj 1.2 gm/30ml (40</i>	
TIROSINT CAP 100MCG	154	<i>mg/ml) (base equiv)</i>	17
TIROSINT CAP 112MCG	154	<i>tobramycin sulfate inj 10 mg/ml (base</i>	
TIROSINT CAP 125MCG	154	<i>equivalent)</i>	17
TIROSINT CAP 137MCG	154	<i>tobramycin sulfate inj 2 gm/50ml (40</i>	
TIROSINT CAP 13MCG	154	<i>mg/ml) (base equiv)</i>	17
TIROSINT CAP 150MCG	154	<i>tobramycin sulfate inj 80 mg/2ml (40</i>	
TIROSINT CAP 25MCG	154	<i>mg/ml) (base equiv)</i>	17
TIROSINT CAP 50MCG	154	TOBEX OIN 0.3% OP	222
TIROSINT CAP 75MCG	154	TOBEX SOL 0.3% OP	222
TIROSINT CAP 88MCG	154	TOFRANIL TAB 10MG	89
<i>tis-u-sol sol</i>	220	TOFRANIL TAB 25MG	89
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TISSEEL VH KIT 10ML	175	TOLAK CRE 4%.....	209
TISSEEL VH KIT 2ML	175	<i>tolazamide tab 250 mg</i>	121
TISSEEL VH KIT 4ML	175	<i>tolazamide tab 500 mg</i>	121
TIVICAY TAB 10MG	28	<i>tolbutamide tab 500 mg</i>	121
TIVICAY TAB 25MG	28	<i>tolcapone tab 100 mg</i>	92
TIVICAY TAB 50MG	28	<i>tolmetin sodium cap 400 mg</i>	6
TIVORBEX CAP 20MG	6	<i>tolmetin sodium tab 200 mg</i>	6
TIVORBEX CAP 40MG	6	<i>tolmetin sodium tab 600 mg</i>	6
<i>tizanidine hcl cap 2 mg (base equivalent)</i>		<i>tolterodine tartrate cap er 24hr 2 mg</i>	168
.....	109	<i>tolterodine tartrate cap er 24hr 4 mg</i>	168
<i>tizanidine hcl cap 4 mg (base equivalent)</i>		<i>tolterodine tartrate tab 1 mg</i>	168
.....	109	<i>tolterodine tartrate tab 2 mg</i>	168
<i>tizanidine hcl cap 6 mg (base equivalent)</i>		TOPAMAX SPR CAP 15MG	82
.....	109	TOPAMAX SPR CAP 25MG	82
<i>tizanidine hcl tab 2 mg (base equivalent)</i>		TOPAMAX TAB 100MG	82
.....	109	TOPAMAX TAB 200MG	82
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<i>tl-hem 150 tab</i>	190	TOPICORT CRE 0.25%	213
TL-SELECT CAP	196	TOPICORT GEL 0.05%	213
TL FOLATE TAB.....	196	TOPICORT OIN 0.05%	215
<i>tl icon cap</i>	190	TOPICORT OIN 0.25%	213

TOPICORT SPR 0.25%	213	300 mg	15
<i>topiramate cap er 24hr sprinkle 100 mg</i>		<i>tramadol hcl tab 50 mg</i>	15
.....	82	<i>tramadol hcl tab er 24hr 100 mg</i>	15
<i>topiramate cap er 24hr sprinkle 150 mg</i>		<i>tramadol hcl tab er 24hr 200 mg</i>	15
.....	82	<i>tramadol hcl tab er 24hr 300 mg</i>	15
<i>topiramate cap er 24hr sprinkle 200 mg</i>		<i>tramadol hcl tab er 24hr biphasic release</i>	
.....	82	<i>100 mg</i>	15
<i>topiramate cap er 24hr sprinkle 25 mg</i>	82	<i>tramadol hcl tab er 24hr biphasic release</i>	
<i>topiramate cap er 24hr sprinkle 50 mg</i>	82	<i>200 mg</i>	15
<i>topiramate sprinkle cap 15 mg</i>	82	<i>tramadol hcl tab er 24hr biphasic release</i>	
<i>topiramate sprinkle cap 25 mg</i>	82	<i>300 mg</i>	15
<i>topiramate tab 100 mg</i>	82	<i>trandolapril-verapamil hcl tab er 1-240</i>	
<i>topiramate tab 200 mg</i>	82	<i>mg</i>	48
<i>topiramate tab 25 mg</i>	82	<i>trandolapril-verapamil hcl tab er 2-180</i>	
<i>topiramate tab 50 mg</i>	82	<i>mg</i>	48
<i>toposar inj 100/5ml</i>	47	<i>trandolapril-verapamil hcl tab er 2-240</i>	
<i>toposar inj 1gm/50ml</i>	47	<i>mg</i>	48
<i>toposar inj 20mg/ml</i>	47	<i>trandolapril-verapamil hcl tab er 4-240</i>	
<i>toposar inj 500/25ml</i>	47	<i>mg</i>	48
<i>topotecan hcl for inj 4 mg</i>	48	<i>trandolapril tab 1 mg</i>	50
TOPOTECAN INJ 4MG/4ML	48	<i>trandolapril tab 2 mg</i>	50
TOPROL XL TAB 100MG	63	<i>trandolapril tab 4 mg</i>	50
TOPROL XL TAB 200MG	63	<i>tranexamic acid iv soln 1000 mg/10ml</i>	
TOPROL XL TAB 25MG	63	<i>(100 mg/ml)</i>	175
TOPROL XL TAB 50MG	63	<i>tranexamic acid tab 650 mg</i>	175
TORISEL SOL 25MG/ML	43	TRANSDERM-SC DIS 1.5MG	158
<i>toremide tab 100 mg</i>	69	TRANXENE T TAB 7.5MG.....	76
<i>toremide tab 10 mg</i>	69	<i>tranylcypromine sulfate tab 10 mg</i>	85
<i>toremide tab 20 mg</i>	69	TRAUMEEL OIN.....	185
<i>toremide tab 5 mg</i>	69	TRAVASOL INJ 10%	189
<i>total allerg liq 12.5/5ml</i>	199	TRAVATAN Z DRO 0.004%	227
TOUJEO SOLO INJ 300IU/ML	119	TRAVEL LANCE MIS 30G	131
TOVIAZ TAB 4MG.....	168	<i>trazodone hcl tab 100 mg</i>	85
TOVIAZ TAB 8MG.....	168	<i>trazodone hcl tab 150 mg</i>	85
<i>tpn electrol inj</i>	186	<i>trazodone hcl tab 300 mg</i>	85
TRACE ELEM 4 INJ PED	193	<i>trazodone hcl tab 50 mg</i>	85
TRACLEER TAB 125MG	73	TREANDA INJ 100MG	37
TRACLEER TAB 32MG	72	TREANDA INJ 25MG	37
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<i>mg</i>	15	TRELSTAR MIX INJ 22.5MG	41
TRAMADOL HCL CAP 150MG ER.....	15	TRELSTAR MIX INJ 3.75MG	41
<i>tramadol hcl cap er 24hr biphasic release</i>		TREMFYA INJ 100MG/ML.....	179
<i>100 mg</i>	15	TRESIBA FLEX INJ 100UNIT	119
<i>tramadol hcl cap er 24hr biphasic release</i>		TRESIBA FLEX INJ 200UNIT	119
<i>200 mg</i>	15	<i>tretinoin cap 10 mg</i>	46
<i>tramadol hcl cap er 24hr biphasic release</i>		<i>tretinoin cream 0.025%</i>	208

<i>tretinoin cream 0.05%</i>	208	<i>triamcinolone acetonide oint 0.5%</i>	213
<i>tretinoin cream 0.1%</i>	208	TRIAMCINOLON INJ 40MG/ML	147
<i>tretinoin gel 0.01%</i>	208	TRIAMCINOLON INJ 80MG/2ML.....	147
<i>tretinoin gel 0.025%</i>	208	TRIAMCINOLON INJ 80MG/ML	147
<i>tretinoin gel 0.05%</i>	208	<i>triamterene & hydrochlorothiazide cap</i>	
<i>tretinoin microsphere gel 0.04%</i>	208	<i>37.5-25 mg</i>	69
<i>tretinoin microsphere gel 0.1%</i>	208	<i>triamterene & hydrochlorothiazide tab</i>	
TRETTEN INJ	174	<i>37.5-25 mg</i>	69
TREXALL TAB 10MG	39	<i>triamterene & hydrochlorothiazide tab</i>	
TREXALL TAB 15MG	40	<i>75-50 mg</i>	69
TREXALL TAB 5MG.....	39	TRIANEX OIN 0.05%	215
TREXALL TAB 7.5MG	39	<i>triazolam tab 0.125 mg</i>	104
TREXIMET TAB 10-60MG.....	105	<i>triazolam tab 0.25 mg</i>	103
TREXIMET TAB 85-500MG	105	TRIBENZOR20- TAB 5-12.5MG	53
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<i>tri-estaryll tab</i>	141	TRIBENZOR40- TAB 5-12.5MG	53
<i>tri-legest tab fe</i>	141	TRIBENZOR40- TAB 5-25MG	53
<i>tri-lynyah tab</i>	141	TRICARE CHW PRENATAL.....	196
<i>tri-lo- tab marzia</i>	141	TRICARE PRE CAP 27-1-500	196
<i>tri-lo- tab sprintec</i>	141	TRICARE PREN CAP DHA ONE	196
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<i>tri-sprintec tab</i>	141	<i>tricon cap</i>	190
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TRI-VI-FLOR SUS 0.25/ML	193	TRICOR TAB 48MG.....	58
TRI-VI-FLOR SUS 0.5MG/ML.....	193	<i>triderm cre 0.1%</i>	215
<i>tri-vit/fluo dro 0.25mg</i>	193	TRIDESILON CRE 0.05%.....	214
<i>tri-vit/fluo dro 0.5mg</i>	193	<i>trientine hcl cap 250 mg</i>	150
TRIAM-BUPIVA SUS 40-5MG.....	150	TRIESENCE INJ 40MG/ML.....	223
TRIAM/MOXI SUS 15-1	221	<i>trifluoperazine hcl tab 10 mg (base</i>	
<i>triamcinolone acetonide aerosol soln</i>		<i>equivalent)</i>	97
<i>0.147 mg/gm</i>	215	<i>trifluoperazine hcl tab 1 mg (base</i>	
<i>triamcinolone acetonide cream 0.025%</i>		<i>equivalent)</i>	97
.....	215	<i>trifluoperazine hcl tab 2 mg (base</i>	
<i>triamcinolone acetonide cream 0.1%</i> .	215	<i>equivalent)</i>	97
<i>triamcinolone acetonide cream 0.5%</i> .	213	<i>trifluoperazine hcl tab 5 mg (base</i>	
<i>triamcinolone acetonide dental paste</i>		<i>equivalent)</i>	97
<i>0.1%</i>	221	<i>trifluridine ophth soln 1%</i>	224
<i>triamcinolone acetonide inj susp 40</i>		<i>trigels-f cap forte</i>	190
<i>mg/ml</i>	147	TRIGLIDE TAB 160MG	58
<i>triamcinolone acetonide lotion 0.025%</i>		<i>trihexyphenidyl hcl elixir 0.4 mg/ml</i>	92
.....	215	<i>trihexyphenidyl hcl tab 2 mg</i>	92
<i>triamcinolone acetonide lotion 0.1%</i> ..	215	<i>trihexyphenidyl hcl tab 5 mg</i>	92
<i>triamcinolone acetonide nasal aerosol</i>		TRILEPTAL SUS 300MG/5M	82
<i>suspension 55 mcg/act</i>	203	TRILEPTAL TAB 150MG.....	82
<i>triamcinolone acetonide oint 0.025%</i> .	215	TRILEPTAL TAB 300MG.....	82
<i>triamcinolone acetonide oint 0.1%</i>	215	TRILEPTAL TAB 600MG.....	82

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<i>trilyte sol</i>	162	TRUPLUS LANC MIS 33G	131
<i>trimethobenzamide hcl cap 300 mg</i> ..	158	TRUSOPT SOL 2% OP	225
<i>trimethoprim tab 100 mg</i>	35	TRUVADA TAB 100-150	27
<i>trimipramine maleate cap 100 mg</i>	89	TRUVADA TAB 133-200	27
<i>trimipramine maleate cap 25 mg</i>	89	TRUVADA TAB 167-250	27
<i>trimipramine maleate cap 50 mg</i>	89	TRUVADA TAB 200-300	27
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TRINATAL RX TAB 1	196	TUDORZA PRES AER 400/ACT	198
<i>trinate tab</i>	196	TURPENTINE SOL SPIRITS	219
<i>trinessa lo tab</i>	141	TUSSICAPS CAP 10-8MG	199
<i>trinessa tab</i>	141	TUSSICAPS CAP 5-4MG	199
TRINTELLIX TAB 10MG	86	TUSSIONEX SUS 10-8/5ML	199
TRINTELLIX TAB 20MG	86	TUZISTRA XR SUS	199
TRINTELLIX TAB 5MG	86	TWINRIX INJ	183
TRIOSTAT INJ 10MCG/ML	154	TWYNSTA TAB 40-10MG	52
<i>triple dye solution</i>	212	TWYNSTA TAB 40-5MG	52
TRIPTODUR SUS 22.5MG	150	TWYNSTA TAB 80-10MG	52
TRISENOX INJ 12MG/6ML	46	TWYNSTA TAB 80-5MG	52
TRISTART DHA CAP	196	TYBOST TAB 150MG	27
TRISTART ONE CAP 35-1-215	196	TYGACIL INJ 50MG	35
TRIUMEQ TAB	27	TYKERB TAB 250MG	43
TRIVEEN-DUO PAK DHA	196	TYLENOL/COD TAB #3	16
<i>trivora-28 tab</i>	141	TYLENOL/COD TAB #4	16
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TRIZIVIR TAB	27	TYSABRI INJ 300/15ML	108
TROGARZO INJ 150MG/ML	28	TYVASO REFIL SOL 0.6MG/ML	73
TROKENDI XR CAP 100MG	82	TYVASO SOL 0.6MG/ML	73
TROKENDI XR CAP 200MG	82	TYVASO START SOL 0.6MG/ML	73
TROKENDI XR CAP 25MG	82	U	
TROKENDI XR CAP 50MG	82	UCERIS AER 2MG/ACT	161
TROPHAMINE INJ 10%	189	UCERIS TAB 9MG	160
TROPHAMINE INJ 6%	189	ULESFIA LOT 5%	220
<i>tropicamide ophth soln 0.5%</i>	226	ULORIC TAB 40MG	1
<i>tropicamide ophth soln 1%</i>	226	ULORIC TAB 80MG	1
<i>trospium chloride cap er 24hr 60 mg</i> ..	168	ULTANE SOL	75
<i>trospium chloride tab 20 mg</i>	168	ULTILET MIS 26G	131
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TRUMENBA INJ	183	ULTIVA INJ 2MG	16
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ULTRAVATE CRE 0.05%	216	UNISTIK TOUC MIS LANC 23G	133
ULTRAVATE LOT 0.05%	216	UNISTIK TOUC MIS LANC 28G	133
ULTRAVATE OIN 0.05%	216	UNISTIK TOUC MIS LANC 30G	133
<i>umecta mouss aer 40%</i>	216	UNISTRIP1 TES GENERIC.....	133
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UNASYN INJ 15GM.....	24	<i>unith direct tab 112mcg</i>	154
UNASYN INJ 3GM	23	<i>unith direct tab 125mcg</i>	154
UNIFINE PNTP MIS 29GX12MM	132	<i>unith direct tab 150mcg</i>	154
UNILET CMFR MIS TCH 28G	132	<i>unith direct tab 175mcg</i>	154
UNILET CMFR MIS TCH 30G	132	<i>unith direct tab 200mcg</i>	154
UNILET EXCEL MIS 23G	132	<i>unith direct tab 25mcg</i>	154
UNILET EX II MIS 28G	132	<i>unith direct tab 300mcg</i>	154
UNILET G.P. MIS 21G	132	<i>unith direct tab 50mcg</i>	154
UNILET G.P MIS SUPR 23G.....	132	<i>unith direct tab 75mcg</i>	154
UNILET GP 28 MIS ULT THIN	132	<i>unith direct tab 88mcg</i>	154
UNILET LANCE MIS 21G.....	132	<i>unithroid tab 100mcg</i>	155
UNILET LANCE MIS 28G.....	132	<i>unithroid tab 112mcg</i>	155
UNILET LANCE MIS 33G.....	132	<i>unithroid tab 125mcg</i>	155
UNILET LANC MIS 33G	132	<i>unithroid tab 137mcg</i>	155
UNILET LANCT MIS 28G.....	132	<i>unithroid tab 150mcg</i>	155
UNILET LANCT MIS 30G.....	132	<i>unithroid tab 175mcg</i>	155
UNILET LANCT MIS 33G.....	132	<i>unithroid tab 200mcg</i>	155
UNILET MIS 21G.....	132	<i>unithroid tab 25mcg</i>	154
UNILET SUPER MIS 23G.....	132	<i>unithroid tab 300mcg</i>	155
UNILET SUPER MIS G.P. 23G.....	132	<i>unithroid tab 50mcg</i>	154
UNISTIK 1 MIS 2.4MM	132	<i>unithroid tab 75mcg</i>	154
UNISTIK 1 MIS 3.0MM	132	<i>unithroid tab 88mcg</i>	154
UNISTIK 2 MIS	132	UNITUXIN INJ	46
UNISTIK 2 MIS 1.8MM	132	UNIVERSAL 1 MIS 33G	133
UNISTIK 2 MIS 2.4MM	132	UNIVERSAL 1 MIS LANC 26G.....	133
UNISTIK 2 MIS COMFORT	132	UNIVERSAL 1 MIS LANC 30G.....	133
UNISTIK 2 MIS EXTRA	132	UPTRAVI TAB 1000MCG.....	73
UNISTIK 2 MIS NEONATAL	132	UPTRAVI TAB 1200MCG.....	73
UNISTIK 2 MIS NORMAL	132	UPTRAVI TAB 1400MCG.....	73
UNISTIK 2 MIS SUPER.....	132	UPTRAVI TAB 1600MCG.....	73

UPTRAVI TAB 200/800	73	V-GO 40 KIT	133
UPTRAVI TAB 200MCG	73	VABOMERE INJ 2GM(1-1)	17
UPTRAVI TAB 400MCG	73	VAGIFEM TAB 10MCG	144
UPTRAVI TAB 600MCG	73	<i>valacyclovir hcl tab 1 gm</i>	32
UPTRAVI TAB 800MCG	73	<i>valacyclovir hcl tab 500 mg</i>	32
URALISS CRE 35%	216	VALCHLOR GEL 0.016%	37
URAMAXIN GEL 45%	216	VALCYTE SOL 50MG/ML	31
<i>ure-k cre 50%</i>	216	VALCYTE TAB 450MG	31
<i>urea-c40 lot 40%</i>	217	<i>valganciclovir hcl for soln 50 mg/ml</i>	
<i>urea cream 39%</i>	216	<i>(base equiv)</i>	31
<i>urea cream 40%</i>	216	<i>valganciclovir hcl tab 450 mg (base</i>	
<i>urea cream 45%</i>	216	<i>equivalent)</i>	31
<i>urea cream 50%</i>	216	VALIUM TAB 10MG	76
<i>urea hydrati aer 35%</i>	216	VALIUM TAB 2MG	76
<i>urea in zinc undecylenate-lactic acid</i>		VALIUM TAB 5MG	76
<i>vehicle emulsion 50%</i>	216	<i>valproate sodium inj 100 mg/ml</i>	82
<i>urea lotion 40%</i>	217	<i>valproate sodium oral soln 250 mg/5ml</i>	
<i>urea nail gel 45%</i>	217	<i>(base equiv)</i>	82
UREA NAIL MIS 50%	217	<i>valproic acid cap 250 mg</i>	82
<i>urea suspension 40%</i>	217	<i>valsartan-hydrochlorothiazide tab 160-</i>	
URECHOLINE TAB 10MG	167	<i>12.5 mg</i>	54
URECHOLINE TAB 25MG	167	<i>valsartan-hydrochlorothiazide tab 160-25</i>	
URECHOLINE TAB 50MG	167	<i>mg</i>	54
URECHOLINE TAB 5MG	167	<i>valsartan-hydrochlorothiazide tab 320-</i>	
<i>urelle tab</i>	167	<i>12.5 mg</i>	54
<i>uretron d/s tab</i>	167	<i>valsartan-hydrochlorothiazide tab 320-25</i>	
UREVAZ CRE 44%	217	<i>mg</i>	54
<i>uribel cap 118mg</i>	167	<i>valsartan-hydrochlorothiazide tab 80-</i>	
<i>urimar-t tab</i>	167	<i>12.5 mg</i>	54
<i>uro-458 tab</i>	167	<i>valsartan tab 160 mg</i>	55
<i>uroav-81 tab</i>	167	<i>valsartan tab 320 mg</i>	55
UROCIT-K 10 TAB	167	<i>valsartan tab 40 mg</i>	55
UROCIT-K 15 TAB	167	<i>valsartan tab 80 mg</i>	55
UROCIT-K 5 TAB	167	VALSTAR SOL 40MG/ML	38
UROGESIC- TAB BLUE	167	VALTRESX TAB 1GM	32
UROXATRAL TAB 10MG	165	VALTRESX TAB 500MG	32
URSO 250 TAB 250MG	159	VANATOL LQ SOL	4
<i>ursodiol cap 300 mg</i>	159	VANCOCIN HCL CAP 125MG	35
<i>ursodiol tab 250 mg</i>	159	VANCOCIN HCL CAP 250MG	35
<i>ursodiol tab 500 mg</i>	159	VANCOMY/NACL INJ 1.25/250	36
URSO FORTE TAB 500MG	159	VANCOMY/NACL INJ 1.5/300	35
<i>uryl tab</i>	167	VANCOMY/NACL INJ 1.75/500	36
<i>uta cap 120mg</i>	167	VANCOMY/NACL INJ 2/500ML	36
UTIBRON CAP NEOHALER	197	VANCOMY/NACL INJ 2.5/500	36
UTOPIC CRE 41%	217	VANCOMY/NACL INJ 750/150	36
V		VANCOMY/NACL INJ 750/250	36
V-GO 20 KIT	133	VANCOMYC/D5W INJ 1.25/250	36
V-GO 30 KIT	133	VANCOMYC/DEX INJ 1GM	36

VANCOMYC/DEX INJ 500MG.....	36	VELTASSA POW 16.8GM	151
<i>vancomycin hcl cap 125 mg</i>	36	VELTASSA POW 25.2GM	151
<i>vancomycin hcl cap 250 mg</i>	36	VELTASSA POW 8.4GM	151
<i>vancomycin hcl for inj 1000 mg</i>	36	VELTIN GEL	208
<i>vancomycin hcl for inj 10 gm</i>	36	VEMLIDY TAB 25MG	31
<i>vancomycin hcl for inj 5000 mg</i>	36	VENA-BAL MIS DHA	196
<i>vancomycin hcl for inj 500 mg</i>	36	VENCLEXTA TAB 100MG	46
<i>vancomycin hcl for inj 750 mg</i>	36	VENCLEXTA TAB 10MG	46
VANCOMYCIN INJ 1 GM	36	VENCLEXTA TAB 50MG	46
VANCOMYCIN INJ 500MG.....	36	VENCLEXTA TAB START PK	46
VANCOMYCIN INJ 750MG.....	36	<i>venlafaxine hcl cap er 24hr 150 mg</i>	
<i>vandazole gel 0.75%</i>	168	<i>(base equivalent)</i>	87
VANOS CRE 0.1%	213	<i>venlafaxine hcl cap er 24hr 37.5 mg</i>	
VANOXIDE-HC LOT 5-0.5%	208	<i>(base equivalent)</i>	87
VANTAS KIT 50MG.....	41	<i>venlafaxine hcl cap er 24hr 75 mg (base</i>	
VAPRISOL INJ 20/100ML.....	155	<i>equivalent)</i>	87
VAQTA INJ 25/0.5ML.....	183	<i>venlafaxine hcl tab 100 mg</i>	87
VAQTA INJ 50UNT/ML.....	183	<i>venlafaxine hcl tab 25 mg</i>	87
VARITHENA AER 10MG/ML.....	71	<i>venlafaxine hcl tab 37.5 mg</i>	87
VARIVAX INJ	183	<i>venlafaxine hcl tab 50 mg</i>	87
VARIZIG INJ 125UNIT	180	<i>venlafaxine hcl tab 75 mg</i>	87
VARUBI INJ.....	158	<i>venlafaxine hcl tab er 24hr 150 mg (base</i>	
VARUBI TAB 90MG.....	158	<i>equivalent)</i>	88
VASCEPA CAP 0.5GM	60	VENLAFAXINE HCL TAB ER 24HR 225 MG	
VASCEPA CAP 1GM	60	(BASE EQUIVALENT).....	88
VASERETIC TAB 10-25MG.....	49	<i>venlafaxine hcl tab er 24hr 37.5 mg</i>	
<i>vashe cleans sol</i>	220	<i>(base equivalent)</i>	88
VASOPRE/NAACL INJ 100/100	155	<i>venlafaxine hcl tab er 24hr 75 mg (base</i>	
VASOPRE/NAACL INJ 100/250	155	<i>equivalent)</i>	88
VASOPRE/NAACL INJ 50/250ML.....	155	VENLAFAXINE TAB 150MG ER.....	88
VASOPRES/D5W INJ 100/100.....	155	VENLAFAXINE TAB 37.5 ER	88
VASOSTRICT INJ 20UNT/ML	156	VENLAFAXINE TAB 75MG ER	88
VASOTEC TAB 10MG	50	VENOFER INJ 20MG/ML	190
VASOTEC TAB 2.5MG	50	VENTAVIS SOL 10MCG/ML.....	73
VASOTEC TAB 20MG	50	VENTAVIS SOL 20MCG/ML.....	73
VASOTEC TAB 5MG	50	VENTOLIN HFA AER.....	200
VAZCULEP INJ 10MG/ML.....	74	VERAMYST SPR 27.5MCG	203
VECAMEYL TAB 2.5MG	71	<i>verapamil hcl cap er 24hr 100 mg</i>	67
VECTIBIX INJ 100MG	46	<i>verapamil hcl cap er 24hr 120 mg</i>	67
VECTIBIX INJ 400MG	46	<i>verapamil hcl cap er 24hr 180 mg</i>	67
VECTICAL OIN 3MCG/GM	211	<i>verapamil hcl cap er 24hr 200 mg</i>	67
<i>vecuronium bromide for inj 10 mg</i>	110	<i>verapamil hcl cap er 24hr 240 mg</i>	67
<i>vecuronium bromide for inj 20 mg</i>	110	<i>verapamil hcl cap er 24hr 300 mg</i>	67
VELCADE INJ 3.5MG	46	<i>verapamil hcl cap er 24hr 360 mg</i>	67
VELETRI INJ 0.5MG.....	73	<i>verapamil hcl iv soln 2.5 mg/ml</i>	67
VELETRI INJ 1.5MG.....	73	<i>verapamil hcl tab 120 mg</i>	67
<i>velivet pak</i>	141	<i>verapamil hcl tab 40 mg</i>	67
VELPHORO CHW 500MG	151	<i>verapamil hcl tab 80 mg</i>	67

<i>verapamil hcl tab er 120 mg</i>	67	VIIBRYD TAB 10MG	86
<i>verapamil hcl tab er 180 mg</i>	67	VIIBRYD TAB 20MG	86
<i>verapamil hcl tab er 240 mg</i>	68	VIIBRYD TAB 40MG	86
VERDESO AER 0.05%	214	<i>vilevev mb tab 81mg</i>	167
<i>verdrocet tab 2.5-325</i>	16	VIMIZIM INJ 5MG/5ML.....	150
VEREGEN OIN 15%	219	VIMOVO TAB 375-20MG	7
VERELAN CAP 120MG SR	68	VIMOVO TAB 500-20MG	7
VERELAN CAP 180MG SR	68	VIMPAT INJ 200MG/20	82
VERELAN CAP 240MG SR	68	VIMPAT SOL 10MG/ML.....	82
VERELAN CAP 360MG SR	68	VIMPAT TAB 100MG	82
VERELAN PM CAP 100MG ER	68	VIMPAT TAB 150MG	82
VERELAN PM CAP 200MG ER	68	VIMPAT TAB 200MG	82
VERELAN PM CAP 300MG ER	68	VIMPAT TAB 50MG.....	82
VERIPRED 20 SOL 20MG/5ML.....	147	VINATE DHA CAP 27-1.13	196
VERSACLOZ SUS 50MG/ML	95	VINATE II TAB.....	196
VERZENIO TAB 100MG	43	VINATE M TAB.....	196
VERZENIO TAB 150MG	43	VINATE ONE TAB	196
VERZENIO TAB 200MG	43	<i>vinblastine sulfate inj 1 mg/ml</i>	47
VERZENIO TAB 50MG.....	43	<i>vincasar pfs inj 1mg/ml</i>	47
VESICARE TAB 10MG	168	<i>vincristine sulfate iv soln 1 mg/ml</i>	47
VESICARE TAB 5MG	168	<i>vinorelbine tartrate inj 10 mg/ml (base</i> <i>equiv)</i>	47
VFEND IV INJ 200MG	26	<i>vinorelbine tartrate inj 50 mg/5ml (10</i> <i>mg/ml) (base equiv)</i>	47
VFEND SUS 40MG/ML.....	26	VIOKACE TAB 10440	163
VFEND TAB 200MG	26	VIOKACE TAB 20880	163
VFEND TAB 50MG.....	26	<i>viorele tab</i>	136
VIBATIV INJ 750MG	36	VIRACEPT TAB 250MG	30
VIBERZI TAB 100MG	161	VIRACEPT TAB 625MG.....	30
VIBERZI TAB 75MG.....	161	VIRAMUNE SUS 50MG/5ML	28
VIBRAMYCIN CAP 100MG.....	25	VIRAMUNE TAB 200MG.....	28
VIBRAMYCIN SUS 25MG/5ML	25	VIRAMUNE XR TAB 100MG.....	28
VIBRAMYCIN SYP 50MG/5ML.....	25	VIRAMUNE XR TAB 400MG.....	28
<i>vicodin es tab 7.5-300</i>	16	VIRASAL LIQ 27.5%	219
<i>vicodin hp tab 10-300mg</i>	16	VIRAZOLE INH 6GM	203
<i>vicodin tab 5-300mg</i>	16	VIREAD POW 40MG/GM.....	29
VICTORY TES AGM-4000.....	133	VIREAD TAB 150MG	29
VICTOZA INJ 18MG/3ML	118	VIREAD TAB 200MG.....	29
VIDAZA INJ 100MG	40	VIREAD TAB 250MG.....	29
VIDEX EC CAP 125MG	29	VIREAD TAB 300MG	29
VIDEX EC CAP 200MG	29	VIROPTIC SOL 1% OP	224
VIDEX EC CAP 250MG	29	VIRT-C DHA CAP.....	196
VIDEX EC CAP 400MG	29	VIRT-NATE CAP DHA	196
VIDEX SOL 2GM	29	<i>virt-phos tab 250 neut</i>	167
VIDEX SOL 4GM	29	VIRT-PN DHA CAP	196
VIEKIRA PAK TAB	32	VIRT-PN PLUS CAP	196
VIEKIRA XR TAB.....	32	VIRT-PN TAB	196
<i>vienva tab 0.1-20</i>	138	VIRT NATE TAB	196
VIGAMOX DRO 0.5%	222		
VIIBRYD KIT STARTER	86		

VIRT NATE TAB 28-1MG.....	196	VP-HEME-OB TAB 28-6-1MG.....	196
VISCO-3 INJ 25/2.5ML	16	VP-HEME OB MIS + DHA.....	196
VISTARIL CAP 25MG	199	VP-HEME OB TAB.....	196
VISTARIL CAP 50MG	199	VP-HEME ONE CAP.....	196
VISTOGARD PAK 10GM	46	VP-PNV-DHA CAP.....	196
VISUDYNE INJ 15MG.....	226	VPRIV INJ 400UNIT.....	145
<i>vit a/c/d/fl dro 0.25mg</i>	193	VRAYLAR CAP 1.5-3MG.....	95
VITAFOL-NANO TAB	196	VRAYLAR CAP 1.5MG.....	95
VITAFOL-OB PAK +DHA	196	VRAYLAR CAP 3MG	95
VITAFOL-OB TAB 65-1MG	196	VRAYLAR CAP 4.5MG.....	95
VITAFOL-ONE CAP	196	VRAYLAR CAP 6MG	95
VITAFOL CAP ULTRA.....	196	VSL#3 DS PAK 900BIL	162
VITAFOL CHW GUMMIES.....	196	VUSION OIN	211
VITAFOL FE+ CAP	196	<i>vyfemla tab 0.4-35</i>	140
VITALET PRO MIS	133	VYTORIN CRE 1-1.9%.....	211
VITALET PRO MIS PLUS	133	VYTORIN TAB 10-10MG.....	60
<i>vitamax ped dro</i>	193	VYTORIN TAB 10-20MG.....	60
VITAMEDMD CAP ONE RX.....	196	VYTORIN TAB 10-40MG.....	60
VITAPEARL CAP	196	VYTORIN TAB 10-80MG.....	60
VITATRUE MIS.....	196	VYVANSE CAP 10MG.....	101
VITRASE INJ 200/ML.....	107	VYVANSE CAP 20MG.....	101
VIVA DHA CAP.....	196	VYVANSE CAP 30MG.....	101
VIVELLE-DOT DIS 0.025MG.....	144	VYVANSE CAP 40MG.....	101
VIVELLE-DOT DIS 0.0375MG.....	144	VYVANSE CAP 50MG.....	101
VIVELLE-DOT DIS 0.05MG	144	VYVANSE CAP 60MG.....	102
VIVELLE-DOT DIS 0.075MG.....	144	VYVANSE CAP 70MG.....	102
VIVELLE-DOT DIS 0.1MG	144	VYVANSE CHW 10MG	102
VIVITROL INJ 380MG	110	VYVANSE CHW 20MG	102
VIVLODEX CAP 10MG.....	6	VYVANSE CHW 30MG	102
VIVLODEX CAP 5MG	6	VYVANSE CHW 40MG	102
VOCAL POINT TES BLD GLUC	133	VYVANSE CHW 50MG	102
VOGELXO GEL 1%(50MG).....	115	VYVANSE CHW 60MG	102
VOGELXO GEL PUMP 1%.....	115	VYXEOS INJ 44-100MG.....	46
VOL-NATE TAB	196	W	
VOL-PLUS TAB.....	196	W&F LANCETS MIS 21G	133
VOL-TAB RX TAB	196	W&F LANCETS MIS 26G	133
VOLTAREN GEL 1%	7	<i>warfarin sodium tab 10 mg</i>	171
VOLUVEN INJ 6%/NACL.....	177	<i>warfarin sodium tab 1 mg</i>	170
VONVENDI INJ 1300UNIT.....	175	<i>warfarin sodium tab 2.5 mg</i>	170
VONVENDI INJ 650UNIT	175	<i>warfarin sodium tab 2 mg</i>	170
VORAXAZE INJ 1000UNIT	46	<i>warfarin sodium tab 3 mg</i>	170
<i>voriconazole for inj 200 mg</i>	26	<i>warfarin sodium tab 4 mg</i>	170
<i>voriconazole for susp 40 mg/ml</i>	26	<i>warfarin sodium tab 5 mg</i>	170
<i>voriconazole tab 200 mg</i>	27	<i>warfarin sodium tab 6 mg</i>	170
<i>voriconazole tab 50 mg</i>	26	<i>warfarin sodium tab 7.5 mg</i>	170
VOSEVI TAB.....	32	<i>water for inject, bacteriostatic benzyl</i>	
VOTRIENT TAB 200MG	43	<i>alcohol</i>	184
VP-GGR-B6 TAB PRENATAL	196	<i>water for injection</i>	184

<i>water for irrigation, sterile irrigation soln</i>	XANAX TAB 0.5MG.....	76
.....	XANAX TAB 1MG	76
<i>water for iv injection</i>	XANAX TAB 2MG	76
WAVESENSE TES PRESTO	XANAX XR TAB 0.5MG	76
WELCHOL PAK 3.75GM	XANAX XR TAB 1MG.....	76
WELCHOL TAB 625MG	XANAX XR TAB 2MG.....	76
WELLBUTRIN TAB 100MG SR.....	XANAX XR TAB 3MG.....	76
WELLBUTRIN TAB 150MG SR.....	XARELTO STAR TAB 15/20MG.....	171
WELLBUTRIN TAB 200MG SR.....	XARELTO TAB 10MG.....	171
WELLBUTRIN TAB XL 150MG	XARELTO TAB 15MG.....	171
WELLBUTRIN TAB XL 300MG	XARELTO TAB 20MG.....	171
<i>wera tab 0.5/35</i>	XATMEP SOL 2.5MG/ML.....	40
WESTHROID TAB 130MG	XELJANZ TAB 5MG	179
WESTHROID TAB 195MG	XELJANZ XR TAB 11MG.....	179
WESTHROID TAB 32.5MG	XELODA TAB 150MG	40
WESTHROID TAB 65MG	XELODA TAB 500MG	40
WESTHROID TAB 97.5MG	XENAZINE TAB 12.5MG	103
WHEAT GERM OIL.....	XENAZINE TAB 25MG	103
WIDE-SEAL DPR KIT 60	XENICAL CAP 120MG.....	134
WIDE-SEAL DPR KIT 65	XEOMIN INJ 100UNIT	102
WIDE-SEAL DPR KIT 70	XEOMIN INJ 200UNIT	102
WIDE-SEAL DPR KIT 75	XEOMIN INJ 50 UNIT.....	102
WIDE-SEAL DPR KIT 80	XERALUX CRE.....	219
WIDE-SEAL DPR KIT 85	XERESE CRE 5-1%.....	219
WIDE-SEAL DPR KIT 90	XERMELO TAB 250MG.....	162
WIDE-SEAL DPR KIT 95	XGEVA INJ	150
WILATE INJ.....	XHANCE MIS 93MCG	203
WINRHO SDF INJ 15000UNT	XIAFLEX INJ 0.9MG	219
WINRHO SDF INJ 1500UNIT	XIFAXAN TAB 200MG	36
WINRHO SDF INJ 2500UNIT	XIFAXAN TAB 550MG	36
WINRHO SDF INJ 5000UNIT	XIGDUO XR TAB 10-1000.....	120
WP THYROID TAB 113.75MG	XIGDUO XR TAB 10-500MG.....	120
WP THYROID TAB 130MG.....	XIGDUO XR TAB 2.5-1000.....	120
WP THYROID TAB 16.25MG.....	XIGDUO XR TAB 5-1000MG.....	120
WP THYROID TAB 32.5MG.....	XIGDUO XR TAB 5-500MG.....	120
WP THYROID TAB 48.75MG.....	XIIDRA DRO 5%.....	225
WP THYROID TAB 65MG	XIMINO CAP 135MG ER	25
WP THYROID TAB 81.25MG.....	XIMINO CAP 45MG ER	25
WP THYROID TAB 97.5MG.....	XIMINO CAP 90MG ER	25
<i>wymzya fe chw 0.4mg-35</i>	XOFIGO INJ 1100KBQ	46
X	XOLAIR SOL 150MG	202
XADAGO TAB 100MG	XOLEGEL GEL 2%	211
XADAGO TAB 50MG	XOPENEX CONC NEB 1.25/0.5	200
XALATAN SOL 0.005%.....	XOPENEX HFA AER.....	200
XALIX SOL 28%.....	XOPENEX NEB 0.31MG	200
XALKORI CAP 200MG	XOPENEX NEB 0.63MG	200
XALKORI CAP 250MG	XOPENEX NEB 1.25/3ML	200
XANAX TAB 0.25MG	XPRESS TES BLD GLUC.....	133

XTAMPZA ER CAP 13.5MG.....	16	<i>zaleplon cap 10 mg</i>	104
XTAMPZA ER CAP 18MG	16	<i>zaleplon cap 5 mg</i>	104
XTAMPZA ER CAP 27MG	16	ZALTRAP INJ 100/4ML.....	46
XTAMPZA ER CAP 36MG	16	ZALTRAP INJ 200/8ML.....	46
XTAMPZA ER CAP 9MG	16	ZANAFLEX CAP 2MG	109
XTANDI CAP 40MG.....	40	ZANAFLEX CAP 4MG	109
<i>xulane dis 150-35</i>	140	ZANAFLEX CAP 6MG	109
XULTOPHY INJ 100/3.6.....	117	ZANAFLEX TAB 4MG	109
XURIDEN POW 2GM	150	ZANOSAR INJ 1GM	37
XYLO-MPF/EPI INJ 1.5%.....	3	ZANTAC INJ 25MG/ML	160
XYLO-MPF/EPI INJ 1%	3	ZANTAC INJ 50MG/2ML	160
XYLO-MPF/EPI INJ 2%	3	ZANTAC TAB 300MG	160
XYLO/EPI 1%- INJ 1:100000.....	3	<i>zarah tab 3-0.03mg</i>	139
XYLO/EPI INJ 0.5%	3	ZARONTIN CAP 250MG.....	82
XYLO/EPI INJ 2%	3	ZARONTIN SOL 250/5ML	82
XYLOCAINE INJ -MPF 1%	3	ZARXIO INJ 300/0.5.....	172
XYLOCAINE INJ -MPF 2%	3	ZARXIO INJ 480/0.8.....	172
XYLOCAINE INJ 0.5%.....	3	ZATEAN-PN CAP DHA	197
XYLOCAINE INJ 1%	3	ZATEAN-PN CAP PLUS	197
XYLOCAINE INJ 2%	3	ZAVESCA CAP 100MG.....	145
<i>xylocaine inj dent 2%</i>	3	<i>zebutal cap</i>	4
XYLOCAINE INJ MPF 0.5%	3	ZEGERID CAP 20-1100	164
XYLOCAINE INJ MPF 1.5%	4	ZEGERID CAP 40-1100	164
XYNTHA INJ 1000UNIT	175	ZEGERID POW 20-1680	164
XYNTHA INJ 2000UNIT	175	ZEGERID POW 40-1680	164
XYNTHA INJ 250UNIT	175	ZEJULA CAP 100MG	46
XYNTHA INJ 500UNIT	175	ZELAPAR TAB 1.25MG	92
XYNTHA SOLOF INJ 1000UNIT	175	ZELBORAF TAB 240MG	43
XYNTHA SOLOF INJ 2000UNIT	175	ZEMAIRA INJ 1000MG	197
XYNTHA SOLOF INJ 3000UNIT	175	ZEMBRACE SYM INJ 3/0.5ML	106
XYNTHA SOLOF INJ 500UNIT.....	175	ZEMDRI INJ 500MG/10.....	17
XYNTHA SOLOF KIT 250UNIT	175	ZEMPLAR CAP 1MCG	149
XYREM SOL 500MG/ML	109	ZEMPLAR CAP 2MCG	149
Y		ZEMPLAR INJ 2MCG/ML	149
YASMIN 28 TAB 3-0.03MG	139	ZEMPLAR INJ 5MCG/ML	149
YAZ TAB 3-0.02MG	138	<i>zenatane cap 10mg</i>	205
YERVOY INJ 200MG	46	<i>zenatane cap 20mg</i>	205
YERVOY INJ 50MG	46	<i>zenatane cap 30mg</i>	205
YESCARTA INJ.....	46	<i>zenatane cap 40mg</i>	205
YONDELIS INJ 1MG.....	37	<i>zenchent tab</i>	140
YONSA TAB 125MG.....	40	ZENPEP CAP 10000UNT	163
YOSPRALA TAB 325-40MG	177	ZENPEP CAP 15000UNT	163
YOSPRALA TAB 81-40MG	177	ZENPEP CAP 25000UNT	163
<i>yuvaferm tab 10mcg</i>	144	ZENPEP CAP 3000UNIT	163
Z		ZENPEP CAP 5000UNIT.....	163
ZACLIR LOT 8%.....	208	<i>zenzedi tab 10mg</i>	102
<i>zafirlukast tab 10 mg</i>	201	<i>zenzedi tab 15mg</i>	102
<i>zafirlukast tab 20 mg</i>	201	<i>zenzedi tab 2.5mg</i>	102

<i>zenzedi tab 20mg</i>	102	ZITHRANOL SHA 1%	211
<i>zenzedi tab 30mg</i>	102	ZITHROMAX INJ 500MG.....	20
<i>zenzedi tab 5mg</i>	102	ZITHROMAX POW 1GM PAK.....	20
<i>zenzedi tab 7.5mg</i>	102	ZITHROMAX SUS 100/5ML.....	20
ZEPATIER TAB 50-100MG	32	ZITHROMAX SUS 200/5ML.....	20
ZERBAXA INJ 1.5GM	17	ZITHROMAX TAB 250MG.....	20
ZERIT CAP 15MG	29	ZITHROMAX TAB 500MG.....	20
ZERIT CAP 20MG	29	ZITHROMAX TAB 600MG.....	20
ZERIT CAP 30MG	29	ZITHROMAX TAB TRI-PAK.....	20
ZERIT CAP 40MG	29	ZITHROMAX TAB Z-PAK.....	20
ZERIT SOL 1MG/ML	29	ZOCOR TAB 10MG	60
ZESTORETIC TAB 10-12.5	49	ZOCOR TAB 20MG	60
ZESTORETIC TAB 20-12.5	49	ZOCOR TAB 40MG	60
ZESTORETIC TAB 20-25MG	49	ZOCOR TAB 5MG	60
ZESTRIL TAB 10MG.....	50	ZOCOR TAB 80MG	60
ZESTRIL TAB 2.5MG.....	50	ZOFRAN SOL 4MG/5ML.....	158
ZESTRIL TAB 20MG.....	51	ZOFRAN TAB 4MG.....	158
ZESTRIL TAB 30MG.....	51	ZOFRAN TAB 4MG ODT.....	158
ZESTRIL TAB 40MG.....	51	ZOFRAN TAB 8MG.....	158
ZESTRIL TAB 5MG	50	ZOFRAN TAB 8MG ODT.....	158
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ZETONNA AER 37MCG	203	ZOHYDRO ER CAP 15MG.....	16
ZEVALIN KIT Y-90	46	ZOHYDRO ER CAP 20MG.....	16
ZIAC TAB 10/6.25	61	ZOHYDRO ER CAP 30MG.....	16
ZIAC TAB 2.5/6.25	61	ZOHYDRO ER CAP 40MG.....	16
ZIAC TAB 5-6.25MG.....	61	ZOHYDRO ER CAP 50MG.....	16
ZIAGEN SOL 20MG/ML	29	ZOLADEX IMP 10.8MG.....	41
ZIAGEN TAB 300MG.....	29	ZOLADEX IMP 3.6MG	41
ZIANA GEL.....	208	<i>zoledronic acid inj conc for iv infusion 4</i>	
<i>zidovudine cap 100 mg</i>	29	<i>mg/5ml</i>	135
<i>zidovudine syrup 10 mg/ml</i>	29	<i>zoledronic acid iv soln 5 mg/100ml</i> ...	135
<i>zidovudine tab 300 mg</i>	29	ZOLEDRONIC INJ 4MG/100	135
<i>zileuton tab er 12hr 600 mg</i>	201	ZOLINZA CAP 100MG	46
ZILRETTA INJ 32MG	147	<i>zolmitriptan orally disintegrating tab 2.5</i>	
<i>zinc chloride inj 1 mg/ml</i>	193	<i>mg</i>	106
<i>zinc sulfate inj 1 mg/ml</i>	193	<i>zolmitriptan orally disintegrating tab 5</i>	
<i>zinc sulfate inj 5 mg/ml</i>	193	<i>mg</i>	106
ZINECARD INJ 250MG	46	<i>zolmitriptan tab 2.5 mg</i>	106
ZINECARD INJ 500MG	46	<i>zolmitriptan tab 5 mg</i>	106
ZINGO INJ 0.5MG.....	4	ZOLOFT CON 20MG/ML.....	86
ZINPLAVA SOL 25MG/ML	181	ZOLOFT TAB 100MG.....	86
ZIOPTAN DRO 0.0015%.....	227	ZOLOFT TAB 25MG	86
<i>ziprasidone hcl cap 20 mg</i>	95	ZOLOFT TAB 50MG	86
<i>ziprasidone hcl cap 40 mg</i>	96	<i>zolpidem tartrate sl tab 1.75 mg</i>	104
<i>ziprasidone hcl cap 60 mg</i>	96	<i>zolpidem tartrate sl tab 3.5 mg</i>	104
<i>ziprasidone hcl cap 80 mg</i>	96	<i>zolpidem tartrate tab 10 mg</i>	104
ZIPSOR CAP 25MG	6	<i>zolpidem tartrate tab 5 mg</i>	104
ZIRGAN GEL 0.15%	224	<i>zolpidem tartrate tab er 12.5 mg</i>	105

<i>zolpidem tartrate tab er 6.25 mg</i>	104	ZURAMPIC TAB 200MG.....	1
ZOLPIMIST SPR 5MG	105	ZYBAN TAB 150MG SR.....	114
ZOMACTON INJ 10MG	148	ZYCLARA CRE 3.75%	209
ZOMACTON INJ 5MG	148	ZYCLARA PUMP CRE 2.5%.....	209
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ZOMETA INJ 4MG/5ML.....	135	ZYDELIG TAB 100MG	43
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ZOMIG SPR 5MG.....	106	ZYFLO CR TAB 600MG	201
ZOMIG TAB 2.5MG.....	106	ZYFLO TAB 600MG.....	201
ZOMIG TAB 5MG.....	106	ZYKADIA CAP 150MG	43
ZOMIG ZMT TAB 2.5 MG	106	ZYLET SUS 0.5-0.3%	221
ZOMIG ZMT TAB 5MG ODT.....	106	ZYLOPRIM TAB 100MG	1
ZONALON CRE 5%.....	219	ZYLOPRIM TAB 300MG	1
ZONEGRAN CAP 100MG.....	82	ZYMAXID SOL 0.5%	222
ZONEGRAN CAP 25MG	82	ZYPITAMAG TAB 1MG.....	60
<i>zonisamide cap 100 mg</i>	82	ZYPITAMAG TAB 2MG.....	60
<i>zonisamide cap 25 mg</i>	82	ZYPITAMAG TAB 4MG.....	60
<i>zonisamide cap 50 mg</i>	82	ZYPREXA INJ 10MG.....	96
ZONTIVITY TAB 2.08MG	177	ZYPREXA RELP INJ 210MG	96
ZORBTIVE INJ 8.8MG	148	ZYPREXA RELP INJ 300MG	96
ZORTRESS TAB 0.25MG.....	182	ZYPREXA RELP INJ 405MG	96
ZORTRESS TAB 0.5MG	182	ZYPREXA TAB 10MG.....	96
ZORTRESS TAB 0.75MG.....	182	ZYPREXA TAB 15MG.....	96
ZORVOLEX CAP 18MG.....	6	ZYPREXA TAB 2.5MG.....	96
ZORVOLEX CAP 35MG.....	6	ZYPREXA TAB 20MG.....	96
ZOSTAVAX INJ	184	ZYPREXA TAB 5MG	96
ZOSYN INJ 2-0.25GM	24	ZYPREXA TAB 7.5MG.....	96
ZOSYN INJ 3-0.375G	24	ZYPREXA ZYDI TAB 10MG.....	96
ZOSYN INJ 36-4.5GM.....	24	ZYPREXA ZYDI TAB 15MG.....	96
ZOSYN INJ 4-0.5GM.....	24	ZYPREXA ZYDI TAB 20MG.....	96
ZOSYN SOL 2-0.25GM.....	24	ZYPREXA ZYDI TAB 5MG.....	96
ZOSYN SOL 3-0.375G	24	ZYTIGA TAB 250MG	40
ZOSYN SOL 4-0.50GM.....	24	ZYTIGA TAB 500MG	40
<i>zovia 1/35e tab</i>	140	ZYVOX SOL 2MG/ML	36
ZOVIRAX CAP 200MG.....	32	ZYVOX SUS 100MG/5M	36
ZOVIRAX CRE 5%	219	ZYVOX TAB 600MG	36
ZOVIRAX OIN 5%	219		
ZOVIRAX SUS 200/5ML	32		
ZOVIRAX TAB 400MG.....	32		
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ZUBSOLV SUB 1.4-0.36	111		
ZUBSOLV SUB 11.4-2.9.....	111		
ZUBSOLV SUB 2.9-0.71	111		
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ZUBSOLV SUB 8.6-2.1.....	111		
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