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# North Carolina State Health Plan 2023 Custom Formulary

**Effective 10/01/2023**

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

The comprehensive formulary document is regularly updated. Please visit the [Plan's website](#) 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.

**USE CAUTION BEFORE PRINTING; LARGE CONTENT DOCUMENT!**

## Table of Contents

Member Guide to Covered Medications on the Formulary .....	5
Formulary Tiers.....	5
Pharmacy Benefit Cost-Share Compare by Plan .....	6
Generic Medications .....	7
Compounded Prescriptions .....	7
Utilization Management: Prior Authorization, Quantity Limitations and Step Therapy Medications .....	7
Specialty Medications.....	8
Affordable Care Act.....	8
High Deductible Health Plan (HDHP) Preventive Medications.....	8
Insulin .....	9
Non-Covered Medications.....	9
Medical Benefit Specialty Medications.....	9
Preferred Blood Glucose Monitoring and Diabetic Supplies .....	9
Coverage for COVID-19 Testing, Treatment and Vaccines .....	9
Using the Member Guide to the Basic Formulary .....	10
Legend .....	10
NOTICE .....	11
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS.....	12
ALLERGENIC EXTRACTS/BIOLOGICALS MISC.....	19
ALTERNATIVE MEDICINES.....	20
AMINOGLYCOSIDES .....	20
ANALGESICS - ANTI-INFLAMMATORY .....	21
ANALGESICS - NONNARCOTIC.....	30
ANALGESICS - OPIOID .....	31
ANDROGENS-ANABOLIC.....	41
ANORECTAL AND RELATED PRODUCTS .....	42
ANTACIDS.....	43
ANTHELMINTICS .....	43
ANTI-INFECTIVE AGENTS - MISC. ....	43
ANTIANGINAL AGENTS .....	47
ANTIANSXIETY AGENTS .....	49
ANTIARRHYTHMICS .....	50
ANTIASTHMATIC AND BRONCHODILATOR AGENTS .....	52
ANTICOAGULANTS .....	56
ANTICONVULSANTS .....	59
ANTIDEPRESSANTS.....	67
ANTIDIABETICS .....	73
ANTIDIARRHEAL/PROBIOTIC AGENTS.....	80
ANTIDOTES AND SPECIFIC ANTAGONISTS.....	80
ANTIEMETICS.....	82
ANTIFUNGALS .....	83
ANTI HISTAMINES .....	85
ANTIHYPERLIPIDEMICS.....	86
ANTIHYPERTENSIVES .....	90
ANTIMALARIALS .....	98

<b>ANTIMYASTHENIC/CHOLINERGIC AGENTS .....</b>	<b>99</b>
<b>ANTIMYCOBACTERIAL AGENTS .....</b>	<b>99</b>
<b>ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES .....</b>	<b>100</b>
<b>ANTIPARKINSON AND RELATED THERAPY AGENTS.....</b>	<b>116</b>
<b>ANTIPSYCHOTICS/ANTIMANIC AGENTS .....</b>	<b>120</b>
<b>ANTISEPTICS &amp; DISINFECTANTS .....</b>	<b>126</b>
<b>ANTIVIRALS.....</b>	<b>127</b>
<b>BETA BLOCKERS .....</b>	<b>133</b>
<b>CALCIUM CHANNEL BLOCKERS .....</b>	<b>136</b>
<b>CARDIOTONICS.....</b>	<b>139</b>
<b>CARDIOVASCULAR AGENTS - MISC.....</b>	<b>140</b>
<b>CEPHALOSPORINS .....</b>	<b>144</b>
<b>CONTRACEPTIVES .....</b>	<b>146</b>
<b>CORTICOSTEROIDS .....</b>	<b>152</b>
<b>COUGH/COLD/ALLERGY .....</b>	<b>156</b>
<b>DERMATOLOGICALS .....</b>	<b>157</b>
<b>DIAGNOSTIC PRODUCTS .....</b>	<b>174</b>
<b>DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS.....</b>	<b>178</b>
<b>DIGESTIVE AIDS .....</b>	<b>178</b>
<b>DIURETICS.....</b>	<b>179</b>
<b>ENDOCRINE AND METABOLIC AGENTS - MISC.....</b>	<b>181</b>
<b>ESTROGENS.....</b>	<b>188</b>
<b>FLUOROQUINOLONES .....</b>	<b>191</b>
<b>GASTROINTESTINAL AGENTS - MISC.....</b>	<b>192</b>
<b>GENERAL ANESTHETICS .....</b>	<b>195</b>
<b>GENITOURINARY AGENTS - MISCELLANEOUS .....</b>	<b>196</b>
<b>GOUT AGENTS .....</b>	<b>197</b>
<b>HEMATOLOGICAL AGENTS - MISC.....</b>	<b>198</b>
<b>HEMATOPOIETIC AGENTS .....</b>	<b>204</b>
<b>HEMOSTATICS.....</b>	<b>207</b>
<b>HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS.....</b>	<b>208</b>
<b>LAXATIVES.....</b>	<b>211</b>
<b>LOCAL ANESTHETICS-PARENTERAL.....</b>	<b>211</b>
<b>MACROLIDES.....</b>	<b>214</b>
<b>MEDICAL DEVICES AND SUPPLIES .....</b>	<b>215</b>
<b>MIGRAINE PRODUCTS .....</b>	<b>225</b>
<b>MINERALS &amp; ELECTROLYTES .....</b>	<b>227</b>
<b>MISCELLANEOUS THERAPEUTIC CLASSES .....</b>	<b>231</b>
<b>MOUTH/THROAT/DENTAL AGENTS.....</b>	<b>236</b>
<b>MULTIVITAMINS .....</b>	<b>237</b>
<b>MUSCULOSKELETAL THERAPY AGENTS.....</b>	<b>241</b>
<b>NASAL AGENTS - SYSTEMIC AND TOPICAL .....</b>	<b>243</b>
<b>NEUROMUSCULAR AGENTS.....</b>	<b>244</b>
<b>NUTRIENTS .....</b>	<b>245</b>
<b>OPHTHALMIC AGENTS.....</b>	<b>247</b>
<b>OTIC AGENTS .....</b>	<b>253</b>
<b>OXYTOCICS .....</b>	<b>254</b>

<b>PASSIVE IMMUNIZING AND TREATMENT AGENTS .....</b>	<b>254</b>
<b>PENICILLINS.....</b>	<b>256</b>
<b>PROGESTINS.....</b>	<b>258</b>
<b>PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. ....</b>	<b>259</b>
<b>RESPIRATORY AGENTS - MISC. ....</b>	<b>266</b>
<b>TETRACYCLINES.....</b>	<b>267</b>
<b>THYROID AGENTS .....</b>	<b>270</b>
<b>TOXOIDS.....</b>	<b>273</b>
<b>ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS .....</b>	<b>274</b>
<b>URINARY ANTISPASMODICS .....</b>	<b>278</b>
<b>VACCINES .....</b>	<b>279</b>
<b>VAGINAL AND RELATED PRODUCTS .....</b>	<b>280</b>
<b>VASOPRESSORS .....</b>	<b>282</b>
<b>VITAMINS .....</b>	<b>283</b>
<b>Index .....</b>	<b>284</b>

## 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 [Lookup tools](#). 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 <https://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 Formulary covers most medications approved by the FDA, within existing benefits. The plan design determines the member's payment obligation.

Definitions for the Tiers are as follows:

**Tier 0:** Made up of zero-cost medications including Affordable Care Act (ACA) preventive medications, insulin, and preferred Blood Glucose Meters (BGMs).

**Tier 1:** Typically includes the most cost-effective of non-specialty prescription medications; most are generic though there are a few instances in which the branded product is more cost-effective. Also includes some generic oral antiretroviral and anti-rejection immunosuppressant medications.

**Tier 2:** Typically includes preferred brand non-specialty medications and some high-cost generics. Also includes some brand oral antiretroviral and anti-rejection immunosuppressant medications and preferred Continuous Glucose Monitors (CGMs) and associated supplies.

**Tier 3:** Typically includes non-preferred brands, including branded generics (also known as single source generics), non-specialty medications. Also includes some non-preferred brand oral antiretroviral medications. Excluded, non-specialty medications that are approved via the exceptions process also take a Tier 3 copay.

**Tier 4:** The most cost-effective specialty medications.

**Tier 5:** Preferred brand specialty medications.

**Tier 6:** Non-preferred brand specialty prescription medications. Excluded, specialty medications that are approved via the exceptions process also take a Tier 6 copay.

**Tier 7:** Preferred diabetic supplies and preferred Blood Glucose Meter (BGM) supplies.

### Pharmacy Benefit Cost-Share Compare by Plan

The grid below provides a summary of the 2023 Plan Year cost-share and unique copays for each of the Plans. Additional description for unique copays and reference to other resources is found in following pages within the guide.

<b>Formulary Tier or Unique Copay</b>	<b>80/20 Plan</b>	<b>70/30 Plan</b>	<b>High Deductible Health Plan</b>
<b>Tier 0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Tier 1</b>	\$5 copay per 30-day supply	\$16 copay per 30-day supply	50% after deductible
<b>Tier 2</b>	\$30 copay per 30-day supply	\$47 copay per 30-day supply	50% after deductible
<b>Tier 3</b>	Deductible/coinsurance	Deductible/coinsurance	50% after deductible
<b>Tier 4</b>	\$100 copay per 30-day supply	\$200 copay per 30-day supply	50% after deductible
<b>Tier 5</b>	\$250 copay per 30-day supply	\$350 copay per 30-day supply	50% after deductible
<b>Tier 6</b>	Deductible/coinsurance	Deductible/coinsurance	50% after deductible
<b>Tier 7</b>	\$5 copay per 30-day supply	\$10 copay per 30-day supply	50% after deductible
<b>HDHP Preventive Medications (PV)</b>	not applicable	not applicable	50% bypass deductible

## 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 \$0 cost-sharing under the Affordable Care Act (ACA) for members enrolled in the 70/30, 80/20 or HDHP plans. These medications take Tier 0. Examples of categories of medications that may be subject to \$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 on the [ACA Preventive List](#). These medications are identified by the notation of "**ACA**" next to qualifying medications within the formulary guide. 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.

## High Deductible Health Plan (HDHP) Preventive Medications

For the High Deductible Health Plan some preventive medications used to prevent or manage certain health conditions are covered without meeting a deductible. Coinsurance will still apply. These medications are identified in the guide with a "**PV**" notation.



Additional information about these medications can be found on the [HDHP Preventive Medication List](#).

## **Insulin**

The Plan will cover the full cost of insulin. This means that any covered insulin or insulin approved through the formulary exceptions (medical necessity) process will take Tier 0 and have a \$0 copay/coinsurance for members. Preferred insulin products are identified in the guide with a notation of “**\$0 copay per 30-day supply**”.

## **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.

## **Preferred Blood Glucose Monitoring and Diabetic Supplies**

Diabetic testing supplies associated with the Plan’s preferred Blood Glucose Monitoring (BGM) systems take Tier 7 and will have a unique copay of \$5 per 30-day supply for the 80/20 Plan or \$10 per 30-day supply for the 70/30 Plan. This unique copay also applies to preferred insulin pens and syringes and lancets. It does not apply to Continuous Glucose Monitoring (CGM) products.

## **Coverage for COVID-19 Testing, Treatment and Vaccines**

Due to the Public Health Emergency, FDA-authorized COVID-19 tests, treatments and vaccines are covered with a \$0 cost-share to members. These products are identified in the formulary guide with a notation of “**\$0 Cost Share**”. Quantity limits apply to antiviral medications and At Home Rapid COVID-19 tests. Please note that product updates occur frequently and this guide may not reflect all changes related to coverage of FDA-authorized COVID-19 products. If you do not find the product you are searching for, or if you have questions, please contact CVS Caremark customer service at 1-888-321-3124. Additional updates may also be found on the Plan’s website at [Coronavirus Updates | NC State Health Plan](#).

## 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.

Drug Name	Drug Tier	Requirements/Limits
<b>ANALGESICS</b>		
<b><i>ANALGESICS, OTHER</i></b>		
OFIRMEV INJ 10MG/ML	1	PA
<b><i>ANESTHETICS PV</i></b>		
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

## Document Layout Key

Column	Description
Drug Name	Lists the medication name. Generic medications are listed in lowercase, <i>italicized</i> letters. Brand name medications are CAPITALIZED. Separate medication entries are required for some dosage forms such as extended-release and delayed-release.
Drug Tier	Indicates the tier level.
Requirements/Limits	Indicates 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.

## Legend

### Abbreviation/Acronym

cap  
chew  
conc  
cr

### Definition

capsule  
chewable  
concentrate  
controlled-release

**Abbreviation/Acronym**

dr  
ec  
effer  
equiv  
er  
inhal  
inj  
liq  
lot  
nebu  
odt  
oint  
ophth  
powd  
sl  
sol/soln  
sr  
suppos  
susp  
tab  
td  
ACA  
NC  
OTC  
PA  
PV  
QL  
SP  
ST

**Definition**

delayed-release  
enteric coated  
effervescent  
equivalent  
extended-release  
inhalation  
injection  
liquid  
lotion  
nebulizer  
orally disintegrating tablet  
ointment  
ophthalmic  
powder  
sublingual  
solution  
sustained-release  
suppository  
suspension  
tablet  
transdermal  
Affordable Care Act Copay  
Not Covered  
Over the counter  
Prior Authorization  
Preventive (HDHP)  
Quantity Limit  
Specialty  
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 Effective 10/01/2023

### Drug Name Drug Tier Requirements/Limits ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS

#### AMPHETAMINES

ADDERALL TAB 5MG	NC	
ADDERALL TAB 7.5MG	NC	
ADDERALL TAB 10MG	NC	
ADDERALL TAB 12.5MG	NC	
ADDERALL TAB 15MG	NC	
ADDERALL TAB 20MG	NC	
ADDERALL TAB 30MG	NC	
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	
ADDERALL XR CAP 30MG	NC	
ADZENYS ER SUS 1.25MG	NC	
ADZENYS XR TAB 3.1MG	NC	
ADZENYS XR TAB 6.3MG	NC	
ADZENYS XR TAB 9.4MG	NC	
ADZENYS XR TAB 12.5MG	NC	
ADZENYS XR TAB 15.7 MG	NC	
ADZENYS XR TAB 18.8MG	NC	
<i>amphetamine sulfate tab 5 mg</i>	2	PA, QL
<i>amphetamine sulfate tab 10 mg</i>	2	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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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
DESOXYN TAB 5MG	3	PA, QL
DEXEDRINE CAP 10MG CR	3	PA, QL
DEXEDRINE CAP 15MG CR	3	PA, QL
<i>dextroamphetamine sulfate cap er 24hr 5 mg</i>	1	PA, QL
<i>dextroamphetamine sulfate cap er 24hr 10 mg</i>	1	PA, QL
<i>dextroamphetamine sulfate cap er 24hr 15 mg</i>	1	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
<i>dextroamphetamine sulfate tab 15 mg</i>	2	PA, QL
<i>dextroamphetamine sulfate tab 20 mg</i>	2	PA, QL
<i>dextroamphetamine sulfate tab 30 mg</i>	2	PA, QL
DYANAVAL XR CHW 5MG	NC	
DYANAVAL XR CHW 10MG	NC	
DYANAVAL XR CHW 15MG	NC	
DYANAVAL XR CHW 20MG	NC	
DYANAVAL XR SUS 2.5MG/ML	NC	
EVEKEO ODT TAB 5MG	NC	
EVEKEO ODT TAB 10MG	NC	
EVEKEO ODT TAB 15MG	NC	
EVEKEO ODT TAB 20MG	NC	
EVEKEO TAB 5MG	NC	
EVEKEO TAB 10MG	NC	
<i>lisdexamfetamine dimesylate cap 10 mg</i>	1	PA, QL
<i>lisdexamfetamine dimesylate cap 20 mg</i>	1	PA, QL
<i>lisdexamfetamine dimesylate cap 30 mg</i>	1	PA, QL
<i>lisdexamfetamine dimesylate cap 40 mg</i>	1	PA, QL
<i>lisdexamfetamine dimesylate cap 50 mg</i>	1	PA, QL
<i>lisdexamfetamine dimesylate cap 60 mg</i>	1	PA, QL
<i>lisdexamfetamine dimesylate cap 70 mg</i>	1	PA, QL
<i>lisdexamfetamine dimesylate chew tab 10 mg</i>	1	PA, QL
<i>lisdexamfetamine dimesylate chew tab 20 mg</i>	1	PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>lisdexamfetamine dimesylate chew tab 30 mg</i>	1	PA, QL
<i>lisdexamfetamine dimesylate chew tab 40 mg</i>	1	PA, QL
<i>lisdexamfetamine dimesylate chew tab 50 mg</i>	1	PA, QL
<i>lisdexamfetamine dimesylate chew tab 60 mg</i>	1	PA, QL
<i>methamphetamine hcl tab 5 mg</i>	2	PA, QL
MYDAYIS CAP 12.5MG	NC	
MYDAYIS CAP 25MG	NC	
MYDAYIS CAP 37.5MG	NC	
MYDAYIS CAP 50MG	NC	
<i>procentra sol 5mg/5ml</i>	2	PA, QL
VYVANSE CAP 10MG	3	PA, QL
VYVANSE CAP 20MG	3	PA, QL
VYVANSE CAP 30MG	3	PA, QL
VYVANSE CAP 40MG	3	PA, QL
VYVANSE CAP 50MG	3	PA, QL
VYVANSE CAP 60MG	3	PA, QL
VYVANSE CAP 70MG	3	PA, QL
VYVANSE CHW 10MG	3	PA, QL
VYVANSE CHW 20MG	3	PA, QL
VYVANSE CHW 30MG	3	PA, QL
VYVANSE CHW 40MG	3	PA, QL
VYVANSE CHW 50MG	3	PA, QL
VYVANSE CHW 60MG	3	PA, QL
XELSTRYM PAD 9MG/9HR	NC	
XELSTRYM PAD 13.5/9HR	NC	
XELSTRYM PAD 18MG/9HR	NC	
<i>zenzedi tab 2.5mg</i>	2	PA, QL
<i>zenzedi tab 5mg</i>	1	PA, QL
<i>zenzedi tab 7.5mg</i>	1	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
<b>ANALEPTICS</b>		
CAFCIT INJ 60MG/3ML	3	
<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>	1	
DOPRAM INJ 20MG/ML	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>ANOREXIANTS NON-AMPHETAMINE</b>		
ADIPEX-P CAP 37.5MG	3	PA; PV
ADIPEX-P TAB 37.5MG	3	PA; PV
<i>benzphetamine hcl tab 25 mg</i>	1	PA; PV
<i>benzphetamine hcl tab 50 mg</i>	1	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 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
PLENITY CAP	NC	
QSYMIA CAP 3.75-23	2	PA; PV
QSYMIA CAP 7.5-46MG	2	PA; PV
QSYMIA CAP 11.25-69	2	PA; PV
QSYMIA CAP 15-92MG	2	PA; PV
<b>ANTI-OBESITY AGENTS</b>		
CONTRAVE TAB 8-90MG	NC	
IMCIVREE INJ 10MG/ML	NC	
<i>orlistat cap 120 mg</i>	2	PA; PV
SAXENDA INJ 18MG/3ML	2	PA; PV
WEGOVY INJ 0.5MG	2	PA; PV
WEGOVY INJ 0.25MG	2	PA; PV
WEGOVY INJ 1.7MG	2	PA; PV
WEGOVY INJ 1MG	2	PA; PV
WEGOVY INJ 2.4MG	2	PA; PV
XENICAL CAP 120MG	NC	
<b>ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) AGENTS</b>		
<i>atomoxetine hcl cap 10 mg (base equiv)</i>	1	PA, QL
<i>atomoxetine hcl cap 18 mg (base equiv)</i>	1	PA, QL
<i>atomoxetine hcl cap 25 mg (base equiv)</i>	1	PA, QL
<i>atomoxetine hcl cap 40 mg (base equiv)</i>	1	PA, QL
<i>atomoxetine hcl cap 60 mg (base equiv)</i>	1	PA, QL
<i>atomoxetine hcl cap 80 mg (base equiv)</i>	1	PA, QL
<i>atomoxetine hcl cap 100 mg (base equiv)</i>	1	PA, QL
<i>clonidine hcl tab er 12hr 0.1 mg</i>	1	
<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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	
QELBREE CAP 100MG ER	2	PA, QL
QELBREE CAP 150MG ER	2	PA, QL
QELBREE CAP 200MG ER	2	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

**DOPAMINE AND NOREPINEPHRINE REUPTAKE INHIBITORS  
(DNRIS)**

SUNOSI TAB 75MG	2	PA, QL
SUNOSI TAB 150MG	2	PA, QL

**HISTAMINE H3-RECEPTOR ANTAGONIST/INVERSE AGONISTS**

WAKIX TAB 4.45MG	5	SP, PA, QL
WAKIX TAB 17.8MG	5	SP, PA, QL

**STIMULANTS - MISC.**

ADHANSIA XR CAP 25MG	NC	
ADHANSIA XR CAP 35MG	NC	
ADHANSIA XR CAP 45MG	NC	
ADHANSIA XR CAP 55MG	NC	
ADHANSIA XR CAP 70MG	NC	
ADHANSIA XR CAP 85MG	NC	
APTENSIO XR CAP 10MG	NC	
APTENSIO XR CAP 15MG	NC	
APTENSIO XR CAP 20MG	NC	
APTENSIO XR CAP 30MG	NC	
APTENSIO XR CAP 40MG	NC	
APTENSIO XR CAP 50MG	NC	
APTENSIO XR CAP 60MG	NC	
<i>armodafinil tab 50 mg</i>	1	PA, QL
<i>armodafinil tab 150 mg</i>	1	PA, QL
<i>armodafinil tab 200 mg</i>	1	PA, QL
<i>armodafinil tab 250 mg</i>	1	PA, QL
AZSTARYS CAP 26.1-5.2	2	PA, QL
AZSTARYS CAP 39.2-7.8	2	PA, QL



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
AZSTARYS CAP 52.3-10.	2	PA, QL
CONCERTA TAB 18MG	NC	
CONCERTA TAB 27MG	NC	
CONCERTA TAB 36MG	NC	
CONCERTA TAB 54MG	NC	
COTEMPLA XR TAB 8.6MG	NC	
COTEMPLA XR TAB 17.3MG	NC	
COTEMPLA XR TAB 25.9MG	NC	
DAYTRANA DIS 10MG/9HR	NC	
DAYTRANA DIS 15MG/9HR	NC	
DAYTRANA DIS 20MG/9HR	NC	
DAYTRANA DIS 30MG/9HR	NC	
<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>	1	PA, QL
<i>dexmethylphenidate hcl cap er 24 hr 25 mg</i>	1	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>	1	PA, QL
<i>dexmethylphenidate hcl cap er 24 hr 40 mg</i>	1	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
FOCALIN TAB 2.5MG	3	PA, QL
FOCALIN TAB 5MG	3	PA, QL
FOCALIN TAB 10MG	3	PA, QL
FOCALIN XR CAP 5MG	NC	
FOCALIN XR CAP 10MG	NC	
FOCALIN XR CAP 15MG	NC	
FOCALIN XR CAP 20MG	NC	
FOCALIN XR CAP 25MG	NC	
FOCALIN XR CAP 30MG	NC	
FOCALIN XR CAP 35MG	NC	
FOCALIN XR CAP 40MG	NC	
JORNAY PM CAP 20MG ER	NC	
JORNAY PM CAP 40MG ER	NC	
JORNAY PM CAP 60MG ER	NC	
JORNAY PM CAP 80MG ER	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
JORNAY PM CAP 100MG ER	NC	
METHYLIN SOL 5MG/5ML	3	PA, QL
METHYLIN SOL 10MG/5ML	3	PA, QL
METHYLPHENID TAB 72MG ER	3	PA, QL
<i>methylphenidate hcl cap er 10 mg (cd)</i>	1	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	PA, QL
<i>methylphenidate hcl cap er 24hr 10 mg (xr)</i>	2	PA, QL
<i>methylphenidate hcl cap er 24hr 15 mg (xr)</i>	2	PA, QL
<i>methylphenidate hcl cap er 24hr 20 mg (la)</i>	1	PA, QL
<i>methylphenidate hcl cap er 24hr 20 mg (xr)</i>	2	PA, QL
<i>methylphenidate hcl cap er 24hr 30 mg (la)</i>	1	PA, QL
<i>methylphenidate hcl cap er 24hr 30 mg (xr)</i>	2	PA, QL
<i>methylphenidate hcl cap er 24hr 40 mg (la)</i>	1	PA, QL
<i>methylphenidate hcl cap er 24hr 40 mg (xr)</i>	2	PA, QL
<i>methylphenidate hcl cap er 24hr 50 mg (xr)</i>	2	PA, QL
<i>methylphenidate hcl cap er 24hr 60 mg (la)</i>	2	PA, QL
<i>methylphenidate hcl cap er 24hr 60 mg (xr)</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>	1	PA, QL
<i>methylphenidate hcl cap er 50 mg (cd)</i>	1	PA, QL
<i>methylphenidate hcl cap er 60 mg (cd)</i>	1	PA, QL
<i>methylphenidate hcl chew tab 2.5 mg</i>	1	PA, QL
<i>methylphenidate hcl chew tab 5 mg</i>	1	PA, QL
<i>methylphenidate hcl chew tab 10 mg</i>	2	PA, QL
<i>methylphenidate hcl soln 5 mg/5ml</i>	1	PA, QL
<i>methylphenidate hcl soln 10 mg/5ml</i>	1	PA, QL
<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>	1	PA, QL
<i>methylphenidate hcl tab er 20 mg</i>	1	PA, QL
<i>methylphenidate hcl tab er 24hr 18 mg</i>	1	PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>methylphenidate hcl tab er 24hr 27 mg</i>	1	PA, QL
<i>methylphenidate hcl tab er 24hr 36 mg</i>	1	PA, QL
<i>methylphenidate hcl tab er 24hr 54 mg</i>	1	PA, QL
<i>methylphenidate hcl tab er osmotic release (osm) 18 mg</i>	1	PA, QL
<i>methylphenidate hcl tab er osmotic release (osm) 27 mg</i>	1	PA, QL
<i>methylphenidate hcl tab er osmotic release (osm) 36 mg</i>	1	PA, QL
<i>methylphenidate hcl tab er osmotic release (osm) 54 mg</i>	1	PA, QL
<i>methylphenidate td patch 10 mg/9hr</i>	2	PA, QL
<i>methylphenidate td patch 15 mg/9hr</i>	2	PA, QL
<i>methylphenidate td patch 20 mg/9hr</i>	2	PA, QL
<i>methylphenidate td patch 30 mg/9hr</i>	2	PA, QL
<i>modafinil tab 100 mg</i>	1	PA, QL
<i>modafinil tab 200 mg</i>	1	PA, QL
NUVIGIL TAB 50MG	NC	
NUVIGIL TAB 150MG	NC	
NUVIGIL TAB 200MG	NC	
NUVIGIL TAB 250MG	NC	
PROVIGIL TAB 100MG	NC	
PROVIGIL TAB 200MG	NC	
QUILLICHEW CHW 20MG ER	NC	
QUILLICHEW CHW 30MG ER	NC	
QUILLICHEW CHW 40MG ER	NC	
QUILLIVANT SUS 25MG/5ML	NC	
RELEXXII TAB 72MG	NC	
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

## **ALLERGENIC EXTRACTS/BIOLOGICALS MISC**

### **ALLERGENIC EXTRACTS**

GRASTEK SUB 2800BAU	2	PA; PV
ODACTRA SUB	3	PA; PV
ORALAIR SUB 300 IR	2	PA; PV
PALFORZIA CAP ESCALAT	NC	
PALFORZIA CAP LEVEL 1	NC	
PALFORZIA CAP LEVEL 2	NC	
PALFORZIA CAP LEVEL 3	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PALFORZIA CAP LEVEL 4	NC	
PALFORZIA CAP LEVEL 5	NC	
PALFORZIA CAP LEVEL 6	NC	
PALFORZIA CAP LEVEL 7	NC	
PALFORZIA CAP LEVEL 8	NC	
PALFORZIA CAP LEVEL 9	NC	
PALFORZIA CAP LEVEL 10	NC	
PALFORZIA POW LEVEL 11	NC	
RAGWITEK SUB	2	PA; PV
STANDARDIZED SOL MITE MIX	3	

## **ALTERNATIVE MEDICINES**

### **ALTERNATIVE MEDICINE - A'S**

ALPHA-LIPOIC SOL ACID	3	
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## **AMINOGLYCOSIDES**

### **AMINOGLYCOSIDES**

<i>amikacin sulfate inj 1 gm/4ml (250 mg/ml)</i>	1	
<i>amikacin sulfate inj 500 mg/2ml (250 mg/ml)</i>	2	
ARIKAYCE SUS	6	SP, PA
BETHKIS NEB 300/4ML	NC	
<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	
<i>gentamicin sulfate inj 10 mg/ml</i>	1	
<i>gentamicin sulfate inj 40 mg/ml</i>	1	
HUMATIN CAP 250MG	NC	
KITABIS PAK NEB 300/5ML	NC	
<i>neomycin sulfate tab 500 mg</i>	1	
<i>paromomycin sulfate cap 250 mg</i>	2	
<i>streptomycin sulfate for inj 1 gm</i>	1	
TOBI NEB 300/5ML	NC	
TOBI PODHALR CAP 28MG	NC	
<i>tobramycin nebu soln 300 mg/4ml</i>	4	SP, PA, QL
<i>tobramycin nebu soln 300 mg/5ml</i>	4	SP, PA, QL
<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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv)</i>	2	
ZEMDRI INJ 500MG/10	3	

**ANALGESICS - ANTI-INFLAMMATORY**

**ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES**

ADALIMU-ADAZ INJ 40/0.4ML	NC	
AMJEVITA INJ 10/0.2ML	6	SP, PA, QL
AMJEVITA INJ 20/0.4ML	6	SP, PA, QL
AMJEVITA INJ 40/0.8ML	6	SP, PA, QL; (NDCs 55513040001 and 55513040002 are not covered)
CYLTEZO INJ 10/0.2ML	NC	
CYLTEZO INJ 20/0.4ML	NC	
CYLTEZO INJ 40/0.8ML	NC	
HADLIMA INJ 40/0.4ML	NC	
HADLIMA INJ 40/0.8ML	NC	
HADLIMA PUSH INJ 40/0.4ML	NC	
HADLIMA PUSH INJ 40/0.8ML	NC	
HULIO INJ 40/0.8ML	NC	
HULIO KIT 20/0.4ML	NC	
HUMIRA INJ 10/0.1ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, all other autoimmune conditions
HUMIRA INJ 20/0.2ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, all other autoimmune conditions
HUMIRA INJ 40/0.4ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, all other autoimmune conditions

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
HUMIRA KIT 40MG/0.8	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, all other autoimmune conditions
HUMIRA PEDIA INJ CROHNS	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, all other autoimmune conditions
HUMIRA PEN INJ 40/0.4ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, all other autoimmune conditions
HUMIRA PEN INJ 40MG/0.8	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, all other autoimmune conditions
HUMIRA PEN INJ 80/0.8ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, all other autoimmune conditions
HUMIRA PEN INJ CD/UC/HS	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, all other autoimmune conditions

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
HUMIRA PEN INJ PS/UV	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, all other autoimmune conditions
HUMIRA PEN KIT CD/UC/HS	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, all other autoimmune conditions
HUMIRA PEN KIT PED UC	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, all other autoimmune conditions
HUMIRA PEN KIT PS/UV	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Crohn's Disease, Psoriasis, Psoriatic Arthritis, Rheumatoid Arthritis, Ulcerative Colitis, all other autoimmune conditions
HYRIMOZ INJ 10/0.1ML	NC	
HYRIMOZ INJ 20/0.2ML	NC	
HYRIMOZ INJ 40/0.4ML	NC	
HYRIMOZ INJ 80/0.8ML	NC	
HYRIMOZ-CROH INJ UC SP	NC	
HYRIMOZ-PED INJ CROHNS	NC	
HYRIMOZ-PLAQ INJ PSORIASI	NC	
IDACIO INJ 40/0.8ML	NC	
SIMPONI ARIA SOL 50MG/4ML	5	SP, PA, QL
SIMPONI INJ 50/0.5ML	NC	
SIMPONI INJ 100MG/ML	NC	
YUFLYMA 2SYR KIT 40/0.4ML	NC	
YUSIMRY INJ 40/0.8ML	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>ANTIRHEUMATIC - ENZYME INHIBITORS</b>		
OLUMIANT TAB 2MG	NC	
RINVOQ TAB 15MG ER	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Non-Radiographic Axial Spondyloarthritis, Psoriatic Arthritis, Rheumatoid Arthritis and Ulcerative Colitis
RINVOQ TAB 30MG ER	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Non-Radiographic Axial Spondyloarthritis, Psoriatic Arthritis, Rheumatoid Arthritis and Ulcerative Colitis
RINVOQ TAB 45MG ER	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Non-Radiographic Axial Spondyloarthritis, Psoriatic Arthritis, Rheumatoid Arthritis and Ulcerative Colitis
XELJANZ SOL 1MG/ML	5	SP, PA, QL; Preferred for Rheumatoid Arthritis, Ulcerative Colitis
XELJANZ TAB 5MG	5	SP, PA, QL; Preferred for Rheumatoid Arthritis, Ulcerative Colitis
XELJANZ TAB 10MG	5	SP, PA, QL; Preferred for Rheumatoid Arthritis, Ulcerative Colitis
XELJANZ XR TAB 11MG	5	SP, PA, QL; Preferred for Rheumatoid Arthritis, Ulcerative Colitis
XELJANZ XR TAB 22MG	5	SP, PA, QL; Preferred for Rheumatoid Arthritis, Ulcerative Colitis
<b>ANTIRHEUMATIC ANTIMETABOLITES</b>		
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	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
RASUVO INJ 7.5MG	5	SP, PA, QL
RASUVO INJ 10MG	5	SP, PA, QL
RASUVO INJ 12.5MG	5	SP, PA, QL
RASUVO INJ 15MG	5	SP, PA, QL
RASUVO INJ 17.5MG	5	SP, PA, QL
RASUVO INJ 22.5MG	5	SP, PA, QL
RASUVO INJ 25MG	5	SP, PA, QL
RASUVO INJ 30MG	5	SP, PA, QL
REDITREX INJ 7.5/.3ML	NC	
REDITREX INJ 10/.4ML	NC	
REDITREX INJ 12.5/0.5	NC	
REDITREX INJ 15/.6ML	NC	
REDITREX INJ 17.5/0.7	NC	
REDITREX INJ 20/.8ML	NC	
REDITREX INJ 22.5/0.9	NC	
REDITREX INJ 25MG/ML	NC	
<b>GOLD COMPOUNDS</b>		
RIDAURA CAP 3MG	3	
<b>INTERLEUKIN-1 BLOCKERS</b>		
ARCALYST INJ 220MG	NC	
<b>INTERLEUKIN-1 RECEPTOR ANTAGONIST (IL-1RA)</b>		
KINERET INJ	NC	
<b>INTERLEUKIN-1BETA BLOCKERS</b>		
ILARIS INJ 150MG/ML	5	SP, PA
<b>INTERLEUKIN-6 RECEPTOR INHIBITORS</b>		
ACTEMRA INJ 80MG/4ML	NC	
ACTEMRA INJ 162/0.9	NC	
ACTEMRA INJ 200/10ML	NC	
ACTEMRA INJ 400/20ML	NC	
KEVZARA INJ 150/1.14	5	SP, PA, QL; Preferred for Rheumatoid Arthritis
KEVZARA INJ 200/1.14	5	SP, PA, QL; Preferred for Rheumatoid Arthritis
<b>NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)</b>		
ANAPROX DS TAB 550MG	2	
ARTHROTEC 50 TAB	NC	
ARTHROTEC 75 TAB	NC	
CALDOLOR INJ 4MG/ML	3	
CALDOLOR INJ 800/8ML	3	
<i>cataflam tab 50mg</i>	1	
CELEBREX CAP 50MG	NC	
CELEBREX CAP 100MG	NC	
CELEBREX CAP 200MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
CELEBREX CAP 400MG	NC	
<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	
DAYPRO TAB 600MG	3	
<i>diclofenac potassium tab 25 mg</i>	NC	
<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	
<i>diclofenac w/ misoprostol tab delayed release 50-0.2 mg</i>	1	
<i>diclofenac w/ misoprostol tab delayed release 75-0.2 mg</i>	1	
DUEXIS TAB 800-26.6	NC	
EC-NAPROSYN TAB 375MG	3	
EC-NAPROSYN TAB 500MG	3	
<i>ec-naproxen tab 375mg</i>	1	(applies to the 375 mg strength)
<i>ec-naproxen tab 500mg</i>	2	(applies to the 500 mg strength)
<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>	NC	
<i>fenoprofen calcium tab 600 mg</i>	NC	
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 lysine iv soln 10 mg/ml (base equivalent)</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	
<i>ibuprofen-famotidine tab 800-26.6 mg</i>	NC	
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	
INDOMETHACIN SUP 100MG	3	
<i>indomethacin suppos 50 mg</i>	1	
<i>ketoprofen cap 25 mg</i>	NC	
<i>ketoprofen cap 50 mg</i>	3	
<i>ketoprofen cap er 24hr 200 mg</i>	NC	
<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>	1	
<i>meclofenamate sodium cap 100 mg</i>	2	
<i>mefenamic acid cap 250 mg</i>	2	
<i>meloxicam cap 5 mg</i>	NC	
<i>meloxicam cap 10 mg</i>	NC	
<i>meloxicam susp 7.5 mg/5ml</i>	1	
<i>meloxicam tab 7.5 mg</i>	1	
<i>meloxicam tab 15 mg</i>	1	
<i>nabumetone tab 500 mg</i>	1	
<i>nabumetone tab 750 mg</i>	1	
NALFON CAP 400MG	3	ST
NALFON TAB 600MG	3	ST
NAPRELAN TAB 375MG CR	NC	
NAPRELAN TAB 500MG CR	NC	
NAPRELAN TAB 750MG CR	NC	
NAPROSYN SUS 125/5ML	3	
NAPROSYN TAB 500MG	3	
<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>	NC	
<i>naproxen sodium tab er 24hr 500 mg (base equiv)</i>	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>naproxen susp 125 mg/5ml</i>	NC	
<i>naproxen tab 250 mg</i>	1	
<i>naproxen tab 375 mg</i>	1	
<i>naproxen tab 500 mg</i>	1	
<i>naproxen tab ec 375 mg</i>	1	
<i>naproxen tab ec 500 mg</i>	2	
<i>naproxen-esomeprazole magnesium tab dr 375-20 mg</i>	NC	
<i>naproxen-esomeprazole magnesium tab dr 500-20 mg</i>	NC	
NEOPROFEN SOL 10MG/ML	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	
<i>oxaprozin tab 600 mg</i>	1	
<i>piroxicam cap 10 mg</i>	1	
<i>piroxicam cap 20 mg</i>	1	
PREVIDOLRX PAK ANALGESI	NC	
RELAFEN DS TAB 1000MG	NC	
<i>relafen tab 500mg</i>	NC	
<i>relafen tab 750mg</i>	NC	
SPRIX SPR 15.75MG	NC	
<i>sulindac tab 150 mg</i>	1	
<i>sulindac tab 200 mg</i>	1	
<i>tolmetin sodium cap 400 mg</i>	1	
VIMOVO TAB 375-20MG	NC	
VIMOVO TAB 500-20MG	NC	
VIVLODEX CAP 5MG	NC	
VIVLODEX CAP 10MG	NC	
ZIPSOR CAP 25MG	NC	
ZORVOLEX CAP 18MG	NC	
ZORVOLEX CAP 35MG	NC	
ZYNRELEF INJ 200-6MG	3	
ZYNRELEF INJ 400-12MG	3	
<b>PHOSPHODIESTERASE 4 (PDE4) INHIBITORS</b>		
OTEZLA TAB 10/20/30	5	SP, PA, QL; Preferred for Psoriasis, Psoriatic Arthritis
OTEZLA TAB 30MG	5	SP, PA, QL; Preferred for Psoriasis, Psoriatic Arthritis

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>PYRIMIDINE SYNTHESIS INHIBITORS</b>		
ARAVA TAB 10MG	2	
ARAVA TAB 20MG	2	
<i>leflunomide tab 10 mg</i>	1	
<i>leflunomide tab 20 mg</i>	1	
<b>SELECTIVE COSTIMULATION MODULATORS</b>		
ORENCIA CLCK INJ 125MG/ML	5	SP, PA, QL; Preferred for Rheumatoid Arthritis
ORENCIA INJ 50/0.4ML	5	SP, PA, QL; Preferred for Rheumatoid Arthritis
ORENCIA INJ 87.5/0.7	5	SP, PA, QL; Preferred for Rheumatoid Arthritis
ORENCIA INJ 125MG/ML	5	SP, PA, QL; Preferred for Rheumatoid Arthritis
ORENCIA INJ 250MG	NC	
<b>SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS</b>		
ENBREL INJ 25/0.5ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Psoriatic Arthritis, Rheumatoid Arthritis, all other autoimmune conditions
ENBREL INJ 25MG	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Psoriatic Arthritis, Rheumatoid Arthritis, all other autoimmune conditions
ENBREL INJ 50MG/ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Psoriatic Arthritis, Rheumatoid Arthritis, all other autoimmune conditions
ENBREL MINI INJ 50MG/ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Psoriatic Arthritis, Rheumatoid Arthritis, all other autoimmune conditions
ENBREL SRCLK INJ 50MG/ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Psoriatic Arthritis, Rheumatoid Arthritis, all other autoimmune conditions

Drug Name	Drug Tier	Requirements/Limits
<b>ANALGESICS - NONNARCOTIC</b>		
<b>ANALGESIC COMBINATIONS</b>		
ALLZITAL TAB 25-325MG	NC	
<i>bac tab</i>	1	QL
BUT/ASA/CAF TAB	NC	
BUTAL/APAP CAP 50-300MG	NC	
<i>butalbital-acetaminophen cap 50-300 mg</i>	NC	
<i>butalbital-acetaminophen tab 25-325 mg</i>	NC	
<i>butalbital-acetaminophen tab 50-325 mg</i>	1	QL
<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	QL
<i>butalbital-aspirin-caffeine cap 50-325-40 mg</i>	1	QL
<i>esgic cap</i>	NC	
ESGIC TAB	3	QL
FIORICET CAP	NC	
<i>tencon tab 50-325mg</i>	1	QL
<i>vanatol lq sol</i>	NC	
<i>vtol lq sol</i>	NC	
<i>zebutal cap</i>	NC	
<b>ANALGESICS OTHER</b>		
<i>acetaminophen iv soln 10 mg/ml</i>	2	
<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	
LOTREXONE CAP 1.5MG	NC	
LOTREXONE CAP 4.5MG	NC	
<b>ANALGESICS-PEPTIDE CHANNEL BLOCKERS</b>		
PRIALT INJ 25MCG/ML	6	SP
PRIALT INJ 100MCG	6	SP
PRIALT INJ 500MCG	6	SP
<b>SALICYLATES</b>		
<i>aspirin adlt tab 81mg ec</i>	0	OTC; ACA, PV
<i>aspirin chew tab 81 mg</i>	0	OTC; ACA, PV
<i>aspirin chld chw 81mg</i>	0	OTC; ACA, PV
<i>aspirin low chw 81mg</i>	0	OTC; ACA, PV
<i>aspirin low tab 81mg</i>	0	OTC; ACA, PV
<i>aspirin low tab 81mg ec</i>	0	OTC; ACA, PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>aspirin tab delayed release 81 mg</i>	0	OTC; ACA, PV
<i>aspirin-81 chw 81mg</i>	0	OTC; ACA, PV
<i>bayer low chw 81mg</i>	0	OTC; ACA, PV
<i>bayer low tab 81mg ec</i>	0	OTC; ACA, PV
<i>child asa chw 81mg</i>	0	OTC; ACA, PV
<i>cvs aspirin tab 81mg ec</i>	0	OTC; ACA, PV
<i>diflunisal tab 500 mg</i>	1	
<i>ecotrin low tab 81mg ec</i>	0	OTC; ACA, PV
<i>eq aspirin chw 81mg</i>	0	OTC; ACA, PV
<i>eql aspirin chw 81mg</i>	0	OTC; ACA, PV
<i>gnp aspirin chw 81mg</i>	0	OTC; ACA, PV
<i>gnp aspirin tab 81mg ec</i>	0	OTC; ACA, PV
<i>goodsense tab 81mg ec</i>	0	OTC; ACA, PV
<i>hm aspirin chw 81mg</i>	0	OTC; ACA, PV
<i>kls aspirin tab 81mg ec</i>	0	OTC; ACA, PV
<i>kp aspirin tab 81mg ec</i>	0	OTC; ACA, PV
<i>low dose asa tab 81mg</i>	0	OTC; ACA, PV
<i>mm aspirin tab low dose</i>	0	OTC; ACA, PV
<i>px aspirin chw 81mg</i>	0	OTC; ACA, PV
<i>px aspirin tab 81mg ec</i>	0	OTC; ACA, PV
<i>qc aspirin chw 81mg</i>	0	OTC; ACA, PV
<i>qc child asa chw 81mg</i>	0	OTC; ACA, PV
<i>ra aspirin chw 81mg</i>	0	OTC; ACA, PV
<i>ra aspirin tab 81mg ec</i>	0	OTC; PV
<i>salsalate tab 750 mg</i>	1	
<i>sb child asa chw 81mg</i>	0	OTC; ACA, PV
<i>sm aspirin chw 81mg</i>	0	OTC; ACA, PV
<i>sm aspirin tab 81mg ec</i>	0	OTC; ACA, PV
<i>sm child asa chw 81mg</i>	0	OTC; ACA, PV
<i>st joseph chw low 81mg</i>	0	OTC; ACA, PV
<i>st joseph tab low 81mg</i>	0	OTC; ACA, PV

**ANALGESICS - OPIOID**

**OPIOID AGONISTS**

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
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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
CODEINE SULF TAB 15MG	3	PA, QL
CODEINE SULF TAB 60MG	3	PA, QL
<i>codeine sulfate tab 30 mg</i>	1	PA, QL
CONZIP CAP 100MG	3	ST, PA, QL
CONZIP CAP 200MG	3	ST, PA, QL
CONZIP CAP 300MG	3	ST, PA, QL
DEMEROL INJ 25MG/ML	3	
DEMEROL INJ 50MG/ML	3	
DEMEROL INJ 75MG/ML	3	
DEMEROL INJ 100MG/ML	3	
DILAUDID INJ 0.2MG/ML	3	
DILAUDID INJ 1MG/ML	NC	
DILAUDID INJ 2MG/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
DSUVIA SUB 30MCG	NC	
<i>duramorph inj 0.5mg/ml</i>	1	
<i>duramorph inj 1mg/ml</i>	1	
FENTANY/NACL INJ 1000MCG	3	
FENTANYL CIT INJ 50MCG/ML	3	
FENTANYL CIT INJ 100MCG	3	
FENTANYL CIT INJ 250MCG	3	
FENTANYL CIT SOL 10MCG/ML	NC	
<i>fentanyl citrate buccal tab 100 mcg (base equiv)</i>	1	PA, QL
<i>fentanyl citrate buccal tab 200 mcg (base equiv)</i>	1	PA, QL
<i>fentanyl citrate buccal tab 400 mcg (base equiv)</i>	2	PA, QL
<i>fentanyl citrate buccal tab 600 mcg (base equiv)</i>	1	PA, QL
<i>fentanyl citrate buccal tab 800 mcg (base equiv)</i>	1	PA, QL
<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



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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 50 mcg/ml</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	
<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	ST, PA, QL
<i>fentanyl td patch 72hr 25 mcg/hr</i>	1	ST, PA, QL
<i>fentanyl td patch 72hr 37.5 mcg/hr</i>	2	ST, PA, QL
<i>fentanyl td patch 72hr 50 mcg/hr</i>	1	ST, PA, QL
<i>fentanyl td patch 72hr 62.5 mcg/hr</i>	2	ST, PA, QL
<i>fentanyl td patch 72hr 75 mcg/hr</i>	1	ST, PA, QL
<i>fentanyl td patch 72hr 87.5 mcg/hr</i>	2	ST, PA, QL
<i>fentanyl td patch 72hr 100 mcg/hr</i>	2	ST, PA, QL
FENTORA TAB 100MCG	3	PA, QL
FENTORA TAB 200MCG	3	PA, QL
FENTORA TAB 400MCG	3	PA, QL
FENTORA TAB 600MCG	3	PA, QL
FENTORA TAB 800MCG	3	PA, QL
<i>hydrocodone bitartrate cap er 12hr 10 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate cap er 12hr 15 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate cap er 12hr 20 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate cap er 12hr 30 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate cap er 12hr 40 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate cap er 12hr 50 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate tab er 24hr deter 20 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate tab er 24hr deter 30 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate tab er 24hr deter 40 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate tab er 24hr deter 60 mg</i>	2	ST, PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>hydrocodone bitartrate tab er 24hr deter 80 mg</i>	2	ST, PA, QL
<i>hydrocodone bitartrate tab er 24hr deter 100 mg</i>	1	ST, PA, QL
<i>hydrocodone bitartrate tab er 24hr deter 120 mg</i>	1	ST, PA, QL
HYDROMO/NACL INJ 2MG/ML	NC	
HYDROMO/NACL INJ 20/100ML	3	
HYDROMORPHON INJ 0.2MG/ML	3	
HYDROMORPHON INJ 1MG/ML	3	
HYDROMORPHON INJ 2MG/ML	3	
HYDROMORPHON INJ 4MG/ML	3	
HYDROMORPHON INJ 10MG/ML	3	
HYDROMORPHON INJ 30/30ML	3	
HYDROMORPHON SOL 0.2MG/ML	3	
<i>hydromorphone hcl inj 1 mg/ml</i>	1	
<i>hydromorphone hcl inj 2 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
<i>hydromorphone hcl tab 8 mg</i>	1	PA, QL
<i>hydromorphone hcl tab er 24hr 8 mg</i>	2	ST, PA, QL
<i>hydromorphone hcl tab er 24hr 12 mg</i>	2	ST, PA, QL
<i>hydromorphone hcl tab er 24hr 16 mg</i>	2	ST, PA, QL
<i>hydromorphone hcl tab er 24hr 32 mg</i>	2	ST, PA, QL
HYSINGLA ER TAB 20 MG	NC	
HYSINGLA ER TAB 30 MG	NC	
HYSINGLA ER TAB 40 MG	NC	
HYSINGLA ER TAB 60 MG	NC	
HYSINGLA ER TAB 80 MG	NC	
HYSINGLA ER TAB 100 MG	NC	
HYSINGLA ER TAB 120 MG	NC	
INFUMORPH INJ 10MG/ML	3	
INFUMORPH INJ 25MG/ML	3	
IONSYS PAD 40MCG/AC	NC	
LAZANDA SPR 100MCG	NC	
LAZANDA SPR 300MCG	NC	
LAZANDA SPR 400MCG	NC	
<i>levorphanol tartrate tab 2 mg</i>	NC	
<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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>meperidine hcl oral soln 50 mg/5ml</i>	1	PA, QL
<i>meperidine hcl tab 50 mg</i>	2	PA, QL
METHADO/NACL INJ 1MG/ML	3	
<i>methadone con 10mg/ml</i>	1	ST, PA, QL
<i>methadone hcl conc 10 mg/ml</i>	1	ST, PA, QL
<i>methadone hcl inj 10 mg/ml</i>	1	ST, PA, QL
<i>methadone hcl soln 5 mg/5ml</i>	1	ST, PA, QL
<i>methadone hcl soln 10 mg/5ml</i>	1	ST, PA, QL
<i>methadone hcl tab 5 mg</i>	1	ST, PA, QL
<i>methadone hcl tab 10 mg</i>	1	ST, PA, QL
<i>methadone hcl tab for oral susp 40 mg</i>	1	
METHADONE INJ 10MG/ML	3	ST, PA, QL
METHADOSE CON 10MG/ML	3	ST, QL
METHADOSE SF CON 10MG/ML	3	ST, QL
<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/NACL INJ 1MG/ML	3	
MORPHIN/NACL INJ 2MG-0.9%	NC	
MORPHIN/NACL INJ 4MG-0.9%	NC	
MORPHIN/NACL INJ 100/100	3	
MORPHINE SUL INJ 1MG/ML	3	
MORPHINE SUL INJ 2MG2/ML	3	
MORPHINE SUL INJ 2MG/ML	3	
MORPHINE SUL INJ 2MG/ML	NC	
MORPHINE SUL INJ 4MG/ML	3	
MORPHINE SUL INJ 8MG/ML	3	
MORPHINE SUL INJ 10MG/ML	3	
MORPHINE SUL INJ 250MG/50	3	
MORPHINE SUL INJ NACL	3	
<i>morphine sulfate beads cap er 24hr 30 mg</i>	2	ST, PA, QL
<i>morphine sulfate beads cap er 24hr 45 mg</i>	2	ST, PA, QL
<i>morphine sulfate beads cap er 24hr 60 mg</i>	2	ST, PA, QL
<i>morphine sulfate beads cap er 24hr 75 mg</i>	1	ST, PA, QL
<i>morphine sulfate beads cap er 24hr 90 mg</i>	2	ST, PA, QL
<i>morphine sulfate beads cap er 24hr 120 mg</i>	2	ST, PA, QL
<i>morphine sulfate cap er 24hr 10 mg</i>	2	ST, PA, QL
<i>morphine sulfate cap er 24hr 20 mg</i>	1	ST, PA, QL
<i>morphine sulfate cap er 24hr 30 mg</i>	1	ST, PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>morphine sulfate cap er 24hr 50 mg</i>	2	ST, PA, QL
<i>morphine sulfate cap er 24hr 60 mg</i>	1	ST, PA, QL
<i>morphine sulfate cap er 24hr 80 mg</i>	2	ST, PA, QL
<i>morphine sulfate cap er 24hr 100 mg</i>	2	ST, PA, QL
<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 4 mg/ml</i>	1	
<i>morphine sulfate iv soln 8 mg/ml</i>	1	
<i>morphine sulfate iv soln 10 mg/ml</i>	1	
<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 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	ST, PA, QL
<i>morphine sulfate tab er 30 mg</i>	1	ST, PA, QL
<i>morphine sulfate tab er 60 mg</i>	1	ST, PA, QL
<i>morphine sulfate tab er 100 mg</i>	1	ST, PA, QL
<i>morphine sulfate tab er 200 mg</i>	1	ST, PA, QL
MS CONTIN TAB 15MG ER	3	ST, PA, QL
MS CONTIN TAB 30MG ER	3	ST, PA, QL
MS CONTIN TAB 60MG ER	3	ST, PA, QL
MS CONTIN TAB 100MG ER	3	ST, PA, QL
MS CONTIN TAB 200MG ER	3	ST, PA, QL
NUCYNTA ER TAB 50MG	NC	
NUCYNTA ER TAB 100MG	NC	
NUCYNTA ER TAB 150MG	NC	
NUCYNTA ER TAB 200MG	NC	
NUCYNTA ER TAB 250MG	NC	
NUCYNTA TAB 50MG	NC	
NUCYNTA TAB 75MG	NC	
NUCYNTA TAB 100MG	NC	
OXAYDO TAB 7.5MG	NC	
<i>oxycodone hcl cap 5 mg</i>	1	PA, QL
<i>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</i>	2	PA, QL
<i>oxycodone hcl soln 5 mg/5ml</i>	1	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>	1	ST, PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>oxycodone hcl tab er 12hr deter 20 mg</i>	2	ST, PA, QL
<i>oxycodone hcl tab er 12hr deter 40 mg</i>	2	ST, PA, QL
<i>oxycodone hcl tab er 12hr deter 80 mg</i>	2	ST, PA, QL
OXYCONTIN TAB 10MG ER	NC	
OXYCONTIN TAB 15MG ER	NC	
OXYCONTIN TAB 20MG ER	NC	
OXYCONTIN TAB 30MG ER	NC	
OXYCONTIN TAB 40MG ER	NC	
OXYCONTIN TAB 60MG ER	NC	
OXYCONTIN TAB 80MG ER	NC	
<i>oxymorphone hcl tab 5 mg</i>	1	PA, QL
<i>oxymorphone hcl tab 10 mg</i>	1	PA, QL
<i>oxymorphone hcl tab er 12hr 5 mg</i>	NC	
<i>oxymorphone hcl tab er 12hr 7.5 mg</i>	NC	
<i>oxymorphone hcl tab er 12hr 10 mg</i>	NC	
<i>oxymorphone hcl tab er 12hr 15 mg</i>	NC	
<i>oxymorphone hcl tab er 12hr 20 mg</i>	NC	
<i>oxymorphone hcl tab er 12hr 30 mg</i>	NC	
<i>oxymorphone hcl tab er 12hr 40 mg</i>	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 15MG	3	PA, QL
ROXICODONE TAB 30MG	3	PA, QL
ROXYBOND TAB 5MG	NC	
ROXYBOND TAB 15MG	NC	
ROXYBOND TAB 30MG	NC	
SUBSYS SPR 100MCG	NC	
SUBSYS SPR 200MCG	NC	
SUBSYS SPR 400MCG	NC	
SUBSYS SPR 600MCG	NC	
SUBSYS SPR 800MCG	NC	
SUBSYS SPR 1200MCG	NC	
SUBSYS SPR 1600MCG	NC	
<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	
<i>tramadol hcl cap er 24hr biphasic release 100 mg</i>	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>tramadol hcl cap er 24hr biphasic release 150 mg</i>	NC	
<i>tramadol hcl cap er 24hr biphasic release 200 mg</i>	NC	
<i>tramadol hcl cap er 24hr biphasic release 300 mg</i>	NC	
<i>tramadol hcl oral soln 5 mg/ml</i>	2	
<i>tramadol hcl tab 50 mg</i>	1	PA, QL
<i>tramadol hcl tab 100 mg</i>	NC	
<i>tramadol hcl tab er 24hr 100 mg</i>	1	ST, PA, QL
<i>tramadol hcl tab er 24hr 200 mg</i>	1	ST, PA, QL
<i>tramadol hcl tab er 24hr 300 mg</i>	1	ST, PA, QL
<i>tramadol hcl tab er 24hr biphasic release 100 mg</i>	1	ST, PA, QL
<i>tramadol hcl tab er 24hr biphasic release 200 mg</i>	1	ST, PA, QL
<i>tramadol hcl tab er 24hr biphasic release 300 mg</i>	2	ST, PA, QL
ULTIVA INJ 1MG	3	
ULTIVA INJ 2MG	3	
ULTIVA INJ 5MG	3	
XTAMPZA ER CAP 9MG	2	ST, PA, QL
XTAMPZA ER CAP 13.5MG	2	ST, PA, QL
XTAMPZA ER CAP 18MG	2	ST, PA, QL
XTAMPZA ER CAP 27MG	2	ST, PA, QL
XTAMPZA ER CAP 36MG	2	ST, PA, QL
ZOHYDRO ER CAP 10MG	NC	
ZOHYDRO ER CAP 15MG	NC	
ZOHYDRO ER CAP 20MG	NC	
ZOHYDRO ER CAP 30MG	NC	
ZOHYDRO ER CAP 40MG	NC	
ZOHYDRO ER CAP 50MG	NC	
<b>OPIOID COMBINATIONS</b>		
<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>	2	QL
<i>ascomp/cod cap 30mg</i>	1	QL
<i>butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg</i>	2	QL
<i>butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg</i>	1	QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg</i>	1	QL
<i>endocet tab 2.5-325</i>	1	PA, QL
<i>endocet tab 5-325mg</i>	1	PA, QL
<i>endocet tab 7.5-325</i>	1	PA, QL
<i>endocet tab 10-325mg</i>	1	PA, QL
FENT/ROPIVAC INJ 0.4/200	NC	
FENT/ROPIVAC INJ NACL	NC	
FENTANYL CIT INJ BUPIVACA	NC	
FIORICET CAP CODEINE	3	QL
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	1	PA, QL
<i>hydrocodone-acetaminophen soln 10-325 mg/15ml</i>	NC	
<i>hydrocodone-acetaminophen tab 5-300 mg</i>	1	PA, QL
<i>hydrocodone-acetaminophen tab 5-325 mg</i>	1	PA, QL
<i>hydrocodone-acetaminophen tab 7.5-300 mg</i>	1	PA, QL
<i>hydrocodone-acetaminophen tab 7.5-325 mg</i>	1	PA, QL
<i>hydrocodone-acetaminophen tab 10-300 mg</i>	1	PA, QL
<i>hydrocodone-acetaminophen tab 10-325 mg</i>	1	PA, QL
<i>hydrocodone-ibuprofen tab 5-200 mg</i>	2	PA, QL
<i>hydrocodone-ibuprofen tab 7.5-200 mg</i>	1	PA, QL
<i>hydrocodone-ibuprofen tab 10-200 mg</i>	1	PA, QL
LORTAB ELX 10-300MG	3	PA, QL
NALOCET TAB 2.5-300	NC	
<i>oxycodone w/ acetaminophen soln 5-325 mg/5ml</i>	1	PA, QL
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	1	PA, QL
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	1	PA, QL
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	1	PA, QL
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	1	PA, QL
PERCOCET TAB 2.5-325	NC	
PERCOCET TAB 5-325MG	NC	
PERCOCET TAB 7.5-325	NC	
PERCOCET TAB 10-325MG	NC	
PRIMLEV TAB 5-300MG	NC	
PRIMLEV TAB 7.5-300	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PRIMLEV TAB 10-300MG	NC	
SEGLENTIS TAB 56-44MG	NC	
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	1	QL
<i>trezix cap</i>	2	QL
ULTRACET TAB 37.5-325	3	QL

### **OPIOID PARTIAL AGONISTS**

BELBUCA MIS 75MCG	2	ST, PA, QL
BELBUCA MIS 150MCG	2	ST, PA, QL
BELBUCA MIS 300MCG	2	ST, PA, QL
BELBUCA MIS 450MCG	2	ST, PA, QL
BELBUCA MIS 600MCG	2	ST, PA, QL
BELBUCA MIS 750MCG	2	ST, PA, QL
BELBUCA MIS 900MCG	2	ST, PA, QL
BRIXADI SOL 8/0.16ML	NC	
BRIXADI SOL 16/0.32	NC	
BRIXADI SOL 24/0.48	NC	
BRIXADI SOL 32/0.64	NC	
BRIXADI SOL 64/0.18	NC	
BRIXADI SOL 96/0.27	NC	
BRIXADI SOL 128/0.36	NC	
BUPRENEX INJ 0.3MG/ML	3	
<i>buprenorphine hcl inj 0.3 mg/ml (base equiv)</i>	1	
<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
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	1	PV
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	2	PV
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	2	PV
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	2	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>	1	PV
<i>buprenorphine td patch weekly 5 mcg/hr</i>	2	ST, PA, QL
<i>buprenorphine td patch weekly 7.5 mcg/hr</i>	2	ST, PA, QL
<i>buprenorphine td patch weekly 10 mcg/hr</i>	2	ST, PA, QL
<i>buprenorphine td patch weekly 15 mcg/hr</i>	2	ST, PA, QL
<i>buprenorphine td patch weekly 20 mcg/hr</i>	2	ST, PA, QL
<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



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
BUTRANS DIS 5MCG/HR	NC	
BUTRANS DIS 7.5/HR	NC	
BUTRANS DIS 10MCG/HR	NC	
BUTRANS DIS 15MCG/HR	NC	
BUTRANS DIS 20MCG/HR	NC	
<i>nalbuphine hcl inj 10 mg/ml</i>	2	
<i>nalbuphine hcl inj 20 mg/ml</i>	2	
<i>pentazocine w/ naloxone hcl tab 50-0.5 mg</i>	1	PA, QL
PROBUPHINE IMP KIT 74.2	NC	
SUBLOCADE INJ 100/0.5	3	PV
SUBLOCADE INJ 300/1.5	3	PV
SUBOXONE MIS 2-0.5MG	NC	
SUBOXONE MIS 4-1MG	NC	
SUBOXONE MIS 8-2MG	NC	
SUBOXONE MIS 12-3MG	NC	
ZUBSOLV SUB 0.7-0.18	2	PV
ZUBSOLV SUB 1.4-0.36	2	PV
ZUBSOLV SUB 2.9-0.71	2	PV
ZUBSOLV SUB 5.7-1.4	2	PV
ZUBSOLV SUB 8.6-2.1	2	PV
ZUBSOLV SUB 11.4-2.9	2	PV

## **ANDROGENS-ANABOLIC**

### **ANDROGENS**

ANDRODERM DIS 2MG/24HR	3	PA
ANDRODERM DIS 4MG/24HR	3	PA
ANDROGEL GEL 1%(25MG)	NC	
ANDROGEL GEL 1%(50MG)	NC	
ANDROGEL GEL 1.62%	NC	
AVEED INJ 750/3ML	6	SP, PA
<i>danazol cap 50 mg</i>	1	
<i>danazol cap 100 mg</i>	1	
<i>danazol cap 200 mg</i>	2	
<i>depo-testost inj 100mg/ml</i>	3	PA
<i>depo-testost inj 200mg/ml</i>	3	PA
FORTESTA GEL 10MG/ACT	NC	
JATENZO CAP 158MG	3	
JATENZO CAP 198MG	3	
JATENZO CAP 237MG	3	
KYZATREX CAP 100MG	NC	
KYZATREX CAP 150MG	NC	
KYZATREX CAP 200MG	NC	
METHITEST TAB 10MG	3	PA
<i>methyltestosterone cap 10 mg</i>	1	PA
NATESTO GEL 5.5MG	2	PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
TESTIM GEL 1%(50MG)	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
TESTOSTERONE MIS 25MG	3	PA
TESTOSTERONE MIS 50MG	3	PA
TESTOSTERONE MIS 100MG	3	PA
TESTOSTERONE MIS 200MG	3	PA
<i>testosterone td gel 10mg/act (2%)</i>	2	PA
<i>testosterone td gel 12.5 mg/act (1%)</i>	2	PA
<i>testosterone td gel 12.5 mg/act (1%)</i>	NC	
<i>testosterone td gel 20.25 mg/1.25gm (1.62%)</i>	2	PA
<i>testosterone td gel 20.25 mg/act (1.62%)</i>	2	PA
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	2	PA
<i>testosterone td gel 40.5 mg/2.5gm (1.62%)</i>	2	PA
<i>testosterone td gel 50 mg/5gm (1%)</i>	2	PA
<i>testosterone td soln 30 mg/act</i>	2	PA
TLANDO CAP 112.5 MG	NC	
VOGELXO GEL 1%(50MG)	NC	
VOGELXO GEL PUMP 1%	NC	
XYOSTED INJ 50/0.5	3	PA
XYOSTED INJ 75/0.5	3	PA
XYOSTED INJ 100/0.5	3	PA

## **ANORECTAL AND RELATED PRODUCTS**

### **INTRARECTAL STEROIDS**

CORTENEMA ENE 100MG	3	
CORTIFOAM AER 90MG	2	
<i>hydrocortisone enema 100 mg/60ml</i>	2	
UCERIS AER 2MG/ACT	3	

### **RECTAL COMBINATIONS**

ANALPRAM-HC CRE 1-1%	3	
ANALPRAM-HC LOT 2.5%	3	
<i>hydrocortisone acetate w/ pramoxine perianal cream 1-1%</i>	2	
PROCORT CRE	3	
PROCTOFOAM AER HC 1%	2	

### **RECTAL STEROIDS**

<i>anucort-hc sup 25mg</i>	2	
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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ANUSOL-HC CRE 2.5%	2	
<i>hemmorex-hc sup 30mg</i>	2	
<i>hydrocortisone perianal cream 1%</i>	1	
<i>hydrocortisone perianal cream 2.5%</i>	1	
<i>procto-med cre hc 2.5%</i>	1	
<i>procto-pak cre 1%</i>	1	
PROCTOCORT CRE 1%	3	
PROCTOCORT SUP 30MG	3	
<i>proctosol hc cre 2.5%</i>	1	
<i>proctozone cre -hc 2.5%</i>	1	
<b>VASODILATING AGENTS</b>		
RECTIV OIN 0.4%	3	
<b>ANTACIDS</b>		
<b>ANTACIDS - BICARBONATE</b>		
SODIUM POW BICARBON	3	
<b>ANTHELMINTICS</b>		
<b>ANTHELMINTICS</b>		
<i>albendazole tab 200 mg</i>	2	PA, QL
BENZNIDAZOLE TAB 12.5MG	3	
BENZNIDAZOLE TAB 100MG	3	
BILTRICIDE TAB 600MG	3	PA, QL
EMVERM CHW 100MG	2	PA, QL
<i>ivermectin tab 3 mg</i>	2	PA
<i>praziquantel tab 600 mg</i>	2	QL
STROMECTOL TAB 3MG	3	PA
<b>ANTI-INFECTIVE AGENTS - MISC.</b>		
<b>ANTI-INFECTIVE AGENTS - MISC.</b>		
AEMCOLO TAB 194MG	3	
<i>bacitracin intramuscular for soln 50000 unit</i>	1	
FIRST-METRON SUS 100MG/ML	NC	
FLAGYL CAP 375MG	3	
IMPAVIDO CAP 50MG	3	
METRONIDAZOL INJ 500MG	3	
<i>metronidazole cap 375 mg</i>	2	
<i>metronidazole iv soln 500 mg/100ml</i>	1	
<i>metronidazole tab 250 mg</i>	1	
<i>metronidazole tab 500 mg</i>	1	
NEBUPENT INH 300MG	3	
PENTAM 300 INJ 300MG	3	
<i>pentamidine isethionate for inj soln 300 mg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>pentamidine isethionate for nebulization soln 300 mg</i>	1	
<i>tinidazole tab 250 mg</i>	2	
<i>tinidazole tab 500 mg</i>	2	
<i>trimethoprim tab 100 mg</i>	3	
XIFAXAN TAB 200MG	3	
XIFAXAN TAB 550MG	2	
<b>ANTI-INFECTIVE MISC. - COMBINATIONS</b>		
BACTRIM DS TAB 800-160	3	
BACTRIM TAB 400-80MG	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	
<i>uro-sp cap 118mg</i>	1	
<b>ANTIPROTOZOAL AGENTS</b>		
ALINIA SUS 100/5ML	3	
ALINIA TAB 500MG	3	
<i>atovaquone susp 750 mg/5ml</i>	2	
LAMPIT TAB 30MG	3	
LAMPIT TAB 120MG	3	
MEPRON SUS	3	
<i>nitazoxanide tab 500 mg</i>	2	
<b>CARBAPENEMS</b>		
<i>ertapenem sodium for inj 1 gm (base equivalent)</i>	2	
<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>	1	
<i>meropenem iv for soln 500 mg</i>	2	
PRIMAXIN IV INJ 500MG	3	
RECARBRIO INJ 1.25GM	3	
VABOMERE INJ 2GM(1-1)	3	
<b>CHLORAMPHENICOLS</b>		
<i>chloramphenicol sodium succinate for iv inj 1 gm</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<b>CYCLIC LIPOPEPTIDES</b>		
CUBICIN RF SOL 500MG	3	
<i>daptomycin for iv soln 350 mg</i>	2	
<i>daptomycin for iv soln 500 mg</i>	2	
DAPTOMYCIN SOL 350MG	3	
DAPTOMYCIN SOL 500MG	3	
<b>GLYCOPEPTIDES</b>		
DALVANCE SOL 500MG	3	
FIRVANQ SOL 25MG/ML	NC	
FIRVANQ SOL 50MG/ML	NC	
KIMYRSA INJ 1200MG	NC	
ORBACTIV SOL 400MG	3	
VANCOGIN CAP 125MG	2	
VANCOGIN CAP 250MG	2	
VANCOMY/NACL INJ 1.5/250	3	
VANCOMY/NACL INJ 1.5/500	3	
VANCOMY/NACL INJ 1.25/250	3	
VANCOMY/NACL INJ 1.75/250	3	
VANCOMY/NACL INJ 1/250ML	3	
VANCOMY/NACL INJ 2/500ML	3	
VANCOMY/NACL INJ 750/150	3	
VANCOMYC/D5W INJ 1.5/250	3	
VANCOMYC/D5W INJ 1.25/250	3	
VANCOMYC/D5W INJ 1GM	3	
VANCOMYC/D5W INJ 500MG	3	
VANCOMYC/D5W INJ 750MG	3	
<i>vancomycin hcl cap 125 mg (base equivalent)</i>	2	
<i>vancomycin hcl cap 250 mg (base equivalent)</i>	2	
<i>vancomycin hcl for iv soln 1 gm (base equivalent)</i>	2	
<i>vancomycin hcl for iv soln 1.5 gm (base equivalent)</i>	1	
<i>vancomycin hcl for iv soln 1.25 gm (base equivalent)</i>	1	
<i>vancomycin hcl for iv soln 5 gm (base equivalent)</i>	2	
<i>vancomycin hcl for iv soln 10 gm (base equivalent)</i>	2	
<i>vancomycin hcl for iv soln 100 gm (base equivalent)</i>	1	
<i>vancomycin hcl for iv soln 500 mg (base equivalent)</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>vancomycin hcl for iv soln 750 mg (base equivalent)</i>	1	
<i>vancomycin hcl for oral soln 50 mg/ml (base equivalent)</i>	1	
VANCOMYCIN INJ 1 GM	3	
VANCOMYCIN INJ 1.5/300	3	
VANCOMYCIN INJ 1.5GM	3	
VANCOMYCIN INJ 1.25GM	3	
VANCOMYCIN INJ 1GM/200M	3	
VANCOMYCIN INJ 500MG	3	
VANCOMYCIN INJ 750MG	3	
VANCOMYCIN SOL 1.75GM	3	
VANCOMYCIN SOL 2G/400ML	3	
VIBATIV INJ 750MG	3	
<b>LEPROSTATICS</b>		
<i>dapsone tab 25 mg</i>	1	
<i>dapsone tab 100 mg</i>	1	
<b>LINCOSAMIDES</b>		
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	
<i>clindamycin hcl cap 75 mg</i>	1	
<i>clindamycin hcl cap 150 mg</i>	1	
<i>clindamycin hcl cap 300 mg</i>	1	
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	1	
<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	
LINCOCIN INJ 300MG/ML	3	
<i>lincomycin hcl inj 300 mg/ml</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<b>MONOBACTAMS</b>		
AZACTAM INJ 1GM	3	
AZACTAM INJ 2GM	3	
<i>aztreonam for inj 1 gm</i>	1	
<i>aztreonam for inj 2 gm</i>	1	
CAYSTON INH 75MG	NC	
<b>OXAZOLIDINONES</b>		
<i>linezolid for susp 100 mg/5ml</i>	2	
<i>linezolid iv soln 600 mg/300ml (2 mg/ml)</i>	1	
<i>linezolid tab 600 mg</i>	1	
SIVEXTRO INJ 200MG	3	PA
SIVEXTRO TAB 200MG	3	PA
ZYVOX SOL 2MG/ML	3	
ZYVOX SUS 100MG/5M	3	
ZYVOX TAB 600MG	3	
<b>PLEUROMUTILINS</b>		
XENLETA INJ 150/15ML	3	
XENLETA TAB 600MG	3	
<b>POLYMYXINS</b>		
<i>colistimethate sod for inj 150 mg (colistin base activity)</i>	2	
COLY-MYCIN M INJ 150MG	3	
<i>polymyxin b sulfate for inj 500000 unit</i>	1	
<b>URINARY ANTI-INFECTIVES</b>		
<i>fosfomycin tromethamine powd pack 3 gm (base equivalent)</i>	2	
HIPREX TAB 1GM	3	
MACROBID CAP 100MG	3	
MACRODANTIN CAP 25MG	NC	
MACRODANTIN CAP 50MG	NC	
MACRODANTIN CAP 100MG	NC	
<i>methenamine hippurate tab 1 gm</i>	1	
<i>methenamine mandelate tab 0.5 gm</i>	2	
<i>methenamine mandelate tab 1 gm</i>	1	
MONUROL PAK GRANULES	3	
<i>nitrofurantoin macrocrystalline cap 25 mg</i>	1	
<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	
<i>nitrofurantoin susp 25 mg/5ml</i>	NC	
<b>ANTIANGINAL AGENTS</b>		

Drug Name	Drug Tier	Requirements/Limits
<b>ANTIANGINALS-OTHER</b>		
RANEXA TAB 500MG	3	
RANEXA TAB 1000MG	3	
<i>ranolazine tab er 12hr 500 mg</i>	1	
<i>ranolazine tab er 12hr 1000 mg</i>	1	
<b>NITRATES</b>		
GONITRO POW 400MCG	NC	
ISORDIL TAB 5MG	3	PV
ISORDIL TAB 40MG	3	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
<i>isosorbide dinitrate tab 40 mg</i>	NC	
<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
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
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>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 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
<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	



Drug Name	Drug Tier	Requirements/Limits
<b>ANTI-ANXIETY AGENTS</b>		
<b>ANTI-ANXIETY AGENTS - MISC.</b>		
<i>bupirone hcl tab 5 mg</i>	1	
<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>droperidol inj 2.5 mg/ml</i>	1	
<i>hydroxyzine hcl im soln 25 mg/ml</i>	2	
<i>hydroxyzine hcl im soln 50 mg/ml</i>	2	
<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	
<i>hydroxyzine pamoate cap 25 mg</i>	1	
<i>hydroxyzine pamoate cap 50 mg</i>	1	
<i>hydroxyzine pamoate cap 100 mg</i>	1	
<i>meprobamate tab 200 mg</i>	2	
<i>meprobamate tab 400 mg</i>	2	
VISTARIL CAP 25MG	3	
VISTARIL CAP 50MG	3	
<b>BENZODIAZEPINES</b>		
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>	1	
<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	NC	
ATIVAN INJ 4MG/ML	NC	
ATIVAN TAB 0.5MG	NC	
ATIVAN TAB 1MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ATIVAN TAB 2MG	NC	
<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>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 conc 5 mg/ml</i>	1	
<i>diazepam inj 5 mg/ml</i>	1	
DIAZEPAM INJ 5MG/ML	3	
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	
<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	
LOREEV XR CAP 1.5MG	3	
LOREEV XR CAP 1MG	3	
LOREEV XR CAP 2MG	3	
LOREEV XR CAP 3MG	3	
<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	3	
VALIUM TAB 5MG	3	
VALIUM TAB 10MG	3	
XANAX TAB 0.5MG	NC	
XANAX TAB 0.25MG	NC	
XANAX TAB 1MG	NC	
XANAX TAB 2MG	NC	
XANAX XR TAB 0.5MG	NC	
XANAX XR TAB 1MG	NC	
XANAX XR TAB 2MG	NC	
XANAX XR TAB 3MG	NC	

## **ANTIARRHYTHMICS**

### **ANTIARRHYTHMICS - MISC.**

<i>adenosine iv soln 6 mg/2ml</i>	1	
<i>adenosine iv soln 12 mg/4ml</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<b>ANTIARRHYTHMICS TYPE I-A</b>		
<i>disopyramide phosphate cap 100 mg</i>	1	PV
<i>disopyramide phosphate cap 150 mg</i>	1	PV
NORPACE CAP 100MG	NC	
NORPACE CAP 100MG CR	2	PV
NORPACE CAP 150MG	NC	
NORPACE CAP 150MG CR	2	PV
<i>procainamide hcl inj 100 mg/ml</i>	1	
<i>procainamide hcl inj 500 mg/ml</i>	1	
<i>quinidine gluconate tab er 324 mg</i>	2	
<b>ANTIARRHYTHMICS TYPE I-B</b>		
<i>lidocaine hcl (cardiac) iv pf soln pref syr 50 mg/5ml(1%)</i>	1	
<i>lidocaine hcl (cardiac) iv soln pref syr 50 mg/5ml (1%)</i>	1	
<i>lidocaine hcl (cardiac) iv soln pref syr 100 mg/5ml (2%)</i>	1	
<i>lidocaine hcl(cardiac) iv pf soln pref syr 100 mg/5ml (2%)</i>	1	
LIDOCAINE INJ 20MG/ML	3	
<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>	1	
<i>mexiletine hcl cap 250 mg</i>	1	
<b>ANTIARRHYTHMICS TYPE I-C</b>		
<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>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
<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
RYTHMOL SR CAP 225MG	2	PV
RYTHMOL SR CAP 325MG	2	PV
RYTHMOL SR CAP 425MG	2	PV
<b>ANTIARRHYTHMICS TYPE III</b>		
<i>amiodarone hcl inj 150 mg/3ml (50 mg/ml)</i>	1	
<i>amiodarone hcl inj 450 mg/9ml (50 mg/ml)</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>amiodarone hcl inj 900 mg/18ml (50 mg/ml)</i>	1	
<i>amiodarone hcl tab 100 mg</i>	1	PV
<i>amiodarone hcl tab 200 mg</i>	1	PV
<i>amiodarone hcl tab 400 mg</i>	1	PV
CORVERT INJ 1MG/10ML	3	
<i>dofetilide cap 125 mcg (0.125 mg)</i>	4	SP; PV
<i>dofetilide cap 250 mcg (0.25 mg)</i>	4	SP; PV
<i>dofetilide cap 500 mcg (0.5 mg)</i>	4	SP; PV
<i>ibutilide fumarate inj 1 mg/10ml</i>	1	
MULTAQ TAB 400MG	NC	
NEXTERONE INJ	NC	
<i>pacerone tab 100mg</i>	1	PV
<i>pacerone tab 200mg</i>	1	PV
<i>pacerone tab 400mg</i>	1	PV
TIKOSYN CAP 125MCG	6	SP; PV
TIKOSYN CAP 250MCG	6	SP; PV
TIKOSYN CAP 500MCG	6	SP; PV

## **ANTI-ASTHMATIC AND BRONCHODILATOR AGENTS**

### **ANTI-INFLAMMATORY AGENTS**

<i>cromolyn sodium soln nebu 20 mg/2ml</i>	2	PV
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### **ANTI-ASTHMATIC - MONOCLONAL ANTIBODIES**

CINQAIR INJ	NC	
FASENRA INJ 30MG/ML	5	SP, PA, QL; PV
FASENRA PEN INJ 30MG/ML	5	SP, PA, QL; PV
NUCALA INJ 40MG/0.4	5	SP, PA, QL; PV
NUCALA INJ 100MG	NC	
NUCALA INJ 100MG/ML	5	SP, PA, QL; PV
TEZSPIRE INJ 210MG	5	SP, PA, QL
TEZSPIRE SOL 210MG	5	SP, PA, QL
XOLAIR INJ 75/0.5	5	SP, PA, QL; PV
XOLAIR INJ 150MG/ML	5	SP, PA, QL; PV
XOLAIR SOL 150MG	5	SP, PA, QL; PV

### **BRONCHODILATORS - ANTICHOLINERGICS**

ATROVENT HFA AER 17MCG	3	
INCRUSE ELPT INH 62.5MCG	NC	
<i>ipratropium bromide inhal soln 0.02%</i>	1	
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	
<i>tiotropium bromide monohydrate inhal cap 18 mcg (base equiv)</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
TUDORZA PRES AER 400/ACT	NC	
YUPELRI SOL	2	

### **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	NC	
SINGULAIR CHW 5MG	NC	
SINGULAIR GRA 4MG	NC	
SINGULAIR TAB 10MG	NC	
<i>zafirlukast tab 10 mg</i>	1	PV
<i>zafirlukast tab 20 mg</i>	1	PV
<i>zileuton tab er 12hr 600 mg</i>	NC	
ZYFLO TAB 600MG	NC	

### **SELECTIVE PHOSPHODIESTERASE 4 (PDE4) INHIBITORS**

DALIRESP TAB 250MCG	NC	
DALIRESP TAB 500MCG	NC	
<i>roflumilast tab 250 mcg</i>	2	
<i>roflumilast tab 500 mcg</i>	2	

### **STEROID INHALANTS**

ALVESCO AER 80MCG	NC	
ALVESCO AER 160MCG	NC	
ARNUITY ELPT INH 50MCG	NC	
ARNUITY ELPT INH 100MCG	NC	
ARNUITY ELPT INH 200MCG	NC	
ASMANEX 7 AER 110MCG	NC	
ASMANEX 14 AER 220MCG	NC	
ASMANEX 30 AER 110MCG	NC	
ASMANEX 30 AER 220MCG	NC	
ASMANEX 60 AER 220MCG	NC	
ASMANEX 120 AER 220MCG	NC	
ASMANEX HFA AER 100 MCG	NC	
ASMANEX HFA AER 200 MCG	NC	
<i>budesonide inhalation susp 0.5 mg/2ml</i>	1	PA, QL; PV
<i>budesonide inhalation susp 0.25 mg/2ml</i>	1	PA, QL; PV
<i>budesonide inhalation susp 1 mg/2ml</i>	2	PA, QL; PV
FLOVENT DISK AER 50MCG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
FLOVENT DISK AER 100MCG	NC	
FLOVENT DISK AER 250MCG	NC	
FLOVENT HFA AER 44MCG	NC	
FLOVENT HFA AER 110MCG	NC	
FLOVENT HFA AER 220MCG	NC	
<i>fluticasone propionate hfa inhal aer 110 mcg/act (125/valve)</i>	NC	
<i>fluticasone propionate hfa inhal aer 220 mcg/act (250/valve)</i>	NC	
<i>fluticasone propionate hfa inhal aero 44 mcg/act (50/valve)</i>	NC	
PULMICORT INH 90MCG	2	PA, QL; PV
PULMICORT INH 180MCG	2	PA, QL; PV
PULMICORT SUS 0.5MG/2	3	PA, QL; PV
PULMICORT SUS 0.25MG/2	3	PA, QL; PV
PULMICORT SUS 1MG/2ML	3	PA, QL; PV
QVAR REDIIHA AER 80MCG	NC	Covered for age 6 and under
QVAR REDIIHAL AER 40MCG	NC	Covered for age 6 and under

### **SYMPATHOMIMETICS**

ADVAIR DISKU AER 100/50	1	QL; PV
ADVAIR DISKU AER 250/50	1	QL; PV
ADVAIR DISKU AER 500/50	1	QL; PV
ADVAIR HFA AER 45/21	2	QL; PV
ADVAIR HFA AER 115/21	2	QL; PV
ADVAIR HFA AER 230/21	2	QL; PV
AIRDUO RESPI INH 55-14	NC	
AIRDUO RESPI INH 113-14	NC	
AIRDUO RESPI INH 232-14	NC	
<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	1	QL; Generic of PROAIR HFA
<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	1	QL; Generic of PROVENTIL HFA
<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	1	QL; Generic of VENTOLIN HFA
<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>albuterol sulfate syrup 2 mg/5ml</i>	1	
<i>albuterol sulfate tab 2 mg</i>	2	
<i>albuterol sulfate tab 4 mg</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ANORO ELLIPT AER 62.5-25	2	QL
<i>arformoterol tartrate soln nebu 15 mcg/2ml (base equiv)</i>	2	QL; PV
BEVESPI AER 9-4.8MCG	NC	
BREO ELLIPTA INH 100-25	2	QL; PV
BREO ELLIPTA INH 200-25	2	QL; PV
<i>breyana aer 80/4.5</i>	NC	
<i>breyana aer 160/4.5</i>	NC	
BREZTRI AERO AER SPHERE	2	QL
BROVANA NEB 15MCG	3	QL; PV
<i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act</i>	NC	
<i>budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act</i>	NC	
COMBIVENT AER 20-100	3	
DUAKLIR AER 400/12	NC	
DULERA AER 100-5MCG	NC	
DULERA AER 200-5MCG	NC	
<i>fluticasone-salmeterol aer powder ba 100-50 mcg/act</i>	NC	
<i>fluticasone-salmeterol aer powder ba 250-50 mcg/act</i>	NC	
<i>fluticasone-salmeterol aer powder ba 500-50 mcg/act</i>	NC	
<i>formoterol fumarate soln nebu 20 mcg/2ml</i>	2	QL; PV
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	1	
<i>isoproterenol hcl inj 0.2 mg/ml</i>	1	
<i>levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv)</i>	1	QL
<i>levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv)</i>	1	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	ST, QL
PERFOROMIST NEB 20MCG	3	QL; PV
PROAIR HFA AER	NC	
PROAIR RESPI AER	NC	
PROVENTIL AER HFA	NC	
SEREVENT DIS AER 50MCG	2	QL; PV
STIOLTO AER 2.5-2.5	2	QL
STRIVERDI AER 2.5MCG	2	PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
SYMBICORT AER 80-4.5	2	QL; PV
SYMBICORT AER 160-4.5	2	QL; PV
<i>terbutaline sulfate inj 1 mg/ml</i>	1	
<i>terbutaline sulfate tab 2.5 mg</i>	1	
<i>terbutaline sulfate tab 5 mg</i>	2	
TRELEGY AER 100MCG	2	QL; PV
TRELEGY AER 200MCG	2	QL; PV
UTIBRON CAP NEOHALER	NC	
VENTOLIN HFA AER	NC	
<i>wixela inhub aer 100/50</i>	NC	
<i>wixela inhub aer 250/50</i>	NC	
<i>wixela inhub aer 500/50</i>	NC	
XOPENEX CONC NEB 1.25/0.5	3	QL
XOPENEX HFA AER	NC	
XOPENEX NEB 0.31MG	3	QL
XOPENEX NEB 0.63MG	3	QL
XOPENEX NEB 1.25/3ML	3	QL

### **XANTHINES**

<i>aminophylline inj 25 mg/ml</i>	1	
<i>elixophyllin elx 80/15ml</i>	1	
THEO-24 CAP 100MG CR	NC	
THEO-24 CAP 200MG CR	NC	
THEO-24 CAP 300MG CR	NC	
THEO-24 CAP 400MG ER	NC	
<i>theophylline elixir 80 mg/15ml</i>	1	
<i>theophylline soln 80 mg/15ml</i>	1	
THEOPHYLLINE TAB 100MG ER	3	
THEOPHYLLINE TAB 200MG ER	3	
<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	

### **ANTICOAGULANTS**

#### **COUMARIN ANTICOAGULANTS**

COUMADIN TAB 1MG	NC	
COUMADIN TAB 2.5MG	NC	
COUMADIN TAB 2MG	NC	
COUMADIN TAB 3MG	NC	
COUMADIN TAB 4MG	NC	
COUMADIN TAB 5MG	NC	
COUMADIN TAB 6MG	NC	
COUMADIN TAB 7.5MG	NC	
COUMADIN TAB 10MG	NC	
<i>jantoven tab 1mg</i>	1	PV



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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
<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
<i>warfarin sodium tab 10 mg</i>	1	PV
<b><i>DIRECT FACTOR XA INHIBITORS</i></b>		
BEVYXXA CAP 40MG	NC	
BEVYXXA CAP 80MG	NC	
ELIQUIS ST P TAB 5MG	2	PV
ELIQUIS TAB 2.5MG	2	PV
ELIQUIS TAB 5MG	2	PV
SAVAYSA TAB 15MG	NC	
SAVAYSA TAB 30MG	NC	
SAVAYSA TAB 60MG	NC	
XARELTO STAR TAB 15/20MG	2	PV
XARELTO SUS 1MG/ML	2	PV
XARELTO TAB 2.5MG	2	PV
XARELTO TAB 10MG	2	PV
XARELTO TAB 15MG	2	PV
XARELTO TAB 20MG	2	PV
<b><i>HEPARINS AND HEPARINOID-LIKE AGENTS</i></b>		
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
<i>enoxaparin sodium inj 300 mg/3ml</i>	1	PV
<i>enoxaparin sodium inj soln pref syr 30 mg/0.3ml</i>	1	PV
<i>enoxaparin sodium inj soln pref syr 40 mg/0.4ml</i>	1	PV
<i>enoxaparin sodium inj soln pref syr 60 mg/0.6ml</i>	2	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>enoxaparin sodium inj soln pref syr 80 mg/0.8ml</i>	2	PV
<i>enoxaparin sodium inj soln pref syr 100 mg/ml</i>	2	PV
<i>enoxaparin sodium inj soln pref syr 120 mg/0.8ml</i>	2	PV
<i>enoxaparin sodium inj soln pref syr 150 mg/ml</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 100/ML	NC	
HEP SOD/D5W INJ 20000UNT	NC	
HEP SOD/D5W INJ 25000UNT	NC	
HEP SOD/DEXT INJ 25000UNT	NC	
HEP SOD/NAACL INJ 12500UNT	3	
HEP SOD/NAACL INJ 25000UNT	NC	
<i>heparin sod (porcine)-nacl iv soln 1000 unit/500ml-0.9%</i>	1	
<i>heparin sod (porcine)-nacl iv soln 2000 unit/l-0.9%</i>	1	
<i>heparin sodium (porcine) 100 unit/ml in d5w</i>	NC	
<i>heparin sodium (porcine) inj 1000 unit/ml</i>	1	
<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>	1	
<i>heparin sodium (porcine) pf inj 5000 unit/0.5ml</i>	1	
<i>heparin sodium (porcine)-dextrose iv sol 20000 unit/500ml-5%</i>	NC	
LOVENOX INJ 30/0.3ML	3	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
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
LOVENOX INJ 300/3ML	3	PV

### **IN VITRO/LOCK ANTICOAGULANTS**

ACD FORMULA SOL A	3	
ANTICOAGULNT SOL SOD CITR	3	
NOCLOT-50 SOL ACD-A	3	
TRICITRASOL CON	3	

### **THROMBIN INHIBITORS**

ANGIOMAX INJ 250MG	3	
ARGATROBAN INJ 50/50ML	3	
ARGATROBAN INJ 50MG/50M	3	
ARGATROBAN INJ 100MG/ML	3	
<i>argatroban inj 250 mg/2.5ml (concentrate for iv infusion)</i>	1	
ARGATROBAN INJ 250/2.5	3	
<i>argatroban iv soln 50 mg/50ml (1 mg/ml)</i>	1	
BIVALIR/NACL INJ 250/50	NC	
BIVALIR/NACL INJ 500/100	NC	
BIVALIRUDIN SOL RTU	3	
<i>bivalirudin trifluoroacetate for iv soln 250 mg (base equiv)</i>	1	
<i>bivalirudin trifluoroacetate iv soln 250 mg/50ml (base eq)</i>	1	
<i>dabigatran etexilate mesylate cap 75 mg (etexilate base eq)</i>	2	PV
<i>dabigatran etexilate mesylate cap 150 mg (etexilate base eq)</i>	2	PV
PRADAXA CAP 75MG	NC	
PRADAXA CAP 110MG	NC	
PRADAXA CAP 150MG	NC	

### **ANTICONSULSANTS**

#### **AMPA GLUTAMATE RECEPTOR ANTAGONISTS**

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
FYCOMPA TAB 10MG	2	PV
FYCOMPA TAB 12MG	2	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>ANTICONVULSANTS - BENZODIAZEPINES</b>		
<i>clobazam suspension 2.5 mg/ml</i>	2	PA; PV
<i>clobazam tab 10 mg</i>	1	PA; PV
<i>clobazam tab 20 mg</i>	1	PA; PV
<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
<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
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	
KLONOPIN TAB 0.5MG	3	PV
KLONOPIN TAB 1MG	3	PV
KLONOPIN TAB 2MG	3	PV
NAYZILAM SPR 5MG	2	
ONFI SUS 2.5MG/ML	NC	
ONFI TAB 10MG	NC	
ONFI TAB 20MG	NC	
VALTOCO SPR 5MG	2	
VALTOCO SPR 10MG	2	
VALTOCO SPR 15MG	2	
VALTOCO SPR 20MG	2	
<b>ANTICONVULSANTS - MISC.</b>		
APTIOM TAB 200MG	2	PV
APTIOM TAB 400MG	2	PV
APTIOM TAB 600MG	2	PV
APTIOM TAB 800MG	2	PV
BANZEL SUS 40MG/ML	NC	
BANZEL TAB 200MG	NC	
BANZEL TAB 400MG	NC	
BRIVIACT INJ 50MG/5ML	3	PV
BRIVIACT SOL 10MG/ML	3	PV
BRIVIACT TAB 10MG	3	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
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>	1	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>	1	PV
<i>carbamazepine tab er 12hr 400 mg</i>	1	PV
CARBATROL CAP 100MG	3	PV
CARBATROL CAP 200MG	3	PV
CARBATROL CAP 300MG	3	PV
DIACOMIT CAP 250MG	NC	
DIACOMIT CAP 500MG	NC	
DIACOMIT PAK 250MG	NC	
DIACOMIT PAK 500MG	NC	
ELEPSIA XR TAB 1000MG	NC	
ELEPSIA XR TAB 1500MG	NC	
EPIDIOLEX SOL 100MG/ML	6	SP, PA, QL; PV
<i>epitol tab 200mg</i>	1	PV
FINTEPLA SOL 2.2MG/ML	NC	
<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	
KEPPRA INJ 500/5ML	NC	
KEPPRA SOL 100MG/ML	NC	
KEPPRA TAB 250MG	NC	
KEPPRA TAB 500MG	NC	
KEPPRA TAB 750MG	NC	
KEPPRA TAB 1000MG	NC	
KEPPRA XR TAB 500MG	NC	
KEPPRA XR TAB 750MG	NC	
<i>lacosamide iv inj 200 mg/20ml (10 mg/ml)</i>	1	PV
<i>lacosamide oral solution 10 mg/ml</i>	2	PV
<i>lacosamide tab 50 mg</i>	2	PV
<i>lacosamide tab 100 mg</i>	2	PV
<i>lacosamide tab 150 mg</i>	2	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>lacosamide tab 200 mg</i>	2	PV
LAMICTAL CHW 5MG	NC	
LAMICTAL CHW 25MG	NC	
LAMICTAL KIT START 35	NC	
LAMICTAL KIT START 49	NC	
LAMICTAL KIT START 98	NC	
LAMICTAL ODT KIT	NC	
LAMICTAL ODT TAB 25MG	NC	
LAMICTAL ODT TAB 50MG	NC	
LAMICTAL ODT TAB 100MG	NC	
LAMICTAL ODT TAB 200MG	NC	
LAMICTAL TAB 25MG	NC	
LAMICTAL TAB 100MG	NC	
LAMICTAL TAB 150MG	NC	
LAMICTAL TAB 200MG	NC	
LAMICTAL XR KIT	NC	
LAMICTAL XR TAB 25MG	NC	
LAMICTAL XR TAB 50MG	NC	
LAMICTAL XR TAB 100MG	NC	
LAMICTAL XR TAB 200MG	NC	
LAMICTAL XR TAB 250MG	NC	
LAMICTAL XR TAB 300MG	NC	
<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
<i>lamotrigine tab 25 mg</i>	1	PV
<i>lamotrigine tab 25 mg (42) &amp; 100 mg (7) starter kit</i>	2	PV
<i>lamotrigine tab 35 x 25 mg starter kit</i>	2	PV
<i>lamotrigine tab 84 x 25 mg &amp; 14 x 100 mg starter kit</i>	2	PV
<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 disint 25 (14) &amp; 50 mg (14) &amp; 100 mg (7) kit</i>	2	PV
<i>lamotrigine tab er 24hr 25 mg</i>	1	PV
<i>lamotrigine tab er 24hr 25 mg</i>	NC	(applies to NDC 31722024030 only)
<i>lamotrigine tab er 24hr 50 mg</i>	2	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>lamotrigine tab er 24hr 50 mg</i>	NC	(applies to NDC 31722024130 only)
<i>lamotrigine tab er 24hr 100 mg</i>	2	PV
<i>lamotrigine tab er 24hr 100 mg</i>	NC	(applies to NDC 31722024230 only)
<i>lamotrigine tab er 24hr 200 mg</i>	2	PV
<i>lamotrigine tab er 24hr 200 mg</i>	NC	(applies to NDC 31722024330 only)
<i>lamotrigine tab er 24hr 250 mg</i>	2	PV
<i>lamotrigine tab er 24hr 250 mg</i>	NC	(applies to NDC 31722024430 only)
<i>lamotrigine tab er 24hr 300 mg</i>	2	PV
<i>lamotrigine tab er 24hr 300 mg</i>	NC	(applies to NDC 31722024530 only)
LEVETIR/NACL SOL 250/50ML	3	
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>	1	
<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>	2	PV
LYRICA CAP 25MG	NC	
LYRICA CAP 50MG	NC	
LYRICA CAP 75MG	NC	
LYRICA CAP 100MG	NC	
LYRICA CAP 150MG	NC	
LYRICA CAP 200MG	NC	
LYRICA CAP 225MG	NC	
LYRICA CAP 300MG	NC	
LYRICA SOL 20MG/ML	NC	
MYSOLINE TAB 50MG	3	PV
MYSOLINE TAB 250MG	3	PV
NEURONTIN CAP 100MG	3	
NEURONTIN CAP 300MG	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
NEURONTIN CAP 400MG	3	
NEURONTIN SOL 250/5ML	3	
NEURONTIN TAB 600MG	3	
NEURONTIN TAB 800MG	3	
<i>oxcarbazepine susp 300 mg/5ml (60 mg/ml)</i>	1	PV
<i>oxcarbazepine tab 150 mg</i>	1	PV
<i>oxcarbazepine tab 300 mg</i>	1	PV
<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
<i>pregabalin cap 25 mg</i>	1	
<i>pregabalin cap 50 mg</i>	1	
<i>pregabalin cap 75 mg</i>	1	
<i>pregabalin cap 100 mg</i>	1	
<i>pregabalin cap 150 mg</i>	1	
<i>pregabalin cap 200 mg</i>	1	
<i>pregabalin cap 225 mg</i>	1	
<i>pregabalin cap 300 mg</i>	1	
<i>pregabalin soln 20 mg/ml</i>	2	
<i>primidone tab 50 mg</i>	1	PV
<i>primidone tab 250 mg</i>	1	PV
QUDEXY XR CAP 25/24HR	3	PV
QUDEXY XR CAP 50/24HR	3	PV
QUDEXY XR CAP 100/24HR	3	PV
QUDEXY XR CAP 150/24HR	3	PV
QUDEXY XR CAP 200/24HR	3	PV
<i>roweepra tab 500mg</i>	1	PV
<i>rufinamide susp 40 mg/ml</i>	2	PV
<i>rufinamide tab 200 mg</i>	2	PV
<i>rufinamide tab 400 mg</i>	2	
<i>subvenite kit start 35</i>	2	PV
<i>subvenite kit start 49</i>	2	PV
<i>subvenite kit start 98</i>	2	PV
<i>subvenite tab 25mg</i>	1	PV
<i>subvenite tab 100mg</i>	1	PV
<i>subvenite tab 150mg</i>	1	PV
<i>subvenite tab 200mg</i>	1	PV
TEGRETOL SUS 100/5ML	NC	
TEGRETOL TAB 200MG	NC	
TEGRETOL-XR TAB 100MG	NC	
TEGRETOL-XR TAB 200MG	NC	
TEGRETOL-XR TAB 400MG	NC	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
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 25 mg</i>	2	
<i>topiramate cap er 24hr 50 mg</i>	2	
<i>topiramate cap er 24hr 100 mg</i>	2	
<i>topiramate cap er 24hr sprinkle 25 mg</i>	NC	
<i>topiramate cap er 24hr sprinkle 50 mg</i>	NC	
<i>topiramate cap er 24hr sprinkle 100 mg</i>	NC	
<i>topiramate cap er 24hr sprinkle 150 mg</i>	NC	
<i>topiramate cap er 24hr sprinkle 200 mg</i>	NC	
<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	NC	
TRILEPTAL TAB 150MG	NC	
TRILEPTAL TAB 300MG	NC	
TRILEPTAL TAB 600MG	NC	
TROKENDI XR CAP 25MG	2	PV
TROKENDI XR CAP 50MG	2	PV
TROKENDI XR CAP 100MG	2	PV
TROKENDI XR CAP 200MG	2	PV
VIMPAT INJ 200MG/20	NC	
VIMPAT SOL 10MG/ML	NC	
VIMPAT TAB 50MG	NC	
VIMPAT TAB 100MG	NC	
VIMPAT TAB 150MG	NC	
VIMPAT TAB 200MG	NC	
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
<b>CARBAMATES</b>		
<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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
FELBATOL TAB 400MG	3	PV
FELBATOL TAB 600MG	3	PV
XCOPRI PAK 12.5-25	2	PV
XCOPRI PAK 50-100MG	2	PV
XCOPRI PAK 100-150	2	PV
XCOPRI PAK 150-200	2	PV
XCOPRI TAB 50MG	2	PV
XCOPRI TAB 100MG	2	PV
XCOPRI TAB 150MG	2	PV
XCOPRI TAB 200MG	2	PV

### **GABA MODULATORS**

GABITRIL TAB 2MG	2	PV
GABITRIL TAB 4MG	2	PV
GABITRIL TAB 12MG	2	PV
GABITRIL TAB 16MG	2	PV
SABRIL POW 500MG	NC	
SABRIL TAB 500MG	NC	
<i>tiagabine hcl tab 2 mg</i>	2	PV
<i>tiagabine hcl tab 4 mg</i>	2	PV
<i>tiagabine hcl tab 12 mg</i>	1	PV
<i>tiagabine hcl tab 16 mg</i>	1	PV
<i>vigabatrin powd pack 500 mg</i>	4	SP, PA, QL; PV
<i>vigabatrin tab 500 mg</i>	4	SP, PA, QL; PV
<i>vigadrone pow 500mg</i>	4	SP, PA, QL; PV

### **HYDANTOINS**

CEREBYX INJ 100/2ML	3	
CEREBYX INJ 500/10ML	3	
DILANTIN CAP 30MG	NC	
DILANTIN CAP 100MG	NC	
DILANTIN CHW 50MG	NC	
DILANTIN-125 SUS 125/5ML	NC	
<i>fosphenytoin sodium inj 100 mg/2ml (phenytoin equiv)</i>	1	
<i>fosphenytoin sodium inj 500 mg/10ml (phenytoin equiv)</i>	1	
PHENYTEK CAP 200MG	3	PV
PHENYTEK CAP 300MG	3	PV
<i>phenytoin chew tab 50 mg</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

Drug Name	Drug Tier	Requirements/Limits
<b>SUCCINIMIDES</b>		
CELONTIN CAP 300MG	3	PV
<i>ethosuximide cap 250 mg</i>	1	PV
<i>ethosuximide soln 250 mg/5ml</i>	1	PV
ZARONTIN CAP 250MG	3	PV
ZARONTIN SOL 250/5ML	3	PV
<b>VALPROIC ACID</b>		
DEPAKOTE ER TAB 250MG	NC	
DEPAKOTE ER TAB 500MG	NC	
DEPAKOTE SPR CAP 125MG	NC	
DEPAKOTE TAB 125MG DR	NC	
DEPAKOTE TAB 250MG DR	NC	
DEPAKOTE TAB 500MG DR	NC	
<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>valproate sodium inj 100 mg/ml</i>	1	
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i>	1	PV
<i>valproic acid cap 250 mg</i>	1	PV
<b>ANTIDEPRESSANTS</b>		
<b>ALPHA-2 RECEPTOR ANTAGONISTS (TETRACYCLICS)</b>		
<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
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
<b>ANTIDEPRESSANT COMBINATIONS</b>		
AUVELITY TAB 45-105MG	NC	

Drug Name	Drug Tier	Requirements/Limits
<b>ANTIDEPRESSANTS - MISC.</b>		
APLENZIN TAB 174MG	NC	
APLENZIN TAB 348MG	NC	
APLENZIN TAB 522MG	NC	
<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>bupropion hcl tab er 24hr 450 mg</i>	NC	
FORFIVO XL TAB 450MG	3	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
<b>MONOAMINE OXIDASE INHIBITORS (MAOIS)</b>		
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	3	PV
<i>phenelzine sulfate tab 15 mg</i>	1	PV
<i>tranylcypromine sulfate tab 10 mg</i>	2	PV
<b>N-METHYL-D-ASPARTIC ACID (NMDA) RECEPTOR ANTAGONISTS</b>		
SPRAVATO SOL 56MG DOS	3	PA
SPRAVATO SOL 84MG DOS	3	PA
<b>SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)</b>		
CELEXA TAB 10MG	3	PV
CELEXA TAB 20MG	3	PV
CELEXA TAB 40MG	3	PV
CITALOPRAM CAP 30MG	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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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 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>	1	PV
<i>fluoxetine hcl solution 20 mg/5ml</i>	1	PV
<i>fluoxetine hcl solution 20 mg/5ml</i>	NC	(applies NDC 29033050331 only)
<i>fluoxetine hcl tab 10 mg</i>	1	PV
<i>fluoxetine hcl tab 20 mg</i>	1	PV
FLUOXETINE TAB 60MG	3	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
LEXAPRO TAB 5MG	NC	
LEXAPRO TAB 10MG	NC	
LEXAPRO TAB 20MG	NC	
<i>paroxetine hcl oral susp 10 mg/5ml (base equiv)</i>	2	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
<i>paroxetine hcl tab er 24hr 37.5 mg</i>	NC	(applies to NDC 60505367503 only)
PAXIL CR TAB 12.5MG	NC	
PAXIL CR TAB 25MG	NC	
PAXIL CR TAB 37.5MG	NC	
PAXIL SUS 10MG/5ML	NC	
PAXIL TAB 10MG	NC	
PAXIL TAB 20MG	NC	
PAXIL TAB 30MG	NC	
PAXIL TAB 40MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PEXEVA TAB 10MG	NC	
PEXEVA TAB 20MG	NC	
PEXEVA TAB 30MG	NC	
PEXEVA TAB 40MG	NC	
PROZAC CAP 10MG	NC	
PROZAC CAP 20MG	NC	
PROZAC CAP 40MG	NC	
<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
ZOLOFT CON 20MG/ML	NC	
ZOLOFT TAB 25MG	NC	
ZOLOFT TAB 50MG	NC	
ZOLOFT TAB 100MG	NC	

### **SEROTONIN MODULATORS**

<i>nefazodone hcl tab 50 mg</i>	2	PV
<i>nefazodone hcl tab 100 mg</i>	1	PV
<i>nefazodone hcl tab 150 mg</i>	1	PV
<i>nefazodone hcl tab 200 mg</i>	1	PV
<i>nefazodone hcl tab 250 mg</i>	2	PV
<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
TRINTELLIX TAB 5MG	2	PV
TRINTELLIX TAB 10MG	2	PV
TRINTELLIX TAB 20MG	2	PV
VIIBRYD KIT STARTER	NC	
VIIBRYD TAB 10MG	NC	
VIIBRYD TAB 20MG	NC	
VIIBRYD TAB 40MG	NC	
<i>vilazodone hcl tab 10 mg</i>	2	PV
<i>vilazodone hcl tab 20 mg</i>	2	
<i>vilazodone hcl tab 40 mg</i>	2	PV

### **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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>desvenlafaxine succinate tab er 24hr 50 mg (base equiv)</i>	2	PV
<i>desvenlafaxine succinate tab er 24hr 100 mg (base equiv)</i>	2	PV
DRIZALMA CAP 20MG DR	NC	
DRIZALMA CAP 30MG DR	NC	
DRIZALMA CAP 40MG DR	NC	
DRIZALMA CAP 60MG DR	NC	
<i>duloxetine hcl enteric coated pellets cap 20 mg (base eq)</i>	1	PV
<i>duloxetine hcl enteric coated pellets cap 30 mg (base eq)</i>	1	PV
<i>duloxetine hcl enteric coated pellets cap 40 mg (base eq)</i>	1	PV
<i>duloxetine hcl enteric coated pellets cap 60 mg (base eq)</i>	1	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
PRISTIQ TAB 25MG	NC	
PRISTIQ TAB 50MG	NC	
PRISTIQ TAB 100MG	NC	
<i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)</i>	1	PV
<i>venlafaxine hcl cap er 24hr 75 mg (base equivalent)</i>	1	PV
<i>venlafaxine hcl cap er 24hr 150 mg (base equivalent)</i>	1	PV
<i>venlafaxine hcl tab 25 mg (base equivalent)</i>	1	PV
<i>venlafaxine hcl tab 37.5 mg (base equivalent)</i>	1	PV
<i>venlafaxine hcl tab 50 mg (base equivalent)</i>	1	PV
<i>venlafaxine hcl tab 75 mg (base equivalent)</i>	1	PV
<i>venlafaxine hcl tab 100 mg (base equivalent)</i>	1	PV
<i>venlafaxine hcl tab er 24hr 225 mg (base equivalent)</i>	2	PV
VENLAFAXINE TAB 112.5MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>TRICYCLIC AGENTS</b>		
<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
ANAFRANIL CAP 25MG	2	PV
ANAFRANIL CAP 50MG	2	PV
ANAFRANIL CAP 75MG	2	PV
<i>clomipramine hcl cap 25 mg</i>	1	PV
<i>clomipramine hcl cap 50 mg</i>	1	PV
<i>clomipramine hcl cap 75 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>	1	PV
<i>desipramine hcl tab 150 mg</i>	1	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
<i>nortriptyline hcl cap 75 mg</i>	1	PV
<i>nortriptyline hcl soln 10 mg/5ml</i>	1	PV



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
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>	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>	1	PV

## **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
<i>miglitol tab 25 mg</i>	1	PV
<i>miglitol tab 50 mg</i>	1	PV
<i>miglitol tab 100 mg</i>	1	PV
PRECOSE TAB 25MG	2	PV
PRECOSE TAB 50MG	2	PV
PRECOSE TAB 100MG	2	PV

### **ANTIDIABETIC - AMYLIN ANALOGS**

SYMLINPEN 60 INJ 1000MCG	2	PV
SYMLINPEN 120 INJ 1000MCG	2	PV

### **ANTIDIABETIC COMBINATIONS**

ACTOPLUS MET TAB 15-500MG	3	PV
ACTOPLUS MET TAB 15-850MG	3	PV
<i>alogliptin-metformin hcl tab 12.5-500 mg</i>	NC	
<i>alogliptin-metformin hcl tab 12.5-1000 mg</i>	NC	
<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	
DUETACT TAB 30-2MG	3	PV
DUETACT TAB 30-4MG	3	PV
<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
<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
GLYXAMBI TAB 10-5 MG	2	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
GLYXAMBI TAB 25-5 MG	2	PV
INVOKAMET TAB 50-500MG	NC	
INVOKAMET TAB 50-1000	NC	
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	
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
JENTADUETO TAB 2.5-500	NC	
JENTADUETO TAB 2.5-850	NC	
JENTADUETO TAB 2.5-1000	NC	
JENTADUETO TAB XR	NC	
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	
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	
<i>pioglitazone hcl-glimepiride tab 30-2 mg</i>	2	PV
<i>pioglitazone hcl-glimepiride tab 30-4 mg</i>	2	PV
<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i>	2	PV
<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>	2	PV
QTERN TAB 5-5MG	NC	
QTERN TAB 10-5MG	NC	
<i>saxagliptin-metformin hcl tab er 24hr 2.5-1000 mg</i>	1	
<i>saxagliptin-metformin hcl tab er 24hr 5-500 mg</i>	1	
<i>saxagliptin-metformin hcl tab er 24hr 5-1000 mg</i>	1	
SEGLUROMET TAB 2.5-500	NC	
SEGLUROMET TAB 2.5-1000	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
SEGLUROMET TAB 7.5-500	NC	
SEGLUROMET TAB 7.5-1000	NC	
SOLIQUA INJ 100/33	0	\$0 Copay per 30-day supply
STEGLUJAN TAB 5-100MG	NC	
STEGLUJAN TAB 15-100MG	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
TRIJARDY XR TAB	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
XULTOPHY INJ 100/3.6	0	\$0 Copay per 30-day supply

### ***BIGUANIDES***

FORTAMET TAB 500MG	NC	
FORTAMET TAB 1000MG	NC	
GLUMETZA TAB 500MG	NC	
GLUMETZA TAB 1000MG	NC	
<i>metformin hcl oral soln 500 mg/5ml</i>	2	PV
<i>metformin hcl tab 500 mg</i>	1	PV
<i>metformin hcl tab 850 mg</i>	0	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 500 mg</i>	NC	(generic for GLUMTEZA)
<i>metformin hcl tab er 24hr modified release 1000 mg</i>	NC	(generic for GLUMTEZA)
<i>metformin hcl tab er 24hr osmotic 500 mg</i>	NC	(generic for FORTAMET)
<i>metformin hcl tab er 24hr osmotic 1000 mg</i>	NC	(generic for FORTAMET)
METFORMIN TAB 625MG	NC	
RIOMET SOL 500/5ML	NC	

### ***DIABETIC OTHER***

BAQSIMI ONE POW 3MG/DOSE	2	
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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
BAQSIMI TWO POW 3MG/DOSE	2	
<i>diazoxide susp 50 mg/ml</i>	2	
GLUCAGEN INJ HYPOKIT	NC	
<i>glucagon (rdna) for inj kit 1 mg</i>	2	
GLUCAGON KIT 1MG	NC	
GVOKE HYPO 1 INJ 1MG/.2ML	2	
GVOKE HYPO 1 INJ .5/.1ML	2	
GVOKE HYPO 2 INJ 1MG/.2ML	2	
GVOKE HYPO 2 INJ .5/.1ML	2	
GVOKE KIT SOL 1MG/0.2M	2	
GVOKE PFS INJ	2	
KORLYM TAB 300MG	NC	
PROGLYCEM SUS 50MG/ML	3	
ZEGALOGUE INJ 0.6/0.6	2	

### **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	
<i>saxagliptin hcl tab 2.5 mg (base equiv)</i>	1	
<i>saxagliptin hcl tab 5 mg (base equiv)</i>	1	
TRADJENTA TAB 5MG	NC	

### **DOPAMINE RECEPTOR AGONISTS - ANTIDIABETIC**

CYCLOSET TAB 0.8MG	3	
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### **INCRETIN MIMETIC AGENTS**

ADLYXIN INJ 10/20MCG	NC	
ADLYXIN INJ 20MCG	NC	
BYDUREON PEN INJ 2MG	NC	
BYETTA INJ 5MCG	NC	
BYETTA INJ 10MCG	NC	
MOUNJARO INJ 2.5/0.5	NC	
MOUNJARO INJ 5MG/0.5	NC	
MOUNJARO INJ 7.5/0.5	NC	
MOUNJARO INJ 10MG/0.5	NC	
MOUNJARO INJ 12.5/0.5	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
MOUNJARO INJ 15MG/0.5	NC	
OZEMPIC INJ 2/1.5ML	2	PA, QL; PV
OZEMPIC INJ 4MG/3ML	2	PA, QL; PV
OZEMPIC INJ 8MG/3ML	2	PA, QL; PV
RYBELSUS TAB 3MG	2	PA, QL; PV
RYBELSUS TAB 7MG	2	PA, QL; PV
RYBELSUS TAB 14MG	2	PA, QL; PV
TRULICITY INJ 0.75/0.5	2	PA, QL; PV
TRULICITY INJ 1.5/0.5	2	PA, QL; PV
TRULICITY INJ 3/0.5	2	PA, QL; PV
TRULICITY INJ 4.5/0.5	2	PA, QL; PV
VICTOZA INJ 18MG/3ML	2	PA, QL; PV

### **INSULIN**

AFREZZA POW 4-8 UNIT	NC	
AFREZZA POW 4-8-12	NC	
AFREZZA POW 4UNIT	NC	
APIDRA INJ SOLOSTAR	NC	
APIDRA INJ U-100	NC	
BASAGLAR INJ 100UNIT	0	\$0 Copay per 30-day supply
FIASP FLEX INJ TOUCH	0	\$0 Copay per 30-day supply
FIASP INJ 100/ML	0	\$0 Copay per 30-day supply
FIASP PENFIL INJ U-100	0	\$0 Copay per 30-day supply
FIASP PMPCRT INJ U-100	NC	
HUMALOG INJ 100/ML	NC	
HUMALOG KWIK INJ 100/ML	NC	
HUMALOG KWIK INJ 200/ML	NC	
HUMALOG MIX INJ 50/50	NC	
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	0	\$0 Copay per 30-day supply

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
INS ASP PROT INJ FLEXPEN	0	\$0 Copay per 30-day supply
INS DEGL FLX INJ 100UNIT	0	\$0 Copay per 30-day supply
INS DEGL FLX INJ 200UNIT	0	\$0 Copay per 30-day supply
INSULIN DEGL INJ 100UNIT	0	\$0 Copay per 30-day supply
INSULIN GLAR INJ 100U/ML	NC	
INSULIN GLAR SOL 100U/ML	NC	
LANTUS INJ 100/ML	NC	
LANTUS SOLOS INJ 100/ML	NC	
LEVEMIR INJ	0	\$0 Copay per 30-day supply
LEVEMIR INJ FLEXTouc	0	\$0 Copay per 30-day supply
LYUMJEV INJ 100UT/ML	NC	
LYUMJEV KWPN INJ 100UT/ML	NC	
LYUMJEV KWPN INJ 200UT/ML	NC	
LYUMJEV TMPO INJ 100UT/ML	NC	
NOVOLIN INJ 70/30	0	OTC; \$0 Copay per 30-day supply
NOVOLIN INJ 70/30 FP	0	OTC; \$0 Copay per 30-day supply
NOVOLIN N INJ 100 UNIT	0	OTC; \$0 Copay per 30-day supply
NOVOLIN N INJ U-100	0	OTC; \$0 Copay per 30-day supply
NOVOLIN R INJ 100 UNIT	0	OTC; \$0 Copay per 30-day supply
NOVOLIN R INJ U-100	0	OTC; \$0 Copay per 30-day supply
NOVOLOG INJ 100/ML	0	\$0 Copay per 30-day supply
NOVOLOG INJ FLEXPEN	0	\$0 Copay per 30-day supply
NOVOLOG INJ PENFILL	0	\$0 Copay per 30-day supply
NOVOLOG MIX INJ 70/30	0	\$0 Copay per 30-day supply
NOVOLOG MIX INJ FLEXPEN	0	\$0 Copay per 30-day supply
SEMGLEE INJ 100U/ML	NC	
SEMGLEE SOL 100U/ML	NC	
TOUJEO MAX INJ 300IU/ML	0	\$0 Copay per 30-day supply

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
TOUJEO SOLO INJ 300IU/ML	0	\$0 Copay per 30-day supply
TRESIBA FLEX INJ 100UNIT	0	\$0 Copay per 30-day supply
TRESIBA FLEX INJ 200UNIT	0	\$0 Copay per 30-day supply
TRESIBA INJ 100UNIT	0	\$0 Copay per 30-day supply

### **INSULIN SENSITIZING AGENTS**

ACTOS TAB 15MG	NC	
ACTOS TAB 30MG	NC	
ACTOS TAB 45MG	NC	
<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

### **MEGLITINIDE ANALOGUES**

<i>nateglinide tab 60 mg</i>	1	PV
<i>nateglinide tab 120 mg</i>	1	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

### **SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS**

BRENZAVVY TAB 20MG	NC	
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
STEGLATRO TAB 5MG	NC	
STEGLATRO TAB 15MG	NC	

### **SULFONYLUREAS**

AMARYL TAB 1MG	3	PV
AMARYL TAB 2MG	3	PV
AMARYL TAB 4MG	3	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
<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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>glipizide xl tab 5mg</i>	1	PV
<i>glipizide xl tab 10mg</i>	1	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

## **ANTIDIARRHEAL/PROBIOTIC AGENTS**

### **ANTIDIARRHEAL - CHLORIDE CHANNEL ANTAGONISTS**

MYTESI TAB 125MG	NC	
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### **ANTIDIARRHEAL/PROBIOTIC AGENTS - MISC.**

DERMACINRX CAP PROBISOL	3	
<i>lactojen cap</i>	NC	
VISBIOME PAK	3	
VSL#3 DS PAK 900BIL	3	OTC
ZELAC CAP	3	

### **ANTIDIARRHEAL/PROBIOTIC COMBINATIONS**

EVIVO LIQ	NC	OTC
RESTORA RX CAP 60-1.25	3	

### **ANTIPERISTALTIC AGENTS**

<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	
MOTOFEN TAB 1-0.025	3	

## **ANTIDOTES AND SPECIFIC ANTAGONISTS**

### **ANTIDOTE COMBINATIONS**

DUODOTE INJ	3	
NITHIODOTE KIT	3	

### **ANTIDOTES - CHELATING AGENTS**

CHEMET CAP 100MG	3	
<i>deferasirox granules packet 90 mg</i>	4	SP, PA
<i>deferasirox granules packet 180 mg</i>	4	SP, PA
<i>deferasirox granules packet 360 mg</i>	4	SP, PA



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>deferasirox tab 90 mg</i>	4	SP, PA
<i>deferasirox tab 180 mg</i>	4	SP, PA
<i>deferasirox tab 360 mg</i>	4	SP, PA
<i>deferasirox tab for oral susp 125 mg</i>	4	SP, PA
<i>deferasirox tab for oral susp 250 mg</i>	4	SP, PA
<i>deferasirox tab for oral susp 500 mg</i>	4	SP, PA
<i>deferiprone tab 500 mg</i>	4	SP, PA
<i>deferiprone tab 1000 mg</i>	4	SP, PA
EXJADE TAB 125MG	NC	
EXJADE TAB 250MG	NC	
EXJADE TAB 500MG	NC	
FERPRX 2-DAY TAB 1000MG	NC	
FERRIPROX SOL 100MG/ML	NC	
FERRIPROX TAB 500MG	NC	
FERRIPROX TAB 1000MG	NC	
JADENU SPRKL GRA 90MG	NC	
JADENU SPRKL GRA 180MG	NC	
JADENU SPRKL GRA 360MG	NC	
JADENU TAB 90MG	NC	
JADENU TAB 180MG	NC	
JADENU TAB 360MG	NC	
PENTETATE CA SOL 200MG/ML	3	
PENTETATE ZI SOL 200MG/ML	3	

### **ANTIDOTES AND SPECIFIC ANTAGONISTS**

ACETADOTE INJ 200MG/ML	3	
<i>acetylcysteine inj 200 mg/ml</i>	1	
ANDEXXA SOL 200MG	3	
BAL IN OIL INJ 100MG/ML	3	
BRIDION INJ 200/2ML	NC	
BRIDION INJ 500/5ML	NC	
CALCIUM DISO INJ 1GM/5ML	3	
CYANOKIT INJ 5GM	3	
<i>deferoxamine mesylate for inj 2 gm</i>	4	SP, PA
<i>deferoxamine mesylate for inj 500 mg</i>	4	SP, PA
DESFERAL INJ 500MG	NC	
DIGIFAB INJ 40MG	3	
<i>fomepizole inj 1 gm/ml (for iv infusion)</i>	1	
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	
SOD THIOSULF INJ 25%	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
sodium thiosulfate iv soln 250 mg/ml (25%)	1	
VISTOGARD PAK 10GM	2	SP, QL

### **BENZODIAZEPINE ANTAGONISTS**

flumazenil iv soln 0.5 mg/5ml (0.1 mg/ml)	1	
flumazenil iv soln 1 mg/10ml (0.1 mg/ml)	1	

### **OPIOID ANTAGONISTS**

KLOXXADO SPR 8MG	3	
NALMEFENE INJ 1MG/ML	3	
naloxone hcl inj 0.4 mg/ml	1	
naloxone hcl inj 4 mg/10ml	1	
naloxone hcl nasal spray 4 mg/0.1ml	1	
naloxone hcl soln cartridge 0.4 mg/ml	1	
naloxone hcl soln prefilled syringe 2 mg/2ml	1	
naltrexone hcl tab 50 mg	1	PV
NARCAN SPR 4MG	3	
OPVEE SPR 2.7/0.1	NC	
VIVITROL INJ 380MG	3	PA, QL; PV
ZIMHI SOL	NC	

### **ANTIEMETICS**

#### **5-HT3 RECEPTOR ANTAGONISTS**

ANZEMET TAB 50MG	3	PA, QL
granisetron hcl inj 1 mg/ml	1	PA, QL
granisetron hcl inj 4 mg/4ml (1 mg/ml)	1	PA, QL
granisetron hcl tab 1 mg	1	PA, QL
ondansetron hcl inj 4 mg/2ml (2 mg/ml)	1	PA, QL
ondansetron hcl inj 40 mg/20ml (2 mg/ml)	1	PA, QL
ondansetron hcl inj soln pref syr 4 mg/2ml	1	PA, QL
ondansetron hcl oral soln 4 mg/5ml	1	PA, QL
ondansetron hcl tab 4 mg	1	PA, QL
ondansetron hcl tab 8 mg	1	PA, QL
ondansetron hcl tab 24 mg	1	PA, QL
ondansetron orally disintegrating tab 4 mg	1	PA, QL
ondansetron orally disintegrating tab 8 mg	1	PA, QL
palonosetron hcl iv soln 0.25 mg/5ml (base equivalent)	2	PA, QL
PALONOSETRON INJ 0.25/2ML	3	QL
SANCUSO DIS 3.1MG	2	PA, QL
SUSTOL INJ 10/0.4ML	NC	
ZUPLLENZ MIS 4MG	NC	
ZUPLLENZ MIS 8MG	NC	

#### **ANTIEMETICS - ANTICHOLINERGIC**

DIMENHYDRIN INJ 50MG/ML	3	
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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>meclizine hcl tab 12.5 mg</i>	1	
<i>meclizine hcl tab 25 mg</i>	1	
<i>scopolamine td patch 72hr 1 mg/3days</i>	1	
TIGAN INJ 100MG/ML	3	
TRANSDERM-SC DIS 1.5MG	NC	
TRANSDERM-SC DIS 1MG/3DAY	NC	
<i>trimethobenzamide hcl cap 300 mg</i>	1	

### **ANTIEMETICS - ANTIDOPAMINERGIC**

BARHEMSYS INJ 10MG/4ML	NC	
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### **ANTIEMETICS - MISCELLANEOUS**

AKYNZEO CAP 300-0.5	3	PA, QL
AKYNZEO INJ	3	PA, QL
AKYNZEO INJ 235-0.25	3	PA, QL
BONJESTA TAB 20-20MG	3	
DICLEGIS TAB 10-10MG	3	
<i>doxylamine-pyridoxine tab delayed release 10-10 mg</i>	2	
<i>dronabinol cap 2.5 mg</i>	1	PA, QL
<i>dronabinol cap 5 mg</i>	2	PA, QL
<i>dronabinol cap 10 mg</i>	2	PA, QL
MARINOL CAP 2.5MG	3	PA, QL
SYNDROS SOL 5MG/ML	NC	

### **SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS**

APONVIE INJ 32/4.4ML	NC	
<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 &amp; 125 mg</i>	2	PA, QL
EMEND CAP 80MG	3	PA, QL
EMEND SOL 150MG	3	PA, QL
EMEND SUS 125MG	3	PA, QL
EMEND TRIPAC PAK 80 & 125	3	PA, QL
<i>fosaprepitant dimeglumine for iv infusion 150 mg (base eq)</i>	2	PA, QL
VARUBI TAB 90MG	3	PA, QL

### **ANTIFUNGALS**

#### **ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITORS**

BREXAFEMME TAB 150MG	3	ST, PA, QL
CANCIDAS INJ 50MG	3	
CANCIDAS INJ 70MG	3	
<i>caspofungin acetate for iv soln 50 mg</i>	1	
<i>caspofungin acetate for iv soln 70 mg</i>	1	
CASPOFUNGIN INJ 50MG	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
CASPOFUNGIN INJ 70MG	3	
ERAXIS INJ 50MG	3	
ERAXIS INJ 100MG	3	
MICAFUNGIN INJ 50MG	3	
MICAFUNGIN INJ 100MG	3	
<i>micafungin sodium for iv soln 50 mg</i>	1	
<i>micafungin sodium for iv soln 100 mg</i>	2	
MYCAMINE INJ 100MG	3	
REZZAYO INJ 200MG	3	

### **ANTIFUNGALS**

ABELCET INJ 5MG/ML	3	
AMBISOME INJ 50MG	3	
<i>amphotericin b for iv soln 50 mg</i>	2	
<i>amphotericin b liposome iv for susp 50 mg</i>	1	
ANCOBON CAP 250MG	3	
ANCOBON CAP 500MG	3	
<i>flucytosine cap 250 mg</i>	1	
<i>flucytosine cap 500 mg</i>	NC	
<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>nystatin tab 500000 unit</i>	1	
<i>terbinafine hcl tab 250 mg</i>	1	

### **IMIDAZOLE-RELATED ANTIFUNGALS**

CRESEMBA CAP 186 MG	NC	
CRESEMBA INJ 372MG	3	
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	
<i>fluconazole for susp 10 mg/ml</i>	1	
<i>fluconazole for susp 40 mg/ml</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	
FLUCONAZOLE SOL /NACL	3	
<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	
<i>itraconazole cap 100 mg</i>	1	
<i>itraconazole oral soln 10 mg/ml</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>ketoconazole tab 200 mg</i>	1	
NOXAFIL INJ 300/16.7	NC	
NOXAFIL SUS 40MG/ML	NC	
NOXAFIL TAB 100MG	NC	
<i>posaconazole tab delayed release 100 mg</i>	NC	
SPORANOX CAP 100MG	3	
SPORANOX CAP PULSEPAK	3	
SPORANOX SOL 10MG/ML	3	
VFEND IV INJ 200MG	3	PA
VFEND SUS 40MG/ML	2	PA
VFEND TAB 50MG	2	PA
VFEND TAB 200MG	2	PA
VIVJOA CAP 150MG	3	PA, QL
<i>voriconazole for inj 200 mg</i>	2	PA
<i>voriconazole for susp 40 mg/ml</i>	2	PA
<i>voriconazole tab 50 mg</i>	2	PA
<i>voriconazole tab 200 mg</i>	1	PA

## **ANTI-HISTAMINES**

### **ANTI-HISTAMINES - ALKYLAMINES**

<i>dexchlorpheniramine maleate oral soln 2 mg/5ml</i>	NC	
<i>ryclora sol 2mg/5ml</i>	NC	

### **ANTI-HISTAMINES - ETHANOLAMINES**

CARBINOXAMIN TAB 6MG	NC	
<i>carbinoxamine maleate soln 4 mg/5ml</i>	1	
<i>carbinoxamine maleate tab 4 mg</i>	1	
<i>clemastine fumarate syrup 0.67 mg/5ml (0.5 mg/5ml base eq)</i>	1	
<i>clemastine fumarate tab 2.68 mg</i>	1	
<i>diphen elx 12.5/5ml</i>	NC	
<i>diphenhydramine hcl elixir 12.5 mg/5ml</i>	2	
<i>diphenhydramine hcl inj 50 mg/ml</i>	2	
KARBINAL ER SUS 4MG/5ML	3	
RYVENT TAB 6MG	NC	

### **ANTI-HISTAMINES - NON-SEDATING**

<i>cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)</i>	1	
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	
<i>levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>levocetirizine dihydrochloride tab 5 mg</i>	1	
<b>ANTIHISTAMINES - PHENOTHIAZINES</b>		
PHENERGAN INJ 25MG/ML	3	
PHENERGAN INJ 50MG/ML	3	
<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 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	
<b>ANTIHISTAMINES - PIPERIDINES</b>		
<i>cyproheptadine hcl syrup 2 mg/5ml</i>	1	
<i>cyproheptadine hcl tab 4 mg</i>	1	
<b>ANTIHYPERLIPIDEMICS</b>		
<b>ADENOSINE TRIPHOSPHATE-CITRATE LYASE (ACL) INHIBITORS</b>		
NEXLETOL TAB 180MG	2	ST, PA
<b>ANGIOPOIETIN-LIKE PROTEIN INHIBITORS</b>		
EVKEEZA INJ 345/2.3	6	SP, PA, QL
EVKEEZA INJ 1200/8	6	SP, PA, QL
<b>ANTIHYPERLIPIDEMICS - COMBINATIONS</b>		
<i>ezetimibe-simvastatin tab 10-10 mg</i>	1	PV
<i>ezetimibe-simvastatin tab 10-20 mg</i>	1	PV
<i>ezetimibe-simvastatin tab 10-40 mg</i>	1	PV
<i>ezetimibe-simvastatin tab 10-80 mg</i>	1	PV
NEXLIZET TAB 180/10MG	2	ST, PA
OMEGA-3/D-3 KIT WELLNESS	NC	
ROSZET TAB 5-10MG	NC	
ROSZET TAB 10-10MG	NC	
ROSZET TAB 20-10MG	NC	
ROSZET TAB 40-10MG	NC	
SURE RESULT KIT O3D3 SYS	NC	
VYTORIN TAB 10-10MG	3	PV
VYTORIN TAB 10-20MG	3	PV
VYTORIN TAB 10-40MG	3	PV
VYTORIN TAB 10-80MG	3	PV
<b>ANTIHYPERLIPIDEMICS - MISC.</b>		
<i>icosapent ethyl cap 0.5 gm</i>	NC	
<i>icosapent ethyl cap 1 gm</i>	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
LOVAZA CAP 1GM	NC	
<i>omega-3-acid ethyl esters cap 1 gm</i>	1	PA; PV
VASCEPA CAP 0.5GM	1	PA; PV
VASCEPA CAP 1GM	1	PA; PV

### **BILE ACID SEQUESTRANTS**

<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 packet for susp 3.75 gm</i>	2	PV
<i>colesevelam hcl tab 625 mg</i>	1	PV
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>	1	PV
<i>colestipol hcl granules 5 gm</i>	1	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	3	PV
WELCHOL TAB 625MG	3	PV

### **FIBRIC ACID DERIVATIVES**

ANTARA CAP 30MG	3	ST; PV
ANTARA CAP 90MG	3	ST; 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>	NC	
<i>fenofibrate cap 150 mg</i>	1	PV
<i>fenofibrate micronized cap 30 mg</i>	NC	
<i>fenofibrate micronized cap 43 mg</i>	1	PV
<i>fenofibrate micronized cap 67 mg</i>	1	PV
<i>fenofibrate micronized cap 90 mg</i>	NC	
<i>fenofibrate micronized cap 130 mg</i>	NC	
<i>fenofibrate micronized cap 134 mg</i>	1	PV
<i>fenofibrate micronized cap 200 mg</i>	1	PV
<i>fenofibrate tab 40 mg</i>	NC	
<i>fenofibrate tab 48 mg</i>	1	PV
<i>fenofibrate tab 54 mg</i>	1	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>fenofibrate tab 120 mg</i>	NC	
<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
FENOGLIDE TAB 40MG	3	PV
FENOGLIDE TAB 120MG	NC	
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	
TRILIPIX CAP 45MG	3	PV
TRILIPIX CAP 135MG	3	PV

### **HMG COA REDUCTASE INHIBITORS**

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	
ALTOPREV TAB 60MG ER	NC	
<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	0	ACA, PV
<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	0	ACA, 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	
EZALLOR SPR CAP 5MG	NC	
EZALLOR SPR CAP 10MG	NC	
EZALLOR SPR CAP 20MG	NC	
EZALLOR SPR CAP 40MG	NC	
FLOLIPID SUS 20MG/5ML	NC	
FLOLIPID SUS 40MG/5ML	NC	
<i>fluvastatin sodium cap 20 mg (base equivalent)</i>	0	ACA, PV



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>fluvastatin sodium cap 40 mg (base equivalent)</i>	0	ACA, PV
<i>fluvastatin sodium tab er 24 hr 80 mg (base equivalent)</i>	0	ACA, 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>	0	ACA, PV
<i>lovastatin tab 20 mg</i>	0	ACA, PV
<i>lovastatin tab 40 mg</i>	0	ACA, PV
<i>pravastatin sodium tab 10 mg</i>	0	ACA, PV
<i>pravastatin sodium tab 20 mg</i>	0	ACA, PV
<i>pravastatin sodium tab 40 mg</i>	0	ACA, PV
<i>pravastatin sodium tab 80 mg</i>	0	ACA, PV
<i>rosuvastatin calcium tab 5 mg</i>	0	ACA, PV
<i>rosuvastatin calcium tab 10 mg</i>	0	ACA, PV
<i>rosuvastatin calcium tab 20 mg</i>	1	PV
<i>rosuvastatin calcium tab 40 mg</i>	1	PV
SIMVASTATIN SUS 20MG/5ML	NC	
<i>simvastatin tab 5 mg</i>	0	ACA, PV
<i>simvastatin tab 10 mg</i>	0	ACA, PV
<i>simvastatin tab 20 mg</i>	0	ACA, PV
<i>simvastatin tab 40 mg</i>	0	ACA, PV
<i>simvastatin tab 80 mg</i>	1	PV
ZOCOR TAB 10MG	3	PV
ZOCOR TAB 20MG	3	PV
ZOCOR TAB 40MG	3	PV
ZYPITAMAG TAB 1MG	NC	
ZYPITAMAG TAB 2MG	NC	
ZYPITAMAG TAB 4MG	NC	
<b>INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS</b>		
<i>ezetimibe tab 10 mg</i>	1	PV
ZETIA TAB 10MG	NC	
<b>MICROSOMAL TRIGLYCERIDE TRANSFER PROTEIN (MTP) INHIBITORS</b>		
JUXTAPID CAP 5MG	NC	
JUXTAPID CAP 10MG	NC	
JUXTAPID CAP 20MG	NC	
JUXTAPID CAP 30MG	NC	

Drug Name	Drug Tier	Requirements/Limits
<b>NICOTINIC ACID DERIVATIVES</b>		
<i>niacin tab er 500 mg (antihyperlipidemic)</i>	1	PV
<i>niacin tab er 500 mg (antihyperlipidemic)</i>	NC	
<i>niacin tab er 750 mg (antihyperlipidemic)</i>	1	PV
<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	1	PV
<i>niacor tab 500mg</i>	NC	
NIASPAN TAB 1000 ER	3	PV

<b>PROPROTEIN CONVERTASE SUBTILISIN/KEXIN TYPE 9 INHIBITORS</b>		
LEQVIO SOL	NC	
PRALUENT INJ 75MG/ML	NC	
PRALUENT INJ 150MG/ML	NC	
REPATHA INJ 140MG/ML	2	PA, QL; PV
REPATHA PUSH INJ 420/3.5	2	PA, QL; PV
REPATHA SURE INJ 140MG/ML	2	PA, QL; PV

### ANTIHYPERTENSIVES

#### 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
<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 oral soln 1 mg/ml</i>	2	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	NC	
<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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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 10MG	3	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
QBRELIS SOL 1MG/ML	3	PV
<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
ZESTRIL TAB 20MG	3	PV
ZESTRIL TAB 30MG	3	PV
ZESTRIL TAB 40MG	3	PV
<b>AGENTS FOR PHEOCHROMOCYTOMA</b>		
DEMSEER CAP 250MG	3	
DIBENZYLINE CAP 10MG	3	
<i>metyrosine cap 250 mg</i>	1	
<i>phenoxybenzamine hcl cap 10 mg</i>	1	
<i>phentolamine mesylate for inj 5 mg</i>	1	
<b>ANGIOTENSIN II RECEPTOR ANTAGONISTS</b>		
ATACAND TAB 4MG	NC	
ATACAND TAB 8MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ATACAND TAB 16MG	NC	
ATACAND TAB 32MG	NC	
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	NC	
COZAAR TAB 50MG	NC	
COZAAR TAB 100MG	NC	
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>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	NC	
MICARDIS TAB 40MG	NC	
MICARDIS TAB 80MG	NC	
<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
VALSARTAN SOL 20MG/5ML	NC	
<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
<b>ANTIADRENERGIC ANTIHYPERTENSIVES</b>		
CARDURA TAB 1MG	3	
CARDURA TAB 2MG	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
CARDURA TAB 4MG	3	
CARDURA TAB 8MG	3	
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 tab er 24hr 0.17 mg (base equivalent)</i>	1	
<i>clonidine td patch weekly 0.1 mg/24hr</i>	1	PV
<i>clonidine td patch weekly 0.2 mg/24hr</i>	1	PV
<i>clonidine td patch weekly 0.3 mg/24hr</i>	1	PV
<i>doxazosin mesylate tab 1 mg</i>	1	
<i>doxazosin mesylate tab 2 mg</i>	1	
<i>doxazosin mesylate tab 4 mg</i>	1	
<i>doxazosin mesylate tab 8 mg</i>	1	
<i>guanfacine hcl tab 1 mg</i>	1	PV
<i>guanfacine hcl tab 2 mg</i>	1	PV
MINIPRESS CAP 1MG	3	
MINIPRESS CAP 2MG	3	
MINIPRESS CAP 5MG	3	
NEXICLON XR TAB 0.17MG	NC	
<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	
<b>ANTIHYPERTENSIVE COMBINATIONS</b>		
ACCURETIC TAB 10-12.5	3	PV
ACCURETIC TAB 20-12.5	3	PV
ACCURETIC TAB 20-25MG	3	PV
<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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	1	PV
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	1	PV
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	2	PV
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	1	PV
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	2	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
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg</i>	2	
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg</i>	2	PV
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg</i>	2	PV
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg</i>	2	PV
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg</i>	1	PV
ATACAND HCT TAB 16-12.5	NC	
ATACAND HCT TAB 32-12.5	NC	
ATACAND HCT TAB 32-25MG	NC	
<i>atenolol &amp; chlorthalidone tab 50-25 mg</i>	1	PV
<i>atenolol &amp; chlorthalidone tab 100-25 mg</i>	1	PV
AVALIDE TAB 150-12.5	3	PV
AVALIDE TAB 300-12.5	3	PV
AZOR TAB 5-20MG	NC	
AZOR TAB 5-40MG	NC	
AZOR TAB 10-20MG	NC	
AZOR TAB 10-40MG	NC	
<i>benazepril &amp; hydrochlorothiazide tab 5-6.25 mg</i>	1	PV
<i>benazepril &amp; hydrochlorothiazide tab 10-12.5 mg</i>	1	PV
<i>benazepril &amp; hydrochlorothiazide tab 20-12.5 mg</i>	1	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>benazepril &amp; hydrochlorothiazide tab 20-25 mg</i>	1	PV
BENICAR HCT TAB 20-12.5	NC	
BENICAR HCT TAB 40-12.5	NC	
BENICAR HCT TAB 40-25MG	NC	
<i>bisoprolol &amp; hydrochlorothiazide tab 2.5-6.25 mg</i>	1	PV
<i>bisoprolol &amp; hydrochlorothiazide tab 5-6.25 mg</i>	1	PV
<i>bisoprolol &amp; hydrochlorothiazide tab 10-6.25 mg</i>	1	PV
<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	
DIOVAN HCT TAB 160-25MG	NC	
DIOVAN HCT TAB 320-12.5	NC	
DIOVAN HCT TAB 320-25MG	NC	
DUTOPROL TAB 25-12.5	NC	
DUTOPROL TAB 50-12.5	NC	
DUTOPROL TAB 100-12.5	NC	
EDARBYCLOR TAB 40-12.5	NC	
EDARBYCLOR TAB 40-25MG	NC	
<i>enalapril maleate &amp; hydrochlorothiazide tab 5-12.5 mg</i>	1	PV
<i>enalapril maleate &amp; hydrochlorothiazide tab 10-25 mg</i>	1	PV
EXFORGE TAB 5-160MG	NC	
EXFORGE TAB 5-320MG	NC	
EXFORGE TAB 10-160MG	NC	
EXFORGE TAB 10-320MG	NC	
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>fosinopril sodium &amp; hydrochlorothiazide tab 10-12.5 mg</i>	1	PV
<i>fosinopril sodium &amp; hydrochlorothiazide tab 20-12.5 mg</i>	1	PV
HYZAAR TAB 50-12.5	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
HYZAAR TAB 100-12.5	NC	
HYZAAR TAB 100-25	NC	
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	1	PV
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	1	PV
<i>lisinopril &amp; hydrochlorothiazide tab 10-12.5 mg</i>	1	PV
<i>lisinopril &amp; hydrochlorothiazide tab 20-12.5 mg</i>	1	PV
<i>lisinopril &amp; hydrochlorothiazide tab 20-25 mg</i>	1	PV
<i>losartan potassium &amp; hydrochlorothiazide tab 50-12.5 mg</i>	1	PV
<i>losartan potassium &amp; hydrochlorothiazide tab 100-12.5 mg</i>	1	PV
<i>losartan potassium &amp; hydrochlorothiazide tab 100-25 mg</i>	1	PV
LOTENSIN HCT TAB 10-12.5	3	PV
LOTENSIN HCT TAB 20-12.5	3	PV
LOTENSIN HCT TAB 20-25MG	3	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
<i>metoprolol &amp; hydrochlorothiazide tab 50-25 mg</i>	1	PV
<i>metoprolol &amp; hydrochlorothiazide tab 100-25 mg</i>	1	PV
<i>metoprolol &amp; hydrochlorothiazide tab 100-50 mg</i>	1	PV
MICARDIS HCT TAB 40/12.5	NC	
MICARDIS HCT TAB 80-25MG	NC	
MICARDIS HCT TAB 80/12.5	NC	
<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>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



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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
PRESTALIA TAB 3.5-2.5	NC	
PRESTALIA TAB 7-5MG	NC	
PRESTALIA TAB 14-10MG	NC	
<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
TEKTURNA HCT TAB 150-12.5	2	PV
TEKTURNA HCT TAB 300-12.5	2	PV
TEKTURNA HCT TAB 300-25MG	2	PV
<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
<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
TENORETIC TAB 50	3	PV
TENORETIC TAB 100	3	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
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
<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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	1	PV
VASERETIC TAB 10-25MG	3	PV
ZESTORETIC TAB 10-12.5	NC	
ZESTORETIC TAB 20-12.5	NC	
ZESTORETIC TAB 20-25MG	NC	
<b>ANTIHYPERTENSIVES - MISC.</b>		
VECAMYL TAB 2.5MG	3	PV
<b>DIRECT RENIN INHIBITORS</b>		
<i>aliskiren fumarate tab 150 mg (base equivalent)</i>	2	PV
<i>aliskiren fumarate tab 300 mg (base equivalent)</i>	2	PV
TEKTURNA TAB 150MG	3	PV
TEKTURNA TAB 300MG	3	PV
<b>SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS)</b>		
<i>eplerenone tab 25 mg</i>	1	
<i>eplerenone tab 50 mg</i>	1	
INSPIRA TAB 25MG	2	
INSPIRA TAB 50MG	2	
<b>VASODILATORS</b>		
CORLOPAM INJ 10MG/ML	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>minoxidil tab 2.5 mg</i>	1	PV
<i>minoxidil tab 10 mg</i>	1	PV
NIPRIDE RTU INJ 20/100ML	NC	
NIPRIDE RTU INJ 50/100ML	NC	
<i>nitroprusside sodium iv soln 25 mg/ml</i>	1	
<b>ANTIMALARIALS</b>		
<b>ANTIMALARIAL COMBINATIONS</b>		
<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	1	PV
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	1	PV
COARTEM TAB 20-120MG	3	
MALARONE TAB 62.5-25	3	PV
MALARONE TAB 250-100	3	PV
<b>ANTIMALARIALS</b>		
ARAKODA TAB 100MG	NC	
ARTESUNATE SOL 110MG	3	
<i>chloroquine phosphate tab 250 mg</i>	1	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>chloroquine phosphate tab 500 mg</i>	2	PV
DARAPRIM TAB 25MG	NC	
<i>hydroxychloroquine sulfate tab 100 mg</i>	3	
<i>hydroxychloroquine sulfate tab 200 mg</i>	1	
<i>hydroxychloroquine sulfate tab 300 mg</i>	3	
<i>hydroxychloroquine sulfate tab 400 mg</i>	3	
KRINTAFEL TAB 150MG	NC	
<i>mefloquine hcl tab 250 mg</i>	1	PV
PLAQUENIL TAB 200MG	2	
<i>primaquine phosphate tab 26.3 mg (15 mg base)</i>	1	PV
PRIMAQUINE TAB 26.3MG	3	PV
<i>pyrimethamine tab 25 mg</i>	2	
QUALAQUIN CAP 324MG	3	
<i>quinine sulfate cap 324 mg</i>	1	

### **ANTIMYASTHENIC/CHOLINERGIC AGENTS**

#### **ANTIMYASTHENIC/CHOLINERGIC AGENTS**

BLOXIVERZ INJ 5MG/10ML	3	
BLOXIVERZ INJ 10/10ML	3	
FIRDAPSE TAB 10MG	6	SP, PA, QL
MESTINON SOL 60MG/5ML	3	
MESTINON TAB 60MG	3	
MESTINON TAB TIMESPAN	3	
NEOSTIG METH INJ 5MG/10ML	3	
NEOSTIG METH INJ 10/10ML	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	
<i>pyridostigmine bromide oral soln 60 mg/5ml</i>	2	
<i>pyridostigmine bromide tab 60 mg</i>	1	
<i>pyridostigmine bromide tab er 180 mg</i>	2	
REGONOL INJ 5MG/ML	3	

### **ANTIMYCOBACTERIAL AGENTS**

#### **ANTIMYCOBACTERIAL AGENTS**

<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 400MG	2	

Drug Name	Drug Tier	Requirements/Limits
MYCOBUTIN CAP 150MG	3	
PASER GRA 4GM	3	
PRETOMANID TAB 200MG	3	
PRIFTIN TAB 150MG	3	
<i>pyrazinamide tab 500 mg</i>	2	
<i>rifabutin cap 150 mg</i>	2	
RIFADIN INJ 600 MG	3	
<i>rifampin cap 150 mg</i>	1	
<i>rifampin cap 300 mg</i>	1	
<i>rifampin for inj 600 mg</i>	1	
SIRTURO TAB 20MG	3	
SIRTURO TAB 100MG	3	
TRECTOR TAB 250MG	3	

## ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

### ALKYLATING AGENTS

BELRAPZO SOL 100/4ML	NC	
BENDEKA INJ 100/4ML	6	SP, PA
BICNU INJ 100MG	3	
<i>busulfan inj 6 mg/ml</i>	1	
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>carmustine for inj 100 mg</i>	1	
<i>cisplatin inj 50 mg/50ml (1 mg/ml)</i>	1	
CISPLATIN INJ 50MG	3	
<i>cisplatin inj 100 mg/100ml (1 mg/ml)</i>	1	
<i>cisplatin inj 200 mg/200ml (1 mg/ml)</i>	1	
CYCLOPHOSPH INJ 1GM	3	
CYCLOPHOSPH TAB 25MG	3	
CYCLOPHOSPH TAB 50MG	3	
CYCLOPHOSPHA INJ 2GM/10ML	3	
CYCLOPHOSPHA INJ 500MG	3	
<i>cyclophosphamide cap 25 mg</i>	2	
<i>cyclophosphamide cap 50 mg</i>	2	
<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>cyclophosphamide iv soln 500 mg/2.5ml (200 mg/ml)</i>	1	
EVOMELA INJ 50MG	NC	
GLEOSTINE CAP 10MG	5	
GLEOSTINE CAP 40MG	5	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
GLEOSTINE CAP 100MG	5	
GLIADEL WAF 7.7MG	3	
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	
<i>melphalan tab 2 mg</i>	2	
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	
<i>oxaliplatin iv soln 200 mg/40ml</i>	1	
<i>paraplatin inj 50mg/5ml</i>	1	
<i>paraplatin inj 150/15ml</i>	1	
<i>paraplatin inj 600/60ml</i>	1	
<i>paraplatin inj 1000mg</i>	1	
PEPAXTO INJ 20MG	NC	
TEMODAR CAP 250MG	6	SP, ST, PA
TEMODAR INJ 100MG	6	SP, ST, PA
<i>temozolomide cap 5 mg</i>	4	SP, PA
<i>temozolomide cap 20 mg</i>	4	SP, PA
<i>temozolomide cap 100 mg</i>	4	SP, PA
<i>temozolomide cap 140 mg</i>	4	SP, PA
<i>temozolomide cap 180 mg</i>	4	SP, PA
<i>temozolomide cap 250 mg</i>	4	SP, PA
TEPADINA INJ 15MG	6	SP, PA
TEPADINA INJ 100MG	6	SP, PA
<i>thiotepa for inj 15 mg</i>	4	SP, PA
<i>thiotepa for inj 100 mg</i>	4	SP, PA
TREANDA INJ 25MG	6	SP, PA
TREANDA INJ 100MG	6	SP, PA
YONDELIS INJ 1MG	6	SP
ZANOSAR INJ 1GM	3	
<b>ANTIMETABOLITES</b>		
ALIMTA INJ 100MG	NC	
ALIMTA INJ 500MG	NC	
ARRANON INJ 5MG/ML	3	
<i>azacitidine for inj 100 mg</i>	4	SP, PA
<i>capecitabine tab 150 mg</i>	4	SP, PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>capecitabine tab 500 mg</i>	4	SP, PA, QL
<i>cladribine iv soln 10 mg/10ml (1 mg/ml)</i>	1	
<i>clofarabine iv soln 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	
<i>decitabine for inj 50 mg</i>	4	SP, PA
<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	SP, PA
FOLOTYN INJ 40MG/2ML	6	SP, PA
<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	
<i>gemcitabine hcl inj 1 gm/26.3ml (38 mg/ml) (base equiv)</i>	1	
<i>gemcitabine hcl inj 2 gm/52.6ml (38 mg/ml) (base equiv)</i>	1	
<i>gemcitabine hcl inj 200 mg/5.26ml (38 mg/ml) (base equiv)</i>	1	
GEMCITABINE INJ 1.5GM/15	3	
GEMCITABINE INJ 1GM	3	
GEMCITABINE INJ 1GM/10ML	3	
GEMCITABINE INJ 2GM	3	
GEMCITABINE INJ 2GM/20ML	3	
GEMCITABINE INJ 200MG	3	
INFUGEM SOL 1200MG	NC	
INFUGEM SOL 1300MG	NC	
INFUGEM SOL 1400MG	NC	
INFUGEM SOL 1500MG	NC	
INFUGEM SOL 1600MG	NC	
INFUGEM SOL 1700MG	NC	
INFUGEM SOL 1800MG	NC	
INFUGEM SOL 2000MG	NC	
INFUGEM SOL 2200MG	NC	
<i>mercaptopurine tab 50 mg</i>	1	
<i>methotrexate sodium for inj 1 gm</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	
<i>nelarabine iv soln 5 mg/ml</i>	1	
ONUREG TAB 200MG	6	SP, PA, QL
ONUREG TAB 300MG	6	SP, PA, QL
<i>pemetrexed disodium for iv soln 100 mg (base equiv)</i>	1	
<i>pemetrexed disodium for iv soln 500 mg (base equiv)</i>	1	
<i>pemetrexed disodium for iv soln 750 mg (base equiv)</i>	1	
<i>pemetrexed disodium for iv soln 1000 mg (base equiv)</i>	1	
PEMETREXED SOL 1GM/40ML	NC	
PEMETREXED SOL 100/4ML	NC	
PEMETREXED SOL 500/20ML	NC	
PEMETREXED SOL 850/34ML	NC	
PEMFEXY SOL 500/20ML	NC	
PURIXAN SUS 20MG/ML	6	SP, PA
TABLOID TAB 40MG	2	
TREXALL TAB 5MG	2	
TREXALL TAB 7.5MG	2	
TREXALL TAB 10MG	2	
TREXALL TAB 15MG	2	
VIDAZA INJ 100MG	6	SP, PA
XATMEP SOL 2.5MG/ML	3	
XELODA TAB 150MG	6	SP, ST, PA, QL
XELODA TAB 500MG	6	SP, ST, PA, QL
<b>ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS</b>		
ALYMSYS SOL 100/4ML	NC	
ALYMSYS SOL 400/16ML	NC	
AVASTIN INJ	NC	
AVASTIN INJ 400/16ML	NC	
CYRAMZA INJ 100/10ML	6	SP, PA
CYRAMZA INJ 500/50ML	6	SP, PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
INLYTA TAB 1MG	5	SP, PA, QL
INLYTA TAB 5MG	5	SP, PA, QL
LENVIMA CAP 4MG	5	SP, PA, QL
LENVIMA CAP 8 MG	5	SP, PA, QL
LENVIMA CAP 10 MG	5	SP, PA, QL
LENVIMA CAP 12MG	5	SP, PA, QL
LENVIMA CAP 14 MG	5	SP, PA, QL
LENVIMA CAP 18 MG	5	SP, PA, QL
LENVIMA CAP 20 MG	5	SP, PA, QL
LENVIMA CAP 24 MG	5	SP, PA, QL
MVASI INJ 100MG	NC	
MVASI INJ 400MG	NC	
VEGZELMA SOL 100/4ML	NC	
VEGZELMA SOL 400/16ML	NC	
ZALTRAP INJ 100/4ML	6	SP, PA
ZALTRAP INJ 200/8ML	6	SP, PA
ZIRABEV INJ 100/4ML	4	SP, PA
ZIRABEV INJ 400/16ML	4	SP, PA

#### **ANTINEOPLASTIC - ANTI-HER2 AGENTS**

HERCEPTIN INJ 150MG	NC	
KANJINTI INJ 420MG	4	SP, PA
KANJINTI SOL 150MG	4	SP, PA
OGIVRI INJ 150MG	NC	
OGIVRI INJ 420MG	NC	
ONTRUZANT INJ 150MG	NC	
ONTRUZANT INJ 420MG	NC	
PERJETA INJ 420/14ML	5	SP, PA
TRAZIMERA INJ 150MG	4	SP, PA
TRAZIMERA INJ 420MG	4	SP, PA
TUKYSA TAB 50MG	6	SP, PA, QL
TUKYSA TAB 150MG	6	SP, PA, QL

#### **ANTINEOPLASTIC - ANTIBODIES**

ADCETRIS INJ 50MG	6	SP, PA
ARZERRA CON 100/5ML	6	SP, PA
BAVENCIO INJ 20MG/ML	6	SP, PA
BESPOLSA INJ 0.9MG	6	SP, PA
BLINCYTO INJ 35MCG	6	SP, PA
COLUMVI INJ 2.5MG	NC	
COLUMVI INJ 10/10ML	NC	
DARZALEX SOL 100MG/5M	6	SP, PA
DARZALEX SOL 400MG/20	6	SP, PA
ELREXFIO INJ 44/1.1ML	NC	
ELREXFIO INJ 76/1.9ML	NC	
EMPLICITI INJ 300MG	6	SP, PA



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
EMPLICITI INJ 400MG	6	SP, PA
ENHERTU INJ 100MG	6	SP, PA
GAZYVA INJ 25MG/ML	6	SP, PA
IMFINZI INJ 120/2.4	6	SP, PA
IMFINZI INJ 500/10	6	SP, PA
IMJUDO INJ 25/1.25	NC	
IMJUDO INJ 300/15ML	NC	
JEMPERLI SOL 500/10ML	NC	
KADCYLA INJ 100MG	6	SP, PA
KADCYLA INJ 160MG	6	SP, PA
KEYTRUDA INJ 100MG/4M	6	SP, PA
KIMMTRAK SOL 100MCG	NC	
LIBTAYO INJ 350/7ML	6	SP, PA, QL
LUMOXITI SOL 1MG	6	SP, PA
LUNSUMIO INJ 1MG/ML	NC	
LUNSUMIO INJ 30MG/30	NC	
MYLOTARG INJ 4.5MG	6	SP, PA
OPDIVO INJ 40MG/4ML	6	SP, PA
OPDIVO INJ 100MG/10	6	SP, PA
OPDIVO INJ 120MG/12	6	SP, PA
OPDIVO INJ 240/24	6	SP, PA
PADCEV INJ 20MG	NC	
PADCEV INJ 30MG	NC	
POLIVY INJ 30MG	6	SP, PA
POLIVY INJ 140MG	6	SP, PA
POTELIGEO INJ 20MG/5ML	6	SP, PA
RITUXAN INJ 100MG	NC	
RITUXAN INJ 500MG	NC	
RUXIENCE INJ 100/10ML	4	SP, PA
RUXIENCE INJ 500/50ML	4	SP, PA
SARCLISA SOL 100/5ML	6	SP, PA
SARCLISA SOL 500/25ML	6	SP, PA
TALVEY INJ 3/1.5ML	NC	
TALVEY INJ 40MG/ML	NC	
TECENTRIQ INJ 840/14	6	SP, PA
TECENTRIQ INJ 1200/20	6	SP, PA
TIVDAK INJ 40MG	6	SP, PA, QL
TRUXIMA INJ 100/10ML	NC	
TRUXIMA INJ 500/50ML	NC	
UNITUXIN INJ	6	SP
YERVOY INJ 50MG	6	SP, PA
YERVOY INJ 200MG	6	SP, PA
ZEVALIN KIT Y-90	3	
ZYNLONTA SOL 10MG	NC	

Drug Name	Drug Tier	Requirements/Limits
<b>ANTINEOPLASTIC - BCL-2 INHIBITORS</b>		
VENCLEXTA TAB 10MG	6	SP, PA, QL
VENCLEXTA TAB 50MG	6	SP, PA, QL
VENCLEXTA TAB 100MG	6	SP, PA, QL
VENCLEXTA TAB START PK	6	SP, PA, QL
<b>ANTINEOPLASTIC - CELLULAR IMMUNOTHERAPY</b>		
KYMRIAH SUS	NC	
PROVENGE INJ	3	
YESCARTA INJ	NC	
<b>ANTINEOPLASTIC - EGFR INHIBITORS</b>		
ERBITUX INJ 100MG	6	SP, PA
ERBITUX INJ 200MG	6	SP, PA
<i>erlotinib hcl tab 25 mg (base equivalent)</i>	4	SP, PA, QL
<i>erlotinib hcl tab 100 mg (base equivalent)</i>	4	SP, PA, QL
<i>erlotinib hcl tab 150 mg (base equivalent)</i>	4	SP, PA, QL
GILOTRIF TAB 20MG	6	SP, PA, QL
GILOTRIF TAB 30MG	6	SP, PA, QL
GILOTRIF TAB 40MG	6	SP, PA, QL
IRESSA TAB 250MG	5	SP, PA
PORTRAZZA INJ 800/50ML	6	SP, PA
TAGRISSE TAB 40MG	5	SP, PA, QL
TAGRISSE TAB 80MG	5	SP, PA, QL
TARCEVA TAB 25MG	6	SP, ST, PA, QL
TARCEVA TAB 100MG	6	SP, ST, PA, QL
TARCEVA TAB 150MG	6	SP, ST, PA, QL
VECTIBIX INJ 100MG	6	SP, PA
VECTIBIX INJ 400MG	6	SP, PA
VIZIMPRO TAB 15MG	NC	
VIZIMPRO TAB 30MG	NC	
VIZIMPRO TAB 45MG	NC	
<b>ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS</b>		
DAURISMO TAB 25MG	NC	
DAURISMO TAB 100MG	NC	
ERIVEDGE CAP 150MG	5	SP, PA, QL
ODOMZO CAP 200MG	5	SP, PA, QL
<b>ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS</b>		
<i>abiraterone acetate tab 250 mg</i>	4	SP, PA, QL
<i>abiraterone acetate tab 500 mg</i>	4	SP, PA, QL
<i>anastrozole tab 1 mg</i>	1	ACA, PV
ARIMIDEX TAB 1MG	2	PV
AROMASIN TAB 25MG	2	PV
<i>bicalutamide tab 50 mg</i>	1	
CAMCEVI INJ 42MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
CASODEX TAB 50MG	3	
ELIGARD INJ 7.5MG	5	SP, PA
ELIGARD INJ 22.5MG	5	SP, PA
ELIGARD INJ 30MG	5	SP, PA
ELIGARD INJ 45MG	5	SP, PA
EMCYT CAP 140MG	3	
ERLEADA TAB 60MG	5	SP, PA, QL
ERLEADA TAB 240MG	5	SP, PA, QL
<i>exemestane tab 25 mg</i>	0	ACA, PV
FARESTON TAB 60MG	3	
FASLODEX INJ 250/5ML	6	SP, PA
FEMARA TAB 2.5MG	2	PV
FIRMAGON INJ 80MG	NC	
FIRMAGON INJ 120MG	NC	
<i>flutamide cap 125 mg</i>	1	
<i>fulvestrant inj soln pref syr 250 mg/5ml</i>	4	SP, PA
<i>hydroxyprogesterone caproate im in oil 1.25 gm/5ml</i>	1	
<i>letrozole tab 2.5 mg</i>	1	PV
<i>leuprolide acetate inj kit 5 mg/ml</i>	4	SP, PA
LUPRON DEPOT INJ 3.75MG	6	SP, PA, QL
LUPRON DEPOT INJ 7.5MG	NC	
LUPRON DEPOT INJ 11.25MG	6	SP, PA, QL
LUPRON DEPOT INJ 22.5MG	NC	
LUPRON DEPOT INJ 30MG	NC	
LUPRON DEPOT INJ 45MG	NC	
LYSODREN TAB 500MG	5	SP
<i>megestrol acetate susp 40 mg/ml</i>	1	
<i>megestrol acetate tab 20 mg</i>	1	
<i>megestrol acetate tab 40 mg</i>	1	
NILANDRON TAB 150MG	NC	
<i>nilutamide tab 150 mg</i>	1	
NUBEQA TAB 300MG	5	SP, PA, QL
ORGOVYX TAB 120MG	6	SP, PA, QL
ORSERDU TAB 86MG	NC	
ORSERDU TAB 345MG	NC	
SOLTAMOX SOL 10MG/5ML	3	PV
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	0	ACA, PV
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	0	ACA, PV
<i>toremifene citrate tab 60 mg (base equivalent)</i>	2	
TRELSTAR MIX INJ 3.75MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
TRELSTAR MIX INJ 11.25MG	NC	
TRELSTAR MIX INJ 22.5MG	NC	
XTANDI CAP 40MG	5	SP, PA, QL
XTANDI TAB 40MG	5	SP, PA, QL
XTANDI TAB 80MG	5	SP, PA, QL
YONSA TAB 125MG	5	SP, PA, QL
ZOLADEX IMP 3.6MG	NC	
ZOLADEX IMP 10.8MG	NC	
ZYTIGA TAB 250MG	NC	
ZYTIGA TAB 500MG	NC	

### **ANTINEOPLASTIC - IMMUNOMODULATORS**

POMALYST CAP 1MG	6	SP, PA, QL
POMALYST CAP 2MG	6	SP, PA, QL
POMALYST CAP 3MG	6	SP, PA, QL
POMALYST CAP 4MG	6	SP, PA, QL

### **ANTINEOPLASTIC - XPO1 INHIBITORS**

XPOVIO PAK 40MG	6	SP, PA, QL
XPOVIO PAK 50MG	6	SP, PA, QL
XPOVIO PAK 60MG	6	SP, PA, QL
XPOVIO PAK 80MG	6	SP, PA, QL

### **ANTINEOPLASTIC ANTIBIOTICS**

<i>adriamycin inj 50mg</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>dactinomycin for inj 0.5 mg</i>	1	
<i>daunorubicin hcl iv soln 20 mg/4ml (base equiv)</i>	1	
DAUNORUBICIN INJ 20MG/4ML	3	
DAUNORUBICIN INJ 50MG	3	
DOXIL INJ 20/10ML	3	
DOXIL INJ 50/25ML	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	
ELLENCE INJ 2MG/ML	3	
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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	SP, PA
<i>mitoxantrone hcl inj conc 25 mg/12.5ml (2 mg/ml)</i>	4	SP, PA
<i>mitoxantrone hcl inj conc 30 mg/15ml (2 mg/ml)</i>	4	SP, PA
<i>mutamycin inj 5mg</i>	1	
<i>mutamycin inj 20mg</i>	1	
<i>mutamycin inj 40mg</i>	1	
<i>valrubicin soln for intravesical instillation 40 mg/ml</i>	4	SP
VALSTAR SOL 40MG/ML	6	SP

### **ANTINEOPLASTIC COMBINATIONS**

HERCEP HYLEC SOL 60-10000	NC	
INQOVI TAB 35-100MG	6	SP, PA, QL
KISQALI 200 PAK FEMARA	5	SP, PA, QL
KISQALI 400 PAK FEMARA	5	SP, PA, QL
KISQALI 600 PAK FEMARA	5	SP, PA, QL
LONSURF TAB 15-6.14	5	SP, PA, QL
LONSURF TAB 20-8.19	5	SP, PA, QL
OPDUALAG SOL	NC	
PHESGO SOL	5	SP, PA
RITUXAN INJ HYCELA	6	SP, PA
VYXEOS INJ 44-100MG	6	SP, PA

### **ANTINEOPLASTIC ENZYME INHIBITORS**

AFINITOR DIS TAB 2MG	NC	
AFINITOR DIS TAB 3MG	NC	
AFINITOR DIS TAB 5MG	NC	
AFINITOR TAB 2.5MG	NC	
AFINITOR TAB 5MG	NC	
AFINITOR TAB 7.5MG	NC	
AFINITOR TAB 10MG	NC	
ALECENSA CAP 150MG	5	SP, PA, QL
ALIQOPA INJ 60MG	NC	
ALUNBRIG PAK	5	SP, PA, QL
ALUNBRIG TAB 30MG	5	SP, PA, QL
ALUNBRIG TAB 90MG	5	SP, PA, QL
ALUNBRIG TAB 180MG	5	SP, PA, QL
BALVERSA TAB 3MG	6	SP, PA, QL
BALVERSA TAB 4MG	6	SP, PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
BALVERSA TAB 5MG	6	SP, PA, QL
BELEODAQ INJ 500MG	6	SP, PA
<i>bortezomib for inj 3.5 mg</i>	4	SP, PA
BORTEZOMIB INJ 3.5/1.4	3	PA
BORTEZOMIB INJ 3.5MG	NC	
BOSULIF TAB 100MG	5	SP, PA, QL
BOSULIF TAB 400MG	5	SP, PA, QL
BOSULIF TAB 500MG	5	SP, PA, QL
BRAFTOVI CAP 75MG	5	SP, PA, QL
BRUKINSA CAP 80MG	5	SP, PA, QL
CABOMETYX TAB 20MG	5	SP, PA, QL
CABOMETYX TAB 40MG	5	SP, PA, QL
CABOMETYX TAB 60MG	5	SP, PA, QL
CALQUENCE CAP 100MG	6	SP, PA, QL
CALQUENCE TAB 100MG	6	SP, PA, QL
CAPRELSA TAB 100MG	6	SP, PA, QL
CAPRELSA TAB 300MG	6	SP, PA, QL
COMETRIQ KIT 60MG	6	SP, PA, QL
COMETRIQ KIT 100MG	6	SP, PA, QL
COMETRIQ KIT 140MG	6	SP, PA, QL
COPIKTRA CAP 15MG	5	SP, PA, QL
COPIKTRA CAP 25MG	5	SP, PA, QL
COTELLIC TAB 20MG	5	SP, PA, QL
<i>everolimus tab 2.5 mg</i>	4	SP, PA, QL
<i>everolimus tab 5 mg</i>	4	SP, PA, QL
<i>everolimus tab 7.5 mg</i>	4	SP, PA, QL
<i>everolimus tab 10 mg</i>	4	SP, PA, QL
<i>everolimus tab for oral susp 2 mg</i>	4	SP, PA, QL
<i>everolimus tab for oral susp 3 mg</i>	4	SP, PA, QL
<i>everolimus tab for oral susp 5 mg</i>	4	SP, PA, QL
FARYDAK CAP 10MG	NC	
FARYDAK CAP 15MG	NC	
FARYDAK CAP 20MG	NC	
FOTIVDA CAP 0.89MG	NC	
FOTIVDA CAP 1.34MG	NC	
FYARRO SUS 100MG	NC	
GAVRETO CAP 100MG	5	SP, PA, QL
GLEEVEC TAB 100MG	NC	
GLEEVEC TAB 400MG	NC	
IBRANCE CAP 75MG	5	SP, PA, QL
IBRANCE CAP 100MG	5	SP, PA, QL
IBRANCE CAP 125MG	5	SP, PA, QL
IBRANCE TAB 75MG	5	SP, PA, QL
IBRANCE TAB 100MG	5	SP, PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
IBRANCE TAB 125MG	5	SP, PA, QL
ICLUSIG TAB 10MG	NC	
ICLUSIG TAB 15MG	NC	
ICLUSIG TAB 30MG	NC	
ICLUSIG TAB 45MG	NC	
IDHIFA TAB 50MG	6	SP, PA, QL
IDHIFA TAB 100MG	6	SP, PA, QL
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	4	SP, PA, QL
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	4	SP, PA
IMBRUVICA CAP 70MG	5	SP, PA, QL
IMBRUVICA CAP 140MG	5	SP, PA, QL
IMBRUVICA SUS 70MG/ML	5	SP, PA, QL
IMBRUVICA TAB 140MG	5	SP, PA, QL
IMBRUVICA TAB 280MG	5	SP, PA, QL
IMBRUVICA TAB 420MG	5	SP, PA, QL
IMBRUVICA TAB 560MG	5	SP, PA, QL
INREBIC CAP 100MG	NC	
ISTODAX OVR INJ 10MG	6	SP, PA
JAKAFI TAB 5MG	6	SP, PA, QL
JAKAFI TAB 10MG	6	SP, PA, QL
JAKAFI TAB 15MG	6	SP, PA, QL
JAKAFI TAB 20MG	6	SP, PA, QL
JAKAFI TAB 25MG	6	SP, PA, QL
JAYPIRCA TAB 50MG	NC	
JAYPIRCA TAB 100MG	NC	
KISQALI TAB 200DOSE	5	SP, PA, QL
KISQALI TAB 400DOSE	5	SP, PA, QL
KISQALI TAB 600DOSE	5	SP, PA, QL
KOSELUGO CAP 10MG	6	SP, PA, QL
KOSELUGO CAP 25MG	6	SP, PA, QL
KRAZATI TAB 200MG	6	SP, PA, QL
KYPROLIS SOL 10MG	NC	
KYPROLIS SOL 30MG	NC	
KYPROLIS SOL 60MG	NC	
<i>lapatinib ditosylate tab 250 mg (base equiv)</i>	4	SP, PA, QL
LORBRENA TAB 25MG	6	SP, PA, QL
LORBRENA TAB 100MG	6	SP, PA, QL
LUMAKRAS TAB 120MG	6	SP, PA, QL
LUMAKRAS TAB 320MG	6	SP, PA, QL
LYNPARZA TAB 100MG	5	SP, PA, QL
LYNPARZA TAB 150MG	5	SP, PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
LYTGOBI TAB 4MG	NC	
MEKINIST TAB 0.5MG	NC	
MEKINIST TAB 2MG	6	PA, QL
MEKTOVI TAB 15MG	5	SP, PA, QL
NERLYNX TAB 40MG	6	SP, PA, QL
NEXAVAR TAB 200MG	5	SP, PA, QL
NINLARO CAP 2.3MG	5	SP, PA, QL
NINLARO CAP 3MG	5	SP, PA, QL
NINLARO CAP 4MG	5	SP, PA, QL
PEMAZYRE TAB 4.5MG	NC	
PEMAZYRE TAB 9MG	NC	
PEMAZYRE TAB 13.5MG	NC	
PIQRAY 200MG TAB DOSE	6	SP, PA, QL
PIQRAY 250MG TAB DOSE	6	SP, PA, QL
PIQRAY 300MG TAB DOSE	6	SP, PA, QL
QINLOCK TAB 50MG	NC	
RETEVMO CAP 40MG	5	SP, PA, QL
RETEVMO CAP 80MG	5	SP, PA, QL
<i>romidepsin for iv inj 10 mg</i>	4	SP, PA
ROMIDEPSIN INJ 27.5MG	6	SP, PA
ROZLYTREK CAP 100MG	5	SP, PA, QL
ROZLYTREK CAP 200MG	5	SP, PA, QL
RUBRACA TAB 200MG	NC	
RUBRACA TAB 250MG	NC	
RUBRACA TAB 300MG	NC	
RYDAPT CAP 25MG	6	SP, PA, QL
<i>sorafenib tosylate tab 200 mg (base equivalent)</i>	4	SP, PA, QL
SPRYCEL TAB 20MG	5	SP, PA, QL
SPRYCEL TAB 50MG	5	SP, PA, QL
SPRYCEL TAB 70MG	5	SP, PA, QL
SPRYCEL TAB 80MG	5	SP, PA, QL
SPRYCEL TAB 100MG	5	SP, PA, QL
SPRYCEL TAB 140MG	5	SP, PA, QL
STIVARGA TAB 40MG	5	SP, PA, QL
<i>sunitinib malate cap 12.5 mg (base equivalent)</i>	4	SP, PA, QL
<i>sunitinib malate cap 25 mg (base equivalent)</i>	4	SP, PA, QL
<i>sunitinib malate cap 37.5 mg (base equivalent)</i>	4	SP, PA, QL
<i>sunitinib malate cap 50 mg (base equivalent)</i>	4	SP, PA, QL
SUTENT CAP 12.5MG	NC	
SUTENT CAP 25MG	NC	



Drug Name	Drug Tier	Requirements/Limits
SUTENT CAP 37.5MG	NC	
SUTENT CAP 50MG	NC	
TABRECTA TAB 150MG	NC	
TABRECTA TAB 200MG	NC	
TAFINLAR CAP 50MG	NC	
TAFINLAR CAP 75MG	NC	
TALZENNA CAP 0.25MG	NC	
TALZENNA CAP 1MG	NC	
TASIGNA CAP 50MG	NC	
TASIGNA CAP 150MG	NC	
TASIGNA CAP 200MG	NC	
TAZVERIK TAB 200MG	NC	
<i>temsirolimus soln for iv infusion 25 mg/ml</i>	4	SP, PA, QL
TEPMETKO TAB 225MG	NC	
TIBSOVO TAB 250MG	6	SP, PA, QL
TORISEL INJ 25MG/ML	6	SP, ST, PA, QL
TURALIO CAP 200MG	NC	
TYKERB TAB 250MG	6	SP, PA, QL
UKONIQ TAB 200MG	NC	
VANFLYTA TAB 17.7MG	NC	
VANFLYTA TAB 26.5MG	NC	
VELCADE INJ 3.5MG	6	SP, PA
VERZENIO TAB 50MG	6	SP, PA, QL
VERZENIO TAB 100MG	6	SP, PA, QL
VERZENIO TAB 150MG	6	SP, PA, QL
VERZENIO TAB 200MG	6	SP, PA, QL
VITRAKVI CAP 25MG	5	SP, PA, QL
VITRAKVI CAP 100MG	5	SP, PA, QL
VITRAKVI SOL 20MG/ML	5	SP, PA, QL
VONJO CAP 100MG	6	SP, PA, QL
VOTRIENT TAB 200MG	NC	
XALKORI CAP 200MG	NC	
XALKORI CAP 250MG	NC	
XOSPATA TAB 40MG	5	SP, PA, QL
ZEJULA CAP 100MG	5	SP, PA, QL
ZEJULA TAB 100MG	5	SP, PA, QL
ZEJULA TAB 200MG	5	SP, PA, QL
ZEJULA TAB 300MG	5	SP, PA, QL
ZELBORAF TAB 240MG	5	SP, PA, QL
ZOLINZA CAP 100MG	5	SP, PA, QL
ZYDELIG TAB 100MG	5	SP, PA, QL
ZYDELIG TAB 150MG	5	SP, PA, QL
ZYKADIA TAB 150MG	5	SP, PA, QL

Drug Name	Drug Tier	Requirements/Limits
<b>ANTINEOPLASTIC ENZYMES</b>		
ASPARLAS INJ 3750/5ML	6	SP, PA
ONCASPAR INJ 750/ML	6	SP, PA
RYLAZE INJ 10/0.5ML	6	SP, PA, QL
<b>ANTINEOPLASTIC RADIOPHARMACEUTICALS</b>		
LUTATHERA SOL 370MBQ	NC	
XOFIGO INJ 1100KBQ	NC	
<b>ANTINEOPLASTICS MISC.</b>		
ACTIMMUNE INJ 2MU/0.5	6	SP, PA
ALFERON N INJ 5MU/ML	6	SP
<i>arsenic trioxide iv soln 10 mg/10ml (1 mg/ml)</i>	1	
<i>arsenic trioxide iv soln 12 mg/6ml (2 mg/ml)</i>	4	
BESREMI SOL 500MCG	6	SP, PA, QL
<i>bexarotene cap 75 mg</i>	4	SP, PA
<i>dacarbazine for inj 100 mg</i>	1	
<i>dacarbazine for inj 200 mg</i>	1	
ELZONRIS SOL 1000MCG	NC	
HYDREA CAP 500MG	2	
<i>hydroxyurea cap 500 mg</i>	1	
INTRON A INJ 10MU	6	SP, PA
INTRON A INJ 50MU	6	SP, PA
MATULANE CAP 50MG	2	
NIPENT INJ 10MG	3	
PHOTOFRIN INJ 75MG	3	
PROLEUKIN INJ 22MU	6	SP, PA
SYNRIBO INJ 3.5MG	6	SP, PA
TARGRETIN CAP 75MG	NC	
TICE BCG INJ	3	
<i>tretinoin cap 10 mg</i>	2	
TRISENOX INJ 12MG/6ML	6	
UVADEX SOL 20MCG/ML	3	
<b>CHEMOTHERAPY ADJUNCTS</b>		
ELITEK INJ 1.5MG	3	
ELITEK INJ 7.5MG	3	
KEPIVANCE INJ 6.25MG	3	
<b>CHEMOTHERAPY RESCUE/ANTIDOTE/PROTECTIVE AGENTS</b>		
COSELA INJ 300MG	NC	
<i>dexrazoxane hcl for inj 250 mg (base equivalent)</i>	1	
<i>dexrazoxane hcl for inj 500 mg (base equivalent)</i>	1	
ETHYOL INJ 500MG	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
KHAPZORY SOL 175MG	NC	
KHAPZORY SOL 300MG	NC	
<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 inj 100 mg/10ml (10 mg/ml)</i>	1	
<i>leucovorin calcium inj 500 mg/50ml (10 mg/ml)</i>	1	
<i>leucovorin calcium tab 5 mg</i>	1	
<i>leucovorin calcium tab 10 mg</i>	2	
<i>leucovorin calcium tab 15 mg</i>	2	
<i>leucovorin calcium tab 25 mg</i>	2	
<i>levoleucovorin calcium for iv inj 50 mg (base equiv)</i>	4	SP, PA
<i>levoleucovorin calcium iv soln pf 175 mg/17.5ml (base equiv)</i>	4	SP, PA
<i>levoleucovorin calcium iv soln pf 250 mg/25ml (base equiv)</i>	4	SP, PA
<i>mesna inj 100 mg/ml</i>	1	
MESNEX INJ 1GM	3	
MESNEX TAB 400MG	3	
PEDMARK INJ 12.5GM	3	
TOTECT INJ 500MG	NC	
VORAXAZE INJ 1000UNIT	6	SP
<b>MITOTIC INHIBITORS</b>		
ABRAXANE INJ 100MG	6	SP
<i>docetaxel for inj conc 20 mg/ml</i>	1	
<i>docetaxel for inj conc 80 mg/4ml (20 mg/ml)</i>	1	
<i>docetaxel for inj conc 160 mg/8ml (20 mg/ml)</i>	1	
DOCETAXEL INJ 20MG/2ML	3	
DOCETAXEL INJ 20MG/ML	3	
DOCETAXEL INJ 80MG/4ML	3	
DOCETAXEL INJ 80MG/8ML	3	
DOCETAXEL INJ 160/8ML	3	
DOCETAXEL INJ 160/16ML	3	
<i>docetaxel soln for iv infusion 20 mg/2ml</i>	1	
<i>docetaxel soln for iv infusion 80 mg/8ml</i>	1	
<i>docetaxel soln for iv infusion 160 mg/16ml</i>	1	
ETOPOPHOS INJ 100MG	3	
<i>etoposide cap 50 mg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	SP, PA
IXEMPRA KIT INJ 15MG	6	SP, PA
IXEMPRA KIT INJ 45MG	6	SP, PA
JEVTANA INJ 60/1.5ML	6	SP, PA
<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	
<i>paclitaxel protein-bound particles for iv susp 100 mg</i>	1	SP
<i>toposar inj 1gm/50ml</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	
<b>ONCOLYTIC VIRAL AGENTS</b>		
IMLYGIC INJ	6	SP, PA
<b>TOPOISOMERASE I INHIBITORS</b>		
CAMPTOSAR INJ 40MG/2ML	3	
CAMPTOSAR INJ 100/5ML	3	
CAMPTOSAR INJ 300/15ML	3	
HYCAMTIN CAP 0.25MG	6	SP, PA
HYCAMTIN CAP 1MG	6	SP, PA
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 300 mg/15ml (20 mg/ml)</i>	1	
<i>irinotecan hcl inj 500 mg/25ml (20 mg/ml)</i>	1	
ONIVYDE INJ 4.3MG/ML	6	SP
<i>topotecan hcl for inj 4 mg (base equiv)</i>	1	
<i>topotecan hcl inj 4 mg/4ml (base equiv) (for infusion)</i>	1	
TOPOTECAN INJ 4MG/4ML	3	
TRODELVY SOL 180MG	6	SP, PA

## **ANTIPARKINSON AND RELATED THERAPY AGENTS**

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>ANTIPARKINSON ADJUNCTIVE THERAPY</b>		
<i>carbidopa tab 25 mg</i>	2	
LODOSYN TAB 25MG	3	
NOURIANZ TAB 20MG	NC	
NOURIANZ TAB 40MG	NC	
<b>ANTIPARKINSON ANTICHOLINERGICS</b>		
<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>trihexyphenidyl hcl oral soln 0.4 mg/ml</i>	1	
<i>trihexyphenidyl hcl tab 2 mg</i>	1	
<i>trihexyphenidyl hcl tab 5 mg</i>	1	
<b>ANTIPARKINSON COMT INHIBITORS</b>		
COMTAN TAB 200MG	3	
<i>entacapone tab 200 mg</i>	1	
ONGENTYS CAP 25MG	NC	
TASMAR TAB 100MG	3	
<i>tolcapone tab 100 mg</i>	1	
<b>ANTIPARKINSON DOPAMINERGICS</b>		
<i>amantadine hcl cap 100 mg</i>	1	
<i>amantadine hcl soln 50 mg/5ml</i>	1	
<i>amantadine hcl tab 100 mg</i>	1	
APOKYN INJ 10MG/ML	NC	
<i>apomorphine hcl soln cartridge 30 mg/3ml</i>	4	PA, QL
<i>bromocriptine mesylate cap 5 mg (base equivalent)</i>	1	
<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	1	
<i>carbidopa &amp; levodopa orally disintegrating tab 10-100 mg</i>	1	
<i>carbidopa &amp; levodopa orally disintegrating tab 25-100 mg</i>	1	
<i>carbidopa &amp; levodopa orally disintegrating tab 25-250 mg</i>	1	
<i>carbidopa &amp; levodopa tab 10-100 mg</i>	1	
<i>carbidopa &amp; levodopa tab 25-100 mg</i>	1	
<i>carbidopa &amp; levodopa tab 25-250 mg</i>	1	
<i>carbidopa &amp; levodopa tab er 25-100 mg</i>	1	
<i>carbidopa &amp; levodopa tab er 50-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	2	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	2	
DHIVY TAB 25-100MG	3	
DUOPA SUS 4.63-20	6	SP, PA
GOCOVRI CAP 68.5MG	NC	
GOCOVRI CAP 137MG	NC	
INBRIJA CAP 42MG	5	SP, PA, QL
KYNMOBI MIS 10MG	5	SP, PA, QL
KYNMOBI MIS 15MG	5	SP, PA, QL
KYNMOBI MIS 20MG	5	SP, PA, QL
KYNMOBI MIS 25MG	5	SP, PA, QL
KYNMOBI MIS 30MG	5	SP, PA, QL
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	
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	
<i>pramipexole dihydrochloride tab 1.5 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 0.75 mg</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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>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>	1	
<i>ropinirole hydrochloride tab er 24hr 12 mg (base equivalent)</i>	2	
<i>RYTARY CAP 95MG</i>	2	
<i>RYTARY CAP 145MG</i>	2	
<i>RYTARY CAP 195MG</i>	2	
<i>RYTARY CAP 245MG</i>	2	
<i>SINEMET TAB 10-100MG</i>	3	
<i>SINEMET TAB 25-100MG</i>	3	
<i>STALEVO 50 TAB</i>	3	
<i>STALEVO 75 TAB</i>	3	
<i>STALEVO 100 TAB</i>	3	
<i>STALEVO 125 TAB</i>	3	
<i>STALEVO 150 TAB</i>	3	
<i>STALEVO 200 TAB</i>	3	
<b>ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS</b>		
<i>AZILECT TAB 0.5MG</i>	3	
<i>AZILECT TAB 1MG</i>	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	2	
<i>rasagiline mesylate tab 1 mg (base equiv)</i>	1	
<i>selegiline hcl cap 5 mg</i>	1	
<i>selegiline hcl tab 5 mg</i>	1	
XADAGO TAB 50MG	NC	
XADAGO TAB 100MG	NC	
ZELAPAR TAB 1.25MG	3	

## **ANTIPSYCHOTICS/ANTIMANIC AGENTS**

### **ANTIMANIC AGENTS**

<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	
LITHOBID TAB 300MG CR	2	

### **ANTIPSYCHOTICS - MISC.**

CAPLYTA CAP 10.5MG	3	PA; PV
CAPLYTA CAP 21MG	3	PA; PV
CAPLYTA CAP 42MG	3	PA; PV
EQUETRO CAP 100MG	3	PV
EQUETRO CAP 200MG	3	PV
EQUETRO CAP 300MG	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	
LATUDA TAB 20MG	NC	
LATUDA TAB 40MG	NC	
LATUDA TAB 60MG	NC	
LATUDA TAB 80MG	NC	
LATUDA TAB 120MG	NC	
<i>lurasidone hcl tab 20 mg</i>	2	PA; PV
<i>lurasidone hcl tab 40 mg</i>	2	PA; PV
<i>lurasidone hcl tab 60 mg</i>	2	PA; PV
<i>lurasidone hcl tab 80 mg</i>	2	PA; PV
<i>lurasidone hcl tab 120 mg</i>	2	PA; PV
NUPLAZID CAP 34MG	6	SP, PA, QL
NUPLAZID TAB 10MG	6	SP, PA, QL
VRAYLAR CAP 1.5-3MG	2	PA; PV
VRAYLAR CAP 1.5MG	2	PA; PV
VRAYLAR CAP 3MG	2	PA; PV



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
VRAYLAR CAP 4.5MG	2	PA; PV
VRAYLAR CAP 6MG	2	PA; PV
<i>ziprasidone hcl cap 20 mg</i>	1	PV
<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
<i>ziprasidone mesylate for inj 20 mg (base equivalent)</i>	1	

### **BENZISOXAZOLES**

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	
INVEGA HAFYE INJ 1092MG	3	
INVEGA HAFYE INJ 1560MG	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	
<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	2	
PERSERIS INJ 120MG	2	
RISPERDAL INJ 12.5MG	3	PV
RISPERDAL INJ 25MG	3	PV
RISPERDAL INJ 37.5MG	3	PV
RISPERDAL INJ 50MG	3	PV
RISPERDAL SOL 1MG/ML	3	PV
RISPERDAL TAB 0.5MG	3	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
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>	2	PV
<i>risperidone orally disintegrating tab 2 mg</i>	1	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 0.25 mg</i>	1	PV
<i>risperidone tab 1 mg</i>	1	PV
<i>risperidone tab 2 mg</i>	1	PV
<i>risperidone tab 3 mg</i>	1	PV
<i>risperidone tab 4 mg</i>	1	PV
UZEDY INJ 50MG	NC	
UZEDY INJ 75MG	NC	
UZEDY INJ 100MG	NC	
UZEDY INJ 125MG	NC	
UZEDY INJ 150MG	NC	
UZEDY INJ 200MG	NC	
UZEDY INJ 250MG	NC	
<b>BUTYROPHENONES</b>		
HALDOL DECAN INJ 50MG/ML	3	PV
HALDOL DECAN INJ 100MG/ML	3	PV
<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
<i>haloperidol tab 20 mg</i>	1	PV
<b>DIBENZAPINES</b>		
ADASUVE INH 10MG	3	
<i>asenapine maleate sl tab 2.5 mg (base equiv)</i>	2	PA; PV
<i>asenapine maleate sl tab 5 mg (base equiv)</i>	2	PA; PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>asenapine maleate sl tab 10 mg (base equiv)</i>	1	PA; PV
<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>	2	PV
<i>clozapine orally disintegrating tab 200 mg</i>	1	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>	1	PV
CLOZARIL TAB 25MG	3	PV
CLOZARIL TAB 50MG	3	PV
CLOZARIL TAB 100MG	3	PV
CLOZARIL TAB 200MG	3	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
<i>olanzapine for im inj 10 mg</i>	1	
<i>olanzapine orally disintegrating tab 5 mg</i>	1	PV
<i>olanzapine orally disintegrating tab 10 mg</i>	1	PV
<i>olanzapine orally disintegrating tab 15 mg</i>	1	PV
<i>olanzapine orally disintegrating tab 20 mg</i>	1	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>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 150 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>	1	PV
<i>quetiapine fumarate tab er 24hr 150 mg</i>	1	PV
<i>quetiapine fumarate tab er 24hr 200 mg</i>	1	PV
<i>quetiapine fumarate tab er 24hr 300 mg</i>	1	PV
<i>quetiapine fumarate tab er 24hr 400 mg</i>	1	PV
SAPHRIS SUB 2.5MG	3	PA; PV
SAPHRIS SUB 5MG	3	PA; PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
SAPHRIS SUB 10MG	3	PA; PV
SECUADO DIS 3.8MG	NC	
SECUADO DIS 5.7MG	NC	
SECUADO DIS 7.6MG	NC	
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	
VERSACLOZ SUS 50MG/ML	3	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

**DIHYDROINDOLONES**

<i>molindone hcl tab 5 mg</i>	1	PV
<i>molindone hcl tab 10 mg</i>	1	PV
<i>molindone hcl tab 25 mg</i>	1	PV

**PHENOTHIAZINES**

<i>chlorpromazine hcl inj 25 mg/ml</i>	1	
<i>chlorpromazine hcl inj 50 mg/2ml</i>	2	
<i>chlorpromazine hcl tab 10 mg</i>	1	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>	1	PV
<i>compro sup 25mg</i>	2	
<i>fluphenazine decanoate inj 25 mg/ml</i>	1	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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>	1	PV
<i>fluphenazine hcl tab 5 mg</i>	2	PV
<i>fluphenazine hcl tab 10 mg</i>	2	PV
<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>prochlorperazine edisylate inj 10 mg/2ml</i>	2	
<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>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>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

### **QUINOLINONE DERIVATIVES**

ABILIFY ASIM INJ 720MG	NC	
ABILIFY ASIM INJ 960MG	NC	
ABILIFY MAIN INJ 300MG	2	PV
ABILIFY MAIN INJ 400MG	2	PV
ABILIFY MYCI TAB 2MG MANT	NC	
ABILIFY MYCI TAB 2MG STRT	NC	
ABILIFY MYCI TAB 5MG MANT	NC	
ABILIFY MYCI TAB 5MG STRT	NC	
ABILIFY MYCI TAB 10MG MNT	NC	
ABILIFY MYCI TAB 10MG STR	NC	
ABILIFY MYCI TAB 15MG MNT	NC	
ABILIFY MYCI TAB 15MG STR	NC	
ABILIFY MYCI TAB 20MG MNT	NC	
ABILIFY MYCI TAB 20MG STR	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ABILIFY MYCI TAB 30MG MNT	NC	
ABILIFY MYCI TAB 30MG STR	NC	
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>	2	PV
<i>aripiprazole tab 2 mg</i>	1	PV
<i>aripiprazole tab 5 mg</i>	1	PV
<i>aripiprazole tab 10 mg</i>	1	PV
<i>aripiprazole tab 15 mg</i>	1	PV
<i>aripiprazole tab 20 mg</i>	1	PV
<i>aripiprazole tab 30 mg</i>	1	PV
ARISTADA INJ 441MG/1.	3	PV
ARISTADA INJ 662MG/2	3	PV
ARISTADA INJ 882MG/3	3	PV
ARISTADA INJ 1064MG	3	PV
ARISTADA INJ INITIO	3	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
<b>THIOXANTHENES</b>		
<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>	1	PV
<b>ANTISEPTICS &amp; DISINFECTANTS</b>		
<b>ANTISEPTICS &amp; DISINFECTANTS</b>		
FORMALDEHYDE SOL 37%	3	
<i>formaldehyde solution 10%</i>	1	
GLUTARALDEHY SOL 25%	3	
<i>hydrogen peroxide soln 30%</i>	1	
<b>CHLORINE ANTISEPTICS</b>		
ANASEPT SPR	NC	OTC
BENZALKONIUM SOL 50%	3	
BENZALKONIUM SOL NF	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
CHLORHEX GLU SOL 20%	3	
<b>IODINE ANTISEPTICS</b>		
IODINE TIN 2%	3	
LUGOLS SOL IODINE	3	
<b>ANTIVIRALS</b>		
<b>ANTIRETROVIRALS</b>		
<i>abacavir sulfate soln 20 mg/ml (base equiv)</i>	1	SP, QL
<i>abacavir sulfate tab 300 mg (base equiv)</i>	1	SP, QL
<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	1	SP, QL
APRETUDE SUS 600MG ER	NC	
APTIVUS CAP 250MG	NC	
APTIVUS SOL	NC	
<i>atazanavir sulfate cap 150 mg (base equiv)</i>	1	SP, QL
<i>atazanavir sulfate cap 200 mg (base equiv)</i>	1	SP, QL
<i>atazanavir sulfate cap 300 mg (base equiv)</i>	1	SP, QL
ATRIPLA TAB	NC	
BIKTARVY TAB	2	SP, QL
CABENUVA SUS 400-600	NC	
CABENUVA SUS 600-900	NC	
CIMDUO TAB 300-300	2	SP, PA, QL
COMBIVIR TAB 150-300	2	SP, QL
COMPLERA TAB	NC	
DELSTRIGO TAB	NC	
DESCOVY TAB 120-15MG	2	SP, QL; PV
DESCOVY TAB 200/25MG	2	SP, QL; PV
DOVATO TAB 50-300MG	2	SP, QL
EDURANT TAB 25MG	2	SP, QL
<i>efavirenz cap 50 mg</i>	1	SP, QL
<i>efavirenz cap 200 mg</i>	1	SP, QL
<i>efavirenz tab 600 mg</i>	1	SP, QL
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	1	SP, QL
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	1	SP, QL
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	1	SP, QL
<i>emtricitabine caps 200 mg</i>	1	SP, QL
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>	1	SP, QL
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	1	SP, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	1	SP, QL
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	0	SP, QL; ACA, PV
EMTRIVA CAP 200MG	2	SP, QL
EMTRIVA SOL 10MG/ML	2	SP, QL
EPIVIR SOL 10MG/ML	2	SP, QL
EPIVIR TAB 150MG	2	SP, QL
EPIVIR TAB 300MG	2	SP, QL
EPZICOM TAB 600-300	2	SP, QL
<i>etravirine tab 100 mg</i>	1	SP, QL
<i>etravirine tab 200 mg</i>	1	SP, QL
EVOTAZ TAB 300-150	2	SP, QL
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	1	SP, QL
FUZEON INJ 90MG	5	SP, PA, QL
GENVOYA TAB	2	SP, QL
INTELENCE TAB 25MG	2	SP, QL
INTELENCE TAB 100MG	2	SP, QL
INTELENCE TAB 200MG	2	SP, QL
INVIRASE TAB 500MG	NC	
ISENTRESS CHW 25MG	2	SP, QL
ISENTRESS CHW 100MG	2	SP, QL
ISENTRESS HD TAB 600MG	2	SP, QL
ISENTRESS POW 100MG	2	SP, QL
ISENTRESS TAB 400MG	2	SP, QL
JULUCA TAB 50-25MG	3	SP, QL
KALETRA SOL	3	SP, QL
KALETRA TAB 100-25MG	3	SP, QL
KALETRA TAB 200-50MG	3	SP, QL
<i>lamivudine oral soln 10 mg/ml</i>	1	SP, QL
<i>lamivudine tab 150 mg</i>	1	SP, QL
<i>lamivudine tab 300 mg</i>	1	SP, QL
<i>lamivudine-zidovudine tab 150-300 mg</i>	1	SP, QL
LEXIVA SUS 50MG/ML	NC	
LEXIVA TAB 700MG	NC	
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	1	SP, QL
<i>lopinavir-ritonavir tab 100-25 mg</i>	1	SP, QL
<i>lopinavir-ritonavir tab 200-50 mg</i>	1	SP, QL
<i>maraviroc tab 150 mg</i>	1	SP, QL
<i>maraviroc tab 300 mg</i>	1	SP, QL
<i>nevirapine susp 50 mg/5ml</i>	1	SP, QL
<i>nevirapine tab 200 mg</i>	1	SP, QL



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>nevirapine tab er 24hr 100 mg</i>	1	SP, QL
<i>nevirapine tab er 24hr 400 mg</i>	1	SP, QL
NORVIR POW 100MG	2	SP, QL
NORVIR SOL 80MG/ML	2	SP, QL
NORVIR TAB 100MG	2	SP, QL
ODEFSEY TAB	2	SP, QL
PIFELTRO TAB 100MG	NC	
PREZCOBIX TAB 800-150	2	SP, QL
PREZISTA SUS 100MG/ML	2	SP, QL
PREZISTA TAB 75MG	2	SP, QL
PREZISTA TAB 150MG	2	SP, QL
PREZISTA TAB 600MG	2	SP, QL
PREZISTA TAB 800MG	2	SP, QL
RETROVIR CAP 100MG	2	SP, QL
RETROVIR INJ 10MG/ML	2	SP, QL
RETROVIR SYP 50MG/5ML	2	SP, QL
REYATAZ CAP 200MG	3	SP, QL
REYATAZ CAP 300MG	3	SP, QL
REYATAZ POW 50MG	3	SP, QL
<i>ritonavir tab 100 mg</i>	1	SP, QL
RUKOBIA TAB 600MG ER	6	SP, QL
SELZENTRY SOL 20MG/ML	NC	
SELZENTRY TAB 25MG	NC	
SELZENTRY TAB 75MG	NC	
SELZENTRY TAB 150MG	NC	
SELZENTRY TAB 300MG	NC	
STRIBILD TAB	NC	
SUNLENCA INJ	NC	
SUNLENCA TAB 300MG	NC	
SUSTIVA CAP 50MG	2	SP, QL
SUSTIVA CAP 200MG	2	SP, QL
SYMFI LO TAB	3	SP, QL
SYMFI TAB	3	SP, QL
SYMTUZA TAB	2	SP, QL
<i>tenofovir disoproxil fumarate tab 300 mg</i>	1	SP, QL
TIVICAY PD TAB 5MG	2	SP, QL
TIVICAY TAB 10MG	2	SP, QL
TIVICAY TAB 25MG	2	SP, QL
TIVICAY TAB 50MG	2	SP, QL
TRIUMEQ PD TAB	2	SP, QL
TRIUMEQ TAB	2	SP, QL
TRIZIVIR TAB	2	SP, QL
TROGARZO INJ 150MG/ML	6	SP
TRUVADA TAB 100-150	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
TRUVADA TAB 133-200	NC	
TRUVADA TAB 167-250	NC	
TRUVADA TAB 200-300	NC	
TYBOST TAB 150MG	2	SP, QL
VIRACEPT TAB 250MG	NC	
VIRACEPT TAB 625MG	NC	
VIREAD POW 40MG/GM	3	SP, QL
VIREAD TAB 150MG	3	SP, QL
VIREAD TAB 200MG	3	SP, QL
VIREAD TAB 250MG	3	SP, QL
VIREAD TAB 300MG	3	SP, QL
ZIAGEN SOL 20MG/ML	2	SP, QL
ZIAGEN TAB 300MG	2	SP, QL
<i>zidovudine cap 100 mg</i>	1	SP, QL
<i>zidovudine syrup 10 mg/ml</i>	1	SP, QL
<i>zidovudine tab 300 mg</i>	1	SP, QL

### **ANTIVIRAL COMBINATIONS**

PAXLOVID TAB 150-100	3	QL; \$0 Cost Share
PAXLOVID TAB 300-100	3	QL; \$0 Cost Share

### **CMV AGENTS**

<i>cidofovir iv inj 75 mg/ml</i>	2	
<i>foscarnet sodium inj 6000 mg/250ml (24 mg/ml)</i>	1	
FOSCAVIR INJ 24MG/ML	3	
<i>ganciclovir sodium for inj 500 mg</i>	1	
LIVTENCITY TAB 200MG	6	SP, QL
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	QL
<i>valganciclovir hcl tab 450 mg (base equivalent)</i>	1	QL

### **HEPATITIS AGENTS**

<i>adefovir dipivoxil tab 10 mg</i>	4	SP
BARACLUDE SOL	6	SP, QL
BARACLUDE TAB 0.5MG	NC	
BARACLUDE TAB 1MG	NC	
<i>entecavir tab 0.5 mg</i>	4	SP, QL
<i>entecavir tab 1 mg</i>	4	SP, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
EPCLUSA PAK 150-37.5	5	SP, PA, QL; for genotypes 1, 2, 3, 4, 5 and 6
EPCLUSA PAK 200-50MG	5	SP, PA, QL; for genotypes 1, 2, 3, 4, 5 and 6
EPCLUSA TAB 200-50MG	5	SP, PA, QL; for genotypes 1, 2, 3, 4, 5 and 6
EPCLUSA TAB 400-100	5	SP, PA, QL; for genotypes 1, 2, 3, 4, 5 and 6
EPIVIR HBV SOL 5MG/ML	NC	
EPIVIR HBV TAB 100MG	NC	
HARVONI PAK	5	SP, PA, QL; only for genotypes 1, 4, 5 and 6
HARVONI PAK 45-200MG	5	SP, PA, QL; only for genotypes 1, 4, 5 and 6
HARVONI TAB 45-200MG	5	SP, PA, QL; only for genotypes 1, 4, 5 and 6
HARVONI TAB 90-400MG	5	SP, PA, QL; only for genotypes 1, 4, 5 and 6
HEPSERA TAB 10MG	NC	
<i>lamivudine tab 100 mg (hbv)</i>	4	SP
LEDIP-SOFOSB TAB 90-400MG	NC	
MAVYRET TAB 100-40MG	NC	
PEGASYS INJ	NC	
PEGASYS INJ 180MCG/M	NC	
PEGASYS INJ PROCLICK	NC	
PEGASYS KIT 180MCG/M	NC	
<i>ribavirin cap 200 mg</i>	4	SP, PA, QL
<i>ribavirin tab 200 mg</i>	4	SP, PA, QL
SOFOS/VELPAT TAB 400-100	NC	
SOVALDI PAK 150MG	6	SP, PA, QL
SOVALDI PAK 200MG	6	SP, PA, QL
SOVALDI TAB 200MG	6	SP, PA, QL
SOVALDI TAB 400MG	6	SP, PA, QL
VEMLIDY TAB 25MG	NC	
VIEKIRA PAK TAB	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
VOSEVI TAB	5	SP, PA, QL; 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	
<b>HERPES AGENTS</b>		
<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	NC	
<i>valacyclovir hcl tab 1 gm</i>	1	
<i>valacyclovir hcl tab 500 mg</i>	1	
VALTRES TAB 1GM	NC	
VALTRES TAB 500MG	NC	
ZOVIRAX SUS 200/5ML	3	
<b>INFLUENZA AGENTS</b>		
<i>oseltamivir phosphate cap 30 mg (base equiv)</i>	2	PA, QL
<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
XOFLUZA TAB 20MG	NC	
XOFLUZA TAB 40MG	NC	
<b>MISC. ANTIVIRALS</b>		
LAGEVRIO CAP 200MG	3	\$0 Cost Share

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
REMDESIVIR INJ 100MG	3	PA, QL
TEMBEXA SUS 10MG/ML	3	
TEMBEXA TAB 100MG	3	
TPOXX CAP 200MG	3	
TPOXX INJ	3	
VEKLURY INJ 100MG	3	PA, QL

## **BETA BLOCKERS**

### **ALPHA-BETA BLOCKERS**

<i>carvedilol phosphate cap er 24hr 10 mg</i>	2	PV
<i>carvedilol phosphate cap er 24hr 20 mg</i>	2	PV
<i>carvedilol phosphate cap er 24hr 40 mg</i>	2	PV
<i>carvedilol phosphate cap er 24hr 80 mg</i>	2	PV
<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	NC	
COREG CR CAP 20MG	NC	
COREG CR CAP 40MG	NC	
COREG CR CAP 80MG	NC	
COREG TAB 3.125MG	3	PV
COREG TAB 6.25MG	3	PV
COREG TAB 12.5MG	3	PV
COREG TAB 25MG	3	PV
<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
LABETALOL INJ 20/4ML	3	
LABETALOL INJ NAACL	3	

### **BETA BLOCKERS CARDIO-SELECTIVE**

<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 DS SOL 2000MG	3	
BREVIBLOC INJ 10MG/ML	3	
BREVIBLOC PM SOL 2500MG	3	
BREVIBLOC SOL	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
BREVIBLOC SOL 10MG/ML	3	
BREVIBLOC SOL 2000MG	3	
BREVIBLOC SOL 2500MG	3	
BYSTOLIC TAB 2.5MG	NC	
BYSTOLIC TAB 5MG	NC	
BYSTOLIC TAB 10MG	NC	
BYSTOLIC TAB 20MG	NC	
<i>esmolol hcl inj 100 mg/10ml</i>	1	
ESMOLOL HCL SOL 2000/100	3	
ESMOLOL HCL SOL 2500/250	3	
<i>esmolol hcl-sodium chloride iv soln 2000 mg/100ml</i>	1	
<i>esmolol hcl-sodium chloride iv soln 2500 mg/250ml</i>	1	
KAPSPARGO CAP 25MG	NC	
KAPSPARGO CAP 50MG	NC	
KAPSPARGO CAP 100MG	NC	
KAPSPARGO CAP 200MG	NC	
LOPRESSOR TAB 50MG	3	PV
LOPRESSOR TAB 100MG	3	PV
<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 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>nebivolol hcl tab 2.5 mg (base equivalent)</i>	1	PV
<i>nebivolol hcl tab 5 mg (base equivalent)</i>	1	PV
<i>nebivolol hcl tab 10 mg (base equivalent)</i>	1	PV
<i>nebivolol hcl tab 20 mg (base equivalent)</i>	1	PV
TENORMIN TAB 25MG	3	PV
TENORMIN TAB 50MG	3	PV
TENORMIN TAB 100MG	3	PV
TOPROL XL TAB 25MG	NC	
TOPROL XL TAB 50MG	NC	
TOPROL XL TAB 100MG	NC	
TOPROL XL TAB 200MG	NC	

Drug Name	Drug Tier	Requirements/Limits
<b>BETA BLOCKERS NON-SELECTIVE</b>		
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	
CORGARD TAB 20MG	3	PV
CORGARD TAB 40MG	3	PV
CORGARD TAB 80MG	3	PV
HEMANGEOL SOL 4.28/ML	3	
INDERAL LA CAP 60MG	NC	
INDERAL LA CAP 80MG	NC	
INDERAL LA CAP 120MG	NC	
INDERAL LA CAP 160MG	NC	
INDERAL XL CAP 80MG	NC	
INDERAL XL CAP 120MG	NC	
INNOPRAN XL CAP 80MG	NC	
INNOPRAN XL CAP 120MG	NC	
<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
<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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
SOTYLIZE SOL 5MG/ML	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

## **CALCIUM CHANNEL BLOCKERS**

### **CALCIUM CHANNEL BLOCKER COMBINATIONS**

CONSENSI TAB 2.5-200	NC	
CONSENSI TAB 5-200MG	NC	
CONSENSI TAB 10-200MG	NC	

### **CALCIUM CHANNEL BLOCKERS**

<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
CALAN SR TAB 120MG	3	PV
CALAN SR TAB 180MG	3	PV
CALAN SR TAB 240MG	3	PV
CARDENE IV INJ 40/200ML	3	
CARDENE IV SOL 20/200ML	3	
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	
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
CLEVIPREX EMU 0.5MG/ML	3	
CONJUPRI TAB 2.5MG	NC	
<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 hcl cap er 12hr 60 mg</i>	1	PV



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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 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
<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
<i>diltiazem hcl tab er 24hr 180 mg</i>	NC	
<i>diltiazem hcl tab er 24hr 240 mg</i>	NC	
<i>diltiazem hcl tab er 24hr 300 mg</i>	NC	
<i>diltiazem hcl tab er 24hr 360 mg</i>	NC	
<i>diltiazem hcl tab er 24hr 420 mg</i>	NC	
DILTIAZEM INJ 100MG	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

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>isradipine cap 2.5 mg</i>	1	PV
<i>isradipine cap 5 mg</i>	1	PV
KATERZIA SUS 1MG/ML	NC	
<i>levamlodipine maleate tab 2.5 mg</i>	1	
<i>levamlodipine maleate tab 5 mg</i>	1	
<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>nicardipine hcl cap 20 mg</i>	1	PV
<i>nicardipine hcl cap 30 mg</i>	2	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>	1	PV
<i>nisoldipine tab er 24hr 30 mg</i>	1	PV
<i>nisoldipine tab er 24hr 34 mg</i>	2	PV
<i>nisoldipine tab er 24hr 40 mg</i>	1	PV
NORLIQVA SOL 1MG/ML	NC	
NORVASC TAB 2.5MG	NC	
NORVASC TAB 5MG	NC	
NORVASC TAB 10MG	NC	
NYMALIZE SOL	3	
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
<i>taztia xt cap 120mg/24</i>	1	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>taztia xt cap 180mg/24</i>	1	PV
<i>taztia xt cap 240mg/24</i>	1	PV
<i>taztia xt cap 300mg er</i>	1	PV
<i>taztia xt cap 360mg/24</i>	1	PV
<i>tiadylt cap 120mg/24</i>	1	PV
<i>tiadylt cap 180mg/24</i>	1	PV
<i>tiadylt cap 240mg/24</i>	1	PV
<i>tiadylt cap 300mg/24</i>	1	PV
<i>tiadylt cap 360mg/24</i>	1	PV
<i>tiadylt cap 420mg/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>	2	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
<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

## **CARDIOTONICS**

### **CARDIAC GLYCOSIDES**

<i>digitek tab 0.25mg</i>	1	
<i>digitek tab 0.125mg</i>	1	
<i>digoxin inj 0.25 mg/ml</i>	1	
<i>digoxin oral soln 0.05 mg/ml</i>	1	
<i>digoxin tab 62.5 mcg (0.0625 mg)</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>digoxin tab 125 mcg (0.125 mg)</i>	1	
<i>digoxin tab 250 mcg (0.25 mg)</i>	1	
LANOXIN INJ 0.5/2ML	3	
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	3	

### **INOTROPES**

<i>dobutamine hcl inj 12.5 mg/ml</i>	1	
<i>dopamine hcl inj 40 mg/ml</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 equivalent)</i>	1	
<i>milrinone lactate iv soln 20 mg/20ml (base equivalent)</i>	1	
<i>milrinone lactate iv soln 50 mg/50ml (base equivalent)</i>	1	

### **CARDIOVASCULAR AGENTS - MISC.**

#### **CARDIAC MYOSIN INHIBITORS**

CAMZYOS CAP 2.5MG	6	SP, PA, QL
CAMZYOS CAP 5MG	6	SP, PA, QL
CAMZYOS CAP 10MG	6	SP, PA, QL
CAMZYOS CAP 15MG	6	SP, PA, QL

#### **CARDIOPLEGIC SOLUTIONS**

ADENOCAINE INJ 40ML	3	
CARDIOPL IND SOL 4:1	3	
CARDIOPL IND SOL 8:1	3	
CARDIOPL IND SOL LOW DEX8	3	
CARDIOPL IND SOL NON-EN 8	3	
CARDIOPL IND SOL PLASMA 4	3	
CARDIOPL IND SOL PLS/TROM	3	
CARDIOPL MN SOL 8:1	3	
CARDIOPL MN SOL PLS/TROM	3	
CARDIOPL REP SOL 4:1	3	
CARDIOPLE MN SOL LOW TROM	3	
CARDIOPLEGI SOL DEL NIDO	3	
CARDIOPLEGIA SOL MAIN 4:1	3	
CARDIOPLEGIC SOL	3	
<i>cardioplegic soln</i>	1	
MICROPLEGIA INJ MSA/MSG	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PLEGISOL SOL	3	
<b>CARDIOVASCULAR AGENTS MISC. - COMBINATIONS</b>		
<i>amlodipine besylate-atorvastatin calcium tab 2.5-10 mg</i>	1	PV
<i>amlodipine besylate-atorvastatin calcium tab 2.5-20 mg</i>	2	PV
<i>amlodipine besylate-atorvastatin calcium tab 2.5-40 mg</i>	1	PV
<i>amlodipine besylate-atorvastatin calcium tab 5-10 mg</i>	1	PV
<i>amlodipine besylate-atorvastatin calcium tab 5-20 mg</i>	2	PV
<i>amlodipine besylate-atorvastatin calcium tab 5-40 mg</i>	2	PV
<i>amlodipine besylate-atorvastatin calcium tab 5-80 mg</i>	1	PV
<i>amlodipine besylate-atorvastatin calcium tab 10-10 mg</i>	1	PV
<i>amlodipine besylate-atorvastatin calcium tab 10-20 mg</i>	2	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
BIDIL TAB	2	
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
ENTRESTO TAB 24-26MG	2	PA; PV
ENTRESTO TAB 49-51MG	2	PA; PV
ENTRESTO TAB 97-103MG	2	PA; PV
<i>isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg</i>	2	
<b>IMPOTENCE AGENTS</b>		
CIALIS TAB 2.5MG	NC	
CIALIS TAB 5MG	NC	
CIALIS TAB 10MG	NC	
CIALIS TAB 20MG	NC	
<i>tadalafil tab 2.5 mg</i>	1	ST, QL
<i>tadalafil tab 5 mg</i>	1	ST, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>PROSTAGLANDIN VASODILATORS</b>		
<i>epoprostenol sodium for inj 0.5 mg</i>	4	SP, PA
<i>epoprostenol sodium for inj 1.5 mg</i>	4	SP, PA
FLOLAN INJ 0.5MG	6	SP, PA
FLOLAN INJ 1.5MG	6	SP, PA
ORENITRAM TAB 0.25MG	5	SP, PA
ORENITRAM TAB 0.125MG	5	SP, PA
ORENITRAM TAB 1MG	5	SP, PA
ORENITRAM TAB 2.5MG	5	SP, PA
ORENITRAM TAB 5MG	5	SP, PA
ORENITRAM TAB MONTH 1	5	SP, PA
ORENITRAM TAB MONTH 2	5	SP, PA
ORENITRAM TAB MONTH 3	5	SP, PA
REMODULIN INJ 1MG/ML	NC	
REMODULIN INJ 2.5MG/ML	NC	
REMODULIN INJ 5MG/ML	NC	
REMODULIN INJ 10MG/ML	NC	
<i>treprostinil inj soln 20 mg/20ml (1 mg/ml)</i>	4	SP, PA
<i>treprostinil inj soln 50 mg/20ml (2.5 mg/ml)</i>	4	SP, PA
<i>treprostinil inj soln 100 mg/20ml (5 mg/ml)</i>	4	SP, PA
<i>treprostinil inj soln 200 mg/20ml (10 mg/ml)</i>	4	SP, PA
TYVASO DPI POW 16-32-48	NC	
TYVASO DPI POW 16-32MCG	NC	
TYVASO DPI POW 16MCG	NC	
TYVASO DPI POW 32-48MCG	NC	
TYVASO DPI POW 32MCG	NC	
TYVASO DPI POW 48MCG	NC	
TYVASO DPI POW 64MCG	NC	
TYVASO REFIL SOL 0.6MG/ML	6	SP, PA, QL
TYVASO SOL 0.6MG/ML	6	SP, PA, QL
TYVASO START SOL 0.6MG/ML	6	SP, PA, QL
VELETRI INJ 0.5MG	6	SP, PA
VELETRI INJ 1.5MG	6	SP, PA
VENTAVIS SOL 10MCG/ML	6	SP, PA, QL
VENTAVIS SOL 20MCG/ML	6	SP, PA, QL
<b>PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS</b>		
<i>ambrisentan tab 5 mg</i>	4	SP, PA, QL
<i>ambrisentan tab 10 mg</i>	4	SP, PA, QL
<i>bosentan tab 62.5 mg</i>	4	SP, PA, QL
<i>bosentan tab 125 mg</i>	4	SP, PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
LETAIRIS TAB 5MG	NC	
LETAIRIS TAB 10MG	NC	
OPSUMIT TAB 10MG	5	SP, PA, QL
TRACLEER TAB 32MG	NC	
TRACLEER TAB 62.5MG	NC	
TRACLEER TAB 125MG	NC	
<b>PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS</b>		
ADCIRCA TAB 20MG	NC	
<i>alyq tab 20mg</i>	4	SP, PA, QL
LIQREV SUS 10MG/ML	NC	
REVATIO INJ	NC	
REVATIO SUS 10MG/ML	NC	
REVATIO TAB 20MG	NC	
<i>sildenafil citrate for suspension 10 mg/ml</i>	4	SP, PA, QL
<i>sildenafil citrate iv soln 10 mg/12.5ml (base equivalent)</i>	4	SP, PA
<i>sildenafil citrate tab 20 mg</i>	4	SP, PA, QL
<i>tadalafil tab 20 mg (pah)</i>	4	SP, PA, QL
TADLIQ SUS 20MG/5ML	NC	
<b>PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST</b>		
UPTRAVI INJ 1800MCG	5	SP, PA, QL
UPTRAVI PACK TAB 200/800	5	SP, PA, QL
UPTRAVI TAB 200MCG	5	SP, PA, QL
UPTRAVI TAB 400MCG	5	SP, PA, QL
UPTRAVI TAB 600MCG	5	SP, PA, QL
UPTRAVI TAB 800MCG	5	SP, PA, QL
UPTRAVI TAB 1000MCG	5	SP, PA, QL
UPTRAVI TAB 1200MCG	5	SP, PA, QL
UPTRAVI TAB 1400MCG	5	SP, PA, QL
UPTRAVI TAB 1600MCG	5	SP, PA, QL
<b>PULMONARY HYPERTENSION - SOL GUANYLATE CYCLASE STIMULATOR</b>		
ADEMPAS TAB 0.5MG	6	SP, PA, QL
ADEMPAS TAB 1.5MG	5	SP, PA, QL
ADEMPAS TAB 1MG	5	SP, PA, QL
ADEMPAS TAB 2.5MG	5	SP, PA, QL
ADEMPAS TAB 2MG	5	SP, PA, QL
<b>SINUS NODE INHIBITORS</b>		
CORLANOR SOL 5MG/5ML	3	PA
CORLANOR TAB 5MG	2	PA
CORLANOR TAB 7.5MG	2	PA
<b>TRANSTHYRETIN STABILIZERS</b>		
VYNDAMAX CAP 61MG	6	SP, PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
VYNDAQEL CAP 20MG	NC	
<b>VASOACTIVE SOLUBLE GUANYLATE CYCLASE STIMULATOR (SGC)</b>		
VERQUVO TAB 2.5MG	2	PA
VERQUVO TAB 5MG	2	PA
VERQUVO TAB 10MG	2	PA
<b>CEPHALOSPORINS</b>		
<b>CEPHALOSPORIN COMBINATIONS</b>		
AVYCAZ INJ 2-0.5GM	3	
ZERBAXA INJ 1.5GM	3	
<b>CEPHALOSPORINS - 1ST GENERATION</b>		
<i>cefadroxil cap 500 mg</i>	1	
<i>cefadroxil for susp 250 mg/5ml</i>	1	
<i>cefadroxil for susp 500 mg/5ml</i>	1	
<i>cefadroxil tab 1 gm</i>	2	
CEFAZOL/DEX SOL 1GM	3	
CEFAZOL/DEX SOL 2GM	3	
CEFAZOLIN INJ 1GM/50ML	3	
CEFAZOLIN INJ 2GM	3	
CEFAZOLIN INJ 3GM	3	
CEFAZOLIN INJ 100GM	3	
CEFAZOLIN INJ 300GM	3	
<i>cefazolin sodium for inj 1 gm</i>	1	
<i>cefazolin sodium for inj 2 gm</i>	1	
<i>cefazolin sodium for inj 10 gm</i>	2	
<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>	1	
<i>cephalexin tab 500 mg</i>	2	
<b>CEPHALOSPORINS - 2ND GENERATION</b>		
<i>cefaclor cap 250 mg</i>	1	
<i>cefaclor cap 500 mg</i>	2	
CEFACLOR ER TAB 500MG	3	
<i>cefaclor for susp 125 mg/5ml</i>	1	
<i>cefaclor for susp 250 mg/5ml</i>	1	
<i>cefaclor for susp 375 mg/5ml</i>	1	
<i>cefotetan disodium for inj 1 gm</i>	1	
<i>cefotetan disodium for inj 2 gm</i>	1	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
CEFOXITIN INJ 1GM	3	
CEFOXITIN INJ 2GM	3	
<i>cefoxitin sodium for iv soln 1 gm</i>	1	
<i>cefoxitin sodium for iv soln 2 gm</i>	1	
<i>cefoxitin sodium for iv soln 10 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	
<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 750 mg</i>	1	
<i>cefuroxime sodium for iv soln 1.5 gm</i>	1	
<b>CEPHALOSPORINS - 3RD GENERATION</b>		
<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>cefixime cap 400 mg</i>	2	
<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>cefpodoxime proxetil for susp 50 mg/5ml</i>	1	
<i>cefpodoxime proxetil for susp 100 mg/5ml</i>	2	
<i>cefpodoxime proxetil tab 100 mg</i>	1	
<i>cefpodoxime proxetil tab 200 mg</i>	2	
<i>ceftazidime for inj 1 gm</i>	1	
<i>ceftazidime for inj 6 gm</i>	2	
<i>ceftazidime for iv soln 2 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>	2	
<i>ceftriaxone sodium for inj 10 gm</i>	2	
<i>ceftriaxone sodium for inj 250 mg</i>	2	
<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>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>ceftriaxone sodium in dextrose inj 40 mg/ml</i>	1	
SUPRAX CAP 400MG	3	
SUPRAX CHW 100MG	2	
SUPRAX CHW 200MG	2	
SUPRAX SUS 200/5ML	2	
SUPRAX SUS 500/5ML	2	
<i>tazicef inj 1gm</i>	1	
TAZICEF INJ 1GM/50ML	3	
<i>tazicef inj 2gm</i>	1	
<i>tazicef inj 6gm</i>	2	
<b>CEPHALOSPORINS - 4TH GENERATION</b>		
<i>cefepime hcl for inj 1 gm</i>	2	
<i>cefepime hcl for iv soln 2 gm</i>	1	
<i>cefepime hcl for iv soln 2 gm</i>	2	
CEFEPIME INJ 1GM	3	
CEFEPIME INJ 2G/100ML	3	
CEFEPIME/DEX INJ 1GM	3	
CEFEPIME/DEX INJ 2GM	3	
<b>CEPHALOSPORINS - 5TH GENERATION</b>		
TEFLARO INJ 400MG	3	
TEFLARO INJ 600MG	3	
<b>CEPHALOSPORINS - SIDEROPHORES</b>		
FETROJA INJ 1GM	3	
<b>CONTRACEPTIVES</b>		
<b>COMBINATION CONTRACEPTIVES - ORAL</b>		
<i>afirmelle tab 0.1-0.02</i>	0	ACA, PV
<i>altavera tab</i>	0	ACA, PV
<i>alyacen tab 1/35</i>	0	ACA, PV
<i>alyacen tab 7/7/7</i>	0	ACA, PV
<i>amethia tab</i>	0	ACA, PV
<i>amethyst tab 90-20mcg</i>	0	ACA, PV
<i>apri tab</i>	0	ACA, PV
<i>aranelle tab</i>	0	ACA, PV
<i>ashlyna tab</i>	0	ACA, PV
<i>aubra eq tab 0.1-0.02</i>	0	ACA, PV
<i>aubra tab 0.1-0.02</i>	0	ACA, PV
<i>aurovela 24 tab fe 1/20</i>	0	ACA, PV
<i>aurovela fe tab 1.5/30</i>	0	ACA, PV
<i>aurovela fe tab 1/20</i>	0	ACA, PV
<i>aurovela tab 1.5/30</i>	0	ACA, PV
<i>aurovela tab 1/20</i>	0	ACA, PV
<i>aviane tab</i>	0	ACA, PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>ayuna tab</i>	0	ACA, PV
<i>azurette tab</i>	0	ACA, PV
BALCOLTRA TAB 0.1-20	NC	
<i>balziva tab</i>	0	ACA, PV
BEYAZ TAB	NC	
<i>blisovi 24 tab fe 1/20</i>	0	ACA, PV
<i>blisovi fe tab 1.5/30</i>	0	ACA, PV
<i>blisovi fe tab 1/20</i>	0	ACA, PV
<i>briellyn tab</i>	0	ACA, PV
<i>camrese lo tab</i>	0	ACA, PV
<i>camrese tab</i>	0	ACA, PV
<i>charlotte 24 chw fe 1/20</i>	0	ACA, PV
<i>chateal eq tab 0.15/30</i>	0	ACA, PV
<i>chateal tab 0.15/30</i>	0	ACA, PV
<i>cryselle-28 tab 28 tabs</i>	0	ACA, PV
<i>cyred eq tab</i>	0	ACA, PV
<i>cyred tab</i>	0	ACA, PV
<i>dasetta tab 1/35</i>	0	ACA, PV
<i>dasetta tab 7/7/7</i>	0	ACA, PV
<i>daysee tab</i>	0	ACA, PV
<i>delyla tab 0.1-0.02</i>	0	ACA, PV
<i>desogest-eth estrad &amp; eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	0	ACA, PV
<i>desogestrel &amp; ethinyl estradiol tab 0.15 mg-30 mcg</i>	0	ACA, PV
<i>dolishale tab 90-20mcg</i>	0	ACA, PV
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg</i>	0	ACA, PV
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i>	0	ACA, PV
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	0	ACA, PV
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	0	ACA, PV
<i>elinest tab</i>	0	ACA, PV
<i>enpresse-28 tab</i>	0	ACA, PV
<i>enskyce tab</i>	0	ACA, PV
<i>estarylla tab 0.25-35</i>	0	ACA, PV
<i>ethynodiol diacetate &amp; ethinyl estradiol tab 1 mg-35 mcg</i>	0	ACA, PV
<i>ethynodiol diacetate &amp; ethinyl estradiol tab 1 mg-50 mcg</i>	0	ACA, PV
<i>falmina tab</i>	0	ACA, PV
<i>fayosim tab</i>	0	ACA, PV
<i>femynor tab 0.25-35</i>	0	ACA, PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>finzala chw fe 1/20</i>	0	ACA, PV
<i>gemmily cap 1/20</i>	0	ACA, PV
GENERESS FE CHW	3	ACA, PV
<i>hailey 24 tab fe</i>	0	ACA, PV
<i>hailey fe tab 1.5/30</i>	0	ACA, PV
<i>hailey fe tab 1/20</i>	0	ACA, PV
<i>hailey tab 1.5/30</i>	0	ACA, PV
<i>iclevia tab</i>	0	ACA, PV
<i>introvale tab</i>	0	ACA, PV
<i>isibloom tab</i>	0	ACA, PV
<i>jaimiess tab</i>	0	ACA, PV
<i>jasmiel tab 3-0.02mg</i>	0	ACA, PV
<i>jolessa tab</i>	0	ACA, PV
<i>joyeaux tab 0.1-20</i>	0	ACA, PV
<i>juleber tab</i>	0	ACA, PV
<i>junel 1.5/30 tab</i>	0	ACA, PV
<i>junel 1/20 tab</i>	0	ACA, PV
<i>junel fe 24 tab 1/20</i>	0	ACA, PV
<i>junel fe tab 1.5/30</i>	0	ACA, PV
<i>junel fe tab 1/20</i>	0	ACA, PV
<i>kaitlib fe chw</i>	0	ACA, PV
<i>kalliga tab</i>	0	ACA, PV
<i>kariva tab 28 day</i>	0	ACA, PV
<i>kelnor 1/50 tab</i>	0	ACA, PV
<i>kelnor tab 1/35</i>	0	ACA, PV
<i>kurvelo tab 0.15/30</i>	0	ACA, PV
<i>larin 24 tab fe 1/20</i>	0	ACA, PV
<i>larin fe tab 1.5/30</i>	0	ACA, PV
<i>larin fe tab 1/20</i>	0	ACA, PV
<i>larin tab 1.5/30</i>	0	ACA, PV
<i>larin tab 1/20</i>	0	ACA, PV
<i>layolis fe chw</i>	0	ACA, PV
<i>leena tab</i>	0	ACA, PV
<i>lessina tab</i>	0	ACA, PV
<i>levonest tab</i>	0	ACA, PV
<i>levonor-eth est tab 0.15-0.02/0.025/0.03 mg &amp; eth est 0.01 mg</i>	0	ACA, PV
<i>levonorg-eth est tab 0.1-0.02mg(84) &amp; eth est tab 0.01mg(7)</i>	0	ACA, PV
<i>levonorg-eth est tab 0.15-0.03mg(84) &amp; eth est tab 0.01mg(7)</i>	0	ACA, PV
<i>levonorgestrel &amp; ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	0	ACA, PV
<i>levonorgestrel &amp; ethinyl estradiol tab 0.1 mg-20 mcg</i>	0	ACA, PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>levonorgestrel &amp; ethinyl estradiol tab 0.15 mg-30 mcg</i>	0	ACA, PV
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	0	ACA, PV
<i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</i>	0	ACA, PV
<i>levora-28 tab 0.15/30</i>	0	ACA, PV
LO LOESTRIN TAB 1-10-10	0	ACA, PV
<i>lo-zumandimi tab 3-0.02mg</i>	0	ACA, PV
<i>loestrin 21 tab 1.5/30</i>	0	ACA, PV
<i>loestrin fe tab 1.5/30</i>	0	ACA, PV
<i>loestrin fe tab 1/20</i>	0	ACA, PV
<i>loestrin tab 1/20-21</i>	0	ACA, PV
<i>lojaimiess tab</i>	0	ACA, PV
<i>loryna tab 3-0.02mg</i>	0	ACA, PV
LOSEASONIQUE TAB	3	ACA, PV
<i>low-ogestrel tab</i>	0	ACA, PV
<i>lutera tab</i>	0	ACA, PV
<i>marlissa tab 0.15/30</i>	0	ACA, PV
<i>merzee cap 1/20</i>	0	ACA, PV
<i>micrgstin 24 tab fe 1/20</i>	0	ACA, PV
<i>microgestin tab 1.5/30</i>	0	ACA, PV
<i>microgestin tab 1/20</i>	0	ACA, PV
<i>microgestin tab fe1.5/30</i>	0	ACA, PV
<i>microgestin tab fe 1/20</i>	0	ACA, PV
<i>mili tab 0.25/35</i>	0	ACA, PV
MINASTRIN 24 CHW FE	NC	
<i>mono-linyah tab 0.25-35</i>	0	ACA, PV
NATAZIA TAB	0	ACA, PV
<i>necon tab 0.5/35</i>	0	ACA, PV
NEXTSTELLIS TAB 3-14.2MG	0	ACA, PV
<i>nikki tab 3-0.02mg</i>	0	ACA, PV
<i>norethindrone &amp; ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</i>	0	ACA, PV
<i>norethindrone &amp; ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i>	0	ACA, PV
<i>norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg</i>	0	ACA, PV
<i>norethindrone ace &amp; ethinyl estradiol tab 1 mg-20 mcg</i>	0	ACA, PV
<i>norethindrone ace &amp; ethinyl estradiol tab 1.5 mg-30 mcg</i>	0	ACA, PV
<i>norethindrone ace &amp; ethinyl estradiol-fe tab 1 mg-20 mcg</i>	0	ACA, PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>norethindrone ace &amp; ethinyl estradiol-fe tab 1.5 mg-30 mcg</i>	0	ACA, PV
<i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i>	0	PV
<i>norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24)</i>	0	ACA, PV
<i>norgestimate &amp; ethinyl estradiol tab 0.25 mg-35 mcg</i>	0	ACA, PV
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	0	ACA, PV
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	0	ACA, PV
<i>nortrel tab 0.5/35</i>	0	ACA, PV
<i>nortrel tab 1/35</i>	0	ACA, PV
<i>nortrel tab 7/7/7</i>	0	ACA, PV
<i>nylia tab 1/35</i>	0	ACA, PV
<i>nylia tab 7/7/7</i>	0	ACA, PV
<i>nymyo tab 0.25-35</i>	0	ACA, PV
<i>ocella tab 3-0.03mg</i>	0	ACA, PV
ORTHO TRI- TAB CYCLN LO	NC	
<i>philith tab 0.4-35</i>	0	ACA, PV
<i>pimtreea tab</i>	0	ACA, PV
<i>portia-28 tab</i>	0	ACA, PV
<i>reclipsen tab</i>	0	ACA, PV
<i>rivelsa tab</i>	0	PV
SAFYRAL TAB	3	ACA, PV
SEASONIQUE TAB	NC	
<i>setlakin tab</i>	0	ACA, PV
<i>simliya tab 28 day</i>	0	ACA, PV
<i>simpesse tab</i>	0	ACA
<i>sprintec 28 tab 28 day</i>	0	ACA, PV
<i>sronyx tab</i>	0	ACA, PV
<i>syeda tab 3-0.03mg</i>	0	ACA, PV
<i>tarina 24 fe tab</i>	0	ACA, PV
<i>tarina fe tab 1/20</i>	0	ACA, PV
<i>tarina fe tab 1/20 eq</i>	0	ACA, PV
<i>taysofy cap 1/20</i>	0	ACA, PV
TAYTULLA CAP 1MG/20MC	NC	
<i>tilia fe tab</i>	0	ACA, PV
<i>tri femynor tab</i>	0	ACA, PV
<i>tri-estaryll tab</i>	0	ACA, PV
<i>tri-legest tab fe</i>	0	ACA, PV
<i>tri-linyah tab</i>	0	ACA, PV
<i>tri-lo tab estaryll</i>	0	ACA, PV
<i>tri-lo- tab marzia</i>	0	ACA, PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>tri-lo- tab sprintec</i>	0	ACA, PV
<i>tri-lo-mili tab</i>	0	ACA, PV
<i>tri-mili tab</i>	0	ACA, PV
<i>tri-nymyo tab</i>	0	ACA, PV
<i>tri-sprintec tab</i>	0	ACA, PV
<i>tri-vylibra tab</i>	0	ACA, PV
<i>tri-vylibra tab lo</i>	0	ACA, PV
<i>trivora-28 tab</i>	0	ACA, PV
TYBLUME CHW 0.1-0.02	NC	
<i>tydemy tab</i>	0	ACA, PV
<i>velivet pak</i>	0	ACA, PV
<i>vestura tab 3-0.02mg</i>	0	ACA, PV
<i>vienva tab 0.1-20</i>	0	ACA, PV
<i>viorele tab</i>	0	ACA, PV
<i>volnea tab</i>	0	ACA, PV
<i>vyfemla tab 0.4-35</i>	0	ACA, PV
<i>vylibra tab 0.25-35</i>	0	ACA, PV
<i>wera tab 0.5/35</i>	0	ACA, PV
<i>wymzya fe chw 0.4mg-35</i>	0	ACA, PV
YASMIN 28 TAB 3-0.03MG	NC	
YAZ TAB 3-0.02MG	NC	
<i>zovia 1/35 tab</i>	0	ACA, PV
<i>zumandimine tab 3-0.03mg</i>	0	ACA, PV
<b>COMBINATION CONTRACEPTIVES - TRANSDERMAL</b>		
TWIRLA DIS 120-30	NC	
<i>xulane dis 150-35</i>	0	ACA, PV
<i>zafemy dis 150/35</i>	0	ACA, PV
<b>COMBINATION CONTRACEPTIVES - VAGINAL</b>		
ANNOVERA MIS	0	QL; ACA
<i>eluryng mis</i>	NC	
<i>etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr</i>	NC	
NUVARING MIS	0	ACA, PV
<b>COPPER CONTRACEPTIVES - IUD</b>		
PARAGARD IUD T380A	0	ACA, PV
<b>EMERGENCY CONTRACEPTIVES</b>		
<i>aftera tab 1.5mg</i>	0	OTC; ACA, PV
<i>afterpill tab 1.5mg</i>	0	OTC; ACA, PV
<i>econtra ez tab 1.5mg</i>	0	OTC; ACA, PV
<i>econtra os tab 1.5mg</i>	0	OTC; ACA, PV
ELLA TAB 30MG	0	ACA, PV
<i>levonorgestrel tab 1.5 mg</i>	0	OTC; ACA, PV
<i>my choice tab 1.5mg</i>	0	OTC; ACA, PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>my way tab 1.5mg</i>	0	OTC; ACA, PV
<i>new day tab 1.5mg</i>	0	OTC; ACA, PV
<i>opcicon tab 1.5mg</i>	0	OTC; ACA, PV
<i>option 2 tab 1.5mg</i>	0	OTC; ACA, PV
<i>react tab 1.5mg</i>	0	OTC; ACA, PV
<i>take action tab 1.5mg</i>	0	OTC; ACA, PV
<b>PROGESTIN CONTRACEPTIVES - IMPLANTS</b>		
NEXPLANON IMP 68MG	0	ACA, PV
<b>PROGESTIN CONTRACEPTIVES - INJECTABLE</b>		
DEPO-PROVERA INJ 150MG/ML	2	ACA, PV
DEPO-SQ PROV INJ 104	2	QL; ACA, PV
<i>medroxyprogesterone acetate im susp 150 mg/ml</i>	0	QL; ACA, PV
<i>medroxyprogesterone acetate im susp prefilled syr 150 mg/ml</i>	0	QL; ACA, PV
<b>PROGESTIN CONTRACEPTIVES - IUD</b>		
KYLEENA IUD 19.5MG	0	ACA, PV
LILETTA IUD 52MG	0	ACA, PV
MIRENA IUD SYSTEM	0	ACA, PV
SKYLA IUD 13.5MG	0	ACA, PV
<b>PROGESTIN CONTRACEPTIVES - ORAL</b>		
<i>camila tab 0.35mg</i>	0	ACA, PV
<i>deblitane tab 0.35mg</i>	0	ACA, PV
<i>errin tab 0.35mg</i>	0	ACA, PV
<i>heather tab 0.35mg</i>	0	ACA, PV
<i>incassia tab 0.35mg</i>	0	ACA, PV
<i>jencycla tab 0.35mg</i>	0	ACA, PV
<i>lyleq tab 0.35mg</i>	0	ACA, PV
<i>lyza tab 0.35mg</i>	0	ACA, PV
<i>nora-be tab 0.35mg</i>	0	ACA, PV
<i>norethindrone tab 0.35 mg</i>	0	ACA, PV
<i>norlyroc tab 0.35mg</i>	0	ACA, PV
<i>sharobel tab 0.35mg</i>	0	ACA, PV
SLYND TAB 4MG	NC	
<b>CORTICOSTEROIDS</b>		
<b>GLUCOCORTICOSTEROIDS</b>		
BETA-PHOS/AC INJ 3-3MG/ML	NC	
BETAMETH COM INJ 7MG/ML	NC	
BETAMETH SOD INJ 6MG/ML	3	
BETAMETH SOD INJ 12MG/2ML	3	
<i>betamethasone sod phosphate &amp; acetate inj susp 6 (3-3) mg/ml</i>	2	(applies to NDC 71283062002 only)
<i>budesonide delayed release particles cap 3 mg</i>	1	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>budesonide tab er 24hr 9 mg</i>	NC	
CELESTONE INJ SOLUSPAN	NC	
CORTEF TAB 5MG	3	
CORTEF TAB 10MG	3	
CORTEF TAB 20MG	3	
DEPO-MEDROL INJ 20MG/ML	3	
DEPO-MEDROL INJ 40MG/ML	3	
DEPO-MEDROL INJ 80MG/ML	3	
DEXAMETH LA INJ 16MG/ML	3	
DEXAMETH PHO INJ 4MG/ML	3	
DEXAMETH PHO INJ 10MG/ML	3	
DEXAMETHASON CON 1MG/ML	3	
DEXAMETHASON SUS 8-4MG/ML	3	
DEXAMETHASON SUS 8MG/ML	3	
<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>	2	
<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>	2	
<i>dexamethasone tab therapy pack 1.5 mg (35)</i>	2	
<i>dexamethasone tab therapy pack 1.5 mg (51)</i>	2	
DEXONTO 0.4% SOL 20MG/5ML	NC	
<i>dexpak pak 6 day</i>	NC	
<i>dexpak pak 10 day</i>	NC	
<i>dexpak pak 13 day</i>	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
EMFLAZA SUS 22.75/ML	NC	
EMFLAZA TAB 6MG	NC	
EMFLAZA TAB 18MG	NC	
EMFLAZA TAB 30MG	NC	
EMFLAZA TAB 36MG	NC	
<i>hidex 6-day pak 1.5mg</i>	2	
<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	
KENALOG-80 INJ	3	
MEDROL TAB 2MG	3	
MEDROL TAB 4MG	3	
MEDROL TAB 8MG	3	
MEDROL TAB 16MG	3	
METHY-BUPIVA SUS 8-5MG/ML	NC	
METHYL-BUPIV SUS 40-5MG	NC	
METHYLPR ACE INJ 40MG/ML	3	
METHYLPR ACE INJ 80MG/ML	3	
METHYLPREDNI SUS 50MG/ML	NC	
<i>methylprednisolone acetate inj susp 40 mg/ml</i>	2	
<i>methylprednisolone acetate inj susp 80 mg/ml</i>	1	
<i>methylprednisolone sod succ for inj 40 mg (base equiv)</i>	2	
<i>methylprednisolone sod succ for inj 125 mg (base equiv)</i>	1	
<i>methylprednisolone sod succ for inj 500 mg (base equiv)</i>	1	
<i>methylprednisolone sod succ for inj 1000 mg (base equiv)</i>	2	
<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>	1	
<i>methylprednisolone tab therapy pack 4 mg (21)</i>	1	
MILLIPRED DP PAK 5MG	NC	
MILLIPRED TAB 5MG	NC	
ORAPRED ODT TAB 10MG	3	
ORAPRED ODT TAB 15MG	3	
ORAPRED ODT TAB 30MG	3	
PEDIAPRED SOL 5MG/5ML	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	
<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>	NC	
<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>	NC	
<i>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)</i>	2	
<i>prednisolone soln 15 mg/5ml</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	
TARPEYO CAP 4MG	NC	
TRIAM-BUPIVA SUS 40-5MG	NC	
TRIAMCIN ACE INJ 40MG/ML	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
TRIAMCINOLON INJ 40MG/ML	3	
TRIAMCINOLON INJ 80MG/2ML	3	
TRIAMCINOLON INJ 80MG/ML	3	
<i>triamcinolone acetonide inj susp 40 mg/ml</i>	1	
UCERIS TAB 9MG	1	
ZILRETTA INJ 32MG	NC	

### **MINERALOCORTICIDS**

<i>fludrocortisone acetate tab 0.1 mg</i>	1	
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### **COUGH/COLD/ALLERGY**

#### **ANTITUSSIVES**

<i>benzonatate cap 100 mg</i>	1	
<i>benzonatate cap 150 mg</i>	NC	
<i>benzonatate cap 200 mg</i>	1	
<i>hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml</i>	1	
<i>hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg</i>	1	
<i>hydromet syp 5-1.5/5</i>	1	

#### **COUGH/COLD/ALLERGY COMBINATIONS**

<i>bromfed dm sol 2-30-10</i>	1	
CLARINEX-D TAB 2.5-120	3	
<i>g tussin ac liq 100-10/5</i>	1	OTC
GILPHEX TR TAB 10-388MG	3	
<i>guaiaatuss ac syp 100-10/5</i>	1	OTC
<i>guaifenesin-codeine soln 100-10 mg/5ml</i>	1	OTC
<i>hydrocod polst-chlorphen polst er susp 10-8 mg/5ml</i>	1	
MAR-COF CG LIQ 225-7.5	3	OTC
<i>maxi-tuss ac sol</i>	1	OTC
<i>prometh vc syp 6.25-5/5</i>	1	
<i>prometh vc/ syp codeine</i>	1	
<i>promethazine &amp; phenylephrine syrup 6.25-5 mg/5ml</i>	1	
<i>promethazine w/ codeine syrup 6.25-10 mg/5ml</i>	1	
<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	1	
<i>promethazine-phenylephrine-codeine syrup 6.25-5-10 mg/5ml</i>	1	
<i>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml</i>	1	
<i>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml</i>	NC	(applies to NDCs 62135030247 and 62135030248 only)
<i>trymine cg liq 225-7.5</i>	1	OTC

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>EXPECTORANTS</b>		
<i>potassium iodide oral soln 1 gm/ml</i>	1	
SSKI SOL 1GM/ML	3	
<b>MISC. RESPIRATORY INHALANTS</b>		
HYPERSAL NEB 3.5%	3	
HYPERSAL NEB 7%	3	
NEBUSAL NEB 6%	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	
<b>MUCOLYTICS</b>		
<i>acetylcysteine inhal soln 10%</i>	1	
<i>acetylcysteine inhal soln 20%</i>	1	
<b>DERMATOLOGICALS</b>		
<b>ACNE PRODUCTS</b>		
ABSORICA CAP 10MG	NC	
ABSORICA CAP 20MG	NC	
ABSORICA CAP 25MG	NC	
ABSORICA CAP 30MG	NC	
ABSORICA CAP 35MG	NC	
ABSORICA CAP 40MG	NC	
ABSORICA LD CAP 8MG	NC	
ABSORICA LD CAP 16MG	NC	
ABSORICA LD CAP 24MG	NC	
ABSORICA LD CAP 32MG	NC	
ACANYA GEL 1.2-2.5%	NC	
<i>acutane cap 10mg</i>	2	PA
<i>acutane cap 20mg</i>	1	PA
<i>acutane cap 30mg</i>	2	PA
<i>acutane cap 40mg</i>	2	PA
ACZONE GEL 5%	NC	
ACZONE GEL 7.5%	NC	
ADAPAL/BEN P PAD 0.1-2.5%	NC	
<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 pads 0.1%</i>	NC	
ADAPALENE SOL 0.1%	3	
<i>adapalene-benzoyl peroxide gel 0.1-2.5%</i>	1	PA
<i>adapalene-benzoyl peroxide gel 0.3-2.5%</i>	2	PA
AKLIEF CRE 0.005%	2	PA
ALTRENO LOT 0.05%	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>amnesteem cap 10mg</i>	2	PA
<i>amnesteem cap 20mg</i>	1	PA
<i>amnesteem cap 40mg</i>	2	PA
AMZEEQ AER 4%	NC	
ARAZLO LOT 0.045%	2	PA
ATRALIN GEL 0.05%	3	PA
<i>avita cre 0.025%</i>	1	PA
<i>avita gel 0.025%</i>	1	PA
AZELEX CRE 20%	NC	
BENZAC AC LIQ 5% WASH	3	ST, PA
BENZAACLIN GEL 1-5%	NC	
BENZAACLIN GEL 1-5%PUMP	NC	
BENZAMYCIN GEL 5-3%	3	
<i>benzepro aer 5.3%</i>	1	
<i>benzoyl peroxide foam 9.8%</i>	2	
<i>benzoyl peroxide gel 8%</i>	1	
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	1	
<i>benzoyl peroxide-hydrocortisone lotion 5-0.5%</i>	2	
<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
CLEOCIN-T LOT 1%	3	ST, PA
<i>clindacin mis etz 1%</i>	1	
<i>clindacin-p pad 1%</i>	1	
CLINDAGEL GEL 1%	3	ST, PA
<i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</i>	1	
<i>clindamycin phosphate foam 1%</i>	2	PA
<i>clindamycin phosphate gel 1%</i>	1	PA
<i>clindamycin phosphate gel 1%</i>	NC	(applies to NDC 69238203107 only)
<i>clindamycin phosphate lotion 1%</i>	1	PA
<i>clindamycin phosphate soln 1%</i>	1	
<i>clindamycin phosphate swab 1%</i>	1	
<i>clindamycin phosphate-benzoyl peroxide gel 1-5%</i>	1	
<i>clindamycin phosphate-benzoyl peroxide gel 1.2-2.5%</i>	2	
<i>clindamycin phosphate-tretinoin gel 1.2-0.025%</i>	2	PA
<i>dapsone gel 5%</i>	2	
<i>dapsone gel 7.5%</i>	2	
DIFFERIN CRE 0.1%	3	PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
DIFFERIN GEL 0.3%	3	PA
DIFFERIN LOT 0.1%	NC	
EPIDUO FORTE GEL 0.3-2.5%	2	ST, PA
EPIDUO GEL 0.1-2.5%	2	ST, PA
EPSOLAY CRE 5%	NC	
<i>ery pad 2%</i>	1	
ERYGEL GEL 2%	3	ST, PA
<i>erythromycin gel 2%</i>	1	
<i>erythromycin soln 2%</i>	1	
EVOCLIN AER 1%	3	ST, PA
FABIOR AER 0.1%	NC	
<i>isotretinoin cap 10 mg</i>	2	PA
<i>isotretinoin cap 20 mg</i>	1	PA
<i>isotretinoin cap 25 mg</i>	2	PA
<i>isotretinoin cap 30 mg</i>	2	PA
<i>isotretinoin cap 35 mg</i>	2	PA
<i>isotretinoin cap 40 mg</i>	2	PA
KLARON LOT 10%	3	ST, 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>neuac gel 1.2-5%</i>	1	
ONEXTON GEL 1.2-3.75	2	ST, PA
PR BENZOYL LIQ 7% WASH	1	
<i>resorcinol-sulfur lotion 2-5%</i>	1	
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%	3	PA
RETIN-A MICR GEL 0.1%PUMP	3	PA
RETIN-A MICR GEL 0.04%	3	PA
RETIN-A MICR GEL 0.04%PMP	3	PA
RETIN-A MICR GEL 0.06%	3	PA
RETIN-A MICR GEL 0.08%	3	PA
<i>sulfacetamide sodium lotion 10% (acne)</i>	1	PA
<i>sulfacetamide sodium w/ sulfur cleansing pad 10-4%</i>	1	
<i>sulfamez emu 10-1%</i>	1	
<i>tretinoin cream 0.1%</i>	1	PA
<i>tretinoin cream 0.05%</i>	1	PA
<i>tretinoin cream 0.025%</i>	1	PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>tretinoin gel 0.01%</i>	1	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
TWYNEO CRE 0.1-3%	2	ST, PA
VELTIN GEL	NC	
WINLEVI CRE 1%	2	ST, PA, QL
ZACLIR LOT 8%	3	ST, 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
ZIANA GEL	NC	
<b>AGENTS FOR EXTERNAL GENITAL AND PERIANAL WARTS</b>		
VEREGEN OIN 15%	NC	
<b>ANALGESICS - TOPICAL</b>		
MUSCUSOLICE CRE 2%	NC	
PRAKETAMIDE CRE 5%	NC	
<b>ANTI-INFLAMMATORY AGENTS - TOPICAL</b>		
<i>arthr pain gel 1%</i>	1	PA, OTC
<i>aspercrm art gel 1% pain</i>	1	PA, OTC
<i>diclofenac epolamine patch 1.3%</i>	2	PA, QL
<i>diclofenac sodium gel 1% (1.16% diethylamine equiv)</i>	1	
<i>diclofenac sodium gel 1% (1.16% diethylamine equiv)</i>	1	PA, QL
<i>diclofenac sodium gel 1% (1.16% diethylamine equiv)</i>	1	PA, QL, OTC
<i>diclofenac sodium soln 1.5%</i>	1	PA, QL
<i>diclofenac sodium soln 2%</i>	NC	
DICLOFONO GEL 1.6%	NC	
FLECTOR DIS 1.3%	3	PA, QL
<i>goodsense gel art pain</i>	1	PA, OTC
<i>kls diclofen gel 1%</i>	1	PA, OTC
<i>motrin arthr gel pain 1%</i>	1	PA, OTC
PENNSAID SOL 2%	NC	
<i>qc diclofena gel 1%</i>	1	PA, OTC
VOLTAREN GEL 1% ARTHR	3	PA, OTC
<b>ANTIBIOTICS - TOPICAL</b>		
ALTABAX OIN 1%	NC	
CENTANY OIN 2%	3	
<i>gentamicin sulfate cream 0.1%</i>	1	
<i>gentamicin sulfate oint 0.1%</i>	1	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>mupirocin calcium cream 2%</i>	NC	
<i>mupirocin oint 2%</i>	1	
NEO-SYNALAR CRE	NC	
XEPI CRE 1%	3	

### **ANTIFUNGALS - TOPICAL**

<i>ciclodan sol 8%</i>	1	PA
<i>ciclopirox gel 0.77%</i>	1	
<i>ciclopirox olamine cream 0.77% (base equiv)</i>	1	
<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 1-1%</i>	1	
<i>econazole nitrate cream 1%</i>	1	
ECOZA AER 1%	3	
ERTACZO CRE 2%	3	
EXELDERM CRE 1%	3	
EXELDERM SOL 1%	3	
EXTINA AER 2%	3	
FUNGIMEZ SOL	3	
<i>iodoquimez cre 1-1.9%</i>	1	
JUBLIA SOL 10%	NC	
KERYDIN SOL 5%	NC	
<i>ketoconazole cream 2%</i>	1	
<i>ketoconazole foam 2%</i>	NC	
<i>ketoconazole shampoo 2%</i>	1	
<i>ketodan aer 2%</i>	NC	
LOPROX SHA 1%	3	
LOPROX SUS 0.77%	NC	
<i>luliconazole cream 1%</i>	NC	
LUZU CRE 1%	3	
<i>miconazole-zinc oxide-white petrolatum oint 0.25-15-81.35%</i>	2	
<i>naftifine hcl cream 1%</i>	2	
<i>naftifine hcl cream 2%</i>	2	
NAFTIN GEL 1%	2	
NAFTIN GEL 2%	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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>	1	
<i>nystatin-triamcinolone oint 100000-0.1 unit/gm-%</i>	1	
<i>nystop pow 100000</i>	1	
<i>oxiconazole nitrate cream 1%</i>	2	QL
OXISTAT CRE 1%	3	PA, QL
OXISTAT LOT 1%	3	PA, QL
<i>sulconazole nitrate cream 1%</i>	2	
<i>sulconazole nitrate solution 1%</i>	2	
<i>tavaborole soln 5%</i>	NC	
VUSION OIN	3	
XOLEGEL GEL 2%	NC	

#### **ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL**

AMELUZ GEL 10%	NC	
<i>bexarotene gel 1%</i>	4	SP, PA
CARAC CRE 0.5%	NC	
<i>diclofenac sodium (actinic keratoses) gel 3%</i>	1	PA
EFUDEX CRE 5%	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	
KLISYRI OIN 1%	NC	
LEVULAN KERA SOL 20%	3	
PANRETIN GEL 0.1%	3	
TARGRETIN GEL 1%	NC	
TOLAK CRE 4%	NC	
VALCHLOR GEL 0.016%	6	SP, PA, QL

#### **ANTIPRURITICS - TOPICAL**

<i>doxepin hcl cream 5%</i>	NC	
PRUDOXIN CRE 5%	3	ST, PA, QL
ZONALON CRE 5%	3	ST, PA, QL

#### **ANTIPSORIATICS**

<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>calcipotriene cream 0.005%</i>	NC	
<i>calcipotriene foam 0.005%</i>	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>calcipotriene oint 0.005%</i>	2	PA
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	1	PA
<i>calcitrene oin 0.005%</i>	2	PA
<i>calcitriol oint 3 mcg/gm</i>	NC	
COSENTYX INJ 75MG/0.5	5	SP, PA, QL; for pediatric patients less than 50 kg
COSENTYX INJ 150MG/ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Non-Radiographic Axial Spondyloarthritis, Psoriatic Arthritis
COSENTYX INJ 300DOSE	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Non-Radiographic Axial Spondyloarthritis, Psoriatic Arthritis
COSENTYX PEN INJ 150MG/ML	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Non-Radiographic Axial Spondyloarthritis, Psoriatic Arthritis
COSENTYX PEN INJ 300DOSE	5	SP, PA, QL; Preferred for Ankylosing Spondylitis, Non-Radiographic Axial Spondyloarthritis, Psoriatic Arthritis
DOVONEX CRE 0.005%	3	PA
ILUMYA SOL 100MG/ML	5	SP, PA, QL
<i>methoxsalen rapid cap 10 mg</i>	1	
SILIQ INJ 210/1.5	NC	
SKYRIZI INJ 150DOSE	5	SP, PA, QL; Preferred for Psoriasis, Psoriatic Arthritis, Crohn's disease
SKYRIZI INJ 150MG/ML	5	SP, PA, QL; Preferred for Psoriasis, Psoriatic Arthritis, Crohn's disease
SKYRIZI PEN INJ 150MG/ML	5	SP, PA, QL; Preferred for Psoriasis, Psoriatic Arthritis, Crohn's disease
SORILUX AER 0.005%	NC	
SOTYKTU TAB 6MG	5	SP, PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
STELARA INJ 45MG/0.5	5	SP, PA, QL; Preferred for Psoriasis, Psoriatic Arthritis, Crohn's and Ulcerative Colitis
STELARA INJ 90MG/ML	5	SP, PA, QL; Preferred for Psoriasis, Psoriatic Arthritis, Crohn's and Ulcerative Colitis
TALTZ INJ 80MG/ML	5	SP, PA, QL; Preferred for Psoriasis
<i>tazarotene cream 0.1%</i>	1	PA
<i>tazarotene gel 0.1%</i>	2	PA
<i>tazarotene gel 0.05%</i>	2	PA
TAZORAC CRE 0.1%	NC	
TAZORAC CRE 0.05%	NC	
TAZORAC GEL 0.1%	NC	
TAZORAC GEL 0.05%	NC	
TREMFYA INJ 100MG/ML	5	SP, PA, QL; Preferred for Psoriasis; Psoriatic Arthritis
VECTICAL OIN 3MCG/GM	NC	
VTAMA CRE 1%	2	PA, QL
ZORYVE CRE 0.3%	2	PA, QL
<b>ANTISEBORRHEIC PRODUCTS</b>		
ESKATA SOL 40%	NC	
NUTRASEB CRE	3	PA
PROMISEB CRE	3	PA
<i>selenium sulfide lotion 2.5%</i>	1	
SODIUM SULFA LIQ 10% WASH	3	
<b>ANTIVIRALS - TOPICAL</b>		
<i>acyclovir cream 5%</i>	NC	
<i>acyclovir oint 5%</i>	1	
DENAVIR CRE 1%	3	
<i>penciclovir cream 1%</i>	2	
XERESE CRE 5-1%	NC	
ZOVIRAX CRE 5%	3	
ZOVIRAX OIN 5%	3	
<b>BURN PRODUCTS</b>		
<i>mafenide acetate packet for topical soln 5% (50 gm)</i>	1	
SILVADENE CRE 1%	2	
<i>silver sulfadiazine cream 1%</i>	1	
<i>ssd cre 1%</i>	1	
SULFAMYLON CRE 85MG/GM	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
SULFAMYLON PAK 5%	3	
<b>CORTICOSTEROIDS - TOPICAL</b>		
<i>ala scalp lot 2%</i>	NC	
<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	
<i>amcinonide cream 0.1%</i>	2	
<i>amcinonide lotion 0.1%</i>	1	
AMCINONIDE OIN 0.1%	3	PA
APEXICON E CRE 0.05%	NC	
<i>betamethasone dipropionate augmented cream 0.05%</i>	1	
<i>betamethasone dipropionate augmented gel 0.05%</i>	2	
<i>betamethasone dipropionate augmented lotion 0.05%</i>	1	
<i>betamethasone dipropionate augmented oint 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>	NC	
<i>betamethasone valerate aerosol foam 0.12%</i>	2	
<i>betamethasone valerate cream 0.1% (base equivalent)</i>	1	
<i>betamethasone valerate lotion 0.1% (base equivalent)</i>	1	
<i>betamethasone valerate oint 0.1% (base equivalent)</i>	1	
BRYHALI LOT 0.01%	2	PA
<i>calcipotriene-betamethasone dipropionate oint 0.005-0.064%</i>	NC	
<i>calcipotriene-betamethasone dipropionate susp 0.005-0.064%</i>	NC	
CAPEX SHA 0.01%	2	PA
<i>clobetasol e cre 0.05%</i>	1	
<i>clobetasol propionate cream 0.05%</i>	1	
<i>clobetasol propionate emollient base cream 0.05%</i>	1	
<i>clobetasol propionate emulsion foam 0.05%</i>	NC	
<i>clobetasol propionate foam 0.05%</i>	1	
<i>clobetasol propionate gel 0.05%</i>	1	
<i>clobetasol propionate lotion 0.05%</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>clobetasol propionate oint 0.05%</i>	1	
<i>clobetasol propionate shampoo 0.05%</i>	1	
<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>clocortolone pivalate cream 0.1%</i>	NC	
<i>clodan sha 0.05%</i>	1	
CLODERM CRE 0.1%	3	PA
CORDRAN 80X3 TAP 4MCG/CM	NC	
CORDRAN CRE 0.05%	NC	
CORDRAN CRE 0.025%	NC	
CORDRAN LOT 0.05%	NC	
CORDRAN OIN 0.05%	NC	
DERMA-SMOOTH OIL /FS BODY	2	PA
DERMA-SMOOTH OIL /FS SCLP	2	PA
<i>desonide cream 0.05%</i>	1	PA
<i>desonide gel 0.05%</i>	NC	
<i>desonide lotion 0.05%</i>	1	
<i>desonide oint 0.05%</i>	1	
DESOWEN CRE 0.05%	3	PA
<i>desoximetasone cream 0.05%</i>	2	
<i>desoximetasone cream 0.25%</i>	1	
<i>desoximetasone gel 0.05%</i>	2	
<i>desoximetasone oint 0.05%</i>	NC	
<i>desoximetasone oint 0.25%</i>	1	
<i>desoximetasone spray 0.25%</i>	1	
<i>desrx gel 0.05%</i>	NC	
<i>diflorasone diacetate cream 0.05%</i>	NC	
<i>diflorasone diacetate oint 0.05%</i>	NC	
DIPROLENE OIN 0.05%	3	PA
DUOBRII LOT	NC	
ENSTILAR AER	2	PA
EPIFOAM AER 1%	3	
<i>fluocinolone acetonide cream 0.01%</i>	1	
<i>fluocinolone acetonide cream 0.025%</i>	1	
<i>fluocinolone acetonide oil 0.01% (body oil)</i>	1	
<i>fluocinolone acetonide oil 0.01% (scalp oil)</i>	1	
<i>fluocinolone acetonide oint 0.025%</i>	1	
<i>fluocinolone acetonide soln 0.01%</i>	1	
<i>fluocinonide cream 0.1%</i>	NC	
<i>fluocinonide cream 0.05%</i>	1	
<i>fluocinonide emulsified base cream 0.05%</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>fluocinonide gel 0.05%</i>	1	
<i>fluocinonide oint 0.05%</i>	1	
<i>fluocinonide soln 0.05%</i>	1	
<i>flurandrenolide cream 0.05%</i>	NC	
<i>flurandrenolide lotion 0.05%</i>	NC	
<i>flurandrenolide oint 0.05%</i>	NC	
<i>fluticasone propionate cream 0.05%</i>	1	
<i>fluticasone propionate lotion 0.05%</i>	2	
<i>fluticasone propionate oint 0.005%</i>	1	
<i>halcinonide cream 0.1%</i>	NC	
<i>halobetasol propionate cream 0.05%</i>	1	
<i>halobetasol propionate oint 0.05%</i>	1	
HALOG CRE 0.1%	NC	
HALOG OIN 0.1%	NC	
HALOG SOL 0.1%	NC	
<i>hydrocortisone butyrate cream 0.1%</i>	1	
<i>hydrocortisone butyrate hydrophilic lipo base cream 0.1%</i>	NC	
<i>hydrocortisone butyrate lotion 0.1%</i>	NC	
<i>hydrocortisone butyrate oint 0.1%</i>	1	
<i>hydrocortisone butyrate soln 0.1%</i>	1	
<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	
<i>hydrocortisone valerate cream 0.2%</i>	1	
<i>hydrocortisone valerate oint 0.2%</i>	1	
IMPOYZ CRE 0.025%	NC	
KENALOG AER SPRAY	3	PA
LOCOID LIPO CRE 0.1%	3	PA
LOCOID LOT 0.1%	3	PA
LUXIQ AER 0.12%	3	PA
MICORT-HC CRE 2.5%	NC	
<i>mometasone furoate cream 0.1%</i>	1	PA
<i>mometasone furoate oint 0.1%</i>	1	
<i>mometasone furoate solution 0.1% (lotion)</i>	1	
<i>nolix cre 0.05%</i>	NC	
<i>nolix lot 0.05%</i>	NC	
OLUX AER 0.05%	3	PA
OLUX-E AER 0.05%	NC	
PANDEL CRE 0.1%	3	PA
PRAMOSONE CRE 1-1%	3	
PRAMOSONE LOT 1%	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PRAMOSONE LOT 2.5%	3	
<i>prednicarbate oint 0.1%</i>	1	
PSORCON CRE 0.05%	NC	
SERNIVO SPR	3	PA
SERNIVO SPR 0.05%	3	PA
SYNALAR CRE 0.025%	3	PA
SYNALAR OIN 0.025%	3	PA
SYNALAR SOL 0.01%	3	PA
TACLONEX OIN	3	PA
TACLONEX SUS	3	PA
TEXACORT SOL 2.5%	2	PA
TOPICORT CRE 0.05%	3	PA
TOPICORT CRE 0.25%	3	PA
TOPICORT GEL 0.05%	3	PA
TOPICORT OIN 0.05%	3	PA
TOPICORT OIN 0.25%	3	PA
TOPICORT SPR 0.25%	3	PA
<i>tovet aer 0.05%</i>	NC	
<i>triamcinolone acetonide aerosol soln 0.147 mg/gm</i>	NC	
<i>triamcinolone acetonide cream 0.1%</i>	1	
<i>triamcinolone acetonide cream 0.5%</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 0.5%</i>	1	
<i>triamcinolone acetonide oint 0.05%</i>	NC	
<i>triamcinolone acetonide oint 0.025%</i>	1	
<i>trianex oin 0.05%</i>	NC	
<i>triderm cre 0.1%</i>	1	
<i>triderm cre 0.5%</i>	1	
TRIDESILON CRE 0.05%	3	PA
ULTRAVATE LOT 0.05%	NC	
VANOS CRE 0.1%	3	PA
VERDESO AER 0.05%	3	PA
<b>ECZEMA AGENTS</b>		
ADBRY INJ 150MG/ML	5	SP, PA, QL
CIBINQO TAB 50MG	5	SP, PA, QL
CIBINQO TAB 100MG	5	SP, PA, QL
CIBINQO TAB 200MG	5	SP, PA, QL
DUPIXENT INJ 100/0.67	5	SP, PA, QL
DUPIXENT INJ 200/1.14	5	SP, PA, QL
DUPIXENT INJ 200MG	5	SP, PA, QL



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
DUPIXENT INJ 300/2ML	5	SP, PA, QL
OPZELURA CRE 1.5%	3	PA, QL
<b>EMOLLIENT/KERATOLYTIC AGENTS</b>		
<i>urea cre 41%</i>	NC	
<i>uredeb cre 39%</i>	1	
<b>EMOLLIENTS</b>		
<i>lactic acid (ammonium lactate) cream 12%</i>	1	
<i>lactic acid (ammonium lactate) lotion 12%</i>	1	
LACTIC ACID CRE E	3	
LACTIC ACID LOT 10%	3	
<b>ENZYMES - TOPICAL</b>		
SANTYL OIN 250/GM	3	
<b>IMMUNOMODULATING AGENTS - TOPICAL</b>		
<i>imiquimod cream 3.75%</i>	2	
<i>imiquimod cream 5%</i>	1	
ZYCLARA CRE 3.75%	3	
ZYCLARA PUMP CRE 2.5%	2	
ZYCLARA PUMP CRE 3.75%	3	
<b>IMMUNOSUPPRESSIVE AGENTS - TOPICAL</b>		
ELIDEL CRE 1%	NC	
HYFTOR GEL 0.2%	NC	
<i>pimecrolimus cream 1%</i>	2	PA
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
<b>KERATOLYTIC/ANTIMITOTIC AGENTS</b>		
CANTHARIDIN SOL 0.7%	3	
CONDYLOX GEL 0.5%	3	
GORDOFILM SOL	3	
<i>podofilox soln 0.5%</i>	1	
PYROGALL ACD OIN	3	
SALIMEZ FORT CRE 10%	3	
YCANTH SOL 0.7%	NC	
<b>LINIMENTS</b>		
TURPENTINE SOL SPIRITS	3	
<b>LOCAL ANESTHETICS - TOPICAL</b>		
ANACAINE OIN	3	
CRYODOSE AER TA	3	
ETHYL CHLOR AER FINE PIN	3	
ETHYL CHLOR AER FN STRM	3	
ETHYL CHLOR AER MED JET	3	
ETHYL CHLOR AER MED STRM	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ETHYL CHLOR AER MIST	3	
<i>ethyl chloride aerosol spray</i>	1	
GEBAUERS SPR AER /STRETCH	3	
<i>glydo gel 2%</i>	1	PA, QL
LIDOCAINE CRE TETRACAI	NC	
<i>lidocaine hcl soln 4%</i>	1	PA, QL
<i>lidocaine hcl urethral/mucosal gel 2%</i>	1	PA, QL
<i>lidocaine hcl urethral/mucosal gel prefilled syringe 2%</i>	1	PA, QL
<i>lidocaine oint 5%</i>	1	QL
<i>lidocaine patch 5%</i>	1	PA, QL
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	1	PA, QL
<i>lidocan pad 5%</i>	NC	(applies to NDC 59088090554 only)
LIDODERM DIS 5%	2	PA, QL
LYDEXA CRE 4.12%	NC	
PAIN EASE AER MD STRM	3	
PAIN EASE AER MIST	3	
PLIAGLIS CRE 7-7%	NC	
PRAMOX GEL 1%	NC	
QUTENZA KIT 8% 1-PCH	6	SP
QUTENZA KIT 8% 2-PCH	6	SP
QUTENZA KIT 8% 4-PCH	6	SP
SYNERA DIS 70-70MG	3	PA, QL
<i>7t lido gel 2%</i>	1	QL
ZTLIDO PAD 1.8%	3	PA, QL

### **MISC. DERMATOLOGICAL PRODUCTS**

ALADERM PLUS EMU	NC	
ALEVAMAX CRE	3	PA
ALEVICYN SG GEL ANTIPRUR	NC	
ATOPICLAIR CRE	3	PA
CERACADE EMU	3	PA
CERACADE EMU	NC	
CERAMAX CRE	NC	
DEXERYL CRE	3	PA
ELESTONE CRE	3	PA
EMULSION SB EMU	3	PA
EMULSION SB EMU	NC	
ENTTY EMU SPRAY	3	PA
ENTTY EMU SPRAY	NC	
EPICERAM EMU	NC	
HPR PLUS AER	NC	
HPR PLUS CRE	3	PA
HPR PLUS CRE	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
HPR PLUS KIT	NC	
HYLATOPIC CRE PLUS	3	PA
KAMDOY EMU	NC	
LEVICYN GEL	3	PA
MIMYX CRE	3	PA
NEOSALUS AER	3	PA
NEOSALUS CRE	3	PA
NEOSALUS LOT	3	PA
NIVATOPIC CRE PLUS	3	PA
PHLAG SPR	3	PA
PR CREAM KIT	3	PA
PRESERA AER	3	PA
PRUCLAIR CRE	3	PA
PRUMYX CRE	3	PA
REMIGEN CREA CRE	3	PA
SEBUDERM GEL	3	PA
STRATA MARK GEL	NC	
SUVICORT EMU	NC	
SYNERDERM EMU	NC	
TETRIX CRE	3	PA
XERALUX CRE	3	PA

#### **MISC. TOPICAL**

ACUICYN SOL	NC	
ARNICA TIN FLOWER	3	
AVENOVA SOL 0.01%	NC	
BENZOIN TIN NF	3	
BORIC ACID GRA	3	
DRYSOL SOL 20%	3	
HYCLODEX SOL 0.012%	NC	
HYPOCYN SOL 0.012%	NC	
QBREXZA PAD 2.4%	3	
XERAC-AC SOL 6.25%	3	

#### **PHOSPHODIESTERASE 4 (PDE4) INHIBITORS - TOPICAL**

EUCRISA OIN 2%	2	ST, QL
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#### **ROSACEA AGENTS**

<i>azelaic acid gel 15%</i>	2	PA
<i>brimonidine tartrate gel 0.33% (base equivalent)</i>	2	
<i>doxycycline (rosacea) cap delayed release 40 mg</i>	NC	
FINACEA AER 15%	2	PA
FINACEA GEL 15%	NC	
<i>ivermectin cream 1%</i>	NC	
METROCREAM CRE 0.75%	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
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>	1	
<i>metronidazole lotion 0.75%</i>	1	
MIRVASO GEL 0.33%	NC	
NORITATE CRE 1%	NC	
ORACEA CAP 40MG	1	
RHOFADE CRE 1%	2	PA
<i>rosadan cre 0.75%</i>	1	
<i>rosadan gel 0.75%</i>	1	
SOOLANTRA CRE 1%	1	PA
<b>SCABICIDES &amp; PEDICULICIDES</b>		
<i>crotan lot 10%</i>	1	
<i>lindane shampoo 1%</i>	1	
<i>malathion lotion 0.5%</i>	2	
NATROBA SUS 0.9%	3	
OVIDE LOT 0.5%	2	
<i>permethrin cream 5%</i>	1	
<i>spinosad susp 0.9%</i>	2	
SULF LIME SOL	3	
<b>SCAR TREATMENT PRODUCTS</b>		
BEAU RX GEL	NC	
KELARX GEL	NC	
RECEDO GEL	NC	
SILIPAC KIT	NC	
<b>TAR PRODUCTS</b>		
<i>coal tar soln 20%</i>	1	
<b>WOUND CARE PRODUCTS</b>		
ACTCT FLEX 3 PAD 4"X4"	3	PA
ACTI ANTIMIC PAD 4"X4"	3	PA
ACTICOAT 7 PAD 4"X5"	3	PA
ACTICOAT MIS 4"X4"	3	PA
ALEVICYN SOL DERMAL	NC	
ALLEVYN AG MIS 6-3/4"	3	PA
ALLEVYN AG MIS 9"X9"SAC	3	PA
ALLEVYN AG PAD 3"X3"	3	PA
ALLEVYN AG PAD 4"X4"	3	PA
ALLEVYN AG PAD 5"X5"	3	PA
ALLEVYN AG PAD 7"X7"	3	PA
ALLEVYN GENT PAD 4"X4	3	PA
ALLEVYN GENT PAD 8"X8"	3	PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
AMORPH WOUND GEL DRESSING	3	PA
AQUACEL AG PAD 5"X4"	3	PA
AQUACEL FOAM PAD 7"X7"	3	PA
ARIDA GEL	3	PA
AVO CREAM EMU	3	PA
BIAFINE EMU	3	PA
BIONECT AER 0.2%	3	PA
BIONECT CRE 0.2%	3	PA
BIONECT GEL 0.2%	3	PA
BIOSTEP MIS 4"X4"	3	PA
CA ALGINATE MIS 12" ROPE	3	PA
CA ALGINATE PAD 2"X2"	3	PA
CA ALGINATE PAD 4"X4"	3	PA
CA ALGINATE PAD 4"X8"	3	PA
CURITY HYPER MIS 1/2"X15'	3	PA
CURITY NACL PAD 6"X6-3/4	3	PA
DURAFIBER AG PAD 4"X4"	3	PA
ENDO DERMAL MIS 5X5 CM	3	PA
HYDRFRA BLUE PAD RDY 2.5"	3	PA
HYDRFRA BLUE PAD RDY 4X5"	3	PA
HYDRFRA BLUE PAD RDY 8X8"	3	PA
HYDRFRA MRF PAD 2"X2.75"	3	PA
HYDROFERA PAD BLUE 2X2	3	PA
HYDROFERA PAD BLUE 4X4	3	PA
HYDROFERA PAD BLUE 6X6	3	PA
HYDROFERA PAD BLUE 9MM	3	PA
HYDROFERA PAD MRF4"X4"	3	PA
HYDROFERA PAD MRF 2.5"	3	PA
HYDROFRA MRF PAD 2-1/4X8"	3	PA
HYDROG WOUND MIS 3" DISK	3	
HYDROG WOUND MIS 4-3/4"	3	
KERAGEL GEL WOUND	3	PA
KERAGELT GEL	3	PA
KERAMATRIX MIS 2X3CM	3	PA
KERAMATRIX MIS 5X5CM	3	PA
KERAMATRIX MIS 10X10CM	3	PA
KERASTAT CRE	3	PA
KERASTAT GEL 5%	3	PA
LEVICYN SOL DERMAL	NC	
LIDOTREX GEL 2%	NC	
LUXAMEND CRE	3	PA
MICROCYN LIQ	3	PA
NORMLGEL AG GEL	3	PA
RADIAPLEXRX GEL	3	PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
REGRANEX GEL 0.01%	3	
RESTORE SILV PAD 2"X2"	3	PA
RESTORE SILV PAD 4"X4"	3	PA
RESTORE SILV PAD 4"X4.75"	3	PA
RESTORE SILV PAD 4"X5"	3	PA
SILVRSTAT GEL DRESSING	3	PA
SOLOX GEL	3	PA
SONAFINE EMU	3	PA
STRATA GRT GEL	NC	
TEGADERM AG PAD 4"X5"	3	PA
VASHE CLEANS SOL	NC	
VENELEX OIN	3	PA
XEROFORM OCL PAD 1X8"	3	PA
XEROFORM OIL MIS 1"X8"	3	PA
XEROFORM OIL MIS ROLL 4X9	3	PA
XEROFORM OIL PAD 2"X2"	3	PA
XEROFORM PET PAD 4X4 DRES	3	PA
XEROFORM PET PAD 5X9 DRES	3	PA
XEROFRM GAUZ MIS 1"X8"	3	PA
XEROFRM GAUZ MIS 5"X9"	3	PA
XEROFRM GAUZ PAD 5"X9"	3	PA
XEROFRM PETR PAD 2"X2"	3	PA
XEROFRM PETR PAD 4"X4"	3	PA
XEROFRM ROLL MIS 4"X9"	3	PA

## **DIAGNOSTIC PRODUCTS**

### **DIAGNOSTIC TESTS**

ACCU-CHEK TES AVIVA PL	7	OTC; PV
ACCU-CHEK TES GUIDE	7	OTC; PV
ACCU-CHEK TES SMART	7	OTC; PV
ACCUTREND TES GLUCOSE	NC	OTC
ACURA TES BLD GLUC	NC	OTC
ADVANCE TES INTUITIO	NC	OTC
ADVANCE TES MICRO-DW	NC	OTC
ADVOCATE TES	NC	OTC
ADVOCATE TES REDI-COD	NC	OTC
ADVOCATE TES REDICODE	NC	OTC
AGAMATRIX TES AMP	NC	OTC
AGAMATRIX TES JAZZ	NC	OTC
AGAMATRIX TES KEYNOTE	NC	OTC
AGAMATRIX TES PRESTO	NC	OTC
ASSURE 3 TES	NC	OTC
ASSURE 4 TES	NC	OTC
ASSURE II TES	NC	OTC
ASSURE II TES CHECK	NC	OTC

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ASSURE PRISM TES MULTI	NC	OTC
ASSURE PRO TES	NC	OTC
ASSURE TES PLATINUM	NC	OTC
AT LAST TES	NC	OTC
AUTOCODE TES BLD GLUC	NC	OTC
BAYER BREEZE MIS 2 TEST	NC	OTC
BG STAR TES BLD GLUC	NC	OTC
BIOSCANNER TES GLUCOSE	NC	OTC
BLOOD GLUCOS TES	NC	OTC
BLOOD GLUCOS TES PREMIUM	NC	OTC
BLOOD GLUCOS TES STRIPS	NC	OTC
BREEZE 2 MIS TEST	NC	OTC
CARESENS N TES	NC	OTC
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
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
D-CARE BLOOD TES GLUCOSE	NC	
DIATRUE PLUS TES STRIPS	NC	OTC
DUO-CARE TES	NC	OTC
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 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
ELEMENT TES	NC	OTC
ELEMNT COMPA TES STRIPS	NC	OTC

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
EMBRACE EVO TES	NC	OTC
EMBRACE PRO TES	NC	OTC
EMBRACE TES BLD GLUC	NC	OTC
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 PLS TES BLD GLUC	NC	OTC
EZ SMART TES BLD GLUC	NC	OTC
FIFTY50 GLUC TES 2.0	NC	OTC
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 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 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
GHT TEST TES STRIPS	NC	OTC
GLUCO PERFEC TES 3	NC	OTC
GLUCOCARD 01 TES PLUS	NC	OTC
GLUCOCARD 01 TES SENSOR	NC	OTC
GLUCOCARD TES EXPRESSI	NC	OTC
GLUCOCARD TES VITAL	NC	OTC



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
GLUCOCARD TES X-SENSOR	NC	OTC
GLUCOCOM TES	NC	OTC
GLUCONAVII TES STRIPS	NC	OTC
GLUCOSE TES STRIPS	NC	OTC
GMATE BLOOD TES GLUCOSE	NC	OTC
IN TOUCH TES BLOOD	NC	OTC
INFINITY TES BLD GLUC	NC	OTC
KROGER BLOOD TES GLUCOSE	NC	OTC
KROGER TES	NC	OTC
LIBERTY NEXT TES GEN	NC	OTC
LIBERTY TES	NC	OTC
MAXIMA BLOOD TES GLUCOSE	NC	OTC
MEIJER BLOOD TES GLUCOSE	NC	OTC
MEIJER TES TRUETEST	NC	OTC
MEIJER TES TRUETRAC	NC	OTC
MICRODOT TES	NC	OTC
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
ON CALL PLUS TES BLD GLUC	NC	OTC
ON CALL TES EXPRESS	NC	OTC
ON CALL VIVD TES BLD GLUC	NC	OTC
ONETOUCH TES ULTRA	7	OTC; PV
ONETOUCH TES VERIO	7	OTC; PV
OPTIUM TES	NC	OTC
OPTIUMEZ TES	NC	OTC
OPTUMRX TES BLD GLUC	NC	OTC
PEN NEEDLES MIS 29GX12MM	NC	OTC
POCKETCHEM TES EZ	NC	OTC
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
PRODIGY NO TES CODING	NC	OTC
PTS PANELS TES GLUCOSE	NC	OTC
QUICKTEK TES	NC	OTC
QUINTET AC TES BLD GLUC	NC	OTC
QUINTET TES BLD GLUC	NC	OTC
RA TRUETEST TES	NC	OTC
REFUAH PLUS TES BLD GLUC	NC	OTC

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
RELION BLOOD TES GLUCOSE	NC	OTC
RELION PRIME TES	NC	OTC
RELION PRIME TES GLUCOSE	NC	OTC
RELION TES ULTIMA	NC	OTC
REVEAL TES BLD GLUC	NC	OTC
RIGHTEST TES GS100	NC	OTC
RIGHTEST TES GS300	NC	OTC
RIGHTEST TES GS550	NC	OTC
SMART SENSE TES TEST	NC	OTC
SMARTEST TES BLD GLUC	NC	OTC
SOLUS V2 TES AUDIBLE	NC	OTC
SUPREME TES	NC	OTC
SURE EDGE TES	NC	OTC
SURE-TEST TES EASYPLUS	NC	OTC
SURECHEK TES BLD GLUC	NC	OTC
TELCARE TES BLD GLUC	NC	OTC
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
ULTIMA TES	NC	OTC
ULTRATRAK TES ULTIMATE	NC	OTC
ULTRATRK PRO TES	NC	OTC
UNISTRIP1 TES GENERIC	NC	OTC
VOCAL POINT TES BLD GLUC	NC	OTC
WAVESENSE TES PRESTO	NC	OTC
XPRESS TES BLD GLUC	NC	OTC

**DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS**

***DIETARY MANAGEMENT PRODUCTS***

PODIAPN CAP	3
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**DIGESTIVE AIDS**

***DIGESTIVE ENZYMES***

CREON CAP 3000UNIT	2
CREON CAP 6000UNIT	2
CREON CAP 12000UNT	2
CREON CAP 24000UNT	2
CREON CAP 36000UNT	2
PANCREAZE CAP 2600UNIT	3
PANCREAZE CAP 4200UNIT	3
PANCREAZE CAP 10500UNT	3
PANCREAZE CAP 16800UNT	3
PANCREAZE CAP 21000UNT	3

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PANCREAZE CAP 37000	3	
PERTZYE CAP 4000UNIT	3	
PERTZYE CAP 8000UNIT	3	
PERTZYE CAP 16000U	3	
PERTZYE CAP 24000U	3	
SUCRAID SOL 8500/ML	6	
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 20000UNT	2	
ZENPEP CAP 25000UNT	2	
ZENPEP CAP 40000UNT	2	

## **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	SP, PA, QL
<i>methazolamide tab 25 mg</i>	2	
<i>methazolamide tab 50 mg</i>	2	

### **DIURETIC COMBINATIONS**

ALDACTAZIDE TAB 25/25	3	PV
ALDACTAZIDE TAB 50/50	3	PV
<i>amiloride &amp; hydrochlorothiazide tab 5-50 mg</i>	1	PV
MAXZIDE TAB 75-50	3	PV
MAXZIDE-25 TAB	3	PV
<i>spironolactone &amp; hydrochlorothiazide tab 25-25 mg</i>	1	PV
<i>triamterene &amp; hydrochlorothiazide cap 37.5-25 mg</i>	1	PV
<i>triamterene &amp; hydrochlorothiazide tab 37.5-25 mg</i>	1	PV
<i>triamterene &amp; hydrochlorothiazide tab 75-50 mg</i>	1	PV

### **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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
BUMEX TAB 0.5MG	3	
EDECIN 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	
SOAANZ TAB 20MG	NC	
SOAANZ TAB 40MG	NC	
SOAANZ TAB 60MG	NC	
SOD EDECIN 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	
<b>OSMOTIC DIURETICS</b>		
<i>mannitol iv soln 20%</i>	1	
<i>mannitol iv soln 25%</i>	1	
<i>osmitrol inj 10%</i>	1	
<i>osmitrol inj 15%</i>	1	
<i>osmitrol vfx inj 20%</i>	1	
<b>POTASSIUM SPARING DIURETICS</b>		
ALDACTONE TAB 25MG	2	
ALDACTONE TAB 50MG	2	
ALDACTONE TAB 100MG	2	
<i>amiloride hcl tab 5 mg</i>	1	
CAROSPIR SUS 25MG/5ML	NC	
DYRENIUM CAP 50MG	NC	
DYRENIUM CAP 100MG	NC	
<i>spironolactone tab 25 mg</i>	1	
<i>spironolactone tab 50 mg</i>	1	
<i>spironolactone tab 100 mg</i>	1	
<i>triamterene cap 50 mg</i>	2	
<i>triamterene cap 100 mg</i>	2	
<b>THIAZIDES AND THIAZIDE-LIKE DIURETICS</b>		
<i>chlorothiazide sodium for inj 500 mg</i>	1	
<i>chlorthalidone tab 25 mg</i>	1	PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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>metolazone tab 2.5 mg</i>	1	
<i>metolazone tab 5 mg</i>	1	
<i>metolazone tab 10 mg</i>	1	
SOD DIURIL INJ 500MG	3	
THALITONE TAB 15MG	3	PV

## **ENDOCRINE AND METABOLIC AGENTS - MISC.**

### **ADRENAL STEROID INHIBITORS**

ISTURISA TAB 1MG	NC	
ISTURISA TAB 5MG	NC	
ISTURISA TAB 10MG	NC	
RECORLEV TAB 150MG	NC	

### **BONE DENSITY REGULATORS**

ACTONEL TAB 35MG	3	PV
ACTONEL TAB 150MG	3	PV
<i>alendronate sodium oral soln 70 mg/75ml</i>	2	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 70 mg</i>	1	PV
AELVIA TAB	3	PV
BINOSTO TAB 70MG	3	ST; PV
<i>calcitonin (salmon) inj 200 unit/ml</i>	1	
<i>calcitonin (salmon) nasal soln 200 unit/act</i>	1	PV
EVENITY INJ 105MG	NC	
FORTEO INJ 600/2.4	5	SP, PA, QL; PV
FOSAMAX + D TAB 70-2800	3	ST; PV
FOSAMAX + D TAB 70-5600	3	ST; PV
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
MIACALCIN INJ 200/ML	NC	
MIACALCIN INJ 400/2ML	NC	
NATPARA INJ 25MCG	6	SP, PA, QL
NATPARA INJ 50MCG	6	SP, PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
NATPARA INJ 75MCG	6	SP, PA, QL
NATPARA INJ 100MCG	6	SP, PA, QL
<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	
PROLIA INJ 60MG/ML	5	SP, PA, QL; PV
RECLAST INJ 5/100ML	6	SP, PA; PV
<i>risedronate sodium tab 5 mg</i>	1	PV
<i>risedronate sodium tab 30 mg</i>	2	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>	1	PV
TERIPARATIDE INJ	NC	
TYMLOS INJ	5	SP, PA, QL; PV
XGEVA INJ	6	SP, PA
<i>zoledronic acid inj conc for iv infusion 4 mg/5ml</i>	4	SP, PA
<i>zoledronic acid iv soln 4 mg/100ml</i>	4	SP, PA
<i>zoledronic acid iv soln 5 mg/100ml</i>	4	SP, PA; PV
ZOLEDRONIC INJ 4/100ML	6	SP, PA
<b>CORTICOTROPIN</b>		
ACTHAR INJ 80UNIT	6	SP, PA, QL
CORTROPHIN GEL 80UNIT	6	SP, PA, QL
<b>FERTILITY REGULATORS</b>		
CHOR GONADOT INJ 10000UNT	NC	
<i>clomid tab 50mg</i>	1	PA
<i>clomiphene citrate tab 50 mg</i>	1	PA
FOLLISTIM AQ INJ 300UNIT	NC	
FOLLISTIM AQ INJ 600UNIT	NC	
FOLLISTIM AQ INJ 900UNIT	NC	
GONAL-F INJ 450UNIT	5	SP, PA, QL
GONAL-F INJ 1050UNIT	5	SP, PA, QL
GONAL-F RFF INJ 75UNIT	5	SP, PA, QL
GONAL-F RFF INJ 300/0.5	5	SP, PA, QL
GONAL-F RFF INJ 450/0.75	5	SP, PA, QL
GONAL-F RFF INJ 900/1.5	5	SP, PA, QL
MENOPUR INJ 75UNIT	5	SP, PA
NOVAREL INJ 5000UNIT	NC	
OVIDREL INJ	5	SP, PA
PREGNYL INJ 10000UNT	NC	
<b>GNRH/LHRH ANTAGONISTS</b>		
<i>cetrotide acetate for inj kit 0.25 mg</i>	4	SP, PA
CETROTIDE KIT 0.25MG	5	SP, PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>fyremadel sol 250/0.5</i>	4	SP, PA
GANIRELIX AC INJ 250/0.5	6	SP, PA
<i>ganirelix acetate soln prefilled syringe 250 mcg/0.5ml</i>	4	SP, PA
ORILISSA TAB 150MG	2	PA
ORILISSA TAB 200MG	2	PA
<b>GROWTH HORMONE RECEPTOR ANTAGONISTS</b>		
SOMAVERT INJ 10MG	NC	
SOMAVERT INJ 15MG	NC	
SOMAVERT INJ 20MG	NC	
SOMAVERT INJ 25MG	NC	
SOMAVERT INJ 30MG	NC	
<b>GROWTH HORMONE RELEASING HORMONES (GHRH)</b>		
EGRIFTA SV INJ 2MG	6	SP, PA, QL
<b>GROWTH HORMONES</b>		
GENOTROPIN INJ 0.2MG	5	SP, PA
GENOTROPIN INJ 0.4MG	5	SP, PA
GENOTROPIN INJ 0.6MG	5	SP, PA
GENOTROPIN INJ 0.8MG	5	SP, PA
GENOTROPIN INJ 1.2MG	5	SP, PA
GENOTROPIN INJ 1.4MG	5	SP, PA
GENOTROPIN INJ 1.6MG	5	SP, PA
GENOTROPIN INJ 1.8MG	5	SP, PA
GENOTROPIN INJ 1MG	5	SP, PA
GENOTROPIN INJ 2MG	5	SP, PA
GENOTROPIN INJ 5MG	5	SP, PA
GENOTROPIN INJ 12MG	5	SP, PA
HUMATROPE INJ 5MG	NC	
HUMATROPE INJ 6MG	NC	
HUMATROPE INJ 12MG	NC	
HUMATROPE INJ 24MG	NC	
NGENLA INJ 24/1.2ML	NC	
NGENLA INJ 60/1.2ML	NC	
NORDITROPIN INJ 5/1.5ML	5	SP, PA
NORDITROPIN INJ 10/1.5ML	5	SP, PA
NORDITROPIN INJ 15/1.5ML	5	SP, PA
NORDITROPIN INJ 30/3ML	5	SP, PA
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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
SAIZEN INJ 8.8MG	NC	
SEROSTIM INJ 4MG	6	SP, PA
SEROSTIM INJ 5MG	6	SP, PA
SEROSTIM INJ 6MG	6	SP, PA
SKYTROFA INJ 3.6MG	NC	
SKYTROFA INJ 3MG	NC	
SKYTROFA INJ 4.3MG	NC	
SKYTROFA INJ 5.2MG	NC	
SKYTROFA INJ 6.3MG	NC	
SKYTROFA INJ 7.6MG	NC	
SKYTROFA INJ 9.1MG	NC	
SKYTROFA INJ 11MG	NC	
SKYTROFA INJ 13.3MG	NC	
SOGROYA INJ 5MG/1.5	NC	
SOGROYA INJ 10MG/1.5	NC	
SOGROYA INJ 15MG/1.5	NC	
ZOMACTON INJ 5MG	NC	
ZOMACTON INJ 10MG	NC	
ZORBTIVE INJ 8.8MG	6	SP, PA
<b>HORMONE RECEPTOR MODULATORS</b>		
EVISTA TAB 60MG	3	PV
OSPHENA TAB 60MG	NC	
<i>raloxifene hcl tab 60 mg</i>	1	ACA, PV
<b>INSULIN-LIKE GROWTH FACTOR RECEPTOR INHIBITORS</b>		
TEPEZZA INJ 500MG	6	SP, PA
<b>INSULIN-LIKE GROWTH FACTORS (SOMATOMEDINS)</b>		
INCRELEX INJ 40MG/4ML	6	SP, PA
<b>LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS</b>		
FENSOLVI INJ 45MG	5	SP, PA, QL
LUPR DEP-PED INJ 3M 30MG	5	SP, PA, QL
LUPR DEP-PED INJ 7.5MG	5	SP, PA, QL
LUPR DEP-PED INJ 11.25MG	5	SP, PA, QL
LUPR DEP-PED INJ 15MG	5	SP, PA, QL
SUPPRELIN LA KIT 50MG	5	SP, PA
SYNAREL SOL 2MG/ML	3	PA
TRIPTODUR SUS 22.5MG	5	SP, PA
<b>MENOPAUSAL SYMPTOMS SUPPRESSANTS</b>		
VEOZAH TAB 45MG	NC	
<b>METABOLIC MODIFIERS</b>		
ALDURAZYME INJ 2.9MG/5M	6	SP, PA
AMMONUL INJ 10%	3	
<i>betaine powder for oral solution</i>	4	SP, PA
BRINEURA KIT 150/5ML	NC	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
BUPHENYL POW	NC	
BUPHENYL TAB 500MG	NC	
<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	
CARBAGLU TAB 200MG	NC	
<i>carglumic acid soluble tab 200 mg</i>	4	SP, PA
CARNITOR INJ 1GM/5ML	3	
CARNITOR SF SOL 1GM/10ML	NC	
CARNITOR SOL 1GM/10ML	NC	
CARNITOR TAB 330MG	NC	
<i>cinacalcet hcl tab 30 mg (base equiv)</i>	4	SP, PA, QL
<i>cinacalcet hcl tab 60 mg (base equiv)</i>	4	SP, PA, QL
<i>cinacalcet hcl tab 90 mg (base equiv)</i>	4	SP, PA, QL
CITRULLINE TAB EASY 1GM	3	
CRYSVITA INJ 10MG/ML	6	PA, QL
CRYSVITA INJ 20MG/ML	6	PA, QL
CRYSVITA INJ 30MG/ML	6	PA, QL
CYSTADANE POW	NC	
<i>doxercalciferol cap 0.5 mcg</i>	1	
<i>doxercalciferol cap 1 mcg</i>	1	
<i>doxercalciferol cap 2.5 mcg</i>	1	
<i>doxercalciferol inj 4 mcg/2ml (2 mcg/ml)</i>	1	
ELAPRASE INJ 6MG/3ML	6	SP, PA
FABRAZYME INJ 5MG	6	SP, PA
FABRAZYME INJ 35MG	6	SP, PA
GALAFOLD CAP 123MG	6	SP, PA, QL
HECTOROL INJ 4MCG/2ML	3	
<i>javygtor pak 100mg</i>	4	SP, PA
<i>javygtor pow 500mg</i>	4	SP, PA
<i>javygtor tab 100mg</i>	4	SP, PA
KANUMA INJ 20/10ML	6	SP, PA
KUVAN POW 100MG	NC	
KUVAN POW 500MG	NC	
KUVAN TAB 100MG	NC	
LAMZEDE INJ 10MG	NC	
<i>levocarnitine inj 200 mg/ml</i>	1	
<i>levocarnitine oral soln 1 gm/10ml (10%)</i>	1	
<i>levocarnitine tab 330 mg</i>	1	
LUMIZYME INJ 50MG	6	SP, PA
MEPSEVII INJ 10MG/5ML	6	SP, PA
MYALEPT INJ 11.3MG	6	SP, PA, QL
NAGLAZYME INJ 1MG/ML	6	SP, PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
NEXVIAZYME INJ 100MG	NC	
<i>nitisinone cap 2 mg</i>	4	SP, PA
<i>nitisinone cap 5 mg</i>	4	SP, PA
<i>nitisinone cap 10 mg</i>	4	SP, PA
NITYR TAB 2MG	NC	
NITYR TAB 5MG	NC	
NITYR TAB 10MG	NC	
ORFADIN CAP 2MG	5	SP, PA
ORFADIN CAP 5MG	5	SP, PA
ORFADIN CAP 10MG	5	SP, PA
ORFADIN CAP 20MG	5	SP, PA
ORFADIN SUS 4MG/ML	5	SP, PA
PALYNZIQ INJ 2.5/0.5	NC	
PALYNZIQ INJ 10/0.5ML	NC	
PALYNZIQ INJ 20MG/ML	NC	
<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	
PARSABIV INJ 2.5-0.5	NC	
PARSABIV INJ 5MG/ML	NC	
PARSABIV INJ 10MG/2ML	NC	
PHEBURANE MIS 483/GM	6	SP, PA, QL
RAVICTI LIQ 1.1GM/ML	NC	
RAYALDEE CAP 30MCG	3	
REVCIVI INJ 1.6MG/ML	6	SP
ROCALTROL CAP 0.5MCG	2	
ROCALTROL CAP 0.25MCG	2	
ROCALTROL SOL 1MCG/ML	2	
<i>sapropterin dihydrochloride powder packet 100 mg</i>	4	SP, PA
<i>sapropterin dihydrochloride powder packet 500 mg</i>	4	SP, PA
<i>sapropterin dihydrochloride tab 100 mg</i>	4	SP, PA
SENSIPAR TAB 30MG	6	SP, PA, QL
SENSIPAR TAB 60MG	6	SP, PA, QL
SENSIPAR TAB 90MG	6	SP, PA, QL
<i>sodium benzoate &amp; sodium phenylacetate iv soln 10-10%</i>	1	
<i>sodium phenylbutyrate oral powder 3 gm/teaspoonful</i>	4	SP, PA, QL
<i>sodium phenylbutyrate tab 500 mg</i>	4	SP, PA, QL
STRENSIQ INJ 18/0.45	6	SP, PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
STRENSIQ INJ 28/0.7ML	6	SP, PA
STRENSIQ INJ 40MG/ML	6	SP, PA
STRENSIQ INJ 80/0.8ML	6	SP, PA
VIMIZIM INJ 5MG/5ML	6	SP, PA
XENPOZYME INJ 4MG	NC	
XENPOZYME SOL 20MG	NC	
XURIDEN POW 2GM	6	SP, QL
ZEMPLAR CAP 1MCG	2	
ZEMPLAR CAP 2MCG	2	
ZEMPLAR INJ 2MCG/ML	3	
ZEMPLAR INJ 5MCG/ML	3	

### **MINERALOCORTICOID RECEPTOR ANTAGONISTS**

KERENDIA TAB 10MG	2	PA
KERENDIA TAB 20MG	2	PA

### **NATRIURETIC PEPTIDES**

VOXZOGO INJ 0.4MG	6	SP, PA, QL
VOXZOGO INJ 0.56MG	6	SP, PA, QL
VOXZOGO INJ 1.2MG	6	SP, PA, QL

### **POSTERIOR PITUITARY HORMONES**

DDAVP INJ 4MCG/ML	3	
DDAVP TAB 0.1MG	3	
DDAVP TAB 0.2MG	3	
<i>desmopressin acetate inj 4 mcg/ml</i>	2	
<i>desmopressin acetate nasal spray soln 0.01%</i>	1	
<i>desmopressin acetate nasal spray soln 0.01% (refrigerated)</i>	2	
<i>desmopressin acetate preservative free (pf) inj 4 mcg/ml</i>	2	
<i>desmopressin acetate tab 0.1 mg</i>	1	
<i>desmopressin acetate tab 0.2 mg</i>	1	
NOCDURNA SUB 27.7MCG	3	
NOCDURNA SUB 55.3MCG	3	
VASOPRE/NAACL INJ 100/100	NC	
VASOPRE/NAACL INJ 100/250	NC	
<i>vasopressin iv soln 20 unit/ml (for iv infusion)</i>	1	
VASOSTRICT INJ 20UNT/ML	3	
VASOSTRICT SOL	3	

### **PROLACTIN INHIBITORS**

<i>cabergoline tab 0.5 mg</i>	1	
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### **SOMATOSTATIC AGENTS**

LANREOTIDE INJ 120/.5ML	6	SP, PA, QL
MYCAPSSA CAP 20MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>octreotide acetate inj 50 mcg/ml (0.05 mg/ml)</i>	4	SP, PA, QL
<i>octreotide acetate inj 100 mcg/ml (0.1 mg/ml)</i>	4	SP, PA, QL
<i>octreotide acetate inj 200 mcg/ml (0.2 mg/ml)</i>	4	SP, PA, QL
<i>octreotide acetate inj 500 mcg/ml (0.5 mg/ml)</i>	4	SP, PA, QL
<i>octreotide acetate inj 1000 mcg/ml (1 mg/ml)</i>	4	SP, PA, QL
<i>octreotide acetate subcutaneous soln pref syr 50 mcg/ml</i>	4	SP, PA, QL
<i>octreotide acetate subcutaneous soln pref syr 100 mcg/ml</i>	4	SP, PA, QL
<i>octreotide acetate subcutaneous soln pref syr 500 mcg/ml</i>	4	SP, PA, QL
SANDOSTATIN INJ 50MCG/ML	6	SP, PA, QL
SANDOSTATIN INJ 100MCG	6	SP, PA, QL
SANDOSTATIN INJ 500MCG	6	SP, PA, QL
SANDOSTATIN KIT LAR 10MG	NC	
SANDOSTATIN KIT LAR 20MG	NC	
SANDOSTATIN KIT LAR 30MG	NC	
SIGNIFOR INJ 0.3MG/ML	6	SP, PA, QL
SIGNIFOR INJ 0.6MG/ML	6	SP, PA, QL
SIGNIFOR INJ 0.9MG/ML	6	SP, PA, QL
SIGNIFOR LAR INJ 20MG	NC	
SIGNIFOR LAR INJ 40MG	NC	
SIGNIFOR LAR INJ 60MG	NC	
SOMATULINE INJ 60/0.2ML	5	SP, PA, QL
SOMATULINE INJ 90/0.3ML	5	SP, PA, QL
SOMATULINE INJ 120/.5ML	5	SP, PA, QL

### **VASOPRESSIN RECEPTOR ANTAGONISTS**

JYNARQUE PAK 15MG	NC	
JYNARQUE PAK 30-15MG	NC	
JYNARQUE PAK 45-15MG	NC	
JYNARQUE PAK 60-30MG	NC	
JYNARQUE PAK 90-30MG	NC	
JYNARQUE TAB 15MG	NC	
JYNARQUE TAB 30MG	NC	
SAMSCA TAB 15MG	2	SP, PA, QL
SAMSCA TAB 30MG	2	SP, PA
<i>tolvaptan tab 15 mg</i>	4	SP, PA, QL
<i>tolvaptan tab 30 mg</i>	4	SP, PA
VAPRISOL INJ 20/100ML	3	

### **ESTROGENS**

Drug Name	Drug Tier	Requirements/Limits
<b>ESTROGEN COMBINATIONS</b>		
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	
ANGELIQ TAB 0.25-0.5	3	
BIJUVA CAP 1-100MG	3	
CLIMARA PRO DIS WEEKLY	2	
COMBIPATCH DIS	2	
DUAVEE TAB 0.45-20	2	
<i>estradiol &amp; norethindrone acetate tab 0.5-0.1 mg</i>	1	
<i>estradiol &amp; norethindrone acetate tab 1-0.5 mg</i>	1	
<i>fyavolv tab 0.5-2.5</i>	1	
<i>fyavolv tab 1-5</i>	1	
<i>jinteli tab 1mg-5mcg</i>	1	
<i>mimvey tab 1-0.5mg</i>	1	
MYFEMBREE TAB	2	PA
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	1	
<i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i>	1	
ORIAHNN CAP	2	PA
PREMPHASE TAB	2	
PREMPRO TAB	2	
PREMPRO TAB 0.3-1.5	2	
PREMPRO TAB 0.45-1.5	2	
PREMPRO TAB 0.625-5	2	
<b>ESTROGENS</b>		
ALORA DIS 0.1MG	3	
ALORA DIS 0.025MG	3	
ALORA DIS 0.075MG	3	
CLIMARA DIS 0.1MG	NC	
CLIMARA DIS 0.05MG	NC	
CLIMARA DIS 0.06MG	NC	
CLIMARA DIS 0.025MG	NC	
CLIMARA DIS 0.075MG	NC	
CLIMARA DIS 0.0375MG	NC	
DELESTROGEN INJ 10MG/ML	3	
DELESTROGEN INJ 20MG/ML	3	
DELESTROGEN INJ 40MG/ML	3	
DEPO-ESTRADI INJ 5MG/ML	3	
DIVIGEL GEL 0.5MG	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
DIVIGEL GEL 0.25MG	2	
DIVIGEL GEL 0.75MG	2	
DIVIGEL GEL 1.25MG	2	
DIVIGEL GEL 1MG/GM	2	
<i>dotti dis 0.1mg</i>	1	
<i>dotti dis 0.05mg</i>	1	
<i>dotti dis 0.025mg</i>	1	
<i>dotti dis 0.075mg</i>	1	
<i>dotti dis 0.0375mg</i>	1	
ELESTRIN GEL 0.06%	3	
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	
<i>estradiol tab 2 mg</i>	1	
<i>estradiol td gel 0.5 mg/0.5gm (0.1%)</i>	1	
<i>estradiol td gel 0.25 mg/0.25gm (0.1%)</i>	1	
<i>estradiol td gel 0.75 mg/0.75gm (0.1%)</i>	1	
<i>estradiol td gel 1 mg/gm (0.1%)</i>	1	
<i>estradiol td gel 1.25 mg/1.25gm (0.1%)</i>	1	
<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	
<i>estradiol valerate im in oil 20 mg/ml</i>	1	
<i>estradiol valerate im in oil 40 mg/ml</i>	1	
ESTROGEL GEL	3	
EVAMIST SPR 1.53MG	2	
<i>lyllana dis 0.1mg</i>	1	
<i>lyllana dis 0.05mg</i>	1	
<i>lyllana dis 0.025mg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>lyllana dis 0.075mg</i>	1	
<i>lyllana dis 0.0375mg</i>	1	
MENEST TAB 0.3MG	NC	
MENEST TAB 0.625MG	NC	
MENEST TAB 1.25MG	NC	
MENOSTAR DIS 14MCG	3	
MINIVELLE DIS 0.1MG	NC	
MINIVELLE DIS 0.05MG	NC	
MINIVELLE DIS 0.025MG	NC	
MINIVELLE DIS 0.075MG	NC	
MINIVELLE DIS 0.0375MG	NC	
PREMARIN INJ 25MG	3	
PREMARIN TAB 0.3MG	NC	
PREMARIN TAB 0.9MG	NC	
PREMARIN TAB 0.45MG	NC	
PREMARIN TAB 0.625MG	NC	
PREMARIN TAB 1.25MG	NC	
VIVELLE-DOT DIS 0.1MG	NC	
VIVELLE-DOT DIS 0.05MG	NC	
VIVELLE-DOT DIS 0.025MG	NC	
VIVELLE-DOT DIS 0.075MG	NC	
VIVELLE-DOT DIS 0.0375MG	NC	

## **FLUOROQUINOLONES**

### **FLUOROQUINOLONES**

BAXDELA INJ 300MG	3	
BAXDELA TAB 450MG	3	
CIPRO (5%) SUS 250MG/5	3	
CIPRO (10%) SUS 500MG/5	3	
CIPRO TAB 250MG	3	
CIPRO TAB 500MG	3	
<i>ciprofloxacin 200 mg/100ml in d5w</i>	1	
<i>ciprofloxacin 400 mg/200ml in d5w</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>levofloxacin in d5w iv soln 250 mg/50ml</i>	1	
<i>levofloxacin in d5w iv soln 500 mg/100ml</i>	1	
<i>levofloxacin in d5w iv soln 750 mg/150ml</i>	1	
<i>levofloxacin iv soln 25 mg/ml</i>	1	
<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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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 400/250	NC	
<i>ofloxacin tab 300 mg</i>	2	
<i>ofloxacin tab 400 mg</i>	1	

## **GASTROINTESTINAL AGENTS - MISC.**

### **AGENTS FOR CHRONIC IDIOPATHIC CONSTIPATION (CIC)**

TRULANCE TAB 3MG	3	PA
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### **BILE ACID SYNTHESIS DISORDER AGENTS**

CHOLBAM CAP 50MG	6	SP, PA
CHOLBAM CAP 250MG	6	SP, PA

### **FARNESOID X RECEPTOR (FXR) AGONISTS**

OCALIVA TAB 5MG	6	SP, PA, QL
OCALIVA TAB 10MG	6	SP, PA, QL

### **GALLSTONE SOLUBILIZING AGENTS**

ACTIGALL CAP 300MG	2	
CHENODAL TAB 250MG	6	SP, PA
URSO 250 TAB 250MG	2	
URSO FORTE TAB 500MG	2	
<i>ursodiol cap 300 mg</i>	1	
<i>ursodiol tab 250 mg</i>	1	
<i>ursodiol tab 500 mg</i>	1	

### **GASTROINTESTINAL ANTIALLERGY AGENTS**

<i>cromolyn sodium oral conc 100 mg/5ml</i>	2	
GASTROCROM CON 100/5ML	3	

### **GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATORS**

AMITIZA CAP 8MCG	NC	
AMITIZA CAP 24MCG	NC	
<i>lubiprostone cap 8 mcg</i>	2	
<i>lubiprostone cap 24 mcg</i>	2	

### **GASTROINTESTINAL STIMULANTS**

DEXPANTHENOL INJ 250MG/ML	3	
<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	



Drug Name	Drug Tier	Requirements/Limits
REGLAN TAB 5MG	3	
REGLAN TAB 10MG	3	

### **ILEAL BILE ACID TRANSPORTER (IBAT) INHIBITORS**

BYLVAY CAP 200MCG	NC	
BYLVAY CAP 400MCG	NC	
BYLVAY CAP 600MCG	NC	
BYLVAY CAP 1200MCG	NC	
LIVMARLI SOL 9.5MG/ML	6	SP, PA, QL

### **INFLAMMATORY BOWEL AGENTS**

APRISO CAP 0.375GM	3	
ASACOL HD TAB 800MG	NC	
AZULFIDINE TAB 500MG	3	
AZULFIDINE TAB 500MG EN	3	
<i>balsalazide disodium cap 750 mg</i>	1	
CANASA SUP 1000MG	3	
CIMZIA KIT 200MG	5	SP, PA, QL; Preferred for Non-Radiographic Axial Spondyloarthritis
CIMZIA PREFL KIT 200MG/ML	5	SP, PA, QL; Preferred for Non-Radiographic Axial Spondyloarthritis
CIMZIA START KIT 200MG/ML	5	SP, PA, QL; Preferred for Non-Radiographic Axial Spondyloarthritis
COLAZAL CAP 750MG	NC	
DELZICOL CAP 400MG	NC	
DIPENTUM CAP 250MG	3	
ENTYVIO INJ 300MG	NC	
INFLECTRA INJ 100MG	NC	
LIALDA TAB 1.2GM	NC	
<i>mesalamine cap dr 400 mg</i>	2	
<i>mesalamine cap er 24hr 0.375 gm</i>	2	
<i>mesalamine cap er 500 mg</i>	2	
<i>mesalamine enema 4 gm</i>	2	
<i>mesalamine rectal enema 4 gm &amp; cleanser wipe kit</i>	2	
<i>mesalamine suppos 1000 mg</i>	2	
<i>mesalamine tab delayed release 1.2 gm</i>	2	
<i>mesalamine tab delayed release 800 mg</i>	2	
PENTASA CAP 250MG CR	NC	
PENTASA CAP 500MG CR	NC	
REMICADE INJ 100MG	5	SP, PA, QL
RENFLEXIS INJ 100MG	NC	
ROWASA KIT 4GM	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
SFROWASA ENE 4GM	3	
SKYRIZI INJ 180/1.2	5	SP, PA, QL; Preferred for Psoriasis, Psoriatic Arthritis, Crohn's disease
SKYRIZI INJ 360/2.4	5	SP, PA, QL; Preferred for Psoriasis, Psoriatic Arthritis, Crohn's disease
SKYRIZI SOL 60MG/ML	5	SP, PA, QL; Preferred for Psoriasis, Psoriatic Arthritis, Crohn's disease
STELARA INJ 5MG/ML	5	SP, PA, QL
<i>sulfasalazine tab 500 mg</i>	1	
<i>sulfasalazine tab delayed release 500 mg</i>	1	
<b>INTESTINAL ACIDIFIERS</b>		
<i>enulose sol 10gm/15</i>	1	
<i>generlac sol 10gm/15</i>	1	
<i>lactulose (encephalopathy) solution 10 gm/15ml</i>	1	
<b>IRRITABLE BOWEL SYNDROME (IBS) AGENTS</b>		
<i>alose tron hcl tab 0.5 mg (base equiv)</i>	2	
<i>alose tron hcl tab 1 mg (base equiv)</i>	2	
IBSRELA TAB 50MG	NC	
LINZESS CAP 72MCG	2	
LINZESS CAP 145MCG	2	
LINZESS CAP 290MCG	2	
LOTRONEX TAB 0.5MG	3	
LOTRONEX TAB 1MG	3	
VIBERZI TAB 75MG	2	
VIBERZI TAB 100MG	2	
ZELNORM TAB 6MG	NC	
<b>LIVE FECAL MICROBIOTA</b>		
VOWST CAP	6	SP, PA, QL
<b>PERIPHERAL OPIOID RECEPTOR ANTAGONISTS</b>		
<i>alvimopan cap 12 mg</i>	1	
ENTEREG CAP 12MG	3	
MOVANTIK TAB 12.5MG	NC	
MOVANTIK TAB 25MG	NC	
RELISTOR INJ 8/0.4ML	3	PA
RELISTOR INJ 12/0.6ML	3	PA
RELISTOR TAB 150MG	3	PA
SYMPROIC TAB 0.2MG	2	PA

Drug Name	Drug Tier	Requirements/Limits
<b>PHOSPHATE BINDER AGENTS</b>		
AURYXIA TAB 210MG	2	
<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 500 mg (elemental)</i>	NC	
<i>lanthanum carbonate chew tab 750 mg (elemental)</i>	NC	
<i>lanthanum carbonate chew tab 1000 mg (elemental)</i>	NC	
PHOSLYRA SOL	3	
RENAGEL TAB 800MG	3	
REVELA POW 0.8GM	NC	
REVELA POW 2.4GM	NC	
REVELA TAB 800MG	NC	
<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>	1	
<i>sevelamer hcl tab 400 mg</i>	2	
<i>sevelamer hcl tab 800 mg</i>	2	
VELPHORO CHW 500MG	2	
<b>SHORT BOWEL SYNDROME (SBS) AGENTS</b>		
GATTEX KIT 5MG	6	SP, PA, QL
<b>TRYPTOPHAN HYDROXYLASE INHIBITORS</b>		
XERMELO TAB 250MG	6	SP, PA, QL
<b>GENERAL ANESTHETICS</b>		
<b>ANESTHETICS - MISC.</b>		
AMIDATE INJ 2MG/ML	3	
DIPRIVAN INJ	3	
DIPRIVAN INJ 100/10ML	3	
DIPRIVAN INJ 200/20ML	3	
DIPRIVAN INJ 500/50ML	3	
<i>etomidate iv soln 2 mg/ml</i>	1	
KETALAR INJ 10MG/ML	3	
KETALAR INJ 50MG/ML	3	
KETALAR INJ 100MG/ML	3	
<i>ketamine hcl inj 10 mg/ml</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>ketamine hcl inj 50 mg/ml</i>	1	
<i>ketamine hcl inj 100 mg/ml</i>	1	
KETAMINE INJ 10MG/ML	3	
<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>	2	
<i>propoven inj 500/50ml</i>	1	
<b>BARBITURATE ANESTHETICS</b>		
BREVITAL SOD INJ 500MG	3	
<b>VOLATILE ANESTHETICS</b>		
<i>desflurane inhal soln</i>	1	
FORANE SOL	3	
<i>isoflurane inhal soln</i>	1	
<i>sevoflurane inhal soln</i>	1	
SUPRANE INH	3	
SUPRANE SOL	3	
<i>terrell sol</i>	1	
ULTANE SOL	3	
<b>GENITOURINARY AGENTS - MISCELLANEOUS</b>		
<b>ACIDIFIERS</b>		
K-PHOS TAB NO 2	3	
<b>ALKALINIZERS</b>		
<i>cytra k gra crystals</i>	1	
ORACIT SOL	3	
<i>pot &amp; sod citrates w/ cit ac soln 550-500-334 mg/5ml</i>	2	
<i>potassium citrate &amp; citric acid soln 1100-334 mg/5ml</i>	1	
<i>potassium citrate tab er 5 meq (540 mg)</i>	1	
<i>potassium citrate tab er 10 meq (1080 mg)</i>	1	
<i>potassium citrate tab er 15 meq (1620 mg)</i>	1	
<i>sodium citrate &amp; citric acid soln 500-334 mg/5ml</i>	1	
UROCIT-K 5 TAB	2	
UROCIT-K 10 TAB	2	
UROCIT-K 15 TAB	2	
<b>CYSTINOSIS AGENTS</b>		
CYSTAGON CAP 50MG	5	SP, PA
CYSTAGON CAP 150MG	5	SP, PA
PROCYSBI CAP 25MG	6	SP, PA, QL
PROCYSBI CAP 75MG	6	SP, PA, QL

Drug Name	Drug Tier	Requirements/Limits
<b>GENITOURINARY IRRIGANTS</b>		
<i>acetic acid irrigation soln 0.25%</i>	1	
<i>argyl saline sol 0.9% irr</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>	1	
RENACIDIN SOL	3	
<i>sodium chloride irrigation soln 0.9%</i>	1	
SORBITOL SOL 3% IRR	3	
SORBITOL-MAN SOL	3	
<b>HYPEROXALURIA AGENTS</b>		
OXLUMO INJ 94.5/0.5	NC	
<b>INTERSTITIAL CYSTITIS AGENTS</b>		
ELMIRON CAP 100MG	NC	
RIMSO-50 SOL 50%	NC	
<b>PROSTATIC HYPERTROPHY AGENTS</b>		
<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	
<i>dutasteride cap 0.5 mg</i>	1	
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	1	
ENTADFI CAP 5-5MG	NC	
<i>finasteride tab 5 mg</i>	1	
FLOMAX CAP 0.4MG	3	
JALYN CAP	NC	
PROSCAR TAB 5MG	3	
RAPAFLO CAP 4MG	NC	
RAPAFLO CAP 8MG	NC	
<i>silodosin cap 4 mg</i>	2	
<i>silodosin cap 8 mg</i>	1	
<i>tamsulosin hcl cap 0.4 mg</i>	1	
UROXATRAL TAB 10MG	NC	
<b>URINARY ANALGESICS</b>		
<i>phenazo tab 200mg</i>	2	
<b>URINARY STONE AGENTS</b>		
LITHOSTAT TAB 250MG	NC	
THIOLA EC TAB 100MG	NC	
THIOLA EC TAB 300MG	NC	
THIOLA TAB 100MG	NC	
<i>tiopronin tab 100 mg</i>	4	PA
<b>GOUT AGENTS</b>		

Drug Name	Drug Tier	Requirements/Limits
<b>GOUT AGENT COMBINATIONS</b>		
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	1	
<b>GOUT AGENTS</b>		
<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>	NC	
<i>colchicine tab 0.6 mg</i>	1	
COLCRYS TAB 0.6MG	NC	
<i>febuxostat tab 40 mg</i>	1	
<i>febuxostat tab 80 mg</i>	1	
KRYSTEXXA INJ 8MG/ML	6	SP, PA
MITIGARE CAP 0.6MG	1	
ULORIC TAB 40MG	NC	
ULORIC TAB 80MG	NC	
ZYLOPRIM TAB 100MG	3	
ZYLOPRIM TAB 300MG	3	
<b>URICOSURICS</b>		
<i>probenecid tab 500 mg</i>	1	
<b>HEMATOLOGICAL AGENTS - MISC.</b>		
<b>AMINOLEVULINATE SYNTHASE 1-DIRECTED SIRNA</b>		
GIVLAARI INJ 189MG/ML	NC	
<b>ANTIHEMOPHILIC PRODUCTS</b>		
ADVATE INJ 250UNIT	5	SP, PA; PV
ADVATE INJ 500UNIT	5	SP, PA; PV
ADVATE INJ 1000UNIT	5	SP, PA; PV
ADVATE INJ 1500UNIT	5	SP, PA; PV
ADVATE INJ 2000UNIT	5	SP, PA; PV
ADVATE INJ 3000UNIT	5	SP, PA; PV
ADVATE INJ 4000UNIT	5	SP, PA; PV
ADYNOVATE INJ 250UNIT	5	SP, PA; PV
ADYNOVATE INJ 500UNIT	5	SP, PA; PV
ADYNOVATE INJ 750UNIT	5	SP, PA; PV
ADYNOVATE INJ 1000UNIT	5	SP, PA; PV
ADYNOVATE INJ 1500UNIT	5	SP, PA; PV
ADYNOVATE INJ 2000UNIT	5	SP, PA; PV
ADYNOVATE INJ 3000UNIT	5	SP, PA; PV
AFSTYLA KIT 250UNIT	5	SP, PA; PV
AFSTYLA KIT 500UNIT	5	SP, PA; PV
AFSTYLA KIT 1000UNIT	5	SP, PA; PV
AFSTYLA KIT 1500UNIT	5	SP, PA; PV
AFSTYLA KIT 2000UNIT	5	SP, PA; PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
AFSTYLA KIT 2500UNIT	5	SP, PA; PV
AFSTYLA KIT 3000UNIT	5	SP, PA; PV
ALPHANINE SD INJ 500UNIT	6	SP, PA; PV
ALPHANINE SD INJ 1000UNIT	6	SP, PA; PV
ALPHANINE SD INJ 1500UNIT	6	SP, PA; PV
ALPROLIX INJ 250UNIT	5	SP, PA, QL
ALPROLIX INJ 500UNIT	5	SP, PA, QL
ALPROLIX INJ 1000UNIT	5	SP, PA, QL
ALPROLIX INJ 2000UNIT	5	SP, PA, QL
ALPROLIX INJ 3000UNIT	5	SP, PA, QL
ALPROLIX INJ 4000UNIT	5	SP, PA, QL
ALTUVIIIIO INJ 250 UNIT	NC	
ALTUVIIIIO INJ 500UNIT	NC	
ALTUVIIIIO INJ 1000UNIT	NC	
ALTUVIIIIO INJ 2000UNIT	NC	
ALTUVIIIIO INJ 3000UNIT	NC	
ALTUVIIIIO INJ 4000UNIT	NC	
BENEFIX INJ 250UNIT	NC	
BENEFIX INJ 500UNIT	NC	
BENEFIX INJ 1000UNIT	NC	
BENEFIX INJ 2000UNIT	NC	
BENEFIX INJ 3000UNIT	NC	
CORIFACT KIT	6	SP, PA; PV
ELOCTATE INJ 250UNIT	5	SP, PA; PV
ELOCTATE INJ 500UNIT	5	SP, PA; PV
ELOCTATE INJ 750UNIT	5	SP, PA; PV
ELOCTATE INJ 1000UNIT	5	SP, PA; PV
ELOCTATE INJ 1500UNIT	5	SP, PA; PV
ELOCTATE INJ 2000UNIT	5	SP, PA; PV
ELOCTATE INJ 3000UNIT	5	SP, PA; PV
ELOCTATE INJ 4000UNIT	5	SP, PA; PV
ELOCTATE INJ 5000UNIT	5	SP, PA; PV
ELOCTATE INJ 6000UNIT	5	SP, PA; PV
ESPEROCT INJ 500UNIT	5	SP, PA; PV
ESPEROCT INJ 1000UNIT	5	SP, PA; PV
ESPEROCT INJ 1500UNIT	5	SP, PA; PV
ESPEROCT INJ 2000UNIT	5	SP, PA; PV
ESPEROCT INJ 3000UNIT	5	SP, PA; PV
FEIBA INJ	NC	
FIBRYGA INJ 1GM	6	SP, PA
HEMLIBRA INJ 30MG/ML	6	SP, PA
HEMLIBRA INJ 60/0.4	6	SP, PA
HEMLIBRA INJ 105/0.7	6	SP, PA
HEMLIBRA INJ 150/ML	6	SP, PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
HEMOFIL M INJ 250UNIT	6	SP, PA; PV
HEMOFIL M INJ 500UNIT	6	SP, PA; PV
HEMOFIL M INJ 1000UNIT	6	SP, PA; PV
HEMOFIL M INJ 1700UNIT	6	SP, PA; PV
HUMATE-P SOL 250-600	6	SP, PA; PV
HUMATE-P SOL 500-1200	6	SP, PA; PV
HUMATE-P SOL 2400UNIT	6	SP, PA; PV
IDELVION SOL 250UNIT	6	SP, PA; PV
IDELVION SOL 500UNIT	6	SP, PA; PV
IDELVION SOL 1000UNIT	6	SP, PA; PV
IDELVION SOL 2000UNIT	6	SP, PA; PV
IDELVION SOL 3500UNIT	6	SP, PA; PV
IXINITY INJ 250UNIT	NC	
IXINITY INJ 500UNIT	NC	
IXINITY INJ 1000UNIT	NC	
IXINITY INJ 1500UNIT	NC	
IXINITY INJ 2000UNIT	NC	
IXINITY INJ 3000UNIT	NC	
JIVI INJ 500 UNIT	5	SP, PA; PV
JIVI INJ 1000UNIT	5	SP, PA; PV
JIVI INJ 2000UNIT	5	SP, PA; PV
JIVI INJ 3000UNIT	5	SP, PA; PV
KOATE INJ 250UNIT	6	SP, PA; PV
KOATE INJ 500 UNIT	6	SP, PA; PV
KOATE INJ 1000UNIT	6	SP, PA; PV
KOATE-DVI INJ 500UNIT	6	SP, PA; PV
KOATE-DVI INJ 1000UNIT	6	SP, PA; PV
KOGENATE FS INJ 250UNIT	5	SP, PA; PV
KOGENATE FS INJ 500UNIT	5	SP, PA; PV
KOGENATE FS INJ 1000UNIT	5	SP, PA; PV
KOGENATE FS INJ 2000UNIT	5	SP, PA; PV
KOGENATE FS INJ 3000UNIT	5	SP, PA; PV
KOVALTRY INJ 250UNIT	5	SP, PA; PV
KOVALTRY INJ 500UNIT	5	SP, PA; PV
KOVALTRY INJ 1000UNIT	5	SP, PA; PV
KOVALTRY INJ 2000UNIT	5	SP, PA; PV
KOVALTRY INJ 3000UNIT	5	SP, PA; PV
NOVOEIGHT INJ 250UNIT	5	SP, PA; PV
NOVOEIGHT INJ 500UNIT	5	SP, PA; PV
NOVOEIGHT INJ 1000UNIT	5	SP, PA; PV
NOVOEIGHT INJ 1500UNIT	5	SP, PA; PV
NOVOEIGHT INJ 2000UNIT	5	SP, PA; PV
NOVOEIGHT INJ 3000UNIT	5	SP, PA; PV
NOVOSEVEN RT INJ 1MG	5	SP, PA, QL



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
NOVOSEVEN RT INJ 2MG	5	SP, PA, QL
NOVOSEVEN RT INJ 5MG	5	SP, PA, QL
NOVOSEVEN RT INJ 8MG	5	SP, PA, QL
NUWIQ INJ 250UNIT	5	SP, PA; PV
NUWIQ INJ 500UNIT	5	SP, PA; PV
NUWIQ INJ 1000UNIT	5	SP, PA; PV
NUWIQ INJ 1500UNIT	5	SP, PA; PV
NUWIQ INJ 2000UNIT	5	SP, PA; PV
NUWIQ INJ 2500UNIT	5	SP, PA; PV
NUWIQ INJ 3000UNIT	5	SP, PA; PV
NUWIQ INJ 4000UNIT	5	SP, PA; PV
NUWIQ KIT 250UNIT	5	SP, PA; PV
NUWIQ KIT 500UNIT	5	SP, PA; PV
NUWIQ KIT 1000UNIT	5	SP, PA; PV
NUWIQ KIT 1500UNIT	5	SP, PA; PV
NUWIQ KIT 2000UNIT	5	SP, PA; PV
NUWIQ KIT 2500UNIT	5	SP, PA; PV
NUWIQ KIT 3000UNIT	5	SP, PA; PV
NUWIQ KIT 4000UNIT	5	SP, PA; PV
OBIZUR INJ 500 UNIT	6	SP, PA
PROFILNINE INJ 500UNIT	6	SP, PA; PV
PROFILNINE INJ 1000UNIT	6	SP, PA; PV
PROFILNINE INJ 1500UNIT	6	SP, PA; PV
REBINYN INJ 3000UNIT	5	SP, PA
REBINYN SOL 500UNIT	5	SP, PA
REBINYN SOL 1000UNIT	5	SP, PA
REBINYN SOL 2000UNIT	5	SP, PA
RECOMBINATE INJ	6	SP, PA; PV
RECOMBINATE INJ 220-400	6	SP, PA; PV
RECOMBINATE INJ 401-800	6	SP, PA; PV
RECOMBINATE INJ 801-1240	6	SP, PA; PV
RIASTAP SOL 1GM	6	SP, PA
RIXUBIS INJ 250 UNIT	NC	
RIXUBIS INJ 500UNIT	NC	
RIXUBIS INJ 1000UNIT	NC	
RIXUBIS INJ 2000UNIT	NC	
RIXUBIS INJ 3000UNIT	NC	
SEVENFACT INJ 1MG	5	SP, PA, QL
SEVENFACT INJ 5MG	5	SP, PA, QL
TRETTEN INJ	6	SP, PA; PV
VONVENDI INJ 650UNIT	NC	
VONVENDI INJ 1300UNIT	NC	
WILATE INJ	6	SP, PA
XYNTHA INJ 250UNIT	5	SP, PA; PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
XYNTHA INJ 500UNIT	5	SP, PA; PV
XYNTHA INJ 1000UNIT	5	SP, PA; PV
XYNTHA INJ 2000UNIT	5	SP, PA; PV
XYNTHA SOLOF INJ 500UNIT	5	SP, PA; PV
XYNTHA SOLOF INJ 1000UNIT	5	SP, PA; PV
XYNTHA SOLOF INJ 2000UNIT	5	SP, PA; PV
XYNTHA SOLOF INJ 3000UNIT	5	SP, PA; PV
XYNTHA SOLOF KIT 250UNIT	5	SP, PA; PV
<b>BRADYKININ B2 RECEPTOR ANTAGONISTS</b>		
FIRAZYR INJ 30MG/3ML	NC	
<i>icatibant acetate subcutaneous soln pref syr 30 mg/3ml</i>	4	SP, PA, QL
<i>sajazir inj 30mg/3ml</i>	4	SP, PA, QL
<b>COMPLEMENT INHIBITORS</b>		
BERINERT INJ 500UNIT	NC	
CINRYZE SOL 500 UNIT	NC	
EMPAVELI INJ 1080MG	5	SP, PA, QL
ENJAYMO SOL	NC	
HAEGARDA INJ 2000UNIT	6	SP, PA, QL; PV
HAEGARDA INJ 3000UNIT	6	SP, PA, QL; PV
RUCONEST INJ 2100UNIT	6	SP, PA, QL
SOLIRIS INJ 10MG/ML	6	SP, PA
TAVNEOS CAP 10MG	6	PA
ULTOMIRIS INJ 100MG/ML	6	SP, PA, QL
ULTOMIRIS INJ 300/30ML	6	SP, PA, QL
<b>HEMATAOLOGIC - TYROSINE KINASE INHIBITORS</b>		
TAVALISSE TAB 100MG	5	SP, PA, QL
TAVALISSE TAB 150MG	5	SP, PA, QL
<b>HEMATORHEOLOGIC AGENTS</b>		
<i>pentoxifylline tab er 400 mg</i>	1	
<b>HUMAN PROTEIN C</b>		
CEPROTIN INJ 500 UNIT	6	SP
CEPROTIN INJ 1000UNIT	6	SP
<b>PLASMA EXPANDERS</b>		
HESPAN INJ 6%/NAACL	3	
<i>hetastarch in sodium chloride inj 6-0.9%</i>	1	
HEXTEND SOL 6%	3	
<i>lmd 10%/d5w inj</i>	1	
<i>lmd 10%/nacl inj 0.9%</i>	1	
<b>PLASMA KALLIKREIN INHIBITORS</b>		
KALBITOR INJ 10MG/ML	6	SP, PA, QL
ORLADEYO CAP 110MG	5	SP, PA, QL; PV
ORLADEYO CAP 150MG	5	SP, PA, QL; PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
TAKHZYRO INJ 150MG/ML	5	SP, PA, QL; PV
TAKHZYRO INJ 300/2ML	5	SP, PA, QL; PV
<b>PLASMA PROTEINS</b>		
RYPLAZIM SOL 68.8MG	6	SP, PA
<b>PLATELET AGGREGATION INHIBITORS</b>		
AGGRASTAT INJ 3.75/15	NC	
AGGRASTAT INJ 5/100ML	3	
AGGRASTAT INJ 12.5/250	3	
AGRYLIN CAP 0.5MG	3	
<i>anagrelide hcl cap 0.5 mg</i>	2	
<i>anagrelide hcl cap 1 mg</i>	2	
<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	2	PV
BRILINTA TAB 60MG	2	PV
BRILINTA TAB 90MG	2	PV
<i>cilostazol tab 50 mg</i>	1	
<i>cilostazol tab 100 mg</i>	1	
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	1	PV
<i>clopidogrel bisulfate tab 300 mg (base equiv)</i>	2	PV
<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	3	PV
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	
KENGREAL SOL 50MG	NC	
PLAVIX TAB 75MG	NC	
<i>prasugrel hcl tab 5 mg (base equiv)</i>	1	PV
<i>prasugrel hcl tab 10 mg (base equiv)</i>	1	PV
YOSPRALA TAB 81-40MG	NC	
YOSPRALA TAB 325-40MG	NC	
ZONTIVITY TAB 2.08MG	NC	
<b>PROTAMINE</b>		
<i>protamine sulfate inj 10 mg/ml</i>	1	
<b>PYRUVATE KINASE ACTIVATORS</b>		
PYRUKYND TAB 5MG	NC	
PYRUKYND TAB 5MG TP	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PYRUKYND TAB 20MG	NC	
PYRUKYND TAB 20MGX5MG	NC	
PYRUKYND TAB 50MG	NC	
PYRUKYND TAB 50MGX20M	NC	
<b>THROMBOLYTIC AGENT - MISC</b>		
DEFITELIO INJ 200/2.5	NC	
<b>THROMBOLYTIC ENZYMES</b>		
ACTIVASE INJ 50MG	3	
ACTIVASE INJ 100MG	3	
CATHFLO ACTI INJ 2MG	3	
TNKASE KIT 50MG	3	
<b>HEMATOPOIETIC AGENTS</b>		
<b>AGENTS FOR GAUCHER DISEASE</b>		
CERDELGA CAP 84MG	5	SP, PA, QL
CEREZYME INJ 400UNIT	5	SP, PA, QL
ELELYSO INJ 200UNIT	NC	
<i>miglustat cap 100 mg</i>	4	SP, PA, QL
VPRIV INJ 400UNIT	6	SP, PA, QL
ZAVESCA CAP 100MG	6	SP, PA, QL
<b>AGENTS FOR SICKLE CELL DISEASE</b>		
ADAKVEO INJ 100/10ML	6	SP, PA
DROXIA CAP 200MG	3	
DROXIA CAP 300MG	3	
DROXIA CAP 400MG	3	
ENDARI POW 5GM	5	SP, PA, QL
OXBRYTA TAB 500MG	NC	
SIKLOS TAB 100MG	2	
SIKLOS TAB 1000MG	2	
<b>COBALAMINS</b>		
<i>cyanocobalamin inj 1000 mcg/ml</i>	1	
<i>dodex inj</i>	1	
<i>hydroxocobalamin acetate inj 1000 mcg/ml (base equivalent)</i>	1	
NASCOBAL SPR 500MCG	NC	
<b>FOLIC ACID/FOLATES</b>		
<i>fa-8 cap 800mcg</i>	0	OTC; ACA, PV
<i>folate tab 400mcg</i>	0	OTC; ACA, PV
<i>folic acid cap 0.8 mg</i>	0	OTC; ACA, PV
<i>folic acid inj 5 mg/ml</i>	1	
<i>folic acid tab 1 mg</i>	1	
<i>folic acid tab 400 mcg</i>	0	OTC; ACA, PV
<i>folic acid tab 800mcg</i>	0	OTC; ACA, PV
<i>sm folic acid tab 400mcg</i>	0	OTC; ACA, PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>yl folic aci tab 400mcg</i>	0	OTC; PV
<b>HEMATOPOIETIC GROWTH FACTORS</b>		
ARANESP INJ 10MCG	5	SP, PA, QL
ARANESP INJ 25MCG	5	SP, PA, QL
ARANESP INJ 40MCG	5	SP, PA, QL
ARANESP INJ 60MCG	5	SP, PA, QL
ARANESP INJ 100MCG	5	SP, PA, QL
ARANESP INJ 150MCG	5	SP, PA, QL
ARANESP INJ 200MCG	5	SP, PA, QL
ARANESP INJ 300MCG	5	SP, PA, QL
ARANESP INJ 500MCG	5	SP, PA, QL
DOPTELET TAB 20MG	5	SP, PA, QL
EPOGEN INJ 2000/ML	NC	
EPOGEN INJ 3000/ML	NC	
EPOGEN INJ 4000/ML	NC	
EPOGEN INJ 10000/ML	NC	
EPOGEN INJ 20000/ML	NC	
FULPHILA INJ 6/0.6ML	NC	
FYLNETRA INJ 6MG/0.6	5	SP, PA, QL
GRANIX INJ 300/0.5	NC	
GRANIX INJ 300/1ML	NC	
GRANIX INJ 480/0.8	NC	
GRANIX INJ 480/1.6	NC	
LEUKINE INJ 250MCG	NC	
MIRCERA INJ 30MCG	NC	
MIRCERA INJ 50MCG	NC	
MIRCERA INJ 75MCG	NC	
MIRCERA INJ 100MCG	NC	
MIRCERA INJ 150MCG	NC	
MIRCERA INJ 200MCG	NC	
MULPLETA TAB 3MG	6	SP, PA, QL
NEULASTA INJ 6MG/0.6M	NC	
NEULASTA KIT 6MG/0.6M	NC	
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	
NIVESTYM INJ 300/0.5	4	SP, PA
NIVESTYM INJ 300MCG	4	SP, PA
NIVESTYM INJ 480/0.8	4	SP, PA
NIVESTYM INJ 480MCG	4	SP, PA
NPLATE INJ 125MCG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
NPLATE INJ 250MCG	NC	
NPLATE INJ 500MCG	NC	
NYVEPRIA INJ 6/0.6ML	5	SP, PA, QL
PROCRIT INJ 2000/ML	5	SP, PA, QL
PROCRIT INJ 3000/ML	5	SP, PA, QL
PROCRIT INJ 4000/ML	5	SP, PA, QL
PROCRIT INJ 10000/ML	5	SP, PA, QL
PROCRIT INJ 20000/ML	5	SP, PA, QL
PROCRIT INJ 40000/ML	5	SP, PA, QL
PROMACTA PAK 25MG	5	SP, PA, QL
PROMACTA POW 12.5MG	5	SP, PA, QL
PROMACTA TAB 12.5MG	5	SP, PA, QL
PROMACTA TAB 25MG	5	SP, PA, QL
PROMACTA TAB 50MG	5	SP, PA, QL
PROMACTA TAB 75MG	5	SP, PA, QL
REBLOZYL INJ 25MG	NC	
REBLOZYL INJ 75MG	NC	
RELEUKO INJ 300MCG	NC	
RELEUKO INJ 480MCG	NC	
RETACRIT INJ 2000UNIT	4	SP, PA
RETACRIT INJ 3000UNIT	4	SP, PA
RETACRIT INJ 4000UNIT	4	SP, PA
RETACRIT INJ 10000UNT	4	SP, PA
RETACRIT INJ 20000UNI	4	SP, PA
RETACRIT INJ 40000UNT	4	SP, PA
ROLVEDON INJ 13.2MG	NC	
UDENYCA INJ 6MG/.6ML	NC	
ZARXIO INJ 300/0.5	NC	
ZARXIO INJ 480/0.8	NC	
ZIEXTENZO INJ 6/0.6ML	NC	

### **HEMATOPOIETIC MIXTURES**

ACTIVE FE TAB 75-1.25	3	
<i>corvita 150 tab</i>	1	
CORVITE 150 TAB	3	
CORVITE FE TAB	3	
<i>ferocon cap</i>	1	
<i>ferottrinsic cap</i>	1	
FERRO-PLEX TAB	3	
FOLIVANE-F CAP	3	
FOLIVANE-PLS CAP	3	
<i>foltrin cap</i>	1	
FUSION PAK SPRINKLE	NC	
FUSION PLUS CAP	3	
HEMATINIC/FA TAB	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
HEMATRON-AF TAB	3	
<i>hemocyte-f tab</i>	1	
ICAR-C PLUS TAB	3	
<i>iferex 150 cap forte</i>	1	
<i>k-tan plus cap</i>	1	
MULTIGEN PLS TAB	3	
MULTIGEN TAB	3	
MULTIGEN TAB FOLIC	3	
NUFERA TAB	3	
<i>poly-iron cap 150 fort</i>	1	
<i>polysacchari cap iron</i>	1	
TARON FORTE CAP	3	
<i>tricon cap</i>	1	
<i>trigels-f cap forte</i>	1	
<b>IRON</b>		
FERAHEME INJ 510/17ML	3	
FERRLECIT INJ 12.5MG/M	3	
<i>ferumoxytol inj 510 mg/17ml (30 mg/ml) (elemental fe)</i>	2	
INFED INJ 50MG/ML	3	
INJECTAFER INJ 100/2ML	3	
INJECTAFER INJ 750/15ML	3	
<i>sod ferric gluc cmplx in sucrose iv soln 12.5 mg/ml (fe eq)</i>	2	
TRIFERIC INJ AVNU	3	
VENOFER INJ 20MG/ML	3	
<b>STEM CELL MOBILIZERS</b>		
MOZOBIL INJ	6	SP, PA
<i>plerixafor subcutaneous inj 24 mg/1.2ml (20 mg/ml)</i>	4	SP, PA
<b>HEMOSTATICS</b>		
<b>HEMOSTATICS - SYSTEMIC</b>		
<i>aminocaproic acid inj 250 mg/ml</i>	1	
<i>aminocaproic acid oral soln 0.25 gm/ml</i>	2	
<i>aminocaproic acid tab 500 mg</i>	2	
<i>aminocaproic acid tab 1000 mg</i>	2	
CYKLOKAPRON INJ 100MG/ML	3	
LYSTEDA TAB 650MG	3	
<i>tranexamic acid iv soln 1000 mg/10ml (100 mg/ml)</i>	2	
<i>tranexamic acid tab 650 mg</i>	2	
<b>HEMOSTATICS - TOPICAL</b>		
ARTISS SOL 2ML	3	
ARTISS SOL 4ML	3	

Drug Name	Drug Tier	Requirements/Limits
ARTISS SOL 10ML	3	
RECOTHROM SOL 5000UNIT	3	
RECOTHROM SOL 20000UNT	3	
TACHOSIL PAD 4.8X4.8	3	
TACHOSIL PAD 9.5X4.8	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 KIT 2ML	3	
TISSEEL KIT 4ML	3	
TISSEEL KIT 10ML	3	
TISSEEL SOL 2ML	3	
TISSEEL SOL 4ML	3	
TISSEEL SOL 10ML	3	

## HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS

### BARBITURATE HYPNOTICS

NEMBUTAL SOD INJ 50MG/ML	3	
<i>pentobarbital sodium inj 50 mg/ml</i>	1	
<i>phenobarbital elixir 20 mg/5ml</i>	1	PV
<i>phenobarbital sodium inj 65 mg/ml</i>	1	
<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
SEZABY INJ 100MG	3	

### HYPNOTICS - TRICYCLIC AGENTS

<i>doxepin hcl (sleep) tab 3 mg (base equiv)</i>	2	
<i>doxepin hcl (sleep) tab 6 mg (base equiv)</i>	2	
SILENOR TAB 3MG	NC	
SILENOR TAB 6MG	NC	

### NON-BARBITURATE HYPNOTICS

AMBIEN CR TAB 6.25MG	3	PA, QL
AMBIEN CR TAB 12.5MG	3	PA, QL



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
AMBIEN TAB 5MG	3	PA, QL
AMBIEN TAB 10MG	3	PA, QL
DEXMEDE/NAACL INJ 20/5ML	3	
<i>dexmedetomidine hcl in nacl 0.9% iv soln 80 mcg/20ml</i>	1	
<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 iv soln 200 mcg/2ml</i>	1	
DORAL TAB 15MG	3	PA, QL
EDLUAR SUB 5MG	NC	
EDLUAR SUB 10MG	NC	
<i>estazolam tab 1 mg</i>	1	PA, QL
<i>estazolam tab 2 mg</i>	1	PA, QL
<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
<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
IGALMI MIS 120MCG	NC	
IGALMI MIS 180MCG	NC	
INTERMEZZO SUB 1.75MG	NC	
INTERMEZZO SUB 3.5MG	NC	
LUNESTA TAB 1MG	NC	
LUNESTA TAB 2MG	NC	
LUNESTA TAB 3MG	NC	
MIDAZOL/NAACL SOL 5MG/5ML	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 inj pf 2 mg/2ml (base equivalent)</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>midazolam hcl inj pf 5 mg/5ml (base equivalent)</i>	1	
<i>midazolam hcl inj pf 5 mg/ml (base equivalent)</i>	1	
<i>midazolam hcl inj pf 10 mg/2ml (base equivalent)</i>	1	
<i>midazolam hcl syrup 2 mg/ml (base equivalent)</i>	1	
PRECEDEX INJ 80/20ML	3	
PRECEDEX INJ 100MCG	3	
PRECEDEX INJ 200/50ML	3	
PRECEDEX INJ 400/100	3	
PRECEDEX INJ 1000/250	3	
<i>quazepam tab 15 mg</i>	NC	
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
<i>triazolam tab 0.125 mg</i>	1	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>	NC	
<i>zolpidem tartrate sl tab 3.5 mg</i>	NC	
<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
<i>zolpidem tartrate tab er 12.5 mg</i>	1	PA, QL
ZOLPIMIST SPR 5MG	NC	
<b>OREXIN RECEPTOR ANTAGONISTS</b>		
BELSOMRA TAB 5MG	2	PA, QL
BELSOMRA TAB 10MG	2	PA, QL
BELSOMRA TAB 15MG	2	PA, QL
BELSOMRA TAB 20MG	2	PA, QL
DAYVIGO TAB 5MG	2	PA, QL
DAYVIGO TAB 10MG	2	PA, QL
QUVIVIQ TAB 25MG	2	PA, QL
QUVIVIQ TAB 50MG	2	PA, QL
<b>SELECTIVE MELATONIN RECEPTOR AGONISTS</b>		
HETLIOZ CAP 20MG	6	SP, PA, QL

Drug Name	Drug Tier	Requirements/Limits
HETLIOZ LQ SUS 4MG/ML	6	SP, PA, QL
<i>ramelteon tab 8 mg</i>	1	QL
ROZEREM TAB 8MG	NC	
<i>tasimelteon capsule 20 mg</i>	4	SP, PA, QL

## LAXATIVES

### LAXATIVE COMBINATIONS

CLENPIQ SOL	0	ACA, PV
<i>gavilyte-c sol</i>	2	PV
<i>gavilyte-g sol</i>	1	PV
GOLYTELY SOL	NC	
MOVIPREP SOL	NC	
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	1	PV
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	2	PV
PEG-PREP KIT	0	ACA, PV
<i>peg/nasul/c/ sol nacl/pot</i>	NC	
PLENVU SOL	NC	
<i>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml</i>	0	ACA, PV
SUFLAVE SOL	NC	
SUPREP BOWEL SOL PREP KIT	NC	
SUTAB TAB	NC	

### LAXATIVES - MISCELLANEOUS

<i>constulose sol 10gm/15</i>	1	
KRISTALOSE PAK 10GM	3	
KRISTALOSE PAK 20GM	3	
LACTULOSE PAK 10GM	NC	
<i>lactulose solution 10 gm/15ml</i>	1	

### LUBRICANT LAXATIVES

<i>mineral oil</i>	1	
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### SALINE LAXATIVES

OSMOPREP TAB 1.5GM	NC	
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## LOCAL ANESTHETICS-PARENTERAL

### LOCAL ANESTHETIC COMBINATIONS

<i>articadent inj dental</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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
LIDO/TETRA INJ 0.4-0.2%	3	
<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	
MARCAINE/EPI INJ 0.5%	3	
MARCAINE/EPI INJ 0.25%	3	
ORABLOC INJ	3	
<i>sensorcaine inj -mpf/epi</i>	1	
SENSORCAINE INJ -MPF/EPI	1	
SENSORCAINE INJ -MPF/EPI	3	
<i>sensorcaine/ inj epi 0.5%</i>	1	
<i>sensorcaine/ inj epi 0.25</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	
<b>LOCAL ANESTHETICS - AMIDES</b>		
<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	
<i>bupivacaine hcl preservative free (pf) inj 0.75%</i>	1	
BUPIVACAINE INJ 0.125%	3	
BUPIVACAINE INJ 2.5MG/ML	3	
BUPIVACAINE INJ 5MG/ML	3	
<i>bupivacaine inj spinal</i>	1	
EXPAREL INJ 1.3%	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 0.5%</i>	1	
<i>lidocaine hcl local preservative free (pf) inj 1%</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>lidocaine hcl local preservative free (pf) inj 1.5%</i>	1	
<i>lidocaine hcl local preservative free (pf) inj 2%</i>	1	
<i>lidocaine hcl local preservative free (pf) inj 4%</i>	1	
LIDOCAINE INJ 1%	3	
LIDOCAINE INJ 2%	3	
MARCAINE INJ 0.5%	3	
MARCAINE INJ 0.25%	3	
MARCAINE INJ 0.75%	3	
MARCAINE INJ SPINAL	3	
NAROPIN INJ 2MG/ML	3	
NAROPIN INJ 5MG/ML	3	
NAROPIN INJ 7.5MG/ML	3	
NAROPIN INJ 10MG/ML	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	
POSIMIR SOL 660/5ML	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 0.5%	NC	
ROPIVACAINE INJ 2MG/ML	3	
<i>sensorcaine inj 0.5%</i>	1	
<i>sensorcaine inj 0.25%</i>	1	
<i>sensorcaine inj mpf0.25%</i>	1	
<i>sensorcaine inj mpf0.75%</i>	1	
<i>sensorcaine inj mpf 0.5%</i>	1	
XYLOCAINE INJ 0.5%	3	
XYLOCAINE INJ 1%	3	
XYLOCAINE INJ 2%	3	
XYLOCAINE INJ -MPF 1%	3	
XYLOCAINE INJ -MPF 2%	3	
XYLOCAINE INJ MPF 0.5%	3	
XYLOCAINE INJ MPF 1.5%	3	
ZINGO INJ 0.5MG	3	
<b>LOCAL ANESTHETICS - ESTERS</b>		
<i>chloroprocaine hcl preservative free (pf) inj 2%</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>chlorprocaine hcl preservative free (pf) inj 3%</i>	1	
NESACAINE INJ 1%	3	
NESACAINE INJ 2%	3	
NESACAINE INJ -MPF 2%	3	
NESACAINE INJ -MPF 3%	3	

## **MACROLIDES**

### **AZITHROMYCIN**

<i>azithromycin for susp 100 mg/5ml</i>	1	
<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	
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 TRI-PAK	3	
ZITHROMAX TAB Z-PAK	3	

### **CLARITHROMYCIN**

<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>	2	

### **ERYTHROMYCINS**

<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	
<i>erythrocin inj 500mg</i>	1	
ERYTHROCIN INJ 500MG	3	
<i>erythrocin tab 250mg</i>	1	
<i>erythromycin ethylsuccinate for susp 200 mg/5ml</i>	2	
<i>erythromycin ethylsuccinate for susp 400 mg/5ml</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>erythromycin ethylsuccinate tab 400 mg</i>	2	
<i>erythromycin lactobionate for inj 500 mg</i>	1	
<i>erythromycin tab 250 mg</i>	2	
<i>erythromycin tab 500 mg</i>	2	
<i>erythromycin tab delayed release 250 mg</i>	2	
<i>erythromycin tab delayed release 333 mg</i>	2	
<i>erythromycin tab delayed release 500 mg</i>	2	
<i>erythromycin w/ delayed release particles cap 250 mg</i>	2	

### **FIDAXOMICIN**

DIFICID SUS	2	
DIFICID TAB 200MG	2	

## **MEDICAL DEVICES AND SUPPLIES**

### **CONTRACEPTIVES**

AIMSCO MIS LUBRICAT	0	OTC; ACA
CAYA DPR	0	QL; ACA, PV
COLOR CONDOM MIS + LUBE	0	OTC; ACA
CONDOMS MIS	0	OTC; ACA
DUREX MIS REALFEEL	0	OTC; ACA
FANTASY LUBR MIS	0	OTC; ACA
FANTASY LUBR MIS COLORS	0	OTC; ACA
FANTASY LUBR MIS SPERMICI	0	OTC; ACA
FANTASY MIS LUBRICAT	0	OTC; ACA
FC2 FEMALE MIS CONDOM	0	OTC; ACA
FEMCAP MIS 22MM	0	ACA
FEMCAP MIS 26MM	0	ACA
FEMCAP MIS 30MM	0	ACA
K-Y ME & YOU MIS EX LUBRI	0	OTC; ACA
K-Y ME & YOU MIS INTENSE	0	OTC; ACA
KAMELEON LUB MIS COLORS	0	OTC; ACA
KAMELEON MIS TRI-COLR	0	OTC; ACA
KIMONO COLOR MIS	0	OTC; ACA
KIMONO MICRO MIS THIN	0	OTC; ACA
KIMONO MICRO MIS THIN +	0	OTC; ACA
KIMONO MICRO MIS THIN PLS	0	OTC; ACA
KIMONO MIS LUBRICAT	0	OTC; ACA
KIMONO MIS SENSATIO	0	OTC; ACA
KIMONO PLUS MIS LUBRICAT	0	OTC; ACA
KIMONO PLUS MIS SPERMICI	0	OTC; ACA
KIMONO PS MIS LUBRICAT	0	OTC; ACA
KIMONO PS MIS PLUS	0	OTC; ACA
KIMONO SENS MIS PLUS	0	OTC; ACA
KIMONO SPEC MIS	0	OTC; ACA
MAXX MIS LUBRICAT	0	OTC; ACA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
MAXX PLUS MIS SPERMICI	0	OTC; ACA
NATURAL COND MIS + LUBE	0	OTC; ACA
OMNIFLEX DPR	0	ACA
REALITY MIS LUBRICAT	0	OTC; ACA
REALITY ULTR MIS TEXTURED	0	OTC; ACA
REALITY ULTR MIS THIN	0	OTC; ACA
TRUSTEX LUBR MIS ASSORTED	0	OTC; ACA
TRUSTEX LUBR MIS BANANA	0	OTC; ACA
TRUSTEX LUBR MIS CHOC	0	OTC; ACA
TRUSTEX LUBR MIS COLA	0	OTC; ACA
TRUSTEX LUBR MIS COLORS	0	OTC; ACA
TRUSTEX LUBR MIS EX LARGE	0	OTC; ACA
TRUSTEX LUBR MIS EX STR	0	OTC; ACA
TRUSTEX LUBR MIS GRAPE	0	OTC; ACA
TRUSTEX LUBR MIS MINT	0	OTC; ACA
TRUSTEX LUBR MIS RIB/STUD	0	OTC; ACA
TRUSTEX LUBR MIS SPERMICI	0	OTC; ACA
TRUSTEX LUBR MIS STRWBRY	0	OTC; ACA
TRUSTEX LUBR MIS VANILLA	0	OTC; ACA
TRUSTEX MIS BANANA	0	OTC; ACA
TRUSTEX MIS CHOCOLAT	0	OTC; ACA
TRUSTEX MIS FLAVORS	0	OTC; ACA
TRUSTEX MIS MINT	0	OTC; ACA
TRUSTEX MIS STRWBRY	0	OTC; ACA
TRUSTEX MIS VANILLA	0	OTC; ACA
TRUSTEX/RIA MIS LUBRICAT	0	OTC; ACA
TRUSTEX/RIA MIS NON-LUB	0	OTC; ACA
TRUSTEX/RIA MIS SPERMICI	0	OTC; ACA
TRUSTX NON-9 MIS RIB/STUD	0	OTC; ACA
WIDE-SEAL DPR KIT 60	0	ACA
WIDE-SEAL DPR KIT 65	0	ACA
WIDE-SEAL DPR KIT 70	0	ACA
WIDE-SEAL DPR KIT 75	0	ACA
WIDE-SEAL DPR KIT 80	0	ACA
WIDE-SEAL DPR KIT 85	0	ACA
WIDE-SEAL DPR KIT 90	0	ACA
WIDE-SEAL DPR KIT 95	0	ACA
<b>DIABETIC SUPPLIES</b>		
ACTI-LANCE MIS 28G	7	OTC; PV
ACTI-LANCE MIS LITE 28G	7	OTC; PV
ACTI-LANCE MIS SPEC 17G	7	OTC; PV
ACTI-LANCE MIS UNIV 23G	7	OTC; PV
ADVocate SAFE MIS LANC 26G	7	OTC; PV
ADVocate MIS LANC 30G	7	OTC; PV



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ADVOCATE MIS LANCETS	7	OTC; PV
AGAMATRIX MIS 33G	7	OTC; PV
AQUALANCE MIS 30G	7	OTC; PV
ASSURE CMFRT MIS 28G	7	OTC; PV
ASSURE LANCE MIS 21G	7	OTC; PV
ASSURE LANCE MIS LOW FLOW	7	OTC; PV
ASSURE LANCE MIS MICRO	7	OTC; PV
ASSURE LANCE MIS SAFE 25G	7	OTC; PV
ASSURE LANCE MIS SAFE 30G	7	OTC; PV
ASSURE PLUS MIS HIGH 18G	7	OTC; PV
ASSURE PLUS MIS LOW 25G	7	OTC; PV
ASSURE PLUS MIS MCRO 28G	7	OTC; PV
ASSURE PLUS MIS NORM 21G	7	OTC; PV
ASSURE PLUS MIS PEDIATRI	7	OTC; PV
AURORA LANCE MIS 30G	7	OTC; PV
AURORA LANCE MIS THIN 23G	7	OTC; PV
AUTO LANCET MIS	7	OTC; PV
AUTOLET PLAT MIS 1.8MM	7	OTC; PV
AUTOLET PLAT MIS 2.4MM	7	OTC; PV
AUTOLET PLAT MIS 3.0MM	7	OTC; PV
BD MICROTAIN MIS LANCETS	7	OTC; PV
CAREONE LANC MIS 30G	7	OTC; PV
CAREONE LANC MIS THIN 23G	7	OTC; PV
CARETOUCH MIS TWIST 30	7	OTC; PV
CGMS CABLE MIS	NC	
CGMS MIS SOFTWARE	NC	
CLEANLET 28G MIS LANCETS	7	OTC; PV
CLEVER CHECK MIS	7	OTC; PV
CLEVER CHECK MIS 30G	7	OTC; PV
COAGUCHEK MIS LANCETS	7	OTC; PV
COMFORT ASSU MIS LANC 28G	7	OTC; PV
COMFORT ASSU MIS LANC 33G	7	OTC; PV
COMFORTOUCH MIS LANCET	7	OTC; PV
CVS LANCETS MIS 21G	7	OTC; PV
CVS LANCETS MIS 30G	7	OTC; PV
CVS LANCETS MIS 33G	7	OTC; PV
CVS LANCETS MIS ORIGINAL	7	OTC; PV
CVS LANCETS MIS THIN 26G	7	OTC; PV
CVS LANCETS MIS THIN 30G	7	OTC; PV
CVS LANCETS MIS THIN 33G	7	OTC; PV
DEXCOM G5 MIS RECEIVER	2	PA
DEXCOM G5 MIS TRANSMIT	2	PA
DEXCOM G6 MIS RECEIVER	2	PA
DEXCOM G6 MIS SENSOR	2	PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
DEXCOM G6 MIS TRANSMIT	2	PA
DEXCOM G7 MIS RECEIVER	2	PA
DEXCOM G7 MIS SENSOR	2	PA
DIATHRIVE MIS UT 30G	7	OTC; PV
DROPLET LANC MIS 30G	7	OTC; PV
E-Z JECT MIS 21G	7	OTC; PV
E-Z JECT MIS 21G COLR	7	OTC; PV
E-Z JECT MIS 30G	7	OTC; PV
E-Z JECT MIS 32G COLR	7	OTC; PV
E-Z JECT MIS LANC 21G	7	OTC; PV
E-Z JECT MIS THIN 26G	7	OTC; PV
E-ZJECT LANC MIS 33G	7	OTC; PV
EASY COMFORT MIS 30G	7	OTC; PV
EASY COMFORT MIS LANC/30G	7	OTC; PV
EASY TOUCH MIS LANC/21G	7	OTC; PV
EASY TOUCH MIS LANC/23G	7	OTC; PV
EASY TOUCH MIS LANC/26G	7	OTC; PV
EASY TOUCH MIS LANC/28G	7	OTC; PV
EASY TOUCH MIS LANC/30G	7	OTC; PV
EASY TOUCH MIS LANC/32G	7	OTC; PV
EASY TOUCH MIS LANC/33G	7	OTC; PV
EMBRACE LANC MIS 21G	7	OTC; PV
EMBRACE LANC MIS 28G	7	OTC; PV
EMBRACE LANC MIS THIN 30G	7	OTC; PV
ENLITE GLUCO MIS SENSOR	NC	
EQL LANCETS MIS 21G COLR	7	OTC; PV
EQL LANCETS MIS 33G COLR	7	OTC; PV
EQL LANCETS MIS THIN 26G	7	OTC; PV
EQL LANCETS MIS THIN 30G	7	OTC; PV
EVERSENSE MIS SENSOR	NC	
EVERSENSE MIS TRANSMTR	NC	
EZ-LETS 21G MIS LANCETS	7	OTC; PV
EZ-LETS 26G MIS LANCETS	7	OTC; PV
EZ-LETS 28G MIS LANCETS	7	OTC; PV
EZ-LETS 30G MIS LANCETS	7	OTC; PV
FASTCLIX MIS LANCETS	7	OTC; PV
FIFTY50 SAFE MIS LANCETS	7	OTC; PV
FINE 30 MIS	7	OTC; PV
FINGERSTIX MIS LANCETS	7	OTC; PV
FORA LANCETS MIS 30G	7	OTC; PV
FORA MIS LANCETS	7	OTC; PV
FREESTY LIBR KIT 2 SENSOR	NC	
FREESTY LIBR KIT 3 SENSOR	NC	
FREESTY LIBR MIS 2 READER	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
FREESTYLE KIT SENSOR	NC	
FREESTYLE MIS LANCETS	7	OTC; PV
FREESTYLE MIS READER	NC	
G5/G4 MIS SENSOR	2	PA
GENTLE-LET MIS 26G	7	OTC; PV
GENTLE-LET MIS 28G	7	OTC; PV
GENTLE-LET MIS LANCETS	7	OTC; PV
GENTLE-LET MIS PLATFORM	7	OTC; PV
GLOBAL 28G MIS LANCETS	7	OTC; PV
GLOBAL 30G MIS LANCETS	7	OTC; PV
GLUCOCOM MIS 28G	7	OTC; PV
GLUCOCOM MIS 30G	7	OTC; PV
GLUCOCOM MIS 33G	7	OTC; PV
GNP LANCETS MIS 21G	7	OTC; PV
GNP LANCETS MIS 28G	7	OTC; PV
GNP LANCETS MIS 30G	7	OTC; PV
GNP LANCETS MIS 33G	7	OTC; PV
GNP LANCETS MIS THIN 26G	7	OTC; PV
GOODSENSE MIS LANC 30G	7	OTC; PV
GOODSENSE MIS LANC 33G	7	OTC; PV
GUARDIAN CON MIS TRANSMIT	NC	
GUARDIAN MIS LINK 3	NC	
GUARDIAN MIS SENSOR 3	NC	
GUARDIAN MIS TRANSMTR	NC	
GUARDIAN RT KIT	NC	
GUARDIAN RT KIT STARTER	NC	
GUARDIAN RT KIT SYST PED	NC	
GUARDIAN RT KIT SYSTEM	NC	
GUARDIAN RT MIS CHARGER	NC	
GUARDIAN RT MIS REPL PED	NC	
GUARDIAN RT MIS REPLACE	NC	
GUARDIAN RT MIS SOFTWARE	NC	
GUARDIAN RT MIS TST PLUG	NC	
HAEMOLANCE MIS HIGH FLO	7	OTC; PV
HAEMOLANCE MIS LOW FLOW	7	OTC; PV
HAEMOLANCE MIS PLUS	7	OTC; PV
HAEMOLANCE MIS PLUS LOW	7	OTC; PV
HAEMOLANCE MIS PLUS MAX	7	OTC; PV
HAEMOLANCE MIS PLUS PED	7	OTC; PV
HAEMOLANCE MIS RETRACT	7	OTC; PV
IN TOUCH LAN MIS 30G	7	OTC; PV
INCONTROL MIS LANC 28G	7	OTC; PV
INCONTROL MIS LANC 30G	7	OTC; PV
INCONTROL MIS LANC 33G	7	OTC; PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
KINNEY MIS LANCETS	7	OTC; PV
KINNEY THIN MIS LANCETS	7	OTC; PV
KROGER LANCE MIS	7	OTC; PV
KROGER LANCE MIS 26G	7	OTC; PV
KROGER LANCE MIS THIN	7	OTC; PV
KROGER LANCE MIS THIN 30G	7	OTC; PV
LANCET CARRY MIS CASE	7	OTC; PV
LANCET MICRO MIS THIN 33G	7	OTC; PV
LANCET STAND MIS 21G	7	OTC; PV
LANCET SUPER MIS THIN 30G	7	OTC; PV
LANCET ULTRA MIS THIN 30G	7	OTC; PV
LANCETS MICR MIS THIN 33G	7	OTC; PV
LANCETS MIS	7	OTC; PV
LANCETS MIS 21G	7	OTC; PV
LANCETS MIS 21G COLR	7	OTC; PV
LANCETS MIS 26G	7	OTC; PV
LANCETS MIS 28G	7	OTC; PV
LANCETS MIS 30G	7	OTC; PV
LANCETS MIS 33G	7	OTC; PV
LANCETS MIS ORIGINAL	7	OTC; PV
LANCETS MIS THIN	7	OTC; PV
LANCETS MIS THIN 26G	7	OTC; PV
LANCETS MIS THIN 30G	7	OTC; PV
LANCETS SUPR MIS THIN 28G	7	OTC; PV
LANCETS THIN MIS	7	OTC; PV
LANCETS THIN MIS 26G	7	OTC; PV
LANCETS ULTR MIS THIN	7	OTC; PV
LIFESCAN MIS UNISTIK2	7	OTC; PV
LITE TOUCH MIS LANCETS	7	OTC; PV
LITETOUCH MIS LANCETS	7	OTC; PV
LONGS LANCET MIS STANDARD	7	OTC; PV
LONGS LANCET MIS THIN	7	OTC; PV
LONGS LANCET MIS ULTRA TH	7	OTC; PV
MEDICHOICE MIS LANCET	7	OTC; PV
MEDLANCE MIS 30G PLUS	7	OTC; PV
MEDLANCE MIS EXTR 21G	7	OTC; PV
MEDLANCE MIS LITE 25G	7	OTC; PV
MEDLANCE MIS PLUS	7	OTC; PV
MEDLANCE MIS PLUS 30G	7	OTC; PV
MEDLANCE MIS UNV 21G	7	OTC; PV
MEDLANCE PLS MIS 0.8MM	7	OTC; PV
MEDLANCE PLS MIS EXTR 21G	7	OTC; PV
MEDLANCE PLS MIS LITE 25G	7	OTC; PV
MEDLANCE PLS MIS UNIV 21G	7	OTC; PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
MEIJER LANCE MIS COLOR	7	OTC; PV
MEIJER LANCE MIS UNIV 21G	7	OTC; PV
MEIJER LANCE MIS UNIV 30G	7	OTC; PV
MEIJER LANCE MIS UNIVERSA	7	OTC; PV
MEIJER MIS LANCETS	7	OTC; PV
MICRO THIN MIS LANC 33G	7	OTC; PV
MICROLET MIS LANCETS	7	OTC; PV
MINILINK RT MIS TRANSMIT	NC	
MINIMED 630G MIS TRANSMIT	NC	
MONOLET MIS LANCETS	7	OTC; PV
MONOLET OPD MIS LANCETS	7	OTC; PV
MONOLETTOR MIS LANCETS	7	OTC; PV
MYGLUCOHEALT MIS LANC 30G	7	OTC; PV
NOVA SAFETY MIS LANC 23G	7	OTC; PV
NOVA SAFETY MIS LANC 28G	7	OTC; PV
NOVA SURE MIS LANCETS	7	OTC; PV
OMNIPOD 5 G6 KIT INTRO	2	PV
OMNIPOD 5 G6 MIS PODS	2	PV
OMNIPOD DASH MIS PODS	2	PV
OMNIPOD MIS CLASSIC	2	PV
OMNIPOD PDM KIT CLASSIC	2	PV
ON-THE-GO MIS LANC 30G	7	OTC; PV
ONETOUCH DEL MIS PLUS 30G	7	OTC; PV
ONETOUCH DEL MIS PLUS 33G	7	OTC; PV
ONETOUCH FP MIS LANCETS	7	OTC; PV
ONETOUCH MIS 30G	7	OTC; PV
ONETOUCH MIS LANCETS	7	OTC; PV
ONETOUCH US MIS LANCETS	7	OTC; PV
PARADIGM REA MIS TRANSMIT	NC	
PENLET II MIS REPL CAP	7	OTC; PV
PERFECT 28G MIS LANCETS	7	OTC; PV
PERFECT 30G MIS LANCETS	7	OTC; PV
PHARMACY COU MIS LANCETS	7	OTC; PV
PRO COMFORT MIS 31G	7	OTC; PV
PRO COMFORT MIS LANCETS	7	OTC; PV
PRODIGY MIS 26G	7	OTC; PV
PRODIGY MIS 28G	7	OTC; PV
PSS SAFE LAN MIS	7	OTC; PV
PSS SEL LANC MIS	7	OTC; PV
PSS SEL PLAT MIS	7	OTC; PV
PX LANCETS MIS 28G	7	OTC; PV
PX LANCETS MIS 33G	7	OTC; PV
QC LANCETS MIS 28G	7	OTC; PV
QC LANCETS MIS 30G	7	OTC; PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
RA E-ZJECT MIS 28G	7	OTC; PV
RA E-ZJECT MIS THIN 26G	7	OTC; PV
RA E-ZJECT MIS THIN 28G	7	OTC; PV
RA E-ZJECT MIS ULT THIN	7	OTC; PV
REAL-TIME KIT	NC	
RELION LANCE MIS THIN 26G	7	OTC; PV
RELION LANCE MIS THIN 30G	7	OTC; PV
RELION MICRO MIS THIN 33G	7	OTC; PV
RELION ULTRA MIS THIN PLS	7	OTC; PV
RIGHTEST ALT MIS ADAPTOR	7	OTC; PV
RIGHTEST MIS GL300	7	OTC; PV
SAFE-T-LANCE MIS 21G	7	OTC; PV
SAFE-T-LANCE MIS 25G	7	OTC; PV
SAFE-T-LANCE MIS HI FLOW	7	OTC; PV
SAFE-T-LANCE MIS LOW FLOW	7	OTC; PV
SAFE-T-LANCE MIS NOR FLOW	7	OTC; PV
SAFE-T-PRO MIS LANCETS	7	OTC; PV
SAFE-T-PRO MIS PLUS	7	OTC; PV
SAFETY 21G MIS LANCETS	7	OTC; PV
SAFETY 28G MIS LANCETS	7	OTC; PV
SAFETY MIS LANCETS	7	OTC; PV
SAPSCARE MIS TWIST	7	OTC; PV
SB LANCETS MIS THIN	7	OTC; PV
SB LANCETS MIS ULTR THN	7	OTC; PV
SINGLE-LET MIS 23G	7	OTC; PV
SM LANCETS MIS 33G	7	OTC; PV
SMART SENSE MIS LANC 21G	7	OTC; PV
SMART SENSE MIS LANC 26G	7	OTC; PV
SMART SENSE MIS LANC 30G	7	OTC; PV
SMART SENSE MIS LANC 33G	7	OTC; PV
SMARTEST MIS LANCETS	7	OTC; PV
SOF-SENSOR MIS	NC	
SOFTCLIX MIS LANCETS	7	OTC; PV
SOLUS V2 MIS LANC 28G	7	OTC; PV
SOLUS V2 MIS LANC 30G	7	OTC; PV
STERILANCE MIS 1.8MM	7	OTC; PV
STERILANCE MIS TL 28G	7	OTC; PV
STERILANCE MIS TL 30G	7	OTC; PV
STERILANCE MIS TL 32G	7	OTC; PV
SUPER THIN MIS LANC 28G	7	OTC; PV
SUPER THIN MIS LANCETS	7	OTC; PV
SURE COMFORT MIS LANCETS	7	OTC; PV
SUREFLEX MIS LANCETS	7	OTC; PV
SURELITE MIS LANCETS	7	OTC; PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
TECHLITE AST MIS LANCETS	7	OTC; PV
TECHLITE MIS LANC 30G	7	OTC; PV
TECHLITE MIS LANCETS	7	OTC; PV
TGT LANCET MIS 26G	7	OTC; PV
TGT LANCET MIS 30G	7	OTC; PV
TGT LANCET MIS 33G	7	OTC; PV
THIN LANCETS MIS 26G	7	OTC; PV
THIN LANCETS MIS 30G	7	OTC; PV
THINLETS GP MIS 26G	7	OTC; PV
TOPCARE MIS LANC 33G	7	OTC; PV
TRAVEL LANCE MIS ADV 28G	7	OTC; PV
TRUPLUS LANC MIS 26G	7	OTC; PV
TRUPLUS LANC MIS 28G	7	OTC; PV
TRUPLUS LANC MIS 30G	7	OTC; PV
TRUPLUS LANC MIS 33G	7	OTC; PV
ULTILET MIS 26G	7	OTC; PV
ULTILET MIS 28G	7	OTC; PV
ULTILET MIS 30G	7	OTC; PV
ULTILET MIS 33G	7	OTC; PV
ULTILET MIS LANCETS	7	OTC; PV
ULTILET MIS SAFETY	7	OTC; PV
ULTRA THIN MIS 28G	7	OTC; PV
ULTRA THIN MIS 30G	7	OTC; PV
ULTRA THIN MIS 31G	7	OTC; PV
ULTRA THIN MIS 33G	7	OTC; PV
ULTRA THIN MIS LANC 28G	7	OTC; PV
ULTRA THIN MIS LANC 30G	7	OTC; PV
ULTRA THIN MIS LANCETS	7	OTC; PV
UNILET EX II MIS 28G	7	OTC; PV
UNILET EXCEL MIS 23G	7	OTC; PV
UNILET G.P MIS SUPR 23G	7	OTC; PV
UNILET G.P. MIS 21G	7	OTC; PV
UNILET GP 28 MIS ULT THIN	7	OTC; PV
UNILET LANC MIS 33G	7	OTC; PV
UNILET LANCE MIS 21G	7	OTC; PV
UNILET LANCE MIS 28G	7	OTC; PV
UNILET LANCE MIS 33G	7	OTC; PV
UNILET LANCT MIS 28G	7	OTC; PV
UNILET LANCT MIS 30G	7	OTC; PV
UNILET LANCT MIS 33G	7	OTC; PV
UNILET MIS 21G	7	OTC; PV
UNILET SUPER MIS 23G	7	OTC; PV
UNILET SUPER MIS G.P. 23G	7	OTC; PV
UNISTIK 1 MIS 2.4MM	7	OTC; PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
UNISTIK 1 MIS 3.0MM	7	OTC; PV
UNISTIK 2 MIS	7	OTC; PV
UNISTIK 2 MIS 1.8MM	7	OTC; PV
UNISTIK 2 MIS 2.4MM	7	OTC; PV
UNISTIK 2 MIS COMFORT	7	OTC; PV
UNISTIK 2 MIS EXTRA	7	OTC; PV
UNISTIK 2 MIS NEONATAL	7	OTC; PV
UNISTIK 2 MIS NORMAL	7	OTC; PV
UNISTIK 2 MIS SUPER	7	OTC; PV
UNISTIK 3 MIS 1.8MM	7	OTC; PV
UNISTIK 3 MIS COMFORT	7	OTC; PV
UNISTIK 3 MIS EXTRA	7	OTC; PV
UNISTIK 3 MIS GENT 30G	7	OTC; PV
UNISTIK 3 MIS NEONATAL	7	OTC; PV
UNISTIK 3 MIS NORMAL	7	OTC; PV
UNISTIK 23G MIS NORMAL	7	OTC; PV
UNISTIK CZT MIS COMFORT	7	OTC; PV
UNISTIK CZT MIS NORMAL	7	OTC; PV
UNISTIK II MIS LANCETS	7	OTC; PV
UNISTIK SAFE MIS LANC 28G	7	OTC; PV
UNISTIK SAFE MIS LANC 30G	7	OTC; PV
UNISTIK TOUC MIS LANC 21G	7	OTC; PV
UNISTIK TOUC MIS LANC 23G	7	OTC; PV
UNISTIK TOUC MIS LANC 28G	7	OTC; PV
UNISTIK TOUC MIS LANC 30G	7	OTC; PV
UNIVERSAL 1 MIS 33G	7	OTC; PV
UNIVERSAL 1 MIS LANC 26G	7	OTC; PV
UNIVERSAL 1 MIS LANC 30G	7	OTC; PV
V-GO 20 KIT	2	PV
V-GO 30 KIT	2	PV
V-GO 40 KIT	2	PV

**PARENTERAL THERAPY SUPPLIES**

AUTOSHIELD MIS 30GX5MM	7	OTC; PV
BD PEN NEEDL MIS 29GX12.7	7	OTC; PV
BD PEN NEEDL MIS 31GX5MM	7	OTC; PV
BD PEN NEEDL MIS 31GX8MM	7	OTC; PV
BD PEN NEEDL MIS 32GX4MM	7	OTC; PV
BD PEN NEEDL MIS 32GX6MM	7	OTC; PV
BD U-500 MIS 31GX6MM	7	
INSULIN SYRG MIS 0.3/29G	7	OTC; PV
INSULIN SYRG MIS 0.3/30G	7	OTC; PV
INSULIN SYRG MIS 0.3/31G	7	PV
INSULIN SYRG MIS 0.3/31G	7	OTC; PV
INSULIN SYRG MIS 0.5/28G	7	OTC; PV



Drug Name	Drug Tier	Requirements/Limits
INSULIN SYRG MIS 0.5/29G	7	OTC; PV
INSULIN SYRG MIS 0.5/30G	7	OTC; PV
INSULIN SYRG MIS 0.5/31G	7	OTC; PV
INSULIN SYRG MIS 1ML	7	OTC; PV
INSULIN SYRG MIS 1ML/27G	7	OTC; PV
INSULIN SYRG MIS 1ML/28G	7	OTC; PV
INSULIN SYRG MIS 1ML/29G	7	OTC; PV
INSULIN SYRG MIS 1ML/30G	7	OTC; PV
INSULIN SYRG MIS 1ML/31G	7	OTC; PV
INSULIN SYRG MIS 2/27.5G	7	OTC
LUER-LOK SYR MIS 1ML/20G	7	OTC

## MIGRAINE PRODUCTS

### **CALCITONIN GENE-RELATED PEPTIDE (CGRP) RECEPTOR ANTAG**

AIMOVIG INJ 70MG/ML	2	ST, PA, QL
AIMOVIG INJ 140MG/ML	2	ST, PA, QL
AJOVY INJ 225/1.5	2	ST, PA, QL; (autoinjector)
AJOVY INJ 225/1.5	2	ST, PA, QL; (prefilled syringe)
EMGALITY INJ 100MG/ML	2	ST, PA, QL
EMGALITY INJ 120MG/ML	2	ST, PA, QL
EMGALITY INJ 120MG/ML	2	ST, PA, QL; (prefilled syringe)
NURTEC TAB 75MG ODT	2	ST, PA, QL
QULIPTA TAB 10MG	2	ST, PA, QL
QULIPTA TAB 30MG	2	ST, PA, QL
QULIPTA TAB 60MG	2	ST, PA, QL
UBRELVY TAB 50MG	2	ST, PA, QL
UBRELVY TAB 100MG	2	ST, PA, QL
VYEPTI INJ 100MG/ML	NC	

### **MIGRAINE COMBINATIONS**

CAFERGOT TAB 1-100MG	NC	
<i>ergotamine w/ caffeine tab 1-100 mg</i>	NC	
<i>migergot sup 2/100</i>	NC	
<i>sumatriptan-naproxen sodium tab 85-500 mg</i>	NC	
TREXIMET TAB 10-60MG	NC	
TREXIMET TAB 85-500MG	NC	

### **MIGRAINE PRODUCTS**

<i>dihydroergotamine mesylate inj 1 mg/ml</i>	2	
<i>dihydroergotamine mesylate nasal spray 4 mg/ml</i>	NC	
ERGOMAR SUB 2MG	3	
MIGRANAL SPR 4MG/ML	3	QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
TRUDHESA AER 0.725MG	3	QL
<b>MIGRAINE PRODUCTS - NSAIDS</b>		
CAMBIA POW 50MG	NC	
<i>diclofenac potassium (migraine) packet 50 mg</i>	NC	
<b>SEROTONIN AGONISTS</b>		
<i>almotriptan malate tab 6.25 mg</i>	2	PA, QL
<i>almotriptan malate tab 12.5 mg</i>	2	PA, QL
<i>eletriptan hydrobromide tab 20 mg (base equivalent)</i>	1	PA, QL
<i>eletriptan hydrobromide tab 40 mg (base equivalent)</i>	1	PA, QL
FROVA TAB 2.5MG	3	ST, PA, QL
<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
IMITREX TAB 50MG	3	PA, QL
IMITREX TAB 100MG	3	PA, QL
MAXALT TAB 10MG	NC	
MAXALT-MLT TAB 10MG	NC	
<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
RELPAX TAB 20MG	3	PA, QL
RELPAX TAB 40MG	3	PA, QL
REYVOW TAB 50MG	3	ST, PA, QL
REYVOW TAB 100MG	3	ST, 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>	1	PA, QL
<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml</i>	2	PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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
TOSYMRA SOL 10MG	NC	
ZEMBRACE SYM INJ 3/0.5ML	2	PA, QL
<i>zolmitriptan nasal spray 2.5 mg/spray unit</i>	2	PA, QL
<i>zolmitriptan nasal spray 5 mg/spray unit</i>	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	3	PA, QL
ZOMIG SPR 5MG	3	PA, QL
ZOMIG TAB 2.5MG	3	PA, QL
ZOMIG TAB 5MG	3	PA, QL

## **MINERALS & ELECTROLYTES**

### **BICARBONATES**

SOD ACETATE INJ 2MEQ/ML	3	
SOD BICARB INJ 8.4%	3	
SOD BICARB SOL D5W	NC	
<i>sodium acetate inj 2 meq/ml</i>	1	
<i>sodium acetate inj 4 meq/ml</i>	1	
<i>sodium bicarbonate iv soln 4.2%</i>	1	
<i>sodium bicarbonate iv soln 7.5%</i>	1	
<i>sodium bicarbonate iv soln 8.4%</i>	1	
THAM INJ 30MEQ	3	

### **CALCIUM**

CALCIFOL WAF	3	
CALCIUM CHLO INJ 10%	3	
<i>calcium chloride inj 10%</i>	1	
CALCIUM GLUC INJ 10%	3	

### **ELECTROLYTE MIXTURES**

D2.5W/NACL INJ 0.45%	3	
D5W/LYTES INJ #48	3	
D5W/NACL INJ 0.3%	3	
D10W/NACL INJ 0.2%	3	
<i>dextrose 2.5% w/ sodium chloride 0.45%</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>dextrose 5% in lactated ringers</i>	1	
<i>dextrose 5% w/ sodium chloride 0.2%</i>	1	
<i>dextrose 5% w/ sodium chloride 0.3%</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	
DW5-NACL INJ 0.225%	3	
ELLIOTTS B INJ	3	
IONOSOL-MB INJ D5W	3	
ISOLYTE-P INJ /D5W	3	
ISOLYTE-S INJ	3	
ISOLYTE-S INJ PH 7.4	3	
<i>kcl 10 meq/l (0.075%) in dextrose 5% &amp; nacl 0.45% inj</i>	1	
<i>kcl 20 meq/l (0.15%) in dextrose 5% &amp; nacl 0.2% inj</i>	1	
<i>kcl 20 meq/l (0.15%) in dextrose 5% &amp; nacl 0.9% inj</i>	1	
<i>kcl 20 meq/l (0.15%) in dextrose 5% &amp; 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% &amp; nacl 0.45% inj</i>	1	
<i>kcl 40 meq/l (0.3%) in dextrose 5% &amp; nacl 0.45% inj</i>	1	
<i>kcl 40 meq/l (0.3%) in nacl 0.9% inj</i>	1	
KCL/D5W/LACT INJ 20MEQ/L	3	
KCL/D5W/NACL INJ 0.3/0.9%	3	
KCL/D5W/NACL INJ 0.15/0.2	3	
<i>lactated ringer's solution</i>	1	
NORMOSOL -M INJ /D5W	3	
NORMOSOL -R INJ	3	
NORMOSOL-R INJ PH 7.4	3	
NORMOSOL-R SOL /5% DSW	3	
PLASMA-LYTE INJ -148	3	
PLASMA-LYTE INJ -A	3	
POT CHL/NACL INJ 20MEQ/L	3	
POT CHL/NACL INJ 40MEQ/L	3	
<i>potassium chloride 20 meq/l (0.15%) in dextrose 5% inj</i>	1	
<i>ringer's solution</i>	1	
TPN ELECTROL INJ	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>FLUORIDE</b>		
FLORIVA DRO 0.25MG	3	PV
<i>fluoritab dro 0.125mg</i>	0	ACA, PV
<i>nafrinse chw 1mg f</i>	1	PV
<i>nafrinse dro 0.125mg</i>	0	ACA, PV
<i>sodium fluoride chew tab 0.5 mg f (from 1.1 mg naf)</i>	0	ACA, PV
<i>sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf)</i>	0	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>	0	ACA, PV
<i>sodium fluoride tab 0.5 mg f (from 1.1 mg naf)</i>	0	ACA, PV
<i>sodium fluoride tab 1 mg f (from 2.2 mg naf)</i>	1	PV
<b>IODINE PRODUCTS</b>		
<i>iodine solution strong 5% (lugol's)</i>	1	
<b>MAGNESIUM</b>		
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 50%	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	
MG SO4/D5W INJ 10MG/ML	3	
<b>MANGANESE</b>		
<i>manganese chloride inj 0.1 mg/ml</i>	1	
<b>PHOSPHATE</b>		
GLYCOPHOS SOL 1MM/ML	3	
K-PHOS TAB	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
K-PHOS TAB NEUTRAL	3	
<i>phospha 250 tab neutral</i>	1	
<i>phospho-trin tab 250 neut</i>	1	
<i>phospho-trin tab k500</i>	1	
<i>pot phos monobasic w/sod phos di &amp; monobas tab 155-852-130mg</i>	1	
<i>potassium phosphates inj 45 mm/15ml (phos) 66 meq/15ml (k)</i>	1	
<i>sodium phosphates inj 15 mm/5ml (phos) 20 meq/5ml (na)</i>	3	
<i>sodium phosphates inj 45 mm/15ml (phos) 60 meq/15ml (na)</i>	1	
<i>sodium phosphates inj 150 mm/50ml (phos) 200 meq/50ml (na)</i>	3	

### **POTASSIUM**

EFFER-K TAB 10MEQ	3	
EFFER-K TAB 20MEQ	3	
<i>effer-k tab 25meq ef</i>	1	
<i>k-prime tab 25meq ef</i>	1	
K-TAB TAB 10MEQ CR	3	
K-TAB TAB 20MEQ	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	
<i>klor-con m15 tab 15meq er</i>	1	
<i>klor-con m20 tab 20meq er</i>	1	
<i>klor-con pak 20meq</i>	2	
<i>klor-con/ef tab 25meq fr</i>	1	
POT CHLORIDE INJ 10MEQ	3	
POT CHLORIDE INJ 20MEQ	3	
POT CHLORIDE INJ 40MEQ	3	
<i>potassium acetate inj 2 meq/ml</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 er tab 10 meq</i>	1	
<i>potassium chloride microencapsulated crys er tab 15 meq</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>potassium chloride microencapsulated crys er tab 20 meq</i>	1	
<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	1	
<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	
POTASSIUM INJ 100MEQ	3	

### **SODIUM**

<i>sodium chloride inj 2.5 meq/ml (14.6%)</i>	1	
<i>sodium chloride iv soln 0.9%</i>	1	
<i>sodium chloride iv soln 0.45%</i>	1	
<i>sodium chloride iv soln 3%</i>	1	
<i>sodium chloride iv soln 4 meq/ml (23.4%)</i>	1	
<i>sodium chloride iv soln 5%</i>	1	
<i>sodium chloride preservative free (pf) inj 0.9%</i>	1	

### **TRACE MINERALS**

<i>chromic chloride inj 40 mcg/10ml (4 mcg/ml) (elemental cr)</i>	1	
<i>cupric chloride inj 0.4 mg/ml (elemental)</i>	1	
MULTRYS INJ	3	
SELENIOS AC SOL 12MCG/2M	3	

### **ZINC**

GALZIN CAP 25MG	3	
GALZIN CAP 50MG	3	
WILZIN CAP 25MG	3	
ZINC CHLORID INJ 1MG/ML	1	
ZINC SULFATE INJ 1MG/ML	3	
<i>zinc sulfata inj 3 mg/ml</i>	1	
ZINC SULFATE INJ 3MG/ML	3	
<i>zinc sulfata inj 5 mg/ml</i>	1	
ZINC SULFATE INJ 5MG/ML	3	

### **MISCELLANEOUS THERAPEUTIC CLASSES**

#### **CHELATING AGENTS**

CUPRIMINE CAP 250MG	NC	
CUVRIOR TAB 300MG	NC	
DEPEN TITRA TAB 250MG	6	SP
EDETATE DISO INJ 150MG/ML	3	
<i>penicillamine cap 250 mg</i>	4	SP

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>penicillamine tab 250 mg</i>	4	SP
SYPRINE CAP 250MG	NC	
<i>trientine hcl cap 250 mg</i>	4	SP
<b>CONTINUOUS RENAL REPLACEMENT THERAPY (CRRT) SOLUTIONS</b>		
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	
TRISOD CITRA SOL 0.5%CRRT	3	
<b>ENZYMES</b>		
HYLENEX INJ 150 UNIT	3	
XIAFLEX INJ 0.9MG	3	SP, PA
<b>IMMUNOMODULATORS</b>		
JOENJA TAB 70MG	NC	
<i>lenalidomide cap 5 mg</i>	4	SP, PA, QL
<i>lenalidomide cap 10 mg</i>	4	SP, PA, QL
<i>lenalidomide cap 15 mg</i>	4	SP, PA, QL
<i>lenalidomide cap 20 mg</i>	4	SP, PA, QL
<i>lenalidomide cap 25 mg</i>	4	SP, PA, QL
<i>lenalidomide caps 2.5 mg</i>	4	SP, PA, QL
REVLIMID CAP 2.5MG	5	SP, PA, QL
REVLIMID CAP 5MG	5	SP, PA, QL
REVLIMID CAP 10MG	5	SP, PA, QL
REVLIMID CAP 15MG	5	SP, PA, QL
REVLIMID CAP 20MG	5	SP, PA, QL
REVLIMID CAP 25MG	5	SP, PA, QL
REZUROCK TAB 200MG	NC	
THALOMID CAP 50MG	5	SP, PA, QL
THALOMID CAP 100MG	5	SP, PA, QL
THALOMID CAP 150MG	5	SP, PA, QL
THALOMID CAP 200MG	5	SP, PA, QL
VYVGART INJ 400/20ML	NC	
<b>IMMUNOSUPPRESSIVE AGENTS</b>		
ASTAGRAF XL CAP 0.5MG	3	SP; PV
ASTAGRAF XL CAP 1MG	3	SP; PV
ASTAGRAF XL CAP 5MG	3	SP; PV
ATGAM INJ 250MG	2	
<i>azasan tab 75 mg</i>	2	
<i>azasan tab 100mg</i>	2	
AZATHIOPRINE INJ 100MG	NC	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>azathioprine tab 50 mg</i>	1	
<i>azathioprine tab 75 mg</i>	2	
<i>azathioprine tab 100 mg</i>	2	
CELLCEPT CAP 250MG	3	SP; PV
CELLCEPT IV INJ 500MG	3	SP; PV
CELLCEPT SUS 200MG/ML	3	SP; PV
CELLCEPT TAB 500MG	3	SP; PV
<i>cyclosporine cap 25 mg</i>	1	SP; PV
<i>cyclosporine cap 100 mg</i>	1	SP; PV
<i>cyclosporine iv soln 50 mg/ml</i>	1	SP; PV
<i>cyclosporine modified cap 25 mg</i>	1	SP; PV
<i>cyclosporine modified cap 50 mg</i>	1	SP; PV
<i>cyclosporine modified cap 100 mg</i>	1	SP; PV
<i>cyclosporine modified oral soln 100 mg/ml</i>	1	SP; PV
ENSPRYNG INJ	5	SP, PA, QL
ENVARUSUS XR TAB 0.75MG	3	SP; PV
ENVARUSUS XR TAB 1MG	3	SP; PV
ENVARUSUS XR TAB 4MG	3	SP; PV
<i>everolimus tab 0.5 mg</i>	1	SP; PV
<i>everolimus tab 0.25 mg</i>	1	SP; PV
<i>everolimus tab 0.75 mg</i>	1	SP; PV
<i>everolimus tab 1 mg</i>	1	SP; PV
<i>gengraf cap 25mg</i>	1	SP; PV
<i>gengraf cap 100mg</i>	1	SP; PV
<i>gengraf sol 100mg/ml</i>	1	SP; PV
IMURAN TAB 50MG	2	
<i>mycophenolate mofetil cap 250 mg</i>	1	SP; PV
<i>mycophenolate mofetil for oral susp 200 mg/ml</i>	1	SP; PV
<i>mycophenolate mofetil hcl for iv soln 500 mg (base equiv)</i>	1	SP; PV
<i>mycophenolate mofetil tab 500 mg</i>	1	SP; PV
<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i>	1	SP; PV
<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i>	1	SP; PV
MYFORTIC TAB 180MG	3	SP; PV
MYFORTIC TAB 360MG	3	SP; PV
NEORAL CAP 25MG	2	SP; PV
NEORAL CAP 100MG	2	SP; PV
NEORAL SOL 100MG/ML	2	SP; PV
NULOJIX INJ 250MG	2	SP; PV
PROGRAF CAP 0.5MG	3	SP; PV
PROGRAF CAP 1MG	3	SP; PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PROGRAF CAP 5MG	3	SP; PV
PROGRAF GRA 0.2MG	3	SP; PV
PROGRAF GRA 1MG	3	SP; PV
PROGRAF INJ 5MG/ML	3	SP; PV
RAPAMUNE SOL 1MG/ML	3	SP; PV
RAPAMUNE TAB 0.5MG	3	SP; PV
RAPAMUNE TAB 1MG	3	SP; PV
RAPAMUNE TAB 2MG	3	SP; PV
SANDIMMUNE CAP 25MG	2	SP; PV
SANDIMMUNE CAP 100MG	2	SP; PV
SANDIMMUNE INJ 50MG/ML	2	SP; PV
SANDIMMUNE SOL 100MG/ML	2	SP; PV
SIMULECT INJ 10MG	2	
SIMULECT INJ 20MG	2	
<i>sirolimus oral soln 1 mg/ml</i>	1	SP; PV
<i>sirolimus tab 0.5 mg</i>	1	SP; PV
<i>sirolimus tab 1 mg</i>	1	SP; PV
<i>sirolimus tab 2 mg</i>	1	SP; PV
<i>tacrolimus cap 0.5 mg</i>	1	SP; PV
<i>tacrolimus cap 1 mg</i>	1	SP; PV
<i>tacrolimus cap 5 mg</i>	1	SP; PV
THYMOGLOBULN INJ 25MG	2	
UPLIZNA SOL 100MG	NC	
ZORTRESS TAB 0.5MG	3	SP; PV
ZORTRESS TAB 0.25MG	3	SP; PV
ZORTRESS TAB 0.75MG	3	SP; PV
ZORTRESS TAB 1MG	3	SP; PV
<b>IRRIGATION SOLUTIONS</b>		
<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	
<b>LYMPHATIC AGENTS</b>		
SYLVANT SOL 100MG	3	SP, PA
SYLVANT SOL 400MG	3	SP, PA
<b>MISC NATURAL PRODUCTS</b>		
IMUBOLIC CAP	NC	
<b>MISCELLANEOUS THERAPEUTIC CLASSES</b>		
NEXAVIR INJ	3	

Drug Name	Drug Tier	Requirements/Limits
<b>PATIENT ASSESSMENT SERVICES</b>		
EUA PATIENT MIS ASSESS	3	
<b>PERITONEAL DIALYSIS SOLUTIONS</b>		
DELFLX-LC SOL 1.5% DEX	3	
DELFLX-LC/ SOL 2.5% DEX	3	
DELFLX-LC/ SOL 4.25 DEX	3	
DELFLX-SM/ SOL 1.5% DEX	3	
DELFLX-SM/ SOL 2.5% DEX	3	
DIANEAL PD-2 SOL 1.5% DEX	3	
DIANEAL PD-2 SOL 2.5% DEX	3	
DIANEAL PD-2 SOL 4.25%DEX	3	
DIANEAL SOL LOW CALC	3	
EXTRANEAL SOL	3	
ULTRABAG/ SOL DIANEAL	3	
ULTRABAG/PD2 SOL DIANEAL	3	
<b>PIK3CA-RELATED OVERGROWTH SPECTRUM (PROS) AGENTS</b>		
VIJOICE TAB 50MG	NC	
VIJOICE TAB 125MG	NC	
VIJOICE TAB 250MG	NC	
<b>POTASSIUM REMOVING AGENTS</b>		
LOKELMA PAK 5GM	NC	
LOKELMA PAK 10GM	NC	
<i>sodium polystyrene sulfonate powder</i>	1	
<i>sps sus 15gm/60</i>	2	
VELTASSA POW 8.4GM	2	
VELTASSA POW 16.8GM	2	
VELTASSA POW 25.2GM	2	
<b>PROGERIA TREATMENT AGENTS</b>		
ZOKINVY CAP 50MG	6	SP, PA, QL
ZOKINVY CAP 75MG	6	SP, PA, QL
<b>PROSTAGLANDINS</b>		
<i>alprostadil inj 500 mcg/ml</i>	1	
PROSTIN VR INJ 500MCG	3	
<b>SCLEROSING AGENTS</b>		
ASCLERA INJ 0.5%	3	
ASCLERA INJ 1%	3	
ETHAMOLIN INJ 5%	3	
<i>sodium tetradecyl sulfate inj 3%</i>	1	
<i>sotradecol inj 1%</i>	1	
<i>sotradecol inj 3%</i>	1	
VARITHENA AER 10MG/ML	6	SP
<b>SYSTEMIC LUPUS ERYTHEMATOSUS AGENTS</b>		
BENLYSTA INJ 120MG	6	SP, PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
BENLYSTA INJ 200MG/ML	6	SP, PA, QL
BENLYSTA INJ 400MG	6	SP, PA, QL
<b>UREMIC PRURITUS AGENTS</b>		
KORSUVA INJ 50MCG/ML	NC	
<b>MOUTH/THROAT/DENTAL AGENTS</b>		
<b>ANESTHETICS TOPICAL ORAL</b>		
<i>lidocaine hcl laryngotracheal soln 4%</i>	2	
<i>lidocaine hcl viscous soln 2%</i>	1	
<b>ANTI-INFECTIVES - THROAT</b>		
<i>clotrimazole troche 10 mg</i>	1	
<i>nystatin susp 100000 unit/ml</i>	1	
ORAVIG TAB 50MG	3	
<b>ANTISEPTICS - MOUTH/THROAT</b>		
<i>chlorhexidine gluconate soln 0.12%</i>	1	
PERIDEX SOL 0.12%	3	
<i>periogard sol 0.12%</i>	1	
<b>PERIODONTAL PRODUCTS</b>		
ARESTIN MIS 1MG	3	
<b>STEROIDS - MOUTH/THROAT/DENTAL</b>		
<i>kourzeq pst 0.1%</i>	1	
<i>oralone dent pst 0.1%</i>	1	
<i>triamcinolone acetonide dental paste 0.1%</i>	1	
<b>THROAT PRODUCTS - MISC.</b>		
AQUORAL SPR	3	
BOCASAL POW	3	
<i>cevimeline hcl cap 30 mg</i>	2	
EPISIL LIQ	2	
EVOXAC CAP 30MG	2	
GELX GEL	3	PA
MUCOTROL WAF	3	PA
MUGARD LIQ	5	SP, PA
NEUTRASAL POW	NC	
NUMOISYN LIQ	3	
NUMOISYN LOZ	3	
ORAFATE PST 10%	3	PA
ORAMAGICRX SUS	3	PA
ORAPEUTIC GEL	3	PA
<i>pilocarpine hcl tab 5 mg</i>	1	
<i>pilocarpine hcl tab 7.5 mg</i>	1	
PROTHELIAL PST 10%	3	PA
SALAGEN TAB 5MG	2	
SALAGEN TAB 7.5MG	2	
SALIVAMAX POW	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
SILATRIX GEL 10%	3	PA
<b>MULTIVITAMINS</b>		
<b><i>B-COMPLEX W/ FOLIC ACID</i></b>		
FOLIC-K CAP	NC	
NEPHRO-VITE TAB RX	NC	
<b><i>MULTIPLE VITAMINS W/ MINERALS</i></b>		
BACMIN TAB	NC	
DAYAVITE TAB	NC	
DERMACINRX TAB RIBOT-E	NC	
DEXATRAN CAP	NC	
DIALYVITE TAB SUPREM D	NC	
FOLAMED DHA CAP	NC	
FOLITIN-Z TAB	NC	
HYLAZINC TAB	NC	
KEYFOLIC TAB	NC	
<i>multipro cap</i>	1	
NUTRICAP TAB	NC	
OCUVEL CAP 0.5MG	NC	
ONEVITE TAB	NC	
REQ 49+ TAB	NC	
SIDEROL TAB	NC	
STROVITE FOR TAB	NC	
STROVITE ONE TAB	NC	
THRIVITE 19 TAB	NC	
UDAMIN SP TAB	NC	
VENEXA FE TAB	NC	
VENEXA TAB	NC	
VENTRIXYL FE TAB	NC	
VENTRIXYL TAB	NC	
VITAROCA PLU TAB	NC	
VITRAMYN TAB	NC	
VITRANOL FE TAB	NC	
VITRANOL TAB	NC	
VITREXYL TAB	NC	
VITREXYL TAB IRON	NC	
ZINTREXYL-C TAB	NC	
<b><i>MULTIPLE VITAMINS W/ MINERALS &amp; FLUORIDE-IRON-FOLIC ACID</i></b>		
QUFLORA FE CHW	NC	
<b><i>PED MULTI VITAMINS W/FL &amp; FE</i></b>		
<i>multi-vit/fl dro /fe 0.25</i>	1	PV
POLY-VI-FLOR CHW W/IRON	NC	
POLY-VI-FLOR SUS /IRON	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>PED MV W/ FLUORIDE</b>		
FLORIVA DRO PLUS	NC	
<i>multi vit/fl chw 0.25mg</i>	1	
<i>multi-vit/fl dro 0.5mg/ml</i>	1	PV
<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	PV
<i>pediatric vitamins acd w/ fluoride soln 0.5 mg/ml</i>	1	PV
POLY-VI-FLOR CHW 0.5MG	NC	
POLY-VI-FLOR CHW 0.25MG	NC	
POLY-VI-FLOR CHW 1MG	NC	
POLY-VI-FLOR MIS FS 0.5MG	NC	
POLY-VI-FLOR MIS FS 0.25	NC	
POLY-VI-FLOR SUS 0.25/ML	NC	
QUFLORA CHW	NC	
QUFLORA PED DRO 0.5MG/ML	NC	
QUFLORA PED DRO 0.25MG	NC	
TRI-VI-FLOR SUS 0.5MG/ML	NC	
TRI-VI-FLOR SUS 0.25/ML	NC	
TRI-VI-FLORO SUS 0.5MG/ML	NC	
TRI-VI-FLORO SUS 0.25/ML	NC	
<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	PV
<b>PEDIATRIC MULTIPLE VITAMINS &amp; MINERALS W/ FLUORIDE</b>		
FLORIVA CHW 0.5MG	NC	
FLORIVA CHW 0.25MG	NC	
FLORIVA CHW 1MG	NC	
TEXAVITE LQ LIQ	NC	
<b>PRENATAL VITAMINS</b>		
ATABEX EC TAB	NC	
C-NATE DHA CAP 28-1-200	NC	
CITRANATAL CAP HARMONY	NC	
CITRANATAL CAP MEDLEY	NC	
CITRANATAL MIS 90 DHA	NC	
CITRANATAL MIS B-CALM	NC	
CITRANATAL PAK ASSURE	NC	
CITRANATAL PAK DHA	NC	
CITRANATAL PAK ESSENCE	NC	
CITRANATAL TAB BLOOM	NC	
CITRANATAL TAB RX	NC	
CO-NATAL FA TAB 29-1MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
COMPLETE NAT PAK DHA	NC	
COMPLETENATE CHW	NC	
CONCEPT DHA CAP	NC	
CONCEPT OB CAP	NC	
DUET DHA 400 MIS 25-1-400	NC	
DUET DHA MIS BALANCED	NC	
<i>elite-ob tab</i>	1	PV
ENBRACE HR CAP	NC	
FOLET DHA PAK	NC	
FOLET ONE CAP 38-1-225	NC	
FOLIVANE-OB CAP	NC	
<i>inatal gt tab</i>	1	PV
KOSHR PRENAT TAB 30-1MG	NC	
MARNATAL-F CAP	NC	
MYNATAL CAP	NC	
MYNATAL PLUS TAB	NC	
MYNATAL-Z TAB	NC	
NATACHEW CHW	NC	
NATALVIT TAB 75-1MG	NC	
NEEVO DHA CAP 27-1.13	NC	
NEONATAL TAB COMPLETE	NC	
NESTABS DHA PAK	NC	
NESTABS ONE CAP	NC	
NESTABS TAB	NC	
O-CAL TAB PRENATAL	NC	
OB COMPLETE CAP ONE	NC	
OB COMPLETE CAP PETITE	NC	
OB COMPLETE TAB	NC	
OB COMPLETE TAB PREMIER	NC	
OB COMPLETE/ CAP DHA	NC	
OBSTETRIX EC TAB	NC	
OBSTETRIX MIS DHA	NC	OTC
PNV FOLIC AC TAB + IRON	NC	
PNV PRENATAL TAB PLUS	NC	
PNV TABS TAB 29-1MG	NC	
<i>pnv-dha cap</i>	1	PV
PNV-DHA CAP DOCUSATE	NC	
PNV-OMEGA CAP	NC	
<i>pnv-select tab</i>	1	PV
PREMESISRX TAB	NC	
PRENA1 CHW	NC	
PRENA1 PEARL CAP	NC	
PRENA 1 TRUE MIS	NC	
PRENAISSANCE CAP	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PRENAISSANCE CAP PLUS	NC	
<i>prenatabs rx tab</i>	1	OTC; PV
PRENATAL 19 CHW 29-1MG	NC	
<i>prenatal 19 chw tab</i>	1	PV
PRENATAL 19 TAB 29-1MG	NC	
PRENATAL DHA PAK 27-1-250	NC	
PRENATAL TAB 27-1MG	NC	
PRENATAL TAB PLUS	NC	
PRENATAL VIT TAB LOW IRON	NC	
PRENATAL+FE TAB 29-1MG	NC	
PRENATAL-U CAP 106.5-1	NC	
PRENATE AM TAB 1MG	NC	
PRENATE CAP ENHANCE	NC	
PRENATE CAP ESSENT	NC	
PRENATE CAP PIXIE	NC	
PRENATE CAP RESTORE	NC	
PRENATE CHW 0.6-0.4	NC	
PRENATE DHA CAP	NC	
PRENATE MINI CAP	NC	
PRENATE TAB ELITE	NC	
PRENATRIX TAB	NC	
PREPLUS TAB 27-1MG	NC	
PRETAB TAB 29-1MG	NC	
PRIMACARE CAP	NC	
PROVIDA OB CAP	NC	
REDICHEW RX CHW	NC	
RELNATE DHA CAP	NC	
SE-NATAL 19 CHW	NC	
SE-NATAL 19 TAB	NC	
SELECT-OB CHW	NC	
SELECT-OB+ PAK DHA	NC	
TARON-C DHA CAP	NC	
TARON-PREX CAP	NC	
THRIVITE RX TAB 29-1MG	NC	
TRI-TABS DHA MIS	NC	
TRICARE PRE CAP 27-1-500	NC	
TRICARE TAB PRENATAL	NC	
TRINATAL RX TAB 1	NC	
<i>trinate tab</i>	1	PV
TRISTART DHA CAP	NC	
TRISTART ONE CAP 35-1-215	NC	
VINATE DHA CAP 27-1.13	NC	
VINATE II TAB	NC	
VINATE M TAB	NC	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
VINATE ONE TAB	NC	
VIRT-C DHA CAP	NC	
VIRT-NATE CAP DHA	NC	
VIRT-PN DHA CAP	NC	
VIRT-PN PLUS CAP	NC	
VITAFOL CAP ULTRA	NC	
VITAFOL CHW GUMMIES	NC	
VITAFOL FE+ CAP	NC	
VITAFOL-NANO TAB	NC	
VITAFOL-OB PAK +DHA	NC	
VITAFOL-OB TAB 65-1MG	NC	
VITAFOL-ONE CAP	NC	
VITAMEDMD CAP ONE RX	NC	
VITAPEARL CAP	NC	
VITATRUE MIS	NC	
VIVA DHA CAP	NC	
VOL-PLUS TAB	NC	
VOL-TAB RX TAB	NC	
VP-HEME OB MIS + DHA	NC	
VP-PNV-DHA CAP	NC	
ZATEAN-PN CAP DHA	NC	
ZATEAN-PN CAP PLUS	NC	

## **MUSCULOSKELETAL THERAPY AGENTS**

### **ARTICULAR CARTILAGE REPAIR THERAPY**

MACI MIS	NC	
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### **CENTRAL MUSCLE RELAXANTS**

AMRIX CAP 15MG	NC	
AMRIX CAP 30MG	NC	
<i>baclofen intrathecal inj 10 mg/20ml (500 mcg/ml)</i>	1	
<i>baclofen intrathecal inj 20 mg/20ml (1000 mcg/ml)</i>	1	
<i>baclofen intrathecal inj 40 mg/20ml (2000 mcg/ml)</i>	1	
<i>baclofen oral soln 5 mg/5ml</i>	2	
<i>baclofen tab 10 mg</i>	1	
<i>baclofen tab 20 mg</i>	1	
<i>carisoprodol tab 250 mg</i>	NC	
<i>carisoprodol tab 350 mg</i>	1	
<i>chlorzoxazone tab 250 mg</i>	1	
<i>chlorzoxazone tab 375 mg</i>	NC	
<i>chlorzoxazone tab 500 mg</i>	1	
<i>chlorzoxazone tab 750 mg</i>	NC	
<i>cyclobenzaprine hcl cap er 24hr 15 mg</i>	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>cyclobenzaprine hcl cap er 24hr 30 mg</i>	NC	
<i>cyclobenzaprine hcl tab 5 mg</i>	1	
<i>cyclobenzaprine hcl tab 7.5 mg</i>	NC	
<i>cyclobenzaprine hcl tab 10 mg</i>	1	
<i>fexmid tab 7.5mg</i>	NC	
FLEQSUVY SUS 25MG/5ML	NC	
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	
<i>lorzone tab 375mg</i>	NC	
<i>lorzone tab 750mg</i>	NC	
LYVISPAH GRA 5MG	NC	
LYVISPAH GRA 10MG	NC	
LYVISPAH GRA 20MG	NC	
<i>metaxalone tab 400 mg</i>	NC	
<i>metaxalone tab 800 mg</i>	1	
<i>metaxalone tab 800 mg</i>	NC	
<i>methocarbamol inj 1000 mg/10ml</i>	2	
<i>methocarbamol tab 500 mg</i>	1	
<i>methocarbamol tab 750 mg</i>	1	
<i>orphenadrine citrate inj 30 mg/ml</i>	2	
<i>orphenadrine citrate tab er 12hr 100 mg</i>	1	
ROBAXIN INJ 100MG/ML	3	
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	3	
<b><i>DIRECT MUSCLE RELAXANTS</i></b>		
DANTRIUM CAP 25MG	2	
DANTRIUM IV INJ 20MG	3	
<i>dantrolene sodium cap 25 mg</i>	1	
<i>dantrolene sodium cap 50 mg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>dantrolene sodium cap 100 mg</i>	1	
<i>dantrolene sodium for iv soln 20 mg</i>	1	
<i>revonto inj 20mg</i>	1	
RYANODEX INJ 250MG	3	

### **MUSCLE RELAXANT COMBINATIONS**

<i>norgesic tab</i>	NC	
NORGESIC TAB FORTE	NC	
<i>orphenadrine w/ aspirin &amp; caffeine tab 25-385-30 mg</i>	NC	
<i>orphenadrine w/ aspirin &amp; caffeine tab 50-770-60 mg</i>	NC	
<i>orphengesic tab forte</i>	NC	

### **VISCOSUPPLEMENTS**

DUROLANE INJ 60MG/3ML	2	PA
EUFLEXXA INJ 10MG/ML	2	PA
GEL-ONE INJ 30MG/3ML	NC	
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	NC	

### **NASAL AGENTS - SYSTEMIC AND TOPICAL**

#### **NASAL AGENT COMBINATIONS**

<i>azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act</i>	1	
DYMISTA SPR 137-50	NC	
RYALTRIS SPR 665-25	3	

#### **NASAL AGENTS - MISC.**

NOZIN NASAL KIT SANITIZE	3	OTC
NOZIN NASAL MIS SANITIZE	3	OTC

#### **NASAL ANESTHETICS**

COCAINE HCL SOL 40MG/ML	NC	
GOPRELTO SOL 40MG/ML	NC	

#### **NASAL ANTIALLERGY**

<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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>olopatadine hcl nasal soln 0.6%</i>	1	
PATANASE SPR 0.6%	3	
<b>NASAL ANTICHOLINERGICS</b>		
<i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)</i>	1	
<i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)</i>	1	
<b>NASAL STEROIDS</b>		
BECONASE AQ SUS 0.042%	NC	
<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	
OMNARIS SPR	NC	
QNASL AER 80MCG	NC	
QNASL CHILD SPR 40MCG	NC	
SINUVA IMP 1350MCG	NC	
VERAMYST SPR 27.5MCG	NC	
XHANCE MIS 93MCG	3	
ZETONNA AER 37MCG	NC	
<b>SYMPATHOMIMETIC DECONGESTANTS</b>		
ADRENALIN SOL 1:1000	3	
<i>epinephrine hcl nasal soln 0.1%</i>	1	
<b>NEUROMUSCULAR AGENTS</b>		
<b>ALS AGENTS</b>		
RADICAVA INJ 30MG	6	SP, PA, QL
RADICAVA ORS SUS 105/5ML	6	SP, PA, QL
RADICAVA ORS SUS STARTER	6	SP, PA, QL
RELYVRIO PAK 3-1GM	NC	
RILUTEK TAB 50MG	3	
<i>riluzole tab 50 mg</i>	1	
<b>DEPOLARIZING MUSCLE RELAXANTS</b>		
ANECTINE INJ 20MG/ML	3	
ANECTINE INJ 200/10ML	3	
QUELICIN INJ 20MG/ML	3	
SUCCINYLCHOL INJ 20MG/ML	3	
<i>succinylcholine chloride inj 20 mg/ml</i>	1	
<b>FRIEDRICH'S ATAXIA AGENTS</b>		
SKYCLARYS CAP 50MG	NC	
<b>MUSCULAR DYSTROPHY AGENTS</b>		
EXONDYS 51 SOL 100/2ML	6	SP, PA, QL
EXONDYS 51 SOL 500/10ML	6	SP, PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
VILTEPSO SOL	NC	
VYONDYS 53 INJ 100/2ML	NC	
<b>NEUROMUSCULAR BLOCKING AGENT - NEUROTOXINS</b>		
BOTOX INJ 100UNIT	NC	
BOTOX INJ 200UNIT	NC	
DYSPOIN INJ 300UNIT	3	PA
DYSPOIN 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
<b>NONDEPOLARIZING MUSCLE RELAXANTS</b>		
<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	
NIMBEX INJ 2MG/ML	3	
NIMBEX INJ 10MG/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	
<b>RETT SYNDROME AGENTS</b>		
DAYBUE SOL 200MG/ML	6	SP, PA, QL
<b>SPINAL MUSCULAR ATROPHY AGENTS (SMA)</b>		
EVRYSDI SOL	6	SP, PA, QL
SPINRAZA INJ 12MG/5ML	NC	
<b>NUTRIENTS</b>		
<b>CARBOHYDRATES</b>		
<i>dextrose inj 5%</i>	1	
<i>dextrose inj 10%</i>	1	
DEXTROSE INJ 20%	3	
<i>dextrose inj 25%</i>	1	
DEXTROSE INJ 25%	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
DEXTROSE INJ 30%	3	
DEXTROSE INJ 40%	3	
<i>dextrose inj 50%</i>	1	
DEXTROSE INJ 50%	3	
<i>dextrose inj 70%</i>	1	
<b>LIPIDS</b>		
CLINOLIPID EMU 20%	3	
INTRALIPID INJ 20%	3	
INTRALIPID INJ 30%	3	
NEOKE MCT70 POW	NC	
NUTRILIPID EMU 20%	3	
SMOFLIPID EMU	3	
<b>LIPOTROPICS</b>		
LECITHIN GRA	3	
<b>MISC. NUTRITIONAL SUBSTANCES</b>		
CYTOTINE POW	3	
<b>PROTEIN-CARBOHYDRATE-LIPID COMBINATIONS</b>		
KABIVEN EMU	3	
PERIKABIVEN EMU	3	
<b>PROTEINS</b>		
AMINO ACID INJ 5%	3	
AMINO/DEXTRO SOL CAL/HEPA	3	
<i>aminoam cap rms</i>	1	
<i>aminorelief cap rms</i>	1	
<i>aminosyn ii sol 15%</i>	1	
AMINOSYN INJ 10%	3	
AMINOSYN-PF INJ 7%	3	
AMINOSYN-PF INJ 10%	3	
CLINIMIX E INJ 2.75/D5W	3	
CLINIMIX E INJ 4.25/D5W	3	
CLINIMIX E INJ 4.25/D10	3	
CLINIMIX E INJ 5%/D15W	3	
CLINIMIX E INJ 5%/D20W	3	
CLINIMIX INJ 4.25/D5W	3	
CLINIMIX INJ 4.25/D10	3	
CLINIMIX INJ 5%/D15W	3	
CLINIMIX INJ 5%/D20W	3	
CLINIMIX INJ 8/10	3	
CLINIMIX INJ 8/14	3	
<i>clinisol sf inj 15%</i>	1	
ELCYS INJ 50MG/ML	3	
<i>plenamine inj 15%</i>	1	
PREMASOL SOL 10%	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PROSOL INJ 20%	3	
TRAVASOL INJ 10%	3	
TROPHAMINE INJ 10%	3	

## **OPHTHALMIC AGENTS**

### **ARTIFICIAL TEARS AND LUBRICANTS**

LACRISERT MIS 5MG OP	NC	
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### **BETA-BLOCKERS - OPTHALMIC**

<i>betaxolol hcl ophth soln 0.5%</i>	1	
BETIMOL SOL 0.5%	NC	
BETIMOL SOL 0.25%	NC	
BETOPTIC-S SUS 0.25% OP	2	
<i>brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%</i>	2	
<i>carteolol hcl ophth soln 1%</i>	1	
COMBIGAN SOL 0.2/0.5%	NC	
COSOPT PF SOL 2%-0.5%	3	
COSOPT SOL 22.3-6.8	3	
DORZOL/TIMOL SOL 22.3-6.8	NC	
<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	
ISTALOL SOL 0.5% OP	3	
<i>levobunolol hcl ophth soln 0.5%</i>	1	
TIM/BRIM/DOR SOL	NC	
TIM/DORZ/LAT SOL	NC	
TIMOL/BRIM SOL DORZ/LAT	NC	
TIMOL/LATAN SOL	NC	
<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	
<i>timolol maleate preservative free ophth soln 0.5%</i>	2	
<i>timolol maleate preservative free ophth soln 0.25%</i>	1	
TIMOPTIC OCU SOL 0.25% OP	NC	
TIMOPTIC SOL 0.5% OP	3	
TIMOPTIC SOL 0.25% OP	3	
TIMOPTIC-XE SOL 0.5% OP	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
TIMOPTIC-XE SOL 0.25% OP	3	
<b>CYCLOPLEGIC MYDRIATICS</b>		
<i>altafrin sol 2.5% op</i>	1	
<i>altafrin sol 10% op</i>	1	
ATROPINE SUL SOL 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	
ISOPTO ATROP SOL 1% OP	3	
MYDRIACYL SOL 1% OP	3	
<i>phenylephrine hcl ophth soln 2.5%</i>	1	
<i>phenylephrine hcl ophth soln 10%</i>	1	
<i>tropicamide ophth soln 0.5%</i>	1	
<i>tropicamide ophth soln 1%</i>	1	
<b>MIOTICS</b>		
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	
<b>OPHTHALMIC - ANGIOGENESIS INHIBITORS</b>		
BEOVU INJ 6/0.05ML	NC	
BEVACIZUMAB INJ 2.75MG	NC	
BEVACIZUMAB INJ 3.75MG	NC	
BYOOVIZ INJ 0.5MG	NC	
CIMERLI INJ 0.3MG	NC	
CIMERLI INJ 0.5MG	NC	
EYLEA INJ 2/0.05ML	5	SP, PA
LUCENTIS INJ 0.3MG	5	SP, PA
LUCENTIS INJ 0.5MG	5	SP, PA
LUCENTIS SOL 0.3MG	5	SP, PA
LUCENTIS SOL 0.5MG	5	SP, PA
SUSVIMO INJ 10/0.1ML	3	PA
<b>OPHTHALMIC ADRENERGIC AGENTS</b>		
ALPHAGAN P SOL 0.1%	2	
ALPHAGAN P SOL 0.15%	2	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>apraclonidine hcl ophth soln 0.5% (base equivalent)</i>	1	
BRIMO/DORZO SOL 0.15-2%	NC	
<i>brimonidine tartrate ophth soln 0.2%</i>	1	
<i>brimonidine tartrate ophth soln 0.15%</i>	2	
IOPIDINE SOL 1% OP	3	
SIMBRINZA SUS 1-0.2%	2	

### **OPHTHALMIC ANTI-INFECTIVES**

<i>ak-poly-bac oin op</i>	1	
AZASITE SOL 1%	NC	
<i>bacitracin ophth oint 500 unit/gm</i>	2	
<i>bacitracin-polymyxin b ophth oint</i>	1	
BESIVANCE SUS 0.6%	2	
BETADINE SOL 5% OP	3	
CILOXAN OIN 0.3% OP	NC	
CILOXAN SOL 0.3% OP	NC	
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</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>	2	
<i>levofloxacin ophth soln 1.5%</i>	2	
MITOSOL KIT 0.2MG	3	
<i>moxifloxacin hcl ophth soln 0.5% (base eq) (2 times daily)</i>	2	
<i>moxifloxacin hcl ophth soln 0.5% (base equiv)</i>	1	
MOXIFLOXACIN SOL 1MG/ML	NC	
MOXIFLOXACIN SOL 5MG/ML	NC	
NATACYN SUS 5% OP	3	
<i>neo-polycin oin op</i>	1	
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	1	
<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	1	
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	
POVIDONE IOD SOL 5%	3	
<i>sulfacetamide sodium ophth oint 10%</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>sulfacetamide sodium ophth soln 10%</i>	1	
<i>tobramycin ophth soln 0.3%</i>	1	
TOBREX OIN 0.3% OP	3	
<i>trifluridine ophth soln 1%</i>	2	
VIGAMOX DRO 0.5%	3	
XDEMZY DRO 0.25%	NC	
ZIRGAN GEL 0.15%	NC	
ZYMAXID SOL 0.5%	3	
<b>OPHTHALMIC COMPLEMENT INHIBITORS</b>		
IZERVAY SOL 2/0.1ML	NC	
SYFOVRE INJ 15/0.1ML	NC	
<b>OPHTHALMIC IMMUNOMODULATORS</b>		
<i>cyclosporine (ophth) emulsion 0.05%</i>	NC	
RESTASIS EMU 0.05% OP	1	PA, QL
RESTASIS MUL EMU 0.05% OP	2	PA, QL
<b>OPHTHALMIC INTEGRIN ANTAGONISTS</b>		
XIIDRA DRO 5%	2	PA
<b>OPHTHALMIC KINASE INHIBITORS</b>		
RHOPRESSA SOL 0.02%	NC	
ROCKLATAN DRO	NC	
<b>OPHTHALMIC LOCAL ANESTHETICS</b>		
AKTEN GEL 3.5%	3	
ALCAINE SOL 0.5% OP	3	
<i>altacaine sol 0.5% op</i>	1	
<i>proparacaine hcl ophth soln 0.5%</i>	1	
<i>tetracaine hcl ophth soln 0.5%</i>	1	
<b>OPHTHALMIC NERVE GROWTH FACTORS</b>		
OXERVATE SOL 20MCG/ML	6	SP, QL
<b>OPHTHALMIC PHOTODYNAMIC THERAPY AGENTS</b>		
VISUDYNE INJ 15MG	6	SP, PA
<b>OPHTHALMIC PHOTOENHANCERS</b>		
PHOTREXA VIS SOL 0.146-20	NC	
PHOTREXA/PHO SOL VISC KIT	NC	
<b>OPHTHALMIC STEROIDS</b>		
ALREX SUS 0.2%	NC	
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	1	
BLEPHAMIDE OIN S.O.P.	3	
<i>dexamethasone sodium phosphate ophth soln 0.1%</i>	1	
DEXTENZA MIS 0.4MG	NC	
DEXYCU SUS 9%	NC	
<i>difluprednate ophth emulsion 0.05%</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
DUREZOL EMU 0.05%	3	
EYSUVIS DRO 0.25%	3	PA, QL
FLAREX SUS 0.1% OP	NC	
<i>fluorometholone ophth susp 0.1%</i>	1	
FML FORTE SUS 0.25% OP	NC	
FML LIQUIFLM SUS 0.1% OP	NC	
FML OIN 0.1% OP	NC	
ILUVIEN IMP 0.19MG	6	SP
INVELTYS SUS 1%	NC	
LOTEMAX GEL 0.5%	NC	
LOTEMAX OIN 0.5%	NC	
LOTEMAX SM GEL 0.38%	NC	
LOTEMAX SUS 0.5%	NC	
<i>loteprednol etabonate ophth gel 0.5%</i>	2	
<i>loteprednol etabonate ophth susp 0.5%</i>	2	
MAXIDEX SUS 0.1% OP	NC	
MAXITROL OIN 0.1% OP	3	
MAXITROL SUS 0.1% OP	3	
<i>neo-polycin oin hc 1%op</i>	1	
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	1	
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	1	
<i>neomycin-polymyxin-hc ophth susp</i>	2	
OZURDEX IMP 0.7MG	6	SP
PRED FORTE SUS 1% OP	NC	
PRED MILD SUS 0.12% OP	NC	
PRED SOD PHO SOL 1% OP	3	
PRED-G S.O.P OIN OP	3	
PRED-G SUS OP	3	
<i>prednisolone acetate ophth susp 1%</i>	1	
PREDNISOLONE SUS 1%	3	
RETISERT IMP 0.59MG	6	SP
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	1	
TOBRADEX OIN 0.3-0.1%	2	
TOBRADEX ST SUS 0.3-0.05	NC	
TOBRADEX SUS 0.3-0.1%	3	
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	2	
TRIESENCE INJ 40MG/ML	3	
TRIMOXI+ INJ	NC	
XIPERE SUS 40MG/ML	NC	
ZYLET SUS 0.5-0.3%	NC	

Drug Name	Drug Tier	Requirements/Limits
<b>OPHTHALMIC SURGICAL AIDS</b>		
AMVISC INJ 12MG/ML	3	
AMVISC PLUS INJ 16MG/ML	3	
GELFILM MIS OP	3	
HEALON5 PRO INJ 23MG/ML	3	
HEALON DUET INJ PRO	3	
HEALON GV INJ 18MG PRO	3	
HEALON PRO INJ 10MG/ML	3	
MEMBRANEBLUE INJ 0.15%	3	
OMIDRIA INJ 1-0.3%	3	
PROVISC INJ 1%	3	
VISIONBLUE INJ 0.06%	3	
<b>OPHTHALMICS - MISC.</b>		
ACULAR LS SOL 0.4%	3	
ACULAR SOL 0.5% OP	3	
ACUVAIL SOL 0.45%	NC	
<i>ak-fluor inj 10% op</i>	1	
AK-FLUOR INJ 25% OP	3	
ALOCRIAL SOL 2%	3	
ALOMIDE SOL 0.1% OP	3	
<i>altafluor-be sol 0.25-0.4</i>	1	
<i>azelastine hcl ophth soln 0.05%</i>	1	
AZOPT SUS 1% OP	3	
<i>bepotastine besilate ophth soln 1.5%</i>	2	
BEPREVE DRO 1.5%	3	
<i>brinzolamide ophth susp 1%</i>	2	
<i>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</i>	2	
BROMSITE DRO 0.075%	NC	
BSS PLUS SOL OP	3	
BSS SOL OP	3	
<i>cromolyn sodium ophth soln 4%</i>	1	
CYSTARAN SOL 0.44%	6	SP, PA, QL
<i>diclofenac sodium ophth soln 0.1%</i>	1	
<i>dorzolamide hcl ophth soln 2%</i>	1	
DORZOLAMIDE SOL 2%	3	
<i>epinastine hcl ophth soln 0.05%</i>	1	
FLUOR-I-STRI TES 1MG OP	1	
FLUORE/BENOX SOL 0.3-0.4%	3	
<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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
FLURA-SAFE SOL	3	
<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	
LASTACFT SOL 0.25%	NC	
NEVANAC SUS 0.1%	NC	
<i>olopatadine hcl ophth soln 0.1% (base equivalent)</i>	1	
<i>olopatadine hcl ophth soln 0.2% (base equivalent)</i>	1	
PAREMYD SOL 1-0.25%	3	
PROLENSA SOL 0.07%	2	
TRUSOPT SOL 2% OP	3	
UPNEEQ SOL 0.1%	NC	
ZERVIAE DRO 0.24%	NC	

### **PROSTAGLANDINS - OPHTHALMIC**

<i>bimatoprost ophth soln 0.03%</i>	1	
IYUZEH DRO 0.005%	NC	
<i>latanoprost ophth soln 0.005%</i>	1	
LATANOPROST SOL 0.005%	NC	
LUMIGAN SOL 0.01%	NC	
<i>tafluprost preservative free (pf) ophth soln 0.0015%</i>	1	
TRAVATAN Z DRO 0.004%	NC	
<i>travoprost ophth soln 0.004% (benzalkonium free) (bak free)</i>	1	
VYZULTA SOL 0.024%	NC	
XALATAN SOL 0.005%	3	
ZIOPTAN DRO 0.0015%	2	ST

### **OTIC AGENTS**

#### **OTIC AGENTS - MISCELLANEOUS**

<i>acetic acid otic soln 2%</i>	1	
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#### **OTIC ANTI-INFECTIVES**

CETRAXAL SOL 0.2%	3	
<i>ciprofloxacin hcl otic soln 0.2% (base equivalent)</i>	2	
<i>ofloxacin otic soln 0.3%</i>	1	
OTIPRIO SUS 60MG/ML	NC	

#### **OTIC COMBINATIONS**

CIPRO HC SUS OTIC	NC	
CIPRODEX SUS 0.3-0.1%	NC	
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>ciprofloxacin-fluocinolone acetone (pf) otic soln 0.3-0.025%</i>	NC	
CORTISPORIN SUS -TC OTIC	3	
<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 STEROIDS**

DERMOTIC OIL 0.01%	3	
<i>flac oil 0.01%</i>	1	
<i>fluocinolone acetonide (otic) oil 0.01%</i>	1	
<i>hydrocortisone w/ acetic acid otic soln 1-2%</i>	1	

### **OXYTOCICS**

#### **ABORTIFACIENTS/AGENTS FOR CERVICAL RIPENING**

<i>carboprost tromethamine im soln 250 mcg/ml</i>	1	
CERVIDIL VAG MIS 10MG INS	3	
HEMABATE INJ 250MCG	3	
PREPIDIL GEL 0.5MG/3G	3	

### **OXYTOCICS**

<i>methergine tab 0.2mg</i>	2	
<i>methylergonovine maleate inj 0.2 mg/ml</i>	1	
<i>methylergonovine maleate tab 0.2 mg</i>	2	
<i>oxytocin inj 10 unit/ml</i>	1	
PITOCIN INJ 10UNT/ML	3	

### **PASSIVE IMMUNIZING AND TREATMENT AGENTS**

#### **ANTITOXINS-ANTIVENINS**

ANASCORP INJ	3	
ANAVIP INJ	6	SP
ANTIVENIN KIT LAT MACT	3	
ANTIVENIN NA INJ CORAL SN	3	
CROFAB INJ	3	

#### **IMMUNE SERUMS**

BIVIGAM INJ 10%	M	
CARIMUNE NF INJ 6GM	M	
CUTAQUIG SOL 1.65GM	5	SP, PA
CUTAQUIG SOL 1GM	5	SP, PA
CUTAQUIG SOL 2GM	5	SP, PA
CUTAQUIG SOL 3.3GM	5	SP, PA
CUTAQUIG SOL 4GM	5	SP, PA
CUTAQUIG SOL 8GM	5	SP, PA
CUVITRU INJ 2GM/10ML	M	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
CUVITRU INJ 4GM/20ML	M	
CUVITRU INJ 8GM/40ML	M	
CUVITRU SOL 1GM/5ML	M	
CYTOGAM INJ	6	PV
GAMMAGARD INJ 1GM/10ML	5	SP, PA
GAMMAGARD INJ 2.5GM/25	5	SP, PA
GAMMAGARD INJ 5GM/50ML	5	SP, PA
GAMMAGARD INJ 10GM/100	5	SP, PA
GAMMAGARD INJ 20GM/200	5	SP, PA
GAMMAGARD INJ 30GM/300	5	SP, PA
GAMMAGARD SD INJ 5GM HU	5	SP, PA
GAMMAGARD SD INJ 10GM HU	5	SP, PA
GAMMAKED INJ 1GM/10ML	5	SP, PA
GAMMAKED INJ 5GM/50ML	5	SP, PA
GAMMAKED INJ 10GM/100	5	SP, PA
GAMMAKED INJ 20GM/200	5	SP, PA
GAMUNEX-C INJ 1GM/10ML	5	SP, PA
GAMUNEX-C INJ 2.5GM/25	5	SP, PA
GAMUNEX-C INJ 5GM/50ML	5	SP, PA
GAMUNEX-C INJ 10GM/100	5	SP, PA
GAMUNEX-C INJ 20GM/200	5	SP, PA
GAMUNEX-C INJ 40/400ML	5	PA
HEPAGAM B INJ	M	
HIZENTRA INJ 1GM/5ML	5	SP, PA
HIZENTRA INJ 1GM/5ML	5	SP, PA
HIZENTRA INJ 2GM/10ML	5	SP, PA
HIZENTRA INJ 2GM/10ML	5	SP, PA
HIZENTRA INJ 4GM/20ML	5	SP, PA
HIZENTRA INJ 10/50ML	5	SP, PA
HIZENTRA SOL 20%	5	SP, PA
HYPERHEP B INJ	M	
HYPERRAB INJ 300UNIT	3	PV
HYPERRAB INJ 1500UNIT	3	PV
HYPERRHO S/D INJ 50MCG	M	
HYPERRHO S/D INJ 300MCG	M	
HYPERTET INJ 250/ML	3	PV
IMOGAM RABIE INJ 300/2ML	3	PV
KEDRAB SOL 150UNITS	3	PV
KEDRAB SOL 300/2ML	3	PV
MICRHOGAM PL INJ 50MCG	M	
NABI-HB INJ	M	
PANZYGA SOL 1GM/10ML	M	
PANZYGA SOL 2.5/25ML	M	
PANZYGA SOL 5GM/50ML	M	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PANZYGA SOL 10/100ML	M	
PANZYGA SOL 20/200ML	M	
PANZYGA SOL 30/300ML	M	
RHOGAM PLUS INJ 300MCG	M	
RHOPHYLAC INJ 1500/2ML	M	
VARIZIG INJ 125/1.2	M	
VARIZIG INJ 125UNIT	M	
WINRHO SDF INJ 1500UNIT	M	
WINRHO SDF INJ 2500UNIT	M	
WINRHO SDF INJ 5000UNIT	M	
WINRHO SDF INJ 15000UNT	M	

**MONOCLONAL ANTIBODIES**

BEBTELOVIMAB SOL 175/2ML	3	
EVUSHELD SOL	3	
SYNAGIS INJ 50/0.5ML	6	SP, PA; PV
SYNAGIS INJ 50MG	6	SP, PA; PV
SYNAGIS INJ 100MG/ML	6	SP, PA; PV
ZINPLAVA SOL 25MG/ML	NC	

**PASSIVE IMMUNIZING AGENTS - COMBINATIONS**

HYQVIA INJ 2.5-200	5	SP, PA
HYQVIA INJ 5-400	5	SP, PA
HYQVIA INJ 10-800	5	SP, PA
HYQVIA INJ 20-1600	5	SP, PA
HYQVIA INJ 30-2400	5	SP, PA

**PENICILLINS**

**AMINOPENICILLINS**

<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 cap 500 mg</i>	1	
<i>ampicillin sodium for inj 1 gm</i>	1	
<i>ampicillin sodium for inj 2 gm</i>	2	
<i>ampicillin sodium for inj 125 mg</i>	1	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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>	1	
<i>ampicillin sodium for iv soln 10 gm</i>	1	
<b>NATURAL PENICILLINS</b>		
BICILLIN L-A INJ 600000	3	
BICILLIN L-A INJ 1200000	3	
BICILLIN L-A INJ 2400000	3	
PEN G PROC INJ 600000	3	
PEN GK/DEXTR INJ 20000/ML	3	
PEN GK/DEXTR INJ 40000/ML	3	
PEN GK/DEXTR INJ 60000/ML	3	
<i>penicillin g potassium for inj 5000000 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>	2	
<b>PENICILLIN COMBINATIONS</b>		
<i>amoxicillin &amp; k clavulanate chew tab 200-28.5 mg</i>	1	
<i>amoxicillin &amp; k clavulanate chew tab 400-57 mg</i>	2	
<i>amoxicillin &amp; k clavulanate for susp 200-28.5 mg/5ml</i>	1	
<i>amoxicillin &amp; k clavulanate for susp 250-62.5 mg/5ml</i>	2	
<i>amoxicillin &amp; k clavulanate for susp 400-57 mg/5ml</i>	1	
<i>amoxicillin &amp; k clavulanate for susp 600-42.9 mg/5ml</i>	1	
<i>amoxicillin &amp; k clavulanate tab 250-125 mg</i>	2	
<i>amoxicillin &amp; k clavulanate tab 500-125 mg</i>	1	
<i>amoxicillin &amp; k clavulanate tab 875-125 mg</i>	1	
<i>amoxicillin &amp; k clavulanate tab er 12hr 1000-62.5 mg</i>	2	
<i>ampicillin &amp; sulbactam sodium for inj 1.5 (1-0.5) gm</i>	1	
<i>ampicillin &amp; sulbactam sodium for inj 3 (2-1) gm</i>	2	
<i>ampicillin &amp; sulbactam sodium for iv soln 1.5 (1-0.5) gm</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>ampicillin &amp; sulbactam sodium for iv soln 3 (2-1) gm</i>	1	
<i>ampicillin &amp; sulbactam sodium for iv soln 15 (10-5) gm</i>	1	
AUGMENTIN SUS ES-600	3	
AUGMENTIN TAB 500MG	3	
BICILLIN C-R INJ 900/300	3	
BICILLIN C-R INJ 1200000	3	
<i>piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)</i>	1	
<i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)</i>	1	
<i>piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)</i>	2	
<i>piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)</i>	1	
UNASYN INJ 1.5GM	3	
UNASYN INJ 3GM	3	
UNASYN INJ 15GM	3	
ZOSYN SOL 2-0.25GM	3	
ZOSYN SOL 3-0.375G	3	
ZOSYN SOL 4-0.50GM	3	

### **PENICILLINASE-RESISTANT PENICILLINS**

<i>dicloxacillin sodium cap 250 mg</i>	1	
<i>dicloxacillin sodium cap 500 mg</i>	2	
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>nafcillin sodium for iv soln 10 gm</i>	NC	
OXACILLIN INJ 1GM	3	
OXACILLIN INJ 2GM	3	
<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 iv soln 10 gm (base equivalent)</i>	1	

### **PROGESTINS**

#### **PROGESTINS**

<i>hydroxyprogesterone caproate im in oil 250 mg/ml</i>	4	SP, PA, QL
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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
MAKENA INJ 250MG/ML	6	SP, PA, QL
MAKENA INJ 275MG	6	SP, PA, QL
<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	
<i>megestrol acetate susp 625 mg/5ml</i>	2	
<i>norethindrone acetate tab 5 mg</i>	1	
<i>progesterone cap 100 mg</i>	1	
<i>progesterone cap 200 mg</i>	1	
<i>progesterone im in oil 50 mg/ml</i>	1	
PROMETRIUM CAP 100MG	NC	
PROMETRIUM CAP 200MG	NC	
PROVERA TAB 2.5MG	3	
PROVERA TAB 5MG	3	
PROVERA TAB 10MG	3	

## **PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.**

### **AGENTS FOR CHEMICAL DEPENDENCY**

<i>acamprosate calcium tab delayed release 333 mg</i>	1	PV
<i>disulfiram tab 250 mg</i>	1	PV
<i>disulfiram tab 500 mg</i>	1	PV
LUCEMYRA TAB 0.18MG	NC	

### **ANTI-CATAPLECTIC AGENTS**

LUMRYZ PAK 6GM	NC	
LUMRYZ PAK 7.5GM	NC	
LUMRYZ PAK 9GM	NC	
LUMRYZ PKG 4.5GM	NC	
XYREM SOL 500MG/ML	6	SP, PA, QL
XYWAV SOL 0.5GM/ML	5	SP, PA, QL

### **ANTIDEMENTIA AGENTS**

ADLARITY DIS 5MG/DAY	NC	
ADLARITY DIS 10MG/DAY	NC	
ARICEPT TAB 5MG	3	
ARICEPT TAB 10MG	3	
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>	1	
EXELON DIS 4.6MG/24	3	
EXELON DIS 9.5MG/24	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
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>	1	
<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>	2	
<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 10 mg</i>	1	
<i>memantine hcl tab 28 x 5 mg &amp; 21 x 10 mg titration pack</i>	2	
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	
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	
<i>rivastigmine tartrate cap 1.5 mg (base equivalent)</i>	1	
<i>rivastigmine tartrate cap 3 mg (base equivalent)</i>	1	
<i>rivastigmine tartrate cap 4.5 mg (base equivalent)</i>	1	
<i>rivastigmine tartrate cap 6 mg (base equivalent)</i>	1	
<i>rivastigmine td patch 24hr 4.6 mg/24hr</i>	2	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>rivastigmine td patch 24hr 9.5 mg/24hr</i>	2	
<i>rivastigmine td patch 24hr 13.3 mg/24hr</i>	2	
<b>COMBINATION PSYCHOTHERAPEUTICS</b>		
<i>chlordiazepoxide-amitriptyline tab 5-12.5 mg</i>	1	
<i>chlordiazepoxide-amitriptyline tab 10-25 mg</i>	1	
LYBALVI TAB 5-10MG	3	PA; PV
LYBALVI TAB 10-10MG	3	PA; PV
LYBALVI TAB 15-10MG	3	PA; PV
LYBALVI TAB 20-10MG	3	PA; 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>	1	
<i>olanzapine-fluoxetine hcl cap 12-50 mg</i>	2	
<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	
SYMBYAX CAP 3-25MG	3	
SYMBYAX CAP 6-25MG	3	
<b>FIBROMYALGIA AGENTS</b>		
SAVELLA MIS TITR PAK	3	
SAVELLA TAB 12.5MG	3	
SAVELLA TAB 25MG	3	
SAVELLA TAB 50MG	3	
SAVELLA TAB 100MG	3	
<b>MOVEMENT DISORDER DRUG THERAPY</b>		
AUSTEDO TAB 6MG	5	SP, PA, QL
AUSTEDO TAB 9MG	5	SP, PA, QL
AUSTEDO TAB 12MG	5	SP, PA, QL
AUSTEDO XR TAB 6MG	5	SP, PA, QL
AUSTEDO XR TAB 12MG	5	SP, PA, QL
AUSTEDO XR TAB 24MG	5	SP, PA, QL
INGREZZA CAP 40-80MG	5	SP, PA, QL
INGREZZA CAP 40MG	5	SP, PA, QL
INGREZZA CAP 60MG	5	SP, PA, QL
INGREZZA CAP 80MG	5	SP, PA, QL
<i>tetrabenazine tab 12.5 mg</i>	4	SP, PA, QL
<i>tetrabenazine tab 25 mg</i>	4	SP, PA, QL
XENAZINE TAB 12.5MG	NC	
XENAZINE TAB 25MG	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>MULTIPLE SCLEROSIS AGENTS</b>		
AMPYRA TAB 10MG	6	SP, ST, PA, QL
AUBAGIO TAB 7MG	NC	
AUBAGIO TAB 14MG	NC	
AVONEX PEN KIT 30MCG	5	SP, PA, QL; PV
AVONEX PREFL KIT 30MCG	5	SP, PA, QL; PV
BETASERON INJ 0.3MG	5	SP, PA, QL; PV
COPAXONE INJ 20MG/ML	5	SP, PA, QL; PV
COPAXONE INJ 40MG/ML	5	SP, PA, QL; PV
<i>dalfampridine tab er 12hr 10 mg</i>	4	SP, PA, QL
<i>dimethyl fumarate capsule delayed release 120 mg</i>	4	SP, PA, QL; PV
<i>dimethyl fumarate capsule delayed release 240 mg</i>	4	SP, PA, QL; PV
<i>dimethyl fumarate capsule dr starter pack 120 mg &amp; 240 mg</i>	4	SP, PA, QL; PV
EXTAVIA INJ 0.3MG	NC	
<i>fingolimod hcl cap 0.5 mg (base equiv)</i>	4	SP, PA, QL; PV
GILENYA CAP 0.5MG	NC	
<i>glatiramer acetate soln prefilled syringe 20 mg/ml</i>	4	SP, PA, QL; PV
<i>glatiramer acetate soln prefilled syringe 40 mg/ml</i>	4	SP, PA, QL; PV
<i>glatopa inj 20mg/ml</i>	4	SP, PA, QL; PV
<i>glatopa inj 40mg/ml</i>	4	SP, PA, QL; PV
KESIMPTA INJ 20/.4ML	5	SP, PA, QL; PV
LEMTRADA INJ 12/1.2ML	NC	
MAVENCLAD PAK 10MG(4)	6	SP, PA, QL; PV
MAVENCLAD PAK 10MG(5)	6	SP, PA, QL; PV
MAVENCLAD PAK 10MG(6)	6	SP, PA, QL; PV
MAVENCLAD PAK 10MG(7)	6	SP, PA, QL; PV
MAVENCLAD PAK 10MG(8)	6	SP, PA, QL; PV
MAVENCLAD PAK 10MG(9)	6	SP, PA, QL; PV
MAVENCLAD PAK 10MG(10)	6	SP, PA, QL; PV
MAYZENT PAK STARTER	5	SP, PA, QL; PV
MAYZENT TAB 0.25MG	5	SP, PA, QL; PV
MAYZENT TAB 1MG	5	SP, PA, QL; PV
MAYZENT TAB 2MG	5	SP, PA, QL; PV
OCREVUS INJ 300/10ML	5	SP, PA, QL; PV
PLEGRIDY INJ	6	SP, PA, QL; PV
PLEGRIDY INJ PEN	6	SP, PA, QL; PV
PLEGRIDY INJ STARTER	6	SP, PA, QL; PV
PLEGRIDY PEN INJ STARTER	6	SP, PA, QL; PV
PONVORY TAB 20MG	6	SP, PA, QL

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PONVORY TAB STARTER	6	SP, PA, QL; PV
REBIF INJ 22/0.5	5	SP, PA, QL; PV
REBIF INJ 44/0.5	5	SP, PA, QL; PV
REBIF REBIDO INJ 22/0.5	5	SP, PA, QL; PV
REBIF REBIDO INJ 44/0.5	5	SP, PA, QL; PV
REBIF REBIDO INJ TITRATN	5	SP, PA, QL; PV
REBIF TITRTN INJ PACK	5	SP, PA, QL; PV
TASCENSO ODT TAB 0.25MG	NC	
TECFIDERA CAP 120MG	NC	
TECFIDERA CAP 240MG	NC	
TECFIDERA MIS STARTER	NC	
TYSABRI INJ 300/15ML	5	SP, PA, QL; PV
VUMERITY CAP 231MG	5	SP, PA, QL; PV
ZEPOSIA 7DAY CAP STR PACK	5	SP, PA, QL; PV, Preferred for Ulcerative Colitis
ZEPOSIA CAP .92MG	5	SP, PA, QL; PV, Preferred for Ulcerative Colitis
ZEPOSIA CAP STR KIT	5	SP, PA, QL; PV, Preferred for Ulcerative Colitis
ZEPOSIA CAP STR KIT	5	SP, PA, QL; PV; Preferred for Ulcerative Colitis

### **POSTHERPETIC NEURALGIA (PHN)/NEUROPATHIC PAIN AGENTS**

GRALISE TAB 300MG	2	
GRALISE TAB 450MG	2	
GRALISE TAB 600MG	2	
GRALISE TAB 750MG	2	
GRALISE TAB 900MG	2	
LYRICA CR TAB 82.5MG	3	
LYRICA CR TAB 165MG	3	
LYRICA CR TAB 330MG	3	
<i>pregabalin tab er 24hr 82.5 mg</i>	2	
<i>pregabalin tab er 24hr 165 mg</i>	2	
<i>pregabalin tab er 24hr 330 mg</i>	2	

### **PSEUDOBULBAR AFFECT (PBA) AGENTS**

NUEDEXTA CAP 20-10MG	2	PA
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### **PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.**

<i>ergoloid mesylates tab 1 mg</i>	1	
<i>pimozide tab 1 mg</i>	1	
<i>pimozide tab 2 mg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>RESTLESS LEG SYNDROME (RLS) AGENTS</b>		
HORIZANT TAB 300MG ER	2	
HORIZANT TAB 600MG ER	2	
<b>SMOKING DETERRENTS</b>		
<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	0	ACA, PV
<i>cvs nicotine dis 7mg/24hr</i>	0	OTC; ACA, PV
<i>cvs nicotine dis 14mg/24h</i>	0	OTC; ACA, PV
<i>cvs nicotine dis 21mg/24h</i>	0	OTC; ACA, PV
<i>cvs nicotine gum 2mg cinn</i>	0	OTC; ACA, PV
<i>cvs nicotine gum 2mg mint</i>	0	OTC; ACA, PV
<i>cvs nicotine gum 2mg orig</i>	0	OTC; ACA, PV
<i>cvs nicotine gum 2mgfruit</i>	0	OTC; ACA, PV
<i>cvs nicotine gum 4mg</i>	0	OTC; ACA, PV
<i>cvs nicotine gum 4mg cinn</i>	0	OTC; ACA, PV
<i>cvs nicotine gum 4mg mint</i>	0	OTC; ACA, PV
<i>cvs nicotine gum 4mg orig</i>	0	OTC; ACA, PV
<i>cvs nicotine gum 4mgfruit</i>	0	OTC; ACA, PV
<i>cvs nicotine loz 2mg</i>	0	OTC; ACA, PV
<i>cvs nicotine loz 2mg mint</i>	0	OTC; ACA, PV
<i>cvs nicotine loz 4mg cinn</i>	0	OTC; ACA, PV
<i>cvs nicotine loz 4mg mint</i>	0	OTC; ACA, PV
<i>eq nicotine dis 7mg/24hr</i>	0	OTC; ACA, PV
<i>eq nicotine dis 14mg/24h</i>	0	OTC; ACA, PV
<i>eq nicotine dis 21mg/24h</i>	0	OTC; ACA, PV
<i>eq nicotine gum 2mg cinn</i>	0	OTC; ACA, PV
<i>eq nicotine gum 2mg mint</i>	0	OTC; ACA, PV
<i>eq nicotine gum 2mgfruit</i>	0	OTC; ACA, PV
<i>eq nicotine gum 4mg cinn</i>	0	OTC; ACA, PV
<i>eq nicotine gum 4mg mint</i>	0	OTC; ACA, PV
<i>eq nicotine gum 4mg orig</i>	0	OTC; ACA, PV
<i>eq nicotine gum 4mgfruit</i>	0	OTC; ACA, PV
<i>eq nicotine loz 2mg cinn</i>	0	OTC; ACA, PV
<i>eq nicotine loz 2mg mint</i>	0	OTC; ACA, PV
<i>eq nicotine loz 4mg cinn</i>	0	OTC; ACA, PV
<i>eq nicotine loz 4mg mint</i>	0	OTC; ACA, PV
<i>gnp nicotine dis 7mg/24hr</i>	0	OTC; ACA, PV
<i>gnp nicotine dis 14mg/24h</i>	0	OTC; ACA, PV
<i>gnp nicotine dis 21mg/24h</i>	0	OTC; ACA, PV
<i>gnp nicotine gum 2mg frt</i>	0	OTC; ACA, PV
<i>gnp nicotine gum 2mg mint</i>	0	OTC; ACA, PV
<i>gnp nicotine gum 2mg orig</i>	0	OTC; ACA, PV
<i>gnp nicotine gum 4mg frt</i>	0	OTC; ACA, PV
<i>gnp nicotine gum 4mg mint</i>	0	OTC; ACA, PV



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>gnp nicotine gum 4mg orig</i>	0	OTC; ACA, PV
<i>gnp nicotine loz 2mg mint</i>	0	OTC; ACA, PV
<i>gnp nicotine loz 4mg cher</i>	0	OTC; ACA, PV
<i>gnp nicotine loz 4mg mint</i>	0	OTC; ACA, PV
<i>gnp nicotine loz mini 2mg</i>	0	OTC; ACA, PV
<i>habitrol dis 21mg/24h</i>	0	OTC; ACA, PV
<i>hm nicotine dis 7mg/24hr</i>	0	OTC; ACA, PV
<i>hm nicotine dis 14mg/24h</i>	0	OTC; ACA, PV
<i>hm nicotine dis 21mg/24h</i>	0	OTC; ACA, PV
<i>hm nicotine gum 2mg</i>	0	OTC; ACA, PV
<i>hm nicotine gum 2mg mint</i>	0	OTC; ACA, PV
<i>hm nicotine gum 4mg frt</i>	0	OTC; ACA, PV
<i>hm nicotine gum 4mg mint</i>	0	OTC; ACA, PV
<i>hm nicotine loz 2mg</i>	0	OTC; ACA, PV
<i>hm nicotine loz 2mg cinn</i>	0	OTC; ACA, PV
<i>hm nicotine loz 2mg mint</i>	0	OTC; ACA, PV
<i>hm nicotine loz 4mg cinn</i>	0	OTC; ACA, PV
<i>hm nicotine loz 4mg mint</i>	0	OTC; ACA, PV
<i>kls quit2 gum 2mg</i>	0	OTC; ACA, PV
<i>kls quit2 loz 2mg</i>	0	OTC; ACA, PV
<i>kls quit4 gum 4mg</i>	0	OTC; ACA, PV
<i>kls quit4 loz 4mg</i>	0	OTC; ACA, PV
<i>nicotine dis 7mg/24hr</i>	0	OTC; ACA, PV
<i>nicotine dis step 1</i>	0	OTC; ACA, PV
<i>nicotine gum 2mg</i>	0	OTC; ACA, PV
<i>nicotine gum 4mg</i>	0	OTC; ACA, PV
<i>nicotine loz mini 2mg</i>	0	OTC; ACA, PV
<i>nicotine pol gum 4mg mint</i>	0	OTC; ACA, PV
<i>nicotine pol loz 2mg mini</i>	0	OTC; ACA, PV
<i>nicotine pol loz 4mg chry</i>	0	OTC; ACA, PV
<i>nicotine polacrilex gum 2 mg</i>	0	OTC; ACA, PV
<i>nicotine polacrilex gum 4 mg</i>	0	OTC; ACA, PV
<i>nicotine polacrilex lozenge 2 mg</i>	0	OTC; ACA, PV
<i>nicotine polacrilex lozenge 4 mg</i>	0	OTC; ACA, PV
<i>nicotine td dis 7mg/24hr</i>	0	OTC; ACA, PV
<i>nicotine td dis 14mg/24h</i>	0	OTC; ACA, PV
<i>nicotine td dis 21mg/24h</i>	0	OTC; ACA, PV
<i>nicotine td dis step 1</i>	0	OTC; ACA, PV
<i>nicotine td dis step 3</i>	0	OTC; ACA, PV
<i>nicotine td patch 24hr 14 mg/24hr</i>	0	OTC; ACA, PV
<i>nicotine td patch 24hr 21 mg/24hr</i>	0	OTC; ACA, PV
NICOTROL INH	3	ACA, PV
NICOTROL NS SPR 10MG/ML	3	ACA, PV
<i>qc nicotine dis 14mg/24h</i>	0	OTC; ACA, PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>qc nicotine dis 21mg/24h</i>	0	OTC; ACA, PV
<i>ra nicotine dis 14mg/24h</i>	0	OTC; ACA, PV
<i>ra nicotine dis 21mg/24h</i>	0	OTC; ACA, PV
<i>ra nicotine gum 2mg</i>	0	OTC; ACA, PV
<i>ra nicotine gum 2mg mint</i>	0	OTC; ACA, PV
<i>ra nicotine gum 4mg</i>	0	OTC; ACA, PV
<i>ra nicotine gum 4mg mint</i>	0	OTC; ACA, PV
<i>ra nicotine loz 2mg mint</i>	0	OTC; ACA, PV
<i>ra nicotine loz 4mg mint</i>	0	OTC; ACA, PV
<i>sm nicotine dis 7mg/24hr</i>	0	OTC; ACA, PV
<i>sm nicotine dis 14mg/24h</i>	0	OTC; ACA, PV
<i>sm nicotine dis 21mg/24h</i>	0	OTC; ACA, PV
<i>sm nicotine gum 2mg</i>	0	OTC; ACA, PV
<i>sm nicotine gum 2mg mint</i>	0	OTC; ACA, PV
<i>sm nicotine gum 4mg</i>	0	OTC; ACA, PV
<i>sm nicotine gum 4mg mint</i>	0	OTC; ACA, PV
<i>sm nicotine loz 2mg chry</i>	0	OTC; ACA, PV
<i>sm nicotine loz 2mg cinn</i>	0	OTC; ACA, PV
<i>sm nicotine loz 2mg mint</i>	0	OTC; ACA, PV
<i>sm nicotine loz 4mg</i>	0	OTC; ACA, PV
<i>sm nicotine loz 4mg cinn</i>	0	OTC; ACA, PV
<i>sm nicotine loz 4mg mint</i>	0	OTC; ACA, PV
<i>stop smoking gum 2mg mint</i>	0	OTC; ACA, PV
<i>stop smoking gum 2mg orig</i>	0	OTC; ACA, PV
<i>stop smoking gum 4mg</i>	0	OTC; ACA, PV
<i>stop smoking loz 2mg mint</i>	0	OTC; ACA, PV
<i>stop smoking loz 4mg mint</i>	0	OTC; ACA, PV
<i>thrive gum 2mg mint</i>	0	OTC; ACA, PV
<i>varenicline tartrate tab 0.5 mg (base equiv)</i>	0	ACA, PV
<i>varenicline tartrate tab 1 mg (base equiv)</i>	0	ACA, PV
<i>varenicline tartrate tab 11 x 0.5 mg &amp; 42 x 1 mg start pack</i>	0	ACA, PV
<b>TRANSTHYRETIN AMYLOIDOSIS AGENTS</b>		
ONPATTRO SOL 10MG/5ML	6	SP, PA, QL
TEGSEDI INJ 284/1.5	6	SP, PA, QL
<b>VASOMOTOR SYMPTOM AGENTS</b>		
<i>paroxetine mesylate cap 7.5 mg (base equiv)</i>	NC	
<b>RESPIRATORY AGENTS - MISC.</b>		
<b>ALPHA-PROTEINASE INHIBITOR (HUMAN)</b>		
ARALAST NP INJ 500MG	NC	
ARALAST NP INJ 1000MG	NC	
GLASSIA INJ	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PROLASTIN-C INJ 1000MG	6	SP, PA
ZEMAIRA INJ 1000MG	5	SP, PA
<b>CYSTIC FIBROSIS AGENTS</b>		
BRONCHITOL CAP 40MG	NC	
KALYDECO GRA 13.4MG	6	SP, PA, QL
KALYDECO PAK 25MG	6	SP, PA, QL
KALYDECO PAK 50MG	6	SP, PA, QL
KALYDECO PAK 75MG	6	SP, PA, QL
KALYDECO TAB 150MG	6	SP, PA, QL
ORKAMBI GRA 75-94MG	6	SP, PA, QL
ORKAMBI GRA 100-125	6	SP, PA, QL
ORKAMBI GRA 150-188	6	SP, PA, QL
ORKAMBI TAB 100-125	6	SP, PA, QL
ORKAMBI TAB 200-125	6	SP, PA, QL
PULMOZYME SOL 1MG/ML	6	SP, PA, QL
SYMDEKO TAB 50-75MG	6	SP, PA, QL
SYMDEKO TAB 100-150	6	SP, PA, QL
TRIKAFTA PAK 59.5MG	6	SP, PA, QL
TRIKAFTA PAK 75MG	6	SP, PA, QL
TRIKAFTA TAB	6	SP, PA, QL
<b>PLEURAL SCLEROSING AGENTS</b>		
SCLEROSOL AER INTRAPLE	3	
STERIL TALC SUS 5GM	3	
STERITALC POW 2GM	3	
STERITALC POW 3GM	3	
STERITALC POW 4GM	3	
<b>PULMONARY FIBROSIS AGENTS</b>		
ESBRIET CAP 267MG	NC	
ESBRIET TAB 267MG	NC	
ESBRIET TAB 801MG	NC	
OFEV CAP 100MG	5	SP, PA, QL
OFEV CAP 150MG	5	SP, PA, QL
<i>pirfenidone cap 267 mg</i>	4	SP, PA, QL
<i>pirfenidone tab 267 mg</i>	4	SP, PA, QL
<i>pirfenidone tab 801 mg</i>	4	SP, PA, QL
<b>RESPIRATORY AGENTS - MISC.</b>		
CUROSURF SUS 120/1.5	3	
CUROSURF SUS 240/3ML	3	
INFASURF SUS 35MG/ML	3	
SURVANTA INH	3	
<b>TETRACYCLINES</b>		
<b>AMINOMETHYLCYCLINES</b>		
NUZYRA INJ 100MG	3	PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
NUZYRA TAB 150MG	3	PA
<b>FLUOROCYCLINES</b>		
XERAVA INJ 50MG	3	
XERAVA INJ 100MG	3	
<b>GLYCYLCYCLINES</b>		
<i>tigecycline for iv soln 50 mg</i>	1	
TIGECYCLINE INJ 50MG	3	
TYGACIL INJ 50MG	NC	
<b>TETRACYCLINES</b>		
ACTICLATE TAB 75MG	NC	
ACTICLATE TAB 150MG	NC	
<i>avidoxy tab 100mg</i>	1	
<i>coremino tab 45mg</i>	NC	
<i>coremino tab 90mg</i>	NC	
<i>coremino tab 135mg</i>	NC	
<i>demeclocycline hcl tab 150 mg</i>	1	
<i>demeclocycline hcl tab 300 mg</i>	1	
DORYX MPC TAB 120MG	NC	
DORYX TAB 50MG	NC	
DORYX TAB 80MG	NC	
DORYX TAB 200MG	NC	
<i>doxy 100 inj 100mg</i>	1	
<i>doxycycline hyclate cap 50 mg</i>	1	
<i>doxycycline hyclate cap 100 mg</i>	1	
<i>doxycycline hyclate for inj 100 mg</i>	1	
<i>doxycycline hyclate tab 20 mg</i>	1	
<i>doxycycline hyclate tab 50 mg</i>	NC	
<i>doxycycline hyclate tab 75 mg</i>	NC	
<i>doxycycline hyclate tab 100 mg</i>	1	
<i>doxycycline hyclate tab 150 mg</i>	NC	
<i>doxycycline hyclate tab delayed release 50 mg</i>	NC	
<i>doxycycline hyclate tab delayed release 75 mg</i>	NC	
<i>doxycycline hyclate tab delayed release 80 mg</i>	NC	
<i>doxycycline hyclate tab delayed release 100 mg</i>	NC	
<i>doxycycline hyclate tab delayed release 150 mg</i>	NC	
<i>doxycycline hyclate tab delayed release 200 mg</i>	NC	
<i>doxycycline monohydrate cap 50 mg</i>	1	
<i>doxycycline monohydrate cap 75 mg</i>	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>doxycycline monohydrate cap 100 mg</i>	1	
<i>doxycycline monohydrate cap 150 mg</i>	NC	
<i>doxycycline monohydrate for susp 25 mg/5ml</i>	1	
<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>	1	
MINOCIN CAP 50MG	NC	
MINOCIN INJ 100MG	3	
<i>minocycline hcl cap 50 mg</i>	1	
<i>minocycline hcl cap 75 mg</i>	1	
<i>minocycline hcl cap 100 mg</i>	1	
<i>minocycline hcl cap er 24hr 45 mg (base equivalent)</i>	NC	
<i>minocycline hcl cap er 24hr 90 mg (base equivalent)</i>	NC	
<i>minocycline hcl cap er 24hr 135 mg (base equivalent)</i>	NC	
<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>	NC	
<i>minocycline hcl tab er 24hr 55 mg</i>	NC	
<i>minocycline hcl tab er 24hr 65 mg</i>	NC	
<i>minocycline hcl tab er 24hr 80 mg</i>	NC	
<i>minocycline hcl tab er 24hr 90 mg</i>	NC	
<i>minocycline hcl tab er 24hr 105 mg</i>	NC	
<i>minocycline hcl tab er 24hr 115 mg</i>	NC	
<i>minocycline hcl tab er 24hr 135 mg</i>	NC	
MINOLIRA TAB 105MG	NC	
MINOLIRA TAB 135MG	NC	
<i>mondoxyne nl cap 75mg</i>	NC	
<i>mondoxyne nl cap 100mg</i>	1	
MORGIDOX KIT 1X50MG	NC	
<i>okebo cap 75mg</i>	NC	
SEYSARA TAB 100MG	NC	
SEYSARA TAB 150MG	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
<i>targadox tab 50mg</i>	NC	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>tetracycline hcl cap 250 mg</i>	1	
<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	

## **THYROID AGENTS**

### **ANTITHYROID AGENTS**

<i>methimazole tab 5 mg</i>	1	
<i>methimazole tab 10 mg</i>	1	
<i>propylthiouracil tab 50 mg</i>	1	

### **THYROID HORMONES**

ADTHYZA TAB 16.25MG	NC	
ADTHYZA TAB 32.5MG	NC	
ADTHYZA TAB 65MG	NC	
ADTHYZA TAB 97.5MG	NC	
ADTHYZA TAB 130MG	NC	
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	NC	
CYTOMEL TAB 25MCG	NC	
CYTOMEL TAB 50MCG	NC	
<i>euthyrox tab 25mcg</i>	1	
<i>euthyrox tab 50mcg</i>	1	
<i>euthyrox tab 75mcg</i>	1	
<i>euthyrox tab 88mcg</i>	1	
<i>euthyrox tab 100mcg</i>	1	
<i>euthyrox tab 112mcg</i>	1	
<i>euthyrox tab 125mcg</i>	1	
<i>euthyrox tab 137mcg</i>	1	
<i>euthyrox tab 150mcg</i>	1	
<i>euthyrox tab 175mcg</i>	1	
<i>euthyrox tab 200mcg</i>	1	
<i>levo-t tab 25mcg</i>	1	
<i>levo-t tab 50mcg</i>	1	
<i>levo-t tab 75mcg</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	
<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 100MCG	3	
LEVOTHYROXIN INJ 200MCG	3	
LEVOTHYROXIN INJ 500MCG	3	
<i>levothyroxine sodium cap 13 mcg</i>	NC	
<i>levothyroxine sodium cap 25 mcg</i>	NC	
<i>levothyroxine sodium cap 50 mcg</i>	NC	
<i>levothyroxine sodium cap 75 mcg</i>	NC	
<i>levothyroxine sodium cap 88 mcg</i>	NC	
<i>levothyroxine sodium cap 100 mcg</i>	NC	
<i>levothyroxine sodium cap 112 mcg</i>	NC	
<i>levothyroxine sodium cap 125 mcg</i>	NC	
<i>levothyroxine sodium cap 137 mcg</i>	NC	
<i>levothyroxine sodium cap 150 mcg</i>	NC	
<i>levothyroxine sodium cap 175 mcg</i>	NC	
<i>levothyroxine sodium cap 200 mcg</i>	NC	
<i>levothyroxine sodium for iv inj 100 mcg</i>	1	
<i>levothyroxine sodium for iv inj 200 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	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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	NC	
NATURE-THROI TAB 16.25MG	NC	
NATURE-THROI TAB 32.5MG	NC	
NATURE-THROI TAB 48.75MG	NC	
NATURE-THROI TAB 65MG	NC	
NATURE-THROI TAB 81.25MG	NC	
NATURE-THROI TAB 97.5MG	NC	
NATURE-THROI TAB 113.75MG	NC	
NATURE-THROI TAB 130MG	NC	
NATURE-THROI TAB 146.25MG	NC	
NATURE-THROI TAB 195MG	NC	
NATURE-THROI TAB 260MG	NC	
NATURE-THROI TAB 325MG	NC	
NIVA THYROID TAB 15MG	NC	
NIVA THYROID TAB 30MG	NC	
NIVA THYROID TAB 60MG	NC	
NIVA THYROID TAB 90MG	NC	
NIVA THYROID TAB 120MG	NC	
NP THYROID TAB 15MG	3	
NP THYROID TAB 30MG	3	
NP THYROID TAB 60MG	3	
NP THYROID TAB 90MG	3	
NP THYROID TAB 120MG	3	
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	



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
SYNTHROID TAB 300MCG	2	
THYQUIDITY SOL 100MCG	NC	
TIROSINT CAP 13MCG	NC	
TIROSINT CAP 25MCG	NC	
TIROSINT CAP 50MCG	NC	
TIROSINT CAP 75MCG	NC	
TIROSINT CAP 88MCG	NC	
TIROSINT CAP 100MCG	NC	
TIROSINT CAP 112MCG	NC	
TIROSINT CAP 125MCG	NC	
TIROSINT CAP 137MCG	NC	
TIROSINT CAP 150MCG	NC	
TIROSINT CAP 175MCG	NC	
TIROSINT CAP 200	NC	
TRIOSTAT INJ 10MCG/ML	3	
<i>unithroid tab 25mcg</i>	1	
<i>unithroid tab 50mcg</i>	1	
<i>unithroid tab 75mcg</i>	1	
<i>unithroid tab 88mcg</i>	1	
<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	NC	
WESTHROID TAB 65MG	NC	
WESTHROID TAB 97.5MG	NC	
WESTHROID TAB 130MG	NC	
WESTHROID TAB 195MG	NC	
WP THYROID TAB 16.25MG	NC	
WP THYROID TAB 32.5MG	NC	
WP THYROID TAB 48.75MG	NC	
WP THYROID TAB 65MG	NC	
WP THYROID TAB 81.25MG	NC	
WP THYROID TAB 97.5MG	NC	
WP THYROID TAB 113.75MG	NC	
WP THYROID TAB 130MG	NC	

**TOXOIDS**

**TOXOID COMBINATIONS**

ADACEL INJ	3	ACA, PV
BOOSTRIX INJ	3	ACA, PV

Drug Name	Drug Tier	Requirements/Limits
DAPTACEL INJ	3	ACA, PV
DIP/TET PED INJ 25-5LFU	3	ACA, PV
INFANRIX INJ	3	ACA, PV
KINRIX INJ	3	ACA, PV
PEDIARIX INJ 0.5ML	3	ACA, PV
PENTACEL INJ	3	ACA, PV
QUADRACEL INJ	3	ACA, PV
QUADRACEL INJ 0.5ML	3	ACA, PV
TDVAX INJ 2-2 LF	3	ACA, PV
TENIVAC INJ 5-2LF	3	ACA, PV
TET/DIP TOX INJ 2-2 LF	3	ACA, PV
VAXELIS INJ	3	ACA, PV

## ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS

### ANTISPASMODICS

ANASPAZ TAB 0.125MG	2	
ATROPEN INJ 0.5MG	3	
ATROPEN INJ 0.25MG	3	
ATROPEN INJ 1MG	3	
ATROPEN INJ 2MG	3	
ATROPINE SUL INJ 0.1MG/ML	3	
ATROPINE SUL INJ 0.05MG/1	3	
ATROPINE SUL INJ 1/2.5ML	NC	
ATROPINE SUL INJ 8MG/20ML	3	
<i>atropine sulfate inj 8 mg/20ml (0.4 mg/ml)</i>	1	
<i>atropine sulfate iv soln 0.4 mg/ml</i>	1	
<i>atropine sulfate iv soln 1 mg/ml</i>	1	
<i>atropine sulfate soln prefill syr 1 mg/10ml (0.1 mg/ml)</i>	1	
BELLA/OPIUM SUP 16.2-30	3	
BELLA/OPIUM SUP 16.2-60	3	
BENTYL INJ 10MG/ML	3	
<i>chlordiazepoxide hcl-clidinium bromide cap 5-2.5 mg</i>	2	
CUVPOSA SOL 1MG/5ML	3	
DARTISLA ODT TAB 1.7MG	3	
<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	
<i>ed-spaz tab 0.125mg</i>	1	
GLYCOPYRROLA INJ 0.6/3ML	NC	
GLYCOPYRROLA INJ 1MG/5ML	NC	
GLYCOPYRROLA TAB 1.5MG	NC	
<i>glycopyrrolate inj 0.2 mg/ml</i>	1	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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>	1	
<i>glycopyrrolate oral soln 1 mg/5ml</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>	1	
<i>hyoscyamine sulfate sl tab 0.125 mg</i>	1	
<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>	1	
<i>hyoscyamine sulfate tab er 12hr 0.375 mg</i>	NC	
<i>hyosyne dro 0.125/ml</i>	1	
<i>hyosyne elx 0.125/5</i>	1	
LEVBIID TAB 0.375 ER	3	
LEVSIN TAB 0.125MG	2	
LEVSIN/SL SUB 0.125MG	2	
LIBRAX CAP 5-2.5MG	NC	
<i>methscopolamine bromide tab 2.5 mg</i>	1	
<i>methscopolamine bromide tab 5 mg</i>	1	
<i>nulev tab 0.125mg</i>	1	
<i>oscimin sr tab 0.375mg</i>	NC	
<i>oscimin sub 0.125mg</i>	1	
<i>oscimin tab 0.125mg</i>	1	
ROBINUL FORT TAB 2MG	NC	
ROBINUL TAB 1MG	NC	
<i>symax-sr tab 0.375mg</i>	NC	
<b>H-2 ANTAGONISTS</b>		
<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 40 mg/4ml</i>	1	
<i>famotidine inj 200 mg/20ml</i>	1	
<i>famotidine preservative free inj 20 mg/2ml</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	
PEPCID TAB 20MG	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PEPCID TAB 40MG	3	
<b>MISC. ANTI-ULCER</b>		
CARAFATE SUS 1GM/10ML	NC	
CARAFATE TAB 1GM	NC	
SUCRALFATE SUS 1GM/10ML	NC	
<i>sucralfate susp 1 gm/10ml</i>	NC	
<i>sucralfate tab 1 gm</i>	1	
<i>sucralfate tab 1 gm</i>	NC	(applies to NDC 62135043601 only)
<i>sucralfate tab 1 gm</i>	NC	(applies to NDC 62135043690 only)
<b>PROTON PUMP INHIBITORS</b>		
ACIPHEX SPR CAP 5MG	NC	
ACIPHEX SPR CAP 10MG	NC	
ACIPHEX TAB 20MG	NC	
DEXILANT CAP 30MG DR	NC	
DEXILANT CAP 60MG DR	NC	
<i>dexlansoprazole cap delayed release 30 mg</i>	NC	
<i>dexlansoprazole cap delayed release 60 mg</i>	NC	
<i>esomeprazole magnesium cap delayed release 20 mg (base eq)</i>	1	
<i>esomeprazole magnesium cap delayed release 40 mg (base eq)</i>	1	
<i>esomeprazole magnesium for delayed release susp packet 10 mg</i>	2	
<i>esomeprazole magnesium for delayed release susp packet 20 mg</i>	2	
<i>esomeprazole magnesium for delayed release susp packet 40 mg</i>	2	
<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>	NC	
<i>lansoprazole tab delayed release orally disintegrating 30 mg</i>	NC	
NEXIUM CAP 20MG	NC	
NEXIUM CAP 40MG	NC	
NEXIUM GRA 2.5MG DR	NC	
NEXIUM GRA 5MG DR	NC	
NEXIUM GRA 10MG DR	NC	
NEXIUM GRA 20MG DR	NC	
NEXIUM GRA 40MG DR	NC	
NEXIUM I.V. INJ 40MG	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<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>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 delayed release susp packet 40 mg</i>	NC	
<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	NC	
PRILOSEC POW 10MG	NC	
PROTONIX INJ 40MG	3	
PROTONIX PAK 40MG	NC	
PROTONIX TAB 20MG	NC	
PROTONIX TAB 40MG	NC	
<i>rabeprazole sodium ec tab 20 mg</i>	1	
<b>ULCER DRUGS - PROSTAGLANDINS</b>		
CYTOTEC TAB 100MCG	2	
CYTOTEC TAB 200MCG	2	
<i>misoprostol tab 100 mcg</i>	1	
<i>misoprostol tab 200 mcg</i>	1	
<b>ULCER THERAPY COMBINATIONS</b>		
<i>amoxicil cap &amp; clarithro tab &amp; lansopraz cap dr 500 &amp; 500 &amp; 30mg</i>	2	
<i>bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg</i>	2	
KONVOMEPEP SUS 2-84/ML	NC	
OMECLAMOX- MIS PAK	3	
<i>omeppi cap 40-1100</i>	NC	
<i>omeprazole-sodium bicarbonate cap 20-1100 mg</i>	NC	
<i>omeprazole-sodium bicarbonate cap 40-1100 mg</i>	NC	
<i>omeprazole-sodium bicarbonate powd pack for susp 20-1680 mg</i>	NC	
<i>omeprazole-sodium bicarbonate powd pack for susp 40-1680 mg</i>	NC	
PYLERA CAP	2	
TALICIA CAP	2	

Drug Name	Drug Tier	Requirements/Limits
VOQUEZNA PAK DUAL PAK	3	
VOQUEZNA PAK TRIP PK	3	
ZEGERID CAP 20-1100	NC	
ZEGERID CAP 40-1100	NC	
ZEGERID POW 20-1680	NC	
ZEGERID POW 40-1680	NC	

## URINARY ANTISPASMODICS

### URINARY ANTISPASMODIC - ANTIMUSCARINICS (ANTICHOLINERGIC)

<i>darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv)</i>	1	
<i>darifenacin hydrobromide tab er 24hr 15 mg (base equiv)</i>	1	
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	
ENABLEX TAB 7.5MG	NC	
ENABLEX TAB 15MG	NC	
<i>fesoterodine fumarate tab er 24hr 4 mg</i>	2	
<i>fesoterodine fumarate tab er 24hr 8 mg</i>	2	
GELNIQUE GEL 10%	3	
<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	
<i>solifenacin succinate tab 5 mg</i>	1	
<i>solifenacin succinate tab 10 mg</i>	1	
<i>tolterodine tartrate cap er 24hr 2 mg</i>	1	
<i>tolterodine tartrate cap er 24hr 4 mg</i>	1	
<i>tolterodine tartrate tab 1 mg</i>	1	
<i>tolterodine tartrate tab 2 mg</i>	1	
TOVIAZ TAB 4MG	NC	
TOVIAZ TAB 8MG	NC	
<i>trospium chloride cap er 24hr 60 mg</i>	1	
<i>trospium chloride tab 20 mg</i>	1	
VESICARE LS SUS 5MG/5ML	3	
VESICARE TAB 5MG	3	
VESICARE TAB 10MG	3	

Drug Name	Drug Tier	Requirements/Limits
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**URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS**

GEMTESA TAB 75MG	2	
MYRBETRIQ SUS 8MG/ML	NC	
MYRBETRIQ TAB 25MG	NC	
MYRBETRIQ TAB 50MG	NC	

**URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS**

<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	

**URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS**

<i>flavoxate hcl tab 100 mg</i>	1	
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**VACCINES**

**BACTERIAL VACCINES**

ACTHIB INJ	3	ACA, PV
BCG VACCINE INJ 50MG	3	PV
BEXSERO INJ	3	ACA, PV
BIOTHRAX INJ	3	PV
HIBERIX SOL 10MCG	3	ACA, PV
MENACTRA INJ	3	ACA, PV
MENQUADFI INJ	3	ACA, PV
MENVEO INJ	3	ACA, PV
PEDVAX HIB INJ	3	ACA, PV
PNEUMOVAX 23 INJ 25/0.5	3	ACA, PV
PREVNAR 13 INJ	3	ACA, PV
PREVNAR 20 INJ	3	ACA, PV
TRUMENBA INJ	3	ACA, PV
TYPHIM VI INJ	3	PV
VAXCHORA SUS	3	PV
VAXNEUVANCE INJ	3	ACA, PV
VIVOTIF CAP EC	3	PV

**VIRAL VACCINES**

ABRYSVO INJ	3	ACA, PV
AFLURIA QUAD INJ 2022-23	3	ACA, PV
AREXVY INJ 120MCG	3	ACA, PV
COMIRNATY INJ 30/0.3ML	3	\$0 Cost Share
DENGVAXIA SUS	3	ACA, PV
ENGERIX-B INJ 10/0.5ML	3	ACA, PV
ENGERIX-B INJ 20MCG/ML	3	ACA, PV
FLUAD QUADRI INJ 2022-23	3	ACA, PV
FLUARIX QUAD INJ 2022-23	3	ACA, PV
FLUBLOK QUAD INJ 2022-23	3	ACA, PV
FLUBLOK QUAD INJ 2023-24	3	ACA, PV

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
FLUCLVX QUAD INJ 2022-23	3	ACA, PV
FLULAVAL QUA INJ 2022-23	3	ACA, PV
FLUMIST QUAD SUS 2022-23	3	ACA, PV
FLUZONE HD INJ 2023-24	3	ACA, PV
FLUZONE QUAD INJ 2023-24	3	ACA, PV
GARDASIL 9 INJ	3	ACA, PV
HAVRIX INJ 720UNIT	3	ACA, PV
HAVRIX INJ 1440UNIT	3	ACA, PV
HEPLISAV-B INJ 20/0.5ML	3	ACA, PV
IMOVAX RABIE INJ 2.5/ML	3	PV
IPOL INJ INACTIVE	3	ACA, PV
IXIARO INJ	3	PV
JYNNEOS INJ	3	
M-M-R II INJ	3	ACA, PV
MODERNA BIVA INJ BA4/BA5	3	\$0 Cost Share
MODERNA VAC INJ 50/0.5ML	3	\$0 Cost Share
MODERNA VAC INJ COVID-19	3	\$0 Cost Share
MODERNA VACC INJ 6M-5Y	3	\$0 Cost Share
NOVAVAX VAC INJ COVID-19	3	\$0 Cost Share
PFIZER BIVAL INJ 5-11Y	3	\$0 Cost Share
PFIZER BIVAL INJ BA4/BA5	3	\$0 Cost Share
PFIZER VACC INJ 5-11Y	3	\$0 Cost Share
PFIZER VACC INJ 6M-4Y	3	\$0 Cost Share
PFIZER VACC INJ ADLT RTU	3	\$0 Cost Share
PFIZER VACC INJ COVID-19	3	\$0 Cost Share
PREHEVBRIO SUS 10MCG/ML	3	ACA, PV
PRIORIX INJ	3	ACA, PV
PROQUAD INJ	3	ACA, PV
RABAVERT INJ	3	PV
RECOMBIVA HB INJ 5MCG/0.5	3	ACA, PV
RECOMBIVA HB INJ 10MCG/ML	3	ACA, PV
RECOMBIVA-HB INJ 40MCG/ML	3	ACA, PV
ROTARIX SUS	3	ACA, PV
ROTATEQ SOL	3	ACA, PV
SHINGRIX INJ 50/0.5ML	3	ACA, PV
SPIKEVAX INJ COVID-19	3	\$0 Cost Share
STAMARIL INJ	3	PV
TICOVAC INJ	3	PV
TWINRIX INJ	3	ACA, PV
VAQTA INJ 25/0.5ML	3	ACA, PV
VAQTA INJ 50UNT/ML	3	ACA, PV
VARIVAX INJ	3	ACA, PV
YF-VAX INJ	3	PV

## **VAGINAL AND RELATED PRODUCTS**



Drug Name	Drug Tier	Requirements/Limits
<b>MISCELLANEOUS VAGINAL PRODUCTS</b>		
INTRAROSA SUP 6.5MG	NC	
<b>SPERMICIDES</b>		
ENCARE SUP 100MG	0	OTC
GYNOL II GEL 3%	0	OTC
SHUR-SEAL GEL 2%	0	OTC; ACA
TODAY SPONGE MIS	0	OTC; ACA
VCF VAGINAL AER CONTRACP	0	OTC
VCF VAGINAL GEL CONTRACE	0	OTC; ACA
VCF VAGINAL MIS CONTRACP	0	OTC; ACA
<b>VAGINAL ANTI-INFECTIVES</b>		
CLEOCIN CRE 2% VAG	3	
CLEOCIN SUP 100MG	3	
<i>clindamycin phosphate vaginal cream 2%</i>	2	
CLINDESSE CRE 2%	3	
GYNAZOLE-1 CRE 2%	3	
<i>metronidazole vaginal gel 0.75%</i>	1	
<i>miconazole 3 sup 200mg</i>	1	
NUVESSA GEL 1.3%	NC	
<i>terconazole vaginal cream 0.4%</i>	1	
<i>terconazole vaginal cream 0.8%</i>	1	
<i>terconazole vaginal suppos 80 mg</i>	2	
XACIATO GEL 2%	3	
<b>VAGINAL CONTRACEPTIVE - PH MODULATORS</b>		
PHEXXI GEL	0	ACA
<b>VAGINAL ESTROGENS</b>		
ESTRACE VAG CRE 0.01%	3	
<i>estradiol vaginal cream 0.1 mg/gm</i>	1	
<i>estradiol vaginal tab 10 mcg</i>	NC	
ESTRING MIS 2MG	NC	
FEMRING MIS 0.1MG/24	NC	
FEMRING MIS 0.05/24H	NC	
IMVEXXY MAIN SUP 4MCG	2	
IMVEXXY MAIN SUP 10MCG	2	
IMVEXXY STRT SUP 4MCG	2	
IMVEXXY STRT SUP 10MCG	2	
PREMARIN VAG CRE 0.625MG	NC	
VAGIFEM TAB 10MCG	1	
<i>yuvaferm tab 10mcg</i>	NC	
<b>VAGINAL PROGESTINS</b>		
CRINONE GEL 4% VAG	2	PA
CRINONE GEL 8% VAG	2	PA
ENDOMETRIN SUP 100MG	2	PA

Drug Name	Drug Tier	Requirements/Limits
<b>VASOPRESSORS</b>		
<b>ANAPHYLAXIS THERAPY AGENTS</b>		
ADRENALIN INJ 1MG/ML	NC	
ADRENALIN INJ 30/30ML	NC	
AUVI-Q INJ 0.1MG	2	
AUVI-Q INJ 0.3MG	2	
AUVI-Q INJ 0.15MG	2	
<i>epinephrine inj 30 mg/30ml (1 mg/ml) (1:1000)</i>	2	
<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 0.15MG	3	
SYMJEPI INJ 0.3MG	NC	
SYMJEPI INJ 0.15MG	NC	
<b>NEUROGENIC ORTHOSTATIC HYPOTENSION (NOH) - AGENTS</b>		
<i>droxidopa cap 100 mg</i>	4	SP, PA, QL
<i>droxidopa cap 200 mg</i>	4	SP, PA, QL
<i>droxidopa cap 300 mg</i>	4	SP, PA, QL
NORTHERA CAP 100MG	NC	
NORTHERA CAP 200MG	NC	
NORTHERA CAP 300MG	NC	
<b>VASOPRESSORS</b>		
AKOVAZ SOL 50MG/ML	NC	
EPHEDRINE SU INJ 50MG/ML	3	
<i>ephedrine sulfate iv soln 50 mg/ml</i>	1	
EPINEPH/NACL SOL 2/250ML	NC	
EPINEPHR/D5W INJ 100/10ML	3	
EPINEPHR/D5W SOL 2/250-5%	NC	
EPINEPHRINE INJ 0.1MG/10	3	
EPINEPHRINE INJ 0.1MG/ML	3	
EPINEPHRINE INJ 0.2MG	3	
EPINEPHRINE INJ 1MG/10ML	3	
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	
NOREPIN/D5W INJ 16/250ML	3	

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>norepinephrine bitartrate iv soln 1 mg/ml (base equivalent)</i>	1	
PHENYL/NACL INJ 80/250ML	3	
PHENYLEP HCL INJ 0.8/10ML	3	
PHENYLEP HCL INJ 1MG/10ML	3	
PHENYLEPHRIN INJ 0.4/10ML	3	
PHENYLEPHRIN INJ 0.8MG/10	3	
PHENYLEPHRIN INJ 10MG/ML	3	
<i>phenylephrine hcl iv soln 10 mg/ml</i>	1	
REZIPRES SOL	NC	
VAZCULEP INJ 10MG/ML	3	

## **VITAMINS**

### **OIL SOLUBLE VITAMINS**

AQUASOL A INJ 50000/ML	3	
DRISDOL CAP 50000UNT	3	
<i>ergocalciferol cap 1.25 mg (50000 unit)</i>	1	
MEPHYTON TAB 5MG	3	
<i>phytonadione inj 1 mg/0.5ml (2 mg/ml)</i>	1	
<i>phytonadione inj 10 mg/ml</i>	1	
<i>phytonadione tab 5 mg</i>	2	
WHEAT GERM OIL	3	

### **WATER SOLUBLE VITAMINS**

<i>pyridoxine hcl inj 100 mg/ml</i>	1	
PYRIDOXINE INJ 100MG/ML	3	
<i>thiamine hcl inj 100 mg/ml</i>	1	

## Index

<b>7</b>	
<i>7t lido gel 2%</i> .....	170
<b>A</b>	
<i>abacavir sulfate-lamivudine tab 600-300 mg</i> .....	127
<i>abacavir sulfate soln 20 mg/ml (base equiv)</i> .....	127
<i>abacavir sulfate tab 300 mg (base equiv)</i> .....	127
ABELCET INJ 5MG/ML .....	84
ABILIFY ASIM INJ 720MG .....	125
ABILIFY ASIM INJ 960MG .....	125
ABILIFY MAIN INJ 300MG .....	125
ABILIFY MAIN INJ 400MG .....	125
ABILIFY MYCI TAB 10MG MNT .....	125
ABILIFY MYCI TAB 10MG STR.....	125
ABILIFY MYCI TAB 15MG MNT .....	125
ABILIFY MYCI TAB 15MG STR.....	125
ABILIFY MYCI TAB 20MG MNT .....	125
ABILIFY MYCI TAB 20MG STR.....	125
ABILIFY MYCI TAB 2MG MANT .....	125
ABILIFY MYCI TAB 2MG STRT.....	125
ABILIFY MYCI TAB 30MG MNT .....	126
ABILIFY MYCI TAB 30MG STR.....	126
ABILIFY MYCI TAB 5MG MANT .....	125
ABILIFY MYCI TAB 5MG STRT.....	125
ABILIFY TAB 10MG .....	126
ABILIFY TAB 15MG .....	126
ABILIFY TAB 20MG .....	126
ABILIFY TAB 2MG .....	126
ABILIFY TAB 30MG .....	126
ABILIFY TAB 5MG .....	126
<i>abiraterone acetate tab 250 mg</i> .....	106
<i>abiraterone acetate tab 500 mg</i> .....	106
ABRAXANE INJ 100MG .....	115
ABRYSVO INJ.....	279
ABSORICA CAP 10MG .....	157
ABSORICA CAP 20MG .....	157
ABSORICA CAP 25MG .....	157
ABSORICA CAP 30MG .....	157
ABSORICA CAP 35MG .....	157
ABSORICA CAP 40MG .....	157
ABSORICA LD CAP 16MG.....	157
ABSORICA LD CAP 24MG.....	157
ABSORICA LD CAP 32MG.....	157
ABSORICA LD CAP 8MG .....	157
<i>acamprosate calcium tab delayed release 333 mg</i> .....	259
ACANYA GEL 1.2-2.5%.....	157
<i>acarbose tab 100 mg</i> .....	73
<i>acarbose tab 25 mg</i> .....	73
<i>acarbose tab 50 mg</i> .....	73
ACCOLATE TAB 10MG .....	53
ACCOLATE TAB 20MG .....	53
ACCU-CHEK TES AVIVA PL.....	174
ACCU-CHEK TES GUIDE .....	174
ACCU-CHEK TES SMART .....	174
ACCUPRIL TAB 10MG.....	90
ACCUPRIL TAB 20MG.....	90
ACCUPRIL TAB 40MG.....	90
ACCUPRIL TAB 5MG.....	90
ACCURETIC TAB 10-12.5.....	93
ACCURETIC TAB 20-12.5.....	93
ACCURETIC TAB 20-25MG .....	93
<i>accutane cap 10mg</i> .....	157
<i>accutane cap 20mg</i> .....	157
<i>accutane cap 30mg</i> .....	157
<i>accutane cap 40mg</i> .....	157
ACCUTREND TES GLUCOSE .....	174
ACD FORMULA SOL A .....	59
<i>acebutolol hcl cap 200 mg</i> .....	133
<i>acebutolol hcl cap 400 mg</i> .....	133
ACETADOTE INJ 200MG/ML .....	81
<i>acetaminophen-caffeine-dihydrocodeine cap 320.5-30-16 mg</i> .....	38
<i>acetaminophen iv soln 10 mg/ml</i> .....	30
<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i> .....	38
<i>acetaminophen w/ codeine tab 300-15 mg</i> .....	38
<i>acetaminophen w/ codeine tab 300-30 mg</i> .....	38
<i>acetaminophen w/ codeine tab 300-60 mg</i> .....	38
<i>acetazolamide cap er 12hr 500 mg</i> .	179
<i>acetazolamide sodium for inj 500 mg</i> .....	179
<i>acetazolamide tab 125 mg</i> .....	179
<i>acetazolamide tab 250 mg</i> .....	179
<i>acetic acid irrigation soln 0.25%</i> .....	197
<i>acetic acid otic soln 2%</i> .....	253

<i>acetylcysteine inhal soln 10%</i> .....	157	ACURA TES BLD GLUC .....	174
<i>acetylcysteine inhal soln 20%</i> .....	157	ACUVAIL SOL 0.45% .....	252
<i>acetylcysteine inj 200 mg/ml</i> .....	81	<i>acyclovir cap 200 mg</i> .....	132
ACIPHEX SPR CAP 10MG .....	276	<i>acyclovir cream 5%</i> .....	164
ACIPHEX SPR CAP 5MG .....	276	<i>acyclovir oint 5%</i> .....	164
ACIPHEX TAB 20MG .....	276	<i>acyclovir sodium iv soln 50 mg/ml</i> ..	132
<i>acitretin cap 10 mg</i> .....	162	<i>acyclovir susp 200 mg/5ml</i> .....	132
<i>acitretin cap 17.5 mg</i> .....	162	<i>acyclovir tab 400 mg</i> .....	132
<i>acitretin cap 25 mg</i> .....	162	<i>acyclovir tab 800 mg</i> .....	132
ACTCT FLEX 3 PAD 4 .....	172	ACZONE GEL 5% .....	157
ACTEMRA INJ 162/0.9 .....	25	ACZONE GEL 7.5% .....	157
ACTEMRA INJ 200/10ML .....	25	ADACEL INJ .....	273
ACTEMRA INJ 400/20ML .....	25	ADAKVEO INJ 100/10ML .....	204
ACTEMRA INJ 80MG/4ML .....	25	ADALIMU-ADAZ INJ 40/0.4ML .....	21
ACTHAR INJ 80UNIT .....	182	ADAPAL/BEN P PAD 0.1-2.5% .....	157
ACTHIB INJ .....	279	<i>adapalene-benzoyl peroxide gel 0.1-</i>	
ACTI ANTIMIC PAD 4 .....	172	<i>2.5%</i> .....	157
ACTICLATE TAB 150MG .....	268	<i>adapalene-benzoyl peroxide gel 0.3-</i>	
ACTICLATE TAB 75MG .....	268	<i>2.5%</i> .....	157
ACTICOAT 7 PAD 4 .....	172	<i>adapalene cream 0.1%</i> .....	157
ACTICOAT MIS 4 .....	172	<i>adapalene gel 0.1%</i> .....	157
ACTIGALL CAP 300MG .....	192	<i>adapalene gel 0.3%</i> .....	157
ACTI-LANCE MIS 28G .....	216	<i>adapalene pads 0.1%</i> .....	157
ACTI-LANCE MIS LITE 28G .....	216	ADAPALENE SOL 0.1% .....	157
ACTI-LANCE MIS SPEC 17G .....	216	ADASUVE INH 10MG .....	122
ACTI-LANCE MIS UNIV 23G .....	216	ADBRY INJ 150MG/ML .....	168
ACTIMMUNE INJ 2MU/0.5 .....	114	ADCETRIS INJ 50MG .....	104
ACTIQ LOZ 1200MCG .....	31	ADCIRCA TAB 20MG .....	143
ACTIQ LOZ 1600MCG .....	31	ADDERALL TAB 10MG .....	12
ACTIQ LOZ 200MCG .....	31	ADDERALL TAB 12.5MG .....	12
ACTIQ LOZ 400MCG .....	31	ADDERALL TAB 15MG .....	12
ACTIQ LOZ 600MCG .....	31	ADDERALL TAB 20MG .....	12
ACTIQ LOZ 800MCG .....	31	ADDERALL TAB 30MG .....	12
ACTIVASE INJ 100MG .....	204	ADDERALL TAB 5MG .....	12
ACTIVASE INJ 50MG .....	204	ADDERALL TAB 7.5MG .....	12
ACTIVE FE TAB 75-1.25 .....	206	ADDERALL XR CAP 10MG .....	12
ACTIVELLA TAB 1-0.5MG .....	189	ADDERALL XR CAP 15MG .....	12
ACTONEL TAB 150MG .....	181	ADDERALL XR CAP 20MG .....	12
ACTONEL TAB 35MG .....	181	ADDERALL XR CAP 25MG .....	12
ACTOPLUS MET TAB 15-500MG .....	73	ADDERALL XR CAP 30MG .....	12
ACTOPLUS MET TAB 15-850MG .....	73	ADDERALL XR CAP 5MG .....	12
ACTOS TAB 15MG .....	79	<i>adefovir dipivoxil tab 10 mg</i> .....	130
ACTOS TAB 30MG .....	79	ADEMPAS TAB 0.5MG .....	143
ACTOS TAB 45MG .....	79	ADEMPAS TAB 1.5MG .....	143
ACUICYN SOL .....	171	ADEMPAS TAB 1MG .....	143
ACULAR LS SOL 0.4% .....	252	ADEMPAS TAB 2.5MG .....	143
ACULAR SOL 0.5% OP .....	252	ADEMPAS TAB 2MG .....	143



AIMOVIG INJ 140MG/ML .....	225	<i>alendronate sodium tab 35 mg</i> .....	181
AIMOVIG INJ 70MG/ML .....	225	<i>alendronate sodium tab 5 mg</i> .....	181
AIMSCO MIS LUBRICAT .....	215	<i>alendronate sodium tab 70 mg</i> .....	181
AIRDUO RESPI INH 113-14 .....	54	ALEVAMAX CRE .....	170
AIRDUO RESPI INH 232-14 .....	54	ALEVICYN SG GEL ANTIPRUR .....	170
AIRDUO RESPI INH 55-14 .....	54	ALEVICYN SOL DERMAL .....	172
AJOVY INJ 225/1.5 .....	225	ALFENTANIL INJ 1000/2ML .....	31
<i>ak-fluor inj 10% op</i> .....	252	ALFENTANIL INJ 2500/5ML .....	31
AK-FLUOR INJ 25% OP .....	252	ALFERON N INJ 5MU/ML .....	114
AKLIEF CRE 0.005% .....	157	<i>alfuzosin hcl tab er 24hr 10 mg</i> .....	197
AKOVAZ SOL 50MG/ML .....	282	ALIMTA INJ 100MG .....	101
<i>ak-poly-bac oin op</i> .....	249	ALIMTA INJ 500MG .....	101
AKTEN GEL 3.5% .....	250	ALINIA SUS 100/5ML .....	44
AKYNZEO CAP 300-0.5 .....	83	ALINIA TAB 500MG .....	44
AKYNZEO INJ .....	83	ALIQOPA INJ 60MG .....	109
AKYNZEO INJ 235-0.25 .....	83	<i>aliskiren fumarate tab 150 mg (base</i>	
<i>ala-cort cre 1%</i> .....	165	<i>equivalent)</i> .....	98
<i>ala-cort cre 2.5%</i> .....	165	<i>aliskiren fumarate tab 300 mg (base</i>	
ALADERM PLUS EMU .....	170	<i>equivalent)</i> .....	98
<i>ala scalp lot 2%</i> .....	165	ALLEVYN AG MIS 6-3/4 .....	172
<i>albendazole tab 200 mg</i> .....	43	ALLEVYN AG MIS 9 .....	172
<i>albuterol sulfate inhal aero 108</i>		ALLEVYN AG PAD 3 .....	172
<i>mcg/act (90mcg base equiv)</i> .....	54	ALLEVYN AG PAD 4 .....	172
<i>albuterol sulfate soln nebu 0.083%</i>		ALLEVYN AG PAD 5 .....	172
<i>(2.5 mg/3ml)</i> .....	54	ALLEVYN AG PAD 7 .....	172
<i>albuterol sulfate soln nebu 0.63</i>		ALLEVYN GENT PAD 4 .....	172
<i>mg/3ml (base equiv)</i> .....	54	ALLEVYN GENT PAD 8 .....	172
<i>albuterol sulfate soln nebu 1.25</i>		<i>allopurinol sodium for inj 500 mg</i> ...	198
<i>mg/3ml (base equiv)</i> .....	54	<i>allopurinol tab 100 mg</i> .....	198
<i>albuterol sulfate syrup 2 mg/5ml</i> .....	54	<i>allopurinol tab 300 mg</i> .....	198
<i>albuterol sulfate tab 2 mg</i> .....	54	ALLZITAL TAB 25-325MG .....	30
<i>albuterol sulfate tab 4 mg</i> .....	54	<i>almotriptan malate tab 12.5 mg</i> ....	226
ALCAINE SOL 0.5% OP .....	250	<i>almotriptan malate tab 6.25 mg</i> ....	226
<i>alclometasone dipropionate cream</i>		ALOCRIIL SOL 2% .....	252
<i>0.05%</i> .....	165	<i>alogliptin benzoate tab 12.5 mg (base</i>	
<i>alclometasone dipropionate oint 0.05%</i>		<i>equiv)</i> .....	76
.....	165	<i>alogliptin benzoate tab 25 mg (base</i>	
ALDACTAZIDE TAB 25/25 .....	179	<i>equiv)</i> .....	76
ALDACTAZIDE TAB 50/50 .....	179	<i>alogliptin benzoate tab 6.25 mg (base</i>	
ALDACTONE TAB 100MG .....	180	<i>equiv)</i> .....	76
ALDACTONE TAB 25MG .....	180	<i>alogliptin-metformin hcl tab 12.5-1000</i>	
ALDACTONE TAB 50MG .....	180	<i>mg</i> .....	73
ALDURAZYME INJ 2.9MG/5M .....	184	<i>alogliptin-metformin hcl tab 12.5-500</i>	
ALECENSA CAP 150MG .....	109	<i>mg</i> .....	73
<i>alendronate sodium oral soln 70</i>		<i>alogliptin-pioglitazone tab 12.5-15 mg</i>	
<i>mg/75ml</i> .....	181	.....	73
<i>alendronate sodium tab 10 mg</i> .....	181		

<i>alogliptin-pioglitazone tab 12.5-30 mg</i> .....	73	ALPROLIX INJ 500UNIT .....	199
<i>alogliptin-pioglitazone tab 12.5-45 mg</i> .....	73	<i>alprostadil inj 500 mcg/ml</i> .....	235
<i>alogliptin-pioglitazone tab 25-15 mg</i> .....	73	ALREX SUS 0.2% .....	250
<i>alogliptin-pioglitazone tab 25-30 mg</i> .....	73	ALTABAX OIN 1%.....	160
<i>alogliptin-pioglitazone tab 25-45 mg</i> .....	73	<i>altacaine sol 0.5% op</i> .....	250
ALOMIDE SOL 0.1% OP.....	252	ALTACE CAP 1.25MG .....	90
ALOPRIM INJ 500MG.....	198	ALTACE CAP 10MG .....	90
ALORA DIS 0.025MG .....	189	ALTACE CAP 2.5MG .....	90
ALORA DIS 0.075MG .....	189	ALTACE CAP 5MG .....	90
ALORA DIS 0.1MG .....	189	<i>altafluor-be sol 0.25-0.4</i> .....	252
<i>alose tron hcl tab 0.5 mg (base equiv)</i> .....	194	<i>altafrin sol 10% op</i> .....	248
<i>alose tron hcl tab 1 mg (base equiv)</i> .....	194	<i>altafrin sol 2.5% op</i> .....	248
ALPHAGAN P SOL 0.1%.....	248	<i>altavera tab</i> .....	146
ALPHAGAN P SOL 0.15% .....	248	ALTOPREV TAB 20MG ER.....	88
ALPHA-LIPOIC SOL ACID.....	20	ALTOPREV TAB 40MG ER.....	88
ALPHANINE SD INJ 1000UNIT .....	199	ALTOPREV TAB 60MG ER.....	88
ALPHANINE SD INJ 1500UNIT .....	199	ALTRENO LOT 0.05% .....	157
ALPHANINE SD INJ 500UNIT .....	199	ALTUVIIIO INJ 1000UNIT .....	199
ALPRAZOLAM CON 1 MG/ML .....	49	ALTUVIIIO INJ 2000UNIT .....	199
<i>alprazolam orally disintegrating tab</i> <i>0.25 mg</i> .....	49	ALTUVIIIO INJ 250 UNIT .....	199
<i>alprazolam orally disintegrating tab 0.5</i> <i>mg</i> .....	49	ALTUVIIIO INJ 3000UNIT .....	199
<i>alprazolam orally disintegrating tab 1</i> <i>mg</i> .....	49	ALTUVIIIO INJ 4000UNIT .....	199
<i>alprazolam orally disintegrating tab 2</i> <i>mg</i> .....	49	ALTUVIIIO INJ 500UNIT .....	199
<i>alprazolam tab 0.25 mg</i> .....	49	ALUNBRIG PAK .....	109
<i>alprazolam tab 0.5 mg</i> .....	49	ALUNBRIG TAB 180MG.....	109
<i>alprazolam tab 0.5mg xr</i> .....	49	ALUNBRIG TAB 30MG .....	109
<i>alprazolam tab 1 mg</i> .....	49	ALUNBRIG TAB 90MG .....	109
<i>alprazolam tab 1mg xr</i> .....	49	ALVESCO AER 160MCG .....	53
<i>alprazolam tab 2 mg</i> .....	49	ALVESCO AER 80MCG.....	53
<i>alprazolam tab 2mg xr</i> .....	49	<i>alvimopan cap 12 mg</i> .....	194
<i>alprazolam tab 3mg xr</i> .....	49	<i>alyacen tab 1/35</i> .....	146
<i>alprazolam tab er 24hr 0.5 mg</i> .....	49	<i>alyacen tab 7/7/7</i> .....	146
<i>alprazolam tab er 24hr 1 mg</i> .....	49	ALYMSYS SOL 100/4ML.....	103
<i>alprazolam tab er 24hr 2 mg</i> .....	49	ALYMSYS SOL 400/16ML .....	103
<i>alprazolam tab er 24hr 3 mg</i> .....	49	<i>alyq tab 20mg</i> .....	143
ALPROLIX INJ 1000UNIT .....	199	<i>amabelz tab 0.5-0.1</i> .....	189
ALPROLIX INJ 2000UNIT .....	199	<i>amabelz tab 1-0.5mg</i> .....	189
ALPROLIX INJ 250UNIT .....	199	<i>amantadine hcl cap 100 mg</i> .....	117
ALPROLIX INJ 3000UNIT .....	199	<i>amantadine hcl soln 50 mg/5ml</i> ....	117
ALPROLIX INJ 4000UNIT .....	199	<i>amantadine hcl tab 100 mg</i> .....	117
		AMARYL TAB 1MG .....	79
		AMARYL TAB 2MG .....	79
		AMARYL TAB 4MG .....	79
		AMBIEN CR TAB 12.5MG .....	208
		AMBIEN CR TAB 6.25MG .....	208
		AMBIEN TAB 10MG .....	209
		AMBIEN TAB 5MG.....	209



AMBISOME INJ 50MG .....	84	<i>amitriptyline hcl tab 75 mg</i> .....	72
<i>ambrisentan tab 10 mg</i> .....	142	AMJEVITA INJ 10/0.2ML.....	21
<i>ambrisentan tab 5 mg</i> .....	142	AMJEVITA INJ 20/0.4ML.....	21
<i>amcinonide cream 0.1%</i> .....	165	AMJEVITA INJ 40/0.8ML.....	21
<i>amcinonide lotion 0.1%</i> .....	165	<i>amlodipine besylate-atorvastatin</i>	
AMCINONIDE OIN 0.1% .....	165	<i>calcium tab 10-10 mg</i> .....	141
AMELUZ GEL 10% .....	162	<i>amlodipine besylate-atorvastatin</i>	
<i>amethia tab</i> .....	146	<i>calcium tab 10-20 mg</i> .....	141
<i>amethyst tab 90-20mcg</i> .....	146	<i>amlodipine besylate-atorvastatin</i>	
AMIDATE INJ 2MG/ML.....	195	<i>calcium tab 10-40 mg</i> .....	141
<i>amikacin sulfate inj 1 gm/4ml (250</i>		<i>amlodipine besylate-atorvastatin</i>	
<i>mg/ml)</i> .....	20	<i>calcium tab 10-80 mg</i> .....	141
<i>amikacin sulfate inj 500 mg/2ml (250</i>		<i>amlodipine besylate-atorvastatin</i>	
<i>mg/ml)</i> .....	20	<i>calcium tab 2.5-10 mg</i> .....	141
<i>amiloride &amp; hydrochlorothiazide tab 5-</i>		<i>amlodipine besylate-atorvastatin</i>	
<i>50 mg</i> .....	179	<i>calcium tab 2.5-20 mg</i> .....	141
<i>amiloride hcl tab 5 mg</i> .....	180	<i>amlodipine besylate-atorvastatin</i>	
AMINO/DEXTRO SOL CAL/HEPA.....	246	<i>calcium tab 2.5-40 mg</i> .....	141
AMINO ACID INJ 5%.....	246	<i>amlodipine besylate-atorvastatin</i>	
<i>aminoam cap rms</i> .....	246	<i>calcium tab 5-10 mg</i> .....	141
<i>aminocaproic acid inj 250 mg/ml</i> ....	207	<i>amlodipine besylate-atorvastatin</i>	
<i>aminocaproic acid oral soln 0.25 gm/ml</i>		<i>calcium tab 5-20 mg</i> .....	141
.....	207	<i>amlodipine besylate-atorvastatin</i>	
<i>aminocaproic acid tab 1000 mg</i> .....	207	<i>calcium tab 5-40 mg</i> .....	141
<i>aminocaproic acid tab 500 mg</i> .....	207	<i>amlodipine besylate-atorvastatin</i>	
<i>aminophylline inj 25 mg/ml</i> .....	56	<i>calcium tab 5-80 mg</i> .....	141
<i>aminorelief cap rms</i> .....	246	<i>amlodipine besylate-benazepril hcl cap</i>	
<i>aminosyn ii sol 15%</i> .....	246	<i>10-20 mg</i> .....	93
AMINOSYN INJ 10% .....	246	<i>amlodipine besylate-benazepril hcl cap</i>	
AMINOSYN-PF INJ 10% .....	246	<i>10-40 mg</i> .....	94
AMINOSYN-PF INJ 7%.....	246	<i>amlodipine besylate-benazepril hcl cap</i>	
<i>amiodarone hcl inj 150 mg/3ml (50</i>		<i>2.5-10 mg</i> .....	93
<i>mg/ml)</i> .....	51	<i>amlodipine besylate-benazepril hcl cap</i>	
<i>amiodarone hcl inj 450 mg/9ml (50</i>		<i>5-10 mg</i> .....	93
<i>mg/ml)</i> .....	51	<i>amlodipine besylate-benazepril hcl cap</i>	
<i>amiodarone hcl inj 900 mg/18ml (50</i>		<i>5-20 mg</i> .....	93
<i>mg/ml)</i> .....	52	<i>amlodipine besylate-benazepril hcl cap</i>	
<i>amiodarone hcl tab 100 mg</i> .....	52	<i>5-40 mg</i> .....	93
<i>amiodarone hcl tab 200 mg</i> .....	52	<i>amlodipine besylate-olmesartan</i>	
<i>amiodarone hcl tab 400 mg</i> .....	52	<i>medoxomil tab 10-20 mg</i> .....	94
AMITIZA CAP 24MCG .....	192	<i>amlodipine besylate-olmesartan</i>	
AMITIZA CAP 8MCG.....	192	<i>medoxomil tab 10-40 mg</i> .....	94
<i>amitriptyline hcl tab 100 mg</i> .....	72	<i>amlodipine besylate-olmesartan</i>	
<i>amitriptyline hcl tab 10 mg</i> .....	72	<i>medoxomil tab 5-20 mg</i> .....	94
<i>amitriptyline hcl tab 150 mg</i> .....	72	<i>amlodipine besylate-olmesartan</i>	
<i>amitriptyline hcl tab 25 mg</i> .....	72	<i>medoxomil tab 5-40 mg</i> .....	94
<i>amitriptyline hcl tab 50 mg</i> .....	72		

<i>amlodipine besylate tab 10 mg (base equivalent)</i> .....	136	<i>amoxicillin (trihydrate) for susp 125 mg/5ml</i> .....	256
<i>amlodipine besylate tab 2.5 mg (base equivalent)</i> .....	136	<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i> .....	256
<i>amlodipine besylate tab 5 mg (base equivalent)</i> .....	136	<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i> .....	256
<i>amlodipine besylate-valsartan tab 10-160 mg</i> .....	94	<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i> .....	256
<i>amlodipine besylate-valsartan tab 10-320 mg</i> .....	94	<i>amoxicillin (trihydrate) tab 500 mg</i> .	256
<i>amlodipine besylate-valsartan tab 5-160 mg</i> .....	94	<i>amoxicillin (trihydrate) tab 875 mg</i> .	256
<i>amlodipine besylate-valsartan tab 5-320 mg</i> .....	94	<i>amoxicillin &amp; k clavulanate chew tab 200-28.5 mg</i> .....	257
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg</i> .....	94	<i>amoxicillin &amp; k clavulanate chew tab 400-57 mg</i> .....	257
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg</i> .....	94	<i>amoxicillin &amp; k clavulanate for susp 200-28.5 mg/5ml</i> .....	257
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg</i> .....	94	<i>amoxicillin &amp; k clavulanate for susp 250-62.5 mg/5ml</i> .....	257
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg</i> .....	94	<i>amoxicillin &amp; k clavulanate for susp 400-57 mg/5ml</i> .....	257
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg</i> .....	94	<i>amoxicillin &amp; k clavulanate for susp 600-42.9 mg/5ml</i> .....	257
AMMONUL INJ 10% .....	184	<i>amoxicillin &amp; k clavulanate tab 250-125 mg</i> .....	257
<i>amnestem cap 10mg</i> .....	158	<i>amoxicillin &amp; k clavulanate tab 500-125 mg</i> .....	257
<i>amnestem cap 20mg</i> .....	158	<i>amoxicillin &amp; k clavulanate tab 875-125 mg</i> .....	257
<i>amnestem cap 40mg</i> .....	158	<i>amoxicillin &amp; k clavulanate tab er 12hr 1000-62.5 mg</i> .....	257
AMORPH WOUND GEL DRESSING ...	173	<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i> .....	12
<i>amoxapine tab 100 mg</i> .....	72	<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i> .....	12
<i>amoxapine tab 150 mg</i> .....	72	<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i> .....	12
<i>amoxapine tab 25 mg</i> .....	72	<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i> .....	12
<i>amoxapine tab 50 mg</i> .....	72	<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i> .....	12
<i>amoxicil cap &amp; clarithro tab &amp; lansopraz cap dr 500 &amp; 500 &amp; 30mg</i> .....	277	<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i> .....	12
<i>amoxicillin (trihydrate) cap 250 mg</i> .	256	<i>amphetamine-dextroamphetamine tab 10 mg</i> .....	12
<i>amoxicillin (trihydrate) cap 500 mg</i> .	256	<i>amphetamine-dextroamphetamine tab 12.5 mg</i> .....	12
<i>amoxicillin (trihydrate) chew tab 125 mg</i> .....	256		
<i>amoxicillin (trihydrate) chew tab 250 mg</i> .....	256		

<i>amphetamine-dextroamphetamine tab 15 mg</i> .....	13	ANALPRAM-HC LOT 2.5%	42
<i>amphetamine-dextroamphetamine tab 20 mg</i> .....	13	ANAPROX DS TAB 550MG	25
<i>amphetamine-dextroamphetamine tab 30 mg</i> .....	13	ANASCORP INJ	254
<i>amphetamine-dextroamphetamine tab 5 mg</i> .....	12	ANASEPT SPR .....	126
<i>amphetamine-dextroamphetamine tab 7.5 mg</i> .....	12	ANASPAZ TAB 0.125MG .....	274
<i>amphetamine sulfate tab 10 mg</i> .....	12	<i>anastrozole tab 1 mg</i> .....	106
<i>amphetamine sulfate tab 5 mg</i> .....	12	ANAVIP INJ .....	254
<i>amphotericin b for iv soln 50 mg</i> .....	84	ANCOBON CAP 250MG .....	84
<i>amphotericin b liposome iv for susp 50 mg</i> .....	84	ANCOBON CAP 500MG .....	84
<i>ampicillin &amp; sulbactam sodium for inj 1.5 (1-0.5) gm</i> .....	257	ANDEXXA SOL 200MG .....	81
<i>ampicillin &amp; sulbactam sodium for inj 3 (2-1) gm</i> .....	257	ANDRODERM DIS 2MG/24HR .....	41
<i>ampicillin &amp; sulbactam sodium for iv soln 1.5 (1-0.5) gm</i> .....	257	ANDRODERM DIS 4MG/24HR .....	41
<i>ampicillin &amp; sulbactam sodium for iv soln 15 (10-5) gm</i> .....	258	ANDROGEL GEL 1.62% .....	41
<i>ampicillin &amp; sulbactam sodium for iv soln 3 (2-1) gm</i> .....	258	ANDROGEL GEL 1%(25MG) .....	41
<i>ampicillin cap 500 mg</i> .....	256	ANDROGEL GEL 1%(50MG) .....	41
<i>ampicillin sodium for inj 125 mg</i> .....	256	ANECTINE INJ 200/10ML .....	244
<i>ampicillin sodium for inj 1 gm</i> .....	256	ANECTINE INJ 20MG/ML.....	244
<i>ampicillin sodium for inj 250 mg</i> .....	257	ANGELIQ TAB 0.25-0.5 .....	189
<i>ampicillin sodium for inj 2 gm</i> .....	256	ANGELIQ TAB 0.5-1MG .....	189
<i>ampicillin sodium for inj 500 mg</i> .....	257	ANGIOMAX INJ 250MG.....	59
<i>ampicillin sodium for iv soln 10 gm</i> .....	257	ANNOVERA MIS .....	151
<i>ampicillin sodium for iv soln 1 gm</i> .....	257	ANORO ELLIPT AER 62.5-25 .....	55
<i>ampicillin sodium for iv soln 2 gm</i> .....	257	ANTARA CAP 30MG .....	87
AMPYRA TAB 10MG.....	262	ANTARA CAP 90MG .....	87
AMRIX CAP 15MG .....	241	ANTICOAGULNT SOL SOD CITR.....	59
AMRIX CAP 30MG .....	241	ANTIVENIN KIT LAT MACT .....	254
AMVISC INJ 12MG/ML.....	252	ANTIVENIN NA INJ CORAL SN .....	254
AMVISC PLUS INJ 16MG/ML.....	252	<i>anucort-hc sup 25mg</i> .....	42
AMZEEQ AER 4% .....	158	ANUSOL-HC CRE 2.5% .....	43
ANACAINE OIN .....	169	ANZEMET TAB 50MG .....	82
ANAFRANIL CAP 25MG .....	72	APEXICON E CRE 0.05%.....	165
ANAFRANIL CAP 50MG .....	72	APIDRA INJ SOLOSTAR .....	77
ANAFRANIL CAP 75MG .....	72	APIDRA INJ U-100.....	77
<i>anagrelide hcl cap 0.5 mg</i> .....	203	APLENZIN TAB 174MG .....	68
<i>anagrelide hcl cap 1 mg</i> .....	203	APLENZIN TAB 348MG .....	68
ANALPRAM-HC CRE 1-1%.....	42	APLENZIN TAB 522MG .....	68
		APOKYN INJ 10MG/ML.....	117
		<i>apomorphine hcl soln cartridge 30 mg/3ml</i> .....	117
		APONVIE INJ 32/4.4ML .....	83
		<i>apraclonidine hcl ophth soln 0.5% (base equivalent)</i> .....	249
		<i>aprepitant capsule 125 mg</i> .....	83
		<i>aprepitant capsule 40 mg</i> .....	83
		<i>aprepitant capsule 80 mg</i> .....	83
		<i>aprepitant capsule therapy pack 80 &amp; 125 mg</i> .....	83

APRETUDE SUS 600MG ER.....	127	ARGATROBAN INJ 50MG/50M .....	59
APRISO CAP 0.375GM .....	193	<i>argatroban iv soln 50 mg/50ml (1</i>	
<i>apri tab</i> .....	146	<i>mg/ml)</i> .....	59
APTENSIO XR CAP 10MG.....	16	<i>argyl saline sol 0.9% irr</i> .....	197
APTENSIO XR CAP 15MG.....	16	<i>argyl saline sol 100ml</i> .....	234
APTENSIO XR CAP 20MG.....	16	ARICEPT TAB 10MG .....	259
APTENSIO XR CAP 30MG.....	16	ARICEPT TAB 23MG .....	259
APTENSIO XR CAP 40MG.....	16	ARICEPT TAB 5MG .....	259
APTENSIO XR CAP 50MG.....	16	ARIDA GEL .....	173
APTENSIO XR CAP 60MG.....	16	ARIKAYCE SUS .....	20
APTIOM TAB 200MG .....	60	ARIMIDEX TAB 1MG.....	106
APTIOM TAB 400MG .....	60	<i>aripiprazole orally disintegrating tab 10</i>	
APTIOM TAB 600MG .....	60	<i>mg</i> .....	126
APTIOM TAB 800MG .....	60	<i>aripiprazole orally disintegrating tab 15</i>	
APTIVUS CAP 250MG .....	127	<i>mg</i> .....	126
APTIVUS SOL.....	127	<i>aripiprazole oral solution 1 mg/ml...</i>	126
AQUACEL AG PAD 5.....	173	<i>aripiprazole tab 10 mg</i> .....	126
AQUACEL FOAM PAD 7 .....	173	<i>aripiprazole tab 15 mg</i> .....	126
AQUALANCE MIS 30G .....	217	<i>aripiprazole tab 20 mg</i> .....	126
AQUASOL A INJ 50000/ML.....	283	<i>aripiprazole tab 2 mg</i> .....	126
AQUORAL SPR .....	236	<i>aripiprazole tab 30 mg</i> .....	126
ARAKODA TAB 100MG .....	98	<i>aripiprazole tab 5 mg</i> .....	126
ARALAST NP INJ 1000MG .....	266	ARISTADA INJ 1064MG .....	126
ARALAST NP INJ 500MG .....	266	ARISTADA INJ 441MG/1.....	126
<i>aranelle tab</i> .....	146	ARISTADA INJ 662MG/2.....	126
ARANESP INJ 100MCG .....	205	ARISTADA INJ 882MG/3.....	126
ARANESP INJ 10MCG .....	205	ARISTADA INJ INITIO .....	126
ARANESP INJ 150MCG .....	205	ARIXTRA INJ 10/0.8ML .....	57
ARANESP INJ 200MCG .....	205	ARIXTRA INJ 2.5/0.5 .....	57
ARANESP INJ 25MCG .....	205	ARIXTRA INJ 5/0.4ML .....	57
ARANESP INJ 300MCG .....	205	ARIXTRA INJ 7.5/0.6 .....	57
ARANESP INJ 40MCG .....	205	<i>armodafinil tab 150 mg</i> .....	16
ARANESP INJ 500MCG .....	205	<i>armodafinil tab 200 mg</i> .....	16
ARANESP INJ 60MCG .....	205	<i>armodafinil tab 250 mg</i> .....	16
ARAVAL TAB 10MG .....	29	<i>armodafinil tab 50 mg</i> .....	16
ARAVAL TAB 20MG .....	29	ARMOUR THYRO TAB 120MG.....	270
ARAZLO LOT 0.045%.....	158	ARMOUR THYRO TAB 15MG .....	270
ARCALYST INJ 220MG.....	25	ARMOUR THYRO TAB 180MG.....	270
ARESTIN MIS 1MG.....	236	ARMOUR THYRO TAB 240MG.....	270
AREXVY INJ 120MCG .....	279	ARMOUR THYRO TAB 300MG.....	270
<i>arformoterol tartrate soln nebu 15</i>		ARMOUR THYRO TAB 30MG .....	270
<i>mcg/2ml (base equiv)</i> .....	55	ARMOUR THYRO TAB 60MG .....	270
ARGATROBAN INJ 100MG/ML.....	59	ARMOUR THYRO TAB 90MG .....	270
ARGATROBAN INJ 250/2.5 .....	59	ARNICA TIN FLOWER .....	171
<i>argatroban inj 250 mg/2.5ml</i>		ARNUITY ELPT INH 100MCG .....	53
<i>(concentrate for iv infusion)</i> .....	59	ARNUITY ELPT INH 200MCG .....	53
ARGATROBAN INJ 50/50ML .....	59	ARNUITY ELPT INH 50MCG .....	53

AROMASIN TAB 25MG.....	106	<i>aspirin low tab 81mg ec</i> .....	30
ARRANON INJ 5MG/ML.....	101	<i>aspirin tab delayed release 81 mg</i> ....	31
<i>arsenic trioxide iv soln 10 mg/10ml (1</i>		ASSURE 3 TES .....	174
<i>mg/ml)</i> .....	114	ASSURE 4 TES .....	174
<i>arsenic trioxide iv soln 12 mg/6ml (2</i>		ASSURE CMFRT MIS 28G.....	217
<i>mg/ml)</i> .....	114	ASSURE II TES.....	174
ARTESUNATE SOL 110MG .....	98	ASSURE II TES CHECK.....	174
ARTHROTEC 50 TAB .....	25	ASSURE LANCE MIS 21G .....	217
ARTHROTEC 75 TAB .....	25	ASSURE LANCE MIS LOW FLOW ....	217
<i>arthr pain gel 1%</i> .....	160	ASSURE LANCE MIS MICRO .....	217
<i>articadent inj dental</i> .....	211	ASSURE LANCE MIS SAFE 25G .....	217
ARTISS SOL 10ML .....	208	ASSURE LANCE MIS SAFE 30G .....	217
ARTISS SOL 2ML.....	207	ASSURE PLUS MIS HIGH 18G.....	217
ARTISS SOL 4ML.....	207	ASSURE PLUS MIS LOW 25G.....	217
ARYMO ER TAB 15MG .....	31	ASSURE PLUS MIS MCRO 28G.....	217
ARYMO ER TAB 30MG .....	31	ASSURE PLUS MIS NORM 21G.....	217
ARYMO ER TAB 60MG .....	31	ASSURE PLUS MIS PEDIATRI .....	217
ARZERRA CON 100/5ML .....	104	ASSURE PRISM TES MULTI .....	175
ASACOL HD TAB 800MG.....	193	ASSURE PRO TES .....	175
ASCLERA INJ 0.5%.....	235	ASSURE TES PLATINUM.....	175
ASCLERA INJ 1%.....	235	ASTAGRAF XL CAP 0.5MG.....	232
<i>ascomp/cod cap 30mg</i> .....	38	ASTAGRAF XL CAP 1MG.....	232
<i>asenapine maleate sl tab 10 mg (base</i>		ASTAGRAF XL CAP 5MG.....	232
<i>equiv)</i> .....	123	ATABEX EC TAB .....	238
<i>asenapine maleate sl tab 2.5 mg (base</i>		ATACAND HCT TAB 16-12.5.....	94
<i>equiv)</i> .....	122	ATACAND HCT TAB 32-12.5.....	94
<i>asenapine maleate sl tab 5 mg (base</i>		ATACAND HCT TAB 32-25MG .....	94
<i>equiv)</i> .....	122	ATACAND TAB 16MG .....	92
<i>ashlyna tab</i> .....	146	ATACAND TAB 32MG .....	92
ASMANEX 120 AER 220MCG .....	53	ATACAND TAB 4MG .....	91
ASMANEX 14 AER 220MCG .....	53	ATACAND TAB 8MG .....	91
ASMANEX 30 AER 110MCG .....	53	<i>atazanavir sulfate cap 150 mg (base</i>	
ASMANEX 30 AER 220MCG.....	53	<i>equiv)</i> .....	127
ASMANEX 60 AER 220MCG.....	53	<i>atazanavir sulfate cap 200 mg (base</i>	
ASMANEX 7 AER 110MCG.....	53	<i>equiv)</i> .....	127
ASMANEX HFA AER 100 MCG .....	53	<i>atazanavir sulfate cap 300 mg (base</i>	
ASMANEX HFA AER 200 MCG .....	53	<i>equiv)</i> .....	127
ASPARLAS INJ 3750/5ML.....	114	AELVIA TAB .....	181
<i>aspercrm art gel 1% pain</i> .....	160	<i>atenolol &amp; chlorthalidone tab 100-25</i>	
<i>aspirin-81 chw 81mg</i> .....	31	<i>mg</i> .....	94
<i>aspirin adlt tab 81mg ec</i> .....	30	<i>atenolol &amp; chlorthalidone tab 50-25 mg</i>	
<i>aspirin chew tab 81 mg</i> .....	30	.....	94
<i>aspirin chld chw 81mg</i> .....	30	<i>atenolol tab 100 mg</i> .....	133
<i>aspirin-dipyridamole cap er 12hr 25-</i>		<i>atenolol tab 25 mg</i> .....	133
<i>200 mg</i> .....	203	<i>atenolol tab 50 mg</i> .....	133
<i>aspirin low chw 81mg</i> .....	30	ATGAM INJ 250MG .....	232
<i>aspirin low tab 81mg</i> .....	30	ATIVAN INJ 2MG/ML.....	49

ATIVAN INJ 4MG/ML.....	49	<i>atropine sulfate ophth soln 1%</i> .....	248
ATIVAN TAB 0.5MG .....	49	<i>atropine sulfate soln prefill syr 1</i>	
ATIVAN TAB 1MG .....	49	<i>mg/10ml (0.1 mg/ml)</i> .....	274
ATIVAN TAB 2MG .....	50	ATROPINE SUL INJ 0.05MG/1 .....	274
AT LAST TES.....	175	ATROPINE SUL INJ 0.1MG/ML .....	274
<i>atomoxetine hcl cap 100 mg (base</i>		ATROPINE SUL INJ 1/2.5ML .....	274
<i>equiv)</i> .....	15	ATROPINE SUL INJ 8MG/20ML.....	274
<i>atomoxetine hcl cap 10 mg (base</i>		ATROPINE SUL SOL 1% OP.....	248
<i>equiv)</i> .....	15	ATROVENT HFA AER 17MCG .....	52
<i>atomoxetine hcl cap 18 mg (base</i>		AUBAGIO TAB 14MG .....	262
<i>equiv)</i> .....	15	AUBAGIO TAB 7MG.....	262
<i>atomoxetine hcl cap 25 mg (base</i>		<i>abra eq tab 0.1-0.02</i> .....	146
<i>equiv)</i> .....	15	<i>abra tab 0.1-0.02</i> .....	146
<i>atomoxetine hcl cap 40 mg (base</i>		AUGMENTIN SUS ES-600.....	258
<i>equiv)</i> .....	15	AUGMENTIN TAB 500MG .....	258
<i>atomoxetine hcl cap 60 mg (base</i>		AURORA LANCE MIS 30G.....	217
<i>equiv)</i> .....	15	AURORA LANCE MIS THIN 23G.....	217
<i>atomoxetine hcl cap 80 mg (base</i>		<i>aurovela 24 tab fe 1/20</i> .....	146
<i>equiv)</i> .....	15	<i>aurovela fe tab 1/20</i> .....	146
ATOPICLAIR CRE.....	170	<i>aurovela fe tab 1.5/30</i> .....	146
<i>atorvastatin calcium tab 10 mg (base</i>		<i>aurovela tab 1/20</i> .....	146
<i>equivalent)</i> .....	88	<i>aurovela tab 1.5/30</i> .....	146
<i>atorvastatin calcium tab 20 mg (base</i>		AURYXIA TAB 210MG .....	195
<i>equivalent)</i> .....	88	AUSTEDO TAB 12MG.....	261
<i>atorvastatin calcium tab 40 mg (base</i>		AUSTEDO TAB 6MG .....	261
<i>equivalent)</i> .....	88	AUSTEDO TAB 9MG .....	261
<i>atorvastatin calcium tab 80 mg (base</i>		AUSTEDO XR TAB 12MG .....	261
<i>equivalent)</i> .....	88	AUSTEDO XR TAB 24MG.....	261
<i>atovaquone-proguanil hcl tab 250-100</i>		AUSTEDO XR TAB 6MG.....	261
<i>mg</i> .....	98	AUTOCODE TES BLD GLUC .....	175
<i>atovaquone-proguanil hcl tab 62.5-25</i>		AUTO LANCET MIS.....	217
<i>mg</i> .....	98	AUTOLET PLAT MIS 1.8MM.....	217
<i>atovaquone susp 750 mg/5ml</i> .....	44	AUTOLET PLAT MIS 2.4MM.....	217
<i>atracurium besylate iv soln 100</i>		AUTOLET PLAT MIS 3.0MM.....	217
<i>mg/10ml</i> .....	245	AUTOSHIELD MIS 30GX5MM .....	224
<i>atracurium besylate preservative free</i>		AUVELITY TAB 45-105MG.....	67
<i>(pf) iv soln 50 mg/5ml</i> .....	245	AUVI-Q INJ 0.15MG .....	282
ATRALIN GEL 0.05%.....	158	AUVI-Q INJ 0.1MG.....	282
ATRIPLA TAB .....	127	AUVI-Q INJ 0.3MG.....	282
ATROPEN INJ 0.25MG .....	274	AVALIDE TAB 150-12.5.....	94
ATROPEN INJ 0.5MG .....	274	AVALIDE TAB 300-12.5 .....	94
ATROPEN INJ 1MG.....	274	AVAPRO TAB 150MG.....	92
ATROPEN INJ 2MG.....	274	AVAPRO TAB 300MG.....	92
<i>atropine sulfate inj 8 mg/20ml (0.4</i>		AVAPRO TAB 75MG .....	92
<i>mg/ml)</i> .....	274	AVASTIN INJ.....	103
<i>atropine sulfate iv soln 0.4 mg/ml</i> ..	274	AVASTIN INJ 400/16ML.....	103
<i>atropine sulfate iv soln 1 mg/ml</i> .....	274	AVEED INJ 750/3ML .....	41

AVENOVA SOL 0.01% .....	171	AZSTARYS CAP 52.3-10.....	17
<i>aviane tab</i> .....	146	<i>aztreonam for inj 1 gm</i> .....	47
<i>avidoxy tab 100mg</i> .....	268	<i>aztreonam for inj 2 gm</i> .....	47
<i>avita cre 0.025%</i> .....	158	AZULFIDINE TAB 500MG .....	193
<i>avita gel 0.025%</i> .....	158	AZULFIDINE TAB 500MG EN .....	193
AVO CREAM EMU.....	173	<i>azurette tab</i> .....	147
AVODART CAP 0.5MG.....	197	<b>B</b>	
AVONEX PEN KIT 30MCG.....	262	<i>bacitracin intramuscular for soln 50000</i>	
AVONEX PREFL KIT 30MCG .....	262	<i>unit</i> .....	43
AVYCAZ INJ 2-0.5GM .....	144	<i>bacitracin ophth oint 500 unit/gm</i> ...	249
<i>ayuna tab</i> .....	147	<i>bacitracin-polymyxin b ophth oint</i> ...	249
<i>azacitidine for inj 100 mg</i> .....	101	<i>bacitracin-polymyxin-neomycin-hc</i>	
AZACTAM INJ 1GM .....	47	<i>ophth oint 1%</i> .....	250
AZACTAM INJ 2GM .....	47	<i>baclofen intrathecal inj 10 mg/20ml</i>	
<i>azasan tab 100mg</i> .....	232	(500 mcg/ml) .....	241
<i>azasan tab 75 mg</i> .....	232	<i>baclofen intrathecal inj 20 mg/20ml</i>	
AZASITE SOL 1% .....	249	(1000 mcg/ml).....	241
AZATHIOPRINE INJ 100MG .....	232	<i>baclofen intrathecal inj 40 mg/20ml</i>	
<i>azathioprine tab 100 mg</i> .....	233	(2000 mcg/ml).....	241
<i>azathioprine tab 50 mg</i> .....	233	<i>baclofen oral soln 5 mg/5ml</i> .....	241
<i>azathioprine tab 75 mg</i> .....	233	<i>baclofen tab 10 mg</i> .....	241
<i>azelaic acid gel 15%</i> .....	171	<i>baclofen tab 20 mg</i> .....	241
<i>azelastine hcl-fluticasone prop nasal</i>		BACMIN TAB.....	237
<i>spray 137-50 mcg/act</i> .....	243	<i>bac tab</i> .....	30
<i>azelastine hcl nasal spray 0.1% (137</i>		BACTRIM DS TAB 800-160 .....	44
<i>mcg/spray)</i> .....	243	BACTRIM TAB 400-80MG.....	44
<i>azelastine hcl nasal spray 0.15%</i>		BALCOLTRA TAB 0.1-20 .....	147
(205.5 mcg/spray).....	243	BAL IN OIL INJ 100MG/ML.....	81
<i>azelastine hcl ophth soln 0.05%</i> ....	252	<i>balsalazide disodium cap 750 mg</i> ..	193
AZELEX CRE 20%.....	158	BALVERSA TAB 3MG .....	109
AZILECT TAB 0.5MG .....	119	BALVERSA TAB 4MG .....	109
AZILECT TAB 1MG .....	119	BALVERSA TAB 5MG .....	110
<i>azithromycin for susp 100 mg/5ml</i> ..	214	<i>balziva tab</i> .....	147
<i>azithromycin for susp 200 mg/5ml</i> ..	214	BANZEL SUS 40MG/ML .....	60
<i>azithromycin iv for soln 500 mg</i> ....	214	BANZEL TAB 200MG .....	60
<i>azithromycin powd pack for susp 1 gm</i>		BANZEL TAB 400MG .....	60
.....	214	BAQSIMI ONE POW 3MG/DOSE .....	75
<i>azithromycin tab 250 mg</i> .....	214	BAQSIMI TWO POW 3MG/DOSE .....	76
<i>azithromycin tab 500 mg</i> .....	214	BARACLUDGE SOL.....	130
<i>azithromycin tab 600 mg</i> .....	214	BARACLUDGE TAB 0.5MG .....	130
AZOPT SUS 1% OP .....	252	BARACLUDGE TAB 1MG.....	130
AZOR TAB 10-20MG .....	94	BARHEMSYS INJ 10MG/4ML.....	83
AZOR TAB 10-40MG .....	94	BASAGLAR INJ 100UNIT.....	77
AZOR TAB 5-20MG .....	94	BAVENCIO INJ 20MG/ML .....	104
AZOR TAB 5-40MG .....	94	BAXDELA INJ 300MG .....	191
AZSTARYS CAP 26.1-5.2 .....	16	BAXDELA TAB 450MG .....	191
AZSTARYS CAP 39.2-7.8 .....	16	BAYER BREEZE MIS 2 TEST .....	175

<i>bayer low chw 81mg</i> .....	31	BENICAR HCT TAB 40-12.5.....	95
<i>bayer low tab 81mg ec</i> .....	31	BENICAR HCT TAB 40-25MG .....	95
BCG VACCINE INJ 50MG.....	279	BENICAR TAB 20MG .....	92
BD MICROTAIN MIS LANCETS .....	217	BENICAR TAB 40MG .....	92
BD PEN NEEDL MIS 29GX12.7.....	224	BENICAR TAB 5MG .....	92
BD PEN NEEDL MIS 31GX5MM.....	224	BENLYSTA INJ 120MG .....	235
BD PEN NEEDL MIS 31GX8MM.....	224	BENLYSTA INJ 200MG/ML.....	236
BD PEN NEEDL MIS 32GX4MM.....	224	BENLYSTA INJ 400MG .....	236
BD PEN NEEDL MIS 32GX6MM.....	224	BENTYL INJ 10MG/ML .....	274
BD U-500 MIS 31GX6MM.....	224	BENZAC AC LIQ 5% WASH .....	158
BEAU RX GEL.....	172	BENZAACLIN GEL 1-5% .....	158
BEBTELOVIMAB SOL 175/2ML .....	256	BENZAACLIN GEL 1-5%PUMP.....	158
BECONASE AQ SUS 0.042% .....	244	BENZALKONIUM SOL 50% .....	126
BELBUCA MIS 150MCG .....	40	BENZALKONIUM SOL NF.....	126
BELBUCA MIS 300MCG .....	40	BENZAMYCIN GEL 5-3%.....	158
BELBUCA MIS 450MCG .....	40	<i>benzepero aer 5.3%</i> .....	158
BELBUCA MIS 600MCG .....	40	BENZNIDAZOLE TAB 100MG .....	43
BELBUCA MIS 750MCG .....	40	BENZNIDAZOLE TAB 12.5MG .....	43
BELBUCA MIS 75MCG .....	40	BENZOIN TIN NF .....	171
BELBUCA MIS 900MCG .....	40	<i>benzonatate cap 100 mg</i> .....	156
BELEODAQ INJ 500MG .....	110	<i>benzonatate cap 150 mg</i> .....	156
BELLA/OPIUM SUP 16.2-30.....	274	<i>benzonatate cap 200 mg</i> .....	156
BELLA/OPIUM SUP 16.2-60.....	274	<i>benzoyl peroxide-erythromycin gel 5-</i>	
BELRAPZO SOL 100/4ML .....	100	<i>3%</i> .....	158
BELSOMRA TAB 10MG.....	210	<i>benzoyl peroxide foam 9.8%</i> .....	158
BELSOMRA TAB 15MG.....	210	<i>benzoyl peroxide gel 8%</i> .....	158
BELSOMRA TAB 20MG.....	210	<i>benzoyl peroxide-hydrocortisone lotion</i>	
BELSOMRA TAB 5MG .....	210	<i>5-0.5%</i> .....	158
<i>benazepril &amp; hydrochlorothiazide tab</i>		<i>benzphetamine hcl tab 25 mg</i> .....	15
<i>10-12.5 mg</i> .....	94	<i>benzphetamine hcl tab 50 mg</i> .....	15
<i>benazepril &amp; hydrochlorothiazide tab</i>		<i>benztropine mesylate inj 1 mg/ml</i> ..	117
<i>20-12.5 mg</i> .....	94	<i>benztropine mesylate tab 0.5 mg</i> ...	117
<i>benazepril &amp; hydrochlorothiazide tab</i>		<i>benztropine mesylate tab 1 mg</i> .....	117
<i>20-25 mg</i> .....	95	<i>benztropine mesylate tab 2 mg</i> .....	117
<i>benazepril &amp; hydrochlorothiazide tab 5-</i>		BEOVU INJ 6/0.05ML .....	248
<i>6.25 mg</i> .....	94	<i>bepotastine besilate ophth soln 1.5%</i>	
<i>benazepril hcl tab 10 mg</i> .....	90	.....	252
<i>benazepril hcl tab 20 mg</i> .....	90	BEPREVE DRO 1.5% .....	252
<i>benazepril hcl tab 40 mg</i> .....	90	BERINERT INJ 500UNIT .....	202
<i>benazepril hcl tab 5 mg</i> .....	90	BESIVANCE SUS 0.6% .....	249
BENDEKA INJ 100/4ML.....	100	BESPONSA INJ 0.9MG .....	104
BENEFIX INJ 1000UNIT .....	199	BESREMI SOL 500MCG.....	114
BENEFIX INJ 2000UNIT .....	199	BETADINE SOL 5% OP .....	249
BENEFIX INJ 250UNIT .....	199	<i>betaine powder for oral solution</i> ....	184
BENEFIX INJ 3000UNIT .....	199	<i>betamethasone dipropionate</i>	
BENEFIX INJ 500UNIT.....	199	<i>augmented cream 0.05%</i> .....	165
BENICAR HCT TAB 20-12.5.....	95		



<i>betamethasone dipropionate</i>	
<i>augmented gel 0.05%</i> .....	165
<i>betamethasone dipropionate</i>	
<i>augmented lotion 0.05%</i> .....	165
<i>betamethasone dipropionate</i>	
<i>augmented oint 0.05%</i> .....	165
<i>betamethasone dipropionate cream</i>	
<i>0.05%</i> .....	165
<i>betamethasone dipropionate lotion</i>	
<i>0.05%</i> .....	165
<i>betamethasone dipropionate oint</i>	
<i>0.05%</i> .....	165
<i>betamethasone sod phosphate &amp;</i>	
<i>acetate inj susp 6 (3-3) mg/ml</i> ....	152
<i>betamethasone valerate aerosol foam</i>	
<i>0.12%</i> .....	165
<i>betamethasone valerate cream 0.1%</i>	
<i>(base equivalent)</i> .....	165
<i>betamethasone valerate lotion 0.1%</i>	
<i>(base equivalent)</i> .....	165
<i>betamethasone valerate oint 0.1%</i>	
<i>(base equivalent)</i> .....	165
BETAMETH COM INJ 7MG/ML .....	152
BETAMETH SOD INJ 12MG/2ML .....	152
BETAMETH SOD INJ 6MG/ML.....	152
BETAPACE AF TAB 120MG .....	135
BETAPACE AF TAB 160MG .....	135
BETAPACE AF TAB 80MG .....	135
BETAPACE TAB 120MG.....	135
BETAPACE TAB 160MG.....	135
BETAPACE TAB 80MG.....	135
BETA-PHOS/AC INJ 3-3MG/ML .....	152
BETASERON INJ 0.3MG .....	262
<i>betaxolol hcl ophth soln 0.5%</i> .....	247
<i>betaxolol hcl tab 10 mg</i> .....	133
<i>betaxolol hcl tab 20 mg</i> .....	133
<i>bethanechol chloride tab 10 mg</i> .....	279
<i>bethanechol chloride tab 25 mg</i> .....	279
<i>bethanechol chloride tab 50 mg</i> .....	279
<i>bethanechol chloride tab 5 mg</i> .....	279
BETHKIS NEB 300/4ML .....	20
BETIMOL SOL 0.25% .....	247
BETIMOL SOL 0.5% .....	247
BETOPTIC-S SUS 0.25% OP.....	247
BEVACIZUMAB INJ 2.75MG .....	248
BEVACIZUMAB INJ 3.75MG .....	248
BEVESPI AER 9-4.8MCG .....	55
BEVYXXA CAP 40MG .....	57
BEVYXXA CAP 80MG .....	57
<i>bexarotene cap 75 mg</i> .....	114
<i>bexarotene gel 1%</i> .....	162
BEXSERO INJ.....	279
BEYAZ TAB.....	147
BG STAR TES BLD GLUC.....	175
BIAFINE EMU .....	173
<i>bicalutamide tab 50 mg</i> .....	106
BICILLIN C-R INJ 1200000 .....	258
BICILLIN C-R INJ 900/300 .....	258
BICILLIN L-A INJ 1200000 .....	257
BICILLIN L-A INJ 2400000 .....	257
BICILLIN L-A INJ 600000 .....	257
BICNU INJ 100MG .....	100
BIDIL TAB .....	141
BIJUVA CAP 1-100MG .....	189
BIKTARVY TAB .....	127
BILTRICIDE TAB 600MG.....	43
<i>bimatoprost ophth soln 0.03%</i> .....	253
BINOSTO TAB 70MG .....	181
BIONECT AER 0.2% .....	173
BIONECT CRE 0.2% .....	173
BIONECT GEL 0.2% .....	173
BIOSCANNER TES GLUCOSE .....	175
BIOSTEP MIS 4 .....	173
BIOTHRAX INJ .....	279
<i>bismuth subcit-metronidazole-</i>	
<i>tetracycline cap 140-125-125 mg</i> 277	
<i>bisoprolol &amp; hydrochlorothiazide tab</i>	
<i>10-6.25 mg</i> .....	95
<i>bisoprolol &amp; hydrochlorothiazide tab</i>	
<i>2.5-6.25 mg</i> .....	95
<i>bisoprolol &amp; hydrochlorothiazide tab 5-</i>	
<i>6.25 mg</i> .....	95
<i>bisoprolol fumarate tab 10 mg</i> .....	133
<i>bisoprolol fumarate tab 5 mg</i> .....	133
BIVALIR/NACL INJ 250/50.....	59
BIVALIR/NACL INJ 500/100 .....	59
BIVALIRUDIN SOL RTU .....	59
<i>bivalirudin trifluoroacetate for iv soln</i>	
<i>250 mg (base equiv)</i> .....	59
<i>bivalirudin trifluoroacetate iv soln 250</i>	
<i>mg/50ml (base eq)</i> .....	59
BIVIGAM INJ 10% .....	254
<i>bleomycin sulfate for inj 15 unit</i> ....	108
<i>bleomycin sulfate for inj 30 unit</i> ....	108

BLEPHAMIDE OIN S.O.P. ....	250	<i>brimonidine tartrate gel 0.33% (base equivalent) .....</i>	171
BLINCYTO INJ 35MCG .....	104	<i>brimonidine tartrate ophth soln 0.15% .....</i>	249
<i>blisovi 24 tab fe 1/20 .....</i>	147	<i>brimonidine tartrate ophth soln 0.2% .....</i>	249
<i>blisovi fe tab 1/20 .....</i>	147	<i>brimonidine tartrate-timolol maleate ophth soln 0.2-0.5% .....</i>	247
<i>blisovi fe tab 1.5/30 .....</i>	147	BRINEURA KIT 150/5ML .....	184
BLOOD GLUCOS TES .....	175	<i>brinzolamide ophth susp 1% .....</i>	252
BLOOD GLUCOS TES PREMIUM.....	175	BRIVIACT INJ 50MG/5ML .....	60
BLOOD GLUCOS TES STRIPS .....	175	BRIVIACT SOL 10MG/ML .....	60
BLOXIVERZ INJ 10/10ML.....	99	BRIVIACT TAB 100MG.....	61
BLOXIVERZ INJ 5MG/10ML .....	99	BRIVIACT TAB 10MG .....	60
BOCASAL POW .....	236	BRIVIACT TAB 25MG .....	61
BONJESTA TAB 20-20MG .....	83	BRIVIACT TAB 50MG .....	61
BOOSTRIX INJ .....	273	BRIVIACT TAB 75MG .....	61
BORIC ACID GRA .....	171	BRIXADI SOL 128/0.36 .....	40
<i>bortezomib for inj 3.5 mg .....</i>	110	BRIXADI SOL 16/0.32.....	40
BORTEZOMIB INJ 3.5/1.4 .....	110	BRIXADI SOL 24/0.48.....	40
BORTEZOMIB INJ 3.5MG .....	110	BRIXADI SOL 32/0.64.....	40
<i>bosentan tab 125 mg .....</i>	142	BRIXADI SOL 64/0.18.....	40
<i>bosentan tab 62.5 mg .....</i>	142	BRIXADI SOL 8/0.16ML.....	40
BOSULIF TAB 100MG .....	110	BRIXADI SOL 96/0.27.....	40
BOSULIF TAB 400MG .....	110	<i>bromfed dm sol 2-30-10 .....</i>	156
BOSULIF TAB 500MG .....	110	<i>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily).....</i>	252
BOTOX INJ 100UNIT .....	245	<i>bromocriptine mesylate cap 5 mg (base equivalent) .....</i>	117
BOTOX INJ 200UNIT .....	245	<i>bromocriptine mesylate tab 2.5 mg (base equivalent) .....</i>	117
BRAFTOVI CAP 75MG .....	110	BROMSITE DRO 0.075%.....	252
BREEZE 2 MIS TEST .....	175	BRONCHITOL CAP 40MG .....	267
BRENZAVVY TAB 20MG .....	79	BROVANA NEB 15MCG .....	55
BREO ELLIPTA INH 100-25 .....	55	BRUKINSA CAP 80MG .....	110
BREO ELLIPTA INH 200-25 .....	55	BRYHALI LOT 0.01%.....	165
BREVIBLOC DS SOL 2000MG .....	133	BSS PLUS SOL OP .....	252
BREVIBLOC INJ 10MG/ML.....	133	BSS SOL OP .....	252
BREVIBLOC PM SOL 2500MG .....	133	<i>budesonide delayed release particles cap 3 mg.....</i>	152
BREVIBLOC SOL.....	133	<i>budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act .....</i>	55
BREVIBLOC SOL 10MG/ML.....	134	<i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act .....</i>	55
BREVIBLOC SOL 2000MG .....	134	<i>budesonide inhalation susp 0.25 mg/2ml.....</i>	53
BREVIBLOC SOL 2500MG .....	134		
BREVITAL SOD INJ 500MG .....	196		
BREXAFEMME TAB 150MG .....	83		
<i>breyana aer 160/4.5 .....</i>	55		
<i>breyana aer 80/4.5 .....</i>	55		
BREZTRI AERO AER SPHERE .....	55		
BRIDION INJ 200/2ML .....	81		
BRIDION INJ 500/5ML .....	81		
<i>briellyn tab .....</i>	147		
BRILINTA TAB 60MG .....	203		
BRILINTA TAB 90MG .....	203		
BRIMO/DORZO SOL 0.15-2%.....	249		

<i>budesonide inhalation susp 0.5 mg/2ml</i>	<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>
.....53	.....40
<i>budesonide inhalation susp 1 mg/2ml</i>	<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>
.....53	.....40
<i>budesonide tab er 24hr 9 mg</i>	<i>buprenorphine td patch weekly 10 mcg/hr</i>
.....153	.....40
<i>bumetanide inj 0.25 mg/ml</i>	<i>buprenorphine td patch weekly 15 mcg/hr</i>
.....179	.....40
<i>bumetanide tab 0.5 mg</i>	<i>buprenorphine td patch weekly 20 mcg/hr</i>
.....179	.....40
<i>bumetanide tab 1 mg</i>	<i>buprenorphine td patch weekly 5 mcg/hr</i>
.....179	.....40
<i>bumetanide tab 2 mg</i>	<i>buprenorphine td patch weekly 7.5 mcg/hr</i>
.....179	.....40
<i>BUMEX TAB 0.5MG</i>	<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>
.....180	.....264
<i>BUPHENYL POW</i>	<i>bupropion hcl tab 100 mg</i>
.....185	.....68
<i>BUPHENYL TAB 500MG</i>	<i>bupropion hcl tab 75 mg</i>
.....185	.....68
<i>bupivacaine hcl inj 0.25%</i>	<i>bupropion hcl tab er 12hr 100 mg</i>
.....212	.....68
<i>bupivacaine hcl inj 0.5%</i>	<i>bupropion hcl tab er 12hr 150 mg</i>
.....212	.....68
<i>bupivacaine hcl preservative free (pf) inj 0.25%</i>	<i>bupropion hcl tab er 12hr 200 mg</i>
.....212	.....68
<i>bupivacaine hcl preservative free (pf) inj 0.5%</i>	<i>bupropion hcl tab er 24hr 150 mg</i>
.....212	.....68
<i>bupivacaine hcl preservative free (pf) inj 0.75%</i>	<i>bupropion hcl tab er 24hr 300 mg</i>
.....212	.....68
<i>BUPIVACAINE INJ 0.125%</i>	<i>bupropion hcl tab er 24hr 450 mg</i>
.....212	.....68
<i>bupivacaine inj 0.25% w/ epinephrine 1:200000</i>	<i>bupirone hcl tab 10 mg</i>
.....211	.....49
<i>bupivacaine inj 0.25% w/ epinephrine 1:200000 (pf)</i>	<i>bupirone hcl tab 15 mg</i>
.....211	.....49
<i>bupivacaine inj 0.5% w/ epinephrine 1:200000</i>	<i>bupirone hcl tab 30 mg</i>
.....211	.....49
<i>bupivacaine inj 0.5% w/ epinephrine 1:200000 (pf)</i>	<i>bupirone hcl tab 5 mg</i>
.....211	.....49
<i>BUPIVACAINE INJ 2.5MG/ML</i>	<i>bupirone hcl tab 7.5 mg</i>
.....212	.....49
<i>BUPIVACAINE INJ 5MG/ML</i>	<i>busulfan inj 6 mg/ml</i>
.....212	.....100
<i>bupivacaine inj spinal</i>	<i>BUSULFEX INJ 6MG/ML</i>
.....212	.....100
<i>BUPRENEX INJ 0.3MG/ML</i>	<i>BUT/ASA/CAF TAB</i>
.....40	.....30
<i>buprenorphine hcl inj 0.3 mg/ml (base equiv)</i>	<i>BUTAL/APAP CAP 50-300MG</i>
.....40	.....30
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	<i>butalbital-acetaminophen-caffeine cap 50-300-40 mg</i>
.....40	.....30
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	<i>butalbital-acetaminophen-caffeine cap 50-325-40 mg</i>
.....40	.....30
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	<i>butalbital-acetaminophen-caffeine tab 50-325-40 mg</i>
.....40	.....30
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	<i>butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg</i>
.....40	.....38
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	<i>butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg</i>
.....40	.....38
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	<i>butalbital-acetaminophen cap 50-300 mg</i>
.....40	.....30
	<i>butalbital-acetaminophen tab 25-325 mg</i>
	.....30

<i>butalbital-acetaminophen tab 50-325 mg</i> .....	30	<i>caffeine citrate inj 60 mg/3ml (10 mg/ml base equiv)</i> .....	14
<i>butalbital-aspirin-caffeine cap 50-325-40 mg</i> .....	30	<i>caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv)</i> .....	14
<i>butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg</i> .....	39	CALAN SR TAB 120MG .....	136
<i>butorphanol tartrate inj 1 mg/ml</i> .....	40	CALAN SR TAB 180MG .....	136
<i>butorphanol tartrate inj 2 mg/ml</i> .....	40	CALAN SR TAB 240MG .....	136
<i>butorphanol tartrate nasal soln 10 mg/ml</i> .....	40	CALCIFOL WAF.....	227
BUTRANS DIS 10MCG/HR.....	41	<i>calcipotriene-betamethasone dipropionate oint 0.005-0.064%</i> ..	165
BUTRANS DIS 15MCG/HR.....	41	<i>calcipotriene-betamethasone dipropionate susp 0.005-0.064%</i> .	165
BUTRANS DIS 20MCG/HR.....	41	<i>calcipotriene cream 0.005%</i> .....	162
BUTRANS DIS 5MCG/HR .....	41	<i>calcipotriene foam 0.005%</i> .....	162
BUTRANS DIS 7.5/HR .....	41	<i>calcipotriene oint 0.005%</i> .....	163
BYDUREON PEN INJ 2MG.....	76	<i>calcipotriene soln 0.005% (50 mcg/ml)</i> .....	163
BYETTA INJ 10MCG .....	76	<i>calcitonin (salmon) inj 200 unit/ml</i> .	181
BYETTA INJ 5MCG .....	76	<i>calcitonin (salmon) nasal soln 200 unit/act</i> .....	181
BYLVAY CAP 1200MCG .....	193	<i>calcitrene oin 0.005%</i> .....	163
BYLVAY CAP 200MCG.....	193	<i>calcitriol cap 0.25 mcg</i> .....	185
BYLVAY CAP 400MCG.....	193	<i>calcitriol cap 0.5 mcg</i> .....	185
BYLVAY CAP 600MCG.....	193	<i>calcitriol inj 1 mcg/ml</i> .....	185
BYOOVIZ INJ 0.5MG .....	248	<i>calcitriol oint 3 mcg/gm</i> .....	163
BYSTOLIC TAB 10MG .....	134	<i>calcitriol oral soln 1 mcg/ml</i> .....	185
BYSTOLIC TAB 2.5MG .....	134	<i>calcium acetate (phosphate binder) cap 667 mg (169 mg ca)</i> .....	195
BYSTOLIC TAB 20MG .....	134	<i>calcium acetate (phosphate binder) tab 667 mg</i> .....	195
BYSTOLIC TAB 5MG.....	134	CALCIUM CHLO INJ 10% .....	227
<b>C</b>		<i>calcium chloride inj 10%</i> .....	227
CA ALGINATE MIS 12.....	173	CALCIUM DISO INJ 1GM/5ML.....	81
CA ALGINATE PAD 2 .....	173	CALCIUM GLUC INJ 10% .....	227
CA ALGINATE PAD 4 .....	173	CALDOLOR INJ 4MG/ML .....	25
CABENUVA SUS 400-600.....	127	CALDOLOR INJ 800/8ML .....	25
CABENUVA SUS 600-900.....	127	CALQUENCE CAP 100MG .....	110
<i>cabergoline tab 0.5 mg</i> .....	187	CALQUENCE TAB 100MG .....	110
CABOMETYX TAB 20MG .....	110	CAMBIA POW 50MG .....	226
CABOMETYX TAB 40MG.....	110	CAMCEVI INJ 42MG .....	106
CABOMETYX TAB 60MG .....	110	<i>camila tab 0.35mg</i> .....	152
CADUET TAB 10-10MG.....	141	CAMPTOSAR INJ 100/5ML.....	116
CADUET TAB 10-20MG.....	141	CAMPTOSAR INJ 300/15ML.....	116
CADUET TAB 10-40MG.....	141	CAMPTOSAR INJ 40MG/2ML.....	116
CADUET TAB 10-80MG.....	141	<i>camrese lo tab</i> .....	147
CADUET TAB 5-10MG.....	141	<i>camrese tab</i> .....	147
CADUET TAB 5-20MG.....	141	CAMZYOS CAP 10MG .....	140
CADUET TAB 5-40MG.....	141		
CADUET TAB 5-80MG.....	141		
CAFCIT INJ 60MG/3ML.....	14		
CAFERGOT TAB 1-100MG .....	225		

CAMZYOS CAP 15MG .....	140	<i>carbidopa &amp; levodopa orally</i>	
CAMZYOS CAP 2.5MG .....	140	<i>disintegrating tab 10-100 mg .....</i>	117
CAMZYOS CAP 5MG .....	140	<i>carbidopa &amp; levodopa orally</i>	
CANASA SUP 1000MG .....	193	<i>disintegrating tab 25-100 mg .....</i>	117
CANCIDAS INJ 50MG .....	83	<i>carbidopa &amp; levodopa orally</i>	
CANCIDAS INJ 70MG .....	83	<i>disintegrating tab 25-250 mg .....</i>	117
<i>candesartan cilexetil-</i>		<i>carbidopa &amp; levodopa tab 10-100 mg</i>	
<i>hydrochlorothiazide tab 16-12.5 mg</i>		.....	117
.....	95	<i>carbidopa &amp; levodopa tab 25-100 mg</i>	
<i>candesartan cilexetil-</i>		.....	117
<i>hydrochlorothiazide tab 32-12.5 mg</i>		<i>carbidopa &amp; levodopa tab 25-250 mg</i>	
.....	95	.....	117
<i>candesartan cilexetil-</i>		<i>carbidopa &amp; levodopa tab er 25-100</i>	
<i>hydrochlorothiazide tab 32-25 mg</i>	.95	mg .....	117
<i>candesartan cilexetil tab 16 mg.....</i>	92	<i>carbidopa &amp; levodopa tab er 50-200</i>	
<i>candesartan cilexetil tab 32 mg.....</i>	92	mg .....	117
<i>candesartan cilexetil tab 4 mg .....</i>	92	<i>carbidopa-levodopa-entacapone tabs</i>	
<i>candesartan cilexetil tab 8 mg .....</i>	92	12.5-50-200 mg .....	117
CANTHARIDIN SOL 0.7%.....	169	<i>carbidopa-levodopa-entacapone tabs</i>	
<i>capecitabine tab 150 mg .....</i>	101	18.75-75-200 mg .....	117
<i>capecitabine tab 500 mg .....</i>	102	<i>carbidopa-levodopa-entacapone tabs</i>	
CAPEX SHA 0.01% .....	165	25-100-200 mg.....	118
CAPLYTA CAP 10.5MG .....	120	<i>carbidopa-levodopa-entacapone tabs</i>	
CAPLYTA CAP 21MG.....	120	31.25-125-200 mg .....	118
CAPLYTA CAP 42MG.....	120	<i>carbidopa-levodopa-entacapone tabs</i>	
CAPRELSA TAB 100MG.....	110	37.5-150-200 mg .....	118
CAPRELSA TAB 300MG.....	110	<i>carbidopa-levodopa-entacapone tabs</i>	
<i>captopril tab 100 mg .....</i>	90	50-200-200 mg.....	118
<i>captopril tab 12.5 mg .....</i>	90	<i>carbidopa tab 25 mg.....</i>	117
<i>captopril tab 25 mg .....</i>	90	<i>carbinoxamine maleate soln 4 mg/5ml</i>	
<i>captopril tab 50 mg .....</i>	90	.....	85
CARAC CRE 0.5% .....	162	<i>carbinoxamine maleate tab 4 mg ....</i>	85
CARAFATE SUS 1GM/10ML .....	276	CARBINOXAMIN TAB 6MG .....	85
CARAFATE TAB 1GM .....	276	<i>carboplatin iv soln 150 mg/15ml ....</i>	100
CARBAGLU TAB 200MG .....	185	<i>carboplatin iv soln 450 mg/45ml ....</i>	100
<i>carbamazepine cap er 12hr 100 mg ..</i>	61	<i>carboplatin iv soln 50 mg/5ml.....</i>	100
<i>carbamazepine cap er 12hr 200 mg ..</i>	61	<i>carboplatin iv soln 600 mg/60ml ....</i>	100
<i>carbamazepine cap er 12hr 300 mg ..</i>	61	<i>carboprost tromethamine im soln 250</i>	
<i>carbamazepine chew tab 100 mg ....</i>	61	<i>mcg/ml .....</i>	254
<i>carbamazepine susp 100 mg/5ml ....</i>	61	CARDENE IV INJ 40/200ML.....	136
<i>carbamazepine tab 200 mg .....</i>	61	CARDENE IV SOL 20/200ML.....	136
<i>carbamazepine tab er 12hr 100 mg ..</i>	61	CARDIOPLEGIA SOL MAIN 4:1 .....	140
<i>carbamazepine tab er 12hr 200 mg ..</i>	61	CARDIOPLEGIC SOL.....	140
<i>carbamazepine tab er 12hr 400 mg ..</i>	61	<i>cardioplegic soln .....</i>	140
CARBATROL CAP 100MG .....	61	CARDIOPLEGI SOL DEL NIDO.....	140
CARBATROL CAP 200MG .....	61	CARDIOPLE MN SOL LOW TROM .....	140
CARBATROL CAP 300MG .....	61	CARDIOPL IND SOL 4:1 .....	140

CARDIOPL IND SOL 8:1 .....	140	<i>carvedilol phosphate cap er 24hr 10</i>	
CARDIOPL IND SOL LOW DEX8 .....	140	<i>mg</i> .....	133
CARDIOPL IND SOL NON-EN 8 .....	140	<i>carvedilol phosphate cap er 24hr 20</i>	
CARDIOPL IND SOL PLASMA 4 .....	140	<i>mg</i> .....	133
CARDIOPL IND SOL PLS/TROM.....	140	<i>carvedilol phosphate cap er 24hr 40</i>	
CARDIOPL MN SOL 8:1 .....	140	<i>mg</i> .....	133
CARDIOPL MN SOL PLS/TROM.....	140	<i>carvedilol phosphate cap er 24hr 80</i>	
CARDIOPL REP SOL 4:1.....	140	<i>mg</i> .....	133
CARDIZEM CD CAP 120MG/24.....	136	<i>carvedilol tab 12.5 mg</i> .....	133
CARDIZEM CD CAP 180MG/24.....	136	<i>carvedilol tab 25 mg</i> .....	133
CARDIZEM CD CAP 240MG/24.....	136	<i>carvedilol tab 3.125 mg</i> .....	133
CARDIZEM CD CAP 360MG/24.....	136	<i>carvedilol tab 6.25 mg</i> .....	133
CARDIZEM LA TAB 120MG .....	136	CASODEX TAB 50MG .....	107
CARDIZEM LA TAB 180MG .....	136	<i>casprofungin acetate for iv soln 50 mg</i>	
CARDIZEM LA TAB 240MG .....	136	.....	83
CARDIZEM LA TAB 300MG/24 .....	136	<i>casprofungin acetate for iv soln 70 mg</i>	
CARDIZEM LA TAB 360MG .....	136	.....	83
CARDIZEM LA TAB 420MG/24 .....	136	CASPOFUNGIN INJ 50MG .....	83
CARDIZEM TAB 120MG .....	136	CASPOFUNGIN INJ 70MG .....	84
CARDIZEM TAB 30MG .....	136	<i>cataflam tab 50mg</i> .....	25
CARDIZEM TAB 60MG .....	136	CATAPRES-TTS DIS 0.1/24HR.....	93
CARDURA TAB 1MG .....	92	CATAPRES-TTS DIS 0.2/24HR.....	93
CARDURA TAB 2MG .....	92	CATAPRES-TTS DIS 0.3/24HR.....	93
CARDURA TAB 4MG .....	93	CATHFLO ACTI INJ 2MG .....	204
CARDURA TAB 8MG .....	93	CAYA DPR .....	215
CARDURA XL TAB 4MG.....	197	CAYSTON INH 75MG.....	47
CARDURA XL TAB 8MG.....	197	<i>cefaclor cap 250 mg</i> .....	144
CAREONE LANC MIS 30G.....	217	<i>cefaclor cap 500 mg</i> .....	144
CAREONE LANC MIS THIN 23G.....	217	CEFACLOR ER TAB 500MG .....	144
CARESENS N TES .....	175	<i>cefaclor for susp 125 mg/5ml</i> .....	144
CARETOUCH MIS TWIST 30 .....	217	<i>cefaclor for susp 250 mg/5ml</i> .....	144
<i>carglumic acid soluble tab 200 mg</i> ..	185	<i>cefaclor for susp 375 mg/5ml</i> .....	144
CARIMUNE NF INJ 6GM .....	254	<i>cefadroxil cap 500 mg</i> .....	144
<i>carisoprodol tab 250 mg</i> .....	241	<i>cefadroxil for susp 250 mg/5ml</i> .....	144
<i>carisoprodol tab 350 mg</i> .....	241	<i>cefadroxil for susp 500 mg/5ml</i> .....	144
<i>carmustine for inj 100 mg</i> .....	100	<i>cefadroxil tab 1 gm</i> .....	144
CARNITOR INJ 1GM/5ML .....	185	CEFAZOL/DEX SOL 1GM .....	144
CARNITOR SF SOL 1GM/10ML .....	185	CEFAZOL/DEX SOL 2GM .....	144
CARNITOR SOL 1GM/10ML .....	185	CEFAZOLIN INJ 100GM .....	144
CARNITOR TAB 330MG.....	185	CEFAZOLIN INJ 1GM/50ML .....	144
CAROSPIR SUS 25MG/5ML .....	180	CEFAZOLIN INJ 2GM.....	144
<i>carteolol hcl ophth soln 1%</i> .....	247	CEFAZOLIN INJ 300GM .....	144
<i>cartia xt cap 120/24hr</i> .....	136	CEFAZOLIN INJ 3GM.....	144
<i>cartia xt cap 180/24hr</i> .....	136	<i>cefazolin sodium for inj 10 gm</i> .....	144
<i>cartia xt cap 240/24hr</i> .....	136	<i>cefazolin sodium for inj 1 gm</i> .....	144
<i>cartia xt cap 300/24hr</i> .....	136	<i>cefazolin sodium for inj 2 gm</i> .....	144
		<i>cefazolin sodium for inj 500 mg</i> .....	144

<i>cefazolin sodium for iv soln 1 gm</i> ....144	<i>ceftriaxone sodium for iv soln 2 gm</i> 145
CEFAZOLIN SOL.....144	<i>ceftriaxone sodium in dextrose inj 20</i>
<i>cefdinir cap 300 mg</i> .....145	<i>mg/ml</i> .....145
<i>cefdinir for susp 125 mg/5ml</i> .....145	<i>ceftriaxone sodium in dextrose inj 40</i>
<i>cefdinir for susp 250 mg/5ml</i> .....145	<i>mg/ml</i> .....146
CEFEPIME/DEX INJ 1GM.....146	<i>cefuroxime axetil tab 250 mg</i> .....145
CEFEPIME/DEX INJ 2GM.....146	<i>cefuroxime axetil tab 500 mg</i> .....145
<i>cefepime hcl for inj 1 gm</i> .....146	<i>cefuroxime sodium for inj 750 mg</i> ..145
<i>cefepime hcl for iv soln 2 gm</i> .....146	<i>cefuroxime sodium for iv soln 1.5 gm</i>
CEFEPIME INJ 1GM.....146	.....145
CEFEPIME INJ 2G/100ML.....146	CELEBREX CAP 100MG.....25
<i>cefixime cap 400 mg</i> .....145	CELEBREX CAP 200MG.....25
<i>cefixime for susp 100 mg/5ml</i> .....145	CELEBREX CAP 400MG.....26
<i>cefixime for susp 200 mg/5ml</i> .....145	CELEBREX CAP 50MG .....25
<i>cefotaxime sodium for inj 1 gm</i> .....145	<i>celecoxib cap 100 mg</i> .....26
<i>cefotaxime sodium for inj 2 gm</i> .....145	<i>celecoxib cap 200 mg</i> .....26
<i>cefotetan disodium for inj 1 gm</i> .....144	<i>celecoxib cap 400 mg</i> .....26
<i>cefotetan disodium for inj 2 gm</i> .....144	<i>celecoxib cap 50 mg</i> .....26
CEFOXITIN INJ 1GM .....145	CELESTONE INJ SOLUSPAN .....153
CEFOXITIN INJ 2GM .....145	CELEXA TAB 10MG .....68
<i>cefoxitin sodium for iv soln 10 gm</i> ..145	CELEXA TAB 20MG .....68
<i>cefoxitin sodium for iv soln 1 gm</i> ....145	CELEXA TAB 40MG .....68
<i>cefoxitin sodium for iv soln 2 gm</i> ....145	CELLCEPT CAP 250MG.....233
<i>cefpodoxime proxetil for susp 100</i>	CELLCEPT IV INJ 500MG.....233
<i>mg/5ml</i> .....145	CELLCEPT SUS 200MG/ML .....233
<i>cefpodoxime proxetil for susp 50</i>	CELLCEPT TAB 500MG.....233
<i>mg/5ml</i> .....145	CELONTIN CAP 300MG.....67
<i>cefpodoxime proxetil tab 100 mg</i> ....145	CENTANY OIN 2% .....160
<i>cefpodoxime proxetil tab 200 mg</i> ....145	<i>cephalexin cap 250 mg</i> .....144
<i>cefprozil for susp 125 mg/5ml</i> .....145	<i>cephalexin cap 500 mg</i> .....144
<i>cefprozil for susp 250 mg/5ml</i> .....145	<i>cephalexin cap 750 mg</i> .....144
<i>cefprozil tab 250 mg</i> .....145	<i>cephalexin for susp 125 mg/5ml</i> ....144
<i>cefprozil tab 500 mg</i> .....145	<i>cephalexin for susp 250 mg/5ml</i> ....144
CEFTAZIDIME/ SOL D5W 1GM.....145	<i>cephalexin tab 250 mg</i> .....144
CEFTAZIDIME/ SOL D5W 2GM.....145	<i>cephalexin tab 500 mg</i> .....144
<i>ceftazidime for inj 1 gm</i> .....145	CEPROTIN INJ 1000UNIT.....202
<i>ceftazidime for inj 6 gm</i> .....145	CEPROTIN INJ 500 UNIT.....202
<i>ceftazidime for iv soln 2 gm</i> .....145	CERACADE EMU .....170
CEFTRIAX/DEX INJ 1GM.....145	CERAMAX CRE .....170
CEFTRIAX/DEX INJ 2GM.....145	CERDELGA CAP 84MG .....204
CEFTRIAXONE INJ 100GM.....145	CEREBYX INJ 100/2ML.....66
<i>ceftriaxone sodium for inj 10 gm</i> ....145	CEREBYX INJ 500/10ML .....66
<i>ceftriaxone sodium for inj 1 gm</i> .....145	CEREZYME INJ 400UNIT.....204
<i>ceftriaxone sodium for inj 250 mg</i> ..145	CERVIDIL VAG MIS 10MG INS.....254
<i>ceftriaxone sodium for inj 2 gm</i> .....145	<i>cetirizine hcl oral soln 1 mg/ml (5</i>
<i>ceftriaxone sodium for inj 500 mg</i> ..145	<i>mg/5ml)</i> .....85
<i>ceftriaxone sodium for iv soln 1 gm</i> 145	CETRAXAL SOL 0.2% .....253

<i>cetorelix acetate for inj kit 0.25 mg</i>	CHOLBAM CAP 50MG .....	192
.....	<i>cholestyramine light powder 4 gm/dose</i>	87
CETROTIDE KIT 0.25MG .....	.....	87
<i>cevimeline hcl cap 30 mg</i> .....	<i>cholestyramine light powder packets 4 gm</i>	87
CGMS CABLE MIS .....	.....	87
CGMS MIS SOFTWARE .....	<i>cholestyramine powder 4 gm/dose</i> ...	87
<i>charlotte 24 chw fe 1/20</i> .....	<i>cholestyramine powder packets 4 gm</i>	87
<i>chateal eq tab 0.15/30</i> .....	<i>choline fenofibrate cap dr 135 mg</i>	87
<i>chateal tab 0.15/30</i> .....	(fenofibric acid equiv) .....	87
CHEMET CAP 100MG.....	<i>choline fenofibrate cap dr 45 mg</i>	87
CHENODAL TAB 250MG .....	(fenofibric acid equiv) .....	87
<i>child asa chw 81mg</i> .....	CHOR GONADOT INJ 10000UNT ....	182
<i>chloramphenicol sodium succinate for iv inj 1 gm</i> .....	<i>chromic chloride inj 40 mcg/10ml (4 mcg/ml) (elemental cr)</i> .....	231
<i>chlordiazepoxide-amitriptyline tab 10-25 mg</i> .....	CIALIS TAB 10MG.....	141
<i>chlordiazepoxide-amitriptyline tab 5-12.5 mg</i> .....	CIALIS TAB 2.5MG.....	141
.....	CIALIS TAB 20MG.....	141
<i>chlordiazepoxide hcl cap 10 mg</i> .....	CIALIS TAB 5MG .....	141
<i>chlordiazepoxide hcl cap 25 mg</i> .....	CIBINQO TAB 100MG.....	168
<i>chlordiazepoxide hcl cap 5 mg</i> .....	CIBINQO TAB 200MG .....	168
<i>chlordiazepoxide hcl-clidinium bromide cap 5-2.5 mg</i> .....	CIBINQO TAB 50MG.....	168
.....	<i>ciclodan sol 8%</i> .....	161
CHLORHEX GLU SOL 20% .....	<i>ciclopirox gel 0.77%</i> .....	161
<i>chlorhexidine gluconate soln 0.12%</i>	<i>ciclopirox olamine cream 0.77% (base equiv)</i> .....	161
<i>chlorprocaine hcl preservative free (pf) inj 2%</i> .....	<i>ciclopirox olamine susp 0.77% (base equiv)</i> .....	161
.....	.....	161
<i>chlorprocaine hcl preservative free (pf) inj 3%</i> .....	<i>ciclopirox shampoo 1%</i> .....	161
.....	<i>ciclopirox solution 8%</i> .....	161
<i>chloroquine phosphate tab 250 mg</i> ...98	<i>cidofovir iv inj 75 mg/ml</i> .....	130
<i>chloroquine phosphate tab 500 mg</i> ...99	<i>cilostazol tab 100 mg</i> .....	203
<i>chlorothiazide sodium for inj 500 mg</i> .....	<i>cilostazol tab 50 mg</i> .....	203
.....	.....	249
<i>chlorpromazine hcl inj 25 mg/ml</i> ....	CILOXAN OIN 0.3% OP .....	249
<i>chlorpromazine hcl inj 50 mg/2ml</i> ...124	.....	249
<i>chlorpromazine hcl tab 100 mg</i> .....	CIMDUO TAB 300-300.....	127
<i>chlorpromazine hcl tab 10 mg</i> .....	CIMERLI INJ 0.3MG .....	248
<i>chlorpromazine hcl tab 200 mg</i> .....	.....	248
<i>chlorpromazine hcl tab 25 mg</i> .....	<i>cimetidine hcl soln 300 mg/5ml</i> .....	275
<i>chlorpromazine hcl tab 50 mg</i> .....	<i>cimetidine tab 200 mg</i> .....	275
<i>chlorthalidone tab 25 mg</i> .....	<i>cimetidine tab 300 mg</i> .....	275
.....	<i>cimetidine tab 400 mg</i> .....	275
<i>chlorthalidone tab 50 mg</i> .....	<i>cimetidine tab 800 mg</i> .....	275
.....	.....	193
<i>chlorzoxazone tab 250 mg</i> .....	CIMZIA KIT 200MG.....	193
<i>chlorzoxazone tab 375 mg</i> .....	.....	193
<i>chlorzoxazone tab 500 mg</i> .....	CIMZIA START KIT 200MG/ML.....	193
<i>chlorzoxazone tab 750 mg</i> .....	.....	193
CHOLBAM CAP 250MG.....	<i>cinacalcet hcl tab 30 mg (base equiv)</i>	185
.....	.....	185



<i>cinacalcet hcl tab 60 mg (base equiv)</i>	<i>citalopram hydrobromide tab 20 mg</i>
.....185	<i>(base equiv)</i> .....68
<i>cinacalcet hcl tab 90 mg (base equiv)</i>	<i>citalopram hydrobromide tab 40 mg</i>
.....185	<i>(base equiv)</i> .....68
CINQAIR INJ .....52	CITRANATAL CAP HARMONY .....238
CINRYZE SOL 500 UNIT .....202	CITRANATAL CAP MEDLEY .....238
CIPRO (10%) SUS 500MG/5 .....191	CITRANATAL MIS 90 DHA .....238
CIPRO (5%) SUS 250MG/5 .....191	CITRANATAL MIS B-CALM .....238
CIPRODEX SUS 0.3-0.1% .....253	CITRANATAL PAK ASSURE .....238
<i>ciprofloxacin 200 mg/100ml in d5w</i> 191	CITRANATAL PAK DHA .....238
<i>ciprofloxacin 400 mg/200ml in d5w</i> 191	CITRANATAL PAK ESSENCE .....238
<i>ciprofloxacin-dexamethasone otic susp</i>	CITRANATAL TAB BLOOM .....238
<i>0.3-0.1%</i> .....253	CITRANATAL TAB RX .....238
<i>ciprofloxacin-fluocinolone acetone (pf)</i>	CITRULLINE TAB EASY 1GM .....185
<i>otic soln 0.3-0.025%</i> .....254	<i>cladribine iv soln 10 mg/10ml (1</i>
<i>ciprofloxacin hcl ophth soln 0.3% (base</i>	<i>mg/ml)</i> .....102
<i>equivalent)</i> .....249	<i>claravis cap 10mg</i> .....158
<i>ciprofloxacin hcl otic soln 0.2% (base</i>	<i>claravis cap 20mg</i> .....158
<i>equivalent)</i> .....253	<i>claravis cap 30mg</i> .....158
<i>ciprofloxacin hcl tab 100 mg (base</i>	<i>claravis cap 40mg</i> .....158
<i>equiv)</i> .....191	CLARINEX-D TAB 2.5-120 .....156
<i>ciprofloxacin hcl tab 250 mg (base</i>	CLARINEX TAB 5MG .....85
<i>equiv)</i> .....191	<i>clarithromycin for susp 125 mg/5ml</i> 214
<i>ciprofloxacin hcl tab 500 mg (base</i>	<i>clarithromycin for susp 250 mg/5ml</i> 214
<i>equiv)</i> .....191	<i>clarithromycin tab 250 mg</i> .....214
<i>ciprofloxacin hcl tab 750 mg (base</i>	<i>clarithromycin tab 500 mg</i> .....214
<i>equiv)</i> .....191	<i>clarithromycin tab er 24hr 500 mg</i> ..214
CIPRO HC SUS OTIC .....253	CLEANLET 28G MIS LANCETS .....217
CIPRO TAB 250MG .....191	<i>clemastine fumarate syrup 0.67</i>
CIPRO TAB 500MG .....191	<i>mg/5ml (0.5 mg/5ml base eq)</i> .....85
<i>cisatracurium besylate (pf) iv soln 10</i>	<i>clemastine fumarate tab 2.68 mg</i> .....85
<i>mg/5ml (2 mg/ml)</i> .....245	CLENPIQ SOL .....211
<i>cisatracurium besylate (pf) iv soln 200</i>	CLEOCIN CAP 150MG .....46
<i>mg/20ml (10 mg/ml)</i> .....245	CLEOCIN CAP 300MG .....46
<i>cisatracurium besylate iv soln 20</i>	CLEOCIN CAP 75MG .....46
<i>mg/10ml (2 mg/ml)</i> .....245	CLEOCIN CRE 2% VAG .....281
<i>cisplatin inj 100 mg/100ml (1 mg/ml)</i>	CLEOCIN PED SOL 75MG/5ML .....46
.....100	CLEOCIN PHOS INJ 300/2ML .....46
<i>cisplatin inj 200 mg/200ml (1 mg/ml)</i>	CLEOCIN PHOS INJ 600/4ML .....46
.....100	CLEOCIN PHOS INJ 900/6ML .....46
CISPLATIN INJ 50MG .....100	CLEOCIN PHOS INJ 9GM/60ML .....46
<i>cisplatin inj 50 mg/50ml (1 mg/ml)</i> 100	CLEOCIN SUP 100MG .....281
CITALOPRAM CAP 30MG .....68	CLEOCIN-T LOT 1% .....158
<i>citalopram hydrobromide oral soln 10</i>	CLEVER CHECK MIS .....217
<i>mg/5ml</i> .....68	CLEVER CHECK MIS 30G .....217
<i>citalopram hydrobromide tab 10 mg</i>	CLEVER CHEK TES .....175
<i>(base equiv)</i> .....68	CLEVER CHEK TES AUTO CD .....175

CLEVER CHEK TES VOICE .....	175	<i>clindamycin phosph-benzoyl peroxide</i>	
CLEVER CHOIC TES MICRO .....	175	( <i>refrig</i> ) <i>gel 1.2 (1)-5%</i> .....	158
CLEVIPREX EMU 0.5MG/ML .....	136	CLINDESSE CRE 2% .....	281
CLEVR CHOICE TES AUTO-CD .....	175	CLINIMIX E INJ 2.75/D5W .....	246
CLIMARA DIS 0.025MG .....	189	CLINIMIX E INJ 4.25/D10 .....	246
CLIMARA DIS 0.0375MG .....	189	CLINIMIX E INJ 4.25/D5W .....	246
CLIMARA DIS 0.05MG .....	189	CLINIMIX E INJ 5%/D15W .....	246
CLIMARA DIS 0.06MG .....	189	CLINIMIX E INJ 5%/D20W .....	246
CLIMARA DIS 0.075MG .....	189	CLINIMIX INJ 4.25/D10 .....	246
CLIMARA DIS 0.1MG .....	189	CLINIMIX INJ 4.25/D5W .....	246
CLIMARA PRO DIS WEEKLY .....	189	CLINIMIX INJ 5%/D15W .....	246
<i>clindacin mis etz 1%</i> .....	158	CLINIMIX INJ 5%/D20W .....	246
<i>clindacin-p pad 1%</i> .....	158	CLINIMIX INJ 8/10 .....	246
CLINDAGEL GEL 1% .....	158	CLINIMIX INJ 8/14 .....	246
<i>clindamycin hcl cap 150 mg</i> .....	46	<i>clinisol sf inj 15%</i> .....	246
<i>clindamycin hcl cap 300 mg</i> .....	46	CLINOLIPID EMU 20% .....	246
<i>clindamycin hcl cap 75 mg</i> .....	46	<i>clobazam suspension 2.5 mg/ml</i> .....	60
<i>clindamycin palmitate hcl for soln 75</i>		<i>clobazam tab 10 mg</i> .....	60
<i>mg/5ml (base equiv)</i> .....	46	<i>clobazam tab 20 mg</i> .....	60
<i>clindamycin phosphate-benzoyl</i>		<i>clobetasol e cre 0.05%</i> .....	165
<i>peroxide gel 1.2-2.5%</i> .....	158	<i>clobetasol propionate cream 0.05%</i>	165
<i>clindamycin phosphate-benzoyl</i>		<i>cream 0.05%</i> .....	165
<i>peroxide gel 1-5%</i> .....	158	<i>clobetasol propionate emulsion foam</i>	
<i>clindamycin phosphate foam 1%</i> ....	158	0.05% .....	165
<i>clindamycin phosphate gel 1%</i> .....	158	<i>clobetasol propionate foam 0.05%</i> ..	165
<i>clindamycin phosphate in d5w iv soln</i>		<i>clobetasol propionate gel 0.05%</i> .....	165
300 mg/50ml .....	46	<i>clobetasol propionate lotion 0.05%</i> .	165
<i>clindamycin phosphate in d5w iv soln</i>		<i>clobetasol propionate oint 0.05%</i> ...	166
600 mg/50ml .....	46	<i>clobetasol propionate shampoo 0.05%</i>	
<i>clindamycin phosphate in d5w iv soln</i>		.....	166
900 mg/50ml .....	46	<i>clobetasol propionate soln 0.05%</i> ...	166
<i>clindamycin phosphate inj 300 mg/2ml</i>		<i>clobetasol propionate spray 0.05%</i> .	166
.....	46	CLOBEX LOT 0.05% .....	166
<i>clindamycin phosphate inj 600 mg/4ml</i>		CLOBEX SHA 0.05% .....	166
.....	46	CLOBEX SPR 0.05% .....	166
<i>clindamycin phosphate inj 900 mg/6ml</i>		<i>clocortolone pivalate cream 0.1%</i> ...	166
.....	46	<i>clodan sha 0.05%</i> .....	166
<i>clindamycin phosphate inj 9 gm/60ml</i>		CLODERM CRE 0.1% .....	166
.....	46	<i>clofarabine iv soln 1 mg/ml</i> .....	102
<i>clindamycin phosphate lotion 1%</i> ...	158	CLOLAR INJ 1MG/ML .....	102
<i>clindamycin phosphate soln 1%</i> .....	158	<i>clomid tab 50mg</i> .....	182
<i>clindamycin phosphate swab 1%</i> ....	158	<i>clomiphene citrate tab 50 mg</i> .....	182
<i>clindamycin phosphate-tretinoin gel</i>		<i>clomipramine hcl cap 25 mg</i> .....	72
1.2-0.025% .....	158	<i>clomipramine hcl cap 50 mg</i> .....	72
<i>clindamycin phosphate vaginal cream</i>		<i>clomipramine hcl cap 75 mg</i> .....	72
2% .....	281		

<i>clonazepam orally disintegrating tab</i>		<i>clozapine orally disintegrating tab 150</i>	
0.125 mg .....	60	mg .....	123
<i>clonazepam orally disintegrating tab</i>		<i>clozapine orally disintegrating tab 200</i>	
0.25 mg .....	60	mg .....	123
<i>clonazepam orally disintegrating tab</i>		<i>clozapine orally disintegrating tab 25</i>	
0.5 mg.....	60	mg .....	123
<i>clonazepam orally disintegrating tab 1</i>		<i>clozapine tab 100 mg.....</i>	123
mg .....	60	<i>clozapine tab 200 mg.....</i>	123
<i>clonazepam orally disintegrating tab 2</i>		<i>clozapine tab 25 mg .....</i>	123
mg .....	60	<i>clozapine tab 50 mg .....</i>	123
<i>clonazepam tab 0.5 mg.....</i>	60	CLOZARIL TAB 100MG .....	123
<i>clonazepam tab 1 mg .....</i>	60	CLOZARIL TAB 200MG .....	123
<i>clonazepam tab 2 mg .....</i>	60	CLOZARIL TAB 25MG .....	123
<i>clonidine hcl inj (for epidural infusion)</i>		CLOZARIL TAB 50MG .....	123
100 mcg/ml.....	30	C-NATE DHA CAP 28-1-200 .....	238
<i>clonidine hcl inj (for epidural infusion)</i>		COAGUCHEK MIS LANCETS.....	217
500 mcg/ml.....	30	<i>coal tar soln 20% .....</i>	172
<i>clonidine hcl tab 0.1 mg .....</i>	93	COARTEM TAB 20-120MG.....	98
<i>clonidine hcl tab 0.2 mg.....</i>	93	COCAINE HCL SOL 40MG/ML.....	243
<i>clonidine hcl tab 0.3 mg.....</i>	93	<i>codeine sulfate tab 30 mg .....</i>	32
<i>clonidine hcl tab er 12hr 0.1 mg.....</i>	15	CODEINE SULF TAB 15MG .....	32
<i>clonidine hcl tab er 24hr 0.17 mg (base</i>		CODEINE SULF TAB 60MG .....	32
equivalent) .....	93	COLAZAL CAP 750MG .....	193
<i>clonidine td patch weekly 0.1 mg/24hr</i>		<i>colchicine cap 0.6 mg .....</i>	198
.....	93	<i>colchicine tab 0.6 mg .....</i>	198
<i>clonidine td patch weekly 0.2 mg/24hr</i>		<i>colchicine w/ probenecid tab 0.5-500</i>	
.....	93	mg .....	198
<i>clonidine td patch weekly 0.3 mg/24hr</i>		COLCRYS TAB 0.6MG .....	198
.....	93	<i>colesevelam hcl packet for susp 3.75</i>	
<i>clopidogrel bisulfate tab 300 mg (base</i>		gm .....	87
equiv) .....	203	<i>colesevelam hcl tab 625 mg .....</i>	87
<i>clopidogrel bisulfate tab 75 mg (base</i>		COLESTID FLA GRA 5/7.5GM .....	87
equiv) .....	203	COLESTID FLA GRA 5GM .....	87
<i>clorazepate dipotassium tab 15 mg ..</i>	50	COLESTID GRA 5GM .....	87
<i>clorazepate dipotassium tab 3.75 mg</i>	50	COLESTID POW 5GM .....	87
<i>clorazepate dipotassium tab 7.5 mg</i>	50	COLESTID TAB 1GM .....	87
<i>clotrimazole cream 1% .....</i>	161	<i>colestipol hcl granule packets 5 gm ..</i>	87
<i>clotrimazole soln 1% .....</i>	161	<i>colestipol hcl granules 5 gm .....</i>	87
<i>clotrimazole troche 10 mg .....</i>	236	<i>colestipol hcl tab 1 gm.....</i>	87
<i>clotrimazole w/ betamethasone cream</i>		<i>colistimethate sod for inj 150 mg</i>	
1-0.05% .....	161	(colistin base activity) .....	47
<i>clotrimazole w/ betamethasone lotion</i>		COLOR CONDOM MIS + LUBE .....	215
1-0.05% .....	161	COLUMVI INJ 10/10ML.....	104
<i>clozapine orally disintegrating tab 100</i>		COLUMVI INJ 2.5MG .....	104
mg .....	123	COLY-MYCIN M INJ 150MG .....	47
<i>clozapine orally disintegrating tab 12.5</i>		COMBIGAN SOL 0.2/0.5% .....	247
mg .....	123	COMBIPATCH DIS.....	189

COMBIVENT AER 20-100.....	55	COREG CR CAP 10MG .....	133
COMBIVIR TAB 150-300.....	127	COREG CR CAP 20MG .....	133
COMETRIQ KIT 100MG.....	110	COREG CR CAP 40MG .....	133
COMETRIQ KIT 140MG.....	110	COREG CR CAP 80MG .....	133
COMETRIQ KIT 60MG.....	110	COREG TAB 12.5MG .....	133
COMFORT ASSU MIS LANC 28G.....	217	COREG TAB 25MG .....	133
COMFORT ASSU MIS LANC 33G.....	217	COREG TAB 3.125MG.....	133
COMFORTOUCH MIS LANCET .....	217	COREG TAB 6.25MG .....	133
COMIRNATY INJ 30/0.3ML .....	279	<i>coremino tab 135mg</i> .....	268
COMPLERA TAB.....	127	<i>coremino tab 45mg</i> .....	268
COMPLETENATE CHW.....	239	<i>coremino tab 90mg</i> .....	268
COMPLETE NAT PAK DHA.....	239	CORGARD TAB 20MG .....	135
<i>compro sup 25mg</i> .....	124	CORGARD TAB 40MG .....	135
COMTAN TAB 200MG .....	117	CORGARD TAB 80MG .....	135
CO-NATAL FA TAB 29-1MG .....	238	CORIFACT KIT .....	199
CONCEPT DHA CAP.....	239	CORLANOR SOL 5MG/5ML .....	143
CONCEPT OB CAP.....	239	CORLANOR TAB 5MG .....	143
CONCERTA TAB 18MG .....	17	CORLANOR TAB 7.5MG .....	143
CONCERTA TAB 27MG .....	17	CORLOPAM INJ 10MG/ML .....	98
CONCERTA TAB 36MG .....	17	CORTEF TAB 10MG .....	153
CONCERTA TAB 54MG .....	17	CORTEF TAB 20MG .....	153
CONDOMS MIS .....	215	CORTEF TAB 5MG.....	153
CONDYLOX GEL 0.5% .....	169	CORTENEMA ENE 100MG.....	42
CONFIRM/MICR TES GLUCOSE .....	175	CORTIFOAM AER 90MG .....	42
CONJUPRI TAB 2.5MG.....	136	CORTISPORIN SUS -TC OTIC .....	254
CONSENSI TAB 10-200MG.....	136	CORTROPHIN GEL 80UNIT .....	182
CONSENSI TAB 2.5-200 .....	136	CORVERT INJ 1MG/10ML.....	52
CONSENSI TAB 5-200MG .....	136	<i>corvita 150 tab</i> .....	206
<i>constulose sol 10gm/15</i> .....	211	CORVITE 150 TAB .....	206
CONTOUR TES BLD GLUC .....	175	CORVITE FE TAB .....	206
CONTOUR TES NEXT.....	175	COSELA INJ 300MG .....	114
CONTRAVE TAB 8-90MG.....	15	COSENTYX INJ 150MG/ML .....	163
CONTROL AST TES .....	175	COSENTYX INJ 300DOSE.....	163
CONTROL TES.....	175	COSENTYX INJ 75MG/0.5 .....	163
CONZIP CAP 100MG .....	32	COSENTYX PEN INJ 150MG/ML.....	163
CONZIP CAP 200MG .....	32	COSENTYX PEN INJ 300DOSE .....	163
CONZIP CAP 300MG .....	32	COSMEGEN INJ 0.5MG .....	108
COOL BLOOD TES GLUCOSE .....	175	COSOPT PF SOL 2%-0.5%.....	247
COPAXONE INJ 20MG/ML .....	262	COSOPT SOL 22.3-6.8 .....	247
COPAXONE INJ 40MG/ML .....	262	COTELLIC TAB 20MG .....	110
COPIKTRA CAP 15MG.....	110	COTEMPLA XR TAB 17.3MG .....	17
COPIKTRA CAP 25MG.....	110	COTEMPLA XR TAB 25.9MG .....	17
CORDRAN 80X3 TAP 4MCG/CM.....	166	COTEMPLA XR TAB 8.6MG .....	17
CORDRAN CRE 0.025% .....	166	COUMADIN TAB 10MG .....	56
CORDRAN CRE 0.05%.....	166	COUMADIN TAB 1MG.....	56
CORDRAN LOT 0.05%.....	166	COUMADIN TAB 2.5MG .....	56
CORDRAN OIN 0.05%.....	166	COUMADIN TAB 2MG .....	56

COUMADIN TAB 3MG .....	56	CUTAQUIG SOL 8GM.....	254
COUMADIN TAB 4MG .....	56	CUVITRU INJ 2GM/10ML.....	254
COUMADIN TAB 5MG .....	56	CUVITRU INJ 4GM/20ML.....	255
COUMADIN TAB 6MG .....	56	CUVITRU INJ 8GM/40ML.....	255
COUMADIN TAB 7.5MG .....	56	CUVITRU SOL 1GM/5ML .....	255
COZAAR TAB 100MG .....	92	CUVPOSA SOL 1MG/5ML .....	274
COZAAR TAB 25MG .....	92	CUVRIOR TAB 300MG .....	231
COZAAR TAB 50MG .....	92	CVS ADVANCED TES GLUCOSE.....	175
CREON CAP 12000UNT.....	178	<i>cvs aspirin tab 81mg ec</i> .....	31
CREON CAP 24000UNT.....	178	CVS LANCETS MIS 21G .....	217
CREON CAP 3000UNIT .....	178	CVS LANCETS MIS 30G .....	217
CREON CAP 36000UNT.....	178	CVS LANCETS MIS 33G .....	217
CREON CAP 6000UNIT .....	178	CVS LANCETS MIS ORIGINAL.....	217
CRESEMBA CAP 186 MG.....	84	CVS LANCETS MIS THIN 26G .....	217
CRESEMBA INJ 372MG.....	84	CVS LANCETS MIS THIN 30G .....	217
CRESTOR TAB 10MG.....	88	CVS LANCETS MIS THIN 33G .....	217
CRESTOR TAB 20MG.....	88	<i>cvs nicotine dis 14mg/24h</i> .....	264
CRESTOR TAB 40MG.....	88	<i>cvs nicotine dis 21mg/24h</i> .....	264
CRESTOR TAB 5MG .....	88	<i>cvs nicotine dis 7mg/24hr</i> .....	264
CRINONE GEL 4% VAG .....	281	<i>cvs nicotine gum 2mg cinn</i> .....	264
CRINONE GEL 8% VAG .....	281	<i>cvs nicotine gum 2mgfruit</i> .....	264
CROFAB INJ.....	254	<i>cvs nicotine gum 2mg mint</i> .....	264
<i>cromolyn sodium ophth soln 4%</i> .....	252	<i>cvs nicotine gum 2mg orig</i> .....	264
<i>cromolyn sodium oral conc 100 mg/5ml</i>	192	<i>cvs nicotine gum 4mg</i> .....	264
<i>cromolyn sodium soln nebu 20 mg/2ml</i>	52	<i>cvs nicotine gum 4mg cinn</i> .....	264
<i>crotan lot 10%</i> .....	172	<i>cvs nicotine gum 4mgfruit</i> .....	264
CRYODOSE AER TA.....	169	<i>cvs nicotine gum 4mg mint</i> .....	264
<i>cryselle-28 tab 28 tabs</i> .....	147	<i>cvs nicotine gum 4mg orig</i> .....	264
CRYSVITA INJ 10MG/ML.....	185	<i>cvs nicotine loz 2mg</i> .....	264
CRYSVITA INJ 20MG/ML.....	185	<i>cvs nicotine loz 2mg mint</i> .....	264
CRYSVITA INJ 30MG/ML.....	185	<i>cvs nicotine loz 4mg cinn</i> .....	264
CUBICIN RF SOL 500MG .....	45	<i>cvs nicotine loz 4mg mint</i> .....	264
<i>cupric chloride inj 0.4 mg/ml</i>	231	<i>cyanocobalamin inj 1000 mcg/ml</i> ..	204
<i>(elemental)</i> .....	231	CYANOKIT INJ 5GM .....	81
CUPRIMINE CAP 250MG .....	231	<i>cyclobenzaprine hcl cap er 24hr 15 mg</i>	241
CURITY HYPER MIS 1/2 .....	173	<i>cyclobenzaprine hcl cap er 24hr 30 mg</i>	242
CURITY NAACL PAD 6 .....	173	.....	242
<i>curity salin sol 0.9% irr</i> .....	197	<i>cyclobenzaprine hcl tab 10 mg</i> .....	242
CUROSURF SUS 120/1.5 .....	267	<i>cyclobenzaprine hcl tab 5 mg</i> .....	242
CUROSURF SUS 240/3ML .....	267	<i>cyclobenzaprine hcl tab 7.5 mg</i> .....	242
CUTAQUIG SOL 1.65GM .....	254	CYCLOGYL SOL 0.5% OP .....	248
CUTAQUIG SOL 1GM.....	254	CYCLOGYL SOL 1% OP.....	248
CUTAQUIG SOL 2GM.....	254	CYCLOGYL SOL 2% OP.....	248
CUTAQUIG SOL 3.3GM.....	254	CYCLOMYDRIL SOL OP .....	248
CUTAQUIG SOL 4GM.....	254	<i>cyclopentolate hcl ophth soln 0.5%</i> .....	248
		<i>cyclopentolate hcl ophth soln 1%</i> ..	248

<i>cyclopentolate hcl ophth soln 2%</i> ...	248	CYTOMEL TAB 50MCG .....	270
CYCLOPHOSPHA INJ 2GM/10ML.....	100	CYTOMEL TAB 5MCG.....	270
CYCLOPHOSPHA INJ 500MG.....	100	CYTOTEC TAB 100MCG.....	277
<i>cyclophosphamide cap 25 mg</i> .....	100	CYTOTEC TAB 200MCG.....	277
<i>cyclophosphamide cap 50 mg</i> .....	100	CYTOTINE POW.....	246
<i>cyclophosphamide for inj 1 gm</i> .....	100	<i>cytra k gra crystals</i> .....	196
<i>cyclophosphamide for inj 2 gm</i> .....	100	<b>D</b>	
<i>cyclophosphamide for inj 500 mg</i> ...	100	D10W/NAACL INJ 0.2%.....	227
<i>cyclophosphamide iv soln 500</i>		D2.5W/NAACL INJ 0.45%.....	227
<i>mg/2.5ml (200 mg/ml)</i> .....	100	D5W/LYTES INJ #48.....	227
CYCLOPHOSPH INJ 1GM .....	100	D5W/NAACL INJ 0.3% .....	227
CYCLOPHOSPH TAB 25MG .....	100	<i>dabigatran etexilate mesylate cap 150</i>	
CYCLOPHOSPH TAB 50MG .....	100	<i>mg (etexilate base eq)</i> .....	59
<i>cycloserine cap 250 mg</i> .....	99	<i>dabigatran etexilate mesylate cap 75</i>	
CYCLOSET TAB 0.8MG .....	76	<i>mg (etexilate base eq)</i> .....	59
<i>cyclosporine (ophth) emulsion 0.05%</i>		<i>dacarbazine for inj 100 mg</i> .....	114
.....	250	<i>dacarbazine for inj 200 mg</i> .....	114
<i>cyclosporine cap 100 mg</i> .....	233	<i>dactinomycin for inj 0.5 mg</i> .....	108
<i>cyclosporine cap 25 mg</i> .....	233	<i>dalfampridine tab er 12hr 10 mg</i> ...	262
<i>cyclosporine iv soln 50 mg/ml</i> .....	233	DALIRESP TAB 250MCG .....	53
<i>cyclosporine modified cap 100 mg</i> ..	233	DALIRESP TAB 500MCG .....	53
<i>cyclosporine modified cap 25 mg</i> ....	233	DALVANCE SOL 500MG .....	45
<i>cyclosporine modified cap 50 mg</i> ....	233	<i>danazol cap 100 mg</i> .....	41
<i>cyclosporine modified oral soln 100</i>		<i>danazol cap 200 mg</i> .....	41
<i>mg/ml</i> .....	233	<i>danazol cap 50 mg</i> .....	41
CYKLOKAPRON INJ 100MG/ML .....	207	DANTRIUM CAP 25MG .....	242
CYLTEZO INJ 10/0.2ML.....	21	DANTRIUM IV INJ 20MG.....	242
CYLTEZO INJ 20/0.4ML.....	21	<i>dantrolene sodium cap 100 mg</i> .....	243
CYLTEZO INJ 40/0.8ML.....	21	<i>dantrolene sodium cap 25 mg</i> .....	242
CYMBALTA CAP 20MG .....	70	<i>dantrolene sodium cap 50 mg</i> .....	242
CYMBALTA CAP 30MG .....	70	<i>dantrolene sodium for iv soln 20 mg</i>	
CYMBALTA CAP 60MG .....	70	.....	243
<i>cyproheptadine hcl syrup 2 mg/5ml</i> ..	86	<i>dapsone gel 5%</i> .....	158
<i>cyproheptadine hcl tab 4 mg</i> .....	86	<i>dapsone gel 7.5%</i> .....	158
CYRAMZA INJ 100/10ML.....	103	<i>dapsone tab 100 mg</i> .....	46
CYRAMZA INJ 500/50ML.....	103	<i>dapsone tab 25 mg</i> .....	46
<i>cyred eq tab</i> .....	147	DAPTACEL INJ.....	274
<i>cyred tab</i> .....	147	<i>daptomycin for iv soln 350 mg</i> .....	45
CYSTADANE POW .....	185	<i>daptomycin for iv soln 500 mg</i> .....	45
CYSTAGON CAP 150MG .....	196	DAPTOMYCIN SOL 350MG .....	45
CYSTAGON CAP 50MG.....	196	DAPTOMYCIN SOL 500MG .....	45
CYSTARAN SOL 0.44%.....	252	DARAPRIM TAB 25MG .....	99
<i>cytarabine inj 20 mg/ml</i> .....	102	<i>darifenacin hydrobromide tab er 24hr</i>	
<i>cytarabine inj pf 100 mg/ml</i> .....	102	<i>15 mg (base equiv)</i> .....	278
<i>cytarabine inj pf 20 mg/ml</i> .....	102	<i>darifenacin hydrobromide tab er 24hr</i>	
CYTOGAM INJ .....	255	<i>7.5 mg (base equiv)</i> .....	278
CYTOMEL TAB 25MCG .....	270	DARTISLA ODT TAB 1.7MG .....	274

DARZALEX SOL 100MG/5M .....	104	DELFLEX-SM/ SOL 1.5% DEX .....	235
DARZALEX SOL 400MG/20.....	104	DELFLEX-SM/ SOL 2.5% DEX .....	235
<i>dasetta tab 1/35 .....</i>	<i>147</i>	DELSTRIGO TAB.....	127
<i>dasetta tab 7/7/7 .....</i>	<i>147</i>	<i>delyla tab 0.1-0.02 .....</i>	<i>147</i>
<i>daunorubicin hcl iv soln 20 mg/4ml</i>		DELZICOL CAP 400MG .....	193
<i>(base equiv) .....</i>	<i>108</i>	<i>demeclocycline hcl tab 150 mg.....</i>	<i>268</i>
DAUNORUBICIN INJ 20MG/4ML.....	108	<i>demeclocycline hcl tab 300 mg.....</i>	<i>268</i>
DAUNORUBICIN INJ 50MG.....	108	DEMEROL INJ 100MG/ML .....	32
DAURISMO TAB 100MG .....	106	DEMEROL INJ 25MG/ML .....	32
DAURISMO TAB 25MG.....	106	DEMEROL INJ 50MG/ML .....	32
DAYAVITE TAB.....	237	DEMEROL INJ 75MG/ML .....	32
DAYBUE SOL 200MG/ML.....	245	DEMSER CAP 250MG .....	91
DAYPRO TAB 600MG.....	26	DENAVIR CRE 1% .....	164
<i>daysee tab .....</i>	<i>147</i>	DENGVAIXIA SUS .....	279
DAYTRANA DIS 10MG/9HR.....	17	DEPAKOTE ER TAB 250MG.....	67
DAYTRANA DIS 15MG/9HR.....	17	DEPAKOTE ER TAB 500MG.....	67
DAYTRANA DIS 20MG/9HR.....	17	DEPAKOTE SPR CAP 125MG.....	67
DAYTRANA DIS 30MG/9HR.....	17	DEPAKOTE TAB 125MG DR .....	67
DAYVIGO TAB 10MG .....	210	DEPAKOTE TAB 250MG DR .....	67
DAYVIGO TAB 5MG.....	210	DEPAKOTE TAB 500MG DR .....	67
D-CARE BLOOD TES GLUCOSE .....	175	DEPEN TITRA TAB 250MG.....	231
DDAVP INJ 4MCG/ML .....	187	DEPO-ESTRADI INJ 5MG/ML .....	189
DDAVP TAB 0.1MG .....	187	DEPO-MEDROL INJ 20MG/ML .....	153
DDAVP TAB 0.2MG .....	187	DEPO-MEDROL INJ 40MG/ML .....	153
<i>deblitane tab 0.35mg.....</i>	<i>152</i>	DEPO-MEDROL INJ 80MG/ML .....	153
<i>decitabine for inj 50 mg .....</i>	<i>102</i>	DEPO-PROVERA INJ 150MG/ML .....	152
<i>deferasirox granules packet 180 mg .80</i>	<i>.80</i>	DEPO-SQ PROV INJ 104 .....	152
<i>deferasirox granules packet 360 mg .80</i>	<i>.80</i>	<i>depo-testost inj 100mg/ml .....</i>	<i>41</i>
<i>deferasirox granules packet 90 mg ...80</i>	<i>80</i>	<i>depo-testost inj 200mg/ml .....</i>	<i>41</i>
<i>deferasirox tab 180 mg.....</i>	<i>81</i>	DERMACINRX CAP PROBISOL .....	80
<i>deferasirox tab 360 mg.....</i>	<i>81</i>	DERMACINRX TAB RIBOT-E .....	237
<i>deferasirox tab 90 mg .....</i>	<i>81</i>	DERMA-SMOOTH OIL /FS BODY.....	166
<i>deferasirox tab for oral susp 125 mg 81</i>	<i>81</i>	DERMA-SMOOTH OIL /FS SCLP .....	166
<i>deferasirox tab for oral susp 250 mg 81</i>	<i>81</i>	<i>dermazene cre 1-1% .....</i>	<i>161</i>
<i>deferasirox tab for oral susp 500 mg 81</i>	<i>81</i>	DERMOTIC OIL 0.01% .....	254
<i>deferiprone tab 1000 mg.....</i>	<i>81</i>	DESCOVY TAB 120-15MG .....	127
<i>deferiprone tab 500 mg .....</i>	<i>81</i>	DESCOVY TAB 200/25MG .....	127
<i>deferoxamine mesylate for inj 2 gm..81</i>	<i>81</i>	DESFERAL INJ 500MG.....	81
<i>deferoxamine mesylate for inj 500 mg</i>		<i>desflurane inhal soln.....</i>	<i>196</i>
.....	81	<i>desipramine hcl tab 100 mg .....</i>	<i>72</i>
DEFITELIO INJ 200/2.5 .....	204	<i>desipramine hcl tab 10 mg .....</i>	<i>72</i>
DELESTROGEN INJ 10MG/ML .....	189	<i>desipramine hcl tab 150 mg .....</i>	<i>72</i>
DELESTROGEN INJ 20MG/ML .....	189	<i>desipramine hcl tab 25 mg .....</i>	<i>72</i>
DELESTROGEN INJ 40MG/ML .....	189	<i>desipramine hcl tab 50 mg .....</i>	<i>72</i>
DELFLEX-LC/ SOL 2.5% DEX.....	235	<i>desipramine hcl tab 75 mg .....</i>	<i>72</i>
DELFLEX-LC/ SOL 4.25 DEX.....	235	<i>desloratadine tab 5 mg .....</i>	<i>85</i>
DELFLEX-LC SOL 1.5% DEX.....	235		

<i>desloratadine tab orally disintegrating</i> 2.5 mg.....	85	<i>dexamethasone sodium phosphate inj</i> 10 mg/ml .....	153
<i>desloratadine tab orally disintegrating</i> 5 mg .....	85	<i>dexamethasone sodium phosphate inj</i> 120 mg/30ml.....	153
<i>desmopressin acetate inj 4 mcg/ml.</i>	187	<i>dexamethasone sodium phosphate inj</i> 20 mg/5ml .....	153
<i>desmopressin acetate nasal spray soln</i> 0.01% .....	187	<i>dexamethasone sodium phosphate inj</i> 4 mg/ml.....	153
<i>desmopressin acetate nasal spray soln</i> 0.01% (refrigerated).....	187	<i>dexamethasone sodium phosphate</i> ophth soln 0.1%.....	250
<i>desmopressin acetate preservative free</i> (pf) inj 4 mcg/ml.....	187	<i>dexamethasone sod phosphate</i> preservative free inj 10 mg/ml ....	153
<i>desmopressin acetate tab 0.1 mg ...</i>	187	<i>dexamethasone soln 0.5 mg/5ml....</i>	153
<i>desmopressin acetate tab 0.2 mg ...</i>	187	<i>dexamethasone tab 0.5 mg .....</i>	153
<i>desogest-eth estrad &amp; eth estrad tab</i> 0.15-0.02/0.01 mg(21/5) .....	147	<i>dexamethasone tab 0.75 mg .....</i>	153
<i>desogestrel &amp; ethinyl estradiol tab 0.15</i> mg-30 mcg.....	147	<i>dexamethasone tab 1.5 mg .....</i>	153
<i>desonide cream 0.05% .....</i>	166	<i>dexamethasone tab 1 mg .....</i>	153
<i>desonide gel 0.05%.....</i>	166	<i>dexamethasone tab 2 mg .....</i>	153
<i>desonide lotion 0.05% .....</i>	166	<i>dexamethasone tab 4 mg .....</i>	153
<i>desonide oint 0.05%.....</i>	166	<i>dexamethasone tab 6 mg .....</i>	153
<i>DESOWEN CRE 0.05% .....</i>	166	<i>dexamethasone tab therapy pack 1.5</i> mg (21) .....	153
<i>desoximetasone cream 0.05% .....</i>	166	<i>dexamethasone tab therapy pack 1.5</i> mg (35) .....	153
<i>desoximetasone cream 0.25% .....</i>	166	<i>dexamethasone tab therapy pack 1.5</i> mg (51) .....	153
<i>desoximetasone gel 0.05%.....</i>	166	<i>DEXAMETHASON SUS 8-4MG/ML....</i>	153
<i>desoximetasone oint 0.05%.....</i>	166	<i>DEXAMETHASON SUS 8MG/ML.....</i>	153
<i>desoximetasone oint 0.25%.....</i>	166	<i>DEXAMETH LA INJ 16MG/ML.....</i>	153
<i>desoximetasone spray 0.25% .....</i>	166	<i>DEXAMETH PHO INJ 10MG/ML.....</i>	153
<i>DESODYN TAB 5MG .....</i>	13	<i>DEXAMETH PHO INJ 4MG/ML .....</i>	153
<i>desrx gel 0.05%.....</i>	166	<i>DEXATRAN CAP.....</i>	237
<i>desvenlafaxine succinate tab er 24hr</i> 100 mg (base equiv) .....	71	<i>dexchlorpheniramine maleate oral soln</i> 2 mg/5ml.....	85
<i>desvenlafaxine succinate tab er 24hr</i> 25 mg (base equiv) .....	70	<i>DEXCOM G5 MIS RECEIVER .....</i>	217
<i>desvenlafaxine succinate tab er 24hr</i> 50 mg (base equiv) .....	71	<i>DEXCOM G5 MIS TRANSMIT.....</i>	217
<i>DESVENLAFAX TAB 100MG ER .....</i>	70	<i>DEXCOM G6 MIS RECEIVER .....</i>	217
<i>DESVENLAFAX TAB 50MG ER .....</i>	70	<i>DEXCOM G6 MIS SENSOR .....</i>	217
<i>DETROL LA CAP 2MG .....</i>	278	<i>DEXCOM G6 MIS TRANSMIT.....</i>	218
<i>DETROL LA CAP 4MG .....</i>	278	<i>DEXCOM G7 MIS RECEIVER .....</i>	218
<i>DETROL TAB 1MG.....</i>	278	<i>DEXCOM G7 MIS SENSOR .....</i>	218
<i>DETROL TAB 2MG.....</i>	278	<i>DEXEDRINE CAP 10MG CR.....</i>	13
<i>DEXAMETHASON CON 1MG/ML.....</i>	153	<i>DEXEDRINE CAP 15MG CR.....</i>	13
<i>dexamethasone elixir 0.5 mg/5ml...153</i>		<i>DEXERYL CRE .....</i>	170
<i>dexamethasone sodium phosphate inj</i> 100 mg/10ml .....	153	<i>DEXILANT CAP 30MG DR.....</i>	276
		<i>DEXILANT CAP 60MG DR.....</i>	276



<i>dexlansoprazole cap delayed release 30 mg</i> .....	276	<i>dextroamphetamine sulfate cap er 24hr 5 mg</i> .....	13
<i>dexlansoprazole cap delayed release 60 mg</i> .....	276	<i>dextroamphetamine sulfate oral solution 5 mg/5ml</i> .....	13
DEXMEDE/NAACL INJ 20/5ML .....	209	<i>dextroamphetamine sulfate tab 10 mg</i> .....	13
<i>dexmedetomidine hcl in nacl 0.9% iv soln 200 mcg/50ml</i> .....	209	<i>dextroamphetamine sulfate tab 15 mg</i> .....	13
<i>dexmedetomidine hcl in nacl 0.9% iv soln 400 mcg/100ml</i> .....	209	<i>dextroamphetamine sulfate tab 20 mg</i> .....	13
<i>dexmedetomidine hcl in nacl 0.9% iv soln 80 mcg/20ml</i> .....	209	<i>dextroamphetamine sulfate tab 30 mg</i> .....	13
<i>dexmedetomidine hcl iv soln 200 mcg/2ml</i> .....	209	<i>dextroamphetamine sulfate tab 5 mg</i> 13	
<i>dexmethylphenidate hcl cap er 24 hr 10 mg</i> .....	17	<i>dextrose 10% w/ sodium chloride 0.45%</i> .....	228
<i>dexmethylphenidate hcl cap er 24 hr 15 mg</i> .....	17	<i>dextrose 2.5% w/ sodium chloride 0.45%</i> .....	227
<i>dexmethylphenidate hcl cap er 24 hr 20 mg</i> .....	17	<i>dextrose 5% in lactated ringers</i> .....	228
<i>dexmethylphenidate hcl cap er 24 hr 25 mg</i> .....	17	<i>dextrose 5% w/ sodium chloride 0.2%</i> .....	228
<i>dexmethylphenidate hcl cap er 24 hr 30 mg</i> .....	17	<i>dextrose 5% w/ sodium chloride 0.225%</i> .....	228
<i>dexmethylphenidate hcl cap er 24 hr 35 mg</i> .....	17	<i>dextrose 5% w/ sodium chloride 0.3%</i> .....	228
<i>dexmethylphenidate hcl cap er 24 hr 40 mg</i> .....	17	<i>dextrose 5% w/ sodium chloride 0.33%</i> .....	228
<i>dexmethylphenidate hcl cap er 24 hr 5 mg</i> .....	17	<i>dextrose 5% w/ sodium chloride 0.45%</i> .....	228
<i>dexmethylphenidate hcl tab 10 mg</i> ...17		<i>dextrose 5% w/ sodium chloride 0.9%</i> .....	228
<i>dexmethylphenidate hcl tab 2.5 mg</i> ..17		<i>dextrose inj 10%</i> .....	245
<i>dexmethylphenidate hcl tab 5 mg</i> .....17		DEXTROSE INJ 20% .....	245
DEXONTO 0.4% SOL 20MG/5ML.....153		<i>dextrose inj 25%</i> .....	245
<i>dexpak pak 10 day</i> .....	153	DEXTROSE INJ 25% .....	245
<i>dexpak pak 13 day</i> .....	153	DEXTROSE INJ 30% .....	246
<i>dexpak pak 6 day</i> .....	153	DEXTROSE INJ 40% .....	246
DEXPANTHENOL INJ 250MG/ML.....192		<i>dextrose inj 5%</i> .....	245
<i>dexrazoxane hcl for inj 250 mg (base equivalent)</i> .....	114	<i>dextrose inj 50%</i> .....	246
<i>dexrazoxane hcl for inj 500 mg (base equivalent)</i> .....	114	DEXTROSE INJ 50% .....	246
DEXTENZA MIS 0.4MG .....	250	<i>dextrose inj 70%</i> .....	246
<i>dextroamphetamine sulfate cap er 24hr 10 mg</i> .....	13	DEXYCU SUS 9%.....	250
<i>dextroamphetamine sulfate cap er 24hr 15 mg</i> .....	13	DHIVY TAB 25-100MG.....	118
		DIACOMIT CAP 250MG.....	61
		DIACOMIT CAP 500MG.....	61
		DIACOMIT PAK 250MG.....	61
		DIACOMIT PAK 500MG.....	61
		DIALYVITE TAB SUPREM D.....	237

DIANEAL PD-2 SOL 1.5% DEX.....	235	<i>diclofenac w/ misoprostol tab delayed</i>	
DIANEAL PD-2 SOL 2.5% DEX.....	235	<i>release 50-0.2 mg</i> .....	26
DIANEAL PD-2 SOL 4.25%DEX.....	235	<i>diclofenac w/ misoprostol tab delayed</i>	
DIANEAL SOL LOW CALC.....	235	<i>release 75-0.2 mg</i> .....	26
DIASTAT ACDL GEL 12.5-20 .....	60	DICLOFONO GEL 1.6%.....	160
DIASTAT ACDL GEL 5-10MG .....	60	<i>dicloxacillin sodium cap 250 mg</i> ....	258
DIASTAT PED GEL 2.5M GEL.....	60	<i>dicloxacillin sodium cap 500 mg</i> ....	258
DIATHRIVE MIS UT 30G .....	218	<i>dicyclomine hcl cap 10 mg</i> .....	274
DIATRUE PLUS TES STRIPS .....	175	<i>dicyclomine hcl inj 10 mg/ml</i> .....	274
<i>diazepam conc 5 mg/ml</i> .....	50	<i>dicyclomine hcl oral soln 10 mg/5ml</i>	
DIAZEPAM INJ 10MG/2ML .....	50	.....	274
DIAZEPAM INJ 5MG/ML.....	50	<i>dicyclomine hcl tab 20 mg</i> .....	274
<i>diazepam inj 5 mg/ml</i> .....	50	<i>diethylpropion hcl tab 25 mg</i> .....	15
<i>diazepam oral soln 1 mg/ml</i> .....	50	<i>diethylpropion hcl tab er 24hr 75 mg</i>	15
<i>diazepam rectal gel delivery system 10</i>		DIFFERIN CRE 0.1% .....	158
<i>mg</i> .....	60	DIFFERIN GEL 0.3% .....	159
<i>diazepam rectal gel delivery system 2.5</i>		DIFFERIN LOT 0.1% .....	159
<i>mg</i> .....	60	DIFICID SUS .....	215
<i>diazepam rectal gel delivery system 20</i>		DIFICID TAB 200MG .....	215
<i>mg</i> .....	60	<i>diflorasone diacetate cream 0.05%</i> .	166
<i>diazepam tab 10 mg</i> .....	50	<i>diflorasone diacetate oint 0.05%</i> ....	166
<i>diazepam tab 2 mg</i> .....	50	DIFLUCAN SUS 10MG/ML .....	84
<i>diazepam tab 5 mg</i> .....	50	DIFLUCAN SUS 40MG/ML .....	84
<i>diazoxide susp 50 mg/ml</i> .....	76	DIFLUCAN TAB 100MG.....	84
DIBENZYLINE CAP 10MG.....	91	DIFLUCAN TAB 150MG.....	84
DICLEGIS TAB 10-10MG .....	83	DIFLUCAN TAB 200MG.....	84
<i>diclofenac epolamine patch 1.3%</i> ...	160	DIFLUCAN TAB 50MG.....	84
<i>diclofenac potassium (migraine) packet</i>		<i>diflunisal tab 500 mg</i> .....	31
<i>50 mg</i> .....	226	<i>difluprednate ophth emulsion 0.05%</i>	
<i>diclofenac potassium tab 25 mg</i> .....	26	.....	250
<i>diclofenac potassium tab 50 mg</i> .....	26	DIGIFAB INJ 40MG.....	81
<i>diclofenac sodium (actinic keratoses)</i>		<i>digitek tab 0.125mg</i> .....	139
<i>gel 3%</i> .....	162	<i>digitek tab 0.25mg</i> .....	139
<i>diclofenac sodium gel 1% (1.16%</i>		<i>digoxin inj 0.25 mg/ml</i> .....	139
<i>diethylamine equiv)</i> .....	160	<i>digoxin oral soln 0.05 mg/ml</i> .....	139
<i>diclofenac sodium ophth soln 0.1%</i> .	252	<i>digoxin tab 125 mcg (0.125 mg)</i> ....	140
<i>diclofenac sodium soln 1.5%</i> .....	160	<i>digoxin tab 250 mcg (0.25 mg)</i> .....	140
<i>diclofenac sodium soln 2%</i> .....	160	<i>digoxin tab 62.5 mcg (0.0625 mg)</i> .	139
<i>diclofenac sodium tab delayed release</i>		<i>dihydroergotamine mesylate inj 1</i>	
<i>25 mg</i> .....	26	<i>mg/ml</i> .....	225
<i>diclofenac sodium tab delayed release</i>		<i>dihydroergotamine mesylate nasal</i>	
<i>50 mg</i> .....	26	<i>spray 4 mg/ml</i> .....	225
<i>diclofenac sodium tab delayed release</i>		DILANTIN-125 SUS 125/5ML .....	66
<i>75 mg</i> .....	26	DILANTIN CAP 100MG .....	66
<i>diclofenac sodium tab er 24hr 100 mg</i>		DILANTIN CAP 30MG .....	66
.....	26	DILANTIN CHW 50MG.....	66
		DILAUDID INJ 0.2MG/ML.....	32

DILAUDID INJ 1MG/ML .....	32	<i>diltiazem hcl tab er 24hr 360 mg</i> ....	137
DILAUDID INJ 2MG/ML .....	32	<i>diltiazem hcl tab er 24hr 420 mg</i> ....	137
DILAUDID LIQ 1MG/ML .....	32	DILTIAZEM INJ 100MG .....	137
DILAUDID TAB 2MG .....	32	<i>dilt-xr cap 120mg</i> .....	136
DILAUDID TAB 4MG .....	32	<i>dilt-xr cap 180mg</i> .....	136
DILAUDID TAB 8MG .....	32	<i>dilt-xr cap 240mg</i> .....	136
<i>diltiazem hcl cap er 12hr 120 mg</i> ....	137	DIMENHYDRIN INJ 50MG/ML .....	82
<i>diltiazem hcl cap er 12hr 60 mg</i> ....	136	<i>dimethyl fumarate capsule delayed</i>	
<i>diltiazem hcl cap er 12hr 90 mg</i> ....	137	<i>release 120 mg</i> .....	262
<i>diltiazem hcl cap er 24hr 120 mg</i> ....	137	<i>dimethyl fumarate capsule delayed</i>	
<i>diltiazem hcl cap er 24hr 180 mg</i> ....	137	<i>release 240 mg</i> .....	262
<i>diltiazem hcl cap er 24hr 240 mg</i> ....	137	<i>dimethyl fumarate capsule dr starter</i>	
<i>diltiazem hcl coated beads cap er 24hr</i>		<i>pack 120 mg &amp; 240 mg</i> .....	262
<i>120 mg</i> .....	137	DIOVAN HCT TAB 160-12.5 .....	95
<i>diltiazem hcl coated beads cap er 24hr</i>		DIOVAN HCT TAB 160-25MG .....	95
<i>180 mg</i> .....	137	DIOVAN HCT TAB 320-12.5 .....	95
<i>diltiazem hcl coated beads cap er 24hr</i>		DIOVAN HCT TAB 320-25MG .....	95
<i>240 mg</i> .....	137	DIOVAN HCT TAB 80/12.5 .....	95
<i>diltiazem hcl coated beads cap er 24hr</i>		DIOVAN TAB 160MG .....	92
<i>300 mg</i> .....	137	DIOVAN TAB 320MG .....	92
<i>diltiazem hcl coated beads cap er 24hr</i>		DIOVAN TAB 40MG .....	92
<i>360 mg</i> .....	137	DIOVAN TAB 80MG .....	92
<i>diltiazem hcl extended release beads</i>		DIP/TET PED INJ 25-5LFU .....	274
<i>cap er 24hr 120 mg</i> .....	137	DIPENTUM CAP 250MG .....	193
<i>diltiazem hcl extended release beads</i>		<i>diphen elx 12.5/5ml</i> .....	85
<i>cap er 24hr 180 mg</i> .....	137	<i>diphenhydramine hcl elixir 12.5</i>	
<i>diltiazem hcl extended release beads</i>		<i>mg/5ml</i> .....	85
<i>cap er 24hr 240 mg</i> .....	137	<i>diphenhydramine hcl inj 50 mg/ml</i> ...	85
<i>diltiazem hcl extended release beads</i>		<i>diphenoxylate w/ atropine liq 2.5-0.025</i>	
<i>cap er 24hr 300 mg</i> .....	137	<i>mg/5ml</i> .....	80
<i>diltiazem hcl extended release beads</i>		<i>diphenoxylate w/ atropine tab 2.5-</i>	
<i>cap er 24hr 360 mg</i> .....	137	<i>0.025 mg</i> .....	80
<i>diltiazem hcl extended release beads</i>		DIPRIVAN INJ .....	195
<i>cap er 24hr 420 mg</i> .....	137	DIPRIVAN INJ 100/10ML .....	195
<i>diltiazem hcl iv soln 125 mg/25ml (5</i>		DIPRIVAN INJ 200/20ML .....	195
<i>mg/ml)</i> .....	137	DIPRIVAN INJ 500/50ML .....	195
<i>diltiazem hcl iv soln 25 mg/5ml (5</i>		DIPROLENE OIN 0.05% .....	166
<i>mg/ml)</i> .....	137	<i>dipyridamole tab 25 mg</i> .....	203
<i>diltiazem hcl iv soln 50 mg/10ml (5</i>		<i>dipyridamole tab 50 mg</i> .....	203
<i>mg/ml)</i> .....	137	<i>dipyridamole tab 75 mg</i> .....	203
<i>diltiazem hcl tab 120 mg</i> .....	137	<i>disopyramide phosphate cap 100 mg</i> 51	
<i>diltiazem hcl tab 30 mg</i> .....	137	<i>disopyramide phosphate cap 150 mg</i> 51	
<i>diltiazem hcl tab 60 mg</i> .....	137	<i>disulfiram tab 250 mg</i> .....	259
<i>diltiazem hcl tab 90 mg</i> .....	137	<i>disulfiram tab 500 mg</i> .....	259
<i>diltiazem hcl tab er 24hr 180 mg</i> ....	137	DITROPAN XL TAB 10MG .....	278
<i>diltiazem hcl tab er 24hr 240 mg</i> ....	137	DITROPAN XL TAB 5MG .....	278
<i>diltiazem hcl tab er 24hr 300 mg</i> ....	137	DIURIL SUS 250/5ML .....	181

<i>divalproex sodium cap delayed release sprinkle 125 mg</i> .....	67	<i>dopamine hcl inj 40 mg/ml</i> .....	140
<i>divalproex sodium tab delayed release 125 mg</i> .....	67	DOPRAM INJ 20MG/ML.....	14
<i>divalproex sodium tab delayed release 250 mg</i> .....	67	DOPTLET TAB 20MG.....	205
<i>divalproex sodium tab delayed release 500 mg</i> .....	67	DORAL TAB 15MG .....	209
<i>divalproex sodium tab er 24 hr 250 mg</i> .....	67	DORYX MPC TAB 120MG.....	268
<i>divalproex sodium tab er 24 hr 500 mg</i> .....	67	DORYX TAB 200MG.....	268
DIVIGEL GEL 0.25MG.....	190	DORYX TAB 50MG .....	268
DIVIGEL GEL 0.5MG .....	189	DORYX TAB 80MG .....	268
DIVIGEL GEL 0.75MG.....	190	DORZOL/TIMOL SOL 22.3-6.8 .....	247
DIVIGEL GEL 1.25MG.....	190	<i>dorzolamide hcl ophth soln 2%</i> .....	252
DIVIGEL GEL 1MG/GM .....	190	<i>dorzolamide hcl-timolol maleate ophth sol 22.3-6.8 mg/ml pf</i> .....	247
<i>dobutamine hcl inj 12.5 mg/ml</i> .....	140	<i>dorzolamide hcl-timolol maleate ophth soln 22.3-6.8 mg/ml</i> .....	247
<i>docetaxel for inj conc 160 mg/8ml (20 mg/ml)</i> .....	115	DORZOLAMIDE SOL 2% .....	252
<i>docetaxel for inj conc 20 mg/ml</i> .....	115	<i>dotti dis 0.025mg</i> .....	190
<i>docetaxel for inj conc 80 mg/4ml (20 mg/ml)</i> .....	115	<i>dotti dis 0.0375mg</i> .....	190
DOCETAXEL INJ 160/16ML .....	115	<i>dotti dis 0.05mg</i> .....	190
DOCETAXEL INJ 160/8ML .....	115	<i>dotti dis 0.075mg</i> .....	190
DOCETAXEL INJ 20MG/2ML.....	115	<i>dotti dis 0.1mg</i> .....	190
DOCETAXEL INJ 20MG/ML .....	115	DOVATO TAB 50-300MG.....	127
DOCETAXEL INJ 80MG/4ML.....	115	DOVONEX CRE 0.005% .....	163
DOCETAXEL INJ 80MG/8ML.....	115	<i>doxazosin mesylate tab 1 mg</i> .....	93
<i>docetaxel soln for iv infusion 160 mg/16ml</i> .....	115	<i>doxazosin mesylate tab 2 mg</i> .....	93
<i>docetaxel soln for iv infusion 20 mg/2ml</i> .....	115	<i>doxazosin mesylate tab 4 mg</i> .....	93
<i>docetaxel soln for iv infusion 80 mg/8ml</i> .....	115	<i>doxazosin mesylate tab 8 mg</i> .....	93
<i>dodex inj</i> .....	204	<i>doxepin hcl (sleep) tab 3 mg (base equiv)</i> .....	208
<i>dofetilide cap 125 mcg (0.125 mg)</i> ...	52	<i>doxepin hcl (sleep) tab 6 mg (base equiv)</i> .....	208
<i>dofetilide cap 250 mcg (0.25 mg)</i> .....	52	<i>doxepin hcl cap 100 mg</i> .....	72
<i>dofetilide cap 500 mcg (0.5 mg)</i> .....	52	<i>doxepin hcl cap 10 mg</i> .....	72
<i>dolishale tab 90-20mcg</i> .....	147	<i>doxepin hcl cap 150 mg</i> .....	72
<i>donepezil hydrochloride orally disintegrating tab 10 mg</i> .....	259	<i>doxepin hcl cap 25 mg</i> .....	72
<i>donepezil hydrochloride orally disintegrating tab 5 mg</i> .....	259	<i>doxepin hcl cap 50 mg</i> .....	72
<i>donepezil hydrochloride tab 10 mg</i> .	259	<i>doxepin hcl cap 75 mg</i> .....	72
<i>donepezil hydrochloride tab 23 mg</i> .	259	<i>doxepin hcl conc 10 mg/ml</i> .....	72
<i>donepezil hydrochloride tab 5 mg</i> ...	259	<i>doxepin hcl cream 5%</i> .....	162
		<i>doxercalciferol cap 0.5 mcg</i> .....	185
		<i>doxercalciferol cap 1 mcg</i> .....	185
		<i>doxercalciferol cap 2.5 mcg</i> .....	185
		<i>doxercalciferol inj 4 mcg/2ml (2 mcg/ml)</i> .....	185
		DOXIL INJ 20/10ML .....	108
		DOXIL INJ 50/25ML .....	108
		<i>doxorubicin hcl for inj 10 mg</i> .....	108
		<i>doxorubicin hcl for inj 50 mg</i> .....	108

<i>doxorubicin hcl inj 2 mg/ml</i> .....	108	DRIZALMA CAP 20MG DR .....	71
<i>doxorubicin hcl liposomal inj (for iv infusion) 2 mg/ml</i> .....	108	DRIZALMA CAP 30MG DR .....	71
<i>doxy 100 inj 100mg</i> .....	268	DRIZALMA CAP 40MG DR .....	71
<i>doxycycline (rosacea) cap delayed release 40 mg</i> .....	171	DRIZALMA CAP 60MG DR .....	71
<i>doxycycline hyclate cap 100 mg</i> .....	268	<i>dronabinol cap 10 mg</i> .....	83
<i>doxycycline hyclate cap 50 mg</i> .....	268	<i>dronabinol cap 2.5 mg</i> .....	83
<i>doxycycline hyclate for inj 100 mg</i> ..	268	<i>dronabinol cap 5 mg</i> .....	83
<i>doxycycline hyclate tab 100 mg</i> .....	268	<i>droperidol inj 2.5 mg/ml</i> .....	49
<i>doxycycline hyclate tab 150 mg</i> .....	268	DROPLET LANC MIS 30G .....	218
<i>doxycycline hyclate tab 20 mg</i> .....	268	<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i> .....	147
<i>doxycycline hyclate tab 50 mg</i> .....	268	<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i> .....	147
<i>doxycycline hyclate tab 75 mg</i> .....	268	<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg</i> .....	147
<i>doxycycline hyclate tab delayed release 100 mg</i> .....	268	<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i> .....	147
<i>doxycycline hyclate tab delayed release 150 mg</i> .....	268	DROXIA CAP 200MG .....	204
<i>doxycycline hyclate tab delayed release 200 mg</i> .....	268	DROXIA CAP 300MG .....	204
<i>doxycycline hyclate tab delayed release 50 mg</i> .....	268	DROXIA CAP 400MG .....	204
<i>doxycycline hyclate tab delayed release 75 mg</i> .....	268	<i>droxidopa cap 100 mg</i> .....	282
<i>doxycycline hyclate tab delayed release 80 mg</i> .....	268	<i>droxidopa cap 200 mg</i> .....	282
<i>doxycycline monohydrate cap 100 mg</i> .....	269	<i>droxidopa cap 300 mg</i> .....	282
<i>doxycycline monohydrate cap 150 mg</i> .....	269	DRYSOL SOL 20% .....	171
<i>doxycycline monohydrate cap 50 mg</i> .....	268	DSUVIA SUB 30MCG .....	32
<i>doxycycline monohydrate cap 75 mg</i> .....	268	DUAKLIR AER 400/12 .....	55
<i>doxycycline monohydrate for susp 25 mg/5ml</i> .....	269	DUAVEE TAB 0.45-20 .....	189
<i>doxycycline monohydrate tab 100 mg</i> .....	269	DUETACT TAB 30-2MG .....	73
<i>doxycycline monohydrate tab 150 mg</i> .....	269	DUETACT TAB 30-4MG .....	73
<i>doxycycline monohydrate tab 50 mg</i> .....	269	DUET DHA 400 MIS 25-1-400 .....	239
<i>doxycycline monohydrate tab 75 mg</i> .....	269	DUET DHA MIS BALANCED .....	239
<i>doxylamine-pyridoxine tab delayed release 10-10 mg</i> .....	83	DUEXIS TAB 800-26.6 .....	26
DRISDOL CAP 50000UNT .....	283	DULERA AER 100-5MCG .....	55
		DULERA AER 200-5MCG .....	55
		<i>duloxetine hcl enteric coated pellets cap 20 mg (base eq)</i> .....	71
		<i>duloxetine hcl enteric coated pellets cap 30 mg (base eq)</i> .....	71
		<i>duloxetine hcl enteric coated pellets cap 40 mg (base eq)</i> .....	71
		<i>duloxetine hcl enteric coated pellets cap 60 mg (base eq)</i> .....	71
		DUOBRII LOT .....	166
		DUO-CARE TES .....	175
		DUODOTE INJ .....	80

DUOPA SUS 4.63-20 .....	118	EASY TOUCH MIS LANC/23G .....	218
DUPIXENT INJ 100/0.67 .....	168	EASY TOUCH MIS LANC/26G .....	218
DUPIXENT INJ 200/1.14 .....	168	EASY TOUCH MIS LANC/28G .....	218
DUPIXENT INJ 200MG .....	168	EASY TOUCH MIS LANC/30G .....	218
DUPIXENT INJ 300/2ML .....	169	EASY TOUCH MIS LANC/32G .....	218
DURACLON INJ .....	30	EASY TOUCH MIS LANC/33G .....	218
DURAFIBER AG PAD 4 .....	173	EASY TOUCH TES GLUCOSE .....	175
<i>duramorph inj 0.5mg/ml</i> .....	32	EASY TOUCH TES STRIPS .....	175
<i>duramorph inj 1mg/ml</i> .....	32	EASY TRAK TES BLD GLUC .....	175
DUREX MIS REALFEEL .....	215	EC-NAPROSYN TAB 375MG .....	26
DUREZOL EMU 0.05% .....	251	EC-NAPROSYN TAB 500MG .....	26
DURLAZA CAP 162.5MG .....	203	<i>ec-naproxen tab 375mg</i> .....	26
DUROLANE INJ 60MG/3ML .....	243	<i>ec-naproxen tab 500mg</i> .....	26
<i>dutasteride cap 0.5 mg</i> .....	197	<i>econazole nitrate cream 1%</i> .....	161
<i>dutasteride-tamsulosin hcl cap 0.5-0.4</i>		<i>econtra ez tab 1.5mg</i> .....	151
<i>mg</i> .....	197	<i>econtra os tab 1.5mg</i> .....	151
DUTOPROL TAB 100-12.5 .....	95	<i>ecotrin low tab 81mg ec</i> .....	31
DUTOPROL TAB 25-12.5 .....	95	ECOZA AER 1% .....	161
DUTOPROL TAB 50-12.5 .....	95	EDARBI TAB 40MG .....	92
DW5-NACL INJ 0.225% .....	228	EDARBI TAB 80MG .....	92
DYANAVEL XR CHW 10MG .....	13	EDARBYCLOR TAB 40-12.5 .....	95
DYANAVEL XR CHW 15MG .....	13	EDARBYCLOR TAB 40-25MG .....	95
DYANAVEL XR CHW 20MG .....	13	EDECIN TAB 25MG .....	180
DYANAVEL XR CHW 5MG .....	13	EDETATE DISO INJ 150MG/ML .....	231
DYANAVEL XR SUS 2.5MG/ML .....	13	EDLUAR SUB 10MG .....	209
DYMISTA SPR 137-50 .....	243	EDLUAR SUB 5MG .....	209
DYRENIUM CAP 100MG .....	180	<i>ed-spaz tab 0.125mg</i> .....	274
DYRENIUM CAP 50MG .....	180	EDURANT TAB 25MG .....	127
DYSPORT INJ 300UNIT .....	245	<i>efavirenz cap 200 mg</i> .....	127
DYSPORT INJ 500UNIT .....	245	<i>efavirenz cap 50 mg</i> .....	127
<b>E</b>		<i>efavirenz-emtricitabine-tenofovir df tab</i>	
<i>e.e.s. 400 tab 400mg</i> .....	214	<i>600-200-300 mg</i> .....	127
E.E.S. GRAN SUS 200/5ML .....	214	<i>efavirenz-lamivudine-tenofovir df tab</i>	
EASY COMFORT MIS 30G .....	218	<i>400-300-300 mg</i> .....	127
EASY COMFORT MIS LANC/30G .....	218	<i>efavirenz-lamivudine-tenofovir df tab</i>	
EASYGLUCO TES .....	175	<i>600-300-300 mg</i> .....	127
EASYGLUCO TES PLUS .....	175	<i>efavirenz tab 600 mg</i> .....	127
EASYMAX 15 TES .....	175	EFFER-K TAB 10MEQ .....	230
EASYMAX TES .....	175	EFFER-K TAB 20MEQ .....	230
EASY PLUS II TES BLD GLUC .....	175	<i>effe-k tab 25meq ef</i> .....	230
EASYPLUS TES BLD GLUC .....	175	EFFEXOR XR CAP 150MG .....	71
EASYPRO PLUS TES .....	175	EFFEXOR XR CAP 37.5MG .....	71
EASYPRO TES BLD GLUC .....	175	EFFEXOR XR CAP 75MG .....	71
EASY STEP TES .....	175	EFFIENT TAB 10MG .....	203
EASY TALK TES BLD GLUC .....	175	EFFIENT TAB 5MG .....	203
EASY TOUCH MIS LANC/21G .....	218	EFUDEX CRE 5% .....	162
		EGRIFTA SV INJ 2MG .....	183

ELAPRASE INJ 6MG/3ML.....	185	EMBRACE LANC MIS THIN 30G.....	218
ELCYS INJ 50MG/ML .....	246	EMBRACE PRO TES .....	176
ELELYSO INJ 200UNIT.....	204	EMBRACE TES BLD GLUC.....	176
ELEMENT TES .....	175	EMCYT CAP 140MG .....	107
ELEMNT COMPA TES STRIPS .....	175	EMEND CAP 80MG.....	83
ELEPSIA XR TAB 1000MG .....	61	EMEND SOL 150MG.....	83
ELEPSIA XR TAB 1500MG .....	61	EMEND SUS 125MG.....	83
ELESTRIN GEL 0.06% .....	190	EMEND TRIPAC PAK 80 & 125 .....	83
ELESTONE CRE .....	170	EMFLAZA SUS 22.75/ML.....	154
<i>eletriptan hydrobromide tab 20 mg</i>		EMFLAZA TAB 18MG .....	154
<i>(base equivalent) .....</i>	<i>226</i>	EMFLAZA TAB 30MG .....	154
<i>eletriptan hydrobromide tab 40 mg</i>		EMFLAZA TAB 36MG .....	154
<i>(base equivalent) .....</i>	<i>226</i>	EMFLAZA TAB 6MG .....	154
ELIDEL CRE 1% .....	169	EMGALITY INJ 100MG/ML.....	225
ELIGARD INJ 22.5MG.....	107	EMGALITY INJ 120MG/ML.....	225
ELIGARD INJ 30MG.....	107	EMPAVELI INJ 1080MG.....	202
ELIGARD INJ 45MG.....	107	EMPLICITI INJ 300MG .....	104
ELIGARD INJ 7.5MG.....	107	EMPLICITI INJ 400MG .....	105
<i>elinest tab .....</i>	<i>147</i>	EMSAM DIS 12MG/24H .....	68
ELIQUIS ST P TAB 5MG.....	57	EMSAM DIS 6MG/24HR .....	68
ELIQUIS TAB 2.5MG .....	57	EMSAM DIS 9MG/24HR .....	68
ELIQUIS TAB 5MG .....	57	<i>emtricitabine caps 200 mg.....</i>	<i>127</i>
ELITEK INJ 1.5MG .....	114	<i>emtricitabine-tenofovir disoproxil</i>	
ELITEK INJ 7.5MG .....	114	<i>fumarate tab 100-150 mg.....</i>	<i>127</i>
<i>elite-ob tab .....</i>	<i>239</i>	<i>emtricitabine-tenofovir disoproxil</i>	
<i>elixophyllin elx 80/15ml .....</i>	<i>56</i>	<i>fumarate tab 133-200 mg.....</i>	<i>127</i>
ELLA TAB 30MG .....	151	<i>emtricitabine-tenofovir disoproxil</i>	
ELLEENCE INJ 2MG/ML .....	108	<i>fumarate tab 167-250 mg.....</i>	<i>128</i>
ELLIOTTS B INJ.....	228	<i>emtricitabine-tenofovir disoproxil</i>	
ELMIRON CAP 100MG .....	197	<i>fumarate tab 200-300 mg.....</i>	<i>128</i>
ELOCTATE INJ 1000UNIT.....	199	EMTRIVA CAP 200MG.....	128
ELOCTATE INJ 1500UNIT.....	199	EMTRIVA SOL 10MG/ML .....	128
ELOCTATE INJ 2000UNIT.....	199	EMULSION SB EMU.....	170
ELOCTATE INJ 250UNIT .....	199	EMVERM CHW 100MG.....	43
ELOCTATE INJ 3000UNIT.....	199	ENABLEX TAB 15MG .....	278
ELOCTATE INJ 4000UNIT.....	199	ENABLEX TAB 7.5MG .....	278
ELOCTATE INJ 5000UNIT.....	199	<i>enalaprilat iv inj 1.25 mg/ml.....</i>	<i>90</i>
ELOCTATE INJ 500UNIT .....	199	<i>enalapril maleate &amp; hydrochlorothiazide</i>	
ELOCTATE INJ 6000UNIT.....	199	<i>tab 10-25 mg .....</i>	<i>95</i>
ELOCTATE INJ 750UNIT .....	199	<i>enalapril maleate &amp; hydrochlorothiazide</i>	
ELREXFIO INJ 44/1.1ML .....	104	<i>tab 5-12.5 mg .....</i>	<i>95</i>
ELREXFIO INJ 76/1.9ML .....	104	<i>enalapril maleate oral soln 1 mg/ml..</i>	<i>90</i>
<i>eluryng mis .....</i>	<i>151</i>	<i>enalapril maleate tab 10 mg .....</i>	<i>90</i>
ELZONRIS SOL 1000MCG .....	114	<i>enalapril maleate tab 2.5 mg .....</i>	<i>90</i>
EMBRACE EVO TES .....	176	<i>enalapril maleate tab 20 mg .....</i>	<i>90</i>
EMBRACE LANC MIS 21G.....	218	<i>enalapril maleate tab 5 mg.....</i>	<i>90</i>
EMBRACE LANC MIS 28G.....	218	ENBRACE HR CAP.....	239

ENBREL INJ 25/0.5ML.....	29	<i>enulose sol 10gm/15</i> .....	194
ENBREL INJ 25MG .....	29	ENVARBUS XR TAB 0.75MG .....	233
ENBREL INJ 50MG/ML.....	29	ENVARBUS XR TAB 1MG.....	233
ENBREL MINI INJ 50MG/ML .....	29	ENVARBUS XR TAB 4MG.....	233
ENBREL SRCLK INJ 50MG/ML.....	29	EPANED SOL 1MG/ML .....	90
ENCARE SUP 100MG .....	281	EPCLUSA PAK 150-37.5.....	131
ENDARI POW 5GM.....	204	EPCLUSA PAK 200-50MG .....	131
<i>endocet tab 10-325mg</i> .....	39	EPCLUSA TAB 200-50MG .....	131
<i>endocet tab 2.5-325</i> .....	39	EPCLUSA TAB 400-100.....	131
<i>endocet tab 5-325mg</i> .....	39	EPHEDRINE SU INJ 50MG/ML.....	282
<i>endocet tab 7.5-325</i> .....	39	<i>ephedrine sulfat iv soln 50 mg/ml</i> .	282
ENDO DERMAL MIS 5X5 CM.....	173	EPICERAM EMU .....	170
ENDOMETRIN SUP 100MG .....	281	EPIDIOLEX SOL 100MG/ML.....	61
ENGERIX-B INJ 10/0.5ML .....	279	EPIDUO FORTE GEL 0.3-2.5% .....	159
ENGERIX-B INJ 20MCG/ML .....	279	EPIDUO GEL 0.1-2.5% .....	159
ENHERTU INJ 100MG .....	105	EPIFOAM AER 1%.....	166
ENJAYMO SOL.....	202	<i>epinastine hcl ophth soln 0.05%</i> ....	252
ENLITE GLUCO MIS SENSOR.....	218	EPINEPH/NACL SOL 2/250ML .....	282
<i>enoxaparin sodium inj 300 mg/3ml</i> ..	57	EPINEPHR/D5W INJ 100/10ML .....	282
<i>enoxaparin sodium inj soln pref syr 100</i>		EPINEPHR/D5W SOL 2/250-5% .....	282
<i>mg/ml</i> .....	58	<i>epinephrine hcl nasal soln 0.1%</i> ....	244
<i>enoxaparin sodium inj soln pref syr 120</i>		EPINEPHRINE INJ 0.1MG/10 .....	282
<i>mg/0.8ml</i> .....	58	EPINEPHRINE INJ 0.1MG/ML.....	282
<i>enoxaparin sodium inj soln pref syr 150</i>		EPINEPHRINE INJ 0.2MG .....	282
<i>mg/ml</i> .....	58	EPINEPHRINE INJ 1MG/10ML .....	282
<i>enoxaparin sodium inj soln pref syr 30</i>		EPINEPHRINE INJ 1MG/ML.....	282
<i>mg/0.3ml</i> .....	57	<i>epinephrine inj 30 mg/30ml (1 mg/ml)</i>	
<i>enoxaparin sodium inj soln pref syr 40</i>		<i>(1:1000)</i> .....	282
<i>mg/0.4ml</i> .....	57	<i>epinephrine solution auto-injector 0.15</i>	
<i>enoxaparin sodium inj soln pref syr 60</i>		<i>mg/0.15ml (1:1000)</i> .....	282
<i>mg/0.6ml</i> .....	57	<i>epinephrine solution auto-injector 0.15</i>	
<i>enoxaparin sodium inj soln pref syr 80</i>		<i>mg/0.3ml (1:2000)</i> .....	282
<i>mg/0.8ml</i> .....	58	<i>epinephrine solution auto-injector 0.3</i>	
<i>enpresse-28 tab</i> .....	147	<i>mg/0.3ml (1:1000)</i> .....	282
<i>enskyce tab</i> .....	147	EPIPEN 2-PAK INJ 0.3MG.....	282
ENSPRYNG INJ.....	233	EPIPEN-JR INJ 0.15MG.....	282
ENSTILAR AER .....	166	EPISIL LIQ .....	236
<i>entacapone tab 200 mg</i> .....	117	<i>epitol tab 200mg</i> .....	61
ENTADFI CAP 5-5MG.....	197	EPIVIR HBV SOL 5MG/ML .....	131
<i>entecavir tab 0.5 mg</i> .....	130	EPIVIR HBV TAB 100MG .....	131
<i>entecavir tab 1 mg</i> .....	130	EPIVIR SOL 10MG/ML .....	128
ENTEREG CAP 12MG .....	194	EPIVIR TAB 150MG.....	128
ENTRESTO TAB 24-26MG .....	141	EPIVIR TAB 300MG.....	128
ENTRESTO TAB 49-51MG .....	141	<i>eplerenone tab 25 mg</i> .....	98
ENTRESTO TAB 97-103MG.....	141	<i>eplerenone tab 50 mg</i> .....	98
ENTTY EMU SPRAY .....	170	EPOGEN INJ 10000/ML.....	205
ENTYVIO INJ 300MG.....	193	EPOGEN INJ 2000/ML .....	205



EPOGEN INJ 20000/ML.....	205	ERIVEDGE CAP 150MG.....	106
EPOGEN INJ 3000/ML .....	205	ERLEADA TAB 240MG .....	107
EPOGEN INJ 4000/ML .....	205	ERLEADA TAB 60MG .....	107
<i>epoprostenol sodium for inj 0.5 mg.</i>	142	<i>erlotinib hcl tab 100 mg (base</i>	
<i>epoprostenol sodium for inj 1.5 mg.</i>	142	<i>equivalent) .....</i>	106
EPSOLAY CRE 5%.....	159	<i>erlotinib hcl tab 150 mg (base</i>	
<i>eptifibatide iv soln 200 mg/100ml (2</i>		<i>equivalent) .....</i>	106
<i>mg/ml) .....</i>	203	<i>erlotinib hcl tab 25 mg (base</i>	
<i>eptifibatide iv soln 20 mg/10ml (2</i>		<i>equivalent) .....</i>	106
<i>mg/ml) .....</i>	203	<i>errin tab 0.35mg .....</i>	152
<i>eptifibatide iv soln 75 mg/100ml (0.75</i>		ERTACZO CRE 2% .....	161
<i>mg/ml) .....</i>	203	<i>ertapenem sodium for inj 1 gm (base</i>	
EPZICOM TAB 600-300 .....	128	<i>equivalent).....</i>	44
<i>eq aspirin chw 81mg .....</i>	31	ERYGEL GEL 2%.....	159
<i>eq aspirin chw 81mg.....</i>	31	<i>ery pad 2% .....</i>	159
EQL LANCETS MIS 21G COLR.....	218	ERYPED SUS 200/5ML.....	214
EQL LANCETS MIS 33G COLR.....	218	ERYPED SUS 400/5ML.....	214
EQL LANCETS MIS THIN 26G .....	218	<i>ery-tab tab 250mg ec .....</i>	214
EQL LANCETS MIS THIN 30G .....	218	<i>ery-tab tab 333mg ec .....</i>	214
EQL TRUETEST TES BLD GLUC .....	176	<i>ery-tab tab 500mg ec .....</i>	214
<i>eq nicotine dis 14mg/24h .....</i>	264	<i>erythrocin inj 500mg .....</i>	214
<i>eq nicotine dis 21mg/24h .....</i>	264	ERYTHROCIN INJ 500MG.....	214
<i>eq nicotine dis 7mg/24hr.....</i>	264	<i>erythrocin tab 250mg .....</i>	214
<i>eq nicotine gum 2mg cinn .....</i>	264	<i>erythromycin ethylsuccinate for susp</i>	
<i>eq nicotine gum 2mgfruit .....</i>	264	<i>200 mg/5ml.....</i>	214
<i>eq nicotine gum 2mg mint.....</i>	264	<i>erythromycin ethylsuccinate for susp</i>	
<i>eq nicotine gum 4mg cinn .....</i>	264	<i>400 mg/5ml.....</i>	214
<i>eq nicotine gum 4mgfruit .....</i>	264	<i>erythromycin ethylsuccinate tab 400</i>	
<i>eq nicotine gum 4mg mint.....</i>	264	<i>mg .....</i>	215
<i>eq nicotine gum 4mg orig.....</i>	264	<i>erythromycin gel 2% .....</i>	159
<i>eq nicotine loz 2mg cinn.....</i>	264	<i>erythromycin lactobionate for inj 500</i>	
<i>eq nicotine loz 2mg mint .....</i>	264	<i>mg .....</i>	215
<i>eq nicotine loz 4mg cinn.....</i>	264	<i>erythromycin ophth oint 5 mg/gm ..</i>	249
<i>eq nicotine loz 4mg mint .....</i>	264	<i>erythromycin soln 2%.....</i>	159
EQUETRO CAP 100MG.....	120	<i>erythromycin tab 250 mg .....</i>	215
EQUETRO CAP 200MG.....	120	<i>erythromycin tab 500 mg .....</i>	215
EQUETRO CAP 300MG.....	120	<i>erythromycin tab delayed release 250</i>	
ERAXIS INJ 100MG.....	84	<i>mg .....</i>	215
ERAXIS INJ 50MG .....	84	<i>erythromycin tab delayed release 333</i>	
ERBITUX INJ 100MG .....	106	<i>mg .....</i>	215
ERBITUX INJ 200MG .....	106	<i>erythromycin tab delayed release 500</i>	
<i>ergocalciferol cap 1.25 mg (50000 unit)</i>		<i>mg .....</i>	215
<i>.....</i>	283	<i>erythromycin w/ delayed release</i>	
<i>ergoloid mesylates tab 1 mg .....</i>	263	<i>particles cap 250 mg.....</i>	215
ERGOMAR SUB 2MG .....	225	ESBRIET CAP 267MG .....	267
<i>ergotamine w/ caffeine tab 1-100 mg</i>		ESBRIET TAB 267MG .....	267
<i>.....</i>	225	ESBRIET TAB 801MG .....	267

<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i> .....	69	<i>estradiol tab 1 mg</i> .....	190
<i>escitalopram oxalate tab 10 mg (base equiv)</i> .....	69	<i>estradiol tab 2 mg</i> .....	190
<i>escitalopram oxalate tab 20 mg (base equiv)</i> .....	69	<i>estradiol td gel 0.25 mg/0.25gm (0.1%)</i> .....	190
<i>escitalopram oxalate tab 5 mg (base equiv)</i> .....	69	<i>estradiol td gel 0.5 mg/0.5gm (0.1%)</i> .....	190
<i>esgic cap</i> .....	30	<i>estradiol td gel 0.75 mg/0.75gm (0.1%)</i> .....	190
<i>ESGIC TAB</i> .....	30	<i>estradiol td gel 1.25 mg/1.25gm (0.1%)</i> .....	190
<i>ESKATA SOL 40%</i> .....	164	<i>estradiol td gel 1 mg/gm (0.1%)</i> ....	190
<i>esmolol hcl inj 100 mg/10ml</i> .....	134	<i>estradiol td patch twice weekly 0.025 mg/24hr</i> .....	190
<i>esmolol hcl-sodium chloride iv soln 2000 mg/100ml</i> .....	134	<i>estradiol td patch twice weekly 0.0375 mg/24hr</i> .....	190
<i>esmolol hcl-sodium chloride iv soln 2500 mg/250ml</i> .....	134	<i>estradiol td patch twice weekly 0.05 mg/24hr</i> .....	190
<i>ESMOLOL HCL SOL 2000/100</i> .....	134	<i>estradiol td patch twice weekly 0.075 mg/24hr</i> .....	190
<i>ESMOLOL HCL SOL 2500/250</i> .....	134	<i>estradiol td patch twice weekly 0.1 mg/24hr</i> .....	190
<i>esomeprazole magnesium cap delayed release 20 mg (base eq)</i> .....	276	<i>estradiol td patch weekly 0.025 mg/24hr</i> .....	190
<i>esomeprazole magnesium cap delayed release 40 mg (base eq)</i> .....	276	<i>estradiol td patch weekly 0.1 mg/24hr</i> .....	190
<i>esomeprazole magnesium for delayed release susp packet 10 mg</i> .....	276	<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i> .....	190
<i>esomeprazole magnesium for delayed release susp packet 20 mg</i> .....	276	<i>estradiol td patch weekly 0.05 mg/24hr</i> .....	190
<i>esomeprazole magnesium for delayed release susp packet 40 mg</i> .....	276	<i>estradiol td patch weekly 0.06 mg/24hr</i> .....	190
<i>esomeprazole sodium for intravenous soln 40 mg (base equiv)</i> .....	276	<i>estradiol td patch weekly 0.075 mg/24hr</i> .....	190
<i>ESPEROCT INJ 1000UNIT</i> .....	199	<i>estradiol td patch weekly 0.1 mg/24hr</i> .....	190
<i>ESPEROCT INJ 1500UNIT</i> .....	199	<i>estradiol vaginal cream 0.1 mg/gm</i> .....	281
<i>ESPEROCT INJ 2000UNIT</i> .....	199	<i>estradiol vaginal tab 10 mcg</i> .....	281
<i>ESPEROCT INJ 3000UNIT</i> .....	199	<i>estradiol valerate im in oil 20 mg/ml</i> .....	190
<i>ESPEROCT INJ 500UNIT</i> .....	199	<i>estradiol valerate im in oil 40 mg/ml</i> .....	190
<i>estarylla tab 0.25-35</i> .....	147	<i>ESTRING MIS 2MG</i> .....	281
<i>estazolam tab 1 mg</i> .....	209	<i>ESTROGEL GEL</i> .....	190
<i>estazolam tab 2 mg</i> .....	209	<i>eszopiclone tab 1 mg</i> .....	209
<i>ESTRACE TAB 0.5MG</i> .....	190	<i>eszopiclone tab 2 mg</i> .....	209
<i>ESTRACE TAB 1MG</i> .....	190	<i>eszopiclone tab 3 mg</i> .....	209
<i>ESTRACE TAB 2MG</i> .....	190	<i>ethacrynate sodium for inj 50 mg</i> ...	180
<i>ESTRACE VAG CRE 0.01%</i> .....	281	<i>ethacrynic acid tab 25 mg</i> .....	180
<i>estradiol &amp; norethindrone acetate tab 0.5-0.1 mg</i> .....	189	<i>ethambutol hcl tab 100 mg</i> .....	99
<i>estradiol &amp; norethindrone acetate tab 1-0.5 mg</i> .....	189		
<i>estradiol tab 0.5 mg</i> .....	190		

<i>ethambutol hcl tab 400 mg</i> .....	99	<i>euthyrox tab 75mcg</i> .....	270
ETHAMOLIN INJ 5%.....	235	<i>euthyrox tab 88mcg</i> .....	270
<i>ethosuximide cap 250 mg</i> .....	67	EVAMIST SPR 1.53MG.....	190
<i>ethosuximide soln 250 mg/5ml</i> .....	67	EVEKEO ODT TAB 10MG.....	13
ETHYL CHLOR AER FINE PIN .....	169	EVEKEO ODT TAB 15MG.....	13
ETHYL CHLOR AER FN STRM .....	169	EVEKEO ODT TAB 20MG.....	13
ETHYL CHLOR AER MED JET.....	169	EVEKEO ODT TAB 5MG .....	13
ETHYL CHLOR AER MED STRM.....	169	EVEKEO TAB 10MG.....	13
ETHYL CHLOR AER MIST.....	170	EVEKEO TAB 5MG .....	13
<i>ethyl chloride aerosol spray</i> .....	170	EVENCARE + TES BLD GLUC.....	176
<i>ethynodiol diacetate &amp; ethinyl estradiol</i> <i>tab 1 mg-35 mcg</i> .....	147	EVENCARE G2 TES .....	176
<i>ethynodiol diacetate &amp; ethinyl estradiol</i> <i>tab 1 mg-50 mcg</i> .....	147	EVENCARE G3 TES .....	176
ETHYOL INJ 500MG .....	114	EVENCARE TES BLD GLUC .....	176
<i>etodolac cap 200 mg</i> .....	26	EVENCARE TES MINI.....	176
<i>etodolac cap 300 mg</i> .....	26	EVENITY INJ 105MG .....	181
<i>etodolac tab 400 mg</i> .....	26	<i>everolimus tab 0.25 mg</i> .....	233
<i>etodolac tab 500 mg</i> .....	26	<i>everolimus tab 0.5 mg</i> .....	233
<i>etodolac tab er 24hr 400 mg</i> .....	26	<i>everolimus tab 0.75 mg</i> .....	233
<i>etodolac tab er 24hr 500 mg</i> .....	26	<i>everolimus tab 10 mg</i> .....	110
<i>etodolac tab er 24hr 600 mg</i> .....	26	<i>everolimus tab 1 mg</i> .....	233
<i>etomidate iv soln 2 mg/ml</i> .....	195	<i>everolimus tab 2.5 mg</i> .....	110
<i>etonogestrel-ethinyl estradiol va ring</i> <i>0.120-0.015 mg/24hr</i> .....	151	<i>everolimus tab 5 mg</i> .....	110
ETOPOPHOS INJ 100MG .....	115	<i>everolimus tab 7.5 mg</i> .....	110
<i>etoposide cap 50 mg</i> .....	115	<i>everolimus tab for oral susp 2 mg</i> ...110	
<i>etoposide inj 100 mg/5ml (20 mg/ml)</i> .....	116	<i>everolimus tab for oral susp 3 mg</i> ...110	
<i>etoposide inj 1 gm/50ml (20 mg/ml)</i> .....	116	<i>everolimus tab for oral susp 5 mg</i> ...110	
<i>etoposide inj 500 mg/25ml (20 mg/ml)</i> .....	116	EVERSENSE MIS SENSOR.....	218
<i>etravirine tab 100 mg</i> .....	128	EVERSENSE MIS TRANSMTR .....	218
<i>etravirine tab 200 mg</i> .....	128	EVISTA TAB 60MG.....	184
EUA PATIENT MIS ASSESS .....	235	EVIVO LIQ .....	80
EUCRISA OIN 2%.....	171	EVKEEZA INJ 1200/8 .....	86
EUFLEXXA INJ 10MG/ML.....	243	EVKEEZA INJ 345/2.3 .....	86
<i>euthyrox tab 100mcg</i> .....	270	EVOCLIN AER 1%.....	159
<i>euthyrox tab 112mcg</i> .....	270	EVOLUTION TES AUTOCODE .....	176
<i>euthyrox tab 125mcg</i> .....	270	EVOMELA INJ 50MG.....	100
<i>euthyrox tab 137mcg</i> .....	270	EVOTAZ TAB 300-150 .....	128
<i>euthyrox tab 150mcg</i> .....	270	EVOXAC CAP 30MG.....	236
<i>euthyrox tab 175mcg</i> .....	270	EVRYSDI SOL .....	245
<i>euthyrox tab 200mcg</i> .....	270	EVUSHELD SOL.....	256
<i>euthyrox tab 25mcg</i> .....	270	EXACTECH TES .....	176
<i>euthyrox tab 50mcg</i> .....	270	EXACTECH TES R-S-G.....	176
		EXELDERM CRE 1% .....	161
		EXELDERM SOL 1% .....	161
		EXELON DIS 13.3/24 .....	260
		EXELON DIS 4.6MG/24 .....	259
		EXELON DIS 9.5MG/24 .....	259
		<i>exemestane tab 25 mg</i> .....	107

EXFORGEH/10- TAB 160-12.5.....	95	<i>falmina tab</i> .....	147
EXFORGEH/10- TAB 160-25.....	95	<i>famciclovir tab 125 mg</i> .....	132
EXFORGEH/10- TAB 320-25.....	95	<i>famciclovir tab 250 mg</i> .....	132
EXFORGEH/5- TAB 160-12.5.....	95	<i>famciclovir tab 500 mg</i> .....	132
EXFORGEH/5- TAB 160-25 .....	95	<i>famotidine for susp 40 mg/5ml</i> .....	275
EXFORGE TAB 10-160MG .....	95	<i>famotidine inj 200 mg/20ml</i> .....	275
EXFORGE TAB 10-320MG .....	95	<i>famotidine inj 40 mg/4ml</i> .....	275
EXFORGE TAB 5-160MG.....	95	<i>famotidine in nacl 0.9% iv soln 20</i>	
EXFORGE TAB 5-320MG.....	95	<i>mg/50ml</i> .....	275
EXJADE TAB 125MG .....	81	<i>famotidine preservative free inj 20</i>	
EXJADE TAB 250MG .....	81	<i>mg/2ml</i> .....	275
EXJADE TAB 500MG .....	81	<i>famotidine tab 20 mg</i> .....	275
EXONDYS 51 SOL 100/2ML.....	244	<i>famotidine tab 40 mg</i> .....	275
EXONDYS 51 SOL 500/10ML .....	244	FANAPT PAK .....	121
EXPAREL INJ 1.3% .....	212	FANAPT TAB 10MG .....	121
EXTAVIA INJ 0.3MG.....	262	FANAPT TAB 12MG .....	121
EXTINA AER 2%.....	161	FANAPT TAB 1MG.....	121
EXTRANEAL SOL.....	235	FANAPT TAB 2MG.....	121
EYLEA INJ 2/0.05ML .....	248	FANAPT TAB 4MG.....	121
EYSUVIS DRO 0.25%.....	251	FANAPT TAB 6MG.....	121
EZALLOR SPR CAP 10MG.....	88	FANAPT TAB 8MG.....	121
EZALLOR SPR CAP 20MG.....	88	FANTASY LUBR MIS .....	215
EZALLOR SPR CAP 40MG.....	88	FANTASY LUBR MIS COLORS.....	215
EZALLOR SPR CAP 5MG .....	88	FANTASY LUBR MIS SPERMICI .....	215
<i>ezetimibe-simvastatin tab 10-10 mg</i> .....	86	FANTASY MIS LUBRICAT .....	215
<i>ezetimibe-simvastatin tab 10-20 mg</i> .....	86	FARESTON TAB 60MG .....	107
<i>ezetimibe-simvastatin tab 10-40 mg</i> .....	86	FARXIGA TAB 10MG .....	79
<i>ezetimibe-simvastatin tab 10-80 mg</i> .....	86	FARXIGA TAB 5MG .....	79
<i>ezetimibe tab 10 mg</i> .....	89	FARYDAK CAP 10MG .....	110
E-ZJECT LANC MIS 33G.....	218	FARYDAK CAP 15MG .....	110
E-Z JECT MIS 21G .....	218	FARYDAK CAP 20MG .....	110
E-Z JECT MIS 21G COLR.....	218	FASENRA INJ 30MG/ML.....	52
E-Z JECT MIS 30G .....	218	FASENRA PEN INJ 30MG/ML .....	52
E-Z JECT MIS 32G COLR.....	218	FASLODEX INJ 250/5ML .....	107
E-Z JECT MIS LANC 21G.....	218	FASTCLIX MIS LANCETS .....	218
E-Z JECT MIS THIN 26G .....	218	<i>fayosim tab</i> .....	147
EZ-LETS 21G MIS LANCETS .....	218	FC2 FEMALE MIS CONDOM .....	215
EZ-LETS 26G MIS LANCETS .....	218	<i>febuxostat tab 40 mg</i> .....	198
EZ-LETS 28G MIS LANCETS .....	218	<i>febuxostat tab 80 mg</i> .....	198
EZ-LETS 30G MIS LANCETS .....	218	FEIBA INJ.....	199
EZ SMART PLS TES BLD GLUC.....	176	<i>felbamate susp 600 mg/5ml</i> .....	65
EZ SMART TES BLD GLUC.....	176	<i>felbamate tab 400 mg</i> .....	65
<b>F</b>		<i>felbamate tab 600 mg</i> .....	65
<i>fa-8 cap 800mcg</i> .....	204	FELBATOL SUS 600/5ML .....	65
FABIOR AER 0.1% .....	159	FELBATOL TAB 400MG .....	66
FABRAZYME INJ 35MG .....	185	FELBATOL TAB 600MG .....	66
FABRAZYME INJ 5MG .....	185	FELDENE CAP 10MG .....	26

FELDENE CAP 20MG .....	26	<i>fentanyl citrate buccal tab 600 mcg</i>	
<i>felodipine tab er 24hr 10 mg</i> .....	137	<i>(base equiv)</i> .....	32
<i>felodipine tab er 24hr 2.5 mg</i> .....	137	<i>fentanyl citrate buccal tab 800 mcg</i>	
<i>felodipine tab er 24hr 5 mg</i> .....	137	<i>(base equiv)</i> .....	32
FEMARA TAB 2.5MG .....	107	<i>fentanyl citrate lozenge on a handle</i>	
FEMCAP MIS 22MM .....	215	<i>1200 mcg</i> .....	32
FEMCAP MIS 26MM .....	215	<i>fentanyl citrate lozenge on a handle</i>	
FEMCAP MIS 30MM .....	215	<i>1600 mcg</i> .....	33
FEMRING MIS 0.05/24H .....	281	<i>fentanyl citrate lozenge on a handle</i>	
FEMRING MIS 0.1MG/24 .....	281	<i>200 mcg</i> .....	32
<i>femynor tab 0.25-35</i> .....	147	<i>fentanyl citrate lozenge on a handle</i>	
<i>fenofibrate cap 150 mg</i> .....	87	<i>400 mcg</i> .....	32
<i>fenofibrate cap 50 mg</i> .....	87	<i>fentanyl citrate lozenge on a handle</i>	
<i>fenofibrate micronized cap 130 mg</i> .....	87	<i>600 mcg</i> .....	32
<i>fenofibrate micronized cap 134 mg</i> .....	87	<i>fentanyl citrate lozenge on a handle</i>	
<i>fenofibrate micronized cap 200 mg</i> .....	87	<i>800 mcg</i> .....	32
<i>fenofibrate micronized cap 30 mg</i> .....	87	<i>fentanyl citrate pf soln cartridge 100</i>	
<i>fenofibrate micronized cap 43 mg</i> .....	87	<i>mcg/2ml</i> .....	33
<i>fenofibrate micronized cap 67 mg</i> .....	87	<i>fentanyl citrate preservative free (pf)</i>	
<i>fenofibrate micronized cap 90 mg</i> .....	87	<i>inj 1000 mcg/20ml</i> .....	33
<i>fenofibrate tab 120 mg</i> .....	88	<i>fentanyl citrate preservative free (pf)</i>	
<i>fenofibrate tab 145 mg</i> .....	88	<i>inj 100 mcg/2ml</i> .....	33
<i>fenofibrate tab 160 mg</i> .....	88	<i>fentanyl citrate preservative free (pf)</i>	
<i>fenofibrate tab 40 mg</i> .....	87	<i>inj 2500 mcg/50ml</i> .....	33
<i>fenofibrate tab 48 mg</i> .....	87	<i>fentanyl citrate preservative free (pf)</i>	
<i>fenofibrate tab 54 mg</i> .....	87	<i>inj 250 mcg/5ml</i> .....	33
<i>fenofibric acid tab 35 mg</i> .....	88	<i>fentanyl citrate preservative free (pf)</i>	
FENOGLIDE TAB 120MG .....	88	<i>inj 500 mcg/10ml</i> .....	33
FENOGLIDE TAB 40MG .....	88	<i>fentanyl citrate preservative free (pf)</i>	
<i>fenopropfen calcium cap 400 mg</i> .....	26	<i>inj 50 mcg/ml</i> .....	33
<i>fenopropfen calcium tab 600 mg</i> .....	26	FENTANYL CIT SOL 10MCG/ML .....	32
FENOPROFEN CAP 200MG .....	26	FENTANYL INJ 50MCG/ML .....	33
FENSOLVI INJ 45MG .....	184	<i>fentanyl td patch 72hr 100 mcg/hr</i> .....	33
FENT/ROPIVAC INJ 0.4/200 .....	39	<i>fentanyl td patch 72hr 12 mcg/hr</i> .....	33
FENT/ROPIVAC INJ NAACL .....	39	<i>fentanyl td patch 72hr 25 mcg/hr</i> .....	33
FENTANY/NAACL INJ 1000MCG .....	32	<i>fentanyl td patch 72hr 37.5 mcg/hr</i> .....	33
FENTANYL CIT INJ 100MCG .....	32	<i>fentanyl td patch 72hr 50 mcg/hr</i> .....	33
FENTANYL CIT INJ 250MCG .....	32	<i>fentanyl td patch 72hr 62.5 mcg/hr</i> .....	33
FENTANYL CIT INJ 50MCG/ML .....	32	<i>fentanyl td patch 72hr 75 mcg/hr</i> .....	33
FENTANYL CIT INJ BUPIVACA .....	39	<i>fentanyl td patch 72hr 87.5 mcg/hr</i> .....	33
<i>fentanyl citrate buccal tab 100 mcg</i>		FENTORA TAB 100MCG .....	33
<i>(base equiv)</i> .....	32	FENTORA TAB 200MCG .....	33
<i>fentanyl citrate buccal tab 200 mcg</i>		FENTORA TAB 400MCG .....	33
<i>(base equiv)</i> .....	32	FENTORA TAB 600MCG .....	33
<i>fentanyl citrate buccal tab 400 mcg</i>		FENTORA TAB 800MCG .....	33
<i>(base equiv)</i> .....	32	FERAHEME INJ 510/17ML .....	207
		<i>ferocon cap</i> .....	206

<i>ferotransic cap</i> .....	206	<i>flac oil 0.01%</i> .....	254
FERPRX 2-DAY TAB 1000MG .....	81	FLAGYL CAP 375MG.....	43
FERRIPROX SOL 100MG/ML.....	81	FLAREX SUS 0.1% OP.....	251
FERRIPROX TAB 1000MG .....	81	<i>flavoxate hcl tab 100 mg</i> .....	279
FERRIPROX TAB 500MG .....	81	<i>flecainide acetate tab 100 mg</i> .....	51
FERRLECIT INJ 12.5MG/M.....	207	<i>flecainide acetate tab 150 mg</i> .....	51
FERRO-PLEX TAB.....	206	<i>flecainide acetate tab 50 mg</i> .....	51
<i>ferumoxytol inj 510 mg/17ml (30</i>		FLECTOR DIS 1.3% .....	160
<i>mg/ml) (elemental fe)</i> .....	207	FLEQSUVY SUS 25MG/5ML .....	242
<i>fesoterodine fumarate tab er 24hr 4</i>		FLOLAN INJ 0.5MG .....	142
<i>mg</i> .....	278	FLOLAN INJ 1.5MG .....	142
<i>fesoterodine fumarate tab er 24hr 8</i>		FLOLIPID SUS 20MG/5ML.....	88
<i>mg</i> .....	278	FLOLIPID SUS 40MG/5ML.....	88
FETROJA INJ 1GM.....	146	FLOMAX CAP 0.4MG.....	197
FETZIMA CAP 120MG.....	71	FLORIVA CHW 0.25MG.....	238
FETZIMA CAP 20MG.....	71	FLORIVA CHW 0.5MG.....	238
FETZIMA CAP 40MG.....	71	FLORIVA CHW 1MG .....	238
FETZIMA CAP 80MG.....	71	FLORIVA DRO 0.25MG .....	229
FETZIMA CAP TITRATIO .....	71	FLORIVA DRO PLUS .....	238
<i>fexmid tab 7.5mg</i> .....	242	FLOVENT DISK AER 100MCG .....	54
FIASP FLEX INJ TOUCH .....	77	FLOVENT DISK AER 250MCG .....	54
FIASP INJ 100/ML .....	77	FLOVENT DISK AER 50MCG .....	53
FIASP PENFIL INJ U-100 .....	77	FLOVENT HFA AER 110MCG.....	54
FIASP PMPCRT INJ U-100 .....	77	FLOVENT HFA AER 220MCG.....	54
FIBRICOR TAB 105MG .....	88	FLOVENT HFA AER 44MCG.....	54
FIBRICOR TAB 35MG .....	88	<i>floxuridine for inj 0.5 gm</i> .....	102
FIBRYGA INJ 1GM.....	199	FLUAD QUADRI INJ 2022-23 .....	279
FIFTY50 GLUC TES 2.0.....	176	FLUARIX QUAD INJ 2022-23 .....	279
FIFTY50 SAFE MIS LANCETS .....	218	FLUBLOK QUAD INJ 2022-23 .....	279
FINACEA AER 15% .....	171	FLUBLOK QUAD INJ 2023-24 .....	279
FINACEA GEL 15% .....	171	FLUCLVX QUAD INJ 2022-23.....	280
<i>finasteride tab 5 mg</i> .....	197	<i>fluconazole for susp 10 mg/ml</i> .....	84
FINE 30 MIS .....	218	<i>fluconazole for susp 40 mg/ml</i> .....	84
FINGERSTIX MIS LANCETS .....	218	<i>fluconazole in nacl 0.9% inj 200</i>	
<i>ingolimod hcl cap 0.5 mg (base equiv)</i>		<i>mg/100ml</i> .....	84
.....	262	<i>fluconazole in nacl 0.9% inj 400</i>	
FINTEPLA SOL 2.2MG/ML .....	61	<i>mg/200ml</i> .....	84
<i>finzala chw fe 1/20</i> .....	148	FLUCONAZOLE SOL /NACL.....	84
FIORICET CAP .....	30	<i>fluconazole tab 100 mg</i> .....	84
FIORICET CAP CODEINE.....	39	<i>fluconazole tab 150 mg</i> .....	84
FIRAZYR INJ 30MG/3ML .....	202	<i>fluconazole tab 200 mg</i> .....	84
FIRDAPSE TAB 10MG.....	99	<i>fluconazole tab 50 mg</i> .....	84
FIRMAGON INJ 120MG .....	107	<i>flucytosine cap 250 mg</i> .....	84
FIRMAGON INJ 80MG.....	107	<i>flucytosine cap 500 mg</i> .....	84
FIRST-METRON SUS 100MG/ML .....	43	<i>fludarabine phosphate for inj 50 mg</i> 102	
FIRVANQ SOL 25MG/ML.....	45	<i>fludarabine phosphate inj 25 mg/ml</i> 102	
FIRVANQ SOL 50MG/ML.....	45	<i>fludrocortisone acetate tab 0.1 mg</i> .156	

FLULAVAL QUA INJ 2022-23 .....	280	fluorouracil soln 5%.....	162
flumazenil iv soln 0.5 mg/5ml (0.1 mg/ml) .....	82	fluoxetine hcl cap 10 mg .....	69
flumazenil iv soln 1 mg/10ml (0.1 mg/ml) .....	82	fluoxetine hcl cap 20 mg .....	69
FLUMIST QUAD SUS 2022-23.....	280	fluoxetine hcl cap 40 mg .....	69
flunisolide nasal soln 25 mcg/act (0.025%) .....	244	fluoxetine hcl cap delayed release 90 mg .....	69
fluocinolone acetonide (otic) oil 0.01% .....	254	fluoxetine hcl solution 20 mg/5ml.....	69
fluocinolone acetonide cream 0.01% .....	166	fluoxetine hcl tab 10 mg .....	69
fluocinolone acetonide cream 0.025% .....	166	fluoxetine hcl tab 20 mg .....	69
fluocinolone acetonide oil 0.01% (body oil) .....	166	FLUOXETINE TAB 60MG .....	69
fluocinolone acetonide oil 0.01% (scalp oil) .....	166	fluphenazine decanoate inj 25 mg/ml .....	124
fluocinolone acetonide oint 0.025% .....	166	fluphenazine hcl elixir 2.5 mg/5ml ..	125
fluocinolone acetonide soln 0.01% ..	166	fluphenazine hcl inj 2.5 mg/ml .....	125
fluocinonide cream 0.05% .....	166	fluphenazine hcl oral conc 5 mg/ml ..	125
fluocinonide cream 0.1% .....	166	fluphenazine hcl tab 10 mg .....	125
fluocinonide emulsified base cream 0.05% .....	166	fluphenazine hcl tab 1 mg .....	125
fluocinonide gel 0.05%.....	167	fluphenazine hcl tab 2.5 mg .....	125
fluocinonide oint 0.05% .....	167	fluphenazine hcl tab 5 mg .....	125
fluocinonide soln 0.05% .....	167	flurandrenolide cream 0.05% .....	167
FLUORE/BENOX SOL 0.3-0.4%.....	252	flurandrenolide lotion 0.05%.....	167
fluorescein w/ benoxinate ophth soln 0.25-0.4%.....	252	flurandrenolide oint 0.05% .....	167
fluorescein w/ proparacaine ophth soln 0.25-0.5%.....	252	FLURA-SAFE SOL.....	253
FLUORESCITE INJ 10% OP .....	252	flurazepam hcl cap 15 mg .....	209
FLUOR-I-STRI TES 1MG OP.....	252	flurazepam hcl cap 30 mg .....	209
fluoritab dro 0.125mg .....	229	flurbiprofen sodium ophth soln 0.03% .....	253
fluorometholone ophth susp 0.1% ..	251	flurbiprofen tab 100 mg .....	26
fluorouracil cream 0.5% .....	162	flurbiprofen tab 50 mg .....	26
fluorouracil cream 5%.....	162	flutamide cap 125 mg .....	107
fluorouracil iv soln 1 gm/20ml (50 mg/ml) .....	102	fluticasone propionate cream 0.05% .....	167
fluorouracil iv soln 2.5 gm/50ml (50 mg/ml) .....	102	fluticasone propionate hfa inhal aer 110 mcg/act (125/valve) .....	54
fluorouracil iv soln 500 mg/10ml (50 mg/ml) .....	102	fluticasone propionate hfa inhal aer 220 mcg/act (250/valve) .....	54
fluorouracil iv soln 5 gm/100ml (50 mg/ml) .....	102	fluticasone propionate hfa inhal aero 44 mcg/act (50/valve).....	54
fluorouracil soln 2%.....	162	fluticasone propionate lotion 0.05% ..	167
		fluticasone propionate nasal susp 50 mcg/act .....	244
		fluticasone propionate oint 0.005% ..	167
		fluticasone-salmeterol aer powder ba 100-50 mcg/act .....	55
		fluticasone-salmeterol aer powder ba 250-50 mcg/act .....	55

<i>fluticasone-salmeterol aer powder ba</i>		FOLLISTIM AQ INJ 900UNIT .....	182
500-50 mcg/act .....	55	FOLOTYN INJ 20MG/ML .....	102
<i>fluvastatin sodium cap 20 mg (base</i>		FOLOTYN INJ 40MG/2ML .....	102
equivalent) .....	88	<i>foltrin cap</i> .....	206
<i>fluvastatin sodium cap 40 mg (base</i>		<i>fomepizole inj 1 gm/ml (for iv infusion)</i>	
equivalent) .....	89	.....	81
<i>fluvastatin sodium tab er 24 hr 80 mg</i>		<i>fondaparinux sodium subcutaneous inj</i>	
(base equivalent) .....	89	10 mg/0.8ml .....	58
<i>fluvoxamine maleate cap er 24hr 100</i>		<i>fondaparinux sodium subcutaneous inj</i>	
mg .....	69	2.5 mg/0.5ml .....	58
<i>fluvoxamine maleate cap er 24hr 150</i>		<i>fondaparinux sodium subcutaneous inj</i>	
mg .....	69	5 mg/0.4ml .....	58
<i>fluvoxamine maleate tab 100 mg</i> .....	69	<i>fondaparinux sodium subcutaneous inj</i>	
<i>fluvoxamine maleate tab 25 mg</i> .....	69	7.5 mg/0.6ml .....	58
<i>fluvoxamine maleate tab 50 mg</i> .....	69	FORA BLOOD TES GLUCOSE .....	176
FLUZONE HD INJ 2023-24 .....	280	FORACARE TES GD40 .....	176
FLUZONE QUAD INJ 2023-24 .....	280	FORACARE TES PREM V10 .....	176
FML FORTE SUS 0.25% OP .....	251	FORACARE TES TST N GO.....	176
FML LIQUIFLM SUS 0.1% OP.....	251	FORA D15G TES BLD GLUC.....	176
FML OIN 0.1% OP .....	251	FORA D20 TES BLD GLUC.....	176
FOCALIN TAB 10MG .....	17	FORA D40/G31 TES GLUCOSE.....	176
FOCALIN TAB 2.5MG .....	17	FORA G20 TES BLD GLUC.....	176
FOCALIN TAB 5MG .....	17	FORA G30/V10 TES BLD GLUC .....	176
FOCALIN XR CAP 10MG.....	17	FORA GD20 TES BLD GLUC.....	176
FOCALIN XR CAP 15MG.....	17	FORA GD50 TES .....	176
FOCALIN XR CAP 20MG.....	17	FORA LANCETS MIS 30G .....	218
FOCALIN XR CAP 25MG.....	17	FORA MIS LANCETS .....	218
FOCALIN XR CAP 30MG.....	17	FORANE SOL .....	196
FOCALIN XR CAP 35MG.....	17	FORA TN'G TES TN'G VOI .....	176
FOCALIN XR CAP 40MG.....	17	FORA V10 TES BLD GLUC .....	176
FOCALIN XR CAP 5MG .....	17	FORA V12 TES BLD GLUC .....	176
FOLAMED DHA CAP.....	237	FORA V20 TES BLD GLUC .....	176
<i>folate tab 400mcg</i> .....	204	FORA V30A TES BLD GLUC .....	176
FOLET DHA PAK .....	239	FORFIVO XL TAB 450MG .....	68
FOLET ONE CAP 38-1-225 .....	239	FORMALDEHYDE SOL 37%.....	126
<i>folic acid cap 0.8 mg</i> .....	204	<i>formaldehyde solution 10%</i> .....	126
<i>folic acid inj 5 mg/ml</i> .....	204	<i>formoterol fumarate soln nebu 20</i>	
<i>folic acid tab 1 mg</i> .....	204	mcg/2ml .....	55
<i>folic acid tab 400 mcg</i> .....	204	FORTAMET TAB 1000MG .....	75
<i>folic acid tab 800mcg</i> .....	204	FORTAMET TAB 500MG .....	75
FOLIC-K CAP .....	237	FORTEO INJ 600/2.4.....	181
FOLITIN-Z TAB .....	237	FORTESTA GEL 10MG/ACT.....	41
FOLIVANE-F CAP .....	206	FORTISCARE TES BLD GLUC .....	176
FOLIVANE-OB CAP.....	239	FOSAMAX + D TAB 70-2800 .....	181
FOLIVANE-PLS CAP.....	206	FOSAMAX + D TAB 70-5600 .....	181
FOLLISTIM AQ INJ 300UNIT.....	182	FOSAMAX TAB 70MG .....	181
FOLLISTIM AQ INJ 600UNIT.....	182		



<i>fosamprenavir calcium tab 700 mg (base equiv)</i> .....	128	<i>frovatriptan succinate tab 2.5 mg (base equivalent)</i> .....	226
<i>fosaprepitant dimeglumine for iv infusion 150 mg (base eq)</i> .....	83	FULPHILA INJ 6/0.6ML .....	205
<i>foscarnet sodium inj 6000 mg/250ml (24 mg/ml)</i> .....	130	<i>fulvestrant inj soln pref syr 250 mg/5ml</i> .....	107
FOSCAVIR INJ 24MG/ML.....	130	FUNGIMEZ SOL.....	161
<i>fosfomycin tromethamine powd pack 3 gm (base equivalent)</i> .....	47	<i>furosemide inj 10 mg/ml</i> .....	180
<i>fosinopril sodium &amp; hydrochlorothiazide tab 10-12.5 mg</i> .....	95	<i>furosemide oral soln 10 mg/ml</i> .....	180
<i>fosinopril sodium &amp; hydrochlorothiazide tab 20-12.5 mg</i> .....	95	<i>furosemide oral soln 8 mg/ml</i> .....	180
<i>fosinopril sodium tab 10 mg</i> .....	90	<i>furosemide tab 20 mg</i> .....	180
<i>fosinopril sodium tab 20 mg</i> .....	90	<i>furosemide tab 40 mg</i> .....	180
<i>fosinopril sodium tab 40 mg</i> .....	90	<i>furosemide tab 80 mg</i> .....	180
<i>fosphenytoin sodium inj 100 mg/2ml (phenytoin equiv)</i> .....	66	FUSION PAK SPRINKLE .....	206
<i>fosphenytoin sodium inj 500 mg/10ml (phenytoin equiv)</i> .....	66	FUSION PLUS CAP .....	206
FOSRENOL CHW 1000MG .....	195	FUZEON INJ 90MG.....	128
FOSRENOL CHW 500MG .....	195	FYARRO SUS 100MG.....	110
FOSRENOL CHW 750MG .....	195	<i>fyavolv tab 0.5-2.5</i> .....	189
FOSRENOL POW 1000MG .....	195	<i>fyavolv tab 1-5</i> .....	189
FOSRENOL POW 750MG .....	195	FYCOMPA SUS 0.5MG/ML .....	59
FOTIVDA CAP 0.89MG.....	110	FYCOMPA TAB 10MG.....	59
FOTIVDA CAP 1.34MG.....	110	FYCOMPA TAB 12MG.....	59
FRAGMIN INJ 10000/ML.....	58	FYCOMPA TAB 2MG .....	59
FRAGMIN INJ 12500UNT .....	58	FYCOMPA TAB 4MG .....	59
FRAGMIN INJ 15000UNT .....	58	FYCOMPA TAB 6MG .....	59
FRAGMIN INJ 18000UNT .....	58	FYCOMPA TAB 8MG .....	59
FRAGMIN INJ 2500/0.2 .....	58	FYLNETRA INJ 6MG/0.6 .....	205
FRAGMIN INJ 5000/0.2 .....	58	<i>fyremadel sol 250/0.5</i> .....	183
FRAGMIN INJ 7500/0.3 .....	58	<b>G</b>	
FRAGMIN INJ 95000UNT .....	58	G5/G4 MIS SENSOR .....	219
FREESTYLE KIT SENSOR.....	219	<i>gabapentin cap 100 mg</i> .....	61
FREESTYLE MIS LANCETS.....	219	<i>gabapentin cap 300 mg</i> .....	61
FREESTYLE MIS READER .....	219	<i>gabapentin cap 400 mg</i> .....	61
FREESTYLE TES.....	176	<i>gabapentin oral soln 250 mg/5ml</i> .....	61
FREESTYLE TES INSULINX .....	176	<i>gabapentin tab 600 mg</i> .....	61
FREESTYLE TES LITE .....	176	<i>gabapentin tab 800 mg</i> .....	61
FREESTYLE TES PREC NEO .....	176	GABITRIL TAB 12MG .....	66
FREESTY LIBR KIT 2 SENSOR.....	218	GABITRIL TAB 16MG .....	66
FREESTY LIBR KIT 3 SENSOR.....	218	GABITRIL TAB 2MG .....	66
FREESTY LIBR MIS 2 READER .....	218	GABITRIL TAB 4MG .....	66
FROVA TAB 2.5MG.....	226	GABLOFEN INJ 10000/20.....	242
		GABLOFEN INJ 20000/20.....	242
		GABLOFEN INJ 40000/20.....	242
		GABLOFEN INJ 50MCG/ML .....	242
		GALAFOLD CAP 123MG .....	185
		<i>galantamine hydrobromide cap er 24hr 16 mg</i> .....	260

<i>galantamine hydrobromide cap er 24hr</i> <i>24 mg</i> .....	260	GELNIQUE GEL 10% .....	278
<i>galantamine hydrobromide cap er 24hr</i> <i>8 mg</i> .....	260	GEL-ONE INJ 30MG/3ML.....	243
<i>galantamine hydrobromide oral soln 4</i> <i>mg/ml</i> .....	260	GELSYN-3 INJ 16.8/2ML.....	243
<i>galantamine hydrobromide tab 12 mg</i> .....	260	GELX GEL.....	236
<i>galantamine hydrobromide tab 4 mg</i> .....	260	<i>gemcitabine hcl for inj 1 gm</i> .....	102
<i>galantamine hydrobromide tab 8 mg</i> .....	260	<i>gemcitabine hcl for inj 200 mg</i> .....	102
GALZIN CAP 25MG .....	231	<i>gemcitabine hcl for inj 2 gm</i> .....	102
GALZIN CAP 50MG .....	231	<i>gemcitabine hcl inj 1 gm/26.3ml (38</i> <i>mg/ml) (base equiv)</i> .....	102
GAMMAGARD INJ 10GM/100 .....	255	<i>gemcitabine hcl inj 200 mg/5.26ml (38</i> <i>mg/ml) (base equiv)</i> .....	102
GAMMAGARD INJ 1GM/10ML.....	255	<i>gemcitabine hcl inj 2 gm/52.6ml (38</i> <i>mg/ml) (base equiv)</i> .....	102
GAMMAGARD INJ 2.5GM/25.....	255	GEMCITABINE INJ 1.5GM/15.....	102
GAMMAGARD INJ 20GM/200 .....	255	GEMCITABINE INJ 1GM .....	102
GAMMAGARD INJ 30GM/300 .....	255	GEMCITABINE INJ 1GM/10ML.....	102
GAMMAGARD INJ 5GM/50ML.....	255	GEMCITABINE INJ 200MG.....	102
GAMMAGARD SD INJ 10GM HU .....	255	GEMCITABINE INJ 2GM .....	102
GAMMAGARD SD INJ 5GM HU .....	255	GEMCITABINE INJ 2GM/20ML.....	102
GAMMAKED INJ 10GM/100 .....	255	<i>gemfibrozil tab 600 mg</i> .....	88
GAMMAKED INJ 1GM/10ML.....	255	<i>gemmily cap 1/20</i> .....	148
GAMMAKED INJ 20GM/200 .....	255	GEMTESA TAB 75MG.....	279
GAMMAKED INJ 5GM/50ML.....	255	GENERESS FE CHW .....	148
GAMUNEX-C INJ 10GM/100 .....	255	<i>generlac sol 10gm/15</i> .....	194
GAMUNEX-C INJ 1GM/10ML.....	255	<i>gengraf cap 100mg</i> .....	233
GAMUNEX-C INJ 2.5GM/25 .....	255	<i>gengraf cap 25mg</i> .....	233
GAMUNEX-C INJ 20GM/200 .....	255	<i>gengraf sol 100mg/ml</i> .....	233
GAMUNEX-C INJ 40/400ML.....	255	GENOTROPIN INJ 0.2MG .....	183
GAMUNEX-C INJ 5GM/50ML.....	255	GENOTROPIN INJ 0.4MG .....	183
<i>ganciclovir sodium for inj 500 mg</i> ...	130	GENOTROPIN INJ 0.6MG .....	183
<i>ganirelix acetate soln prefilled syringe</i> <i>250 mcg/0.5ml</i> .....	183	GENOTROPIN INJ 0.8MG .....	183
GANIRELIX AC INJ 250/0.5.....	183	GENOTROPIN INJ 1.2MG .....	183
GARDASIL 9 INJ.....	280	GENOTROPIN INJ 1.4MG .....	183
GASTROCROM CON 100/5ML .....	192	GENOTROPIN INJ 1.6MG .....	183
<i>gatifloxacin ophth soln 0.5%</i> .....	249	GENOTROPIN INJ 1.8MG .....	183
GATTEX KIT 5MG .....	195	GENOTROPIN INJ 12MG .....	183
<i>gavilyte-c sol</i> .....	211	GENOTROPIN INJ 1MG .....	183
<i>gavilyte-g sol</i> .....	211	GENOTROPIN INJ 2MG .....	183
GAVRETO CAP 100MG.....	110	GENOTROPIN INJ 5MG .....	183
GAZYVA INJ 25MG/ML.....	105	GENSTRIP 50 TES .....	176
GE100 BLOOD TES GLUCOSE.....	176	<i>gentak oin 0.3% op</i> .....	249
GEBAUERS SPR AER /STRETCH .....	170	<i>gentamicin in saline inj 0.8 mg/ml</i> ....	20
GELFILM MIS OP .....	252	<i>gentamicin in saline inj 1.2 mg/ml</i> ....	20
		<i>gentamicin in saline inj 1.6 mg/ml</i> ....	20
		<i>gentamicin in saline inj 1 mg/ml</i> .....	20
		<i>gentamicin in saline inj 2 mg/ml</i> .....	20
		<i>gentamicin sulfate cream 0.1%</i> .....	160

<i>gentamicin sulfate inj 10 mg/ml</i> .....	20	<i>glipizide tab er 24hr 2.5 mg</i> .....	79
<i>gentamicin sulfate inj 40 mg/ml</i> .....	20	<i>glipizide tab er 24hr 5 mg</i> .....	79
<i>gentamicin sulfate oint 0.1%</i> .....	160	<i>glipizide xl tab 10mg</i> .....	80
<i>gentamicin sulfate ophth soln 0.3%</i>	249	<i>glipizide xl tab 2.5mg</i> .....	79
GENTLE-LET MIS 26G .....	219	<i>glipizide xl tab 5mg</i> .....	80
GENTLE-LET MIS 28G .....	219	GLOBAL 28G MIS LANCETS.....	219
GENTLE-LET MIS LANCETS .....	219	GLOBAL 30G MIS LANCETS.....	219
GENTLE-LET MIS PLATFORM .....	219	GLUCAGEN INJ HYPOKIT .....	76
GENVISC 850 INJ 25/2.5.....	243	<i>glucagon (rdna) for inj kit 1 mg</i> .....	76
GENVOYA TAB .....	128	GLUCAGON KIT 1MG .....	76
GEODON CAP 20MG.....	120	GLUCOCARD 01 TES PLUS .....	176
GEODON CAP 40MG.....	120	GLUCOCARD 01 TES SENSOR .....	176
GEODON CAP 60MG.....	120	GLUCOCARD TES EXPRESSI.....	176
GEODON CAP 80MG.....	120	GLUCOCARD TES VITAL .....	176
GEODON INJ 20MG.....	120	GLUCOCARD TES X-SENSOR.....	177
GHT TEST TES STRIPS .....	176	GLUCOCOM MIS 28G .....	219
GIAPREZA INJ 2.5MG.....	282	GLUCOCOM MIS 30G .....	219
GILENYA CAP 0.5MG .....	262	GLUCOCOM MIS 33G .....	219
GILOTRIF TAB 20MG.....	106	GLUCOCOM TES .....	177
GILOTRIF TAB 30MG.....	106	GLUCONAVII TES STRIPS .....	177
GILOTRIF TAB 40MG.....	106	GLUCO PERFEC TES 3 .....	176
GILPHEX TR TAB 10-388MG.....	156	GLUCOSE TES STRIPS.....	177
GIVLAARI INJ 189MG/ML.....	198	GLUCOTROL XL TAB 10MG .....	80
GLASSIA INJ.....	266	GLUCOTROL XL TAB 2.5MG .....	80
<i>glatiramer acetate soln prefilled syringe</i> <i>20 mg/ml</i> .....	262	GLUCOTROL XL TAB 5MG .....	80
<i>glatiramer acetate soln prefilled syringe</i> <i>40 mg/ml</i> .....	262	GLUMETZA TAB 1000MG .....	75
<i>glatopa inj 20mg/ml</i> .....	262	GLUMETZA TAB 500MG .....	75
<i>glatopa inj 40mg/ml</i> .....	262	GLUTARALDEHY SOL 25% .....	126
GLEEVEC TAB 100MG.....	110	<i>glyburide-metformin tab 1.25-250 mg</i> .....	73
GLEEVEC TAB 400MG.....	110	<i>glyburide-metformin tab 2.5-500 mg</i>	73
GLEOSTINE CAP 100MG .....	101	<i>glyburide-metformin tab 5-500 mg</i> ...	73
GLEOSTINE CAP 10MG .....	100	<i>glyburide micronized tab 1.5 mg</i> .....	80
GLEOSTINE CAP 40MG.....	100	<i>glyburide micronized tab 3 mg</i> .....	80
GLIADEL WAF 7.7MG .....	101	<i>glyburide micronized tab 6 mg</i> .....	80
<i>glimepiride tab 1 mg</i> .....	79	<i>glyburide tab 1.25 mg</i> .....	80
<i>glimepiride tab 2 mg</i> .....	79	<i>glyburide tab 2.5 mg</i> .....	80
<i>glimepiride tab 4 mg</i> .....	79	<i>glyburide tab 5 mg</i> .....	80
<i>glipizide-metformin hcl tab 2.5-250 mg</i> .....	73	<i>glycine irrigation soln 1.5%</i> .....	197
<i>glipizide-metformin hcl tab 2.5-500 mg</i> .....	73	GLYCOPHOS SOL 1MM/ML .....	229
<i>glipizide-metformin hcl tab 5-500 mg</i>	73	GLYCOPYRROLA INJ 0.6/3ML .....	274
<i>glipizide tab 10 mg</i> .....	79	GLYCOPYRROLA INJ 1MG/5ML.....	274
<i>glipizide tab 5 mg</i> .....	79	GLYCOPYRROLA TAB 1.5MG.....	274
<i>glipizide tab er 24hr 10 mg</i> .....	79	<i>glycopyrrolate inj 0.2 mg/ml</i> .....	274
		<i>glycopyrrolate inj 0.4 mg/2ml (0.2</i> <i>mg/ml)</i> .....	275

<i>glycopyrrolate inj 1 mg/5ml (0.2 mg/ml)</i> .....	275	<i>goodsense tab 81mg ec</i> .....	31
<i>glycopyrrolate inj 4 mg/20ml (0.2 mg/ml)</i> .....	275	GOPRELTO SOL 40MG/ML.....	243
<i>glycopyrrolate oral soln 1 mg/5ml</i> ..	275	GORDOFILM SOL.....	169
<i>glycopyrrolate tab 1 mg</i> .....	275	GRALISE TAB 300MG .....	263
<i>glycopyrrolate tab 2 mg</i> .....	275	GRALISE TAB 450MG .....	263
<i>glydo gel 2%</i> .....	170	GRALISE TAB 600MG .....	263
GLYNASE TAB 1.5MG .....	80	GRALISE TAB 750MG .....	263
GLYNASE TAB 3MG.....	80	GRALISE TAB 900MG .....	263
GLYNASE TAB 6MG.....	80	<i>granisetron hcl inj 1 mg/ml</i> .....	82
GLYXAMBI TAB 10-5 MG .....	73	<i>granisetron hcl inj 4 mg/4ml (1 mg/ml)</i> .....	82
GLYXAMBI TAB 25-5 MG .....	74	<i>granisetron hcl tab 1 mg</i> .....	82
GMATE BLOOD TES GLUCOSE .....	177	GRANIX INJ 300/0.5 .....	205
<i>gnp aspirin chw 81mg</i> .....	31	GRANIX INJ 300/1ML.....	205
<i>gnp aspirin tab 81mg ec</i> .....	31	GRANIX INJ 480/0.8 .....	205
GNP LANCETS MIS 21G .....	219	GRANIX INJ 480/1.6 .....	205
GNP LANCETS MIS 28G .....	219	GRASTEK SUB 2800BAU .....	19
GNP LANCETS MIS 30G .....	219	<i>griseofulvin microsize susp 125 mg/5ml</i> .....	84
GNP LANCETS MIS 33G .....	219	<i>griseofulvin microsize tab 500 mg</i> ....	84
GNP LANCETS MIS THIN 26G .....	219	<i>griseofulvin ultramicrosize tab 125 mg</i> .....	84
<i>gnp nicotine dis 14mg/24h</i> .....	264	<i>griseofulvin ultramicrosize tab 250 mg</i> .....	84
<i>gnp nicotine dis 21mg/24h</i> .....	264	<i>g tussin ac liq 100-10/5</i> .....	156
<i>gnp nicotine dis 7mg/24hr</i> .....	264	<i>guaiaatuss ac syp 100-10/5</i> .....	156
<i>gnp nicotine gum 2mg frt</i> .....	264	<i>guaifenesin-codeine soln 100-10 mg/5ml</i> .....	156
<i>gnp nicotine gum 2mg mint</i> .....	264	<i>guanfacine hcl tab 1 mg</i> .....	93
<i>gnp nicotine gum 2mg orig</i> .....	264	<i>guanfacine hcl tab 2 mg</i> .....	93
<i>gnp nicotine gum 4mg frt</i> .....	264	<i>guanfacine hcl tab er 24hr 1 mg (base equiv)</i> .....	15
<i>gnp nicotine gum 4mg mint</i> .....	264	<i>guanfacine hcl tab er 24hr 2 mg (base equiv)</i> .....	15
<i>gnp nicotine gum 4mg orig</i> .....	265	<i>guanfacine hcl tab er 24hr 3 mg (base equiv)</i> .....	15
<i>gnp nicotine loz 2mg mint</i> .....	265	<i>guanfacine hcl tab er 24hr 4 mg (base equiv)</i> .....	16
<i>gnp nicotine loz 4mg cher</i> .....	265	GUARDIAN CON MIS TRANSMIT ....	219
<i>gnp nicotine loz 4mg mint</i> .....	265	GUARDIAN MIS LINK 3.....	219
<i>gnp nicotine loz mini 2mg</i> .....	265	GUARDIAN MIS SENSOR 3.....	219
GOCOVRI CAP 137MG .....	118	GUARDIAN MIS TRANSMTR.....	219
GOCOVRI CAP 68.5MG .....	118	GUARDIAN RT KIT .....	219
GOLYTELY SOL.....	211	GUARDIAN RT KIT STARTER .....	219
GONAL-F INJ 1050UNIT .....	182	GUARDIAN RT KIT SYSTEM.....	219
GONAL-F INJ 450UNIT .....	182	GUARDIAN RT KIT SYST PED .....	219
GONAL-F RFF INJ 300/0.5 .....	182	GUARDIAN RT MIS CHARGER.....	219
GONAL-F RFF INJ 450/0.75.....	182		
GONAL-F RFF INJ 75UNIT .....	182		
GONAL-F RFF INJ 900/1.5 .....	182		
GONITRO POW 400MCG.....	48		
<i>goodsense gel art pain</i> .....	160		
GOODSENSE MIS LANC 30G .....	219		
GOODSENSE MIS LANC 33G .....	219		

GUARDIAN RT MIS REPLACE .....	219
GUARDIAN RT MIS REPL PED .....	219
GUARDIAN RT MIS SOFTWARE.....	219
GUARDIAN RT MIS TST PLUG.....	219
GVOKE HYPO 1 INJ .5/.1ML.....	76
GVOKE HYPO 1 INJ 1MG/.2ML.....	76
GVOKE HYPO 2 INJ .5/.1ML.....	76
GVOKE HYPO 2 INJ 1MG/.2ML.....	76
GVOKE KIT SOL 1MG/0.2M.....	76
GVOKE PFS INJ.....	76
GYNAZOLE-1 CRE 2% .....	281
GYNOL II GEL 3% .....	281

**H**

<i>habitrol dis 21mg/24h</i> .....	265
HADLIMA INJ 40/0.4ML.....	21
HADLIMA INJ 40/0.8ML.....	21
HADLIMA PUSH INJ 40/0.4ML.....	21
HADLIMA PUSH INJ 40/0.8ML.....	21
HAEGARDA INJ 2000UNIT .....	202
HAEGARDA INJ 3000UNIT .....	202
HAEMOLANCE MIS HIGH FLO .....	219
HAEMOLANCE MIS LOW FLOW .....	219
HAEMOLANCE MIS PLUS.....	219
HAEMOLANCE MIS PLUS LOW .....	219
HAEMOLANCE MIS PLUS MAX.....	219
HAEMOLANCE MIS PLUS PED .....	219
HAEMOLANCE MIS RETRACT .....	219
<i>hailey 24 tab fe</i> .....	148
<i>hailey fe tab 1/20</i> .....	148
<i>hailey fe tab 1.5/30</i> .....	148
<i>hailey tab 1.5/30</i> .....	148
HALAVEN INJ 1MG/2ML.....	116
<i>halcinonide cream 0.1%</i> .....	167
HALCION TAB 0.25MG.....	209
HALDOL DECAN INJ 100MG/ML .....	122
HALDOL DECAN INJ 50MG/ML.....	122
<i>halobetasol propionate cream 0.05%</i> .....	167
<i>halobetasol propionate oint 0.05%</i> .	167
HALOG CRE 0.1%.....	167
HALOG OIN 0.1%.....	167
HALOG SOL 0.1%.....	167
<i>haloperidol decanoate im soln 100</i> <i>mg/ml</i> .....	122
<i>haloperidol decanoate im soln 50</i> <i>mg/ml</i> .....	122
<i>haloperidol lactate inj 5 mg/ml</i> .....	122

<i>haloperidol lactate oral conc 2 mg/ml</i> .....	122
<i>haloperidol tab 0.5 mg</i> .....	122
<i>haloperidol tab 10 mg</i> .....	122
<i>haloperidol tab 1 mg</i> .....	122
<i>haloperidol tab 20 mg</i> .....	122
<i>haloperidol tab 2 mg</i> .....	122
<i>haloperidol tab 5 mg</i> .....	122
HARVONI PAK.....	131
HARVONI PAK 45-200MG .....	131
HARVONI TAB 45-200MG .....	131
HARVONI TAB 90-400MG .....	131
HAVRIX INJ 1440UNIT .....	280
HAVRIX INJ 720UNIT .....	280
HEALON5 PRO INJ 23MG/ML.....	252
HEALON DUET INJ PRO .....	252
HEALON GV INJ 18MG PRO.....	252
HEALON PRO INJ 10MG/ML.....	252
<i>heather tab 0.35mg</i> .....	152
HECTOROL INJ 4MCG/2ML.....	185
HEMABATE INJ 250MCG .....	254
HEMANGEOL SOL 4.28/ML.....	135
HEMATINIC/FA TAB .....	206
HEMATRON-AF TAB .....	207
HEMLIBRA INJ 105/0.7 .....	199
HEMLIBRA INJ 150/ML.....	199
HEMLIBRA INJ 30MG/ML .....	199
HEMLIBRA INJ 60/0.4 .....	199
<i>hemmorex-hc sup 30mg</i> .....	43
<i>hemocyte-f tab</i> .....	207
HEMOFIL M INJ 1000UNIT .....	200
HEMOFIL M INJ 1700UNIT .....	200
HEMOFIL M INJ 250UNIT .....	200
HEMOFIL M INJ 500UNIT .....	200
HEPAGAM B INJ .....	255
<i>heparin sod (porcine)-nacl iv soln 1000</i> <i>unit/500ml-0.9%</i> .....	58
<i>heparin sod (porcine)-nacl iv soln 2000</i> <i>unit/l-0.9%</i> .....	58
<i>heparin sodium (porcine) 100 unit/ml</i> <i>in d5w</i> .....	58
<i>heparin sodium (porcine)-dextrose iv</i> <i>sol 20000 unit/500ml-5%</i> .....	58
<i>heparin sodium (porcine) inj 10000</i> <i>unit/ml</i> .....	58
<i>heparin sodium (porcine) inj 1000</i> <i>unit/ml</i> .....	58

<i>heparin sodium (porcine) inj 20000</i>		HPR PLUS KIT .....	171
<i>unit/ml</i> .....	58	HULIO INJ 40/0.8ML.....	21
<i>heparin sodium (porcine) inj 5000</i>		HULIO KIT 20/0.4ML .....	21
<i>unit/ml</i> .....	58	HUMALOG INJ 100/ML .....	77
<i>heparin sodium (porcine) pf inj 5000</i>		HUMALOG KWIK INJ 100/ML.....	77
<i>unit/0.5ml</i> .....	58	HUMALOG KWIK INJ 200/ML.....	77
HEPLISAV-B INJ 20/0.5ML .....	280	HUMALOG MIX INJ 50/50 .....	77
HEPSERA TAB 10MG .....	131	HUMALOG MIX INJ 50/50KWP.....	77
HEP SOD/D5W INJ 100/ML .....	58	HUMALOG MIX INJ 75/25KWP.....	77
HEP SOD/D5W INJ 20000UNT.....	58	HUMALOG MIX SUS 75/25.....	77
HEP SOD/D5W INJ 25000UNT.....	58	HUMATE-P SOL 2400UNIT .....	200
HEP SOD/DEXT INJ 25000UNT .....	58	HUMATE-P SOL 250-600.....	200
HEP SOD/NACL INJ 12500UNT .....	58	HUMATE-P SOL 500-1200.....	200
HEP SOD/NACL INJ 25000UNT .....	58	HUMATIN CAP 250MG.....	20
HERCEP HYLEC SOL 60-10000 .....	109	HUMATROPE INJ 12MG.....	183
HERCEPTIN INJ 150MG .....	104	HUMATROPE INJ 24MG.....	183
HESPAN INJ 6%/NACL .....	202	HUMATROPE INJ 5MG .....	183
<i>hetastarch in sodium chloride inj 6-</i>		HUMATROPE INJ 6MG .....	183
<i>0.9%</i> .....	202	HUMIRA INJ 10/0.1ML .....	21
HETLIOZ CAP 20MG.....	210	HUMIRA INJ 20/0.2ML .....	21
HETLIOZ LQ SUS 4MG/ML .....	211	HUMIRA INJ 40/0.4ML .....	21
HEXTEND SOL 6%.....	202	HUMIRA KIT 40MG/0.8 .....	22
HIBERIX SOL 10MCG .....	279	HUMIRA PEDIA INJ CROHNS .....	22
<i>hidex 6-day pak 1.5mg</i> .....	154	HUMIRA PEN INJ 40/0.4ML.....	22
HIPREX TAB 1GM .....	47	HUMIRA PEN INJ 40MG/0.8 .....	22
HIZENTRA INJ 10/50ML .....	255	HUMIRA PEN INJ 80/0.8ML.....	22
HIZENTRA INJ 1GM/5ML.....	255	HUMIRA PEN INJ CD/UC/HS.....	22
HIZENTRA INJ 2GM/10ML.....	255	HUMIRA PEN INJ PS/UV .....	23
HIZENTRA INJ 4GM/20ML.....	255	HUMIRA PEN KIT CD/UC/HS .....	23
HIZENTRA SOL 20% .....	255	HUMIRA PEN KIT PED UC .....	23
<i>hm aspirin chw 81mg</i> .....	31	HUMIRA PEN KIT PS/UV .....	23
<i>hm nicotine dis 14mg/24h</i> .....	265	HUMULIN BR INJ U-100 .....	77
<i>hm nicotine dis 21mg/24h</i> .....	265	HUMULIN INJ 70/30 .....	77
<i>hm nicotine dis 7mg/24hr</i> .....	265	HUMULIN INJ 70/30KWP .....	77
<i>hm nicotine gum 2mg</i> .....	265	HUMULIN N INJ U-100 .....	77
<i>hm nicotine gum 2mg mint</i> .....	265	HUMULIN N INJ U-100KWP.....	77
<i>hm nicotine gum 4mg frt</i> .....	265	HUMULIN N PN INJ U-100 .....	77
<i>hm nicotine gum 4mg mint</i> .....	265	HUMULIN PEN INJ 70/30 .....	77
<i>hm nicotine loz 2mg</i> .....	265	HUMULIN R INJ U-100 .....	77
<i>hm nicotine loz 2mg cinn</i> .....	265	HUMULIN R INJ U-500 .....	77
<i>hm nicotine loz 2mg mint</i> .....	265	HYALGAN INJ 20MG/2ML.....	243
<i>hm nicotine loz 4mg cinn</i> .....	265	HYCAMTIN CAP 0.25MG.....	116
<i>hm nicotine loz 4mg mint</i> .....	265	HYCAMTIN CAP 1MG .....	116
HORIZANT TAB 300MG ER.....	264	HYCAMTIN INJ 4MG .....	116
HORIZANT TAB 600MG ER.....	264	HYCLODEX SOL 0.012%.....	171
HPR PLUS AER .....	170	<i>hydralazine hcl inj 20 mg/ml</i> .....	98
HPR PLUS CRE .....	170	<i>hydralazine hcl tab 100 mg</i> .....	98

<i>hydralazine hcl tab 10 mg</i> .....	98	<i>hydrocodone bitartrate tab er 24hr</i>	
<i>hydralazine hcl tab 25 mg</i> .....	98	<i>deter 120 mg</i> .....	34
<i>hydralazine hcl tab 50 mg</i> .....	98	<i>hydrocodone bitartrate tab er 24hr</i>	
HYDREA CAP 500MG .....	114	<i>deter 20 mg</i> .....	33
HYDRFRA BLUE PAD RDY 2.5 .....	173	<i>hydrocodone bitartrate tab er 24hr</i>	
HYDRFRA BLUE PAD RDY 4X5 .....	173	<i>deter 30 mg</i> .....	33
HYDRFRA BLUE PAD RDY 8X8 .....	173	<i>hydrocodone bitartrate tab er 24hr</i>	
HYDRFRA MRF PAD 2 .....	173	<i>deter 40 mg</i> .....	33
<i>hydrochlorothiazide cap 12.5 mg</i> ....	181	<i>hydrocodone bitartrate tab er 24hr</i>	
<i>hydrochlorothiazide tab 12.5 mg</i> ....	181	<i>deter 60 mg</i> .....	33
<i>hydrochlorothiazide tab 25 mg</i> .....	181	<i>hydrocodone bitartrate tab er 24hr</i>	
<i>hydrochlorothiazide tab 50 mg</i> .....	181	<i>deter 80 mg</i> .....	34
<i>hydrocodone-acetaminophen soln 10-</i>		<i>hydrocodone-ibuprofen tab 10-200 mg</i>	
<i>325 mg/15ml</i> .....	39	.....	39
<i>hydrocodone-acetaminophen soln 7.5-</i>		<i>hydrocodone-ibuprofen tab 5-200 mg</i>	
<i>325 mg/15ml</i> .....	39	.....	39
<i>hydrocodone-acetaminophen tab 10-</i>		<i>hydrocodone-ibuprofen tab 7.5-200 mg</i>	
<i>300 mg</i> .....	39	.....	39
<i>hydrocodone-acetaminophen tab 10-</i>		<i>hydrocod polst-chlorphen polst er susp</i>	
<i>325 mg</i> .....	39	<i>10-8 mg/5ml</i> .....	156
<i>hydrocodone-acetaminophen tab 5-300</i>		<i>hydrocortisone acetate w/ pramoxine</i>	
<i>mg</i> .....	39	<i>perianal cream 1-1%</i> .....	42
<i>hydrocodone-acetaminophen tab 5-325</i>		<i>hydrocortisone butyrate cream 0.1%</i>	
<i>mg</i> .....	39	.....	167
<i>hydrocodone-acetaminophen tab 7.5-</i>		<i>hydrocortisone butyrate hydrophilic lipo</i>	
<i>300 mg</i> .....	39	<i>base cream 0.1%</i> .....	167
<i>hydrocodone-acetaminophen tab 7.5-</i>		<i>hydrocortisone butyrate lotion 0.1%</i>	
<i>325 mg</i> .....	39	.....	167
<i>hydrocodone bitart-homatropine</i>		<i>hydrocortisone butyrate oint 0.1%</i> ..	167
<i>methylbromide tab 5-1.5 mg</i> .....	156	<i>hydrocortisone butyrate soln 0.1%</i> .	167
<i>hydrocodone bitart-homatropine</i>		<i>hydrocortisone cream 1%</i> .....	167
<i>methylbrom soln 5-1.5 mg/5ml</i> ...	156	<i>hydrocortisone cream 2.5%</i> .....	167
<i>hydrocodone bitartrate cap er 12hr 10</i>		<i>hydrocortisone enema 100 mg/60ml</i> ..	42
<i>mg</i> .....	33	<i>hydrocortisone lotion 2.5%</i> .....	167
<i>hydrocodone bitartrate cap er 12hr 15</i>		<i>hydrocortisone oint 1%</i> .....	167
<i>mg</i> .....	33	<i>hydrocortisone oint 2.5%</i> .....	167
<i>hydrocodone bitartrate cap er 12hr 20</i>		<i>hydrocortisone perianal cream 1%</i> ...	43
<i>mg</i> .....	33	<i>hydrocortisone perianal cream 2.5%</i> ..	43
<i>hydrocodone bitartrate cap er 12hr 30</i>		<i>hydrocortisone tab 10 mg</i> .....	154
<i>mg</i> .....	33	<i>hydrocortisone tab 20 mg</i> .....	154
<i>hydrocodone bitartrate cap er 12hr 40</i>		<i>hydrocortisone tab 5 mg</i> .....	154
<i>mg</i> .....	33	<i>hydrocortisone valerate cream 0.2%</i>	
<i>hydrocodone bitartrate cap er 12hr 50</i>		.....	167
<i>mg</i> .....	33	<i>hydrocortisone valerate oint 0.2%</i> ..	167
<i>hydrocodone bitartrate tab er 24hr</i>		<i>hydrocortisone w/ acetic acid otic soln</i>	
<i>deter 100 mg</i> .....	34	<i>1-2%</i> .....	254
		HYDROFERA PAD BLUE 2X2 .....	173

HYDROFERA PAD BLUE 4X4 .....	173	<i>hydroxyprogesterone caproate im in oil</i>	
HYDROFERA PAD BLUE 6X6 .....	173	250 mg/ml .....	258
HYDROFERA PAD BLUE 9MM .....	173	<i>hydroxyurea cap 500 mg</i> .....	114
HYDROFERA PAD MRF 2.5 .....	173	<i>hydroxyzine hcl im soln 25 mg/ml</i> ....	49
HYDROFERA PAD MRF4 .....	173	<i>hydroxyzine hcl im soln 50 mg/ml</i> ....	49
HYDROFRA MRF PAD 2-1/4X8 .....	173	<i>hydroxyzine hcl syrup 10 mg/5ml</i> .....	49
<i>hydrogen peroxide soln 30%</i> .....	126	<i>hydroxyzine hcl tab 10 mg</i> .....	49
HYDROG WOUND MIS 3 .....	173	<i>hydroxyzine hcl tab 25 mg</i> .....	49
HYDROG WOUND MIS 4-3/4 .....	173	<i>hydroxyzine hcl tab 50 mg</i> .....	49
<i>hydromet syp 5-1.5/5</i> .....	156	<i>hydroxyzine pamoate cap 100 mg</i> ....	49
HYDROMO/NAACL INJ 20/100ML.....	34	<i>hydroxyzine pamoate cap 25 mg</i> .....	49
HYDROMO/NAACL INJ 2MG/ML .....	34	<i>hydroxyzine pamoate cap 50 mg</i> .....	49
<i>hydromorphone hcl inj 1 mg/ml</i> .....	34	HYFTOR GEL 0.2% .....	169
<i>hydromorphone hcl inj 2 mg/ml</i> .....	34	HYLATOPIC CRE PLUS .....	171
<i>hydromorphone hcl liqd 1 mg/ml</i> .....	34	HYLAZINC TAB.....	237
<i>hydromorphone hcl preservative free</i>		HYLENEX INJ 150 UNIT .....	232
(pf) <i>inj 10 mg/ml</i> .....	34	HYMOVIS INJ 24MG/3ML .....	243
<i>hydromorphone hcl tab 2 mg</i> .....	34	<i>hyoscyamine sulfate elixir 0.125</i>	
<i>hydromorphone hcl tab 4 mg</i> .....	34	mg/5ml.....	275
<i>hydromorphone hcl tab 8 mg</i> .....	34	<i>hyoscyamine sulfate sl tab 0.125 mg</i>	
<i>hydromorphone hcl tab er 24hr 12 mg</i>		.....	275
.....	34	<i>hyoscyamine sulfate soln 0.125 mg/ml</i>	
<i>hydromorphone hcl tab er 24hr 16 mg</i>		.....	275
.....	34	<i>hyoscyamine sulfate tab 0.125 mg</i> .	275
<i>hydromorphone hcl tab er 24hr 32 mg</i>		<i>hyoscyamine sulfate tab disint 0.125</i>	
.....	34	mg .....	275
<i>hydromorphone hcl tab er 24hr 8 mg</i>	34	<i>hyoscyamine sulfate tab er 12hr 0.375</i>	
HYDROMORPHON INJ 0.2MG/ML .....	34	mg .....	275
HYDROMORPHON INJ 10MG/ML .....	34	<i>hyosyne dro 0.125/ml</i> .....	275
HYDROMORPHON INJ 1MG/ML .....	34	<i>hyosyne elx 0.125/5</i> .....	275
HYDROMORPHON INJ 2MG/ML .....	34	HYPERHEP B INJ.....	255
HYDROMORPHON INJ 30/30ML .....	34	HYPERRAB INJ 1500UNIT .....	255
HYDROMORPHON INJ 4MG/ML .....	34	HYPERRAB INJ 300UNIT .....	255
HYDROMORPHON SOL 0.2MG/ML .....	34	HYPERRHO S/D INJ 300MCG .....	255
<i>hydroxocobalamin acetate inj 1000</i>		HYPERRHO S/D INJ 50MCG.....	255
mcg/ml (base equivalent) .....	204	HYPERSAL NEB 3.5% .....	157
<i>hydroxychloroquine sulfate tab 100 mg</i>		HYPERSAL NEB 7%.....	157
.....	99	HYPERTET INJ 250/ML .....	255
<i>hydroxychloroquine sulfate tab 200 mg</i>		HYPOCYN SOL 0.012%.....	171
.....	99	HYQVIA INJ 10-800 .....	256
<i>hydroxychloroquine sulfate tab 300 mg</i>		HYQVIA INJ 2.5-200 .....	256
.....	99	HYQVIA INJ 20-1600 .....	256
<i>hydroxychloroquine sulfate tab 400 mg</i>		HYQVIA INJ 30-2400 .....	256
.....	99	HYQVIA INJ 5-400 .....	256
<i>hydroxyprogesterone caproate im in oil</i>		HYRIMOZ-CROH INJ UC SP.....	23
1.25 gm/5ml.....	107	HYRIMOZ INJ 10/0.1ML .....	23
		HYRIMOZ INJ 20/0.2ML .....	23



HYRIMOZ INJ 40/0.4ML .....	23	<i>icosapent ethyl cap 1 gm</i> .....	86
HYRIMOZ INJ 80/0.8ML .....	23	IDACIO INJ 40/0.8ML .....	23
HYRIMOZ-PED INJ CROHNS.....	23	IDAMYCIN PFS INJ 10/10ML.....	108
HYRIMOZ-PLAQ INJ PSORIASI .....	23	IDAMYCIN PFS INJ 20/20ML.....	108
HYSINGLA ER TAB 100 MG .....	34	IDAMYCIN PFS INJ 5MG/5ML.....	108
HYSINGLA ER TAB 120 MG .....	34	<i>idarubicin hcl iv inj 10 mg/10ml (1</i>	
HYSINGLA ER TAB 20 MG .....	34	<i>mg/ml)</i> .....	108
HYSINGLA ER TAB 30 MG .....	34	<i>idarubicin hcl iv inj 20 mg/20ml (1</i>	
HYSINGLA ER TAB 40 MG .....	34	<i>mg/ml)</i> .....	108
HYSINGLA ER TAB 60 MG .....	34	<i>idarubicin hcl iv inj 5 mg/5ml (1</i>	
HYSINGLA ER TAB 80 MG .....	34	<i>mg/ml)</i> .....	108
HYZAAR TAB 100-12.5.....	96	IDELVION SOL 1000UNIT .....	200
HYZAAR TAB 100-25 .....	96	IDELVION SOL 2000UNIT .....	200
HYZAAR TAB 50-12.5 .....	95	IDELVION SOL 250UNIT .....	200
<b>I</b>		IDELVION SOL 3500UNIT .....	200
<i>ibandronate sodium iv soln 3 mg/3ml</i>		IDELVION SOL 500UNIT .....	200
<i>(base equivalent)</i> .....	181	IDHIFA TAB 100MG .....	111
<i>ibandronate sodium tab 150 mg (base</i>		IDHIFA TAB 50MG .....	111
<i>equivalent)</i> .....	181	<i>iferex 150 cap forte</i> .....	207
IBRANCE CAP 100MG.....	110	IFEX INJ 1GM .....	101
IBRANCE CAP 125MG.....	110	IFEX INJ 3GM .....	101
IBRANCE CAP 75MG .....	110	<i>ifosfamide for inj 1 gm</i> .....	101
IBRANCE TAB 100MG.....	110	IFOSFAMIDE INJ 3GM .....	101
IBRANCE TAB 125MG.....	111	<i>ifosfamide iv inj 1 gm/20ml (50 mg/ml)</i>	
IBRANCE TAB 75MG .....	110	.....	101
IBSRELA TAB 50MG.....	194	<i>ifosfamide iv inj 3 gm/60ml (50 mg/ml)</i>	
<i>ibuprofen-famotidine tab 800-26.6 mg</i>		.....	101
.....	27	IGALMI MIS 120MCG .....	209
<i>ibuprofen lysine iv soln 10 mg/ml (base</i>		IGALMI MIS 180MCG .....	209
<i>equivalent)</i> .....	26	ILARIS INJ 150MG/ML .....	25
<i>ibuprofen susp 100 mg/5ml</i> .....	27	ILEVRO DRO 0.3% OP.....	253
<i>ibuprofen tab 400 mg</i> .....	27	ILUMYA SOL 100MG/ML .....	163
<i>ibuprofen tab 600 mg</i> .....	27	ILUVIEN IMP 0.19MG .....	251
<i>ibuprofen tab 800 mg</i> .....	27	<i>imatinib mesylate tab 100 mg (base</i>	
<i>ibu tab 400mg</i> .....	26	<i>equivalent)</i> .....	111
<i>ibu tab 600mg</i> .....	26	<i>imatinib mesylate tab 400 mg (base</i>	
<i>ibu tab 800mg</i> .....	26	<i>equivalent)</i> .....	111
<i>ibutilide fumarate inj 1 mg/10ml</i> .....	52	IMBRUVICA CAP 140MG .....	111
ICAR-C PLUS TAB.....	207	IMBRUVICA CAP 70MG.....	111
<i>icatibant acetate subcutaneous soln</i>		IMBRUVICA SUS 70MG/ML.....	111
<i>pref syr 30 mg/3ml</i> .....	202	IMBRUVICA TAB 140MG .....	111
<i>iclevia tab</i> .....	148	IMBRUVICA TAB 280MG .....	111
ICLUSIG TAB 10MG .....	111	IMBRUVICA TAB 420MG .....	111
ICLUSIG TAB 15MG .....	111	IMBRUVICA TAB 560MG .....	111
ICLUSIG TAB 30MG .....	111	IMCIVREE INJ 10MG/ML.....	15
ICLUSIG TAB 45MG .....	111	IMFINZI INJ 120/2.4.....	105
<i>icosapent ethyl cap 0.5 gm</i> .....	86	IMFINZI INJ 500/10.....	105

<i>imipenem-cilastatin intravenous for soln 250 mg</i> .....	44	INDERAL XL CAP 120MG.....	135
<i>imipenem-cilastatin intravenous for soln 500 mg</i> .....	44	INDERAL XL CAP 80MG .....	135
<i>imipramine hcl tab 10 mg</i> .....	72	INDOCIN SUP 50MG .....	27
<i>imipramine hcl tab 25 mg</i> .....	72	INDOCIN SUS 25MG/5ML .....	27
<i>imipramine hcl tab 50 mg</i> .....	72	<i>indomethacin cap 25 mg</i> .....	27
<i>imipramine pamoate cap 100 mg</i> .....	72	<i>indomethacin cap 50 mg</i> .....	27
<i>imipramine pamoate cap 125 mg</i> .....	72	<i>indomethacin cap er 75 mg</i> .....	27
<i>imipramine pamoate cap 150 mg</i> .....	72	<i>indomethacin sodium iv for soln 1 mg</i> .....	27
<i>imipramine pamoate cap 75 mg</i> .....	72	INDOMETHACIN SUP 100MG.....	27
<i>imiquimod cream 3.75%</i> .....	169	<i>indomethacin suppos 50 mg</i> .....	27
<i>imiquimod cream 5%</i> .....	169	INFANRIX INJ .....	274
IMITREX INJ 4MG/0.5 .....	226	INFASURF SUS 35MG/ML.....	267
IMITREX INJ 6MG/0.5 .....	226	INFED INJ 50MG/ML .....	207
IMITREX SPR 20MG/ACT .....	226	INFINITY TES BLD GLUC .....	177
IMITREX SPR 5MG/ACT .....	226	INFLECTRA INJ 100MG.....	193
IMITREX TAB 100MG .....	226	INFUGEM SOL 1200MG .....	102
IMITREX TAB 25MG .....	226	INFUGEM SOL 1300MG .....	102
IMITREX TAB 50MG .....	226	INFUGEM SOL 1400MG .....	102
IMJUDO INJ 25/1.25 .....	105	INFUGEM SOL 1500MG .....	102
IMJUDO INJ 300/15ML .....	105	INFUGEM SOL 1600MG .....	102
IMLYGIC INJ .....	116	INFUGEM SOL 1700MG .....	102
IMOGAM RABIE INJ 300/2ML .....	255	INFUGEM SOL 1800MG .....	102
IMOVAX RABIE INJ 2.5/ML.....	280	INFUGEM SOL 2000MG .....	102
IMPAVIDO CAP 50MG .....	43	INFUGEM SOL 2200MG .....	102
IMPOYZ CRE 0.025% .....	167	INFUMORPH INJ 10MG/ML.....	34
IMUBOLIC CAP.....	234	INFUMORPH INJ 25MG/ML.....	34
IMURAN TAB 50MG.....	233	INGREZZA CAP 40-80MG.....	261
IMVEXXY MAIN SUP 10MCG .....	281	INGREZZA CAP 40MG .....	261
IMVEXXY MAIN SUP 4MCG .....	281	INGREZZA CAP 60MG .....	261
IMVEXXY STRT SUP 10MCG .....	281	INGREZZA CAP 80MG .....	261
IMVEXXY STRT SUP 4MCG .....	281	INJECTAFER INJ 100/2ML.....	207
<i>inatal gt tab</i> .....	239	INJECTAFER INJ 750/15ML .....	207
INBRIJA CAP 42MG.....	118	INLYTA TAB 1MG.....	104
<i>incassia tab 0.35mg</i> .....	152	INLYTA TAB 5MG.....	104
INCONTROL MIS LANC 28G .....	219	INNOPRAN XL CAP 120MG .....	135
INCONTROL MIS LANC 30G .....	219	INNOPRAN XL CAP 80MG.....	135
INCONTROL MIS LANC 33G .....	219	INQOVI TAB 35-100MG .....	109
INCRELEX INJ 40MG/4ML .....	184	INREBIC CAP 100MG .....	111
INCRUSE ELPT INH 62.5MCG .....	52	INS ASP PROT INJ FLEXPEN.....	78
<i>indapamide tab 1.25 mg</i> .....	181	INS DEGL FLX INJ 100UNIT .....	78
<i>indapamide tab 2.5 mg</i> .....	181	INS DEGL FLX INJ 200UNIT .....	78
INDERAL LA CAP 120MG.....	135	INSPIRA TAB 25MG .....	98
INDERAL LA CAP 160MG.....	135	INSPIRA TAB 50MG .....	98
INDERAL LA CAP 60MG .....	135	INSULIN DEGL INJ 100UNIT .....	78
INDERAL LA CAP 80MG .....	135	INSULIN GLAR INJ 100U/ML .....	78
		INSULIN GLAR SOL 100U/ML.....	78

INSULIN SYRG MIS 0.3/29G .....	224	INVELTYS SUS 1% .....	251
INSULIN SYRG MIS 0.3/30G .....	224	INVIRASE TAB 500MG.....	128
INSULIN SYRG MIS 0.3/31G .....	224	INVOKAMET TAB 150-1000 .....	74
INSULIN SYRG MIS 0.5/28G .....	224	INVOKAMET TAB 150-500 .....	74
INSULIN SYRG MIS 0.5/29G .....	225	INVOKAMET TAB 50-1000 .....	74
INSULIN SYRG MIS 0.5/30G .....	225	INVOKAMET TAB 50-500MG .....	74
INSULIN SYRG MIS 0.5/31G .....	225	INVOKAMET XR TAB 150-1000.....	74
INSULIN SYRG MIS 1ML .....	225	INVOKAMET XR TAB 150-500 .....	74
INSULIN SYRG MIS 1ML/27G .....	225	INVOKAMET XR TAB 50-1000 .....	74
INSULIN SYRG MIS 1ML/28G .....	225	INVOKAMET XR TAB 50-500MG.....	74
INSULIN SYRG MIS 1ML/29G .....	225	INVOKANA TAB 100MG .....	79
INSULIN SYRG MIS 1ML/30G .....	225	INVOKANA TAB 300MG .....	79
INSULIN SYRG MIS 1ML/31G .....	225	<i>iodine solution strong 5% (lugol's)</i> ..	229
INSULIN SYRG MIS 2/27.5G .....	225	IODINE TIN 2% .....	127
INTELENCE TAB 100MG.....	128	<i>iodoquimez cre 1-1.9%</i> .....	161
INTELENCE TAB 200MG.....	128	IONOSOL-MB INJ D5W.....	228
INTELENCE TAB 25MG .....	128	IONSYS PAD 40MCG/AC.....	34
INTERMEZZO SUB 1.75MG .....	209	IOPIDINE SOL 1% OP .....	249
INTERMEZZO SUB 3.5MG .....	209	IPOL INJ INACTIVE .....	280
IN TOUCH LAN MIS 30G .....	219	<i>ipratropium-albuterol nebu soln 0.5-</i>	
IN TOUCH TES BLOOD .....	177	<i>2.5(3) mg/3ml</i> .....	55
INTRALIPID INJ 20% .....	246	<i>ipratropium bromide inhal soln 0.02%</i>	
INTRALIPID INJ 30% .....	246	.....	52
INTRAROSA SUP 6.5MG .....	281	<i>ipratropium bromide nasal soln 0.03%</i>	
INTRON A INJ 10MU .....	114	<i>(21 mcg/spray)</i> .....	244
INTRON A INJ 50MU .....	114	<i>ipratropium bromide nasal soln 0.06%</i>	
<i>introvale tab</i> .....	148	<i>(42 mcg/spray)</i> .....	244
INTUNIV TAB 1MG.....	16	<i>irbesartan-hydrochlorothiazide tab</i>	
INTUNIV TAB 2MG.....	16	<i>150-12.5 mg</i> .....	96
INTUNIV TAB 3MG.....	16	<i>irbesartan-hydrochlorothiazide tab</i>	
INTUNIV TAB 4MG.....	16	<i>300-12.5 mg</i> .....	96
INVANZ INJ 1GM.....	44	<i>irbesartan tab 150 mg</i> .....	92
INVEGA HAFYE INJ 1092MG.....	121	<i>irbesartan tab 300 mg</i> .....	92
INVEGA HAFYE INJ 1560MG.....	121	<i>irbesartan tab 75 mg</i> .....	92
INVEGA SUST INJ 117/0.75.....	121	IRESSA TAB 250MG.....	106
INVEGA SUST INJ 156MG/ML.....	121	<i>irinotecan hcl inj 100 mg/5ml (20</i>	
INVEGA SUST INJ 234/1.5.....	121	<i>mg/ml)</i> .....	116
INVEGA SUST INJ 39/0.25.....	121	<i>irinotecan hcl inj 300 mg/15ml (20</i>	
INVEGA SUST INJ 78/0.5ML.....	121	<i>mg/ml)</i> .....	116
INVEGA TAB 1.5MG .....	121	<i>irinotecan hcl inj 40 mg/2ml (20</i>	
INVEGA TAB 3MG .....	121	<i>mg/ml)</i> .....	116
INVEGA TAB 6MG .....	121	<i>irinotecan hcl inj 500 mg/25ml (20</i>	
INVEGA TAB 9MG .....	121	<i>mg/ml)</i> .....	116
INVEGA TRINZ INJ 273MG .....	121	ISENTRESS CHW 100MG .....	128
INVEGA TRINZ INJ 410MG .....	121	ISENTRESS CHW 25MG.....	128
INVEGA TRINZ INJ 546MG .....	121	ISENTRESS HD TAB 600MG .....	128
INVEGA TRINZ INJ 819MG.....	121	ISENTRESS POW 100MG .....	128

ISENTRESS TAB 400MG .....	128	IXEMPRA KIT INJ 45MG.....	116
<i>isibloom tab</i> .....	148	IXIARO INJ.....	280
<i>isoflurane inhal soln</i> .....	196	IXINITY INJ 1000UNIT .....	200
ISOLYTE-P INJ /D5W .....	228	IXINITY INJ 1500UNIT .....	200
ISOLYTE-S INJ.....	228	IXINITY INJ 2000UNIT .....	200
ISOLYTE-S INJ PH 7.4.....	228	IXINITY INJ 250UNIT .....	200
<i>isoniazid inj 100 mg/ml</i> .....	99	IXINITY INJ 3000UNIT .....	200
<i>isoniazid syrup 50 mg/5ml</i> .....	99	IXINITY INJ 500UNIT .....	200
<i>isoniazid tab 100 mg</i> .....	99	IYUZEH DRO 0.005% .....	253
<i>isoniazid tab 300 mg</i> .....	99	IZERVAY SOL 2/0.1ML .....	250
<i>isoproterenol hcl inj 0.2 mg/ml</i> .....	55	<b>J</b>	
ISOPTO ATROP SOL 1% OP .....	248	JADENU SPRKL GRA 180MG.....	81
ISORDIL TAB 40MG.....	48	JADENU SPRKL GRA 360MG.....	81
ISORDIL TAB 5MG.....	48	JADENU SPRKL GRA 90MG .....	81
<i>isosorbide dinitrate-hydralazine hcl tab</i>		JADENU TAB 180MG .....	81
<i>20-37.5 mg</i> .....	141	JADENU TAB 360MG .....	81
<i>isosorbide dinitrate tab 10 mg</i> .....	48	JADENU TAB 90MG.....	81
<i>isosorbide dinitrate tab 20 mg</i> .....	48	<i>jaimiess tab</i> .....	148
<i>isosorbide dinitrate tab 30 mg</i> .....	48	JAKAFI TAB 10MG .....	111
<i>isosorbide dinitrate tab 40 mg</i> .....	48	JAKAFI TAB 15MG .....	111
<i>isosorbide dinitrate tab 5 mg</i> .....	48	JAKAFI TAB 20MG .....	111
<i>isosorbide mononitrate tab 10 mg</i> ...	48	JAKAFI TAB 25MG .....	111
<i>isosorbide mononitrate tab 20 mg</i> ...	48	JAKAFI TAB 5MG .....	111
<i>isosorbide mononitrate tab er 24hr 120</i>		JALYN CAP.....	197
<i>mg</i> .....	48	<i>jantoven tab 10mg</i> .....	57
<i>isosorbide mononitrate tab er 24hr 30</i>		<i>jantoven tab 1mg</i> .....	56
<i>mg</i> .....	48	<i>jantoven tab 2.5mg</i> .....	57
<i>isosorbide mononitrate tab er 24hr 60</i>		<i>jantoven tab 2mg</i> .....	57
<i>mg</i> .....	48	<i>jantoven tab 3mg</i> .....	57
<i>isotretinoin cap 10 mg</i> .....	159	<i>jantoven tab 4mg</i> .....	57
<i>isotretinoin cap 20 mg</i> .....	159	<i>jantoven tab 5mg</i> .....	57
<i>isotretinoin cap 25 mg</i> .....	159	<i>jantoven tab 6mg</i> .....	57
<i>isotretinoin cap 30 mg</i> .....	159	<i>jantoven tab 7.5mg</i> .....	57
<i>isotretinoin cap 35 mg</i> .....	159	JANUMET TAB 50-1000 .....	74
<i>isotretinoin cap 40 mg</i> .....	159	JANUMET TAB 50-500MG .....	74
<i>isradipine cap 2.5 mg</i> .....	138	JANUMET XR TAB 100-1000.....	74
<i>isradipine cap 5 mg</i> .....	138	JANUMET XR TAB 50-1000 .....	74
ISTALOL SOL 0.5% OP.....	247	JANUMET XR TAB 50-500MG.....	74
ISTODAX OVR INJ 10MG .....	111	JANUVIA TAB 100MG.....	76
ISTURISA TAB 10MG .....	181	JANUVIA TAB 25MG.....	76
ISTURISA TAB 1MG .....	181	JANUVIA TAB 50MG.....	76
ISTURISA TAB 5MG .....	181	JARDIANCE TAB 10MG.....	79
<i>itraconazole cap 100 mg</i> .....	84	JARDIANCE TAB 25MG.....	79
<i>itraconazole oral soln 10 mg/ml</i> .....	84	<i>jasmiel tab 3-0.02mg</i> .....	148
<i>ivermectin cream 1%</i> .....	171	JATENZO CAP 158MG .....	41
<i>ivermectin tab 3 mg</i> .....	43	JATENZO CAP 198MG .....	41
IXEMPRA KIT INJ 15MG.....	116	JATENZO CAP 237MG .....	41

<i>javygtor pak 100mg</i> .....	185	KADCYLA INJ 100MG .....	105
<i>javygtor pow 500mg</i> .....	185	KADCYLA INJ 160MG .....	105
<i>javygtor tab 100mg</i> .....	185	<i>kaitlib fe chw</i> .....	148
JAYPIRCA TAB 100MG .....	111	KALBITOR INJ 10MG/ML .....	202
JAYPIRCA TAB 50MG .....	111	KALETRA SOL .....	128
JEMPERLI SOL 500/10ML .....	105	KALETRA TAB 100-25MG .....	128
<i>jencycla tab 0.35mg</i> .....	152	KALETRA TAB 200-50MG .....	128
JENTADUETO TAB 2.5-1000 .....	74	<i>kalliga tab</i> .....	148
JENTADUETO TAB 2.5-500 .....	74	KALYDECO GRA 13.4MG .....	267
JENTADUETO TAB 2.5-850 .....	74	KALYDECO PAK 25MG .....	267
JENTADUETO TAB XR .....	74	KALYDECO PAK 50MG .....	267
JEVTANA INJ 60/1.5ML .....	116	KALYDECO PAK 75MG .....	267
<i>jinteli tab 1mg-5mcg</i> .....	189	KALYDECO TAB 150MG .....	267
JIVI INJ 1000UNIT .....	200	KAMDOY EMU .....	171
JIVI INJ 2000UNIT .....	200	KAMELEON LUB MIS COLORS .....	215
JIVI INJ 3000UNIT .....	200	KAMELEON MIS TRI-COLR .....	215
JIVI INJ 500 UNIT .....	200	KANJINTI INJ 420MG .....	104
JOENJA TAB 70MG .....	232	KANJINTI SOL 150MG .....	104
<i>jolessa tab</i> .....	148	KANUMA INJ 20/10ML .....	185
JORNAY PM CAP 100MG ER .....	18	KAPSPARGO CAP 100MG .....	134
JORNAY PM CAP 20MG ER .....	17	KAPSPARGO CAP 200MG .....	134
JORNAY PM CAP 40MG ER .....	17	KAPSPARGO CAP 25MG .....	134
JORNAY PM CAP 60MG ER .....	17	KAPSPARGO CAP 50MG .....	134
JORNAY PM CAP 80MG ER .....	17	KAPVAY TAB 0.1 MG .....	16
<i>joyeaux tab 0.1-20</i> .....	148	KARBINAL ER SUS 4MG/5ML .....	85
JUBLIA SOL 10% .....	161	<i>kariva tab 28 day</i> .....	148
<i>juleber tab</i> .....	148	KATERZIA SUS 1MG/ML .....	138
JULUCA TAB 50-25MG .....	128	KAZANO 12.5- TAB 1000MG .....	74
<i>junel 1/20 tab</i> .....	148	KAZANO 12.5- TAB 500MG .....	74
<i>junel 1.5/30 tab</i> .....	148	KCL/D5W/LACT INJ 20MEQ/L .....	228
<i>junel fe 24 tab 1/20</i> .....	148	KCL/D5W/NACL INJ 0.15/0.2 .....	228
<i>junel fe tab 1/20</i> .....	148	KCL/D5W/NACL INJ 0.3/0.9% .....	228
<i>junel fe tab 1.5/30</i> .....	148	<i>kcl 10 meq/l (0.075%) in dextrose 5%</i> & <i>nacl 0.45% inj</i> .....	228
JUXTAPID CAP 10MG .....	89	<i>kcl 20 meq/l (0.15%) in dextrose 5% &amp;</i> <i>nacl 0.2% inj</i> .....	228
JUXTAPID CAP 20MG .....	89	<i>kcl 20 meq/l (0.15%) in dextrose 5% &amp;</i> <i>nacl 0.45% inj</i> .....	228
JUXTAPID CAP 30MG .....	89	<i>kcl 20 meq/l (0.15%) in dextrose 5% &amp;</i> <i>nacl 0.9% inj</i> .....	228
JUXTAPID CAP 5MG .....	89	<i>kcl 20 meq/l (0.15%) in nacl 0.45% inj</i> .....	228
JYNARQUE PAK 15MG .....	188	<i>kcl 20 meq/l (0.15%) in nacl 0.9% inj</i> .....	228
JYNARQUE PAK 30-15MG .....	188	<i>kcl 30 meq/l (0.224%) in dextrose 5%</i> & <i>nacl 0.45% inj</i> .....	228
JYNARQUE PAK 45-15MG .....	188		
JYNARQUE PAK 60-30MG .....	188		
JYNARQUE PAK 90-30MG .....	188		
JYNARQUE TAB 15MG .....	188		
JYNARQUE TAB 30MG .....	188		
JYNNEOS INJ .....	280		
<b>K</b>			
KABIVEN EMU .....	246		

<i>kcl 40 meq/l (0.3%) in dextrose 5% &amp; nacl 0.45% inj</i> .....	228	<i>ketoprofen cap 50 mg</i> .....	27
<i>kcl 40 meq/l (0.3%) in nacl 0.9% inj</i> .....	228	<i>ketoprofen cap er 24hr 200 mg</i> .....	27
KEDRAB SOL 150UNITS .....	255	<i>ketorolac tromethamine im inj 60 mg/2ml (30 mg/ml)</i> .....	27
KEDRAB SOL 300/2ML .....	255	<i>ketorolac tromethamine inj 15 mg/ml</i> .....	27
KELARX GEL .....	172	<i>ketorolac tromethamine inj 30 mg/ml</i> .....	27
<i>kelnor 1/50 tab</i> .....	148	<i>ketorolac tromethamine ophth soln 0.4%</i> .....	253
<i>kelnor tab 1/35</i> .....	148	<i>ketorolac tromethamine ophth soln 0.5%</i> .....	253
KENALOG-10 INJ 10MG/ML.....	154	<i>ketorolac tromethamine tab 10 mg</i> ...27	
KENALOG-40 INJ 40MG/ML.....	154	KEVEYIS TAB 50MG .....	179
KENALOG-80 INJ.....	154	KEVZARA INJ 150/1.14 .....	25
KENALOG AER SPRAY .....	167	KEVZARA INJ 200/1.14 .....	25
KENGREAL SOL 50MG .....	203	KEYFOLIC TAB .....	237
KEPIVANCE INJ 6.25MG .....	114	KEYTRUDA INJ 100MG/4M .....	105
KEPPRA INJ 500/5ML.....	61	KHAPZORY SOL 175MG .....	115
KEPPRA SOL 100MG/ML .....	61	KHAPZORY SOL 300MG .....	115
KEPPRA TAB 1000MG.....	61	KIMMTRAK SOL 100MCG .....	105
KEPPRA TAB 250MG .....	61	KIMONO COLOR MIS.....	215
KEPPRA TAB 500MG .....	61	KIMONO MICRO MIS THIN .....	215
KEPPRA TAB 750MG .....	61	KIMONO MICRO MIS THIN + .....	215
KEPPRA XR TAB 500MG.....	61	KIMONO MICRO MIS THIN PLS .....	215
KEPPRA XR TAB 750MG.....	61	KIMONO MIS LUBRICAT .....	215
KERAGEL GEL WOUND .....	173	KIMONO MIS SENSATIO .....	215
KERAGELT GEL .....	173	KIMONO PLUS MIS LUBRICAT .....	215
KERAMATRIX MIS 10X10CM.....	173	KIMONO PLUS MIS SPERMICI.....	215
KERAMATRIX MIS 2X3CM .....	173	KIMONO PS MIS LUBRICAT .....	215
KERAMATRIX MIS 5X5CM .....	173	KIMONO PS MIS PLUS.....	215
KERASTAT CRE .....	173	KIMONO SENA MIS PLUS .....	215
KERASTAT GEL 5%.....	173	KIMONO SPEC MIS .....	215
KERENDIA TAB 10MG.....	187	KIMYRSA INJ 1200MG.....	45
KERENDIA TAB 20MG.....	187	KINERET INJ .....	25
KERYDIN SOL 5%.....	161	KINNEY MIS LANCETS.....	220
KESIMPTA INJ 20/.4ML .....	262	KINNEY THIN MIS LANCETS .....	220
KETALAR INJ 100MG/ML.....	195	KINRIX INJ.....	274
KETALAR INJ 10MG/ML .....	195	KISQALI 200 PAK FEMARA .....	109
KETALAR INJ 50MG/ML .....	195	KISQALI 400 PAK FEMARA .....	109
<i>ketamine hcl inj 100 mg/ml</i> .....	196	KISQALI 600 PAK FEMARA .....	109
<i>ketamine hcl inj 10 mg/ml</i> .....	195	KISQALI TAB 200DOSE .....	111
<i>ketamine hcl inj 50 mg/ml</i> .....	196	KISQALI TAB 400DOSE .....	111
KETAMINE INJ 10MG/ML .....	196	KISQALI TAB 600DOSE .....	111
<i>ketoconazole cream 2%</i> .....	161	KITABIS PAK NEB 300/5ML .....	20
<i>ketoconazole foam 2%</i> .....	161	KLARON LOT 10% .....	159
<i>ketoconazole shampoo 2%</i> .....	161	KLISYRI OIN 1% .....	162
<i>ketoconazole tab 200 mg</i> .....	85		
<i>ketodan aer 2%</i> .....	161		
<i>ketoprofen cap 25 mg</i> .....	27		

KLONOPIN TAB 0.5MG .....	60	KRAZATI TAB 200MG .....	111
KLONOPIN TAB 1MG .....	60	KRINTAFEL TAB 150MG .....	99
KLONOPIN TAB 2MG .....	60	KRISTALOSE PAK 10GM .....	211
<i>klor-con/ef tab 25meq fr</i> .....	230	KRISTALOSE PAK 20GM .....	211
<i>klor-con 10 tab 10meq er</i> .....	230	KROGER BLOOD TES GLUCOSE .....	177
<i>klor-con 8 tab 8meq er</i> .....	230	KROGER LANCE MIS .....	220
<i>klor-con m10 tab 10meq er</i> .....	230	KROGER LANCE MIS 26G.....	220
<i>klor-con m15 tab 15meq er</i> .....	230	KROGER LANCE MIS THIN .....	220
<i>klor-con m20 tab 20meq er</i> .....	230	KROGER LANCE MIS THIN 30G.....	220
<i>klor-con pak 20meq</i> .....	230	KROGER TES .....	177
KLOXXADO SPR 8MG .....	82	KRYSTEXXA INJ 8MG/ML .....	198
<i>kls aspirin tab 81mg ec</i> .....	31	K-TAB TAB 10MEQ CR.....	230
<i>kls diclofen gel 1%</i> .....	160	K-TAB TAB 20MEQ.....	230
<i>kls quit2 gum 2mg</i> .....	265	<i>k-tan plus cap</i> .....	207
<i>kls quit2 loz 2mg</i> .....	265	<i>kurvelo tab 0.15/30</i> .....	148
<i>kls quit4 gum 4mg</i> .....	265	KUVAN POW 100MG .....	185
<i>kls quit4 loz 4mg</i> .....	265	KUVAN POW 500MG .....	185
KOATE-DVI INJ 1000UNIT .....	200	KUVAN TAB 100MG.....	185
KOATE-DVI INJ 500UNIT .....	200	KYLEENA IUD 19.5MG .....	152
KOATE INJ 1000UNIT.....	200	K-Y ME & YOU MIS EX LUBRI .....	215
KOATE INJ 250UNIT .....	200	K-Y ME & YOU MIS INTENSE .....	215
KOATE INJ 500 UNIT .....	200	KYMRIAH SUS.....	106
KOGENATE FS INJ 1000UNIT .....	200	KYNMOBI MIS 10MG .....	118
KOGENATE FS INJ 2000UNIT .....	200	KYNMOBI MIS 15MG .....	118
KOGENATE FS INJ 250UNIT .....	200	KYNMOBI MIS 20MG .....	118
KOGENATE FS INJ 3000UNIT .....	200	KYNMOBI MIS 25MG .....	118
KOGENATE FS INJ 500UNIT .....	200	KYNMOBI MIS 30MG .....	118
KOMBIGLYZ XR TAB 2.5-1000.....	74	KYPROLIS SOL 10MG .....	111
KOMBIGLYZ XR TAB 5-1000MG.....	74	KYPROLIS SOL 30MG .....	111
KOMBIGLYZ XR TAB 5-500MG.....	74	KYPROLIS SOL 60MG .....	111
KONVOMEPEP SUS 2-84/ML .....	277	KYZATREX CAP 100MG .....	41
KORLYM TAB 300MG.....	76	KYZATREX CAP 150MG .....	41
KORSUVA INJ 50MCG/ML .....	236	KYZATREX CAP 200MG .....	41
KOSELUGO CAP 10MG.....	111	<b>L</b>	
KOSELUGO CAP 25MG.....	111	<i>labetalol hcl iv soln 5 mg/ml</i> .....	133
KOSHR PRENAT TAB 30-1MG .....	239	<i>labetalol hcl tab 100 mg</i> .....	133
<i>kourzeq pst 0.1%</i> .....	236	<i>labetalol hcl tab 200 mg</i> .....	133
KOVALTRY INJ 1000UNIT .....	200	<i>labetalol hcl tab 300 mg</i> .....	133
KOVALTRY INJ 2000UNIT .....	200	LABELALOL INJ 20/4ML.....	133
KOVALTRY INJ 250UNIT .....	200	LABELALOL INJ NACL.....	133
KOVALTRY INJ 3000UNIT .....	200	<i>lacosamide iv inj 200 mg/20ml (10</i>	
KOVALTRY INJ 500UNIT .....	200	<i>mg/ml)</i> .....	61
<i>kp aspirin tab 81mg ec</i> .....	31	<i>lacosamide oral solution 10 mg/ml</i> ...	61
K-PHOS TAB .....	229	<i>lacosamide tab 100 mg</i> .....	61
K-PHOS TAB NEUTRAL .....	230	<i>lacosamide tab 150 mg</i> .....	61
K-PHOS TAB NO 2 .....	196	<i>lacosamide tab 200 mg</i> .....	62
<i>k-prime tab 25meq ef</i> .....	230	<i>lacosamide tab 50 mg</i> .....	61

LACRISERT MIS 5MG OP .....	247	<i>lamotrigine orally disintegrating tab 25</i>	62
<i>lactated ringer's for irrigation</i> .....	234	<i>mg</i> .....	62
<i>lactated ringer's solution</i> .....	228	<i>lamotrigine orally disintegrating tab 50</i>	62
<i>lactic acid (ammonium lactate) cream</i>		<i>mg</i> .....	62
12% .....	169	<i>lamotrigine tab 100 mg</i> .....	62
<i>lactic acid (ammonium lactate) lotion</i>		<i>lamotrigine tab 150 mg</i> .....	62
12% .....	169	<i>lamotrigine tab 200 mg</i> .....	62
LACTIC ACID CRE E.....	169	<i>lamotrigine tab 25 mg</i> .....	62
LACTIC ACID LOT 10% .....	169	<i>lamotrigine tab 25 mg (42) &amp; 100 mg</i>	
<i>lactojen cap</i> .....	80	(7) starter kit.....	62
<i>lactulose (encephalopathy) solution 10</i>		<i>lamotrigine tab 35 x 25 mg starter kit</i>	
<i>gm/15ml</i> .....	194	.....	62
LACTULOSE PAK 10GM.....	211	<i>lamotrigine tab 84 x 25 mg &amp; 14 x 100</i>	
<i>lactulose solution 10 gm/15ml</i> .....	211	<i>mg starter kit</i> .....	62
LAGEVRIO CAP 200MG.....	132	<i>lamotrigine tab chewable dispersible 25</i>	
LAMICTAL CHW 25MG.....	62	<i>mg</i> .....	62
LAMICTAL CHW 5MG .....	62	<i>lamotrigine tab chewable dispersible 5</i>	
LAMICTAL KIT START 35 .....	62	<i>mg</i> .....	62
LAMICTAL KIT START 49 .....	62	<i>lamotrigine tab disint 25 (14) &amp; 50 mg</i>	
LAMICTAL KIT START 98 .....	62	(14) & 100 mg (7) kit .....	62
LAMICTAL ODT KIT.....	62	<i>lamotrigine tab er 24hr 100 mg</i> .....	63
LAMICTAL ODT TAB 100MG .....	62	<i>lamotrigine tab er 24hr 200 mg</i> .....	63
LAMICTAL ODT TAB 200MG .....	62	<i>lamotrigine tab er 24hr 250 mg</i> .....	63
LAMICTAL ODT TAB 25MG .....	62	<i>lamotrigine tab er 24hr 25 mg</i> .....	62
LAMICTAL ODT TAB 50MG .....	62	<i>lamotrigine tab er 24hr 300 mg</i> .....	63
LAMICTAL TAB 100MG .....	62	<i>lamotrigine tab er 24hr 50 mg</i> ....	62, 63
LAMICTAL TAB 150MG .....	62	LAMPIT TAB 120MG.....	44
LAMICTAL TAB 200MG .....	62	LAMPIT TAB 30MG.....	44
LAMICTAL TAB 25MG.....	62	LAMZEDE INJ 10MG.....	185
LAMICTAL XR KIT.....	62	LANCET CARRY MIS CASE.....	220
LAMICTAL XR TAB 100MG .....	62	LANCET MICRO MIS THIN 33G .....	220
LAMICTAL XR TAB 200MG .....	62	LANCETS MICR MIS THIN 33G.....	220
LAMICTAL XR TAB 250MG .....	62	LANCETS MIS .....	220
LAMICTAL XR TAB 25MG .....	62	LANCETS MIS 21G.....	220
LAMICTAL XR TAB 300MG .....	62	LANCETS MIS 21G COLR .....	220
LAMICTAL XR TAB 50MG .....	62	LANCETS MIS 26G.....	220
<i>lamivudine oral soln 10 mg/ml</i> .....	128	LANCETS MIS 28G.....	220
<i>lamivudine tab 100 mg (hbv)</i> .....	131	LANCETS MIS 30G.....	220
<i>lamivudine tab 150 mg</i> .....	128	LANCETS MIS 33G.....	220
<i>lamivudine tab 300 mg</i> .....	128	LANCETS MIS ORIGINAL .....	220
<i>lamivudine-zidovudine tab 150-300 mg</i>		LANCETS MIS THIN .....	220
.....	128	LANCETS MIS THIN 26G.....	220
<i>lamotrigine orally disintegrating tab</i>		LANCETS MIS THIN 30G.....	220
100 mg .....	62	LANCETS SUPR MIS THIN 28G .....	220
<i>lamotrigine orally disintegrating tab</i>		LANCET STAND MIS 21G .....	220
200 mg .....	62	LANCETS THIN MIS .....	220
		LANCETS THIN MIS 26G.....	220



LANCETS ULTR MIS THIN .....	220	LAZANDA SPR 400MCG .....	34
LANCET SUPER MIS THIN 30G.....	220	LECITHIN GRA .....	246
LANCET ULTRA MIS THIN 30G.....	220	LEDIP-SOFOSB TAB 90-400MG.....	131
LANOXIN INJ 0.25MG/1.....	140	<i>leena tab</i> .....	148
LANOXIN INJ 0.5/2ML.....	140	<i>leflunomide tab 10 mg</i> .....	29
LANOXIN PED INJ 0.1MG/ML.....	140	<i>leflunomide tab 20 mg</i> .....	29
LANOXIN TAB 0.0625MG .....	140	LEMTRADA INJ 12/1.2ML.....	262
LANOXIN TAB 0.125MG .....	140	<i>lenalidomide cap 10 mg</i> .....	232
LANOXIN TAB 0.25MG.....	140	<i>lenalidomide cap 15 mg</i> .....	232
LANREOTIDE INJ 120/.5ML.....	187	<i>lenalidomide cap 20 mg</i> .....	232
<i>lansoprazole cap delayed release 15</i>		<i>lenalidomide cap 25 mg</i> .....	232
<i>mg</i> .....	276	<i>lenalidomide cap 5 mg</i> .....	232
<i>lansoprazole cap delayed release 30</i>		<i>lenalidomide caps 2.5 mg</i> .....	232
<i>mg</i> .....	276	LENVIMA CAP 10 MG.....	104
<i>lansoprazole tab delayed release orally</i>		LENVIMA CAP 12MG .....	104
<i>disintegrating 15 mg</i> .....	276	LENVIMA CAP 14 MG.....	104
<i>lansoprazole tab delayed release orally</i>		LENVIMA CAP 18 MG.....	104
<i>disintegrating 30 mg</i> .....	276	LENVIMA CAP 20 MG.....	104
<i>lanthanum carbonate chew tab 1000</i>		LENVIMA CAP 24 MG.....	104
<i>mg (elemental)</i> .....	195	LENVIMA CAP 4MG .....	104
<i>lanthanum carbonate chew tab 500 mg</i>		LENVIMA CAP 8 MG .....	104
<i>(elemental)</i> .....	195	LEQVIO SOL.....	90
<i>lanthanum carbonate chew tab 750 mg</i>		LESCOL XL TAB 80MG.....	89
<i>(elemental)</i> .....	195	<i>lessina tab</i> .....	148
LANTUS INJ 100/ML .....	78	LETAIRIS TAB 10MG .....	143
LANTUS SOLOS INJ 100/ML.....	78	LETAIRIS TAB 5MG.....	143
<i>lapatinib ditosylate tab 250 mg (base</i>		<i>letrozole tab 2.5 mg</i> .....	107
<i>equiv)</i> .....	111	<i>leucovorin calcium for inj 100 mg</i> ...	115
<i>larin 24 tab fe 1/20</i> .....	148	<i>leucovorin calcium for inj 200 mg</i> ...	115
<i>larin fe tab 1/20</i> .....	148	<i>leucovorin calcium for inj 350 mg</i> ...	115
<i>larin fe tab 1.5/30</i> .....	148	<i>leucovorin calcium for inj 500 mg</i> ...	115
<i>larin tab 1/20</i> .....	148	<i>leucovorin calcium for inj 50 mg</i> .....	115
<i>larin tab 1.5/30</i> .....	148	<i>leucovorin calcium inj 100 mg/10ml</i>	
LASIX TAB 20MG.....	180	<i>(10 mg/ml)</i> .....	115
LASIX TAB 40MG.....	180	<i>leucovorin calcium inj 500 mg/50ml</i>	
LASIX TAB 80MG.....	180	<i>(10 mg/ml)</i> .....	115
LASTACFT SOL 0.25% .....	253	<i>leucovorin calcium tab 10 mg</i> .....	115
<i>latanoprost ophth soln 0.005%</i> .....	253	<i>leucovorin calcium tab 15 mg</i> .....	115
LATANOPROST SOL 0.005% .....	253	<i>leucovorin calcium tab 25 mg</i> .....	115
LATUDA TAB 120MG .....	120	<i>leucovorin calcium tab 5 mg</i> .....	115
LATUDA TAB 20MG .....	120	LEUKERAN TAB 2MG .....	101
LATUDA TAB 40MG .....	120	LEUKINE INJ 250MCG .....	205
LATUDA TAB 60MG .....	120	<i>leuprolide acetate inj kit 5 mg/ml</i> ...	107
LATUDA TAB 80MG .....	120	<i>levulbuterol hcl soln nebu 0.31 mg/3ml</i>	
<i>layolis fe chw</i> .....	148	<i>(base equiv)</i> .....	55
LAZANDA SPR 100MCG .....	34	<i>levulbuterol hcl soln nebu 0.63 mg/3ml</i>	
LAZANDA SPR 300MCG .....	34	<i>(base equiv)</i> .....	55

<i>levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv) .....</i>	<i>191</i>
<i>levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv) .....</i>	<i>249</i>
<i>levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv) .....</i>	<i>249</i>
<i>levamlodipine maleate tab 2.5 mg ..</i>	<i>191</i>
<i>levamlodipine maleate tab 5 mg .....</i>	<i>191</i>
<i>LEVBID TAB 0.375 ER .....</i>	<i>191</i>
<i>LEVEMIR INJ .....</i>	<i>191</i>
<i>LEVEMIR INJ FLEXTOUC .....</i>	<i>191</i>
<i>LEVETIR/NACL SOL 250/50ML .....</i>	<i>191</i>
<i>LEVETIRACETA INJ 10MG/ML .....</i>	<i>191</i>
<i>LEVETIRACETA INJ 15MG/ML .....</i>	<i>191</i>
<i>LEVETIRACETA INJ 5MG/ML .....</i>	<i>191</i>
<i>levetiracetam inj 500 mg/5ml (100 mg/ml) .....</i>	<i>115</i>
<i>levetiracetam in sodium chloride iv soln 1000 mg/100ml .....</i>	<i>115</i>
<i>levetiracetam in sodium chloride iv soln 1500 mg/100ml .....</i>	<i>115</i>
<i>levetiracetam in sodium chloride iv soln 500 mg/100ml .....</i>	<i>115</i>
<i>levetiracetam oral soln 100 mg/ml ...</i>	<i>115</i>
<i>levetiracetam tab 1000 mg .....</i>	<i>148</i>
<i>levetiracetam tab 250 mg .....</i>	<i>148</i>
<i>levetiracetam tab 500 mg .....</i>	<i>148</i>
<i>levetiracetam tab 750 mg .....</i>	<i>148</i>
<i>levetiracetam tab er 24hr 500 mg ...</i>	<i>148</i>
<i>levetiracetam tab er 24hr 750 mg ...</i>	<i>148</i>
<i>LEVICYN GEL .....</i>	<i>149</i>
<i>LEVICYN SOL DERMAL .....</i>	<i>149</i>
<i>levobunolol hcl ophth soln 0.5% .....</i>	<i>151</i>
<i>levocarnitine inj 200 mg/ml .....</i>	<i>151</i>
<i>levocarnitine oral soln 1 gm/10ml (10%) .....</i>	<i>151</i>
<i>levocarnitine tab 330 mg .....</i>	<i>151</i>
<i>levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml) .....</i>	<i>151</i>
<i>levocetirizine dihydrochloride tab 5 mg .....</i>	<i>151</i>
<i>levofloxacin in d5w iv soln 250 mg/50ml .....</i>	<i>151</i>
<i>levofloxacin in d5w iv soln 500 mg/100ml .....</i>	<i>151</i>
<i>levofloxacin in d5w iv soln 750 mg/150ml .....</i>	<i>151</i>
<i>levofloxacin iv soln 25 mg/ml .....</i>	<i>191</i>
<i>levofloxacin ophth soln 0.5% .....</i>	<i>249</i>
<i>levofloxacin ophth soln 1.5% .....</i>	<i>249</i>
<i>levofloxacin oral soln 25 mg/ml .....</i>	<i>191</i>
<i>levofloxacin tab 250 mg .....</i>	<i>191</i>
<i>levofloxacin tab 500 mg .....</i>	<i>191</i>
<i>levofloxacin tab 750 mg .....</i>	<i>191</i>
<i>levoleucovorin calcium for iv inj 50 mg (base equiv) .....</i>	<i>115</i>
<i>levoleucovorin calcium iv soln pf 175 mg/17.5ml (base equiv) .....</i>	<i>115</i>
<i>levoleucovorin calcium iv soln pf 250 mg/25ml (base equiv) .....</i>	<i>115</i>
<i>levonest tab .....</i>	<i>148</i>
<i>levonor-eth est tab 0.15-0.02/0.025/0.03 mg &amp; eth est 0.01 mg .....</i>	<i>148</i>
<i>levonorgestrel &amp; ethinyl estradiol (91-day) tab 0.15-0.03 mg .....</i>	<i>148</i>
<i>levonorgestrel &amp; ethinyl estradiol tab 0.15 mg-30 mcg .....</i>	<i>149</i>
<i>levonorgestrel &amp; ethinyl estradiol tab 0.1 mg-20 mcg .....</i>	<i>148</i>
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg .....</i>	<i>149</i>
<i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg .....</i>	<i>149</i>
<i>levonorgestrel tab 1.5 mg .....</i>	<i>151</i>
<i>levonorg-eth est tab 0.1-0.02mg(84) &amp; eth est tab 0.01mg(7) .....</i>	<i>148</i>
<i>levonorg-eth est tab 0.15-0.03mg(84) &amp; eth est tab 0.01mg(7) .....</i>	<i>148</i>
<i>LEVOPHED INJ 1MG/ML .....</i>	<i>282</i>
<i>levora-28 tab 0.15/30 .....</i>	<i>149</i>
<i>levorphanol tartrate tab 2 mg .....</i>	<i>34</i>
<i>levothyroxine sodium cap 100 mcg .....</i>	<i>271</i>
<i>levothyroxine sodium cap 112 mcg .....</i>	<i>271</i>
<i>levothyroxine sodium cap 125 mcg .....</i>	<i>271</i>
<i>levothyroxine sodium cap 137 mcg .....</i>	<i>271</i>
<i>levothyroxine sodium cap 13 mcg .....</i>	<i>271</i>
<i>levothyroxine sodium cap 150 mcg .....</i>	<i>271</i>
<i>levothyroxine sodium cap 175 mcg .....</i>	<i>271</i>
<i>levothyroxine sodium cap 200 mcg .....</i>	<i>271</i>
<i>levothyroxine sodium cap 25 mcg .....</i>	<i>271</i>
<i>levothyroxine sodium cap 50 mcg .....</i>	<i>271</i>
<i>levothyroxine sodium cap 75 mcg .....</i>	<i>271</i>
<i>levothyroxine sodium cap 88 mcg .....</i>	<i>271</i>

<i>levothyroxine sodium for iv inj 100 mcg</i>	LEXAPRO TAB 10MG .....	69
.....271	LEXAPRO TAB 20MG .....	69
<i>levothyroxine sodium for iv inj 200 mcg</i>	LEXAPRO TAB 5MG.....	69
.....271	LEXIVA SUS 50MG/ML.....	128
<i>levothyroxine sodium for iv inj 500 mcg</i>	LEXIVA TAB 700MG .....	128
.....271	LIALDA TAB 1.2GM .....	193
<i>levothyroxine sodium tab 100 mcg</i>	LIBERTY NEXT TES GEN .....	177
.271	LIBERTY TES .....	177
<i>levothyroxine sodium tab 112 mcg</i>	LIBRAX CAP 5-2.5MG .....	275
.271	LIBTAYO INJ 350/7ML.....	105
<i>levothyroxine sodium tab 125 mcg</i>	LIDO/TETRA INJ 0.4-0.2%.....	212
.271	LIDOCAINE CRE TETRACAI .....	170
<i>levothyroxine sodium tab 137 mcg</i>	LIDOCAINE HC INJ 200/10ML .....	212
.271	<i>lidocaine hcl(cardiac) iv pf soln pref syr</i>	
<i>levothyroxine sodium tab 150 mcg</i>	100 mg/5ml (2%) .....	51
.271	<i>lidocaine hcl (cardiac) iv pf soln pref</i>	
<i>levothyroxine sodium tab 175 mcg</i>	<i>syr 50 mg/5ml(1%)</i> .....	51
.271	<i>lidocaine hcl (cardiac) iv soln pref syr</i>	
<i>levothyroxine sodium tab 200 mcg</i>	100 mg/5ml (2%) .....	51
.271	<i>lidocaine hcl (cardiac) iv soln pref syr</i>	
<i>levothyroxine sodium tab 25 mcg</i>	50 mg/5ml (1%) .....	51
...271	<i>lidocaine hcl laryngotracheal soln 4%</i>	
<i>levothyroxine sodium tab 300 mcg</i>	.....	236
.271	<i>lidocaine hcl local inj 0.5%</i> .....	212
<i>levothyroxine sodium tab 50 mcg</i>	<i>lidocaine hcl local inj 1%</i> .....	212
...271	<i>lidocaine hcl local inj 2%</i> .....	212
<i>levothyroxine sodium tab 75 mcg</i>	<i>lidocaine hcl local preservative free (pf)</i>	
...271	<i>inj 0.5%</i> .....	212
<i>levothyroxine sodium tab 88 mcg</i>	<i>lidocaine hcl local preservative free (pf)</i>	
...271	<i>inj 1.5%</i> .....	213
LEVOTHYROXIN INJ 100MCG .....	<i>lidocaine hcl local preservative free (pf)</i>	
271	<i>inj 1%</i> .....	212
LEVOTHYROXIN INJ 200MCG .....	<i>lidocaine hcl local preservative free (pf)</i>	
271	<i>inj 2%</i> .....	213
LEVOTHYROXIN INJ 500MCG .....	<i>lidocaine hcl local preservative free (pf)</i>	
271	<i>inj 4%</i> .....	213
<i>levo-t tab 100mcg</i> .....	<i>lidocaine hcl soln 4%</i> .....	170
271	<i>lidocaine hcl urethral/mucosal gel 2%</i>	
<i>levo-t tab 112mcg</i> .....	.....	170
271	<i>lidocaine hcl urethral/mucosal gel</i>	
<i>levo-t tab 125mcg</i> .....	<i>prefilled syringe 2%</i> .....	170
271	<i>lidocaine hcl viscous soln 2%</i> .....	236
<i>levo-t tab 137mcg</i> .....	<i>lidocaine inj 0.5% w/ epinephrine-</i>	
271	1:200000 .....	212
<i>levo-t tab 150mcg</i> .....	<i>lidocaine inj 1.5% w/ epinephrine-</i>	
271	1:200000 .....	212
<i>levo-t tab 175mcg</i> .....	LIDOCAINE INJ 1%.....	213
271		
<i>levo-t tab 200 mcg</i> .....		
271		
<i>levo-t tab 25mcg</i> .....		
270		
<i>levo-t tab 300 mcg</i> .....		
271		
<i>levo-t tab 50mcg</i> .....		
270		
<i>levo-t tab 75mcg</i> .....		
270		
<i>levo-t tab 88mcg</i> .....		
271		
<i>levoxyl tab 100mcg</i> .....		
271		
<i>levoxyl tab 112mcg</i> .....		
272		
<i>levoxyl tab 125mcg</i> .....		
272		
<i>levoxyl tab 137mcg</i> .....		
272		
<i>levoxyl tab 150mcg</i> .....		
272		
<i>levoxyl tab 175mcg</i> .....		
272		
<i>levoxyl tab 200mcg</i> .....		
272		
<i>levoxyl tab 25mcg</i> .....		
271		
<i>levoxyl tab 50mcg</i> .....		
271		
<i>levoxyl tab 75mcg</i> .....		
271		
<i>levoxyl tab 88mcg</i> .....		
271		
LEVSIN/SL SUB 0.125MG .....		
275		
LEVSIN TAB 0.125MG .....		
275		
LEVULAN KERA SOL 20% .....		
162		

<i>lidocaine inj 1% w/ epinephrine-1:100000</i> .....	212	LIPOFEN CAP 50MG .....	88
LIDOCAINE INJ 2% .....	213	LIQREV SUS 10MG/ML .....	143
<i>lidocaine inj 2% w/ epinephrine-1:100000</i> .....	212	<i>lisdexamfetamine dimesylate cap 10 mg</i> .....	13
<i>lidocaine inj 2% w/ epinephrine-1:200000</i> .....	212	<i>lisdexamfetamine dimesylate cap 20 mg</i> .....	13
<i>lidocaine inj 2% w/ epinephrine-1:50000</i> .....	212	<i>lisdexamfetamine dimesylate cap 30 mg</i> .....	13
LIDOCAINE INJ 20MG/ML .....	51	<i>lisdexamfetamine dimesylate cap 40 mg</i> .....	13
<i>lidocaine iv infusion in d5w inj 4 mg/ml</i> .....	51	<i>lisdexamfetamine dimesylate cap 50 mg</i> .....	13
<i>lidocaine iv infusion in d5w inj 8 mg/ml</i> .....	51	<i>lisdexamfetamine dimesylate cap 60 mg</i> .....	13
<i>lidocaine oint 5%</i> .....	170	<i>lisdexamfetamine dimesylate cap 70 mg</i> .....	13
<i>lidocaine patch 5%</i> .....	170	<i>lisdexamfetamine dimesylate chew tab 10 mg</i> .....	13
<i>lidocaine-prilocaine cream 2.5-2.5%</i> .....	170	<i>lisdexamfetamine dimesylate chew tab 20 mg</i> .....	13
<i>lidocan pad 5%</i> .....	170	<i>lisdexamfetamine dimesylate chew tab 30 mg</i> .....	14
LIDODERM DIS 5% .....	170	<i>lisdexamfetamine dimesylate chew tab 40 mg</i> .....	14
LIDOTREX GEL 2% .....	173	<i>lisdexamfetamine dimesylate chew tab 50 mg</i> .....	14
LIFESCAN MIS UNISTIK2 .....	220	<i>lisdexamfetamine dimesylate chew tab 60 mg</i> .....	14
LILETTA IUD 52MG .....	152	<i>lisinopril &amp; hydrochlorothiazide tab 10-12.5 mg</i> .....	96
LINCOCIN INJ 300MG/ML .....	46	<i>lisinopril &amp; hydrochlorothiazide tab 20-12.5 mg</i> .....	96
<i>lincomycin hcl inj 300 mg/ml</i> .....	46	<i>lisinopril &amp; hydrochlorothiazide tab 20-25 mg</i> .....	96
<i>lindane shampoo 1%</i> .....	172	<i>lisinopril tab 10 mg</i> .....	91
<i>linezolid for susp 100 mg/5ml</i> .....	47	<i>lisinopril tab 2.5 mg</i> .....	90
<i>linezolid iv soln 600 mg/300ml (2 mg/ml)</i> .....	47	<i>lisinopril tab 20 mg</i> .....	91
<i>linezolid tab 600 mg</i> .....	47	<i>lisinopril tab 30 mg</i> .....	91
LINZESS CAP 145MCG .....	194	<i>lisinopril tab 40 mg</i> .....	91
LINZESS CAP 290MCG .....	194	<i>lisinopril tab 5 mg</i> .....	91
LINZESS CAP 72MCG .....	194	LITETOUCH MIS LANCETS .....	220
LIORESAL INT INJ 0.05MG/1 .....	242	LITE TOUCH MIS LANCETS .....	220
LIORESAL INT INJ 10MG/20 .....	242	<i>lithium carbonate cap 150 mg</i> .....	120
LIORESAL INT INJ 10MG/5ML .....	242	<i>lithium carbonate cap 300 mg</i> .....	120
LIORESAL INT INJ 40MG/20 .....	242	<i>lithium carbonate cap 600 mg</i> .....	120
<i>liothyronine sodium iv soln 10 mcg/ml</i> .....	272	<i>lithium carbonate tab 300 mg</i> .....	120
<i>liothyronine sodium tab 25 mcg</i> .....	272	<i>lithium carbonate tab er 300 mg</i> .....	120
<i>liothyronine sodium tab 50 mcg</i> .....	272		
<i>liothyronine sodium tab 5 mcg</i> .....	272		
LIPITOR TAB 10MG .....	89		
LIPITOR TAB 20MG .....	89		
LIPITOR TAB 40MG .....	89		
LIPITOR TAB 80MG .....	89		
LIPOFEN CAP 150MG .....	88		

<i>lithium carbonate tab er 450 mg</i> ....	120	LOREEV XR CAP 1.5MG .....	50
LITHOBID TAB 300MG CR.....	120	LOREEV XR CAP 1MG.....	50
LITHOSTAT TAB 250MG.....	197	LOREEV XR CAP 2MG.....	50
LIVALO TAB 1MG .....	89	LOREEV XR CAP 3MG.....	50
LIVALO TAB 2MG .....	89	LORTAB ELX 10-300MG.....	39
LIVALO TAB 4MG .....	89	<i>loryna tab 3-0.02mg</i> .....	149
LIVMARLI SOL 9.5MG/ML .....	193	<i>lorzone tab 375mg</i> .....	242
LIVTENCITY TAB 200MG.....	130	<i>lorzone tab 750mg</i> .....	242
<i>lmd 10%/d5w inj</i> .....	202	<i>losartan potassium &amp;</i>	
<i>lmd 10%/nacl inj 0.9%</i> .....	202	<i>hydrochlorothiazide tab 100-12.5 mg</i>	
LOCOID LIPO CRE 0.1% .....	167	.....	96
LOCOID LOT 0.1%.....	167	<i>losartan potassium &amp;</i>	
LODOSYN TAB 25MG .....	117	<i>hydrochlorothiazide tab 100-25 mg</i>	96
<i>loestrin 21 tab 1.5/30</i> .....	149	<i>losartan potassium &amp;</i>	
<i>loestrin fe tab 1/20</i> .....	149	<i>hydrochlorothiazide tab 50-12.5 mg</i>	
<i>loestrin fe tab 1.5/30</i> .....	149	.....	96
<i>loestrin tab 1/20-21</i> .....	149	<i>losartan potassium tab 100 mg</i> .....	92
<i>lojaimiess tab</i> .....	149	<i>losartan potassium tab 25 mg</i> .....	92
LOKELMA PAK 10GM .....	235	<i>losartan potassium tab 50 mg</i> .....	92
LOKELMA PAK 5GM.....	235	LOSEASONIQUE TAB.....	149
LO LOESTRIN TAB 1-10-10 .....	149	LOTEMAX GEL 0.5% .....	251
LOMAIRA TAB 8MG.....	15	LOTEMAX OIN 0.5% .....	251
LOMOTIL TAB 2.5MG .....	80	LOTEMAX SM GEL 0.38% .....	251
LONGS LANCET MIS STANDARD .....	220	LOTEMAX SUS 0.5% .....	251
LONGS LANCET MIS THIN.....	220	LOTENSIN HCT TAB 10-12.5 .....	96
LONGS LANCET MIS ULTRA TH.....	220	LOTENSIN HCT TAB 20-12.5.....	96
LONHALA MAGN SOL 25MCG .....	52	LOTENSIN HCT TAB 20-25MG .....	96
LONSURF TAB 15-6.14.....	109	LOTENSIN TAB 10MG.....	91
LONSURF TAB 20-8.19.....	109	LOTENSIN TAB 20MG.....	91
<i>loperamide hcl cap 2 mg</i> .....	80	LOTENSIN TAB 40MG.....	91
LOPID TAB 600MG .....	88	<i>loteprednol etabonate ophth gel 0.5%</i>	
<i>lopinavir-ritonavir soln 400-100</i>		.....	251
<i>mg/5ml (80-20 mg/ml)</i> .....	128	<i>loteprednol etabonate ophth susp 0.5%</i>	
<i>lopinavir-ritonavir tab 100-25 mg</i> ...	128	.....	251
<i>lopinavir-ritonavir tab 200-50 mg</i> ...	128	LOTREL CAP 10-20MG .....	96
LOPRESSOR TAB 100MG .....	134	LOTREL CAP 10-40MG .....	96
LOPRESSOR TAB 50MG .....	134	LOTREL CAP 5-10MG .....	96
LOPROX SHA 1%.....	161	LOTREL CAP 5-20MG .....	96
LOPROX SUS 0.77% .....	161	LOTREXONE CAP 1.5MG .....	30
<i>lorazepam conc 2 mg/ml</i> .....	50	LOTREXONE CAP 4.5MG .....	30
<i>lorazepam inj 2 mg/ml</i> .....	50	LOTRONEX TAB 0.5MG.....	194
<i>lorazepam inj 4 mg/ml</i> .....	50	LOTRONEX TAB 1MG.....	194
<i>lorazepam tab 0.5 mg</i> .....	50	<i>lovastatin tab 10 mg</i> .....	89
<i>lorazepam tab 1 mg</i> .....	50	<i>lovastatin tab 20 mg</i> .....	89
<i>lorazepam tab 2 mg</i> .....	50	<i>lovastatin tab 40 mg</i> .....	89
LORBRENA TAB 100MG .....	111	LOVAZA CAP 1GM .....	87
LORBRENA TAB 25MG .....	111	LOVENOX INJ 100MG/ML.....	59

LOVENOX INJ 120/0.8 .....	59	LUPRON DEPOT INJ 7.5MG .....	107
LOVENOX INJ 150MG/ML.....	59	<i>lurasidone hcl tab 120 mg</i> .....	120
LOVENOX INJ 30/0.3ML .....	58	<i>lurasidone hcl tab 20 mg</i> .....	120
LOVENOX INJ 300/3ML .....	59	<i>lurasidone hcl tab 40 mg</i> .....	120
LOVENOX INJ 40/0.4ML .....	59	<i>lurasidone hcl tab 60 mg</i> .....	120
LOVENOX INJ 60/0.6ML .....	59	<i>lurasidone hcl tab 80 mg</i> .....	120
LOVENOX INJ 80/0.8ML .....	59	LUTATHERA SOL 370MBQ.....	114
<i>low dose asa tab 81mg</i> .....	31	<i>lutera tab</i> .....	149
<i>low-ogestrel tab</i> .....	149	LUXAMEND CRE .....	173
<i>loxapine succinate cap 10 mg</i> .....	123	LUXIQ AER 0.12% .....	167
<i>loxapine succinate cap 25 mg</i> .....	123	LUZU CRE 1%.....	161
<i>loxapine succinate cap 50 mg</i> .....	123	LYBALVI TAB 10-10MG.....	261
<i>loxapine succinate cap 5 mg</i> .....	123	LYBALVI TAB 15-10MG.....	261
<i>lo-zumandimi tab 3-0.02mg</i> .....	149	LYBALVI TAB 20-10MG.....	261
<i>lubiprostone cap 24 mcg</i> .....	192	LYBALVI TAB 5-10MG .....	261
<i>lubiprostone cap 8 mcg</i> .....	192	LYDEXA CRE 4.12%.....	170
LUCEMYRA TAB 0.18MG .....	259	<i>lyleq tab 0.35mg</i> .....	152
LUCENTIS INJ 0.3MG .....	248	<i>lyllana dis 0.025mg</i> .....	190
LUCENTIS INJ 0.5MG .....	248	<i>lyllana dis 0.0375mg</i> .....	191
LUCENTIS SOL 0.3MG .....	248	<i>lyllana dis 0.05mg</i> .....	190
LUCENTIS SOL 0.5MG .....	248	<i>lyllana dis 0.075mg</i> .....	191
LUER-LOK SYR MIS 1ML/20G .....	225	<i>lyllana dis 0.1mg</i> .....	190
LUGOLS SOL IODINE .....	127	LYNPARZA TAB 100MG.....	111
<i>luliconazole cream 1%</i> .....	161	LYNPARZA TAB 150MG.....	111
LUMAKRAS TAB 120MG .....	111	LYRICA CAP 100MG .....	63
LUMAKRAS TAB 320MG .....	111	LYRICA CAP 150MG .....	63
LUMIGAN SOL 0.01%.....	253	LYRICA CAP 200MG .....	63
LUMIZYME INJ 50MG .....	185	LYRICA CAP 225MG .....	63
LUMOXITI SOL 1MG.....	105	LYRICA CAP 25MG .....	63
LUMRYZ PAK 6GM .....	259	LYRICA CAP 300MG .....	63
LUMRYZ PAK 7.5GM.....	259	LYRICA CAP 50MG .....	63
LUMRYZ PAK 9GM .....	259	LYRICA CAP 75MG .....	63
LUMRYZ PKG 4.5GM .....	259	LYRICA CR TAB 165MG .....	263
LUNESTA TAB 1MG .....	209	LYRICA CR TAB 330MG .....	263
LUNESTA TAB 2MG .....	209	LYRICA CR TAB 82.5MG .....	263
LUNESTA TAB 3MG .....	209	LYRICA SOL 20MG/ML .....	63
LUNSUMIO INJ 1MG/ML.....	105	LYSODREN TAB 500MG .....	107
LUNSUMIO INJ 30MG/30 .....	105	LYSTEDA TAB 650MG.....	207
LUPR DEP-PED INJ 11.25MG .....	184	LYTGOBI TAB 4MG.....	112
LUPR DEP-PED INJ 15MG.....	184	LYUMJEV INJ 100UT/ML .....	78
LUPR DEP-PED INJ 3M 30MG.....	184	LYUMJEV KWPN INJ 100UT/ML.....	78
LUPR DEP-PED INJ 7.5MG.....	184	LYUMJEV KWPN INJ 200UT/ML.....	78
LUPRON DEPOT INJ 11.25MG.....	107	LYUMJEV TMPO INJ 100UT/ML .....	78
LUPRON DEPOT INJ 22.5MG.....	107	LYVISPAAH GRA 10MG .....	242
LUPRON DEPOT INJ 3.75MG.....	107	LYVISPAAH GRA 20MG .....	242
LUPRON DEPOT INJ 30MG .....	107	LYVISPAAH GRA 5MG.....	242
LUPRON DEPOT INJ 45MG .....	107	<i>lyza tab 0.35mg</i> .....	152

<b>M</b>	
MACI MIS.....	241
MACROBID CAP 100MG.....	47
MACRODANTIN CAP 100MG.....	47
MACRODANTIN CAP 25MG.....	47
MACRODANTIN CAP 50MG.....	47
<i>mafenide acetate packet for topical soln 5% (50 gm) .....</i>	<i>164</i>
MAGNESIUM SU INJ 20/500ML.....	229
MAGNESIUM SU INJ 2GM/50ML.....	229
MAGNESIUM SU INJ 40G/1000.....	229
MAGNESIUM SU INJ 4G/100ML .....	229
MAGNESIUM SU INJ 50% .....	229
MAGNESIUM SU INJ 80MG/ML.....	229
<i>magnesium sulfate in dextrose 5% iv soln 1 gm/100ml .....</i>	<i>229</i>
<i>magnesium sulfate inj 50% .....</i>	<i>229</i>
<i>magnesium sulfate iv soln 20 gm/500ml (40 mg/ml) .....</i>	<i>229</i>
<i>magnesium sulfate iv soln 2 gm/50ml (40 mg/ml).....</i>	<i>229</i>
<i>magnesium sulfate iv soln 40 gm/1000ml (40 mg/ml).....</i>	<i>229</i>
<i>magnesium sulfate iv soln 4 gm/100ml (40 mg/ml).....</i>	<i>229</i>
<i>magnesium sulfate iv soln 4 gm/50ml (80 mg/ml).....</i>	<i>229</i>
MAKENA INJ 250MG/ML .....	259
MAKENA INJ 275MG.....	259
MALARONE TAB 250-100.....	98
MALARONE TAB 62.5-25 .....	98
<i>malathion lotion 0.5%.....</i>	<i>172</i>
<i>manganese chloride inj 0.1 mg/ml..</i>	<i>229</i>
<i>mannitol iv soln 20% .....</i>	<i>180</i>
<i>mannitol iv soln 25% .....</i>	<i>180</i>
<i>maraviroc tab 150 mg.....</i>	<i>128</i>
<i>maraviroc tab 300 mg.....</i>	<i>128</i>
MARCAINE/EPI INJ 0.25% .....	212
MARCAINE/EPI INJ 0.5%.....	212
MARCAINE INJ 0.25%.....	213
MARCAINE INJ 0.5%.....	213
MARCAINE INJ 0.75%.....	213
MARCAINE INJ SPINAL.....	213
MAR-COF CG LIQ 225-7.5.....	156
MARINOL CAP 2.5MG.....	83
<i>marlissa tab 0.15/30 .....</i>	<i>149</i>
MARNATAL-F CAP .....	239
MARPLAN TAB 10MG.....	68
MATULANE CAP 50MG .....	114
<i>matzim la tab 180mg/24 .....</i>	<i>138</i>
<i>matzim la tab 240mg/24 .....</i>	<i>138</i>
<i>matzim la tab 300mg/24 .....</i>	<i>138</i>
<i>matzim la tab 360mg/24 .....</i>	<i>138</i>
<i>matzim la tab 420mg/24 .....</i>	<i>138</i>
MAVENCLAD PAK 10MG(10).....	262
MAVENCLAD PAK 10MG(4) .....	262
MAVENCLAD PAK 10MG(5) .....	262
MAVENCLAD PAK 10MG(6) .....	262
MAVENCLAD PAK 10MG(7) .....	262
MAVENCLAD PAK 10MG(8) .....	262
MAVENCLAD PAK 10MG(9) .....	262
MAVYRET TAB 100-40MG .....	131
MAXALT-MLT TAB 10MG .....	226
MAXALT TAB 10MG.....	226
MAXIDEX SUS 0.1% OP .....	251
MAXIMA BLOOD TES GLUCOSE .....	177
MAXITROL OIN 0.1% OP .....	251
MAXITROL SUS 0.1% OP.....	251
<i>maxi-tuss ac sol.....</i>	<i>156</i>
MAXX MIS LUBRICAT .....	215
MAXX PLUS MIS SPERMICI .....	216
MAXZIDE-25 TAB .....	179
MAXZIDE TAB 75-50.....	179
MAYZENT PAK STARTER .....	262
MAYZENT TAB 0.25MG.....	262
MAYZENT TAB 1MG.....	262
MAYZENT TAB 2MG.....	262
<i>meclizine hcl tab 12.5 mg .....</i>	<i>83</i>
<i>meclizine hcl tab 25 mg .....</i>	<i>83</i>
<i>meclofenamate sodium cap 100 mg..</i>	<i>27</i>
<i>meclofenamate sodium cap 50 mg ...</i>	<i>27</i>
MEDICHOICE MIS LANCET .....	220
MEDLANCE MIS 30G PLUS .....	220
MEDLANCE MIS EXTR 21G .....	220
MEDLANCE MIS LITE 25G .....	220
MEDLANCE MIS PLUS.....	220
MEDLANCE MIS PLUS 30G .....	220
MEDLANCE MIS UNV 21G .....	220
MEDLANCE PLS MIS 0.8MM.....	220
MEDLANCE PLS MIS EXTR 21G .....	220
MEDLANCE PLS MIS LITE 25G .....	220
MEDLANCE PLS MIS UNIV 21G .....	220
MEDROL TAB 16MG .....	154
MEDROL TAB 2MG .....	154

MEDROL TAB 4MG .....	154	<i>memantine hcl tab 5 mg .....</i>	260
MEDROL TAB 8MG .....	154	MEMBRANEBLUE INJ 0.15% .....	252
<i>medroxyprogesterone acetate im susp</i>		MENACTRA INJ.....	279
150 mg/ml .....	152	MENEST TAB 0.3MG.....	191
<i>medroxyprogesterone acetate im susp</i>		MENEST TAB 0.625MG .....	191
<i>prefilled syr 150 mg/ml .....</i>	152	MENEST TAB 1.25MG .....	191
<i>medroxyprogesterone acetate tab 10</i>		MENOPUR INJ 75UNIT.....	182
<i>mg .....</i>	259	MENOSTAR DIS 14MCG.....	191
<i>medroxyprogesterone acetate tab 2.5</i>		MENQUADFI INJ.....	279
<i>mg .....</i>	259	MENVEO INJ .....	279
<i>medroxyprogesterone acetate tab 5 mg</i>		<i>mepерidine hcl inj 100 mg/ml .....</i>	34
.....	259	<i>mepерidine hcl inj 25 mg/ml .....</i>	34
<i>mefenamic acid cap 250 mg .....</i>	27	<i>mepерidine hcl inj 50 mg/ml .....</i>	34
<i>mefloquine hcl tab 250 mg .....</i>	99	<i>mepерidine hcl oral soln 50 mg/5ml..</i>	35
<i>megestrol acetate susp 40 mg/ml...107</i>		<i>mepерidine hcl tab 50 mg.....</i>	35
<i>megestrol acetate susp 625 mg/5ml</i>		MEPHYTON TAB 5MG .....	283
.....	259	<i>meprobamate tab 200 mg .....</i>	49
<i>megestrol acetate tab 20 mg .....</i>	107	<i>meprobamate tab 400 mg .....</i>	49
<i>megestrol acetate tab 40 mg .....</i>	107	MEPRON SUS.....	44
MEIJER BLOOD TES GLUCOSE.....	177	MEPSEVII INJ 10MG/5ML.....	185
MEIJER LANCE MIS COLOR .....	221	<i>mercaptapurine tab 50 mg .....</i>	102
MEIJER LANCE MIS UNIV 21G .....	221	<i>meropenem iv for soln 1 gm .....</i>	44
MEIJER LANCE MIS UNIV 30G .....	221	<i>meropenem iv for soln 500 mg .....</i>	44
MEIJER LANCE MIS UNIVERSA .....	221	<i>merzee cap 1/20 .....</i>	149
MEIJER MIS LANCETS .....	221	<i>mesalamine cap dr 400 mg.....</i>	193
MEIJER TES TRUETEST.....	177	<i>mesalamine cap er 24hr 0.375 gm..</i>	193
MEIJER TES TRUETRAC .....	177	<i>mesalamine cap er 500 mg.....</i>	193
MEKINIST TAB 0.5MG .....	112	<i>mesalamine enema 4 gm .....</i>	193
MEKINIST TAB 2MG.....	112	<i>mesalamine rectal enema 4 gm &amp;</i>	
<i>mektovi tab 15mg .....</i>	112	<i>cleanser wipe kit .....</i>	193
<i>meloxicam cap 10 mg.....</i>	27	<i>mesalamine suppos 1000 mg .....</i>	193
<i>meloxicam cap 5 mg .....</i>	27	<i>mesalamine tab delayed release 1.2</i>	
<i>meloxicam susp 7.5 mg/5ml.....</i>	27	<i>gm .....</i>	193
<i>meloxicam tab 15 mg .....</i>	27	<i>mesalamine tab delayed release 800</i>	
<i>meloxicam tab 7.5 mg .....</i>	27	<i>mg .....</i>	193
<i>melphalan hcl for inj 50 mg (base</i>		<i>mesna inj 100 mg/ml.....</i>	115
<i>equiv) .....</i>	101	MESNEX INJ 1GM .....	115
<i>melphalan tab 2 mg.....</i>	101	MESNEX TAB 400MG.....	115
<i>memantine hcl cap er 24hr 14 mg ..</i>	260	MESTINON SOL 60MG/5ML.....	99
<i>memantine hcl cap er 24hr 21 mg ..</i>	260	MESTINON TAB 60MG.....	99
<i>memantine hcl cap er 24hr 28 mg ..</i>	260	MESTINON TAB TIMESPAN .....	99
<i>memantine hcl cap er 24hr 7 mg ....</i>	260	<i>metaxalone tab 400 mg .....</i>	242
<i>memantine hcl oral solution 2 mg/ml</i>		<i>metaxalone tab 800 mg .....</i>	242
.....	260	<i>metformin hcl oral soln 500 mg/5ml .</i>	75
<i>memantine hcl tab 10 mg.....</i>	260	<i>metformin hcl tab 1000 mg .....</i>	75
<i>memantine hcl tab 28 x 5 mg &amp; 21 x</i>		<i>metformin hcl tab 500 mg.....</i>	75
<i>10 mg titration pack .....</i>	260	<i>metformin hcl tab 850 mg .....</i>	75



<i>metformin hcl tab er 24hr 500 mg</i> ....	75	<i>methotrexate sodium inj pf 50 mg/2ml</i> (25 mg/ml).....	103
<i>metformin hcl tab er 24hr 750 mg</i> ....	75	<i>methotrexate sodium tab 2.5 mg (base</i> <i>equiv)</i> .....	103
<i>metformin hcl tab er 24hr modified</i> <i>release 1000 mg</i> .....	75	<i>methoxsalen rapid cap 10 mg</i> .....	163
<i>metformin hcl tab er 24hr modified</i> <i>release 500 mg</i> .....	75	<i>methscopolamine bromide tab 2.5 mg</i> .....	275
<i>metformin hcl tab er 24hr osmotic</i> <i>1000 mg</i> .....	75	<i>methscopolamine bromide tab 5 mg</i> .....	275
<i>metformin hcl tab er 24hr osmotic 500</i> <i>mg</i> .....	75	METHY-BUPIVA SUS 8-5MG/ML .....	154
METFORMIN TAB 625MG .....	75	METHYL-BUPIV SUS 40-5MG.....	154
METHADO/NACL INJ 1MG/ML.....	35	<i>methylergonovine maleate inj 0.2</i> <i>mg/ml</i> .....	254
<i>methadone con 10mg/ml</i> .....	35	<i>methylergonovine maleate tab 0.2 mg</i> .....	254
<i>methadone hcl conc 10 mg/ml</i> .....	35	METHYLIN SOL 10MG/5ML.....	18
<i>methadone hcl inj 10 mg/ml</i> .....	35	METHYLIN SOL 5MG/5ML .....	18
<i>methadone hcl soln 10 mg/5ml</i> .....	35	<i>methylphenidate hcl cap er 10 mg (cd)</i> .....	18
<i>methadone hcl soln 5 mg/5ml</i> .....	35	<i>methylphenidate hcl cap er 20 mg (cd)</i> .....	18
<i>methadone hcl tab 10 mg</i> .....	35	<i>methylphenidate hcl cap er 24hr 10 mg</i> (la) .....	18
<i>methadone hcl tab 5 mg</i> .....	35	<i>methylphenidate hcl cap er 24hr 10 mg</i> (xr) .....	18
<i>methadone hcl tab for oral susp 40 mg</i> .....	35	<i>methylphenidate hcl cap er 24hr 15 mg</i> (xr) .....	18
METHADONE INJ 10MG/ML.....	35	<i>methylphenidate hcl cap er 24hr 20 mg</i> (la) .....	18
METHADOSE CON 10MG/ML .....	35	<i>methylphenidate hcl cap er 24hr 20 mg</i> (xr) .....	18
METHADOSE SF CON 10MG/ML.....	35	<i>methylphenidate hcl cap er 24hr 30 mg</i> (la) .....	18
<i>methadose tab 40mg</i> .....	35	<i>methylphenidate hcl cap er 24hr 30 mg</i> (xr) .....	18
<i>methamphetamine hcl tab 5 mg</i> .....	14	<i>methylphenidate hcl cap er 24hr 40 mg</i> (la) .....	18
<i>methazolamide tab 25 mg</i> .....	179	<i>methylphenidate hcl cap er 24hr 40 mg</i> (xr) .....	18
<i>methazolamide tab 50 mg</i> .....	179	<i>methylphenidate hcl cap er 24hr 50 mg</i> (xr) .....	18
<i>methenamine hippurate tab 1 gm</i> ...	47	<i>methylphenidate hcl cap er 24hr 60 mg</i> (la) .....	18
<i>methenamine mandelate tab 0.5 gm</i>	47	<i>methylphenidate hcl cap er 24hr 60 mg</i> (xr) .....	18
<i>methenamine mandelate tab 1 gm</i> ...	47	<i>methylphenidate hcl cap er 30 mg (cd)</i> .....	18
<i>methergine tab 0.2mg</i> .....	254		
<i>methimazole tab 10 mg</i> .....	270		
<i>methimazole tab 5 mg</i> .....	270		
METHITEST TAB 10MG.....	41		
<i>methocarbamol inj 1000 mg/10ml</i> ..	242		
<i>methocarbamol tab 500 mg</i> .....	242		
<i>methocarbamol tab 750 mg</i> .....	242		
<i>methotrexate sodium for inj 1 gm</i> ..	102		
<i>methotrexate sodium inj 250 mg/10ml</i> (25 mg/ml).....	103		
<i>methotrexate sodium inj 50 mg/2ml</i> (25 mg/ml).....	103		
<i>methotrexate sodium inj pf 1000</i> <i>mg/40ml (25 mg/ml)</i> .....	103		
<i>methotrexate sodium inj pf 250</i> <i>mg/10ml (25 mg/ml)</i> .....	103		

<i>methylphenidate hcl cap er 40 mg (cd)</i>	
.....	18
<i>methylphenidate hcl cap er 50 mg (cd)</i>	
.....	18
<i>methylphenidate hcl cap er 60 mg (cd)</i>	
.....	18
<i>methylphenidate hcl chew tab 10 mg</i>	18
<i>methylphenidate hcl chew tab 2.5 mg</i>	
.....	18
<i>methylphenidate hcl chew tab 5 mg..</i>	18
<i>methylphenidate hcl soln 10 mg/5ml</i>	18
<i>methylphenidate hcl soln 5 mg/5ml ..</i>	18
<i>methylphenidate hcl tab 10 mg</i> .....	18
<i>methylphenidate hcl tab 20 mg</i> .....	18
<i>methylphenidate hcl tab 5 mg</i> .....	18
<i>methylphenidate hcl tab er 10 mg</i> ....	18
<i>methylphenidate hcl tab er 20 mg</i> ....	18
<i>methylphenidate hcl tab er 24hr 18 mg</i>	
.....	18
<i>methylphenidate hcl tab er 24hr 27 mg</i>	
.....	19
<i>methylphenidate hcl tab er 24hr 36 mg</i>	
.....	19
<i>methylphenidate hcl tab er 24hr 54 mg</i>	
.....	19
<i>methylphenidate hcl tab er osmotic</i>	
<i>release (osm) 18 mg</i> .....	19
<i>methylphenidate hcl tab er osmotic</i>	
<i>release (osm) 27 mg</i> .....	19
<i>methylphenidate hcl tab er osmotic</i>	
<i>release (osm) 36 mg</i> .....	19
<i>methylphenidate hcl tab er osmotic</i>	
<i>release (osm) 54 mg</i> .....	19
<i>methylphenidate td patch 10 mg/9hr</i>	19
<i>methylphenidate td patch 15 mg/9hr</i>	19
<i>methylphenidate td patch 20 mg/9hr</i>	19
<i>methylphenidate td patch 30 mg/9hr</i>	19
METHYLPHENID TAB 72MG ER .....	18
METHYLPR ACE INJ 40MG/ML.....	154
METHYLPR ACE INJ 80MG/ML.....	154
<i>methylprednisolone acetate inj susp 40</i>	
<i>mg/ml</i> .....	154
<i>methylprednisolone acetate inj susp 80</i>	
<i>mg/ml</i> .....	154
<i>methylprednisolone sod succ for inj</i>	
<i>1000 mg (base equiv)</i> .....	154
<i>methylprednisolone sod succ for inj</i>	
<i>125 mg (base equiv)</i> .....	154
<i>methylprednisolone sod succ for inj 40</i>	
<i>mg (base equiv)</i> .....	154
<i>methylprednisolone sod succ for inj</i>	
<i>500 mg (base equiv)</i> .....	154
<i>methylprednisolone tab 16 mg</i> .....	154
<i>methylprednisolone tab 32 mg</i> .....	154
<i>methylprednisolone tab 4 mg</i> .....	154
<i>methylprednisolone tab 8 mg</i> .....	154
<i>methylprednisolone tab therapy pack 4</i>	
<i>mg (21)</i> .....	154
METHYLPREDNI SUS 50MG/ML.....	154
<i>methyltestosterone cap 10 mg</i> .....	41
<i>metoclopramide hcl inj 5 mg/ml (base</i>	
<i>equivalent)</i> .....	192
<i>metoclopramide hcl orally</i>	
<i>disintegrating tab 5 mg (base eq)</i>	192
<i>metoclopramide hcl soln 5 mg/5ml (10</i>	
<i>mg/10ml) (base equiv)</i> .....	192
<i>metoclopramide hcl tab 10 mg (base</i>	
<i>equivalent)</i> .....	192
<i>metoclopramide hcl tab 5 mg (base</i>	
<i>equivalent)</i> .....	192
<i>metolazone tab 10 mg</i> .....	181
<i>metolazone tab 2.5 mg</i> .....	181
<i>metolazone tab 5 mg</i> .....	181
<i>metoprolol &amp; hydrochlorothiazide tab</i>	
<i>100-25 mg</i> .....	96
<i>metoprolol &amp; hydrochlorothiazide tab</i>	
<i>100-50 mg</i> .....	96
<i>metoprolol &amp; hydrochlorothiazide tab</i>	
<i>50-25 mg</i> .....	96
<i>metoprolol succinate tab er 24hr 100</i>	
<i>mg (tartrate equiv)</i> .....	134
<i>metoprolol succinate tab er 24hr 200</i>	
<i>mg (tartrate equiv)</i> .....	134
<i>metoprolol succinate tab er 24hr 25 mg</i>	
<i>(tartrate equiv)</i> .....	134
<i>metoprolol succinate tab er 24hr 50 mg</i>	
<i>(tartrate equiv)</i> .....	134
<i>metoprolol tartrate iv soln 5 mg/5ml</i>	
.....	134
<i>metoprolol tartrate tab 100 mg</i> .....	134
<i>metoprolol tartrate tab 25 mg</i> .....	134
<i>metoprolol tartrate tab 37.5 mg</i> ....	134
<i>metoprolol tartrate tab 50 mg</i> .....	134

<i>metoprolol tartrate tab 75 mg</i> .....	134	MIDAZOL/NACL SOL 5MG/5ML .....	209
METROCREAM CRE 0.75% .....	171	<i>midazolam hcl inj 10 mg/10ml (base equivalent)</i> .....	209
METROGEL GEL 1% .....	172	<i>midazolam hcl inj 10 mg/2ml (base equivalent)</i> .....	209
METROLOTION LOT 0.75% .....	172	<i>midazolam hcl inj 25 mg/5ml (base equivalent)</i> .....	209
<i>metronidazole cap 375 mg</i> .....	43	<i>midazolam hcl inj 2 mg/2ml (base equivalent)</i> .....	209
<i>metronidazole cream 0.75%</i> .....	172	<i>midazolam hcl inj 50 mg/10ml (base equivalent)</i> .....	209
<i>metronidazole gel 0.75%</i> .....	172	<i>midazolam hcl inj 5 mg/5ml (base equivalent)</i> .....	209
<i>metronidazole gel 1%</i> .....	172	<i>midazolam hcl inj 5 mg/ml (base equivalent)</i> .....	209
<i>metronidazole iv soln 500 mg/100ml</i>	43	<i>midazolam hcl inj pf 10 mg/2ml (base equivalent)</i> .....	210
<i>metronidazole lotion 0.75%</i> .....	172	<i>midazolam hcl inj pf 2 mg/2ml (base equivalent)</i> .....	209
<i>metronidazole tab 250 mg</i> .....	43	<i>midazolam hcl inj pf 5 mg/5ml (base equivalent)</i> .....	210
<i>metronidazole tab 500 mg</i> .....	43	<i>midazolam hcl inj pf 5 mg/ml (base equivalent)</i> .....	210
<i>metronidazole vaginal gel 0.75%</i> ....	281	<i>midazolam hcl syrup 2 mg/ml (base equivalent)</i> .....	210
METRONIDAZOL INJ 500MG .....	43	<i>midodrine hcl tab 10 mg</i> .....	282
<i>metyrosine cap 250 mg</i> .....	91	<i>midodrine hcl tab 2.5 mg</i> .....	282
<i>mexiletine hcl cap 150 mg</i> .....	51	<i>midodrine hcl tab 5 mg</i> .....	282
<i>mexiletine hcl cap 200 mg</i> .....	51	<i>migergot sup 2/100</i> .....	225
<i>mexiletine hcl cap 250 mg</i> .....	51	<i>miglitol tab 100 mg</i> .....	73
MG SO4/D5W INJ 10MG/ML.....	229	<i>miglitol tab 25 mg</i> .....	73
MIACALCIN INJ 200/ML.....	181	<i>miglitol tab 50 mg</i> .....	73
MIACALCIN INJ 400/2ML .....	181	<i>miglustat cap 100 mg</i> .....	204
MICAFUNGIN INJ 100MG.....	84	MIGRANAL SPR 4MG/ML.....	225
MICAFUNGIN INJ 50MG.....	84	<i>mili tab 0.25/35</i> .....	149
<i>micafungin sodium for iv soln 100 mg</i>	84	MILLIPRED DP PAK 5MG .....	154
.....	84	MILLIPRED TAB 5MG.....	154
<i>micafungin sodium for iv soln 50 mg</i>	84	<i>milrinone lactate in dextrose 5% iv soln 20 mg/100ml</i> .....	140
MICARDIS HCT TAB 40/12.5 .....	96	<i>milrinone lactate in dextrose 5% iv soln 40 mg/200ml</i> .....	140
MICARDIS HCT TAB 80/12.5 .....	96	<i>milrinone lactate iv soln 10 mg/10ml (base equivalent)</i> .....	140
MICARDIS HCT TAB 80-25MG .....	96	<i>milrinone lactate iv soln 20 mg/20ml (base equivalent)</i> .....	140
MICARDIS TAB 20MG .....	92	<i>milrinone lactate iv soln 50 mg/50ml (base equivalent)</i> .....	140
MICARDIS TAB 40MG .....	92		
MICARDIS TAB 80MG .....	92		
<i>miconazole 3 sup 200mg</i> .....	281		
<i>miconazole-zinc oxide-white petrolatum oint 0.25-15-81.35%</i>	161		
MICORT-HC CRE 2.5% .....	167		
<i>micrystin 24 tab fe 1/20</i> .....	149		
MICRHOGAM PL INJ 50MCG .....	255		
MICROCYN LIQ .....	173		
MICRODOT TES.....	177		
<i>microgestin tab 1/20</i> .....	149		
<i>microgestin tab 1.5/30</i> .....	149		
<i>microgestin tab fe 1/20</i> .....	149		
<i>microgestin tab fe1.5/30</i> .....	149		
MICROLET MIS LANCETS .....	221		
MICROPLEGIA INJ MSA/MSG.....	140		
MICRO THIN MIS LANC 33G.....	221		

<i>mimvey tab 1-0.5mg</i> .....	189	MIRAPEX ER TAB 3MG.....	118
MIMYX CRE .....	171	MIRAPEX ER TAB 4.5MG .....	118
MINASTRIN 24 CHW FE .....	149	MIRCERA INJ 100MCG.....	205
<i>mineral oil</i> .....	211	MIRCERA INJ 150MCG.....	205
MINILINK RT MIS TRANSMIT.....	221	MIRCERA INJ 200MCG.....	205
MINIMED 630G MIS TRANSMIT .....	221	MIRCERA INJ 30MCG .....	205
MINIPRESS CAP 1MG.....	93	MIRCERA INJ 50MCG .....	205
MINIPRESS CAP 2MG.....	93	MIRCERA INJ 75MCG .....	205
MINIPRESS CAP 5MG.....	93	MIRENA IUD SYSTEM .....	152
MINIVELLE DIS 0.025MG.....	191	<i>mirtazapine orally disintegrating tab 15</i>	
MINIVELLE DIS 0.0375MG .....	191	<i>mg</i> .....	67
MINIVELLE DIS 0.05MG .....	191	<i>mirtazapine orally disintegrating tab 30</i>	
MINIVELLE DIS 0.075MG.....	191	<i>mg</i> .....	67
MINIVELLE DIS 0.1MG .....	191	<i>mirtazapine orally disintegrating tab 45</i>	
MINOCIN CAP 50MG .....	269	<i>mg</i> .....	67
MINOCIN INJ 100MG .....	269	<i>mirtazapine tab 15 mg</i> .....	67
<i>minocycline hcl cap 100 mg</i> .....	269	<i>mirtazapine tab 30 mg</i> .....	67
<i>minocycline hcl cap 50 mg</i> .....	269	<i>mirtazapine tab 45 mg</i> .....	67
<i>minocycline hcl cap 75 mg</i> .....	269	<i>mirtazapine tab 7.5 mg</i> .....	67
<i>minocycline hcl cap er 24hr 135 mg</i>		MIRVASO GEL 0.33%.....	172
<i>(base equivalent)</i> .....	269	<i>misoprostol tab 100 mcg</i> .....	277
<i>minocycline hcl cap er 24hr 45 mg</i>		<i>misoprostol tab 200 mcg</i> .....	277
<i>(base equivalent)</i> .....	269	MITIGARE CAP 0.6MG .....	198
<i>minocycline hcl cap er 24hr 90 mg</i>		<i>mitigo inj 10mg/ml</i> .....	35
<i>(base equivalent)</i> .....	269	<i>mitigo inj 25mg/ml</i> .....	35
<i>minocycline hcl tab 100 mg</i> .....	269	<i>mitomycin for iv soln 20 mg</i> .....	109
<i>minocycline hcl tab 50 mg</i> .....	269	<i>mitomycin for iv soln 40 mg</i> .....	109
<i>minocycline hcl tab 75 mg</i> .....	269	<i>mitomycin for iv soln 5 mg</i> .....	109
<i>minocycline hcl tab er 24hr 105 mg</i>	269	MITOMYCIN SOL 20MG .....	109
<i>minocycline hcl tab er 24hr 115 mg</i>	269	MITOSOL KIT 0.2MG.....	249
<i>minocycline hcl tab er 24hr 135 mg</i>	269	<i>mitoxantrone hcl inj conc 20 mg/10ml</i>	
<i>minocycline hcl tab er 24hr 45 mg</i> ..	269	<i>(2 mg/ml)</i> .....	109
<i>minocycline hcl tab er 24hr 55 mg</i> ..	269	<i>mitoxantrone hcl inj conc 25</i>	
<i>minocycline hcl tab er 24hr 65 mg</i> ..	269	<i>mg/12.5ml (2 mg/ml)</i> .....	109
<i>minocycline hcl tab er 24hr 80 mg</i> ..	269	<i>mitoxantrone hcl inj conc 30 mg/15ml</i>	
<i>minocycline hcl tab er 24hr 90 mg</i> ..	269	<i>(2 mg/ml)</i> .....	109
MINOLIRA TAB 105MG .....	269	<i>mm aspirin tab low dose</i> .....	31
MINOLIRA TAB 135MG .....	269	M-M-R II INJ.....	280
<i>minoxidil tab 10 mg</i> .....	98	<i>modafinil tab 100 mg</i> .....	19
<i>minoxidil tab 2.5 mg</i> .....	98	<i>modafinil tab 200 mg</i> .....	19
MIOCHOL-E SOL 1:100 .....	248	MODERNA BIVA INJ BA4/BA5 .....	280
MIOSTAT INJ 0.01% OP .....	248	MODERNA VACC INJ 6M-5Y .....	280
MIRAPEX ER TAB 0.375MG .....	118	MODERNA VAC INJ 50/0.5ML .....	280
MIRAPEX ER TAB 0.75MG .....	118	MODERNA VAC INJ COVID-19 .....	280
MIRAPEX ER TAB 1.5MG.....	118	<i>moexipril hcl tab 15 mg</i> .....	91
MIRAPEX ER TAB 2.25MG .....	118	<i>moexipril hcl tab 7.5 mg</i> .....	91
MIRAPEX ER TAB 3.75MG .....	118	<i>molindone hcl tab 10 mg</i> .....	124

<i>molindone hcl tab 25 mg</i> .....	124	<i>morphine sulfate cap er 24hr 10 mg</i> .35	
<i>molindone hcl tab 5 mg</i> .....	124	<i>morphine sulfate cap er 24hr 20 mg</i> .35	
<i>mometasone furoate cream 0.1%</i> ...	167	<i>morphine sulfate cap er 24hr 30 mg</i> .35	
<i>mometasone furoate nasal susp 50</i>		<i>morphine sulfate cap er 24hr 50 mg</i> .36	
<i>mcg/act</i> .....	244	<i>morphine sulfate cap er 24hr 60 mg</i> .36	
<i>mometasone furoate oint 0.1%</i> .....	167	<i>morphine sulfate cap er 24hr 80 mg</i> .36	
<i>mometasone furoate solution 0.1%</i>		<i>morphine sulfate inj pf 0.5 mg/ml</i> ....36	
<i>(lotion)</i> .....	167	<i>morphine sulfate inj pf 1 mg/ml</i> .....	36
<i>mondoxyne nl cap 100mg</i> .....	269	<i>morphine sulfate iv soln 10 mg/ml</i> ...36	
<i>mondoxyne nl cap 75mg</i> .....	269	<i>morphine sulfate iv soln 4 mg/ml</i> .....	36
MONOLET MIS LANCETS.....	221	<i>morphine sulfate iv soln 8 mg/ml</i> .....	36
MONOLET OPD MIS LANCETS.....	221	<i>morphine sulfate oral soln 100 mg/5ml</i>	
MONOLETTOR MIS LANCETS .....	221	<i>(20 mg/ml)</i> .....	36
<i>mono-lynyah tab 0.25-35</i> .....	149	<i>morphine sulfate oral soln 10 mg/5ml</i>	
MONOVISC INJ 88MG/4ML.....	243	.....	36
<i>montelukast sodium chew tab 4 mg</i>		<i>morphine sulfate oral soln 20 mg/5ml</i>	
<i>(base equiv)</i> .....	53	.....	36
<i>montelukast sodium chew tab 5 mg</i>		<i>morphine sulfate tab 15 mg</i> .....	36
<i>(base equiv)</i> .....	53	<i>morphine sulfate tab 30 mg</i> .....	36
<i>montelukast sodium oral granules</i>		<i>morphine sulfate tab er 100 mg</i> .....	36
<i>packet 4 mg (base equiv)</i> .....	53	<i>morphine sulfate tab er 15 mg</i> .....	36
<i>montelukast sodium tab 10 mg (base</i>		<i>morphine sulfate tab er 200 mg</i> .....	36
<i>equiv)</i> .....	53	<i>morphine sulfate tab er 30 mg</i> .....	36
MONUROL PAK GRANULES .....	47	<i>morphine sulfate tab er 60 mg</i> .....	36
MORGIDOX KIT 1X50MG .....	269	MORPHINE SUL INJ 10MG/ML .....	35
MORPHABOND TAB 100MG ER .....	35	MORPHINE SUL INJ 1MG/ML .....	35
MORPHABOND TAB 15MG ER .....	35	MORPHINE SUL INJ 250MG/50 .....	35
MORPHABOND TAB 30MG ER .....	35	MORPHINE SUL INJ 2MG/ML .....	35
MORPHABOND TAB 60MG ER .....	35	MORPHINE SUL INJ 2MG2/ML .....	35
MORPHIN/NACL INJ 100/100 .....	35	MORPHINE SUL INJ 4MG/ML .....	35
MORPHIN/NACL INJ 1MG/ML .....	35	MORPHINE SUL INJ 8MG/ML .....	35
MORPHIN/NACL INJ 2MG-0.9% .....	35	MORPHINE SUL INJ NACL.....	35
MORPHIN/NACL INJ 4MG-0.9% .....	35	MOTOFEN TAB 1-0.025 .....	80
<i>morphine sulfate beads cap er 24hr</i>		<i>motrin arthr gel pain 1%</i> .....	160
<i>120 mg</i> .....	35	MOUNJARO INJ 10MG/0.5 .....	76
<i>morphine sulfate beads cap er 24hr 30</i>		MOUNJARO INJ 12.5/0.5 .....	76
<i>mg</i> .....	35	MOUNJARO INJ 15MG/0.5 .....	77
<i>morphine sulfate beads cap er 24hr 45</i>		MOUNJARO INJ 2.5/0.5.....	76
<i>mg</i> .....	35	MOUNJARO INJ 5MG/0.5 .....	76
<i>morphine sulfate beads cap er 24hr 60</i>		MOUNJARO INJ 7.5/0.5.....	76
<i>mg</i> .....	35	MOVANTIK TAB 12.5MG .....	194
<i>morphine sulfate beads cap er 24hr 75</i>		MOVANTIK TAB 25MG .....	194
<i>mg</i> .....	35	MOVIPREP SOL .....	211
<i>morphine sulfate beads cap er 24hr 90</i>		<i>moxifloxacin hcl 400 mg/250ml in</i>	
<i>mg</i> .....	35	<i>sodium chloride 0.8% inj</i> .....	192
<i>morphine sulfate cap er 24hr 100 mg</i>		<i>moxifloxacin hcl ophth soln 0.5% (base</i>	
.....	36	<i>eq) (2 times daily)</i> .....	249

*moxifloxacin hcl ophth soln 0.5% (base equiv)* .....249  
*moxifloxacin hcl tab 400 mg (base equiv)* .....192  
 MOXIFLOXACIN INJ 400/250.....192  
 MOXIFLOXACIN SOL 1MG/ML.....249  
 MOXIFLOXACIN SOL 5MG/ML.....249  
 MOZOBIL INJ.....207  
 MS CONTIN TAB 100MG ER .....36  
 MS CONTIN TAB 15MG ER.....36  
 MS CONTIN TAB 200MG ER .....36  
 MS CONTIN TAB 30MG ER.....36  
 MS CONTIN TAB 60MG ER.....36  
 MUCOTROL WAF.....236  
 MUGARD LIQ .....236  
 MULPLETA TAB 3MG .....205  
 MULTAQ TAB 400MG .....52  
 MULTIGEN PLS TAB .....207  
 MULTIGEN TAB .....207  
 MULTIGEN TAB FOLIC .....207  
*multipro cap* .....237  
*multivit/fl chw 0.25mg* .....238  
*multi vit/fl chw 0.25mg* .....238  
*multivit/fl chw 0.5mg*.....238  
*multivit/fl chw 1mg* .....238  
*multi-vit/fl dro /fe 0.25* .....237  
*multivit/fl dro 0.25mg* .....238  
*multi-vit/fl dro 0.5mg/ml*.....238  
 MULTRYS INJ.....231  
*mupirocin calcium cream 2%* .....161  
*mupirocin oint 2%* .....161  
 MUSCUSOLICE CRE 2%.....160  
*mutamycin inj 20mg* .....109  
*mutamycin inj 40mg* .....109  
*mutamycin inj 5mg* .....109  
 MVASI INJ 100MG .....104  
 MVASI INJ 400MG .....104  
 MYALEPT INJ 11.3MG.....185  
 MYAMBUTOL TAB 400MG.....99  
 MYCAMINE INJ 100MG .....84  
 MYCAPSSA CAP 20MG .....187  
*my choice tab 1.5mg* .....151  
 MYCOBUTIN CAP 150MG .....100  
*mycophenolate mofetil cap 250 mg*.233  
*mycophenolate mofetil for oral susp 200 mg/ml* .....233

*mycophenolate mofetil hcl for iv soln 500 mg (base equiv)*.....233  
*mycophenolate mofetil tab 500 mg*.233  
*mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)* .....233  
*mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)* .....233  
 MYDAYIS CAP 12.5MG .....14  
 MYDAYIS CAP 25MG .....14  
 MYDAYIS CAP 37.5MG .....14  
 MYDAYIS CAP 50MG .....14  
 MYDRIACYL SOL 1% OP .....248  
 MYFEMBREE TAB .....189  
 MYFORTIC TAB 180MG.....233  
 MYFORTIC TAB 360MG.....233  
 MYGLUCOHEALT MIS LANC 30G ....221  
 MYGLUCOHEALT TES BLD GLUC ....177  
 MYLERAN TAB 2MG.....101  
 MYLOTARG INJ 4.5MG.....105  
 MYNATAL CAP .....239  
 MYNATAL PLUS TAB.....239  
 MYNATAL-Z TAB.....239  
 MYOBLOC INJ 10000/2.....245  
 MYOBLOC INJ 2500/0.5.....245  
 MYOBLOC INJ 5000/ML .....245  
*myorisan cap 10mg* .....159  
*myorisan cap 20mg* .....159  
*myorisan cap 30mg* .....159  
*myorisan cap 40mg* .....159  
 MYRBETRIQ SUS 8MG/ML.....279  
 MYRBETRIQ TAB 25MG.....279  
 MYRBETRIQ TAB 50MG.....279  
 MYSOLINE TAB 250MG .....63  
 MYSOLINE TAB 50MG .....63  
 MYTESI TAB 125MG.....80  
*my way tab 1.5mg* .....152  
**N**  
 NABI-HB INJ.....255  
*nabumetone tab 500 mg*.....27  
*nabumetone tab 750 mg*.....27  
*nadolol tab 20 mg* .....135  
*nadolol tab 40 mg* .....135  
*nadolol tab 80 mg* .....135  
 NAFCILLIN INJ 1GM/50ML .....258  
 NAFCILLIN INJ 2GM/100 .....258  
*nafcillin sodium for inj 1 gm*.....258  
*nafcillin sodium for inj 2 gm*.....258

<i>nafcillin sodium for iv soln 10 gm</i> ...	258	<i>naproxen sodium tab er 24hr 375 mg</i> (base equiv) .....	27
<i>nafcillin sodium for iv soln 1 gm</i> .....	258	<i>naproxen sodium tab er 24hr 500 mg</i> (base equiv) .....	27
<i>nafcillin sodium for iv soln 2 gm</i> .....	258	<i>naproxen susp 125 mg/5ml</i> .....	28
<i>nafrinse chw 1mg f</i> .....	229	<i>naproxen tab 250 mg</i> .....	28
<i>nafrinse dro 0.125mg</i> .....	229	<i>naproxen tab 375 mg</i> .....	28
<i>naftifine hcl cream 1%</i> .....	161	<i>naproxen tab 500 mg</i> .....	28
<i>naftifine hcl cream 2%</i> .....	161	<i>naproxen tab ec 375 mg</i> .....	28
NAFTIN GEL 1% .....	161	<i>naproxen tab ec 500 mg</i> .....	28
NAFTIN GEL 2% .....	161	<i>naratriptan hcl tab 1 mg (base equiv)</i> .....	226
NAGLAZYME INJ 1MG/ML .....	185	<i>naratriptan hcl tab 2.5 mg (base equiv)</i> .....	226
<i>nalbuphine hcl inj 10 mg/ml</i> .....	41	NARCAN SPR 4MG .....	82
<i>nalbuphine hcl inj 20 mg/ml</i> .....	41	NARDIL TAB 15MG .....	68
NALFON CAP 400MG .....	27	NAROPIN INJ 10MG/ML .....	213
NALFON TAB 600MG .....	27	NAROPIN INJ 2MG/ML .....	213
NALMEFENE INJ 1MG/ML .....	82	NAROPIN INJ 5MG/ML .....	213
NALOCET TAB 2.5-300 .....	39	NAROPIN INJ 7.5MG/ML .....	213
<i>naloxone hcl inj 0.4 mg/ml</i> .....	82	NASCOBAL SPR 500MCG .....	204
<i>naloxone hcl inj 4 mg/10ml</i> .....	82	NATACHEW CHW .....	239
<i>naloxone hcl nasal spray 4 mg/0.1ml</i> .....	82	NATACYN SUS 5% OP .....	249
<i>naloxone hcl soln cartridge 0.4 mg/ml</i> .....	82	NATALVIT TAB 75-1MG .....	239
<i>naloxone hcl soln prefilled syringe 2</i> <i>mg/2ml</i> .....	82	NATAZIA TAB .....	149
<i>naltrexone hcl tab 50 mg</i> .....	82	<i>nateglinide tab 120 mg</i> .....	79
NAMENDA TAB 10MG .....	260	<i>nateglinide tab 60 mg</i> .....	79
NAMENDA TAB 5-10MG .....	260	NATESTO GEL 5.5MG .....	41
NAMENDA TAB 5MG .....	260	NATPARA INJ 100MCG .....	182
NAMENDA XR CAP 14MG .....	260	NATPARA INJ 25MCG .....	181
NAMENDA XR CAP 21MG .....	260	NATPARA INJ 50MCG .....	181
NAMENDA XR CAP 28MG .....	260	NATPARA INJ 75MCG .....	182
NAMENDA XR CAP 7MG .....	260	NATROBA SUS 0.9% .....	172
NAMZARIC CAP .....	260	NATURAL COND MIS + LUBE .....	216
NAMZARIC CAP 14-10MG .....	260	NATURE-THROI TAB 113.75MG .....	272
NAMZARIC CAP 21-10MG .....	260	NATURE-THROI TAB 130MG .....	272
NAMZARIC CAP 28-10MG .....	260	NATURE-THROI TAB 146.25MG .....	272
NAMZARIC CAP 7-10MG .....	260	NATURE-THROI TAB 16.25MG .....	272
NAPRELAN TAB 375MG CR .....	27	NATURE THROI TAB 162.5MG .....	272
NAPRELAN TAB 500MG CR .....	27	NATURE-THROI TAB 195MG .....	272
NAPRELAN TAB 750MG CR .....	27	NATURE-THROI TAB 260MG .....	272
NAPROSYN SUS 125/5ML .....	27	NATURE-THROI TAB 32.5MG .....	272
NAPROSYN TAB 500MG .....	27	NATURE-THROI TAB 325MG .....	272
<i>naproxen-esomeprazole magnesium</i> <i>tab dr 375-20 mg</i> .....	28	NATURE-THROI TAB 48.75MG .....	272
<i>naproxen-esomeprazole magnesium</i> <i>tab dr 500-20 mg</i> .....	28	NATURE-THROI TAB 65MG .....	272
<i>naproxen sodium tab 275 mg</i> .....	27	NATURE-THROI TAB 81.25MG .....	272
<i>naproxen sodium tab 550 mg</i> .....	27	NATURE-THROI TAB 97.5MG .....	272

NAYZILAM SPR 5MG .....	60	NEOSALUS LOT .....	171
<i>nebivolol hcl tab 10 mg (base equivalent)</i> .....	134	NEOSTIG METH INJ 10/10ML .....	99
<i>nebivolol hcl tab 2.5 mg (base equivalent)</i> .....	134	NEOSTIG METH INJ 5MG/10ML .....	99
<i>nebivolol hcl tab 20 mg (base equivalent)</i> .....	134	<i>neostigmine methylsulfate iv soln 10 mg/10 ml (1 mg/ml)</i> .....	99
<i>nebivolol hcl tab 5 mg (base equivalent)</i> .....	134	<i>neostigmine methylsulfate iv soln 5 mg/10 ml (0.5 mg/ml)</i> .....	99
NEBUPENT INH 300MG .....	43	NEO-SYNALAR CRE.....	161
NEBUSAL NEB 6% .....	157	NEPHRO-VITE TAB RX.....	237
<i>necon tab 0.5/35</i> .....	149	NERLYNX TAB 40MG .....	112
NEEVO DHA CAP 27-1.13 .....	239	NESACAINE INJ 1% .....	214
<i>nefazodone hcl tab 100 mg</i> .....	70	NESACAINE INJ 2% .....	214
<i>nefazodone hcl tab 150 mg</i> .....	70	NESACAINE INJ -MPF 2% .....	214
<i>nefazodone hcl tab 200 mg</i> .....	70	NESACAINE INJ -MPF 3% .....	214
<i>nefazodone hcl tab 250 mg</i> .....	70	NESINA TAB 12.5MG .....	76
<i>nefazodone hcl tab 50 mg</i> .....	70	NESINA TAB 25MG .....	76
<i>nelarabine iv soln 5 mg/ml</i> .....	103	NESINA TAB 6.25MG .....	76
NEMBUTAL SOD INJ 50MG/ML.....	208	NESTABS DHA PAK .....	239
NEOKE MCT70 POW .....	246	NESTABS ONE CAP .....	239
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i> .....	249	NESTABS TAB .....	239
<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i> .....	249	<i>neuac gel 1.2-5%</i> .....	159
<i>neomycin-polymyxin b gu irrigation soln</i> .....	197	NEULASTA INJ 6MG/0.6M .....	205
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i> .....	251	NEULASTA KIT 6MG/0.6M.....	205
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i> .....	251	NEUPOGEN INJ 300/0.5 .....	205
<i>neomycin-polymyxin-hc ophth susp</i> .....	251	NEUPOGEN INJ 300/ML .....	205
<i>neomycin-polymyxin-hc otic soln 1%</i> .....	254	NEUPOGEN INJ 300MCG.....	205
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i> .....	254	NEUPOGEN INJ 480/0.8 .....	205
<i>neomycin sulfate tab 500 mg</i> .....	20	NEUPOGEN INJ 480/1.6 .....	205
NEONATAL TAB COMPLETE .....	239	NEUPOGEN INJ 480MCG.....	205
<i>neo-polycin oin hc 1%op</i> .....	251	NEUPRO DIS 1MG/24HR.....	118
<i>neo-polycin oin op</i> .....	249	NEUPRO DIS 2MG/24HR.....	118
NEOPROFEN SOL 10MG/ML.....	28	NEUPRO DIS 3MG/24HR.....	118
NEORAL CAP 100MG .....	233	NEUPRO DIS 4MG/24HR.....	118
NEORAL CAP 25MG.....	233	NEUPRO DIS 6MG/24HR.....	118
NEORAL SOL 100MG/ML.....	233	NEUPRO DIS 8MG/24HR.....	118
NEOSALUS AER.....	171	NEURONTIN CAP 100MG .....	63
NEOSALUS CRE.....	171	NEURONTIN CAP 300MG .....	63
		NEURONTIN CAP 400MG .....	64
		NEURONTIN SOL 250/5ML.....	64
		NEURONTIN TAB 600MG .....	64
		NEURONTIN TAB 800MG .....	64
		NEUTEK 2TEK TES STRIPS.....	177
		NEUTRASAL POW .....	236
		NEVANAC SUS 0.1%.....	253
		<i>nevirapine susp 50 mg/5ml</i> .....	128
		<i>nevirapine tab 200 mg</i> .....	128
		<i>nevirapine tab er 24hr 100 mg</i> .....	129



<i>nevirapine tab er 24hr 400 mg</i> .....	129	<i>nicotine td dis 7mg/24hr</i> .....	265
<i>new day tab 1.5mg</i> .....	152	<i>nicotine td dis step 1</i> .....	265
NEXAVAR TAB 200MG .....	112	<i>nicotine td dis step 3</i> .....	265
NEXAVIR INJ .....	234	<i>nicotine td patch 24hr 14 mg/24hr</i> .	265
NEXGEN TES .....	177	<i>nicotine td patch 24hr 21 mg/24hr</i> .	265
NEXICLON XR TAB 0.17MG.....	93	NICOTROL INH.....	265
NEXIUM CAP 20MG.....	276	NICOTROL NS SPR 10MG/ML .....	265
NEXIUM CAP 40MG.....	276	<i>nifedipine cap 10 mg</i> .....	138
NEXIUM GRA 10MG DR .....	276	<i>nifedipine cap 20 mg</i> .....	138
NEXIUM GRA 2.5MG DR .....	276	<i>nifedipine tab er 24hr 30 mg</i> .....	138
NEXIUM GRA 20MG DR .....	276	<i>nifedipine tab er 24hr 60 mg</i> .....	138
NEXIUM GRA 40MG DR .....	276	<i>nifedipine tab er 24hr 90 mg</i> .....	138
NEXIUM GRA 5MG DR .....	276	<i>nifedipine tab er 24hr osmotic release</i>	
NEXIUM I.V. INJ 40MG.....	276	<i>30 mg</i> .....	138
NEXLETOL TAB 180MG.....	86	<i>nifedipine tab er 24hr osmotic release</i>	
NEXLIZET TAB 180/10MG.....	86	<i>60 mg</i> .....	138
NEXPLANON IMP 68MG .....	152	<i>nifedipine tab er 24hr osmotic release</i>	
NEXTERONE INJ.....	52	<i>90 mg</i> .....	138
NEXSTELLIS TAB 3-14.2MG.....	149	<i>nikki tab 3-0.02mg</i> .....	149
NEXVIAZYME INJ 100MG .....	186	NILANDRON TAB 150MG .....	107
NGENLA INJ 24/1.2ML .....	183	<i>nilutamide tab 150 mg</i> .....	107
NGENLA INJ 60/1.2ML .....	183	NIMBEX INJ 10MG/ML.....	245
<i>niacin tab er 1000 mg</i>		NIMBEX INJ 2MG/ML.....	245
<i>(antihyperlipidemic)</i> .....	90	<i>nimodipine cap 30 mg</i> .....	138
<i>niacin tab er 500 mg</i>		NINLARO CAP 2.3MG .....	112
<i>(antihyperlipidemic)</i> .....	90	NINLARO CAP 3MG .....	112
<i>niacin tab er 750 mg</i>		NINLARO CAP 4MG .....	112
<i>(antihyperlipidemic)</i> .....	90	NIPENT INJ 10MG.....	114
<i>niacor tab 500mg</i> .....	90	NIPRIDE RTU INJ 20/100ML.....	98
NIASPAN TAB 1000 ER.....	90	NIPRIDE RTU INJ 50/100ML.....	98
<i>nicardipine hcl cap 20 mg</i> .....	138	<i>nisoldipine tab er 24hr 17 mg</i> .....	138
<i>nicardipine hcl cap 30 mg</i> .....	138	<i>nisoldipine tab er 24hr 20 mg</i> .....	138
<i>nicardipine hcl iv soln 2.5 mg/ml</i> ....	138	<i>nisoldipine tab er 24hr 25.5 mg</i> .....	138
<i>nicotine dis 7mg/24hr</i> .....	265	<i>nisoldipine tab er 24hr 30 mg</i> .....	138
<i>nicotine dis step 1</i> .....	265	<i>nisoldipine tab er 24hr 34 mg</i> .....	138
<i>nicotine gum 2mg</i> .....	265	<i>nisoldipine tab er 24hr 40 mg</i> .....	138
<i>nicotine gum 4mg</i> .....	265	<i>nisoldipine tab er 24hr 8.5 mg</i> .....	138
<i>nicotine loz mini 2mg</i> .....	265	<i>nitazoxanide tab 500 mg</i> .....	44
<i>nicotine polacrilex gum 2 mg</i> .....	265	NITHIODOTE KIT .....	80
<i>nicotine polacrilex gum 4 mg</i> .....	265	<i>nitisinone cap 10 mg</i> .....	186
<i>nicotine polacrilex lozenge 2 mg</i> ....	265	<i>nitisinone cap 2 mg</i> .....	186
<i>nicotine polacrilex lozenge 4 mg</i> ....	265	<i>nitisinone cap 5 mg</i> .....	186
<i>nicotine pol gum 4mg mint</i> .....	265	NITRO-BID OIN 2%.....	48
<i>nicotine pol loz 2mg mini</i> .....	265	NITRO-DUR DIS 0.1MG/HR.....	48
<i>nicotine pol loz 4mg chry</i> .....	265	NITRO-DUR DIS 0.2MG/HR.....	48
<i>nicotine td dis 14mg/24h</i> .....	265	NITRO-DUR DIS 0.3MG/HR.....	48
<i>nicotine td dis 21mg/24h</i> .....	265	NITRO-DUR DIS 0.4MG/HR.....	48

NITRO-DUR DIS 0.6MG/HR.....	48	NIVESTYM INJ 300/0.5.....	205
NITRO-DUR DIS 0.8MG/HR.....	48	NIVESTYM INJ 300MCG .....	205
<i>nitrofurantoin macrocrystalline cap 100</i>		NIVESTYM INJ 480/0.8.....	205
<i>mg .....</i>	47	NIVESTYM INJ 480MCG .....	205
<i>nitrofurantoin macrocrystalline cap 25</i>		<i>nizatidine cap 150 mg.....</i>	275
<i>mg .....</i>	47	<i>nizatidine cap 300 mg.....</i>	275
<i>nitrofurantoin macrocrystalline cap 50</i>		NOCDURNA SUB 27.7MCG .....	187
<i>mg .....</i>	47	NOCDURNA SUB 55.3MCG .....	187
<i>nitrofurantoin monohydrate</i>		NOCLOT-50 SOL ACD-A .....	59
<i>macrocrystalline cap 100 mg .....</i>	47	NO CODING TES BLD GLUC .....	177
<i>nitrofurantoin susp 25 mg/5ml.....</i>	47	<i>nolix cre 0.05% .....</i>	167
<i>nitroglycerin iv soln 100 mcg/ml in d5w</i>		<i>nolix lot 0.05% .....</i>	167
<i>.....</i>	48	<i>nora-be tab 0.35mg.....</i>	152
<i>nitroglycerin iv soln 200 mcg/ml in d5w</i>		NORDITROPIN INJ 10/1.5ML.....	183
<i>.....</i>	48	NORDITROPIN INJ 15/1.5ML.....	183
<i>nitroglycerin iv soln 400 mcg/ml in d5w</i>		NORDITROPIN INJ 30/3ML.....	183
<i>.....</i>	48	NORDITROPIN INJ 5/1.5ML.....	183
NITROGLYCER INJ 5MG/ML.....	48	NOREPIN/D5W INJ 16/250ML.....	282
<i>nitroglycerin sl tab 0.3 mg .....</i>	48	<i>norepinephrine bitartrate iv soln 1</i>	
<i>nitroglycerin sl tab 0.4 mg .....</i>	48	<i>mg/ml (base equivalent) .....</i>	283
<i>nitroglycerin sl tab 0.6 mg .....</i>	48	<i>norethindrone &amp; ethinyl estradiol-fe</i>	
<i>nitroglycerin td patch 24hr 0.1 mg/hr</i>		<i>chew tab 0.4 mg-35 mcg.....</i>	149
<i>.....</i>	48	<i>norethindrone &amp; ethinyl estradiol-fe</i>	
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>		<i>chew tab 0.8 mg-25 mcg.....</i>	149
<i>.....</i>	48	<i>norethindrone ace &amp; ethinyl estradiol-fe</i>	
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>		<i>tab 1.5 mg-30 mcg .....</i>	150
<i>.....</i>	48	<i>norethindrone ace &amp; ethinyl estradiol-fe</i>	
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>		<i>tab 1 mg-20 mcg.....</i>	149
<i>.....</i>	48	<i>norethindrone ace &amp; ethinyl estradiol</i>	
<i>nitroglycerin tl soln 0.4 mg/spray (400</i>		<i>tab 1.5 mg-30 mcg .....</i>	149
<i>mcg/spray) .....</i>	48	<i>norethindrone ace &amp; ethinyl estradiol</i>	
NITROLINGUAL SPR PUMPSRA .....	48	<i>tab 1 mg-20 mcg.....</i>	149
NITROMIST AER 400MCG .....	48	<i>norethindrone ace-eth estradiol-fe</i>	
<i>nitroprusside sodium iv soln 25 mg/ml</i>		<i>chew tab 1 mg-20 mcg (24).....</i>	150
<i>.....</i>	98	<i>norethindrone ace-ethinyl estradiol-fe</i>	
NITROSTAT SUB 0.3MG .....	48	<i>cap 1 mg-20 mcg (24) .....</i>	150
NITROSTAT SUB 0.4MG .....	48	<i>norethindrone acetate-ethinyl estradiol</i>	
NITROSTAT SUB 0.6MG .....	48	<i>tab 0.5 mg-2.5 mcg.....</i>	189
NITYR TAB 10MG.....	186	<i>norethindrone acetate-ethinyl estradiol</i>	
NITYR TAB 2MG .....	186	<i>tab 1 mg-5 mcg .....</i>	189
NITYR TAB 5MG .....	186	<i>norethindrone acetate tab 5 mg .....</i>	259
NIVA THYROID TAB 120MG.....	272	<i>norethindrone ac-ethinyl estrad-fe tab</i>	
NIVA THYROID TAB 15MG .....	272	<i>1-20/1-30/1-35 mg-mcg .....</i>	149
NIVA THYROID TAB 30MG .....	272	<i>norethindrone tab 0.35 mg .....</i>	152
NIVA THYROID TAB 60MG .....	272	<i>norgesic tab .....</i>	243
NIVA THYROID TAB 90MG .....	272	NORGESIC TAB FORTE.....	243
NIVATOPIC CRE PLUS .....	171		

<i>norgestimate &amp; ethinyl estradiol tab</i>	NOVOEIGHT INJ 2000UNIT .....	200
0.25 mg-35 mcg .....	NOVOEIGHT INJ 250UNIT .....	200
<i>norgestimate-eth estrad tab 0.18-</i>	NOVOEIGHT INJ 3000UNIT .....	200
25/0.215-25/0.25-25 mg-mcg ....	NOVOEIGHT INJ 500UNIT .....	200
<i>norgestimate-eth estrad tab 0.18-</i>	NOVOLIN INJ 70/30 .....	78
35/0.215-35/0.25-35 mg-mcg ....	NOVOLIN INJ 70/30 FP .....	78
NORITATE CRE 1% .....	NOVOLIN N INJ 100 UNIT .....	78
NORLIQVA SOL 1MG/ML .....	NOVOLIN N INJ U-100 .....	78
<i>norlyroc tab 0.35mg</i> .....	NOVOLIN R INJ 100 UNIT .....	78
NORMLGEL AG GEL .....	NOVOLIN R INJ U-100 .....	78
NORMOSOL -M INJ /D5W .....	NOVOLOG INJ 100/ML .....	78
NORMOSOL -R INJ .....	NOVOLOG INJ FLEXPEN .....	78
NORMOSOL-R INJ PH 7.4 .....	NOVOLOG INJ PENFILL .....	78
NORMOSOL-R SOL /5% DSW .....	NOVOLOG MIX INJ 70/30 .....	78
NORPACE CAP 100MG .....	NOVOLOG MIX INJ FLEXPEN .....	78
NORPACE CAP 100MG CR .....	NOVOSEVEN RT INJ 1MG .....	200
NORPACE CAP 150MG .....	NOVOSEVEN RT INJ 2MG .....	201
NORPACE CAP 150MG CR .....	NOVOSEVEN RT INJ 5MG .....	201
NORPRAMIN TAB 10MG .....	NOVOSEVEN RT INJ 8MG .....	201
NORPRAMIN TAB 25MG .....	NOXAFIL INJ 300/16.7 .....	85
NORTHERA CAP 100MG .....	NOXAFIL SUS 40MG/ML .....	85
NORTHERA CAP 200MG .....	NOXAFIL TAB 100MG .....	85
NORTHERA CAP 300MG .....	NOZIN NASAL KIT SANITIZE .....	243
<i>nortrel tab 0.5/35</i> .....	NOZIN NASAL MIS SANITIZE .....	243
<i>nortrel tab 1/35</i> .....	NPLATE INJ 125MCG .....	205
<i>nortrel tab 7/7/7</i> .....	NPLATE INJ 250MCG .....	206
<i>nortriptyline hcl cap 10 mg</i> .....	NPLATE INJ 500MCG .....	206
<i>nortriptyline hcl cap 25 mg</i> .....	NP THYROID TAB 120MG .....	272
<i>nortriptyline hcl cap 50 mg</i> .....	NP THYROID TAB 15MG .....	272
<i>nortriptyline hcl cap 75 mg</i> .....	NP THYROID TAB 30MG .....	272
<i>nortriptyline hcl soln 10 mg/5ml</i> .....	NP THYROID TAB 60MG .....	272
NORVASC TAB 10MG .....	NP THYROID TAB 90MG .....	272
NORVASC TAB 2.5MG .....	NUBEQA TAB 300MG .....	107
NORVASC TAB 5MG .....	NUCALA INJ 100MG .....	52
NORVIR POW 100MG .....	NUCALA INJ 100MG/ML .....	52
NORVIR SOL 80MG/ML .....	NUCALA INJ 40MG/0.4 .....	52
NORVIR TAB 100MG .....	NUCYNTA ER TAB 100MG .....	36
NOURIANZ TAB 20MG .....	NUCYNTA ER TAB 150MG .....	36
NOURIANZ TAB 40MG .....	NUCYNTA ER TAB 200MG .....	36
NOVA MAX TES GLUCOSE .....	NUCYNTA ER TAB 250MG .....	36
NOVAREL INJ 5000UNIT .....	NUCYNTA ER TAB 50MG .....	36
NOVA SAFETY MIS LANC 23G .....	NUCYNTA TAB 100MG .....	36
NOVA SAFETY MIS LANC 28G .....	NUCYNTA TAB 50MG .....	36
NOVA SURE MIS LANCETS .....	NUCYNTA TAB 75MG .....	36
NOVAVAX VAC INJ COVID-19 .....	NUDROXIPAK KIT DSDR-50 .....	28
NOVOEIGHT INJ 1000UNIT .....	NUDROXIPAK KIT DSDR-75 .....	28
NOVOEIGHT INJ 1500UNIT .....	NUDROXIPAK KIT E-400 .....	28

NUDROXIPAK KIT I-800 .....	28	<i>nystatin cream 100000 unit/gm</i> .....	162
NUDROXIPAK KIT M-15.....	28	<i>nystatin oint 100000 unit/gm</i> .....	162
NUDROXIPAK KIT N-500 .....	28	<i>nystatin susp 100000 unit/ml</i> .....	236
NUEDEXTA CAP 20-10MG .....	263	<i>nystatin tab 500000 unit</i> .....	84
NUFERA TAB.....	207	<i>nystatin topical powder 100000</i>	
<i>nulev tab 0.125mg</i> .....	275	<i>unit/gm</i> .....	162
NULOJIX INJ 250MG .....	233	<i>nystatin-triamcinolone cream 100000-</i>	
NUMOISYN LIQ .....	236	<i>0.1 unit/gm-%</i> .....	162
NUMOISYN LOZ .....	236	<i>nystatin-triamcinolone oint 100000-0.1</i>	
NUPLAZID CAP 34MG.....	120	<i>unit/gm-%</i> .....	162
NUPLAZID TAB 10MG.....	120	<i>nystop pow 100000</i> .....	162
NURTEC TAB 75MG ODT.....	225	NYVEPRIA INJ 6/0.6ML.....	206
NUTRASEB CRE .....	164	<b>o</b>	
NUTRICAP TAB.....	237	OB COMPLETE/ CAP DHA.....	239
NUTRILIPID EMU 20% .....	246	OB COMPLETE CAP ONE .....	239
NUTROPIN AQ INJ 10MG/2ML .....	183	OB COMPLETE CAP PETITE.....	239
NUTROPIN AQ INJ 20MG/2ML .....	183	OB COMPLETE TAB .....	239
NUTROPIN AQ INJ NUSPIN 5.....	183	OB COMPLETE TAB PREMIER.....	239
NUVARING MIS .....	151	OBIZUR INJ 500 UNIT.....	201
NUVESSA GEL 1.3% .....	281	OBSTETRIX EC TAB .....	239
NUVIGIL TAB 150MG .....	19	OBSTETRIX MIS DHA .....	239
NUVIGIL TAB 200MG .....	19	OCALIVA TAB 10MG.....	192
NUVIGIL TAB 250MG .....	19	OCALIVA TAB 5MG .....	192
NUVIGIL TAB 50MG.....	19	O-CAL TAB PRENATAL.....	239
NUWIQ INJ 1000UNIT .....	201	<i>ocella tab 3-0.03mg</i> .....	150
NUWIQ INJ 1500UNIT .....	201	OCREVUS INJ 300/10ML.....	262
NUWIQ INJ 2000UNIT .....	201	<i>octreotide acetate inj 1000 mcg/ml (1</i>	
NUWIQ INJ 2500UNIT .....	201	<i>mg/ml)</i> .....	188
NUWIQ INJ 250UNIT.....	201	<i>octreotide acetate inj 100 mcg/ml (0.1</i>	
NUWIQ INJ 3000UNIT .....	201	<i>mg/ml)</i> .....	188
NUWIQ INJ 4000UNIT .....	201	<i>octreotide acetate inj 200 mcg/ml (0.2</i>	
NUWIQ INJ 500UNIT.....	201	<i>mg/ml)</i> .....	188
NUWIQ KIT 1000UNIT.....	201	<i>octreotide acetate inj 500 mcg/ml (0.5</i>	
NUWIQ KIT 1500UNIT.....	201	<i>mg/ml)</i> .....	188
NUWIQ KIT 2000UNIT.....	201	<i>octreotide acetate inj 50 mcg/ml (0.05</i>	
NUWIQ KIT 2500UNIT.....	201	<i>mg/ml)</i> .....	188
NUWIQ KIT 250UNIT .....	201	<i>octreotide acetate subcutaneous soln</i>	
NUWIQ KIT 3000UNIT.....	201	<i>pref syr 100 mcg/ml</i> .....	188
NUWIQ KIT 4000UNIT.....	201	<i>octreotide acetate subcutaneous soln</i>	
NUWIQ KIT 500UNIT .....	201	<i>pref syr 500 mcg/ml</i> .....	188
NUZYRA INJ 100MG.....	267	<i>octreotide acetate subcutaneous soln</i>	
NUZYRA TAB 150MG.....	268	<i>pref syr 50 mcg/ml</i> .....	188
<i>nyamyc pow 100000</i> .....	162	OCUFLOX DRO 0.3% OP.....	249
<i>nylia tab 1/35</i> .....	150	OCUVEL CAP 0.5MG.....	237
<i>nylia tab 7/7/7</i> .....	150	ODACTRA SUB.....	19
NYMALIZE SOL.....	138	ODEFSEY TAB .....	129
<i>nymyo tab 0.25-35</i> .....	150	ODOMZO CAP 200MG .....	106

OFEV CAP 100MG .....	267	olmesartan-amlodipine-	
OFEV CAP 150MG .....	267	hydrochlorothiazide tab 40-5-25 mg	
ofloxacin ophth soln 0.3% .....	249	.....	96
ofloxacin otic soln 0.3% .....	253	olmesartan medoxomil-	
ofloxacin tab 300 mg .....	192	hydrochlorothiazide tab 20-12.5 mg	
ofloxacin tab 400 mg .....	192	.....	96
OGIVRI INJ 150MG .....	104	olmesartan medoxomil-	
OGIVRI INJ 420MG .....	104	hydrochlorothiazide tab 40-12.5 mg	
okebo cap 75mg .....	269	.....	96
olanzapine-fluoxetine hcl cap 12-25 mg		olmesartan medoxomil-	
.....	261	hydrochlorothiazide tab 40-25 mg	.96
olanzapine-fluoxetine hcl cap 12-50 mg		olmesartan medoxomil tab 20 mg ....	92
.....	261	olmesartan medoxomil tab 40 mg ....	92
olanzapine-fluoxetine hcl cap 3-25 mg		olmesartan medoxomil tab 5 mg .....	92
.....	261	olopatadine hcl nasal soln 0.6% .....	244
olanzapine-fluoxetine hcl cap 6-25 mg		olopatadine hcl ophth soln 0.1% (base	
.....	261	equivalent) .....	253
olanzapine-fluoxetine hcl cap 6-50 mg		olopatadine hcl ophth soln 0.2% (base	
.....	261	equivalent) .....	253
olanzapine for im inj 10 mg .....	123	OLUMIANT TAB 2MG .....	24
olanzapine orally disintegrating tab 10		OLUX AER 0.05% .....	167
mg .....	123	OLUX-E AER 0.05% .....	167
olanzapine orally disintegrating tab 15		OMECLAMOX- MIS PAK .....	277
mg .....	123	OMEGA-3/D-3 KIT WELLNESS .....	86
olanzapine orally disintegrating tab 20		omega-3-acid ethyl esters cap 1 gm	.87
mg .....	123	omeppi cap 40-1100 .....	277
olanzapine orally disintegrating tab 5		omeprazole cap delayed release 10 mg	
mg .....	123	.....	277
olanzapine tab 10 mg .....	123	omeprazole cap delayed release 20 mg	
olanzapine tab 15 mg .....	123	.....	277
olanzapine tab 2.5 mg .....	123	omeprazole cap delayed release 40 mg	
olanzapine tab 20 mg .....	123	.....	277
olanzapine tab 5 mg .....	123	omeprazole-sodium bicarbonate cap	
olanzapine tab 7.5 mg .....	123	20-1100 mg.....	277
olmesartan-amlodipine-		omeprazole-sodium bicarbonate cap	
hydrochlorothiazide tab 20-5-12.5		40-1100 mg.....	277
mg .....	96	omeprazole-sodium bicarbonate powd	
olmesartan-amlodipine-		pack for susp 20-1680 mg .....	277
hydrochlorothiazide tab 40-10-12.5		omeprazole-sodium bicarbonate powd	
mg .....	97	pack for susp 40-1680 mg .....	277
olmesartan-amlodipine-		OMIDRIA INJ 1-0.3% .....	252
hydrochlorothiazide tab 40-10-25 mg		OMNARIS SPR.....	244
.....	97	OMNIFLEX DPR .....	216
olmesartan-amlodipine-		OMNIPOD 5 G6 KIT INTRO .....	221
hydrochlorothiazide tab 40-5-12.5		OMNIPOD 5 G6 MIS PODS .....	221
mg .....	96	OMNIPOD DASH MIS PODS.....	221
		OMNIPOD MIS CLASSIC .....	221

OMNIPOD PDM KIT CLASSIC.....	221	OPDIVO INJ 100MG/10 .....	105
OMNITROPE INJ 10/1.5ML .....	183	OPDIVO INJ 120MG/12 .....	105
OMNITROPE INJ 5/1.5ML.....	183	OPDIVO INJ 240/24 .....	105
OMNITROPE INJ 5.8MG .....	183	OPDIVO INJ 40MG/4ML .....	105
ON CALL PLUS TES BLD GLUC.....	177	OPDUALAG SOL .....	109
ON CALL TES EXPRESS .....	177	OPSUMIT TAB 10MG .....	143
ON CALL VIVD TES BLD GLUC.....	177	<i>option 2 tab 1.5mg</i> .....	152
ONCASPAR INJ 750/ML .....	114	OPTIUMEZ TES .....	177
<i>ondansetron hcl inj 40 mg/20ml (2</i>		OPTIUM TES .....	177
<i>mg/ml)</i> .....	82	OPTUMRX TES BLD GLUC .....	177
<i>ondansetron hcl inj 4 mg/2ml (2</i>		OPVEE SPR 2.7/0.1 .....	82
<i>mg/ml)</i> .....	82	OPZELURA CRE 1.5%.....	169
<i>ondansetron hcl inj soln pref syr 4</i>		ORABLOC INJ .....	212
<i>mg/2ml</i> .....	82	ORACEA CAP 40MG.....	172
<i>ondansetron hcl oral soln 4 mg/5ml</i> ..	82	ORACIT SOL .....	196
<i>ondansetron hcl tab 24 mg</i> .....	82	ORAFATE PST 10% .....	236
<i>ondansetron hcl tab 4 mg</i> .....	82	ORALAIR SUB 300 IR.....	19
<i>ondansetron hcl tab 8 mg</i> .....	82	<i>oralone dent pst 0.1%</i> .....	236
<i>ondansetron orally disintegrating tab 4</i>		ORAMAGICRX SUS .....	236
<i>mg</i> .....	82	ORAPEUTIC GEL.....	236
<i>ondansetron orally disintegrating tab 8</i>		ORAPRED ODT TAB 10MG.....	154
<i>mg</i> .....	82	ORAPRED ODT TAB 15MG.....	154
ONETOUCH DEL MIS PLUS 30G .....	221	ORAPRED ODT TAB 30MG.....	154
ONETOUCH DEL MIS PLUS 33G .....	221	ORAVIG TAB 50MG .....	236
ONETOUCH FP MIS LANCETS .....	221	ORBACTIV SOL 400MG .....	45
ONETOUCH MIS 30G.....	221	ORENCIA CLCK INJ 125MG/ML.....	29
ONETOUCH MIS LANCETS.....	221	ORENCIA INJ 125MG/ML .....	29
ONETOUCH TES ULTRA .....	177	ORENCIA INJ 250MG .....	29
ONETOUCH TES VERIO .....	177	ORENCIA INJ 50/0.4ML.....	29
ONETOUCH US MIS LANCETS.....	221	ORENCIA INJ 87.5/0.7 .....	29
ONEVITE TAB.....	237	ORENITRAM TAB 0.125MG.....	142
ONEXTON GEL 1.2-3.75 .....	159	ORENITRAM TAB 0.25MG .....	142
ONFI SUS 2.5MG/ML .....	60	ORENITRAM TAB 1MG .....	142
ONFI TAB 10MG.....	60	ORENITRAM TAB 2.5MG .....	142
ONFI TAB 20MG.....	60	ORENITRAM TAB 5MG .....	142
ONGENTYS CAP 25MG.....	117	ORENITRAM TAB MONTH 1 .....	142
ONGLYZA TAB 2.5MG .....	76	ORENITRAM TAB MONTH 2 .....	142
ONGLYZA TAB 5MG .....	76	ORENITRAM TAB MONTH 3 .....	142
ONIVYDE INJ 4.3MG/ML .....	116	ORFADIN CAP 10MG .....	186
ONPATTRO SOL 10MG/5ML.....	266	ORFADIN CAP 20MG .....	186
ON-THE-GO MIS LANC 30G.....	221	ORFADIN CAP 2MG .....	186
ONTRUZANT INJ 150MG .....	104	ORFADIN CAP 5MG .....	186
ONTRUZANT INJ 420MG .....	104	ORFADIN SUS 4MG/ML.....	186
ONUREG TAB 200MG .....	103	ORGOVYX TAB 120MG .....	107
ONUREG TAB 300MG .....	103	ORIAHNN CAP.....	189
ONZETRA XSAI MIS 11MG .....	226	ORILISSA TAB 150MG.....	183
<i>opcicon tab 1.5mg</i> .....	152	ORILISSA TAB 200MG.....	183

ORKAMBI GRA 100-125.....	267	OTIPRIO SUS 60MG/ML.....	253
ORKAMBI GRA 150-188.....	267	OTOVEL DRO .....	254
ORKAMBI GRA 75-94MG.....	267	OTREXUP INJ 10MG.....	24
ORKAMBI TAB 100-125 .....	267	OTREXUP INJ 12.5/0.4.....	24
ORKAMBI TAB 200-125 .....	267	OTREXUP INJ 15MG.....	24
ORLADEYO CAP 110MG .....	202	OTREXUP INJ 17.5/0.4.....	24
ORLADEYO CAP 150MG .....	202	OTREXUP INJ 20MG.....	24
<i>orlistat cap 120 mg .....</i>	<i>15</i>	OTREXUP INJ 22.5/0.4.....	24
<i>orphenadrine citrate inj 30 mg/ml ..</i>	<i>242</i>	OTREXUP INJ 25MG.....	24
<i>orphenadrine citrate tab er 12hr 100</i>	<i>mg .....</i>	OVIDREL INJ .....	172
<i>mg .....</i>	<i>242</i>	OVIDREL INJ .....	182
<i>orphenadrine w/ aspirin &amp; caffeine tab</i>	<i>242</i>	OXACILLIN INJ 1GM .....	258
<i>25-385-30 mg.....</i>	<i>243</i>	OXACILLIN INJ 2GM .....	258
<i>orphenadrine w/ aspirin &amp; caffeine tab</i>	<i>243</i>	<i>oxacillin sodium for inj 1 gm (base</i>	<i>258</i>
<i>50-770-60 mg.....</i>	<i>243</i>	<i>equivalent) .....</i>	<i>258</i>
<i>orphengesic tab forte.....</i>	<i>243</i>	<i>oxacillin sodium for inj 2 gm (base</i>	<i>258</i>
ORSERDU TAB 345MG.....	107	<i>equivalent) .....</i>	<i>258</i>
ORSERDU TAB 86MG .....	107	<i>oxacillin sodium for iv soln 10 gm</i>	<i>258</i>
ORTHO TRI- TAB CYCLN LO .....	150	<i>(base equivalent) .....</i>	<i>258</i>
ORTHOVISC INJ 15MG/ML .....	243	<i>oxaliplatin for iv inj 100 mg .....</i>	<i>101</i>
<i>oscimin sr tab 0.375mg.....</i>	<i>275</i>	<i>oxaliplatin for iv inj 50 mg .....</i>	<i>101</i>
<i>oscimin sub 0.125mg.....</i>	<i>275</i>	<i>oxaliplatin iv soln 100 mg/20ml.....</i>	<i>101</i>
<i>oscimin tab 0.125mg .....</i>	<i>275</i>	<i>oxaliplatin iv soln 200 mg/40ml.....</i>	<i>101</i>
<i>oseltamivir phosphate cap 30 mg (base</i>	<i>132</i>	<i>oxaliplatin iv soln 50 mg/10ml .....</i>	<i>101</i>
<i>equiv) .....</i>	<i>132</i>	<i>oxaprozin tab 600 mg.....</i>	<i>28</i>
<i>oseltamivir phosphate cap 45 mg (base</i>	<i>132</i>	OXAYDO TAB 7.5MG.....	36
<i>equiv) .....</i>	<i>132</i>	<i>oxazepam cap 10 mg .....</i>	<i>50</i>
<i>oseltamivir phosphate cap 75 mg (base</i>	<i>132</i>	<i>oxazepam cap 15 mg .....</i>	<i>50</i>
<i>equiv) .....</i>	<i>132</i>	<i>oxazepam cap 30 mg .....</i>	<i>50</i>
<i>oseltamivir phosphate for susp 6</i>	<i>132</i>	OXBRYTA TAB 500MG .....	204
<i>mg/ml (base equiv) .....</i>	<i>132</i>	<i>oxcarbazepine susp 300 mg/5ml (60</i>	<i>64</i>
OSENI TAB 12.5-15.....	74	<i>mg/ml) .....</i>	<i>64</i>
OSENI TAB 12.5-30.....	74	<i>oxcarbazepine tab 150 mg .....</i>	<i>64</i>
OSENI TAB 12.5-45.....	74	<i>oxcarbazepine tab 300 mg .....</i>	<i>64</i>
OSENI TAB 25-15MG .....	74	<i>oxcarbazepine tab 600 mg .....</i>	<i>64</i>
OSENI TAB 25-30MG .....	74	OXERVATE SOL 20MCG/ML.....	250
OSENI TAB 25-45MG .....	74	<i>oxiconazole nitrate cream 1% .....</i>	<i>162</i>
<i>osmitrol inj 10% .....</i>	<i>180</i>	OXISTAT CRE 1%.....	162
<i>osmitrol inj 15% .....</i>	<i>180</i>	OXISTAT LOT 1% .....	162
<i>osmitrol vfx inj 20% .....</i>	<i>180</i>	OXLUMO INJ 94.5/0.5 .....	197
OSMOLEX ER TAB 129MG .....	118	OXTELLAR XR TAB 150MG .....	64
OSMOLEX ER TAB 193MG .....	118	OXTELLAR XR TAB 300MG .....	64
OSMOLEX ER TAB 258MG .....	118	OXTELLAR XR TAB 600MG .....	64
OSMOPREP TAB 1.5GM.....	211	<i>oxybutynin chloride syrup 5 mg/5ml</i>	<i>278</i>
OSPHENA TAB 60MG.....	184	<i>.....</i>	<i>278</i>
OTEZLA TAB 10/20/30 .....	28	<i>oxybutynin chloride tab 5 mg .....</i>	<i>278</i>
OTEZLA TAB 30MG .....	28		

<i>oxybutynin chloride tab er 24hr 10 mg</i>	<i>oxymorphone hcl tab er 12hr 5 mg...</i>	37
.....278	<i>oxymorphone hcl tab er 12hr 7.5 mg</i>	37
<i>oxybutynin chloride tab er 24hr 15 mg</i>	<i>oxytocin inj 10 unit/ml</i>	254
.....278	OXYTROL DIS 3.9MG/24	278
<i>oxybutynin chloride tab er 24hr 5 mg</i>	OZEMPIC INJ 2/1.5ML	77
.....278	OZEMPIC INJ 4MG/3ML	77
<i>oxycodone hcl cap 5 mg</i>	OZEMPIC INJ 8MG/3ML	77
.....36	OZURDEX IMP 0.7MG	251
<i>oxycodone hcl conc 100 mg/5ml (20</i>	<b>P</b>	
<i>mg/ml)</i>	<i>pacerone tab 100mg</i>	52
.....36	<i>pacerone tab 200mg</i>	52
<i>oxycodone hcl soln 5 mg/5ml</i>	<i>pacerone tab 400mg</i>	52
.....36	<i>paclitaxel iv conc 100 mg/16.7ml (6</i>	
<i>oxycodone hcl tab 10 mg</i>	<i>mg/ml)</i>	116
.....36	<i>paclitaxel iv conc 150 mg/25ml (6</i>	
<i>oxycodone hcl tab 15 mg</i>	<i>mg/ml)</i>	116
.....36	<i>paclitaxel iv conc 300 mg/50ml (6</i>	
<i>oxycodone hcl tab 20 mg</i>	<i>mg/ml)</i>	116
.....36	<i>paclitaxel iv conc 30 mg/5ml (6 mg/ml)</i>	
<i>oxycodone hcl tab 30 mg</i>	.....116	
.....36	<i>paclitaxel protein-bound particles for iv</i>	
<i>oxycodone hcl tab 5 mg</i>	<i>susp 100 mg</i>	116
.....36	PADCEV INJ 20MG	105
<i>oxycodone hcl tab er 12hr deter 10 mg</i>	PADCEV INJ 30MG	105
.....36	PAIN EASE AER MD STRM	170
<i>oxycodone hcl tab er 12hr deter 20 mg</i>	PAIN EASE AER MIST	170
.....37	PALFORZIA CAP ESCALAT	19
<i>oxycodone hcl tab er 12hr deter 40 mg</i>	PALFORZIA CAP LEVEL 1	19
.....37	PALFORZIA CAP LEVEL 10	20
<i>oxycodone hcl tab er 12hr deter 80 mg</i>	PALFORZIA CAP LEVEL 2	19
.....37	PALFORZIA CAP LEVEL 3	19
<i>oxycodone w/ acetaminophen soln 5-</i>	PALFORZIA CAP LEVEL 4	20
<i>325 mg/5ml</i>	PALFORZIA CAP LEVEL 5	20
.....39	PALFORZIA CAP LEVEL 6	20
<i>oxycodone w/ acetaminophen tab 10-</i>	PALFORZIA CAP LEVEL 7	20
<i>325 mg</i>	PALFORZIA CAP LEVEL 8	20
.....39	PALFORZIA CAP LEVEL 9	20
<i>oxycodone w/ acetaminophen tab 2.5-</i>	PALFORZIA POW LEVEL 11	20
<i>325 mg</i>	<i>paliperidone tab er 24hr 1.5 mg</i>	121
.....39	<i>paliperidone tab er 24hr 3 mg</i>	121
<i>oxycodone w/ acetaminophen tab 5-</i>	<i>paliperidone tab er 24hr 6 mg</i>	121
<i>325 mg</i>	<i>paliperidone tab er 24hr 9 mg</i>	121
.....39	<i>palonosetron hcl iv soln 0.25 mg/5ml</i>	
<i>oxycodone w/ acetaminophen tab 7.5-</i>	<i>(base equivalent)</i>	82
<i>325 mg</i>	PALONOSETRON INJ 0.25/2ML	82
.....39	PALYNZIQ INJ 10/0.5ML	186
OXYCONTIN TAB 10MG ER	PALYNZIQ INJ 2.5/0.5	186
.....37		
OXYCONTIN TAB 15MG ER		
.....37		
OXYCONTIN TAB 20MG ER		
.....37		
OXYCONTIN TAB 30MG ER		
.....37		
OXYCONTIN TAB 40MG ER		
.....37		
OXYCONTIN TAB 60MG ER		
.....37		
OXYCONTIN TAB 80MG ER		
.....37		
<i>oxymorphone hcl tab 10 mg</i>		
.....37		
<i>oxymorphone hcl tab 5 mg</i>		
.....37		
<i>oxymorphone hcl tab er 12hr 10 mg</i>		
.....37		
<i>oxymorphone hcl tab er 12hr 15 mg</i>		
.....37		
<i>oxymorphone hcl tab er 12hr 20 mg</i>		
.....37		
<i>oxymorphone hcl tab er 12hr 30 mg</i>		
.....37		
<i>oxymorphone hcl tab er 12hr 40 mg</i>		
.....37		



PALYNZIQ INJ 20MG/ML.....	186	<i>paromomycin sulfate cap 250 mg</i> .....	20
PAMELOR CAP 10MG.....	73	<i>paroxetine hcl oral susp 10 mg/5ml</i>	
PAMELOR CAP 25MG.....	73	<i>(base equiv)</i> .....	69
PAMELOR CAP 50MG.....	73	<i>paroxetine hcl tab 10 mg</i> .....	69
PAMELOR CAP 75MG.....	73	<i>paroxetine hcl tab 20 mg</i> .....	69
<i>pamidronate disodium iv soln 3 mg/ml</i>		<i>paroxetine hcl tab 30 mg</i> .....	69
.....	182	<i>paroxetine hcl tab 40 mg</i> .....	69
<i>pamidronate disodium iv soln 9 mg/ml</i>		<i>paroxetine hcl tab er 24hr 12.5 mg</i> ..	69
.....	182	<i>paroxetine hcl tab er 24hr 25 mg</i> ....	69
PAMIDRONATE INJ 6MG/ML.....	182	<i>paroxetine hcl tab er 24hr 37.5 mg</i> ..	69
PANCREAZE CAP 10500UNT.....	178	<i>paroxetine mesylate cap 7.5 mg (base</i>	
PANCREAZE CAP 16800UNT.....	178	<i>equiv)</i> .....	266
PANCREAZE CAP 21000UNT.....	178	PARSABIV INJ 10MG/2ML.....	186
PANCREAZE CAP 2600UNIT.....	178	PARSABIV INJ 2.5-0.5.....	186
PANCREAZE CAP 37000.....	179	PARSABIV INJ 5MG/ML.....	186
PANCREAZE CAP 4200UNIT.....	178	PASER GRA 4GM.....	100
PANDEL CRE 0.1%.....	167	PATANASE SPR 0.6%.....	244
PANRETIN GEL 0.1%.....	162	PAXIL CR TAB 12.5MG.....	69
<i>pantoprazole sodium ec tab 20 mg</i>		PAXIL CR TAB 25MG.....	69
<i>(base equiv)</i> .....	277	PAXIL CR TAB 37.5MG.....	69
<i>pantoprazole sodium ec tab 40 mg</i>		PAXIL SUS 10MG/5ML.....	69
<i>(base equiv)</i> .....	277	PAXIL TAB 10MG.....	69
<i>pantoprazole sodium for delayed</i>		PAXIL TAB 20MG.....	69
<i>release susp packet 40 mg</i> .....	277	PAXIL TAB 30MG.....	69
<i>pantoprazole sodium for iv soln 40 mg</i>		PAXIL TAB 40MG.....	69
<i>(base equiv)</i> .....	277	PAXLOVID TAB 150-100.....	130
PANZYGA SOL 10/100ML.....	256	PAXLOVID TAB 300-100.....	130
PANZYGA SOL 1GM/10ML.....	255	PEDIAPRED SOL 5MG/5ML.....	154
PANZYGA SOL 2.5/25ML.....	255	PEDIARIX INJ 0.5ML.....	274
PANZYGA SOL 20/200ML.....	256	<i>pediatric vitamins acd w/ fluoride soln</i>	
PANZYGA SOL 30/300ML.....	256	<i>0.5 mg/ml</i> .....	238
PANZYGA SOL 5GM/50ML.....	255	PEDMARK INJ 12.5GM.....	115
PARADIGM REA MIS TRANSMIT.....	221	PEDVAX HIB INJ.....	279
PARAGARD IUD T380A.....	151	<i>peg/nasul/c/ sol nacl/pot</i> .....	211
<i>paraplatin inj 1000mg</i> .....	101	<i>peg 3350-kcl-na bicarb-nacl-na sulfate</i>	
<i>paraplatin inj 150/15ml</i> .....	101	<i>for soln 236 gm</i> .....	211
<i>paraplatin inj 50mg/5ml</i> .....	101	<i>peg 3350-kcl-sod bicarb-nacl for soln</i>	
<i>paraplatin inj 600/60ml</i> .....	101	<i>420 gm</i> .....	211
PAREMYD SOL 1-0.25%.....	253	PEGASYS INJ.....	131
<i>paricalcitol cap 1 mcg</i> .....	186	PEGASYS INJ 180MCG/M.....	131
<i>paricalcitol cap 2 mcg</i> .....	186	PEGASYS INJ PROCLICK.....	131
<i>paricalcitol cap 4 mcg</i> .....	186	PEGASYS KIT 180MCG/M.....	131
<i>paricalcitol iv soln 2 mcg/ml</i> .....	186	PEG-PREP KIT.....	211
<i>paricalcitol iv soln 5 mcg/ml</i> .....	186	PEMAZYRE TAB 13.5MG.....	112
PARLODEL CAP 5MG.....	118	PEMAZYRE TAB 4.5MG.....	112
PARLODEL TAB 2.5MG.....	118	PEMAZYRE TAB 9MG.....	112
PARNATE TAB 10MG.....	68		

<i>pemetrexed disodium for iv soln 1000 mg (base equiv)</i> .....	103	PEPAXTO INJ 20MG .....	101
<i>pemetrexed disodium for iv soln 100 mg (base equiv)</i> .....	103	PEPCID TAB 20MG .....	275
<i>pemetrexed disodium for iv soln 500 mg (base equiv)</i> .....	103	PEPCID TAB 40MG .....	276
<i>pemetrexed disodium for iv soln 750 mg (base equiv)</i> .....	103	PERCOCET TAB 10-325MG.....	39
PEMETREXED SOL 100/4ML .....	103	PERCOCET TAB 2.5-325 .....	39
PEMETREXED SOL 1GM/40ML.....	103	PERCOCET TAB 5-325MG .....	39
PEMETREXED SOL 500/20ML .....	103	PERCOCET TAB 7.5-325 .....	39
PEMETREXED SOL 850/34ML .....	103	PERFECT 28G MIS LANCETS.....	221
PEMFEXY SOL 500/20ML .....	103	PERFECT 30G MIS LANCETS.....	221
<i>peniclovir cream 1%</i> .....	164	PERFOROMIST NEB 20MCG .....	55
PEN GK/DEXTR INJ 20000/ML .....	257	PERIDEX SOL 0.12% .....	236
PEN GK/DEXTR INJ 40000/ML .....	257	PERIKABIVEN EMU .....	246
PEN GK/DEXTR INJ 60000/ML .....	257	<i>perindopril erbumine tab 2 mg</i> .....	91
PEN G PROC INJ 600000 .....	257	<i>perindopril erbumine tab 4 mg</i> .....	91
<i>penicillamine cap 250 mg</i> .....	231	<i>perindopril erbumine tab 8 mg</i> .....	91
<i>penicillamine tab 250 mg</i> .....	232	<i>periogard sol 0.12%</i> .....	236
<i>penicillin g potassium for inj 5000000 unit</i> .....	257	PERJETA INJ 420/14ML .....	104
<i>penicillin g sodium for inj 5000000 unit</i> .....	257	<i>permethrin cream 5%</i> .....	172
<i>penicillin v potassium for soln 125 mg/5ml</i> .....	257	<i>perphenazine-amitriptyline tab 2-10 mg</i> .....	261
<i>penicillin v potassium for soln 250 mg/5ml</i> .....	257	<i>perphenazine-amitriptyline tab 2-25 mg</i> .....	261
<i>penicillin v potassium tab 250 mg</i> ...257		<i>perphenazine-amitriptyline tab 4-10 mg</i> .....	261
<i>penicillin v potassium tab 500 mg</i> ...257		<i>perphenazine-amitriptyline tab 4-25 mg</i> .....	261
PENLET II MIS REPL CAP .....	221	<i>perphenazine-amitriptyline tab 4-50 mg</i> .....	261
PEN NEEDLES MIS 29GX12MM .....	177	<i>perphenazine tab 16 mg</i> .....	125
PENNSAID SOL 2%.....	160	<i>perphenazine tab 2 mg</i> .....	125
PENTACEL INJ.....	274	<i>perphenazine tab 4 mg</i> .....	125
PENTAM 300 INJ 300MG .....	43	<i>perphenazine tab 8 mg</i> .....	125
<i>pentamidine isethionate for inj soln 300 mg</i> .....	43	PERSERIS INJ 120MG .....	121
<i>pentamidine isethionate for nebulization soln 300 mg</i> .....	44	PERSERIS INJ 90MG .....	121
PENTASA CAP 250MG CR.....	193	PERTZYE CAP 16000U .....	179
PENTASA CAP 500MG CR.....	193	PERTZYE CAP 24000U .....	179
<i>pentazocine w/ naloxone hcl tab 50-0.5 mg</i> .....	41	PERTZYE CAP 4000UNIT.....	179
PENTETATE CA SOL 200MG/ML .....	81	PERTZYE CAP 8000UNIT.....	179
PENTETATE ZI SOL 200MG/ML.....	81	PEXEVA TAB 10MG .....	70
<i>pentobarbital sodium inj 50 mg/ml</i> .208		PEXEVA TAB 20MG .....	70
<i>pentoxifylline tab er 400 mg</i> .....	202	PEXEVA TAB 30MG .....	70
		PEXEVA TAB 40MG .....	70
		PFIZER BIVAL INJ 5-11Y.....	280
		PFIZER BIVAL INJ BA4/BA5 .....	280
		<i>pfizerpen inj 5mu</i> .....	257
		PFIZER VACC INJ 5-11Y .....	280
		PFIZER VACC INJ 6M-4Y.....	280

PFIZER VACC INJ ADLT RTU.....	280	PHESSGO SOL .....	109
PFIZER VACC INJ COVID-19 .....	280	PHEXXI GEL.....	281
PHARMACY COU MIS LANCETS .....	221	<i>philith tab 0.4-35</i> .....	150
PHEBURANE MIS 483/GM .....	186	PHLAG SPR.....	171
<i>phenazo tab 200mg</i> .....	197	PHOSLYRA SOL .....	195
<i>phendimetrazine tartrate tab 35 mg</i> .15		<i>phospha 250 tab neutral</i> .....	230
<i>phenelzine sulfate tab 15 mg</i> .....	68	PHOSPHOLINE SOL 0.125%OP .....	248
PHENERGAN INJ 25MG/ML .....	86	<i>phospho-trin tab 250 neut</i> .....	230
PHENERGAN INJ 50MG/ML .....	86	<i>phospho-trin tab k500</i> .....	230
<i>phenobarbital elixir 20 mg/5ml</i> .....	208	PHOTOFRIN INJ 75MG.....	114
<i>phenobarbital sodium inj 130 mg/ml</i>		PHOTREXA/PHO SOL VISC KIT .....	250
.....	208	PHOTREXA VIS SOL 0.146-20 .....	250
<i>phenobarbital sodium inj 65 mg/ml</i> .208		<i>physiolyte sol</i> .....	234
<i>phenobarbital tab 100 mg</i> .....	208	<i>physiosol sol irrigat</i> .....	234
<i>phenobarbital tab 15 mg</i> .....	208	<i>phytonadione inj 10 mg/ml</i> .....	283
<i>phenobarbital tab 16.2 mg</i> .....	208	<i>phytonadione inj 1 mg/0.5ml (2</i>	
<i>phenobarbital tab 30 mg</i> .....	208	<i>mg/ml)</i> .....	283
<i>phenobarbital tab 32.4 mg</i> .....	208	<i>phytonadione tab 5 mg</i> .....	283
<i>phenobarbital tab 60 mg</i> .....	208	PIFELTRO TAB 100MG.....	129
<i>phenobarbital tab 64.8 mg</i> .....	208	<i>pilocarpine hcl ophth soln 1%</i> .....	248
<i>phenobarbital tab 97.2 mg</i> .....	208	<i>pilocarpine hcl ophth soln 2%</i> .....	248
<i>phenoxybenzamine hcl cap 10 mg</i> ...	91	<i>pilocarpine hcl ophth soln 4%</i> .....	248
<i>phentermine hcl cap 15 mg</i> .....	15	<i>pilocarpine hcl tab 5 mg</i> .....	236
<i>phentermine hcl cap 30 mg</i> .....	15	<i>pilocarpine hcl tab 7.5 mg</i> .....	236
<i>phentermine hcl cap 37.5 mg</i> .....	15	<i>pimecrolimus cream 1%</i> .....	169
<i>phentermine hcl tab 37.5 mg</i> .....	15	<i>pimozide tab 1 mg</i> .....	263
<i>phentolamine mesylate for inj 5 mg</i> ..	91	<i>pimozide tab 2 mg</i> .....	263
PHENYL/NACL INJ 80/250ML.....	283	<i>pimtrea tab</i> .....	150
PHENYLEP HCL INJ 0.8/10ML .....	283	<i>pindolol tab 10 mg</i> .....	135
PHENYLEP HCL INJ 1MG/10ML.....	283	<i>pindolol tab 5 mg</i> .....	135
<i>phenylephrine hcl iv soln 10 mg/ml</i> 283		<i>pioglitazone hcl-glimepiride tab 30-2</i>	
<i>phenylephrine hcl ophth soln 10%</i> ..	248	<i>mg</i> .....	74
<i>phenylephrine hcl ophth soln 2.5%</i> .248		<i>pioglitazone hcl-glimepiride tab 30-4</i>	
PHENYLEPHRIN INJ 0.4/10ML.....	283	<i>mg</i> .....	74
PHENYLEPHRIN INJ 0.8MG/10 .....	283	<i>pioglitazone hcl-metformin hcl tab 15-</i>	
PHENYLEPHRIN INJ 10MG/ML.....	283	<i>500 mg</i> .....	74
PHENYTEK CAP 200MG .....	66	<i>pioglitazone hcl-metformin hcl tab 15-</i>	
PHENYTEK CAP 300MG .....	66	<i>850 mg</i> .....	74
<i>phenytoin chew tab 50 mg</i> .....	66	<i>pioglitazone hcl tab 15 mg (base equiv)</i>	
<i>phenytoin sodium extended cap 100</i>		.....	79
<i>mg</i> .....	66	<i>pioglitazone hcl tab 30 mg (base equiv)</i>	
<i>phenytoin sodium extended cap 200</i>		.....	79
<i>mg</i> .....	66	<i>pioglitazone hcl tab 45 mg (base equiv)</i>	
<i>phenytoin sodium extended cap 300</i>		.....	79
<i>mg</i> .....	66	<i>piperacillin sod-tazobactam na for inj</i>	
<i>phenytoin sodium inj 50 mg/ml</i> .....	66	<i>3.375 gm (3-0.375 gm)</i> .....	258
<i>phenytoin susp 125 mg/5ml</i> .....	66		

<i>piperacillin sod-tazobactam sod for inj</i>		<i>polocaine inj -mpf 2%</i> .....	213
2.25 gm (2-0.25 gm) .....	258	<i>polycin oin op</i> .....	249
<i>piperacillin sod-tazobactam sod for inj</i>		<i>poly-iron cap 150 fort</i> .....	207
4.5 gm (4-0.5 gm) .....	258	<i>polymyxin b sulfate for inj 500000 unit</i>	
<i>piperacillin sod-tazobactam sod for inj</i>		.....	47
40.5 gm (36-4.5 gm) .....	258	<i>polymyxin b-trimethoprim ophth soln</i>	
PIQRAY 200MG TAB DOSE .....	112	10000 unit/ml-0.1% .....	249
PIQRAY 250MG TAB DOSE .....	112	<i>polysacchari cap iron</i> .....	207
PIQRAY 300MG TAB DOSE .....	112	POLYTRIM SOL OP .....	249
<i>pirfenidone cap 267 mg</i> .....	267	POLY-VI-FLOR CHW 0.25MG .....	238
<i>pirfenidone tab 267 mg</i> .....	267	POLY-VI-FLOR CHW 0.5MG .....	238
<i>pirfenidone tab 801 mg</i> .....	267	POLY-VI-FLOR CHW 1MG.....	238
<i>piroxicam cap 10 mg</i> .....	28	POLY-VI-FLOR CHW W/IRON.....	237
<i>piroxicam cap 20 mg</i> .....	28	POLY-VI-FLOR MIS FS 0.25.....	238
PITOCIN INJ 10UNT/ML.....	254	POLY-VI-FLOR MIS FS 0.5MG .....	238
PLAQUENIL TAB 200MG .....	99	POLY-VI-FLOR SUS /IRON .....	237
PLASMA-LYTE INJ -148 .....	228	POLY-VI-FLOR SUS 0.25/ML.....	238
PLASMA-LYTE INJ -A.....	228	POMALYST CAP 1MG .....	108
PLAVIX TAB 75MG .....	203	POMALYST CAP 2MG .....	108
PLEGISOL SOL .....	141	POMALYST CAP 3MG .....	108
PLEGRIDY INJ .....	262	POMALYST CAP 4MG .....	108
PLEGRIDY INJ PEN.....	262	PONVORY TAB 20MG.....	262
PLEGRIDY INJ STARTER .....	262	PONVORY TAB STARTER.....	263
PLEGRIDY PEN INJ STARTER .....	262	<i>portia-28 tab</i> .....	150
<i>plenamine inj 15%</i> .....	246	PORTRAZZA INJ 800/50ML .....	106
PLENITY CAP .....	15	<i>posaconazole tab delayed release 100</i>	
PLENVU SOL .....	211	mg .....	85
<i>plerixafor subcutaneous inj 24</i>		POSIMIR SOL 660/5ML.....	213
mg/1.2ml (20 mg/ml) .....	207	<i>pot &amp; sod citrates w/ cit ac soln 550-</i>	
PLIAGLIS CRE 7-7% .....	170	500-334 mg/5ml .....	196
PNEUMOVAX 23 INJ 25/0.5.....	279	<i>potassium acetate inj 2 meq/ml</i> ....	230
<i>pnv-dha cap</i> .....	239	<i>potassium chloride 20 meq/l (0.15%)</i>	
PNV-DHA CAP DOCUSATE.....	239	in dextrose 5% inj .....	228
PNV FOLIC AC TAB + IRON .....	239	<i>potassium chloride cap er 10 meq</i> ..	230
PNV-OMEGA CAP.....	239	<i>potassium chloride cap er 8 meq</i> ....	230
PNV PRENATAL TAB PLUS .....	239	<i>potassium chloride inj 10 meq/100ml</i>	
<i>pnv-select tab</i> .....	239	.....	230
PNV TABS TAB 29-1MG .....	239	<i>potassium chloride inj 10 meq/50ml</i>	
POCKETCHEM TES EZ .....	177	.....	230
PODIAPN CAP .....	178	<i>potassium chloride inj 20 meq/100ml</i>	
<i>podofilox soln 0.5%</i> .....	169	.....	230
POLIVY INJ 140MG .....	105	<i>potassium chloride inj 20 meq/50ml</i>	
POLIVY INJ 30MG .....	105	.....	230
<i>polocaine inj 1%</i> .....	213	<i>potassium chloride inj 2 meq/ml</i> .....	230
<i>polocaine inj 2%</i> .....	213	<i>potassium chloride inj 40 meq/100ml</i>	
<i>polocaine inj mpf 1.5%</i> .....	213	.....	230
<i>polocaine inj -mpf 1%</i> .....	213		

<i>potassium chloride microencapsulated crys er tab 10 meq</i> .....	230	<i>pramipexole dihydrochloride tab 0.25 mg</i> .....	118
<i>potassium chloride microencapsulated crys er tab 15 meq</i> .....	230	<i>pramipexole dihydrochloride tab 0.5 mg</i> .....	118
<i>potassium chloride microencapsulated crys er tab 20 meq</i> .....	231	<i>pramipexole dihydrochloride tab 0.75 mg</i> .....	118
<i>potassium chloride oral soln 10% (20 meq/15ml)</i> .....	231	<i>pramipexole dihydrochloride tab 1.5 mg</i> .....	118
<i>potassium chloride oral soln 20% (40 meq/15ml)</i> .....	231	<i>pramipexole dihydrochloride tab 1 mg .....</i>	118
<i>potassium chloride powder packet 20 meq</i> .....	231	<i>pramipexole dihydrochloride tab er 24hr 0.375 mg</i> .....	119
<i>potassium chloride tab er 10 meq</i> ...	231	<i>pramipexole dihydrochloride tab er 24hr 0.75 mg</i> .....	118
<i>potassium chloride tab er 20 meq (1500 mg)</i> .....	231	<i>pramipexole dihydrochloride tab er 24hr 1.5 mg</i> .....	119
<i>potassium chloride tab er 8 meq (600 mg)</i> .....	231	<i>pramipexole dihydrochloride tab er 24hr 2.25 mg</i> .....	119
<i>potassium citrate &amp; citric acid soln 1100-334 mg/5ml</i> .....	196	<i>pramipexole dihydrochloride tab er 24hr 3.75 mg</i> .....	119
<i>potassium citrate tab er 10 meq (1080 mg)</i> .....	196	<i>pramipexole dihydrochloride tab er 24hr 3 mg</i> .....	119
<i>potassium citrate tab er 15 meq (1620 mg)</i> .....	196	<i>pramipexole dihydrochloride tab er 24hr 4.5 mg</i> .....	119
<i>potassium citrate tab er 5 meq (540 mg)</i> .....	196	PRAMOSONE CRE 1-1% .....	167
POTASSIUM INJ 100MEQ.....	231	PRAMOSONE LOT 1%.....	167
<i>potassium iodide oral soln 1 gm/ml</i>	157	PRAMOSONE LOT 2.5%.....	168
<i>potassium phosphates inj 45 mm/15ml (phos) 66 meq/15ml (k)</i> .....	230	PRAMOX GEL 1%.....	170
POT CHL/NACL INJ 20MEQ/L.....	228	<i>prasugrel hcl tab 10 mg (base equiv) .....</i>	203
POT CHL/NACL INJ 40MEQ/L.....	228	<i>prasugrel hcl tab 5 mg (base equiv)</i>	203
POT CHLORIDE INJ 10MEQ .....	230	<i>pravastatin sodium tab 10 mg</i> .....	89
POT CHLORIDE INJ 20MEQ .....	230	<i>pravastatin sodium tab 20 mg</i> .....	89
POT CHLORIDE INJ 40MEQ .....	230	<i>pravastatin sodium tab 40 mg</i> .....	89
POTELIGEO INJ 20MG/5ML .....	105	<i>pravastatin sodium tab 80 mg</i> .....	89
<i>pot phos monobasic w/sod phos di &amp; monobas tab 155-852-130mg</i> .....	230	PRAXBIND INJ 2.5/50 .....	81
POVIDONE IOD SOL 5%.....	249	<i>praziquantel tab 600 mg</i> .....	43
PRADAXA CAP 110MG.....	59	<i>prazosin hcl cap 1 mg</i> .....	93
PRADAXA CAP 150MG.....	59	<i>prazosin hcl cap 2 mg</i> .....	93
PRADAXA CAP 75MG.....	59	<i>prazosin hcl cap 5 mg</i> .....	93
PRAKETAMIDE CRE 5% .....	160	PR BENZOYL LIQ 7% WASH.....	159
PRALUENT INJ 150MG/ML .....	90	PR CREAM KIT .....	171
PRALUENT INJ 75MG/ML .....	90	PRECEDEX INJ 1000/250.....	210
<i>pramipexole dihydrochloride tab 0.125 mg</i> .....	118	PRECEDEX INJ 100MCG.....	210
		PRECEDEX INJ 200/50ML .....	210
		PRECEDEX INJ 400/100.....	210
		PRECEDEX INJ 80/20ML .....	210

PRECISION PT TES OF CARE .....	177	<i>prednisone tab therapy pack 5 mg (21)</i>	155
PRECISION TES PCX .....	177	.....	155
PRECISION TES PCX PLUS .....	177	<i>prednisone tab therapy pack 5 mg (48)</i>	155
PRECISION TES QID .....	177	.....	155
PRECISION TES SOF-TACT .....	177	PRED SOD PHO SOL 1% OP .....	251
PRECISION TES XTRA .....	177	<i>pregabalin cap 100 mg</i> .....	64
PRECOSE TAB 100MG .....	73	<i>pregabalin cap 150 mg</i> .....	64
PRECOSE TAB 25MG .....	73	<i>pregabalin cap 200 mg</i> .....	64
PRECOSE TAB 50MG .....	73	<i>pregabalin cap 225 mg</i> .....	64
PRED FORTE SUS 1% OP .....	251	<i>pregabalin cap 25 mg</i> .....	64
PRED-G S.O.P OIN OP .....	251	<i>pregabalin cap 300 mg</i> .....	64
PRED-G SUS OP .....	251	<i>pregabalin cap 50 mg</i> .....	64
PRED MILD SUS 0.12% OP .....	251	<i>pregabalin cap 75 mg</i> .....	64
<i>prednicarbate oint 0.1%</i> .....	168	<i>pregabalin soln 20 mg/ml</i> .....	64
<i>prednisolone acetate ophth susp 1%</i>	251	<i>pregabalin tab er 24hr 165 mg</i> .....	263
.....	251	<i>pregabalin tab er 24hr 330 mg</i> .....	263
<i>prednisolone sodium phosphate oral</i>	155	<i>pregabalin tab er 24hr 82.5 mg</i> .....	263
<i>soln 25 mg/5ml (base eq)</i> .....	155	PREGNYL INJ 10000UNT .....	182
<i>prednisolone sod phos orally disintegr</i>	155	PREHEVBRIO SUS 10MCG/ML .....	280
<i>tab 10 mg (base eq)</i> .....	155	PREMARIN INJ 25MG .....	191
<i>prednisolone sod phos orally disintegr</i>	155	PREMARIN TAB 0.3MG .....	191
<i>tab 15 mg (base eq)</i> .....	155	PREMARIN TAB 0.45MG .....	191
<i>prednisolone sod phos orally disintegr</i>	155	PREMARIN TAB 0.625MG .....	191
<i>tab 30 mg (base eq)</i> .....	155	PREMARIN TAB 0.9MG .....	191
<i>prednisolone sod phosphate oral soln</i>	155	PREMARIN TAB 1.25MG .....	191
<i>10 mg/5ml (base equiv)</i> .....	155	PREMARIN VAG CRE 0.625MG .....	281
<i>prednisolone sod phosphate oral soln</i>	155	PREMASOL SOL 10% .....	246
<i>15 mg/5ml (base equiv)</i> .....	155	PREMESISRX TAB .....	239
<i>prednisolone sod phosphate oral soln</i>	155	PREMPHASE TAB .....	189
<i>20 mg/5ml (base equiv)</i> .....	155	PREMPRO TAB .....	189
<i>prednisolone sod phosph oral soln 6.7</i>	155	PREMPRO TAB 0.3-1.5 .....	189
<i>mg/5ml (5 mg/5ml base)</i> .....	155	PREMPRO TAB 0.45-1.5 .....	189
<i>prednisolone soln 15 mg/5ml</i> .....	155	PREMPRO TAB 0.625-5 .....	189
PREDNISOLONE SUS 1% .....	251	PRENA1 CHW .....	239
PREDNISON CON 5MG/ML .....	155	PRENA1 PEARL CAP .....	239
<i>prednisone oral soln 5 mg/5ml</i> .....	155	PRENA 1 TRUE MIS .....	239
<i>prednisone tab 10 mg</i> .....	155	PRENAISSANCE CAP .....	239
<i>prednisone tab 1 mg</i> .....	155	PRENAISSANCE CAP PLUS .....	240
<i>prednisone tab 2.5 mg</i> .....	155	<i>prenatabs rx tab</i> .....	240
<i>prednisone tab 20 mg</i> .....	155	PRENATAL+FE TAB 29-1MG .....	240
<i>prednisone tab 50 mg</i> .....	155	PRENATAL 19 CHW 29-1MG .....	240
<i>prednisone tab 5 mg</i> .....	155	<i>prenatal 19 chw tab</i> .....	240
<i>prednisone tab therapy pack 10 mg</i>	155	PRENATAL 19 TAB 29-1MG .....	240
<i>(21)</i> .....	155	PRENATAL DHA PAK 27-1-250 .....	240
<i>prednisone tab therapy pack 10 mg</i>	155	PRENATAL TAB 27-1MG .....	240
<i>(48)</i> .....	155	PRENATAL TAB PLUS .....	240
		PRENATAL-U CAP 106.5-1 .....	240

PRENATAL VIT TAB LOW IRON .....	240	PRIMAQUINE TAB 26.3MG .....	99
PRENATE AM TAB 1MG .....	240	PRIMAXIN IV INJ 500MG .....	44
PRENATE CAP ENHANCE .....	240	<i>primidone tab 250 mg</i> .....	64
PRENATE CAP ESSENT .....	240	<i>primidone tab 50 mg</i> .....	64
PRENATE CAP PIXIE.....	240	PRIMLEV TAB 10-300MG .....	40
PRENATE CAP RESTORE .....	240	PRIMLEV TAB 5-300MG .....	39
PRENATE CHW 0.6-0.4.....	240	PRIMLEV TAB 7.5-300.....	39
PRENATE DHA CAP .....	240	PRIORIX INJ .....	280
PRENATE MINI CAP.....	240	PRISMASOL SOL 0/0/1.2 .....	232
PRENATE TAB ELITE .....	240	PRISMASOL SOL 0/2.5 .....	232
PRENATRIX TAB .....	240	PRISMASOL SOL 2/0.....	232
PREPIDIL GEL 0.5MG/3G .....	254	PRISMASOL SOL 2/3.5 .....	232
PREPLUS TAB 27-1MG.....	240	PRISMASOL SOL 4/0/1.2 .....	232
PRESERA AER .....	171	PRISMASOL SOL 4/2.5 .....	232
PRESTALIA TAB 14-10MG .....	97	PRISMASOL SOL B22GK4/0 .....	232
PRESTALIA TAB 3.5-2.5 .....	97	PRISTIQ TAB 100MG .....	71
PRESTALIA TAB 7-5MG .....	97	PRISTIQ TAB 25MG .....	71
PRETAB TAB 29-1MG .....	240	PRISTIQ TAB 50MG .....	71
PRETOMANID TAB 200MG.....	100	PROAIR HFA AER .....	55
PREVACID CAP 15MG DR.....	277	PROAIR RESPI AER.....	55
PREVACID CAP 30MG DR.....	277	<i>probenecid tab 500 mg</i> .....	198
PREVACID TAB 15MG STB .....	277	PROBUPHINE IMP KIT 74.2.....	41
PREVACID TAB 30MG STB .....	277	<i>procainamide hcl inj 100 mg/ml</i> .....	51
<i>prevalite pow 4gm</i> .....	87	<i>procainamide hcl inj 500 mg/ml</i> .....	51
<i>prevalite pow 4gm pk</i> .....	87	PROCARDIA XL TAB 30MG CR .....	138
PREVIDOLRX PAK ANALGESI.....	28	PROCARDIA XL TAB 60MG CR .....	138
PREVNAR 13 INJ .....	279	PROCARDIA XL TAB 90MG CR .....	138
PREVNAR 20 INJ .....	279	<i>procentra sol 5mg/5ml</i> .....	14
PREVYMIS INJ 240/12.....	130	<i>prochlorperazine edisylate inj 10</i> <i>mg/2ml</i> .....	125
PREVYMIS INJ 480/24.....	130	<i>prochlorperazine maleate tab 10 mg</i> <i>(base equivalent)</i> .....	125
PREVYMIS TAB 240MG .....	130	<i>prochlorperazine maleate tab 5 mg</i> <i>(base equivalent)</i> .....	125
PREVYMIS TAB 480MG .....	130	<i>prochlorperazine suppos 25 mg</i> .....	125
PREZCOBIX TAB 800-150 .....	129	PRO COMFORT MIS 31G .....	221
PREZISTA SUS 100MG/ML .....	129	PRO COMFORT MIS LANCETS .....	221
PREZISTA TAB 150MG .....	129	PROCORT CRE .....	42
PREZISTA TAB 600MG .....	129	PROCRIT INJ 10000/ML.....	206
PREZISTA TAB 75MG .....	129	PROCRIT INJ 2000/ML .....	206
PREZISTA TAB 800MG .....	129	PROCRIT INJ 20000/ML.....	206
PRIALT INJ 100MCG .....	30	PROCRIT INJ 3000/ML .....	206
PRIALT INJ 25MCG/ML.....	30	PROCRIT INJ 4000/ML .....	206
PRIALT INJ 500MCG .....	30	PROCRIT INJ 40000/ML.....	206
PRIFTIN TAB 150MG .....	100	PROCTOCORT CRE 1%.....	43
PRILOSEC POW 10MG .....	277	PROCTOCORT SUP 30MG .....	43
PRILOSEC POW 2.5MG .....	277	PROCTOFOAM AER HC 1%.....	42
PRIMACARE CAP.....	240		
<i>primaquine phosphate tab 26.3 mg (15</i> <i>mg base)</i> .....	99		

<i>procto-med cre hc 2.5%</i> .....	43	<i>promethazine w/ codeine syrup 6.25-10 mg/5ml</i> .....	156
<i>procto-pak cre 1%</i> .....	43	<i>promethegan sup 12.5mg</i> .....	86
<i>proctosol hc cre 2.5%</i> .....	43	<i>promethegan sup 25mg</i> .....	86
<i>proctozone cre -hc 2.5%</i> .....	43	<i>promethegan sup 50mg</i> .....	86
PROCYSBI CAP 25MG.....	196	<i>prometh vc/ syp codeine</i> .....	156
PROCYSBI CAP 75MG.....	196	<i>prometh vc syp 6.25-5/5</i> .....	156
PRODIGY MIS 26G.....	221	PROMETRIUM CAP 100MG .....	259
PRODIGY MIS 28G.....	221	PROMETRIUM CAP 200MG .....	259
PRODIGY NO TES CODING.....	177	PROMISEB CRE .....	164
PROFILNINE INJ 1000UNIT .....	201	<i>propafenone hcl cap er 12hr 225 mg</i> 51	
PROFILNINE INJ 1500UNIT .....	201	<i>propafenone hcl cap er 12hr 325 mg</i> 51	
PROFILNINE INJ 500UNIT.....	201	<i>propafenone hcl cap er 12hr 425 mg</i> 51	
<i>progesterone cap 100 mg</i> .....	259	<i>propafenone hcl tab 150 mg</i> .....	51
<i>progesterone cap 200 mg</i> .....	259	<i>propafenone hcl tab 225 mg</i> .....	51
<i>progesterone im in oil 50 mg/ml</i> ....	259	<i>propafenone hcl tab 300 mg</i> .....	51
PROGLYCEM SUS 50MG/ML .....	76	<i>proparacaine hcl ophth soln 0.5%</i> ...250	
PROGRAF CAP 0.5MG.....	233	<i>propofol iv emul 1000 mg/100ml (10 mg/ml)</i> .....	196
PROGRAF CAP 1MG.....	233	<i>propofol iv emul 200 mg/20ml (10 mg/ml)</i> .....	196
PROGRAF CAP 5MG.....	234	<i>propofol iv emul 500 mg/50ml (10 mg/ml)</i> .....	196
PROGRAF GRA 0.2MG .....	234	<i>propoven inj</i> .....	196
PROGRAF GRA 1MG .....	234	<i>propoven inj 200/20ml</i> .....	196
PROGRAF INJ 5MG/ML .....	234	<i>propoven inj 500/50ml</i> .....	196
PROLASTIN-C INJ 1000MG .....	267	<i>propranolol hcl cap er 24hr 120 mg</i> 135	
PROLENSA SOL 0.07%.....	253	<i>propranolol hcl cap er 24hr 160 mg</i> 135	
PROLEUKIN INJ 22MU .....	114	<i>propranolol hcl cap er 24hr 60 mg</i> ..135	
PROLIA INJ 60MG/ML.....	182	<i>propranolol hcl cap er 24hr 80 mg</i> ..135	
PROMACTA PAK 25MG.....	206	<i>propranolol hcl inj 1 mg/ml</i> .....	135
PROMACTA POW 12.5MG.....	206	<i>propranolol hcl oral soln 20 mg/5ml</i> 135	
PROMACTA TAB 12.5MG.....	206	<i>propranolol hcl oral soln 40 mg/5ml</i> 135	
PROMACTA TAB 25MG.....	206	<i>propranolol hcl tab 10 mg</i> .....	135
PROMACTA TAB 50MG.....	206	<i>propranolol hcl tab 20 mg</i> .....	135
PROMACTA TAB 75MG.....	206	<i>propranolol hcl tab 40 mg</i> .....	135
<i>promethazine &amp; phenylephrine syrup 6.25-5 mg/5ml</i> .....	156	<i>propranolol hcl tab 60 mg</i> .....	135
<i>promethazine-dm syrup 6.25-15 mg/5ml</i> .....	156	<i>propranolol hcl tab 80 mg</i> .....	135
<i>promethazine hcl inj 25 mg/ml</i> .....	86	<i>propylthiouracil tab 50 mg</i> .....	270
<i>promethazine hcl inj 50 mg/ml</i> .....	86	PROQUAD INJ .....	280
<i>promethazine hcl suppos 12.5 mg</i> ....	86	PROSCAR TAB 5MG .....	197
<i>promethazine hcl suppos 25 mg</i> .....	86	PROSOL INJ 20% .....	247
<i>promethazine hcl syrup 6.25 mg/5ml</i> 86		PROSTIN VR INJ 500MCG .....	235
<i>promethazine hcl tab 12.5 mg</i> .....	86	<i>protamine sulfat inj 10 mg/ml</i> .....	203
<i>promethazine hcl tab 25 mg</i> .....	86	PROTHELIAL PST 10% .....	236
<i>promethazine hcl tab 50 mg</i> .....	86	PROTONIX INJ 40MG .....	277
<i>promethazine-phenylephrine-codeine syrup 6.25-5-10 mg/5ml</i> .....	156	PROTONIX PAK 40MG .....	277



PROTONIX TAB 20MG .....277  
 PROTONIX TAB 40MG .....277  
 PROTOPAM CHL INJ 1GM.....81  
 PROTOPIC OIN 0.03%.....169  
 PROTOPIC OIN 0.1% .....169  
*protriptyline hcl tab 10 mg* .....73  
*protriptyline hcl tab 5 mg* .....73  
 PROVAYBLUE INJ .....81  
 PROVENGE INJ.....106  
 PROVENTIL AER HFA .....55  
 PROVERA TAB 10MG .....259  
 PROVERA TAB 2.5MG .....259  
 PROVERA TAB 5MG.....259  
 PROVIDA OB CAP .....240  
 PROVIGIL TAB 100MG .....19  
 PROVIGIL TAB 200MG .....19  
 PROVISC INJ 1%.....252  
 PROZAC CAP 10MG .....70  
 PROZAC CAP 20MG .....70  
 PROZAC CAP 40MG .....70  
 PRUCLAIR CRE.....171  
 PRUDOXIN CRE 5% .....162  
 PRUMYX CRE .....171  
*pseudoephed-bromphen-dm syrup 30-  
 2-10 mg/5ml* .....156  
 PSORCON CRE 0.05% .....168  
 PSS SAFE LAN MIS .....221  
 PSS SEL LANC MIS .....221  
 PSS SEL PLAT MIS.....221  
 PTS PANELS TES GLUCOSE.....177  
 PULMICORT INH 180MCG .....54  
 PULMICORT INH 90MCG.....54  
 PULMICORT SUS 0.25MG/2 .....54  
 PULMICORT SUS 0.5MG/2 .....54  
 PULMICORT SUS 1MG/2ML .....54  
 PULMOZYME SOL 1MG/ML .....267  
 PURIXAN SUS 20MG/ML .....103  
*px aspirin chw 81mg* .....31  
*px aspirin tab 81mg ec* .....31  
 PX LANCETS MIS 28G .....221  
 PX LANCETS MIS 33G .....221  
 PYLERA CAP.....277  
*pyrazinamide tab 500 mg* .....100  
*pyridostigmine bromide oral soln 60  
 mg/5ml*.....99  
*pyridostigmine bromide tab 60 mg* ...99

*pyridostigmine bromide tab er 180 mg*  
 .....99  
*pyridoxine hcl inj 100 mg/ml* .....283  
 PYRIDOXINE INJ 100MG/ML.....283  
*pyrimethamine tab 25 mg* .....99  
 PYROGALL ACD OIN.....169  
 PYRUKYND TAB 20MG .....204  
 PYRUKYND TAB 20MGX5MG .....204  
 PYRUKYND TAB 50MG .....204  
 PYRUKYND TAB 50MGX20M .....204  
 PYRUKYND TAB 5MG.....203  
 PYRUKYND TAB 5MG TP .....203  
**Q**  
 QBRELIS SOL 1MG/ML .....91  
 QBREXZA PAD 2.4% .....171  
*qc aspirin chw 81mg*.....31  
*qc child asa chw 81mg*.....31  
*qc diclofena gel 1%* .....160  
 QC LANCETS MIS 28G.....221  
 QC LANCETS MIS 30G.....221  
*qc nicotine dis 14mg/24h* .....265  
*qc nicotine dis 21mg/24h* .....266  
 QELBREE CAP 100MG ER.....16  
 QELBREE CAP 150MG ER.....16  
 QELBREE CAP 200MG ER.....16  
 QINLOCK TAB 50MG .....112  
 QNASL AER 80MCG.....244  
 QNASL CHILD SPR 40MCG .....244  
 QSYMIA CAP 11.25-69 .....15  
 QSYMIA CAP 15-92MG .....15  
 QSYMIA CAP 3.75-23.....15  
 QSYMIA CAP 7.5-46MG .....15  
 QTERN TAB 10-5MG .....74  
 QTERN TAB 5-5MG .....74  
 QUADRACEL INJ .....274  
 QUADRACEL INJ 0.5ML .....274  
 QUALAQUIN CAP 324MG .....99  
*quazepam tab 15 mg* .....210  
 QUDEXY XR CAP 100/24HR .....64  
 QUDEXY XR CAP 150/24HR .....64  
 QUDEXY XR CAP 200/24HR .....64  
 QUDEXY XR CAP 25/24HR .....64  
 QUDEXY XR CAP 50/24HR .....64  
 QUELICIN INJ 20MG/ML .....244  
 QUESTRAN POW 4GM .....87  
 QUESTRAN POW 4GM LITE .....87  
*quetiapine fumarate tab 100 mg* ....123

*quetiapine fumarate tab 150 mg* ....123  
*quetiapine fumarate tab 200 mg* ....123  
*quetiapine fumarate tab 25 mg* .....123  
*quetiapine fumarate tab 300 mg* ....123  
*quetiapine fumarate tab 400 mg* ....123  
*quetiapine fumarate tab 50 mg* .....123  
*quetiapine fumarate tab er 24hr 150 mg* .....123  
*quetiapine fumarate tab er 24hr 200 mg* .....123  
*quetiapine fumarate tab er 24hr 300 mg* .....123  
*quetiapine fumarate tab er 24hr 400 mg* .....123  
*quetiapine fumarate tab er 24hr 50 mg* .....123  
 QUFLORA CHW .....238  
 QUFLORA FE CHW .....237  
 QUFLORA PED DRO 0.25MG.....238  
 QUFLORA PED DRO 0.5MG/ML .....238  
 QUICKTEK TES.....177  
 QUILLICHEW CHW 20MG ER .....19  
 QUILLICHEW CHW 30MG ER .....19  
 QUILLICHEW CHW 40MG ER .....19  
 QUILLIVANT SUS 25MG/5ML.....19  
*quinapril hcl tab 10 mg* .....91  
*quinapril hcl tab 20 mg* .....91  
*quinapril hcl tab 40 mg* .....91  
*quinapril hcl tab 5 mg*.....91  
*quinapril-hydrochlorothiazide tab 10-12.5 mg*.....97  
*quinapril-hydrochlorothiazide tab 20-12.5 mg*.....97  
*quinapril-hydrochlorothiazide tab 20-25 mg* .....97  
*quinidine gluconate tab er 324 mg* ...51  
*quinine sulfate cap 324 mg* .....99  
 QUINTET AC TES BLD GLUC.....177  
 QUINTET TES BLD GLUC.....177  
 QULIPTA TAB 10MG .....225  
 QULIPTA TAB 30MG .....225  
 QULIPTA TAB 60MG .....225  
 QUTENZA KIT 8% 1-PCH .....170  
 QUTENZA KIT 8% 2-PCH .....170  
 QUTENZA KIT 8% 4-PCH .....170  
 QUVIVIQ TAB 25MG.....210  
 QUVIVIQ TAB 50MG.....210

QVAR REDIHA AER 80MCG .....54  
 QVAR REDIHAL AER 40MCG.....54  
**R**  
*ra aspirin chw 81mg* .....31  
*ra aspirin tab 81mg ec*.....31  
 RABAVERT INJ .....280  
*rabeprazole sodium ec tab 20 mg*...277  
 RADIAPLEXRX GEL .....173  
 RADICAVA INJ 30MG .....244  
 RADICAVA ORS SUS 105/5ML .....244  
 RADICAVA ORS SUS STARTER .....244  
 RADIOGARDASE CAP 0.5GM .....81  
 RA E-ZJECT MIS 28G .....222  
 RA E-ZJECT MIS THIN 26G .....222  
 RA E-ZJECT MIS THIN 28G .....222  
 RA E-ZJECT MIS ULT THIN .....222  
 RAGWITEK SUB .....20  
*raloxifene hcl tab 60 mg*.....184  
*ramelteon tab 8 mg* .....211  
*ramipril cap 1.25 mg* .....91  
*ramipril cap 10 mg* .....91  
*ramipril cap 2.5 mg* .....91  
*ramipril cap 5 mg*.....91  
 RANEXA TAB 1000MG .....48  
 RANEXA TAB 500MG .....48  
*ra nicotine dis 14mg/24h*.....266  
*ra nicotine dis 21mg/24h*.....266  
*ra nicotine gum 2mg*.....266  
*ra nicotine gum 2mg mint* .....266  
*ra nicotine gum 4mg*.....266  
*ra nicotine gum 4mg mint* .....266  
*ra nicotine loz 2mg mint*.....266  
*ra nicotine loz 4mg mint*.....266  
*ranolazine tab er 12hr 1000 mg* .....48  
*ranolazine tab er 12hr 500 mg* .....48  
 RAPAFL0 CAP 4MG .....197  
 RAPAFL0 CAP 8MG .....197  
 RAPAMUNE SOL 1MG/ML .....234  
 RAPAMUNE TAB 0.5MG.....234  
 RAPAMUNE TAB 1MG .....234  
 RAPAMUNE TAB 2MG .....234  
 RAPIVAB INJ 200MG/20 .....132  
*rasagiline mesylate tab 0.5 mg (base equiv)* .....120  
*rasagiline mesylate tab 1 mg (base equiv)* .....120  
 RASUVO INJ 10MG .....25

RASUVO INJ 12.5MG .....	25	RECTIV OIN 0.4% .....	43
RASUVO INJ 15MG .....	25	REDICHEW RX CHW.....	240
RASUVO INJ 17.5MG .....	25	REDITREX INJ 10/.4ML .....	25
RASUVO INJ 22.5MG .....	25	REDITREX INJ 12.5/0.5.....	25
RASUVO INJ 25MG .....	25	REDITREX INJ 15/.6ML .....	25
RASUVO INJ 30MG .....	25	REDITREX INJ 17.5/0.7.....	25
RASUVO INJ 7.5MG .....	25	REDITREX INJ 20/.8ML .....	25
RA TRUETEST TES .....	177	REDITREX INJ 22.5/0.9.....	25
RAVICTI LIQ 1.1GM/ML .....	186	REDITREX INJ 25MG/ML.....	25
RAYALDEE CAP 30MCG.....	186	REDITREX INJ 7.5/.3ML .....	25
RAYOS TAB 1MG .....	155	REFUAH PLUS TES BLD GLUC .....	177
RAYOS TAB 2MG .....	155	REGLAN TAB 10MG.....	193
RAYOS TAB 5MG .....	155	REGLAN TAB 5MG.....	193
RAZADYNE ER CAP 16MG .....	260	REGONOL INJ 5MG/ML.....	99
RAZADYNE ER CAP 24MG .....	260	REGRANEX GEL 0.01%.....	174
RAZADYNE ER CAP 8MG .....	260	RELAFEN DS TAB 1000MG .....	28
<i>react tab 1.5mg</i> .....	152	<i>relafen tab 500mg</i> .....	28
REALITY MIS LUBRICAT .....	216	<i>relafen tab 750mg</i> .....	28
REALITY ULTR MIS TEXTURED.....	216	RELENZA MIS DISKHALE .....	132
REALITY ULTR MIS THIN .....	216	RELEUKO INJ 300MCG .....	206
REAL-TIME KIT .....	222	RELEUKO INJ 480MCG .....	206
REBIF INJ 22/0.5 .....	263	RELEXXII TAB 72MG.....	19
REBIF INJ 44/0.5 .....	263	RELION BLOOD TES GLUCOSE .....	178
REBIF REBIDO INJ 22/0.5.....	263	RELION LANCE MIS THIN 26G.....	222
REBIF REBIDO INJ 44/0.5.....	263	RELION LANCE MIS THIN 30G.....	222
REBIF REBIDO INJ TITRATN.....	263	RELION MICRO MIS THIN 33G.....	222
REBIF TITRTN INJ PACK .....	263	RELION PRIME TES.....	178
REBINYN INJ 3000UNIT.....	201	RELION PRIME TES GLUCOSE .....	178
REBINYN SOL 1000UNIT .....	201	RELION TES ULTIMA .....	178
REBINYN SOL 2000UNIT .....	201	RELION ULTRA MIS THIN PLS.....	222
REBINYN SOL 500UNIT .....	201	RELISTOR INJ 12/0.6ML.....	194
REBLOZYL INJ 25MG.....	206	RELISTOR INJ 8/0.4ML.....	194
REBLOZYL INJ 75MG.....	206	RELISTOR TAB 150MG .....	194
RECARBRIO INJ 1.25GM.....	44	RELNATE DHA CAP .....	240
RECEDO GEL .....	172	RELPAK TAB 20MG .....	226
RECLAST INJ 5/100ML .....	182	RELPAK TAB 40MG .....	226
<i>reclipsen tab</i> .....	150	RELYVRIO PAK 3-1GM.....	244
RECOMBINATE INJ .....	201	REMDÉSIVIR INJ 100MG .....	133
RECOMBINATE INJ 220-400.....	201	REMERON SLTB TAB 15MG .....	67
RECOMBINATE INJ 401-800.....	201	REMERON SLTB TAB 30MG .....	67
RECOMBINATE INJ 801-1240 .....	201	REMERON SLTB TAB 45MG .....	67
RECOMBIVA HB INJ 10MCG/ML .....	280	REMERON TAB 15MG.....	67
RECOMBIVA-HB INJ 40MCG/ML .....	280	REMERON TAB 30MG.....	67
RECOMBIVA HB INJ 5MCG/0.5 .....	280	REMICADE INJ 100MG .....	193
RECORLEV TAB 150MG .....	181	<i>remifentanil hcl for iv soln 1 mg</i> .....	37
RECOTHROM SOL 20000UNT .....	208	<i>remifentanil hcl for iv soln 2 mg</i> .....	37
RECOTHROM SOL 5000UNIT .....	208	<i>remifentanil hcl for iv soln 5 mg</i> .....	37

REMIGEN CREA CRE .....	171	RETISERT IMP 0.59MG .....	251
REMODULIN INJ 10MG/ML .....	142	RETROVIR CAP 100MG .....	129
REMODULIN INJ 1MG/ML.....	142	RETROVIR INJ 10MG/ML.....	129
REMODULIN INJ 2.5MG/ML.....	142	RETROVIR SYP 50MG/5ML .....	129
REMODULIN INJ 5MG/ML.....	142	REVATIO INJ.....	143
RENACIDIN SOL.....	197	REVATIO SUS 10MG/ML .....	143
RENAGEL TAB 800MG .....	195	REVATIO TAB 20MG.....	143
RENFLEXIS INJ 100MG.....	193	REVCIVI INJ 1.6MG/ML .....	186
REVELA POW 0.8GM .....	195	REVEAL TES BLD GLUC .....	178
REVELA POW 2.4GM .....	195	REVLIMID CAP 10MG .....	232
REVELA TAB 800MG.....	195	REVLIMID CAP 15MG .....	232
<i>repaglinide tab 0.5 mg</i> .....	79	REVLIMID CAP 2.5MG .....	232
<i>repaglinide tab 1 mg</i> .....	79	REVLIMID CAP 20MG .....	232
<i>repaglinide tab 2 mg</i> .....	79	REVLIMID CAP 25MG .....	232
REPATHA INJ 140MG/ML .....	90	REVLIMID CAP 5MG .....	232
REPATHA PUSH INJ 420/3.5 .....	90	<i>revonto inj 20mg</i> .....	243
REPATHA SURE INJ 140MG/ML.....	90	REXULTI TAB 0.25MG .....	126
REQ 49+ TAB .....	237	REXULTI TAB 0.5MG .....	126
<i>resorcinol-sulfur lotion 2-5%</i> .....	159	REXULTI TAB 1MG .....	126
RESTASIS EMU 0.05% OP .....	250	REXULTI TAB 2MG .....	126
RESTASIS MUL EMU 0.05% OP.....	250	REXULTI TAB 3MG .....	126
RESTORA RX CAP 60-1.25.....	80	REXULTI TAB 4MG .....	126
RESTORE SILV PAD 2.....	174	REYATAZ CAP 200MG.....	129
RESTORE SILV PAD 4.....	174	REYATAZ CAP 300MG.....	129
RESTORIL CAP 15MG .....	210	REYATAZ POW 50MG .....	129
RESTORIL CAP 22.5MG .....	210	REYVOW TAB 100MG .....	226
RESTORIL CAP 30MG .....	210	REYVOW TAB 50MG .....	226
RESTORIL CAP 7.5MG .....	210	REZIPRES SOL.....	283
RETACRIT INJ 10000UNT.....	206	REZUROCK TAB 200MG.....	232
RETACRIT INJ 20000UNI .....	206	REZZAYO INJ 200MG.....	84
RETACRIT INJ 2000UNIT .....	206	RHOFADE CRE 1%.....	172
RETACRIT INJ 3000UNIT .....	206	RHOGAM PLUS INJ 300MCG.....	256
RETACRIT INJ 40000UNT.....	206	RHOPHYLAC INJ 1500/2ML .....	256
RETACRIT INJ 4000UNIT .....	206	RHOPRESSA SOL 0.02%.....	250
RETEVMO CAP 40MG.....	112	RIASTAP SOL 1GM.....	201
RETEVMO CAP 80MG.....	112	<i>ribavirin cap 200 mg</i> .....	131
RETIN-A CRE 0.025% .....	159	<i>ribavirin tab 200 mg</i> .....	131
RETIN-A CRE 0.05% .....	159	RIDAURA CAP 3MG.....	25
RETIN-A CRE 0.1%.....	159	<i>rifabutin cap 150 mg</i> .....	100
RETIN-A GEL 0.01% .....	159	RIFADIN INJ 600 MG .....	100
RETIN-A GEL 0.025% .....	159	<i>rifampin cap 150 mg</i> .....	100
RETIN-A MICR GEL 0.04% .....	159	<i>rifampin cap 300 mg</i> .....	100
RETIN-A MICR GEL 0.04%PMP .....	159	<i>rifampin for inj 600 mg</i> .....	100
RETIN-A MICR GEL 0.06% .....	159	RIGHTEST ALT MIS ADAPTOR .....	222
RETIN-A MICR GEL 0.08% .....	159	RIGHTEST MIS GL300 .....	222
RETIN-A MICR GEL 0.1%.....	159	RIGHTEST TES GS100.....	178
RETIN-A MICR GEL 0.1%PUMP.....	159	RIGHTEST TES GS300.....	178

RIGHTEST TES GS550.....	178	RITALIN LA CAP 10MG .....	19
RILUTEK TAB 50MG .....	244	RITALIN LA CAP 20MG .....	19
<i>riluzole tab 50 mg</i> .....	244	RITALIN LA CAP 30MG .....	19
<i>rimantadine hydrochloride tab 100 mg</i> .....	132	RITALIN LA CAP 40MG .....	19
RIMSO-50 SOL 50% .....	197	RITALIN TAB 10MG .....	19
<i>ringer's solution</i> .....	228	RITALIN TAB 20MG .....	19
<i>ringer's solution for irrigation</i> .....	234	RITALIN TAB 5MG .....	19
RINVOQ TAB 15MG ER.....	24	<i>ritonavir tab 100 mg</i> .....	129
RINVOQ TAB 30MG ER.....	24	RITUXAN INJ 100MG.....	105
RINVOQ TAB 45MG ER.....	24	RITUXAN INJ 500MG.....	105
RIOMET SOL 500/5ML.....	75	RITUXAN INJ HYCELA.....	109
<i>risedronate sodium tab 150 mg</i> .....	182	<i>rivastigmine tartrate cap 1.5 mg (base</i> <i>equivalent)</i> .....	260
<i>risedronate sodium tab 30 mg</i> .....	182	<i>rivastigmine tartrate cap 3 mg (base</i> <i>equivalent)</i> .....	260
<i>risedronate sodium tab 35 mg</i> .....	182	<i>rivastigmine tartrate cap 4.5 mg (base</i> <i>equivalent)</i> .....	260
<i>risedronate sodium tab 5 mg</i> .....	182	<i>rivastigmine tartrate cap 6 mg (base</i> <i>equivalent)</i> .....	260
<i>risedronate sodium tab delayed release</i> <i>35 mg</i> .....	182	<i>rivastigmine td patch 24hr 13.3</i> <i>mg/24hr</i> .....	261
RISPERDAL INJ 12.5MG .....	121	<i>rivastigmine td patch 24hr 4.6 mg/24hr</i> .....	260
RISPERDAL INJ 25MG .....	121	<i>rivastigmine td patch 24hr 9.5 mg/24hr</i> .....	261
RISPERDAL INJ 37.5MG .....	121	<i>rivelsa tab</i> .....	150
RISPERDAL INJ 50MG .....	121	RIXUBIS INJ 1000UNIT .....	201
RISPERDAL SOL 1MG/ML.....	121	RIXUBIS INJ 2000UNIT .....	201
RISPERDAL TAB 0.5MG .....	121	RIXUBIS INJ 250 UNIT.....	201
RISPERDAL TAB 1MG .....	122	RIXUBIS INJ 3000UNIT .....	201
RISPERDAL TAB 2MG .....	122	RIXUBIS INJ 500UNIT.....	201
RISPERDAL TAB 3MG .....	122	<i>rizatriptan benzoate oral disintegrating</i> <i>tab 10 mg (base eq)</i> .....	226
RISPERDAL TAB 4MG .....	122	<i>rizatriptan benzoate oral disintegrating</i> <i>tab 5 mg (base eq)</i> .....	226
<i>risperidone orally disintegrating tab</i> <i>0.25 mg</i> .....	122	<i>rizatriptan benzoate tab 10 mg (base</i> <i>equivalent)</i> .....	226
<i>risperidone orally disintegrating tab 0.5</i> <i>mg</i> .....	122	<i>rizatriptan benzoate tab 5 mg (base</i> <i>equivalent)</i> .....	226
<i>risperidone orally disintegrating tab 1</i> <i>mg</i> .....	122	ROBAXIN INJ 100MG/ML .....	242
<i>risperidone orally disintegrating tab 2</i> <i>mg</i> .....	122	ROBINUL FORT TAB 2MG.....	275
<i>risperidone orally disintegrating tab 3</i> <i>mg</i> .....	122	ROBINUL TAB 1MG .....	275
<i>risperidone orally disintegrating tab 4</i> <i>mg</i> .....	122	ROCALTROL CAP 0.25MCG.....	186
<i>risperidone soln 1 mg/ml</i> .....	122	ROCALTROL CAP 0.5MCG .....	186
<i>risperidone tab 0.25 mg</i> .....	122	ROCALTROL SOL 1MCG/ML.....	186
<i>risperidone tab 0.5 mg</i> .....	122	ROCKLATAN DRO .....	250
<i>risperidone tab 1 mg</i> .....	122	ROCURON BRO SOL 100/10ML.....	245
<i>risperidone tab 2 mg</i> .....	122		
<i>risperidone tab 3 mg</i> .....	122		
<i>risperidone tab 4 mg</i> .....	122		

<i>rocuronium bromide iv soln 100 mg/10ml (10 mg/ml)</i> .....	245
<i>rocuronium bromide iv soln 50 mg/5ml (10 mg/ml)</i> .....	245
<i>roflumilast tab 250 mcg</i> .....	53
<i>roflumilast tab 500 mcg</i> .....	53
ROLVEDON INJ 13.2MG .....	206
<i>romidepsin for iv inj 10 mg</i> .....	112
ROMIDEPSIN INJ 27.5MG .....	112
<i>ropinirole hydrochloride tab 0.25 mg</i> .....	119
<i>ropinirole hydrochloride tab 0.5 mg</i> .....	119
<i>ropinirole hydrochloride tab 1 mg</i> .....	119
<i>ropinirole hydrochloride tab 2 mg</i> .....	119
<i>ropinirole hydrochloride tab 3 mg</i> .....	119
<i>ropinirole hydrochloride tab 4 mg</i> .....	119
<i>ropinirole hydrochloride tab 5 mg</i> .....	119
<i>ropinirole hydrochloride tab er 24hr 12 mg (base equivalent)</i> .....	119
<i>ropinirole hydrochloride tab er 24hr 2 mg (base equivalent)</i> .....	119
<i>ropinirole hydrochloride tab er 24hr 4 mg (base equivalent)</i> .....	119
<i>ropinirole hydrochloride tab er 24hr 6 mg (base equivalent)</i> .....	119
<i>ropinirole hydrochloride tab er 24hr 8 mg (base equivalent)</i> .....	119
<i>ropivacaine hcl inj 10 mg/ml</i> .....	213
<i>ropivacaine hcl inj 2 mg/ml</i> .....	213
<i>ropivacaine hcl inj 5 mg/ml</i> .....	213
<i>ropivacaine hcl inj 7.5 mg/ml</i> .....	213
ROPIVACAINE INJ 0.5% .....	213
ROPIVACAINE INJ 2MG/ML .....	213
<i>rosadan cre 0.75%</i> .....	172
<i>rosadan gel 0.75%</i> .....	172
<i>rosuvastatin calcium tab 10 mg</i> .....	89
<i>rosuvastatin calcium tab 20 mg</i> .....	89
<i>rosuvastatin calcium tab 40 mg</i> .....	89
<i>rosuvastatin calcium tab 5 mg</i> .....	89
ROSZET TAB 10-10MG .....	86
ROSZET TAB 20-10MG .....	86
ROSZET TAB 40-10MG .....	86
ROSZET TAB 5-10MG.....	86
ROTARIX SUS .....	280
ROTATEQ SOL.....	280
ROWASA KIT 4GM .....	193
<i>roweeptra tab 500mg</i> .....	64

ROXICODONE TAB 15MG.....	37
ROXICODONE TAB 30MG.....	37
ROXYBOND TAB 15MG .....	37
ROXYBOND TAB 30MG .....	37
ROXYBOND TAB 5MG.....	37
ROZEREM TAB 8MG .....	211
ROZLYTREK CAP 100MG .....	112
ROZLYTREK CAP 200MG .....	112
RUBRACA TAB 200MG .....	112
RUBRACA TAB 250MG .....	112
RUBRACA TAB 300MG .....	112
RUCONEST INJ 2100UNIT.....	202
<i>rufinamide susp 40 mg/ml</i> .....	64
<i>rufinamide tab 200 mg</i> .....	64
<i>rufinamide tab 400 mg</i> .....	64
RUKOBIA TAB 600MG ER.....	129
RUXIENCE INJ 100/10ML.....	105
RUXIENCE INJ 500/50ML.....	105
RYALTRIS SPR 665-25 .....	243
RYANODEX INJ 250MG .....	243
RYBELSUS TAB 14MG .....	77
RYBELSUS TAB 3MG .....	77
RYBELSUS TAB 7MG .....	77
<i>ryclora sol 2mg/5ml</i> .....	85
RYDAPT CAP 25MG .....	112
RYLAZE INJ 10/0.5ML .....	114
RYPLAZIM SOL 68.8MG .....	203
RYTARY CAP 145MG.....	119
RYTARY CAP 195MG.....	119
RYTARY CAP 245MG.....	119
RYTARY CAP 95MG .....	119
RYTHMOL SR CAP 225MG .....	51
RYTHMOL SR CAP 325MG .....	51
RYTHMOL SR CAP 425MG .....	51
RYVENT TAB 6MG.....	85
<b>S</b>	
SABRIL POW 500MG .....	66
SABRIL TAB 500MG.....	66
SAFE-T-LANCE MIS 21G .....	222
SAFE-T-LANCE MIS 25G .....	222
SAFE-T-LANCE MIS HI FLOW.....	222
SAFE-T-LANCE MIS LOW FLOW .....	222
SAFE-T-LANCE MIS NOR FLOW.....	222
SAFE-T-PRO MIS LANCETS .....	222
SAFE-T-PRO MIS PLUS .....	222
SAFETY 21G MIS LANCETS .....	222
SAFETY 28G MIS LANCETS .....	222

SAFETY MIS LANCETS .....	222	<i>saxagliptin-metformin hcl tab er 24hr</i>	
SAFYRAL TAB.....	150	2.5-1000 mg .....	74
SAIZEN INJ 5MG .....	183	<i>saxagliptin-metformin hcl tab er 24hr</i>	
SAIZEN INJ 8.8MG .....	184	5-1000 mg .....	74
<i>sajazir inj 30mg/3ml.....</i>	<i>202</i>	<i>saxagliptin-metformin hcl tab er 24hr</i>	
SALAGEN TAB 5MG.....	236	5-500 mg.....	74
SALAGEN TAB 7.5MG .....	236	SAXENDA INJ 18MG/3ML .....	15
SALIMEZ FORT CRE 10%.....	169	<i>sb child asa chw 81mg.....</i>	<i>31</i>
SALIVAMAX POW.....	236	SB LANCETS MIS THIN.....	222
<i>salsalate tab 750 mg .....</i>	<i>31</i>	SB LANCETS MIS ULTR THN.....	222
SAMSCA TAB 15MG .....	188	SCLEROSOL AER INTRAPLE.....	267
SAMSCA TAB 30MG .....	188	<i>scopolamine td patch 72hr 1 mg/3days</i>	
SANCUSO DIS 3.1MG .....	82	.....	83
SANDIMMUNE CAP 100MG.....	234	SEASONIQUE TAB .....	150
SANDIMMUNE CAP 25MG.....	234	SEBUDERM GEL .....	171
SANDIMMUNE INJ 50MG/ML .....	234	SECUADO DIS 3.8MG.....	124
SANDIMMUNE SOL 100MG/ML.....	234	SECUADO DIS 5.7MG.....	124
SANDOSTATIN INJ 100MCG.....	188	SECUADO DIS 7.6MG.....	124
SANDOSTATIN INJ 500MCG.....	188	SEEBRI NEOHA CAP 15.6MCG.....	52
SANDOSTATIN INJ 50MCG/ML.....	188	SEGLENTIS TAB 56-44MG .....	40
SANDOSTATIN KIT LAR 10MG .....	188	SEGLUROMET TAB 2.5-1000 .....	74
SANDOSTATIN KIT LAR 20MG .....	188	SEGLUROMET TAB 2.5-500.....	74
SANDOSTATIN KIT LAR 30MG .....	188	SEGLUROMET TAB 7.5-1000 .....	75
SANTYL OIN 250/GM .....	169	SEGLUROMET TAB 7.5-500.....	75
SAPHRIS SUB 10MG .....	124	SELECT-OB+ PAK DHA.....	240
SAPHRIS SUB 2.5MG .....	123	SELECT-OB CHW .....	240
SAPHRIS SUB 5MG .....	123	<i>selegiline hcl cap 5 mg .....</i>	<i>120</i>
<i>sapropterin dihydrochloride powder</i>		<i>selegiline hcl tab 5 mg .....</i>	<i>120</i>
<i>packet 100 mg .....</i>	<i>186</i>	SELENIOUS AC SOL 12MCG/2M.....	231
<i>sapropterin dihydrochloride powder</i>		<i>selenium sulfide lotion 2.5% .....</i>	<i>164</i>
<i>packet 500 mg .....</i>	<i>186</i>	SELZENTRY SOL 20MG/ML.....	129
<i>sapropterin dihydrochloride tab 100 mg</i>		SELZENTRY TAB 150MG .....	129
.....	186	SELZENTRY TAB 25MG.....	129
SAPSCARE MIS TWIST .....	222	SELZENTRY TAB 300MG .....	129
SARCLISA SOL 100/5ML.....	105	SELZENTRY TAB 75MG.....	129
SARCLISA SOL 500/25ML.....	105	SEMGLEE INJ 100U/ML .....	78
SAVAYSA TAB 15MG.....	57	SEMGLEE SOL 100U/ML .....	78
SAVAYSA TAB 30MG.....	57	SE-NATAL 19 CHW .....	240
SAVAYSA TAB 60MG.....	57	SE-NATAL 19 TAB.....	240
SAVELLA MIS TITR PAK .....	261	SENSIPAR TAB 30MG .....	186
SAVELLA TAB 100MG .....	261	SENSIPAR TAB 60MG .....	186
SAVELLA TAB 12.5MG .....	261	SENSIPAR TAB 90MG .....	186
SAVELLA TAB 25MG.....	261	<i>sensorcaine/ inj epi 0.25 .....</i>	<i>212</i>
SAVELLA TAB 50MG.....	261	<i>sensorcaine/ inj epi 0.5% .....</i>	<i>212</i>
<i>saxagliptin hcl tab 2.5 mg (base equiv)</i>		<i>sensorcaine inj 0.25% .....</i>	<i>213</i>
.....	76	<i>sensorcaine inj 0.5% .....</i>	<i>213</i>
<i>saxagliptin hcl tab 5 mg (base equiv)</i>	<i>76</i>	<i>sensorcaine inj -mpf/epi.....</i>	<i>212</i>

SENSORCAINE INJ -MPF/EPI .....	212	SIGNIFOR LAR INJ 40MG.....	188
<i>sensorcaine inj mpf0.25%</i> .....	213	SIGNIFOR LAR INJ 60MG.....	188
<i>sensorcaine inj mpf 0.5%</i> .....	213	SIKLOS TAB 1000MG .....	204
<i>sensorcaine inj mpf0.75%</i> .....	213	SIKLOS TAB 100MG.....	204
SEREVENT DIS AER 50MCG .....	55	SILATRIX GEL 10% .....	237
SERNIVO SPR .....	168	<i>sildenafil citrate for suspension 10</i>	
SERNIVO SPR 0.05% .....	168	<i>mg/ml.....</i>	143
SEROQUEL TAB 100MG .....	124	<i>sildenafil citrate iv soln 10 mg/12.5ml</i>	
SEROQUEL TAB 200MG .....	124	<i>(base equivalent) .....</i>	143
SEROQUEL TAB 25MG.....	124	<i>sildenafil citrate tab 20 mg .....</i>	143
SEROQUEL TAB 300MG .....	124	SILENOR TAB 3MG .....	208
SEROQUEL TAB 400MG .....	124	SILENOR TAB 6MG .....	208
SEROQUEL TAB 50MG.....	124	SILIPAC KIT .....	172
SEROQUEL XR TAB 150MG .....	124	SILIQ INJ 210/1.5 .....	163
SEROQUEL XR TAB 200MG .....	124	<i>silodosin cap 4 mg.....</i>	197
SEROQUEL XR TAB 300MG .....	124	<i>silodosin cap 8 mg.....</i>	197
SEROQUEL XR TAB 400MG .....	124	SILVADENE CRE 1% .....	164
SEROQUEL XR TAB 50MG .....	124	<i>silver sulfadiazine cream 1%.....</i>	164
SEROSTIM INJ 4MG.....	184	SILVRSTAT GEL DRESSING.....	174
SEROSTIM INJ 5MG.....	184	SIMBRINZA SUS 1-0.2% .....	249
SEROSTIM INJ 6MG.....	184	<i>simliya tab 28 day .....</i>	150
<i>sertraline hcl oral concentrate for</i>		<i>simpesse tab .....</i>	150
<i>solution 20 mg/ml .....</i>	70	SIMPONI ARIA SOL 50MG/4ML.....	23
<i>sertraline hcl tab 100 mg .....</i>	70	SIMPONI INJ 100MG/ML.....	23
<i>sertraline hcl tab 25 mg .....</i>	70	SIMPONI INJ 50/0.5ML .....	23
<i>sertraline hcl tab 50 mg .....</i>	70	SIMULECT INJ 10MG.....	234
<i>setlakin tab .....</i>	150	SIMULECT INJ 20MG.....	234
<i>sevelamer carbonate packet 0.8 gm</i>	195	SIMVASTATIN SUS 20MG/5ML .....	89
<i>sevelamer carbonate packet 2.4 gm</i>	195	<i>simvastatin tab 10 mg .....</i>	89
<i>sevelamer carbonate tab 800 mg ...</i>	195	<i>simvastatin tab 20 mg .....</i>	89
<i>sevelamer hcl tab 400 mg .....</i>	195	<i>simvastatin tab 40 mg .....</i>	89
<i>sevelamer hcl tab 800 mg .....</i>	195	<i>simvastatin tab 5 mg.....</i>	89
SEVENFACT INJ 1MG .....	201	<i>simvastatin tab 80 mg .....</i>	89
SEVENFACT INJ 5MG .....	201	SINEMET TAB 10-100MG .....	119
<i>sevoflurane inhal soln .....</i>	196	SINEMET TAB 25-100MG.....	119
SEYSARA TAB 100MG .....	269	SINGLE-LET MIS 23G.....	222
SEYSARA TAB 150MG .....	269	SINGULAIR CHW 4MG.....	53
SEZABY INJ 100MG .....	208	SINGULAIR CHW 5MG.....	53
SFROWASA ENE 4GM.....	194	SINGULAIR GRA 4MG .....	53
<i>sharobel tab 0.35mg.....</i>	152	SINGULAIR TAB 10MG .....	53
SHINGRIX INJ 50/0.5ML.....	280	SINUVA IMP 1350MCG .....	244
SHUR-SEAL GEL 2% .....	281	<i>sirolimus oral soln 1 mg/ml .....</i>	234
SIDEROL TAB .....	237	<i>sirolimus tab 0.5 mg.....</i>	234
SIGNIFOR INJ 0.3MG/ML.....	188	<i>sirolimus tab 1 mg.....</i>	234
SIGNIFOR INJ 0.6MG/ML.....	188	<i>sirolimus tab 2 mg.....</i>	234
SIGNIFOR INJ 0.9MG/ML.....	188	SIRTURO TAB 100MG.....	100
SIGNIFOR LAR INJ 20MG.....	188	SIRTURO TAB 20MG .....	100



SITAVIG TAB 50MG .....	132	SOAANZ TAB 20MG .....	180
SIVEXTRO INJ 200MG.....	47	SOAANZ TAB 40MG .....	180
SIVEXTRO TAB 200MG.....	47	SOAANZ TAB 60MG .....	180
SKYCLARYS CAP 50MG.....	244	SOD ACETATE INJ 2MEQ/ML .....	227
SKYLA IUD 13.5MG.....	152	SOD BICARB INJ 8.4%.....	227
SKYRIZI INJ 150DOSE .....	163	SOD BICARB SOL D5W.....	227
SKYRIZI INJ 150MG/ML.....	163	SOD DIURIL INJ 500MG .....	181
SKYRIZI INJ 180/1.2 .....	194	SOD EDECRIN INJ 50MG .....	180
SKYRIZI INJ 360/2.4 .....	194	<i>sod ferric gluc cmlpx in sucrose iv soln</i>	
SKYRIZI PEN INJ 150MG/ML .....	163	12.5 mg/ml (fe eq) .....	207
SKYRIZI SOL 60MG/ML .....	194	<i>sodium acetate inj 2 meq/ml .....</i>	227
SKYTROFA INJ 11MG .....	184	<i>sodium acetate inj 4 meq/ml .....</i>	227
SKYTROFA INJ 13.3MG.....	184	<i>sodium benzoate &amp; sodium</i>	
SKYTROFA INJ 3.6MG .....	184	<i>phenylacetate iv soln 10-10% .....</i>	186
SKYTROFA INJ 3MG .....	184	<i>sodium bicarbonate iv soln 4.2% .....</i>	227
SKYTROFA INJ 4.3MG .....	184	<i>sodium bicarbonate iv soln 7.5% .....</i>	227
SKYTROFA INJ 5.2MG .....	184	<i>sodium bicarbonate iv soln 8.4% .....</i>	227
SKYTROFA INJ 6.3MG .....	184	<i>sodium chloride inj 2.5 meq/ml</i>	
SKYTROFA INJ 7.6MG .....	184	(14.6%).....	231
SKYTROFA INJ 9.1MG .....	184	<i>sodium chloride irrigation soln 0.9%</i>	
SLYND TAB 4MG.....	152	.....	197
SMARTEST MIS LANCETS .....	222	<i>sodium chloride iv soln 0.45% .....</i>	231
SMARTEST TES BLD GLUC .....	178	<i>sodium chloride iv soln 0.9% .....</i>	231
SMART SENSE MIS LANC 21G .....	222	<i>sodium chloride iv soln 3% .....</i>	231
SMART SENSE MIS LANC 26G .....	222	<i>sodium chloride iv soln 4 meq/ml</i>	
SMART SENSE MIS LANC 30G .....	222	(23.4%).....	231
SMART SENSE MIS LANC 33G .....	222	<i>sodium chloride iv soln 5% .....</i>	231
SMART SENSE TES TEST .....	178	<i>sodium chloride preservative free (pf)</i>	
<i>sm aspirin chw 81mg.....</i>	31	<i>inj 0.9%.....</i>	231
<i>sm aspirin tab 81mg ec.....</i>	31	<i>sodium chloride soln nebu 0.9%.....</i>	157
<i>sm child asa chw 81mg.....</i>	31	<i>sodium chloride soln nebu 10%.....</i>	157
<i>sm folic acd tab 400mcg.....</i>	204	<i>sodium chloride soln nebu 3%.....</i>	157
SM LANCETS MIS 33G.....	222	<i>sodium chloride soln nebu 7%.....</i>	157
<i>sm nicotine dis 14mg/24h .....</i>	266	<i>sodium citrate &amp; citric acid soln 500-</i>	
<i>sm nicotine dis 21mg/24h .....</i>	266	334 mg/5ml.....	196
<i>sm nicotine dis 7mg/24hr .....</i>	266	<i>sodium fluoride chew tab 0.25 mg f</i>	
<i>sm nicotine gum 2mg .....</i>	266	(i from 0.55 mg naf).....	229
<i>sm nicotine gum 2mg mint .....</i>	266	<i>sodium fluoride chew tab 0.5 mg f</i>	
<i>sm nicotine gum 4mg .....</i>	266	(i from 1.1 mg naf) .....	229
<i>sm nicotine gum 4mg mint .....</i>	266	<i>sodium fluoride chew tab 1 mg f (from</i>	
<i>sm nicotine loz 2mg chry.....</i>	266	2.2 mg naf) .....	229
<i>sm nicotine loz 2mg cinn .....</i>	266	<i>sodium fluoride soln 0.5 mg/ml f (from</i>	
<i>sm nicotine loz 2mg mint .....</i>	266	1.1 mg/ml naf).....	229
<i>sm nicotine loz 4mg.....</i>	266	<i>sodium fluoride tab 0.5 mg f (from 1.1</i>	
<i>sm nicotine loz 4mg cinn .....</i>	266	mg naf).....	229
<i>sm nicotine loz 4mg mint .....</i>	266	<i>sodium fluoride tab 1 mg f (from 2.2</i>	
SMOFLIPID EMU.....	246	mg naf).....	229

<i>sodium phenylbutyrate oral powder 3 gm/teaspoonful</i> .....	186	SOLUS V2 MIS LANC 28G .....	222
<i>sodium phenylbutyrate tab 500 mg</i> .....	186	SOLUS V2 MIS LANC 30G .....	222
<i>sodium phosphates inj 150 mm/50ml (phos) 200 meq/50ml (na)</i> .....	230	SOLUS V2 TES AUDIBLE.....	178
<i>sodium phosphates inj 15 mm/5ml (phos) 20 meq/5ml (na)</i> .....	230	SOMA TAB 250MG .....	242
<i>sodium phosphates inj 45 mm/15ml (phos) 60 meq/15ml (na)</i> .....	230	SOMA TAB 350MG .....	242
<i>sodium polystyrene sulfonate powder</i> .....	235	SOMATULINE INJ 120/.5ML .....	188
SODIUM POW BICARBON .....	43	SOMATULINE INJ 60/0.2ML .....	188
SODIUM SULFA LIQ 10% WASH .....	164	SOMATULINE INJ 90/0.3ML .....	188
<i>sodium tetradecyl sulfate inj 3%</i> ....	235	SOMAVERT INJ 10MG.....	183
<i>sodium thiosulfate iv soln 250 mg/ml (25%)</i> .....	82	SOMAVERT INJ 15MG.....	183
SOD NITRITE INJ 30MG/ML .....	81	SOMAVERT INJ 20MG.....	183
<i>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml</i> .....	211	SOMAVERT INJ 25MG.....	183
SOD THIOSULF INJ 25% .....	81	SOMAVERT INJ 30MG.....	183
SOFOS/VELPAT TAB 400-100 .....	131	SONAFINE EMU.....	174
SOF-SENSOR MIS.....	222	SOOLANTRA CRE 1% .....	172
SOFTCLIX MIS LANCETS.....	222	<i>sorafenib tosylate tab 200 mg (base equivalent)</i> .....	112
SOGROYA INJ 10MG/1.5 .....	184	SORBITOL-MAN SOL.....	197
SOGROYA INJ 15MG/1.5 .....	184	SORBITOL SOL 3% IRR.....	197
SOGROYA INJ 5MG/1.5 .....	184	SORILUX AER 0.005% .....	163
<i>solifenacin succinate tab 10 mg</i> .....	278	<i>sotalol hcl (afib/afl) tab 120 mg</i> ....	135
<i>solifenacin succinate tab 5 mg</i> .....	278	<i>sotalol hcl (afib/afl) tab 160 mg</i> ....	135
SOLIQUA INJ 100/33 .....	75	<i>sotalol hcl (afib/afl) tab 80 mg</i> .....	135
SOLIRIS INJ 10MG/ML .....	202	SOTALOL HCL INJ 150/10ML.....	135
SOLODYN TAB 105MG.....	269	<i>sotalol hcl tab 120 mg</i> .....	135
SOLODYN TAB 115MG.....	269	<i>sotalol hcl tab 160 mg</i> .....	135
SOLODYN TAB 55MG .....	269	<i>sotalol hcl tab 240 mg</i> .....	135
SOLODYN TAB 65MG .....	269	<i>sotalol hcl tab 80 mg</i> .....	135
SOLODYN TAB 80MG .....	269	<i>sotradecol inj 1%</i> .....	235
SOLOX GEL .....	174	<i>sotradecol inj 3%</i> .....	235
SOLTAMOX SOL 10MG/5ML.....	107	SOTYKTU TAB 6MG.....	163
SOLU-CORTEF INJ 1000MG.....	155	SOTYLIZE SOL 5MG/ML.....	136
SOLU-CORTEF INJ 100MG .....	155	SOVALDI PAK 150MG.....	131
SOLU-CORTEF INJ 250MG .....	155	SOVALDI PAK 200MG.....	131
SOLU-CORTEF INJ 500MG .....	155	SOVALDI TAB 200MG.....	131
SOLU-MEDROL INJ 1000MG.....	155	SOVALDI TAB 400MG.....	131
SOLU-MEDROL INJ 125MG.....	155	SPIKEVAX INJ COVID-19 .....	280
SOLU-MEDROL INJ 1GM .....	155	<i>spinosad susp 0.9%</i> .....	172
SOLU-MEDROL INJ 2GM .....	155	SPINRAZA INJ 12MG/5ML.....	245
SOLU-MEDROL INJ 40MG .....	155	SPIRIVA AER 1.25MCG.....	52
SOLU-MEDROL INJ 500MG.....	155	SPIRIVA CAP HANDIHLR .....	52
		SPIRIVA SPR 2.5MCG .....	52
		<i>spironolactone &amp; hydrochlorothiazide tab 25-25 mg</i> .....	179
		<i>spironolactone tab 100 mg</i> .....	180
		<i>spironolactone tab 25 mg</i> .....	180
		<i>spironolactone tab 50 mg</i> .....	180

SPORANOX CAP 100MG .....	85	<i>stop smoking loz 2mg mint</i> .....	266
SPORANOX CAP PULSEPAK .....	85	<i>stop smoking loz 4mg mint</i> .....	266
SPORANOX SOL 10MG/ML .....	85	STRATA GRT GEL .....	174
SPRAVATO SOL 56MG DOS.....	68	STRATA MARK GEL .....	171
SPRAVATO SOL 84MG DOS.....	68	STRATTERA CAP 100MG.....	16
<i>sprintec 28 tab 28 day</i> .....	150	STRATTERA CAP 10MG .....	16
SPRIX SPR 15.75MG.....	28	STRATTERA CAP 18MG .....	16
SPRYCEL TAB 100MG.....	112	STRATTERA CAP 25MG .....	16
SPRYCEL TAB 140MG.....	112	STRATTERA CAP 40MG .....	16
SPRYCEL TAB 20MG.....	112	STRATTERA CAP 60MG .....	16
SPRYCEL TAB 50MG.....	112	STRATTERA CAP 80MG .....	16
SPRYCEL TAB 70MG.....	112	STRENSIQ INJ 18/0.45.....	186
SPRYCEL TAB 80MG.....	112	STRENSIQ INJ 28/0.7ML .....	187
<i>sps sus 15gm/60</i> .....	235	STRENSIQ INJ 40MG/ML .....	187
<i>sronyx tab</i> .....	150	STRENSIQ INJ 80/0.8ML .....	187
<i>ssd cre 1%</i> .....	164	<i>streptomycin sulfate for inj 1 gm</i> .....	20
SSKI SOL 1GM/ML.....	157	STRIBILD TAB.....	129
STALEVO 100 TAB .....	119	STRIVERDI AER 2.5MCG .....	55
STALEVO 125 TAB .....	119	STROMECTOL TAB 3MG.....	43
STALEVO 150 TAB .....	119	STROVITE FOR TAB .....	237
STALEVO 200 TAB .....	119	STROVITE ONE TAB.....	237
STALEVO 50 TAB.....	119	SUBLOCADE INJ 100/0.5.....	41
STALEVO 75 TAB.....	119	SUBLOCADE INJ 300/1.5.....	41
STAMARIL INJ.....	280	SUBOXONE MIS 12-3MG .....	41
STANDARDIZED SOL MITE MIX .....	20	SUBOXONE MIS 2-0.5MG .....	41
STEGLATRO TAB 15MG .....	79	SUBOXONE MIS 4-1MG .....	41
STEGLATRO TAB 5MG.....	79	SUBOXONE MIS 8-2MG .....	41
STEGLUJAN TAB 15-100MG .....	75	SUBSYS SPR 100MCG .....	37
STEGLUJAN TAB 5-100MG.....	75	SUBSYS SPR 1200MCG .....	37
STELARA INJ 45MG/0.5 .....	164	SUBSYS SPR 1600MCG .....	37
STELARA INJ 5MG/ML .....	194	SUBSYS SPR 200MCG.....	37
STELARA INJ 90MG/ML .....	164	SUBSYS SPR 400MCG.....	37
STERILANCE MIS 1.8MM .....	222	SUBSYS SPR 600MCG.....	37
STERILANCE MIS TL 28G.....	222	SUBSYS SPR 800MCG.....	37
STERILANCE MIS TL 30G.....	222	<i>subvenite kit start 35</i> .....	64
STERILANCE MIS TL 32G.....	222	<i>subvenite kit start 49</i> .....	64
STERIL TALC SUS 5GM.....	267	<i>subvenite kit start 98</i> .....	64
STERITALC POW 2GM .....	267	<i>subvenite tab 100mg</i> .....	64
STERITALC POW 3GM .....	267	<i>subvenite tab 150mg</i> .....	64
STERITALC POW 4GM .....	267	<i>subvenite tab 200mg</i> .....	64
STIOLTO AER 2.5-2.5 .....	55	<i>subvenite tab 25mg</i> .....	64
STIVARGA TAB 40MG.....	112	<i>succinylcholine chloride inj 20 mg/ml</i> .....	244
<i>st joseph chw low 81mg</i> .....	31	SUCCINYLCHOL INJ 20MG/ML .....	244
<i>st joseph tab low 81mg</i> .....	31	SUCRAID SOL 8500/ML.....	179
<i>stop smoking gum 2mg mint</i> .....	266	SUCRALFATE SUS 1GM/10ML.....	276
<i>stop smoking gum 2mg orig</i> .....	266	<i>sucralfate susp 1 gm/10ml</i> .....	276
<i>stop smoking gum 4mg</i> .....	266		

<i>sucralfate tab 1 gm</i> .....	276	<i>sumatriptan succinate inj 6 mg/0.5ml</i> .....	226
<i>sufentanil citrate inj 100 mcg/2ml (50 mcg/ml)</i> .....	37	<i>sumatriptan succinate solution auto- injector 4 mg/0.5ml</i> .....	226
<i>sufentanil citrate inj 250 mcg/5ml (50 mcg/ml)</i> .....	37	<i>sumatriptan succinate solution auto- injector 6 mg/0.5ml</i> .....	227
<i>sufentanil citrate inj 50 mcg/ml</i> .....	37	<i>sumatriptan succinate solution cartridge 4 mg/0.5ml</i> .....	227
SUFENTANIL INJ 100/2ML .....	37	<i>sumatriptan succinate solution cartridge 6 mg/0.5ml</i> .....	227
SUFENTANIL INJ 250/5ML .....	37	<i>sumatriptan succinate tab 100 mg</i> ..	227
SUFENTANIL INJ 50MCG/ML .....	37	<i>sumatriptan succinate tab 25 mg</i> ....	227
SUFLAVE SOL .....	211	<i>sumatriptan succinate tab 50 mg</i> ....	227
SULAR TAB 17MG .....	138	<i>sunitinib malate cap 12.5 mg (base equivalent)</i> .....	112
SULAR TAB 34MG .....	138	<i>sunitinib malate cap 25 mg (base equivalent)</i> .....	112
SULAR TAB 8.5MG .....	138	<i>sunitinib malate cap 37.5 mg (base equivalent)</i> .....	112
<i>sulconazole nitrate cream 1%</i> .....	162	<i>sunitinib malate cap 50 mg (base equivalent)</i> .....	112
<i>sulconazole nitrate solution 1%</i> .....	162	SUNLENCA INJ .....	129
<i>sulfacetamide sodium lotion 10% (acne)</i> .....	159	SUNLENCA TAB 300MG .....	129
<i>sulfacetamide sodium ophth oint 10% .....</i>	249	SUNOSI TAB 150MG .....	16
<i>sulfacetamide sodium ophth soln 10% .....</i>	250	SUNOSI TAB 75MG .....	16
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i> .....	251	SUPARTZ FX INJ 25/2.5ML.....	243
<i>sulfacetamide sodium w/ sulfur cleansing pad 10-4%</i> .....	159	SUPER THIN MIS LANC 28G .....	222
<i>sulfamethoxazole-trimethoprim iv soln 400-80 mg/5ml</i> .....	44	SUPER THIN MIS LANCETS .....	222
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i> .....	44	SUPPRELIN LA KIT 50MG .....	184
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i> .....	44	SUPRANE INH .....	196
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i> .....	44	SUPRANE SOL.....	196
<i>sulfamez emu 10-1%</i> .....	159	SUPRAX CAP 400MG .....	146
SULFAMYLON CRE 85MG/GM.....	164	SUPRAX CHW 100MG .....	146
SULFAMYLON PAK 5%.....	165	SUPRAX CHW 200MG .....	146
<i>sulfasalazine tab 500 mg</i> .....	194	SUPRAX SUS 200/5ML .....	146
<i>sulfasalazine tab delayed release 500 mg</i> .....	194	SUPRAX SUS 500/5ML .....	146
<i>sulfatrim pd sus 200-40/5</i> .....	44	SUPREME TES .....	178
SULF LIME SOL .....	172	SUPREP BOWEL SOL PREP KIT .....	211
<i>sulindac tab 150 mg</i> .....	28	SURECHEK TES BLD GLUC .....	178
<i>sulindac tab 200 mg</i> .....	28	SURE COMFORT MIS LANCETS .....	222
<i>sumatriptan-naproxen sodium tab 85- 500 mg</i> .....	225	SURE EDGE TES .....	178
<i>sumatriptan nasal spray 20 mg/act</i> .....	226	SUREFLEX MIS LANCETS .....	222
<i>sumatriptan nasal spray 5 mg/act</i> ..	226	SURELITE MIS LANCETS.....	222
		SURE RESULT KIT O3D3 SYS .....	86
		SURE-TEST TES EASYPLUS .....	178
		SURVANTA INH .....	267
		SUSTIVA CAP 200MG .....	129

SUSTIVA CAP 50MG.....	129	SYNTHROID TAB 100MCG.....	272
SUSTOL INJ 10/0.4ML .....	82	SYNTHROID TAB 112MCG.....	272
SUSVIMO INJ 10/0.1ML.....	248	SYNTHROID TAB 125MCG.....	272
SUTAB TAB.....	211	SYNTHROID TAB 137MCG.....	272
SUTENT CAP 12.5MG .....	112	SYNTHROID TAB 150MCG.....	272
SUTENT CAP 25MG .....	112	SYNTHROID TAB 175MCG.....	272
SUTENT CAP 37.5MG .....	113	SYNTHROID TAB 200MCG.....	272
SUTENT CAP 50MG .....	113	SYNTHROID TAB 25MCG .....	272
SUVICORT EMU .....	171	SYNTHROID TAB 300MCG.....	273
<i>syeda tab 3-0.03mg</i> .....	150	SYNTHROID TAB 50MCG .....	272
SYFOVRE INJ 15/0.1ML .....	250	SYNTHROID TAB 75MCG .....	272
SYLVANT SOL 100MG.....	234	SYNTHROID TAB 88MCG .....	272
SYLVANT SOL 400MG.....	234	SYNVISC INJ 8MG/ML .....	243
<i>symax-sr tab 0.375mg</i> .....	275	SYNVISC ONE INJ 8MG/ML .....	243
SYMBICORT AER 160-4.5 .....	56	SYPRINE CAP 250MG .....	232
SYMBICORT AER 80-4.5.....	56	<b>T</b>	
SYMBYAX CAP 3-25MG.....	261	TABLOID TAB 40MG.....	103
SYMBYAX CAP 6-25MG.....	261	TABRECTA TAB 150MG.....	113
SYMDEKO TAB 100-150 .....	267	TABRECTA TAB 200MG.....	113
SYMDEKO TAB 50-75MG .....	267	TACHOSIL PAD 4.8X4.8.....	208
SYMFI LO TAB.....	129	TACHOSIL PAD 9.5X4.8.....	208
SYMFI TAB .....	129	TACLONEX OIN .....	168
SYMJEPI INJ 0.15MG.....	282	TACLONEX SUS.....	168
SYMJEPI INJ 0.3MG .....	282	<i>tacrolimus cap 0.5 mg</i> .....	234
SYMLINPEN 60 INJ 1000MCG .....	73	<i>tacrolimus cap 1 mg</i> .....	234
SYMLNPEN 120 INJ 1000MCG .....	73	<i>tacrolimus cap 5 mg</i> .....	234
SYMPROIC TAB 0.2MG .....	194	<i>tacrolimus oint 0.03%</i> .....	169
SYMTUZA TAB.....	129	<i>tacrolimus oint 0.1%</i> .....	169
SYNAGIS INJ 100MG/ML.....	256	<i>tadalafil tab 2.5 mg</i> .....	141
SYNAGIS INJ 50/0.5ML .....	256	<i>tadalafil tab 20 mg (pah)</i> .....	143
SYNAGIS INJ 50MG .....	256	<i>tadalafil tab 5 mg</i> .....	141
SYNALAR CRE 0.025% .....	168	TADLIQ SUS 20MG/5ML .....	143
SYNALAR OIN 0.025% .....	168	TAFINLAR CAP 50MG .....	113
SYNALAR SOL 0.01%.....	168	TAFINLAR CAP 75MG .....	113
SYNAREL SOL 2MG/ML.....	184	<i>tafluprost preservative free (pf) ophth</i> <i>soln 0.0015%</i> .....	253
SYNDROS SOL 5MG/ML.....	83	TAGRISSE TAB 40MG .....	106
SYNERA DIS 70-70MG .....	170	TAGRISSE TAB 80MG .....	106
SYNERDERM EMU .....	171	<i>take action tab 1.5mg</i> .....	152
SYNJARDY TAB .....	75	TAKHZYRO INJ 150MG/ML .....	203
SYNJARDY TAB 12.5-500.....	75	TAKHZYRO INJ 300/2ML.....	203
SYNJARDY TAB 5-1000MG.....	75	TALICIA CAP.....	277
SYNJARDY TAB 5-500MG.....	75	TALTZ INJ 80MG/ML .....	164
SYNJARDY XR TAB .....	75	TALVEY INJ 3/1.5ML .....	105
SYNJARDY XR TAB 10-1000.....	75	TALVEY INJ 40MG/ML.....	105
SYNJARDY XR TAB 25-1000.....	75	TALZENNA CAP 0.25MG.....	113
SYNJARDY XR TAB 5-1000MG .....	75	TALZENNA CAP 1MG .....	113
SYNRIBO INJ 3.5MG .....	114		

TAMIFLU CAP 30MG.....	132	<i>taztia xt cap 240mg/24</i> .....	139
TAMIFLU CAP 45MG.....	132	<i>taztia xt cap 300mg er</i> .....	139
TAMIFLU CAP 75MG.....	132	<i>taztia xt cap 360mg/24</i> .....	139
TAMIFLU SUS 6MG/ML .....	132	TAZVERIK TAB 200MG .....	113
<i>tamoxifen citrate tab 10 mg (base</i>		TDVAX INJ 2-2 LF.....	274
<i>equivalent)</i> .....	107	TECENTRIQ INJ 1200/20 .....	105
<i>tamoxifen citrate tab 20 mg (base</i>		TECENTRIQ INJ 840/14 .....	105
<i>equivalent)</i> .....	107	TECFIDERA CAP 120MG.....	263
<i>tamsulosin hcl cap 0.4 mg</i> .....	197	TECFIDERA CAP 240MG.....	263
TARCEVA TAB 100MG .....	106	TECFIDERA MIS STARTER.....	263
TARCEVA TAB 150MG .....	106	TECHLITE AST MIS LANCETS .....	223
TARCEVA TAB 25MG .....	106	TECHLITE MIS LANC 30G.....	223
<i>targadox tab 50mg</i> .....	269	TECHLITE MIS LANCETS .....	223
TARGRETIN CAP 75MG.....	114	TEFLARO INJ 400MG.....	146
TARGRETIN GEL 1% .....	162	TEFLARO INJ 600MG.....	146
<i>tarina 24 fe tab</i> .....	150	TEGADERM AG PAD 4.....	174
<i>tarina fe tab 1/20</i> .....	150	TEGRETOL SUS 100/5ML.....	64
<i>tarina fe tab 1/20 eq</i> .....	150	TEGRETOL TAB 200MG .....	64
TARON-C DHA CAP .....	240	TEGRETOL-XR TAB 100MG .....	64
TARON FORTE CAP .....	207	TEGRETOL-XR TAB 200MG .....	64
TARON-PREX CAP.....	240	TEGRETOL-XR TAB 400MG .....	64
TARPEYO CAP 4MG .....	155	TEGSEDI INJ 284/1.5.....	266
TASCENSO ODT TAB 0.25MG .....	263	TEKTURNA HCT TAB 150-12.5 .....	97
TASIGNA CAP 150MG.....	113	TEKTURNA HCT TAB 300-12.5 .....	97
TASIGNA CAP 200MG.....	113	TEKTURNA HCT TAB 300-25MG .....	97
TASIGNA CAP 50MG .....	113	TEKTURNA TAB 150MG .....	98
<i>tasimelteon capsule 20 mg</i> .....	211	TEKTURNA TAB 300MG .....	98
TASMAR TAB 100MG.....	117	TELCARE TES BLD GLUC.....	178
<i>tavaborole soln 5%</i> .....	162	<i>telmisartan-amlodipine tab 40-10 mg</i>	
TAVALISSE TAB 100MG .....	202	.....	97
TAVALISSE TAB 150MG.....	202	<i>telmisartan-amlodipine tab 40-5 mg</i> .97	
TAVNEOS CAP 10MG.....	202	<i>telmisartan-amlodipine tab 80-10 mg</i>	
<i>taysofy cap 1/20</i> .....	150	.....	97
TAYTULLA CAP 1MG/20MC .....	150	<i>telmisartan-amlodipine tab 80-5 mg</i> .97	
<i>tazarotene cream 0.1%</i> .....	164	<i>telmisartan-hydrochlorothiazide tab 40-</i>	
<i>tazarotene gel 0.05%</i> .....	164	<i>12.5 mg</i> .....	97
<i>tazarotene gel 0.1%</i> .....	164	<i>telmisartan-hydrochlorothiazide tab 80-</i>	
<i>tazicef inj 1gm</i> .....	146	<i>12.5 mg</i> .....	97
TAZICEF INJ 1GM/50ML .....	146	<i>telmisartan-hydrochlorothiazide tab 80-</i>	
<i>tazicef inj 2gm</i> .....	146	<i>25 mg</i> .....	97
<i>tazicef inj 6gm</i> .....	146	<i>telmisartan tab 20 mg</i> .....	92
TAZORAC CRE 0.05% .....	164	<i>telmisartan tab 40 mg</i> .....	92
TAZORAC CRE 0.1% .....	164	<i>telmisartan tab 80 mg</i> .....	92
TAZORAC GEL 0.05% .....	164	<i>temazepam cap 15 mg</i> .....	210
TAZORAC GEL 0.1% .....	164	<i>temazepam cap 22.5 mg</i> .....	210
<i>taztia xt cap 120mg/24</i> .....	138	<i>temazepam cap 30 mg</i> .....	210
<i>taztia xt cap 180mg/24</i> .....	139	<i>temazepam cap 7.5 mg</i> .....	210

TEMBEXA SUS 10MG/ML .....	133	<i>testosterone cypionate im inj in oil 200</i>	
TEMBEXA TAB 100MG .....	133	<i>mg/ml .....</i>	42
TEMODAR CAP 250MG .....	101	<i>testosterone enanthate im inj in oil 200</i>	
TEMODAR INJ 100MG .....	101	<i>mg/ml .....</i>	42
<i>temozolomide cap 100 mg .....</i>	101	TESTOSTERONE MIS 100MG .....	42
<i>temozolomide cap 140 mg .....</i>	101	TESTOSTERONE MIS 200MG .....	42
<i>temozolomide cap 180 mg .....</i>	101	TESTOSTERONE MIS 25MG .....	42
<i>temozolomide cap 20 mg .....</i>	101	TESTOSTERONE MIS 50MG .....	42
<i>temozolomide cap 250 mg .....</i>	101	<i>testosterone td gel 10mg/act (2%)...</i>	42
<i>temozolomide cap 5 mg .....</i>	101	<i>testosterone td gel 12.5 mg/act (1%)</i>	
<i>temsirolimus soln for iv infusion 25</i>		<i>.....</i>	42
<i>mg/ml.....</i>	113	<i>testosterone td gel 20.25 mg/1.25gm</i>	
<i>tencon tab 50-325mg .....</i>	30	<i>(1.62%).....</i>	42
TENIVAC INJ 5-2LF.....	274	<i>testosterone td gel 20.25 mg/act</i>	
<i>tenofovir disoproxil fumarate tab 300</i>		<i>(1.62%).....</i>	42
<i>mg .....</i>	129	<i>testosterone td gel 25 mg/2.5gm (1%)</i>	
TENORETIC TAB 100 .....	97	<i>.....</i>	42
TENORETIC TAB 50 .....	97	<i>testosterone td gel 40.5 mg/2.5gm</i>	
TENORMIN TAB 100MG .....	134	<i>(1.62%).....</i>	42
TENORMIN TAB 25MG .....	134	<i>testosterone td gel 50 mg/5gm (1%)</i>	42
TENORMIN TAB 50MG .....	134	<i>testosterone td soln 30 mg/act .....</i>	42
TEPADINA INJ 100MG .....	101	TET/DIP TOX INJ 2-2 LF .....	274
TEPADINA INJ 15MG .....	101	<i>tetrabenazine tab 12.5 mg .....</i>	261
TEPEZZA INJ 500MG .....	184	<i>tetrabenazine tab 25 mg .....</i>	261
TEPMETKO TAB 225MG .....	113	<i>tetracaine hcl ophth soln 0.5%.....</i>	250
<i>terazosin hcl cap 10 mg (base</i>		<i>tetracycline hcl cap 250 mg .....</i>	270
<i>equivalent).....</i>	93	<i>tetracycline hcl cap 500 mg .....</i>	270
<i>terazosin hcl cap 1 mg (base</i>		TETRIX CRE.....	171
<i>equivalent).....</i>	93	TEXACORT SOL 2.5%.....	168
<i>terazosin hcl cap 2 mg (base</i>		TEXAVITE LQ LIQ .....	238
<i>equivalent).....</i>	93	TEZSPIRE INJ 210MG .....	52
<i>terazosin hcl cap 5 mg (base</i>		TEZSPIRE SOL 210MG .....	52
<i>equivalent).....</i>	93	TGT LANCET MIS 26G .....	223
<i>terbinafine hcl tab 250 mg .....</i>	84	TGT LANCET MIS 30G .....	223
<i>terbutaline sulfate inj 1 mg/ml.....</i>	56	TGT LANCET MIS 33G .....	223
<i>terbutaline sulfate tab 2.5 mg.....</i>	56	THALITONE TAB 15MG .....	181
<i>terbutaline sulfate tab 5 mg .....</i>	56	THALOMID CAP 100MG .....	232
<i>terconazole vaginal cream 0.4%.....</i>	281	THALOMID CAP 150MG .....	232
<i>terconazole vaginal cream 0.8%.....</i>	281	THALOMID CAP 200MG .....	232
<i>terconazole vaginal suppos 80 mg ..</i>	281	THALOMID CAP 50MG .....	232
TERIPARATIDE INJ .....	182	THAM INJ 30MEQ .....	227
<i>terrell sol .....</i>	196	THEO-24 CAP 100MG CR.....	56
TESTIM GEL 1%(50MG) .....	42	THEO-24 CAP 200MG CR.....	56
TESTOPEL MIS PELLETS .....	42	THEO-24 CAP 300MG CR.....	56
<i>testosterone cypionate im inj in oil 100</i>		THEO-24 CAP 400MG ER.....	56
<i>mg/ml .....</i>	42	<i>theophylline elixir 80 mg/15ml.....</i>	56
		<i>theophylline soln 80 mg/15ml.....</i>	56

THEOPHYLLINE TAB 100MG ER .....	56	TIAZAC CAP 180MG/24 .....	139
THEOPHYLLINE TAB 200MG ER .....	56	TIAZAC CAP 240MG/24 .....	139
<i>theophylline tab er 12hr 300 mg</i> .....	56	TIAZAC CAP 300MG/24 .....	139
<i>theophylline tab er 12hr 450 mg</i> .....	56	TIAZAC CAP 360MG/24 .....	139
<i>theophylline tab er 24hr 400 mg</i> .....	56	TIAZAC CAP 420MG/24 .....	139
<i>theophylline tab er 24hr 600 mg</i> .....	56	TIBSOVO TAB 250MG .....	113
<i>thiamine hcl inj 100 mg/ml</i> .....	283	TICE BCG INJ.....	114
THIN LANCETS MIS 26G.....	223	TICOVAC INJ .....	280
THIN LANCETS MIS 30G.....	223	TIGAN INJ 100MG/ML .....	83
THINLETS GP MIS 26G.....	223	<i>tigecycline for iv soln 50 mg</i> .....	268
THIOLA EC TAB 100MG .....	197	TIGECYCLINE INJ 50MG .....	268
THIOLA EC TAB 300MG .....	197	TIKOSYN CAP 125MCG.....	52
THIOLA TAB 100MG.....	197	TIKOSYN CAP 250MCG.....	52
<i>thioridazine hcl tab 100 mg</i> .....	125	TIKOSYN CAP 500MCG.....	52
<i>thioridazine hcl tab 10 mg</i> .....	125	<i>tilia fe tab</i> .....	150
<i>thioridazine hcl tab 25 mg</i> .....	125	TIM/BRIM/DOR SOL.....	247
<i>thioridazine hcl tab 50 mg</i> .....	125	TIM/DORZ/LAT SOL .....	247
<i>thiotepa for inj 100 mg</i> .....	101	TIMOL/BRIM SOL DORZ/LAT .....	247
<i>thiotepa for inj 15 mg</i> .....	101	TIMOL/LATAN SOL.....	247
<i>thiothixene cap 10 mg</i> .....	126	<i>timolol maleate ophth gel forming soln</i>	
<i>thiothixene cap 1 mg</i> .....	126	0.25% .....	247
<i>thiothixene cap 2 mg</i> .....	126	<i>timolol maleate ophth gel forming soln</i>	
<i>thiothixene cap 5 mg</i> .....	126	0.5% .....	247
<i>thrive gum 2mg mint</i> .....	266	<i>timolol maleate ophth soln 0.25%</i> ..	247
THRIVITE 19 TAB .....	237	<i>timolol maleate ophth soln 0.5%</i> ....	247
THRIVITE RX TAB 29-1MG .....	240	<i>timolol maleate ophth soln 0.5%</i>	
THROMBIN-JMI KIT 20000UNT .....	208	(once-daily) .....	247
THROMBIN-JMI KIT 5000UNIT.....	208	<i>timolol maleate preservative free ophth</i>	
THROMBIN-JMI SOL 20000UNT .....	208	<i>soln 0.25%</i> .....	247
THROMBIN-JMI SOL 5000UNIT.....	208	<i>timolol maleate preservative free ophth</i>	
THROMBIN KIT 5000UNIT.....	208	<i>soln 0.5%</i> .....	247
THROMBOGEN KIT 10000UNT .....	208	<i>timolol maleate tab 10 mg</i> .....	136
THROMBOGEN SOL 10000UNT .....	208	<i>timolol maleate tab 20 mg</i> .....	136
THROMBOGEN SOL 1000UNIT .....	208	<i>timolol maleate tab 5 mg</i> .....	136
THYMOGLOBULN INJ 25MG.....	234	TIMOPTIC OCU SOL 0.25% OP .....	247
THYQUIDITY SOL 100MCG.....	273	TIMOPTIC SOL 0.25% OP .....	247
<i>tiadylt cap 120mg/24</i> .....	139	TIMOPTIC SOL 0.5% OP .....	247
<i>tiadylt cap 180mg/24</i> .....	139	TIMOPTIC-XE SOL 0.25% OP .....	248
<i>tiadylt cap 240mg/24</i> .....	139	TIMOPTIC-XE SOL 0.5% OP .....	247
<i>tiadylt cap 300mg/24</i> .....	139	<i>tinidazole tab 250 mg</i> .....	44
<i>tiadylt cap 360mg/24</i> .....	139	<i>tinidazole tab 500 mg</i> .....	44
<i>tiadylt cap 420mg/24</i> .....	139	<i>tiopronin tab 100 mg</i> .....	197
<i>tiagabine hcl tab 12 mg</i> .....	66	<i>tiotropium bromide monohydrate inhal</i>	
<i>tiagabine hcl tab 16 mg</i> .....	66	<i>cap 18 mcg (base equiv)</i> .....	52
<i>tiagabine hcl tab 2 mg</i> .....	66	TIROSINT CAP 100MCG.....	273
<i>tiagabine hcl tab 4 mg</i> .....	66	TIROSINT CAP 112MCG.....	273
TIAZAC CAP 120MG/24 .....	139	TIROSINT CAP 125MCG.....	273



TIROSINT CAP 137MCG.....	273	<i>tobramycin sulfate inj 10 mg/ml (base equivalent)</i> .....	20
TIROSINT CAP 13MCG .....	273	<i>tobramycin sulfate inj 2 gm/50ml (40 mg/ml) (base equiv)</i> .....	20
TIROSINT CAP 150MCG.....	273	<i>tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv)</i> .....	21
TIROSINT CAP 175MCG.....	273	TOBREX OIN 0.3% OP.....	250
TIROSINT CAP 200 .....	273	TODAY SPONGE MIS.....	281
TIROSINT CAP 25MCG .....	273	TOLAK CRE 4% .....	162
TIROSINT CAP 50MCG .....	273	<i>tolcapone tab 100 mg</i> .....	117
TIROSINT CAP 75MCG .....	273	<i>tolmetin sodium cap 400 mg</i> .....	28
TIROSINT CAP 88MCG .....	273	<i>tolterodine tartrate cap er 24hr 2 mg</i> .....	278
TISSEEL KIT 10ML.....	208	<i>tolterodine tartrate cap er 24hr 4 mg</i> .....	278
TISSEEL KIT 2ML .....	208	<i>tolterodine tartrate tab 1 mg</i> .....	278
TISSEEL KIT 4ML .....	208	<i>tolterodine tartrate tab 2 mg</i> .....	278
TISSEEL SOL 10ML.....	208	<i>tolvaptan tab 15 mg</i> .....	188
TISSEEL SOL 2ML.....	208	<i>tolvaptan tab 30 mg</i> .....	188
TISSEEL SOL 4ML.....	208	TOPAMAX SPR CAP 15MG.....	65
<i>tis-u-sol sol</i> .....	234	TOPAMAX SPR CAP 25MG.....	65
TIVDAK INJ 40MG .....	105	TOPAMAX TAB 100MG.....	65
TIVICAY PD TAB 5MG.....	129	TOPAMAX TAB 200MG.....	65
TIVICAY TAB 10MG.....	129	TOPAMAX TAB 25MG .....	65
TIVICAY TAB 25MG.....	129	TOPAMAX TAB 50MG .....	65
TIVICAY TAB 50MG.....	129	TOPCARE MIS LANC 33G .....	223
<i>tizanidine hcl cap 2 mg (base equivalent)</i> .....	242	TOPICORT CRE 0.05% .....	168
<i>tizanidine hcl cap 4 mg (base equivalent)</i> .....	242	TOPICORT CRE 0.25% .....	168
<i>tizanidine hcl cap 6 mg (base equivalent)</i> .....	242	TOPICORT GEL 0.05% .....	168
<i>tizanidine hcl tab 2 mg (base equivalent)</i> .....	242	TOPICORT OIN 0.05% .....	168
<i>tizanidine hcl tab 4 mg (base equivalent)</i> .....	242	TOPICORT OIN 0.25% .....	168
TLANDO CAP 112.5 MG.....	42	TOPICORT SPR 0.25% .....	168
TNKASE KIT 50MG.....	204	<i>topiramate cap er 24hr 100 mg</i> .....	65
TOBI NEB 300/5ML.....	20	<i>topiramate cap er 24hr 25 mg</i> .....	65
TOBI PODHALR CAP 28MG.....	20	<i>topiramate cap er 24hr 50 mg</i> .....	65
TOBRADEX OIN 0.3-0.1%.....	251	<i>topiramate cap er 24hr sprinkle 100 mg</i> .....	65
TOBRADEX ST SUS 0.3-0.05.....	251	<i>topiramate cap er 24hr sprinkle 150 mg</i> .....	65
TOBRADEX SUS 0.3-0.1% .....	251	<i>topiramate cap er 24hr sprinkle 200 mg</i> .....	65
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i> .....	251	<i>topiramate cap er 24hr sprinkle 25 mg</i> .....	65
<i>tobramycin nebu soln 300 mg/4ml</i> ...	20	.....	65
<i>tobramycin nebu soln 300 mg/5ml</i> ...	20	<i>topiramate cap er 24hr sprinkle 50 mg</i> .....	65
<i>tobramycin ophth soln 0.3%</i> .....	250	.....	65
<i>tobramycin sulfate for inj 1.2 gm</i> ....	20	<i>topiramate sprinkle cap 15 mg</i> .....	65
<i>tobramycin sulfate inj 1.2 gm/30ml (40 mg/ml) (base equiv)</i> .....	20	<i>topiramate sprinkle cap 25 mg</i> .....	65

<i>topiramate tab 100 mg</i> .....	65	<i>tramadol hcl oral soln 5 mg/ml</i> .....	38
<i>topiramate tab 200 mg</i> .....	65	<i>tramadol hcl tab 100 mg</i> .....	38
<i>topiramate tab 25 mg</i> .....	65	<i>tramadol hcl tab 50 mg</i> .....	38
<i>topiramate tab 50 mg</i> .....	65	<i>tramadol hcl tab er 24hr 100 mg</i> .....	38
<i>toposar inj 100/5ml</i> .....	116	<i>tramadol hcl tab er 24hr 200 mg</i> .....	38
<i>toposar inj 1gm/50ml</i> .....	116	<i>tramadol hcl tab er 24hr 300 mg</i> .....	38
<i>toposar inj 500/25ml</i> .....	116	<i>tramadol hcl tab er 24hr biphasic</i>	
<i>topotecan hcl for inj 4 mg (base equiv)</i>		<i>release 100 mg</i> .....	38
.....	116	<i>tramadol hcl tab er 24hr biphasic</i>	
<i>topotecan hcl inj 4 mg/4ml (base</i>		<i>release 200 mg</i> .....	38
<i>equiv) (for infusion)</i> .....	116	<i>tramadol hcl tab er 24hr biphasic</i>	
TOPOTECAN INJ 4MG/4ML .....	116	<i>release 300 mg</i> .....	38
TOPROL XL TAB 100MG .....	134	<i>trandolapril tab 1 mg</i> .....	91
TOPROL XL TAB 200MG .....	134	<i>trandolapril tab 2 mg</i> .....	91
TOPROL XL TAB 25MG .....	134	<i>trandolapril tab 4 mg</i> .....	91
TOPROL XL TAB 50MG .....	134	<i>trandolapril-verapamil hcl tab er 1-240</i>	
<i>toremifene citrate tab 60 mg (base</i>		<i>mg</i> .....	97
<i>equivalent)</i> .....	107	<i>trandolapril-verapamil hcl tab er 2-180</i>	
TORISEL INJ 25MG/ML .....	113	<i>mg</i> .....	97
<i>toremide tab 100 mg</i> .....	180	<i>trandolapril-verapamil hcl tab er 2-240</i>	
<i>toremide tab 10 mg</i> .....	180	<i>mg</i> .....	97
<i>toremide tab 20 mg</i> .....	180	<i>trandolapril-verapamil hcl tab er 4-240</i>	
<i>toremide tab 5 mg</i> .....	180	<i>mg</i> .....	97
TOSYMRA SOL 10MG .....	227	<i>tranexamic acid iv soln 1000 mg/10ml</i>	
TOTECT INJ 500MG .....	115	<i>(100 mg/ml)</i> .....	207
TOUJEO MAX INJ 300IU/ML .....	78	<i>tranexamic acid tab 650 mg</i> .....	207
TOUJEO SOLO INJ 300IU/ML .....	79	TRANSDERM-SC DIS 1.5MG .....	83
<i>tovet aer 0.05%</i> .....	168	TRANSDERM-SC DIS 1MG/3DAY .....	83
TOVIAZ TAB 4MG .....	278	TRANXENE T TAB 7.5MG .....	50
TOVIAZ TAB 8MG .....	278	<i>tranylcypromine sulfate tab 10 mg</i> ...	68
TPN ELECTROL INJ .....	228	TRAVASOL INJ 10% .....	247
TPOXX CAP 200MG .....	133	TRAVATAN Z DRO 0.004% .....	253
TPOXX INJ .....	133	TRAVEL LANCE MIS ADV 28G .....	223
TRACLEER TAB 125MG .....	143	<i>travoprost ophth soln 0.004%</i>	
TRACLEER TAB 32MG .....	143	<i>(benzalkonium free) (bak free)</i> ...	253
TRACLEER TAB 62.5MG .....	143	TRAZIMERA INJ 150MG .....	104
TRADJENTA TAB 5MG .....	76	TRAZIMERA INJ 420MG .....	104
<i>tramadol-acetaminophen tab 37.5-325</i>		<i>trazodone hcl tab 100 mg</i> .....	70
<i>mg</i> .....	40	<i>trazodone hcl tab 150 mg</i> .....	70
<i>tramadol hcl cap er 24hr biphasic</i>		<i>trazodone hcl tab 300 mg</i> .....	70
<i>release 100 mg</i> .....	37	<i>trazodone hcl tab 50 mg</i> .....	70
<i>tramadol hcl cap er 24hr biphasic</i>		TREANDA INJ 100MG .....	101
<i>release 150 mg</i> .....	38	TREANDA INJ 25MG .....	101
<i>tramadol hcl cap er 24hr biphasic</i>		TRECATOR TAB 250MG .....	100
<i>release 200 mg</i> .....	38	TRELEGY AER 100MCG .....	56
<i>tramadol hcl cap er 24hr biphasic</i>		TRELEGY AER 200MCG .....	56
<i>release 300 mg</i> .....	38	TRELSTAR MIX INJ 11.25MG .....	108

TRELSTAR MIX INJ 22.5MG.....	108	<i>triamcinolone acetonide lotion 0.1%</i>	
TRELSTAR MIX INJ 3.75MG.....	107	.....	168
TREMFYA INJ 100MG/ML .....	164	<i>triamcinolone acetonide oint 0.025%</i>	
<i>treprostinil inj soln 100 mg/20ml (5</i>		.....	168
<i>mg/ml) .....</i>	142	<i>triamcinolone acetonide oint 0.05%</i>	168
<i>treprostinil inj soln 200 mg/20ml (10</i>		<i>triamcinolone acetonide oint 0.1% ..</i>	168
<i>mg/ml) .....</i>	142	<i>triamcinolone acetonide oint 0.5% ..</i>	168
<i>treprostinil inj soln 20 mg/20ml (1</i>		TRIAMCINOLON INJ 40MG/ML .....	156
<i>mg/ml) .....</i>	142	TRIAMCINOLON INJ 80MG/2ML .....	156
<i>treprostinil inj soln 50 mg/20ml (2.5</i>		TRIAMCINOLON INJ 80MG/ML .....	156
<i>mg/ml) .....</i>	142	<i>triamterene &amp; hydrochlorothiazide cap</i>	
TRESIBA FLEX INJ 100UNIT.....	79	<i>37.5-25 mg .....</i>	179
TRESIBA FLEX INJ 200UNIT.....	79	<i>triamterene &amp; hydrochlorothiazide tab</i>	
TRESIBA INJ 100UNIT .....	79	<i>37.5-25 mg .....</i>	179
<i>tretinoin cap 10 mg .....</i>	114	<i>triamterene &amp; hydrochlorothiazide tab</i>	
<i>tretinoin cream 0.025% .....</i>	159	<i>75-50 mg .....</i>	179
<i>tretinoin cream 0.05% .....</i>	159	<i>triamterene cap 100 mg .....</i>	180
<i>tretinoin cream 0.1% .....</i>	159	<i>triamterene cap 50 mg .....</i>	180
<i>tretinoin gel 0.01% .....</i>	160	<i>trianex oin 0.05% .....</i>	168
<i>tretinoin gel 0.025% .....</i>	160	<i>triazolam tab 0.125 mg .....</i>	210
<i>tretinoin gel 0.05% .....</i>	160	<i>triazolam tab 0.25 mg .....</i>	210
<i>tretinoin microsphere gel 0.04% ....</i>	160	TRIBENZOR20- TAB 5-12.5MG .....	97
<i>tretinoin microsphere gel 0.1% .....</i>	160	TRIBENZOR40- TAB 10-12.5 .....	97
TRETTEN INJ .....	201	TRIBENZOR40- TAB 10-25MG .....	97
TREXALL TAB 10MG .....	103	TRIBENZOR40- TAB 5-12.5MG .....	97
TREXALL TAB 15MG .....	103	TRIBENZOR40- TAB 5-25MG .....	97
TREXALL TAB 5MG .....	103	TRICARE PRE CAP 27-1-500 .....	240
TREXALL TAB 7.5MG .....	103	TRICARE TAB PRENATAL .....	240
TREXIMET TAB 10-60MG .....	225	TRICITRASOL CON .....	59
TREXIMET TAB 85-500MG .....	225	<i>tricon cap .....</i>	207
<i>trezix cap .....</i>	40	TRICOR TAB 145MG .....	88
TRIAM-BUPIVA SUS 40-5MG .....	155	TRICOR TAB 48MG .....	88
TRIAMCIN ACE INJ 40MG/ML .....	155	<i>triderm cre 0.1% .....</i>	168
<i>triamcinolone acetonide aerosol soln</i>		<i>triderm cre 0.5% .....</i>	168
<i>0.147 mg/gm .....</i>	168	TRIDESILON CRE 0.05% .....	168
<i>triamcinolone acetonide cream 0.025%</i>		<i>trientine hcl cap 250 mg .....</i>	232
.....	168	TRIESENCE INJ 40MG/ML .....	251
<i>triamcinolone acetonide cream 0.1%</i>		<i>tri-estaryll tab .....</i>	150
.....	168	<i>tri femynor tab .....</i>	150
<i>triamcinolone acetonide cream 0.5%</i>		TRIFERIC INJ AVNU .....	207
.....	168	<i>trifluoperazine hcl tab 10 mg (base</i>	
<i>triamcinolone acetonide dental paste</i>		<i>equivalent) .....</i>	125
<i>0.1% .....</i>	236	<i>trifluoperazine hcl tab 1 mg (base</i>	
<i>triamcinolone acetonide inj susp 40</i>		<i>equivalent) .....</i>	125
<i>mg/ml .....</i>	156	<i>trifluoperazine hcl tab 2 mg (base</i>	
<i>triamcinolone acetonide lotion 0.025%</i>		<i>equivalent) .....</i>	125
.....	168		

<i>trifluoperazine hcl tab 5 mg (base equivalent)</i> .....	125	TRI-VI-FLORO SUS 0.25/ML.....	238
<i>trifluridine ophth soln 1%</i> .....	250	TRI-VI-FLORO SUS 0.5MG/ML.....	238
<i>trigels-f cap forte</i> .....	207	TRI-VI-FLOR SUS 0.25/ML.....	238
<i>trihexyphenidyl hcl oral soln 0.4 mg/ml</i> .....	117	TRI-VI-FLOR SUS 0.5MG/ML.....	238
<i>trihexyphenidyl hcl tab 2 mg</i> .....	117	<i>tri-vit/fluo dro 0.25mg</i> .....	238
<i>trihexyphenidyl hcl tab 5 mg</i> .....	117	<i>tri-vit/fluo dro 0.5mg</i> .....	238
TRIJARDY XR TAB .....	75	<i>trivora-28 tab</i> .....	151
TRIKAFTA PAK 59.5MG.....	267	<i>tri-vylibra tab</i> .....	151
TRIKAFTA PAK 75MG .....	267	<i>tri-vylibra tab lo</i> .....	151
TRIKAFTA TAB .....	267	TRIZIVIR TAB .....	129
<i>tri-legest tab fe</i> .....	150	TRODELVY SOL 180MG .....	116
TRILEPTAL SUS 300MG/5M.....	65	TROGARZO INJ 150MG/ML .....	129
TRILEPTAL TAB 150MG .....	65	TROKENDI XR CAP 100MG.....	65
TRILEPTAL TAB 300MG .....	65	TROKENDI XR CAP 200MG.....	65
TRILEPTAL TAB 600MG .....	65	TROKENDI XR CAP 25MG .....	65
<i>tri-linyah tab</i> .....	150	TROKENDI XR CAP 50MG .....	65
TRILIPIX CAP 135MG .....	88	TROPHAMINE INJ 10%.....	247
TRILIPIX CAP 45MG.....	88	<i>tropicamide ophth soln 0.5%</i> .....	248
<i>tri-lo-mili tab</i> .....	151	<i>tropicamide ophth soln 1%</i> .....	248
<i>tri-lo tab estaryll</i> .....	150	<i>trospium chloride cap er 24hr 60 mg</i> .....	278
<i>tri-lo- tab marzia</i> .....	150	<i>trospium chloride tab 20 mg</i> .....	278
<i>tri-lo- tab sprintec</i> .....	151	TRUDHESA AER 0.725MG .....	226
<i>trimethobenzamide hcl cap 300 mg</i> ..	83	TRUE METRIX TES GLUCOSE.....	178
<i>trimethoprim tab 100 mg</i> .....	44	TRUETEST TES.....	178
<i>tri-mili tab</i> .....	151	TRUETEST TES BLD GLUC.....	178
<i>trimipramine maleate cap 100 mg</i> ....	73	TRUETRACK TES .....	178
<i>trimipramine maleate cap 25 mg</i> .....	73	TRUETRACK TES BLD GLUC .....	178
<i>trimipramine maleate cap 50 mg</i> .....	73	TRULANCE TAB 3MG .....	192
TRIMOXI+ INJ .....	251	TRULICITY INJ 0.75/0.5 .....	77
TRINATAL RX TAB 1.....	240	TRULICITY INJ 1.5/0.5.....	77
<i>trinate tab</i> .....	240	TRULICITY INJ 3/0.5 .....	77
TRINTELLIX TAB 10MG .....	70	TRULICITY INJ 4.5/0.5.....	77
TRINTELLIX TAB 20MG .....	70	TRUMENBA INJ .....	279
TRINTELLIX TAB 5MG .....	70	TRUPLUS LANC MIS 26G .....	223
<i>tri-nymyo tab</i> .....	151	TRUPLUS LANC MIS 28G .....	223
TRIOSTAT INJ 10MCG/ML.....	273	TRUPLUS LANC MIS 30G .....	223
TRIPTODUR SUS 22.5MG.....	184	TRUPLUS LANC MIS 33G .....	223
TRISENOX INJ 12MG/6ML.....	114	TRUSOPT SOL 2% OP .....	253
TRISOD CITRA SOL 0.5%CRRT.....	232	TRUSTEX/RIA MIS LUBRICAT .....	216
<i>tri-sprintec tab</i> .....	151	TRUSTEX/RIA MIS NON-LUB .....	216
TRISTART DHA CAP .....	240	TRUSTEX/RIA MIS SPERMICI .....	216
TRISTART ONE CAP 35-1-215 .....	240	TRUSTEX LUBR MIS ASSORTED.....	216
TRI-TABS DHA MIS.....	240	TRUSTEX LUBR MIS BANANA .....	216
TRIUMEQ PD TAB .....	129	TRUSTEX LUBR MIS CHOC .....	216
TRIUMEQ TAB .....	129	TRUSTEX LUBR MIS COLA .....	216
		TRUSTEX LUBR MIS COLORS .....	216

TRUSTEX LUBR MIS EX LARGE .....	216	TYVASO START SOL 0.6MG/ML.....	142
TRUSTEX LUBR MIS EX STR.....	216	<b>U</b>	
TRUSTEX LUBR MIS GRAPE.....	216	UBRELVY TAB 100MG.....	225
TRUSTEX LUBR MIS MINT.....	216	UBRELVY TAB 50MG .....	225
TRUSTEX LUBR MIS RIB/STUD .....	216	UCERIS AER 2MG/ACT .....	42
TRUSTEX LUBR MIS SPERMICI .....	216	UCERIS TAB 9MG .....	156
TRUSTEX LUBR MIS STRWBRY .....	216	UDAMIN SP TAB .....	237
TRUSTEX LUBR MIS VANILLA .....	216	UDENYCA INJ 6MG/.6ML.....	206
TRUSTEX MIS BANANA.....	216	UKONIQ TAB 200MG.....	113
TRUSTEX MIS CHOCOLAT .....	216	ULORIC TAB 40MG .....	198
TRUSTEX MIS FLAVORS .....	216	ULORIC TAB 80MG .....	198
TRUSTEX MIS MINT .....	216	ULTANE SOL.....	196
TRUSTEX MIS STRWBRY.....	216	ULTILET MIS 26G .....	223
TRUSTEX MIS VANILLA .....	216	ULTILET MIS 28G .....	223
TRUSTX NON-9 MIS RIB/STUD.....	216	ULTILET MIS 30G .....	223
TRUVADA TAB 100-150 .....	129	ULTILET MIS 33G .....	223
TRUVADA TAB 133-200 .....	130	ULTILET MIS LANCETS .....	223
TRUVADA TAB 167-250 .....	130	ULTILET MIS SAFETY .....	223
TRUVADA TAB 200-300 .....	130	ULTIMA TES .....	178
TRUXIMA INJ 100/10ML .....	105	ULTIVA INJ 1MG .....	38
TRUXIMA INJ 500/50ML .....	105	ULTIVA INJ 2MG .....	38
<i>trymine cg liq 225-7.5</i> .....	156	ULTIVA INJ 5MG .....	38
TUDORZA PRES AER 400/ACT.....	53	ULTOMIRIS INJ 100MG/ML .....	202
TUKYSA TAB 150MG .....	104	ULTOMIRIS INJ 300/30ML .....	202
TUKYSA TAB 50MG .....	104	ULTRABAG/PD2 SOL DIANEAL.....	235
TURALIO CAP 200MG.....	113	ULTRABAG/ SOL DIANEAL .....	235
TURPENTINE SOL SPIRITS .....	169	ULTRACET TAB 37.5-325.....	40
TWINRIX INJ .....	280	ULTRA THIN MIS 28G .....	223
TWIRLA DIS 120-30 .....	151	ULTRA THIN MIS 30G .....	223
TWYNEO CRE 0.1-3% .....	160	ULTRA THIN MIS 31G .....	223
TYBLUME CHW 0.1-0.02 .....	151	ULTRA THIN MIS 33G .....	223
TYBOST TAB 150MG .....	130	ULTRA THIN MIS LANC 28G .....	223
<i>tydemy tab</i> .....	151	ULTRA THIN MIS LANC 30G .....	223
TYGACIL INJ 50MG .....	268	ULTRA THIN MIS LANCETS .....	223
TYKERB TAB 250MG .....	113	ULTRATRAK TES ULTIMATE.....	178
TYMLOS INJ.....	182	ULTRATRK PRO TES .....	178
TYPHIM VI INJ .....	279	ULTRAVATE LOT 0.05%.....	168
TYSABRI INJ 300/15ML .....	263	UNASYN INJ 1.5GM .....	258
TYVASO DPI POW 16-32-48.....	142	UNASYN INJ 15GM .....	258
TYVASO DPI POW 16-32MCG .....	142	UNASYN INJ 3GM .....	258
TYVASO DPI POW 16MCG .....	142	UNILET EXCEL MIS 23G .....	223
TYVASO DPI POW 32-48MCG .....	142	UNILET EX II MIS 28G .....	223
TYVASO DPI POW 32MCG .....	142	UNILET G.P. MIS 21G.....	223
TYVASO DPI POW 48MCG .....	142	UNILET G.P MIS SUPR 23G .....	223
TYVASO DPI POW 64MCG .....	142	UNILET GP 28 MIS ULT THIN .....	223
TYVASO REFIL SOL 0.6MG/ML.....	142	UNILET LANCE MIS 21G .....	223
TYVASO SOL 0.6MG/ML.....	142	UNILET LANCE MIS 28G .....	223

UNILET LANCE MIS 33G .....	223	UNITUXIN INJ .....	105
UNILET LANC MIS 33G .....	223	UNIVERSAL 1 MIS 33G .....	224
UNILET LANCT MIS 28G .....	223	UNIVERSAL 1 MIS LANC 26G .....	224
UNILET LANCT MIS 30G .....	223	UNIVERSAL 1 MIS LANC 30G .....	224
UNILET LANCT MIS 33G .....	223	UPLIZNA SOL 100MG .....	234
UNILET MIS 21G .....	223	UPNEEQ SOL 0.1% .....	253
UNILET SUPER MIS 23G .....	223	UPTRAVI INJ 1800MCG .....	143
UNILET SUPER MIS G.P. 23G .....	223	UPTRAVI PACK TAB 200/800 .....	143
UNISTIK 1 MIS 2.4MM .....	223	UPTRAVI TAB 1000MCG .....	143
UNISTIK 1 MIS 3.0MM .....	224	UPTRAVI TAB 1200MCG .....	143
UNISTIK 23G MIS NORMAL .....	224	UPTRAVI TAB 1400MCG .....	143
UNISTIK 2 MIS .....	224	UPTRAVI TAB 1600MCG .....	143
UNISTIK 2 MIS 1.8MM .....	224	UPTRAVI TAB 200MCG .....	143
UNISTIK 2 MIS 2.4MM .....	224	UPTRAVI TAB 400MCG .....	143
UNISTIK 2 MIS COMFORT .....	224	UPTRAVI TAB 600MCG .....	143
UNISTIK 2 MIS EXTRA .....	224	UPTRAVI TAB 800MCG .....	143
UNISTIK 2 MIS NEONATAL .....	224	<i>urea cre 41%</i> .....	169
UNISTIK 2 MIS NORMAL .....	224	<i>uredeb cre 39%</i> .....	169
UNISTIK 2 MIS SUPER .....	224	UROCIT-K 10 TAB .....	196
UNISTIK 3 MIS 1.8MM .....	224	UROCIT-K 15 TAB .....	196
UNISTIK 3 MIS COMFORT .....	224	UROCIT-K 5 TAB .....	196
UNISTIK 3 MIS EXTRA .....	224	<i>uro-sp cap 118mg</i> .....	44
UNISTIK 3 MIS GENT 30G .....	224	UROXATRAL TAB 10MG .....	197
UNISTIK 3 MIS NEONATAL .....	224	URSO 250 TAB 250MG .....	192
UNISTIK 3 MIS NORMAL .....	224	<i>ursodiol cap 300 mg</i> .....	192
UNISTIK CZT MIS COMFORT .....	224	<i>ursodiol tab 250 mg</i> .....	192
UNISTIK CZT MIS NORMAL .....	224	<i>ursodiol tab 500 mg</i> .....	192
UNISTIK II MIS LANCETS .....	224	URSO FORTE TAB 500MG .....	192
UNISTIK SAFE MIS LANC 28G .....	224	UTIBRON CAP NEOHALER .....	56
UNISTIK SAFE MIS LANC 30G .....	224	UVADEX SOL 20MCG/ML .....	114
UNISTIK TOUC MIS LANC 21G .....	224	UZEDY INJ 100MG .....	122
UNISTIK TOUC MIS LANC 23G .....	224	UZEDY INJ 125MG .....	122
UNISTIK TOUC MIS LANC 28G .....	224	UZEDY INJ 150MG .....	122
UNISTIK TOUC MIS LANC 30G .....	224	UZEDY INJ 200MG .....	122
UNISTRIP1 TES GENERIC .....	178	UZEDY INJ 250MG .....	122
<i>unithroid tab 100mcg</i> .....	273	UZEDY INJ 50MG .....	122
<i>unithroid tab 112mcg</i> .....	273	UZEDY INJ 75MG .....	122
<i>unithroid tab 125mcg</i> .....	273	<b>V</b>	
<i>unithroid tab 137mcg</i> .....	273	VABOMERE INJ 2GM(1-1) .....	44
<i>unithroid tab 150mcg</i> .....	273	VAGIFEM TAB 10MCG .....	281
<i>unithroid tab 175mcg</i> .....	273	<i>valacyclovir hcl tab 1 gm</i> .....	132
<i>unithroid tab 200mcg</i> .....	273	<i>valacyclovir hcl tab 500 mg</i> .....	132
<i>unithroid tab 25mcg</i> .....	273	VALCHLOR GEL 0.016% .....	162
<i>unithroid tab 300mcg</i> .....	273	VALCYTE SOL 50MG/ML .....	130
<i>unithroid tab 50mcg</i> .....	273	VALCYTE TAB 450MG .....	130
<i>unithroid tab 75mcg</i> .....	273	<i>valganciclovir hcl for soln 50 mg/ml</i> (base equiv) .....	130
<i>unithroid tab 88mcg</i> .....	273		

<i>valganciclovir hcl tab 450 mg (base equivalent)</i> .....	130	VANCOMYC/D5W INJ 750MG .....	45
VALIUM TAB 10MG .....	50	<i>vancomycin hcl cap 125 mg (base equivalent)</i> .....	45
VALIUM TAB 2MG .....	50	<i>vancomycin hcl cap 250 mg (base equivalent)</i> .....	45
VALIUM TAB 5MG .....	50	<i>vancomycin hcl for iv soln 1.25 gm (base equivalent)</i> .....	45
<i>valproate sodium inj 100 mg/ml</i> .....	67	<i>vancomycin hcl for iv soln 1.5 gm (base equivalent)</i> .....	45
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i> .....	67	<i>vancomycin hcl for iv soln 100 gm (base equivalent)</i> .....	45
<i>valproic acid cap 250 mg</i> .....	67	<i>vancomycin hcl for iv soln 10 gm (base equivalent)</i> .....	45
<i>valrubicin soln for intravesical instillation 40 mg/ml</i> .....	109	<i>vancomycin hcl for iv soln 1 gm (base equivalent)</i> .....	45
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i> .....	97	<i>vancomycin hcl for iv soln 500 mg (base equivalent)</i> .....	45
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i> .....	97	<i>vancomycin hcl for iv soln 5 gm (base equivalent)</i> .....	45
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i> .....	97	<i>vancomycin hcl for iv soln 750 mg (base equivalent)</i> .....	46
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i> .....	98	<i>vancomycin hcl for oral soln 50 mg/ml (base equivalent)</i> .....	46
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i> .....	97	VANCOMYCIN INJ 1.25GM .....	46
VALSARTAN SOL 20MG/5ML .....	92	VANCOMYCIN INJ 1.5/300 .....	46
<i>valsartan tab 160 mg</i> .....	92	VANCOMYCIN INJ 1.5GM .....	46
<i>valsartan tab 320 mg</i> .....	92	VANCOMYCIN INJ 1 GM .....	46
<i>valsartan tab 40 mg</i> .....	92	VANCOMYCIN INJ 1GM/200M .....	46
<i>valsartan tab 80 mg</i> .....	92	VANCOMYCIN INJ 500MG .....	46
VALSTAR SOL 40MG/ML .....	109	VANCOMYCIN INJ 750MG .....	46
VALTOCO SPR 10MG .....	60	VANCOMYCIN SOL 1.75GM .....	46
VALTOCO SPR 15MG .....	60	VANCOMYCIN SOL 2G/400ML .....	46
VALTOCO SPR 20MG .....	60	VANFLYTA TAB 17.7MG .....	113
VALTOCO SPR 5MG .....	60	VANFLYTA TAB 26.5MG .....	113
VALTRESX TAB 1GM .....	132	VANOS CRE 0.1% .....	168
VALTRESX TAB 500MG .....	132	VAPRISOL INJ 20/100ML .....	188
<i>vanatol lq sol</i> .....	30	VAQTA INJ 25/0.5ML .....	280
VANCOCIN CAP 125MG .....	45	VAQTA INJ 50UNT/ML .....	280
VANCOCIN CAP 250MG .....	45	<i>varenicline tartrate tab 0.5 mg (base equiv)</i> .....	266
VANCOMY/NAACL INJ 1/250ML .....	45	<i>varenicline tartrate tab 11 x 0.5 mg &amp; 42 x 1 mg start pack</i> .....	266
VANCOMY/NAACL INJ 1.25/250 .....	45	<i>varenicline tartrate tab 1 mg (base equiv)</i> .....	266
VANCOMY/NAACL INJ 1.5/250 .....	45	VARITHENA AER 10MG/ML .....	235
VANCOMY/NAACL INJ 1.5/500 .....	45	VARIVAX INJ .....	280
VANCOMY/NAACL INJ 1.75/250 .....	45	VARIZIG INJ 125/1.2 .....	256
VANCOMY/NAACL INJ 2/500ML .....	45		
VANCOMY/NAACL INJ 750/150 .....	45		
VANCOMYC/D5W INJ 1.25/250 .....	45		
VANCOMYC/D5W INJ 1.5/250 .....	45		
VANCOMYC/D5W INJ 1GM .....	45		
VANCOMYC/D5W INJ 500MG .....	45		

VARIZIG INJ 125UNIT .....	256	VENEXA FE TAB .....	237
VARUBI TAB 90MG .....	83	VENEXA TAB.....	237
VASCEPA CAP 0.5GM .....	87	<i>venlafaxine hcl cap er 24hr 150 mg</i>	
VASCEPA CAP 1GM.....	87	<i>(base equivalent) .....</i>	71
VASERETIC TAB 10-25MG .....	98	<i>venlafaxine hcl cap er 24hr 37.5 mg</i>	
VASHE CLEANS SOL .....	174	<i>(base equivalent) .....</i>	71
VASOPRE/NAACL INJ 100/100 .....	187	<i>venlafaxine hcl cap er 24hr 75 mg</i>	
VASOPRE/NAACL INJ 100/250 .....	187	<i>(base equivalent) .....</i>	71
<i>vasopressin iv soln 20 unit/ml (for iv</i>		<i>venlafaxine hcl tab 100 mg (base</i>	
<i>infusion).....</i>	187	<i>equivalent).....</i>	71
VASOSTRICT INJ 20UNT/ML.....	187	<i>venlafaxine hcl tab 25 mg (base</i>	
VASOSTRICT SOL.....	187	<i>equivalent).....</i>	71
VASOTEC TAB 10MG.....	91	<i>venlafaxine hcl tab 37.5 mg (base</i>	
VASOTEC TAB 2.5MG.....	91	<i>equivalent).....</i>	71
VASOTEC TAB 20MG.....	91	<i>venlafaxine hcl tab 50 mg (base</i>	
VASOTEC TAB 5MG .....	91	<i>equivalent).....</i>	71
VAXCHORA SUS .....	279	<i>venlafaxine hcl tab 75 mg (base</i>	
VAXELIS INJ .....	274	<i>equivalent).....</i>	71
VAXNEUVANCE INJ .....	279	<i>venlafaxine hcl tab er 24hr 225 mg</i>	
VAZCULEP INJ 10MG/ML .....	283	<i>(base equivalent) .....</i>	71
VCF VAGINAL AER CONTRACP.....	281	VENLAFAXINE TAB 112.5MG .....	71
VCF VAGINAL GEL CONTRACE .....	281	VENOFER INJ 20MG/ML.....	207
VCF VAGINAL MIS CONTRACP .....	281	VENTAVIS SOL 10MCG/ML.....	142
VECAMEYL TAB 2.5MG .....	98	VENTAVIS SOL 20MCG/ML.....	142
VECTIBIX INJ 100MG .....	106	VENTOLIN HFA AER.....	56
VECTIBIX INJ 400MG .....	106	VENTRIXYL FE TAB .....	237
VECTICAL OIN 3MCG/GM.....	164	VENTRIXYL TAB .....	237
<i>vecuronium bromide for inj 10 mg ..</i>	245	VEOZAH TAB 45MG .....	184
<i>vecuronium bromide for inj 20 mg ..</i>	245	VERAMYST SPR 27.5MCG .....	244
VEGZELMA SOL 100/4ML.....	104	<i>verapamil hcl cap er 24hr 100 mg ..</i>	139
VEGZELMA SOL 400/16ML .....	104	<i>verapamil hcl cap er 24hr 120 mg ..</i>	139
VEKLURY INJ 100MG.....	133	<i>verapamil hcl cap er 24hr 180 mg ..</i>	139
VELCADE INJ 3.5MG .....	113	<i>verapamil hcl cap er 24hr 200 mg ..</i>	139
VELETRI INJ 0.5MG .....	142	<i>verapamil hcl cap er 24hr 240 mg ..</i>	139
VELETRI INJ 1.5MG .....	142	<i>verapamil hcl cap er 24hr 300 mg ..</i>	139
<i>velivet pak .....</i>	151	<i>verapamil hcl cap er 24hr 360 mg ..</i>	139
VELPHORO CHW 500MG .....	195	<i>verapamil hcl iv soln 2.5 mg/ml .....</i>	139
VELTASSA POW 16.8GM.....	235	<i>verapamil hcl tab 120 mg .....</i>	139
VELTASSA POW 25.2GM.....	235	<i>verapamil hcl tab 40 mg.....</i>	139
VELTASSA POW 8.4GM.....	235	<i>verapamil hcl tab 80 mg.....</i>	139
VELTIN GEL.....	160	<i>verapamil hcl tab er 120 mg .....</i>	139
VEMLIDY TAB 25MG.....	131	<i>verapamil hcl tab er 180 mg .....</i>	139
VENCLEXTA TAB 100MG .....	106	<i>verapamil hcl tab er 240 mg .....</i>	139
VENCLEXTA TAB 10MG.....	106	VERDESO AER 0.05% .....	168
VENCLEXTA TAB 50MG.....	106	VEREGEN OIN 15% .....	160
VENCLEXTA TAB START PK .....	106	VERELAN CAP 120MG SR.....	139
VENELEX OIN .....	174	VERELAN CAP 180MG SR.....	139



VERELAN CAP 240MG SR.....	139	<i>vilazodone hcl tab 40 mg</i> .....	70
VERELAN CAP 360MG SR.....	139	VILTEPSO SOL .....	245
VERELAN PM CAP 100MG ER .....	139	VIMIZIM INJ 5MG/5ML .....	187
VERELAN PM CAP 200MG ER .....	139	VIMOVO TAB 375-20MG.....	28
VERELAN PM CAP 300MG ER .....	139	VIMOVO TAB 500-20MG.....	28
VERQUVO TAB 10MG .....	144	VIMPAT INJ 200MG/20.....	65
VERQUVO TAB 2.5MG .....	144	VIMPAT SOL 10MG/ML.....	65
VERQUVO TAB 5MG .....	144	VIMPAT TAB 100MG .....	65
VERSACLOZ SUS 50MG/ML.....	124	VIMPAT TAB 150MG .....	65
VERZENIO TAB 100MG.....	113	VIMPAT TAB 200MG .....	65
VERZENIO TAB 150MG.....	113	VIMPAT TAB 50MG .....	65
VERZENIO TAB 200MG.....	113	VINATE DHA CAP 27-1.13.....	240
VERZENIO TAB 50MG.....	113	VINATE II TAB .....	240
VESICARE LS SUS 5MG/5ML .....	278	VINATE M TAB .....	240
VESICARE TAB 10MG .....	278	VINATE ONE TAB.....	241
VESICARE TAB 5MG.....	278	<i>vinblastine sulfate inj 1 mg/ml</i> .....	116
<i>vestura tab 3-0.02mg</i> .....	151	<i>vincasar pfs inj 1mg/ml</i> .....	116
VFEND IV INJ 200MG.....	85	<i>vincristine sulfate iv soln 1 mg/ml</i> ..	116
VFEND SUS 40MG/ML.....	85	<i>vinorelbine tartrate inj 10 mg/ml (base</i>	
VFEND TAB 200MG.....	85	<i>equiv)</i> .....	116
VFEND TAB 50MG .....	85	<i>vinorelbine tartrate inj 50 mg/5ml (10</i>	
V-GO 20 KIT .....	224	<i>mg/ml) (base equiv)</i> .....	116
V-GO 30 KIT .....	224	VIOKACE TAB 10440.....	179
V-GO 40 KIT.....	224	VIOKACE TAB 20880.....	179
VIBATIV INJ 750MG .....	46	<i>viorele tab</i> .....	151
VIBERZI TAB 100MG.....	194	VIRACEPT TAB 250MG .....	130
VIBERZI TAB 75MG .....	194	VIRACEPT TAB 625MG .....	130
VIBRAMYCIN CAP 100MG .....	270	VIREAD POW 40MG/GM.....	130
VIBRAMYCIN SUS 25MG/5ML.....	270	VIREAD TAB 150MG.....	130
VIBRAMYCIN SYP 50MG/5ML.....	270	VIREAD TAB 200MG.....	130
VICTOZA INJ 18MG/3ML .....	77	VIREAD TAB 250MG.....	130
VIDAZA INJ 100MG .....	103	VIREAD TAB 300MG.....	130
VIEKIRA PAK TAB.....	131	VIRT-C DHA CAP .....	241
<i>vienva tab 0.1-20</i> .....	151	VIRT-NATE CAP DHA.....	241
<i>vigabatin powd pack 500 mg</i> .....	66	VIRT-PN DHA CAP .....	241
<i>vigabatin tab 500 mg</i> .....	66	VIRT-PN PLUS CAP .....	241
<i>vigadrone pow 500mg</i> .....	66	VISBIOME PAK.....	80
VIGAMOX DRO 0.5% .....	250	VISCO-3 INJ 25/2.5ML.....	243
VIIBRYD KIT STARTER.....	70	VISIONBLUE INJ 0.06% .....	252
VIIBRYD TAB 10MG .....	70	VISTARIL CAP 25MG.....	49
VIIBRYD TAB 20MG .....	70	VISTARIL CAP 50MG.....	49
VIIBRYD TAB 40MG .....	70	VISTOGARD PAK 10GM .....	82
VIJOICE TAB 125MG .....	235	VISUDYNE INJ 15MG .....	250
VIJOICE TAB 250MG .....	235	<i>vit a/c/d/fl dro 0.25mg</i> .....	238
VIJOICE TAB 50MG.....	235	VITAFOL CAP ULTRA .....	241
<i>vilazodone hcl tab 10 mg</i> .....	70	VITAFOL CHW GUMMIES .....	241
<i>vilazodone hcl tab 20 mg</i> .....	70	VITAFOL FE+ CAP.....	241

VITAFOL-NANO TAB.....	241	VOSEVI TAB .....	132
VITAFOL-OB PAK +DHA .....	241	VOTRIENT TAB 200MG .....	113
VITAFOL-OB TAB 65-1MG .....	241	VOWST CAP.....	194
VITAFOL-ONE CAP .....	241	VOXZOGO INJ 0.4MG .....	187
VITAMEDMD CAP ONE RX .....	241	VOXZOGO INJ 0.56MG .....	187
VITAPEARL CAP.....	241	VOXZOGO INJ 1.2MG .....	187
VITAROCA PLU TAB .....	237	VP-HEME OB MIS + DHA .....	241
VITATRUE MIS .....	241	VP-PNV-DHA CAP .....	241
VITRAKVI CAP 100MG .....	113	VPRIV INJ 400UNIT .....	204
VITRAKVI CAP 25MG.....	113	VRAYLAR CAP 1.5-3MG .....	120
VITRAKVI SOL 20MG/ML .....	113	VRAYLAR CAP 1.5MG .....	120
VITRAMYN TAB .....	237	VRAYLAR CAP 3MG .....	120
VITRANOL FE TAB .....	237	VRAYLAR CAP 4.5MG .....	121
VITRANOL TAB.....	237	VRAYLAR CAP 6MG .....	121
VITREXYL TAB .....	237	VSL#3 DS PAK 900BIL.....	80
VITREXYL TAB IRON .....	237	VTAMA CRE 1%.....	164
VIVA DHA CAP .....	241	<i>vtol lq sol</i> .....	30
VIVELLE-DOT DIS 0.025MG .....	191	VUMERITY CAP 231MG .....	263
VIVELLE-DOT DIS 0.0375MG .....	191	VUSION OIN.....	162
VIVELLE-DOT DIS 0.05MG .....	191	VYEPTI INJ 100MG/ML .....	225
VIVELLE-DOT DIS 0.075MG .....	191	<i>vyfemla tab 0.4-35</i> .....	151
VIVELLE-DOT DIS 0.1MG.....	191	<i>vylibra tab 0.25-35</i> .....	151
VIVITROL INJ 380MG.....	82	VYNDAMAX CAP 61MG .....	143
VIVJOA CAP 150MG.....	85	VYNDAQEL CAP 20MG .....	144
VIVLODEX CAP 10MG .....	28	VYONDYS 53 INJ 100/2ML .....	245
VIVLODEX CAP 5MG .....	28	VYTORIN TAB 10-10MG .....	86
VIVOTIF CAP EC.....	279	VYTORIN TAB 10-20MG .....	86
VIZIMPRO TAB 15MG .....	106	VYTORIN TAB 10-40MG .....	86
VIZIMPRO TAB 30MG .....	106	VYTORIN TAB 10-80MG .....	86
VIZIMPRO TAB 45MG .....	106	VYVANSE CAP 10MG .....	14
VOCAL POINT TES BLD GLUC .....	178	VYVANSE CAP 20MG .....	14
VOGELXO GEL 1%(50MG) .....	42	VYVANSE CAP 30MG .....	14
VOGELXO GEL PUMP 1% .....	42	VYVANSE CAP 40MG .....	14
<i>volnea tab</i> .....	151	VYVANSE CAP 50MG .....	14
VOL-PLUS TAB .....	241	VYVANSE CAP 60MG .....	14
VOL-TAB RX TAB.....	241	VYVANSE CAP 70MG .....	14
VOLTAREN GEL 1% ARTHR .....	160	VYVANSE CHW 10MG.....	14
VONJO CAP 100MG.....	113	VYVANSE CHW 20MG.....	14
VONVENDI INJ 1300UNIT .....	201	VYVANSE CHW 30MG.....	14
VONVENDI INJ 650UNIT.....	201	VYVANSE CHW 40MG.....	14
VOQUEZNA PAK DUAL PAK .....	278	VYVANSE CHW 50MG.....	14
VOQUEZNA PAK TRIP PK .....	278	VYVANSE CHW 60MG.....	14
VORAXAZE INJ 1000UNIT .....	115	VYVGART INJ 400/20ML .....	232
<i>voriconazole for inj 200 mg</i> .....	85	VYXEOS INJ 44-100MG .....	109
<i>voriconazole for susp 40 mg/ml</i> .....	85	VYZULTA SOL 0.024% .....	253
<i>voriconazole tab 200 mg</i> .....	85	<b>W</b>	
<i>voriconazole tab 50 mg</i> .....	85	WAKIX TAB 17.8MG .....	16

WAKIX TAB 4.45MG .....	16	<i>wixela inhub aer 100/50</i> .....	56
<i>warfarin sodium tab 10 mg</i> .....	57	<i>wixela inhub aer 250/50</i> .....	56
<i>warfarin sodium tab 1 mg</i> .....	57	<i>wixela inhub aer 500/50</i> .....	56
<i>warfarin sodium tab 2.5 mg</i> .....	57	WP THYROID TAB 113.75MG.....	273
<i>warfarin sodium tab 2 mg</i> .....	57	WP THYROID TAB 130MG .....	273
<i>warfarin sodium tab 3 mg</i> .....	57	WP THYROID TAB 16.25MG .....	273
<i>warfarin sodium tab 4 mg</i> .....	57	WP THYROID TAB 32.5MG .....	273
<i>warfarin sodium tab 5 mg</i> .....	57	WP THYROID TAB 48.75MG .....	273
<i>warfarin sodium tab 6 mg</i> .....	57	WP THYROID TAB 65MG.....	273
<i>warfarin sodium tab 7.5 mg</i> .....	57	WP THYROID TAB 81.25MG .....	273
<i>water for irrigation, sterile irrigation</i>		WP THYROID TAB 97.5MG .....	273
<i>soln</i> .....	234	<i>wymzya fe chw 0.4mg-35</i> .....	151
WAVESENSE TES PRESTO.....	178	<b>X</b>	
WEGOVY INJ 0.25MG.....	15	XACIATO GEL 2%.....	281
WEGOVY INJ 0.5MG .....	15	XADAGO TAB 100MG .....	120
WEGOVY INJ 1.7MG .....	15	XADAGO TAB 50MG .....	120
WEGOVY INJ 1MG .....	15	XALATAN SOL 0.005% .....	253
WEGOVY INJ 2.4MG .....	15	XALKORI CAP 200MG .....	113
WELCHOL PAK 3.75GM .....	87	XALKORI CAP 250MG .....	113
WELCHOL TAB 625MG .....	87	XANAX TAB 0.25MG .....	50
WELLBUTRIN TAB 100MG SR .....	68	XANAX TAB 0.5MG .....	50
WELLBUTRIN TAB 150MG SR .....	68	XANAX TAB 1MG .....	50
WELLBUTRIN TAB 200MG SR .....	68	XANAX TAB 2MG .....	50
WELLBUTRIN TAB XL 150MG .....	68	XANAX XR TAB 0.5MG .....	50
WELLBUTRIN TAB XL 300MG .....	68	XANAX XR TAB 1MG .....	50
<i>wera tab 0.5/35</i> .....	151	XANAX XR TAB 2MG .....	50
WESTHROID TAB 130MG.....	273	XANAX XR TAB 3MG .....	50
WESTHROID TAB 195MG.....	273	XARELTO STAR TAB 15/20MG.....	57
WESTHROID TAB 32.5MG.....	273	XARELTO SUS 1MG/ML .....	57
WESTHROID TAB 65MG.....	273	XARELTO TAB 10MG .....	57
WESTHROID TAB 97.5MG.....	273	XARELTO TAB 15MG .....	57
WHEAT GERM OIL .....	283	XARELTO TAB 2.5MG .....	57
WIDE-SEAL DPR KIT 60.....	216	XARELTO TAB 20MG .....	57
WIDE-SEAL DPR KIT 65.....	216	XATMEP SOL 2.5MG/ML.....	103
WIDE-SEAL DPR KIT 70.....	216	XCOPRI PAK 100-150 .....	66
WIDE-SEAL DPR KIT 75.....	216	XCOPRI PAK 12.5-25 .....	66
WIDE-SEAL DPR KIT 80.....	216	XCOPRI PAK 150-200 .....	66
WIDE-SEAL DPR KIT 85.....	216	XCOPRI PAK 50-100MG.....	66
WIDE-SEAL DPR KIT 90.....	216	XCOPRI TAB 100MG .....	66
WIDE-SEAL DPR KIT 95.....	216	XCOPRI TAB 150MG .....	66
WILATE INJ .....	201	XCOPRI TAB 200MG .....	66
WILZIN CAP 25MG.....	231	XCOPRI TAB 50MG .....	66
WINLEVI CRE 1% .....	160	XDEMVI DRO 0.25% .....	250
WINRHO SDF INJ 15000UNT .....	256	XELJANZ SOL 1MG/ML .....	24
WINRHO SDF INJ 1500UNIT .....	256	XELJANZ TAB 10MG.....	24
WINRHO SDF INJ 2500UNIT .....	256	XELJANZ TAB 5MG .....	24
WINRHO SDF INJ 5000UNIT .....	256	XELJANZ XR TAB 11MG.....	24

XELJANZ XR TAB 22MG.....	24	XIMINO CAP 45MG ER.....	270
XELODA TAB 150MG.....	103	XIMINO CAP 90MG ER.....	270
XELODA TAB 500MG.....	103	XIPERE SUS 40MG/ML.....	251
XELSTRYM PAD 13.5/9HR.....	14	XOFIGO INJ 1100KBQ.....	114
XELSTRYM PAD 18MG/9HR.....	14	XOFLUZA TAB 20MG.....	132
XELSTRYM PAD 9MG/9HR.....	14	XOFLUZA TAB 40MG.....	132
XENAZINE TAB 12.5MG.....	261	XOLAIR INJ 150MG/ML.....	52
XENAZINE TAB 25MG.....	261	XOLAIR INJ 75/0.5.....	52
XENICAL CAP 120MG.....	15	XOLAIR SOL 150MG.....	52
XENLETA INJ 150/15ML.....	47	XOLEGEL GEL 2%.....	162
XENLETA TAB 600MG.....	47	XOPENEX CONC NEB 1.25/0.5.....	56
XENPOZYME INJ 4MG.....	187	XOPENEX HFA AER.....	56
XENPOZYME SOL 20MG.....	187	XOPENEX NEB 0.31MG.....	56
XEOMIN INJ 100UNIT.....	245	XOPENEX NEB 0.63MG.....	56
XEOMIN INJ 200UNIT.....	245	XOPENEX NEB 1.25/3ML.....	56
XEOMIN INJ 50 UNIT.....	245	XOSPATA TAB 40MG.....	113
XEPI CRE 1%.....	161	XPOVIO PAK 40MG.....	108
XERAC-AC SOL 6.25%.....	171	XPOVIO PAK 50MG.....	108
XERALUX CRE.....	171	XPOVIO PAK 60MG.....	108
XERAVA INJ 100MG.....	268	XPOVIO PAK 80MG.....	108
XERAVA INJ 50MG.....	268	XPRESS TES BLD GLUC.....	178
XERESE CRE 5-1%.....	164	XTAMPZA ER CAP 13.5MG.....	38
XERMELO TAB 250MG.....	195	XTAMPZA ER CAP 18MG.....	38
XEROFORM OCL PAD 1X8.....	174	XTAMPZA ER CAP 27MG.....	38
XEROFORM OIL MIS 1.....	174	XTAMPZA ER CAP 36MG.....	38
XEROFORM OIL MIS ROLL 4X9.....	174	XTAMPZA ER CAP 9MG.....	38
XEROFORM OIL PAD 2.....	174	XTANDI CAP 40MG.....	108
XEROFORM PET PAD 4X4 DRES.....	174	XTANDI TAB 40MG.....	108
XEROFORM PET PAD 5X9 DRES.....	174	XTANDI TAB 80MG.....	108
XEROFRM GAUZ MIS 1.....	174	<i>xulane dis 150-35</i> .....	151
XEROFRM GAUZ MIS 5.....	174	XULTOPHY INJ 100/3.6.....	75
XEROFRM GAUZ PAD 5.....	174	XURIDEN POW 2GM.....	187
XEROFRM PETR PAD 2.....	174	XYLO/EPI 1%- INJ 1:100000.....	212
XEROFRM PETR PAD 4.....	174	XYLO/EPI INJ 0.5%.....	212
XEROFRM ROLL MIS 4.....	174	XYLO/EPI INJ 2%.....	212
XGEVA INJ.....	182	XYLOCAINE INJ 0.5%.....	213
XHANCE MIS 93MCG.....	244	XYLOCAINE INJ 1%.....	213
XIAFLEX INJ 0.9MG.....	232	XYLOCAINE INJ 2%.....	213
XIFAXAN TAB 200MG.....	44	XYLOCAINE INJ MPF 0.5%.....	213
XIFAXAN TAB 550MG.....	44	XYLOCAINE INJ MPF 1.5%.....	213
XIGDUO XR TAB 10-1000.....	75	XYLOCAINE INJ -MPF 1%.....	213
XIGDUO XR TAB 10-500MG.....	75	XYLOCAINE INJ -MPF 2%.....	213
XIGDUO XR TAB 2.5-1000.....	75	XYLO-MPF/EPI INJ 1.5%.....	212
XIGDUO XR TAB 5-1000MG.....	75	XYLO-MPF/EPI INJ 1%.....	212
XIGDUO XR TAB 5-500MG.....	75	XYLO-MPF/EPI INJ 2%.....	212
XIIDRA DRO 5%.....	250	XYNTHA INJ 1000UNIT.....	202
XIMINO CAP 135MG ER.....	270	XYNTHA INJ 2000UNIT.....	202

XYNTHA INJ 250UNIT.....	201	ZATEAN-PN CAP DHA.....	241
XYNTHA INJ 500UNIT.....	202	ZATEAN-PN CAP PLUS.....	241
XYNTHA SOLOF INJ 1000UNIT.....	202	ZAVESCA CAP 100MG.....	204
XYNTHA SOLOF INJ 2000UNIT.....	202	<i>zebital cap</i> .....	30
XYNTHA SOLOF INJ 3000UNIT.....	202	ZEGALOGUE INJ 0.6/0.6.....	76
XYNTHA SOLOF INJ 500UNIT.....	202	ZEGERID CAP 20-1100.....	278
XYNTHA SOLOF KIT 250UNIT.....	202	ZEGERID CAP 40-1100.....	278
XYOSTED INJ 100/0.5.....	42	ZEGERID POW 20-1680.....	278
XYOSTED INJ 50/0.5.....	42	ZEGERID POW 40-1680.....	278
XYOSTED INJ 75/0.5.....	42	ZEJULA CAP 100MG.....	113
XYREM SOL 500MG/ML.....	259	ZEJULA TAB 100MG.....	113
XYWAV SOL 0.5GM/ML.....	259	ZEJULA TAB 200MG.....	113
<b>Y</b>		ZEJULA TAB 300MG.....	113
YASMIN 28 TAB 3-0.03MG.....	151	ZELAC CAP.....	80
YAZ TAB 3-0.02MG.....	151	ZELAPAR TAB 1.25MG.....	120
YCANTH SOL 0.7%.....	169	ZELBORAF TAB 240MG.....	113
YERVOY INJ 200MG.....	105	ZELNORM TAB 6MG.....	194
YERVOY INJ 50MG.....	105	ZEMAIRA INJ 1000MG.....	267
YESCARTA INJ.....	106	ZEMBRACE SYM INJ 3/0.5ML.....	227
YF-VAX INJ.....	280	ZEMDRI INJ 500MG/10.....	21
<i>yl folic aci tab 400mcg</i> .....	205	ZEMPLAR CAP 1MCG.....	187
YONDELIS INJ 1MG.....	101	ZEMPLAR CAP 2MCG.....	187
YONSA TAB 125MG.....	108	ZEMPLAR INJ 2MCG/ML.....	187
YOSPRALA TAB 325-40MG.....	203	ZEMPLAR INJ 5MCG/ML.....	187
YOSPRALA TAB 81-40MG.....	203	<i>zenatane cap 10mg</i> .....	160
YUFLYMA 2SYR KIT 40/0.4ML.....	23	<i>zenatane cap 20mg</i> .....	160
YUPELRI SOL.....	53	<i>zenatane cap 30mg</i> .....	160
YUSIMRY INJ 40/0.8ML.....	23	<i>zenatane cap 40mg</i> .....	160
<i>yuvaferm tab 10mcg</i> .....	281	ZENPEP CAP 10000UNT.....	179
<b>Z</b>		ZENPEP CAP 15000UNT.....	179
ZACLIR LOT 8%.....	160	ZENPEP CAP 20000UNT.....	179
<i>zafemy dis 150/35</i> .....	151	ZENPEP CAP 25000UNT.....	179
<i>zafirlukast tab 10 mg</i> .....	53	ZENPEP CAP 3000UNIT.....	179
<i>zafirlukast tab 20 mg</i> .....	53	ZENPEP CAP 40000UNT.....	179
<i>zaleplon cap 10 mg</i> .....	210	ZENPEP CAP 5000UNIT.....	179
<i>zaleplon cap 5 mg</i> .....	210	<i>zenzedi tab 10mg</i> .....	14
ZALTRAP INJ 100/4ML.....	104	<i>zenzedi tab 15mg</i> .....	14
ZALTRAP INJ 200/8ML.....	104	<i>zenzedi tab 2.5mg</i> .....	14
ZANAFLEX CAP 2MG.....	242	<i>zenzedi tab 20mg</i> .....	14
ZANAFLEX CAP 4MG.....	242	<i>zenzedi tab 30mg</i> .....	14
ZANAFLEX CAP 6MG.....	242	<i>zenzedi tab 5mg</i> .....	14
ZANAFLEX TAB 4MG.....	242	<i>zenzedi tab 7.5mg</i> .....	14
ZANOSAR INJ 1GM.....	101	ZEPATIER TAB 50-100MG.....	132
ZARONTIN CAP 250MG.....	67	ZEPOSIA 7DAY CAP STR PACK.....	263
ZARONTIN SOL 250/5ML.....	67	ZEPOSIA CAP .92MG.....	263
ZARXIO INJ 300/0.5.....	206	ZEPOSIA CAP STR KIT.....	263
ZARXIO INJ 480/0.8.....	206	ZERBAXA INJ 1.5GM.....	144

ZERVIATE DRO 0.24% .....	253	ZITHROMAX TAB 250MG .....	214
ZESTORETIC TAB 10-12.5 .....	98	ZITHROMAX TAB 500MG .....	214
ZESTORETIC TAB 20-12.5 .....	98	ZITHROMAX TAB TRI-PAK.....	214
ZESTORETIC TAB 20-25MG .....	98	ZITHROMAX TAB Z-PAK .....	214
ZESTRIL TAB 10MG .....	91	ZOCOR TAB 10MG.....	89
ZESTRIL TAB 2.5MG .....	91	ZOCOR TAB 20MG.....	89
ZESTRIL TAB 20MG .....	91	ZOCOR TAB 40MG.....	89
ZESTRIL TAB 30MG .....	91	ZOHYDRO ER CAP 10MG .....	38
ZESTRIL TAB 40MG .....	91	ZOHYDRO ER CAP 15MG .....	38
ZESTRIL TAB 5MG.....	91	ZOHYDRO ER CAP 20MG .....	38
ZETIA TAB 10MG .....	89	ZOHYDRO ER CAP 30MG .....	38
ZETONNA AER 37MCG.....	244	ZOHYDRO ER CAP 40MG .....	38
ZEVALIN KIT Y-90 .....	105	ZOHYDRO ER CAP 50MG .....	38
ZIAGEN SOL 20MG/ML.....	130	ZOKINVY CAP 50MG .....	235
ZIAGEN TAB 300MG .....	130	ZOKINVY CAP 75MG .....	235
ZIANA GEL .....	160	ZOLADEX IMP 10.8MG .....	108
<i>zidovudine cap 100 mg .....</i>	<i>130</i>	ZOLADEX IMP 3.6MG .....	108
<i>zidovudine syrup 10 mg/ml .....</i>	<i>130</i>	<i>zoledronic acid inj conc for iv infusion 4</i>	
<i>zidovudine tab 300 mg.....</i>	<i>130</i>	<i>mg/5ml.....</i>	<i>182</i>
ZIEXTENZO INJ 6/0.6ML .....	206	<i>zoledronic acid iv soln 4 mg/100ml .</i>	<i>182</i>
<i>zileuton tab er 12hr 600 mg .....</i>	<i>53</i>	<i>zoledronic acid iv soln 5 mg/100ml .</i>	<i>182</i>
ZILRETTA INJ 32MG.....	156	ZOLEDRONIC INJ 4/100ML .....	182
ZIMHI SOL .....	82	ZOLINZA CAP 100MG.....	113
ZINC CHLORID INJ 1MG/ML.....	231	<i>zolmitriptan nasal spray 2.5 mg/spray</i>	
ZINC SULFATE INJ 1MG/ML .....	231	<i>unit .....</i>	<i>227</i>
ZINC SULFATE INJ 3MG/ML .....	231	<i>zolmitriptan nasal spray 5 mg/spray</i>	
<i>zinc sulfate inj 3 mg/ml.....</i>	<i>231</i>	<i>unit .....</i>	<i>227</i>
ZINC SULFATE INJ 5MG/ML .....	231	<i>zolmitriptan orally disintegrating tab</i>	
<i>zinc sulfate inj 5 mg/ml.....</i>	<i>231</i>	<i>2.5 mg.....</i>	<i>227</i>
ZINGO INJ 0.5MG.....	213	<i>zolmitriptan orally disintegrating tab 5</i>	
ZINPLAVA SOL 25MG/ML.....	256	<i>mg .....</i>	<i>227</i>
ZINTREXYL-C TAB .....	237	<i>zolmitriptan tab 2.5 mg.....</i>	<i>227</i>
ZIOPTAN DRO 0.0015% .....	253	<i>zolmitriptan tab 5 mg .....</i>	<i>227</i>
<i>ziprasidone hcl cap 20 mg .....</i>	<i>121</i>	ZOLOFT CON 20MG/ML .....	70
<i>ziprasidone hcl cap 40 mg .....</i>	<i>121</i>	ZOLOFT TAB 100MG .....	70
<i>ziprasidone hcl cap 60 mg .....</i>	<i>121</i>	ZOLOFT TAB 25MG.....	70
<i>ziprasidone hcl cap 80 mg .....</i>	<i>121</i>	ZOLOFT TAB 50MG.....	70
<i>ziprasidone mesylate for inj 20 mg</i>		<i>zolpidem tartrate sl tab 1.75 mg ...</i>	<i>210</i>
<i>(base equivalent) .....</i>	<i>121</i>	<i>zolpidem tartrate sl tab 3.5 mg .....</i>	<i>210</i>
ZIPSOR CAP 25MG .....	28	<i>zolpidem tartrate tab 10 mg .....</i>	<i>210</i>
ZIRABEV INJ 100/4ML.....	104	<i>zolpidem tartrate tab 5 mg .....</i>	<i>210</i>
ZIRABEV INJ 400/16ML.....	104	<i>zolpidem tartrate tab er 12.5 mg....</i>	<i>210</i>
ZIRGAN GEL 0.15%.....	250	<i>zolpidem tartrate tab er 6.25 mg....</i>	<i>210</i>
ZITHROMAX INJ 500MG .....	214	ZOLPIMIST SPR 5MG .....	210
ZITHROMAX POW 1GM PAK .....	214	ZOMACTON INJ 10MG .....	184
ZITHROMAX SUS 100/5ML.....	214	ZOMACTON INJ 5MG.....	184
ZITHROMAX SUS 200/5ML.....	214	ZOMIG SPR 2.5MG .....	227

ZOMIG SPR 5MG .....	227	ZYCLARA PUMP CRE 2.5% .....	169
ZOMIG TAB 2.5MG .....	227	ZYCLARA PUMP CRE 3.75% .....	169
ZOMIG TAB 5MG .....	227	ZYDELIG TAB 100MG .....	113
ZONALON CRE 5% .....	162	ZYDELIG TAB 150MG .....	113
ZONEGRAN CAP 100MG .....	65	ZYFLO TAB 600MG .....	53
ZONEGRAN CAP 25MG .....	65	ZYKADIA TAB 150MG .....	113
<i>zonisamide cap 100 mg</i> .....	65	ZYLET SUS 0.5-0.3% .....	251
<i>zonisamide cap 25 mg</i> .....	65	ZYLOPRIM TAB 100MG .....	198
<i>zonisamide cap 50 mg</i> .....	65	ZYLOPRIM TAB 300MG .....	198
ZONTIVITY TAB 2.08MG .....	203	ZYMAXID SOL 0.5% .....	250
ZORBTIVE INJ 8.8MG .....	184	ZYNLONTA SOL 10MG .....	105
ZORTRESS TAB 0.25MG .....	234	ZYNRELEF INJ 200-6MG .....	28
ZORTRESS TAB 0.5MG .....	234	ZYNRELEF INJ 400-12MG .....	28
ZORTRESS TAB 0.75MG .....	234	ZYPITAMAG TAB 1MG .....	89
ZORTRESS TAB 1MG .....	234	ZYPITAMAG TAB 2MG .....	89
ZORVOLEX CAP 18MG .....	28	ZYPITAMAG TAB 4MG .....	89
ZORVOLEX CAP 35MG .....	28	ZYPREXA INJ 10MG .....	124
ZORYVE CRE 0.3% .....	164	ZYPREXA RELP INJ 210MG .....	124
ZOSYN SOL 2-0.25GM .....	258	ZYPREXA RELP INJ 300MG .....	124
ZOSYN SOL 3-0.375G .....	258	ZYPREXA RELP INJ 405MG .....	124
ZOSYN SOL 4-0.50GM .....	258	ZYPREXA TAB 10MG .....	124
<i>zovia 1/35 tab</i> .....	151	ZYPREXA TAB 15MG .....	124
ZOVIRAX CRE 5% .....	164	ZYPREXA TAB 2.5MG .....	124
ZOVIRAX OIN 5% .....	164	ZYPREXA TAB 20MG .....	124
ZOVIRAX SUS 200/5ML .....	132	ZYPREXA TAB 5MG .....	124
ZTLIDO PAD 1.8% .....	170	ZYPREXA TAB 7.5MG .....	124
ZUBSOLV SUB 0.7-0.18 .....	41	ZYPREXA ZYDI TAB 10MG .....	124
ZUBSOLV SUB 1.4-0.36 .....	41	ZYPREXA ZYDI TAB 15MG .....	124
ZUBSOLV SUB 11.4-2.9 .....	41	ZYPREXA ZYDI TAB 20MG .....	124
ZUBSOLV SUB 2.9-0.71 .....	41	ZYPREXA ZYDI TAB 5MG .....	124
ZUBSOLV SUB 5.7-1.4 .....	41	ZYTIGA TAB 250MG .....	108
ZUBSOLV SUB 8.6-2.1 .....	41	ZYTIGA TAB 500MG .....	108
<i>zumandimine tab 3-0.03mg</i> .....	151	ZYVOX SOL 2MG/ML .....	47
ZUPLENZ MIS 4MG .....	82	ZYVOX SUS 100MG/5M .....	47
ZUPLENZ MIS 8MG .....	82	ZYVOX TAB 600MG .....	47
ZYCLARA CRE 3.75% .....	169		