

This Preferred Drug List is searchable. Here is how to search for a drug:

1. Press Control F to open the search tool
2. Type the drug name into the text box
3. Press enter

Pharmacy Program

Peach State Health Plan covers medicine for Georgia Families® Medicaid and Peach Care for Kids® members. The pharmacy team works with doctors and pharmacists to be sure medicines for a lot of illnesses are covered. Peach State Health Plan pays for prescription drugs and some over-the-counter (OTC) medications. Your doctor must write a prescription for these drugs. The pharmacy program does not pay for all drugs. Some drugs need a prior authorization (PA). Some drugs have limits on age, dose, and maximum quantities.

You can call Member Services to talk to someone about the list of drugs Peach State Health Plan covers. The Member Service phone number is [1-800-704-1484](tel:1-800-704-1484) (TTY/TTD [1-800-255-0056](tel:1-800-255-0056)). You can also use the “Drug Lookup” Tool in the secure member webpage to see if your drug is covered. You can get to the tool by logging into the [Member Portal](#).

Preferred Drug List (PDL)

The Peach State Health Plan Preferred Drug List (PDL) is the list of covered drugs. The PDL tells you the drugs you can get at local pharmacies. The list is updated every three months by the Pharmacy and Therapeutics (P&T) Committee. The group is made up of the Chief Medical Officer, the Chief Medical Director of Pharmacy Services, and several Peach State Health Plan primary care physicians, pharmacists, and specialists.

Pharmacy Benefit Manager (PBM)

Peach State Health Plan works with Express Scripts to pay for pharmacy claims. Express Scripts is our Pharmacy Benefit Manager (PBM).

Specialty Drugs

Some drugs are only paid for when you get them from a Peach State Health Plan specialty pharmacy. Specialty pharmacies can be found using the Find A Provider tool in the Peach State Health Plan website at www.pshp.com.

These drugs are not usually available at local pharmacies. Be sure to call the specialty pharmacy for a refill before you run out of medicine. Drugs that specialty pharmacies provided are marked in the PDL. This list is on the Peach State Health Plan website at www.pshp.com. Please contact Member Services if you have any questions about the PDL.

Dispensing Limits

The pharmacy can give you up to 31 days' supply of each new prescription or refill. 80% of the days' supply or 25 days must have passed before the medicine can be refilled for PDL drugs that are not controlled. Controlled medicines must have 90% of the supply used before the medicine can be refilled. You will need a new prescription for some controlled medicines.

Appropriate Use and Safety Edits

Your safety is very important to Peach State Health Plan. One of the ways we look out for your safety is through point-of sale (POS) edits when the medicine claim is sent by the pharmacy. These edits are based on the Food and Drug Administration (FDA) approvals. One example would be only allowing one drug in the same therapy class each month.

More information about the drugs that are part of these edits can be found in the Appropriate Use and Safety Edits document on the Peach State Health Plan website at www.pshp.com.

Prior Authorizations (PA)

Some drugs on the PDL may require PA. You should talk to your doctor or pharmacist if your pharmacy tells you a PA is needed. A request should be sent by the doctor or pharmacy to Pharmacy Services on the Medication Prior Authorization Form. This form is on the Peach State Health Plan website at www.pshp.com. The completed form and doctor notes to show your history should be faxed to Pharmacy Services at 1-833-582-2342. A request can also be sent using the secure electronic Prior Authorization portal by Cover My Meds at www.covermymeds.com.

Peach State Health Plan will cover the medicine if:

1. There is a medical reason you need that specific medication.
2. Other medications on the PDL have not worked.

All reviews are done by a Georgia licensed clinical pharmacist and will be completed in 24 hours unless more information is needed. They use the standards set by the P&T Committee. If the request is approved, Pharmacy Services sends your doctor a fax. If it is not approved, Peach State Health Plan and Pharmacy Services will send a letter to you and a fax to your doctor. The letter will have a list of other similar medicines. It will also tell you about the appeal process.

Step Therapy

Some drugs on the PDL may require another drug to be used first. This is called Step Therapy. If you filled that required drug with Peach State Health Plan already, the step therapy medicine will be covered. If you have not tried the PDL medicine, your doctor will need to send in a PA form with other medicine you have tried. If Pharmacy Services does not approve the PA we will send you a letter and a fax to your doctor. The letter will tell you about the appeal process.

Quantity Limits

Peach State Health Plan may limit how much of a medicine you can get at one time. If the doctor feels you need a larger amount, a PA may be sent to Pharmacy Services. If Pharmacy Services does not approve the PA we will send you a letter and a fax to your doctor. The letter will tell you about the appeal process.

Age Limits

Some medicine on the Peach State Health Plan PDL may have age limits. These are based on the Food and Drug Administration (FDA) approved labeling and for your safety. If the doctor feels you need the drug anyway, a PA may be sent to Pharmacy Services. If Pharmacy Services does not approve the PA we will send you a letter and a fax to your doctor. The letter will tell you about the appeal process.

Medical Necessity Requests

If you need a medicine that is not on the PDL, your doctor can make a medical necessity (MN) PA request for the drug. There are medicines on the PDL to treat most conditions. For drugs not on the PDL, Peach State Health Plan requires:

- Doctor's notes to show you tried at least two PDL drugs in the same class and used for the same diagnosis; or
- Doctor's notes to show you are allergic or cannot take at least two PDL drugs in the same class; or
- Doctor's notes to show you cannot take any of the PDL agents for your diagnosis.

All reviews are done by a Georgia licensed clinical pharmacist and will be completed in 24 hours unless more information is needed. They use the standards set by the P&T Committee. If the request is approved, Pharmacy Services sends your doctor a fax. If it is not approved, Peach State Health Plan and Pharmacy Services will send a letter to you and a fax to your doctor. The letter will have a list of other similar medicines. It will also tell you about the appeal process.

72 Hour Emergency Supply Policy

State and Federal law says a pharmacy can give you a 72 hour (3 day) supply of medicine if you are waiting on PA review. Pharmacies will be paid for the 3 day supply even if the PA is not approved. The pharmacist can use professional judgment to decide if the medicine is urgent. The 72 hour supply is not allowed for Controlled substances that need a PA. The pharmacy must call Pharmacy Services at 1-866-399-0928 for an override to send the 72-hour supply for payment.

Exclusions

Below you will find a list of things that are not part of the Peach State PDL. The 72-hour emergency supply policy does not cover these drugs either.

- Drugs that are considered experimental

- Drug Efficacy Study and Implementation (DESI) drugs
- Drugs prescribed for weight loss
- Drugs prescribed for infertility
- Drugs prescribed for erectile dysfunction
- Drugs prescribed for cosmetic purposes or hair growth
- Cough and cold preparations
- Infusion therapy and supplies
- Physician administered drugs, that are not listed in the PDL, Specialty Drug Benefit, or the Physician Administered Drug Prior Authorization List

Newly Approved Products

Peach State Health Plan reviews new drugs before adding them to the PDL. These medicines will need a PA review until they are added to the PDL. If it is not approved, Peach State Health Plan and Pharmacy Services will send a letter to you and a fax to your doctor. The letter will have a list of other similar medicines. It will also tell you about the appeal process.

Over-the-Counter Medications

The Peach State Health Plan PDL covers some OTC medicines. These OTCs are covered when your doctor writes a prescription for one of them.

Tobacco Cessation Medications

Tobacco Cessation is when you quit smoking cigarettes. These are the medicines Peach State Health Plan covers: generic nicotine replacement products (gum, lozenges, and patches) and bupropion SR (Zyban). You will need a prescription from your doctor for these medicines.

Generic Drugs

Brand-name drugs will not be covered without PA when an acceptable generic is available. Generic drugs have the same active ingredient and work the same as brand-name drugs. If you or your doctor feels a brand-name is needed, your doctor can ask for PA. We will cover the brand-name drug if there is a medical reason you need the brand-name. If it is not approved, Peach State Health Plan and Pharmacy Services will send a letter to you and a fax to your doctor. The letter will have a list of other medicine. It will also tell you about the appeal process.

Drug Efficacy Study and Implementation Drugs

Drug Efficacy Study and Implementation (DESI) drugs are said to be less effective by the Food and Drug Administration. DESI products are not covered by Peach State Health Plan.

Filling a Prescription

You can have medicine filled at a Peach State Health Plan pharmacy. You can find a pharmacy by calling Peach State Health Plan Member Services. You can also look for a pharmacy close to you using the Provider-Lookup tool on the website. You will need to give the pharmacist your prescription and Peach State Health Plan ID card. Your pharmacy may ask for other forms of identification, like driver's license or state ID.

Ordering, Prescribing and Referring (OPR) Provider Requirements

Georgia Medicaid and the Center for Medicaid and Medicare Services (CMS) want your doctor to be listed with Georgia Medicaid. Peach State Health Plan and Pharmacy Services check pharmacy claims to be sure the pharmacy and doctor on your prescription are enrolled with Georgia Families®. If a non-enrolled doctor writes your prescription, the prescription will be rejected. Your pharmacy will not be able to fill prescriptions for you if it is not enrolled in Georgia Families®.

Copayments

The table below shows co-pay amounts for the drugs. The co-pay is based on the actual cost of the medicine. Co-pays are not required for:

- Children under the age of 21 who are covered under the Medicaid benefit
- PeachCare for Kids® members under age 6
- Pregnant women
- Family planning supplies
- Members in the hospital or a nursing home
- Alaskan Eskimo members, or American Indian members
- Members with breast and/or cervical cancer

Prescription	Member Copayment
Preferred Drug List (PDL) Medicine	\$0.50
Non-PDL Medicine	
Under \$10.00	\$0.50
Between \$10.01 and \$25.00	\$1.00
Between \$25.01 and \$50.00	\$2.00
More than \$50.01	\$3.00

Peach State Health Plan: Preferred Drug List (PDL)



Contact Information

Peach State Health Plan Member Services:	<u>1-800-704-1484</u>
	Fax: 1-800-659-7518
Peach State Health Plan Member Services TTY/TDD:	<u>1-800-255-0056</u>
Pharmacy Services Prior Authorizations:	<u>1-866-399-0928</u>
	Fax: 1-833-582-2342
Express Scripts Pharmacy Help Desk:	<u>1-833-750-4403</u>

Language Assistance

Do you need this book translated? Do you need help understanding this book? If you do, call Peach State Health Plan's Member Service line at 1-800-704-1484. If you are hearing impaired, call our TDD/TTY at 1-800-255-0056. To get this information in large font or audiotape, call Member Services. Interpreter services are provided free of charge to you. Peach State Health Plan has a telephone language line available 24 hours a day, 7 days a week.

¿Necesita ayuda para entender esto? Si la necesita, llame a la línea de Servicios para los miembros de Peach State Health Plan al 1-800-704-1484. Si es una persona con problemas de audición, llame a nuestro TTY 1-800-255-0056. Para obtener esta información en letra más grande o que se la lean por teléfono, llame a Servicios para los Miembros.

Preferred Drug List Abbreviations

PREFERRED DRUG LIST TIER ABBREVIATIONS	
Tier	Tier Definitions
<i>P</i>	Preferred Drug
<i>NP</i>	Non-Preferred Drug

REQUIREMENT or LIMITS	
Requirement/Limits	Requirement/Limit Description
<i>AL</i>	Age Limit: Drug is limited to a specific age
<i>PA</i>	Prior Authorization: Review required before prescription can be filled
<i>QL</i>	Quantity Limit: There is a limit on the amount covered per prescription or within a set time frame.
<i>Rx/OTC</i>	Product has both prescription and over the counter coverage
<i>SP</i>	Specialty Drug: High-cost drugs used to treat complex conditions, such as multiple sclerosis, rheumatoid arthritis, hepatitis C, and hemophilia and may be limited to a specific pharmacy.
<i>ST</i>	Step Therapy: Requires trial and failure of one or more preferred products prior to coverage.

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CLINICAL EDIT DESCRIPTIONS	
Edit Name	Edit Description
<i>Opioid</i>	Short-acting opioid medicines can only be filled for 7-days at a time when no opioids are filled in the past 180 days (Treatment-Naïve). This limit is extended to 30-day fills when a member has a medical history of cancer, sickle cell, or palliative care in their records. Treatment-Naïve* Limits: • Daily Dose Max = 50 MME** • Day Supply Max = 7 days • Must use Short-acting opioids before Long-acting opioids *Treatment-Naïve means no opioid fill in last 180 days **MME = Morphine Milligram Equivalent
<i>Test Strips</i>	Insulin users are limited to 150 strips per 30 days; Non-insulin users are limited to 100 strips per 90 days EXCEPTIONS: The below members may get up to 200 strips per 30 days • Members who are less than 18 years old • Members with a Gestational Diabetes or Diabetes in Pregnancy

STANDARD ABBREVIATIONS			
Dose Form	Dose Form Description	Dose Form	Dose Form Description
<i>AEPB</i>	Aerosol Powder Breath Activated	<i>IMPL</i>	Implant
<i>AERB</i>	Aerosol, breath activated	<i>INHA</i>	Inhaler
<i>AERO</i>	Aerosol	<i>INJ</i>	Injectable
<i>AJKT</i>	Auto-injector Kit	<i>IUD</i>	Intrauterine Device
<i>AUIJ</i>	Auto-injector	<i>IV</i>	Intravenous
<i>CAPS</i>	Capsule	<i>LIQD</i>	Liquid
<i>CHEW</i>	Tablet Chewable	<i>LOTN</i>	Lotion
<i>CONC</i>	Concentrate	<i>LOZG</i>	Lozenge
<i>CP12</i>	Capsule ER 12 HR	<i>LPOP</i>	Lollipop
<i>CP24</i>	Capsule ER 24 HR	<i>MISC</i>	Miscellaneous
<i>CPCR</i>	Capsule ER	<i>NA</i>	Nasal
<i>CPDR</i>	Capsule Delayed Release	<i>NEBU</i>	Nebulization solution
<i>CPEP</i>	Capsule Enteric Coated Particles	<i>OINT</i>	Ointment
<i>CPSP</i>	Capsule Sprinkle	<i>OP</i>	Ophthalmic
<i>CREA</i>	Cream	<i>OPHT</i>	Ophthalmic
<i>CSDR</i>	Capsule Delayed Release Sprinkle	<i>OR</i>	Oral
<i>DEVI</i>	Device	<i>PACK</i>	Packet
<i>ELIX</i>	Elixir	<i>PEN</i>	Pen-injector
<i>EMUL</i>	Emulsion	<i>PNKT</i>	Pen-injector Kit
<i>ENEM</i>	Enema	<i>POT</i>	Potassium
<i>EX</i>	External	<i>POWD</i>	Powder
<i>GRAN</i>	Granules	<i>PRSY</i>	Prefilled Syringe
<i>IJ</i>	Injection	<i>PSKT</i>	Prefilled Syringe Kit

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Dose Form	Dose Form Description	Dose Form	Dose Form Description
<i>PSTE</i>	Paste	<i>SUSR</i>	Suspension Reconstituted
<i>PT24</i>	Patch 24 Hour	<i>SUSY</i>	Suspension Prefilled Syringe
<i>PT72</i>	Patch 72 Hour	<i>SYRP</i>	Syrup
<i>PTCH</i>	Patch	<i>T12A</i>	Tablet ER 12 Hour Abuse-Deterrent
<i>PTTW</i>	Patch Biweekly	<i>TABS</i>	Tablets
<i>PTWK</i>	Patch Weekly	<i>TB12</i>	Tablet ER 12 Hour
<i>RE</i>	Rectal	<i>TB24</i>	Tablet ER 24 Hour
<i>S.O.P.</i>	Sterile Ophthalmic Preparation	<i>TBCR</i>	Tablet ER
<i>SHAM</i>	Shampoo	<i>TBDP</i>	Tablet Dispersible
<i>SOAJ</i>	Solution Auto-injector	<i>TBEC</i>	Tablet Enteric Coated
<i>SOCT</i>	Solution Cartridge	<i>TBEF</i>	Tablet Effervescent
<i>SOLN</i>	Solution	<i>TBPK</i>	Tablet Therapy Pack
<i>SOLR</i>	Solution Reconstituted	<i>TBSO</i>	Tablet Soluble
<i>SOPN</i>	Solution Pen-injector	<i>TEST</i>	Diagnostic Test
<i>SOSY</i>	Solution Prefilled Syringe	<i>TINC</i>	Tincture
<i>SRER</i>	Suspension Reconstituted ER	<i>TROC</i>	Troche
<i>STRP</i>	Strip	<i>VA</i>	Vaginal
<i>SUBL</i>	Tablet Sublingual	<i>VI</i>	Visual Indicator
<i>SUER</i>	Suspension Extended Release	<i>WAFR</i>	Wafer
<i>SUPN</i>	Suspension Pen-injector	<i>XR</i>	Extended Release
<i>SUPP</i>	Suppository		
<i>SUSP</i>	Suspension		

Drug Name	Drug Tier	Requirements/Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders		
Amphetamines		
ADDERALL XR CP24 (Use amphetamine-dextroamphetamine)	NP	QL(1 EA daily); AL(At least 6 yrs old)
ADDERALL TABS (Use amphetamine-dextroamphetamine)	NP	QL(2 EA daily); AL(At least 3 yrs old)
amphetamine-dextroamphetamine CP24 5 MG, 10 MG, 15 MG, 20 MG, 25 MG, 30 MG	P	QL(1 EA daily); AL(At least 6 yrs old)
amphetamine-dextroamphetamine TABS	P	QL(2 EA daily); AL(At least 3 yrs old)
DEXEDRINE CP24 10 MG, 15 MG (Use dextroamphetamine sulfate)	NP	QL(2 EA daily); AL(At least 6 yrs old)
dextroamphetamine sulfate CP24	P	QL(2 EA daily); AL(At least 6 yrs old)
dextroamphetamine sulfate TABS 5 MG, 10 MG	P	QL(2 EA daily); AL(At least 3 yrs old)
lisdexamfetamine dimesylate CAPS	P	QL(1 EA daily); PA
lisdexamfetamine dimesylate CHEW	P	QL(1 EA daily); PA
VYVANSE CAPS	NP	QL(1 EA daily); PA
VYVANSE CHEW	NP	QL(1 EA daily); PA
Analeptics		
CAFFEINE CITRATED POWD	P	QL(45 GM per fill retail)
caffeine citrate SOLN PO	P	QL(45 ML per fill retail)
Anorexiants Non-Amphetamine		
PLENITY	NP	

Drug Name	Drug Tier	Requirements/Limits
PLENITY WELCOME KIT	NP	
Attention-Deficit/Hyperactivity Disorder (ADHD) Agents		
atomoxetine hcl	P	QL(1 EA daily); AL(At least 6 yrs old); ST
clonidine hcl (adhd) TB12	P	
guanfacine hcl (adhd)	P	QL(1 EA daily); AL(At least 6 yrs old)
INTUNIV (Use guanfacine hcl (adhd))	NP	QL(1 EA daily); AL(At least 6 yrs old)
KAPVAY TB12 (Use clonidine hcl (adhd))	NP	
STRATTERA (Use atomoxetine hcl)	NP	QL(1 EA daily); AL(At least 6 yrs old); ST
Stimulants - Misc.		
CONCERTA TBCR 18 MG, 27 MG, 54 MG (Use methylphenidate hcl)	NP	QL(1 EA daily); AL(At least 6 yrs old)
CONCERTA TBCR 36 MG (Use methylphenidate hcl)	NP	QL(2 EA daily); AL(At least 6 yrs old)
dexmethylphenidate hcl TABS	P	QL(2 EA daily); AL(At least 6 yrs old)
FOCALIN TABS (Use dexmethylphenidate hcl)	NP	QL(2 EA daily); AL(At least 6 yrs old)
METADATE CD CPR (Use methylphenidate hcl)	NP	QL(1 EA daily); AL(At least 6 yrs old)
METHYLIN SOLN 10 MG/5ML (Use methylphenidate hcl)	NP	QL(900 ML per 30 day(s) retail); AL(At least 3 yrs old)
METHYLIN SOLN 5 MG/5ML (Use methylphenidate hcl)	NP	QL(1800 ML per 30 day(s) retail); AL(At least 3 yrs old)
methylphenidate hcl CPR	P	QL(1 EA daily); AL(At least 6 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
<i>methylphenidate hcl SOLN 5 MG/5ML</i>	P	QL(1800 ML per 30 day(s) retail); AL(At least 3 yrs old)
<i>methylphenidate hcl SOLN 10 MG/5ML</i>	P	QL(900 ML per 30 day(s) retail); AL(At least 3 yrs old)
<i>methylphenidate hcl TABS 5 MG</i>	P	QL(6 EA daily); AL(At least 3 yrs old)
<i>methylphenidate hcl TABS 10 MG, 20 MG</i>	P	QL(3 EA daily); AL(At least 3 yrs old)
<i>methylphenidate hcl TB24 36 MG</i>	P	QL(2 EA daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TB24 18 MG, 27 MG, 54 MG</i>	P	QL(1 EA daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TBCR 18 MG, 27 MG, 54 MG</i>	P	QL(1 EA daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TBCR 10 MG, 20 MG, 36 MG</i>	P	QL(2 EA daily); AL(At least 6 yrs old)
RELEXXII TBCR 36 MG	P	QL(2 EA daily); AL(At least 6 yrs old)
RELEXXII TBCR 18 MG, 27 MG, 54 MG	P	QL(1 EA daily); AL(At least 6 yrs old)
RITALIN TABS 10 MG, 20 MG (<i>Use methylphenidate hcl</i>)	NP	QL(3 EA daily); AL(At least 3 yrs old)
RITALIN TABS 5 MG (<i>Use methylphenidate hcl</i>)	NP	QL(6 EA daily); AL(At least 3 yrs old)
ALLERGENIC EXTRACTS/BIOLOGICALS MISC		
Allergenic Extracts		
ROUGH PIGWEED	NP	
SHEEP SORREL-YELLOW DOCK IJ	NP	
SORREL/DOCK MIX IJ	NP	
ALTERNATIVE MEDICINES		

Drug Name	Drug Tier	Requirements/ Limits
Alternative Medicine - G's		
<i>ginger (zingiber officinalis) CAPS 250 MG</i>	P	OTC; QL(4 EA daily)
Alternative Medicine - M's		
MELATONIN SUBL	P	QL(1 EA daily)
<i>melatonin TABS 3 MG, 5 MG</i>	P	OTC; QL(1 EA daily)
<i>melatonin TBDP 3 MG</i>	P	QL(1 EA daily)
AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections		
Aminoglycosides		
ARIKAYCE	P	SP; PA
BETHKIS NEBU (<i>Use tobramycin</i>)	NP	SP; PA
KITABIS PAK (W/ NEBULIZER) NEBU 300 MG/5ML (<i>Use tobramycin</i>)	NP	SP; PA
<i>neomycin sulfate TABS</i>	P	
TOBI PODHALER CAPS	P	SP; PA
TOBI NEBU (<i>Use tobramycin</i>)	NP	SP; PA
<i>tobramycin sulfate SOLN IJ 1.2 GM/30ML, 2 GM/50ML, 10 MG/ML, 80 MG/2ML</i>	P	PA
<i>tobramycin sulfate SOLR</i>	P	PA
<i>tobramycin NEBU</i>	P	SP; PA
ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions		
Antirheumatic - Enzyme Inhibitors		
RINVOQ TB24 30 MG, 45 MG	P	SP; PA
XELJANZ XR TB24	P	SP; PA
XELJANZ SOLN	P	SP; PA
XELJANZ TABS	P	SP; PA
Antirheumatic Antimetabolites		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
OTREXUP SOAJ 10 MG/0.4ML, 12.5 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 20 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML	P	SP; PA	ADALIMUMAB-ADB(M/PS/UV STARTER) AJKT	P	SP; PA
RASUVO SOAJ 7.5 MG/0.15ML, 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML	P	SP; PA	ADALIMUMAB-FKJP (2 PEN) AJKT	P	SP; PA
REDITREX SOSY	P	SP; PA	ADALIMUMAB-FKJP (2 PEN) AJKT	NP	SP
Anti-TNF-alpha - Monoclonal Antibodies			ADALIMUMAB-FKJP (2 SYRINGE) PSKT	NP	SP
ADALIMUMAB-AATY (1 PEN) AJKT	P	SP; PA	ADALIMUMAB-FKJP (2 SYRINGE) PSKT	P	SP; PA
ADALIMUMAB-AATY (2 PEN) AJKT	P	SP; PA	ADALIMUMAB-RYVK (2 SYRINGE) PSKT	NP	SP
ADALIMUMAB-AATY (2 SYRINGE) PSKT	P	SP; PA	CYLTEZO (2 PEN) AJKT	NP	SP
ADALIMUMAB-AATY CD/UC/HS START AJKT 80 MG/0.8ML	P	SP; PA	CYLTEZO (2 SYRINGE) PSKT	NP	SP
ADALIMUMAB-ADAZ SOAJ	P	SP; PA	CYLTEZO-CD/UC/HS STARTER AJKT	NP	SP
ADALIMUMAB-ADAZ SOSY	P	SP; PA	CYLTEZO-PSORIASIS/UV STARTER AJKT	NP	SP
ADALIMUMAB-ADB(M (2 PEN) AJKT	P	SP; PA	HADLIMA PUSHTOUCH SOAJ	P	SP; PA
ADALIMUMAB-ADB(M (2 PEN) AJKT	NP	SP	HADLIMA SOSY	P	SP; PA
ADALIMUMAB-ADB(M (2 SYRINGE) PSKT	P	SP; PA	HULIO (2 PEN) AJKT	NP	SP
ADALIMUMAB-ADB(M (2 SYRINGE) PSKT 40 MG/0.8ML	NP	SP	HULIO (2 SYRINGE) PSKT	NP	SP
ADALIMUMAB-ADB(M(CD/UC/HS STRT) AJKT	P	SP; PA	HYRIMOZ-CROHNS/UC STARTER SOAJ	NP	SP
			HYRIMOZ SOAJ	NP	SP
			HYRIMOZ SOSY	NP	SP
			SIMLANDI (1 PEN) AJKT	P	SP; PA
			SIMLANDI (2 PEN) AJKT	P	SP; PA
			SIMLANDI (2 SYRINGE) PSKT 40 MG/0.4ML	P	SP; PA
			YUFLYMA (1 PEN) AJKT	NP	SP
			YUFLYMA (2 PEN) AJKT	NP	SP
			YUFLYMA (2 SYRINGE) PSKT	NP	SP
			YUFLYMA-CD/UC/HS STARTER AJKT	NP	SP

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
YUSIMRY	P	SP; PA	<i>ibuprofen lysine</i>	P	
Interleukin-1 Blockers			<i>ibuprofen CHEW</i>	P	OTC
ARCALYST	P	SP; PA	<i>ibuprofen SUSP 40 MG/ML, 50 MG/1.25ML</i>	P	OTC
Interleukin-1 Receptor Antagonist (IL-1Ra)			<i>ibuprofen SUSP 100 MG/5ML, 200 MG/10ML</i>	P	RX/OTC
KINERET SOSY	P	SP; PA	<i>ibuprofen TABS 400 MG, 600 MG, 800 MG</i>	P	
Interleukin-1beta Blockers			<i>ibuprofen TABS 200 MG</i>	P	OTC
ILARIS SOLN	P	SP; PA	INDOCIN SUSP (<i>Use indomethacin</i>)	NP	
Interleukin-6 Receptor Inhibitors			INDOMETHACIN SODIUM	P	
ACTEMRA ACTPEN SOAJ	P	SP; PA	<i>indomethacin CAPS 25 MG, 50 MG</i>	P	
ACTEMRA SOLN	P	SP; PA	<i>indomethacin SUPP</i>	P	
ACTEMRA SOSY	P	SP; PA	<i>indomethacin SUSP</i>	P	
Nonsteroidal Anti-inflammatory Agents (NSAIDs)			INFANTS ADVIL SUSP (<i>Use ibuprofen</i>)	NP	OTC
ADVIL TABS (<i>Use ibuprofen</i>)	NP	OTC	<i>ketorolac tromethamine SOLN IJ 15 MG/ML, 30 MG/ML</i>	P	
ALEVE ALL DAY STRONG TABS 220 MG (<i>Use naproxen sodium</i>)	NP	OTC; QL(2 EA daily)	KETOROLAC TROMETHAMINE SOLN IJ 30 MG/ML	P	
ALEVE TABS (<i>Use naproxen sodium</i>)	NP	OTC; QL(2 EA daily)	<i>ketorolac tromethamine TABS</i>	P	QL(20 EA per 30 day(s) retail); AL(At least 17 yrs old)
ANAPROX DS TABS (<i>Use naproxen sodium</i>)	NP		LODINE TABS (<i>Use etodolac</i>)	NP	
CHILDRENS ADVIL SUSP 100 MG/5ML (<i>Use ibuprofen</i>)	NP	RX/OTC	<i>meloxicam TABS</i>	P	
CHILDRENS MOTRIN SUSP 100 MG/5ML (<i>Use ibuprofen</i>)	NP	RX/OTC	MOTRIN CHILDRENS CHEW (<i>Use ibuprofen</i>)	NP	OTC
<i>diclofenac potassium TABS 50 MG</i>	P		MOTRIN INFANTS DROPS SUSP (<i>Use ibuprofen</i>)	NP	OTC
<i>diclofenac sodium TBEC</i>	P		<i>nabumetone</i>	P	
<i>etodolac CAPS</i>	P		NALFON CAPS (<i>Use fenoprofen calcium</i>)	NP	
<i>etodolac TABS</i>	P				
FELDENE CAPS (<i>Use piroxicam</i>)	NP				
<i>fenoprofen calcium CAPS 400 MG</i>	P				
<i>flurbiprofen TABS</i>	P				

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Drug Name	Drug Tier	Requirements/ Limits
NAPROSYN SUSP (<i>Use naproxen</i>)	NP	
NAPROSYN TABS 500 MG (<i>Use naproxen</i>)	NP	
<i>naproxen sodium TABS 220 MG</i>	P	OTC; QL(2 EA daily)
<i>naproxen sodium TABS 275 MG, 550 MG</i>	P	
<i>naproxen SUSP</i>	P	
<i>naproxen TABS</i>	P	
NEOPROFEN (<i>Use ibuprofen lysine</i>)	NP	
<i>piroxicam CAPS</i>	P	
<i>sulindac TABS</i>	P	
Phosphodiesterase 4 (PDE4) Inhibitors		
OTEZLA TABS	P	SP; PA
OTEZLA TBPk	P	SP; PA
Pyrimidine Synthesis Inhibitors		
ARAVA (<i>Use leflunomide</i>)	NP	QL(1 EA daily)
<i>leflunomide</i>	P	QL(1 EA daily)
Selective Costimulation Modulators		
ORENCIA CLICKJECT SOAJ	P	SP; PA
ORENCIA SOLR	P	SP; PA
ORENCIA SOSY	P	SP; PA
ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions		
Analgesic Combinations		
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG</i>	P	QL(4 EA daily); AL(At least 12 yrs old)
<i>butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG</i>	P	QL(4 EA daily); AL(At least 12 yrs old)
<i>butalbital-acetaminophen TABS 50 MG-325 MG</i>	P	QL(4 EA daily); AL(At least 12 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
<i>butalbital-aspirin-caffeine CAPS</i>	P	QL(4 EA daily); AL(At least 18 yrs old)
<i>ESGIC TABS (Use butalbital-acetaminophen-caffeine)</i>	NP	QL(4 EA daily); AL(At least 12 yrs old)
Analgesics Other		
<i>acetaminophen CHEW</i>	P	OTC
<i>acetaminophen ELIX</i>	P	OTC
<i>acetaminophen LIQD 160 MG/5ML</i>	P	OTC
<i>acetaminophen SOLN PO 160 MG/5ML, 325 MG/10.15ML, 650 MG/20.3ML</i>	P	OTC
<i>acetaminophen SUPP 120 MG, 650 MG</i>	P	OTC; QL(12 EA per 30 day(s) retail)
<i>acetaminophen SUSP 160 MG/5ML, 650 MG/20.3ML</i>	P	OTC
<i>acetaminophen TABS 325 MG, 500 MG</i>	P	OTC
FEVERALL JUNIOR STRENGTH SUPP	P	OTC; QL(12 EA per 30 day(s) retail)
TYLENOL CHILDRENS CHEWABLES CHEW (<i>Use acetaminophen</i>)	NP	OTC
TYLENOL CHILDRENS PAIN + FEVER SUSP (<i>Use acetaminophen</i>)	NP	OTC
TYLENOL CHILDRENS SUSP (<i>Use acetaminophen</i>)	NP	OTC
TYLENOL EXTRA STRENGTH TABS (<i>Use acetaminophen</i>)	NP	OTC
TYLENOL FOR CHILDREN + ADULTS SUSP (<i>Use acetaminophen</i>)	NP	OTC
TYLENOL INFANTS PAIN+FEVER SUSP (<i>Use acetaminophen</i>)	NP	OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TYLENOL TABS (<i>Use acetaminophen</i>)	NP	OTC	DILAUDID TABS 2 MG, 4 MG (<i>Use hydromorphone hcl</i>)	NP	Clinical Edit: Opioids; QL(6 EA daily)
Analgesics-Peptide Channel Blockers			<i>fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR</i>	P	QL(0.34 EA daily)
PRIALT	P	SP; PA	HYDROMORPHONE HCL SUPP	P	Clinical Edit: Opioids; QL(2 EA daily)
Salicylates			<i>hydromorphone hcl TABS 8 MG</i>	P	Clinical Edit: Opioids; QL(4 EA daily)
<i>aspirin buffered (cal carb-mag carb-mag oxide)</i>	P	OTC	<i>hydromorphone hcl TABS 2 MG, 4 MG</i>	P	Clinical Edit: Opioids; QL(6 EA daily)
<i>aspirin CHEW</i>	P	OTC	<i>meperidine hcl SOLN PO 50 MG/5ML</i>	P	Clinical Edit: Opioids; QL(30 ML daily)
ASPIRIN SUPP 300 MG	P	OTC; QL(12 EA per 30 day(s) retail)	<i>meperidine hcl TABS 50 MG</i>	P	Clinical Edit: Opioids; QL(6 EA daily)
<i>aspirin TABS 325 MG</i>	P	OTC	<i>methadone hcl TABS 5 MG</i>	P	QL(6 EA daily); PA
<i>aspirin TBEC 81 MG, 325 MG</i>	P	OTC	<i>methadone hcl TABS 10 MG</i>	P	QL(10 EA daily); PA
BUFFERIN (<i>Use aspirin buffered (cal carb-mag carb-mag oxide)</i>)	NP	OTC	<i>morphine sulfate SOLN PO 20 MG/ML, 100 MG/5ML</i>	P	Clinical Edit: Opioids; QL(240 ML per fill retail)
<i>diflunisal TABS</i>	P		<i>morphine sulfate SOLN PO 10 MG/5ML, 20 MG/5ML</i>	P	Clinical Edit: Opioids; QL(21.4 ML daily)
DOLOBID TABS	P		<i>morphine sulfate SUPP</i>	P	Clinical Edit: Opioids; QL(18 EA per fill retail)
ECOTRIN ARTHRTIS PAIN TBEC (<i>Use aspirin</i>)	NP	OTC	<i>morphine sulfate TABS</i>	P	Clinical Edit: Opioids; QL(6 EA daily)
ECOTRIN TBEC (<i>Use aspirin</i>)	NP	OTC	<i>morphine sulfate TBCR</i>	P	QL(3 EA daily)
<i>salsalate</i>	P		MS CONTIN TBCR (<i>Use morphine sulfate</i>)	NP	QL(3 EA daily)
ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions			OXAYDO TABS 5 MG	P	Clinical Edit: Opioids; QL(6 EA daily)
Opioid Agonists					
<i>codeine sulfate TABS 30 MG</i>	P	Clinical Edit: Opioids; QL(2 EA daily); AL(At least 12 yrs old)			
CODEINE SULFATE TABS	P	Clinical Edit: Opioids; QL(2 EA daily); AL(At least 12 yrs old)			
DILAUDID TABS 8 MG (<i>Use hydromorphone hcl</i>)	NP	Clinical Edit: Opioids; QL(4 EA daily)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>oxycodone hcl CAPS</i>	P	Clinical Edit: Opioids; QL(6 EA daily)	<i>butalbital-aspirin-caffeine w/cod</i>	P	Clinical Edit: Opioids; QL(4 EA daily); AL(At least 12 yrs old)
<i>oxycodone hcl CONC 100 MG/5ML</i>	P	Clinical Edit: Opioids; QL(90 ML per fill retail)	<i>hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML</i>	P	Clinical Edit: Opioids; QL(180 ML daily)
<i>oxycodone hcl SOLN</i>	P	Clinical Edit: Opioids; QL(30 ML daily)	<i>hydrocodone-acetaminophen SOLN 325 MG/15ML-10 MG/15ML</i>	P	Clinical Edit: Opioids
<i>oxycodone hcl T12A 10 MG, 20 MG, 40 MG, 80 MG</i>	P	QL(2 EA daily); PA	<i>hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	P	Clinical Edit: Opioids; QL(6 EA daily)
<i>oxycodone hcl TABS 30 MG</i>	P	Clinical Edit: Opioids; QL(4 EA daily)	<i>oxycodone w/ acetaminophen SOLN</i>	P	Clinical Edit: Opioids; QL(30 ML daily)
<i>oxycodone hcl TABS 5 MG, 10 MG, 15 MG, 20 MG</i>	P	Clinical Edit: Opioids; QL(6 EA daily)	<i>oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	P	Clinical Edit: Opioids; QL(6 EA daily)
OXYCONTIN T12A	P	QL(2 EA daily); PA	PERCOCET TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG (Use <i>oxycodone w/ acetaminophen</i>)	NP	Clinical Edit: Opioids; QL(6 EA daily)
ROXICODONE TABS 30 MG (Use <i>oxycodone hcl</i>)	NP	Clinical Edit: Opioids; QL(4 EA daily)	<i>tramadol-acetaminophen</i>	P	Clinical Edit: Opioids; QL(4 EA daily); AL(At least 18 yrs old)
ROXICODONE TABS 15 MG (Use <i>oxycodone hcl</i>)	NP	Clinical Edit: Opioids; QL(6 EA daily)	Opioid Partial Agonists		
<i>tramadol hcl TABS 50 MG</i>	P	Clinical Edit: Opioids; QL(4 EA daily); AL(At least 18 yrs old)	BELBUCA FILM	P	PA
Opioid Combinations			BUPRENEX SOLN (Use <i>buprenorphine hcl</i>)	NP	PA
<i>acetaminophen w/ codeine SOLN</i>	P	Clinical Edit: Opioids; QL(30 ML daily); AL(At least 12 yrs old)	<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG</i>	P	QL(3 EA daily)
<i>acetaminophen w/ codeine TABS 15 MG-300 MG, 30 MG-300 MG, 60 MG-300 MG</i>	P	Clinical Edit: Opioids; QL(6 EA daily); AL(At least 12 yrs old)			
<i>butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG</i>	P	Clinical Edit: Opioids; QL(4 EA daily); AL(At least 12 yrs old)			

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<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG</i>	P	QL(2 EA daily); PA	Rectal Combinations		
<i>buprenorphine hcl-naloxone hcl dihydrate SUBL</i>	P	QL(3 EA daily)	ANALPRAM-HC LOTN EX	P	QL(62 ML per 30 day(s) retail)
<i>buprenorphine hcl SOLN</i>	P	PA	<i>phenylephrine-shark liver oil-cocoa butter</i>	P	OTC; QL(12 EA per 30 day(s) retail)
<i>buprenorphine hcl SUBL</i>	P	PA	<i>phenylephrine-shark liver oil-mineral oil-petrolatum</i>	P	OTC; QL(31 GM per 30 day(s) retail)
SUBLOCADE SOSY	P	2 max fill(s) per 30 day(s) retail; SP; PA	Rectal Steroids		
SUBOXONE FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG (Use <i>buprenorphine hcl-naloxone hcl dihydrate</i>)	NP	QL(3 EA daily)	ANUSOL-HC EX (Use <i>hydrocortisone (rectal)</i>)	NP	
SUBOXONE FILM SL 3 MG-12 MG (Use <i>buprenorphine hcl-naloxone hcl dihydrate</i>)	NP	QL(2 EA daily); PA	<i>hydrocortisone (rectal) EX 1 %</i>	NP	RX/OTC
ZUBSOLV SUBL	P	PA	<i>hydrocortisone (rectal) EX 2.5 %</i>	P	
ANDROGENS-ANABOLIC - Drugs to Regulate Hormones			PREPARATION H EX 1 %	P	QL(454 GM per fill retail); RX/OTC
Androgens			PREPARATION H SOOTHING RELIEF EX 1 %	P	QL(454 GM per fill retail); RX/OTC
AVEED SOLN	P	SP; PA	ANTACIDS		
<i>methyltestosterone TABS</i>	P		Antacid Combinations		
TESTOPEL PLLT	P	SP; PA	<i>alum & mag hydrox-simethicone LIQD</i>	P	QL(744 ML per 30 day(s) retail)
<i>testosterone cypionate SOLN IM 200 MG/ML</i>	P	QL(4 ML per 30 day(s) retail)	<i>alum & mag hydrox-simethicone SUSP 1200 MG/30ML-120 MG/30ML-1200 MG/30ML, 200 MG/5ML-20 MG/5ML-200 MG/5ML, 400 MG/10ML-40 MG/10ML-400 MG/10ML</i>	P	QL(744 ML per 30 day(s) retail)
<i>testosterone cypionate SOLN IM 100 MG/ML</i>	P	QL(0.2858 ML daily)	Antacids - Aluminum Salts		
<i>testosterone enanthate SOLN IM</i>	P	QL(4 ML per 30 day(s) retail)	ALUMINUM HYDROXIDE GEL SUSP	P	OTC
ANORECTAL AND RELATED PRODUCTS - Rectal Drugs to Treat Pain, Swelling and Itching			Antacids - Bicarbonate		
Intrarectal Steroids			<i>sodium bicarbonate (antacid) TABS 325 MG, 650 MG</i>	P	OTC; QL(100 EA per 30 day(s) retail)
CORTENEMA (Use <i>hydrocortisone (intrarectal)</i>)	NP		Antacids - Calcium Salts		
<i>hydrocortisone (intrarectal)</i>	P				

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Drug Name	Drug Tier	Requirements/ Limits
<i>calcium carbonate (antacid) CHEW 500 MG</i>	P	OTC
TUMS LASTING EFFECTS CHEW (Use <i>calcium carbonate (antacid)</i>)	NP	OTC
TUMS ULTRA 1000 CHEW (Use <i>calcium carbonate (antacid)</i>)	NF	
TUMS CHEW (Use <i>calcium carbonate (antacid)</i>)	NP	OTC
Antacids - Magnesium Salts		
<i>magnesium oxide TABS 400 MG</i>	P	OTC
ANTHELMINTICS - Drugs to Treat Worm Infections		
Anthelmintics		
BENZNIDAZOLE	P	SP; PA
EMVERM CHEW	P	QL(1 EA per 14 day(s) retail)
PIN RID CHEW	P	QL(3 EA per fill retail)
<i>pyrantel pamoate SUSP</i>	P	OTC; QL(60 ML per fill retail)
ANTIANGINAL AGENTS - Drugs to Treat Chest Pain		
Nitrates		
ISORDIL TITRADOSE TABS 5 MG (Use <i>isosorbide dinitrate</i>)	NP	
<i>isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG</i>	P	
<i>isosorbide mononitrate TABS</i>	P	QL(2 EA daily)
ISOSORBIDE MONONITRATE TABS	P	QL(2 EA daily)
<i>isosorbide mononitrate TB24</i>	P	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
NITRO-BID OINT	P	
NITRO-DUR PT24 (Use <i>nitroglycerin</i>)	NP	
<i>nitroglycerin CPCR</i>	P	
<i>nitroglycerin PT24</i>	P	
<i>nitroglycerin SUBL</i>	P	
NITROSTAT SUBL (Use <i>nitroglycerin</i>)	NP	
ANTIANXIETY AGENTS - Drugs to Treat Anxiety		
Antianxiety Agents - Misc.		
<i>buspirone hcl 7.5 MG, 30 MG</i>	P	QL(3 EA daily)
<i>buspirone hcl 5 MG, 10 MG</i>	P	QL(6 EA daily)
<i>buspirone hcl 15 MG</i>	P	QL(4 EA daily)
<i>hydroxyzine hcl SYRP</i>	P	
<i>hydroxyzine hcl TABS</i>	P	
<i>hydroxyzine pamoate CAPS</i>	P	
<i>meprobamate</i>	P	
VISTARIL CAPS (Use <i>hydroxyzine pamoate</i>)	NP	
Benzodiazepines		
<i>alprazolam TABS</i>	P	QL(3 EA daily); AL(At least 18 yrs old)
ATIVAN TABS (Use <i>lorazepam</i>)	NP	QL(3 EA daily); AL(At least 18 yrs old)
<i>chlordiazepoxide hcl CAPS</i>	P	QL(4 EA daily); AL(At least 18 yrs old)
<i>clorazepate dipotassium TABS</i>	P	QL(3 EA daily); AL(At least 18 yrs old)
<i>diazepam SOLN PO 5 MG/5ML</i>	P	AL (6 months to 12 years old)
<i>diazepam TABS</i>	P	QL(4 EA daily); AL(At least 18 yrs old)

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<i>lorazepam TABS</i>	P	QL(3 EA daily); AL(At least 18 yrs old)
<i>oxazepam CAPS</i>	P	QL(4 EA daily); AL(At least 18 yrs old)
VALIUM TABS (<i>Use diazepam</i>)	NP	QL(4 EA daily); AL(At least 18 yrs old)
XANAX TABS (<i>Use alprazolam</i>)	NP	QL(3 EA daily); AL(At least 18 yrs old)
ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms		
Antiarrhythmics Type I-A		
<i>disopyramide phosphate CAPS</i>	P	
NORPACE CR CP12 150 MG	P	
NORPACE CAPS (<i>Use disopyramide phosphate</i>)	P	
<i>quinidine gluconate TBCR</i>	P	
<i>quinidine sulfate TABS</i>	P	
Antiarrhythmics Type I-B		
<i>mexiletine hcl</i>	P	
Antiarrhythmics Type I-C		
<i>flecainide acetate</i>	P	
<i>propafenone hcl TABS</i>	P	
Antiarrhythmics Type III		
<i>amiodarone hcl TABS 200 MG</i>	P	
<i>dofetilide</i>	P	
TIKOSYN (<i>Use dofetilide</i>)	NP	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions		
Antiasthmatic - Monoclonal Antibodies		
CINQAIR	P	SP; PA
TEZSPIRE SOSY	P	SP; PA
XOLAIR SOAJ	P	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
XOLAIR SOLR	P	SP; PA
XOLAIR SOSY	P	SP; PA
Anti-Inflammatory Agents		
<i>cromolyn sodium NEBU</i>	P	QL(8 ML daily)
Bronchodilators - Anticholinergics		
ATROVENT HFA	P	QL(25.8 GM per fill retail)
INCRUSE ELLIPTA	P	QL(1 EA daily)
<i>ipratropium bromide SOLN 0.02 %</i>	P	QL(375 ML per 20 day(s) retail)
SPIRIVA HANDIHALER CAPS (<i>Use tiotropium bromide monohydrate</i>)	NP	
<i>tiotropium bromide monohydrate CAPS</i>	P	
TUDORZA PRESSAIR	P	QL(1 EA per 30 day(s) retail)
Leukotriene Modulators		
<i>montelukast sodium CHEW</i>	P	QL(1 EA daily)
<i>montelukast sodium PACK</i>	P	QL(1 EA daily)
<i>montelukast sodium TABS</i>	P	QL(1 EA daily)
SINGULAIR CHEW (<i>Use montelukast sodium</i>)	NP	QL(1 EA daily)
SINGULAIR PACK (<i>Use montelukast sodium</i>)	NP	QL(1 EA daily)
SINGULAIR TABS (<i>Use montelukast sodium</i>)	NP	QL(1 EA daily)
Selective Phosphodiesterase 4 (PDE4) Inhibitors		
DALIRESP (<i>Use roflumilast</i>)	NP	QL(1 EA daily)
<i>roflumilast</i>	P	QL(1 EA daily)
Steroid Inhalants		
ARNUITY ELLIPTA	P	QL(1 EA daily)
ASMANEX HFA AERO	P	QL(0.44 GM daily)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>budesonide (inhalation) SUSP</i>	P	QL(120 ML per fill retail); AL(At least 1 yrs old - Up to 8 yrs old)	<i>albuterol sulfate AERS</i>	P	QL(18 GM per fill retail; 36 GM per 30 day(s) retail)
FLOVENT DISKUS AEPB (Use <i>fluticasone propionate (inhalation)</i>)	NP		<i>albuterol sulfate NEBU 0.083 %</i>	P	QL(12.5 ML daily)
FLOVENT DISKUS AEPB	NP		<i>albuterol sulfate NEBU 0.63 MG/3ML, 1.25 MG/3ML</i>	P	QL(375 ML per 30 day(s) retail)
FLOVENT HFA (Use <i>fluticasone propionate hfa</i>)	NP		<i>albuterol sulfate NEBU</i>	P	
<i>fluticasone propionate (inhalation) AEPB</i>	P		ALBUTEROL SULFATE NEBU	P	
<i>fluticasone propionate hfa 110 MCG/ACT, 220 MCG/ACT</i>	P	QL(12 GM per fill retail); AL(Up to 12 yrs old)	<i>albuterol sulfate SYRP</i>	P	
<i>fluticasone propionate hfa 44 MCG/ACT</i>	P	QL(10.6 GM per fill retail); AL(Up to 12 yrs old)	<i>albuterol sulfate TABS</i>	P	
PULMICORT SUSP (Use <i>budesonide (inhalation)</i>)	NP	QL(120 ML per fill retail); AL(At least 1 yrs old - Up to 8 yrs old)	<i>budesonide-formoterol fumarate dihydrate 80 MCG/ACT-4.5 MCG/ACT</i>	P	QL(10.2 GM per fill retail)
QVAR REDHALER 80 MCG/ACT	P	QL(0.72 GM daily)	<i>budesonide-formoterol fumarate dihydrate</i>	P	QL(0.367 GM daily)
QVAR REDHALER 40 MCG/ACT	P	QL(0.36 GM daily)	<i>budesonide-formoterol fumarate dihydrate 160 MCG/ACT-4.5 MCG/ACT</i>	P	QL(11 GM per fill retail)
Sympathomimetics			COMBIVENT RESPIMAT AERS	P	QL(0.14 GM daily)
ADVAIR DISKUS AEPB (Use <i>fluticasone-salmeterol</i>)	NP	QL(2 EA daily)	<i>fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT</i>	P	QL(2 EA daily)
<i>albuterol sulfate AERS</i>	NP		<i>ipratropium-albuterol SOLN</i>	P	QL(12 ML daily)
<i>albuterol sulfate AERS</i>	P	QL(6.7 GM per fill retail; 13.4 GM per 30 day(s) retail)	<i>levalbuterol tartrate</i>	P	QL(0.5 GM daily)
<i>albuterol sulfate AERS</i>	P	QL(8.5 GM per fill retail; 17 GM per 30 day(s) retail)	PROAIR RESPICLICK AEPB	P	QL(1 EA per fill retail; 2 EA per 30 day(s) retail); AL(At least 4 yrs old - Up to 18 yrs old)
<i>albuterol sulfate AERS</i>	NP		PROVENTIL HFA AERS (Use <i>albuterol sulfate</i>)	NP	
			SEREVENT DISKUS	P	QL(60 EA per fill retail)

Drug Name	Drug Tier	Requirements/ Limits
SYMBICORT (Use budesonide-formoterol fumarate dihydrate)	NP	
terbutaline sulfate TABS	P	
VENTOLIN HFA AERS (Use albuterol sulfate)	NP	
XOPENEX HFA (Use levalbuterol tartrate)	NP	QL(0.5 GM daily)
Xanthines		
THEO-24 CP24	P	
theophylline ELIX	P	
theophylline SOLN	P	QL(475 ML per fill retail)
theophylline TB12	P	
theophylline TB24	P	
ANTICOAGULANTS - Blood Thinners		
Coumarin Anticoagulants		
warfarin sodium TABS	P	
Direct Factor Xa Inhibitors		
ELIQUIS DVT/PE STARTER PACK TBPK	P	QL(2.47 EA daily)
ELIQUIS TABS	P	QL(2 EA daily)
Heparins And Heparinoid-Like Agents		
ARIXTRA (Use fondaparinux sodium)	NP	SP; PA
enoxaparin sodium SOLN IJ 300 MG/3ML	P	SP
enoxaparin sodium SOSY	P	SP; PA
fondaparinux sodium	P	SP; PA
FRAGMIN SOLN 10000 UNIT/4ML, 95000 UNIT/3.8ML	P	SP; PA
FRAGMIN SOSY	P	SP; PA
heparin sodium (porcine) SOLN IJ 1000 UNIT/ML	NP	

Drug Name	Drug Tier	Requirements/ Limits
heparin sodium (porcine) SOLN IJ 1000 UNIT/ML, 5000 UNIT/0.5ML, 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	P	
LOVENOX SOLN IJ 300 MG/3ML (Use enoxaparin sodium)	NP	SP
LOVENOX SOSY (Use enoxaparin sodium)	NP	SP; PA
Thrombin Inhibitors		
dabigatran etexilate mesylate CAPS	P	
PRADAXA CAPS (Use dabigatran etexilate mesylate)	NP	
ANTICONVULSANTS - Drugs to Treat Seizures		
Anticonvulsants - Benzodiazepines		
clonazepam TABS	P	QL(3 EA daily); AL(At least 18 yrs old)
DIASTAT ACUDIAL GEL 20 MG (Use diazepam (anticonvulsant))	NP	QL(1 EA per fill retail); AL(At least 2 yrs old)
DIASTAT ACUDIAL GEL 10 MG (Use diazepam (anticonvulsant))	P	QL(1 EA per fill retail); AL(At least 2 yrs old)
DIASTAT PEDIATRIC GEL (Use diazepam (anticonvulsant))	NP	QL(1 EA per fill retail); AL(At least 2 yrs old)
diazepam (anticonvulsant) GEL	P	QL(1 EA per fill retail); AL(At least 2 yrs old)
diazepam (anticonvulsant) GEL 10 MG	NP	
KLONOPIN TABS (Use clonazepam)	NP	QL(3 EA daily); AL(At least 18 yrs old)
NAYZILAM	P	QL(10 EA per 30 day(s) retail); PA
VALTOCO 10 MG DOSE LIQD	P	QL(10 EA per 30 day(s) retail); PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
VALTOCO 15 MG DOSE LQPK 7.5 MG/0.1ML	P	QL(10 EA per 30 day(s) retail); PA	KEPPRA TABS 250 MG, 750 MG (<i>Use levetiracetam</i>)	NP	QL(4 EA daily)
VALTOCO 20 MG DOSE LQPK 10 MG/0.1ML	P	QL(10 EA per 30 day(s) retail); PA	KEPPRA TABS 1000 MG (<i>Use levetiracetam</i>)	NP	
VALTOCO 5 MG DOSE LIQD	P	QL(10 EA per 30 day(s) retail); PA	LAMICTAL XR TB24 (<i>Use lamotrigine</i>)	NP	Use lamotrigine IR; ST
Anticonvulsants - Misc.			LAMICTAL CHEW (<i>Use lamotrigine</i>)	NP	
BANZEL SUSP (<i>Use rufinamide</i>)	NP	SP; PA	LAMICTAL TABS (<i>Use lamotrigine</i>)	NP	
BANZEL TABS (<i>Use rufinamide</i>)	NP	SP; PA	<i>lamotrigine CHEW</i>	P	
BRIVIACT SOLN IV 50 MG/5ML	P	SP; PA	<i>lamotrigine TABS</i>	P	
<i>carbamazepine CHEW 100 MG</i>	P		<i>lamotrigine TB24</i>	P	Use lamotrigine IR; ST
<i>carbamazepine SUSP</i>	P		<i>levetiracetam SOLN PO 100 MG/ML, 500 MG/5ML</i>	P	QL(16 ML daily)
<i>carbamazepine TABS</i>	P		<i>levetiracetam TABS 1000 MG</i>	P	
<i>carbamazepine TB12</i>	P		<i>levetiracetam TABS 250 MG, 750 MG</i>	P	QL(4 EA daily)
DIACOMIT CAPS 250 MG	P	QL(12 EA daily); SP; PA	<i>levetiracetam TABS 500 MG</i>	P	QL(6 EA daily)
DIACOMIT CAPS 500 MG	P	QL(6 EA daily); SP; PA	<i>levetiracetam TB24</i>	P	Use levetiracetam IR; ST
DIACOMIT PACK 250 MG	P	QL(12 EA daily); SP; PA	MYSOLINE (<i>Use primidone</i>)	NP	
DIACOMIT PACK 500 MG	P	QL(6 EA daily); SP; PA	NEURONTIN CAPS (<i>Use gabapentin</i>)	NP	QL(9 EA daily)
EPIDIOLEX	P	SP; PA	NEURONTIN SOLN (<i>Use gabapentin</i>)	NP	
FINTEPLA	P	SP; PA	NEURONTIN TABS 600 MG (<i>Use gabapentin</i>)	NP	QL(6 EA daily)
<i>gabapentin CAPS</i>	P	QL(9 EA daily)	NEURONTIN TABS 800 MG (<i>Use gabapentin</i>)	NP	QL(4 EA daily)
<i>gabapentin SOLN</i>	P		<i>oxcarbazepine SUSP</i>	P	
<i>gabapentin TABS 600 MG</i>	P	QL(6 EA daily)	<i>oxcarbazepine TABS</i>	P	
<i>gabapentin TABS 800 MG</i>	P	QL(4 EA daily)	<i>primidone</i>	P	
KEPPRA XR TB24 (<i>Use levetiracetam</i>)	NP	Use levetiracetam IR; ST	<i>rufinamide SUSP</i>	P	SP; PA
KEPPRA SOLN PO 100 MG/ML (<i>Use levetiracetam</i>)	NP	QL(16 ML daily)	<i>rufinamide TABS</i>	P	SP; PA
KEPPRA TABS 500 MG (<i>Use levetiracetam</i>)	NP	QL(6 EA daily)			

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TEGRETOL SUSP (<i>Use carbamazepine</i>)	NP		GABITRIL (<i>Use tiagabine hcl</i>)	NP	
TEGRETOL TABS (<i>Use carbamazepine</i>)	NP		SABRIL PACK (<i>Use vigabatrin</i>)	NP	SP; PA
TEGRETOL-XR TB12 (<i>Use carbamazepine</i>)	NP		SABRIL TABS (<i>Use vigabatrin</i>)	NP	SP; PA
TOPAMAX SPRINKLE CPSP 25 MG (<i>Use topiramate</i>)	NP	QL(8 EA daily)	<i>tiagabine hcl</i>	P	
TOPAMAX SPRINKLE CPSP 15 MG (<i>Use topiramate</i>)	NP	QL(6 EA daily)	<i>vigabatrin PACK</i>	P	SP; PA
TOPAMAX TABS 25 MG, 50 MG (<i>Use topiramate</i>)	NP	QL(6 EA daily)	<i>vigabatrin TABS</i>	P	SP; PA
TOPAMAX TABS 200 MG (<i>Use topiramate</i>)	NP	QL(3 EA daily)	Hydantoins		
TOPAMAX TABS 100 MG (<i>Use topiramate</i>)	NP	QL(4 EA daily)	DILANTIN	P	
<i>topiramate CPSP 25 MG</i>	P	QL(8 EA daily)	DILANTIN (<i>Use phenytoin sodium extended</i>)	P	
<i>topiramate CPSP 15 MG</i>	P	QL(6 EA daily)	DILANTIN INFATABS CHEW (<i>Use phenytoin</i>)	P	
<i>topiramate TABS 200 MG</i>	P	QL(3 EA daily)	DILANTIN-125 SUSP (<i>Use phenytoin</i>)	P	
<i>topiramate TABS 25 MG, 50 MG</i>	P	QL(6 EA daily)	DILANTIN SUSP (<i>Use phenytoin</i>)	P	
<i>topiramate TABS 100 MG</i>	P	QL(4 EA daily)	<i>phenytoin sodium extended 100 MG</i>	P	
TRILEPTAL SUSP (<i>Use oxcarbazepine</i>)	NP		<i>phenytoin sodium SOLN</i>	P	
TRILEPTAL TABS (<i>Use oxcarbazepine</i>)	NP		<i>phenytoin CHEW</i>	P	
ZONEGRAN CAPS 25 MG, 100 MG (<i>Use zonisamide</i>)	NP		<i>phenytoin SUSP</i>	P	
<i>zonisamide CAPS</i>	P		Succinimides		
Carbamates			<i>ethosuximide CAPS</i>	P	
<i>felbamate SUSP</i>	P		<i>ethosuximide SOLN</i>	P	
<i>felbamate TABS</i>	P		ZARONTIN CAPS (<i>Use ethosuximide</i>)	NP	
FELBATOL SUSP (<i>Use felbamate</i>)	NP		ZARONTIN SOLN (<i>Use ethosuximide</i>)	NP	
FELBATOL TABS (<i>Use felbamate</i>)	NP		Valproic Acid		
GABA Modulators			DEPAKOTE ER TB24 500 MG (<i>Use divalproex sodium</i>)	NP	QL(7 EA daily)
			DEPAKOTE ER TB24 250 MG (<i>Use divalproex sodium</i>)	NP	QL(3 EA daily)

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DEPAKOTE SPRINKLES CSDR (Use divalproex sodium)	NP	QL(8 EA daily)	REMERON SOLTAB TBDP 45 MG (Use mirtazapine)	NP	QL(1 EA daily)
DEPAKOTE TBEC 250 MG (Use divalproex sodium)	NP	QL(3 EA daily)	REMERON SOLTAB TBDP 30 MG (Use mirtazapine)	NP	QL(1.5 EA daily)
DEPAKOTE TBEC 125 MG (Use divalproex sodium)	NP	QL(2 EA daily)	REMERON TABS 15 MG (Use mirtazapine)	NP	QL(3 EA daily)
DEPAKOTE TBEC 500 MG (Use divalproex sodium)	NP	QL(7 EA daily)	REMERON TABS 30 MG (Use mirtazapine)	NP	QL(1.5 EA daily)
divalproex sodium CSDR	P	QL(8 EA daily)	Antidepressants - Misc.		
divalproex sodium TB24 500 MG	P	QL(7 EA daily)	bupropion hcl TABS	P	QL(3 EA daily)
divalproex sodium TB24 250 MG	P	QL(3 EA daily)	bupropion hcl TB12 100 MG	P	QL(4 EA daily)
divalproex sodium TBEC 500 MG	P	QL(7 EA daily)	bupropion hcl TB12 200 MG	P	QL(2 EA daily)
divalproex sodium TBEC 250 MG	P	QL(3 EA daily)	bupropion hcl TB12 150 MG	P	QL(3 EA daily)
divalproex sodium TBEC 125 MG	P	QL(2 EA daily)	bupropion hcl TB24 150 MG	P	QL(3 EA daily)
valproate sodium SOLN PO 250 MG/5ML, 500 MG/10ML	P		bupropion hcl TB24 300 MG	P	QL(1 EA daily)
valproic acid CAPS	P		WELLBUTRIN SR TB12 200 MG (Use bupropion hcl)	NP	QL(2 EA daily)
ANTIDEPRESSANTS - Drugs to Treat Depression			WELLBUTRIN SR TB12 150 MG (Use bupropion hcl)	NP	QL(3 EA daily)
Alpha-2 Receptor Antagonists (Tetracyclics)			WELLBUTRIN SR TB12 100 MG (Use bupropion hcl)	NP	QL(4 EA daily)
mirtazapine TABS 30 MG	P	QL(1.5 EA daily)	WELLBUTRIN XL TB24 150 MG (Use bupropion hcl)	NP	QL(3 EA daily)
mirtazapine TABS 7.5 MG, 45 MG	P	QL(1 EA daily)	WELLBUTRIN XL TB24 300 MG (Use bupropion hcl)	NP	QL(1 EA daily)
mirtazapine TABS 15 MG	P	QL(3 EA daily)	GABA Receptor Modulator - Neuroactive Steroid		
mirtazapine TBDP 15 MG	P	QL(3 EA daily)	ZULRESSO	P	SP; PA
mirtazapine TBDP 30 MG	P	QL(1.5 EA daily)	Monoamine Oxidase Inhibitors (MAOIs)		
mirtazapine TBDP 45 MG	P	QL(1 EA daily)			
REMERON SOLTAB TBDP 15 MG (Use mirtazapine)	NP	QL(3 EA daily)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
NARDIL (<i>Use phenelzine sulfate</i>)	NP		<i>fluoxetine hcl CAPS 40 MG</i>	P	QL(2 EA daily); AL(At least 7 yrs old)
PARNATE (<i>Use tranylcypromine sulfate</i>)	NP		<i>fluoxetine hcl SOLN</i>	P	QL(600 ML per 30 day(s) retail); AL(Up to 6 yrs old)
<i>phenelzine sulfate</i>	P		<i>fluoxetine hcl TABS 10 MG</i>	P	QL(1 EA daily); AL(At least 7 yrs old)
<i>tranylcypromine sulfate</i>	P		<i>fluoxetine hcl TABS 20 MG</i>	P	QL(4 EA daily)
N-Methyl-D-aspartic acid (NMDA) Receptor Antagonists			<i>fluvoxamine maleate TABS 100 MG</i>	P	QL(3 EA daily)
SPRAVATO (56 MG DOSE)	P	SP; PA	<i>fluvoxamine maleate TABS 25 MG, 50 MG</i>	P	QL(2 EA daily)
SPRAVATO (84 MG DOSE)	P	SP; PA	LEXAPRO TABS 20 MG (<i>Use escitalopram oxalate</i>)	NP	QL(1 EA daily); AL(At least 12 yrs old)
Selective Serotonin Reuptake Inhibitors (SSRIs)			LEXAPRO TABS 10 MG (<i>Use escitalopram oxalate</i>)	NP	QL(2 EA daily); AL(At least 12 yrs old)
CELEXA TABS 20 MG (<i>Use citalopram hydrobromide</i>)	NP	QL(2 EA daily)	LEXAPRO TABS 5 MG (<i>Use escitalopram oxalate</i>)	NP	QL(4 EA daily); AL(At least 12 yrs old)
CELEXA TABS 10 MG (<i>Use citalopram hydrobromide</i>)	NP	QL(4 EA daily)	<i>paroxetine hcl SUSP</i>	P	QL(40 ML daily); PA
CELEXA TABS 40 MG (<i>Use citalopram hydrobromide</i>)	NP	QL(1 EA daily)	<i>paroxetine hcl TABS 30 MG, 40 MG</i>	P	QL(2 EA daily)
<i>citalopram hydrobromide SOLN</i>	P		<i>paroxetine hcl TABS 10 MG</i>	P	QL(6 EA daily)
<i>citalopram hydrobromide TABS 10 MG</i>	P	QL(4 EA daily)	<i>paroxetine hcl TABS 20 MG</i>	P	QL(3 EA daily)
<i>citalopram hydrobromide TABS 40 MG</i>	P	QL(1 EA daily)	<i>paroxetine hcl TB24</i>	P	
<i>citalopram hydrobromide TABS 20 MG</i>	P	QL(2 EA daily)	PAXIL CR TB24 (<i>Use paroxetine hcl</i>)	NP	
<i>escitalopram oxalate TABS 20 MG</i>	P	QL(1 EA daily); AL(At least 12 yrs old)	PAXIL SUSP (<i>Use paroxetine hcl</i>)	NP	QL(40 ML daily); PA
<i>escitalopram oxalate TABS 10 MG</i>	P	QL(2 EA daily); AL(At least 12 yrs old)	PAXIL TABS 10 MG (<i>Use paroxetine hcl</i>)	NP	QL(6 EA daily)
<i>escitalopram oxalate TABS 5 MG</i>	P	QL(4 EA daily); AL(At least 12 yrs old)	PAXIL TABS 20 MG (<i>Use paroxetine hcl</i>)	NP	QL(3 EA daily)
<i>fluoxetine hcl CAPS 10 MG, 20 MG</i>	P	QL(4 EA daily)	PAXIL TABS 30 MG, 40 MG (<i>Use paroxetine hcl</i>)	NP	QL(2 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PROZAC CAPS 10 MG, 20 MG (Use fluoxetine hcl)	NP	QL(4 EA daily)	EFFEXOR XR CP24 150 MG (Use venlafaxine hcl)	NP	QL(2 EA daily)
PROZAC CAPS 40 MG (Use fluoxetine hcl)	NP	QL(2 EA daily); AL(At least 7 yrs old)	EFFEXOR XR CP24 37.5 MG (Use venlafaxine hcl)	NP	QL(4 EA daily)
sertraline hcl CONC	P	QL(6 ML daily)	EFFEXOR XR CP24 75 MG (Use venlafaxine hcl)	NP	QL(5 EA daily)
sertraline hcl TABS 100 MG	P	QL(2 EA daily)	PRISTIQ 100 MG (Use desvenlafaxine succinate)	NP	QL(4 EA daily); ST
sertraline hcl TABS 25 MG, 50 MG	P	QL(4 EA daily)	PRISTIQ 25 MG, 50 MG (Use desvenlafaxine succinate)	NP	QL(1 EA daily); ST
ZOLOFT CONC (Use sertraline hcl)	NP	QL(6 ML daily)	venlafaxine hcl CP24 37.5 MG	P	QL(4 EA daily)
ZOLOFT TABS 100 MG (Use sertraline hcl)	NP	QL(2 EA daily)	venlafaxine hcl CP24 75 MG	P	QL(5 EA daily)
ZOLOFT TABS 25 MG, 50 MG (Use sertraline hcl)	NP	QL(4 EA daily)	venlafaxine hcl CP24 150 MG	P	QL(2 EA daily)
Serotonin Modulators			venlafaxine hcl TABS	P	
nefazodone hcl	P		venlafaxine hcl TB24 150 MG	P	QL(2 EA daily)
trazodone hcl TABS 300 MG	P	QL(2 EA daily)	venlafaxine hcl TB24 37.5 MG, 75 MG, 225 MG	P	QL(1 EA daily)
trazodone hcl TABS 50 MG, 100 MG, 150 MG	P		Tricyclic Agents		
TRINTELLIX	P	QL(1 EA daily); AL(At least 18 yrs old); PA	amitriptyline hcl TABS	P	
VIIBRYD TABS (Use vilazodone hcl)	NP	QL(1 EA daily); PA	amoxapine	P	
vilazodone hcl TABS	P	QL(1 EA daily); PA	ANAFRANIL 75 MG (Use clomipramine hcl)	NP	
Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)			clomipramine hcl 75 MG	P	
CYMBALTA CPEP (Use duloxetine hcl)	NP	QL(1 EA daily); AL(At least 7 yrs old)	desipramine hcl TABS 10 MG, 50 MG, 75 MG, 100 MG, 150 MG	P	
desvenlafaxine succinate 25 MG, 50 MG	P	QL(1 EA daily); ST	desipramine hcl TABS 25 MG	P	QL(2 EA daily)
desvenlafaxine succinate 100 MG	P	QL(4 EA daily); ST	doxepin hcl CAPS	P	
duloxetine hcl CPEP 20 MG, 30 MG, 60 MG	P	QL(1 EA daily); AL(At least 7 yrs old)	doxepin hcl CONC	P	
			imipramine hcl TABS	P	
			NORPRAMIN TABS 25 MG (Use desipramine hcl)	NP	QL(2 EA daily)
			NORPRAMIN TABS 10 MG (Use desipramine hcl)	NP	
			nortriptyline hcl CAPS	P	

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<i>nortriptyline hcl SOLN</i>	P	QL(20 ML daily)	XIGDUO XR (<i>Use dapagliflozin propanediol-metformin hcl</i>)	NP	
PAMELOR CAPS (<i>Use nortriptyline hcl</i>)	NP		ZITUVIMET XR TB24	NP	
ANTIDIABETICS - Drugs to Regulate Blood Sugar			ZITUVIMET TABS	NP	
Antidiabetic Combinations			Biguanides		
ACTOPLUS MET TABS 850 MG-15 MG (<i>Use pioglitazone hcl-metformin hcl</i>)	NP	QL(2 EA daily)	GLUMETZA TB24 (<i>Use metformin hcl</i>)	NF	
<i>alogliptin-metformin hcl</i>	P	QL(2 EA daily)	<i>metformin hcl TABS 850 MG, 1000 MG</i>	P	
<i>alogliptin-pioglitazone 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG</i>	P		<i>metformin hcl TABS 500 MG</i>	P	QL(4 EA daily)
<i>dapagliflozin propanediol-metformin hcl 1000 MG-10 MG</i>	P	QL(1 EA daily)	<i>metformin hcl TB24 500 MG</i>	P	QL(4 EA daily)
<i>dapagliflozin propanediol-metformin hcl 1000 MG-5 MG</i>	P	QL(2 EA daily)	<i>metformin hcl TB24 750 MG</i>	P	QL(3 EA daily)
<i>glipizide-metformin hcl</i>	P		Diabetic Other		
<i>glyburide-metformin</i>	P		BD GLUCOSE CHEW	P	OTC; QL(50 EA per 30 day(s) retail)
KAZANO (<i>Use alogliptin-metformin hcl</i>)	NP		CVS GLUCOSE	P	QL(50 EA per 30 day(s) retail)
KOMBIGLYZE XR (<i>Use saxagliptin-metformin hcl</i>)	NP	QL(1 EA daily)	CVS GLUCOSE CHEW	P	OTC; QL(50 EA per 30 day(s) retail)
OSENI 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG (<i>Use alogliptin-pioglitazone</i>)	NP		CVS SOFT GLUCOSE CHEW	P	OTC; QL(50 EA per 30 day(s) retail)
<i>pioglitazone hcl-metformin hcl TABS</i>	P	QL(2 EA daily)	DEX4	P	QL(50 EA per 30 day(s) retail)
<i>saxagliptin-metformin hcl</i>	P	QL(1 EA daily)	DEX4 NATURALS	P	QL(50 EA per 30 day(s) retail)
SITAGLIPT BASE-METFORM HCL ER TB24	P	QL(2 EA daily)	<i>glucagon (rdna)</i>	P	QL(1 EA per fill retail)
SITAGLIPT BASE-METFORM HCL ER TB24	P	QL(1 EA daily)	GLUCAGON EMERGENCY (<i>Use glucagon (rdna)</i>)	NP	QL(1 EA per fill retail)
SITAGLIPTIN BASE-METFORMIN HCL TABS	P	QL(2 EA daily)	GLUCO TO GO CHEW	P	OTC; QL(50 EA per 30 day(s) retail)
SOLIQUA	P	QL(0.6 ML daily); PA	GLUCOSE 6 MG-4 GM	P	QL(50 EA per 30 day(s) retail)
			GLUCOSE CHEW	P	OTC; QL(50 EA per 30 day(s) retail)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
GNP GLUCOSE CHEW	P	OTC; QL(50 EA per 30 day(s) retail)	<i>exenatide SOPN 5 MCG/0.02ML</i>	P	QL(0.04 ML daily); AL(At least 18 yrs old)
HY-VEE GLUCOSE	P	QL(50 EA per 30 day(s) retail)	<i>exenatide SOPN 10 MCG/0.04ML</i>	P	QL(0.08 ML daily); AL(At least 18 yrs old)
KROGER GLUCOSE	P	QL(50 EA per 30 day(s) retail)	<i>liraglutide</i>	P	QL(0.3 ML daily); AL(At least 10 yrs old)
MEIJER GLUCOSE	P	QL(50 EA per 30 day(s) retail)	TRULICITY	P	QL(2 ML per 28 day(s) retail); AL(At least 10 yrs old); PA
PX GLUCOSE	P	QL(50 EA per 30 day(s) retail)	VICTOZA (<i>Use liraglutide</i>)	NP	QL(0.3 ML daily); AL(At least 10 yrs old)
RA GLUCOSE	P	QL(50 EA per 30 day(s) retail)	Insulin		
RELION GLUCOSE	P	QL(50 EA per 30 day(s) retail)	ADMELOG SOLOSTAR SOPN	NP	
TGT GLUCOSE	P	QL(50 EA per 30 day(s) retail)	ADMELOG SOLN IJ	NP	
TRUEPLUS GLUCOSE ON THE GO CHEW	P	OTC; QL(50 EA per 30 day(s) retail)	HUMALOG KWIKPEN SOPN 100 UNIT/ML	NP	
TRUEPLUS GLUCOSE CHEW	P	OTC; QL(50 EA per 30 day(s) retail)	HUMALOG SOLN IJ	NP	
WALGREENS GLUCOSE	P	QL(50 EA per 30 day(s) retail)	HUMULIN 70/30 KWIKPEN SUPN	P	OTC; QL(1 ML daily)
WALGREENS GLUCOSE CHEW	P	OTC; QL(50 EA per 30 day(s) retail)	HUMULIN 70/30 SUSP	P	OTC; QL(40 ML per 30 day(s) retail)
Dipeptidyl Peptidase-4 (DPP-4) Inhibitors			HUMULIN N KWIKPEN SUPN	P	OTC; QL(1 ML daily)
<i>alogliptin benzoate</i>	P		HUMULIN N SUSP	P	QL(40 ML per 30 day(s) retail)
NESINA (<i>Use alogliptin benzoate</i>)	NP		HUMULIN R SOLN IJ	P	OTC; QL(40 ML per 30 day(s) retail)
ONGLYZA (<i>Use saxagliptin hcl</i>)	NP	QL(1 EA daily)	INSULIN GLARGINE-YFGN SOLN	P	QL(1 ML daily)
<i>saxagliptin hcl</i>	P	QL(1 EA daily)	INSULIN GLARGINE-YFGN SOPN	P	QL(1 ML daily)
SITAGLIPTIN	P	QL(1 EA daily)	INSULIN LISPRO (1 UNIT DIAL) SOPN	P	QL(1.34 ML daily)
ZITUVIO	NP				
Incretin Mimetic Agents					
BYETTA 10 MCG PEN SOPN 10 MCG/0.04ML (<i>Use exenatide</i>)	NP	QL(0.08 ML daily); AL(At least 18 yrs old)			
BYETTA 5 MCG PEN SOPN 5 MCG/0.02ML (<i>Use exenatide</i>)	NP	QL(0.04 ML daily); AL(At least 18 yrs old)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
INSULIN LISPRO JUNIOR KWIKPEN SOPN	P		Sulfonylureas		
INSULIN LISPRO PROT & LISPRO SUPN	P	QL(1 ML daily)	AMARYL 1 MG, 2 MG (Use glimepiride)	NP	QL(4 EA daily)
INSULIN LISPRO SOLN IJ	P	QL(40 ML per 30 day(s) retail)	AMARYL 4 MG (Use glimepiride)	NP	QL(2 EA daily)
NOVOLIN 70/30 FLEXPEN RELION SUPN	NP		glimepiride 4 MG	P	QL(2 EA daily)
NOVOLIN 70/30 FLEXPEN SUPN	P	OTC; QL(1 ML daily)	glimepiride 1 MG, 2 MG	P	QL(4 EA daily)
NOVOLIN 70/30 RELION SUSP	NP		glipizide TABS	P	
NOVOLIN 70/30 SUSP	P	OTC; QL(40 ML per 30 day(s) retail)	glipizide TB24	P	
NOVOLIN N FLEXPEN RELION SUPN	NP		GLUCOTROL XL TB24 (Use glipizide)	NP	
NOVOLIN N FLEXPEN SUPN	P	OTC; QL(1 ML daily)	glyburide micronized 1.5 MG, 3 MG, 6 MG	P	
NOVOLIN N RELION SUSP	NP		glyburide TABS	P	
NOVOLIN N SUSP	P	QL(40 ML per 30 day(s) retail)	GLYNASE (Use glyburide micronized)	NP	
NOVOLIN R RELION SOLN IJ	NP		ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea		
NOVOLIN R SOLN IJ	P	OTC; QL(40 ML per 30 day(s) retail)	Antidiarrheal/Probiotic Agents - Misc.		
SEMGLEE (YFGN) SOLN	NP		bismuth subsalicylate CHEW 262 MG	P	OTC
SEMGLEE (YFGN) SOPN	NP		bismuth subsalicylate SUSP 525 MG/15ML, 1050 MG/30ML	P	OTC
Insulin Sensitizing Agents			PEPTO-BISMOL MAX STRENGTH SUSP (Use bismuth subsalicylate)	NP	OTC
ACTOS (Use pioglitazone hcl)	NP	QL(1 EA daily)	PEPTO-BISMOL TO-GO CHEW (Use bismuth subsalicylate)	NP	OTC
pioglitazone hcl	P	QL(1 EA daily)	PEPTO-BISMOL CHEW (Use bismuth subsalicylate)	NP	OTC
Meglitinide Analogues			Antiperistaltic Agents		
nateglinide	P	QL(3 EA daily)	diphenoxylate w/ atropine LIQD	P	
Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors			diphenoxylate w/ atropine TABS	P	
dapagliflozin propanediol	P	QL(1 EA daily)	IMODIUM A-D CAPS (Use loperamide hcl)	NP	OTC; QL(8 EA daily); RX/OTC
FARXIGA (Use dapagliflozin propanediol)	NP				

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IMODIUM A-D TABS (<i>Use loperamide hcl</i>)	NP	OTC; QL(8 EA daily)	<i>naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML</i>	P	QL(2 ML per 90 day(s) retail)
LOMOTIL TABS (<i>Use diphenoxylate w/ atropine</i>)	NP		<i>naloxone hcl SOSY 2 MG/2ML</i>	P	QL(4 ML per 90 day(s) retail)
<i>loperamide hcl CAPS</i>	P	OTC; QL(8 EA daily); RX/OTC	<i>naltrexone hcl</i>	P	
<i>loperamide hcl TABS</i>	P	OTC; QL(8 EA daily)	NARCAN LIQD (<i>Use naloxone hcl</i>)	NP	QL(4 EA per 90 day(s) retail); RX/OTC
ANTIDOTES AND SPECIFIC ANTAGONISTS			VIVITROL	P	SP
Antidotes - Chelating Agents			ANTIEMETICS - Drugs to Treat Nausea and Vomiting		
CHEMET	P		5-HT3 Receptor Antagonists		
<i>deferasirox PACK</i>	P	SP; PA	<i>ondansetron hcl SOLN PO 4 MG/5ML</i>	P	QL(50 ML per 30 day(s) retail)
<i>deferasirox TABS</i>	P	SP; PA	<i>ondansetron hcl TABS 24 MG</i>	P	QL(1 EA per 14 day(s) retail)
<i>deferasirox TBSO</i>	P	SP; PA	<i>ondansetron hcl TABS 4 MG, 8 MG</i>	P	QL(2 EA daily)
<i>deferiprone TABS</i>	P	SP; PA	<i>ondansetron TBDP 16 MG</i>	P	
EXJADE TBSO (<i>Use deferasirox</i>)	NP	SP; PA	<i>ondansetron TBDP 4 MG, 8 MG</i>	P	QL(2 EA daily)
FERRIPROX TWICE-A-DAY TABS	P	SP; PA	Antiemetics - Anticholinergic		
FERRIPROX SOLN	P	SP; PA	ANTIVERT CHEW (<i>Use meclizine hcl</i>)	NP	OTC; RX/OTC
FERRIPROX TABS (<i>Use deferiprone</i>)	NP	SP; PA	<i>dimenhydrinate TABS</i>	P	OTC; QL(24 EA per fill retail)
JADENU SPRINKLE PACK (<i>Use deferasirox</i>)	NP	SP; PA	DRAMAMINE CHEW	P	OTC; QL(24 EA per fill retail)
JADENU TABS (<i>Use deferasirox</i>)	NP	SP; PA	DRAMAMINE TABS (<i>Use dimenhydrinate</i>)	NP	OTC; QL(24 EA per fill retail)
Antidotes and Specific Antagonists			<i>meclizine hcl CHEW</i>	P	OTC; RX/OTC
ANDEXXA 200 MG	P	SP; PA	<i>meclizine hcl TABS 12.5 MG, 25 MG</i>	P	RX/OTC
BRIDION SOLN	P	PA	ANTIFUNGALS - Drugs to Treat Fungal Infections		
<i>deferoxamine mesylate</i>	P	SP; PA	Antifungals		
DESFERAL 500 MG (<i>Use deferoxamine mesylate</i>)	NP	SP; PA	<i>griseofulvin microsize SUSP</i>	P	
SM IPECAC SYRUP	P				
VISTOGARD	P				
Opioid Antagonists					
<i>naloxone hcl LIQD</i>	P	QL(4 EA per 90 day(s) retail); RX/OTC			
<i>naloxone hcl SOCT</i>	P	QL(2 ML per 90 day(s) retail)			

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<i>griseofulvin microsize TABS</i>	P		BENADRYL ALLERGY CHILDRENS LIQD (<i>Use diphenhydramine hcl</i>)	NP	OTC; QL(240 ML per fill retail)
<i>griseofulvin ultramicrosize</i>	P		BENADRYL ALLERGY EXTRA STR TABS	P	QL(4 EA daily)
<i>nystatin TABS</i>	P	QL(6 EA daily)	BENADRYL ALLERGY ULTRATABS TABS (<i>Use diphenhydramine hcl</i>)	NP	OTC; QL(4 EA daily)
<i>terbinafine hcl TABS</i>	P	QL(90 EA per 120 day(s) retail)	BENADRYL ALLERGY CAPS (<i>Use diphenhydramine hcl</i>)	NP	QL(4 EA daily)
Imidazole-Related Antifungals			BENADRYL ALLERGY TABS (<i>Use diphenhydramine hcl</i>)	NP	OTC; QL(4 EA daily)
<i>DIFLUCAN SUSR (Use fluconazole)</i>	NP	QL(70 ML per fill retail)	<i>clemastine fumarate TABS 1.34 MG</i>	P	OTC; QL(2 EA daily)
<i>DIFLUCAN TABS 100 MG, 200 MG (Use fluconazole)</i>	NP		DAYHIST ALLERGY 12 HOUR RELIEF TABS	P	OTC; QL(2 EA daily)
<i>DIFLUCAN TABS 150 MG (Use fluconazole)</i>	NP	QL(2 EA per fill retail)	<i>diphenhydramine hcl CAPS</i>	P	QL(4 EA daily)
<i>fluconazole SUSR</i>	P	QL(70 ML per fill retail)	<i>diphenhydramine hcl ELIX 12.5 MG/5ML</i>	P	QL(240 ML per fill retail)
<i>fluconazole TABS 150 MG</i>	P	QL(2 EA per fill retail)	<i>diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML</i>	P	OTC; QL(240 ML per fill retail)
<i>fluconazole TABS 100 MG, 200 MG</i>	P		<i>diphenhydramine hcl TABS 25 MG</i>	P	OTC; QL(4 EA daily)
<i>fluconazole TABS 50 MG</i>	P	QL(3 EA per 14 day(s) retail)	Antihistamines - Non-Sedating		
<i>itraconazole CAPS</i>	P	QL(1 EA daily); PA	ALLEGRA ALLERGY TABS 180 MG (<i>Use fexofenadine hcl</i>)	NP	QL(1 EA daily)
<i>SPORANOX CAPS (Use itraconazole)</i>	NP	QL(1 EA daily); PA	ALLEGRA ALLERGY TABS 60 MG (<i>Use fexofenadine hcl</i>)	NP	QL(2 EA daily)
ANTI-HISTAMINES - Drugs to Treat Allergies			<i>cetirizine hcl CHEW</i>	P	QL(1 EA daily)
Antihistamines - Alkylamines			<i>cetirizine hcl SOLN PO</i>	P	QL(240 ML per fill retail); RX/OTC
<i>chlorpheniramine maleate SYRP</i>	P	OTC	<i>cetirizine hcl SYRP PO</i>	P	QL(240 ML per fill retail); RX/OTC
<i>chlorpheniramine maleate TABS</i>	P	OTC; QL(120 EA per fill retail)	<i>cetirizine hcl TABS</i>	P	QL(1 EA daily)
<i>CHLOR-TRIMETON SYRP (Use chlorpheniramine maleate)</i>	NP	OTC			
<i>CHLOR-TRIMETON TABS (Use chlorpheniramine maleate)</i>	NP	OTC; QL(120 EA per fill retail)			
Antihistamines - Ethanolamines					

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CLARITIN ALLERGY CHILDRENS SOLN (Use loratadine)	NP	OTC; QL(240 ML per fill retail)	<i>promethazine hcl SOLN PO 6.25 MG/5ML, 12.5 MG/10ML</i>	P	AL(At least 2 yrs old)
CLARITIN REDITABS JUNIORS TBDP (Use loratadine)	NP	OTC; QL(1 EA daily)	<i>promethazine hcl SUPP</i>	P	QL(12 EA per fill retail); AL(At least 2 yrs old)
CLARITIN REDITABS TBDP 5 MG (Use loratadine)	NF		<i>promethazine hcl TABS</i>	P	AL(At least 2 yrs old)
CLARITIN REDITABS TBDP 10 MG (Use loratadine)	NP	OTC; QL(1 EA daily)	Antihistamines - Piperidines		
CLARITIN SOLN (Use loratadine)	NP	OTC; QL(240 ML per fill retail)	<i>ciproheptadine hcl SYRP</i>	P	
CLARITIN TABS (Use loratadine)	NP	OTC; QL(1 EA daily)	<i>ciproheptadine hcl TABS</i>	P	
<i>fexofenadine hcl TABS 180 MG</i>	P	QL(1 EA daily)	ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol		
<i>fexofenadine hcl TABS 60 MG</i>	P	QL(2 EA daily)	Angiotensin-like Protein Inhibitors		
<i>levocetirizine dihydrochloride TABS</i>	P	RX/OTC	EVKEEZA	P	SP; PA
<i>loratadine SOLN</i>	P	OTC; QL(240 ML per fill retail)	Antihyperlipidemics - Combinations		
<i>loratadine TABS</i>	P	OTC; QL(1 EA daily)	<i>ezetimibe-simvastatin</i>	P	QL(1 EA daily); ST
<i>loratadine TBDP 10 MG</i>	P	OTC; QL(1 EA daily)	VYTORIN (Use <i>ezetimibe-simvastatin</i>)	NP	QL(1 EA daily); ST
XYZAL ALLERGY 24HR TABS (Use <i>levocetirizine dihydrochloride</i>)	NP	RX/OTC	Bile Acid Sequestrants		
ZYRTEC ALLERGY TABS (Use <i>cetirizine hcl</i>)	NP	QL(1 EA daily)	<i>cholestyramine light PACK</i>	P	
ZYRTEC CHILDRENS ALLERGY CHEW 10 MG (Use <i>cetirizine hcl</i>)	NP	QL(1 EA daily)	<i>cholestyramine light POWD</i>	P	
ZYRTEC CHILDRENS ALLERGY SOLN PO (Use <i>cetirizine hcl</i>)	NP	QL(240 ML per fill retail); RX/OTC	<i>cholestyramine PACK</i>	P	
ZYRTEC CHEW 10 MG (Use <i>cetirizine hcl</i>)	NP	QL(1 EA daily)	<i>cholestyramine POWD</i>	P	
Antihistamines - Phenothiazines			COLESTID FLAVORED GRAN (Use <i>colestipol hcl</i>)	NP	
			COLESTID GRAN (Use <i>colestipol hcl</i>)	NP	
			COLESTID TABS (Use <i>colestipol hcl</i>)	NP	
			<i>colestipol hcl GRAN</i>	P	
			<i>colestipol hcl TABS</i>	P	
			QUESTRAN LIGHT POWD (Use <i>cholestyramine light</i>)	NP	
			QUESTRAN PACK (Use <i>cholestyramine</i>)	NP	

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QUESTRAN POWD (<i>Use cholestyramine</i>)	NP	
Fibric Acid Derivatives		
ANTARA 90 MG (<i>Use fenofibrate micronized</i>)	NF	
<i>fenofibrate micronized 134 MG, 200 MG</i>	P	QL(1 EA daily)
<i>fenofibrate micronized 67 MG</i>	P	QL(2 EA daily)
<i>fenofibrate TABS 54 MG</i>	P	QL(3 EA daily)
<i>fenofibrate TABS 160 MG</i>	P	QL(1 EA daily)
FENOGLIDE TABS (<i>Use fenofibrate</i>)	NF	
<i>gemfibrozil TABS</i>	P	QL(2 EA daily)
LOPID TABS (<i>Use gemfibrozil</i>)	NP	QL(2 EA daily)
HMG CoA Reductase Inhibitors		
<i>atorvastatin calcium TABS</i>	P	QL(1 EA daily)
CRESTOR TABS (<i>Use rosuvastatin calcium</i>)	NP	Try simvastatin or atorvastatin; QL(1 EA daily); ST
LIPITOR TABS (<i>Use atorvastatin calcium</i>)	NP	QL(1 EA daily)
<i>lovastatin TABS 10 MG, 20 MG</i>	P	QL(1 EA daily)
<i>lovastatin TABS 40 MG</i>	P	QL(2 EA daily)
<i>pravastatin sodium</i>	P	QL(1 EA daily)
<i>rosuvastatin calcium TABS</i>	P	Try simvastatin or atorvastatin; QL(1 EA daily); ST
<i>simvastatin TABS 5 MG, 10 MG, 20 MG, 40 MG</i>	P	QL(1 EA daily)
ZOCOR TABS 10 MG, 20 MG, 40 MG (<i>Use simvastatin</i>)	NP	QL(1 EA daily)
Intestinal Cholesterol Absorption Inhibitors		
<i>ezetimibe</i>	P	ST
ZETIA (<i>Use ezetimibe</i>)	NP	ST

Drug Name	Drug Tier	Requirements/ Limits
Microsomal Triglyceride Transfer Protein (MTP) Inhibitors		
JUXTAPID 5 MG, 10 MG, 20 MG, 30 MG	P	SP; PA
Nicotinic Acid Derivatives		
<i>niacin (antihyperlipidemic) TABS</i>	P	
<i>niacin (antihyperlipidemic) TBCR</i>	P	
Proprotein Convertase Subtilisin/Kexin Type 9 Inhibitors		
LEQVIO	P	SP; PA
PRALUENT SOAJ	P	SP; PA
REPATHA PUSHTRONEX SYSTEM SOCT	P	SP; PA
REPATHA SURECLICK SOAJ	P	SP; PA
REPATHA SOSY	P	SP; PA
ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure		
ACE Inhibitors		
ACCUPRIL (<i>Use quinapril hcl</i>)	NP	
ALTACE CAPS 1.25 MG, 2.5 MG, 5 MG, 10 MG (<i>Use ramipril</i>)	NP	QL(2 EA daily)
<i>benazepril hcl 40 MG</i>	P	QL(2 EA daily)
<i>benazepril hcl 5 MG, 10 MG, 20 MG</i>	P	QL(1 EA daily)
<i>captopril</i>	P	QL(3 EA daily)
<i>enalapril maleate TABS</i>	P	QL(2 EA daily)
<i>fosinopril sodium</i>	P	QL(1 EA daily)
<i>lisinopril TABS 5 MG, 10 MG, 20 MG, 30 MG, 40 MG</i>	P	QL(2 EA daily)
<i>lisinopril TABS 2.5 MG</i>	P	QL(1 EA daily)
LOTENSIN 40 MG (<i>Use benazepril hcl</i>)	NP	QL(2 EA daily)

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LOTENSIN 10 MG, 20 MG (Use <i>benazepril hcl</i>)	NP	QL(1 EA daily)
<i>quinapril hcl</i>	P	
<i>ramipril CAPS</i>	P	QL(2 EA daily)
<i>trandolapril 4 MG</i>	P	QL(2 EA daily)
<i>trandolapril 1 MG, 2 MG</i>	P	QL(1 EA daily)
VASOTEC TABS (Use <i>enalapril maleate</i>)	NP	QL(2 EA daily)
ZESTRIL TABS 2.5 MG (Use <i>lisinopril</i>)	NP	QL(1 EA daily)
ZESTRIL TABS 5 MG, 10 MG, 20 MG, 30 MG, 40 MG (Use <i>lisinopril</i>)	NP	QL(2 EA daily)
Agents for Pheochromocytoma		
DEMSEER (Use <i>metirosine</i>)	NP	SP; PA
<i>metirosine</i>	P	SP; PA
Angiotensin II Receptor Antagonists		
ATACAND (Use <i>candesartan cilexetil</i>)	NP	
AVAPRO 150 MG, 300 MG (Use <i>irbesartan</i>)	NP	QL(1 EA daily)
BENICAR (Use <i>olmesartan medoxomil</i>)	NP	Use losartan or irbesartan; QL(1 EA daily); ST
<i>candesartan cilexetil</i>	P	
COZAAR (Use <i>losartan potassium</i>)	NP	QL(1 EA daily)
DIOVAN TABS (Use <i>valsartan</i>)	NP	QL(1 EA daily)
<i>irbesartan</i>	P	QL(1 EA daily)
<i>losartan potassium</i>	P	QL(1 EA daily)
MICARDIS (Use <i>telmisartan</i>)	NP	QL(1 EA daily)
<i>olmesartan medoxomil</i>	P	Use losartan or irbesartan; QL(1 EA daily); ST
<i>telmisartan</i>	P	QL(1 EA daily)
<i>valsartan TABS</i>	P	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
Antiadrenergic Antihypertensives		
CARDURA (Use <i>doxazosin mesylate</i>)	NP	
<i>clonidine hcl TABS</i>	P	
<i>doxazosin mesylate</i>	P	
<i>guanfacine hcl</i>	P	
<i>methyldopa TABS</i>	P	
MINIPRESS CAPS (Use <i>prazosin hcl</i>)	NP	
<i>prazosin hcl CAPS</i>	P	
<i>terazosin hcl</i>	P	
Antihypertensive Combinations		
ACCURETIC 12.5 MG-10 MG (Use <i>quinapril-hydrochlorothiazide</i>)	NP	QL(3 EA daily)
ACCURETIC 12.5 MG-20 MG (Use <i>quinapril-hydrochlorothiazide</i>)	NP	QL(4 EA daily)
<i>amlodipine besylate-benazepril hcl</i>	P	QL(1 EA daily)
<i>amlodipine besylate-olmesartan medoxomil</i>	P	Use losartan or irbesartan; ST
<i>amlodipine besylate-valsartan</i>	P	Use losartan or irbesartan; ST
<i>amlodipine-valsartan-hydrochlorothiazide</i>	P	Use losartan or irbesartan; ST
ATACAND HCT (Use <i>candesartan cilexetil-hydrochlorothiazide</i>)	NP	
<i>atenolol & chlorthalidone</i>	P	QL(2 EA daily)
AVALIDE (Use <i>irbesartan-hydrochlorothiazide</i>)	NP	QL(1 EA daily)
AZOR (Use <i>amlodipine besylate-olmesartan medoxomil</i>)	NP	Use losartan or irbesartan; ST
<i>benazepril & hydrochlorothiazide</i>	P	QL(1 EA daily)

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BENICAR HCT (Use olmesartan medoxomil-hydrochlorothiazide)	NP	Use losartan or irbesartan; QL(1 EA daily); ST	LOTENSIN HCT 12.5 MG-10 MG, 12.5 MG-20 MG, 25 MG-20 MG (Use benazepril & hydrochlorothiazide)	NP	QL(1 EA daily)
bisoprolol & hydrochlorothiazide	P	QL(1 EA daily)	LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (Use amlodipine besylate-benazepril hcl)	NP	QL(1 EA daily)
candesartan cilexetil-hydrochlorothiazide	P		metoprolol & hydrochlorothiazide TABS 50 MG-100 MG	P	QL(1 EA daily)
captopril & hydrochlorothiazide 15 MG-25 MG, 15 MG-50 MG, 25 MG-25 MG	P	QL(2 EA daily)	metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 25 MG-50 MG	P	QL(2 EA daily)
captopril & hydrochlorothiazide 25 MG-50 MG	P	QL(3 EA daily)	MICARDIS HCT (Use telmisartan-hydrochlorothiazide)	NP	QL(1 EA daily)
DIOVAN HCT (Use valsartan-hydrochlorothiazide)	NP	QL(1 EA daily)	olmesartan medoxomil-amlodipine-hydrochlorothiazide	P	Use losartan or irbesartan; ST
enalapril maleate & hydrochlorothiazide	P	QL(2 EA daily)	olmesartan medoxomil-hydrochlorothiazide	P	Use losartan or irbesartan; QL(1 EA daily); ST
EXFORGE (Use amlodipine besylate-valsartan)	NP	Use losartan or irbesartan; ST	quinapril-hydrochlorothiazide 12.5 MG-20 MG	P	QL(4 EA daily)
EXFORGE HCT (Use amlodipine-valsartan-hydrochlorothiazide)	NP	Use losartan or irbesartan; ST	quinapril-hydrochlorothiazide 12.5 MG-10 MG	P	QL(3 EA daily)
fosinopril sodium & hydrochlorothiazide	P	QL(1 EA daily)	quinapril-hydrochlorothiazide 25 MG-20 MG	P	QL(2 EA daily)
HYZAAR (Use losartan potassium & hydrochlorothiazide)	NP	QL(1 EA daily)	telmisartan-amlodipine	P	
irbesartan-hydrochlorothiazide	P	QL(1 EA daily)	telmisartan-hydrochlorothiazide	P	QL(1 EA daily)
lisinopril & hydrochlorothiazide 12.5 MG-10 MG, 12.5 MG-20 MG	P	QL(2 EA daily)	TENORETIC 100 (Use atenolol & chlorthalidone)	NP	QL(2 EA daily)
lisinopril & hydrochlorothiazide 25 MG-20 MG	P	QL(1 EA daily)	TENORETIC 50 (Use atenolol & chlorthalidone)	NP	QL(2 EA daily)
losartan potassium & hydrochlorothiazide	P	QL(1 EA daily)	trandolapril-verapamil hcl	P	

Drug Name	Drug Tier	Requirements/ Limits
TRIBENZOR (Use olmesartan medoxomil-amlodipine-hydrochlorothiazide)	NP	Use losartan or irbesartan; ST
valsartan-hydrochlorothiazide	P	QL(1 EA daily)
VASERETIC 25 MG-10 MG (Use enalapril maleate & hydrochlorothiazide)	NP	QL(2 EA daily)
ZESTORETIC 25 MG-20 MG (Use lisinopril & hydrochlorothiazide)	NP	QL(1 EA daily)
ZESTORETIC 12.5 MG-10 MG, 12.5 MG-20 MG (Use lisinopril & hydrochlorothiazide)	NP	QL(2 EA daily)
ZIAC (Use bisoprolol & hydrochlorothiazide)	NP	QL(1 EA daily)
Antihypertensives - Misc.		
VECAMYL	P	SP; PA
Vasodilators		
hydralazine hcl TABS	P	
minoxidil 10 MG	P	QL(10 EA daily)
minoxidil 2.5 MG	P	QL(3 EA daily)
ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections		
Anti-infective Agents - Misc.		
metronidazole TABS 250 MG, 500 MG	P	
trimethoprim TABS	P	
Anti-infective Misc. - Combinations		
BACTRIM DS TABS (Use sulfamethoxazole-trimethoprim)	NP	
BACTRIM TABS (Use sulfamethoxazole-trimethoprim)	NP	

Drug Name	Drug Tier	Requirements/ Limits
methenamine-hyosc-methylene blue-sod phospheryl sal TABS 81.6 MG	P	
sulfamethoxazole-trimethoprim SUSP	P	
sulfamethoxazole-trimethoprim TABS	P	
URETRON D/S TABS 81.6 MG	P	
Carbapenems		
ertapenem sodium IJ	P	SP; PA
INVANZ IJ (Use ertapenem sodium)	NP	SP; PA
Glycopeptides		
FIRVANQ SOLR PO (Use vancomycin hcl)	NP	QL(300 ML per fill retail)
VANCOCIN CAPS 125 MG (Use vancomycin hcl)	NP	QL(4 EA daily)
VANCOCIN CAPS 250 MG (Use vancomycin hcl)	NP	QL(8 EA daily)
vancomycin hcl CAPS 250 MG	P	QL(8 EA daily)
vancomycin hcl CAPS 125 MG	P	QL(4 EA daily)
vancomycin hcl SOLR PO 25 MG/ML, 50 MG/ML, 250 MG/5ML	P	QL(300 ML per fill retail)
vancomycin hcl SOLR IV 500 MG	P	QL(14 EA per 30 day(s) retail)
vancomycin hcl SOLR IV 1 GM	P	QL(14 EA per fill retail)
VANCOMYCIN HCL SOLR IV 1 GM	P	QL(14 EA per fill retail)
VANCOMYCIN HCL SOLR IV 500 MG	P	QL(14 EA per 30 day(s) retail)
Leprostatics		
dapsone	P	
Lincosamides		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CLEOCIN (Use clindamycin palmitate hydrochloride)	NP	QL(300 ML per fill retail)	chloroquine phosphate TABS 250 MG	P	
CLEOCIN 150 MG, 300 MG (Use clindamycin hcl)	NP		chloroquine phosphate TABS 500 MG	P	QL(1 EA daily)
clindamycin hcl 150 MG, 300 MG	P		DARAPRIM (Use pyrimethamine)	NP	SP; PA
clindamycin palmitate hydrochloride	P	QL(300 ML per fill retail)	hydroxychloroquine sulfate 200 MG	P	
Monobactams			KRINTAFEL	P	QL(2 EA per 30 day(s) retail)
CAYSTON	P	SP; PA	mefloquine hcl	P	
Oxazolidinones			PLAQUENIL (Use hydroxychloroquine sulfate)	NP	
SIVEXTRO TABS	P	QL(6 EA per fill retail); PA	primaquine phosphate TABS	P	
Pleuromutilins			PRIMAQUINE PHOSPHATE TABS (Use primaquine phosphate)	NP	
XENLETA TABS	P	SP; PA	pyrimethamine	P	SP; PA
Urinary Anti-infectives			SOVUNA 200 MG	P	
MACROBID (Use nitrofurantoin monohyd macro)	NP		ANTIMYASTHENIC/CHOLINERGIC AGENTS		
MACRODANTIN 50 MG, 100 MG (Use nitrofurantoin macrocrystal)	NP		Antimychasthenic/Cholinergic Agents		
methenamine mandelate	P		MESTINON TABS (Use pyridostigmine bromide)	NP	
nitrofurantoin	P	QL(40 ML daily)	MESTINON TBCR (Use pyridostigmine bromide)	NP	
nitrofurantoin macrocrystal 50 MG, 100 MG	P		pyridostigmine bromide TABS 60 MG	P	
nitrofurantoin monohyd macro	P		pyridostigmine bromide TBCR	P	
ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)			ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)		
Antimalarial Combinations			Antimycobacterial Agents		
COARTEM	P	QL(24 EA per fill retail)	ethambutol hcl TABS	P	
Antimalarials			isoniazid SYRP	P	
			isoniazid TABS	P	
			MYAMBUTOL TABS 400 MG (Use ethambutol hcl)	NP	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MYCOBUTIN (Use rifabutin)	NP		<i>melphalan</i>	P	
<i>pyrazinamide</i>	P		<i>melphalan hcl IV</i>	P	SP; PA
<i>rifabutin</i>	P		MYLERAN TABS	P	
<i>rifampin CAPS</i>	P		TEMODAR SOLR	P	SP; PA
TRECTOR	P		<i>temozolomide CAPS</i>	P	SP; PA
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer			TEPADINA (Use thiotepa)	NP	SP; PA
Alkylating Agents			<i>thiotepa</i>	P	SP; PA
ALKERAN IV (Use <i>melphalan hcl</i>)	NP	SP; PA	TREANDA SOLR (Use <i>bendamustine hcl</i>)	NP	SP; PA
ALKERAN (Use <i>melphalan</i>)	NP		VIVIMUSTA SOLN	P	SP; PA
BELRAPZO SOLN	P	SP; PA	YONDELIS	P	SP; PA
BENDAMUSTINE HCL SOLN	P	SP; PA	ZEPZELCA	P	SP; PA
<i>bendamustine hcl SOLR</i>	P	SP; PA	Antimetabolites		
BENDEKA SOLN	P	SP; PA	ALIMTA SOLR (Use <i>pemetrexed disodium</i>)	NP	SP; PA
<i>carboplatin SOLN 50 MG/5ML, 150 MG/15ML, 450 MG/45ML, 600 MG/60ML, 1000 MG/100ML</i>	P	SP; PA	<i>azacitidine SUSR</i>	P	SP; PA
<i>cisplatin SOLN 50 MG/50ML, 100 MG/100ML, 200 MG/200ML</i>	P	SP; PA	<i>capecitabine</i>	P	SP; PA
CISPLATIN SOLR	P	SP; PA	<i>cladribine 10 MG/10ML</i>	P	SP; PA
<i>cyclophosphamide SOLN</i>	P	SP; PA	<i>cytarabine SOLN</i>	P	SP; PA
CYCLOPHOSPHAMIDE SOLN 1 GM/5ML, 2 GM/10ML (Use <i>cyclophosphamide</i>)	NP	SP; PA	<i>decitabine</i>	P	SP; PA
CYCLOPHOSPHAMIDE SOLN 1 GM/5ML, 2 GM/10ML, 500 MG/2.5ML	P	SP; PA	<i>fludarabine phosphate SOLN</i>	P	SP; PA
<i>cyclophosphamide SOLR IJ</i>	P	SP; PA	FLUDARABINE PHOSPHATE SOLN	P	SP; PA
EVOMELA IV	P	SP; PA	<i>fludarabine phosphate SOLR</i>	P	SP; PA
KEMOPLAT SOLN	P	SP; PA	FOLOTYN	P	SP; PA
LEUKERAN	P		<i>mercaptopurine SUSP 2000 MG/100ML</i>	P	
			<i>mercaptopurine TABS</i>	P	
			<i>methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML</i>	P	
			<i>methotrexate sodium TABS 2.5 MG</i>	P	
			ONUREG TABS	P	SP; PA

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PEMETREXED 500 MG/20ML	P	SP; PA	ARZERRA	P	SP; PA
<i>pemetrexed disodium SOLR 100 MG, 500 MG</i>	P	SP; PA	BAVENCIO	P	SP; PA
PEMFEXY	P	SP; PA	BESPO NSA	P	SP; PA
<i>pralatrexate</i>	P	SP; PA	BLINCYTO	P	SP; PA
PURIXAN SUSP 2000 MG/100ML (<i>Use mercaptopurine</i>)	NP		DARZALEX	P	SP; PA
TABLOID	P	SP; PA	EMPLICITI	P	SP; PA
TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	P		ENHERTU	P	SP; PA
VIDAZA SUSR (<i>Use azacitidine</i>)	NP	SP; PA	GAZYVA	P	SP; PA
XELODA (<i>Use capecitabine</i>)	NP	SP; PA	IMFINZI	P	SP; PA
Antineoplastic - Angiogenesis Inhibitors			JEMPERLI	P	SP; PA
CYRAMZA	P	SP; PA	KADCYLA	P	SP; PA
INLYTA	P	SP; PA	KEYTRUDA	P	SP; PA
LENVIMA (10 MG DAILY DOSE)	P	QL(1 EA daily); SP; PA	KIMMTRAK	P	SP; PA
LENVIMA (12 MG DAILY DOSE)	P	QL(3 EA daily); SP; PA	LIBTAYO	P	SP; PA
LENVIMA (14 MG DAILY DOSE)	P	QL(2 EA daily); SP; PA	LOQTORZI	P	SP; PA
LENVIMA (18 MG DAILY DOSE)	P	QL(2 EA daily); SP; PA	LUMOXITI	P	SP; PA
LENVIMA (20 MG DAILY DOSE)	P	QL(2 EA daily); SP; PA	MONJUVI	P	SP; PA
LENVIMA (24 MG DAILY DOSE)	P	QL(3 EA daily); SP; PA	OPDIVO	P	SP; PA
LENVIMA (4 MG DAILY DOSE)	P	QL(1 EA daily); SP; PA	PADCEV	P	SP; PA
LENVIMA (8 MG DAILY DOSE)	P	QL(2 EA daily); SP; PA	POLIVY	P	SP; PA
MVASI	P	SP; PA	POTELIGEO	P	SP; PA
ZALTRAP	P	SP; PA	RIABNI	P	SP; PA
ZIRABEV	P	SP; PA	RITUXAN	P	SP; PA
Antineoplastic - Antibodies			RUXIENCE	P	SP; PA
ADCETRIS	P	SP; PA	TECENTRIQ	P	SP; PA
			TIVDAK	P	SP; PA
			TRUXIMA	P	SP; PA
			UNITUXIN	P	SP; PA
			YERVOY	P	SP; PA
			ZEVALIN Y-90	P	SP; PA
			ZYNLONTA	P	SP; PA
			Antineoplastic - Anti-HER2 Agents		
			HERCEPTIN 150 MG	P	SP; PA
			KANJINTI 420 MG	P	SP; PA
			MARGENZA	P	SP; PA
			OGIVRI	P	SP; PA

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PERJETA	P	SP; PA	AROMASIN <i>(Use exemestane)</i>	NP	
TRAZIMERA	P	SP; PA	<i>bicalutamide</i>	P	QL(1 EA daily)
TUKYSA	P	SP; PA	CASODEX <i>(Use bicalutamide)</i>	NP	QL(1 EA daily)
Antineoplastic - BCL-2 Inhibitors			ELIGARD SC 22.5 MG, 30 MG, 45 MG	P	SP; PA
VENCLEXTA STARTING PACK TBPK	P	SP; PA	ELIGARD KIT SC 7.5 MG	P	SP; PA
VENCLEXTA TABS	P	SP; PA	EMCYT	P	SP; PA
Antineoplastic - Cellular Immunotherapy			ERLEADA 60 MG	P	SP; PA
ABECMA	P	SP; PA	EULEXIN	P	
BREYANZI	P	SP; PA	<i>exemestane</i>	P	
CARVYKTI	P	SP; PA	FARESTON <i>(Use toremifene citrate)</i>	NP	PA
TECARTUS	P	SP; PA	FEMARA <i>(Use letrozole)</i>	NP	
Antineoplastic - EGFR Inhibitors			<i>hydroxyprogesterone caproate (antineoplastic)</i>	P	SP; PA
ERBITUX	P	SP; PA	<i>letrozole</i>	P	
<i>erlotinib hcl</i>	P	SP; PA	LEUPROLIDE ACETATE-BUPIVACAINE	P	SP; PA
EXKIVITY	P	SP; PA	<i>leuprolide acetate KIT IJ 1 MG/0.2ML</i>	P	SP; PA
<i>gefitinib</i>	P	SP; PA	LYSODREN	P	SP; PA
GILOTRIF	P	SP; PA	<i>megestrol acetate SUSP</i>	P	
IRESSA <i>(Use gefitinib)</i>	NP	SP; PA	<i>megestrol acetate TABS</i>	P	
PORTRAZZA	P	SP; PA	NUBEQA	P	SP; PA
TAGRISSO	P	SP; PA	<i>tamoxifen citrate TABS</i>	P	
TARCEVA <i>(Use erlotinib hcl)</i>	NP	SP; PA	<i>toremifene citrate</i>	P	PA
VECTIBIX 100 MG/5ML, 400 MG/20ML	P	SP; PA	XTANDI CAPS	P	SP; PA
VIZIMPRO	P	SP; PA	XTANDI TABS	P	SP; PA
Antineoplastic - Hedgehog Pathway Inhibitors			YONSA	P	SP; PA
DAURISMO	P	SP; PA	ZOLADEX	P	SP; PA
ERIVEDGE	P	SP; PA	ZYTIGA <i>(Use abiraterone acetate)</i>	NP	SP; PA
ODOMZO	P	SP; PA	Antineoplastic - Hypoxia-Inducible Factor Inhibitors		
Antineoplastic - Hormonal and Related Agents			WELIREG	P	SP; PA
<i>abiraterone acetate</i>	P	SP; PA	Antineoplastic - Immunomodulators		
<i>anastrozole</i>	P				
ARIMIDEX <i>(Use anastrozole)</i>	NP				

Drug Name	Drug Tier	Requirements/Limits
POMALYST	P	SP; PA
Antineoplastic - PDGFR-alpha Inhibitors		
AYVAKIT	P	QL(1 EA daily); SP; PA
Antineoplastic - XPO1 Inhibitors		
XPOVIO (100 MG ONCE WEEKLY) 50 MG	P	SP; PA
XPOVIO (40 MG ONCE WEEKLY)	P	SP; PA
XPOVIO (40 MG TWICE WEEKLY) 40 MG	P	SP; PA
XPOVIO (60 MG ONCE WEEKLY) 60 MG	P	SP; PA
XPOVIO (60 MG TWICE WEEKLY)	P	SP; PA
XPOVIO (80 MG ONCE WEEKLY) 40 MG	P	SP; PA
XPOVIO (80 MG TWICE WEEKLY)	P	SP; PA
Antineoplastic Antibiotics		
<i>daunorubicin hcl SOLN</i>	P	SP; PA
DAUNORUBICIN HCL SOLN (<i>Use daunorubicin hcl</i>)	NP	SP; PA
ELLENCE SOLN	P	SP; PA
<i>mitoxantrone hcl 20 MG/10ML, 25 MG/12.5ML, 30 MG/15ML</i>	P	SP; PA
<i>valrubicin</i>	P	SP; PA
VALSTAR (<i>Use valrubicin</i>)	NP	SP; PA
Antineoplastic Combinations		
DARZALEX FASPRO	P	SP; PA
HERCEPTIN HYLECTA	P	SP; PA
INQOVI	P	SP; PA
KISQALI FEMARA (200 MG DOSE)	P	SP; PA
KISQALI FEMARA (400 MG DOSE)	P	SP; PA

Drug Name	Drug Tier	Requirements/Limits
KISQALI FEMARA (600 MG DOSE)	P	SP; PA
LONSURF	P	SP; PA
OPDUALAG	P	SP; PA
PHESGO	P	SP; PA
RITUXAN HYCELA	P	SP; PA
VYXEOS	P	SP; PA
Antineoplastic Enzyme Inhibitors		
AFINITOR DISPERZ TBSO (<i>Use everolimus</i>)	NP	SP; PA
AFINITOR TABS (<i>Use everolimus</i>)	NP	SP; PA
ALECENSA	P	SP; PA
ALUNBRIG TABS	P	SP; PA
ALUNBRIG TBPk	P	SP; PA
BALVERSA	P	SP; PA
BELEODAQ	P	SP; PA
<i>bortezomib SOLR IJ</i>	P	SP; PA
BORTEZOMIB SOLR IJ 1 MG, 2.5 MG	P	SP; PA
BOSULIF TABS	P	SP; PA
BRAFTOVI 75 MG	P	SP; PA
BRUKINSA	P	SP; PA
CABOMETYX TABS 40 MG	P	QL(2 EA daily); SP; PA
CABOMETYX TABS 20 MG, 60 MG	P	QL(1 EA daily); SP; PA
CAPRELSA	P	SP; PA
COMETRIQ (100 MG DAILY DOSE) KIT	P	SP; PA
COMETRIQ (140 MG DAILY DOSE) KIT	P	SP; PA
COMETRIQ (60 MG DAILY DOSE) KIT	P	SP; PA
COPIKTRA	P	SP; PA
COTELLIC	P	SP; PA
<i>dasatinib</i>	P	SP; PA
<i>everolimus TABS</i>	P	SP; PA
<i>everolimus TBSO</i>	P	SP; PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FOTIVDA	P	SP; PA	PIQRAY (200 MG DAILY DOSE)	P	SP; PA
FYARRO	P	SP; PA	PIQRAY (250 MG DAILY DOSE)	P	SP; PA
GAVRETO	P	SP; PA	PIQRAY (300 MG DAILY DOSE)	P	SP; PA
GLEEVEC TABS (<i>Use imatinib mesylate</i>)	NP	SP; PA	QINLOCK	P	SP; PA
IBRANCE CAPS	P	SP; PA	RETEVMO CAPS	P	SP; PA
IBRANCE TABS	P	SP; PA	ROMIDEPSIN SOLN	P	SP; PA
ICLUSIG	P	QL(1 EA daily); SP; PA	<i>romidepsin SOLR</i>	P	SP; PA
IDHIFA	P	SP; PA	ROZLYTREK CAPS	P	SP; PA
<i>imatinib mesylate TABS</i>	P	SP; PA	RUBRACA	P	SP; PA
IMBRUVICA CAPS	P	SP; PA	RYDAPT	P	SP; PA
IMBRUVICA TABS	P	QL(1 EA daily); SP; PA	SCEMBLIX 100 MG	P	SP
INREBIC	P	SP; PA	SCEMBLIX 20 MG, 40 MG	P	SP; PA
ISTODAX SOLR (<i>Use romidepsin</i>)	NP	SP; PA	<i>sorafenib tosylate</i>	P	SP; PA
JAKAFI	P	QL(2 EA daily); SP; PA	SPRYCEL (<i>Use dasatinib</i>)	NP	SP; PA
KISQALI (200 MG DOSE)	P	SP; PA	STIVARGA	P	SP; PA
KISQALI (400 MG DOSE)	P	SP; PA	<i>sunitinib malate</i>	P	SP; PA
KISQALI (600 MG DOSE)	P	SP; PA	SUTENT (<i>Use sunitinib malate</i>)	NP	SP; PA
KOSELUGO	P	SP; PA	TABRECTA	P	SP; PA
KYPROLIS	P	SP; PA	TAFINLAR CAPS	P	SP; PA
<i>lapatinib ditosylate</i>	P	SP; PA	TALZENNA	P	SP; PA
LORBRENA	P	SP; PA	TASIGNA 50 MG, 150 MG, 200 MG (<i>Use nilotinib hcl</i>)	NP	SP; PA
LUMAKRAS	P	SP; PA	TAZVERIK	P	SP; PA
LYNPARZA TABS	P	QL(4 EA daily); SP; PA	<i>temsirolimus</i>	P	SP; PA
MEKINIST TABS	P	SP; PA	TIBSOVO	P	SP; PA
MEKTOVI	P	SP; PA	TORISEL (<i>Use temsirolimus</i>)	NP	SP; PA
NERLYNX	P	SP; PA	TURALIO 125 MG	P	SP; PA
NEXAVAR (<i>Use sorafenib tosylate</i>)	NP	SP; PA	TYKERB (<i>Use lapatinib ditosylate</i>)	NP	SP; PA
<i>nilotinib hcl 50 MG, 150 MG, 200 MG</i>	P	SP; PA	VELCADE SOLR IJ (<i>Use bortezomib</i>)	NP	SP; PA
NINLARO	P	SP; PA	VERZENIO	P	QL(2 EA daily); SP; PA
<i>pazopanib hcl</i>	P	SP; PA			
PEMAZYRE	P	SP; PA			

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VITRAKVI CAPS	P	SP; PA	TRISENOX (<i>Use arsenic trioxide</i>)	NP	SP; PA
VITRAKVI SOLN	P	SP; PA	Chemotherapy Adjuncts		
VONJO	P	SP; PA	KEPIVANCE 5.16 MG	P	SP
VOTRIENT (<i>Use pazopanib hcl</i>)	NP	SP; PA	KEPIVANCE 6.25 MG	P	SP; PA
VOTRIENT	P	SP; PA	Chemotherapy Rescue/Antidote/Protective Agents		
XALKORI CAPS	P	SP; PA	<i>dexrazoxane hcl</i>	P	SP; PA
XOSPATA	P	SP; PA	KHAPZORY	P	SP; PA
ZEJULA CAPS	P	SP; PA	<i>leucovorin calcium TABS</i>	P	
ZELBORAF	P	SP; PA	<i>levoleucovorin calcium SOLN 250 MG/25ML</i>	P	SP; PA
ZOLINZA	P	SP; PA	<i>levoleucovorin calcium SOLR</i>	P	SP; PA
ZYDELIG	P	SP; PA	<i>mesna SOLN</i>	P	SP; PA
ZYKADIA TABS	P	SP; PA	<i>mesna TABS</i>	P	SP; PA
Antineoplastic Enzymes			MESNEX SOLN (<i>Use mesna</i>)	NP	SP; PA
ASPARLAS	P	SP; PA	MESNEX TABS	P	SP; PA
ONCASPAS	P	SP; PA	VORAXAZE	P	SP; PA
RYLAZE	P	SP; PA	Mitotic Inhibitors		
Antineoplastic Radiopharmaceuticals			ABRAXANE (<i>Use paclitaxel protein-bound particles</i>)	NP	SP; PA
AZEDRA DOSIMETRIC	P	SP; PA	<i>docetaxel CONC 20 MG/ML, 80 MG/4ML, 160 MG/8ML</i>	P	SP; PA
AZEDRA THERAPEUTIC	P	SP; PA	DOCETAXEL CONC 20 MG/ML, 80 MG/4ML, 160 MG/8ML	P	SP; PA
Antineoplastics Misc.			DOCETAXEL CONC 20 MG/ML, 80 MG/4ML, 160 MG/8ML (<i>Use docetaxel</i>)	NP	SP; PA
ACTIMMUNE 100 MCG/0.5ML	P	SP; PA	<i>docetaxel SOLN</i>	P	SP; PA
ALFERON N	P	SP; PA	DOCETAXEL SOLN 20 MG/2ML, 80 MG/8ML, 160 MG/16ML	P	SP; PA
<i>arsenic trioxide</i>	P	SP; PA	DOCETAXEL SOLN (<i>Use docetaxel</i>)	NP	SP; PA
BESREMI	P	SP; PA	DOCIVYX SOLN	P	SP; PA
<i>bexarotene</i>	P	SP; PA	<i>eribulin mesylate</i>	P	SP; PA
HYDREA (<i>Use hydroxyurea</i>)	NP				
<i>hydroxyurea</i>	P				
MATULANE	P	SP; PA			
PHOTOFRIN	P	SP; PA			
PROLEUKIN	P	SP; PA			
SYNRIBO	P	SP; PA			
TARGRETIN (<i>Use bexarotene</i>)	NP	SP; PA			
<i>tretinoin (chemotherapy)</i>	P	SP; PA			

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<i>etoposide CAPS</i>	P	SP; PA	Antiparkinson Dopaminergics		
<i>etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML</i>	P	SP; PA	<i>amantadine hcl CAPS</i>	P	
HALAVEN (<i>Use eribulin mesylate</i>)	NP	SP; PA	<i>amantadine hcl SOLN</i>	P	
IXEMPRA KIT	P	SP; PA	APOKYN SOCT	P	SP; PA
JEVTANA	P	SP; PA	<i>apomorphine hydrochloride SOCT</i>	P	SP; PA
PACLITAXEL PROTEIN-BOUND PART	P	SP; PA	<i>bromocriptine mesylate CAPS</i>	P	
<i>paclitaxel protein-bound particles</i>	P	SP; PA	<i>bromocriptine mesylate TABS 2.5 MG</i>	P	
<i>vincristine sulfate</i>	P	SP; PA	<i>carbidopa-levodopa TABS</i>	P	
Oncolytic Viral Agents			<i>carbidopa-levodopa TBCR</i>	P	
IMLYGIC	P	SP; PA	DHIVY TABS	P	
Topoisomerase I Inhibitors			GOCOVRI CP24	P	SP; PA
CAMPTOSAR (<i>Use irinotecan hcl</i>)	NP	SP; PA	PARLODEL CAPS (<i>Use bromocriptine mesylate</i>)	NP	
HYCAMTIN CAPS	P	SP; PA	PARLODEL TABS (<i>Use bromocriptine mesylate</i>)	NP	
HYCAMTIN SOLR (<i>Use topotecan hcl</i>)	NP	SP; PA	<i>pramipexole dihydrochloride TABS</i>	P	QL(3 EA daily); AL(At least 18 yrs old)
<i>irinotecan hcl</i>	P	SP; PA	<i>ropinirole hydrochloride TABS 0.5 MG, 1 MG, 2 MG, 5 MG</i>	P	QL(3 EA daily)
<i>topotecan hcl SOLN</i>	P	SP; PA	<i>ropinirole hydrochloride TABS 0.25 MG, 3 MG, 4 MG</i>	P	QL(6 EA daily)
TOPOTECAN HCL SOLN	P	SP; PA	SINEMET TABS 100 MG-10 MG, 100 MG-25 MG (<i>Use carbidopa-levodopa</i>)	NP	
TOPOTECAN HCL SOLN (<i>Use topotecan hcl</i>)	NP	SP; PA	Antiparkinson Monoamine Oxidase Inhibitors		
<i>topotecan hcl SOLR</i>	P	SP; PA	<i>selegiline hcl CAPS</i>	P	
ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease			<i>selegiline hcl TABS</i>	P	
Antiparkinson Adjunctive Therapy			ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders		
<i>carbidopa</i>	P		Antimanic Agents		
LODOSYN (<i>Use carbidopa</i>)	NP		<i>lithium</i>	P	
Antiparkinson Anticholinergics			<i>lithium carbonate CAPS</i>	P	
<i>benztropine mesylate TABS</i>	P				
<i>trihexyphenidyl hcl TABS</i>	P				

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<i>lithium carbonate TABS</i>	P		<i>risperidone TBDP</i>	P	QL(2 EA daily); AL(At least 5 yrs old)
<i>lithium carbonate TBCR</i>	P		Butyrophenones		
LITHOBID TBCR (Use <i>lithium carbonate</i>)	P		HALDOL DECANOATE (Use <i>haloperidol decanoate</i>)	NP	
Antipsychotics - Misc.			<i>haloperidol decanoate</i>	P	
GEODON (Use <i>ziprasidone hcl</i>)	NP	QL(2 EA daily); AL(At least 18 yrs old)	<i>haloperidol lactate CONC</i>	P	
LATUDA (Use <i>lurasidone hcl</i>)	NP		<i>haloperidol TABS 0.5 MG, 1 MG, 2 MG, 5 MG, 10 MG</i>	P	QL(3 EA daily)
<i>lurasidone hcl</i>	P		<i>haloperidol TABS 20 MG</i>	P	
NUPLAZID CAPS	P	QL(1 EA daily); PA	Dibenzapines		
NUPLAZID TABS 10 MG	P	QL(1 EA daily); PA	<i>clozapine TABS</i>	P	QL(3 EA daily); AL(At least 18 yrs old)
<i>ziprasidone hcl</i>	P	QL(2 EA daily); AL(At least 18 yrs old)	CLOZARIL TABS (Use <i>clozapine</i>)	NP	QL(3 EA daily); AL(At least 18 yrs old)
Benzisoxazoles			<i>loxapine succinate</i>	P	QL(4 EA daily)
ERZOFRI 39 MG/0.25ML, 78 MG/0.5ML, 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML	P	SP; PA	<i>olanzapine TABS 2.5 MG, 5 MG</i>	P	QL(4 EA daily); AL(At least 10 yrs old)
INVEGA HAFYERA	P	SP; PA	<i>olanzapine TABS 15 MG, 20 MG</i>	P	QL(1 EA daily); AL(At least 10 yrs old)
INVEGA SUSTENNA	P	SP; PA	<i>olanzapine TABS 7.5 MG, 10 MG</i>	P	QL(2 EA daily); AL(At least 10 yrs old)
INVEGA TRINZA	P	SP; PA	<i>quetiapine fumarate TABS 25 MG, 50 MG</i>	P	QL(4 EA daily); AL(At least 10 yrs old - Up to 17 yrs old)
PERSERIS PRSY	P	SP; PA	<i>quetiapine fumarate TABS 100 MG, 200 MG</i>	P	QL(4 EA daily); AL(At least 10 yrs old)
RISPERDAL CONSTA (Use <i>risperidone microspheres</i>)	NP	SP; PA	<i>quetiapine fumarate TABS 300 MG, 400 MG</i>	P	QL(2 EA daily); AL(At least 10 yrs old)
RISPERDAL SOLN (Use <i>risperidone</i>)	NP	QL(4 ML daily); AL(At least 5 yrs old)	SEROQUEL TABS 300 MG, 400 MG (Use <i>quetiapine fumarate</i>)	NP	QL(2 EA daily); AL(At least 10 yrs old)
RISPERDAL TABS 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG (Use <i>risperidone</i>)	NP	QL(4 EA daily); AL(At least 5 yrs old)			
<i>risperidone microspheres</i>	P	SP; PA			
<i>risperidone SOLN</i>	P	QL(4 ML daily); AL(At least 5 yrs old)			
<i>risperidone TABS</i>	P	QL(4 EA daily); AL(At least 5 yrs old)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SEROQUEL TABS 100 MG, 200 MG (<i>Use quetiapine fumarate</i>)	NP	QL(4 EA daily); AL(At least 10 yrs old)	<i>aripiprazole SOLN PO</i>	P	QL(750 ML per fill retail); AL(At least 6 yrs old)
SEROQUEL TABS 25 MG, 50 MG (<i>Use quetiapine fumarate</i>)	NP	QL(4 EA daily); AL(At least 10 yrs old - Up to 17 yrs old)	<i>aripiprazole TABS</i>	P	QL(1 EA daily); AL(At least 6 yrs old)
ZYPREXA RELPREVV	P	SP; PA	<i>aripiprazole TBDP</i>	P	QL(1 EA daily); AL(At least 6 yrs old)
ZYPREXA TABS 15 MG, 20 MG (<i>Use olanzapine</i>)	NP	QL(1 EA daily); AL(At least 10 yrs old)	ARISTADA	P	SP; PA
ZYPREXA TABS 7.5 MG, 10 MG (<i>Use olanzapine</i>)	NP	QL(2 EA daily); AL(At least 10 yrs old)	ARISTADA INITIO	P	SP; PA
ZYPREXA TABS 2.5 MG, 5 MG (<i>Use olanzapine</i>)	NP	QL(4 EA daily); AL(At least 10 yrs old)	Thioxanthenes		
Dihydroindolones			<i>thiothixene</i>	P	QL(3 EA daily)
<i>molindone hcl</i>	P	QL(4 EA daily)	ANTISEPTICS & DISINFECTANTS		
Phenothiazines			Antiseptics & Disinfectants		
<i>chlorpromazine hcl TABS 10 MG</i>	P	QL(10 EA daily)	<i>formaldehyde SOLN 10 %</i>	P	QL(90 ML per fill retail)
<i>chlorpromazine hcl TABS 25 MG, 50 MG, 100 MG, 200 MG</i>	P	QL(3 EA daily)	Chlorine Antiseptics		
<i>fluphenazine decanoate</i>	P		<i>chlorhexidine gluconate SOLN EX 4 %</i>	P	OTC; QL(946 ML per fill retail)
<i>fluphenazine hcl TABS</i>	P		<i>chlorhexidine gluconate SOLN EX 4 %</i>	NP	
<i>perphenazine TABS</i>	P	QL(4 EA daily)	HIBICLENS SOLN EX (<i>Use chlorhexidine gluconate</i>)	NP	
<i>prochlorperazine</i>	P		ANTIVIRALS - Drugs to Treat Viral Infections		
<i>prochlorperazine maleate TABS</i>	P		Antiretrovirals		
<i>thioridazine hcl</i>	P	QL(3 EA daily)	<i>abacavir sulfate-lamivudine</i>	P	QL(1 EA daily)
<i>trifluoperazine hcl TABS</i>	P	QL(2 EA daily)	<i>abacavir sulfate SOLN</i>	P	QL(30 ML daily)
Quinolinone Derivatives			<i>abacavir sulfate TABS</i>	P	QL(2 EA daily)
ABILIFY MAINTENA PRSY	P	SP; PA	APTIVUS CAPS	P	QL(4 EA daily); ST
ABILIFY MAINTENA SRER	P	SP; PA	<i>atazanavir sulfate CAPS 300 MG</i>	P	
ABILIFY TABS (<i>Use aripiprazole</i>)	NP	QL(1 EA daily); AL(At least 6 yrs old)	<i>atazanavir sulfate CAPS 150 MG, 200 MG</i>	P	QL(2 EA daily)
			BIKTARVY	P	QL(1 EA daily)
			CIMDUO	P	QL(1 EA daily); ST

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
COMBIVIR (Use lamivudine-zidovudine)	NP	QL(2 EA daily)	EPIVIR TABS 300 MG (Use lamivudine)	NP	QL(1 EA daily)
COMPLERA 200 MG-300 MG-25 MG (Use emtricitabine- rilpivirine- tenofovir disoproxil fumarate)	NP	QL(1 EA daily)	EPZICOM (Use abacavir sulfate-lamivudine)	NP	QL(1 EA daily)
darunavir TABS 800 MG	P	QL(1 EA daily); ST	etravirine 100 MG	P	QL(4 EA daily)
darunavir TABS 600 MG	P	QL(2 EA daily); ST	etravirine 200 MG	P	QL(2 EA daily)
DELSTRIGO	P	QL(1 EA daily)	fosamprenavir calcium TABS	P	QL(4 EA daily)
DESCOVY 120 MG-15 MG	P	QL(1 EA daily); PA	FUZEON SOLR	P	SP; PA
DESCOVY 200 MG-25 MG	P	QL(1 EA daily); PA	GENVOYA	P	QL(1 EA daily)
DOVATO	P		INTELENCE 25 MG	P	QL(4 EA daily)
EDURANT	P	QL(1 EA daily)	INTELENCE 100 MG (Use etravirine)	NP	QL(4 EA daily)
efavirenz CAPS 200 MG	P	QL(1 EA daily)	INTELENCE 200 MG (Use etravirine)	NP	QL(2 EA daily)
efavirenz CAPS 50 MG	P	QL(2 EA daily)	ISENTRESS HD TABS	P	QL(2 EA daily)
efavirenz-emtricitabine-tenofovir disoproxil fumarate	P	QL(1 EA daily)	ISENTRESS CHEW 25 MG	P	QL(12 EA daily)
efavirenz-lamivudine-tenofovir disoproxil fumarate	P	QL(1 EA daily)	ISENTRESS CHEW 100 MG	P	QL(6 EA daily)
efavirenz TABS	P	QL(1 EA daily)	ISENTRESS PACK	P	QL(2 EA daily)
emtricitabine CAPS	P	QL(1 EA daily)	ISENTRESS TABS	P	QL(2 EA daily)
emtricitabine-rilpivirine-tenofovir disoproxil fumarate	P	QL(1 EA daily)	JULUCA	P	QL(1 EA daily)
emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG	P	QL(1 EA daily)	KALETRA SOLN	P	QL(480 ML per 30 day(s) retail)
EMTRIVA CAPS (Use emtricitabine)	NP	QL(1 EA daily)	KALETRA TABS 50 MG-200 MG (Use lopinavir-ritonavir)	NP	QL(6 EA daily)
EMTRIVA SOLN	P	QL(24 ML daily)	KALETRA TABS 25 MG-100 MG (Use lopinavir-ritonavir)	NP	QL(4 EA daily)
EPIVIR SOLN (Use lamivudine)	NP	QL(30 ML daily)	lamivudine SOLN	P	QL(30 ML daily)
EPIVIR TABS 150 MG (Use lamivudine)	NP	QL(2 EA daily)	lamivudine TABS 150 MG	P	QL(2 EA daily)
			lamivudine TABS 300 MG	P	QL(1 EA daily)
			lamivudine-zidovudine	P	QL(2 EA daily)
			LEXIVA SUSP	P	QL(56 ML daily)
			LEXIVA TABS (Use fosamprenavir calcium)	NP	QL(4 EA daily)
			lopinavir-ritonavir SOLN	P	QL(480 ML per 30 day(s) retail)

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<i>lopinavir-ritonavir TABS 25 MG-100 MG</i>	P	QL(4 EA daily)	SELZENTRY TABS 150 MG (<i>Use maraviroc</i>)	NP	QL(2 EA daily)
<i>lopinavir-ritonavir TABS 50 MG-200 MG</i>	P	QL(6 EA daily)	SELZENTRY TABS 25 MG, 75 MG	P	QL(2 EA daily)
<i>maraviroc TABS 150 MG</i>	P	QL(2 EA daily)	SELZENTRY TABS 300 MG (<i>Use maraviroc</i>)	NP	QL(4 EA daily)
<i>maraviroc TABS 300 MG</i>	P	QL(4 EA daily)	<i>stavudine CAPS</i>	P	QL(2 EA daily)
<i>nevirapine SUSP</i>	P	QL(40 ML daily)	STRIBILD	P	QL(1 EA daily)
<i>nevirapine TABS</i>	P	QL(2 EA daily)	SYMFI (<i>Use efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	NP	QL(1 EA daily)
<i>nevirapine TB24 400 MG</i>	P	QL(1 EA daily)	SYMFI LO (<i>Use efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	NP	QL(1 EA daily)
<i>nevirapine TB24 100 MG</i>	P	QL(3 EA daily)	<i>tenofovir disoproxil fumarate TABS</i>	P	QL(1 EA daily)
NORVIR CAPS	P	QL(12 EA daily)	TIVICAY TABS 50 MG	P	QL(2 EA daily)
NORVIR TABS (<i>Use ritonavir</i>)	NP	QL(12 EA daily)	TRIUMEQ TABS	P	QL(1 EA daily); AL(At least 18 yrs old)
ODEFSEY	P		TRIZIVIR	P	QL(2 EA daily)
PIFELTRO	P	QL(1 EA daily)	TROGARZO	P	SP; PA
PREZCOBIX	P	QL(1 EA daily)	TRUVADA 200 MG-300 MG (<i>Use emtricitabine-tenofovir disoproxil fumarate</i>)	P	QL(1 EA daily)
PREZISTA SUSP	P	QL(12 ML daily); ST	TYBOST	P	QL(1 EA daily); AL(At least 18 yrs old)
PREZISTA TABS 75 MG	P	QL(2 EA daily); ST	VIRACEPT TABS 625 MG	P	QL(4 EA daily)
PREZISTA TABS 600 MG (<i>Use darunavir</i>)	NP	QL(2 EA daily); ST	VIRACEPT TABS 250 MG	P	QL(9 EA daily)
PREZISTA TABS 800 MG (<i>Use darunavir</i>)	NP	QL(1 EA daily); ST	VIREAD POWD	P	QL(240 GM per 30 day(s) retail)
PREZISTA TABS 150 MG	P	QL(3 EA daily); ST	VIREAD TABS (<i>Use tenofovir disoproxil fumarate</i>)	NP	QL(1 EA daily)
RETROVIR CAPS (<i>Use zidovudine</i>)	NP	QL(6 EA daily)	VIREAD TABS 150 MG, 200 MG, 250 MG	P	QL(1 EA daily)
RETROVIR SYRP (<i>Use zidovudine</i>)	NP	QL(60 ML daily)	ZIAGEN SOLN (<i>Use abacavir sulfate</i>)	NP	QL(30 ML daily)
REYATAZ CAPS 200 MG (<i>Use atazanavir sulfate</i>)	NP	QL(2 EA daily)	ZIAGEN TABS (<i>Use abacavir sulfate</i>)	NP	QL(2 EA daily)
REYATAZ CAPS 300 MG (<i>Use atazanavir sulfate</i>)	NP				
REYATAZ PACK	P	QL(6 EA daily)			
<i>ritonavir TABS</i>	P	QL(12 EA daily)			
RUKOBIA	P	PA			
SELZENTRY SOLN	P	QL(35 ML daily)			

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<i>zidovudine CAPS</i>	P	QL(6 EA daily)	<i>valacyclovir hcl 1 GM</i>	P	QL(42 EA per 21 day(s) retail)
<i>zidovudine SYRP</i>	P	QL(60 ML daily)	<i>valacyclovir hcl 500 MG</i>	P	QL(2 EA daily)
<i>zidovudine TABS</i>	P	QL(2 EA daily)	VALTREX 500 MG (<i>Use valacyclovir hcl</i>)	NP	QL(2 EA daily)
Antiviral Combinations			VALTREX 1 GM (<i>Use valacyclovir hcl</i>)	NP	QL(42 EA per 21 day(s) retail)
PAXLOVID (150/100)	P		Influenza Agents		
PAXLOVID (300/100)	P		<i>oseltamivir phosphate CAPS 30 MG</i>	P	QL(20 EA per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail
CMV Agents			<i>oseltamivir phosphate CAPS 45 MG, 75 MG</i>	P	QL(10 EA per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail
LIVTENCITY	P	SP; PA	<i>oseltamivir phosphate SUSR</i>	P	QL(120 ML per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail
PREVYMIS SOLN	P	SP; PA	RELENZA DISKHALER	P	QL(20 EA per fill retail); AL(At least 5 yrs old)
PREVYMIS TABS	P	QL(1 EA daily); SP; PA	TAMIFLU CAPS 30 MG (<i>Use oseltamivir phosphate</i>)	NP	QL(20 EA per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail
VALCYTE TABS (<i>Use valganciclovir hcl</i>)	NP	QL(2 EA daily)	TAMIFLU CAPS 45 MG, 75 MG (<i>Use oseltamivir phosphate</i>)	NP	QL(10 EA per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail
<i>valganciclovir hcl TABS</i>	P	QL(2 EA daily)	TAMIFLU SUSR (<i>Use oseltamivir phosphate</i>)	NP	QL(120 ML per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail
Hepatitis Agents			BETA BLOCKERS - Drugs to Treat High Blood Pressure		
MAVYRET PACK	P	QL(6 EA daily); SP; PA	Alpha-Beta Blockers		
MAVYRET TABS	P	QL(3 EA daily); SP; PA	<i>carvedilol 25 MG</i>	P	QL(4 EA daily)
PEGASYS SOLN	P	SP; PA			
<i>ribavirin (hepatitis c) CAPS</i>	P	SP; PA			
<i>ribavirin (hepatitis c) TABS 200 MG</i>	P	SP; PA			
SOFOSBUVIR-VELPATASVIR TABS	P	QL(1 EA daily); SP; PA			
SOVALDI TABS	P	SP; PA			
VEMLIDY	P	SP; PA			
Herpes Agents					
<i>acyclovir CAPS</i>	P	QL(50 EA per 30 day(s) retail)			
<i>acyclovir SUSP</i>	P	QL(400 ML per 30 day(s) retail)			
<i>acyclovir TABS PO 400 MG</i>	P	QL(3 EA daily)			
<i>acyclovir TABS PO 800 MG</i>	P	QL(50 EA per 30 day(s) retail)			
<i>famciclovir</i>	P				

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<i>carvedilol</i> 3.125 MG, 6.25 MG, 12.5 MG	P	QL(3 EA daily)	TOPROL XL TB24 25 MG, 50 MG, 100 MG (<i>Use metoprolol succinate</i>)	NP	QL(4 EA daily)
<i>carvedilol phosphate</i>	P	QL(1 EA daily)	Beta Blockers Non-Selective		
COREG 25 MG (<i>Use carvedilol</i>)	NP	QL(4 EA daily)	BETAPACE AF (<i>Use sotalol hcl (afib/afl)</i>)	NP	QL(2 EA daily)
COREG 3.125 MG, 6.25 MG, 12.5 MG (<i>Use carvedilol</i>)	NP	QL(3 EA daily)	BETAPACE TABS 80 MG, 120 MG, 160 MG (<i>Use sotalol hcl</i>)	NP	QL(2 EA daily)
COREG CR (<i>Use carvedilol phosphate</i>)	NP	QL(1 EA daily)	CORGARD TABS 20 MG, 40 MG (<i>Use nadolol</i>)	NP	QL(2 EA daily)
<i>labetalol hcl</i> TABS 300 MG	P	QL(8 EA daily)	INDERAL LA CP24 (<i>Use propranolol hcl</i>)	NP	QL(2 EA daily)
<i>labetalol hcl</i> TABS 200 MG, 400 MG	P	QL(6 EA daily)	<i>nadolol</i> TABS 20 MG, 40 MG, 80 MG	P	QL(2 EA daily)
<i>labetalol hcl</i> TABS 100 MG	P	QL(3 EA daily)	<i>pindolol</i> TABS	P	
Beta Blockers Cardio-Selective			<i>propranolol hcl</i> CP24	P	QL(2 EA daily)
<i>acebutolol hcl</i> CAPS	P		<i>propranolol hcl</i> SOLN PO 20 MG/5ML, 40 MG/5ML	P	
<i>atenolol</i> TABS	P	QL(2 EA daily)	<i>propranolol hcl</i> TABS	P	
<i>bisoprolol fumarate</i>	P	QL(1 EA daily)	<i>sotalol hcl (afib/afl)</i>	P	QL(2 EA daily)
LOPRESSOR TABS 100 MG (<i>Use metoprolol tartrate</i>)	NP	QL(4.5 EA daily)	<i>sotalol hcl</i> TABS 240 MG	P	
LOPRESSOR TABS 50 MG (<i>Use metoprolol tartrate</i>)	NP	QL(4 EA daily)	<i>sotalol hcl</i> TABS 80 MG, 120 MG, 160 MG	P	QL(2 EA daily)
<i>metoprolol succinate</i> TB24 200 MG	P	QL(2 EA daily)	<i>timolol maleate</i> TABS	P	
<i>metoprolol succinate</i> TB24 25 MG, 50 MG, 100 MG	P	QL(4 EA daily)	CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure		
<i>metoprolol tartrate</i> TABS 25 MG, 50 MG	P	QL(4 EA daily)	Calcium Channel Blockers		
<i>metoprolol tartrate</i> TABS 100 MG	P	QL(4.5 EA daily)	<i>amlodipine besylate</i> TABS	P	QL(1 EA daily)
TENORMIN TABS (<i>Use atenolol</i>)	NP	QL(2 EA daily)	CARDIZEM CD CP24 240 MG (<i>Use diltiazem hcl coated beads</i>)	NP	QL(2 EA daily)
TOPROL XL TB24 200 MG (<i>Use metoprolol succinate</i>)	NP	QL(2 EA daily)	CARDIZEM CD CP24 120 MG, 180 MG, 300 MG (<i>Use diltiazem hcl coated beads</i>)	NP	QL(1 EA daily)
			CARDIZEM TABS 30 MG, 60 MG, 120 MG (<i>Use diltiazem hcl</i>)	NP	QL(3 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>diltiazem hcl coated beads CP24 120 MG, 180 MG, 300 MG</i>	P	QL(1 EA daily)	<i>verapamil hcl CP24 100 MG, 200 MG</i>	P	QL(2 EA daily)
<i>diltiazem hcl coated beads CP24 240 MG</i>	P	QL(2 EA daily)	<i>verapamil hcl TABS</i>	P	QL(3 EA daily)
<i>diltiazem hcl extended release beads 240 MG</i>	P	QL(2 EA daily)	<i>verapamil hcl TBCR</i>	P	QL(2 EA daily)
<i>diltiazem hcl extended release beads 120 MG, 180 MG, 300 MG, 360 MG, 420 MG</i>	P	QL(1 EA daily)	VERELAN PM CP24 100 MG, 200 MG (<i>Use verapamil hcl</i>)	NP	QL(2 EA daily)
<i>diltiazem hcl CP12</i>	P	QL(2 EA daily)	VERELAN PM CP24 300 MG (<i>Use verapamil hcl</i>)	NP	QL(1 EA daily)
<i>diltiazem hcl CP24 120 MG, 180 MG</i>	P	QL(1 EA daily)	VERELAN CP24 (<i>Use verapamil hcl</i>)	NP	QL(1 EA daily)
<i>diltiazem hcl CP24 240 MG</i>	P	QL(2 EA daily)	CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm		
<i>diltiazem hcl TABS</i>	P	QL(3 EA daily)	Cardiac Glycosides		
<i>felodipine</i>	P	QL(1 EA daily)	<i>digoxin SOLN PO 0.05 MG/ML</i>	P	
<i>nicardipine hcl CAPS</i>	P		<i>digoxin TABS 125 MCG, 250 MCG</i>	P	
<i>nifedipine CAPS</i>	P	QL(4 EA daily)	LANOXIN SOLN IJ (<i>Use digoxin</i>)	P	
<i>nifedipine TB24 30 MG, 90 MG</i>	P	QL(1 EA daily)	LANOXIN TABS 125 MCG, 250 MCG (<i>Use digoxin</i>)	P	
<i>nifedipine TB24 60 MG</i>	P	QL(2 EA daily)	CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions		
NORVASC TABS (<i>Use amlodipine besylate</i>)	NP	QL(1 EA daily)	Cardiac Myosin Inhibitors		
PROCARDIA XL TB24 30 MG, 90 MG (<i>Use nifedipine</i>)	NP	QL(1 EA daily)	CAMZYOS	P	SP; PA
PROCARDIA XL TB24 60 MG (<i>Use nifedipine</i>)	NP	QL(2 EA daily)	Impotence Agents		
TIAZAC 240 MG (<i>Use diltiazem hcl extended release beads</i>)	NP	QL(2 EA daily)	BI-MIX SOLR	P	PA
TIAZAC 120 MG, 180 MG, 300 MG, 360 MG, 420 MG (<i>Use diltiazem hcl extended release beads</i>)	NP	QL(1 EA daily)	IFE-BIMIX 30/1 SOLN	P	PA
VERAPAMIL HCL ER CP24 (<i>Use verapamil hcl</i>)	NP	QL(2 EA daily)	SUPER BI-MIX SOLR	P	PA
<i>verapamil hcl CP24 120 MG, 180 MG, 240 MG, 300 MG, 360 MG</i>	P	QL(1 EA daily)	SUPER TRI-MIX SOLR	P	SP; PA
			TRI-MIX SOLR	P	SP; PA
			Prostaglandin Vasodilators		
			<i>epoprostenol sodium</i>	P	SP; PA
			FLOLAN (<i>Use epoprostenol sodium</i>)	NP	SP; PA
			ORENITRAM TBCR	P	SP; PA

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TYVASO REFILL KIT SOLN IN	P	SP; PA
TYVASO STARTER KIT SOLN IN	P	SP; PA
TYVASO SOLN IN	P	SP; PA
VELETRI (Use <i>epoprostenol sodium</i>)	NP	SP; PA
VENTAVIS IN	P	SP; PA
Pulmonary Hypertension - Endothelin Receptor Antagonists		
<i>ambrisentan</i>	P	QL(1 EA daily); SP; PA
<i>bosentan</i> TABS	P	SP; PA
LETAIRIS (Use <i>ambrisentan</i>)	NP	QL(1 EA daily); SP; PA
TRACLEER TABS (Use <i>bosentan</i>)	NP	SP; PA
TRACLEER TBSO	P	SP; PA
Pulmonary Hypertension - Phosphodiesterase Inhibitors		
ADCIRCA TABS (Use <i>tadalafil (pulmonary hypertension)</i>)	NP	SP; PA
REVATIO SOLN (Use <i>sildenafil citrate (pulmonary hypertension)</i>)	NP	SP; PA
REVATIO SUSR (Use <i>sildenafil citrate (pulmonary hypertension)</i>)	NP	SP; PA
REVATIO TABS (Use <i>sildenafil citrate (pulmonary hypertension)</i>)	NP	SP; PA
<i>sildenafil citrate (pulmonary hypertension)</i> SOLN	P	SP; PA
<i>sildenafil citrate (pulmonary hypertension)</i> SUSR	P	SP; PA
<i>sildenafil citrate (pulmonary hypertension)</i> TABS	P	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
<i>tadalafil (pulmonary hypertension)</i> TABS	P	SP; PA
Pulmonary Hypertension - Prostacyclin Receptor Agonist		
UPTRAVI TITRATION TBPK	P	SP; PA
UPTRAVI SOLR	P	SP; PA
UPTRAVI TABS	P	SP; PA
Pulmonary Hypertension - Sol Guanylate Cyclase Stimulator		
ADEMPAS	P	SP; PA
Transthyretin Stabilizers		
VYNDAMAX	P	QL(1 EA daily); SP; PA
VYNDAQEL	P	QL(4 EA daily); SP; PA
CEPHALOSPORINS - Drugs to Treat Bacterial Infections		
Cephalosporins - 1st Generation		
<i>cefadroxil</i> CAPS	P	
<i>cefadroxil</i> SUSR	P	
<i>cefadroxil</i> TABS	P	
<i>cephalexin</i> CAPS 250 MG, 500 MG	P	
<i>cephalexin</i> SUSR	P	
Cephalosporins - 2nd Generation		
<i>cefaclor</i> CAPS	P	
<i>cefaclor</i> SUSR 125 MG/5ML, 250 MG/5ML, 375 MG/5ML	P	
<i>cefprozil</i> SUSR	P	QL(200 ML per fill retail); AL(Up to 12 yrs old)
<i>cefprozil</i> TABS	P	QL(20 EA per fill retail)
<i>cefuroxime axetil</i> TABS	P	QL(20 EA per fill retail)
Cephalosporins - 3rd Generation		

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>cefdinir CAPS</i>	P	QL(20 EA per fill retail)	MIRCETTE (<i>Use desogestrel-ethinyl estradiol (biphasic)</i>)	NP	
<i>cefdinir SUSR</i>	P	QL(100 ML per fill retail)	<i>norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG</i>	P	
<i>cefixime CAPS</i>	P		<i>norethindrone & eth estradiol</i>	P	
<i>ceftriaxone sodium IJ 1 GM, 250 MG, 500 MG</i>	P	QL(3 EA per fill retail)	<i>norethindrone & ethinyl estradiol-fe</i>	P	
SUPRAX CAPS (<i>Use cefixime</i>)	NP		<i>norethindrone acet & eth estra TABS</i>	P	
CHEMICALS			<i>norethindrone acetate-ethinyl estradiol-fe</i>	P	
Bulk Chemicals - O's			<i>norethindrone-eth estradiol (triphasic)</i>	P	
OMEPRAZOLE	P	PA	<i>norgestimate-ethinyl estradiol</i>	P	
Bulk Chemicals - P's			<i>norgestimate-ethinyl estradiol (triphasic)</i>	P	
PROMETHAZINE HCL POWD	P	PA	<i>norgestrel & ethinyl estradiol 30 MCG-0.3 MG</i>	P	QL(2 EA daily)
CONTRACEPTIVES - Drugs to Prevent Pregnancy			QUARTETTE (<i>Use levonorgestrel-ethinyl estradiol (91-day)</i>)	NF	
Combination Contraceptives - Oral			SEASONIQUE (<i>Use levonorgestrel-ethinyl estradiol (91-day)</i>)	NP	QL(91 EA per fill retail)
<i>desogestrel & ethinyl estradiol</i>	P		TYBLUME CHEW	P	
<i>desogestrel-ethinyl estradiol (biphasic)</i>	P		YASMIN 28 (<i>Use drospirenone-ethinyl estradiol</i>)	NP	QL(1 EA daily)
<i>desogestrel-ethinyl estradiol (triphasic)</i>	P		YAZ (<i>Use drospirenone-ethinyl estradiol</i>)	NP	QL(1 EA daily)
<i>drospirenone-ethinyl estradiol</i>	P	QL(1 EA daily)	Combination Contraceptives - Transdermal		
<i>ethynodiol diacet & eth estrad</i>	P	QL(1 EA daily)	<i>norelgestromin-ethinyl estradiol</i>	P	QL(3 EA per 28 day(s) retail)
GENERESS FE (<i>Use norethindrone & ethinyl estradiol-fe</i>)	NP		Combination Contraceptives - Vaginal		
<i>levonorgestrel & eth estradiol TABS</i>	P		<i>etonogestrel-ethinyl estradiol</i>	P	QL(1 EA per fill retail)
<i>levonorgestrel-eth estradiol (triphasic)</i>	P				
<i>levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG</i>	P	QL(91 EA per fill retail)			
LOSEASONIQUE (<i>Use levonorgestrel-ethinyl estradiol (91-day)</i>)	NF				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
NUVARING (Use etonogestrel-ethinyl estradiol)	NP	QL(1 EA per fill retail)	deflazacort SUSP	P	SP; PA
Emergency Contraceptives			deflazacort TABS	P	SP; PA
ELLA	P	QL(4 EA per 365 day(s) retail)	dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML	P	QL(150 ML per 30 day(s) retail)
levonorgestrel (emergency oc) 1.5 MG	P	QL(1 EA per 21 day(s) retail)	DEXAMETHASONE SODIUM PHOSPHATE SOLN IJ 4 MG/ML	P	QL(150 ML per 30 day(s) retail)
PLAN B ONE-STEP (Use levonorgestrel (emergency oc))	NP	QL(1 EA per 21 day(s) retail)	dexamethasone sodium phosphate SOSY IJ 4 MG/ML	P	QL(150 ML per 30 day(s) retail)
Progestin Contraceptives - Injectable			dexamethasone ELIX	P	
DEPO-PROVERA SUSP IM (Use medroxyprogesterone acetate (contraceptive))	NP	QL(1 ML per fill retail)	dexamethasone SOLN	P	
DEPO-PROVERA SUSY IM (Use medroxyprogesterone acetate (contraceptive))	NP	QL(1 ML per fill retail)	dexamethasone TABS	P	
DEPO-SUBQ PROVERA 104 SUSY SC	P	QL(1 ML per fill retail)	EMFLAZA SUSP (Use deflazacort)	NP	SP; PA
medroxyprogesterone acetate (contraceptive) SUSP IM	P	QL(1 ML per fill retail)	EMFLAZA TABS (Use deflazacort)	NP	SP; PA
medroxyprogesterone acetate (contraceptive) SUSY IM	P	QL(1 ML per fill retail)	hydrocortisone TABS	P	
Progestin Contraceptives - Oral			MEDROL TABS 4 MG, 8 MG (Use methylprednisolone)	NP	
norethindrone (contraceptive)	P		MEDROL TBPk (Use methylprednisolone)	NP	
OPILL	P		methylprednisolone TABS 4 MG, 8 MG	P	
OPILL	NP		methylprednisolone TBPk	P	
CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions			PEDIAPRED SOLN (Use prednisolone sodium phosphate)	NP	
Glucocorticosteroids			prednisolone sodium phosphate SOLN 20 MG/5ML	P	QL(150 ML per fill retail)
CORTEF TABS (Use hydrocortisone)	NP		prednisolone sodium phosphate SOLN 5 MG/5ML, 15 MG/5ML	P	
CORTISONE ACETATE TABS	P		prednisolone SOLN	P	
			prednisolone TABS	P	
			PREDNISONE INTENSOL CONC	P	
			prednisone SOLN	P	

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Drug Name	Drug Tier	Requirements/ Limits
<i>prednisone TABS</i>	P	
<i>prednisone TBPk</i>	P	
TARPEYO CPDR	P	SP; PA
ZILRETTA SRER	P	SP; PA
Mineralocorticoids		
<i>fludrocortisone acetate TABS</i>	P	
COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms		
Antitussives		
<i>benzonatate 100 MG</i>	P	AL(At least 10 yrs old - Up to 21 yrs old)
<i>benzonatate 200 MG</i>	P	QL(30 EA per 30 day(s) retail); AL(At least 10 yrs old - Up to 21 yrs old)
DELSYM COUGH CHILDRENS SUER (<i>Use dextromethorphan polistirex</i>)	NP	OTC; QL(240 ML per 7 day(s) retail); AL(Up to 21 yrs old)
DELSYM SUER (<i>Use dextromethorphan polistirex</i>)	NP	OTC; QL(240 ML per 7 day(s) retail); AL(Up to 21 yrs old)
<i>dextromethorphan hbr LIQD 7.5 MG/5ML</i>	P	OTC; QL(240 ML per 7 day(s) retail); AL(Up to 21 yrs old)
<i>dextromethorphan polistirex SUER</i>	P	OTC; QL(240 ML per 7 day(s) retail); AL(Up to 21 yrs old)
HYCODAN SOLN (<i>Use hydrocodone bitartrate-homatropine methylbromide</i>)	NP	AL(At least 18 yrs old - Up to 21 yrs old)
<i>hydrocodone bitartrate-homatropine methylbromide SOLN</i>	P	AL(At least 18 yrs old - Up to 21 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
TRIAMINIC LONG ACTING COUGH LIQD (<i>Use dextromethorphan hbr</i>)	NP	OTC; QL(240 ML per 7 day(s) retail); AL(Up to 21 yrs old)
Cough/Cold/Allergy Combinations		
ADVIL COLD/SINUS TABS (<i>Use pseudoephedrine-ibuprofen</i>)	NP	OTC; AL(Up to 21 yrs old)
<i>brompheniramine & phenyleph ELIX</i>	P	OTC; QL(120 ML per 30 day(s) retail); AL(Up to 21 yrs old)
<i>brompheniramine & pseudoeph ELIX</i>	P	OTC; QL(120 ML per 30 day(s) retail); AL(Up to 21 yrs old)
<i>brompheniramine & pseudoeph LIQD 15 MG/5ML-1 MG/5ML</i>	P	OTC; QL(120 ML per 30 day(s) retail); AL(Up to 21 yrs old)
<i>cetirizine-pseudoephedrine</i>	P	AL(Up to 21 yrs old)
CLARITIN-D 12 HOUR TB12 (<i>Use loratadine & pseudoephedrine</i>)	NP	OTC; QL(2 EA daily); AL(Up to 21 yrs old)
CLARITIN-D 24 HOUR TB24 (<i>Use loratadine & pseudoephedrine</i>)	NP	OTC; QL(1 EA daily); AL(Up to 21 yrs old)
COLD & FLU RELIEF NIGHTTIME D LIQD	P	OTC; AL(Up to 21 yrs old)
<i>dextromethorphan-doxylamine-acetaminophen LIQD</i>	P	OTC; AL(Up to 21 yrs old)
<i>dextromethorphan-guaifenesin LIQD 200 MG/5ML-10 MG/5ML</i>	P	OTC; QL(240 ML per fill retail); AL(Up to 21 yrs old)
<i>dextromethorphan-guaifenesin LIQD 100 MG/5ML-5 MG/5ML, 200 MG/5ML-30 MG/5ML, 400 MG/20ML-20 MG/20ML</i>	P	OTC; AL(Up to 21 yrs old)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>dextromethorphan-guaifenesin LIQD 100 MG/5ML-10 MG/5ML, 150 MG/7.5ML-15 MG/7.5ML, 200 MG/10ML-20 MG/10ML</i>	P	QL(240 ML per fill retail); AL(Up to 21 yrs old)	MUCINEX DM TB12 (<i>Use dextromethorphan-guaifenesin</i>)	NP	QL(2 EA daily); AL(Up to 21 yrs old)
<i>dextromethorphan-guaifenesin SYRP 100 MG/5ML-10 MG/5ML, 200 MG/10ML-20 MG/10ML</i>	P	QL(240 ML per fill retail); AL(Up to 21 yrs old)	MUCINEX D TB12 (<i>Use pseudoephedrine-guaifenesin</i>)	NP	QL(210 EA per fill retail); AL(Up to 21 yrs old)
<i>dextromethorphan-guaifenesin TB12 600 MG-30 MG</i>	P	QL(2 EA daily); AL(Up to 21 yrs old)	<i>phenylephrine-chlorphen-dm LIQD 10 MG/5ML-4 MG/5ML-15 MG/5ML</i>	P	QL(240 ML per fill retail); AL(Up to 21 yrs old)
<i>dextromethorphan-phenylephrine-acetaminophen CAPS</i>	P	OTC; AL(Up to 21 yrs old)	<i>phenylephrine-dm LIQD 2.5 MG/5ML-5 MG/5ML</i>	P	OTC; QL(240 ML per fill retail); AL(Up to 21 yrs old)
DIABETIC TUSSIN COLD/FLU CAPS	P	OTC; AL(Up to 21 yrs old)	<i>phenylephrine-dm SOLN</i>	P	OTC; QL(240 ML per fill retail); AL(Up to 21 yrs old)
ED BRON GP LIQD	P	OTC; QL(240 ML per 7 day(s) retail); AL(Up to 21 yrs old)	<i>promethazine & phenylephrine SYRP</i>	P	QL(240 ML per 7 day(s) retail); AL(Up to 21 yrs old)
<i>guaifenesin-codeine SOLN</i>	P	AL(At least 18 yrs old - Up to 21 yrs old)	<i>promethazine w/codeine SOLN</i>	P	QL(240 ML per fill retail); AL(At least 18 yrs old - Up to 21 yrs old)
<i>guaifenesin-codeine SYRP</i>	P	AL(At least 18 yrs old - Up to 21 yrs old)	<i>promethazine w/codeine SYRP</i>	P	QL(240 ML per fill retail); AL(At least 18 yrs old - Up to 21 yrs old)
LOHIST-D LIQD	P	QL(240 ML per fill retail); AL(Up to 21 yrs old)	<i>promethazine-dm SYRP</i>	P	QL(240 ML per fill retail); AL(Up to 21 yrs old)
<i>loratadine & pseudoephedrine TB12</i>	P	OTC; QL(2 EA daily); AL(Up to 21 yrs old)	<i>promethazine-phenylephrine-codeine</i>	P	QL(240 ML per fill retail); AL(At least 18 yrs old - Up to 21 yrs old)
<i>loratadine & pseudoephedrine TB24</i>	P	OTC; QL(1 EA daily); AL(Up to 21 yrs old)	<i>pseudoephed-bromphen-dm SYRP 10 MG/5ML-30 MG/5ML-2 MG/5ML</i>	P	QL(240 ML per fill retail); AL(Up to 21 yrs old)
MAXI-TUSS PE MAX LIQD	P	OTC; QL(240 ML per 7 day(s) retail); AL(Up to 21 yrs old)	<i>pseudoephedrine w/ dm-gg LIQD 100 MG/5ML-30 MG/5ML-10 MG/5ML</i>	P	OTC; QL(240 ML per 7 day(s) retail); AL(Up to 21 yrs old)
MAXI-TUSS PE LIQD	P	AL(Up to 21 yrs old)			
MUCINEX D MAX STRENGTH TB12 (<i>Use pseudoephedrine-guaifenesin</i>)	NF				

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<i>pseudoephedrine-guaifenesin SYRP 100 MG/5ML-30 MG/5ML</i>	P	OTC; QL(240 ML per fill retail); AL(Up to 21 yrs old)	<i>guaifenesin LIQD</i>	P	QL(240 ML per 7 day(s) retail); AL(Up to 21 yrs old)
<i>pseudoephedrine-guaifenesin TB12 600 MG-60 MG</i>	P	QL(210 EA per fill retail); AL(Up to 21 yrs old)	<i>guaifenesin TB12 1200 MG</i>	P	OTC; QL(2 EA daily); AL(Up to 21 yrs old)
<i>pseudoephedrine-ibuprofen TABS</i>	P	OTC; AL(Up to 21 yrs old)	<i>guaifenesin TB12 600 MG</i>	P	QL(40 EA per 30 day(s) retail); AL(Up to 21 yrs old)
PX DAYTIME MULTI-SYMPTOM CAPS	P	OTC; AL(Up to 21 yrs old)	MUCINEX MAXIMUM STRENGTH TB12 (Use <i>guaifenesin</i>)	NP	OTC; QL(2 EA daily); AL(Up to 21 yrs old)
PX NITETIME MULTI-SYMPTOM CAPS	P	OTC; QL(240 EA per fill retail); AL(Up to 21 yrs old)	MUCINEX TB12 (Use <i>guaifenesin</i>)	NP	QL(40 EA per 30 day(s) retail); AL(Up to 21 yrs old)
QC TRIACTING DAYTIME CHILDRENS SYRP	P	OTC; QL(240 ML per fill retail); AL(Up to 21 yrs old)	Misc. Respiratory Inhalants		
SCOT-TUSSIN DM LIQD	P	OTC; QL(240 ML per fill retail); AL(Up to 21 yrs old)	<i>sodium chloride (inhalant) AERS</i>	P	OTC; QL(240 ML per fill retail)
SCOT-TUSSIN SENIOR LIQD	P	OTC; AL(Up to 21 yrs old)	<i>sodium chloride (inhalant) NEBU 0.9 %, 3 %, 10 %</i>	P	
TRIAMINIC COLD/COUGH DAY TIME SYRP	P	OTC; QL(240 ML per fill retail); AL(Up to 21 yrs old)	Mucolytics		
WAL-TUSSIN CF LIQD 100 MG/5ML-30 MG/5ML-10 MG/5ML	P	OTC; QL(240 ML per 7 day(s) retail); AL(Up to 21 yrs old)	<i>acetylcysteine SOLN</i>	P	
ZYRTEC-D ALLERGY & CONGESTION (Use <i>cetirizine-pseudoephedrine</i>)	NP	AL(Up to 21 yrs old)	DERMATOLOGICALS - Drugs to Treat Skin Conditions		
ZYRTEC-D ALLERGY & SINUS (Use <i>cetirizine-pseudoephedrine</i>)	NP	AL(Up to 21 yrs old)	Acne Products		
Expectorants			ABSORICA 10 MG, 20 MG, 30 MG, 40 MG (Use <i>isotretinoin</i>)	NP	QL(2 EA daily); AL(At least 12 yrs old); PA
GERI-TUSSIN SYRP	P	OTC; QL(240 ML per 7 day(s) retail); AL(Up to 21 yrs old)	BENZAC AC WASH LIQD 5 % (Use <i>benzoyl peroxide</i>)	NP	RX/OTC
			<i>benzoyl peroxide BAR</i>	P	
			<i>benzoyl peroxide GEL 2.5 %, 5 %, 10 %</i>	P	
			<i>benzoyl peroxide LIQD 4 %, 5 %, 10 %</i>	P	
			<i>benzoyl peroxide LOTN 5 %, 10 %</i>	P	OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CLEOCIN-T LOTN (<i>Use clindamycin phosphate (topical)</i>)	NP		<i>tretinoin CREA 0.025 %, 0.05 %, 0.1 %</i>	P	QL(20 GM per fill retail); AL(Up to 35 yrs old)
CLINDAGEL GEL (<i>Use clindamycin phosphate (topical)</i>)	NP	QL(60 ML per fill retail)	<i>tretinoin GEL 0.01 %</i>	P	QL(15 GM per fill retail); AL(Up to 35 yrs old)
<i>clindamycin phosphate (topical) GEL</i>	P	QL(60 ML per fill retail)	<i>tretinoin GEL 0.025 %</i>	P	AL(Up to 35 yrs old)
<i>clindamycin phosphate (topical) LOTN</i>	P		Antibiotics - Topical		
<i>clindamycin phosphate (topical) SOLN</i>	P		<i>bacitracin (topical) OINT</i>	P	OTC; QL(30 GM per fill retail)
DIFFERIN CLEANSER LIQD (<i>Use benzoyl peroxide</i>)	NP	RX/OTC	<i>bacitracin zinc OINT</i>	P	OTC; QL(30 GM per fill retail)
ERYGEL GEL (<i>Use erythromycin (acne aid)</i>)	NP	QL(60 GM per fill retail)	<i>gentamicin sulfate (topical) CREA</i>	P	QL(60 GM per fill retail)
<i>erythromycin (acne aid) GEL</i>	P	QL(60 GM per fill retail)	<i>gentamicin sulfate (topical) OINT</i>	P	QL(60 GM per fill retail)
<i>erythromycin (acne aid) SOLN</i>	P		<i>mupirocin calcium (topical)</i>	P	QL(30 GM per fill retail)
<i>isotretinoin 10 MG, 20 MG, 30 MG, 40 MG</i>	P	QL(2 EA daily); AL(At least 12 yrs old); PA	<i>mupirocin OINT</i>	P	
KLARON (<i>Use sulfacetamide sodium (acne)</i>)	NP		<i>neomycin-bacitracin-polymyxin OINT</i>	P	OTC; QL(454 GM per fill retail)
RETIN-A CREA (<i>Use tretinoin</i>)	NP	QL(20 GM per fill retail); AL(Up to 35 yrs old)	<i>neomycin-polymyxin w/ pramoxine</i>	P	OTC; QL(30 GM per fill retail)
RETIN-A GEL 0.025 % (<i>Use tretinoin</i>)	NP	AL(Up to 35 yrs old)	NEOSPORIN ORIGINAL OINT (<i>Use neomycin-bacitracin-polymyxin</i>)	NP	OTC; QL(454 EA per fill retail)
RETIN-A GEL 0.01 % (<i>Use tretinoin</i>)	NP	QL(15 GM per fill retail); AL(Up to 35 yrs old)	NEOSPORIN PLUS PAIN RELIEF MS (<i>Use neomycin-polymyxin w/ pramoxine</i>)	NP	OTC; QL(30 GM per fill retail)
<i>sulfacetamide sodium (acne)</i>	P		Antifungals - Topical		
<i>sulfacetamide sodium w/ sulfur LOTN 10 %-5 %</i>	P	QL(60 GM per fill retail)	<i>clotrimazole (topical) CREA</i>	P	QL(90 GM per fill retail); RX/OTC
<i>sulfacetamide sodium w/ sulfur SUSP 10 %-5 %</i>	P		<i>clotrimazole (topical) SOLN</i>	P	QL(60 ML per fill retail); RX/OTC
			<i>clotrimazole w/ betamethasone CREA</i>	P	QL(45 GM per 30 day(s) retail)

Drug Name	Drug Tier	Requirements/ Limits
<i>clotrimazole w/ betamethasone LOTN</i>	P	QL(31 ML per 30 day(s) retail)
<i>econazole nitrate CREA</i>	P	QL(30 GM per fill retail)
<i>ketoconazole (topical) CREA</i>	P	QL(60 GM per fill retail)
<i>ketoconazole (topical) SHAM 2 %</i>	P	
LAMISIL AT ATHLETES FOOT CREA (<i>Use terbinafine hcl (topical)</i>)	NP	OTC; QL(30 GM per fill retail)
LAMISIL AT JOCK ITCH CREA (<i>Use terbinafine hcl (topical)</i>)	NP	OTC; QL(30 GM per fill retail)
LAMISIL AT CREA (<i>Use terbinafine hcl (topical)</i>)	NP	OTC; QL(30 GM per fill retail)
LOTRIMIN AF JOCK ITCH CREA (<i>Use clotrimazole (topical)</i>)	NP	QL(90 GM per fill retail); RX/OTC
LOTRIMIN AF CREA (<i>Use clotrimazole (topical)</i>)	NP	QL(90 GM per fill retail); RX/OTC
<i>miconazole nitrate (topical) CREA</i>	P	QL(60 GM per fill retail)
NIZORAL SHAM	P	OTC
<i>nystatin (topical) CREA</i>	P	QL(30 GM per fill retail)
<i>nystatin (topical) OINT</i>	P	QL(30 GM per fill retail)
<i>nystatin (topical) POWD EX</i>	P	QL(60 GM per fill retail)
<i>nystatin-triamcinolone CREA</i>	P	QL(60 GM per fill retail)
<i>nystatin-triamcinolone OINT</i>	P	QL(60 GM per fill retail)
<i>terbinafine hcl (topical) CREA</i>	P	OTC; QL(30 GM per fill retail)
TINACTIN CREA (<i>Use tolnaftate</i>)	NP	OTC; QL(30 GM per fill retail)
<i>tolnaftate CREA</i>	P	OTC; QL(30 GM per fill retail)

Drug Name	Drug Tier	Requirements/ Limits
Antihistamines-Topical		
ITCH RELIEF CREA	P	OTC
Anti-inflammatory Agents - Topical		
<i>diclofenac sodium (topical) GEL EX</i>	P	QL(6.68 GM daily); 2 max fill(s) per 30 day(s) retail; RX/OTC
VOLTAREN ARTHRITIS PAIN GEL EX (<i>Use diclofenac sodium (topical)</i>)	NP	QL(6.68 GM daily); 2 max fill(s) per 30 day(s) retail; RX/OTC
Antineoplastic or Premalignant Lesion Agents - Topical		
<i>bexarotene (topical)</i>	P	SP; PA
CARAC CREA	P	
EFUDEX CREA (<i>Use fluorouracil (topical)</i>)	NP	QL(40 GM per 30 day(s) retail)
<i>fluorouracil (topical) CREA 0.5 %</i>	P	
<i>fluorouracil (topical) CREA 5 %</i>	P	QL(40 GM per 30 day(s) retail)
<i>fluorouracil (topical) SOLN</i>	P	QL(10 ML per 30 day(s) retail)
LEVULAN KERASTICK SOLR	P	SP; PA
TARGRETIN (<i>Use bexarotene (topical)</i>)	NP	SP; PA
VALCHLOR	P	SP; PA
Antipruritics - Topical		
<i>camphor & menthol LOTN</i>	P	OTC; QL(222 ML per fill retail)
SARNA LOTN (<i>Use camphor & menthol</i>)	NP	OTC; QL(222 ML per fill retail)
Antipsoriatics		
<i>calcipotriene CREA</i>	P	
<i>calcipotriene SOLN</i>	P	QL(60 ML per fill retail)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ILUMYA	P	SP; PA	OVACE PLUS WASH LIQD (Use sulfacetamide sodium)	NP	QL(120 ML per fill retail)
OTULFI SOSY SC 45 MG/0.5ML, 90 MG/ML	P	SP; PA	OVACE WASH LIQD (Use sulfacetamide sodium)	NP	QL(120 ML per fill retail)
PYZCHIVA 45 MG/0.5ML, 90 MG/ML	NP	SP	selenium sulfide LOTN 2.5 %	P	
PYZCHIVA 45 MG/0.5ML, 90 MG/ML	P	SP; PA	selenium sulfide LOTN 1 %	P	OTC; QL(420 ML per fill retail)
SELARSDI SOSY SC 45 MG/0.5ML, 90 MG/ML	P	SP; PA	selenium sulfide SHAM 1 %	P	OTC; QL(420 ML per fill retail)
SKYRIZI PEN SOAJ	P	SP; ST; PA	SELSUN BLUE CARE MENS MAX STR LOTN (Use selenium sulfide)	NP	OTC; QL(420 ML per fill retail)
SKYRIZI SOSY	P	SP; PA	SELSUN BLUE DAILY LOTN (Use selenium sulfide)	NP	OTC; QL(420 ML per fill retail)
STELARA SOSY	P	SP; PA	SELSUN BLUE MEDICATED LOTN (Use selenium sulfide)	NP	OTC; QL(420 ML per fill retail)
STEQEYMA	P	SP; PA	SELSUN BLUE MOISTURIZING LOTN (Use selenium sulfide)	NP	OTC; QL(420 ML per fill retail)
TALTZ SOAJ	P	SP; PA	SELSUN BLUE LOTN (Use selenium sulfide)	NP	OTC; QL(420 ML per fill retail)
TALTZ SOSY	P	SP; PA	sulfacetamide sodium LIQD	P	QL(120 ML per fill retail)
tazarotene CREA	P	QL(2 GM daily); AL(Up to 20 yrs old)	Antivirals - Topical		
tazarotene GEL	P	QL(6.67 GM daily); AL(Up to 20 yrs old)	acyclovir topical CREA	P	QL(5 GM per fill retail)
TAZORAC CREA (Use tazarotene)	NP	QL(2 GM daily); AL(Up to 20 yrs old)	acyclovir topical OINT	P	QL(30 GM per 30 day(s) retail)
TAZORAC GEL (Use tazarotene)	NP	QL(6.67 GM daily); AL(Up to 20 yrs old)	ZOVIRAX CREA (Use acyclovir topical)	NP	QL(5 GM per fill retail)
TREMFYA ONE-PRESS SOAJ 100 MG/ML	P	SP; PA	ZOVIRAX OINT (Use acyclovir topical)	NP	QL(30 GM per 30 day(s) retail)
TREMFYA PEN SOAJ 100 MG/ML	P	SP; PA	Burn Products		
TREMFYA SOSY 100 MG/ML	P	SP; PA	SILVADENE (Use silver sulfadiazine)	NP	
USTEKINUMAB-AEKN SOSY SC 45 MG/0.5ML, 90 MG/ML	P	SP; PA	silver sulfadiazine	P	
USTEKINUMAB SOSY 45 MG/0.5ML, 90 MG/ML	P	SP; PA			
USTEKINUMAB-TTWE	NP	SP			
YESINTEK SOLN 45 MG/0.5ML	P	SP; PA			
YESINTEK SOSY	P	SP; PA			
Antiseborrheic Products					

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Corticosteroids - Topical			<i>fluocinonide emulsified base</i>	P	QL(60 GM per fill retail)
<i>betamethasone dipropionate (topical) CREA</i>	P	1 package(s) per 30 day(s) retail	<i>fluocinonide CREA 0.05 %</i>	P	QL(150 GM per 30 day(s) retail); 1 package(s) per fill retail
<i>betamethasone dipropionate augmented CREA</i>	P	QL(50 GM per fill retail)	<i>fluocinonide GEL</i>	P	QL(60 GM per fill retail)
<i>betamethasone valerate CREA</i>	P		<i>fluocinonide OINT</i>	P	QL(60 GM per fill retail)
<i>betamethasone valerate LOTN</i>	P		<i>fluocinonide SOLN</i>	P	QL(60 ML per fill retail)
<i>betamethasone valerate OINT</i>	P		<i>fluticasone propionate CREA 0.05 %</i>	P	QL(60 GM per fill retail)
<i>clobetasol propionate emollient base 0.05 %</i>	P	QL(60 GM per fill retail)	<i>fluticasone propionate OINT</i>	P	QL(60 GM per fill retail)
<i>clobetasol propionate CREA 0.05 %</i>	P	QL(60 GM per fill retail)	HYDROCORT LOTION COMPLETE KIT THPK	NP	
<i>clobetasol propionate GEL 0.05 %</i>	P	QL(60 GM per fill retail)	<i>hydrocortisone (topical) CREA 0.5 %</i>	P	OTC
<i>clobetasol propionate OINT 0.05 %</i>	P	QL(60 GM per fill retail)	<i>hydrocortisone (topical) CREA 2.5 %</i>	P	
<i>clobetasol propionate SOLN 0.05 %</i>	P	QL(50 ML per fill retail)	<i>hydrocortisone (topical) CREA 1 %</i>	P	QL(454 GM per fill retail); RX/OTC
DERMA-SMOOTH/FS SCALP OIL (Use <i>fluocinolone acetonide</i>)	NP	QL(118.28 ML per fill retail)	<i>hydrocortisone (topical) LOTN 1 %</i>	P	QL(453.6 GM per fill retail)
<i>desonide CREA</i>	P		<i>hydrocortisone (topical) LOTN 2.5 %</i>	P	QL(120 ML per fill retail)
<i>desonide OINT</i>	P	QL(2 GM daily)	<i>hydrocortisone (topical) OINT 1 %, 2.5 %</i>	P	RX/OTC
DESOWEN CREA (Use <i>desonide</i>)	NP		<i>hydrocortisone butyrate SOLN</i>	P	
<i>desoximetasone CREA 0.25 %</i>	P	QL(2 GM daily)	HYDROCORTISONE COMPLETE KIT THPK	NP	
<i>desoximetasone CREA 0.05 %</i>	P		<i>mometasone furoate CREA</i>	P	QL(50 GM per fill retail)
<i>desoximetasone GEL</i>	P	QL(2 GM daily)	<i>mometasone furoate OINT</i>	P	QL(45 GM per fill retail)
<i>desoximetasone OINT 0.25 %</i>	P	QL(2 GM daily)	<i>mometasone furoate SOLN</i>	P	QL(60 ML per fill retail)
EPIFOAM FOAM	P	QL(15 GM per fill retail)	TOPICORT CREA 0.25 % (Use <i>desoximetasone</i>)	NP	QL(2 GM daily)
<i>fluocinolone acetonide OIL</i>	P	QL(118.28 ML per fill retail)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TOPICORT CREA 0.05 % (Use desoximetasone)	NP		ELIDEL (Use pimecrolimus)	NP	QL(30 GM per 30 day(s) retail); AL(At least 2 yrs old); PA
TOPICORT GEL (Use desoximetasone)	NP	QL(2 GM daily)			
TOPICORT OINT 0.25 % (Use desoximetasone)	NP	QL(2 GM daily)	pimecrolimus	P	QL(30 GM per 30 day(s) retail); AL(At least 2 yrs old); PA
triamcinolone acetonide (topical) CREA	P				
triamcinolone acetonide (topical) LOTN	P	QL(60 ML per fill retail)	tacrolimus (topical) OINT 0.03 %	P	QL(30 GM per 30 day(s) retail); AL(At least 2 yrs old); PA
triamcinolone acetonide (topical) OINT 0.1 %, 0.5 %	P				
triamcinolone acetonide (topical) OINT 0.025 %	P	QL(454 GM per fill retail)	tacrolimus (topical) OINT 0.1 %	P	QL(30 GM per 30 day(s) retail); AL(At least 16 yrs old); PA
TRIDESILON CREA 0.05 % (Use desonide)	NP				
Eczema Agents			Keratolytic/Antimitotic/Vesicant Agents		
ADBRY SOSY	P	SP; PA	DERMAREST PSORIASIS GEL	P	OTC
CIBINQO	P	SP; PA			
Emollient/Keratolytic Agents			KERALYT GEL (Use salicylic acid)	NP	
urea CREA 40 %	P	RX/OTC	KERALYT GEL	P	OTC
urea LOTN 40 %	P		podofilox SOLN	P	
Emollients			salicylic acid GEL 6 %	P	
EMOLLIENT LOTION-MISC	P	RX/OTC	Local Anesthetics - Topical		
lactic acid (ammonium lactate) CREA	P	QL(385 GM per fill retail); RX/OTC	capsaicin CREA 0.025 %, 0.075 %	P	OTC; QL(60 GM per fill retail)
lactic acid (ammonium lactate) LOTN 12 %	P	QL(1368 GM per fill retail); RX/OTC	capsaicin CREA 0.035 %	P	OTC; QL(42.5 GM per fill retail)
Immunomodulating Agents - Topical			capsaicin CREA 0.1 %	P	OTC; QL(43 GM per fill retail)
imiquimod 5 %	P	QL(48 EA per 180 day(s) retail)	CAPZASIN-HP CREA (Use capsaicin)	NP	OTC; QL(43 GM per fill retail)
Immunosuppressive Agents - Topical			CAPZASIN-P CREA 0.035 % (Use capsaicin)	NP	OTC; QL(42.5 GM per fill retail)

Drug Name	Drug Tier	Requirements/ Limits
CASTIVA WARMING LOTN	P	OTC; QL(30 GM per fill retail)
<i>dibucaine</i>	P	OTC; QL(56.7 GM per fill retail)
<i>lidocaine hcl CREA 3 %</i>	P	QL(453.6 GM per fill retail)
<i>lidocaine hcl CREA 4 %</i>	P	OTC; QL(2 GM daily)
<i>lidocaine hcl GEL 2 %</i>	P	AL(At least 21 yrs old)
<i>lidocaine CREA 4 %</i>	P	OTC; QL(2 GM daily)
<i>lidocaine OINT 5 %</i>	P	QL(100 GM per 30 day(s) retail); 1 package(s) per fill retail
<i>lidocaine-prilocaine CREA</i>	P	QL(30 GM per fill retail)
LMX 4 CREA (Use <i>lidocaine</i>)	NP	OTC; QL(2 GM daily)
Misc. Topical		
CVS LANOLIN CREA	P	OTC
DRYSOL SOLN	P	
<i>lanolin (topical) CREA</i>	P	OTC
LANOLOR CREA	P	OTC
OFF DEEP WOODS AERO	P	OTC; QL(170 gm per fill retail, 340 gm per 30 days retail)
OFF DEEP WOODS DRY AERO	P	OTC; QL(113 gm per fill retail, 226 gm per 30 days retail)
REPEL SPORTSMEN MAX LOTN	NP	
SAWYER INSECT REPELLENT LOTN	NP	

Drug Name	Drug Tier	Requirements/ Limits
ULTRATHON INSECT REPELLENT 8 AERO	P	OTC; QL(170 gm per fill retail, 340 gm per 30 days retail)
ULTRATHON INSECT REPELLENT LOTN	P	OTC; QL(57 GM per fill retail; 114 GM per 30 day(s) retail)
<i>zinc oxide (topical) OINT 20 %</i>	P	OTC; QL(500 GM per fill retail)
Rosacea Agents		
METROCREAM CREA (Use <i>metronidazole (topical)</i>)	NP	
METROLOTION LOTN (Use <i>metronidazole (topical)</i>)	NP	
<i>metronidazole (topical) CREA</i>	P	
<i>metronidazole (topical) GEL 0.75 %</i>	P	QL(45 GM per fill retail)
<i>metronidazole (topical) LOTN</i>	P	
Scabicides & Pediculicides		
<i>crotamiton LOTN</i>	P	QL(454 GM per fill retail)
ELIMITE CREA (Use <i>permethrin</i>)	NP	QL(360 GM per fill retail)
LICEMD GEL	P	OTC
<i>malathion</i>	P	QL(59 ML per fill retail)
NATROBA (Use <i>spinosad</i>)	NP	Min Age limit = 6 months; QL(120 ML per fill retail; 240 ML per 30 day(s) retail)
NIX CREME RINSE LIQD EX (Use <i>permethrin</i>)	NP	OTC
OVIDE (Use <i>malathion</i>)	NP	QL(59 ML per fill retail)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>permethrin CREA</i>	P	QL(360 GM per fill retail)	MIRODERM BIO MATRIX FENESTRAT+	P	PA
<i>permethrin LIQD EX</i>	P	OTC	NOVACHOR	P	PA
<i>pyrethrins-piperonyl butoxide LIQD 3 %-2.4 %-0.3 %-1.2 %</i>	P	OTC	OASIS ULTRA MATRIX FENESTRATED	P	PA
<i>pyrethrins-piperonyl butoxide-permethrin-nit remover 4 %-0.33 %-0.5 %</i>	P	OTC	OASIS WOUND MATRIX FENESTRATED	P	PA
<i>pyrethrins-piperonyl butoxide SHAM 4 %-0.33 %</i>	P	OTC	OSTEOCONDUCTIVE MATRIX PLUS	P	PA
SCHOOLTIME SHAMPOO SHAM	P	OTC; QL(1 ML per 14 day(s) retail)	PROTEXT SUSP	P	PA
<i>spinosad</i>	P	Min Age limit = 6 months; QL(120 ML per fill retail; 240 ML per 30 day(s) retail)	PURAPLY	P	PA
STOP LICE MAXIMUM STRENGTH LIQD 4 %-0.33 %	P	OTC	DIAGNOSTIC PRODUCTS		
Tar Products			Diagnostic Drugs		
<i>coal tar extract SHAM 0.5 %</i>	P	OTC	CORTROSYN SOLR (<i>Use cosyntropin</i>)	NP	SP; PA
DHS TAR GEL SHAM (<i>Use coal tar extract</i>)	NP	OTC	<i>cosyntropin SOLR</i>	P	SP; PA
DHS TAR SHAM (<i>Use coal tar extract</i>)	NP	OTC	THYROGEN 0.9 MG	P	SP; PA
Wound Care Products			Diagnostic Tests		
AMNIOTIC MEMBRANE ALLOGRAFT (HUMAN) SHEET	P	SP; PA	ACCU-CHEK GUIDE TEST STRP	NP	RX/OTC
APLIGRAF DISK	P	PA	ADVIN COVID-19 ANTIGEN TEST KIT	NP	
CORETEXT SUSP 1 ML, 2 ML	P	PA	BINAXNOW COVID-19 AG HOME TEST KIT	P	QL(2 EA per fill retail)
EPICORD SHEE	P	PA	BLOOD GLUCOSE TEST STRIPS 333 STRP	NP	RX/OTC
MIRODERM BIO MATRIX FENESTRAT	P	PA	BLULINK GLUCOSE TEST STRP	NP	RX/OTC
			CARESENS N GLUCOSE TEST STRP	NP	RX/OTC
			CARESTART COVID-19 HOME TEST KIT	P	QL(2 EA per fill retail)
			CARETOUCH TEST STRP	NP	RX/OTC
			CHEMSTRIP K STRP	P	OTC; QL(6.67 EA daily)
			CLEARDETECT COVID-19 AG HOME KIT	P	QL(2 EA per fill retail)
			CLINITEST RAPID COVID-19 TEST KIT	NP	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CONTOUR PLUS TEST STRP	NP	RX/OTC	GNP EASY TOUCH GLUCOSE TEST STRP	NP	RX/OTC
COVID-19 AT HOME ANTIGEN TEST KIT	NP		GOJJI BLOOD KETONE TEST	P	OTC; QL(1 EA daily)
COVID-19 AT-HOME TEST KIT	P	QL(2 EA per fill retail)	GOTOKNOW COVID-19 ANTIGEN RAPI KIT	NP	
COVID-19 AT-HOME TEST KIT	NP		IHEALTH BLOOD GLUCOSE TEST STR STRP	NP	RX/OTC
CVS COVID-19 AT HOME TEST KIT KIT	NP		IHEALTH COVID-19 RAPID TEST KIT	P	QL(2 EA per fill retail)
CVS TRUE METRIX GLUCOSE TEST STRP	NP	RX/OTC	INDICAID COVID-19 RAPID TEST KIT	NP	
EASY MAX BLOOD GLUCOSE TEST STRP	NP	RX/OTC	INTELISWAB COVID-19 RAPID TEST KIT	P	QL(2 EA per fill retail)
EASY TALK PLUS II TEST STRIPS STRP	NP	RX/OTC	KETONE TEST STRP	P	OTC; QL(6.67 EA daily)
EASY TOUCH HEALTHPRO GLUCOSE STRP	NP	RX/OTC	KETOSTIX STRP	P	OTC; QL(6.67 EA daily)
EASY TRAK II GLUCOSE TEST STRP	NP	RX/OTC	MM BLULINK GLUCOSE TEST STRP	NP	RX/OTC
ELLUME COVID-19 HOME TEST KIT	P	QL(2 EA per fill retail)	NOVA MAX PLUS KETONE TEST	P	OTC; QL(1 EA daily)
EMBRACE PRO GLUCOSE TEST STRP	NP	RX/OTC	OHC COVID-19 ANTIGEN SELF TEST KIT	NP	
EMBRACE WAVE BLOOD GLUCOSE STRP	NP	RX/OTC	ON/GO COVID-19 ANTIGEN TEST KIT	P	QL(2 EA per fill retail)
FASTEP COVID-19 ANTIGEN TEST KIT	NP		ON/GO ONE COVID-19 HOME TEST KIT	NP	
FLOWFLEX COVID-19 AG HOME TEST KIT	P	QL(2 EA per fill retail)	ONETOUCH ULTRA BLUE TEST STRP	P	Clinical Edit: Test Strips; RX/OTC
FORA 6 CONNECT/GTEL TEST STRP	NP	RX/OTC	ONETOUCH ULTRA TEST STRP	P	Clinical Edit: Test Strips; RX/OTC
FORA GTEL BLOOD KETONE TEST	P	OTC; QL(1 EA daily)	ONETOUCH ULTRA STRP	P	Clinical Edit: Test Strips; RX/OTC
FORA TEST N'GO ADV-VOICE-6 CON	P	OTC; QL(1 EA daily)	ONETOUCH VERIO STRP	NP	RX/OTC
FORA TN'G ADVANCE PRO STRP	NP	RX/OTC	ONETOUCH VERIO STRP	P	Clinical Edit: Test Strips; RX/OTC
FORTISCARE G1 TEST STRIP STRP	NP	RX/OTC	PILOT COVID-19 AT-HOME TEST KIT	NP	
GENABIO COVID-19 RAPID TEST KIT	NP				

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PIP BLOOD GLUCOSE TEST STRIP STRP	NP	RX/OTC	ALDACTAZIDE (Use spironolactone & hydrochlorothiazide)	NP	
PRECISION XTRA KETONE	P	OTC; QL(1 EA daily)	amiloride & hydrochlorothiazide	P	QL(1 EA daily)
PTS PANELS EGLU TEST STRP	NP	RX/OTC	MAXZIDE-25 TABS (Use triamterene & hydrochlorothiazide)	NP	
QUICK TOUCH BLOOD GLUCOSE TEST STRP	NP	RX/OTC	MAXZIDE TABS (Use triamterene & hydrochlorothiazide)	NP	
QUICKVUE AT-HOME COVID-19 TEST KIT	P	QL(2 EA per fill retail)	spironolactone & hydrochlorothiazide	P	
RELION GLUCOSE TEST STRIPS STRP	NP	RX/OTC	triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG	P	
RELION KETONE TEST STRP	P	OTC; QL(6.67 EA daily)	triamterene & hydrochlorothiazide TABS	P	
RIGHTEST GT333 BLOOD GLUCOSE STRP	NP	RX/OTC	Loop Diuretics		
RIGHTEST GT333 GLUCOSE TEST STRP	NP	RX/OTC	bumetanide TABS	P	
SPEEDY SWAB COVID-19 ANTIGEN KIT	NP		BUMEX TABS 0.5 MG (Use bumetanide)	NP	
TRUE METRIX BLOOD GLUCOSE TEST STRP	NP	RX/OTC	furosemide SOLN PO 8 MG/ML, 10 MG/ML	P	
VIVAGUARD INO TEST STRIPS STRP	NP	RX/OTC	furosemide TABS	P	
DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes			LASIX TABS (Use furosemide)	NP	
Digestive Enzymes			SOAANZ TABS 20 MG	NP	QL(1 EA daily)
CREON CPEP	P	Smart PA	toremide TABS	P	QL(1 EA daily)
DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure			Potassium Sparing Diuretics		
Carbonic Anhydrase Inhibitors			ALDACTONE TABS (Use spironolactone)	NP	
acetazolamide CP12	P		amiloride hcl TABS	P	QL(4 EA daily)
acetazolamide TABS	P		spironolactone TABS	P	
dichlorphenamide	P	SP; PA	Thiazides and Thiazide-Like Diuretics		
KEVEYIS (Use dichlorphenamide)	NP	SP; PA	chlorthalidone 25 MG, 50 MG	P	
methazolamide TABS	P		hydrochlorothiazide CAPS	P	
Diuretic Combinations			hydrochlorothiazide TABS 25 MG, 50 MG	P	

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<i>indapamide TABS 1.25 MG, 2.5 MG</i>	P		PROLIA SOSY	P	SP; PA
<i>metolazone</i>	P		RECLAST SOLN (<i>Use zoledronic acid</i>)	NP	SP; PA
ENDOCRINE AND METABOLIC AGENTS - MISC.			<i>risedronate sodium TABS 5 MG, 30 MG</i>	P	QL(1 EA daily); PA
- Drugs to Treat Bone Disease and Regulate Hormones			<i>risedronate sodium TABS 35 MG</i>	P	QL(4 EA per fill retail); PA
Adrenal Steroid Inhibitors			<i>risedronate sodium TBEC</i>	P	QL(4 EA per 28 day(s) retail); PA
ISTURISA	P	SP; PA	<i>teriparatide SOPN</i>	P	PA
RECORLEV	P	SP; PA	TERIPARATIDE SOPN	P	SP; PA
Bone Density Regulators			TYMLOS	P	SP; PA
ACTONEL TABS 35 MG (<i>Use risedronate sodium</i>)	NP	QL(4 EA per fill retail); PA	XGEVA SOLN	P	SP; PA
<i>alendronate sodium SOLN</i>	P	QL(10.8 ML daily)	<i>zoledronic acid CONC</i>	P	SP; PA
<i>alendronate sodium TABS 5 MG, 10 MG</i>	P	QL(1 EA daily)	<i>zoledronic acid SOLN</i>	P	SP; PA
<i>alendronate sodium TABS 35 MG, 70 MG</i>	P	QL(0.15 EA daily)	ZOLEDRONIC ACID SOLN	P	SP; PA
<i>ATELVIA TBEC (Use risedronate sodium)</i>	NP	QL(4 EA per 28 day(s) retail); PA	Fertility Regulators		
BONSITY SOPN 560 MCG/2.24ML	P	PA	CHORIONIC GONADOTROPIN IM	P	PA
<i>calcitonin (salmon) NA</i>	P	1 package(s) per fill retail	FOLLISTIM AQ SC 300 UNT/0.36ML, 600 UNT/0.72ML, 900 UNT/1.08ML	P	PA
<i>calcitonin (salmon) IJ</i>	P	QL(2 ML per fill retail)	GONAL-F RFF REDIRECT SOPN	P	PA
EVENITY	P	SP; PA	GONAL-F RFF SOLR SC	P	PA
FORTEO SOPN (<i>Use teriparatide</i>)	NP	PA	GONAL-F SOLR IJ	P	PA
FOSAMAX TABS 70 MG (<i>Use alendronate sodium</i>)	NP	QL(0.15 EA daily)	MENOPUR SC	P	PA
<i>ibandronate sodium SOLN</i>	P	SP; PA	NOVAREL IM	P	PA
<i>MIACALCIN IJ (Use calcitonin (salmon))</i>	NP	QL(2 ML per fill retail)	OVIDREL SOSY	P	PA
<i>pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML</i>	P	SP; PA	PREGNYL IM	P	PA
PAMIDRONATE DISODIUM SOLN	P	SP; PA	GnRH/LHRH Antagonists		
			<i>cetrorelix acetate</i>	P	PA
			CETROTIDE (<i>Use cetrorelix acetate</i>)	NP	PA
			<i>ganirelix acetate</i>	P	PA
			GANIRELIX ACETATE (<i>Use ganirelix acetate</i>)	NP	PA

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Growth Hormone Receptor Antagonists			<i>calcitriol CAPS</i>	P	
SOMAVERT	P	SP; PA	CARBAGLU (<i>Use carglumic acid</i>)	NP	SP; PA
Growth Hormones			<i>carglumic acid</i>	P	SP; PA
HUMATROPE CART IJ	P	SP; PA	CARNITOR SF SOLN PO (<i>Use levocarnitine (metabolic modifiers)</i>)	NP	QL(30 ML daily)
NORDITROPIN FLEXPROM SOPN	P	SP; PA	CARNITOR SOLN PO 1 GM/10ML (<i>Use levocarnitine (metabolic modifiers)</i>)	NP	QL(30 ML daily)
SEROSTIM SC 4 MG, 5 MG, 6 MG	P	SP; PA	CARNITOR TABS (<i>Use levocarnitine (metabolic modifiers)</i>)	NP	QL(3 EA daily)
ZORBTIVE SC	P	SP; PA	<i>cinacalcet hcl</i>	P	SP; PA
Hormone Receptor Modulators			CYSTADANE (<i>Use betaine</i>)	NP	SP; PA
EVISTA (<i>Use raloxifene hcl</i>)	NP	QL(1 EA daily)	ELAPRASE	P	SP; PA
<i>raloxifene hcl</i>	P	QL(1 EA daily)	GALAFOLD	P	QL(0.5 EA daily); SP; PA
Insulin-Like Growth Factor Receptor Inhibitors			KANUMA	P	SP; PA
TEPEZZA	P	SP; PA	KUVAN PACK (<i>Use sapropterin dihydrochloride</i>)	NP	SP; PA
Insulin-Like Growth Factors (Somatomedins)			KUVAN TABS (<i>Use sapropterin dihydrochloride</i>)	NP	SP; PA
INCRELEX	P	SP; PA	<i>levocarnitine (metabolic modifiers) SOLN PO 1 GM/10ML</i>	P	QL(30 ML daily)
LHRH/GnRH Agonist Analog Pituitary Suppressants			<i>levocarnitine (metabolic modifiers) TABS</i>	P	QL(3 EA daily)
FENSOLVI (6 MONTH) SC	P	SP; PA	LUMIZYME	P	SP; PA
LUPRON DEPOT-PED (1-MONTH)	P	SP; PA	MEPSEVII	P	SP; PA
LUPRON DEPOT-PED (3-MONTH)	P	SP; PA	MYALEPT	P	SP; PA
SUPPRELIN LA	P	SP; PA	NAGLAZYME	P	SP; PA
SYNAREL	P	SP; PA	NEXVIAZYME	P	SP; PA
TRIPTODUR	P	SP; PA	<i>nitisinone CAPS</i>	P	SP; PA
Metabolic Modifiers			NITYR TABS	P	SP; PA
ALDURAZYME	P	SP; PA	NULIBRY	P	SP; PA
<i>betaine</i>	P	SP; PA	ORFADIN CAPS (<i>Use nitisinone</i>)	NP	SP; PA
BRINEURA	P	SP; PA			
BUPHENYL POWD (<i>Use sodium phenylbutyrate</i>)	NP	SP; PA			
BUPHENYL TABS (<i>Use sodium phenylbutyrate</i>)	NP	SP; PA			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ORFADIN SUSP	P	SP; PA	Somatostatic Agents		
PALYNZIQ	P	SP; PA	<i>octreotide acetate KIT</i>	P	SP; PA
<i>paricalcitol SOLN</i>	P	SP; PA	<i>octreotide acetate SOLN</i>	P	SP; PA
PARSABIV	P	SP; PA	SANDOSTATIN LAR DEPOT KIT (<i>Use octreotide acetate</i>)	NP	SP; PA
REVCIVI	P	SP; PA	SANDOSTATIN SOLN 50 MCG/ML, 100 MCG/ML, 500 MCG/ML (<i>Use octreotide acetate</i>)	NP	SP; PA
ROCALTRON CAPS (<i>Use calcitriol</i>)	NP		SIGNIFOR	P	SP; PA
<i>sapropterin dihydrochloride PACK</i>	P	SP; PA	SIGNIFOR LAR	P	SP; PA
<i>sapropterin dihydrochloride TABS</i>	P	SP; PA	Vasopressin Receptor Antagonists		
SENSIPAR (<i>Use cinacalcet hcl</i>)	NP	SP; PA	JYNARQUE TABS 15 MG, 30 MG (<i>Use tolvaptan</i>)	NP	SP; PA
<i>sodium phenylbutyrate POWD</i>	P	SP; PA	JYNARQUE TBPK 15 MG (<i>Use tolvaptan</i>)	NP	SP; PA
<i>sodium phenylbutyrate TABS</i>	P	SP; PA	SAMSCA TABS (<i>Use tolvaptan</i>)	NP	SP; PA
STRENSIQ	P	SP; PA	<i>tolvaptan TABS</i>	P	SP; PA
VIMIZIM	P	SP; PA	<i>tolvaptan TBPK 15 MG</i>	P	SP; PA
XURIDEN	P	SP; PA	ESTROGENS - Hormone Replacement/Modifying Drugs		
ZEMPLAR SOLN (<i>Use paricalcitol</i>)	NP	SP; PA	Estrogen Combinations		
Posterior Pituitary Hormones			ACTIVEVELLA TABS 1 MG-0.5 MG (<i>Use estradiol & norethindrone acetate</i>)	NP	QL(1 EA daily)
DDAVP PF SOLN IJ (<i>Use desmopressin acetate</i>)	NP	SP; PA	COMBIPATCH PTTW	P	QL(8 EA per 28 day(s) retail)
DDAVP SOLN IJ 4 MCG/ML (<i>Use desmopressin acetate</i>)	NP	SP; PA	<i>estradiol & norethindrone acetate TABS</i>	P	QL(1 EA daily)
DDAVP TABS (<i>Use desmopressin acetate</i>)	NP	QL(6 EA daily)	<i>norethindrone acetate-ethinyl estradiol</i>	P	
<i>desmopressin acetate spray</i>	P	QL(5 ML per fill retail)	PREMPHASE	P	
<i>desmopressin acetate spray refrigerated 0.01 %</i>	P	QL(5 ML per fill retail)	PREMPRO	P	
<i>desmopressin acetate SOLN IJ</i>	P	SP; PA	Estrogens		
DESMOPRESSIN ACETATE SOLN NA	P	SP; PA	ALORA PTTW 0.025 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR	P	QL(8 EA per fill retail)
<i>desmopressin acetate TABS</i>	P	QL(6 EA daily)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CLIMARA PTWK 0.025 MG/24HR, 0.0375 MG/24HR, 0.05 MG/24HR, 0.06 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (Use estradiol)	NP	QL(4 EA per fill retail)	<i>simethicone LIQD PO</i>	P	OTC; QL(31 ML per 30 day(s) retail)
ESTRACE TABS (Use estradiol)	NP		<i>simethicone SUSP</i>	P	OTC; QL(31 ML per 30 day(s) retail)
<i>estradiol PTTW</i>	P	QL(8 EA per fill retail)	Bile Acid Synthesis Disorder Agents		
<i>estradiol PTWK</i>	P	QL(4 EA per fill retail)	CHOLBAM	P	SP; PA
<i>estradiol TABS</i>	P		Farnesoid X Receptor (FXR) Agonists		
MINIVELLE PTTW (Use estradiol)	NP	QL(8 EA per fill retail)	OCALIVA	P	QL(1 EA daily); SP; PA
PREMARIN TABS	P	QL(1 EA daily)	Gallstone Solubilizing Agents		
VIVELLE-DOT PTTW (Use estradiol)	NP	QL(8 EA per fill retail)	<i>chenodiol</i>	P	SP; PA
FLUOROQUINOLONES - Drugs to Treat Bacterial Infections			CTEXLI 250 MG	P	SP; PA
Fluoroquinolones			URSO 250 TABS (Use <i>ursodiol</i>)	NP	QL(7 EA daily)
<i>ciprofloxacin hcl TABS 250 MG, 500 MG, 750 MG</i>	P		<i>ursodiol CAPS</i>	P	
<i>ciprofloxacin hcl TABS 100 MG</i>	P	QL(6 EA per fill retail)	<i>ursodiol TABS 250 MG</i>	P	QL(7 EA daily)
CIPRO TABS 250 MG, 500 MG (Use <i>ciprofloxacin hcl</i>)	NP		Gastrointestinal Chloride Channel Activators		
<i>levofloxacin TABS</i>	P	QL(1 EA daily; 14 EA per fill retail)	AMITIZA (Use <i>lubiprostone</i>)	NP	PA
<i>ofloxacin 400 MG</i>	P	QL(56 EA per fill retail)	<i>lubiprostone</i>	P	PA
GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs			Gastrointestinal Stimulants		
Antiflatulents			GIMOTI SOLN NA	P	SP; PA
MYLICON INFANTS GAS RELIEF SUSP (Use <i>simethicone</i>)	NP	OTC; QL(31 ML per 30 day(s) retail)	<i>metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML</i>	P	
<i>simethicone CHEW 80 MG</i>	P	OTC	<i>metoclopramide hcl TABS</i>	P	
			REGLAN TABS (Use <i>metoclopramide hcl</i>)	NP	
			Ileal Bile Acid Transporter (IBAT) Inhibitors		
			BYLVAY (PELLETS) CPSP	P	SP; PA
			BYLVAY CAPS	P	SP; PA
			LIVMARLI	P	SP; PA
			Inflammatory Bowel Agents		
			APRISO CP24 (Use <i>mesalamine</i>)	NP	

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AVSOLA	P	SP; PA
AZULFIDINE EN-TABS TBEC (Use sulfasalazine)	NP	
AZULFIDINE TABS (Use sulfasalazine)	NP	
balsalazide disodium CAPS	P	QL(9 EA daily)
COLAZAL CAPS (Use balsalazide disodium)	NP	QL(9 EA daily)
DELZICOL CPDR (Use mesalamine)	NP	
ENTYVIO SOLR	P	SP; PA
LIALDA TBEC (Use mesalamine)	NP	
mesalamine CP24	P	
mesalamine CPDR	P	
mesalamine ENEM	P	QL(60 ML daily)
mesalamine TBEC	P	
OTULFI SOLN IV 130 MG/26ML	P	SP; PA
PYZCHIVA 130 MG/26ML	P	SP; PA
SELARSDI SOLN IV 130 MG/26ML	P	SP; PA
SFROWASA ENEM	P	
STELARA 130 MG/26ML	P	SP; PA
STEQEYMA	P	SP; PA
sulfasalazine TABS	P	
sulfasalazine TBEC	P	
USTEKINUMAB 130 MG/26ML	P	SP; PA
USTEKINUMAB-TTWE	NP	SP
Intestinal Acidifiers		
lactulose (encephalopathy)	P	
Phosphate Binder Agents		
calcium acetate (phosphate binder) CAPS	P	
Short Bowel Syndrome (SBS) Agents		

Drug Name	Drug Tier	Requirements/ Limits
GATTEX	P	SP; PA
Tryptophan Hydroxylase Inhibitors		
XERMELO	P	SP; PA
GENITOURINARY AGENTS - MISCELLANEOUS -		
Miscellaneous Drugs to Treat Reproductive Organs and Urinary System		
Alkalinizers		
potassium citrate (alkalinizer) TBCR	P	
sodium citrate & citric acid	P	QL(500 ML per 30 day(s) retail); RX/OTC
sodium citrate & citric acid	NP	RX/OTC
UROCIT-K 10 TBCR (Use potassium citrate (alkalinizer))	NP	
UROCIT-K 5 TBCR (Use potassium citrate (alkalinizer))	NP	
Cystinosis Agents		
CYSTAGON CAPS	P	SP; PA
PROCYSBI CPDR	P	SP; PA
PROCYSBI PACK	P	SP; PA
Genitourinary Irrigants		
sodium chloride (gu irrigant) 0.9 %	P	
Hyperoxaluria Agents		
OXLUMO	P	SP; PA
Prostatic Hypertrophy Agents		
finasteride	P	QL(1 EA daily)
PROSCAR (Use finasteride)	NP	QL(1 EA daily)
tamsulosin hcl	P	QL(2 EA daily)
Urinary Analgesics		
AZO URINARY PAIN RELIEF TABS (Use phenazopyridine hcl)	NF	

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<i>phenazopyridine hcl TABS 100 MG, 200 MG</i>	P		ALPHANATE SOLR	P	SP; PA
PYRIDIDIUM TABS (<i>Use phenazopyridine hcl</i>)	NP		ALPHANINE SD 500 UNIT, 1000 UNIT, 1500 UNIT	P	SP; PA
Urinary Stone Agents			ALPROLIX	P	SP; PA
THIOLA EC TBEC (<i>Use tiopronin</i>)	NP	SP; PA	BENEFIX KIT	P	SP; PA
THIOLA TABS (<i>Use tiopronin</i>)	NP	SP; PA	COAGADEX	P	SP; PA
<i>tiopronin TABS</i>	P	SP; PA	CORIFACT	P	SP; PA
<i>tiopronin TBEC</i>	P	SP; PA	ELOCTATE	P	SP; PA
Vesicoureteral Reflux (VUR) Agents			ESPEROCT 500 UNIT, 1000 UNIT, 1500 UNIT, 2000 UNIT, 3000 UNIT	P	SP; PA
DEFLUX	P	SP; PA	FEIBA	P	SP; PA
GOUT AGENTS - Drugs to Treat Gout			FIBRYGA	P	SP; PA
Gout Agent Combinations			HEMLIBRA 30 MG/ML, 60 MG/0.4ML, 105 MG/0.7ML, 150 MG/ML	P	SP; PA
<i>colchicine w/ probenecid</i>	P		HEMOFIL M SOLR 250 UNIT, 500 UNIT, 1000 UNIT, 1700 UNIT	P	SP; PA
Gout Agents			HUMATE-P SOLR	P	SP; PA
<i>allopurinol 100 MG, 300 MG</i>	P		IDELVION	P	SP; PA
<i>colchicine TABS</i>	P	QL(6 EA per fill retail)	IXINITY SOLR	P	SP; PA
COLCRYS TABS (<i>Use colchicine</i>)	NP	QL(6 EA per fill retail)	JIVI	P	SP; PA
KRYSTEXXA	P	SP; PA	KCENTRA	P	SP; PA
ZYLOPRIM (<i>Use allopurinol</i>)	NP		KOATE-DVI SOLR 500 UNIT, 1000 UNIT	P	SP; PA
Uricosurics			KOATE SOLR	P	SP; PA
<i>probenecid</i>	P		KOGENATE FS KIT	P	SP; PA
HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders			KOVALTRY	P	SP; PA
Antihemophilic Products			NOVOSEVEN RT	P	SP; PA
ADVATE	P	SP; PA	NUWIQ KIT	P	SP; PA
ADYNOVATE	P	SP; PA	NUWIQ SOLR	P	SP; PA
AFSTYLA 250 UNIT, 500 UNIT, 1000 UNIT, 1500 UNIT, 2000 UNIT, 2500 UNIT	P	SP; PA	OBIZUR	P	SP; PA
			PROFILNINE	P	SP; PA
			REBINYN	P	SP; PA
			RECOMBINATE SOLR	P	SP; PA
			RIASTAP	P	SP; PA
			RIXUBIS SOLR	P	SP; PA

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SEVENFACT	P	SP; PA	CABLIVI	P	SP; PA
TRETTEN	P	SP; PA	<i>cilostazol</i>	P	QL(2 EA daily)
VONVENDI	P	SP; PA	<i>clopidogrel bisulfate 75 MG</i>	P	
WILATE KIT	P	SP; PA	<i>dipyridamole</i>	P	
XYNTHA	P	SP; PA	EFFIENT (<i>Use prasugrel hcl</i>)	NP	QL(1 EA daily)
XYNTHA SOLOFUSE	P	SP; PA	PLAVIX 75 MG (<i>Use clopidogrel bisulfate</i>)	NP	
Bradykinin B2 Receptor Antagonists			<i>prasugrel hcl</i>	P	QL(1 EA daily)
FIRAZYR SOSY (<i>Use icatibant acetate</i>)	NP	SP; PA	<i>ticagrelor 60 MG, 90 MG</i>	P	QL(2 EA daily)
<i>icatibant acetate SOSY</i>	P	SP; PA	Pyruvate Kinase Activators		
Complement Inhibitors			PYRUKYND TAPER PACK TBPK	P	SP; PA
BERINERT KIT	P	SP; PA	PYRUKYND TABS	P	SP; PA
CINRYZE SOLR IV	P	SP; PA	Thrombolytic Agent - Misc		
ENJAYMO	P	SP; PA	DEFITELIO	P	SP; PA
HAEGARDA SOLR SC	P	SP; PA	HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders		
RUCONEST	P	SP; PA	Agents for Gaucher Disease		
TAVNEOS	P	SP; PA	CERDELGA	P	SP; PA
Hematorheologic Agents			CEREZYME 400 UNIT	P	SP; PA
<i>pentoxifylline</i>	P		<i>miglustat</i>	P	SP; PA
Hemin			ZAVESCA (<i>Use miglustat</i>)	NP	SP; PA
PANHEMATIN 350 MG	P	SP; PA	Agents for Sickle Cell Disease		
Human Protein C			DROXIA CAPS	P	
CEPROTIN	P	SP; PA	ENDARI (<i>Use glutamine (sickle cell)</i>)	NP	SP; PA
Plasma Kallikrein Inhibitors			<i>glutamine (sickle cell)</i>	P	SP; PA
KALBITOR	P	SP; PA	OXBRYTA TABS 500 MG	P	PA
ORLADEYO	P	SP; PA	OXBRYTA TBSO	P	PA
TAKHZYRO SOLN	P	SP; PA	SIKLOS TABS	P	PA
TAKHZYRO SOSY	P	SP; PA	Cobalamins		
Plasma Proteins			<i>cyanocobalamin SOLN IJ 1000 MCG/ML</i>	P	QL(10 ML per 270 day(s) retail)
RYPLAZIM	P	SP; PA			
THROMBATE III	P	SP; PA			
Platelet Aggregation Inhibitors					
BRILINTA 60 MG, 90 MG (<i>Use ticagrelor</i>)	NP	QL(2 EA daily)			

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Folic Acid/Folates			<i>ferrous sulfate SOLN 15 MG/ML, 15 MG/ML</i>	P	OTC; QL(3.4 ML daily)
<i>folic acid TABS 400 MCG, 800 MCG</i>	P	OTC; QL(1 EA daily)	<i>ferrous sulfate TABS 325 MG, 65 MG, 325 MG</i>	P	OTC; AL(Up to 50 yrs old)
<i>folic acid TABS 1 MG</i>	P	RX/OTC	<i>ferrous sulfate TBEC</i>	P	OTC; AL(Up to 50 yrs old)
Hematopoietic Growth Factors			FERROUS SULFATE TBEC (<i>Use ferrous sulfate</i>)	NP	OTC; AL(Up to 50 yrs old)
GRANIX SOLN	P	SP; PA	IRON CHEWS PEDIATRIC CHEW	P	OTC
GRANIX SOSY	P	SP; PA	IRON TABS 28 MG	P	OTC
LEUKINE SOLR IJ	P	SP; PA	<i>polysaccharide iron complex CAPS</i>	P	QL(1 EA daily)
MULPLETA	P	SP; PA	Stem Cell Mobilizers		
NEUPOGEN SOLN	P	SP; PA	MOZOBIL (<i>Use plerixafor</i>)	NP	SP; PA
NEUPOGEN SOSY	P	SP; PA	<i>plerixafor</i>	P	SP; PA
NIVESTYM SOLN	P	SP; PA	HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders		
NIVESTYM SOSY	P	SP; PA	Hemostatics - Systemic		
NYVEPRIA	P	SP; PA	AMICAR SOLN PO (<i>Use aminocaproic acid</i>)	NP	QL(236.5 ML per 30 day(s) retail); SP
RELEUKO SOLN	P	SP; PA	AMICAR TABS 1000 MG (<i>Use aminocaproic acid</i>)	NP	SP; PA
RELEUKO SOSY	P	SP; PA	AMICAR TABS 500 MG (<i>Use aminocaproic acid</i>)	NP	QL(24 EA per fill retail); SP
RETACRIT	P	SP; PA	<i>aminocaproic acid SOLN PO 0.25 GM/ML</i>	P	QL(236.5 ML per 30 day(s) retail); SP
ZARXIO	P	SP; PA	<i>aminocaproic acid SOLN IV 250 MG/ML</i>	P	SP; PA
Hematopoietic Mixtures			<i>aminocaproic acid TABS 1000 MG</i>	P	SP; PA
<i>ferrous fumarate-fa-b complex-c-zn-mg-mn-cu TABS</i>	P	QL(1 EA daily)	<i>aminocaproic acid TABS 500 MG</i>	P	QL(24 EA per fill retail); SP
HEMATINIC PLUS VIT/MINERALS TABS	P	QL(1 EA daily)	<i>tranexamic acid TABS</i>	P	QL(30 EA per 7 day(s) retail); AL(At least 12 yrs old)
Iron			HYPNOTICS/SEDATIVES/SLEEP DISORDER		
FER-IN-SOL SOLN (<i>Use ferrous sulfate</i>)	NP	OTC; QL(3.4 ML daily)			
FERRETTs TABS	P	OTC; QL(2 EA daily)			
<i>ferrous fumarate TABS</i>	P	OTC; QL(2 EA daily)			
FERROUS GLUCONATE TABS 324 MG	P	OTC; QL(100 EA per 30 day(s) retail); AL(Up to 50 yrs old)			
<i>ferrous sulfate SOLN 220 MG/5ML, 300 MG/6.8ML</i>	P	OTC; AL(Up to 50 yrs old)			

Drug Name	Drug Tier	Requirements/ Limits
AGENTS		
Antihistamine Hypnotics		
<i>diphenhydramine hcl (sleep) CAPS 50 MG</i>	P	OTC
<i>diphenhydramine hcl (sleep) TABS 25 MG</i>	P	OTC; QL(1 EA daily)
<i>diphenhydramine hcl (sleep) TABS 50 MG</i>	P	OTC
<i>doxylamine succinate (sleep)</i>	P	OTC
UNISOM SLEEPGELS CAPS (Use <i>diphenhydramine hcl (sleep)</i>)	NP	OTC
UNISOM SLEEPTABS (Use <i>doxylamine succinate (sleep)</i>)	NP	OTC
Barbiturate Hypnotics		
<i>phenobarbital ELIX</i>	P	
<i>phenobarbital TABS</i>	P	
Non-Barbiturate Hypnotics		
AMBIEN TABS (Use <i>zolpidem tartrate</i>)	NP	QL(14 EA per 31 day(s) retail); AL(At least 21 yrs old)
<i>flurazepam hcl</i>	P	AL(At least 18 yrs old - Up to 65 yrs old)
HALCION 0.25 MG (Use <i>triazolam</i>)	NP	QL(1 EA daily); AL(At least 18 yrs old)
<i>midazolam hcl SOLN IJ</i>	P	
MIDAZOLAM HCL SOLN IJ	P	
RESTORIL 15 MG, 30 MG (Use <i>temazepam</i>)	NP	AL(At least 18 yrs old)
<i>temazepam 15 MG, 30 MG</i>	P	AL(At least 18 yrs old)
<i>triazolam</i>	P	QL(1 EA daily); AL(At least 18 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
<i>zaleplon 5 MG</i>	P	QL(1 EA daily); AL(At least 18 yrs old)
<i>zaleplon 10 MG</i>	P	QL(2 EA daily); AL(At least 18 yrs old)
<i>zolpidem tartrate TABS</i>	P	QL(14 EA per 31 day(s) retail); AL(At least 21 yrs old)
LAXATIVES - Bowel Treatment Drugs		
Bulk Laxatives		
<i>calcium polycarbophil TABS</i>	P	OTC; QL(10 EA daily)
EVAC POWD (Use <i>psyllium</i>)	NP	OTC
METAMUCIL FREE & NATURAL POWD (Use <i>psyllium</i>)	NP	
METAMUCIL POWD (Use <i>psyllium</i>)	NP	OTC
NATURAL FIBER LAXATIVE POWD	P	OTC
<i>psyllium CAPS 0.52 GM</i>	P	OTC
<i>psyllium POWD 43 %</i>	P	
<i>psyllium POWD 43 %</i>	NP	
<i>psyllium POWD 28.3 %, 30 %, 33 %, 48.57 %, 58.6 %, 100 %</i>	P	OTC
Laxative Combinations		
GOLYTELY SOLR (Use <i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate</i>)	NP	QL(4000 ML per fill retail)
<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR</i>	P	QL(4000 ML per fill retail)
<i>peg 3350-potassium chloride-sod bicarbonate-sod chloride</i>	P	QL(4000 ML per fill retail)
PEG-PREP	P	
<i>sennosides-docusate sodium TABS</i>	P	OTC; QL(4 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SENOKOT S TABS (<i>Use sennosides-docusate sodium</i>)	NP	OTC; QL(4 EA daily)	<i>bisacodyl TBEC</i>	P	OTC; QL(1 EA daily)
<i>sodium sulfate-potassium sulfate-magnesium sulfate</i>	P		DULCOLAX PINK LAXATIVE TBEC (<i>Use bisacodyl</i>)	NP	OTC; QL(1 EA daily)
SUPREP BOWEL PREP KIT (<i>Use sodium sulfate-potassium sulfate-magnesium sulfate</i>)	NP		DULCOLAX SUPP (<i>Use bisacodyl</i>)	NP	OTC; QL(12 EA per fill retail)
Laxatives - Miscellaneous			DULCOLAX TBEC (<i>Use bisacodyl</i>)	NP	OTC; QL(1 EA daily)
GLYCERIN (ADULT) SUPP (<i>Use glycerin (laxative)</i>)	NP	OTC	<i>sennosides TABS 8.6 MG</i>	P	OTC; QL(12 EA per fill retail)
<i>glycerin (laxative) SUPP 2 GM</i>	P	OTC	SENOKOT TABS (<i>Use sennosides</i>)	NP	OTC; QL(12 EA per fill retail)
<i>lactulose SOLN</i>	P		Surfactant Laxatives		
MIRALAX POWD (<i>Use polyethylene glycol 3350</i>)	NP	QL(34 GM daily)	COLACE CLEAR CAPS (<i>Use docusate sodium</i>)	NP	OTC
<i>polyethylene glycol 3350 POWD</i>	P	QL(34 GM daily)	COLACE CAPS 100 MG (<i>Use docusate sodium</i>)	NP	OTC; QL(3 EA daily)
SORBITOL PO 70 %	P	OTC	<i>docusate sodium CAPS 100 MG, 250 MG</i>	P	OTC; QL(3 EA daily)
Saline Laxatives			<i>docusate sodium CAPS 50 MG</i>	P	OTC
FLEET ENEMA ENEM (<i>Use sodium phosphates</i>)	NP	OTC	<i>docusate sodium LIQD 50 MG/5ML, 100 MG/10ML</i>	P	OTC
FLEET PEDIATRIC ENEM (<i>Use sodium phosphates</i>)	NP	OTC	DOCUSATE SODIUM SYRP	P	OTC
FLEET SALINE ENEMA ENEM (<i>Use sodium phosphates</i>)	NP	OTC	<i>docusate sodium TABS</i>	P	OTC
<i>magnesium citrate 1.745 GM/30ML</i>	P	OTC	MACROLIDES - Drugs to Treat Bacterial Infections		
<i>magnesium hydroxide SUSP 7.75 %, 400 MG/5ML, 1200 MG/15ML, 2400 MG/30ML</i>	P	OTC; QL(992 ML per 30 day(s) retail)	Azithromycin		
<i>sodium phosphates ENEM</i>	P	OTC	<i>azithromycin PACK</i>	P	QL(2 EA per fill retail)
Stimulant Laxatives			<i>azithromycin SUSR 100 MG/5ML</i>	P	QL(15 ML per fill retail)
<i>bisacodyl SUPP</i>	P	OTC; QL(12 EA per fill retail)	<i>azithromycin SUSR 200 MG/5ML</i>	P	QL(30 ML per fill retail)
			<i>azithromycin TABS 250 MG</i>	P	QL(6 EA per fill retail)
			<i>azithromycin TABS 500 MG</i>	P	QL(4 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>azithromycin TABS 600 MG</i>	P	QL(8 EA per 28 day(s) retail)
ZITHROMAX TRI-PAK TABS (<i>Use azithromycin</i>)	NP	QL(4 EA daily)
ZITHROMAX Z-PAK TABS (<i>Use azithromycin</i>)	NP	QL(6 EA per fill retail)
ZITHROMAX PACK	P	QL(2 EA per fill retail)
ZITHROMAX SUSR 200 MG/5ML (<i>Use azithromycin</i>)	NP	QL(30 ML per fill retail)
ZITHROMAX SUSR 100 MG/5ML (<i>Use azithromycin</i>)	NP	QL(15 ML per fill retail)
ZITHROMAX TABS 500 MG (<i>Use azithromycin</i>)	NP	QL(4 EA daily)
ZITHROMAX TABS 250 MG (<i>Use azithromycin</i>)	NP	QL(6 EA per fill retail)
Clarithromycin		
<i>clarithromycin SUSR 250 MG/5ML</i>	P	QL(200 ML per fill retail)
<i>clarithromycin SUSR 125 MG/5ML</i>	P	QL(100 ML per fill retail)
<i>clarithromycin TABS</i>	P	QL(28 EA per fill retail)
<i>clarithromycin TB24</i>	P	QL(14 EA per fill retail)
Erythromycins		
E.E.S. GRANULES SUSR (<i>Use erythromycin ethylsuccinate</i>)	NP	
ERYPED 200 SUSR (<i>Use erythromycin ethylsuccinate</i>)	NP	
ERYPED 400 SUSR (<i>Use erythromycin ethylsuccinate</i>)	NP	
<i>erythromycin base CPEP</i>	P	
<i>erythromycin base TABS</i>	P	
<i>erythromycin base TBEC</i>	P	
<i>erythromycin ethylsuccinate SUSR</i>	P	

Drug Name	Drug Tier	Requirements/ Limits
<i>erythromycin ethylsuccinate TABS</i>	P	
<i>erythromycin stearate TABS 250 MG</i>	P	
MEDICAL DEVICES AND SUPPLIES		
Bandages-Dressings-Tape		
GAUZE SPONGES	P	RX/OTC
Contraceptives		
CONDOMS-MISC	P	QL (36 ea per 30 days retail); OTC
Diabetic Supplies		
BIOTEL CARE BLOOD GLUCOSE KIT	NP	RX/OTC
CARESENS N PLUS BT KIT	NP	RX/OTC
CONTOUR NEXT EZ KIT	NP	RX/OTC
CONTOUR NEXT GEN MONITOR KIT	NP	RX/OTC
CONTOUR PLUS BLUE KIT	NP	RX/OTC
DEXCOM G6 RECEIVER	NP	
DEXCOM G7 RECEIVER	NP	
DEXCOM G7 SENSOR	NP	
EASY MAX T1 GLUCOSE SYSTEM KIT	NP	RX/OTC
EASY TOUCH HEALTHPRO GLUCOSE KIT	NP	RX/OTC
EVERSENSE 365 SENSOR/HOLDER	NP	
EVERSENSE E3 SENSOR/HOLDER	NP	
FREESTYLE LIBRE 14 DAY READER	P	QL(1 EA per 365 day(s) retail); PA
FREESTYLE LIBRE 14 DAY SENSOR	P	QL(2 EA per 28 day(s) retail); PA

Drug Name	Drug Tier	Requirements/ Limits
FREESTYLE LIBRE 2 PLUS SENSOR	P	QL(2 EA per 28 day(s) retail); PA
FREESTYLE LIBRE 2 READER	P	QL(1 EA per 365 day(s) retail); PA
FREESTYLE LIBRE 2 SENSOR	P	QL(2 EA per 28 day(s) retail); PA
FREESTYLE LIBRE 3 PLUS SENSOR	P	QL(2 EA per 28 day(s) retail); PA
FREESTYLE LIBRE 3 READER	P	QL(1 EA per 365 day(s) retail); PA
FREESTYLE LIBRE 3 SENSOR	P	QL(2 EA per 28 day(s) retail); PA
FREESTYLE LIBRE READER	P	QL(1 EA per 365 day(s) retail); PA
FREESTYLE LITE KIT	NP	RX/OTC
GUARDIAN 4 GLUCOSE SENSOR	NP	
GUARDIAN REAL-TIME REPLACE PED	NP	
LANCETS-MISC	P	QL (6.67 ea daily); OTC
LANCING DEVICE-MISC	P	OTC
MM BLOOD GLUCOSE SYSTEM KIT	NP	RX/OTC
ONETOUCH ULTRA 2 KIT	P	RX/OTC
ONETOUCH VERIO FLEX SYSTEM KIT	P	RX/OTC
ONETOUCH VERIO REFLECT KIT	P	RX/OTC
QUICK TOUCH BLOOD GLUCOSE KIT	NP	RX/OTC
SIMPLERA SENSOR	NP	
SIMPLERA SYNC SENSOR	NP	
SIMPLERA SYSTEM	NP	
TEMPO WELCOME KIT	NP	RX/OTC
Misc. Devices		

Drug Name	Drug Tier	Requirements/ Limits
ALCOHOL PREP PADS-MISC	P	OTC
Optical and Ophthalmic Supplies		
SUSVIMO OCULAR IMPLANT	P	SP; PA
Parenteral Therapy Supplies		
ADVOCATE INSULIN PEN NEEDLE	NP	RX/OTC
AQINJECT PEN NEEDLE	NP	RX/OTC
ASSURE ID DUO PRO PEN NEEDLES	NP	RX/OTC
ASSURE ID PRO PEN NEEDLES	NP	RX/OTC
AUM INSULIN SAFETY PEN NEEDLE	NP	RX/OTC
AUM PEN NEEDLE	NP	RX/OTC
BD PEN NEEDLES	P	QL (5 ea daily); OTC
COMFORT EZ PRO PEN NEEDLES	NP	RX/OTC
DROPLET PEN NEEDLES	NP	
EASY COMFORT INSULIN SYRINGE	P	QL(5 EA daily)
EASY COMFORT PEN NEEDLES	NP	
EMBECTA AUTOSHIELD DUO	P	RX/OTC
EMBECTA PEN NEEDLE NANO	NP	RX/OTC
EMBECTA PEN NEEDLE NANO	P	RX/OTC
EMBECTA PEN NEEDLE NANO 2 GEN	NP	RX/OTC
EMBECTA PEN NEEDLE NANO 2 GEN	P	RX/OTC
EMBECTA PEN NEEDLE ULTRAFINE	NP	
EMBECTA PEN NEEDLE ULTRAFINE	P	

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
EMBRACE PEN NEEDLES	NP	RX/OTC	ACTIVITY POUCH MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
GNP PEN NEEDLES	NP	RX/OTC	ADAPTER PED DISPOSABLE MISC	P	QL(1 EA per 180 day(s) retail); RX/OTC
INSULIN SYRINGES	P	QL (5 ea daily); OTC	ADULT AEROSOL MASK MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
INSULIN SYRINGES-MISC	P	QL (5 ea daily); RX/OTC	ADULT DISPOSABLE MISC	P	QL(1 EA per 180 day(s) retail); RX/OTC
INSUPEN PEN NEEDLES	NP	RX/OTC	ADULT MASK LARGE MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
PEN NEEDLE/5-BEVEL TIP	NP	RX/OTC	AEROECLIPSE EZ TWIST TUBING MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
PEN NEEDLES	NP	RX/OTC	AEROECLIPSE MASK LARGE MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
PURE COMFORT SAFETY PEN NEEDLE	NP	RX/OTC	AEROECLIPSE MASK MEDIUM MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
QUICK TOUCH INSULIN PEN NEEDLE	NP		AEROECLIPSE MASK SMALL MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
SURE COMFORT PEN NEEDLES	NP	RX/OTC	AEROTRACH PLUS MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
TECHLITE PLUS PEN NEEDLES	NP	RX/OTC	AIRS PEDIATRIC AEROSOL MASK MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
TRUE COMFORT PEN NEEDLES	NP	RX/OTC	AIRZONE PEAK FLOW METER	P	RX/OTC
TRUE COMFORT PRO PEN NEEDLES	NP	RX/OTC	ALL FLOW 1000 PFT FILTER MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
TRUE COMFORT SAFETY PEN NEEDLE	NP	RX/OTC	ASSESS PEAK FLOW METER	P	RX/OTC
ULTIGUARD SAFEPAK PEN NEEDLE	NP	RX/OTC	BREATHE EASE NEB MASK/CHILD MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
UNIFINE OTC PEN NEEDLES	NP	RX/OTC	BREATHE EASE NEB MASK/INFANT MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
UNIFINE PROTECT PEN NEEDLE	NP	RX/OTC	BREATHE EASE PEAK FLOW METER	P	RX/OTC
UNIFINE SAFECONTROL PEN NEEDLE	NP	RX/OTC			
VERIFINE INSULIN PEN NEEDLE	NP	RX/OTC			
VERIFINE PLUS PEN NEEDLE	NP	RX/OTC			
Respiratory Therapy Supplies					
ACE AEROSOL CLOUD ENHANCER MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
BUBBLES THE FISH II PEDI MASK MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	EASY FLOW AIR NOZZLE MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
CARETOUCH 2 CPAP HOSE HANGER MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	EASY FLOW HEPA FILTER MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
CARETOUCH CPAP & BIPAP HOSE MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	EBASE CONTROLLER KIT MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
CARETOUCH CPAP MASK WIPES MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	EXPIRATORY MOUTHPIECE MISC	P	QL(1 EA per 180 day(s) retail); RX/OTC
CARETOUCH CPAP PRE-WASH SOLN MISC	P	QL(1 ML per 360 day(s) retail); RX/OTC	FILTER AIR PP MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
CARETOUCH CPAP TUBE BRUSH MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	FLEXICHAMBER ADULT MASK/SMALL	P	QL(1 EA per 360 day(s) retail); RX/OTC
CARETOUCH UNIVERSL CPAP FILTER MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	FLEXICHAMBER CHILD MASK/LARGE	P	QL(1 EA per 360 day(s) retail); RX/OTC
CLEVER CHOICE PEAK FLOW METER	P	RX/OTC	FLEXICHAMBER CHILD MASK/SMALL	P	QL(1 EA per 360 day(s) retail); RX/OTC
CO MONITOR REPLACEMENT PIECES MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	FLYP HYPERSONIQ CARTRIDGE MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
DISPOSABLE FULL RANGE MISC	P	QL(1 EA per 180 day(s) retail); RX/OTC	FULL KIT NEBULIZER SET MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
DISPOSABLE LOW RANGE/PEDIATRIC MISC	P	QL(1 EA per 180 day(s) retail); RX/OTC	HUDSON RCI AEROSOL MASK ADULT MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
DISPOSABLE LOW RANGE MISC	P	QL(1 EA per 180 day(s) retail); RX/OTC	INNOSPIRE REPLACEMENT FILTER MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
DISPOSABLE PAPER MISC	P	QL(1 EA per 180 day(s) retail); RX/OTC	KOKO PEAK PRO MOUTHPIECE MISC	P	QL(1 EA per 180 day(s) retail); RX/OTC
DISPOSABLE UNIVERSAL RANGE MISC	P	QL(1 EA per 180 day(s) retail); RX/OTC	LITETOUCH MASK LARGE MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
EASY FLOW 300 MM HOSE MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	LITETOUCH MASK MEDIUM MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
EASY FLOW 400 MM HOSE MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	LITETOUCH MASK SMALL MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
LUNG PERFORM PEAK FLOW METER	P	RX/OTC	PANDA MASK MEDIUM	P	QL(1 EA per 360 day(s) retail); RX/OTC
MASK VORTEX/CHILD/FROG	P	QL(1 EA per 360 day(s) retail); RX/OTC	PANDA MASK SMALL	P	QL(1 EA per 360 day(s) retail); RX/OTC
MASK VORTEX/TODDLER/LAD YBUG	P	QL(1 EA per 360 day(s) retail); RX/OTC	PARI ALTERA NEBULIZER HANDSET MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
MICROLIFE DIGITAL PEAK FLOW	P	RX/OTC	PARI BABY CONVERSION KIT MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
MINI WRIGHT PEAK FLOW METER	P	RX/OTC	PARI BUBBLES PEDIATRIC MASK MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
MINIELITE FILTER REPLACEMENTS MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	PARI ERAPID NEBULIZER HANDSET MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
NEBULIZER AIR TUBE/PLUGS MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	PARI EXPIRATORY FILTER SET DEVI	P	QL(1 EA per 360 day(s) retail); RX/OTC
NEBULIZER MASK ADULT/TUBING MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	PARI MASK SET MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
NEBULIZER MASK ADULT MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	PARI SMARTMASK BABY/ELBOW MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
NEBULIZER MASK CHILD MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	PARI SOFT PLASTIC ADULT MASK MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
NEBULIZER MASK PED/TUBING MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	PARI SOFT PLASTIC PED MASK MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
NOSE CLIP MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	PARI VORTEX ADULT MASK	P	QL(1 EA per 360 day(s) retail); RX/OTC
OMBRA COMPRESSOR AIR FILTERS MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	PARI VORTEX PEDIATRIC MASK	P	QL(1 EA per 360 day(s) retail); RX/OTC
ONE FLOW TESTER MISC	P	QL(1 EA per 180 day(s) retail); RX/OTC	PEAK A-I-R FLOW METER	P	RX/OTC
ONE-WAY VALVED EXPIRATORY MISC	P	QL(1 EA per 180 day(s) retail); RX/OTC	PEAK AIR PEAK FLOW METER	P	RX/OTC
ONE-WAY VALVED INSPIRATORY MISC	P	QL(1 EA per 180 day(s) retail); RX/OTC	PEAK FLOW METER UNIVERSAL RANG	P	RX/OTC
PANDA MASK LARGE	P	QL(1 EA per 360 day(s) retail); RX/OTC	PED DISPOSABLE MISC	P	QL(1 EA per 180 day(s) retail); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PEDIATRIC MOUTHPIECE MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	REUSABLE COMFORTSEAL MASK-MED MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
PEDIATRIC PANDA MASK	P	QL(1 EA per 360 day(s) retail); RX/OTC	REUSABLE COMFORTSEAL MASK-SML MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
PERSONAL BEST FULL RANGE	P	RX/OTC	SAMI THE SEAL FILTERS MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
PFLEX MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	SIDESTREAM ADULT FACE MASK MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
PHARMACIST CHOICE MASK WIPES MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	SIDESTREAM PEDIATRIC FACE MASK MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
PIKO 1	P	RX/OTC	SIDESTREAM PLS ADULT FACE MASK MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
PILLOW MASK/ADULT MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	SILICONE MASK/ADULT MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
PILLOW MASK/CHILD MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	SILICONE MASK/INFANT MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
PILLOW MASK/PEDIATRIC MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	SILICONE MASK/PEDIATRIC MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
POCKET PEAK FLOW METER	P	RX/OTC	SOOTHENEB NBL 100 ADULT MASK MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
POCKETPEAK PEAK FLOW METER	P	RX/OTC	SOOTHENEB NBL 100 CHILD MASK MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
PRONEB ULTRA FILTER SET MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	SOOTHENEB NBL 100 MED CUP MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
PURE COMFORT FLOW METER ADULT	P	RX/OTC	SOOTHENEB NBL 100 MESH CAP MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC
PURE COMFORT FLOW METER CHILD	P	RX/OTC	SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES	P	QL (3 ea per 180days retail)
PURE COMFORT PEAK FLOW MISC	P	QL(1 EA per 180 day(s) retail); RX/OTC	SPACER/AEROSOL-HOLDING CHAMBERS	P	QL (2 ea per 360 days retail)
REPLACEMENT AIR FILTER MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	SPACERS AND BREATHING CHAMBERS-MISC	P	RX/OTC
REPLACEMENT FILTERS MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC			
REUSABLE COMFORTSEAL MASK-LRG MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
STRIVE DUAL ZONE PEAK FLOW MTR	P	RX/OTC	IMITREX STATDOSE SYSTEM SOAJ 6 MG/0.5ML (<i>Use sumatriptan succinate</i>)	NP	QL(2 ML per 30 day(s) retail); AL(At least 12 yrs old)
THRESHOLD IMT MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	IMITREX TABS (<i>Use sumatriptan succinate</i>)	NP	QL(9 EA per 30 day(s) retail); AL(At least 12 yrs old)
TRUZONE PEAK FLOW METER	P	RX/OTC	MAXALT-MLT TBDP 10 MG (<i>Use rizatriptan benzoate</i>)	NP	QL(0.4 EA daily)
TUBING/WING TIP MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	MAXALT TABS 10 MG (<i>Use rizatriptan benzoate</i>)	NP	QL(12 EA per 30 day(s) retail); AL(At least 6 yrs old)
ULTRA NEB ACCESSORIES KIT MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	<i>naratriptan hcl</i>	P	QL(9 EA per 30 day(s) retail); AL(At least 18 yrs old)
WINDMILL TRAINER MISC	P	QL(1 EA per 360 day(s) retail); RX/OTC	RELPAK (<i>Use eletriptan hydrobromide</i>)	NP	QL(6 EA per 30 day(s) retail); AL(At least 18 yrs old)
MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches			<i>rizatriptan benzoate TABS</i>	P	QL(12 EA per 30 day(s) retail); AL(At least 6 yrs old)
Migraine Combinations			<i>rizatriptan benzoate TBDP</i>	P	QL(0.4 EA daily)
CAFERGOT TABS (<i>Use ergotamine w/ caffeine</i>)	NP	AL(At least 18 yrs old)	<i>sumatriptan</i>	P	QL(6 EA per 30 day(s) retail); AL(At least 12 yrs old)
<i>ergotamine w/ caffeine TABS</i>	P	AL(At least 18 yrs old)	<i>sumatriptan succinate SOAJ 6 MG/0.5ML</i>	P	QL(2 ML per 30 day(s) retail); AL(At least 12 yrs old)
Migraine Products			<i>sumatriptan succinate SOCT 6 MG/0.5ML</i>	P	QL(2 ML per 30 day(s) retail); AL(At least 12 yrs old)
<i>dihydroergotamine mesylate SOLN NA 4 MG/ML</i>	P	AL(At least 18 yrs old)	<i>sumatriptan succinate SOLN 6 MG/0.5ML</i>	P	QL(2.5 ML per 30 day(s) retail); AL(At least 12 yrs old)
MIGRANAL SOLN NA (<i>Use dihydroergotamine mesylate</i>)	NP	AL(At least 18 yrs old)			
Serotonin Agonists					
<i>eletriptan hydrobromide</i>	P	QL(6 EA per 30 day(s) retail); AL(At least 18 yrs old)			
IMITREX 5 MG/ACT, 20 MG/ACT (<i>Use sumatriptan</i>)	NP	QL(6 EA per 30 day(s) retail); AL(At least 12 yrs old)			
IMITREX STATDOSE REFILL SOCT 6 MG/0.5ML (<i>Use sumatriptan succinate</i>)	NP	QL(2 ML per 30 day(s) retail); AL(At least 12 yrs old)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>sumatriptan succinate TABS</i>	P	QL(9 EA per 30 day(s) retail); AL(At least 12 yrs old)	<i>oyster shell</i>	P	OTC
<i>zolmitriptan SOLN 5 MG</i>	P	QL(6 EA per 30 day(s) retail); AL(At least 12 yrs old)	OYSTER SHELL CALCIUM/D TABS 500 MG-200 UNIT	P	OTC
<i>zolmitriptan TABS</i>	P	QL(6 EA per 30 day(s) retail); AL(At least 18 yrs old)	PARVA-CAL 200 UNIT- 500 MG	P	OTC
<i>zolmitriptan TBDP</i>	P	QL(6 EA per 30 day(s) retail); AL(At least 18 yrs old)	QC CALCIUM 500MG-D3 TABS	P	OTC
ZOMIG SOLN 5 MG (<i>Use zolmitriptan</i>)	NP	QL(6 EA per 30 day(s) retail); AL(At least 12 yrs old)	Electrolyte Mixtures		
MINERALS & ELECTROLYTES			BIOLYTE SOLN	P	QL(1000 ML per fill retail)
Calcium			CERASPORT EX1 SOLN	P	QL(1000 ML per fill retail)
CALCIUM 600 +D HIGH POTENCY TABS	P	OTC; QL(2 EA daily)	CERASPORT SOLN	P	QL(1000 ML per fill retail)
<i>calcium carbonate- cholecalciferol TABS 10 MCG-600 MG, 20 MCG- 600 MG, 400 UNIT-600 MG, 800 UNIT-600 MG</i>	P	QL(2 EA daily)	ENFAMIL ENFALYTE SOLN	P	QL(1000 ML per fill retail)
<i>calcium carbonate- cholecalciferol TABS 200 UNIT-500 MG, 5 MCG- 500 MG, 500 MG-5 MCG</i>	P	OTC	EQUALYTE SOLN (<i>Use oral electrolytes</i>)	NP	QL(1000 ML per fill retail)
<i>calcium carbonate-vitamin d TABS 125 UNIT-250 MG, 250 MG-125 UNIT</i>	P	OTC	FT ELECTROLYTE SOLN	P	QL(1000 ML per fill retail)
<i>calcium carbonate-vitamin d TABS 600 MG-200 UNIT</i>	P	OTC; QL(2 EA daily)	GNP ELECTROLYTE SOLUTION SOLN 280 MG/360ML-370 MG/360ML-2.8 MG/360ML-440 MG/360ML, 9 GM/360ML- 280 MG/360ML-370 MG/360ML-2.8 MG/360ML-440 MG/360ML	P	QL(1000 ML per fill retail)
CALTRATE 600+D3 TABS (<i>Use calcium carbonate- cholecalciferol</i>)	NP	QL(2 EA daily)	GOODSENSE ELECTROLYTE ADV CARE SOLN	P	QL(1000 ML per fill retail)
CALTRATE BONE HEALTH TABS (<i>Use calcium carbonate- cholecalciferol</i>)	NP	QL(2 EA daily)	HYDRALYTE FREEZER POPS SOLN	P	QL(1000 ML per fill retail)
			HYDRALYTE SOLN	P	QL(1000 ML per fill retail)
			KINDERLYTE PREMAX SOLN	P	QL(1000 ML per fill retail)
			KINDERLYTE SOLN	P	QL(1000 ML per fill retail)
			<i>oral electrolytes SOLN</i>	P	QL(1000 ML per fill retail)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PEDIALYTE ADVANCED CARE SOLN (<i>Use oral electrolytes</i>)	NP	QL(1000 ML per fill retail)	K-TAB TBCR 10 MEQ (<i>Use potassium chloride</i>)	NP	
PEDIALYTE FREEZER POPS SOLN (<i>Use oral electrolytes</i>)	NP	QL(1000 ML per fill retail)	K-TAB TBCR 20 MEQ (<i>Use potassium chloride</i>)	NF	
PEDIALYTE IMMUNE SUPPORT SOLN	P	QL(1000 ML per fill retail)	<i>potassium bicarbonate TBEF</i>	P	
PEDIALYTE SINGLES SOLN (<i>Use oral electrolytes</i>)	NP	QL(1000 ML per fill retail)	<i>potassium chloride microencapsulated crystals er</i>	P	
PEDIALYTE SOLN (<i>Use oral electrolytes</i>)	NP	QL(1000 ML per fill retail)	<i>potassium chloride CPCR 8 MEQ</i>	P	QL(1 EA daily)
TRUELYTE SOLN	P	QL(1000 ML per fill retail)	<i>potassium chloride CPCR 10 MEQ</i>	P	
Fluoride			<i>potassium chloride PACK PO 20 MEQ</i>	P	
<i>sodium fluoride CHEW</i>	P	AL(Up to 15 yrs old)	<i>potassium chloride SOLN PO 10 %, 20 %, 10 %</i>	P	
<i>sodium fluoride SOLN</i>	P	AL(Up to 15 yrs old); RX/OTC	<i>potassium chloride TBCR 8 MEQ, 10 MEQ</i>	P	
SOLUVITA SOLN	P	AL(Up to 15 yrs old); RX/OTC	Zinc		
Magnesium			<i>zinc sulfate CAPS</i>	P	QL(100 EA per fill retail)
MAGNESIUM EXTRA STRENGTH CAPS	P	OTC	MISCELLANEOUS THERAPEUTIC CLASSES		
<i>magnesium oxide (mg supplement) TABS 241.5 MG, 400 MG, 400 MG</i>	P	OTC	Allogeneic Tissue		
MAGNESIUM OXIDE -MG SUPPLEMENT CAPS	P	OTC	RETHYMIC	P	SP; PA
MAGOX 400 TABS (<i>Use magnesium oxide (mg supplement)</i>)	NP	OTC	Chelating Agents		
Phosphate			DEPEN TITRATABS TABS (<i>Use penicillamine</i>)	NP	
K-PHOS-NEUTRAL (<i>Use pot phosphate monobasic w/ sod phosphate dibasic & monobasic</i>)	NP	QL(8 EA daily)	<i>penicillamine TABS</i>	P	
<i>pot phosphate monobasic w/ sod phosphate dibasic & monobasic</i>	P	QL(8 EA daily)	SYPRINE (<i>Use trientine hcl</i>)	NP	SP; PA
Potassium			<i>trientine hcl 500 MG</i>	P	SP
			<i>trientine hcl 250 MG</i>	P	SP; PA
			Enzymes		
			XIAFLEX	P	SP; PA
			Fecal Incontinence Bulking Agents		
			SOLESTA	P	SP; PA
			Immunomodulators		

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<i>lenalidomide</i>	P	SP; PA	NEORAL SOLN (<i>Use cyclosporine modified (for microemulsion)</i>)	NP	
REVLIMID	P	SP; PA	NULOJIX	P	SP; PA
REZUROCK	P	SP; PA	PROGRAF CAPS (<i>Use tacrolimus</i>)	NP	
THALOMID	P	SP; PA	PROGRAF PACK	P	PA
VYVGART	P	SP; PA	RAPAMUNE SOLN (<i>Use sirolimus</i>)	NP	
Immunosuppressive Agents			RAPAMUNE TABS (<i>Use sirolimus</i>)	NP	
ATGAM	P	SP; PA	SANDIMMUNE CAPS (<i>Use cyclosporine</i>)	NP	
<i>azathioprine TABS 75 MG, 100 MG</i>	P	PA	SANDIMMUNE SOLN IV 50 MG/ML	P	
<i>azathioprine TABS 50 MG</i>	P		<i>sirolimus SOLN</i>	P	
CELLCEPT CAPS (<i>Use mycophenolate mofetil</i>)	NP		<i>sirolimus TABS</i>	P	
CELLCEPT SUSR (<i>Use mycophenolate mofetil</i>)	NP		<i>tacrolimus CAPS</i>	P	
CELLCEPT TABS (<i>Use mycophenolate mofetil</i>)	NP		THYMOGLOBULIN	P	SP; PA
<i>cyclosporine modified (for microemulsion) CAPS</i>	P		Lymphatic Agents		
<i>cyclosporine modified (for microemulsion) SOLN</i>	P		SYLVANT	P	SP; PA
<i>cyclosporine CAPS</i>	P		PIK3CA-Related Overgrowth Spectrum (PROS) Agents		
<i>cyclosporine SOLN IV 50 MG/ML</i>	P		VIJOICE TBPK	P	SP; PA
ENSPRYNG	P	SP; PA	Potassium Removing Agents		
GAMIFANT	P	SP; PA	<i>sodium polystyrene sulfonate POWD</i>	P	
IMURAN TABS (<i>Use azathioprine</i>)	NP		<i>sodium polystyrene sulfonate SUSP CO 15 GM/60ML</i>	P	
LUPKYNIS	P	SP; PA	Progeria Treatment Agents		
<i>mycophenolate mofetil CAPS</i>	P		ZOKINVY	P	SP; PA
<i>mycophenolate mofetil SUSR</i>	P		Systemic Lupus Erythematosus Agents		
<i>mycophenolate mofetil TABS</i>	P		BENLYSTA SOAJ	P	SP; PA
<i>mycophenolate sodium</i>	P		BENLYSTA SOLR	P	SP; PA
MYFORTIC (<i>Use mycophenolate sodium</i>)	NP		BENLYSTA SOSY	P	SP; PA
NEORAL CAPS (<i>Use cyclosporine modified (for microemulsion)</i>)	NP		SAPHNELO	P	SP; PA

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MOUTH/THROAT/DENTAL AGENTS			Periodontal Products		
Anesthetics Topical Oral			ARESTIN	P	SP; PA
<i>lidocaine hcl (mouth-throat) 2 %</i>	P	QL(100 ML per fill retail)	Steroids - Mouth/Throat/Dental		
Anti-infectives - Throat			<i>triamcinolone acetonide (mouth)</i>	P	QL(5 GM per fill retail)
NYSTATIN (<i>Use nystatin (mouth-throat)</i>)	NP	QL(120 ML per fill retail)	Throat Products - Misc.		
<i>nystatin (mouth-throat)</i>	P	QL(120 ML per fill retail)	AQUORAL SOLN	P	QL(900 ML per fill retail); RX/OTC
Antiseptics - Mouth/Throat			BIOTENE DRY MOUTH MOIST SPRAY SOLN	P	QL(900 ML per fill retail); RX/OTC
<i>chlorhexidine gluconate (mouth-throat)</i>	P		CAPHOSOL SOLN	P	QL(900 ML per fill retail); RX/OTC
PERIDEX (<i>Use chlorhexidine gluconate (mouth-throat)</i>)	NP		CVS DRY MOUTH SOLN	P	QL(900 ML per fill retail); RX/OTC
Dental Products			EQL DRY MOUTH ORAL RINSE SOLN	P	QL(900 ML per fill retail); RX/OTC
PREVIDENT 5000 BOOSTER PLUS PSTE DT (<i>Use sodium fluoride (dental)</i>)	NP		MOI-STIR SOLN	P	QL(900 ML per fill retail); RX/OTC
PREVIDENT 5000 DRY MOUTH GEL (<i>Use sodium fluoride (dental)</i>)	NP		MOUTH KOTE REMINT SOLN	P	QL(900 ML per fill retail); RX/OTC
PREVIDENT 5000 KIDS PSTE DT (<i>Use sodium fluoride (dental)</i>)	NP		MOUTH KOTE SOLN	P	QL(900 ML per fill retail); RX/OTC
PREVIDENT 5000 ORTHO DEFENSE PSTE DT (<i>Use sodium fluoride (dental)</i>)	NP		NUMOISYN LIQD	P	QL(900 ML per fill retail); RX/OTC
PREVIDENT 5000 PLUS CREA (<i>Use sodium fluoride (dental)</i>)	NP	PA	ORAL RELIEF SPRAY SOLN	P	QL(900 ML per fill retail); RX/OTC
PREVIDENT GEL (<i>Use sodium fluoride (dental)</i>)	NP		<i>pilocarpine hcl (oral) 5 MG</i>	P	QL(6 EA daily)
<i>sodium fluoride (dental) CREA</i>	P	PA	RA DRY MOUTH SOLN	P	QL(900 ML per fill retail); RX/OTC
<i>sodium fluoride (dental) GEL</i>	P		SALAGEN 5 MG (<i>Use pilocarpine hcl (oral)</i>)	NP	QL(6 EA daily)
<i>sodium fluoride (dental) PSTE DT</i>	P		MULTIVITAMINS		
			B-Complex Vitamins		

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<i>b-complex vitamins CAPS</i>	P	OTC; QL(1 EA daily)	MULTI VITAMIN TABS	P	OTC; QL(1 EA daily); RX/OTC
<i>b-complex vitamins TABS</i>	P	QL(1 EA daily)	<i>multiple vitamin TABS</i>	P	OTC; QL(1 EA daily); RX/OTC
B-Complex w/ C			MULTIVITAMIN ADULT TABS	P	OTC; QL(1 EA daily); RX/OTC
<i>b complex w/ c CAPS</i>	P	OTC; QL(1 EA daily)	MULTIVITAMIN TABS	P	OTC; QL(1 EA daily); RX/OTC
B-Complex w/ Folic Acid			NEOMULTIVITE TABS	P	OTC; QL(1 EA daily); RX/OTC
<i>b-complex w/ c & folic acid CAPS</i>	P	QL(1 EA daily); RX/OTC	OMNICAP TABS	P	OTC; QL(1 EA daily); RX/OTC
<i>b-complex w/ c & folic acid TABS</i>	P	QL(1 EA daily); RX/OTC	ONE DAILY ESSENTIALS TABS	P	OTC; QL(1 EA daily); RX/OTC
Multiple Vitamins w/ Iron			ONE DAILY ESSENTIAL TABS	P	OTC; QL(1 EA daily); RX/OTC
DESTRESS-IRON TABS	P	OTC; QL(1 EA daily)	ONE VITE DAILY MULTIVITAMIN TABS	P	OTC; QL(1 EA daily); RX/OTC
<i>multiple vitamins w/ iron TABS</i>	P	OTC; QL(1 EA daily)	ONE-A-DAY ESSENTIAL TABS (<i>Use multiple vitamin</i>)	NP	OTC; QL(1 EA daily); RX/OTC
TAB-A-VITE/IRON/BETA CAROTENE TABS	P	OTC; QL(1 EA daily)	ONE-A-DAY MENS TABS (<i>Use multiple vitamin</i>)	NP	OTC; QL(1 EA daily); RX/OTC
Multiple Vitamins w/ Minerals			QUINTABS TABS	P	OTC; QL(1 EA daily); RX/OTC
MULTIPLE VITAMINS W/ MINERALS TABS	P	RX/OTC	RELCARE TABS	P	OTC; QL(1 EA daily); RX/OTC
MULTIPLE VITAMINS W/ MINERALS-VARIOUS	P	RX/OTC	STRESS FORMULA/ZINC/ENERGY TABS	P	OTC; QL(1 EA daily); RX/OTC
Multivitamins			THERA TABS	P	OTC; QL(1 EA daily); RX/OTC
ALTRIXA TABS	P	OTC; QL(1 EA daily); RX/OTC	THEREMS TABS	P	OTC; QL(1 EA daily); RX/OTC
AMLADEX TABS	P	OTC; QL(1 EA daily); RX/OTC	TM-DAILY VITE TABS	P	OTC; QL(1 EA daily); RX/OTC
DAILY MULTIPLE VITAMINS TABS	P	OTC; QL(1 EA daily); RX/OTC	TRUE MULTIVITAMIN TABS	P	OTC; QL(1 EA daily); RX/OTC
ESTROFACTORS TABS	P	OTC; QL(1 EA daily); RX/OTC	Ped Multi Vitamins w/Fl & FE		
FOLCYTEINE TABS	P	OTC; QL(1 EA daily); RX/OTC	<i>ped multivitamins w/fl & iron SOLN</i>	P	QL(50 ML per fill retail); AL(Up to 21 yrs old); RX/OTC
GENICIN VITA-Q TABS	P	OTC; QL(1 EA daily); RX/OTC	Ped Multiple Vitamins w/ Minerals		
HIGH POTENCY MULTIVITAMIN TABS	P	OTC; QL(1 EA daily); RX/OTC			
MINCORA TABS	P	OTC; QL(1 EA daily); RX/OTC			
MULTI VITAMIN W/D-3 TABS	P	OTC; QL(1 EA daily); RX/OTC			

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PEDIATRIC MULTIPLE VITAMINS W/ MINERALS-VARIOUS	P	RX/OTC	<i>pediatric multivitamins w/fl SOLN</i>	P	QL(50 ML per fill retail); AL(Up to 21 yrs old); RX/OTC
Ped MV w/ Fluoride			<i>pediatric vitamins acd w/ fluoride SOLN</i>	P	QL(50 ML per fill retail); AL(Up to 21 yrs old); RX/OTC
FLORAFOL PEDIATRIC CHEW 0.5 MG	P	QL(1 EA daily); AL(Up to 21 yrs old); RX/OTC	POLY-VI-FLOR CHEW 0.5 MG	P	QL(1 EA daily); AL(Up to 21 yrs old); RX/OTC
FLORAFOL PEDIATRIC CHEW 1 MG	P	RX/OTC	POLY-VI-FLOR CHEW 0.25 MG, 1 MG	P	RX/OTC
FLORAFOL PEDIATRIC SOLN	P	QL(50 ML per fill retail); AL(Up to 21 yrs old); RX/OTC	QUFLORA PEDIATRIC CHEW 0.5 MG	P	QL(1 EA daily); AL(Up to 21 yrs old); RX/OTC
FLORIVA PLUS SOLN	P	QL(50 ML per fill retail); AL(Up to 21 yrs old); RX/OTC	QUFLORA PEDIATRIC CHEW 0.25 MG, 1 MG	P	RX/OTC
FLOTREX CHEW 0.5 MG	P	QL(1 EA daily); AL(Up to 21 yrs old); RX/OTC	QUFLORA PEDIATRIC SOLN	P	QL(50 ML per fill retail); AL(Up to 21 yrs old); RX/OTC
FLOTREX CHEW 0.25 MG	P	RX/OTC	SOLUVITA ACD WITH FLUORIDE SOLN	P	QL(50 ML per fill retail); AL(Up to 21 yrs old); RX/OTC
MULTIVITAMIN + FLUORIDE CHEW 0.25 MG, 1 MG	P	RX/OTC	SOLUVITA WITH FLUORIDE SOLN	P	QL(50 ML per fill retail); AL(Up to 21 yrs old); RX/OTC
MULTIVITAMIN + FLUORIDE CHEW 0.5 MG	P	QL(1 EA daily); AL(Up to 21 yrs old); RX/OTC	TRI-VITAMIN WITH FLUORIDE SOLN 0.25 MG/ML	P	QL(50 ML per fill retail); AL(Up to 21 yrs old); RX/OTC
MULTIVITAMIN/FLUORIDE CHEW 0.5 MG	P	QL(1 EA daily); AL(Up to 21 yrs old); RX/OTC	VITAMINS ACD-FLUORIDE SOLN	P	QL(50 ML per fill retail); AL(Up to 21 yrs old); RX/OTC
MULTIVITAMIN/FLUORIDE CHEW 0.25 MG, 1 MG	P	RX/OTC	Ped MV w/ Iron		
MULTIVITAMIN/FLUORIDE SOLN	P	QL(50 ML per fill retail); AL(Up to 21 yrs old); RX/OTC	BPROTECTED PEDIA POLY-VITE/FE SOLN	P	OTC; QL(60 ML per fill retail)
MULTI-VIT-FLOR CHEW 0.5 MG	P	QL(1 EA daily); AL(Up to 21 yrs old); RX/OTC	ENFAMIL POLY-VI-SOL-IRON SOLN 11 MG/ML	P	OTC; QL(60 ML per fill retail)
MULTI-VIT-FLOR CHEW 0.25 MG, 1 MG	P	RX/OTC	MULTIVITAMIN DROPS/IRON SOLN	P	OTC; QL(60 ML per fill retail)
<i>pediatric multivitamins w/fl CHEW 0.5 MG</i>	P	QL(1 EA daily); AL(Up to 21 yrs old); RX/OTC			
<i>pediatric multivitamins w/fl CHEW 0.25 MG, 1 MG</i>	P	RX/OTC			

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MULTIVITAMIN INFANT & TODDLER SOLN	P	OTC; QL(60 ML per fill retail)	<i>baclofen SOLN IT 10 MG/20ML, 40 MG/20ML, 20000 MCG/20ML, 40000 MCG/20ML</i>	P	SP; PA
PC PEDIATRIC POLY-VITA/FE DROP SOLN	P	OTC; QL(60 ML per fill retail)	<i>baclofen TABS</i>	P	
POLY-VITA/IRON SOLN	P	OTC; QL(60 ML per fill retail)	<i>chlorzoxazone TABS 500 MG</i>	P	
POLY-VITE/IRON SOLN	P	OTC; QL(60 ML per fill retail)	<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	P	QL(3 EA daily)
Pediatric Multiple Vitamins			<i>cyclobenzaprine hcl TABS 7.5 MG</i>	P	QL(4 EA daily)
BPROTECTED PEDIA POLY-VITE SOLN PO	P	OTC; QL(50 ML per fill retail)	GABLOFEN SOLN IT (Use <i>baclofen</i>)	NP	SP; PA
MULTIVITAMIN INFANT & TODDLER SOLN PO	P	OTC; QL(50 ML per fill retail)	GABLOFEN SOLN IT 10000 MCG/20ML, 40000 MCG/20ML	P	SP; PA
PC PEDIATRIC POLY-VITAMIN DROP SOLN PO	P	OTC; QL(50 ML per fill retail)	LIORESAL SOLN IT	P	SP; PA
POLY-VI-SOL SOLN PO	P	OTC; QL(50 ML per fill retail)	LIORESAL SOLN IT (Use <i>baclofen</i>)	NP	SP; PA
POLY-VITA SOLN PO	P	OTC; QL(50 ML per fill retail)	<i>methocarbamol TABS 500 MG, 750 MG</i>	P	
POLY-VITE PEDIATRIC SOLN PO	P	OTC; QL(50 ML per fill retail)	<i>orphenadrine citrate TB12</i>	P	
Prenatal Vitamins			<i>tizanidine hcl TABS</i>	P	
PRENATAL VITAMINS-MISC	P	RX/OTC	ZANAFLEX TABS 4 MG (Use <i>tizanidine hcl</i>)	NP	
Vitamins w/ Lipotropics			Viscosupplements		
<i>vitamins w/ lipotropics CAPS</i>	P	OTC; QL(1 EA daily)	DUROLANE PRSY	P	SP; PA
MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms			EUFLEXXA SOSY	P	SP; PA
Articular Cartilage Repair Therapy			GEL-ONE	P	SP; PA
MACI	P	SP; PA	GELSYN-3 SOSY	P	SP; PA
Central Muscle Relaxants			GENVISC 850 SOSY	P	SP; PA
			HYALGAN SOLN	P	SP; PA
			HYALGAN SOSY	P	SP; PA
			HYMOVIS	P	SP; PA
			HYRONAN KIT	P	SP; PA
			MONOVISC	P	SP; PA
			ORTHOVISC	P	SP; PA
			SUPARTZ FX SOSY	P	SP; PA
			SYNOJOYNT SOSY	P	SP; PA

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SYNVISC ONE SOSY	P	SP; PA	FLONASE ALLERGY RELIEF SUSP (Use fluticasone propionate (nasal))	NP	QL(16 ML per fill retail); RX/OTC
SYNVISC SOSY	P	SP; PA	flunisolide (nasal)	P	QL(25 ML per 30 day(s) retail)
TRILURON SOSY	P	SP; PA	fluticasone propionate (nasal) SUSP	P	QL(16 GM per fill retail); RX/OTC
TRIVISC SOSY	P	SP; PA	NASACORT ALLERGY 24HR AERO (Use triamcinolone acetonide (nasal))	NP	AL(At least 2 yrs old)
VISCO-3 SOSY	P	SP; PA	triamcinolone acetonide (nasal) AERO	P	AL(At least 2 yrs old)
NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus			Sympathomimetic Decongestants		
Nasal Agents - Misc.			ADRENALIN 0.1 % (Use epinephrine hcl (nasal))	NP	QL(120 ML per fill retail); AL(Up to 21 yrs old)
FT SALINE NASAL SPRAY SOLN	P	OTC; QL(480 ML per fill retail); AL(Up to 21 yrs old)	epinephrine hcl (nasal)	P	QL(120 ML per fill retail); AL(Up to 21 yrs old)
LITTLE REMEDIES SALINE SOLN	P	OTC; QL(480 ML per fill retail); AL(Up to 21 yrs old)	phenylephrine hcl (oral) TABS	P	OTC; QL(24 EA per fill retail)
SALINE NASAL SPRAY 0.65%	P	OTC; QL(480 ml per fill retail); AL(Up to 21 yrs old)	pseudoephedrine hcl TABS	P	OTC; AL(Up to 21 yrs old)
Nasal Antiallergy			pseudoephedrine hcl TB12	P	OTC; QL(62 EA per 30 day(s) retail); AL(Up to 21 yrs old)
azelastine hcl 0.15 %, 205.5 MCG/SPRAY	P	QL(30 ML per fill retail); RX/OTC	SUDAFED CHILDRENS LIQD	P	OTC; AL(Up to 21 yrs old)
azelastine hcl 0.1 %, 137 MCG/SPRAY	P		SUDAFED PE CHILDRENS SOLN	P	OTC; QL(120 ML per fill retail)
cromolyn sodium (nasal) 5.2 MG/ACT	P	OTC; QL(26 ML per 30 day(s) retail)	SUDAFED PE SINUS CONGESTION TABS (Use phenylephrine hcl (oral))	NP	OTC; QL(24 EA per fill retail)
NASALCROM (Use cromolyn sodium (nasal))	NP	OTC; QL(26 ML per 30 day(s) retail)	SUDAFED SINUS CONGESTION TABS (Use pseudoephedrine hcl)	NP	OTC; AL(Up to 21 yrs old)
Nasal Anticholinergics					
ipratropium bromide (nasal) 0.06 %	P	QL(15 ML per 30 day(s) retail)			
ipratropium bromide (nasal) 0.03 %	P	QL(31 ML per 30 day(s) retail)			
Nasal Steroids					
FLONASE ALLERGY REL CHILDRENS SUSP (Use fluticasone propionate (nasal))	NP	QL(16 ML per fill retail); RX/OTC			

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SUDAFED TABS (<i>Use pseudoephedrine hcl</i>)	NP	OTC; AL(Up to 21 yrs old)	ZOLGENSMA 12.6-13.0 KG	P	SP; PA
NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles			ZOLGENSMA 13.1-13.5 KG	P	SP; PA
ALS Agents			ZOLGENSMA 13.6-14.0 KG	P	SP; PA
edaravone SOLN	P	SP; PA	ZOLGENSMA 14.1-14.5 KG	P	SP; PA
EXSERVAN FILM	P	SP; PA	ZOLGENSMA 14.6-15.0 KG	P	SP; PA
RADICAVA ORS STARTER KIT SUSP	P	SP; PA	ZOLGENSMA 15.1-15.5 KG	P	SP; PA
RADICAVA ORS SUSP	P	SP; PA	ZOLGENSMA 15.6-16.0 KG	P	SP; PA
RADICAVA SOLN (<i>Use edaravone</i>)	NP	SP; PA	ZOLGENSMA 16.1-16.5 KG	P	SP; PA
RILUTEK TABS (<i>Use riluzole</i>)	NP	PA	ZOLGENSMA 16.6-17.0 KG	P	SP; PA
<i>riluzole</i> TABS	P	PA	ZOLGENSMA 17.1-17.5 KG	P	SP; PA
TEGLUTIK SUSP	P	SP; PA	ZOLGENSMA 17.6-18.0 KG	P	SP; PA
TIGLUTIK SUSP	P	SP; PA	ZOLGENSMA 18.1-18.5 KG	P	SP; PA
Muscular Dystrophy Agents			ZOLGENSMA 18.6-19.0 KG	P	SP; PA
AMONDYS 45	P	SP; PA	ZOLGENSMA 19.1-19.5 KG	P	SP; PA
EXONDYS 51	P	SP; PA	ZOLGENSMA 19.6-20.0 KG	P	SP; PA
VILTEPSO	P	SP; PA	ZOLGENSMA 2.6-3.0 KG	P	SP; PA
VYONDYS 53	P	SP; PA	ZOLGENSMA 20.1-20.5 KG	P	SP; PA
Spinal Muscular Atrophy Agents (SMA)			ZOLGENSMA 3.1-3.5 KG	P	SP; PA
EVRYSDI	P	SP; PA	ZOLGENSMA 3.6-4.0 KG	P	SP; PA
SPINRAZA	P	SP; PA	ZOLGENSMA 4.1-4.5 KG	P	SP; PA
ZOLGENSMA 20.6-21.0 KG	P	SP; PA	ZOLGENSMA 4.6-5.0 KG	P	SP; PA
ZOLGENSMA 10.1-10.5 KG	P	SP; PA	ZOLGENSMA 5.1-5.5 KG	P	SP; PA
ZOLGENSMA 10.6-11.0 KG	P	SP; PA	ZOLGENSMA 5.6-6.0 KG	P	SP; PA
ZOLGENSMA 11.1-11.5 KG	P	SP; PA	ZOLGENSMA 6.1-6.5 KG	P	SP; PA
ZOLGENSMA 11.6-12.0 KG	P	SP; PA	ZOLGENSMA 6.6-7.0 KG	P	SP; PA
ZOLGENSMA 12.1-12.5 KG	P	SP; PA			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ZOLGENSMA 7.1-7.5 KG	P	SP; PA	<i>dorzolamide hcl-timolol maleate</i>	P	QL(10 ML per 30 day(s) retail)
ZOLGENSMA 7.6-8.0 KG	P	SP; PA	<i>levobunolol hcl 0.5 %</i>	P	QL(15 ML per 30 day(s) retail)
ZOLGENSMA 8.1-8.5 KG	P	SP; PA	<i>timolol maleate (ophth) SOLN</i>	P	QL(15 ML per 30 day(s) retail)
ZOLGENSMA 8.6-9.0 KG	P	SP; PA	TIMOPTIC OCUDOSE SOLN (<i>Use timolol maleate (ophth)</i>)	NP	QL(15 EA per 30 day(s) retail)
ZOLGENSMA 9.1-9.5 KG	P	SP; PA	TIMOPTIC SOLN (<i>Use timolol maleate (ophth)</i>)	NP	QL(15 ML per 30 day(s) retail)
ZOLGENSMA 9.6-10.0 KG	P	SP; PA	Cycloplegic Mydriatics		
NUTRIENTS			<i>atropine sulfate (ophthalmic) OINT</i>	P	
Carbohydrates			<i>atropine sulfate (ophthalmic) SOLN</i>	P	
POLYCOSE LIQD	P	OTC; QL(124 ML per fill retail)	ATROPINE SULFATE SOLN 1 %	P	
POLYCOSE POWD	P	OTC; QL(350 GM per fill retail)	ATROPINE SULFATE SOLN 1 % (<i>Use atropine sulfate (ophthalmic)</i>)	NP	
Lipids			CYCLOGYL 2 %	P	
DOJOLVI	P	SP; PA	CYCLOGYL 0.5 %	P	QL(15 ML per 30 day(s) retail)
Misc. Nutritional Substances			CYCLOGYL (<i>Use cyclopentolate hcl</i>)	NP	
<i>omega-3 fatty acids CAPS 1000 MG, 1200 MG</i>	P	OTC; QL(6 EA daily)	<i>cyclopentolate hcl 1 %</i>	P	
<i>omega-3 fatty acids CPDR 1200 MG</i>	P	QL(6 EA daily)	<i>homatropine hbr</i>	P	QL(15 ML per fill retail)
OPHTHALMIC AGENTS - Drugs to Treat the Eye			ISOPTO ATROPINE SOLN	P	
Artificial Tears and Lubricants			MYDRIACYL SOLN (<i>Use tropicamide</i>)	NP	
<i>polyvinyl alcohol 1.4 %</i>	P	OTC; QL(31 ML per 30 day(s) retail)	<i>phenylephrine hcl (mydriatic) SOLN 2.5 %</i>	P	QL(5 ML per 30 day(s) retail)
<i>white petrolatum-mineral oil</i>	P	OTC; QL(30 GM per fill retail)	PHENYLEPHRINE HCL SOLN (<i>Use phenylephrine hcl (mydriatic)</i>)	NP	QL(5 ML per 30 day(s) retail)
Beta-blockers - Ophthalmic			<i>tropicamide SOLN</i>	P	
<i>betaxolol hcl (ophth) SOLN</i>	P		Miotics		
<i>carteolol hcl (ophth)</i>	P		<i>pilocarpine hcl SOLN 1 %, 2 %, 4 %</i>	P	
COSOPT (<i>Use dorzolamide hcl-timolol maleate</i>)	NP	QL(10 ML per 30 day(s) retail)			
DORZOLAMIDE HCL-TIMOLOL MAL	P	QL(10 ML per 30 day(s) retail)			

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Ophthalmic - Angiogenesis Inhibitors			<i>ofloxacin (ophth)</i>	P	QL(10 ML per 30 day(s) retail)
BEVACIZUMAB IZ	P	SP; PA	<i>polymyxin b-trimethoprim</i>	P	QL(10 ML per fill retail)
BEVACIZUMAB IZ 2.75 MG/0.11ML	P	PA	POLYTRIM (Use <i>polymyxin b-trimethoprim</i>)	NP	QL(10 ML per fill retail)
EYLEA HD SOLN	P	SP; PA	<i>sulfacetamide sodium (ophth) OINT</i>	P	QL(4 GM per 30 day(s) retail)
EYLEA SOLN	P	SP; PA	<i>sulfacetamide sodium (ophth) SOLN</i>	P	QL(15 ML per 30 day(s) retail)
EYLEA SOSY	P	SP; PA	<i>tobramycin (ophth) SOLN</i>	P	QL(5 ML per 30 day(s) retail)
LUCENTIS SOSY	P	SP; PA	TOBREX OINT	P	
SUSVIMO (IMPLANT 1ST FILL) SOLN	P	SP; PA	<i>trifluridine</i>	P	QL(8 ML per 30 day(s) retail)
SUSVIMO (IMPLANT REFILL) SOLN	P	SP; PA	VIGAMOX SOLN OP (Use <i>moxifloxacin hcl (ophth)</i>)	NP	QL(3 ML per fill retail)
VABYSMO SOLN	P	SP; PA	Ophthalmic Decongestants		
Ophthalmic Adrenergic Agents			<i>naphazoline w/ pheniramine 0.315 %-0.027 %</i>	P	OTC; QL(15 ML per 30 day(s) retail)
<i>apraclonidine hcl</i>	P		OPCON-A (Use <i>naphazoline w/ pheniramine</i>)	NP	OTC; QL(15 ML per 30 day(s) retail)
<i>brimonidine tartrate 0.2 %</i>	P		<i>tetrahydrozoline hcl (ophth) 0.05 %</i>	P	OTC
IOPIDINE	P		VISINE RED EYE COMFORT (Use <i>tetrahydrozoline hcl (ophth)</i>)	NP	OTC
Ophthalmic Anti-infectives			Ophthalmic Gene Therapy		
<i>bacitracin (ophthalmic)</i>	P	QL(4 GM per 30 day(s) retail)	LUXTURN A	P	SP; PA
<i>bacitracin-polymyxin b (ophth)</i>	P	QL(4 GM per 30 day(s) retail)	Ophthalmic Local Anesthetics		
CILOXAN OINT	P		<i>tetracaine hcl (ophth)</i>	P	
CILOXAN SOLN (Use <i>ciprofloxacin hcl (ophth)</i>)	NP		Ophthalmic Photodynamic Therapy Agents		
<i>ciprofloxacin hcl (ophth) SOLN</i>	P		VISUDYNE	P	SP; PA
ERYTHROMYCIN	P		Ophthalmic Photoenhancers		
<i>erythromycin (ophth)</i>	P		PHOTREXA-PHOTREXA VISCOUS KIT	P	SP; PA
<i>gentamicin sulfate (ophth) SOLN</i>	P				
<i>moxifloxacin hcl (ophth) SOLN OP</i>	P	QL(3 ML per fill retail)			
<i>neomycin-bacitracin zn-polymyxin</i>	P	QL(4 GM per 30 day(s) retail)			
<i>neomycin-polymyxin-gramicidin</i>	P	QL(10 ML per 30 day(s) retail)			
OCUFLOX (Use <i>ofloxacin (ophth)</i>)	NP	QL(10 ML per 30 day(s) retail)			

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Ophthalmic Steroids			TOBRADEX OINT	P	QL(4 GM per 30 day(s) retail)
<i>dexamethasone sodium phosphate (ophth)</i>	P		TOBRADEX SUSP (<i>Use tobramycin-dexamethasone</i>)	NP	QL(10 ML per fill retail)
DEXTENZA INST	P	SP; PA	<i>tobramycin-dexamethasone SUSP</i>	P	QL(10 ML per fill retail)
DEXYCU SUSP IO	P	SP; PA	TRIESENCE	P	SP; PA
<i>fluorometholone (ophth) SUSP</i>	P		XIPERE	P	SP; PA
FML LIQUIFILM SUSP (<i>Use fluorometholone (ophth)</i>)	NP		YUTIQ	P	SP; PA
ILUVIEN	P	SP; PA	Ophthalmics - Misc.		
MAXITROL OINT (<i>Use neomycin-polymyx-dexameth</i>)	NP	QL(4 GM per 30 day(s) retail)	ACULAR (<i>Use ketorolac tromethamine (ophth)</i>)	NP	QL(10 ML per fill retail)
MAXITROL SUSP (<i>Use neomycin-polymyx-dexameth</i>)	NP	QL(10 ML per 30 day(s) retail)	ACULAR LS (<i>Use ketorolac tromethamine (ophth)</i>)	NP	QL(5 ML per 30 day(s) retail)
<i>neomycin-polymyx-dexameth OINT</i>	P	QL(4 GM per 30 day(s) retail)	ALOCRIAL	P	QL(5 ML per 30 day(s) retail); PA
<i>neomycin-polymyx-dexameth SUSP 0.1 %-3.5 MG/ML-10000 UNIT/ML, 0.1 %</i>	P	QL(10 ML per 30 day(s) retail)	ALOMIDE	P	QL(10 ML per 30 day(s) retail); PA
<i>neomycin-polymyxin-hc (ophth)</i>	P	QL(15 ML per 30 day(s) retail)	<i>azelastine hcl (ophth)</i>	P	QL(6 ML per 30 day(s) retail)
OZURDEX IMPL	P	SP; PA	AZOPT (<i>Use brinzolamide</i>)	NP	
PRED FORTE (<i>Use prednisolone acetate (ophth)</i>)	NP		<i>brinzolamide</i>	P	
PRED MILD	P	QL(10 ML per 30 day(s) retail)	<i>cromolyn sodium (ophth)</i>	P	QL(10 ML per fill retail)
<i>prednisolone acetate (ophth)</i>	NP		CYSTADROPS	P	SP; PA
<i>prednisolone acetate (ophth)</i>	P		CYSTARAN	P	SP; PA
PREDNISOLONE ACETATE P-F	P		<i>diclofenac sodium (ophth)</i>	P	QL(3 ML per 30 day(s) retail)
PREDNISOLONE SODIUM PHOSPHATE	P	QL(15 ML per 30 day(s) retail)	<i>dorzolamide hcl</i>	P	QL(10 ML per 30 day(s) retail)
RETISERT	P	SP; PA	DORZOLAMIDE HCL	P	QL(10 ML per 30 day(s) retail)
<i>sulfacetamide sod-prednisolone SOLN</i>	P	QL(10 ML per 30 day(s) retail)	<i>flurbiprofen sodium</i>	P	QL(5 ML per 30 day(s) retail)
			<i>ketorolac tromethamine (ophth) 0.5 %</i>	P	QL(10 ML per fill retail)
			<i>ketorolac tromethamine (ophth) 0.4 %</i>	P	QL(5 ML per 30 day(s) retail)

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<i>ketotifen fumarate (ophth) 0.035 %</i>	P		DERMOTIC (<i>Use fluocinolone acetonide (otic)</i>)	NP	QL(20 ML per fill retail); AL(At least 5 yrs old)
ZADITOR 0.035 % (<i>Use ketotifen fumarate (ophth)</i>)	NP		<i>fluocinolone acetonide (otic)</i>	P	QL(20 ML per fill retail); AL(At least 5 yrs old)
Prostaglandins - Ophthalmic			<i>hydrocortisone w/acetic acid</i>	P	QL(20 ML per 30 day(s) retail)
<i>latanoprost SOLN</i>	P	QL(5 ML per 30 day(s) retail)	OXYTOCICS - Drugs to Prevent/Control Uterine Bleeding		
LATANOPROST SOLN	P	QL(5 ML per 30 day(s) retail)	Oxytocics		
XALATAN SOLN (<i>Use latanoprost</i>)	NP	QL(5 ML per 30 day(s) retail)	<i>methylergonovine maleate TABS</i>	P	
OTIC AGENTS - Drugs to Treat the Ear			PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System		
Otic Agents - Miscellaneous			Immune Serums		
<i>acetic acid (otic)</i>	P	QL(15 ML per 30 day(s) retail)	BIVIGAM SOLN	P	SP; PA
<i>carbamide peroxide (otic) 6.5 %</i>	P	OTC; QL(15 ML per 30 day(s) retail)	CUTAQUIG	P	SP; PA
DEBROX 6.5 % (<i>Use carbamide peroxide (otic)</i>)	NP	OTC; QL(15 ML per 30 day(s) retail)	CUVITRU SOLN	P	SP; PA
Otic Anti-infectives			CYTOGAM SOLN	P	SP; PA
<i>ofloxacin (otic)</i>	P	QL(10 ML per fill retail)	FLEBOGAMMA DIF SOLN	P	SP; PA
Otic Combinations			GAMASTAN	P	SP; PA
CIPRODEX (<i>Use ciprofloxacin-dexamethasone</i>)	NP	QL(7.5 ML per fill retail); 1 max fill(s) per 30 day(s) retail	GAMMAGARD	P	SP; PA
<i>ciprofloxacin-dexamethasone</i>	P	QL(7.5 ML per fill retail); 1 max fill(s) per 30 day(s) retail	GAMMAGARD S/D LESS IGA SOLR	P	SP; PA
<i>neomycin-polymyxin-hc (otic) SOLN</i>	P	QL(10 ML per fill retail)	GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	P	SP; PA
<i>neomycin-polymyxin-hc (otic) SUSP</i>	P	QL(20 ML per 30 day(s) retail)	GAMMAPLEX SOLN	P	SP; PA
<i>pramoxine-hc-chloroxylonol</i>	P	QL(15 ML per fill retail)	GAMUNEX-C	P	SP; PA
Otic Steroids			HEPAGAM B SOLN IJ	P	SP; PA
			HIZENTRA SOLN	P	SP; PA
			HIZENTRA SOSY	P	SP; PA
			HYPERHEP B SOLN IM	P	SP; PA
			HYPERRHO S/D SOSY IM 1500 UNIT	P	SP

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
HYPERRHO S/D SOSY IM 250 UNIT	P	SP; PA	<i>penicillin v potassium TABS</i>	P	
MICRHOGAM ULTRA-FILTERED PLUS SOSY IM	P	SP; PA	Penicillin Combinations		
NABI-HB SOLN IM	P	SP; PA	<i>amoxicillin & pot clavulanate CHEW</i>	P	QL(20 EA per fill retail)
OCTAGAM SOLN	P	SP; PA	<i>amoxicillin & pot clavulanate SUSR 62.5 MG/5ML-250 MG/5ML</i>	P	QL(150 ML per fill retail)
PANZYGA	P	SP; PA	<i>amoxicillin & pot clavulanate SUSR 28.5 MG/5ML-200 MG/5ML</i>	P	QL(100 ML per fill retail)
PRIVIGEN SOLN	P	SP; PA	<i>amoxicillin & pot clavulanate SUSR 42.9 MG/5ML-600 MG/5ML, 57 MG/5ML-400 MG/5ML</i>	P	QL(200 ML per fill retail)
RHOGAM ULTRA-FILTERED PLUS SOSY IM	P	SP	<i>amoxicillin & pot clavulanate TABS 125 MG-250 MG, 125 MG-500 MG</i>	P	QL(30 EA per fill retail)
RHOPHYLAC SOSY IJ	P	SP; PA	<i>amoxicillin & pot clavulanate TABS 125 MG-875 MG</i>	P	QL(20 EA per fill retail)
WINRHO SDF SOLN 1500 UNIT/1.3ML, 2500 UNIT/2.2ML, 5000 UNIT/4.4ML, 15000 UNIT/13ML	P	SP; PA	<i>amoxicillin & pot clavulanate TB12</i>	P	QL(40 EA per 30 day(s) retail)
XEMBIFY	P	SP; PA	AUGMENTIN ES-600 SUSR (Use <i>amoxicillin & pot clavulanate</i>)	NP	QL(200 ML per fill retail)
Monoclonal Antibodies			AUGMENTIN SUSR 31.25 MG/5ML-125 MG/5ML	P	QL(150 ML per fill retail)
BEYFORTUS	P	SP; PA	AUGMENTIN TABS 125 MG-500 MG (Use <i>amoxicillin & pot clavulanate</i>)	NP	QL(30 EA per fill retail)
SYNAGIS SOLN	P	SP; PA	Penicillinase-Resistant Penicillins		
ZINPLAVA	P	SP; PA	<i>dicloxacillin sodium</i>	P	
Passive Immunizing Agents - Combinations			PHARMACEUTICAL ADJUVANTS		
HYQVIA	P	SP; PA	Internal Vehicle Ingredients/Agents		
PENICILLINS - Drugs to Treat Bacterial Infections			SIMPLYTHICK EASY MIX	P	OTC; QL(1816 GM per fill retail); AL(At least 1 yrs old); PA
Aminopenicillins					
<i>amoxicillin CAPS</i>	P				
<i>amoxicillin CHEW 125 MG, 250 MG</i>	P				
<i>amoxicillin SUSR</i>	P				
AMOXICILLIN SUSR (Use <i>amoxicillin</i>)	NP				
<i>amoxicillin TABS 875 MG</i>	P				
<i>ampicillin CAPS 500 MG</i>	P				
Natural Penicillins					
<i>penicillin v potassium SOLR</i>	P				

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Liquid Vehicles			STERILE DILUENT FOR REMODULIN (<i>Use glycine diluent</i>)	NP	SP; PA
FLAVOR BLEND SUSP	P	RX/OTC	SUSPENDIT ANHYDROUS SUSP	P	RX/OTC
FLAVOR PLUS LIQD	P	RX/OTC	SUSPENDRX W/BITTERBLOC SWEET SUSP	P	RX/OTC
FLAVOR SWEET-SF SYRP	P	RX/OTC	SUSPENDRX W/BITTERBLOC UNSWEET SUSP	P	RX/OTC
FLAVOR SWEET SYRP	P	RX/OTC	SUSPENSION VEHICLE SUSP	P	RX/OTC
<i>glycine diluent</i>	P	SP; PA	SYRPALTA SYRP	P	RX/OTC
GRAPE SYRUP SYRP	P	RX/OTC	SYRSPEND SF LIQD	P	RX/OTC
MX-SOL BLEND SF SUSP	P	RX/OTC	SYRUP VEHICLE SF SYRP	P	RX/OTC
MX-SOL BLEND SUSP	P	RX/OTC	SYRUP VEHICLE SYRP	P	RX/OTC
MX-SOL SF SYRP	P	RX/OTC	UNISPEND ANHYDROUS SWEETENED SUSP	P	RX/OTC
MX-SOL SUSPEND SUSP	P	RX/OTC	UNISPEND ANHYDROUS UNSWEETENED SUSP	P	RX/OTC
MX-SOL SYRP	P	RX/OTC	VERSAFREE SYRP	P	RX/OTC
ORA-BLEND SF SUSP	P	RX/OTC	VERSAPLUS SYRP	P	RX/OTC
ORA-BLEND SUSP	P	RX/OTC	Semi Solid Vehicles		
ORAL MIX SF SUSP	P	RX/OTC	<i>lanolin XX</i>	P	
ORAL MIX SUSP	P	RX/OTC	LANOLIN XX	P	
ORAL SUSPEND LIQD	P	RX/OTC	PROGESTINS - Hormone Replacement/Modifying Drugs		
ORAL SYRUP SF SYRP	P	RX/OTC	Progestins		
ORAL SYRUP SYRP	P	RX/OTC	AYGESTIN TABS (<i>Use norethindrone acetate</i>)	NP	
ORAPENN SD ANHYD SWEETENED LIQD	P	RX/OTC	<i>medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG</i>	P	
ORAPENN SD ANHYD UNSWEETEN LIQD	P	RX/OTC	<i>norethindrone acetate TABS</i>	P	
ORA-PLUS LIQD	P	RX/OTC	<i>progesterone CAPS 200 MG</i>	P	QL(20 EA per 30 day(s) retail)
ORA-SWEET SF SYRP 10 %-9 %	P	RX/OTC			
ORA-SWEET SYRP 4 %-5 %-54 %	P	RX/OTC			
PCCA SWEET-SF SYRP	P	RX/OTC			
PCCA SYRUP VEHICLE SYRP	P	RX/OTC			
PCCA-PLUS SUSP	P	RX/OTC			
SOSWEET SYRP	P	RX/OTC			
STERILE DILUENT FLOLAN PH 12	P	SP; PA			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>progesterone CAPS 100 MG</i>	P	QL(30 EA per 30 day(s) retail)	<i>rivastigmine 4.6 MG/24HR, 9.5 MG/24HR</i>	P	QL(1 EA daily); PA
PROMETRIUM CAPS 200 MG (<i>Use progesterone</i>)	NP	QL(20 EA per 30 day(s) retail)	<i>rivastigmine tartrate CAPS</i>	P	QL(2 EA daily); PA
PROMETRIUM CAPS 100 MG (<i>Use progesterone</i>)	NP	QL(30 EA per 30 day(s) retail)	Combination Psychotherapeutics		
PROVERA 5 MG, 10 MG (<i>Use medroxyprogesterone acetate</i>)	NP		<i>perphenazine-amitriptyline</i>	P	QL(4 EA daily)
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions			Fibromyalgia Agents		
Agents for Chemical Dependency			SAVELLA TITRATION PACK MISC	P	QL(55 EA per 365 day(s) retail); PA
<i>disulfiram 250 MG</i>	P		SAVELLA TABS	P	QL(2 EA daily); PA
Antidementia Agents			Movement Disorder Drug Therapy		
ARICEPT TABS 5 MG, 10 MG (<i>Use donepezil hydrochloride</i>)	NP	QL(1 EA daily)	<i>tetrabenazine</i>	P	SP; PA
<i>donepezil hydrochloride TABS 5 MG, 10 MG</i>	P	QL(1 EA daily)	XENAZINE (<i>Use tetrabenazine</i>)	NP	SP; PA
EXELON 4.6 MG/24HR, 9.5 MG/24HR (<i>Use rivastigmine</i>)	NP	QL(1 EA daily); PA	Multiple Sclerosis Agents		
<i>galantamine hydrobromide CP24</i>	P	QL(1 EA daily)	AMPYRA (<i>Use dalfampridine</i>)	NP	SP; PA
<i>galantamine hydrobromide SOLN</i>	P	QL(6 ML daily)	AUBAGIO (<i>Use teriflunomide</i>)	NP	QL(1 EA daily); SP
<i>galantamine hydrobromide TABS</i>	P	QL(2 EA daily)	AVONEX PEN AJKT	P	SP; PA
<i>memantine hcl SOLN</i>	P	QL(2 ML daily); PA	AVONEX PREFILLED PSKT	P	SP; PA
<i>memantine hcl TABS</i>	P	1 package(s) per 28 day(s) retail; PA	BAFIERTAM	P	SP; PA
<i>memantine hcl TABS</i>	P	QL(2 EA daily); PA	COPAXONE SOSY (<i>Use glatiramer acetate</i>)	NP	SP
NAMENDA TITRATION PAK TABS (<i>Use memantine hcl</i>)	NP	1 package(s) per 28 day(s) retail; PA	<i>dalfampridine</i>	P	SP; PA
NAMENDA TABS (<i>Use memantine hcl</i>)	NP	QL(2 EA daily); PA	<i>dimethyl fumarate CDPK</i>	P	SP
			<i>dimethyl fumarate CPDR</i>	P	SP
			<i> fingolimod hcl</i>	P	QL(1 EA daily); SP
			GILENYA (<i>Use fingolimod hcl</i>)	NP	QL(1 EA daily); SP
			<i>glatiramer acetate SOSY</i>	P	SP
			KESIMPTA	P	SP; PA
			PLEGRIDY STARTER PACK SOAJ	P	SP; PA
			PLEGRIDY STARTER PACK SOSY SC	P	SP; PA

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PLEGRIDY SOAJ	P	SP; PA
PLEGRIDY SOSY IM	P	SP; PA
REBIF REBIDOSE TITRATION PACK SOAJ	P	SP; PA
REBIF REBIDOSE SOAJ	P	SP; PA
REBIF TITRATION PACK SOSY	P	SP; PA
REBIF SOSY	P	SP; PA
TECFIDERA CDPK (<i>Use dimethyl fumarate</i>)	NP	SP
TECFIDERA CPDR (<i>Use dimethyl fumarate</i>)	NP	SP
<i>teriflunomide</i>	P	QL(1 EA daily); SP
Smoking Deterrents		
APO-VARENICLINE TABS	P	QL(2 EA daily); AL(At least 18 yrs old)
<i>bupropion hcl (smoking deterrent)</i>	P	QL(2 EA daily); AL(At least 18 yrs old)
CHANTIX STARTING MONTH PAK TBPK (<i>Use varenicline tartrate</i>)	NP	QL(53 EA per fill retail); AL(At least 18 yrs old)
NICODERM CQ PT24 TD (<i>Use nicotine</i>)	NP	QL(1 EA daily)
NICORETTE MINI LOZG (<i>Use nicotine polacrilex</i>)	NP	QL(20 EA daily)
NICORETTE STARTER KIT GUM (<i>Use nicotine polacrilex</i>)	NP	QL(24 EA daily)
NICORETTE GUM (<i>Use nicotine polacrilex</i>)	NP	QL(24 EA daily)
NICORETTE LOZG (<i>Use nicotine polacrilex</i>)	NP	QL(20 EA daily)
<i>nicotine polacrilex GUM</i>	P	QL(24 EA daily)
<i>nicotine polacrilex LOZG</i>	P	QL(20 EA daily)
NICOTINE KIT	P	
<i>nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR</i>	P	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
NICOTROL NS SOLN	P	QL(4 ML daily)
NICOTROL INHA	P	QL(16.8 EA daily)
<i>varenicline tartrate TABS</i>	P	QL(2 EA daily); AL(At least 18 yrs old)
<i>varenicline tartrate TBPK</i>	P	QL(53 EA per fill retail); AL(At least 18 yrs old)
Transthyretin Amyloidosis Agents		
ONPATTRO	P	SP; PA
TEGSEDI	P	SP; PA
RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions		
Alpha-Proteinase Inhibitor (Human)		
ARALAST NP SOLR 500 MG, 1000 MG	P	SP; PA
GLASSIA SOLN	P	SP; PA
PROLASTIN-C SOLN	P	SP; PA
PROLASTIN-C SOLR	P	SP; PA
ZEMAIRA SOLR 4000 MG	P	PA
ZEMAIRA SOLR 1000 MG	P	SP; PA
Cystic Fibrosis Agents		
BRONCHITOL	P	SP; PA
BRONCHITOL TOLERANCE TEST	P	SP; PA
KALYDECO PACK 5.8 MG	P	SP
KALYDECO PACK 13.4 MG, 25 MG, 50 MG, 75 MG	P	SP; PA
KALYDECO TABS	P	SP; PA
ORKAMBI PACK	P	SP; PA
ORKAMBI TABS	P	SP; PA
PULMOZYME	P	SP; PA
SYMDEKO	P	SP; PA
TRIKAFTA TBPK	P	QL(3 EA daily); SP; PA

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Pulmonary Fibrosis Agents			<i>levothyroxine sodium TABS</i>	P	
ESBRIET CAPS (<i>Use pirfenidone</i>)	NP	SP; PA	<i>liothyronine sodium TABS</i>	P	
ESBRIET TABS (<i>Use pirfenidone</i>)	NP	SP; PA	NIVA THYROID TABS	P	
<i>pirfenidone CAPS</i>	P	SP; PA	NP THYROID TABS	P	
<i>pirfenidone TABS</i>	P	SP; PA	RENTHYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	P	
TETRACYCLINES - Drugs to Treat Bacterial Infections			SYNTHROID TABS (<i>Use levothyroxine sodium</i>)	P	
Tetracyclines			THYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	P	
<i>doxycycline (monohydrate) CAPS 50 MG, 100 MG</i>	P		TOXOIDS		
<i>doxycycline (monohydrate) TABS 50 MG, 100 MG</i>	P		Toxoid Combinations		
<i>doxycycline hyclate CAPS</i>	P		ADACEL SUSP	P	
<i>doxycycline hyclate TABS 100 MG</i>	P		BOOSTRIX SUSP	P	
<i>minocycline hcl CAPS</i>	P		BOOSTRIX SUSY	P	
<i>tetracycline hcl CAPS 500 MG</i>	P		DAPTACEL	P	
VIBRAMYCIN CAPS (<i>Use doxycycline hyclate</i>)	NP		INFANRIX	P	
THYROID AGENTS - Drugs to Regulate Thyroid Hormones			KINRIX SUSY	P	
Antithyroid Agents			PEDIARIX SUSY	P	
<i>methimazole TABS</i>	P		PENTACEL	P	
<i>propylthiouracil</i>	P		QUADRACEL SUSP	P	
Thyroid Hormones			QUADRACEL SUSY	P	
ADTHYZA TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	P		TDVAX SUSP	P	
ARMOUR THYROID TABS	P		TENIVAC INJ	P	
CYTOMEL TABS (<i>Use liothyronine sodium</i>)	NP		TETANUS-DIPHTHERIA TOXOIDS TD SUSP	P	
			VAXELIS SUSP	P	
			VAXELIS SUSY	P	
			ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions		
			Antispasmodics		
			BENTYL SOLN IM (<i>Use dicyclomine hcl</i>)	NF	
			<i>dicyclomine hcl CAPS</i>	P	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>dicyclomine hcl SOLN PO</i>	P	QL(496 ML per 30 day(s) retail)	PEPCID AC MAXIMUM STRENGTH TABS (<i>Use famotidine</i>)	NP	RX/OTC
<i>dicyclomine hcl TABS</i>	P		PEPCID AC TABS (<i>Use famotidine</i>)	NP	OTC
<i>glycopyrrolate TABS 1 MG, 2 MG</i>	P	QL(4 EA daily)	PEPCID TABS (<i>Use famotidine</i>)	NP	RX/OTC
<i>hyoscyamine sulfate ELIX</i>	NP		TAGAMET HB 200 TABS (<i>Use cimetidine</i>)	NP	RX/OTC
<i>hyoscyamine sulfate ELIX</i>	P		TAGAMET HB TABS (<i>Use cimetidine</i>)	NP	RX/OTC
HYOSCYAMINE SULFATE POWD	P		Misc. Anti-Ulcer		
<i>hyoscyamine sulfate SOLN PO 0.125 MG/ML</i>	NP		CARAFATE SUSP (<i>Use sucralfate</i>)	NP	QL(420 ML per fill retail)
<i>hyoscyamine sulfate SOLN PO 0.125 MG/ML</i>	P		CARAFATE TABS (<i>Use sucralfate</i>)	NP	
<i>hyoscyamine sulfate SUBL 0.125 MG</i>	P		<i>sucralfate SUSP</i>	P	QL(420 ML per fill retail)
<i>hyoscyamine sulfate SUBL 0.125 MG</i>	NP		<i>sucralfate TABS</i>	P	
<i>hyoscyamine sulfate TABS 0.125 MG</i>	NP		Proton Pump Inhibitors		
<i>hyoscyamine sulfate TABS 0.125 MG</i>	P		DEXILANT (<i>Use dexlansoprazole</i>)	NP	ST
<i>hyoscyamine sulfate TB12 0.375 MG</i>	P	QL(4 EA daily)	<i>dexlansoprazole</i>	P	ST
<i>hyoscyamine sulfate TBDP 0.125 MG</i>	NP		<i>esomeprazole magnesium CPDR 20 MG</i>	P	QL(2 EA daily); RX/OTC
<i>hyoscyamine sulfate TBDP 0.125 MG</i>	P		<i>lansoprazole CPDR 30 MG</i>	P	
LEVBID TB12 (<i>Use hyoscyamine sulfate</i>)	NP	QL(4 EA daily)	<i>lansoprazole CPDR 15 MG</i>	P	QL(4 EA daily); RX/OTC
ROBINUL-FORTE TABS (<i>Use glycopyrrolate</i>)	NP	QL(4 EA daily)	NEXIUM 24HR CLEAR MINIS CPDR (<i>Use esomeprazole magnesium</i>)	NP	QL(2 EA daily); RX/OTC
ROBINUL TABS (<i>Use glycopyrrolate</i>)	NP	QL(4 EA daily)	NEXIUM 24HR CPDR (<i>Use esomeprazole magnesium</i>)	NP	QL(2 EA daily); RX/OTC
H-2 Antagonists			NEXIUM CPDR 20 MG (<i>Use esomeprazole magnesium</i>)	NP	QL(2 EA daily); RX/OTC
<i>cimetidine hcl PO 300 MG/5ML</i>	P		OMEPRAZOLE 20MG TABLET	P	QL (1 ea daily); OTC
<i>cimetidine TABS</i>	P	RX/OTC			
<i>famotidine SUSP</i>	P				
<i>famotidine TABS 10 MG</i>	P	OTC			
<i>famotidine TABS 20 MG, 40 MG</i>	P	RX/OTC			

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Drug Name	Drug Tier	Requirements/ Limits
<i>omeprazole magnesium TBEC</i>	P	OTC; QL(1 EA daily)
<i>omeprazole CPDR</i>	P	QL(2 EA daily)
<i>pantoprazole sodium TBEC 20 MG</i>	P	QL(1 EA daily)
<i>pantoprazole sodium TBEC 40 MG</i>	P	QL(2 EA daily)
PREVACID 24HR CPDR (Use <i>lansoprazole</i>)	NP	QL(4 EA daily); RX/OTC
PREVACID CPDR 30 MG (Use <i>lansoprazole</i>)	NP	
PRILOSEC OTC TBEC (Use <i>omeprazole magnesium</i>)	NP	OTC; QL(1 EA daily)
PROTONIX TBEC 40 MG (Use <i>pantoprazole sodium</i>)	NP	QL(2 EA daily)
PROTONIX TBEC 20 MG (Use <i>pantoprazole sodium</i>)	NP	QL(1 EA daily)
VOQUEZNA	NP	
Ulcer Drugs - Prostaglandins		
CYTOTEC (Use <i>misoprostol</i>)	NP	
<i>misoprostol</i>	P	
Ulcer Therapy Combinations		
<i>amoxicillin-clarithromycin w/ lansoprazole THPK</i>	P	14 day(s) max supply per 365 day(s) retail
URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms		
Urinary Antispasmodic - Antimuscarinics (Anticholinergic)		
DETROL LA CP24 (Use <i>tolterodine tartrate</i>)	NP	QL(1 EA daily)
DETROL TABS (Use <i>tolterodine tartrate</i>)	NP	QL(2 EA daily)
DITROPAN XL TB24 5 MG (Use <i>oxybutynin chloride</i>)	NP	QL(2 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>oxybutynin chloride TABS</i>	P	QL(3 EA daily)
<i>oxybutynin chloride TB24</i>	P	QL(2 EA daily)
<i>tolterodine tartrate CP24</i>	P	QL(1 EA daily)
<i>tolterodine tartrate TABS</i>	P	QL(2 EA daily)
<i>trospium chloride TABS</i>	P	QL(2 EA daily)
Urinary Antispasmodics - Cholinergic Agonists		
<i>bethanechol chloride</i>	P	
Urinary Antispasmodics - Direct Muscle Relaxants		
<i>flavoxate hcl</i>	P	
VACCINES		
Bacterial Vaccines		
ACTHIB SOLR IM	P	
BCG VACCINE	P	
BEXSERO 0.5 ML	P	
BIOTHRAX	P	
HIBERIX SOLR IJ	P	
MENACTRA	P	
MENQUADFI 0.5 ML	P	
MENVEO SOLN	P	
MENVEO SOLR	P	
PEDVAX HIB SUSP	P	
PENBRAYA	P	
PNEUMOVAX 23 SOLN	P	
PNEUMOVAX 23 SOSY	P	
PREVNAR 13	P	
PREVNAR 20	P	
TRUMENBA 0.5 ML	P	
TYPHIM VI SOLN	P	
TYPHIM VI SOSY	P	
VAXCHORA	P	
VAXNEUVANCE	P	
VIVOTIF	P	
Viral Vaccines		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ABRYSVO	P	1 max fill(s) per 999 day(s) retail; AL(At least 60 yrs old)	FLULAVAL QUADRIVALENT SUSY	P	
ACAM2000	P		FLULAVAL SUSY	P	
AFLURIA PRESERVATIVE FREE SUSY	P		FLUMIST	P	
AFLURIA QUADRIVALENT SUSP	P		FLUMIST QUADRIVALENT	P	
AFLURIA QUADRIVALENT SUSY 0.5 ML	P		FLUZONE HIGH-DOSE QUADRIVALENT	P	
AFLURIA SUSP	P		FLUZONE HIGH-DOSE SUSY	P	
AREXVY	P	1 max fill(s) per 999 day(s) retail; AL(At least 60 yrs old)	FLUZONE QUADRIVALENT SUSP	P	
COMIRNATY SUSP	P		FLUZONE QUADRIVALENT SUSY	P	
COMIRNATY SUSY	P		FLUZONE SUSP	P	
DENGVAIXA	P		FLUZONE SUSY	P	
ENGRIX-B SUSP 20 MCG/ML	P	3 max fill(s) per 999 day(s) retail	GARDASIL 9 SUSP 0.5 ML	P	3 max fill(s) per 999 day(s) retail; AL(Up to 45 yrs old)
ENGRIX-B SUSY	P	3 max fill(s) per 999 day(s) retail	GARDASIL 9 SUSY 0.5 ML	P	3 max fill(s) per 999 day(s) retail; AL(Up to 45 yrs old)
FLUAD	P		HAVRIX 1440 EL U/ML	P	
FLUAD QUADRIVALENT	P		HAVRIX IM 720 EL U/0.5ML	P	
FLUARIX QUADRIVALENT SUSY	P		HEPLISAV-B SOSY	P	3 max fill(s) per 999 day(s) retail
FLUARIX SUSY	P		IMOVAX RABIES SUSR	P	
FLUBLOK QUADRIVALENT	P		IPOLE	P	
FLUBLOK SOSY	P		IXIARO	P	
FLUCELVAX QUADRIVALENT SUSP	P		JANSSEN COVID-19 VACCINE	P	
FLUCELVAX QUADRIVALENT SUSY	P		JYNNEOS	P	
FLUCELVAX SUSP	P		M-M-R II SOLR	P	
FLUCELVAX SUSY	P		MODERNA COVID-19 BIVAL 6M-5Y	P	
			MODERNA COVID-19 BIVALENT	P	

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MODERNA COVID-19 VAC 6M-11Y SUSP	P		SHINGRIX	P	2 max fill(s) per 999 day(s) retail; AL(At least 50 yrs old)
MODERNA COVID-19 VAC 6M-11Y SUSY	P		SPIKEVAX SUSP	P	
MODERNA COVID-19 VACCINE SUSP	P		SPIKEVAX SUSY	P	
NOVAVAX COVID-19 VACCINE SUSP	P		STAMARIL SUSR	P	
NOVAVAX COVID-19 VACCINE SUSY	P		TICOVAC	P	
PFIZER COVID-19 BIVAL 6MO-4YR	P		TWINRIX SUSY	P	
PFIZER COVID-19 VAC BIVAL 5-11	P		VAQTA	P	
PFIZER COVID-19 VAC BIVALENT	P		VARIVAX SUSR	P	2 max fill(s) per 999 day(s) retail
PFIZER COVID-19 VAC-TRIS 5-11Y SUSP	P		YF-VAX INJ	P	
PFIZER COVID-19 VAC-TRIS 6M-4Y SUSP	P		VAGINAL AND RELATED PRODUCTS		
PFIZER-BIONT COVID-19 VAC-TRIS SUSP	P		Vaginal Anti-infectives		
PFIZER-BIONTECH COVID-19 VACC SUSP	P		CLEOCIN CREA (<i>Use clindamycin phosphate vaginal</i>)	NP	
PREHEVBRIO	P	3 max fill(s) per 999 day(s) retail	<i>clindamycin phosphate vaginal CREA</i>	P	
PRIORIX SUSR	P		<i>clotrimazole vaginal CREA 1 %</i>	P	OTC; QL(45 GM per 30 day(s) retail)
PROQUAD SUSR	P		<i>clotrimazole vaginal CREA 2 %</i>	P	OTC; QL(31 GM per 30 day(s) retail)
RABAVERT	P		GYNAZOLE-1	P	
RECOMBIVAX HB SUSP	P	3 max fill(s) per 999 day(s) retail	GYNE-LOTRIMIN 3 CREA (<i>Use clotrimazole vaginal</i>)	NP	OTC; QL(31 GM per 30 day(s) retail)
RECOMBIVAX HB SUSY	P	3 max fill(s) per 999 day(s) retail	GYNE-LOTRIMIN CREA (<i>Use clotrimazole vaginal</i>)	NP	OTC; QL(45 GM per 30 day(s) retail)
ROTARIX SUSP	P		<i>metronidazole vaginal</i>	P	QL(70 GM per fill retail)
ROTARIX SUSR	P		MICONAZOLE 7 SUPP 100 MG	P	OTC; QL(7 EA per 30 day(s) retail)
ROTATEQ SOLN	P		<i>miconazole nitrate vaginal CREA 2 %</i>	P	OTC; QL(45 GM per 30 day(s) retail)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>miconazole nitrate vaginal KIT</i>	P		AUVI-Q SOAJ 0.15 MG/0.15ML	NP	QL(2 EA per fill retail; 4 EA per 365 day(s) retail)
<i>miconazole nitrate vaginal SUPP 200 MG</i>	P	QL(3 EA per 30 day(s) retail)	AUVI-Q SOAJ 0.3 MG/0.3ML	NP	QL(2 EA per fill retail); 4 max fill(s) per 365 day(s) retail
<i>miconazole nitrate vaginal SUPP 100 MG</i>	P	OTC; QL(7 EA per 30 day(s) retail)	<i>epinephrine (anaphylaxis) SOAJ 0.15 MG/0.15ML</i>	P	QL(2 EA per fill retail; 4 EA per 365 day(s) retail)
MONISTAT 3 COMBINATION PACK KIT (Use <i>miconazole nitrate vaginal</i>)	NP		<i>epinephrine (anaphylaxis) SOAJ</i>	P	QL(2 EA per fill retail); 4 max fill(s) per 365 day(s) retail
MONISTAT 3 CREA	P	OTC; QL(45 GM per 30 day(s) retail)	EPINEPHRINE SOAJ 0.3 MG/0.3ML	NP	QL(2 EA per fill retail); 4 max fill(s) per 365 day(s) retail
MONISTAT 7 SIMPLY CURE CREA (Use <i>miconazole nitrate vaginal</i>)	NP	OTC; QL(45 GM per 30 day(s) retail)	EPIPEN 2-PAK SOAJ (Use <i>epinephrine (anaphylaxis)</i>)	NP	QL(2 EA per fill retail); 4 max fill(s) per 365 day(s) retail
<i>terconazole vaginal CREA</i>	P		EPIPEN JR 2-PAK SOAJ (Use <i>epinephrine (anaphylaxis)</i>)	NP	QL(2 EA per fill retail); 4 max fill(s) per 365 day(s) retail
<i>terconazole vaginal SUPP</i>	P		Neurogenic Orthostatic Hypotension (NOH) - Agents		
<i>tioconazole vaginal 6.5 %</i>	P	OTC	<i>droxidopa</i>	P	SP; PA
VANDAZOLE	P	QL(70 GM per fill retail)	NORTHERA (Use <i>droxidopa</i>)	NP	SP; PA
Vaginal Anti-inflammatory Agents			Vasopressors		
<i>hydrocortisone vaginal</i>	P	QL(454 GM per fill retail)	<i>midodrine hcl</i>	P	
MONISTAT CARE INSTANT ITCH RLF (Use <i>hydrocortisone vaginal</i>)	NP	QL(454 GM per fill retail)	VITAMINS		
Vaginal Estrogens			Oil Soluble Vitamins		
ESTRACE CREA (Use <i>estradiol vaginal</i>)	NP	QL(43 GM per 30 day(s) retail)	BABY DDROPS LIQD PO (Use <i>cholecalciferol</i>)	NP	Age limit = less than 6 months
<i>estradiol vaginal CREA</i>	P	QL(43 GM per 30 day(s) retail)	<i>cholecalciferol CAPS</i>	P	OTC; QL(100 EA per fill retail)
<i>estradiol vaginal TABS</i>	P		<i>cholecalciferol CAPS 1.25 MG, 50000 UNIT</i>	P	OTC; QL(8 EA per 30 day(s) retail)
PREMARIN	P	QL(43 GM per fill retail)			
VAGIFEM TABS (Use <i>estradiol vaginal</i>)	NP				
VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions					
Anaphylaxis Therapy Agents					

Drug Name	Drug Tier	Requirements/ Limits
<i>cholecalciferol CAPS 125 MCG, 5000 UNIT</i>	P	OTC; QL(2 EA daily)
<i>cholecalciferol LIQD PO 10 MCG/ML, 400 UNIT/ML</i>	P	
<i>cholecalciferol LIQD PO</i>	P	Age limit = less than 6 months
DRISDOL CAPS (<i>Use ergocalciferol</i>)	NP	
D-VI-SOL LIQD PO (<i>Use cholecalciferol</i>)	NP	
<i>ergocalciferol CAPS</i>	P	
<i>ergocalciferol SOLN PO 200 MCG/ML</i>	P	
KEY-E CHEW	P	QL(2 EA daily)
<i>phytonadione TABS 5 MG</i>	P	
VITAMIN D3 LIQD PO 125 MCG/ML	P	Age limit = 6 months to 1 year
<i>vitamin e CAPS 100 UNIT, 200 UNIT, 400 UNIT</i>	P	OTC; QL(2 EA daily)
<i>vitamin e CAPS 100 UNIT, 200 UNIT, 268 MG, 400 UNIT, 45 MG, 90 MG, 90 MG</i>	P	QL(2 EA daily)
VITAMIN E CAPS	P	OTC; QL(2 EA daily)
VITAMIN E CHEW	P	OTC; QL(2 EA daily)
Water Soluble Vitamins		
<i>ascorbic acid TABS</i>	P	OTC; QL(100 EA per 30 day(s) retail)
B-1 TABS	P	OTC; QL(100 EA per 30 day(s) retail)
NIACIN ER CPCR	P	OTC
NIACIN ER TBCR	P	OTC
<i>niacin CPCR 250 MG, 500 MG</i>	P	OTC
<i>niacin TABS 500 MG</i>	P	OTC
<i>niacin TBCR</i>	P	OTC

Drug Name	Drug Tier	Requirements/ Limits
<i>pyridoxine hcl TABS 25 MG, 50 MG, 100 MG</i>	P	OTC
<i>riboflavin TABS</i>	P	OTC; QL(100 EA per 30 day(s) retail)
SLO-NIACIN TBCR (<i>Use niacin</i>)	NP	OTC
<i>thiamine hcl TABS</i>	P	OTC; QL(100 EA per 30 day(s) retail)
<i>thiamine mononitrate TABS 100 MG</i>	P	OTC; QL(100 EA per 30 day(s) retail)

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AEROECLIPSE MASK LARGE MISC70	ALDACTONE TABS (Use spironolactone)57	ALPHANINE SD 500 UNIT, 1000 UNIT, 1500 UNIT63
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alum & mag hydrox-simethicone SUSP 1200 MG/30ML-120 MG/30ML-1200 MG/30ML, 200 MG/5ML-20 MG/5ML-200 MG/5ML, 400 MG/10ML-40 MG/10ML-400 MG/10ML8	AMITIZA (Use lubiprostone)61	amoxicillin SUSR88
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AZOPT (Use brinzolamide)86	b-complex w/ c & folic acid CAPS .79	BENZAC AC WASH LIQD 5 % (Use benzoyl peroxide)48
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	BENICAR (Use olmesartan	

(afib/afib))	41	BIVIGAM SOLN	87	bromocriptine mesylate CAPS	35
BETAPACE TABS 80 MG, 120 MG, 160 MG (Use sotalol hcl)	41	BLINCYTO	30	bromocriptine mesylate TABS 2.5 MG	35
betaxolol hcl (ophth) SOLN	84	BLOOD GLUCOSE TEST STRIPS 333 STRP	55	brompheniramine & phenyleph ELIX	46
bethanechol chloride	94	BLULINK GLUCOSE TEST STRP	55	brompheniramine & pseudoeph ELIX	46
BETHKIS NEBU (Use tobramycin)	2	BONSITY SOPN 560 MCG/2.24ML 58		brompheniramine & pseudoeph LIQD 15 MG/5ML-1 MG/5ML	46
BEVACIZUMAB IZ 2.75 MG/0.11ML	85	BOOSTRIX SUSP	92	BRONCHITOL	91
BEVACIZUMAB IZ	85	BOOSTRIX SUSY	92	BRONCHITOL TOLERANCE TEST	91
bexarotene (topical)	50	BORTEZOMIB SOLR IJ 1 MG, 2.5 MG	32	BRUKINSA	32
bexarotene	34	bortezomib SOLR IJ	32	BUBBLES THE FISH II PEDI MASK MISC	71
BEXSERO 0.5 ML	94	bosentan TABS	43	budesonide (inhalation) SUSP	11
BEYFORTUS	88	BOSULIF TABS	32	budesonide-formoterol fumarate dihydrate	11
bicalutamide	31	BPROTECTED PEDIA POLY-VITE SOLN PO	81	budesonide-formoterol fumarate dihydrate 160 MCG/ACT-4.5 MCG/ACT	11
BIKTARVY	37	BPROTECTED PEDIA POLY-VITE/FE SOLN	80	budesonide-formoterol fumarate dihydrate 80 MCG/ACT-4.5 MCG/ACT	11
BI-MIX SOLR	42	BRAFTOVI 75 MG	32	BUFFERIN (Use aspirin buffered (cal carb-mag carb-mag oxide))	6
BINAXNOW COVID-19 AG HOME TEST KIT	55	BREATHE EASE NEB MASK/CHILD MISC	70	bumetanide TABS	57
BIOLYTE SOLN	75	BREATHE EASE NEB MASK/INFANT MISC	70	BUMEX TABS 0.5 MG (Use bumetanide)	57
BIOTEL CARE BLOOD GLUCOSE KIT	68	BREATHE EASE PEAK FLOW METER	70	BUPHENYL POWD (Use sodium phenylbutyrate)	59
BIOTENE DRY MOUTH MOIST SPRAY SOLN	78	BREYANZI	31	BUPHENYL TABS (Use sodium phenylbutyrate)	59
BIOTHRAX	94	BRIDION SOLN	21	BUPRENEX SOLN (Use buprenorphine hcl)	7
bisacodyl SUPP	67	BRILINTA 60 MG, 90 MG (Use ticagrelor)	64		
bisacodyl TBEC	67	brimonidine tartrate 0.2 %	85		
bismuth subsalicylate CHEW 262 MG	20	BRINEURA	59		
bismuth subsalicylate SUSP 525 MG/15ML, 1050 MG/30ML	20	brinzolamide	86		
bisoprolol & hydrochlorothiazide	26	BRIVIACT SOLN IV 50 MG/5ML	13		
bisoprolol fumarate	41				

buprenorphine hcl SOLN	8	BYLVAY (PELLETS) CPSP	61	CALTRATE 600+D3 TABS (Use calcium carbonate-cholecalciferol)	75
buprenorphine hcl SUBL	8	BYLVAY CAPS	61	CALTRATE BONE HEALTH TABS (Use calcium carbonate-cholecalciferol)	75
buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG	7	CABLIVI	64	camphor & menthol LOTN	50
buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG	8	CABOMETYX TABS 20 MG, 60 MG	32	CAMPTOSAR (Use irinotecan hcl)	35
buprenorphine hcl-naloxone hcl dihydrate SUBL	8	CABOMETYX TABS 40 MG	32	CAMZYOS	42
bupropion hcl (smoking deterrent)	91	CAFERGOT TABS (Use ergotamine w/ caffeine)	74	candesartan cilexetil	25
bupropion hcl TABS	15	caffeine citrate SOLN PO	1	candesartan cilexetil-hydrochlorothiazide	26
bupropion hcl TB12 100 MG	15	CAFFEINE CITRATED POWD	1	capecitabine	29
bupropion hcl TB12 150 MG	15	calcipotriene CREA	50	CAPHOSOL SOLN	78
bupropion hcl TB12 200 MG	15	calcipotriene SOLN	50	CAPRELSA	32
bupropion hcl TB24 150 MG	15	calcitonin (salmon) IJ	58	capsaicin CREA 0.025 %, 0.075 %	53
bupropion hcl TB24 300 MG	15	calcitonin (salmon) NA	58	capsaicin CREA 0.035 %	53
buspirone hcl 15 MG	9	calcitriol CAPS	59	capsaicin CREA 0.1 %	53
buspirone hcl 5 MG, 10 MG	9	CALCIUM 600 +D HIGH POTENCY TABS	75	captopril & hydrochlorothiazide 15 MG-25 MG, 15 MG-50 MG, 25 MG-25 MG	26
buspirone hcl 7.5 MG, 30 MG	9	calcium acetate (phosphate binder) CAPS	62	captopril & hydrochlorothiazide 25 MG-50 MG	26
butalbital-acetaminophen TABS 50 MG-325 MG	5	calcium carbonate (antacid) CHEW 500 MG	9	captopril	24
butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG	5	calcium carbonate-cholecalciferol TABS 10 MCG-600 MG, 20 MCG-600 MG, 400 UNIT-600 MG, 800 UNIT-600 MG	75	CAPZASIN-HP CREA (Use capsaicin)	53
butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG	5	calcium carbonate-cholecalciferol TABS 200 UNIT-500 MG, 5 MCG-500 MG, 500 MG-5 MCG	75	CAPZASIN-P CREA 0.035 % (Use capsaicin)	53
butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG	7	calcium carbonate-vitamin d TABS 125 UNIT-250 MG, 250 MG-125 UNIT	75	CARAC CREA	50
butalbital-aspirin-caffeine CAPS	5			CARAFATE SUSP (Use sucralfate)	93
butalbital-aspirin-caffeine w/cod	7			CARAFATE TABS (Use sucralfate)	93
BYETTA 10 MCG PEN SOPN 10 MCG/0.04ML (Use exenatide)	19	calcium carbonate-vitamin d TABS 600 MG-200 UNIT	75		
BYETTA 5 MCG PEN SOPN 5 MCG/0.02ML (Use exenatide)	19	calcium polycarbophil TABS	66		

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carbamazepine TB1213	CARNITOR SF SOLN PO (Use levocarnitine (metabolic modifiers)) 59	CELEXA TABS 20 MG (Use citalopram hydrobromide)16
carbamide peroxide (otic) 6.5 % ...87	CARNITOR SOLN PO 1 GM/10ML (Use levocarnitine (metabolic modifiers))59	CELEXA TABS 40 MG (Use citalopram hydrobromide)16
carbidopa35	CARNITOR TABS (Use levocarnitine (metabolic modifiers))59	CELLCEPT CAPS (Use mycophenolate mofetil)77
carbidopa-levodopa TABS35	carteolol hcl (ophth)84	CELLCEPT SUSR (Use mycophenolate mofetil)77
carbidopa-levodopa TBCR35	carvedilol 25 MG40	CELLCEPT TABS (Use mycophenolate mofetil)77
carboplatin SOLN 50 MG/5ML, 150 MG/15ML, 450 MG/45ML, 600 MG/60ML, 1000 MG/100ML29	carvedilol 3.125 MG, 6.25 MG, 12.5 MG41	cephalexin CAPS 250 MG, 500 MG 43
CARDIZEM CD CP24 120 MG, 180 MG, 300 MG (Use diltiazem hcl coated beads)41	carvedilol phosphate41	cephalexin SUSR43
CARDIZEM CD CP24 240 MG (Use diltiazem hcl coated beads)41	CARVYKTI31	CEPROTIN64
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CARETOUCH CPAP MASK WIPES MISC71	cefadroxil TABS43	cetirizine hcl TABS22
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CARETOUCH CPAP PRE-WASH SOLN MISC71	cefdinir SUSR44	cetrorelix acetate58
	cefixime CAPS44	CETROTIDE (Use cetrorelix acetate)58
	cefprozil SUSR43	CHANTIX STARTING MONTH PAK

TBPK (Use varenicline tartrate) ...	91	cholecalciferol LIQD PO 10 MCG/ML, 400 UNIT/ML	98	citalopram hydrobromide SOLN ...	16
CHEMET	21	cholecalciferol LIQD PO	98	citalopram hydrobromide TABS 10 MG	16
CHEMSTRIP K STRP	55	cholestyramine light PACK	23	citalopram hydrobromide TABS 20 MG	16
chenodiol	61	cholestyramine light POWD	23	citalopram hydrobromide TABS 40 MG	16
CHILDRENS ADVIL SUSP 100 MG/5ML (Use ibuprofen)	4	cholestyramine PACK	23	cladribine 10 MG/10ML	29
CHILDRENS MOTRIN SUSP 100 MG/5ML (Use ibuprofen)	4	cholestyramine POWD	23	clarithromycin SUSR 125 MG/5ML	68
chlordiazepoxide hcl CAPS	9	CHORIONIC GONADOTROPIN IM 58		clarithromycin SUSR 250 MG/5ML	68
chlorhexidine gluconate (mouth-throat)	78	CIBINQO	53	clarithromycin TABS	68
chlorhexidine gluconate SOLN EX 4 %	37	cilostazol	64	clarithromycin TB24	68
chloroquine phosphate TABS 250 MG	28	CILOXAN OINT	85	CLARITIN ALLERGY CHILDRENS SOLN (Use loratadine)	23
chloroquine phosphate TABS 500 MG	28	CILOXAN SOLN (Use ciprofloxacin hcl (ophth))	85	CLARITIN REDITABS JUNIORS TBDP (Use loratadine)	23
chlorpheniramine maleate SYRP ..	22	CIMDUO	37	CLARITIN REDITABS TBDP 10 MG (Use loratadine)	23
chlorpheniramine maleate TABS ..	22	cimetidine hcl PO 300 MG/5ML ...	93	CLARITIN REDITABS TBDP 5 MG (Use loratadine)	23
chlorpromazine hcl TABS 10 MG ..	37	cimetidine TABS	93	CLARITIN SOLN (Use loratadine) ..	23
chlorpromazine hcl TABS 25 MG, 50 MG, 100 MG, 200 MG	37	cinacalcet hcl	59	CLARITIN TABS (Use loratadine) ..	23
chlorthalidone 25 MG, 50 MG	57	CINQAIR	10	CLARITIN-D 12 HOUR TB12 (Use loratadine & pseudoephedrine)	46
CHLOR-TRIMETON SYRP (Use chlorpheniramine maleate)	22	CINRYZE SOLR IV	64	CLARITIN-D 24 HOUR TB24 (Use loratadine & pseudoephedrine)	46
CHLOR-TRIMETON TABS (Use chlorpheniramine maleate)	22	CIPRO TABS 250 MG, 500 MG (Use ciprofloxacin hcl)	61	CLEARDETECT COVID-19 AG HOME KIT	55
chlorzoxazone TABS 500 MG	81	CIPRODEX (Use ciprofloxacin-dexamethasone)	87	clemastine fumarate TABS 1.34 MG .	22
CHOLBAM	61	ciprofloxacin hcl (ophth) SOLN	85	CLEOCIN (Use clindamycin palmitate hydrochloride)	28
cholecalciferol CAPS 1.25 MG, 50000 UNIT	97	ciprofloxacin hcl TABS 100 MG ...	61	CLEOCIN 150 MG, 300 MG (Use clindamycin hcl)	28
cholecalciferol CAPS 125 MCG, 5000 UNIT	98	ciprofloxacin hcl TABS 250 MG, 500 MG, 750 MG	61		
cholecalciferol CAPS	97	ciprofloxacin-dexamethasone	87		
		cisplatin SOLN 50 MG/50ML, 100 MG/100ML, 200 MG/200ML	29		
		CISPLATIN SOLR	29		

CLEOCIN CREA (Use clindamycin phosphate vaginal)	96	clonidine hcl (adhd) TB12	1	COLESTID FLAVORED GRAN (Use colestipol hcl)	23
CLEOCIN-T LOTN (Use clindamycin phosphate (topical))	49	clonidine hcl TABS	25	COLESTID GRAN (Use colestipol hcl)	23
CLEVER CHOICE PEAK FLOW METER	71	clopidogrel bisulfate 75 MG	64	COLESTID TABS (Use colestipol hcl)	23
CLIMARA PTWK 0.025 MG/24HR, 0.0375 MG/24HR, 0.05 MG/24HR, 0.06 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (Use estradiol)	61	clorazepate dipotassium TABS	9	colestipol hcl GRAN	23
CLINDAGEL GEL (Use clindamycin phosphate (topical))	49	clotrimazole (topical) CREA	49	colestipol hcl TABS	23
clindamycin hcl 150 MG, 300 MG ..	28	clotrimazole (topical) SOLN	49	COMBIPATCH PTTW	60
clindamycin palmitate hydrochloride ..	28	clotrimazole vaginal CREA 1 %	96	COMBIVENT RESPIMAT AERS ..	11
clindamycin phosphate (topical) GEL ..	49	clotrimazole vaginal CREA 2 %	96	COMBIVIR (Use lamivudine-zidovudine)	38
clindamycin phosphate (topical) LOTN	49	clotrimazole w/ betamethasone CREA	49	COMETRIQ (100 MG DAILY DOSE) KIT	32
clindamycin phosphate (topical) SOLN	49	clotrimazole w/ betamethasone LOTN	50	COMETRIQ (140 MG DAILY DOSE) KIT	32
clindamycin phosphate vaginal CREA	96	clozapine TABS	36	COMETRIQ (60 MG DAILY DOSE) KIT	32
CLINITEST RAPID COVID-19 TEST KIT	55	CLOZARIL TABS (Use clozapine) ..	36	COMFORT EZ PRO PEN NEEDLES	69
clobetasol propionate CREA 0.05 % ..	52	CO MONITOR REPLACEMENT PIECES MISC	71	COMIRNATY SUSP	95
clobetasol propionate emollient base 0.05 %	52	COAGADEX	63	COMIRNATY SUSY	95
clobetasol propionate GEL 0.05 % ..	52	coal tar extract SHAM 0.5 %	55	COMPLERA 200 MG-300 MG-25 MG (Use emtricitabine- rilpivirine-tenofovir disoproxil fumarate)	38
clobetasol propionate OINT 0.05 % ..	52	COARTEM	28	CONCERTA TBCR 18 MG, 27 MG, 54 MG (Use methylphenidate hcl) ..	1
clobetasol propionate SOLN 0.05 % ..	52	codeine sulfate TABS 30 MG	6	CONCERTA TBCR 36 MG (Use methylphenidate hcl)	1
clomipramine hcl 75 MG	17	CODEINE SULFATE TABS	6	CONDOMS-MISC	68
clonazepam TABS	12	COLACE CAPS 100 MG (Use docusate sodium)	67	CONTOUR NEXT EZ KIT	68
		COLACE CLEAR CAPS (Use docusate sodium)	67	CONTOUR NEXT GEN MONITOR KIT	68
		COLAZAL CAPS (Use balsalazide disodium)	62	CONTOUR PLUS BLUE KIT	68
		colchicine TABS	63		
		colchicine w/ probenecid	63		
		COLCRYS TABS (Use colchicine) ..	63		
		COLD & FLU RELIEF NIGHTTIME D LIQD	46		

CONTOUR PLUS TEST STRP ....56	cromolyn sodium (ophth) .....86	cyclosporine CAPS 77
COPAXONE SOSY (Use glatiramer acetate) .....90	cromolyn sodium NEBU 10	cyclosporine modified (for microemulsion) CAPS 77
COPIKTRA .....32	crotamiton LOTN .....54	cyclosporine modified (for microemulsion) SOLN 77
COREG 25 MG (Use carvedilol) ...41	CTEXLI 250 MG 61	cyclosporine SOLN IV 50 MG/ML . 77
COREG 3.125 MG, 6.25 MG, 12.5 MG (Use carvedilol) .....41	CUTAQUIG .....87	CYLTEZO (2 PEN) AJKT 3
COREG CR (Use carvedilol phosphate) .....41	CUVITRU SOLN .....87	CYLTEZO (2 SYRINGE) PSKT .....3
CORETEXT SUSP 1 ML, 2 ML ....55	CVS COVID-19 AT HOME TEST KIT KIT .....56	CYLTEZO-CD/UC/HS STARTER AJKT .....3
CORGARD TABS 20 MG, 40 MG (Use nadolol) .....41	CVS DRY MOUTH SOLN .....78	CYLTEZO-PSORIASIS/UV STARTER AJKT .....3
CORIFACT .....63	CVS GLUCOSE .....18	CYMBALTA CPEP (Use duloxetine hcl) 17
CORTEF TABS (Use hydrocortisone) .....45	CVS GLUCOSE CHEW .....18	cyproheptadine hcl SYRP 23
CORTENEMA (Use hydrocortisone (intrarectal)) 8	CVS LANOLIN CREA .....54	cyproheptadine hcl TABS .....23
CORTISONE ACETATE TABS ....45	CVS SOFT GLUCOSE CHEW 18	CYRAMZA .....30
CORTROSYN SOLR (Use cosyntropin) .....55	CVS TRUE METRIX GLUCOSE TEST STRP .....56	CYSTADANE (Use betaine) 59
COSOPT (Use dorzolamide hcl-timolol maleate) .....84	cyanocobalamin SOLN IJ 1000 MCG/ML .....64	CYSTADROPS .....86
cosyntropin SOLR .....55	cyclobenzaprine hcl TABS 5 MG, 10 MG 81	CYSTAGON CAPS 62
COTELLIC .....32	cyclobenzaprine hcl TABS 7.5 MG 81	CYSTARAN 86
COVID-19 AT HOME ANTIGEN TEST KIT .....56	CYCLOGYL (Use cyclopentolate hcl) .....84	cytarabine SOLN .....29
COVID-19 AT-HOME TEST KIT ...56	CYCLOGYL 0.5 % 84	CYTOGAM SOLN .....87
COZAAR (Use losartan potassium) 25	CYCLOGYL 2 % 84	CYTOMEL TABS (Use liothyronine sodium) .....92
CREON CPEP .....57	cyclopentolate hcl 1 %84	CYTOTEC (Use misoprostol) .....94
CRESTOR TABS (Use rosuvastatin calcium) .....24	CYCLOPHOSPHAMIDE SOLN 1 GM/5ML, 2 GM/10ML (Use cyclophosphamide) 29	dabigatran etexilate mesylate CAPS . 12
cromolyn sodium (nasal) 5.2 MG/ACT .....82	CYCLOPHOSPHAMIDE SOLN 1 GM/5ML, 2 GM/10ML, 500 MG/2.5ML .....29	DAILY MULTIPLE VITAMINS TABS . 79
	cyclophosphamide SOLN .....29	dalfampridine .....90
	cyclophosphamide SOLR IJ 29	DALIRESP (Use roflumilast) 10
		dapagliflozin propanediol .....20

dapagliflozin propanediol-metformin hcl 1000 MG-10 MG	18	deflazacort SUSP	45	DERMAREST PSORIASIS GEL ...	53
dapagliflozin propanediol-metformin hcl 1000 MG-5 MG	18	deflazacort TABS	45	DERMA-SMOOTH/FS SCALP OIL (Use fluocinolone acetonide)	52
dapsone	27	DEFLUX	63	DERMOTIC (Use fluocinolone acetonide (otic))	87
DAPTACEL	92	DELSTRIGO	38	DESCOVY 120 MG-15 MG	38
DARAPRIM (Use pyrimethamine)	28	DELSYM COUGH CHILDRENS SUER (Use dextromethorphan polistirex)	46	DESCOVY 200 MG-25 MG	38
darunavir TABS 600 MG	38	DELSYM SUER (Use dextromethorphan polistirex)	46	DESFERAL 500 MG (Use deferoxamine mesylate)	21
darunavir TABS 800 MG	38	DELZICOL CPDR (Use mesalamine) 62	62	desipramine hcl TABS 10 MG, 50 MG, 75 MG, 100 MG, 150 MG	17
DARZALEX	30	DEMSEER (Use metyrosine)	25	desipramine hcl TABS 25 MG	17
DARZALEX FASPRO	32	DENG VAXIA	95	desmopressin acetate SOLN IJ ...	60
dasatinib	32	DEPAKOTE ER TB24 250 MG (Use divalproex sodium)	14	DESMOPRESSIN ACETATE SOLN NA	60
DAUNORUBICIN HCL SOLN (Use daunorubicin hcl)	32	DEPAKOTE ER TB24 500 MG (Use divalproex sodium)	14	desmopressin acetate spray	60
daunorubicin hcl SOLN	32	DEPAKOTE SPRINKLES CSDR (Use divalproex sodium)	15	desmopressin acetate spray refrigerated 0.01 %	60
DAURISMO	31	DEPAKOTE TBEC 125 MG (Use divalproex sodium)	15	desmopressin acetate TABS	60
DAYHIST ALLERGY 12 HOUR RELIEF TABS	22	DEPAKOTE TBEC 250 MG (Use divalproex sodium)	15	desogestrel & ethinyl estradiol	44
DDAVP PF SOLN IJ (Use desmopressin acetate)	60	DEPAKOTE TBEC 500 MG (Use divalproex sodium)	15	desogestrel-ethinyl estradiol (biphasic)	44
DDAVP SOLN IJ 4 MCG/ML (Use desmopressin acetate)	60	DEPEN TITRATABS TABS (Use penicillamine)	76	desogestrel-ethinyl estradiol (triphasic)	44
DDAVP TABS (Use desmopressin acetate)	60	DEPO-PROVERA SUSP IM (Use medroxyprogesterone acetate (contraceptive))	45	desonide CREA	52
DEBROX 6.5 % (Use carbamide peroxide (otic))	87	DEPO-PROVERA SUSY IM (Use medroxyprogesterone acetate (contraceptive))	45	desonide OINT	52
decitabine	29	DEPO-SUBQ PROVERA 104 SUSY SC	45	DESOWEN CREA (Use desonide)	52
deferasirox PACK	21			desoximetasone CREA 0.05 %	52
deferasirox TABS	21			desoximetasone CREA 0.25 %	52
deferasirox TBSO	21			desoximetasone GEL	52
deferiprone TABS	21			desoximetasone OINT 0.25 %	52
deferoxamine mesylate	21			DESTRESS-IRON TABS	79
DEFITELIO	64			desvenlafaxine succinate 100 MG ..	17

desvenlafaxine succinate 25 MG, 50 MG	17	dextromethorphan hbr LIQD 7.5 MG/5ML	46	(Use diazepam (anticonvulsant)) ..	12
DETROL LA CP24 (Use tolterodine tartrate)	94	dextromethorphan polistirex SUER 46		DIASTAT ACUDIAL GEL 20 MG (Use diazepam (anticonvulsant)) ..	12
DETROL TABS (Use tolterodine tartrate)	94	dextromethorphan-doxylamine-acetaminophen LIQD	46	DIASTAT PEDIATRIC GEL (Use diazepam (anticonvulsant))	12
DEX4	18	dextromethorphan-guaifenesin LIQD 100 MG/5ML-10 MG/5ML, 150 MG/7.5ML-15 MG/7.5ML, 200 MG/10ML-20 MG/10ML	47	diazepam (anticonvulsant) GEL 10 MG	12
DEX4 NATURALS	18	dextromethorphan-guaifenesin LIQD 100 MG/5ML-5 MG/5ML, 200 MG/5ML-30 MG/5ML, 400 MG/20ML-20 MG/20ML	46	diazepam (anticonvulsant) GEL ...	12
dexamethasone ELIX	45	dextromethorphan-guaifenesin LIQD 200 MG/5ML-10 MG/5ML	46	diazepam SOLN PO 5 MG/5ML	9
dexamethasone sodium phosphate (ophth)	86	dextromethorphan-guaifenesin SYRP 100 MG/5ML-10 MG/5ML, 200 MG/10ML-20 MG/10ML	47	diazepam TABS	9
dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML	45	dextromethorphan-guaifenesin TB12 600 MG-30 MG	47	dibucaine	54
DEXAMETHASONE SODIUM PHOSPHATE SOLN IJ 4 MG/ML ..	45	dextromethorphan-phenylephrine-acetaminophen CAPS	47	dichlorphenamide	57
dexamethasone sodium phosphate SOSY IJ 4 MG/ML	45	DEXYCU SUSP IO	86	diclofenac potassium TABS 50 MG .	4
dexamethasone SOLN	45	DHIVY TABS	35	diclofenac sodium (ophth)	86
dexamethasone TABS	45	DHS TAR GEL SHAM (Use coal tar extract)	55	diclofenac sodium (topical) GEL EX 50	
DEXCOM G6 RECEIVER	68	DHS TAR SHAM (Use coal tar extract)	55	diclofenac sodium TBEC	4
DEXCOM G7 RECEIVER	68	DIABETIC TUSSIN COLD/FLU CAPS	47	dicloxacillin sodium	88
DEXCOM G7 SENSOR	68	DIACOMIT CAPS 250 MG	13	dicyclomine hcl CAPS	92
DEXEDRINE CP24 10 MG, 15 MG (Use dextroamphetamine sulfate) ...	1	DIACOMIT CAPS 500 MG	13	dicyclomine hcl SOLN PO	93
DEXILANT (Use dexlansoprazole) 93		DIACOMIT PACK 250 MG	13	dicyclomine hcl TABS	93
dexlansoprazole	93	DIASTAT ACUDIAL GEL 10 MG		DIFFERIN CLEANSER LIQD (Use benzoyl peroxide)	49
dexmethylphenidate hcl TABS	1			DIFLUCAN SUSR (Use fluconazole) .	22
dexrazoxane hcl	34			DIFLUCAN TABS 100 MG, 200 MG (Use fluconazole)	22
DEXTENZA INST	86			DIFLUCAN TABS 150 MG (Use fluconazole)	22
dextroamphetamine sulfate CP24 ...	1			diflunisal TABS	6
dextroamphetamine sulfate TABS 5 MG, 10 MG	1			digoxin SOLN PO 0.05 MG/ML	42
				digoxin TABS 125 MCG, 250 MCG	42

dihydroergotamine mesylate SOLN NA 4 MG/ML 74	diphenhydramine hcl (sleep) CAPS 50 MG 66	divalproex sodium TBEC 250 MG . 15
DILANTIN (Use phenytoin sodium extended) 14	diphenhydramine hcl (sleep) TABS 25 MG 66	divalproex sodium TBEC 500 MG . 15
DILANTIN 14	diphenhydramine hcl (sleep) TABS 50 MG 66	DOCETAXEL CONC 20 MG/ML, 80 MG/4ML, 160 MG/8ML (Use docetaxel) 34
DILANTIN INFATABS CHEW (Use phenytoin) 14	diphenhydramine hcl CAPS 22	docetaxel CONC 20 MG/ML, 80 MG/4ML, 160 MG/8ML 34
DILANTIN SUSP (Use phenytoin) . 14	diphenhydramine hcl ELIX 12.5 MG/5ML 22	DOCETAXEL CONC 20 MG/ML, 80 MG/4ML, 160 MG/8ML 34
DILANTIN-125 SUSP (Use phenytoin) 14	diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML 22	DOCETAXEL SOLN (Use docetaxel) 34
DILAUDID TABS 2 MG, 4 MG (Use hydromorphone hcl) 6	diphenhydramine hcl TABS 25 MG 22	DOCETAXEL SOLN 20 MG/2ML, 80 MG/8ML, 160 MG/16ML 34
DILAUDID TABS 8 MG (Use hydromorphone hcl) 6	diphenoxylate w/ atropine LIQD ... 20	docetaxel SOLN 34
diltiazem hcl coated beads CP24 120 MG, 180 MG, 300 MG 42	diphenoxylate w/ atropine TABS .. 20	DOCIVYX SOLN 34
diltiazem hcl coated beads CP24 240 MG 42	dipyridamole 64	docusate sodium CAPS 100 MG, 250 MG 67
diltiazem hcl CP12 42	disopyramide phosphate CAPS ... 10	docusate sodium CAPS 50 MG ... 67
diltiazem hcl CP24 120 MG, 180 MG 42	DISPOSABLE FULL RANGE MISC 71	docusate sodium LIQD 50 MG/5ML, 100 MG/10ML 67
diltiazem hcl CP24 240 MG 42	DISPOSABLE LOW RANGE MISC 71	DOCUSATE SODIUM SYRP 67
diltiazem hcl extended release beads 120 MG, 180 MG, 300 MG, 360 MG, 420 MG 42	DISPOSABLE LOW RANGE/PEDIATRIC MISC 71	docusate sodium TABS 67
diltiazem hcl extended release beads 240 MG 42	DISPOSABLE PAPER MISC 71	dofetilide 10
diltiazem hcl TABS 42	DISPOSABLE UNIVERSAL RANGE MISC 71	DOJOLVI 84
dimenhydrinate TABS 21	disulfiram 250 MG 90	DOLOBID TABS 6
dimethyl fumarate CDPK 90	DITROPAN XL TB24 5 MG (Use oxybutynin chloride) 94	donepezil hydrochloride TABS 5 MG, 10 MG 90
dimethyl fumarate CPDR 90	divalproex sodium CSDR 15	dorzolamide hcl 86
DIOVAN HCT (Use valsartan- hydrochlorothiazide) 26	divalproex sodium TB24 250 MG .. 15	DORZOLAMIDE HCL 86
DIOVAN TABS (Use valsartan) ... 25	divalproex sodium TB24 500 MG .. 15	DORZOLAMIDE HCL-TIMOLOL MAL 84
	divalproex sodium TBEC 125 MG . 15	dorzolamide hcl-timolol maleate .. 84
		DOVATO 38

doxazosin mesylate	25	EASY COMFORT INSULIN SYRINGE	69	efavirenz-emtricitabine-tenofovir disoproxil fumarate	38
doxepin hcl CAPS	17	EASY COMFORT PEN NEEDLES 69		efavirenz-lamivudine-tenofovir disoproxil fumarate	38
doxepin hcl CONC	17	EASY FLOW 300 MM HOSE MISC 71		EFFEXOR XR CP24 150 MG (Use venlafaxine hcl)	17
doxycycline (monohydrate) CAPS 50 MG, 100 MG	92	EASY FLOW 400 MM HOSE MISC 71		EFFEXOR XR CP24 37.5 MG (Use venlafaxine hcl)	17
doxycycline (monohydrate) TABS 50 MG, 100 MG	92	EASY FLOW AIR NOZZLE MISC . 71		EFFEXOR XR CP24 75 MG (Use venlafaxine hcl)	17
doxycycline hyclate CAPS	92	EASY FLOW HEPA FILTER MISC 71		EFFIENT (Use prasugrel hcl)	64
doxycycline hyclate TABS 100 MG 92		EASY MAX BLOOD GLUCOSE TEST STRP	56	EFUDEX CREA (Use fluorouracil (topical))	50
doxylamine succinate (sleep)	66	EASY MAX T1 GLUCOSE SYSTEM KIT	68	ELAPRASE	59
DRAMAMINE CHEW	21	EASY TALK PLUS II TEST STRIPS STRP	56	eletriptan hydrobromide	74
DRAMAMINE TABS (Use dimenhydrinate)	21	EASY TOUCH HEALTHPRO GLUCOSE KIT	68	ELIDEL (Use pimecrolimus)	53
DRISDOL CAPS (Use ergocalciferol) 98		EASY TOUCH HEALTHPRO GLUCOSE STRP	56	ELIGARD KIT SC 7.5 MG	31
DROPLET PEN NEEDLES	69	EASY TRAK II GLUCOSE TEST STRP	56	ELIGARD SC 22.5 MG, 30 MG, 45 MG	31
drospirenone-ethinyl estradiol	44	EBASE CONTROLLER KIT MISC .71		ELIMITE CREA (Use permethrin) .	54
DROXIA CAPS	64	econazole nitrate CREA	50	ELIQUIS DVT/PE STARTER PACK TBPk	12
droxidopa	97	ECOTRIN ARTHRTIS PAIN TBEC (Use aspirin)	6	ELIQUIS TABS	12
DRYSOL SOLN	54	ECOTRIN TBEC (Use aspirin)	6	ELLA	45
DULCOLAX PINK LAXATIVE TBEC (Use bisacodyl)	67	ED BRON GP LIQD	47	ELLENCE SOLN	32
DULCOLAX SUPP (Use bisacodyl) 67		edaravone SOLN	83	ELLUME COVID-19 HOME TEST KIT	56
DULCOLAX TBEC (Use bisacodyl) 67		EDURANT	38	ELOCTATE	63
duloxetine hcl CPEP 20 MG, 30 MG, 60 MG	17	efavirenz CAPS 200 MG	38	EMBECTA AUTOSHIELD DUO ..	69
DUROLANE PRSY	81	efavirenz CAPS 50 MG	38	EMBECTA PEN NEEDLE NANO .	69
D-VI-SOL LIQD PO (Use cholecalciferol)	98	efavirenz TABS	38	EMBECTA PEN NEEDLE NANO 2 GEN	69
E.E.S. GRANULES SUSR (Use erythromycin ethylsuccinate)	68			EMBECTA PEN NEEDLE ULTRAFINE	69

EMBRACE PEN NEEDLES	70	enoxaparin sodium SOLN IJ 300 MG/3ML	12	ergotamine w/ caffeine TABS	74
EMBRACE PRO GLUCOSE TEST STRP	56	enoxaparin sodium SOSY	12	eribulin mesylate	34
EMBRACE WAVE BLOOD GLUCOSE STRP	56	ENSPRYNG	77	ERIVEDGE	31
EMCYT	31	ENTYVIO SOLR	62	ERLEADA 60 MG	31
EMFLAZA SUSP (Use deflazacort) 45		EPICORD SHEE	55	erlotinib hcl	31
EMFLAZA TABS (Use deflazacort) 45		EPIDIOLEX	13	ertapenem sodium IJ	27
EMOLLIENT LOTION-MISC	53	EPIFOAM FOAM	52	ERYGEL GEL (Use erythromycin (acne aid))	49
EMPLICITI	30	epinephrine (anaphylaxis) SOAJ 0.15 MG/0.15ML	97	ERYPED 200 SUSR (Use erythromycin ethylsuccinate)	68
emtricitabine CAPS	38	epinephrine (anaphylaxis) SOAJ ..	97	ERYPED 400 SUSR (Use erythromycin ethylsuccinate)	68
emtricitabine-rilpivirine-tenofovir disoproxil fumarate	38	epinephrine hcl (nasal)	82	erythromycin (acne aid) GEL	49
emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG	38	EPINEPHRINE SOAJ 0.3 MG/0.3ML 97		erythromycin (acne aid) SOLN	49
EMTRIVA CAPS (Use emtricitabine) . 38		EPIPEN 2-PAK SOAJ (Use epinephrine (anaphylaxis))	97	erythromycin (ophth)	85
EMTRIVA SOLN	38	EPIPEN JR 2-PAK SOAJ (Use epinephrine (anaphylaxis))	97	ERYTHROMYCIN	85
EMVERM CHEW	9	EPIVIR SOLN (Use lamivudine) ...	38	erythromycin base CPEP	68
enalapril maleate & hydrochlorothiazide	26	EPIVIR TABS 150 MG (Use lamivudine)	38	erythromycin base TABS	68
enalapril maleate TABS	24	EPIVIR TABS 300 MG (Use lamivudine)	38	erythromycin base TBEC	68
ENDARI (Use glutamine (sickle cell))	64	epoprostenol sodium	42	erythromycin ethylsuccinate SUSR 68	
ENFAMIL ENFALYTE SOLN	75	EPZICOM (Use abacavir sulfate- lamivudine)	38	erythromycin ethylsuccinate TABS 68	
ENFAMIL POLY-VI-SOL-IRON SOLN 11 MG/ML	80	EQL DRY MOUTH ORAL RINSE SOLN	78	erythromycin stearate TABS 250 MG 68	
ENERGIX-B SUSP 20 MCG/ML ...	95	EQUALYTE SOLN (Use oral electrolytes)	75	ERZOFRI 39 MG/0.25ML, 78 MG/0.5ML, 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML	36
ENERGIX-B SUSY	95	ERBITUX	31	ESBRIET CAPS (Use pirfenidone) 92	
ENHERTU	30	ergocalciferol CAPS	98	ESBRIET TABS (Use pirfenidone) 92	
ENJAYMO	64	ergocalciferol SOLN PO 200 MCG/ML	98	escitalopram oxalate TABS 10 MG 16	
				escitalopram oxalate TABS 20 MG 16	

escitalopram oxalate TABS 5 MG . 16	EULEXIN 31	ezetimibe-simvastatin 23
ESGIC TABS (Use butalbital- acetaminophen-caffeine) 5	EVAC POWD (Use psyllium) 66	famciclovir 40
esomeprazole magnesium CPDR 20 MG 93	EVENITY 58	famotidine SUSR 93
ESPEROCT 500 UNIT, 1000 UNIT, 1500 UNIT, 2000 UNIT, 3000 UNIT 63	everolimus TABS 32	famotidine TABS 10 MG 93
ESTRACE CREA (Use estradiol vaginal) 97	everolimus TBSO 32	famotidine TABS 20 MG, 40 MG .. 93
ESTRACE TABS (Use estradiol) .. 61	EVERSENSE 365 SENSOR/HOLDER 68	FARESTON (Use toremifene citrate) 31
estradiol & norethindrone acetate TABS 60	EVERSENSE E3 SENSOR/HOLDER 68	FARXIGA (Use dapagliflozin propanediol) 20
estradiol PTTW 61	EVISTA (Use raloxifene hcl) 59	FASTEP COVID-19 ANTIGEN TEST KIT 56
estradiol PTWK 61	EVKEEZA 23	FEIBA 63
estradiol TABS 61	EVOMELA IV 29	felbamate SUSP 14
estradiol vaginal CREA 97	EVRYSDI 83	felbamate TABS 14
estradiol vaginal TABS 97	EXELON 4.6 MG/24HR, 9.5 MG/24HR (Use rivastigmine) 90	FELBATOL SUSP (Use felbamate) 14
ESTROFACTORS TABS 79	exemestane 31	FELBATOL TABS (Use felbamate) 14
ethambutol hcl TABS 28	exenatide SOPN 10 MCG/0.04ML .19	FELDENE CAPS (Use piroxicam) .. 4
ethosuximide CAPS 14	exenatide SOPN 5 MCG/0.02ML ..19	felodipine 42
ethosuximide SOLN 14	EXFORGE (Use amlodipine besylate-valsartan) 26	FEMARA (Use letrozole) 31
ethynodiol diacet & eth estrad 44	EXFORGE HCT (Use amlodipine- valsartan-hydrochlorothiazide) 26	fenofibrate micronized 134 MG, 200 MG 24
etodolac CAPS 4	EXJADE TBSO (Use deferiasirox) .21	fenofibrate micronized 67 MG 24
etodolac TABS 4	EXKIVITY 31	fenofibrate TABS 160 MG 24
etonogestrel-ethinyl estradiol 44	EXONDYS 51 83	fenofibrate TABS 54 MG 24
etoposide CAPS 35	EXPIRATORY MOUTHPIECE MISC . 71	FENOGLIDE TABS (Use fenofibrate) 24
etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML 35	EXSERVAN FILM 83	fenoprofen calcium CAPS 400 MG . 4
etravirine 100 MG 38	EYLEA HD SOLN 85	FENSOLVI (6 MONTH) SC 59
etravirine 200 MG 38	EYLEA SOLN 85	fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR 6
EUFLEXXA SOSY 81	EYLEA SOSY 85	
	ezetimibe 24	

FER-IN-SOL SOLN (Use ferrous sulfate)	65	vancomycin hcl)	27	FLOTREX CHEW 0.25 MG	80
FERRETT'S TABS	65	FLAVOR BLEND SUSP	89	FLOTREX CHEW 0.5 MG	80
FERRIPROX SOLN	21	FLAVOR PLUS LIQD	89	FLOVENT DISKUS AEPB (Use fluticasone propionate (inhalation))	11
FERRIPROX TABS (Use deferiprone)	21	FLAVOR SWEET SYRP	89	FLOVENT DISKUS AEPB	11
FERRIPROX TWICE-A-DAY TABS	21	FLAVOR SWEET-SF SYRP	89	FLOVENT HFA (Use fluticasone propionate hfa)	11
ferrous fumarate TABS	65	flavoxate hcl	94	FLOWFLEX COVID-19 AG HOME TEST KIT	56
ferrous fumarate-fa-b complex-c-zn-mg-mn-cu TABS	65	FLEBOGAMMA DIF SOLN	87	FLUAD	95
FERROUS GLUCONATE TABS 324 MG	65	flecainide acetate	10	FLUAD QUADRIVALENT	95
ferrous sulfate SOLN 15 MG/ML, 15 MG/ML	65	FLEET ENEMA ENEM (Use sodium phosphates)	67	FLUARIX QUADRIVALENT SUSY	95
ferrous sulfate SOLN 220 MG/5ML, 300 MG/6.8ML	65	FLEET PEDIATRIC ENEM (Use sodium phosphates)	67	FLUARIX SUSY	95
ferrous sulfate TABS 325 MG, 65 MG, 325 MG	65	FLEET SALINE ENEMA ENEM (Use sodium phosphates)	67	FLUBLOK QUADRIVALENT	95
FERROUS SULFATE TBEC (Use ferrous sulfate)	65	FLEXICHAMBER ADULT MASK/SMALL	71	FLUBLOK SOSY	95
ferrous sulfate TBEC	65	FLEXICHAMBER CHILD MASK/LARGE	71	FLUCELVAX QUADRIVALENT SUSP	95
FEVERALL JUNIOR STRENGTH SUPP	5	FLEXICHAMBER CHILD MASK/SMALL	71	FLUCELVAX QUADRIVALENT SUSY	95
fexofenadine hcl TABS 180 MG ...	23	FLOLAN (Use epoprostenol sodium)	42	FLUCELVAX SUSP	95
fexofenadine hcl TABS 60 MG	23	FLONASE ALLERGY REL CHILDRENS SUSP (Use fluticasone propionate (nasal))	82	FLUCELVAX SUSY	95
FIBRYGA	63	FLONASE ALLERGY RELIEF SUSP (Use fluticasone propionate (nasal))	82	fluconazole SUSR	22
FILTER AIR PP MISC	71	FLORAFOL PEDIATRIC CHEW 0.5 MG	80	fluconazole TABS 100 MG, 200 MG .	22
finasteride	62	FLORAFOL PEDIATRIC CHEW 1 MG	80	fluconazole TABS 150 MG	22
fingolimod hcl	90	FLORAFOL PEDIATRIC SOLN ...	80	fluconazole TABS 50 MG	22
FINTEPLA	13	FLORIVA PLUS SOLN	80	fludarabine phosphate SOLN	29
FIRAZYR SOSY (Use icanitabant acetate)	64			FLUDARABINE PHOSPHATE SOLN	29
FIRVANQ SOLR PO (Use				fludarabine phosphate SOLR	29
				fludrocortisone acetate TABS	46
				FLULAVAL QUADRIVALENT SUSY .	

95	fluticasone propionate CREA 0.05 %	UNT/0.36ML, 600 UNT/0.72ML, 900
FLULAVAL SUSY .....95	52	UNT/1.08ML .....58
FLUMIST .....95	fluticasone propionate hfa 110	FOLOTYN .....29
FLUMIST QUADRIVALENT .....95	MCG/ACT, 220 MCG/ACT .....11	fondaparinux sodium .....12
flunisolide (nasal) .....82	fluticasone propionate hfa 44	FORA 6 CONNECT/GTEL TEST
fluocinolone acetonide (otic) .....87	MCG/ACT .....11	STRP .....56
fluocinolone acetonide OIL .....52	fluticasone propionate OINT .....52	FORA GTEL BLOOD KETONE TEST
fluocinonide CREA 0.05 %52	fluticasone-salmeterol AEPB 100	56
fluocinonide emulsified base .....52	MCG/ACT-50 MCG/ACT, 250	FORA TEST N'GO ADV-VOICE-6
fluocinonide GEL .....52	MCG/ACT-50 MCG/ACT, 500	CON .....56
fluocinonide OINT .....52	MCG/ACT-50 MCG/ACT .....11	FORA TN'G ADVANCE PRO STRP
fluocinonide SOLN .....52	fluvoxamine maleate TABS 100 MG .	56
fluorometholone (ophth) SUSP ....86	16	formaldehyde SOLN 10 %37
fluorouracil (topical) CREA 0.5 % ..50	fluvoxamine maleate TABS 25 MG,	FORTEO SOPN (Use teriparatide) 58
fluorouracil (topical) CREA 5 %50	50 MG .....16	FORTISCARE G1 TEST STRIP
fluorouracil (topical) SOLN .....50	FLUZONE HIGH-DOSE	STRP .....56
fluoxetine hcl CAPS 10 MG, 20 MG	QUADRIVALENT .....95	FOSAMAX TABS 70 MG (Use
16	FLUZONE HIGH-DOSE SUSY ....95	alendronate sodium) .....58
fluoxetine hcl CAPS 40 MG .....16	FLUZONE QUADRIVALENT SUSP	fosamprenavir calcium TABS .....38
fluoxetine hcl SOLN .....16	95	fosinopril sodium &
fluoxetine hcl TABS 10 MG .....16	FLUZONE QUADRIVALENT SUSY	hydrochlorothiazide .....26
fluoxetine hcl TABS 20 MG .....16	95	fosinopril sodium .....24
fluphenazine decanoate .....37	FLUZONE SUSP .....95	FOTIVDA .....33
fluphenazine hcl TABS .....37	FLUZONE SUSY .....95	FRAGMIN SOLN 10000 UNIT/4ML,
flurazepam hcl .....66	FLYP HYPERSONIQ CARTRIDGE	95000 UNIT/3.8ML .....12
flurbiprofen sodium .....86	MISC .....71	FRAGMIN SOSY .....12
flurbiprofen TABS .....4	FML LIQUIFILM SUSP (Use	FREESTYLE LIBRE 14 DAY
fluticasone propionate (inhalation)	fluorometholone (ophth)) .....86	READER .....68
AEPB .....11	FOCALIN TABS (Use	FREESTYLE LIBRE 14 DAY
fluticasone propionate (nasal) SUSP .	dexmethylphenidate hcl) .....1	SENSOR .....68
82	FOLCYTEINE TABS .....79	FREESTYLE LIBRE 2 PLUS
	folic acid TABS 1 MG .....65	SENSOR .....69
	folic acid TABS 400 MCG, 800 MCG .	FREESTYLE LIBRE 2 READER ..69
	65	FREESTYLE LIBRE 2 SENSOR ..69
	FOLLISTIM AQ SC 300	

FREESTYLE LIBRE 3 PLUS SENSOR	69	GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	87	GIMOTI SOLN NA	61
FREESTYLE LIBRE 3 READER ..	69	GAMMAPLEX SOLN	87	ginger (zingiber officinalis) CAPS 250 MG	2
FREESTYLE LIBRE 3 SENSOR ..	69	GAMUNEX-C	87	GLASSIA SOLN	91
FREESTYLE LIBRE READER	69	GANIRELIX ACETATE (Use ganirelix acetate)	58	glatiramer acetate SOSY	90
FREESTYLE LITE KIT	69	ganirelix acetate	58	GLEEVEC TABS (Use imatinib mesylate)	33
FT ELECTROLYTE SOLN	75	GARDASIL 9 SUSP 0.5 ML	95	glimepiride 1 MG, 2 MG	20
FT SALINE NASAL SPRAY SOLN	82	GARDASIL 9 SUSY 0.5 ML	95	glimepiride 4 MG	20
FULL KIT NEBULIZER SET MISC	71	GATTEX	62	glipizide TABS	20
furosemide SOLN PO 8 MG/ML, 10 MG/ML	57	GAUZE SPONGES	68	glipizide TB24	20
furosemide TABS	57	GAVRETO	33	glipizide-metformin hcl	18
FUZEON SOLR	38	GAZYVA	30	glucagon (rdna)	18
FYARRO	33	gefitinib	31	GLUCAGON EMERGENCY (Use glucagon (rdna))	18
gabapentin CAPS	13	GEL-ONE	81	GLUCO TO GO CHEW	18
gabapentin SOLN	13	GELSYN-3 SOSY	81	GLUCOSE 6 MG-4 GM	18
gabapentin TABS 600 MG	13	gemfibrozil TABS	24	GLUCOSE CHEW	18
gabapentin TABS 800 MG	13	GENABIO COVID-19 RAPID TEST KIT	56	GLUCOTROL XL TB24 (Use glipizide)	20
GABITRIL (Use tiagabine hcl)	14	GENERESS FE (Use norethindrone & ethinyl estradiol-fe)	44	GLUMETZA TB24 (Use metformin hcl)	18
GABLOFEN SOLN IT (Use baclofen) 81		GENICIN VITA-Q TABS	79	glutamine (sickle cell)	64
GABLOFEN SOLN IT 10000 MCG/20ML, 40000 MCG/20ML ...	81	gentamicin sulfate (ophth) SOLN ..	85	glyburide micronized 1.5 MG, 3 MG, 6 MG	20
GALAFOLD	59	gentamicin sulfate (topical) CREA	49	glyburide TABS	20
galantamine hydrobromide CP24 ..	90	gentamicin sulfate (topical) OINT ..	49	glyburide-metformin	18
galantamine hydrobromide SOLN ..	90	GENVISC 850 SOSY	81	GLYCERIN (ADULT) SUPP (Use glycerin (laxative))	67
galantamine hydrobromide TABS ..	90	GENVOYA	38	glycerin (laxative) SUPP 2 GM	67
GAMASTAN	87	GEODON (Use ziprasidone hcl) ..	36	glycine diluent	89
GAMIFANT	77	GERI-TUSSIN SYRP	48	glycopyrrolate TABS 1 MG, 2 MG	93
GAMMAGARD	87	GILENYA (Use fingolimod hcl)	90		
GAMMAGARD S/D LESS IGA SOLR	87	GILOTRIF	31		

GLYNASE (Use glyburide micronized)	20	guaifenesin-codeine SYRP	47	UNIT, 1000 UNIT, 1700 UNIT	63
GNP EASY TOUCH GLUCOSE TEST STRP	56	guanfacine hcl (adhd)	1	HEPAGAM B SOLN IJ	87
GNP ELECTROLYTE SOLUTION SOLN 280 MG/360ML-370 MG/360ML-2.8 MG/360ML-440 MG/360ML, 9 GM/360ML-280 MG/360ML-370 MG/360ML-2.8 MG/360ML-440 MG/360ML	75	guanfacine hcl	25	heparin sodium (porcine) SOLN IJ 1000 UNIT/ML, 5000 UNIT/0.5ML, 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	12
GNP GLUCOSE CHEW	19	GUARDIAN 4 GLUCOSE SENSOR 69		heparin sodium (porcine) SOLN IJ 1000 UNIT/ML	12
GNP PEN NEEDLES	70	GUARDIAN REAL-TIME REPLACE PED	69	HEPLISAV-B SOSY	95
GOCOVRI CP24	35	GYNAZOLE-1	96	HERCEPTIN 150 MG	30
GOJJI BLOOD KETONE TEST ...	56	GYNE-LOTRIMIN 3 CREA (Use clotrimazole vaginal)	96	HERCEPTIN HYLECTA	32
GOLYTELY SOLR (Use peg 3350-kcl-sod bicarb-sod chloride-sod sulfate)	66	GYNE-LOTRIMIN CREA (Use clotrimazole vaginal)	96	HIBERIX SOLR IJ	94
GONAL-F RFF REDIJECT SOPN .	58	HADLIMA PUSHTOUCH SOAJ	3	HIBICLENS SOLN EX (Use chlorhexidine gluconate)	37
GONAL-F RFF SOLR SC	58	HADLIMA SOSY	3	HIGH POTENCY MULTIVITAMIN TABS	79
GONAL-F SOLR IJ	58	HAEGARDA SOLR SC	64	HIZENTRA SOLN	87
GOODSENSE ELECTROLYTE ADV CARE SOLN	75	HALAVEN (Use eribulin mesylate) 35		HIZENTRA SOSY	87
GOTOKNOW COVID-19 ANTIGEN RAPI KIT	56	HALCION 0.25 MG (Use triazolam) 66		homatropine hbr	84
GRANIX SOLN	65	HALDOL DECANOATE (Use haloperidol decanoate)	36	HUDSON RCI AEROSOL MASK ADULT MISC	71
GRANIX SOSY	65	haloperidol decanoate	36	HULIO (2 PEN) AJKT	3
GRAPE SYRUP SYRP	89	haloperidol lactate CONC	36	HULIO (2 SYRINGE) PSKT	3
griseofulvin microsize SUSP	21	haloperidol TABS 0.5 MG, 1 MG, 2 MG, 5 MG, 10 MG	36	HUMALOG KWIKPEN SOPN 100 UNIT/ML	19
griseofulvin microsize TABS	22	haloperidol TABS 20 MG	36	HUMALOG SOLN IJ	19
griseofulvin ultramicrosize	22	HAVRIX 1440 EL U/ML	95	HUMATE-P SOLR	63
guaifenesin LIQD	48	HAVRIX IM 720 EL U/0.5ML	95	HUMATROPE CART IJ	59
guaifenesin TB12 1200 MG	48	HEMATINIC PLUS VIT/MINERALS TABS	65	HUMULIN 70/30 KWIKPEN SUPN 19	
guaifenesin TB12 600 MG	48	HEMLIBRA 30 MG/ML, 60 MG/0.4ML, 105 MG/0.7ML, 150 MG/ML	63	HUMULIN 70/30 SUSP	19
guaifenesin-codeine SOLN	47	HEMOFIL M SOLR 250 UNIT, 500		HUMULIN N KWIKPEN SUPN	19
				HUMULIN N SUSP	19
				HUMULIN R SOLN IJ	19

HYALGAN SOLN	81	52	hyoscyamine sulfate SUBL 0.125 MG	93
HYALGAN SOSY	81	hydrocortisone (topical) CREA 2.5 %		
HYCANTIN CAPS	35	52	hyoscyamine sulfate TABS 0.125 MG	93
HYCANTIN SOLR (Use topotecan hcl)	35	hydrocortisone (topical) LOTN 1 %		
HYCODAN SOLN (Use hydrocodone bitartrate-homatropine methylbromide)	46	52	hyoscyamine sulfate TB12 0.375 MG	93
hydralazine hcl TABS	27	hydrocortisone (topical) LOTN 2.5 %		
HYDRALYTE FREEZER POPS SOLN	75	52	hyoscyamine sulfate TBDP 0.125 MG	93
HYDRALYTE SOLN	75	hydrocortisone (topical) OINT 1 %, 2.5 %		
HYDREA (Use hydroxyurea)	34	52	HYPERHEP B SOLN IM	87
hydrochlorothiazide CAPS	57	hydrocortisone butyrate SOLN		
hydrochlorothiazide TABS 25 MG, 50 MG	57	HYDROCORTISONE COMPLETE KIT THPK		
hydrocodone bitartrate-homatropine methylbromide SOLN	46	52	HYPERRHIO S/D SOSY IM 1500 UNIT	87
hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML	7	hydrocortisone TABS		
hydrocodone-acetaminophen SOLN 325 MG/15ML-10 MG/15ML	7	hydrocortisone vaginal		
hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG	7	hydrocortisone w/acetic acid		
HYDROCORT LOTION COMPLETE KIT THPK	52	87	HYRIMOZ SOAJ	3
hydrocortisone (intrarectal)	8	HYDROMORPHONE HCL SUPP		
hydrocortisone (rectal) EX 1 %	8	6	HYRIMOZ SOSY	3
hydrocortisone (rectal) EX 2.5 %	8	hydrocodone bitartrate-homatropine methylbromide SOLN		
hydrocortisone (topical) CREA 0.5 %	52	46	HYRIMOZ-CROHNS/UC STARTER SOAJ	3
hydrocortisone (topical) CREA 1 %		hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML		
		7	HYRONAN KIT	81
		hydrocodone-acetaminophen SOLN 325 MG/15ML-10 MG/15ML		
		7	HY-VEE GLUCOSE	19
		hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG		
		7	HYZAAR (Use losartan potassium & hydrochlorothiazide)	26
		HYDROCORT LOTION COMPLETE KIT THPK		
		52	ibandronate sodium SOLN	58
		hydrocortisone (intrarectal)		
		8	IBRANCE CAPS	33
		hydrocortisone (rectal) EX 1 %		
		8	IBRANCE TABS	33
		hydrocortisone (rectal) EX 2.5 %		
		8	ibuprofen CHEW	4
		hydrocortisone (topical) CREA 0.5 %		
		52	ibuprofen lysine	4
		hydrocortisone (topical) CREA 1 %		
			ibuprofen SUSP 100 MG/5ML, 200 MG/10ML	4
			ibuprofen SUSP 40 MG/ML, 50 MG/1.25ML	4
			ibuprofen TABS 200 MG	4
			ibuprofen TABS 400 MG, 600 MG, 800 MG	4

icatibant acetate SOSY	64	IMOVAX RABIES SUSR	95	INSULIN LISPRO SOLN IJ	20
ICLUSIG	33	IMURAN TABS (Use azathioprine)	77	INSULIN SYRINGES	70
IDELVION	63	INCRELEX	59	INSULIN SYRINGES-MISC	70
IDHIFA	33	INCRUSE ELLIPTA	10	INSUPEN PEN NEEDLES	70
IFE-BIMIX 30/1 SOLN	42	indapamide TABS 1.25 MG, 2.5 MG .	58	INTELENCE 100 MG (Use etravirine)	38
IHEALTH BLOOD GLUCOSE TEST		INDERAL LA CP24 (Use propranolol		INTELENCE 200 MG (Use etravirine)	38
STR STRP	56	hcl)	41	INTELENCE 25 MG	38
IHEALTH COVID-19 RAPID TEST		INDICAID COVID-19 RAPID TEST		INTELISWAB COVID-19 RAPID	
KIT	56	KIT	56	TEST KIT	56
ILARIS SOLN	4	INDOCIN SUSP (Use indomethacin) .	4	INTUNIV (Use guanfacine hcl	
ILUMYA	51	indomethacin CAPS 25 MG, 50 MG 4		(adhd))	1
ILUVIEN	86	INDOMETHACIN SODIUM	4	INVANZ IJ (Use ertapenem sodium) .	27
imatinib mesylate TABS	33	indomethacin SUPP	4	INVEGA HAFYERA	36
IMBRUVICA CAPS	33	indomethacin SUSP	4	INVEGA SUSTENNA	36
IMBRUVICA TABS	33	INFANRIX	92	INVEGA TRINZA	36
IMFINZI	30	INFANTS ADVIL SUSP (Use		IOPIDINE	85
imipramine hcl TABS	17	ibuprofen)	4	IPOL	95
imiquimod 5 %	53	INLYTA	30	ipratropium bromide (nasal) 0.03 %	82
IMITREX 5 MG/ACT, 20 MG/ACT		INNOSPIRE REPLACEMENT		ipratropium bromide (nasal) 0.06 %	82
(Use sumatriptan)	74	FILTER MISC	71	ipratropium bromide SOLN 0.02 %	10
IMITREX STATDOSE REFILL SOCT		INQOVI	32	ipratropium-albuterol SOLN	11
6 MG/0.5ML (Use sumatriptan		INREBIC	33	irbesartan	25
succinate)	74	INSULIN GLARGINE-YFGN SOLN	19	irbesartan-hydrochlorothiazide	26
IMITREX STATDOSE SYSTEM		19		IRESSA (Use gefitinib)	31
SOAJ 6 MG/0.5ML (Use sumatriptan		INSULIN GLARGINE-YFGN SOPN	19	irinotecan hcl	35
succinate)	74	19		IRON CHEWS PEDIATRIC CHEW	65
IMITREX TABS (Use sumatriptan		INSULIN LISPRO (1 UNIT DIAL)		IRON TABS 28 MG	65
succinate)	74	SOPN	19		
IMLYGIC	35	INSULIN LISPRO JUNIOR			
IMODIUM A-D CAPS (Use		KWIKPEN SOPN	20		
loperamide hcl)	20	INSULIN LISPRO PROT & LISPRO			
IMODIUM A-D TABS (Use		SUPN	20		
loperamide hcl)	21				

ISENTRESS CHEW 100 MG .....38	JIVI 63	levetiracetam) .....13
ISENTRESS CHEW 25 MG 38	JULUCA 38	KEPPRA TABS 250 MG, 750 MG (Use levetiracetam) 13
ISENTRESS HD TABS 38	JUXTAPID 5 MG, 10 MG, 20 MG, 30 MG 24	KEPPRA TABS 500 MG (Use levetiracetam) .....13
ISENTRESS PACK .....38	JYNARQUE TABS 15 MG, 30 MG (Use tolvaptan) .....60	KEPPRA XR TB24 (Use levetiracetam) .....13
ISENTRESS TABS 38	JYNARQUE TBPK 15 MG (Use tolvaptan) .....60	KERALYT GEL (Use salicylic acid) 53
isoniazid SYRP .....28	JYNNEOS 95	KERALYT GEL .....53
isoniazid TABS .....28	KADCYLA 30	KESIMPTA 90
ISOPTO ATROPINE SOLN .....84	KALBITOR .....64	ketoconazole (topical) CREA .....50
ISORDIL TITRADOSE TABS 5 MG (Use isosorbide dinitrate) .....9	KALETRA SOLN .....38	ketoconazole (topical) SHAM 2 % .50
isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG 9	KALETRA TABS 25 MG-100 MG (Use lopinavir-ritonavir) .....38	KETONE TEST STRP .....56
isosorbide mononitrate TABS .....9	KALETRA TABS 50 MG-200 MG (Use lopinavir-ritonavir) .....38	ketorolac tromethamine (ophth) 0.4 %86
ISOSORBIDE MONONITRATE TABS 9	KALYDECO PACK 13.4 MG, 25 MG, 50 MG, 75 MG 91	ketorolac tromethamine (ophth) 0.5 %86
isosorbide mononitrate TB24 .....9	KALYDECO PACK 5.8 MG .....91	ketorolac tromethamine SOLN IJ 15 MG/ML, 30 MG/ML .....4
isotretinoin 10 MG, 20 MG, 30 MG, 40 MG .....49	KALYDECO TABS .....91	KETOROLAC TROMETHAMINE SOLN IJ 30 MG/ML 4
ISTODAX SOLR (Use romidepsin) 33	KANJINTI 420 MG .....30	ketorolac tromethamine TABS .....4
ISTURISA 58	KANUMA .....59	KETOSTIX STRP .....56
ITCH RELIEF CREA .....50	KAPVAY TB12 (Use clonidine hcl (adhd)) .....1	ketotifen fumarate (ophth) 0.035 % 87
itraconazole CAPS .....22	KAZANO (Use alogliptin-metformin hcl) 18	KEVEYIS (Use dichlorphenamide) 57
IXEMPRA KIT .....35	KCENTRA .....63	KEY-E CHEW .....98
IXIARO 95	KEMOPLAT SOLN .....29	KEYTRUDA 30
IXINITY SOLR 63	KEPIVANCE 5.16 MG 34	KHAPZORY .....34
JADENU SPRINKLE PACK (Use deferasirox) 21	KEPIVANCE 6.25 MG 34	KIMMTRAK .....30
JADENU TABS (Use deferasirox) .21	KEPPRA SOLN PO 100 MG/ML (Use levetiracetam) .....13	KINDERLYTE PREMAX SOLN ....75
JAKAFI 33	KEPPRA TABS 1000 MG (Use	
JANSSEN COVID-19 VACCINE ..95		
JEMPERLI .....30		
JEVTANA .....35		

KINDERLYTE SOLN	75	KRYSTEXXA	63	lamivudine TABS 300 MG	38
KINERET SOSY	4	K-TAB TBCR 10 MEQ (Use potassium chloride)	76	lamivudine-zidovudine	38
KINRIX SUSY	92	K-TAB TBCR 20 MEQ (Use potassium chloride)	76	lamotrigine CHEW	13
KISQALI (200 MG DOSE)	33	KUVAN PACK (Use sapropterin dihydrochloride)	59	lamotrigine TABS	13
KISQALI (400 MG DOSE)	33	KUVAN TABS (Use sapropterin dihydrochloride)	59	lamotrigine TB24	13
KISQALI (600 MG DOSE)	33	KYPROLIS	33	LANCETS-MISC	69
KISQALI FEMARA (200 MG DOSE) .	32	labetalol hcl TABS 100 MG	41	LANCING DEVICE-MISC	69
KISQALI FEMARA (400 MG DOSE) .	32	labetalol hcl TABS 200 MG, 400 MG .	41	lanolin (topical) CREA	54
KISQALI FEMARA (600 MG DOSE) .	32	labetalol hcl TABS 300 MG	41	lanolin XX	89
KITABIS PAK (W/ NEBULIZER)		lactic acid (ammonium lactate) CREA	53	LANOLIN XX	89
NEBU 300 MG/5ML (Use tobramycin)	2	lactic acid (ammonium lactate) LOTN 12 %	53	LANOLOR CREA	54
KLARON (Use sulfacetamide sodium (acne))	49	lactulose (encephalopathy)	62	LANOXIN SOLN IJ (Use digoxin) .	42
KLONOPIN TABS (Use clonazepam)	12	lactulose SOLN	67	LANOXIN TABS 125 MCG, 250 MCG (Use digoxin)	42
KOATE SOLR	63	LAMICTAL CHEW (Use lamotrigine) .	13	lansoprazole CPDR 15 MG	93
KOATE-DVI SOLR 500 UNIT, 1000 UNIT	63	LAMICTAL TABS (Use lamotrigine) .	13	lansoprazole CPDR 30 MG	93
KOGENATE FS KIT	63	LAMICTAL XR TB24 (Use lamotrigine)	13	lapatinib ditosylate	33
KOKO PEAK PRO MOUTHPIECE MISC	71	LAMISIL AT ATHLETES FOOT CREA (Use terbinafine hcl (topical))	50	LASIX TABS (Use furosemide)	57
KOMBIGLYZE XR (Use saxagliptin-metformin hcl)	18	LAMISIL AT CREA (Use terbinafine hcl (topical))	50	latanoprost SOLN	87
KOSELUGO	33	LAMISIL AT JOCK ITCH CREA (Use terbinafine hcl (topical))	50	LATANOPROST SOLN	87
KOVALTRY	63	lamivudine SOLN	38	LATUDA (Use lurasidone hcl)	36
K-PHOS-NEUTRAL (Use pot phosphate monobasic w/ sod phosphate dibasic & monobasic) ..	76	lamivudine TABS 150 MG	38	leflunomide	5
KRINTAFEL	28			lenalidomide	77
KROGER GLUCOSE	19			LENVIMA (10 MG DAILY DOSE) .	30
				LENVIMA (12 MG DAILY DOSE) .	30
				LENVIMA (14 MG DAILY DOSE) .	30
				LENVIMA (18 MG DAILY DOSE) .	30
				LENVIMA (20 MG DAILY DOSE) .	30
				LENVIMA (24 MG DAILY DOSE) .	30
				LENVIMA (4 MG DAILY DOSE) ..	30

LENVIMA (8 MG DAILY DOSE) .. 30	44	calcium) .....24
LEQVIO .....24	levonorgestrel (emergency oc) 1.5	liraglutide 19
LETAIRIS (Use ambrisentan) .....43	MG 45	lisdexamfetamine dimesylate CAPS 1
letrozole 31	levonorgestrel-eth estradiol	lisdexamfetamine dimesylate CHEW .
leucovorin calcium TABS 34	(triphasic) 44	1
LEUKERAN 29	levonorgestrel-ethinyl estradiol (91-	lisinopril & hydrochlorothiazide 12.5
LEUKINE SOLR IJ .....65	day) 0.03 MG-0.15 MG 44	MG-10 MG, 12.5 MG-20 MG 26
leuprolide acetate KIT IJ 1 MG/0.2ML	levothyroxine sodium TABS 92	lisinopril & hydrochlorothiazide 25
.....31	LEVULAN KERASTICK SOLR 50	MG-20 MG 26
LEUPROLIDE ACETATE-	LEXAPRO TABS 10 MG (Use	lisinopril TABS 2.5 MG 24
BUPIVACAINE 31	escitalopram oxalate) 16	lisinopril TABS 5 MG, 10 MG, 20 MG,
levabuterol tartrate 11	LEXAPRO TABS 20 MG (Use	30 MG, 40 MG 24
LEVBIID TB12 (Use hyoscyamine	escitalopram oxalate) 16	LITETOUCH MASK LARGE MISC 71
sulfate) 93	LEXAPRO TABS 5 MG (Use	LITETOUCH MASK MEDIUM MISC .
levetiracetam SOLN PO 100 MG/ML,	escitalopram oxalate) 16	71
500 MG/5ML 13	LEXIVA SUSP 38	LITETOUCH MASK SMALL MISC .71
levetiracetam TABS 1000 MG 13	LEXIVA TABS (Use fosamprenavir	lithium 35
levetiracetam TABS 250 MG, 750	calcium) 38	lithium carbonate CAPS 35
MG 13	LIALDA TBEC (Use mesalamine) . 62	lithium carbonate TABS 36
levetiracetam TABS 500 MG 13	LIBTAYO 30	lithium carbonate TBCR 36
levetiracetam TB24 13	LICEMD GEL 54	LITHOBID TBCR (Use lithium
levobunolol hcl 0.5 % 84	lidocaine CREA 4 % 54	carbonate) 36
levocarnitine (metabolic modifiers)	lidocaine hcl (mouth-throat) 2 % ...78	LITTLE REMEDIES SALINE SOLN
SOLN PO 1 GM/10ML 59	lidocaine hcl CREA 3 % 54	82
levocarnitine (metabolic modifiers)	lidocaine hcl CREA 4 % 54	LIVMARLI 61
TABS 59	lidocaine hcl GEL 2 % 54	LIVTENCITY 40
levocetirizine dihydrochloride TABS	lidocaine OINT 5 % 54	LMX 4 CREA (Use lidocaine) 54
23	lidocaine-prilocaine CREA 54	LODINE TABS (Use etodolac) 4
levofloxacin TABS 61	LIORESAL SOLN IT (Use baclofen)	LODOSYN (Use carbidopa) 35
levoleucovorin calcium SOLN 250	81	LOHIST-D LIQD 47
MG/25ML 34	LIORESAL SOLN IT 81	LOMOTIL TABS (Use diphenoxylate
levoleucovorin calcium SOLR 34	liothyronine sodium TABS 92	w/ atropine) 21
levonorgestrel & eth estradiol TABS	LIPITOR TABS (Use atorvastatin	LONSURF 32

loperamide hcl CAPS	21	benazepril & hydrochlorothiazide) .	26	MACROBID (Use nitrofurantoin monohyd macro)	28
loperamide hcl TABS	21	LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (Use amlodipine besylate-benazepril hcl)	26	MACRODANTIN 50 MG, 100 MG (Use nitrofurantoin macrocrystal) ..	28
LOPID TABS (Use gemfibrozil)	24	LOTRIMIN AF CREA (Use clotrimazole (topical))	50	magnesium citrate 1.745 GM/30ML	67
lopinavir-ritonavir SOLN	38	LOTRIMIN AF JOCK ITCH CREA (Use clotrimazole (topical))	50	MAGNESIUM EXTRA STRENGTH CAPS	76
lopinavir-ritonavir TABS 25 MG-100 MG	39	lovastatin TABS 10 MG, 20 MG ...	24	magnesium hydroxide SUSP 7.75 %, 400 MG/5ML, 1200 MG/15ML, 2400 MG/30ML	67
lopinavir-ritonavir TABS 50 MG-200 MG	39	lovastatin TABS 40 MG	24	magnesium oxide (mg supplement) TABS 241.5 MG, 400 MG, 400 MG	76
LOPRESSOR TABS 100 MG (Use metoprolol tartrate)	41	LOVENOX SOLN IJ 300 MG/3ML (Use enoxaparin sodium)	12	MAGNESIUM OXIDE -MG SUPPLEMENT CAPS	76
LOPRESSOR TABS 50 MG (Use metoprolol tartrate)	41	LOVENOX SOSY (Use enoxaparin sodium)	12	magnesium oxide TABS 400 MG ...	9
LOQTORZI	30	loxapine succinate	36	MAGOX 400 TABS (Use magnesium oxide (mg supplement))	76
loratadine & pseudoephedrine TB12 .	47	lubiprostone	61	malathion	54
loratadine & pseudoephedrine TB24 .	47	LUCENTIS SOSY	85	maraviroc TABS 150 MG	39
loratadine SOLN	23	LUMAKRAS	33	maraviroc TABS 300 MG	39
loratadine TABS	23	LUMIZYME	59	MARGENZA	30
loratadine TBDP 10 MG	23	LUMOXITI	30	MASK VORTEX/CHILD/FROG ...	72
lorazepam TABS	10	LUNG PERFORM PEAK FLOW METER	72	MASK	
LORBRENA	33	LUPKYNIS	77	VORTEX/TODDLER/LADYBUG ..	72
losartan potassium & hydrochlorothiazide	26	LUPRON DEPOT-PED (1-MONTH) .	59	MATULANE	34
losartan potassium	25	LUPRON DEPOT-PED (3-MONTH) .	59	MAVYRET PACK	40
LOSEASONIQUE (Use levonorgestrel-ethinyl estradiol (91-day))	44	lurasidone hcl	36	MAVYRET TABS	40
LOTENSIN 10 MG, 20 MG (Use benazepril hcl)	25	LUXTURNA	85	MAXALT TABS 10 MG (Use rizatriptan benzoate)	74
LOTENSIN 40 MG (Use benazepril hcl)	24	LYNPARZA TABS	33	MAXALT-MLT TBDP 10 MG (Use rizatriptan benzoate)	74
LOTENSIN HCT 12.5 MG-10 MG, 12.5 MG-20 MG, 25 MG-20 MG (Use		LYSODREN	31	MAXITROL OINT (Use neomycin-polymy-dexameth)	86
		MACI	81		

MAXITROL SUSP (Use neomycin-polymyx-dexameth)	86	memantine hcl SOLN	90	66	metformin hcl TABS 500 MG	18
MAXI-TUSS PE LIQD	47	memantine hcl TABS	90		metformin hcl TABS 850 MG, 1000 MG	18
MAXI-TUSS PE MAX LIQD	47	MENACTRA	94		metformin hcl TB24 500 MG	18
MAXZIDE TABS (Use triamterene & hydrochlorothiazide)	57	MENOPUR SC	58		metformin hcl TB24 750 MG	18
MAXZIDE-25 TABS (Use triamterene & hydrochlorothiazide)	57	MENQUADFI 0.5 ML	94		methadone hcl TABS 10 MG	6
meclizine hcl CHEW	21	MENVEO SOLN	94		methadone hcl TABS 5 MG	6
meclizine hcl TABS 12.5 MG, 25 MG 21		meperidine hcl SOLN PO 50 MG/5ML	6		methazolamide TABS	57
MEDROL TABS 4 MG, 8 MG (Use methylprednisolone)	45	meperidine hcl TABS 50 MG	6		methenamine mandelate	28
MEDROL TBPk (Use methylprednisolone)	45	meprobamate	9		methenamine-hyosc-methylene blue-sod phos-phenyl sal TABS 81.6 MG . 27	
medroxyprogesterone acetate (contraceptive) SUSP IM	45	MEPSEVII	59		methimazole TABS	92
medroxyprogesterone acetate (contraceptive) SUSY IM	45	mercaptopurine SUSP 2000 MG/100ML	29		methocarbamol TABS 500 MG, 750 MG	81
medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG	89	mercaptopurine TABS	29		methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML	29
mefloquine hcl	28	mesalamine CP24	62		methotrexate sodium TABS 2.5 MG 29	
megestrol acetate SUSP	31	mesalamine CPDR	62		methyldopa TABS	25
megestrol acetate TABS	31	mesalamine ENEM	62		methylergonovine maleate TABS ..	87
MEIJER GLUCOSE	19	mesalamine TBEC	62		METHYLIN SOLN 10 MG/5ML (Use methylphenidate hcl)	1
MEKINIST TABS	33	mesna SOLN	34		METHYLIN SOLN 5 MG/5ML (Use methylphenidate hcl)	1
MEKTOVI	33	mesna TABS	34		methyphenidate hcl CPCR	1
MELATONIN SUBL	2	MESNEX SOLN (Use mesna)	34		methyphenidate hcl SOLN 10 MG/5ML	2
melatonin TABS 3 MG, 5 MG	2	MESNEX TABS	34		methyphenidate hcl SOLN 5 MG/5ML	2
melatonin TBDP 3 MG	2	MESTINON TABS (Use pyridostigmine bromide)	28		methyphenidate hcl TABS 10 MG, 20 MG	2
meloxicam TABS	4	MESTINON TBCR (Use pyridostigmine bromide)	28			
melphalan	29	METADATE CD CPCR (Use methylphenidate hcl)	1			
melphalan hcl IV	29	METAMUCIL FREE & NATURAL POWD (Use psyllium)	66			
		METAMUCIL POWD (Use psyllium) .				

methylphenidate hcl TABS 5 MG ... 2	metronidazole (topical) LOTN 54	MINIELITE FILTER
methylphenidate hcl TB24 18 MG, 27 MG, 54 MG 2	metronidazole TABS 250 MG, 500 MG 27	REPLACEMENTS MISC 72
methylphenidate hcl TB24 36 MG .. 2	metronidazole vaginal 96	MINIPRESS CAPS (Use prazosin hcl) 25
methylphenidate hcl TBCR 10 MG, 20 MG, 36 MG 2	metirosine 25	MINIVELLE PTTW (Use estradiol) 61
methylphenidate hcl TBCR 18 MG, 27 MG, 54 MG 2	mexiletine hcl 10	minocycline hcl CAPS 92
methylprednisolone TABS 4 MG, 8 MG 45	MIACALCIN IJ (Use calcitonin (salmon)) 58	minoxidil 10 MG 27
methylprednisolone TBPK 45	MICARDIS (Use telmisartan) 25	minoxidil 2.5 MG 27
methyltestosterone TABS 8	MICARDIS HCT (Use telmisartan-hydrochlorothiazide) 26	MIRALAX POWD (Use polyethylene glycol 3350) 67
metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML 61	MICONAZOLE 7 SUPP 100 MG .. 96	MIRCETTE (Use desogestrel-ethinyl estradiol (biphasic)) 44
metoclopramide hcl TABS 61	miconazole nitrate (topical) CREA .50	MIRODERM BIO MATRIX FENESTRAT 55
metolazone 58	miconazole nitrate vaginal CREA 2 % 96	MIRODERM BIO MATRIX FENESTRAT+ 55
metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 25 MG-50 MG 26	miconazole nitrate vaginal KIT 97	mirtazapine TABS 15 MG 15
metoprolol & hydrochlorothiazide TABS 50 MG-100 MG 26	miconazole nitrate vaginal SUPP 100 MG 97	mirtazapine TABS 30 MG 15
metoprolol succinate TB24 200 MG 41	miconazole nitrate vaginal SUPP 200 MG 97	mirtazapine TABS 7.5 MG, 45 MG 15
metoprolol succinate TB24 25 MG, 50 MG, 100 MG 41	MICRHOGAM ULTRA-FILTERED PLUS SOSY IM 88	mirtazapine TBDP 15 MG 15
metoprolol tartrate TABS 100 MG .41	MICROLIFE DIGITAL PEAK FLOW . 72	mirtazapine TBDP 30 MG 15
metoprolol tartrate TABS 25 MG, 50 MG 41	midazolam hcl SOLN IJ 66	mirtazapine TBDP 45 MG 15
METROCREAM CREA (Use metronidazole (topical)) 54	MIDAZOLAM HCL SOLN IJ 66	misoprostol 94
METROLOTION LOTN (Use metronidazole (topical)) 54	midodrine hcl 97	mitoxantrone hcl 20 MG/10ML, 25 MG/12.5ML, 30 MG/15ML 32
metronidazole (topical) CREA 54	miglustat 64	MM BLOOD GLUCOSE SYSTEM KIT 69
metronidazole (topical) GEL 0.75 % 54	MIGRANAL SOLN NA (Use dihydroergotamine mesylate) 74	MM BLULINK GLUCOSE TEST STRP 56
	MINCORA TABS 79	M-M-R II SOLR 95
	MINI WRIGHT PEAK FLOW METER 72	MODERNA COVID-19 BIVAL 6M-5Y 95
		MODERNA COVID-19 BIVALENT 95

MODERNA COVID-19 VAC 6M-11Y SUSP	96	MOTRIN INFANTS DROPS SUSP (Use ibuprofen)	4	MULTIVITAMIN INFANT & TODDLER SOLN PO	81
MODERNA COVID-19 VAC 6M-11Y SUSY	96	MOUTH KOTE REMINT SOLN ...	78	MULTIVITAMIN INFANT & TODDLER SOLN	81
MODERNA COVID-19 VACCINE SUSP	96	MOUTH KOTE SOLN	78	MULTIVITAMIN TABS	79
MOI-STIR SOLN	78	moxifloxacin hcl (ophth) SOLN OP	85	MULTIVITAMIN/FLUORIDE CHEW 0.25 MG, 1 MG	80
molindone hcl	37	MOZOBIL (Use plerixafor)	65	MULTIVITAMIN/FLUORIDE CHEW 0.5 MG	80
mometasone furoate CREA	52	MS CONTIN TBCR (Use morphine sulfate)	6	MULTIVITAMIN/FLUORIDE SOLN 80	
mometasone furoate OINT	52	MUCINEX D MAX STRENGTH TB12 (Use pseudoephedrine-guaifenesin) .	47	MULTI-VIT-FLOR CHEW 0.25 MG, 1 MG	80
mometasone furoate SOLN	52	MUCINEX D TB12 (Use pseudoephedrine-guaifenesin)	47	MULTI-VIT-FLOR CHEW 0.5 MG .	80
MONISTAT 3 COMBINATION PACK KIT (Use miconazole nitrate vaginal) .	97	MUCINEX DM TB12 (Use dextromethorphan-guaifenesin) ...	47	mupirocin calcium (topical)	49
MONISTAT 3 CREA	97	MUCINEX MAXIMUM STRENGTH TB12 (Use guaifenesin)	48	mupirocin OINT	49
MONISTAT 7 SIMPLY CURE CREA (Use miconazole nitrate vaginal) ..	97	MUCINEX TB12 (Use guaifenesin) 48		MVASI	30
MONISTAT CARE INSTANT ITCH RLF (Use hydrocortisone vaginal) 97		MULPLETA	65	MX-SOL BLEND SF SUSP	89
MONJUVI	30	MULTI VITAMIN TABS	79	MX-SOL BLEND SUSP	89
MONOVISC	81	MULTI VITAMIN W/D-3 TABS	79	MX-SOL SF SYRP	89
montelukast sodium CHEW	10	multiple vitamin TABS	79	MX-SOL SUSPEND SUSP	89
montelukast sodium PACK	10	multiple vitamins w/ iron TABS	79	MX-SOL SYRP	89
montelukast sodium TABS	10	MULTIPLE VITAMINS W/ MINERALS TABS	79	MYALEPT	59
morphine sulfate SOLN PO 10 MG/5ML, 20 MG/5ML	6	MULTIPLE VITAMINS W/ MINERALS-VARIOUS	79	MYAMBUTOL TABS 400 MG (Use ethambutol hcl)	28
morphine sulfate SOLN PO 20 MG/ML, 100 MG/5ML	6	MULTIVITAMIN + FLUORIDE CHEW 0.25 MG, 1 MG	80	MYCOBUTIN (Use rifabutin)	29
morphine sulfate SUPP	6	MULTIVITAMIN + FLUORIDE CHEW 0.5 MG	80	mycophenolate mofetil CAPS	77
morphine sulfate TABS	6	MULTIVITAMIN ADULT TABS	79	mycophenolate mofetil SUSR	77
morphine sulfate TBCR	6	MULTIVITAMIN DROPS/IRON SOLN		mycophenolate mofetil TABS	77
MOTRIN CHILDRENS CHEW (Use ibuprofen)	4			mycophenolate sodium	77
				MYDRIACYL SOLN (Use tropicamide)	84

MYFORTIC (Use mycophenolate sodium)	77	naratriptan hcl	74	neomycin-polymyxin-gramicidin ...	85
MYLERAN TABS	29	NARCAN LIQD (Use naloxone hcl) 21		neomycin-polymyxin-hc (ophth) ...	86
MYLICON INFANTS GAS RELIEF SUSP (Use simethicone)	61	NARDIL (Use phenelzine sulfate) .	16	neomycin-polymyxin-hc (otic) SOLN .	87
MYSOLINE (Use primidone)	13	NASACORT ALLERGY 24HR AERO (Use triamcinolone acetonide (nasal))	82	neomycin-polymyxin-hc (otic) SUSP .	87
NABI-HB SOLN IM	88	NASALCROM (Use cromolyn sodium (nasal))	82	NEOPROFEN (Use ibuprofen lysine)	5
nabumetone	4	nateglinide	20	NEORAL CAPS (Use cyclosporine modified (for microemulsion))	77
nadolol TABS 20 MG, 40 MG, 80 MG	41	NATROBA (Use spinosad)	54	NEORAL SOLN (Use cyclosporine modified (for microemulsion))	77
NAGLAZYME	59	NATURAL FIBER LAXATIVE POWD 66		NEOSPORIN ORIGINAL OINT (Use neomycin-bacitracin-polymyxin) ...	49
NALFON CAPS (Use fenoprofen calcium)	4	NAYZILAM	12	NEOSPORIN PLUS PAIN RELIEF MS (Use neomycin-polymyxin w/ pramoxine)	49
naloxone hcl LIQD	21	NEBULIZER AIR TUBE/PLUGS MISC	72	NERLYNX	33
naloxone hcl SOCT	21	NEBULIZER MASK ADULT MISC .	72	NESINA (Use alogliptin benzoate) 19	
naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML	21	NEBULIZER MASK ADULT/TUBING MISC	72	NEUPOGEN SOLN	65
naloxone hcl SOSY 2 MG/2ML	21	NEBULIZER MASK CHILD MISC .	72	NEUPOGEN SOSY	65
naltrexone hcl	21	NEBULIZER MASK PED/TUBING MISC	72	NEURONTIN CAPS (Use gabapentin)	13
NAMENDA TABS (Use memantine hcl)	90	nefazodone hcl	17	NEURONTIN SOLN (Use gabapentin)	13
NAMENDA TITRATION PAK TABS (Use memantine hcl)	90	NEOMULTIVITE TABS	79	NEURONTIN TABS 600 MG (Use gabapentin)	13
naphazoline w/ pheniramine 0.315 %-0.027 %	85	neomycin sulfate TABS	2	NEURONTIN TABS 800 MG (Use gabapentin)	13
NAPROSYN SUSP (Use naproxen) 5		neomycin-bacitracin zn-polymyxin 85		nevirapine SUSP	39
NAPROSYN TABS 500 MG (Use naproxen)	5	neomycin-bacitracin-polymyxin OINT 49		nevirapine TABS	39
naproxen sodium TABS 220 MG ...	5	neomycin-polymy-dexameth OINT 86		nevirapine TB24 100 MG	39
naproxen sodium TABS 275 MG, 550 MG	5	neomycin-polymy-dexameth SUSP 0.1 %-3.5 MG/ML-10000 UNIT/ML, 0.1 %	86	nevirapine TB24 400 MG	39
naproxen SUSP	5	neomycin-polymyxin w/ pramoxine 49			
naproxen TABS	5				

NEXAVAR (Use sorafenib tosylate) . 33	NICOTROL NS SOLN 91	norethindrone & eth estradiol 44
NEXIUM 24HR CLEAR MINIS CPDR (Use esomeprazole magnesium) .. 93	nifedipine CAPS 42	norethindrone & ethinyl estradiol-fe 44
NEXIUM 24HR CPDR (Use esomeprazole magnesium) 93	nifedipine TB24 30 MG, 90 MG ... 42	norethindrone (contraceptive) 45
NEXIUM CPDR 20 MG (Use esomeprazole magnesium) 93	nifedipine TB24 60 MG 42	norethindrone acet & eth estra TABS 44
NEXVIAZYME 59	nilotinib hcl 50 MG, 150 MG, 200 MG 33	norethindrone acetate TABS 89
niacin (antihyperlipidemic) TABS .. 24	NINLARO 33	norethindrone acetate-ethinyl estradiol 60
niacin (antihyperlipidemic) TBCR .. 24	nitisinone CAPS 59	norethindrone acetate-ethinyl estradiol-fe 44
niacin CPCR 250 MG, 500 MG 98	NITRO-BID OINT 9	norethindrone-eth estradiol (triphasic) 44
NIACIN ER CPCR 98	NITRO-DUR PT24 (Use nitroglycerin) 9	norgestimate-ethinyl estradiol (triphasic) 44
NIACIN ER TBCR 98	nitrofurantoin 28	norgestimate-ethinyl estradiol 44
niacin TABS 500 MG 98	nitrofurantoin macrocrystal 50 MG, 100 MG 28	norgestrel & ethinyl estradiol 30 MCG-0.3 MG 44
niacin TBCR 98	nitrofurantoin monohyd macro 28	NORPACE CAPS (Use disopyramide phosphate) 10
nicardipine hcl CAPS 42	nitroglycerin CPCR 9	NORPACE CR CP12 150 MG 10
NICODERM CQ PT24 TD (Use nicotine) 91	nitroglycerin PT24 9	NORPRAMIN TABS 10 MG (Use desipramine hcl) 17
NICORETTE GUM (Use nicotine polacrilex) 91	nitroglycerin SUBL 9	NORPRAMIN TABS 25 MG (Use desipramine hcl) 17
NICORETTE LOZG (Use nicotine polacrilex) 91	NITROSTAT SUBL (Use nitroglycerin) 9	NORTHERA (Use droxidopa) 97
NICORETTE MINI LOZG (Use nicotine polacrilex) 91	NITYR TABS 59	nortriptyline hcl CAPS 17
NICORETTE STARTER KIT GUM (Use nicotine polacrilex) 91	NIVA THYROID TABS 92	nortriptyline hcl SOLN 18
NICOTINE KIT 91	NIVESTYM SOLN 65	NORVASC TABS (Use amlodipine besylate) 42
nicotine polacrilex GUM 91	NIVESTYM SOSY 65	NORVIR CAPS 39
nicotine polacrilex LOZG 91	NIX CREME RINSE LIQD EX (Use permethrin) 54	NORVIR TABS (Use ritonavir) 39
nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR 91	NIZORAL SHAM 50	NOSE CLIP MISC 72
NICOTROL INHA 91	NORDITROPIN FLEXPPO SOPN . 59	NOVA MAX PLUS KETONE TEST
	norelgestromin-ethinyl estradiol .. 44	
	norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG 44	

56	throat))	78	olanzapine TABS 2.5 MG, 5 MG	36
NOVACHOR	.....	55	olanzapine TABS 7.5 MG, 10 MG	36
NOVAREL IM	.....	58	olmesartan medoxomil	25
NOVAVAX COVID-19 VACCINE SUSP	.....	96	olmesartan medoxomil-amlodipine- hydrochlorothiazide	26
NOVAVAX COVID-19 VACCINE SUSY	.....	96	olmesartan medoxomil- hydrochlorothiazide	26
NOVOLIN 70/30 FLEXPEN RELION SUPN	.....	20	OMBRA COMPRESSOR AIR FILTERS MISC	72
NOVOLIN 70/30 FLEXPEN SUPN	20		omega-3 fatty acids CAPS 1000 MG, 1200 MG	84
NOVOLIN 70/30 RELION SUSP	..	20	omega-3 fatty acids CPDR 1200 MG	84
NOVOLIN 70/30 SUSP	.....	20	OMEPRAZOLE	44
NOVOLIN N FLEXPEN RELION SUPN	.....	20	OMEPRAZOLE 20MG TABLET	93
NOVOLIN N FLEXPEN SUPN	....	20	omeprazole CPDR	94
NOVOLIN N RELION SUSP	.....	20	omeprazole magnesium TBEC	94
NOVOLIN N SUSP	.....	20	OMNICAP TABS	79
NOVOLIN R RELION SOLN IJ	....	20	ON/GO COVID-19 ANTIGEN TEST KIT	56
NOVOLIN R SOLN IJ	.....	20	ON/GO ONE COVID-19 HOME TEST KIT	56
NOVOSEVEN RT	.....	63	ONCASPAR	34
NP THYROID TABS	.....	92	ondansetron hcl SOLN PO 4 MG/5ML	21
NUBEQA	.....	31	ondansetron hcl TABS 24 MG	21
NULIBRY	.....	59	ondansetron hcl TABS 4 MG, 8 MG	21
NULOJIX	.....	77	ondansetron TBDP 16 MG	21
NUMOISYN LIQD	.....	78	ondansetron TBDP 4 MG, 8 MG	21
NUPLAZID CAPS	.....	36	ONE DAILY ESSENTIAL TABS	79
NUPLAZID TABS 10 MG	.....	36	ONE DAILY ESSENTIALS TABS	79
NUVARING (Use etonogestrel- ethinyl estradiol)	.....	45	ONE FLOW TESTER MISC	72
NUWIQ KIT	.....	63		
NUWIQ SOLR	.....	63		
NYSTATIN (Use nystatin (mouth- throat))	.....	78		
nystatin (mouth-throat)	.....	78		
nystatin (topical) CREA	.....	50		
nystatin (topical) OINT	.....	50		
nystatin (topical) POWD EX	.....	50		
nystatin TABS	.....	22		
nystatin-triamcinolone CREA	.....	50		
nystatin-triamcinolone OINT	.....	50		
NYVEPRIA	.....	65		
OASIS ULTRA MATRIX FENESTRATED	.....	55		
OASIS WOUND MATRIX FENESTRATED	.....	55		
OBIZUR	.....	63		
OCALIVA	.....	61		
OCTAGAM SOLN	.....	88		
octreotide acetate KIT	.....	60		
octreotide acetate SOLN	.....	60		
OCUFLOX (Use ofloxacin (ophth))	85			
ODEFSEY	.....	39		
ODOMZO	.....	31		
OFF DEEP WOODS AERO	.....	54		
OFF DEEP WOODS DRY AERO	54			
ofloxacin (ophth)	.....	85		
ofloxacin (otic)	.....	87		
ofloxacin 400 MG	.....	61		
OGIVRI	.....	30		
OHC COVID-19 ANTIGEN SELF TEST KIT	.....	56		
olanzapine TABS 15 MG, 20 MG	..	36		

ONE VITE DAILY MULTIVITAMIN TABS	79	ORAL RELIEF SPRAY SOLN	78	OTEZLA TABS	5
ONE-A-DAY ESSENTIAL TABS (Use multiple vitamin)	79	ORAL SUSPEND LIQD	89	OTEZLA TBPK	5
ONE-A-DAY MENS TABS (Use multiple vitamin)	79	ORAL SYRUP SF SYRP	89	OTREXUP SOAJ 10 MG/0.4ML, 12.5 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 20 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML	3
ONETOUCH ULTRA 2 KIT	69	ORAL SYRUP SYRP	89	OTULFI SOLN IV 130 MG/26ML ..	62
ONETOUCH ULTRA BLUE TEST STRP	56	ORAPENN SD ANHYD UNSWEETEN LIQD	89	OTULFI SOSY SC 45 MG/0.5ML, 90 MG/ML	51
ONETOUCH ULTRA STRP	56	ORA-PLUS LIQD	89	OVACE PLUS WASH LIQD (Use sulfacetamide sodium)	51
ONETOUCH ULTRA TEST STRP ..	56	ORA-SWEET SF SYRP 10 %-9 %	89	OVACE WASH LIQD (Use sulfacetamide sodium)	51
ONETOUCH VERIO FLEX SYSTEM KIT	69	ORA-SWEET SYRP 4 %-5 %-54 % 89		OVIDE (Use malathion)	54
ONETOUCH VERIO REFLECT KIT 69		ORENCIA CLICKJECT SOAJ	5	OVIDREL SOSY	58
ONETOUCH VERIO STRP	56	ORENCIA SOLR	5	OXAYDO TABS 5 MG	6
ONE-WAY VALVED EXPIRATORY MISC	72	ORENCIA SOSY	5	oxazepam CAPS	10
ONE-WAY VALVED INSPIRATORY MISC	72	ORENITRAM TBCR	42	OXBRYTA TABS 500 MG	64
ONGLYZA (Use saxagliptin hcl) ..	19	ORFADIN CAPS (Use nitisinone) .	59	OXBRYTA TBSO	64
ONPATTRO	91	ORFADIN SUSP	60	oxcarbazepine SUSP	13
ONUREG TABS	29	ORKAMBI PACK	91	oxcarbazepine TABS	13
OPCON-A (Use naphazoline w/ pheniramine)	85	ORKAMBI TABS	91	OXLUMO	62
OPDIVO	30	ORLADEYO	64	oxybutynin chloride TABS	94
OPDUALAG	32	orphenadrine citrate TB12	81	oxybutynin chloride TB24	94
OPILL	45	ORTHOVISC	81	oxycodone hcl CAPS	7
ORA-BLEND SF SUSP	89	oseltamivir phosphate CAPS 30 MG . 40		oxycodone hcl CONC 100 MG/5ML	7
ORA-BLEND SUSP	89	oseltamivir phosphate CAPS 45 MG, 75 MG	40	oxycodone hcl SOLN	7
oral electrolytes SOLN	75	oseltamivir phosphate SUSR	40	oxycodone hcl T12A 10 MG, 20 MG, 40 MG, 80 MG	7
ORAL MIX SF SUSP	89	OSENI 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG (Use alogliptin-pioglitazone)	18	oxycodone hcl TABS 30 MG	7
ORAL MIX SUSP	89	OSTEOCONDUCTIVE MATRIX PLUS	55	oxycodone hcl TABS 5 MG, 10 MG, 15 MG, 20 MG	7
				oxycodone w/ acetaminophen SOLN	

7	MISC .....72	hcl) 16
oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG .....7	PARI ERAPID NEBULIZER HANDSET MISC .....72	PAXIL TABS 20 MG (Use paroxetine hcl) 16
OXYCONTIN T12A .....7	PARI EXPIRATORY FILTER SET DEVI .....72	PAXIL TABS 30 MG, 40 MG (Use paroxetine hcl) 16
oyster shell 75	PARI MASK SET MISC .....72	PAXLOVID (150/100) 40
OYSTER SHELL CALCIUM/D TABS 500 MG-200 UNIT 75	PARI SMARTMASK BABY/ELBOW MISC72	PAXLOVID (300/100) 40
OZURDEX IMPL86	PARI SOFT PLASTIC ADULT MASK MISC72	pazopanib hcl 33
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paclitaxel protein-bound particles .35	PARI VORTEX ADULT MASK72	PC PEDIATRIC POLY-VITAMIN DROP SOLN PO81
PADCEV .....30	PARI VORTEX PEDIATRIC MASK 72	PCCA SWEET-SF SYRP .....89
PALYNZIQ .....60	paricalcitol SOLN .....60	PCCA SYRUP VEHICLE SYRP ...89
PAMELOR CAPS (Use nortriptyline hcl) 18	PARLODEL CAPS (Use bromocriptine mesylate) 35	PCCA-PLUS SUSP .....89
pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML .....58	PARLODEL TABS (Use bromocriptine mesylate) 35	PEAK A-I-R FLOW METER .....72
PAMIDRONATE DISODIUM SOLN 58	PARNATE (Use tranlycypromine sulfate) 16	PEAK AIR PEAK FLOW METER . 72
PANDA MASK LARGE .....72	paroxetine hcl SUSP .....16	PEAK FLOW METER UNIVERSAL RANG .....72
PANDA MASK MEDIUM .....72	paroxetine hcl TABS 10 MG 16	PED DISPOSABLE MISC 72
PANDA MASK SMALL .....72	paroxetine hcl TABS 20 MG 16	ped multivitamins w/fl & iron SOLN 79
PANHEMATIN 350 MG .....64	paroxetine hcl TABS 30 MG, 40 MG . 16	PEDIALYTE ADVANCED CARE SOLN (Use oral electrolytes) 76
pantoprazole sodium TBEC 20 MG 94	paroxetine hcl TB24 .....16	PEDIALYTE FREEZER POPS SOLN (Use oral electrolytes) .....76
pantoprazole sodium TBEC 40 MG 94	PARSABIV 60	PEDIALYTE IMMUNE SUPPORT SOLN .....76
PANZYGA88	PARVA-CAL 200 UNIT-500 MG ...75	PEDIALYTE SINGLES SOLN (Use oral electrolytes) 76
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PARI BABY CONVERSION KIT MISC72	PAXIL SUSP (Use paroxetine hcl) .16	PEDIAPRED SOLN (Use prednisolone sodium phosphate) ..45
PARI BUBBLES PEDIATRIC MASK	PAXIL TABS 10 MG (Use paroxetine	

PEDIARIX SUSY	92	PEPCID AC MAXIMUM STRENGTH TABS (Use famotidine)	93	PFIZER-BIONTECH COVID-19 VACC SUSP	96
PEDIATRIC MOUTHPIECE MISC	73	PEPCID AC TABS (Use famotidine) . 93		PFLEX MISC	73
PEDIATRIC MULTIPLE VITAMINS W/ MINERALS-VARIOUS	80	PEPCID TABS (Use famotidine) ...	93	PHARMACIST CHOICE MASK WIPES MISC	73
pediatric multivitamins w/fl CHEW 0.25 MG, 1 MG	80	PEPTO-BISMOL CHEW (Use bismuth subsalicylate)	20	phenazopyridine hcl TABS 100 MG, 200 MG	63
pediatric multivitamins w/fl CHEW 0.5 MG	80	PEPTO-BISMOL MAX STRENGTH SUSP (Use bismuth subsalicylate) 20		phenelzine sulfate	16
pediatric multivitamins w/fl SOLN ..	80	PEPTO-BISMOL TO-GO CHEW (Use bismuth subsalicylate)	20	phenobarbital ELIX	66
PEDIATRIC PANDA MASK	73	PERCOCET TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG (Use oxycodone w/ acetaminophen)	7	phenobarbital TABS	66
pediatric vitamins acid w/ fluoride SOLN	80	PERIDEX (Use chlorhexidine gluconate (mouth-throat))	78	phenylephrine hcl (mydriatic) SOLN 2.5 %	84
PEDVAX HIB SUSP	94	PERJETA	31	phenylephrine hcl (oral) TABS	82
peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR	66	permethrin CREA	55	PHENYLEPHRINE HCL SOLN (Use phenylephrine hcl (mydriatic))	84
peg 3350-potassium chloride-sod bicarbonate-sod chloride	66	permethrin LIQD EX	55	phenylephrine-chlorphen-dm LIQD 10 MG/5ML-4 MG/5ML-15 MG/5ML 47	
PEGASYS SOLN	40	perphenazine TABS	37	phenylephrine-dm LIQD 2.5 MG/5ML-5 MG/5ML	47
PEG-PREP	66	perphenazine-amitriptyline	90	phenylephrine-dm SOLN	47
PEMAZYRE	33	PERSERIS PRSY	36	phenylephrine-shark liver oil-cocoa butter	8
PEMETREXED 500 MG/20ML	30	PERSONAL BEST FULL RANGE 73		phenylephrine-shark liver oil-mineral oil-petrolatum	8
pemetrexed disodium SOLR 100 MG, 500 MG	30	PFIZER COVID-19 BIVAL 6MO-4YR	96	phenytoin CHEW	14
PEMFEXY	30	PFIZER COVID-19 VAC BIVAL 5-11	96	phenytoin sodium extended 100 MG . 14	
PEN NEEDLE/5-BEVEL TIP	70	PFIZER COVID-19 VAC BIVALENT . 96		phenytoin sodium SOLN	14
PEN NEEDLES	70	PFIZER COVID-19 VAC-TRIS 5-11Y SUSP	96	phenytoin SUSP	14
PENBRAYA	94	PFIZER COVID-19 VAC-TRIS 6M-4Y SUSP	96	PHESGO	32
penicillamine TABS	76	PFIZER-BIONT COVID-19 VAC- TRIS SUSP	96	PHOTOFRIN	34
penicillin v potassium SOLR	88			PHOTREXA-PHOTREXA VISCOUS KIT	85
penicillin v potassium TABS	88				
PENTACEL	92				
pentoxifylline	64				

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PIFELTRO39	PLEGRIDY STARTER PACK SOAJ . 90	POMALYST32
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PILLOW MASK/ADULT MISC73	PLENITY1	pot phosphate monobasic w/ sod phosphate dibasic & monobasic ..76
PILLOW MASK/CHILD MISC .....73	PLENITY WELCOME KIT .....1	potassium bicarbonate TBEF .....76
PILLOW MASK/PEDIATRIC MISC 73	plerixafor .....65	potassium chloride CPCR 10 MEQ 76
pilocarpine hcl (oral) 5 MG .....78	PNEUMOVAX 23 SOLN .....94	potassium chloride CPCR 8 MEQ .76
pilocarpine hcl SOLN 1 %, 2 %, 4 % . 84	PNEUMOVAX 23 SOSY .....94	potassium chloride microencapsulated crystals er ....76
PILOT COVID-19 AT-HOME TEST KIT .....56	POCKET PEAK FLOW METER ..73	potassium chloride PACK PO 20 MEQ .....76
pimecrolimus .....53	POCKETPEAK PEAK FLOW METER.....73	potassium chloride SOLN PO 10 %, 20 %, 10 %76
PIN RID CHEW .....9	podofilox SOLN .....53	potassium chloride TBCR 8 MEQ, 10 MEQ .....76
pindolol TABS .....41	POLIVY .....30	potassium citrate (alkalinizer) TBCR . 62
pioglitazone hcl .....20	POLYCOSE LIQD .....84	POTELIGEO .....30
pioglitazone hcl-metformin hcl TABS . 18	POLYCOSE POWD .....84	PRADAXA CAPS (Use dabigatran etexilate mesylate) .....12
PIP BLOOD GLUCOSE TEST STRIP STRP .....57	polyethylene glycol 3350 POWD ..67	pralatrexate .....30
PIQRAY (200 MG DAILY DOSE) .33	polymyxin b-trimethoprim .....85	PRALUENT SOAJ .....24
PIQRAY (250 MG DAILY DOSE) .33	polysaccharide iron complex CAPS 65	pramipexole dihydrochloride TABS 35
PIQRAY (300 MG DAILY DOSE) .33	POLYTRIM (Use polymyxin b- trimethoprim) .....85	pramoxine-hc-chloroxylenol .....87
pirfenidone CAPS .....92	POLY-VI-FLOR CHEW 0.25 MG, 1 MG .....80	prasugrel hcl .....64
pirfenidone TABS .....92	POLY-VI-FLOR CHEW 0.5 MG ...80	pravastatin sodium .....24
piroxicam CAPS .....5	polyvinyl alcohol 1.4 %84	prazosin hcl CAPS .....25
PLAN B ONE-STEP (Use levonorgestrel (emergency oc)) ...45	POLY-VI-SOL SOLN PO .....81	PRECISION XTRA KETONE .....57
PLAQUENIL (Use hydroxychloroquine sulfate) .....28	POLY-VITA SOLN PO .....81	PRED FORTE (Use prednisolone acetate (ophth)) .....86
PLAVIX 75 MG (Use clopidogrel bisulfate) .....64	POLY-VITA/IRON SOLN .....81	
PLEGRIDY SOAJ .....91	POLY-VITE PEDIATRIC SOLN PO 81	

PRED MILD	86	GEL (Use sodium fluoride (dental))	78	desvenlafaxine succinate)	17
prednisolone acetate (ophth)	86			PRIVIGEN SOLN	88
PREDNISOLONE ACETATE P-F	86	PREVIDENT 5000 KIDS PSTE DT		PROAIR RESPICLICK AEPB	11
		(Use sodium fluoride (dental))	78	probenecid	63
PREDNISOLONE SODIUM		PREVIDENT 5000 ORTHO		PROCARDIA XL TB24 30 MG, 90	
PHOSPHATE	86	DEFENSE PSTE DT (Use sodium		MG (Use nifedipine)	42
prednisolone sodium phosphate		fluoride (dental))	78	PROCARDIA XL TB24 60 MG (Use	
SOLN 20 MG/5ML	45	PREVIDENT 5000 PLUS CREA (Use		nifedipine)	42
prednisolone sodium phosphate		sodium fluoride (dental))	78	prochlorperazine	37
SOLN 5 MG/5ML, 15 MG/5ML	45	PREVIDENT GEL (Use sodium		prochlorperazine maleate TABS ...	37
prednisolone SOLN	45	fluoride (dental))	78	PROCYSBI CPDR	62
prednisolone TABS	45	PREVNAR 13	94	PROCYSBI PACK	62
PREDNISONE INTENSOL CONC	45	PREVNAR 20	94	PROFILNINE	63
prednisone SOLN	45	PREVYMIS SOLN	40	progesterone CAPS 100 MG	90
prednisone TABS	46	PREVYMIS TABS	40	progesterone CAPS 200 MG	89
prednisone TBPK	46	PREZCOBIX	39	PROGRAF CAPS (Use tacrolimus)	
PREGNYL IM	58	PREZISTA SUSP	39	77	
PREHEVBRIO	96	PREZISTA TABS 150 MG	39	PROGRAF PACK	77
PREMARIN	97	PREZISTA TABS 600 MG (Use		PROLASTIN-C SOLN	91
PREMARIN TABS	61	darunavir)	39	PROLASTIN-C SOLR	91
PREMPHASE	60	PREZISTA TABS 75 MG	39	PROLEUKIN	34
PREMPRO	60	PREZISTA TABS 800 MG (Use		PROLIA SOSY	58
PRENATAL VITAMINS-MISC	81	darunavir)	39	promethazine & phenylephrine SYRP	
PREPARATION H EX 1 %	8	PRIALT	6	.....	47
PREPARATION H SOOTHING		PRILOSEC OTC TBEC (Use		PROMETHAZINE HCL POWD	44
RELIEF EX 1 %	8	omeprazole magnesium)	94	promethazine hcl SOLN PO 6.25	
PREVACID 24HR CPDR (Use		PRIMAQUINE PHOSPHATE TABS		MG/5ML, 12.5 MG/10ML	23
lansoprazole)	94	(Use primaquine phosphate)	28	promethazine hcl SUPP	23
PREVACID CPDR 30 MG (Use		primaquine phosphate TABS	28	promethazine hcl TABS	23
lansoprazole)	94	primidone	13	promethazine w/codeine SOLN ...	47
PREVIDENT 5000 BOOSTER PLUS		PRIORIX SUSR	96	promethazine w/codeine SYRP ...	47
PSTE DT (Use sodium fluoride		PRISTIQ 100 MG (Use		promethazine-dm SYRP	47
(dental))	78	desvenlafaxine succinate)	17		
PREVIDENT 5000 DRY MOUTH		PRISTIQ 25 MG, 50 MG (Use			

promethazine-phenylephrine-codeine.....47	pseudoephedrine w/ dm-gg LIQD 100 MG/5ML-30 MG/5ML-10 MG/5ML .47	%-2.4 %-0.3 %-1.2 %55
PROMETRIUM CAPS 100 MG (Use progesterone) .....90	pseudoephedrine-guaifenesin SYRP 100 MG/5ML-30 MG/5ML .....48	pyrethrins-piperonyl butoxide SHAM 4 %-0.33 %55
PROMETRIUM CAPS 200 MG (Use progesterone) .....90	pseudoephedrine-guaifenesin TB12 600 MG-60 MG .....48	pyrethrins-piperonyl butoxide- permethrin-nit remover 4 %-0.33 %- 0.5 %55
PRONEB ULTRA FILTER SET MISC.....73	pseudoephedrine-ibuprofen TABS 48	PYRIDIDIUM TABS (Use phenazopyridine hcl) .....63
propafenone hcl TABS .....10	psyllium CAPS 0.52 GM .....66	pyridostigmine bromide TABS 60 MG.....28
propranolol hcl CP24 .....41	psyllium POWD 28.3 %, 30 %, 33 %, 48.57 %, 58.6 %, 100 %66	pyridostigmine bromide TBCR .....28
propranolol hcl SOLN PO 20 MG/5ML, 40 MG/5ML .....41	psyllium POWD 43 %66	pyridoxine hcl TABS 25 MG, 50 MG, 100 MG .....98
propranolol hcl TABS .....41	PTS PANELS EGLU TEST STRP .57	pyrimethamine .....28
propylthiouracil .....92	PULMICORT SUSP (Use budesonide (inhalation)) .....11	PYRUKYND TABS .....64
PROQUAD SUSR .....96	PULMOZYME .....91	PYRUKYND TAPER PACK TBPK .64
PROSCAR (Use finasteride) .....62	PURAPLY .....55	PYZCHIVA 130 MG/26ML .....62
PROTEXT SUSP .....55	PURE COMFORT FLOW METER ADULT .....73	PYZCHIVA 45 MG/0.5ML, 90 MG/ML.....51
PROTONIX TBEC 20 MG (Use pantoprazole sodium) .....94	PURE COMFORT FLOW METER CHILD .....73	QC CALCIUM 500MG-D3 TABS .. 75
PROTONIX TBEC 40 MG (Use pantoprazole sodium) .....94	PURE COMFORT PEAK FLOW MISC .....73	QC TRIACTING DAYTIME CHILDRENS SYRP .....48
PROVENTIL HFA AERS (Use albuterol sulfate) .....11	PURE COMFORT SAFETY PEN NEEDLE .....70	QINLOCK .....33
PROVERA 5 MG, 10 MG (Use medroxyprogesterone acetate) ....90	PURIXAN SUSP 2000 MG/100ML (Use mercaptopurine) .....30	QUADRACEL SUSP .....92
PROZAC CAPS 10 MG, 20 MG (Use fluoxetine hcl) .....17	PX DAYTIME MULTI-SYMPTOM CAPS .....48	QUADRACEL SUSY .....92
PROZAC CAPS 40 MG (Use fluoxetine hcl) .....17	PX GLUCOSE .....19	QUARTETTE (Use levonorgestrel- ethinyl estradiol (91-day)) .....44
pseudoephed-bromphen-dm SYRP 10 MG/5ML-30 MG/5ML-2 MG/5ML 47	PX NITETIME MULTI-SYMPTOM CAPS .....48	QUESTRAN LIGHT POWD (Use cholestyramine light) .....23
pseudoephedrine hcl TABS .....82	pyrantel pamoate SUSP .....9	QUESTRAN PACK (Use cholestyramine) .....23
pseudoephedrine hcl TB12 .....82	pyrazinamide .....29	QUESTRAN POWD (Use cholestyramine) .....24
	pyrethrins-piperonyl butoxide LIQD 3	quetiapine fumarate TABS 100 MG,

200 MG	36	SUSP	83	RELEUKO SOSY	65
quetiapine fumarate TABS 25 MG, 50 MG	36	RADICAVA ORS SUSP	83	RELEXXII TBCR 18 MG, 27 MG, 54 MG	2
quetiapine fumarate TABS 300 MG, 400 MG	36	RADICAVA SOLN (Use edaravone) 83		RELEXXII TBCR 36 MG	2
QUFLORA PEDIATRIC CHEW 0.25 MG, 1 MG	80	raloxifene hcl	59	RELION GLUCOSE	19
QUFLORA PEDIATRIC CHEW 0.5 MG	80	ramipril CAPS	25	RELION GLUCOSE TEST STRIPS STRP	57
QUFLORA PEDIATRIC SOLN	80	RAPAMUNE SOLN (Use sirolimus) 77		RELION KETONE TEST STRP ...	57
QUICK TOUCH BLOOD GLUCOSE KIT	69	RAPAMUNE TABS (Use sirolimus) 77		RELPAKX (Use eletriptan hydrobromide)	74
QUICK TOUCH BLOOD GLUCOSE TEST STRP	57	RASUVO SOAJ 7.5 MG/0.15ML, 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML	3	REMERON SOLTAB TBDP 15 MG (Use mirtazapine)	15
QUICK TOUCH INSULIN PEN NEEDLE	70	REBIF REBIDOSE SOAJ	91	REMERON SOLTAB TBDP 30 MG (Use mirtazapine)	15
QUICKVUE AT-HOME COVID-19 TEST KIT	57	REBIF REBIDOSE TITRATION PACK SOAJ	91	REMERON SOLTAB TBDP 45 MG (Use mirtazapine)	15
quinapril hcl	25	REBIF SOSY	91	REMERON TABS 15 MG (Use mirtazapine)	15
quinapril-hydrochlorothiazide 12.5 MG-10 MG	26	REBIF TITRATION PACK SOSY ..	91	REMERON TABS 30 MG (Use mirtazapine)	15
quinapril-hydrochlorothiazide 12.5 MG-20 MG	26	REBINYN	63	RENTHYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	92
quinapril-hydrochlorothiazide 25 MG-20 MG	26	RECLAST SOLN (Use zoledronic acid)	58	REPATHA PUSHTRONEX SYSTEM SOCT	24
quinidine gluconate TBCR	10	RECOMBINATE SOLR	63	REPATHA SOSY	24
quinidine sulfate TABS	10	RECOMBIVAX HB SUSP	96	REPATHA SURECLICK SOAJ	24
QUINTABS TABS	79	RECOMBIVAX HB SUSY	96	REPEL SPORTSMEN MAX LOTN 54	
QVAR REDIHALER 40 MCG/ACT .11		RECORLEV	58	REPLACEMENT AIR FILTER MISC .	73
QVAR REDIHALER 80 MCG/ACT .11		REDITREX SOSY	3	REPLACEMENT FILTERS MISC ..	73
RA DRY MOUTH SOLN	78	REGLAN TABS (Use metoclopramide hcl)	61	RESTORIL 15 MG, 30 MG (Use temazepam)	66
RA GLUCOSE	19	RELCARE TABS	79	RETACRIT	65
RABAVERT	96	RELENZA DISKHALER	40	RETEVMO CAPS	33
RADICAVA ORS STARTER KIT		RELEUKO SOLN	65		

RETHYMIC	76	RIABNI	30	methylphenidate hcl)	2
RETIN-A CREA (Use tretinoin)	49	RIASTAP	63	ritonavir TABS	39
RETIN-A GEL 0.01 % (Use tretinoin)	49	ribavirin (hepatitis c) CAPS	40	RITUXAN	30
RETIN-A GEL 0.025 % (Use tretinoin)	49	ribavirin (hepatitis c) TABS 200 MG	40	RITUXAN HYCELA	32
RETISERT	86	riboflavin TABS	98	rivastigmine 4.6 MG/24HR, 9.5	
RETROVIR CAPS (Use zidovudine) .	39	rifabutin	29	MG/24HR	90
RETROVIR SYRP (Use zidovudine) .	39	rifampin CAPS	29	rivastigmine tartrate CAPS	90
REUSABLE COMFORTSEAL MASK-LRG MISC	73	RIGHTEST GT333 BLOOD		RIXUBIS SOLR	63
REUSABLE COMFORTSEAL MASK-MED MISC	73	GLUCOSE STRP	57	rizatriptan benzoate TABS	74
REUSABLE COMFORTSEAL MASK-SML MISC	73	RIGHTEST GT333 GLUCOSE TEST		rizatriptan benzoate TBDP	74
REVATIO SOLN (Use sildenafil citrate (pulmonary hypertension)) .	43	STRP	57	ROBINUL TABS (Use glycopyrrolate)	
REVATIO SUSR (Use sildenafil citrate (pulmonary hypertension)) .	43	RILUTEK TABS (Use riluzole)	83	.....	93
REVATIO TABS (Use sildenafil citrate (pulmonary hypertension)) .	43	riluzole TABS	83	ROBINUL-FORTE TABS (Use glycopyrrolate)	
REVCОВI	60	RINVOQ TB24 30 MG, 45 MG	2	.....	93
REVLIMID	77	risedronate sodium TABS 35 MG .	58	ROCALTROL CAPS (Use calcitriol)	
REYATAZ CAPS 200 MG (Use atazanavir sulfate)	39	risedronate sodium TABS 5 MG, 30		60	
REYATAZ CAPS 300 MG (Use atazanavir sulfate)	39	MG	58	roflumilast	10
REYATAZ PACK	39	risedronate sodium TBEC	58	ROMIDEPSIN SOLN	33
REZUROCK	77	RISPERDAL CONSTA (Use risperidone microspheres)	36	romidepsin SOLR	33
RHOGAM ULTRA-FILTERED PLUS SOSY IM	88	RISPERDAL SOLN (Use risperidone)	36	ropinirole hydrochloride TABS 0.25	
RHOPHYLAC SOSY IJ	88	.....	36	MG, 3 MG, 4 MG	35
		RISPERDAL TABS 0.5 MG, 1 MG, 2		ropinirole hydrochloride TABS 0.5	
		MG, 3 MG, 4 MG (Use risperidone)	36	MG, 1 MG, 2 MG, 5 MG	35
		36		rosuvastatin calcium TABS	24
		risperidone microspheres	36	ROTARIX SUSP	96
		risperidone SOLN	36	ROTARIX SUSR	96
		risperidone TABS	36	ROTATEQ SOLN	96
		risperidone TBDP	36	ROUGH PIGWEED	2
		RITALIN TABS 10 MG, 20 MG (Use methylphenidate hcl)	2	ROXICODONE TABS 15 MG (Use oxycodone hcl)	7
		RITALIN TABS 5 MG (Use		ROXICODONE TABS 30 MG (Use oxycodone hcl)	7
				ROZLYTREK CAPS	33

RUBRACA	33	SAVELLA TABS	90	SELZENTRY SOLN	39
RUCONEST	64	SAVELLA TITRATION PACK MISC		SELZENTRY TABS 150 MG (Use	
rufinamide SUSP	13	90		maraviroc)	39
rufinamide TABS	13	SAWYER INSECT REPELLENT		SELZENTRY TABS 25 MG, 75 MG	
RUKOBIA	39	LOTN	54	39	
RUXIENCE	30	saxagliptin hcl	19	SELZENTRY TABS 300 MG (Use	
RYDAPT	33	saxagliptin-metformin hcl	18	maraviroc)	39
RYLAZE	34	SCEMBLIX 100 MG	33	SEMGLEE (YFGN) SOLN	20
RYPLAZIM	64	SCEMBLIX 20 MG, 40 MG	33	SEMGLEE (YFGN) SOPN	20
SABRIL PACK (Use vigabatrin) ...	14	SCHOOLTIME SHAMPOO SHAM	55	sennosides TABS 8.6 MG	67
SABRIL TABS (Use vigabatrin)	14	SCOT-TUSSIN DM LIQD	48	sennosides-docusate sodium TABS	
SALAGEN 5 MG (Use pilocarpine hcl		SCOT-TUSSIN SENIOR LIQD	48	66	
(oral))	78	SEASONIQUE (Use levonorgestrel-		SENOKOT S TABS (Use	
salicylic acid GEL 6 %	53	ethinyl estradiol (91-day))	44	sennosides-docusate sodium)	67
SALINE NASAL SPRAY 0.65% ..	82	SELARSDI SOLN IV 130 MG/26ML		SENOKOT TABS (Use sennosides)	
salsalate	6	62		67	
SAMI THE SEAL FILTERS MISC .	73	SELARSDI SOSY SC 45 MG/0.5ML,		SENSIPAR (Use cinacalcet hcl) ..	60
SAMSCA TABS (Use tolvaptan) ...	60	90 MG/ML	51	SEREVENT DISKUS	11
SANDIMMUNE CAPS (Use		selegiline hcl CAPS	35	SEROQUEL TABS 100 MG, 200 MG	
cyclosporine)	77	selegiline hcl TABS	35	(Use quetiapine fumarate)	37
SANDIMMUNE SOLN IV 50 MG/ML .		selenium sulfide LOTN 1 %	51	SEROQUEL TABS 25 MG, 50 MG	
77		selenium sulfide LOTN 2.5 %	51	(Use quetiapine fumarate)	37
SANDOSTATIN LAR DEPOT KIT		selenium sulfide SHAM 1 %	51	SEROQUEL TABS 300 MG, 400 MG	
(Use octreotide acetate)	60	SELSUN BLUE CARE MENS MAX		(Use quetiapine fumarate)	36
SANDOSTATIN SOLN 50 MCG/ML,		STR LOTN (Use selenium sulfide)	51	SEROSTIM SC 4 MG, 5 MG, 6 MG	
100 MCG/ML, 500 MCG/ML (Use		SELSUN BLUE DAILY LOTN (Use		59	
octreotide acetate)	60	selenium sulfide)	51	sertraline hcl CONC	17
SAPHNELO	77	SELSUN BLUE LOTN (Use selenium		sertraline hcl TABS 100 MG	17
sapropterin dihydrochloride PACK	.60	sulfide)	51	sertraline hcl TABS 25 MG, 50 MG	
sapropterin dihydrochloride TABS	.60	SELSUN BLUE MEDICATED LOTN		17	
SARNA LOTN (Use camphor &		(Use selenium sulfide)	51	SEVENFACT	64
menthol)	50	SELSUN BLUE MOISTURIZING		SFROWASA ENEM	62
		LOTN (Use selenium sulfide)	51	SHEEP SORREL-YELLOW DOCK IJ	
				.....	2

SHINGRIX	96	SIMPLYTHICK EASY MIX	88	sodium fluoride (dental) GEL	78
SIDESTREAM ADULT FACE MASK MISC	73	simvastatin TABS 5 MG, 10 MG, 20 MG, 40 MG	24	sodium fluoride (dental) PSTE DT	78
SIDESTREAM PEDIATRIC FACE MASK MISC	73	SINEMET TABS 100 MG-10 MG, 100 MG-25 MG (Use carbidopa-levodopa)	35	sodium fluoride CHEW	76
SIDESTREAM PLS ADULT FACE MASK MISC	73	SINGULAIR CHEW (Use montelukast sodium)	10	sodium fluoride SOLN	76
SIGNIFOR	60	SINGULAIR PACK (Use montelukast sodium)	10	sodium phenylbutyrate POWD	60
SIGNIFOR LAR	60	SINGULAIR TABS (Use montelukast sodium)	10	sodium phenylbutyrate TABS	60
SIKLOS TABS	64	sirolimus SOLN	77	sodium phosphates ENEM	67
sildenafil citrate (pulmonary hypertension) SOLN	43	sirolimus TABS	77	sodium polystyrene sulfonate POWD	77
sildenafil citrate (pulmonary hypertension) SUSR	43	SITAGLIPT BASE-METFORM HCL ER TB24	18	sodium polystyrene sulfonate SUSP CO 15 GM/60ML	77
sildenafil citrate (pulmonary hypertension) TABS	43	SITAGLIPTIN	19	sodium sulfate-potassium sulfate-magnesium sulfate	67
SILICONE MASK/ADULT MISC	73	SITAGLIPTIN BASE-METFORMIN HCL TABS	18	SOFOSBUVIR-VELPATASVIR TABS	40
SILICONE MASK/INFANT MISC	73	SIVEXTRO TABS	28	SOLESTA	76
SILICONE MASK/PEDIATRIC MISC	73	SKYRIZI PEN SOAJ	51	SOLQUA	18
SILVADENE (Use silver sulfadiazine)	51	SKYRIZI SOSY	51	SOLUVITA ACD WITH FLUORIDE SOLN	80
silver sulfadiazine	51	SLO-NIACIN TBCR (Use niacin)	98	SOLUVITA SOLN	76
simethicone CHEW 80 MG	61	SM IPECAC SYRUP	21	SOLUVITA WITH FLUORIDE SOLN	80
simethicone LIQD PO	61	SOAANZ TABS 20 MG	57	SOMAVERT	59
simethicone SUSP	61	sodium bicarbonate (antacid) TABS 325 MG, 650 MG	8	SOOTHENEB NBL 100 ADULT MASK MISC	73
SIMLANDI (1 PEN) AJKT	3	sodium chloride (gu irrigant) 0.9 %	62	SOOTHENEB NBL 100 CHILD MASK MISC	73
SIMLANDI (2 PEN) AJKT	3	sodium chloride (inhalant) AERS	48	SOOTHENEB NBL 100 MED CUP MISC	73
SIMLANDI (2 SYRINGE) PSKT 40 MG/0.4ML	3	sodium chloride (inhalant) NEBU 0.9 %, 3 %, 10 %	48	SOOTHENEB NBL 100 MESH CAP MISC	73
SIMPLERA SENSOR	69	sodium citrate & citric acid	62	sorafenib tosylate	33
SIMPLERA SYNC SENSOR	69	sodium fluoride (dental) CREA	78	SORBITOL PO 70 %	67
SIMPLERA SYSTEM	69				

SORREL/DOCK MIX IJ	2	STELARA SOSY	51	SUDAFED SINUS CONGESTION TABS (Use pseudoephedrine hcl) .	82
SOSWEET SYRP	89	STEQEYMA	51	SUDAFED TABS (Use pseudoephedrine hcl)	83
sotalol hcl (afib/af)	41	STEQEYMA	62	sulfacetamide sodium (acne)	49
sotalol hcl TABS 240 MG	41	STERILE DILUENT FLOLAN PH 12 .	89	sulfacetamide sodium (ophth) OINT	85
sotalol hcl TABS 80 MG, 120 MG, 160 MG	41	STERILE DILUENT FOR REMODULIN (Use glycine diluent)	89	sulfacetamide sodium (ophth) SOLN .	85
SOVALDI TABS	40	STIVARGA	33	sulfacetamide sodium LIQD	51
SOVUNA 200 MG	28	STOP LICE MAXIMUM STRENGTH LIQD 4 %-0.33 %	55	sulfacetamide sodium w/ sulfur LOTN 10 %-5 %	49
SPACER/AEROSOL-HOLDING CHAMBER SUPPLIES	73	STRATTERA (Use atomoxetine hcl)	1	sulfacetamide sodium w/ sulfur SUSP 10 %-5 %	49
SPACER/AEROSOL-HOLDING CHAMBERS	73	STRENSIQ	60	sulfacetamide sod-prednisolone SOLN	86
SPACERS AND BREATHING CHAMBERS-MISC	73	STRESS FORMULA/ZINC/ENERGY TABS	79	sulfamethoxazole-trimethoprim SUSP	27
SPEEDY SWAB COVID-19 ANTIGEN KIT	57	STRIBILD	39	sulfamethoxazole-trimethoprim TABS	27
SPIKEVAX SUSP	96	STRIVE DUAL ZONE PEAK FLOW MTR	74	sulfasalazine TABS	62
SPIKEVAX SUSY	96	SUBLOCADE SOSY	8	sulfasalazine TBEC	62
spinosad	55	SUBOXONE FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG (Use buprenorphine hcl-naloxone hcl dihydrate)	8	sulindac TABS	5
SPINRAZA	83	SUBOXONE FILM SL 3 MG-12 MG (Use buprenorphine hcl-naloxone hcl dihydrate)	8	sumatriptan	74
SPIRIVA HANDIHALER CAPS (Use tiotropium bromide monohydrate) .	10	sucralfate SUSP	93	sumatriptan succinate SOAJ 6 MG/0.5ML	74
spironolactone & hydrochlorothiazide	57	sucralfate TABS	93	sumatriptan succinate SOCT 6 MG/0.5ML	74
spironolactone TABS	57	SUDAFED CHILDRENS LIQD	82	sumatriptan succinate SOLN 6 MG/0.5ML	74
SPORANOX CAPS (Use itraconazole)	22	SUDAFED PE CHILDRENS SOLN	82	sumatriptan succinate TABS	75
SPRAVATO (56 MG DOSE)	16	SUDAFED PE SINUS CONGESTION TABS (Use phenylephrine hcl (oral))	82	sunitinib malate	33
SPRAVATO (84 MG DOSE)	16			SUPARTZ FX SOSY	81
SPRYCEL (Use dasatinib)	33			SUPER BI-MIX SOLR	42
STAMARIL SUSR	96				
stavudine CAPS	39				
STELARA 130 MG/26ML	62				

SUPER TRI-MIX SOLR	42	SYNTHROID TABS (Use levothyroxine sodium)	92	oseltamivir phosphate)	40
SUPPRELIN LA	59	SYNVISC ONE SOSY	82	TAMIFLU SUSR (Use oseltamivir phosphate)	40
SUPRAX CAPS (Use cefixime) ...	44	SYNVISC SOSY	82	tamoxifen citrate TABS	31
SUPREP BOWEL PREP KIT (Use sodium sulfate-potassium sulfate- magnesium sulfate)	67	SYPRINE (Use trientine hcl)	76	tamsulosin hcl	62
SURE COMFORT PEN NEEDLES 70		SYRPALTA SYRP	89	TARCEVA (Use erlotinib hcl)	31
SUSPENDIT ANHYDROUS SUSP 89		SYRSPEND SF LIQD	89	TARGRETIN (Use bexarotene (topical))	50
SUSPENDRX W/BITTERBLOC		SYRUP VEHICLE SF SYRP	89	TARGRETIN (Use bexarotene) ...	34
SWEET SUSP	89	SYRUP VEHICLE SYRP	89	TARPEYO CPDR	46
SUSPENDRX W/BITTERBLOC		TAB-A-VITE/IRON/BETA		TASIGNA 50 MG, 150 MG, 200 MG (Use nilotinib hcl)	33
UNSWEET SUSP	89	CAROTENE TABS	79	TAVNEOS	64
SUSPENSION VEHICLE SUSP ...	89	TABLOID	30	tazarotene CREA	51
SUSVIMO (IMPLANT 1ST FILL) SOLN	85	TABRECTA	33	tazarotene GEL	51
SUSVIMO (IMPLANT REFILL) SOLN	85	tacrolimus (topical) OINT 0.03 % ..	53	TAZORAC CREA (Use tazarotene) 51	
SUSVIMO OCULAR IMPLANT ...	69	tacrolimus (topical) OINT 0.1 % ...	53	TAZORAC GEL (Use tazarotene) .	51
SUTENT (Use sunitinib malate) ...	33	tacrolimus CAPS	77	TAZVERIK	33
SYLVANT	77	tadalafil (pulmonary hypertension) TABS	43	TDVAX SUSP	92
SYMBICORT (Use budesonide- formoterol fumarate dihydrate)	12	TAFINLAR CAPS	33	TECARTUS	31
SYMDEKO	91	TAGAMET HB 200 TABS (Use cimetidine)	93	TECENTRIQ	30
SYMFI (Use efavirenz-lamivudine- tenofovir disoproxil fumarate)	39	TAGAMET HB TABS (Use cimetidine)	93	TECFIDERA CDPK (Use dimethyl fumarate)	91
SYMFI LO (Use efavirenz- lamivudine-tenofovir disoproxil fumarate)	39	TAGRISSO	31	TECFIDERA CPDR (Use dimethyl fumarate)	91
SYNAGIS SOLN	88	TAKHZYRO SOLN	64	TECHLITE PLUS PEN NEEDLES	70
SYNAREL	59	TAKHZYRO SOSY	64	TEGLUTIK SUSP	83
SYNOJOYNT SOSY	81	TALTZ SOAJ	51	TEGRETOL SUSP (Use carbamazepine)	14
SYNRIBO	34	TALTZ SOSY	51	TEGRETOL TABS (Use carbamazepine)	14
		TALZENNA	33	TEGRETOL-XR TB12 (Use	
		TAMIFLU CAPS 30 MG (Use oseltamivir phosphate)	40		
		TAMIFLU CAPS 45 MG, 75 MG (Use			

carbamazepine) .....14	MG/ML .....8	THYMOGLOBULIN .....77
TEGSEDI .....91	testosterone cypionate SOLN IM 200 MG/ML .....8	THYROGEN 0.9 MG .....55
telmisartan .....25	testosterone enanthate SOLN IM ...8	THYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG .....92
telmisartan-amlodipine .....26	TETANUS-DIPHTHERIA TOXOIDS TD SUSP .....92	tiagabine hcl .....14
telmisartan-hydrochlorothiazide ...26	tetrabenazine .....90	TIAZAC 120 MG, 180 MG, 300 MG, 360 MG, 420 MG (Use diltiazem hcl extended release beads) .....42
temazepam 15 MG, 30 MG .....66	tetracaine hcl (ophth) .....85	TIAZAC 240 MG (Use diltiazem hcl extended release beads) .....42
TEMODAR SOLR .....29	tetracycline hcl CAPS 500 MG ....92	TIBSOVO .....33
temozolomide CAPS .....29	tetrahydrozoline hcl (ophth) 0.05 % 85	ticagrelor 60 MG, 90 MG .....64
TEMPO WELCOME KIT .....69	TEZSPIRE SOSY .....10	TICOVAC .....96
temsirolimus .....33	TGT GLUCOSE .....19	TIGLUTIK SUSP .....83
TENIVAC INJ .....92	THALOMID .....77	TIKOSYN (Use dofetilide) .....10
tenofovir disoproxil fumarate TABS 39	THEO-24 CP24 .....12	timolol maleate (ophth) SOLN .....84
TENORETIC 100 (Use atenolol & chlorthalidone) .....26	theophylline ELIX .....12	timolol maleate TABS .....41
TENORETIC 50 (Use atenolol & chlorthalidone) .....26	theophylline SOLN .....12	TIMOPTIC OCUDOSE SOLN (Use timolol maleate (ophth)) .....84
TENORMIN TABS (Use atenolol) .41	theophylline TB12 .....12	TIMOPTIC SOLN (Use timolol maleate (ophth)) .....84
TEPADINA (Use thiotepa) .....29	theophylline TB24 .....12	TINACTIN CREA (Use tolnaftate) .50
TEPEZZA .....59	THERA TABS .....79	tioconazole vaginal 6.5 %97
terazosin hcl .....25	THEREMS TABS .....79	tiopronin TABS .....63
terbinafine hcl (topical) CREA .....50	thiamine hcl TABS .....98	tiopronin TBEC .....63
terbinafine hcl TABS .....22	thiamine mononitrate TABS 100 MG . 98	tiotropium bromide monohydrate CAPS .....10
terbutaline sulfate TABS .....12	THIOLA EC TBEC (Use tiopronin) .63	TIVDAK .....30
terconazole vaginal CREA .....97	THIOLA TABS (Use tiopronin) ....63	TIVICAY TABS 50 MG .....39
terconazole vaginal SUPP .....97	thioridazine hcl .....37	tizanidine hcl TABS .....81
teriflunomide .....91	thiotepa .....29	TM-DAILY VITE TABS .....79
teriparatide SOPN .....58	thiothixene .....37	TOBI NEBU (Use tobramycin) .....2
TERIPARATIDE SOPN .....58	THRESHOLD IMT MISC .....74	
TESTOPEL PLLT .....8	THROMBATE III .....64	
testosterone cypionate SOLN IM 100		

TOBI PODHALER CAPS	2	TOPICORT OINT 0.25 % (Use desoximetasone)	53	trazodone hcl TABS 50 MG, 100 MG, 150 MG	17
TOBRADEX OINT	86	topiramate CPSP 15 MG	14	TREANDA SOLR (Use bendamustine hcl)	29
TOBRADEX SUSP (Use tobramycin- dexamethasone)	86	topiramate CPSP 25 MG	14	TRECATOR	29
tobramycin (ophth) SOLN	85	topiramate TABS 100 MG	14	TREMFYA ONE-PRESS SOAJ 100 MG/ML	51
tobramycin NEBU	2	topiramate TABS 200 MG	14	TREMFYA PEN SOAJ 100 MG/ML 51	
tobramycin sulfate SOLN IJ 1.2 GM/30ML, 2 GM/50ML, 10 MG/ML, 80 MG/2ML	2	topiramate TABS 25 MG, 50 MG ..	14	TREMFYA SOSY 100 MG/ML	51
tobramycin sulfate SOLR	2	TOPOTECAN HCL SOLN (Use topotecan hcl)	35	tretinoin (chemotherapy)	34
tobramycin-dexamethasone SUSP 86		topotecan hcl SOLN	35	tretinoin CREA 0.025 %, 0.05 %, 0.1 %	49
TOBREX OINT	85	TOPOTECAN HCL SOLN	35	tretinoin GEL 0.01 %	49
tolnaftate CREA	50	topotecan hcl SOLR	35	tretinoin GEL 0.025 %	49
tolterodine tartrate CP24	94	TOPROL XL TB24 200 MG (Use metoprolol succinate)	41	TRETEN	64
tolterodine tartrate TABS	94	TOPROL XL TB24 25 MG, 50 MG, 100 MG (Use metoprolol succinate) 41		TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	30
tolvaptan TABS	60	toremifene citrate	31	triamcinolone acetonide (mouth) ..	78
tolvaptan TBPK 15 MG	60	TORISEL (Use temsirolimus)	33	triamcinolone acetonide (nasal) AERO	82
TOPAMAX SPRINKLE CPSP 15 MG (Use topiramate)	14	torsemide TABS	57	triamcinolone acetonide (topical) CREA	53
TOPAMAX SPRINKLE CPSP 25 MG (Use topiramate)	14	TRACLEER TABS (Use bosentan) 43		triamcinolone acetonide (topical) LOTN	53
TOPAMAX TABS 100 MG (Use topiramate)	14	TRACLEER TBSO	43	triamcinolone acetonide (topical) OINT 0.025 %	53
TOPAMAX TABS 200 MG (Use topiramate)	14	tramadol hcl TABS 50 MG	7	triamcinolone acetonide (topical) OINT 0.1 %, 0.5 %	53
TOPAMAX TABS 25 MG, 50 MG (Use topiramate)	14	tramadol-acetaminophen	7	TRIAMINIC COLD/COUGH DAY TIME SYRP	48
TOPICORT CREA 0.05 % (Use desoximetasone)	53	trandolapril 1 MG, 2 MG	25	TRIAMINIC LONG ACTING COUGH LIQD (Use dextromethorphan hbr) 46	
TOPICORT CREA 0.25 % (Use desoximetasone)	52	trandolapril 4 MG	25	triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG	57
TOPICORT GEL (Use desoximetasone)	53	trandolapril-verapamil hcl	26		
		tranexamic acid TABS	65		
		tranylcypromine sulfate	16		
		TRAZIMERA	31		
		trazodone hcl TABS 300 MG	17		

triamterene & hydrochlorothiazide TABS .....57	trosipium chloride TABS .....94	TYBOST .....39
triazolam .....66	TRUE COMFORT PEN NEEDLES 70	TYKERB (Use lapatinib ditosylate) 33
TRIBENZOR (Use olmesartan medoxomil-amlodipine- hydrochlorothiazide) .....27	TRUE COMFORT PRO PEN NEEDLES .....70	TYLENOL CHILDRENS CHEWABLES CHEW (Use acetaminophen) .....5
TRIDESILON CREA 0.05 % (Use desonide) .....53	TRUE COMFORT SAFETY PEN NEEDLE .....70	TYLENOL CHILDRENS PAIN + FEVER SUSP (Use acetaminophen) . 5
trientine hcl 250 MG .....76	TRUE METRIX BLOOD GLUCOSE TEST STRP .....57	TYLENOL CHILDRENS SUSP (Use acetaminophen) .....5
trientine hcl 500 MG .....76	TRUE MULTIVITAMIN TABS .....79	TYLENOL EXTRA STRENGTH TABS (Use acetaminophen) .....5
TRIESENCE .....86	TRUELYTE SOLN .....76	TYLENOL FOR CHILDREN + ADULTS SUSP (Use acetaminophen) .....5
trifluoperazine hcl TABS .....37	TRUEPLUS GLUCOSE CHEW ....19	TYLENOL INFANTS PAIN+FEVER SUSP (Use acetaminophen) .....5
trifluridine .....85	TRUEPLUS GLUCOSE ON THE GO CHEW .....19	TYLENOL TABS (Use acetaminophen) .....6
trihexyphenidyl hcl TABS .....35	TRULICITY .....19	TYMLOS .....58
TRIKAFTA TBPB .....91	TRUMENBA 0.5 ML .....94	TYPHIM VI SOLN .....94
TRILEPTAL SUSP (Use oxcarbazepine) .....14	TRUVADA 200 MG-300 MG (Use emtricitabine-tenofovir disoproxil fumarate) .....39	TYPHIM VI SOSY .....94
TRILEPTAL TABS (Use oxcarbazepine) .....14	TRUXIMA .....30	TYVASO REFILL KIT SOLN IN ...43
TRILURON SOSY .....82	TRUZONE PEAK FLOW METER .74	TYVASO SOLN IN .....43
trimethoprim TABS .....27	TUBING/WING TIP MISC .....74	TYVASO STARTER KIT SOLN IN .43
TRI-MIX SOLR .....42	TUDORZA PRESSAIR .....10	ULTIGUARD SAFEPAK PEN NEEDLE .....70
TRINTELLIX .....17	TUKYSA .....31	ULTRA NEB ACCESSORIES KIT MISC .....74
TRIPTODUR .....59	TUMS CHEW (Use calcium carbonate (antacid)) .....9	ULTRATHON INSECT REPELLENT 8 AERO .....54
TRISENOX (Use arsenic trioxide) 34	TUMS LASTING EFFECTS CHEW (Use calcium carbonate (antacid)) ..9	ULTRATHON INSECT REPELLENT LOTN .....54
TRIUMEQ TABS .....39	TUMS ULTRA 1000 CHEW (Use calcium carbonate (antacid)) .....9	UNIFINE OTC PEN NEEDLES ...70
TRIVISC SOSY .....82	TURALIO 125 MG .....33	
TRI-VITAMIN WITH FLUORIDE SOLN 0.25 MG/ML80	TWINRIX SUSY96	
TRIZIVIR39	TYBLUME CHEW44	
TROGARZO39		
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UNIFINE PROTECT PEN NEEDLE . 70	VABYSMO SOLN85	vancomycin hcl SOLR IV 1 GM27
UNIFINE SAFECONTROL PEN NEEDLE .....70	VAGIFEM TABS (Use estradiol vaginal) .....97	VANCOMYCIN HCL SOLR IV 1 GM . 27
UNISOM SLEEPGELS CAPS (Use diphenhydramine hcl (sleep)) .....66	valacyclovir hcl 1 GM 40	vancomycin hcl SOLR IV 500 MG .27
UNISOM SLEEPTABS (Use doxylamine succinate (sleep)) .....66	valacyclovir hcl 500 MG .....40	VANCOMYCIN HCL SOLR IV 500 MG 27
UNISPEND ANHYDROUS SWEETENED SUSP .....89	VALCHLOR .....50	vancomycin hcl SOLR PO 25 MG/ML, 50 MG/ML, 250 MG/5ML .27
UNISPEND ANHYDROUS UNSWEETENED SUSP .....89	VALCYTE TABS (Use valganciclovir hcl) 40	VANDAZOLE .....97
UNITUXIN .....30	valganciclovir hcl TABS .....40	VAQTA 96
UPTRAVI SOLR 43	VALIUM TABS (Use diazepam) ... 10	varenicline tartrate TABS 91
UPTRAVI TABS .....43	valproate sodium SOLN PO 250 MG/5ML, 500 MG/10ML 15	varenicline tartrate TBPK 91
UPTRAVI TITRATION TBPK .....43	valproic acid CAPS 15	VARIVAX SUSR 96
urea CREA 40 %53	valrubicin 32	VASERETIC 25 MG-10 MG (Use enalapril maleate & hydrochlorothiazide) 27
urea LOTN 40 %53	valsartan TABS 25	VASOTEC TABS (Use enalapril maleate) .....25
URETRON D/S TABS 81.6 MG ... 27	valsartan-hydrochlorothiazide ....27	VAXCHORA .....94
UROCIT-K 10 TBCR (Use potassium citrate (alkalinizer)) .....62	VALSTAR (Use valrubicin) .....32	VAXELIS SUSP .....92
UROCIT-K 5 TBCR (Use potassium citrate (alkalinizer)) .....62	VALTOCO 10 MG DOSE LIQD ....12	VAXELIS SUSY .....92
URSO 250 TABS (Use ursodiol) ...61	VALTOCO 15 MG DOSE LQPK 7.5 MG/0.1ML .....13	VAXNEUVANCE 94
ursodiol CAPS 61	VALTOCO 20 MG DOSE LQPK 10 MG/0.1ML .....13	VECAMYL .....27
ursodiol TABS 250 MG 61	VALTOCO 5 MG DOSE LIQD .....13	VECTIBIX 100 MG/5ML, 400 MG/20ML .....31
USTEKINUMAB 130 MG/26ML ...62	VALTREX 1 GM (Use valacyclovir hcl) 40	VELCADE SOLR IJ (Use bortezomib) .....33
USTEKINUMAB SOSY 45 MG/0.5ML, 90 MG/ML .....51	VALTREX 500 MG (Use valacyclovir hcl) 40	VELETRI (Use epoprostenol sodium) 43
USTEKINUMAB-AEKN SOSY SC 45 MG/0.5ML, 90 MG/ML .....51	VANCOCIN CAPS 125 MG (Use vancomycin hcl) .....27	VEMLIDY .....40
USTEKINUMAB-TTWE51	VANCOCIN CAPS 250 MG (Use vancomycin hcl)27	VENCLEXTA STARTING PACK TBPK31
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	vancomycin hcl CAPS 250 MG ...27	

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venlafaxine hcl CP24 37.5 MG 17	vigabatrin PACK 14	VITAMIN E CHEW98
venlafaxine hcl CP24 75 MG 17	vigabatrin TABS14	VITAMINS ACD-FLUORIDE SOLN 80
venlafaxine hcl TABS 17	VIGAMOX SOLN OP (Use moxifloxacin hcl (ophth)) .....85	vitamins w/ lipotropics CAPS 81
venlafaxine hcl TB24 150 MG 17	VIIBRYD TABS (Use vilazodone hcl) 17	VITRAKVI CAPS34
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VENTOLIN HFA AERS (Use albuterol sulfate) 12	VILTEPSO83	VIVELLE-DOT PTTW (Use estradiol) 61
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verapamil hcl CP24 120 MG, 180 MG, 240 MG, 300 MG, 360 MG ... 42	vincristine sulfate35	VIVITROL 21
VERAPAMIL HCL ER CP24 (Use verapamil hcl)42	VIRACEPT TABS 250 MG39	VIVOTIF94
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verapamil hcl TBCR 42	VIREAD POWD39	VOLTAREN ARTHRITIS PAIN GEL EX (Use diclofenac sodium (topical)) . 50
VERELAN CP24 (Use verapamil hcl) 42	VIREAD TABS (Use tenofovir disoproxil fumarate) .....39	VONJO 34
VERELAN PM CP24 100 MG, 200 MG (Use verapamil hcl) .....42	VIREAD TABS 150 MG, 200 MG, 250 MG .....39	VONVENDI .....64
VERELAN PM CP24 300 MG (Use verapamil hcl) .....42	VISCO-3 SOSY .....82	VOQUEZNA .....94
VERIFINE INSULIN PEN NEEDLE 70	VISINE RED EYE COMFORT (Use tetrahydrozoline hcl (ophth)) .....85	VORAXAZE 34
VERIFINE PLUS PEN NEEDLE .. 70	VISTARIL CAPS (Use hydroxyzine pamoate) 9	VOTRIENT (Use pazopanib hcl) ..34
VERSAFREE SYRP 89	VISTOGARD 21	VOTRIENT 34
VERSAPLUS SYRP 89	VISUDYNE .....85	VYNDAMAX .....43
VERZENIO .....33	VITAMIN D3 LIQD PO 125 MCG/ML . 98	VYNDAQEL 43
VIBRAMYCIN CAPS (Use doxycycline hyclate) .....92	vitamin e CAPS 100 UNIT, 200 UNIT, 268 MG, 400 UNIT, 45 MG, 90 MG, 90 MG .....98	VYONDYS 53 83
VICTOZA (Use liraglutide) 19	vitamin e CAPS 100 UNIT, 200 UNIT, 400 UNIT .....98	VYTORIN (Use ezetimibe- simvastatin) 23
		VYVANSE CAPS .....1
		VYVANSE CHEW .....1
		VYVGART .....77

VYXEOS	32	XENLETA TABS	28	levocetirizine dihydrochloride)	23
WALGREENS GLUCOSE	19	XERMELO	62	YASMIN 28 (Use drospirenone-ethinyl estradiol)	44
WALGREENS GLUCOSE CHEW .	19	XGEVA SOLN	58	YAZ (Use drospirenone-ethinyl estradiol)	44
WAL-TUSSIN CF LIQD 100 MG/5ML-30 MG/5ML-10 MG/5ML .	48	XIAFLEX	76	YERVOY	30
warfarin sodium TABS	12	XIGDUO XR (Use dapagliflozin propanediol-metformin hcl)	18	YESINTEK SOLN 45 MG/0.5ML ..	51
WELIREG	31	XIPERE	86	YESINTEK SOSY	51
WELLBUTRIN SR TB12 100 MG (Use bupropion hcl)	15	XOLAIR SOAJ	10	YF-VAX INJ	96
WELLBUTRIN SR TB12 150 MG (Use bupropion hcl)	15	XOLAIR SOLR	10	YONDELIS	29
WELLBUTRIN SR TB12 200 MG (Use bupropion hcl)	15	XOLAIR SOSY	10	YONSA	31
WELLBUTRIN XL TB24 150 MG (Use bupropion hcl)	15	XOPENEX HFA (Use levalbuterol tartrate)	12	YUFLYMA (1 PEN) AJKT	3
WELLBUTRIN XL TB24 300 MG (Use bupropion hcl)	15	XOSPATA	34	YUFLYMA (2 PEN) AJKT	3
white petrolatum-mineral oil	84	XPOVIO (100 MG ONCE WEEKLY) 50 MG	32	YUFLYMA (2 SYRINGE) PSKT	3
WILATE KIT	64	XPOVIO (40 MG ONCE WEEKLY) 32		YUFLYMA-CD/UC/HS STARTER AJKT	3
WINDMILL TRAINER MISC	74	XPOVIO (40 MG TWICE WEEKLY) 40 MG	32	YUSIMRY	4
WINRHO SDF SOLN 1500 UNIT/1.3ML, 2500 UNIT/2.2ML, 5000 UNIT/4.4ML, 15000 UNIT/13ML ...	88	XPOVIO (60 MG ONCE WEEKLY) 60 MG	32	YUTIQ	86
XALATAN SOLN (Use latanoprost) 87		XPOVIO (60 MG TWICE WEEKLY) 32		ZADITOR 0.035 % (Use ketotifen fumarate (ophth))	87
XALKORI CAPS	34	XPOVIO (80 MG ONCE WEEKLY) 40 MG	32	zaleplon 10 MG	66
XANAX TABS (Use alprazolam) ...	10	XPOVIO (80 MG TWICE WEEKLY) 32		zaleplon 5 MG	66
XELJANZ SOLN	2	XURIDEN	60	ZALTRAP	30
XELJANZ TABS	2	XYNTHA	64	ZANAFLEX TABS 4 MG (Use tizanidine hcl)	81
XELJANZ XR TB24	2	XYNTHA SOLOFUSE	64	ZARONTIN CAPS (Use ethosuximide)	14
XELODA (Use capecitabine)	30	XYZAL ALLERGY 24HR TABS (Use		ZARONTIN SOLN (Use ethosuximide)	14
XEMBIFY	88			ZARXIO	65
XENAZINE (Use tetrabenazine) ..	90			ZAVESCA (Use miglustat)	64
				ZEJULA CAPS	34

ZELBORAF	34	ZITHROMAX PACK	68	ZOLGENSMA 14.1-14.5 KG	83
ZEMAIRA SOLR 1000 MG	91	ZITHROMAX SUSR 100 MG/5ML (Use azithromycin)	68	ZOLGENSMA 14.6-15.0 KG	83
ZEMAIRA SOLR 4000 MG	91	ZITHROMAX SUSR 200 MG/5ML (Use azithromycin)	68	ZOLGENSMA 15.1-15.5 KG	83
ZEMPLAR SOLN (Use paricalcitol) 60		ZITHROMAX TABS 250 MG (Use azithromycin)	68	ZOLGENSMA 15.6-16.0 KG	83
ZEPZELCA	29	ZITHROMAX TABS 500 MG (Use azithromycin)	68	ZOLGENSMA 16.1-16.5 KG	83
ZESTORETIC 12.5 MG-10 MG, 12.5 MG-20 MG (Use lisinopril & hydrochlorothiazide)	27	ZITHROMAX TRI-PAK TABS (Use azithromycin)	68	ZOLGENSMA 16.6-17.0 KG	83
ZESTORETIC 25 MG-20 MG (Use lisinopril & hydrochlorothiazide) ...	27	ZITHROMAX Z-PAK TABS (Use azithromycin)	68	ZOLGENSMA 17.1-17.5 KG	83
ZESTRIL TABS 2.5 MG (Use lisinopril)	25	ZITUVIMET TABS	18	ZOLGENSMA 17.6-18.0 KG	83
ZESTRIL TABS 5 MG, 10 MG, 20 MG, 30 MG, 40 MG (Use lisinopril) 25		ZITUVIMET XR TB24	18	ZOLGENSMA 18.1-18.5 KG	83
ZETIA (Use ezetimibe)	24	ZITUVIO	19	ZOLGENSMA 18.6-19.0 KG	83
ZEVALIN Y-90	30	ZOCOR TABS 10 MG, 20 MG, 40 MG (Use simvastatin)	24	ZOLGENSMA 19.1-19.5 KG	83
ZIAC (Use bisoprolol & hydrochlorothiazide)	27	ZOKINVY	77	ZOLGENSMA 19.6-20.0 KG	83
ZIAGEN SOLN (Use abacavir sulfate)	39	ZOLADEX	31	ZOLGENSMA 20.1-20.5 KG	83
ZIAGEN TABS (Use abacavir sulfate)	39	zoledronic acid CONC	58	ZOLGENSMA 3.1-3.5 KG	83
zidovudine CAPS	40	zoledronic acid SOLN	58	ZOLGENSMA 3.6-4.0 KG	83
zidovudine SYRP	40	ZOLEDRONIC ACID SOLN	58	ZOLGENSMA 4.1-4.5 KG	83
zidovudine TABS	40	ZOLGENSMA 20.6-21.0 KG	83	ZOLGENSMA 4.6-5.0 KG	83
ZILRETTA SRER	46	ZOLGENSMA 10.1-10.5 KG	83	ZOLGENSMA 5.1-5.5 KG	83
zinc oxide (topical) OINT 20 %	54	ZOLGENSMA 10.6-11.0 KG	83	ZOLGENSMA 5.6-6.0 KG	83
zinc sulfate CAPS	76	ZOLGENSMA 11.1-11.5 KG	83	ZOLGENSMA 6.1-6.5 KG	83
ZINPLAVA	88	ZOLGENSMA 11.6-12.0 KG	83	ZOLGENSMA 6.6-7.0 KG	83
ziprasidone hcl	36	ZOLGENSMA 12.1-12.5 KG	83	ZOLGENSMA 7.1-7.5 KG	84
ZIRABEV	30	ZOLGENSMA 12.6-13.0 KG	83	ZOLGENSMA 7.6-8.0 KG	84
		ZOLGENSMA 13.1-13.5 KG	83	ZOLGENSMA 8.1-8.5 KG	84
		ZOLGENSMA 13.6-14.0 KG	83	ZOLGENSMA 8.6-9.0 KG	84
				ZOLGENSMA 9.1-9.5 KG	84
				ZOLGENSMA 9.6-10.0 KG	84
				ZOLINZA	34
				zolmitriptan SOLN 5 MG	75

zolmitriptan TABS	75	ZYRTEC CHEW 10 MG (Use cetirizine hcl)	23
zolmitriptan TBDP	75	ZYRTEC CHILDRENS ALLERGY CHEW 10 MG (Use cetirizine hcl) .	23
ZOLOFT CONC (Use sertraline hcl) 17		ZYRTEC CHILDRENS ALLERGY SOLN PO (Use cetirizine hcl)	23
ZOLOFT TABS 100 MG (Use sertraline hcl)	17	ZYRTEC-D ALLERGY & CONGESTION (Use cetirizine- pseudoephedrine)	48
ZOLOFT TABS 25 MG, 50 MG (Use sertraline hcl)	17	ZYRTEC-D ALLERGY & SINUS (Use cetirizine-pseudoephedrine) .	48
zolpidem tartrate TABS	66	ZYTIGA (Use abiraterone acetate) 31	
ZOMIG SOLN 5 MG (Use zolmitriptan)	75		
ZONEGRAN CAPS 25 MG, 100 MG (Use zonisamide)	14		
zonisamide CAPS	14		
ZORBTIVE SC	59		
ZOVIRAX CREA (Use acyclovir topical)	51		
ZOVIRAX OINT (Use acyclovir topical)	51		
ZUBSOLV SUBL	8		
ZULRESSO	15		
ZYDELIG	34		
ZYKADIA TABS	34		
ZYLOPRIM (Use allopurinol)	63		
ZYNLONTA	30		
ZYPREXA RELPREVV	37		
ZYPREXA TABS 15 MG, 20 MG (Use olanzapine)	37		
ZYPREXA TABS 2.5 MG, 5 MG (Use olanzapine)	37		
ZYPREXA TABS 7.5 MG, 10 MG (Use olanzapine)	37		
ZYRTEC ALLERGY TABS (Use cetirizine hcl)	23		