

Oregon Essential Drug List

The Essential Drug List (formulary) includes a list of drugs covered by Health Net Health Plan of Oregon (Health Net). The drug list is updated often and is subject to change. All previous versions are no longer in effect. You can view the most current drug list by going to our website at www.healthnetoregon.com or call us at the toll-free telephone number on your Health Net ID card to request a copy. Refer to Evidence of Coverage for specific cost share information.



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Welcome to Health Net

What if i have question regarding my pharmacy benefit?

If you have questions about your pharmacy coverage, contact Customer Service at the phone number listed on your Health Net ID card. Customer Service can help you with questions about your prescription drug benefits, including, but not limited to:

- Information about drugs covered under the medical benefit.
- The process for submitting an exception request, requesting prior authorization and step therapy exceptions.
- Actual dollar amounts of cost sharing for drugs subject to coinsurance.

What is the Drug List?

The Drug List is a complete list of covered drugs used to treat common diseases or health problems. The drug list is selected by a committee of doctors and pharmacists who meet regularly to decide which drugs should be included. The committee reviews new drugs and current information about existing drugs and chooses drugs based on:

- Safety
- Effectiveness
- Side effects
- Value (If two drugs are equally effective, the less costly drug will be preferred)

How do I find a drug in the Drug List?

You can search for a drug by using the search tool, alphabetical index or by categorical list. There are three ways to find out if your drug is covered.

- *Search Tool:* Open the List of Drugs (PDF). Hold down the “Control” (Ctrl) and “F” keys. When the search box appears, type the name of your drug. Press the “Enter” key.
- *Alphabetical Index:* The index at the end of the PDF lists the names of generic and brand name drugs from A to Z. Once you find a drug name, go to the page number listed to see if the drug is covered.
- *Categorical list:* The drugs are grouped into therapeutic categories. If you know what therapeutic category your drug is in look through the list to find the category. Then look under the category and class for your drug.

If a generic equivalent for a brand name drug is not available in the market or not covered, the generic drug will not be listed separately. The presence of a drug on the drug list does not guarantee that your doctor will prescribe the drug for a particular medical condition.

What if my drug is not on the Drug List?

If your drug is not on the drug list, call us at the telephone number on your Health Net ID card and ask if your drug is covered. If your drug is not covered, you can ask your doctor to prescribe a similar drug that is covered. Your doctor can ask us to make an exception if he or she feels you need the drug that is not covered. If we approve an exception request for a drug not on the drug list, the non-preferred brand tier (Tier 3) copayment will apply.

How much will I pay for my drugs?

To figure out how much you will pay for a drug, the abbreviations in the table below appear in the Drug Tier column on the formulary. The copayment or coinsurance levels are defined in the table below. If you do not know your copayment or coinsurance for each tier, please refer to your Summary of Benefits or other plan documents.

Tier	Copayment/Coinsurance	Description
1	Tier 1 copayment or coinsurance	Tier 1 consists of most generic drugs and low-cost preferred brand name drugs.
2	Tier 2 copayment or coinsurance	Tier 2 consists of nonpreferred generic drugs, preferred brand name drugs, and other drugs based on safety, efficacy, and cost.
3	Tier 3 copayment or coinsurance	Tier 3 consists of nonpreferred brand name drugs and drugs that generally have a preferred and often less costly therapeutic alternative at a lower tier.
AC	Anticancer drug and miscellaneous supplies copayment or coinsurance	AC tier consists of oral anticancer drugs and miscellaneous supplies. You may be required to get these drugs from a Specialty pharmacy.
GP	Generic Preferred	A Brand name is listed for reference only when a generic equivalent is available. Depending on your plan, these drugs are either not covered (non-formulary), covered at Tier 3, or covered at a copayment plus the difference in cost between the brand and generic drug. Refer to your plan
PV	Preventive Benefit	PV tier consists of preventive benefit drugs, including contraceptives. If your plan has a preventive benefit these drugs are covered at no cost.
SP	Specialty copayment or coinsurance	SP tier consists of drugs that are distributed through a specialty pharmacy, drugs that require special training or monitoring for self-administration, and drugs that are classified as high-cost agents.

What are generic drugs?

A generic drug contains the same active ingredient and works the same way as the brand name drug. Generic drugs are safe and effective, and generally cost less.

Generic drugs are available on the drug list at Tier 1. Brand name drugs with a generic equivalent are either non-formulary or non-preferred, depending on your plan benefits. If your doctor determines that you need a brand name drug instead of its generic equivalent, your doctor can submit a prior authorization request for a formulary exception with documentation of medical necessity.

Are there any limits on my drug coverage?

Some drugs have limits on coverage. The table below provides a description of abbreviations that may appear in the Limits column on the drug list:

Abbreviation	Definition	Description
AL	Age Limit	These drugs may require prior authorization if your age does not fall within manufacturer, FDA or clinical recommendations.
PA	Prior Authorization	These drugs require prior authorization. This means that you or your prescriber must get approval from us before you fill your prescription. If you do not get approval, we may not cover the drug.
PV	Preventive Benefit	Drugs classified under the Affordable Care Act (ACA) as preventive health drugs, including prescription and OTC contraceptive drugs and devices. Preventive health drugs are determined based on evidence-based recommendations by the United States Preventive Services Task Force (USPSTF).
QL	Quantity Limit	These drugs have a limit on the amount that will be covered. Your doctor must request approval from Health Net for a higher quantity of the drug.
RX/OTC	Prescription & Over the Counter (OTC)	Certain drugs are available both in a prescription form and in an OTC form. Only prescription drugs are covered by your plan with the exception of some insulins, insulin supplies and some covered preventive drugs.
ST	Step Therapy	Step therapy is when you are required to use one drug before another, in a stepwise fashion. Unless an exception is made, one or more preferred drugs must be tried first before progressing to a drug that is subject to step

How can I get an exception to the rules for drug coverage?

Your doctor can ask for an exception to our rules for drug coverage.

- Your doctor can ask us to cover your drug even if it is not on the drug list.
- Your doctor can ask us to make an exception for limits on your drug. For example, if your drug has a quantity limit of 1 tablet per day, your doctor can ask us to cover more.

To request an exception, your doctor can fax a prior authorization form along with a written statement supporting the request to us at 1-800-255-9198.

Are injectable drugs covered?

Injectable drugs are not covered, except for those listed on the drug list. Some injectable drugs are considered “specialty drugs” and, in most cases, must be obtained from one of Health Net’s approved Specialty Pharmacies.

Are compounded prescriptions covered?

Compounded prescriptions require prior authorization for coverage. If prior authorization is granted, your Tier 3 copayment or coinsurance applies.

Can I go to any pharmacy?

To get the best benefit, you should use pharmacies that are in the network. These pharmacies have a contract with Health Net. Most chain pharmacies and many independent pharmacies are in the network. To find a pharmacy near you, visit our website at www.healthnetoregon.com or call us at the telephone number on your Health Net ID card.

If you fill your prescription at an out-of-network pharmacy, the pharmacy may not be able to bill Health Net online, so you may have to pay the full cost of your drug. If you do pay out-of-pocket for your drug, you may be able to send us your pharmacy receipt and ask for reimbursement of our share of the cost. Please refer to your plan documents for more information.

Some injectable and high cost drugs (including anticancer drugs) may be considered "specialty drugs". These drugs must be obtained from one of Health Net's approved Specialty pharmacies.

Can I use a mail order pharmacy?

You can use the CVS Caremark Mail Order Pharmacy for the home delivery of most maintenance drugs. Maintenance drugs are those needed for a long term condition.

To use the mail order pharmacy, your doctor must provide new prescriptions that allow up to a 90-day supply of each drug. Mail order forms are available on our website at www.healthnetoregon.com or you may call us at the telephone number on your Health Net ID card to request a form.

How often can I refill my prescription?

- For prescriptions written for 10-days or less, you may refill after 50 percent of the supply has been used as directed.
- For prescriptions written for more than 10-days, you may refill after 74 percent of the supply has been used as directed.

If your physician has increased your dose, your pharmacy must be notified of the change. If this change will result in an early refill request, your pharmacy can contact Health Net for an override.

How can I save money on my prescription drugs?

You can save time and money with these simple steps:

- Ask your doctor about generic drugs that may work for you.
- Fill prescriptions at Health Net participating pharmacies.
- Be sure your doctor prescribes drugs on the drug list
- Fill your maintenance drugs through our mail order pharmacy program.

Definitions

Brand drug: Is a drug that is marketed under a proprietary, trademark-protected name. A brand drug is listed in this formulary in all CAPITAL letters.

Coinurance: Is a percentage of the cost of a covered health care benefit that you pay after you have paid the deductible, if a deductible applies to the health care benefit.

Copayment: Is a fixed dollar amount that you pay for a covered health care benefit after you have paid the deductible if a deductible applies to the health care benefit.

Deductible: Is the amount you pay for covered health care benefits that are subject to the deductible before your health insurer begins to pay. If the plan has a deductible, it may have either one deductible or separate deductibles for medical benefits and prescription drug benefits. After you pay your deductible, you usually pay only a copayment or coinsurance for covered health care benefits. The plan pays the rest.

Drug Tier: Is a group of prescription drugs that correspond to a specified cost sharing tier. The drug tier in which a prescription drug is placed determines your portion of the cost for the drug.

Exception request: Is a request for coverage of a non-formulary drug. If you, your designee, or your provider submits a request for coverage of a non-formulary drug, the plan must cover the non-formulary drug when it is medically necessary for you to take the drug.

Formulary or prescription drug list: Is the list of drugs that is covered by the plan under the prescription drug benefit of the policy.

Generic drug: Is a drug that is the same as its brand name drug equivalent in dosage, strength, effect, how it is taken, quality, safety, and intended use. A generic drug is listed in the drug list in bold and italicized lowercase letters.

Medically Necessary: Is a health care benefit needed to diagnose, treat, or prevent a medical condition or its symptoms and that meet accepted standards of medicine. Plans usually do not cover health care benefits that are not medically necessary.

Non-formulary drug: Is a prescription drug that is not listed on the drug list.

Out-of-pocket costs: Are your expenses for health care benefits that are not reimbursed by the plan. Out-of-pocket costs include deductibles, copayments, and coinsurance for covered health care benefits, plus all costs for health care benefits that are paid by the Member and not covered by the plan.

Prescription: Is an oral, written, or electronic order from a prescribing provider authorizing a prescription drug to be provided to a specific individual.

Prescription drug: Is a drug that by law requires a prescription.

Prior Authorization: Is a decision by the plan that a health care benefit is medically necessary for you. If a prescription drug is subject to prior authorization in the drug list, your doctor must request approval from the plan to cover the drug before you fill your prescription. The plan must grant a prior authorization request when it is medically necessary for you to take the drug.

Step therapy: Is a specific sequence in which prescription drugs for a particular medical condition must be tried. If a drug is subject to step therapy in the drug list, you may have to try one or more other drugs before the plan will cover that drug for your medical condition. If your doctor submits a request for an exception to the step therapy requirement, the plan must grant the request when it is medically necessary for you to take the drug.

Nondiscrimination Notice

Health Net Health Plan of Oregon, Inc., “Health Net” complies with applicable federal civil rights laws and does not discriminate, exclude people or treat them differently on the basis of race, color, national origin, ancestry, religion, marital status, gender, gender identity, sexual orientation, age, disability, or sex.

HEALTH NET:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as qualified sign language interpreters and written information in other formats (large print, accessible electronic formats, other formats).
- Provides free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages.

If you need these services, contact Health Net’s Customer Contact Center at 1-888-802-7001 (TTY: 711).

If you believe that Health Net has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance by calling the number above and telling them you need help filing a grievance. Health Net’s Customer Contact Center is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at

<https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf>, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW, Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019 (TDD: 1-800-537-7697).

Complaint forms are available at <https://www.hhs.gov/ocr/complaints/index.html>.

English

No Cost Language Services. You can get an interpreter. You can get documents read to you and some sent to you in your language. For help, call the Customer Contact Center at the number on your ID card or call 1-888-802-7001 (TTY: 711).

Amharic

አፈንቃ አገልግሎት ምንም የለምዶ:: እስተዳደሩ ማኑት ይችላል:: የተሰጠውን እና የተወጠውን በቁጥር የተለከተውን ስነዎች መግኑት ይችላል:: ለእርዳታ ለማስተካከል ተስፋል
ማስተካከል በመተወቂያ ካርድዋ ለይሁ የለምና ቅዱር ይረዳል ወይም በ 1-888-802-7001 (TTY: 711) ይደረሰ::

Arabic

الخدمات اللغوية المجانية. يمكنك الاستعانة بمترجم فوري، كما يمكنك طلب قراءة المستندات عليك وإرسال بعض منها إليك ببلطفك. للحصول على المساعدة، يمكنك الاتصال بمركز اتصال العملاء على الرقم الموجود على بطاقة معرف العضوية الخاصة بك أو الاتصال على (TTY: 711) 1-888-802-7001.

Chinese

免費語言服務。您可以取得口譯服務。我們可以把文件朗讀給您聽，也可以把部分翻譯成您語言的文件寄送給您。如需協助，請撥打會員卡上的電話號碼聯絡客戶聯絡中心，或撥打電話 1-888-802-7001 (聽障專線 (TTY) : 711)。

Cushite (Oromo)

Tajaa jila afaanii kaffaltii hin qabu. Turjubaana argachuu ni dandeessu. Sanadii isiniif dubbifamee fi afaan keessaniin muraasaan isniif ergame argachuu ni dandeessu. Gargaarsaaf, Wiirtuu Qunnamtti Maamilaa tiif lakkoofsicha kaardii enyummaa keessan irra jirutti bilbilaa ykn 1-888-802-7001 (TTY: 711) itti bilbilaa.

German

Es stehen Ihnen kostenlose Sprachdienstleistungen zur Verfügung. Sie können einen Dolmetscher hinzuziehen. Die Dokumente können Ihnen vorgelesen werden und einige sind in Ihrer Muttersprache erhältlich. Für Unterstützung rufen Sie bitte unser Kundendienstzentrum unter der auf Ihrer Versicherungskarte angegebenen Nummer oder unter der Rufnummer 1-888-802-7001 (TTY: 711) an.

Japanese

無料の言語支援サービス。通訳をご利用いただけます。日本語で文書を読み上げたり、文書によっては日本語版をお届けすることも可能です。支援をご希望の方は、IDカードに記載の番号にてカスタマーコンタクトセンターまでお電話をくださいか、1-888-802-7001 (TTY: 711)までお電話ください。

Korean

무료 언어 서비스. 귀하는 통역사를 이용하실 수 있습니다. 귀하에게 편한 언어로 서류 낭독 서비스 및 번역 서비스를 받으실 수 있습니다. 도움이 받으시려면 본인의 ID 카드에 기재된 고객 서비스 센터 안내번호 또는 1-888-802-7001 (TTY: 711)번으로 전화해주세요.

Cambodian (Khmer)

សេវាភាសាអក្រកក្រឹត្យុ មួយកម្មាធជនខ្លួនបាន។ មួយកម្មាធិញ្ញាខោនដែកសារឡើងនូវកម្មការ និងជីវិតរបស់អ្នក។ សេវាភាសាបសម្ព័ន្ធ សំរាប់ជំនួយ ទូរសព្ទទៅម៉ោងលើកនាត់នៅក្នុងអគ្គិភ័ន្ធគារលេខនៅលើក D បែងចុះ ប្រាក់លើ 1-888-802-7001 (TTY: 711)។

Laotian

ການបໍລິການດ້ວຍພາວັນທີ່ບໍລະຍຄ່າ. ທ່ານວາມໄດ້ຂັ້ນກາລົບພາວັນ. ທ່ານສາມາໄດ້ອ່ານເອກະພານ ອະນະ ຈຳນວນຫົ່ງໄດ້ຈົ່ງໃຫ້ທ່ານເປັນພາສາຂອງທ່ານແລ້ວ. ແພ່ອຂ່ອງມາ
ຊ່ວຍເຫຼືອ, ໂທທາສູນຕິດຕໍ່ລູກຄ້າໄດ້ທີ່ວາງໝາຍຢູ່ທີ່ບັນດາ ID ຂອງທ່ານ ຫຼື 1-888-802-7001 (TTY: 711).

Punjabi

ਭਾਸ਼ਾ ਸੇਵਾਵਾਂ ਲਈ ਕੋਈ ਲਾਗਤ ਨਹੀਂ। ਤੁਸੀਂ ਦੁਧਾਸੀਆ ਪ੍ਰਾਪਤ ਕਰ ਸਕਦੇ ਹੋ। ਤੁਸੀਂ ਤੁਹਾਨੂੰ ਪੜ੍ਹ ਕੇ ਸੁਣਾਏ ਦਸਤਾਵੇਜ਼ ਪ੍ਰਾਪਤ ਕਰ ਸਕਦੇ ਹੋ ਅਤੇ ਕੁਝ ਤੁਹਾਡੀ ਭਾਸ਼ਾ ਵਿੱਚ ਤੁਹਾਨੂੰ ਭੇਜੇ ਗਏ ਹਨ। ਮਦਦ ਲਈ, ਆਪਣੇ ID ਕਾਰਡ 'ਤੇ ਗਾਹਕ ਸੰਪਰਕ ਕੇਂਦਰ ਨੂੰ ਕਾਲ ਕਰੋ ਜਾਂ 1-888-802-7001 (TTY: 711)।

Russian

Бесплатные услуги перевода. Вы можете воспользоваться услугами переводчика. Вам могут прочесть документы на русском языке и выслать переводы некоторых из них. Если вам требуется помочь, звоните в Центр обслуживания клиентов по номеру, указанному на вашей идентификационной карте, или по номеру 1-888-802-7001 (линия TTY: 711).

Spanish

Servicios de Idiomas Sin Costo. Usted puede solicitar un intérprete. Puede solicitar que se le lean los documentos y que algunos de ellos se le envíen en su idioma. Para obtener ayuda, llame al Centro de Comunicación con el Cliente al número que se encuentra en su tarjeta de identificación o llame al 1-888-802-7001 (TTY: 711).

Tagalog

Mga Walang Bayad na Serbisyo sa Wika. Maaari kayong kumuha ng tagasaling-wika (interpreter). Maaaring basahin sa inyo ang mga dokumento at ipadala sa inyo ang ilan nang nakasalin sa inyong wika. Para sa tulong, tumawag sa Customer Contact Center sa numero sa inyong ID card o tumawag sa 1-888-802-7001 (TTY: 711).

Ukrainian

Безкоштовні послуги перекладу. Ви можете скористатися послугами перекладача. Вам можуть прочитати документи на українській мові та надіслати переклади деяких із них. Якщо вам потрібна допомога, телефонуйте у Центр обслуговування клієнтів за номером, вказаним на вашій ідентифікаційній карті, або за номером 1-888-802-7001 (лінія TTY: 711).

Vietnamese

Dịch vụ ngôn ngữ miễn phí. Quý vị có thể yêu cầu phiên dịch viên. Quý vị có thể yêu cầu đọc các tài liệu và gửi một số tài liệu cho quý vị bằng ngôn ngữ của quý vị. Để được trợ giúp, hãy gọi đến Trung tâm Liên lạc Hội viên theo số điện thoại trên thẻ nhận dạng của quý vị hoặc gọi đến số 1-888-802-7001 (TTY: 711).

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders					
Amphetamines					
(Dextroamphetamine Sulfate) PROCENTRA SOLN	1		<i>atomoxetine hcl 60 MG, 80 MG, 100 MG</i>	1	QL(1 EA daily)
(Dextroamphetamine Sulfate) ZENZEDI TABS 2.5 MG, 5 MG, 7.5 MG, 10 MG	1		<i>atomoxetine hcl 10 MG, 18 MG, 25 MG, 40 MG</i>	1	QL(2 EA daily)
ADDERALL XR CP24 (<i>amphetamine-dextroamphetamine</i>)	GP	QL(1 EA daily)	<i>clonidine hcl (adhd) TB12</i>	1	QL(4 EA daily)
ADDERALL TABS (<i>amphetamine-dextroamphetamine</i>)	GP		<i>guanfacine hcl (adhd)</i>	1	QL(1 EA daily)
<i>amphetamine-dextroamphetamine CP24 5 MG, 10 MG, 15 MG, 20 MG, 25 MG, 30 MG</i>	1	QL(1 EA daily)	INTUNIV (<i>guanfacine hcl (adhd)</i>)	GP	QL(1 EA daily)
<i>amphetamine-dextroamphetamine TABS</i>	1		KAPVAY TB12 (<i>clonidine hcl (adhd)</i>)	GP	QL(4 EA daily)
DESOXYN (<i>methamphetamine hcl</i>)	GP	PA	STRATTERA 10 MG, 18 MG, 25 MG, 40 MG (<i>atomoxetine hcl</i>)	GP	QL(2 EA daily)
DEXEDRINE CP24 10 MG, 15 MG (<i>dextroamphetamine sulfate</i>)	GP		STRATTERA 60 MG, 80 MG, 100 MG (<i>atomoxetine hcl</i>)	GP	QL(1 EA daily)
<i>dextroamphetamine sulfate CP24</i>	1		Stimulants - Misc.		
<i>dextroamphetamine sulfate SOLN</i>	1		<i>armodafinil 200 MG</i>	1	PA
<i>dextroamphetamine sulfate TABS 2.5 MG, 5 MG, 7.5 MG, 10 MG</i>	1		<i>armodafinil 50 MG, 150 MG, 250 MG</i>	1	PA
<i>lisdexamfetamine dimesylate CAPS</i>	1	QL(1 EA daily)	DAYTRANA PTCH (<i>methylphenidate</i>)	GP	QL(1 EA daily)
<i>lisdexamfetamine dimesylate CHEW</i>	1	QL(1 EA daily)	<i>dexmethylphenidate hcl CP24 25 MG</i>	1	QL(2 EA daily)
<i>methamphetamine hcl</i>	1	PA	<i>dexmethylphenidate hcl CP24 5 MG, 10 MG, 15 MG, 20 MG, 30 MG, 35 MG, 40 MG</i>	1	QL(1 EA daily)
			<i>dexmethylphenidate hcl TABS</i>	1	QL(2 EA daily)
			FOCALIN XR CP24 5 MG, 10 MG, 15 MG, 20 MG, 30 MG, 35 MG, 40 MG (<i>dexmethylphenidate hcl</i>)	GP	QL(1 EA daily)
			FOCALIN TABS (<i>dexmethylphenidate hcl</i>)	GP	QL(2 EA daily)

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
METADATE CD CPCR 20 MG, 30 MG <i>(methylphenidate hcl)</i>	GP	QL(2 EA daily)	QUILLICHEW ER CHER 20 MG, 40 MG	3	QL(1 EA daily); PA
METADATE CD CPCR 10 MG, 40 MG, 50 MG, 60 MG <i>(methylphenidate hcl)</i>	GP		QUILLIVANT XR SRER	3	QL(12 ML daily); PA
METHYLIN SOLN <i>(methylphenidate hcl)</i>	GP		RITALIN LA CP24 <i>(methylphenidate hcl)</i>	GP	QL(1 EA daily)
<i>methylphenidate hcl CHEW</i>	1		RITALIN TABS <i>(methylphenidate hcl)</i>	GP	
<i>methylphenidate hcl CP24</i>	1	QL(1 EA daily)	ALLERGENIC EXTRACTS/BIOLOGICALS MISC		
<i>methylphenidate hcl CPCR 20 MG, 30 MG</i>	1	QL(2 EA daily)	Allergenic Extracts		
<i>methylphenidate hcl CPCR 10 MG, 40 MG, 50 MG, 60 MG</i>	1		GRASTEK SUBL	3	PA
<i>methylphenidate hcl SOLN</i>	1		ODACTRA SUBL	3	PA
<i>methylphenidate hcl TABS</i>	1		ORALAIR SUBL	3	PA
<i>methylphenidate hcl TB24 36 MG</i>	1	QL(2 EA daily)	RAGWITEK SUBL	3	PA
<i>methylphenidate hcl TB24 18 MG, 27 MG, 54 MG</i>	1	QL(1 EA daily)	AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections		
<i>methylphenidate hcl TBCR 36 MG</i>	1	QL(2 EA daily)	Aminoglycosides		
<i>methylphenidate hcl TBCR 10 MG, 18 MG, 20 MG, 27 MG, 54 MG, 72 MG</i>	1	QL(1 EA daily)	<i>amikacin sulfate SOLN 1 GM/4ML</i>	SP	PA
<i>methylphenidate hcl TBCR 45 MG, 63 MG</i>	1		ARIKAYCE	SP	PA
<i>methylphenidate PTCH</i>	1	QL(1 EA daily)	BETHKIS NEBU <i>(tobramycin)</i>	SP	PA
<i>modafinil</i>	1	QL(1 EA daily); ST	<i>gentamicin in saline 0.8 MG/ML-0.9 %, 1 MG/ML-0.9 %, 1.2 MG/ML-0.9 %, 1.6 MG/ML-0.9 %</i>	SP	PA
NUVIGIL 50 MG, 150 MG, 250 MG <i>(armodafinil)</i>	GP	PA	<i>gentamicin sulfate IJ 40 MG/ML</i>	SP	PA
NUVIGIL 200 MG <i>(armodafinil)</i>	GP	PA	KITABIS PAK (W/ NEBULIZER) NEBU 300 MG/5ML <i>(tobramycin)</i>	SP	
PROVIGIL <i>(modafinil)</i>	GP	QL(1 EA daily); ST	<i>neomycin sulfate TABS</i>	1	
QUILLICHEW ER CHER 30 MG	3	QL(2 EA daily); PA	<i>paromomycin sulfate</i>	1	
			<i>streptomycin sulfate SOLR</i>	SP	PA
			TOBI PODHALER CAPS	SP	PA
			TOBI NEBU <i>(tobramycin)</i>	SP	
			<i>tobramycin sulfate SOLN IJ 10 MG/ML, 80 MG/2ML</i>	SP	PA
			<i>tobramycin NEBU</i>	SP	

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
tobramycin NEBU	SP	PA	HUMIRA-PED>/=40KG CROHNS START PSKT	2	PA
ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions			HUMIRA-PED>/=40KG UC STARTER AJKT	2	PA
Antirheumatic - Enzyme Inhibitors			HUMIRA-PS/UV/ADOL HS STARTER AJKT	2	PA
RINVOQ LQ SOLN	2	PA	HUMIRA-PSORIASIS/UVEIT STARTER AJKT	2	PA
RINVOQ TB24	2	PA	Gold Compounds		
XELJANZ XR TB24	2	PA	AURANOFIN 3 MG	2	
XELJANZ SOLN	2	PA	RIDAURA	2	
XELJANZ TABS	2	PA	Interleukin-1 Blockers		
Antirheumatic Antimetabolites			ARCALYST	SP	PA
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	SP	PA	Interleukin-6 Receptor Inhibitors		
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	SP	PA	KEVZARA SOAJ	2	PA
Anti-TNF-alpha - Monoclonal Antibodies			KEVZARA SOSY	2	PA
ADALIMUMAB-ADAZ SOAJ 40 MG/0.4ML	2	PA	Nonsteroidal Anti-inflammatory Agents (NSAIDs)		
ADALIMUMAB-ADAZ SOSY 40 MG/0.4ML	2	PA	(Ibuprofen) IBU TABS 400 MG, 600 MG, 800 MG	1	
HADLIMA PUSHTOUCH SOAJ	2	PA	(Indomethacin) INDOCIN SUPP	1	
HADLIMA SOSY	2	PA	(Ketoprofen) KIPROFEN CAPS 25 MG	1	
HUMIRA (2 PEN) AJKT	2	PA	(Naproxen) EC-NAPROXEN TBEC	1	
HUMIRA (2 SYRINGE) PSKT	2	PA	ANAPROX DS TABS (<i>naproxen sodium</i>)	GP	
HUMIRA-CD/UC/HS STARTER AJKT	2	PA	ARTHROTEC TBEC (<i>diclofenac w/ misoprostol</i>)	GP	
HUMIRA-PED<40KG CROHNS STARTER PSKT	2	PA	CELEBREX 50 MG, 100 MG, 200 MG (<i>celecoxib</i>)	GP	QL(2 EA daily); ST
			CELEBREX 400 MG (<i>celecoxib</i>)	GP	QL(2 EA daily); AL(At least 60 yrs old); ST
			<i>celecoxib 400 MG</i>	1	QL(2 EA daily); AL(At least 60 yrs old); ST

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>celecoxib 50 MG, 100 MG, 200 MG</i>	1	QL(2 EA daily); ST	<i>ketoprofen CAPS 25 MG, 50 MG</i>	1	
DAYPRO TABS <i>(oxaprozin)</i>	GP		<i>ketoprofen CP24</i>	1	
<i>diclofenac potassium CAPS</i>	1	ST	<i>ketorolac tromethamine TABS</i>	1	Limit 20 per month; QL(0.67 EA daily)
<i>diclofenac potassium TABS 50 MG</i>	1		LODINE TABS (<i>etodolac</i>)	GP	
<i>diclofenac sodium TB24</i>	1		<i>meclofenamate sodium CAPS</i>	1	
<i>diclofenac sodium TBEC</i>	1		<i>mefenamic acid CAPS</i>	1	
<i>diclofenac w/ misoprostol TBEC</i>	1		<i>meloxicam SUSP</i>	1	
DUEXIS (<i>ibuprofen-famotidine</i>)	GP	PA	MELOXICAM SUSP (<i>meloxicam</i>)	GP	
EC-NAPROSYN TBEC <i>(naproxen)</i>	GP		<i>meloxicam TABS 15 MG</i>	1	QL(1 EA daily)
<i>etodolac CAPS</i>	1		<i>meloxicam TABS 7.5 MG</i>	1	QL(2 EA daily)
<i>etodolac TABS</i>	1		<i>nabumetone 500 MG</i>	1	QL(4 EA daily)
<i>etodolac TB24</i>	1	QL(2 EA daily)	<i>nabumetone 750 MG</i>	1	QL(3 EA daily)
FELDENE CAPS <i>(piroxicam)</i>	GP		NALFON CAPS (<i>fenoprofen calcium</i>)	GP	
<i>fenoprofen calcium CAPS 400 MG</i>	1		NALFON TABS 600 MG	3	
FENOPROFEN CALCIUM CAPS 200 MG	3		NAPRELAN TB24 <i>(naproxen sodium)</i>	GP	
<i>fenoprofen calcium TABS</i>	1		NAPROSYN SUSP (<i>naproxen</i>)	GP	
FENOPRON CAPS	2		NAPROSYN TABS 500 MG (<i>naproxen</i>)	GP	
FENORTHO CAPS 200 MG	3		<i>naproxen sodium TABS 275 MG, 550 MG</i>	1	
<i>flurbiprofen TABS</i>	1		<i>naproxen sodium TB24</i>	1	
<i>ibuprofen-famotidine</i>	1	PA	<i>naproxen-esomeprazole magnesium</i>	1	PA
<i>ibuprofen TABS 400 MG, 600 MG, 800 MG</i>	1		<i>naproxen SUSP</i>	1	
INDOCIN SUSP <i>(indomethacin)</i>	GP		<i>naproxen TABS</i>	1	
<i>indomethacin CAPS 25 MG, 50 MG</i>	1		<i>naproxen TBEC</i>	1	
<i>indomethacin CPCR</i>	1		<i>oxaprozin TABS</i>	1	
<i>indomethacin SUPP</i>	1		<i>piroxicam CAPS</i>	1	
<i>indomethacin SUSP</i>	1		<i>sulindac TABS</i>	1	
			<i>tolmetin sodium CAPS</i>	1	
			<i>tolmetin sodium TABS 600 MG</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits			
VIMOVO (<i>naproxen-esomeprazole magnesium</i>)	GP	PA	(Butalbital-Acetaminophen-Caffeine) ESGIC, ZEBUTAL CAPS 40 MG-50 MG-325 MG	1				
ZIPSOR CAPS (<i>diclofenac potassium</i>)	GP	ST	<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-300 MG, 40 MG-50 MG-325 MG</i>	1				
ZORVOLEX CAPS	3	QL(3 EA daily); ST	<i>butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG</i>	1				
Phosphodiesterase 4 (PDE4) Inhibitors								
OTEZLA TABS	2	PA	<i>butalbital-acetaminophen TABS 50 MG-300 MG, 50 MG-325 MG</i>	1				
OTEZLA TBPK	2	PA	<i>butalbital-aspirin-caffeine CAPS</i>	1				
Pyrimidine Synthesis Inhibitors								
ARAVA 10 MG (<i>leflunomide</i>)	GP	QL(2 EA daily)	ESGIC TABS (<i>butalbital-acetaminophen-caffeine</i>)	GP				
ARAVA 20 MG (<i>leflunomide</i>)	GP	QL(1 EA daily)	FIORICET CAPS (<i>butalbital-acetaminophen-caffeine</i>)	GP				
<i>leflunomide 10 MG</i>	1	QL(2 EA daily)	Salicylates					
<i>leflunomide 20 MG</i>	1	QL(1 EA daily)						
Soluble Tumor Necrosis Factor Receptor Agents								
ENBREL MINI SOCT	2	PA						
ENBREL SURECLICK SOAJ	2	PA						
ENBREL SOLN	2	PA						
ENBREL SOSY	2	PA						
ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions								
Analgesic Combinations								
(Butalbital-Acetaminophen) BUPAP TABS 50 MG-300 MG	1							
(Butalbital-Acetaminophen) TENCON TABS 50 MG-325 MG	1							
(Butalbital-Acetaminophen-Caffeine) BAC (BUTALBITAL-ACETAMIN-CAFF) TABS 40 MG-50 MG-325 MG	1							

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
(Aspirin) ADULT ASPIRIN REGIMEN, ASPIRIN 81, ASPIRIN ADULT LOW DOSE, ASPIRIN ADULT LOW STRENGTH, ASPIRIN EC ADULT LOW DOSE, ASPIRIN EC LOW DOSE, ASPIRIN EC LOW STRENGTH, ASPIRIN LOW DOSE, ASPIRIN REGIMEN, BAYER ASPIRIN EC LOW DOSE, BAYER LOW DOSE, CVS ASPIRIN ADULT LOW STRENGTH, CVS ASPIRIN EC, CVS ASPIRIN LOW DOSE, CVS ASPIRIN LOW STRENGTH, ECOTRIN LOW STRENGTH, EQ ASPIRIN ADULT LOW DOSE, EQL ASPIRIN LOW DOSE, FT ASPIRIN LOW DOSE, GNP ASPIRIN, GNP ASPIRIN LOW DOSE, GOODSENSE ASPIRIN LOW DOSE, H-E-B ASPIRIN, HM ASPIRIN EC LOW DOSE, KLS ASPIRIN LOW DOSE, KP ASPIRIN, MM ASPIRIN, PX ENTERIC ASPIRIN, QC ASPIRIN LOW DOSE, RA ASPIRIN EC, RA ASPIRIN EC ADULT LOW ST, SB LOW DOSE ASA EC, SM ASPIRIN ADULT LOW STRENGTH, SM ASPIRIN EC LOW STRENGTH, SM ASPIRIN LOW DOSE, ST JOSEPH ASPIRIN, ST JOSEPH LOW DOSE TBEC 81 MG	PV	PV	(Aspirin) ASPIRIN 81, ASPIRIN CHILDRENS, ASPIRIN LOW DOSE, BAYER LOW DOSE, CHILDRENS ASPIRIN, CVS ASPIRIN ADULT LOW DOSE, EQ ASPIRIN LOW DOSE, EQL ASPIRIN LOW DOSE, FT ASPIRIN, GNP ADULT ASPIRIN LOW STRENGTH, GOODSENSE ASPIRIN, PX ASPIRIN, QC ASPIRIN LOW DOSE, QC CHILDRENS ASPIRIN, RA ASPIRIN ADULT LOW DOSE, RA ASPIRIN ADULT LOW STRENGTH, RA ASPIRIN CHILDRENS, SB CHILDRENS ASPIRIN, SM ASPIRIN LOW DOSE, SM CHILDRENS ASPIRIN, ST JOSEPH LOW DOSE CHEW	PV	PV
			(Aspirin) BAYER ADVANCED ASPIRIN REG ST, BAYER ASPIRIN, CVS ASPIRIN, CVS GENUINE ASPIRIN, EQ ASPIRIN, FT ASPIRIN, GENUINE ASPIRIN, GNP ASPIRIN, GOODSENSE ASPIRIN, GOODSENSE ASPIRIN ADULTS, HM ADULT ASPIRIN, MEDI-FIRST ASPIRIN, MEDIQUE ASPIRIN, PX ASPIRIN, QC ASPIRIN, RA ASPIRIN, RA PAIN RELIEF ASPIRIN, SB ASPIRIN, SM ASPIRIN TABS 325 MG	1	

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
(Aspirin) BAYER ASPIRIN, EQL ASPIRIN EC, FT ENTERIC COATED ASPIRIN, GNP ASPIRIN, GOODSENSE ASPIRIN, HM ASPIRIN, HM ASPIRIN EC, MEIJER ASPIRIN EC, PX ENTERIC ASPIRIN, QC ASPIRIN, QC ENTERIC ASPIRIN, RA ASPIRIN EC, SB ASPIRIN EC, SM ASPIRIN EC TBEC 325 MG	1		DILAUDID TABS <i>(hydromorphone hcl)</i>	GP	
ASCRIPPTIN TABS	3		fentanyl citrate LPOP	1	PA
<i>aspirin CHEW</i>	PV	PV	fentanyl citrate TABS	1	QL(3 EA daily); PA
<i>aspirin TABS 325 MG</i>	1		fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR	1	Limit 15 per month; QL(0.5 EA daily)
<i>aspirin TBEC 325 MG</i>	1		FENTORA TABS <i>(fentanyl citrate)</i>	GP	QL(3 EA daily); PA
<i>aspirin TBEC 81 MG</i>	PV	PV	hydrocodone bitartrate T24A	3	PA
<i>diflunisal TABS</i>	1		hydromorphone hcl LIQD	1	
ECOTRIN ARTHRTIS PAIN TBEC (<i>aspirin</i>)	GP		hydromorphone hcl TABS	1	
ECOTRIN TBEC (<i>aspirin</i>)	GP		hydromorphone hcl TB24 8 MG, 12 MG, 16 MG	1	QL(4 EA daily)
<i>salsalate</i>	1		hydromorphone hcl TB24 32 MG	1	
ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions					
Opioid Agonists					
(Methadone Hcl) METHADONE HCL INTENSOL CONC	1		levorphanol tartrate TABS	1	PA
(Methadone Hcl) METHADOSE TBSO	1		meperidine hcl SOLN PO 50 MG/5ML	1	
(Morphine Sulfate) DURAMORPH SOLN IJ 0.5 MG/ML, 1 MG/ML	SP	PA	meperidine hcl TABS 50 MG	1	
ACTIQ LPOP (<i>fentanyl citrate</i>)	GP	PA	methadone hcl CONC	1	
<i>codeine sulfate TABS</i>	1		methadone hcl SOLN IJ 10 MG/ML	SP	PA
CONZIP CP24 (<i>tramadol hcl</i>)	GP		methadone hcl SOLN PO	1	
DILAUDID LIQD <i>(hydromorphone hcl)</i>	GP		METHADONE HCL SOLN IJ (<i>methadone hcl</i>)	SP	PA
			methadone hcl TABS	1	QL(12 EA daily)
			methadone hcl TBSO	1	
			<i>morphine sulfate beads</i>	1	QL(1 EA daily)
			<i>morphine sulfate CP24 10 MG, 50 MG</i>	1	QL(1 EA daily)
			<i>morphine sulfate CP24 20 MG, 30 MG, 60 MG, 80 MG, 100 MG</i>	1	QL(2 EA daily)

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OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>morphine sulfate SOLN PO 10 MG/5ML, 20 MG/5ML, 20 MG/ML, 100 MG/5ML</i>	1		(Butalbital-Aspirin-Caffeine W/Cod) ASCOMP-CODEINE	1	
<i>morphine sulfate SOLN IJ 0.5 MG/ML, 1 MG/ML</i>	SP	PA	(Oxycodone W/Acetaminophen) ENDOCET TABS 325 MG-10 MG, 325 MG-2.5 MG, 325 MG-5 MG, 325 MG-7.5 MG	1	
<i>morphine sulfate SUPP</i>	1		<i>acetaminophen w/ codeine SOLN</i>	1	
<i>morphine sulfate TABS</i>	1		<i>acetaminophen w/ codeine TABS 15 MG-300 MG, 30 MG-300 MG, 60 MG-300 MG</i>	1	
<i>morphine sulfate TBCR</i>	1	QL(3 EA daily)	<i>butalbital-acetaminophen-caffeine w/ codeine</i>	1	
MS CONTIN TBCR <i>(morphine sulfate)</i>	GP	QL(3 EA daily)	<i>butalbital-aspirin-caffeine w/cod</i>	1	
OXAYDO TABS 7.5 MG	3	QL(4 EA daily)	FIORICET/CODEINE 30 MG-40 MG-50 MG-300 MG <i>(butalbital-acetaminophen-caffeine w/ codeine)</i>	GP	
OXAYDO TABS 5 MG	2		<i>hydrocodone-acetaminophen SOLN</i>	1	
<i>oxycodone hcl CAPS</i>	1		<i>hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG, 325 MG-10 MG, 325 MG-2.5 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	1	
<i>oxycodone hcl CONC 100 MG/5ML</i>	1		<i>hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG, 7.5 MG-200 MG</i>	1	
<i>oxycodone hcl T12A 10 MG, 20 MG, 40 MG, 80 MG</i>	3	QL(3 EA daily); PA	LORTAB ELIX	3	
<i>oxycodone hcl TABS</i>	1		NALOCET TABS	3	
<i>oxymorphone hcl TABS</i>	1		<i>oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-2.5 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	1	
<i>oxymorphone hcl TB12 5 MG, 10 MG, 20 MG, 40 MG</i>	1	QL(2 EA daily)	OXYCODONE-ACETAMINOPHEN TABS	3	
QDOLO SOLN <i>(tramadol hcl)</i>	GP				
ROXICODONE TABS 15 MG, 30 MG <i>(oxycodone hcl)</i>	GP				
SUBSYS LIQD	3	PA			
<i>tramadol hcl CP24 100 MG, 200 MG, 300 MG</i>	1				
<i>tramadol hcl SOLN</i>	1				
TRAMADOL HCL SOLN <i>(tramadol hcl)</i>	GP				
<i>tramadol hcl TABS 50 MG</i>	1	QL(8 EA daily)			
<i>tramadol hcl TABS 100 MG</i>	1				
<i>tramadol hcl TB24</i>	1				
Opioid Combinations					

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PERCOCET TABS 325 MG-10 MG, 325 MG-2.5 MG, 325 MG-5 MG, 325 MG-7.5 MG (<i>oxycodone w/ acetaminophen</i>)	GP		Hormones		
PROLATE TABS	3		Anabolic Steroids		
<i>tramadol-acetaminophen</i>	1		<i>oxandrolone</i>	1	
Opioid Partial Agonists			Androgens		
BELBUCA FILM	3	QL(2 EA daily)	(Methyltestosterone) METHITEST TABS	1	
BRIXADI (WEEKLY) SOSY	3		(Testosterone Cypionate) DEPO-TESTOSTERONE SOLN IM 200 MG/ML	1	
BRIXADI SOSY 64 MG/0.18ML, 96 MG/0.27ML, 128 MG/0.36ML	3		(Testosterone Cypionate) DEPO-TESTOSTERONE SOLN IM 100 MG/ML	SP	
BUPRENEX SOLN (<i>buprenorphine hcl</i>)	SP	PA	ANDROGEL PUMP GEL TD (<i>testosterone</i>)	GP	QL(10 GM daily)
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL</i>	1		<i>danazol CAPS</i>	1	
<i>buprenorphine hcl-naloxone hcl dihydrate SUBL</i>	1		FORTESTA GEL TD (<i>testosterone</i>)	GP	QL(4 GM daily)
<i>buprenorphine hcl SOLN</i>	SP	PA	<i>methyltestosterone CAPS</i>	1	
<i>buprenorphine hcl SUBL</i>	1		<i>testosterone cypionate SOLN IM 200 MG/ML</i>	1	
<i>buprenorphine PTWK</i>	1	Limit 4 per month; QL(0.15 EA daily)	<i>testosterone cypionate SOLN IM 100 MG/ML</i>	SP	
<i>butorphanol tartrate NA 10 MG/ML</i>	1	Limit 7.5mls per month; QL(0.25 ML daily)	<i>testosterone enanthate SOLN IM</i>	SP	
BUTTRANS PTWK (<i>buprenorphine</i>)	GP	Limit 4 per month; QL(0.15 EA daily)	<i>testosterone GEL TD</i>	1	QL(10 GM daily)
<i>pentazocine w/ naloxone hcl</i>	1		<i>testosterone GEL TD 10 MG/ACT</i>	1	QL(4 GM daily)
SUBLOCADE SOSY	3		<i>testosterone SOLN</i>	1	QL(6 ML daily)
SUBOXONE FILM SL (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	GP		ANORECTAL AND RELATED PRODUCTS - Rectal Drugs to Treat Pain, Swelling and Itching		
ZUBSOLV SUBL	3		Intrarectal Steroids		
ANDROGENS-ANABOLIC - Drugs to Regulate			<i>budesonide (intrarectal)</i>	1	PA
			CORTENEMA (<i>hydrocortisone (intrarectal)</i>)	GP	
			CORTIFOAM EX 10 %	2	
			<i>hydrocortisone (intrarectal)</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
UCERIS (<i>budesonide (intrarectal)</i>)	GP	PA	ANTHELMINTICS - Drugs to Treat Worm Infections		
Rectal Combinations					
ANALPRAM-HC CREA EX 1 %-1 % (<i>hydrocortisone acetate w/ pramoxine</i>)	GP		Anthelmintics		
ANALPRAM-HC LOTN EX	3		<i>albendazole</i>	1	
<i>hydrocortisone acetate w/ pramoxine CREA EX</i>	1		BENZNIDAZOLE	3	AL(At least 2 yrs old - Up to 12 yrs old)
<i>lidocaine-hydrocortisone acetate (rectal) KIT 2.5 %-3 %</i>	1		BILTRICIDE (<i>praziquantel</i>)	GP	
PROCORT CREA EX	3		EMVERM CHEW	3	QL(6 EA per fill retail; 6 per fill mail)
PROCTOFOAM HC FOAM EX	2		<i>ivermectin</i>	1	PA
Rectal Steroids			IVERMECTIN 6 MG	3	
(Hydrocortisone (Rectal)) PROCTO-MED HC, PROCTOSOL HC, PROCTOZONE-HC EX 2.5 %	1		<i>praziquantel</i>	1	
(Hydrocortisone Acetate (Rectal)) ANUCORT-HC, ANUSOL-HC, HEMMOREX-HC 25 MG	1		STROMECTOL (<i>ivermectin</i>)	GP	PA
(Hydrocortisone Acetate (Rectal)) ANUCORT-HC, ANUSOL-HC, HEMMOREX-HC	1		ANTIANGINAL AGENTS - Drugs to Treat Chest Pain		
ANUSOL-HC EX (<i>hydrocortisone (rectal)</i>)	GP		Antianginals-Other		
<i>hydrocortisone (rectal) EX 2.5 %</i>	1		<i>ranolazine TB12 1000 MG</i>	1	
<i>hydrocortisone acetate (rectal)</i>	1		<i>ranolazine TB12 500 MG</i>	1	QL(4 EA daily)
PROCTOCORT (<i>hydrocortisone acetate (rectal)</i>)	GP		Nitrates		
Vasodilating Agents			(Nitroglycerin) NITRO-TIME CPCR 2.5 MG, 9 MG	1	
<i>nitroglycerin (intra-anal)</i>	1		GONITRO PACK	3	PA
RECTIV (<i>nitroglycerin (intra-anal)</i>)	GP		ISORDIL TITRADOSE TABS (<i>isosorbide dinitrate</i>)	GP	
			<i>isosorbide dinitrate TABS</i>	1	
			<i>isosorbide mononitrate TABS</i>	1	
			ISOSORBIDE MONONITRATE TABS	2	
			<i>isosorbide mononitrate TB24</i>	1	
			NITRO-BID OINT	2	
			NITRO-DUR PT24	2	QL(1 EA daily)

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
NITRO-DUR PT24 <i>(nitroglycerin)</i>	GP	QL(1 EA daily)	<i>clorazepate dipotassium TABS</i>	1	
<i>nitroglycerin PT24</i>	1	QL(1 EA daily)	<i>diazepam CONC</i>	1	
<i>nitroglycerin SOLN TL 0.4 MG/SPRAY</i>	1		<i>diazepam SOLN PO 5 MG/5ML</i>	1	
<i>nitroglycerin SUBL</i>	1		<i>diazepam TABS</i>	1	
NITROLINGUAL SOLN TL <i>(nitroglycerin)</i>	GP		<i>lorazepam CONC</i>	1	
NITROSTAT SUBL <i>(nitroglycerin)</i>	GP		<i>lorazepam TABS</i>	1	
ANTIANXIETY AGENTS - Drugs to Treat Anxiety			<i>oxazepam CAPS</i>	1	
Antianxiety Agents - Misc.			VALIUM TABS <i>(diazepam)</i>	GP	
<i>buspirone hcl</i>	1		XANAX XR TB24 <i>(alprazolam)</i>	GP	
<i>hydroxyzine hcl SOLN 25 MG/ML, 50 MG/ML</i>	SP	PA	XANAX TABS <i>(alprazolam)</i>	GP	
<i>hydroxyzine hcl SYRP</i>	1		ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms		
<i>hydroxyzine hcl TABS</i>	1		Antiarrhythmics Type I-A		
<i>hydroxyzine pamoate CAPS</i>	1		<i>disopyramide phosphate CAPS</i>	1	
<i>meprobamate</i>	1		<i>procainamide hcl SOLN</i>	SP	PA
VISTARIL CAPS <i>(hydroxyzine pamoate)</i>	GP		<i>quinidine gluconate TBCR</i>	1	
Benzodiazepines			<i>quinidine sulfate TABS</i>	1	
(Alprazolam) ALPRAZOLAM XR TB24	1		Antiarrhythmics Type I-B		
(Diazepam) DIAZEPAM INTENSOL CONC	1		<i>mexiletine hcl</i>	1	
(Lorazepam) LORAZEPAM INTENSOL CONC	1		Antiarrhythmics Type I-C		
ALPRAZOLAM INTENSOL CONC	3		<i>flecainide acetate</i>	1	
<i>alprazolam TABS</i>	1		<i>propafenone hcl CP12</i>	1	
<i>alprazolam TB24</i>	1		<i>propafenone hcl TABS 150 MG</i>	1	QL(6 EA daily)
<i>alprazolam TBDP</i>	1		<i>propafenone hcl TABS 225 MG, 300 MG</i>	1	QL(3 EA daily)
ATIVAN TABS <i>(lorazepam)</i>	GP		RYTHMOL SR CP12 <i>(propafenone hcl)</i>	GP	
<i>chlordiazepoxide hcl CAPS</i>	1		Antiarrhythmics Type III		
			(Amiodarone Hcl) PACERONE TABS	1	
			<i>amiodarone hcl TABS</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits			
dofetilide	1		montelukast sodium TABS	1	QL(1 EA daily)			
TIKOSYN (dofetilide)	GP		SINGULAIR CHEW (montelukast sodium)	GP	QL(1 EA daily)			
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions								
Antiasthmatic - Monoclonal Antibodies								
FASENRA PEN SOAJ	SP	PA	zafirlukast	1				
NUCALA SOAJ	SP	PA	zileuton TB12	1	ST			
NUCALA SOSY 100 MG/ML	SP	PA	ZYFLO TABS	3	ST			
XOLAIR SOLR	SP	PA	Selective Phosphodiesterase 4 (PDE4) Inhibitors					
XOLAIR SOSY 75 MG/0.5ML, 150 MG/ML	SP	PA	DALIRESP (roflumilast)	GP	QL(1 EA daily)			
Anti-Inflammatory Agents			roflumilast	1	QL(1 EA daily)			
cromolyn sodium NEBU	1		Steroid Inhalants					
Bronchodilators - Anticholinergics			ARNUITY ELLIPTA	2	QL(1 EA daily)			
ATROVENT HFA	2	Limit 2 inhalers per month; QL(0.86 GM daily)	budesonide (inhalation) SUSP 0.5 MG/2ML	1	QL(4 ML daily)			
INCRUSE ELLIPTA	2	Limit 1 inhaler per month; QL(1 EA daily)	budesonide (inhalation) SUSP 1 MG/2ML	1	QL(2 ML daily)			
ipratropium bromide SOLN 0.02 %	1		budesonide (inhalation) SUSP 0.25 MG/2ML	1	QL(8 ML daily)			
SPIRIVA HANDIHALER CAPS (<i>tiotropium bromide monohydrate</i>)	GP	QL(1 EA daily)	fluticasone propionate hfa 44 MCG/ACT	1	Limit 1 inhaler per month; QL(0.36 GM daily)			
SPIRIVA RESPIMAT AERS	2	Limit 1 inhaler per month; QL(0.14 GM daily)	PULMICORT FLEXHALER AEPB 180 MCG/ACT	2	Limit 2 inhalers per month; QL(0.07 EA daily)			
tiotropium bromide monohydrate CAPS	1	QL(1 EA daily)	PULMICORT FLEXHALER AEPB 90 MCG/ACT	2	Limit 2 inhalers per month; QL(0.27 EA daily)			
Leukotriene Modulators			PULMICORT SUSP 0.5 MG/2ML (budesonide inhalation)	GP	QL(4 ML daily)			
ACCOLATE (zafirlukast)	GP		PULMICORT SUSP 1 MG/2ML (budesonide inhalation)	GP	QL(2 ML daily)			
montelukast sodium CHEW	1	QL(1 EA daily)	QVAR REDIHALER 80 MCG/ACT	2	Limit 2 Inhalers per month; QL(0.72 GM daily)			
montelukast sodium PACK	1	QL(1 EA daily)						

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
QVAR REDIHALER 40 MCG/ACT	2	Limit 1 inhaler per month; QL(0.36 GM daily)	DULERA 100 MCG/ACT-5 MCG/ACT, 200 MCG/ACT-5 MCG/ACT	3	Limit 1 inhaler per month; QL(0.45 GM daily); PA
Sympathomimetics					
(Budesonide-Formoterol Fumarate Dihydrate) BREYNA	1	Limit 1 inhaler per month; QL(0.35 GM daily)	DULERA 50 MCG/ACT-5 MCG/ACT	3	PA
(Fluticasone-Salmeterol) WIXELA INHUB AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT	1	QL(2 EA daily)	<i>fluticasone furoate-vilanterol 100 MCG/INH-25 MCG/INH</i>	1	Limit 1 inhaler per month; QL(2 EA daily)
ADVAIR DISKUS AEPB (<i>fluticasone-salmeterol</i>)	GP	QL(2 EA daily)	<i>fluticasone furoate-vilanterol 200 MCG/INH-25 MCG/INH</i>	1	QL(2 EA daily)
<i>albuterol sulfate AERS</i>	1	Limit 2 inhalers per month; 2 package(s) per 31 day(s) retail	<i>fluticasone-salmeterol AERO</i>	1	Limit 1 inhaler per month; QL(0.4 GM daily)
<i>albuterol sulfate NEBU</i>	1		<i>formoterol fumarate NEBU</i>	1	QL(4 ML daily)
ALBUTEROL SULFATE NEBU	2		<i>ipratropium-albuterol SOLN</i>	1	
<i>albuterol sulfate SYRP</i>	1		<i>levalbuterol hcl</i>	1	
<i>albuterol sulfate TABS</i>	1		<i>levalbuterol tartrate</i>	1	Limit 2 inhalers per month; QL(1 GM daily)
ANORO ELLIPTA	2	QL(2 EA daily)	PERFOROMIST NEBU (<i>formoterol fumarate</i>)	GP	QL(4 ML daily)
<i>arformoterol tartrate</i>	1	QL(4 ML daily)	PROAIR RESPICLICK AEPB	3	Limit 2 inhalers per month; QL(0.07 EA daily)
BREO ELLIPTA 50 MCG/INH-25 MCG/INH	2	Limit 1 inhaler per month; QL(2 EA daily)	PROVENTIL HFA AERS (<i>albuterol sulfate</i>)	GP	Limit 2 inhalers per month; 2 package(s) per 31 day(s) retail
BREZTRI AEROSPHERE	2	QL(0.36 GM daily)	SEREVENT DISKUS	2	QL(2 EA daily)
BROVANA (<i>arformoterol tartrate</i>)	GP	QL(4 ML daily)	STIOLTO RESPIMAT	2	Limit 1 inhaler per month; QL(0.14 GM daily)
<i>budesonide-formoterol fumarate dihydrate</i>	1	Limit 1 inhaler per month; QL(0.35 GM daily)			
COMBIVENT RESPIMAT AERS	3	Limit 1 inhaler per month; QL(0.2 GM daily)			

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits	
STRIVERDI RESPIMAT	2	Limit 1 inhaler per month; QL(0.14 GM daily)	<i>rivaroxaban TABS 2.5 MG</i>	1	QL(1 EA daily)	
<i>terbutaline sulfate TABS</i>	1		XARELTO STARTER PACK TBPK	2	QL(51 EA per 365 day(s) retail)	
TRELEGY ELLIPTA 200 MCG/INH-25 MCG/INH-62.5 MCG/INH	2	1 inhaler per month; QL(2 EA daily)	XARELTO SUSR	2	QL(900 ML per 30 day(s) retail)	
TRELEGY ELLIPTA 100 MCG/ACT-25 MCG/ACT-62.5 MCG/ACT	2	QL(2 EA daily)	XARELTO TABS 2.5 MG (<i>rivaroxaban</i>)	GP	QL(1 EA daily)	
VENTOLIN HFA AERS (<i>albuterol sulfate</i>)	GP	Limit 2 inhalers per month; 2 package(s) per 31 day(s) retail	XARELTO TABS 10 MG, 15 MG, 20 MG	2	QL(1 EA daily)	
XOPENEX (<i>levalbuterol hcl</i>)	GP		Heparins And Heparinoid-Like Agents			
XOPENEX CONCENTRATE (<i>levalbuterol hcl</i>)	GP		ARIIXTRA (<i>fondaparinux sodium</i>)	SP	PA	
XOPENEX HFA (<i>levalbuterol tartrate</i>)	GP	Limit 2 inhalers per month; QL(1 GM daily)	<i>enoxaparin sodium SOLN IJ 300 MG/3ML</i>	SP	QL(3 ML per 10 day(s) retail)	
Xanthines			<i>enoxaparin sodium SOSY 40 MG/0.4ML</i>	SP	QL(8 ML per 10 day(s) retail)	
(Theophylline) ELIXOPHYLLIN ELIX	1		<i>enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML</i>	SP	QL(16 ML per 10 day(s) retail)	
<i>aminophylline SOLN</i>	SP	PA	<i>enoxaparin sodium SOSY 30 MG/0.3ML</i>	SP		
THEO-24 CP24	2		<i>enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML</i>	SP	QL(20 ML per 10 day(s) retail)	
<i>theophylline ELIX</i>	1		<i>enoxaparin sodium SOSY 60 MG/0.6ML</i>	SP	QL(12 ML per 10 day(s) retail)	
<i>theophylline SOLN</i>	1		<i>fondaparinux sodium</i>	SP	PA	
<i>theophylline TB12</i>	1		FRAGMIN SOLN 95000 UNIT/3.8ML	SP	PA	
<i>theophylline TB24</i>	1		FRAGMIN SOSY 12500 UNIT/0.5ML	SP	QL(10 ML per 365 day(s) retail)	
ANTICOAGULANTS - Blood Thinners			FRAGMIN SOSY 15000 UNIT/0.6ML	SP	QL(12 ML per 365 day(s) retail)	
Coumarin Anticoagulants			FRAGMIN SOSY 18000 UNT/0.72ML	SP	QL(14 ML per 365 day(s) retail)	
(Warfarin Sodium) JANTOVEN TABS	1		FRAGMIN SOSY 7500 UNIT/0.3ML	SP	QL(6 ML per 365 day(s) retail)	
<i>warfarin sodium TABS</i>	1		FRAGMIN SOSY 10000 UNIT/ML	SP	QL(20 ML per 365 day(s) retail)	
Direct Factor Xa Inhibitors						
ELIQUIS DVT/PE STARTER PACK TBPK	2	QL(2 EA daily)				
ELIQUIS TABS	2	QL(2 EA daily)				

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits	
FRAGMIN SOSY 2500 UNIT/0.2ML, 5000 UNIT/0.2ML	SP	QL(4 ML per 365 day(s) retail)	FYCOMPA SUSP	3		
HEPARIN (PORCINE) IN NACL SOLN IV 0.45 %-12500 UNIT/250ML, 0.45 %-25000 UNIT/250ML, 0.45 %-25000 UNIT/500ML	SP		FYCOMPA TABS	3		
<i>heparin (porcine) in sodium chloride SOLN IV 0.9 %-1000 UNIT/500ML, 0.9 %-2000 UNIT/L</i>	SP		Anticonvulsants - Benzodiazepines			
<i>heparin sodium (porcine) SOLN IJ 1000 UNIT/ML, 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML</i>	SP		<i>clobazam SUSP</i>	1		
LOVENOX SOLN IJ 300 MG/3ML (<i>enoxaparin sodium</i>)	SP	QL(3 ML per 10 day(s) retail)	<i>clobazam TABS</i>	1		
LOVENOX SOSY 100 MG/ML, 150 MG/ML (<i>enoxaparin sodium</i>)	SP	QL(20 ML per 10 day(s) retail)	<i>clonazepam TABS</i>	1		
LOVENOX SOSY 30 MG/0.3ML (<i>enoxaparin sodium</i>)	SP		<i>clonazepam TBDP</i>	1		
LOVENOX SOSY 60 MG/0.6ML (<i>enoxaparin sodium</i>)	SP	QL(12 ML per 10 day(s) retail)	DIASTAT ACUDIAL GEL (<i>diazepam (anticonvulsant)</i>)	GP	Limit 4 per month; QL(0.14 EA daily)	
LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML (<i>enoxaparin sodium</i>)	SP	QL(16 ML per 10 day(s) retail)	DIASTAT PEDIATRIC GEL (<i>diazepam (anticonvulsant)</i>)	GP	Limit 4 per month; QL(0.14 EA daily)	
LOVENOX SOSY 40 MG/0.4ML (<i>enoxaparin sodium</i>)	SP	QL(8 ML per 10 day(s) retail)	<i>diazepam (anticonvulsant) GEL</i>	1	Limit 4 per month; QL(0.14 EA daily)	
Thrombin Inhibitors			KLONOPIN TABS (<i>clonazepam</i>)	GP		
<i>dabigatran etexilate mesylate CAPS</i>	1		NAYZILAM	SP	QL(10 EA per 30 day(s) retail); PA	
ANTICONVULSANTS - Drugs to Treat Seizures			ONFI SUSP (<i>clobazam</i>)	GP		
AMPA Glutamate Receptor Antagonists			ONFI TABS (<i>clobazam</i>)	GP		
Anticonvulsants - Misc.			VALTOCO 10 MG DOSE LIQD	SP	QL(10 EA per 30 day(s) retail); PA	
			VALTOCO 15 MG DOSE LQPK 7.5 MG/0.1ML	SP	QL(10 EA per 30 day(s) retail); PA	
			VALTOCO 20 MG DOSE LQPK 10 MG/0.1ML	SP	QL(10 EA per 30 day(s) retail); PA	
			VALTOCO 5 MG DOSE LIQD	SP	QL(10 EA per 30 day(s) retail); PA	

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
(Lamotrigine) SUBVENITE STARTER KIT-BLUE, SUBVENITE STARTER KIT-GREEN, SUBVENITE STARTER KIT-ORANGE KIT 25 MG	1		KEPPRA SOLN PO 100 MG/ML (<i>levetiracetam</i>)	3	
(Lamotrigine) SUBVENITE TABS	1		KEPPRA SOLN IV 500 MG/5ML (<i>levetiracetam</i>)	SP	PA
(Levetiracetam) ROWEEPRA TABS 500 MG	1		KEPPRA TABS (<i>levetiracetam</i>)	3	
APTIOM 200 MG, 400 MG, 600 MG	3	QL(2 EA daily); ST	<i>lacosamide SOLN PO 10 MG/ML, 50 MG/5ML, 100 MG/10ML</i>	1	
APTIOM 800 MG	3	QL(1 EA daily); ST	<i>lacosamide TABS</i>	1	QL(1 EA daily)
BANZEL SUSP (<i>rufinamide</i>)	GP		LAMICTAL ODT KIT (<i>lamotrigine</i>)	GP	PA
BANZEL TABS (<i>rufinamide</i>)	GP		LAMICTAL ODT TBDP (<i>lamotrigine</i>)	3	PA
<i>carbamazepine CHEW 100 MG</i>	1		LAMICTAL STARTER KIT 25 MG (<i>lamotrigine</i>)	GP	
<i>carbamazepine CP12</i>	1		LAMICTAL XR KIT	3	
<i>carbamazepine SUSP</i>	1		LAMICTAL CHEW (<i>lamotrigine</i>)	3	
<i>carbamazepine TABS</i>	1		LAMICTAL TABS (<i>lamotrigine</i>)	3	
<i>carbamazepine TB12</i>	1		<i>lamotrigine CHEW</i>	1	
CARBATROL CP12 (<i>carbamazepine</i>)	3		<i>lamotrigine KIT</i>	1	PA
DIACOMIT CAPS 500 MG	SP	QL(6 EA daily); PA	<i>lamotrigine KIT 25 MG</i>	1	
DIACOMIT CAPS 250 MG	SP	QL(12 EA daily); PA	<i>lamotrigine TABS</i>	1	
DIACOMIT PACK 250 MG	SP	QL(12 EA daily); PA	<i>lamotrigine TB24 250 MG, 300 MG</i>	1	QL(2 EA daily)
DIACOMIT PACK 500 MG	SP	QL(6 EA daily); PA	<i>lamotrigine TB24 25 MG, 50 MG, 100 MG, 200 MG</i>	1	QL(1 EA daily)
EPIDIOLEX	SP	PA	<i>lamotrigine TBDP</i>	1	PA
<i>gabapentin CAPS</i>	1		<i>levetiracetam SOLN IV 500 MG/5ML</i>	SP	PA
<i>gabapentin SOLN</i>	1		<i>levetiracetam SOLN PO 100 MG/ML, 500 MG/5ML</i>	1	
<i>gabapentin TABS 600 MG, 800 MG</i>	1		<i>levetiracetam TABS</i>	1	
KEPPRA XR TB24 (<i>levetiracetam</i>)	3		<i>levetiracetam TB24</i>	1	
			LYRICA CAPS 150 MG, 225 MG, 300 MG (<i>pregabalin</i>)	3	QL(2 EA daily); PA

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
LYRICA CAPS 25 MG, 50 MG, 75 MG, 100 MG, 200 MG (<i>pregabalin</i>)	3	QL(3 EA daily); PA	<i>topiramate CP24</i>	1	PA
LYRICA SOLN (<i>pregabalin</i>)	3	PA	<i>topiramate CPSP 15 MG, 25 MG</i>	1	
MYSOLINE (<i>primidone</i>)	3		<i>topiramate CS24</i>	1	PA
NEURONTIN CAPS (<i> gabapentin</i>)	3		<i>topiramate TABS</i>	1	
NEURONTIN SOLN (<i> gabapentin</i>)	3		TRILEPTAL SUSP (<i>oxcarbazepine</i>)	3	
NEURONTIN TABS (<i> gabapentin</i>)	3		TRILEPTAL TABS (<i>oxcarbazepine</i>)	3	
<i>oxcarbazepine SUSP</i>	1		TROKENDI XR CP24 (<i>topiramate</i>)	GP	PA
<i>oxcarbazepine TABS</i>	1		VIMPAT SOLN PO 10 MG/ML (<i>lacosamide</i>)	GP	
<i>oxcarbazepine TB24</i>	1		VIMPAT TABS (<i>lacosamide</i>)	GP	QL(1 EA daily)
OXTELLAR XR TB24 (<i>oxcarbazepine</i>)	GP		ZONEGRAN CAPS 25 MG, 100 MG (<i>zonisamide</i>)	3	
<i>pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 200 MG</i>	1	QL(3 EA daily); PA	<i>zonisamide CAPS</i>	1	
<i>pregabalin CAPS 150 MG, 225 MG, 300 MG</i>	1	QL(2 EA daily); PA	Carbamates		
<i>pregabalin SOLN</i>	1	PA	<i>felbamate SUSP</i>	1	
<i>primidone 50 MG, 250 MG</i>	1		<i>felbamate TABS</i>	1	
QUDEXY XR CS24 (<i>topiramate</i>)	GP	PA	FELBATOL SUSP (<i>felbamate</i>)	3	
<i>rufinamide SUSP</i>	1		FELBATOL TABS (<i>felbamate</i>)	3	
<i>rufinamide TABS</i>	1		GABA Modulators		
TEGRETOL SUSP (<i> carbamazepine</i>)	3		(Vigabatrin) VIGADRONE, VIGPODER PACK	1	
TEGRETOL TABS (<i> carbamazepine</i>)	3		(Vigabatrin) VIGADRONE TABS	1	
TEGRETOL-XR TB12 100 MG (<i> carbamazepine</i>)	GP		<i>GABITRIL (tiagabine hcl)</i>	3	
TEGRETOL-XR TB12 200 MG, 400 MG (<i> carbamazepine</i>)	3		SABRIL PACK (<i>vigabatrin</i>)	GP	
TOPAMAX SPRINKLE CPSP (<i>topiramate</i>)	3		SABRIL TABS (<i>vigabatrin</i>)	GP	
TOPAMAX TABS (<i>topiramate</i>)	3		<i>tiagabine hcl</i>	1	
			<i>vigabatrin PACK</i>	1	
			<i>vigabatrin TABS</i>	1	

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits			
Hydantoins								
(Phenytoin Sodium Extended) PHENYTEK 200 MG, 300 MG	1		DEPAKOTE SPRINKLES CSDR (<i>divalproex sodium</i>)	3				
(Phenytoin) PHENYTOIN INFATABS CHEW	1		DEPAKOTE TBEC (<i>divalproex sodium</i>)	3				
CEREBYX 100 MG PE/2ML (<i>fosphenytoin sodium</i>)	SP	PA	<i>divalproex sodium CSDR</i>	1				
DILANTIN (<i>phenytoin sodium extended</i>)	3		<i>divalproex sodium TB24</i>	1				
DILANTIN 30 MG	2		<i>divalproex sodium TBEC</i>	1				
DILANTIN INFATABS CHEW (<i>phenytoin</i>)	3		<i>valproic acid CAPS</i>	1				
DILANTIN-125 SUSP (<i>phenytoin</i>)	3		ANTIDEPRESSANTS - Drugs to Treat Depression					
DILANTIN SUSP (<i>phenytoin</i>)	3		Alpha-2 Receptor Antagonists (Tetracyclines)					
<i>fosphenytoin sodium 100 MG PE/2ML</i>	SP	PA	<i>mirtazapine TABS</i>	1				
<i>phenytoin sodium extended 100 MG, 200 MG, 300 MG</i>	1		<i>mirtazapine TBDP</i>	1				
<i>phenytoin sodium SOLN</i>	SP	PA	REMERON SOLTAB TBDP (<i>mirtazapine</i>)	GP				
<i>phenytoin CHEW</i>	1		REMERON TABS 15 MG, 30 MG (<i>mirtazapine</i>)	GP				
<i>phenytoin SUSP</i>	1		Antidepressants - Misc.					
Succinimides								
CELONTIN (<i>methsuximide</i>)	GP		APLENZIN	3	QL(1 EA daily); ST			
<i>ethosuximide CAPS</i>	1		<i>bupropion hcl TABS</i>	1				
<i>ethosuximide SOLN</i>	1		<i>bupropion hcl TB12</i>	1				
<i>methsuximide</i>	1		<i>bupropion hcl TB24 150 MG, 300 MG</i>	1	QL(1 EA daily)			
ZARONTIN CAPS (<i>ethosuximide</i>)	3		<i>bupropion hcl TB24 450 MG</i>	1	QL(1 EA daily); ST			
ZARONTIN SOLN (<i>ethosuximide</i>)	3		FORFIVO XL TB24 (<i>bupropion hcl</i>)	GP	QL(1 EA daily); ST			
Valproic Acid								
DEPAKOTE ER TB24 (<i>divalproex sodium</i>)	3		WELLBUTRIN SR TB12 (<i>bupropion hcl</i>)	GP				
Monoamine Oxidase Inhibitors (MAOIs)								
EMSAM	3	QL(1 EA daily)	WELLBUTRIN XL TB24 (<i>bupropion hcl</i>)	GP	QL(1 EA daily)			
MARPLAN	3		Monoamine Oxidase Inhibitors (MAOIs)					
NARDIL (<i>phenelzine sulfate</i>)	GP		EMSAM	3	QL(1 EA daily)			
PARNATE (<i>tranylcypromine sulfate</i>)	GP		MARPLAN	3				

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>phenelzine sulfate</i>	1		PAXIL TABS (<i>paroxetine hcl</i>)	GP	
<i>tranylcypromine sulfate</i>	1		PEXEVA 10 MG, 20 MG, 30 MG	3	
Selective Serotonin Reuptake Inhibitors (SSRIs)					
CELEXA TABS 10 MG (<i>citalopram hydrobromide</i>)	GP	QL(4 EA daily)	PROZAC CAPS (<i>fluoxetine hcl</i>)	GP	
CELEXA TABS 20 MG (<i>citalopram hydrobromide</i>)	GP	QL(2 EA daily)	<i>sertraline hcl CONC</i>	1	
CELEXA TABS 40 MG (<i>citalopram hydrobromide</i>)	GP	QL(1 EA daily)	<i>sertraline hcl TABS</i>	1	
<i>citalopram hydrobromide SOLN</i>	1	QL(20 ML daily)	ZOLOFT CONC (<i>sertraline hcl</i>)	GP	
<i>citalopram hydrobromide TABS 40 MG</i>	1	QL(1 EA daily)	ZOLOFT TABS (<i>sertraline hcl</i>)	GP	
<i>citalopram hydrobromide TABS 20 MG</i>	1	QL(2 EA daily)	Serotonin Modulators		
<i>citalopram hydrobromide TABS 10 MG</i>	1	QL(4 EA daily)	<i>nefazodone hcl</i>	1	
<i>escitalopram oxalate SOLN</i>	1		<i>trazodone hcl TABS</i>	1	
<i>escitalopram oxalate TABS</i>	1		TRINTELLIX	3	QL(1 EA daily); ST
<i>fluoxetine hcl CAPS</i>	1		VIIBRYD STARTER PACK KIT	3	
<i>fluoxetine hcl CPDR</i>	1		VIIBRYD TABS (<i>vilazodone hcl</i>)	GP	
<i>fluoxetine hcl SOLN</i>	1		<i>vilazodone hcl TABS</i>	1	
<i>fluoxetine hcl TABS 10 MG, 20 MG</i>	1		Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)		
<i>fluoxetine hcl TABS 60 MG</i>	1	QL(1 EA daily); ST	CYMBALTA CPEP (<i>duloxetine hcl</i>)	GP	QL(2 EA daily)
FLUOXETINE HCL TABS (<i>fluoxetine hcl</i>)	GP	QL(1 EA daily); ST	DESVENLAFAKINE ER	3	QL(1 EA daily); ST
<i>fluvoxamine maleate CP24</i>	1		<i>desvenlafaxine succinate</i>	1	
<i>fluvoxamine maleate TABS</i>	1		<i>duloxetine hcl CPEP 20 MG, 30 MG, 60 MG</i>	1	QL(2 EA daily)
LEXAPRO TABS (<i>escitalopram oxalate</i>)	GP		EFFEXOR XR CP24 37.5 MG, 75 MG (<i>venlafaxine hcl</i>)	GP	QL(1 EA daily)
<i>paroxetine hcl TABS</i>	1		FETZIMA TITRATION C4PK	3	ST
<i>paroxetine hcl TB24</i>	1		FETZIMA CP24 40 MG, 80 MG, 120 MG	3	QL(1 EA daily); ST
PAXIL CR TB24 (<i>paroxetine hcl</i>)	GP		FETZIMA CP24 20 MG	3	QL(2 EA daily); ST

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>venlafaxine hcl CP24 37.5 MG, 75 MG</i>	1	QL(1 EA daily)	<i>dapagliflozin propanediol-metformin hcl 1000 MG-5 MG</i>	1	QL(2 EA daily)
<i>venlafaxine hcl CP24 150 MG</i>	1	QL(2 EA daily)	<i>DUETACT (pioglitazone hcl-glimepiride)</i>	GP	
<i>venlafaxine hcl TABS</i>	1		<i>glipizide-metformin hcl</i>	1	
<i>venlafaxine hcl TB24</i>	1		<i>glyburide-metformin</i>	1	
Tricyclic Agents			<i>GLYXAMBI</i>	2	
<i>amitriptyline hcl TABS</i>	1		<i>JANUMET XR TB24</i>	2	QL(1 EA daily)
<i>amoxapine</i>	1		<i>JANUMET TABS</i>	2	QL(1 EA daily)
<i>ANAFRANIL (clomipramine hcl)</i>	GP		<i>pioglitazone hcl-glimepiride</i>	1	
<i>clomipramine hcl</i>	1		<i>pioglitazone hcl-metformin hcl TABS</i>	1	
<i>desipramine hcl TABS</i>	1		<i>saxagliptin-metformin hcl</i>	1	
<i>doxepin hcl CAPS</i>	1		<i>SOLIQUA</i>	SP	PA
<i>doxepin hcl CONC</i>	1		<i>SYNJARDY XR TB24 1000 MG-10 MG, 1000 MG-25 MG</i>	2	QL(1 EA daily)
<i>imipramine hcl TABS</i>	1		<i>SYNJARDY XR TB24 1000 MG-12.5 MG, 1000 MG-5 MG</i>	2	QL(2 EA daily)
<i>imipramine pamoate</i>	1		<i>SYNJARDY TABS</i>	2	QL(2 EA daily)
<i>NORPRAMIN TABS 10 MG, 25 MG (desipramine hcl)</i>	GP		<i>TRIJARDY XR</i>	2	
<i>nortriptyline hcl CAPS</i>	1		<i>XIGDUO XR (dapagliflozin propanediol-metformin hcl)</i>	2	QL(1 EA daily)
<i>PAMELOR CAPS (nortriptyline hcl)</i>	GP		<i>XIGDUO XR 1000 MG-10 MG, 500 MG-10 MG, 500 MG-5 MG</i>	2	QL(1 EA daily)
<i>protriptyline hcl</i>	1		<i>XIGDUO XR (dapagliflozin propanediol-metformin hcl)</i>	2	QL(2 EA daily)
<i>trimipramine maleate CAPS</i>	1		<i>XIGDUO XR 1000 MG-2.5 MG, 1000 MG-5 MG</i>	2	QL(2 EA daily)
ANTIDIABETICS - Drugs to Regulate Blood Sugar					
Alpha-Glucosidase Inhibitors					
<i>acarbose</i>	1		<i>XULTOPHY</i>	SP	PA
<i>miglitol</i>	1		Biguanides		
Antidiabetic Combinations					
<i>ACTOPLUS MET TABS 850 MG-15 MG (pioglitazone hcl-metformin hcl)</i>	GP		<i>GLUMETZA TB24 (metformin hcl)</i>	SP	PA
<i>dapagliflozin propanediol-metformin hcl 1000 MG-10 MG</i>	1	QL(1 EA daily)			

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>metformin hcl SOLN</i>	1		<i>liraglutide</i>	1	
<i>metformin hcl TABS 850 MG</i>	PV	PV	OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN	SP	PA
<i>metformin hcl TABS 500 MG, 1000 MG</i>	1		OZEMPIC (1 MG/DOSE) SOPN 4 MG/3ML	SP	PA
<i>metformin hcl TB24 500 MG, 1000 MG</i>	SP	PA	OZEMPIC (2 MG/DOSE) SOPN	SP	PA
<i>metformin hcl TB24 500 MG, 750 MG</i>	1		RYBELSUS TABS	SP	PA
RIOMET SOLN (<i>metformin hcl</i>)	GP		TRULICITY	SP	PA
Diabetic Other			Insulin		
BAQSIMI ONE PACK POWD	2	QL(0.069 EA daily)	APIDRA SOLOSTAR SOPN	3	Limit 45mls per month; QL(1.5 ML daily); PA
BAQSIMI TWO PACK POWD	2	QL(0.069 EA daily)	APIDRA SOLN	3	Limit 45mls per month; QL(1.5 ML daily); PA
<i>diazoxide</i>	1		HUMALOG JUNIOR KWIKPEN SOPN	2	Limit 45mls per month; QL(1.5 ML daily)
GLUCAGEN HYPOKIT	2		HUMALOG KWIKPEN SOPN 100 UNIT/ML	2	Limit 45mls per month; QL(1.5 ML daily)
<i>glucagon (rdna)</i>	1		HUMALOG KWIKPEN SOPN 200 UNIT/ML	2	Limit 24mls per month; QL(0.8 ML daily)
GLUCAGON EMERGENCY (<i>glucagon (rdna)</i>)	GP		HUMALOG KWIKPEN SOPN 100 UNIT/ML	2	Limit 4mls per month; QL(1.5 ML daily)
GLUCAGON EMERGENCY	2		HUMALOG MIX 50/50 KWIKPEN SUPN	2	Limit 45mls per month; QL(1.5 ML daily)
GVOKE PFS SOSY	2	QL(0.02 ML daily)	HUMALOG MIX 50/50 SUSP	2	Limit 4 vials per month; QL(1.5 ML daily)
KORLYM (<i>mifepristone (hyperglycemia)</i>)	SP	PA	HUMALOG MIX 75/25 KWIKPEN SUPN	2	Limit 45mls per month; QL(1.5 ML daily)
<i>mifepristone (hyperglycemia)</i>	SP	PA	HUMALOG MIX 75/25 SUSP	2	Limit 45mls per month; QL(1.5 ML daily)
PROGLYCEM (<i>diazoxide</i>)	GP		HUMALOG SOCT	2	Limit 45mls per month; QL(1.5 ML daily)
Dipeptidyl Peptidase-4 (DPP-4) Inhibitors			HUMALOG SOLN IJ	2	Limit 45mls per month; QL(1.5 ML daily)
JANUVIA 25 MG	2	QL(1 EA daily)			
JANUVIA 50 MG, 100 MG	2	QL(2 EA daily)			
<i>saxagliptin hcl</i>	1				
Dopamine Receptor Agonists - Antidiabetic					
CYCLOSET	3				
Incretin Mimetic Agents					

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits	
HUMULIN 70/30 KWIKPEN SUPN	2	Limit 45mls per month; QL(1.5 ML daily)	TRESIBA SOLN	2	QL(1.5 ML daily)	
HUMULIN 70/30 SUSP	2	Limit 45mls per month; QL(1.5 ML daily)	Insulin Sensitizing Agents			
HUMULIN N KWIKPEN SUPN	2	Limit 45mls per month; QL(1.5 ML daily)	ACTOS (<i>pioglitazone hcl</i>)	GP		
HUMULIN N SUSP	2	Limit 45mls per month; QL(1.5 ML daily)	<i>pioglitazone hcl</i>	1		
HUMULIN R U-500 (CONCENTRATED) SOLN SC	2	Limit 2 vials per month; QL(1.5 ML daily)	Meglitinide Analogues			
HUMULIN R U-500 KWIKPEN SOPN SC	2	Limit 2 vials per month; QL(1.5 ML daily)	<i>nateglinide</i>	1		
HUMULIN R SOLN IJ	2	Limit 45mls per month; QL(1.5 ML daily)	<i>repaglinide</i>	1		
INSULIN LISPRO PROT & LISPRO SUPN	2	Limit 45mls per month; QL(1.5 ML daily)	Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors			
LANTUS SOLOSTAR SOPN	2	Limit 45mls per month; QL(1.5 ML daily)	<i>dapagliflozin propanediol</i>	1	QL(1 EA daily)	
LANTUS SOLOSTAR SOPN	2	QL(1.5 ML daily)	FARXIGA (<i>dapagliflozin propanediol</i>)	2	QL(1 EA daily)	
LANTUS SOLN	2	Limit 45mls per month; QL(1.5 ML daily)	JARDIANCE 25 MG	2	QL(1 EA daily)	
TOUJEO MAX SOLOSTAR SOPN	2	Limit 3 boxes per month; QL(0.6 ML daily)	JARDIANCE 10 MG	2	QL(2 EA daily)	
TOUJEO SOLOSTAR SOPN	2	Limit 3 boxes per month; QL(0.6 ML daily)	Sulfonylureas			
TRESIBA FLEXTOUCH SOPN 100 UNIT/ML	2	Limit 3 boxes per month; QL(1.5 ML daily)	(Glipizide) GLIPIZIDE XL TB24	1		
TRESIBA FLEXTOUCH SOPN 200 UNIT/ML	2	Limit 3 boxes per month; QL(0.9 ML daily)	AMARYL (<i>glimepiride</i>)	GP		
			<i>glimepiride 1 MG, 2 MG, 4 MG</i>	1		
			<i>glipizide TABS 5 MG, 10 MG</i>	1		
			<i>glipizide TB24</i>	1		
			GLUCOTROL XL TB24 (<i>glipizide</i>)	GP		
			<i>glyburide micronized 1.5 MG, 3 MG, 6 MG</i>	1		
			<i>glyburide TABS</i>	1		
			GLYNASE (<i>glyburide micronized</i>)	GP		
ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea						
Antidiarrheal - Chloride Channel Antagonists						
MYTESI		3	QL(2 EA daily); PA			
Antiperistaltic Agents						

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits	
(Loperamide Hcl) ANTI-DIARRHEAL, CVS ANTI-DIARRHEAL, EQ ANTI-DIARRHEAL, FT ANTI-DIARRHEAL, GNP ANTI-DIARRHEAL, QC ANTI-DIARRHEAL CAPS	1	RX/OTC	Opioid Antagonists			
<i>diphenoxylate w/ atropine LIQD</i>	1		<i>naloxone hcl LIQD</i>	1	Limit 2 boxes per month; QL(4 EA per 30 day(s) retail); RX/OTC	
<i>diphenoxylate w/ atropine TABS</i>	1		<i>naloxone hcl SOSY 2 MG/2ML</i>	SP		
IMODIUM A-D CAPS (<i>loperamide hcl</i>)	GP	RX/OTC	<i>naltrexone hcl</i>	1		
LOMOTIL TABS (<i>diphenoxylate w/ atropine</i>)	GP		NARCAN LIQD (<i>naloxone hcl</i>)	GP	Limit 2 boxes per month; QL(4 EA per 30 day(s) retail); RX/OTC	
<i>loperamide hcl CAPS</i>	1	RX/OTC	VIVITROL	3		
MOTOFEN	2		ANTIEMETICS - Drugs to Treat Nausea and Vomiting			
<i>opium tincture</i>	1		5-HT3 Receptor Antagonists			
ANTIDOTES AND SPECIFIC ANTAGONISTS						
Antidotes - Chelating Agents						
CHEMET	3		ANZEMET TABS 50 MG	3	Limit 2 per month; QL(0.07 EA daily); PA	
<i>deferasirox PACK</i>	SP	PA	<i>gransetron hcl TABS</i>	1	QL(2 EA daily)	
<i>deferasirox TABS</i>	SP	PA	<i>ondansetron hcl SOLN PO 4 MG/5ML</i>	1	Limit 50mls per month; QL(1.67 ML daily); PA	
<i>deferasirox TBSO</i>	SP	PA	<i>ondansetron hcl TABS 4 MG, 8 MG</i>	1	QL(20 EA per fill retail; 60 per fill mail)	
<i>deferiprone TABS</i>	SP	PA	<i>ondansetron TBDP 4 MG, 8 MG</i>	1	QL(20 EA per fill retail; 60 per fill mail)	
EXJADE TBSO (<i>deferasirox</i>)	SP	PA	<i>palonosetron hcl SOLN</i>	SP	PA	
FERRIPROX TWICE-A-DAY TABS	SP	PA	PALONOSETRON HCL SOLN	SP	PA	
FERRIPROX SOLN	SP	PA	POSFREA SOLN	SP	PA	
FERRIPROX TABS (<i>deferiprone</i>)	SP	PA	SANCUSO PTCH	3	PA	
JADENU SPRINKLE PACK (<i>deferasirox</i>)	SP	PA	Antiemetics - Anticholinergic			
JADENU TABS (<i>deferasirox</i>)	SP	PA				
Antidotes and Specific Antagonists						
RADIOGARDASE	3					
VISTOGARD	SP					

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
(Meclizine Hcl) CVS MOTION SICKNESS II, CVS MOTION SICKNESS LESS DROWS, DRAMAMINE, DRAMAMINE LESS DROWSY, EQL MOTION SICKNESS RELIEF, FT MOTION SICKNESS, GNP MOTION SICKNESS RELIEF, MEDI-MECLIZINE, MOTION SICKNESS RELIEF, SM MOTION SICKNESS, TRAVEL-EASE TABS 25 MG	1	RX/OTC	<i>aprepitant CAPS 80 MG, 125 MG</i>	1	QL(1 EA per fill retail; 3 per fill mail)
ANTIVERT TABS 50 MG (<i>meclizine hcl</i>)	GP		<i>aprepitant MISC</i>	1	QL(3 EA per fill retail; 9 per fill mail)
<i>meclizine hcl TABS 12.5 MG, 25 MG, 50 MG</i>	1	RX/OTC	EMEND BIPACK CAPS 80 MG (<i>aprepitant</i>)	GP	QL(1 EA per fill retail; 3 per fill mail)
<i>scopolamine</i>	1		EMEND TRIPACK CAPS (<i>aprepitant</i>)	GP	QL(3 EA per fill retail; 9 per fill mail)
<i>trimethobenzamide hcl CAPS</i>	1		VARUBI (180 MG DOSE) TBPK	3	QL(4 EA per fill retail)
Antiemetics - Miscellaneous					
AKYNZEO	3	QL(2 EA per 28 day(s) retail)	ANTIFUNGALS - Drugs to Treat Fungal Infections		
BONJESTA TBCR	3	QL(2 EA daily)	Antifungal - Glucan Synthesis Inhibitors		
DICLEGIS TBEC (<i>doxylamine-pyridoxine</i>)	GP	QL(4 EA daily)	CANCIDAS (<i>caspofungin acetate</i>)	SP	PA
<i>doxylamine-pyridoxine TBEC</i>	1	QL(4 EA daily)	<i>caspofungin acetate</i>	SP	PA
<i>dronabinol CAPS</i>	1		CASPOFUNGIN ACETATE	SP	PA
MARINOL CAPS (<i>dronabinol</i>)	GP		ERAXIS 100 MG	SP	PA
Substance P/Neurokinin 1 (NK1) Receptor Antagonists			<i>micafungin sodium</i>	SP	PA
<i>aprepitant CAPS 40 MG</i>	1	QL(2 EA per fill retail; 6 per fill mail)	MICAFUNGIN SODIUM	SP	PA
<i>aprepitant CAPS</i>	1	QL(3 EA per fill retail; 9 per fill mail)	MYCAMINE (<i>micafungin sodium</i>)	SP	PA
			REZZAYO	SP	PA
Antifungals					
<i>ABELCET</i>			ABELCET	SP	PA
<i>AMBISOME (amphotericin b liposome)</i>			AMBISOME (<i>amphotericin b liposome</i>)	SP	PA
<i>amphotericin b IV</i>			<i>amphotericin b IV</i>	SP	PA
<i>amphotericin b liposome</i>			<i>amphotericin b liposome</i>	SP	PA
<i>ANCOBON (flucytosine)</i>			ANCOBON (<i>flucytosine</i>)	GP	
<i>flucytosine</i>			<i>flucytosine</i>	1	
<i>griseofulvin microsize SUSP</i>			<i>griseofulvin microsize SUSP</i>	1	
<i>griseofulvin microsize TABS</i>			<i>griseofulvin microsize TABS</i>	1	
<i>griseofulvin ultramicrosize</i>			<i>griseofulvin ultramicrosize</i>	1	
<i>nystatin TABS</i>			<i>nystatin TABS</i>	1	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
terbinafine hcl TABS	1	QL(90 EA per 365 day(s) retail; 90 EA per 365 days mail)	Antihistamines - Ethanolamines		
Imidazole-Related Antifungals					
CRESEMBA CAPS 186 MG	3		(Diphenhydramine Hcl) ALER-CAP, ALLERGY, ALLERGY RELIEF, BANOPHEN, COMPLETE ALLERGY MEDICINE, CVS ALLERGY, CVS ALLERGY RELIEF, EQ ALLERGY RELIEF, FT ALLERGY RELIEF, GNP ALLERGY, GNP ALLERGY RELIEF, GOODSENSE ALLERGY RELIEF, HM ALLERGY RELIEF, KP DIPHENHYDRAMINE HCL, MEDI-PHEDRYL, MEIJER ANTIHISTAMINE ALLERGY, PHARBEDRYL, PX ALLERGY, QC ALLERGY RELIEF, RA ALLERGY MEDICATION, RA ALLERGY RELIEF, SB ALLERGY, WAL-DRYL ALLERGY CAPS 50 MG	1	
DIFLUCAN SUSR (<i>fluconazole</i>)	GP				
DIFLUCAN TABS 100 MG, 150 MG, 200 MG (<i>fluconazole</i>)	GP				
<i>fluconazole SUSR</i>	1				
<i>fluconazole TABS</i>	1				
<i>itraconazole CAPS</i>	1	PA			
<i>itraconazole SOLN</i>	1	PA			
<i>ketoconazole</i>	1				
NOXAFIL SUSP (<i>posaconazole</i>)	GP				
NOXAFIL TBEC (<i>posaconazole</i>)	GP				
<i>posaconazole SUSP</i>	1				
<i>posaconazole TBEC</i>	1				
SPORANOX CAPS (<i>itraconazole</i>)	GP	PA			
SPORANOX SOLN (<i>itraconazole</i>)	GP	PA			
TOLSURA CAPS	SP	PA			
VFEND SUSR (<i>voriconazole</i>)	GP				
VFEND TABS (<i>voriconazole</i>)	GP				
<i>voriconazole SUSR</i>	1				
<i>voriconazole TABS</i>	1				
ANTIHISTAMINES - Drugs to Treat Allergies					
Antihistamines - Alkylamines					
(Dexchlorpheniramine Maleate) RYCLORA SOLN	1				

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
(Diphenhydramine Hcl) ALLERGY CHILDRENS, ALLERGY RELIEF, ALLERGY RELIEF CHILDRENS, CURELIEF, CVS ALLERGY RELIEF, CVS ALLERGY RELIEF ADULT, CVS ALLERGY RELIEF CHILDRENS, CVS CHILDRENS ALLERGY, EQ ALLERGY RELIEF CHILDRENS, EQL CHILDRENS ALLERGY, FT ALLERGY RELIEF CHILDRENS, GERI-DRYL, GNP ALLERGY RELIEF MAX ST, GNP CHILDRENS ALLERGY, H-E-B CHILDRENS ALLERGY, KINDERMED KIDS ALLERGY, LIQUID ALLERGY RELIEF, M- DRYL, MAXALLERGY KIDS, NARAMIN, PEDIACARE CHILDRENS ALLERGY, PX ALLERGY, QC ALLERGY CHILDRENS, RA ALLERGY, RA ALLERGY MEDICATION, RA ALLERGY RELIEF CHILDRENS, RA DIPHEDRYL ALLERGY, SB ALLERGY MEDICINE, SM ALLERGY RELIEF CHILDRENS, TOTAL ALLERGY MEDICINE, WAL-DRYL ALLERGY, WAL-DRYL ALLERGY CHILDRENS LIQD 12.5 MG/5ML	1		(Diphenhydramine Hcl) ALLERGY CHILDRENS, ALLERGY RELIEF, ALLERGY RELIEF CHILDRENS, CURELIEF, CVS ALLERGY RELIEF, CVS ALLERGY RELIEF ADULT, CVS ALLERGY RELIEF CHILDRENS, CVS CHILDRENS ALLERGY, EQ ALLERGY RELIEF CHILDRENS, EQL CHILDRENS ALLERGY, FT ALLERGY RELIEF CHILDRENS, GERI-DRYL, GNP ALLERGY RELIEF MAX ST, GNP CHILDRENS ALLERGY, H-E-B CHILDRENS ALLERGY, KINDERMED KIDS ALLERGY, LIQUID ALLERGY RELIEF, M- DRYL, MAXALLERGY KIDS, NARAMIN, PEDIACARE CHILDRENS ALLERGY, PX ALLERGY, QC ALLERGY CHILDRENS, RA ALLERGY, RA ALLERGY MEDICATION, RA ALLERGY RELIEF CHILDRENS, RA DIPHEDRYL ALLERGY, SB ALLERGY MEDICINE, SM ALLERGY RELIEF CHILDRENS, TOTAL ALLERGY MEDICINE, WAL-DRYL ALLERGY, WAL-DRYL ALLERGY CHILDRENS LIQD 50 MG/20ML	1	

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OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
(Diphenhydramine Hcl) ALLERGY CHILDRENS, ALLERGY RELIEF, ALLERGY RELIEF CHILDRENS, CURELIEF, CVS ALLERGY RELIEF, CVS ALLERGY RELIEF ADULT, CVS ALLERGY RELIEF CHILDRENS, CVS CHILDRENS ALLERGY, EQ ALLERGY RELIEF CHILDRENS, EQL CHILDRENS ALLERGY, FT ALLERGY RELIEF CHILDRENS, GERI-DRYL, GNP ALLERGY RELIEF MAX ST, GNP CHILDRENS ALLERGY, H-E-B CHILDRENS ALLERGY, KINDERMED KIDS ALLERGY, LIQUID ALLERGY RELIEF, M- DRYL, MAXALLERGY KIDS, NARAMIN, PEDIACARE CHILDRENS ALLERGY, PX ALLERGY, QC ALLERGY CHILDRENS, RA ALLERGY, RA ALLERGY MEDICATION, RA ALLERGY RELIEF CHILDRENS, RA DIPHEDRYL ALLERGY, SB ALLERGY MEDICINE, SM ALLERGY RELIEF CHILDRENS, TOTAL ALLERGY MEDICINE, WAL-DRYL ALLERGY, WAL-DRYL ALLERGY CHILDRENS LIQD 25 MG/10ML	1		<i>clemastine fumarate</i> <i>SYRP</i>	1	
			<i>clemastine fumarate</i> <i>TABS 2.68 MG</i>	1	
			<i>diphenhydramine hcl</i> <i>CAPS 50 MG</i>	1	
			<i>diphenhydramine hcl</i> <i>ELIX 12.5 MG/5ML</i>	1	
			<i>diphenhydramine hcl</i> <i>LIQD 12.5 MG/5ML, 25</i> <i>MG/10ML, 50 MG/20ML</i>	1	
			<i>diphenhydramine hcl</i> <i>SOLN 50 MG/ML</i>	SP	PA
			Antihistamines - Non-Sedating		
BENADRYL ALLERGY CHILDRENS LIQD (<i>diphenhydramine hcl</i>)	GP				
<i>carbinoxamine maleate</i> <i>SOLN</i>	1				
<i>carbinoxamine maleate</i> <i>TABS 4 MG</i>	1				

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
(Cetirizine Hcl) ALL DAY ALLERGY CHILDRENS, ALL-DAY ALLERGY CHILDRENS, ALLERGY RELIEF CHILDRENS, ALLERGY RELIEF CHILDRENS 24-HR, CETIRIZINE HCL ALLERGY CHILD, CETIRIZINE HCL CHILDRENS ALRGY, CHILDRENS 24 HOUR ALLERGY, CVS ALLERGY RELIEF CHILDRENS, EQ ALLERG RELIEF CHILD (CETIR), EQ ALLERGY RELIEF (CETIRIZINE), EQL ALL DAY ALLERGY CHILDRENS, FT ALL DAY ALLERGY CHILDRENS, FT ALLERGY RELIEF CHILDRENS, GNP ALL DAY ALLERGY CHILDRENS, GOODSENSE ALL DAY ALLERGY, HM ALL DAY ALLERGY CHILDRENS, KLS ALLER-TEC CHILDRENS, PX CHILDRENS ALLERGY, QC CHILDRENS ALLERGY, RA ALLERGY RELIEF CHILDRENS, SB CETIRIZINE HCL CHILDRENS, SM ALL DAY ALLERGY CHILDRENS, WAL-ZYR, WAL-ZYR ALL DAY ALLERGY CHILD, WAL- ZYR ALLERGY CHILDRENS, WAL-ZYR CHILDRENS SOLN PO 1 MG/ML	1	RX/OTC	(Cetirizine Hcl) ALL DAY ALLERGY CHILDRENS, ALL-DAY ALLERGY CHILDRENS, ALLERGY RELIEF CHILDRENS, ALLERGY RELIEF CHILDRENS 24-HR, CETIRIZINE HCL ALLERGY CHILD, CETIRIZINE HCL CHILDRENS ALRGY, CHILDRENS 24 HOUR ALLERGY, CVS ALLERGY RELIEF CHILDRENS, EQ ALLERG RELIEF CHILD (CETIR), EQ ALLERGY RELIEF (CETIRIZINE), EQL ALL DAY ALLERGY CHILDRENS, FT ALL DAY ALLERGY CHILDRENS, FT ALLERGY RELIEF CHILDRENS, GNP ALL DAY ALLERGY CHILDRENS, GOODSENSE ALL DAY ALLERGY, HM ALL DAY ALLERGY CHILDRENS, KLS ALLER-TEC CHILDRENS, PX CHILDRENS ALLERGY, QC CHILDRENS ALLERGY, RA ALLERGY RELIEF CHILDRENS, SB CETIRIZINE HCL CHILDRENS, SM ALL DAY ALLERGY CHILDRENS, WAL-ZYR, WAL-ZYR ALL DAY ALLERGY CHILD, WAL- ZYR ALLERGY CHILDRENS, WAL-ZYR CHILDRENS SOLN PO 5 MG/ML	1	RX/OTC

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OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
(Cetirizine Hcl) ALL DAY ALLERGY CHILDRENS, ALL-DAY ALLERGY CHILDRENS, ALLERGY RELIEF CHILDRENS, ALLERGY RELIEF CHILDRENS 24-HR, CETIRIZINE HCL ALLERGY CHILD, CETIRIZINE HCL CHILDRENS ALRGY, CHILDRENS 24 HOUR ALLERGY, CVS ALLERGY RELIEF CHILDRENS, EQ ALLERG RELIEF CHILD (CETIR), EQ ALLERGY RELIEF (CETIRIZINE), EQL ALL DAY ALLERGY CHILDRENS, FT ALL DAY ALLERGY CHILDRENS, FT ALLERGY RELIEF CHILDRENS, GNP ALL DAY ALLERGY CHILDRENS, GOODSENSE ALL DAY ALLERGY, HM ALL DAY ALLERGY CHILDRENS, KLS ALLER-TEC CHILDRENS, PX CHILDRENS ALLERGY, QC CHILDRENS ALLERGY, RA ALLERGY RELIEF CHILDRENS, SB CETIRIZINE HCL CHILDRENS, SM ALL DAY ALLERGY CHILDRENS, WAL-ZYR, WAL-ZYR ALL DAY ALLERGY CHILD, WAL- ZYR ALLERGY CHILDRENS, WAL-ZYR CHILDRENS SOLN PO	1	RX/OTC	(Cetirizine Hcl) QC ALLERGY RELIEF CHILDRENS, RA ALLERGY RELIEF CHILDRENS SYRP PO 5 MG/5ML	1	RX/OTC
			<i>cetirizine hcl SOLN PO</i>	1	RX/OTC
			CLARINEX TABS <i>(desloratadine)</i>	GP	QL(1 EA daily); PA
			<i>desloratadine TABS</i>	1	QL(1 EA daily); PA
			<i>desloratadine TBDP</i>	1	
			ZYRTEC CHILDRENS ALLERGY SOLN PO <i>(cetirizine hcl)</i>	GP	RX/OTC
			Antihistamines - Phenothiazines		
			(Promethazine Hcl) PROMETHEGAN SUPP	1	
			PHENERGAN SOLN IJ <i>(promethazine hcl)</i>	SP	PA
			<i>promethazine hcl SOLN PO 6.25 MG/5ML, 12.5 MG/10ML</i>	1	
			<i>promethazine hcl SOLN IJ 25 MG/ML, 50 MG/ML</i>	SP	PA
			<i>promethazine hcl SUPP</i>	1	
			<i>promethazine hcl TABS</i>	1	
			Antihistamines - Piperidines		
			<i>cyproheptadine hcl SYRP</i>	1	
			<i>cyproheptadine hcl TABS</i>	1	
			ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol		
			Antihyperlipidemics - Combinations		
			<i>ezetimibe-simvastatin</i>	1	QL(1 EA daily)
			VYTORIN <i>(ezetimibe-simvastatin)</i>	GP	QL(1 EA daily)
			Antihyperlipidemics - Misc.		
			<i>icosapent ethyl</i>	2	PA

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits		
LOVAZA (<i>omega-3-acid ethyl esters</i>)	GP		WELCHOL TABS (<i>colesevelam hcl</i>)	GP			
<i>omega-3-acid ethyl esters</i>	1		Fibric Acid Derivatives				
VASCEPA (<i>icosapent ethyl</i>)	2	PA	ANTARA 90 MG (<i>fenofibrate micronized</i>)	GP			
Bile Acid Sequestrants			<i>choline fenofibrate</i>	1			
(Cholestyramine Light) PREVALITE PACK	1		<i>fenofibrate micronized 43 MG, 67 MG, 90 MG, 130 MG, 134 MG, 200 MG</i>	1			
(Cholestyramine Light) PREVALITE POWD	1		<i>fenofibrate CAPS</i>	1			
<i>cholestyramine light PACK</i>	1		<i>fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG</i>	1			
<i>cholestyramine light POWD</i>	1		<i>fenofibric acid</i>	1			
<i>cholestyramine PACK</i>	1		FIBRICOR (<i>fenofibric acid</i>)	GP			
<i>cholestyramine POWD</i>	1		<i>gemfibrozil TABS</i>	1			
<i>colesevelam hcl PACK</i>	1		LIPOFEN CAPS (<i>fenofibrate</i>)	GP			
<i>colesevelam hcl TABS</i>	1		LOPID TABS (<i>gemfibrozil</i>)	GP			
COLESTID FLAVORED GRAN (<i>colestipol hcl</i>)	GP		TRICOR TABS (<i>fenofibrate</i>)	GP			
COLESTID FLAVORED PACK (<i>colestipol hcl</i>)	GP		TRILIPIX (<i>choline fenofibrate</i>)	GP			
COLESTID GRAN (<i>colestipol hcl</i>)	GP		HMG CoA Reductase Inhibitors				
COLESTID PACK (<i>colestipol hcl</i>)	GP		ALTOPREV TB24 20 MG, 40 MG, 60 MG	3			
COLESTID TABS (<i>colestipol hcl</i>)	GP		<i>atorvastatin calcium TABS 40 MG, 80 MG</i>	1	QL(1 EA daily)		
<i>colestipol hcl GRAN</i>	1		<i>atorvastatin calcium TABS 10 MG, 20 MG</i>	PV	QL(1 EA daily); PV		
<i>colestipol hcl PACK</i>	1		CRESTOR TABS 5 MG, 10 MG (<i>rosuvastatin calcium</i>)	GP	QL(1 EA daily); PV		
<i>colestipol hcl TABS</i>	1		<i>fluvastatin sodium CAPS</i>	PV	QL(1 EA daily); PV		
QUESTRAN LIGHT POWD (<i>cholestyramine light</i>)	GP		<i>fluvastatin sodium TB24</i>	PV	QL(1 EA daily); PV		
QUESTRAN PACK (<i>cholestyramine</i>)	GP		LESCOL XL TB24 (<i>fluvastatin sodium</i>)	GP	QL(1 EA daily); PV		
QUESTRAN POWD (<i>cholestyramine</i>)	GP		LIPITOR TABS 10 MG, 20 MG (<i>atorvastatin calcium</i>)	GP	QL(1 EA daily); PV		
WELCHOL PACK (<i>colesevelam hcl</i>)	GP						

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
LIVALO (<i>pitavastatin calcium</i>)	GP	QL(1 EA daily)	<i>benazepril hcl</i>	1	
<i>lovastatin TABS</i>	PV	PV	<i>captopril</i>	1	
<i>pitavastatin calcium</i>	1	QL(1 EA daily)	<i>enalapril maleate SOLN</i>	1	QL(5 ML daily)
<i>pravastatin sodium 10 MG, 20 MG, 80 MG</i>	PV	QL(1 EA daily); PV	<i>enalapril maleate TABS</i>	1	QL(2 EA daily)
<i>pravastatin sodium 40 MG</i>	PV	QL(2 EA daily); PV	EPANED SOLN (<i>enalapril maleate</i>)	GP	QL(5 ML daily)
<i>rosuvastatin calcium TABS 5 MG, 10 MG</i>	PV	QL(1 EA daily); PV	<i>fosinopril sodium</i>	1	
<i>rosuvastatin calcium TABS 20 MG, 40 MG</i>	1	QL(1 EA daily)	<i>lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG</i>	1	
<i>simvastatin TABS 5 MG, 10 MG, 20 MG, 40 MG</i>	PV	QL(1 EA daily); PV	LOTENSIN 10 MG, 20 MG, 40 MG (<i>benazepril hcl</i>)	GP	
<i>simvastatin TABS 80 MG</i>	1	QL(1 EA daily)	<i>moexipril hcl</i>	1	
ZOCOR TABS 10 MG, 20 MG, 40 MG (<i>simvastatin</i>)	GP	QL(1 EA daily); PV	<i>perindopril erbumine</i>	1	
Intestinal Cholesterol Absorption Inhibitors					
<i>ezetimibe</i>	1		QBRELIS SOLN	3	Limited to 1 bottle per month.; QL(5 ML daily)
ZETIA (<i>ezetimibe</i>)	GP		<i>quinapril hcl</i>	1	
Microsomal Triglyceride Transfer Protein (MTP) Inhibitors			<i>ramipril CAPS 10 MG</i>	1	QL(2 EA daily)
JUXTAPID 5 MG, 10 MG, 20 MG, 30 MG	SP	PA	<i>ramipril CAPS 1.25 MG, 2.5 MG, 5 MG</i>	1	QL(1 EA daily)
Nicotinic Acid Derivatives			<i>trandolapril</i>	1	
<i>niacin (antihyperlipidemic) TBCR</i>	1		VASOTEC TABS (<i>enalapril maleate</i>)	GP	QL(2 EA daily)
Proprotein Convertase Subtilisin/Kexin Type 9 Inhibitors			ZESTRIL TABS (<i>lisinopril</i>)	GP	
PRALUENT SOAJ	SP	PA	Agents for Pheochromocytoma		
ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure			DEMSER (<i>metyrosine</i>)	GP	
ACE Inhibitors			DIBENZYLINE (<i>phenoxybenzamine hcl</i>)	GP	
ACCUPRIL (<i>quinapril hcl</i>)	GP		<i>metyrosine</i>	1	
ALTACE CAPS 1.25 MG, 2.5 MG, 5 MG (<i>ramipril</i>)	GP	QL(1 EA daily)	<i>phenoxybenzamine hcl</i>	1	
ALTACE CAPS 10 MG (<i>ramipril</i>)	GP	QL(2 EA daily)	Angiotensin II Receptor Antagonists		
			ATACAND (<i>candesartan cilexetil</i>)	GP	
			AVAPRO 150 MG, 300 MG (<i>irbesartan</i>)	GP	
			<i>candesartan cilexetil</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
COZAAR (<i>losartan potassium</i>)	GP		<i>amlodipine besylate-valsartan</i>	1	
DIOVAN TABS (<i>valsartan</i>)	GP		<i>amlodipine-valsartan-hydrochlorothiazide</i>	1	
EDARBI	3		ATACAND HCT (<i>candesartan cilexetil-hydrochlorothiazide</i>)	GP	
<i>irbesartan</i>	1		<i>atenolol & chlorthalidone</i>	1	
<i>losartan potassium</i>	1		AVALIDE (<i>irbesartan-hydrochlorothiazide</i>)	GP	
MICARDIS (<i>telmisartan</i>)	GP		AZOR (<i>amlodipine besylate-olmesartan medoxomil</i>)	GP	
<i>olmesartan medoxomil</i>	1		<i>benazepril & hydrochlorothiazide</i>	1	
<i>telmisartan</i>	1		BENICAR HCT (<i>olmesartan medoxomil-hydrochlorothiazide</i>)	GP	
<i>valsartan TABS</i>	1		<i>bisoprolol & hydrochlorothiazide</i>	1	
Antiadrenergic Antihypertensives			<i>candesartan cilexetil-hydrochlorothiazide</i>	1	
CARDURA (<i>doxazosin mesylate</i>)	GP		<i>captopril & hydrochlorothiazide</i>	1	
CATAPRES-TTS-1 PTWK (<i>clonidine</i>)	GP		DIOVAN HCT (<i>valsartan-hydrochlorothiazide</i>)	GP	
CATAPRES-TTS-2 PTWK (<i>clonidine</i>)	GP		EDARBYCLOR	3	
CATAPRES-TTS-3 PTWK (<i>clonidine</i>)	GP		<i>enalapril maleate & hydrochlorothiazide</i>	1	
<i>clonidine hcl TABS</i>	1		EXFORGE (<i>amlodipine besylate-valsartan</i>)	GP	
<i>clonidine PTWK</i>	1		EXFORGE HCT (<i>amlodipine-valsartan-hydrochlorothiazide</i>)	GP	
<i>clonidine TB24</i>	1	ST	<i>fosinopril sodium & hydrochlorothiazide</i>	1	
<i>doxazosin mesylate</i>	1		HYZAAR (<i>losartan potassium & hydrochlorothiazide</i>)	GP	
<i>guanfacine hcl</i>	1		<i>irbesartan-hydrochlorothiazide</i>	1	
<i>methyldopa TABS</i>	1		<i>lisinopril & hydrochlorothiazide</i>	1	
MINIPRESS CAPS (<i>prazosin hcl</i>)	GP				
NEXICLON XR TB24 (<i>clonidine</i>)	GP	ST			
<i>prazosin hcl CAPS</i>	1				
<i>terazosin hcl</i>	1				
Antihypertensive Combinations					
ACCURETIC (<i>quinapril-hydrochlorothiazide</i>)	GP				
<i>amlodipine besylate-benazepril hcl</i>	1				
<i>amlodipine besylate-olmesartan medoxomil</i>	1				

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>losartan potassium & hydrochlorothiazide</i>	1		ZIAC (<i>bisoprolol & hydrochlorothiazide</i>)	GP	
LOTENSIN HCT 12.5 MG-10 MG, 12.5 MG-20 MG, 25 MG-20 MG (<i>benazepril & hydrochlorothiazide</i>)	GP		Antihypertensives - Misc.		
LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (<i>amlodipine besylate-benazepril hcl</i>)	GP		VECAMYL	SP	PA
<i>metoprolol & hydrochlorothiazide TABS</i>	1		Direct Renin Inhibitors		
MICARDIS HCT (<i>telmisartan-hydrochlorothiazide</i>)	GP		<i>aliskiren fumarate</i>	1	
<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>	1		TEKTURNA (<i>aliskiren fumarate</i>)	GP	
<i>olmesartan medoxomil-hydrochlorothiazide</i>	1		Selective Aldosterone Receptor Antagonists (SARAs)		
<i>quinapril-hydrochlorothiazide</i>	1		<i>eplerenone</i>	1	
TEKTURNA HCT	3		INSPRA (<i>eplerenone</i>)	GP	
<i>telmisartan-amlodipine</i>	1		Vasodilators		
<i>telmisartan-hydrochlorothiazide</i>	1		<i>hydralazine hcl SOLN</i>	SP	PA
TENORETIC 100 (<i>atenolol & chlorthalidone</i>)	GP		<i>hydralazine hcl TABS</i>	1	
TENORETIC 50 (<i>atenolol & chlorthalidone</i>)	GP		<i>minoxidil 2.5 MG, 10 MG</i>	1	
<i>trandolapril-verapamil hcl</i>	1		ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections		
TRIBENZOR (<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>)	GP		Anti-infective Agents - Misc.		
<i>valsartan-hydrochlorothiazide</i>	1		<i>bacitracin</i>	SP	PA
VASERETIC 25 MG-10 MG (<i>enalapril maleate & hydrochlorothiazide</i>)	GP		<i>FLAGYL CAPS (metronidazole)</i>	GP	
ZESTORETIC (<i>lisinopril & hydrochlorothiazide</i>)	GP		IMPAVIDO	SP	
			<i>metronidazole CAPS</i>	1	
			<i>metronidazole SOLN</i>	SP	PA
			<i>METRONIDAZOLE SOLN (metronidazole)</i>	SP	PA
			<i>metronidazole TABS 250 MG, 500 MG</i>	1	
			<i>NEBUPENT IN (pentamidine isethionate)</i>	GP	
			<i>pentamidine isethionate IN</i>	1	
			<i>tinidazole</i>	1	
			<i>trimethoprim TABS</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
XIFAXAN 200 MG	3	QL(9 EA per fill retail; 9 per fill mail); PA	BACTRIM TABS <i>(sulfamethoxazole-trimethoprim)</i>	GP	
XIFAXAN 550 MG	3	QL(2 EA daily); PA	<i>sulfamethoxazole-trimethoprim SUSP</i>	1	
Anti-infective Misc. - Combinations					
(Methenamine-Hyosc-Methylene Blue-Benzoxic Acid-Phenyl Sal) HYOPHEN	1		<i>sulfamethoxazole-trimethoprim TABS</i>	1	
(Methenamine-Hyosc-Methylene Blue-Sod Phos-Phenyl Sal) MB CAPS, URIBEL, URIMAR-T, URNEVA, URO-MP, URO-SP, USTELL, VILAMIT MB CAPS 120 MG	1		URIBEL	3	
(Methenamine-Hyosc-Methylene Blue-Sod Phos-Phenyl Sal) MB CAPS, URIBEL, URIMAR-T, URNEVA, URO-MP, URO-SP, USTELL, VILAMIT MB CAPS 118 MG	1		Antiprotozoal Agents		
(Methenamine-Hyosc-Methylene Blue-Sod Phos-Phenyl Sal) PHOSPHASAL, URELLE, URIN DS, URO-458, UTIRA-C, VILEVEV MB TABS 81.6 MG	1		ALINIA SUSR	3	
(Methenamine-Hyosc-Methylene Blue-Sod Phos-Phenyl Sal) PHOSPHASAL, URELLE, URIN DS, URO-458, UTIRA-C, VILEVEV MB TABS 81 MG	1		ALINIA TABS <i>(nitazoxanide)</i>	GP	
(Sulfamethoxazole-Trimethoprim) SULFATRIM PEDIATRIC SUSP	1		<i>atovaquone</i>	1	
BACTRIM DS TABS <i>(sulfamethoxazole-trimethoprim)</i>	GP		MEPRON <i>(atovaquone)</i>	GP	
			<i>nitazoxanide TABS</i>	1	
			Carbapenems		
			<i>ertapenem sodium IJ</i>	SP	PA
			<i>imipenem-cilastatin IV</i>	SP	PA
			INVANZ IJ <i>(ertapenem sodium)</i>	SP	PA
			<i>meropenem 500 MG</i>	SP	PA
			PRIMAXIN IV IV 500 MG-500 MG <i>(imipenem-cilastatin)</i>	SP	PA
			Chloramphenicols		
			<i>chloramphenicol sodium succinate</i>	SP	PA
			Cyclic Lipopeptides		
			CUBICIN RF <i>(daptomycin)</i>	SP	PA
			<i>daptomycin 500 MG</i>	SP	PA
			DAPTO MYCIN 500 MG	SP	PA
			Glycopeptides		
			FIRVANQ SOLR PO 25 MG/ML <i>(vancomycin hcl)</i>	GP	PA
			VANCOCIN CAPS <i>(vancomycin hcl)</i>	GP	PA
			<i>vancomycin hcl CAPS</i>	1	PA

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OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits	
<i>vancomycin hcl SOLR PO 25 MG/ML</i>	1	PA	HIPREX (<i>methenamine hippurate</i>)	GP		
Leprostatics				MACROBID (<i>nitrofurantoin monohyd macro</i>)		
<i>dapsone</i>	1		MACRODANTIN (<i>nitrofurantoin macrocrystal</i>)	GP		
Lincosamides			<i>methenamine hippurate</i>	1		
CLEOCIN (<i>clindamycin hcl</i>)	GP		<i>methenamine mandelate</i>	1		
CLEOCIN (<i>clindamycin palmitate hydrochloride</i>)	GP		MONUROL (<i>fosfomycin tromethamine</i>)	GP		
CLEOCIN PHOSPHATE SOLN IJ 900 MG/6ML (<i>clindamycin phosphate</i>)	SP	PA	<i>nitrofurantoin</i>	1		
<i>clindamycin hcl</i>	1		<i>nitrofurantoin macrocrystal</i>	1		
<i>clindamycin palmitate hydrochloride</i>	1		<i>nitrofurantoin monohyd macro</i>	1		
<i>clindamycin phosphate in d5w</i>	SP	PA	ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)			
<i>clindamycin phosphate SOLN IJ 900 MG/6ML</i>	SP	PA	Antimalarial Combinations			
LINCOCIN (<i>lincomycin hcl</i>)	SP	PA	<i>atovaquone-proguanil hcl</i>	1		
<i>lincomycin hcl</i>	SP	PA	COARTEM	2	Limit 24 per month; QL(0.8 EA daily)	
Oxazolidinones			MALARONE (<i>atovaquone-proguanil hcl</i>)	GP		
<i>linezolid SUSR</i>	1		Antimalarials			
<i>linezolid TABS</i>	1	QL(20 EA per 90 day(s) retail; 20 EA per 90 days mail)	<i>chloroquine phosphate TABS</i>	1		
SIVEXTRO TABS	2	QL(6 EA per 90 day(s) retail)	<i>hydroxychloroquine sulfate 200 MG</i>	1		
ZYVOX SUSR (<i>linezolid</i>)	GP		KRINTAFEL	2	QL(2 EA per 30 day(s) retail)	
ZYVOX TABS (<i>linezolid</i>)	GP	QL(20 EA per 90 day(s) retail; 20 EA per 90 days mail)	<i>mefloquine hcl</i>	1		
Polymyxins			<i>primaquine phosphate TABS</i>	1		
<i>polymyxin b sulfate SOLR</i>	SP	PA	PRIMAQUINE PHOSPHATE TABS (<i>primaquine phosphate</i>)	GP		
Urinary Anti-infectives			<i>pyrimethamine</i>	1	PA	
<i>fosfomycin tromethamine</i>	1					

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OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
QUALAQUIN CAPS <i>(quinine sulfate)</i>	GP	QL(42 EA per 7 day(s) retail); PA	SIRTURO 20 MG	3	
<i>quinine sulfate CAPS 324 MG</i>	1	QL(42 EA per 7 day(s) retail); PA	TRECATOR	2	
ANTIMYASTHENIC/CHOLINERGIC AGENTS					
Antimyasthenic/Cholinergic Agents					
FIRDAPSE	SP	PA	(Carboplatin) PARAPLATIN SOLN 450 MG/45ML, 600 MG/60ML, 1000 MG/100ML	AC	PA
MESTINON SOLN PO <i>(pyridostigmine bromide)</i>	GP	PA	ALKERAN <i>(melphalan)</i>	AC	
MESTINON TABS <i>(pyridostigmine bromide)</i>	GP		ALKERAN IV <i>(melphalan hcl)</i>	AC	PA
MESTINON TBCR <i>(pyridostigmine bromide)</i>	GP		BELRAPZO SOLN	AC	PA
<i>pyridostigmine bromide SOLN PO</i>	1	PA	BENDAMUSTINE HCL SOLN	AC	PA
<i>pyridostigmine bromide TABS 60 MG</i>	1		<i>bendamustine hcl SOLR</i>	AC	PA
<i>pyridostigmine bromide TBCR</i>	1		BENDEKA SOLN	AC	PA
ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)					
Antimycobacterial Agents					
cycloserine	1		<i>carboplatin SOLN 50 MG/5ML, 150 MG/15ML, 450 MG/45ML, 600 MG/60ML, 1000 MG/100ML</i>	AC	PA
ethambutol hcl TABS	1		CARMUSTINE	AC	PA
isoniazid SOLN	SP	PA	<i>cisplatin SOLN 50 MG/50ML, 100 MG/100ML, 200 MG/200ML</i>	AC	PA
isoniazid SYRP	1		CISPLATIN SOLR	AC	PA
isoniazid TABS	1		<i>cyclophosphamide CAPS</i>	AC	
MYAMBUTOL TABS 400 MG <i>(ethambutol hcl)</i>	GP		<i>cyclophosphamide SOLN</i>	AC	PA
MYCOBUTIN <i>(rifabutin)</i>	GP		<i>CYCLOPHOSPHAMIDE SOLN (cyclophosphamide)</i>	AC	PA
PRIFTIN	3		<i>CYCLOPHOSPHAMIDE SOLN</i>	AC	PA
<i>pyrazinamide</i>	1		<i>cyclophosphamide SOLR IJ</i>	AC	PA
<i>rifabutin</i>	1				
RIFADIN SOLR <i>(rifampin)</i>	SP	PA			
<i>rifampin CAPS</i>	1				
<i>rifampin SOLR</i>	SP	PA			
SIRTURO 100 MG	SP				

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OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CYCLOPHOSPHAMIDE TABS	AC		<i>flouxuridine</i>	AC	PA
CYCLOPHOSPHAMIDE TABS	AC		<i>fludarabine phosphate SOLN</i>	AC	PA
EVOMELA IV	AC	PA	FLUDARABINE PHOSPHATE SOLN	AC	PA
FRINDOVYX SOLN	AC	PA	<i>fludarabine phosphate SOLR</i>	AC	PA
GLEOSTINE 10 MG, 40 MG, 100 MG	AC	PA	<i>fluorouracil</i>	AC	PA
HEPZATO W/50MM CATHETER IA	AC	PA	FOLOTYN	AC	PA
HEPZATO W/62MM CATHETER IA	AC	PA	<i>gemcitabine hcl SOLN</i>	AC	PA
KEMOPLAT SOLN	AC	PA	GEMCITABINE HCL SOLN (<i>gemcitabine hcl</i>)	AC	PA
LEUKERAN	AC		GEMCITABINE HCL SOLN	AC	PA
<i>melphalan</i>	AC		GEMCITABINE HCL SOLN	AC	PA
<i>melphalan hcl IV</i>	AC	PA	<i>gemcitabine hcl SOLR</i>	AC	PA
MYLERAN TABS	AC		INFUGEM	AC	PA
TEMODAR SOLR	AC	PA	JYLAMVO SOLN PO	AC	PA
<i>temozolomide CAPS</i>	AC		<i>mercaptopurine SUSP 2000 MG/100ML</i>	AC	AL(Up to 13 yrs old); PA
TEPADINA (<i>thiotepa</i>)	AC	PA	<i>mercaptopurine TABS</i>	AC	
<i>thiotepa</i>	AC	PA	<i>methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML</i>	SP	
TREANDA SOLR (<i>bendamustine hcl</i>)	AC	PA	<i>methotrexate sodium SOLR</i>	SP	
VIVIMUSTA SOLN	AC	PA	<i>methotrexate sodium TABS 2.5 MG</i>	1	
YONDELIS	AC	PA	<i>nelarabine</i>	AC	PA
ZANOSAR	AC	PA	ONUREG TABS	AC	PA
ZEPZELCA	AC	PA	PEMETREXED	AC	PA
Antimetabolites			PEMETREXED DISODIUM SOLN	AC	PA
ALIMTA SOLR (<i>pemetrexed disodium</i>)	AC		<i>pemetrexed disodium SOLR 750 MG, 1000 MG</i>	AC	PA
ARRANON (<i>nelarabine</i>)	AC	PA	<i>pemetrexed disodium SOLR 100 MG, 500 MG</i>	AC	
<i>azacitidine SUSR</i>	AC	PA	PEMETREXED DITROMETHAMINE	AC	PA
<i>capecitabine</i>	AC				
<i>cladribine 10 MG/10ML</i>	AC	PA			
<i>clofarabine</i>	AC	PA			
CLOLAR (<i>clofarabine</i>)	AC	PA			
<i>cytarabine SOLN</i>	AC	PA			
<i>decitabine</i>	AC	PA			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PEMFEXY	AC	PA	Antineoplastic - Antibodies		
PEMRYDI RTU SOLN	AC	PA	ADCETRIS	AC	PA
<i>pralatrexate</i>	AC	PA	ARZERRA	AC	PA
PURIXAN SUSP 2000 MG/100ML <i>(mercaptopurine)</i>	AC	AL(Up to 13 yrs old); PA	BAVENCIO	AC	PA
TABLOID	AC		BESPONSA	AC	PA
TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	3		BLENREP	AC	PA
VIDAZA SUSR <i>(azacitidine)</i>	AC	PA	BLINCYTO	AC	PA
XATMEP SOLN PO	AC	PA	COLUMVI	AC	PA
XELODA <i>(capecitabine)</i>	AC		DANYELZA	AC	PA
Antineoplastic - Angiogenesis Inhibitors			DARZALEX	AC	PA
ALYMSYS	AC	PA	ELAHERE	AC	PA
AVASTIN	AC	PA	ELREXFIO	AC	PA
CYRAMZA	AC	PA	EMPPLICITI	AC	PA
FRUZAQLA	AC	PA	ENHERTU	AC	PA
INLYTA	AC	PA	EPKINLY	AC	PA
LENVIMA (10 MG DAILY DOSE)	AC	PA	GAZYVA	AC	PA
LENVIMA (12 MG DAILY DOSE)	AC	PA	IMDELLTRA	AC	PA
LENVIMA (14 MG DAILY DOSE)	AC	PA	IMFINZI	AC	PA
LENVIMA (18 MG DAILY DOSE)	AC	PA	IMJUDO	AC	PA
LENVIMA (20 MG DAILY DOSE)	AC	PA	JEMPERLI	AC	PA
LENVIMA (24 MG DAILY DOSE)	AC	PA	KADCYLA	AC	PA
LENVIMA (4 MG DAILY DOSE)	AC	PA	KEYTRUDA	AC	PA
LENVIMA (8 MG DAILY DOSE)	AC	PA	KIMMTRAK	AC	PA
MVASI	AC	PA	LIBTAYO	AC	PA
VEGZELMA	AC	PA	LOQTORZI	AC	PA
ZALTRAP	AC	PA	LUMOXITI	AC	PA
ZIRABEV	AC	PA	LUNSUMIO	AC	PA
			MONJUVI	AC	PA
			OPDIVO	AC	PA
			PADCEV	AC	PA
			POLIVY	AC	PA
			POTELIGEO	AC	PA
			RIABNI	AC	PA
			RITUXAN	AC	PA
			RUXIENCE	2	PA
			RYBREVANT	AC	PA

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SARCLISA	AC	PA	TECARTUS	AC	PA
TALVEY	AC	PA	TECELRA	AC	PA
TECENTRIQ	AC	PA	YESCARTA	AC	PA
TECVAYLI	AC	PA	Antineoplastic - EGFR Inhibitors		
TEVIMBRA	AC	PA	ERBITUX	AC	PA
TIVDAK	AC	PA	<i>erlotinib hcl</i>	AC	PA
TRUXIMA	2	PA	EXKIVITY	AC	PA
UNITUXIN	AC	PA	<i>gefitinib</i>	AC	PA
VYLOY	AC	PA	GILOTrif	AC	PA
YERVOY	AC	PA	IRESSA (<i>gefitinib</i>)	AC	PA
ZEVALIN Y-90	AC	PA	LAZCLUZE	AC	PA
ZYNLONTA	AC	PA	PORTRAZZA	AC	PA
ZYNYZ	AC	PA	TAGRISSO	AC	PA
Antineoplastic - Anti-HER2 Agents			TARCEVA (<i>erlotinib hcl</i>)	AC	PA
HERCEPTIN 150 MG	AC	PA	VECTIBIX 100 MG/5ML, 400 MG/20ML	AC	PA
HERZUMA	AC	PA	VIZIMPRO	AC	PA
KANJINTI	2	PA	Antineoplastic - Gene Therapy Agents		
MARGENZA	AC	PA	ADSTILADRIN	AC	PA
OGIVRI	2	PA	Antineoplastic - Hedgehog Pathway Inhibitors		
ONTRUZANT	AC	PA	DAURISMO	AC	PA
PERJETA	AC	PA	ERIVEDGE	AC	
TRAZIMERA	2	PA	ODOMZO	AC	PA
TUKYSA	AC	PA	Antineoplastic - Hormonal and Related Agents		
Antineoplastic - BCL-2 Inhibitors			(Abiraterone Acetate) ABIRTEGA 250 MG	AC	PA
VENCLEXTA STARTING PACK TBPk	AC	PA	<i>abiraterone acetate</i>	AC	PA
VENCLEXTA TABS	AC	PA	AKEEGA	AC	PA
Antineoplastic - Cellular Immunotherapy			<i>anastrozole</i>	PV	PV
ABECMA	AC	PA	ARIMIDEX (<i>anastrozole</i>)	GP	PV
AMTAGVI	AC	PA	AROMASIN (<i>exemestane</i>)	GP	PV
AUCATZYL	AC	PA	<i>bicalutamide</i>	AC	
BREYANZI	AC	PA	CAMCEVI	AC	PA
CARVYKTI	AC	PA	CASODEX (<i>bicalutamide</i>)	AC	
KYMRIAH	AC	PA			
OMISRIGE	AC	PA			
PROVENGE	AC	PA			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits	
ELIGARD SC	AC	PA	SOLTAMOX SOLN	AC		
EMCYT	AC		<i>tamoxifen citrate TABS</i>	PV	PV	
ERLEADA	AC	PA	<i>toremifene citrate</i>	AC		
EULEXIN	AC		TRELSTAR MIXJECT	AC	PA	
<i>exemestane</i>	PV	PV	XTANDI CAPS	AC	PA	
FARESTON (<i>toremifene citrate</i>)	AC		XTANDI TABS	AC	PA	
FEMARA (<i>letrozole</i>)	AC		YONSA	AC	PA	
FIRMAGON 80 MG	AC	PA	ZOLADEX	AC	PA	
FIRMAGON (240 MG DOSE)	AC	PA	ZYTIGA (<i>abiraterone acetate</i>)	AC	PA	
<i>hydroxyprogesterone caproate (antineoplastic)</i>	AC	PA	Antineoplastic - Hypoxia-Inducible Factor Inhibitors			
<i>letrozole</i>	AC		WELIREG	AC	PA	
LEUPROLIDE ACETATE (3 MONTH) INJ	AC	PA	Antineoplastic - Immunomodulators			
LEUPROLIDE ACETATE-BUPIVACAINE	AC	PA	POMALYST	AC	PA	
<i>leuprolide acetate KIT IJ 1 MG/0.2ML</i>	AC	PA	Antineoplastic - Menin Inhibitors			
LUPRON DEPOT (1-MONTH) KIT IM	AC	PA	REVUFORJ	AC	PA	
LUPRON DEPOT (1-MONTH) KIT IM	AC	PA	Antineoplastic - PDGFR-alpha Inhibitors			
LUPRON DEPOT (3-MONTH) KIT IM	AC	PA	AYVAKIT 25 MG, 50 MG	AC	PA	
LUPRON DEPOT (3-MONTH) KIT IM	AC	PA	AYVAKIT 100 MG, 200 MG, 300 MG	AC	QL(1 EA daily); PA	
Antineoplastic - XPO1 Inhibitors						
LUPRON DEPOT (4-MONTH) IM	AC	PA	XPOVIO (100 MG ONCE WEEKLY) 50 MG	AC	PA	
LUPRON DEPOT (6-MONTH) IM	AC	PA	XPOVIO (40 MG ONCE WEEKLY) 40 MG	AC	PA	
LYSODREN	AC		XPOVIO (40 MG TWICE WEEKLY) 40 MG	AC	PA	
<i>megestrol acetate SUSP</i>	1		XPOVIO (60 MG ONCE WEEKLY) 60 MG	AC	PA	
<i>megestrol acetate TABS</i>	AC		XPOVIO (60 MG TWICE WEEKLY)	AC	PA	
NILANDRON (<i>nilutamide</i>)	AC		XPOVIO (80 MG ONCE WEEKLY) 40 MG	AC	PA	
<i>nilutamide</i>	AC		XPOVIO (80 MG TWICE WEEKLY)	AC	PA	
NUBEQA	AC	PA	Antineoplastic Antibiotics			
ORGOVYX	AC	PA				
ORSERDU	AC	PA				

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>daunorubicin hcl SOLN</i>	AC	PA	BORTEZOMIB SOLN IV	AC	PA
DAUNORUBICIN HCL SOLN (<i>daunorubicin hcl</i>)	AC	PA	<i>bortezomib SOLR IJ</i>	AC	PA
ELLENCE SOLN	AC	PA	BORTEZOMIB SOLR IJ 1 MG, 2.5 MG	AC	PA
<i>mitoxantrone hcl 20 MG/10ML, 30 MG/15ML</i>	AC	PA	BORUZU SOLN IJ	AC	PA
<i>mitoxantrone hcl 25 MG/12.5ML</i>	SP	PA	BOSULIF CAPS	AC	PA
<i>valrubicin</i>	AC	PA	BOSULIF TABS	AC	PA
VALSTAR (<i>valrubicin</i>)	AC	PA	BRAFTOVI 75 MG	AC	PA
Antineoplastic Combinations			BRUKINSA	AC	PA
DARZALEX FASPRO	AC	PA	CABOMETYX TABS	AC	PA
HERCEPTIN HYLECTA	AC	PA	CALQUENCE	AC	PA
INQOVI	AC	PA	CAPRELSA	AC	
KISQALI FEMARA (200 MG DOSE)	AC	PA	COMETRIQ (100 MG DAILY DOSE) KIT	AC	
KISQALI FEMARA (400 MG DOSE)	AC	PA	COMETRIQ (140 MG DAILY DOSE) KIT	AC	
KISQALI FEMARA (600 MG DOSE)	AC	PA	COMETRIQ (60 MG DAILY DOSE) KIT	AC	
LONSURF	AC	PA	COPIKTRA	AC	PA
OPDUALAG	AC	PA	COTELLIC	AC	PA
PHESGO	AC	PA	DANZITEN	AC	PA
RITUXAN HYCELIA	AC	PA	<i>dasatinib</i>	AC	PA
TECENTRIQ HYBREZA	AC	PA	<i>everolimus TABS</i>	AC	QL(1 EA daily); PA
Antineoplastic Enzyme Inhibitors			<i>everolimus TBSO</i>	AC	QL(1 EA daily); PA
(Everolimus) TORPENZ TABS	AC	QL(1 EA daily); PA	FOTIVDA	AC	PA
AFINITOR DISPERZ TBSO (<i>everolimus</i>)	AC	QL(1 EA daily); PA	FYARRO	AC	PA
AFINITOR TABS (<i>everolimus</i>)	AC	QL(1 EA daily); PA	GAVRETO	AC	PA
ALECensa	AC	PA	GLEEVEC TABS (<i>imatinib mesylate</i>)	AC	PA
ALUNBRIG TABS	AC	PA	IBRANCE CAPS	AC	PA
ALUNBRIG TBPk	AC	PA	IBRANCE TABS	AC	PA
AUGTYRO	AC	PA	ICLUSIG 15 MG, 45 MG	AC	
BALVERSA	AC	PA	ICLUSIG 10 MG, 30 MG	AC	PA
BELEODAQ	AC	PA	IDHIFA	AC	PA
			<i>imatinib mesylate TABS</i>	AC	PA
			IMBRUVICA CAPS	AC	PA
			IMBRUVICA CAPS	AC	PA

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
IMBRUVICA SUSP	AC	PA	PEMAZYRE	AC	QL(1 EA daily); PA
IMBRUVICA TABS	AC	PA	PIQRAY (200 MG DAILY DOSE)	AC	PA
INREBIC	AC	PA	PIQRAY (250 MG DAILY DOSE)	AC	PA
ISTODAX SOLR <i>(romidepsin)</i>	AC	PA	PIQRAY (300 MG DAILY DOSE)	AC	PA
ITOVEBI	AC	PA	QINLOCK	AC	PA
JAKAFI	AC	PA	RETEVMO CAPS	AC	PA
JAYPIRCA	AC	PA	RETEVMO TABS	AC	PA
KISQALI (200 MG DOSE)	AC	PA	REZLIDHIA	AC	PA
KISQALI (400 MG DOSE)	AC	PA	<i>romidepsin SOLR</i>	AC	PA
KISQALI (600 MG DOSE)	AC	PA	ROZLYTREK CAPS	AC	PA
KOSELUGO	AC	PA	ROZLYTREK PACK	AC	PA
KRAZATI	AC	PA	RUBRACA	AC	PA
KYPROLIS	AC	PA	RYDAPT	AC	PA
<i>lapatinib ditosylate</i>	AC	PA	RYTELO	AC	PA
LORBRENA	AC	PA	SCEMBLIX	AC	PA
LUMAKRAS	AC	PA	<i>sorafenib tosylate</i>	AC	PA
LUMAKRAS	AC	PA	SPRYCEL (<i>dasatinib</i>)	AC	PA
LYNPARZA TABS	AC	PA	STIVARGA	AC	SP; PA
LYTGOBI (12 MG DAILY DOSE)	AC	PA	<i>sunitinib malate</i>	AC	PA
LYTGOBI (16 MG DAILY DOSE)	AC	PA	SUTENT (<i>sunitinib malate</i>)	AC	PA
LYTGOBI (20 MG DAILY DOSE)	AC	PA	TABRECTA	AC	PA
MEKINIST SOLR	AC	PA	TAFINLAR CAPS	AC	PA
MEKINIST TABS	AC	PA	TAFINLAR TBSO	AC	PA
MEKTOVI	AC	PA	TALZENNA	AC	PA
NERLYNX	AC	PA	TALZENNA	AC	PA
NEXAVAR (<i>sorafenib tosylate</i>)	AC	PA	TASIGNA	AC	PA
NINLARO	AC	PA	TAZVERIK	AC	PA
OGSIVEO	AC	PA	<i>temsirolimus</i>	AC	PA
OJEMDA SUSR	AC	PA	TEPMETKO	AC	PA
OJEMDA TABS	AC	PA	TIBSOVO	AC	PA
OJJAARA	AC	PA	TORISEL (<i>temsirolimus</i>)	AC	PA
<i>pazopanib hcl</i>	AC	PA	TRUQAP TABS	AC	PA
			TRUQAP TBPK	AC	PA

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits		
TRUSELTIQ (100MG DAILY DOSE)	AC	PA	PLUVICTO	AC	PA		
TRUSELTIQ (125MG DAILY DOSE)	AC	PA	XOFIGO	AC	PA		
TRUSELTIQ (50MG DAILY DOSE)	AC	PA	Antineoplastics Misc.				
TRUSELTIQ (75MG DAILY DOSE)	AC	PA	ACTIMMUNE 100 MCG/0.5ML	AC	PA		
TURALIO 125 MG	AC	PA	ALFERON N	AC	PA		
TYKERB (<i>lapatinib ditosylate</i>)	AC	PA	ANKTIVA	AC	PA		
VANFLYTA	AC	PA	<i>arsenic trioxide 12 MG/6ML</i>	AC	PA		
VELCADE SOLR IJ (<i>bortezomib</i>)	AC	PA	BESREMI	AC	PA		
VERZENIO	AC	PA	<i>bexarotene</i>	AC	PA		
VITRAKVI CAPS	AC	PA	ELZONRIS	AC	PA		
VITRAKVI SOLN	AC	PA	HYDREA (<i>hydroxyurea</i>)	AC			
VONJO	AC	PA	<i>hydroxyurea</i>	AC			
VORANIGO	AC	PA	MATULANE	AC			
VOTRIENT (<i>pazopanib hcl</i>)	AC	PA	PHOTOFRIN	AC	PA		
XALKORI CAPS	AC	PA	PROLEUKIN	AC	PA		
XALKORI CPSP	AC	PA	SYNRIBO	AC	PA		
XOSPATA	AC	PA	TARGRETIN (<i>bexarotene</i>)	AC	PA		
ZEJULA CAPS	AC	PA	<i>tretinoin (chemotherapy)</i>	AC			
ZEJULA TABS	AC	PA	TRISENOX (<i>arsenic trioxide</i>)	AC	PA		
ZELBORAF	AC	PA	UVADEX	SP	PA		
ZOLINZA	AC	PA	Chemotherapy Adjuncts				
ZYDELIG	AC	PA	KEPIVANCE	SP	PA		
ZYKADIA TABS	AC	PA	KEPIVANCE	SP	PA		
Antineoplastic Enzymes			Chemotherapy Rescue/Antidote/Protective Agents				
ASPARLAS	AC	PA	COSELA	AC	PA		
ONCASPAR	AC	PA	<i>dexrazoxane hcl</i>	AC	PA		
RYLAZE	AC	PA	ETHYOL	AC	PA		
Antineoplastic Radiopharmaceuticals			IWILFIN	AC	PA		
AZEDRA DOSIMETRIC	AC	PA	KHAPZORY	AC	PA		
AZEDRA THERAPEUTIC	AC	PA	<i>leucovorin calcium SOLN IJ 500 MG/50ML</i>	AC	PA		
LUTATHERA	AC	PA	<i>leucovorin calcium SOLR 100 MG, 350 MG</i>	AC	PA		

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>leucovorin calcium TABS</i>	AC		PACLITAXEL PROTEIN-BOUND PART	AC	PA
<i>levoleucovorin calcium SOLN</i>	AC	PA	<i>paclitaxel protein-bound particles</i>	AC	PA
<i>levoleucovorin calcium SOLR</i>	AC	PA	<i>vincristine sulfate</i>	AC	PA
<i>mesna SOLN</i>	AC	PA	Oncolytic Viral Agents		
<i>mesna TABS</i>	AC		IMLYGIC	AC	PA
MESNEX SOLN (<i>mesna</i>)	AC	PA	Topoisomerase I Inhibitors		
MESNEX TABS	AC		CAMPTOSAR (<i>irinotecan hcl</i>)	AC	PA
PEDMARK	AC	PA	HYCAMTIN CAPS	AC	PA
VORAXAZE	AC	PA	HYCAMTIN SOLR (<i>topotecan hcl</i>)	AC	PA
Mitotic Inhibitors			<i>irinotecan hcl</i>	AC	PA
(Etoposide) TOPOSAR SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML	AC	PA	ONIVYDE	AC	PA
(Vincristine Sulfate) VINCASAR PFS 1 MG/ML	AC	PA	<i>topotecan hcl SOLN</i>	AC	PA
ABRAXANE (<i>paclitaxel protein-bound particles</i>)	AC	PA	TOPOTECAN HCL SOLN	AC	PA
<i>docetaxel CONC 20 MG/ML, 80 MG/4ML, 160 MG/8ML</i>	AC	PA	<i>topotecan hcl SOLR</i>	AC	PA
DOCETAXEL CONC 20 MG/ML, 80 MG/4ML, 160 MG/8ML	AC	PA	TRODELVY	AC	PA
<i>docetaxel SOLN</i>	AC	PA	ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease		
DOCETAXEL SOLN (<i>docetaxel</i>)	AC	PA	Antiparkinson Adjunctive Therapy		
DOCIVYX SOLN	AC	PA	<i>carbidopa</i>	1	
<i>eribulin mesylate</i>	AC	PA	LODOSYN (<i>carbidopa</i>)	GP	
ETOPOPHOS	AC	PA	Antiparkinson Anticholinergics		
<i>etoposide CAPS</i>	AC		<i>benztropine mesylate SOLN</i>	SP	PA
<i>etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML</i>	AC	PA	<i>benztropine mesylate TABS</i>	1	
HALAVEN (<i>eribulin mesylate</i>)	AC	PA	<i>trihexyphenidyl hcl SOLN</i>	1	
IXEMPRA KIT	AC	PA	<i>trihexyphenidyl hcl TABS</i>	1	
JEVTONA	AC	PA	Antiparkinson COMT Inhibitors		
<i>paclitaxel 100 MG/16.7ML</i>	AC	PA	COMTAN (<i>entacapone</i>)	GP	
			<i>entacapone</i>	1	
			TASMAR (<i>tolcapone</i>)	GP	
			<i>tolcapone</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits			
Antiparkinson Dopaminergics								
<i>amantadine hcl CAPS</i>	1		SINEMET TABS 100 MG-10 MG, 100 MG-25 MG <i>(carbidopa-levodopa)</i>	GP				
<i>amantadine hcl TABS</i>	1		Antiparkinson Monoamine Oxidase Inhibitors					
<i>bromocriptine mesylate CAPS</i>	1		AZILECT (<i>rasagiline mesylate</i>)	GP				
<i>bromocriptine mesylate TABS 2.5 MG</i>	1		<i>rasagiline mesylate</i>	1				
<i>carbidopa-levodopa-entacapone</i>	1		<i>selegiline hcl CAPS</i>	1				
<i>carbidopa-levodopa TABS</i>	1		<i>selegiline hcl TABS</i>	1				
<i>carbidopa-levodopa TBCR</i>	1		ZELAPAR TBDP	3				
<i>carbidopa-levodopa TBDP</i>	1		ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders					
DHIVY TABS	2		Antimanic Agents					
DUOPA SUSP	SP		<i>lithium carbonate CAPS</i>	1				
GOCOVRI CP24	3	PA	<i>lithium carbonate TABS</i>	1				
MIRAPEX ER TB24 (<i>pramipexole dihydrochloride</i>)	GP		<i>lithium carbonate TBCR</i>	1				
NEUPRO 3 MG/24HR, 4 MG/24HR, 6 MG/24HR, 8 MG/24HR	3	QL(1 EA daily)	LITHOBID TBCR (<i>lithium carbonate</i>)	3				
NEUPRO 1 MG/24HR, 2 MG/24HR	3	QL(3 EA daily)	Antipsychotics - Misc.					
OSMOLEX ER T4PK	3	PA	CAPLYTA	3	QL(1 EA daily); PA			
OSMOLEX ER TB24 129 MG, 193 MG	3	PA	EQUETRO	3				
PARLODEL CAPS (<i>bromocriptine mesylate</i>)	GP		GEODON (<i>ziprasidone hcl</i>)	GP				
PARLODEL TABS (<i>bromocriptine mesylate</i>)	GP		GEODON (<i>ziprasidone mesylate</i>)	SP	PA			
<i>pramipexole dihydrochloride TABS</i>	1		LATUDA 120 MG (<i>lurasidone hcl</i>)	GP				
<i>pramipexole dihydrochloride TB24</i>	1		LATUDA 20 MG, 40 MG, 60 MG, 80 MG (<i>lurasidone hcl</i>)	GP	QL(1 EA daily)			
<i>ropinirole hydrochloride TABS</i>	1		<i>lurasidone hcl 120 MG</i>	1				
<i>ropinirole hydrochloride TB24</i>	1		<i>lurasidone hcl 20 MG, 40 MG, 60 MG, 80 MG</i>	1	QL(1 EA daily)			
RYTARY CPCR	3	PA	NUPLAZID CAPS	SP	QL(1 EA daily); PA			
			NUPLAZID TABS 10 MG	SP	QL(1 EA daily); PA			
			VRAYLAR CAPS	3	PA			
			VRAYLAR CPPK	3	PA			

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>ziprasidone hcl</i>	1		<i>olanzapine TABS</i>	1	
<i>ziprasidone mesylate</i>	SP	PA	<i>olanzapine TBDP</i>	1	
Benzisoxazoles					
ERZOFRI 39 MG/0.25ML, 78 MG/0.5ML, 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML	SP	PA	<i>quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG, 300 MG, 400 MG</i>	1	
FANAPT	3	PA	<i>quetiapine fumarate TB24</i>	1	PA
FANAPT TITRATION PACK	3	PA	<i>SAPHRIS (asenapine maleate)</i>	GP	PA
INVEGA (<i>paliperidone</i>)	GP		SECUADO	3	QL(1 EA daily); PA
INVEGA SUSTENNA	SP	PA	SEROQUEL XR TB24 (<i>quetiapine fumarate</i>)	GP	PA
INVEGA TRINZA	SP	PA	SEROQUEL TABS (<i>quetiapine fumarate</i>)	GP	
<i>paliperidone</i>	1		VERSACLOZ SUSP	3	QL(18 ML daily)
PERSERIS PRSY	SP	PA	ZYPREXA ZYDIS TBDP (<i>olanzapine</i>)	GP	
RISPERDAL CONSTA (<i>risperidone microspheres</i>)	SP	PA	ZYPREXA SOLR (<i>olanzapine</i>)	SP	PA
RISPERDAL SOLN (<i>risperidone</i>)	GP		ZYPREXA TABS (<i>olanzapine</i>)	GP	
RISPERDAL TABS 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG (<i>risperidone</i>)	GP		Dihydroindolones		
<i>risperidone microspheres</i>	SP	PA	<i>molindone hcl</i>	1	
<i>risperidone SOLN</i>	1		Phenothiazines		
<i>risperidone TABS</i>	1		(Prochlorperazine) COMPRO	1	
<i>risperidone TBDP</i>	1		<i>chlorpromazine hcl TABS</i>	1	
Butyrophenones			<i>fluphenazine hcl CONC</i>	1	
<i>haloperidol lactate CONC</i>	1		<i>fluphenazine hcl ELIX</i>	1	
<i>haloperidol TABS</i>	1		<i>fluphenazine hcl TABS</i>	1	
Dibenzapines			<i>perphenazine TABS</i>	1	
<i>asenapine maleate</i>	1	PA	<i>prochlorperazine</i>	1	
<i>clozapine TABS</i>	1		<i>prochlorperazine maleate TABS</i>	1	
<i>clozapine TBDP</i>	1		<i>thioridazine hcl</i>	1	
CLOZARIL TABS (<i>clozapine</i>)	GP		<i>trifluoperazine hcl TABS</i>	1	
<i>loxapine succinate</i>	1		Quinolinone Derivatives		
<i>olanzapine SOLR</i>	SP	PA			

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OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ABILIFY TABS <i>(aripiprazole)</i>	GP		DELSTRIGO	3	
<i>aripiprazole SOLN PO</i>	1		DESCOVY 200 MG-25 MG	PV	For non-HDHP plans, if used for HIV treatment, tier 2 copayment applies. For HDHP plans, if used for PeP or HIV treatment, tier 2 copayment applies.; PV
<i>aripiprazole TABS</i>	1				
<i>aripiprazole TBDP</i>	1	PA			
REXULTI 1 MG, 3 MG, 4 MG	3	QL(1 EA daily); PA	DOVATO	2	
REXULTI 0.25 MG, 0.5 MG, 2 MG	3	QL(2 EA daily); PA	EDURANT	2	
Thioxanthenes			<i>efavirenz CAPS</i>	1	
<i>thiothixene</i>	1		<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	1	
ANTISEPTICS & DISINFECTANTS			<i>efavirenz TABS</i>	1	
Antiseptics & Disinfectants			<i>emtricitabine CAPS</i>	1	
<i>formaldehyde SOLN 10 %</i>	1		<i>emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG</i>	1	QL(1 EA daily)
ANTIVIRALS - Drugs to Treat Viral Infections			<i>emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG</i>	PV	For non-HDHP plans, if used for HIV treatment, tier 1 copayment applies. For HDHP plans, if used for PeP or HIV treatment, tier 1 copayment applies.; QL(1 EA daily); PV
Antiretrovirals			<i>EMTRIVA CAPS (emtricitabine)</i>	GP	
<i>abacavir sulfate-lamivudine</i>	1		<i>EMTRIVA SOLN</i>	2	
<i>abacavir sulfate SOLN</i>	1		<i>EPIVIR SOLN (lamivudine)</i>	GP	
<i>abacavir sulfate TABS</i>	1		<i>EPIVIR TABS (lamivudine)</i>	GP	
APTIVUS CAPS	2				
<i>atazanavir sulfate CAPS</i>	1				
BIKTARVY 200 MG-50 MG-25 MG	2				
COMBIVIR (<i>lamivudine-zidovudine</i>)	GP				
COMPLERA	2				
<i>darunavir TABS 600 MG</i>	1				
<i>darunavir TABS 800 MG</i>	PV	For non-HDHP plans, if used for HIV treatment, tier 1 copayment applies. For HDHP plans, if used for PeP or HIV treatment, tier 1 copayment applies.; PV			

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OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EPZICOM (<i>abacavir sulfate-lamivudine</i>)	GP		<i>nevirapine TB24</i>	1	
<i>etravirine</i>	1		NORVIR CAPS	2	
EVOTAZ	2		NORVIR TABS (<i>ritonavir</i>)	GP For non-HDHP plans, if used for HIV treatment, tier 1 copayment applies. For HDHP plans, if used for PeP or HIV treatment, tier 1 copayment applies.; PV	
<i>fosamprenavir calcium TABS</i>	1		ODEFSEY	2	
FUZEON SOLR	SP	PA	PIFELTRO	2	
GENVOYA	2		PREZCOBIX	2	
INTELENCE 25 MG	2		PREZISTA SUSP	2	
INTELENCE (<i>etravirine</i>)	GP		PREZISTA TABS 600 MG (<i>darunavir</i>)	GP	
ISENTRESS HD TABS	2		PREZISTA TABS 75 MG, 150 MG	2	
ISENTRESS CHEW	2		PREZISTA TABS 800 MG (<i>darunavir</i>)	GP	
ISENTRESS PACK	2		RETROVIR CAPS (<i>zidovudine</i>)		
ISENTRESS TABS	PV	For non-HDHP plans, if used for HIV treatment, tier 2 copayment applies. For HDHP plans, if used for PeP or HIV treatment, tier 2 copayment applies.; PV	RETROVIR SYRP (<i>zidovudine</i>)		
JULUCA	2		REYATAZ CAPS 200 MG, 300 MG (<i>atazanavir sulfate</i>)	GP	
KALETRA SOLN (<i>lopinavir-ritonavir</i>)	GP		REYATAZ PACK	2	
KALETRA TABS (<i>lopinavir-ritonavir</i>)	GP				
<i>lamivudine SOLN</i>	1				
<i>lamivudine TABS</i>	1				
<i>lamivudine-zidovudine</i>	1				
LEXIVA SUSP	2				
LEXIVA TABS (<i>fosamprenavir calcium</i>)	GP				
<i>lopinavir-ritonavir SOLN</i>	1				
<i>lopinavir-ritonavir TABS</i>	1				
<i>maraviroc TABS</i>	1				
<i>nevirapine SUSP</i>	1				
<i>nevirapine TABS</i>	1				

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OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ritonavir TABS	PV	For non-HDHP plans, if used for HIV treatment, tier 1 copayment applies. For HDHP plans, if used for PeP or HIV treatment, tier 1 copayment applies.; PV	TRUVADA 200 MG-300 MG (<i>emtricitabine-tenofovir disoproxil fumarate</i>)	GP	For non-HDHP plans, if used for HIV treatment, tier 1 copayment applies. For HDHP plans, if used for PeP or HIV treatment, tier 1 copayment applies.; QL(1 EA daily); PV
RUKOBIA	SP	PA	TYBOST	2	
SELZENTRY SOLN	2		VIRACEPT TABS	2	
SELZENTRY TABS 25 MG, 75 MG	2		VIREAD POWD	2	
SELZENTRY TABS (<i>maraviroc</i>)	GP		VIREAD TABS 150 MG, 200 MG, 250 MG	2	
stavudine CAPS	1		ZIAGEN SOLN (<i>abacavir sulfate</i>)	GP	
STRIBILD	2		ZIAGEN TABS (<i>abacavir sulfate</i>)	GP	
SUSTIVA CAPS (<i>efavirenz</i>)	GP		zidovudine CAPS	1	
tenofovir disoproxil fumarate TABS	1		zidovudine SYRP	1	
TIVICAY TABS 50 MG	PV	For non-HDHP plans, if used for HIV treatment, tier 2 copayment applies. For HDHP plans, if used for PeP or HIV treatment, tier 2 copayment applies.; PV	zidovudine TABS	1	
TRIUMEQ TABS	2		CMV Agents		
TRIZIVIR	2		cidofovir	SP	PA
TRUVADA 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG (<i>emtricitabine-tenofovir disoproxil fumarate</i>)	GP	QL(1 EA daily)	foscarnet sodium 6000 MG/250ML	SP	PA
			FOSCAVIR 6000 MG/250ML (<i>foscarnet sodium</i>)	SP	PA
			PREVYMIS TABS	SP	SP; PA
			VALCYTE SOLR (<i>valganciclovir hcl</i>)	GP	QL(21 ML daily)
			VALCYTE TABS (<i>valganciclovir hcl</i>)	GP	
			valganciclovir hcl SOLR	1	QL(21 ML daily)
			valganciclovir hcl TABS	1	
			Hepatitis Agents		
			adefovir dipivoxil	1	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits	
BARACLUDE TABS <i>(entecavir)</i>	GP		TAMIFLU CAPS 30 MG, 45 MG (<i>oseltamivir phosphate</i>)	GP	QL(10 EA per 180 day(s) retail)	
<i>entecavir TABS</i>	1		TAMIFLU SUSR (<i>oseltamivir phosphate</i>)	GP	QL(180 ML per 180 day(s) retail); AL(At least 1 yrs old)	
EPCLUSA PACK	3	PA	Respiratory Syncytial Virus (RSV) Agents			
EPCLUSA TABS	3	PA	<i>ribavirin</i>	1		
EPCLUSA TABS	3	PA	VIRAZOLE (<i>ribavirin</i>)	GP		
EPIVIR HBV TABS (<i>lamivudine (hbv)</i>)	GP		BETA BLOCKERS - Drugs to Treat High Blood Pressure			
<i>lamivudine (hbv) TABS</i>	1		Alpha-Beta Blockers			
MAVYRET TABS	SP	PA	<i>carvedilol 3.125 MG</i>	1	QL(2 EA daily)	
PEGASYS SOLN	SP	PA	<i>carvedilol 6.25 MG, 12.5 MG, 25 MG</i>	1		
PEGASYS SOSY	SP	SP; PA	<i>carvedilol phosphate</i>	1		
<i>ribavirin (hepatitis c) CAPS</i>	1	PA	COREG 6.25 MG, 12.5 MG, 25 MG (<i>carvedilol</i>)	GP		
<i>ribavirin (hepatitis c) TABS 200 MG</i>	1	PA	COREG 3.125 MG (<i>carvedilol</i>)	GP	QL(2 EA daily)	
VOSEVI	3	PA	COREG CR (<i>carvedilol phosphate</i>)	GP		
Herpes Agents			<i>labetalol hcl TABS 100 MG, 200 MG, 300 MG</i>	1		
<i>acyclovir CAPS</i>	1		Beta Blockers Cardio-Selective			
<i>acyclovir SUSP</i>	1		<i>acebutolol hcl CAPS</i>	1		
<i>acyclovir TABS PO</i>	1		<i>atenolol TABS</i>	1		
<i>famciclovir</i>	1		<i>betaxolol hcl</i>	1		
<i>valacyclovir hcl</i>	1		<i>bisoprolol fumarate</i>	1	QL(1 EA daily)	
VALTREX (<i>valacyclovir hcl</i>)	GP		BYSTOLIC (<i>nebivolol hcl</i>)	GP		
Influenza Agents			<i>LOPRESSOR TABS (metoprolol tartrate)</i>	GP		
<i>oseltamivir phosphate CAPS 30 MG, 45 MG</i>	1	QL(10 EA per 180 day(s) retail)	<i>metoprolol succinate TB24</i>	1		
<i>oseltamivir phosphate CAPS 75 MG</i>	1		<i>metoprolol tartrate TABS</i>	1		
<i>oseltamivir phosphate SUSR</i>	1	QL(180 ML per 180 day(s) retail); AL(At least 1 yrs old)	<i>nebivolol hcl</i>	1		
RELENZA DISKHALER	3	Limit 20 per month; QL(0.67 EA daily)	<i>TENORMIN TABS (atenolol)</i>	GP		
<i>rimantadine hydrochloride TABS</i>	1					

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TOPROL XL TB24 <i>(metoprolol succinate)</i>	GP		(Diltiazem Hcl Extended Release Beads) TAZTIA XT, TIADYLT ER 120 MG, 180 MG, 240 MG, 300 MG, 360 MG	1	
Beta Blockers Non-Selective				(Diltiazem Hcl) DILT-XR CP24	1
(Sotalol Hcl) SORINE TABS	1		(Diltiazem Hcl) MATZIM LA TB24 180 MG, 240 MG, 300 MG, 360 MG, 420 MG	1	
BETAPACE AF <i>(sotalol hcl (afib/afl))</i>	GP		<i>amlodipine besylate TABS</i>	1	QL(2 EA daily)
BETAPACE TABS 80 MG, 120 MG, 160 MG <i>(sotalol hcl)</i>	GP		CALAN SR TBCR <i>(verapamil hcl)</i>	GP	
CORGARD TABS 20 MG, 40 MG <i>(nadolol)</i>	GP		CARDIZEM CD CP24 <i>(diltiazem hcl coated beads)</i>	GP	
HEMANGEOL SOLN PO	3	AL(Up to 1 yrs old); PA	CARDIZEM LA TB24 <i>(diltiazem hcl)</i>	GP	
INDERAL LA CP24 <i>(propranolol hcl)</i>	GP		CARDIZEM TABS 30 MG, 60 MG, 120 MG <i>(diltiazem hcl)</i>	GP	
INDERAL XL	3		<i>diltiazem hcl coated beads CP24</i>	1	
INNOPRAN XL	3		<i>diltiazem hcl extended release beads</i>	1	
<i>nadolol TABS 20 MG, 40 MG, 80 MG</i>	1		<i>diltiazem hcl CP12</i>	1	
<i>pindolol TABS</i>	1		<i>diltiazem hcl CP24</i>	1	
<i>propranolol hcl CP24</i>	1		<i>diltiazem hcl TABS</i>	1	
<i>propranolol hcl SOLN PO 20 MG/5ML, 40 MG/5ML</i>	1		<i>diltiazem hcl TB24</i>	1	
<i>propranolol hcl TABS</i>	1		<i>felodipine</i>	1	
<i>sotalol hcl (afib/afl)</i>	1		<i>isradipine CAPS</i>	1	
<i>sotalol hcl TABS</i>	1		<i>nicardipine hcl CAPS</i>	1	
SOTYLIZE SOLN PO	3		<i>nifedipine CAPS</i>	1	
<i>timolol maleate TABS</i>	1	QL(2 EA daily)	<i>nifedipine TB24</i>	1	QL(1 EA daily)
CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure				<i>nifedipine TB24 30 MG, 60 MG</i>	1
Calcium Channel Blockers				<i>nimodipine CAPS</i>	1
(Diltiazem Hcl Coated Beads) CARTIA XT CP24 120 MG, 180 MG, 240 MG, 300 MG	1		<i>nimodipine SOLN</i>	1	
(Diltiazem Hcl Extended Release Beads) TAZTIA XT, TIADYLT ER	1		<i>nisoldipine</i>	1	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
NORVASC TABS <i>(amlodipine besylate)</i>	GP	QL(2 EA daily)	CADUET 10 MG-10 MG, 10 MG-20 MG, 10 MG-40 MG, 10 MG-80 MG, 5 MG- 10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG <i>(amlodipine besylate- atorvastatin calcium)</i>	GP	
PROCARDIA XL TB24 <i>(nifedipine)</i>	GP	QL(1 EA daily)	<i>isosorbide dinitrate- hydralazine hcl</i>	1	
SULAR 8.5 MG, 17 MG, 34 MG <i>(nisoldipine)</i>	GP		Impotence Agents		
TIAZAC <i>(diltiazem hcl extended release beads)</i>	GP		CIALIS 2.5 MG, 5 MG <i>(tadalafil)</i>	GP	QL(1 EA daily); PA
VERAPAMIL HCL ER CP24 <i>(verapamil hcl)</i>	GP		<i>tadalafil 2.5 MG, 5 MG</i>	1	QL(1 EA daily); PA
<i>verapamil hcl CP24</i>	1		Prostaglandin Vasodilators		
<i>verapamil hcl TABS</i>	1		ORENITRAM TBCR	SP	PA
<i>verapamil hcl TBCR</i>	1		REMODULIN SOLN IJ	SP	PA
VERELAN PM CP24 <i>(verapamil hcl)</i>	GP		<i>treprostinil SOLN IJ</i>	SP	PA
VERELAN CP24 <i>(verapamil hcl)</i>	GP		VENTAVIS IN	SP	PA
CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm			Pulmonary Hypertension - Endothelin Receptor Antagonists		
Cardiac Glycosides			<i>ambrisentan</i>	SP	PA
<i>digoxin SOLN PO 0.05 MG/ML</i>	1		<i>bosentan TABS</i>	SP	PA
<i>digoxin TABS 62.5 MCG, 125 MCG, 250 MCG</i>	1		<i>LETAIRIS (ambrisentan)</i>	SP	PA
LANOXIN TABS 62.5 MCG <i>(digoxin)</i>	GP		OPSUMIT	SP	PA
LANOXIN TABS 125 MCG, 250 MCG <i>(digoxin)</i>	3		TRACLEER TABS <i>(bosentan)</i>	SP	PA
CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions			TRACLEER TBSO	SP	SP; PA
Cardiovascular Agents Misc. - Combinations			Pulmonary Hypertension - Phosphodiesterase Inhibitors		
<i>amlodipine besylate- atorvastatin calcium</i>	1		(Tadalafil (Pulmonary Hypertension)) ALYQ TABS	SP	PA
BIDIL <i>(isosorbide dinitrate-hydralazine hcl)</i>	GP		ADCIRCA TABS <i>(tadalafil (pulmonary hypertension))</i>	SP	PA
			REVATIO SOLN <i>(sildenafil citrate (pulmonary hypertension))</i>	SP	PA

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
REVATIO SUSR <i>(sildenafil citrate (pulmonary hypertension))</i>	SP	PA	Cephalosporins - 1st Generation		
REVATIO TABS <i>(sildenafil citrate (pulmonary hypertension))</i>	GP	PA	<i>cefadroxil CAPS</i>	1	
<i>sildenafil citrate (pulmonary hypertension) SOLN</i>	SP	PA	<i>cefadroxil SUSR</i>	1	
<i>sildenafil citrate (pulmonary hypertension) SUSR</i>	SP	PA	<i>cefadroxil TABS</i>	1	
<i>sildenafil citrate (pulmonary hypertension) TABS</i>	1	PA	<i>cefazolin sodium SOLR IJ 1 GM, 10 GM, 500 MG</i>	SP	PA
<i>tadalafil (pulmonary hypertension) TABS</i>	SP	PA	<i>cephalexin CAPS</i>	1	
Pulmonary Hypertension - Prostacyclin Receptor Agonist			<i>cephalexin SUSR</i>	1	
UPTRAVI TITRATION TBPK	SP	PA	Cephalosporins - 2nd Generation		
UPTRAVI SOLR	SP	PA	<i>CEFACLOR ER TB12</i>	3	
UPTRAVI TABS	SP	PA	<i>cefaclor CAPS</i>	1	
Pulmonary Hypertension - Sol Guanylate Cyclase Stimulator			<i>cefaclor SUSR 125 MG/5ML, 250 MG/5ML, 375 MG/5ML</i>	1	
ADEMPAS	SP	PA	CEFOTAN IJ (<i>cefotetan disodium</i>)	SP	PA
Sinus Node Inhibitors			<i>cefotetan disodium IJ 1 GM, 2 GM</i>	SP	PA
CORLANOR SOLN	3	QL(15 ML daily); ST	<i>cefoxitin sodium IV 1 GM, 2 GM</i>	SP	PA
CORLANOR TABS <i>(ivabradine hcl)</i>	GP	QL(2 EA daily); ST	CEFOXITIN SODIUM- DEXTROSE	SP	PA
<i>ivabradine hcl TABS</i>	1	QL(2 EA daily); ST	<i>cefprozil CAPS</i>	1	
Transthyretin Stabilizers			<i>cefprozil TABS</i>	1	
VYNDAMAX	SP	QL(1 EA daily); PA	<i>cefuroxime axetil TABS</i>	1	
VYNDAQEL	SP	QL(4 EA daily); PA	<i>cefuroxime sodium IJ 750 MG</i>	SP	PA
CEPHALOSPORINS - Drugs to Treat Bacterial Infections			Cephalosporins - 3rd Generation		
			(Ceftazidime) TAZICEF IV 1 GM, 2 GM	SP	PA
			<i>cefdinir CAPS</i>	1	
			<i>cefdinir SUSR</i>	1	
			<i>cefixime CAPS</i>	1	
			<i>cefixime SUSR</i>	1	
			CEFOTAXIME SODIUM IJ 1 GM, 2 GM	SP	PA
			<i>cefpodoxime proxetil SUSR</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>cefpodoxime proxetil TABS</i>	1		(Desogestrel-Ethinyl Estradiol (Biphasic)) AZURETTE, KARIVA, PIMTREA, SIMLIYA, VIORELE, VOLNEA	PV	PV
<i>ceftazidime IV 1 GM, 2 GM</i>	SP	PA	(Desogestrel-Ethinyl Estradiol (Triphasic)) VELIVET	PV	PV
<i>ceftriaxone sodium IJ 250 MG, 500 MG</i>	SP	PA	(Drospirenone-Ethinyl Estradiol) JASMIEL, LO-ZUMANDIMINE, LORYNA, NIKKI, OCELLA, SYEDA, VESTURA, ZUMANDIMINE 0.02 MG-3 MG	PV	PV
SUPRAX CAPS <i>(cefixime)</i>	GP		(Drospirenone-Ethinyl Estradiol) JASMIEL, LO-ZUMANDIMINE, LORYNA, NIKKI, OCELLA, SYEDA, VESTURA, ZUMANDIMINE 0.03 MG-3 MG	PV	PV
SUPRAX CHEW	3		(Drospirenone-Ethinyl Estradiol-Levomefolate Calcium) TYDEMY 0.03 MG-3 MG-0.451 MG	PV	PV
SUPRAX SUSR 500 MG/5ML	3		(Ethynodiol Diacet & Eth Estrad) KELNOR 1/35, KELNOR 1/50, VALTYA 1/50, ZOVIA 1/35 (28) 35 MCG-1 MG	PV	PV
SUPRAX SUSR 200 MG/5ML <i>(cefixime)</i>	GP		(Ethynodiol Diacet & Eth Estrad) KELNOR 1/35, KELNOR 1/50, VALTYA 1/50, ZOVIA 1/35 (28) 50 MCG-1 MG	PV	PV
Cephalosporins - 4th Generation			(Ethynodiol Diacet & Eth Estrad) KELNOR 1/35, KELNOR 1/50, VALTYA 1/50, ZOVIA 1/35 (28)	PV	PV
CEFEPIME HCL SOLN 1 GM/50ML	SP	PA			
<i>cefepime hcl SOLR IV 2 GM</i>	SP	PA			
CEFEPIME-DEXTROSE 5 %-2 GM/50ML	SP	PA			
Cephalosporins - 5th Generation					
TEFLARO	SP	PA			
CONTRACEPTIVES - Drugs to Prevent Pregnancy					
Combination Contraceptives - Oral					
(Desogestrel & Ethinyl Estradiol) APRI, CYRED, CYRED EQ, EMOQUETTE, ENSKYCE, ISIBLOOM, JULEBER, KALLIGA, RECLIPSEN 30 MCG-0.15 MG	PV	PV			
(Desogestrel & Ethinyl Estradiol) APRI, CYRED, CYRED EQ, EMOQUETTE, ENSKYCE, ISIBLOOM, JULEBER, KALLIGA, RECLIPSEN 0.03 MG-0.15 MG	PV	PV			

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
(Levonorgestrel & Eth Estradiol) AFIRMELLE, ALTAVERA, AUBRA EQ, AVIANE, AYUNA, CHATEAL EQ, DELYLA, FALMINA, KURVELO, LESSINA, LEVORA 0.15/30 (28), LUTERA, MARLISSA, ORSYTHIA, PORTIA-28, SRONYX, VIENVA TABS 0.03 MG-0.15 MG	PV	PV	(Levonorgestrel-Ethinyl Estradiol (91-Day)) AMETHIA, ASHLYNA, CAMRESE, CAMRESE LO, DAYSEE, FAYOSIM, ICLEVIA, INTROVALE, JAIMESS, JOLESSA, LOJAIMESS, RIVELSA, SETLAKIN, SIMPESSE 0.03 MG-0.15 MG	PV	PV
(Levonorgestrel & Eth Estradiol) AFIRMELLE, ALTAVERA, AUBRA EQ, AVIANE, AYUNA, CHATEAL EQ, DELYLA, FALMINA, KURVELO, LESSINA, LEVORA 0.15/30 (28), LUTERA, MARLISSA, ORSYTHIA, PORTIA-28, SRONYX, VIENVA TABS 30 MCG-0.15 MG	PV	PV	(Levonorgestrel-Ethinyl Estradiol (91-Day)) AMETHIA, ASHLYNA, CAMRESE, CAMRESE LO, DAYSEE, FAYOSIM, ICLEVIA, INTROVALE, JAIMESS, JOLESSA, LOJAIMESS, RIVELSA, SETLAKIN, SIMPESSE	PV	PV
(Levonorgestrel & Eth Estradiol) AFIRMELLE, ALTAVERA, AUBRA EQ, AVIANE, AYUNA, CHATEAL EQ, DELYLA, FALMINA, KURVELO, LESSINA, LEVORA 0.15/30 (28), LUTERA, MARLISSA, ORSYTHIA, PORTIA-28, SRONYX, VIENVA TABS 20 MCG-0.1 MG	PV	PV	(Levonorgestrel-Ethinyl Estradiol-Continuous) AMETHYST, DOLISHALE	PV	PV
(Levonorgestrel-Eth Estradiol (Triphasic)) ENPRESSE-28, LEVONEST, TRIVORA (28)	PV	PV	(Levonorgestrel-Ethinyl Estradiol-Iron) JOYEAUX, MINZOYA	PV	QL(1 EA daily); PV
			(Norethin Acet & Estrad-Fe) AUROVELA 24 FE, AUROVELA FE 1.5/30, AUROVELA FE 1/20, BLISOVI 24 FE, BLISOVI FE 1.5/30, BLISOVI FE 1/20, FEIRZA 1.5/30, FEIRZA 1/20, HAILEY 24 FE, HAILEY FE 1.5/30, HAILEY FE 1/20, JUNEL FE 1.5/30, JUNEL FE 1/20, JUNEL FE 24, LARIN 24 FE, LARIN FE 1.5/30, LARIN FE 1/20, LOESTRIN FE 1.5/30, LOESTRIN FE 1/20, MICROGESTIN 24 FE, MICROGESTIN FE 1.5/30, MICROGESTIN FE 1/20, TARINA 24 FE, TARINA FE 1/20 EQ TABS 1.5 MG-30 MCG-75 MG	PV	PV

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
(Norethin Acet & Estrad-Fe) AUROVELA 24 FE, AUROVELA FE 1.5/30, AUROVELA FE 1/20, BLISOVI 24 FE, BLISOVI FE 1.5/30, BLISOVI FE 1/20, FEIRZA 1.5/30, FEIRZA 1/20, HAILEY 24 FE, HAILEY FE 1.5/30, HAILEY FE 1/20, JUNEL FE 1.5/30, JUNEL FE 1/20, JUNEL FE 24, LARIN 24 FE, LARIN FE 1.5/30, LARIN FE 1/20, LOESTRIN FE 1.5/30, LOESTRIN FE 1/20, MICROGESTIN 24 FE, MICROGESTIN FE 1.5/30, MICROGESTIN FE 1/20, TARINA 24 FE, TARINA FE 1/20 EQ TABS 1 MG-20 MCG-75 MG	PV	PV	(Norethindrone & Eth Estradiol) ALYACEN 1/35, BALZIVA, BRIELLYN, DASETTA 1/35 (28), NECON 0.5/35 (28), NORTREL 0.5/35 (28), NORTREL 1/35 (21), NORTREL 1/35 (28), NYLIA 1/35, PHILITH, PIRMELLA 1/35, VYFEMLA, WERA 35 MCG-0.5 MG	PV	QL(1 EA daily); PV; PA
(Norethin Acet & Estrad-Fe) AUROVELA 24 FE, AUROVELA FE 1.5/30, AUROVELA FE 1/20, BLISOVI 24 FE, BLISOVI FE 1.5/30, BLISOVI FE 1/20, FEIRZA 1.5/30, FEIRZA 1/20, HAILEY 24 FE, HAILEY FE 1.5/30, HAILEY FE 1/20, JUNEL FE 1.5/30, JUNEL FE 1/20, JUNEL FE 24, LARIN 24 FE, LARIN FE 1.5/30, LARIN FE 1/20, LOESTRIN FE 1.5/30, LOESTRIN FE 1/20, MICROGESTIN 24 FE, MICROGESTIN FE 1.5/30, MICROGESTIN FE 1/20, TARINA 24 FE, TARINA FE 1/20 EQ TABS	PV	PV	(Norethindrone & Eth Estradiol) ALYACEN 1/35, BALZIVA, BRIELLYN, DASETTA 1/35 (28), NECON 0.5/35 (28), NORTREL 0.5/35 (28), NORTREL 1/35 (21), NORTREL 1/35 (28), NYLIA 1/35, PHILITH, PIRMELLA 1/35, VYFEMLA, WERA 35 MCG-0.4 MG	PV	PV
(Norethin Acet & Estrad-Fe) CHARLOTTE 24 FE, FINZALA, MIBELAS 24 FE CHEW	PV	PV	(Norethindrone & Eth Estradiol-Fe) KAITLIB FE, LAYOLIS FE, WYMZYA FE 35 MCG-0.4 MG	PV	PV
			(Norethindrone & Ethinyl Estradiol-Fe) KAITLIB FE, LAYOLIS FE, WYMZYA FE 25 MCG-0.8 MG-75 MG	PV	PV

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
(Norethindrone Acet & Eth Estra) AUROVELA 1.5/30, AUROVELA 1/20, HAILEY 1.5/30, JUNEL 1.5/30, JUNEL 1/20, LARIN 1.5/30, LARIN 1/20, LOESTRIN 1.5/30 (21), LOESTRIN 1/20 (21), MICROGESTIN 1.5/30, MICROGESTIN 1/20 TABS 1 MG-20 MCG	PV	PV	(Norgestimate-Ethinyl Estradiol) ESTARYLLA, MILI, MONO-LINYAH, NYMYO, PREVIFEM, SPRINTEC 28, VYLIBRA	PV	PV
(Norethindrone Acet & Eth Estra) AUROVELA 1.5/30, AUROVELA 1/20, HAILEY 1.5/30, JUNEL 1.5/30, JUNEL 1/20, LARIN 1.5/30, LARIN 1/20, LOESTRIN 1.5/30 (21), LOESTRIN 1/20 (21), MICROGESTIN 1.5/30, MICROGESTIN 1/20 TABS 1.5 MG-30 MCG	PV	PV	(Norgestrel & Ethinyl Estradiol) CRYSELLE-28, ELINEST, LOW-OGESTREL, TURQOZ 30 MCG-0.3 MG	PV	PV
(Norethindrone Acetate-Ethinyl Estradiol-Fe) TILIA FE, TRI-LEGEST FE, XARAH FE	PV	PV	BALCOLTRA <i>(levonorgestrel-ethinyl estradiol-iron)</i>	GP	QL(1 EA daily); PV
(Norethindrone-Eth Estradiol (Triphasic)) ALYACEN 7/7/7, ARANELLE, DASETTA 7/7/7, LEENA, NORTREL 7/7/7, NYLIA 7/7/7, PIRMELLA 7/7/7	PV	PV	BEYAZ <i>(drospirenone-ethinyl estradiol-levomefolate calcium)</i>	GP	PV
(Norgestimate-Ethinyl Estradiol (Triphasic)) TRI-ESTARYLLA, TRI-LINYAH, TRI-LO-ESTARYLLA, TRI-LO-MARZIA, TRI-LO-MILI, TRI-LO-SPRINTEC, TRI-MILI, TRI-NYMYO, TRI-PREVIFEM, TRI-SPRINTEC, TRI-VYLIBRA, TRI-VYLIBRA LO	PV	PV	<i>desogestrel & ethinyl estradiol</i>	PV	PV
			<i>desogestrel-ethinyl estradiol (biphasic)</i>	PV	PV
			<i>drospirenone-ethinyl estradiol</i>	PV	PV
			<i>drospirenone-ethinyl estradiol-levomefolate calcium</i>	PV	PV
			<i>ethynodiol diacet & eth estrad</i>	PV	PV
			FALESSA	PV	PV; PA
			GENERESS FE <i>(norethindrone & ethinyl estradiol-fe)</i>	GP	PV
			<i>levonorgestrel & eth estradiol TABS</i>	PV	PV
			<i>levonorgestrel-eth estradiol (triphasic)</i>	PV	PV
			<i>levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG</i>	PV	PV
			<i>levonorgestrel-ethinyl estradiol (continuous)</i>	PV	PV
			<i>levonorgestrel-ethinyl estradiol-iron</i>	PV	QL(1 EA daily); PV
			LO LOESTRIN FE TABS	PV	QL(1 EA daily); PV

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
LOSEASONIQUE <i>(levonorgestrel-ethinyl estradiol (91-day))</i>	GP	PV	YASMIN 28 <i>(drospirenone-ethinyl estradiol)</i>	GP	PV
MINASTRIN 24 FE CHEW <i>(norethrin acet & estrad-fe)</i>	GP	PV	YAZ <i>(drospirenone-ethinyl estradiol)</i>	GP	PV
MIRCETTE <i>(desogestrel-ethinyl estradiol (biphasic))</i>	GP	PV	Combination Contraceptives - Transdermal		
NATAZIA	PV	QL(1 EA daily); PV	(Norelgestromin-Ethinyl Estradiol) XULANE, ZAFEMY	PV	PV
NEXTSTELLIS	PV	QL(1 EA daily); PV	<i>norelgestromin-ethinyl estradiol</i>	PV	PV
<i>norethrin acet & estrad-fe CAPS</i>	PV	QL(1 EA daily); PV; PA	TWIRLA	PV	PV
<i>norethrin acet & estrad-fe CHEW</i>	PV	PV	Combination Contraceptives - Vaginal		
<i>norethrin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG</i>	PV	PV	(Etonogestrel-Ethinyl Estradiol) ELURYNG, ENILLORING, HALOETTE	PV	PV
<i>norethindrone & ethinyl estradiol-fe</i>	PV	PV	ANNOVERA	PV	PV
<i>norethindrone acet & eth estra TABS</i>	PV	PV	<i>etongestrel-ethinyl estradiol</i>	PV	PV
<i>norethindrone acetate-ethinyl estradiol-fe</i>	PV	PV	NUVARING <i>(etongestrel-ethinyl estradiol)</i>	GP	PV
<i>norgestimate-ethinyl estradiol</i>	PV	PV	Copper Contraceptives - IUD		
<i>norgestimate-ethinyl estradiol (triphasic)</i>	PV	PV	PARAGARD INTRAUTERINE COPPER	PV	PV
QUARTETTE <i>(levonorgestrel-ethinyl estradiol (91-day))</i>	GP	PV	Emergency Contraceptives		
SAFYRAL <i>(drospirenone-ethinyl estradiol-levomefolate calcium)</i>	GP	PV	(Levonorgestrel (Emergency OC)) AFTERA, AFTERPILL, CURAE, ECONTRA EZ, ECONTRA ONE-STEP, HER STYLE, MY CHOICE, MY WAY, NEW DAY, OPCICON ONE-STEP, OPTION 2, REACT, TAKE ACTION 1.5 MG	PV	PV
SEASONIQUE <i>(levonorgestrel-ethinyl estradiol (91-day))</i>	GP	PV	ELLA	PV	PV
TAYTULLA CAPS <i>(norethrin acet & estrad-fe)</i>	GP	QL(1 EA daily); PV; PA	<i>levonorgestrel (emergency oc) 1.5 MG</i>	PV	PV
TYBLUME CHEW	PV	PV			

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PLAN B ONE-STEP <i>(levonorgestrel (emergency oc))</i>	GP	PV	(Dexamethasone) HIDEX 6-DAY, TAPERDEX 6-DAY TBPK	1	
Progestin Contraceptives - Implants			(Dexamethasone) HIDEX 6-DAY, TAPERDEX 6-DAY TBPK	1	
NEXPLANON	PV	PV	(Prednisolone) MILLIPRED TABS	1	
Progestin Contraceptives - Injectable			<i>budesonide CPEP</i>	1	
DEPO-PROVERA SUSP IM (<i>medroxyprogesterone acetate (contraceptive)</i>)	GP	PV	<i>budesonide TB24</i>	1	PA
DEPO-PROVERA SUSY IM (<i>medroxyprogesterone acetate (contraceptive)</i>)	GP	PV	CORTEF TABS <i>(hydrocortisone)</i>	GP	
DEPO-SUBQ PROVERA 104 SUSY SC	PV	PV	DEXAMETHASONE INTENSOL CONC	2	
<i>medroxyprogesterone acetate (contraceptive) SUSP IM</i>	PV	PV	<i>dexamethasone sodium phosphate SOLN IJ</i>	SP	PA
<i>medroxyprogesterone acetate (contraceptive) SUSY IM</i>	PV	PV	DEXAMETHASONE SODIUM PHOSPHATE SOLN IJ	SP	PA
Progestin Contraceptives - IUD			<i>dexamethasone sodium phosphate SOSY IJ 4 MG/ML</i>	SP	PA
KYLEENA	PV	PV	<i>dexamethasone ELIX</i>	1	
LILETTA (52 MG)	PV	PV	<i>dexamethasone SOLN</i>	1	
MIRENA (52 MG)	PV	PV	<i>dexamethasone TABS</i>	1	
SKYLA	PV	PV	<i>dexamethasone TBPK</i>	1	
Progestin Contraceptives - Oral			<i>hydrocortisone TABS</i>	1	
(Norethindrone (Contraceptive)) CAMILA, DEBLITANE, EMZAHH, ERRIN, HEATHER, INCASSIA, JENCYCLA, LYLEQ, LYZA, NORA-BE, NORLYROC, SHAROBEL	PV	PV	MEDROL TABS 4 MG, 8 MG, 16 MG <i>(methylprednisolone)</i>	GP	
<i>norethindrone (contraceptive)</i>	PV	PV	MEDROL TABS	2	
OPILL	PV	PV	MEDROL TBPK <i>(methylprednisolone)</i>	GP	
SLYND	PV	PV	<i>methylprednisolone TABS</i>	1	
CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions			<i>methylprednisolone TBPK</i>	1	
Glucocorticosteroids			MILLIPRED TABS	2	

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>prednisolone sodium phosphate SOLN 10 MG/5ML, 15 MG/5ML, 20 MG/5ML, 25 MG/5ML</i>	1		Cough/Cold/Allergy Combinations		
<i>prednisolone sodium phosphate TBDP</i>	1		(Guaiifenesin-Codeine) G TUSSIN AC, MAXI-TUSS AC SOLN 10 MG/5ML-100 MG/5ML	1	
<i>prednisolone SOLN</i>	1		(Guaiifenesin-Codeine) GUAIATUSSIN AC, GUAIFENESIN AC SYRP	1	
<i>prednisolone TABS</i>	1		(Promethazine & Phenylephrine) PROMETHAZINE VC SYRP	1	
PREDNISONE INTENSOL CONC	2		(Promethazine-Phenylephrine-Codeine) PROMETHAZINE VC/CODEINE	1	
<i>prednisone SOLN</i>	1		ACTIDOM DMX LIQD	3	
<i>prednisone TABS</i>	1		BIO-DTUSS DMX LIQD	3	
<i>prednisone TBPK</i>	1		CLARINEX-D 12 HOUR TB12	3	PA
RAYOS TBEC	3	PA	CODITUSSIN AC LIQD	3	
UCERIS TB24 (<i>budesonide</i>)	GP	PA	DOMETUSS-DMX LIQD	3	
Mineralocorticoids			GILPHEX TR TABS 10 MG-388 MG	3	RX/OTC
<i>fludrocortisone acetate TABS</i>	1		GILTUSS COUGH & COLD TABS	3	
COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms					
Antitussives			GILTUSS SINUS & CONGESTION TABS	3	RX/OTC
(Hydrocodone Bitartrate-Homatropine Methylbromide) HYDROMET SOLN	1		<i>guaifenesin-codeine SOLN</i>	1	
<i>benzonatate</i>	1		<i>hydrocodone polistirex-chlorpheniramine polistirex SUER</i>	1	
HYCODAN SOLN (<i>hydrocodone bitartrate-homatropine methylbromide</i>)	GP		NEOTUSS PLUS LIQD	3	
HYCODAN TABS 1.5 MG-5 MG (<i>hydrocodone bitartrate-homatropine methylbromide</i>)	GP		<i>promethazine & phenylephrine SYRP</i>	1	
<i>hydrocodone bitartrate-homatropine methylbromide SOLN</i>	1		<i>promethazine w/codeine SOLN</i>	1	
<i>hydrocodone bitartrate-homatropine methylbromide TABS</i>	1		<i>promethazine w/codeine SYRP</i>	1	
			<i>promethazine-dm SYRP</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>promethazine-phenylephrine-codeine</i>	1		(Isotretinoin) ACCUTANE, AMNESTEEM, CLARAVIS, MYORISAN, ZENATANE 10 MG, 20 MG, 40 MG	1	Greater than 5 months requires PA; QL(2 EA daily)
TUSSLIN PEDIATRIC LIQD	3		(Isotretinoin) ACCUTANE, AMNESTEEM, CLARAVIS, MYORISAN, ZENATANE 10 MG, 20 MG, 30 MG, 40 MG	1	Greater than 5 months requires PA; QL(2 EA daily)
TUSSLIN LIQD	3		(Sulfacetamide Sodium W/Sulfur) AVAR-E EMOLlient, AVAR-E GREEN, SSS 10-5 CREA 10 %-5 %	1	
Misc. Respiratory Inhalants			(Sulfacetamide Sodium W/Sulfur) BP 10-1, SULFAMEZ WASH EMUL 10 %-1 %	1	
(Sodium Chloride (Inhalant)) NEBUSAL, PULMOSAL NEBU 3 %	1		(Sulfacetamide Sodium W/Sulfur) SSS 10-5 FOAM	1	
(Sodium Chloride (Inhalant)) NEBUSAL, PULMOSAL NEBU 7 %	1		(Sulfacetamide Sodium W/Sulfur) SULFACEANSE 8/4 SUSP 8 %-4 %	1	
HYPERSAL NEBU	3		(Sulfacetamide Sodium-Sulfur In Urea Vehicle) BP CLEANSING WASH EMUL 10 %-10 %-4 %	1	
HYPERSAL NEBU (<i>sodium chloride (inhalant)</i>)	GP		(Tretinoin) AVITA CREA 0.025 %	1	
NEBUSAL NEBU	3		(Tretinoin) AVITA GEL 0.025 %	1	
<i>sodium chloride (inhalant) NEBU 0.9 %, 3 %, 7 %, 10 %</i>	1		ABSORICA 10 MG, 20 MG, 30 MG, 40 MG (<i>isotretinoin</i>)	GP	Greater than 5 months requires PA; QL(2 EA daily)
Mucolytics			ABSORICA 25 MG, 35 MG (<i>isotretinoin</i>)	GP	Limited to 5 months of treatment; QL(2 EA daily); PA
<i>acetylcysteine SOLN</i>	1		ABSORICA LD	3	Limited to 5 months of treatment; QL(2 EA daily); PA
DERMATOLOGICALS - Drugs to Treat Skin Conditions			ACZONE 7.5 % (<i>dapsone (topical)</i>)	GP	QL(2 GM daily); PA
Acne Products					
(Adapalene) ADAPALENE TREATMENT, CVS ADAPALENE GEL 0.1 %	1	Limit 45gms per month; QL(1.5 GM daily); RX/OTC			
(Clindamycin Phosphate (Topical)) CLINDACIN ETZ, CLINDACIN-P SWAB	1				
(Clindamycin Phosphate (Topical)) CLINDACIN FOAM	1				
(Clindamycin Phosphate-Benzoyl Peroxide (Refrigerate)) NEUAC	1				
(Erythromycin (Acne Aid)) ERY PADS	1				

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ACZONE 5 % (<i>dapsone (topical)</i>)	GP	PA	<i>clindamycin phosphate (topical) SWAB</i>	1	
<i>adapalene-benzoyl peroxide GEL 2.5 %-0.1 %</i>	1		<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	1	
<i>adapalene CREA</i>	1	Limit 45gms per month; QL(1.5 GM daily)	<i>clindamycin phosphate-benzoyl peroxide GEL 5 %-1 %</i>	1	
<i>adapalene GEL</i>	1	Limit 45gms per month; QL(1.5 GM daily); RX/OTC	<i>clindamycin phosphate-tretinoin</i>	1	
ATRALIN GEL (<i>tretinoin</i>)	GP		<i>dapsone (topical) 7.5 %</i>	1	QL(2 GM daily); PA
AVAR LS CLEANSER LIQD (<i>sulfacetamide sodium w/ sulfur</i>)	GP		<i>dapsone (topical) 5 %</i>	1	PA
AVAR-E LS CREA (<i>sulfacetamide sodium w/ sulfur</i>)	GP		DIFFERIN CREA (<i>adapalene</i>)	GP	Limit 45gms per month; QL(1.5 GM daily)
BENZAMYCIN GEL (<i>benzoyl peroxide-erythromycin</i>)	GP		DIFFERIN GEL (<i>adapalene</i>)	GP	Limit 45gms per month; QL(1.5 GM daily); RX/OTC
BENZEPRO CREAMY WASH LIQD	3		DIFFERIN LOTN	3	
<i>benzoyl peroxide-erythromycin GEL</i>	1		EPSOLAY CREA	3	
CLEOCIN-T LOTN (<i>clindamycin phosphate (topical)</i>)	GP		ERYGEL GEL (<i>erythromycin (acne aid)</i>)	GP	
CLINDACIN ETZ	3		<i>erythromycin (acne aid) GEL</i>	1	
CLINDACIN PAC	3		<i>erythromycin (acne aid) SOLN</i>	1	
CLINDAGEL GEL (<i>clindamycin phosphate (topical)</i>)	GP		FABIOR FOAM	3	Limit 50gms per month; QL(1.67 GM daily)
<i>clindamycin phosphate (topical) FOAM</i>	1		<i>isotretinoin 25 MG, 35 MG</i>	1	Limited to 5 months of treatment; QL(2 EA daily); PA
<i>clindamycin phosphate (topical) GEL</i>	1		<i>isotretinoin 10 MG, 20 MG, 30 MG, 40 MG</i>	1	Greater than 5 months requires PA; QL(2 EA daily)
<i>clindamycin phosphate (topical) LOTN</i>	1		KLARON (<i>sulfacetamide sodium (acne)</i>)	GP	
<i>clindamycin phosphate (topical) SOLN</i>	1		NEUTROGENA CLEAR PORE LIQD	3	

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PLEXION CLEANSER LIQD (<i>sulfacetamide sodium w/ sulfur</i>)	GP		SUMAXIN PADS	3	
PLEXION CLEANSING CLOTH PADS	3		TAZAROTENE FOAM	3	Limit 50gms per month; QL(1.67 GM daily)
PLEXION CREA (<i>sulfacetamide sodium w/ sulfur</i>)	GP		<i>tretinoin microsphere 0.04 %, 0.1 %</i>	1	
PLEXION LOTN (<i>sulfacetamide sodium w/ sulfur</i>)	GP		<i>tretinoin CREA 0.025 %, 0.05 %, 0.1 %</i>	1	
PR BENZOYL PEROXIDE WASH LIQD	3		<i>tretinoin GEL 0.01 %, 0.025 %, 0.05 %</i>	1	
RETIN-A MICRO (<i>tretinoin microsphere</i>)	GP		VELTIN (<i>clindamycin phosphate-tretinoin</i>)	GP	
RETIN-A MICRO PUMP 0.04 %, 0.1 % (<i>tretinoin microsphere</i>)	GP		ZIANA (<i>clindamycin phosphate-tretinoin</i>)	GP	
RETIN-A CREA (<i>tretinoin</i>)	GP		Agents for External Genital and Perianal Warts		
RETIN-A GEL (<i>tretinoin</i>)	GP		VEREGEN	3	Limit 30gms per month; QL(1 GM daily)
<i>sulfacetamide sodium (acne)</i>	1		Antibiotics - Topical		
<i>sulfacetamide sodium w/ sulfur CREA</i>	1		ALTABAX	3	
<i>sulfacetamide sodium w/ sulfur LIQD 10 %-2 %, 9 %-4 %, 9 %-4.5 %, 9.8 %-4.8 %</i>	1		CENTANY AT KIT	3	
<i>sulfacetamide sodium w/ sulfur LOTN 9.8 %-4.8 %</i>	1		<i>gentamicin sulfate (topical) CREA</i>	1	
<i>sulfacetamide sodium w/ sulfur LOTN 10 %-5 %</i>	1	QL(1 GM daily)	<i>gentamicin sulfate (topical) OINT</i>	1	
<i>sulfacetamide sodium w/ sulfur PADS 10 %-4 %</i>	1		<i>mupirocin OINT</i>	1	
<i>sulfacetamide sodium w/ sulfur SUSP</i>	1		NEO-SYNALAR	3	
SULFACETAMIDE SODIUM-SULFUR PADS	3		Antifungals - Topical		
SULFACETAMIDE-SULFUR IN UREA EMUL	3		(Clotrimazole (Topical)) ATHLETES FOOT, CVS CLOTRIMAZOLE SOLN	1	RX/OTC
SUMADAN WASH LIQD (<i>sulfacetamide sodium w/ sulfur</i>)	GP		(Iodoquinol-HC) CORTI-SAV	1	
			(Iodoquinol-Hydrocortisone In Aloe Vehicle) IODOQUIMEZ-HC	1	
			(Ketoconazole (Topical)) KETODAN FOAM	1	
			<i>ciclopirox olamine CREA</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ciclopirox olamine SUSP	1		NAFTIN GEL 2 % (<i>naftifine hcl</i>)	GP	
ciclopirox GEL	1		nystatin (topical) CREA	1	
ciclopirox SHAM	1		nystatin (topical) OINT	1	
clotrimazole (topical) SOLN	1	RX/OTC	nystatin-triamcinolone CREA	1	
clotrimazole w/ betamethasone CREA	1	Limit 1 tube per month; QL(1.5 GM daily)	nystatin-triamcinolone OINT	1	
clotrimazole w/ betamethasone LOTN	1	QL(2 ML daily)	oxiconazole nitrate CREA	1	
econazole nitrate CREA	1		OXISTAT LOTN	3	
ERTACZO	3	PA	sulconazole nitrate CREA	1	
EXELDERM CREA (sulconazole nitrate)	GP		sulconazole nitrate SOLN	1	
EXELDERM SOLN (sulconazole nitrate)	GP		VUSION (miconazole-zinc oxide-white petrolatum)	GP	
EXODERM	3		VYTONE 1.9 %-1 % (<i>iodoquinol-hydrocortisone in aloe vehicle</i>)	GP	
<i>iodoquinol-hc</i>	1		Anti-inflammatory Agents - Topical		
<i>iodoquinol-hydrocortisone in aloe vehicle</i>	1				
<i>iodoquinol-hydrocortisone-aloe polysaccharide</i>	1				
ketoconazole (topical) CREA	1	QL(2 GM daily)			
ketoconazole (topical) FOAM	1				
ketoconazole (topical) SHAM 2 %	1				
LOPROX SHAM (ciclopirox)	GP				
LOPROX SUSP (ciclopirox olamine)	GP				
<i>luliconazole</i>	1				
LUZU (luliconazole)	GP				
<i>miconazole-zinc oxide-white petrolatum</i>	1				
<i>naftifine hcl CREA</i>	1				
<i>naftifine hcl GEL 2 %</i>	1				
NAFTIN GEL 1 %	3				

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
(Diclofenac Sodium (Topical)) ALEVE ARTHRITIS PAIN, ARTHRITIS PAIN RELIEVER, ASPERCREME ARTHRITIS PAIN, CVS DICLOFENAC SODIUM, EQ ARTHRITIS PAIN, EQ ARTHRITIS PAIN RELIEVER, FT ARTHRITIS PAIN, GNP ARTHRITIS PAIN, GNP DICLOFENAC SODIUM, GOODSENSE ARTHRITIS PAIN, KLS ARTHRITIS PAIN RELIEF, KLS DICLOFENAC SODIUM, MM ARTHRITIS PAIN RELIEVER, MOTRIN ARTHRITIS PAIN, PHARMACIST CHOICE DICLOFENAC, QC DICLOFENAC SODIUM, SM ARTHRITIS PAIN GEL EX	1	RX/OTC	<i>diclofenac sodium (actinic keratoses) EX</i>	1	PA
<i>diclofenac epolamine PTCH EX</i>	1		EFUDEX CREA (<i>fluorouracil (topical)</i>)	GP	
<i>diclofenac sodium (topical) GEL EX</i>	1	RX/OTC	<i>fluorouracil (topical) CREA</i>	1	
<i>diclofenac sodium (topical) SOLN EX 2 %</i>	1	Limit 1 bottle per month; QL(4 GM daily); PA	<i>fluorouracil (topical) SOLN</i>	1	
<i>diclofenac sodium (topical) SOLN EX 1.5 %</i>	1	QL(5 ML daily)	PANRETIN	3	PA
FLECTOR PTCH EX (<i>diclofenac epolamine</i>)	GP		TARGRETIN (<i>bexarotene (topical)</i>)	SP	PA
PENNSAID SOLN EX 2 % (<i>diclofenac sodium (topical)</i>)	GP	Limit 1 bottle per month; QL(4 GM daily); PA	VALCHLOR	SP	PA
Antineoplastic or Premalignant Lesion Agents - Topical			Antipruritics - Topical		
<i>bexarotene (topical)</i>	SP	PA	<i>doxepin hcl (antipruritic)</i>	1	
CARAC CREA	2		PRUDOXIN (<i>doxepin hcl (antipruritic)</i>)	GP	
			<i>ZONALON (doxepin hcl (antipruritic))</i>	GP	
			Antipsoriatics		
			(Calcipotriene) CALCITRENE OINT	1	QL(5 GM daily)
			<i>acitretin</i>	1	
			<i>calcipotriene CREA</i>	1	QL(5 GM daily)
			<i>calcipotriene FOAM</i>	1	PA
			CALCIPOTRIENE FOAM	3	PA
			<i>calcipotriene OINT</i>	1	QL(5 GM daily)
			<i>calcipotriene SOLN</i>	1	
			<i>calcitriol (topical)</i>	1	Limited 100 gms per month; QL(3.4 GM daily)
			COSENTYX (300 MG DOSE) SOSY	2	PA
			COSENTYX SENSOREADY (300 MG) SOAJ	2	PA
			COSENTYX SENSOREADY PEN SOAJ	2	PA
			COSENTYX SOSY	2	PA

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits	
DOVONEX CREA <i>(calcipotriene)</i>	GP	QL(5 GM daily)	<i>acyclovir topical CREA</i>	1		
<i>methoxsalen rapid</i>	1		<i>acyclovir topical OINT</i>	1	QL(1 GM daily)	
SKYRIZI (150 MG DOSE) PSKT	2	PA	DENAVIR (<i>penciclovir</i>)	GP	Limit 5gms per month; QL(0.17 GM daily)	
SKYRIZI PEN SOAJ	2	PA	<i>penciclovir</i>	1	Limit 5gms per month; QL(0.17 GM daily)	
SKYRIZI SOSY	2	PA	XERESE	3	Limit 5gms per month; QL(0.17 GM daily)	
SORILUX FOAM	3	PA	ZOVIRAX CREA <i>(acyclovir topical)</i>	GP		
STELARA SOSY	2	PA	ZOVIRAX OINT (<i>acyclovir topical</i>)	GP	QL(1 GM daily)	
<i>tazarotene CREA</i>	1		Burn Products			
<i>tazarotene GEL</i>	1		(Silver Sulfadiazine) SSD	1		
TAZORAC CREA <i>(tazarotene)</i>	GP		<i>mafenide acetate PACK</i>	1		
TAZORAC GEL <i>(tazarotene)</i>	GP		SILVADENE (<i>silver sulfadiazine</i>)	GP		
TREMFYA SOAJ	2	PA	<i>silver sulfadiazine</i>	1		
TREMFYA SOSY	2	PA	SULFAMYLYON CREA	3		
VECTICAL (<i>calcitriol topical</i>)	GP	Limited 100 gms per month; QL(3.4 GM daily)	SULFAMYLYON PACK 5 % (<i>mafenide acetate</i>)	GP		
Antiseborrheic Products			Corticosteroids - Topical			
OVACE PLUS WASH LIQD (<i>sulfacetamide sodium</i>)	GP		(Clobetasol Propionate Emollient Base)	1		
OVACE PLUS SHAM (<i>sulfacetamide sodium</i>)	GP		CLOBETASOL PROPIONATE E 0.05 %			
OVACE WASH LIQD (<i>sulfacetamide sodium</i>)	GP		(Clobetasol Propionate Emulsion) TOVET	1		
<i>selenium sulfide LOTN 2.5 %</i>	1		(Clobetasol Propionate) CLODAN SHAM	1		
<i>selenium sulfide SHAM 2.25 %</i>	1		(Desonide) DESRX GEL	1		
SODIUM SULFACETAMIDE-BAKUCHIOL LIQD	3		(Hydrocortisone (Topical)) ALA SCALP LOTN 2 %	1		
<i>sulfacetamide sodium LIQD</i>	1		(Hydrocortisone (Topical)) ALA-CORT CREA 2.5 %	1		
<i>sulfacetamide sodium SHAM 10 %</i>	1					
Antivirals - Topical						

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
(Hydrocortisone (Topical)) AQUAPHOR ITCH RELIEF CHILDREN, AQUAPHOR ITCH RELIEF MAX STR, CORTIZONE-10, CORTIZONE-10 WATER RESISTANT, CVS CORTISONE MAXIMUM STRENGTH, EQL ANTI- ITCH MAXIMUM STRENGTH, FT ITCH RELIEF MAX STRENGTH, GNP HYDROCORTISONE MAX ST, GOODSENSE ANTI-ITCH MAXIMUM ST, RA ANTI-ITCH MAXIMUM STRENGTH, SB HYDROCORTISONE MAX ST, SM HYDROCORTISONE MAX ST OINT 1 %	1	RX/OTC	<i>betamethasone dipropionate (topical) OINT</i>	1	
			<i>betamethasone dipropionate augmented CREA</i>	1	
			<i>betamethasone dipropionate augmented GEL 0.05 %</i>	1	
			<i>betamethasone dipropionate augmented LOTN</i>	1	
			<i>betamethasone dipropionate augmented OINT</i>	1	
			<i>betamethasone valerate CREA</i>	1	
			<i>betamethasone valerate FOAM</i>	1	
			<i>betamethasone valerate LOTN</i>	1	
			<i>betamethasone valerate OINT</i>	1	
			<i>calcipotriene- betamethasone dipropionate OINT</i>	1	ST
			<i>calcipotriene- betamethasone dipropionate SUSP</i>	1	QL(2 GM daily); ST
			CAPEX SHAM	2	
			<i>clobetasol propionate emollient base 0.05 %</i>	1	
			<i>clobetasol propionate emulsion</i>	1	
			<i>clobetasol propionate CREA 0.05 %</i>	1	
			<i>clobetasol propionate FOAM</i>	1	
			<i>clobetasol propionate GEL 0.05 %</i>	1	
			<i>clobetasol propionate LIQD</i>	1	

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OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
clobetasol propionate <i>LOTN</i>	1		DIPROLENE OINT (<i>betamethasone dipropionate augmented</i>)	GP	
clobetasol propionate <i>OINT 0.05 %</i>	1		EPIFOAM FOAM	3	
clobetasol propionate <i>SHAM</i>	1		fluocinolone acetonide <i>CREA</i>	1	
clobetasol propionate <i>SOLN 0.05 %</i>	1		fluocinolone acetonide <i>OIL</i>	1	
CLOBEX SPRAY LIQD (<i>clobetasol propionate</i>)	GP		fluocinolone acetonide <i>OINT</i>	1	
CLOBEX LOTN 0.05 % (<i>clobetasol propionate</i>)	GP		fluocinolone acetonide <i>SOLN</i>	1	
CLOBEX SHAM (<i>clobetasol propionate</i>)	GP		fluocinonide emulsified <i>base</i>	1	
clorcortolone pivalate	1		fluocinonide <i>CREA</i>	1	
CLODERM (<i>clorcortolone pivalate</i>)	GP		fluocinonide <i>GEL</i>	1	
CORDRAN CREA (<i>flurandrenolide</i>)	GP		fluocinonide <i>OINT</i>	1	
CORDRAN TAPE	3		fluocinonide <i>SOLN</i>	1	
CORTANE-B	3		flurandrenolide <i>CREA</i>	1	
DERMA-SMOOTH/FS BODY OIL (<i>fluocinolone acetonide</i>)	GP		fluticasone propionate <i>CREA 0.05 %</i>	1	
DERMA-SMOOTH/FS SCALP OIL (<i>fluocinolone acetonide</i>)	GP		fluticasone propionate <i>LOTN</i>	1	
desonide <i>CREA</i>	1		fluticasone propionate <i>OINT</i>	1	
desonide <i>GEL</i>	1		halcinonide <i>CREA</i>	1	
desonide <i>LOTN</i>	1		halcinonide <i>SOLN 0.1 %</i>	1	
desonide <i>OINT</i>	1		halobetasol propionate <i>CREA</i>	1	
DESOWEN CREA (<i>desonide</i>)	GP		halobetasol propionate <i>OINT</i>	1	
desoximetasone <i>CREA</i>	1		HALOG CREA (<i>halcinonide</i>)	GP	
desoximetasone <i>GEL</i>	1		HALOG OINT	3	
desoximetasone <i>LIQD</i>	1		HALOG SOLN	3	
desoximetasone <i>OINT</i>	1		hydrocortisone (<i>topical</i>) <i>CREA 2.5 %</i>	1	
diflorasone diacetate <i>CREA</i>	1		hydrocortisone (<i>topical</i>) <i>LOTN 2 %, 2.5 %</i>	1	
diflorasone diacetate <i>OINT</i>	1		hydrocortisone (<i>topical</i>) <i>OINT 1 %, 2.5 %</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
hydrocortisone (topical) SOLN 2.5 %	1		pramoxine-hc CREA 2.5 %-1 %	1	
hydrocortisone butyrate hydrophilic lipo base	1		prednicarbate OINT	1	
hydrocortisone butyrate CREA	1		SYNALAR CREA (fluocinolone acetonide)	GP	
hydrocortisone butyrate LOTN	1		SYNALAR OINT (fluocinolone acetonide)	GP	
hydrocortisone butyrate OINT	1		SYNALAR SOLN (fluocinolone acetonide)	GP	
hydrocortisone butyrate SOLN	1		TACLONEX OINT (calcipotriene- betamethasone dipropionate)	GP	ST
hydrocortisone valerate CREA	1		TACLONEX SUSP (calcipotriene- betamethasone dipropionate)	GP	QL(2 GM daily); ST
hydrocortisone valerate OINT	1		TOPICORT SPRAY LIQD (desoximetasone)	GP	
IMEPEKLO LOTN	2		TOPICORT CREA (desoximetasone)	GP	
KENALOG AERS (triamcinolone acetonide (topical))	GP		TOPICORT GEL (desoximetasone)	GP	
LOCOID LIPOCREAM	3		TOPICORT OINT (desoximetasone)	GP	
LOCOID LOTN (hydrocortisone butyrate)	GP		triamcinolone acetonide (topical) AERS	1	
LUXIQ FOAM (betamethasone valerate)	GP		triamcinolone acetonide (topical) CREA	1	
mometasone furoate CREA	1		triamcinolone acetonide (topical) LOTN	1	
mometasone furoate OINT	1		triamcinolone acetonide (topical) OINT	1	
mometasone furoate SOLN	1		TRIDESILON CREA 0.05 % (desonide)	GP	
NUCORT LOTN	3		VANOS CREA (fluocinonide)	GP	
OLUX-E (clobetasol propionate emulsion)	GP		VERDESO FOAM	3	
PANDEL	3		Emollient/Keratolytic Agents		
PRAMOSONE CREA 2.5 %-1 % (pramoxine-hc)	GP		(Urea) CEROVEL LOTN 40 %	1	
PRAMOSONE CREA 1 %-1 %	3				
PRAMOSONE LOTN	3				
PRAMOSONE OINT	3				

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits	
(Urea) DERMACINRX UREA, UREDEB, UREMEZ-40, XUREA CREA 41 %	1		ZYCLARA PUMP (<i>imiquimod</i>)	GP	QL(1 GM daily)	
(Urea) DERMACINRX UREA, UREDEB, UREMEZ-40, XUREA CREA 39 %	1		ZYCLARA PUMP	3	Limit 2 bottles per 28 days; QL(0.6 GM daily)	
(Urea) GORDONS UREA CREA 40 %	1	RX/OTC	Immunosuppressive Agents - Topical			
(Urea) UMECTA MOUSSE FOAM	1		ELIDEL (<i>pimecrolimus</i>)	GP	QL(2 GM daily)	
(Urea) UREA NAIL GEL 45 %	1		<i>pimecrolimus</i>	1	QL(2 GM daily)	
CEM-UREA SOLN	3		PROTOPIC OINT (<i>tacrolimus (topical)</i>)	GP		
HYDRO 40 FOAM (<i>urea</i>)	GP		<i>tacrolimus (topical) OINT</i>	1		
URAMAXIN GEL (<i>urea</i>)	GP		Keratolytic/Antimitotic/Vesicant Agents			
<i>urea CREA 39 %, 40 %, 41 %, 45 %, 47 %</i>	1		(Salicylic Acid) KERALYT SHAM 6 %	1		
<i>urea LOTN 40 %</i>	1		(Salicylic Acid) SALICYLIC ACID WART REMOVER LIQD 27.5 %	1		
Emollients			BENSAL HP OINT	3	RX/OTC	
(Lactic Acid (Ammonium Lactate)) AL12, AMLACTIN DAILY, AMLACTIN DAILY NOURISH, CVS HYDRATING SKIN TREATMENT, CVS SKIN TREATMENT LOTN 12 %	1	RX/OTC	CONDYLOX GEL (<i>podofilox</i>)	GP		
<i>lactic acid (ammonium lactate) CREA</i>	1	RX/OTC	MG217 PSORIASIS MULTI-SYMPTOM OINT	3	RX/OTC	
<i>lactic acid (ammonium lactate) LOTN 12 %</i>	1	RX/OTC	PODOCON-25 SOLN	3		
LACTIC ACID LOTN	3		<i>podofilox GEL</i>	1		
Enzymes - Topical			<i>podofilox SOLN</i>	1		
SANTYL OINT	3		<i>salicylic acid FOAM</i>	1		
Immunomodulating Agents - Topical			SALICYLIC ACID OINT	3	RX/OTC	
<i>imiquimod 5 %</i>	1		<i>salicylic acid SHAM 6 %</i>	1		
<i>imiquimod 3.75 %</i>	1	QL(1 GM daily)	<i>salicylic acid SOLN 26 %</i>	1		
ZYCLARA (<i>imiquimod</i>)	GP	QL(1 EA daily)	SALIMEZ CREA	3		
Local Anesthetics - Topical			SALVAX FOAM (<i>salicylic acid</i>)	GP		

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
(Lidocaine Hcl) BURN GEL, JELCAINE STERILE, REGENECARE HA, XEROBURN GEL 2 %	1	RX/OTC	Misc. Dermatological Products		
(Lidocaine Hcl) GLYDO PRSY	1		ALADERM PLUS EMUL	3	
(Lidocaine Hcl) LIDOPIN, LYDEXA, NEUROZYL, TRILOCAINE CREA 3 %	1		CERACADE EMUL	3	
(Lidocaine Hcl) LIDO-SORB, ZIONODIL, ZIONODIL 100 LOTN	1		EMULSION SB EMUL	3	
(Lidocaine) LIDOCAN, TRIDACAIN II, TRIDACAIN III PTCH 5 %	1	QL(3 EA daily)	EPICERAM EMUL	3	
(Lidocaine) PREMIUM LIDOCAINE OINT 5 %	1		ILIDERM EMUL	3	
CRYODOSE TA	3	RX/OTC	KAMDOY EMUL	3	
<i>ethyl chloride</i>	1		KIVIK EMUL	3	
ETHYL CHLORIDE	3		PENLEN EMUL	3	
GEBAUERS INSTANT ICE	3	RX/OTC	PHLAG SPRAY EMUL	3	
GEBAUERS PAIN EASE	3	RX/OTC	SYNERDERM EMUL	3	
GEBAUERS SPRAY AND STRETCH	3	RX/OTC	Misc. Topical		
<i>lidocaine hcl CREA 3 %</i>	1		DRYSOL SOLN	2	
<i>lidocaine hcl GEL 2 %</i>	1		XERAC AC	3	
<i>lidocaine hcl LOTN</i>	1		Phosphodiesterase 4 (PDE4) Inhibitors - Topical		
<i>lidocaine hcl PRSY</i>	1		EUCRISA	3	PA
<i>lidocaine hcl SOLN</i>	1		Rosacea Agents		
<i>lidocaine OINT 5 %</i>	1		<i>azelaic acid GEL</i>	1	
<i>lidocaine-prilocaine CREA</i>	1		<i>brimonidine tartrate (topical)</i>	1	PA
<i>lidocaine PTCH 5 %</i>	1	QL(3 EA daily)	<i>doxycycline (rosacea)</i>	1	PA
LIDODERM PTCH (<i>lidocaine</i>)	GP	QL(3 EA daily)	FINACEA FOAM	3	
LIDODOSE PEDIATRIC BULK PACK GEL	3	RX/OTC	FINACEA GEL (<i>azelaic acid</i>)	GP	
LIDODOSE GEL	3	RX/OTC	<i>ivermectin (rosacea)</i>	1	QL(1 GM daily); PA
LIDORX GEL	3	RX/OTC	METROCREAM CREA (<i>metronidazole (topical)</i>)	GP	
SYNERA PTCH	3		METROLOTION LOTN (<i>metronidazole (topical)</i>)	GP	QL(2 ML daily)
			<i>metronidazole (topical) CREA</i>	1	
			<i>metronidazole (topical) GEL 0.75 %</i>	1	Limit 45gms per month; QL(1.5 GM daily)
			<i>metronidazole (topical) GEL 1 %</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>metronidazole (topical)</i> LOTN	1	QL(2 ML daily)	GLUCAGEN DIAGNOSTIC	2	
MIRVASO (<i>brimonidine tartrate (topical)</i>)	GP	PA	METOPIRONE	3	
NORITATE CREA	3	PA	Diagnostic Tests		
ORACEA (<i>doxycycline (rosacea)</i>)	GP	PA	FREESTYLE INSULINX TEST STRP	2	Limit 200 per month; QL(6.67 EA daily); RX/OTC
RHOFADE	3	PA	FREESTYLE LITE TEST STRP	2	Limit 200 per month; QL(6.67 EA daily); RX/OTC
SOOLANTRA (<i>ivermectin (rosacea)</i>)	GP	QL(1 GM daily); PA	FREESTYLE TEST STRP	2	Limit 200 per month; QL(6.67 EA daily); RX/OTC
Scabicides & Pediculicides			ONETOUCH ULTRA BLUE TEST STRP	2	Limit 200 per month; QL(6.67 EA daily); RX/OTC
(Crotamiton) CROTAN LOTN	1		ONETOUCH ULTRA TEST STRP	2	Limit 200 per month; QL(6.67 EA daily); RX/OTC
(Ivermectin (Pediculicide)) CVS IVERMECTIN LICE TREATMENT, EQ IVERMECTIN	1		ONETOUCH ULTRA STRP	2	Limit 200 per month; QL(6.67 EA daily); RX/OTC
ELIMITE CREA (<i>permethrin</i>)	GP	Limit 2 per month; QL(60 GM per 14 day(s) retail)	ONETOUCH VERIO STRP	2	Limit 200 per month; QL(6.67 EA daily); RX/OTC
<i>ivermectin (pediculicide)</i>	1		PRECISION XTRA BLOOD GLUCOSE STRP	2	Limit 200 per month; QL(6.67 EA daily); RX/OTC
<i>lindane SHAM</i>	1		DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS		
<i>malathion</i>	1		Dietary Management Products		
NATROBA (<i>spinosad</i>)	GP	AL(At least 4 yrs old)	(Folic Acid-Pyridoxine-Cyanocobalamin) FOLBIC, WESTAB MAX	1	
OVIDE (<i>malathion</i>)	GP		DEPLIN 15	3	
<i>permethrin CREA</i>	1	Limit 2 per month; QL(60 GM per 14 day(s) retail)	DEPLIN 7.5	3	
SKLICE (<i>ivermectin (pediculicide)</i>)	GP		ELFOLATE TABS	3	
<i>spinosad</i>	1	AL(At least 4 yrs old)			
Wound Care Products					
REGRANEX	3	Limit 15gms per month; QL(0.5 GM daily)			
DIAGNOSTIC PRODUCTS					
Diagnostic Drugs					

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits	
FOLBIC RF TABS	3		(Dichlorphenamide) ORMALVI	SP	PA	
FOLTX TABS	3		<i>acetazolamide CP12</i>	1		
L-METHYLFOLATE FORTE	3		<i>acetazolamide TABS</i>	1		
L-METHYLFOLATE- ALGAE	3		<i>dichlorphenamide</i>	SP	PA	
<i>I-methylfolate TABS 7.5 MG, 15 MG</i>	1		KEVEYIS (dichlorphenamide)	SP	PA	
L-METHYLFOLATE TABS	3		<i>methazolamide TABS</i>	1		
NIVA-FOL	1		Diuretic Combinations			
DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes			ALDACTAZIDE (spironolactone & hydrochlorothiazide)	GP		
Digestive Enzymes			<i>amiloride & hydrochlorothiazide</i>	1		
CREON CPEP	2		MAXZIDE-25 TABS (triamterene & hydrochlorothiazide)	GP		
PANCREAZE CPEP 149900 UNIT-97300 UNIT-37000 UNIT, 15200 UNIT-8800 UNIT-2600 UNIT, 24600 UNIT-14200 UNIT-4200 UNIT, 61500 UNIT-35500 UNIT-10500 UNIT, 83900 UNIT-54700 UNIT-21000 UNIT, 98400 UNIT-56800 UNIT-16800 UNIT	3		MAXZIDE TABS (triamterene & hydrochlorothiazide)	GP		
ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 252600 UNIT-189600 UNIT-60000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT	2		<i>spironolactone & hydrochlorothiazide</i>	1		
DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure			<i>triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG</i>	1		
Carbonic Anhydrase Inhibitors			<i>triamterene & hydrochlorothiazide TABS</i>	1		
Loop Diuretics						
<i>bumetanide TABS</i>						
BUMEX TABS 0.5 MG (bumetanide)						
EDECRIN (ethacrynic acid)						
<i>ethacrynic acid</i>						
<i>furosemide SOLN PO 8 MG/ML, 10 MG/ML</i>						
<i>furosemide TABS</i>						
LASIX TABS (furosemide)						
<i>torsemide TABS</i>						
Potassium Sparing Diuretics						

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ALDACTONE TABS <i>(spironolactone)</i>	GP		<i>calcitonin (salmon) NA</i>	1	
<i>amiloride hcl TABS</i>	1		FOSAMAX PLUS D	3	Limit 4 per month; QL(0.15 EA daily); PA
DYRENIUM CAPS <i>(triamterene)</i>	GP		FOSAMAX TABS 70 MG <i>(alendronate sodium)</i>	GP	Limit 4 per month; QL(0.15 EA daily)
<i>spironolactone TABS</i>	1		<i>ibandronate sodium SOLN</i>	SP	PA
<i>triamterene CAPS</i>	1		<i>ibandronate sodium TABS</i>	1	Limit 1 tab per month; QL(0.04 EA daily)
Thiazides and Thiazide-Like Diuretics			MIACALCIN IJ <i>(calcitonin (salmon))</i>	SP	PA
<i>chlorthalidone 25 MG, 50 MG</i>	1		NATPARA	SP	PA
DIURIL SUSP	3		<i>pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML</i>	SP	PA
<i>hydrochlorothiazide CAPS</i>	1		PAMIDRONATE DISODIUM SOLN	SP	PA
<i>hydrochlorothiazide TABS</i>	1		PROLIA SOSY	SP	PA
<i>indapamide TABS 1.25 MG, 2.5 MG</i>	1		RECLAST SOLN <i>(zoledronic acid)</i>	SP	PA
<i>metolazone</i>	1		<i>risedronate sodium TABS 150 MG</i>	1	Limit 1 per month; QL(0.04 EA daily); ST
THALITONE	2		<i>risedronate sodium TABS 35 MG</i>	1	Limit 4 per month; QL(0.15 EA daily); ST
ENDOCRINE AND METABOLIC AGENTS - MISC. - Drugs to Treat Bone Disease and Regulate Hormones			<i>risedronate sodium TABS 5 MG, 30 MG</i>	1	QL(1 EA daily); ST
Bone Density Regulators			<i>risedronate sodium TBEC</i>	1	Limit 4 per month; QL(0.15 EA daily)
ACTONEL TABS 35 MG <i>(risedronate sodium)</i>	GP	Limit 4 per month; QL(0.15 EA daily); ST	<i>teriparatide SOPN</i>	SP	PA
ACTONEL TABS 150 MG <i>(risedronate sodium)</i>	GP	Limit 1 per month; QL(0.04 EA daily); ST	TYMLOS	SP	PA
<i>alendronate sodium SOLN</i>	1		XGEVA SOLN	SP	PA
<i>alendronate sodium TABS 5 MG, 10 MG</i>	1		<i>zoledronic acid CONC</i>	SP	PA
<i>alendronate sodium TABS 35 MG, 70 MG</i>	1	Limit 4 per month; QL(0.15 EA daily)	<i>zoledronic acid SOLN</i>	SP	PA
ATELVIA TBEC <i>(risedronate sodium)</i>	GP	Limit 4 per month; QL(0.15 EA daily)	ZOLEDRONIC ACID SOLN	SP	PA
BINOSTO TBEF	3	Limit 4 tabs per month; QL(0.15 EA daily)	Fertility Regulators		
<i>calcitonin (salmon) IJ</i>	SP	PA			

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
(Clomiphene Citrate) CLOMID TABS	1	Limit 15 per month; QL(0.5 EA daily)	<i>raloxifene hcl</i>	PV	QL(1 EA daily); PV
<i>clomiphene citrate TABS</i>	1	Limit 15 per month; QL(0.5 EA daily)	Insulin-Like Growth Factors (Somatomedins)		
Growth Hormone Receptor Antagonists					
SOMAVERT	SP	PA	INCRELEX	SP	PA
Growth Hormones					
GENOTROPIN MINIQUICK PRSY	SP	Use preferred Humatrop or Norditropin; PA	LHRH/GnRH Agonist Analog Pituitary Suppressants		
GENOTROPIN CART SC	SP	Use preferred Humatrop or Norditropin; PA	FENSOLVI (6 MONTH) SC	SP	PA
HUMATROPE CART IJ	SP	PA	LUPRON DEPOT-PED (1-MONTH)	SP	PA
NORDITROPIN FLEXPRO SOPN 15 MG/1.5ML, 30 MG/3ML	SP	PA	LUPRON DEPOT-PED (3-MONTH)	SP	PA
NORDITROPIN FLEXPRO SOPN 5 MG/1.5ML, 10 MG/1.5ML	SP	Use preferred Humatrop or Norditropin; PA	LUPRON DEPOT-PED (6-MONTH) IM	SP	PA
NUTROPIN AQ NUSPIN 10 SOPN	SP	Use preferred Humatrop or Norditropin; PA	SYNAREL	2	
NUTROPIN AQ NUSPIN 20 SOPN	SP	Use preferred Humatrop or Norditropin; PA	Metabolic Modifiers		
NUTROPIN AQ NUSPIN 5 SOPN	SP	Use preferred Humatrop or Norditropin; PA	(Sapropterin Dihydrochloride) JAVYGTOR PACK	SP	PA
OMNITROPE SOLR SC	SP	Use preferred Humatrop or Norditropin; PA	(Sapropterin Dihydrochloride) JAVYGTOR TABS	SP	PA
SEROSTIM SC 4 MG, 5 MG, 6 MG	SP	PA	ALDURAZYME	SP	PA
ZOMACTON SOLR SC 5 MG	SP	Use preferred Humatrop or Norditropin; PA	<i>betaine</i>	SP	PA
ZORBTIVE SC	SP	PA	BUPHENYL POWD <i>(sodium phenylbutyrate)</i>	SP	PA
Hormone Receptor Modulators			BUPHENYL TABS <i>(sodium phenylbutyrate)</i>	SP	PA
EVISTA (<i>raloxifene hcl</i>)	GP	QL(1 EA daily); PV	<i>calcitriol CAPS</i>	1	
OSPHENA	3	QL(1 EA daily)	<i>calcitriol SOLN PO</i>	1	
			<i>calcitriol SOLN IV</i>	SP	PA
			CARNITOR SF SOLN PO <i>(levocarnitine (metabolic modifiers))</i>	GP	
			CARNITOR SOLN PO 1 GM/10ML <i>(levocarnitine (metabolic modifiers))</i>	GP	
			CARNITOR TABS <i>(levocarnitine (metabolic modifiers))</i>	GP	

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits	
<i>cinacalcet hcl</i>	1		SENSIPAR (<i>cinacalcet hcl</i>)	GP		
CYSTADANE (<i>betaine</i>)	SP	PA	sodium phenylbutyrate POWD	SP	PA	
<i>doxercalciferol CAPS</i>	1		sodium phenylbutyrate TABS	SP	PA	
<i>doxercalciferol SOLN</i>	SP	PA	STRENSIQ	SP	PA	
ELAPRASE	SP	PA	XURIDEN	SP		
GALAFOLD	SP	QL(0.5 EA daily); PA	ZEMPLAR CAPS 1 MCG, 2 MCG (<i>paricalcitol</i>)	GP		
HECTOROL SOLN (<i>doxercalciferol</i>)	SP	PA	ZEMPLAR SOLN (<i>paricalcitol</i>)	SP	PA	
KUVAN PACK (<i>sapropterin dihydrochloride</i>)	SP	PA	Posterior Pituitary Hormones			
KUVAN TABS (<i>sapropterin dihydrochloride</i>)	SP	PA	DDAVP TABS (<i>desmopressin acetate</i>)	GP		
<i>levocarnitine (metabolic modifiers) SOLN PO 1 GM/10ML</i>	1		<i>desmopressin acetate spray</i>	1		
<i>levocarnitine (metabolic modifiers) TABS</i>	1		<i>desmopressin acetate spray refrigerated 0.01 %</i>	1		
LUMIZYME	SP	PA	DESMOPRESSIN ACETATE SOLN NA	3	PA	
MYALEPT	SP	PA	<i>desmopressin acetate TABS</i>	1		
NAGLAZYME	SP	PA	Prolactin Inhibitors			
<i>nitisinone CAPS</i>	SP	PA	<i>cabergoline</i>	1		
NITYR TABS	SP	PA	Somatostatic Agents			
ORFADIN CAPS (<i>nitisinone</i>)	SP	PA	<i>octreotide acetate KIT</i>	SP	PA	
ORFADIN SUSP	SP	PA	<i>octreotide acetate SOLN</i>	SP	PA	
PALYNZIQ	SP	PA	SANDOSTATIN LAR DEPOT KIT (<i>octreotide acetate</i>)	SP	PA	
<i>paricalcitol CAPS</i>	1		SANDOSTATIN SOLN 50 MCG/ML, 100 MCG/ML, 500 MCG/ML (<i>octreotide acetate</i>)	SP	PA	
<i>paricalcitol SOLN</i>	SP	PA	SIGNIFOR	SP	PA	
RAYALDEE	SP	PA	Vasopressin Receptor Antagonists			
ROCALTROL CAPS (<i>calcitriol</i>)	GP		JYNARQUE TABS	SP	QL(1 EA daily); PA	
ROCALTROL SOLN PO (<i>calcitriol</i>)	GP		JYNARQUE TBPK	SP	SP; PA	
<i>sapropterin dihydrochloride PACK</i>	SP	PA				
<i>sapropterin dihydrochloride TABS</i>	SP	PA				

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OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SAMSCA TABS <i>(tolvaptan)</i>	SP	QL(1 EA daily); PA	ACTIVELLA TABS 1 MG-0.5 MG <i>(estradiol & norethindrone acetate)</i>	GP	
<i>tolvaptan TABS</i>	SP	QL(1 EA daily); PA	ANGELIQ	3	
ESTROGENS - Hormone Replacement/Modifying Drugs			CLIMARA PRO	2	
Estrogen Combinations			COMBIPATCH PTTW	3	
(Esterified Estrogens & Methyltestosterone) COVARYX, COVARYX HS, EEMT, EEMT HS, EST ESTROGENS-METHYLTEST DS, EST ESTROGENS-METHYLTEST HS, ESTRATEST F.S., ESTRATEST H.S. 1.25 MG-0.625 MG	1	QL(1 EA daily)	DUAVEE	3	
(Esterified Estrogens & Methyltestosterone) COVARYX, COVARYX HS, EEMT, EEMT HS, EST ESTROGENS-METHYLTEST DS, EST ESTROGENS-METHYLTEST HS, ESTRATEST F.S., ESTRATEST H.S. 2.5 MG-1.25 MG	1	QL(1 EA daily)	<i>esterified estrogens & methyltestosterone</i>	1	QL(1 EA daily)
(Estradiol & Norethindrone Acetate) AMABELZ, MIMVEY TABS 1 MG-0.5 MG	1		<i>estradiol & norethindrone acetate TABS</i>	1	
(Estradiol & Norethindrone Acetate) AMABELZ, MIMVEY TABS	1		<i>norethindrone acetate-ethinyl estradiol</i>	1	
(Norethindrone Acetate-Ethinyl Estradiol) FYAVOLV, JINTELI	1		PREFEST	3	
(Norethindrone Acetate-Ethinyl Estradiol) FYAVOLV, JINTELI 1 MG-5 MCG	1		PREMPHASE	2	
			PREMPRO	2	
			Estrogens		
			(Estradiol) DOTTI, LYLLANA PTTW	1	Limit 8 per month; QL(0.29 EA daily)
			CLIMARA PTWK 0.025 MG/24HR, 0.0375 MG/24HR, 0.06 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR <i>(estradiol)</i>	GP	Limit 4 per month; QL(0.15 EA daily)
			DELESTROGEN <i>(estradiol valerate)</i>	SP	PA
			DEPO-ESTRADIOL	SP	PA
			DIVIGEL GEL 0.25 MG/0.25GM, 0.5 MG/0.5GM, 1 MG/GM, 1.25 MG/1.25GM <i>(estradiol)</i>	GP	
			ELESTRIN GEL	3	
			ESTRACE TABS <i>(estradiol)</i>	GP	
			<i>estradiol valerate</i>	SP	PA
			<i>estradiol GEL</i>	1	Limit 50gms per month; QL(1.67 GM daily)

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OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>estradiol GEL 0.25 MG/0.25GM, 0.5 MG/0.5GM, 1 MG/GM, 1.25 MG/1.25GM</i>	1		<i>levofloxacin TABS</i>	1	QL(14 EA per fill retail)
<i>estradiol PTTW</i>	1	Limit 8 per month; QL(0.29 EA daily)	<i>moxifloxacin hcl TABS</i>	1	
<i>estradiol PTWK 0.025 MG/24HR, 0.0375 MG/24HR, 0.06 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR</i>	1	Limit 4 per month; QL(0.15 EA daily)	<i>ofloxacin 300 MG, 400 MG</i>	1	
<i>estradiol PTWK 0.05 MG/24HR</i>	1	Limit 4 per 28 days; QL(0.15 EA daily)	GASTROINTESTINAL AGENTS - MISC. -		
<i>estradiol TABS</i>	1		Miscellaneous Gastrointestinal Drugs		
ESTROGEL GEL <i>(estradiol)</i>	GP	Limit 50gms per month; QL(1.67 GM daily)	Bile Acid Synthesis Disorder Agents		
EVAMIST SOLN	3	QL(0.28 ML daily)	<i>CHOLBAM</i>	SP	PA
MENEST	2		Farnesoid X Receptor (FXR) Agonists		
MENOSTAR PTWK	3	Limit 4 per month; QL(0.14 EA daily)	<i>OCALIVA</i>	SP	PA
MINIVELLE PTTW <i>(estradiol)</i>	GP	Limit 8 per month; QL(0.29 EA daily)	Gallstone Solubilizing Agents		
PREMARIN SOLR	SP	PA	<i>CHENODAL</i>	3	PA
PREMARIN TABS	2		<i>CTEXLI 250 MG</i>	3	PA
VIVELLE-DOT PTTW <i>(estradiol)</i>	GP	Limit 8 per month; QL(0.29 EA daily)	<i>RELTONE CAPS</i>	3	
FLUOROQUINOLONES - Drugs to Treat Bacterial Infections			<i>URSO 250 TABS <i>(ursodiol)</i></i>	GP	
Fluoroquinolones			<i>URSO FORTE TABS <i>(ursodiol)</i></i>	GP	
BAXDELA TABS	3	ST	<i>ursodiol CAPS</i>	1	
<i>ciprofloxacin hcl TABS</i>	1		<i>URSODIOL CAPS</i>	3	
<i>ciprofloxacin SUSR</i>	1		<i>ursodiol TABS</i>	1	
CIPRO SUSR	2		Gastrointestinal Antiallergy Agents		
CIPRO TABS 250 MG, 500 MG (<i>ciprofloxacin hcl</i>)	GP		<i>cromolyn sodium <i>(mastocytosis)</i></i>	1	
<i>levofloxacin SOLN PO</i>	1		<i>GASTROCROM <i>(cromolyn sodium <i>(mastocytosis)</i></i></i>	GP	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
REGLAN TABS <i>(metoclopramide hcl)</i>	GP		<i>lactulose</i> <i>(encephalopathy)</i>	1	
Inflammatory Bowel Agents					
AZULFIDINE EN-TABS TBEC (<i>sulfasalazine</i>)	GP		Irritable Bowel Syndrome (IBS) Agents		
AZULFIDINE TABS <i>(sulfasalazine)</i>	GP		<i>alosetron hcl</i>	1	PA
<i>balsalazide disodium</i> CAPS	1	Limit 282 caps per month; QL(9.4 EA daily)	LINZESS	2	QL(1 EA daily)
CANASA SUPP <i>(mesalamine)</i>	GP		LOTRONEX (<i>alosetron hcl</i>)	GP	PA
COLAZAL CAPS <i>(balsalazide disodium)</i>	GP	Limit 282 caps per month; QL(9.4 EA daily)	VIBERZI	3	PA
DIPENTUM	3		Peripheral Opioid Receptor Antagonists		
INFLECTRA SOLR	2	PA	<i>alvimopan</i>	1	
<i>mesalamine w/ cleanser</i>	1		ENTEREG (<i>alvimopan</i>)	GP	
<i>mesalamine CP24</i>	1		MOVANTIK	3	QL(1 EA daily)
<i>mesalamine CPCR</i>	1	PA	Phosphate Binder Agents		
<i>mesalamine CPDR</i>	1	QL(12 EA daily)	<i>calcium acetate</i> <i>(phosphate binder)</i> CAPS	1	
<i>mesalamine ENEM</i>	1		FOSRENOL CHEW <i>(lanthanum carbonate)</i>	GP	
<i>mesalamine SUPP</i>	1		<i>lanthanum carbonate</i> CHEW	1	
<i>mesalamine TBEC</i>	1		RENAGEL (<i>sevelamer hcl</i>)	GP	PA
PENTASA CPCR	3	PA	RENVELA PACK <i>(sevelamer carbonate)</i>	GP	
RENFLEXIS	2	PA	RENVELA TABS <i>(sevelamer carbonate)</i>	GP	
ROWASA (<i>mesalamine w/ cleanser</i>)	GP		<i>sevelamer carbonate</i> PACK	1	
SFROWASA ENEM	2		<i>sevelamer carbonate</i> TABS	1	
SKYRIZI SOCT	2	PA	<i>sevelamer hcl</i>	1	PA
STELARA 130 MG/26ML	2	PA	VELPHORO	3	PA
<i>sulfasalazine TABS</i>	1		Short Bowel Syndrome (SBS) Agents		
<i>sulfasalazine TBEC</i>	1		GATTEX	SP	PA
Intestinal Acidifiers					
(Lactulose (Encephalopathy)) ENULOSE, GENERLAC	1		Tryptophan Hydroxylase Inhibitors		
			XERMELO	SP	PA
			GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive		

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OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Organs and Urinary System					
Acidifiers					
K-PHOS NO 2	2		(Sodium Chloride (GU Irrigant)) ARGYLE STERILE SALINE, CURITY STERILE SALINE 0.9 %	SP	PA
Alkalinizers					
(Pot & Sod Citrates W/Citric Ac) CYTRA-3 SYRP	1		<i>neomycin/polymyxin b gu</i>	1	
(Potassium Citrate-Citric Acid) CYTRA K CRYSTALS PACK	1		<i>sodium chloride (gu irrigant) 0.9 %</i>	SP	PA
(Potassium Citrate-Citric Acid) CYTRA-K SOLN	1	RX/OTC	Interstitial Cystitis Agents		
(Sodium Citrate & Citric Acid) CYTRA-2	1	RX/OTC	ELMIRON CAPS	3	QL(3 EA daily); PA
ORACIT	3		Prostatic Hypertrophy Agents		
ORAL CITRATE	3		<i>alfuzosin hcl</i>	1	
<i>pot & sod citrates w/citric ac SOLN</i>	1		AVODART (<i>dutasteride</i>)	GP	AL(At least 40 yrs old)
<i>potassium citrate (alkalinizer) TBCR</i>	1		CARDURA XL	3	
<i>potassium citrate-citric acid SOLN</i>	1	RX/OTC	<i>dutasteride</i>	1	AL(At least 40 yrs old)
<i>sodium citrate & citric acid</i>	1	RX/OTC	<i>dutasteride-tamsulosin hcl</i>	1	
UROCIT-K 10 TBCR (<i>potassium citrate (alkalinizer)</i>)	GP		<i>finasteride</i>	1	QL(1 EA daily); AL(At least 40 yrs old)
UROCIT-K 15 TBCR (<i>potassium citrate (alkalinizer)</i>)	GP		JALYN (<i>dutasteride-tamsulosin hcl</i>)	GP	
UROCIT-K 5 TBCR (<i>potassium citrate (alkalinizer)</i>)	GP		PROSCAR (<i>finasteride</i>)	GP	QL(1 EA daily); AL(At least 40 yrs old)
Cystinosis Agents					
CYSTAGON CAPS	3		RAPAFLO (<i>silodosin</i>)	GP	
PROCYSBI CPDR	3		<i>silodosin</i>	1	
Genitourinary Irrigants			<i>tamsulosin hcl</i>	1	QL(2 EA daily)
Urinary Analgesics			UROXATRAL (<i>alfuzosin hcl</i>)	GP	
			Urinary Stone Agents		
			<i>phenazopyridine hcl TABS 100 MG, 200 MG</i>	1	
			PYRIDIUM TABS (<i>phenazopyridine hcl</i>)	GP	
			(Tiopronin) VENXXIVA TBEC	1	PA
			LITHOSTAT	3	

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits			
THIOLA EC TBEC <i>(tiopronin)</i>	GP	PA	AGRYLIN 0.5 MG <i>(anagrelide hcl)</i>	GP				
THIOLA TABS <i>(tiopronin)</i>	SP		<i>anagrelide hcl</i>	1				
<i>tiopronin TABS</i>	SP		<i>aspirin-dipyridamole</i>	1				
<i>tiopronin TBEC</i>	1	PA	BRILINTA	2	QL(1 EA daily)			
GOUT AGENTS - Drugs to Treat Gout								
Gout Agent Combinations								
<i>colchicine w/ probenecid</i>	1		CABLIVI	SP	PA			
Gout Agents								
<i>allopurinol 100 MG, 300 MG</i>	1		<i>cilostazol</i>	1	QL(2 EA daily)			
<i>colchicine CAPS</i>	1		<i>clopidogrel bisulfate</i>	1	QL(2 EA daily)			
<i>febuxostat</i>	1		<i>dipyridamole</i>	1				
MITIGARE CAPS <i>(colchicine)</i>	GP		EFFIENT <i>(prasugrel hcl)</i>	GP				
ULORIC <i>(febuxostat)</i>	GP		PLAVIX 75 MG <i>(clopidogrel bisulfate)</i>	GP	QL(2 EA daily)			
ZYLOPRIM <i>(allopurinol)</i>	GP		<i>prasugrel hcl</i>	1				
Uricosurics			ZONTIVITY	2				
<i>probenecid</i>	1		HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders					
HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders								
Bradykinin B2 Receptor Antagonists								
<i>(Icatibant Acetate)</i>	SP	PA	(Miglustat) YARGESA	SP	PA			
SAJAZIR SOSY			CERDELGA	SP	PA			
FIRAZYR SOSY <i>(icatibant acetate)</i>	SP	PA	CEREZYME 400 UNIT	SP	PA			
<i>icatibant acetate SOSY</i>	SP	PA	<i>miglustat</i>	SP	PA			
Complement Inhibitors			ZAVESCA <i>(miglustat)</i>	SP	PA			
HAEGARDA SOLR SC	SP	PA	Agents for Gaucher Disease					
Hemataologic - Tyrosine Kinase Inhibitors								
TAVALISSE	SP	SP; PA	DROXIA CAPS	3				
Hematorheologic Agents			<i>glutamine (sickle cell)</i>	SP	PA			
<i>pentoxifylline</i>	1		SIKLOS TABS	SP	PA			
Platelet Aggregation Inhibitors			Agents for Sickle Cell Disease					
<i>(Folic Acid) CVS FOLIC ACID, FOLATE, FT FOLIC ACID, GNP FOLIC ACID, HM FOLIC ACID, KP FOLIC ACID, PX FOLIC ACID, QC FOLIC ACID, RA FOLIC ACID, SM FOLIC ACID, TRUE FOLIC ACID, YL FOLIC ACID TABS 1 MG, 400 MCG</i>	PV	PV; RX/OTC	Folic Acid/Folates					

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
(Folic Acid) CVS FOLIC ACID, FOLATE, FT FOLIC ACID, GNP FOLIC ACID, HM FOLIC ACID, KP FOLIC ACID, PX FOLIC ACID, QC FOLIC ACID, RA FOLIC ACID, SM FOLIC ACID, TRUE FOLIC ACID, YL FOLIC ACID TABS 1 MG, 800 MCG	PV	PV; RX/OTC	ARANESP (ALBUMIN FREE) SOSY	SP	PA
(Folic Acid) CVS FOLIC ACID, FOLATE, FT FOLIC ACID, GNP FOLIC ACID, HM FOLIC ACID, KP FOLIC ACID, PX FOLIC ACID, QC FOLIC ACID, RA FOLIC ACID, SM FOLIC ACID, TRUE FOLIC ACID, YL FOLIC ACID TABS 400 MCG, 800 MCG	PV	PV	DOPOTELET	SP	PA
(Folic Acid) CVS FOLIC ACID, FOLATE, FT FOLIC ACID, GNP FOLIC ACID, HM FOLIC ACID, KP FOLIC ACID, PX FOLIC ACID, QC FOLIC ACID, RA FOLIC ACID, SM FOLIC ACID, TRUE FOLIC ACID, YL FOLIC ACID TABS 800 MCG	PV	PV	MIRCERA 30 MCG/0.3ML, 50 MCG/0.3ML, 75 MCG/0.3ML, 100 MCG/0.3ML, 150 MCG/0.3ML, 200 MCG/0.3ML	SP	PA
(Folic Acid) CVS FOLIC ACID, FOLATE, FT FOLIC ACID, GNP FOLIC ACID, HM FOLIC ACID, KP FOLIC ACID, PX FOLIC ACID, QC FOLIC ACID, RA FOLIC ACID, SM FOLIC ACID, TRUE FOLIC ACID, YL FOLIC ACID TABS 400 MCG, 800 MCG	PV	PV	MULPLETA	SP	PA
(Folic Acid) CVS FOLIC ACID, FOLATE, FT FOLIC ACID, GNP FOLIC ACID, HM FOLIC ACID, KP FOLIC ACID, PX FOLIC ACID, QC FOLIC ACID, RA FOLIC ACID, SM FOLIC ACID, TRUE FOLIC ACID, YL FOLIC ACID TABS 400 MCG, 800 MCG	PV	PV	NYVEPRIA	SP	PA
(Folic Acid) CVS FOLIC ACID, FOLATE, FT FOLIC ACID, GNP FOLIC ACID, HM FOLIC ACID, KP FOLIC ACID, PX FOLIC ACID, QC FOLIC ACID, RA FOLIC ACID, SM FOLIC ACID, TRUE FOLIC ACID, YL FOLIC ACID TABS 800 MCG	PV	PV	PROMACTA PACK	SP	PA
(Folic Acid) CVS FOLIC ACID, FOLATE, FT FOLIC ACID, GNP FOLIC ACID, HM FOLIC ACID, KP FOLIC ACID, PX FOLIC ACID, QC FOLIC ACID, RA FOLIC ACID, SM FOLIC ACID, TRUE FOLIC ACID, YL FOLIC ACID TABS 800 MCG	PV	PV	PROMACTA TABS 12.5 MG, 25 MG, 50 MG	SP	PA
(Folic Acid) CVS FOLIC ACID, FOLATE, FT FOLIC ACID, GNP FOLIC ACID, HM FOLIC ACID, KP FOLIC ACID, PX FOLIC ACID, QC FOLIC ACID, RA FOLIC ACID, SM FOLIC ACID, TRUE FOLIC ACID, YL FOLIC ACID TABS 800 MCG	PV	PV	PROMACTA TABS 75 MG	SP	QL(1 EA daily); PA
(Folic Acid) CVS FOLIC ACID, FOLATE, FT FOLIC ACID, GNP FOLIC ACID, HM FOLIC ACID, KP FOLIC ACID, PX FOLIC ACID, QC FOLIC ACID, RA FOLIC ACID, SM FOLIC ACID, TRUE FOLIC ACID, YL FOLIC ACID TABS 800 MCG	PV	PV	RETACRIT	SP	PA
(Folic Acid) CVS FOLIC ACID, FOLATE, FT FOLIC ACID, GNP FOLIC ACID, HM FOLIC ACID, KP FOLIC ACID, PX FOLIC ACID, QC FOLIC ACID, RA FOLIC ACID, SM FOLIC ACID, TRUE FOLIC ACID, YL FOLIC ACID TABS 800 MCG	PV	PV	UDENYCA ONBODY SOSY	SP	SP; PA
(Folic Acid) CVS FOLIC ACID, FOLATE, FT FOLIC ACID, GNP FOLIC ACID, HM FOLIC ACID, KP FOLIC ACID, PX FOLIC ACID, QC FOLIC ACID, RA FOLIC ACID, SM FOLIC ACID, TRUE FOLIC ACID, YL FOLIC ACID TABS 800 MCG	PV	PV	UDENYCA SOAJ	SP	SP; PA
(Folic Acid) CVS FOLIC ACID, FOLATE, FT FOLIC ACID, GNP FOLIC ACID, HM FOLIC ACID, KP FOLIC ACID, PX FOLIC ACID, QC FOLIC ACID, RA FOLIC ACID, SM FOLIC ACID, TRUE FOLIC ACID, YL FOLIC ACID TABS 800 MCG	PV	PV	UDENYCA SOSY	SP	PA
(Folic Acid) CVS FOLIC ACID, FOLATE, FT FOLIC ACID, GNP FOLIC ACID, HM FOLIC ACID, KP FOLIC ACID, PX FOLIC ACID, QC FOLIC ACID, RA FOLIC ACID, SM FOLIC ACID, TRUE FOLIC ACID, YL FOLIC ACID TABS 800 MCG	PV	PV	ZARXIO	SP	PA
Hematopoietic Mixtures					
FOLIVANE-F					
FUSION PLUS					
INTEGRA F					
IRON FOLATE-F					
Iron					
(Carbonyl Iron) WEE CARE SUSP					
(Ferrous Sulfate) BPROTECTED PEDIA IRON, FE-VITE IRON, IRON INFANT & TODDLER, IRON INFANT/TODDLER, IRON SUPPLEMENT, IRON SUPPLEMENT CHILDRENS, ONE VITE FERROUS SULFATE, PC PEDIATRIC IRON DROPS SOLN 15 MG/ML					
<i>folic acid SOLN</i>	PV	PV			
<i>folic acid TABS</i>	PV	PV; RX/OTC			
Hematopoietic Growth Factors					
ARANESP (ALBUMIN FREE) SOLN	SP	PA			

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
(Ferrous Sulfate) BPROTECTED PEDIA IRON, FE-VITE IRON, IRON INFANT & TODDLER, IRON INFANT/TODDLER, IRON SUPPLEMENT, IRON SUPPLEMENT CHILDRENS, ONE VITE FERROUS SULFATE, PC PEDIATRIC IRON DROPS SOLN 220 MG/5ML	PV	PV	<i>tranexamic acid TABS</i>	1	QL(6 EA daily; 5 Day(s) limit)
(Ferrous Sulfate) BPROTECTED PEDIA IRON, FE-VITE IRON, IRON INFANT & TODDLER, IRON INFANT/TODDLER, IRON SUPPLEMENT, IRON SUPPLEMENT CHILDRENS, ONE VITE FERROUS SULFATE, PC PEDIATRIC IRON DROPS SOLN 220 MG/5ML, 15 MG/ML	PV	PV	HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
FER-IN-SOL SOLN <i>(ferrous sulfate)</i>	GP	PV	Antihistamine Hypnotics		
<i>ferrous sulfate SOLN</i>	PV	PV	(Diphenhydramine Hcl (Sleep)) CVS SLEEP-AID NIGHTTIME, EQ NIGHTTIME SLEEP AID MAX ST, EQL SLEEP AID, FT SLEEP-AID MAXIMUM STRENGTH, GNP NIGHTTIME SLEEP- AID MAX ST, GOODSENSE SLEEP AID, GOODSENSE SLEEP-AID MAX STR, QC SLEEP AID MAX ST, RA SLEEP AID, SLEEP- AID, WAL-SOM MAXIMUM STRENGTH CAPS 50 MG	1	
ICAR SUSP (<i>carbonyl iron</i>)	GP	PV	UNISOM SLEEPGELS CAPS (<i>diphenhydramine hcl (sleep)</i>)	GP	
Stem Cell Mobilizers			Barbiturate Hypnotics		
MOZOBIL (<i>plerixafor</i>)	SP	PA	<i>phenobarbital ELIX</i>	1	
<i>plerixafor</i>	SP	PA	<i>phenobarbital TABS</i>	1	
HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders			Hypnotics - Tricyclic Agents		
Hemostatics - Systemic			<i>doxepin hcl (sleep)</i>	1	QL(1 EA daily); ST
AMICAR TABS <i>(aminocaproic acid)</i>	GP		SILENOR (<i>doxepin hcl (sleep)</i>)	GP	QL(1 EA daily); ST
<i>aminocaproic acid TABS</i>	1		Non-Barbiturate Hypnotics		
CYKLOKAPRON SOLN <i>(tranexamic acid)</i>	SP	PA	AMBIEN CR TBCR <i>(zolpidem tartrate)</i>	GP	QL(1 EA daily)
<i>tranexamic acid SOLN 1000 MG/10ML</i>	SP	PA	AMBIEN TABS (<i>zolpidem tartrate</i>)	GP	QL(1 EA daily)
			DORAL (<i>quazepam</i>)	GP	
			EDLUAR SUBL	3	QL(1 EA daily); ST
			<i>estazolam</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>eszopiclone</i>	1	QL(1 EA daily)	(PEG 3350-Potassium Chloride-Sod Bicarbonate-Sod Chloride) GAVILYTE-N WITH FLAVOR PACK	PV	PV
<i>flurazepam hcl</i>	1		CLENPIQ SOLN 12 GM/160ML-3.5 GM/160ML-10 MG/160ML	PV	PV
HALCION 0.25 MG (<i>triazolam</i>)	GP		CLENPIQ SOLN 12 GM/175ML-3.5 GM/175ML-10 MG/175ML	PV	
LUNESTA (<i>eszopiclone</i>)	GP	QL(1 EA daily)	GOLYTELY SOLR (<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate</i>)	GP	PV
<i>midazolam hcl SYRP</i>	1		MOVIPREP (<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid</i>)	GP	PV
<i>quazepam</i>	1		<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid</i>	PV	PV
RESTORIL (<i>temazepam</i>)	GP		<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR</i>	PV	PV
<i>temazepam</i>	1		<i>peg 3350-potassium chloride-sod bicarbonate-sod chloride</i>	PV	PV
<i>triazolam</i>	1		PEG-PREP	PV	PV
<i> zaleplon</i>	1	QL(1 EA daily)	PLENU	PV	PV
<i>zolpidem tartrate SUBL</i>	1	PA	<i>sodium sulfate-potassium sulfate-magnesium sulfate</i>	PV	PV
<i>zolpidem tartrate TABS</i>	1	QL(1 EA daily)	SUFLAVE	PV	PV
<i>zolpidem tartrate TBCR</i>	1	QL(1 EA daily)	SUPREP BOWEL PREP KIT (<i>sodium sulfate-potassium sulfate-magnesium sulfate</i>)	GP	PV
ZOLPIMIST SOLN	3	Limit 7.7mls per month; QL(0.26 ML daily); ST	SUTAB	PV	PV
Orexin Receptor Antagonists					
BELSOMRA	2	QL(1 EA daily); ST	Laxatives - Miscellaneous		
Selective Melatonin Receptor Agonists					
<i>ramelteon</i>	1	QL(1 EA daily); ST	(Lactulose) CONSTULOSE SOLN 10 GM/15ML	1	
ROZEREM (<i>ramelteon</i>)	GP	QL(1 EA daily); ST			
LAXATIVES - Bowel Treatment Drugs					
Laxative Combinations					
(PEG 3350-Kcl-NaCl-Na Sulfate-Na Ascorbate-Ascorbic Acid) PEG-3350/ELECTROLYTES/A SCORBAT	PV	PV			
(PEG 3350-Kcl-Sod Bicarb-Sod Chloride-Sod Sulfate) GAVILYTE-C SOLR 240 GM	PV	PV			
(PEG 3350-Kcl-Sod Bicarb-Sod Chloride-Sod Sulfate) GAVILYTE-G SOLR 236 GM	PV	PV			

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
(Polyethylene Glycol 3350) CLEARLAX, CVS PURELAX, EQ CLEARLAX, EQL CLEARLAX, FT CLEARLAX, GAVILAX, GENTLELAX, GLYCOLAX, GNP CLEARLAX, GOODSENSE CLEARLAX, HM CLEARLAX, KLS LAXACLEAR, MM CLEARLAX, QC NATURA-LAX, RA LAXATIVE, SB POLYETHYLENE GLYCOL 3350, SM CLEARLAX, SMOOTH LAX, TRUE LAXATIVE POWD	1	Limit 528gms per month; QL(17.6 GM daily)	ZITHROMAX Z-PAK TABS (<i>azithromycin</i>)	GP	QL(6 EA per fill retail)
KRISTALOSE PACK	3		ZITHROMAX SUSR (<i>azithromycin</i>)	GP	
LACTULOSE PACK	3		ZITHROMAX TABS 500 MG (<i>azithromycin</i>)	GP	QL(3 EA per fill retail)
<i>lactulose SOLN</i>	1		ZITHROMAX TABS 250 MG (<i>azithromycin</i>)	GP	QL(6 EA per fill retail)
MIRALAX POWD (<i>polyethylene glycol 3350</i>)	GP	Limit 528gms per month; QL(17.6 GM daily)	Clarithromycin		
<i>polyethylene glycol 3350 POWD</i>	1	Limit 528gms per month; QL(17.6 GM daily)	<i>clarithromycin SUSR</i>	1	
MACROLIDES - Drugs to Treat Bacterial Infections			<i>clarithromycin TABS</i>	1	
Azithromycin			<i>clarithromycin TB24</i>	1	QL(14 EA per fill retail)
<i>azithromycin PACK</i>	1		Erythromycins		
<i>azithromycin SUSR</i>	1		(Erythromycin Base) ERY-TAB TBEC	1	
<i>azithromycin TABS 500 MG</i>	1	QL(3 EA per fill retail)	(Erythromycin Ethylsuccinate) E.E.S. 400 TABS	1	
<i>azithromycin TABS 250 MG</i>	1	QL(6 EA per fill retail)	(Erythromycin Stearate) ERYTHROCIN STEARATE TABS 250 MG	1	
<i>azithromycin TABS 600 MG</i>	1	QL(10 EA per fill retail)	E.E.S. GRANULES SUSR (<i>erythromycin ethylsuccinate</i>)	GP	
ZITHROMAX TRI-PAK TABS (<i>azithromycin</i>)	GP	QL(3 EA per fill retail)	ERYPED 200 SUSR (<i>erythromycin ethylsuccinate</i>)	GP	
			ERYPED 400 SUSR (<i>erythromycin ethylsuccinate</i>)	GP	
			<i>erythromycin base CPEP</i>	1	
			<i>erythromycin base TABS</i>	1	
			<i>erythromycin base TBEC</i>	1	
			<i>erythromycin ethylsuccinate SUSR</i>	1	
			<i>erythromycin ethylsuccinate TABS</i>	1	
Fidaxomicin					
			DIFCID SUSR	3	

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
DIFICID TABS	3		MAXX PLUS MISC	PV	PV
MEDICAL DEVICES AND SUPPLIES					
Contraceptives					
AIMSCO LUBRICATED MISC	PV	PV	REALITY LATEX CONDOMS MISC	PV	PV
DIAPHRAGMS	PV		REALITY LATEX/ULTRA TEXTURED DEVI	PV	PV
DUREX EXTRA SENSITIVE THIN DEVI	PV	PV	REALITY LATEX/ULTRA THIN DEVI	PV	PV
DUREX EXTRA SENSITIVE THIN MISC	PV	PV	TROJAN ENZ MISC	PV	PV
DUREX TROPICAL MISC	PV	PV	TROJAN MAGNUM MISC	PV	PV
FANTASY LUBRICATED/SPERMICIDE MISC	PV	PV	TROJAN ULTRA THIN/SPERMICIDAL MISC	PV	PV
FANTASY LUBRICATED MISC	PV	PV	TROJAN ULTRA THIN MISC	PV	PV
FC2 FEMALE CONDOM	PV	PV	TROJAN-ENZ LUBRICATED MISC	PV	PV
FEMCAP DEVI	PV	PV	TROJAN-ENZ/SPERMICIDAL MISC	PV	PV
KAMELEON LUBRICATED MISC	PV	PV	TRUE COVER DEVI	PV	PV
KIMONO COLORS DEVI	PV	PV	TRUSTEX COLOR CONDOMS + LUBE MISC	PV	PV
KIMONO MAXX-LARGE FLARE MISC	PV	PV	TRUSTEX LUB/RIBBED/STUDDED MISC	PV	PV
KIMONO MICRO THIN PLUS MISC	PV	PV	TRUSTEX LUB/SPERMICIDE EX ST MISC	PV	PV
KIMONO MICRO THIN MISC	PV	PV	TRUSTEX LUB/SPERMICIDE XL MISC	PV	PV
KIMONO PLUS MISC	PV	PV	TRUSTEX LUBRICATED EX LARGE MISC	PV	PV
KIMONO PS PLUS MISC	PV	PV	TRUSTEX LUBRICATED EXTRA ST MISC	PV	PV
KIMONO PS MISC	PV	PV	TRUSTEX LUBRICATED/SPERMICIDE MISC	PV	PV
KIMONO SENSATION PLUS MISC	PV	PV	TRUSTEX LUBRICATED MISC	PV	PV
KIMONO SENSATION MISC	PV	PV	TRUSTEX NATURAL CONDOMS + LUBE MISC	PV	PV
KIMONO SPECIAL DEVI	PV	PV			
KIMONO MISC	PV	PV			
K-Y ME & YOU EXTRA LUBRICATED DEVI	PV	PV			
K-Y ME & YOU INTENSE DEVI	PV	PV			

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TRUSTEX NON-LUBRICATED MISC	PV	PV	FREESTYLE LIBRE 3 READER	2	1 max fill(s) per 365 day(s) retail; PA
TRUSTEX RIA LUB/SPERMICIDE MISC	PV	PV	FREESTYLE LIBRE 3 SENSOR	2	2 max fill(s) per 28 day(s) retail; PA
TRUSTEX RIA LUBRICATED MISC	PV	PV	FREESTYLE LIBRE READER	2	1 max fill(s) per 365 day(s) retail; PA
TRUSTEX RIA NON-LUBRICATED MISC	PV	PV	LANCETS	2	
TRUSTEX-NONOXYNOL-9/RIB/STUD MISC	PV	PV	OMNIPOD 5 DEXG7G6 INTRO GEN 5 KIT	AC	QL(1 EA per 365 day(s) retail)
Diabetic Supplies			OMNIPOD 5 DEXG7G6 PODS GEN 5 MISC	AC	QL(10 EA per 30 day(s) retail; 30 EA per 90 days mail)
DEXCOM G6 RECEIVER	2	1 max fill(s) per 365 day(s) retail; PA	OMNIPOD 5 G7 INTRO (GEN 5) KIT	AC	QL(1 EA per 365 day(s) retail)
DEXCOM G6 SENSOR	2	3 max fill(s) per 30 day(s) retail; PA	OMNIPOD 5 G7 PODS (GEN 5) MISC	AC	QL(10 EA per 30 day(s) retail; 30 EA per 90 days mail)
DEXCOM G6 TRANSMITTER	2	1 max fill(s) per 90 day(s) retail; PA	OMNIPOD CLASSIC PODS (GEN 3) MISC	AC	QL(10 EA per 30 day(s) retail; 30 EA per 90 days mail)
DEXCOM G7 RECEIVER	2	1 max fill(s) per 365 day(s) retail; PA	OMNIPOD DASH INTRO (GEN 4) KIT	AC	QL(1 EA per 365 day(s) retail)
DEXCOM G7 SENSOR	2	3 max fill(s) per 30 day(s) retail; PA	OMNIPOD DASH PDM (GEN 4) KIT	AC	QL(1 EA per 365 day(s) retail)
FREESTYLE FREEDOM LITE KIT	2	QL(1 EA per 365 day(s) retail); RX/OTC	OMNIPOD DASH PODS (GEN 4) MISC	AC	QL(10 EA per 30 day(s) retail; 30 EA per 90 days mail)
FREESTYLE LIBRE 14 DAY READER	2	1 max fill(s) per 365 day(s) retail; PA	ONETOUCH ULTRA 2 KIT	2	QL(1 EA per 365 day(s) retail); RX/OTC
FREESTYLE LIBRE 14 DAY SENSOR	2	2 max fill(s) per 28 day(s) retail; PA	ONETOUCH ULTRA MINI KIT	2	QL(1 EA per 365 day(s) retail); RX/OTC
FREESTYLE LIBRE 2 PLUS SENSOR	2	2 max fill(s) per 28 day(s) retail; PA	PRECISION XTRA-GLUCOSE/KETONE DEVI	2	QL(1 EA per 365 day(s) retail)
FREESTYLE LIBRE 2 READER	2	1 max fill(s) per 365 day(s) retail; PA	Parenteral Therapy Supplies		
FREESTYLE LIBRE 2 SENSOR	2	2 max fill(s) per 28 day(s) retail; PA			
FREESTYLE LIBRE 3 PLUS SENSOR	2	2 max fill(s) per 28 day(s) retail; PA			

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ADVOCATE INSULIN SYRINGE	2	RX/OTC	CAREONE INSULIN SYRINGE	2	
AQ INSULIN SYRINGE	2	RX/OTC	CARETOUCH INSULIN SYRINGE	2	RX/OTC
ASSURE ID INSULIN SAFETY SYR	2	RX/OTC	COMFORT ASSIST INSULIN SYRINGE	2	RX/OTC
BD AUTOSHIELD	2	Preferred NDC	COMFORT EZ INSULIN SYRINGE	2	RX/OTC
BD AUTOSHIELD DUO	2	Preferred NDC; RX/OTC	DROPLET INSULIN SYRINGE	2	RX/OTC
BD INSULIN SYR ULTRAFINE II	2	RX/OTC	DROPSAFE SAFETY SYRINGE/NEEDLE	2	RX/OTC
BD INSULIN SYRINGE	2	RX/OTC	EASY COMFORT INSULIN SYRINGE	2	RX/OTC
BD INSULIN SYRINGE HALF-UNIT	2	RX/OTC	EASY TOUCH FLIPLOCK INSULIN SY	2	RX/OTC
BD INSULIN SYRINGE MICROFINE	2	RX/OTC	EASY TOUCH INSULIN SAFETY SYR	2	RX/OTC
BD INSULIN SYRINGE U/F	2	RX/OTC	EASY TOUCH INSULIN SYRINGE	2	
BD INSULIN SYRINGE U/F 1/2UNIT	2	RX/OTC	EASY TOUCH SHEATHLOCK SYRINGE	2	RX/OTC
BD INSULIN SYRINGE ULTRAFINE	2		EMBECTA INS SYR U/F 1/2 UNIT	2	RX/OTC
BD PEN NEEDLE MICRO U/F	2	Preferred NDC	EMBECTA INSULIN SYRINGE	2	RX/OTC
BD PEN NEEDLE MINI U/F	2	Preferred NDC; RX/OTC	EMBECTA INSULIN SYRINGE U/F	2	RX/OTC
BD PEN NEEDLE NANO 2ND GEN	2	Preferred NDC; RX/OTC	EMBECTA INSULIN SYRINGE U-100	2	
BD PEN NEEDLE NANO U/F	2	Preferred NDC; RX/OTC	EQL INSULIN SYRINGE	2	RX/OTC
BD PEN NEEDLE ORIGINAL U/F	2	Preferred NDC	FIFTY50 SUPERIOR COMFORT SYR	2	RX/OTC
BD PEN NEEDLE SHORT U/F	2	Preferred NDC; RX/OTC	GLOBAL EASY GLIDE INSULIN SYR	2	RX/OTC
BD SAFETYGLIDE INSULIN SYRINGE	2	RX/OTC	GLOBAL INJECT EASE INSULIN SYR	2	RX/OTC
BD SAFETY-LOK INSULIN SYRINGE	2	RX/OTC	GLOBAL INSULIN SYRINGES	2	RX/OTC
BD VEO INSULIN SYR U/F 1/2UNIT	2	RX/OTC	GLUCOPRO INSULIN SYRINGE	2	RX/OTC
BD VEO INSULIN SYRINGE U/F	2	RX/OTC	GNP INSULIN SYRINGE	2	RX/OTC

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
GNP INSULIN SYRINGES	2	RX/OTC	MONOJECT INSULIN SYRINGE	2	RX/OTC
GNP INSULIN SYRINGES 28GX1/2"	2	RX/OTC	MONOJECT ULTRA COMFORT SYRINGE	2	RX/OTC
GNP INSULIN SYRINGES 29GX1/2"	2	RX/OTC	MS INSULIN SYRINGE	2	RX/OTC
GNP INSULIN SYRINGES 30GX5/16"	2	RX/OTC	PRECISION SURE-DOSE SYRINGE	2	RX/OTC
GNP INSULIN SYRINGES 31GX5/16"	2	RX/OTC	PREFERRED PLUS INSULIN SYRINGE	2	RX/OTC
GNP ULTRA COM INSULIN SYRINGE	2	RX/OTC	PRO COMFORT INSULIN SYRINGE	2	RX/OTC
HEALTHWISE INSULIN SYR/NEEDLE	2	RX/OTC	PRODIGY INSULIN SYRINGE	2	RX/OTC
HM ULTICARE INSULIN SYRINGE	2	RX/OTC	PX INSULIN SYRINGE	2	
INSULIN SYRINGE	2	RX/OTC	RA INSULIN SYRINGE	2	RX/OTC
INSULIN SYRINGE- NEEDLE U-100	2	RX/OTC	REALITY INSULIN SYRINGE	2	RX/OTC
KINRAY INSULIN SYRINGE	2	RX/OTC	RELION INSULIN SYRINGE	2	RX/OTC
KMART VALU INSULIN SYRINGE 29G	2		SB INSULIN SYRINGE	2	RX/OTC
KMART VALU INSULIN SYRINGE 30G	2		SECURESAFE INSULIN SYRINGE	2	RX/OTC
KROGER INSULIN SYRINGE	2	RX/OTC	SURE COMFORT INSULIN SYRINGE	2	RX/OTC
LEADER INSULIN SYRINGE	2	RX/OTC	TECHLITE INSULIN SYRINGE	2	RX/OTC
LITETOUGH INSULIN SYRINGE	2	RX/OTC	TOPCARE ULTRA COMFORT INS SYR	2	RX/OTC
LONGS INSULIN SYRINGE	2	RX/OTC	TRUE COMFORT INSULIN SYRINGE	2	RX/OTC
MAGELLAN INSULIN SAFETY SYR	2	RX/OTC	TRUE COMFORT PRO INSULIN SYR	2	RX/OTC
MAXI-COMFORT INSULIN SYRINGE	2	RX/OTC	TRUEPLUS INSULIN SYRINGE	2	RX/OTC
MAXICOMFORT SYR 27G X 1/2"	2	RX/OTC	ULTICARE INSULIN SAFETY SYR	2	RX/OTC
MEDIC INSULIN SYRINGE	2	RX/OTC	ULTICARE INSULIN SYRINGE	2	RX/OTC
MM INSULIN SYRINGE/NEEDLE	2	RX/OTC	ULTIGUARD SAFEPACK SYR/NEEDLE	2	
			ULTRA COMFORT INSULIN SYRINGE	2	RX/OTC

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits	
ULTRA FLO INSULIN SYR 1/2 UNIT	2	RX/OTC	<i>sumatriptan-naproxen sodium</i>	1	Limit 9 per month; QL(0.3 EA daily); PA	
ULTRA FLO INSULIN SYRINGE	2	RX/OTC	TREXIMET (<i>sumatriptan-naproxen sodium</i>)	GP	Limit 9 per month; QL(0.3 EA daily); PA	
ULTRACARE INSULIN SYRINGE	2	RX/OTC	Migraine Products			
ULTRA-THIN II INS SYR SHORT	2	RX/OTC	<i>dihydroergotamine mesylate SOLN NA 4 MG/ML</i>	1	QL(8 ML per fill retail; 24 per fill mail)	
ULTRA-THIN II INSULIN SYRINGE	2	RX/OTC	<i>dihydroergotamine mesylate SOLN IJ 1 MG/ML</i>	1	QL(10 ML per fill retail; 30 per fill mail ; 20 ML per 30 day(s) retail; 60 ML per 90 days mail)	
VALUE HEALTH INSULIN SYRINGE	2	RX/OTC	ERGOMAR SUBL	2		
VANISHPOINT INSULIN SYRINGE	2	RX/OTC	MIGRAL SOLN NA (<i>dihydroergotamine mesylate</i>)	GP	QL(8 ML per fill retail; 24 per fill mail)	
VERIFINE INSULIN SYRINGE	2	RX/OTC	Migraine Products - NSAIDs			
VP INSULIN SYRINGE	2	RX/OTC	CAMBIA (<i>diclofenac potassium (migraine)</i>)	GP	Limit 9 per month; QL(0.3 EA daily); PA	
ZEVRX INSULIN SYRINGE	2	RX/OTC	<i>diclofenac potassium (migraine)</i>	1	Limit 9 per month; QL(0.3 EA daily); PA	
Respiratory Therapy Supplies			Serotonin Agonists			
INHALER SPACERS	2	MO	(Zolmitriptan) ZOMIG TABS	1	QL(9 EA per fill retail; 27 per fill mail ; 18 EA per 30 day(s) retail; 54 EA per 90 days mail)	
MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches			<i>almotriptan malate</i>	1	QL(6 EA per 30 day(s) retail)	
Calcitonin Gene-Related Peptide (CGRP) Receptor Antag			<i>eletriptan hydrobromide</i>	1	Limit 6 tabs per month; QL(0.2 EA daily)	
AJOVY SOAJ	SP	PA	FROVA (<i>frovatriptan succinate</i>)	GP	Limit 9 per month; QL(0.3 EA daily)	
AJOVY SOSY	SP	PA				
EMGALITY (300 MG DOSE) SOSY	SP	PA				
EMGALITY SOAJ	SP	PA				
EMGALITY SOSY	SP	PA				
UBRELVY	3	ST				
Migraine Combinations						
(Ergotamine W/ Caffeine) MIGERGOT SUPP	1					
CAFERGOT TABS (<i>ergotamine w/ caffeine</i>)	GP					
<i>ergotamine w/ caffeine</i> TABS	1					

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>frovatriptan succinate</i>	1	Limit 9 per month; QL(0.3 EA daily)	<i>sumatriptan succinate SOCT</i>	1	QL(2 ML per fill retail; 6 per fill mail ; 4 ML per 30 day(s) retail; 12 ML per 90 days mail)
IMITREX 5 MG/ACT, 20 MG/ACT (<i>sumatriptan</i>)	GP	Limit 6 per month; QL(0.2 EA daily)	<i>sumatriptan succinate SOLN 6 MG/0.5ML</i>	1	QL(2 ML per fill retail; 6 per fill mail ; 4 ML per 30 day(s) retail; 12 ML per 90 days mail)
IMITREX STATDOSE REFILL SOCT (<i>sumatriptan succinate</i>)	GP	QL(2 ML per fill retail; 6 per fill mail ; 4 ML per 30 day(s) retail; 12 ML per 90 days mail)	<i>sumatriptan succinate TABS</i>	1	QL(9 EA per fill retail; 27 per fill mail ; 18 EA per 30 day(s) retail; 54 EA per 90 days mail)
IMITREX STATDOSE SYSTEM SOAJ (<i>sumatriptan succinate</i>)	GP	QL(2 ML per fill retail; 6 per fill mail ; 4 ML per 30 day(s) retail; 12 ML per 90 days mail)	ZEMBRACE SYMTOUCH SOAJ	3	PA
IMITREX TABS (<i>sumatriptan succinate</i>)	GP	QL(9 EA per fill retail; 27 per fill mail ; 18 EA per 30 day(s) retail; 54 EA per 90 days mail)	<i>zolmitriptan SOLN 2.5 MG</i>	1	QL(9 EA per fill retail; 27 per fill mail ; 18 EA per 30 day(s) retail; 54 EA per 90 days mail)
<i>naratriptan hcl</i>	1	QL(27 EA per 90 day(s) retail; 27 EA per 90 days mail)	<i>zolmitriptan SOLN 5 MG</i>	1	QL(6 EA per 30 day(s) retail; 18 EA per 90 days mail)
RELPAX (<i>eletriptan hydrobromide</i>)	GP	Limit 6 tabs per month; QL(0.2 EA daily)	<i>zolmitriptan TABS</i>	1	QL(9 EA per fill retail; 27 per fill mail ; 18 EA per 30 day(s) retail; 54 EA per 90 days mail)
<i>rizatriptan benzoate TABS</i>	1	QL(12 EA per 30 day(s) retail; 36 EA per 90 days mail)	<i>zolmitriptan TBDP</i>	1	QL(9 EA per fill retail; 27 per fill mail ; 18 EA per 30 day(s) retail; 54 EA per 90 days mail)
<i>rizatriptan benzoate TBDP</i>	1	QL(12 EA per 30 day(s) retail; 36 EA per 90 days mail)			
<i>sumatriptan</i>	1	Limit 6 per month; QL(0.2 EA daily)			
<i>sumatriptan succinate SOAJ</i>	1	QL(2 ML per fill retail; 6 per fill mail ; 4 ML per 30 day(s) retail; 12 ML per 90 days mail)			

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ZOMIG SOLN 2.5 MG <i>(zolmitriptan)</i>	GP	QL(9 EA per fill retail; 27 per fill mail ; 18 EA per 30 day(s) retail; 54 EA per 90 days mail)	<i>sodium fluoride SOLN</i>	PV	PV; RX/OTC
ZOMIG SOLN 5 MG <i>(zolmitriptan)</i>	GP	QL(6 EA per 30 day(s) retail; 18 EA per 90 days mail)	<i>sodium fluoride TABS</i>	PV	PV
MINERALS & ELECTROLYTES			SOLUVITA SOLN	PV	PV; RX/OTC
Calcium			Magnesium		
CALCIFOL	3		<i>magnesium sulfate IJ 50 %</i>	SP	PA
Electrolyte Mixtures			MAGNESIUM SULFATE IJ 50 %	SP	PA
(Electrolyte-148) MULTIPLE ELECTRO TYPE 1 PH 5.5	SP	PA	MAGNESIUM SULFATE IV (<i>magnesium sulfate</i>)	SP	PA
(Electrolyte-A) MULTIPLE ELECTRO TYPE 1 PH 7.4	SP	PA	Phosphate		
ISOLYTE-S	SP	PA	(Pot Phosphate Monobasic W/ Sod Phosphate Dibasic & Monobasic) PHOSPHA 250 NEUTRAL, PHOSPHO-TRIN 250 NEUTRAL, WES-PHOS 250 NEUTRAL	1	
NORMOSOL-R PH 7.4	SP	PA	(Potassium Phosphate Monobasic) PHOSPHO-TRIN K500 TABS	1	
PLASMA-LYTE 148 27 MEQ/L-23 MEQ/L-98 MEQ/L-140 MEQ/L-3 MEQ/L-5 MEQ/L	SP	PA	K-PHOS-NEUTRAL (<i>pot phosphate monobasic w/ sod phosphate dibasic & monobasic</i>)	GP	
PLASMA-LYTE A <i>(electrolyte-a)</i>	SP	PA	K-PHOS TABS (<i>potassium phosphate monobasic</i>)	GP	
<i>potassium chloride in nacl</i> 20 MEQ/L-0.45 %, 20 MEQ/L-0.9 %	SP	PA	<i>pot phosphate monobasic w/ sod phosphate dibasic & monobasic</i>	1	
POTASSIUM CHLORIDE IN NACL 20 MEQ/L-0.45 %, 20 MEQ/L-0.9 % <i>(potassium chloride in nacl)</i>	SP	PA	Potassium		
Fluoride			(Potassium Bicarbonate) EFFER-K, K-PRIME, KLOR-CON/EF TBEF	1	
(Sodium Fluoride) FLUORITAB SOLN 0.125 MG/DROP	PV	PV	(Potassium Chloride Microencapsulated Crystals ER) KLOR-CON M10, KLOR-CON M15, KLOR-CON M20 10 MEQ	1	
(Sodium Fluoride) NAFRINSE CHEW 2.2 MG	PV	PV			
<i>sodium fluoride CHEW</i>	PV	PV			

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
(Potassium Chloride Microencapsulated Crystals ER) KLOR-CON M10, KLOR-CON M15, KLOR-CON M20 15 MEQ	1		<i>sodium chloride SOLN IV 0.45 %, 0.9 %, 3 %, 5 %</i>	SP	PA
(Potassium Chloride Microencapsulated Crystals ER) KLOR-CON M10, KLOR-CON M15, KLOR-CON M20 20 MEQ	1		SODIUM CHLORIDE SOLN IV 0.9 %	SP	PA
(Potassium Chloride) KLOR-CON, KLOR-CON 10 TBCR 8 MEQ	1		Zinc		
(Potassium Chloride) KLOR-CON, KLOR-CON 10 TBCR 10 MEQ	1		(Zinc Sulfate) ORAZINC CAPS	1	
(Potassium Chloride) KLOR-CON PACK PO 20 MEQ	1		GALZIN	3	
EFFER-K	3		<i>zinc sulfate CAPS</i>	1	
K-TAB TBCR 10 MEQ, 20 MEQ (<i>potassium chloride</i>)	GP		MISCELLANEOUS THERAPEUTIC CLASSES		
<i>potassium chloride microencapsulated crystals er</i>	1		Chelating Agents		
<i>potassium chloride CPCR</i>	1		CUPRIMINE CAPS (<i>penicillamine</i>)	GP	PA
<i>potassium chloride PACK PO 20 MEQ</i>	1		DEPEN TITRATABS TABS (<i>penicillamine</i>)	GP	
<i>potassium chloride SOLN PO 10 %, 20 %, 10 %</i>	1		<i>penicillamine CAPS</i>	1	PA
<i>potassium chloride SOLN IV 2 MEQ/ML, 10 MEQ/100ML, 10 MEQ/50ML, 20 MEQ/50ML</i>	SP	PA	<i>penicillamine TABS</i>	1	
POTASSIUM CHLORIDE SOLN IV 10 MEQ/100ML, 10 MEQ/50ML, 20 MEQ/50ML (<i>potassium chloride</i>)	SP	PA	SYPRINE (<i>trientine hcl</i>)	SP	PA
<i>potassium chloride TBCR 8 MEQ, 10 MEQ, 20 MEQ</i>	1		<i>trientine hcl 250 MG</i>	SP	PA
Sodium			Enzymes		
			XIAFLEX	SP	PA
			Immunomodulators		
			<i>lenalidomide 2.5 MG, 5 MG, 10 MG, 15 MG, 25 MG</i>	AC	PA
			REVLIMID 2.5 MG, 5 MG, 10 MG, 15 MG, 25 MG	AC	PA
			THALOMID	AC	
			Immunosuppressive Agents		
			(Azathioprine) AZASAN TABS 75 MG, 100 MG	1	
			(Cyclosporine Modified (For Microemulsion)) GENGRAF CAPS 25 MG, 100 MG	1	
			(Cyclosporine Modified (For Microemulsion)) GENGRAF SOLN	1	

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits																																																			
ASTAGRAF XL CP24	3	ST	NEORAL SOLN <i>(cyclosporine modified (for microemulsion))</i>	GP																																																				
ATGAM	SP	PA	NULOJIX	SP	PA																																																			
AZATHIOPRINE SODIUM	SP	PA	PROGRAF CAPS <i>(tacrolimus)</i>	GP																																																				
<i>azathioprine TABS</i>	1		PROGRAF PACK	SP	PA																																																			
CELLCEPT INTRAVENOUS <i>(mycophenolate mofetil hcl)</i>	SP	PA	PROGRAF SOLN	SP	PA																																																			
CELLCEPT CAPS <i>(mycophenolate mofetil)</i>	GP		RAPAMUNE SOLN <i>(sirolimus)</i>	GP																																																				
CELLCEPT SUSR <i>(mycophenolate mofetil)</i>	GP		RAPAMUNE TABS <i>(sirolimus)</i>	GP																																																				
CELLCEPT TABS <i>(mycophenolate mofetil)</i>	GP		SANDIMMUNE CAPS <i>(cyclosporine)</i>	GP																																																				
<i>cyclosporine modified (for microemulsion) CAPS</i>	1		SANDIMMUNE SOLN IV 50 MG/ML	SP	PA																																																			
<i>cyclosporine modified (for microemulsion) SOLN</i>	1		SIMULECT 20 MG	SP	PA																																																			
<i>cyclosporine CAPS</i>	1		<i>sirolimus SOLN</i>	1																																																				
<i>cyclosporine SOLN IV 50 MG/ML</i>	SP	PA	<i>sirolimus TABS</i>	1																																																				
ENVARSUS XR TB24	3	ST	<i>tacrolimus CAPS</i>	1																																																				
<i>everolimus (immunosuppressant) 0.25 MG, 0.5 MG, 0.75 MG</i>	1		THYMOGLOBULIN	SP	PA																																																			
IMURAN TABS <i>(azathioprine)</i>	GP		ZORTRESS 0.25 MG, 0.5 MG, 0.75 MG <i>(everolimus (immunosuppressant))</i>	GP																																																				
<i>mycophenolate mofetil hcl</i>	SP	PA	<i>mycophenolate mofetil CAPS</i>	1		Irrigation Solutions			<i>mycophenolate mofetil SUSR</i>	1		<i>(Irrigation Solutions, Physiological)</i>	1		<i>mycophenolate mofetil TABS</i>	1		PHYSIOLYTE, PHYSIOSOL IRRIGATION			<i>mycophenolate sodium</i>	1		<i>(Ringer's Irrigation) TIS-U-SOL</i>	1		MYFORTIC <i>(mycophenolate sodium)</i>	GP		<i>(Water For Irrigation, Sterile) ARGYLE STERILE WATER</i>	1		NEORAL CAPS <i>(cyclosporine modified (for microemulsion))</i>	GP		<i>lactated ringer's (irrigation)</i>	1					<i>ringer's irrigation</i>	1					<i>water for irrigation, sterile</i>	1					Potassium Removing Agents		
<i>mycophenolate mofetil CAPS</i>	1		Irrigation Solutions																																																					
<i>mycophenolate mofetil SUSR</i>	1		<i>(Irrigation Solutions, Physiological)</i>	1																																																				
<i>mycophenolate mofetil TABS</i>	1		PHYSIOLYTE, PHYSIOSOL IRRIGATION																																																					
<i>mycophenolate sodium</i>	1		<i>(Ringer's Irrigation) TIS-U-SOL</i>	1																																																				
MYFORTIC <i>(mycophenolate sodium)</i>	GP		<i>(Water For Irrigation, Sterile) ARGYLE STERILE WATER</i>	1																																																				
NEORAL CAPS <i>(cyclosporine modified (for microemulsion))</i>	GP		<i>lactated ringer's (irrigation)</i>	1																																																				
			<i>ringer's irrigation</i>	1																																																				
			<i>water for irrigation, sterile</i>	1																																																				
			Potassium Removing Agents																																																					

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
(Sodium Polystyrene Sulfonate) KIONEX, SPS (SODIUM POLYSTYRENE SULF) SUSP CO 15 GM/60ML	1		<i>triamcinolone acetonide (mouth)</i>	1	
LOKELMA	3	QL(1 EA daily); PA	Throat Products - Misc.		
<i>sodium polystyrene sulfonate POWD</i>	1		<i>cevimeline hcl</i>	1	
Systemic Lupus Erythematosus Agents			EVOXAC (<i>cevimeline hcl</i>)	GP	
BENLYSTA SOAJ	SP	PA	GELCLAIR	3	
BENLYSTA SOLR 120 MG	SP	PA	MUCOTROL WAFR	3	
BENLYSTA SOSY	SP	PA	ORAFATE PSTE	3	
MOUTH/THROAT/DENTAL AGENTS					
Anesthetics Topical Oral			<i>pilocarpine hcl (oral)</i>	1	
FIRST-MOUTHWASH BLM	3		PROTHELIAL PSTE	3	
<i>lidocaine hcl (mouth-throat)</i>	1		SALAGEN (<i>pilocarpine hcl (oral)</i>)	GP	
Anti-infectives - Throat			MULTIVITAMINS		
<i>clotrimazole</i>	1		Multiple Vitamins w/ Minerals		
NYSTATIN (<i>nystatin (mouth-throat)</i>)	GP				
<i>nystatin (mouth-throat)</i>	1				
ORAVIG	3				
Antiseptics - Mouth/Throat					
(Chlorhexidine Gluconate (Mouth-Throat)) PERIOGARD	1				
<i>chlorhexidine gluconate (mouth-throat)</i>	1				
DEBACTEROL	3				
PERIDEX (<i>chlorhexidine gluconate (mouth-throat)</i>)	GP				
Steroids - Mouth/Throat/Dental					
(Triamcinolone Acetonide (Mouth)) KOURZEQ, ORALONE	1				

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OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
(Multiple Vitamins W/ Minerals) A THRU Z ADVANCED, A THRU Z ADVANCED ADULT, A THRU Z HIGH POTENCY, A THRU Z SELECT, A THRU Z SELECT 50+ ADVANCED, A THRU Z SELECT 50+ MENS, A THRU Z SELECT ADVANCED, A THRU Z SELECT ULTIMATE WOMEN, A THRU Z ULTIMATE MENS, ANTIOXIDANT A/C/E/SELENIUM, ANTIOXIDANT PROTECTION FORMULA, ANTIOXIDANT VITAMINS, CENTAVITE A-Z COMPLETE- MINERAL, CENTRAVITES, CENTRAVITES 50 PLUS, CENTURY, CENTURY MATURE, CEROVITE SENIOR, CERTAVITE/ANTIOXIDA NTS, COMPANION, COMPETE, CVS DAILY MULTIPLE FOR MEN, CVS DAILY MULTIPLE WOMEN 50+, CVS EYE HEALTH & LUTEIN, CVS ONE DAILY ESSENTIAL, CVS ONE DAILY MENS FORMULA, CVS ONE DAILY WOMENS FORMULA, CVS SPECTRAVITE ADVANCED, CVS SPECTRAVITE MEN, CVS SPECTRAVITE MEN 50+, CVS SPECTRAVITE SENIOR, CVS SPECTRAVITE ULTRA MENS, CVS SPECTRAVITE WOMEN, CVS SPECTRAVITE	1	RX/OTC	WOMEN 50+, CVS SPECTRAVITE WOMENS SENIOR, CVS WOMENS ACTIVE DAILY, DAILY BETIC, DAILY COMBO MULTI VITAMINS, DAILY MENS HEALTH FORMULA, DAILY MULTIPLE VITAMINS/MIN, DAILY WOMENS HEALTH FORMULA, DAILY- VITAMIN MAXIMUM FORMULA, DIABETES HEALTH FORMULA, DIALYVITE 800/ULTRA D, EQ COMPLETE MULTIVIT ADULT 50+, EQ ONE DAILY WOMENS HEALTH, EQL CENTURY, EQL CENTURY MATURE, EQL CENTURY MATURE MEN 50+, EQL CENTURY MATURE WOMEN 50+, EQL ONE DAILY MENS 50+ ADVANCE, EQL ONE DAILY MENS HEALTH, EQL ONE DAILY WOMENS 50+ ADV, EQL VISION FORMULA, ESSENTIA, ESSENTIAL BALANCE, EYE-VITES, GERIVITE COMPLETE, GNP CENTURY ADULT FORMULA, GNP CENTURY MATURE WOMEN'S 50+, GNP HAIR/SKIN/NAILS, GNP HEALTHY EYES, GNP MEGA MULTI FOR MEN, GNP MEGA MULTI FOR WOMEN, GNP ONE DAILY MENS HEALTH 50+, GNP ONE DAILY MENS/LYCOPENE, GNP ONE DAILY WOMENS, GNP ONE DAILY WOMENS 50+, GNP THERAPEUTIC-M, HAIR SKIN AND NAILS		

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OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FORMULA, HAIR/SKIN/NAILS, HEALTHY EYES, HI- KOVITE 2-PART FORMULA, HI-POTENCY MULTI-VITAMIN, HM COMPLETE WOMEN, HM WOMENS 50+ ADVANCED DAILY, I- VITE, ICAPS MV, KP ADULTS 50+ DAILY FORMULA, KP ADULTS DAILY FORMULA, KP MENS 50+ DAILY FORMULA, KP MENS DAILY FORMULA, KP VISION FORMULA, KP VISION FORMULA/LUTEIN, KP WOMENS 50+ DAILY FORMULA, KP WOMENS DAILY FORMULA, MACUVITE, MACUVITE EYE CARE, MACUVITE/LUTEIN, MAXIMUM DAILY GREEN, MEIJER ADVANCED FORMULA, MENS LIFE PACK, MILLTRIUM ADVANCED FORMULA, MILLTRIUM CARDIO, MILLTRIUM SENIOR, MULTI COMPLETE/IRON, MULTI FOR HER, MULTI FOR HER 50+, MULTI FOR HIM, MULTI FOR HIM 50+, MULTI-LEAN, MULTI-VITAMIN MENOPAUSAL, MULTI- VITAMIN/MINERALS, MULTIPLE VIT/MINERALS/NO IRON, MULTIPLE VITAMINS/WOMENS, MULTIVITAMIN ADULTS, MULTIVITAMIN ADULTS 50+, MULTIVITAMIN MEN 50+, MULTIVITAMIN WOMEN, MULTIVITAMIN			WOMEN 50+, MULTIVITAMIN WOMENS 50+ ADV, MYAMULTI, OCUTABS, OCUTABS- LUTEIN, OCUVITE EXTRA, OCUVITE EYE + MULTI, OCUVITE- LUTEIN, ONE DAILY 50 PLUS, ONE DAILY CALCIUM/IRON, ONE DAILY COMPLETE, ONE DAILY COMPLETE FOR MEN, ONE DAILY FOR MEN 50+ ADVANCED, ONE DAILY FOR MEN/LYCOPENE, ONE DAILY FOR WOMEN, ONE DAILY FOR WOMEN 50+ ADV, ONE DAILY HEALTHY WEIGHT, ONE DAILY HEALTHY WEIGHT ADV, ONE DAILY MAXIMUM, ONE DAILY MENS, ONE DAILY MENS 50+ MULTIVIT, ONE DAILY MENS 50+/LYCOPENE, ONE DAILY MENS HEALTH, ONE DAILY MULTIVIT/IRON-FREE, ONE DAILY MULTIVITAMIN MEN, ONE DAILY MULTIVITAMIN WOMEN, ONE DAILY WOMENS, ONE DAILY WOMENS 50 PLUS, ONE DAILY WOMENS 50+, ONE DAILY/MINERALS, ONE- A-DAY TEEN ADVANTAGE/HER, ONE- DAILY MULTI- VIT/MINERAL, OPTIC- VITES, OPTIC-VITES WITH LUTEIN, OPTIMUM PMS, OSTEOPRIME ULTRA, PROSIGHT, PX ADVANCED FORMULA MULTIVITS, PX COMPLETE SENIOR		

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MULTIVITS, PX MENS MULTIVITAMINS, QC DAILY MULTIVIT/MULTIMINERAL, QC HAIR SKIN & NAILS, QC MENS DAILY MULTIVITAMIN, QC MULTI-VITE, QC MULTI-VITE 50 & OVER, QC THERIN-M, QC WOMENS DAILY MULTIVITAMIN, QUINTABS-M, RA CENTRAL-VITE MENS MATURE, RA CENTRAL-VITE WOMENS MATURE, RA ONE DAILY MAXIMUM, RA ONE DAILY MENS 50+ W/VIT D3, RA ONE DAILY MENS MULTI, RA ONE DAILY MENS/VIT D-3, RENAPLEX, SENIOR TABS, SENTRY, SENTRY SENIOR, SM ANTIOXIDANT VITAMINS, SM COMPLETE, SM COMPLETE 50+, SM COMPLETE 50+ ULTIMATE MENS, SM COMPLETE 50+ ULTIMATE WOMEN, SM COMPLETE ADVANCED FORMULA, ... (38) TABS			ADVANCED DIABETIC MULTIVITAMIN TABS ALGAE BASED CALCIUM TABS ALIVE CALCIUM BONE SUPPORT TABS ALIVE DAILY ENERGY TABS ALIVE DIABETIC MULTIVITAMIN TABS ALIVE ENERGY 50+ TABS ALIVE GARDEN GOODNESS TABS ALIVE MENS 50+ ULTRA TABS ALIVE MENS 50+ TABS ALIVE MENS COMPLETE MULTI TABS ALIVE MENS ULTRA TABS ALIVE ONCE DAILY WOMENS TABS ALIVE ULTRA POTENCY ADULT TABS ALIVE ULTRA POTENCY WOMENS 50+ TABS ALIVE WOMENS 50+ COMPLETE MV TABS ALIVE WOMENS ENERGY TABS ALPHA BETIC TABS ANTIOXIDANT FORMULA TABS AZO HORMONAL HEALTH CYCLE CARE TABS AZO HORMONAL HEALTH HAPPY CYCL TABS BACMIN TABS	3	RX/OTC RX/OTC
ABC COMPLETE ADULT TABS	3	RX/OTC			
ABC COMPLETE MENS TABS	3	RX/OTC			
ABC COMPLETE SENIOR 50+ TABS	3	RX/OTC			
ABC COMPLETE SENIOR MENS 50+ TABS	3	RX/OTC			
ABC COMPLETE SENIOR WOMENS 50+ TABS	3	RX/OTC			
ABC COMPLETE WOMENS TABS	3	RX/OTC			

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
BARIATRIC MULTIVITAMINS TABS	3	RX/OTC	CENTRUM SILVER WOMEN 50+ TABS <i>(multiple vitamins w/ minerals)</i>	GP	RX/OTC
BASIC AM TABS	3	RX/OTC	CENTRUM SILVER TABS <i>(multiple vitamins w/ minerals)</i>	GP	RX/OTC
BASIC PM TABS	3	RX/OTC	CENTRUM SPECIALIST HEART TABS	3	RX/OTC
BONEUP VEGETARIAN TABS	3	RX/OTC	CENTRUM SPECIALIST IMMUNE TABS	3	RX/OTC
CAL-DAY 1000 TABS	3	RX/OTC	CENTRUM SPECIALIST VISION TABS	3	RX/OTC
CENTRAVITES 50 PLUS TABS	3	RX/OTC	CENTRUM ULTRA WOMENS TABS	3	RX/OTC
CENTRAVITES ADULTS TABS	3	RX/OTC	CENTRUM WOMEN TABS <i>(multiple vitamins w/ minerals)</i>	GP	RX/OTC
CENTRUM ADULTS TABS <i>(multiple vitamins w/ minerals)</i>	GP	RX/OTC	CERTAVITE SENIOR/ANTIOXIDANT TABS	3	RX/OTC
CENTRUM CARDIO TABS	3	RX/OTC	CERTAVITE SENIOR TABS	3	RX/OTC
CENTRUM MEN TABS	3	RX/OTC	CERTAVITE/ANTIOXIDA NTS TABS	3	RX/OTC
CENTRUM MEN TABS <i>(multiple vitamins w/ minerals)</i>	GP	RX/OTC	CITRACAL +D3 TABS	3	RX/OTC
CENTRUM MINIS ADULTS 50+ TABS	3	RX/OTC	CVS DAILY MULTIV/MINERAL MENS TABS	3	RX/OTC
CENTRUM MINIS MEN 50+ TABS	3	RX/OTC	CVS ONE DAILY MENS 50+ ADV TABS	3	RX/OTC
CENTRUM MINIS WOMEN 50+ TABS	3	RX/OTC	CVS ONE DAILY WOMENS 50+ ADV TABS	3	RX/OTC
CENTRUM MINIS WOMEN IMMUNE SUP TABS	3	RX/OTC	CVS SPECTRAVITE ADULT 50+ TABS	3	RX/OTC
CENTRUM SILVER 50+MEN TABS <i>(multiple vitamins w/ minerals)</i>	GP	RX/OTC	CVS SPECTRAVITE ADULTS TABS	3	RX/OTC
CENTRUM SILVER 50+WOMEN TABS <i>(multiple vitamins w/ minerals)</i>	GP	RX/OTC	CVS SPECTRAVITE ULTRA MEN 50+ TABS	3	RX/OTC
CENTRUM SILVER ADULT 50+ TABS <i>(multiple vitamins w/ minerals)</i>	GP	RX/OTC	CVS SPECTRAVITE ULTRA MENS TABS	3	RX/OTC
CENTRUM SILVER ULTRA WOMENS TABS	3	RX/OTC	CVS SPECTRAVITE ULTRA WOMEN TABS	3	RX/OTC

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
DAYAVITE TABS	3	RX/OTC	FITNESS TABS FOR WOMEN AM/PM TABS	3	RX/OTC
DERMACINRX MULTITAM TABS	3	RX/OTC	FLORRAVITE TABS	3	RX/OTC
DERMACINRX RIBOTIN-E TABS	3	RX/OTC	FLORRAXYL TABS	3	RX/OTC
DERMACINRX ZINTREXYL-C TABS	3	RX/OTC	FOLAMAX TABS	3	RX/OTC
DERMAVITE TABS	3	RX/OTC	FOLAPRIME TABS	3	RX/OTC
DIALYVITE SUPREME D TABS	3	RX/OTC	FOLIFLEX TABS	3	RX/OTC
DIATROL TABS	3	RX/OTC	FOLITIN-Z TABS	3	RX/OTC
EQ COMPLETE MULTIVITAMIN-ADULT TABS	3	RX/OTC	FOSFREE TABS (<i>multiple vitamins w/ minerals</i>)	GP	RX/OTC
EQ ONE DAILY MENS 50+ TABS	3	RX/OTC	FREEDAVITE TABS	3	RX/OTC
EQ ONE DAILY MENS HEALTH TABS	3	RX/OTC	FT CENTURY 50+ TABS	3	RX/OTC
EQ ONE DAILY WOMENS 50+ TABS	3	RX/OTC	FT CENTURY ADULTS TABS	3	RX/OTC
EQ ONE DAILY WOMENS HEALTH TABS	3	RX/OTC	FT CENTURY MEN 50+ TABS	3	RX/OTC
EQL CENTURY MATURE ADULTS 50+ TABS	3	RX/OTC	FT CENTURY MEN TABS	3	RX/OTC
EQL CENTURY MENS TABS	3	RX/OTC	FT CENTURY WOMEN 50+ TABS	3	RX/OTC
EQL CENTURY WOMENS TABS	3	RX/OTC	FT CENTURY WOMEN TABS	3	RX/OTC
EQL ONE DAILY MENS TABS	3	RX/OTC	FT EYE HEALTH TABS	3	RX/OTC
ESTROVEN MENOPAUSE SUPPLEMENT TABS	3	RX/OTC	FT HAIR SKIN & NAILS EXTRA STR TABS	3	RX/OTC
EYE HEALTH + LUTEIN TABS	3	RX/OTC	FT ONE DAILY MENS TABS	3	RX/OTC
EYE MULTIVITAMIN/SODIUM TABS	3	RX/OTC	FT ONE DAILY WOMENS TABS	3	RX/OTC
FINAZOL TABS	3	RX/OTC	GERI-FREEDA SENIOR FORMULA TABS	3	RX/OTC
FITNESS TABS FOR MEN AM/PM TABS	3	RX/OTC	GNP CENTURY ADULT TABS	3	RX/OTC
			GNP THERAPEUTIC-M TABS	3	RX/OTC
			HAIR SKIN & NAILS ADVANCED TABS	3	RX/OTC
			HAIR SKIN & NAILS TABS	3	RX/OTC
			HEAD CARE PROACTIVE HEALTH TABS	3	RX/OTC

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
HIGH POT MULTIVITAMIN/BETA-CAR TABS	3	RX/OTC	<i>multiple vitamins w/minerals TABS</i>	1	RX/OTC
HIGH POTENCY MULTIVIT/FA TABS	3	RX/OTC	MULTITOL-M TABS	3	RX/OTC
HM COMPLETE MEN TABS	3	RX/OTC	MULTIVITAMIN ADULT (MINERALS) TABS	3	RX/OTC
HM HAIR/SKIN/NAILS TABS	3	RX/OTC	MULTIVITAMIN MEN TABS	3	RX/OTC
HYLAZINC TABS	3	RX/OTC	MULTI-VITAMIN MONOCAPS TABS	3	RX/OTC
ICAPS AREDS FORMULA TABS	3	RX/OTC	MULTIVITAMIN WOMEN TABS	3	RX/OTC
KEYFOLIC TABS	3	RX/OTC	MULTIVITAMIN/ZINC STRESS TABS	3	RX/OTC
KEYLOSA TABS	3	RX/OTC	MULTIVITAMIN-MINERALS TABS	3	RX/OTC
K-PAX IMMUNE PROFESSIONAL ST TABS	3	RX/OTC	NAT-RUL THERAVITE-M TABS	3	RX/OTC
LIVER DETOX TABS	3	RX/OTC	NATRUL-VITES TABS	3	RX/OTC
LUTEIN-ZEAXANTHIN TABS 60 MG-5 MG-1 MG-15 MG-1 MG-750 MCG-20 MG	3	RX/OTC	NEOVITE TABS	3	RX/OTC
MEDI TAB TABS	3	RX/OTC	NICADAN TABS	3	RX/OTC
MEGA MULTI FOR WOMEN TABS	3	RX/OTC	NICAZEL FORTE TABS	3	RX/OTC
MEGA MULTI MEN TABS	3	RX/OTC	NICAZEL TABS	3	RX/OTC
MEGAVITE FRUITS & VEGGIES TABS	3	RX/OTC	NO IRON MULT VITAMIN-MINERALS TABS	3	RX/OTC
MEGAVITE GOLDEN YEARS 55+ TABS	3	RX/OTC	NUTRICAP TABS	3	RX/OTC
MENS 50+ MULTI VITAMIN/MIN TABS	3	RX/OTC	OCULAR VITAMINS TABS	3	RX/OTC
MENS 50+ MULTIVITAMIN TABS	3	RX/OTC	ONCOVITE TABS	3	RX/OTC
MENS MULTI HEALTH FORMULA TABS	3	RX/OTC	ONE A DAY ENERGY TABS	3	RX/OTC
MENS MULTI VITAMIN & MINERAL TABS	3	RX/OTC	ONE A DAY MEN 50 PLUS TABS	3	RX/OTC
MENS MULTIVITAMIN TABS	3	RX/OTC	ONE A DAY TRIPLE IMMUNE SUPPRT TABS	3	RX/OTC
MULTI-BETIC DIABETES TABS	3	RX/OTC	ONE A DAY WOMEN 50 PLUS TABS	3	RX/OTC
			ONE DAILY MEN FORMULA W/O IRON TABS	3	RX/OTC
			ONE DAILY MENS 50+ MULTIVIT TABS	3	RX/OTC

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ONE DAILY MULTIVITAMIN WOMEN TABS	3	RX/OTC	ONE-A-DAY WOMENS MIND & BODY TABS <i>(multiple vitamins w/ minerals)</i>	GP	RX/OTC
ONE DAILY WOMENS TABS	3	RX/OTC	ONE-A-DAY WOMENS PETITES TABS <i>(multiple vitamins w/ minerals)</i>	GP	RX/OTC
ONE-A-DAY ENERGY TABS	3	RX/OTC	ONE-A-DAY WOMENS TABS	3	RX/OTC
ONE-A-DAY MENOPAUSE FORMULA TABS	3	RX/OTC	ONEVITE TABS	3	RX/OTC
ONE-A-DAY MENS (MINERALS) TABS	3	RX/OTC	OPTIVITE P.M.T. TABS <i>(multiple vitamins w/ minerals)</i>	GP	RX/OTC
ONE-A-DAY MENS 50+ ADVANTAGE TABS	3	RX/OTC	OPURITY TABS	3	RX/OTC
ONE-A-DAY MENS 50+ TABS	3	RX/OTC	OSTEOPRIME PLUS TABS	3	RX/OTC
ONE-A-DAY MENS HEALTH FORMULA TABS	3	RX/OTC	PARVLEX TABS	3	RX/OTC
ONE-A-DAY MENS PRO EDGE TABS	3	RX/OTC	PHYTOMULTI TABS	3	RX/OTC
ONE-A-DAY PROACTIVE 65+ TABS	3	RX/OTC	PRESERVISION AREDS TABS	3	RX/OTC
ONE-A-DAY TEEN ADVANTAGE/HIM TABS	3	RX/OTC	PRO-CAL TABS	3	RX/OTC
ONE-A-DAY WEIGHT SMART ADVANCE TABS <i>(multiple vitamins w/ minerals)</i>	GP	RX/OTC	PROCERV HP TABS	3	RX/OTC
ONE-A-DAY WOMENS 50 PLUS TABS <i>(multiple vitamins w/ minerals)</i>	GP	RX/OTC	PROFOLA TABS	3	RX/OTC
ONE-A-DAY WOMENS 50+ ADVANTAGE TABS <i>(multiple vitamins w/ minerals)</i>	GP	RX/OTC	PRORENAL + D TABS	3	RX/OTC
ONE-A-DAY WOMENS 50+ TABS	3	RX/OTC	PROVIT TABS	3	RX/OTC
ONE-A-DAY WOMENS HEALTHY SKIN TABS <i>(multiple vitamins w/ minerals)</i>	GP	RX/OTC	QC MULTI-VITE TABS	3	RX/OTC
			QUIN B STRONG TABS	3	RX/OTC
			QUINTABS-M TABS	3	RX/OTC
			RA CENTRAL-VITE TABS	3	RX/OTC
			RAYAVIT TABS	3	RX/OTC
			RENAPLEX-D TABS	3	RX/OTC
			SENTRY SENIOR MENS 50+ TABS	3	RX/OTC
			SENTRY SENIOR/LUTEIN TABS	3	RX/OTC
			SENTRY TABS	3	RX/OTC
			SIDEROL TABS	3	RX/OTC
			SM ONE DAILY MENS TABS	3	RX/OTC

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SM ONE DAILY WOMENS TABS	3	RX/OTC	VENEXA FE TABS	3	RX/OTC
SOLO TABS	3	RX/OTC	VENEXA TABS	3	RX/OTC
SPECTRAVITE TABS	3	RX/OTC	VENTRIXYL FE TABS	3	RX/OTC
STROVITE ONE TABS	3	RX/OTC	VENTRIXYL TABS	3	RX/OTC
SUPER D-ZINC-SELENIUM-COPPER TABS	3	RX/OTC	VITABASIC COMPLETE TABS	3	RX/OTC
SUPERIOR MENS MULTI TABS	3	RX/OTC	VITABASIC SENIOR TABS	3	RX/OTC
SUPERIOR WOMENS MULTI TABS	3	RX/OTC	VITACORE TABS	3	RX/OTC
SYSTANE ICAPS AREDS2 TABS	3	RX/OTC	VITAMIN D3 COMPLETE TABS	3	RX/OTC
THERA M PLUS TABS	3	RX/OTC	VITAROCA PLUS TABS <i>(multiple vitamins w/ minerals)</i>	GP	RX/OTC
THERABETIC MULTI-VITAMIN TABS	3	RX/OTC	VITASANA TABS	3	RX/OTC
THERAGRAN-M ADVANCED 50 PLUS TABS	3	RX/OTC	VITATRUM TABS	3	RX/OTC
THERAGRAN-M ADVANCED TABS	3	RX/OTC	VITEYES CLASSIC MULTIVITAMIN TABS	3	RX/OTC
THERAGRAN-M PREMIER 50 PLUS TABS	3	RX/OTC	VITEYES OPTIC NERVE SUPPORT TABS	3	RX/OTC
THERAGRAN-M PREMIER TABS	3	RX/OTC	VITRAMYN TABS	3	RX/OTC
THERAGRAN-M TABS	3	RX/OTC	VITRANOL FE TABS	3	RX/OTC
THERA-M PLUS MV W/BETA-CAROT TABS	3	RX/OTC	VITRANOL TABS	3	RX/OTC
THERA-M TABS	3	RX/OTC	VITREXATE FE TABS	3	RX/OTC
THERA-TABS M TABS	3	RX/OTC	VITREXATE TABS	3	RX/OTC
THERA-VITE MAX-M TABS	3	RX/OTC	VITREXYL + IRON TABS	3	RX/OTC
THEREMS-M TABS	3	RX/OTC	VITREXYL TABS	3	RX/OTC
T-VITES TABS	3	RX/OTC	VITRUM 50+ ADULT-MULTI TABS	3	RX/OTC
UDAMIN SP TABS 12.5 MG-1000 MCG-250 MCG-2.5 MG-17 MG-7.5 MG-100 MCG-75 UNIT-320 MG	3	RX/OTC	VITRUM 50+ SENIOR MULTI TABS	3	RX/OTC
ULTRA BONEUP TABS	3	RX/OTC	WELLFOLA TABS	3	RX/OTC
			WOMENS 50+ MULTI VITAMIN/MIN TABS	3	RX/OTC
			WOMENS 50+ MULTI VITAMIN TABS	3	RX/OTC
			WOMENS MULTI VITAMIN & MINERAL TABS	3	RX/OTC

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits	
YELETS TEENAGE FORMULA TABS	3	RX/OTC	(Pediatric Vitamins ACD W/ Fluoride) TRI-VITE/FLUORIDE SOLN	1	AL(Up to 6 yrs old); RX/OTC	
Ped Multi Vitamins w/FI & FE				FLORAFOL PEDIATRIC CHEW	2	AL(Up to 6 yrs old); RX/OTC
(Ped Multivitamins W/FI & Iron) MULTI-VIT/IRON/FLUORIDE, MULTIVITAMIN/FLUORIDE/IRON SOLN 35 MG/ML-0.4 MG/ML-0.5 MG/ML-400 UNIT/ML-1500 UNIT/ML-8 MG/ML-5 UNIT/ML-0.6 MG/ML-0.25 MG/ML-10 MG/ML	1	RX/OTC	FLORAFOL PEDIATRIC SOLN	2	AL(Up to 6 yrs old); RX/OTC	
(Ped Multivitamins W/FI & Iron) MULTI-VIT/IRON/FLUORIDE, MULTIVITAMIN/FLUORIDE/IRON SOLN 35 MG/ML-0.4 MG/ML-0.5 MG/ML-400 UNIT/ML-1500 UNIT/ML-8 MG/ML-0.6 MG/ML-0.25 MG/ML-5 UNIT/ML-10 MG/ML	1	RX/OTC	FLORIVA PLUS SOLN	2	AL(Up to 6 yrs old); RX/OTC	
(Ped Multivitamins W/FI & Iron) MULTI-VIT/IRON/FLUORIDE, MULTIVITAMIN/FLUORIDE/IRON SOLN 35 MG/ML-0.4 MG/ML-0.5 MG/ML-400 UNIT/ML-1500 UNIT/ML-8 MG/ML-0.6 MG/ML-0.25 MG/ML-5 UNIT/ML-10 MG/ML	1	RX/OTC	FLOTREX CHEW 0.5 MG	2	AL(Up to 6 yrs old); RX/OTC	
POLY-VI-FLOR/IRON CHEW	3	AL(Up to 6 yrs old)	MULTIVITAMIN + FLUORIDE CHEW	2	AL(Up to 6 yrs old); RX/OTC	
POLY-VI-FLOR/IRON SUSP	3	RX/OTC	MULTIVITAMIN/FLUORIDE CHEW	2	AL(Up to 6 yrs old); RX/OTC	
Ped MV w/ Fluoride				MULTIVITAMIN/FLUORIDE SOLN	2	AL(Up to 6 yrs old); RX/OTC
(Pediatric Multivitamins W/FI) MULTIVITAMIN/FLUORIDE CHEW	1	AL(Up to 6 yrs old); RX/OTC	MULTI-VIT-FLOR CHEW	2	AL(Up to 6 yrs old); RX/OTC	
(Pediatric Multivitamins W/FI) MULTIVITAMIN/FLUORIDE SOLN	1	AL(Up to 6 yrs old); RX/OTC	<i>pediatric multivitamins w/fi CHEW</i>	1	AL(Up to 6 yrs old); RX/OTC	
Prenatal Vitamins						
(Prenatal Vit W/ Docusate-Iron Carbonyl-Folic Acid) INATAL GT TABS				1		
(Prenatal Vit W/ Ferrous Fumarate-Folic Acid) PRENATAL 19 CHEW				1		

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
(Prenatal Vit W/ Ferrous Fumarate-L Methylfolate-Folic Acid) PNV-SELECT	1		DUET DHA BALANCED MISC 120 MG-50 MG-15 MG-1 MG-640 UNIT-12 MCG-2 MG-55 MG-20 MG-215 MG-1.5 MG-25 MG-25 MG-1.8 MG-2800 UNIT-25 MG-210 MCG-65 MCG-267 MG	3	
(Prenatal Vit W/ Iron Carbonyl-Folic Acid) PRENATABS RX TABS 120 MG-3 MG-30 MCG-1 MG-400 UNIT-8 MCG-3 MG-20 MG-7 MG-3 MG- 100 MG-15 MG-3 MG- 4000 UNIT-200 MG-150 MCG-30 UNIT-29 MG	1	RX/OTC	ENBRACE HR	3	
(Prenatal Without A W/ Fe Fumarate-L Methylfolate-FA-DHA) PNV-DHA	1		FOLIVANE-OB	2	
ATABEX EC TBEC	2		KOSHER PRENATAL PLUS IRON TABS	3	
ATABEX OB	2		M-NATAL PLUS TABS	2	RX/OTC
CITRANATAL 90 DHA 120 MG-20 MG-1 MG-3 MG-400 UNIT-3.4 MG-20 MG-50 MG-25 MG-2 MG-159 MG-90 MG-150 MCG-30 UNIT-0.75 MG-300 MG	2		NATACHEW CHEW 120 MG-10 MG-20 UNIT-1 MG-400 UNIT-12 MCG-3 MG-20 MG-2 MG-2700 UNIT-28 MG	3	
CITRANATAL ASSURE	2		NEEVO DHA 85 MG-25 MG-15 MG-5 MCG-1.4 MG-18 MG-27 MG-110 MG-1.4 MG-60 MG-220 MCG-60 MCG-1 MG-1.13 MG	3	
CITRANATAL B-CALM 120 MG-25 MG-1 MG-400 UNIT-120 MG-20 MG	3		NEONATAL + DHA MISC	PV	PV
CITRANATAL BLOOM	3		NEONATAL 19	2	
CITRANATAL DHA	2		NEONATAL COMPLETE TABS 120 MG-10 MG-9.2 MG-1000 MCG-10 MCG-12 MCG-3 MG-5 MG-20 MG-27 MG-200 MG-1.84 MG-25 MG-2 MG-1200 MCG-2 MG-0.2 MG	2	RX/OTC
CITRANATAL HARMONY 25 MG-1 MG-400 UNIT-50 MG-104 MG-27 MG-30 UNIT-260 MG	3		NEONATAL FE	2	
CITRANATAL MEDLEY	3		NEONATAL PLUS TABS	2	RX/OTC
C-NATE DHA CAPS	3		NESTABS	3	
COMPLETENATE CHEW	2		NESTABS DHA	2	
CONCEPT DHA	2		NESTABS ONE	3	
CONCEPT OB	2		NIVA-PLUS TABS	2	RX/OTC
DUET DHA 400 MISC	3		OB COMPLETE ONE	3	
			OB COMPLETE PETITE	3	
			OB COMPLETE PREMIER	3	

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
OB COMPLETE/DHA	3		PRENATE ESSENTIAL 90 MG-26 MG-280 MCG-400 MCG-220 UNIT-13 MCG-155 MG-50 MG-300 MG-150 MCG-10 UNIT-40 MG-600 MCG-18 MG	3	
OBSTETRIX ONE (WITH DOCUSATE)	3		PRENATE MINI 60 MG-26 MG-280 MCG-400 MCG-1000 UNIT-13 MCG-80 MG-25 MG-350 MG-18 MG-150 MCG-10 UNIT-600 MCG-25 MG	3	
ONE VITE WOMENS PLUS TABS	2	RX/OTC	PRENATE PIXIE	3	
PNV-DHA+DOCUSATE	3		PRENATE RESTORE	3	
PNV-OMEGA	3		PRENATRIX TABS	2	RX/OTC
PRENA 1 TRUE	3		PRENATRYL TABS	2	RX/OTC
PRENA1 PEARL	3		PRIMACARE	3	
PRENAISSANCE	3		RELNATE DHA CAPS	3	
PRENAISSANCE PLUS CAPS	3		SELECT-OB+DHA MISC	3	
PRENATAL 19 CHEW	2		SELECT-OB CHEW 60 MG-2.5 MG-1 MG-400 UNIT-5 MCG-1.8 MG-15 MG-1.6 MG-25 MG-15 MG-30 UNIT-29 MG-1700 UNIT	3	
PRENATAL 19 TABS	3	RX/OTC	SE-NATAL 19 CHEW	2	
PRENATAL PLUS VITAMIN/MINERAL TABS	2	RX/OTC	SE-NATAL 19 TABS	3	RX/OTC
PRENATAL PLUS TABS	2	RX/OTC	THERANATAL CORE NUTRITION TABS	2	RX/OTC
PRENATAL TABS 120 MG-10 MG-1 MG-10 MCG-12 MCG-3 MG-20 MG-1200 MCG-27 MG-200 MG-1.84 MG-25 MG-2 MG-10 MG	2	RX/OTC	THRIVITE RX TABS	3	RX/OTC
PRENATAL-U CAPS	2		TRICARE TABS	2	RX/OTC
PRENATE	3		TRISTART DHA	3	
PRENATE DHA 90 MG-26 MG-400 MCG-400 UNIT-25 MCG-155 MG-50 MG-300 MG-40 UNIT-600 MCG-18 MG	3		TRISTART FREE	3	
PRENATE ELITE 75 MG-21 MG-330 MCG-400 MCG-600 UNIT-13 MCG-3.5 MG-21 MG-3 MG-155 MG-25 MG-15 MG-1.5 MG-2600 UNIT-150 MCG-40 UNIT-600 MCG-20 MG	3		TRISTART ONE	3	
PRENATE ENHANCE	3		VINATE DHA RF	3	
			VINATE II	2	
			VIRT-NATE DHA CAPS	3	
			VIRT-PN DHA	3	
			VITAFOL GUMMIES	3	
			VITAFOL ULTRA	2	
			VITAFOL-NANO	3	

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits	
VITAFOL-ONE CAPS	3		<i>methocarbamol TABS 500 MG, 750 MG</i>	1		
VITAMEDMD ONE RX/QUATREFOLIC	3		<i>orphenadrine citrate TB12</i>	1		
VITAPEARL	3		SOMA TABS <i>(carisoprodol)</i>	GP		
VITATELY WITH GINGER TABS	2	RX/OTC	<i>tizanidine hcl CAPS</i>	1		
VITATRUE	3		<i>tizanidine hcl TABS</i>	1		
VIVA DHA CAPS	3		ZANAFLEX CAPS <i>(tizanidine hcl)</i>	GP		
WESCAP-C DHA	2		ZANAFLEX TABS 4 MG <i>(tizanidine hcl)</i>	GP		
WESCAP-PN DHA	3		Direct Muscle Relaxants			
WESNATE DHA CAPS	3		DANTRIUM CAPS 25 MG <i>(dantrolene sodium)</i>	GP		
WESTAB PLUS TABS	2	RX/OTC	<i>dantrolene sodium CAPS</i>	1		
WESTGEL DHA	3		Muscle Relaxant Combinations			
MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms						
Central Muscle Relaxants						
(Carisoprodol) VANADOM TABS 350 MG	1		(Orphenadrine W/ Aspirin & Caff) NORGESIC, ORPHENGESIC FORTE 385 MG-30 MG-25 MG	1		
(Chlorzoxazone) LORZONE TABS 375 MG, 750 MG	1		<i>orphenadrine w/ aspirin & caff 385 MG-30 MG-25 MG</i>	1		
(Cyclobenzaprine Hcl) FEXMID TABS 7.5 MG	1		NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus			
AMRIX CP24 <i>(cyclobenzaprine hcl)</i>	GP	QL(1 EA daily); ST	Drugs to treat the Nose or Sinus			
<i>baclofen SOLN IT 10 MG/20ML</i>	SP	PA	Nasal Agent Combinations			
<i>baclofen TABS</i>	1		<i>azelastine hcl-fluticasone propionate SUSP</i>	1	Limit 1 inhaler per month; QL(0.77 GM daily)	
<i>carisoprodol TABS</i>	1		DYMISTA SUSP <i>(azelastine hcl-fluticasone propionate)</i>	GP	Limit 1 inhaler per month; QL(0.77 GM daily)	
<i>chlorzoxazone TABS</i>	1		Nasal Antiallergy			
<i>cyclobenzaprine hcl CP24</i>	1	QL(1 EA daily); ST	(Azelastine Hcl) ASTEPRO, ASTEPRO ALLERGY, ASTEPRO CHILDRENS 205.5 MCG/SPRAY	1	QL(1 ML daily); RX/OTC	
<i>cyclobenzaprine hcl TABS</i>	1					
GABLOFEN SOLN IT 10000 MCG/20ML	SP	PA				
LIORESAL SOLN IT (<i>baclofen</i>)	SP	PA				
LIORESAL SOLN IT	SP	PA				
<i>metaxalone 800 MG</i>	1					

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>azelastine hcl 0.15 %, 205.5 MCG/SPRAY</i>	1	QL(1 ML daily); RX/OTC	<i>budesonide (nasal)</i>	1	Limit 2 inhalers per month; QL(0.6 ML daily)
<i>azelastine hcl 0.1 %, 137 MCG/SPRAY</i>	1	Limit 1 inhaler per month; QL(1.2 ML daily)	FLONASE ALLERGY REL CHILDRENS SUSP <i>(fluticasone propionate (nasal))</i>	GP	Limit 2 inhalers per month; QL(1.1 ML daily); RX/OTC
<i>olopatadine hcl (nasal)</i>	1		FLONASE ALLERGY RELIEF SUSP <i>(fluticasone propionate (nasal))</i>	GP	Limit 2 inhalers per month; QL(1.1 ML daily); RX/OTC
PATANASE <i>(olopatadine hcl (nasal))</i>	GP		FLONASE SENSIMIST	3	Limit 1 inhaler per month; QL(0.34 ML daily)
Nasal Anticholinergics			FLONASE SENSIMIST CHILDRENS	3	Limit 1 inhaler per month; QL(0.34 ML daily)
<i>ipratropium bromide (nasal)</i>	1		<i>flunisolide (nasal)</i>	1	
Nasal Steroids			<i>fluticasone propionate (nasal) SUSP</i>	1	Limit 2 inhalers per month; QL(1.1 ML daily); RX/OTC
(Budesonide (Nasal)) CVS BUDESONIDE, EQ BUDESONIDE NASAL, GNP BUDESONIDE NASAL SPRAY, RA BUDESONIDE	1	Limit 2 inhalers per month; QL(0.6 ML daily)	<i>mometasone furoate (nasal) SUSP</i>	1	Limit 2 inhalers per month; QL(1.14 GM daily); RX/OTC
(Fluticasone Propionate (Nasal)) ALLERGY RELIEF, ALLERGY SPRAY 24 HOUR, CLARISPRAY, CVS FLUTICASONE PROPIONATE, EQ ALLERGY RELIEF, EQL FLUTICASONE CHILDRENS, FT ALLERGY RELIEF 24 HR, GNP FLUTICASONE PROPIONATE, GOODSENSE 24-HR ALLERGY NASAL, HM ALLERGY RELIEF, KLS ALLER-FLO, QC ALLERGY RELIEF, SM ALLERGY RELIEF SUSP	1	Limit 2 inhalers per month; QL(1.1 ML daily); RX/OTC	NASONEX 24HR SUSP <i>(mometasone furoate (nasal))</i>	GP	Limit 2 inhalers per month; QL(1.14 ML daily); RX/OTC
(Mometasone Furoate (Nasal)) ALLERGY NASAL SPRAY SUSP	1	Limit 2 inhalers per month; QL(1.14 ML daily); RX/OTC	OMNARIS SUSP	3	Limit 1 inhaler per month; QL(0.42 GM daily)
BECONASE AQ	3	Limit 2 inhalers per month; QL(1.67 GM daily)	QNASL	3	Limit 1 inhaler per month; QL(0.29 GM daily)
			QNASL CHILDRENS	3	Limit 1 inhaler per month; QL(0.17 GM daily)
			XHANCE EXHU	3	QL(1.07 ML daily); ST

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OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ZETONNA AERS	3	Limit 1 inhaler per month; QL(0.3 GM daily)	<i>timolol maleate (ophth) SOLN</i>	1	
NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles			TIMOPTIC OCUDOSE SOLN (<i>timolol maleate (ophth)</i>)	GP	
ALS Agents			TIMOPTIC SOLN (<i>timolol maleate (ophth)</i>)	GP	
RILUTEK TABS (<i>riluzole</i>)	GP		Cycloplegic Mydriatics		
<i>riluzole TABS</i>	1		(Homatropine Hbr) HOMATROPAIRE	1	
OPHTHALMIC AGENTS - Drugs to Treat the Eye			(Phenylephrine Hcl (Mydriatic)) ALTAFRIN SOLN	1	
Beta-blockers - Ophthalmic			<i>atropine sulfate (ophthalmic) SOLN</i>	1	
(Timolol Maleate (Ophth)) TIMOLOL MALEATE OCUDOSE SOLN 0.5 %	1		ATROPINE SULFATE SOLN 1 % (<i>atropine sulfate (ophthalmic)</i>)	GP	
<i>betaxolol hcl (ophth) SOLN</i>	1		ATROPINE SULFATE SOLN 1 %	2	
BETIMOL 0.25 %	2		CYCLOGYL (<i>cyclopentolate hcl</i>)	GP	
BETIMOL (<i>timolol</i>)	GP		CYCLOGYL	2	
BETOPTIC-S SUSP	2		CYCLOMYDRIL	3	
<i>brimonidine tartrate-timolol maleate</i>	1		<i>cyclopentolate hcl</i>	1	
<i>carteolol hcl (ophth)</i>	1		ISOPTO ATROPINE SOLN	2	
COMBIGAN (<i>brimonidine tartrate-timolol maleate</i>)	GP		MYDRIACYL SOLN (<i>tropicamide</i>)	GP	
COSOPT (<i>dorzolamide hcl-timolol maleate</i>)	GP		<i>phenylephrine hcl (mydriatic) SOLN</i>	1	
COSOPT PF (<i>dorzolamide hcl-timolol maleate</i>)	GP		PHENYLEPHRINE HCL SOLN (<i>phenylephrine hcl (mydriatic)</i>)	GP	
DORZOLAMIDE HCL-TIMOLOL MAL	3		<i>tropicamide SOLN</i>	1	
<i>dorzolamide hcl-timolol maleate</i>	1		Miotics		
ISTALOL SOLN (<i>timolol maleate (ophth)</i>)	GP		<i>pilocarpine hcl SOLN 1 %, 2 %, 4 %</i>	1	
<i>levobunolol hcl 0.5 %</i>	1		Ophthalmic Adrenergic Agents		
<i>timolol</i>	1		ALPHAGAN P (<i>brimonidine tartrate</i>)	GP	
<i>timolol maleate (ophth) SOLG</i>	1				

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>apraclonidine hcl</i>	1		<i>neomycin-polymyxin-gramicidin</i>	1	
<i>brimonidine tartrate</i>	1		<i>OCUFLOX (ofloxacin (ophth))</i>	GP	
IOPIDINE	3		<i>ofloxacin (ophth)</i>	1	
Ophthalmic Anti-infectives					
(Bacitracin-Polymyxin B (Ophth)) AK-POLY-BAC, POLYCIN	1		<i>polymyxin b-trimethoprim</i>	1	
(Gentamicin Sulfate (Ophth)) GENTAK OINT	1		<i>POLYTRIM (polymyxin b-trimethoprim)</i>	GP	
(Neomycin-Bacitracin Zn-Polymyxin) NEO-POLYCIN	1		<i>POVIDONE-IODINE</i>	3	
AZASITE	3	Limit 5mls per month; QL(0.17 ML daily)	<i>sulfacetamide sodium (ophth) OINT</i>	1	
<i>bacitracin (ophthalmic)</i>	1		<i>sulfacetamide sodium (ophth) SOLN</i>	1	
<i>bacitracin-polymyxin b (ophth)</i>	1		<i>tobramycin (ophth) SOLN</i>	1	
BESIVANCE	3		<i>TOBREX OINT</i>	2	
BETADINE OPHTHALMIC PREP	3		<i>trifluridine</i>	1	
CILOXAN OINT	2		<i>ZIRGAN GEL</i>	3	
CILOXAN SOLN (<i>ciprofloxacin hcl (ophth)</i>)	GP		<i>ZYMAXID (gatifloxacin (ophth))</i>	GP	
<i>ciprofloxacin hcl (ophth) SOLN</i>	1		Ophthalmic Immunomodulators		
ERYTHROMYCIN	2		<i>cyclosporine (ophth) EMUL</i>	1	QL(2.14 EA daily)
<i>erythromycin (ophth)</i>	1		Ophthalmic Local Anesthetics		
<i>gatifloxacin (ophth)</i>	1		<i>(Tetracaine Hcl (Ophth)) ALTACAINE</i>	1	
<i>gentamicin sulfate (ophth) SOLN</i>	1		<i>AKTEN</i>	3	
KLARITY-A	3	Limit 5mls per month; QL(0.17 ML daily)	<i>ALCAINE (proparacaine hcl)</i>	GP	
<i>levofloxacin (ophth)</i>	1		<i>proparacaine hcl</i>	1	
<i>moxifloxacin hcl (ophth) SOLN OP</i>	1		<i>tetracaine hcl (ophth)</i>	1	
NATACYN	2		Ophthalmic Steroids		
<i>neomycin-bacitracin zn-polymyxin</i>	1		<i>(Bacitracin-Poly-Neomycin-HC) NEO-POLYCIN HC</i>	1	QL(4 GM per fill retail)
			<i>ALREX SUSP (loteprednol etabonate)</i>	GP	
			<i>bacitracin-poly-neomycin-hc</i>	1	QL(4 GM per fill retail)

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>dexamethasone sodium phosphate (ophth)</i>	1		TOBRADEX OINT	3	
<i>difluprednate</i>	1		TOBRADEX SUSP <i>(tobramycin-dexamethasone)</i>	GP	QL(5 ML per fill retail)
DUREZOL <i>(difluprednate)</i>	GP		<i>tobramycin-dexamethasone SUSP</i>	1	QL(5 ML per fill retail)
FLAREX	2		ZYLET	3	Limit 5mls per fill; QL(5 ML per fill retail)
<i>fluorometholone (ophth) SUSP</i>	1		Ophthalmic Surgical Aids		
FML FORTE SUSP	2		GELFILM	3	
FML LIQUIFILM SUSP <i>(fluorometholone (ophth))</i>	GP		Ophthalmics - Misc.		
LOTEMAX GEL <i>(loteprednol etabonate)</i>	GP		(Olopatadine Hcl) CVS OLOPATADINE HCL, EQ OLOPATADINE HCL, EYE ALLERGY ITCH RELIEF, FT EYE ALLERGY ITCH RELIEF, GNP OLOPATADINE HCL, HM EYE ALLERGY ITCH RELIEF, QC OLOPATADINE HCL, RETAINE ALLERGY, SM OLOPATADINE HCL 0.2 %	1	QL(0.09 ML daily); RX/OTC
LOTEMAX OINT	3		(Olopatadine Hcl) CVS OLOPATADINE HCL, EQ OLOPATADINE HCL, EYE ALLERGY ITCH/REDNESS REL, FT EYE ALLERGY ITCH & REDNESS, GNP OLOPATADINE HCL, HM EYE ALLERGY ITCH/RED RELIEF 0.1 %	1	Limit 10mls per month; QL(0.34 ML daily); RX/OTC
LOTEMAX SUSP <i>(loteprednol etabonate)</i>	GP		ACULAR (<i>ketorolac tromethamine (ophth)</i>)	GP	
<i>loteprednol etabonate GEL</i>	1		ACULAR LS (<i>ketorolac tromethamine (ophth)</i>)	GP	
<i>loteprednol etabonate SUSP</i>	1		ACUVAIL	3	
MAXIDEX SUSP OP	2		ALOCRIL	3	
MAXITROL OINT <i>(neomycin-polymyxin-dexameth)</i>	GP		ALOMIDE	2	
MAXITROL SUSP <i>(neomycin-polymyxin-dexameth)</i>	GP		<i>azelastine hcl (ophth)</i>	1	
<i>neomycin-polymyxin-dexameth OINT</i>	1				
<i>neomycin-polymyxin-dexameth SUSP</i>	1				
<i>neomycin-polymyxin-hc (ophth)</i>	1				
PRED MILD	2				
<i>prednisolone acetate (ophth)</i>	1				
PREDNISOLONE SODIUM PHOSPHATE	2				
<i>sulfacetamide sod-prednisolone SOLN</i>	1				
TOBRADEX ST SUSP	3				

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
AZOPT (<i>brinzolamide</i>)	GP	Limit 10mls per month; QL(0.4 ML daily)	Prostaglandins - Ophthalmic		
<i>bepotastine besilate</i>	1	Limit 10mls per month; QL(0.34 ML daily); ST	<i>bimatoprost SOLN</i>	1	Limit 2.5mls per month; QL(0.09 ML daily)
BEPREVE (<i>bepotastine besilate</i>)	GP	Limit 10mls per month; QL(0.34 ML daily); ST	<i>latanoprost SOLN</i>	1	
<i>brinzolamide</i>	1	Limit 10mls per month; QL(0.4 ML daily)	LATANOPROST SOLN	3	
<i>bromfenac sodium (ophth)</i>	1		LUMIGAN SOLN 0.01 %	2	
BROMSITE (<i>bromfenac sodium (ophth)</i>)	GP		<i>tafluprost</i>	1	
<i>cromolyn sodium (ophth)</i>	1		TRAVATAN Z SOLN (<i>travoprost</i>)	GP	Limit 2.5mls per month; QL(0.09 ML daily)
CYSTADROPS	SP	QL(0.34 ML daily)	<i>travoprost SOLN</i>	1	Limit 2.5mls per month; QL(0.09 ML daily)
CYSTARAN	SP		XALATAN SOLN (<i>latanoprost</i>)	GP	
<i>diclofenac sodium (ophth)</i>	1		ZIOPTAN (<i>tafluprost</i>)	GP	
<i>dorzolamide hcl</i>	1	Limit 10mls per month; QL(0.34 ML daily)	OTIC AGENTS - Drugs to Treat the Ear		
DORZOLAMIDE HCL	2	Limit 10mls per month; QL(0.34 ML daily)	Otic Agents - Miscellaneous		
<i>epinastine hcl (ophth)</i>	1		<i>acetic acid (otic)</i>	1	
<i>flurbiprofen sodium</i>	1		Otic Anti-infectives		
ILEVRO	3		CETRAXAL (<i>ciprofloxacin hcl (otic)</i>)	GP	
<i>ketorolac tromethamine (ophth)</i>	1		<i>ciprofloxacin hcl (otic)</i>	1	
LASTACAFT	3	ST	<i>ofloxacin (otic)</i>	1	
NEVANAC	3		Otic Combinations		
<i>olopatadine hcl 0.2 %</i>	1	QL(0.09 ML daily); RX/OTC	(Pramoxine-HC-Chloroxylenol) CORTIC-ND	1	
<i>olopatadine hcl 0.1 %</i>	1	Limit 10mls per month; QL(0.34 ML daily); RX/OTC	CIPRO HC	3	
PAREMYD	3		CIPRODEX (<i>ciprofloxacin-dexamethasone</i>)	GP	
PATADAY 0.2 % (<i>olopatadine hcl</i>)	GP	QL(0.09 ML daily); RX/OTC	<i>ciprofloxacin-dexamethasone</i>	1	
PROLENSA (<i>bromfenac sodium (ophth)</i>)	GP				

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>ciprofloxacin-fluocinolone acetonide</i>	1	Limit 1 bottle per month; QL(0.5 EA daily)	FLEBOGAMMA DIF SOLN 0.5 GM/10ML, 5 GM/50ML, 10 GM/200ML, 20 GM/200ML	SP	PA
CORTISPORIN-TC	3		GAMASTAN	SP	PA
<i>neomycin-polymyxin-hc (otic) SOLN</i>	1		GAMMAGARD 1 GM/10ML, 2.5 GM/25ML	SP	PA
<i>neomycin-polymyxin-hc (otic) SUSP</i>	1		GAMMAKED 1 GM/10ML	SP	PA
OTOVEL (<i>ciprofloxacin-fluocinolone acetonide</i>)	GP	Limit 1 bottle per month; QL(0.5 EA daily)	GAMMAPLEX SOLN 5 GM/50ML, 10 GM/200ML, 20 GM/200ML	SP	PA
PRAMOTIC	3		GAMUNEX-C 1 GM/10ML, 2.5 GM/25ML, 40 GM/400ML	SP	PA
Otic Steroids			HIZENTRA SOLN 1 GM/5ML, 10 GM/50ML	SP	PA
(Fluocinolone Acetonide (Otic)) FLAC	1		HIZENTRA SOSY 10 GM/50ML	SP	PA
DERMOTIC (<i>fluocinolone acetonide (otic)</i>)	GP		OCTAGAM SOLN 1 GM/20ML, 2 GM/20ML, 5 GM/50ML, 10 GM/200ML, 20 GM/200ML	SP	PA
<i>fluocinolone acetonide (otic)</i>	1		PRIVIGEN SOLN 5 GM/50ML, 20 GM/200ML	SP	PA
<i>hydrocortisone w/acetic acid</i>	1	QL(10 ML per fill retail; 30 per fill mail)	VARIZIG SOLN	PV	PV
OXYTOCICS - Drugs to Prevent/Control Uterine Bleeding					
Oxytocics			Passive Immunizing Agents - Combinations		
(Methylergonovine Maleate) METHERGINE TABS	1		HYQVIA	SP	PA
<i>methylergonovine maleate TABS</i>	1		PENICILLINS - Drugs to Treat Bacterial Infections		
PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System					
Immune Serums			Aminopenicillins		
BIVIGAM SOLN 5 GM/50ML	SP	PA	<i>amoxicillin CAPS</i>	1	
CUVITRU SOLN 1 GM/5ML, 10 GM/50ML	SP	PA	<i>amoxicillin CHEW 125 MG, 250 MG</i>	1	
			<i>amoxicillin SUSR</i>	1	
			AMOXICILLIN SUSR (<i>amoxicillin</i>)	GP	
			<i>amoxicillin TABS</i>	1	
			<i>ampicillin sodium IJ 1 GM, 125 MG</i>	SP	PA
			<i>ampicillin sodium IV 10 GM</i>	1	
			<i>ampicillin CAPS 500 MG</i>	1	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Natural Penicillins					
(Penicillin G Potassium) PFIZERPEN 5000000 UNIT, 20000000 UNIT	SP	PA	<i>piperacillin sodium-tazobactam sodium 2 GM-0.25 GM, 3 GM-0.375 GM, 4 GM-0.5 GM</i>	SP	PA
BICILLIN L-A SUSY	SP	PA	UNASYN IJ 2 GM-1 GM (<i>ampicillin & sulbactam sodium</i>)	SP	PA
PENICILLIN G POT IN DEXTROSE	SP	PA	ZOSYN	SP	PA
<i>penicillin g potassium 5000000 UNIT, 20000000 UNIT</i>	SP	PA	Penicillinase-Resistant Penicillins		
PENICILLIN G PROCAINE	SP	PA	<i>dicloxacillin sodium</i>	1	
<i>penicillin g sodium</i>	SP	PA	<i>nafcillin sodium IV 2 GM, 10 GM</i>	SP	PA
<i>penicillin v potassium SOLR</i>	1		NAFCILLIN SODIUM IN DEXTROSE 1 GM/50ML	SP	PA
<i>penicillin v potassium TABS</i>	1		<i>oxacillin sodium IV 10 GM</i>	SP	PA
Penicillin Combinations					
<i>amoxicillin & pot clavulanate CHEW</i>	1		OXACILLIN SODIUM IN DEXTROSE	SP	PA
<i>amoxicillin & pot clavulanate SUSR</i>	1		PROGESTINS - Hormone Replacement/Modifying Drugs		
<i>amoxicillin & pot clavulanate TABS</i>	1		Progestins		
<i>amoxicillin & pot clavulanate TB12</i>	1		(Norethindrone Acetate) GALLIFREY TABS	1	
<i>ampicillin & sulbactam sodium IV 1 GM-0.5 GM, 10 GM-5 GM</i>	SP	PA	AYGESTIN TABS (<i>norethindrone acetate</i>)	GP	
AUGMENTIN ES-600 SUSR (<i>amoxicillin & pot clavulanate</i>)	GP		<i>hydroxyprogesterone caproate OIL</i>	SP	PA
AUGMENTIN SUSR 31.25 MG/5ML-125 MG/5ML	2		MAKENA OIL (<i>hydroxyprogesterone caproate</i>)	SP	PA
AUGMENTIN TABS 125 MG-500 MG (<i>amoxicillin & pot clavulanate</i>)	GP		MAKENA SOAJ	SP	PA
BICILLIN C-R	SP	PA	<i>medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG</i>	1	
BICILLIN C-R 900/300	SP	PA	<i>megestrol acetate (appetite)</i>	1	
			<i>norethindrone acetate TABS</i>	1	
			<i>progesterone CAPS</i>	1	QL(2 EA daily)
			<i>progesterone OIL</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PROMETRIUM CAPS <i>(progesterone)</i>	GP	QL(2 EA daily)	<i>memantine hcl CP24</i>	1	PA
PROVERA 5 MG, 10 MG <i>(medroxyprogesterone acetate)</i>	GP		<i>memantine hcl SOLN 2 MG/ML</i>	1	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions			<i>memantine hcl TABS</i>	1	
Agents for Chemical Dependency			NAMENDA TITRATION PAK TABS (<i>memantine hcl</i>)	GP	
<i>acamprosate calcium</i>	1		NAMENDA XR CP24 (<i>memantine hcl</i>)	GP	PA
<i>disulfiram</i>	1		NAMENDA TABS (<i>memantine hcl</i>)	GP	
<i>lofexidine hcl</i>	1	PA required for more than 30 day supply per year; QL(224 EA per 14 day(s) retail)	RAZADYNE ER CP24 (<i>galantamine hydrobromide</i>)	GP	QL(1 EA daily)
LUCEMYRA (<i>lofexidine hcl</i>)	GP	PA required for more than 30 day supply per year; QL(224 EA per 14 day(s) retail)	<i>rivastigmine</i>	1	
Anti-Cataplectic Agents			<i>rivastigmine tartrate CAPS</i>	1	
SODIUM OXYBATE SOLN	SP	PA	Combination Psychotherapeutics		
XYREM SOLN	SP	PA	<i>chlordiazepoxide-amitriptyline</i>	1	
Antidementia Agents			<i>olanzapine-fluoxetine hcl</i>	1	
ARICEPT TABS (<i>donepezil hydrochloride</i>)	GP	QL(1 EA daily)	<i>perphenazine-amitriptyline</i>	1	
<i>donepezil hydrochloride TABS</i>	1	QL(1 EA daily)	SYMBYAX 25 MG-3 MG, 25 MG-6 MG (<i>olanzapine-fluoxetine hcl</i>)	GP	
<i>donepezil hydrochloride TBDP</i>	1	QL(1 EA daily)	Fibromyalgia Agents		
EXELON (<i>rivastigmine</i>)	GP		SAVELLA TITRATION PACK MISC	3	QL(2 EA daily); PA
<i>galantamine hydrobromide CP24</i>	1	QL(1 EA daily)	SAVELLA TABS	3	QL(2 EA daily); PA
<i>galantamine hydrobromide SOLN</i>	1		Movement Disorder Drug Therapy		
<i>galantamine hydrobromide TABS</i>	1		AUSTEDO XR PATIENT TITRATION TEPK	3	PA
			AUSTEDO XR TB24	3	PA
			AUSTEDO TABS	3	PA
			INGREZZA CAPS	3	PA
			INGREZZA CPPK	3	PA
			INGREZZA CPSP	3	PA
			<i>tetrabenazine</i>	SP	

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits		
XENAZINE <i>(tetrabenazine)</i>	SP		TECFIDERA CDPK <i>(dimethyl fumarate)</i>	GP			
Multiple Sclerosis Agents							
(Glatiramer Acetate) GLATOPA SOSY	SP		TECFIDERA CPDR <i>(dimethyl fumarate)</i>	GP			
AMPYRA <i>(dalfampridine)</i>	GP	PA	<i>teriflunomide</i>	1			
AUBAGIO <i>(teriflunomide)</i>	GP		TYSABRI	SP	SP; PA		
AVONEX PEN AJKT	SP	PA	Premenstrual Dysphoric Disorder (PMDD) Agents				
AVONEX PREFILLED PSKT	SP	PA	<i>fluoxetine hcl (pmdd)</i> TABS	1			
BETASERON KIT	SP	PA	Pseudobulbar Affect (PBA) Agents				
<i>dalfampridine</i>	1	PA	NUEDEXTA	3	PA		
<i>dimethyl fumarate CDPK</i>	1		Psychotherapeutic and Neurological Agents - Misc.				
<i>dimethyl fumarate CPDR</i>	1		<i>ergoloid mesylates TABS</i>	1			
<i>fingolimod hcl</i>	1	QL(1 EA daily)	<i>pimozide</i>	1			
<i>glatiramer acetate SOSY</i>	SP		Smoking Deterrents				
MAVENCLAD (10 TABS)	SP	SP; PA	(Nicotine Polacrilex) CVS NICOTINE, CVS NICOTINE POLACRILEX, EQ NICOTINE, EQ NICOTINE POLACRILEX, EQL NICOTINE POLACRILEX, FT NICOTINE, FT NICOTINE MINI, GNP NICOTINE MINI, GNP NICOTINE POLACRILEX, GOODSENSE NICOTINE, HM NICOTINE POLACRILEX, KLS QUIT2, KLS QUIT4, NICOTINE MINI, NICOTINE POLACRILEX MINI, PX STOP SMOKING AID, RA MINI NICOTINE, RA NICOTINE POLACRILEX, SM NICOTINE POLACRILEX LOZG 4 MG	PV	PV		
MAVENCLAD (4 TABS)	SP	SP; PA					
MAVENCLAD (5 TABS)	SP	SP; PA					
MAVENCLAD (6 TABS)	SP	SP; PA					
MAVENCLAD (7 TABS)	SP	SP; PA					
MAVENCLAD (8 TABS)	SP	SP; PA					
MAVENCLAD (9 TABS)	SP	SP; PA					
MAYZENT STARTER PACK TBPK 0.25 MG	3	QL(12 EA per 5 day(s) retail); PA					
PLEGRIDY STARTER PACK SOAJ	SP	PA					
PLEGRIDY STARTER PACK SOSY SC	SP	PA					
PLEGRIDY SOAJ	SP	PA					
PLEGRIDY SOSY IM	SP	PA					
REBIF REBIDOSE TITRATION PACK SOAJ	SP	PA					
REBIF REBIDOSE SOAJ	SP	PA					
REBIF TITRATION PACK SOSY	SP	PA					
REBIF SOSY	SP	PA					

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
(Nicotine Polacrilex) CVS NICOTINE, CVS NICOTINE POLACRILEX, EQ NICOTINE, EQ NICOTINE POLACRILEX, EQL NICOTINE POLACRILEX, FT NICOTINE, FT NICOTINE MINI, GNP NICOTINE MINI, GNP NICOTINE POLACRILEX, GOODSENSE NICOTINE, HM NICOTINE POLACRILEX, KLS QUIT2, KLS QUIT4, NICOTINE MINI, NICOTINE POLACRILEX MINI, PX STOP SMOKING AID, RA MINI NICOTINE, RA NICOTINE POLACRILEX, SM NICOTINE POLACRILEX LOZG	PV	PV	(Nicotine Polacrilex) CVS NICOTINE, CVS NICOTINE POLACRILEX, EQ NICOTINE, EQ NICOTINE POLACRILEX, FT NICOTINE, GNP NICOTINE, GNP NICOTINE POLACRILEX, GOODSENSE NICOTINE, KLS QUIT2, KLS QUIT4, PX STOP SMOKING AID, RA NICOTINE, RA NICOTINE GUM, SM NICOTINE, SM NICOTINE POLACRILEX, THRIVE GUM 2 MG	PV	PV
(Nicotine Polacrilex) CVS NICOTINE, CVS NICOTINE POLACRILEX, EQ NICOTINE, EQ NICOTINE POLACRILEX, EQL NICOTINE POLACRILEX, FT NICOTINE, FT NICOTINE MINI, GNP NICOTINE MINI, GNP NICOTINE POLACRILEX, GOODSENSE NICOTINE, HM NICOTINE POLACRILEX, KLS QUIT2, KLS QUIT4, NICOTINE MINI, NICOTINE POLACRILEX MINI, PX STOP SMOKING AID, RA MINI NICOTINE, RA NICOTINE POLACRILEX, SM NICOTINE POLACRILEX LOZG 2 MG	PV	PV	(Nicotine Polacrilex) CVS NICOTINE, CVS NICOTINE POLACRILEX, EQ NICOTINE, EQ NICOTINE POLACRILEX, FT NICOTINE, GNP NICOTINE, GNP NICOTINE POLACRILEX, GOODSENSE NICOTINE, KLS QUIT2, KLS QUIT4, PX STOP SMOKING AID, RA NICOTINE, RA NICOTINE GUM, SM NICOTINE, SM NICOTINE POLACRILEX, THRIVE GUM	PV	PV
			(Nicotine Polacrilex) CVS NICOTINE, CVS NICOTINE POLACRILEX, EQ NICOTINE, EQ NICOTINE POLACRILEX, FT NICOTINE, GNP NICOTINE, GNP NICOTINE POLACRILEX, GOODSENSE NICOTINE, KLS QUIT2, KLS QUIT4, PX STOP SMOKING AID, RA NICOTINE, RA NICOTINE GUM, SM NICOTINE, SM NICOTINE POLACRILEX, THRIVE GUM 4 MG	PV	PV

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
(Nicotine) CVS NICOTINE, EQ NICOTINE, EQ NICOTINE STEP 3, FT NICOTINE, GNP NICOTINE, HABITROL, HM NICOTINE, NICOTINE STEP 1, NICOTINE STEP 2, NICOTINE STEP 3, QC NICOTINE TRANSDERMAL SYSTEM, RA NICOTINE, SM NICOTINE PT24 TD 7 MG/24HR	PV	PV	(Nicotine) CVS NICOTINE, EQ NICOTINE, EQ NICOTINE STEP 3, FT NICOTINE, GNP NICOTINE, HABITROL, HM NICOTINE, NICOTINE STEP 1, NICOTINE STEP 2, NICOTINE STEP 3, QC NICOTINE TRANSDERMAL SYSTEM, RA NICOTINE, SM NICOTINE PT24 TD 7 MG/24HR, 21 MG/24HR	PV	PV
(Nicotine) CVS NICOTINE, EQ NICOTINE, EQ NICOTINE STEP 3, FT NICOTINE, GNP NICOTINE, HABITROL, HM NICOTINE, NICOTINE STEP 1, NICOTINE STEP 2, NICOTINE STEP 3, QC NICOTINE TRANSDERMAL SYSTEM, RA NICOTINE, SM NICOTINE PT24 TD 14 MG/24HR	PV	PV	(Nicotine) CVS NICOTINE, EQ NICOTINE, EQ NICOTINE STEP 3, FT NICOTINE, GNP NICOTINE, HABITROL, HM NICOTINE, NICOTINE STEP 1, NICOTINE STEP 2, NICOTINE STEP 3, QC NICOTINE TRANSDERMAL SYSTEM, RA NICOTINE, SM NICOTINE PT24 TD 21 MG/24HR	PV	PV
(Nicotine) CVS NICOTINE, EQ NICOTINE, EQ NICOTINE STEP 3, FT NICOTINE, GNP NICOTINE, HABITROL, HM NICOTINE, NICOTINE STEP 1, NICOTINE STEP 2, NICOTINE STEP 3, QC NICOTINE TRANSDERMAL SYSTEM, RA NICOTINE, SM NICOTINE PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR	PV	PV	(Nicotine) CVS NICOTINE, EQ NICOTINE, EQ NICOTINE STEP 3, FT NICOTINE, GNP NICOTINE, HABITROL, HM NICOTINE, NICOTINE STEP 1, NICOTINE STEP 2, NICOTINE STEP 3, QC NICOTINE TRANSDERMAL SYSTEM, RA NICOTINE, SM NICOTINE PT24 TD 14 MG/24HR, 21 MG/24HR	PV	PV
			APO-VARENICLINE TABS	PV	QL(2 EA daily); PV
			<i>bupropion hcl (smoking deterrent)</i>	PV	PV
			CHANTIX STARTING MONTH PAK TBPK (<i>varenicline tartrate</i>)	GP	PV

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
NICODERM CQ PT24 TD <i>(nicotine)</i>	GP	PV	KALYDECO PACK 13.4 MG, 25 MG, 50 MG, 75 MG	SP	PA
NICORETTE MINI LOZG <i>(nicotine polacrilex)</i>	GP	PV	KALYDECO TABS	SP	PA
NICORETTE STARTER KIT GUM <i>(nicotine polacrilex)</i>	GP	PV	ORKAMBI PACK	SP	PA
NICORETTE GUM <i>(nicotine polacrilex)</i>	GP	PV	ORKAMBI TABS	SP	PA
NICORETTE LOZG <i>(nicotine polacrilex)</i>	GP	PV	PULMOZYME	2	Limited to 75mls per month; QL(2.5 ML daily); PA
<i>nicotine polacrilex GUM</i>	PV	PV	SYMDEKO	SP	PA
<i>nicotine polacrilex LOZG</i>	PV	PV	TRIKAFTA TBPK 50 MG-25 MG	SP	PA
NICOTINE KIT	PV	PV	TRIKAFTA TBPK 100 MG-50 MG	SP	QL(3 EA daily); PA
<i>nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR</i>	PV	PV	TRIKAFTA THPK	SP	PA
NICOTROL NS SOLN	PV	PV	Pulmonary Fibrosis Agents		
NICOTROL INHA	PV	PV	ESBRIET CAPS <i>(pirfenidone)</i>	SP	PA
<i>varenicline tartrate TABS</i>	PV	QL(2 EA daily); PV	ESBRIET TABS <i>(pirfenidone)</i>	SP	PA
<i>varenicline tartrate TBPK</i>	PV	PV	OFEV	SP	PA
Transthyretin Amyloidosis Agents			<i>pirfenidone CAPS</i>	SP	PA
TEGSEDI	SP	PA	<i>pirfenidone TABS</i>	SP	PA
Vasomotor Symptom Agents			SULFONAMIDES - Drugs to Treat Bacterial Infections		
<i>paroxetine mesylate (vasomotor)</i>	1		Sulfonamides		
RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions			<i>sulfadiazine TABS</i>	1	
Alpha-Proteinase Inhibitor (Human)			TETRACYCLINES - Drugs to Treat Bacterial Infections		
ARALAST NP SOLR 1000 MG	SP	PA	Glycylcyclines		
GLASSIA SOLN	SP	PA	<i>tigecycline</i>	SP	PA
PROLASTIN-C SOLN	SP	PA	TIGECYCLINE	SP	PA
PROLASTIN-C SOLR	SP	PA	TYGACIL (<i>tigecycline</i>)	SP	PA
ZEMAIRA SOLR 1000 MG	SP	PA	Tetracyclines		
Cystic Fibrosis Agents			(Doxycycline (Monohydrate)) AVIDOXY TABS 100 MG	1	

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
(Doxycycline (Monohydrate)) MONDOXYNE NL CAPS 100 MG	1		<i>propylthiouracil</i>	1	
(Doxycycline Hyclate) LYMEPAK, TARGADOX TABS 100 MG	1		Thyroid Hormones		
(Minocycline Hcl) COREMINO TB24 45 MG, 90 MG, 135 MG	1	ST	(Levothyroxine Sodium) EUTHYROX, LEVO-T, LEVOXYL, UNITHROID TABS	1	
<i>demeclacycline hcl TABS</i>	1		(Levothyroxine Sodium) EUTHYROX, LEVO-T, LEVOXYL, UNITHROID TABS 25 MCG, 50 MCG, 75 MCG, 88 MCG, 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG	1	
<i>doxycycline (monohydrate) CAPS</i>	1		ADTHYZA TABS	2	
<i>doxycycline (monohydrate) SUSR</i>	1		ARMOUR THYROID TABS	2	
<i>doxycycline (monohydrate) TABS 75 MG, 150 MG</i>	1	ST	CYTOMEL TABS (<i>liothyronine sodium</i>)	3	
<i>doxycycline (monohydrate) TABS 50 MG, 100 MG</i>	1		<i>levothyroxine sodium</i> CAPS 13 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG, 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG	1	
<i>doxycycline hyclate CAPS</i>	1		<i>levothyroxine sodium</i> TABS	1	
<i>doxycycline hyclate TABS 20 MG, 100 MG</i>	1		<i>liothyronine sodium</i> TABS	1	
<i>doxycycline hyclate TBEC 75 MG, 100 MG, 150 MG</i>	1	ST	NIVA THYROID TABS	2	
<i>minocycline hcl CAPS</i>	1		NP THYROID TABS	2	
<i>minocycline hcl TABS</i>	1		SYNTHROID TABS (<i>levothyroxine sodium</i>)	3	
<i>minocycline hcl TB24</i>	1	ST	THYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	2	
SOLODYN TB24 55 MG, 65 MG, 80 MG, 105 MG, 115 MG (<i>minocycline hcl</i>)	GP	ST	TIROSINT CAPS	3	
VIBRAMYCIN CAPS (<i>doxycycline hyclate</i>)	GP		TIROSINT CAPS (<i>levothyroxine sodium</i>)	3	
VIBRAMYCIN SUSR (<i>doxycycline (monohydrate)</i>)	GP				
THYROID AGENTS - Drugs to Regulate Thyroid Hormones					
Antithyroid Agents					
<i>methimazole TABS</i>	1				

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TIROSINT-SOL SOLN PO 13 MCG/ML, 25 MCG/ML, 37.5 MCG/ML, 44 MCG/ML, 50 MCG/ML, 62.5 MCG/ML, 75 MCG/ML, 88 MCG/ML, 100 MCG/ML, 112 MCG/ML, 125 MCG/ML, 137 MCG/ML, 150 MCG/ML, 200 MCG/ML	3		Antispasmodics		
TOXOIDS					
Toxoid Combinations			(Hyoscyamine Sulfate) NULEV TBDP 0.125 MG	1	
ADACEL SUSP	PV	QL(0.5 ML daily); PV	(Hyoscyamine Sulfate) OSCIMIN SUBL 0.125 MG	1	
BOOSTRIX SUSP	PV	QL(0.5 ML daily); PV	(Hyoscyamine Sulfate) OSCIMIN TABS 0.125 MG	1	
BOOSTRIX SUSY	PV	QL(0.5 ML daily); PV	ANASPAZ TBDP <i>(hyoscyamine sulfate)</i>	GP	
DAPTACEL	PV	QL(0.5 ML daily); PV	<i>atropine sulfate SOLN IJ 0.4 MG/ML, 1 MG/ML</i>	SP	
DIPHTHERIA-TETANUS TOXOIDS DT SUSP	PV	PV	BELLADONNA ALKALOIDS-OPIUM	3	
INFANRIX	PV	QL(0.5 ML daily); PV	<i>chlordiazepoxide hcl- clidinium bromide</i>	1	
KINRIX SUSY	PV	QL(0.5 ML daily); PV	CUVPOSA SOLN PO <i>(glycopyrrolate)</i>	GP	
PEDIARIX SUSY	PV	QL(0.5 ML daily); PV	<i>dicyclomine hcl CAPS</i>	1	
PENTACEL	PV	QL(0.5 EA daily); PV	<i>dicyclomine hcl SOLN PO</i>	1	
QUADRACEL SUSP	PV	QL(0.5 ML daily); PV	<i>dicyclomine hcl TABS</i>	1	
QUADRACEL SUSY	PV	QL(0.5 ML daily); PV	GLYCATE TABS	3	
TDVAX SUSP	PV	QL(0.5 ML daily); PV	<i>glycopyrrolate SOLN PO 1 MG/5ML</i>	1	
TENIVAC INJ	PV	QL(0.5 ML daily); PV	<i>glycopyrrolate TABS 1 MG, 2 MG</i>	1	
TETANUS-DIPHTHERIA TOXOIDS TD SUSP	PV	QL(0.5 ML daily); PV	GLYCOPYRROLATE TABS	3	
VAXELIS SUSP	PV	QL(0.5 ML daily); PV	<i>hyoscyamine sulfate SUBL 0.125 MG</i>	1	
VAXELIS SUSY	PV	QL(0.5 ML daily); PV	<i>hyoscyamine sulfate TABS 0.125 MG</i>	1	
ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions			<i>hyoscyamine sulfate TB12 0.375 MG</i>	1	
			<i>hyoscyamine sulfate TBDP 0.125 MG</i>	1	
			LEVBID TB12 <i>(hyoscyamine sulfate)</i>	GP	
			LEVSIN/SL SUBL <i>(hyoscyamine sulfate)</i>	GP	
			LEVSIN TABS <i>(hyoscyamine sulfate)</i>	GP	

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
LIBRAX <i>(chlordiazepoxide hcl-clidinium bromide)</i>	GP		(Famotidine) ACID CONTROL MAXIMUM STRENGTH, ACID CONTROLLER MAX ST, ACID REDUCER MAXIMUM STRENGTH, CVS ACID CONTROLLER MAX ST, EQ FAMOTIDINE MAX ST, EQL HEARTBURN PREVENTION, FAMOTIDINE MAXIMUM STRENGTH, FT ACID REDUCER MAX STRENGTH, GNP ACID REDUCER MAX ST, HEARTBURN RELIEF MAX ST, KLS ACID CONTROLLER MAX ST, MM ACID-PEP MAXIMUM STRENGTH, PX ACID REDUCER MAX ST, QC ACID CONTROLLER MAX ST, QC FAMOTIDINE ACID REDUCER, RA ACID REDUCER MAX ST, SB ACID CONTROLLER MAX ST, SM ACID REDUCER MAX ST, ZANTAC 360 MAX ST TABS 20 MG	1	RX/OTC
<i>methscopolamine bromide</i>	1				
ROBINUL-FORTE TABS <i>(glycopyrrolate)</i>	GP				
ROBINUL TABS <i>(glycopyrrolate)</i>	GP				
H-2 Antagonists					
(Cimetidine) CIMETIDINE 200, CIMETIDINE ACID REDUCER, CVS HEARTBURN RELIEF, EQ ACID REDUCER, EQ CIMETIDINE, PX ACID REDUCER, SB CIMETIDINE, SM ACID REDUCER TABS 200 MG	1	RX/OTC	<i>cimetidine hcl PO 300 MG/5ML</i>	1	
			<i>cimetidine TABS</i>	1	RX/OTC
			<i>famotidine TABS 40 MG</i>	1	QL(2 EA daily)
			<i>famotidine TABS 20 MG</i>	1	RX/OTC
			<i>nizatidine CAPS</i>	1	
			PEPCID AC MAXIMUM STRENGTH TABS <i>(famotidine)</i>	GP	RX/OTC
			PEPCID TABS 40 MG <i>(famotidine)</i>	GP	QL(2 EA daily)
			PEPCID TABS 20 MG <i>(famotidine)</i>	GP	RX/OTC
			TAGAMET HB 200 TABS <i>(cimetidine)</i>	GP	RX/OTC

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TAGAMET HB TABS <i>(cimetidine)</i>	GP	RX/OTC	(Lansoprazole) CVS LANSOPRAZOLE, GOODSENSE LANSOPRAZOLE TBDD 15 MG	1	QL(1 EA daily); AL(Up to 12 yrs old); RX/OTC
Misc. Anti-Ulcer			(Omeprazole Magnesium) ACID REDUCER, CVS OMEPRAZOLE MAGNESIUM, EQ OMEPRAZOLE MAGNESIUM, GNP OMEPRAZOLE, KP OMEPRAZOLE MAGNESIUM, QC OMEPRAZOLE MAGNESIUM CPDR	1	
CARAFATE SUSP <i>(sucralfate)</i>	GP		(Omeprazole Magnesium) ACID REDUCER, CVS OMEPRAZOLE MAGNESIUM, EQ OMEPRAZOLE MAGNESIUM, GNP OMEPRAZOLE, KP OMEPRAZOLE MAGNESIUM, QC OMEPRAZOLE MAGNESIUM CPDR	1	
CARAFATE TABS <i>(sucralfate)</i>	GP		(Omeprazole Magnesium) ACID REDUCER, CVS OMEPRAZOLE MAGNESIUM, EQ OMEPRAZOLE MAGNESIUM, GNP OMEPRAZOLE, KP OMEPRAZOLE MAGNESIUM, QC OMEPRAZOLE MAGNESIUM CPDR	1	
<i>sucralfate SUSP</i>	1		(Omeprazole Magnesium) ACID REDUCER, CVS OMEPRAZOLE MAGNESIUM, EQ OMEPRAZOLE MAGNESIUM, GNP OMEPRAZOLE, KP OMEPRAZOLE MAGNESIUM, QC OMEPRAZOLE MAGNESIUM CPDR	1	
<i>sucralfate TABS</i>	1		(Omeprazole Magnesium) ACID REDUCER, CVS OMEPRAZOLE MAGNESIUM, EQ OMEPRAZOLE MAGNESIUM, GNP OMEPRAZOLE, KP OMEPRAZOLE MAGNESIUM, QC OMEPRAZOLE MAGNESIUM CPDR	1	
Proton Pump Inhibitors			(Omeprazole Magnesium) ACID REDUCER, CVS OMEPRAZOLE MAGNESIUM, EQ OMEPRAZOLE MAGNESIUM, GNP OMEPRAZOLE, KP OMEPRAZOLE MAGNESIUM, QC OMEPRAZOLE MAGNESIUM CPDR	1	
(Esomeprazole Magnesium) CVS ESOMEPRAZOLE MAGNESIUM, EQ ESOMEPRAZOLE MAGNESIUM, FT ACID REDUCER, GNP ESOMEPRAZOLE MAGNESIUM, GOODSENSE ESOMEPRAZOLE, HM ESOMEPRAZOLE MAGNESIUM DR, KLS ESOMEPRAZOLE MAGNESIUM, QC ESOMEPRAZOLE MAGNESIUM, RA ESOMEPRAZOLE MAGNESIUM, SM ESOMEPRAZOLE MAGNESIUM CPDR 20 MG	1	QL(1 EA daily); PA; RX/OTC	(Omeprazole Magnesium) ACID REDUCER, CVS OMEPRAZOLE MAGNESIUM, EQ OMEPRAZOLE MAGNESIUM, GNP OMEPRAZOLE, KP OMEPRAZOLE MAGNESIUM, QC OMEPRAZOLE MAGNESIUM CPDR	1	
(Lansoprazole) CVS LANSOPRAZOLE, EQ LANSOPRAZOLE, EQL LANSOPRAZOLE, FT ACID REDUCER, GNP LANSOPRAZOLE, GOODSENSE LANSOPRAZOLE, KLS LANSOPRAZOLE, SM LANSOPRAZOLE CPDR 15 MG	1	RX/OTC	(Omeprazole Magnesium) ACID REDUCER, CVS OMEPRAZOLE MAGNESIUM, EQ OMEPRAZOLE MAGNESIUM, GNP OMEPRAZOLE, KP OMEPRAZOLE MAGNESIUM, QC OMEPRAZOLE MAGNESIUM CPDR 20 MG	1	
			DEXILANT <i>(dexlansoprazole)</i>	GP	QL(1 EA daily); PA
			<i>dexlansoprazole</i>	1	QL(1 EA daily); PA
			<i>esomeprazole magnesium CPDR</i>	1	QL(1 EA daily); PA
			<i>esomeprazole magnesium PACK</i>	1	PA

You can find information on what the symbols and abbreviations on this table mean by going to page ii-iii.

OR Essential Drug List

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
FIRST-LANSOPRAZOLE SUSP	3	PA	Ulcer Drugs - Prostaglandins		
FIRST-OMEPRAZOLE SUSP	3		CYTOTEC (<i>misoprostol</i>)	GP	
<i>lansoprazole CPDR</i>	1	RX/OTC	<i>misoprostol</i>	1	
<i>lansoprazole TBDD</i>	1	QL(1 EA daily); AL(Up to 12 yrs old)	Ulcer Therapy Combinations		
NEXIUM 24HR CLEAR MINIS CPDR (<i>esomeprazole magnesium</i>)	GP	QL(1 EA daily); PA; RX/OTC	<i>amoxicillin-clarithromycin w/ lansoprazole THPK</i>	1	14 day(s) max supply per 365 day(s) retail
NEXIUM 24HR CPDR (<i>esomeprazole magnesium</i>)	GP	QL(1 EA daily); PA; RX/OTC	HELIDAC THERAPY	3	
NEXIUM CPDR (<i>esomeprazole magnesium</i>)	GP	QL(1 EA daily); PA; RX/OTC	<i>omeprazole-sodium bicarbonate CAPS 1100 MG-40 MG</i>	1	PA
NEXIUM PACK (<i>esomeprazole magnesium</i>)	GP	PA	<i>omeprazole-sodium bicarbonate PACK</i>	1	
<i>omeprazole magnesium CPDR</i>	1		ZEGERID CAPS 1100 MG-40 MG (<i>omeprazole-sodium bicarbonate</i>)	GP	PA
OMEPRAZOLE+SYRSPE ND SF ALKA SUSP	3		ZEGERID PACK (<i>omeprazole-sodium bicarbonate</i>)	GP	
<i>omeprazole CPDR</i>	1		URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms		
<i>pantoprazole sodium PACK</i>	1		Urinary Antispasmodic - Antimuscarinics (Anticholinergic)		
<i>pantoprazole sodium TBEC</i>	1		<i>darifenacin hydrobromide</i>	1	
PREVACID SOLUTAB TBDD (<i>lansoprazole</i>)	GP	QL(1 EA daily); AL(Up to 12 yrs old)	DETROL LA CP24 (<i>tolterodine tartrate</i>)	GP	QL(1 EA daily)
PREVACID CPDR 30 MG (<i>lansoprazole</i>)	GP		DETROL TABS 1 MG (<i>tolterodine tartrate</i>)	GP	QL(2 EA daily)
PRILOSEC PACK	3	PA	DETROL TABS 2 MG (<i>tolterodine tartrate</i>)	GP	
PROTONIX PACK (<i>pantoprazole sodium</i>)	GP		DITROPAN XL TB24 5 MG, 10 MG (<i>oxybutynin chloride</i>)	GP	
PROTONIX TBEC (<i>pantoprazole sodium</i>)	GP		<i>fesoterodine fumarate</i>	1	QL(1 EA daily)
RABEPRAZOLE SODIUM CPSP	3	PA	<i>oxybutynin chloride TABS 5 MG</i>	1	
<i>rabeprazole sodium TBEC</i>	1	QL(2 EA daily); PA	<i>oxybutynin chloride TB24</i>	1	
			OXYTROL FOR WOMEN PTTW	3	RX/OTC
			OXYTROL PTTW	3	RX/OTC

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>solifenacin succinate TABS</i>	1		PREVNAR 20	PV	QL(0.5 ML daily); PV
<i>tolterodine tartrate CP24</i>	1	QL(1 EA daily)	TRUMENBA	PV	QL(0.5 ML daily); PV
<i>tolterodine tartrate TABS 1 MG</i>	1	QL(2 EA daily)	VAXNEUVANCE	PV	QL(0.5 ML daily); PV
<i>tolterodine tartrate TABS 2 MG</i>	1		Viral Vaccines		
TOVIAZ (<i>fesoterodine fumarate</i>)	GP	QL(1 EA daily)	AFLURIA PRESERVATIVE FREE SUSY	PV	PV
<i>trospium chloride CP24</i>	1		AFLURIA QUADRIVALENT SUSP	PV	QL(0.5 ML daily); PV
<i>trospium chloride TABS</i>	1		AFLURIA QUADRIVALENT SUSY 0.5 ML	PV	QL(0.5 ML daily); PV
VESICARE TABS (<i>solifenacin succinate</i>)	GP		AFLURIA SUSP	PV	PV
Urinary Antispasmodics - Cholinergic Agonists			COMIRNATY SUSP	PV	PV
<i>bethanechol chloride</i>	1		COMIRNATY SUSY	PV	PV
Urinary Antispasmodics - Direct Muscle Relaxants			DENGVAXIA	PV	QL(1 EA daily); PV
<i>flavoxate hcl</i>	1		FLUAD	PV	QL(0.5 ML daily); PV
VACCINES			FLUAD QUADRIVALENT	PV	QL(0.5 ML daily); PV
Bacterial Vaccines			FLUARIX QUADRIVALENT SUSY	PV	QL(0.5 ML daily); PV
ACTHIB SOLR IM	PV	QL(1 EA daily); PV	FLUARIX SUSY	PV	PV
BEXSERO	PV	QL(0.5 ML daily); PV	FLUBLOK QUADRIVALENT	PV	QL(0.5 ML daily); PV
HIBERIX SOLR IJ	PV	QL(1 EA daily); PV	FLUBLOK SOSY	PV	QL(2 ML per fill retail); PV
MENACTRA	PV	QL(0.5 ML daily); PV	FLUCELVAX QUADRIVALENT SUSP	PV	QL(0.5 ML daily); PV
MENQUADFI	PV	PV	FLUCELVAX QUADRIVALENT SUSY	PV	QL(0.5 ML daily); PV
MENVEO SOLN	PV	QL(0.5 ML daily); PV	FLUCELVAX SUSP	PV	QL(2 ML per fill retail); PV
MENVEO SOLR	PV	QL(1 EA daily); PV	FLUCELVAX SUSY	PV	QL(0.5 ML daily); PV
PEDVAX HIB SUSP	PV	QL(0.5 ML daily); PV	FLULAVAL QUADRIVALENT SUSY	PV	QL(0.5 ML daily); PV
PENBRAYA	PV	PV	FLULAVAL SUSY	PV	PV
PNEUMOVAX 23 SOLN	PV	QL(0.5 ML daily); PV	FLUMIST	PV	PV
PNEUMOVAX 23 SOSY	PV	QL(0.5 ML daily); PV			
PREVNAR 13	PV	QL(0.5 ML daily); PV			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
FLUMIST QUADRIVALENT	PV	QL(1 EA daily); PV	PFIZER COVID-19 VAC BIVALENT	PV	PV
FLUZONE HIGH-DOSE QUADRIVALENT	PV	QL(0.7 ML daily); PV	PFIZER COVID-19 VAC-TRIS 5-11Y SUSP	PV	PV
FLUZONE HIGH-DOSE SUSY	PV	PV	PFIZER COVID-19 VAC-TRIS 6M-4Y SUSP	PV	PV
FLUZONE QUADRIVALENT SUSP	PV	QL(0.5 ML daily); PV	PFIZER-BIONT COVID-19 VAC-TRIS SUSP	PV	PV
FLUZONE QUADRIVALENT SUSY	PV	QL(0.5 ML daily); PV	PREHEVBRIOSUSP	PV	QL(1 ML daily); PV
FLUZONE SUSP	PV	PV	PRIORIX SUSR	PV	QL(1 EA daily); PV
FLUZONE SUSY	PV	PV	PROQUAD SUSR	PV	QL(1 EA daily); PV
GARDASIL 9 SUSP	PV	PV	RECOMBIVAX HB SUSP 10 MCG/ML	PV	QL(1 ML daily); PV
GARDASIL 9 SUSY	PV	PV	RECOMBIVAX HB SUSY 10 MCG/ML	PV	QL(1 ML daily); PV
HAVRIX	PV	QL(1 ML daily); PV	ROTARIX SUSP	PV	PV
HEPLISAV-B SOSY	PV	QL(0.5 ML daily); PV	ROTATEQ SOLN	PV	QL(2 ML daily); PV
I-POL	PV	QL(0.5 ML daily); PV	SHINGRIX	PV	QL(1 EA daily); PV
JYNNEOS	PV	QL(2 ML per fill retail); PV	SPIKEVAX SUSP	PV	PV
M-M-R II SOLR	PV	QL(1 EA daily); PV	SPIKEVAX SUSY	PV	PV
MODERNA COVID-19 BIVAL 6M-5Y	PV	PV	TWINRIX SUSY	PV	QL(1 ML daily); PV
MODERNA COVID-19 BIVALENT	PV	PV	VAQTA	PV	QL(1 ML daily); PV
MODERNA COVID-19 VAC (BOOSTER) SUSP	PV	PV	VARIVAX SUSR	PV	QL(1 EA daily); PV
MODERNA COVID-19 VAC 6M-11Y SUSP	PV	PV	VAGINAL AND RELATED PRODUCTS		
MODERNA COVID-19 VAC 6M-11Y SUSY	PV	PV	Miscellaneous Vaginal Products		
NOVAVAX COVID-19 VACCINE SUSP	PV	PV	FEM PH	3	
NOVAVAX COVID-19 VACCINE SUSY	PV	PV	INTRAROSA	3	QL(1 EA daily)
PFIZER COVID-19 BIVAL 6MO-4YR	PV	PV	Spermicides		
PFIZER COVID-19 VAC BIVAL 5-11	PV	PV	ENCARE SUPP 100 MG	PV	PV
			OPTIONS GYNOL II CONTRACEPTIVE GEL	PV	PV
			SHUR-SEAL CONTRACEPTIVE GEL	PV	PV
			TODAY SPONGE MISC	PV	PV

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits			
VCF VAGINAL CONTRACEPTIVE FILM	PV	PV	ENDOMETRIN INST	3	PA			
VCF VAGINAL CONTRACEPTIVE FOAM	PV	PV	VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions					
VCF VAGINAL CONTRACEPTIVE GEL	PV	PV	Anaphylaxis Therapy Agents					
Vaginal Anti-infectives								
(Miconazole Nitrate Vaginal) MICONAZOLE 3 SUPP 200 MG	1		<i>epinephrine (anaphylaxis) SOAJ</i>	2	QL(4 EA per fill retail)			
CLEOCIN CREA <i>(clindamycin phosphate vaginal)</i>	GP		<i>epinephrine (anaphylaxis) SOAJ 0.15 MG/0.3ML</i>	1	Limited to 4 syringes per fill; QL(4 EA per fill retail)			
CLEOCIN SUPP	3		EPINEPHRINE SOAJ 0.3 MG/0.3ML	2	QL(4 EA per fill retail)			
<i>clindamycin phosphate vaginal CREA</i>	1		EPIPEN 2-PAK SOAJ <i>(epinephrine (anaphylaxis))</i>	2	QL(4 EA per fill retail); PA			
CLINDESSE	3		EPIPEN 2-PAK SOAJ <i>(epinephrine (anaphylaxis))</i>	2	QL(4 EA per fill retail; 1 claims per fill mail)			
GYNAZOLE-1	3		EPIPEN JR 2-PAK SOAJ <i>(epinephrine (anaphylaxis))</i>	GP	Limited to 4 syringes per fill; QL(4 EA per fill retail)			
<i>metronidazole vaginal</i>	1		Neurogenic Orthostatic Hypotension (NOH) - Agents					
<i>terconazole vaginal CREA</i>	1		<i>droxidopa</i>	SP	PA			
<i>terconazole vaginal SUPP</i>	1		NORTHERA <i>(droxidopa)</i>	SP	PA			
VANDAZOLE	2		Vasopressors					
Vaginal Contraceptive - pH Modulators								
PHEXXI	PV	PV	EPINEPHRINE PF SOLN IJ	SP	PA			
Vaginal Estrogens			<i>midodrine hcl</i>	1				
(Estradiol Vaginal) YUVAFEM TABS	1		VITAMINS					
ESTRACE CREA <i>(estradiol vaginal)</i>	GP		Oil Soluble Vitamins					
<i>estradiol vaginal CREA</i>	1		(Cholecalciferol) AQUEOUS VITAMIN D, BPROTECTED PEDIA D-VITE, D-VITE PEDIATRIC, PHARMACIST CHOICE D-VITAMIN, VITAMIN D INFANT LIQD PO 10 MCG/ML	PV	AL(At least 65 yrs old); PV			
<i>estradiol vaginal TABS</i>	1							
ESTRING RING	2	QL(1 EA per fill retail; 1 per fill mail)						
FEMRING	3	QL(1 EA per 90 day(s) retail)						
PREMARIN	2	QL(2 GM daily)						
Vaginal Progestins								
CRINONE GEL	3	PA						

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
(Cholecalciferol) AQUEOUS VITAMIN D, BPROTECTED PEDIA D-VITE, D-VITE PEDIATRIC, PHARMACIST CHOICE D-VITAMIN, VITAMIN D INFANT LIQD PO 400 UNIT/ML	PV	AL(At least 65 yrs old); PV	(Cholecalciferol) D-400, D3 HIGH POTENCY, DELTA D3, GNP VITAMIN D3, QC VITAMIN D3, SM VITAMIN D, TRUE VITAMIN D3 TABS 10 MCG	PV	AL(At least 65 yrs old); PV
(Cholecalciferol) CVS D3, EQL VITAMIN D3, TRUE VITAMIN D3 CAPS 10 MCG	PV	AL(At least 65 yrs old); PV	BABY DDROPS LIQD PO	PV	AL(At least 65 yrs old); PV
(Cholecalciferol) CVS D3, EQL VITAMIN D3, TRUE VITAMIN D3 CAPS 10 MCG, 400 UNIT	PV	AL(At least 65 yrs old); PV	<i>cholecalciferol CAPS 10 MCG, 400 UNIT</i>	PV	AL(At least 65 yrs old); PV
(Cholecalciferol) CVS D3, EQL VITAMIN D3, TRUE VITAMIN D3 CAPS 400 UNIT	PV	AL(At least 65 yrs old); PV	<i>cholecalciferol CAPS 1.25 MG, 50000 UNIT</i>	1	
(Cholecalciferol) CVS D3, EQL VITAMIN D3, TRUE VITAMIN D3 CAPS 400 UNIT	PV	AL(At least 65 yrs old); PV	<i>cholecalciferol CHEW 400 UNIT</i>	PV	AL(At least 65 yrs old); PV
(Cholecalciferol) D3, D3 KIDS, GNP VITAMIN D, HEALTHY KIDS VITAMIN D3, KP VITAMIN D CHEW 400 UNIT	PV	AL(At least 65 yrs old); PV	<i>cholecalciferol LIQD PO 10 MCG/ML, 400 UNIT/ML</i>	PV	AL(At least 65 yrs old); PV
(Cholecalciferol) D3-50, DECARA, OPTIMAL D3, TRUE VITAMIN D3, WEEKLY-D CAPS 50000 UNIT	1		<i>cholecalciferol TABS 10 MCG, 400 UNIT</i>	PV	AL(At least 65 yrs old); PV
(Cholecalciferol) D3-50, DECARA, OPTIMAL D3, TRUE VITAMIN D3, WEEKLY-D CAPS 1.25 MG	1		DRISDOL CAPS (<i>ergocalciferol</i>)	GP	
(Cholecalciferol) D-400, D3 HIGH POTENCY, DELTA D3, GNP VITAMIN D3, QC VITAMIN D3, SM VITAMIN D, TRUE VITAMIN D3 TABS 400 UNIT	PV	AL(At least 65 yrs old); PV	D-VI-SOL LIQD PO (<i>cholecalciferol</i>)	GP	AL(At least 65 yrs old); PV
			<i>ergocalciferol CAPS</i>	1	
			MEPHYTON TABS (<i>phytonadione</i>)	GP	
			<i>phytonadione TABS 5 MG</i>	1	
			VITAMIN D2 TABS	PV	AL(At least 65 yrs old); PV
			VITAMIN D3 IMMUNE HEALTH LIQD PO	PV	AL(At least 65 yrs old); PV
			VITAMIN D3 LIQD PO 30 MCG/15ML	PV	AL(At least 65 yrs old); PV

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(Abiraterone Acetate) ABIRTEGA 250 MG	39	ASPIRIN, CVS ASPIRIN ADULT LOW DOSE, EQ ASPIRIN LOW DOSE, EQL ASPIRIN LOW DOSE, FT ASPIRIN, GNP ADULT ASPIRIN LOW STRENGTH, GOODSENSE ASPIRIN, PX ASPIRIN, QC ASPIRIN LOW DOSE, QC CHILDRENS ASPIRIN, RA ASPIRIN ADULT LOW DOSE, RA ASPIRIN ADULT LOW STRENGTH, RA ASPIRIN CHILDRENS, SB CHILDRENS ASPIRIN, SM ASPIRIN LOW DOSE, SM CHILDRENS ASPIRIN, ST JOSEPH LOW DOSE CHEW	6	(Bacitracin-Polymyxin B (Ophth)) AK- POLY-BAC, POLYCIN	110
(Adapalene) ADAPALENE TREATMENT, CVS ADAPALENE GEL 0.1 %	61	(Bacitracin-Poly-Neomycin-HC) NEO- POLYCIN HC	110		
(Alprazolam) ALPRAZOLAM XR TB24	11	(Budesonide (Nasal)) CVS BUDESONIDE, EQ BUDESONIDE NASAL, GNP BUDESONIDE NASAL SPRAY, RA BUDESONIDE	108		
(Amiodarone Hcl) PACERONE TABS	11	(Budesonide-Formoterol Fumarate Dihydrate) BREYNA	13		
(Aspirin) ADULT ASPIRIN REGIMEN, ASPIRIN 81, ASPIRIN ADULT LOW DOSE, ASPIRIN ADULT LOW STRENGTH, ASPIRIN EC ADULT LOW DOSE, ASPIRIN EC LOW DOSE, ASPIRIN EC LOW STRENGTH, ASPIRIN LOW DOSE, ASPIRIN REGIMEN, BAYER ASPIRIN EC LOW DOSE, BAYER LOW DOSE, CVS ASPIRIN ADULT LOW STRENGTH, CVS ASPIRIN EC, CVS ASPIRIN LOW DOSE, CVS ASPIRIN LOW STRENGTH, ECOTRIN LOW STRENGTH, EQ ASPIRIN ADULT LOW DOSE, EQL ASPIRIN LOW DOSE, FT ASPIRIN LOW DOSE, GNP ASPIRIN, GNP ASPIRIN LOW DOSE, GOODSENSE ASPIRIN LOW DOSE, H-E-B ASPIRIN, HM ASPIRIN EC LOW DOSE, KLS ASPIRIN LOW DOSE, KP ASPIRIN, MM ASPIRIN, PX ENTERIC ASPIRIN, QC ASPIRIN LOW DOSE, RA ASPIRIN EC, RA ASPIRIN EC ADULT LOW ST, SB LOW DOSE ASA EC, SM ASPIRIN ADULT LOW STRENGTH, SM ASPIRIN EC LOW STRENGTH, SM ASPIRIN LOW DOSE, ST JOSEPH ASPIRIN, ST JOSEPH LOW DOSE TBEC 81 MG	6	(Butalbital-Acetaminophen) BUPAP TABS 50 MG-300 MG	5		
(Aspirin) ASPIRIN 81, ASPIRIN CHILDRENS, ASPIRIN LOW DOSE, BAYER LOW DOSE, CHILDRENS		(Aspirin) BAYER ADVANCED ASPIRIN REG ST, BAYER ASPIRIN, CVS ASPIRIN, CVS GENUINE ASPIRIN, EQ ASPIRIN, FT ASPIRIN, GENUINE ASPIRIN, GNP ASPIRIN, GOODSENSE ASPIRIN, GOODSENSE ASPIRIN ADULTS, HM ADULT ASPIRIN, MEDI-FIRST ASPIRIN, MEDIQUE ASPIRIN, PX ASPIRIN, QC ASPIRIN, RA ASPIRIN, RA PAIN RELIEF ASPIRIN, SB ASPIRIN, SM ASPIRIN TABS 325 MG	6	(Butalbital-Acetaminophen) TENCON TABS 50 MG-325 MG	5
		(Aspirin) BAYER ASPIRIN, EQL ASPIRIN EC, FT ENTERIC COATED ASPIRIN, GNP ASPIRIN, GOODSENSE ASPIRIN, HM ASPIRIN, HM ASPIRIN EC, MEIJER ASPIRIN EC, PX ENTERIC ASPIRIN, QC ASPIRIN, QC ENTERIC ASPIRIN, RA ASPIRIN EC, SB ASPIRIN EC, SM ASPIRIN EC TBEC 325 MG	7	(Butalbital-Acetaminophen-Caffeine) BAC (BUTALBITAL-ACETAMIN- CAFF) TABS 40 MG-50 MG-325 MG 5	
		(Aspirin) AZASAN TABS 75 MG, 100 MG	93	(Butalbital-Acetaminophen-Caffeine) ESGIC, ZEBUTAL CAPS 40 MG-50 MG-325 MG	5
		(Aspirin) BAYER ASPIRIN, EQL ASPIRIN EC, FT ENTERIC COATED ASPIRIN, GNP ASPIRIN, GOODSENSE ASPIRIN, HM ASPIRIN, HM ASPIRIN EC, MEIJER ASPIRIN EC, PX ENTERIC ASPIRIN, QC ASPIRIN, QC ENTERIC ASPIRIN, RA ASPIRIN EC, SB ASPIRIN EC, SM ASPIRIN EC TBEC 325 MG	7	(Butalbital-Aspirin-Caffeine W/Cod) ASCOMP-CODEINE	8
		(Azathioprine) AZASAN TABS 75 MG, 100 MG	93	(Calcipotriene) CALCITRENE OINT 65	
		(Carbamazepine) EPITOL TABS ..	15	(Carbamazepine) EPITOL TABS ..	15
		(Carbonyl Iron) WEE CARE SUSP 82		(Carbonyl Iron) WEE CARE SUSP 82	
		(Carboplatin) PARAPLATIN SOLN 450 MG/45ML, 600 MG/60ML, 1000 MG/100ML	36	(Carboplatin) PARAPLATIN SOLN 450 MG/45ML, 600 MG/60ML, 1000 MG/100ML	36
		(Carisoprodol) VANADOM TABS 350 MG	107	(Carisoprodol) VANADOM TABS 350 MG	107
		(Ceftazidime) TAZICEF IV 1 GM, 2 GM	53	(Ceftazidime) TAZICEF IV 1 GM, 2 GM	53
		(Cetirizine Hcl) ALL DAY ALLERGY CHILDRENS, ALL-DAY ALLERGY CHILDRENS, ALLERGY RELIEF CHILDRENS, ALLERGY RELIEF		(Cetirizine Hcl) ALL DAY ALLERGY CHILDRENS, ALL-DAY ALLERGY CHILDRENS, ALLERGY RELIEF CHILDRENS, ALLERGY RELIEF	

CHILDRENS 24-HR, CETIRIZINE HCL ALLERGY CHILD, CETIRIZINE HCL CHILDRENS ALRGY, CHILDRENS 24 HOUR ALLERGY, CVS ALLERGY RELIEF CHILDRENS, EQ ALLERG RELIEF CHILD (CETIR), EQ ALLERGY RELIEF (CETIRIZINE), EQL ALL DAY ALLERGY CHILDRENS, FT ALL DAY ALLERGY CHILDRENS, FT ALLERGY RELIEF CHILDRENS, GNP ALL DAY ALLERGY CHILDRENS, GOODSENSE ALL DAY ALLERGY, HM ALL DAY ALLERGY CHILDRENS, KLS ALLER-TEC CHILDRENS, PX CHILDRENS ALLERGY, QC CHILDRENS ALLERGY, RA ALLERGY RELIEF CHILDRENS, SB CETIRIZINE HCL CHILDRENS, SM ALL DAY ALLERGY CHILDRENS, WAL-ZYR, WAL-ZYR ALL DAY ALLERGY CHILD, WAL-ZYR ALLERGY CHILDRENS, WAL-ZYR CHILDRENS SOLN PO 1 MG/ML .28	CHILDRENS ALLERGY, QC CHILDRENS ALLERGY, RA ALLERGY RELIEF CHILDRENS, SB CETIRIZINE HCL CHILDRENS, SM ALL DAY ALLERGY CHILDRENS, WAL-ZYR, WAL-ZYR ALL DAY ALLERGY CHILD, WAL-ZYR ALLERGY CHILDRENS, WAL-ZYR CHILDRENS SOLN PO 5 MG/5ML 28 (Cetirizine Hcl) ALL DAY ALLERGY CHILDRENS, ALL-DAY ALLERGY CHILDRENS, ALLERGY RELIEF CHILDRENS, ALLERGY RELIEF CHILDREN 24-HR, CETIRIZINE HCL ALLERGY CHILD, CETIRIZINE HCL CHILDRENS ALRGY, CHILDRENS 24 HOUR ALLERGY, CVS ALLERGY RELIEF CHILDRENS, EQ ALLERG RELIEF CHILD (CETIR), EQ ALLERGY RELIEF (CETIRIZINE), EQL ALL DAY ALLERGY CHILDRENS, FT ALL DAY ALLERGY CHILDRENS, FT ALLERGY RELIEF CHILDRENS, GNP ALL DAY ALLERGY CHILDRENS, GOODSENSE ALL DAY ALLERGY, HM ALL DAY ALLERGY CHILDRENS, KLS ALLER-TEC CHILDRENS, PX CHILDRENS ALLERGY, QC CHILDRENS ALLERGY, RA ALLERGY RELIEF CHILDRENS, SB CETIRIZINE HCL CHILDRENS, SM ALL DAY ALLERGY CHILDRENS, WAL-ZYR, WAL-ZYR ALL DAY ALLERGY CHILD, WAL-ZYR ALLERGY CHILDRENS, WAL-ZYR CHILDRENS SOLN PO .....29	RELIEF CHILDRENS, RA ALLERGY RELIEF CHILDRENS SYRP PO 5 MG/5ML .....29 (Chlorhexidine Gluconate (Mouth-Throat)) PERIOGARD .....95 (Chlorzoxazone) LORZONE TABS 375 MG, 750 MG .....107 (Cholecalciferol) AQUEOUS VITAMIN D, BPROTECTED PEDIA D-VITE, D-VITE PEDIATRIC, PHARMACIST CHOICE D-VITAMIN, VITAMIN D INFANT LIQD PO 10 MCG/ML .....127 (Cholecalciferol) AQUEOUS VITAMIN D, BPROTECTED PEDIA D-VITE, D-VITE PEDIATRIC, PHARMACIST CHOICE D-VITAMIN, VITAMIN D INFANT LIQD PO 400 UNIT/ML .....128 (Cholecalciferol) CVS D3, EQL VITAMIN D3, TRUE VITAMIN D3 CAPS 10 MCG, 400 UNIT .....128 (Cholecalciferol) CVS D3, EQL VITAMIN D3, TRUE VITAMIN D3 CAPS 10 MCG .....128 (Cholecalciferol) CVS D3, EQL VITAMIN D3, TRUE VITAMIN D3 CAPS 400 UNIT .....128 (Cholecalciferol) D3, D3 KIDS, GNP VITAMIN D, HEALTHY KIDS VITAMIN D3, KP VITAMIN D CHEW 400 UNIT .....128 (Cholecalciferol) D3-50, DECARA, OPTIMAL D3, TRUE VITAMIN D3, WEEKLY-D CAPS 1.25 MG .....128 (Cholecalciferol) D3-50, DECARA, OPTIMAL D3, TRUE VITAMIN D3, WEEKLY-D CAPS 50000 UNIT ..128 (Cholecalciferol) D-400, D3 HIGH POTENCY, DELTA D3, GNP
CHILDRENS, GOODSENSE ALL DAY ALLERGY, HM ALL DAY ALLERGY CHILDRENS, KLS ALLER-TEC CHILDRENS, PX	(Cetirizine Hcl) QC ALLERGY RELIEF CHILDRENS, RA ALLERGY RELIEF CHILDRENS SYRP PO 1 MG/ML .....29 (Cetirizine Hcl) QC ALLERGY	

VITAMIN D3, QC VITAMIN D3, SM VITAMIN D, TRUE VITAMIN D3 TABS 10 MCG	(Cyclobenzaprine Hcl) FEXMID TABS 7.5 MG	107	ARTHRITIS PAIN, ARTHRITIS PAIN RELIEVER, ASPERCREME
(Cholecalciferol) D-400, D3 HIGH POTENCY, DELTA D3, GNP VITAMIN D3, QC VITAMIN D3, SM VITAMIN D, TRUE VITAMIN D3 TABS 400 UNIT	(Cyclosporine Modified (For Microemulsion)) GENGRAF CAPS 25 MG, 100 MG	93	ARTHRITIS PAIN, CVS DICLOFENAC SODIUM, EQ
(Cholestyramine Light) PREVALITE PACK	(Cyclosporine Modified (For Microemulsion)) GENGRAF SOLN 93		ARTHRITIS PAIN, EQ ARTHRITIS PAIN RELIEVER, FT ARTHRITIS PAIN, GNP ARTHRITIS PAIN, GNP DICLOFENAC SODIUM, GOODSENSE ARTHRITIS PAIN, KLS ARTHRITIS PAIN RELIEF, KLS DICLOFENAC SODIUM, MM
(Cholestyramine Light) PREVALITE POWD	(Desogestrel & Ethinyl Estradiol) APRI, CYRED, CYRED EQ, EMOQUETTE, ENSKYCE, ISIBLOOM, JULEBER, KALLIGA, RECLIPSEN 0.03 MG-0.15 MG ...	54	ARTHITIS PAIN RELIEVER, MOTRIN ARTHRITIS PAIN, PHARMACIST CHOICE
(Cimetidine) CIMETIDINE 200, CIMETIDINE ACID REDUCER, CVS HEARTBURN RELIEF, EQ ACID REDUCER, EQ CIMETIDINE, PX ACID REDUCER, SB CIMETIDINE, SM ACID REDUCER TABS 200 MG .	(Desogestrel & Ethinyl Estradiol) APRI, CYRED, CYRED EQ, EMOQUETTE, ENSKYCE, ISIBLOOM, JULEBER, KALLIGA, RECLIPSEN 30 MCG-0.15 MG ...	54	DICLOFENAC, QC DICLOFENAC SODIUM, SM ARTHRITIS PAIN GEL EX
(Clindamycin Phosphate (Topical)) CLINDACIN ETZ, CLINDACIN-P SWAB	(Desogestrel-Ethinyl Estradiol (Biphasic)) AZURETTE, KARIVA, PIMTREA, SIMLIYA, VIORELE, VOLNEA	54	65
(Clindamycin Phosphate (Topical)) CLINDACIN FOAM	(Desogestrel-Ethinyl Estradiol (Triphasic)) VELIVET	54	(Diltiazem Hcl Coated Beads) CARTIA XT CP24 120 MG, 180 MG, 240 MG, 300 MG
(Clindamycin Phosphate-Benzoyl Peroxide (Refrigerate)) NEUAC ..	(Desonide) DESRX GEL	66	51
(Clobetasol Propionate Emollient Base) CLOBETASOL PROPIONATE E 0.05 %	(Dexamethasone) HIDEX 6-DAY, TAPERDEX 6-DAY TBPK	59	(Diltiazem Hcl Extended Release Beads) TAZTIA XT, TIADYLT ER .51
(Clobetasol Propionate Emulsion) TOVET	(Dexchlorpheniramine Maleate) RYCLORA SOLN	25	(Diltiazem Hcl Extended Release Beads) TAZTIA XT, TIADYLT ER 120 MG, 180 MG, 240 MG, 300 MG, 360 MG
(Clobetasol Propionate) CLODAN SHAM	(Dextroamphetamine Sulfate) PROCENTRA SOLN	1	51
(Clomiphene Citrate) CLOMID TABS	(Dextroamphetamine Sulfate) ZENZEDI TABS 2.5 MG, 5 MG, 7.5 MG, 10 MG	1	(Diphenhydramine Hcl (Sleep)) CVS SLEEP-AID NIGHTTIME, EQ
75	(Diazepam) DIAZEPAM INTENSOL CONC	11	NIGHTTIME SLEEP AID MAX ST, EQL SLEEP AID, FT SLEEP-AID MAXIMUM STRENGTH, GNP
(Clotrimazole (Topical)) ATHLETES FOOT, CVS CLOTRIMAZOLE SOLN	(Dichlorphenamide) ORMALVI	73	NIGHTTIME SLEEP-AID MAX ST, GOODSENSE SLEEP AID, GOODSENSE SLEEP-AID MAX STR, QC SLEEP AID MAX ST, RA SLEEP AID, SLEEP-AID, WAL-SOM MAXIMUM STRENGTH CAPS 50 MG
63	(Diclofenac Sodium (Topical)) ALEVE	83	
(Crotamiton) CROTAN LOTN			

(Diphenhydramine Hcl) ALER-CAP, ALLERGY, ALLERGY RELIEF, BANOPHEN, COMPLETE ALLERGY MEDICINE, CVS ALLERGY, CVS ALLERGY RELIEF, EQ ALLERGY RELIEF, FT ALLERGY RELIEF, GNP ALLERGY, GNP ALLERGY RELIEF, GOODSENSE ALLERGY RELIEF, HM ALLERGY RELIEF, KP DIPHENHYDRAMINE HCL, MEDI- PHEDRYL, MEIJER ANTIHISTAMINE ALLERGY, PHARBEDRYL, PX ALLERGY, QC ALLERGY RELIEF, RA ALLERGY MEDICATION, RA ALLERGY RELIEF, SB ALLERGY, WAL-DRYL ALLERGY CAPS 50 MG .....25	ALLERGY CHILDRENS LIQD 12.5 MG/5ML .....26	CHILDRENS ALLERGY, H-E-B CHILDRENS ALLERGY, KINDERMED KIDS ALLERGY, LIQUID ALLERGY RELIEF, M-DRYL, MAXALLERGY KIDS, NARAMIN, PEDIACARE CHILDRENS ALLERGY, PX ALLERGY, QC ALLERGY CHILDRENS, RA ALLERGY, RA ALLERGY MEDICATION, RA ALLERGY RELIEF CHILDRENS, RA DIPHEDRYL ALLERGY, SB ALLERGY MEDICINE, SM ALLERGY RELIEF CHILDRENS, TOTAL ALLERGY MEDICINE, WAL- DRYL ALLERGY, WAL-DRYL ALLERGY CHILDRENS LIQD 50 MG/20ML .....26
(Diphenhydramine Hcl) ALLERGY CHILDRENS, ALLERGY RELIEF, ALLERGY RELIEF CHILDRENS, CURELIEF, CVS ALLERGY RELIEF, CVS ALLERGY RELIEF ADULT, CVS ALLERGY RELIEF CHILDRENS, CVS CHILDRENS ALLERGY, EQ ALLERGY RELIEF CHILDRENS, EQL CHILDRENS ALLERGY, FT ALLERGY RELIEF CHILDRENS, GERI-DRYL, GNP ALLERGY RELIEF MAX ST, GNP CHILDRENS ALLERGY, H-E-B CHILDRENS ALLERGY, KINDERMED KIDS ALLERGY, LIQUID ALLERGY RELIEF, M-DRYL, MAXALLERGY KIDS, NARAMIN, PEDIACARE CHILDRENS ALLERGY, PX ALLERGY, QC ALLERGY CHILDRENS, RA ALLERGY, RA ALLERGY MEDICATION, RA ALLERGY RELIEF CHILDRENS, RA DIPHEDRYL ALLERGY, SB ALLERGY MEDICINE, SM ALLERGY RELIEF CHILDRENS, TOTAL ALLERGY MEDICINE, WAL- DRYL ALLERGY, WAL-DRYL ALLERGY CHILDRENS LIQD 25 MG/10ML .....27	(Diphenhydramine Hcl) ALLERGY CHILDRENS, ALLERGY RELIEF, ALLERGY RELIEF CHILDRENS, CURELIEF, CVS ALLERGY RELIEF, CVS ALLERGY RELIEF ADULT, CVS ALLERGY RELIEF CHILDRENS, CVS CHILDRENS ALLERGY, EQ ALLERGY RELIEF CHILDRENS, EQL CHILDRENS ALLERGY, FT ALLERGY RELIEF CHILDRENS, GERI-DRYL, GNP ALLERGY RELIEF MAX ST, GNP	(Doxycycline (Monohydrate)) AVIDOXY TABS 100 MG .....119
(Diphenhydramine Hcl) ALLERGY CHILDRENS, ALLERGY RELIEF, ALLERGY RELIEF CHILDRENS, CURELIEF, CVS ALLERGY RELIEF, CVS ALLERGY RELIEF ADULT, CVS ALLERGY RELIEF CHILDRENS, CVS CHILDRENS ALLERGY, EQ ALLERGY RELIEF CHILDRENS, EQL CHILDRENS ALLERGY, FT ALLERGY RELIEF CHILDRENS, GERI-DRYL, GNP ALLERGY RELIEF MAX ST, GNP CHILDRENS ALLERGY, H-E-B CHILDRENS ALLERGY, KINDERMED KIDS ALLERGY, LIQUID ALLERGY RELIEF, M-DRYL, MAXALLERGY KIDS, NARAMIN, PEDIACARE CHILDRENS ALLERGY, PX ALLERGY, QC ALLERGY CHILDRENS, RA ALLERGY, RA ALLERGY MEDICATION, RA ALLERGY RELIEF CHILDRENS, RA DIPHEDRYL ALLERGY, SB ALLERGY MEDICINE, SM ALLERGY RELIEF CHILDRENS, TOTAL ALLERGY MEDICINE, WAL- DRYL ALLERGY, WAL-DRYL ALLERGY CHILDRENS LIQD 25 MG/10ML .....27	(Doxycycline (Monohydrate)) MONDOXYNE NL CAPS 100 MG 120	(Doxycycline Hyclate) LYMEPAK, TARGADOX TABS 100 MG .....120
(Diphenhydramine Hcl) ALLERGY CHILDRENS, ALLERGY RELIEF, ALLERGY RELIEF CHILDRENS, CURELIEF, CVS ALLERGY RELIEF, CVS ALLERGY RELIEF ADULT, CVS ALLERGY RELIEF CHILDRENS, CVS CHILDRENS ALLERGY, EQ ALLERGY RELIEF CHILDRENS, EQL CHILDRENS ALLERGY, FT ALLERGY RELIEF CHILDRENS, GERI-DRYL, GNP ALLERGY RELIEF MAX ST, GNP	(Drospirenone-Ethinyl Estradiol) JASMIEL, LO-ZUMANDIMINE, LORYNA, NIKKI, OCELLA, SYEDA, VESTURA, ZUMANDIMINE 0.02 MG-3 MG .....54	(Drospirenone-Ethinyl Estradiol) JASMIEL, LO-ZUMANDIMINE, LORYNA, NIKKI, OCELLA, SYEDA, VESTURA, ZUMANDIMINE 0.03 MG-3 MG .....54
(Diphenhydramine Hcl) ALLERGY CHILDRENS, ALLERGY RELIEF, ALLERGY RELIEF CHILDRENS, CURELIEF, CVS ALLERGY RELIEF, CVS ALLERGY RELIEF ADULT, CVS ALLERGY RELIEF CHILDRENS, CVS CHILDRENS ALLERGY, EQ ALLERGY RELIEF CHILDRENS, EQL CHILDRENS ALLERGY, FT ALLERGY RELIEF CHILDRENS, GERI-DRYL, GNP ALLERGY RELIEF MAX ST, GNP	(Drospirenone-Ethinyl Estradiol- Levomefolate Calcium) TYDEMY 0.03 MG-3 MG-0.451 MG .....54	(Drospirenone-Ethinyl Estradiol- Levomefolate Calcium) TYDEMY 0.03 MG-3 MG-0.451 MG .....54
(Diphenhydramine Hcl) ALLERGY CHILDRENS, ALLERGY RELIEF, ALLERGY RELIEF CHILDRENS, CURELIEF, CVS ALLERGY RELIEF, CVS ALLERGY RELIEF ADULT, CVS ALLERGY RELIEF CHILDRENS, CVS CHILDRENS ALLERGY, EQ ALLERGY RELIEF CHILDRENS, EQL CHILDRENS ALLERGY, FT ALLERGY RELIEF CHILDRENS, GERI-DRYL, GNP ALLERGY RELIEF MAX ST, GNP	(Electrolyte-148) MULTIPLE ELECTRO TYPE 1 PH 5.5 .....92	(Electrolyte-A) MULTIPLE ELECTRO

TYPE 1 PH 7.4	92	MG	77	CONTROLLER MAX ST, MM ACID-PEP MAXIMUM STRENGTH, PX
(Ergotamine W/ Caffeine)		(Estradiol & Norethindrone Acetate)		ACID REDUCER MAX ST, QC ACID
MIGERGOT SUPP	90	AMABELZ, MIMVEY TABS 1 MG-0.5 MG	77	CONTROLLER MAX ST, QC
(Erythromycin (Acne Aid)) ERY PADS	61	(Estradiol & Norethindrone Acetate)		FAMOTIDINE ACID REDUCER, RA
(Erythromycin Base) ERY-TAB TBEC	85	AMABELZ, MIMVEY TABS	77	ACID REDUCER MAX ST, SB ACID
(Erythromycin Ethylsuccinate) E.E.S. 400 TABS	85	(Estradiol Vaginal) YUVAFEM TABS .127		CONTROLLER MAX ST, SM ACID
(Erythromycin Stearate)		(Estradiol) DOTTI, LYLLANA PTTW .77		REDUCER MAX ST, ZANTAC 360
ERYTHROCIN STEARATE TABS 250 MG	85	(Ethynodiol Diacet & Eth Estrad)		MAX ST TABS 20 MG
(Esomeprazole Magnesium) CVS ESOMEPRAZOLE MAGNESIUM, EQ ESOMEPRAZOLE MAGNESIUM, FT ACID REDUCER, GNP ESOMEPRAZOLE MAGNESIUM, GOODSENSE		KELNOR 1/35, KELNOR 1/50, VALTYA 1/50, ZOVIA 1/35 (28) ...54		122 (Ferrous Sulfate) BPROTECTED
ESOMEPRAZOLE, HM ESOMEPRAZOLE MAGNESIUM DR, KLS ESOMEPRAZOLE MAGNESIUM, QC		(Ethynodiol Diacet & Eth Estrad)		PEDIA IRON, FE-VITE IRON, IRON
ESOMEPRAZOLE MAGNESIUM, RA ESOMEPRAZOLE MAGNESIUM, SM ESOMEPRAZOLE MAGNESIUM CPDR 20 MG	123	KELNOR 1/35, KELNOR 1/50, VALTYA 1/50, ZOVIA 1/35 (28) 50		INFANT & TODDLER, IRON
(Esterified Estrogens & Methyltestosterone) COVARYX, COVARYX HS, EEMT, EEMT HS, EST ESTROGENS-METHYLTEST DS, EST ESTROGENS-METHYLTEST HS, ESTRATEST F.S., ESTRATEST H.S. 1.25 MG-0.625 MG	77	MCG-1 MG	54	SUPPLEMENT, IRON
(Esterified Estrogens & Methyltestosterone) COVARYX, COVARYX HS, EEMT, EEMT HS, EST ESTROGENS-METHYLTEST DS, EST ESTROGENS-METHYLTEST HS, ESTRATEST F.S., ESTRATEST H.S. 2.5 MG-1.25		(Etonogestrel-Ethinyl Estradiol)		SUPPLEMENT CHILDRENS, ONE
		ELURYNG, ENILLORING,		VITE FERROUS SULFATE, PC
		HALOETTE	58	PEDIATRIC IRON DROPS SOLN 15 MG/ML
		(Etoposide) TOPOSAR SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML	44	82 (Ferrous Sulfate) BPROTECTED
		(Everolimus) TORPENZ TABS	41	PEDIA IRON, FE-VITE IRON, IRON
		(Famotidine) ACID CONTROL MAXIMUM STRENGTH, ACID CONTROLLER MAX ST, ACID REDUCER MAXIMUM STRENGTH, CVS ACID CONTROLLER MAX ST, EQ FAMOTIDINE MAX ST, EQL HEARTBURN PREVENTION, FAMOTIDINE MAXIMUM STRENGTH, FT ACID REDUCER MAX STRENGTH, GNP ACID REDUCER MAX ST, HEARTBURN RELIEF MAX ST, KLS ACID		INFANT & TODDLER, IRON
				INFANT/TODDLER, IRON
				SUPPLEMENT, IRON
				SUPPLEMENT CHILDRENS, ONE
				VITE FERROUS SULFATE, PC
				PEDIATRIC IRON DROPS SOLN 220 MG/5ML
				83 (Fluocinolone Acetonide (Otic)) FLAC
				113 (Fluticasone Propionate (Nasal))
				ALLERGY RELIEF, ALLERGY SPRAY 24 HOUR, CLARISPRAY, CVS FLUTICASONE PROPIONATE, EQ ALLERGY RELIEF, EQL

FLUTICASONE CHILDRENS, FT ALLERGY RELIEF 24 HR, GNP	(Folic Acid) CVS FOLIC ACID, FOLATE, FT FOLIC ACID, GNP	MAXIMUM STRENGTH, EQL ANTI-ITCH
FLUTICASONE PROPIONATE, GOODSENSE 24-HR ALLERGY NASAL, HM ALLERGY RELIEF, KLS ALLER-FLO, QC ALLERGY RELIEF, SM ALLERGY RELIEF SUSP ....108	FOLIC ACID, HM FOLIC ACID, KP FOLIC ACID, PX FOLIC ACID, QC FOLIC ACID, RA FOLIC ACID, SM FOLIC ACID, TRUE FOLIC ACID, YL FOLIC ACID TABS 800 MCG .....82	ITCH MAXIMUM STRENGTH, FT ITCH RELIEF MAX STRENGTH, GNP HYDROCORTISONE MAX ST, GOODSENSE ANTI-ITCH MAXIMUM ST, RA ANTI-ITCH MAXIMUM STRENGTH, SB
(Fluticasone-Salmeterol) WIXELA INHUB AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT .....13	(Folic Acid-Pyridoxine- Cyanocobalamin) FOLBIC, WESTAB MAX .....72	HYDROCORTISONE MAX ST, SM HYDROCORTISONE MAX ST OINT 1 %67
(Folic Acid) CVS FOLIC ACID, FOLATE, FT FOLIC ACID, GNP FOLIC ACID, HM FOLIC ACID, KP FOLIC ACID, PX FOLIC ACID, QC FOLIC ACID, RA FOLIC ACID, SM FOLIC ACID, TRUE FOLIC ACID, YL FOLIC ACID TABS 1 MG, 400 MCG . 81	(Gentamicin Sulfate (Ophth)) GENTAK OINT .....110	(Hydrocortisone (Topical)) TEXACORT SOLN 2.5 %67
(Folic Acid) CVS FOLIC ACID, FOLATE, FT FOLIC ACID, GNP FOLIC ACID, HM FOLIC ACID, KP FOLIC ACID, PX FOLIC ACID, QC FOLIC ACID, RA FOLIC ACID, SM FOLIC ACID, TRUE FOLIC ACID, YL FOLIC ACID TABS 1 MG, 400 MCG . 81	(Glatiramer Acetate) GLATOPA SOSY .....116	(Hydrocortisone Acetate (Rectal)) ANUCORT-HC, ANUSOL-HC, HEMMOREX-HC .....10
(Folic Acid) CVS FOLIC ACID, FOLATE, FT FOLIC ACID, GNP FOLIC ACID, HM FOLIC ACID, KP FOLIC ACID, PX FOLIC ACID, QC FOLIC ACID, RA FOLIC ACID, SM FOLIC ACID, TRUE FOLIC ACID, YL FOLIC ACID TABS 1 MG, 400 MCG . 81	(Glipizide) GLIPIZIDE XL TB24 ...22	(Hydrocortisone Acetate (Rectal)) ANUCORT-HC, ANUSOL-HC, HEMMOREX-HC 25 MG .....10
(Folic Acid) CVS FOLIC ACID, FOLATE, FT FOLIC ACID, GNP FOLIC ACID, HM FOLIC ACID, KP FOLIC ACID, PX FOLIC ACID, QC FOLIC ACID, RA FOLIC ACID, SM FOLIC ACID, TRUE FOLIC ACID, YL FOLIC ACID TABS 1 MG, 400 MCG . 81	(Guaifenesin-Codeine) G TUSSIN AC, MAXI-TUSS AC SOLN 10 MG/5ML-100 MG/5ML .....60	(Hyoscyamine Sulfate) NULEV TBDP 0.125 MG .....121
(Folic Acid) CVS FOLIC ACID, FOLATE, FT FOLIC ACID, GNP FOLIC ACID, HM FOLIC ACID, KP FOLIC ACID, PX FOLIC ACID, QC FOLIC ACID, RA FOLIC ACID, SM FOLIC ACID, TRUE FOLIC ACID, YL FOLIC ACID TABS 1 MG, 400 MCG . 81	(Guaifenesin-Codeine) GUAIATUSSIN AC, GUAIFENESIN AC SYRP .....60	(Hyoscyamine Sulfate) OSCIMIN SUBL 0.125 MG .....121
(Folic Acid) CVS FOLIC ACID, FOLATE, FT FOLIC ACID, GNP FOLIC ACID, HM FOLIC ACID, KP FOLIC ACID, PX FOLIC ACID, QC FOLIC ACID, RA FOLIC ACID, SM FOLIC ACID, TRUE FOLIC ACID, YL FOLIC ACID TABS 1 MG, 400 MCG . 81	(Homatropine Hbr) HOMATROPAIRE.....109	(Hyoscyamine Sulfate) OSCIMIN TABS 0.125 MG .....121
(Folic Acid) CVS FOLIC ACID, FOLATE, FT FOLIC ACID, GNP FOLIC ACID, HM FOLIC ACID, KP FOLIC ACID, PX FOLIC ACID, QC FOLIC ACID, RA FOLIC ACID, SM FOLIC ACID, TRUE FOLIC ACID, YL FOLIC ACID TABS 1 MG, 400 MCG . 81	(Hydrocodone Bitartrate-Homatropine Methylbromide) HYDROMET SOLN . 60	(Ibuprofen) IBU TABS 400 MG, 600 MG, 800 MG .....3
(Folic Acid) CVS FOLIC ACID, FOLATE, FT FOLIC ACID, GNP FOLIC ACID, HM FOLIC ACID, KP FOLIC ACID, PX FOLIC ACID, QC FOLIC ACID, RA FOLIC ACID, SM FOLIC ACID, TRUE FOLIC ACID, YL FOLIC ACID TABS 1 MG, 400 MCG . 81	(Hydrocortisone (Rectal)) PROCTO- MED HC, PROCTOSOL HC, PROCTOZONE-HC EX 2.5 %10	(Icatibant Acetate) SAJAZIR SOSY 81
(Folic Acid) CVS FOLIC ACID, FOLATE, FT FOLIC ACID, GNP FOLIC ACID, HM FOLIC ACID, KP FOLIC ACID, PX FOLIC ACID, QC FOLIC ACID, RA FOLIC ACID, SM FOLIC ACID, TRUE FOLIC ACID, YL FOLIC ACID TABS 1 MG, 400 MCG . 81	(Hydrocortisone (Topical)) ALA SCALP LOTN 2 %66	(Indomethacin) INDOCIN SUPP ....3
(Folic Acid) CVS FOLIC ACID, FOLATE, FT FOLIC ACID, GNP FOLIC ACID, HM FOLIC ACID, KP FOLIC ACID, PX FOLIC ACID, QC FOLIC ACID, RA FOLIC ACID, SM FOLIC ACID, TRUE FOLIC ACID, YL FOLIC ACID TABS 1 MG, 400 MCG . 81	(Hydrocortisone (Topical)) ALA- CORT CREA 2.5 %66	(Iodoquinol-HC) CORTI-SAV .....63
(Folic Acid) CVS FOLIC ACID, FOLATE, FT FOLIC ACID, GNP FOLIC ACID, HM FOLIC ACID, KP FOLIC ACID, PX FOLIC ACID, QC FOLIC ACID, RA FOLIC ACID, SM FOLIC ACID, TRUE FOLIC ACID, YL FOLIC ACID TABS 1 MG, 400 MCG . 81	(Hydrocortisone (Topical)) AQUAPHOR ITCH RELIEF CHILDREN, AQUAPHOR ITCH RELIEF MAX STR, CORTIZONE-10, CORTIZONE-10 WATER RESISTANT, CVS CORTISONE	(Iodoquinol-Hydrocortisone In Aloe Vehicle) IODOQUIMEZ-HC .....63
(Folic Acid) CVS FOLIC ACID, FOLATE, FT FOLIC ACID, GNP FOLIC ACID, HM FOLIC ACID, KP FOLIC ACID, PX FOLIC ACID, QC FOLIC ACID, RA FOLIC ACID, SM FOLIC ACID, TRUE FOLIC ACID, YL FOLIC ACID TABS 1 MG, 400 MCG . 81	(Irrigation Solutions, Physiological) PHYSIOLYTE, PHYSIOSOL IRRIGATION .....94	
(Folic Acid) CVS FOLIC ACID, FOLATE, FT FOLIC ACID, GNP FOLIC ACID, HM FOLIC ACID, KP FOLIC ACID, PX FOLIC ACID, QC FOLIC ACID, RA FOLIC ACID, SM FOLIC ACID, TRUE FOLIC ACID, YL FOLIC ACID TABS 1 MG, 400 MCG . 81	(Isotretinoin) ACCUTANE, AMNESTEEM, CLARAVIS, MYORISAN, ZENATANE 10 MG, 20 MG, 30 MG, 40 MG .....61	

(Isotretinoin) ACCUTANE, AMNESTEEM, CLARAVIS, MYORISAN, ZENATANE 10 MG, 20 MG, 40 MG	LANSOPRAZOLE, GOODSENSE LANSOPRAZOLE TBDD 15 MG . 123	INTROVALE, JAIMESS, JOLESSA, LOJAIMIESS, RIVELSA, SETLAKIN, SIMPESSE .....55
(Ivermectin (Pediculicide)) CVS IVERMECTIN LICE TREATMENT, EQ IVERMECTIN	(Levetiracetam) ROWEEPRA TABS 500 MG	(Levonorgestrel-Ethinyl Estradiol (91- Day)) AMETHIA, ASHLYNA, CAMRESE, CAMRESE LO, DAYSEE, FAYOSIM, ICLEVIA, INTROVALE, JAIMESS, JOLESSA, LOJAIMIESS, RIVELSA, SETLAKIN, SIMPESSE 0.03 MG-0.15 MG ....55
(Ketoconazole (Topical)) KETODAN FOAM	(Levonorgestrel & Eth Estradiol) AFIRMELLE, ALTAVERA, AUBRA EQ, AVIANE, AYUNA, CHATEAL EQ, DELYLA, FALMINA, KURVELO, LESSINA, LEVORA 0.15/30 (28), LUTERA, MARLISSA, ORSYTHIA, PORTIA-28, SRONYX, VIENVA TABS 0.03 MG-0.15 MG	(Levonorgestrel-Ethinyl Estradiol (Continuous)) AMETHYST, DOLISHALE
(Ketoprofen) KIPROFEN CAPS 25 MG	TAB 0.03 MG-0.15 MG	DOLISHALE .....55
(Lactic Acid (Ammonium Lactate)) AL12, AMLACTIN DAILY, AMLACTIN DAILY NOURISH, CVS HYDRATING SKIN TREATMENT, CVS SKIN TREATMENT LOTN 12 %	(Levonorgestrel & Eth Estradiol) AFIRMELLE, ALTAVERA, AUBRA EQ, AVIANE, AYUNA, CHATEAL EQ, DELYLA, FALMINA, KURVELO, LESSINA, LEVORA 0.15/30 (28), LUTERA, MARLISSA, ORSYTHIA, PORTIA-28, SRONYX, VIENVA TABS 20 MCG-0.1 MG	(Levonorgestrel-Ethinyl Estradiol-Iron) JOYEUX, MINZOYA
(Lactulose (Encephalopathy)) ENULOSE, GENERLAC	55	55
(Lactulose) CONSTULOSE SOLN 10 GM/15ML	(Levonorgestrel & Eth Estradiol) AFIRMELLE, ALTAVERA, AUBRA EQ, AVIANE, AYUNA, CHATEAL EQ, DELYLA, FALMINA, KURVELO, LESSINA, LEVORA 0.15/30 (28), LUTERA, MARLISSA, ORSYTHIA, PORTIA-28, SRONYX, VIENVA TABS 30 MCG-0.15 MG	EUTHYROX, LEVO-T, LEVOXYL, UNITHROID TABS 25 MCG, 50 MCG, 75 MCG, 88 MCG, 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG
(Lamotrigine) SUBVENITE STARTER KIT-BLUE, SUBVENITE STARTER KIT-GREEN, SUBVENITE STARTER KIT-ORANGE KIT 25 MG 16	55	120
(Lamotrigine) SUBVENITE STARTER KIT-BLUE, SUBVENITE STARTER KIT-GREEN, SUBVENITE STARTER KIT-ORANGE KIT	(Levonorgestrel & Eth Estradiol) AFIRMELLE, ALTAVERA, AUBRA EQ, AVIANE, AYUNA, CHATEAL EQ, DELYLA, FALMINA, KURVELO, LESSINA, LEVORA 0.15/30 (28), LUTERA, MARLISSA, ORSYTHIA, PORTIA-28, SRONYX, VIENVA TABS 30 MCG-0.15 MG	EUTHYROX, LEVO-T, LEVOXYL, UNITHROID TABS
(Lamotrigine) SUBVENITE TABS . 16	55	120
(Lansoprazole) CVS LANSOPRAZOLE, EQ LANSOPRAZOLE, EQL LANSOPRAZOLE, FT ACID REDUCER, GNP LANSOPRAZOLE, GOODSENSE LANSOPRAZOLE, KLS LANSOPRAZOLE, SM LANSOPRAZOLE CPDR 15 MG .123	(Levonorgestrel (Emergency OC)) AFTERA, AFTERPILL, CURAE, ECONTRA EZ, ECONTRA ONE- STEP, HER STYLE, MY CHOICE, MY WAY, NEW DAY, OPCICON ONE-STEP, OPTION 2, REACT, TAKE ACTION 1.5 MG	(Lidocaine Hcl) BURN GEL, JELCAINE STERILE, REGENECARE HA, XEROBURN GEL 2 %
(Lansoprazole) CVS	58	71
	(Levonorgestrel-Eth Estradiol (Triphasic)) ENPRESSE-28, LEVONEST, TRIVORA (28)	(Lidocaine Hcl) GLYDO PRSY
	55	71
	(Levonorgestrel-Ethinyl Estradiol (91- Day)) AMETHIA, ASHLYNA, CAMRESE, CAMRESE LO, DAYSEE, FAYOSIM, ICLEVIA, DAYSEE, FAYOSIM, ICLEVIA,	(Lidocaine Hcl) LIDOPIN, LYDEXA, NEUROZYL, TRILOCAINE CREA 3 %
		71
		(Lidocaine Hcl) LIDO-SORB, ZIONODIL, ZIONODIL 100 LOTN .71
		(Lidocaine) LIDOCAN, TRIDACAIN II, TRIDACAIN III PTCH 5 %
		71
		(Lidocaine) PREMIUM LIDOCAINE OINT 5 %
		71
		(Loperamide Hcl) ANTI-DIARRHEAL,

CVS ANTI-DIARRHEAL, EQ ANTI-DIARRHEAL, FT ANTI-DIARRHEAL, GNP ANTI-DIARRHEAL, QC ANTI-DIARRHEAL CAPS	23	(Methenamine-Hyosc-Methylene Blue-Sod Phos-Phenyl Sal)	CVS EYE HEALTH & LUTEIN, CVS ONE DAILY ESSENTIAL, CVS ONE DAILY MENS FORMULA, CVS ONE DAILY WOMENS FORMULA, CVS SPECTRAVITE ADVANCED, CVS SPECTRAVITE MEN, CVS SPECTRAVITE MEN 50+, CVS SPECTRAVITE SENIOR, CVS SPECTRAVITE ULTRA MENS, CVS
(Lorazepam) LORAZEPAM INTENSOL CONC	11	(Methylergonovine Maleate) METHERGINE TABS	113
(Meclizine Hcl) CVS MOTION SICKNESS II, CVS MOTION SICKNESS LESS DROWS, DRAMAMINE, DRAMAMINE LESS DROWSY, EQL MOTION SICKNESS RELIEF, FT MOTION SICKNESS, GNP MOTION SICKNESS RELIEF, MEDI-MECLIZINE, MOTION SICKNESS RELIEF, SM MOTION SICKNESS, TRAVEL-EASE TABS 25 MG	24	(Methyltestosterone) METHITEST TABS	9
(Methadone Hcl) METHADONE HCL INTENSOL CONC	7	(Miconazole Nitrate Vaginal) MICONAZOLE 3 SUPP 200 MG .	127
(Methadone Hcl) METHADOSE TBSO	7	(Miglustat) YARGESA	81
(Methenamine-Hyosc-Methylene Blue-Benzoic Acid-Phenyl Sal) HYOPHEN	34	(Minocycline Hcl) COREMINO TB24 45 MG, 90 MG, 135 MG	120
(Methenamine-Hyosc-Methylene Blue-Sod Phos-Phenyl Sal) MB CAPS, URIBEL, URIMAR-T, URNEVA, URO-MP, URO-SP, USTELL, VILAMIT MB CAPS 118 MG	34	(Mometasone Furoate (Nasal)) ALLERGY NASAL SPRAY SUSP 108	
(Methenamine-Hyosc-Methylene Blue-Sod Phos-Phenyl Sal) MB CAPS, URIBEL, URIMAR-T, URNEVA, URO-MP, URO-SP, USTELL, VILAMIT MB CAPS 120 MG	34	(Morphine Sulfate) DURAMORPH SOLN IJ 0.5 MG/ML, 1 MG/ML	7
(Methenamine-Hyosc-Methylene Blue-Sod Phos-Phenyl Sal) MB CAPS, URIBEL, URIMAR-T, URNEVA, URO-MP, URO-SP, USTELL, VILAMIT MB CAPS 120 MG	34	(Multiple Vitamins W/ Minerals) A THRU Z ADVANCED, A THRU Z ADVANCED ADULT, A THRU Z HIGH POTENCY, A THRU Z SELECT, A THRU Z SELECT 50+ ADVANCED, A THRU Z SELECT 50+ MENS, A THRU Z SELECT ADVANCED, A THRU Z SELECT ULTIMATE WOMEN, A THRU Z ULTIMATE MENS, ANTIOXIDANT A/C/E/SELENIUM, ANTIOXIDANT PROTECTION FORMULA, ANTIOXIDANT VITAMINS, CENTAVITE A-Z COMPLETE-MINERAL, CENTRAVITES, CENTRAVITES 50 PLUS, CENTURY, CENTURY MATURE, CEROVITE SENIOR, CERTAVITE/ANTIOXIDANTS, COMPANION, COMPETE, CVS DAILY MULTIPLE FOR MEN, CVS DAILY MULTIPLE WOMEN 50+,	
(Methenamine-Hyosc-Methylene Blue-Sod Phos-Phenyl Sal) PHOSPHASAL, URELLE, URIN DS, URO-458, UTIRA-C, VILEVEV MB TABS 81 MG	34	DAILY MULTIPLE FOR WOMEN 50+,	

HAIR/SKIN/NAILS, HEALTHY EYES, HI-KOVITE 2-PART FORMULA, HI-POTENCY MULTI-VITAMIN, HM COMPLETE WOMEN, HM	HEALTHY WEIGHT ADV, ONE DAILY MAXIMUM, ONE DAILY MENS, ONE DAILY MENS 50+	THRU Z ADVANCED, A THRU Z ADVANCED ADULT, A THRU Z HIGH POTENCY, A THRU Z
WOMENS 50+ ADVANCED DAILY, I-VITE, ICAPS MV, KP ADULTS 50+ DAILY FORMULA, KP ADULTS	MULTIVIT, ONE DAILY MENS 50+/LYCOPENE, ONE DAILY MENS HEALTH, ONE DAILY	SELECT, A THRU Z SELECT 50+ ADVANCED, A THRU Z SELECT
DAILY FORMULA, KP MENS 50+ DAILY FORMULA, KP MENS DAILY FORMULA, KP VISION FORMULA, KP VISION FORMULA/LUTEIN, KP WOMENS 50+ DAILY FORMULA, KP WOMENS DAILY FORMULA, MACUVITE, MACUVITE EYE CARE, MACUVITE/LUTEIN, MAXIMUM	MULTIVIT/IRON-FREE, ONE DAILY MULTIVITAMIN MEN, ONE DAILY MULTIVITAMIN WOMEN, ONE DAILY WOMENS, ONE DAILY WOMENS 50 PLUS, ONE DAILY WOMENS 50+, ONE	ADVANCED, A THRU Z SELECT ULTIMATE WOMEN, A THRU Z ULTIMATE MENS, ANTIOXIDANT A/C/E/SELENIUM, ANTIOXIDANT PROTECTION FORMULA,
DAILY GREEN, MEIJER ADVANCED FORMULA, MENS LIFE PACK, MILLTRIUM ADVANCED FORMULA, MILLTRIUM CARDIO, MILLTRIUM SENIOR, MULTI COMPLETE/IRON, MULTI FOR HER, MULTI FOR HER 50+, MULTI FOR HIM, MULTI FOR HIM 50+, MULTI-LEAN, MULTI-VITAMIN MENOPAUSAL, MULTI-VITAMIN/MINERALS, MULTIPLE VIT/MINERALS/NO IRON, MULTIPLE VITAMINS/WOMENS, MULTIVITAMIN ADULTS, MULTIVITAMIN ADULTS 50+, MULTIVITAMIN MEN 50+, MULTIVITAMIN WOMEN, MULTIVITAMIN WOMEN 50+, MULTIVITAMIN WOMENS 50+ ADV, MYAMULTI, OCUTABS, OCUTABS-LUTEIN, OCUVITE EXTRA, OCUVITE EYE + MULTI, OCUVITE-LUTEIN, ONE DAILY 50 PLUS, ONE DAILY CALCIUM/IRON, ONE DAILY COMPLETE, ONE DAILY COMPLETE FOR MEN, ONE DAILY FOR MEN 50+ ADVANCED, ONE DAILY FOR MEN/LYCOPENE, ONE DAILY FOR WOMEN, ONE DAILY FOR WOMEN 50+ ADV, ONE DAILY	DAILY/MINERALS, ONE-A-DAY TEEN ADVANTAGE/HER, ONE-DAILY MULTI-VIT/MINERAL, OPTIC-VITES, OPTIC-VITES WITH LUTEIN, OPTIMUM PMS, OSTEOPRIME ULTRA, PROSIGHT, PX ADVANCED FORMULA MULTIVITS, PX COMPLETE SENIOR MULTIVITS, PX MENS MULTIVITAMINS, QC DAILY MULTIVIT/MULTIMINERAL, QC HAIR SKIN & NAILS, QC MENS DAILY MULTIVITAMIN, QC MULTIVITE, QC MULTI-VITE 50 & OVER, QC THERIN-M, QC WOMENS DAILY MULTIVITAMIN, QUINTABS-M, RA CENTRAL-VITE MENS MATURE, RA CENTRAL-VITE WOMENS MATURE, RA ONE DAILY MAXIMUM, RA ONE DAILY MENS 50+ W/VIT D3, RA ONE DAILY MENS MULTI, RA ONE DAILY MENS/VIT D-3, RENAPLEX, SENIOR TABS, SENTRY, SENTRY SENIOR, SM ANTIOXIDANT VITAMINS, SM COMPLETE, SM COMPLETE 50+, SM COMPLETE 50+ ULTIMATE MENS, SM COMPLETE 50+ ULTIMATE WOMEN, SM COMPLETE ADVANCED FORMULA, ... (38) TABS	SELECT 50+ MENS, A THRU Z SELECT ADVANCED, A THRU Z SELECT ULTIMATE WOMEN, A THRU Z ULTIMATE MENS, ANTIOXIDANT A/C/E/SELENIUM, ANTIOXIDANT PROTECTION FORMULA, ANTIOXIDANT VITAMINS, CENTAVITE A-Z COMPLETE-MINERAL, CENTRAVITES, CENTRAVITES 50 PLUS, CENTURY, CENTURY MATURE, CEROVITE SENIOR, CERTAVITE/ANTIOXIDANTS, COMPANION, COMPETE, CVS DAILY MULTIPLE FOR MEN, CVS DAILY MULTIPLE WOMEN 50+, CVS EYE HEALTH & LUTEIN, CVS ONE DAILY ESSENTIAL, CVS ONE DAILY MENS FORMULA, CVS ONE DAILY WOMENS FORMULA, CVS SPECTRAVITE ADVANCED, CVS SPECTRAVITE MEN, CVS SPECTRAVITE MEN 50+, CVS SPECTRAVITE SENIOR, CVS SPECTRAVITE ULTRA MENS, CVS SPECTRAVITE WOMEN, CVS SPECTRAVITE WOMEN 50+, CVS SPECTRAVITE WOMENS SENIOR, CVS WOMENS ACTIVE DAILY, DAILY BETIC, DAILY COMBO MULTI VITAMINS, DAILY MENS HEALTH FORMULA, DAILY MULTIPLE VITAMINS/MIN, DAILY WOMENS HEALTH FORMULA, DAILY-VITAMIN MAXIMUM FORMULA, DIABETES HEALTH FORMULA, DIALYVITE 800/ULTRA D, EQ COMPLETE MULTIVIT ADULT 50+, EQ ONE DAILY WOMENS HEALTH, EQL CENTURY, EQL CENTURY
HEALTHY WEIGHT, ONE DAILY	(Multiple Vitamins W/ Minerals) A	96

MATURE, EQL CENTURY MATURE MEN 50+, EQL CENTURY MATURE WOMEN 50+, EQL ONE DAILY MENS 50+ ADVANCE, EQL ONE DAILY MENS HEALTH, EQL ONE DAILY WOMENS 50+ ADV, EQL VISION FORMULA, ESSENTIA, ESSENTIAL BALANCE, EYE-VITES, GERIVITE COMPLETE, GNP CENTURY ADULT FORMULA, GNP CENTURY MATURE WOMEN'S 50+, GNP HAIR/SKIN/NAILS, GNP HEALTHY EYES, GNP MEGA MULTI FOR MEN, GNP MEGA MULTI FOR WOMEN, GNP ONE DAILY MENS HEALTH 50+, GNP ONE DAILY MENS/LYCOPENE, GNP ONE DAILY WOMENS, GNP ONE DAILY WOMENS 50+, GNP THERAPEUTIC-M, HAIR SKIN AND NAILS FORMULA, HAIR/SKIN/NAILS, HEALTHY EYES, HI-KOVITE 2-PART FORMULA, HI-POTENCY MULTI-VITAMIN, HM COMPLETE WOMEN, HM WOMENS 50+ ADVANCED DAILY, I-VITE, ICAPS MV, KP ADULTS 50+ DAILY FORMULA, KP ADULTS DAILY FORMULA, KP MENS 50+ DAILY FORMULA, KP MENS DAILY FORMULA, KP VISION FORMULA, KP VISION FORMULA/LUTEIN, KP WOMENS 50+ DAILY FORMULA, KP WOMENS DAILY FORMULA, MACUVITE, MACUVITE EYE CARE, MACUVITE/LUTEIN, MAXIMUM DAILY GREEN, MEIJER ADVANCED FORMULA, MENS LIFE PACK, MILLTRIUM ADVANCED FORMULA, MILLTRIUM CARDIO, MILLTRIUM SENIOR, MULTI COMPLETE/IRON, MULTI FOR HER, MULTI FOR HER 50+, MULTI FOR HIM, MULTI FOR HIM 50+, MULTI-LEAN, MULTI-VITAMIN MENOPAUSAL, MULTI-	VITAMIN/MINERALS, MULTIPLE VIT/MINERALS/NO IRON, MULTIPLE VITAMINS/WOMENS, MULTIVITAMIN ADULTS, MULTIVITAMIN ADULTS 50+, MULTIVITAMIN MEN 50+, MULTIVITAMIN WOMEN, MULTIVITAMIN WOMEN 50+, MULTIVITAMIN WOMENS 50+ ADV, MYAMULTI, OCUTABS, OCUTABS-LUTEIN, OCUVITE EXTRA, OCUVITE EYE + MULTI, OCUVITE-LUTEIN, ONE DAILY 50 PLUS, ONE DAILY CALCIUM/IRON, ONE DAILY COMPLETE, ONE DAILY COMPLETE FOR MEN, ONE DAILY FOR MEN 50+ ADVANCED, ONE DAILY FOR MEN/LYCOPENE, ONE DAILY FOR WOMEN, ONE DAILY FOR WOMEN 50+ ADV, ONE DAILY HEALTHY WEIGHT, ONE DAILY HEALTHY WEIGHT ADV, ONE DAILY MAXIMUM, ONE DAILY MENS, ONE DAILY MENS 50+/LYCOPENE, ONE DAILY MENS HEALTH, ONE DAILY MULTIVIT/IRON-FREE, ONE DAILY MULTIVITAMIN MEN, ONE DAILY MULTIVITAMIN WOMEN, ONE DAILY WOMENS, ONE DAILY WOMENS 50 PLUS, ONE DAILY WOMENS 50+, ONE DAILY/MINERALS, ONE-A-DAY TEEN ADVANTAGE/HER, ONE-DAILY MULTI-VIT/MINERAL, OPTIC-VITES, OPTIC-VITES WITH LUTEIN, OPTIMUM PMS, OSTEOPRIME ULTRA, PROSIGHT, PX ADVANCED FORMULA MULTIVITS, PX COMPLETE SENIOR MULTIVITS, PX MENS MULTIVITAMINS, QC DAILY MULTIVIT/MULTIMINERAL, QC HAIR SKIN & NAILS, QC MENS DAILY MULTIVITAMIN, QC MULTI-	VITE, QC MULTI-VITE 50 & OVER, QC THERIN-M, QC WOMENS DAILY MULTIVITAMIN, QUINTABS-M, RA CENTRAL-VITE MENS MATURE, RA CENTRAL-VITE WOMENS MATURE, RA ONE DAILY MAXIMUM, RA ONE DAILY MENS 50+ W/VIT D3, RA ONE DAILY MENS MULTI, RA ONE DAILY MENS/VIT D-3, RENAPLEX, SENIOR TABS, SENTRY, SENTRY SENIOR, SM ANTIOXIDANT VITAMINS, SM COMPLETE, SM COMPLETE 50+, SM COMPLETE 50+ ULTIMATE MENS, SM COMPLETE 50+ ULTIMATE WOMEN, SM COMPLETE ADVANCED FORMULA, ... (38) TABS
		97 (Multiple Vitamins W/ Minerals) A THRU Z ADVANCED, A THRU Z ADVANCED ADULT, A THRU Z HIGH POTENCY, A THRU Z SELECT, A THRU Z SELECT 50+ ADVANCED, A THRU Z SELECT 50+ MENS, A THRU Z SELECT ADVANCED, A THRU Z SELECT ULTIMATE WOMEN, A THRU Z ULTIMATE MENS, ANTIOXIDANT A/C/E/SELENIUM, ANTIOXIDANT PROTECTION FORMULA, ANTIOXIDANT VITAMINS, CENTAVITE A-Z COMPLETE-MINERAL, CENTRAVITES, CENTRAVITES 50 PLUS, CENTURY, CENTURY MATURE, CEROVITE SENIOR, CERTAVITE/ANTIOXIDANTS, COMPANION, COMPETE, CVS DAILY MULTIPLE FOR MEN, CVS DAILY MULTIPLE WOMEN 50+, CVS EYE HEALTH & LUTEIN, CVS ONE DAILY ESSENTIAL, CVS ONE DAILY MENS FORMULA, CVS ONE DAILY WOMENS FORMULA, CVS

SPECTRAVITE ADVANCED, CVS	WOMENS 50+ ADVANCED DAILY,	50+/LYCOPENE, ONE DAILY MENS
SPECTRAVITE MEN, CVS	I-VITE, ICAPS MV, KP ADULTS 50+	HEALTH, ONE DAILY
SPECTRAVITE MEN 50+, CVS	DAILY FORMULA, KP ADULTS	MULTIVIT/IRON-FREE, ONE DAILY
SPECTRAVITE SENIOR, CVS	DAILY FORMULA, KP MENS 50+	MULTIVITAMIN MEN, ONE DAILY
SPECTRAVITE ULTRA MENS, CVS	DAILY FORMULA, KP MENS DAILY	MULTIVITAMIN WOMEN, ONE
SPECTRAVITE WOMEN, CVS	FORMULA, KP VISION FORMULA,	DAILY WOMENS, ONE DAILY
SPECTRAVITE WOMEN 50+, CVS	KP VISION FORMULA/LUTEIN, KP	WOMENS 50 PLUS, ONE DAILY
SPECTRAVITE WOMENS SENIOR, CVS	WOMENS 50+ DAILY FORMULA,	WOMENS 50+, ONE
WOMENS ACTIVE DAILY, DAILY BETIC, DAILY COMBO	KP WOMENS DAILY FORMULA,	DAILY/MINERALS, ONE-A-DAY
MULTI VITAMINS, DAILY MENS	MACUVITE, MACUVITE EYE CARE,	TEEN ADVANTAGE/HER, ONE-
HEALTH FORMULA, DAILY MULTIPLE VITAMINS/MIN, DAILY	MACUVITE/LUTEIN, MAXIMUM	DAILY MULTI-VIT/MINERAL,
WOMENS HEALTH FORMULA, DAILY-VITAMIN MAXIMUM	DAILY GREEN, MEIJER	OPTIC-VITES, OPTIC-VITES WITH
FORMULA, DIABETES HEALTH	ADVANCED FORMULA, MENS LIFE	LUTEIN, OPTIMUM PMS,
FORMULA, DIALYVITE 800/ULTRA	PACK, MILLTRIUM ADVANCED	OSTEOPRIME ULTRA, PROSIGHT,
D, EQ COMPLETE MULTIVIT ADULT 50+, EQ ONE DAILY	FORMULA, MILLTRIUM CARDIO,	PX ADVANCED FORMULA
WOMENS HEALTH, EQL CENTURY, EQL CENTURY MATURE	MILLTRIUM SENIOR, MULTI	MULTIVITS, PX COMPLETE
MEN 50+, EQL CENTURY MATURE	COMPLETE/IRON, MULTI FOR	SENIOR MULTIVITS, PX MENS
WOMEN 50+, EQL ONE DAILY	HER, MULTI FOR HER 50+, MULTI	MULTIVITAMINS, QC DAILY
MENS 50+ ADVANCE, EQL ONE	FOR HIM, MULTI FOR HIM 50+,	MULTIVIT/MULTIMINERAL, QC
DAILY MENS HEALTH, EQL ONE	MULTI-LEAN, MULTI-VITAMIN	HAIR SKIN & NAILS, QC MENS
DAILY WOMENS 50+ ADV, EQL VISION FORMULA, ESSENTIA, ESSENTIAL BALANCE, EYE-VITES, GERIVITE COMPLETE, GNP	MENOPAUSAL, MULTI-VITAMIN/MINERALS, MULTIPLE	DAILY MULTIVITAMIN, QC MULTI-VITE, QC MULTI-VITE 50 & OVER,
CENTURY ADULT FORMULA, GNP	VIT/MINERALS/NO IRON,	QC THERIN-M, QC WOMENS
CENTURY MATURE WOMEN'S 50+, GNP HAIR/SKIN/NAILS, GNP	MULTIPLE VITAMINS/WOMENS,	DAILY MULTIVITAMIN, QUINTABS-M, RA CENTRAL-VITE MENS
HEALTHY EYES, GNP MEGA	MULTIVITAMIN ADULTS,	MATURE, RA CENTRAL-VITE
MULTI FOR MEN, GNP MEGA	MULTIVITAMIN ADULTS 50+,	WOMENS MATURE, RA ONE DAILY
MULTI FOR WOMEN, GNP ONE	MULTIVITAMIN MEN 50+,	MAXIMUM, RA ONE DAILY MENS
DAILY MENS HEALTH 50+, GNP	MULTIVITAMIN WOMEN,	50+ W/VIT D3, RA ONE DAILY
ONE DAILY MENS/LYCOPENE, GNP ONE DAILY WOMENS, GNP	MULTIVITAMIN WOMEN 50+,	MENS MULTI, RA ONE DAILY
ONE DAILY WOMENS 50+, GNP THERAPEUTIC-M, HAIR SKIN AND	MULTIVITAMIN WOMENS 50+ ADV,	MENS/VIT D-3, RENAPLEX,
NAILS FORMULA, HAIR/SKIN/NAILS, HEALTHY EYES, HI-KOVITE 2-PART FORMULA, HI-POTENCY MULTI-VITAMIN, HM	MYAMULTI, OCUTABS, OCUTABS-LUTEIN, OCUVITE EXTRA,	SENIOR TABS, SENTRY, SENTRY
COMPLETE WOMEN, HM	OCUVITE EYE + MULTI, OCUVITE-LUTEIN, ONE DAILY 50 PLUS, ONE	SENIOR, SM ANTIOXIDANT
	DAILY CALCIUM/IRON, ONE DAILY	VITAMINS, SM COMPLETE, SM
	COMPLETE, ONE DAILY	COMPLETE 50+, SM COMPLETE
	COMPLETE FOR MEN, ONE DAILY	50+ ULTIMATE MENS, SM
	FOR MEN 50+ ADVANCED, ONE	COMPLETE 50+ ULTIMATE
	DAILY FOR MEN/LYCOPENE, ONE	WOMEN, SM COMPLETE
	DAILY FOR WOMEN, ONE DAILY	ADVANCED FORMULA, ... (38)
	FOR WOMEN 50+ ADV, ONE DAILY	TABS 98
	HEALTHY WEIGHT, ONE DAILY	(Naproxen) EC-NAPROXEN TBEC .3
	HEALTHY WEIGHT ADV, ONE	(Neomycin-Bacitracin Zn-Polymyxin)
	DAILY MAXIMUM, ONE DAILY	NEO-POLYCIN 110
	MENS, ONE DAILY MENS 50+	(Nicotine Polacrilex) CVS NICOTINE,
	MULTIVIT, ONE DAILY MENS	

MG/24HR	118	MICROGESTIN FE 1/20, TARINA 24 FE, TARINA FE 1/20 EQ TABS 1.5 MG-30 MCG-75 MG	55	(Norethindrone & Eth Estradiol) ALYACEN 1/35, BALZIVA, BRIELLYN, DASSETTA 1/35 (28), NECON 0.5/35 (28), NORTREL 0.5/35 (28), NORTREL 1/35 (21), NORTREL 1/35 (28), NYLIA 1/35, PHILITH, PIRMELLA 1/35, VYFEMLA, WERA 35 MCG-1 MG .56
(Nicotine) CVS NICOTINE, EQ NICOTINE, EQ NICOTINE STEP 3, FT NICOTINE, GNP NICOTINE, HABITROL, HM NICOTINE, NICOTINE STEP 1, NICOTINE STEP 2, NICOTINE STEP 3, QC NICOTINE TRANSDERMAL SYSTEM, RA NICOTINE, SM NICOTINE PT24 TD 7 MG/24HR	118	(Norethin Acet & Estrad-Fe) AUROVELA 24 FE, AUROVELA FE 1.5/30, AUROVELA FE 1/20, BLISOVI 24 FE, BLISOVI FE 1.5/30, BLISOVI FE 1/20, FEIRZA 1.5/30, FEIRZA 1/20, HAILEY 24 FE, HAILEY FE 1.5/30, HAILEY FE 1/20, JUNEL FE 1.5/30, JUNEL FE 1/20, JUNEL FE 24, LARIN 24 FE, LARIN FE 1.5/30, LARIN FE 1/20, LOESTRIN FE 1.5/30, LOESTRIN FE 1/20, MICROGESTIN 24 FE, MICROGESTIN FE 1.5/30, MICROGESTIN FE 1/20, TARINA 24 FE, TARINA FE 1/20 EQ TABS 1 MG-20 MCG-75 MG	56	(Norethindrone & Ethinyl Estradiol- Fe) KAITLIB FE, LAYOLIS FE, WYMZYA FE 25 MCG-0.8 MG-75 MG
(Nitroglycerin) NITRO-TIME CPCR 2.5 MG, 9 MG	10	JUNEL FE 1.5/30, JUNEL FE 1/20, JUNEL FE 24, LARIN 24 FE, LARIN FE 1.5/30, LARIN FE 1/20, LOESTRIN FE 1.5/30, LOESTRIN FE 1/20, MICROGESTIN 24 FE, MICROGESTIN FE 1.5/30, MICROGESTIN FE 1/20, TARINA 24 FE, TARINA FE 1/20 EQ TABS ...	56	(Norethindrone & Ethinyl Estradiol- Fe) KAITLIB FE, LAYOLIS FE, WYMZYA FE 35 MCG-0.4 MG ....56
(Noregestromin-Ethinyl Estradiol) XULANE, ZAFEMY	58	(Norethin Acet & Estrad-Fe) CHARLOTTE 24 FE, FINZALA, MIBELAS 24 FE CHEW	56	(Norethindrone (Contraceptive)) CAMILA, DEBLITANE, EMZAHH, ERRIN, HEATHER, INCASSIA, JENCYCLA, LYLEQ, LYZA, NORABE, NORLYROC, SHAROBEL ....59
(Norethindrone & Eth Estradiol) AUROVELA 24 FE, AUROVELA FE 1.5/30, AUROVELA FE 1/20, BLISOVI 24 FE, BLISOVI FE 1.5/30, BLISOVI FE 1/20, FEIRZA 1.5/30, FEIRZA 1/20, HAILEY 24 FE, HAILEY FE 1.5/30, HAILEY FE 1/20, JUNEL FE 1.5/30, JUNEL FE 1/20, JUNEL FE 24, LARIN 24 FE, LARIN FE 1.5/30, LARIN FE 1/20, LOESTRIN FE 1.5/30, LOESTRIN FE 1/20, MICROGESTIN 24 FE, MICROGESTIN FE 1.5/30, MICROGESTIN FE 1/20, TARINA 24 FE, TARINA FE 1/20 EQ TABS 1 MG-20 MCG-75 MG	56	(Norethindrone Acet & Eth Estra) AUROVELA 1.5/30, AUROVELA 1/20, HAILEY 1.5/30, JUNEL 1.5/30, JUNEL 1/20, LARIN 1.5/30, LARIN 1/20, LOESTRIN 1.5/30 (21), LOESTRIN 1/20 (21), MICROGESTIN 1.5/30, MICROGESTIN 1/20 TABS 1 MG-20 MCG		
(Norethindrone & Eth Estradiol) AUROVELA 24 FE, AUROVELA FE 1.5/30, AUROVELA FE 1/20, BLISOVI 24 FE, BLISOVI FE 1.5/30, BLISOVI FE 1/20, FEIRZA 1.5/30, FEIRZA 1/20, HAILEY 24 FE, HAILEY FE 1.5/30, HAILEY FE 1/20, JUNEL FE 1.5/30, JUNEL FE 1/20, JUNEL FE 24, LARIN 24 FE, LARIN FE 1.5/30, LARIN FE 1/20, LOESTRIN FE 1.5/30, LOESTRIN FE 1/20, MICROGESTIN 24 FE, MICROGESTIN FE 1.5/30,	56	(Norethindrone Acet & Eth Estra) AUROVELA 1.5/30, AUROVELA 1/20, HAILEY 1.5/30, JUNEL 1.5/30, JUNEL 1/20, LARIN 1.5/30, LARIN 1/20, LOESTRIN 1.5/30 (21), LOESTRIN 1/20 (21), MICROGESTIN 1.5/30, MICROGESTIN 1/20 TABS 1.5 MG- 30 MCG		
(Norethindrone & Eth Estradiol) AUROVELA 24 FE, AUROVELA FE 1.5/30, AUROVELA FE 1/20, BLISOVI 24 FE, BLISOVI FE 1.5/30, BLISOVI FE 1/20, FEIRZA 1.5/30, FEIRZA 1/20, HAILEY 24 FE, HAILEY FE 1.5/30, HAILEY FE 1/20, JUNEL FE 1.5/30, JUNEL FE 1/20, JUNEL FE 24, LARIN 24 FE, LARIN FE 1.5/30, LARIN FE 1/20, LOESTRIN FE 1.5/30, LOESTRIN FE 1/20, MICROGESTIN 24 FE, MICROGESTIN FE 1.5/30,	56	(Norethindrone Acetate) GALLIFREY TABS		
(Norethindrone Acetate-Ethinyl Estradiol) FYAVOLV, JINTELI	77	VYFEMLA, WERA 35 MCG-0.5 MG 56	114	

(Norethindrone Acetate-Ethiny Estradiol) FYAVOLV, JINTELI 1 MG- 5 MCG	ALLERGY ITCH/RED RELIEF 0.1 % . 111	MG/ML-10 MG/ML-5 UNIT/ML ... 104
(Norethindrone Acetate-Ethiny Estradiol-Fe) TILIA FE, TRI-LEGEST FE, XARAH FE	(Omeprazole Magnesium) ACID REDUCER, CVS OMEPRAZOLE MAGNESIUM, EQ OMEPRAZOLE MAGNESIUM, GNP OMEPRAZOLE, KP OMEPRAZOLE MAGNESIUM, QC OMEPRAZOLE MAGNESIUM CPDR 20 MG	(Pediatric Multivitamins W/FI) MULTIVITAMIN/FLUORIDE CHEW 104
(Norethindrone-Eth Estradiol (Triphasic)) ALYACEN 7/7/7, ARANELLE, DASETTA 7/7/7, LEENA, NORTREL 7/7/7, NYLIA 7/7/7, PIRMELLA 7/7/7	MAGNESIUM, GNP OMEPRAZOLE, KP OMEPRAZOLE MAGNESIUM, QC OMEPRAZOLE MAGNESIUM CPDR 20 MG	(Pediatric Multivitamins W/FI) MULTIVITAMIN/FLUORIDE SOLN 104
(Norgestimate-Ethiny Estradiol (Triphasic)) TRI-ESTARYLLA, TRI- LINYAH, TRI-LO-ESTARYLLA, TRI- LO-MARZIA, TRI-LO-MILI, TRI-LO- SPRINTEC, TRI-MILI, TRI-NYMYO, TRI-PREVIFEM, TRI-SPRINTEC, TRI-VYLIBRA, TRI-VYLIBRA LO ..	(Omeprazole Magnesium) ACID REDUCER, CVS OMEPRAZOLE MAGNESIUM, EQ OMEPRAZOLE MAGNESIUM, GNP OMEPRAZOLE, KP OMEPRAZOLE MAGNESIUM, QC OMEPRAZOLE MAGNESIUM CPDR	(Pediatric Vitamins ACD W/ Fluoride) TRI-VITE/FLUORIDE SOLN .....104
(Norgestimate-Ethiny Estradiol) ESTARYLLA, MILI, MONO-LINYAH, NYMYO, PREVIFEM, SPRINTEC 28, VYLIBRA	(Orphenadrine W/ Aspirin & Caff) NORGESIC, ORPHENGESIC FORTE 385 MG-30 MG-25 MG ..	(PEG 3350-Kcl-NaCl-Na Sulfate-Na Ascorbate-Ascorbic Acid) PEG- 3350/ELECTROLYTES/ASCORBAT.....84
(Norgestrel & Ethiny Estradiol) CRYSELLE-28, ELINEST, LOW- OGESTREL, TURQOZ 30 MCG-0.3 MG	107 (Oxycodone W/ Acetaminophen) ENDOCET TABS 325 MG-10 MG, 325 MG-2.5 MG, 325 MG-5 MG, 325 MG-7.5 MG	(PEG 3350-Kcl-Sod Bicarb-Sod Chloride-Sod Sulfate) GAVILYTE-C SOLR 240 GM
(Olopatadine Hcl) CVS OLOPATADINE HCL, EQ OLOPATADINE HCL, EYE ALLERGY ITCH RELIEF, FT EYE ALLERGY ITCH RELIEF, GNP OLOPATADINE HCL, HM EYE ALLERGY ITCH RELIEF, QC OLOPATADINE HCL, RETAINE ALLERGY, SM OLOPATADINE HCL 0.2 %	MULTIVITAMIN/FLUORIDE/IRON SOLN 35 MG/ML-0.4 MG/ML-0.5 MG/ML-400 UNIT/ML-1500 UNIT/ML-8 MG/ML-0.6 MG/ML-0.25 MG/ML-5 UNIT/ML-10 MG/ML ... 104 (Ped Multivitamins W/FI & Iron) MULTI-VIT/IRON/FLUORIDE, MULTIVITAMIN/FLUORIDE/IRON SOLN 35 MG/ML-0.4 MG/ML-0.5 MG/ML-400 UNIT/ML-1500 UNIT/ML-8 MG/ML-5 UNIT/ML-0.6 MG/ML-0.25 MG/ML-10 MG/ML ..104 (Ped Multivitamins W/FI & Iron) MULTI-VITAMIN/FLUORIDE/IRON SOLN 35 MG/ML-0.4 MG/ML-0.5 MG/ML-400 UNIT/ML-1500 UNIT/ML-0.6 MG/ML-8 MG/ML-0.25	(PEG 3350-Potassium Chloride-Sod Bicarbonate-Sod Chloride) GAVILYTE-N WITH FLAVOR PACK 84 (Penicillin G Potassium) PFIZERPEN 5000000 UNIT, 20000000 UNIT ..114 (Phenylephrine Hcl (Mydriatic)) ALTAFRIN SOLN
(Olopatadine Hcl) CVS OLOPATADINE HCL, EQ OLOPATADINE HCL, EYE ALLERGY ITCH/REDNESS REL, FT EYE ALLERGY ITCH & REDNESS, GNP OLOPATADINE HCL, HM EYE	MULTIVITAMIN/FLUORIDE/IRON SOLN 35 MG/ML-0.4 MG/ML-0.5 MG/ML-400 UNIT/ML-1500 UNIT/ML-0.6 MG/ML-8 MG/ML-0.25	109 (Phenytoin Sodium Extended) PHENYTEK 200 MG, 300 MG ....18 (Phenytoin) PHENYTOIN INFATABS CHEW
		18 (Polyethylene Glycol 3350) CLEARLAX, CVS PURELAX, EQ CLEARLAX, EQL CLEARLAX, FT CLEARLAX, GAVILAX, GENTLELAX, GLYCOLAX, GNP CLEARLAX, GOODSENSE CLEARLAX, HM CLEARLAX, KLS LAXACLEAR, MM CLEARLAX, QC

NATURA-LAX, RA LAXATIVE, SB	(Prednisolone) MILLIPRED TABS .59	(Sodium Chloride (GU Irrigant))
POLYETHYLENE GLYCOL 3350, SM CLEARLAX, SMOOTH LAX,	(Prenatal Vit W/ Docusate-Iron Carbonyl-Folic Acid) INATAL GT	ARGYLE STERILE SALINE, CURITY STERILE SALINE 0.9 %80
TRUE LAXATIVE POWD .....85	TABS .....104	
(Pot & Sod Citrates W/Citric Ac) CYTRA-3 SYRP .....80	(Prenatal Vit W/ Ferrous Fumarate- Folic Acid) PRENATAL 19 CHEW	(Sodium Chloride (Inhalant))
(Pot Phosphate Monobasic W/ Sod Phosphate Dibasic & Monobasic)	104	NEBUSAL, PULMOSAL NEBU 3 %
PHOSPHA 250 NEUTRAL,	(Prenatal Vit W/ Ferrous Fumarate-L Methylfolate-Folic Acid) PNV-	61
PHOSPHO-TRIN 250 NEUTRAL,	SELECT .....105	(Sodium Chloride (Inhalant))
WES-PHOS 250 NEUTRAL .....92	(Prenatal Vit W/ Iron Carbonyl-Folic Acid) PRENATABS RX TABS 120	NEBUSAL, PULMOSAL NEBU 7 %
(Potassium Bicarbonate) EFFER-K, K-PRIME, KLOR-CON/EF TBEF ..92	MG-3 MG-30 MCG-1 MG-400 UNIT- 8 MCG-3 MG-20 MG-7 MG-3 MG- 100 MG-15 MG-3 MG-4000 UNIT- 200 MG-150 MCG-30 UNIT-29 MG	61
(Potassium Chloride Microencapsulated Crystals ER) KLOR-CON M10, KLOR-CON M15, KLOR-CON M20 10 MEQ .....92	105	(Sodium Citrate & Citric Acid)
(Potassium Chloride Microencapsulated Crystals ER) KLOR-CON M10, KLOR-CON M15, KLOR-CON M20 15 MEQ .....93	(Prenatal Without A W/ Fe Fumarate- L Methylfolate-FA-DHA) PNV-DHA	CYTRA-2 .....80
(Potassium Chloride Microencapsulated Crystals ER) KLOR-CON M10, KLOR-CON M15, KLOR-CON M20 20 MEQ .....93	105	(Sodium Fluoride) FLUORITAB
(Potassium Chloride KLOR-CON PACK PO 20 MEQ .....93	(Prochlorperazine) COMPRO .....46	SOLN 0.125 MG/DROP .....92
(Potassium Chloride) KLOR-CON, KLOR-CON 10 TBCR 10 MEQ ....93	(Promethazine & Phenylephrine) PROMETHAZINE VC SYRP .....60	(Sodium Fluoride) NAFRINSE CHEW 2.2 MG .....92
(Potassium Chloride) KLOR-CON, KLOR-CON 10 TBCR 8 MEQ .....93	(Promethazine Hcl) PROMETHEGAN SUPP .....29	(Sodium Polystyrene Sulfonate)
(Potassium Chloride) CYTRA K CRYSTALS PACK ..80	(Promethazine-Phenylephrine- Codeine) PROMETHAZINE VC/CODEINE .....60	KIONEX, SPS (SODIUM POLYSTYRENE SULF) SUSP CO 15 GM/60ML .....95
(Potassium Citrate-Citric Acid) CYTRA-K SOLN .....80	(Ringer's Irrigation) TIS-U-SOL ...94	(Sotalol Hcl) SORINE TABS .....51
(Potassium Phosphate Monobasic) PHOSPHO-TRIN K500 TABS .....92	(Salicylic Acid) KERALYT SHAM 6 %70	(Sulfacetamide Sodium W/ Sulfur) AVAR-E EMOLlient, AVAR-E GREEN, SSS 10-5 CREA 10 %-5 % .
(Pramoxine-HC-Chloroxylenol) CORTIC-ND .....112	(Salicylic Acid) SALICYLIC ACID WART REMOVER LIQD 27.5 % ...70	61
	(Sapropterin Dihydrochloride) JAVYGTOR PACK .....75	(Sulfacetamide Sodium W/ Sulfur) BP 10-1, SULFAMEZ WASH EMUL 10 %-1 %61
	(Sapropterin Dihydrochloride) JAVYGTOR TABS .....75	(Sulfacetamide Sodium W/ Sulfur) SSS 10-5 FOAM .....61
	(Silver Sulfadiazine) SSD .....66	(Sulfacetamide Sodium W/ Sulfur) SULFACEANSE 8/4 SUSP 8 %-4 %61
		(Sulfacetamide Sodium-Sulfur In Urea Vehicle) BP CLEANSING WASH EMUL 10 %-10 %-4 %61
		(Sulfamethoxazole-TriMetoprim) SULFATRIM PEDIATRIC SUSP ..34
		(Tadalafil (Pulmonary Hypertension))

ALYQ TABS	52	(Vigabatrin) VIGADRONE, VIGPODER PACK	17	acamprosate calcium	115
(Testosterone Cypionate) DEPO- TESTOSTERONE SOLN IM 100 MG/ML	9	(Vincristine Sulfate) VINCASAR PFS 1 MG/ML	44	acarbose	20
(Testosterone Cypionate) DEPO- TESTOSTERONE SOLN IM 200 MG/ML	9	(Warfarin Sodium) JANTOVEN TABS	14	ACCOLATE (zaflurkast)	12
(Tetracaine Hcl (Ophth)) ALTACAINE	110	(Water For Irrigation, Sterile) ARGYLE STERILE WATER	94	ACCUPRIL (quinapril hcl)	31
(Theophylline) ELIXOPHYLLIN ELIX 14		(Zinc Sulfate) ORAZINC CAPS	93	ACCURETIC (quinapril- hydrochlorothiazide)	32
(Timolol Maleate (Ophth)) TIMOLOL MALEATE OCUDOSE SOLN 0.5 % 109		(Zolmitriptan) ZOMIG TABS	90	acebutolol hcl CAPS	50
(Tiopronin) VENXXIVA TBEC	80	abacavir sulfate SOLN	47	acetaminophen w/ codeine SOLN ..	8
(Tretinoin) AVITA CREA 0.025 % .	61	abacavir sulfate TABS	47	acetaminophen w/ codeine TABS 15 MG-300 MG, 30 MG-300 MG, 60 MG-300 MG	8
(Tretinoin) AVITA GEL 0.025 % ...	61	abacavir sulfate-lamivudine	47	acetazolamide CP12	73
(Triamcinolone Acetonide (Mouth)) KOURZEQ, ORALONE	95	ABC COMPLETE ADULT TABS ..	98	acetazolamide TABS	73
(Triamcinolone Acetonide (Topical)) TRIANEX, TRITOCIN OINT 0.05 % 67		ABC COMPLETE MENS TABS ...	98	acetic acid (otic)	112
(Triamcinolone Acetonide (Topical)) TRIDERM CREA 0.1 %, 0.5 %	67	ABC COMPLETE SENIOR 50+ TABS	98	acetylcysteine SOLN	61
(Urea) CEROVEL LOTN 40 %	69	ABC COMPLETE SENIOR MENS 50+ TABS	98	acitretin	65
(Urea) DERMACINRX UREA, UREDEB, UREMEZ-40, XUREA CREA 39 %	70	ABC COMPLETE SENIOR WOMENS 50+ TABS	98	ACTHIB SOLR IM	125
(Urea) DERMACINRX UREA, UREDEB, UREMEZ-40, XUREA CREA 41 %	70	ABC COMPLETE WOMENS TABS 98		ACTIDOM DMX LIQD	60
(Urea) GORDONS UREA CREA 40 %	70	ABECMA	39	ACTIMMUNE 100 MCG/0.5ML	43
(Urea) UMECTA MOUSSE FOAM .	70	ABELCET	24	ACTIQ LPOP (fentanyl citrate)	7
(Urea) UREA NAIL GEL 45 % ..	70	ABILIFY TABS (ariPIPrazole)	47	ACTIVELLA TABS 1 MG-0.5 MG (estradiol & norethindrone acetate)	
(Vigabatrin) VIGADRONE TABS ..	17	abiraterone acetate	39	77	
		ABRAXANE (paclitaxel protein- bound particles)	44	ACTONEL TABS 150 MG (risedronate sodium)	74
		ABSORICA 10 MG, 20 MG, 30 MG, 40 MG (isotretinoin)	61	ACTONEL TABS 35 MG (risedronate sodium)	74
		ABSORICA 25 MG, 35 MG (isotretinoin)	61	ACTOPLUS MET TABS 850 MG-15 MG (pioglitazone hcl-metformin hcl) 20	
		ACTOS (pioglitazone hcl)	22		
		ACULAR (ketorolac tromethamine (ophth))	111		

ACULAR LS (ketorolac tromethamine (ophth))	111	salmeterol)	13	hydrochlorothiazide)	73
ACUVAIL	111	ADVANCED DIABETIC MULTIVITAMIN TABS	98	ALDACTONE TABS (spironolactone)	74
acyclovir CAPS	50	ADVOCATE INSULIN SYRINGE .	88	ALDURAZYME	75
acyclovir SUSP	50	AFINITOR DISPERZ TBSO (everolimus)	41	ALECENSA	41
acyclovir TABS PO	50	AFINITOR TABS (everolimus) ..	41	alendronate sodium SOLN	74
acyclovir topical CREA	66	AFLURIA PRESERVATIVE FREE SUSY	125	alendronate sodium TABS 35 MG, 70 MG	74
acyclovir topical OINT	66	AFLURIA QUADRIVALENT SUSP 125	.....	alendronate sodium TABS 5 MG, 10 MG	74
ACZONE 5 % (dapsone (topical)) .	62	AFLURIA QUADRIVALENT SUSY 0.5 ML	125	ALFERON N	43
ACZONE 7.5 % (dapsone (topical)) 61		AFLURIA SUSP	125	alfuzosin hcl	80
ADACEL SUSP	121	AGRYLIN 0.5 MG (anagrelide hcl)	81	ALGAE BASED CALCIUM TABS .	98
ADALIMUMAB-ADAZ SOAJ 40 MG/0.4ML	3	AIMSCO LUBRICATED MISC ..	86	ALIMTA SOLR (pemetrexed disodium)	37
ADALIMUMAB-ADAZ SOSY 40 MG/0.4ML	3	AJOVY SOAJ	90	ALINIA SUSR	34
adapalene CREA	62	AJOVY SOSY	90	ALINIA TABS (nitazoxanide)	34
adapalene GEL	62	AKEEGA	39	aliskiren fumarate	33
adapalene-benzoyl peroxide GEL 2.5 %-0.1 %	62	AKTEN	110	ALIVE CALCIUM BONE SUPPORT TABS	98
ADCETRIS	38	AKYNZEO	24	ALIVE DAILY ENERGY TABS ..	98
ADCIRCA TABS (tadalafil (pulmonary hypertension))	52	ALADERM PLUS EMUL	71	ALIVE DIABETIC MULTIVITAMIN TABS	98
ADDERALL TABS (amphetamine- dextroamphetamine)	1	albendazole	10	ALIVE ENERGY 50+ TABS	98
ADDERALL XR CP24 (amphetamine-dextroamphetamine) . 1		albuterol sulfate AERS	13	ALIVE GARDEN GOODNESS TABS 98	
adefovir dipivoxil	49	albuterol sulfate NEBU	13	ALIVE MENS 50+ TABS	98
ADEMPAS	53	ALBUTEROL SULFATE NEBU ..	13	ALIVE MENS 50+ ULTRA TABS ..	98
ADSTILADRIN	39	albuterol sulfate SYRP	13	ALIVE MENS COMPLETE MULTI TABS	98
ADTHYZA TABS	120	albuterol sulfate TABS	13	ALIVE MENS ULTRA TABS	98
ADVAIR DISKUS AEPB (fluticasone- salmeterol)	13	ALCAINE (proparacaine hcl) ..	110	ALIVE ONCE DAILY WOMENS TABS	98
		alclometasone dipropionate CREA	67		
		alclometasone dipropionate OINT	67		
		ALDACTAZIDE (spironolactone &			

ALIVE ULTRA POTENCY ADULT TABS	98	ALYMSYS	38	hydrochlorothiazide	32
ALIVE ULTRA POTENCY WOMENS 50+ TABS	98	amantadine hcl CAPS	45	amoxapine	20
ALIVE WOMENS 50+ COMPLETE MV TABS	98	amantadine hcl TABS	45	amoxicillin & pot clavulanate CHEW	114
ALIVE WOMENS ENERGY TABS	98	AMARYL (glimepiride)	22	amoxicillin & pot clavulanate SUSR	114
ALKERAN (melphalan)	36	AMBIEN CR TBCR (zolpidem tartrate)	83	amoxicillin & pot clavulanate TABS	114
ALKERAN IV (melphalan hcl)	36	AMBIEN TABS (zolpidem tartrate)	83	amoxicillin & pot clavulanate TB12	114
allopurinol 100 MG, 300 MG	81	AMBISOME (amphotericin b liposome)	24	amoxicillin CAPS	113
almotriptan malate	90	ambrisentan	52	amoxicillin CHEW 125 MG, 250 MG	113
ALOCRIL	111	amcinonide CREA	67	AMOXICILLIN SUSR (amoxicillin)	113
ALOMIDE	111	amcinonide LOTN	67	amoxicillin SUSR	113
alosetron hcl	79	amcinonide OINT	67	amoxicillin TABS	113
ALPHA BETIC TABS	98	AMICAR TABS (aminocaproic acid)	83	amoxicillin-clarithromycin w/ lansoprazole THPK	124
ALPHAGAN P (brimonidine tartrate)	109	amikacin sulfate SOLN 1 GM/4ML	2	amphetamine-dextroamphetamine CP24 5 MG, 10 MG, 15 MG, 20 MG, 25 MG, 30 MG	1
ALPRAZOLAM INTENSOL CONC	11	amiloride & hydrochlorothiazide	73	amphetamine-dextroamphetamine TABS	1
alprazolam TABS	11	amiloride hcl TABS	74	amphotericin b IV	24
alprazolam TB24	11	aminocaproic acid TABS	83	amphotericin b liposome	24
alprazolam TBDP	11	aminophylline SOLN	14	ampicillin & sulbactam sodium IV 1 GM-0.5 GM, 10 GM-5 GM	114
ALREX SUSP (loteprednol etabonate)	110	amiodarone hcl TABS	11	ampicillin CAPS 500 MG	113
ALTABAX	63	AMITIZA (lubiprostone)	78	ampicillin sodium IJ 1 GM, 125 MG	113
ALTACE CAPS 1.25 MG, 2.5 MG, 5 MG (ramipril)	31	amitriptyline hcl TABS	20	ampicillin sodium IV 10 GM	113
ALTACE CAPS 10 MG (ramipril)	31	amlodipine besylate TABS	51	AMPYRA (dalfampridine)	116
ALTOPREV TB24 20 MG, 40 MG, 60 MG	30	amlodipine besylate-atorvastatin calcium	52	AMRIX CP24 (cyclobenzaprine hcl)	
ALUNBRIG TABS	41	amlodipine besylate-benazepril hcl	32		
ALUNBRIG TBPK	41	amlodipine besylate-olmesartan medoxomil	32		
alvimopan	79	amlodipine besylate-valsartan	32		
		amlodipine-valsartan-			

107	apraclonidine hcl	110	AROMASIN (exemestane)	
AMTAGVI .....	.39	aprepitant CAPS 40 MG	24	ARRANON (nelarabine)
ANAFRANIL (clomipramine hcl) ..	20	aprepitant CAPS 80 MG, 125 MG .	24	arsenic trioxide 12 MG/6ML
anagrelide hcl	81	aprepitant CAPS	24	ARTHROTEC TBEC (diclofenac w/
ANALPRAM-HC CREA EX 1 %-1 % (hydrocortisone acetate w/ pramoxine)	10	aprepitant MISC	24	misoprostol)
ANALPRAM-HC LOTN EX	10	APTIOM 200 MG, 400 MG, 600 MG .	16	ARZERRA
ANAPROX DS TABS (naproxen sodium)	3	APTIOM 800 MG	16	ASCRIPIN TABS
ANASPAZ TBDP (hyoscyamine sulfate)	121	APTIVUS CAPS	47	asenapine maleate
anastrozole	39	AQ INSULIN SYRINGE	88	ASPARLAS
ANCOBON (flucytosine)	24	ARALAST NP SOLR 1000 MG ...	119	aspirin CHEW
ANDROGEL PUMP GEL TD (testosterone)	9	ARANESP (ALBUMIN FREE) SOLN .	82	aspirin TABS 325 MG
ANGELIQ	77	ARANESP (ALBUMIN FREE) SOSY .	82	aspirin TBEC 325 MG
ANKTIVA	43	ARAVA 10 MG (leflunomide)	5	aspirin TBEC 81 MG
ANNOVERA	58	ARAVA 20 MG (leflunomide)	5	aspirin-dipyridamole
ANORO ELLIPTA	13	ARCALYST	3	ASSURE ID INSULIN SAFETY SYR
ANTARA 90 MG (fenofibrate micronized)	30	arformoterol tartrate	13	88
ANTIOXIDANT FORMULA TABS .	98	ARICEPT TABS (donepezil hydrochloride)	115	ASTAGRAF XL CP24
ANTIVERT TABS 50 MG (meclizine hcl)	24	ARIKAYCE	2	105
ANUSOL-HC EX (hydrocortisone (rectal))	10	ARIMIDEX (anastrozole)	39	ATABEX EC TBEC
ANZEMET TABS 50 MG	23	ariPIPRAZOLE SOLN PO	47	ATABEX OB
APEXICON E CREA	67	ariPIPRAZOLE TABS	47	ATACAND (candesartan cilexetil) .
APIDRA SOLN	21	ariPIPRAZOLE TBDP	47	31
APIDRA SOLOSTAR SOPN	21	ARIXTRA (fondaparinux sodium) .	14	ATACAND HCT (candesartan cilexetil-hydrochlorothiazide)
APLENZIN	18	armodafinil 200 MG	1	32
APO-VARENICLINE TABS	118	armodafinil 50 MG, 150 MG, 250 MG		atazanavir sulfate CAPS
		1		47
		ARMOUR THYROID TABS	120	ATELVIA TBEC (risedronate sodium)
				74
		ARNURITY ELLIPTA	12	atenolol & chlorthalidone
				32
		ATGAM		atenolol TABS
				50
		ATIVAN TABS (lorazepam)	11	
				atomoxetine hcl 10 MG, 18 MG, 25
		atomoxetine hcl 60 MG, 80 MG, 100		MG, 40 MG
				1

MG	1	(irbesartan)	31	azithromycin TABS 500 MG	85
atorvastatin calcium TABS 10 MG, 20 MG	30	AVAR LS CLEANSER LIQD (sulfacetamide sodium w/ sulfur) ..	62	azithromycin TABS 600 MG	85
atorvastatin calcium TABS 40 MG, 80 MG	30	AVAR-E LS CREA (sulfacetamide sodium w/ sulfur) ..	62	AZO HORMONAL HEALTH CYCLE CARE TABS	98
atovaquone	34	AVASTIN	38	AZO HORMONAL HEALTH HAPPY CYCL TABS	98
atovaquone-proguanil hcl	35	AVODART (dutasteride)	80	AZOPT (brinzolamide)	112
ATRALIN GEL (tretinoin)	62	AVONEX PEN AJKT	116	AZOR (amlodipine besylate-olmesartan medoxomil)	32
atropine sulfate (ophthalmic) SOLN 109		AVONEX PREFILLED PSKT	116	AZULFIDINE EN-TABS TBEC (sulfasalazine)	79
ATROPINE SULFATE SOLN 1 % (atropine sulfate (ophthalmic)) ...	109	AYGESTIN TABS (norethindrone acetate)	114	AZULFIDINE TABS (sulfasalazine) 79	
ATROPINE SULFATE SOLN 1 % 109		AYVAKIT 100 MG, 200 MG, 300 MG 40		BABY DDROPS LIQD PO	128
atropine sulfate SOLN IJ 0.4 MG/ML, 1 MG/ML	121	AYVAKIT 25 MG, 50 MG	40	bacitracin (ophthalmic)	110
ATROVENT HFA	12	azacitidine SUSR	37	bacitracin	33
AUBAGIO (teriflunomide)	116	AZASITE	110	bacitracin-polymyxin b (ophth) ...	110
AUCATZYL	39	AZATHIOPRINE SODIUM	94	bacitracin-poly-neomycin-hc	110
AUGMENTIN ES-600 SUSR (amoxicillin & pot clavulanate) ...	114	azathioprine TABS	94	baclofen SOLN IT 10 MG/20ML ..	107
AUGMENTIN SUSR 31.25 MG/5ML-125 MG/5ML	114	AZEDRA DOSIMETRIC	43	baclofen TABS	107
AUGMENTIN TABS 125 MG-500 MG (amoxicillin & pot clavulanate) ...	114	AZEDRA THERAPEUTIC	43	BACMIN TABS	98
AUGTYRO	41	azelaic acid GEL	71	BACTRIM DS TABS (sulfamethoxazole-trimethoprim) ..	34
AURANOFIN 3 MG	3	azelastine hcl (ophth)	111	BACTRIM TABS (sulfamethoxazole-trimethoprim)	34
AUSTEDO TABS	115	azelastine hcl 0.1 %, 137 MCG/SPRAY	108	BALCOLTRA (levonorgestrel-ethinyl estradiol-iron)	57
AUSTEDO XR PATIENT TITRATION TEPK	115	azelastine hcl 0.15 %, 205.5 MCG/SPRAY	108	balsalazide disodium CAPS	79
AUSTEDO XR TB24	115	azelastine hcl-fluticasone propionate SUSP	107	BALVERSA	41
AVALIDE (irbesartan-hydrochlorothiazide)	32	AZILECT (rasagiline mesylate) ...	45	BANZEL SUSP (rufinamide)	16
AVAPRO 150 MG, 300 MG		azithromycin PACK	85	BANZEL TABS (rufinamide)	16
		azithromycin SUSR	85	BAQSIMI ONE PACK POWD	21
		azithromycin TABS 250 MG	85	BAQSIMI TWO PACK POWD	21

BARACLUDE TABS (entecavir) ...	50	BD VEO INSULIN SYRINGE U/F .88	BEPREVE (bepotastine besilate) 112
BARIATRIC MULTIVITAMINS TABS . 99		BECONASE AQ .....108	BESIVANCE .....110
		BELBUCA FILM .....9	BESPONSA .....38
BASIC AM TABS .....99		BELEODAQ .....41	BESREMI .....43
BASIC PM TABS .....99		BELLADONNA ALKALOIDS-OPIUM	BETADINE OPHTHALMIC PREP 110
BAVENCIO .....38		.....121	betaine .....75
BAXDELA TABS .....78		BELRAPZO SOLN .....36	betamethasone dipropionate (topical)
BD AUTOSHIELD .....88		BELSOMRA .....84	CREA .....67
BD AUTOSHIELD DUO .....88		BENADRYL ALLERGY CHILDRENS LIQD (diphenhydramine hcl) .....27	betamethasone dipropionate (topical)
BD INSULIN SYR ULTRAFINE II ..88		benazepril & hydrochlorothiazide .32	LOTN .....67
BD INSULIN SYRINGE .....88		benazepril hcl .....31	betamethasone dipropionate (topical)
BD INSULIN SYRINGE HALF-UNIT . 88		BENDAMUSTINE HCL SOLN .....36	OINT .....67
BD INSULIN SYRINGE MICROFINE ..88		bendamustine hcl SOLR .....36	betamethasone dipropionate augmented CREA .....67
BD INSULIN SYRINGE U/F .....88		BENDEKA SOLN .....36	betamethasone dipropionate augmented GEL 0.05 %67
BD INSULIN SYRINGE U/F 1/2UNIT ..88		BENICAR HCT (olmesartan medoxomil-hydrochlorothiazide) ..32	betamethasone dipropionate augmented LOTN .....67
BD INSULIN SYRINGE ULTRAFINE ..88		BENLYSTA SOAJ .....95	betamethasone dipropionate augmented OINT .....67
BD PEN NEEDLE MICRO U/F ....88		BENLYSTA SOLR 120 MG .....95	betamethasone valerate CREA ...67
BD PEN NEEDLE MINI U/F .....88		BENLYSTA SOSY .....95	betamethasone valerate FOAM ...67
BD PEN NEEDLE NANO 2ND GEN ..88		BENSAL HP OINT .....70	betamethasone valerate LOTN ....67
BD PEN NEEDLE NANO U/F .....88		BENZAMYCIN GEL (benzoyl peroxide-erythromycin) .....62	betamethasone valerate OINT ....67
BD PEN NEEDLE ORIGINAL U/F 88		BENZEPRO CREAMY WASH LIQD . 62	BETAPACE AF (sotalol hcl (afib/afl)) .....51
BD PEN NEEDLE SHORT U/F ...88		BENZNIDAZOLE .....10	BETAPACE TABS 80 MG, 120 MG, 160 MG (sotalol hcl) .....51
BD SAFETYGLIDE INSULIN SYRINGE ..88		benzonatate .....60	BETASERON KIT .....116
BD SAFETY-LOK INSULIN SYRINGE .....88		benzoyl peroxide-erythromycin GEL . 62	betaxolol hcl (ophth) SOLN .....109
BD VEO INSULIN SYR U/F 1/2UNIT ..88		benztropine mesylate SOLN .....44	betaxolol hcl .....50
		benztropine mesylate TABS .....44	bethanechol chloride .....125
		bepotastine besilate .....112	

BETHKIS NEBU (tobramycin)	2	BORTEZOMIB SOLR IJ 1 MG, 2.5 MG	41	budesonide (inhalation) SUSP 1 MG/2ML	12
BETIMOL (timolol)	109	bortezomib SOLR IJ	41	budesonide (intrarectal)	9
BETIMOL 0.25 %	109	BORUZU SOLN IJ	41	budesonide (nasal)	108
BETOPTIC-S SUSP	109	bosentan TABS	52	budesonide CPEP	59
bexarotene (topical)	65	BOSULIF CAPS	41	budesonide TB24	59
bexarotene	43	BOSULIF TABS	41	budesonide-formoterol fumarate dihydrate	13
BEXSERO	125	BRAUTOVI 75 MG	41	bumetanide TABS	73
BEYAZ (drospirenone-ethinyl estradiol-levomefolate calcium)	57	BREO ELLIPTA 50 MCG/INH-25 MCG/INH	13	BUMEX TABS 0.5 MG (bumetanide) ..	73
bicalutamide	39	BREYANZI	39	BUPHENYL POWD (sodium phenylbutyrate)	75
BICILLIN C-R	114	BREZTRI AEROSPHERE	13	BUPHENYL TABS (sodium phenylbutyrate)	75
BICILLIN C-R 900/300	114	BRILINTA	81	BUPRENEX SOLN (buprenorphine hcl)	9
BICILLIN L-A SUSY	114	brimonidine tartrate (topical)	71	buprenorphine hcl SOLN	9
BIDIL (isosorbide dinitrate-hydralazine hcl)	52	brimonidine tartrate	110	buprenorphine hcl SUBL	9
BIKTARVY 200 MG-50 MG-25 MG 47		brimonidine tartrate-timolol maleate ..		buprenorphine hcl-naloxone hcl dihydrate FILM SL	9
BILTRICIDE (praziquantel)	10	brinzolamide	112	buprenorphine hcl-naloxone hcl dihydrate SUBL	9
bimatoprost SOLN	112	BRIXADI (WEEKLY) SOSY	9	buprenorphine PTWK	9
BINOSTO TBEF	74	BRIXADI SOSY 64 MG/0.18ML, 96 MG/0.27ML, 128 MG/0.36ML	9	bupropion hcl (smoking deterrent) 118	
BIO-DTUSS DMX LIQD	60	bromfenac sodium (ophth)	112	bupropion hcl TABS	18
bisoprolol & hydrochlorothiazide ..	32	bromocriptine mesylate CAPS	45	bupropion hcl TB12	18
bisoprolol fumarate	50	bromocriptine mesylate TABS 2.5 MG	45	bupropion hcl TB24 150 MG, 300 MG	18
BIVIGAM SOLN 5 GM/50ML	113	BROMSITE (bromfenac sodium (ophth))	112	bupropion hcl TB24 450 MG	18
BLENREP	38	BROVANA (arformoterol tartrate) ..	13	buspirone hcl	11
BLINCYTO	38	BRUKINSA	41	busulfan SOLN	36
BONEUP VEGETARIAN TABS	99	budesonide (inhalation) SUSP 0.25 MG/2ML	12		
BONJESTA TBCR	24	budesonide (inhalation) SUSP 0.5 MG/2ML	12		
BOOSTRIX SUSP	121				
BOOSTRIX SUSY	121				
BORTEZOMIB SOLN IV	41				

BUSULFEX SOLN (busulfan)	36	calcipotriene-betamethasone dipropionate OINT	67	CARAFATE TABS (sucralfate) ...	123
butalbital-acetaminophen TABS 50 MG-300 MG, 50 MG-325 MG	5	calcipotriene-betamethasone dipropionate SUSP	67	carbamazepine CHEW 100 MG ...	16
butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-300 MG, 40 MG-50 MG-325 MG	5	calcitonin (salmon) IJ	74	carbamazepine CP12	16
butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG	5	calcitonin (salmon) NA	74	carbamazepine SUSP	16
butalbital-acetaminophen-caffeine w/ codeine	8	calcitriol (topical)	65	carbamazepine TABS	16
butalbital-aspirin-caffeine CAPS	5	calcitriol CAPS	75	carbamazepine TB12	16
butalbital-aspirin-caffeine w/cod ...	8	calcitriol SOLN IV	75	CARBATROL CP12 (carbamazepine)	16
butorphanol tartrate NA 10 MG/ML .	9	calcitriol SOLN PO	75	carbidopa	44
BUTTRANS PTWK (buprenorphine) .	9	calcium acetate (phosphate binder) CAPS	79	carbidopa-levodopa TABS	45
BYSTOLIC (nebivolol hcl)	50	CAL-DAY 1000 TABS	99	carbidopa-levodopa TBCR	45
cabergoline	76	CALQUENCE	41	carbidopa-levodopa TBDP	45
CABLIVI	81	CAMBIA (diclofenac potassium (migraine))	90	carbinoxamine maleate SOLN	27
CABOMETYX TABS	41	CAMCEVI	39	carbinoxamine maleate TABS 4 MG . 27	
CADUET 10 MG-10 MG, 10 MG-20 MG, 10 MG-40 MG, 10 MG-80 MG, 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG (amlodipine besylate-atorvastatin calcium)	52	CAMPTOSAR (irinotecan hcl)	44	carboplatin SOLN 50 MG/5ML, 150 MG/15ML, 450 MG/45ML, 600 MG/60ML, 1000 MG/100ML	36
CAFERGOT TABS (ergotamine w/ caffeine)	90	CANASA SUPP (mesalamine)	79	CARDIZEM CD CP24 (diltiazem hcl coated beads)	51
caffeine citrate SOLN PO	1	CANCIDAS (caspofungin acetate) 24		CARDIZEM LA TB24 (diltiazem hcl) 51	
CALAN SR TBCR (verapamil hcl) .	51	candesartan cilexetil	31	CARDIZEM TABS 30 MG, 60 MG, 120 MG (diltiazem hcl)	51
CALCIFOL	92	candesartan cilexetil- hydrochlorothiazide	32	CARDURA (doxazosin mesylate) .	32
calcipotriene CREA	65	capecitabine	37	CARDURA XL	80
calcipotriene FOAM	65	CAPEX SHAM	67	CAREONE INSULIN SYRINGE ...	88
CALCIPOTRIENE FOAM	65	CAPLYTA	45	CARETOUCH INSULIN SYRINGE 88	
calcipotriene OINT	65	CAPRELSA	41	carisoprodol TABS	107
calcipotriene SOLN	65	captopril & hydrochlorothiazide ...	32	CARMUSTINE	36
		captopril	31	CARNITOR SF SOLN PO	
		CARAC CREA	65		
		CARAFATE SUSP (sucralfate) ...	123		

(levocarnitine (metabolic modifiers))		CEFEPIME HCL SOLN 1 GM/50ML .	hydrobromide)	19
75		54		
CARNITOR SOLN PO 1 GM/10ML		cefepime hcl SOLR IV 2 GM	CELLCEPT CAPS (mycophenolate	
(levocarnitine (metabolic modifiers))		54	mofetil)	94
75		CEFEPI-MEXTROSE 5 %-2	CELLCEPT INTRAVENOUS	
CARNITOR TABS (levocarnitine		GM/50ML	(mycophenolate mofetil hcl)	94
(metabolic modifiers))	75	54		
carteolol hcl (ophth)	109	cefixime CAPS	CELLCEPT SUSR (mycophenolate	
carvedilol 3.125 MG	50	53	mofetil)	94
carvedilol 6.25 MG, 12.5 MG, 25 MG	50	cefixime SUSR	CELLCEPT TABS (mycophenolate	
carvedilol phosphate	50	53	mofetil)	94
CARVYKTI	39	CEFOTAN IJ (cefotetan disodium) 53	CELONTIN (methylsuximide)	18
CASODEX (bicalutamide)	39	CEFOTAXIME SODIUM IJ 1 GM, 2	CEM-UREA SOLN	70
caspofungin acetate	24	GM	CENTANY AT KIT	63
CASPOFUNGIN ACETATE	24	53	CENTRAVITES 50 PLUS TABS ...	99
CATAPRES-TTS-1 PTWK (clonidine)	32	ceftetan disodium IJ 1 GM, 2 GM 53	CENTRAVITES ADULTS TABS ...	99
.....	32	cefoxitin sodium IV 1 GM, 2 GM ...53	CENTRUM ADULTS TABS (multiple	
CATAPRES-TTS-2 PTWK (clonidine)	32	CEFOXITIN SODIUM-DEXTROSE	vitamins w/ minerals)	99
.....	32	53	CENTRUM CARDIO TABS	99
CATAPRES-TTS-3 PTWK (clonidine)	32	cefpodoxime proxetil SUSR	CENTRUM MEN TABS (multiple	
.....	32	53	vitamins w/ minerals)	99
cefaclor CAPS	53	cefpodoxime proxetil TABS	CENTRUM MEN TABS	99
CEFACLOR ER TB12	53	53	CENTRUM MINIS ADULTS 50+	
cefaclor SUSR 125 MG/5ML, 250		cefpodoxime axetil TABS	TABS	99
MG/5ML, 375 MG/5ML	53	53	CENTRUM MINIS MEN 50+ TABS	
cefadroxil CAPS	53	cefuroxime sodium IJ 750 MG ..53	99	
cefadroxil SUSR	53	CELEBREX 400 MG (celecoxib) ....3	CENTRUM MINIS WOMEN 50+	
cefadroxil TABS	53	CELEBREX 50 MG, 100 MG, 200	TABS	99
cefaezolin sodium SOLR IJ 1 GM, 10		MG (celecoxib)	CENTRUM MINIS WOMEN IMMUNE	
GM, 500 MG	53	3	SUP TABS	99
cefdinir CAPS	53	celecoxib 400 MG	CENTRUM SILVER 50+MEN TABS	
cefdinir SUSR	53	3	(multiple vitamins w/ minerals) ....99	
cefdinir		celecoxib 50 MG, 100 MG, 200 MG 4	CENTRUM SILVER 50+WOMEN	
		CELEXA TABS 10 MG (citalopram	TABS (multiple vitamins w/ minerals)	
		hydrobromide)	99	
		19	CENTRUM SILVER ADULT 50+	
		CELEXA TABS 20 MG (citalopram	TABS (multiple vitamins w/ minerals)	
		hydrobromide)	99	
		19	CENTRUM SILVER 40 MG (citalopram	

99	CHANTIX STARTING MONTH PAK	ciclopirox olamine CREA
CENTRUM SILVER TABS (multiple vitamins w/ minerals)	TBPK (varenicline tartrate)	63
99	CHEMET	ciclopirox olamine SUSP
CENTRUM SILVER ULTRA WOMENS TABS	CHENODAL	64
99	chloramphenicol sodium succinate	ciclopirox SHAM
CENTRUM SILVER WOMEN 50+ TABS (multiple vitamins w/ minerals)	34	64
99	chlordiazepoxide hcl CAPS	cidofovir
CENTRUM SPECIALIST HEART TABS	chlordiazepoxide hcl-clidinium bromide	49
99	chlordiazepoxide-amitriptyline	cilostazol
CENTRUM SPECIALIST IMMUNE TABS	chlorhexidine gluconate (mouth-throat)	81
99	chloroquine phosphate TABS	CILOXAN OINT
CENTRUM SPECIALIST VISION TABS	chlorpromazine hcl TABS	110
99	chlorthalidone 25 MG, 50 MG	CILOXAN SOLN (ciprofloxacin hcl (ophth))
CENTRUM ULTRA WOMENS TABS 99	chlorzoxazone TABS	110
cephalexin CAPS	CHOLBAM	cimetidine hcl PO 300 MG/5ML
53	cholecalciferol CAPS 1.25 MG, 50000 UNIT	122
53	cholecalciferol CAPS 10 MCG, 400 UNIT	cimetidine TABS
CERACADE EMUL	cholecalciferol CHEW 400 UNIT	122
71	cholecalciferol LIQD PO 10 MCG/ML, 400 UNIT/ML	cinacalcet hcl
CERDELGA	cholecalciferol TABS 10 MCG, 400 UNIT	112
81	cholestyramine light PACK	CIPRO HC
CEREBYX 100 MG PE/2ML (fosphenytoin sodium)	30	CIPRO SUSR
18	cholestyramine light POWD	112
CEREZYME 400 UNIT	cholestyramine PACK	CIPRO TABS 250 MG, 500 MG (ciprofloxacin hcl)
81	cholestyramine POWD	78
CERTAVITE SENIOR TABS	choline fenofibrate	CIPRODEX (ciprofloxacin-dexamethasone)
99	CIALIS 2.5 MG, 5 MG (tadalafil)	112
CERTAVITE SENIOR/ANTIOXIDANT TABS	cetirizine hcl SOLN	ciprofloxacin hcl (ophth) SOLN
99	cevimeline hcl	110
cetirizine hcl SOLN PO	29	ciprofloxacin hcl (otic)
CETRAXAL (ciprofloxacin hcl (otic)) . 112	CETRAXAL (ciprofloxacin hcl (otic))	112
95	ciclopirox GEL	ciprofloxacin hcl TABS
		78
		ciprofloxacin SUSR
		78
		ciprofloxacin-dexamethasone
		112
		ciprofloxacin-fluocinolone acetonide ..
		113
		cisplatin SOLN 50 MG/50ML, 100 MG/100ML, 200 MG/200ML
		36
		CISPLATIN SOLR
		36
		citalopram hydrobromide SOLN
		19
		citalopram hydrobromide TABS 10 MG
		19
		citalopram hydrobromide TABS 20 MG
		19

citalopram hydrobromide TABS 40 MG	19	CLEOCIN CREA (clindamycin phosphate vaginal)	127	clindamycin phosphate-benzoyl peroxide (refrigerate)	62
CITRACAL +D3 TABS	99	CLEOCIN PHOSPHATE SOLN IJ 900 MG/6ML (clindamycin phosphate)	35	clindamycin phosphate-benzoyl peroxide GEL 5 %-1 %	62
CITRANATAL 90 DHA 120 MG-20 MG-1 MG-3 MG-400 UNIT-3.4 MG-20 MG-50 MG-25 MG-2 MG-159 MG-90 MG-150 MCG-30 UNIT-0.75 MG-300 MG	105	CLEOCIN SUPP	127	clindamycin phosphate-tretinoin ..	62
CITRANATAL ASSURE	105	CLEOCIN-T LOTN (clindamycin phosphate (topical))	62	CLINDESSE	127
CITRANATAL B-CALM 120 MG-25 MG-1 MG-400 UNIT-120 MG-20 MG 105		CLIMARA PRO	77	clobazam SUSP	15
CITRANATAL BLOOM	105	CLIMARA PTWK 0.025 MG/24HR, 0.0375 MG/24HR, 0.06 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (estradiol)	77	clobazam TABS	15
CITRANATAL DHA	105	CLINDACIN ETZ	62	clobetasol propionate CREA 0.05 % . 67	
CITRANATAL HARMONY 25 MG-1 MG-400 UNIT-50 MG-104 MG-27 MG-30 UNIT-260 MG	105	CLINDACIN PAC	62	clobetasol propionate emollient base 0.05 %	67
CITRANATAL MEDLEY	105	CLINDAGEL GEL (clindamycin phosphate (topical))	62	clobetasol propionate emulsion ..	67
cladribine 10 MG/10ML	37	clindamycin hcl	35	clobetasol propionate FOAM	67
CLARINEX TABS (desloratadine) ..	29	clindamycin palmitate hydrochloride ..	35	clobetasol propionate GEL 0.05 % 67	
CLARINEX-D 12 HOUR TB12	60	clindamycin phosphate (topical) FOAM	62	clobetasol propionate LIQD	67
clarithromycin SUSR	85	clindamycin phosphate (topical) GEL 62		clobetasol propionate LOTN	68
clarithromycin TABS	85	clindamycin phosphate (topical) LOTN	62	clobetasol propionate OINT 0.05 % 68	
clarithromycin TB24	85	clindamycin phosphate (topical) SOLN	62	clobetasol propionate SHAM	68
clemastine fumarate SYRP	27	clindamycin phosphate (topical) SWAB	62	clobetasol propionate SOLN 0.05 % . 68	
clemastine fumarate TABS 2.68 MG . 27		clindamycin phosphate in d5w	35	CLOBEX LOTN 0.05 % (clobetasol propionate)	68
CLENPIQ SOLN 12 GM/160ML-3.5 GM/160ML-10 MG/160ML	84	clindamycin phosphate SOLN IJ 900 MG/6ML	35	CLOBEX SHAM (clobetasol propionate)	68
CLENPIQ SOLN 12 GM/175ML-3.5 GM/175ML-10 MG/175ML	84	clindamycin phosphate vaginal CREA	127	CLOBEX SPRAY LIQD (clobetasol propionate)	68
CLEOCIN (clindamycin hcl)	35			clocortolone pivalate	68
CLEOCIN (clindamycin palmitate hydrochloride)	35			CLODERM (clocortolone pivalate) 68	
				clofarabine	37
				CLOLAR (clofarabine)	37

clomiphene citrate TABS	75	COLESTID FLAVORED PACK (colestipol hcl)	30	CONZIP CP24 (tramadol hcl)	7
clomipramine hcl	20	COLESTID GRAN (colestipol hcl) ..	30	COPIKTRA	41
clonazepam TABS	15	COLESTID PACK (colestipol hcl) ..	30	CORDRAN CREA (flurandrenolide)	
clonazepam TBDP	15	COLESTID TABS (colestipol hcl) ..	30	CORDRAN TAPE	68
clonidine hcl (adhd) TB12	1	colestipol hcl GRAN	30	COREG 3.125 MG (carvedilol) ..	50
clonidine hcl TABS	32	colestipol hcl PACK	30	COREG 6.25 MG, 12.5 MG, 25 MG (carvedilol)	50
clonidine PTWK	32	colestipol hcl TABS	30	COREG CR (carvedilol phosphate)	
clonidine TB24	32	COLUMVI	38	50	
clopidogrel bisulfate	81	COMBIGAN (brimonidine tartrate- timolol maleate)	109	CORGARD TABS 20 MG, 40 MG (nadolol)	51
clorazepate dipotassium TABS	11	COMBIPATCH PTTW	77	CORLANOR SOLN	53
clotrimazole (topical) SOLN	64	COMBIVENT RESPIMAT AERS ..	13	CORLANOR TABS (ivabradine hcl)	
clotrimazole	95	47		53	
clotrimazole w/ betamethasone CREA	64	COMETRIQ (100 MG DAILY DOSE) KIT	41	CORTANE-B	68
clotrimazole w/ betamethasone LOTN	64	COMETRIQ (140 MG DAILY DOSE) KIT	41	CORTEF TABS (hydrocortisone) ..	59
clozapine TABS	46	COMETRIQ (60 MG DAILY DOSE) KIT	41	CORTENEMA (hydrocortisone (intrarectal))	9
clozapine TBDP	46	COMFORT ASSIST INSULIN SYRINGE	88	CORTIFOAM EX 10 %	9
CLOZARIL TABS (clozapine)	46	COMFORT EZ INSULIN SYRINGE ..		CORTISPORIN-TC	113
C-NATE DHA CAPS	105	88		COSELA	43
COARTEM	35	COMIRNATY SUSP	125	COSENTYX (300 MG DOSE) SOSY ..	
codeine sulfate TABS	7	COMIRNATY SUSY	125	65	
CODITUSSIN AC LIQD	60	COMPLERA	47	COSENTYX SENSOREADY (300 MG) SOAJ	65
COLAZAL CAPS (balsalazide disodium)	79	COMPLETENATE CHEW	105	COSENTYX SENSOREADY PEN SOAJ	65
colchicine CAPS	81	COMTAN (entacapone)	44	COSENTYX SOSY	65
colchicine w/ probenecid	81	CONCEPT DHA	105	COSOPT (dorzolamide hcl-timolol maleate)	109
colesevelam hcl PACK	30	CONCEPT OB	105	COSOPT PF (dorzolamide hcl- timolol maleate)	109
colesevelam hcl TABS	30	CONDYLOX GEL (podofilox) ..	70	COTELLIC	41
COLESTID FLAVORED GRAN (colestipol hcl)	30				

COZAAR (losartan potassium)	32	cyclobenzaprine hcl CP24	107	CYSTARAN	112
CREON CPEP	73	cyclobenzaprine hcl TABS	107	cytarabine SOLN	37
CRESEMBA CAPS 186 MG	25	CYCLOGYL (cyclopentolate hcl)	109	CYTOMEL TABS (liothyronine sodium)	120
CRESTOR TABS 5 MG, 10 MG (rosuvastatin calcium)	30	CYCLOGYL	109	CYTOTEC (misoprostol)	124
CRINONE GEL	127	CYCLOMYDRIL	109	dabigatran etexilate mesylate CAPS .	
cromolyn sodium (mastocytosis) ..	78	cyclopentolate hcl	109	15	
cromolyn sodium (ophth)	112	cyclophosphamide CAPS	36	dalfampridine	116
cromolyn sodium NEBU	12	CYCLOPHOSPHAMIDE SOLN (cyclophosphamide)	36	DALIRESP (roflumilast)	12
CRYODOSE TA	71	cyclophosphamide SOLN	36	danazol CAPS	9
CTEXLI 250 MG	78	CYCLOPHOSPHAMIDE SOLN	36	DANTRIUM CAPS 25 MG (dantrolene sodium)	107
CUBICIN RF (daptomycin)	34	cyclophosphamide SOLR IJ	36	dantrolene sodium CAPS	107
CUPRIMINE CAPS (penicillamine) 93		CYCLOPHOSPHAMIDE TABS	37	DANYELZA	38
CUVITRU SOLN 1 GM/5ML, 10 GM/50ML	113	cycloserine	36	DANZITEN	41
CUVPOSA SOLN PO (glycopyrrolate)	121	CYCLOSET	21	dapagliflozin propanediol	22
CVS DAILY MULTIV/MINERAL MENS TABS	99	cyclosporine (ophth) EMUL	110	dapagliflozin propanediol-metformin hcl 1000 MG-10 MG	20
CVS ONE DAILY MENS 50+ ADV TABS	99	cyclosporine CAPS	94	dapagliflozin propanediol-metformin hcl 1000 MG-5 MG	20
CVS ONE DAILY WOMENS 50+ ADV TABS	99	cyclosporine modified (for microemulsion) CAPS	94	dapsone (topical) 5 %	62
CVS SPECTRAVITE ADULT 50+ TABS	99	cyclosporine modified (for microemulsion) SOLN	94	dapsone (topical) 7.5 %	62
CVS SPECTRAVITE ADULTS TABS 99		cyclosporine SOLN IV 50 MG/ML .	94	dapsone	35
CVS SPECTRAVITE ULTRA MEN 50+ TABS	99	CYKLOKAPRON SOLN (tranexamic acid)	83	DAPTACEL	121
CVS SPECTRAVITE ULTRA MENS TABS	99	CYMBALTA CPEP (duloxetine hcl) 19		daptomycin 500 MG	34
CVS SPECTRAVITE ULTRA WOMEN TABS	99	cyproheptadine hcl SYRP	29	DAPTONYCIN 500 MG	34
		cyproheptadine hcl TABS	29	darifenacin hydrobromide	124
		CYRAMZA	38	darunavir TABS 600 MG	47
		CYSTADANE (betaine)	76	darunavir TABS 800 MG	47
		CYSTADROPS	112	DARZALEX	38
		CYSTAGON CAPS	80	DARZALEX FASPRO	41
				dasatinib	41

DAUNORUBICIN HCL SOLN (daunorubicin hcl)	41	DEPO-ESTRADIOL	77	desonide CREA	68
daunorubicin hcl SOLN	41	DEPO-PROVERA SUSP IM (medroxyprogesterone acetate (contraceptive))	59	desonide GEL	68
DAURISMO	39	DEPO-PROVERA SUSY IM (medroxyprogesterone acetate (contraceptive))	59	desonide LOTN	68
DAYAVITE TABS	100	DEPO-SUBQ PROVERA 104 SUSY SC	59	desonide OINT	68
DAYPRO TABS (oxaprozin)	4	DERMACINRX MULTITAM TABS 100		DESOWEN CREA (desonide)	68
DAYTRANA PTCH (methylphenidate)	1	DERMACINRX RIBOTIN-E TABS 100		desoximetasone CREA	68
DDAVP TABS (desmopressin acetate)	76	DERMACINRX ZINTREXYL-C TABS 100		desoximetasone GEL	68
DEBACTEROL	95	DERMA-SMOOTH/FS BODY OIL (fluocinolone acetonide)	68	desoximetasone LIQD	68
decitabine	37	DERMA-SMOOTH/FS SCALP OIL (fluocinolone acetonide)	68	desoximetasone OINT	68
deferasirox PACK	23	DERMAVITE TABS	100	DESOXYN (methamphetamine hcl) . 1	
deferasirox TABS	23	DERMOTIC (fluocinolone acetonide (otic))	113	DESVENLAFAKINE ER	19
deferasirox TBSO	23	DESCOVY 200 MG-25 MG	47	desvenlafaxine succinate	19
deferiprone TABS	23	desipramine hcl TABS	20	DETROL LA CP24 (tolterodine tartrate)	124
DELESTROGEN (estradiol valerate) 77		desloratadine TABS	29	DETROL TABS 1 MG (tolterodine tartrate)	124
DELSTRIGO	47	desloratadine TBDP	29	DETROL TABS 2 MG (tolterodine tartrate)	124
demeocycline hcl TABS	120	DESMOPRESSIN ACETATE SOLN NA	76	dexamethasone ELIX	59
DEM SER (metyrosine)	31	desmopressin acetate spray	76	DEXAMETHASONE INTENSOL CONC	59
DENAVIR (penciclovir)	66	desmopressin acetate spray refrigerated 0.01 %	76	dexamethasone sodium phosphate (ophth)	111
DENGVAXIA	125	desmopressin acetate TABS	76	dexamethasone sodium phosphate SOLN IJ	59
DEPAKOTE ER TB24 (divalproex sodium)	18	desogestrel & ethinyl estradiol	57	DEXAMETHASONE SODIUM PHOSPHATE SOLN IJ	59
DEPAKOTE SPRINKLES CSDR (divalproex sodium)	18	desogestrel-ethinyl estradiol (biphasic)	57	dexamethasone sodium phosphate SOSY IJ 4 MG/ML	59
DEPAKOTE TBEC (divalproex sodium)	18			dexamethasone SOLN	59
DEPEN TITRATABS TABS (penicillamine)	93			dexamethasone TABS	59
DEPLIN 15	72			dexamethasone TBPK	59

DEXCOM G6 RECEIVER	87	diazepam (anticonvulsant) GEL ...	15	DIFFERIN LOTN	62
DEXCOM G6 SENSOR	87	diazepam CONC	11	DIFICID SUSR	85
DEXCOM G6 TRANSMITTER	87	diazepam SOLN PO 5 MG/5ML ...	11	DIFICID TABS	86
DEXCOM G7 RECEIVER	87	diazepam TABS	11	diflorasone diacetate CREA	68
DEXCOM G7 SENSOR	87	diazoxide	21	diflorasone diacetate OINT	68
DEXEDRINE CP24 10 MG, 15 MG (dextroamphetamine sulfate)	1	DIBENZYLINE (phenoxybenzamine hcl)	31	DIFLUCAN SUSR (fluconazole) ...	25
DEXILANT (dexlansoprazole) ...	123	dichlorphenamide	73	DIFLUCAN TABS 100 MG, 150 MG, 200 MG (fluconazole)	25
dexlansoprazole	123	DICLEGIS TBEC (doxylamine- pyridoxine)	24	diflunisal TABS	7
dexmethylphenidate hcl CP24 25 MG	1	diclofenac epolamine PTCH EX ...	65	diluprednate	111
dexmethylphenidate hcl CP24 5 MG, 10 MG, 15 MG, 20 MG, 30 MG, 35 MG, 40 MG	1	diclofenac potassium (migraine) ...	90	digoxin SOLN PO 0.05 MG/ML ...	52
dexmethylphenidate hcl TABS	1	diclofenac potassium CAPS	4	digoxin TABS 62.5 MCG, 125 MCG, 250 MCG	52
dexrazoxane hcl	43	diclofenac potassium TABS 50 MG .	4	dihydroergotamine mesylate SOLN IJ 1 MG/ML	90
dextroamphetamine sulfate CP24 ...	1	diclofenac sodium (actinic keratoses) EX	65	dihydroergotamine mesylate SOLN NA 4 MG/ML	90
dextroamphetamine sulfate SOLN ..	1	diclofenac sodium (ophth)	112	DILANTIN (phenytoin sodium extended)	18
dextroamphetamine sulfate TABS 2.5 MG, 5 MG, 7.5 MG, 10 MG	1	diclofenac sodium (topical) GEL EX 65		DILANTIN 30 MG	18
DHIVY TABS	45	diclofenac sodium (topical) SOLN EX 1.5 %	65	DILANTIN INFATABS CHEW (phenytoin)	18
DIACOMIT CAPS 250 MG	16	diclofenac sodium (topical) SOLN EX 2 %	65	DILANTIN SUSP (phenytoin)	18
DIACOMIT CAPS 500 MG	16	diclofenac sodium TB24	4	DILANTIN-125 SUSP (phenytoin) ..	18
DIACOMIT PACK 250 MG	16	diclofenac sodium TBEC	4	DILAUDID LIQD (hydromorphone hcl)	7
DIACOMIT PACK 500 MG	16	diclofenac w/ misoprostol TBEC	4	DILAUDID TABS (hydromorphone hcl)	7
DIALYVITE SUPREME D TABS .	100	dicloxacillin sodium	114	diltiazem hcl coated beads CP24 ..	51
DIAPHRAGMS	86	dicyclomine hcl CAPS	121	diltiazem hcl CP12	51
DIASTAT ACUDIAL GEL (diazepam (anticonvulsant))	15	dicyclomine hcl SOLN PO	121	diltiazem hcl CP24	51
DIASTAT PEDIATRIC GEL (diazepam (anticonvulsant))	15	dicyclomine hcl TABS	121	diltiazem hcl extended release beads	51
DIATROL TABS	100	DIFFERIN CREA (adapalene)	62		
		DIFFERIN GEL (adapalene)	62		

diltiazem hcl TABS	51	MG/0.5GM, 1 MG/GM, 1.25 MG/1.25GM (estradiol)	77	120	
diltiazem hcl TB24	51	docetaxel CONC 20 MG/ML, 80 MG/4ML, 160 MG/8ML	44	doxycycline (monohydrate) TABS 50 MG, 100 MG	120
dimethyl fumarate CDPK	116	DOCETAXEL CONC 20 MG/ML, 80 MG/4ML, 160 MG/8ML	44	doxycycline (monohydrate) TABS 75 MG, 150 MG	120
dimethyl fumarate CPDR	116	DOCETAXEL SOLN (docetaxel) ..	44	doxycycline (rosacea)	71
DIOVAN HCT (valsartan-hydrochlorothiazide)	32	docetaxel SOLN	44	doxycycline hyclate CAPS	120
DIOVAN TABS (valsartan)	32	DOCIVYX SOLN	44	doxycycline hyclate TABS 20 MG, 100 MG	120
DIPENTUM	79	dofetilide	12	doxycycline hyclate TBEC 75 MG, 100 MG, 150 MG	120
diphenhydramine hcl CAPS 50 MG 27		DOMETUSS-DMX LIQD	60	doxylamine-pyridoxine TBEC	24
diphenhydramine hcl ELIX 12.5 MG/5ML	27	donepezil hydrochloride TABS ..	115	DRISDOL CAPS (ergocalciferol) ..	128
diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML	27	donepezil hydrochloride TBDP ..	115	dronabinol CAPS	24
diphenhydramine hcl SOLN 50 MG/ML	27	DOPTELET	82	DROPLET INSULIN SYRINGE ..	88
diphenoxylate w/ atropine LIQD ..	23	DORAL (quazepam)	83	DROPSAFE SAFETY SYRINGE/NEEDLE	88
diphenoxylate w/ atropine TABS ..	23	dorzolamide hcl	112	drospirenone-ethinyl estradiol ..	57
DIPHThERIA-TETANUS TOXOIDS DT SUSP	121	DORZOLAMIDE HCL	112	drospirenone-ethinyl estradiol-levomefolate calcium	57
DIPROLENE OINT (betamethasone dipropionate augmented)	68	DORZOLAMIDE HCL-TIMOLOL MAL	109	DROXIA CAPS	81
dipyridamole	81	dorzolamide hcl-timolol maleate ..	109	droxidopa	127
disopyramide phosphate CAPS ..	11	DOVATO	47	DRYSOL SOLN	71
disulfiram	115	DOVONEX CREA (calcipotriene) ..	66	DUAVEE	77
DITROPAN XL TB24 5 MG, 10 MG (oxybutynin chloride)	124	doxazosin mesylate	32	DUET DHA 400 MISC	105
DIURIL SUSP	74	doxepin hcl (antipruritic)	65	DUET DHA BALANCED MISC 120	
divalproex sodium CSDR	18	doxepin hcl (sleep)	83	MG-50 MG-15 MG-1 MG-640 UNIT-12 MCG-2 MG-55 MG-20 MG-215	
divalproex sodium TB24	18	doxepin hcl CAPS	20	MG-1.5 MG-25 MG-25 MG-1.8 MG-2800 UNIT-25 MG-210 MCG-65	
divalproex sodium TBEC	18	doxepin hcl CONC	20	MCG-267 MG	105
DIVIGEL GEL 0.25 MG/0.25GM, 0.5		doxercalciferol CAPS	76	DUETACT (pioglitazone hcl-glimepiride)	20
		doxercalciferol SOLN	76	DUEXIS (ibuprofen-famotidine) ..	4
		doxycycline (monohydrate) CAPS 120			
		doxycycline (monohydrate) SUSR			

DULERA 100 MCG/ACT-5 MCG/ACT, 200 MCG/ACT-5 MCG/ACT	13	ECOTRIN ARTHRTIS PAIN TBEC (aspirin)	7	ELREXFIO	38
DULERA 50 MCG/ACT-5 MCG/ACT . 13		ECOTRIN TBEC (aspirin)	7	ELZONRIS	43
duloxetine hcl CPEP 20 MG, 30 MG, 60 MG	19	EDARBI	32	EMBECTA INS SYR U/F 1/2 UNIT 88	
DUOPA SUSP	45	EDARBYCLOR	32	EMBECTA INSULIN SYRINGE ...88	
DUREX EXTRA SENSITIVE THIN DEVI	86	EDECрин (ethacrynic acid)	73	EMBECTA INSULIN SYRINGE U/F . 88	
DUREX EXTRA SENSITIVE THIN MISC	86	EDLUAR SUBL	83	EMBECTA INSULIN SYRINGE U- 100	88
DUREX TROPICAL MISC	86	EDURANT	47	EMCYT	40
DUREZOL (difluprednate)	111	efavirenz CAPS	47	EMEND BIPACK CAPS 80 MG (aprepitant)	24
dutasteride	80	efavirenz TABS	47	EMEND TRIPACK CAPS (aprepitant)	24
dutasteride-tamsulosin hcl	80	efavirenz-emtricitabine-tenofovir disoproxil fumarate	47	EMGALITY (300 MG DOSE) SOSY 90	
D-VI-SOL LIQD PO (cholecalciferol) . 128		EFFER-K	93	EMGALITY SOAJ	90
DYMISTA SUSP (azelastine hcl- fluticasone propionate)	107	EFFIENT (prasugrel hcl)	81	EMGALITY SOSY	90
DYRENium CAPS (triamterene) ..74		EFUDEX CREA (fluorouracil (topical))	65	EMPLICITI	38
E.E.S. GRANULES SUSR (erythromycin ethylsuccinate) ..85		ELAHERE	38	EMSAM	18
EASY COMFORT INSULIN SYRINGE	88	ELAPRASE	76	emtricitabine CAPS	47
EASY TOUCH FLIPLOCK INSULIN SY	88	ELESTRIN GEL	77	emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG- 200 MG, 167 MG-250 MG	47
EASY TOUCH INSULIN SAFETY SYR	88	eletriptan hydrobromide	90	emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG	47
EASY TOUCH INSULIN SYRINGE 88		ELFOLATE TABS	72	EMTRIVA CAPS (emtricitabine) ...47	
EASY TOUCH SHEATHLOCK SYRINGE	88	ELIDEL (pimecrolimus)	70	EMTRIVA SOLN	47
EC-NAPROSYN TBEC (naproxen) .4		ELIGARD SC	40	EMULSION SB EMUL	71
econazole nitrate CREA	64	ELIMITE CREA (permethrin)	72	EMVERM CHEW	10
		ELIQUIS DVT/PE STARTER PACK TBPK	14	enalapril maleate & hydrochlorothiazide	32
		ELIQUIS TABS	14	enalapril maleate SOLN	31
		ELLA	58		
		ELLENCE SOLN	41		
		ELMIRON CAPS	80		

enalapril maleate TABS	31	epinastine hcl (ophth)	112	100	
ENBRACE HR	105	epinephrine (anaphylaxis) SOAJ 0.15 MG/0.3ML	127	EQL INSULIN SYRINGE	88
ENBREL MINI SOCT	5	epinephrine (anaphylaxis) SOAJ	127	EQL ONE DAILY MENS TABS ...	100
ENBREL SOLN	5	EPINEPHRINE PF SOLN IJ	127	EQUETRO	45
ENBREL SOSY	5	EPINEPHRINE SOAJ 0.3 MG/0.3ML 127	ERAXIS 100 MG	24	
ENBREL SURECLICK SOAJ	5	EPIPEN 2-PAK SOAJ (epinephrine (anaphylaxis))	127	ERBITUX	39
ENCARE SUPP 100 MG	126	EPIPEN JR 2-PAK SOAJ (epinephrine (anaphylaxis))	127	ergocalciferol CAPS	128
ENDOMETRIN INST	127	EPIVIR HBV TABS (lamivudine (hbv))	50	ergoloid mesylates TABS	116
ENHERTU	38	EPIVIR SOLN (lamivudine)	47	ERGOMAR SUBL	90
enoxaparin sodium SOLN IJ 300 MG/3ML	14	EPIVIR TABS (lamivudine)	47	ergotamine w/ caffeine TABS	90
enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML	14	EPKINLY	38	eribulin mesylate	44
enoxaparin sodium SOSY 30 MG/0.3ML	14	eplerenone	33	ERIVEDGE	39
enoxaparin sodium SOSY 40 MG/0.4ML	14	EPSOLAY CREA	62	ERLEADA	40
enoxaparin sodium SOSY 60 MG/0.6ML	14	EPZICOM (abacavir sulfate-lamivudine)	48	erlotinib hcl	39
enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML	14	EQ COMPLETE MULTIVITAMIN-ADULT TABS	100	ERTACZO	64
entacapone	44	EQ ONE DAILY MENS 50+ TABS 100	ertapenem sodium IJ	34	
entecavir TABS	50	EQ ONE DAILY MENS HEALTH TABS	100	ERYGEL GEL (erythromycin (acne aid))	62
ENTEREG (alvimopan)	79	EQ ONE DAILY MENS HEALTH TABS	100	ERYPED 200 SUSR (erythromycin ethylsuccinate)	85
ENVARSUS XR TB24	94	EQ ONE DAILY WOMENS 50+ TABS	100	ERYPED 400 SUSR (erythromycin ethylsuccinate)	85
EPANED SOLN (enalapril maleate) 31		EQ ONE DAILY WOMENS HEALTH TABS	100	erythromycin (acne aid) GEL	62
EPCLUSA PACK	50	EQ CENTURY MATURE ADULTS 50+ TABS	100	erythromycin (acne aid) SOLN	62
EPCLUSA TABS	50	EQ CENTURY MENS TABS	100	erythromycin (ophth)	110
EPICERAM EMUL	71	EQ CENTURY WOMENS TABS	100	ERYTHROMYCIN	110
EPIDIOLEX	16			erythromycin base CPEP	85
EPIFOAM FOAM	68			erythromycin base TABS	85
				erythromycin base TBEC	85
				erythromycin ethylsuccinate SUSR 85	

erythromycin ethylsuccinate TABS	85	ESTRING RING	127	EVOTAZ	48
ERZOFRI 39 MG/0.25ML, 78 MG/0.5ML, 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML	46	ESTROGEL GEL (estradiol)	78	EVOXAC (cevimeline hcl)	95
ESBRIET CAPS (pirfenidone)	119	ESTROVEN MENOPAUSE SUPPLEMENT TABS	100	EXELDERM CREA (sulconazole nitrate)	64
ESBRIET TABS (pirfenidone)	119	eszopiclone	84	EXELDERM SOLN (sulconazole nitrate)	64
escitalopram oxalate SOLN	19	ethacrynic acid	73	EXELON (rivastigmine)	115
escitalopram oxalate TABS	19	ethambutol hcl TABS	36	exemestane	40
ESGIC TABS (butalbital- acetaminophen-caffeine)	5	ethosuximide CAPS	18	EXFORGE (amlodipine besylate- valsartan)	32
esomeprazole magnesium CPDR 123		ethosuximide SOLN	18	EXFORGE HCT (amlodipine- valsartan-hydrochlorothiazide)	32
esomeprazole magnesium PACK	123	ethyl chloride	71	EXJADE TBSO (deferasirox)	23
estazolam	83	ETHYL CHLORIDE	71	EXKIVITY	39
esterified estrogens & methyltestosterone	77	ethynodiol diacet & eth estrad	57	EXODERM	64
ESTRACE CREA (estradiol vaginal) 127		ETHYOL	43	EYE HEALTH + LUTEIN TABS ..	100
ESTRACE TABS (estradiol)	77	etodolac CAPS	4	EYE MULTIVITAMIN/SODIUM TABS	100
estradiol & norethindrone acetate TABS	77	etodolac TABS	4	ezetimibe	31
estradiol GEL 0.25 MG/0.25GM, 0.5 MG/0.5GM, 1 MG/GM, 1.25 MG/1.25GM	78	etodolac TB24	4	ezetimibe-simvastatin	29
estradiol GEL	77	etonogestrel-ethinyl estradiol	58	FABIOR FOAM	62
estradiol PTTW	78	ETOPOPHOS	44	FALESSA	57
estradiol PTWK 0.025 MG/24HR, 0.0375 MG/24HR, 0.06 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR ...	78	etoposide CAPS	44	famciclovir	50
estradiol PTWK 0.05 MG/24HR ...	78	etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML	44	EUCRISA	71
estradiol TABS	78	etravirine	48	famotidine TABS 20 MG	122
estradiol vaginal CREA	127	EULEXIN	40	famotidine TABS 40 MG	122
estradiol vaginal TABS	127	EVAMIST SOLN	78	FANAPT	46
estradiol valerate	77	everolimus (immunosuppressant) 0.25 MG, 0.5 MG, 0.75 MG	94	FANAPT TITRATION PACK	46
		everolimus TABS	41	FANTASY LUBRICATED MISC ..	86
		everolimus TBSO	41	FANTASY LUBRICATED/SPERMICIDE MISC 86	
		EVISTA (raloxifene hcl)	75	FARESTON (toremifene citrate) ..	40
		EVOMELA IV	37		

FARXIGA (dapagliflozin propanediol)	22	MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR	7	FIRMAGON 80 MG	40
FASENRA PEN SOAJ	12	FENTORA TABS (fentanyl citrate) ..	7	FIRST-LANSOPRAZOLE SUSP ..	124
FC2 FEMALE CONDOM	86	FER-IN-SOL SOLN (ferrous sulfate) . 83		FIRST-MOUTHWASH BLM	95
febuxostat	81			FIRST-OMEPRAZOLE SUSP ..	124
felbamate SUSP	17	FERRIPROX SOLN	23	FIRVANQ SOLR PO 25 MG/ML (vancomycin hcl)	34
felbamate TABS	17	FERRIPROX TABS (deferiprone) .	23	FITNESS TABS FOR MEN AM/PM TABS	100
FELBATOL SUSP (felbamate)	17	FERRIPROX TWICE-A-DAY TABS 23		FITNESS TABS FOR WOMEN AM/PM TABS	100
FELBATOL TABS (felbamate)	17	ferrous sulfate SOLN	83	FLAGYL CAPS (metronidazole) ..	33
FELDENE CAPS (piroxicam)	4	fesoterodine fumarate	124	FLAREX	111
felodipine	51	FETZIMA CP24 20 MG	19	flavoxate hcl	125
FEM PH	126	FETZIMA CP24 40 MG, 80 MG, 120 MG	19	FLEBOGAMMA DIF SOLN 0.5 GM/10ML, 5 GM/50ML, 10 GM/200ML, 20 GM/200ML	113
FEMARA (letrozole)	40	FETZIMA TITRATION C4PK	19	flecainide acetate	11
FEMCAP DEVI	86	FIBRICOR (fenofibric acid)	30	FLECTOR PTCH EX (diclofenac epolamine)	65
FEMRING	127	FIFTY50 SUPERIOR COMFORT SYR	88	FLONASE ALLERGY REL CHILDRENS SUSP (fluticasone propionate (nasal))	108
fenofibrate CAPS	30	FINACEA FOAM	71	FLONASE ALLERGY RELIEF SUSP (fluticasone propionate (nasal)) ..	108
fenofibrate micronized 43 MG, 67 MG, 90 MG, 130 MG, 134 MG, 200 MG	30	FINACEA GEL (azelaic acid)	71	FLONASE SENSIMIST	108
fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG	30	finasteride	80	FLONASE SENSIMIST CHILDRENS	108
fenofibric acid	30	FINAZOL TABS	100	FLORAFOL PEDIATRIC CHEW ..	104
FENOPROFEN CALCIUM CAPS 200 MG	4	fingolimod hcl	116	FLORAFOL PEDIATRIC SOLN ..	104
fenoprofen calcium CAPS 400 MG ..	4	FIORICET CAPS (butalbital- acetaminophen-caffeine)	5	FLORIVA PLUS SOLN	104
fenoprofen calcium TABS	4	FIORICET/CODEINE 30 MG-40 MG- 50 MG-300 MG (butalbital- acetaminophen-caffeine w/ codeine) . 8		FLORRAXYL TABS	100
FENOPRON CAPS	4	FIRAZYR SOSY (icatibant acetate) 81		FLOTREX CHEW 0.5 MG	104
FENORTHO CAPS 200 MG	4	FIRDAPSE	36		
FENSOLVI (6 MONTH) SC	75	FIRMAGON (240 MG DOSE) ..	40		
fentanyl citrate LPOP	7				
fentanyl citrate TABS	7				
fentanyl PT72 12 MCG/HR, 25					

flouxuridine	37	fluocinolone acetonide SOLN	68	fluticasone propionate CREA 0.05 % 68
FLUAD	125	fluocinonide CREA	68	fluticasone propionate hfa 44 MCG/ACT
FLUAD QUADRIVALENT	125	fluocinonide emulsified base	68	MCG/ACT
FLUARIX QUADRIVALENT SUSY 125		fluocinonide GEL	68	12
FLUARIX SUSY	125	fluocinonide OINT	68	fluticasone propionate LOTN
FLUBLOK QUADRIVALENT	125	fluocinonide SOLN	68	68
FLUBLOK SOSY	125	fluorometholone (ophth) SUSP	111	fluticasone propionate OINT
FLUCELVAX QUADRIVALENT SUSP	125	fluorouracil (topical) CREA	65	68
FLUCELVAX QUADRIVALENT SUSY	125	fluorouracil (topical) SOLN	65	fluticasone-salmeterol AEPB 100
FLUCELVAX SUSP	125	fluorouracil	37	MCG/ACT-50 MCG/ACT, 250
FLUCELVAX SUSY	125	fluoxetine hcl (pmdd) TABS	116	MCG/ACT-50 MCG/ACT, 500
fluconazole SUSR	25	fluoxetine hcl CAPS	19	MCG/ACT-50 MCG/ACT
fluconazole TABS	25	fluoxetine hcl CPDR	19	13
flucytosine	24	fluoxetine hcl SOLN	19	fluticasone-salmeterol AERO
fludarabine phosphate SOLN	37	FLUOXETINE HCL TABS (fluoxetine hcl)	19	13
FLUDARABINE PHOSPHATE SOLN	37	fluoxetine hcl TABS 10 MG, 20 MG 19		fluvastatin sodium CAPS
fludarabine phosphate SOLR	37	fluoxetine hcl TABS 60 MG	19	30
fludrocortisone acetate TABS	60	fluphenazine hcl CONC	46	fluvastatin sodium TB24
FLULALVAL QUADRIVALENT SUSY 125		fluphenazine hcl ELIX	46	19
FLULALVAL SUSY	125	fluphenazine hcl TABS	46	fluvoxamine maleate CP24
FLUMIST	125	flurandrenolide CREA	68	fluvoxamine maleate TABS
FLUMIST QUADRIVALENT	126	flurazepam hcl	84	FLUZONE HIGH-DOSE QUADRIVALENT
flunisolide (nasal)	108	flurbiprofen sodium	112	126
fluocinolone acetonide (otic)	113	flurbiprofen TABS	4	FLUZONE HIGH-DOSE SUSY
fluocinolone acetonide CREA	68	fluticasone furoate-vilanterol 100 MCG/INH-25 MCG/INH	13	126
fluocinolone acetonide OIL	68	fluticasone furoate-vilanterol 200 MCG/INH-25 MCG/INH	13	FLUZONE QUADRIVALENT SUSY 126
fluocinolone acetonide OINT	68	fluticasone propionate (nasal) SUSP 108		FLUZONE QUADRIVALENT SUSY 126
				FLUZONE SUSP
				126
				FLUZONE SUSY
				126
				FML FORTE SUSP
				111
				FML LIQUIFILM SUSP (fluorometholone (ophth))
				111
				FOCALIN TABS (dexmethylphenidate hcl)
				1
				FOCALIN XR CP24 5 MG, 10 MG, 15 MG, 20 MG, 30 MG, 35 MG, 40 MG (dexmethylphenidate hcl)
				1
				FOLAMAX TABS
				100
				FOLAPRIME TABS
				100

FOLBIC RF TABS .....	.73	FOTIVDA .....	.41	FRINDOVYX SOLN .....	.37
folic acid SOLN .....	.82	FRAGMIN SOLN 95000 UNIT/3.8ML		FROVA (frovatriptan succinate) ..	.90
folic acid TABS .....	.82	14		frovatriptan succinate .....	.91
FOLIFLEX TABS .....	.100	FRAGMIN SOSY 10000 UNIT/ML .14		FRUZAQLA .....	.38
FOLITIN-Z TABS .....	.100	FRAGMIN SOSY 12500 UNIT/0.5ML		FT CENTURY 50+ TABS .....	.100
FOLIVANE-F .....	.82	14		FT CENTURY ADULTS TABS ...	.100
FOLIVANE-OB .....	.105	FRAGMIN SOSY 15000 UNIT/0.6ML		FT CENTURY MEN 50+ TABS ...	.100
FOLOTYN .....	.37	14		FT CENTURY MEN TABS .....	.100
FOLTX TABS .....	.73	FRAGMIN SOSY 18000 UNT/0.72ML		FT CENTURY WOMEN 50+ TABS	
fondaparinux sodium .....	.14	14		100	
FORFIVO XL TB24 (bupropion hcl)		FRAGMIN SOSY 2500 UNIT/0.2ML,		FT CENTURY WOMEN TABS ...	.100
18		5000 UNIT/0.2ML .....	.15	FT EYE HEALTH TABS .....	.100
formaldehyde SOLN 10 % .....	.47	FRAGMIN SOSY 7500 UNIT/0.3ML		FT HAIR SKIN & NAILS EXTRA STR	
formoterol fumarate NEBU .....	.13	14		TABS .....	.100
FORTESTA GEL TD (testosterone) .9		FREEDAVITE TABS .....	.100	FT ONE DAILY MENS TABS ....	.100
FOSAMAX PLUS D .....	.74	FREESTYLE FREEDOM LITE KIT		FT ONE DAILY WOMENS TABS .100	
FOSAMAX TABS 70 MG		87		furosemide SOLN PO 8 MG/ML, 10	
(alendronate sodium) .....	.74	FREESTYLE INSULINX TEST STRP		MG/ML .....	.73
fosamprenavir calcium TABS .....	.48	.....	.72	furosemide TABS .....	.73
foscarnet sodium 6000 MG/250ML		FREESTYLE LIBRE 14 DAY		FUSION PLUS .....	.82
49		READER .....	.87	FUZEON SOLR .....	.48
FOSCAVIR 6000 MG/250ML		FREESTYLE LIBRE 14 DAY		FYARRO .....	.41
(foscarnet sodium) .....	.49	SENSOR .....	.87	FYCOMPA SUSP .....	.15
fosfomycin tromethamine .....	.35	FREESTYLE LIBRE 2 PLUS		FYCOMPA TABS .....	.15
FOSFREE TABS (multiple vitamins		SENSOR .....	.87	gabapentin CAPS .....	.16
w/ minerals) .....	.100	FREESTYLE LIBRE 2 READER ..	.87	gabapentin SOLN .....	.16
fosinopril sodium &		FREESTYLE LIBRE 2 SENSOR ..	.87	gabapentin TABS 600 MG, 800 MG	
hydrochlorothiazide .....	.32	FREESTYLE LIBRE 3 PLUS		16	
fosinopril sodium .....	.31	SENSOR .....	.87	GABITRIL (tiagabine hcl) .....	.17
fosphenytoin sodium 100 MG		FREESTYLE LIBRE 3 READER ..	.87	GABLOFEN SOLN IT 10000	
PE/2ML .....	.18	FREESTYLE LIBRE 3 SENSOR ..	.87	MCG/20ML .....	.107
FOSRENOL CHEW (lanthanum		FREESTYLE LIBRE READER ....	.87	GALAFOLD .....	.76
carbonate) .....	.79	FREESTYLE LITE TEST STRP ...	.72		
		FREESTYLE TEST STRP .....	.72		

galantamine hydrobromide CP24	115	gemcitabine hcl SOLR	37	glipizide-metformin hcl	20
galantamine hydrobromide SOLN	115	gemfibrozil TABS	30	GLOBAL EASY GLIDE INSULIN SYR	88
		GENERESS FE (norethindrone & ethinyl estradiol-fe)	57	GLOBAL INJECT EASE INSULIN SYR	88
galantamine hydrobromide TABS	115	GENOTROPIN CART SC	75	GLOBAL INSULIN SYRINGES ...	88
GALZIN	93	GENOTROPIN MINIQUICK PRSY 75		GLUCAGEN DIAGNOSTIC	72
GAMASTAN	113	gentamicin in saline 0.8 MG/ML-0.9 %, 1 MG/ML-0.9 %, 1.2 MG/ML-0.9 %, 1.6 MG/ML-0.9 %	2	GLUCAGEN HYPOKIT	21
GAMMAGARD 1 GM/10ML, 2.5 GM/25ML	113	gentamicin sulfate (ophth) SOLN .	110	glucagon (rdna)	21
GAMMAKED 1 GM/10ML	113	gentamicin sulfate (topical) CREA .	63	GLUCAGON EMERGENCY (glucagon (rdna))	21
GAMUNEX-C 1 GM/10ML, 2.5 GM/25ML, 40 GM/400ML	113	gentamicin sulfate (topical) OINT ..	63	GLUCAGON EMERGENCY	21
GARDASIL 9 SUSP	126	gentamicin sulfate IJ 40 MG/ML	2	GLUCOPRO INSULIN SYRINGE .	88
GARDASIL 9 SUSY	126	GENVOYA	48	GLUCOTROL XL TB24 (glipizide) .	22
GASTROCROM (cromolyn sodium (mastocytosis))	78	GEODON (ziprasidone hcl)	45	GLUMETZA TB24 (metformin hcl) .	20
gatifloxacin (ophth)	110	GEODON (ziprasidone mesylate) .	45	glutamine (sickle cell)	81
GATTEX	79	GERI-FREEDA SENIOR FORMULA TABS	100	glyburide micronized 1.5 MG, 3 MG, 6 MG	22
GAVRETO	41	GILOTrif	39	glyburide TABS	22
GAZYVA	38	GILPHEX TR TABS 10 MG-388 MG .		glyburide-metformin	20
GEBAUERS INSTANT ICE	71	60		GLYCATE TABS	121
GEBAUERS PAIN EASE	71	GILTUSS COUGH & COLD TABS	60	glycopyrrolate SOLN PO 1 MG/5ML .	
GEBAUERS SPRAY AND STRETCH	71	GILTUSS SINUS & CONGESTION TABS	60	121	
gefitinib	39	GLASSIA SOLN	119	glycopyrrolate TABS 1 MG, 2 MG	
GELCLAIR	95	glatiramer acetate SOSY	116	121	
GELFILM	111	GLEEVEC TABS (imatinib mesylate) .	41	GLYCOPYRROLATE TABS	121
GEMCITABINE HCL SOLN (gemcitabine hcl)	37	GLEOSTINE 10 MG, 40 MG, 100 MG	37	GLYNASE (glyburide micronized) .	22
gemcitabine hcl SOLN	37	glimepiride 1 MG, 2 MG, 4 MG	22	GLYXAMBI	20
GEMCITABINE HCL SOLN	37	glipizide TABS 5 MG, 10 MG	22	GNP CENTURY ADULT TABS ...	100
		glipizide TB24	22	GNP INSULIN SYRINGE	88
				GNP INSULIN SYRINGES	89
				GNP INSULIN SYRINGES 28GX1/2"	

.....	89	halcinonide SOLN 0.1 %	68	37
GNP INSULIN SYRINGES 29GX1/2"		HALCION 0.25 MG (triazolam)	84	HERCEPTIN 150 MG
.....	89	halobetasol propionate CREA	68	HERCEPTIN HYLECTA
GNP INSULIN SYRINGES		halobetasol propionate OINT	68	HERZUMA
30GX5/16"	89	HALOG CREA (halcinonide)	68	HIBERIX SOLR IJ
GNP INSULIN SYRINGES		HALOG OINT	68	HIGH POT MULTIVITAMIN/BETA-
31GX5/16"	89	HALOG SOLN	68	CAR TABS
GNP THERAPEUTIC-M TABS ...	100	haloperidol lactate CONC	46	HIGH POTENCY MULTIVIT/FA
GNP ULTRA COM INSULIN		haloperidol TABS	46	TABS
SYRINGE	89	HAVRIX	126	HIPREX (methenamine hippurate)
GOCOVRI CP24	45	HEAD CARE PROACTIVE HEALTH		
GOLYTELY SOLR (peg 3350-kcl-sod		TABS	100	HIZENTRA SOLN 1 GM/5ML, 10
bicarb-sod chloride-sod sulfate) ...	84	HEALTHWISE INSULIN		GM/50ML
GONITRO PACK	10	SYR/NEEDLE	89	113
granisetron hcl TABS	23	HECTOROL SOLN (doxercalciferol) .		HIZENTRA SOSY 10 GM/50ML ..
GRASTEK SUBL	2	76		101
griseofulvin microsize SUSP	24	HELIDAC THERAPY	124	HM COMPLETE MEN TABS
griseofulvin microsize TABS	24	HEMANGEOL SOLN PO	51	101
griseofulvin ultramicrosize	24	HEPARIN (PORCINE) IN NACL		HM HAIR/SKIN/NAILS TABS
guaifenesin-codeine SOLN	60	SOLN IV 0.45 %-12500 UNIT/250ML,		101
guanfacine hcl (adhd)	1	0.45 %-25000 UNIT/250ML, 0.45 %-		HM ULTICARE INSULIN SYRINGE ..
guanfacine hcl	32	25000 UNIT/500ML	15	89
GVOKE PFS SOSY	21	heparin (porcine) in sodium chloride		HUMALOG JUNIOR KWIKPEN
GYNAZOLE-1	127	SOLN IV 0.9 %-1000 UNIT/500ML,		SOPN
HADLIMA PUSHTOUCH SOAJ	3	0.9 %-2000 UNIT/L	15	21
HADLIMA SOSY	3	HEPARIN SOD (PORCINE) IN D5W		HUMALOG KWIKPEN SOPN 100
HAEGARDA SOLR SC	81	5 %-40 UNIT/ML	15	UNIT/ML
HAIR SKIN & NAILS ADVANCED		heparin sodium (porcine) SOLN IJ		21
TABS	100	1000 UNIT/ML, 5000 UNIT/ML,		HUMALOG MIX 50/50 KWIKPEN
HAIR SKIN & NAILS TABS	100	10000 UNIT/ML, 20000 UNIT/ML ..	15	SUPN
HALAVEN (eribulin mesylate)	44	126		21
halcinonide CREA	68	HEPLISAV-B SOSY	126	HUMALOG MIX 50/50 SUSP
		HEPZATO W/50MM CATHETER IA .		21
		37		HUMALOG SOCT
		HEPZATO W/62MM CATHETER IA .		21
				HUMATROPE CART IJ
				75

HUMIRA (2 PEN) AJKT	3	HYDRO 40 FOAM (urea)	70	lipo base	69
HUMIRA (2 SYRINGE) PSKT	3	hydrochlorothiazide CAPS	74	hydrocortisone butyrate LOTN	69
HUMIRA-CD/UC/HS STARTER AJKT	3	hydrochlorothiazide TABS	74	hydrocortisone butyrate OINT	69
HUMIRA-PED<40KG CROHNS STARTER PSKT	3	hydrocodone bitartrate T24A	7	hydrocortisone butyrate SOLN	69
HUMIRA-PED>/=40KG CROHNS START PSKT	3	hydrocodone bitartrate-homatropine methylbromide SOLN	60	hydrocortisone TABS	59
HUMIRA-PED>/=40KG UC STARTER AJKT	3	hydrocodone bitartrate-homatropine methylbromide TABS	60	hydrocortisone valerate CREA	69
HUMIRA-PS/UV/ADOL HS STARTER AJKT	3	hydrocodone polistirex-chlorpheniramine polistirex SUER ..	60	hydrocortisone valerate OINT	69
HUMIRA-PSORIASIS/UVEIT STARTER AJKT	3	hydrocodone-acetaminophen SOLN ..	8	hydrocortisone w/acetic acid	113
HUMULIN 70/30 KWIKPEN SUPN	22	hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300		hydromorphone hcl LIQD	7
HUMULIN 70/30 SUSP	22	MG-7.5 MG, 325 MG-10 MG, 325 MG-2.5 MG, 325 MG-5 MG, 325 MG-7.5 MG	8	hydromorphone hcl TABS	7
HUMULIN N KWIKPEN SUPN	22	hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG, 7.5 MG-200 MG ..	8	hydromorphone hcl TB24 32 MG ...	7
HUMULIN N SUSP	22	hydrocortisone (intrarectal)	9	hydromorphone hcl TB24 8 MG, 12 MG, 16 MG	7
HUMULIN R SOLN IJ	22	hydrocortisone (rectal) EX 2.5 % ..	10	hydroxychloroquine sulfate 200 MG	
HUMULIN R U-500 (CONCENTRATED) SOLN SC ..	22	hydrocortisone (topical) CREA 2.5 %		35	
HUMULIN R U-500 KWIKPEN SOPN SC	22	hydrocortisone (topical) SC 2.5 %	68	hydroxyprogesterone caproate (antineoplastic)	40
HYCAMTIN CAPS	44	hydrocortisone (topical) LOTN 2 %, 2.5 %	68	hydroxyprogesterone caproate OIL	
HYCAMTIN SOLR (topotecan hcl)	44	hydrocortisone (topical) OINT 1 %, 2.5 %	68	114	
HYCODAN SOLN (hydrocodone bitartrate-homatropine methylbromide)	60	hydrocortisone (topical) SOLN 2.5 %	69	hydroxyurea	43
HYCODAN TABS 1.5 MG-5 MG (hydrocodone bitartrate-homatropine methylbromide)	60	hydrocortisone acetate (rectal)	10	hydroxyzine hcl SOLN 25 MG/ML, 50 MG/ML	11
hydralazine hcl SOLN	33	hydrocortisone acetate w/ pramoxine		hydroxyzine hcl SYRP	11
hydralazine hcl TABS	33	CREA EX	10	hydroxyzine hcl TABS	11
HYDREA (hydroxyurea)	43	hydrocortisone butyrate CREA	69	hydroxyzine pamoate CAPS	11
		hydrocortisone butyrate hydrophilic		HYLAZINC TABS	101
				hyoscyamine sulfate SUBL 0.125 MG	
				.....	121
				hyoscyamine sulfate TABS 0.125 MG	
				.....	121
				hyoscyamine sulfate TB12 0.375 MG	
				121	
				hyoscyamine sulfate TBDP 0.125 MG	

121	imipramine hcl TABS	20	INFLECTRA SOLR	79
HYPERSAL NEBU (sodium chloride (inhalant))	imipramine pamoate	20	INFUGEM	37
HYPERSAL NEBU	imiquimod 3.75 %	70	INGREZZA CAPS	115
HYQVIA	imiquimod 5 %	70	INGREZZA CPPK	115
HYZAAR (losartan potassium & hydrochlorothiazide)	IMITREX 5 MG/ACT, 20 MG/ACT (sumatriptan)	91	INGREZZA CPSP	115
ibandronate sodium SOLN	IMITREX STATDOSE REFILL SOCT (sumatriptan succinate)	91	INHALER SPACERS	90
ibandronate sodium TABS	IMITREX STATDOSE SYSTEM SOAJ (sumatriptan succinate)	91	INLYTA	38
IBRANCE CAPS	IMITREX TABS (sumatriptan succinate)	91	INNOPRAN XL	51
IBRANCE TABS	IMJUDO	38	INQOVI	41
ibuprofen TABS 400 MG, 600 MG, 800 MG	IMLYGIC	44	INREBIC	42
ibuprofen-famotidine	IMODIUM A-D CAPS (loperamide hcl)	23	INSPRA (eplerenone)	33
ICAPS AREDS FORMULA TABS 101	IMPAVIDO	33	INSULIN LISPRO PROT & LISPRO SUPN	22
ICAR SUSP (carbonyl iron)	IMPEKLO LOTN	69	INSULIN SYRINGE	89
icatibant acetate SOSY	IMURAN TABS (azathioprine)	94	INSULIN SYRINGE-NEEDLE U-100 INTEGRA F	82
ICLUSIG 10 MG, 30 MG	INCRELEX	75	INTELENCE (etravirine)	48
ICLUSIG 15 MG, 45 MG	INCRUSE ELLIPTA	12	INTELLENCE 25 MG	48
icosapent ethyl	indapamide TABS 1.25 MG, 2.5 MG ..	74	INTRAROSA	126
IDHIFA	INDERAL LA CP24 (propranolol hcl) ..	51	INTUNIV (guanfacine hcl (adhd)) ..	1
ILEVRO	INDERAL XL	51	INVANZ IJ (ertapenem sodium) ..	34
ILIDERM EMUL	INDOCIN SUSP (indomethacin)	4	INVEGA (paliperidone)	46
imatinib mesylate TABS	indomethacin CAPS 25 MG, 50 MG ..	4	INVEGA SUSTENNA	46
IMBRUVICA CAPS	indomethacin CPCR	4	INVEGA TRINZA	46
IMBRUVICA SUSP	indomethacin SUPP	4	iodoquinol-hc	64
IMBRUVICA TABS	indomethacin SUSP	4	iodoquinol-hydrocortisone in aloe vehicle	64
IMDELLTRA	indomethacin SUSP	4	iodoquinol-hydrocortisone-aloe polysaccharide	64
IMFINZI	INFANRIX	121	IOPIDINE	110
imipenem-cilastatin IV				

IPOL	126	ISTALOL SOLN (timolol maleate (ophth))	109	JYLA MVO SOLN PO	37
ipratropium bromide (nasal)	108	ISTODAX SOLR (romidepsin)	42	JYNARQUE TABS	76
ipratropium bromide SOLN 0.02 %	12	ITOVEBI	42	JYNARQUE TBPK	76
ipratropium-albuterol SOLN	13	itraconazole CAPS	25	JYNNEOS	126
irbesartan	32	itraconazole SOLN	25	KADCYLA	38
irbesartan-hydrochlorothiazide	32	ivabradine hcl TABS	53	KALETRA SOLN (lopinavir-ritonavir) .	
IRESSA (gefitinib)	39	ivermectin (pediculicide)	72	KALETRA TABS (lopinavir-ritonavir) .	
irinotecan hcl	44	ivermectin (rosacea)	71	KALYDECO PACK 13.4 MG, 25 MG,	
IRON FOLATE-F	82	ivermectin	10	50 MG, 75 MG	119
ISENTRESS CHEW	48	IVERMECTIN 6 MG	10	KALYDECO TABS	119
ISENTRESS HD TABS	48	IWLFIN	43	KAMDOY EMUL	71
ISENTRESS PACK	48	IXEMPRA KIT	44	KAMELEON LUBRICATED MISC .	86
ISENTRESS TABS	48	JADENU SPRINKLE PACK (deferasirox)	23	KANJINTI	39
ISOLYTE-S	92	JADENU TABS (deferasirox)	23	KAPVAY TB12 (clonidine hcl (adhd))	
isoniazid SOLN	36	JAKAFI	42	1	
isoniazid SYRP	36	JALYN (dutasteride-tamsulosin hcl) .		KEMOPLAT SOLN	37
isoniazid TABS	36	80		KENALOG AERS (triamcinolone	
ISOPTO ATROPINE SOLN	109	JANUMET TABS	20	acetonide (topical))	69
ISORDIL TITRADOSE TABS (isosorbide dinitrate)	10	JANUMET XR TB24	20	KEPIVANCE	43
isosorbide dinitrate TABS	10	JANUVIA 25 MG	21	KEPPRA SOLN IV 500 MG/5ML	
isosorbide dinitrate-hydralazine hcl		JANUVIA 50 MG, 100 MG	21	(levetiracetam)	16
52		JARDIANCE 10 MG	22	KEPPRA SOLN PO 100 MG/ML	
isosorbide mononitrate TABS	10	JARDIANCE 25 MG	22	(levetiracetam)	16
ISOSORBIDE MONONITRATE TABS	10	JAYPIRCA	42	KEPPRA TABS (levetiracetam) ...	16
isosorbide mononitrate TB24	10	JEMPERLI	38	KEPPRA XR TB24 (levetiracetam) 16	
isotretinoin 10 MG, 20 MG, 30 MG, 40 MG	62	JEVTANA	44	ketoconazole (topical) CREA	64
isotretinoin 25 MG, 35 MG	62	JULUCA	48	ketoconazole (topical) FOAM	64
isradipine CAPS	51	JUXTAPID 5 MG, 10 MG, 20 MG, 30		ketoconazole (topical) SHAM 2 % .	64
		MG	31	ketoconazole	25
				ketoprofen CAPS 25 MG, 50 MG ...	4

ketoprofen CP24	4	41	(potassium chloride)	93
ketorolac tromethamine (ophth) ..	112	KISQALI FEMARA (400 MG DOSE) ..	KUVAN PACK (sapropterin dihydrochloride)	76
ketorolac tromethamine TABS	4	41		
KEVEYIS (dichlorphenamide)	73	KISQALI FEMARA (600 MG DOSE) ..	KUVAN TABS (sapropterin dihydrochloride)	76
KEVZARA SOAJ	3	KITABIS PAK (W/ NEBULIZER)	K-Y ME & YOU EXTRA	
KEVZARA SOSY	3	NEBU 300 MG/5ML (tobramycin) ..	LUBRICATED DEVI	86
KEYFOLIC TABS	101	KIVIK EMUL	K-Y ME & YOU INTENSE DEVI ..	86
KEYLOSA TABS	101	KLARITY-A	KYLEENA	59
KEYTRUDA	38	KLARON (sulfacetamide sodium (acne))	KYMRIAH	39
KHAPZORY	43	KLONOPIN TABS (clonazepam) ..	KYPROLIS	42
KIMMTRAK	38	KMART VALU INSULIN SYRINGE 29G	labetalol hcl TABS 100 MG, 200 MG, 300 MG	50
KIMONO COLORS DEVI	86	KMART VALU INSULIN SYRINGE 30G	lacosamide SOLN PO 10 MG/ML, 50 MG/5ML, 100 MG/10ML	16
KIMONO MAXX-LARGE FLARE MISC	86	KORLYM (mifepristone (hyperglycemia))	lacosamide TABS	16
KIMONO MICRO THIN MISC	86	KOSELUGO	lactated ringer's (irrigation)	94
KIMONO MICRO THIN PLUS MISC ..	86	KOSHER PRENATAL PLUS IRON TABS	lactic acid (ammonium lactate) CREA	70
KIMONO MISC	86	K-PAX IMMUNE PROFESSIONAL ST TABS	lactic acid (ammonium lactate) LOTN 12 %	70
KIMONO PLUS MISC	86	K-PHOS NO 2	LACTIC ACID LOTN	70
KIMONO PS MISC	86	K-PHOS TABS (potassium phosphate monobasic)	lactulose (encephalopathy)	79
KIMONO PS PLUS MISC	86	K-PHOS-NEUTRAL (pot phosphate monobasic w/ sod phosphate dibasic & monobasic)	LACTULOSE PACK	85
KIMONO SENSATION MISC	86	92	lactulose SOLN	85
KIMONO SENSATION PLUS MISC ..	86	KRAZATI	LAMICTAL CHEW (lamotrigine) ..	16
KIMONO SPECIAL DEVI	86	KRINTAFEL	LAMICTAL ODT KIT (lamotrigine) ..	16
KINRAY INSULIN SYRINGE	89	KRISTALOSE PACK	LAMICTAL ODT TBDP (lamotrigine) ..	16
KINRIX SUSY	121	KROGER INSULIN SYRINGE ..	LAMICTAL STARTER KIT 25 MG (lamotrigine)	16
KISQALI (200 MG DOSE)	42	K-TAB TBCR 10 MEQ, 20 MEQ	LAMICTAL TABS (lamotrigine) ..	16
KISQALI (400 MG DOSE)	42		LAMICTAL XR KIT	16
KISQALI (600 MG DOSE)	42			
KISQALI FEMARA (200 MG DOSE) ..				

lamivudine (hbv) TABS	50	LEADER INSULIN SYRINGE	89	levetiracetam SOLN IV 500 MG/5ML 16
lamivudine SOLN	48	leflunomide 10 MG	5	levetiracetam SOLN PO 100 MG/ML, 500 MG/5ML
lamivudine TABS	48	leflunomide 20 MG	5	16
lamivudine-zidovudine	48	lenalidomide 2.5 MG, 5 MG, 10 MG, 15 MG, 25 MG	93	levetiracetam TABS
lamotrigine CHEW	16	LENVIMA (10 MG DAILY DOSE) ..	38	16
lamotrigine KIT 25 MG	16	LENVIMA (12 MG DAILY DOSE) ..	38	levobunolol hcl 0.5 %
lamotrigine KIT	16	LENVIMA (14 MG DAILY DOSE) ..	38	109
lamotrigine TABS	16	LENVIMA (18 MG DAILY DOSE) ..	38	levocarnitine (metabolic modifiers)
lamotrigine TB24 25 MG, 50 MG, 100 MG, 200 MG	16	LENVIMA (20 MG DAILY DOSE) ..	38	SOLN PO 1 GM/10ML
lamotrigine TB24 250 MG, 300 MG 16		LENVIMA (24 MG DAILY DOSE) ..	38	76
lamotrigine TBDP	16	LENVIMA (4 MG DAILY DOSE) ..	38	levofloxacin (ophth)
LANCETS	87	LENVIMA (8 MG DAILY DOSE) ..	38	110
LANOXIN TABS 125 MCG, 250 MCG (digoxin)	52	LESCOL XL TB24 (fluvastatin sodium)	30	levofloxacin SOLN PO
LANOXIN TABS 62.5 MCG (digoxin) . 52		LETAIRIS (ambrisentan)	52	78
lansoprazole CPDR	124	letrozole	40	levofloxacin TABS
lansoprazole TBDD	124	leucovorin calcium SOLN IJ 500 MG/50ML	43	44
lanthanum carbonate CHEW	79	leucovorin calcium SOLR 100 MG, 350 MG	43	levoleucovorin calcium SOLR
LANTUS SOLN	22	leucovorin calcium TABS	44	44
LANTUS SOLOSTAR SOPN	22	LEUKERAN	37	levonorgestrel & eth estradiol TABS 57
lapatinib ditosylate	42	LEUPROLIDE ACETATE (3 MONTH) INJ	40	levonorgestrel (emergency oc) 1.5 MG
LASIX TABS (furosemide)	73	leuprolide acetate KIT IJ 1 MG/0.2ML	40	58
LASTACRAFT	112	LEUPROLIDE ACETATE-		levonorgestrel-eth estradiol (triphasic)
latanoprost SOLN	112	BUPIVACAINE	40	57
LATANOPROST SOLN	112	levalbuterol hcl	13	levonorgestrel-ethinyl estradiol (91- day) 0.03 MG-0.15 MG
LATUDA 120 MG (lurasidone hcl) .45		levalbuterol tartrate	13	57
LATUDA 20 MG, 40 MG, 60 MG, 80 MG (lurasidone hcl)	45	LEVIBID TB12 (hyoscyamine sulfate)		levonorgestrel-ethinyl estradiol-iron 57
LAZCLUZE	39	121		levorphanol tartrate TABS

LEVSIN TABS (hyoscyamine sulfate)	121	linezolid SUSR	35	LOCOID LOTN (hydrocortisone butyrate)	69
LEVSIN/SL SUBL (hyoscyamine sulfate)	121	linezolid TABS	35	LODINE TABS (etodolac)	4
LEXAPRO TABS (escitalopram oxalate)	19	LINZESS	79	LODOSYN (carbidopa)	44
LEXIVA SUSP	48	LORESAL SOLN IT (baclofen) ..	107	lofexidine hcl	115
LEXIVA TABS (fosamprenavir calcium)	48	LORESAL SOLN IT	107	LOKELMA	95
LIBRAX (chlordiazepoxide hcl-clidinium bromide)	122	liothyronine sodium TABS	120	LOMOTIL TABS (diphenoxylate w/ atropine)	23
LIBTAYO	38	LIPITOR TABS 10 MG, 20 MG (atorvastatin calcium)	30	LONGS INSULIN SYRINGE	89
lidocaine hcl (mouth-throat)	95	LIPOFEN CAPS (fenofibrate)	30	LONSURF	41
lidocaine hcl CREA 3 %	71	liraglutide	21	loperamide hcl CAPS	23
lidocaine hcl GEL 2 %	71	lisdexamfetamine dimesylate CAPS 1	1	LOPID TABS (gemfibrozil)	30
lidocaine hcl LOTN	71	lisdexamfetamine dimesylate CHEW	1	lopinavir-ritonavir SOLN	48
lidocaine hcl PRSY	71	lisinopril & hydrochlorothiazide	32	lopinavir-ritonavir TABS	48
lidocaine hcl SOLN	71	lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG	31	LOPRESSOR TABS (metoprolol tartrate)	50
lidocaine OINT 5 %	71	LITETOUCH INSULIN SYRINGE	89	LOPROX SHAM (ciclopirox)	64
lidocaine PTCH 5 %	71	lithium carbonate CAPS	45	LOPROX SUSP (ciclopirox olamine)	64
lidocaine-hydrocortisone acetate (rectal) KIT 2.5 %-3 %	10	lithium carbonate TABS	45	LOQTORZI	38
lidocaine-prilocaine CREA	71	lithium carbonate TBCR	45	lorazepam CONC	11
LIDODERM PTCH (lidocaine)	71	LITHOBID TBCR (lithium carbonate)	45	lorazepam TABS	11
LIDODOSE GEL	71	LITHOSTAT	80	LORBRENA	42
LIDODOSE PEDIATRIC BULK PACK GEL	71	LIVALO (pitavastatin calcium)	31	LORTAB ELIX	8
LIDORX GEL	71	LIVER DETOX TABS	101	losartan potassium & hydrochlorothiazide	33
LILETTA (52 MG)	59	L-METHYLFOLATE FORTE	73	losartan potassium	32
LINCOCIN (lincomycin hcl)	35	I-methylfolate TABS 7.5 MG, 15 MG	73	LOSEASONIQUE (levonorgestrel-ethinyl estradiol (91-day))	58
lincomycin hcl	35	L-METHYLFOLATE TABS	73	LOTEMAX GEL (loteprednol etabonate)	111
lindane SHAM	72	L-METHYLFOLATE-ALGAE	73	LOTEMAX OINT	111
		LO LOESTRIN FE TABS	57	LOCOID LIPOCREAM	69

LOTEMAX SUSP (loteprednol etabonate)	111	LUMIZYME	76	LYTGOBI (12 MG DAILY DOSE)	42
LOTENSIN 10 MG, 20 MG, 40 MG (benazepril hcl)	31	LUMOXITI	38	LYTGOBI (16 MG DAILY DOSE)	42
LOTENSIN HCT 12.5 MG-10 MG, 12.5 MG-20 MG, 25 MG-20 MG (benazepril & hydrochlorothiazide)	33	LUNESTA (eszopiclone)	84	LYTGOBI (20 MG DAILY DOSE)	42
loteprednol etabonate GEL	111	LUNSUMIO	38	MACROBID (nitrofurantoin monohyd macro)	35
loteprednol etabonate SUSP	111	LUPRON DEPOT (1-MONTH) KIT IM	40	MACRODANTIN (nitrofurantoin macrocrystal)	35
LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (amlodipine besylate-benazepril hcl)	33	LUPRON DEPOT (3-MONTH) KIT IM	40	mafenide acetate PACK	66
LOTRONEX (alosetron hcl)	79	LUPRON DEPOT (4-MONTH) IM	40	MAGELLAN INSULIN SAFETY SYR	89
lovastatin TABS	31	LUPRON DEPOT (6-MONTH) IM	40	magnesium sulfate IJ 50 %	92
LOVAZA (omega-3-acid ethyl esters)	30	LUPRON DEPOT-PED (1-MONTH)	75	MAGNESIUM SULFATE IJ 50 %	92
LOVENOX SOLN IJ 300 MG/3ML (enoxaparin sodium)	15	LUPRON DEPOT-PED (3-MONTH)	75	MAGNESIUM SULFATE IV (magnesium sulfate)	92
LOVENOX SOSY 100 MG/ML, 150 MG/ML (enoxaparin sodium)	15	LUPRON DEPOT-PED (6-MONTH) IM	75	MAKENA OIL (hydroxyprogesterone caproate)	114
LOVENOX SOSY 30 MG/0.3ML (enoxaparin sodium)	15	Iurasidone hcl 120 MG	45	MAKENA SOAJ	114
LOVENOX SOSY 40 MG/0.4ML (enoxaparin sodium)	15	Iurasidone hcl 20 MG, 40 MG, 60 MG, 80 MG	45	MALARONE (atovaquone-proguanil hcl)	35
LOVENOX SOSY 60 MG/0.6ML (enoxaparin sodium)	15	LUTATHERA	43	malathion	72
LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML (enoxaparin sodium)	15	LUTEIN-ZEAXANTHIN TABS 60 MG-5 MG-1 MG-15 MG-1 MG-750 MCG-20 MG	101	maraviroc TABS	48
loxapine succinate	46	LUXIQ FOAM (betamethasone valerate)	69	MARGENZA	39
lubiprostone	78	LUZU (luliconazole)	64	MARINOL CAPS (dronabinol)	24
LUCEMYRA (lofexidine hcl)	115	LYNPARZA TABS	42	MARPLAN	18
luliconazole	64	LYRICA CAPS 150 MG, 225 MG, 300 MG (pregabalin)	16	MATULANE	43
LUMAKRAS	42	LYRICA CAPS 25 MG, 50 MG, 75 MG, 100 MG, 200 MG (pregabalin)	17	MAVENCLAD (10 TABS)	116
LUMIGAN SOLN 0.01 %	112	LYRICA SOLN (pregabalin)	17	MAVENCLAD (4 TABS)	116
		LYSODREN	40	MAVENCLAD (5 TABS)	116
				MAVENCLAD (6 TABS)	116
				MAVENCLAD (7 TABS)	116
				MAVENCLAD (8 TABS)	116
				MAVENCLAD (9 TABS)	116

MAVYRET TABS	50	mefloquine hcl	35	TABS	101
MAXI-COMFORT INSULIN SYRINGE	89	MEGA MULTI FOR WOMEN TABS 101		MENS MULTI VITAMIN & MINERAL TABS	101
MAXICOMFORT SYR 27G X 1/2"	89	MEGA MULTI MEN TABS	101	MENS MULTIVITAMIN TABS	101
MAXIDEX SUSP OP	111	MEGAVITE FRUITS & VEGGIES TABS	101	MENVEO SOLN	125
MAXITROL OINT (neomycin-polymyxin-dexameth)	111	MEGAVITE GOLDEN YEARS 55+ TABS	101	MENVEO SOLR	125
MAXITROL SUSP (neomycin-polymyxin-dexameth)	111	megestrol acetate (appetite)	114	meperidine hcl SOLN PO 50 MG/5ML	7
MAXX MISC	86	megestrol acetate SUSP	40	meperidine hcl TABS 50 MG	7
MAXX PLUS MISC	86	megestrol acetate TABS	40	MEPHYTON TABS (phytonadione) 128	
MAXZIDE TABS (triamterene & hydrochlorothiazide)	73	MEKINIST SOLR	42	meprobamate	11
MAXZIDE-25 TABS (triamterene & hydrochlorothiazide)	73	MEKINIST TABS	42	MEPRON (atovaquone)	34
MAYZENT STARTER PACK TBPK 0.25 MG	116	MEKTOVI	42	mercaptopurine SUSP 2000 MG/100ML	37
meclizine hcl TABS 12.5 MG, 25 MG, 50 MG	24	MELOXICAM SUSP (meloxicam)	4	mercaptopurine TABS	37
meclofenamate sodium CAPS	4	meloxicam SUSP	4	meropenem 500 MG	34
MEDI TAB TABS	101	meloxicam TABS 15 MG	4	mesalamine CP24	79
MEDIC INSULIN SYRINGE	89	meloxicam TABS 7.5 MG	4	mesalamine CPCR	79
MEDROL TABS 4 MG, 8 MG, 16 MG (methylprednisolone)	59	melphalan	37	mesalamine CPDR	79
MEDROL TABS	59	melphalan hcl IV	37	mesalamine ENEM	79
MEDROL TBPK (methylprednisolone)	59	memantine hcl CP24	115	mesalamine SUPP	79
medroxyprogesterone acetate (contraceptive) SUSP IM	59	memantine hcl SOLN 2 MG/ML	115	mesalamine TBEC	79
medroxyprogesterone acetate (contraceptive) SUSY IM	59	memantine hcl TABS	115	mesalamine w/ cleanser	79
medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG	114	MENACTRA	125	mesna SOLN	44
mefenamic acid CAPS	4	MENEST	78	mesna TABS	44
		MENOSTAR PTWK	78	MESNEX SOLN (mesna)	44
		MENQUADFI	125	MESNEX TABS	44
		MENS 50+ MULTI VITAMIN/MIN TABS	101	MESTINON SOLN PO (pyridostigmine bromide)	36
		MENS 50+ MULTIVITAMIN TABS 101		MESTINON TABS (pyridostigmine bromide)	36
		MENS MULTI HEALTH FORMULA			

MESTINON TBCR (pyridostigmine bromide)	36	methotrexate sodium TABS 2.5 MG 37	metoclopramide hcl TBDP 78
METADATE CD CPCR 10 MG, 40 MG, 50 MG, 60 MG (methylphenidate hcl)	2	methoxsalen rapid 66	metolazone 74
METADATE CD CPCR 20 MG, 30 MG (methylphenidate hcl)	2	methscopolamine bromide 122	METOPIRONE 72
metaxalone 800 MG	107	methsuximide 18	metoprolol & hydrochlorothiazide TABS 33
metformin hcl SOLN	21	methyldopa TABS 32	metoprolol succinate TB24 50
metformin hcl TABS 500 MG, 1000 MG	21	methylergonovine maleate TABS 113	metoprolol tartrate TABS 50
metformin hcl TABS 850 MG	21	METHYLIN SOLN (methylphenidate hcl)	METROCREAM CREA (metronidazole (topical)) 71
metformin hcl TB24 500 MG, 1000 MG	21	methylphenidate hcl CHEW 2	METROLOTION LOTN (metronidazole (topical)) 71
metformin hcl TB24 500 MG, 750 MG	21	methylphenidate hcl CP24 2	metronidazole (topical) CREA 71
methadone hcl CONC	7	methylphenidate hcl CPCR 10 MG, 40 MG, 50 MG, 60 MG	metronidazole (topical) GEL 0.75 % 71
METHADONE HCL SOLN IJ (methadone hcl)	7	methylphenidate hcl CPCR 20 MG, 30 MG	metronidazole (topical) GEL 1 % .. 71
methadone hcl SOLN IJ 10 MG/ML .7	7	methylphenidate hcl SOLN	metronidazole (topical) LOTN 72
methadone hcl SOLN PO	7	methylphenidate hcl TABS	metronidazole CAPS 33
methadone hcl TABS	7	methylphenidate hcl TB24 18 MG, 27 MG	METRONIDAZOLE SOLN (metronidazole) 33
methadone hcl TBSO	7	methylphenidate hcl TB24 36 MG ..	metronidazole SOLN 33
methamphetamine hcl	1	methylphenidate hcl TBCR 10 MG, 18 MG, 20 MG, 27 MG, 54 MG, 72 MG	metronidazole TABS 250 MG, 500 MG
methazolamide TABS	73	methylphenidate hcl TBCR 36 MG ..	33
methenamine hippurate	35	methylphenidate hcl TBCR 45 MG, 63 MG	metronidazole vaginal 127
methenamine mandelate	35	methylphenidate hcl PTCH	metyrosine 31
methimazole TABS	120	methylprednisolone TABS	mexiletine hcl 11
methocarbamol TABS 500 MG, 750 MG	107	methylprednisolone TBPK	MG217 PSORIASIS MULTI-SYMPOTOM OINT 70
methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML	37	methyltestosterone CAPS	MIACALCIN IJ (calcitonin (salmon)) 74
methotrexate sodium SOLR	37	metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML	24
		metoclopramide hcl TABS	MICAFUNGIN SODIUM 24
			MICARDIS (telmisartan) 32
			MICARDIS HCT (telmisartan-

hydrochlorothiazide)	33	(topical))	72	montelukast sodium TABS	12
miconazole-zinc oxide-white petrolatum	64	misoprostol	124	MONUROL (fosfomycin tromethamine)	35
midazolam hcl SYRP	84	MITIGARE CAPS (colchicine)	81	morphine sulfate beads	7
midodrine hcl	127	mitoxantrone hcl 20 MG/10ML, 30 MG/15ML	41	morphine sulfate CP24 10 MG, 50 MG	7
mifepristone (hyperglycemia)	21	mitoxantrone hcl 25 MG/12.5ML	41	morphine sulfate CP24 20 MG, 30 MG, 60 MG, 80 MG, 100 MG	7
miglitol	20	MM INSULIN SYRINGE/NEEDLE 89		morphine sulfate SOLN IJ 0.5 MG/ML, 1 MG/ML	8
miglustat	81	M-M-R II SOLR	126	morphine sulfate SOLN PO 10 MG/5ML, 20 MG/5ML, 20 MG/ML, 100 MG/5ML	8
MIGRALAN SOLN NA (dihydroergotamine mesylate)	90	M-NATAL PLUS TABS	105	morphine sulfate SUPP	8
MILLIPRED TABS	59	modafinil	2	morphine sulfate TABS	8
MINASTRIN 24 FE CHEW (norethin acet & estrad-fe)	58	MODERNA COVID-19 BIVAL 6M-5Y	126	morphine sulfate TBCR	8
MINIPRESS CAPS (prazosin hcl) ..	32	MODERNA COVID-19 BIVALENT 126		MOTOFEN	23
MINIVELLE PTTW (estradiol)	78	MODERNA COVID-19 VAC (BOOSTER) SUSP	126	MOVANTIK	79
minocycline hcl CAPS	120	MODERNA COVID-19 VAC 6M-11Y SUSP	126	MOVIPREP (peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid) 84	
minocycline hcl TABS	120	MODERNA COVID-19 VAC 6M-11Y SUSP	126	moxifloxacin hcl (ophth) SOLN OP 110	
minocycline hcl TB24	120	MODERNA COVID-19 VAC 6M-11Y SUSY	126	moxifloxacin hcl TABS	78
minoxidil 2.5 MG, 10 MG	33	moexipril hcl	31	MOZOBIL (plerixafor)	83
MIRALAX POWD (polyethylene glycol 3350)	85	molindone hcl	46	MS CONTIN TBCR (morphine sulfate)	8
MIRAPEX ER TB24 (pramipexole dihydrochloride)	45	mometasone furoate (nasal) SUSP 108		MS INSULIN SYRINGE	89
MIRCERA 30 MCG/0.3ML, 50 MCG/0.3ML, 75 MCG/0.3ML, 100 MCG/0.3ML, 150 MCG/0.3ML, 200 MCG/0.3ML	82	mometasone furoate CREA	69	MUCOTROL WAFR	95
MIRCETTE (desogestrel-ethinyl estradiol (biphasic))	58	mometasone furoate OINT	69	MULPLETA	82
MIRENA (52 MG)	59	mometasone furoate SOLN	69	MULTI-BETIC DIABETES TABS .101	
mirtazapine TABS	18	MONJUVI	38	multiple vitamins w/ minerals TABS 101	
mirtazapine TBDP	18	MONOJECT INSULIN SYRINGE .89		MULTITOL-M TABS	101
MIRVASO (brimonidine tartrate		MONOJECT ULTRA COMFORT SYRINGE	89		
		montelukast sodium CHEW	12		
		montelukast sodium PACK	12		

MULTIVITAMIN + FLUORIDE CHEW	104	MYLERAN TABS	37	naproxen sodium TABS 275 MG, 550 MG	4
MULTIVITAMIN ADULT (MINERALS) TABS	101	mysoline (primidone)	17	naproxen sodium TB24	4
MULTIVITAMIN MEN TABS	101	MYTESI	22	naproxen SUSP	4
MULTI-VITAMIN MONOCAPS TABS 101		nabumetone 500 MG	4	naproxen TABS	4
MULTIVITAMIN WOMEN TABS . 101		nabumetone 750 MG	4	naproxen TBEC	4
MULTIVITAMIN/FLUORIDE CHEW 104		nadolol TABS 20 MG, 40 MG, 80 MG	51	naproxen-esomeprazole magnesium	4
MULTIVITAMIN/FLUORIDE SOLN 104		NAFCILLIN SODIUM IN DEXTROSE 1 GM/50ML	114	naratriptan hcl	91
MULTIVITAMIN/ZINC STRESS TABS	101	nafcillin sodium IV 2 GM, 10 GM .	114	NARCAN LIQD (naloxone hcl)	23
MULTIVITAMIN-MINERALS TABS 101		naftifine hcl CREA	64	NARDIL (phenelzine sulfate)	18
MULTI-VIT-FLOR CHEW	104	naftifine hcl GEL 2 %	64	NASONEX 24HR SUSP (mometasone furoate (nasal))	108
mupirocin OINT	63	NAFTIN GEL 1 %	64	NATACHEW CHEW 120 MG-10 MG-20 UNIT-1 MG-400 UNIT-12 MCG-3 MG-20 MG-2 MG-2700 UNIT-28 MG 105	
MVASI	38	NAFTIN GEL 2 % (naftifine hcl) ...	64	NATACYN	110
MYALEPT	76	NAGLAZYME	76	NATAZIA	58
MYAMBUTOL TABS 400 MG (ethambutol hcl)	36	NALFON CAPS (fenoprofen calcium)	4	NALOCET TABS	8
MYCAMINE (micafungin sodium) .24		NALFON TABS 600 MG	4	nateglinide	22
MYCOBUTIN (rifabutin)	36	NALOCET TABS	8	naloxone hcl LIQD	23
mycophenolate mofetil CAPS	94	naltrexone hcl	23	naloxone hcl SOSY 2 MG/2ML	23
mycophenolate mofetil hcl	94	NAMENDA TABS (memantine hcl) 115		NATPARA	74
mycophenolate mofetil SUSR	94	NAMENDA TITRATION PAK TABS (memantine hcl)	115	NATROBA (spinosad)	72
mycophenolate mofetil TABS	94	NAMENDA XR CP24 (memantine hcl)	115	NAT-RUL THERAVITE-M TABS .101	
mycophenolate sodium	94	NAPRELAN TB24 (naproxen sodium)	4	NATRUL-VITES TABS	101
MYDRIACYL SOLN (tropicamide) 109		NAPROSYN SUSP (naproxen)	4	NAYZILAM	15
MYFORTIC (mycophenolate sodium)	94	NAPROSYN TABS 500 MG (naproxen)	4	nebivolol hcl	50

nefazodone hcl	19	NESTABS DHA	105	NICODERM CQ PT24 TD (nicotine) ..
nelarabine	37	NESTABS ONE	105	119
neomycin sulfate TABS	2	NEUPRO 1 MG/24HR, 2 MG/24HR		NICORETTE GUM (nicotine
		45		polacrilex)
		NEUPRO 3 MG/24HR, 4 MG/24HR,		119
		6 MG/24HR, 8 MG/24HR	45	NICORETTE LOZG (nicotine
		NEURONTIN CAPS (gabapentin) .	17	polacrilex)
		NEURONTIN SOLN (gabapentin) .	17	119
neomycin-polmy-dexameth OINT		NEURONTIN TABS (gabapentin) .	17	NICORETTE STARTER KIT GUM
111		NEUTROGENA CLEAR PORE LIQD		(nicotine polacrilex)
neomycin-polmy-dexameth SUSP		NEVANAC	112	119
111		nevirapine SUSP	48	nicotine polacrilex GUM
neomycin-polmyxin-hc (ophth) .	111	nevirapine TABS	48	119
neomycin-polmyxin-hc (otic) SOLN .	113	nevirapine TB24	48	nicotine polacrilex LOZG
neomycin-polmyxin-hc (otic) SUSP .		NEXAVAR (sorafenib tosylate) ...	42	119
113		NEXICLON XR TB24 (clonidine) ..	32	NICOTROL INHA
NEONATAL + DHA MISC	105	NEXIUM 24HR CLEAR MINIS CPDR		119
NEONATAL 19	105	(esomeprazole magnesium)	124	NICOTROL NS SOLN
NEONATAL COMPLETE TABS	120	NEXIUM 24HR CPDR		119
MG-10 MG-9.2 MG-1000 MCG-10		(esomeprazole magnesium)	124	nifedipine CAPS
MCG-12 MCG-3 MG-5 MG-20 MG-		NEXIUM CPDR (esomeprazole		51
27 MG-200 MG-1.84 MG-25 MG-2		magnesium)	124	nifedipine TB24 30 MG, 60 MG ..
MG-1200 MCG-2 MG-0.2 MG	105	magnessium)	124	51
NEONATAL FE	105	NEXIUM PACK (esomeprazole		nifedipine TB24
NEONATAL PLUS TABS	105	magnesium)	124	40
NEORAL CAPS (cyclosporine		NEXPLANON	59	NILANDRON (nilutamide)
modified (for microemulsion))	94	NEXTSTELLIS	58	40
NEORAL SOLN (cyclosporine		niacin (antihyperlipidemic) TBCR ..	31	nilutamide
modified (for microemulsion))	94	NICADAN TABS	101	40
NEO-SYNALAR	63	nicardipine hcl CAPS	51	nimodipine CAPS
NEOTUSS PLUS LIQD	60	NICAZEL FORTE TABS	101	51
NEOVITE TABS	101	NICAZEL TABS	101	nimodipine SOLN
NERLYNX	42			51
NESTABS	105			NINLARO
				42
				nisoldipine
				51
				nitazoxanide TABS
				34
				nitisinone CAPS
				76
				NITRO-BID OINT
				10
				NITRO-DUR PT24 (nitroglycerin) ..
				11
				NITRO-DUR PT24
				10
				nitrofurantoin
				35

nitrofurantoin macrocrystal	35	norethindrone acetate-ethinyl estradiol	77	NUTRICAP TABS	101
nitrofurantoin monohyd macro	35	norethindrone acetate-ethinyl estradiol-fe	58	NUTROPIN AQ NUSPIN 10 SOPN	
nitroglycerin (intra-anal)	10	norgestimate-ethinyl estradiol (triphasic)	58	75	
nitroglycerin PT24	11	norgestimate-ethinyl estradiol	58	NUTROPIN AQ NUSPIN 20 SOPN	
nitroglycerin SOLN TL 0.4 MG/SPRAY	11	NORITATE CREA	72	75	
nitroglycerin SUBL	11	NORMOSOL-R PH 7.4	92	NUTROPIN AQ NUSPIN 5 SOPN	.75
NITROLINGUAL SOLN TL (nitroglycerin)	11	NORPRAMIN TABS 10 MG, 25 MG (desipramine hcl)	20	NUVARING (etonogestrel-ethinyl estradiol)	58
NITROSTAT SUBL (nitroglycerin) .11		NORTHERA (droxidopa)	127	NUVIGIL 200 MG (armodafinil)	2
NITYR TABS	76	nortriptyline hcl CAPS	20	NUVIGIL 50 MG, 150 MG, 250 MG (armodafinil)	2
NIVA THYROID TABS	120	NORVASC TABS (amlodipine besylate)	52	NYSTATIN (nystatin (mouth-throat)) .	
NIVA-FOL	73	NORVIR CAPS	48	95	
NIVA-PLUS TABS	105	NORVIR TABS (ritonavir)	48	nystatin (mouth-throat)	95
nizatidine CAPS	122	NOVAVAX COVID-19 VACCINE SUSP	126	nystatin (topical) CREA	64
NO IRON MULT VITAMIN- MINERALS TABS	101	NOVAVAX COVID-19 VACCINE SUSY	126	nystatin (topical) OINT	64
NORDITROPIN FLEXPRO SOPN 15 MG/1.5ML, 30 MG/3ML	75	NOXAFIL SUSP (posaconazole) ..25		nystatin TABS	24
NORDITROPIN FLEXPRO SOPN 5 MG/1.5ML, 10 MG/1.5ML	75	NOXAFIL TBEC (posaconazole) ..25		nystatin-triamcinolone CREA	64
norelgestromin-ethinyl estradiol ..	58	NP THYROID TABS	120	nystatin-triamcinolone OINT	64
norethin acet & estrad-fe CAPS ...	58	NUBEQA	40	NYVEPRIA	82
norethin acet & estrad-fe CHEW ..	58	NUCALA SOAJ	12	OB COMPLETE ONE	105
norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG	58	NUCALA SOSY 100 MG/ML	12	OB COMPLETE PETITE	105
norethindrone & ethinyl estradiol-fe 58		NUCORT LOTN	69	OB COMPLETE PREMIER	105
norethindrone (contraceptive)	59	NUEDEXTA	116	OB COMPLETE/DHA	106
norethindrone acet & eth estra TABS 58		NULOJIX	94	OBSTETRIX ONE (WITH DOCUSATE)	106
norethindrone acetate TABS	114	NUPLAZID CAPS	45	OCALIVA	78
		NUPLAZID TABS 10 MG	45	OCTAGAM SOLN 1 GM/20ML, 2 GM/20ML, 5 GM/50ML, 10 GM/200ML, 20 GM/200ML	113
				octreotide acetate KIT	76
				octreotide acetate SOLN	76
				OCUFLOX (ofloxacin (ophth)) ...	110

OCULAR VITAMINS TABS	101	ALKA SUSP	124	ONE A DAY TRIPLE IMMUNE SUPPRT TABS	101
ODACTRA SUBL	2	omeprazole-sodium bicarbonate CAPS 1100 MG-40 MG	124	ONE A DAY WOMEN 50 PLUS TABS	101
ODEFSEY	48	omeprazole-sodium bicarbonate PACK	124	ONE DAILY MEN FORMULA W/O IRON TABS	101
ODOMZO	39	OMISIRGE	39	ONE DAILY MENS 50+ MULTIVIT TABS	101
OFEV	119	OMNARIS SUSP	108	ONE DAILY MULTIVITAMIN WOMEN TABS	102
ofloxacin (ophth)	110	OMNIPOD 5 DEXG7G6 INTRO GEN 5 KIT	87	ONE DAILY WOMENS TABS	102
ofloxacin (otic)	112	OMNIPOD 5 DEXG7G6 PODS GEN 5 MISC	87	ONE VITE WOMENS PLUS TABS 106	
ofloxacin 300 MG, 400 MG	78	OMNIPOD 5 G7 INTRO (GEN 5) KIT 87		ONE-A-DAY ENERGY TABS	102
OGIVRI	39	OMNIPOD 5 G7 PODS (GEN 5) MISC	87	ONE-A-DAY MENOPAUSE FORMULA TABS	102
OGSIVEO	42	OMNIPOD CLASSIC PODS (GEN 3) MISC	87	ONE-A-DAY MENS (MINERALS) TABS	102
OJEMDA SUSR	42	OMNIPOD DASH INTRO (GEN 4) KIT	87	ONE-A-DAY MENS 50+ ADVANTAGE TABS	102
OJEMDA TABS	42	OMNIPOD DASH PDM (GEN 4) KIT ..		ONE-A-DAY MENS 50+ TABS ...	102
OJJAARA	42	87		ONE-A-DAY MENS HEALTH FORMULA TABS	102
olanzapine SOLR	46	OMNIPOD DASH PODS (GEN 4) MISC	87	ONE-A-DAY MENS PRO EDGE TABS	102
olanzapine TABS	46	OMNITROPE SOLR SC	75	ONE-A-DAY PROACTIVE 65+ TABS	102
olanzapine TBDP	46	ONCASPAR	43	ONE-A-DAY TEEN ADVANTAGE/HIM TABS	102
olanzapine-fluoxetine hcl	115	ONCOVITE TABS	101	ONE-A-DAY WEIGHT SMART ADVANCE TABS (multiple vitamins w/ minerals)	102
olmesartan medoxomil	32	ondansetron hcl SOLN PO 4 MG/5ML	23	ONE-A-DAY WOMENS 50 PLUS TABS (multiple vitamins w/ minerals) 102	
olmesartan medoxomil-amlodipine- hydrochlorothiazide	33	ondansetron hcl TABS 4 MG, 8 MG 23		ONE-A-DAY WOMENS 50+ 101	
olmesartan medoxomil- hydrochlorothiazide	33	ondansetron TBDP 4 MG, 8 MG ..	23		
olopatadine hcl (nasal)	108	ONE A DAY ENERGY TABS	101		
olopatadine hcl 0.1 %	112	ONE A DAY MEN 50 PLUS TABS 101			
olopatadine hcl 0.2 %	112				
OLUX-E (clobetasol propionate emulsion)	69				
omega-3-acid ethyl esters	30				
omeprazole CPDR	124				
omeprazole magnesium CPDR ..	124				
OMEPRAZOLE+SYRSPEND SF					

ADVANTAGE TABS (multiple vitamins w/ minerals)	102	CONTRACEPTIVE GEL	126	OTEZLA TABS	5
ONE-A-DAY WOMENS 50+ TABS	102	OPTIVITE P.M.T. TABS (multiple vitamins w/ minerals)	102	OTEZLA TBPK	5
ONE-A-DAY WOMENS HEALTHY SKIN TABS (multiple vitamins w/ minerals)	102	OPURITY TABS	102	OTOVEL (ciprofloxacin-fluocinolone acetonide)	113
ONE-A-DAY WOMENS MIND & BODY TABS (multiple vitamins w/ minerals)	102	ORACEA (doxycycline (rosacea))	72	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
ONE-A-DAY WOMENS PETITES TABS (multiple vitamins w/ minerals)	102	ORACIT	80	OVACE PLUS SHAM (sulfacetamide sodium)	66
ONE-A-DAY WOMENS TABS ...	102	ORAFATE PSTE	95	OVACE PLUS WASH LIQD (sulfacetamide sodium)	66
ONETOUCH ULTRA 2 KIT	87	ORAL CITRATE	80	OVACE WASH LIQD (sulfacetamide sodium)	66
ONETOUCH ULTRA BLUE TEST STRP	72	ORALAIR SUBL	2	OVIDE (malathion)	72
ONETOUCH ULTRA MINI KIT	87	ORAPRED ODT TBDP (prednisolone sodium phosphate)	59	OXACILLIN SODIUM IN DEXTROSE	114
ONETOUCH ULTRA STRP	72	ORAVIG	95	oxacillin sodium IV 10 GM	114
ONETOUCH ULTRA TEST STRP .	72	ORENITRAM TBCR	52	oxandrolone	9
ONETOUCH VERIO STRP	72	ORFADIN CAPS (nitisinone)	76	oxaprozin TABS	4
ONEVITE TABS	102	ORFADIN SUSP	76	OXAYDO TABS 5 MG	8
ONFI SUSP (clobazam)	15	ORGOVYX	40	OXAYDO TABS 7.5 MG	8
ONFI TABS (clobazam)	15	ORKAMBI PACK	119	oxazepam CAPS	11
ONIVYDE	44	ORKAMBI TABS	119	oxcarbazepine SUSP	17
ONTRUZANT	39	orphenadrine citrate TB12	107	oxcarbazepine TABS	17
ONUREG TABS	37	orphenadrine w/ aspirin & caff 385 MG-30 MG-25 MG	107	oxcarbazepine TB24	17
OPDIVO	38	ORSERDU	40	oxiconazole nitrate CREA	64
OPDUALAG	41	oseltamivir phosphate CAPS 30 MG, 45 MG	50	OXISTAT LOTN	64
OPILL	59	oseltamivir phosphate CAPS 75 MG . 50		OXTELLAR XR TB24 (oxcarbazepine)	17
opium tincture	23	oseltamivir phosphate SUSR	50	oxybutynin chloride TABS 5 MG . 124	
OPSUMIT	52	OSMOLEX ER T4PK	45	oxybutynin chloride TB24	124
OPTIONS GYNOL II		OSMOLEX ER TB24 129 MG, 193 MG	45	oxycodone hcl CAPS	8
		OSPHENA	75		
		OSTEOPRIME PLUS TABS	102		

oxycodone hcl CONC 100 MG/5ML	8	PANCREAZE CPEP 149900 UNIT-97300 UNIT-37000 UNIT, 15200 UNIT-8800 UNIT-2600 UNIT, 24600 UNIT-14200 UNIT-4200 UNIT, 61500 UNIT-35500 UNIT-10500 UNIT, 83900 UNIT-54700 UNIT-21000 UNIT, 98400 UNIT-56800 UNIT-16800 UNIT	73	pazopanib hcl	42
oxycodone hcl T12A 10 MG, 20 MG, 40 MG, 80 MG	8	PEDIARIX SUSY	121		
oxycodone hcl TABS	8	pediatric multivitamins w/fl CHEW			
oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-2.5 MG, 325 MG-5 MG, 325 MG-7.5 MG	8	104			
OXYCODONE-ACETAMINOPHEN TABS	8	PEDMARK	44		
oxymorphone hcl TABS	8	PEDVAX HIB SUSP	125		
oxymorphone hcl TB12 5 MG, 10 MG, 20 MG, 40 MG	8	peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid	84		
OXYTROL FOR WOMEN PTTW	.124	peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR	84		
OXYTROL PTTW .....	.124	peg 3350-potassium chloride-sod bicarbonate-sod chloride	84		
OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN	21	PEGASYS SOLN	50		
OZEMPIC (1 MG/DOSE) SOPN 4 MG/3ML	21	PEGASYS SOSY	50		
OZEMPIC (2 MG/DOSE) SOPN	21	PEG-PREP	84		
paclitaxel 100 MG/16.7ML	44	PEMAZYRE	42		
PACLITAXEL PROTEIN-BOUND PART	44	PEMETREXED	37		
paclitaxel protein-bound particles	44	PEMETREXED DISODIUM SOLN	37		
PADCEV .....	.38	pemetrexed disodium SOLR 100 MG, 500 MG	37		
paliperidone	46	pemetrexed disodium SOLR 750 MG, 1000 MG	37		
palonosetron hcl SOLN	23	PEMETREXED DITROMETHAMINE	37		
PALONOSETRON HCL SOLN	23	PEMFEXY	38		
PALYNZIQ .....	.76	PEMRYDI RTU SOLN	38		
PAMELOR CAPS (nortriptyline hcl) 20		PENBRAYA	125		
pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML	74	penciclovir	66		
PAMIDRONATE DISODIUM SOLN	74	penicillamine CAPS	93		
		penicillamine TABS	93		
		PENICILLIN G POT IN DEXTROSE ..			
		114			
		penicillin g potassium 5000000 UNIT,			

20000000 UNIT	114	PEXEVA 10 MG, 20 MG, 30 MG ..	19	PHYTOMULTI TABS	102
PENICILLIN G PROCAINE	114	PFIZER COVID-19 BIVAL 6MO-4YR	126	phytonadione TABS 5 MG	128
penicillin g sodium	114	PFIZER COVID-19 VAC BIVAL 5-11	126	PIFELTRO	48
penicillin v potassium SOLR	114	PFIZER COVID-19 VAC BIVALENT ..	126	pilocarpine hcl (oral)	95
penicillin v potassium TABS	114	PFIZER COVID-19 VAC-TRIS 5-11Y ..	126	pilocarpine hcl SOLN 1 %, 2 %, 4 % ..	109
PENLEN EMUL	71	SUSP	126	pimecrolimus	70
PENNSAID SOLN EX 2 % (diclofenac sodium (topical))	65	PFIZER COVID-19 VAC-TRIS 6M-4Y ..	126	pimozide	116
PENTACEL	121	SUSP	126	pindolol TABS	51
pentamidine isethionate IN	33	PFIZER-BIONT COVID-19 VAC-TRIS SUSP	126	pioglitazone hcl	22
PENTASA CPCR	79	phenazopyridine hcl TABS 100 MG, 200 MG	80	pioglitazone hcl-glimepiride	20
pentazocine w/ naloxone hcl	9	phenelzine sulfate	19	pioglitazone hcl-metformin hcl TABS ..	20
pentoxifylline	81	PHENERGAN SOLN IJ (promethazine hcl)	29	piperacillin sodium-tazobactam sodium 2 GM-0.25 GM, 3 GM-0.375 GM, 4 GM-0.5 GM	114
PEPCID AC MAXIMUM STRENGTH TABS (famotidine)	122	phenobarbital ELIX	83	PIQRAY (200 MG DAILY DOSE) ..	42
PEPCID TABS 20 MG (famotidine)	122	phenobarbital TABS	83	PIQRAY (250 MG DAILY DOSE) ..	42
PEPCID TABS 40 MG (famotidine)	122	phenoxybenzamine hcl	31	PIQRAY (300 MG DAILY DOSE) ..	42
PERCOCET TABS 325 MG-10 MG, 325 MG-2.5 MG, 325 MG-5 MG, 325 MG-7.5 MG (oxycodone w/ acetaminophen)	9	PHENYLEPHRINE HCL SOLN (phenylephrine hcl (mydriatic)) ..	109	pirfenidone CAPS	119
PERFOROMIST NEBU (formoterol fumarate)	13	phenytoin CHEW	18	pirfenidone TABS	119
PERIDEX (chlorhexidine gluconate (mouth-throat))	95	phenytoin sodium extended 100 MG, 200 MG, 300 MG	18	piroxicam CAPS	4
perindopril erbumine	31	phenytoin sodium SOLN	18	pitavastatin calcium	31
PERJETA	39	phenytoin SUSP	18	PLAN B ONE-STEP (levonorgestrel (emergency oc))	59
permethrin CREA	72	PHESGO	41	PLASMA-LYTE 148 27 MEQ/L-23 MEQ/L-98 MEQ/L-140 MEQ/L-3 MEQ/L-5 MEQ/L	92
perphenazine TABS	46	PHEXXI	127	PLASMA-LYTE A (electrolyte-a) ..	92
perphenazine-amitriptyline	115	PHLAG SPRAY EMUL	71	PLAVIX 75 MG (clopidogrel bisulfate)	81
PERSERIS PRSY	46	PHOTOFRIN	43	PLEGRIDY SOAJ	116
				PLEGRIDY SOSY IM	116

PLEGRIDY STARTER PACK SOAJ .	POMALYST	40	LIQD	63
116	PORTRAZZA	39	pralatrexate	38
PLEGRIDY STARTER PACK SOSY SC	posaconazole SUSP	25	PRALUENT SOAJ	31
116	posaconazole TBEC	25	pramipexole dihydrochloride TABS 45	
PLENUV	POSFREA SOLN	23	pramipexole dihydrochloride TB24 45	
84	pot & sod citrates w/citric ac SOLN 80		PRAMOSONE CREA 1 %-1 %	69
plerixafor	pot phosphate monobasic w/ sod phosphate dibasic & monobasic ..	92	PRAMOSONE CREA 2.5 %-1 % (pramoxine-hc)	69
PLEXION CLEANSER LIQD (sulfacetamide sodium w/ sulfur) ..	potassium chloride CPCR	93	PRAMOSONE LOTN	69
63	POTASSIUM CHLORIDE IN NACL 20 MEQ/L-0.45 %, 20 MEQ/L-0.9 % (potassium chloride in nacl)	92	PRAMOSONE OINT	69
PLEXION CLEANSING CLOTH PADS	potassium chloride in nacl 20 MEQ/L-0.45 %, 20 MEQ/L-0.9 %	92	PRAMOTIC	113
63	potassium chloride		pramoxine-hc CREA 2.5 %-1 % ...	69
PLEXION CREA (sulfacetamide sodium w/ sulfur)	microencapsulated crystals er	93	prasugrel hcl	81
63	POTASSIUM CHLORIDE PACK PO 20 MEQ	93	pravastatin sodium 10 MG, 20 MG, 80 MG	31
PLUVICTO	POTASSIUM CHLORIDE SOLN IV 10 MEQ/100ML, 10 MEQ/50ML, 20 MEQ/50ML (potassium chloride)	93	pravastatin sodium 40 MG	31
43	potassium chloride SOLN IV 2 MEQ/ML, 10 MEQ/100ML, 10 MEQ/50ML, 20 MEQ/50ML, 20 MEQ/50ML	93	praziquantel	10
PNEUMOVAX 23 SOLN	PRECISION SURE-DOSE SYRINGE		prazosin hcl CAPS	32
125	POTASSIUM CHLORIDE SOLN		PRECISION XTRA BLOOD GLUCOSE STRP	72
PNEUMOVAX 23 SOSY	POTASSIUM CHLORIDE SOLN		PRECISION XTRA-GLUCOSE/KETONE DEVI	87
125	potassium chloride		PRED MILD	111
PNV-DHA+DOCUSATE	prednicarbate OINT		prednisolone acetate (ophth)	111
106	POTASSIUM CHLORIDE SOLN		PREDNISOLONE SODIUM PHOSPHATE	111
PNV-OMEGA	potassium chloride SOLN		prednisolone sodium phosphate SOLN 10 MG/5ML, 15 MG/5ML, 20 MG/5ML, 25 MG/5ML	60
106	PODOCON-25 SOLN			
70	podofilox GEL			
70	podofilox SOLN			
38	POLIVY			
38	polyethylene glycol 3350 POWD ..			
85	polymyxin b sulfate SOLR			
35	polymyxin b trimethoprim			
110	POLYTRIM (polymyxin b-trimethoprim)			
110	POLY-VI-FLOR CHEW			
104	POLY-VI-FLOR SUSP			
104	POLY-VI-FLOR/IRON CHEW			
104	POLY-VI-FLOR/IRON SUSP			
104	POTELIGEO	38		
	POVIDONE-IODINE	110		
	PR BENZOYL PEROXIDE WASH			

prednisolone sodium phosphate TBDP	60	MG-10 MCG-12 MCG-3 MG-20 MG- 1200 MCG-27 MG-200 MG-1.84 MG- 25 MG-2 MG-10 MG	106	PREZCOBIX	48
prednisolone SOLN	60	PRENATAL-U CAPS	106	PREZISTA SUSP	48
prednisolone TABS	60	PRENATE	106	PREZISTA TABS 600 MG (darunavir)	48
PREDNISONE INTENSOL CONC ..	60	PRENATE DHA 90 MG-26 MG-400 MCG-400 UNIT-25 MCG-155 MG-50		PREZISTA TABS 75 MG, 150 MG	48
prednisone SOLN	60	MG-300 MG-40 UNIT-600 MCG-18		PREZISTA TABS 800 MG (darunavir)	48
prednisone TABS	60	MG	106	PRIFTIN	36
prednisone TBPK	60	PRENATE ELITE 75 MG-21 MG-330 MCG-400 MCG-600 UNIT-13 MCG- 3.5 MG-21 MG-3 MG-155 MG-25		PRILOSEC PACK	124
PREFERRED PLUS INSULIN SYRINGE	89	MG-15 MG-1.5 MG-2600 UNIT-150		PRIMACARE	106
PREFEST	77	MCG-40 UNIT-600 MCG-20 MG .106		PRIMAQUINE PHOSPHATE TABS (primaquine phosphate)	35
pregabalin CAPS 150 MG, 225 MG, 300 MG	17	PRENATE ENHANCE	106	primaquine phosphate TABS	35
pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 200 MG	17	PRENATE ESSENTIAL 90 MG-26 MG-280 MCG-400 MCG-220 UNIT- 13 MCG-155 MG-50 MG-300 MG-		PRIMAXIN IV IV 500 MG-500 MG (imipenem-cilastatin)	34
pregabalin SOLN	17	150 MCG-10 UNIT-40 MG-600 MCG- 18 MG	106	primidone 50 MG, 250 MG	17
PREHEVBARIO	126	18 MG	106	PRIORIX SUSR	126
PREMARIN	127	PRENATE MINI 60 MG-26 MG-280 MCG-400 MCG-1000 UNIT-13 MCG- 80 MG-25 MG-350 MG-18 MG-150		PRIVIGEN SOLN 5 GM/50ML, 20 GM/200ML	113
PREMARIN SOLR	78	MCG-10 UNIT-600 MCG-25 MG .106		PRO COMFORT INSULIN SYRINGE	89
PREMARIN TABS	78	PRENATE PIXIE	106	PROAIR RESPICLICK AEPB	13
PREMPHASE	77	PRENATE RESTORE	106	probenecid	81
PREMPRO	77	PRENATRIX TABS	106	procainamide hcl SOLN	11
PRENA 1 TRUE	106	PRENATRYL TABS	106	PRO-CAL TABS	102
PRENA1 PEARL	106	PRESEVISION AREDS TABS ..102		PROCARDIA XL TB24 (nifedipine) 52	
PRENAISSANCE	106	PREVACID CPDR 30 MG (lansoprazole)	124	PROCERV HP TABS	102
PRENAISSANCE PLUS CAPS ..	106	PREVACID SOLUTAB TBDD (lansoprazole)	124	prochlorperazine	46
PRENATAL 19 CHEW	106	PREVNAR 13	125	prochlorperazine maleate TABS ..46	
PRENATAL 19 TABS	106	PREVNAR 20	125	PROCORT CREA EX	10
PRENATAL PLUS TABS	106	PREVYMIC TABS	49	PROCTOCORT (hydrocortisone acetate (rectal))	10
PRENATAL PLUS VITAMIN/MINERAL TABS	106				
PRENATAL TABS 120 MG-10 MG-1					

PROCTOFOAM HC FOAM EX	10	promethazine-phenylephrine-codeine	PRUDOXIN (doxepin hcl (antipruritic))	65
PROCYSBI CPDR	80	.....	.....	.....
PRODIGY INSULIN SYRINGE ...	89	PROMETRIUM CAPS (progesterone)	PULMICORT FLEXHALER AEPB	
.....	.....	.....	180 MCG/ACT	12
PROFOLA TABS	102	propafenone hcl CP12	PULMICORT FLEXHALER AEPB 90	
progesterone CAPS	114	propafenone hcl TABS 150 MG ...	MCG/ACT	12
progesterone OIL	114	propafenone hcl TABS 225 MG, 300	PULMICORT SUSP 0.5 MG/2ML	
PROGLYCEM (diazoxide)	21	MG	(budesonide (inhalation))	12
PROGRAF CAPS (tacrolimus)	94	proparacaine hcl	PULMICORT SUSP 1 MG/2ML	
PROGRAF PACK	94	propranolol hcl CP24	(budesonide (inhalation))	12
PROGRAF SOLN	94	propranolol hcl SOLN PO 20	PULMOZYME	119
PROLASTIN-C SOLN	119	MG/5ML, 40 MG/5ML	PURIXAN SUSP 2000 MG/100ML	
PROLASTIN-C SOLR	119	propranolol hcl TABS	(mercaptopurine)	38
PROLATE TABS	9	propylthiouracil	PX INSULIN SYRINGE	89
PROLENSA (bromfenac sodium (ophth))	112	PROQUAD SUSR	pyrazinamide	36
PROLEUKIN	43	PRORENAL + D TABS	PYRIDIUM TABS (phenazopyridine	
PROLIA SOSY	74	PROSCAR (finasteride)	hcl)	80
PROMACTA PACK	82	PROTHELIAL PSTE	pyridostigmine bromide SOLN PO	.36
PROMACTA TABS 12.5 MG, 25 MG, 50 MG	82	PROTONIX PACK (pantoprazole	.....	36
PROMACTA TABS 75 MG	82	sodium)	pyridostigmine bromide TBCR	36
promethazine & phenylephrine SYRP	60	PROTONIX TBEC (pantoprazole	pyrimethamine	35
.....	.....	sodium)	QBRELIS SOLN	31
promethazine hcl SOLN IJ 25	.....	PROTOPIC OINT (tacrolimus	QC MULTI-VITE TABS	102
MG/ML, 50 MG/ML	29	(topical))	QDOLO SOLN (tramadol hcl)	8
promethazine hcl SOLN PO 6.25	.....	70	QINLOCK	42
MG/5ML, 12.5 MG/10ML	29	protriptyline hcl	QNDSL	108
promethazine hcl SUPP	29	PROVENGE	QNDSL CHILDRENS	108
promethazine hcl TABS	29	PROVENTIL HFA AERS (albuterol	QUADRACEL SUSP	121
promethazine w/codeine SOLN ...	60	sulfate)	QUADRACEL SUSY	121
promethazine w/codeine SYRP ...	60	13	QUALAQUIN CAPS (quinine sulfate)	
promethazine-dm SYRP	60	PROVERA 5 MG, 10 MG (medroxyprogesterone acetate) ..	36	
.....	.....	115	PROVIGIL (modafinil)	2
.....	.....	.....	PROVIT TABS	102
.....	.....	.....	PROZAC CAPS (fluoxetine hcl) ...	19
.....	.....	.....	QUARTETTE (levonorgestrel-ethinyl	

estradiol (91-day)	58	rabeprazole sodium TBEC	124	PACK SOAJ	116
quazepam	84	RADIOGARDASE	23	REBIF SOSY	116
QUDEXY XR CS24 (topiramate) ..	17	RAGWITEK SUBL	2	REBIF TITRATION PACK SOSY .	116
QUESTRAN LIGHT POWD (cholestyramine light)	30	raloxifene hcl	75	RECLAST SOLN (zoledronic acid)	74
QUESTRAN PACK (cholestyramine) 30		ramelteon	84	RECOMBIVAX HB SUSP 10 MCG/ML	126
QUESTRAN POWD (cholestyramine)	30	ramipril CAPS 1.25 MG, 2.5 MG, 5 MG	31	RECOMBIVAX HB SUSY 10 MCG/ML	126
quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG, 300 MG, 400 MG	46	ramipril CAPS 10 MG	31	RECTIV (nitroglycerin (intra-anal)) 10	
quetiapine fumarate TB24	46	ranolazine TB12 1000 MG	10	REGLAN TABS (metoclopramide hcl)	
QUFLORA GUMMIES CHEW	104	ranolazine TB12 500 MG	10	REGRANEX	72
QUFLORA PEDIATRIC CHEW ..	104	RAPAFLO (silodosin)	80	RELENZA DISKHALER	50
QUFLORA PEDIATRIC SOLN ...	104	RAPAMUNE SOLN (sirolimus)	94	RELION INSULIN SYRINGE	89
QUILLCHEW ER CHER 20 MG, 40 MG	2	RAPAMUNE TABS (sirolimus)	94	RELNATE DHA CAPS	106
QUILLCHEW ER CHER 30 MG	2	rasagiline mesylate	45	RELPAX (eletriptan hydrobromide) 91	
QUILLIVANT XR SRER	2	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	RELTONE CAPS	78
QUIN B STRONG TABS	102	RAYALDEE	76	REMERON SOLTAB TBDP (mirtazapine)	18
quinapril hcl	31	RAYAVIT TABS	102	REMERON TABS 15 MG, 30 MG (mirtazapine)	18
quinapril-hydrochlorothiazide	33	RAYOS TBEC	60	REMODULIN SOLN IJ	52
quinidine gluconate TBCR	11	RAZADYNE ER CP24 (galantamine hydrobromide)	115	RENAGEL (sevelamer hcl)	79
quinidine sulfate TABS	11	REALITY INSULIN SYRINGE	89	RENAPLEX-D TABS	102
quinine sulfate CAPS 324 MG	36	REALITY LATEX CONDOMS MISC . 86		RENFLEXIS	79
QUINTABS-M TABS	102	REALITY LATEX/ULTRA TEXTURED DEVI	86	RENELA PACK (sevelamer carbonate)	79
QVAR REDIHALER 40 MCG/ACT .	13	REALITY LATEX/ULTRA THIN DEVI		RENELA TABS (sevelamer carbonate)	79
QVAR REDIHALER 80 MCG/ACT .	12	RA CENTRAL-VITE TABS	102	repaglinide	22
RA INSULIN SYRINGE	89	REBIF REBIDOSE SOAJ	116	RESTORIL (temazepam)	84
RABEPRAZOLE SODIUM CPSP	124	REBIF REBIDOSE TITRATION			

RETACRIT	82	RIDAURA	3	RITUXAN HYCELA	41
RETEVMO CAPS	42	rifabutin	36	rivaroxaban TABS 2.5 MG	14
RETEVMO TABS	42	RIFADIN SOLR (rifampin)	36	rivastigmine	115
RETIN-A CREA (tretinoin)	63	rifampin CAPS	36	rivastigmine tartrate CAPS	115
RETIN-A GEL (tretinoin)	63	rifampin SOLR	36	rizatriptan benzoate TABS	91
RETIN-A MICRO (tretinoin microsphere)	63	RILUTEK TABS (riluzole)	109	rizatriptan benzoate TBDP	91
RETIN-A MICRO PUMP 0.04 %, 0.1 % (tretinoin microsphere)	63	riluzole TABS	109	ROBINUL TABS (glycopyrrolate)	.122
RETROVIR CAPS (zidovudine)	48	rimantadine hydrochloride TABS	50	ROBINUL-FORTE TABS (glycopyrrolate)	.122
RETROVIR SYRP (zidovudine)	48	ringer's irrigation	94	ROCALTROL CAPS (calcitriol)	.76
REVATIO SOLN (sildenafil citrate (pulmonary hypertension))	52	RINVOQ LQ SOLN	3	ROCALTROL SOLN PO (calcitriol)	.76
REVATIO SUSR (sildenafil citrate (pulmonary hypertension))	53	RINVOQ TB24	3	roflumilast	.12
REVATIO TABS (sildenafil citrate (pulmonary hypertension))	53	RIOMET SOLN (metformin hcl)	21	romidepsin SOLR	.42
REVLIMID 2.5 MG, 5 MG, 10 MG, 15 MG, 25 MG	93	risedronate sodium TABS 150 MG	74	ropinirole hydrochloride TABS	.45
REVUFORJ	40	risedronate sodium TABS 35 MG	.74	ropinirole hydrochloride TB24	.45
REXULTI 0.25 MG, 0.5 MG, 2 MG	47	risedronate sodium TABS 5 MG, 30 MG	.74	rosuvastatin calcium TABS 20 MG, 40 MG	.31
REXULTI 1 MG, 3 MG, 4 MG	.47	risedronate sodium TBEC	.74	rosuvastatin calcium TABS 5 MG, 10 MG	.31
REYATAZ CAPS 200 MG, 300 MG (atazanavir sulfate)	.48	RISPERDAL CONSTA (risperidone microspheres)	.46	ROTARIX SUSP	.126
REYATAZ PACK	.48	RISPERDAL SOLN (risperidone)	.46	ROTATEQ SOLN	.126
REZLIDHIA	.42	RISPERDAL TABS 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG (risperidone)	.46	ROWASA (mesalamine w/ cleanser)	.79
REZZAYO	24	risperidone microspheres	.46	ROXICODONE TABS 15 MG, 30 MG (oxycodone hcl)	.8
RHOFADE	.72	risperidone SOLN	.46	ROZEREM (ramelteon)	.84
RIABNI	.38	risperidone TABS	.46	ROZLYTREK CAPS	.42
ribavirin (hepatitis c) CAPS	.50	risperidone TBDP	.46	ROZLYTREK PACK	.42
ribavirin (hepatitis c) TABS 200 MG	.50	RITALIN LA CP24 (methylphenidate hcl)	.2	RUBRACA	.42
ribavirin	.50	RITALIN TABS (methylphenidate hcl)	.2	rufinamide SUSP	.17
		ritonavir TABS	.49	rufinamide TABS	.17
RITUXAN	.38				

RUKOBIA .....	.49	100 MCG/ML, 500 MCG/ML (octreotide acetate)	76	SE-NATAL 19 CHEW .....	.106
RUXIENCE	38	SANTYL OINT	70	SE-NATAL 19 TABS .....	.106
RYBELSUS TABS	21	SAPHRIS (asenapine maleate) ...	46	SENSIPAR (cinacalcet hcl) .....	.76
RYBREVANT	38	sapropterin dihydrochloride PACK	.76	SENTRY SENIOR MENS 50+ TABS .	
RYDAPT	42	sapropterin dihydrochloride TABS	.76	102	
RYLAZE	43	SARCLISA	39	SENTRY SENIOR/LUTEIN TABS	
RYTARY CPCR	45	SAVELLA TABS	115	102	
RYTELO	42	SAVELLA TITRATION PACK MISC		SEREVENT DISKUS .....	.13
RYTHMOL SR CP12 (propafenone hcl)	11	115		SEROQUEL TABS (quetiapine fumarate) .....	.46
SABRIL PACK (vigabatrin)	17	saxagliptin hcl	21	SEROQUEL XR TB24 (quetiapine fumarate) .....	.46
SABRIL TABS (vigabatrin)	17	saxagliptin-metformin hcl	20	SEROSTIM SC 4 MG, 5 MG, 6 MG	
SAFYRAL (drospirenone-ethinyl estradiol-levomefolate calcium)	58	SB INSULIN SYRINGE	89	75	
SALAGEN (pilocarpine hcl (oral)) .95		SCEMBLIX	42	sertraline hcl CONC .....	.19
salicylic acid FOAM	70	scopolamine	24	sertraline hcl TABS .....	.19
SALICYLIC ACID OINT	70	SEASONIQUE (levonorgestrel- ethinyl estradiol (91-day))	58	sevelamer carbonate PACK .....	.79
salicylic acid SHAM 6 %	70	SECUADO	46	sevelamer carbonate TABS .....	.79
salicylic acid SOLN 26 %	70	SECURESAFE INSULIN SYRINGE .		sevelamer hcl .....	.79
SALIMEZ CREA	70	89		SFROWASA ENEM .....	.79
salsalate	7	SELECT-OB CHEW 60 MG-2.5 MG- 1 MG-400 UNIT-5 MCG-1.8 MG-15 MG-1.6 MG-25 MG-15 MG-30 UNIT- 29 MG-1700 UNIT	106	SHINGRIX .....	.126
SALVAX FOAM (salicylic acid)	70	SELECT-OB+DHA MISC	106	SHUR-SEAL CONTRACEPTIVE GEL .....	.126
SALYCIM CREA	70	selegiline hcl CAPS	45	SIDEROL TABS .....	.102
SAMSCA TABS (tolvaptan)	77	selegiline hcl TABS	45	SIGNIFOR .....	.76
SANCUSO PTCH	23	selenium sulfide LOTN 2.5 %	66	SIKLOS TABS .....	.81
SANDIMMUNE CAPS (cyclosporine) 94		selenium sulfide SHAM 2.25 %	66	sildenafil citrate (pulmonary hypertension) SOLN .....	.53
SANDIMMUNE SOLN IV 50 MG/ML . 94		SELZENTRY SOLN	49	sildenafil citrate (pulmonary hypertension) SUSR .....	.53
SANDOSTATIN LAR DEPOT KIT (octreotide acetate)	76	SELZENTRY TABS (maraviroc) ...	49	sildenafil citrate (pulmonary hypertension) TABS .....	.53
SANDOSTATIN SOLN 50 MCG/ML,	49	SELZENTRY TABS 25 MG, 75 MG			

SILENOR (doxepin hcl (sleep))	83	sodium chloride (inhalant) NEBU 0.9 %, 3 %, 7 %, 10 %	61	sorafenib tosylate	42
silodosin	80	sodium chloride SOLN IV 0.45 %, 0.9 %, 3 %, 5 %	93	SORILUX FOAM	66
SILVADENE (silver sulfadiazine)	66	SODIUM CHLORIDE SOLN IV 0.9 %	93	sotalol hcl (afib/afl)	51
silver sulfadiazine	66	.....	93	sotalol hcl TABS	51
SIMULECT 20 MG	94	.....	93	SOTYLIZE SOLN PO	51
simvastatin TABS 5 MG, 10 MG, 20 MG, 40 MG	31	sodium citrate & citric acid	80	SPECTRAVITE TABS	103
simvastatin TABS 80 MG	31	sodium fluoride CHEW	92	SPIKEVAX SUSP	126
SINEMET TABS 100 MG-10 MG, 100 MG-25 MG (carbidopa-levodopa)	45	sodium fluoride SOLN	92	SPIKEVAX SUSY	126
SINGULAIR CHEW (montelukast sodium)	12	sodium fluoride TABS	92	spinosad	72
SINGULAIR PACK (montelukast sodium)	12	SODIUM OXYBATE SOLN	115	SPIRIVA HANDIHALER CAPS (tiotropium bromide monohydrate)	12
sirolimus SOLN	94	sodium phenylbutyrate POWD	76	SPIRIVA RESPIMAT AERS	12
sirolimus TABS	94	sodium phenylbutyrate TABS	76	spironolactone & hydrochlorothiazide	73
SIRTURO 100 MG	36	sodium polystyrene sulfonate POWD	95	spironolactone TABS	74
SIRTURO 20 MG	36	SODIUM SULFACETAMIDE-BAKUCHIOL LIQD	66	SPORANOX CAPS (itraconazole)	25
SIVEXTRO TABS	35	sodium sulfate-potassium sulfate-magnesium sulfate	84	SPORANOX SOLN (itraconazole)	25
SKLICE (ivermectin (pediculicide))	72	solifenacin succinate TABS	125	SPRYCEL (dasatinib)	42
SKYLA	59	SOLIQUA	20	stavudine CAPS	49
SKYRIZI (150 MG DOSE) PSKT	66	SOLO TABS	103	STELARA 130 MG/26ML	79
SKYRIZI PEN SOAJ	66	SOLODYN TB24 55 MG, 65 MG, 80 MG, 105 MG, 115 MG (minocycline hcl)	120	STELARA SOSY	66
SKYRIZI SOCT	79	SOLTAMOX SOLN	40	STIOLTO RESPIMAT	13
SKYRIZI SOSY	66	SOLUVITA SOLN	92	STIVARGA	42
SLYND	59	SOLUVITA WITH FLUORIDE SOLN	104	STRATTERA 10 MG, 18 MG, 25 MG, 40 MG (atomoxetine hcl)	1
SM ONE DAILY MENS TABS	102	SOMA TABS (carisoprodol)	107	STRATTERA 60 MG, 80 MG, 100 MG (atomoxetine hcl)	1
SM ONE DAILY WOMENS TABS	103	SOMAVERT	75	STRENSIQ	76
sodium chloride (gu irrigant) 0.9 %	80	SOOLANTRA (ivermectin (rosacea))	72	streptomycin sulfate SOLR	2
		.....	72	STRIBILD	49
		.....	72	STRIVERDI RESPIMAT	14

STROMECTOL (ivermectin)	10	.....63	103
STROVITE ONE TABS	103	SULFACETAMIDE SODIUM-	SUPRAX CAPS (cefixime)
SUBLOCADE SOSY	9	SULFUR PADS	54
SUBOXONE FILM SL (buprenorphine hcl-naloxone hcl dihydrate)	9	sulfacetamide sod-prednisolone SOLN	SUPRAX CHEW
SUBSYS LIQD	8	111	54
sucralfate SUSP	123	SULFACETAMIDE-SULFUR IN UREA EMUL	SUPRAX SUSR 200 MG/5ML (cefixime)
sucralfate TABS	123	63	54
SUFLAVE	84	sulfadiazine TABS	SUPRAX SUSR 500 MG/5ML
SULAR 8.5 MG, 17 MG, 34 MG (nisoldipine)	52	119	54
sulconazole nitrate CREA	64	sulfamethoxazole-trimethoprim SUSP.....34	SUPREP BOWEL PREP KIT (sodium sulfate-potassium sulfate- magnesium sulfate)
sulconazole nitrate SOLN	64	sulfamethoxazole-trimethoprim TABS.....34	84
sulfacetamide sodium (acne)	63	SULFAMYLYON CREA	SURE COMFORT INSULIN SYRINGE
sulfacetamide sodium (ophth) OINT 110		66	89
sulfacetamide sodium (ophth) SOLN ..	110	SULFAMYLYON PACK 5 % (mafénide acetate)	SUSTIVA CAPS (efavirenz)
sulfacetamide sodium LIQD	66	66	49
sulfacetamide sodium SHAM 10 % 66		sulfasalazine TABS	SUTAB
sulfacetamide sodium w/ sulfur CREA	63	79	84
sulfacetamide sodium w/ sulfur LIQD 10 %-2 %, 9 %-4 %, 9 %-4.5 %, 9.8 %-4.8 %	63	sulfasalazine TBEC	SUTENT (sunitinib malate)
sulfacetamide sodium w/ sulfur LOTN 10 %-5 %	63	79	42
sulfacetamide sodium w/ sulfur LOTN 9.8 %-4.8 %	63	sulindac TABS	SYMBYAX 25 MG-3 MG, 25 MG-6 MG (olanzapine-fluoxetine hcl) ...115
sulfacetamide sodium w/ sulfur PADS 10 %-4 %	63	4	SYMDEKO
sulfacetamide sodium w/ sulfur SUSP		SUMADAN WASH LIQD (sulfacetamide sodium w/ sulfur) ..63	119
		sumatriptan	SYNALAR CREA (fluocinolone acetonide)
		91	69
		sumatriptan succinate SOAJ	SYNALAR OINT (fluocinolone acetonide)
		91	69
		sumatriptan succinate SOCT	SYNALAR SOLN (fluocinolone acetonide)
		91	69
		sumatriptan succinate SOLN 6 MG/0.5ML	SYNAREL
		91	75
		sumatriptan succinate TABS	SYNERA PTCH
		91	71
		sumatriptan-naproxen sodium ..90	SYNERDERM EMUL
		90	71
		SUMAXIN PADS	SYNJARDY TABS
		63	20
		sunitinib malate	SYNJARDY XR TB24 1000 MG-10 MG, 1000 MG-25 MG
		42	20
		SUPER D-ZINC-SELENIUM- COPPER TABS	SYNJARDY XR TB24 1000 MG-12.5 MG, 1000 MG-5 MG
		103	20
		SUPERIOR MENS MULTI TABS .103	SYNRIBO
		SUPERIOR WOMENS MULTI TABS	43
			SYNTROID TABS (levothyroxine sodium)
			120

SYPRINE (trientine hcl)	93	TARGETIN (bexarotene)	43	TEGSEDI	119
SYSTANE ICAPS AREDS2 TABS		TASIGNA	42	TEKTURNA (aliskiren fumarate) ..	33
103		TASMAR (tolcapone)	44	TEKTURNA HCT	33
TABLOID	38	TAVALISSE	81	telmisartan	32
TABRECTA	42	TAYTULLA CAPS (norethin acet & estrad-fe)	58	telmisartan-amlodipine	33
TACLONEX OINT (calcipotriene- betamethasone dipropionate)	69	tazarotene CREA	66	telmisartan-hydrochlorothiazide ..	33
TACLONEX SUSP (calcipotriene- betamethasone dipropionate)	69	TAZAROTENE FOAM	63	temazepam	84
tacrolimus (topical) OINT	70	tazarotene GEL	66	TEMODAR SOLR	37
tacrolimus CAPS	94	TAZORAC CREA (tazarotene)	66	temozolomide CAPS	37
tadalafil (pulmonary hypertension)		TAZORAC GEL (tazarotene)	66	temsiroliimus	42
TABS	53	TAZVERIK	42	TENIVAC INJ	121
tadalafil 2.5 MG, 5 MG	52	TDVAX SUSP	121	tenofovir disoproxil fumarate TABS	
TAFINLAR CAPS	42	TECARTUS	39	TENORETIC 100 (atenolol & chlorthalidone)	33
TAFINLAR TBSO	42	TECELRA	39	TENORETIC 50 (atenolol & chlorthalidone)	33
tafluprost	112	TECENTRIQ	39	TENORMIN TABS (atenolol)	50
TAGAMET HB 200 TABS (cimetidine)	122	TECENTRIQ HYBREZA	41	TEPADINA (thiotepa)	37
TAGAMET HB TABS (cimetidine)		TECFIDERA CDPK (dimethyl fumarate)	116	TEPMETKO	42
123		TECFIDERA CPDR (dimethyl fumarate)	116	terazosin hcl	32
TAGRISSO	39	TECHLITE INSULIN SYRINGE ..	89	terbinafine hcl TABS	25
TALVEY	39	TECVAYLI	39	terbutaline sulfate TABS	14
TALZENNA	42	TEFLARO	54	terconazole vaginal CREA	127
TAMIFLU CAPS 30 MG, 45 MG (oseltamivir phosphate)	50	TEGRETOL SUSP (carbamazepine) ..	17	terconazole vaginal SUPP	127
TAMIFLU SUSR (oseltamivir phosphate)	50	TEGRETOL TABS (carbamazepine) ..	17	teriflunomide	116
tamoxifen citrate TABS	40	TEGRETOL-XR TB12 100 MG (carbamazepine)	17	teriparatide SOPN	74
tamsulosin hcl	80	TEGRETOL-XR TB12 200 MG, 400 MG (carbamazepine)	17	testosterone cypionate SOLN IM 100 MG/ML	9
TARCEVA (erlotinib hcl)	39			testosterone cypionate SOLN IM 200 MG/ML	9
TARGETIN (bexarotene (topical))				testosterone enanthate SOLN IM ..	9
65					

testosterone GEL TD 10 MG/ACT ..	9	THERA-VITE MAX-M TABS	103	sodium)	120
testosterone GEL TD	9	THEREMS-M TABS	103	TIROSINT CAPS	120
testosterone SOLN	9	THIOLA EC TBEC (tiopronin)	81	TIROSINT-SOL SOLN PO 13	
TETANUS-DIPHTHERIA TOXOIDS TD SUSP	121	THIOLA TABS (tiopronin)	81	MCG/ML, 25 MCG/ML, 37.5	
tetrabenazine	115	thioridazine hcl	46	MCG/ML, 44 MCG/ML, 50 MCG/ML,	
tetracaine hcl (ophth)	110	thiotepa	37	62.5 MCG/ML, 75 MCG/ML, 88	
TEVIMBRA	39	thiothixene	47	MCG/ML, 100 MCG/ML, 112	
THALITONE	74	THRIVITE RX TABS	106	MCG/ML, 125 MCG/ML, 137	
THALOMID	93	THYMOGLOBULIN	94	MCG/ML, 150 MCG/ML, 200	
THEO-24 CP24	14	THYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	120	MCG/ML	121
theophylline ELIX	14	tiagabine hcl	17	TIVDAK	39
theophylline SOLN	14	TIAZAC (diltiazem hcl extended release beads)	52	TIVICAY TABS 50 MG	49
theophylline TB12	14	TIBSOVO	42	tizanidine hcl CAPS	107
theophylline TB24	14	tigecycline	119	tizanidine hcl TABS	107
THERA M PLUS TABS	103	TIGECYCLINE	119	TOBI NEBU (tobramycin)	2
THERABETIC MULTI-VITAMIN TABS	103	TIKOSYN (dofetilide)	12	TOBI PODHALER CAPS	2
THERAGRAN-M ADVANCED 50 PLUS TABS	103	timolol	109	TOBRADEX OINT	111
THERAGRAN-M ADVANCED TABS .	103	timolol maleate (ophth) SOLG	109	TOBRADEX ST SUSP	111
THERAGRAN-M PREMIER 50 PLUS TABS	103	timolol maleate (ophth) SOLN	109	TOBRADEX SUSP (tobramycin- dexamethasone)	111
THERAGRAN-M PREMIER TABS 103		timolol maleate TABS	51	tobramycin (ophth) SOLN	110
THERAGRAN-M TABS	103	TIMOPTIC OCUDOSE SOLN (timolol maleate (ophth))	109	tobramycin NEBU	2
THERA-M PLUS MV W/BETA- CAROT TABS	103	TIMOPTIC SOLN (timolol maleate (ophth))	109	tobramycin NEBU	3
THERA-M TABS	103	tinidazole	33	tobramycin sulfate SOLN IJ 10 MG/ML, 80 MG/2ML	2
THERANATAL CORE NUTRITION TABS	106	tiopronin TABS	81	tobramycin-dexamethasone SUSP 111	
THERA-TABS M TABS	103	tiopronin TBEC	81	TOBREX OINT	110
		tiotropium bromide monohydrate CAPS	12	TODAY SPONGE MISC	126
		TIROSINT CAPS (levothyroxine		tolcapone	44
				tolmetin sodium CAPS	4
				tolmetin sodium TABS 600 MG	4
				TOLSURA CAPS	25

tolterodine tartrate CP24	125	TRACLEER TABS (bosentan)	52	TRESIBA FLEXTOUCH SOPN 100 UNIT/ML	22
tolterodine tartrate TABS 1 MG ..	125	TRACLEER TBSO	52	TRESIBA FLEXTOUCH SOPN 200 UNIT/ML	22
tolterodine tartrate TABS 2 MG ..	125	tramadol hcl CP24 100 MG, 200 MG, 300 MG	8	TRESIBA SOLN	22
tolvaptan TABS	77	TRAMADOL HCL SOLN (tramadol hcl)	8	tretinoin (chemotherapy)	43
TOPAMAX SPRINKLE CPSP (topiramate)	17	tramadol hcl SOLN	8	tretinoin CREA 0.025 %, 0.05 %, 0.1 %	63
TOPAMAX TABS (topiramate)	17	tramadol hcl TABS 100 MG	8	tretinoin GEL 0.01 %, 0.025 %, 0.05 %	63
TOPCARE ULTRA COMFORT INS SYR	89	tramadol hcl TABS 50 MG	8	tretinoin microsphere 0.04 %, 0.1 % 63	
TOPICORT CREA (desoximetasone)	69	tramadol hcl TB24	8	TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	38
TOPICORT GEL (desoximetasone) 69		tramadol-acetaminophen	9	TREXIMET (sumatriptan-naproxen sodium)	90
TOPICORT OINT (desoximetasone) . 69		trandolapril	31	triamcinolone acetonide (mouth) .. 95	
TOPICORT SPRAY LIQD (desoximetasone)	69	trandolapril-verapamil hcl	33	triamcinolone acetonide (topical) AERS	69
topiramate CP24	17	tranexamic acid SOLN 1000 MG/10ML	83	triamcinolone acetonide (topical) CREA	69
topiramate CPSP 15 MG, 25 MG ..	17	tranexamic acid TABS	83	triamcinolone acetonide (topical) LOTN	69
topiramate CS24	17	tranylcypromine sulfate	19	triamcinolone acetonide (topical) OINT	69
topiramate TABS	17	TRAVATAN Z SOLN (travoprost) ..	112	triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG	73
topotecan hcl SOLN	44	travoprost SOLN	112	triamterene & hydrochlorothiazide TABS	73
TOPOTECAN HCL SOLN	44	TRAZIMERA	39	triamterene CAPS	74
topotecan hcl SOLR	44	trazodone hcl TABS	19	triazolam	84
TOPROL XL TB24 (metoprolol succinate)	51	TREANDA SOLR (bendamustine hcl)	37	TRIBENZOR (olmesartan medoxomil-amlodipine- hydrochlorothiazide)	33
toremifene citrate	40	TRECATOR	36	TRICARE TABS	106
TORISEL (temsirolimus)	42	TRELEGY ELLIPTA 100 MCG/ACT- 25 MCG/ACT-62.5 MCG/ACT	14		
torsemide TABS	73	TRELEGY ELLIPTA 200 MCG/INH- 25 MCG/INH-62.5 MCG/INH	14		
TOUJEO MAX SOLOSTAR SOPN 22		TRELSTAR MIXJECT	40		
TOUJEO SOLOSTAR SOPN	22	TREMFYA SOAJ	66		
TOVIAZ (fesoterodine fumarate) 125		TREMFYA SOSY	66		
		treprostинil SOLN IJ	52		

TRICOR TABS (fenofibrate)	30	TROJAN ENZ MISC	86	TRUSTEX LUB/RIBBED/STUDDED MISC	86
TRIDESILON CREA 0.05 % (desonide)	69	TROJAN MAGNUM MISC	86	TRUSTEX LUB/SPERMICIDE EX ST MISC	86
trientine hcl 250 MG	93	TROJAN ULTRA THIN MISC	86	TRUSTEX LUB/SPERMICIDE XL MISC	86
trifluoperazine hcl TABS	46	TROJAN ULTRA THIN/SPERMICIDAL MISC	86	TRUSTEX LUBRICATED EX LARGE MISC	86
trifluridine	110	TROJAN-ENZ LUBRICATED MISC	86	TRUSTEX LUBRICATED EXTRA ST MISC	86
trihexyphenidyl hcl SOLN	44	TROJAN-ENZ/SPERMICIDAL MISC	86	TRUSTEX LUBRICATED MISC	86
trihexyphenidyl hcl TABS	44	TROKENDI XR CP24 (topiramate)	17	TRUSTEX	
TRIJARDY XR	20	tropicamide SOLN	109	LUBRICATED/SPERMICIDE MISC	86
TRIKAFTA TBPK 100 MG-50 MG	119	trospium chloride CP24	125	TRUSTEX NATURAL CONDOMS + LUBE MISC	86
TRIKAFTA TBPK 50 MG-25 MG	119	trospium chloride TABS	125	TRUSTEX NON-LUBRICATED MISC	87
TRIKAFTA THPK	119	TRUE COMFORT INSULIN SYRINGE	89	TRUSTEX RIA LUB/SPERMICIDE MISC	87
TRILEPTAL SUSP (oxcarbazepine)	17	TRUE COMFORT PRO INSULIN SYR	89	TRUSTEX RIA LUBRICATED MISC	87
TRILEPTAL TABS (oxcarbazepine)	17	TRUE COVER DEVI	86	TRUSTEX RIA NON-LUBRICATED MISC	87
TRILIPIX (choline fenofibrate)	30	TRUEPLUS INSULIN SYRINGE	89	TRUSTEX-NONOXYNOL-9/RIB/STUD MISC	87
trimethobenzamide hcl CAPS	24	TRULICITY	21	TRUVADA 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG (emtricitabine-tenofovir disoproxil fumarate)	49
trimethoprim TABS	33	TRUMENBA	125	TRUVADA 200 MG-300 MG (emtricitabine-tenofovir disoproxil fumarate)	49
trimipramine maleate CAPS	20	TRUQAP TABS	42	TRUXIMA	39
TRINTELLIX	19	TRUQAP TBPK	42	TUKYSA	39
TRISENOX (arsenic trioxide)	43	TRUSELTIQ (100MG DAILY DOSE)	43	TURALIO 125 MG	43
TRISTART DHA	106	TRUSELTIQ (125MG DAILY DOSE)	43		
TRISTART FREE	106	TRUSELTIQ (50MG DAILY DOSE)	43		
TRISTART ONE	106	TRUSELTIQ (75MG DAILY DOSE)	43		
TRIUMEQ TABS	49	TRUSTEX COLOR CONDOMS + LUBE MISC	86		
TRI-VI-FLOR	104				
TRI-VI-FLORO	104				
TRIZIVIR	49				
TRODELVY	44				

TUSSLIN LIQD	61	ULTRA FLO INSULIN SYRINGE .	90	UVADEX	43
TUSSLIN PEDIATRIC LIQD	61	ULTRACARE INSULIN SYRINGE		valacyclovir hcl	50
T-VITES TABS	103	90		VALCHLOR	65
TWINRIX SUSY	126	ULTRASAL-ER SOLN (salicylic acid)		VALCYTE SOLR (valganciclovir hcl) .	
TWIRLA	58	70	49	VALCYTE TABS (valganciclovir hcl) .	
TYBLUME CHEW	58	ULTRA-THIN II INS SYR SHORT .	90	49	
TYBOST	49	ULTRA-THIN II INSULIN SYRINGE .		valganciclovir hcl SOLR	49
TYGACIL (tigecycline)	119	UNASYN IJ 2 GM-1 GM (ampicillin &		valganciclovir hcl TABS	49
TYKERB (lapatinib ditosylate)	43	sulbactam sodium)	114	VALIUM TABS (diazepam)	11
TYMLOS	74	UNISOM SLEEPGELS CAPS		valproic acid CAPS	18
TYSABRI	116	(diphenhydramine hcl (sleep))	83	valrubicin	41
UBRELVY	90	UNITUXIN	39	valsartan TABS	32
UCERIS (budesonide (intrarectal))		UPTRAVI SOLR	53	valsartan-hydrochlorothiazide	33
10		UPTRAVI TABS	53	VALSTAR (valrubicin)	41
UCERIS TB24 (budesonide)	60	UPTRAVI TITRATION TBPK	53	VALTOCO 10 MG DOSE LIQD	15
UDAMIN SP TABS 12.5 MG-1000		URAMAXIN GEL (urea)	70	VALTOCO 15 MG DOSE LQPK 7.5	
MCG-250 MCG-2.5 MG-17 MG-7.5		urea CREA 39 %, 40 %, 41 %, 45 %,		MG/0.1ML	15
MG-100 MCG-75 UNIT-320 MG .	103	47 %	70	VALTOCO 20 MG DOSE LQPK 10	
UDENYCA ONBODY SOSY	82	urea LOTN 40 %	70	MG/0.1ML	15
UDENYCA SOAJ	82	URIBEL	34	VALTOCO 5 MG DOSE LIQD	15
UDENYCA SOSY	82	UROCIT-K 10 TBCR (potassium		VALTREX (valacyclovir hcl)	50
ULORIC (febuxostat)	81	citrate (alkalinizer))	80	VALUE HEALTH INSULIN SYRINGE	
ULTICARE INSULIN SAFETY SYR .		UROCIT-K 15 TBCR (potassium		.....90	
89		citrate (alkalinizer))	80	VANCOCIN CAPS (vancomycin hcl) .	
ULTICARE INSULIN SYRINGE ...	89	UROCIT-K 5 TBCR (potassium		34	
ULTIGUARD SAFEPACK		citrate (alkalinizer))	80	vancomycin hcl CAPS	34
SYR/NEEDLE	89	UROXATRAL (alfuzosin hcl)	80	vancomycin hcl SOLR PO 25 MG/ML	
ULTRA BONEUP TABS	103	URSO 250 TABS (ursodiol)	78	.....35	
ULTRA COMFORT INSULIN		URSO FORTE TABS (ursodiol) ...	78	VANDAZOLE	127
SYRINGE	89	78		VANFLYTA	43
ULTRA FLO INSULIN SYR 1/2 UNIT		ursodiol CAPS	78	VANISHPOINT INSULIN SYRINGE .	
.....90		URSODIOL CAPS	78	90	
		ursodiol TABS	78		

VANOS CREA (fluocinonide)	69	VENEXA FE TABS	103	VIBRAMYCIN SUSR (doxycycline monohydrate))	120
VAQTA	126	VENEXA TABS	103	VIDAZA SUSR (azacitidine)	38
varenicline tartrate TABS	119	venlafaxine hcl CP24 150 MG	20	vigabatrin PACK	17
varenicline tartrate TBPK	119	venlafaxine hcl CP24 37.5 MG, 75 MG	20	vigabatrin TABS	17
VARIVAX SUSR	126	venlafaxine hcl TABS	20	VIIBRYD STARTER PACK KIT	19
VARIZIG SOLN	113	venlafaxine hcl TB24	20	VIIBRYD TABS (vilazodone hcl)	19
VARUBI (180 MG DOSE) TBPK	24	VENTAVIS IN	52	vilazodone hcl TABS	19
VASCEPA (icosapent ethyl)	30	VENTOLIN HFA AERS (albuterol sulfate)	14	VIMOVO (naproxen-esomeprazole magnesium)	5
VASERETIC 25 MG-10 MG (enalapril maleate & hydrochlorothiazide)	33	VENTRIXYL FE TABS	103	VIMPAT SOLN PO 10 MG/ML (lacosamide)	17
VASOTEC TABS (enalapril maleate)	31	VENTRIXYL TABS	103	VIMPAT TABS (lacosamide)	17
VAXELIS SUSP	121	verapamil hcl CP24	52	VINATE DHA RF	106
VAXELIS SUSY	121	VERAPAMIL HCL ER CP24 (verapamil hcl)	52	VINATE II	106
VAXNEUVANCE	125	verapamil hcl TABS	52	vincristine sulfate	44
VCF VAGINAL CONTRACEPTIVE FILM	127	verapamil hcl TBCR	52	VIRACEPT TABS	49
VCF VAGINAL CONTRACEPTIVE FOAM	127	VERDESO FOAM	69	VIRASAL LIQD (salicylic acid)	70
VCF VAGINAL CONTRACEPTIVE GEL	127	VEREGEN	63	VIRAZOLE (ribavirin)	50
VECAMYL	33	VERELAN CP24 (verapamil hcl)	52	VIREAD POWD	49
VECTIBIX 100 MG/5ML, 400 MG/20ML	39	VERELAN PM CP24 (verapamil hcl)	52	VIREAD TABS 150 MG, 200 MG, 250 MG	49
VECTICAL (calcitriol (topical))	66	VERIFINE INSULIN SYRINGE	90	VIRT-NATE DHA CAPS	106
VEGZELMA	38	VERSACLOZ SUSP	46	VIRT-PN DHA	106
VELCADE SOLR IJ (bortezomib)	43	VERZENIO	43	VISTARIL CAPS (hydroxyzine pamoate)	11
VELPHORO	79	VESICARE TABS (solifenacin succinate)	125	VISTOGARD	23
VELTIN (clindamycin phosphate-tretinoin)	63	VFEND SUSR (voriconazole)	25	VITABASIC COMPLETE TABS	103
VENCLEXTA STARTING PACK TBPK	39	VFEND TABS (voriconazole)	25	VITABASIC SENIOR TABS	103
VENCLEXTA TABS	39	VIBERZI	79	VITACORE TABS	103
		VIBRAMYCIN CAPS (doxycycline hydiate)	120	VITAFOL GUMMIES	106
				VITAFOL ULTRA	106

VITAFOL-NANO	106	VITRUM 50+ ADULT-MULTI TABS 103	30
VITAFOL-ONE CAPS	107	VITRUM 50+ SENIOR MULTI TABS . 103	WELIREG 40
VITAMEDMD ONE RX/QUATREFOLIC	107	VIVA DHA CAPS	WELLBUTRIN SR TB12 (bupropion hcl) 18
VITAMIN D2 TABS	128	VIVELLE-DOT PTTW (estradiol) .. 78	WELLBUTRIN XL TB24 (bupropion hcl) 18
VITAMIN D3 COMPLETE TABS .	103	VIVIMUSTA SOLN	WELLFOLA TABS 103
VITAMIN D3 IMMUNE HEALTH LIQD PO	128	VIVITROL	WESCAP-C DHA 107
VITAMIN D3 LIQD PO 30 MCG/15ML	128	VIZIMPRO	WESCAP-PN DHA 107
VITAMINS ACD-FLUORIDE SOLN 104		VONJO	WESNATE DHA CAPS 107
VITAPEARL	107	VORANIGO	WESTAB PLUS TABS 107
VITAROCA PLUS TABS (multiple vitamins w/ minerals)	103	VORAXAZE	WESTGEL DHA 107
VITASANA TABS	103	voriconazole SUSR	WOMENS 50+ MULTI VITAMIN TABS 103
VITATHELY WITH GINGER TABS 107		voriconazole TABS	WOMENS 50+ MULTI VITAMIN/MIN TABS 103
VITATRUE	107	VOSEVI	WOMENS MULTI VITAMIN & MINERAL TABS 103
VITATRUM TABS	103	VOTRIENT (pazopanib hcl)	XALATAN SOLN (latanoprost) ... 112
VITEYES CLASSIC MULTIVITAMIN TABS	103	VP INSULIN SYRINGE	XALKORI CAPS 43
VITEYES OPTIC NERVE SUPPORT TABS	103	VRAYLAR CAPS	XALKORI CPSP 43
VITRAKVI CAPS	43	VRAYLAR CPPK	XANAX TABS (alprazolam) 11
VITRAKVI SOLN	43	VUSION (miconazole-zinc oxide- white petrolatum)	XANAX XR TB24 (alprazolam) 11
VITRAMYN TABS	103	VYLOY	XARELTO STARTER PACK TBPK
VITRANOL FE TABS	103	VYNDAMAX	14
VITRANOL TABS	103	VYNDAQEL	XARELTO SUSR 14
VITREXATE FE TABS	103	VYTONE 1.9 %-1 % (iodoquinol- hydrocortisone in aloe vehicle)	XARELTO TABS 10 MG, 15 MG, 20 MG 14
VITREXATE TABS	103	VYTORIN (ezetimibe-simvastatin) 29	XARELTO TABS 2.5 MG (rivaroxaban) 14
VITREXYL + IRON TABS	103	warfarin sodium TABS	XATMEP SOLN PO 38
VITREXYL TABS	103	water for irrigation, sterile	XELJANZ SOLN 3
		WELCHOL PACK (colesevelam hcl) . 30	XELJANZ TABS 3
		WELCHOL TABS (colesevelam hcl) .	

XELJANZ XR TB24	3	XPOVIO (60 MG ONCE WEEKLY) 60 MG	40	ZARXIO	82
XELODA (capecitabine)	38	XPOVIO (60 MG TWICE WEEKLY) . 40		ZAVESCA (miglustat)	81
XENAZINE (tetrabenazine)	116	XPOVIO (80 MG ONCE WEEKLY) 40 MG	40	ZEGERID CAPS 1100 MG-40 MG (omeprazole-sodium bicarbonate)	
XERAC AC	71	XPOVIO (80 MG TWICE WEEKLY) . 40		124	
XERESE	66	XTANDI CAPS	40	ZEGERID PACK (omeprazole- sodium bicarbonate)	124
XERMELO	79	XTANDI TABS	40	ZEJULA CAPS	43
XGEVA SOLN	74	XULTOPHY	20	ZEJULA TABS	43
XHANCE EXHU	108	XURIDEN	76	ZELAPAR TBDP	45
XIAFLEX	93	XYREM SOLN	115	ZELBORAF	43
XIFAXAN 200 MG	34	YASMIN 28 (drospirenone-ethinyl estradiol)	58	ZEMAIRA SOLR 1000 MG	119
XIFAXAN 550 MG	34	YAZ (drospirenone-ethinyl estradiol)		ZEMBRACE SYMTOUCH SOAJ ..	91
XIGDUO XR (dapagliflozin propanediol-metformin hcl)	20	58		ZEMPLAR CAPS 1 MCG, 2 MCG (paricalcitol)	76
XIGDUO XR 1000 MG-10 MG, 500 MG-10 MG, 500 MG-5 MG	20	YELETS TEENAGE FORMULA TABS	104	ZEMPLAR SOLN (paricalcitol)	76
XIGDUO XR 1000 MG-2.5 MG, 1000 MG-5 MG	20	YERVOY	39	ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-	
XOFIGO	43	YESCARTA	39	10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT,	
XOLAIR SOLR	12	YONDELIS	37	24000 UNIT-17000 UNIT-5000 UNIT,	
XOLAIR SOSY 75 MG/0.5ML, 150 MG/ML	12	YONSA	40	252600 UNIT-189600 UNIT-60000 UNIT, 42000 UNIT-32000 UNIT-	
XOPENEX (levalbuterol hcl)	14	zafirlukast	12	10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-	
XOPENEX CONCENTRATE (levalbuterol hcl)	14	zaleplon	84	63000 UNIT-20000 UNIT	73
XOPENEX HFA (levalbuterol tartrate)	14	ZALTRAP	38	ZEPZELCA	37
XOSPATA	43	ZANAFLEX CAPS (tizanidine hcl) 107		ZESTORETIC (lisinopril & hydrochlorothiazide)	33
XPOVIO (100 MG ONCE WEEKLY) 50 MG	40	ZANAFLEX TABS 4 MG (tizanidine hcl)	107	ZESTRIL TABS (lisinopril)	31
XPOVIO (40 MG ONCE WEEKLY) 40 MG	40	ZANOSAR	37	ZETIA (ezetimibe)	31
XPOVIO (40 MG TWICE WEEKLY) 40 MG	40	ZARONTIN CAPS (ethosuximide) .	18	ZETONNA AERS	109
		ZARONTIN SOLN (ethosuximide) .	18	ZEVALIN Y-90	39
				ZEVRX INSULIN SYRINGE	90
				ZIAC (bisoprolol &	

hydrochlorothiazide)	33	ZOLINZA	43	ZYCLARA PUMP (imiquimod)	70
ZIAGEN SOLN (abacavir sulfate) ..	49	zolmitriptan SOLN 2.5 MG	91	ZYCLARA PUMP	70
ZIAGEN TABS (abacavir sulfate) ..	49	zolmitriptan SOLN 5 MG	91	ZYDELIG	43
ZIANA (clindamycin phosphate-tretinoin)	63	zolmitriptan TABS	91	ZYFLO TABS	12
zidovudine CAPS	49	zolmitriptan TBDP	91	ZYKADIA TABS	43
zidovudine SYRP	49	ZOLOFT CONC (sertraline hcl)	19	ZYLET	111
zidovudine TABS	49	ZOLOFT TABS (sertraline hcl)	19	ZYLOPRIM (allopurinol)	81
zileuton TB12	12	zolpidem tartrate SUBL	84	ZYMAXID (gatifloxacin (ophth)) ..	110
zinc sulfate CAPS	93	zolpidem tartrate TABS	84	ZYNLONTA	39
ZIOPTAN (tafluprost)	112	zolpidem tartrate TBCR	84	ZYNYZ	39
ziprasidone hcl	46	ZOLPIMIST SOLN	84	ZYPREXA SOLR (olanzapine)	46
ziprasidone mesylate	46	ZOMACTON SOLR SC 5 MG	75	ZYPREXA TABS (olanzapine)	46
ZIPSOR CAPS (diclofenac potassium)	5	ZOMIG SOLN 2.5 MG (zolmitriptan) ..	92	ZYPREXA ZYDIS TBDP (olanzapine)	46
ZIRABEV	38	ZOMIG SOLN 5 MG (zolmitriptan) ..	92	ZYRTEC CHILDRENS ALLERGY SOLN PO (cetirizine hcl)	29
ZIRGAN GEL	110	ZONALON (doxepin hcl (antipruritic)) ..	65	ZYTIGA (abiraterone acetate)	40
ZITHROMAX SUSR (azithromycin) ..	85	ZONEGRAN CAPS 25 MG, 100 MG (zonisamide)	17	ZYVOX SUSR (linezolid)	35
ZITHROMAX TABS 250 MG (azithromycin)	85	zonisamide CAPS	17	ZYVOX TABS (linezolid)	35
ZITHROMAX TABS 500 MG (azithromycin)	85	ZONTIVITY	81		
ZITHROMAX TRI-PAK TABS (azithromycin)	85	ZORBTIVE SC	75		
ZITHROMAX Z-PAK TABS (azithromycin)	85	ZORTRESS 0.25 MG, 0.5 MG, 0.75 MG (everolimus (immunosuppressant))	94		
ZOCOR TABS 10 MG, 20 MG, 40 MG (simvastatin)	31	ZORVOLEX CAPS	5		
ZOLADEX	40	ZOSYN	114		
zoledronic acid CONC	74	ZOVIRAX CREA (acyclovir topical) ..	66		
zoledronic acid SOLN	74	ZOVIRAX OINT (acyclovir topical) ..	66		
ZOLEDRONIC ACID SOLN	74	ZUBSOLV SUBL	9		
ZYCLARA (imiquimod)	70	ZYCLARA (imiquimod)	70		