Tufts Health Together Organizacion Responsible por el Cuidado de la Salud
Programa de farmacia y
Lista de Medicamentos Preferidos
1 de diciembre de 2021

Introducción

Programa de farmacia

Tratamos de proporcionar opciones de alta calidad y bajo costo para la terapia con medicamentos. Trabajamos con sus proveedores médicos y farmacéuticos para estar seguros de que cubrimos los medicamentos más útiles e importantes para una variedad de enfermedades y condiciones. Cubrimos ambas, las primeras recetas de medicamentos y recetas adicionales. También cubrimos algunos medicamentos de venta libre (OTC, por sus siglas en inglés) si su proveedor le entrega una receta y la compra en una farmacia.

Nuestro programa de farmacia no cubre todos los medicamentos y recetas. Algunos medicamentos deben cumplir algunas pautas clínicas antes de que los podamos cubrir. Su proveedor debe solicitarnos la autorización previa antes de que cubramos estos medicamentos.

Lista de Medicamentos Preferidos (*PDL*, por sus siglas en inglés)

Listamos todos los medicamentos según su categoría terapéutica y clase de droga, seguido por el nombre genérico o de marca. Use el índice para encontrar un medicamento según su nombre genérico o de marca. Cubrimos medicamentos de marca solamente cuando un medicamento genérico no esté disponible o si brindamos la autorización previa para usar el medicamento de marca.

Con la receta de un médico, los medicamentos cubiertos están a disposición de los miembros menores de 21 años de edad gratis y de los miembros de 21 años o mayores por un pequeño copago. Algunos miembros de 21 años o más no necesitan pagar el copago. Para determinar si no necesita pagar un copago, consulte su *Manual del Miembro*.

Copagos:
La mayoría de los miembros que tienen 21 años de edad o más deben pagar los siguientes copagos de farmacia:

- $1 por ciertos medicamentos genéricos cubiertos usados principalmente para la diabetes, la hipertensión arterial y el alto nivel de colesterol. Estos medicamentos se llaman antihiperglicémicos (como metaformina), antihipertensivos (como lisinopril) y antihiperlipidémicos (como simvastatin)
- $3.65 por ciertos medicamentos de venta libre (OTC, por sus siglas en inglés) para los cuales tiene una receta del medico
- $3.65 por la primera receta y recetas adicionales de ciertos medicamentos genéricos cubiertos y de venta libre

- $3.65 por la primera receta y recetas adicionales de medicamentos cubiertos de marca

La *PDL* se aplica solamente a medicamentos que recibe en farmacias minoristas y de especialidades. La *PDL* no se aplica a medicamentos que recibe si está en el hospital. Los medicamentos que usted recibe mientras está en el hospital están cubiertos como parte de su estadía.

Para obtener la información más actualizada sobre la *PDL*, por favor visite tuftshealthplan.com o llámenos al **888.257.1985** (TTY: 888.391.5535).

Autorización previa
Algunos medicamentos siempre requieren autorización previa, lo que quiere decir que su proveedor debe solicitarnos la aprobación antes de que nosotros paguemos por el medicamento. Uno de nuestros clínicos evaluará esta solicitud. Nosotros cubriremos el medicamento de acuerdo a nuestras directrices clínicas si:

- Existe una justificación médica por la que necesita un medicamento en particular
- Dependiendo del medicamento, otros medicamentos de la *PDL* no han sido útiles

Si no aprobamos la solicitud de autorización previa, usted o su representante autorizado, si identifica a uno, puede apelar la decisión. Vea su *Manual del Miembro* para obtener información sobre las quejas y apelaciones.

Programa de terapia escalonada
Cubrimos algunos tipos de medicamentos solamente a través de nuestro programa de terapia escalonada. Nuestro programa de terapia escalonada requiere que usted pruebe medicamentos de primer nivel antes de que cubramos otro medicamento de dicho tipo. Si usted y su proveedor piensan que cierto medicamento no es apropiado para tratar su enfermedad, su proveedor puede solicitarnos la autorización previa para usar el otro medicamento. Uno de nuestros clínicos evaluará la solicitud. Nosotros cubriremos el medicamento de acuerdo a nuestras directrices clínicas. Si no aprobamos la solicitud de autorización previa, usted o su representante autorizado, si identifica a uno, puede apelar la decisión. Vea su *Manual del Miembro* para obtener información sobre las quejas y apelaciones.

Límite a la cantidad
Para asegurar que los medicamentos que toma son seguros y que recibe la cantidad apropiada, podríamos limitar cuánto recibe en cada oportunidad. Su proveedor puede pedirnos la autorización previa si usted necesita más de lo que cubrimos. Uno de nuestros clínicos evaluará la solicitud. Nosotros cubriremos el medicamento de acuerdo a nuestras directrices clínicas si existe una razón médica por la que se necesita esta cantidad en particular. Si no aprobamos la solicitud de autorización previa, usted o su representante autorizado, si identifica a uno, puede apelar la decisión. Vea su *Manual del Miembro* para obtener información sobre las quejas y apelaciones.

Medicamentos genéricos
Los medicamentos genéricos tienen los mismos ingredientes activos y funcionan de la misma manera que los medicamentos de marca. Cuando hay medicamentos genéricos disponibles, no cubrimos el medicamento de marca sin autorización previa. Si usted y su proveedor piensan que un medicamento genérico no es apropiado para tratar su enfermedad y que un medicamento de marca es médicamente necesario, su proveedor puede solicitarnos la autorización previa. Uno de nuestros clínicos evaluará la solicitud. Si no aprobamos la solicitud de autorización previa, usted o su representante autorizado, si identifica a uno, puede apelar la decisión. Vea su *Manual del Miembro*

para obtener información sobre las quejas y apelaciones.

Medicamentos nuevos en el mercado

Nosotros evaluamos nuevos medicamentos para determinar su eficacia y seguridad antes de agregarlos a nuestra *PDL*. Un proveedor que piensa que un medicamento nuevo en el mercado es médicamente necesario para usted antes de que lo hayamos evaluado, puede presentar una solicitud de autorización previa. Uno de nuestros clínicos evaluará esta solicitud. Si aprobamos la solicitud, cubriremos el medicamento de acuerdo a nuestras directrices clínicas. Si no aprobamos la solicitud, usted o su representante autorizado, si identifica a uno, puede apelar la decisión. Vea su *Manual del Miembro* para obtener información sobre las quejas y apelaciones.

Límites a la cobertura

La columna Requisitos/Límites en la *PDL* indica cuando un medicamento tiene un cierto requisito o límite para la cobertura. Los límites a la cobertura incluyen:

- AGE (edad, en inglés) — Se puede aplicar restricción a la edad
  Este medicamento requiere autorización previa, si el medicamento no está cubierto basado en la edad del miembro. Su proveedor deberá solicitarnos la autorización previa si el medicamento es médicamente necesario.
- PA (por sus siglas en inglés) — Autorización previa
  Este medicamento requiere autorización previa. Su proveedor puede recetar un medicamento diferente de la *PDL* o enviarnos una solicitud de autorización previa.
- QL (por sus siglas en inglés) — Límite a la cantidad
  Este medicamento se limita a una cantidad específica. Si una mayor cantidad es médicamente necesaria, su proveedor deberá enviar una solicitud de autorización previa.
- SP (por sus siglas en inglés) — Medicamento de especialidad
  Este medicamento está disponible solamente a través de nuestro proveedor de farmacia de especialidades, CVS/specialty.
- ST (por sus siglas en inglés) — Terapia escalonada
  Este medicamento requiere una autorización previa si todavía no ha usado un medicamento de primera línea de la *PDL.* Su proveedor puede recetar otro medicamento de la *PDL* o enviarnos una solicitud de autorización previa.

Medicare Parte D

Si tiene la cobertura de Medicare, su cobertura de medicamentos recetados de Medicare (Parte D) cubrirá gran parte de sus medicamentos recetados. Debería tener una tarjeta de identificación adicional para su cobertura de medicamentos recetados de Medicare. Por favor, muéstrele a su farmacéutico su tarjeta de identificación de Medicare Parte D cuando compra un medicamento recetado.

Aunque tenga Medicare Parte D, nosotros cubriremos algunos medicamentos, tales como ciertos medicamentos OTC. Los montos del copago y las excepciones se siguen aplicando a estos medicamentos cubiertos. Para más información, por favor llámenos al **888.257.1985** (TTY: 888.391.5535). También puede encontrar más información sobre su cobertura de medicamentos recetados de Medicare llamando a Medicare al 800.633.4227
(TTY: 877.486.2048), visitando el sitio web de Medicare en medicare.gov o consultando su manual *Medicare y Usted*. Recuerde llevar todas sus tarjetas de identificación con usted cuando visita la farmacia. Cuando compra un medicamento recetado, por favor muestre su tarjeta de identificación como miembro de *Tufts Health Together* y MassHealth así como sus tarjetas de identificación para medicamentos recetados de Medicare.

Programa de farmacia de especialidades

Una farmacia de especialidades necesita entregarle ciertos medicamentos, como medicamentos inyectables y por vía intravenosa (IV, por sus siglas en inglés), que a menudo se usan para tratar enfermedades crónicas como la hepatitis C o la esclerosis múltiple. Estos tipos de medicamentos necesitan apoyo y conocimiento adicional. Las farmacias de especialidades tienen conocimientos en estos campos. Estas farmacias pueden brindar apoyo adicional a miembros y proveedores.

CVS/specialty es nuestra farmacia de especialidades y puede entregarle estos medicamentos. Además de proporcionar medicamentos específicos de especialidad, CVS/specialty:

- Entregará los medicamentos a su domicilio, consultorio de su proveedor o cualquier dirección que elija (excepto una casilla de correos)
- Responderá sus respuestas y ofrecerá ayuda con sus medicamentos
- Le brindará información, materiales y apoyo continuo para ayudarle a atender su enfermedad y a tomar los medicamentos de la manera correcta
- Tendrá farmacéuticos que pueden ayudarle las 24 horas al día, siete días a la semana, en el 800.237.2767

Synagis

Cada año, desde el 1 de noviembre al 31 de marzo, CVS/specialty proporcionará a los miembros de *Tufts Health Together* con Synagis, que se usa para prevenir una enfermedad respiratoria seria causada por el virus respiratorio sincitial (RSV, por sus siglas en inglés). Evaluaremos las solicitudes de Synagis según las directrices más recientes de la American Academy of Pediatrics.

Tufts Health Plan cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo. Tufts Health Plan no excluye a las personas ni las trata de forma diferente debido a su raza, color, nacionalidad, edad, discapacidad o sexo.

Tufts Health Plan:

- Proporciona asistencia y servicios gratuitos a las personas con discapacidades para que se comuniquen de manera eficaz con nosotros, como los siguientes:
  - Información escrita en otros formatos (letra grande, audio, formatos electrónicos accesibles, otros formatos)
- Proporciona servicios lingüísticos gratuitos a personas cuya lengua materna no es el inglés, como los siguientes:
  - Intérpretes capacitados
  - Información escrita en otros idiomas

Si necesita recibir estos servicios, comuníquese con Servicios para Miembros de Tufts Health Plan a 888.257.1985.

Si considera que Tufts Health Plan no le proporcionó estos servicios o lo discriminó de otra manera por motivos de raza, color, nacionalidad, edad, discapacidad o sexo, puede presentar un reclamo a la siguiente persona:

Tufts Health Plan
Attention: Civil Rights Coordinator, Legal Dept.
705 Mount Auburn St.
Watertown, MA 02472
Phone: 888.880.8699 ext. 48000, [TTY number— 866-930-9252]
Fax: 617.972.9048
Email: OCRCoordinator@tufts-health.com

Puede presentar el reclamo en persona o por correo postal, fax o correo electrónico. Si necesita ayuda para hacerlo, el coordinador de derechos civiles con Tufts Health Plan está a su disposición para brindársela.

También puede presentar un reclamo de derechos civiles ante la Office for Civil Rights (Oficina de Derechos Civiles) del Department of Health and Human Services (Departamento de Salud y Servicios Humanos) de EE. UU. de manera electrónica a través de Office for Civil Rights Complaint Portal, disponible en https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, o bien, por correo postal a la siguiente dirección o por teléfono a los números que figuran a continuación:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
Phone: 800.368.1019, 800.537.7697 (TDD)

Puede obtener los formularios de reclamo en el sitio web http://www.hhs.gov/ocr/office/file/index.html.

For no cost translation in English, call the number on your ID card.

Arabic للحصول على خدمة الترجمة المجانية باللغة العربية، يرجى الاتصال على الرقم المدون على بطاقة الهوية الخاصة بك.

Chinese 若需免費的中文版本，請撥打ID卡上的電話號碼。

French Pour demander une traduction gratuite en français, composez le numéro indiqué sur votre carte d'identité.

German Um eine kostenlose deutsche Übersetzung zu erhalten, rufen Sie bitte die Telefonnummer auf Ihrer Ausweiskarte an.

Greek Για δωρεάν μετάφραση στα Ελληνικά, καλέστε τον αριθμό που αναγράφεται στην αναγνωριστική κάρτας σας.

Haitian Creole Pou jwenn tradiksyon gratis nan lang Kreyòl Ayisyen, rele nimewo ki sou kat ID ou.

Italian Per la traduzione in italiano senza costi aggiuntivi, è possibile chiamare il numero indicato sulla tessera identificativa.

Japanese 日本語の無料翻訳についてはIDカードに書いてある番号に電話してください。

Khmer (Cambodian) សម្រាប់សេវាបកប្រែដោយឥតគិតថ្លៃជា ភាសាខ្មែរ សូមទូរស័ព្ទទៅកាន់លេខដែលមាននៅលើប័ណ្ណសម្គាល់សមាជិករបស់អ្នក។

Korean 한국어로 무료 통역을 원하시면, ID 카드에 있는 번호로 연락하십시오.

Laotian ສໍາລັບການແປພາສາເປັນພາສາລາວທີ່ບໍ່ໄດ້ເສຍຄ່າໃຊ້ຈ່າຍ, ໃຫ້ໂທຫາເບີທີ່ຢູ່ເທິງບັດປະຈໍາຕົວຂອງທ່ານ.

Navajo Doo bą́ą́h ilíní da Diné k'ehjí álnéehgo, hodiilnih béésh bee haní'é bee néé ho'dílzingo nantinígíí bikáá'.

Persian. برای ترجمه رایگا فارسی به شماره تلفن مندرج در کارت شناسائی تان زنگ بزنید

Polish Aby uzyskać bezpłatne tłumaczenie w języku polskim, należy zadzwonić na numer znajdujący się na Pana/i dowodzie tożsamości.

Portuguese Para tradução grátis para português, ligue para o número no seu cartão de identificação.

Russian Для получения услуг бесплатного перевода на русский язык позвоните по номеру, указанному на идентификационной карточке.

Spanish Por servicio de traducción gratuito en español, llame al número de su tarjeta de miembro.

Tagalog Para sa walang bayad na pagsasalin sa Tagalog, tawagan ang numero na nasa inyong ID card.

Vietnamese Để có bản dịch tiếng Việt không phải trả phí, gọi theo số trên thẻ căn cước của bạn.

Table of Contents

ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS 3
ALLERGENIC EXTRACTS/BIOLOGICALS MISC 8
AMEBICIDES 8
AMINOGLYCOSIDES 8
ANALGESICS - ANTI-INFLAMMATORY 9
ANALGESICS - NONNARCOTIC 12
ANALGESICS - OPIOID 12
ANDROGENS-ANABOLIC 17
ANORECTAL AND RELATED PRODUCTS 18
ANTHELMINTICS 18
ANTIANGINAL AGENTS 18
ANTIANXIETY AGENTS 19
ANTIARRHYTHMICS 21
ANTIASTHMATIC AND BRONCHODILATOR AGENTS 22
ANTICOAGULANTS 26
ANTICONVULSANTS 27
ANTIDEPRESSANTS 34
ANTIDIABETICS 40
ANTIDIARRHEAL/PROBIOTIC AGENTS 46
ANTIDOTES AND SPECIFIC ANTAGONISTS 46
ANTIEMETICS 47
ANTIFUNGALS 48
ANTIHISTAMINES 48
ANTIHYPERLIPIDEMICS 49
ANTIHYPERTENSIVES 51
ANTI-INFECTIVE AGENTS - MISC. 54
ANTIMALARIALS 56
ANTIMYASTHENIC/CHOLINERGIC AGENTS 56
ANTIMYCOBACTERIAL AGENTS 56
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES 57
ANTIPARKINSON AND RELATED THERAPY AGENTS 65
ANTIPSYCHOTICS/ANTIMANIC AGENTS 67
ANTIVIRALS 74
BETA BLOCKERS 78
CALCIUM CHANNEL BLOCKERS 79
CARDIOTONICS 81
CARDIOVASCULAR AGENTS - MISC. 81
CEPHALOSPORINS 82
CONTRACEPTIVES 83
CORTICOSTEROIDS 88
COUGH/COLD/ALLERGY 89
DERMATOLOGICALS 90
DIAGNOSTIC PRODUCTS 101
DIGESTIVE AIDS 101
DIURETICS 101
ENDOCRINE AND METABOLIC AGENTS - MISC. 103
ESTROGENS 107
FLUOROQUINOLONES 108
GASTROINTESTINAL AGENTS - MISC. 108
GENITOURINARY AGENTS - MISCELLANEOUS 110

GOUT AGENTS 111
HEMATOLOGICAL AGENTS - MISC. 111
HEMATOPOIETIC AGENTS 113
HEMOSTATICS 116
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS 116
LAXATIVES 118
LOCAL ANESTHETICS-PARENTERAL 118
MACROLIDES 119
MEDICAL DEVICES AND SUPPLIES 119
MIGRAINE PRODUCTS 124
MINERALS & ELECTROLYTES 126
MISCELLANEOUS THERAPEUTIC CLASSES 126
MOUTH/THROAT/DENTAL AGENTS 128
MULTIVITAMINS 129
MUSCULOSKELETAL THERAPY AGENTS 130
NASAL AGENTS - SYSTEMIC AND TOPICAL 131
NEUROMUSCULAR AGENTS 131
NUTRIENTS 132
OPHTHALMIC AGENTS 132
OTIC AGENTS 136
OXYTOCICS 136
PASSIVE IMMUNIZING AND TREATMENT AGENTS 137
PENICILLINS 138
PHARMACEUTICAL ADJUVANTS 138
PROGESTINS 138
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. 139
RESPIRATORY AGENTS - MISC. 144
SULFONAMIDES 145
TETRACYCLINES 145
THYROID AGENTS 146
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS 146
URINARY ANTI-INFECTIVES 149
URINARY ANTISPASMODICS 149
VAGINAL AND RELATED PRODUCTS 150
VASOPRESSORS 150
VITAMINS 151

Drug	Status	Notes
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS		
ADDERALL XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	$3.65	PA; ¥ (PA applies to members 2 years and under and 25 years and older; PBHMI polypharmacy for members less than 18 years of age); Preferred product; brand preferred; QL (60 EA per 30 days)
ADZENYS ER ORAL SUSPENSION EXTENDED RELEASE	$3.65	PA; ¥ (Additional PA requirements for members 2 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (15 ML per 1 day)
ADZENYS XR-ODT ORAL TABLET EXTENDED RELEASE DISPERSIBLE	$3.65	PA; ¥ (Additional PA requirements for members 2 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (30 EA per 30 days)
amphetamine-dextroamphetamine oral tablet	$3.65	PA; ¥ (PA applies to members 2 years and under and 25 years and older; PBHMI polypharmacy for members less than 18 years of age); QL (90 EA per 30 days)
armodafinil oral tablet 150 mg, 200 mg, 250 mg	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (30 Tablets per 30 days)
armodafinil oral tablet 50 mg	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (60 Tablets per 30 days)
atomoxetine hcl oral capsule	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); QL (60 EA per 30 days)
caffeine citrate oral solution	$3.65	

^ = Mandates May Apply
¥ = Additional Limits May Apply
= Drug specific notes
MB/RX = Drug available through pharmacy and medical benefits
PBHMI = Pediatric Behavioral Health Medication Initiative

Drug	Status	Notes
clonidine hcl er oral tablet extended release 12 hour	$3.65	PA; ¥ (Additional PA requirements for members 2 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (120 EA per 30 days)
CONCERTA ORAL TABLET EXTENDED RELEASE 18 MG, 27 MG, 54 MG	$3.65	PA; ¥ (PA applies to members 2 years and under and 25 years and older; PBHMI polypharmacy for members less than 18 years of age); Brand Preferred; QL (30 EA per 30 days)
CONCERTA ORAL TABLET EXTENDED RELEASE 36 MG	$3.65	PA; ¥ (PA applies to members 2 years and under and 25 years and older; PBHMI polypharmacy for members less than 18 years of age); Brand Preferred; QL (60 EA per 30 days)
COTEMPLA XR-ODT ORAL TABLET EXTENDED RELEASE DISPERSIBLE	$3.65	PA; ¥ (Additional PA requirements for members 2 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (30 EA per 30 days)
DAYTRANA TRANSDERMAL PATCH	$3.65	PA; ¥ (Additional PA requirements for members 2 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (30 patches per 30 days)
DEXEDRINE ORAL TABLET	$3.65	PA; ¥ (PA applies to members less than 3 years old or 25 and older); QL (90 EA per 30 days)
dexmethylphenidate hcl oral tablet	$3.65	PA; ¥ (PA applies to members 2 years and under and 25 years and older; PBHMI polypharmacy for members less than 18 years of age); QL (60 EA per 30 days)
dextroamphetamine sulfate er oral capsule extended release 24 hour	$3.65	PA; ¥ (PA applies to members 2 years and under and 25 years and older; PBHMI polypharmacy for members less than 18 years of age); QL (90 EA per 30 days)

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Drug	Status	Notes
dextroamphetamine sulfate oral solution	$3.65	PA; ¥ (PA applies to members 2 years and under and 25 years and older; PBHMI polypharmacy for members less than 18 years of age); QL (1200 mL per 30 days)
dextroamphetamine sulfate oral tablet 10 mg, 5 mg	$3.65	PA; ¥ (PA applies to members 2 years and under and 25 years and older; PBHMI polypharmacy for members less than 18 years of age); QL (90 EA per 30 days)
DYANAVEL XR ORAL SUSPENSION EXTENDED RELEASE	$3.65	PA; ¥ (Additional PA requirements for members 2 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (240 ML per 30 days)
FOCALIN XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	$3.65	PA; ¥ (PA applies to members 2 years and under and 25 years and older; PBHMI polypharmacy for members less than 18 years of age); Preferred product; brand preferred; QL (30 EA per 30 days)
guanfacine hcl er oral tablet extended release 24 hour	$3.65	PA; ¥ (PA applies to members 2 years and under; PBHMI polypharmacy for members less than 18 years of age)
IMCIVREE SUBCUTANEOUS SOLUTION	$3.65	PA
JORNAY PM ORAL CAPSULE EXTENDED RELEASE 24 HOUR	$3.65	PA; ¥ (Additional PBHMI polypharmacy PA requirements for members less than 18 years of age)
methamphetamine hcl oral tablet	$3.65	PA; ¥ (PA applies to members 2 years and under and 25 years and older; PBHMI polypharmacy for members less than 18 years of age); QL (150 EA per 30 days)
methylphenidate hcl er (cd) oral capsule extended release	$3.65	PA; ¥ (Additional PA requirements for members 2 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (30 EA per 30 days)

^ = Mandates May Apply
¥ = Additional Limits May Apply
= Drug specific notes
MB/RX = Drug available through pharmacy and medical benefits
PBHMI = Pediatric Behavioral Health Medication Initiative

Drug	Status	Notes
methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg, 20 mg, 40 mg, 60 mg	$3.65	PA; ¥ (Additional PA requirements for members 2 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (30 EA per 30 days)
methylphenidate hcl er (la) oral capsule extended release 24 hour 30 mg	$3.65	PA; ¥ (Additional PA requirements for members 2 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (60 EA per 30 days)
methylphenidate hcl er (xr) oral capsule extended release 24 hour	$3.65	PA; ¥ (Additional PA requirements for members 2 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (30 EA per 30 days)
methylphenidate hcl er oral tablet extended release 10 mg, 20 mg	$3.65	PA; ¥ (PA applies to members 2 years and under and 25 years and older; PBHMI polypharmacy for members less than 18 years of age); QL (90 EA per 30 days)
methylphenidate hcl er oral tablet extended release 72 mg	$3.65	PA; ¥ (Additional PA requirements for members 2 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (1 EA per 1 day)
methylphenidate hcl oral solution	$3.65	PA; ¥ (PA applies to members less than 3 years old or 25 and older); QL (900 mL per 30 days)
methylphenidate hcl oral tablet	$3.65	PA; ¥ (PA applies to members less than 3 years old or 25 and older); QL (90 EA per 30 days)
methylphenidate hcl oral tablet chewable	$3.65	PA; ¥ (PA applies to members less than 3 years old or 25 and older); QL (90 EA per 30 days)
modafinil oral tablet	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (30 EA per 30 days)

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Drug	Status	Notes
MYDAYIS ORAL CAPSULE EXTENDED RELEASE 24 HOUR	$3.65	PA; ¥ (Additional PA requirements for members 2 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (30 EA per 30 days)
QELBREE ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (30 EA per 30 days)
QELBREE ORAL CAPSULE EXTENDED RELEASE 24 HOUR 150 MG, 200 MG	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (60 EA per 30 days)
QUILLICHEW ER ORAL TABLET CHEWABLE EXTENDED RELEASE	$3.65	PA; ¥ (Additional PA requirements for members 2 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (60 EA per 30 days)
QUILLIVANT XR ORAL SUSPENSION RECONSTITUTED	$3.65	PA; ¥ (Additional PA requirements for members 2 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (360 mL per 30 days)
SUNOSI ORAL TABLET	$3.65	PA; QL (30 EA per 30 days)
VYVANSE ORAL CAPSULE	$3.65	PA; ¥ (PA applies to members 2 years and under and 25 years and older; PBHMI polypharmacy for members less than 18 years of age); Preferred product; QL (30 EA per 30 days)
VYVANSE ORAL TABLET CHEWABLE	$3.65	PA; ¥ (PA applies to members 2 years and under and 25 years and older; PBHMI polypharmacy for members less than 18 years of age); Preferred product; QL (30 EA per 30 days)
WAKIX ORAL TABLET	$3.65	PA; QL (2 tablets per 1 day)
ZENZEDI ORAL TABLET 10 MG, 5 MG	$3.65	PA; ¥ (PA applies to members less than 3 years old or 25 and older); QL (90 EA per 30 days)

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Drug	Status	Notes
ALLERGENIC EXTRACTS/BIOLOGICALS MISC		
ODACTRA SUBLINGUAL TABLET SUBLINGUAL	$3.65	PA
ORALAIR ADULT STARTER PACK SUBLINGUAL TABLET SUBLINGUAL	$3.65	PA
ORALAIR CHILDRENS STARTER PACK SUBLINGUAL TABLET SUBLINGUAL	$3.65	PA
ORALAIR SUBLINGUAL TABLET SUBLINGUAL	$3.65	PA
PALFORZIA (12 MG DAILY DOSE) ORAL	$3.65	PA
PALFORZIA (120 MG DAILY DOSE) ORAL	$3.65	PA
PALFORZIA (160 MG DAILY DOSE) ORAL	$3.65	PA
PALFORZIA (20 MG DAILY DOSE) ORAL	$3.65	PA
PALFORZIA (200 MG DAILY DOSE) ORAL	$3.65	PA
PALFORZIA (240 MG DAILY DOSE) ORAL	$3.65	PA
PALFORZIA (3 MG DAILY DOSE) ORAL	$3.65	PA
PALFORZIA (300 MG MAINTENANCE) ORAL PACKET	$3.65	PA
PALFORZIA (300 MG TITRATION) ORAL PACKET	$3.65	PA
PALFORZIA (40 MG DAILY DOSE) ORAL	$3.65	PA
PALFORZIA (6 MG DAILY DOSE) ORAL	$3.65	PA
PALFORZIA (80 MG DAILY DOSE) ORAL	$3.65	PA
PALFORZIA INITIAL ESCALATION ORAL	$3.65	PA
AMEBICIDES		
SOLOSEC ORAL PACKET	$3.65	PA
AMINOGLYCOSIDES		
ARIKAYCE INHALATION SUSPENSION	$3.65	
neomycin sulfate oral tablet	$3.65	
paromomycin sulfate oral capsule	$3.65	
TOBI PODHALER INHALATION CAPSULE	$3.65	PA; SP; QL (8 EA per 1 day)
tobramycin inhalation nebulization solution 300 mg/5ml	$3.65	SP

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Drug	Status	Notes
ANALGESICS - ANTI-INFLAMMATORY		
ACTEMRA ACTPEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	$3.65	PA; SP; QL (4 Syringes per 28 days)
Actemra Intravenous Solution 200 MG/10ML	MB/RX	PA; SP; QL (4 vials per 28 days)
Actemra Intravenous Solution 400 MG/20ML	MB/RX	PA; SP; QL (2 vials per 28 days)
Actemra Intravenous Solution 80 MG/4ML	MB/RX	PA; SP; QL (10 vials per 28 days)
ACTEMRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	$3.65	PA; SP; QL (4 syringes per 28 days)
ARCALYST SUBCUTANEOUS SOLUTION RECONSTITUTED	$3.65	PA; SP; QL (4 Vials per 28 days)
celecoxib oral capsule	$3.65	
diclofenac potassium oral tablet 50 mg	$3.65	
diclofenac sodium er oral tablet extended release 24 hour	$3.65	
diclofenac sodium oral tablet delayed release	$3.65	
ENBREL MINI SUBCUTANEOUS SOLUTION CARTRIDGE	$3.65	PA; SP; Preferred product; QL (4 cartridges per 28 days)
ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5ML	$3.65	PA; SP; Preferred product; QL (8 syringes per 28 days)
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 25 MG/0.5ML	$3.65	PA; SP; Preferred product; QL (8 syringes per 28 days)
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/ML	$3.65	PA; SP; Preferred product; QL (4 syringes per 28 days)
ENBREL SUBCUTANEOUS SOLUTION RECONSTITUTED	$3.65	PA; SP; Preferred product; QL (8 syringes per 28 days)
ENBREL SURECLICK SUBCUTANEOUS SOLUTION	$3.65	PA; SP; Preferred product; QL (4 syringes per 28 days)
ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	$3.65	PA; SP; Preferred product; QL (4 syringes per 28 days)
etodolac er oral tablet extended release 24 hour	$3.65	
etodolac oral capsule	$3.65	
etodolac oral tablet	$3.65	
fenoprofen calcium oral tablet	$3.65	
flurbiprofen oral tablet	$3.65	

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Drug	Status	Notes
HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.8ML, 80 MG/0.8ML, 80 MG/0.8ML & 40MG/0.4ML	$3.65	PA; SP; Preferred product; QL (1 kit per 1 lifetime)
HUMIRA PEN SUBCUTANEOUS KIT	$3.65	PA; SP; Preferred product; QL (2 EA per 28 days)
HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT	$3.65	PA; SP; Preferred product; QL (2 EA per 28 days)
HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML	$3.65	PA; SP; ¥ (1 Fill per life of plan); Preferred product; QL (1 Fill per 1 Lifetime)
HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML	$3.65	PA; SP; Preferred product; QL (1 Fill per 1 Lifetime)
HUMIRA PEN-PEDIATRIC UC START SUBCUTANEOUS PEN-INJECTOR KIT	$3.65	PA; SP; Preferred product; QL (1 fill per 1 lifetime)
HUMIRA PEN-PS/UV/ADOL HS START SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML	$3.65	PA; SP; ¥ (1 Fill per life of plan); Preferred product; QL (1 Fill per 1 Lifetime)
HUMIRA PEN-PSOR/UVEIT STARTER SUBCUTANEOUS PEN-INJECTOR KIT	$3.65	PA; SP; Preferred product; QL (1 Fill per 1 Lifetime)
HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT	$3.65	PA; SP; Preferred product; QL (2 EA per 28 days)
ibuprofen oral suspension	$3.65	
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	$3.65	
Ilaris (150mg Delivered) Subcutaneous Solution Reconstituted	MB/RX	PA; SP
Ilaris Subcutaneous Solution	MB/RX	PA; SP
INDOCIN ORAL SUSPENSION	$3.65	
indomethacin er oral capsule extended release	$3.65	
indomethacin oral capsule 25 mg, 50 mg	$3.65	
ketoprofen er oral capsule extended release 24 hour	$3.65	
ketoprofen oral capsule	$3.65	
ketorolac tromethamine injection solution 15 mg/ml, 30 mg/ml	$3.65	¥ (Max of 5 days per Rx); QL (120 mg per 1 day)
ketorolac tromethamine intramuscular solution 60 mg/2ml	$3.65	¥ (Max of 5 days per Rx); QL (120 mg per 1 day)

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Drug	Status	Notes
ketorolac tromethamine nasal solution	$3.65	PA; ¥ (Max of 5 days per Rx); QL (4 units per 1 day)
ketorolac tromethamine oral tablet	$3.65	QL (20 EA per 30 days)
KEVZARA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	$3.65	PA; SP; QL (2.28 ML per 30 days)
KEVZARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	$3.65	PA; SP; QL (2.28 ML per 30 days)
KINERET SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	$3.65	PA; QL (28 Syringes per 28 days)
leflunomide oral tablet	$3.65	
meclofenamate sodium oral capsule	$3.65	
mefenamic acid oral capsule	$3.65	PA
meloxicam oral suspension	$3.65	
meloxicam oral tablet	$3.65	
nabumetone oral tablet	$3.65	
naproxen dr oral tablet delayed release	$3.65	
naproxen oral suspension	$3.65	
naproxen oral tablet	$3.65	
naproxen sodium oral tablet	$3.65	
OLUMIANT ORAL TABLET	$3.65	PA; SP
ORENCIA CLICKJECT SUBCUTANEOUS SOLUTION AUTO-INJECTOR	$3.65	PA; SP; QL (4 ML per 28 days)
Orencia Intravenous Solution Reconstituted	MB/RX	PA; SP; QL (4 VIALS per 28 days)
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 125 MG/ML	$3.65	PA; SP; QL (4 ML per 28 days)
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/0.4ML, 87.5 MG/0.7ML	$3.65	PA; SP; QL (4 Syringes per 28 days)
OTEZLA ORAL TABLET	$3.65	PA; SP; QL (60 EA per 30 days)
OTEZLA ORAL TABLET THERAPY PACK	$3.65	PA; SP; QL (1 Fill per 1 Lifetime)
oxaprozin oral tablet	$3.65	
piroxicam oral capsule	$3.65	
RHEUMATREX ORAL TABLET 2.5 MG	$3.65	
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR	$3.65	PA; SP; QL (30 EA per 30 days)

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Drug	Status	Notes
Simponi Aria Intravenous Solution	MB/RX	PA; SP; QL (5 vials per 8 Weeks)
SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR	$3.65	PA; SP; QL (1 syringe per 28 days)
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	$3.65	PA; SP; QL (1 syringe per 28 days)
sulindac oral tablet	$3.65	
tolmetin sodium oral capsule	$3.65	
tolmetin sodium oral tablet	$3.65	
XELJANZ ORAL TABLET	$3.65	PA; SP; Preferred product; QL (2 tablets per 1 day)
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR	$3.65	PA; SP; Preferred product; QL (1 tablet per 1 day)
ANALGESICS - NONNARCOTIC		
butalbital-acetaminophen oral tablet 50-325 mg	$3.65	QL (180 EA per 30 days)
butalbital-apap-caffeine oral capsule 50-325-40 mg	$3.65	QL (180 EA per 30 days)
butalbital-apap-caffeine oral tablet 50-325-40 mg	$3.65	QL (180 EA per 30 days)
butalbital-aspirin-caffeine oral capsule	$3.65	QL (180 EA per 30 days)
CAPACET ORAL CAPSULE	$3.65	QL (180 EA per 30 days)
choline & mag trisalicylate oral tablet 1000 mg	$3.65	
choline-mag trisalicylate oral liquid	$3.65	
diflunisal oral tablet	$3.65	
margesic oral capsule	$3.65	QL (180 EA per 30 days)
marten-tab oral tablet	$3.65	QL (180 EA per 30 days)
salsalate oral tablet	$3.65	
TENCON ORAL TABLET 50-325 MG	$3.65	QL (180 EA per 30 days)
ZEBUTAL ORAL CAPSULE 50-325-40 MG	$3.65	QL (180 EA per 30 days)
ANALGESICS - OPIOID		
ABSTRAL SUBLINGUAL TABLET SUBLINGUAL	$3.65	PA
acetaminophen-codeine #2 oral tablet	$3.65	QL (12 EA per 1 day)
acetaminophen-codeine #3 oral tablet	$3.65	QL (12 EA per 1 day)
acetaminophen-codeine #4 oral tablet	$3.65	QL (6 EA per 1 day)
acetaminophen-codeine oral solution	$3.65	QL (150 ML per 1 day)
acetaminophen-codeine oral tablet 300-15 mg, 300-30 mg	$3.65	QL (12 EA per 1 day)

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acetaminophen-codeine oral tablet 300-60 mg	$3.65	QL (6 EA per 1 day)
APADAZ ORAL TABLET	$3.65	PA; QL (168 EA per 14 days)
ASCOMP-CODEINE ORAL CAPSULE	$3.65	QL (180 EA per 30 days)
BELBUCA BUCCAL FILM	$3.65	PA; QL (60 Films per 30 days)
BUNAVAIL BUCCAL FILM 2.1-0.3 MG, 6.3-1 MG	$0	PA; ¥ (Max of 32 mg/day for the first 6 months); QL (30 EA per 30 days)
BUNAVAIL BUCCAL FILM 4.2-0.7 MG	$0	PA; ¥ (Max of 32 mg/day for the first 6 months); QL (60 EA per 30 days)
buprenorphine hcl sublingual tablet sublingual	$0	PA
buprenorphine hcl-naloxone hcl sublingual tablet sublingual 2-0.5 mg	$0	PA; ¥ (Max of 32 mg/day for the first 6 months); QL (90 EA per 30 days)
buprenorphine hcl-naloxone hcl sublingual tablet sublingual 8-2 mg	$0	PA; ¥ (Max of 32 mg/day for the first 6 months); QL (60 EA per 30 days)
buprenorphine transdermal patch weekly	$3.65	PA; QL (4 EA per 28 days)
butalbital-asa-caff-codeine oral capsule	$3.65	QL (180 EA per 30 days)
butorphanol tartrate injection solution	$3.65	
butorphanol tartrate nasal solution	$3.65	
CAPITAL/CODEINE ORAL SUSPENSION	$3.65	QL (150 ML per 1 day)
codeine sulfate oral tablet	$3.65	QL (360 mg per 1 day)
EMBEDA ORAL CAPSULE EXTENDED RELEASE	$3.65	PA; QL (2 EA per 1 day)
ENDOCET ORAL TABLET 10-325 MG	$3.65	QL (6 EA per 1 day)
ENDOCET ORAL TABLET 2.5-325 MG, 5-325 MG	$3.65	QL (12 EA per 1 day)
ENDOCET ORAL TABLET 7.5-325 MG	$3.65	QL (8 EA per 1 day)
fentanyl citrate buccal lozenge on a handle	$3.65	PA; QL (120 EA per 30 days)
fentanyl transdermal patch 72 hour 100 mcg/hr, 37.5 mcg/hr, 50 mcg/hr, 62.5 mcg/hr, 75 mcg/hr, 87.5 mcg/hr	$3.65	PA; QL (10 EA per 30 days)
fentanyl transdermal patch 72 hour 12 mcg/hr, 25 mcg/hr	$3.65	QL (10 EA per 30 days)
FENTORA BUCCAL TABLET 100 MCG	$3.65	PA; QL (4 EA per 1 day)

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hydrocodone-acetaminophen oral solution 2.5-108 mg/5ml, 5-217 mg/10ml, 7.5-325 mg/15ml, 7.5-500 mg/15ml	$3.65	QL (90 ML per 1 day)
hydrocodone-acetaminophen oral tablet 10-325 mg, 7.5-325 mg	$3.65	QL (6 EA per 1 day)
hydrocodone-acetaminophen oral tablet 2.5-325 mg	$3.65	QL (12 EA per 1 day)
hydrocodone-acetaminophen oral tablet 5-325 mg	$3.65	QL (8 EA per 1 day)
hydrocodone-ibuprofen oral tablet	$3.65	QL (5 EA per 1 day)
hydromorphone hcl er oral tablet er 24 hour abuse-deterrent	$3.65	PA; QL (1 EA per 1 day)
hydromorphone hcl oral liquid	$3.65	QL (20 ML per 1 day)
hydromorphone hcl oral tablet 2 mg	$3.65	QL (10 EA per 1 day)
hydromorphone hcl oral tablet 4 mg	$3.65	QL (5 EA per 1 day)
hydromorphone hcl oral tablet 8 mg	$3.65	QL (2 EA per 1 day)
hydromorphone hcl rectal suppository	$3.65	QL (4 EA per 1 day)
KADIAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR 200 MG	$3.65	PA; QL (2 EA per 1 day)
LAZANDA NASAL SOLUTION 100 MCG/ACT, 400 MCG/ACT	$3.65	PA; QL (4 Sprays per 1 day)
LAZANDA NASAL SOLUTION 300 MCG/ACT	$3.65	PA; QL (4 sprays per 1 day)
LIQUICET ORAL SOLUTION	$3.65	QL (90 ML per 1 day)
LORCET HD ORAL TABLET	$3.65	QL (6 EA per 1 day)
LORCET ORAL TABLET	$3.65	QL (8 EA per 1 day)
LORCET PLUS ORAL TABLET 7.5-325 MG	$3.65	QL (6 EA per 1 day)
LORTAB ORAL TABLET 10-325 MG, 7.5-325 MG	$3.65	QL (6 EA per 1 day)
LORTAB ORAL TABLET 5-325 MG	$3.65	QL (8 EA per 1 day)
meperidine hcl oral solution	$3.65	QL (90 ML per 1 day)
meperidine hcl oral tablet 100 mg	$3.65	QL (9 EA per 1 day)
meperidine hcl oral tablet 50 mg	$3.65	QL (18 EA per 1 day)
Methadone HCl Injection Solution	MB/RX	PA; ¥ (PA applies to Pharmacy Benefit only); QL (2 ML per 1 day)
METHADONE HCL INTENSOL ORAL CONCENTRATE	$3.65	PA; QL (2 ML per 1 day)

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Drug	Status	Notes
methadone hcl oral concentrate	Medical Benefit	
methadone hcl oral solution 10 mg/5ml	$3.65	PA; QL (10 ML per 1 day)
methadone hcl oral solution 5 mg/5ml	$3.65	PA; QL (20 ML per 1 day)
methadone hcl oral tablet 10 mg	$3.65	PA; QL (2 EA per 1 day)
methadone hcl oral tablet 5 mg	$3.65	PA; QL (3 EA per 1 day)
methadone hcl oral tablet soluble	Medical Benefit	
METHADOSE ORAL TABLET SOLUBLE	Medical Benefit	
morphine sulfate (concentrate) oral solution 100 mg/5ml	$3.65	QL (4.5 ML per 1 day)
morphine sulfate er beads oral capsule extended release 24 hour	$3.65	PA; QL (1 EA per 1 day)
morphine sulfate er oral capsule extended release 24 hour	$3.65	PA; QL (2 EA per 1 day)
morphine sulfate er oral tablet extended release 100 mg, 200 mg, 60 mg	$3.65	PA; QL (3 EA per 1 day)
morphine sulfate er oral tablet extended release 15 mg, 30 mg	$3.65	QL (3 EA per 1 day)
morphine sulfate oral solution 10 mg/5ml	$3.65	QL (45 ML per 1 day)
morphine sulfate oral solution 20 mg/5ml	$3.65	QL (22.5 ML per 1 day)
morphine sulfate oral tablet 15 mg	$3.65	QL (6 EA per 1 day)
morphine sulfate oral tablet 30 mg	$3.65	QL (3 EA per 1 day)
NUCYNTA ER ORAL TABLET EXTENDED RELEASE 12 HOUR	$3.65	PA; QL (2 EA per 1 day)
NUCYNTA ORAL TABLET 100 MG	$3.65	PA; QL (2 EA per 1 day)
NUCYNTA ORAL TABLET 50 MG	$3.65	PA; QL (4 EA per 1 day)
NUCYNTA ORAL TABLET 75 MG	$3.65	PA; QL (3 EA per 1 day)
OPANA ER ORAL TABLET ER 12 HOUR ABUSE-DETERRENT	$3.65	PA; QL (2 EA per 1 day)
oxycodone hcl er oral tablet er 12 hour abuse-deterrent 10 mg, 15 mg, 20 mg, 30 mg	$3.65	QL (2 EA per 1 day)
oxycodone hcl er oral tablet er 12 hour abuse-deterrent 40 mg, 60 mg, 80 mg	$3.65	PA; QL (2 EA per 1 day)
oxycodone hcl oral capsule	$3.65	QL (12 EA per 1 day)
oxycodone hcl oral concentrate 100 mg/5ml	$3.65	QL (3 ML per 1 day)
oxycodone hcl oral solution	$3.65	QL (60 ML per 1 day)
oxycodone hcl oral tablet 10 mg	$3.65	QL (6 EA per 1 day)

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Drug	Status	Notes
oxycodone hcl oral tablet 15 mg	$3.65	QL (4 EA per 1 day)
oxycodone hcl oral tablet 20 mg	$3.65	QL (3 EA per 1 day)
oxycodone hcl oral tablet 30 mg	$3.65	QL (2 EA per 1 day)
oxycodone hcl oral tablet 5 mg	$3.65	QL (12 EA per 1 day)
oxycodone-acetaminophen oral solution 5-325 mg/5ml	$3.65	QL (60 ML per 1 day)
oxycodone-acetaminophen oral tablet 10-325 mg	$3.65	QL (6 EA per 1 day)
oxycodone-acetaminophen oral tablet 2.5-325 mg, 5-325 mg	$3.65	QL (12 EA per 1 day)
oxycodone-acetaminophen oral tablet 7.5-325 mg	$3.65	QL (8 EA per 1 day)
oxycodone-aspirin oral tablet 4.8355-325 mg	$3.65	QL (12 EA per 1 day)
oxycodone-ibuprofen oral tablet	$3.65	PA; QL (4 EA per 1 day)
OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT 10 MG, 15 MG, 20 MG, 30 MG	$3.65	QL (2 EA per 1 day)
OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT 40 MG, 60 MG, 80 MG	$3.65	PA; QL (2 EA per 1 day)
oxymorphone hcl er oral tablet extended release 12 hour	$3.65	PA; QL (2 EA per 1 day)
oxymorphone hcl oral tablet 10 mg	$3.65	PA; QL (3 EA per 1 day)
oxymorphone hcl oral tablet 5 mg	$3.65	PA; QL (6 EA per 1 day)
PROBUPHINE IMPLANT KIT SUBCUTANEOUS IMPLANT	Medical Benefit	PA
PROLATE ORAL SOLUTION	$3.65	PA; QL (30 ML per 1 day)
ROXICET ORAL TABLET 5-325 MG	$3.65	QL (12 EA per 1 day)
Sublocade Subcutaneous Solution Prefilled Syringe	MB/RX	Preferred product
SUBOXONE SUBLINGUAL FILM	$0	¥ (Max of 32 mg/day for the first 6 months); Preferred product; brand preferred; QL (24 MG per 1 day)
SUBSYS SUBLINGUAL LIQUID	$3.65	PA; QL (4 Sprays per 1 day)
tramadol hcl er (biphasic) oral tablet extended release 24 hour 100 mg, 200 mg, 300 mg	$3.65	PA; QL (1 EA per 1 day)
tramadol hcl er oral tablet extended release 24 hour 100 mg	$3.65	PA; QL (1 EA per 1 day)
tramadol hcl er oral tablet extended release 24 hour 200 mg, 300 mg	$3.65	PA; QL (30 EA per 30 days)

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Drug	Status	Notes
tramadol hcl oral tablet 50 mg	$3.65	QL (240 EA per 30 days)
tramadol-acetaminophen oral tablet	$3.65	QL (240 EA per 30 days)
VERDROCET ORAL TABLET	$3.65	QL (12 EA per 1 day)
ZAMICET ORAL SOLUTION	$3.65	QL (90 ML per 1 day)
ZOHYDRO ER ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT	$3.65	PA; QL (2 EA per 1 day)
ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 0.7-0.18 MG, 1.4-0.36 MG, 2.9-0.71 MG, 5.7-1.4 MG	$0	PA; ¥ (Max of 32 mg/day for the first 6 months); QL (60 EA per 30 days)
ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 11.4-2.9 MG, 8.6-2.1 MG	$0	PA; ¥ (Max of 32 mg/day for the first 6 months); QL (30 EA per 30 days)
ANDROGENS-ANABOLIC		
ANADROL-50 ORAL TABLET	$3.65	PA
ANDRODERM TRANSDERMAL PATCH 24 HOUR	$3.65	PA
AVEED INTRAMUSCULAR SOLUTION	Medical Benefit	PA
danazol oral capsule	$3.65	
JATENZO ORAL CAPSULE 158 MG, 237 MG	$3.65	PA; QL (2 EA per 1 day)
JATENZO ORAL CAPSULE 198 MG	$3.65	PA; QL (4 EA per 1 day)
methitest oral tablet	$3.65	PA
methyltestosterone oral capsule	$3.65	PA
oxandrolone oral tablet	$3.65	PA
STRIANT BUCCAL	$3.65	PA
TESTOPEL IMPLANT PELLET	Medical Benefit	PA
testosterone cypionate intramuscular solution 100 mg/ml, 200 mg/ml	$3.65	
testosterone enanthate injection solution	$3.65	
testosterone enanthate intramuscular solution	$3.65	
testosterone transdermal gel 1.62 %, 20.25 mg/1.25gm (1.62%), 20.25 mg/act (1.62%), 40.5 mg/2.5gm (1.62%)	$3.65	PA
testosterone transdermal gel 10 mg/act (2%), 12.5 mg/act (1%), 25 mg/2.5gm (1%), 50 mg/5gm (1%)	$3.65	
testosterone transdermal solution	$3.65	PA

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Drug	Status	Notes
XYOSTED SUBCUTANEOUS SOLUTION AUTO-INJECTOR	$3.65	PA
ANORECTAL AND RELATED PRODUCTS		
anucort-hc rectal suppository	$3.65	
ANUSOL-HC RECTAL SUPPOSITORY	$3.65	
COLOCORT RECTAL ENEMA	$3.65	
HEMMOREX-HC RECTAL SUPPOSITORY	$3.65	
hydrocortisone acetate rectal suppository	$3.65	
hydrocortisone rectal enema	$3.65	
UCERIS RECTAL FOAM	$3.65	PA
ANTHELMINTICS		
albendazole oral tablet	$3.65	
benznidazole oral tablet	$3.65	
ivermectin oral tablet	$3.65	QL (20 tablets per 90 days)
praziquantel oral tablet	$3.65	
ANTIANGINAL AGENTS		
DILATRATE-SR ORAL CAPSULE EXTENDED RELEASE	$3.65	
ISORDIL TITRADOSE ORAL TABLET 40 MG	$3.65	
isosorbide dinitrate er oral tablet extended release	$3.65	¥ (Can be filled for up to a 90 day supply)
isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	$3.65	¥ (Can be filled for up to a 90 day supply)
isosorbide mononitrate er oral tablet extended release 24 hour	$3.65	¥ (Can be filled for up to a 90 day supply)
isosorbide mononitrate oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
MINITRAN TRANSDERMAL PATCH 24 HOUR	$3.65	¥ (Can be filled for up to a 90 day supply)
NITRO-BID TRANSDERMAL OINTMENT	$3.65	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.3 MG/HR, 0.8 MG/HR	$3.65	
nitroglycerin sublingual tablet sublingual	$3.65	
nitroglycerin transdermal patch 24 hour	$3.65	¥ (Can be filled for up to a 90 day supply)

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nitroglycerin translingual aerosol solution	$3.65	
nitroglycerin translingual solution	$3.65	
ranolazine er oral tablet extended release 12 hour	$3.65	PA; ¥ (Can be filled for up to a 90 day supply)
ANTIANXIETY AGENTS		
alprazolam er oral tablet extended release 24 hour	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); ^ (PA required if used in combination with an opioid for at least 60 days in a 90 day period)
ALPRAZOLAM INTENSOL ORAL CONCENTRATE	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); ^ (PA required if used in combination with an opioid for at least 60 days in a 90 day period)
alprazolam oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); ^ (PA required if used in combination with an opioid for at least 60 days in a 90 day period)
alprazolam oral tablet dispersible	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); ^ (PA required if used in combination with an opioid for at least 60 days in a 90 day period)
alprazolam xr oral tablet extended release 24 hour	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); ^ (PA required if used in combination with an opioid for at least 60 days in a 90 day period)

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buspirone hcl oral tablet 10 mg, 15 mg, 5 mg, 7.5 mg	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
buspirone hcl oral tablet 30 mg	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age)
chlordiazepoxide hcl oral capsule	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); ^ (PA required if used in combination with an opioid for at least 60 days in a 90 day period)
clorazepate dipotassium oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); ^ (PA required if used in combination with an opioid for at least 60 days in a 90 day period)
DIAZEPAM INTENSOL ORAL CONCENTRATE	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); ^ (PA required if used in combination with an opioid for at least 60 days in a 90 day period)
diazepam oral concentrate	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); ^ (PA required if used in combination with an opioid for at least 60 days in a 90 day period)
diazepam oral solution	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); ^ (PA required if used in combination with an opioid for at least 60 days in a 90 day period)

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diazepam oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); ^ (PA required if used in combination with an opioid for at least 60 days in a 90 day period)
hydroxyzine hcl oral syrup	$3.65	
hydroxyzine hcl oral tablet	$3.65	
hydroxyzine pamoate oral capsule	$3.65	
LORAZEPAM INTENSOL ORAL CONCENTRATE	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); ^ (PA required if used in combination with an opioid for at least 60 days in a 90 day period)
lorazepam oral concentrate 2 mg/ml	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); ^ (PA required if used in combination with an opioid for at least 60 days in a 90 day period)
lorazepam oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); ^ (PA required if used in combination with an opioid for at least 60 days in a 90 day period)
oxazepam oral capsule	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); ^ (PA required if used in combination with an opioid for at least 60 days in a 90 day period)
ANTIARRHYTHMICS		
amiodarone hcl oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)

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disopyramide phosphate oral capsule	$3.65	¥ (Can be filled for up to a 90 day supply)
dofetilide oral capsule	$3.65	SP
flecainide acetate oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
mexiletine hcl oral capsule	$3.65	¥ (Can be filled for up to a 90 day supply)
MULTAQ ORAL TABLET	$3.65	
NORPACE CR ORAL CAPSULE EXTENDED RELEASE 12 HOUR	$3.65	
PACERONE ORAL TABLET 100 MG, 200 MG	$3.65	
PACERONE ORAL TABLET 400 MG	$3.65	¥ (Can be filled for up to a 90 day supply)
propafenone hcl er oral capsule extended release 12 hour	$3.65	¥ (Can be filled for up to a 90 day supply)
propafenone hcl oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
quinidine gluconate er oral tablet extended release	$3.65	¥ (Can be filled for up to a 90 day supply)
quinidine sulfate er oral tablet extended release	$3.65	
quinidine sulfate oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
ANTIASTHMATIC AND BRONCHODILATOR AGENTS		
ADVAIR DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED	$3.65	Brand Preferred
ADVAIR HFA INHALATION AEROSOL	$3.65	
AEROSPAN INHALATION AEROSOL SOLUTION	$3.65	
albuterol sulfate er oral tablet extended release 12 hour	$3.65	
albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act	$3.65	PA
albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, (5 mg/ml) 0.5%, 0.63 mg/3ml, 1.25 mg/3ml	$3.65	
albuterol sulfate oral syrup	$3.65	

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Drug	Status	Notes
albuterol sulfate oral tablet	$3.65	
ALVESCO INHALATION AEROSOL SOLUTION	$3.65	PA
ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	$3.65	PA
ARNUITY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	$3.65	PA
ASMANEX (120 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED	$3.65	PA; ¥ (PA for 220 mcg strength applies to members younger than 12 years of age)
ASMANEX (14 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED	$3.65	PA; ¥ (PA for 220 mcg strength applies to members younger than 12 years of age)
ASMANEX (30 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 110 MCG/INH	$3.65	PA; ¥ (PA for 110 mcg strength applies to members 12 years of age and older)
ASMANEX (30 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/INH	$3.65	PA; ¥ (PA for 220 mcg strength applies to members younger than 12 years of age)
ASMANEX (60 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED	$3.65	PA; ¥ (PA for 220 mcg strength applies to members younger than 12 years of age)
ASMANEX (7 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED	$3.65	PA; ¥ (PA for 110 mcg strength applies to members 12 years of age and older)
ASMANEX HFA INHALATION AEROSOL	$3.65	
ATROVENT HFA INHALATION AEROSOL SOLUTION	$3.65	
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	$3.65	PA; QL (1 inhaler per 30 days)
budesonide inhalation suspension	$3.65	PA; ¥ (PA applies to members 13 years of age and older. No PA required for members 12 years of age and under.)
Cinqair Intravenous Solution	MB/RX	PA
COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION	$3.65	
cromolyn sodium inhalation nebulization solution	$3.65	

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DALIRESP ORAL TABLET	$3.65	PA
DULERA INHALATION AEROSOL	$3.65	Brand Preferred
ELIXOPHYLLIN ORAL ELIXIR	$3.65	
epinephrine hcl injection solution 1 mg/ml	$3.65	
FASENRA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	$3.65	PA; SP; QL (1 ML per 56 days)
Fasenra Subcutaneous Solution Prefilled Syringe	MB/RX	PA; SP
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED	$3.65	
FLOVENT HFA INHALATION AEROSOL	$3.65	Brand Preferred
fluticasone-salmeterol inhalation aerosol powder breath activated 113-14 mcg/act, 232-14 mcg/act, 55-14 mcg/act	$3.65	PA; QL (1 EA per 30 days)
formoterol fumarate inhalation nebulization solution	$3.65	
INCRUSE ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	$3.65	
ipratropium bromide inhalation solution	$3.65	
ipratropium-albuterol inhalation solution	$3.65	
levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml, 0.63 mg/3ml, 1.25 mg/0.5ml, 1.25 mg/3ml	$3.65	PA
LONHALA MAGNAIR REFILL KIT INHALATION SOLUTION	$3.65	PA; QL (60 ML per 30 days)
LONHALA MAGNAIR STARTER KIT INHALATION SOLUTION	$3.65	PA; QL (60 ML per 30 days)
LUFYLLIN ORAL TABLET 400 MG	$3.65	PA
metaproterenol sulfate oral syrup	$3.65	
metaproterenol sulfate oral tablet	$3.65	
montelukast sodium oral packet	$3.65	STPA; ¥ (Covered for members 6 through 23 months of age. Can be filled for up to a 90 day supply.)
montelukast sodium oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
montelukast sodium oral tablet chewable	$3.65	¥ (Can be filled for up to a 90 day supply)

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NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	$3.65	PA; SP; QL (3 ML per 28 days)
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	$3.65	PA; SP; QL (3 ML per 28 days)
NUCALA SUBCUTANEOUS SOLUTION RECONSTITUTED	Medical Benefit	PA
PROAIR DIGIHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	$3.65	PA
PROAIR HFA INHALATION AEROSOL SOLUTION	$3.65	Brand Preferred
PROAIR RESPICLICK INHALATION AEROSOL POWDER BREATH ACTIVATED	$3.65	
PULMICORT FLEXHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	$3.65	
QVAR REDIHALER INHALATION AEROSOL BREATH ACTIVATED	$3.65	PA
SEEBRI NEOHALER INHALATION CAPSULE	$3.65	
SPIRIVA HANDIHALER INHALATION CAPSULE	$3.65	
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 1.25 MCG/ACT, 2.5 MCG/ACT	$3.65	
STRIVERDI RESPIMAT INHALATION AEROSOL SOLUTION	$3.65	
SYMBICORT INHALATION AEROSOL	$3.65	Brand Preferred
terbutaline sulfate oral tablet	$3.65	
THEO-24 ORAL CAPSULE EXTENDED RELEASE 24 HOUR 300 MG, 400 MG	$3.65	
THEOCHRON ORAL TABLET EXTENDED RELEASE 12 HOUR 100 MG, 200 MG, 300 MG	$3.65	¥ (Can be filled for up to a 90 day supply)
theophylline er oral tablet extended release 12 hour	$3.65	¥ (Can be filled for up to a 90 day supply)
theophylline er oral tablet extended release 24 hour	$3.65	¥ (Can be filled for up to a 90 day supply)

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Drug	Status	Notes
theophylline oral solution	$3.65	¥ (Can be filled for up to a 90 day supply)
TUDORZA PRESSAIR INHALATION AEROSOL POWDER BREATH ACTIVATED 400 MCG/ACT	$3.65	
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	$3.65	PA; SP; ¥ (Covered under the Prescription Drug Benefit when self-administered); QL (8 ML per 28 days)
Xolair Subcutaneous Solution Reconstituted	MB/RX	PA; SP; QL (6 vials per 28 days)
XOPENEX HFA INHALATION AEROSOL	$3.65	Brand Preferred
YUPELRI INHALATION SOLUTION	$3.65	PA; QL (90 ML per 30 days)
zafirlukast oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
ANTICOAGULANTS		
ELIQUIS DVT/PE STARTER PACK ORAL TABLET	$3.65	QL (1 Pack per 1 Lifetime)
ELIQUIS ORAL TABLET	$3.65	QL (60 EA per 30 days)
enoxaparin sodium injection solution	$3.65	
enoxaparin sodium subcutaneous solution	$3.65	
fondaparinux sodium subcutaneous solution	$3.65	
FRAGMIN SUBCUTANEOUS SOLUTION 10000 UNIT/ML, 12500 UNIT/0.5ML, 15000 UNIT/0.6ML, 18000 UNT/0.72ML, 2500 UNIT/0.2ML, 5000 UNIT/0.2ML, 7500 UNIT/0.3ML	$3.65	
heparin (porcine) in nacl intravenous solution 5000-0.9 ut/500ml-%	$3.65	
heparin sodium (porcine) injection solution 10000 unit/ml, 20000 unit/ml, 2500 unit/ml, 5000 unit/ml	$3.65	
IPRIVASK SUBCUTANEOUS SOLUTION RECONSTITUTED	$3.65	QL (24 vials per 12 days)
JANTOVEN ORAL TABLET	$3.65	
PRADAXA ORAL CAPSULE	$3.65	Brand Preferred; QL (60 EA per 30 days)
SAVAYSA ORAL TABLET	$3.65	PA; QL (30 EA per 30 days)
warfarin sodium oral tablet	$3.65	

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XARELTO ORAL TABLET 10 MG, 15 MG, 20 MG	$3.65	QL (30 EA per 30 days)
XARELTO ORAL TABLET 2.5 MG	$3.65	PA; QL (60 EA per 30 days)
XARELTO STARTER PACK ORAL TABLET THERAPY PACK	$3.65	¥ (1 Fill per life of plan); QL (51 EA per 21 days)
ANTICONVULSANTS		
APTIOM ORAL TABLET	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age)
BANZEL ORAL SUSPENSION	$3.65	PA; ¥ (Additional PBHMI polypharmacy PA requirements for members less than 18 years of age)
BRIVIACT ORAL SOLUTION	$3.65	PA; ¥ (Additional PBHMI polypharmacy PA requirements for members less than 18 years of age)
BRIVIACT ORAL TABLET	$3.65	PA; ¥ (Additional PBHMI polypharmacy PA requirements for members less than 18 years of age)
carbamazepine er oral capsule extended release 12 hour	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
carbamazepine er oral tablet extended release 12 hour	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
carbamazepine oral suspension	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
carbamazepine oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
carbamazepine oral tablet chewable	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)

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CELONTIN ORAL CAPSULE	$3.65	PA; ¥ (PA for PBHMI polypharmacy for members less than 18 years of age)
clobazam oral suspension	$3.65	PA; ¥ (Additional PBHMI polypharmacy PA requirements for members less than 18 years of age)
clobazam oral tablet	$3.65	PA; ¥ (Additional PBHMI polypharmacy PA requirements for members less than 18 years of age)
clonazepam oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); ^ (PA required if used in combination with an opioid for at least 60 days in a 90 day period)
DIACOMIT ORAL CAPSULE	$3.65	PA; ¥ (Additional PBHMI polypharmacy PA requirements for members less than 18 years of age)
DIACOMIT ORAL PACKET	$3.65	PA; ¥ (Additional PBHMI polypharmacy PA requirements for members less than 18 years of age)
diazepam rectal gel	$3.65	QL (1 System per 1 Rx)
DILANTIN ORAL CAPSULE 30 MG	$3.65	PA; ¥ (PA for PBHMI polypharmacy for members less than 18 years of age)
divalproex sodium er oral tablet extended release 24 hour	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
divalproex sodium oral capsule delayed release sprinkle	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
divalproex sodium oral tablet delayed release	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
ELEPSIA XR ORAL TABLET EXTENDED RELEASE 24 HOUR	$3.65	PA; ¥ (Additional PBHMI polypharmacy PA requirements for members less than 18 years of age)

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EPIDIOLEX ORAL SOLUTION	$3.65	PA; ¥ (Additional PBHMI polypharmacy PA requirements for members less than 18 years of age)
EPITOL ORAL TABLET	$3.65	PA; ¥ (PA applies to members 6 years and under)
ethosuximide oral capsule	$3.65	PA; ¥ (PA for PBHMI polypharmacy for members less than 18 years of age)
ethosuximide oral solution	$3.65	PA; ¥ (PA for PBHMI polypharmacy for members less than 18 years of age)
felbamate oral suspension	$3.65	PA; ¥ (Additional PBHMI polypharmacy PA requirements for members less than 18 years of age)
felbamate oral tablet	$3.65	PA; ¥ (Additional PBHMI polypharmacy PA requirements for members less than 18 years of age)
FINTEPLA ORAL SOLUTION	$3.65	PA
FYCOMPA ORAL SUSPENSION	$3.65	PA; ¥ (Additional PBHMI polypharmacy PA requirements for members less than 18 years of age)
FYCOMPA ORAL TABLET	$3.65	PA; ¥ (Additional PBHMI polypharmacy PA requirements for members less than 18 years of age)
gabapentin oral capsule	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
gabapentin oral solution 250 mg/5ml	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
gabapentin oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
lamotrigine er oral tablet extended release 24 hour	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age)

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lamotrigine odt oral tablet dispersible	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
lamotrigine oral kit 21 x 25 mg & 7 x 50 mg, 25 & 50 & 100 mg, 42 x 50 mg & 14x100 mg	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
lamotrigine oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
lamotrigine oral tablet chewable	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
lamotrigine oral tablet dispersible	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
lamotrigine starter kit-blue oral kit	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
lamotrigine starter kit-green oral kit	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
lamotrigine starter kit-orange oral kit	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
lamotrigine titration oral kit	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
levetiracetam er oral tablet extended release 24 hour	$3.65	PA; ¥ (Additional PBHMI polypharmacy PA requirements for members less than 18 years of age)

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Drug	Status	Notes
levetiracetam oral solution	$3.65	PA; ¥ (PA for PBHMI polypharmacy for members less than 18 years of age)
levetiracetam oral tablet	$3.65	PA; ¥ (PA for PBHMI polypharmacy for members less than 18 years of age)
NAYZILAM NASAL SOLUTION	$3.65	PA; ¥ (PA applies to membes 0-11 years of age. No PA required for members 12 years of age and older.)
oxcarbazepine oral suspension	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
oxcarbazepine oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HOUR	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age)
PEGANONE ORAL TABLET	$3.65	PA; ¥ (Additional PBHMI polypharmacy PA requirements for members less than 18 years of age)
PHENYTOIN INFATABS ORAL TABLET CHEWABLE	$3.65	PA; ¥ (PA for PBHMI polypharmacy for members less than 18 years of age)
phenytoin oral suspension 125 mg/5ml	$3.65	PA; ¥ (PA for PBHMI polypharmacy for members less than 18 years of age)
phenytoin oral tablet chewable	$3.65	PA; ¥ (PA for PBHMI polypharmacy for members less than 18 years of age)
phenytoin sodium extended oral capsule	$3.65	PA; ¥ (PA for PBHMI polypharmacy for members less than 18 years of age)

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pregabalin oral capsule	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (3 capsules per 1 day)
pregabalin oral solution	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (900 ML per 30 days)
primidone oral tablet	$3.65	PA; ¥ (PA for PBHMI polypharmacy for members less than 18 years of age)
rufinamide oral tablet	$3.65	PA; ¥ (Additional PBHMI polypharmacy PA requirements for members less than 18 years of age)
SABRIL ORAL PACKET	$3.65	PA; SP; ¥ (Additional PBHMI polypharmacy PA requirements for members less than 18 years of age); Brand Preferred
SABRIL ORAL TABLET	$3.65	PA; SP; ¥ (Additional PBHMI polypharmacy PA requirements for members less than 18 years of age); Brand Preferred
SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age)
SYMPAZAN ORAL FILM	$3.65	PA; ¥ (Additional PBHMI polypharmacy PA requirements for members less than 18 years of age)
tiagabine hcl oral tablet	$3.65	PA; ¥ (PA for PBHMI polypharmacy for members less than 18 years of age)
topiramate er oral capsule er 24 hour sprinkle	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age)

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topiramate oral capsule sprinkle	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
topiramate oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
TROKENDI XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age)
valproic acid oral capsule	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
valproic acid oral solution	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
valproic acid oral syrup	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
VALTOCO 10 MG DOSE NASAL LIQUID	$3.65	PA; ¥ (PA applies to membes 0-5 years of age. No PA required for members 6 years of age and older.); QL (1 box per 1 fill)
VALTOCO 15 MG DOSE NASAL LIQUID THERAPY PACK	$3.65	PA; ¥ (PA applies to membes 0-5 years of age. No PA required for members 6 years of age and older.); QL (1 box per 1 fill)
VALTOCO 20 MG DOSE NASAL LIQUID THERAPY PACK	$3.65	PA; ¥ (PA applies to membes 0-5 years of age. No PA required for members 6 years of age and older.); QL (1 box per 1 fill)
VALTOCO 5 MG DOSE NASAL LIQUID	$3.65	PA; ¥ (PA applies to membes 0-5 years of age. No PA required for members 6 years of age and older.); QL (1 box per 1 fill)

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VIMPAT ORAL SOLUTION	$3.65	PA; ¥ (Additional PBHMI polypharmacy PA requirements for members less than 18 years of age)
VIMPAT ORAL TABLET	$3.65	PA; ¥ (Additional PBHMI polypharmacy PA requirements for members less than 18 years of age)
XCOPRI (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK	$3.65	PA; ¥ (Additional PBHMI polypharmacy PA requirements for members less than 18 years of age)
XCOPRI (350 MG DAILY DOSE) ORAL TABLET THERAPY PACK	$3.65	PA; ¥ (Additional PBHMI polypharmacy PA requirements for members less than 18 years of age)
XCOPRI ORAL TABLET	$3.65	PA; ¥ (Additional PBHMI polypharmacy PA requirements for members less than 18 years of age)
XCOPRI ORAL TABLET THERAPY PACK	$3.65	PA; ¥ (Additional PBHMI polypharmacy PA requirements for members less than 18 years of age)
zonisamide oral capsule	$3.65	PA; ¥ (PA for PBHMI polypharmacy for members less than 18 years of age)
ANTIDEPRESSANTS		
amitriptyline hcl oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
amoxapine oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
bupropion hcl er (sr) oral tablet extended release 12 hour	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)

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bupropion hcl oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
citalopram hydrobromide oral solution	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
citalopram hydrobromide oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
clomipramine hcl oral capsule	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
desipramine hcl oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
desvenlafaxine er oral tablet extended release 24 hour	$3.65	PA; STPA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age)
desvenlafaxine fumarate er oral tablet extended release 24 hour	$3.65	PA; STPA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age)
desvenlafaxine succinate er oral tablet extended release 24 hour 100 mg, 50 mg	$3.65	PA; STPA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age)
doxepin hcl oral capsule	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)

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doxepin hcl oral concentrate	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
EMSAM TRANSDERMAL PATCH 24 HOUR	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (30 EA per 30 days)
escitalopram oxalate oral solution	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
escitalopram oxalate oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
FETZIMA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (30 EA per 30 days)
FETZIMA TITRATION ORAL CAPSULE ER 24 HOUR THERAPY PACK	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (28 EA per 28 days)
fluoxetine hcl oral capsule	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
fluoxetine hcl oral solution	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)

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fluoxetine hcl oral tablet 10 mg, 20 mg	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age)
fluvoxamine maleate er oral capsule extended release 24 hour	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age)
fluvoxamine maleate oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
imipramine hcl oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
imipramine pamoate oral capsule	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age)
maprotiline hcl oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
mirtazapine oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
mirtazapine oral tablet dispersible	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
nefazodone hcl oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
nortriptyline hcl oral capsule	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)

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Drug	Status	Notes
nortriptyline hcl oral solution	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
OLEPTRO ORAL TABLET EXTENDED RELEASE 24 HOUR	$3.65	STPA
paroxetine hcl er oral tablet extended release 24 hour	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age)
paroxetine hcl oral suspension	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age)
paroxetine hcl oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
phenelzine sulfate oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
protriptyline hcl oral tablet	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age)
sertraline hcl oral concentrate	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
sertraline hcl oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
SPRAVATO (56 MG DOSE) NASAL SOLUTION THERAPY PACK	Medical Benefit	PA
SPRAVATO (84 MG DOSE) NASAL SOLUTION THERAPY PACK	Medical Benefit	PA

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tranylcypromine sulfate oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
trazodone hcl oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
trimipramine maleate oral capsule	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age)
TRINTELLIX ORAL TABLET	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (30 EA per 30 days)
venlafaxine hcl er oral capsule extended release 24 hour	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
venlafaxine hcl er oral tablet extended release 24 hour	$3.65	PA; STPA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age)
venlafaxine hcl oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
VIIBRYD ORAL TABLET	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (30 EA per 30 days)
VIIBRYD STARTER PACK ORAL KIT	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age)
ZULRESSO INTRAVENOUS SOLUTION	Medical Benefit	PA

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ANTIDIABETICS		
acarbose oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
ACTOPLUS MET XR ORAL TABLET EXTENDED RELEASE 24 HOUR	$3.65	
ADMELOG SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	$3.65	PA
ADMELOG SUBCUTANEOUS SOLUTION	$3.65	PA
alogliptin benzoate oral tablet	$1	PA; ¥ (Can be filled for up to a 90 day supply); QL (1 EA per 1 day)
alogliptin-metformin hcl oral tablet	$1	PA; ¥ (Can be filled for up to a 90 day supply); QL (2 EA per 1 day)
alogliptin-pioglitazone oral tablet	$1	PA; ¥ (Can be filled for up to a 90 day supply); QL (1 EA per 1 day)
APIDRA INJECTION SOLUTION	$3.65	PA
APIDRA SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	$3.65	PA
APPFORMIN-D ORAL	$1	
AVANDAMET ORAL TABLET	$1	
AVANDARYL ORAL TABLET	$1	
AVANDIA ORAL TABLET	$3.65	
BAQSIMI ONE PACK NASAL POWDER	$3.65	Preferred product
BAQSIMI TWO PACK NASAL POWDER	$3.65	Preferred product
BASAGLAR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	$3.65	PA
BYDUREON BCISE SUBCUTANEOUS AUTO-INJECTOR	$3.65	PA; QL (4 pens per 30 days)
BYDUREON SUBCUTANEOUS PEN-INJECTOR	$3.65	QL (4 pens per 28 days)
BYETTA 10 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	$3.65	Brand Preferred; QL (1 pen per 30 days)
BYETTA 5 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	$3.65	Brand Preferred; QL (1 pen per 30 days)
chlorpropamide oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
DIABETA ORAL TABLET	$1	¥ (Can be filled for up to a 90 day supply)

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diazoxide oral suspension	$1	
FARXIGA ORAL TABLET	$3.65	QL (1 EA per 1 day)
FIASP FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR	$3.65	PA
FIASP PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE	$3.65	PA
FIASP SUBCUTANEOUS SOLUTION	$3.65	PA
glimepiride oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
glipizide er oral tablet extended release 24 hour	$1	¥ (Can be filled for up to a 90 day supply)
glipizide oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
glipizide xl oral tablet extended release 24 hour	$1	
glipizide-metformin hcl oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
GLUCAGEN HYPOKIT INJECTION SOLUTION RECONSTITUTED	$3.65	
glucagon emergency injection kit	$3.65	
glyburide micronized oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
glyburide oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
glyburide-metformin oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
glycron oral tablet 1.5 mg, 3 mg	$1	¥ (Can be filled for up to a 90 day supply)
glycron oral tablet 6 mg	$1	
GLYXAMBI ORAL TABLET	$3.65	PA; QL (1 EA per 1 day)
GVOKE PFS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	$3.65	PA
HUMALOG JUNIOR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	$3.65	Brand Preferred
HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION	$3.65	Brand Preferred

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HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML, 200 UNIT/ML	$3.65	Brand Preferred
HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	$3.65	Brand Preferred
HUMALOG MIX 50/50 SUBCUTANEOUS SUSPENSION	$3.65	Brand Preferred
HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION	$3.65	Brand Preferred
HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	$3.65	Brand Preferred
HUMALOG MIX 75/25 PEN SUBCUTANEOUS SUSPENSION	$3.65	Brand Preferred
HUMALOG MIX 75/25 PEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	$3.65	Brand Preferred
HUMALOG MIX 75/25 SUBCUTANEOUS SUSPENSION	$3.65	Brand Preferred
HUMALOG PEN SUBCUTANEOUS SOLUTION	$3.65	Brand Preferred
HUMALOG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	$3.65	Brand Preferred
HUMALOG SUBCUTANEOUS SOLUTION	$3.65	Brand Preferred
HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE	$3.65	Brand Preferred
HUMULIN 70/30 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	$3.65	
HUMULIN 70/30 SUBCUTANEOUS SUSPENSION	$3.65	
HUMULIN N KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	$3.65	
HUMULIN N SUBCUTANEOUS SUSPENSION	$3.65	
HUMULIN R INJECTION SOLUTION	$3.65	
HUMULIN R U-500 (CONCENTRATED) SUBCUTANEOUS SOLUTION	$3.65	

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HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	$3.65	
INVOKAMET ORAL TABLET	$3.65	QL (2 EA per 1 day)
INVOKAMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR	$3.65	QL (2 EA per 1 day)
INVOKANA ORAL TABLET 100 MG	$3.65	QL (2 EA per 1 day)
INVOKANA ORAL TABLET 300 MG	$3.65	QL (1 EA per 1 day)
JANUMET ORAL TABLET	$3.65	QL (2 EA per 1 day)
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 100-1000 MG	$3.65	QL (1 EA per 1 day)
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 50-1000 MG, 50-500 MG	$3.65	QL (2 EA per 1 day)
JANUVIA ORAL TABLET	$3.65	
JARDIANCE ORAL TABLET	$3.65	QL (1 EA per 1 day)
JENTADUETO ORAL TABLET	$3.65	QL (2 tablets per 1 day)
JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG	$3.65	QL (2 tablets per 1 day)
JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 5-1000 MG	$3.65	QL (1 tablet per 1 day)
KOMBIGLYZE XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG	$3.65	QL (2 EA per 1 day)
KOMBIGLYZE XR ORAL TABLET EXTENDED RELEASE 24 HOUR 5-1000 MG, 5-500 MG	$3.65	QL (1 EA per 1 day)
KORLYM ORAL TABLET	$3.65	PA
LANTUS SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	$3.65	
LANTUS SUBCUTANEOUS SOLUTION	$3.65	
metformin hcl er (mod) oral tablet extended release 24 hour	$1	PA; ¥ (Can be filled for up to a 90 day supply)
metformin hcl er (osm) oral tablet extended release 24 hour 1000 mg, 500 mg	$1	PA; ¥ (Can be filled for up to a 90 day supply)
metformin hcl er oral tablet extended release 24 hour	$1	¥ (Can be filled for up to a 90 day supply)

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metformin hcl oral solution	$1	PA; ¥ (PA applies to members 13 years of age and older. No PA required for members 12 years of age and under.)
metformin hcl oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
miglitol oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
nateglinide oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
NOVOLIN 70/30 RELION SUBCUTANEOUS SUSPENSION	$3.65	
NOVOLIN 70/30 SUBCUTANEOUS SUSPENSION	$3.65	
NOVOLIN N RELION SUBCUTANEOUS SUSPENSION	$3.65	
NOVOLIN N SUBCUTANEOUS SUSPENSION	$3.65	
NOVOLIN R INJECTION SOLUTION	$3.65	
NOVOLIN R RELION INJECTION SOLUTION	$3.65	
NOVOLOG FLEXPEN SUBCUTANEOUS SOLUTION	$3.65	Brand Preferred
NOVOLOG FLEXPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	$3.65	Brand Preferred
NOVOLOG MIX 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION	$3.65	Brand Preferred
NOVOLOG MIX 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	$3.65	Brand Preferred
NOVOLOG MIX 70/30 SUBCUTANEOUS SUSPENSION	$3.65	Brand Preferred
NOVOLOG PENFILL SUBCUTANEOUS SOLUTION	$3.65	Brand Preferred
NOVOLOG PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE	$3.65	Brand Preferred
NOVOLOG SUBCUTANEOUS SOLUTION	$3.65	Brand Preferred
ONGLYZA ORAL TABLET	$3.65	

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OZEMPIC (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR	$3.65	PA; QL (1 Pen per 28 days)
OZEMPIC (1 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/1.5ML	$3.65	PA; QL (2 Pens per 28 days)
OZEMPIC (1 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 4 MG/3ML	$3.65	PA; QL (1 Pen per 28 days)
pioglitazone hcl oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
pioglitazone hcl-glimepiride oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
pioglitazone hcl-metformin hcl oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
repaglinide oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
repaglinide-metformin hcl oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
RIOMET ER ORAL SUSPENSION RECONSTITUTED ER	$3.65	PA
RYBELSUS ORAL TABLET	$3.65	PA; QL (1 EA per 1 day)
SEGLUROMET ORAL TABLET	$3.65	PA; QL (2 EA per 1 day)
SEMGLEE SUBCUTANEOUS SOLUTION	$3.65	PA
SEMGLEE SUBCUTANEOUS SOLUTION PEN-INJECTOR	$3.65	PA
SOLIQUA SUBCUTANEOUS SOLUTION PEN-INJECTOR	$3.65	PA; QL (6 pens per 30 days)
STEGLATRO ORAL TABLET	$3.65	PA; QL (1 EA per 1 day)
SYMLINPEN 120 SUBCUTANEOUS SOLUTION PEN-INJECTOR	$3.65	
SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR	$3.65	
SYNJARDY ORAL TABLET	$3.65	QL (2 EA per 1 day)
SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 25-1000 MG	$3.65	QL (1 EA per 1 day)
SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 12.5-1000 MG, 5-1000 MG	$3.65	QL (2 EA per 1 day)

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Drug	Status	Notes
tolazamide oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
tolbutamide oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
TRADJENTA ORAL TABLET	$3.65	
TRESIBA FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR	$3.65	
TRESIBA SUBCUTANEOUS SOLUTION	$3.65	
TRULICITY SUBCUTANEOUS SOLUTION PEN-INJECTOR	$3.65	Preferred product; QL (4 Pens per 28 days)
VICTOZA SUBCUTANEOUS SOLUTION PEN-INJECTOR	$3.65	QL (3 pens per 28 days)
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 10-500 MG	$3.65	QL (1 EA per 1 day)
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG, 5-1000 MG, 5-500 MG	$3.65	QL (2 EA per 1 day)
XULTOPHY SUBCUTANEOUS SOLUTION PEN-INJECTOR	$3.65	PA; QL (5 pens per 30 days)
ANTIDIARRHEAL/PROBIOTIC AGENTS		
diphenoxylate-atropine oral liquid	$3.65	
diphenoxylate-atropine oral tablet 2.5-0.025 mg	$3.65	
loperamide hcl oral capsule	$3.65	
opium oral tincture	$3.65	
paregoric oral tincture	$3.65	
ANTIDOTES AND SPECIFIC ANTAGONISTS		
CHEMET ORAL CAPSULE	$3.65	
deferasirox granules oral packet	$3.65	SP
deferasirox oral tablet	$3.65	SP
deferasirox oral tablet soluble	$3.65	SP
FERRIPROX ORAL SOLUTION	$3.65	PA
FERRIPROX ORAL TABLET	$3.65	PA
FERRIPROX TWICE-A-DAY ORAL TABLET	$3.65	PA
naloxone hcl injection solution 0.4 mg/ml	$0	
naloxone hcl injection solution prefilled syringe	$0	

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naltrexone hcl oral tablet	$0	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
NARCAN NASAL LIQUID	$0	QL (1 Units per 1 Rx)
VISTOGARD ORAL PACKET	$3.65	
VIVITROL INTRAMUSCULAR SUSPENSION RECONSTITUTED	$0	
ANTIEMETICS		
AKYNZEO ORAL CAPSULE	$3.65	QL (1 EA per 1 Fill)
Aloxi Intravenous Solution 0.25 MG/5ML	MB/RX	QL (20 ML per 1 Rx)
ANZEMET ORAL TABLET 100 MG	$3.65	QL (10 EA per 1 fill)
ANZEMET ORAL TABLET 50 MG	$3.65	QL (5 EA per 1 fill)
aprepitant oral	$3.65	QL (6 EA per 1 Rx)
aprepitant oral capsule	$3.65	QL (6 EA per 1 Rx)
BONJESTA ORAL TABLET EXTENDED RELEASE	$3.65	PA
CESAMET ORAL CAPSULE	$3.65	PA
Cinvanti Intravenous Emulsion	MB/RX	QL (18 ML per 1 Fill)
dimenhydrinate oral tablet	$3.65	
doxylamine-pyridoxine oral tablet delayed release	$3.65	PA
dronabinol oral capsule	$3.65	
Emend Intravenous Solution Reconstituted 150 MG	MB/RX	QL (2 vials per 1 Rx)
EMEND ORAL SUSPENSION RECONSTITUTED	$3.65	QL (3 Units per 7 days)
granisetron hcl oral tablet	$3.65	QL (14 EA per 1 Fill)
meclizine hcl oral tablet 12.5 mg, 25 mg	$3.65	
ondansetron hcl injection solution 4 mg/2ml, 40 mg/20ml	$3.65	
ondansetron hcl oral solution	$3.65	QL (105 ML per 1 Fill)
ondansetron hcl oral tablet	$3.65	QL (21 EA per 1 Fill)
ondansetron oral tablet dispersible	$3.65	QL (21 EA per 1 Fill)
SANCUSO TRANSDERMAL PATCH	$3.65	PA; QL (4 EA per 28 days)
scopolamine transdermal patch 72 hour	$3.65	

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SUSTOL SUBCUTANEOUS PREFILLED SYRINGE	Medical Benefit	
SYNDROS ORAL SOLUTION	$3.65	PA
trimethobenzamide hcl oral capsule	$3.65	
Varubi Intravenous Emulsion	MB/RX	
VARUBI ORAL TABLET	$3.65	¥ (Max of 6 tablets per 30 days); QL (2 Tablets per 1 Fill)
ANTIFUNGALS		
CRESEMBA ORAL CAPSULE	$3.65	
fluconazole oral suspension reconstituted	$3.65	
fluconazole oral tablet	$3.65	
flucytosine oral capsule	$3.65	PA
griseofulvin microsize oral suspension	$3.65	
griseofulvin microsize oral tablet	$3.65	
griseofulvin ultramicrosize oral tablet	$3.65	
itraconazole oral capsule	$3.65	
itraconazole oral solution	$3.65	
ketoconazole oral tablet	$3.65	
LAMISIL ORAL PACKET	$3.65	PA; ¥ (Max of 6 weeks); QL (2 Packets per 1 day)
NOXAFIL ORAL SUSPENSION	$3.65	PA
NOXAFIL ORAL TABLET DELAYED RELEASE	$3.65	PA
nystatin oral powder	$3.65	
nystatin oral tablet	$3.65	
terbinafine hcl oral tablet	$3.65	
voriconazole oral suspension reconstituted	$3.65	PA
voriconazole oral tablet	$3.65	PA
ANTIHISTAMINES		
cetirizine hcl oral solution 1 mg/ml	$3.65	
cetirizine hcl oral syrup 1 mg/ml	$3.65	
CLARINEX ORAL SYRUP	$3.65	PA
clemastine fumarate oral tablet 2.68 mg	$3.65	
cyproheptadine hcl oral syrup	$3.65	
cyproheptadine hcl oral tablet	$3.65	

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desloratadine oral tablet	$3.65	PA
diphenhydramine hcl oral capsule	$3.65	
diphenhydramine hcl oral elixir	$3.65	
levocetirizine dihydrochloride oral solution	$3.65	PA
levocetirizine dihydrochloride oral tablet	$3.65	PA
PHENADOZ RECTAL SUPPOSITORY	$3.65	
PHENERGAN RECTAL SUPPOSITORY	$3.65	
promethazine hcl oral solution	$3.65	
promethazine hcl oral syrup	$3.65	
promethazine hcl oral tablet	$3.65	
promethazine hcl rectal suppository	$3.65	
PROMETHEGAN RECTAL SUPPOSITORY	$3.65	
ANTIHYPERLIPIDEMICS		
ADVICOR ORAL TABLET EXTENDED RELEASE 24 HOUR	$1	
ANTARA ORAL CAPSULE 30 MG, 90 MG	$3.65	PA
atorvastatin calcium oral tablet	$0	¥ (Can be filled for up to a 90 day supply)
cholestyramine light oral packet	$1	¥ (Can be filled for up to a 90 day supply)
cholestyramine light oral powder	$1	¥ (Can be filled for up to a 90 day supply)
cholestyramine oral packet	$1	¥ (Can be filled for up to a 90 day supply)
cholestyramine oral powder	$1	¥ (Can be filled for up to a 90 day supply)
colesevelam hcl oral tablet	$1	PA; ¥ (Can be filled for up to a 90 day supply)
colestipol hcl oral packet	$1	¥ (Can be filled for up to a 90 day supply)
colestipol hcl oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
EVKEEZA INTRAVENOUS SOLUTION	Medical Benefit	PA
EZALLOR SPRINKLE ORAL CAPSULE SPRINKLE	$3.65	PA; QL (30 EA per 30 days)
ezetimibe oral tablet	$1	¥ (Can be filled for up to a 90 day supply)

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ezetimibe-simvastatin oral tablet	$0	PA; ¥ (Can be filled for up to a 90 day supply); QL (1 EA per 1 day)
fenofibrate micronized oral capsule 130 mg, 43 mg	$1	PA; ¥ (Can be filled for up to a 90 day supply)
fenofibrate micronized oral capsule 134 mg, 200 mg, 67 mg	$1	¥ (Can be filled for up to a 90 day supply)
fenofibrate oral capsule 150 mg, 50 mg	$1	PA; ¥ (Can be filled for up to a 90 day supply)
fenofibrate oral tablet 120 mg, 40 mg	$1	PA; ¥ (Can be filled for up to a 90 day supply)
fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg	$1	¥ (Can be filled for up to a 90 day supply)
fenofibric acid oral capsule delayed release	$1	PA; ¥ (Can be filled for up to a 90 day supply)
fenofibric acid oral tablet	$1	PA; ¥ (Can be filled for up to a 90 day supply)
flolipid oral suspension	$0	PA
fluvastatin sodium er oral tablet extended release 24 hour	$0	PA; ¥ (Can be filled for up to a 90 day supply); QL (1 EA per 1 day)
fluvastatin sodium oral capsule	$0	PA; ¥ (Can be filled for up to a 90 day supply); QL (1 EA per 1 day)
gemfibrozil oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
JUXTAPID ORAL CAPSULE	$3.65	PA; QL (30 EA per 30 days)
KYNAMRO SUBCUTANEOUS SOLUTION	$3.65	SP; QL (4 EA per 28 days)
KYNAMRO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	$3.65	SP; QL (4 EA per 28 days)
LIVALO ORAL TABLET	$0	PA; QL (30 EA per 30 days)
lovastatin oral tablet	$0	¥ (Can be filled for up to a 90 day supply)
micronized colestipol hcl oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
NEXLETOL ORAL TABLET	$3.65	PA
NEXLIZET ORAL TABLET	$3.65	PA
niacin er (antihyperlipidemic) oral tablet extended release	$1	¥ (Can be filled for up to a 90 day supply)
NIACOR ORAL TABLET	$1	¥ (Can be filled for up to a 90 day supply)

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pravastatin sodium oral tablet	$0	¥ (Can be filled for up to a 90 day supply)
REPATHA PUSHTRONEX SYSTEM SUBCUTANEOUS SOLUTION CARTRIDGE	$3.65	PA; Preferred in class; QL (3.5 ML per 28 days)
REPATHA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	$3.65	PA; Preferred in class; QL (2 ML per 28 days)
REPATHA SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	$3.65	PA; Preferred in class; QL (2 ML per 28 days)
rosuvastatin calcium oral tablet	$0	¥ (Can be filled for up to a 90 day supply); QL (1 EA per 1 day)
SIMCOR ORAL TABLET EXTENDED RELEASE 24 HOUR	$1	
simvastatin oral tablet	$0	¥ (Can be filled for up to a 90 day supply)
VASCEPA ORAL CAPSULE	$3.65	PA
ZYPITAMAG ORAL TABLET	$3.65	PA
ANTIHYPERTENSIVES		
aliskiren fumarate oral tablet	$3.65	PA; ¥ (Can be filled for up to a 90 day supply); QL (1 EA per 1 day)
amlodipine besy-benazepril hcl oral capsule	$1	¥ (Can be filled for up to a 90 day supply)
amlodipine besylate-valsartan oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
amlodipine-olmesartan oral tablet	$1	STPA; ¥ (Can be filled for up to a 90 day supply)
amlodipine-valsartan-hctz oral tablet	$1	PA; ¥ (Can be filled for up to a 90 day supply)
atenolol-chlorthalidone oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
benazepril hcl oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
benazepril-hydrochlorothiazide oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
bisoprolol-hydrochlorothiazide oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
candesartan cilexetil oral tablet	$1	PA; ¥ (Can be filled for up to a 90 day supply)

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candesartan cilexetil-hctz oral tablet	$1	PA; ¥ (Can be filled for up to a 90 day supply)
captopril oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
captopril-hydrochlorothiazide oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
clonidine hcl oral tablet	$1	PA; ¥ (PA applies to members 2 years and under; PBHMI polypharmacy for members less than 18 years of age)
clonidine hcl transdermal patch weekly	$1	PA; ¥ (PA applies to members 2 years and under; PBHMI polypharmacy for members less than 18 years of age)
CLORPRES ORAL TABLET	$1	
doxazosin mesylate oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
EDARBI ORAL TABLET	$3.65	PA
enalapril maleate oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
enalapril-hydrochlorothiazide oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
EPANED ORAL SOLUTION RECONSTITUTED	$3.65	
eplerenone oral tablet	$1	PA; ¥ (Can be filled for up to a 90 day supply)
eprosartan mesylate oral tablet	$1	PA; ¥ (Can be filled for up to a 90 day supply)
fosinopril sodium oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
fosinopril sodium-hctz oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
guanfacine hcl oral tablet	$1	PA; ¥ (PA applies to members 2 years and under; PBHMI polypharmacy for members less than 18 years of age)
hydralazine hcl oral tablet	$1	¥ (Can be filled for up to a 90 day supply)

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irbesartan oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
irbesartan-hydrochlorothiazide oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
lisinopril oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
lisinopril-hydrochlorothiazide oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
losartan potassium oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
losartan potassium-hctz oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
methyldopa oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
methyldopa-hydrochlorothiazide oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
metoprolol-hydrochlorothiazide oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
metyrosine oral capsule	$3.65	
minoxidil oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
moexipril hcl oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
moexipril-hydrochlorothiazide oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
nadolol-bendroflumethiazide oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
olmesartan medoxomil oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
olmesartan medoxomil-hctz oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
perindopril erbumine oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
phenoxybenzamine hcl oral capsule	$1	
prazosin hcl oral capsule	$1	¥ (Can be filled for up to a 90 day supply)
propranolol-hctz oral tablet	$1	¥ (Can be filled for up to a 90 day supply)

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quinapril hcl oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
quinapril-hydrochlorothiazide oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
quinaretic oral tablet 10-12.5 mg	$1	¥ (Can be filled for up to a 90 day supply)
quinaretic oral tablet 20-25 mg	$1	
ramipril oral capsule	$1	¥ (Can be filled for up to a 90 day supply)
reserpine oral tablet	$1	
TEKTURNA HCT ORAL TABLET	$3.65	PA; QL (30 EA per 30 days)
telmisartan oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
telmisartan-hctz oral tablet	$1	PA; ¥ (Can be filled for up to a 90 day supply)
terazosin hcl oral capsule	$1	¥ (Can be filled for up to a 90 day supply)
trandolapril oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
trandolapril-verapamil hcl er oral tablet extended release	$1	¥ (Can be filled for up to a 90 day supply)
valsartan oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
valsartan-hydrochlorothiazide oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
ANTI-INFECTIVE AGENTS - MISC.		
AEMCOLO ORAL TABLET DELAYED RELEASE	$3.65	QL (12 EA per 1 FILL)
ALINIA ORAL SUSPENSION RECONSTITUTED	$3.65	
atovaquone oral suspension	$3.65	
CAYSTON INHALATION SOLUTION RECONSTITUTED	$3.65	SP
clindamycin hcl oral capsule	$3.65	
clindamycin palmitate hcl oral solution reconstituted	$3.65	
dapsone oral tablet	$3.65	

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FIRST-VANCOMYCIN 25 ORAL SOLUTION	$3.65	
FIRST-VANCOMYCIN 50 ORAL SOLUTION	$3.65	
FIRVANQ ORAL SOLUTION RECONSTITUTED	$3.65	QL (2 Bottles per 10 days)
FLAGYL ER ORAL TABLET EXTENDED RELEASE 24 HOUR	$3.65	
fosfomycin tromethamine oral packet	$3.65	
HYOPHEN ORAL TABLET	$3.65	
IMPAVIDO ORAL CAPSULE	$3.65	
KETEK ORAL TABLET	$3.65	
LAMPIT ORAL TABLET	$3.65	
linezolid oral suspension reconstituted	$3.65	QL (60 ML per 1 day)
linezolid oral tablet	$3.65	QL (2 EA per 1 day)
me/naphos/mb/hyo1 oral tablet	$3.65	
methenamine hippurate oral tablet	$3.65	
methenamine mandelate oral tablet	$3.65	
metronidazole oral capsule	$3.65	
metronidazole oral tablet	$3.65	
NEBUPENT INHALATION SOLUTION RECONSTITUTED	$3.65	
nitazoxanide oral tablet	$3.65	
nitrofurantoin macrocrystal oral capsule	$3.65	
nitrofurantoin monohyd macro oral capsule	$3.65	
nitrofurantoin oral suspension	$3.65	
PHOSPHASAL ORAL TABLET	$3.65	
PRIMSOL ORAL SOLUTION	$3.65	
SIVEXTRO ORAL TABLET	$3.65	QL (6 EA per 365 days)
sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml	$3.65	
sulfamethoxazole-trimethoprim oral tablet	$3.65	
SULFATRIM PEDIATRIC ORAL SUSPENSION	$3.65	
tinidazole oral tablet	$3.65	
trimethoprim oral tablet	$3.65	

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URIMAR-T ORAL TABLET	$3.65	
UROLET MB ORAL TABLET	$3.65	
UROPHEN MB ORAL TABLET	$3.65	
URYL ORAL TABLET	$3.65	
Vabomere Intravenous Solution Reconstituted	MB/RX	
vancomycin hcl oral capsule	$3.65	QL (40 EA per 10 days)
XENLETA ORAL TABLET	$3.65	
XIFAXAN ORAL TABLET 200 MG	$3.65	QL (9 tablets per 30 days)
XIFAXAN ORAL TABLET 550 MG	$3.65	QL (6 tablets per 30 days)
ANTIMALARIALS		
atovaquone-proguanil hcl oral tablet	$3.65	
chloroquine phosphate oral tablet	$3.65	
COARTEM ORAL TABLET	$3.65	QL (24 EA per 30 days)
hydroxychloroquine sulfate oral tablet 200 mg	$3.65	
KRINTAFEL ORAL TABLET	$3.65	QL (2 EA per 1 Fill)
mefloquine hcl oral tablet	$3.65	
primaquine phosphate oral tablet	$3.65	
quinine sulfate oral capsule	$3.65	PA
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
FIRDAPSE ORAL TABLET	$3.65	PA
guanidine hcl oral tablet	$3.65	
MESTINON ORAL SYRUP	$3.65	
pyridostigmine bromide er oral tablet extended release	$3.65	
pyridostigmine bromide oral tablet 60 mg	$3.65	
RUZURGI ORAL TABLET	$3.65	PA
ANTIMYCOBACTERIAL AGENTS		
cycloserine oral capsule	$3.65	
ethambutol hcl oral tablet	$3.65	
isoniazid oral syrup	$3.65	
isoniazid oral tablet	$3.65	
PASER ORAL PACKET	$3.65	PA
pretomanid oral tablet	$3.65	

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PRIFTIN ORAL TABLET	$3.65	
pyrazinamide oral tablet	$3.65	
rifabutin oral capsule	$3.65	
RIFAMATE ORAL CAPSULE	$3.65	
rifampin oral capsule	$3.65	
RIFATER ORAL TABLET	$3.65	
SIRTURO ORAL TABLET	$3.65	PA
TRECATOR ORAL TABLET	$3.65	PA
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES		
abiraterone acetate oral tablet 250 mg	$3.65	PA; SP
ABRAXANE INTRAVENOUS SUSPENSION RECONSTITUTED	Medical Benefit	PA
ACTIMMUNE SUBCUTANEOUS SOLUTION	$3.65	SP
AFINITOR DISPERZ ORAL TABLET SOLUBLE	$3.65	PA; SP; Brand Preferred
AFINITOR ORAL TABLET	$3.65	PA; SP; Brand Preferred
ALECENSA ORAL CAPSULE	$3.65	PA; SP
Alferon N Injection Solution	MB/RX	SP
ALIQOPA INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA
ALUNBRIG ORAL TABLET	$3.65	PA
anastrozole oral tablet	$3.65	
Arzerra Intravenous Concentrate	MB/RX	SP
Avastin Intravenous Solution	MB/RX	PA; SP
AYVAKIT ORAL TABLET 100 MG, 200 MG, 300 MG	$3.65	PA
AzaCITIDine Injection Suspension Reconstituted	MB/RX	SP
BALVERSA ORAL TABLET	$3.65	PA
Beleodaq Intravenous Solution Reconstituted	MB/RX	SP
BENDEKA INTRAVENOUS SOLUTION	Medical Benefit	
Besponsa Intravenous Solution Reconstituted	MB/RX	
bexarotene oral capsule	$3.65	SP
bicalutamide oral tablet	$3.65	

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BOSULIF ORAL TABLET	$3.65	PA; SP; Preferred product
BRAFTOVI ORAL CAPSULE	$3.65	PA
BRUKINSA ORAL CAPSULE	$3.65	PA
CABOMETYX ORAL TABLET	$3.65	PA; SP
CALQUENCE ORAL CAPSULE	$3.65	PA
capecitabine oral tablet	$3.65	SP
CAPRELSA ORAL TABLET	$3.65	PA
COMETRIQ (100 MG DAILY DOSE) ORAL KIT	$3.65	PA; SP
COMETRIQ (140 MG DAILY DOSE) ORAL KIT	$3.65	PA; SP
COMETRIQ (60 MG DAILY DOSE) ORAL KIT	$3.65	PA; SP
COPIKTRA ORAL CAPSULE	$3.65	PA
COSELA INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA
COTELLIC ORAL TABLET	$3.65	PA; SP
cyclophosphamide injection solution reconstituted	$3.65	SP
cyclophosphamide oral capsule	$3.65	SP
Dacogen Intravenous Solution Reconstituted	MB/RX	SP
DARZALEX INTRAVENOUS SOLUTION	Medical Benefit	
DAURISMO ORAL TABLET	$3.65	PA; SP
Decitabine Intravenous Solution Reconstituted	MB/RX	SP
DEPO-PROVERA INTRAMUSCULAR SUSPENSION 400 MG/ML	$3.65	
Eligard Subcutaneous Kit	MB/RX	SP
Elspar Injection Solution Reconstituted	MB/RX	SP
EMCYT ORAL CAPSULE	$3.65	SP
EMPLICITI INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	
EpiRUBicin HCl Intravenous Solution 200 MG/100ML, 50 MG/25ML	MB/RX	
Erbitux Intravenous Solution	MB/RX	SP
ERIVEDGE ORAL CAPSULE	$3.65	PA; SP
erlotinib hcl oral tablet	$3.65	PA; SP
etoposide oral capsule	$3.65	SP

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Drug	Status	Notes
exemestane oral tablet	$3.65	
FARYDAK ORAL CAPSULE	$3.65	PA; SP
Firmagon Subcutaneous Solution Reconstituted	MB/RX	SP
flutamide oral capsule	$3.65	
GAVRETO ORAL CAPSULE	$3.65	PA; SP
Gazyva Intravenous Solution	MB/RX	SP
GILOTRIF ORAL TABLET	$3.65	PA
GLEOSTINE ORAL CAPSULE 10 MG, 100 MG, 40 MG	$3.65	SP
Halaven Intravenous Solution	MB/RX	SP
HERCEPTIN HYLECTA SUBCUTANEOUS SOLUTION	Medical Benefit	PA
HERCEPTIN INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA
HEXALEN ORAL CAPSULE	$3.65	
HYCAMTIN ORAL CAPSULE	$3.65	PA; SP
hydroxyurea oral capsule	$3.65	
IBRANCE ORAL CAPSULE	$3.65	PA; SP; Preferred product
IBRANCE ORAL TABLET	$3.65	PA; SP; Preferred product
ICLUSIG ORAL TABLET	$3.65	PA
IDHIFA ORAL TABLET	$3.65	PA; SP
imatinib mesylate oral tablet	$3.65	SP
IMBRUVICA ORAL CAPSULE	$3.65	PA
IMBRUVICA ORAL TABLET	$3.65	PA
Imfinzi Intravenous Solution	MB/RX	
IMLYGIC INTRALESIONAL SUSPENSION	Medical Benefit	
INLYTA ORAL TABLET	$3.65	PA; SP; Preferred product
INQOVI ORAL TABLET	$3.65	PA; SP
INREBIC ORAL CAPSULE	$3.65	PA; SP
Intron A Injection Solution	MB/RX	SP
Intron A Injection Solution Reconstituted	MB/RX	SP
IRESSA ORAL TABLET	$3.65	PA
Istodax Intravenous Solution Reconstituted	MB/RX	SP
Ixempra Kit Intravenous Solution Reconstituted	MB/RX	SP
JAKAFI ORAL TABLET	$3.65	PA; SP

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Drug	Status	Notes
Jevtana Intravenous Solution	MB/RX	SP
Kadcyla Intravenous Solution Reconstituted	MB/RX	SP
KISQALI (200 MG DOSE) ORAL TABLET THERAPY PACK	$3.65	PA
KISQALI (400 MG DOSE) ORAL TABLET THERAPY PACK	$3.65	PA
KISQALI (600 MG DOSE) ORAL TABLET THERAPY PACK	$3.65	PA
KISQALI 200 DOSE ORAL TABLET	$3.65	PA
KISQALI 400 DOSE ORAL TABLET	$3.65	PA
KISQALI 600 DOSE ORAL TABLET	$3.65	PA
KISQALI FEMARA (400 MG DOSE) ORAL TABLET THERAPY PACK	$3.65	PA
KISQALI FEMARA (600 MG DOSE) ORAL TABLET THERAPY PACK	$3.65	PA
KISQALI FEMARA(200 MG DOSE) ORAL TABLET THERAPY PACK	$3.65	PA
KOSELUGO ORAL CAPSULE	$3.65	PA
Lartruvo Intravenous Solution	MB/RX	
LENVIMA (10 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	$3.65	PA; SP
LENVIMA (12 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	$3.65	PA; SP
LENVIMA (14 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	$3.65	PA; SP
LENVIMA (20 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	$3.65	PA; SP
LENVIMA (24 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	$3.65	PA; SP
LENVIMA (4 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	$3.65	PA; SP
letrozole oral tablet	$3.65	
leucovorin calcium oral tablet	$3.65	
LEUKERAN ORAL TABLET	$3.65	
Levoleucovorin Calcium Intravenous Solution	MB/RX	SP
LEVOleucovorin Calcium Intravenous Solution Reconstituted 50 MG	MB/RX	SP

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Drug	Status	Notes
LEVOleucovorin Calcium PF Intravenous Solution 250 MG/25ML	MB/RX	SP
lomustine oral capsule	$3.65	
LONSURF ORAL TABLET	$3.65	PA; SP
LORBRENA ORAL TABLET	$3.65	PA; SP
LUMAKRAS ORAL TABLET	$3.65	PA; SP
Lupron Depot (1-Month) Intramuscular Kit 3.75 MG	MB/RX	PA; SP
Lupron Depot (1-Month) Intramuscular Kit 7.5 MG	MB/RX	SP
Lupron Depot (3-Month) Intramuscular Kit 11.25 MG	MB/RX	PA; SP
Lupron Depot (3-Month) Intramuscular Kit 22.5 MG	MB/RX	SP
Lupron Depot (4-Month) Intramuscular Kit	MB/RX	SP
Lupron Depot (6-Month) Intramuscular Kit	MB/RX	SP
LUPRON INJECTION KIT	Medical Benefit	PA; SP
LUPRON SUBCUTANEOUS SOLUTION	Medical Benefit	PA; SP
LYNPARZA ORAL CAPSULE	$3.65	PA; SP
LYNPARZA ORAL TABLET	$3.65	PA; SP
LYSODREN ORAL TABLET	$3.65	
MATULANE ORAL CAPSULE	$3.65	
megestrol acetate oral suspension 40 mg/ml, 400 mg/10ml	$3.65	
megestrol acetate oral tablet	$3.65	
MEKINIST ORAL TABLET	$3.65	PA; SP
MEKTOVI ORAL TABLET	$3.65	PA
melphalan oral tablet	$3.65	
mercaptopurine oral tablet	$3.65	
MESNEX ORAL TABLET	$3.65	
methotrexate oral tablet	$3.65	
Mitoxantrone HCl Intravenous Concentrate	MB/RX	SP
MYLERAN ORAL TABLET	$3.65	
Mylotarg Intravenous Solution Reconstituted 4.5 MG	MB/RX	
NERLYNX ORAL TABLET	$3.65	PA; SP

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NEXAVAR ORAL TABLET	$3.65	PA; SP
nilutamide oral tablet	$3.65	
NINLARO ORAL CAPSULE	$3.65	PA; SP
ODOMZO ORAL CAPSULE	$3.65	PA; SP
Oncaspar Injection Solution	MB/RX	SP
ONUREG ORAL TABLET	$3.65	PA; SP
ORGOVYX ORAL TABLET	$3.65	PA
PACLitaxel Intravenous Concentrate 100 MG/16.7ML, 150 MG/25ML, 30 MG/5ML, 300 MG/50ML	MB/RX	
PEMAZYRE ORAL TABLET	$3.65	PA
Perjeta Intravenous Solution	MB/RX	SP
PHESGO SUBCUTANEOUS SOLUTION	Medical Benefit	PA
PIQRAY (200 MG DAILY DOSE) ORAL TABLET THERAPY PACK	$3.65	PA; SP
PIQRAY (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK	$3.65	PA; SP
PIQRAY (300 MG DAILY DOSE) ORAL TABLET THERAPY PACK	$3.65	PA; SP
POMALYST ORAL CAPSULE	$3.65	PA; SP
PORTRAZZA INTRAVENOUS SOLUTION	Medical Benefit	
PROLEUKIN INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SP
PURIXAN ORAL SUSPENSION	$3.65	
QINLOCK ORAL TABLET	$3.65	PA
RETEVMO ORAL CAPSULE	$3.65	PA
RIABNI INTRAVENOUS SOLUTION	Medical Benefit	PA
RITUXAN HYCELA SUBCUTANEOUS SOLUTION	Medical Benefit	PA
RITUXAN INTRAVENOUS SOLUTION	Medical Benefit	PA
ROZLYTREK ORAL CAPSULE	$3.65	PA; SP
RUBRACA ORAL TABLET	$3.65	PA; SP
RUXIENCE INTRAVENOUS SOLUTION	Medical Benefit	PA
RYDAPT ORAL CAPSULE	$3.65	PA; SP
SOLTAMOX ORAL SOLUTION	$3.65	

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SPRYCEL ORAL TABLET 100 MG, 140 MG, 20 MG	$3.65	SP
SPRYCEL ORAL TABLET 50 MG, 70 MG, 80 MG	$3.65	SP; QL (60 EA per 30 days)
STIVARGA ORAL TABLET	$3.65	PA; SP
SUTENT ORAL CAPSULE	$3.65	PA; SP; Preferred product; brand preferred
SYLATRON SUBCUTANEOUS KIT 200 MCG, 296 MCG, 300 MCG, 4 X 296 MCG, 4 X 444 MCG, 444 MCG, 600 MCG, 888 MCG	$3.65	SP
SYNRIBO SUBCUTANEOUS SOLUTION RECONSTITUTED	$3.65	PA; SP
TABLOID ORAL TABLET	$3.65	SP
TABRECTA ORAL TABLET	$3.65	PA; SP
TAFINLAR ORAL CAPSULE	$3.65	PA; SP
TAGRISSO ORAL TABLET	$3.65	PA
TALZENNA ORAL CAPSULE	$3.65	PA; SP
tamoxifen citrate oral tablet	$0	
TASIGNA ORAL CAPSULE	$3.65	SP
TAZVERIK ORAL TABLET	$3.65	PA
Tecentriq Intravenous Solution 1200 MG/20ML	MB/RX	
Temodar Intravenous Solution Reconstituted	MB/RX	SP
temozolomide oral capsule	$3.65	SP
temsirolimus intravenous solution	Medical Benefit	
TIBSOVO ORAL TABLET	$3.65	PA
toremifene citrate oral tablet	$3.65	
Torisel Intravenous Solution	MB/RX	SP
Treanda Intravenous Solution Reconstituted	MB/RX	SP
Trelstar Depot Intramuscular Suspension Reconstituted	MB/RX	SP
Trelstar Intramuscular Suspension Reconstituted	MB/RX	SP
Trelstar LA Intramuscular Suspension Reconstituted	MB/RX	SP
Trelstar Mixject Intramuscular Suspension Reconstituted	MB/RX	SP
tretinoin oral capsule	$3.65	

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TREXALL ORAL TABLET	$3.65	
Truxima Intravenous Solution	MB/RX	PA
TUKYSA ORAL TABLET	$3.65	PA
TURALIO ORAL CAPSULE	$3.65	PA
TYKERB ORAL TABLET	$3.65	SP; Brand Preferred
Valstar Intravesical Solution	MB/RX	SP
Vantas Subcutaneous Kit	MB/RX	SP
Vectibix Intravenous Solution 100 MG/5ML, 400 MG/20ML	MB/RX	SP
Velcade Injection Solution Reconstituted	MB/RX	SP
VENCLEXTA ORAL TABLET	$3.65	PA
VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK	$3.65	PA
VERZENIO ORAL TABLET	$3.65	PA; SP
Vidaza Injection Suspension Reconstituted	MB/RX	SP
VITRAKVI ORAL CAPSULE	$3.65	PA; SP
VITRAKVI ORAL SOLUTION	$3.65	PA; SP
VIZIMPRO ORAL TABLET	$3.65	PA; SP
VOTRIENT ORAL TABLET	$3.65	PA; SP
Vyxeos Intravenous Suspension Reconstituted 100-44 MG	MB/RX	
WELIREG ORAL TABLET	$3.65	PA
XALKORI ORAL CAPSULE	$3.65	PA; SP
XATMEP ORAL SOLUTION	$3.65	PA
XOSPATA ORAL TABLET	$3.65	PA
XPOVIO (100 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 20 MG	$3.65	PA
XPOVIO (40 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 20 MG	$3.65	PA
XPOVIO (40 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK 20 MG	$3.65	PA
XPOVIO (60 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 20 MG	$3.65	PA
XPOVIO (60 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	$3.65	PA

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Drug	Status	Notes
XPOVIO (80 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 20 MG	$3.65	PA
XPOVIO (80 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	$3.65	PA
XTANDI ORAL CAPSULE	$3.65	PA; SP
XTANDI ORAL TABLET	$3.65	PA; SP
Yervoy Intravenous Solution	MB/RX	SP
YONDELIS INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	
Zaltrap Intravenous Solution	MB/RX	SP
ZEJULA ORAL CAPSULE	$3.65	PA
ZELBORAF ORAL TABLET	$3.65	PA; SP
Zoladex Subcutaneous Implant 10.8 MG	MB/RX	SP; QL (1 EA per 84 days)
Zoladex Subcutaneous Implant 3.6 MG	MB/RX	SP; QL (1 EA per 28 days)
ZOLINZA ORAL CAPSULE	$3.65	PA; SP
ZYDELIG ORAL TABLET	$3.65	PA; SP
ZYKADIA ORAL CAPSULE	$3.65	PA; SP
ZYKADIA ORAL TABLET	$3.65	PA; SP
ANTIPARKINSON AND RELATED THERAPY AGENTS		
amantadine hcl oral capsule	$3.65	¥ (Can be filled for up to a 90 day supply)
amantadine hcl oral syrup	$3.65	¥ (Can be filled for up to a 90 day supply)
amantadine hcl oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
APOKYN SUBCUTANEOUS SOLUTION CARTRIDGE	$3.65	SP; QL (15 mL per 23 days)
benztropine mesylate oral tablet	$3.65	
bromocriptine mesylate oral capsule	$3.65	
bromocriptine mesylate oral tablet	$3.65	
carbidopa oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
carbidopa-levodopa er oral tablet extended release 25-100 mg, 50-200 mg	$3.65	¥ (Can be filled for up to a 90 day supply)
carbidopa-levodopa oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)

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carbidopa-levodopa oral tablet dispersible	$3.65	¥ (Can be filled for up to a 90 day supply)
carbidopa-levodopa-entacapone oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
entacapone oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
GOCOVRI ORAL CAPSULE EXTENDED RELEASE 24 HOUR	$3.65	PA
INBRIJA INHALATION CAPSULE	$3.65	PA
MIRAPEX ER ORAL TABLET EXTENDED RELEASE 24 HOUR 3.75 MG	$3.65	¥ (Can be filled for up to a 90 day supply)
NEUPRO TRANSDERMAL PATCH 24 HOUR	$3.65	PA
NOURIANZ ORAL TABLET	$3.65	PA; QL (1 tablet per 1 day)
ONGENTYS ORAL CAPSULE	$3.65	PA; QL (30 EA per 30 days)
pramipexole dihydrochloride er oral tablet extended release 24 hour 0.375 mg, 0.75 mg, 1.5 mg, 2.25 mg, 3 mg, 4.5 mg	$3.65	¥ (Can be filled for up to a 90 day supply)
pramipexole dihydrochloride oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
rasagiline mesylate oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
ropinirole hcl er oral tablet extended release 24 hour	$3.65	¥ (Can be filled for up to a 90 day supply)
ropinirole hcl oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
selegiline hcl oral capsule	$3.65	
selegiline hcl oral tablet	$3.65	
tolcapone oral tablet	$3.65	PA; ¥ (Can be filled for up to a 90 day supply); QL (6 EA per 1 day)
trihexyphenidyl hcl oral tablet	$3.65	
XADAGO ORAL TABLET	$3.65	PA
ZELAPAR ORAL TABLET DISPERSIBLE	$3.65	PA; QL (60 EA per 30 days)

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ANTIPSYCHOTICS/ANTIMANIC AGENTS		
Abilify Maintena Intramuscular Suspension Reconstituted 300 MG, 400 MG	MB/RX	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (1 Vial per 28 days)
ABILIFY MYCITE ORAL TABLET	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (1 EA per 1 day)
aripiprazole oral solution	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (750 ML per 30 days)
aripiprazole oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); QL (30 EA per 30 days)
aripiprazole oral tablet dispersible	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (30 EA per 30 days)
Aristada Initio Intramuscular Prefilled Syringe	MB/RX	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); Preferred product; QL (1 injection per 30 days)
Aristada Intramuscular Prefilled Syringe 1064 MG/3.9ML	MB/RX	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); Preferred product; QL (1 injection per 60 days)

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Aristada Intramuscular Prefilled Syringe 441 MG/1.6ML, 662 MG/2.4ML, 882 MG/3.2ML	MB/RX	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); Preferred product; QL (1 injection per 30 days)
asenapine maleate sublingual tablet sublingual	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (60 EA per 30 days)
CAPLYTA ORAL CAPSULE	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (1 capsule per 1 day)
chlorpromazine hcl oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
clozapine oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
clozapine oral tablet dispersible	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); QL (60 EA per 30 days)
COMPAZINE RECTAL SUPPOSITORY	$3.65	
COMPRO RECTAL SUPPOSITORY	$3.65	
FANAPT ORAL TABLET	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (60 EA per 30 days)
FANAPT TITRATION PACK ORAL TABLET	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age)

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fluphenazine decanoate injection solution	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
fluphenazine hcl oral concentrate	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
fluphenazine hcl oral elixir	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
fluphenazine hcl oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
Geodon Intramuscular Solution Reconstituted	MB/RX	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
haloperidol decanoate intramuscular solution 100 mg/ml, 50 mg/ml	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
haloperidol lactate injection solution 5 mg/ml	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
haloperidol lactate oral concentrate	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
haloperidol oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)

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Drug	Status	Notes
Invega Sustenna Intramuscular Suspension Prefilled Syringe	MB/RX	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); ^ (Limit 2 injections first month of treatment); Preferred product; QL (1 injection per 30 days)
Invega Trinza Intramuscular Suspension	MB/RX	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); Preferred product; QL (1 injection per 90 days)
Invega Trinza Intramuscular Suspension Prefilled Syringe	MB/RX	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); Preferred product; QL (1 injection per 90 days)
LATUDA ORAL TABLET	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (30 EA per 30 days)
lithium carbonate er oral tablet extended release	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
lithium carbonate oral capsule	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
lithium carbonate oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
lithium oral solution	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)

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loxapine succinate oral capsule	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
NUPLAZID ORAL CAPSULE	$3.65	PA; SP; QL (30 EA per 30 days)
NUPLAZID ORAL TABLET 10 MG	$3.65	PA; SP; QL (60 EA per 30 days)
NUPLAZID ORAL TABLET 17 MG	$3.65	PA; SP; QL (60 Tablets per 30 days)
OLANZapine Intramuscular Solution Reconstituted	MB/RX	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
olanzapine oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); QL (30 EA per 30 days)
olanzapine oral tablet dispersible	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); QL (30 EA per 30 days)
paliperidone er oral tablet extended release 24 hour	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (30 EA per 30 days)
perphenazine oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
Perseris Subcutaneous Prefilled Syringe	MB/RX	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (1 EA per 30 days)
prochlorperazine edisylate injection solution 5 mg/ml	$3.65	
prochlorperazine maleate oral tablet	$3.65	
prochlorperazine rectal suppository	$3.65	

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quetiapine fumarate er oral tablet extended release 24 hour	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age)
quetiapine fumarate oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); QL (90 EA per 30 days)
REXULTI ORAL TABLET	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (30 EA per 30 days)
RisperDAL Consta Intramuscular Suspension Reconstituted	MB/RX	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); QL (2 injections per 28 days)
RISPERIDONE M-TAB ORAL TABLET DISPERSIBLE	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
risperidone oral solution	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
risperidone oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); QL (60 EA per 30 days)
risperidone oral tablet 4 mg	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
risperidone oral tablet dispersible	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)

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Drug	Status	Notes
SECUADO TRANSDERMAL PATCH 24 HOUR	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age)
SEROQUEL XR ORAL TABLET EXTENDED RELEASE 24 HOUR	$3.65	PA
thioridazine hcl oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
thiothixene oral capsule	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
trifluoperazine hcl oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
VERSACLOZ ORAL SUSPENSION	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
VRAYLAR ORAL CAPSULE	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age)
VRAYLAR ORAL CAPSULE THERAPY PACK	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age)
ziprasidone hcl oral capsule	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); QL (60 EA per 30 days)
ZyPREXA Relprevv Intramuscular Suspension Reconstituted 210 MG, 300 MG	MB/RX	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); QL (2 vials per 28 days)

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Drug	Status	Notes
ZyPREXA Relprevv Intramuscular Suspension Reconstituted 405 MG	MB/RX	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); QL (1 vial per 28 days)
ANTIVIRALS		
abacavir sulfate oral solution	$3.65	
abacavir sulfate oral tablet	$3.65	
abacavir sulfate-lamivudine oral tablet	$3.65	
abacavir-lamivudine-zidovudine oral tablet	$3.65	
acyclovir oral capsule	$3.65	
acyclovir oral suspension	$3.65	
acyclovir oral tablet	$3.65	
adefovir dipivoxil oral tablet	$3.65	
APTIVUS ORAL CAPSULE	$3.65	
APTIVUS ORAL SOLUTION	$3.65	
atazanavir sulfate oral capsule	$3.65	
BARACLUDE ORAL SOLUTION	$3.65	
BIKTARVY ORAL TABLET	$3.65	Preferred product
cabenuva intramuscular suspension extended release	Medical Benefit	Preferred product
CIMDUO ORAL TABLET	$3.65	
COMPLERA ORAL TABLET	$3.65	
CRIXIVAN ORAL CAPSULE 200 MG, 400 MG	$3.65	
DAKLINZA ORAL TABLET	$3.65	PA; SP
DELSTRIGO ORAL TABLET	$3.65	Preferred product
DESCOVY ORAL TABLET	$0	Preferred product
didanosine oral capsule delayed release	$3.65	
DOVATO ORAL TABLET	$3.65	Preferred product
EDURANT ORAL TABLET	$3.65	
efavirenz oral capsule	$3.65	
efavirenz oral tablet	$3.65	
efavirenz-emtricitab-tenofovir oral tablet	$3.65	
efavirenz-lamivudine-tenofovir oral tablet	$3.65	

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Drug	Status	Notes
emtricitabine oral capsule	$3.65	
emtricitabine-tenofovir df oral tablet	$0	
EMTRIVA ORAL SOLUTION	$3.65	
entecavir oral tablet	$3.65	
etravirine oral tablet	$3.65	
EVOTAZ ORAL TABLET	$3.65	
famciclovir oral tablet	$3.65	
fosamprenavir calcium oral tablet	$3.65	
FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED	$3.65	SP
GENVOYA ORAL TABLET	$3.65	Preferred product
INTELENCE ORAL TABLET 25 MG	$3.65	
INVIRASE ORAL CAPSULE	$3.65	
INVIRASE ORAL TABLET	$3.65	
ISENTRESS HD ORAL TABLET	$3.65	
ISENTRESS ORAL PACKET	$3.65	
ISENTRESS ORAL TABLET	$3.65	
ISENTRESS ORAL TABLET CHEWABLE	$3.65	
JULUCA ORAL TABLET	$3.65	Preferred product
lamivudine oral solution	$3.65	
lamivudine oral tablet	$3.65	
lamivudine-zidovudine oral tablet	$3.65	
ledipasvir-sofosbuvir oral tablet	$3.65	PA; SP; Preferred product
LEXIVA ORAL SUSPENSION	$3.65	
lopinavir-ritonavir oral solution	$3.65	
lopinavir-ritonavir oral tablet	$3.65	
MAVYRET ORAL TABLET	$3.65	PA; SP; Preferred product
MODERIBA ORAL TABLET 200 MG	$3.65	QL (210 EA per 30 days)
nevirapine er oral tablet extended release 24 hour	$3.65	
nevirapine oral suspension	$3.65	
nevirapine oral tablet	$3.65	
NORVIR ORAL CAPSULE	$3.65	
NORVIR ORAL PACKET	$3.65	
NORVIR ORAL SOLUTION	$3.65	

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Drug	Status	Notes
NORVIR ORAL TABLET	$3.65	Preferred product; brand preferred
ODEFSEY ORAL TABLET	$3.65	Preferred product
oseltamivir phosphate oral capsule 30 mg	$3.65	¥ (Max of 2 fills per year); QL (20 EA per 1 Fill)
oseltamivir phosphate oral capsule 45 mg, 75 mg	$3.65	¥ (Max of 2 fills per year); QL (10 EA per 1 Fill)
oseltamivir phosphate oral suspension reconstituted	$3.65	¥ (Max of 2 fills per year); QL (180 ML per 1 Fill)
PEGASYS PROCLICK SUBCUTANEOUS SOLUTION 180 MCG/0.5ML	$3.65	SP
PEGASYS SUBCUTANEOUS SOLUTION	$3.65	SP
PEG-INTRON REDIPEN SUBCUTANEOUS KIT 50 MCG/0.5ML, 80 MCG/0.5ML	$3.65	SP; QL (4 EA per 28 days)
PEGINTRON SUBCUTANEOUS KIT 50 MCG/0.5ML, 80 MCG/0.5ML	$3.65	SP
PEG-INTRON SUBCUTANEOUS KIT 50 MCG/0.5ML, 80 MCG/0.5ML	$3.65	SP; QL (4 EA per 28 days)
PIFELTRO ORAL TABLET	$3.65	Preferred product
Prevymis Intravenous Solution	MB/RX	PA
PREVYMIS ORAL TABLET	$3.65	PA
PREZCOBIX ORAL TABLET	$3.65	Preferred product
PREZISTA ORAL SUSPENSION	$3.65	Preferred product; brand preferred
PREZISTA ORAL TABLET 150 MG, 600 MG, 75 MG, 800 MG	$3.65	Preferred product; brand preferred
REBETOL ORAL SOLUTION	$3.65	SP; QL (35 ML per 1 day)
RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	$3.65	¥ (Max of 2 fills per year); QL (20 Blisters per 1 Rx)
RESCRIPTOR ORAL TABLET	$3.65	
REYATAZ ORAL PACKET	$3.65	
RIBASPHERE ORAL CAPSULE	$3.65	QL (210 EA per 30 days)
RIBASPHERE ORAL TABLET 200 MG	$3.65	QL (210 EA per 30 days)
ribavirin oral capsule	$3.65	SP
ribavirin oral tablet 200 mg	$3.65	SP
rimantadine hcl oral tablet	$3.65	
RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HOUR	$3.65	Preferred product

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SELZENTRY ORAL SOLUTION	$3.65	
SELZENTRY ORAL TABLET	$3.65	
sofosbuvir-velpatasvir oral tablet	$3.65	PA; SP; Preferred product
SOVALDI ORAL TABLET 200 MG	$3.65	PA; SP; QL (30 EA per 30 days)
SOVALDI ORAL TABLET 400 MG	$3.65	PA; SP
stavudine oral capsule	$3.65	
stavudine oral solution reconstituted	$3.65	
STRIBILD ORAL TABLET	$3.65	
SYMTUZA ORAL TABLET	$3.65	Preferred product
tenofovir disoproxil fumarate oral tablet	$3.65	
TIVICAY ORAL TABLET	$3.65	
TIVICAY PD ORAL TABLET SOLUBLE	$3.65	
TRIUMEQ ORAL TABLET	$3.65	Preferred product
TYBOST ORAL TABLET	$3.65	
TYZEKA ORAL TABLET	$3.65	
valacyclovir hcl oral tablet	$3.65	
valganciclovir hcl oral solution reconstituted	$3.65	
valganciclovir hcl oral tablet	$3.65	
VEMLIDY ORAL TABLET	$3.65	
VIDEX ORAL SOLUTION RECONSTITUTED	$3.65	
VIRACEPT ORAL TABLET	$3.65	
VIRAZOLE INHALATION SOLUTION RECONSTITUTED	$3.65	
VIREAD ORAL POWDER	$3.65	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	$3.65	
VITEKTA ORAL TABLET	$3.65	
VOSEVI ORAL TABLET	$3.65	PA; SP
XOFLUZA (40 MG DOSE) ORAL TABLET THERAPY PACK 2 X 20 MG	$3.65	¥ (Max of 2 fills per year); QL (2 EA per 1 day)
XOFLUZA (80 MG DOSE) ORAL TABLET THERAPY PACK 2 X 40 MG	$3.65	¥ (Max of 2 fills per year); QL (2 EA per 1 day)
ZEPATIER ORAL TABLET	$3.65	PA; SP
zidovudine oral capsule	$3.65	

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zidovudine oral syrup	$3.65	
zidovudine oral tablet	$3.65	
BETA BLOCKERS		
acebutolol hcl oral capsule	$1	¥ (Can be filled for up to a 90 day supply)
atenolol oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
betaxolol hcl oral tablet	$1	
bisoprolol fumarate oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
carvedilol oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
carvedilol phosphate er oral capsule extended release 24 hour	$1	PA; STPA; ¥ (Can be filled for up to a 90 day supply)
labetalol hcl oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
LEVATOL ORAL TABLET	$1	PA
metoprolol succinate er oral tablet extended release 24 hour	$1	¥ (Can be filled for up to a 90 day supply)
metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg	$1	¥ (Can be filled for up to a 90 day supply)
metoprolol tartrate oral tablet 37.5 mg, 75 mg	$3.65	PA
nadolol oral tablet 20 mg, 40 mg, 80 mg	$1	¥ (Can be filled for up to a 90 day supply)
nebivolol hcl oral tablet	$1	STPA
pindolol oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
propranolol hcl er oral capsule extended release 24 hour	$1	¥ (Can be filled for up to a 90 day supply)
propranolol hcl oral solution	$1	¥ (Can be filled for up to a 90 day supply)
propranolol hcl oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
SORINE ORAL TABLET 120 MG, 160 MG, 240 MG	$1	
SORINE ORAL TABLET 80 MG	$1	¥ (Can be filled for up to a 90 day supply)

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sotalol hcl (af) oral tablet 120 mg, 80 mg	$1	¥ (Can be filled for up to a 90 day supply)
sotalol hcl oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
SOTYLIZE ORAL SOLUTION	$3.65	
timolol maleate oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
CALCIUM CHANNEL BLOCKERS		
AFEDITAB CR ORAL TABLET EXTENDED RELEASE 24 HOUR 30 MG	$1	¥ (Can be filled for up to a 90 day supply)
AFEDITAB CR ORAL TABLET EXTENDED RELEASE 24 HOUR 60 MG	$1	
amlodipine besylate oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR 120 MG	$1	PA
CARTIA XT ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG	$1	¥ (Can be filled for up to a 90 day supply)
CARTIA XT ORAL CAPSULE EXTENDED RELEASE 24 HOUR 180 MG, 240 MG, 300 MG	$1	
COVERA-HS ORAL TABLET EXTENDED RELEASE 24 HOUR	$1	
dilt-cd oral capsule extended release 24 hour	$1	
diltiazem cd oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg	$1	
diltiazem hcl er beads oral capsule extended release 24 hour	$1	¥ (Can be filled for up to a 90 day supply)
diltiazem hcl er coated beads oral capsule extended release 24 hour	$1	¥ (Can be filled for up to a 90 day supply)
diltiazem hcl er coated beads oral tablet extended release 24 hour	$1	PA; ¥ (Can be filled for up to a 90 day supply)
diltiazem hcl er oral capsule extended release 12 hour	$1	¥ (Can be filled for up to a 90 day supply)
diltiazem hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg	$1	¥ (Can be filled for up to a 90 day supply)
diltiazem hcl oral tablet	$1	¥ (Can be filled for up to a 90 day supply)

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dilt-xr oral capsule extended release 24 hour 120 mg	$1	¥ (Can be filled for up to a 90 day supply)
dilt-xr oral capsule extended release 24 hour 180 mg, 240 mg	$1	
diltzac oral capsule extended release 24 hour	$1	
DYNACIRC CR ORAL TABLET EXTENDED RELEASE 24 HOUR	$1	
felodipine er oral tablet extended release 24 hour	$1	¥ (Can be filled for up to a 90 day supply)
isradipine oral capsule	$1	PA; ¥ (Can be filled for up to a 90 day supply)
MATZIM LA ORAL TABLET EXTENDED RELEASE 24 HOUR 180 MG, 240 MG, 300 MG, 420 MG	$1	PA
MATZIM LA ORAL TABLET EXTENDED RELEASE 24 HOUR 360 MG	$1	PA; ¥ (Can be filled for up to a 90 day supply)
nicardipine hcl oral capsule	$1	¥ (Can be filled for up to a 90 day supply)
NIFEDIAC CC ORAL TABLET EXTENDED RELEASE 24 HOUR 30 MG, 60 MG	$3.65	
NIFEDICAL XL ORAL TABLET EXTENDED RELEASE 24 HOUR 30 MG	$1	¥ (Can be filled for up to a 90 day supply)
NIFEDICAL XL ORAL TABLET EXTENDED RELEASE 24 HOUR 60 MG	$1	
nifedipine er oral tablet extended release 24 hour 30 mg, 60 mg	$1	¥ (Can be filled for up to a 90 day supply)
nifedipine er oral tablet extended release 24 hour 90 mg	$3.65	¥ (Can be filled for up to a 90 day supply)
nifedipine er osmotic release oral tablet extended release 24 hour	$1	¥ (Can be filled for up to a 90 day supply)
nifedipine oral capsule	$1	¥ (Can be filled for up to a 90 day supply)
nimodipine oral capsule	$1	PA; ¥ (Can be filled for up to a 90 day supply)
nisoldipine er oral tablet extended release 24 hour	$1	¥ (Can be filled for up to a 90 day supply)
NYMALIZE ORAL SOLUTION 6 MG/ML	$3.65	PA
TAZTIA XT ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG	$1	¥ (Can be filled for up to a 90 day supply)

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TAZTIA XT ORAL CAPSULE EXTENDED RELEASE 24 HOUR 180 MG, 240 MG, 300 MG, 360 MG	$1	
verapamil hcl er oral capsule extended release 24 hour	$1	¥ (Can be filled for up to a 90 day supply)
verapamil hcl er oral tablet extended release 120 mg, 180 mg, 240 mg	$1	¥ (Can be filled for up to a 90 day supply)
verapamil hcl oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
CARDIOTONICS		
DIGITEK ORAL TABLET 125 MCG	$3.65	¥ (Can be filled for up to a 90 day supply)
DIGITEK ORAL TABLET 250 MCG	$3.65	
DIGOX ORAL TABLET	$3.65	
digoxin oral solution	$3.65	¥ (Can be filled for up to a 90 day supply)
digoxin oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
LANOXIN ORAL TABLET 187.5 MCG, 62.5 MCG	$3.65	
CARDIOVASCULAR AGENTS - MISC.		
ADEMPAS ORAL TABLET	$3.65	PA; SP
ALYQ ORAL TABLET	$3.65	PA; SP; QL (60 EA per 30 days)
ambrisentan oral tablet	$3.65	PA; SP; QL (30 EA per 30 days)
amlodipine-atorvastatin oral tablet	$0	PA; ¥ (Can be filled for up to a 90 day supply)
BIDIL ORAL TABLET	$3.65	PA
bosentan oral tablet	$3.65	PA; SP; QL (60 EA per 30 days)
CORLANOR ORAL SOLUTION	$3.65	
CORLANOR ORAL TABLET	$3.65	
ENTRESTO ORAL TABLET	$3.65	
Epoprostenol Sodium Intravenous Solution Reconstituted	MB/RX	PA; SP
OPSUMIT ORAL TABLET	$3.65	PA; SP
ORENITRAM ORAL TABLET EXTENDED RELEASE	$3.65	PA; SP

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REMODULIN INJECTION SOLUTION 1 MG/ML, 10 MG/ML, 2.5 MG/ML, 5 MG/ML	$3.65	PA; SP
sildenafil citrate oral suspension reconstituted	$3.65	PA; SP
sildenafil citrate oral tablet 20 mg	$3.65	PA; SP; QL (90 EA per 30 days)
tadalafil (pah) oral tablet	$3.65	PA; SP; QL (60 EA per 30 days)
tadalafil oral tablet 5 mg	$3.65	PA; QL (30 EA per 30 days)
TRACLEER ORAL TABLET SOLUBLE	$3.65	PA; SP; QL (120 EA per 30 days)
TYVASO INHALATION SOLUTION	$3.65	PA; SP
TYVASO REFILL INHALATION SOLUTION	$3.65	PA; SP
TYVASO STARTER INHALATION SOLUTION	$3.65	PA; SP
UPTRAVI ORAL TABLET	$3.65	PA; SP
UPTRAVI ORAL TABLET THERAPY PACK	$3.65	PA; SP
VENTAVIS INHALATION SOLUTION	$3.65	PA; SP; QL (9 Vials per 1 day)
VYNDAMAX ORAL CAPSULE	$3.65	PA; SP; QL (30 EA per 30 days)
VYNDAQEL ORAL CAPSULE	$3.65	PA; SP; QL (120 EA per 30 days)
CEPHALOSPORINS		
CEDAX ORAL SUSPENSION RECONSTITUTED 90 MG/5ML	$3.65	
cefaclor er oral tablet extended release 12 hour	$3.65	
cefaclor oral capsule	$3.65	
cefaclor oral suspension reconstituted 125 mg/5ml, 250 mg/5ml	$3.65	
cefadroxil oral capsule	$3.65	
cefadroxil oral suspension reconstituted	$3.65	
cefadroxil oral tablet	$3.65	
cefdinir oral capsule	$3.65	
cefdinir oral suspension reconstituted	$3.65	
cefditoren pivoxil oral tablet	$3.65	
cefixime oral capsule	$3.65	
cefixime oral suspension reconstituted	$3.65	
cefpodoxime proxetil oral suspension reconstituted	$3.65	
cefpodoxime proxetil oral tablet	$3.65	

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cefprozil oral suspension reconstituted	$3.65	
cefprozil oral tablet	$3.65	
ceftibuten oral capsule	$3.65	
CEFTIN ORAL SUSPENSION RECONSTITUTED	$3.65	
CefTRIAXone Sodium Intravenous Solution Reconstituted 1 GM, 2 GM	MB/RX	
cefuroxime axetil oral tablet	$3.65	
cephalexin oral capsule	$3.65	
cephalexin oral suspension reconstituted	$3.65	
cephalexin oral tablet	$3.65	
SUPRAX ORAL SUSPENSION RECONSTITUTED 500 MG/5ML	$3.65	
SUPRAX ORAL TABLET CHEWABLE	$3.65	
CONTRACEPTIVES		
ALTAVERA ORAL TABLET	$0	
alyacen 1/35 oral tablet	$0	
alyacen 7/7/7 oral tablet	$0	
AMETHIA LO ORAL TABLET	$0	
AMETHIA ORAL TABLET	$0	
AMETHYST ORAL TABLET	$0	
APRI ORAL TABLET	$0	
ARANELLE ORAL TABLET	$0	
ASHLYNA ORAL TABLET	$0	
AUBRA ORAL TABLET	$0	
AVIANE ORAL TABLET	$0	
AZURETTE ORAL TABLET	$0	
BALZIVA ORAL TABLET	$0	
BEKYREE ORAL TABLET	$0	
BLISOVI 24 FE ORAL TABLET	$0	
BLISOVI FE 1.5/30 ORAL TABLET	$0	
BLISOVI FE 1/20 ORAL TABLET	$0	
briellyn oral tablet	$0	
CAMILA ORAL TABLET	$0	
CAMRESE LO ORAL TABLET	$0	

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CAMRESE ORAL TABLET	$0	
CAZIANT ORAL TABLET	$0	
CHATEAL ORAL TABLET	$0	
CRYSELLE-28 ORAL TABLET	$0	
CYCLAFEM 1/35 ORAL TABLET	$0	
CYCLAFEM 7/7/7 ORAL TABLET	$0	
CYRED ORAL TABLET	$0	
DASETTA 1/35 ORAL TABLET	$0	
DASETTA 7/7/7 ORAL TABLET	$0	
DAYSEE ORAL TABLET	$0	
DEBLITANE ORAL TABLET	$0	
DELYLA ORAL TABLET	$0	
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SUSPENSION	$0	
desogestrel-ethinyl estradiol oral tablet	$0	
drospiren-eth estrad-levomefol oral tablet	$0	
drospirenone-ethinyl estradiol oral tablet	$0	
ELINEST ORAL TABLET	$0	
ELLA ORAL TABLET	$0	
EMOQUETTE ORAL TABLET	$0	
ENPRESSE-28 ORAL TABLET	$0	
ENSKYCE ORAL TABLET 0.15-30 MG-MCG	$0	
ERRIN ORAL TABLET	$0	
ESTARYLLA ORAL TABLET	$0	
etonogestrel-ethinyl estradiol vaginal ring	$0	
FALMINA ORAL TABLET	$0	
FAYOSIM ORAL TABLET	$0	
GIANVI ORAL TABLET	$0	
GILDAGIA ORAL TABLET	$0	
GILDESS 1.5/30 ORAL TABLET	$0	
GILDESS 1/20 ORAL TABLET	$0	
GILDESS 24 FE ORAL TABLET	$0	
GILDESS FE 1.5/30 ORAL TABLET	$0	

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GILDESS FE 1/20 ORAL TABLET	$0	
HEATHER ORAL TABLET	$0	
INTROVALE ORAL TABLET	$0	
JENCYCLA ORAL TABLET	$0	
JOLESSA ORAL TABLET	$0	
JOLIVETTE ORAL TABLET	$0	
JULEBER ORAL TABLET	$0	
JUNEL 1.5/30 ORAL TABLET	$0	
JUNEL 1/20 ORAL TABLET	$0	
JUNEL FE 1.5/30 ORAL TABLET	$0	
JUNEL FE 1/20 ORAL TABLET	$0	
JUNEL FE 24 ORAL TABLET	$0	
KAITLIB FE ORAL TABLET CHEWABLE	$0	
KARIVA ORAL TABLET	$0	
KELNOR 1/35 ORAL TABLET	$0	
KIMIDESS ORAL TABLET	$0	
KURVELO ORAL TABLET	$0	
KYLEENA INTRAUTERINE INTRAUTERINE DEVICE	Medical Benefit	
LARIN 1.5/30 ORAL TABLET	$0	
LARIN 1/20 ORAL TABLET	$0	
LARIN 24 FE ORAL TABLET	$0	
LARIN FE 1.5/30 ORAL TABLET	$0	
LARIN FE 1/20 ORAL TABLET	$0	
LAYOLIS FE ORAL TABLET CHEWABLE	$0	
LEENA ORAL TABLET	$0	
LESSINA ORAL TABLET	$0	
LEVONEST ORAL TABLET	$0	
levonorgest-eth estrad 91-day oral tablet	$0	
levonorgestrel oral tablet	$0	
levonorgestrel-ethinyl estrad oral tablet	$0	
levonorg-eth estrad triphasic oral tablet	$0	
LEVORA 0.15/30 (28) ORAL TABLET	$0	
LO LOESTRIN FE ORAL TABLET	$0	

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Drug	Status	Notes
LOMEDIA 24 FE ORAL TABLET	$0	
LORYNA ORAL TABLET	$0	
LOW-OGESTREL ORAL TABLET	$0	
LUTERA ORAL TABLET	$0	
LYZA ORAL TABLET	$0	
marlissa oral tablet	$0	
MICROGESTIN 1.5/30 ORAL TABLET	$0	
MICROGESTIN 1/20 ORAL TABLET	$0	
MICROGESTIN 24 FE ORAL TABLET	$0	
MICROGESTIN FE 1.5/30 ORAL TABLET	$0	
MICROGESTIN FE 1/20 ORAL TABLET	$0	
MONO-LINYAH ORAL TABLET	$0	
MONONESSA ORAL TABLET	$0	
MY WAY ORAL TABLET	$0	
MYZILRA ORAL TABLET	$0	
NATAZIA ORAL TABLET	$0	
NECON 0.5/35 (28) ORAL TABLET	$0	
NECON 1/35 (28) ORAL TABLET	$0	
NECON 1/50 (28) ORAL TABLET	$0	
NECON 10/11 (28) ORAL TABLET	$0	
NECON 7/7/7 ORAL TABLET	$0	
NEXT CHOICE ONE DOSE ORAL TABLET	$0	
NEXT CHOICE ORAL TABLET	$0	
NIKKI ORAL TABLET	$0	
NORA-BE ORAL TABLET	$0	
norethin ace-eth estrad-fe oral capsule	$0	
norethin ace-eth estrad-fe oral tablet 1-20 mg-mcg, 1-20 mg-mcg(24)	$0	
norethin ace-eth estrad-fe oral tablet chewable	$0	
norethindrone acet-ethinyl est oral tablet 1-20 mg-mcg	$0	
norethindrone oral tablet	$0	
norethin-eth estradiol-fe oral tablet chewable 0.8-25 mg-mcg	$0	

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Drug	Status	Notes
norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	$0	
norgestim-eth estrad triphasic oral tablet	$0	
norgestrel-ethinyl estradiol oral tablet	$0	
NORLYROC ORAL TABLET	$0	
NORTREL 0.5/35 (28) ORAL TABLET	$0	
NORTREL 1/35 (21) ORAL TABLET	$0	
NORTREL 1/35 (28) ORAL TABLET	$0	
NORTREL 7/7/7 ORAL TABLET	$0	
OCELLA ORAL TABLET	$0	
OGESTREL ORAL TABLET	$0	
ORSYTHIA ORAL TABLET	$0	
PHILITH ORAL TABLET	$0	
PIMTREA ORAL TABLET	$0	
PIRMELLA 1/35 ORAL TABLET	$0	
PIRMELLA 7/7/7 ORAL TABLET	$0	
PORTIA-28 ORAL TABLET	$0	
PREVIFEM ORAL TABLET	$0	
QUASENSE ORAL TABLET	$0	
RECLIPSEN ORAL TABLET	$0	
SETLAKIN ORAL TABLET	$0	
SHAROBEL ORAL TABLET	$0	
SPRINTEC 28 ORAL TABLET	$0	
SRONYX ORAL TABLET	$0	
SYEDA ORAL TABLET	$0	
TARINA FE 1/20 ORAL TABLET	$0	
TILIA FE ORAL TABLET	$0	
TRI-ESTARYLLA ORAL TABLET	$0	
TRI-LEGEST FE ORAL TABLET	$0	
TRI-LINYAH ORAL TABLET	$0	
TRI-LO-ESTARYLLA ORAL TABLET	$0	
TRI-LO-MARZIA ORAL TABLET	$0	
TRI-LO-SPRINTEC ORAL TABLET	$0	
TRINESSA (28) ORAL TABLET	$0	

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Drug	Status	Notes
TRINESSA LO ORAL TABLET	$0	
TRI-PREVIFEM ORAL TABLET	$0	
TRI-SPRINTEC ORAL TABLET	$0	
TRIVORA (28) ORAL TABLET	$0	
VELIVET ORAL TABLET	$0	
VESTURA ORAL TABLET	$0	
VIENVA ORAL TABLET	$0	
viorele oral tablet	$0	
VYFEMLA ORAL TABLET	$0	
WERA ORAL TABLET	$0	
WYMZYA FE ORAL TABLET CHEWABLE	$0	
XULANE TRANSDERMAL PATCH WEEKLY	$0	
ZARAH ORAL TABLET	$0	
ZENCHENT FE ORAL TABLET CHEWABLE	$0	
ZENCHENT ORAL TABLET	$0	
ZOVIA 1/35E (28) ORAL TABLET	$0	
ZOVIA 1/50E (28) ORAL TABLET	$0	
CORTICOSTEROIDS		
budesonide er oral tablet extended release 24 hour	$3.65	PA
budesonide oral capsule delayed release particles	$3.65	
cortisone acetate oral tablet	$3.65	
DELTASONE ORAL TABLET	$3.65	
DEXAMETHASONE INTENSOL ORAL CONCENTRATE	$3.65	
dexamethasone oral elixir	$3.65	
dexamethasone oral solution	$3.65	
dexamethasone oral tablet	$3.65	
DEXPAK 10 DAY ORAL TABLET THERAPY PACK	$3.65	
DEXPAK 13 DAY ORAL TABLET THERAPY PACK	$3.65	
DEXPAK 6 DAY ORAL TABLET THERAPY PACK	$3.65	

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Drug	Status	Notes
EMFLAZA ORAL SUSPENSION	$3.65	PA; QL (26 ML per 30 days)
EMFLAZA ORAL TABLET	$3.65	PA; QL (30 EA per 30 days)
fludrocortisone acetate oral tablet	$3.65	
hydrocortisone oral tablet	$3.65	
KENALOG INJECTION SUSPENSION	$3.65	
MEDROL ORAL TABLET 2 MG	$3.65	
methylprednisolone oral tablet	$3.65	
methylprednisolone oral tablet therapy pack	$3.65	
methylprednisolone sodium succ injection solution reconstituted 125 mg, 40 mg	$3.65	
MILLIPRED DP 12-DAY ORAL TABLET THERAPY PACK	$3.65	
MILLIPRED DP ORAL TABLET THERAPY PACK	$3.65	
MILLIPRED ORAL TABLET	$3.65	
ORTIKOS ORAL CAPSULE EXTENDED RELEASE 24 HOUR	$3.65	PA
prednisolone oral solution	$3.65	
prednisolone oral syrup 15 mg/5ml	$3.65	
prednisolone sodium phosphate oral solution 15 mg/5ml, 25 mg/5ml, 6.7 (5 base) mg/5ml	$3.65	
prednisolone sodium phosphate oral tablet dispersible	$3.65	
PREDNISONE INTENSOL ORAL CONCENTRATE	$3.65	
prednisone oral solution	$3.65	
prednisone oral tablet	$3.65	
prednisone oral tablet therapy pack	$3.65	
SOLU-CORTEF INJECTION SOLUTION RECONSTITUTED 100 MG, 1000 MG	$3.65	
COUGH/COLD/ALLERGY		
acetylcysteine inhalation solution	$3.65	
benzonatate oral capsule	$3.65	
CLARINEX-D 12 HOUR ORAL TABLET EXTENDED RELEASE 12 HOUR	$3.65	PA
GILPHEX TR ORAL TABLET	$3.65	

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Drug	Status	Notes
guaifenesin er oral tablet extended release 12 hour 600 mg	$3.65	
guaifenesin-codeine oral solution	$3.65	QL (60 ML per 1 day)
HYPERSAL INHALATION NEBULIZATION SOLUTION 3.5 %	$3.65	
NEBUSAL INHALATION NEBULIZATION SOLUTION 6 %	$3.65	
nortuss-ex oral liquid	$3.65	
phenyleph-promethazine-cod oral syrup	$3.65	QL (30 ML per 1 day)
phenylephrine-guaifenesin oral liquid	$3.65	
promethazine vc plain oral syrup	$3.65	
promethazine vc/codeine oral syrup	$3.65	QL (30 ML per 1 day)
promethazine-codeine oral solution	$3.65	QL (30 ML per 1 day)
promethazine-codeine oral syrup	$3.65	QL (30 ML per 1 day)
promethazine-dm oral syrup	$3.65	
promethazine-phenylephrine oral syrup	$3.65	
PULMOSAL INHALATION NEBULIZATION SOLUTION	$3.65	
SEMPREX-D ORAL CAPSULE	$3.65	PA
DERMATOLOGICALS		
8-MOP ORAL CAPSULE	$3.65	
ABSORICA LD ORAL CAPSULE	$3.65	PA
acitretin oral capsule	$3.65	
acne medication 5 external gel	$3.65	
acyclovir external cream	$3.65	PA; QL (5 GM per 1 Fill)
acyclovir external ointment	$3.65	
ACZONE EXTERNAL GEL 7.5 %	$3.65	PA; QL (60 GM per 30 days)
adapalene external cream	$3.65	STPA
adapalene external gel	$3.65	STPA
adapalene external lotion	$3.65	STPA
ala-cort external cream 1 %	$3.65	
alclometasone dipropionate external cream	$3.65	
alclometasone dipropionate external ointment	$3.65	
alphatrex external gel	$3.65	
ALTABAX EXTERNAL OINTMENT	$3.65	STPA; QL (15 GM per 1 Fill)

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Drug	Status	Notes
ALTRENO EXTERNAL LOTION	$3.65	PA
amcinonide external cream	$3.65	PA
amcinonide external lotion	$3.65	PA
amcinonide external ointment	$3.65	PA
ammonium lactate external cream	$3.65	
ammonium lactate external lotion	$3.65	
AMNESTEEM ORAL CAPSULE	$3.65	PA
APEXICON E EXTERNAL CREAM	$3.65	PA
AVAR CLEANSER EXTERNAL EMULSION	$3.65	
AVITA EXTERNAL CREAM	$3.65	PA; ¥ (PA Applies to Members 26 years and older); Preferred in class
AVITA EXTERNAL GEL	$3.65	PA; ¥ (PA Applies to Members 26 years and older); Preferred in class
azelaic acid external gel	$3.65	
AZELEX EXTERNAL CREAM	$3.65	PA; QL (30 grams per 1 fill)
benzoyl peroxide cleanser external liquid	$3.65	Preferred in class
benzoyl peroxide creamy wash external liquid† 4 %	$3.65	
benzoyl peroxide external gel 10 %, 2.5 %, 5 %	$3.65	
benzoyl peroxide wash external liquid	$3.65	
benzoyl peroxide-erythromycin external gel	$3.65	PA
betamethasone dipropionate aug external cream	$3.65	
betamethasone dipropionate aug external gel	$3.65	
betamethasone dipropionate aug external lotion	$3.65	
betamethasone dipropionate aug external ointment	$3.65	
betamethasone dipropionate external cream	$3.65	
betamethasone dipropionate external lotion	$3.65	
betamethasone dipropionate external ointment	$3.65	
betamethasone valerate external cream	$3.65	
betamethasone valerate external foam	$3.65	
betamethasone valerate external lotion	$3.65	
betamethasone valerate external ointment	$3.65	
bp foaming wash external liquid	$3.65	
bp wash external liquid 10 %, 5 %	$3.65	

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Drug	Status	Notes
bp wash external liquid 2.5 %	$3.65	PA
bpo external gel	$3.65	PA
BRYHALI EXTERNAL LOTION	$3.65	PA
calcipotriene external cream	$3.65	
calcipotriene external ointment	$3.65	
calcipotriene external solution	$3.65	
calcipotriene-betameth diprop external ointment	$3.65	PA
CALCITRENE EXTERNAL OINTMENT	$3.65	
calcitriol external ointment	$3.65	
CAPEX EXTERNAL SHAMPOO	$3.65	PA
CENTANY EXTERNAL OINTMENT	$3.65	
CEROVEL EXTERNAL LOTION	$3.65	
CICLODAN EXTERNAL CREAM	$3.65	
CICLODAN EXTERNAL SOLUTION	$3.65	
ciclopirox external gel	$3.65	
ciclopirox external shampoo	$3.65	PA
ciclopirox external solution	$3.65	
ciclopirox olamine external cream	$3.65	
ciclopirox olamine external suspension	$3.65	PA
CIDALEAZE EXTERNAL CREAM	$3.65	
CLARAVIS ORAL CAPSULE	$3.65	PA
CLEARPLEX X EXTERNAL GEL	$3.65	
CLINDAMAX EXTERNAL GEL	$3.65	
clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-5 %	$3.65	PA
clindamycin phosphate external foam	$3.65	PA
clindamycin phosphate external gel	$3.65	
clindamycin phosphate external lotion	$3.65	
clindamycin phosphate external solution	$3.65	
clindamycin phosphate external swab	$3.65	
clobetasol prop emollient base external cream	$3.65	
clobetasol propionate e external cream	$3.65	
clobetasol propionate external cream	$3.65	PA
clobetasol propionate external foam	$3.65	

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clobetasol propionate external gel	$3.65	PA
clobetasol propionate external liquid	$3.65	PA
clobetasol propionate external lotion	$3.65	
clobetasol propionate external ointment	$3.65	PA
clobetasol propionate external shampoo	$3.65	
clobetasol propionate external solution	$3.65	PA
clocortolone pivalate external cream	$3.65	PA
clocortolone pivalate pump external cream	$3.65	PA
CLODAN EXTERNAL SHAMPOO	$3.65	
clotrimazole anti-fungal external cream	$3.65	
clotrimazole external cream	$3.65	
clotrimazole external solution	$3.65	
clotrimazole-betamethasone external cream	$3.65	
clotrimazole-betamethasone external lotion	$3.65	
CONDYLOX EXTERNAL GEL	$3.65	
COPASIL EXTERNAL GEL	$3.65	
CORDRAN EXTERNAL OINTMENT	$3.65	PA
CORDRAN EXTERNAL TAPE	$3.65	PA
CORMAX SCALP APPLICATION EXTERNAL SOLUTION	$3.65	PA
CORTISPORIN EXTERNAL CREAM	$3.65	
COSENTYX (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	$3.65	PA; SP; QL (2 Syringes per 28 days)
COSENTYX SENSOREADY (300 MG) SUBCUTANEOUS SOLUTION AUTO-INJECTOR	$3.65	PA; SP; QL (2 Syringes per 28 days)
COSENTYX SENSOREADY PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML	$3.65	PA; SP; QL (1 Syringe per 28 days)
COSENTYX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML	$3.65	PA; SP; QL (1 Syringe per 28 days)
dapsone external gel 5 %	$3.65	PA
DENAVIR EXTERNAL CREAM	$3.65	PA; QL (5 GM per 1 Fill)
desonide external cream	$3.65	PA
desonide external lotion	$3.65	PA

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desonide external ointment	$3.65	PA
desoximetasone external cream 0.05 %	$3.65	PA
desoximetasone external cream 0.25 %	$3.65	
desoximetasone external gel	$3.65	
desoximetasone external ointment 0.05 %	$3.65	PA
desoximetasone external ointment 0.25 %	$3.65	
diclofenac epolamine transdermal patch	$3.65	PA; ¥ (Max of 3 months); QL (60 EA per 30 days)
diclofenac sodium transdermal gel 1 %	$3.65	QL (200 GM per 30 days)
diclofenac sodium transdermal gel 3 %	$3.65	¥ (Max of 90 days per year); QL (200 GM per 30 days)
diclofenac sodium transdermal solution	$3.65	PA
DIFFERIN EXTERNAL GEL 0.1 %	$3.65	^ (OTC only)
diflorasone diacetate external cream	$3.65	PA
diflorasone diacetate external ointment	$3.65	PA
doxepin hcl external cream	$3.65	QL (45 grams per 1 Fill)
DRITHO-CREME HP EXTERNAL CREAM	$3.65	
DRYSOL EXTERNAL SOLUTION	$3.65	
DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR 200 MG/1.14ML	$3.65	PA; SP; QL (2 Syringes per 28 days)
DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 MG/2ML	$3.65	PA; SP; QL (2 syringes per 28 days)
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/1.14ML, 300 MG/2ML	$3.65	PA; SP; QL (2 syringes per 28 days)
econazole nitrate external cream	$3.65	
ECOZA EXTERNAL FOAM	$3.65	PA
ELIDEL EXTERNAL CREAM	$3.65	Brand Preferred
EPIFOAM EXTERNAL FOAM	$3.65	
erythromycin external gel	$3.65	
erythromycin external solution	$3.65	
EUCRISA EXTERNAL OINTMENT	$3.65	PA; Preferred product; QL (60 GM per 30 days)
EURAX EXTERNAL CREAM	$3.65	
EURAX EXTERNAL LOTION	$3.65	
EXELDERM EXTERNAL CREAM	$3.65	PA

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EXELDERM EXTERNAL SOLUTION	$3.65	PA
FABIOR EXTERNAL FOAM	$3.65	PA
FINACEA EXTERNAL FOAM	$3.65	PA
FIRST-HYDROCORTISONE EXTERNAL GEL	$3.65	
fluocinolone acetonide body external oil	$3.65	
fluocinolone acetonide external cream	$3.65	
fluocinolone acetonide external ointment	$3.65	
fluocinolone acetonide external solution	$3.65	
fluocinolone acetonide scalp external oil	$3.65	
fluocinonide external cream 0.05 %	$3.65	
fluocinonide external cream 0.1 %	$3.65	PA
fluocinonide external gel	$3.65	
fluocinonide external ointment	$3.65	
fluocinonide external solution	$3.65	
FLUOROPLEX EXTERNAL CREAM	$3.65	
fluorouracil external cream	$3.65	
fluorouracil external solution	$3.65	
flurandrenolide external cream	$3.65	PA
flurandrenolide external lotion	$3.65	PA
fluticasone propionate external cream	$3.65	
fluticasone propionate external lotion	$3.65	
fluticasone propionate external ointment	$3.65	
GEBAUERS PAIN EASE EXTERNAL AEROSOL	$3.65	
GEBAUERS SPRAY AND STRETCH EXTERNAL AEROSOL	$3.65	
gentamicin sulfate external cream	$3.65	
gentamicin sulfate external ointment	$3.65	
GLYDO EXTERNAL GEL	$3.65	
gordons urea external ointment 40 %	$3.65	
halcinonide external cream	$3.65	PA
halobetasol propionate external cream	$3.65	PA
halobetasol propionate external ointment	$3.65	PA
HALOG EXTERNAL OINTMENT	$3.65	PA

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hydrocortisone ace-pramoxine external cream 2.5-1 %	$3.65	
hydrocortisone butyrate external cream	$3.65	PA
hydrocortisone butyrate external lotion	$3.65	
hydrocortisone butyrate external ointment	$3.65	PA
hydrocortisone butyrate external solution	$3.65	PA
hydrocortisone external cream 1 %, 2.5 %	$3.65	
hydrocortisone external lotion 1 %, 2.5 %	$3.65	
hydrocortisone external ointment 1 %, 2.5 %	$3.65	
hydrocortisone valerate external cream	$3.65	
hydrocortisone valerate external ointment	$3.65	
Ilumya Subcutaneous Solution Prefilled Syringe	MB/RX	PA
imiquimod external cream 3.75 %	$3.65	PA; QL (28 EA per 14 days)
imiquimod external cream 5 %	$3.65	
imiquimod pump external cream	$3.65	PA; QL (7.5 GM per 14 days)
isotretinoin oral capsule	$3.65	PA
ivermectin external cream	$3.65	PA
ivermectin external lotion	$3.65	STPA
JUBLIA EXTERNAL SOLUTION	$3.65	PA
K.B.G.L IN TERODERM EXTERNAL CREAM	$3.65	
ketoconazole external cream	$3.65	
ketoconazole external foam	$3.65	
ketoconazole external shampoo 2 %	$3.65	
KETODAN EXTERNAL FOAM	$3.65	
kp clotrimazole external cream	$3.65	
LAMISIL SPRAY EXTERNAL SOLUTION	$3.65	
LATRIX EXTERNAL SUSPENSION	$3.65	
lavare wound wash external gel	$3.65	
LEXETTE EXTERNAL FOAM	$3.65	PA
LICART TRANSDERMAL PATCH 24 HOUR	$3.65	PA; QL (30 EA per 30 days)
lidocaine external ointment 5 %	$3.65	QL (50 GM per 30 days)
lidocaine external patch 5 %	$3.65	
lidocaine hcl external cream 3 %	$3.65	

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lidocaine hcl external gel 2 %	$3.65	
lidocaine hcl external lotion	$3.65	
lidocaine hcl external solution	$3.65	
lidocaine-prilocaine external cream	$3.65	
lidocaine-prilocaine external kit	$3.65	
lidopin external cream 3 %	$3.65	
LIDOPROFEN EXTERNAL CREAM	$3.65	
lindane external lotion	$3.65	
lindane external shampoo	$3.65	
LOKARA EXTERNAL LOTION	$3.65	PA
luliconazole external cream	$3.65	PA
malathion external lotion	$3.65	
methoxsalen rapid oral capsule	$3.65	
metronidazole external cream	$3.65	
metronidazole external gel	$3.65	
metronidazole external lotion	$3.65	
MICROCYN EXTERNAL GEL	$3.65	
MICROCYN SKIN AND WOUND EXTERNAL GEL	$3.65	
MIRVASO EXTERNAL GEL	$3.65	PA
mometasone furoate external cream	$3.65	
mometasone furoate external ointment	$3.65	
mometasone furoate external solution	$3.65	
mupirocin calcium external cream	$3.65	PA
mupirocin external ointment	$3.65	
MYORISAN ORAL CAPSULE	$3.65	PA
naftifine hcl external cream	$3.65	PA
NAFTIN EXTERNAL GEL 1 %	$3.65	PA
napro external cream	$3.65	
NEUAC EXTERNAL GEL	$3.65	PA
NORITATE EXTERNAL CREAM	$3.65	PA
NYAMYC EXTERNAL POWDER	$3.65	
nystatin external cream	$3.65	
nystatin external ointment	$3.65	

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nystatin external powder	$3.65	
nystatin-triamcinolone external cream	$3.65	
nystatin-triamcinolone external ointment	$3.65	
NYSTOP EXTERNAL POWDER	$3.65	
oxiconazole nitrate external cream	$3.65	PA
OXISTAT EXTERNAL LOTION	$3.65	PA
OXSORALEN EXTERNAL LOTION	$3.65	
PANDEL EXTERNAL CREAM	$3.65	
PANRETIN EXTERNAL GEL	$3.65	PA
PENNSAID TRANSDERMAL SOLUTION 2 %	$3.65	PA
permethrin external cream	$3.65	
PICATO EXTERNAL GEL	$3.65	PA; QL (1 Box per 1 Rx)
podofilox external solution	$3.65	
PRAMOSONE E EXTERNAL CREAM	$3.65	
PRAMOSONE EXTERNAL CREAM 1-1 %	$3.65	
PRAMOSONE EXTERNAL LOTION	$3.65	
PRAMOSONE EXTERNAL OINTMENT	$3.65	
PRASCION EXTERNAL EMULSION	$3.65	
prednicarbate external cream	$3.65	
premium lidocaine external ointment	$3.65	QL (50 GM per 30 days)
PROTOPIC EXTERNAL OINTMENT	$3.65	Brand Preferred
psorcon external cream	$3.65	PA
QBREXZA EXTERNAL PAD	$3.65	PA; QL (1 EA per 1 day)
REA LO 40 EXTERNAL CREAM	$3.65	
REA LO 40 EXTERNAL LOTION	$3.65	
REGRANEX EXTERNAL GEL	$3.65	
REMEVEN EXTERNAL CREAM	$3.65	
RETIN-A MICRO PUMP EXTERNAL GEL 0.08 %	$3.65	PA
rexaphenac transdermal cream	$3.65	
ROSADAN EXTERNAL CREAM	$3.65	
ROSADAN EXTERNAL GEL	$3.65	
ROSANIL CLEANSER EXTERNAL EMULSION	$3.65	

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Drug	Status	Notes
SANTYL EXTERNAL OINTMENT	$3.65	QL (30 GM per 1 Rx)
SCENESSE SUBCUTANEOUS IMPLANT	Medical Benefit	PA
selenium sulfide external lotion	$3.65	
selenium sulfide external shampoo 2.25 %	$3.65	
selenium sulf-pyrithione-urea external shampoo	$3.65	
SELRX EXTERNAL SHAMPOO	$3.65	
SILIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	$3.65	PA; SP; QL (3 ML per 28 days)
silver sulfadiazine external cream	$3.65	
SKYRIZI (150 MG DOSE) SUBCUTANEOUS PREFILLED SYRINGE KIT	$3.65	PA; SP; QL (2 EA per 84 days)
SOLARAZE TRANSDERMAL GEL	$3.65	¥ (Max of 90 days per year); QL (200 GM per 30 days)
spinosad external suspension	$3.65	STPA; QL (120 ML per 1 Fill)
SSD EXTERNAL CREAM	$3.65	
Stelara Subcutaneous Solution 45 MG/0.5ML	MB/RX	PA; Preferred product; QL (4 Vials per 1 Lifetime)
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	$3.65	PA; SP; Preferred product; QL (1 Syringe per 84 days)
sulfacetamide sodium (acne) external lotion	$3.65	
sulfacetamide sodium external suspension	$3.65	
sulfacetamide sodium-sulfur external emulsion	$3.65	
sulfacetamide sodium-sulfur external lotion 10-5 %	$3.65	
SULFAMYLON EXTERNAL CREAM	$3.65	PA
SYNALAR (CREAM) EXTERNAL KIT	$3.65	PA
SYNALAR (OINTMENT) EXTERNAL KIT	$3.65	PA
TACLONEX EXTERNAL SUSPENSION	$3.65	PA
TALTZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR	$3.65	PA; SP; ¥ (One 80 mg auto-injector/syringe per 28 days); Preferred product; QL (1 Injection per 28 days)
TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	$3.65	PA; SP; ¥ (One 80 mg auto-injector/syringe per 28 days); Preferred product; QL (1 Injection per 28 days)
TARGRETIN EXTERNAL GEL	$3.65	

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Drug	Status	Notes
tazarotene external cream	$3.65	PA; STPA
TAZORAC EXTERNAL CREAM 0.05 %	$3.65	STPA
TAZORAC EXTERNAL GEL	$3.65	STPA
TERSI EXTERNAL FOAM	$3.65	
TREMFYA SUBCUTANEOUS SOLUTION PEN-INJECTOR	$3.65	PA; SP; QL (1 ML per 54 days)
TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	$3.65	PA; SP; QL (1 ML per 54 days)
tretinoin external cream	$3.65	PA; ¥ (PA Applies to Members 26 years and older); Preferred in class
tretinoin external gel 0.01 %, 0.025 %	$3.65	PA; ¥ (PA Applies to Members 26 years and older); Preferred in class
tretinoin external gel 0.05 %	$3.65	PA
tretinoin microsphere external gel	$3.65	PA
tretinoin microsphere pump external gel	$3.65	PA
triamcinolone acetonide external aerosol solution	$3.65	PA
triamcinolone acetonide external cream	$3.65	
triamcinolone acetonide external lotion	$3.65	
triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	$3.65	
TRIDERM EXTERNAL CREAM 0.1 %	$3.65	
U-KERA E EXTERNAL CREAM	$3.65	
ULESFIA EXTERNAL LOTION	$3.65	PA; QL (12 Bottles per 1 Rx)
UMECTA EXTERNAL EMULSION	$3.65	
urea external cream 40 %, 50 %	$3.65	
urea external lotion 40 %	$3.65	
urea external suspension	$3.65	
urea nail film external suspension	$3.65	
urea-c40 external lotion	$3.65	
ure-k external cream	$3.65	
VALCHLOR EXTERNAL GEL	$3.65	
VEREGEN EXTERNAL OINTMENT	$3.65	PA
VOLTAREN TRANSDERMAL GEL	$3.65	^ (OTC only); QL (200 grams per 30 days)
WINLEVI EXTERNAL CREAM	$3.65	PA

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Drug	Status	Notes
XEPI EXTERNAL CREAM	$3.65	PA; QL (30 GM per 1 Fill)
XERAC AC EXTERNAL SOLUTION	$3.65	
XOLEGEL EXTERNAL GEL	$3.65	
ZENATANE ORAL CAPSULE	$3.65	PA
ZYCLARA PUMP EXTERNAL CREAM 2.5 %	$3.65	PA; QL (2 pumps per 1 day)
DIAGNOSTIC PRODUCTS		
FREESTYLE INSULINX TEST IN VITRO STRIP	$0	Preferred product; QL (300 EA per 30 days)
FREESTYLE LITE TEST IN VITRO STRIP	$0	Preferred product; QL (300 EA per 30 days)
FREESTYLE PRECISION NEO TEST IN VITRO STRIP	$0	PA; Preferred product; QL (300 EA per 30 days)
FREESTYLE TEST IN VITRO STRIP	$0	Preferred product; QL (300 EA per 30 days)
PRECISION XTRA BLOOD GLUCOSE IN VITRO STRIP	$0	Preferred product; QL (300 EA per 30 days)
Thyrogen Intramuscular Solution Reconstituted 1.1 MG	MB/RX	SP
DIGESTIVE AIDS		
CREON ORAL CAPSULE DELAYED RELEASE PARTICLES	$3.65	
VIOKACE ORAL TABLET	$3.65	
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES	$3.65	
DIURETICS		
acetazolamide er oral capsule extended release 12 hour	$3.65	¥ (Can be filled for up to a 90 day supply)
acetazolamide oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
ALDACTAZIDE ORAL TABLET 50-50 MG	$1	¥ (Can be filled for up to a 90 day supply)
amiloride hcl oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
amiloride-hydrochlorothiazide oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
bumetanide oral tablet	$1	¥ (Can be filled for up to a 90 day supply)

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chlorothiazide oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
chlorthalidone oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
DIURIL ORAL SUSPENSION	$3.65	
Ethacrynate Sodium Intravenous Solution Reconstituted	MB/RX	
furosemide injection solution 10 mg/ml	$1	
furosemide oral solution 10 mg/ml, 8 mg/ml	$1	¥ (Can be filled for up to a 90 day supply)
furosemide oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
hydrochlorothiazide oral capsule	$1	¥ (Can be filled for up to a 90 day supply)
hydrochlorothiazide oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
indapamide oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
INTROL ORAL SOLUTION	$1	
KEVEYIS ORAL TABLET	$3.65	PA
methazolamide oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
methyclothiazide oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
metolazone oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
spironolactone oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
spironolactone-hctz oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
THALITONE ORAL TABLET	$1	
torsemide oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
triamterene oral capsule	$3.65	¥ (Can be filled for up to a 90 day supply)
triamterene-hctz oral capsule	$1	¥ (Can be filled for up to a 90 day supply)

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triamterene-hctz oral tablet	$1	¥ (Can be filled for up to a 90 day supply)
ENDOCRINE AND METABOLIC AGENTS - MISC.		
ACTHAR INJECTION GEL	$3.65	PA; SP
Aldurazyme Intravenous Solution	MB/RX	PA; SP
alendronate sodium oral tablet 10 mg, 5 mg	$3.65	¥ (Can be filled for up to a 90 day supply); QL (1 EA per 1 day)
alendronate sodium oral tablet 35 mg, 70 mg	$3.65	¥ (Can be filled for up to a 90 day supply); QL (4 EA per 28 days)
alendronate sodium oral tablet 40 mg	$3.65	¥ (Can be filled for up to a 90 day supply); QL (1 EA per 6 Months)
Brineura Solution	MB/RX	PA
BYNFEZIA PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	$3.65	PA; SP
cabergoline oral tablet	$3.65	
calcitonin (salmon) nasal solution	$3.65	¥ (Can be filled for up to a 90 day supply)
calcitriol oral capsule	$3.65	¥ (Can be filled for up to a 90 day supply)
calcitriol oral solution	$3.65	¥ (Can be filled for up to a 90 day supply)
CARBAGLU ORAL TABLET	$3.65	PA
cinacalcet hcl oral tablet	$3.65	STPA; SP
Crysvita Subcutaneous Solution	MB/RX	PA
desmopressin ace rhinal tube nasal solution	$3.65	
desmopressin ace spray refrig nasal solution	$3.65	
desmopressin acetate oral tablet	$3.65	
desmopressin acetate spray nasal solution	$3.65	
doxercalciferol oral capsule	$3.65	¥ (Can be filled for up to a 90 day supply)
EGRIFTA SUBCUTANEOUS SOLUTION RECONSTITUTED	$3.65	PA; SP
Elaprase Intravenous Solution	MB/RX	SP
etidronate disodium oral tablet	$3.65	
Evenity Subcutaneous Solution Prefilled Syringe	MB/RX	PA
Fabrazyme Intravenous Solution Reconstituted	MB/RX	PA; SP

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FENSOLVI (6 MONTH) SUBCUTANEOUS KIT	Medical Benefit	PA
FORTICAL NASAL SOLUTION	$3.65	
FOSAMAX PLUS D ORAL TABLET	$3.65	PA; QL (4 EA per 28 days)
GALAFOLD ORAL CAPSULE	$3.65	PA
GENOTROPIN MINIQUICK SUBCUTANEOUS SOLUTION RECONSTITUTED	$3.65	PA; SP; Preferred product
GENOTROPIN SUBCUTANEOUS SOLUTION RECONSTITUTED	$3.65	PA; SP; Preferred product
HUMATROPE INJECTION SOLUTION RECONSTITUTED	$3.65	PA; SP
Ibandronate Sodium Intravenous Solution 3 MG/3ML	MB/RX	QL (3 ML per 90 days)
ibandronate sodium oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply); QL (1 EA per 28 days)
INCRELEX SUBCUTANEOUS SOLUTION	$3.65	PA; SP
ISTURISA ORAL TABLET	$3.65	PA
JYNARQUE ORAL TABLET	$3.65	
JYNARQUE ORAL TABLET THERAPY PACK 45 & 15 MG, 60 & 30 MG, 90 & 30 MG	$3.65	
KANUMA INTRAVENOUS SOLUTION	Medical Benefit	PA; SP
KERENDIA ORAL TABLET	$3.65	PA; QL (30 EA per 30 days)
levocarnitine oral solution	$3.65	
levocarnitine oral tablet	$3.65	
Lumizyme Intravenous Solution Reconstituted	MB/RX	SP
Lupron Depot-Ped (1-Month) Intramuscular Kit	MB/RX	PA; SP
Lupron Depot-Ped (3-Month) Intramuscular Kit	MB/RX	PA; SP
MIACALCIN INJECTION SOLUTION	$3.65	
MYALEPT SUBCUTANEOUS SOLUTION RECONSTITUTED	$3.65	PA; QL (30 Vials per 30 days)
MYCAPSSA ORAL CAPSULE DELAYED RELEASE	$3.65	PA
Naglazyme Intravenous Solution	MB/RX	SP
NATPARA SUBCUTANEOUS CARTRIDGE	$3.65	SP; QL (2 Cartridges per 21 days)
nitisinone oral capsule	$3.65	

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NITYR ORAL TABLET	$3.65	PA
NORDITROPIN FLEXPRO SUBCUTANEOUS SOLUTION	$3.65	PA; SP
NULIBRY INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA
NUTROPIN AQ NUSPIN 10 SUBCUTANEOUS SOLUTION	$3.65	PA; SP
NUTROPIN AQ NUSPIN 20 SUBCUTANEOUS SOLUTION	$3.65	PA; SP
NUTROPIN AQ NUSPIN 5 SUBCUTANEOUS SOLUTION	$3.65	PA; SP
octreotide acetate injection solution 100 mcg/ml, 1000 mcg/ml, 200 mcg/ml, 50 mcg/ml, 500 mcg/ml	$3.65	PA; SP; QL (30 ML per 30 days)
OMNITROPE SUBCUTANEOUS SOLUTION	$3.65	PA; SP
OMNITROPE SUBCUTANEOUS SOLUTION RECONSTITUTED	$3.65	PA; SP
ORFADIN ORAL CAPSULE 20 MG	$3.65	PA
ORFADIN ORAL SUSPENSION	$3.65	PA
ORILISSA ORAL TABLET 150 MG	$3.65	PA; QL (30 EA per 30 days)
ORILISSA ORAL TABLET 200 MG	$3.65	PA; QL (60 EA per 30 days)
OSPHENA ORAL TABLET	$3.65	PA
PALYNZIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.5ML, 2.5 MG/0.5ML	$3.65	PA; SP
PALYNZIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML	$3.65	PA; SP; QL (1 ML per 1 day)
Pamidronate Disodium Intravenous Solution	MB/RX	
Pamidronate Disodium Intravenous Solution Reconstituted	MB/RX	
paricalcitol oral capsule	$3.65	PA
Prolia Subcutaneous Solution	MB/RX	PA; SP; QL (1 syringe per 180 days)
raloxifene hcl oral tablet	$0	¥ (Can be filled for up to a 90 day supply)
RAVICTI ORAL LIQUID	$3.65	PA; SP

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risedronate sodium oral tablet 150 mg	$3.65	PA; ¥ (Can be filled for up to a 90 day supply); QL (1 EA per 30 days)
risedronate sodium oral tablet 30 mg, 5 mg	$3.65	PA; ¥ (Can be filled for up to a 90 day supply); QL (1 EA per 1 day)
risedronate sodium oral tablet 35 mg	$3.65	PA; ¥ (Can be filled for up to a 90 day supply); QL (4 EA per 28 days)
risedronate sodium oral tablet delayed release	$3.65	PA; ¥ (Can be filled for up to a 90 day supply); QL (4 EA per 28 days)
SAIZEN CLICK.EASY INJECTION SOLUTION RECONSTITUTED	$3.65	PA; SP
SAIZEN INJECTION SOLUTION RECONSTITUTED	$3.65	PA; SP
SAIZENPREP INJECTION SOLUTION RECONSTITUTED	$3.65	PA; SP
SandoSTATIN LAR Depot Intramuscular Kit	MB/RX	PA; SP; QL (1 vial per 28 days)
sapropterin dihydrochloride oral packet	$3.65	PA; SP
sapropterin dihydrochloride oral tablet soluble	$3.65	PA; SP
SEROPHENE ORAL TABLET	$3.65	PA
SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED 4 MG, 5 MG, 6 MG	$3.65	PA; SP
Signifor LAR Intramuscular Suspension Reconstituted ER	MB/RX	PA
SIGNIFOR SUBCUTANEOUS SOLUTION	$3.65	PA; QL (60 ML per 30 days)
Somatuline Depot Subcutaneous Solution	MB/RX	SP; QL (1 ML per 28 days)
SOMAVERT SUBCUTANEOUS SOLUTION RECONSTITUTED	$3.65	PA; SP; QL (30 EA per 30 days)
STIMATE NASAL SOLUTION	$3.65	SP
STRENSIQ SUBCUTANEOUS SOLUTION	$3.65	PA; QL (24 Vials per 28 days)
Supprelin LA Subcutaneous Kit	MB/RX	PA; SP
SYNAREL NASAL SOLUTION	$3.65	PA
TEPEZZA INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA
teriparatide (recombinant) subcutaneous solution pen-injector	$3.65	PA; SP; QL (1 pen per 30 days)
tolvaptan oral tablet 15 mg	$3.65	SP; QL (30 EA per 30 days)

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tolvaptan oral tablet 30 mg	$3.65	SP; QL (60 EA per 30 days)
Triptodur Intramuscular Suspension Reconstituted ER	MB/RX	
TYMLOS SUBCUTANEOUS SOLUTION PEN-INJECTOR	$3.65	PA; SP; QL (2 ML per 30 days)
Xgeva Subcutaneous Solution	MB/RX	PA; SP; QL (1 vial per 30 days)
XURIDEN ORAL PACKET	$3.65	PA; QL (120 Packets per 30 days)
Zoledronic Acid Intravenous Concentrate	MB/RX	
Zoledronic Acid Intravenous Solution	MB/RX	
ZOMACTON SUBCUTANEOUS SOLUTION RECONSTITUTED	$3.65	PA; SP
ZORBTIVE SUBCUTANEOUS SOLUTION RECONSTITUTED	$3.65	PA; SP
ESTROGENS		
CLIMARA PRO TRANSDERMAL PATCH WEEKLY	$3.65	
COMBIPATCH TRANSDERMAL PATCH TWICE WEEKLY	$3.65	
DIVIGEL TRANSDERMAL GEL	$3.65	
DUAVEE ORAL TABLET	$3.65	
ELESTRIN TRANSDERMAL GEL	$3.65	
est estrogens-methyltest hs oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
est estrogens-methyltest oral tablet 1.25-2.5 mg	$3.65	¥ (Can be filled for up to a 90 day supply)
estradiol oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
estradiol transdermal patch twice weekly	$3.65	¥ (Can be filled for up to a 90 day supply)
estradiol transdermal patch weekly	$3.65	¥ (Can be filled for up to a 90 day supply)
estradiol-norethindrone acet oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
ESTROGEL TRANSDERMAL GEL	$3.65	
estropipate oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
EVAMIST TRANSDERMAL SOLUTION	$3.65	

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MYFEMBREE ORAL TABLET	$3.65	PA; QL (30 EA per 30 days)
norethindrone-eth estradiol oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
ORIAHNN ORAL CAPSULE THERAPY PACK	$3.65	PA; QL (56 EA per 28 days)
PREMPHASE ORAL TABLET	$3.65	
PREMPRO ORAL TABLET	$3.65	
FLUOROQUINOLONES		
BAXDELA ORAL TABLET	$3.65	
CIPRO ORAL SUSPENSION RECONSTITUTED 250 MG/5ML (5%)	$3.65	
ciprofloxacin hcl oral tablet	$3.65	
ciprofloxacin oral suspension reconstituted 500 mg/5ml (10%)	$3.65	
ciprofloxacin-ciproflox hcl er oral tablet extended release 24 hour	$3.65	
FACTIVE ORAL TABLET	$3.65	
levofloxacin oral solution	$3.65	
levofloxacin oral tablet	$3.65	
moxifloxacin hcl oral tablet	$3.65	
ofloxacin oral tablet 400 mg	$3.65	
GASTROINTESTINAL AGENTS - MISC.		
alosetron hcl oral tablet	$3.65	
AURYXIA ORAL TABLET	$3.65	PA
AVSOLA INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA
balsalazide disodium oral capsule	$3.65	
BYLVAY (PELLETS) ORAL CAPSULE SPRINKLE	$3.65	PA
BYLVAY ORAL CAPSULE	$3.65	PA
calcium acetate (phos binder) oral capsule	$3.65	¥ (Can be filled for up to a 90 day supply)
calcium acetate (phos binder) oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
CHOLBAM ORAL CAPSULE	$3.65	PA

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CIMZIA PREFILLED SUBCUTANEOUS KIT	$3.65	PA; SP; QL (2 EA per 28 days)
CIMZIA STARTER KIT SUBCUTANEOUS KIT	$3.65	PA; SP; ¥ (For first 4 weeks of treatment); QL (1 Fill per 1 Lifetime)
CIMZIA SUBCUTANEOUS KIT 2 X 200 MG	$3.65	PA; SP; QL (2 EA per 28 days)
cromolyn sodium oral concentrate	$3.65	
Entyvio Intravenous Solution Reconstituted	MB/RX	PA; SP
enulose oral solution	$3.65	
FOSRENOL ORAL PACKET	$3.65	
GATTEX SUBCUTANEOUS KIT	$3.65	SP
generlac oral solution	$3.65	
Inflectra Intravenous Solution Reconstituted	MB/RX	PA
lactulose encephalopathy oral solution	$3.65	
lanthanum carbonate oral tablet chewable	$3.65	
lubiprostone oral capsule	$3.65	PA; QL (60 EA per 30 days)
mesalamine oral tablet delayed release 1.2 gm	$3.65	¥ (Can be filled for up to a 90 day supply)
mesalamine oral tablet delayed release 800 mg	$3.65	
mesalamine rectal enema	$3.65	
mesalamine rectal suppository	$3.65	
metoclopramide hcl oral solution 10 mg/10ml, 5 mg/5ml	$3.65	
metoclopramide hcl oral tablet	$3.65	
MOVANTIK ORAL TABLET	$3.65	PA
OCALIVA ORAL TABLET	$3.65	PA; SP; QL (30 TABS per 30 days)
PHOSLYRA ORAL SOLUTION	$3.65	
RELISTOR ORAL TABLET	$3.65	PA
RELISTOR SUBCUTANEOUS SOLUTION 12 MG/0.6ML, 8 MG/0.4ML	$3.65	PA
Remicade Intravenous Solution Reconstituted	MB/RX	PA; SP
RENAGEL ORAL TABLET	$3.65	
Renflexis Intravenous Solution Reconstituted	MB/RX	PA; SP
sevelamer carbonate oral packet	$3.65	
SFROWASA RECTAL ENEMA	$3.65	

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Stelara Intravenous Solution	MB/RX	PA; SP; ¥ (1 Fill per life of plan); Preferred product; QL (4 VIALS per 1 Fill)
sulfasalazine oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
sulfasalazine oral tablet delayed release	$3.65	¥ (Can be filled for up to a 90 day supply)
SYMPROIC ORAL TABLET	$3.65	PA
ursodiol oral capsule 300 mg	$3.65	
ursodiol oral tablet	$3.65	
VIBERZI ORAL TABLET	$3.65	
XERMELO ORAL TABLET	$3.65	PA
GENITOURINARY AGENTS - MISCELLANEOUS		
alfuzosin hcl er oral tablet extended release 24 hour	$3.65	¥ (Can be filled for up to a 90 day supply)
CARDURA XL ORAL TABLET EXTENDED RELEASE 24 HOUR	$3.65	
CYSTAGON ORAL CAPSULE	$3.65	SP
cytra-2 oral solution	$3.65	
dutasteride oral capsule	$3.65	PA; ¥ (Can be filled for up to a 90 day supply)
dutasteride-tamsulosin hcl oral capsule	$3.65	PA; ¥ (Can be filled for up to a 90 day supply); QL (1 EA per 1 day)
ELMIRON ORAL CAPSULE	$3.65	
finasteride oral tablet 5 mg	$3.65	¥ (Can be filled for up to a 90 day supply)
K-PHOS NO 2 ORAL TABLET	$3.65	
OXLUMO SUBCUTANEOUS SOLUTION	Medical Benefit	PA
phenazopyridine hcl oral tablet 100 mg, 200 mg	$3.65	
potassium citrate er oral tablet extended release	$3.65	
potassium citrate monohydrate granules	$3.65	
silodosin oral capsule	$3.65	PA; ¥ (Can be filled for up to a 90 day supply)
sodium chloride irrigation solution 0.9 %	$3.65	PA
tamsulosin hcl oral capsule	$3.65	¥ (Can be filled for up to a 90 day supply)

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Drug	Status	Notes
GOUT AGENTS		
allopurinol oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
colchicine oral tablet	$3.65	
colchicine-probenecid oral tablet	$3.65	
febuxostat oral tablet	$3.65	STPA; ¥ (Can be filled for up to a 90 day supply)
Krystexxa Intravenous Solution	MB/RX	PA; SP
probenecid oral tablet	$3.65	
HEMATOLOGICAL AGENTS - MISC.		
Advate Intravenous Solution Reconstituted	MB/RX	PA; SP
Adynovate Intravenous Solution Reconstituted	MB/RX	PA; SP
Afstyla Intravenous Kit	MB/RX	PA; SP
Alphanate Intravenous Solution Reconstituted	MB/RX	PA; SP
Alphanate/VWF Complex/Human Intravenous Solution Reconstituted	MB/RX	PA; SP
AlphaNine SD Intravenous Solution Reconstituted	MB/RX	PA; SP
Alprolix Intravenous Solution Reconstituted	MB/RX	PA; SP
anagrelide hcl oral capsule	$3.65	
aspirin-dipyridamole er oral capsule extended release 12 hour	$3.65	¥ (Can be filled for up to a 90 day supply)
Bebulin Intravenous Solution Reconstituted	MB/RX	PA; SP
BeneFIX Intravenous Kit	MB/RX	PA; SP; Preferred product
BeneFIX Intravenous Solution Reconstituted 1000 UNIT, 2000 UNIT, 500 UNIT	MB/RX	PA; SP; Preferred product
Berinert Intravenous Kit	MB/RX	SP
BRILINTA ORAL TABLET	$3.65	
CABLIVI INJECTION KIT	$3.65	
cilostazol oral tablet	$3.65	
Cinryze Intravenous Solution Reconstituted	MB/RX	PA; SP
clopidogrel bisulfate oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
Coagadex Intravenous Solution Reconstituted	MB/RX	PA; SP
Corifact Intravenous Kit	MB/RX	PA; SP

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Drug	Status	Notes
dipyridamole oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
Eloctate Intravenous Solution Reconstituted	MB/RX	PA; SP
EMPAVELI SUBCUTANEOUS SOLUTION	Medical Benefit	PA
Esperoct Intravenous Solution Reconstituted	MB/RX	PA; SP
Feiba Intravenous Solution Reconstituted	MB/RX	PA; SP
GIVLAARI SUBCUTANEOUS SOLUTION	Medical Benefit	PA; Preferred product
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED 2000 UNIT	$3.65	PA; SP; QL (40 EA per 30 days)
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED 3000 UNIT	$3.65	PA; SP; QL (27 EA per 30 days)
Helixate FS Intravenous Kit	MB/RX	PA; SP
HEMLIBRA SUBCUTANEOUS SOLUTION	$3.65	PA; SP
Hemofil M Intravenous Solution Reconstituted 1000 UNIT, 1501-2000 UNIT, 1700 UNIT, 1701-2000 UNIT, 220-400 UNIT, 250 UNIT, 500 UNIT, 801-1500 UNIT, 801-1700 UNIT	MB/RX	PA; SP
Humate-P Intravenous Solution Reconstituted	MB/RX	PA; SP
icatibant acetate subcutaneous solution	$3.65	PA; SP; QL (6 ML per 1 Fill)
Idelvion Intravenous Solution Reconstituted	MB/RX	PA; SP
Ixinity Intravenous Solution Reconstituted	MB/RX	PA; SP
Jivi Intravenous Solution Reconstituted	MB/RX	PA; SP
Koate Intravenous Solution Reconstituted	MB/RX	PA; SP
Koate-DVI Intravenous Solution Reconstituted	MB/RX	PA; SP
Kogenate FS Bio-Set Intravenous Kit	MB/RX	PA; SP
Kogenate FS Intravenous Kit	MB/RX	PA; SP
Kovaltry Intravenous Solution Reconstituted	MB/RX	PA; SP
Monoclate-P Intravenous Kit	MB/RX	PA; SP
Mononine Intravenous Solution Reconstituted	MB/RX	PA; SP
Novoeight Intravenous Solution Reconstituted	MB/RX	PA; SP
NovoSeven Intravenous Solution Reconstituted	MB/RX	PA; SP
NovoSeven RT Intravenous Solution Reconstituted	MB/RX	PA; SP
Nuwiq Intravenous Kit	MB/RX	PA; SP
Nuwiq Intravenous Solution Reconstituted	MB/RX	PA; SP
Obizur Intravenous Solution Reconstituted	MB/RX	PA; SP

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Drug	Status	Notes
ORLADEYO ORAL CAPSULE	$3.65	PA; QL (1 capsules per 1 day)
pentoxifylline er oral tablet extended release	$3.65	
prasugrel hcl oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
Profilnine Intravenous Solution Reconstituted	MB/RX	PA; SP
Profilnine SD Intravenous Solution Reconstituted	MB/RX	PA; SP
Rebinyn Intravenous Solution Reconstituted	MB/RX	PA; SP
Recombinate Intravenous Solution Reconstituted	MB/RX	PA; SP
RiaSTAP Intravenous Solution Reconstituted	MB/RX	SP
Rixubis Intravenous Solution Reconstituted	MB/RX	PA; SP
Ruconest Intravenous Solution Reconstituted	MB/RX	SP
Sevenfact Intravenous Solution Reconstituted	MB/RX	PA; SP
Soliris Intravenous Solution 10 MG/ML	MB/RX	PA; SP
TAKHZYRO SUBCUTANEOUS SOLUTION	$3.65	PA; SP; QL (2 vials per 28 days)
TAVALISSE ORAL TABLET	$3.65	QL (60 EA per 30 days)
Tretten Intravenous Solution Reconstituted	MB/RX	PA; SP
Ultomiris Intravenous Solution	MB/RX	PA
Vonvendi Intravenous Solution Reconstituted	MB/RX	PA; SP
Wilate Intravenous Kit	MB/RX	PA; SP
Wilate Intravenous Solution Reconstituted	MB/RX	PA; SP
Xyntha Intravenous Kit	MB/RX	PA; SP; Preferred product
Xyntha Solofuse Intravenous Kit	MB/RX	PA; SP; Preferred product
ZONTIVITY ORAL TABLET	$3.65	
HEMATOPOIETIC AGENTS		
ADAKVEO INTRAVENOUS SOLUTION	Medical Benefit	PA
ARANESP (ALBUMIN FREE) INJECTION SOLUTION	$3.65	PA; SP; ^ (PA required on Medical Benefit); QL (4 ML per 30 days)
ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE	$3.65	PA; SP; ^ (PA required on Medical Benefit); QL (4 ML per 30 days)
CERDELGA ORAL CAPSULE	$3.65	SP
Cerezyme Intravenous Solution Reconstituted	MB/RX	PA; SP
cyanocobalamin injection solution	$3.65	
DOPTELET ORAL TABLET 20 MG	$3.65	PA; SP
DROXIA ORAL CAPSULE	$3.65	
Elelyso Intravenous Solution Reconstituted	MB/RX	PA; SP

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Drug	Status	Notes
ENDARI ORAL PACKET	$3.65	PA
EPOGEN INJECTION SOLUTION	$3.65	PA; SP; ^ (PA required on Medical Benefit); QL (10 ML per 14 days)
ferrous sulfate granules	$3.65	
folbee oral tablet	$3.65	
folic acid oral tablet 1 mg, 800 mcg	$3.65	¥ (Can be filled for up to a 90 day supply)
folic acid oral tablet 400 mcg	$0	¥ (Can be filled for up to a 90 day supply)
FULPHILA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	$3.65	SP; ¥ (Covered under the Prescription Drug Benefit when self-administered); QL (0.6 ML per 14 days)
GRANIX SUBCUTANEOUS SOLUTION	$3.65	PA; SP; ¥ (Covered under the Prescription Drug Benefit when self-administered); QL (10 vials per 14 days)
GRANIX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	$3.65	PA; SP; ¥ (Covered under the Prescription Drug Benefit when self-administered); QL (10 syringes per 14 days)
LEUKINE INJECTION SOLUTION RECONSTITUTED	$3.65	SP; ¥ (Covered under the Prescription Drug Benefit when self-administered)
MIRCERA INJECTION SOLUTION PREFILLED SYRINGE 100 MCG/0.3ML, 200 MCG/0.3ML, 50 MCG/0.3ML, 75 MCG/0.3ML	$3.65	QL (2 Syringes per 28 days)
MIRCERA INJECTION SOLUTION PREFILLED SYRINGE 150 MCG/0.3ML, 30 MCG/0.3ML	$3.65	QL (2 Syringes per 30 days)
MOZOBIL SUBCUTANEOUS SOLUTION	Medical Benefit	SP
MULPLETA ORAL TABLET	$3.65	PA; SP
NEULASTA DELIVERY KIT SUBCUTANEOUS PREFILLED SYRINGE KIT	$3.65	SP; ¥ (Covered under the Prescription Drug Benefit when self-administered); QL (0.6 ML per 14 days)

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Drug	Status	Notes
NEULASTA DELIVERY KIT SUBCUTANEOUS SOLUTION	$3.65	SP; ¥ (Covered under the Prescription Drug Benefit when self-administered); QL (0.6 ML per 14 days)
NEULASTA ONPRO SUBCUTANEOUS PREFILLED SYRINGE KIT	$3.65	SP; ¥ (Covered under the Prescription Drug Benefit when self-administered); QL (0.6 ML per 14 days)
NEULASTA SUBCUTANEOUS SOLUTION	$3.65	SP; ¥ (Covered under the Prescription Drug Benefit when self-administered); QL (0.6 ML per 14 days)
NEULASTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	$3.65	SP; ¥ (Covered under the Prescription Drug Benefit when self-administered); QL (0.6 ML per 14 days)
NEUPOGEN INJECTION SOLUTION	$3.65	SP; ¥ (Covered under the Prescription Drug Benefit when self-administered); QL (10 injections per 14 days)
NEUPOGEN INJECTION SOLUTION PREFILLED SYRINGE	$3.65	SP; ¥ (Covered under the Prescription Drug Benefit when self-administered); QL (10 injections per 14 days)
NIVESTYM INJECTION SOLUTION	$3.65	PA; SP; ¥ (Covered under the Prescription Drug Benefit when self-administered); QL (10 EA per 14 days)
NIVESTYM INJECTION SOLUTION PREFILLED SYRINGE	$3.65	PA; SP; ¥ (Covered under the Prescription Drug Benefit when self-administered); QL (10 Syringes per 14 days)
Nplate Subcutaneous Solution Reconstituted	MB/RX	SP
NYVEPRIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	$3.65	SP; ¥ (Covered under the Prescription Drug Benefit when self-administered); QL (0.6 mL per 14 days)
OXBRYTA ORAL TABLET	$3.65	PA; SP
PROCRIT INJECTION SOLUTION	$3.65	PA; SP; ^ (PA required on Medical Benefit); QL (10 ML per 14 days)
PROMACTA ORAL PACKET	$3.65	SP

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Drug	Status	Notes
PROMACTA ORAL TABLET	$3.65	SP
Reblozyl Subcutaneous Solution Reconstituted	MB/RX	PA
RETACRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 40000 UNIT/ML	$3.65	PA; SP; ^ (PA required on Medical Benefit); QL (10 ML per 14 days)
SIKLOS ORAL TABLET	$3.65	PA
UDENYCA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	$3.65	SP; ¥ (Covered under the Prescription Drug Benefit when self-administered); QL (0.6 ML per 14 days)
Vpriv Intravenous Solution Reconstituted	MB/RX	PA; SP
ZARXIO INJECTION SOLUTION PREFILLED SYRINGE	$3.65	PA; SP; ¥ (Covered under the Prescription Drug Benefit when self-administered); QL (10 Syringes per 14 days)
ZIEXTENZO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	$3.65	SP; ¥ (Covered under the Prescription Drug Benefit when self-administered); QL (0.6 ML per 14 days)
HEMOSTATICS		
aminocaproic acid oral solution	$3.65	
aminocaproic acid oral tablet	$3.65	
tranexamic acid oral tablet	$3.65	PA
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
BELSOMRA ORAL TABLET	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (30 EA per 30 days)
EDLUAR SUBLINGUAL TABLET SUBLINGUAL	$3.65	PA; QL (30 EA per 30 days)
estazolam oral tablet 1 mg	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); ^ (PA required if used in combination with an opioid for at least 60 days in a 90 day period)

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Drug	Status	Notes
eszopiclone oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); QL (30 EA per 30 days)
flurazepam hcl oral capsule	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); ^ (PA required if used in combination with an opioid for at least 60 days in a 90 day period)
HETLIOZ LQ ORAL SUSPENSION	$3.65	PA; ¥ (158 mL bottle limited to 1 bottle per 30 days; 48 mL bottle limited to 3 bottles per 30 days); QL (158 ML per 30 days)
HETLIOZ ORAL CAPSULE	$3.65	PA; QL (30 EA per 30 days)
phenobarbital oral elixir	$3.65	
phenobarbital oral solution	$3.65	
phenobarbital oral tablet	$3.65	
ramelteon oral tablet	$3.65	PA; QL (30 EA per 30 days)
temazepam oral capsule	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); ^ (PA required if used in combination with an opioid for at least 60 days in a 90 day period)
zaleplon oral capsule	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); QL (30 EA per 30 days)
zolpidem tartrate er oral tablet extended release	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (30 EA per 30 days)

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zolpidem tartrate oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); QL (30 EA per 30 days)
zolpidem tartrate sublingual tablet sublingual	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (30 EA per 30 days)
LAXATIVES		
constulose oral solution	$3.65	
GAVILYTE-C ORAL SOLUTION RECONSTITUTED	$0	
GAVILYTE-G ORAL SOLUTION RECONSTITUTED	$0	
GAVILYTE-H ORAL KIT	$3.65	
GOLYTELY ORAL SOLUTION RECONSTITUTED 227.1 GM	$0	
lactulose oral solution	$3.65	
OSMOPREP ORAL TABLET	$0	
peg 3350/electrolytes oral solution reconstituted	$0	
peg 3350-kcl-na bicarb-nacl oral solution reconstituted	$0	
peg-3350/electrolytes oral solution reconstituted	$0	
peg-3350/electrolytes/ascorbat oral solution reconstituted	$0	
peg-kcl-nacl-nasulf-na asc-c oral solution reconstituted	$0	
polyethylene glycol 3350 oral powder	$0	
PREPOPIK ORAL PACKET	$0	
SUPREP BOWEL PREP KIT ORAL SOLUTION	$0	
TRILYTE ORAL SOLUTION RECONSTITUTED	$0	
LOCAL ANESTHETICS-PARENTERAL		
lidocaine hcl (pf) injection solution 4 %	$3.65	

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lidocaine hcl injection solution 0.5 %, 1 %, 1.5 %, 2 %	$3.65	
ropivacaine hcl-nacl injection solution 0.1-0.9 %	Medical Benefit	
MACROLIDES		
azithromycin oral packet	$3.65	
azithromycin oral suspension reconstituted	$3.65	
azithromycin oral tablet 250 mg, 500 mg, 600 mg	$3.65	
clarithromycin er oral tablet extended release 24 hour	$3.65	
clarithromycin oral suspension reconstituted	$3.65	
clarithromycin oral tablet	$3.65	
DIFICID ORAL SUSPENSION RECONSTITUTED	$3.65	PA
DIFICID ORAL TABLET	$3.65	PA; QL (20 EA per 1 Fill)
E.E.S. 400 ORAL TABLET	$3.65	
ERY-TAB ORAL TABLET DELAYED RELEASE	$3.65	
ERYTHROCIN STEARATE ORAL TABLET 250 MG	$3.65	
erythromycin base oral capsule delayed release particles	$3.65	
erythromycin base oral tablet	$3.65	
erythromycin ethylsuccinate oral suspension reconstituted	$3.65	
erythromycin ethylsuccinate oral tablet	$3.65	
PCE ORAL TABLET DELAYED RELEASE	$3.65	
ZMAX ORAL SUSPENSION RECONSTITUTED	$3.65	
MEDICAL DEVICES AND SUPPLIES		
ACCU-CHEK SAFE-T PRO LANCETS	$0	
ACCU-CHEK SOFT TOUCH LANCETS	$0	
ACCU-CHEK SOFTCLIX LANCETS	$0	
AT LAST LANCETS	$3.65	

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Drug	Status	Notes
BD INSULIN SYRINGE 25G X 1" 1 ML, 25G X 5/8" 1 ML, 26G X 1/2" 1 ML, 27.5G X 5/8" 2 ML, 27G X 1/2" 1 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, U-100 1 ML	$3.65	
BD INSULIN SYRINGE MICROFINE	$3.65	
BD INSULIN SYRINGE U/F 30G X 1/2" 1 ML	$3.65	
BD INSULIN SYRINGE ULTRAFINE 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML	$3.65	
BD LANCET ULTRAFINE 33G	$3.65	
BD SAFETY-LOK INSULIN SYRINGE	$3.65	
BD SYRINGE SLIP TIP 3 ML	$3.65	
CLEANLET LANCETS 28G	$3.65	
comfort lancets	$3.65	
DEXCOM G6 RECEIVER DEVICE	$0	PA; Preferred product; QL (1 EA per 365 days)
DEXCOM G6 SENSOR	$0	PA; ¥ (1 pack/box contains 3 sensors); Preferred product; QL (1 PACK per 30 days)
DEXCOM G6 TRANSMITTER	$0	PA; Preferred product; QL (1 EA per 90 days)
easy comfort insulin syringe 32g x 5/16" 0.5 ml, 32g x 5/16" 1 ml	$0	
EZ-LETS LANCETS 26G	$3.65	
FINGERSTIX LANCETS	$3.65	
FREESTYLE LANCETS	$0	
FREESTYLE LIBRE 14 DAY READER DEVICE	$0	PA; Preferred product; QL (1 EA per 2 Years)
FREESTYLE LIBRE 14 DAY SENSOR	$0	PA; Preferred product; QL (2 EA per 28 days)
FREESTYLE LIBRE 2 READER DEVICE	$0	PA; Preferred product; QL (1 EA per 2 Years)
FREESTYLE LIBRE 2 SENSOR	$0	PA; Preferred product; QL (2 EA per 28 days)
GENTLE-LET GP LANCETS	$3.65	
GENTLE-LET LANCETS	$3.65	

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Drug	Status	Notes
GLUCOSOURCE LANCETS	$3.65	
gnp lancets	$3.65	
gnp ultra com insulin syringe 28g x 1/2" 0.5 ml, 28g x 1/2" 1 ml, 29g x 1/2" 0.3 ml, 29g x 1/2" 0.5 ml, 29g x 1/2" 1 ml	$3.65	
HAEMOLANCE LOW FLOW LANCETS	$3.65	
HY-VEE LANCETS	$3.65	
hy-vee thin lancets	$3.65	
insulin syringe 28g x 1/2" 0.5 ml, 28g x 1/2" 1 ml, 29g x 1" 0.3 ml, 29g x 1/2" 0.3 ml, 29g x 1/2" 0.5 ml, 29g x 1/2" 1 ml, 30g x 5/16" 0.3 ml, 30g x 5/16" 0.5 ml, 30g x 5/16" 1 ml, 31g x 5/16" 0.3 ml, 31g x 5/16" 0.5 ml, 31g x 5/16" 1 ml	$3.65	
insulin syringe/needle	$3.65	
kinney lancets	$3.65	
kinney thin lancets	$3.65	
kinray insulin syringe 29g x 1/2" 0.5 ml	$3.65	
lancets	$3.65	
lancets thin	$3.65	
LIFESCAN UNISTIK II LANCETS	$3.65	
lite touch lancets	$3.65	
longs lancets thin	$3.65	
MEDISENSE THIN LANCETS	$3.65	
MEIJER LANCETS	$3.65	
MICROTAINER SAFETY FLOW LANCET	$3.65	
MONOJECT CONTROL SYRINGE	$3.65	
MONOJECT FILTER ASPIRATOR	$3.65	
MONOJECT INSULIN SYRINGE 25G X 5/8" 1 ML, 27G X 1/2" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, U-100 1 ML	$3.65	
MONOJECT PHARMACY TRAY 20 ML , 3 ML , 35 ML , 6 ML , 60 ML	$3.65	
MONOJECT PISTON SYRINGE	$3.65	

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MONOJECT SAFETY SYRINGE/SHIELD 12 ML , 20G X 1-1/2" 12 ML, 21G X 1" 3 ML, 21G X 1-1/2" 12 ML, 21G X 1-1/2" 3 ML, 22G X 1-1/2" 3 ML, 3 ML	$3.65	
MONOJECT SYRINGE 12 ML , 18G X 1" 12 ML, 20G X 1" 3 ML, 20G X 1-1/2" 12 ML, 20G X 1-1/2" 3 ML, 20G X 1-1/2" 6 ML, 20G X 3/4" 3 ML, 21G X 1" 12 ML, 21G X 1" 3 ML, 21G X 1" 6 ML, 21G X 1-1/2" 12 ML, 21G X 1-1/2" 3 ML, 21G X 1-1/2" 6 ML, 22G X 1" 3 ML, 22G X 1-1/2" 12 ML, 22G X 1-1/2" 3 ML, 22G X 1-1/2" 6 ML, 23G X 1" 3 ML, 25G X 1" 3 ML, 25G X 1-1/4" 3 ML, 25G X 5/8" 3 ML, 27G X 1-1/4" 3 ML, 3 ML , 6 ML	$3.65	
MONOJECT SYRINGE CATH TIP	$3.65	
MONOJECT SYRINGE ECC LUER 35 ML	$3.65	
MONOJECT SYRINGE LUER LOCK	$3.65	
MONOJECT SYRINGE REG LUER 12 ML , 20 ML , 3 ML , 35 ML , 6 ML	$3.65	
MONOJECT TB SAFETY SYRINGE 28G X 1/2" 1 ML	$3.65	
MONOJECT TB SYRINGE 25G X 5/8" 1 ML, 26G X 3/8" 1 ML, 28G X 1/2" 1 ML	$3.65	
MONOJECT ULTRA COMFORT SYRINGE 28G X 1/2" 0.5 ML	$3.65	
MONOLET LANCETS	$3.65	
OMNIPOD 5 PACK	$0	PA; ¥ (PA required when filled at a pharmacy or through a durable medical equipment (DME) supplier); Preferred product; QL (10 EA per 30 days)
OMNIPOD DASH 5 PACK PODS	$0	PA; ¥ (PA required when filled at a pharmacy or through a durable medical equipment (DME) supplier); Preferred product; QL (10 pods per 30 days)
OMNIPOD STARTER KIT	$0	PA; ¥ (PA required when filled at a pharmacy or through a durable medical equipment (DME) supplier); Preferred product; QL (1 EA per 4 Years)

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ONETOUCH CLUB LANCETS FINE PT	$3.65	
ONETOUCH FINEPOINT LANCETS	$3.65	
ONETOUCH ULTRASOFT LANCETS	$3.65	
PRECISION SURE-DOSE SYRINGE 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.5 ML	$3.65	
PRECISION THIN LANCETS	$3.65	
PRECISION THINS GP LANCETS	$3.65	
PRECISION ULTRA LANCET	$3.65	
preferred plus lancets colored	$3.65	
preferred plus lancets thin	$3.65	
PSS SELECT GP LANCETS	$3.65	
PSS SELECT SAFETY LANCETS	$3.65	
reality lancets	$3.65	
reality trigger lancets	$3.65	
sb lancets thin	$3.65	
sb lancets ultra thin	$3.65	
super thin lancets	$3.65	
sure comfort insulin syringe 28g x 1/2" 0.5 ml, 28g x 1/2" 1 ml, 29g x 1/2" 0.3 ml, 29g x 1/2" 0.5 ml, 29g x 1/2" 1 ml, 30g x 5/16" 0.3 ml, 30g x 5/16" 0.5 ml, 30g x 5/16" 1 ml	$3.65	
SURELITE LANCETS	$3.65	
tb syringe 1 ml	$3.65	
TECHLITE LANCETS	$3.65	
THINLETS GP LANCETS	$3.65	
THINLETS LANCET	$3.65	
topco insulin syringe	$3.65	
ULTICARE TUBERCULIN SAFETY SYR 28G X 1/2" 1 ML	$3.65	
ULTILET CLASSIC LANCETS	$3.65	
ULTILET LANCETS	$3.65	
ULTRA-THIN II AUTO LANCET	$3.65	
ULTRA-THIN II LANCETS	$3.65	
UNILET COMFORTOUCH LANCET	$3.65	

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Drug	Status	Notes
UNILET G.P. LANCET	$3.65	
UNILET G.P. SUPERLITE LANCET	$3.65	
UNILET LANCET	$3.65	
UNILET SUPERLITE LANCET	$3.65	
UNISTIK 1	$3.65	
V-GO 20 KIT	$0	PA; ¥ (PA required when filled at a pharmacy or through a durable medical equipment (DME) supplier); Preferred product; QL (30 EA per 30 days)
V-GO 30 KIT	$0	PA; ¥ (PA required when filled at a pharmacy or through a durable medical equipment (DME) supplier); Preferred product; QL (30 EA per 30 days)
V-GO 40 KIT	$0	PA; ¥ (PA required when filled at a pharmacy or through a durable medical equipment (DME) supplier); Preferred product; QL (30 EA per 30 days)
VITALET PRO LANCETS	$3.65	
VITALET PRO PLUS LANCETS	$3.65	
W&F LANCETS 26G	$3.65	
W&F LANCETS COLORED 21G	$3.65	
MIGRAINE PRODUCTS		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR	$3.65	PA; QL (1 ML per 30 days)
AJOVY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	$3.65	PA; Preferred product; QL (1 injection per 30 days)
AJOVY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	$3.65	PA; Preferred product; QL (1 injection per 30 days)
almotriptan malate oral tablet	$3.65	PA; QL (9 EA per 30 days)
CAFERGOT ORAL TABLET	$3.65	
dihydroergotamine mesylate nasal solution	$3.65	
eletriptan hydrobromide oral tablet	$3.65	PA; QL (9 EA per 30 days)
EMGALITY (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	$3.65	PA; Preferred product; QL (3 ML per 30 days)

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EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	$3.65	PA; ^ (2 injections permitted for the first month of treatment); QL (1 injection per 30 days)
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	$3.65	PA; ^ (2 injections permitted for the first month of treatment); QL (1 injection per 30 days)
ERGOMAR SUBLINGUAL TABLET SUBLINGUAL	$3.65	
frovatriptan succinate oral tablet	$3.65	PA; QL (9 EA per 30 days)
isometheptene-dichloral-apap oral capsule	$3.65	QL (300 EA per 30 days)
MIGERGOT RECTAL SUPPOSITORY	$3.65	
migragesic ida oral capsule	$3.65	QL (300 EA per 30 days)
MIGRANAL NASAL SOLUTION	$3.65	QL (8 Units per 30 days)
naratriptan hcl oral tablet	$3.65	STPA; QL (9 EA per 30 days)
NODOLOR ORAL CAPSULE	$3.65	QL (300 EA per 30 days)
NURTEC ORAL TABLET DISPERSIBLE	$3.65	PA; QL (8 EA per 30 days)
REYVOW ORAL TABLET 100 MG	$3.65	PA; QL (8 EA per 30 days)
REYVOW ORAL TABLET 50 MG	$3.65	PA; QL (4 EA per 30 days)
rizatriptan benzoate oral tablet	$3.65	QL (9 EA per 30 days)
rizatriptan benzoate oral tablet dispersible	$3.65	QL (9 EA per 30 days)
sumatriptan nasal solution	$3.65	QL (6 Units per 30 days)
sumatriptan succinate oral tablet	$3.65	QL (9 EA per 30 days)
sumatriptan succinate refill subcutaneous solution cartridge	$3.65	QL (4 EA per 30 days)
sumatriptan succinate subcutaneous solution 6 mg/0.5ml	$3.65	QL (4 EA per 30 days)
sumatriptan succinate subcutaneous solution auto-injector 4 mg/0.5ml, 6 mg/0.5ml	$3.65	QL (4 EA per 30 days)
sumatriptan succinate subcutaneous solution prefilled syringe 6 mg/0.5ml	$3.65	QL (4 EA per 30 days)
TOSYMRA NASAL SOLUTION	$3.65	PA; QL (6 EA per 30 days)
UBRELVY ORAL TABLET	$3.65	PA; QL (8 EA per 30 days)
VYEPTI INTRAVENOUS SOLUTION	Medical Benefit	PA; QL (3 ML per 90 days)
zolmitriptan nasal solution	$3.65	STPA; QL (6 Units per 30 days)
zolmitriptan oral tablet	$3.65	STPA; QL (9 EA per 30 days)
zolmitriptan oral tablet dispersible	$3.65	STPA; QL (9 EA per 30 days)

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MINERALS & ELECTROLYTES		
FLUORABON ORAL SOLUTION	$3.65	
FLUOR-A-DAY ORAL SOLUTION	$3.65	
FLUOR-A-DAY ORAL TABLET CHEWABLE	$3.65	
FLURA-DROPS ORAL SOLUTION 0.55 (0.25 F) MG/DROP	$3.65	
KLOR-CON M15 ORAL TABLET EXTENDED RELEASE	$3.65	
K-PHOS ORAL TABLET	$3.65	
LOZI-FLUR MOUTH/THROAT LOZENGE	$3.65	
magdelay oral tablet delayed release 70 mg	$3.65	
PHOSPHA 250 NEUTRAL ORAL TABLET	$3.65	
pot bicarb-pot chloride oral tablet effervescent	$3.65	
potassium bicarbonate granules	$3.65	
potassium bicarbonate oral tablet effervescent	$3.65	
potassium chloride crys er oral tablet extended release 10 meq, 20 meq	$3.65	
potassium chloride er oral capsule extended release	$3.65	
potassium chloride er oral tablet extended release	$3.65	
potassium chloride granules	$3.65	
potassium chloride oral packet	$3.65	
potassium chloride oral solution 20 meq/15ml (10%), 40 meq/15ml (20%)	$3.65	
sodium fluoride oral solution 1.1 (0.5 f) mg/ml	$3.65	
sodium fluoride oral tablet	$3.65	
sodium fluoride oral tablet chewable	$3.65	
MISCELLANEOUS THERAPEUTIC CLASSES		
ASTAGRAF XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR	$3.65	
azathioprine oral tablet 50 mg	$3.65	
Benlysta Intravenous Solution Reconstituted	MB/RX	PA; SP
BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	$3.65	PA; SP

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BENLYSTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	$3.65	PA; SP
cyclosporine modified oral capsule	$3.65	
cyclosporine modified oral solution	$3.65	
cyclosporine oral capsule	$3.65	
DEPEN TITRATABS ORAL TABLET	$3.65	
ENSPRYNG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	$3.65	PA; SP
everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg	$3.65	SP
GENGRAF ORAL CAPSULE 100 MG, 25 MG	$3.65	
GENGRAF ORAL SOLUTION	$3.65	
KIONEX ORAL POWDER	$3.65	
KIONEX ORAL SUSPENSION	$3.65	
LOKELMA ORAL PACKET	$3.65	
LUPKYNIS ORAL CAPSULE	$3.65	PA
mycophenolate mofetil oral capsule	$3.65	
mycophenolate mofetil oral suspension reconstituted	$3.65	
mycophenolate mofetil oral tablet	$3.65	
penicillamine oral capsule	$3.65	
PROGRAF ORAL PACKET 1 MG	$3.65	
RESET FOR IOS OR ANDROID APP	$0	Preferred product
RESET-O FOR IOS OR ANDROID APP	$0	Preferred product
REVLIMID ORAL CAPSULE	$3.65	PA; SP
REZUROCK ORAL TABLET	$3.65	PA
SANDIMMUNE ORAL SOLUTION	$3.65	
SAPHNELO INTRAVENOUS SOLUTION	Medical Benefit	PA
sirolimus oral solution	$3.65	
sirolimus oral tablet	$3.65	
sodium polystyrene sulfonate oral powder	$3.65	
sodium polystyrene sulfonate oral suspension	$3.65	
sodium polystyrene sulfonate rectal suspension	$3.65	
SPS ORAL SUSPENSION	$3.65	
tacrolimus oral capsule	$3.65	

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THALOMID ORAL CAPSULE	$3.65	SP
trientine hcl oral capsule	$3.65	PA
UPLIZNA INTRAVENOUS SOLUTION	Medical Benefit	PA
VELTASSA ORAL PACKET	$3.65	
Xiaflex Injection Solution Reconstituted	MB/RX	PA
ZOKINVY ORAL CAPSULE	$3.65	PA
ZORTRESS ORAL TABLET 1 MG	$3.65	SP
MOUTH/THROAT/DENTAL AGENTS		
CAVAREST DENTAL GEL	$3.65	
CAVIRINSE MOUTH/THROAT SOLUTION	$3.65	
cevimeline hcl oral capsule	$3.65	
chlorhexidine gluconate mouth/throat solution	$3.65	
CLINPRO 5000 DENTAL PASTE	$3.65	
clotrimazole mouth/throat lozenge	$3.65	
clotrimazole mouth/throat troche	$3.65	
CONTROLRX DENTAL CREAM	$3.65	
DENTA 5000 PLUS DENTAL CREAM	$3.65	
DENTAGEL DENTAL GEL	$3.65	
EASYGEL DENTAL GEL	$3.65	
FIRST-BXN MOUTHWASH MOUTH/THROAT SUSPENSION	$3.65	
FIRST-DUKES MOUTHWASH MOUTH/THROAT SUSPENSION	$3.65	
FIRST-MARYS MOUTHWASH MOUTH/THROAT SUSPENSION	$3.65	
FIRST-MOUTHWASH BLM MOUTH/THROAT SUSPENSION	$3.65	
FLUORIDEX DAILY DEFENSE DENTAL GEL	$3.65	
FLUORIDEX ENHANCED WHITENING DENTAL GEL	$3.65	
FLUORIDEX SENSITIVITY RELIEF DENTAL GEL	$3.65	
FLUORIDEX SENSITIVITY RELIEF DENTAL PASTE	$3.65	
KARIGEL DENTAL GEL	$3.65	

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KARIGEL-N DENTAL GEL	$3.65	
lidocaine viscous mouth/throat solution	$3.65	
NAFRINSE DAILY ACIDULATED MOUTH/THROAT SOLUTION RECONSTITUTED	$3.65	
NAFRINSE DAILY/NEUTRAL MOUTH/THROAT SOLUTION RECONSTITUTED	$3.65	
NAFRINSE WEEKLY MOUTH/THROAT SOLUTION RECONSTITUTED	$3.65	
NEUTRAGARD ADVANCED DENTAL GEL	$3.65	
neutral sodium fluoride mouth/throat solution	$3.65	
nystatin mouth/throat suspension	$3.65	
ORALONE MOUTH/THROAT PASTE	$3.65	
PAROEX MOUTH/THROAT SOLUTION	$3.65	
PERIOGARD MOUTH/THROAT SOLUTION	$3.65	
PHOS-FLUR DENTAL GEL	$3.65	
pilocarpine hcl oral tablet	$3.65	
sf 5000 plus dental cream	$3.65	
sf dental gel	$3.65	
triamcinolone acetonide mouth/throat paste	$3.65	
MULTIVITAMINS		
bp folinatal plus b oral tablet	$3.65	
bp multinatal plus oral tablet	$3.65	
bp multinatal plus oral tablet chewable	$3.65	
daily multi oral tablet	$3.65	
ELITE-OB ORAL TABLET	$3.65	
ESCAVITE D ORAL TABLET CHEWABLE	$3.65	Age Limit (Max 6 Years)
ESCAVITE ORAL TABLET CHEWABLE	$3.65	Age Limit (Max 6 Years)
INATAL ADVANCE ORAL TABLET	$3.65	
MULTI COMPLETE ORAL CAPSULE	$3.65	
multi vitamin/fluoride oral tablet chewable	$3.65	
multi vitamin/minerals oral tablet	$3.65	
multi-vit/fluoride oral solution	$3.65	

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multi-vit/fluoride/iron oral solution	$3.65	
multi-vitamin/fluoride oral tablet chewable 0.5 mg	$3.65	
multivitamin/fluoride oral tablet chewable 1 mg	$3.65	
MYKIDZ IRON FL ORAL SUSPENSION	$3.65	
mynephrocaps oral capsule	$3.65	
NEPHROCAPS QT ORAL TABLET DISPERSIBLE	$3.65	
OBSTETRIX EC ORAL TABLET	$3.65	
pnv folic acid + iron oral tablet	$3.65	
prenatabs fa oral tablet	$3.65	
PRENATABS RX ORAL TABLET	$3.65	
prenatal 19 oral tablet	$3.65	
prenatal 19 oral tablet chewable	$3.65	
prenatal oral tablet 27-0.8 mg	$3.65	
RENAL ORAL CAPSULE	$3.65	
TRINATE ORAL TABLET	$3.65	
tri-vit/fluoride/iron oral solution	$3.65	
tri-vitamin/fluoride oral solution	$3.65	
MUSCULOSKELETAL THERAPY AGENTS		
baclofen oral tablet	$3.65	
carisoprodol oral tablet 350 mg	$3.65	
carisoprodol-aspirin oral tablet	$3.65	
chlorzoxazone oral tablet 500 mg	$3.65	
cyclobenzaprine hcl oral tablet 10 mg, 5 mg	$3.65	
dantrolene sodium oral capsule	$3.65	
EUFLEXXA INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	Medical Benefit	PA
metaxalone oral tablet 800 mg	$3.65	STPA
methocarbamol oral tablet	$3.65	
orphenadrine citrate er oral tablet extended release 12 hour	$3.65	
orphenadrine-aspirin-caffeine oral tablet 25-385-30 mg	$3.65	

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OZOBAX ORAL SOLUTION	$3.65	PA
tizanidine hcl oral tablet	$3.65	
NASAL AGENTS - SYSTEMIC AND TOPICAL		
ADRENALIN NASAL SOLUTION	$3.65	
azelastine hcl nasal solution 0.1 %	$3.65	
BACTROBAN NASAL NASAL OINTMENT	$3.65	
BECONASE AQ NASAL SUSPENSION	$3.65	PA
budesonide nasal suspension	$3.65	
FLONASE SENSIMIST NASAL SUSPENSION	$3.65	PA
flunisolide nasal solution 25 mcg/act (0.025%)	$3.65	PA
fluticasone propionate nasal suspension	$3.65	
ipratropium bromide nasal solution	$3.65	
mometasone furoate nasal suspension	$3.65	PA
OMNARIS NASAL SUSPENSION	$3.65	PA
pseudoephedrine hcl oral tablet 60 mg	$3.65	
QNASL CHILDRENS NASAL AEROSOL SOLUTION	$3.65	PA
QNASL NASAL AEROSOL SOLUTION	$3.65	PA
triamcinolone acetonide nasal aerosol	$3.65	
VERAMYST NASAL SUSPENSION	$3.65	PA
ZETONNA NASAL AEROSOL SOLUTION	$3.65	PA
NEUROMUSCULAR AGENTS		
amondys 45 intravenous solution	Medical Benefit	PA
Botox Injection Solution Reconstituted	MB/RX	PA
DYSPORT INTRAMUSCULAR SOLUTION RECONSTITUTED	Medical Benefit	PA
Exondys 51 Intravenous Solution	MB/RX	PA
EXSERVAN ORAL FILM	$3.65	
MYOBLOC INTRAMUSCULAR SOLUTION	Medical Benefit	PA
Radicava Intravenous Solution	MB/RX	PA
riluzole oral tablet	$3.65	
Spinraza Intrathecal Solution	MB/RX	PA
TIGLUTIK ORAL SUSPENSION	$3.65	

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VILTEPSO INTRAVENOUS SOLUTION	Medical Benefit	PA
VYONDYS 53 INTRAVENOUS SOLUTION	Medical Benefit	PA
XEOMIN INTRAMUSCULAR SOLUTION RECONSTITUTED	Medical Benefit	PA
NUTRIENTS		
DOJOLVI ORAL LIQUID	$3.65	PA
n-acetyl-l-cysteine oral capsule	$3.65	
NUTRESTORE ORAL PACKET	$3.65	PA
OPHTHALMIC AGENTS		
ALOCRIL OPHTHALMIC SOLUTION	$3.65	PA
ALOMIDE OPHTHALMIC SOLUTION	$3.65	PA
ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %	$3.65	PA
ALREX OPHTHALMIC SUSPENSION	$3.65	
atropine sulfate ophthalmic ointment	$3.65	
atropine sulfate ophthalmic solution 1 %	$3.65	
AZASITE OPHTHALMIC SOLUTION	$3.65	
azelastine hcl ophthalmic solution	$3.65	PA
bacitracin ophthalmic ointment	$3.65	
bacitracin-polymyxin b ophthalmic ointment 500-10000 unit/gm	$3.65	
bacitra-neomycin-polymyxin-hc ophthalmic ointment	$3.65	
bepotastine besilate ophthalmic solution	$3.65	PA
BESIVANCE OPHTHALMIC SUSPENSION	$3.65	
betaxolol hcl ophthalmic solution	$3.65	
BETIMOL OPHTHALMIC SOLUTION	$3.65	
BETOPTIC-S OPHTHALMIC SUSPENSION	$3.65	
bimatoprost ophthalmic solution	$3.65	
BLEPHAMIDE OPHTHALMIC SUSPENSION	$3.65	
BLEPHAMIDE S.O.P. OPHTHALMIC OINTMENT	$3.65	
brimonidine tartrate ophthalmic solution 0.15 %	$3.65	PA
brimonidine tartrate ophthalmic solution 0.2 %	$3.65	

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brinzolamide ophthalmic suspension	$3.65	PA
bromfenac sodium (once-daily) ophthalmic solution	$3.65	
bromfenac sodium ophthalmic solution	$3.65	
carteolol hcl ophthalmic solution	$3.65	
CEQUA OPHTHALMIC SOLUTION	$3.65	PA
CILOXAN OPHTHALMIC OINTMENT	$3.65	
ciprofloxacin hcl ophthalmic solution	$3.65	
COMBIGAN OPHTHALMIC SOLUTION	$3.65	PA
cromolyn sodium ophthalmic solution	$3.65	
cyclopentolate hcl ophthalmic solution	$3.65	
CYSTADROPS OPHTHALMIC SOLUTION	$3.65	
CYSTARAN OPHTHALMIC SOLUTION	$3.65	
dexamethasone sodium phosphate ophthalmic solution	$3.65	
diclofenac sodium ophthalmic solution	$3.65	
difluprednate ophthalmic emulsion	$3.65	
dorzolamide hcl ophthalmic solution	$3.65	
dorzolamide hcl-timolol mal ophthalmic solution	$3.65	
dorzolamide hcl-timolol mal pf ophthalmic solution	$3.65	
EMADINE OPHTHALMIC SOLUTION	$3.65	PA
epinastine hcl ophthalmic solution	$3.65	PA
erythromycin ophthalmic ointment	$3.65	
Eylea Intraocular Solution	MB/RX	SP
FLAREX OPHTHALMIC SUSPENSION	$3.65	
fluorometholone ophthalmic suspension	$3.65	
flurbiprofen sodium ophthalmic solution	$3.65	
FML FORTE OPHTHALMIC SUSPENSION	$3.65	
FML OPHTHALMIC OINTMENT	$3.65	
gatifloxacin ophthalmic solution	$3.65	
GENTAK OPHTHALMIC OINTMENT	$3.65	
gentamicin sulfate ophthalmic ointment	$3.65	
gentamicin sulfate ophthalmic solution	$3.65	

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HOMATROPAIRE OPHTHALMIC SOLUTION	$3.65	
homatropine hbr ophthalmic solution	$3.65	
ILEVRO OPHTHALMIC SUSPENSION	$3.65	
ILOTYCIN OPHTHALMIC OINTMENT	$3.65	
INVELTYS OPHTHALMIC SUSPENSION	$3.65	PA
ISOPTO CARBACHOL OPHTHALMIC SOLUTION	$3.65	
ISOPTO HYOSCINE OPHTHALMIC SOLUTION	$3.65	
ketorolac tromethamine ophthalmic solution	$3.65	
ketotifen fumarate ophthalmic solution	$3.65	
LASTACAFT OPHTHALMIC SOLUTION	$3.65	PA
latanoprost ophthalmic solution	$3.65	
levobunolol hcl ophthalmic solution	$3.65	
levofloxacin ophthalmic solution	$3.65	
LOTEMAX OPHTHALMIC OINTMENT	$3.65	
LOTEMAX SM OPHTHALMIC GEL	$3.65	PA
loteprednol etabonate ophthalmic gel	$3.65	
loteprednol etabonate ophthalmic suspension	$3.65	
Lucentis Intraocular Solution	MB/RX	SP
Lucentis Intravitreal Solution Prefilled Syringe	MB/RX	SP
Macugen Intraocular Solution	MB/RX	SP
MAXIDEX OPHTHALMIC SUSPENSION	$3.65	
metipranolol ophthalmic solution	$3.65	
MOXEZA OPHTHALMIC SOLUTION	$3.65	
moxifloxacin hcl ophthalmic solution	$3.65	
naphazoline hcl ophthalmic solution	$3.65	
NATACYN OPHTHALMIC SUSPENSION	$3.65	PA
neomycin-bacitracin zn-polymyx ophthalmic ointment 5-400-10000	$3.65	
neomycin-polymyxin-dexameth ophthalmic ointment	$3.65	
neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	$3.65	

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neomycin-polymyxin-gramicidin ophthalmic solution 1.75-10000-.025	$3.65	
neomycin-polymyxin-hc ophthalmic suspension 3.5-10000-1	$3.65	
NEO-POLYCIN HC OPHTHALMIC OINTMENT	$3.65	
NEO-POLYCIN OPHTHALMIC OINTMENT	$3.65	
NEVANAC OPHTHALMIC SUSPENSION	$3.65	
ofloxacin ophthalmic solution	$3.65	
olopatadine hcl ophthalmic solution	$3.65	PA
OXERVATE OPHTHALMIC SOLUTION	$3.65	PA
PHOSPHOLINE IODIDE OPHTHALMIC SOLUTION RECONSTITUTED	$3.65	
pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %	$3.65	
POLYCIN OPHTHALMIC OINTMENT	$3.65	
polymyxin b-trimethoprim ophthalmic solution	$3.65	
polyvinyl alcohol ophthalmic solution	$3.65	
PRED MILD OPHTHALMIC SUSPENSION	$3.65	
PRED-G OPHTHALMIC SUSPENSION	$3.65	
PRED-G S.O.P. OPHTHALMIC OINTMENT	$3.65	
prednisolone acetate ophthalmic suspension	$3.65	
prednisolone sodium phosphate ophthalmic solution	$3.65	
proparacaine hcl ophthalmic solution	$3.65	
RESTASIS OPHTHALMIC EMULSION	$3.65	PA
RHOPRESSA OPHTHALMIC SOLUTION	$3.65	PA
SIMBRINZA OPHTHALMIC SUSPENSION	$3.65	PA
sulfacetamide sodium ophthalmic ointment	$3.65	
sulfacetamide sodium ophthalmic solution	$3.65	
sulfacetamide-prednisolone ophthalmic solution	$3.65	
timolol maleate ophthalmic gel forming solution	$3.65	
timolol maleate ophthalmic solution	$3.65	
TIMOPTIC OCUDOSE OPHTHALMIC SOLUTION 0.25 %	$3.65	

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TOBRADEX OPHTHALMIC OINTMENT	$3.65	
tobramycin ophthalmic solution	$3.65	
tobramycin-dexamethasone ophthalmic suspension	$3.65	
TOBREX OPHTHALMIC OINTMENT	$3.65	
travoprost (bak free) ophthalmic solution	$3.65	
TRIESENCE INTRAOCULAR SUSPENSION	$3.65	
trifluridine ophthalmic solution	$3.65	
tropicamide ophthalmic solution	$3.65	
UPNEEQ OPHTHALMIC SOLUTION	$3.65	PA
VEXOL OPHTHALMIC SUSPENSION	$3.65	
Visudyne Intravenous Solution Reconstituted	MB/RX	SP
ZIRGAN OPHTHALMIC GEL	$3.65	PA
ZYLET OPHTHALMIC SUSPENSION	$3.65	
OTIC AGENTS		
ACETASOL HC OTIC SOLUTION	$3.65	
acetic acid otic solution	$3.65	
acetic acid-aluminum acetate otic solution	$3.65	
antipyrine-benzocaine otic solution 5.4-1.4 %, 54-14 mg/ml	$3.65	
CIPRO HC OTIC SUSPENSION	$3.65	
ciprofloxacin-dexamethasone otic suspension	$3.65	
CORTISPORIN-TC OTIC SUSPENSION	$3.65	
fluocinolone acetonide otic oil	$3.65	
hydrocortisone-acetic acid otic solution	$3.65	
neomycin-polymyxin-hc otic solution	$3.65	
neomycin-polymyxin-hc otic suspension	$3.65	
ofloxacin otic solution	$3.65	
otic care otic solution	$3.65	
OTIPRIO INTRATYMPANIC SUSPENSION	Medical Benefit	
OXYTOCICS		
methylergonovine maleate oral tablet	$3.65	

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Drug	Status	Notes
PASSIVE IMMUNIZING AND TREATMENT AGENTS		
Asceniv Intravenous Solution	MB/RX	PA; SP; ¥ (PA applies to members 18 years of age and older)
Bivigam Intravenous Solution 5 GM/50ML	MB/RX	PA; SP; ¥ (PA applies to members 18 years of age and older)
Carimune NF Intravenous Solution Reconstituted 12 GM, 6 GM	MB/RX	PA; SP; ¥ (PA applies to members 18 years of age and older)
Cutaquig Subcutaneous Solution	MB/RX	PA; ¥ (PA applies to members 18 years of age and older)
Cuvitru Subcutaneous Solution	MB/RX	PA; SP; ¥ (PA applies to members 18 years of age and older)
Cytogam Intravenous Injectable	MB/RX	PA; SP
Flebogamma DIF Intravenous Solution	MB/RX	PA; SP; ¥ (PA applies to members 18 years of age and older)
GamaSTAN S/D Intramuscular Injectable	MB/RX	PA; SP
Gammagard Injection Solution	MB/RX	PA; SP; ¥ (PA applies to members 18 years of age and older)
Gammagard S/D Less IgA Intravenous Solution Reconstituted	MB/RX	PA; SP; ¥ (PA applies to members 18 years of age and older)
Gammaked Injection Solution 10 GM/100ML, 20 GM/200ML, 5 GM/50ML	MB/RX	PA; SP; ¥ (PA applies to members 18 years of age and older)
Gammaplex Intravenous Solution 10 GM/100ML, 10 GM/200ML, 20 GM/200ML, 20 GM/400ML, 5 GM/100ML, 5 GM/50ML	MB/RX	PA; SP; ¥ (PA applies to members 18 years of age and older)
Gamunex-C Injection Solution	MB/RX	PA; SP; ¥ (PA applies to members 18 years of age and older)
Hizentra Subcutaneous Solution 1 GM/5ML, 10 GM/50ML, 2 GM/10ML, 4 GM/20ML	MB/RX	PA; SP; ¥ (PA applies to members 18 years of age and older)
Hizentra Subcutaneous Solution Prefilled Syringe	MB/RX	PA; SP; ¥ (PA applies to members 18 years of age and older)
Hyqvia Subcutaneous Kit	MB/RX	PA; SP; ¥ (PA applies to members 18 years of age and older)
Octagam Intravenous Solution	MB/RX	PA; SP; ¥ (PA applies to members 18 years of age and older)
Panzyga Intravenous Solution	MB/RX	PA; SP; ¥ (PA applies to members 18 years of age and older)
Privigen Intravenous Solution	MB/RX	PA; SP; ¥ (PA applies to members 18 years of age and older)

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Drug	Status	Notes
Rhophylac Injection Solution Prefilled Syringe	MB/RX	SP
SYNAGIS INTRAMUSCULAR SOLUTION	$0	PA; SP; QL (2 ML per 1 day)
WinRho SDF Injection Solution	MB/RX	SP
Xembify Subcutaneous Solution	MB/RX	PA; SP; ¥ (PA applies to members 18 years of age and older)
Zinplava Intravenous Solution	MB/RX	
PENICILLINS		
amoxicillin oral capsule	$3.65	
amoxicillin oral suspension reconstituted	$3.65	
amoxicillin oral tablet	$3.65	
amoxicillin oral tablet chewable 125 mg, 250 mg	$3.65	
amoxicillin-pot clavulanate er oral tablet extended release 12 hour	$3.65	
amoxicillin-pot clavulanate oral suspension reconstituted	$3.65	
amoxicillin-pot clavulanate oral tablet	$3.65	
amoxicillin-pot clavulanate oral tablet chewable	$3.65	
ampicillin oral capsule	$3.65	
ampicillin oral suspension reconstituted	$3.65	
AUGMENTIN ORAL SUSPENSION RECONSTITUTED 125-31.25 MG/5ML	$3.65	
dicloxacillin sodium oral capsule	$3.65	
penicillin g procaine intramuscular suspension	$3.65	
penicillin v potassium oral solution reconstituted	$3.65	
penicillin v potassium oral tablet	$3.65	
PHARMACEUTICAL ADJUVANTS		
polyethylene glycol 3350 powder	$0	
PROGESTINS		
HYDROXYprogesterone Caproate Intramuscular Oil	MB/RX	¥ (Single Dose Vial Preferred); QL (1 ML per 7 days)
medroxyprogesterone acetate oral tablet	$3.65	
megestrol acetate oral suspension 625 mg/5ml	$3.65	
norethindrone acetate oral tablet	$3.65	
progesterone intramuscular oil	$3.65	PA
progesterone micronized oral capsule	$3.65	

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Drug	Status	Notes
progesterone micronized transdermal cream	$3.65	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
acamprosate calcium oral tablet delayed release	$0	¥ (Can be filled for up to a 90 day supply)
AUBAGIO ORAL TABLET	$3.65	PA; SP; QL (30 EA per 30 days)
AUSTEDO ORAL TABLET 12 MG	$3.65	PA; SP; QL (4 EA per 1 day)
AUSTEDO ORAL TABLET 6 MG, 9 MG	$3.65	PA; SP; QL (60 EA per 30 days)
AVONEX PEN INTRAMUSCULAR AUTO-INJECTOR KIT	$3.65	SP; QL (4 auto-injectors per 28 days)
AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT	$3.65	SP; QL (4 syringes per 28 days)
BAFIERTAM ORAL CAPSULE DELAYED RELEASE	$3.65	PA; SP; QL (4 capsules per 1 day)
BETASERON SUBCUTANEOUS KIT	$3.65	SP; QL (15 vials per 30 days)
BUPROBAN ORAL TABLET EXTENDED RELEASE 12 HOUR	$0	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
bupropion hcl er (smoking det) oral tablet extended release 12 hour	$0	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML	$3.65	SP; Brand Preferred; QL (30 ML per 30 days)
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/ML	$3.65	SP; Brand Preferred; QL (12 ML per 28 days)
dalfampridine er oral tablet extended release 12 hour	$3.65	PA; SP; QL (60 EA per 30 days)
disulfiram oral tablet	$0	
donepezil hcl oral tablet 10 mg, 5 mg	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
donepezil hcl oral tablet dispersible	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
eq nicotine mouth/throat gum 4 mg	$0	

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Drug	Status	Notes
eq nicotine mouth/throat lozenge	$0	
eq nicotine polacrilex mouth/throat gum	$0	
eq nicotine polacrilex mouth/throat lozenge	$0	
eq nicotine step 3 transdermal patch 24 hour	$0	
eq nicotine transdermal patch 24 hour	$0	
eql nicotine polacrilex mouth/throat gum	$0	
eql nicotine polacrilex mouth/throat lozenge	$0	
eql nicotine transdermal patch 24 hour	$0	
ergoloid mesylates oral tablet	$3.65	
EXTAVIA SUBCUTANEOUS KIT	$3.65	SP; QL (15 vials per 30 days)
fluoxetine hcl (pmdd) oral tablet	$3.65	PA
galantamine hydrobromide er oral capsule extended release 24 hour	$3.65	¥ (Can be filled for up to a 90 day supply)
galantamine hydrobromide oral solution	$3.65	¥ (Can be filled for up to a 90 day supply)
galantamine hydrobromide oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
GILENYA ORAL CAPSULE	$3.65	PA; SP; Brand Preferred; QL (30 EA per 30 days)
GLATOPA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML	$3.65	PA; SP; QL (30 ML per 30 days)
GLATOPA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/ML	$3.65	PA; SP; QL (12 ML per 28 days)
gnp nicotine mini mouth/throat lozenge 2 mg	$0	
gnp nicotine polacrilex mouth/throat gum	$0	
gnp nicotine polacrilex mouth/throat lozenge	$0	
GRALISE ORAL TABLET	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (90 EA per 30 days)
GRALISE STARTER ORAL	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age)
hm nicotine polacrilex mouth/throat gum	$0	
hm nicotine polacrilex mouth/throat lozenge	$0	

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Drug	Status	Notes
hm nicotine transdermal patch 24 hour	$0	
HORIZANT ORAL TABLET EXTENDED RELEASE	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (60 EA per 30 days)
INGREZZA ORAL CAPSULE 40 MG, 80 MG	$3.65	PA; QL (1 EA per 1 day)
INGREZZA ORAL CAPSULE THERAPY PACK	$3.65	PA; QL (1 Fill per 1 Lifetime)
KESIMPTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	$3.65	PA; SP; QL (1 auto-injector per 30 days)
LEMTRADA INTRAVENOUS SOLUTION	Medical Benefit	PA
LUCEMYRA ORAL TABLET	$3.65	QL (132 EA per 1 Fill)
MAVENCLAD (10 TABS) ORAL TABLET THERAPY PACK	$3.65	PA; SP; QL (10 EA per 30 days)
MAVENCLAD (4 TABS) ORAL TABLET THERAPY PACK	$3.65	PA; SP; QL (10 EA per 30 days)
MAVENCLAD (5 TABS) ORAL TABLET THERAPY PACK	$3.65	PA; SP; QL (10 EA per 30 days)
MAVENCLAD (6 TABS) ORAL TABLET THERAPY PACK	$3.65	PA; SP; QL (10 EA per 30 days)
MAVENCLAD (7 TABS) ORAL TABLET THERAPY PACK	$3.65	PA; SP; QL (10 EA per 30 days)
MAVENCLAD (8 TABS) ORAL TABLET THERAPY PACK	$3.65	PA; SP; QL (10 EA per 30 days)
MAVENCLAD (9 TABS) ORAL TABLET THERAPY PACK	$3.65	PA; SP; QL (10 EA per 30 days)
MAYZENT ORAL TABLET 0.25 MG	$3.65	PA; SP; QL (120 EA per 30 days)
MAYZENT ORAL TABLET 2 MG	$3.65	PA; SP; QL (30 EA per 30 days)
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 0.25 MG	$3.65	PA; SP; QL (1 Pack per 1 Lifetime)
memantine hcl er oral capsule extended release 24 hour	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
memantine hcl oral solution 2 mg/ml	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)

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Drug	Status	Notes
memantine hcl oral tablet	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age)
NAMENDA XR TITRATION PACK ORAL CAPSULE EXTENDED RELEASE 24 HOUR	$3.65	
NICORELIEF MOUTH/THROAT GUM	$0	
nicotine mini mouth/throat lozenge	$0	
nicotine polacrilex mouth/throat gum	$0	
nicotine polacrilex mouth/throat lozenge	$0	
nicotine step 1 transdermal patch 24 hour	$0	
nicotine step 2 transdermal patch 24 hour	$0	
nicotine step 3 transdermal patch 24 hour	$0	
nicotine transdermal patch 24 hour	$0	
NICOTROL INHALATION INHALER	$0	
NICOTROL NS NASAL SOLUTION	$0	
NUEDEXTA ORAL CAPSULE	$3.65	PA
Ocrevus Intravenous Solution	MB/RX	PA; SP
olanzapine-fluoxetine hcl oral capsule	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (30 EA per 30 days)
ONPATTRO INTRAVENOUS SOLUTION	Medical Benefit	PA; Preferred product
paroxetine mesylate oral capsule	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age)
pimozide oral tablet	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age)
pregabalin er oral tablet extended release 24 hour	$3.65	PA; ¥ (Additional PA requirements for members 5 years and under; PBHMI polypharmacy for members less than 18 years of age); QL (30 EA per 30 days)
qc nicotine polacrilex mouth/throat gum	$0	

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ra mini nicotine mouth/throat lozenge	$0	
ra nicotine mouth/throat gum	$0	
ra nicotine polacrilex mouth/throat gum	$0	
ra nicotine polacrilex mouth/throat lozenge	$0	
ra nicotine transdermal patch 24 hour	$0	
REBIF REBIDOSE SUBCUTANEOUS SOLUTION	$3.65	SP
REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR 22 MCG/0.5ML	$3.65	SP; QL (12 auto-injectors per 28 days)
REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR 44 MCG/0.5ML	$3.65	SP; QL (12 syringes per 28 days)
REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION	$3.65	SP
REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	$3.65	SP; QL (1 Fill per 1 Lifetime)
REBIF SUBCUTANEOUS SOLUTION	$3.65	SP
REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	$3.65	SP; QL (12 syringes per 28 days)
REBIF TITRATION PACK SUBCUTANEOUS SOLUTION	$3.65	SP
REBIF TITRATION PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	$3.65	SP; QL (1 Fill per 1 Lifetime)
rivastigmine tartrate oral capsule	$3.65	¥ (Can be filled for up to a 90 day supply)
rivastigmine transdermal patch 24 hour	$3.65	¥ (Can be filled for up to a 90 day supply)
SAVELLA ORAL TABLET	$3.65	STPA; QL (60 EA per 30 days)
SAVELLA TITRATION PACK ORAL	$3.65	STPA; QL (60 EA per 30 days)
sm nicotine mouth/throat gum	$0	
sm nicotine mouth/throat lozenge	$0	
sm nicotine polacrilex mouth/throat gum	$0	
sm nicotine polacrilex mouth/throat lozenge 4 mg	$0	
sm nicotine transdermal patch 24 hour	$0	

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sr nicotine mouth/throat gum	$0	
sw nicotine polacrilex mouth/throat gum	$0	
sw nicotine polacrilex mouth/throat lozenge	$0	
TECFIDERA ORAL	$3.65	PA; SP; ¥ (1 Fill per life of plan); Preferred product; brand preferred; QL (60 EA per 30 days)
TECFIDERA ORAL CAPSULE DELAYED RELEASE	$3.65	PA; SP; Preferred product; brand preferred; QL (60 EA per 30 days)
TEGSEDI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	$3.65	PA; QL (6 ML per 30 days)
tetrabenazine oral tablet 12.5 mg	$3.65	SP; QL (3 EA per 1 day)
tetrabenazine oral tablet 25 mg	$3.65	SP; QL (4 EA per 1 day)
tgt nicotine mouth/throat gum	$0	
tgt nicotine polacrilex mouth/throat gum	$0	
tgt nicotine polacrilex mouth/throat lozenge	$0	
tgt nicotine step one transdermal patch 24 hour	$0	
tgt nicotine step three transdermal patch 24 hour	$0	
tgt nicotine step two transdermal patch 24 hour	$0	
Tysabri Intravenous Concentrate	MB/RX	SP
varenicline tartrate oral tablet	$0	
VUMERITY (STARTER) ORAL CAPSULE DELAYED RELEASE	$3.65	PA; SP; QL (1 fill per 1 lifetime)
VUMERITY ORAL CAPSULE DELAYED RELEASE	$3.65	PA; SP; QL (4 capsules per 1 day)
XYREM ORAL SOLUTION	$3.65	PA
XYWAV ORAL SOLUTION	$3.65	PA
ZEPOSIA 7-DAY STARTER PACK ORAL CAPSULE THERAPY PACK	$3.65	PA; SP; QL (1 Fill per 1 Lifetime)
ZEPOSIA ORAL CAPSULE	$3.65	PA; SP; QL (30 EA per 30 days)
ZEPOSIA STARTER KIT ORAL CAPSULE THERAPY PACK	$3.65	PA; SP; QL (1 Fill per 1 Lifetime)
RESPIRATORY AGENTS - MISC.		
Aralast NP Intravenous Solution Reconstituted 1000 MG, 500 MG	MB/RX	SP
BRONCHITOL INHALATION CAPSULE	$3.65	PA; QL (560 EA per 28 days)

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BRONCHITOL TOLERANCE TEST INHALATION CAPSULE	$3.65	PA; QL (560 EA per 28 days)
ESBRIET ORAL CAPSULE	$3.65	SP; QL (270 EA per 30 days)
ESBRIET ORAL TABLET	$3.65	SP; QL (270 EA per 30 days)
Glassia Intravenous Solution	MB/RX	SP
KALYDECO ORAL PACKET 25 MG	$3.65	PA; Preferred product; QL (56 EA per 28 days)
KALYDECO ORAL PACKET 50 MG, 75 MG	$3.65	PA; Preferred product; QL (60 EA per 30 days)
KALYDECO ORAL TABLET	$3.65	PA; Preferred product; QL (60 EA per 30 days)
OFEV ORAL CAPSULE	$3.65	SP; QL (60 EA per 30 days)
ORKAMBI ORAL PACKET	$3.65	PA; Preferred product; QL (56 EA per 28 days)
ORKAMBI ORAL TABLET	$3.65	PA; Preferred product; QL (120 EA per 30 days)
PULMOZYME INHALATION SOLUTION 1 MG/ML	$3.65	SP
SYMDEKO ORAL TABLET THERAPY PACK	$3.65	PA; Preferred product; QL (56 EA per 28 days)
TRIKAFTA ORAL TABLET THERAPY PACK	$3.65	PA; Preferred product; QL (84 tablets per 28 days)
SULFONAMIDES		
sulfadiazine oral tablet	$3.65	
TETRACYCLINES		
avidoxy oral tablet	$3.65	
doxycycline hyclate oral capsule	$3.65	
doxycycline hyclate oral tablet 100 mg, 20 mg	$3.65	
doxycycline monohydrate oral capsule 100 mg, 50 mg	$3.65	
doxycycline monohydrate oral suspension reconstituted	$3.65	
doxycycline monohydrate oral tablet 100 mg, 50 mg	$3.65	
minocycline hcl oral capsule	$3.65	
MONDOXYNE NL ORAL CAPSULE 100 MG, 50 MG	$3.65	

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MORGIDOX ORAL CAPSULE 100 MG	$3.65	
NUZYRA ORAL TABLET 150 MG	$3.65	
tetracycline hcl oral capsule	$3.65	
THYROID AGENTS		
ARMOUR THYROID ORAL TABLET	$3.65	
LEVO-T ORAL TABLET	$3.65	
levothyroxine sodium oral tablet	$3.65	
LEVOXYL ORAL TABLET	$3.65	
liothyronine sodium oral tablet	$3.65	
methimazole oral tablet	$3.65	
NATURE-THROID ORAL TABLET	$3.65	
np thyroid oral tablet 30 mg, 60 mg, 90 mg	$3.65	
propylthiouracil oral tablet	$3.65	
THYQUIDITY ORAL SOLUTION	$3.65	
THYROLAR-1 ORAL TABLET 60 (12.5-50) MG (MCG)	$3.65	
THYROLAR-1/2 ORAL TABLET 30 (6.25-25) MG (MCG)	$3.65	
THYROLAR-1/4 ORAL TABLET 15 (3.1-12.5) MG (MCG)	$3.65	
THYROLAR-2 ORAL TABLET 120 (25-100) MG (MCG)	$3.65	
THYROLAR-3 ORAL TABLET 180 (37.5-150) MG (MCG)	$3.65	
UNITHROID DIRECT ORAL TABLET	$3.65	
UNITHROID ORAL TABLET	$3.65	
WESTHROID ORAL TABLET 130 MG, 195 MG, 32.5 MG, 65 MG, 97.5 MG	$3.65	
WP THYROID ORAL TABLET	$3.65	
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS		
ACIPHEX SPRINKLE ORAL CAPSULE SPRINKLE	$3.65	PA
amoxicill-clarithro-lansopraz oral	$3.65	

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CARAFATE ORAL SUSPENSION	$3.65	PA; ¥ (PA applies to members 12 years and older)
chlordiazepoxide-clidinium oral capsule	$3.65	PA; ¥ (PA applies to members 5 years of age and under; PBHMI polypharmacy for members less than 18 years of age); ^ (PA required if used in combination with an opioid for at least 60 days in a 90 day period)
cimetidine hcl oral solution 300 mg/5ml	$3.65	
cimetidine oral tablet	$3.65	
CUVPOSA ORAL SOLUTION	$3.65	
DEXILANT ORAL CAPSULE DELAYED RELEASE 60 MG	$3.65	PA
dicyclomine hcl oral capsule	$3.65	
dicyclomine hcl oral solution	$3.65	
dicyclomine hcl oral tablet	$3.65	
DONNATAL ORAL TABLET	$3.65	
esomeprazole magnesium oral capsule delayed release 20 mg	$3.65	PA; ¥ (Rx and OTC require PA. Can be filled for up to a 90 day supply.)
esomeprazole magnesium oral capsule delayed release 40 mg	$3.65	PA; ¥ (Can be filled for up to a 90 day supply)
esomeprazole magnesium oral packet	$3.65	PA
famotidine oral suspension reconstituted	$3.65	
famotidine oral tablet 20 mg, 40 mg	$3.65	
FIRST-LANSOPRAZOLE ORAL SUSPENSION	$3.65	PA; ¥ (PA applies to members 14 and older (No PA required for members 0-13 years of age))
FIRST-OMEPRAZOLE ORAL SUSPENSION	$3.65	PA; ¥ (PA applies to members 14 and older (No PA required for members 0-13 years of age))
glycopyrrolate oral tablet 1 mg, 2 mg	$3.65	
hyoscyamine sulfate er oral tablet extended release 12 hour	$3.65	
hyoscyamine sulfate oral elixir	$3.65	
hyoscyamine sulfate oral solution	$3.65	
hyoscyamine sulfate oral tablet	$3.65	

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hyoscyamine sulfate oral tablet dispersible	$3.65	
hyoscyamine sulfate sublingual tablet sublingual	$3.65	
hyosyne oral elixir	$3.65	
hyosyne oral solution	$3.65	
lansoprazole oral capsule delayed release	$3.65	PA; ¥ (Can be filled for up to a 90 day supply)
lansoprazole oral tablet delayed release dispersible	$3.65	PA; ¥ (Age Limit: Max 2 years. Can be filled for up to a 90 day supply.)
misoprostol oral tablet	$3.65	
NEXIUM 24HR ORAL CAPSULE DELAYED RELEASE	$3.65	PA
NEXIUM 24HR ORAL TABLET DELAYED RELEASE	$3.65	PA
NEXIUM ORAL PACKET 2.5 MG, 5 MG	$3.65	PA
nizatidine oral capsule	$3.65	
nizatidine oral solution	$3.65	
omeprazole oral capsule delayed release	$3.65	¥ (Can be filled for up to a 90 day supply)
OMEPRAZOLE+SYRSPEND SF ALKA ORAL SUSPENSION	$3.65	
omeprazole-sodium bicarbonate oral capsule	$3.65	PA; QL (1 EA per 1 day)
omeprazole-sodium bicarbonate oral packet	$3.65	PA; QL (1 EA per 1 day)
pantoprazole sodium oral packet	$3.65	PA
pantoprazole sodium oral tablet delayed release	$3.65	¥ (Can be filled for up to a 90 day supply)
phenobarbital-belladonna alk oral elixir	$3.65	
PHENOHYTRO ORAL TABLET	$3.65	
PRILOSEC ORAL PACKET	$3.65	PA
PYLERA ORAL CAPSULE	$3.65	
rabeprazole sodium oral tablet delayed release	$3.65	PA; ¥ (Can be filled for up to a 90 day supply)
ranitidine hcl oral capsule	$3.65	
ranitidine hcl oral syrup	$3.65	
ranitidine hcl oral tablet 150 mg, 300 mg	$3.65	

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= Drug specific notes
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PBHMI = Pediatric Behavioral Health Medication Initiative

Drug	Status	Notes
sucralfate oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
URINARY ANTI-INFECTIVES		
URETRON D/S ORAL TABLET	$3.65	
URINARY ANTISPASMODICS		
bethanechol chloride oral tablet	$3.65	
darifenacin hydrobromide er oral tablet extended release 24 hour	$3.65	PA; ¥ (Can be filled for up to a 90 day supply)
flavoxate hcl oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
GELNIQUE TRANSDERMAL GEL	$3.65	PA
GEMTESA ORAL TABLET	$3.65	PA
MYRBETRIQ ORAL SUSPENSION RECONSTITUTED ER	$3.65	PA
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	$3.65	PA
oxybutynin chloride er oral tablet extended release 24 hour	$3.65	¥ (Can be filled for up to a 90 day supply)
oxybutynin chloride oral syrup	$3.65	¥ (Can be filled for up to a 90 day supply)
oxybutynin chloride oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
OXYTROL TRANSDERMAL PATCH TWICE WEEKLY	$3.65	PA
solifenacin succinate oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
tolterodine tartrate er oral capsule extended release 24 hour	$3.65	¥ (Can be filled for up to a 90 day supply)
tolterodine tartrate oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
TOVIAZ ORAL TABLET EXTENDED RELEASE 24 HOUR	$3.65	PA
trospium chloride er oral capsule extended release 24 hour	$3.65	¥ (Can be filled for up to a 90 day supply)
trospium chloride oral tablet	$3.65	¥ (Can be filled for up to a 90 day supply)
VESICARE LS ORAL SUSPENSION	$3.65	PA

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Drug	Status	Notes
VAGINAL AND RELATED PRODUCTS		
AVC VAGINAL VAGINAL CREAM	$3.65	
CLEOCIN VAGINAL SUPPOSITORY	$3.65	
clindamycin phosphate vaginal cream	$3.65	
CRINONE VAGINAL GEL 8 %	$3.65	PA
estradiol vaginal cream	$3.65	
estradiol vaginal tablet	$3.65	
ESTRING VAGINAL RING	$3.65	
FEMRING VAGINAL RING	$3.65	
GYNAZOLE-1 VAGINAL CREAM	$3.65	
INTRAROSA VAGINAL INSERT	$3.65	PA
metronidazole vaginal gel	$3.65	
miconazole 3 vaginal suppository	$3.65	
PREMARIN VAGINAL CREAM	$3.65	
terconazole vaginal cream	$3.65	
terconazole vaginal suppository	$3.65	
VANDAZOLE VAGINAL GEL	$3.65	
ZAZOLE VAGINAL CREAM 0.8 %	$3.65	
ZAZOLE VAGINAL SUPPOSITORY	$3.65	
VASOPRESSORS		
ADRENACLICK INJECTION DEVICE	$3.65	PA; QL (2 EA per 1 Fill)
ADRENACLICK INJECTION SOLUTION AUTO-INJECTOR	$3.65	PA; QL (2 EA per 1 Fill)
ADRENALIN INJECTION SOLUTION	$3.65	
AUVI-Q INJECTION SOLUTION AUTO-INJECTOR 0.1 MG/0.1ML	$3.65	PA; QL (2 EA per 1 day)
droxidopa oral capsule	$3.65	PA
epinephrine injection solution auto-injector 0.15 mg/0.15ml, 0.3 mg/0.3ml	$3.65	QL (2 EA per 1 Fill)
EPIPEN 2-PAK INJECTION SOLUTION AUTO-INJECTOR	$3.65	PA; QL (2 EA per 1 Fill)
EPIPEN JR 2-PAK INJECTION SOLUTION AUTO-INJECTOR	$3.65	PA; QL (2 EA per 1 Fill)
midodrine hcl oral tablet	$3.65	
norepinephrine bitartrate intravenous solution	Medical Benefit	

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Drug	Status	Notes
norepinephrine-dextrose intravenous solution 4-5 mg/250ml-%, 8-5 mg/250ml-%	Medical Benefit	
norepinephrine-dextrose intravenous solution 4-5 mg/500ml-%	Medical Benefit	
norepinephrine-sodium chloride intravenous solution 4-0.9 mg/250ml-%, 8-0.9 mg/250ml-%	Medical Benefit	
norepinephrine-sodium chloride intravenous solution prefilled syringe 0.08-0.9 mg/10ml-%, 0.16-0.9 mg/10ml-%	Medical Benefit	
VITAMINS		
ergocalciferol oral capsule	$3.65	
niacin er oral capsule extended release	$1	¥ (Can be filled for up to a 90 day supply)
phytonadione oral tablet	$3.65	
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut)	$3.65	

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Index

8-MOP 90
abacavir sulfate 74
abacavir sulfate-lamivudine 74
abacavir-lamivudine-zidovudine 74
Abilify Maintena 67
ABILIFY MYCITE 67
abiraterone acetate 57
ABRAXANE 57
ABSORICA LD 90
ABSTRAL 12
acamprosate calcium 139
acarbose 40
ACCU-CHEK SAFE-T PRO LANCETS 119
ACCU-CHEK SOFT TOUCH LANCETS 119
ACCU-CHEK SOFTCLIX LANCETS 119
acebutolol hcl 78
acetaminophen-codeine 12, 13
acetaminophen-codeine #2 12
acetaminophen-codeine #3 12
acetaminophen-codeine #4 12
ACETASOL HC 136
acetazolamide 101
acetazolamide er 101
acetic acid 136
acetic acid-aluminum acetate ... 136
acetylcysteine 89
ACIPHEX SPRINKLE 146
acitretin 90
acne medication 5 90
Actemra 9
ACTEMRA 9
ACTEMRA ACTPEN 9
ACTHAR 103
ACTIMMUNE 57
ACTOPLUS MET XR 40
acyclovir 74, 90
ACZONE 90
ADAKVEO 113
adapalene 90
ADDERALL XR 3
adefovir dipivoxil 74
ADEMPAS 81
ADMELOG 40
ADMELOG SOLOSTAR 40
ADRENACLICK 150
ADRENALIN 131, 150
ADVAIR DISKUS 22
ADVAIR HFA 22
Advate 111
ADVICOR 49
Adynovate 111
ADZENYS ER 3
ADZENYS XR-ODT 3
AEMCOLO 54
AEROSPAN 22
AFEDITAB CR 79
AFINITOR 57
AFINITOR DISPERZ 57
Afstyla 111
AIMOVIG 124
AJOVY 124
AKYNZEO 47
ala-cort 90
albendazole 18
albuterol sulfate 22, 23
albuterol sulfate er 22
albuterol sulfate hfa 22
alclometasone dipropionate 90
ALDACTAZIDE 101
Aldurazyme 103
ALECENSA 57
alendronate sodium 103
Alferon N 57
alfuzosin hcl er 110
ALINIA 54
ALIQOPA 57
aliskiren fumarate 51
allopurinol 111
almotriptan malate 124
ALOCRIL 132
alogliptin benzoate 40
alogliptin-metformin hcl 40
alogliptin-pioglitazone 40
ALOMIDE 132
alosetron hcl 108
Aloxi 47
ALPHAGAN P 132
Alphanate 111
Alphanate/VWF Complex/Human 111
AlphaNine SD 111
alphatrex 90
alprazolam 19
alprazolam er 19
ALPRAZOLAM INTENSOL .. 19
alprazolam xr 19
Alprolix 111
ALREX 132
ALTABAX 90
ALTAVERA 83
ALTRENO 91
ALUNBRIG 57
ALVESCO 23
alyacen 1/35 83
alyacen 7/7/7 83
ALYQ 81
amantadine hcl 65
ambrisentan 81
amcinonide 91
AMETHIA 83
AMETHIA LO 83
AMETHYST 83
amiloride hcl 101
amiloride-hydrochlorothiazide . 101
aminocaproic acid 116
amiodarone hcl 21
amitriptyline hcl 34
amlodipine besy-benazepril hcl .. 51
amlodipine besylate 79
amlodipine besylate-valsartan 51
amlodipine-atorvastatin 81
amlodipine-olmesartan 51
amlodipine-valsartan-hctz 51
ammonium lactate 91
AMNESTEEM 91
amondys 45 131
amoxapine 34
amoxicill-clarithro-lansopraz ... 146
amoxicillin 138
amoxicillin-pot clavulanate 138
amoxicillin-pot clavulanate er .. 138
amphetamine-dextroamphetamine 3
ampicillin 138
ANADROL-50 17
anagrelide hcl 111
anastrozole 57
ANDRODERM 17
ANORO ELLIPTA 23
ANTARA 49
antipyrine-benzocaine 136
anucort-hc 18
ANUSOL-HC 18
ANZEMET 47
APADAZ 13
APEXICON E 91
APIDRA 40
APIDRA SOLOSTAR 40
APOKYN 65
APPFORMIN-D 40

aprepitant 47
APRI 83
APTIOM 27
APTIVUS 74
Aralast NP 144
ARANELLE 83
ARANESP (ALBUMIN FREE) 113
ARCALYST 9
ARIKAYCE 8
aripiprazole 67
Aristada 67, 68
Aristada Initio 67
armodafinil 3
ARMOUR THYROID 146
ARNUITY ELLIPTA 23
Arzerra 57
Asceniv 137
ASCOMP-CODEINE 13
asenapine maleate 68
ASHLYNA 83
ASMANEX (120 METERED DOSES) 23
ASMANEX (14 METERED DOSES) 23
ASMANEX (30 METERED DOSES) 23
ASMANEX (60 METERED DOSES) 23
ASMANEX (7 METERED DOSES) 23
ASMANEX HFA 23
aspirin-dipyridamole er 111
ASTAGRAF XL 126
AT LAST LANCETS 119
atazanavir sulfate 74
atenolol 78
atenolol-chlorthalidone 51
atomoxetine hcl 3
atorvastatin calcium 49
atovaquone 54
atovaquone-proguanil hcl 56
atropine sulfate 132
ATROVENT HFA 23
AUBAGIO 139
AUBRA 83
AUGMENTIN 138
AURYXIA 108
AUSTEDO 139
AUVI-Q 150
AVANDAMET 40
AVANDARYL 40
AVANDIA 40
AVAR CLEANSER 91
Avastin 57
AVC VAGINAL 150
AVEED 17
AVIANE 83
avidoxy 145
AVITA 91
AVONEX PEN 139
AVONEX PREFILLED 139
AVSOLA 108
AYVAKIT 57
AzaCITIDine 57
AZASITE 132
azathioprine 126
azelaic acid 91
azelastine hcl 131, 132
AZELEX 91
azithromycin 119
AZURETTE 83
bacitracin 132
bacitracin-polymyxin b 132
bacitra-neomycin-polymyxin-hc 132
baclofen 130
BACTROBAN NASAL 131
BAFIERTAM 139
balsalazide disodium 108
BALVERSA 57
BALZIVA 83
BANZEL 27
BAQSIMI ONE PACK 40
BAQSIMI TWO PACK 40
BARACLUDE 74
BASAGLAR KWIKPEN 40
BAXDELA 108
BD INSULIN SYRINGE 120
BD INSULIN SYRINGE MICROFINE 120
BD INSULIN SYRINGE U/F 120
BD INSULIN SYRINGE ULTRAFINE 120
BD LANCET ULTRAFINE 33G 120
BD SAFETY-LOK INSULIN SYRINGE 120
BD SYRINGE SLIP TIP 120
Bebulin 111
BECONASE AQ 131
BEKYREE 83
BELBUCA 13
Beleodaq 57
BELSOMRA 116
benazepril hcl 51
benazepril-hydrochlorothiazide .. 51
BENDEKA 57
BeneFIX 111
Benlysta 126
BENLYSTA 126, 127
benznidazole 18
benzonatate 89
benzoyl peroxide 91
benzoyl peroxide cleanser 91
benzoyl peroxide creamy wash ... 91
benzoyl peroxide wash 91
benzoyl peroxide-erythromycin ... 91
benztropine mesylate 65
bepotastine besilate 132
Berinert 111
BESIVANCE 132
Besponsa 57
betamethasone dipropionate 91
betamethasone dipropionate aug 91
betamethasone valerate 91
BETASERON 139
betaxolol hcl 78, 132
bethanechol chloride 149
BETIMOL 132
BETOPTIC-S 132
bexarotene 57
bicalutamide 57
BIDIL 81
BIKTARVY 74
bimatoprost 132
bisoprolol fumarate 78
bisoprolol-hydrochlorothiazide .. 51
Bivigam 137
BLEPHAMIDE 132
BLEPHAMIDE S.O.P. 132
BLISOVI 24 FE 83
BLISOVI FE 1.5/30 83
BLISOVI FE 1/20 83
BONJESTA 47
bosentan 81
BOSULIF 58
Botox 131
bp foaming wash 91
bp folinatal plus b 129
bp multinatal plus 129
bp wash 91, 92
bpo 92
BRAFTOVI 58
BREO ELLIPTA 23
briellyn 83

BRILINTA ... 111
brimonidine tartrate ... 132
Brineura ... 103
brinzolamide ... 133
BRIVIACT ... 27
bromfenac sodium ... 133
bromfenac sodium (once-daily) 133
bromocriptine mesylate ... 65
BRONCHITOL ... 144
BRONCHITOL TOLERANCE TEST ... 145
BRUKINSA ... 58
BRYHALI ... 92
budesonide ... 23, 88, 131
budesonide er ... 88
bumetanide ... 101
BUNAVAIL ... 13
buprenorphine ... 13
buprenorphine hcl ... 13
buprenorphine hcl-naloxone hcl . 13
BUPROBAN ... 139
bupropion hcl ... 35
bupropion hcl er (smoking det) . 139
bupropion hcl er (sr) ... 34
bupropion hcl er (xl) ... 34
buspirone hcl ... 20
butalbital-acetaminophen ... 12
butalbital-apap-caffeine ... 12
butalbital-asa-caff-codeine ... 13
butalbital-aspirin-caffeine ... 12
butorphanol tartrate ... 13
BYDUREON ... 40
BYDUREON BCISE ... 40
BYETTA 10 MCG PEN ... 40
BYETTA 5 MCG PEN ... 40
BYLVAY ... 108
BYLVAY (PELLETS) ... 108
BYNFEZIA PEN ... 103
cabenuva ... 74
cabergoline ... 103
CABLIVI ... 111
CABOMETYX ... 58
CAFERGOT ... 124
caffeine citrate ... 3
calcipotriene ... 92
calcipotriene-betameth diprop ... 92
calcitonin (salmon) ... 103
CALCITRENE ... 92
calcitriol ... 92, 103
calcium acetate (phos binder) ... 108
CALQUENCE ... 58
CAMILA ... 83
CAMRESE ... 84
CAMRESE LO ... 83
candesartan cilexetil ... 51
candesartan cilexetil-hctz ... 52
CAPACET ... 12
capecitabine ... 58
CAPEX ... 92
CAPITAL/CODEINE ... 13
CAPLYTA ... 68
CAPRELSA ... 58
captopril ... 52
captopril-hydrochlorothiazide ... 52
CARAFATE ... 147
CARBAGLU ... 103
carbamazepine ... 27
carbamazepine er ... 27
carbidopa ... 65
carbidopa-levodopa ... 65, 66
carbidopa-levodopa er ... 65
carbidopa-levodopa-entacapone 66
CARDIZEM LA ... 79
CARDURA XL ... 110
Carimune NF ... 137
carisoprodol ... 130
carisoprodol-aspirin ... 130
carteolol hcl ... 133
CARTIA XT ... 79
carvedilol ... 78
carvedilol phosphate er ... 78
CAVAREST ... 128
CAVIRINSE ... 128
CAYSTON ... 54
CAZIANT ... 84
CEDAX ... 82
cefaclor ... 82
cefaclor er ... 82
cefadroxil ... 82
cefdinir ... 82
cefditoren pivoxil ... 82
cefixime ... 82
cefpodoxime proxetil ... 82
cefprozil ... 83
ceftibuten ... 83
CEFTIN ... 83
CefTRIAXone Sodium ... 83
cefuroxime axetil ... 83
celecoxib ... 9
CELONTIN ... 28
CENTANY ... 92
cephalexin ... 83
CEQUA ... 133
CERDELGA ... 113
Cerezyme ... 113
CEROVEL ... 92
CESAMET ... 47
cetirizine hcl ... 48
cevimeline hcl ... 128
CHATEAL ... 84
CHEMET ... 46
chlordiazepoxide hcl ... 20
chlordiazepoxide-clidinium ... 147
chlorhexidine gluconate ... 128
chloroquine phosphate ... 56
chlorothiazide ... 102
chlorpromazine hcl ... 68
chlorpropamide ... 40
chlorthalidone ... 102
chlorzoxazone ... 130
CHOLBAM ... 108
cholestyramine ... 49
cholestyramine light ... 49
choline & mag trisalicylate ... 12
choline-mag trisalicylate ... 12
CICLODAN ... 92
ciclopirox ... 92
ciclopirox olamine ... 92
CIDALEAZE ... 92
cilostazol ... 111
CILOXAN ... 133
CIMDUO ... 74
cimetidine ... 147
cimetidine hcl ... 147
CIMZIA ... 109
CIMZIA PREFILLED ... 109
CIMZIA STARTER KIT ... 109
cinacalcet hcl ... 103
Cinqair ... 23
Cinryze ... 111
Cinvanti ... 47
CIPRO ... 108
CIPRO HC ... 136
ciprofloxacin ... 108
ciprofloxacin hcl ... 108, 133
ciprofloxacin-ciproflox hcl er ... 108
ciprofloxacin-dexamethasone ... 136
citalopram hydrobromide ... 35
CLARAVIS ... 92
CLARINEX ... 48
CLARINEX-D 12 HOUR ... 89
clarithromycin ... 119
clarithromycin er ... 119
CLEANLET LANCETS 28G 120
CLEARPLEX X ... 92
clemastine fumarate ... 48

CLEOCIN 150
CLIMARA PRO 107
CLINDAMAX 92
clindamycin hcl 54
clindamycin palmitate hcl 54
clindamycin phos-benzoyl perox 92
clindamycin phosphate 92, 150
CLINPRO 5000 128
clobazam 28
clobetasol prop emollient base 92
clobetasol propionate 92, 93
clobetasol propionate e 92
clocortolone pivalate 93
clocortolone pivalate pump 93
CLODAN 93
clomipramine hcl 35
clonazepam 28
clonidine hcl 52
clonidine hcl er 4
clopidogrel bisulfate 111
clorazepate dipotassium 20
CLORPRES 52
clotrimazole 93, 128
clotrimazole anti-fungal 93
clotrimazole-betamethasone 93
clozapine 68
Coagadex 111
COARTEM 56
codeine sulfate 13
colchicine 111
colchicine-probenecid 111
colesevelam hcl 49
colestipol hcl 49
COLOCORT 18
COMBIGAN 133
COMBIPATCH 107
COMBIVENT RESPIMAT 23
COMETRIQ (100 MG DAILY DOSE) 58
COMETRIQ (140 MG DAILY DOSE) 58
COMETRIQ (60 MG DAILY DOSE) 58
comfort lancets 120
COMPAZINE 68
COMPLERA 74
COMPRO 68
CONCERTA 4
CONDYLOX 93
constulose 118
CONTROLRX 128
COPASIL 93
COPAXONE 139
COPIKTRA 58
CORDRAN 93
Corifact 111
CORLANOR 81
CORMAX SCALP APPLICATION 93
cortisone acetate 88
CORTISPORIN 93
CORTISPORIN-TC 136
COSELA 58
COSENTYX 93
COSENTYX (300 MG DOSE) 93
COSENTYX SENSOREADY (300 MG) 93
COSENTYX SENSOREADY PEN 93
COTELLIC 58
COTEMPLA XR-ODT 4
COVERA-HS 79
CREON 101
CRESEMBA 48
CRINONE 150
CRIXIVAN 74
cromolyn sodium 23, 109, 133
CRYSELLE-28 84
Crysvita 103
Cutaquig 137
Cuvitru 137
CUVPOSA 147
cyanocobalamin 113
CYCLAFEM 1/35 84
CYCLAFEM 7/7/7 84
cyclobenzaprine hcl 130
cyclopentolate hcl 133
cyclophosphamide 58
cycloserine 56
cyclosporine 127
cyclosporine modified 127
cyproheptadine hcl 48
CYRED 84
CYSTADROPS 133
CYSTAGON 110
CYSTARAN 133
Cytogam 137
cytra-2 110
Dacogen 58
daily multi 129
DAKLINZA 74
dalfampridine er 139
DALIRESP 24
danazol 17
dantrolene sodium 130
dapsone 54, 93
darifenacin hydrobromide er 149
DARZALEX 58
DASETTA 1/35 84
DASETTA 7/7/7 84
DAURISMO 58
DAYSEE 84
DAYTRANA 4
DEBLITANE 84
Decitabine 58
deferasirox 46
deferasirox granules 46
DELSTRIGO 74
DELTASONE 88
DELYLA 84
DENAVIR 93
DENTA 5000 PLUS 128
DENTAGEL 128
DEPEN TITRATABS 127
DEPO-PROVERA 58
DEPO-SUBQ PROVERA 104 84
DESCOVY 74
desipramine hcl 35
desloratadine 49
desmopressin ace rhinal tube 103
desmopressin ace spray refrig 103
desmopressin acetate 103
desmopressin acetate spray 103
desogestrel-ethinyl estradiol 84
desonide 93, 94
desoximetasone 94
desvenlafaxine er 35
desvenlafaxine fumarate er 35
desvenlafaxine succinate er 35
dexamethasone 88
DEXAMETHASONE INTENSOL 88
dexamethasone sodium phosphate 133
DEXCOM G6 RECEIVER 120
DEXCOM G6 SENSOR 120
DEXCOM G6 TRANSMITTER 120
DEXEDRINE 4
DEXILANT 147
dexmethylphenidate hcl 4
DEXPAK 10 DAY 88
DEXPAK 13 DAY 88
DEXPAK 6 DAY 88
dextroamphetamine sulfate 5
dextroamphetamine sulfate er 4

DIABETA 40
DIACOMIT 28
diazepam 20, 21, 28
DIAZEPAM INTENSOL 20
diazoxide 41
diclofenac epolamine 94
diclofenac potassium 9
diclofenac sodium 9, 94, 133
diclofenac sodium er 9
dicloxacillin sodium 138
dicyclomine hcl 147
didanosine 74
DIFFERIN 94
DIFICID 119
diflorasone diacetate 94
diflunisal 12
difluprednate 133
DIGITEK 81
DIGOX 81
digoxin 81
dihydroergotamine mesylate 124
DILANTIN 28
DILATRATE-SR 18
dilt-cd 79
diltiazem cd 79
diltiazem hcl 79
diltiazem hcl er 79
diltiazem hcl er beads 79
diltiazem hcl er coated beads 79
dilt-xr 80
diltzac 80
dimenhydrinate 47
diphenhydramine hcl 49
diphenoxylate-atropine 46
dipyridamole 112
disopyramide phosphate 22
disulfiram 139
DIURIL 102
divalproex sodium 28
divalproex sodium er 28
DIVIGEL 107
dofetilide 22
DOJOLVI 132
donepezil hcl 139
DONNATAL 147
DOPTELET 113
dorzolamide hcl 133
dorzolamide hcl-timolol mal 133
dorzolamide hcl-timolol mal pf 133
DOVATO 74
doxazosin mesylate 52
doxepin hcl 35, 36, 94
doxercalciferol 103
doxycycline hyclate 145
doxycycline monohydrate 145
doxylamine-pyridoxine 47
DRITHO-CREME HP 94
dronabinol 47
drospiren-eth estrad-levomefol 84
drospirenone-ethinyl estradiol 84
DROXIA 113
droxidopa 150
DRYSOL 94
DUAVEE 107
DULERA 24
duloxetine hcl 36
DUPIXENT 94
dutasteride 110
dutasteride-tamsulosin hcl 110
DYANAVEL XR 5
DYNACIRC CR 80
DYSPORT 131
E.E.S. 400 119
easy comfort insulin syringe 120
EASYGEL 128
econazole nitrate 94
ECOZA 94
EDARBI 52
EDLUAR 116
EDURANT 74
efavirenz 74
efavirenz-emtricitab-tenofovir 74
efavirenz-lamivudine-tenofovir 74
EGRIFTA 103
Elaprase 103
Elelyso 113
ELEPSIA XR 28
ELESTRIN 107
eletriptan hydrobromide 124
ELIDEL 94
Eligard 58
ELINEST 84
ELIQUIS 26
ELIQUIS DVT/PE STARTER PACK 26
ELITE-OB 129
ELIXOPHYLLIN 24
ELLA 84
ELMIRON 110
Eloctate 112
Elspar 58
EMADINE 133
EMBEDA 13
EMCYT 58
Emend 47
EMEND 47
EMFLAZA 89
EMGALITY 125
EMGALITY (300 MG DOSE) 124
EMOQUETTE 84
EMPAVELI 112
EMPLICITI 58
EMSAM 36
emtricitabine 75
emtricitabine-tenofovir df 75
EMTRIVA 75
enalapril maleate 52
enalapril-hydrochlorothiazide 52
ENBREL 9
ENBREL MINI 9
ENBREL SURECLICK 9
ENDARI 114
ENDOCET 13
enoxaparin sodium 26
ENPRESSE-28 84
ENSKYCE 84
ENSPRYNG 127
entacapone 66
entecavir 75
ENTRESTO 81
Entyvio 109
enulose 109
EPANED 52
EPIDIOLEX 29
EPIFOAM 94
epinastine hcl 133
epinephrine 150
epinephrine hcl 24
EPIPEN 2-PAK 150
EPIPEN JR 2-PAK 150
EpiRUBicin HCl 58
EPITOL 29
eplerenone 52
EPOGEN 114
Epoprostenol Sodium 81
eprosartan mesylate 52
eq nicotine 139, 140
eq nicotine polacrilex 140
eq nicotine step 3 140
eql nicotine 140
eql nicotine polacrilex 140
Erbitux 58
ergocalciferol 151
ergoloid mesylates 140
ERGOMAR 125

ERIVEDGE 58
erlotinib hcl 58
ERRIN 84
ERY-TAB 119
ERYTHROCIN STEARATE 119
erythromycin 94, 133
erythromycin base 119
erythromycin ethylsuccinate 119
ESBRIET 145
ESCAVITE 129
ESCAVITE D 129
escitalopram oxalate 36
esomeprazole magnesium 147
Esperoct 112
est estrogens-methyltest 107
est estrogens-methyltest hs 107
ESTARYLLA 84
estazolam 116
estradiol 107, 150
estradiol-norethindrone acet 107
ESTRING 150
ESTROGEL 107
estropipate 107
eszopiclone 117
Ethacrynate Sodium 102
ethambutol hcl 56
ethosuximide 29
etidronate disodium 103
etodolac 9
etodolac er 9
etonogestrel-ethinyl estradiol 84
etoposide 58
etravirine 75
EUCRISA 94
EUFLEXXA 130
EURAX 94
EVAMIST 107
Evenity 103
everolimus 127
EVKEEZA 49
EVOTAZ 75
EXELDERM 94, 95
exemestane 59
Exondys 51 131
EXSERVAN 131
EXTAVIA 140
Eylea 133
EZALLOR SPRINKLE 49
ezetimibe 49
ezetimibe-simvastatin 50
EZ-LETS LANCETS 26G 120
FABIOR 95
Fabrazyme 103
FACTIVE 108
FALMINA 84
famciclovir 75
famotidine 147
FANAPT 68
FANAPT TITRATION PACK 68
FARXIGA 41
FARYDAK 59
Fasenra 24
FASENRA PEN 24
FAYOSIM 84
febuxostat 111
Feiba 112
felbamate 29
felodipine er 80
FEMRING 150
fenofibrate 50
fenofibrate micronized 50
fenofibric acid 50
fenoprofen calcium 9
FENSOLVI (6 MONTH) 104
fentanyl 13
fentanyl citrate 13
FENTORA 13
FERRIPROX 46
FERRIPROX TWICE-A-DAY 46
ferrous sulfate 114
FETZIMA 36
FETZIMA TITRATION 36
FIASP 41
FIASP FLEXTOUCH 41
FIASP PENFILL 41
FINACEA 95
finasteride 110
FINGERSTIX LANCETS 120
FINTEPLA 29
FIRDAPSE 56
Firmagon 59
FIRST-BXN MOUTHWASH 128
FIRST-DUKES MOUTHWASH 128
FIRST-HYDROCORTISONE 95
FIRST-LANSOPRAZOLE 147
FIRST-MARYS MOUTHWASH 128
FIRST-MOUTHWASH BLM 128
FIRST-OMEPRAZOLE 147
FIRST-VANCOMYCIN 25 55
FIRST-VANCOMYCIN 50 55
FIRVANQ 55
FLAGYL ER 55
FLAREX 133
flavoxate hcl 149
Flebogamma DIF 137
flecainide acetate 22
flolipid 50
FLONASE SENSIMIST 131
FLOVENT DISKUS 24
FLOVENT HFA 24
fluconazole 48
flucytosine 48
fludrocortisone acetate 89
flunisolide 131
fluocinolone acetonide 95, 136
fluocinolone acetonide body 95
fluocinolone acetonide scalp 95
fluocinonide 95
FLUORABON 126
FLUOR-A-DAY 126
FLUORIDEX DAILY DEFENSE 128
FLUORIDEX ENHANCED WHITENING 128
FLUORIDEX SENSITIVITY RELIEF 128
fluorometholone 133
FLUOROPLEX 95
fluorouracil 95
fluoxetine hcl 36, 37
fluoxetine hcl (pmdd) 140
fluphenazine decanoate 69
fluphenazine hcl 69
FLURA-DROPS 126
flurandrenolide 95
flurazepam hcl 117
flurbiprofen 9
flurbiprofen sodium 133
flutamide 59
fluticasone propionate 95, 131
fluticasone-salmeterol 24
fluvastatin sodium 50
fluvastatin sodium er 50
fluvoxamine maleate 37
fluvoxamine maleate er 37
FML 133
FML FORTE 133
FOCALIN XR 5
folbee 114
folic acid 114
fondaparinux sodium 26
formoterol fumarate 24

FORTICAL 104
FOSAMAX PLUS D 104
fosamprenavir calcium 75
fosfomycin tromethamine 55
fosinopril sodium 52
fosinopril sodium-hctz 52
FOSRENOL 109
FRAGMIN 26
FREESTYLE INSULINX TEST 101
FREESTYLE LANCETS 120
FREESTYLE LIBRE 14 DAY READER 120
FREESTYLE LIBRE 14 DAY SENSOR 120
FREESTYLE LIBRE 2 READER 120
FREESTYLE LIBRE 2 SENSOR 120
FREESTYLE LITE TEST 101
FREESTYLE PRECISION NEO TEST 101
FREESTYLE TEST 101
frovatriptan succinate 125
FULPHILA 114
furosemide 102
FUZEON 75
FYCOMPA 29
gabapentin 29
GALAFOLD 104
galantamine hydrobromide 140
galantamine hydrobromide er 140
GamaSTAN S/D 137
Gammagard 137
Gammagard S/D Less IgA 137
Gammaked 137
Gammaplex 137
Gamunex-C 137
gatifloxacin 133
GATTEX 109
GAVILYTE-C 118
GAVILYTE-G 118
GAVILYTE-H 118
GAVRETO 59
Gazyva 59
GEBAUERS PAIN EASE 95
GEBAUERS SPRAY AND STRETCH 95
GELNIQUE 149
gemfibrozil 50
GEMTESA 149
generlac 109
GENGRAF 127
GENOTROPIN 104
GENOTROPIN MINIQUICK 104
GENTAK 133
gentamicin sulfate 95, 133
GENTLE-LET GP LANCETS 120
GENTLE-LET LANCETS 120
GENVOYA 75
Geodon 69
GIANVI 84
GILDAGIA 84
GILDESS 1.5/30 84
GILDESS 1/20 84
GILDESS 24 FE 84
GILDESS FE 1.5/30 84
GILDESS FE 1/20 85
GILENYA 140
GILOTRIF 59
GILPHEX TR 89
GIVLAARI 112
Glassia 145
GLATOPA 140
GLEOSTINE 59
glimepiride 41
glipizide 41
glipizide er 41
glipizide xl 41
glipizide-metformin hcl 41
GLUCAGEN HYPOKIT 41
glucagon emergency 41
GLUCOSOURCE LANCETS 121
glyburide 41
glyburide micronized 41
glyburide-metformin 41
glycopyrrolate 147
glycron 41
GLYDO 95
GLYXAMBI 41
gnp lancets 121
gnp nicotine mini 140
gnp nicotine polacrilex 140
gnp ultra com insulin syringe 121
GOCOVRI 66
GOLYTELY 118
gordons urea 95
GRALISE 140
GRALISE STARTER 140
granisetron hcl 47
GRANIX 114
griseofulvin microsize 48
griseofulvin ultramicrosize 48
guaifenesin er 90
guaifenesin-codeine 90
guanfacine hcl 52
guanfacine hcl er 5
guanidine hcl 56
GVOKE PFS 41
GYNAZOLE-1 150
HAEGARDA 112
HAEMOLANCE LOW FLOW LANCETS 121
Halaven 59
halcinonide 95
halobetasol propionate 95
HALOG 95
haloperidol 69
haloperidol decanoate 69
haloperidol lactate 69
HEATHER 85
Helixate FS 112
HEMLIBRA 112
HEMMOREX-HC 18
Hemofil M 112
heparin (porcine) in nacl 26
heparin sodium (porcine) 26
HERCEPTIN 59
HERCEPTIN HYLECTA 59
HETLIOZ 117
HETLIOZ LQ 117
HEXALEN 59
Hizentra 137
hm nicotine 141
hm nicotine polacrilex 140
HOMATROPAIRE 134
homatropine hbr 134
HORIZANT 141
HUMALOG 42
HUMALOG JUNIOR KWIKPEN 41
HUMALOG KWIKPEN 41, 42
HUMALOG MIX 50/50 42
HUMALOG MIX 50/50 KWIKPEN 42
HUMALOG MIX 75/25 42
HUMALOG MIX 75/25 KWIKPEN 42
HUMALOG MIX 75/25 PEN 42
HUMALOG PEN 42
Humate-P 112
HUMATROPE 104
HUMIRA 10

HUMIRA PEDIATRIC CROHNS START 10
HUMIRA PEN 10
HUMIRA PEN-CD/UC/HS STARTER 10
HUMIRA PEN-PEDIATRIC UC START 10
HUMIRA PEN-PS/UV/ADOL HS START 10
HUMIRA PEN-PSOR/UVEIT STARTER 10
HUMULIN 70/30 42
HUMULIN 70/30 KWIKPEN 42
HUMULIN N 42
HUMULIN N KWIKPEN 42
HUMULIN R 42
HUMULIN R U-500 (CONCENTRATED) 42
HUMULIN R U-500 KWIKPEN 43
HYCAMTIN 59
hydralazine hcl 52
hydrochlorothiazide 102
hydrocodone-acetaminophen 14
hydrocodone-ibuprofen 14
hydrocortisone 18, 89, 96
hydrocortisone ace-pramoxine 96
hydrocortisone acetate 18
hydrocortisone butyrate 96
hydrocortisone valerate 96
hydrocortisone-acetic acid 136
hydromorphone hcl 14
hydromorphone hcl er 14
hydroxychloroquine sulfate 56
HYDROXYprogesterone Caproate 138
hydroxyurea 59
hydroxyzine hcl 21
hydroxyzine pamoate 21
HYOPHEN 55
hyoscyamine sulfate 147, 148
hyoscyamine sulfate er 147
hyosyne 148
HYPERSAL 90
Hyqvia 137
HY-VEE LANCETS 121
hy-vee thin lancets 121
Ibandronate Sodium 104
ibandronate sodium 104
IBRANCE 59
ibuprofen 10
icatibant acetate 112
ICLUSIG 59
Idelvion 112
IDHIFA 59
Ilaris 10
Ilaris (150mg Delivered) 10
ILEVRO 134
ILOTYCIN 134
Ilumya 96
imatinib mesylate 59
IMBRUVICA 59
IMCIVREE 5
Imfinzi 59
imipramine hcl 37
imipramine pamoate 37
imiquimod 96
imiquimod pump 96
IMLYGIC 59
IMPAVIDO 55
INATAL ADVANCE 129
INBRIJA 66
INCRELEX 104
INCRUSE ELLIPTA 24
indapamide 102
INDOCIN 10
indomethacin 10
indomethacin er 10
Inflectra 109
INGREZZA 141
INLYTA 59
INQOVI 59
INREBIC 59
insulin syringe 121
insulin syringe/needle 121
INTELENCE 75
INTRAROSA 150
INTROL 102
Intron A 59
INTROVALE 85
Invega Sustenna 70
Invega Trinza 70
INVELTYS 134
INVIRASE 75
INVOKAMET 43
INVOKAMET XR 43
INVOKANA 43
ipratropium bromide 24, 131
ipratropium-albuterol 24
IPRIVASK 26
irbesartan 53
irbesartan-hydrochlorothiazide 53
IRESSA 59
ISENTRESS 75
ISENTRESS HD 75
isometheptene-dichloral-apap 125
isoniazid 56
ISOPTO CARBACHOL 134
ISOPTO HYOSCINE 134
ISORDIL TITRADOSE 18
isosorbide dinitrate 18
isosorbide dinitrate er 18
isosorbide mononitrate 18
isosorbide mononitrate er 18
isotretinoin 96
isradipine 80
Istodax 59
ISTURISA 104
itraconazole 48
ivermectin 18, 96
Ixempra Kit 59
Ixinity 112
JAKAFI 59
JANTOVEN 26
JANUMET 43
JANUMET XR 43
JANUVIA 43
JARDIANCE 43
JATENZO 17
JENCYCLA 85
JENTADUETO 43
JENTADUETO XR 43
Jevtana 60
Jivi 112
JOLESSA 85
JOLIVETTE 85
JORNAY PM 5
JUBLIA 96
JULEBER 85
JULUCA 75
JUNEL 1.5/30 85
JUNEL 1/20 85
JUNEL FE 1.5/30 85
JUNEL FE 1/20 85
JUNEL FE 24 85
JUXTAPID 50
JYNARQUE 104
K.B.G.L IN TERODERM 96
Kadcyla 60
KADIAN 14
KAITLIB FE 85
KALYDECO 145
KANUMA 104
KARIGEL 128
KARIGEL-N 129
KARIVA 85

KELNOR 1/35 85
KENALOG 89
KERENDIA 104
KESIMPTA 141
KETEK 55
ketoconazole 48, 96
KETODAN 96
ketoprofen 10
ketoprofen er 10
ketorolac tromethamine 10, 11, 134
ketotifen fumarate 134
KEVEYIS 102
KEVZARA 11
KIMIDESS 85
KINERET 11
kinney lancets 121
kinney thin lancets 121
kinray insulin syringe 121
KIONEX 127
KISQALI (200 MG DOSE) 60
KISQALI (400 MG DOSE) 60
KISQALI (600 MG DOSE) 60
KISQALI 200 DOSE 60
KISQALI 400 DOSE 60
KISQALI 600 DOSE 60
KISQALI FEMARA (400 MG DOSE) 60
KISQALI FEMARA (600 MG DOSE) 60
KISQALI FEMARA(200 MG DOSE) 60
KLOR-CON M15 126
Koate 112
Koate-DVI 112
Kogenate FS 112
Kogenate FS Bio-Set 112
KOMBIGLYZE XR 43
KORLYM 43
KOSELUGO 60
Kovaltry 112
kp clotrimazole 96
K-PHOS 126
K-PHOS NO 2 110
KRINTAFEL 56
Krystexxa 111
KURVELO 85
KYLEENA 85
KYNAMRO 50
labetalol hcl 78
lactulose 118
lactulose encephalopathy 109
LAMISIL 48
LAMISIL SPRAY 96
lamivudine 75
lamivudine-zidovudine 75
lamotrigine 30
lamotrigine er 29
lamotrigine odt 30
lamotrigine starter kit-blue 30
lamotrigine starter kit-green 30
lamotrigine starter kit-orange 30
lamotrigine titration 30
LAMPIT 55
lancets 121
lancets thin 121
LANOXIN 81
lansoprazole 148
lanthanum carbonate 109
LANTUS 43
LANTUS SOLOSTAR 43
LARIN 1.5/30 85
LARIN 1/20 85
LARIN 24 FE 85
LARIN FE 1.5/30 85
LARIN FE 1/20 85
Lartruvo 60
LASTACAFT 134
latanoprost 134
LATRIX 96
LATUDA 70
lavare wound wash 96
LAYOLIS FE 85
LAZANDA 14
ledipasvir-sofosbuvir 75
LEENA 85
leflunomide 11
LEMTRADA 141
LENVIMA (10 MG DAILY DOSE) 60
LENVIMA (12 MG DAILY DOSE) 60
LENVIMA (14 MG DAILY DOSE) 60
LENVIMA (20 MG DAILY DOSE) 60
LENVIMA (24 MG DAILY DOSE) 60
LENVIMA (4 MG DAILY DOSE) 60
LESSINA 85
letrozole 60
leucovorin calcium 60
LEUKERAN 60
LEUKINE 114
levalbuterol hcl 24
LEVATOL 78
levetiracetam 31
levetiracetam er 30
levobunolol hcl 134
levocarnitine 104
levocetirizine dihydrochloride 49
levofloxacin 108, 134
Levoleucovorin Calcium 60
LEVOleucovorin Calcium 60
LEVOleucovorin Calcium PF 61
LEVONEST 85
levonorgest-eth estrad 91-day 85
levonorgestrel 85
levonorgestrel-ethinyl estrad 85
levonorg-eth estrad triphasic 85
LEVORA 0.15/30 (28) 85
LEVO-T 146
levothyroxine sodium 146
LEVOXYL 146
LEXETTE 96
LEXIVA 75
LICART 96
lidocaine 96
lidocaine hcl 96, 97, 119
lidocaine hcl (pf) 118
lidocaine viscous 129
lidocaine-prilocaine 97
lidopin 97
LIDOPROFEN 97
LIFESCAN UNISTIK II LANCETS 121
lindane 97
linezolid 55
liothyronine sodium 146
LIQUICET 14
lisinopril 53
lisinopril-hydrochlorothiazide 53
lite touch lancets 121
lithium 70
lithium carbonate 70
lithium carbonate er 70
LIVALO 50
LO LOESTRIN FE 85
LOKARA 97
LOKELMA 127
LOMEDIA 24 FE 86
lomustine 61
longs lancets thin 121
LONHALA MAGNAIR REFILL KIT 24

LONHALA MAGNAIR STARTER KIT 24
LONSURF 61
loperamide hcl 46
lopinavir-ritonavir 75
lorazepam 21
LORAZEPAM INTENSOL 21
LORBRENA 61
LORCET 14
LORCET HD 14
LORCET PLUS 14
LORTAB 14
LORYNA 86
losartan potassium 53
losartan potassium-hctz 53
LOTEMAX 134
LOTEMAX SM 134
loteprednol etabonate 134
lovastatin 50
LOW-OGESTREL 86
loxapine succinate 71
LOZI-FLUR 126
lubiprostone 109
LUCEMYRA 141
Lucentis 134
LUFYLLIN 24
luliconazole 97
LUMAKRAS 61
Lumizyme 104
LUPKYNIS 127
LUPRON 61
Lupron Depot (1-Month) 61
Lupron Depot (3-Month) 61
Lupron Depot (4-Month) 61
Lupron Depot (6-Month) 61
Lupron Depot-Ped (1-Month) ... 104
Lupron Depot-Ped (3-Month) ... 104
LUTERA 86
LYNPARZA 61
LYSODREN 61
LYZA 86
Macugen 134
magdelay 126
malathion 97
maprotiline hcl 37
margesic 12
marlissa 86
marten-tab 12
MATULANE 61
MATZIM LA 80
MAVENCLAD (10 TABS) 141
MAVENCLAD (4 TABS) 141
MAVENCLAD (5 TABS) 141
MAVENCLAD (6 TABS) 141
MAVENCLAD (7 TABS) 141
MAVENCLAD (8 TABS) 141
MAVENCLAD (9 TABS) 141
MAVYRET 75
MAXIDEX 134
MAYZENT 141
MAYZENT STARTER PACK 141
me/naphos/mb/hyo1 55
meclizine hcl 47
meclofenamate sodium 11
MEDISENSE THIN LANCETS 121
MEDROL 89
medroxyprogesterone acetate ... 138
mefenamic acid 11
mefloquine hcl 56
megestrol acetate 61, 138
MEIJER LANCETS 121
MEKINIST 61
MEKTOVI 61
meloxicam 11
melphalan 61
memantine hcl 141, 142
memantine hcl er 141
meperidine hcl 14
mercaptopurine 61
mesalamine 109
MESNEX 61
MESTINON 56
metaproterenol sulfate 24
metaxalone 130
metformin hcl 44
metformin hcl er 43
metformin hcl er (mod) 43
metformin hcl er (osm) 43
Methadone HCl 14
methadone hcl 15
METHADONE HCL INTENSOL 14
METHADOSE 15
methamphetamine hcl 5
methazolamide 102
methenamine hippurate 55
methenamine mandelate 55
methimazole 146
methitest 17
methocarbamol 130
methotrexate 61
methoxsalen rapid 97
methyclothiazide 102
methyldopa 53
methyldopa-hydrochlorothiazide 53
methylergonovine maleate 136
methylphenidate hcl 6
methylphenidate hcl er 6
methylphenidate hcl er (cd) 5
methylphenidate hcl er (la) 6
methylphenidate hcl er (xr) 6
methylprednisolone 89
methylprednisolone sodium succ 89
methyltestosterone 17
metipranolol 134
metoclopramide hcl 109
metolazone 102
metoprolol succinate er 78
metoprolol tartrate 78
metoprolol-hydrochlorothiazide . 53
metronidazole 55, 97, 150
metyrosine 53
mexiletine hcl 22
MIACALCIN 104
miconazole 3 150
MICROCYN 97
MICROCYN SKIN AND WOUND 97
MICROGESTIN 1.5/30 86
MICROGESTIN 1/20 86
MICROGESTIN 24 FE 86
MICROGESTIN FE 1.5/30 86
MICROGESTIN FE 1/20 86
micronized colestipol hcl 50
MICROTAINER SAFETY FLOW LANCET 121
midodrine hcl 150
MIGERGOT 125
miglitol 44
migragesic ida 125
MIGRANAL 125
MILLIPRED 89
MILLIPRED DP 89
MILLIPRED DP 12-DAY 89
MINITRAN 18
minocycline hcl 145
minoxidil 53
MIRAPEX ER 66
MIRCERA 114
mirtazapine 37
MIRVASO 97
misoprostol 148
Mitoxantrone HCl 61

modafinil 6
MODERIBA 75
moexipril hcl 53
moexipril-hydrochlorothiazide ... 53
mometasone furoate 97, 131
MONDOXYNE NL 145
Monoclate-P 112
MONOJECT CONTROL SYRINGE 121
MONOJECT FILTER ASPIRATOR 121
MONOJECT INSULIN SYRINGE 121
MONOJECT PHARMACY TRAY 121
MONOJECT PISTON SYRINGE 121
MONOJECT SAFETY SYRINGE/SHIELD 122
MONOJECT SYRINGE 122
MONOJECT SYRINGE CATH TIP 122
MONOJECT SYRINGE ECC LUER 122
MONOJECT SYRINGE LUER LOCK 122
MONOJECT SYRINGE REG LUER 122
MONOJECT TB SAFETY SYRINGE 122
MONOJECT TB SYRINGE .. 122
MONOJECT ULTRA COMFORT SYRINGE 122
MONOLET LANCETS 122
MONO-LINYAH 86
MONONESSA 86
Mononine 112
montelukast sodium 24
MORGIDOX 146
morphine sulfate 15
morphine sulfate (concentrate) ... 15
morphine sulfate er 15
morphine sulfate er beads 15
MOVANTIK 109
MOXEZA 134
moxifloxacin hcl 108, 134
MOZOBIL 114
MULPLETA 114
MULTAQ 22
MULTI COMPLETE 129
multi vitamin/fluoride 129
multi vitamin/minerals 129
multi-vit/fluoride 129
multi-vit/fluoride/iron 130
multivitamin/fluoride 130
multi-vitamin/fluoride 130
mupirocin 97
mupirocin calcium 97
MY WAY 86
MYALEPT 104
MYCAPSSA 104
mycophenolate mofetil 127
MYDAYIS 7
MYFEMBREE 108
MYKIDZ IRON FL 130
MYLERAN 61
Mylotarg 61
mynephrocaps 130
MYOBLOC 131
MYORISAN 97
MYRBETRIQ 149
MYZILRA 86
nabumetone 11
n-acetyl-l-cysteine 132
nadolol 78
nadolol-bendroflumethiazide 53
NAFRINSE DAILY ACIDULATED 129
NAFRINSE DAILY/NEUTRAL 129
NAFRINSE WEEKLY 129
naftifine hcl 97
NAFTIN 97
Naglazyme 104
naloxone hcl 46
naltrexone hcl 47
NAMENDA XR TITRATION PACK 142
naphazoline hcl 134
napro 97
naproxen 11
naproxen dr 11
naproxen sodium 11
naratriptan hcl 125
NARCAN 47
NATACYN 134
NATAZIA 86
nateglinide 44
NATPARA 104
NATURE-THROID 146
NAYZILAM 31
nebivolol hcl 78
NEBUPENT 55
NEBUSAL 90
NECON 0.5/35 (28) 86
NECON 1/35 (28) 86
NECON 1/50 (28) 86
NECON 10/11 (28) 86
NECON 7/7/7 86
nefazodone hcl 37
neomycin sulfate 8
neomycin-bacitracin zn-polymyx 134
neomycin-polymyxin-dexameth . 134
neomycin-polymyxin-gramicidin 135
neomycin-polymyxin-hc 135, 136
NEO-POLYCIN 135
NEO-POLYCIN HC 135
NEPHROCAPS QT 130
NERLYNX 61
NEUAC 97
NEULASTA 115
NEULASTA DELIVERY KIT 114, 115
NEULASTA ONPRO 115
NEUPOGEN 115
NEUPRO 66
NEUTRAGARD ADVANCED 129
neutral sodium fluoride 129
NEVANAC 135
nevirapine 75
nevirapine er 75
NEXAVAR 62
NEXIUM 148
NEXIUM 24HR 148
NEXLETOL 50
NEXLIZET 50
NEXT CHOICE 86
NEXT CHOICE ONE DOSE .. 86
niacin er 151
niacin er (antihyperlipidemic) 50
NIACOR 50
nicardipine hcl 80
NICORELIEF 142
nicotine 142
nicotine mini 142
nicotine polacrilex 142
nicotine step 1 142
nicotine step 2 142
nicotine step 3 142
NICOTROL 142
NICOTROL NS 142
NIFEDIAC CC 80
NIFEDICAL XL 80

nifedipine 80
nifedipine er 80
nifedipine er osmotic release 80
NIKKI 86
nilutamide 62
nimodipine 80
NINLARO 62
nisoldipine er 80
nitazoxanide 55
nitisinone 104
NITRO-BID 18
NITRO-DUR 18
nitrofurantoin 55
nitrofurantoin macrocrystal 55
nitrofurantoin monohyd macro ... 55
nitroglycerin 18, 19
NITYR 105
NIVESTYM 115
nizatidine 148
NODOLOR 125
NORA-BE 86
NORDITROPIN FLEXPRO . 105
norepinephrine bitartrate 150
norepinephrine-dextrose 151
norepinephrine-sodium chloride 151
norethin ace-eth estrad-fe 86
norethindrone 86
norethindrone acetate 138
norethindrone acet-ethinyl est 86
norethindrone-eth estradiol 108
norethin-eth estradiol-fe 86
norgestimate-eth estradiol 87
norgestim-eth estrad triphasic 87
norgestrel-ethinyl estradiol 87
NORITATE 97
NORLYROC 87
NORPACE CR 22
NORTREL 0.5/35 (28) 87
NORTREL 1/35 (21) 87
NORTREL 1/35 (28) 87
NORTREL 7/7/7 87
nortriptyline hcl 37, 38
nortuss-ex 90
NORVIR 75, 76
NOURIANZ 66
Novoeight 112
NOVOLIN 70/30 44
NOVOLIN 70/30 RELION 44
NOVOLIN N 44
NOVOLIN N RELION 44
NOVOLIN R 44
NOVOLIN R RELION 44
NOVOLOG 44
NOVOLOG FLEXPEN 44
NOVOLOG MIX 70/30 44
NOVOLOG MIX 70/30 FLEXPEN 44
NOVOLOG PENFILL 44
NovoSeven 112
NovoSeven RT 112
NOXAFIL 48
np thyroid 146
Nplate 115
NUCALA 25
NUCYNTA 15
NUCYNTA ER 15
NUEDEXTA 142
NULIBRY 105
NUPLAZID 71
NURTEC 125
NUTRESTORE 132
NUTROPIN AQ NUSPIN 10 . 105
NUTROPIN AQ NUSPIN 20 . 105
NUTROPIN AQ NUSPIN 5 ... 105
Nuwiq 112
NUZYRA 146
NYAMYC 97
NYMALIZE 80
nystatin 48, 97, 98, 129
nystatin-triamcinolone 98
NYSTOP 98
NYVEPRIA 115
Obizur 112
OBSTETRIX EC 130
OCALIVA 109
OCELLA 87
Ocrevus 142
Octagam 137
octreotide acetate 105
ODACTRA 8
ODEFSEY 76
ODOMZO 62
OFEV 145
ofloxacin 108, 135, 136
OGESTREL 87
OLANZapine 71
olanzapine 71
olanzapine-fluoxetine hcl 142
OLEPTRO 38
olmesartan medoxomil 53
olmesartan medoxomil-hctz 53
olopatadine hcl 135
OLUMIANT 11
omeprazole 148
OMEPRAZOLE+SYRSPEN D SF ALKA 148
omeprazole-sodium bicarbonate 148
OMNARIS 131
OMNIPOD 5 PACK 122
OMNIPOD DASH 5 PACK PODS 122
OMNIPOD STARTER 122
OMNITROPE 105
Oncaspar 62
ondansetron 47
ondansetron hcl 47
ONETOUCH CLUB LANCETS FINE PT 123
ONETOUCH FINEPOINT LANCETS 123
ONETOUCH ULTRASOFT LANCETS 123
ONGENTYS 66
ONGLYZA 44
ONPATTRO 142
ONUREG 62
OPANA ER 15
opium 46
OPSUMIT 81
ORALAIR 8
ORALAIR ADULT STARTER PACK 8
ORALAIR CHILDRENS STARTER PACK 8
ORALONE 129
Orencia 11
ORENCIA 11
ORENCIA CLICKJECT 11
ORENITRAM 81
ORFADIN 105
ORGOVYX 62
ORIAHNN 108
ORILISSA 105
ORKAMBI 145
ORLADEYO 113
orphenadrine citrate er 130
orphenadrine-aspirin-caffeine .. 130
ORSYTHIA 87
ORTIKOS 89
oseltamivir phosphate 76
OSMOPREP 118
OSPHENA 105
OTEZLA 11
otic care 136

OTIPRIO 136
oxandrolone 17
oxaprozin 11
oxazepam 21
OXBRYTA 115
oxcarbazepine 31
OXERVATE 135
oxiconazole nitrate 98
OXISTAT 98
OXLUMO 110
OXSORALEN 98
OXTELLAR XR 31
oxybutynin chloride 149
oxybutynin chloride er 149
oxycodone hcl 15, 16
oxycodone hcl er 15
oxycodone-acetaminophen 16
oxycodone-aspirin 16
oxycodone-ibuprofen 16
OXYCONTIN 16
oxymorphone hcl 16
oxymorphone hcl er 16
OXYTROL 149
OZEMPIC (0.25 OR 0.5 MG/DOSE) 45
OZEMPIC (1 MG/DOSE) 45
OZOBAX 131
PACERONE 22
PACLitaxel 62
PALFORZIA (12 MG DAILY DOSE) 8
PALFORZIA (120 MG DAILY DOSE) 8
PALFORZIA (160 MG DAILY DOSE) 8
PALFORZIA (20 MG DAILY DOSE) 8
PALFORZIA (200 MG DAILY DOSE) 8
PALFORZIA (240 MG DAILY DOSE) 8
PALFORZIA (3 MG DAILY DOSE) 8
PALFORZIA (300 MG MAINTENANCE) 8
PALFORZIA (300 MG TITRATION) 8
PALFORZIA (40 MG DAILY DOSE) 8
PALFORZIA (6 MG DAILY DOSE) 8
PALFORZIA (80 MG DAILY DOSE) 8
PALFORZIA INITIAL ESCALATION 8
paliperidone er 71
PALYNZIQ 105
Pamidronate Disodium 105
PANDEL 98
PANRETIN 98
pantoprazole sodium 148
Panzyga 137
paregoric 46
paricalcitol 105
PAROEX 129
paromomycin sulfate 8
paroxetine hcl 38
paroxetine hcl er 38
paroxetine mesylate 142
PASER 56
PCE 119
peg 3350/electrolytes 118
peg 3350-kcl-na bicarb-nacl 118
peg-3350/electrolytes 118
peg-3350/electrolytes/ascorbat 118
PEGANONE 31
PEGASYS 76
PEGASYS PROCLICK 76
PEGINTRON 76
PEG-INTRON 76
PEG-INTRON REDIPEN 76
peg-kcl-nacl-nasulf-na asc-c 118
PEMAZYRE 62
penicillamine 127
penicillin g procaine 138
penicillin v potassium 138
PENNSAID 98
pentoxifylline er 113
perindopril erbumine 53
PERIOGARD 129
Perjeta 62
permethrin 98
perphenazine 71
Perseris 71
PHENADOZ 49
phenazopyridine hcl 110
phenelzine sulfate 38
PHENERGAN 49
phenobarbital 117
phenobarbital-belladonna alk 148
PHENOHYTRO 148
phenoxybenzamine hcl 53
phenyleph-promethazine-cod 90
phenylephrine-guaifenesin 90
phenytoin 31
PHENYTOIN INFATABS 31
phenytoin sodium extended 31
PHESGO 62
PHILITH 87
PHOS-FLUR 129
PHOSLYRA 109
PHOSPHA 250 NEUTRAL 126
PHOSPHASAL 55
PHOSPHOLINE IODIDE 135
phytonadione 151
PICATO 98
PIFELTRO 76
pilocarpine hcl 129, 135
pimozide 142
PIMTREA 87
pindolol 78
pioglitazone hcl 45
pioglitazone hcl-glimepiride 45
pioglitazone hcl-metformin hcl 45
PIQRAY (200 MG DAILY DOSE) 62
PIQRAY (250 MG DAILY DOSE) 62
PIQRAY (300 MG DAILY DOSE) 62
PIRMELLA 1/35 87
PIRMELLA 7/7/7 87
piroxicam 11
pnv folic acid + iron 130
podofilox 98
POLYCIN 135
polyethylene glycol 3350 118, 138
polymyxin b-trimethoprim 135
polyvinyl alcohol 135
POMALYST 62
PORTIA-28 87
PORTRAZZA 62
pot bicarb-pot chloride 126
potassium bicarbonate 126
potassium chloride 126
potassium chloride crys er 126
potassium chloride er 126
potassium citrate er 110
potassium citrate monohydrate 110
PRADAXA 26
pramipexole dihydrochloride 66
pramipexole dihydrochloride er 66
PRAMOSONE 98
PRAMOSONE E 98
PRASCION 98

prasugrel hcl 113
pravastatin sodium 51
praziquantel 18
prazosin hcl 53
PRECISION SURE-DOSE SYRINGE 123
PRECISION THIN LANCETS 123
PRECISION THINS GP LANCETS 123
PRECISION ULTRA LANCET 123
PRECISION XTRA BLOOD GLUCOSE 101
PRED MILD 135
PRED-G 135
PRED-G S.O.P. 135
prednicarbate 98
prednisolone 89
prednisolone acetate 135
prednisolone sodium phosphate 89, 135
prednisone 89
PREDNISONE INTENSOL 89
preferred plus lancets colored 123
preferred plus lancets thin 123
pregabalin 32
pregabalin er 142
PREMARIN 150
premium lidocaine 98
PREMPHASE 108
PREMPRO 108
prenatabs fa 130
PRENATABS RX 130
prenatal 130
prenatal 19 130
PREPOPIK 118
pretomanid 56
PREVIFEM 87
Prevymis 76
PREVYMIS 76
PREZCOBIX 76
PREZISTA 76
PRIFTIN 57
PRILOSEC 148
primaquine phosphate 56
primidone 32
PRIMSOL 55
Privigen 137
PROAIR DIGIHALER 25
PROAIR HFA 25
PROAIR RESPICLICK 25
probenecid 111
PROBUPHINE IMPLANT KIT 16
prochlorperazine 71
prochlorperazine edisylate 71
prochlorperazine maleate 71
PROCRIT 115
Profilnine 113
Profilnine SD 113
progesterone 138
progesterone micronized 138, 139
PROGRAF 127
PROLATE 16
PROLEUKIN 62
Prolia 105
PROMACTA 115, 116
promethazine hcl 49
promethazine vc plain 90
promethazine vc/codeine 90
promethazine-codeine 90
promethazine-dm 90
promethazine-phenylephrine 90
PROMETHEGAN 49
propafenone hcl 22
propafenone hcl er 22
proparacaine hcl 135
propranolol hcl 78
propranolol hcl er 78
propranolol-hctz 53
propylthiouracil 146
PROTOPIC 98
protriptyline hcl 38
pseudoephedrine hcl 131
psorcon 98
PSS SELECT GP LANCETS 123
PSS SELECT SAFETY LANCETS 123
PULMICORT FLEXHALER 25
PULMOSAL 90
PULMOZYME 145
PURIXAN 62
PYLERA 148
pyrazinamide 57
pyridostigmine bromide 56
pyridostigmine bromide er 56
QBREXZA 98
qc nicotine polacrilex 142
QELBREE 7
QINLOCK 62
QNASL 131
QNASL CHILDRENS 131
QUASENSE 87
quetiapine fumarate 72
quetiapine fumarate er 72
QUILLICHEW ER 7
QUILLIVANT XR 7
quinapril hcl 54
quinapril-hydrochlorothiazide 54
quinaretic 54
quinidine gluconate er 22
quinidine sulfate 22
quinidine sulfate er 22
quinine sulfate 56
QVAR REDIHALER 25
ra mini nicotine 143
ra nicotine 143
ra nicotine polacrilex 143
rabeprazole sodium 148
Radicava 131
raloxifene hcl 105
ramelteon 117
ramipril 54
ranitidine hcl 148
ranolazine er 19
rasagiline mesylate 66
RAVICTI 105
REA LO 40 98
reality lancets 123
reality trigger lancets 123
REBETOL 76
REBIF 143
REBIF REBIDOSE 143
REBIF REBIDOSE TITRATION PACK 143
REBIF TITRATION PACK 143
Rebinyn 113
Reblozyl 116
RECLIPSEN 87
Recombinate 113
REGRANEX 98
RELENZA DISKHALER 76
RELISTOR 109
REMEVEN 98
Remicade 109
REMODULIN 82
RENAGEL 109
RENAL 130
Renflexis 109
repaglinide 45
repaglinide-metformin hcl 45
REPATHA 51
REPATHA PUSHTRONEX SYSTEM 51
REPATHA SURECLICK 51

RESCRIPTOR 76
reserpine 54
RESET FOR IOS OR ANDROID APP 127
RESET-O FOR IOS OR ANDROID APP 127
RESTASIS 135
RETACRIT 116
RETEVMO 62
RETIN-A MICRO PUMP 98
REVLIMID 127
rexaphenac 98
REXULTI 72
REYATAZ 76
REYVOW 125
REZUROCK 127
RHEUMATREX 11
Rhophylac 138
RHOPRESSA 135
RIABNI 62
RiaSTAP 113
RIBASPHERE 76
ribavirin 76
rifabutin 57
RIFAMATE 57
rifampin 57
RIFATER 57
riluzole 131
rimantadine hcl 76
RINVOQ 11
RIOMET ER 45
risedronate sodium 106
RisperDAL Consta 72
risperidone 72
RISPERIDONE M-TAB 72
RITUXAN 62
RITUXAN HYCELA 62
rivastigmine 143
rivastigmine tartrate 143
Rixubis 113
rizatriptan benzoate 125
ropinirole hcl 66
ropinirole hcl er 66
ropivacaine hcl-nacl 119
ROSADAN 98
ROSANIL CLEANSER 98
rosuvastatin calcium 51
ROXICET 16
ROZLYTREK 62
RUBRACA 62
Ruconest 113
rufinamide 32
RUKOBIA 76
RUXIENCE 62
RUZURGI 56
RYBELSUS 45
RYDAPT 62
SABRIL 32
SAIZEN 106
SAIZEN CLICK.EASY 106
SAIZENPREP 106
salsalate 12
SANCUSO 47
SANDIMMUNE 127
SandoSTATIN LAR Depot 106
SANTYL 99
SAPHNELO 127
sapropterin dihydrochloride 106
SAVAYSA 26
SAVELLA 143
SAVELLA TITRATION PACK 143
sb lancets thin 123
sb lancets ultra thin 123
SCENESSE 99
scopolamine 47
SECUADO 73
SEEBRI NEOHALER 25
SEGLUROMET 45
selegiline hcl 66
selenium sulfide 99
selenium sulf-pyrithione-urea 99
SELRX 99
SELZENTRY 77
SEMGLEE 45
SEMPREX-D 90
SEROPHENE 106
SEROQUEL XR 73
SEROSTIM 106
sertraline hcl 38
SETLAKIN 87
sevelamer carbonate 109
Sevenfact 113
sf 129
sf 5000 plus 129
SFROWASA 109
SHAROBEL 87
SIGNIFOR 106
Signifor LAR 106
SIKLOS 116
sildenafil citrate 82
SILIQ 99
silodosin 110
silver sulfadiazine 99
SIMBRINZA 135
SIMCOR 51
SIMPONI 12
Simponi Aria 12
simvastatin 51
sirolimus 127
SIRTURO 57
SIVEXTRO 55
SKYRIZI (150 MG DOSE) 99
sm nicotine 143
sm nicotine polacrilex 143
sodium chloride 110
sodium fluoride 126
sodium polystyrene sulfonate 127
sofosbuvir-velpatasvir 77
SOLARAZE 99
solifenacin succinate 149
SOLIQUA 45
Soliris 113
SOLOSEC 8
SOLTAMOX 62
SOLU-CORTEF 89
Somatuline Depot 106
SOMAVERT 106
SORINE 78
sotalol hcl 79
sotalol hcl (af) 79
SOTYLIZE 79
SOVALDI 77
spinosad 99
Spinraza 131
SPIRIVA HANDIHALER 25
SPIRIVA RESPIMAT 25
spironolactone 102
spironolactone-hctz 102
SPRAVATO (56 MG DOSE) 38
SPRAVATO (84 MG DOSE) 38
SPRINTEC 28 87
SPRITAM 32
SPRYCEL 63
SPS 127
sr nicotine 144
SRONYX 87
SSD 99
stavudine 77
STEGLATRO 45
Stelara 99, 110
STELARA 99
STIMATE 106
STIVARGA 63
STRENSIQ 106
STRIANT 17

STRIBILD 77
STRIVERDI RESPIMAT 25
Sublocade 16
SUBOXONE 16
SUBSYS 16
sucralfate 149
sulfacetamide sodium 99, 135
sulfacetamide sodium (acne) 99
sulfacetamide sodium-sulfur 99
sulfacetamide-prednisolone 135
sulfadiazine 145
sulfamethoxazole-trimethoprim .. 55
SULFAMYLON 99
sulfasalazine 110
SULFATRIM PEDIATRIC 55
sulindac 12
sumatriptan 125
sumatriptan succinate 125
sumatriptan succinate refill 125
SUNOSI 7
super thin lancets 123
Supprelin LA 106
SUPRAX 83
SUPREP BOWEL PREP KIT 118
sure comfort insulin syringe 123
SURELITE LANCETS 123
SUSTOL 48
SUTENT 63
sw nicotine polacrilex 144
SYEDA 87
SYLATRON 63
SYMBICORT 25
SYMDEKO 145
SYMLINPEN 120 45
SYMLINPEN 60 45
SYMPAZAN 32
SYMPROIC 110
SYMTUZA 77
SYNAGIS 138
SYNALAR (CREAM) 99
SYNALAR (OINTMENT) 99
SYNAREL 106
SYNDROS 48
SYNJARDY 45
SYNJARDY XR 45
SYNRIBO 63
TABLOID 63
TABRECTA 63
TACLONEX 99
tacrolimus 127
tadalafil 82
tadalafil (pah) 82
TAFINLAR 63
TAGRISSO 63
TAKHZYRO 113
TALTZ 99
TALZENNA 63
tamoxifen citrate 63
tamsulosin hcl 110
TARGRETIN 99
TARINA FE 1/20 87
TASIGNA 63
TAVALISSE 113
tazarotene 100
TAZORAC 100
TAZTIA XT 80, 81
TAZVERIK 63
tb syringe 1 ml 123
Tecentriq 63
TECFIDERA 144
TECHLITE LANCETS 123
TEGSEDI 144
TEKTURNA HCT 54
telmisartan 54
telmisartan-hctz 54
temazepam 117
Temodar 63
temozolomide 63
temsirolimus 63
TENCON 12
tenofovir disoproxil fumarate 77
TEPEZZA 106
terazosin hcl 54
terbinafine hcl 48
terbutaline sulfate 25
terconazole 150
teriparatide (recombinant) 106
TERSI 100
TESTOPEL 17
testosterone 17
testosterone cypionate 17
testosterone enanthate 17
tetrabenazine 144
tetracycline hcl 146
tgt nicotine 144
tgt nicotine polacrilex 144
tgt nicotine step one 144
tgt nicotine step three 144
tgt nicotine step two 144
THALITONE 102
THALOMID 128
THEO-24 25
THEOCHRON 25
theophylline 26
theophylline er 25
THINLETS GP LANCETS ... 123
THINLETS LANCET 123
thioridazine hcl 73
thiothixene 73
THYQUIDITY 146
Thyrogen 101
THYROLAR-1 146
THYROLAR-1/2 146
THYROLAR-1/4 146
THYROLAR-2 146
THYROLAR-3 146
tiagabine hcl 32
TIBSOVO 63
TIGLUTIK 131
TILIA FE 87
timolol maleate 79, 135
TIMOPTIC OCUDOSE 135
tinidazole 55
TIVICAY 77
TIVICAY PD 77
tizanidine hcl 131
TOBI PODHALER 8
TOBRADEX 136
tobramycin 8, 136
tobramycin-dexamethasone 136
TOBREX 136
tolazamide 46
tolbutamide 46
tolcapone 66
tolmetin sodium 12
tolterodine tartrate 149
tolterodine tartrate er 149
tolvaptan 106, 107
topco insulin syringe 123
topiramate 33
topiramate er 32
toremifene citrate 63
Torisel 63
torsemide 102
TOSYMRA 125
TOVIAZ 149
TRACLEER 82
TRADJENTA 46
tramadol hcl 17
tramadol hcl er 16
tramadol hcl er (biphasic) 16
tramadol-acetaminophen 17
trandolapril 54
trandolapril-verapamil hcl er 54
tranexamic acid 116

tranylcypromine sulfate 39
travoprost (bak free) 136
trazodone hcl 39
Treanda 63
TRECATOR 57
Trelstar 63
Trelstar Depot 63
Trelstar LA 63
Trelstar Mixject 63
TREMFYA 100
TRESIBA 46
TRESIBA FLEXTOUCH 46
tretinoin 63, 100
tretinoin microsphere 100
tretinoin microsphere pump 100
Tretten 113
TREXALL 64
triamcinolone acetonide 100, 129, 131
triamterene 102
triamterene-hctz 102, 103
TRIDERM 100
trientine hcl 128
TRIESENCE 136
TRI-ESTARYLLA 87
trifluoperazine hcl 73
trifluridine 136
trihexyphenidyl hcl 66
TRIKAFTA 145
TRI-LEGEST FE 87
TRI-LINYAH 87
TRI-LO-ESTARYLLA 87
TRI-LO-MARZIA 87
TRI-LO-SPRINTEC 87
TRILYTE 118
trimethobenzamide hcl 48
trimethoprim 55
trimipramine maleate 39
TRINATE 130
TRINESSA (28) 87
TRINESSA LO 88
TRINTELLIX 39
TRI-PREVIFEM 88
Triptodur 107
TRI-SPRINTEC 88
TRIUMEQ 77
tri-vit/fluoride/iron 130
tri-vitamin/fluoride 130
TRIVORA (28) 88
TROKENDI XR 33
tropicamide 136
trospium chloride 149
trospium chloride er 149
TRULICITY 46
Truxima 64
TUDORZA PRESSAIR 26
TUKYSA 64
TURALIO 64
TYBOST 77
TYKERB 64
TYMLOS 107
Tysabri 144
TYVASO 82
TYVASO REFILL 82
TYVASO STARTER 82
TYZEKA 77
UBRELVY 125
UCERIS 18
UDENYCA 116
U-KERA E 100
ULESFIA 100
ULTICARE TUBERCULIN SAFETY SYR 123
ULTILET CLASSIC LANCETS 123
ULTILET LANCETS 123
Ultomiris 113
ULTRA-THIN II AUTO LANCET 123
ULTRA-THIN II LANCETS 123
UMECTA 100
UNILET COMFORTOUCH LANCET 123
UNILET G.P. LANCET 124
UNILET G.P. SUPERLITE LANCET 124
UNILET LANCET 124
UNILET SUPERLITE LANCET 124
UNISTIK 1 124
UNITHROID 146
UNITHROID DIRECT 146
UPLIZNA 128
UPNEEQ 136
UPTRAVI 82
urea 100
urea nail film 100
urea-c40 100
ure-k 100
URETRON D/S 149
URIMAR-T 56
UROLET MB 56
UROPHEN MB 56
ursodiol 110
URYL 56
Vabomere 56
valacyclovir hcl 77
VALCHLOR 100
valganciclovir hcl 77
valproic acid 33
valsartan 54
valsartan-hydrochlorothiazide 54
Valstar 64
VALTOCO 10 MG DOSE 33
VALTOCO 15 MG DOSE 33
VALTOCO 20 MG DOSE 33
VALTOCO 5 MG DOSE 33
vancomycin hcl 56
VANDAZOLE 150
Vantas 64
varenicline tartrate 144
Varubi 48
VARUBI 48
VASCEPA 51
Vectibix 64
Velcade 64
VELIVET 88
VELTASSA 128
VEMLIDY 77
VENCLEXTA 64
VENCLEXTA STARTING PACK 64
venlafaxine hcl 39
venlafaxine hcl er 39
VENTAVIS 82
VERAMYST 131
verapamil hcl 81
verapamil hcl er 81
VERDROCET 17
VEREGEN 100
VERSACLOZ 73
VERZENIO 64
VESICARE LS 149
VESTURA 88
VEXOL 136
V-GO 20 124
V-GO 30 124
V-GO 40 124
VIBERZI 110
VICTOZA 46
Vidaza 64
VIDEX 77
VIENVA 88
VIIBRYD 39
VIIBRYD STARTER PACK 39
VILTEPSO 132

VIMPAT 34
VIOKACE 101
viorele 88
VIRACEPT 77
VIRAZOLE 77
VIREAD 77
VISTOGARD 47
Visudyne 136
VITALET PRO LANCETS 124
VITALET PRO PLUS LANCETS 124
vitamin d (ergocalciferol) 151
VITEKTA 77
VITRAKVI 64
VIVITROL 47
VIZIMPRO 64
VOLTAREN 100
Vonvendi 113
voriconazole 48
VOSEVI 77
VOTRIENT 64
Vpriv 116
VRAYLAR 73
VUMERITY 144
VUMERITY (STARTER) 144
VYEPTI 125
VYFEMLA 88
VYNDAMAX 82
VYNDAQEL 82
VYONDYS 53 132
VYVANSE 7
Vyxeos 64
W&F LANCETS 26G 124
W&F LANCETS COLORED 21G 124
WAKIX 7
warfarin sodium 26
WELIREG 64
WERA 88
WESTHROID 146
Wilate 113
WINLEVI 100
WinRho SDF 138
WP THYROID 146
WYMZYA FE 88
XADAGO 66
XALKORI 64
XARELTO 27
XARELTO STARTER PACK 27
XATMEP 64
XCOPRI 34
XCOPRI (250 MG DAILY DOSE) 34
XCOPRI (350 MG DAILY DOSE) 34
XELJANZ 12
XELJANZ XR 12
Xembify 138
XENLETA 56
XEOMIN 132
XEPI 101
XERAC AC 101
XERMELO 110
Xgeva 107
Xiaflex 128
XIFAXAN 56
XIGDUO XR 46
XOFLUZA (40 MG DOSE) 77
XOFLUZA (80 MG DOSE) 77
XOLAIR 26
Xolair 26
XOLEGEL 101
XOPENEX HFA 26
XOSPATA 64
XPOVIO (100 MG ONCE WEEKLY) 64
XPOVIO (40 MG ONCE WEEKLY) 64
XPOVIO (40 MG TWICE WEEKLY) 64
XPOVIO (60 MG ONCE WEEKLY) 64
XPOVIO (60 MG TWICE WEEKLY) 64
XPOVIO (80 MG ONCE WEEKLY) 65
XPOVIO (80 MG TWICE WEEKLY) 65
XTANDI 65
XULANE 88
XULTOPHY 46
XURIDEN 107
Xyntha 113
Xyntha Solofuse 113
XYOSTED 18
XYREM 144
XYWAV 144
Yervoy 65
YONDELIS 65
YUPELRI 26
zafirlukast 26
zaleplon 117
Zaltrap 65
ZAMICET 17
ZARAH 88
ZARXIO 116
ZAZOLE 150
ZEBUTAL 12
ZEJULA 65
ZELAPAR 66
ZELBORAF 65
ZENATANE 101
ZENCHENT 88
ZENCHENT FE 88
ZENPEP 101
ZENZEDI 7
ZEPATIER 77
ZEPOSIA 144
ZEPOSIA 7-DAY STARTER PACK 144
ZEPOSIA STARTER KIT 144
ZETONNA 131
zidovudine 77, 78
ZIEXTENZO 116
Zinplava 138
ziprasidone hcl 73
ZIRGAN 136
ZMAX 119
ZOHYDRO ER 17
ZOKINVY 128
Zoladex 65
Zoledronic Acid 107
ZOLINZA 65
zolmitriptan 125
zolpidem tartrate 118
zolpidem tartrate er 117
ZOMACTON 107
zonisamide 34
ZONTIVITY 113
ZORBTIVE 107
ZORTRESS 128
ZOVIA 1/35E (28) 88
ZOVIA 1/50E (28) 88
ZUBSOLV 17
ZULRESSO 39
ZYCLARA PUMP 101
ZYDELIG 65
ZYKADIA 65
ZYLET 136
ZYPITAMAG 51
ZyPREXA Relprevv 73, 74