

# Anthem HealthKeepers Plus FAMIS Formulary

## ***Medicaid-Approved Drug List***

**Effective November 1, 2024**

### **Legend**

In each class, drugs are listed alphabetically by either brand name or generic name.

**Brand name drug:** Uppercase in bold type

**Generic drug:** Lowercase in plain type

**AL:** Age Limit Restrictions

**DO:** Dose Optimization Program

**GR:** Gender Restriction

**OTC:** Over the counter medication available with a prescription. (Prescribers please indicate OTC on the prescription)

**PA:** Prior authorization is required. Prior authorization is the process of obtaining approval of benefits before certain prescriptions are filled.

**QL:** Quantity limits; certain prescription medications have specific quantity limits per prescription or per month.

**SP:** Specialty Pharmacy

**ST:** Step therapy is required. You may need to use one medication before benefits for the use of another medication can be authorized.

Drug Name	Reference	Status	Notes
<b>*ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS*</b>			
<b>*ADHD AGENT - SELECTIVE ALPHA ADRENERGIC AGONISTS***</b>			
clonidine hcl er oral tablet extended release 12 hour		Preferred	AL
guanfacine hcl er oral tablet extended release 24 hour 1 mg, 2 mg	Intuniv	Preferred	PA; DO
guanfacine hcl er oral tablet extended release 24 hour 3 mg, 4 mg	Intuniv	Preferred	PA
<b>INTUNIV ORAL TABLET EXTENDED RELEASE 24 HOUR 1 MG, 2 MG</b>		Non-Preferred	PA; DO
<b>INTUNIV ORAL TABLET EXTENDED RELEASE 24 HOUR 3 MG, 4 MG</b>		Non-Preferred	PA
<b>ONYDA XR ORAL SUSPENSION EXTENDED RELEASE</b>		Non-Preferred	PA
<b>*ADHD AGENT - SELECTIVE NOREPINEPHRINE REUPTAKE INHIBITOR***</b>			
atomoxetine hcl oral capsule 10 mg, 18 mg, 25 mg, 40 mg	Strattera	Preferred	DO; AL
atomoxetine hcl oral capsule 100 mg, 60 mg, 80 mg	Strattera	Preferred	AL
<b>QELBREE ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 150 MG</b>		Non-Preferred	PA; DO
<b>QELBREE ORAL CAPSULE EXTENDED RELEASE 24 HOUR 200 MG</b>		Non-Preferred	PA
<b>STRATTERA ORAL CAPSULE 10 MG, 18 MG, 25 MG, 40 MG</b>		Non-Preferred	PA; DO
<b>STRATTERA ORAL CAPSULE 100 MG, 60 MG, 80 MG</b>		Non-Preferred	PA
<b>*AMPHETAMINE MIXTURES***</b>			
<b>ADDERALL ORAL TABLET 10 MG, 12.5 MG, 15 MG, 5 MG, 7.5 MG</b>		Non-Preferred	PA; DO; QL
<b>ADDERALL ORAL TABLET 20 MG, 30 MG</b>		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
<b>ADDERALL XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 15 MG, 5 MG</b>		Non-Preferred	PA; DO; QL
<b>ADDERALL XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 20 MG, 25 MG, 30 MG</b>		Non-Preferred	PA; QL
amphetamine-dextroamphetamine oral capsule extended release 24 hour 10 mg, 15 mg, 5 mg	Adderall XR	Preferred	DO; AL; QL
amphetamine-dextroamphetamine oral capsule extended release 24 hour 20 mg, 25 mg, 30 mg	Adderall XR	Preferred	AL; QL
amphetamine-dextroamphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 5 mg, 7.5 mg	Adderall	Preferred	DO; AL; QL
amphetamine-dextroamphetamine oral tablet 20 mg, 30 mg	Adderall	Preferred	AL; QL
amphet-dextroamphetamine 3-bead er oral capsule extended release 24 hour	Mydayis	Non-Preferred	PA; QL
<b>MYDAYIS ORAL CAPSULE EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; QL
<b>*AMPHETAMINES***</b>			
<b>ADZENYS XR-ODT ORAL TABLET EXTENDED RELEASE DISPERSIBLE</b>		Non-Preferred	PA; QL
amphetamine sulfate oral tablet	Evekeo	Non-Preferred	PA; DO; QL
<b>DESOXYN ORAL TABLET</b>		Non-Preferred	PA; QL
<b>DEXEDRINE ORAL CAPSULE EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; QL
dextroamphetamine sulfate er oral capsule extended release 24 hour 10 mg	Dexedrine	Preferred	AL; QL
dextroamphetamine sulfate er oral capsule extended release 24 hour 15 mg		Preferred	AL; QL
dextroamphetamine sulfate er oral capsule extended release 24 hour 5 mg		Preferred	DO; AL; QL
dextroamphetamine sulfate oral solution	ProCentra	Non-Preferred	PA; QL
dextroamphetamine sulfate oral tablet 10 mg	Zenzedi	Preferred	PA; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
dextroamphetamine sulfate oral tablet 15 mg, 20 mg, 30 mg, 7.5 mg	Zenzedi	Non-Preferred	PA; QL
dextroamphetamine sulfate oral tablet 2.5 mg	Zenzedi	Non-Preferred	PA; DO; QL
dextroamphetamine sulfate oral tablet 5 mg	Zenzedi	Preferred	DO; AL; QL
<b>DYANAVAL XR ORAL SUSPENSION EXTENDED RELEASE</b>		Non-Preferred	PA; QL
<b>DYANAVAL XR ORAL TABLET EXTENDED RELEASE</b>		Non-Preferred	PA; QL
<b>EVEKEO ORAL TABLET 10 MG</b>		Non-Preferred	PA; QL
<b>EVEKEO ORAL TABLET 5 MG</b>		Non-Preferred	PA; DO; QL
lisdexamfetamine dimesylate oral capsule 10 mg, 20 mg, 30 mg	Vyvanse	Non-Preferred	PA; DO; AL; QL
lisdexamfetamine dimesylate oral capsule 40 mg, 50 mg, 60 mg, 70 mg	Vyvanse	Non-Preferred	PA; AL; QL
lisdexamfetamine dimesylate oral tablet chewable 10 mg, 20 mg, 30 mg	Vyvanse	Non-Preferred	PA; DO; QL
lisdexamfetamine dimesylate oral tablet chewable 40 mg, 50 mg, 60 mg	Vyvanse	Non-Preferred	PA; QL
methamphetamine hcl oral tablet	Desoxyn	Non-Preferred	PA; QL
<b>PROCENTRA ORAL SOLUTION</b>		Non-Preferred	PA; QL
<b>VYVANSE ORAL CAPSULE 10 MG, 20 MG, 30 MG</b>		Non-Preferred	PA; DO; AL; QL
<b>VYVANSE ORAL CAPSULE 40 MG, 50 MG, 60 MG, 70 MG</b>		Non-Preferred	PA; AL; QL
<b>VYVANSE ORAL TABLET CHEWABLE 10 MG, 20 MG, 30 MG</b>		Non-Preferred	PA; DO; QL
<b>VYVANSE ORAL TABLET CHEWABLE 40 MG, 50 MG, 60 MG</b>		Non-Preferred	PA; QL
<b>XELSTRYM TRANSDERMAL PATCH</b>		Non-Preferred	PA; QL
<b>ZENZEDI ORAL TABLET 10 MG, 15 MG, 20 MG, 30 MG, 7.5 MG</b>		Non-Preferred	PA; QL
<b>ZENZEDI ORAL TABLET 2.5 MG, 5 MG</b>		Non-Preferred	PA; DO; QL
<b>*ANALEPTIC COMBINATIONS***</b>			
energy chews oral tablet chewable		Non-Preferred	OTC
<b>*ANALEPTICS***</b>			
awake maximum strength oral tablet	Vivarin	Non-Preferred	OTC
caffeine citrate intravenous solution		Preferred	

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
caffeine citrate oral solution		Preferred	
caffeine oral tablet	Vivarin	Non-Preferred	OTC
<b>DOPRAM INTRAVENOUS SOLUTION</b>		Non-Preferred	
high caffeine energy support oral tablet	Vivarin	Non-Preferred	OTC
keep alert oral tablet	Vivarin	Non-Preferred	OTC
stay awake maximum strength oral tablet	Vivarin	Non-Preferred	OTC
<b>VIVARIN ORAL TABLET</b>		Non-Preferred	OTC
<b>*DOPAMINE AND NOREPINEPHRINE REUPTAKE INHIBITORS (DNRIS)***</b>			
<b>SUNOSI ORAL TABLET 150 MG</b>		Non-Preferred	PA; QL
<b>SUNOSI ORAL TABLET 75 MG</b>		Non-Preferred	PA; DO; QL
<b>*HISTAMINE H3-RECEPTOR ANTAGONIST/INVERSE AGONISTS***</b>			
<b>WAKIX ORAL TABLET 17.8 MG</b>		Non-Preferred	PA; SP; QL
<b>WAKIX ORAL TABLET 4.45 MG</b>		Non-Preferred	PA; SP; DO; QL
<b>*LIPASE INHIBITORS***</b>			
<b>ALLI ORAL CAPSULE</b>		Preferred	PA; OTC; QL
orlistat oral capsule	Xenical	Non-Preferred	QL
<b>*STIMULANT COMBINATIONS***</b>			
<b>AZSTARYS ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>*STIMULANTS - MISC.***</b>			
<b>APTENSIO XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 15 MG, 20 MG, 30 MG</b>		Non-Preferred	PA; DO; QL
<b>APTENSIO XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 40 MG, 50 MG, 60 MG</b>		Non-Preferred	PA; QL
armodafinil oral tablet	Nuvigil	Non-Preferred	PA; QL
<b>CONCERTA ORAL TABLET EXTENDED RELEASE 18 MG, 27 MG</b>		Non-Preferred	PA; DO; QL
<b>CONCERTA ORAL TABLET EXTENDED RELEASE 36 MG, 54 MG</b>		Non-Preferred	PA; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>COTEMPLA XR-ODT ORAL TABLET EXTENDED RELEASE DISPERSIBLE</b>		Non-Preferred	PA; QL
<b>DAYTRANA TRANSDERMAL PATCH 10 MG/9HR, 15 MG/9HR</b>		Non-Preferred	PA; DO; QL
<b>DAYTRANA TRANSDERMAL PATCH 20 MG/9HR, 30 MG/9HR</b>		Non-Preferred	PA; QL
dexamethylphenidate hcl er oral capsule extended release 24 hour 10 mg, 15 mg, 20 mg, 5 mg	Focalin XR	Preferred	DO; AL; QL
dexamethylphenidate hcl er oral capsule extended release 24 hour 25 mg, 30 mg, 35 mg, 40 mg	Focalin XR	Preferred	AL; QL
dexamethylphenidate hcl oral tablet 10 mg	Focalin	Preferred	AL; QL
dexamethylphenidate hcl oral tablet 2.5 mg	Focalin	Preferred	DO; AL; QL
dexamethylphenidate hcl oral tablet 5 mg	Focalin	Preferred	PA; DO; QL
<b>FOCALIN ORAL TABLET 10 MG</b>		Non-Preferred	PA; QL
<b>FOCALIN ORAL TABLET 2.5 MG, 5 MG</b>		Non-Preferred	PA; DO; QL
<b>FOCALIN XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 15 MG, 20 MG, 5 MG</b>		Non-Preferred	PA; DO; QL
<b>FOCALIN XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 25 MG, 30 MG, 35 MG, 40 MG</b>		Non-Preferred	PA; QL
<b>JORNAY PM ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 60 MG, 80 MG</b>		Non-Preferred	PA; QL
<b>JORNAY PM ORAL CAPSULE EXTENDED RELEASE 24 HOUR 20 MG, 40 MG</b>		Non-Preferred	PA; DO; QL
<b>METADATE CD ORAL CAPSULE EXTENDED RELEASE 10 MG, 20 MG, 30 MG</b>		Non-Preferred	DO; AL; QL
<b>METADATE CD ORAL CAPSULE EXTENDED RELEASE 40 MG, 50 MG, 60 MG</b>		Non-Preferred	AL; QL
<b>METHYLIN ORAL SOLUTION</b>		Non-Preferred	PA; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
methylphenidate hcl er (cd) oral capsule extended release 10 mg, 20 mg, 30 mg	Metadate CD	Preferred	DO; AL; QL
methylphenidate hcl er (cd) oral capsule extended release 40 mg, 50 mg, 60 mg	Metadate CD	Preferred	AL; QL
methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg, 20 mg	Ritalin LA	Preferred	DO; AL; QL
methylphenidate hcl er (la) oral capsule extended release 24 hour 30 mg, 40 mg	Ritalin LA	Preferred	AL; QL
methylphenidate hcl er (la) oral capsule extended release 24 hour 60 mg		Preferred	QL
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg	Concerta	Preferred	DO; AL; QL
methylphenidate hcl er (osm) oral tablet extended release 36 mg, 54 mg	Concerta	Preferred	AL; QL
methylphenidate hcl er (osm) oral tablet extended release 45 mg, 63 mg, 72 mg	Relexxii	Preferred	QL
methylphenidate hcl er (xr) oral capsule extended release 24 hour 10 mg, 15 mg, 20 mg, 30 mg	Aptensio XR	Non-Preferred	PA; DO; QL
methylphenidate hcl er (xr) oral capsule extended release 24 hour 40 mg, 50 mg, 60 mg	Aptensio XR	Non-Preferred	PA; QL
methylphenidate hcl er oral tablet extended release 10 mg		Preferred	DO; AL; QL
methylphenidate hcl er oral tablet extended release 20 mg		Preferred	QL
methylphenidate hcl er oral tablet extended release 24 hour		Preferred	DO; AL; QL
methylphenidate hcl oral solution	Methylin	Preferred	AL; QL
methylphenidate hcl oral tablet 10 mg, 5 mg	Ritalin	Preferred	DO; AL; QL
methylphenidate hcl oral tablet 20 mg	Ritalin	Preferred	AL; QL
methylphenidate hcl oral tablet chewable 10 mg		Non-Preferred	PA; QL
methylphenidate hcl oral tablet chewable 2.5 mg, 5 mg		Non-Preferred	PA; DO; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
methylphenidate transdermal patch 10 mg/9hr, 15 mg/9hr	Daytrana	Non-Preferred	PA; DO; QL
methylphenidate transdermal patch 20 mg/9hr, 30 mg/9hr	Daytrana	Non-Preferred	PA; QL
modafinil oral tablet 100 mg	Provigil	Non-Preferred	PA; DO; QL
modafinil oral tablet 200 mg	Provigil	Non-Preferred	PA; QL
<b>NUVIGIL ORAL TABLET</b>		Non-Preferred	PA; QL
<b>PROVIGIL ORAL TABLET 100 MG</b>		Non-Preferred	PA; DO; QL
<b>PROVIGIL ORAL TABLET 200 MG</b>		Non-Preferred	PA; QL
<b>QUILLICHEW ER ORAL TABLET CHEWABLE EXTENDED RELEASE 20 MG</b>		Non-Preferred	PA; DO; QL
<b>QUILLICHEW ER ORAL TABLET CHEWABLE EXTENDED RELEASE 30 MG, 40 MG</b>		Non-Preferred	PA; QL
<b>QUILLIVANT XR ORAL SUSPENSION RECONSTITUTED ER</b>		Non-Preferred	PA; QL
<b>RELEXXII ORAL TABLET EXTENDED RELEASE 18 MG, 27 MG</b>		Non-Preferred	PA; DO; AL; QL
<b>RELEXXII ORAL TABLET EXTENDED RELEASE 36 MG</b>		Non-Preferred	PA; AL; QL
<b>RELEXXII ORAL TABLET EXTENDED RELEASE 45 MG, 54 MG, 63 MG, 72 MG</b>		Non-Preferred	PA; QL
<b>RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 20 MG</b>		Non-Preferred	PA; DO; QL
<b>RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 30 MG, 40 MG</b>		Non-Preferred	PA; QL
<b>RITALIN ORAL TABLET 10 MG, 5 MG</b>		Non-Preferred	PA; DO; QL
<b>RITALIN ORAL TABLET 20 MG</b>		Non-Preferred	PA; QL
<b>*ALLERGENIC EXTRACTS/BIOLOGICALS MISC*</b>			
<b>*ALLERGENIC EXTRACTS***</b>			
<b>PALFORZIA (12 MG DAILY DOSE) ORAL</b>		Non-Preferred	PA; QL
<b>PALFORZIA (120 MG DAILY DOSE) ORAL</b>		Non-Preferred	PA; QL



Drug Name	Reference	Status	Notes
PALFORZIA (160 MG DAILY DOSE) ORAL		Non-Preferred	PA; QL
PALFORZIA (20 MG DAILY DOSE) ORAL		Non-Preferred	PA; QL
PALFORZIA (200 MG DAILY DOSE) ORAL		Non-Preferred	PA; QL
PALFORZIA (240 MG DAILY DOSE) ORAL		Non-Preferred	PA; QL
PALFORZIA (3 MG DAILY DOSE) ORAL		Non-Preferred	PA; QL
PALFORZIA (300 MG MAINTENANCE) ORAL PACKET		Non-Preferred	PA; QL
PALFORZIA (300 MG TITRATION) ORAL PACKET		Non-Preferred	PA; QL
PALFORZIA (40 MG DAILY DOSE) ORAL		Non-Preferred	PA; QL
PALFORZIA (6 MG DAILY DOSE) ORAL		Non-Preferred	PA; QL
PALFORZIA (80 MG DAILY DOSE) ORAL		Non-Preferred	PA; QL
PALFORZIA INITIAL ESCALATION ORAL		Non-Preferred	PA; QL
<b>*ALTERNATIVE MEDICINES*</b>			
<b>*ALTERNATIVE MEDICINE - CO'S***</b>			
co q 10 oral capsule		Non-Preferred	AL; OTC
co q10 oral capsule		Non-Preferred	AL; OTC
co q-10 oral capsule	Pronutrients CoQ10	Non-Preferred	AL; OTC
coenzyme q10 oral capsule		Non-Preferred	AL; OTC
coenzyme q-10 oral capsule	Pronutrients CoQ10	Non-Preferred	AL; OTC
co-enzyme q10 oral capsule	Pronutrients CoQ10	Non-Preferred	AL; OTC
co-enzyme q-10 oral capsule		Non-Preferred	AL; OTC
coenzyme q10 oral tablet	Vitaline CoQ10	Non-Preferred	AL; OTC
coq10 oral capsule	Pronutrients CoQ10	Non-Preferred	AL; OTC
coq-10 oral capsule	Pronutrients CoQ10	Non-Preferred	AL; OTC
<b>*ALTERNATIVE MEDICINE - ME'S***</b>			
melatonin er oral tablet extended release		Preferred	OTC; QL
melatonin extra strength oral liquid		Preferred	OTC; QL

Drug Name	Reference	Status	Notes
melatonin extra strength oral tablet		Preferred	OTC; QL
melatonin fast dissolve ex str oral tablet dispersible		Preferred	OTC; QL
melatonin fast dissolve max st oral tablet dispersible		Preferred	OTC; QL
melatonin fast dissolve oral tablet dispersible		Preferred	OTC; QL
melatonin gummies oral tablet chewable	YumVs Melatonin	Preferred	OTC; QL
melatonin kids gummies oral tablet chewable	Sleep Melatonin Just 4 Kidz	Preferred	OTC; QL
melatonin kids oral tablet chewable	Sleep Melatonin Just 4 Kidz	Preferred	OTC; QL
melatonin maximum strength oral tablet		Preferred	OTC; QL
melatonin oral capsule		Preferred	OTC; QL
melatonin oral liquid	MAX Sleep Junior	Preferred	OTC; QL
melatonin oral tablet		Preferred	OTC; QL
melatonin oral tablet chewable	YumVs Melatonin	Preferred	OTC; QL
melatonin oral tablet dispersible		Preferred	OTC; QL
melatonin quick dissolve oral tablet dispersible		Preferred	OTC; QL
melatonin quick dissolve sublingual tablet sublingual		Preferred	OTC; QL
<b>YUMVS MELATONIN ORAL TABLET CHEWABLE</b>		Preferred	OTC; QL
<b>*AMEBICIDES*</b>			
<b>*AMEBICIDES***</b>			
<b>SOLOSEC ORAL PACKET</b>		Non-Preferred	PA; QL
<b>*AMINOGLYCOSIDES*</b>			
<b>*AMINOGLYCOSIDES***</b>			
amikacin sulfate injection solution		Non-Preferred	
<b>ARIKAYCE INHALATION SUSPENSION</b>		Non-Preferred	PA; QL
<b>BETHKIS INHALATION NEBULIZATION SOLUTION</b>		Non-Preferred	PA; SP; QL
gentamicin in saline intravenous solution		Non-Preferred	
gentamicin sulfate injection solution		Non-Preferred	
<b>HUMATIN ORAL CAPSULE</b>		Non-Preferred	PA

Drug Name	Reference	Status	Notes
<b>KITABIS PAK INHALATION NEBULIZATION SOLUTION</b>		Non-Preferred	PA; SP; QL
neomycin sulfate oral tablet		Preferred	
streptomycin sulfate intramuscular solution reconstituted		Non-Preferred	
<b>TOBI INHALATION NEBULIZATION SOLUTION</b>		Non-Preferred	PA; SP; QL
<b>TOBI PODHALER INHALATION CAPSULE</b>		Non-Preferred	PA; SP; QL
tobramycin inhalation nebulization solution	Bethkis	Preferred	SP; QL
tobramycin sulfate injection solution		Non-Preferred	QL
tobramycin sulfate injection solution reconstituted		Non-Preferred	QL
<b>ZEMDRI INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>*ANALGESICS - ANTI-INFLAMMATORY*</b>			
<b>*ANTIRHEUMATIC - JANUS KINASE (JAK) INHIBITORS***</b>			
<b>OLUMIANT ORAL TABLET</b>		Non-Preferred	PA; SP; QL
<b>RINVOQ LQ ORAL SOLUTION</b>		Non-Preferred	PA; SP; QL
<b>RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; SP; QL
<b>XELJANZ ORAL SOLUTION</b>		Non-Preferred	PA; SP; QL
<b>XELJANZ ORAL TABLET</b>		Non-Preferred	PA; SP; QL
<b>XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; SP; QL
<b>*ANTIRHEUMATIC ANTIMETABOLITES***</b>			
<b>OTREXUP SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Non-Preferred	PA; SP; QL
<b>RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Non-Preferred	PA; SP; QL
<b>*ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES***</b>			
<b>ABRILADA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT</b>		Non-Preferred	PA; SP; QL
<b>ABRILADA (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT</b>		Non-Preferred	PA; SP; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>ABRILADA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT</b>		Non-Preferred	PA; SP; QL
adalimumab-aacf (2 pen) subcutaneous auto-injector kit	Idacio (2 Pen)	Non-Preferred	PA; SP; QL
adalimumab-aacf (2 syringe) subcutaneous prefilled syringe kit	Idacio (2 Syringe)	Non-Preferred	PA; SP; QL
adalimumab-aacf(cd/uc/hs strt) subcutaneous auto-injector kit	Idacio (2 Pen)	Non-Preferred	PA; SP; QL
adalimumab-aacf(ps/uv starter) subcutaneous auto-injector kit	Idacio (2 Pen)	Non-Preferred	PA; SP; QL
adalimumab-aaty (1 pen) subcutaneous auto-injector kit	Yuflyma (1 Pen)	Non-Preferred	PA; SP; QL
adalimumab-aaty (2 pen) subcutaneous auto-injector kit	Yuflyma (1 Pen)	Non-Preferred	PA; SP; QL
adalimumab-aaty (2 syringe) subcutaneous prefilled syringe kit	Yuflyma (2 Syringe)	Non-Preferred	PA; SP; QL
adalimumab-adaz subcutaneous solution auto-injector	Hyrimoz	Non-Preferred	PA; SP; QL
adalimumab-adaz subcutaneous solution prefilled syringe	Hyrimoz	Non-Preferred	PA; SP; QL
adalimumab-adbm (2 pen) subcutaneous auto-injector kit	Cyltezo (2 Pen)	Non-Preferred	PA; QL
adalimumab-adbm (2 syringe) subcutaneous prefilled syringe kit	Cyltezo (2 Syringe)	Non-Preferred	PA; QL
adalimumab-adbm(cd/uc/hs strt) subcutaneous auto-injector kit	Cyltezo (2 Pen)	Non-Preferred	PA; QL
adalimumab-adbm(ps/uv starter) subcutaneous auto-injector kit	Cyltezo (2 Pen)	Non-Preferred	PA; QL
adalimumab-fkjp (2 pen) subcutaneous auto-injector kit	Hulio (2 Pen)	Non-Preferred	PA; SP; QL
adalimumab-fkjp (2 syringe) subcutaneous prefilled syringe kit	Hulio (2 Syringe)	Non-Preferred	PA; SP; QL
adalimumab-ryvk (2 pen) subcutaneous auto-injector kit	Simlandi (1 Pen)	Non-Preferred	PA; SP; QL
adalimumab-ryvk (2 syringe) subcutaneous prefilled syringe kit		Non-Preferred	PA; QL
<b>AMJEVITA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML, 80 MG/0.8ML</b>		Preferred	PA; SP; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>AMJEVITA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.8ML</b>		Non-Preferred	PA; SP; QL
<b>AMJEVITA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Preferred	PA; SP; QL
<b>AMJEVITA-PED 10KG TO &lt;15KG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Preferred	PA; SP; QL
<b>AMJEVITA-PED 15KG TO &lt;30KG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/0.2ML</b>		Preferred	PA; SP; QL
<b>AMJEVITA-PED 15KG TO &lt;30KG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/0.4ML</b>		Non-Preferred	PA; SP; QL
<b>CYLTEZO (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT</b>		Non-Preferred	PA; QL
<b>CYLTEZO (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT</b>		Non-Preferred	PA; QL
<b>CYLTEZO-CD/UC/HS STARTER SUBCUTANEOUS AUTO-INJECTOR KIT</b>		Non-Preferred	PA; QL
<b>CYLTEZO-PSORIASIS/UV STARTER SUBCUTANEOUS AUTO-INJECTOR KIT</b>		Non-Preferred	PA; QL
<b>HADLIMA PUSHTOUCH SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Preferred	PA; SP; QL
<b>HADLIMA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Preferred	PA; SP; QL
<b>HULIO (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT</b>		Non-Preferred	PA; SP; QL
<b>HULIO (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT</b>		Non-Preferred	PA; SP; QL
<b>HUMIRA (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT</b>		Non-Preferred	PA; SP; QL
<b>HUMIRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT</b>		Non-Preferred	PA; SP; QL
<b>HUMIRA-CD/UC/HS STARTER SUBCUTANEOUS AUTO-INJECTOR KIT</b>		Non-Preferred	PA; SP; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>HUMIRA-PSORIASIS/UEVIT STARTER SUBCUTANEOUS AUTO-INJECTOR KIT</b>		Non-Preferred	PA; SP; QL
<b>HYRIMOZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Non-Preferred	PA; SP; QL
<b>HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; SP; QL
<b>HYRIMOZ-CROHNS/UC STARTER SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Non-Preferred	PA; SP; QL
<b>HYRIMOZ-PED&lt;40KG CROHN STARTER SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; SP; QL
<b>HYRIMOZ-PED&gt;/=40KG CROHN START SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; SP; QL
<b>HYRIMOZ-PLAQ PSOR/UEVIT START SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Non-Preferred	PA; SP; QL
<b>HYRIMOZ-PLAQUE PSORIASIS START SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Non-Preferred	PA; SP; QL
<b>IDACIO (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT</b>		Non-Preferred	PA; SP; QL
<b>IDACIO (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT</b>		Non-Preferred	PA; SP; QL
<b>IDACIO-CROHNS/UC STARTER SUBCUTANEOUS AUTO-INJECTOR KIT</b>		Non-Preferred	PA; SP; QL
<b>IDACIO-PSORIASIS STARTER SUBCUTANEOUS AUTO-INJECTOR KIT</b>		Non-Preferred	PA; SP; QL
<b>SIMLANDI (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT</b>		Preferred	PA; SP; QL
<b>SIMLANDI (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT</b>		Preferred	PA; SP; QL
<b>SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Non-Preferred	PA; SP; QL
<b>SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; SP; QL

Drug Name	Reference	Status	Notes
YUFLYMA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT		Non-Preferred	PA; SP; QL
YUFLYMA (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT		Non-Preferred	PA; SP; QL
YUFLYMA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT		Non-Preferred	PA; SP; QL
YUFLYMA-CD/UC/HS STARTER SUBCUTANEOUS AUTO-INJECTOR KIT		Non-Preferred	PA; SP; QL
YUSIMRY SUBCUTANEOUS SOLUTION AUTO-INJECTOR		Non-Preferred	PA; SP; QL
<b>*CYCLOOXYGENASE 2 (COX-2) INHIBITORS***</b>			
CELEBREX ORAL CAPSULE		Non-Preferred	PA; AL; QL
celecoxib oral capsule	CeleBREX	Preferred	AL; QL
<b>*GOLD COMPOUNDS***</b>			
RIDAURA ORAL CAPSULE		Preferred	
<b>*INTERLEUKIN-1 BLOCKERS***</b>			
ARCALYST SUBCUTANEOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP; QL
<b>*INTERLEUKIN-1 RECEPTOR ANTAGONIST (IL-1RA)***</b>			
KINERET SUBCUTANEOUS SOLUTION PREFILLED SYRINGE		Non-Preferred	PA; QL
<b>*INTERLEUKIN-1BETA BLOCKERS***</b>			
ILARIS SUBCUTANEOUS SOLUTION		Non-Preferred	PA; SP; QL
<b>*INTERLEUKIN-6 RECEPTOR INHIBITORS***</b>			
ACTEMRA ACTPEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR		Non-Preferred	PA; SP; QL
ACTEMRA INTRAVENOUS SOLUTION		Non-Preferred	PA; SP
ACTEMRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE		Non-Preferred	PA; SP; QL

Drug Name	Reference	Status	Notes
KEVZARA SUBCUTANEOUS SOLUTION AUTO-INJECTOR		Non-Preferred	PA; SP; QL
KEVZARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE		Non-Preferred	PA; SP; QL
TYENNE SUBCUTANEOUS SOLUTION AUTO-INJECTOR		Non-Preferred	PA; SP; QL
TYENNE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE		Non-Preferred	PA; SP; QL
<b>*NONSTEROIDAL ANTI-INFLAMMATORY AGENT COMBINATIONS***</b>			
acetaminophen-ibuprofen oral tablet	Advil Dual Action	Non-Preferred	OTC; QL
ADVIL DUAL ACTION ORAL TABLET		Non-Preferred	OTC; QL
ARTHROTEC ORAL TABLET DELAYED RELEASE		Non-Preferred	PA; QL
COMBOGESIC INTRAVENOUS SOLUTION		Non-Preferred	
diclofenac-misoprostol oral tablet delayed release	Arthrotec	Non-Preferred	PA; QL
dual action pain relief oral tablet	Advil Dual Action	Non-Preferred	OTC; QL
MOTRIN DUAL ACTION ORAL TABLET		Non-Preferred	OTC; QL
<b>*NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)***</b>			
ADVIL JUNIOR STRENGTH ORAL TABLET		Preferred	OTC; QL
ADVIL JUNIOR STRENGTH ORAL TABLET CHEWABLE		Preferred	OTC; QL
ADVIL LIQUI-GELS MINIS ORAL CAPSULE		Preferred	OTC; QL
ADVIL MIGRAINE ORAL CAPSULE		Non-Preferred	PA; OTC; QL
ADVIL ORAL CAPSULE		Non-Preferred	PA; OTC; QL
ADVIL ORAL TABLET		Non-Preferred	PA; OTC; QL
ALEVE ORAL CAPSULE		Non-Preferred	PA; OTC; QL
ALEVE ORAL TABLET		Non-Preferred	PA; OTC; QL
all day pain relief oral tablet	Mediproxen	Preferred	OTC; QL
all day relief oral tablet	Mediproxen	Preferred	OTC; QL
ANAPROX DS ORAL TABLET		Non-Preferred	PA; AL; QL



Drug Name	Reference	Status	Notes
<b>CALDOLOR INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>CHILDRENS ADVIL ORAL SUSPENSION</b>		Preferred	PA; OTC; QL
childrens ibuprofen oral suspension	Childrens Advil	Preferred	OTC; QL
<b>CHILDRENS MOTRIN ORAL SUSPENSION</b>		Preferred	PA; OTC; QL
<b>DAYPRO ORAL TABLET</b>		Non-Preferred	PA; QL
diclofenac potassium oral capsule	Zipsor	Non-Preferred	PA; QL
diclofenac potassium oral tablet 25 mg	Lofena	Non-Preferred	QL
diclofenac potassium oral tablet 50 mg		Preferred	QL
diclofenac sodium er oral tablet extended release 24 hour		Preferred	QL
diclofenac sodium oral tablet delayed release		Preferred	QL
<b>EC-NAPROSYN ORAL TABLET DELAYED RELEASE</b>		Non-Preferred	PA
ec-naproxen oral tablet delayed release	EC-Naprosyn	Non-Preferred	
etodolac er oral tablet extended release 24 hour		Preferred	QL
etodolac oral capsule 200 mg		Non-Preferred	PA; QL
etodolac oral capsule 300 mg		Preferred	QL
etodolac oral tablet	Lodine	Preferred	QL
fenoprofen calcium oral capsule 200 mg		Non-Preferred	PA; QL
fenoprofen calcium oral capsule 400 mg	Nalfon	Preferred	QL
fenoprofen calcium oral tablet	Nalfon	Non-Preferred	PA; QL
flurbiprofen oral tablet		Preferred	QL
<b>IBU ORAL TABLET</b>		Preferred	QL
ibuprofen 100 junior strength oral tablet chewable	Advil Junior Strength	Preferred	OTC; QL
ibuprofen infants oral suspension	Infants Advil	Preferred	OTC; QL
ibuprofen junior strength oral tablet chewable	Advil Junior Strength	Preferred	OTC; QL
ibuprofen lysine intravenous solution	NeoProfen	Non-Preferred	
ibuprofen oral capsule	Advil Liqui-Gels minis	Preferred	OTC; QL
ibuprofen oral suspension	Childrens Advil	Preferred	QL
ibuprofen oral tablet 200 mg	Medi-First Ibuprofen	Preferred	OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	IBU	Preferred	QL
<b>INDOCIN ORAL SUSPENSION</b>		Non-Preferred	PA; QL
<b>INDOCIN RECTAL SUPPOSITORY</b>		Non-Preferred	PA; QL
indomethacin er oral capsule extended release		Preferred	QL
indomethacin oral capsule		Preferred	QL
indomethacin oral suspension	Indocin	Non-Preferred	PA; QL
indomethacin rectal suppository	Indocin	Non-Preferred	PA; QL
indomethacin sodium intravenous solution reconstituted		Non-Preferred	
<b>INFANTS ADVIL ORAL SUSPENSION</b>		Preferred	PA; OTC; QL
infants ibuprofen oral suspension	Infants Advil	Preferred	OTC; QL
ketoprofen er oral capsule extended release 24 hour		Preferred	QL
ketorolac tromethamine injection solution		Non-Preferred	QL
ketorolac tromethamine intramuscular solution		Non-Preferred	QL
ketorolac tromethamine oral tablet		Preferred	QL
<b>KIPROFEN ORAL CAPSULE</b>		Preferred	QL
<b>LODINE ORAL TABLET</b>		Non-Preferred	QL
<b>LOFENA ORAL TABLET</b>		Non-Preferred	PA; QL
meclofenamate sodium oral capsule		Preferred	QL
<b>MEDI-FIRST IBUPROFEN ORAL TABLET</b>		Preferred	OTC; QL
<b>MEDI-PROFEN ORAL CAPSULE</b>		Preferred	OTC; QL
<b>MEDI-PROFEN ORAL SUSPENSION</b>		Preferred	OTC; QL
<b>MEDI-PROFEN ORAL TABLET</b>		Preferred	OTC; QL
<b>MEDIPROXEN ORAL TABLET</b>		Preferred	OTC; QL
mefenamic acid oral capsule		Non-Preferred	PA; QL
meloxicam oral capsule		Non-Preferred	PA; QL
meloxicam oral suspension		Non-Preferred	PA; QL
meloxicam oral tablet		Preferred	QL
<b>MOTRIN CHILDRENS ORAL TABLET CHEWABLE</b>		Preferred	OTC; QL
<b>MOTRIN IB ORAL CAPSULE</b>		Preferred	OTC; QL
<b>MOTRIN IB ORAL TABLET</b>		Preferred	OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>MOTRIN INFANTS DROPS ORAL SUSPENSION</b>		Preferred	PA; OTC; QL
nabumetone oral tablet		Preferred	QL
<b>NALFON ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>NALFON ORAL TABLET</b>		Non-Preferred	PA; QL
<b>NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; QL
<b>NAPROSYN ORAL SUSPENSION</b>		Non-Preferred	PA; QL
<b>NAPROSYN ORAL TABLET</b>		Non-Preferred	PA; QL
naproxen dr oral tablet delayed release	EC-Naprosyn	Non-Preferred	
naproxen oral suspension	Naprosyn	Non-Preferred	QL
naproxen oral tablet	Naprosyn	Preferred	QL
naproxen oral tablet delayed release	EC-Naprosyn	Non-Preferred	
naproxen sodium er oral tablet extended release 24 hour	Naprelan	Non-Preferred	PA; QL
naproxen sodium oral capsule	Aleve	Preferred	OTC; QL
naproxen sodium oral tablet 220 mg	Mediproxen	Preferred	OTC; QL
naproxen sodium oral tablet 275 mg		Preferred	QL
naproxen sodium oral tablet 550 mg	Anaprox DS	Preferred	QL
<b>NEOPROFEN INTRAVENOUS SOLUTION</b>		Non-Preferred	
oxaprozin oral tablet	Daypro	Preferred	QL
<b>PAMPRIN ALL DAY RELIEF MAX ST ORAL TABLET</b>		Preferred	OTC; QL
piroxicam oral capsule		Preferred	QL
<b>PROPRINAL ORAL CAPSULE</b>		Preferred	OTC; QL
<b>RELAFEN DS ORAL TABLET</b>		Non-Preferred	PA; QL
<b>SPRIX NASAL SOLUTION</b>		Non-Preferred	PA; QL
sulindac oral tablet		Preferred	QL
<b>TOLECTIN 600 ORAL TABLET</b>		Non-Preferred	PA; QL
<b>ZIPSOR ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>*PHOSPHODIESTERASE 4 (PDE4) INHIBITORS***</b>			
<b>OTEZLA ORAL TABLET</b>		Preferred	PA; SP; QL
<b>OTEZLA ORAL TABLET THERAPY PACK</b>		Preferred	PA; SP; QL

Drug Name	Reference	Status	Notes
<b>*PYRIMIDINE SYNTHESIS INHIBITORS***</b>			
<b>ARAVA ORAL TABLET</b>		Non-Preferred	QL
leflunomide oral tablet	Arava	Preferred	QL
<b>*SELECTIVE COSTIMULATION MODULATORS***</b>			
<b>ORENCIA CLICKJECT SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Non-Preferred	PA; SP; QL
<b>ORENCIA INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	PA; SP; QL
<b>ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; SP; QL
<b>*SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS***</b>			
<b>ENBREL MINI SUBCUTANEOUS SOLUTION CARTRIDGE</b>		Preferred	PA; SP; QL
<b>ENBREL SUBCUTANEOUS SOLUTION</b>		Preferred	PA; SP; QL
<b>ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Preferred	PA; SP; QL
<b>ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Preferred	PA; SP; QL
<b>*ANALGESICS - NONNARCOTIC*</b>			
<b>*ANALGESIC COMBINATIONS***</b>			
added strength headache relief oral tablet	Pamprin Max	Preferred	OTC
<b>ANACIN ORAL TABLET</b>		Non-Preferred	OTC
back & body extra strength oral tablet	Bayer Back & Body	Preferred	OTC
<b>BACKAID MAX ORAL TABLET</b>		Non-Preferred	OTC
<b>BAYER BACK &amp; BODY ORAL TABLET</b>		Non-Preferred	OTC
<b>BAYER BACK &amp; BODY PAIN EX ST ORAL TABLET</b>		Non-Preferred	OTC
<b>BC CHERRY ORAL PACKET</b>		Non-Preferred	OTC
<b>BC FAST PAIN RELIEF ARTHRITIS ORAL PACKET</b>		Non-Preferred	OTC
<b>BC FAST PAIN RELIEF MAX STR ORAL PACKET</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>BC FAST PAIN RELIEF ORAL PACKET</b>		Non-Preferred	OTC
<b>BC MAX STRENGTH ORAL PACKET</b>		Non-Preferred	OTC
<b>BC ON THE GO ORAL PACKET</b>		Non-Preferred	OTC
<b>EXCEDRIN EXTRA STRENGTH ORAL TABLET</b>		Non-Preferred	OTC
<b>EXCEDRIN MIGRAINE ORAL TABLET</b>		Non-Preferred	OTC
<b>EXCEDRIN MIGRAINE RELIEF ORAL TABLET</b>		Non-Preferred	OTC
<b>EXCEDRIN TENSION HEADACHE ORAL TABLET</b>		Non-Preferred	OTC
extraprin oral tablet	Pamprin Max	Preferred	OTC
headache formula oral tablet	Pamprin Max	Preferred	OTC
headache relief oral tablet	Pamprin Max	Preferred	OTC
<b>MAPAP HEADACHE PLUS ORAL TABLET</b>		Non-Preferred	OTC
menstrual relief max strength oral tablet	Midol Complete	Preferred	OTC
<b>MIDOL CAFFEINE FREE ORAL TABLET</b>		Non-Preferred	OTC
<b>MIDOL COMPLETE ORAL TABLET</b>		Non-Preferred	OTC
<b>MIDOL MAX ST MENSTRUAL ORAL TABLET</b>		Non-Preferred	OTC
migraine formula oral tablet	Pamprin Max	Preferred	OTC
migraine relief oral tablet	Pamprin Max	Preferred	OTC
pain reliever extra strength oral tablet	Pamprin Max	Preferred	OTC
pain reliever plus oral tablet	Pamprin Max	Preferred	OTC
pain-off oral tablet	Pamprin Max	Preferred	OTC
<b>PAMPRIN MAX ORAL TABLET</b>		Preferred	OTC
<b>PANADOL EXTRA ORAL TABLET</b>		Non-Preferred	OTC
tension headache oral tablet	Excedrin Tension Headache	Non-Preferred	OTC
<b>VANQUISH ORAL TABLET</b>		Non-Preferred	OTC
womens menstrual relief oral tablet	Backaid Max	Non-Preferred	OTC
<b>*ANALGESICS OTHER***</b>			
acetaminophen 8 hour oral tablet extended release	Midol	Preferred	OTC; QL
acetaminophen childrens oral solution		Preferred	OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
acetaminophen childrens oral suspension	Max Relief Jr Child Pain/Fever	Preferred	OTC; QL
acetaminophen childrens oral tablet chewable	Medi-Tabs Junior Strength	Preferred	OTC
acetaminophen er oral tablet extended release	Midol	Preferred	OTC; QL
acetaminophen extra strength oral tablet	Healthy Mama Shake That Ache	Preferred	OTC; QL
acetaminophen infants oral suspension	Max Relief Jr Child Pain/Fever	Preferred	OTC; QL
acetaminophen intravenous solution		Non-Preferred	
acetaminophen junior strength oral tablet dispersible		Preferred	OTC
acetaminophen oral liquid	Little Remedies for Fever	Preferred	OTC; QL
acetaminophen oral solution		Preferred	OTC; QL
acetaminophen oral suspension	Max Relief Jr Child Pain/Fever	Preferred	OTC; QL
acetaminophen oral tablet 325 mg	Aphen	Preferred	OTC
acetaminophen oral tablet 500 mg	Healthy Mama Shake That Ache	Preferred	OTC; QL
acetaminophen oral tablet chewable	Medi-Tabs Junior Strength	Preferred	OTC
acetaminophen rapid tabs child oral tablet dispersible		Preferred	OTC
acetaminophen rectal suppository	FeverAll Childrens	Preferred	OTC
<b>APHEN ORAL TABLET</b>		Preferred	OTC
apra oral elixir	Max Relief Junior	Preferred	OTC
arthritis pain relief oral tablet extended release	Midol	Preferred	OTC; QL
arthritis pain reliever oral tablet extended release	Midol	Preferred	OTC; QL
childrens aspirin free oral elixir	Max Relief Junior	Preferred	OTC
childrens non-aspirin oral tablet chewable	Childrens Medi-Tabs	Preferred	OTC
clonidine hcl (analgesia) epidural solution	Duraclon	Non-Preferred	
curanol oral liquid	Little Remedies for Fever	Preferred	OTC; QL
<b>DURACLON EPIDURAL SOLUTION</b>		Non-Preferred	
<b>ELIXSURE FEVER/PAIN ORAL GEL</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>FEVERALL INFANTS RECTAL SUPPOSITORY</b>		Preferred	OTC
<b>FEVERALL JUNIOR STRENGTH RECTAL SUPPOSITORY</b>		Preferred	OTC
<b>HEALTHY MAMA SHAKE THAT ACHE ORAL TABLET</b>		Preferred	OTC; QL
infants pain & fever oral suspension	Max Relief Jr Child Pain/Fever	Preferred	OTC; QL
liquid acetaminophen oral liquid	Little Remedies for Fever	Preferred	OTC; QL
liquid pain relief oral liquid	Little Remedies for Fever	Preferred	OTC; QL
<b>MAPAP ACETAMINOPHEN EXTRA STR ORAL LIQUID</b>		Preferred	OTC
mapap oral capsule		Preferred	OTC; QL
<b>MAX RELIEF JR CHILD PAIN/FEVER ORAL SUSPENSION</b>		Preferred	OTC; QL
<b>MEDI-TABS EXTRA STRENGTH ORAL TABLET</b>		Preferred	OTC; QL
<b>MEDI-TABS JUNIOR STRENGTH ORAL TABLET CHEWABLE</b>		Preferred	OTC
<b>MIDOL ORAL TABLET EXTENDED RELEASE</b>		Preferred	OTC; QL
m-pap oral liquid	Little Remedies for Fever	Preferred	OTC; QL
non-aspirin extra strength oral tablet	Healthy Mama Shake That Ache	Preferred	OTC; QL
non-aspirin jr strength oral tablet chewable	Medi-Tabs Junior Strength	Preferred	OTC
non-aspirin oral tablet 325 mg	Aphen	Preferred	OTC
non-aspirin oral tablet 500 mg	Healthy Mama Shake That Ache	Preferred	OTC; QL
non-aspirin pain relief oral tablet	Aphen	Preferred	OTC
pain & fever childrens oral tablet chewable	Medi-Tabs Junior Strength	Preferred	OTC
pain & fever dissolve packs oral packet	Tylenol Childrens Pain + Fever	Non-Preferred	OTC
pain & fever infants oral suspension	Max Relief Jr Child Pain/Fever	Preferred	OTC; QL
pain & fever kids oral suspension	Max Relief Jr Child Pain/Fever	Preferred	OTC; QL
pain relief extra strength oral capsule		Preferred	OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
pain relief extra strength oral tablet	Healthy Mama Shake That Ache	Preferred	OTC; QL
pain relief oral liquid	Mapap Acetaminophen Extra Str	Preferred	OTC
pain relief regular strength oral tablet	Aphen	Preferred	OTC
pain reliever extra strength oral tablet	Healthy Mama Shake That Ache	Preferred	OTC; QL
pain reliever for adults oral tablet	Healthy Mama Shake That Ache	Preferred	OTC; QL
pain reliever oral liquid	Mapap Acetaminophen Extra Str	Preferred	OTC
pain reliever oral tablet	Aphen	Preferred	OTC
pain reliever/fever reducer rectal suppository	FeverAll Childrens	Preferred	OTC
<b>PANADOL EXTRA STRENGTH ORAL TABLET</b>		Preferred	OTC; QL
<b>PANADOL INFANTS ORAL SUSPENSION</b>		Preferred	OTC; QL
<b>PEDIACARE CHILDREN ORAL SUSPENSION</b>		Preferred	OTC; QL
<b>PEDIACARE INFANT FEVER/PAIN ORAL SUSPENSION</b>		Preferred	OTC; QL
<b>PEDIACARE INFANTS ORAL SUSPENSION</b>		Preferred	OTC; QL
<b>PHARBETOL EXTRA STRENGTH ORAL TABLET</b>		Preferred	OTC; QL
<b>PHARBETOL ORAL TABLET</b>		Preferred	OTC
<b>TRIAMINIC FEVER REDUCER ORAL SYRUP</b>		Preferred	OTC
<b>TYLENOL 8 HOUR ARTHRITIS PAIN ORAL TABLET EXTENDED RELEASE</b>		Non-Preferred	OTC; QL
<b>TYLENOL 8 HOUR ORAL TABLET EXTENDED RELEASE</b>		Non-Preferred	OTC; QL
<b>TYLENOL CHILDRENS CHEWABLES ORAL TABLET CHEWABLE</b>		Preferred	OTC
<b>TYLENOL CHILDRENS ORAL SUSPENSION</b>		Preferred	OTC; QL
<b>TYLENOL CHILDRENS ORAL THERAPY PACK</b>		Non-Preferred	OTC



Drug Name	Reference	Status	Notes
<b>TYLENOL CHILDRENS PAIN + FEVER ORAL PACKET</b>		Non-Preferred	OTC
<b>TYLENOL CHILDRENS PAIN + FEVER ORAL SUSPENSION</b>		Preferred	OTC; QL
<b>TYLENOL DISSOLVE PACKS ORAL PACKET</b>		Non-Preferred	OTC
<b>TYLENOL EXTRA STRENGTH ORAL TABLET</b>		Non-Preferred	OTC; QL
<b>TYLENOL FOR CHILDREN + ADULTS ORAL SUSPENSION</b>		Preferred	OTC; QL
<b>TYLENOL INFANTS PAIN+FEVER ORAL SUSPENSION</b>		Preferred	OTC; QL
<b>TYLENOL ORAL CAPSULE</b>		Non-Preferred	OTC
<b>TYLENOL ORAL TABLET</b>		Non-Preferred	OTC
<b>*ANALGESICS-SEDATIVES***</b>			
<b>ALLZITAL ORAL TABLET</b>		Non-Preferred	QL
<b>BAC ORAL TABLET</b>		Preferred	QL
butalbital-acetaminophen oral capsule		Non-Preferred	QL
butalbital-acetaminophen oral tablet 50-300 mg		Non-Preferred	QL
butalbital-acetaminophen oral tablet 50-325 mg	Tencon	Preferred	QL
butalbital-apap-caffeine oral capsule	Fioricet	Non-Preferred	QL
butalbital-apap-caffeine oral tablet	Bac	Preferred	QL
butalbital-aspirin-caffeine oral capsule		Preferred	QL
dolorex oral tablet		Non-Preferred	OTC
<b>ESGIC ORAL TABLET</b>		Non-Preferred	QL
<b>FIORICET ORAL CAPSULE</b>		Non-Preferred	QL
menstrual pain relief oral tablet	Premsyn PMS	Preferred	OTC
<b>PAMPRIN MAX PAIN FORMULA ORAL TABLET</b>		Non-Preferred	OTC
<b>PAMPRIN MULTI-SYMPTOM ORAL TABLET</b>		Non-Preferred	OTC
<b>PREMSYN PMS ORAL TABLET</b>		Preferred	OTC
relagesic oral tablet		Non-Preferred	OTC
<b>TENCON ORAL TABLET</b>		Preferred	QL
<b>*SALICYLATE COMBINATIONS***</b>			
<b>ALKA-SELTZER EXTRA STRENGTH ORAL TABLET EFFERVESCENT</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
ALKA-SELTZER ORAL TABLET EFFERVESCENT		Non-Preferred	OTC
ALKA-SELTZER ORIGINAL ORAL TABLET EFFERVESCENT		Non-Preferred	OTC
ASCRIPTIN ORAL TABLET		Non-Preferred	OTC
BUFFERIN EXTRA STRENGTH ORAL TABLET		Non-Preferred	OTC
BUFFERIN ORAL TABLET		Non-Preferred	OTC
effervescent antacid/pain rel oral tablet effervescent	Alka-Seltzer Extra Strength	Non-Preferred	OTC
effervescent pain relief oral tablet effervescent	Alka-Seltzer	Preferred	OTC
medi-seltzer oral tablet effervescent	Alka-Seltzer	Preferred	OTC
tri-buffered aspirin oral tablet	Bufferin	Preferred	OTC
<b>*SALICYLATES***</b>			
aspirin 81 oral tablet chewable	Bayer Low Dose	Preferred	OTC; QL
aspirin 81 oral tablet delayed release	Bayer Aspirin EC Low Dose	Preferred	OTC; QL
aspirin adult low dose oral tablet delayed release	Bayer Aspirin EC Low Dose	Preferred	OTC; QL
aspirin adult low strength oral tablet delayed release	Bayer Aspirin EC Low Dose	Preferred	OTC; QL
aspirin childrens oral tablet chewable	Bayer Low Dose	Preferred	OTC; QL
aspirin ec adult low dose oral tablet delayed release	Bayer Aspirin EC Low Dose	Preferred	OTC; QL
aspirin ec low dose oral tablet delayed release	Bayer Aspirin EC Low Dose	Preferred	OTC; QL
aspirin ec low strength oral tablet delayed release	Bayer Aspirin EC Low Dose	Preferred	OTC; QL
aspirin low dose oral tablet chewable	Bayer Low Dose	Preferred	OTC; QL
aspirin low dose oral tablet delayed release	Bayer Aspirin EC Low Dose	Preferred	OTC; QL
aspirin low strength oral tablet chewable	Bayer Low Dose	Preferred	OTC; QL
aspirin oral tablet	Bayer Advanced Aspirin Reg St	Preferred	OTC
aspirin oral tablet chewable	Bayer Low Dose	Preferred	OTC; QL
aspirin oral tablet delayed release	Bayer Aspirin	Preferred	OTC; QL
aspirin rectal suppository		Preferred	OTC

Drug Name	Reference	Status	Notes
aspirin regimen oral tablet delayed release	Bayer Aspirin EC Low Dose	Preferred	OTC; QL
<b>BAYER ADVANCED ASPIRIN EX ST ORAL TABLET</b>		Preferred	OTC
<b>BAYER ADVANCED ASPIRIN REG ST ORAL TABLET</b>		Preferred	OTC
<b>BAYER ASPIRIN EC LOW DOSE ORAL TABLET DELAYED RELEASE</b>		Preferred	OTC; QL
<b>BAYER ASPIRIN ORAL TABLET</b>		Preferred	OTC
<b>BAYER ASPIRIN ORAL TABLET DELAYED RELEASE</b>		Preferred	OTC; QL
<b>BAYER LOW DOSE ORAL TABLET CHEWABLE</b>		Preferred	OTC; QL
<b>BAYER LOW DOSE ORAL TABLET DELAYED RELEASE</b>		Preferred	OTC; QL
diflunisal oral tablet		Preferred	QL
<b>DOLOBID ORAL TABLET</b>		Non-Preferred	PA; QL
<b>ECOTRIN ARTHRTIS PAIN ORAL TABLET DELAYED RELEASE</b>		Non-Preferred	OTC; QL
<b>ECOTRIN LOW STRENGTH ORAL TABLET DELAYED RELEASE</b>		Preferred	OTC; QL
<b>ECOTRIN ORAL TABLET DELAYED RELEASE</b>		Non-Preferred	OTC; QL
genuine aspirin oral tablet	Bayer Advanced Aspirin Reg St	Preferred	OTC
<b>MEDI-FIRST ASPIRIN ORAL TABLET</b>		Preferred	OTC
<b>MEDIQUE ASPIRIN ORAL TABLET</b>		Preferred	OTC
<b>PERCOGESIC BACKACHE RELIEF ORAL TABLET</b>		Non-Preferred	OTC
<b>ST JOSEPH ASPIRIN ORAL TABLET DELAYED RELEASE</b>		Preferred	OTC; QL
<b>ST JOSEPH LOW DOSE ORAL TABLET CHEWABLE</b>		Preferred	OTC; QL
<b>ST JOSEPH LOW DOSE ORAL TABLET DELAYED RELEASE</b>		Preferred	OTC; QL
<b>VAZALORE ORAL CAPSULE</b>		Non-Preferred	OTC
<b>*ANALGESICS - OPIOID*</b>			
<b>*CODEINE COMBINATIONS***</b>			
acetaminophen-codeine oral solution		Preferred	PA; AL; QL

Drug Name	Reference	Status	Notes
acetaminophen-codeine oral tablet 300-15 mg		Preferred	AL; QL
acetaminophen-codeine oral tablet 300-30 mg, 300-60 mg		Preferred	PA; AL; QL
<b>ASCOMP-CODEINE ORAL CAPSULE</b>		Preferred	PA; AL; QL
butalbital-apap-caff-cod oral capsule	Fioricet/Codeine	Preferred	PA; AL; QL
butalbital-asa-caff-codeine oral capsule	Ascomp-Codeine	Preferred	PA; AL; QL
<b>FIORICET/CODEINE ORAL CAPSULE</b>		Non-Preferred	PA; AL; QL
<b>*DIHYDROCODEINE COMBINATIONS***</b>			
apap-caff-dihydrocodeine oral capsule	Trezix	Non-Preferred	PA; QL
<b>TREZIX ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>*HYDROCODONE COMBINATIONS***</b>			
hydrocodone-acetaminophen oral solution 10-325 mg/15ml		Preferred	QL
hydrocodone-acetaminophen oral solution 2.5-108 mg/5ml, 5-217 mg/10ml, 7.5-325 mg/15ml		Preferred	PA; QL
hydrocodone-acetaminophen oral tablet	Xodol	Preferred	PA; QL
hydrocodone-ibuprofen oral tablet 10- 200 mg, 5-200 mg		Non-Preferred	PA; QL
hydrocodone-ibuprofen oral tablet 7.5- 200 mg		Preferred	PA; QL
<b>*OPIOID AGONISTS***</b>			
codeine sulfate oral tablet		Preferred	PA; AL; QL
<b>CONZIP ORAL CAPSULE EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; QL
<b>DEMEROL INJECTION SOLUTION</b>		Non-Preferred	PA
<b>DILAUDID INJECTION SOLUTION 0.2 MG/ML</b>		Non-Preferred	
<b>DILAUDID INJECTION SOLUTION 1 MG/ML, 2 MG/ML</b>		Non-Preferred	PA
<b>DILAUDID ORAL LIQUID</b>		Non-Preferred	PA; QL
<b>DILAUDID ORAL TABLET</b>		Non-Preferred	PA; QL
<b>DSUVIA SUBLINGUAL TABLET SUBLINGUAL</b>		Non-Preferred	

Drug Name	Reference	Status	Notes
duramorph injection solution		Non-Preferred	PA
fentanyl citrate (pf) injection solution		Non-Preferred	
fentanyl citrate buccal lozenge on a handle		Preferred	PA; QL
fentanyl citrate buccal tablet		Non-Preferred	PA; QL
fentanyl citrate pf injection solution prefilled syringe		Non-Preferred	
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr		Preferred	PA; QL
fentanyl transdermal patch 72 hour 37.5 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr		Non-Preferred	PA; QL
hydrocodone bitartrate er oral capsule extended release 12 hour		Non-Preferred	PA; QL
hydrocodone bitartrate er oral tablet er 24 hour abuse-deterrent	Hysingla ER	Non-Preferred	PA; QL
hydromorphone hcl er oral tablet extended release 24 hour		Non-Preferred	PA; QL
hydromorphone hcl injection solution	Dilaudid	Non-Preferred	PA
hydromorphone hcl oral liquid	Dilaudid	Preferred	PA; QL
hydromorphone hcl oral tablet	Dilaudid	Preferred	PA; QL
hydromorphone hcl pf injection solution		Non-Preferred	PA
<b>HYSINGLA ER ORAL TABLET ER 24 HOUR ABUSE-DETERRENT</b>		Non-Preferred	PA; QL
<b>INFUMORPH 200 INJECTION SOLUTION</b>		Non-Preferred	
<b>INFUMORPH 500 INJECTION SOLUTION</b>		Non-Preferred	
levorphanol tartrate oral tablet		Non-Preferred	PA; QL
meperidine hcl injection solution	Demerol	Non-Preferred	PA
meperidine hcl oral solution		Preferred	PA; QL
meperidine hcl oral tablet		Preferred	PA; QL
methadone hcl injection solution		Non-Preferred	PA; QL
<b>METHADONE HCL INTENSOL ORAL CONCENTRATE</b>		Preferred	PA; QL
methadone hcl oral concentrate	Methadone HCl Intensol	Preferred	PA; QL
methadone hcl oral solution		Preferred	PA; QL
methadone hcl oral tablet		Preferred	PA; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
methadone hcl oral tablet soluble	Methadose	Preferred	PA; QL
<b>METHADOSE ORAL CONCENTRATE</b>		Non-Preferred	PA; QL
<b>METHADOSE ORAL TABLET SOLUBLE</b>		Preferred	PA; QL
<b>METHADOSE SUGAR-FREE ORAL CONCENTRATE</b>		Non-Preferred	PA; QL
<b>MITIGO INJECTION SOLUTION</b>		Non-Preferred	
morphine sulfate (concentrate) oral solution		Preferred	PA; QL
morphine sulfate (pf) injection solution 0.5 mg/ml, 1 mg/ml, 10 mg/ml, 5 mg/ml		Non-Preferred	PA
morphine sulfate (pf) injection solution 2 mg/ml, 4 mg/ml, 8 mg/ml		Non-Preferred	
morphine sulfate (pf) intravenous solution		Non-Preferred	
morphine sulfate er beads oral capsule extended release 24 hour		Non-Preferred	PA; QL
morphine sulfate er oral capsule extended release 24 hour		Non-Preferred	PA; QL
morphine sulfate er oral tablet extended release	MS Contin	Preferred	PA; QL
morphine sulfate injection solution		Non-Preferred	PA
morphine sulfate intravenous solution 10 mg/ml, 4 mg/ml, 8 mg/ml		Non-Preferred	
morphine sulfate intravenous solution 50 mg/ml		Non-Preferred	PA
morphine sulfate oral solution 10 mg/5ml		Preferred	PA; QL
morphine sulfate oral solution 20 mg/5ml		Preferred	QL
morphine sulfate oral tablet		Preferred	QL
<b>MS CONTIN ORAL TABLET EXTENDED RELEASE</b>		Non-Preferred	PA; QL
<b>NUCYNTA ER ORAL TABLET EXTENDED RELEASE 12 HOUR</b>		Non-Preferred	PA; QL
<b>NUCYNTA ORAL TABLET</b>		Non-Preferred	PA; QL
<b>OLINVYK INTRAVENOUS SOLUTION</b>		Non-Preferred	
oxycodone hcl oral capsule		Preferred	PA; QL

Drug Name	Reference	Status	Notes
oxycodone hcl oral concentrate		Preferred	PA
oxycodone hcl oral solution		Preferred	PA; QL
oxycodone hcl oral tablet	Roxicodone	Preferred	PA; QL
oxycodone hcl oral tablet abuse-deterrent	RoxyBond	Non-Preferred	PA; QL
<b>OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT</b>		Non-Preferred	PA; QL
oxymorphone hcl er oral tablet extended release 12 hour		Non-Preferred	PA; QL
oxymorphone hcl oral tablet		Non-Preferred	PA; QL
<b>QDOLO ORAL SOLUTION</b>		Non-Preferred	PA; AL; QL
remifentanil hcl intravenous solution reconstituted	Ultiva	Non-Preferred	
<b>ROXICODONE ORAL TABLET</b>		Non-Preferred	PA; QL
<b>ROXYBOND ORAL TABLET ABUSE-DETERRENT</b>		Non-Preferred	PA; QL
sufentanil citrate intravenous solution		Non-Preferred	
tramadol hcl (er biphasic) oral capsule extended release 24 hour	ConZip	Non-Preferred	PA; QL
tramadol hcl (er biphasic) oral tablet extended release 24 hour		Non-Preferred	PA; QL
tramadol hcl er oral tablet extended release 24 hour		Non-Preferred	PA; QL
tramadol hcl oral solution	Qdolo	Non-Preferred	PA; AL; QL
tramadol hcl oral tablet 100 mg		Non-Preferred	QL
tramadol hcl oral tablet 25 mg		Non-Preferred	PA; QL
tramadol hcl oral tablet 50 mg		Preferred	PA; AL; QL
<b>ULTIVA INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>XTAMPZA ER ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT</b>		Non-Preferred	PA; QL
<b>*OPIOID COMBINATIONS***</b>			
<b>APADAZ ORAL TABLET</b>		Non-Preferred	PA; QL
benzhydrocodone-acetaminophen oral tablet	Apadaz	Non-Preferred	PA; QL
<b>ENDOCET ORAL TABLET</b>		Preferred	PA; QL
nalocet oral tablet		Non-Preferred	QL
oxycodone-acetaminophen oral solution	Prolate	Non-Preferred	PA; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
oxycodone-acetaminophen oral tablet 10-300 mg, 5-300 mg	Prolate	Non-Preferred	QL
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	Endocet	Preferred	PA; QL
oxycodone-acetaminophen oral tablet 2.5-300 mg		Non-Preferred	QL
oxycodone-acetaminophen oral tablet 7.5-300 mg	Prolate	Non-Preferred	PA; QL
<b>PERCOCET ORAL TABLET</b>		Non-Preferred	PA; QL
<b>PROLATE ORAL SOLUTION</b>		Non-Preferred	PA; QL
<b>PROLATE ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*OPIOID PARTIAL AGONISTS***</b>			
<b>BELBUCA BUCCAL FILM</b>		Non-Preferred	PA; QL
buprenorphine hcl injection solution		Non-Preferred	PA
buprenorphine hcl sublingual tablet sublingual		Preferred	QL
buprenorphine hcl-naloxone hcl sublingual film	Suboxone	Preferred	QL
buprenorphine hcl-naloxone hcl sublingual tablet sublingual		Preferred	QL
buprenorphine transdermal patch weekly	Butrans	Non-Preferred	PA; QL
butorphanol tartrate injection solution		Non-Preferred	PA
butorphanol tartrate nasal solution		Preferred	QL
<b>BUTRANS TRANSDERMAL PATCH WEEKLY</b>		Non-Preferred	PA; QL
nalbuphine hcl injection solution		Non-Preferred	PA; QL
pentazocine-naloxone hcl oral tablet		Preferred	PA; QL
<b>SUBOXONE SUBLINGUAL FILM</b>		Non-Preferred	PA; QL
<b>ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL</b>		Non-Preferred	PA; QL
<b>*TRAMADOL COMBINATIONS***</b>			
<b>SEGLENTIS ORAL TABLET</b>		Non-Preferred	AL; QL
tramadol-acetaminophen oral tablet		Preferred	PA; AL; QL
<b>*ANDROGENS-ANABOLIC*</b>			
<b>*ANDROGENS***</b>			
<b>ANDROGEL PUMP TRANSDERMAL GEL</b>		Non-Preferred	PA; QL



Drug Name	Reference	Status	Notes
<b>AVEED INTRAMUSCULAR SOLUTION</b>		Non-Preferred	PA; SP
danazol oral capsule		Non-Preferred	PA; QL
<b>DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION</b>		Preferred	PA
<b>JATENZO ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>KYZATREX ORAL CAPSULE</b>		Non-Preferred	PA; QL
methitest oral tablet		Non-Preferred	PA
methyltestosterone oral capsule		Non-Preferred	PA
<b>NATESTO NASAL GEL</b>		Non-Preferred	PA; QL
<b>TESTIM TRANSDERMAL GEL</b>		Non-Preferred	PA; QL
<b>TESTOPEL IMPLANT PELLETT</b>		Non-Preferred	PA
testosterone cypionate intramuscular solution	Depo-Testosterone	Preferred	PA
testosterone enanthate intramuscular solution		Preferred	PA
testosterone transdermal gel 1.62 %, 20.25 mg/act (1.62%)	AndroGel Pump	Non-Preferred	PA; QL
testosterone transdermal gel 10 mg/act (2%), 20.25 mg/1.25gm (1.62%), 40.5 mg/2.5gm (1.62%)		Non-Preferred	PA; QL
testosterone transdermal gel 12.5 mg/act (1%)	Vogelxo Pump	Preferred	PA; QL
testosterone transdermal gel 25 mg/2.5gm (1%)		Preferred	PA; QL
testosterone transdermal gel 50 mg/5gm (1%)	Testim	Preferred	PA; QL
testosterone transdermal solution		Non-Preferred	PA; QL
<b>TLANDO ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>VOGELXO PUMP TRANSDERMAL GEL</b>		Non-Preferred	PA; QL
<b>VOGELXO TRANSDERMAL GEL</b>		Non-Preferred	PA; QL
<b>XYOSTED SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Non-Preferred	PA
<b>*ANORECTAL AND RELATED PRODUCTS*</b>			
<b>*INTRARECTAL STEROIDS***</b>			
budesonide rectal foam	Uceris	Non-Preferred	PA; QL
<b>CORTENEMA RECTAL ENEMA</b>		Non-Preferred	
<b>CORTIFOAM EXTERNAL FOAM</b>		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
hydrocortisone rectal enema	Cortenema	Preferred	
<b>UCERIS RECTAL FOAM</b>		Non-Preferred	PA; QL
<b>*NITRATE VASODILATING AGENTS***</b>			
nitroglycerin rectal ointment	Rectiv	Non-Preferred	QL
<b>RECTIV RECTAL OINTMENT</b>		Non-Preferred	QL
<b>*RECTAL ANESTHETIC COMBINATIONS***</b>			
<b>AVEDANA HEMORRHOID PAIN RELIEF EXTERNAL CREAM</b>		Non-Preferred	OTC
hemorrhoidal external cream	Avedana Hemorrhoid Pain Relief	Non-Preferred	OTC
hemorrhoidal max st/aloe external cream	Avedana Hemorrhoid Pain Relief	Non-Preferred	OTC
<b>PREPARATION H EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>PREPARATION H RAPID RELIEF EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>PREPARATION H RAPID RELIEF EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>PREPARATION H TOTABLES RECTAL</b>		Non-Preferred	OTC
<b>RECTICARE ADVANCED EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>RECTICARE EXTERNAL PAD</b>		Non-Preferred	OTC
<b>*RECTAL ANESTHETIC/STEROIDS***</b>			
hydrocortisone ace-pramoxine external cream	Analpram-HC	Non-Preferred	
<b>PROCTOFOAM HC EXTERNAL FOAM</b>		Non-Preferred	
<b>*RECTAL COMBINATIONS - MISC.***</b>			
<b>AVEDANA HEMORRHOID PAIN RELIEF RECTAL OINTMENT</b>		Preferred	OTC
<b>AVEDANA HEMORRHOIDAL COOLING EXTERNAL GEL</b>		Non-Preferred	OTC
<b>AVEDANA HEMORRHOIDAL RECTAL SUPPOSITORY</b>		Preferred	OTC
hemorrhoidal cooling external gel	Avedana Hemorrhoidal Cooling	Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
hemorrhoidal rectal ointment	Avedana Hemorrhoid Pain Relief	Preferred	OTC
hemorrhoidal rectal suppository	Avedana Hemorrhoidal	Preferred	OTC
<b>PREPARATION H EXTERNAL GEL</b>		Non-Preferred	OTC
<b>PREPARATION H RECTAL OINTMENT</b>		Non-Preferred	OTC
<b>PREPARATION H RECTAL SUPPOSITORY</b>		Preferred	OTC
<b>*RECTAL LOCAL ANESTHETICS***</b>			
<b>AMERICAINE RECTAL OINTMENT</b>		Non-Preferred	OTC
dibucaine (perianal) external ointment	Nupercainal	Non-Preferred	OTC
<b>LMX 5 EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>LUBRICAINE EXTERNAL GEL</b>		Preferred	OTC
numbcream external cream	LMX 5	Preferred	OTC
<b>NUPERCAINAL EXTERNAL OINTMENT</b>		Non-Preferred	OTC
pramoxine hcl (perianal) external foam	Proctofoam	Non-Preferred	OTC
<b>PROCTOFOAM EXTERNAL FOAM</b>		Non-Preferred	OTC
<b>RECTICARE EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>TOPICAINE 5 EXTERNAL GEL</b>		Preferred	OTC
<b>*RECTAL PRODUCTS - MISC.***</b>			
<b>PREPARATION H RECTAL SUPPOSITORY</b>		Non-Preferred	OTC
<b>*RECTAL PROTECTANTS-EMOLLIENTS***</b>			
<b>CALMOL-4 RECTAL SUPPOSITORY</b>		Non-Preferred	OTC
<b>*RECTAL STEROIDS***</b>			
<b>ANUSOL-HC EXTERNAL CREAM</b>		Non-Preferred	QL
hydrocortisone (perianal) external cream 1 %	Preparation H	Non-Preferred	
hydrocortisone (perianal) external cream 2.5 %	Procto-Med HC	Preferred	QL
<b>PREPARATION H EXTERNAL CREAM</b>		Preferred	OTC
<b>PREPARATION H SOOTHING RELIEF EXTERNAL CREAM</b>		Preferred	OTC
<b>PROCTOCORT EXTERNAL CREAM</b>		Non-Preferred	

Drug Name	Reference	Status	Notes
<b>PROCTO-MED HC EXTERNAL CREAM</b>		Preferred	QL
<b>PROCTOSOL HC EXTERNAL CREAM</b>		Preferred	QL
<b>PROCTOZONE-HC EXTERNAL CREAM</b>		Preferred	QL
<b>*ANTACIDS*</b>			
<b>*ANTACID &amp; SIMETHICONE***</b>			
<b>ALKA-SELTZER HEARTBURN + GAS ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
antacid & antigas oral suspension	Almacone Double Strength	Preferred	OTC
antacid anti-gas oral suspension	Mintox	Preferred	OTC
antacid fast relief oral suspension	Mintox	Preferred	OTC
antacid i oral suspension	Mintox	Preferred	OTC
antacid liquid oral suspension	Mintox	Preferred	OTC
antacid m oral suspension	Mintox	Preferred	OTC
antacid maximum strength oral suspension	Almacone Double Strength	Preferred	OTC
antacid multi-symptom oral tablet chewable		Non-Preferred	OTC
antacid oral suspension	Mintox	Preferred	OTC
antacid regular strength oral suspension	Mintox	Preferred	OTC
antacid/antigas oral suspension	Mintox	Preferred	OTC
comfort gel antacid & anti-gas oral suspension	Mintox	Preferred	OTC
comfort gel antacid anti-gas oral suspension	Mintox	Preferred	OTC
comfort gel oral suspension	Mintox	Preferred	OTC
<b>E-Z-GAS II ORAL PACKET</b>		Non-Preferred	OTC
<b>GAS-X WITH MAALOX EX ST ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>GELUSIL ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>MAALOX ADVANCED MAX ST ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>MAALOX JUNIOR PLUS ANTIGAS ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>MAALOX MAX ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
mag-al plus oral liquid	Mintox	Preferred	OTC
<b>MINTOX PLUS ORAL TABLET CHEWABLE</b>		Preferred	OTC
<b>MYLANTA COAT &amp; COOL ORAL SUSPENSION</b>		Non-Preferred	OTC
<b>MYLANTA TONIGHT ORAL SUSPENSION</b>		Non-Preferred	OTC
<b>MYLICON CHILDRENS ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>PHAZYME GAS &amp; ACID MAX ST ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>ROLAIDS ADVANCED ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>TUMS GAS RELIEF CHEWY BITES ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>*ANTACID COMBINATIONS***</b>			
<b>ACID GONE ORAL SUSPENSION</b>		Preferred	OTC
<b>ACID GONE ORAL TABLET CHEWABLE</b>		Preferred	OTC
<b>ALKA-SELTZER HEARTBURN RELIEF ORAL TABLET EFFERVESCENT</b>		Non-Preferred	OTC
<b>ALKA-SELTZER ORAL TABLET EFFERVESCENT</b>		Non-Preferred	OTC
antacid extra strength oral tablet chewable 160-105 mg	Acid Gone	Preferred	OTC
antacid extra strength oral tablet chewable 675-135 mg	Rolaid Extra Strength	Non-Preferred	OTC
antacid oral tablet chewable		Non-Preferred	OTC
antacid ultra strength oral tablet chewable	Rolaid Ultra Strength	Preferred	OTC
<b>GAVISCON EXTRA RELIEF FORMULA ORAL SUSPENSION</b>		Non-Preferred	OTC
<b>GAVISCON EXTRA STRENGTH ORAL SUSPENSION</b>		Non-Preferred	OTC
<b>GAVISCON EXTRA STRENGTH ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>GAVISCON ORAL SUSPENSION</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
heartburn antacid ex st oral tablet chewable	Acid Gone	Preferred	OTC
heartburn relief ex st oral suspension	Gaviscon Extra Relief Formula	Non-Preferred	OTC
mag-al oral liquid		Non-Preferred	OTC
<b>ROLAIDS ANTACID ULTRA STRENGTH ORAL SUSPENSION</b>		Non-Preferred	OTC
<b>ROLAIDS EXTRA STRENGTH ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>ROLAIDS ULTRA STRENGTH ORAL TABLET CHEWABLE</b>		Preferred	OTC
<b>SENTRIVA-ES ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>*ANTACIDS - ALUMINUM SALTS***</b>			
aluminum hydroxide gel oral suspension		Preferred	OTC
<b>*ANTACIDS - BICARBONATE COMBINATIONS***</b>			
<b>ALKA-SELTZER GOLD ORAL TABLET EFFERVESCENT</b>		Non-Preferred	OTC
<b>*ANTACIDS - BICARBONATE***</b>			
sodium bicarbonate oral powder		Non-Preferred	
sodium bicarbonate oral tablet		Preferred	OTC
<b>*ANTACIDS - CALCIUM SALTS***</b>			
<b>ALKA-SELTZER FIZZY MELTS ORAL TABLET DISPERSIBLE</b>		Non-Preferred	OTC
<b>ALKA-SELTZER HEARTBURN ORAL TABLET CHEWABLE</b>		Preferred	OTC
antacid calcium oral tablet chewable	Cal-Gest Antacid	Preferred	OTC; QL
antacid calcium rich oral tablet chewable	Cal-Gest Antacid	Preferred	OTC; QL
antacid extra strength oral tablet chewable	Alka-Seltzer Heartburn	Preferred	OTC
<b>ANTACID FLAVOR CHEWS ORAL TABLET CHEWABLE</b>		Preferred	OTC
antacid maximum oral tablet chewable	Tums Ultra 1000	Preferred	OTC; QL
antacid oral tablet chewable 1177 mg	Tums Chewy Delights	Non-Preferred	OTC
antacid oral tablet chewable 500 mg	Cal-Gest Antacid	Preferred	OTC; QL
antacid oral tablet chewable 750 mg	Alka-Seltzer Heartburn	Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
antacid soft chews oral tablet chewable	Tums Chewy Delights	Non-Preferred	OTC
antacid ultra strength oral tablet chewable	Tums Ultra 1000	Preferred	OTC; QL
calcium antacid extra strength oral tablet chewable	Alka-Seltzer Heartburn	Preferred	OTC
calcium antacid oral tablet chewable	Cal-Gest Antacid	Preferred	OTC; QL
calcium carbonate antacid oral suspension		Preferred	OTC
calcium carbonate antacid oral tablet		Preferred	OTC; QL
calcium carbonate antacid oral tablet chewable	Cal-Gest Antacid	Preferred	OTC; QL
<b>CAL-GEST ANTACID ORAL TABLET CHEWABLE</b>		Preferred	OTC; QL
childrens pepto oral tablet chewable	Childrens Soothe	Preferred	OTC
<b>HEALTHY MAMA TAME THE FLAME ORAL TABLET CHEWABLE</b>		Preferred	OTC; QL
long lasting antacid oral tablet chewable	Cal-Gest Antacid	Preferred	OTC; QL
<b>MAALOX ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>TITRALAC ORAL TABLET CHEWABLE</b>		Preferred	OTC
<b>TUMS CHEWY BITES ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>TUMS CHEWY DELIGHTS ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>TUMS E-X 750 ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>TUMS EXTRA STRENGTH 750 ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>TUMS LASTING EFFECTS ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC; QL
<b>TUMS ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC; QL
<b>TUMS SMOOTHIES ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>TUMS ULTRA 1000 ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC; QL

Drug Name	Reference	Status	Notes
<b>*ANTACIDS - MAGNESIUM SALTS***</b>			
<b>DEWEES CARMINATIVE ORAL SUSPENSION</b>		Non-Preferred	OTC
magnesium oxide (antacid) oral capsule		Preferred	OTC
magnesium oxide oral tablet 250 mg		Preferred	OTC
magnesium oxide oral tablet 400 mg		Preferred	OTC; QL
magnesium oxide oral tablet 420 mg	Maox	Preferred	OTC
<b>MAOX ORAL TABLET</b>		Preferred	OTC
<b>URO-MAG ORAL CAPSULE</b>		Non-Preferred	OTC
<b>*ANTACIDS - SODIUM CITRATE***</b>			
<b>EMETROL ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>*ANTHELMINTICS*</b>			
<b>*ANTHELMINTICS***</b>			
albendazole oral tablet		Non-Preferred	PA; QL
benznidazole oral tablet		Non-Preferred	
<b>BILTRICIDE ORAL TABLET</b>		Non-Preferred	
<b>EMVERM ORAL TABLET CHEWABLE</b>		Non-Preferred	
ivermectin oral tablet	Stromectol	Preferred	QL
pin-away oral suspension		Preferred	OTC
pinworm medicine oral suspension		Preferred	OTC
praziquantel oral tablet	Biltricide	Preferred	
reeses pinworm medicine oral suspension		Preferred	OTC
<b>STROMECTOL ORAL TABLET</b>		Non-Preferred	QL
<b>*ANTIANGINAL AGENTS*</b>			
<b>*ANTIANGINALS-OTHER***</b>			
<b>ASPRUZYO SPRINKLE ORAL PACKET</b>		Non-Preferred	PA; QL
ranolazine er oral tablet extended release 12 hour		Non-Preferred	PA; QL
<b>*NITRATES***</b>			
<b>ISORDIL TITRADOSE ORAL TABLET</b>		Non-Preferred	



Drug Name	Reference	Status	Notes
isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg		Preferred	
isosorbide dinitrate oral tablet 40 mg	Isordil Titradoso	Non-Preferred	
isosorbide dinitrate oral tablet 5 mg	Isordil Titradoso	Preferred	
isosorbide mononitrate er oral tablet extended release 24 hour		Preferred	
isosorbide mononitrate oral tablet		Preferred	
<b>NITRO-BID TRANSDERMAL OINTMENT</b>		Preferred	
<b>NITRO-DUR TRANSDERMAL PATCH 24 HOUR</b>		Non-Preferred	
nitroglycerin in d5w intravenous solution		Non-Preferred	
nitroglycerin intravenous solution		Non-Preferred	
nitroglycerin sublingual tablet sublingual	Nitrostat	Preferred	
nitroglycerin transdermal patch 24 hour	Nitro-Dur	Preferred	
nitroglycerin translingual solution	Nitrolingual	Non-Preferred	
<b>NITROLINGUAL TRANSLINGUAL SOLUTION</b>		Non-Preferred	
<b>NITROSTAT SUBLINGUAL TABLET SUBLINGUAL</b>		Non-Preferred	
<b>*ANTIAXIETY AGENTS*</b>			
<b>*ANTIAXIETY AGENTS - MISC.***</b>			
bupirone hcl oral tablet		Preferred	
droperidol injection solution		Non-Preferred	
hydroxyzine hcl intramuscular solution		Non-Preferred	
hydroxyzine hcl oral syrup		Preferred	
hydroxyzine hcl oral tablet		Preferred	
hydroxyzine pamoate oral capsule		Preferred	
meprobamate oral tablet		Non-Preferred	
<b>*BENZODIAZEPINES***</b>			
alprazolam er oral tablet extended release 24 hour 0.5 mg, 1 mg	Xanax XR	Non-Preferred	DO; QL
alprazolam er oral tablet extended release 24 hour 2 mg, 3 mg	Xanax XR	Non-Preferred	QL
<b>ALPRAZOLAM INTENSOL ORAL CONCENTRATE</b>		Preferred	QL

Drug Name	Reference	Status	Notes
alprazolam oral tablet	Xanax	Preferred	QL
alprazolam oral tablet dispersible		Preferred	DO; QL
alprazolam xr oral tablet extended release 24 hour 0.5 mg, 1 mg	Xanax XR	Non-Preferred	DO; QL
alprazolam xr oral tablet extended release 24 hour 2 mg, 3 mg	Xanax XR	Non-Preferred	QL
<b>ATIVAN INJECTION SOLUTION</b>		Non-Preferred	
<b>ATIVAN ORAL TABLET</b>		Non-Preferred	QL
chlordiazepoxide hcl oral capsule		Preferred	QL
clorazepate dipotassium oral tablet		Preferred	QL
diazepam injection solution		Non-Preferred	
<b>DIAZEPAM INTENSOL ORAL CONCENTRATE</b>		Preferred	QL
diazepam oral concentrate	diazePAM Intensol	Preferred	QL
diazepam oral solution		Preferred	
diazepam oral tablet	Valium	Preferred	QL
lorazepam injection solution	Ativan	Non-Preferred	
<b>LORAZEPAM INTENSOL ORAL CONCENTRATE</b>		Non-Preferred	QL
lorazepam oral concentrate	LORazepam Intensol	Non-Preferred	QL
lorazepam oral tablet	Ativan	Preferred	QL
<b>LOREEV XR ORAL CAPSULE ER 24 HOUR SPRINKLE 1 MG, 1.5 MG</b>		Non-Preferred	PA; DO; QL
<b>LOREEV XR ORAL CAPSULE ER 24 HOUR SPRINKLE 2 MG, 3 MG</b>		Non-Preferred	PA; QL
oxazepam oral capsule		Preferred	QL
<b>VALIUM ORAL TABLET</b>		Non-Preferred	QL
<b>XANAX ORAL TABLET</b>		Non-Preferred	QL
<b>XANAX XR ORAL TABLET EXTENDED RELEASE 24 HOUR 0.5 MG, 1 MG</b>		Non-Preferred	DO; QL
<b>XANAX XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2 MG, 3 MG</b>		Non-Preferred	QL
<b>*ANTIARRHYTHMICS*</b>			
<b>*ANTIARRHYTHMICS - MISC.***</b>			
adenosine intravenous solution		Non-Preferred	
<b>*ANTIARRHYTHMICS TYPE I-A***</b>			
disopyramide phosphate oral capsule	Norpace	Preferred	

Drug Name	Reference	Status	Notes
<b>NORPACE CR ORAL CAPSULE EXTENDED RELEASE 12 HOUR</b>		Non-Preferred	
<b>NORPACE ORAL CAPSULE</b>		Non-Preferred	
procainamide hcl injection solution		Non-Preferred	
quinidine gluconate er oral tablet extended release		Preferred	
quinidine sulfate oral tablet		Preferred	
<b>*ANTIARRHYTHMICS TYPE I-B***</b>			
lidocaine hcl (cardiac) intravenous solution prefilled syringe		Non-Preferred	
lidocaine hcl (cardiac) pf intravenous solution		Non-Preferred	
lidocaine hcl (cardiac) pf intravenous solution prefilled syringe		Non-Preferred	
lidocaine in d5w intravenous solution		Non-Preferred	
mexiletine hcl oral capsule		Preferred	
<b>*ANTIARRHYTHMICS TYPE I-C***</b>			
flecainide acetate oral tablet		Preferred	QL
propafenone hcl er oral capsule extended release 12 hour		Preferred	
propafenone hcl oral tablet		Preferred	
<b>*ANTIARRHYTHMICS TYPE III***</b>			
amiodarone hcl intravenous solution		Non-Preferred	
amiodarone hcl oral tablet 100 mg	Pacerone	Non-Preferred	
amiodarone hcl oral tablet 200 mg	Pacerone	Preferred	QL
amiodarone hcl oral tablet 400 mg	Pacerone	Preferred	
<b>CORVERT INTRAVENOUS SOLUTION</b>		Non-Preferred	
ibutilide fumarate intravenous solution	Corvert	Non-Preferred	
<b>MULTAQ ORAL TABLET</b>		Non-Preferred	QL
<b>NEXTERONE INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>PACERONE ORAL TABLET 100 MG</b>		Non-Preferred	
<b>PACERONE ORAL TABLET 200 MG</b>		Preferred	QL
<b>PACERONE ORAL TABLET 400 MG</b>		Preferred	
<b>TIKOSYN ORAL CAPSULE</b>		Non-Preferred	

Drug Name	Reference	Status	Notes
<b>*ANTIASTHMATIC AND BRONCHODILATOR AGENTS*</b>			
<b>*5-LIPOXYGENASE INHIBITORS***</b>			
zileuton er oral tablet extended release 12 hour		Non-Preferred	PA; QL
<b>ZYFLO ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*ADRENERGIC COMBINATIONS***</b>			
<b>ADVAIR DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED</b>		Non-Preferred	PA; AL; QL
<b>ADVAIR HFA INHALATION AEROSOL</b>		Non-Preferred	PA; QL
<b>AIRDUO RESPICLICK 113/14 INHALATION AEROSOL POWDER BREATH ACTIVATED</b>		Non-Preferred	PA; QL
<b>AIRDUO RESPICLICK 232/14 INHALATION AEROSOL POWDER BREATH ACTIVATED</b>		Non-Preferred	PA; QL
<b>AIRDUO RESPICLICK 55/14 INHALATION AEROSOL POWDER BREATH ACTIVATED</b>		Non-Preferred	PA; QL
<b>AIRSUPRA INHALATION AEROSOL</b>		Non-Preferred	PA; QL
<b>ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED</b>		Preferred	QL
<b>BEVESPI AEROSPHERE INHALATION AEROSOL</b>		Non-Preferred	PA; QL
<b>BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED</b>		Non-Preferred	PA; QL
<b>BREYNA INHALATION AEROSOL</b>		Preferred	QL
<b>BREZTRI AEROSPHERE INHALATION AEROSOL</b>		Non-Preferred	PA; QL
budesonide-formoterol fumarate inhalation aerosol	Breyna	Preferred	QL
<b>COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION</b>		Preferred	QL
<b>DUAKLIR PRESSAIR INHALATION AEROSOL POWDER BREATH ACTIVATED</b>		Non-Preferred	PA; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>DULERA INHALATION AEROSOL</b>		Non-Preferred	PA; QL
fluticasone furoate-vilanterol inhalation aerosol powder breath activated	Breo Ellipta	Non-Preferred	PA; QL
fluticasone-salmeterol inhalation aerosol powder breath activated	AirDuo RespiClick 113/14	Preferred	QL
ipratropium-albuterol inhalation solution		Preferred	QL
<b>STIOLTO RESPIMAT INHALATION AEROSOL SOLUTION</b>		Preferred	QL
<b>SYMBICORT INHALATION AEROSOL</b>		Non-Preferred	PA; QL
<b>TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED</b>		Non-Preferred	PA; QL
<b>WIXELA INHUB INHALATION AEROSOL POWDER BREATH ACTIVATED</b>		Preferred	QL
<b>*ANTI-IGE MONOCLONAL ANTIBODIES***</b>			
<b>XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Preferred	PA; SP; QL
<b>XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Preferred	PA; SP; QL
<b>XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED</b>		Preferred	PA; SP; QL
<b>*ANTI-INFLAMMATORY AGENTS***</b>			
cromolyn sodium inhalation nebulization solution		Preferred	
<b>*BETA ADRENERGICS***</b>			
albuterol sulfate hfa inhalation aerosol solution	Ventolin HFA	Preferred	QL
albuterol sulfate inhalation nebulization solution		Preferred	QL
albuterol sulfate oral syrup		Preferred	
albuterol sulfate oral tablet		Preferred	
arformoterol tartrate inhalation nebulization solution	Brovana	Non-Preferred	QL
<b>BROVANA INHALATION NEBULIZATION SOLUTION</b>		Non-Preferred	QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
formoterol fumarate inhalation nebulization solution	Perforomist	Non-Preferred	QL
isoproterenol hcl injection solution		Non-Preferred	
levalbuterol hcl inhalation nebulization solution		Non-Preferred	QL
levalbuterol tartrate inhalation aerosol	Xopenex HFA	Non-Preferred	PA; QL
<b>PERFOROMIST INHALATION NEBULIZATION SOLUTION</b>		Non-Preferred	QL
<b>PROAIR RESPICLICK INHALATION AEROSOL POWDER BREATH ACTIVATED</b>		Non-Preferred	PA; QL
<b>SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED</b>		Preferred	QL
<b>STRIVERDI RESPIMAT INHALATION AEROSOL SOLUTION</b>		Non-Preferred	QL
terbutaline sulfate injection solution		Non-Preferred	
terbutaline sulfate oral tablet		Preferred	
<b>VENTOLIN HFA INHALATION AEROSOL SOLUTION</b>		Non-Preferred	PA; QL
<b>XOPENEX HFA INHALATION AEROSOL</b>		Non-Preferred	PA; QL
<b>*BRONCHODILATORS - ANTICHOLINERGICS***</b>			
<b>ATROVENT HFA INHALATION AEROSOL SOLUTION</b>		Preferred	QL
<b>INCRUSE ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED</b>		Non-Preferred	PA; QL
ipratropium bromide inhalation solution		Preferred	QL
<b>SPIRIVA HANDIHALER INHALATION CAPSULE</b>		Non-Preferred	PA; QL
<b>SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION</b>		Preferred	QL
tiotropium bromide monohydrate inhalation capsule	Spiriva HandiHaler	Non-Preferred	PA; QL
<b>TUDORZA PRESSAIR INHALATION AEROSOL POWDER BREATH ACTIVATED</b>		Non-Preferred	PA; QL
<b>YUPELRI INHALATION SOLUTION</b>		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
<b>*INTERLEUKIN-5 ANTAGONISTS (IGG1 KAPPA)***</b>			
FASENRA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR		Non-Preferred	PA; SP; QL
FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE		Non-Preferred	PA; SP; QL
NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR		Non-Preferred	PA; SP; QL
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE		Non-Preferred	PA; SP; QL
NUCALA SUBCUTANEOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP; QL
<b>*LEUKOTRIENE RECEPTOR ANTAGONISTS***</b>			
ACCOLATE ORAL TABLET		Non-Preferred	QL
montelukast sodium oral packet	Singulair	Preferred	QL
montelukast sodium oral tablet	Singulair	Preferred	QL
montelukast sodium oral tablet chewable	Singulair	Preferred	QL
SINGULAIR ORAL PACKET		Non-Preferred	QL
SINGULAIR ORAL TABLET		Non-Preferred	QL
SINGULAIR ORAL TABLET CHEWABLE		Non-Preferred	QL
zafirlukast oral tablet	Accolate	Preferred	QL
<b>*MIXED ADRENERGICS***</b>			
asthma relief oral tablet	Bronkaid Max	Non-Preferred	OTC
ASTHMANEFRIN REFILL INHALATION NEBULIZATION SOLUTION		Non-Preferred	OTC
BRONKAID MAX ORAL TABLET		Non-Preferred	OTC
PRIMATENE MIST INHALATION AEROSOL		Non-Preferred	OTC
PRIMATENE ORAL TABLET		Non-Preferred	OTC
S2 (RACEPINEPHRINE) INHALATION NEBULIZATION SOLUTION		Non-Preferred	OTC
<b>*PHOSPHODIESTERASE 3 &amp; 4 (PDE3 &amp; PDE4) INHIBITORS***</b>			
OHTUVAYRE INHALATION SUSPENSION		Non-Preferred	PA; SP; QL

Drug Name	Reference	Status	Notes
<b>*SELECTIVE PHOSPHODIESTERASE 4 (PDE4) INHIBITORS***</b>			
<b>DALIRESP ORAL TABLET</b>		Non-Preferred	PA; QL
roflumilast oral tablet	Daliresp	Non-Preferred	PA; QL
<b>*STEROID INHALANTS***</b>			
<b>ALVESCO INHALATION AEROSOL SOLUTION</b>		Non-Preferred	PA; QL
<b>ARNUIITY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED</b>		Preferred	QL
<b>ASMANEX HFA INHALATION AEROSOL</b>		Non-Preferred	PA; QL
budesonide inhalation suspension	Pulmicort	Preferred	QL
fluticasone propionate diskus inhalation aerosol powder breath activated		Preferred	QL
fluticasone propionate hfa inhalation aerosol		Preferred	QL
<b>PULMICORT FLEXHALER INHALATION AEROSOL POWDER BREATH ACTIVATED</b>		Non-Preferred	PA; QL
<b>PULMICORT INHALATION SUSPENSION</b>		Non-Preferred	QL
<b>QVAR REDIHALER INHALATION AEROSOL BREATH ACTIVATED</b>		Non-Preferred	PA; QL
<b>*THYMIC STROMAL LYMPHOPOIETIN (TSLP) ANTAGONISTS***</b>			
<b>TEZSPIRE SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Non-Preferred	PA; SP; QL
<b>TEZSPIRE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; SP; QL
<b>*XANTHINES***</b>			
aminophylline intravenous solution		Non-Preferred	
<b>ELIXOPHYLLIN ORAL ELIXIR</b>		Non-Preferred	QL
<b>THEO-24 ORAL CAPSULE EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	QL
theophylline er oral tablet extended release 12 hour 100 mg, 200 mg		Preferred	



Drug Name	Reference	Status	Notes
theophylline er oral tablet extended release 12 hour 300 mg, 450 mg		Preferred	QL
theophylline er oral tablet extended release 24 hour		Preferred	QL
theophylline oral elixir	Elixophyllin	Preferred	QL
theophylline oral solution		Preferred	QL
<b>*ANTICOAGULANTS*</b>			
<b>*COUMARIN ANTICOAGULANTS***</b>			
<b>JANTOVEN ORAL TABLET</b>		Preferred	
warfarin sodium oral tablet	Jantoven	Preferred	
<b>*DIRECT FACTOR XA INHIBITORS***</b>			
<b>ELIQUIS DVT/PE STARTER PACK ORAL TABLET THERAPY PACK</b>		Preferred	QL
<b>ELIQUIS ORAL TABLET</b>		Preferred	QL
<b>*HEPARINS AND HEPARINOID-LIKE AGENTS***</b>			
<b>BD HEPARIN POSIFLUSH INTRAVENOUS SOLUTION</b>		Non-Preferred	
heparin (porcine) in nacl intravenous solution		Non-Preferred	
heparin na (pork) lock flush pf intravenous solution	BD Heparin PosiFlush	Non-Preferred	
heparin sod (porcine) in d5w intravenous solution		Non-Preferred	
heparin sod (pork) lock flush intravenous solution		Non-Preferred	
heparin sodium (porcine) injection solution		Preferred	
heparin sodium (porcine) injection solution prefilled syringe		Non-Preferred	
heparin sodium (porcine) pf injection solution 1000 unit/ml, 5000 unit/0.5ml		Preferred	
heparin sodium (porcine) pf injection solution 5000 unit/ml		Non-Preferred	
<b>*IN VITRO/LOCK ANTICOAGULANT COMBINATIONS***</b>			
<b>DEFENCATH IN VITRO SOLUTION</b>		Non-Preferred	

Drug Name	Reference	Status	Notes
<b>*IN VITRO/LOCK ANTICOAGULANTS***</b>			
acd formula a in vitro solution	ACD-A noClot-50	Non-Preferred	
<b>ACD-A NOCLOT-50 IN VITRO SOLUTION</b>		Non-Preferred	
anticoagulant sodium citrate in vitro solution		Non-Preferred	
<b>TRICITRASOL IN VITRO CONCENTRATE</b>		Non-Preferred	
<b>*LOW MOLECULAR WEIGHT HEPARINS***</b>			
enoxaparin sodium injection solution	Lovenox	Preferred	QL
enoxaparin sodium injection solution prefilled syringe	Lovenox	Preferred	QL
<b>LOVENOX INJECTION SOLUTION</b>		Non-Preferred	QL
<b>LOVENOX INJECTION SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	QL
<b>*SYNTHETIC HEPARINOID-LIKE AGENTS***</b>			
<b>ARIXTRA SUBCUTANEOUS SOLUTION</b>		Non-Preferred	QL
<b>*THROMBIN INHIBITORS - HIRUDIN TYPE***</b>			
<b>ANGIOMAX INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	
bivalirudin trifluoroacetate intravenous solution		Non-Preferred	
bivalirudin trifluoroacetate intravenous solution reconstituted	Angiomax	Non-Preferred	
<b>*THROMBIN INHIBITORS - SELECTIVE DIRECT &amp; REVERSIBLE***</b>			
argatroban in sodium chloride intravenous solution		Non-Preferred	
argatroban intravenous solution		Non-Preferred	
<b>PRADAXA ORAL CAPSULE 110 MG</b>		Non-Preferred	QL
<b>PRADAXA ORAL CAPSULE 150 MG, 75 MG</b>		Non-Preferred	AL; QL

Drug Name	Reference	Status	Notes
<b>*ANTICONVULSANTS*</b>			
<b>*AMPA GLUTAMATE RECEPTOR ANTAGONISTS***</b>			
FYCOMPA ORAL SUSPENSION		Non-Preferred	PA; QL
FYCOMPA ORAL TABLET		Non-Preferred	PA; QL
<b>*ANTICONVULSANTS - BENZODIAZEPINES***</b>			
clobazam oral suspension	Onfi	Non-Preferred	PA; QL
clobazam oral tablet	Onfi	Non-Preferred	PA; QL
clonazepam oral tablet	KlonoPIN	Preferred	QL
clonazepam oral tablet dispersible		Preferred	QL
diazepam rectal gel		Preferred	QL
KLONOPIN ORAL TABLET		Non-Preferred	QL
LIBERVANT BUCCAL FILM		Non-Preferred	PA; QL
NAYZILAM NASAL SOLUTION		Non-Preferred	PA; QL
ONFI ORAL SUSPENSION		Non-Preferred	PA; QL
ONFI ORAL TABLET		Non-Preferred	PA; QL
SYMPAZAN ORAL FILM		Non-Preferred	PA; QL
VALTOCO 10 MG DOSE NASAL LIQUID		Non-Preferred	PA; QL
VALTOCO 15 MG DOSE NASAL LIQUID THERAPY PACK		Non-Preferred	PA; QL
VALTOCO 20 MG DOSE NASAL LIQUID THERAPY PACK		Non-Preferred	PA; QL
VALTOCO 5 MG DOSE NASAL LIQUID		Non-Preferred	PA; QL
<b>*ANTICONVULSANTS - MISC.***</b>			
APTIOM ORAL TABLET 200 MG, 400 MG		Non-Preferred	PA; DO; QL
APTIOM ORAL TABLET 600 MG, 800 MG		Non-Preferred	PA; QL
BANZEL ORAL SUSPENSION		Non-Preferred	PA; QL
BANZEL ORAL TABLET 200 MG		Non-Preferred	PA; DO; QL
BANZEL ORAL TABLET 400 MG		Non-Preferred	PA; QL
BRIVIACT INTRAVENOUS SOLUTION		Non-Preferred	PA
BRIVIACT ORAL SOLUTION		Non-Preferred	PA; QL
BRIVIACT ORAL TABLET		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
carbamazepine er oral capsule extended release 12 hour	Carbatrol	Preferred	QL
carbamazepine er oral tablet extended release 12 hour	TEGretol-XR	Preferred	QL
carbamazepine oral suspension	TEGretol	Preferred	QL
carbamazepine oral tablet	Epitol	Preferred	QL
carbamazepine oral tablet chewable		Preferred	QL
<b>CARBATROL ORAL CAPSULE EXTENDED RELEASE 12 HOUR</b>		Non-Preferred	QL
<b>DIACOMIT ORAL CAPSULE</b>		Non-Preferred	PA; DO; QL
<b>DIACOMIT ORAL PACKET</b>		Non-Preferred	PA; DO; QL
<b>ELEPSIA XR ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; QL
<b>EPIDIOLEX ORAL SOLUTION</b>		Non-Preferred	PA; SP
<b>EPITOL ORAL TABLET</b>		Preferred	QL
<b>EPRONTIA ORAL SOLUTION</b>		Non-Preferred	PA; QL
<b>FINTEPLA ORAL SOLUTION</b>		Non-Preferred	PA; QL
gabapentin oral capsule	Neurontin	Preferred	DO; QL
gabapentin oral solution	Neurontin	Preferred	QL
gabapentin oral tablet	Neurontin	Preferred	QL
<b>KEPPRA INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>KEPPRA ORAL SOLUTION</b>		Non-Preferred	QL
<b>KEPPRA ORAL TABLET 1000 MG, 250 MG, 500 MG</b>		Non-Preferred	PA; DO; QL
<b>KEPPRA ORAL TABLET 750 MG</b>		Non-Preferred	PA; QL
<b>KEPPRA XR ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; QL
lacosamide intravenous solution	Vimpat	Non-Preferred	
lacosamide oral solution	Vimpat	Non-Preferred	PA; QL
lacosamide oral tablet	Vimpat	Non-Preferred	PA; QL
<b>LAMICTAL ODT ORAL KIT</b>		Non-Preferred	PA; QL
<b>LAMICTAL ODT ORAL TABLET DISPERSIBLE 100 MG, 200 MG, 25 MG</b>		Non-Preferred	PA; QL
<b>LAMICTAL ODT ORAL TABLET DISPERSIBLE 50 MG</b>		Non-Preferred	PA; DO; QL
<b>LAMICTAL ORAL TABLET 100 MG, 150 MG, 200 MG</b>		Non-Preferred	PA; DO; QL
<b>LAMICTAL ORAL TABLET 25 MG</b>		Non-Preferred	PA; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>LAMICTAL ORAL TABLET CHEWABLE</b>		Non-Preferred	PA; QL
<b>LAMICTAL STARTER ORAL KIT</b>		Non-Preferred	PA; QL
<b>LAMICTAL XR ORAL KIT</b>		Non-Preferred	PA; QL
<b>LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24 HOUR 100 MG, 25 MG, 50 MG</b>		Non-Preferred	PA; DO; QL
<b>LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24 HOUR 200 MG, 250 MG, 300 MG</b>		Non-Preferred	PA; QL
lamotrigine er oral tablet extended release 24 hour 100 mg, 25 mg, 50 mg	LaMICtal XR	Preferred	DO; QL
lamotrigine er oral tablet extended release 24 hour 200 mg, 250 mg, 300 mg	LaMICtal XR	Preferred	QL
lamotrigine oral kit	LaMICtal ODT	Preferred	QL
lamotrigine oral tablet 100 mg, 150 mg, 200 mg	Subvenite	Preferred	DO; QL
lamotrigine oral tablet 25 mg	Subvenite	Preferred	QL
lamotrigine oral tablet chewable	LaMICtal	Preferred	QL
lamotrigine oral tablet dispersible 100 mg, 200 mg, 25 mg	LaMICtal ODT	Preferred	QL
lamotrigine oral tablet dispersible 50 mg	LaMICtal ODT	Preferred	DO; QL
lamotrigine starter kit-blue oral kit	Subvenite Starter Kit-Blue	Preferred	QL
lamotrigine starter kit-green oral kit	Subvenite Starter Kit-Green	Preferred	QL
lamotrigine starter kit-orange oral kit	Subvenite Starter Kit-Orange	Preferred	QL
levetiracetam er oral tablet extended release 24 hour	Keppra XR	Preferred	QL
levetiracetam in nacl intravenous solution		Non-Preferred	
levetiracetam intravenous solution	Keppra	Non-Preferred	
levetiracetam oral solution	Keppra	Preferred	QL
levetiracetam oral tablet 1000 mg, 250 mg	Keppra	Preferred	DO; QL
levetiracetam oral tablet 500 mg	Roweepra	Preferred	DO; QL
levetiracetam oral tablet 750 mg	Keppra	Preferred	QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>LYRICA ORAL CAPSULE</b>		Non-Preferred	QL
<b>LYRICA ORAL SOLUTION</b>		Non-Preferred	QL
<b>MOTPOLY XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; QL
<b>MYSOLINE ORAL TABLET</b>		Non-Preferred	QL
<b>NEURONTIN ORAL CAPSULE</b>		Non-Preferred	DO; QL
<b>NEURONTIN ORAL SOLUTION</b>		Non-Preferred	QL
<b>NEURONTIN ORAL TABLET</b>		Non-Preferred	QL
oxcarbazepine er oral tablet extended release 24 hour	Oxtellar XR	Non-Preferred	PA; QL
oxcarbazepine oral suspension	Trileptal	Preferred	QL
oxcarbazepine oral tablet	Trileptal	Preferred	QL
<b>OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG, 300 MG</b>		Non-Preferred	PA; DO; QL
<b>OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HOUR 600 MG</b>		Non-Preferred	PA; QL
pregabalin oral capsule	Lyrica	Preferred	QL
pregabalin oral solution	Lyrica	Preferred	QL
primidone oral tablet	Mysoline	Preferred	QL
<b>QUDEXY XR ORAL CAPSULE ER 24 HOUR SPRINKLE 100 MG, 150 MG, 200 MG, 50 MG</b>		Non-Preferred	PA; QL
<b>QUDEXY XR ORAL CAPSULE ER 24 HOUR SPRINKLE 25 MG</b>		Non-Preferred	PA; DO; QL
<b>ROWEEPRA ORAL TABLET</b>		Preferred	DO; QL
rufinamide oral suspension	Banzel	Non-Preferred	PA; QL
rufinamide oral tablet 200 mg	Banzel	Non-Preferred	PA; DO; QL
rufinamide oral tablet 400 mg	Banzel	Non-Preferred	PA; QL
<b>SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE</b>		Non-Preferred	PA; QL
<b>SUBVENITE ORAL TABLET 100 MG, 150 MG, 200 MG</b>		Preferred	DO; QL
<b>SUBVENITE ORAL TABLET 25 MG</b>		Preferred	QL
<b>SUBVENITE STARTER KIT-BLUE ORAL KIT</b>		Preferred	QL
<b>SUBVENITE STARTER KIT-GREEN ORAL KIT</b>		Preferred	QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>SUBVENITE STARTER KIT-ORANGE ORAL KIT</b>		Preferred	QL
<b>TEGRETOL ORAL SUSPENSION</b>		Non-Preferred	PA; QL
<b>TEGRETOL ORAL TABLET</b>		Non-Preferred	PA; QL
<b>TEGRETOL-XR ORAL TABLET EXTENDED RELEASE 12 HOUR</b>		Non-Preferred	PA; QL
<b>TOPAMAX ORAL TABLET 100 MG, 25 MG, 50 MG</b>		Non-Preferred	PA; DO; QL
<b>TOPAMAX ORAL TABLET 200 MG</b>		Non-Preferred	PA; QL
<b>TOPAMAX SPRINKLE ORAL CAPSULE SPRINKLE</b>		Non-Preferred	PA; QL
topiramate er oral capsule er 24 hour sprinkle 100 mg, 150 mg, 200 mg, 50 mg	Qudexy XR	Non-Preferred	PA; QL
topiramate er oral capsule er 24 hour sprinkle 25 mg	Qudexy XR	Non-Preferred	PA; DO; QL
topiramate er oral capsule extended release 24 hour 100 mg, 200 mg, 50 mg	Trokendi XR	Non-Preferred	PA; QL
topiramate er oral capsule extended release 24 hour 25 mg	Trokendi XR	Non-Preferred	PA; DO; QL
topiramate oral capsule sprinkle	Topamax Sprinkle	Preferred	QL
topiramate oral tablet 100 mg, 25 mg, 50 mg	Topamax	Preferred	DO; QL
topiramate oral tablet 200 mg	Topamax	Preferred	QL
<b>TRILEPTAL ORAL SUSPENSION</b>		Non-Preferred	PA; QL
<b>TRILEPTAL ORAL TABLET</b>		Non-Preferred	PA; QL
<b>TROKENDI XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 50 MG</b>		Non-Preferred	PA; QL
<b>TROKENDI XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 25 MG</b>		Non-Preferred	PA; DO; QL
<b>VIMPAT INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>VIMPAT ORAL SOLUTION</b>		Non-Preferred	PA; QL
<b>VIMPAT ORAL TABLET</b>		Non-Preferred	PA; QL
<b>ZONEGRAN ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>ZONISADE ORAL SUSPENSION</b>		Non-Preferred	PA; QL
zonisamide oral capsule	Zonegran	Preferred	QL
<b>ZTALMY ORAL SUSPENSION</b>		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
<b>*CARBAMATES***</b>			
felbamate oral suspension		Preferred	QL
felbamate oral tablet	Felbatol	Preferred	QL
<b>FELBATOL ORAL TABLET</b>		Non-Preferred	PA; QL
<b>XCOPRI (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK</b>		Non-Preferred	PA; QL
<b>XCOPRI (350 MG DAILY DOSE) ORAL TABLET THERAPY PACK</b>		Non-Preferred	PA; QL
<b>XCOPRI ORAL TABLET</b>		Non-Preferred	PA; QL
<b>XCOPRI ORAL TABLET THERAPY PACK</b>		Non-Preferred	PA; QL
<b>*GABA MODULATORS***</b>			
<b>SABRIL ORAL PACKET</b>		Non-Preferred	PA; SP; QL
<b>SABRIL ORAL TABLET</b>		Non-Preferred	PA; SP; QL
tiagabine hcl oral tablet		Preferred	QL
vigabatrin oral packet	Sabril	Non-Preferred	PA; SP; QL
vigabatrin oral tablet	Sabril	Non-Preferred	PA; SP; QL
<b>VIGADRONE ORAL PACKET</b>		Non-Preferred	PA; SP; QL
<b>VIGADRONE ORAL TABLET</b>		Non-Preferred	PA; SP; QL
<b>VIGAFYDE ORAL SOLUTION</b>		Non-Preferred	PA; QL
<b>VIGODER ORAL PACKET</b>		Non-Preferred	PA; SP; QL
<b>*HYDANTOINS***</b>			
<b>CEREBYX INJECTION SOLUTION</b>		Non-Preferred	
<b>DILANTIN INFATABS ORAL TABLET CHEWABLE</b>		Non-Preferred	PA
<b>DILANTIN ORAL CAPSULE</b>		Non-Preferred	PA
<b>DILANTIN ORAL SUSPENSION</b>		Non-Preferred	PA
<b>DILANTIN-125 ORAL SUSPENSION</b>		Non-Preferred	PA
fosphenytoin sodium injection solution	Cerebyx	Non-Preferred	
<b>PHENYTEK ORAL CAPSULE</b>		Preferred	PA
<b>PHENYTOIN INFATABS ORAL TABLET CHEWABLE</b>		Preferred	
phenytoin oral suspension	Dilantin	Preferred	
phenytoin oral tablet chewable	Phenytoin Infatabs	Preferred	
phenytoin sodium extended oral capsule	Dilantin	Preferred	
phenytoin sodium injection solution		Non-Preferred	



Drug Name	Reference	Status	Notes
<b>*SUCCINIMIDES***</b>			
<b>CELONTIN ORAL CAPSULE</b>		Non-Preferred	PA; QL
ethosuximide oral capsule	Zarontin	Preferred	QL
ethosuximide oral solution	Zarontin	Preferred	QL
methsuximide oral capsule	Celontin	Non-Preferred	PA; QL
<b>ZARONTIN ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>ZARONTIN ORAL SOLUTION</b>		Non-Preferred	PA; QL
<b>*VALPROIC ACID***</b>			
<b>DEPAKOTE ER ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; QL
<b>DEPAKOTE ORAL TABLET DELAYED RELEASE</b>		Non-Preferred	PA; QL
<b>DEPAKOTE SPRINKLES ORAL CAPSULE DELAYED RELEASE SPRINKLE</b>		Non-Preferred	PA; QL
divalproex sodium er oral tablet extended release 24 hour	Depakote ER	Preferred	QL
divalproex sodium oral capsule delayed release sprinkle	Depakote Sprinkles	Preferred	QL
divalproex sodium oral tablet delayed release	Depakote	Preferred	QL
valproate sodium intravenous solution		Non-Preferred	
valproic acid oral capsule		Preferred	QL
valproic acid oral solution		Preferred	
<b>*ANTIDEPRESSANTS*</b>			
<b>*ALPHA-2 RECEPTOR ANTAGONISTS (TETRACYCLICS)***</b>			
mirtazapine oral tablet	Remeron	Preferred	
mirtazapine oral tablet dispersible	Remeron SolTab	Preferred	
<b>REMERON ORAL TABLET</b>		Non-Preferred	
<b>REMERON SOLTAB ORAL TABLET DISPERSIBLE</b>		Non-Preferred	
<b>*ANTIDEPRESSANT - MISCELLANEOUS COMBINATIONS***</b>			
<b>AUVELITY ORAL TABLET EXTENDED RELEASE</b>		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
<b>*ANTIDEPRESSANTS - MISC.***</b>			
<b>APLENZIN ORAL TABLET EXTENDED RELEASE 24 HOUR 174 MG</b>		Non-Preferred	PA; DO; QL
<b>APLENZIN ORAL TABLET EXTENDED RELEASE 24 HOUR 348 MG, 522 MG</b>		Non-Preferred	PA; QL
bupropion hcl er (sr) oral tablet extended release 12 hour 100 mg	Wellbutrin SR	Preferred	DO; QL
bupropion hcl er (sr) oral tablet extended release 12 hour 150 mg, 200 mg	Wellbutrin SR	Preferred	QL
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg	Wellbutrin XL	Preferred	DO; QL
bupropion hcl er (xl) oral tablet extended release 24 hour 300 mg	Wellbutrin XL	Preferred	QL
bupropion hcl er (xl) oral tablet extended release 24 hour 450 mg	Forfivo XL	Non-Preferred	QL
bupropion hcl oral tablet 100 mg		Preferred	QL
bupropion hcl oral tablet 75 mg		Preferred	DO; QL
<b>FORFIVO XL ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; QL
<b>WELLBUTRIN SR ORAL TABLET EXTENDED RELEASE 12 HOUR 100 MG</b>		Non-Preferred	PA; DO; QL
<b>WELLBUTRIN SR ORAL TABLET EXTENDED RELEASE 12 HOUR 150 MG, 200 MG</b>		Non-Preferred	PA; QL
<b>WELLBUTRIN XL ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG</b>		Non-Preferred	DO; QL
<b>WELLBUTRIN XL ORAL TABLET EXTENDED RELEASE 24 HOUR 300 MG</b>		Non-Preferred	QL
<b>*GABA RECEPTOR MODULATOR - NEUROACTIVE STEROID***</b>			
<b>ZULRESSO INTRAVENOUS SOLUTION</b>		Non-Preferred	PA; SP
<b>ZURZUVAE ORAL CAPSULE</b>		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
<b>*MONOAMINE OXIDASE INHIBITORS (MAOIS)***</b>			
EMSAM TRANSDERMAL PATCH 24 HOUR 12 MG/24HR, 9 MG/24HR		Non-Preferred	PA; QL
EMSAM TRANSDERMAL PATCH 24 HOUR 6 MG/24HR		Non-Preferred	PA; DO; QL
MARPLAN ORAL TABLET		Non-Preferred	QL
NARDIL ORAL TABLET		Non-Preferred	QL
PARNATE ORAL TABLET		Non-Preferred	QL
phenelzine sulfate oral tablet	Nardil	Preferred	QL
tranylcypromine sulfate oral tablet	Parnate	Preferred	QL
<b>*N-METHYL-D-ASPARTIC ACID (NMDA) RECEPTOR ANTAGONISTS***</b>			
SPRAVATO (56 MG DOSE) NASAL SOLUTION THERAPY PACK		Non-Preferred	PA; QL
SPRAVATO (84 MG DOSE) NASAL SOLUTION THERAPY PACK		Non-Preferred	PA; QL
<b>*SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)***</b>			
CELEXA ORAL TABLET		Non-Preferred	
citalopram hydrobromide oral capsule		Non-Preferred	PA
citalopram hydrobromide oral solution		Preferred	
citalopram hydrobromide oral tablet	CeleXA	Preferred	
escitalopram oxalate oral solution		Preferred	
escitalopram oxalate oral tablet	Lexapro	Preferred	
fluoxetine hcl oral capsule	PROzac	Preferred	
fluoxetine hcl oral capsule delayed release		Preferred	
fluoxetine hcl oral solution		Preferred	
fluoxetine hcl oral tablet		Preferred	
fluvoxamine maleate er oral capsule extended release 24 hour		Preferred	
fluvoxamine maleate oral tablet		Preferred	
LEXAPRO ORAL TABLET		Non-Preferred	
paroxetine hcl er oral tablet extended release 24 hour	Paxil CR	Preferred	
paroxetine hcl oral suspension	Paxil	Preferred	

Drug Name	Reference	Status	Notes
paroxetine hcl oral tablet	Paxil	Preferred	
<b>PAXIL CR ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	
<b>PAXIL ORAL SUSPENSION</b>		Non-Preferred	PA
<b>PAXIL ORAL TABLET</b>		Non-Preferred	
<b>PROZAC ORAL CAPSULE</b>		Non-Preferred	
sertraline hcl oral capsule		Non-Preferred	PA
sertraline hcl oral concentrate	Zoloft	Preferred	
sertraline hcl oral tablet	Zoloft	Preferred	
<b>ZOLOFT ORAL CONCENTRATE</b>		Non-Preferred	
<b>ZOLOFT ORAL TABLET</b>		Non-Preferred	
<b>*SEROTONIN MODULATORS***</b>			
nefazodone hcl oral tablet 100 mg, 50 mg		Preferred	DO; QL
nefazodone hcl oral tablet 150 mg, 200 mg, 250 mg		Preferred	QL
trazodone hcl oral tablet 100 mg, 150 mg, 50 mg		Preferred	DO; QL
trazodone hcl oral tablet 300 mg		Preferred	QL
<b>TRINTELLIX ORAL TABLET 10 MG, 5 MG</b>		Non-Preferred	PA; DO; QL
<b>TRINTELLIX ORAL TABLET 20 MG</b>		Non-Preferred	PA; QL
<b>VIIBRYD ORAL TABLET 10 MG, 20 MG</b>		Non-Preferred	PA; DO; QL
<b>VIIBRYD ORAL TABLET 40 MG</b>		Non-Preferred	PA; QL
vilazodone hcl oral tablet 10 mg, 20 mg	Viibryd	Non-Preferred	PA; DO; QL
vilazodone hcl oral tablet 40 mg	Viibryd	Non-Preferred	PA; QL
<b>*SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)***</b>			
desvenlafaxine er oral tablet extended release 24 hour		Non-Preferred	PA; DO; QL
desvenlafaxine succinate er oral tablet extended release 24 hour 100 mg	Pristiq	Non-Preferred	PA; QL
desvenlafaxine succinate er oral tablet extended release 24 hour 25 mg, 50 mg	Pristiq	Non-Preferred	PA; DO; QL

Drug Name	Reference	Status	Notes
<b>DRIZALMA SPRINKLE ORAL CAPSULE DELAYED RELEASE SPRINKLE 20 MG, 60 MG</b>		Non-Preferred	PA; QL
<b>DRIZALMA SPRINKLE ORAL CAPSULE DELAYED RELEASE SPRINKLE 30 MG, 40 MG</b>		Non-Preferred	PA; DO; QL
<b>EFFEXOR XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; QL
<b>FETZIMA ORAL CAPSULE EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; QL
<b>FETZIMA TITRATION ORAL CAPSULE ER 24 HOUR THERAPY PACK</b>		Non-Preferred	PA; QL
<b>PRISTIQ ORAL TABLET EXTENDED RELEASE 24 HOUR 100 MG</b>		Non-Preferred	PA; QL
<b>PRISTIQ ORAL TABLET EXTENDED RELEASE 24 HOUR 25 MG, 50 MG</b>		Non-Preferred	PA; DO; QL
venlafaxine besylate er oral tablet extended release 24 hour		Non-Preferred	PA; QL
venlafaxine hcl er oral capsule extended release 24 hour	Effexor XR	Preferred	QL
venlafaxine hcl er oral tablet extended release 24 hour		Non-Preferred	PA; QL
venlafaxine hcl oral tablet 100 mg, 25 mg, 50 mg, 75 mg		Non-Preferred	PA; QL
venlafaxine hcl oral tablet 37.5 mg		Non-Preferred	PA; DO; QL
<b>*TRICYCLIC AGENTS***</b>			
amitriptyline hcl oral tablet 10 mg, 150 mg, 25 mg, 50 mg, 75 mg		Preferred	DO; QL
amitriptyline hcl oral tablet 100 mg		Preferred	QL
amoxapine oral tablet 100 mg, 150 mg		Preferred	QL
amoxapine oral tablet 25 mg, 50 mg		Preferred	DO; QL
<b>ANAFRANIL ORAL CAPSULE 25 MG</b>		Non-Preferred	DO; QL
<b>ANAFRANIL ORAL CAPSULE 50 MG, 75 MG</b>		Non-Preferred	QL
clomipramine hcl oral capsule 25 mg	Anafranil	Preferred	DO; QL
clomipramine hcl oral capsule 50 mg, 75 mg	Anafranil	Preferred	QL
desipramine hcl oral tablet 10 mg, 25 mg	Norpramin	Preferred	DO; QL

Drug Name	Reference	Status	Notes
desipramine hcl oral tablet 100 mg, 150 mg		Preferred	QL
desipramine hcl oral tablet 50 mg, 75 mg		Preferred	DO; QL
doxepin hcl oral capsule 10 mg, 25 mg, 50 mg, 75 mg		Preferred	DO; QL
doxepin hcl oral capsule 100 mg, 150 mg		Preferred	QL
doxepin hcl oral concentrate		Preferred	QL
imipramine hcl oral tablet 10 mg, 25 mg		Preferred	DO; QL
imipramine hcl oral tablet 50 mg		Preferred	QL
imipramine pamoate oral capsule 100 mg, 75 mg		Preferred	DO; QL
imipramine pamoate oral capsule 125 mg, 150 mg		Preferred	QL
<b>NORPRAMIN ORAL TABLET</b>		Non-Preferred	DO; QL
nortriptyline hcl oral capsule 10 mg, 25 mg	Pamelor	Preferred	DO; QL
nortriptyline hcl oral capsule 50 mg, 75 mg	Pamelor	Preferred	QL
nortriptyline hcl oral solution		Preferred	QL
<b>PAMELOR ORAL CAPSULE 10 MG, 25 MG</b>		Non-Preferred	DO; QL
<b>PAMELOR ORAL CAPSULE 50 MG, 75 MG</b>		Non-Preferred	QL
protriptyline hcl oral tablet 10 mg		Preferred	QL
protriptyline hcl oral tablet 5 mg		Preferred	DO; QL
trimipramine maleate oral capsule		Preferred	QL
<b>*ANTIDIABETICS*</b>			
<b>*ALPHA-GLUCOSIDASE INHIBITORS***</b>			
acarbose oral tablet		Preferred	QL
miglitol oral tablet		Non-Preferred	QL
<b>*ANTIDIABETIC - ALLOGENEIC CELLULAR THERAPY***</b>			
<b>LANTIDRA INTRAVENOUS SUSPENSION</b>		Non-Preferred	

Drug Name	Reference	Status	Notes
<b>*ANTIDIABETIC - AMYLIN ANALOGS***</b>			
<b>SYMLINPEN 120 SUBCUTANEOUS SOLUTION PEN-INJECTOR</b>		Preferred	PA; QL
<b>SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR</b>		Preferred	PA; QL
<b>*ANTIDIABETIC-ANTI-CD3 ANTIBODIES***</b>			
<b>TZIELD INTRAVENOUS SOLUTION</b>		Non-Preferred	PA
<b>*BIGUANIDES***</b>			
<b>GLUMETZA ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; QL
metformin hcl er (mod) oral tablet extended release 24 hour	Glumetza	Non-Preferred	PA; QL
metformin hcl er (osm) oral tablet extended release 24 hour		Non-Preferred	PA; QL
metformin hcl er oral tablet extended release 24 hour		Preferred	QL
metformin hcl oral solution	Riomet	Non-Preferred	QL
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg		Preferred	QL
metformin hcl oral tablet 625 mg		Non-Preferred	PA; QL
<b>RIOMET ORAL SOLUTION</b>		Non-Preferred	PA; QL
<b>*DIABETIC OTHER - COMBINATIONS***</b>			
<b>DEX4 GLUCOSE ORAL TABLET CHEWABLE</b>		Preferred	OTC
<b>DEX4 NATURALS ORAL TABLET CHEWABLE</b>		Preferred	OTC
<b>DEX4 ORAL TABLET CHEWABLE</b>		Preferred	OTC
<b>DEX4 POUCH PACK ORAL TABLET CHEWABLE</b>		Preferred	OTC
glucose instant energy oral tablet chewable	Dex4	Preferred	OTC
glucose oral tablet chewable	Dex4	Preferred	OTC
<b>*DIABETIC OTHER***</b>			
<b>BAQSIMI ONE PACK NASAL POWDER</b>		Non-Preferred	QL
<b>BAQSIMI TWO PACK NASAL POWDER</b>		Non-Preferred	QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>BD GLUCOSE ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>DEX4 GLUCOSE GO-POUCH ORAL GEL</b>		Non-Preferred	OTC
<b>DEX4 GLUCOSE ORAL LIQUID</b>		Non-Preferred	OTC
<b>DEX4 QUICK DISSOLVE GLUCOSE ORAL TABLET CHEWABLE</b>		Preferred	OTC
diazoxide oral suspension	Proglycem	Non-Preferred	
glucagon emergency injection kit		Preferred	QL
glucagon emergency injection solution reconstituted		Non-Preferred	QL
<b>GLUCO TO GO 15 ORAL GEL</b>		Preferred	OTC
glucose oral gel 15 gm/33gm	Dex4 Glucose Go-Pouch	Non-Preferred	OTC
glucose oral gel 40 %	Gluco to Go 15	Preferred	OTC
glucose oral liquid	Dex4 Glucose	Non-Preferred	OTC
glucose oral tablet chewable	Dex4 Quick Dissolve Glucose	Preferred	OTC
<b>GLUCOSE SOS ORAL PACKET</b>		Non-Preferred	OTC
<b>GLUTOSE 15 ORAL GEL</b>		Preferred	OTC
<b>GLUTOSE 45 ORAL GEL</b>		Preferred	OTC
<b>GLUTOSE 5 ORAL GEL</b>		Preferred	OTC
<b>GVOKE HYOPEN 1-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Non-Preferred	QL
<b>GVOKE HYOPEN 2-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Non-Preferred	QL
<b>GVOKE KIT SUBCUTANEOUS SOLUTION</b>		Non-Preferred	QL
<b>GVOKE PFS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	QL
<b>INSTA-GLUCOSE ORAL GEL</b>		Non-Preferred	OTC
<b>PROGLYCEM ORAL SUSPENSION</b>		Non-Preferred	
<b>RELION GLUCOSE ORAL GEL</b>		Preferred	OTC
<b>TRUEPLUS GLUCOSE ON THE GO ORAL TABLET CHEWABLE</b>		Preferred	OTC
<b>TRUEPLUS GLUCOSE ORAL GEL</b>		Non-Preferred	OTC
<b>TRUEPLUS GLUCOSE ORAL TABLET CHEWABLE</b>		Preferred	OTC



Drug Name	Reference	Status	Notes
<b>YUMVS GLUCOSE GUMMIES ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>ZEGALOGUE SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Non-Preferred	QL
<b>ZEGALOGUE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	QL
<b>*DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS***</b>			
alogliptin benzoate oral tablet		Non-Preferred	PA; QL
<b>JANUVIA ORAL TABLET</b>		Preferred	PA; QL
sitagliptin oral tablet	Zituvio	Non-Preferred	PA; QL
<b>TRADJENTA ORAL TABLET</b>		Non-Preferred	PA; QL
<b>ZITUVIO ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*DIPEPTIDYL PEPTIDASE-4 INHIBITOR-BIGUANIDE COMBINATIONS***</b>			
alogliptin-metformin hcl oral tablet		Non-Preferred	PA; QL
<b>JANUMET ORAL TABLET</b>		Preferred	PA; QL
<b>JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Preferred	PA; QL
<b>JENTADUETO ORAL TABLET</b>		Non-Preferred	PA; QL
<b>JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; QL
sitagliptin base-metformin hcl oral tablet	Zituvimet	Non-Preferred	PA; QL
<b>*DPP-4 INHIBITOR-THIAZOLIDINEDIONE COMBINATIONS***</b>			
alogliptin-pioglitazone oral tablet		Non-Preferred	PA; QL
<b>*HUMAN INSULIN***</b>			
<b>ADMELOG INJECTION SOLUTION</b>		Non-Preferred	PA; QL
<b>ADMELOG SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR</b>		Non-Preferred	QL
<b>AFREZZA INHALATION POWDER</b>		Non-Preferred	PA; QL
<b>APIDRA INJECTION SOLUTION</b>		Non-Preferred	PA; QL
<b>APIDRA SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR</b>		Non-Preferred	PA; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>BASAGLAR KWIKPEN SUBCUTANEOUS SOLUTION PEN- INJECTOR</b>		Preferred	QL
<b>BASAGLAR TEMPO PEN SUBCUTANEOUS SOLUTION PEN- INJECTOR</b>		Non-Preferred	PA; QL
<b>FIASP FLEXTOUCH SUBCUTANEOUS SOLUTION PEN- INJECTOR</b>		Non-Preferred	PA; QL
<b>FIASP INJECTION SOLUTION</b>		Non-Preferred	PA; QL
<b>FIASP PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE</b>		Non-Preferred	PA; QL
<b>FIASP PUMPCART SUBCUTANEOUS SOLUTION CARTRIDGE</b>		Non-Preferred	PA; QL
<b>HUMALOG INJECTION SOLUTION</b>		Non-Preferred	PA; QL
<b>HUMALOG JUNIOR KWIKPEN SUBCUTANEOUS SOLUTION PEN- INJECTOR</b>		Non-Preferred	PA; QL
<b>HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN- INJECTOR</b>		Non-Preferred	PA; QL
<b>HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR</b>		Preferred	QL
<b>HUMALOG MIX 50/50 SUBCUTANEOUS SUSPENSION</b>		Preferred	QL
<b>HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR</b>		Non-Preferred	PA; QL
<b>HUMALOG MIX 75/25 SUBCUTANEOUS SUSPENSION</b>		Preferred	AL; QL
<b>HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE</b>		Non-Preferred	PA; QL
<b>HUMALOG TEMPO PEN SUBCUTANEOUS SOLUTION PEN- INJECTOR</b>		Non-Preferred	PA; QL
<b>HUMULIN 70/30 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR</b>		Preferred	OTC; QL
<b>HUMULIN 70/30 SUBCUTANEOUS SUSPENSION</b>		Preferred	OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>HUMULIN N KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR</b>		Preferred	OTC; QL
<b>HUMULIN N SUBCUTANEOUS SUSPENSION</b>		Preferred	OTC; QL
<b>HUMULIN R INJECTION SOLUTION</b>		Preferred	OTC; QL
<b>HUMULIN R U-500 (CONCENTRATED) SUBCUTANEOUS SOLUTION</b>		Preferred	PA; QL
<b>HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN- INJECTOR</b>		Preferred	PA; QL
insulin asp prot & asp flexpen subcutaneous suspension pen-injector	NovoLOG 70/30 FlexPen ReliOn	Preferred	QL
insulin aspart flexpen subcutaneous solution pen-injector	NovoLOG FlexPen	Non-Preferred	PA; QL
insulin aspart injection solution	NovoLOG	Non-Preferred	PA; QL
insulin aspart penfill subcutaneous solution cartridge	NovoLOG PenFill	Non-Preferred	PA; QL
insulin aspart prot & aspart subcutaneous suspension	NovoLOG Mix 70/30	Preferred	QL
insulin degludec flextouch subcutaneous solution pen-injector	Tresiba FlexTouch	Non-Preferred	PA; QL
insulin degludec subcutaneous solution	Tresiba	Non-Preferred	PA; QL
insulin glargine max solostar subcutaneous solution pen-injector	Toujeo Max SoloStar	Preferred	QL
insulin glargine solostar subcutaneous solution pen-injector 100 unit/ml	Basaglar KwikPen	Non-Preferred	PA; QL
insulin glargine solostar subcutaneous solution pen-injector 300 unit/ml	Toujeo SoloStar	Preferred	QL
insulin glargine subcutaneous solution	Lantus	Non-Preferred	PA; QL
insulin glargine-yfgn subcutaneous solution	Semglee (yfgn)	Non-Preferred	PA; QL
insulin glargine-yfgn subcutaneous solution pen-injector	Semglee (yfgn)	Non-Preferred	PA; QL
insulin lispro (1 unit dial) subcutaneous solution pen-injector	Admelog SoloStar	Preferred	QL
insulin lispro injection solution	Admelog	Preferred	QL
insulin lispro junior kwikpen subcutaneous solution pen-injector	HumaLOG Junior KwikPen	Preferred	QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
insulin lispro prot & lispro subcutaneous suspension pen-injector	HumaLOG Mix 75/25 KwikPen	Preferred	QL
<b>LANTUS SOLOSTAR SUBCUTANEOUS SOLUTION PEN- INJECTOR</b>		Preferred	QL
<b>LANTUS SUBCUTANEOUS SOLUTION</b>		Preferred	QL
<b>LEVEMIR SUBCUTANEOUS SOLUTION</b>		Non-Preferred	PA; QL
<b>LYUMJEV INJECTION SOLUTION</b>		Non-Preferred	PA; QL
<b>LYUMJEV KWIKPEN SUBCUTANEOUS SOLUTION PEN- INJECTOR</b>		Non-Preferred	PA; QL
<b>LYUMJEV TEMPO PEN SUBCUTANEOUS SOLUTION PEN- INJECTOR</b>		Non-Preferred	PA; QL
<b>MYXREDLIN INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>NOVOLIN 70/30 FLEXPEN RELION SUBCUTANEOUS SUSPENSION PEN-INJECTOR</b>		Preferred	OTC; QL
<b>NOVOLIN 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR</b>		Preferred	OTC; QL
<b>NOVOLIN 70/30 RELION SUBCUTANEOUS SUSPENSION</b>		Preferred	OTC; QL
<b>NOVOLIN 70/30 SUBCUTANEOUS SUSPENSION</b>		Preferred	OTC; QL
<b>NOVOLIN N FLEXPEN RELION SUBCUTANEOUS SUSPENSION PEN-INJECTOR</b>		Preferred	OTC; QL
<b>NOVOLIN N FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR</b>		Preferred	QL
<b>NOVOLIN N RELION SUBCUTANEOUS SUSPENSION</b>		Preferred	OTC; QL
<b>NOVOLIN N SUBCUTANEOUS SUSPENSION</b>		Preferred	OTC; QL
<b>NOVOLIN R FLEXPEN INJECTION SOLUTION PEN-INJECTOR</b>		Preferred	OTC; QL
<b>NOVOLIN R FLEXPEN RELION INJECTION SOLUTION PEN- INJECTOR</b>		Preferred	OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>NOVOLIN R INJECTION SOLUTION</b>		Preferred	OTC; QL
<b>NOVOLIN R RELION INJECTION SOLUTION</b>		Preferred	OTC; QL
<b>NOVOLOG 70/30 FLEXPEN RELION SUBCUTANEOUS SUSPENSION PEN-INJECTOR</b>		Non-Preferred	PA; QL
<b>NOVOLOG FLEXPEN RELION SUBCUTANEOUS SOLUTION PEN-INJECTOR</b>		Non-Preferred	AL; QL
<b>NOVOLOG FLEXPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR</b>		Non-Preferred	PA; QL
<b>NOVOLOG INJECTION SOLUTION</b>		Non-Preferred	PA; QL
<b>NOVOLOG MIX 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR</b>		Non-Preferred	PA; QL
<b>NOVOLOG MIX 70/30 RELION SUBCUTANEOUS SUSPENSION</b>		Non-Preferred	PA; QL
<b>NOVOLOG MIX 70/30 SUBCUTANEOUS SUSPENSION</b>		Non-Preferred	PA; QL
<b>NOVOLOG PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE</b>		Non-Preferred	PA; QL
<b>NOVOLOG RELION INJECTION SOLUTION</b>		Non-Preferred	AL; QL
<b>REZVOGLAR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR</b>		Non-Preferred	PA; QL
<b>SEMGLEE (YFGN) SUBCUTANEOUS SOLUTION</b>		Non-Preferred	PA; QL
<b>SEMGLEE (YFGN) SUBCUTANEOUS SOLUTION PEN-INJECTOR</b>		Non-Preferred	PA; QL
<b>TOUJEO MAX SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR</b>		Non-Preferred	PA; QL
<b>TOUJEO SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR</b>		Non-Preferred	QL
<b>TRESIBA FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR</b>		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
TRESIBA SUBCUTANEOUS SOLUTION		Non-Preferred	PA; QL
<b>*INCRETIN MIMETIC AGENTS (GIP &amp; GLP-1 RECEPTOR AGONISTS)***</b>			
MOUNJARO SUBCUTANEOUS SOLUTION AUTO-INJECTOR		Non-Preferred	PA; QL
<b>*INCRETIN MIMETIC AGENTS (GLP-1 RECEPTOR AGONISTS)***</b>			
BYDUREON BCISE SUBCUTANEOUS AUTO-INJECTOR		Non-Preferred	PA; QL
BYETTA 10 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR		Non-Preferred	PA; QL
BYETTA 5 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR		Non-Preferred	PA; QL
liraglutide subcutaneous solution pen-injector	Victoza	Preferred	PA; QL
OZEMPIC (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR		Preferred	PA; QL
OZEMPIC (1 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR		Preferred	PA; QL
OZEMPIC (2 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR		Preferred	PA; QL
RYBELSUS ORAL TABLET		Non-Preferred	PA; QL
TRULICITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR		Preferred	PA; QL
VICTOZA SUBCUTANEOUS SOLUTION PEN-INJECTOR		Non-Preferred	PA; QL
<b>*INSULIN-INCRETIN MIMETIC COMBINATIONS***</b>			
SOLIQUA SUBCUTANEOUS SOLUTION PEN-INJECTOR		Non-Preferred	PA; QL
XULTOPHY SUBCUTANEOUS SOLUTION PEN-INJECTOR		Non-Preferred	PA; QL
<b>*MEGLITINIDE ANALOGUES***</b>			
nateglinide oral tablet		Preferred	PA; QL

Drug Name	Reference	Status	Notes
repaglinide oral tablet		Preferred	PA; QL
<b>*PROGESTERONE RECEPTOR ANTAGONISTS***</b>			
<b>KORLYM ORAL TABLET</b>		Non-Preferred	PA; QL
mifepristone oral tablet	Korlym	Non-Preferred	PA; QL
<b>*SGLT2 INHIBITOR - DPP-4 INHIBITOR - BIGUANIDE COMB***</b>			
<b>TRIJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; QL
<b>*SGLT2 INHIBITOR - DPP-4 INHIBITOR COMBINATIONS***</b>			
<b>GLYXAMBI ORAL TABLET</b>		Non-Preferred	PA; QL
<b>QTERN ORAL TABLET</b>		Non-Preferred	PA; QL
<b>STEGLUJAN ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS***</b>			
bexagliflozin oral tablet	Brenzavvy	Non-Preferred	PA; QL
<b>BRENZAVVY ORAL TABLET</b>		Non-Preferred	PA; QL
dapagliflozin propanediol oral tablet	Farxiga	Preferred	PA; QL
<b>FARXIGA ORAL TABLET</b>		Non-Preferred	PA; QL
<b>INVOKANA ORAL TABLET</b>		Non-Preferred	PA; QL
<b>JARDIANCE ORAL TABLET</b>		Non-Preferred	PA; QL
<b>STEGLATRO ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*SODIUM-GLUCOSE CO-TRANSPORTER 2 INHIBITOR-BIGUANIDE COMB***</b>			
dapagliflozin pro-metformin er oral tablet extended release 24 hour	Xigduo XR	Preferred	PA; QL
<b>INVOKAMET ORAL TABLET</b>		Non-Preferred	PA; QL
<b>INVOKAMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; QL
<b>SEGLUROMET ORAL TABLET</b>		Non-Preferred	PA; QL
<b>SYNJARDY ORAL TABLET</b>		Non-Preferred	PA; QL
<b>SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; QL
<b>XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
<b>*SULFONYLUREA-BIGUANIDE COMBINATIONS***</b>			
glipizide-metformin hcl oral tablet		Preferred	PA; QL
glyburide-metformin oral tablet		Preferred	PA; QL
<b>*SULFONYLUREAS***</b>			
glimepiride oral tablet 1 mg, 2 mg, 4 mg		Preferred	PA; QL
glimepiride oral tablet 3 mg		Non-Preferred	PA; QL
glipizide er oral tablet extended release 24 hour	Glucotrol XL	Preferred	PA; QL
glipizide oral tablet		Preferred	PA; QL
glipizide xl oral tablet extended release 24 hour	Glucotrol XL	Preferred	PA; QL
<b>GLUCOTROL XL ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; QL
glyburide micronized oral tablet		Preferred	PA; QL
glyburide oral tablet		Preferred	PA; QL
<b>*SULFONYLUREA-THIAZOLIDINEDIONE COMBINATIONS***</b>			
<b>DUETACT ORAL TABLET</b>		Non-Preferred	PA; QL
pioglitazone hcl-glimepiride oral tablet	Duetact	Preferred	PA; QL
<b>*THIAZOLIDINEDIONE-BIGUANIDE COMBINATIONS***</b>			
<b>ACTOPLUS MET ORAL TABLET</b>		Non-Preferred	PA; QL
pioglitazone hcl-metformin hcl oral tablet	Actoplus Met	Preferred	PA; QL
<b>*THIAZOLIDINEDIONES***</b>			
<b>ACTOS ORAL TABLET</b>		Non-Preferred	PA; QL
pioglitazone hcl oral tablet	Actos	Preferred	PA; QL
<b>*ANTIDIARRHEAL/PROBIOTIC AGENTS*</b>			
<b>*ANTIDIARRHEAL - CHLORIDE CHANNEL ANTAGONISTS***</b>			
<b>MYTESI ORAL TABLET DELAYED RELEASE</b>		Non-Preferred	PA; QL
<b>*ANTIDIARRHEAL/PROBIOTIC AGENTS - MISC.***</b>			
4x probiotic oral tablet	Bacid	Non-Preferred	OTC; QL



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>ABATINEX ORAL CAPSULE</b>		Non-Preferred	OTC; QL
acidophilus extra strength oral capsule	Abatinex	Non-Preferred	OTC; QL
<b>ACIDOPHILUS HIGH-POTENCY ORAL CAPSULE</b>		Non-Preferred	OTC
acidophilus lactobacillus oral capsule	Abatinex	Non-Preferred	OTC; QL
acidophilus oral capsule	Abatinex	Non-Preferred	OTC; QL
acidophilus oral tablet	Floranex	Non-Preferred	OTC
acidophilus oral tablet chewable	Align	Non-Preferred	OTC
acidophilus oral wafer		Non-Preferred	OTC
<b>ACIDOPHILUS PEARLS ORAL CAPSULE</b>		Non-Preferred	OTC
acidophilus probiotic blend oral capsule	Acidophilus High-Potency	Non-Preferred	OTC
acidophilus probiotic formula oral tablet	Floranex	Non-Preferred	OTC
acidophilus probiotic oral capsule	Abatinex	Non-Preferred	OTC; QL
acidophilus probiotic oral tablet	Floranex	Non-Preferred	OTC
acidophilus/bifidus oral tablet chewable	Align	Non-Preferred	OTC
acidophilus/bifidus probiotic oral wafer		Non-Preferred	OTC
acidophilus/pectin oral capsule	Abatinex	Non-Preferred	OTC; QL
acidophilus-bacillus coagulans oral tablet	Bacid	Non-Preferred	OTC; QL
<b>ACTIPHORA ORAL CAPSULE</b>		Non-Preferred	OTC
advanced probiotic oral capsule	Acidophilus High-Potency	Non-Preferred	OTC
advanced probiotic-14 oral capsule	Acidophilus High-Potency	Non-Preferred	OTC
<b>ALIGN DUALBIOTIC ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>ALIGN EXTRA STRENGTH ORAL CAPSULE</b>		Non-Preferred	OTC
<b>ALIGN JR FOR KIDS ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>ALIGN KIDS PROBIOTIC ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>ALIGN ORAL CAPSULE</b>		Non-Preferred	OTC
<b>ALIGN ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
aloe 10000 & probiotics oral capsule	Acidophilus High-Potency	Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>AZO COMPLETE FEMININE BALANCE ORAL CAPSULE</b>		Non-Preferred	OTC; QL
<b>AZO DUAL PROTECTION ORAL CAPSULE</b>		Non-Preferred	OTC; QL
bacicap oral capsule	Acidophilus High-Potency	Non-Preferred	OTC
<b>BACID ORAL CAPSULE</b>		Non-Preferred	OTC
<b>BACID ORAL TABLET</b>		Non-Preferred	OTC; QL
<b>BANATROL PLUS ORAL PACKET</b>		Non-Preferred	OTC
<b>BIOGAIA GASTRUS ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>BIOGAIA ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>BIOGAIA PROBIOTIC ORAL</b>		Non-Preferred	OTC
<b>BIOGAIA PROBIOTIC ORAL LIQUID</b>		Non-Preferred	OTC
<b>BIOGAIA PRODENTIS BABY ORAL LIQUID</b>		Non-Preferred	OTC
<b>BIOGAIA PRODENTIS GUM/TEETH ORAL LOZENGE</b>		Non-Preferred	OTC
<b>BIOGAIA PRODENTIS KIDS ORAL LOZENGE</b>		Non-Preferred	OTC
<b>BIOGAIA PROTECTIS BABY ORAL LIQUID</b>		Non-Preferred	OTC
<b>BIOGAIA PROTECTIS MUM ORAL CAPSULE</b>		Non-Preferred	OTC; QL
<b>BIO-K PLUS STRONG ORAL CAPSULE DELAYED RELEASE</b>		Non-Preferred	OTC
<b>BIO-KULT INFANTIS ORAL PACKET</b>		Non-Preferred	OTC
<b>BIO-KULT ORAL CAPSULE</b>		Non-Preferred	OTC
biomepro oral capsule	Abatinex	Non-Preferred	OTC; QL
biomepro oral capsule delayed release	Bio-K Plus Strong	Non-Preferred	OTC
biomepro oral liquid		Non-Preferred	OTC
biotinex oral capsule	Abatinex	Non-Preferred	OTC; QL
bismatrol oral suspension	Kaopectate	Preferred	OTC; QL
bismuth oral tablet chewable	Soothe	Preferred	OTC
bismuth subsalicylate oral tablet chewable	Soothe	Preferred	OTC
<b>CULTRELLE KIDS IMMUNE DEFENSE ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>CULTURELLE ABDOMINAL SUPPORT ORAL PACKET</b>		Non-Preferred	OTC
<b>CULTURELLE ADVANCED REGULARITY ORAL CAPSULE</b>		Non-Preferred	OTC; QL
<b>CULTURELLE BABY DIGESTIVE CALM ORAL LIQUID</b>		Non-Preferred	OTC
<b>CULTURELLE BABY HEALTHY DEV ORAL PACKET</b>		Non-Preferred	OTC
<b>CULTURELLE BABY IMMUNE+DIGEST ORAL LIQUID</b>		Non-Preferred	OTC
<b>CULTURELLE BLOATING &amp; GAS DEF ORAL CAPSULE</b>		Non-Preferred	OTC
<b>CULTURELLE HEALTH &amp; WELLNESS ORAL CAPSULE</b>		Non-Preferred	OTC
<b>CULTURELLE IMMUNE DEFENSE ORAL CAPSULE</b>		Non-Preferred	OTC
<b>CULTURELLE IMMUNE DEFENSE ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>CULTURELLE IMMUNITY SUPPORT ORAL CAPSULE</b>		Non-Preferred	OTC
<b>CULTURELLE KID PROBIOTIC+FIBER ORAL PACKET</b>		Non-Preferred	OTC
<b>CULTURELLE KID PROBIOTIC+FIBER ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>CULTURELLE KIDS GROW THRIVE ORAL PACKET</b>		Non-Preferred	OTC
<b>CULTURELLE KIDS IMMUNE DEFENSE ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>CULTURELLE KIDS ORAL PACKET</b>		Non-Preferred	OTC
<b>CULTURELLE KIDS ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>CULTURELLE KIDS PURELY ORAL PACKET</b>		Non-Preferred	OTC
<b>CULTURELLE KIDS PURELY ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>CULTURELLE METABOLISM-WEIGHT ORAL CAPSULE</b>		Non-Preferred	OTC
<b>CULTURELLE ORAL CAPSULE</b>		Non-Preferred	OTC
<b>CULTURELLE PRO &amp; PREBIOTIC ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>CULTURELLE PROBIOTICS KIDS ORAL PACKET</b>		Non-Preferred	OTC
<b>CULTURELLE PROBIOTICS KIDS ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>CULTURELLE PROBIOTICS ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>CULTURELLE PRO-WELL HEALTH ORAL CAPSULE</b>		Non-Preferred	OTC
<b>CULTURELLE PRO-WELL ORAL CAPSULE</b>		Non-Preferred	OTC
<b>CULTURELLE WOMENS 4 IN 1 ORAL CAPSULE</b>		Non-Preferred	OTC; QL
<b>CULTURELLE WOMEN'S WELLNESS ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
daily chewable probiotic-14 oral tablet chewable	Align	Non-Preferred	OTC
daily digestive probiotic oral capsule	Acidophilus High-Potency	Non-Preferred	OTC
daily probiotic oral capsule	Acidophilus High-Potency	Non-Preferred	OTC
daily probiotic supplement oral capsule	Florastor	Non-Preferred	OTC
<b>DEVROM ORAL CAPSULE</b>		Non-Preferred	OTC
<b>DEVROM ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>DIALYVITE PROBIOTIC ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
diarrhea oral suspension	Kaopectate	Preferred	OTC; QL
<b>DIGESTIVE ADV DIGESTIVE/IMMUNE ORAL CAPSULE</b>		Non-Preferred	OTC
<b>DIGESTIVE ADV DIGESTIVE/IMMUNE ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>DIGESTIVE ADV KID DIGST/IMMUNE ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>DIGESTIVE ADV+BOWEL SUPPORT ORAL CAPSULE</b>		Non-Preferred	OTC
<b>DIGESTIVE ADV+GAS DEFENSE ORAL CAPSULE</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>DIGESTIVE ADV+LACTOSE SUPPORT ORAL CAPSULE</b>		Non-Preferred	OTC
<b>DIGESTIVE ADVANTAGE GUMMIES ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>DIGESTIVE ADVANTAGE KIDS ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>DIGESTIVE ADVANTAGE ORAL CAPSULE</b>		Non-Preferred	OTC
digestive health probiotic oral capsule	Abatinex	Non-Preferred	OTC; QL
<b>ELACTIA BREASTFEEDING PROBIOTI ORAL CAPSULE</b>		Non-Preferred	OTC
<b>ENVIVE ORAL CAPSULE</b>		Non-Preferred	OTC
<b>ESTROVEN SLIMBIOTICS ORAL CAPSULE</b>		Non-Preferred	OTC
<b>FEM-DOPHILUS WOMENS ORAL CAPSULE</b>		Non-Preferred	OTC
<b>FLORA VANCE ORAL CAPSULE</b>		Non-Preferred	OTC
<b>FLORAJEN ACIDOPHILUS ORAL CAPSULE</b>		Non-Preferred	OTC; QL
<b>FLORAJEN DIGESTION ORAL CAPSULE</b>		Non-Preferred	OTC
<b>FLORAJEN WOMEN ORAL CAPSULE</b>		Non-Preferred	OTC; QL
<b>FLORAJEN3 ORAL CAPSULE</b>		Non-Preferred	OTC
<b>FLORAJEN4KIDS ORAL CAPSULE</b>		Non-Preferred	OTC
<b>FLORANEX ORAL PACKET</b>		Non-Preferred	OTC
<b>FLORANEX ORAL TABLET</b>		Non-Preferred	OTC
florasave oral capsule delayed release	Fortify 30 Billion Probiot 50+	Non-Preferred	OTC
<b>FLORASTOR ADVANCED ORAL CAPSULE</b>		Non-Preferred	OTC
<b>FLORASTOR BABY ORAL PACKET</b>		Non-Preferred	OTC
<b>FLORASTOR KIDS ORAL PACKET</b>		Non-Preferred	OTC
<b>FLORASTOR ORAL CAPSULE</b>		Non-Preferred	OTC
<b>FLORASTOR SELECT GUT BOOST ORAL CAPSULE</b>		Non-Preferred	OTC
<b>FLORASTOR SELECT IMMUNITY BOOS ORAL CAPSULE</b>		Non-Preferred	OTC
<b>FLORATUMMYS KIDS ORAL PACKET</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>FLORATUMMYS PROBIOTIC ORAL TABLET SOLUBLE</b>		Non-Preferred	OTC
<b>FORTIFY 30 BILLION PROBIOT 50+ ORAL CAPSULE DELAYED RELEASE</b>		Non-Preferred	OTC
<b>FORTIFY 50 BILLION PROBIOT 50+ ORAL CAPSULE DELAYED RELEASE</b>		Non-Preferred	OTC
<b>FORTIFY DAILY PROBIOTIC EX ST ORAL CAPSULE DELAYED RELEASE</b>		Non-Preferred	OTC
<b>FORTIFY DAILY PROBIOTIC ORAL CAPSULE</b>		Non-Preferred	OTC
<b>FORTIFY OPTIMA PROBIOTIC ORAL CAPSULE DELAYED RELEASE</b>		Non-Preferred	OTC
<b>FORTIFY OPTIMA WOMENS ADV CARE ORAL CAPSULE DELAYED RELEASE</b>		Non-Preferred	OTC
<b>FORTIFY PROBIOTIC WOMENS EX ST ORAL CAPSULE DELAYED RELEASE</b>		Non-Preferred	OTC
<b>FORTIFY PROBIOTIC WOMENS ORAL CAPSULE DELAYED RELEASE</b>		Non-Preferred	OTC
free + pure daily probiotic oral capsule	Florastor	Non-Preferred	OTC
freeze dried acidophilus oral capsule	Abatinex	Non-Preferred	OTC; QL
<b>GENORAVANCE ORAL CAPSULE</b>		Non-Preferred	OTC
<b>GERBER GENTLE PROBIOTIC ORAL LIQUID</b>		Non-Preferred	OTC
<b>GOOD START KIDS PROBIOTIC ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>GOOD START TODDLER PROBIOTIC ORAL PACKET</b>		Non-Preferred	OTC
ideal bowel support oral capsule	Abatinex	Non-Preferred	OTC; QL
<b>INTESTINEX ORAL CAPSULE</b>		Non-Preferred	OTC; QL
<b>KAOPECTATE EXTRA STRENGTH ORAL SUSPENSION</b>		Preferred	OTC
<b>KAOPECTATE ORAL SUSPENSION</b>		Preferred	OTC; QL
<b>KAOPECTATE ORAL TABLET</b>		Preferred	OTC
<b>KIJIMEA IBS ORAL CAPSULE</b>		Non-Preferred	OTC
<b>LACTINEX ORAL PACKET</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
lactobacillus extra strength oral capsule	Abatinex	Non-Preferred	OTC; QL
lactobacillus oral packet	Floranex	Non-Preferred	OTC
lactobacillus oral tablet	Floranex	Non-Preferred	OTC
lacto-pectin oral capsule	Acidophilus High-Potency	Non-Preferred	OTC
<b>MAGE ORAL CAPSULE DELAYED RELEASE</b>		Non-Preferred	OTC
mega probiotic oral capsule	Acidophilus High-Potency	Non-Preferred	OTC
<b>META BIOTIC/BIO-ACTIVE 12 ORAL CAPSULE</b>		Non-Preferred	OTC
<b>MICROFLOR 33 ORAL CAPSULE</b>		Non-Preferred	OTC
more-dophilus acidophilus oral powder		Non-Preferred	OTC
<b>MVW COMPL FORM PROBIOTIC-KIDS ORAL CAPSULE DELAYED RELEASE</b>		Non-Preferred	OTC
<b>MVW COMPLETE PROBIOTIC ORAL CAPSULE DELAYED RELEASE</b>		Non-Preferred	OTC
natrul probiotic oral capsule	Acidophilus High-Potency	Non-Preferred	OTC
newflora probiotic oral capsule	Abatinex	Non-Preferred	OTC; QL
<b>NEXABIOTIC ORAL CAPSULE DELAYED RELEASE</b>		Non-Preferred	OTC
<b>OMNI-BIOTIC AB 10 ORAL PACKET</b>		Non-Preferred	OTC
<b>OMNI-BIOTIC BALANCE ORAL PACKET</b>		Non-Preferred	OTC
<b>OMNI-BIOTIC HETOX ORAL PACKET</b>		Non-Preferred	OTC
<b>OMNI-BIOTIC PANDA ORAL PACKET</b>		Non-Preferred	OTC
<b>OMNI-BIOTIC STRESS RELEASE ORAL PACKET</b>		Non-Preferred	OTC
<b>PEARLS IC ORAL CAPSULE</b>		Non-Preferred	OTC
<b>PEDIA-LAX PROBIOTIC YUMS ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>PEPTO BISMOL ORAL CAPSULE</b>		Non-Preferred	OTC
<b>PEPTO BISMOL ULTRA ORAL TABLET</b>		Non-Preferred	OTC
<b>PEPTO DIARRHEA ORAL TABLET</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>PEPTO-BISMOL MAX STRENGTH ORAL SUSPENSION</b>		Non-Preferred	OTC
<b>PEPTO-BISMOL ORAL SUSPENSION</b>		Non-Preferred	OTC; QL
<b>PEPTO-BISMOL ORAL TABLET</b>		Non-Preferred	OTC
<b>PEPTO-BISMOL ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>PEPTO-BISMOL TO-GO ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>PHILLIPS COLON HEALTH ORAL CAPSULE</b>		Non-Preferred	OTC
pink bismuth maximum strength oral suspension	Kaopectate Extra Strength	Preferred	OTC
pink bismuth oral suspension	Kaopectate	Preferred	OTC; QL
<b>PREBIO MAX ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
preorbic oral capsule	Acidophilus High-Potency	Non-Preferred	OTC
<b>PRIMADOPHILUS BIFIDUS ORAL CAPSULE DELAYED RELEASE</b>		Non-Preferred	OTC
<b>PRIMADOPHILUS KIDS ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
primadophilus oral capsule	Abatinex	Non-Preferred	OTC; QL
<b>PRIMIDAR ORAL CAPSULE</b>		Non-Preferred	OTC
<b>PRO NUTRIENTS PROBIOTIC ORAL PACKET</b>		Non-Preferred	OTC
<b>PROBIATA ORAL TABLET</b>		Non-Preferred	OTC
<b>PROBIO DEFENSE ORAL CAPSULE</b>		Non-Preferred	OTC
probioflexx oral capsule	Acidophilus High-Potency	Non-Preferred	OTC
<b>PROBIOMAX 350 DF ORAL PACKET</b>		Non-Preferred	OTC
<b>PROBIOMAX COMPLETE DF ORAL CAPSULE</b>		Non-Preferred	OTC
probiomax daily df oral capsule	Acidophilus High-Potency	Non-Preferred	OTC
<b>PROBIOMAX LEAN DF ORAL CAPSULE</b>		Non-Preferred	OTC
<b>PROBIOMAX PLUS DF ORAL PACKET</b>		Non-Preferred	OTC



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>PROBIOMAX SERENITY ORAL CAPSULE</b>		Non-Preferred	OTC; QL
probionexx oral capsule	Acidophilus High-Potency	Non-Preferred	OTC
probiotic (lactobacillus) oral capsule	Abatinex	Non-Preferred	OTC; QL
probiotic + immune oral tablet chewable	Align	Non-Preferred	OTC
probiotic + omega-3 oral capsule	Acidophilus High-Potency	Non-Preferred	OTC
probiotic + turmeric extract oral capsule	Acidophilus High-Potency	Non-Preferred	OTC
probiotic 10 ultra strength oral capsule	Acidophilus High-Potency	Non-Preferred	OTC
probiotic acidophilus oral capsule	Abatinex	Non-Preferred	OTC; QL
probiotic acidophilus oral tablet chewable	Align	Non-Preferred	OTC
probiotic blend oral capsule	Acidophilus High-Potency	Non-Preferred	OTC
probiotic childrens oral packet	Floranex	Non-Preferred	OTC
probiotic childrens oral tablet chewable	Culturelle Women's Wellness	Non-Preferred	OTC
probiotic chocolate bears oral tablet chewable	Align	Non-Preferred	OTC
probiotic colic oral liquid	Mommy's Bliss Probiotic 15 Day	Non-Preferred	OTC
probiotic colon support oral capsule	Acidophilus High-Potency	Non-Preferred	OTC
probiotic daily oral capsule	Acidophilus High-Potency	Non-Preferred	OTC
probiotic digestive supp oral capsule	Acidophilus High-Potency	Non-Preferred	OTC
probiotic gold extra strength oral capsule	Abatinex	Non-Preferred	OTC; QL
probiotic mature adult oral capsule	Acidophilus High-Potency	Non-Preferred	OTC
probiotic multi-enzyme oral tablet	Bacid	Non-Preferred	OTC; QL
probiotic oral capsule	Florastor	Non-Preferred	OTC
probiotic oral packet	Bio-Kult Infantis	Non-Preferred	OTC
probiotic oral tablet chewable	Align	Non-Preferred	OTC
probiotic oral tablet delayed release	GoodSense 4X Probiotic	Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>PROBIOTIC PEARLS ADVANTAGE ORAL CAPSULE</b>		Non-Preferred	OTC
<b>PROBIOTIC PEARLS MAX POTENCY ORAL CAPSULE</b>		Non-Preferred	OTC
<b>PROBIOTIC PEARLS ORAL CAPSULE</b>		Non-Preferred	OTC
<b>PROBIOTIC PEARLS WOMENS ORAL CAPSULE</b>		Non-Preferred	OTC
probiotic product oral capsule	Acidophilus High-Potency	Non-Preferred	OTC
probiotic product oral tablet chewable	Align	Non-Preferred	OTC
probiotic/prebiotic/cranberry oral capsule	Acidophilus High-Potency	Non-Preferred	OTC
<b>PROBIOTIC-10 ULTIMATE ORAL CAPSULE</b>		Non-Preferred	OTC
<b>PROBITROL ORAL CAPSULE</b>		Non-Preferred	OTC
probizen oral capsule	Acidophilus High-Potency	Non-Preferred	OTC
<b>PRO-FLORA IMMUNE ORAL CAPSULE</b>		Non-Preferred	OTC
<b>PROMEROL ORAL CAPSULE</b>		Non-Preferred	OTC
<b>PROVELLA ORAL TABLET</b>		Non-Preferred	OTC; QL
quad-probiotic oral capsule	Acidophilus High-Potency	Non-Preferred	OTC
<b>RE:IMMUNE ORAL PACKET</b>		Non-Preferred	OTC
rejuvaflor oral capsule	Abatinex	Non-Preferred	OTC; QL
<b>REPHRESH PRO-B ORAL CAPSULE</b>		Non-Preferred	OTC; QL
<b>RESTORA ORAL CAPSULE</b>		Non-Preferred	OTC
restore oral packet	Bio-Kult Infantis	Non-Preferred	OTC
revitaflor oral capsule	Abatinex	Non-Preferred	OTC; QL
<b>RISA-BID PROBIOTIC ORAL TABLET</b>		Non-Preferred	OTC; QL
<b>RISAQUAD ORAL CAPSULE</b>		Non-Preferred	OTC
<b>RISAQUAD-2 ORAL CAPSULE</b>		Non-Preferred	OTC
s. boulardii pro + prebiotic oral capsule delayed release		Non-Preferred	OTC
saccharomyces boulardii oral capsule	Florastor	Non-Preferred	OTC
<b>SACCHAROMYCIN DF ORAL CAPSULE</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
sd probiotic-10 complex ultra oral capsule	Acidophilus High-Potency	Non-Preferred	OTC
<b>SIMILAC PROBIOTIC TRI-BLEND ORAL PACKET</b>		Non-Preferred	OTC
<b>SMARTY PANTS KIDS PROBIOTIC ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>SOOTHE MAXIMUM STRENGTH ORAL SUSPENSION</b>		Preferred	OTC
<b>SOOTHE ORAL SUSPENSION</b>		Preferred	OTC; QL
<b>SOOTHE ORAL TABLET CHEWABLE</b>		Preferred	OTC
<b>STABLEGI ORAL CAPSULE</b>		Non-Preferred	OTC
stomach relief extra strength oral suspension	Kaopectate Extra Strength	Preferred	OTC
stomach relief oral suspension 525 mg/15ml	Kaopectate Extra Strength	Preferred	OTC
stomach relief oral suspension 525 mg/30ml, 527 mg/30ml	Kaopectate	Preferred	OTC; QL
stomach relief oral tablet	Kaopectate	Preferred	OTC
stomach relief oral tablet chewable	Soothe	Preferred	OTC
stomach relief plus oral suspension	Kaopectate Extra Strength	Preferred	OTC
stomach relief ultra oral suspension	Kaopectate Extra Strength	Preferred	OTC
super probiotic digestive oral capsule	Acidophilus High-Potency	Non-Preferred	OTC
super probiotic oral capsule	Acidophilus High-Potency	Non-Preferred	OTC
superior probiotic oral capsule	Acidophilus High-Potency	Non-Preferred	OTC
surebiotic probiotic support oral capsule	Acidophilus High-Potency	Non-Preferred	
triple probiotic oral tablet	Bacid	Non-Preferred	OTC; QL
<b>TRUBIOTICS BABY ORAL LIQUID</b>		Non-Preferred	OTC
<b>TRUBIOTICS KIDS ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>TRUBIOTICS ORAL CAPSULE</b>		Non-Preferred	OTC
<b>ULTRAFLORA IMMUNE HEALTH ORAL CAPSULE</b>		Non-Preferred	OTC
<b>UPSPRING DUAL PRENATAL IMMUN ORAL CAPSULE</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
VISBIOME HIGH POTENCY ORAL CAPSULE		Non-Preferred	OTC
VISBIOME HIGH POTENCY ORAL PACKET		Non-Preferred	OTC
VSL#3 DS ORAL PACKET		Non-Preferred	OTC
VSL#3 JUNIOR ORAL PACKET		Non-Preferred	OTC
VSL#3 ORAL CAPSULE		Non-Preferred	OTC
VSL#3 ORAL PACKET		Non-Preferred	OTC
YUMVS PROBIOTIC ZERO ORAL TABLET CHEWABLE		Non-Preferred	OTC
YUMVSKIDS PROBIOTIC ZERO ORAL TABLET CHEWABLE		Non-Preferred	OTC
YUM-YUM DOPHILUS ORAL TABLET CHEWABLE		Non-Preferred	OTC
YUM-YUM DOPHILUS PROBIOTIC ORAL TABLET CHEWABLE		Non-Preferred	OTC
<b>*ANTIDIARRHEAL/PROBIOTIC COMBINATIONS***</b>			
acidophilus/citrus pectin oral tablet	Kala	Non-Preferred	OTC
acidophilus/pectin oral capsule		Non-Preferred	OTC
ALIGN PREBIOTIC-PROBIOTIC ORAL TABLET CHEWABLE		Non-Preferred	OTC
BENEFIBER PREBIOTIC+PROBIOTIC ORAL TABLET CHEWABLE		Non-Preferred	OTC
BIOGAIA IMMUNE ACTIVE BABY ORAL LIQUID		Non-Preferred	OTC
BIOGAIA OSFORTIS ORAL CAPSULE		Non-Preferred	OTC
BIOGAIA PROTECTIS BABY/VIT D ORAL LIQUID		Non-Preferred	OTC
BIOGAIA PROTECTIS IMMUNE ACTIV ORAL CAPSULE		Non-Preferred	OTC
BIOGAIA PROTECTIS IMMUNE ACTIV ORAL TABLET CHEWABLE		Non-Preferred	OTC
CULTURELLE ADULT ULT BALANCE ORAL CAPSULE		Non-Preferred	OTC; QL
CULTURELLE BABY CALM COMFORT ORAL LIQUID		Non-Preferred	OTC
CULTURELLE DIGESTIVE DAILY PRO ORAL CAPSULE		Non-Preferred	OTC; QL

Drug Name	Reference	Status	Notes
<b>CULTURELLE DIGESTIVE HEALTH ORAL CAPSULE</b>		Non-Preferred	OTC; QL
<b>CULTURELLE DIGESTIVE HEALTH ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>CULTURELLE HEALTH (INULIN) ORAL CAPSULE</b>		Non-Preferred	OTC; QL
<b>CULTURELLE ULTIMATE STRENGTH ORAL CAPSULE</b>		Non-Preferred	OTC; QL
<b>KALA ORAL TABLET</b>		Non-Preferred	OTC
prebiotic inulin-fos oral powder		Non-Preferred	OTC
probiotic digestive support oral capsule	Culturelle Adult Ult Balance	Non-Preferred	OTC; QL
probiotic formula oral capsule		Non-Preferred	OTC
probiotic oral capsule		Non-Preferred	OTC
<b>VIACTIV DIGESTIVE HEALTH ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>VITAFUSION FIBER WELL/PRO ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>*ANTIPERISTALTIC AGENTS***</b>			
anti-diarrheal oral capsule	Imodium A-D	Preferred	OTC; QL
anti-diarrheal oral solution	Imodium A-D	Non-Preferred	OTC; QL
anti-diarrheal oral tablet	Imodium A-D	Preferred	OTC; QL
diamode oral tablet	Imodium A-D	Preferred	OTC; QL
diphenoxylate-atropine oral liquid		Preferred	
diphenoxylate-atropine oral tablet	Lomotil	Preferred	
<b>IMODIUM A-D ORAL CAPSULE</b>		Non-Preferred	OTC; QL
<b>IMODIUM A-D ORAL SOLUTION</b>		Non-Preferred	OTC; QL
<b>IMODIUM A-D ORAL TABLET</b>		Non-Preferred	OTC; QL
<b>LOMOTIL ORAL TABLET</b>		Non-Preferred	
loperamide hcl oral capsule	Imodium A-D	Preferred	QL
loperamide hcl oral solution	Imodium A-D	Non-Preferred	OTC; QL
loperamide hcl oral suspension		Non-Preferred	OTC; QL
loperamide hcl oral tablet	Imodium A-D	Preferred	OTC; QL
<b>MOTOFEN ORAL TABLET</b>		Non-Preferred	
<b>*DIARRHEA COMBINATIONS - OPIATES***</b>			
<b>IMODIUM MULTI-SYMPTOM RELIEF ORAL TABLET</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
loperamide-simethicone oral tablet	Imodium Multi-Symptom Relief	Preferred	OTC
<b>*ANTIDOTES AND SPECIFIC ANTAGONISTS*</b>			
<b>*ANTIDOTE COMBINATIONS***</b>			
<b>NITHIODOLE INTRAVENOUS KIT</b>		Non-Preferred	
<b>PREVDUO INTRAVENOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	
<b>*ANTIDOTES - CHELATING AGENTS***</b>			
<b>CHEMET ORAL CAPSULE</b>		Non-Preferred	
deferasirox granules oral packet	Jadenu Sprinkle	Non-Preferred	PA; SP
deferasirox oral packet	Jadenu Sprinkle	Non-Preferred	PA; SP
deferasirox oral tablet	Jadenu	Non-Preferred	PA; SP
deferasirox oral tablet soluble	Exjade	Non-Preferred	PA; SP
deferiprone oral tablet	Ferriprox	Non-Preferred	PA
<b>EXJADE ORAL TABLET SOLUBLE</b>		Non-Preferred	PA; SP
<b>FERRIPROX ORAL SOLUTION</b>		Non-Preferred	
<b>FERRIPROX ORAL TABLET</b>		Non-Preferred	PA
<b>FERRIPROX TWICE-A-DAY ORAL TABLET</b>		Non-Preferred	PA
<b>JADENU ORAL TABLET</b>		Non-Preferred	PA; SP
<b>JADENU SPRINKLE ORAL PACKET</b>		Non-Preferred	PA; SP
pentetate calcium trisodium combination solution		Non-Preferred	
pentetate zinc trisodium combination solution		Non-Preferred	
<b>*ANTIDOTES AND SPECIFIC ANTAGONISTS***</b>			
<b>ACETADOTE INTRAVENOUS SOLUTION</b>		Non-Preferred	
acetylcysteine intravenous solution	Acetadote	Non-Preferred	
<b>ACTIDOSE WITH SORBITOL ORAL SUSPENSION</b>		Non-Preferred	OTC
<b>ACTIDOSE-AQUA ORAL LIQUID</b>		Non-Preferred	OTC
activated vegetable charcoal oral capsule	CharcoCaps	Non-Preferred	OTC
<b>ANDEXXA INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>BRIDION INTRAVENOUS SOLUTION</b>		Non-Preferred	
charcoal activated oral capsule	CharcoCaps	Non-Preferred	OTC
charcoal activated oral suspension reconstituted		Non-Preferred	OTC
<b>CHARCOCAPS ORAL CAPSULE</b>		Non-Preferred	OTC
<b>CHAR-FLO WITH SORBITOL ORAL SUSPENSION</b>		Non-Preferred	OTC
<b>CYANOKIT INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	
deferoxamine mesylate injection solution reconstituted	Desferal	Preferred	SP
<b>DESFERAL INJECTION SOLUTION RECONSTITUTED</b>		Non-Preferred	SP
<b>DIGIFAB INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	
edetate calcium disodium injection solution		Non-Preferred	
<b>EZ CHAR ORAL SUSPENSION RECONSTITUTED</b>		Non-Preferred	OTC
fomepizole intravenous solution		Non-Preferred	
<b>IOSAT ORAL TABLET</b>		Non-Preferred	OTC
<b>KERR INSTA-CHAR IN SORBITOL ORAL SUSPENSION</b>		Non-Preferred	OTC
<b>KERR INSTA-CHAR ORAL LIQUID</b>		Non-Preferred	OTC
methylene blue (antidote) intravenous solution		Non-Preferred	
methylene blue intravenous solution	ProvayBlue	Non-Preferred	
methylene blue intravenous solution prefilled syringe		Non-Preferred	
potassium iodide (antidote) oral solution		Non-Preferred	OTC
<b>PRAXBIND INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>PROTOPAM CHLORIDE INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>PROVAYBLUE INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>REQUA ACTIVATED CHARCOAL ORAL CAPSULE</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
sodium nitrite intravenous solution		Non-Preferred	
sodium thiosulfate intravenous solution		Non-Preferred	
sugammadex sodium intravenous solution prefilled syringe		Non-Preferred	
<b>VISTOGARD ORAL PACKET</b>		Non-Preferred	PA; QL
<b>*BENZODIAZEPINE ANTAGONISTS***</b>			
flumazenil intravenous solution		Non-Preferred	
<b>*OPIOID ANTAGONISTS***</b>			
<b>KLOXXADO NASAL LIQUID</b>		Preferred	QL
nalmefene hcl injection solution		Preferred	QL
naloxone hcl injection solution		Preferred	QL
naloxone hcl injection solution cartridge		Preferred	QL
naloxone hcl injection solution prefilled syringe		Preferred	QL
naloxone hcl nasal liquid	Narcan	Preferred	QL
naltrexone hcl oral tablet		Preferred	
<b>NARCAN NASAL LIQUID</b>		Non-Preferred	PA; QL
<b>OPVEE NASAL SOLUTION</b>		Preferred	QL
<b>REXTOVY NASAL LIQUID</b>		Preferred	QL
<b>RIVIVE NASAL LIQUID</b>		Preferred	OTC; QL
<b>ZIMHI INJECTION SOLUTION PREFILLED SYRINGE</b>		Preferred	QL
<b>*TOPICAL ANTIDOTES***</b>			
<b>CALGONATE EXTERNAL GEL</b>		Non-Preferred	OTC
<b>*ANTIEMETICS*</b>			
<b>*5-HT3 RECEPTOR ANTAGONISTS***</b>			
<b>ANZEMET ORAL TABLET</b>		Non-Preferred	PA; QL
granisetron hcl intravenous solution		Non-Preferred	
granisetron hcl oral tablet		Non-Preferred	PA; QL
ondansetron hcl injection solution		Non-Preferred	
ondansetron hcl injection solution prefilled syringe		Non-Preferred	
ondansetron hcl oral solution		Preferred	QL
ondansetron hcl oral tablet		Preferred	QL



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
ondansetron oral tablet dispersible 16 mg		Non-Preferred	QL
ondansetron oral tablet dispersible 4 mg, 8 mg		Preferred	QL
palonosetron hcl intravenous solution	Posfrea	Non-Preferred	PA
palonosetron hcl intravenous solution prefilled syringe		Non-Preferred	PA
<b>POSFREA INTRAVENOUS SOLUTION</b>		Non-Preferred	PA
<b>SANCUSO TRANSDERMAL PATCH</b>		Non-Preferred	PA; QL
<b>SUSTOL SUBCUTANEOUS PREFILLED SYRINGE</b>		Non-Preferred	
<b>*ANTIEMETIC COMBINATIONS***</b>			
<b>AKYNZEO (READY-TO-USE) INTRAVENOUS SOLUTION</b>		Non-Preferred	PA; QL
<b>AKYNZEO (TO-BE-DILUTED) INTRAVENOUS SOLUTION</b>		Non-Preferred	PA; QL
<b>AKYNZEO INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	PA; QL
<b>AKYNZEO ORAL CAPSULE</b>		Non-Preferred	PA; QL
anti-nausea oral solution	Emetrol	Preferred	OTC
<b>BONJESTA ORAL TABLET EXTENDED RELEASE</b>		Non-Preferred	PA
<b>DICLEGIS ORAL TABLET DELAYED RELEASE</b>		Non-Preferred	PA; QL
doxylamine-pyridoxine oral tablet delayed release	Diclegis	Non-Preferred	PA; QL
<b>EMETROL ORAL SOLUTION</b>		Non-Preferred	OTC
nausea control oral solution	Emetrol	Preferred	OTC
nausea relief oral solution	Emetrol	Preferred	OTC
<b>*ANTIEMETICS - ANTICHOLINERGIC***</b>			
<b>ANTIVERT ORAL TABLET</b>		Non-Preferred	
<b>ANTIVERT ORAL TABLET CHEWABLE</b>		Non-Preferred	
<b>BONINE ORAL TABLET CHEWABLE</b>		Preferred	OTC
dimenhydrinate injection solution		Non-Preferred	
<b>DRAMAMINE LESS DROWSY ORAL TABLET</b>		Preferred	OTC

Drug Name	Reference	Status	Notes
<b>DRAMAMINE MOTION SICKNESS KIDS ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>DRAMAMINE MOTION SICKNESS ORAL TABLET CHEWABLE</b>		Preferred	OTC
<b>DRAMAMINE ORAL TABLET 25 MG</b>		Preferred	OTC
<b>DRAMAMINE ORAL TABLET 50 MG</b>		Non-Preferred	OTC
<b>DRAMAMINE ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>DRIMINATE ORAL TABLET</b>		Preferred	OTC
meclizine hcl oral tablet 12.5 mg		Preferred	
meclizine hcl oral tablet 25 mg	Dramamine	Preferred	
meclizine hcl oral tablet 50 mg	Antivert	Non-Preferred	
meclizine hcl oral tablet chewable	Bonine	Preferred	
motion sickness relief oral tablet	Dramamine	Preferred	OTC
motion sickness relief oral tablet chewable	Bonine	Preferred	OTC
motion-time oral tablet chewable	Bonine	Preferred	OTC
scopolamine transdermal patch 72 hour	Transderm-Scop	Non-Preferred	
<b>TIGAN INTRAMUSCULAR SOLUTION</b>		Non-Preferred	
<b>TRANSDERM-SCOP TRANSDERMAL PATCH 72 HOUR</b>		Non-Preferred	
trimethobenzamide hcl oral capsule		Preferred	
<b>*ANTIEMETICS - ANTIDOPAMINERGIC***</b>			
<b>BARHEMSYS INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>*ANTIEMETICS - MISCELLANEOUS***</b>			
dronabinol oral capsule	Marinol	Non-Preferred	PA
<b>MARINOL ORAL CAPSULE</b>		Non-Preferred	PA
<b>SYNDROS ORAL SOLUTION</b>		Non-Preferred	PA; QL
<b>*SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS***</b>			
<b>APONVIE INTRAVENOUS EMULSION</b>		Non-Preferred	
aprepitant oral	Emend Tri-Pack	Non-Preferred	PA; QL
aprepitant oral capsule	Emend	Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
<b>CINVANTI INTRAVENOUS EMULSION</b>		Non-Preferred	PA; QL
<b>EMEND INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	PA; QL
<b>EMEND ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>EMEND ORAL SUSPENSION RECONSTITUTED</b>		Non-Preferred	PA; QL
<b>EMEND TRI-PACK ORAL CAPSULE</b>		Non-Preferred	PA; QL
focinvez intravenous solution		Non-Preferred	PA; QL
fosaprepitant dimeglumine intravenous solution reconstituted	Emend	Non-Preferred	PA; QL
<b>VARUBI (180 MG DOSE) ORAL TABLET THERAPY PACK</b>		Non-Preferred	PA; QL
<b>*ANTIFUNGALS*</b>			
<b>*ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITORS (ECHINOCANDINS)***</b>			
<b>CANCIDAS INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	QL
casposfungin acetate intravenous solution reconstituted	Cancidas	Non-Preferred	QL
<b>ERAXIS INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	PA
micafungin sodium intravenous solution reconstituted	Mycamine	Non-Preferred	
micafungin sodium-nacl intravenous solution		Non-Preferred	
<b>MYCAMINE INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>REZZAYO INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>*ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITORS (TRITERPENOID)***</b>			
<b>BREXAFEMME ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*ANTIFUNGALS***</b>			
<b>ABELCET INTRAVENOUS SUSPENSION</b>		Non-Preferred	
<b>AMBISOME INTRAVENOUS SUSPENSION RECONSTITUTED</b>		Non-Preferred	

Drug Name	Reference	Status	Notes
amphotericin b liposome intravenous suspension reconstituted	AmBisome	Non-Preferred	
<b>ANCOBON ORAL CAPSULE</b>		Non-Preferred	PA
flucytosine oral capsule	Ancobon	Preferred	PA
griseofulvin microsize oral suspension		Preferred	
griseofulvin microsize oral tablet		Non-Preferred	
griseofulvin ultramicrosize oral tablet		Preferred	
nystatin oral tablet		Preferred	
terbinafine hcl oral tablet		Preferred	QL
<b>*IMIDAZOLES***</b>			
ketoconazole oral tablet		Preferred	QL
<b>*TETRAZOLES***</b>			
<b>VIVJOA ORAL CAPSULE THERAPY PACK</b>		Non-Preferred	PA; QL
<b>*TRIAZOLES***</b>			
<b>CRESEMBA INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	PA; QL
<b>CRESEMBA ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>DIFLUCAN ORAL SUSPENSION RECONSTITUTED</b>		Non-Preferred	QL
<b>DIFLUCAN ORAL TABLET 100 MG, 150 MG</b>		Non-Preferred	
<b>DIFLUCAN ORAL TABLET 200 MG</b>		Non-Preferred	QL
fluconazole in sodium chloride intravenous solution		Non-Preferred	
fluconazole oral suspension reconstituted 10 mg/ml		Preferred	
fluconazole oral suspension reconstituted 40 mg/ml	Diflucan	Preferred	QL
fluconazole oral tablet 100 mg, 150 mg	Diflucan	Preferred	
fluconazole oral tablet 200 mg	Diflucan	Preferred	QL
fluconazole oral tablet 50 mg		Preferred	
itraconazole oral capsule	Sporanox	Preferred	PA; QL
itraconazole oral solution	Sporanox	Non-Preferred	PA; QL
<b>NOXAFIL INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>NOXAFIL ORAL PACKET</b>		Non-Preferred	QL
<b>NOXAFIL ORAL SUSPENSION</b>		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
<b>NOXAFIL ORAL TABLET DELAYED RELEASE</b>		Non-Preferred	PA; QL
posaconazole intravenous solution	Noxafil	Non-Preferred	
posaconazole oral suspension	Noxafil	Non-Preferred	PA; QL
posaconazole oral tablet delayed release	Noxafil	Non-Preferred	PA; QL
<b>SPORANOX ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>SPORANOX ORAL SOLUTION</b>		Non-Preferred	PA; QL
tolsura oral capsule		Non-Preferred	PA; QL
<b>VFEND IV INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>VFEND ORAL SUSPENSION RECONSTITUTED</b>		Non-Preferred	PA; QL
<b>VFEND ORAL TABLET</b>		Non-Preferred	PA; QL
voriconazole intravenous solution reconstituted	Vfend IV	Preferred	
voriconazole oral suspension reconstituted	Vfend	Preferred	PA; QL
voriconazole oral tablet	Vfend	Preferred	PA; QL
<b>*ANTIHISTAMINES*</b>			
<b>*ANTIHISTAMINES - ALKYLAMINES***</b>			
<b>ALA-HIST IR ORAL TABLET</b>		Non-Preferred	OTC; QL
chlorpheniramine maleate er oral tablet extended release	Chlor-Trimeton Allergy	Preferred	OTC
chlorpheniramine maleate oral tablet	Wal-finat	Preferred	OTC
<b>CHLOR-TRIMETON ALLERGY ORAL TABLET EXTENDED RELEASE</b>		Non-Preferred	PA; OTC
<b>DIABETIC TUSSIN ALLERGY ORAL SYRUP</b>		Preferred	OTC
<b>FLOXONASE NIGHT ALLERGY RELIEF ORAL TABLET</b>		Non-Preferred	OTC; QL
<b>HISTEX ORAL SYRUP</b>		Non-Preferred	PA; OTC; QL
<b>HISTEX PD ORAL LIQUID 0.938 MG/ML</b>		Non-Preferred	PA; OTC
<b>HISTEX PD ORAL LIQUID 1.25 MG/ML</b>		Non-Preferred	PA; OTC; QL
<b>HISTEX PDX ORAL LIQUID</b>		Non-Preferred	PA; OTC; QL

Drug Name	Reference	Status	Notes
<b>PEDIACLEAR PD CHILDRENS ORAL LIQUID</b>		Non-Preferred	PA; OTC
<b>RYCLORA ORAL SOLUTION</b>		Non-Preferred	PA
triprolidine hcl oral liquid	Histex PD	Non-Preferred	PA; OTC
<b>*ANTIHISTAMINES - ETHANOLAMINES***</b>			
allergy relief childrens oral tablet dispersible	Wal-Dryl Allergy Rel Childrens	Preferred	OTC
<b>BENADRYL ALLERGY CHILDRENS ORAL LIQUID</b>		Non-Preferred	OTC; QL
<b>BENADRYL ALLERGY CHILDRENS ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC; QL
<b>BENADRYL ALLERGY EXTRA STR ORAL TABLET</b>		Non-Preferred	OTC; QL
<b>BENADRYL ALLERGY ORAL CAPSULE</b>		Non-Preferred	OTC; QL
<b>BENADRYL ALLERGY ORAL TABLET</b>		Non-Preferred	OTC; QL
<b>BENADRYL ALLERGY ULTRATABS ORAL TABLET</b>		Non-Preferred	OTC; QL
carbinoxamine maleate er oral suspension extended release	Karbinal ER	Non-Preferred	PA; AL; QL
carbinoxamine maleate oral solution		Preferred	AL
carbinoxamine maleate oral tablet 4 mg		Preferred	PA; AL
carbinoxamine maleate oral tablet 6 mg	RyVent	Non-Preferred	PA; AL; QL
clemastine fumarate oral tablet		Non-Preferred	PA; QL
curelief oral liquid	KinderMed Kids Allergy	Preferred	OTC; QL
<b>DAYHIST ALLERGY 12 HOUR RELIEF ORAL TABLET</b>		Non-Preferred	PA; OTC; QL
diphenhydramine hcl childrens oral liquid	KinderMed Kids Allergy	Preferred	OTC; QL
diphenhydramine hcl injection solution		Non-Preferred	
diphenhydramine hcl oral capsule 25 mg	Benadryl Allergy	Preferred	QL
diphenhydramine hcl oral capsule 50 mg	Banophen	Preferred	
diphenhydramine hcl oral elixir		Non-Preferred	QL
diphenhydramine hcl oral liquid	KinderMed Kids Allergy	Preferred	OTC; QL
diphenhydramine hcl oral tablet	Benadryl Allergy	Preferred	OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
diphenhydramine hcl oral tablet chewable	Benadryl Allergy Childrens	Preferred	OTC; QL
<b>KARBINAL ER ORAL SUSPENSION EXTENDED RELEASE</b>		Non-Preferred	PA; AL; QL
<b>KINDERMED KIDS ALLERGY ORAL LIQUID</b>		Preferred	OTC; QL
<b>MAXALLERGY KIDS ORAL LIQUID</b>		Preferred	OTC; QL
<b>RYVENT ORAL TABLET</b>		Non-Preferred	PA; AL; QL
<b>*ANTIHISTAMINES - ETHYLENEDIAMINES***</b>			
<b>PEDIACLEAR 8 CHILDRENS ORAL LIQUID</b>		Non-Preferred	PA; OTC; QL
<b>*ANTIHISTAMINES - NON- SEDATING***</b>			
<b>ALLEGRA ALLERGY CHILDRENS ORAL SUSPENSION</b>		Non-Preferred	OTC; QL
<b>ALLEGRA ALLERGY CHILDRENS ORAL TABLET DISPERSIBLE</b>		Preferred	OTC; QL
<b>ALLEGRA ALLERGY ORAL TABLET</b>		Non-Preferred	PA; OTC; QL
<b>ALLEGRA HIVES 24HR ORAL TABLET</b>		Preferred	OTC; QL
allergy childrens oral suspension	Allegra Allergy Childrens	Preferred	OTC; QL
cetirizine hcl allergy child oral solution	ZyrTEC Childrens Allergy	Preferred	QL
cetirizine hcl childrens alrgy oral solution	ZyrTEC Childrens Allergy	Preferred	OTC; QL
cetirizine hcl oral solution	ZyrTEC Childrens Allergy	Preferred	QL
cetirizine hcl oral tablet	ZyrTEC Allergy	Preferred	OTC; QL
cetirizine hcl oral tablet chewable	Wal-Zyr Childrens	Preferred	OTC; QL
<b>CLARINEX ORAL TABLET</b>		Non-Preferred	PA; QL
<b>CLARITIN ALLERGY CHILDRENS ORAL SOLUTION</b>		Non-Preferred	PA; OTC; QL
<b>CLARITIN CHILDRENS ORAL TABLET CHEWABLE</b>		Non-Preferred	PA; OTC; QL
<b>CLARITIN ORAL CAPSULE</b>		Non-Preferred	PA; OTC; QL
<b>CLARITIN ORAL SOLUTION</b>		Non-Preferred	PA; OTC; QL
<b>CLARITIN ORAL TABLET</b>		Non-Preferred	PA; OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>CLARITIN ORAL TABLET CHEWABLE</b>		Non-Preferred	PA; OTC; QL
<b>CLARITIN REDITABS JUNIORS ORAL TABLET DISPERSIBLE</b>		Non-Preferred	PA; OTC; QL
<b>CLARITIN REDITABS ORAL TABLET DISPERSIBLE</b>		Non-Preferred	PA; OTC; QL
desloratadine oral tablet	Clarinet	Non-Preferred	PA; QL
desloratadine oral tablet dispersible		Non-Preferred	PA; QL
fexofenadine hcl oral tablet	Allegra Allergy	Preferred	OTC; QL
levocetirizine dihydrochloride oral solution	Xyzal Allergy 24HR Childrens	Non-Preferred	PA; QL
levocetirizine dihydrochloride oral tablet	Xyzal Allergy 24HR	Preferred	PA; AL; QL
loratadine childrens oral tablet chewable	Claritin	Preferred	OTC; QL
loratadine oral capsule	Claritin	Preferred	OTC; QL
loratadine oral solution	Claritin	Preferred	OTC; QL
loratadine oral tablet dispersible	Claritin Reditabs	Preferred	OTC; QL
<b>QUZYTIR INTRAVENOUS SOLUTION</b>		Non-Preferred	PA
<b>XYZAL ALLERGY 24HR CHILDRENS ORAL SOLUTION</b>		Non-Preferred	PA; OTC; QL
<b>XYZAL ALLERGY 24HR ORAL TABLET</b>		Preferred	OTC; QL
<b>ZYRTEC ALLERGY CHILDRENS ORAL TABLET DISPERSIBLE</b>		Non-Preferred	PA; AL; OTC; QL
<b>ZYRTEC ALLERGY ORAL CAPSULE</b>		Non-Preferred	PA; AL; OTC; QL
<b>ZYRTEC ALLERGY ORAL TABLET</b>		Non-Preferred	PA; AL; OTC; QL
<b>ZYRTEC CHILDRENS ALLERGY ORAL SOLUTION</b>		Non-Preferred	PA; AL; OTC; QL
<b>ZYRTEC CHILDRENS ALLERGY ORAL TABLET CHEWABLE</b>		Non-Preferred	PA; AL; OTC; QL
<b>*ANTIHISTAMINES - PHENOTHIAZINES***</b>			
<b>PHENERGAN INJECTION SOLUTION</b>		Non-Preferred	
promethazine hcl injection solution	Phenergan	Non-Preferred	
promethazine hcl oral solution		Preferred	QL
promethazine hcl oral tablet		Preferred	AL; QL



Drug Name	Reference	Status	Notes
promethazine hcl rectal suppository	Promethegan	Preferred	AL; QL
<b>PROMETHEGAN RECTAL SUPPOSITORY</b>		Preferred	AL; QL
<b>*ANTIHISTAMINES - PIPERAZINES***</b>			
<b>AHIST ORAL TABLET</b>		Non-Preferred	OTC; QL
<b>*ANTIHISTAMINES - PIPERIDINES***</b>			
cyproheptadine hcl oral syrup		Preferred	
cyproheptadine hcl oral tablet		Preferred	
<b>*ANTHYPERLIPIDEMICS*</b>			
<b>*ACL INHIB-INTESTINAL CHOLESTEROL ABSORPTION INHIB COMB***</b>			
<b>NEXLIZET ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*ADENOSINE TRIPHOSPHATE-CITRATE LYASE (ACL) INHIBITORS***</b>			
<b>NEXLETOL ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*ANGIOPOIETIN-LIKE PROTEIN 3 (ANGPTL3) INHIBITORS***</b>			
<b>EVKEEZA INTRAVENOUS SOLUTION</b>		Non-Preferred	PA
<b>*ANTHYPERLIPIDEMICS - MISC.***</b>			
icosapent ethyl oral capsule	Vascepa	Non-Preferred	PA; QL
<b>LOVAZA ORAL CAPSULE</b>		Non-Preferred	PA; QL
omega-3-acid ethyl esters oral capsule	Lovaza	Non-Preferred	PA; QL
<b>VASCEPA ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>*BILE ACID SEQUESTRANTS***</b>			
cholestyramine light oral packet	Prevalite	Preferred	QL
cholestyramine light oral powder	Prevalite	Preferred	QL
cholestyramine oral packet	Questran	Preferred	QL
cholestyramine oral powder	Questran	Preferred	QL
colesevelam hcl oral packet	Welchol	Non-Preferred	QL
colesevelam hcl oral tablet	Welchol	Non-Preferred	QL
<b>COLESTID ORAL GRANULES</b>		Non-Preferred	QL
<b>COLESTID ORAL TABLET</b>		Non-Preferred	QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
colestipol hcl oral granules	Colestid	Preferred	QL
colestipol hcl oral packet		Preferred	QL
colestipol hcl oral tablet	Colestid	Preferred	QL
<b>PREVALITE ORAL PACKET</b>		Preferred	QL
<b>PREVALITE ORAL POWDER</b>		Preferred	QL
<b>QUESTRAN LIGHT ORAL POWDER</b>		Non-Preferred	QL
<b>QUESTRAN ORAL PACKET</b>		Non-Preferred	QL
<b>QUESTRAN ORAL POWDER</b>		Non-Preferred	QL
<b>WELCHOL ORAL PACKET</b>		Non-Preferred	QL
<b>WELCHOL ORAL TABLET</b>		Non-Preferred	QL
<b>*FIBRIC ACID DERIVATIVES***</b>			
fenofibrate micronized oral capsule 130 mg		Non-Preferred	PA; QL
fenofibrate micronized oral capsule 134 mg, 200 mg, 43 mg, 67 mg		Preferred	QL
fenofibrate oral capsule 134 mg, 200 mg, 67 mg		Preferred	QL
fenofibrate oral capsule 150 mg, 50 mg	Lipofen	Non-Preferred	PA; QL
fenofibrate oral tablet 120 mg, 40 mg	Fenoglide	Non-Preferred	PA; QL
fenofibrate oral tablet 145 mg	Tricor	Non-Preferred	PA; QL
fenofibrate oral tablet 160 mg, 54 mg		Preferred	QL
fenofibrate oral tablet 48 mg	Tricor	Preferred	QL
fenofibric acid oral capsule delayed release 135 mg	Trilipix	Non-Preferred	PA; QL
fenofibric acid oral capsule delayed release 45 mg	Trilipix	Preferred	QL
fenofibric acid oral tablet	Fibricor	Non-Preferred	PA; QL
<b>FENOGLIDE ORAL TABLET</b>		Non-Preferred	PA; QL
<b>FIBRICOR ORAL TABLET</b>		Non-Preferred	PA; QL
gemfibrozil oral tablet	Lopid	Preferred	QL
<b>LIPOFEN ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>LOPID ORAL TABLET</b>		Non-Preferred	PA; QL
<b>TRICOR ORAL TABLET</b>		Non-Preferred	PA; QL
<b>TRILIPIX ORAL CAPSULE DELAYED RELEASE</b>		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
<b>*HMG COA REDUCTASE INHIBITORS***</b>			
<b>ALTOPREV ORAL TABLET EXTENDED RELEASE 24 HOUR 20 MG</b>		Non-Preferred	PA; DO; QL
<b>ALTOPREV ORAL TABLET EXTENDED RELEASE 24 HOUR 40 MG, 60 MG</b>		Non-Preferred	PA; QL
<b>ATORVALIQ ORAL SUSPENSION</b>		Non-Preferred	PA; QL
atorvastatin calcium oral tablet 10 mg, 20 mg, 40 mg	Lipitor	Preferred	DO; QL
atorvastatin calcium oral tablet 80 mg	Lipitor	Preferred	QL
<b>CRESTOR ORAL TABLET 10 MG, 20 MG, 5 MG</b>		Non-Preferred	PA; DO; QL
<b>CRESTOR ORAL TABLET 40 MG</b>		Non-Preferred	PA; QL
<b>EZALLOR SPRINKLE ORAL CAPSULE SPRINKLE 10 MG, 20 MG, 5 MG</b>		Non-Preferred	PA; DO; QL
<b>EZALLOR SPRINKLE ORAL CAPSULE SPRINKLE 40 MG</b>		Non-Preferred	PA; QL
flolipid oral suspension		Non-Preferred	PA; QL
fluvastatin sodium er oral tablet extended release 24 hour	Lescol XL	Non-Preferred	PA; QL
fluvastatin sodium oral capsule		Non-Preferred	PA; DO; QL
<b>LESCOL XL ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; QL
<b>LIPITOR ORAL TABLET 10 MG, 20 MG, 40 MG</b>		Non-Preferred	PA; DO; QL
<b>LIPITOR ORAL TABLET 80 MG</b>		Non-Preferred	PA; QL
<b>LIVALO ORAL TABLET 1 MG, 2 MG</b>		Non-Preferred	PA; DO; QL
<b>LIVALO ORAL TABLET 4 MG</b>		Non-Preferred	PA; QL
lovastatin oral tablet 10 mg, 20 mg		Preferred	DO; QL
lovastatin oral tablet 40 mg		Preferred	QL
pitavastatin calcium oral tablet 1 mg, 2 mg	Livalo	Non-Preferred	PA; DO; QL
pitavastatin calcium oral tablet 4 mg	Livalo	Non-Preferred	PA; QL
pravastatin sodium oral tablet 10 mg, 20 mg, 40 mg		Preferred	DO; QL
pravastatin sodium oral tablet 80 mg		Preferred	QL
rosuvastatin calcium oral tablet 10 mg, 20 mg, 5 mg	Crestor	Preferred	DO; QL

Drug Name	Reference	Status	Notes
rosuvastatin calcium oral tablet 40 mg	Crestor	Preferred	QL
simvastatin oral tablet 10 mg, 20 mg	Zocor	Preferred	DO; QL
simvastatin oral tablet 40 mg	Zocor	Preferred	QL
simvastatin oral tablet 5 mg		Preferred	DO; QL
simvastatin oral tablet 80 mg		Preferred	QL
<b>ZOCOR ORAL TABLET 10 MG, 20 MG</b>		Non-Preferred	PA; DO; QL
<b>ZOCOR ORAL TABLET 40 MG</b>		Non-Preferred	PA; QL
<b>ZYPITAMAG ORAL TABLET 2 MG</b>		Non-Preferred	PA; DO; QL
<b>ZYPITAMAG ORAL TABLET 4 MG</b>		Non-Preferred	PA; QL
<b>*INTEST CHOLEST ABSORP INHIB-HMG COA REDUCTASE INHIB COMB***</b>			
ezetimibe-simvastatin oral tablet	Vytorin	Non-Preferred	PA; QL
<b>VYTORIN ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS***</b>			
ezetimibe oral tablet	Zetia	Preferred	QL
<b>*MICROSOMAL TRIGLYCERIDE TRANSFER PROTEIN INHIBITORS***</b>			
<b>JUXTAPID ORAL CAPSULE 10 MG, 5 MG</b>		Non-Preferred	PA; DO; QL
<b>JUXTAPID ORAL CAPSULE 20 MG, 30 MG</b>		Non-Preferred	PA; QL
<b>*NICOTINIC ACID DERIVATIVES***</b>			
niacin er (antihyperlipidemic) oral tablet extended release		Non-Preferred	PA; QL
<b>NIACOR ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*PCSK9 INHIBITORS***</b>			
<b>PRALUENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Non-Preferred	PA; QL
<b>REPATHA PUSHTRONEX SYSTEM SUBCUTANEOUS SOLUTION CARTRIDGE</b>		Preferred	PA; QL
<b>REPATHA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Preferred	PA; QL

Drug Name	Reference	Status	Notes
REPATHA SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR		Preferred	PA; QL
<b>*SMALL INTERFERING RNA (SIRNA) PCSK9 INHIBITORS***</b>			
LEQVIO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE		Non-Preferred	PA; QL
<b>*ANTIHYPERTENSIVES*</b>			
<b>*ACE INHIBITOR &amp; CALCIUM CHANNEL BLOCKER COMBINATIONS***</b>			
amlodipine besy-benazepril hcl oral capsule 10-20 mg, 10-40 mg	Lotrel	Preferred	QL
amlodipine besy-benazepril hcl oral capsule 2.5-10 mg		Preferred	DO; QL
amlodipine besy-benazepril hcl oral capsule 5-10 mg, 5-20 mg	Lotrel	Preferred	DO; QL
amlodipine besy-benazepril hcl oral capsule 5-40 mg		Preferred	QL
<b>LOTREL ORAL CAPSULE 10-20 MG, 10-40 MG</b>		Non-Preferred	QL
<b>LOTREL ORAL CAPSULE 5-10 MG, 5-20 MG</b>		Non-Preferred	DO; QL
<b>PRESTALIA ORAL TABLET 14-10 MG</b>		Non-Preferred	QL
<b>PRESTALIA ORAL TABLET 3.5-2.5 MG, 7-5 MG</b>		Non-Preferred	DO; QL
trandolapril-verapamil hcl er oral tablet extended release 1-240 mg		Non-Preferred	DO; QL
trandolapril-verapamil hcl er oral tablet extended release 2-180 mg, 2-240 mg, 4-240 mg		Non-Preferred	QL
<b>*ACE INHIBITORS &amp; THIAZIDE/THIAZIDE-LIKE***</b>			
<b>ACCURETIC ORAL TABLET 10-12.5 MG</b>		Non-Preferred	DO; QL
<b>ACCURETIC ORAL TABLET 20-12.5 MG</b>		Non-Preferred	QL
benazepril-hydrochlorothiazide oral tablet 10-12.5 mg	Lotensin HCT	Preferred	DO; QL
benazepril-hydrochlorothiazide oral tablet 20-12.5 mg, 20-25 mg	Lotensin HCT	Preferred	QL

Drug Name	Reference	Status	Notes
benazepril-hydrochlorothiazide oral tablet 5-6.25 mg		Preferred	DO; QL
captopril-hydrochlorothiazide oral tablet		Preferred	QL
enalapril-hydrochlorothiazide oral tablet 10-25 mg	Vaseretic	Preferred	QL
enalapril-hydrochlorothiazide oral tablet 5-12.5 mg		Preferred	DO; QL
fosinopril sodium-hctz oral tablet 10-12.5 mg		Preferred	DO; QL
fosinopril sodium-hctz oral tablet 20-12.5 mg		Preferred	QL
lisinopril-hydrochlorothiazide oral tablet 10-12.5 mg	Zestoretic	Preferred	DO; QL
lisinopril-hydrochlorothiazide oral tablet 20-12.5 mg, 20-25 mg	Zestoretic	Preferred	QL
<b>LOTENSIN HCT ORAL TABLET 10-12.5 MG</b>		Non-Preferred	DO; QL
<b>LOTENSIN HCT ORAL TABLET 20-12.5 MG, 20-25 MG</b>		Non-Preferred	QL
quinapril-hydrochlorothiazide oral tablet 10-12.5 mg	Accuretic	Preferred	DO; QL
quinapril-hydrochlorothiazide oral tablet 20-12.5 mg	Accuretic	Preferred	QL
quinapril-hydrochlorothiazide oral tablet 20-25 mg		Preferred	QL
<b>VASERETIC ORAL TABLET</b>		Non-Preferred	QL
<b>ZESTORETIC ORAL TABLET 10-12.5 MG</b>		Non-Preferred	DO; QL
<b>ZESTORETIC ORAL TABLET 20-12.5 MG, 20-25 MG</b>		Non-Preferred	QL
<b>*ACE INHIBITORS***</b>			
<b>ACCUPRIL ORAL TABLET 10 MG, 20 MG, 5 MG</b>		Non-Preferred	DO; QL
<b>ACCUPRIL ORAL TABLET 40 MG</b>		Non-Preferred	QL
<b>ALTACE ORAL CAPSULE 1.25 MG, 2.5 MG, 5 MG</b>		Non-Preferred	DO; QL
<b>ALTACE ORAL CAPSULE 10 MG</b>		Non-Preferred	QL
benazepril hcl oral tablet 10 mg, 20 mg	Lotensin	Preferred	DO; QL
benazepril hcl oral tablet 40 mg	Lotensin	Preferred	QL

Drug Name	Reference	Status	Notes
benazepril hcl oral tablet 5 mg		Preferred	DO; QL
captopril oral tablet 100 mg		Preferred	QL
captopril oral tablet 12.5 mg, 25 mg, 50 mg		Preferred	DO; QL
enalapril maleate oral solution	Epaned	Non-Preferred	PA; QL
enalapril maleate oral tablet 10 mg, 2.5 mg, 5 mg	Vasotec	Preferred	DO; QL
enalapril maleate oral tablet 20 mg	Vasotec	Preferred	QL
enalaprilat intravenous solution		Non-Preferred	
<b>EPANED ORAL SOLUTION</b>		Non-Preferred	PA; QL
fosinopril sodium oral tablet 10 mg, 20 mg		Preferred	DO; QL
fosinopril sodium oral tablet 40 mg		Preferred	QL
lisinopril oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg	Zestril	Preferred	DO; QL
lisinopril oral tablet 30 mg, 40 mg	Zestril	Preferred	QL
<b>LOTENSIN ORAL TABLET 10 MG, 20 MG</b>		Non-Preferred	DO; QL
<b>LOTENSIN ORAL TABLET 40 MG</b>		Non-Preferred	QL
moexipril hcl oral tablet 15 mg		Preferred	QL
moexipril hcl oral tablet 7.5 mg		Preferred	DO; QL
perindopril erbumine oral tablet 2 mg, 4 mg		Preferred	DO; QL
perindopril erbumine oral tablet 8 mg		Preferred	QL
<b>QBRELIS ORAL SOLUTION</b>		Non-Preferred	PA; QL
quinapril hcl oral tablet 10 mg, 20 mg, 5 mg	Accupril	Preferred	DO; QL
quinapril hcl oral tablet 40 mg	Accupril	Preferred	QL
ramipril oral capsule 1.25 mg, 2.5 mg, 5 mg	Altace	Preferred	DO; QL
ramipril oral capsule 10 mg	Altace	Preferred	QL
trandolapril oral tablet 1 mg, 2 mg		Preferred	DO; QL
trandolapril oral tablet 4 mg		Preferred	QL
<b>VASOTEC ORAL TABLET 10 MG, 2.5 MG, 5 MG</b>		Non-Preferred	DO; QL
<b>VASOTEC ORAL TABLET 20 MG</b>		Non-Preferred	QL
<b>ZESTRIL ORAL TABLET 10 MG, 2.5 MG, 20 MG, 5 MG</b>		Non-Preferred	DO; QL
<b>ZESTRIL ORAL TABLET 30 MG, 40 MG</b>		Non-Preferred	QL

Drug Name	Reference	Status	Notes
<b>*AGENTS FOR PHEOCHROMOCYTOMA***</b>			
<b>DEMSEER ORAL CAPSULE</b>		Non-Preferred	PA; SP; QL
<b>DIBENZYLINE ORAL CAPSULE</b>		Non-Preferred	PA; QL
metyrosine oral capsule	Demser	Non-Preferred	PA; SP; QL
phenoxybenzamine hcl oral capsule	Dibenzyliline	Non-Preferred	PA; QL
phentolamine mesylate injection solution reconstituted		Non-Preferred	
<b>*ANGIOTENSIN II RECEPTOR ANTAG &amp; CA CHANNEL BLOCKER COMB***</b>			
amlodipine besylate-valsartan oral tablet 10-160 mg, 10-320 mg, 5-320 mg	Exforge	Non-Preferred	QL
amlodipine besylate-valsartan oral tablet 5-160 mg	Exforge	Non-Preferred	DO; QL
amlodipine-olmesartan oral tablet 10-20 mg, 10-40 mg, 5-40 mg	Azor	Non-Preferred	QL
amlodipine-olmesartan oral tablet 5-20 mg	Azor	Non-Preferred	DO; QL
<b>AZOR ORAL TABLET 10-20 MG, 10-40 MG, 5-40 MG</b>		Non-Preferred	QL
<b>AZOR ORAL TABLET 5-20 MG</b>		Non-Preferred	DO; QL
<b>EXFORGE ORAL TABLET 10-160 MG, 10-320 MG, 5-320 MG</b>		Non-Preferred	QL
<b>EXFORGE ORAL TABLET 5-160 MG</b>		Non-Preferred	DO; QL
telmisartan-amlodipine oral tablet 40-10 mg, 80-10 mg, 80-5 mg		Non-Preferred	QL
telmisartan-amlodipine oral tablet 40-5 mg		Non-Preferred	DO; QL
<b>*ANGIOTENSIN II RECEPTOR ANTAG &amp; THIAZIDE/THIAZIDE-LIKE***</b>			
<b>ATACAND HCT ORAL TABLET</b>		Non-Preferred	PA; QL
<b>AVALIDE ORAL TABLET</b>		Non-Preferred	PA; QL
<b>BENICAR HCT ORAL TABLET 20-12.5 MG</b>		Non-Preferred	PA; DO; QL
<b>BENICAR HCT ORAL TABLET 40-12.5 MG, 40-25 MG</b>		Non-Preferred	PA; QL
candesartan cilexetil-hctz oral tablet	Atacand HCT	Preferred	QL



Drug Name	Reference	Status	Notes
<b>DIOVAN HCT ORAL TABLET 160-12.5 MG, 80-12.5 MG</b>		Non-Preferred	PA; DO; QL
<b>DIOVAN HCT ORAL TABLET 160-25 MG, 320-12.5 MG, 320-25 MG</b>		Non-Preferred	PA; QL
<b>EDARBYCLOR ORAL TABLET</b>		Non-Preferred	PA; QL
<b>HYZAAR ORAL TABLET 100-12.5 MG, 100-25 MG</b>		Non-Preferred	PA; QL
<b>HYZAAR ORAL TABLET 50-12.5 MG</b>		Non-Preferred	PA; DO; QL
irbesartan-hydrochlorothiazide oral tablet	Avalide	Preferred	QL
losartan potassium-hctz oral tablet 100-12.5 mg, 100-25 mg	Hyzaar	Preferred	QL
losartan potassium-hctz oral tablet 50-12.5 mg	Hyzaar	Preferred	DO; QL
<b>MICARDIS HCT ORAL TABLET 40-12.5 MG</b>		Non-Preferred	PA; DO; QL
<b>MICARDIS HCT ORAL TABLET 80-12.5 MG, 80-25 MG</b>		Non-Preferred	PA; QL
olmesartan medoxomil-hctz oral tablet 20-12.5 mg	Benicar HCT	Non-Preferred	PA; DO; QL
olmesartan medoxomil-hctz oral tablet 40-12.5 mg, 40-25 mg	Benicar HCT	Non-Preferred	PA; QL
telmisartan-hctz oral tablet 40-12.5 mg	Micardis HCT	Non-Preferred	PA; DO; QL
telmisartan-hctz oral tablet 80-12.5 mg, 80-25 mg	Micardis HCT	Non-Preferred	PA; QL
valsartan-hydrochlorothiazide oral tablet 160-12.5 mg, 80-12.5 mg	Diovan HCT	Preferred	DO; QL
valsartan-hydrochlorothiazide oral tablet 160-25 mg, 320-12.5 mg, 320-25 mg	Diovan HCT	Preferred	QL
<b>*ANGIOTENSIN II RECEPTOR ANTAGONISTS***</b>			
<b>ATACAND ORAL TABLET 16 MG, 32 MG</b>		Non-Preferred	PA; QL
<b>ATACAND ORAL TABLET 4 MG, 8 MG</b>		Non-Preferred	PA; DO; QL
<b>AVAPRO ORAL TABLET 150 MG, 75 MG</b>		Non-Preferred	PA; DO; QL
<b>AVAPRO ORAL TABLET 300 MG</b>		Non-Preferred	PA; QL
<b>BENICAR ORAL TABLET 20 MG, 5 MG</b>		Non-Preferred	PA; DO; QL

Drug Name	Reference	Status	Notes
<b>BENICAR ORAL TABLET 40 MG</b>		Non-Preferred	PA; QL
candesartan cilexetil oral tablet 16 mg, 32 mg	Atacand	Preferred	QL
candesartan cilexetil oral tablet 4 mg, 8 mg	Atacand	Preferred	DO; QL
<b>COZAAR ORAL TABLET 100 MG, 50 MG</b>		Non-Preferred	PA; QL
<b>COZAAR ORAL TABLET 25 MG</b>		Non-Preferred	PA; DO; QL
<b>DIOVAN ORAL TABLET 160 MG, 320 MG</b>		Non-Preferred	PA; QL
<b>DIOVAN ORAL TABLET 40 MG, 80 MG</b>		Non-Preferred	PA; DO; QL
<b>EDARBI ORAL TABLET 40 MG</b>		Non-Preferred	PA; DO; QL
<b>EDARBI ORAL TABLET 80 MG</b>		Non-Preferred	PA; QL
irbesartan oral tablet 150 mg, 75 mg	Avapro	Preferred	DO; QL
irbesartan oral tablet 300 mg	Avapro	Preferred	QL
losartan potassium oral tablet 100 mg, 50 mg	Cozaar	Preferred	QL
losartan potassium oral tablet 25 mg	Cozaar	Preferred	DO; QL
<b>MICARDIS ORAL TABLET 20 MG, 40 MG</b>		Non-Preferred	PA; DO; QL
<b>MICARDIS ORAL TABLET 80 MG</b>		Non-Preferred	PA; QL
olmesartan medoxomil oral tablet 20 mg, 5 mg	Benicar	Non-Preferred	PA; DO; QL
olmesartan medoxomil oral tablet 40 mg	Benicar	Non-Preferred	PA; QL
telmisartan oral tablet 20 mg, 40 mg	Micardis	Non-Preferred	PA; DO; QL
telmisartan oral tablet 80 mg	Micardis	Non-Preferred	PA; QL
valsartan oral solution		Non-Preferred	PA; QL
valsartan oral tablet 160 mg, 320 mg	Diovan	Preferred	QL
valsartan oral tablet 40 mg, 80 mg	Diovan	Preferred	DO; QL
<b>*ANGIOTENSIN II RECEPTOR ANT-CA CHANNEL BLOCKER-THIAZIDES***</b>			
amlodipine-valsartan-hctz oral tablet 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg, 5-160-25 mg	Exforge HCT	Non-Preferred	QL
amlodipine-valsartan-hctz oral tablet 5-160-12.5 mg	Exforge HCT	Non-Preferred	DO; QL

Drug Name	Reference	Status	Notes
<b>EXFORGE HCT ORAL TABLET 10-160-12.5 MG, 10-160-25 MG, 10-320-25 MG, 5-160-25 MG</b>		Non-Preferred	QL
<b>EXFORGE HCT ORAL TABLET 5-160-12.5 MG</b>		Non-Preferred	DO; QL
olmesartan-amlodipine-hctz oral tablet 20-5-12.5 mg	Tribenzor	Non-Preferred	DO; QL
olmesartan-amlodipine-hctz oral tablet 40-10-12.5 mg, 40-10-25 mg, 40-5-12.5 mg, 40-5-25 mg	Tribenzor	Non-Preferred	QL
<b>TRIBENZOR ORAL TABLET 20-5-12.5 MG</b>		Non-Preferred	DO; QL
<b>TRIBENZOR ORAL TABLET 40-10-12.5 MG, 40-10-25 MG, 40-5-12.5 MG, 40-5-25 MG</b>		Non-Preferred	QL
<b>*ANTIADRENERGICS - CENTRALLY ACTING***</b>			
<b>CATAPRES-TTS-1 TRANSDERMAL PATCH WEEKLY</b>		Non-Preferred	QL
<b>CATAPRES-TTS-2 TRANSDERMAL PATCH WEEKLY</b>		Non-Preferred	QL
<b>CATAPRES-TTS-3 TRANSDERMAL PATCH WEEKLY</b>		Non-Preferred	QL
clonidine er oral tablet extended release 24 hour	Nexiclon XR	Non-Preferred	AL; QL
clonidine hcl oral tablet 0.1 mg, 0.2 mg		Preferred	DO; QL
clonidine hcl oral tablet 0.3 mg		Preferred	QL
clonidine transdermal patch weekly	Catapres-TTS-1	Non-Preferred	QL
guanfacine hcl oral tablet		Preferred	
methyldopa oral tablet 250 mg		Preferred	DO; QL
methyldopa oral tablet 500 mg		Preferred	QL
<b>NEXICLON XR ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; QL
<b>*ANTIADRENERGICS - PERIPHERALLY ACTING***</b>			
<b>CARDURA ORAL TABLET</b>		Non-Preferred	QL
doxazosin mesylate oral tablet	Cardura	Preferred	QL
prazosin hcl oral capsule		Preferred	
terazosin hcl oral capsule		Preferred	QL

Drug Name	Reference	Status	Notes
<b>*ANTIHYPERTENSIVES - MISC.***</b>			
VECAMYL ORAL TABLET		Non-Preferred	
<b>*BETA BLOCKER &amp; DIURETIC COMBINATIONS***</b>			
atenolol-chlorthalidone oral tablet	Tenoretic 100	Preferred	QL
bisoprolol-hydrochlorothiazide oral tablet		Preferred	QL
metoprolol-hydrochlorothiazide oral tablet		Preferred	QL
TENORETIC 100 ORAL TABLET		Non-Preferred	QL
TENORETIC 50 ORAL TABLET		Non-Preferred	QL
<b>*DIRECT RENIN INHIBITORS***</b>			
aliskiren fumarate oral tablet 150 mg	Tekturna	Non-Preferred	DO; QL
aliskiren fumarate oral tablet 300 mg	Tekturna	Non-Preferred	QL
TEKTURNA ORAL TABLET 150 MG		Non-Preferred	DO; QL
TEKTURNA ORAL TABLET 300 MG		Non-Preferred	QL
<b>*ENDOTHELIN RECEPTOR ANTAGONISTS***</b>			
TRYVIO ORAL TABLET		Non-Preferred	PA; QL
<b>*SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS)***</b>			
eplerenone oral tablet	Inspira	Non-Preferred	
INSPIRA ORAL TABLET		Non-Preferred	
<b>*VASODILATORS***</b>			
hydralazine hcl injection solution		Non-Preferred	
hydralazine hcl oral tablet		Preferred	
minoxidil oral tablet		Preferred	
NIPRIDE RTU INTRAVENOUS SOLUTION		Non-Preferred	
nitroprusside sodium intravenous solution		Non-Preferred	
nitroprusside sodium-nacl intravenous solution	Nipride RTU	Non-Preferred	
sodium nitroprusside intravenous solution		Non-Preferred	

Drug Name	Reference	Status	Notes
<b>*ANTI-INFECTIVE AGENTS - MISC.*</b>			
<b>*ANTI-INFECTIVE AGENTS - MISC.**</b>			
<b>AEMCOLO ORAL TABLET DELAYED RELEASE</b>		Non-Preferred	PA; QL
<b>FLAGYL ORAL CAPSULE</b>		Non-Preferred	
<b>IMPAVIDO ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>LIKMEZ ORAL SUSPENSION</b>		Non-Preferred	PA
metronidazole intravenous solution		Non-Preferred	
metronidazole oral capsule	Flagyl	Preferred	
metronidazole oral tablet		Preferred	
<b>NEBUPENT INHALATION SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>PENTAM INJECTION SOLUTION RECONSTITUTED</b>		Non-Preferred	
pentamidine isethionate inhalation solution reconstituted	Nebupent	Non-Preferred	
pentamidine isethionate injection solution reconstituted	Pentam	Non-Preferred	
tinidazole oral tablet		Preferred	QL
trimethoprim oral tablet		Preferred	
<b>*ANTI-INFECTIVE MISC. - COMBINATIONS**</b>			
<b>BACTRIM DS ORAL TABLET</b>		Non-Preferred	
<b>BACTRIM ORAL TABLET</b>		Non-Preferred	
sulfamethoxazole-trimethoprim intravenous solution		Non-Preferred	
sulfamethoxazole-trimethoprim oral suspension	Sulfatrim Pediatric	Preferred	
sulfamethoxazole-trimethoprim oral tablet	Bactrim	Preferred	
<b>SULFATRIM PEDIATRIC ORAL SUSPENSION</b>		Preferred	
<b>*ANTIPROTOZOAL AGENTS**</b>			
atovaquone oral suspension	Mepron	Non-Preferred	
<b>LAMPIT ORAL TABLET</b>		Non-Preferred	
<b>MEPRON ORAL SUSPENSION</b>		Non-Preferred	
nitazoxanide oral tablet		Non-Preferred	

Drug Name	Reference	Status	Notes
<b>*BETA-LACTAMASE INHIBITOR - COMBINATIONS**</b>			
XACDURO INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	
<b>*CARBAPENEM COMBINATIONS***</b>			
imipenem-cilastatin intravenous solution reconstituted	Primaxin IV	Non-Preferred	
PRIMAXIN IV INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	
RECARBRIO INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	
VABOMERE INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	
<b>*CARBAPENEMS***</b>			
ertapenem sodium injection solution reconstituted		Non-Preferred	
meropenem intravenous solution reconstituted		Non-Preferred	
meropenem-sodium chloride intravenous solution reconstituted		Non-Preferred	
<b>*CHLORAMPHENICALS***</b>			
chloramphenicol sod succinate intravenous solution reconstituted		Non-Preferred	
<b>*CYCLIC LIPOPEPTIDES***</b>			
daptomycin-sodium chloride intravenous solution		Non-Preferred	
<b>*GLYCOPEPTIDES***</b>			
DALVANCE INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	
FIRVANQ ORAL SOLUTION RECONSTITUTED		Non-Preferred	PA; QL
KIMYRSA INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	
ORBACTIV INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	
VANCOCIN ORAL CAPSULE		Non-Preferred	PA; QL
vancomycin hcl in dextrose intravenous solution		Non-Preferred	QL
vancomycin hcl in nacl intravenous solution		Non-Preferred	QL

Drug Name	Reference	Status	Notes
vancomycin hcl intravenous solution		Non-Preferred	QL
vancomycin hcl intravenous solution reconstituted		Non-Preferred	QL
vancomycin hcl oral capsule	Vancocin	Preferred	PA; QL
vancomycin hcl oral solution reconstituted	Firvanq	Non-Preferred	PA; QL
<b>VIBATIV INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>*LEPROSTATICS***</b>			
dapsone oral tablet		Preferred	
<b>*LINCOSAMIDES***</b>			
<b>CLEOCIN ORAL CAPSULE</b>		Non-Preferred	
<b>CLEOCIN ORAL SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>CLEOCIN PHOSPHATE INJECTION SOLUTION</b>		Non-Preferred	
clindamycin hcl oral capsule	Cleocin	Preferred	
clindamycin palmitate hcl oral solution reconstituted	Cleocin	Preferred	
clindamycin phosphate in d5w intravenous solution		Non-Preferred	
clindamycin phosphate in nacl intravenous solution		Non-Preferred	
clindamycin phosphate injection solution	Cleocin Phosphate	Non-Preferred	
<b>LINCOCIN INJECTION SOLUTION</b>		Non-Preferred	
lincomycin hcl injection solution	Lincocin	Non-Preferred	
<b>*METHENAMINE COMBOS***</b>			
<b>AZO URINARY TRACT DEFENSE ORAL TABLET</b>		Non-Preferred	OTC
<b>CYSTEX URINARY PAIN RELIEF ORAL TABLET</b>		Non-Preferred	OTC
<b>URO-PAIN DUAL ACTION ORAL TABLET</b>		Non-Preferred	OTC
<b>*MONOBACTAMS***</b>			
<b>AZACTAM INJECTION SOLUTION RECONSTITUTED</b>		Non-Preferred	
aztreonam injection solution reconstituted	Azactam	Non-Preferred	

Drug Name	Reference	Status	Notes
<b>CAYSTON INHALATION SOLUTION RECONSTITUTED</b>		Non-Preferred	SP; QL
<b>*OXAZOLIDINONES***</b>			
linezolid in sodium chloride intravenous solution		Non-Preferred	
linezolid intravenous solution	Zyvox	Non-Preferred	
linezolid oral suspension reconstituted	Zyvox	Preferred	PA; QL
linezolid oral tablet	Zyvox	Preferred	PA; QL
<b>SIVEXTRO INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>SIVEXTRO ORAL TABLET</b>		Non-Preferred	PA; QL
<b>ZYVOX INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>ZYVOX ORAL SUSPENSION RECONSTITUTED</b>		Non-Preferred	PA; QL
<b>ZYVOX ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*POLYMYXINS***</b>			
colistimethate sodium (cba) injection solution reconstituted	Coly-Mycin M	Non-Preferred	
<b>COLY-MYCIN M INJECTION SOLUTION RECONSTITUTED</b>		Non-Preferred	
polymyxin b sulfate injection solution reconstituted		Non-Preferred	
<b>*URINARY ANTI-INFECTIVES***</b>			
fosfomycin tromethamine oral packet		Non-Preferred	
<b>HIPREX ORAL TABLET</b>		Non-Preferred	
<b>MACROBID ORAL CAPSULE</b>		Non-Preferred	
<b>MACRODANTIN ORAL CAPSULE</b>		Non-Preferred	
methenamine hippurate oral tablet	Hiprex	Preferred	
nitrofurantoin macrocrystal oral capsule	Macrodantin	Preferred	
nitrofurantoin monohyd macro oral capsule	Macrobid	Preferred	
nitrofurantoin oral suspension		Non-Preferred	
<b>*ANTIMALARIALS*</b>			
<b>*ANTIMALARIAL COMBINATIONS***</b>			
atovaquone-proguanil hcl oral tablet	Malarone	Preferred	
<b>COARTEM ORAL TABLET</b>		Non-Preferred	
<b>MALARONE ORAL TABLET</b>		Non-Preferred	



Drug Name	Reference	Status	Notes
<b>*ANTIMALARIALS***</b>			
<b>ARAKODA ORAL TABLET</b>		Non-Preferred	QL
artesunate intravenous solution reconstituted		Non-Preferred	
chloroquine phosphate oral tablet		Preferred	
<b>DARAPRIM ORAL TABLET</b>		Non-Preferred	PA; QL
hydroxychloroquine sulfate oral tablet	Plaquenil	Preferred	QL
<b>KRINTAFEL ORAL TABLET</b>		Non-Preferred	QL
mefloquine hcl oral tablet		Preferred	QL
<b>PLAQUENIL ORAL TABLET</b>		Non-Preferred	PA; QL
primaquine phosphate oral tablet		Preferred	
pyrimethamine oral tablet	Daraprim	Non-Preferred	PA; QL
<b>QUALAQUIN ORAL CAPSULE</b>		Non-Preferred	PA; QL
quinine sulfate oral capsule	Qualaquin	Non-Preferred	PA; QL
<b>SOVUNA ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*ANTIMYASTHENIC/CHOLINERGIC AGENTS*</b>			
<b>*ANTIMYASTHENIC/CHOLINERGIC AGENTS***</b>			
<b>BLOXIVERZ INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>FIRDAPSE ORAL TABLET</b>		Non-Preferred	PA; QL
<b>MESTINON ORAL SOLUTION</b>		Non-Preferred	
<b>MESTINON ORAL TABLET</b>		Non-Preferred	
<b>MESTINON ORAL TABLET EXTENDED RELEASE</b>		Non-Preferred	
neostigmine methylsulfate intravenous solution	Bloxiverz	Non-Preferred	
pyridostigmine bromide er oral tablet extended release	Mestinon	Preferred	
pyridostigmine bromide oral solution	Mestinon	Preferred	
pyridostigmine bromide oral tablet 30 mg		Non-Preferred	
pyridostigmine bromide oral tablet 60 mg	Mestinon	Preferred	
<b>REGONOL INTRAVENOUS SOLUTION</b>		Non-Preferred	

Drug Name	Reference	Status	Notes
<b>*ANTIMYCOBACTERIAL AGENTS*</b>			
<b>*ANTIMYCOBACTERIAL AGENTS***</b>			
cycloserine oral capsule		Non-Preferred	PA
ethambutol hcl oral tablet		Preferred	
isoniazid injection solution		Non-Preferred	
isoniazid oral syrup		Preferred	
isoniazid oral tablet		Preferred	
pretomanid oral tablet		Non-Preferred	PA
<b>PRIFTIN ORAL TABLET</b>		Preferred	
pyrazinamide oral tablet		Preferred	
rifabutin oral capsule		Preferred	
<b>RIFADIN INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	
rifampin intravenous solution reconstituted	Rifadin	Non-Preferred	
rifampin oral capsule		Preferred	
<b>SIRTURO ORAL TABLET</b>		Non-Preferred	PA
<b>TRECATOR ORAL TABLET</b>		Non-Preferred	
<b>*ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES*</b>			
<b>*ALKYLATING AGENTS***</b>			
<b>BELRAPZO INTRAVENOUS SOLUTION</b>		Non-Preferred	PA; SP
bendamustine hcl intravenous solution	Belrapzo	Non-Preferred	PA; SP
bendamustine hcl intravenous solution reconstituted	Treanda	Non-Preferred	PA; SP
<b>BENDEKA INTRAVENOUS SOLUTION</b>		Non-Preferred	PA; SP
busulfan intravenous solution	Busulfex	Non-Preferred	SP
<b>BUSULFEX INTRAVENOUS SOLUTION</b>		Non-Preferred	SP
cisplatin intravenous solution reconstituted		Non-Preferred	SP
<b>MYLERAN ORAL TABLET</b>		Preferred	
<b>TEPADINA INJECTION SOLUTION RECONSTITUTED</b>		Non-Preferred	SP

Drug Name	Reference	Status	Notes
thiotepa injection solution reconstituted	Tepadina	Non-Preferred	SP
<b>TREANDA INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	PA; SP
vivimusta intravenous solution	Belrapzo	Non-Preferred	PA; SP
<b>ZEPZELCA INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	PA; SP
<b>*ANDROGEN BIOSYNTHESIS INHIBITORS***</b>			
abiraterone acetate oral tablet	Zytiga	Non-Preferred	PA; SP; QL
<b>YONSA ORAL TABLET</b>		Non-Preferred	PA; SP; QL
<b>ZYTIGA ORAL TABLET</b>		Non-Preferred	PA; SP; QL
<b>*ANTIADRENALS***</b>			
<b>LYSODREN ORAL TABLET</b>		Non-Preferred	QL
<b>*ANTIANDROGENS***</b>			
bicalutamide oral tablet	Casodex	Preferred	QL
<b>CASODEX ORAL TABLET</b>		Non-Preferred	QL
<b>ERLEADA ORAL TABLET</b>		Non-Preferred	PA; SP; QL
<b>EULEXIN ORAL CAPSULE</b>		Non-Preferred	
<b>NILANDRON ORAL TABLET</b>		Non-Preferred	QL
nilutamide oral tablet	Nilandron	Non-Preferred	QL
<b>NUBEQA ORAL TABLET</b>		Non-Preferred	PA; SP; QL
<b>XTANDI ORAL TABLET</b>		Non-Preferred	PA; SP; QL
<b>*ANTIESTROGENS***</b>			
<b>FARESTON ORAL TABLET</b>		Non-Preferred	QL
<b>SOLTAMOX ORAL SOLUTION</b>		Non-Preferred	
tamoxifen citrate oral tablet		Preferred	
toremifene citrate oral tablet	Fareston	Non-Preferred	QL
<b>*ANTIMETABOLITES***</b>			
<b>ALIMTA INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	PA; SP
<b>ARRANON INTRAVENOUS SOLUTION</b>		Non-Preferred	SP
azacitidine injection suspension reconstituted	Vidaza	Non-Preferred	PA; SP
capecitabine oral tablet	Xeloda	Non-Preferred	PA; SP
cladribine intravenous solution		Non-Preferred	SP
clofarabine intravenous solution		Non-Preferred	SP

Drug Name	Reference	Status	Notes
floxuridine injection solution reconstituted		Non-Preferred	SP
<b>FOLOTYN INTRAVENOUS SOLUTION</b>		Non-Preferred	SP
<b>JYLAMVO ORAL SOLUTION</b>		Non-Preferred	PA
mercaptopurine oral tablet		Preferred	
methotrexate sodium (pf) injection solution		Preferred	
methotrexate sodium injection solution		Preferred	
methotrexate sodium injection solution reconstituted		Preferred	
methotrexate sodium oral tablet		Preferred	
nelarabine intravenous solution	Arranon	Non-Preferred	SP
<b>ONUREG ORAL TABLET</b>		Non-Preferred	PA; SP; QL
pemetrexed disodium intravenous solution		Non-Preferred	PA; SP
pemetrexed disodium intravenous solution reconstituted	Alimta	Non-Preferred	PA; SP
pemetrexed ditromethamine intravenous solution reconstituted		Non-Preferred	PA; SP
pemetrexed intravenous solution 1 gm/40ml, 100 mg/4ml		Non-Preferred	PA; SP
pemetrexed intravenous solution 500 mg/20ml	Pemfexy	Non-Preferred	PA
<b>PEMFEXY INTRAVENOUS SOLUTION</b>		Non-Preferred	PA
<b>TABLOID ORAL TABLET</b>		Preferred	
<b>TREXALL ORAL TABLET</b>		Non-Preferred	PA
<b>VIDAZA INJECTION SUSPENSION RECONSTITUTED</b>		Non-Preferred	PA; SP
<b>XATMEP ORAL SOLUTION</b>		Non-Preferred	PA
<b>XELODA ORAL TABLET</b>		Non-Preferred	PA; SP
<b>*ANTINEOPLASTIC - AKT INHIBITORS***</b>			
<b>TRUQAP ORAL TABLET</b>		Non-Preferred	PA; QL
<b>TRUQAP ORAL TABLET THERAPY PACK</b>		Non-Preferred	PA; QL
<b>*ANTINEOPLASTIC - ALK INHIBITORS***</b>			
<b>ALECENSA ORAL CAPSULE</b>		Non-Preferred	PA; SP; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
ALUNBRIG ORAL TABLET		Non-Preferred	PA; QL
ALUNBRIG ORAL TABLET THERAPY PACK		Non-Preferred	PA; QL
LORBRENA ORAL TABLET		Non-Preferred	PA; SP; QL
XALKORI ORAL CAPSULE		Non-Preferred	PA; SP; QL
XALKORI ORAL CAPSULE SPRINKLE		Non-Preferred	PA; SP; QL
ZYKADIA ORAL TABLET		Non-Preferred	PA; SP; QL
<b>*ANTINEOPLASTIC - ALLOGENEIC CELLULAR IMMUNOTHERAPY***</b>			
OMISIRGE INTRAVENOUS SUSPENSION		Non-Preferred	
<b>*ANTINEOPLASTIC - ANTIBODY COMBINATIONS***</b>			
OPDUALAG INTRAVENOUS SOLUTION		Non-Preferred	PA; SP
<b>*ANTINEOPLASTIC - ANTI-CCR4 ANTIBODIES***</b>			
POTELIGEO INTRAVENOUS SOLUTION		Non-Preferred	SP
<b>*ANTINEOPLASTIC - ANTI-CD19 ANTIBODIES***</b>			
MONJUVI INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA
<b>*ANTINEOPLASTIC - ANTI-CD19 ANTIBODY-DRUG COMPLEX***</b>			
ZYNLONTA INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA
<b>*ANTINEOPLASTIC - ANTI-CD20 ANTIBODIES***</b>			
ARZERRA INTRAVENOUS CONCENTRATE		Non-Preferred	PA; SP
GAZYVA INTRAVENOUS SOLUTION		Non-Preferred	PA; SP
RIABNI INTRAVENOUS SOLUTION		Non-Preferred	PA; SP
<b>*ANTINEOPLASTIC - ANTI-CD22 ANTIBODY-DRUG COMPLEX***</b>			
BESPONSA INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP

Drug Name	Reference	Status	Notes
<b>*ANTINEOPLASTIC - ANTI-CD30 ANTIBODY-DRUG COMPLEX***</b>			
ADCETRIS INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP
<b>*ANTINEOPLASTIC - ANTI-CD33 ANTIBODY-DRUG COMPLEX***</b>			
MYLOTARG INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP
<b>*ANTINEOPLASTIC - ANTI-CD38 ANTIBODIES***</b>			
DARZALEX INTRAVENOUS SOLUTION		Non-Preferred	PA; SP
SARCLISA INTRAVENOUS SOLUTION		Non-Preferred	PA; SP
<b>*ANTINEOPLASTIC - ANTI-CD79B ANTIBODY-DRUG COMPLEX***</b>			
POLIVY INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP
<b>*ANTINEOPLASTIC - ANTI-CTLA-4 ANTIBODIES***</b>			
IMJUDO INTRAVENOUS SOLUTION		Non-Preferred	PA; SP
<b>*ANTINEOPLASTIC - ANTI-GD2 ANTIBODIES***</b>			
DANYELZA INTRAVENOUS SOLUTION		Non-Preferred	PA
UNITUXIN INTRAVENOUS SOLUTION		Non-Preferred	
<b>*ANTINEOPLASTIC - ANTI-HER2 AGENTS***</b>			
HERCEPTIN INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP
HERZUMA INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP
KANJINTI INTRAVENOUS SOLUTION RECONSTITUTED		Preferred	SP
MARGENZA INTRAVENOUS SOLUTION		Non-Preferred	PA; SP
OGIVRI INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
ONTRUZANT INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP
PERJETA INTRAVENOUS SOLUTION		Non-Preferred	PA; SP
TRAZIMERA INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP
TUKYSA ORAL TABLET		Non-Preferred	PA; QL
<b>*ANTINEOPLASTIC - ANTI-NECTIN-4 ANTIBODY-DRUG COMPLEX***</b>			
PADCEV INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP
<b>*ANTINEOPLASTIC - ANTI-PD-1 ANTIBODIES***</b>			
JEMPERLI INTRAVENOUS SOLUTION		Non-Preferred	PA; SP
ZYNYZ INTRAVENOUS SOLUTION		Non-Preferred	PA; SP; QL
<b>*ANTINEOPLASTIC - ANTI-SLAMF7 ANTIBODIES***</b>			
EMPLICITI INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP
<b>*ANTINEOPLASTIC - ANTI-TF ANTIBODY-DRUG COMPLEX***</b>			
TIVDAK INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP
<b>*ANTINEOPLASTIC - AUTOLOGOUS CELLULAR IMMUNOTHERAPY***</b>			
BREYANZI INTRAVENOUS SUSPENSION		Non-Preferred	
CARVYKTI INTRAVENOUS SUSPENSION		Non-Preferred	
PROVENGE INTRAVENOUS SUSPENSION		Non-Preferred	PA
TECARTUS INTRAVENOUS SUSPENSION		Non-Preferred	
TECELRA INTRAVENOUS SUSPENSION		Non-Preferred	
<b>*ANTINEOPLASTIC - BCL-2 INHIBITORS***</b>			
VENCLEXTA ORAL TABLET		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK		Non-Preferred	PA; QL
<b>*ANTINEOPLASTIC - BCR-ABL KINASE INHIBITORS***</b>			
BOSULIF ORAL CAPSULE		Non-Preferred	PA; SP; QL
GLEEVEC ORAL TABLET		Non-Preferred	PA; SP; QL
ICLUSIG ORAL TABLET		Non-Preferred	PA; QL
imatinib mesylate oral tablet	Gleevec	Preferred	PA; SP; QL
SCEMBLIX ORAL TABLET		Non-Preferred	PA; QL
<b>*ANTINEOPLASTIC - BISPECIFIC T-CELL ENGAGERS***</b>			
BLINCYTO INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP
COLUMVI INTRAVENOUS SOLUTION		Non-Preferred	PA; SP
ELREXFIO SUBCUTANEOUS SOLUTION		Non-Preferred	PA
EPKINLY SUBCUTANEOUS SOLUTION		Non-Preferred	PA
KIMMTRAK INTRAVENOUS SOLUTION		Non-Preferred	PA
LUNSUMIO INTRAVENOUS SOLUTION		Non-Preferred	PA; SP
TALVEY SUBCUTANEOUS SOLUTION		Non-Preferred	PA
TECVAYLI SUBCUTANEOUS SOLUTION		Non-Preferred	PA
<b>*ANTINEOPLASTIC - BRAF KINASE INHIBITORS***</b>			
BRAFTOVI ORAL CAPSULE		Non-Preferred	PA; SP; QL
OJEMDA ORAL SUSPENSION RECONSTITUTED		Non-Preferred	PA; QL
OJEMDA ORAL TABLET		Non-Preferred	PA; QL
TAFINLAR ORAL TABLET SOLUBLE		Non-Preferred	PA; SP; QL
<b>*ANTINEOPLASTIC - BTK INHIBITORS***</b>			
BRUKINSA ORAL CAPSULE		Non-Preferred	PA; QL
CALQUENCE ORAL TABLET		Non-Preferred	PA; QL
IMBRUVICA ORAL SUSPENSION		Non-Preferred	PA; QL



Drug Name	Reference	Status	Notes
JAYPIRCA ORAL TABLET		Non-Preferred	PA; SP; QL
<b>*ANTINEOPLASTIC - EGFR INHIBITORS***</b>			
ERBITUX INTRAVENOUS SOLUTION		Non-Preferred	PA; SP
gefitinib oral tablet	Iressa	Preferred	PA; SP; QL
GILOTRIF ORAL TABLET		Non-Preferred	PA; QL
IRESSA ORAL TABLET		Non-Preferred	PA; SP; QL
LAZCLUZE ORAL TABLET		Non-Preferred	PA; QL
PORTRAZZA INTRAVENOUS SOLUTION		Non-Preferred	SP
TAGRISSO ORAL TABLET		Non-Preferred	PA; SP; QL
VECTIBIX INTRAVENOUS SOLUTION		Non-Preferred	PA; SP
VIZIMPRO ORAL TABLET		Non-Preferred	PA; SP; QL
<b>*ANTINEOPLASTIC - FGFR KINASE INHIBITORS***</b>			
BALVERSA ORAL TABLET		Non-Preferred	PA; SP; QL
LYTGOBI (12 MG DAILY DOSE) ORAL TABLET THERAPY PACK		Non-Preferred	PA; QL
LYTGOBI (16 MG DAILY DOSE) ORAL TABLET THERAPY PACK		Non-Preferred	PA; QL
LYTGOBI (20 MG DAILY DOSE) ORAL TABLET THERAPY PACK		Non-Preferred	PA; QL
PEMAZYRE ORAL TABLET		Non-Preferred	PA; QL
<b>*ANTINEOPLASTIC - GAMMA SECRETASE INHIBITORS***</b>			
OGSIVEO ORAL TABLET		Non-Preferred	PA; QL
<b>*ANTINEOPLASTIC - GENE THERAPY AGENTS***</b>			
ADSTILADRIN INTRAVESICAL SUSPENSION		Non-Preferred	
<b>*ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS***</b>			
DAURISMO ORAL TABLET		Non-Preferred	PA; SP; QL
ERIVEDGE ORAL CAPSULE		Non-Preferred	PA; SP; QL
ODOMZO ORAL CAPSULE		Non-Preferred	PA; SP; QL

Drug Name	Reference	Status	Notes
<b>*ANTINEOPLASTIC - HIF-2-ALPHA INHIBITORS***</b>			
WELIREG ORAL TABLET		Non-Preferred	PA; QL
<b>*ANTINEOPLASTIC - HISTONE DEACETYLASE INHIBITORS***</b>			
ISTODAX INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP
romidepsin intravenous solution reconstituted	Istodax	Non-Preferred	PA; SP
<b>*ANTINEOPLASTIC - HORMONAL AND RELATED AGENT COMBINATIONS***</b>			
AKEEGA ORAL TABLET		Non-Preferred	PA; QL
<b>*ANTINEOPLASTIC - IMMUNOMODULATORS***</b>			
POMALYST ORAL CAPSULE		Non-Preferred	PA; SP; QL
<b>*ANTINEOPLASTIC - KRAS INHIBITORS***</b>			
KRAZATI ORAL TABLET		Non-Preferred	PA; QL
LUMAKRAS ORAL TABLET		Non-Preferred	PA; SP; QL
<b>*ANTINEOPLASTIC - MEK INHIBITORS***</b>			
COTELLIC ORAL TABLET		Non-Preferred	PA; SP; QL
KOSELUGO ORAL CAPSULE		Non-Preferred	PA; QL
MEKINIST ORAL SOLUTION RECONSTITUTED		Non-Preferred	PA; SP; QL
MEKINIST ORAL TABLET		Non-Preferred	PA; SP; QL
MEKTOVI ORAL TABLET		Non-Preferred	PA; SP; QL
<b>*ANTINEOPLASTIC - MET INHIBITORS***</b>			
TABRECTA ORAL TABLET		Non-Preferred	PA; SP; QL
TEPMETKO ORAL TABLET		Non-Preferred	PA; QL
<b>*ANTINEOPLASTIC - METHYLTRANSFERASE INHIBITORS***</b>			
TAZVERIK ORAL TABLET		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
<b>*ANTINEOPLASTIC - MTOR KINASE INHIBITORS***</b>			
<b>AFINITOR DISPERZ ORAL TABLET SOLUBLE</b>		Non-Preferred	PA; SP
everolimus oral tablet soluble	Afinitor Disperz	Non-Preferred	PA; SP
<b>FYARRO INTRAVENOUS SUSPENSION RECONSTITUTED</b>		Non-Preferred	PA
temsirolimus intravenous solution	Torisel	Non-Preferred	PA; SP
<b>TORISEL INTRAVENOUS SOLUTION</b>		Non-Preferred	PA; SP
<b>*ANTINEOPLASTIC - MULTIKINASE INHIBITORS***</b>			
<b>FOTIVDA ORAL CAPSULE</b>		Non-Preferred	PA; QL
lapatinib ditosylate oral tablet	Tykerb	Non-Preferred	PA; SP; QL
<b>NERLYNX ORAL TABLET</b>		Non-Preferred	PA; SP; QL
<b>QINLOCK ORAL TABLET</b>		Non-Preferred	PA; QL
<b>RYDAPT ORAL CAPSULE</b>		Non-Preferred	PA; SP; QL
<b>STIVARGA ORAL TABLET</b>		Non-Preferred	PA; SP; QL
<b>TURALIO ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>TYKERB ORAL TABLET</b>		Non-Preferred	PA; SP; QL
<b>VANFLYTA ORAL TABLET</b>		Non-Preferred	PA; QL
<b>XOSPATA ORAL TABLET</b>		Non-Preferred	PA; SP; QL
<b>*ANTINEOPLASTIC - MULTIPLE RECEPTOR ANTIBODIES***</b>			
<b>RYBREVANT INTRAVENOUS SOLUTION</b>		Non-Preferred	PA; SP
<b>*ANTINEOPLASTIC - PDGFR-ALPHA INHIBITORS***</b>			
<b>AYVAKIT ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*ANTINEOPLASTIC - PROTEASOME INHIBITORS***</b>			
bortezomib injection solution reconstituted	Velcade	Non-Preferred	PA; SP
<b>KYPROLIS INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	PA; SP
<b>NINLARO ORAL CAPSULE</b>		Non-Preferred	PA; SP; QL
<b>VELCADE INJECTION SOLUTION RECONSTITUTED</b>		Non-Preferred	PA; SP

Drug Name	Reference	Status	Notes
<b>*ANTINEOPLASTIC - RET INHIBITORS***</b>			
GAVRETO ORAL CAPSULE		Non-Preferred	PA; QL
RETEVMO ORAL CAPSULE		Non-Preferred	PA; SP; QL
RETEVMO ORAL TABLET		Non-Preferred	PA; SP; QL
<b>*ANTINEOPLASTIC - TROPOMYOSIN RECEPTOR KINASE INHIBITORS***</b>			
AUGTYRO ORAL CAPSULE		Non-Preferred	PA; SP; QL
ROZLYTREK ORAL CAPSULE		Non-Preferred	PA; SP; QL
ROZLYTREK ORAL PACKET		Non-Preferred	PA; SP; QL
VITRAKVI ORAL CAPSULE		Non-Preferred	PA; SP; QL
VITRAKVI ORAL SOLUTION		Non-Preferred	PA; SP; QL
<b>*ANTINEOPLASTIC - XPO1 INHIBITORS***</b>			
XPOVIO (100 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK		Non-Preferred	PA; QL
XPOVIO (40 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK		Non-Preferred	PA; QL
XPOVIO (40 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK		Non-Preferred	PA; QL
XPOVIO (60 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK		Non-Preferred	PA; QL
XPOVIO (60 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK		Non-Preferred	PA; QL
XPOVIO (80 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK		Non-Preferred	PA; QL
XPOVIO (80 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK		Non-Preferred	PA; QL
<b>*ANTINEOPLASTIC ANTIBIOTICS***</b>			
dactinomycin intravenous solution reconstituted		Non-Preferred	SP
daunorubicin hcl intravenous solution		Non-Preferred	SP
<b>DOXIL INTRAVENOUS SUSPENSION</b>		Non-Preferred	PA; SP
doxorubicin hcl liposomal intravenous suspension	Doxil	Non-Preferred	PA; SP
<b>ELLENCE INTRAVENOUS SOLUTION</b>		Preferred	PA; SP

Drug Name	Reference	Status	Notes
<b>IDAMYCIN PFS INTRAVENOUS SOLUTION</b>		Non-Preferred	SP
idarubicin hcl intravenous solution	Idamycin PFS	Non-Preferred	SP
<b>JELMYTO SOLUTION RECONSTITUTED</b>		Non-Preferred	PA
mitomycin intravesical solution prefilled syringe		Non-Preferred	
mitoxantrone hcl intravenous concentrate		Preferred	SP
<b>*ANTINEOPLASTIC -ANTIBODY FOR RADIOPHARMACEUTICAL THERAPY***</b>			
<b>ZEVALIN Y-90 INTRAVENOUS KIT</b>		Non-Preferred	PA
<b>*ANTINEOPLASTIC ANTIBODY-DRUG COMPLEXES***</b>			
<b>ELAHERE INTRAVENOUS SOLUTION</b>		Non-Preferred	PA
<b>ENHERTU INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	PA; SP
<b>KADCYLA INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	PA; SP
<b>*ANTINEOPLASTIC COMBINATIONS***</b>			
<b>DARZALEX FASPRO SUBCUTANEOUS SOLUTION</b>		Non-Preferred	PA; SP
<b>HERCEPTIN HYLECTA SUBCUTANEOUS SOLUTION</b>		Non-Preferred	PA; SP
<b>INQOVI ORAL TABLET</b>		Non-Preferred	PA; SP; QL
<b>LONSURF ORAL TABLET</b>		Non-Preferred	PA; SP
<b>PHESGO SUBCUTANEOUS SOLUTION</b>		Non-Preferred	PA; SP; QL
<b>RITUXAN HYCELA SUBCUTANEOUS SOLUTION</b>		Non-Preferred	SP
<b>VYXEOS INTRAVENOUS SUSPENSION RECONSTITUTED</b>		Non-Preferred	SP
<b>*ANTINEOPLASTIC ENZYMES***</b>			
<b>ASPARLAS INTRAVENOUS SOLUTION</b>		Non-Preferred	PA
<b>ONCASPAR INJECTION SOLUTION</b>		Non-Preferred	PA
<b>RYLAZE INTRAMUSCULAR SOLUTION</b>		Non-Preferred	PA; SP

Drug Name	Reference	Status	Notes
<b>*ANTINEOPLASTIC RADIOPHARMACEUTICALS***</b>			
LUTATHERA INTRAVENOUS SOLUTION		Non-Preferred	PA
PLUVICTO INTRAVENOUS SOLUTION		Non-Preferred	PA
strontium chloride sr-89 intravenous solution		Non-Preferred	
XOFIGO INTRAVENOUS SOLUTION		Non-Preferred	PA
<b>*ANTINEOPLASTICS - INTERLEUKINS &amp; AGONISTS***</b>			
ANKTIVA INTRAVESICAL SOLUTION		Non-Preferred	PA; SP
ELZONRIS INTRAVENOUS SOLUTION		Non-Preferred	PA
PROLEUKIN INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP
<b>*ANTINEOPLASTICS - PHOTOACTIVATED AGENTS***</b>			
PHOTOFRIN INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	
UVADEX EXTRACORPOREAL SOLUTION		Non-Preferred	
<b>*ANTINEOPLASTICS MISC.***</b>			
ACTIMMUNE SUBCUTANEOUS SOLUTION		Non-Preferred	PA; SP
arsenic trioxide intravenous solution	Trisenox	Non-Preferred	SP
BESREMI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE		Non-Preferred	PA; QL
HYDREA ORAL CAPSULE		Non-Preferred	
hydroxyurea oral capsule	Hydrea	Preferred	
MATULANE ORAL CAPSULE		Non-Preferred	
NIPENT INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	SP
TICE BCG INTRAVESICAL SUSPENSION RECONSTITUTED		Non-Preferred	SP
TRISENOX INTRAVENOUS SOLUTION		Non-Preferred	SP
<b>*AROMATASE INHIBITORS***</b>			
anastrozole oral tablet	Arimidex	Preferred	QL

Drug Name	Reference	Status	Notes
ARIMIDEX ORAL TABLET		Non-Preferred	QL
AROMASIN ORAL TABLET		Non-Preferred	QL
exemestane oral tablet	Aromasin	Preferred	QL
FEMARA ORAL TABLET		Non-Preferred	QL
letrozole oral tablet	Femara	Preferred	QL
<b>*CARBOXYPEPTIDASE ENZYME AGENTS***</b>			
VORAXAZE INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	
<b>*CARDIAC PROTECTIVE AGENTS***</b>			
dexrazoxane hcl intravenous solution reconstituted		Non-Preferred	SP
dexrazoxane intravenous solution reconstituted		Non-Preferred	SP
<b>*CHEMOTHERAPY ADJUNCTS - HYPERURICEMIA AGENTS***</b>			
ELITEK INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP
<b>*CHEMOTHERAPY ADJUNCTS - KERATINOCYTE GROWTH FACTORS***</b>			
KEPIVANCE INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	SP
<b>*CYCLIN-DEPENDENT KINASES (CDK) INHIBITORS***</b>			
IBRANCE ORAL CAPSULE		Non-Preferred	PA; SP; QL
IBRANCE ORAL TABLET		Non-Preferred	PA; SP; QL
KISQALI (200 MG DOSE) ORAL TABLET THERAPY PACK		Non-Preferred	PA; SP; QL
KISQALI (400 MG DOSE) ORAL TABLET THERAPY PACK		Non-Preferred	PA; SP; QL
KISQALI (600 MG DOSE) ORAL TABLET THERAPY PACK		Non-Preferred	PA; SP; QL
VERZENIO ORAL TABLET		Non-Preferred	PA; SP; QL
<b>*ESTROGEN RECEPTOR ANTAGONIST***</b>			
FASLODEX INTRAMUSCULAR SOLUTION PREFILLED SYRINGE		Non-Preferred	PA; SP

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
fulvestrant intramuscular solution prefilled syringe	Faslodex	Non-Preferred	PA; SP
<b>*FOLIC ACID ANTAGONISTS RESCUE AGENTS***</b>			
<b>KHAPZORY INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	PA; SP
leucovorin calcium injection solution		Non-Preferred	
leucovorin calcium injection solution reconstituted		Preferred	
leucovorin calcium oral tablet		Preferred	
levoleucovorin calcium intravenous solution reconstituted		Non-Preferred	PA
levoleucovorin calcium pf intravenous solution		Non-Preferred	PA
<b>*GONADOTROPIN RELEASING HORMONE (GNRH) ANTAGONISTS***</b>			
<b>FIRMAGON (240 MG DOSE) SUBCUTANEOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	PA; SP; QL
<b>FIRMAGON SUBCUTANEOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	PA; SP; QL
<b>ORGOVYX ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*IMIDAZOTETRAZINES***</b>			
<b>TEMODAR INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	PA; SP
<b>*ISOCITRATE DEHYDROGENASE 1 &amp; 2 (IDH1 &amp; IDH2) INHIBITORS***</b>			
<b>VORANIGO ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*ISOCITRATE DEHYDROGENASE-1 (IDH1) INHIBITORS***</b>			
<b>REZLIDHIA ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>TIBSOVO ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*ISOCITRATE DEHYDROGENASE-2 (IDH2) INHIBITORS***</b>			
<b>IDHIFA ORAL TABLET</b>		Non-Preferred	PA; SP; QL



Drug Name	Reference	Status	Notes
<b>*JANUS ASSOCIATED KINASE (JAK) INHIBITORS***</b>			
INREBIC ORAL CAPSULE		Non-Preferred	PA; SP; QL
OJJAARA ORAL TABLET		Non-Preferred	PA; QL
VONJO ORAL CAPSULE		Non-Preferred	PA; QL
<b>*LHRH ANALOGS***</b>			
CAMCEVI SUBCUTANEOUS PREFILLED SYRINGE		Non-Preferred	PA; QL
leuprolide acetate (3 month) intramuscular injectable		Non-Preferred	PA; SP; QL
leuprolide acetate injection kit		Non-Preferred	PA; SP
ZOLADEX SUBCUTANEOUS IMPLANT		Non-Preferred	PA; SP; QL
<b>*MITOTIC INHIBITORS***</b>			
ABRAXANE INTRAVENOUS SUSPENSION RECONSTITUTED		Non-Preferred	PA; SP
docetaxel intravenous concentrate		Non-Preferred	PA; SP
docetaxel intravenous solution	Docivyx	Non-Preferred	PA; SP
DOCIVYX INTRAVENOUS SOLUTION		Non-Preferred	PA; SP
eribulin mesylate intravenous solution	Halaven	Non-Preferred	PA; SP
ETOPOPHOS INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	SP
etoposide oral capsule		Preferred	SP
HALAVEN INTRAVENOUS SOLUTION		Non-Preferred	PA; SP
IXEMPRA KIT INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP
paclitaxel protein-bound part intravenous suspension reconstituted	Abraxane	Non-Preferred	PA; SP
vinorelbine tartrate intravenous solution		Non-Preferred	SP
<b>*MYELOPROTECTIVE AGENTS***</b>			
COSELA INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA

Drug Name	Reference	Status	Notes
<b>*NITROGEN MUSTARDS AND RELATED ANALOGUES***</b>			
cyclophosphamide intravenous solution 1 gm/2ml, 1 gm/5ml, 1000 mg/10ml, 2 gm/4ml, 2000 mg/20ml, 500 mg/2.5ml, 500 mg/5ml		Non-Preferred	SP
cyclophosphamide intravenous solution 2 gm/10ml, 500 mg/ml		Non-Preferred	
cyclophosphamide oral capsule		Preferred	SP
cyclophosphamide oral tablet		Non-Preferred	
<b>EVOMELA INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	SP
<b>IFEX INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	SP
ifosfamide intravenous solution		Non-Preferred	SP
ifosfamide intravenous solution reconstituted	Ifex	Non-Preferred	SP
<b>LEUKERAN ORAL TABLET</b>		Preferred	
melphalan hcl intravenous solution reconstituted		Non-Preferred	SP
<b>*NITROSOUREAS***</b>			
carmustine intravenous solution reconstituted		Non-Preferred	SP
<b>GLEOSTINE ORAL CAPSULE</b>		Non-Preferred	PA; SP
<b>GLIADEL WAFER IMPLANT WAFER</b>		Non-Preferred	
<b>ZANOSAR INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	SP
<b>*ONCOLYTIC VIRAL AGENTS - HSV1***</b>			
<b>IMLYGIC INTRALESIONAL SUSPENSION</b>		Non-Preferred	
<b>*ORNITHINE DECARBOXYLASE (ODC) INHIBITORS***</b>			
<b>IWILFIN ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*OTOPROTECTIVE AGENTS***</b>			
<b>PEDMARK INTRAVENOUS SOLUTION</b>		Non-Preferred	PA

Drug Name	Reference	Status	Notes
<b>*PHOSPHATIDYLINOSITOL 3-KINASE (PI3K) INHIBITORS***</b>			
ALIQOPA INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA
COPIKTRA ORAL CAPSULE		Non-Preferred	PA; SP; QL
PIQRAY (200 MG DAILY DOSE) ORAL TABLET THERAPY PACK		Non-Preferred	PA; SP; QL
PIQRAY (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK		Non-Preferred	PA; SP; QL
PIQRAY (300 MG DAILY DOSE) ORAL TABLET THERAPY PACK		Non-Preferred	PA; SP; QL
ZYDELIG ORAL TABLET		Non-Preferred	PA; SP; QL
<b>*POLY (ADP-RIBOSE) POLYMERASE (PARP) INHIBITORS***</b>			
RUBRACA ORAL TABLET		Non-Preferred	PA; SP; QL
TALZENNA ORAL CAPSULE		Non-Preferred	PA; SP; QL
ZEJULA ORAL TABLET		Non-Preferred	PA; SP; QL
<b>*PROGESTINS-ANTINEOPLASTIC***</b>			
megestrol acetate oral suspension		Preferred	PA
megestrol acetate oral tablet		Preferred	PA
<b>*RETINOIDS***</b>			
tretinoin oral capsule		Preferred	
<b>*SELECTIVE ESTROGEN RECEPTOR DEGRADERS***</b>			
ORSERDU ORAL TABLET		Non-Preferred	PA; QL
<b>*TETRAHYDROISOQUINOLINES**</b>			
YONDELIS INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	SP
<b>*TOPOISOMERASE I INHIBITORS - ANTIBODY-DRUG COMPLEX***</b>			
TRODELVY INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA
<b>*TOPOISOMERASE I INHIBITORS***</b>			
HYCAMTIN ORAL CAPSULE		Non-Preferred	PA; SP
ONIVYDE INTRAVENOUS INJECTABLE		Non-Preferred	SP

Drug Name	Reference	Status	Notes
<b>*URINARY TRACT PROTECTIVE AGENTS***</b>			
mesna intravenous solution	Mesnex	Non-Preferred	PA
<b>MESNEX INTRAVENOUS SOLUTION</b>		Non-Preferred	PA
<b>MESNEX ORAL TABLET</b>		Preferred	PA
<b>*VASCULAR ENDOTHELIAL GROWTH FACTOR (VEGF) INHIBITORS***</b>			
<b>ALYMSYS INTRAVENOUS SOLUTION</b>		Non-Preferred	PA; SP
<b>AVASTIN INTRAVENOUS SOLUTION</b>		Non-Preferred	PA; SP
<b>CYRAMZA INTRAVENOUS SOLUTION</b>		Non-Preferred	PA; SP
<b>FRUZAQLA ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>VEGZELMA INTRAVENOUS SOLUTION</b>		Non-Preferred	PA; SP
<b>ZALTRAP INTRAVENOUS SOLUTION</b>		Non-Preferred	PA; SP
<b>*ANTIPARKINSON AND RELATED THERAPY AGENTS*</b>			
<b>*ADENOSINE RECEPTOR ANTAGONIST***</b>			
<b>NOURIANZ ORAL TABLET</b>		Non-Preferred	PA; SP; QL
<b>*ANTIPARKINSON ANTICHOLINERGICS***</b>			
benztropine mesylate injection solution		Non-Preferred	
benztropine mesylate oral tablet		Preferred	
trihexyphenidyl hcl oral solution		Preferred	
trihexyphenidyl hcl oral tablet		Preferred	
<b>*ANTIPARKINSON DOPAMINERGICS***</b>			
amantadine hcl oral capsule		Preferred	QL
amantadine hcl oral solution		Preferred	QL
amantadine hcl oral tablet		Preferred	QL
bromocriptine mesylate oral capsule	Parlodel	Preferred	
bromocriptine mesylate oral tablet	Parlodel	Preferred	

Drug Name	Reference	Status	Notes
<b>GOCOVRI ORAL CAPSULE EXTENDED RELEASE 24 HOUR 137 MG</b>		Non-Preferred	PA; QL
<b>GOCOVRI ORAL CAPSULE EXTENDED RELEASE 24 HOUR 68.5 MG</b>		Non-Preferred	PA; DO; QL
<b>INBRIJA INHALATION CAPSULE</b>		Non-Preferred	PA; QL
<b>OSMOLEX ER ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; DO; QL
<b>PARLODEL ORAL CAPSULE</b>		Non-Preferred	
<b>PARLODEL ORAL TABLET</b>		Non-Preferred	
<b>*ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS***</b>			
<b>AZILECT ORAL TABLET</b>		Non-Preferred	PA; QL
rasagiline mesylate oral tablet	Azilect	Non-Preferred	PA; QL
selegiline hcl oral capsule		Preferred	
selegiline hcl oral tablet		Preferred	
<b>XADAGO ORAL TABLET</b>		Non-Preferred	PA; QL
<b>ZELAPAR ORAL TABLET DISPERSIBLE</b>		Non-Preferred	PA; QL
<b>*CENTRAL/PERIPHERAL COMT INHIBITORS***</b>			
<b>TASMAR ORAL TABLET</b>		Non-Preferred	PA; QL
tolcapone oral tablet	Tasmar	Non-Preferred	PA; QL
<b>*DECARBOXYLASE INHIBITORS***</b>			
carbidopa oral tablet	Lodosyn	Non-Preferred	
<b>LODOSYN ORAL TABLET</b>		Non-Preferred	
<b>*LEVODOPA COMBINATIONS***</b>			
carbidopa-levodopa er oral tablet extended release		Preferred	
carbidopa-levodopa oral tablet	Dhivy	Preferred	
carbidopa-levodopa oral tablet dispersible		Preferred	
carbidopa-levodopa-entacapone oral tablet		Preferred	
<b>CREXONT ORAL CAPSULE EXTENDED RELEASE</b>		Non-Preferred	PA; QL
<b>DHIVY ORAL TABLET</b>		Non-Preferred	PA
<b>DUOPA ENTERAL SUSPENSION</b>		Non-Preferred	PA; SP

Drug Name	Reference	Status	Notes
<b>RYTARY ORAL CAPSULE EXTENDED RELEASE</b>		Non-Preferred	PA; QL
<b>SINEMET ORAL TABLET 10-100 MG</b>		Non-Preferred	
<b>SINEMET ORAL TABLET 25-100 MG</b>		Non-Preferred	PA
<b>*NONERGOLINE DOPAMINE RECEPTOR AGONISTS***</b>			
<b>APOKYN SUBCUTANEOUS SOLUTION CARTRIDGE</b>		Non-Preferred	PA; SP; QL
apomorphine hcl subcutaneous solution cartridge	Apokyn	Non-Preferred	PA; SP; QL
<b>MIRAPEX ER ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; QL
<b>NEUPRO TRANSDERMAL PATCH 24 HOUR</b>		Non-Preferred	PA; QL
pramipexole dihydrochloride er oral tablet extended release 24 hour	Mirapex ER	Non-Preferred	PA; QL
pramipexole dihydrochloride oral tablet		Preferred	QL
ropinirole hcl er oral tablet extended release 24 hour		Non-Preferred	PA
ropinirole hcl oral tablet		Preferred	
<b>*PERIPHERAL COMT INHIBITORS***</b>			
entacapone oral tablet		Preferred	QL
<b>ONGENTYS ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>*ANTIPSYCHOTICS/ANTIMANIC AGENTS*</b>			
<b>*ANTIMANIC AGENTS***</b>			
lithium carbonate er oral tablet extended release	Lithobid	Preferred	QL
lithium carbonate oral capsule 150 mg, 300 mg		Preferred	DO; QL
lithium carbonate oral capsule 600 mg		Preferred	QL
lithium carbonate oral tablet		Preferred	DO; QL
lithium oral solution		Non-Preferred	
<b>LITHOBID ORAL TABLET EXTENDED RELEASE</b>		Non-Preferred	QL
<b>*ANTIPSYCHOTICS - MISC.***</b>			
<b>CAPLYTA ORAL CAPSULE 10.5 MG, 21 MG</b>		Non-Preferred	PA; DO; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>CAPLYTA ORAL CAPSULE 42 MG</b>		Non-Preferred	PA; QL
<b>EQUETRO ORAL CAPSULE EXTENDED RELEASE 12 HOUR</b>		Non-Preferred	PA; QL
<b>GEODON INTRAMUSCULAR SOLUTION RECONSTITUTED</b>		Non-Preferred	PA; AL; QL
<b>GEODON ORAL CAPSULE 20 MG, 40 MG</b>		Non-Preferred	PA; DO; AL; QL
<b>GEODON ORAL CAPSULE 60 MG, 80 MG</b>		Non-Preferred	PA; AL; QL
<b>LATUDA ORAL TABLET 120 MG, 80 MG</b>		Non-Preferred	PA; QL
<b>LATUDA ORAL TABLET 20 MG, 40 MG, 60 MG</b>		Non-Preferred	PA; DO; QL
lurasidone hcl oral tablet 120 mg, 80 mg	Latuda	Preferred	QL
lurasidone hcl oral tablet 20 mg, 40 mg, 60 mg	Latuda	Preferred	DO; QL
<b>NUPLAZID ORAL CAPSULE</b>		Non-Preferred	PA; SP; QL
<b>NUPLAZID ORAL TABLET</b>		Non-Preferred	PA; SP; QL
<b>VRAYLAR ORAL CAPSULE 1.5 MG, 3 MG</b>		Non-Preferred	PA; DO; QL
<b>VRAYLAR ORAL CAPSULE 4.5 MG, 6 MG</b>		Non-Preferred	PA; QL
ziprasidone hcl oral capsule 20 mg, 40 mg	Geodon	Preferred	DO; AL; QL
ziprasidone hcl oral capsule 60 mg, 80 mg	Geodon	Preferred	AL; QL
ziprasidone mesylate intramuscular solution reconstituted	Geodon	Non-Preferred	PA; AL; QL
<b>*BENZISOXAZOLES***</b>			
<b>FANAPT ORAL TABLET 1 MG, 2 MG, 4 MG, 6 MG</b>		Non-Preferred	PA; DO; QL
<b>FANAPT ORAL TABLET 10 MG, 12 MG, 8 MG</b>		Non-Preferred	PA; QL
<b>FANAPT TITRATION PACK ORAL TABLET</b>		Non-Preferred	PA; QL
<b>INVEGA HAFYERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE</b>		Non-Preferred	PA; QL
<b>INVEGA ORAL TABLET EXTENDED RELEASE 24 HOUR 3 MG</b>		Non-Preferred	PA; DO; AL; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>INVEGA ORAL TABLET EXTENDED RELEASE 24 HOUR 6 MG, 9 MG</b>		Non-Preferred	PA; AL; QL
<b>INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE</b>		Preferred	PA; AL; QL
<b>INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE</b>		Preferred	PA; AL; QL
paliperidone er oral tablet extended release 24 hour 1.5 mg		Preferred	DO; AL; QL
paliperidone er oral tablet extended release 24 hour 3 mg	Invega	Preferred	DO; AL; QL
paliperidone er oral tablet extended release 24 hour 6 mg, 9 mg	Invega	Preferred	AL; QL
<b>PERSERIS SUBCUTANEOUS PREFILLED SYRINGE</b>		Non-Preferred	PA; QL
<b>RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER</b>		Non-Preferred	PA; AL; QL
<b>RISPERDAL ORAL SOLUTION</b>		Non-Preferred	PA; AL; QL
<b>RISPERDAL ORAL TABLET 0.5 MG, 1 MG, 2 MG</b>		Non-Preferred	PA; DO; AL; QL
<b>RISPERDAL ORAL TABLET 3 MG, 4 MG</b>		Non-Preferred	PA; AL; QL
risperidone microspheres er intramuscular suspension reconstituted er	RisperDAL Consta	Preferred	PA; AL; QL
risperidone oral solution	RisperDAL	Preferred	AL; QL
risperidone oral tablet 0.25 mg		Preferred	DO; AL; QL
risperidone oral tablet 0.5 mg, 1 mg, 2 mg	RisperDAL	Preferred	DO; AL; QL
risperidone oral tablet 3 mg, 4 mg	RisperDAL	Preferred	AL; QL
risperidone oral tablet dispersible 0.25 mg, 0.5 mg, 1 mg, 2 mg		Non-Preferred	PA; DO; QL
risperidone oral tablet dispersible 3 mg, 4 mg		Non-Preferred	PA; QL
<b>RYKINDO INTRAMUSCULAR SUSPENSION RECONSTITUTED ER</b>		Non-Preferred	PA; QL
<b>UZEDY SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE</b>		Non-Preferred	PA; QL



Drug Name	Reference	Status	Notes
<b>*BUTYROPHENONES***</b>			
<b>HALDOL DECANOATE INTRAMUSCULAR SOLUTION</b>		Non-Preferred	QL
haloperidol decanoate intramuscular solution	Haldol Decanoate	Preferred	QL
haloperidol lactate injection solution		Preferred	
haloperidol lactate oral concentrate		Preferred	AL; QL
haloperidol oral tablet 0.5 mg, 1 mg, 2 mg		Preferred	DO; AL; QL
haloperidol oral tablet 10 mg, 20 mg, 5 mg		Preferred	AL; QL
<b>*DIBENZODIAZEPINES***</b>			
clozapine oral tablet 100 mg, 25 mg	Clozaril	Preferred	DO; AL; QL
clozapine oral tablet 200 mg		Preferred	AL; QL
clozapine oral tablet 50 mg		Preferred	DO; AL; QL
clozapine oral tablet dispersible 100 mg, 150 mg, 200 mg		Non-Preferred	PA; QL
clozapine oral tablet dispersible 12.5 mg, 25 mg		Non-Preferred	PA; DO; QL
<b>CLOZARIL ORAL TABLET</b>		Non-Preferred	PA; DO; AL; QL
<b>VERSACLOZ ORAL SUSPENSION</b>		Non-Preferred	PA; QL
<b>*DIBENZO-OXEPINO PYRROLES***</b>			
asenapine maleate sublingual tablet sublingual 10 mg	Saphris	Preferred	QL
asenapine maleate sublingual tablet sublingual 2.5 mg, 5 mg	Saphris	Preferred	DO; QL
<b>SAPHRIS SUBLINGUAL TABLET SUBLINGUAL 10 MG</b>		Non-Preferred	PA; QL
<b>SAPHRIS SUBLINGUAL TABLET SUBLINGUAL 2.5 MG, 5 MG</b>		Non-Preferred	PA; DO; QL
<b>SECUADO TRANSDERMAL PATCH 24 HOUR</b>		Non-Preferred	PA; QL
<b>*DIBENZOTHIAZEPINES***</b>			
quetiapine fumarate er oral tablet extended release 24 hour 150 mg, 200 mg	SEROquel XR	Preferred	DO; AL; QL
quetiapine fumarate er oral tablet extended release 24 hour 300 mg, 400 mg, 50 mg	SEROquel XR	Preferred	AL; QL

Drug Name	Reference	Status	Notes
quetiapine fumarate oral tablet 100 mg, 200 mg, 25 mg, 50 mg	SEROquel	Preferred	DO; AL; QL
quetiapine fumarate oral tablet 150 mg		Preferred	DO; AL; QL
quetiapine fumarate oral tablet 300 mg, 400 mg	SEROquel	Preferred	AL; QL
<b>SEROQUEL ORAL TABLET 100 MG, 200 MG, 25 MG, 50 MG</b>		Non-Preferred	PA; DO; AL; QL
<b>SEROQUEL ORAL TABLET 300 MG, 400 MG</b>		Non-Preferred	PA; AL; QL
<b>SEROQUEL XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG, 200 MG</b>		Non-Preferred	PA; DO; AL; QL
<b>SEROQUEL XR ORAL TABLET EXTENDED RELEASE 24 HOUR 300 MG, 400 MG, 50 MG</b>		Non-Preferred	PA; AL; QL
<b>*DIBENZOXAZEPINES***</b>			
<b>ADASUVE INHALATION AEROSOL POWDER BREATH ACTIVATED</b>		Non-Preferred	PA
loxapine succinate oral capsule 10 mg, 25 mg, 5 mg		Preferred	DO; AL; QL
loxapine succinate oral capsule 50 mg		Preferred	AL; QL
<b>*DIHYDROINDOLONES***</b>			
molindone hcl oral tablet 10 mg, 5 mg		Non-Preferred	DO; AL; QL
molindone hcl oral tablet 25 mg		Non-Preferred	AL; QL
<b>*MUSCARINIC AGENT - COMBINATIONS***</b>			
<b>COBENFY ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>COBENFY STARTER PACK ORAL CAPSULE THERAPY PACK</b>		Non-Preferred	PA; QL
<b>*PHENOTHIAZINES***</b>			
chlorpromazine hcl injection solution		Non-Preferred	AL
chlorpromazine hcl oral concentrate		Non-Preferred	PA
chlorpromazine hcl oral tablet 10 mg, 25 mg, 50 mg		Preferred	DO; AL; QL
chlorpromazine hcl oral tablet 100 mg, 200 mg		Preferred	AL; QL
<b>COMPRO RECTAL SUPPOSITORY</b>		Preferred	AL
fluphenazine decanoate injection solution		Preferred	AL
fluphenazine hcl injection solution		Preferred	AL

Drug Name	Reference	Status	Notes
fluphenazine hcl oral concentrate		Preferred	AL; QL
fluphenazine hcl oral elixir		Preferred	AL; QL
fluphenazine hcl oral tablet 1 mg, 2.5 mg, 5 mg		Preferred	DO; AL; QL
fluphenazine hcl oral tablet 10 mg		Preferred	AL; QL
perphenazine oral tablet 16 mg, 4 mg, 8 mg		Preferred	AL; QL
perphenazine oral tablet 2 mg		Preferred	DO; AL; QL
prochlorperazine edisylate injection solution		Preferred	AL
prochlorperazine maleate oral tablet		Preferred	AL
prochlorperazine rectal suppository	Compro	Preferred	AL
thioridazine hcl oral tablet 10 mg, 25 mg, 50 mg		Preferred	DO; AL; QL
thioridazine hcl oral tablet 100 mg		Preferred	AL; QL
trifluoperazine hcl oral tablet 1 mg, 2 mg		Preferred	DO; AL; QL
trifluoperazine hcl oral tablet 10 mg, 5 mg		Preferred	AL; QL
<b>*QUINOLINONE DERIVATIVES***</b>			
<b>ABILIFY ASIMTUFII INTRAMUSCULAR PREFILLED SYRINGE</b>		Non-Preferred	PA; QL
<b>ABILIFY MAINTENA INTRAMUSCULAR PREFILLED SYRINGE</b>		Preferred	PA; AL; QL
<b>ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER</b>		Preferred	PA; AL; QL
<b>ABILIFY MYCITE MAINTENANCE KIT ORAL TABLET THERAPY PACK 10 MG, 15 MG, 2 MG, 5 MG</b>		Non-Preferred	PA; DO; QL
<b>ABILIFY MYCITE MAINTENANCE KIT ORAL TABLET THERAPY PACK 20 MG, 30 MG</b>		Non-Preferred	PA; QL
<b>ABILIFY MYCITE STARTER KIT ORAL TABLET THERAPY PACK</b>		Non-Preferred	PA; QL
<b>ABILIFY ORAL TABLET 10 MG, 15 MG, 2 MG, 5 MG</b>		Non-Preferred	PA; DO; AL; QL
<b>ABILIFY ORAL TABLET 20 MG, 30 MG</b>		Non-Preferred	PA; AL; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
aripiprazole oral solution		Preferred	AL; QL
aripiprazole oral tablet 10 mg, 15 mg, 2 mg, 5 mg	Abilify	Preferred	DO; AL; QL
aripiprazole oral tablet 20 mg, 30 mg	Abilify	Preferred	AL; QL
aripiprazole oral tablet dispersible		Non-Preferred	PA; QL
<b>ARISTADA INITIO INTRAMUSCULAR PREFILLED SYRINGE</b>		Non-Preferred	PA; AL; QL
<b>ARISTADA INTRAMUSCULAR PREFILLED SYRINGE</b>		Preferred	PA; AL; QL
<b>REXULTI ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG</b>		Non-Preferred	PA; DO; QL
<b>REXULTI ORAL TABLET 3 MG, 4 MG</b>		Non-Preferred	PA; QL
<b>*THIENBENZODIAZEPINES***</b>			
olanzapine intramuscular solution reconstituted	ZyPREXA	Preferred	AL; QL
olanzapine oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	ZyPREXA	Preferred	DO; AL; QL
olanzapine oral tablet 15 mg, 20 mg	ZyPREXA	Preferred	AL; QL
olanzapine oral tablet dispersible 10 mg, 5 mg	ZyPREXA Zydis	Non-Preferred	PA; DO; QL
olanzapine oral tablet dispersible 15 mg, 20 mg	ZyPREXA Zydis	Non-Preferred	PA; QL
<b>ZYPREXA INTRAMUSCULAR SOLUTION RECONSTITUTED</b>		Non-Preferred	AL; QL
<b>ZYPREXA ORAL TABLET 10 MG, 2.5 MG, 5 MG, 7.5 MG</b>		Non-Preferred	PA; DO; AL; QL
<b>ZYPREXA ORAL TABLET 15 MG, 20 MG</b>		Non-Preferred	PA; AL; QL
<b>ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION RECONSTITUTED</b>		Preferred	PA; AL; QL
<b>ZYPREXA ZYDIS ORAL TABLET DISPERSIBLE 10 MG, 5 MG</b>		Non-Preferred	PA; DO; QL
<b>ZYPREXA ZYDIS ORAL TABLET DISPERSIBLE 15 MG, 20 MG</b>		Non-Preferred	PA; QL
<b>*THIOXANTHENES***</b>			
thiothixene oral capsule 1 mg, 2 mg, 5 mg		Preferred	DO; AL; QL
thiothixene oral capsule 10 mg		Preferred	AL; QL

Drug Name	Reference	Status	Notes
<b>*ANTISEPTICS &amp; DISINFECTANTS*</b>			
<b>*ANTISEPTICS &amp; DISINFECTANTS***</b>			
formaldehyde external solution		Non-Preferred	
hydrogen peroxide external solution	Medi-First Hydrogen Peroxide	Preferred	OTC
hydrogen peroxide solution		Non-Preferred	
<b>HYLAMEND FIRST AID ANTISEPTIC EXTERNAL GEL</b>		Non-Preferred	OTC
<b>KERR TRIPLE DYE SWABS EXTERNAL SWAB</b>		Non-Preferred	OTC
<b>MEDI-FIRST HYDROGEN PEROXIDE EXTERNAL SOLUTION</b>		Preferred	OTC
phenol external liquid		Non-Preferred	OTC
<b>PHENOL EZ SWABS EXTERNAL SWAB</b>		Non-Preferred	OTC
<b>*CHLORINE ANTISEPTIC COMBINATIONS***</b>			
<b>GOLD BOND FIRST AID QUICK EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>MERTHIOLATE (NEW FORMULA) EXTERNAL TINCTURE</b>		Non-Preferred	OTC
<b>OXYZAL WET DRESSING EXTERNAL SOLUTION</b>		Non-Preferred	OTC
<b>*CHLORINE ANTISEPTICS***</b>			
<b>AMERIWASH EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>ANASEPT ANTIMICROBIAL EXTERNAL GEL</b>		Non-Preferred	OTC
<b>ANASEPT EXTERNAL LIQUID</b>		Non-Preferred	OTC
antibacterial hand soap external liquid		Non-Preferred	OTC
antibacterial liquid soap external liquid		Non-Preferred	OTC
antiseptic skin cleanser external solution	Betasept Surgical Scrub	Preferred	OTC; QL
antiseptic wound/skin cleanser external liquid		Non-Preferred	OTC
<b>BACTINE MAX WOUND WASH EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>BAND-AID ANTISEPTIC KIDS EXTERNAL FOAM</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
benzalkonium chloride external concentrate		Non-Preferred	OTC
benzalkonium chloride external solution		Non-Preferred	
<b>BETASEPT SURGICAL SCRUB EXTERNAL SOLUTION</b>		Preferred	OTC; QL
<b>BIOPATCH EXTERNAL</b>		Non-Preferred	OTC
<b>BIOPATCH PROTECTIVE DISK/CHG EXTERNAL</b>		Non-Preferred	OTC
bzk antiseptic towelettes external		Non-Preferred	OTC
<b>CA-REZZ EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>CA-REZZ EXTERNAL LIQUID</b>		Non-Preferred	OTC
ca-rezz gentle external liquid		Non-Preferred	OTC
<b>CA-REZZ MOISTURE BARRIER EXTERNAL CREAM</b>		Non-Preferred	OTC
ca-rezz norisc external cream		Non-Preferred	OTC
ca-rezz norisc external liquid		Non-Preferred	OTC
chlorhexidine gluconate cloth external pad		Non-Preferred	OTC
chlorhexidine gluconate external solution 2 %	Dyna-Hex 2	Non-Preferred	OTC
chlorhexidine gluconate external solution 4 %	Betasept Surgical Scrub	Preferred	OTC; QL
chlorhexidine gluconate solution		Non-Preferred	
cleansing towelettes 5" x 7" external		Non-Preferred	OTC
<b>CURECHROME EXTERNAL SOLUTION</b>		Non-Preferred	OTC
dakins (1/2 strength) external solution	HySept 25	Non-Preferred	OTC
dakins (1/4 strength) external solution	H-Chlor 12	Non-Preferred	OTC
dakins (full strength) external solution	HySept 50	Non-Preferred	OTC
<b>DIABETIC BASICS HEALTHY FOOT EXTERNAL LOTION</b>		Non-Preferred	OTC
diabet-x daily prevention external cream	Ca-Rezz	Non-Preferred	OTC
<b>DIAL GOLD EXTERNAL BAR</b>		Non-Preferred	OTC
<b>DIASINC ALL PURPOSE SPRAY EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>DI-DAK-SOL EXTERNAL SOLUTION</b>		Non-Preferred	OTC
<b>DYNA-HEX 2 EXTERNAL SOLUTION</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
DYNA-HEX 4 EXTERNAL SOLUTION		Preferred	OTC; QL
DYNAWOUND EXTERNAL LIQUID		Non-Preferred	OTC
GOLD BOND ULTIM SANITIZR/MOIST EXTERNAL LIQUID		Non-Preferred	OTC
GOLD BOND ULTIM SANITIZR/SHEER EXTERNAL LIQUID		Non-Preferred	OTC
HANDCLENS 2 IN 1 EXTERNAL LIQUID		Non-Preferred	OTC
H-CHLOR 12 EXTERNAL SOLUTION		Non-Preferred	OTC
H-CHLOR 6 EXTERNAL SOLUTION		Non-Preferred	OTC
HIBICLENS EXTERNAL SOLUTION		Non-Preferred	OTC; QL
HYSEPT 25 EXTERNAL SOLUTION		Non-Preferred	OTC
HYSEPT 50 EXTERNAL SOLUTION		Non-Preferred	OTC
merthiolate external liquid	Bactine Max Wound Wash	Non-Preferred	OTC
NEW SKIN EXTERNAL AEROSOL		Non-Preferred	OTC
NEW SKIN EXTERNAL LIQUID		Non-Preferred	OTC
obstetrical towelettes 5" x 7" external		Non-Preferred	OTC
<b>*DISINFECTANTS***</b>			
CETYLIDE II CONCENTRATE		Non-Preferred	OTC
CREOLIN LIQUID		Non-Preferred	OTC
<b>*IODINE ANTISEPTICS***</b>			
BETADINE ANTISEPTIC DRY POWDER EXTERNAL AEROSOL POWDER		Non-Preferred	OTC
BETADINE EXTERNAL SOLUTION		Non-Preferred	OTC
BETADINE SURGICAL SCRUB EXTERNAL SOLUTION		Non-Preferred	OTC
BETADINE SWABSTICKS EXTERNAL SWAB		Non-Preferred	OTC
decolorized iodine external tincture		Non-Preferred	OTC
first aid antiseptic external ointment		Non-Preferred	OTC
iodine external tincture		Non-Preferred	OTC
iodine strong external tincture		Non-Preferred	OTC
iodine tincture external tincture		Non-Preferred	OTC
KENDALL SPONGE STICK/PVP EXTERNAL		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
Iugols strong iodine external solution		Non-Preferred	
povidone-iodine external pad		Non-Preferred	OTC
povidone-iodine external solution	Betadine	Non-Preferred	OTC
povidone-iodine external swab	Betadine Swabsticks	Non-Preferred	OTC
povidone-iodine prep external pad		Non-Preferred	OTC
<b>SCRUB CARE POVIDONE-IODINE EXTERNAL SOLUTION</b>		Non-Preferred	OTC
<b>*ANTIVIRALS*</b>			
<b>*ANTIRETROVIRAL COMBINATIONS***</b>			
abacavir sulfate-lamivudine oral tablet		Preferred	QL
<b>ATRIPLA ORAL TABLET</b>		Non-Preferred	SP; QL
<b>BIKTARVY ORAL TABLET</b>		Preferred	QL
<b>CABENUVA INTRAMUSCULAR SUSPENSION EXTENDED RELEASE</b>		Non-Preferred	PA; QL
<b>CIMDUO ORAL TABLET</b>		Preferred	QL
<b>COMPLERA ORAL TABLET</b>		Preferred	PA; QL
<b>DELSTRIGO ORAL TABLET</b>		Preferred	QL
<b>DESCOVY ORAL TABLET</b>		Non-Preferred	PA; QL
<b>DOVATO ORAL TABLET</b>		Preferred	QL
emtricitabine-tenofovir df oral tablet 100-150 mg	Truvada	Preferred	
emtricitabine-tenofovir df oral tablet 133-200 mg, 167-250 mg, 200-300 mg	Truvada	Preferred	QL
<b>EVOTAZ ORAL TABLET</b>		Preferred	QL
<b>GENVOYA ORAL TABLET</b>		Preferred	QL
<b>JULUCA ORAL TABLET</b>		Preferred	PA; QL
<b>KALETRA ORAL SOLUTION</b>		Non-Preferred	QL
<b>KALETRA ORAL TABLET</b>		Non-Preferred	QL
lamivudine-zidovudine oral tablet		Preferred	QL
lopinavir-ritonavir oral solution	Kaletra	Preferred	QL
<b>ODEFSEY ORAL TABLET</b>		Preferred	PA; QL
<b>PREZCOBIX ORAL TABLET</b>		Preferred	QL
<b>STRIBILD ORAL TABLET</b>		Preferred	QL
<b>SYMFI LO ORAL TABLET</b>		Non-Preferred	QL
<b>SYMFI ORAL TABLET</b>		Non-Preferred	QL
<b>SYMTUZA ORAL TABLET</b>		Preferred	QL



Drug Name	Reference	Status	Notes
<b>TRIUMEQ ORAL TABLET</b>		Preferred	QL
trumeq pd oral tablet soluble		Preferred	QL
<b>TRUVADA ORAL TABLET 100-150 MG</b>		Non-Preferred	
<b>TRUVADA ORAL TABLET 133-200 MG, 167-250 MG, 200-300 MG</b>		Non-Preferred	QL
<b>*ANTIRETROVIRALS - CAPSID INHIBITORS***</b>			
<b>SUNLENCA ORAL TABLET THERAPY PACK</b>		Preferred	PA; QL
<b>SUNLENCA SUBCUTANEOUS SOLUTION</b>		Preferred	PA; QL
<b>*ANTIRETROVIRALS - CCR5 ANTAGONISTS (ENTRY INHIBITOR)***</b>			
maraviroc oral tablet	Selzentry	Preferred	QL
<b>SELZENTRY ORAL SOLUTION</b>		Preferred	QL
<b>SELZENTRY ORAL TABLET</b>		Non-Preferred	QL
<b>*ANTIRETROVIRALS - CD4-DIRECTED POST-ATTACHMENT INHIBITOR***</b>			
<b>TROGARZO INTRAVENOUS SOLUTION</b>		Preferred	PA; QL
<b>*ANTIRETROVIRALS - FUSION INHIBITORS***</b>			
<b>FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED</b>		Preferred	PA; QL
<b>*ANTIRETROVIRALS - GP120-DIRECTED ATTACHMENT INHIBITOR***</b>			
<b>RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HOUR</b>		Preferred	PA; QL
<b>*ANTIRETROVIRALS - INTEGRASE INHIBITORS***</b>			
<b>ISENTRESS HD ORAL TABLET</b>		Preferred	QL
<b>ISENTRESS ORAL PACKET</b>		Preferred	QL
<b>ISENTRESS ORAL TABLET</b>		Preferred	QL
<b>ISENTRESS ORAL TABLET CHEWABLE</b>		Preferred	QL
<b>TIVICAY ORAL TABLET</b>		Preferred	QL

Drug Name	Reference	Status	Notes
<b>TIVICAY PD ORAL TABLET SOLUBLE</b>		Preferred	QL
<b>*ANTIRETROVIRALS - PROTEASE INHIBITORS***</b>			
<b>APTIVUS ORAL CAPSULE</b>		Preferred	PA; QL
atazanavir sulfate oral capsule	Reyataz	Preferred	QL
darunavir oral tablet	Prezista	Preferred	QL
<b>LEXIVA ORAL TABLET</b>		Non-Preferred	QL
<b>NORVIR ORAL TABLET</b>		Non-Preferred	QL
<b>PREZISTA ORAL SUSPENSION</b>		Preferred	QL
<b>PREZISTA ORAL TABLET 150 MG, 75 MG</b>		Preferred	QL
<b>PREZISTA ORAL TABLET 600 MG, 800 MG</b>		Non-Preferred	QL
<b>REYATAZ ORAL CAPSULE</b>		Non-Preferred	QL
<b>REYATAZ ORAL PACKET</b>		Preferred	QL
ritonavir oral tablet	Norvir	Preferred	QL
<b>*ANTIRETROVIRALS - RTI-NON-NUCLEOSIDE ANALOGUES***</b>			
<b>EDURANT ORAL TABLET</b>		Preferred	PA; QL
etravirine oral tablet	Intence	Preferred	PA; AL; QL
<b>INTELENCE ORAL TABLET 100 MG, 200 MG</b>		Non-Preferred	PA; AL; QL
<b>INTELENCE ORAL TABLET 25 MG</b>		Preferred	PA; AL; QL
nevirapine er oral tablet extended release 24 hour		Preferred	QL
nevirapine oral suspension		Preferred	QL
nevirapine oral tablet		Preferred	QL
<b>PIFELTRO ORAL TABLET</b>		Preferred	QL
<b>SUSTIVA ORAL TABLET</b>		Non-Preferred	SP; QL
<b>*ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-PURINES***</b>			
abacavir sulfate oral solution	Ziagen	Preferred	QL
abacavir sulfate oral tablet		Preferred	QL
<b>ZIAGEN ORAL SOLUTION</b>		Non-Preferred	QL

Drug Name	Reference	Status	Notes
<b>*ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-PYRIMIDINES***</b>			
emtricitabine oral capsule	Emtriva	Preferred	QL
<b>EMTRIVA ORAL CAPSULE</b>		Non-Preferred	QL
<b>EMTRIVA ORAL SOLUTION</b>		Preferred	QL
<b>EPIVIR ORAL SOLUTION</b>		Non-Preferred	AL; QL
<b>EPIVIR ORAL TABLET</b>		Non-Preferred	QL
lamivudine oral solution	Epivir	Preferred	AL; QL
lamivudine oral tablet	Epivir	Preferred	QL
<b>*ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-THYMIDINES***</b>			
<b>RETROVIR INTRAVENOUS SOLUTION</b>		Preferred	
<b>RETROVIR ORAL CAPSULE</b>		Non-Preferred	QL
<b>RETROVIR ORAL SYRUP</b>		Non-Preferred	QL
zidovudine oral capsule	Retrovir	Preferred	QL
zidovudine oral syrup	Retrovir	Preferred	QL
zidovudine oral tablet		Preferred	QL
<b>*ANTIRETROVIRALS - RTI-NUCLEOTIDE ANALOGUES***</b>			
tenofovir disoproxil fumarate oral tablet	Viread	Preferred	PA; QL
<b>VIREAD ORAL POWDER</b>		Preferred	PA; QL
<b>VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG</b>		Preferred	PA; QL
<b>VIREAD ORAL TABLET 300 MG</b>		Non-Preferred	PA; QL
<b>*ANTIRETROVIRALS ADJUVANTS***</b>			
<b>TYBOST ORAL TABLET</b>		Preferred	QL
<b>*CMV AGENTS***</b>			
cidofovir intravenous solution		Non-Preferred	
foscarnet sodium intravenous solution	Foscavir	Non-Preferred	
<b>FOSCAVIR INTRAVENOUS SOLUTION</b>		Non-Preferred	
ganciclovir intravenous solution		Non-Preferred	SP
ganciclovir sodium intravenous solution		Non-Preferred	SP

Drug Name	Reference	Status	Notes
ganciclovir sodium intravenous solution reconstituted		Non-Preferred	SP
<b>LIVTENCITY ORAL TABLET</b>		Non-Preferred	PA; QL
<b>PREVYMIS INTRAVENOUS SOLUTION</b>		Non-Preferred	PA; SP; QL
<b>PREVYMIS ORAL TABLET</b>		Non-Preferred	PA; SP; QL
<b>VALCYTE ORAL SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>VALCYTE ORAL TABLET</b>		Non-Preferred	
valganciclovir hcl oral solution reconstituted	Valcyte	Preferred	
valganciclovir hcl oral tablet	Valcyte	Preferred	
<b>*HEPATITIS B AGENTS***</b>			
adefovir dipivoxil oral tablet		Preferred	PA; SP; QL
<b>BARACLUDGE ORAL SOLUTION</b>		Preferred	PA; QL
<b>BARACLUDGE ORAL TABLET</b>		Non-Preferred	PA; QL
entecavir oral tablet	Baraclude	Preferred	PA; QL
lamivudine oral tablet		Preferred	PA; QL
<b>VEMLIDY ORAL TABLET</b>		Non-Preferred	PA; SP; QL
<b>*HEPATITIS C AGENT - COMBINATIONS***</b>			
<b>EPCLUSA ORAL PACKET</b>		Non-Preferred	PA; SP; QL
<b>EPCLUSA ORAL TABLET</b>		Non-Preferred	PA; SP; QL
<b>HARVONI ORAL PACKET</b>		Non-Preferred	PA; SP; QL
<b>HARVONI ORAL TABLET</b>		Non-Preferred	PA; SP; QL
ledipasvir-sofosbuvir oral tablet	Harvoni	Non-Preferred	PA; SP; QL
<b>MAVYRET ORAL PACKET</b>		Preferred	PA; SP; QL
<b>MAVYRET ORAL TABLET</b>		Preferred	PA; SP; QL
sofosbuvir-velpatasvir oral tablet	Epclusa	Preferred	PA; SP; QL
<b>VOSEVI ORAL TABLET</b>		Non-Preferred	PA; SP; QL
<b>ZEPATIER ORAL TABLET</b>		Non-Preferred	PA; SP; QL
<b>*HEPATITIS C AGENTS***</b>			
<b>PEGASYS SUBCUTANEOUS SOLUTION</b>		Preferred	SP; QL
<b>PEGASYS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Preferred	SP; QL
ribavirin oral capsule		Preferred	SP; QL
ribavirin oral tablet		Preferred	SP; QL

Drug Name	Reference	Status	Notes
SOVALDI ORAL PACKET		Non-Preferred	PA; SP; QL
SOVALDI ORAL TABLET		Non-Preferred	PA; SP; QL
<b>*HERPES AGENTS - PURINE ANALOGUES***</b>			
acyclovir oral capsule		Preferred	
acyclovir oral suspension		Preferred	
acyclovir oral tablet		Preferred	
acyclovir sodium intravenous solution		Non-Preferred	
SITAVIG BUCCAL TABLET		Non-Preferred	PA; QL
valacyclovir hcl oral tablet	Valtrex	Preferred	QL
VALTRESX ORAL TABLET		Non-Preferred	QL
<b>*HERPES AGENTS - THYMIDINE ANALOGUES***</b>			
famciclovir oral tablet		Preferred	QL
<b>*INFLUENZA AGENTS***</b>			
rimantadine hcl oral tablet		Preferred	
<b>*MISC. ANTIVIRALS***</b>			
TEMBEXA ORAL SUSPENSION		Non-Preferred	
TEMBEXA ORAL TABLET		Non-Preferred	
TPOXX INTRAVENOUS SOLUTION		Non-Preferred	
TPOXX ORAL CAPSULE		Non-Preferred	
<b>*NEURAMINIDASE INHIBITORS***</b>			
oseltamivir phosphate oral capsule	Tamiflu	Preferred	QL
oseltamivir phosphate oral suspension reconstituted	Tamiflu	Preferred	QL
RAPIVAB INTRAVENOUS SOLUTION		Non-Preferred	
RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED		Preferred	QL
TAMIFLU ORAL CAPSULE		Non-Preferred	QL
TAMIFLU ORAL SUSPENSION RECONSTITUTED		Non-Preferred	QL
<b>*PA ENDONUCLEASE INHIBITORS***</b>			
XOFLUZA (40 MG DOSE) ORAL TABLET THERAPY PACK		Preferred	QL

Drug Name	Reference	Status	Notes
<b>XOFLUZA (80 MG DOSE) ORAL TABLET THERAPY PACK</b>		Preferred	QL
<b>*RSV AGENTS - NUCLEOSIDE ANALOGUES***</b>			
ribavirin inhalation solution reconstituted	Virazole	Non-Preferred	PA
<b>VIRAZOLE INHALATION SOLUTION RECONSTITUTED</b>		Non-Preferred	PA
<b>*BETA BLOCKERS*</b>			
<b>*ALPHA-BETA BLOCKERS***</b>			
carvedilol oral tablet 12.5 mg, 3.125 mg, 6.25 mg	Coreg	Preferred	DO; QL
carvedilol oral tablet 25 mg	Coreg	Preferred	QL
carvedilol phosphate er oral capsule extended release 24 hour 10 mg, 20 mg, 40 mg	Coreg CR	Non-Preferred	DO; QL
carvedilol phosphate er oral capsule extended release 24 hour 80 mg	Coreg CR	Non-Preferred	QL
<b>COREG CR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 20 MG, 40 MG</b>		Non-Preferred	DO; QL
<b>COREG CR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 80 MG</b>		Non-Preferred	QL
<b>COREG ORAL TABLET 12.5 MG, 3.125 MG, 6.25 MG</b>		Non-Preferred	DO; QL
<b>COREG ORAL TABLET 25 MG</b>		Non-Preferred	QL
labetalol hcl intravenous solution		Non-Preferred	
labetalol hcl intravenous solution prefilled syringe		Non-Preferred	
labetalol hcl oral tablet 100 mg, 200 mg		Preferred	DO; QL
labetalol hcl oral tablet 300 mg		Preferred	QL
<b>*BETA BLOCKERS CARDIO-SELECTIVE***</b>			
acebutolol hcl oral capsule		Preferred	
atenolol oral tablet	Tenormin	Preferred	
betaxolol hcl oral tablet		Preferred	
bisoprolol fumarate oral tablet		Preferred	
<b>BREVIBLOC IN NAACL INTRAVENOUS SOLUTION</b>		Non-Preferred	

Drug Name	Reference	Status	Notes
<b>BREVIBLOC INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>BREVIBLOC PREMIXED DS INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>BREVIBLOC PREMIXED INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>BYSTOLIC ORAL TABLET</b>		Non-Preferred	PA
esmolol hcl intravenous solution	Brevibloc	Non-Preferred	
esmolol hcl-sodium chloride intravenous solution	Brevibloc in NaCl	Non-Preferred	
<b>KAPSPARGO SPRINKLE ORAL CAPSULE ER 24 HOUR SPRINKLE</b>		Non-Preferred	PA
<b>LOPRESSOR ORAL TABLET</b>		Non-Preferred	PA
metoprolol succinate er oral tablet extended release 24 hour	Toprol XL	Preferred	
metoprolol tartrate intravenous solution		Non-Preferred	
metoprolol tartrate oral tablet	Lopressor	Preferred	
nebivolol hcl oral tablet	Bystolic	Non-Preferred	PA
<b>TENORMIN ORAL TABLET</b>		Non-Preferred	PA
<b>TOPROL XL ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA
<b>*BETA BLOCKERS NON-SELECTIVE***</b>			
<b>BETAPACE AF ORAL TABLET</b>		Non-Preferred	
<b>BETAPACE ORAL TABLET</b>		Non-Preferred	
<b>HEMANGEOL ORAL SOLUTION</b>		Non-Preferred	
<b>INDERAL LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 60 MG, 80 MG</b>		Non-Preferred	PA; DO; QL
<b>INDERAL LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 160 MG</b>		Non-Preferred	PA; QL
<b>INDERAL XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; QL
<b>INNOPRAN XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; QL
nadolol oral tablet 20 mg, 40 mg		Preferred	DO; QL
nadolol oral tablet 80 mg		Preferred	QL
pindolol oral tablet 10 mg		Preferred	QL

Drug Name	Reference	Status	Notes
pindolol oral tablet 5 mg		Preferred	DO; QL
propranolol hcl er oral capsule extended release 24 hour 120 mg, 60 mg, 80 mg	Inderal LA	Preferred	DO; QL
propranolol hcl er oral capsule extended release 24 hour 160 mg	Inderal LA	Preferred	QL
propranolol hcl intravenous solution		Non-Preferred	
propranolol hcl oral solution		Preferred	QL
propranolol hcl oral tablet 10 mg, 20 mg, 40 mg, 60 mg		Preferred	DO; QL
propranolol hcl oral tablet 80 mg		Preferred	QL
sotalol hcl (af) oral tablet	Betapace AF	Preferred	
sotalol hcl intravenous solution		Non-Preferred	
sotalol hcl oral tablet	Betapace	Preferred	
<b>SOTYLIZE ORAL SOLUTION</b>		Non-Preferred	
timolol maleate oral tablet 10 mg, 20 mg		Preferred	QL
timolol maleate oral tablet 5 mg		Preferred	DO; QL
<b>*CALCIUM CHANNEL BLOCKERS*</b>			
<b>*CALCIUM CHANNEL BLOCKERS***</b>			
amlodipine besylate oral tablet 10 mg	Norvasc	Preferred	QL
amlodipine besylate oral tablet 2.5 mg, 5 mg	Norvasc	Preferred	DO; QL
<b>CARDENE IV INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>CARDIZEM CD ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG</b>		Non-Preferred	DO; QL
<b>CARDIZEM CD ORAL CAPSULE EXTENDED RELEASE 24 HOUR 180 MG, 240 MG, 300 MG, 360 MG</b>		Non-Preferred	QL
<b>CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR 120 MG</b>		Non-Preferred	DO; QL
<b>CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR 180 MG, 240 MG, 300 MG, 360 MG, 420 MG</b>		Non-Preferred	QL
<b>CARDIZEM ORAL TABLET 120 MG</b>		Non-Preferred	QL



Drug Name	Reference	Status	Notes
<b>CARDIZEM ORAL TABLET 30 MG, 60 MG</b>		Non-Preferred	DO; QL
<b>CARTIA XT ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG</b>		Preferred	DO; QL
<b>CARTIA XT ORAL CAPSULE EXTENDED RELEASE 24 HOUR 180 MG, 240 MG, 300 MG</b>		Preferred	QL
<b>CLEVIPREX INTRAVENOUS EMULSION</b>		Non-Preferred	
<b>CONJUPRI ORAL TABLET 2.5 MG</b>		Non-Preferred	PA; DO; QL
<b>CONJUPRI ORAL TABLET 5 MG</b>		Non-Preferred	PA; QL
diltiazem hcl er beads oral capsule extended release 24 hour 120 mg	Tiadyt ER	Preferred	DO; QL
diltiazem hcl er beads oral capsule extended release 24 hour 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	Tiadyt ER	Preferred	QL
diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg	Cartia XT	Preferred	DO; QL
diltiazem hcl er coated beads oral capsule extended release 24 hour 180 mg, 240 mg, 300 mg	Cartia XT	Preferred	QL
diltiazem hcl er coated beads oral capsule extended release 24 hour 360 mg	Cardizem CD	Preferred	QL
diltiazem hcl er oral capsule extended release 12 hour 120 mg, 90 mg		Non-Preferred	QL
diltiazem hcl er oral capsule extended release 12 hour 60 mg		Non-Preferred	DO; QL
diltiazem hcl er oral capsule extended release 24 hour 120 mg		Preferred	DO; QL
diltiazem hcl er oral capsule extended release 24 hour 180 mg, 240 mg		Preferred	QL
diltiazem hcl er oral tablet extended release 24 hour 120 mg	Cardizem LA	Non-Preferred	DO; QL
diltiazem hcl er oral tablet extended release 24 hour 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	Cardizem LA	Non-Preferred	QL
diltiazem hcl intravenous solution		Non-Preferred	
diltiazem hcl intravenous solution reconstituted		Non-Preferred	

Drug Name	Reference	Status	Notes
diltiazem hcl oral tablet 120 mg	Cardizem	Preferred	QL
diltiazem hcl oral tablet 30 mg, 60 mg	Cardizem	Preferred	DO; QL
diltiazem hcl oral tablet 90 mg		Preferred	QL
dilt-xr oral capsule extended release 24 hour 120 mg		Preferred	DO; QL
dilt-xr oral capsule extended release 24 hour 180 mg, 240 mg		Preferred	QL
felodipine er oral tablet extended release 24 hour 10 mg		Preferred	QL
felodipine er oral tablet extended release 24 hour 2.5 mg, 5 mg		Preferred	DO; QL
isradipine oral capsule 2.5 mg		Preferred	DO; QL
isradipine oral capsule 5 mg		Preferred	QL
<b>KATERZIA ORAL SUSPENSION</b>		Non-Preferred	PA; QL
levamlodipine maleate oral tablet 2.5 mg	Conjupri	Non-Preferred	PA; DO; QL
levamlodipine maleate oral tablet 5 mg	Conjupri	Non-Preferred	PA; QL
<b>MATZIM LA ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	QL
nicardipine hcl in nacl intravenous solution		Non-Preferred	
nicardipine hcl intravenous solution		Non-Preferred	
nicardipine hcl oral capsule		Preferred	QL
nifedipine er oral tablet extended release 24 hour 30 mg		Preferred	DO; QL
nifedipine er oral tablet extended release 24 hour 60 mg, 90 mg		Preferred	QL
nifedipine er osmotic release oral tablet extended release 24 hour 30 mg	Procardia XL	Preferred	DO; QL
nifedipine er osmotic release oral tablet extended release 24 hour 60 mg, 90 mg	Procardia XL	Preferred	QL
nifedipine oral capsule 10 mg		Preferred	DO; QL
nifedipine oral capsule 20 mg		Preferred	QL
nimodipine oral capsule		Non-Preferred	QL
nisoldipine er oral tablet extended release 24 hour 17 mg, 8.5 mg	Sular	Non-Preferred	DO; QL
nisoldipine er oral tablet extended release 24 hour 20 mg, 25.5 mg, 30 mg		Non-Preferred	DO; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
nisoldipine er oral tablet extended release 24 hour 34 mg	Sular	Non-Preferred	QL
nisoldipine er oral tablet extended release 24 hour 40 mg		Non-Preferred	QL
<b>NORLIQVA ORAL SOLUTION</b>		Non-Preferred	PA; QL
<b>NORVASC ORAL TABLET 10 MG</b>		Non-Preferred	QL
<b>NORVASC ORAL TABLET 2.5 MG, 5 MG</b>		Non-Preferred	DO; QL
<b>NYMALIZE ORAL SOLUTION</b>		Non-Preferred	QL
<b>PROCARDIA XL ORAL TABLET EXTENDED RELEASE 24 HOUR 30 MG</b>		Non-Preferred	DO; QL
<b>PROCARDIA XL ORAL TABLET EXTENDED RELEASE 24 HOUR 60 MG, 90 MG</b>		Non-Preferred	QL
<b>SULAR ORAL TABLET EXTENDED RELEASE 24 HOUR 17 MG, 8.5 MG</b>		Non-Preferred	DO; QL
<b>SULAR ORAL TABLET EXTENDED RELEASE 24 HOUR 34 MG</b>		Non-Preferred	QL
<b>TIADYLT ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG</b>		Preferred	DO; QL
<b>TIADYLT ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 180 MG, 240 MG, 300 MG, 360 MG, 420 MG</b>		Preferred	QL
<b>TIAZAC ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG</b>		Non-Preferred	DO; QL
<b>TIAZAC ORAL CAPSULE EXTENDED RELEASE 24 HOUR 180 MG, 240 MG, 300 MG, 360 MG, 420 MG</b>		Non-Preferred	QL
verapamil hcl er oral capsule extended release 24 hour 100 mg	Verelan PM	Preferred	DO; QL
verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg	Verelan	Preferred	DO; QL
verapamil hcl er oral capsule extended release 24 hour 200 mg, 300 mg	Verelan PM	Preferred	QL
verapamil hcl er oral capsule extended release 24 hour 240 mg, 360 mg	Verelan	Preferred	QL
verapamil hcl er oral tablet extended release 120 mg		Preferred	DO; QL

Drug Name	Reference	Status	Notes
verapamil hcl er oral tablet extended release 180 mg, 240 mg		Preferred	QL
verapamil hcl intravenous solution		Non-Preferred	
verapamil hcl oral tablet 120 mg		Preferred	QL
verapamil hcl oral tablet 40 mg, 80 mg		Preferred	DO; QL
<b>VERELAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG</b>		Non-Preferred	DO; QL
<b>VERELAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR 240 MG, 360 MG</b>		Non-Preferred	QL
<b>VERELAN PM ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG</b>		Non-Preferred	DO; QL
<b>VERELAN PM ORAL CAPSULE EXTENDED RELEASE 24 HOUR 200 MG, 300 MG</b>		Non-Preferred	QL
<b>*CARDIOTONICS*</b>			
<b>*CARDIAC GLYCOSIDES***</b>			
<b>DIGOX ORAL TABLET 125 MCG</b>		Preferred	DO; QL
<b>DIGOX ORAL TABLET 250 MCG</b>		Preferred	QL
digoxin injection solution	Lanoxin	Non-Preferred	
digoxin oral solution		Preferred	
digoxin oral tablet 125 mcg	Digox	Preferred	DO; QL
digoxin oral tablet 250 mcg	Digox	Preferred	QL
digoxin oral tablet 62.5 mcg	Lanoxin	Non-Preferred	DO; QL
<b>LANOXIN INJECTION SOLUTION</b>		Non-Preferred	
<b>LANOXIN ORAL TABLET 125 MCG, 62.5 MCG</b>		Non-Preferred	DO; QL
<b>LANOXIN ORAL TABLET 250 MCG</b>		Non-Preferred	QL
<b>LANOXIN PEDIATRIC INJECTION SOLUTION</b>		Non-Preferred	
<b>*INOTROPES***</b>			
dobutamine hcl intravenous solution		Non-Preferred	
dobutamine-dextrose intravenous solution		Non-Preferred	
dopamine hcl intravenous solution		Non-Preferred	
dopamine-dextrose intravenous solution		Non-Preferred	

Drug Name	Reference	Status	Notes
milrinone lactate in dextrose intravenous solution		Non-Preferred	
milrinone lactate intravenous solution		Non-Preferred	
<b>*CARDIOVASCULAR AGENTS - MISC.*</b>			
<b>*CALCIUM CHANNEL BLOCKER &amp; HMG COA REDUCTASE INHIBIT COMB***</b>			
amlodipine-atorvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg, 5-80 mg	Caduet	Non-Preferred	QL
amlodipine-atorvastatin oral tablet 2.5-10 mg, 2.5-20 mg, 2.5-40 mg		Non-Preferred	DO; QL
amlodipine-atorvastatin oral tablet 5-10 mg, 5-20 mg, 5-40 mg	Caduet	Non-Preferred	DO; QL
<b>CADUET ORAL TABLET 10-10 MG, 10-20 MG, 10-40 MG, 10-80 MG, 5-80 MG</b>		Non-Preferred	QL
<b>CADUET ORAL TABLET 5-10 MG, 5-20 MG, 5-40 MG</b>		Non-Preferred	DO; QL
<b>*CARDIAC MYOSIN INHIBITORS***</b>			
<b>CAMZYOS ORAL CAPSULE</b>		Non-Preferred	PA; SP; QL
<b>*CARDIOPLEGIC SOLUTIONS***</b>			
cardioplegic perfusion solution	Plegisol	Non-Preferred	
<b>PLEGISOL PERFUSION SOLUTION</b>		Non-Preferred	
<b>*CARDIOVASCULAR ANTI-INFLAMMATORY/IMMUNE MODULATORS***</b>			
<b>LODOCO ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*CARDIOVASCULAR SGLT2 INHIBITORS**</b>			
<b>INPEFA ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*NEPRILYSIN INHIB (ARNI)-ANGIOTENSIN II RECEPT ANTAG COMB***</b>			
<b>ENTRESTO ORAL CAPSULE SPRINKLE</b>		Non-Preferred	PA; QL
<b>ENTRESTO ORAL TABLET</b>		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
<b>*NITRATE &amp; VASODILATOR COMBINATIONS***</b>			
<b>BIDIL ORAL TABLET</b>		Non-Preferred	QL
isosorb dinitrate-hydralazine oral tablet	BiDil	Non-Preferred	QL
<b>*PDE INHIBITOR-ENDOTHELIN RECEPTOR ANTAGONIST COMBINATIONS***</b>			
<b>OPSYNVI ORAL TABLET</b>		Non-Preferred	PA; SP; QL
<b>*PERIPHERAL VASODILATORS***</b>			
niacin flush free oral capsule 500 mg		Preferred	OTC
niacin flush free oral capsule 590 mg		Non-Preferred	OTC
<b>*PROSTAGLANDIN VASODILATORS***</b>			
<b>ORENITRAM MONTH 1 ORAL TABLET EXTENDED RELEASE THERAPY PACK</b>		Non-Preferred	PA; SP; QL
<b>ORENITRAM MONTH 2 ORAL TABLET EXTENDED RELEASE THERAPY PACK</b>		Non-Preferred	PA; SP; QL
<b>ORENITRAM MONTH 3 ORAL TABLET EXTENDED RELEASE THERAPY PACK</b>		Non-Preferred	PA; SP; QL
<b>ORENITRAM ORAL TABLET EXTENDED RELEASE</b>		Non-Preferred	PA; SP
<b>TYVASO DPI INSTITUTIONAL KIT INHALATION POWDER</b>		Non-Preferred	PA; SP; QL
<b>TYVASO DPI MAINTENANCE KIT INHALATION POWDER</b>		Non-Preferred	PA; SP; QL
<b>TYVASO DPI TITRATION KIT INHALATION POWDER</b>		Non-Preferred	PA; SP; QL
<b>TYVASO INHALATION SOLUTION</b>		Non-Preferred	PA; SP; QL
<b>TYVASO REFILL KIT INHALATION SOLUTION</b>		Non-Preferred	PA; SP; QL
<b>TYVASO STARTER KIT INHALATION SOLUTION</b>		Non-Preferred	PA; SP; QL
<b>VENTAVIS INHALATION SOLUTION</b>		Non-Preferred	PA; SP; QL

Drug Name	Reference	Status	Notes
<b>*PULM HYPERTEN-SOLUBLE GUANYLATE CYCLASE STIMULATOR (SGC)***</b>			
ADEMPAS ORAL TABLET		Non-Preferred	PA; SP; QL
<b>*PULMONARY HYPERTENSION - ACTIVIN SIGNALING INHIBITOR***</b>			
WINREVAIR SUBCUTANEOUS KIT		Non-Preferred	PA; SP; QL
<b>*PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS***</b>			
ambrisentan oral tablet	Letairis	Preferred	PA; SP; QL
bosentan oral tablet	Tracleer	Non-Preferred	PA; SP; QL
LETAIRIS ORAL TABLET		Non-Preferred	PA; SP; QL
OPSUMIT ORAL TABLET		Non-Preferred	PA; SP; QL
TRACLEER ORAL TABLET		Non-Preferred	PA; SP; QL
TRACLEER ORAL TABLET SOLUBLE		Non-Preferred	PA; SP; QL
<b>*PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS***</b>			
ADCIRCA ORAL TABLET		Non-Preferred	PA; SP; QL
ALYQ ORAL TABLET		Preferred	PA; SP; QL
REVATIO INTRAVENOUS SOLUTION		Non-Preferred	PA; SP; QL
REVATIO ORAL TABLET		Non-Preferred	PA; SP; QL
sildenafil citrate intravenous solution	Revatio	Non-Preferred	PA; SP; QL
sildenafil citrate oral suspension reconstituted		Non-Preferred	PA; SP; QL
sildenafil citrate oral tablet	Revatio	Preferred	PA; SP; QL
tadalafil (pah) oral tablet	Alyq	Preferred	PA; SP; QL
TADLIQ ORAL SUSPENSION		Non-Preferred	PA; SP; QL
<b>*PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST***</b>			
UPTRAVI INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; QL
UPTRAVI ORAL TABLET		Non-Preferred	PA; SP; QL
UPTRAVI TITRATION ORAL TABLET THERAPY PACK		Non-Preferred	PA; SP; QL

Drug Name	Reference	Status	Notes
<b>*SELECTIVE CGMP PHOSPHODIESTERASE TYPE 5 INHIBITORS***</b>			
<b>CIALIS ORAL TABLET</b>		Non-Preferred	PA
tadalafil oral tablet	Cialis	Non-Preferred	PA
<b>*SEPTAL AGENTS - ABLATION**</b>			
<b>ABLYSINOL INTRA-ARTERIAL SOLUTION</b>		Non-Preferred	
<b>*SINUS NODE INHIBITORS**</b>			
<b>CORLANOR ORAL SOLUTION</b>		Non-Preferred	PA; QL
<b>CORLANOR ORAL TABLET</b>		Non-Preferred	PA; QL
ivabradine hcl oral tablet	Corlanor	Non-Preferred	PA; QL
<b>*TRANSTHYRETIN STABILIZERS***</b>			
<b>VYNDAMAX ORAL CAPSULE</b>		Non-Preferred	PA; SP; QL
<b>VYNDAQEL ORAL CAPSULE</b>		Non-Preferred	PA; SP; QL
<b>*VASOACTIVE SOLUBLE GUANYLATE CYCLASE STIMULATOR (SGC)***</b>			
<b>VERQUVO ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*CEPHALOSPORINS*</b>			
<b>*CEPHALOSPORIN COMBINATIONS***</b>			
<b>AVYCAZ INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>ZERBAXA INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>*CEPHALOSPORINS - 1ST GENERATION***</b>			
cefadroxil oral capsule		Preferred	
cefadroxil oral suspension reconstituted		Preferred	
cefadroxil oral tablet		Preferred	
cefazolin sodium injection solution reconstituted		Non-Preferred	
cefazolin sodium intravenous solution reconstituted		Non-Preferred	
cefazolin sodium-dextrose intravenous solution		Non-Preferred	



Drug Name	Reference	Status	Notes
cefazolin sodium-dextrose intravenous solution reconstituted		Non-Preferred	
cephalexin oral capsule		Preferred	
cephalexin oral suspension reconstituted		Preferred	
cephalexin oral tablet		Preferred	
<b>*CEPHALOSPORINS - 2ND GENERATION***</b>			
cefaclor er oral tablet extended release 12 hour		Preferred	
cefaclor oral capsule		Preferred	
cefaclor oral suspension reconstituted		Preferred	
<b>CEFOTAN INJECTION SOLUTION RECONSTITUTED</b>		Non-Preferred	
cefotetan disodium injection solution reconstituted	Cefotan	Non-Preferred	
cefoxitin sodium intravenous solution reconstituted		Non-Preferred	
cefoxitin sodium-dextrose intravenous solution reconstituted		Non-Preferred	
cefprozil oral suspension reconstituted		Preferred	
cefprozil oral tablet		Preferred	
cefuroxime axetil oral tablet		Preferred	
cefuroxime sodium injection solution reconstituted		Non-Preferred	
cefuroxime sodium intravenous solution reconstituted		Non-Preferred	
<b>*CEPHALOSPORINS - 3RD GENERATION***</b>			
cefdinir oral capsule		Preferred	
cefdinir oral suspension reconstituted		Preferred	
cefixime oral capsule		Non-Preferred	
cefixime oral suspension reconstituted		Non-Preferred	
cefotaxime sodium injection solution reconstituted		Non-Preferred	
cefpodoxime proxetil oral suspension reconstituted		Preferred	
cefpodoxime proxetil oral tablet		Preferred	
ceftazidime injection solution reconstituted	Tazicef	Non-Preferred	

Drug Name	Reference	Status	Notes
ceftazidime intravenous solution reconstituted	Tazicef	Non-Preferred	
ceftriaxone sodium in dextrose intravenous solution		Non-Preferred	
ceftriaxone sodium injection solution reconstituted 1 gm, 2 gm, 250 mg, 500 mg		Preferred	QL
ceftriaxone sodium injection solution reconstituted 100 gm		Non-Preferred	QL
ceftriaxone sodium intravenous solution reconstituted 1 gm, 2 gm		Non-Preferred	QL
ceftriaxone sodium intravenous solution reconstituted 10 gm		Preferred	QL
ceftriaxone sodium-dextrose intravenous solution reconstituted		Non-Preferred	
<b>TAZICEF INJECTION SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>TAZICEF INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>TAZICEF INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>*CEPHALOSPORINS - 4TH GENERATION***</b>			
cefepime hcl injection solution reconstituted		Non-Preferred	
cefepime hcl intravenous solution		Non-Preferred	
cefepime hcl intravenous solution reconstituted		Non-Preferred	
cefepime-dextrose intravenous solution reconstituted		Non-Preferred	
<b>*CEPHALOSPORINS - 5TH GENERATION***</b>			
<b>TEFLARO INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>*CEPHALOSPORINS - SIDEROPHORES***</b>			
<b>FETROJA INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>*CHEMICALS*</b>			
<b>*BULK CHEMICALS - AM'S***</b>			
amlexanox powder		Non-Preferred	

Drug Name	Reference	Status	Notes
<b>*BULK CHEMICALS - AR'S***</b>			
arnica liquid		Non-Preferred	
<b>*ESSENTIAL OILS***</b>			
celery seed oil		Non-Preferred	OTC
tangerine oil		Non-Preferred	OTC
tangerine oil oil		Non-Preferred	OTC
<b>*SOLVENTS***</b>			
alcohol (rubbing) solution		Non-Preferred	OTC
alcohol denatured external solution		Non-Preferred	OTC
alcoholado eucaliptino solution		Non-Preferred	OTC
ethyl alcohol (rubbing) solution		Non-Preferred	OTC
ethyl alcohol external solution		Non-Preferred	OTC
isopropyl alcohol solution		Non-Preferred	OTC
isopropyl alcohol, rubbing solution		Preferred	OTC
<b>*CONTRACEPTIVES*</b>			
<b>*BIPHASIC CONTRACEPTIVES - ORAL***</b>			
<b>AZURETTE ORAL TABLET</b>		Preferred	AL; QL
desogestrel-ethinyl estradiol oral tablet	Azurette	Preferred	AL; QL
<b>KARIVA ORAL TABLET</b>		Preferred	AL; QL
<b>LO LOESTRIN FE ORAL TABLET</b>		Non-Preferred	AL; QL
<b>PIMTREA ORAL TABLET</b>		Preferred	AL; QL
<b>SIMLIYA ORAL TABLET</b>		Preferred	AL; QL
viorele oral tablet	Azurette	Preferred	AL; QL
<b>VOLNEA ORAL TABLET</b>		Preferred	AL; QL
<b>*COMBINATION CONTRACEPTIVES - ORAL***</b>			
<b>AFIRMELLE ORAL TABLET</b>		Preferred	AL; QL
<b>ALTAVERA ORAL TABLET</b>		Preferred	AL; QL
alyacen 1/35 oral tablet	Dasetta 1/35	Preferred	AL; QL
<b>APRI ORAL TABLET</b>		Preferred	AL; QL
<b>AUBRA EQ ORAL TABLET</b>		Preferred	AL; QL
<b>AUROVELA 1.5/30 ORAL TABLET</b>		Preferred	AL; QL
<b>AUROVELA 1/20 ORAL TABLET</b>		Preferred	AL; QL
<b>AUROVELA 24 FE ORAL TABLET</b>		Preferred	AL; QL
<b>AUROVELA FE 1.5/30 ORAL TABLET</b>		Preferred	AL; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>AUROVELA FE 1/20 ORAL TABLET</b>		Preferred	AL; QL
<b>AVIANE ORAL TABLET</b>		Preferred	AL; QL
<b>AYUNA ORAL TABLET</b>		Preferred	AL; QL
<b>BALCOLTRA ORAL TABLET</b>		Non-Preferred	AL; QL
<b>BALZIVA ORAL TABLET</b>		Preferred	AL; QL
<b>BEYAZ ORAL TABLET</b>		Non-Preferred	AL; QL
<b>BLISOVI 24 FE ORAL TABLET</b>		Preferred	AL; QL
<b>BLISOVI FE 1.5/30 ORAL TABLET</b>		Preferred	AL; QL
<b>BLISOVI FE 1/20 ORAL TABLET</b>		Preferred	AL; QL
briellyn oral tablet	Balziva	Preferred	AL; QL
<b>CHARLOTTE 24 FE ORAL TABLET CHEWABLE</b>		Preferred	AL; QL
<b>CRYSSELLE-28 ORAL TABLET</b>		Preferred	AL; QL
<b>CYRED EQ ORAL TABLET</b>		Preferred	AL; QL
<b>DASETTA 1/35 ORAL TABLET</b>		Preferred	AL; QL
<b>DELYLA ORAL TABLET</b>		Preferred	AL; QL
drospiren-eth estrad-levomefol oral tablet	Beyaz	Preferred	AL; QL
drospirenone-ethinyl estradiol oral tablet	Jasmiel	Preferred	AL; QL
<b>ELINEST ORAL TABLET</b>		Preferred	AL; QL
<b>ENSKYCE ORAL TABLET</b>		Preferred	AL; QL
<b>ESTARYLLA ORAL TABLET</b>		Preferred	AL; QL
ethynodiol diac-eth estradiol oral tablet	Kelnor 1/35	Preferred	AL; QL
<b>FALMINA ORAL TABLET</b>		Preferred	AL; QL
<b>FEMLYV ORAL TABLET DISPERSIBLE</b>		Non-Preferred	AL; QL
<b>FINZALA ORAL TABLET CHEWABLE</b>		Preferred	AL; QL
<b>GEMMILY ORAL CAPSULE</b>		Preferred	AL; QL
<b>HAILEY 1.5/30 ORAL TABLET</b>		Preferred	AL; QL
<b>HAILEY 24 FE ORAL TABLET</b>		Preferred	AL; QL
<b>HAILEY FE 1.5/30 ORAL TABLET</b>		Preferred	AL; QL
<b>HAILEY FE 1/20 ORAL TABLET</b>		Preferred	AL; QL
<b>ISIBLOOM ORAL TABLET</b>		Preferred	AL; QL
<b>JASMIEL ORAL TABLET</b>		Preferred	AL; QL
<b>JOYEAUX ORAL TABLET</b>		Non-Preferred	AL; QL
<b>JULEBER ORAL TABLET</b>		Preferred	AL; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>JUNEL 1.5/30 ORAL TABLET</b>		Preferred	AL; QL
<b>JUNEL 1/20 ORAL TABLET</b>		Preferred	AL; QL
<b>JUNEL FE 1.5/30 ORAL TABLET</b>		Preferred	AL; QL
<b>JUNEL FE 1/20 ORAL TABLET</b>		Preferred	AL; QL
<b>JUNEL FE 24 ORAL TABLET</b>		Preferred	AL; QL
<b>KAITLIB FE ORAL TABLET CHEWABLE</b>		Preferred	AL; QL
<b>KALLIGA ORAL TABLET</b>		Preferred	AL; QL
<b>KELNOR 1/35 ORAL TABLET</b>		Preferred	AL; QL
<b>KELNOR 1/50 ORAL TABLET</b>		Preferred	AL; QL
<b>KURVELO ORAL TABLET</b>		Preferred	AL; QL
<b>LARIN 1.5/30 ORAL TABLET</b>		Preferred	AL; QL
<b>LARIN 1/20 ORAL TABLET</b>		Preferred	AL; QL
<b>LARIN 24 FE ORAL TABLET</b>		Preferred	AL; QL
<b>LARIN FE 1.5/30 ORAL TABLET</b>		Preferred	AL; QL
<b>LARIN FE 1/20 ORAL TABLET</b>		Preferred	AL; QL
<b>LAYOLIS FE ORAL TABLET CHEWABLE</b>		Preferred	AL; QL
<b>LESSINA ORAL TABLET</b>		Preferred	AL; QL
levonorgest-eth estradiol-iron oral tablet	Balcoltra	Non-Preferred	AL; QL
levonorgestrel-ethinyl estrad oral tablet	Afirmelle	Preferred	AL; QL
<b>LEVORA 0.15/30 (28) ORAL TABLET</b>		Preferred	AL; QL
<b>LOESTRIN 1.5/30 (21) ORAL TABLET</b>		Preferred	AL; QL
<b>LOESTRIN 1/20 (21) ORAL TABLET</b>		Preferred	AL; QL
<b>LOESTRIN FE 1.5/30 ORAL TABLET</b>		Preferred	AL; QL
<b>LOESTRIN FE 1/20 ORAL TABLET</b>		Preferred	AL; QL
<b>LORYNA ORAL TABLET</b>		Preferred	AL; QL
<b>LOW-OGESTREL ORAL TABLET</b>		Preferred	AL; QL
<b>LO-ZUMANDIMINE ORAL TABLET</b>		Preferred	AL; QL
<b>LUTERA ORAL TABLET</b>		Preferred	AL; QL
marlissa oral tablet	Altavera	Preferred	AL; QL
<b>MERZEE ORAL CAPSULE</b>		Preferred	AL; QL
<b>MIBELAS 24 FE ORAL TABLET CHEWABLE</b>		Preferred	AL; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>MICROGESTIN 1.5/30 ORAL TABLET</b>		Preferred	AL; QL
<b>MICROGESTIN 1/20 ORAL TABLET</b>		Preferred	AL; QL
<b>MICROGESTIN FE 1.5/30 ORAL TABLET</b>		Preferred	AL; QL
<b>MICROGESTIN FE 1/20 ORAL TABLET</b>		Preferred	AL; QL
<b>MILI ORAL TABLET</b>		Preferred	AL; QL
<b>MONO-LINYAH ORAL TABLET</b>		Preferred	AL; QL
<b>NECON 0.5/35 (28) ORAL TABLET</b>		Preferred	AL; QL
<b>NEXTSTELLIS ORAL TABLET</b>		Non-Preferred	AL; QL
<b>NIKKI ORAL TABLET</b>		Preferred	AL; QL
norethin ace-eth estrad-fe oral capsule	Gemmily	Preferred	AL; QL
norethin ace-eth estrad-fe oral tablet	Aurovela Fe 1.5/30	Preferred	AL; QL
norethin ace-eth estrad-fe oral tablet chewable	Charlotte 24 Fe	Preferred	AL; QL
norethindrone acet-ethinyl est oral tablet	Aurovela 1.5/30	Preferred	AL; QL
norethin-eth estradiol-fe oral tablet chewable	Kaitlib Fe	Preferred	AL; QL
norgestimate-eth estradiol oral tablet	Estarylla	Preferred	AL; QL
<b>NORTREL 0.5/35 (28) ORAL TABLET</b>		Preferred	AL; QL
<b>NORTREL 1/35 (21) ORAL TABLET</b>		Preferred	AL; QL
<b>NORTREL 1/35 (28) ORAL TABLET</b>		Preferred	AL; QL
<b>NYLIA 1/35 ORAL TABLET</b>		Preferred	AL; QL
<b>OCELLA ORAL TABLET</b>		Preferred	AL; QL
<b>ORSYTHIA ORAL TABLET</b>		Preferred	AL; QL
<b>PHILITH ORAL TABLET</b>		Preferred	AL; QL
<b>PORTIA-28 ORAL TABLET</b>		Preferred	AL; QL
<b>RECLIPSEN ORAL TABLET</b>		Preferred	AL; QL
<b>SAFYRAL ORAL TABLET</b>		Non-Preferred	AL; QL
<b>SPRINTEC 28 ORAL TABLET</b>		Preferred	AL; QL
<b>SRONYX ORAL TABLET</b>		Preferred	AL; QL
<b>SYEDA ORAL TABLET</b>		Preferred	AL; QL
<b>TARINA 24 FE ORAL TABLET</b>		Preferred	AL; QL
<b>TARINA FE 1/20 EQ ORAL TABLET</b>		Preferred	AL; QL
<b>TAYSOFY ORAL CAPSULE</b>		Preferred	AL; QL
<b>TAYTULLA ORAL CAPSULE</b>		Non-Preferred	AL; QL

Drug Name	Reference	Status	Notes
TURQOZ ORAL TABLET		Preferred	AL; QL
TYBLUME ORAL TABLET CHEWABLE		Non-Preferred	AL; QL
TYDEMY ORAL TABLET		Preferred	AL; QL
VESTURA ORAL TABLET		Preferred	AL; QL
VIENVA ORAL TABLET		Preferred	AL; QL
VYFEMLA ORAL TABLET		Preferred	AL; QL
VYLIBRA ORAL TABLET		Preferred	AL; QL
WERA ORAL TABLET		Preferred	AL; QL
WYMZYA FE ORAL TABLET CHEWABLE		Preferred	AL; QL
YASMIN 28 ORAL TABLET		Non-Preferred	AL; QL
YAZ ORAL TABLET		Non-Preferred	AL; QL
ZOVIA 1/35 (28) ORAL TABLET		Preferred	AL; QL
ZUMANDIMINE ORAL TABLET		Preferred	AL; QL
<b>*COMBINATION CONTRACEPTIVES - TRANSDERMAL ***</b>			
norelgestromin-eth estradiol transdermal patch weekly	Xulane	Preferred	AL; QL
TWIRLA TRANSDERMAL PATCH WEEKLY		Non-Preferred	AL; QL
XULANE TRANSDERMAL PATCH WEEKLY		Preferred	AL; QL
ZAFEMY TRANSDERMAL PATCH WEEKLY		Preferred	AL; QL
<b>*COMBINATION CONTRACEPTIVES - VAGINAL ***</b>			
ANNOVERA VAGINAL RING		Non-Preferred	QL
ELURYNG VAGINAL RING		Preferred	AL; QL
ENILLORING VAGINAL RING		Preferred	AL; QL
etonogestrel-ethinyl estradiol vaginal ring	EluRyng	Preferred	AL; QL
HALOETTE VAGINAL RING		Preferred	AL; QL
NUVARING VAGINAL RING		Non-Preferred	AL; QL
<b>*CONTINUOUS CONTRACEPTIVES - ORAL ***</b>			
AMETHYST ORAL TABLET		Preferred	AL; QL
DOLISHALE ORAL TABLET		Preferred	AL; QL

Drug Name	Reference	Status	Notes
levonorgestrel-ethinyl estrad oral tablet	Amethyst	Preferred	AL; QL
<b>*EMERGENCY CONTRACEPTIVES***</b>			
<b>AFTERA ORAL TABLET</b>		Preferred	OTC; QL
<b>AFTERPILL ORAL TABLET</b>		Preferred	OTC; QL
<b>CURAE ORAL TABLET</b>		Preferred	OTC; QL
<b>ECONTRA ONE-STEP ORAL TABLET</b>		Preferred	OTC; QL
<b>ELLA ORAL TABLET</b>		Preferred	QL
<b>HER STYLE ORAL TABLET</b>		Preferred	OTC; QL
levonorgestrel oral tablet	Aftera	Preferred	OTC; QL
<b>MY CHOICE ORAL TABLET</b>		Preferred	OTC; QL
<b>MY WAY ORAL TABLET</b>		Preferred	OTC; QL
<b>NEW DAY ORAL TABLET</b>		Preferred	OTC; QL
<b>OPCICON ONE-STEP ORAL TABLET</b>		Preferred	OTC; QL
<b>OPTION 2 ORAL TABLET</b>		Preferred	OTC; QL
<b>PLAN B ONE-STEP ORAL TABLET</b>		Non-Preferred	OTC; QL
<b>REACT ORAL TABLET</b>		Preferred	OTC; QL
<b>TAKE ACTION ORAL TABLET</b>		Preferred	OTC; QL
<b>*EXTENDED-CYCLE CONTRACEPTIVES - ORAL ***</b>			
<b>ASHLYNA ORAL TABLET</b>		Preferred	AL; QL
<b>CAMRESE LO ORAL TABLET</b>		Preferred	AL; QL
<b>CAMRESE ORAL TABLET</b>		Preferred	AL; QL
<b>DAYSEE ORAL TABLET</b>		Preferred	AL; QL
<b>ICLEVIA ORAL TABLET</b>		Preferred	AL; QL
<b>INTROVALE ORAL TABLET</b>		Preferred	AL; QL
<b>JAIMIESS ORAL TABLET</b>		Preferred	AL; QL
<b>JOLESSA ORAL TABLET</b>		Preferred	AL; QL
levonorgest-eth est & eth est oral tablet	Rivelsa	Preferred	AL; QL
levonorgest-eth estrad 91-day oral tablet	Ashlyna	Preferred	AL; QL
<b>LOJAIMIESS ORAL TABLET</b>		Preferred	AL; QL
<b>RIVELSA ORAL TABLET</b>		Preferred	AL; QL
<b>SETLAKIN ORAL TABLET</b>		Preferred	AL; QL



Drug Name	Reference	Status	Notes
SIMPESSE ORAL TABLET		Preferred	AL; QL
<b>*FOUR PHASE CONTRACEPTIVES - ORAL ***</b>			
NATAZIA ORAL TABLET		Non-Preferred	AL; QL
<b>*PROGESTIN CONTRACEPTIVES - INJECTABLE***</b>			
DEPO-PROVERA INTRAMUSCULAR SUSPENSION		Non-Preferred	AL; QL
DEPO-PROVERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE		Non-Preferred	AL; QL
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE		Non-Preferred	AL; QL
medroxyprogesterone acetate intramuscular suspension	Depo-Provera	Preferred	AL; QL
medroxyprogesterone acetate intramuscular suspension prefilled syringe	Depo-Provera	Preferred	AL; QL
<b>*PROGESTIN CONTRACEPTIVES - ORAL ***</b>			
CAMILA ORAL TABLET		Preferred	AL; QL
DEBLITANE ORAL TABLET		Preferred	AL; QL
EMZAHH ORAL TABLET		Preferred	AL; QL
ERRIN ORAL TABLET		Preferred	AL; QL
HEATHER ORAL TABLET		Preferred	AL; QL
INCASSIA ORAL TABLET		Preferred	AL; QL
JENCYCLA ORAL TABLET		Preferred	AL; QL
LYLEQ ORAL TABLET		Preferred	AL; QL
LYZA ORAL TABLET		Preferred	AL; QL
NORA-BE ORAL TABLET		Preferred	AL; QL
norethindrone oral tablet	Camila	Preferred	AL; QL
NORLYDA ORAL TABLET		Preferred	AL; QL
NORLYROC ORAL TABLET		Preferred	AL; QL
OPILL ORAL TABLET		Preferred	AL; OTC; QL
SHAROBEL ORAL TABLET		Preferred	AL; QL
SLYND ORAL TABLET		Non-Preferred	AL; QL

Drug Name	Reference	Status	Notes
<b>*TRIPHASIC CONTRACEPTIVES</b>			
<b>- ORAL***</b>			
alyacen 7/7/7 oral tablet	Dasetta 7/7/7	Preferred	AL; QL
<b>ARANELLE ORAL TABLET</b>		Preferred	AL; QL
<b>DASETTA 7/7/7 ORAL TABLET</b>		Preferred	AL; QL
<b>ENPRESSE-28 ORAL TABLET</b>		Preferred	AL; QL
<b>LEENA ORAL TABLET</b>		Preferred	AL; QL
<b>LEVONEST ORAL TABLET</b>		Preferred	AL; QL
levonorg-eth estrad triphasic oral tablet	Enpresse-28	Preferred	AL; QL
norethindron-ethinyl estrad-fe oral tablet	Tilia Fe	Preferred	AL; QL
norgestim-eth estrad triphasic oral tablet	Tri Femynor	Preferred	AL; QL
<b>NORTREL 7/7/7 ORAL TABLET</b>		Preferred	AL; QL
<b>NYLIA 7/7/7 ORAL TABLET</b>		Preferred	AL; QL
<b>ORTHO TRI-CYCLEN LO ORAL TABLET</b>		Non-Preferred	AL; QL
<b>PIRMELLA 7/7/7 ORAL TABLET</b>		Preferred	AL; QL
<b>TILIA FE ORAL TABLET</b>		Preferred	AL; QL
<b>TRI FEMYNOR ORAL TABLET</b>		Preferred	AL; QL
<b>TRI-ESTARYLLA ORAL TABLET</b>		Preferred	AL; QL
<b>TRI-LEGEST FE ORAL TABLET</b>		Preferred	AL; QL
<b>TRI-LINYAH ORAL TABLET</b>		Preferred	AL; QL
<b>TRI-LO-ESTARYLLA ORAL TABLET</b>		Preferred	AL; QL
<b>TRI-LO-MARZIA ORAL TABLET</b>		Preferred	AL; QL
<b>TRI-LO-MILI ORAL TABLET</b>		Preferred	AL; QL
<b>TRI-LO-SPRINTEC ORAL TABLET</b>		Preferred	AL; QL
<b>TRI-MILI ORAL TABLET</b>		Preferred	AL; QL
<b>TRI-SPRINTEC ORAL TABLET</b>		Preferred	AL; QL
<b>TRIVORA (28) ORAL TABLET</b>		Preferred	AL; QL
<b>TRI-VYLIBRA LO ORAL TABLET</b>		Preferred	AL; QL
<b>TRI-VYLIBRA ORAL TABLET</b>		Preferred	AL; QL
<b>VELIVET ORAL TABLET</b>		Preferred	AL; QL
<b>*CORTICOSTEROIDS*</b>			
<b>*GLUCOCORTICOSTEROIDS***</b>			
<b>AGAMREE ORAL SUSPENSION</b>		Non-Preferred	PA; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>ALKINDI SPRINKLE ORAL CAPSULE SPRINKLE</b>		Non-Preferred	PA
budesonide er oral tablet extended release 24 hour	Uceris	Non-Preferred	PA; QL
budesonide oral capsule delayed release particles		Preferred	QL
<b>CORTEF ORAL TABLET</b>		Non-Preferred	
cortisone acetate oral tablet		Non-Preferred	PA; QL
deflazacort oral suspension	Emflaza	Non-Preferred	PA
deflazacort oral tablet	Emflaza	Non-Preferred	PA
<b>DEPO-MEDROL INJECTION SUSPENSION</b>		Non-Preferred	
dexabliss oral tablet therapy pack		Non-Preferred	
<b>DEXAMETHASONE INTENSOL ORAL CONCENTRATE</b>		Non-Preferred	
dexamethasone oral elixir		Preferred	
dexamethasone oral solution		Preferred	
dexamethasone oral tablet		Preferred	
dexamethasone oral tablet therapy pack	HiDex 6-Day	Preferred	
dexamethasone sod phos +rfid injection solution prefilled syringe		Preferred	
dexamethasone sod phosphate pf injection solution		Preferred	
dexamethasone sod phosphate pf injection solution prefilled syringe		Non-Preferred	
dexamethasone sodium phosphate injection solution		Preferred	
dexamethasone sodium phosphate injection solution prefilled syringe		Preferred	
<b>EMFLAZA ORAL SUSPENSION</b>		Non-Preferred	PA
<b>EMFLAZA ORAL TABLET</b>		Non-Preferred	PA
<b>EOHILIA ORAL SUSPENSION</b>		Non-Preferred	PA; QL
<b>HEMADY ORAL TABLET</b>		Non-Preferred	PA; QL
<b>HEXATRIONE INTRA-ARTICULAR SUSPENSION</b>		Non-Preferred	
<b>HIDEX 6-DAY ORAL TABLET THERAPY PACK</b>		Preferred	
hydrocortisone oral tablet	Cortef	Preferred	

Drug Name	Reference	Status	Notes
<b>KENALOG-10 INJECTION SUSPENSION</b>		Non-Preferred	
<b>KENALOG-40 INJECTION SUSPENSION</b>		Non-Preferred	
<b>KENALOG-80 INJECTION SUSPENSION</b>		Non-Preferred	
<b>MEDROL ORAL TABLET</b>		Non-Preferred	
<b>MEDROL ORAL TABLET THERAPY PACK</b>		Non-Preferred	
methylprednisolone acetate injection suspension	Depo-Medrol	Preferred	
methylprednisolone oral tablet	Medrol	Preferred	
methylprednisolone oral tablet therapy pack	Medrol	Preferred	
methylprednisolone sodium succ injection solution reconstituted	SOLU-Medrol	Preferred	
<b>ORAPRED ODT ORAL TABLET DISPERSIBLE 10 MG, 30 MG</b>		Non-Preferred	QL
<b>ORAPRED ODT ORAL TABLET DISPERSIBLE 15 MG</b>		Non-Preferred	DO; QL
<b>PEDIAPRED ORAL SOLUTION</b>		Non-Preferred	
prednisolone oral solution		Preferred	
prednisolone oral tablet		Non-Preferred	PA; QL
prednisolone sodium phosphate oral solution	Pediapred	Preferred	
prednisolone sodium phosphate oral tablet dispersible 10 mg, 30 mg	Orapred ODT	Preferred	QL
prednisolone sodium phosphate oral tablet dispersible 15 mg	Orapred ODT	Preferred	DO; QL
<b>PREDNISONE INTENSOL ORAL CONCENTRATE</b>		Preferred	
prednisone oral solution		Preferred	
prednisone oral tablet		Preferred	
prednisone oral tablet therapy pack		Preferred	
<b>RAYOS ORAL TABLET DELAYED RELEASE</b>		Non-Preferred	PA
<b>SOLU-MEDROL (PF) INJECTION SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>SOLU-MEDROL INJECTION SOLUTION RECONSTITUTED</b>		Non-Preferred	

Drug Name	Reference	Status	Notes
TAPERDEX 12-DAY ORAL TABLET THERAPY PACK		Preferred	
TAPERDEX 6-DAY ORAL TABLET THERAPY PACK		Preferred	
TAPERDEX 7-DAY ORAL TABLET THERAPY PACK		Preferred	
TARPEYO ORAL CAPSULE DELAYED RELEASE		Non-Preferred	PA; QL
triamcinolone acetonide injection suspension	Kenalog-40	Preferred	
UCERIS ORAL TABLET EXTENDED RELEASE 24 HOUR		Non-Preferred	PA; QL
ZILRETTA INTRA-ARTICULAR SUSPENSION RECONSTITUTED ER		Non-Preferred	PA; QL
<b>*MINERALOCORTICOIDS***</b>			
fludrocortisone acetate oral tablet		Preferred	
<b>*STEROID COMBINATIONS***</b>			
betamethasone sod phos & acet injection suspension	Celestone Soluspan	Preferred	
BLT-25 INJECTION KIT		Non-Preferred	
CELESTONE SOLUSPAN INJECTION SUSPENSION		Non-Preferred	
<b>*COUGH/COLD/ALLERGY*</b>			
<b>*ANALGESIC-EXPECTORANT***</b>			
COMTREX DEEP CHEST COLD ORAL TABLET		Non-Preferred	AL; OTC
MUCINEX COLD & FLU ORAL CAPSULE		Non-Preferred	AL; OTC
<b>*ANTIHISTAMINE-ANALGESICS***</b>			
ACTIDOGESIC-DF ORAL TABLET		Non-Preferred	AL; OTC
CORICIDIN HBP COLD/FLU ORAL TABLET		Non-Preferred	AL; OTC
DOLOGEN ORAL TABLET		Non-Preferred	AL; OTC
DOLOGESIC ORAL LIQUID		Non-Preferred	AL; OTC
DOLOGESIC ORAL TABLET		Non-Preferred	AL; OTC
dologesic-df oral tablet	Actidogesic-DF	Non-Preferred	AL; OTC
G-DOLOGEN ORAL TABLET		Non-Preferred	AL; OTC
PERCOGESIC ORAL TABLET		Non-Preferred	AL; OTC

Drug Name	Reference	Status	Notes
severe allergy oral tablet	Percogesic Extra Strength	Preferred	AL; OTC
<b>THERAFLU SEVERE COLD NIGHTTIME ORAL PACKET</b>		Non-Preferred	AL; OTC
<b>*ANTITUSSIVE - NONNARCOTIC***</b>			
benzonatate oral capsule		Preferred	AL
daytime cough oral liquid	Vicks DayQuil Cough	Preferred	AL; OTC
<b>DELSYM COUGH CHILDRENS ORAL SUSPENSION EXTENDED RELEASE</b>		Non-Preferred	AL; OTC
<b>DELSYM ORAL SUSPENSION EXTENDED RELEASE</b>		Non-Preferred	AL; OTC
<b>DELSYM ORAL TABLET</b>		Non-Preferred	AL; OTC
dextromethorphan hbr oral capsule	Robitussin Long-Act CoughGels	Non-Preferred	AL; OTC
dextromethorphan polistirex er oral suspension extended release	Delsym	Preferred	AL; OTC
<b>ELIXSURE COUGH ORAL GEL</b>		Non-Preferred	AL; OTC
father johns medicine oral syrup		Non-Preferred	AL; OTC
<b>GILTUSS HONEY DM CHILDRENS ORAL LIQUID</b>		Preferred	AL; OTC
<b>GILTUSS HONEY DM ORAL LIQUID</b>		Preferred	AL; OTC
<b>HOLD MOUTH/THROAT LOZENGE</b>		Non-Preferred	AL; OTC
<b>MUCINEX CHILDRENS COUGH ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>MUCINEX INSTASOOTHE THROAT/CGH MOUTH/THROAT LOZENGE</b>		Non-Preferred	AL; OTC
<b>PEDIACARE CHILDRENS LONG-ACT ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>ROBITUSSIN CHILDRENS COUGH LA ORAL SYRUP</b>		Non-Preferred	AL; OTC
<b>ROBITUSSIN LONG-ACT COUGHGELS ORAL CAPSULE</b>		Non-Preferred	AL; OTC
<b>SCOT-TUSSIN DIABETES ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>TRIAMINIC LONG ACTING COUGH ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>TRIAMINIC LONG ACTING COUGH ORAL STRIP</b>		Non-Preferred	AL; OTC

Drug Name	Reference	Status	Notes
tussin cough oral capsule	Robitussin Long-Act CoughGels	Non-Preferred	AL; OTC
<b>VICKS DAYQUIL COUGH ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>*ANTITUSSIVE - OPIOID***</b>			
<b>HYCODAN ORAL SOLUTION</b>		Non-Preferred	AL
<b>HYCODAN ORAL TABLET</b>		Non-Preferred	AL
hydrocodone bit-homatrop mbr oral solution	Hycodan	Preferred	AL
hydrocodone bit-homatrop mbr oral tablet	Hycodan	Preferred	AL
hydromet oral solution	Hycodan	Preferred	AL
<b>*ANTITUSSIVE-ANTIHISTAMINE-ANALGESIC***</b>			
all-nite cold & flu nighttime oral liquid	Coricidin HBP Nighttime Cold	Non-Preferred	AL; OTC
childrens cough/runny nose oral suspension	Tylenol Childrens Cld+Cgh	Non-Preferred	AL; OTC
cold & flu nighttime oral liquid	Coricidin HBP Nighttime Cold	Non-Preferred	AL; OTC
cold & flu nighttime relief oral capsule	Vicks NyQuil Cold & Flu	Non-Preferred	AL; OTC
cold & flu relief nighttime oral capsule	Vicks NyQuil Cold & Flu	Non-Preferred	AL; OTC
cold & flu relief nighttime oral liquid	Coricidin HBP Nighttime Cold	Non-Preferred	AL; OTC
cold/flu relief nighttime oral liquid	Coricidin HBP Nighttime Cold	Non-Preferred	AL; OTC
<b>CORICIDIN HBP MAX STRENGTH FLU ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>CORICIDIN HBP NIGHT CLD/FLU MS ORAL LIQUID</b>		Non-Preferred	OTC
<b>CORICIDIN HBP NIGHTTIME COLD ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>CORICIDIN HBP ORAL TABLET</b>		Non-Preferred	AL; OTC
cough & sore throat nighttime oral liquid	Coricidin HBP Nighttime Cold	Non-Preferred	AL; OTC
<b>DELSYM NIGHTTIME COUGH MAX STR ORAL SOLUTION</b>		Non-Preferred	AL; OTC
<b>DIABETIC TUSSIN COLD &amp; FLU ORAL LIQUID</b>		Non-Preferred	AL; OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>DIABETIC TUSSIN COLD/FLU ORAL CAPSULE</b>		Non-Preferred	AL; OTC
flu hbp oral tablet	Coricidin HBP	Non-Preferred	AL; OTC
<b>MUCINEX NIGHT COLD/FLU MAX STR ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>MUCINEX NIGHTSHIFT COLD/FLU ORAL SOLUTION</b>		Non-Preferred	AL; OTC
night time cold/flu relief oral capsule	Vicks NyQuil Cold & Flu	Non-Preferred	AL; OTC
nighttime cold medicine oral liquid	Coricidin HBP Nighttime Cold	Non-Preferred	AL; OTC
nighttime cold/flu relief oral capsule	Vicks NyQuil Cold & Flu	Non-Preferred	AL; OTC
nighttime cold/flu relief oral liquid	Coricidin HBP Nighttime Cold	Non-Preferred	AL; OTC
<b>NINJACOF-A ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>NYQUIL HBP COLD &amp; FLU ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>PEDIACARE COUGH/RUNNY NOSE ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>TRIAMINIC FLU COUGH &amp; FEVER ORAL SYRUP</b>		Non-Preferred	AL; OTC
<b>TRIAMINIC FLU/COUGH/FEVER ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>TYLENOL CHILDRENS CLD+CGH ORAL SUSPENSION</b>		Non-Preferred	AL; OTC
<b>VICKS NYQUIL COLD &amp; FLU NIGHT ORAL CAPSULE</b>		Non-Preferred	AL; OTC
<b>VICKS NYQUIL COLD &amp; FLU NIGHT ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>VICKS NYQUIL COLD &amp; FLU ORAL CAPSULE</b>		Non-Preferred	AL; OTC
<b>VICKS NYQUIL COLD &amp; FLU ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>*ANTITUSSIVE-DECONGESTANT-ANALGESIC***</b>			
<b>ALKA-SELTZER PLS SINUS &amp; COUGH ORAL CAPSULE</b>		Non-Preferred	AL; OTC
<b>ALKA-SELTZER PLUS DAY COLD/FLU ORAL CAPSULE</b>		Non-Preferred	AL; OTC
cold & flu relief daytime oral capsule	Alka-Seltzer Pls Sinus & Cough	Non-Preferred	AL; OTC



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
cold multi-symptom daytime oral tablet	Comtrex Cold & Cough Max St	Non-Preferred	AL; OTC
cold/flu daytime relief oral capsule	Alka-Seltzer Pls Sinus & Cough	Non-Preferred	AL; OTC
<b>COMTREX COLD &amp; COUGH MAX ST ORAL TABLET</b>		Non-Preferred	AL; OTC
daytime cold & flu relief oral liquid	Theraflu ExpressMax	Non-Preferred	AL; OTC
daytime cold/flu relief oral capsule	Alka-Seltzer Pls Sinus & Cough	Non-Preferred	AL; OTC
daytime cold/flu relief oral liquid	Theraflu ExpressMax	Non-Preferred	AL; OTC
day-time cold/flu relief oral liquid	Theraflu ExpressMax	Non-Preferred	AL; OTC
day-time pe cold/flu relief oral capsule	Alka-Seltzer Pls Sinus & Cough	Non-Preferred	AL; OTC
flu/severe cold & cough day oral packet	Wal-Flu Severe Cold & Cough	Non-Preferred	AL; OTC
herbiomed fast acting oral liquid		Non-Preferred	AL; OTC
<b>MAPAP COLD FORMULA MULTI-SYMPT ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>MUCINEX FAST-MAX CONG HEADACHE ORAL CAPSULE</b>		Non-Preferred	AL; OTC
<b>MUCINEX SINUS-MAX SEV CONG/PN ORAL CAPSULE</b>		Non-Preferred	AL; OTC
multi symptom flu/severe cold oral packet	Theraflu Severe Cold	Non-Preferred	AL; OTC
<b>THERAFLU EXPRESSMAX ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>THERAFLU EXPRESSMAX SEV CLD/CG ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>THERAFLU POWERPODS SEVERE COLD ORAL</b>		Non-Preferred	AL; OTC
<b>THERAFLU SEVERE COLD DAYTIME ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>THERAFLU SEVERE COLD ORAL PACKET</b>		Non-Preferred	AL; OTC
<b>THERAFLU SEVERE COLD/CGH DAY ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>THERAFLU-D ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>TYLENOL COLD/FLU DAY ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>VICKS DAYQUIL COLD &amp; FLU ORAL CAPSULE</b>		Non-Preferred	AL; OTC

Drug Name	Reference	Status	Notes
VICKS DAYQUIL COLD & FLU ORAL LIQUID		Non-Preferred	AL; OTC
<b>*ANTITUSSIVE-EXPECTORANT - ANTIHIST-ANALGESIC***</b>			
CORICIDIN HBP DAY/NIGHT COLD ORAL		Non-Preferred	AL; OTC
MUCINEX FAST-MAX/NIGHTSHIFT ORAL LIQUID THERAPY PACK		Non-Preferred	AL; OTC
<b>*ANTITUSSIVE-EXPECTORANT - DECONGEST-ANALGESIC***</b>			
ALKA-SELTZER PLUS SEV COLD/FLU ORAL PACKET		Non-Preferred	OTC
cold & flu oral capsule	Mucinex Fast-Max Cld Flu Thrt	Non-Preferred	AL; OTC
cold & flu severe daytime oral liquid	DayQuil Severe + VapoCool	Non-Preferred	AL; OTC
cough/cold/sore throat child oral liquid	Mucinex Childrens Freefrom	Non-Preferred	AL; OTC
DAYQUIL SEVERE + VAPOCOOL ORAL LIQUID		Non-Preferred	AL; OTC
DURAFLU ORAL TABLET		Non-Preferred	AL; OTC
head congestion + flu sev pe oral tablet	Sudafed PE Head Congestion	Non-Preferred	AL; OTC
herbiomed severe cold & flu oral liquid	Mucinex Childrens Freefrom	Non-Preferred	AL; OTC
MUCINEX CHILDRENS FREEFROM ORAL LIQUID		Non-Preferred	AL; OTC
MUCINEX FAST-MAX CLD FLU THRT ORAL CAPSULE		Non-Preferred	AL; OTC
MUCINEX FAST-MAX COLD FLU ORAL LIQUID		Non-Preferred	AL; OTC
MUCINEX FAST-MAX COLD/FLU MS ORAL CAPSULE		Non-Preferred	AL; OTC
MUCINEX FAST-MAX COLD/FLU ORAL LIQUID		Non-Preferred	AL; OTC
MUCINEX FAST-MAX KICKSTART ORAL LIQUID		Non-Preferred	AL; OTC
MUCINEX SINUS-MAX PRESS/PN/CGH ORAL CAPSULE		Non-Preferred	AL; OTC
mucus relief cold flu throat oral capsule	Mucinex Fast-Max Cld Flu Thrt	Non-Preferred	AL; OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
mucus relief cold flu throat oral liquid	Mucinex Childrens Freefrom	Non-Preferred	AL; OTC
mucus relief plus oral tablet	Theraflu ExpressMax Sev ClD/Fl	Preferred	AL; OTC
mucus relief severe cong/cold oral tablet	Theraflu ExpressMax Sev ClD/Fl	Preferred	AL; OTC
<b>ROBITUSSIN SEVERE MULTI-SYMP ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>ROMPE PECHO MAX ORAL LIQUID</b>		Non-Preferred	AL; OTC
severe cold & flu oral tablet	Theraflu ExpressMax Sev ClD/Fl	Preferred	AL; OTC
<b>SUDAFED PE HEAD CONGESTION ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>THERAFLU EXPRESSMAX SEV CLD/FL ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>THERAFLU EXPRESSMAX SEV CLD/FL ORAL TABLET</b>		Preferred	AL; OTC
tussin cf severe multi-symptom oral liquid	Mucinex Childrens Freefrom	Non-Preferred	AL; OTC
<b>TYLENOL COLD/FLU SEVERE ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>TYLENOL WARMING COUGH/CONGEST ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>VICKS DAYQUIL SEVERE COLD/FLU ORAL CAPSULE</b>		Non-Preferred	AL; OTC
<b>VICKS DAYQUIL SEVERE COLD/FLU ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>VICKS DAYQUIL SEVERE COLD/FLU ORAL TABLET</b>		Preferred	AL; OTC
<b>*ANTITUSSIVE-EXPECTORANT - DECONGEST-ANTI HIST***</b>			
<b>ROBITUSSIN DAY/NIGHT VALUE PAK ORAL</b>		Non-Preferred	AL; OTC
<b>*ANTITUSSIVE-EXPECTORANT - DECONGEST-ANTI HIST- ANALG***</b>			
<b>ALKA-SELTZER PLUS COLD &amp; FLU ORAL THERAPY PACK</b>		Non-Preferred	OTC
<b>DELSYM CHILDRENS DAY NIGHT ORAL</b>		Non-Preferred	AL; OTC
<b>MUCINEX CHILD MS DAY-NIGHT CLD ORAL</b>		Non-Preferred	AL; OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>MUCINEX CNG/CGH/COLD/FLU DY/NT ORAL LIQUID THERAPY PACK</b>		Non-Preferred	AL; OTC
<b>MUCINEX FAST-MAX CLD/FLU DY/NT ORAL CAPSULE THERAPY PACK</b>		Non-Preferred	AL; OTC
<b>MUCINEX FAST-MAX CLD/FLU DY/NT ORAL TABLET THERAPY PACK</b>		Non-Preferred	AL; OTC
<b>MUCINEX FAST-MAX CNG/CGH/CD/FL ORAL TABLET THERAPY PACK</b>		Non-Preferred	AL; OTC
<b>MUCINEX FAST-MAX DAY/NIGHT M/S ORAL</b>		Non-Preferred	AL; OTC
<b>MUCINEX FAST-MAX DAY/NIGHT MS ORAL LIQUID THERAPY PACK</b>		Non-Preferred	AL; OTC
<b>MUCINEX FAST-MAX DAY/NIGHT MS ORAL TABLET THERAPY PACK</b>		Non-Preferred	AL; OTC
<b>MUCINEX FREEFROM DAY-NIGHT ORAL LIQUID THERAPY PACK</b>		Non-Preferred	AL; OTC
<b>MUCINEX SINUS-MAX DAY/NIGHT ORAL CAPSULE THERAPY PACK</b>		Non-Preferred	AL; OTC
<b>MUCINEX SINUS-MAX/NIGHTSHIFT ORAL LIQUID THERAPY PACK</b>		Non-Preferred	AL; OTC
<b>MUCINEX SINUS-MAX/NIGHTSHIFT ORAL TABLET THERAPY PACK</b>		Non-Preferred	AL; OTC
multi-symptom cold day/night oral	Mucinex Child MS Day-Night Cld	Non-Preferred	AL; OTC
<b>ROBITUSSIN PK COLD DAY/NGHT DM ORAL</b>		Non-Preferred	AL; OTC
<b>ROBITUSSIN PK COLD DAY/NGHT MS ORAL</b>		Non-Preferred	AL; OTC
<b>ROBITUSSIN SEVERE DAY/NIGHT ORAL</b>		Non-Preferred	AL; OTC
severe cold & flu day/night oral liquid therapy pack	Vicks DayQuil/NyQuil Severe	Non-Preferred	AL; OTC
<b>TYLENOL COLD/FLU SEVERE ORAL TABLET THERAPY PACK</b>		Non-Preferred	AL; OTC
<b>VICKS DAYQUIL/NYQUIL SEVERE ORAL LIQUID THERAPY PACK</b>		Non-Preferred	AL; OTC
<b>VICKS DAYQUIL/NYQUIL SEVERE ORAL TABLET THERAPY PACK</b>		Non-Preferred	AL; OTC

Drug Name	Reference	Status	Notes
<b>*ANTITUSSIVE-EXPECTORANT***</b>			
biocotron oral liquid	Diabetic Tussin DM	Preferred	AL; OTC
<b>CORICIDIN HBP CONGESTION/COUGH ORAL CAPSULE</b>		Preferred	AL; OTC
cough & chest congestion dm oral syrup		Non-Preferred	OTC
dextromethorphan-guaifenesin oral liquid	Diabetic Tussin DM	Preferred	AL; OTC
dextromethorphan-guaifenesin oral syrup	Robafen DM Cough Clear	Preferred	AL; OTC
dextromethorphan-guaifenesin oral tablet	Fenesin DM IR	Preferred	AL; OTC
<b>DIABETIC TUSSIN DM ORAL LIQUID</b>		Preferred	AL; OTC
guaiaatusin ac oral syrup		Preferred	AL; OTC; QL
guaifenesin-codeine oral solution		Preferred	AL; OTC; QL
<b>G-ZYNCOF ORAL SYRUP</b>		Non-Preferred	AL; OTC
intense cough reliever oral liquid		Non-Preferred	AL; OTC
medi-tussin dm double strength oral liquid		Preferred	AL; OTC
<b>MUCINEX CHILDRENS ORAL PACKET</b>		Non-Preferred	AL; OTC
<b>MUCINEX DM MAXIMUM STRENGTH ORAL TABLET EXTENDED RELEASE 12 HOUR</b>		Non-Preferred	AL; OTC
<b>MUCINEX DM ORAL TABLET EXTENDED RELEASE 12 HOUR</b>		Non-Preferred	AL; OTC
<b>MUCINEX FAST-MAX SEVERE CON/CG ORAL CAPSULE</b>		Preferred	AL; OTC
<b>MUCINEX FAST-MAX SEVERE CON/CG ORAL LIQUID</b>		Preferred	AL; OTC
mucus dm oral tablet extended release 12 hour	Mucinex DM	Preferred	AL; OTC
mucus relief dm oral tablet extended release 12 hour	Mucinex DM	Preferred	AL; OTC
mucus-dm oral tablet extended release 12 hour	Mucinex DM	Preferred	AL; OTC
<b>PEGGEN DMX ORAL LIQUID</b>		Non-Preferred	AL; OTC

Drug Name	Reference	Status	Notes
<b>ROBITUSSIN COUGH+CHEST CONG DM ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>ROBITUSSIN HONEY CGH/CHEST DM ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>SAFETUSSIN DM COUGH/CHEST CONG ORAL LIQUID</b>		Preferred	AL; OTC
<b>SCOT-TUSSIN SENIOR ORAL LIQUID</b>		Non-Preferred	AL; OTC
supress dm pediatric oral liquid		Non-Preferred	AL; OTC
tussin dm cough & chest oral liquid	Robitussin Cough+Chest Cong DM	Preferred	AL; OTC
<b>VANACOF XP ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>VICKS DAYQUIL MUCUS CONTROL DM ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>ZYNCOF ORAL SYRUP</b>		Non-Preferred	AL; OTC
<b>*ANTITUSSIVE-EXPECTORANTS-ANTIHISTAMINE***</b>			
<b>ROBITUSSIN DM MAX DAY/NIGHT ORAL LIQUID THERAPY PACK</b>		Non-Preferred	AL; OTC
<b>*ANTITUSSIVE-EXPECTORANTS-DECONGESTANT***</b>			
actidom dmx oral liquid		Non-Preferred	AL; OTC
<b>ACTINEL DM ORAL LIQUID</b>		Non-Preferred	AL; OTC
aquanaz oral tablet		Non-Preferred	AL; OTC
biodesp dm oral syrup		Non-Preferred	AL; OTC
biogtuss oral liquid	Giltuss Cough & Cold	Preferred	AL; OTC
bionel oral liquid	Tusnel	Non-Preferred	AL; OTC
capmist dm oral tablet		Non-Preferred	AL; OTC
coditussin dac oral liquid		Non-Preferred	AL; OTC
deconex dmx oral tablet		Non-Preferred	AL; OTC
<b>DESGEN DM ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>DESGEN PEDIATRIC ORAL LIQUID</b>		Preferred	AL; OTC
despec eda oral liquid	Desgen Pediatric	Preferred	AL; OTC
dometuss-dmx oral liquid		Non-Preferred	AL; OTC
<b>GILTUSS COUGH &amp; COLD CHILDRENS ORAL LIQUID</b>		Preferred	AL; OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>GILTUSS COUGH &amp; COLD ORAL LIQUID</b>		Preferred	AL; OTC
<b>GILTUSS COUGH &amp; COLD ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>GILTUSS TR ORAL TABLET</b>		Non-Preferred	AL; OTC
g-supress dx pediatric oral liquid	Desgen Pediatric	Preferred	AL; OTC
<b>G-TRON PED ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>G-TRON PEDIATRIC DROPS ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>G-TUSICOF ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>MUCINEX CHILDRENS FREEFROM ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>MUCINEX COLD CHILDRENS ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>MUCINEX COUGH &amp; CONGEST CHILD ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>MUCINEX FAST-MAX CONGEST COUGH ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>MUCINEX FAST-MAX CONGEST COUGH ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>NIVANEX DMX ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>POLY-VENT DM ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>ROBITUSSIN CHILD COUGH/COLD CF ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>ROBITUSSIN PEAK COLD MULTI-SYM ORAL LIQUID</b>		Non-Preferred	AL; OTC
supress-dx pediatric oral liquid	Desgen Pediatric	Preferred	AL; OTC
<b>TUSICOF ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>TUSNEL C ORAL SYRUP</b>		Preferred	AL; OTC
<b>TUSNEL DM ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>TUSNEL ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>TUSNEL ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>TUSNEL PEDIATRIC ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>TUSNEL-DM PEDIATRIC ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>TUSSI-PRES PEDIATRIC ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>TUSSLIN ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>TUSSLIN PEDIATRIC ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>VANACOF DM ORAL LIQUID</b>		Non-Preferred	AL; OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>VANATAB DM ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>*AROMATIC INHALANTS***</b>			
baby chest rub external ointment	Vicks BabyRub	Non-Preferred	OTC
chest rub external ointment	Delsym Vapor Roll-on	Non-Preferred	OTC
chest rub hands-free medicated external ointment	Delsym Vapor Roll-on	Non-Preferred	OTC
decongestant vapor inhalation inhaler	Vicks VapoInhaler	Non-Preferred	AL; OTC
<b>DELSYM VAPOR ROLL-ON EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>ICY HOT NO-MESS VAPOR GEL EXTERNAL GEL</b>		Non-Preferred	OTC
<b>ICY HOT NO-MESS VAPOR GEL KIDS EXTERNAL GEL</b>		Non-Preferred	OTC
<b>MEDPURA VAPORX BALM EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>VAPOR PATCH EXTERNAL PATCH</b>		Non-Preferred	OTC
vapor steam inhalation liquid	Vicks Vapo Steam	Non-Preferred	AL; OTC
vaporizing chest rub external ointment	Delsym Vapor Roll-on	Non-Preferred	OTC
vaporizing steam inhalation liquid	Vicks Vapo Steam	Non-Preferred	AL; OTC
<b>VICKS BABYRUB EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>VICKS VAPO STEAM INHALATION LIQUID</b>		Non-Preferred	AL; OTC
<b>VICKS VAPOINHALER INHALATION INHALER</b>		Non-Preferred	AL; OTC
<b>VICKS VAPORUB CHILDRENS EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>VICKS VAPORUB EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>*DECONGESTANT &amp; ANTIHISTAMINE***</b>			
<b>ACTICON ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>ALAHIST D ORAL TABLET</b>		Non-Preferred	AL; OTC
alahist pe oral tablet		Non-Preferred	AL; OTC
<b>ALLEGRA-D ALLERGY &amp; CONGESTION ORAL TABLET EXTENDED RELEASE 12 HOUR</b>		Non-Preferred	PA; AL; OTC; QL
<b>ALLEGRA-D ALLERGY &amp; CONGESTION ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; AL; OTC; QL



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>APRODINE ORAL TABLET</b>		Preferred	AL; OTC
<b>BENADRYL ALLERGY CHILDRENS ORAL SOLUTION</b>		Non-Preferred	AL; OTC; QL
<b>BENADRYL ALLERGY CON ULTRATABS ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
cetirizine-pseudoephedrine er oral tablet extended release 12 hour	ZyrTEC-D Allergy & Congestion	Preferred	AL; OTC; QL
<b>CLARINEX-D 12 HOUR ORAL TABLET EXTENDED RELEASE 12 HOUR</b>		Non-Preferred	PA; AL; QL
<b>CLARITIN-D 12 HOUR ORAL TABLET EXTENDED RELEASE 12 HOUR</b>		Non-Preferred	PA; AL; OTC; QL
<b>CLARITIN-D 24 HOUR ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; AL; OTC; QL
cold & allergy childrens oral liquid	Dimetapp Children Cold/Allergy	Non-Preferred	AL; OTC
<b>CONEX COLD/ALLERGY ORAL SOLUTION</b>		Non-Preferred	AL; OTC
<b>CONEX COLD/ALLERGY ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>CONEX COLD/ALLERGY PEDIATRIC ORAL SOLUTION</b>		Non-Preferred	AL; OTC
<b>DIMETAPP CHILDREN COLD/ALLERGY ORAL LIQUID</b>		Non-Preferred	AL; OTC
dometuss-da/children oral liquid		Non-Preferred	AL; OTC
<b>ED A-HIST ORAL LIQUID</b>		Non-Preferred	AL; OTC
fexofenadine-pseudoephed er oral tablet extended release 12 hour	Allegra-D Allergy & Congestion	Preferred	AL; OTC; QL
fexofenadine-pseudoephed er oral tablet extended release 24 hour	Allegra-D Allergy & Congestion	Preferred	OTC; QL
<b>GILTUSS ALLERGY &amp; SINUS ORAL TABLET</b>		Non-Preferred	AL; OTC
glen pe oral liquid		Non-Preferred	AL; OTC
glenmax peb oral liquid		Non-Preferred	AL; OTC
<b>KINDERMED NIGHT COLD &amp; CGH KID ORAL SYRUP</b>		Non-Preferred	AL; OTC
<b>LOHIST-D ORAL LIQUID</b>		Preferred	AL; OTC
loratadine-d 12hr oral tablet extended release 12 hour	Claritin-D 12 Hour	Preferred	AL; OTC; QL

Drug Name	Reference	Status	Notes
loratadine-d 24hr oral tablet extended release 24 hour	Claritin-D 24 Hour	Preferred	AL; OTC; QL
<b>LORTUSS LQ ORAL LIQUID</b>		Non-Preferred	AL; OTC
maxifed tr oral tablet		Non-Preferred	AL; OTC
maxi-tuss pe oral liquid		Non-Preferred	AL; OTC
maxi-tuss tr oral liquid		Non-Preferred	AL; OTC
<b>NASOPEN PE ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>PHENAGIL ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>POLY HIST FORTE ORAL TABLET</b>		Non-Preferred	AL; OTC
promethazine vc oral syrup		Non-Preferred	AL
promethazine-phenylephrine oral syrup		Non-Preferred	AL
ru-hist d oral tablet		Non-Preferred	AL; OTC
rymed oral tablet		Non-Preferred	AL; OTC
stahist ad oral tablet		Non-Preferred	AL; OTC
<b>STAHIST ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>SUDAFED PE SINUS CONG DAY/NGHT ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>ZYRTEC-D ALLERGY &amp; CONGESTION ORAL TABLET EXTENDED RELEASE 12 HOUR</b>		Non-Preferred	PA; AL; OTC; QL
<b>ZYRTEC-D ALLERGY &amp; SINUS ORAL TABLET EXTENDED RELEASE 12 HOUR</b>		Non-Preferred	PA; AL; OTC; QL
<b>*DECONGESTANT W/ EXPECTORANT***</b>			
altarussin-pe oral syrup		Preferred	AL; OTC
<b>DECONEX IR ORAL TABLET</b>		Non-Preferred	AL; OTC
ed bron gp oral liquid		Non-Preferred	AL; OTC
gcon ir oral tablet	Deconex IR	Non-Preferred	AL; OTC
<b>GILPHEX TR ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>GILTUSS SINUS &amp; CONGESTION ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>MAXIFED ORAL TABLET</b>		Non-Preferred	AL; OTC
maxi-tuss pe jr oral liquid	Triaminic Chest/Nasal Congest	Non-Preferred	AL; OTC
maxi-tuss pe max oral liquid		Non-Preferred	AL; OTC
<b>MUCINEX D MAX STRENGTH ORAL TABLET EXTENDED RELEASE 12 HOUR</b>		Non-Preferred	AL; OTC

Drug Name	Reference	Status	Notes
<b>MUCINEX D ORAL TABLET EXTENDED RELEASE 12 HOUR</b>		Non-Preferred	AL; OTC
<b>MUCINEX STUFFY NOSE &amp; CHEST ORAL LIQUID</b>		Non-Preferred	AL; OTC
mucus d oral tablet extended release 12 hour	Mucinex D Max Strength	Non-Preferred	AL; OTC
mucus relief d oral tablet extended release 12 hour	Mucinex D Max Strength	Non-Preferred	AL; OTC
<b>POLY-VENT IR ORAL TABLET</b>		Non-Preferred	AL; OTC
pseudoephedrine-guaifenesin er oral tablet extended release 12 hour	Mucinex D Max Strength	Non-Preferred	AL; OTC
rydex g oral tablet		Non-Preferred	AL; OTC
<b>SUPRESS-PE PEDIATRIC ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>TRIAMINIC CHEST/NASAL CONGEST ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>TUSNEL PEDIATRIC ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>*DECONGESTANT-ANALGESIC***</b>			
<b>ADVIL COLD &amp; SINUS LIQUI-GELS ORAL CAPSULE</b>		Non-Preferred	AL; OTC
<b>ADVIL COLD/SINUS ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>ADVIL SINUS CONGESTION &amp; PAIN ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>ALEVE-D SINUS &amp; COLD ORAL TABLET EXTENDED RELEASE 12 HOUR</b>		Non-Preferred	AL; OTC
<b>ALEVE-D SINUS &amp; HEADACHE ORAL TABLET EXTENDED RELEASE 12 HOUR</b>		Non-Preferred	AL; OTC
<b>ALKA-SELTZER PLUS SINUS ORAL TABLET EFFERVESCENT</b>		Non-Preferred	AL; OTC
all day sinus/cold d oral tablet extended release 12 hour	Aleve-D Sinus & Cold	Non-Preferred	AL; OTC
cold & sinus oral tablet	Advil Cold/Sinus	Non-Preferred	AL; OTC
<b>CONTAC COLD+FLU MAX ST ORAL TABLET</b>		Non-Preferred	AL; OTC
ibuprofen cold & sinus oral tablet	Advil Cold/Sinus	Non-Preferred	AL; OTC
<b>MEDI-FIRST SINUS PAIN/PRESSURE ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>MYGREX ORAL TABLET</b>		Non-Preferred	AL; OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>NEXAFED SINUS PRESSURE + PAIN ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>PANADOL COLD/FLU ORAL TABLET</b>		Non-Preferred	AL; OTC
sinus + headache oral tablet	Panadol Cold/Flu	Non-Preferred	AL; OTC
sinus congestion/pain daytime oral tablet	Panadol Cold/Flu	Non-Preferred	AL; OTC
sinus congestion/pain oral tablet	Panadol Cold/Flu	Non-Preferred	AL; OTC
sinus pressure + pain oral tablet	Panadol Cold/Flu	Non-Preferred	AL; OTC
<b>SUDAFED PE SINUS PRESSURE+PAIN ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>SUDAFED SINUS 12HR PRESS+PAIN ORAL TABLET EXTENDED RELEASE 12 HOUR</b>		Non-Preferred	AL; OTC
<b>TYLENOL SINUS+HEADACHE ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>VICKS SINEX DAYTIME ORAL CAPSULE</b>		Non-Preferred	AL; OTC
<b>*DECONGESTANT-ANALGESIC-EXPECTORANT***</b>			
head congestion/mucus oral tablet	Mucinex Sinus-Max	Non-Preferred	AL; OTC
<b>MUCINEX SINUS-MAX CONG &amp; PAIN ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>MUCINEX SINUS-MAX ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>MUCINEX SINUS-MAX SEV CONG/PN ORAL TABLET</b>		Non-Preferred	AL; OTC
mucus relief cold/sinus max st oral liquid	Mucinex Sinus-Max Cong & Pain	Non-Preferred	AL; OTC
mucus relief severe sinus oral tablet	Mucinex Sinus-Max	Non-Preferred	AL; OTC
severe congestion oral liquid	Mucinex Sinus-Max Cong & Pain	Non-Preferred	AL; OTC
sinus relief congestion-pain oral tablet	Mucinex Sinus-Max	Non-Preferred	AL; OTC
<b>SUDAFED PE HEAD CONGESTION ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>TYLENOL COLD &amp; HEAD ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>TYLENOL SINUS SEVERE ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>VICKS SINEX SEVERE ORAL CAPSULE</b>		Non-Preferred	AL; OTC

Drug Name	Reference	Status	Notes
<b>*DECONGESTANT- ANTIHISTAMINE-ANALGESIC***</b>			
<b>ADVIL ALLERGY &amp; CONGESTION ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>ADVIL ALLERGY SINUS ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>ADVIL MULTI-SYMPTOM COLD &amp; FLU ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>ALKA-SELTZER PLUS COLD ORAL TABLET EFFERVESCENT</b>		Non-Preferred	AL; OTC
<b>ALKA-SELTZER SEVERE COLD ORAL TABLET EFFERVESCENT</b>		Non-Preferred	AL; OTC
allergy multi-symptom daytime oral tablet	Coricidin D Cold/Flu/Sinus	Non-Preferred	AL; OTC
allergy multi-symptom night oral tablet	Wal-Phed PE Nighttime Cold	Non-Preferred	AL; OTC
allergy multi-symptom oral tablet	Coricidin D Cold/Flu/Sinus	Non-Preferred	AL; OTC
cold & flu relief nighttime oral liquid	Delsym Cgh/Cld Nighttime Child	Non-Preferred	AL; OTC
cold relief plus oral tablet effervescent	Alka-Seltzer Plus Cold	Non-Preferred	AL; OTC
<b>COMTREX FLU THERAPY DAY/NIGHT ORAL</b>		Non-Preferred	AL; OTC
<b>COMTREX SEVERE COLD &amp; SINUS ORAL</b>		Non-Preferred	AL; OTC
<b>CONTAC COLD/FLU DAY &amp; NIGHT ORAL</b>		Non-Preferred	AL; OTC
<b>CONTAC COLD/FLU DAY &amp; NIGHT ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>CORICIDIN D COLD/FLU/SINUS ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>DELSYM CGH/CLD NIGHTTIME CHILD ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>DIMETAPP MULTISYMPATOM COLD/FLU ORAL LIQUID</b>		Non-Preferred	AL; OTC
effervescent cold relief oral tablet effervescent	Alka-Seltzer Plus Cold	Non-Preferred	AL; OTC
herbiomed allergy cold & sinus oral liquid	Delsym Cgh/Cld Nighttime Child	Non-Preferred	AL; OTC
<b>MEDICIDIN-D ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>MUCINEX CHILDRENS NIGHT TIME ORAL LIQUID</b>		Non-Preferred	AL; OTC

Drug Name	Reference	Status	Notes
<b>MUCINEX SINUS-MAX NIGHT TIME ORAL LIQUID</b>		Non-Preferred	AL; OTC
nighttime cold & flu max str oral liquid	Delsym Cgh/Cld Nighttime Child	Non-Preferred	AL; OTC
<b>NOREL AD ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>ROBITUSSIN SEVERE NIGHTTIME ORAL LIQUID</b>		Non-Preferred	AL; OTC
sinus & congestion day/night oral	Vicks Sinex DayQuil/NyQuil	Non-Preferred	AL; OTC
sinus daytime/nighttime oral	Vicks Sinex DayQuil/NyQuil	Non-Preferred	AL; OTC
<b>THERAFLU EXPRESSMAX SEV CLD/CG ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>THERAFLU EXPRESSMAX SEV CLD/CG ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>THERAFLU POWERPODS SEVERE COLD ORAL</b>		Non-Preferred	AL; OTC
<b>THERAFLU SEVERE COLD/CGH NIGHT ORAL PACKET</b>		Non-Preferred	AL; OTC
<b>VALIHIST ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>VICKS SINEX DAYQUIL/NYQUIL ORAL</b>		Non-Preferred	AL; OTC
<b>VICKS SINEX DAYTIME/NIGHTTIME ORAL</b>		Non-Preferred	AL; OTC
<b>*EXPECTORANTS***</b>			
geri-tussin oral syrup		Non-Preferred	AL; OTC
<b>GILTUSS EX EXPECTORANT CHILD ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>GILTUSS EX MAXIMUM STRENGTH ORAL LIQUID</b>		Non-Preferred	AL; OTC
guaifenesin er oral tablet extended release 12 hour	Mucinex	Preferred	AL; OTC
guaifenesin oral tablet	Xpect	Preferred	AL; OTC
<b>HERBAL EXPEC ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>MUCINEX MAXIMUM STRENGTH ORAL TABLET EXTENDED RELEASE 12 HOUR</b>		Non-Preferred	AL; OTC
<b>MUCINEX ORAL TABLET EXTENDED RELEASE 12 HOUR</b>		Non-Preferred	AL; OTC
mucus relief er oral tablet extended release 12 hour	Mucinex Maximum Strength	Preferred	AL; OTC

Drug Name	Reference	Status	Notes
<b>*MISC. RESPIRATORY INHALANTS***</b>			
<b>HYPERSAL INHALATION NEBULIZATION SOLUTION</b>		Non-Preferred	
nasal mist inhalation aerosol solution	Simply Saline Baby	Preferred	OTC
<b>NEBUSAL INHALATION NEBULIZATION SOLUTION</b>		Preferred	
<b>PULMOSAL INHALATION NEBULIZATION SOLUTION</b>		Preferred	
<b>SIMPLY SALINE BABY INHALATION AEROSOL SOLUTION</b>		Preferred	OTC
sodium chloride inhalation nebulization solution	Nebusal	Preferred	
<b>*MUCOLYTICS***</b>			
acetylcysteine inhalation solution		Preferred	
<b>*NON-NARC ANTITUSSIVE-ANALGESIC***</b>			
<b>CORICIDIN HBP COLD/COUGH/FLU ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>DELSYM COUGH + SORE THROAT ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>MUCINEX CHILD FEV,STHR,COUGH ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>ROBITUSSIN HONEY CGH/FLU/THRT ORAL LIQUID</b>		Non-Preferred	OTC
<b>ROBITUSSIN SEVERE CGH/SR THRT ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>THERAFLU SEVERE COLD RELIEF ORAL PACKET</b>		Non-Preferred	AL; OTC
<b>TYLENOL CHILDRENS COLD/COUGH ORAL SUSPENSION</b>		Non-Preferred	AL; OTC; QL
<b>VICKS DAYQUIL HBP COLD &amp; FLU ORAL CAPSULE</b>		Non-Preferred	AL; OTC
<b>*NON-NARC ANTITUSSIVE-ANTI-HISTAMINE***</b>			
caphist dm oral liquid		Non-Preferred	AL; OTC
capron dm oral liquid		Non-Preferred	AL; OTC
capron dmt oral tablet		Non-Preferred	AL; OTC
chlo hist oral solution		Non-Preferred	AL; OTC
<b>CORICIDIN HBP COUGH/COLD ORAL TABLET</b>		Non-Preferred	AL; OTC

Drug Name	Reference	Status	Notes
curahist dm oral liquid		Non-Preferred	AL; OTC
dextromethorphan-pyridamine oral liquid		Non-Preferred	AL; OTC
endal oral liquid		Non-Preferred	AL; OTC
<b>MUCINEX CHILD COUGH DAY/NIGHT ORAL THERAPY PACK</b>		Non-Preferred	AL; OTC
<b>MUCINEX CHILDRENS COUGH NIGHT ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>NINJACOF ORAL LIQUID</b>		Non-Preferred	AL; OTC
promethazine-dm oral syrup		Preferred	AL
<b>ROBITUSSIN CHILD COUGH/COLD LA ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>ROBITUSSIN NIGHTTIME COUGH DM ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>ROBITUSSIN NIGHTTIME COUGH ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>SCOT-TUSSIN DM ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>TRIAMINIC COUGH/RUNNY NOSE ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>VANACOF 2 ORAL SOLUTION</b>		Non-Preferred	AL; OTC
<b>VANACOF CP ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>VICKS DAYQUIL/NYQUIL COUGH ORAL LIQUID THERAPY PACK</b>		Non-Preferred	AL; OTC
<b>VICKS NYQUIL CHILDRENS CLD/CGH ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>VICKS NYQUIL COUGH ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>*NON-NARC ANTITUSSIVE-DECONGESTANT***</b>			
maxi-tuss jr oral liquid		Non-Preferred	AL; OTC
<b>*NON-NARC ANTITUSSIVE-DECONGESTANT-ANTI-HISTAMINE***</b>			
<b>ALAHIST CF ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>ALAHIST DM ORAL LIQUID</b>		Non-Preferred	AL; OTC
bio-dtuss dmx oral liquid		Preferred	AL; OTC
brantussin dm oral liquid		Non-Preferred	AL; OTC
<b>CHLO TUSS ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>DIMETAPP CHILDRENS COLD/COUGH ORAL LIQUID</b>		Preferred	AL; OTC



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>DIMETAPP CHILDREN'S COLD/COUGH ORAL LIQUID THERAPY PACK</b>		Non-Preferred	AL; OTC
<b>DIMETAPP COLD/COUGH CHILDRENS ORAL LIQUID</b>		Preferred	AL; OTC
ed a-hist dm oral tablet		Non-Preferred	AL; OTC
<b>FATHER JOHNS MEDICINE PLUS ORAL SOLUTION</b>		Non-Preferred	AL; OTC
<b>GILTUSS COUGH ALLERGY &amp; SINUS ORAL TABLET</b>		Non-Preferred	AL; OTC
glenmax peb dm oral liquid		Non-Preferred	AL; OTC
glentuss oral liquid		Non-Preferred	AL; OTC
<b>HISTEX-DM ORAL SYRUP</b>		Non-Preferred	AL; OTC
lohist-dm oral syrup		Non-Preferred	AL; OTC
<b>MAXICHLOR PEH DM ORAL TABLET</b>		Non-Preferred	AL; OTC
m-end dmx oral liquid		Non-Preferred	AL; OTC
miclara dm oral liquid		Non-Preferred	AL; OTC; QL
<b>NINJACOF-D ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>NYQUIL COUGH DM + CONGESTION ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>PHENAGIL CH ORAL TABLET</b>		Non-Preferred	AL; OTC
phenylephrine-dexbromphen-dm oral liquid		Non-Preferred	AL; OTC
poly-hist dm oral liquid		Non-Preferred	AL; OTC
polytussin dm oral liquid		Non-Preferred	AL; OTC
pseudoeph-bromphen-dm oral syrup		Non-Preferred	AL
rycontuss oral liquid	Gencontuss	Non-Preferred	AL; OTC
supress a pediatric oral liquid		Non-Preferred	AL; OTC
<b>THERAFLU COLD &amp; COUGH ORAL PACKET</b>		Non-Preferred	AL; OTC
<b>TRIPONEL ORAL LIQUID</b>		Non-Preferred	AL; OTC
triponel oral syrup		Non-Preferred	AL; OTC
<b>VANACOF ORAL LIQUID</b>		Non-Preferred	AL; OTC
westussin dm nf oral liquid		Non-Preferred	AL; OTC
westussin dm oral syrup		Non-Preferred	AL; OTC

Drug Name	Reference	Status	Notes
<b>*NON-NARC ANTITUSSIVE- DECONGESTANT- ANTIHISTAMINE-ANALG***</b>			
<b>ALKA-SELTZER NIGHT COLD &amp; FLU ORAL CAPSULE</b>		Non-Preferred	AL; OTC
<b>ALKA-SELTZER PLS ALLERGY &amp; CGH ORAL CAPSULE</b>		Non-Preferred	AL; OTC
<b>ALKA-SELTZER PLS NIGHT CLD/FLU ORAL CAPSULE</b>		Non-Preferred	AL; OTC
<b>ALKA-SELTZER PLUS COLD &amp; COUGH ORAL CAPSULE</b>		Non-Preferred	AL; OTC
<b>ALKA-SELTZER PLUS COLD &amp; FLU ORAL PACKET</b>		Non-Preferred	AL; OTC
<b>ALKA-SELTZER PLUS COLD &amp; FLU ORAL TABLET EFFERVESCENT</b>		Non-Preferred	AL; OTC
<b>ALKA-SELTZER PLUS DAY/NIGHT ORAL CAPSULE</b>		Non-Preferred	AL; OTC
<b>ALKA-SELTZER PLUS SEV COLD/CGH ORAL TABLET EFFERVESCENT</b>		Non-Preferred	AL; OTC
<b>ALKA-SELTZER SINUS ALRGY COUGH ORAL CAPSULE</b>		Non-Preferred	AL; OTC
<b>ALKA-SELTZER SINUS CONG &amp; PAIN ORAL CAPSULE</b>		Non-Preferred	AL; OTC
childrens plus flu oral suspension	Tylenol Childrens Cold/Flu	Non-Preferred	AL; OTC
childrens plus multi-sympt cld oral suspension	Tylenol Childrens Cold/Flu	Non-Preferred	AL; OTC
cold & flu nighttime/daytime oral	Vicks DayQuil/NyQuil Cld & Flu	Non-Preferred	AL; OTC
cold & flu relief nighttime d oral liquid		Non-Preferred	AL; OTC
cold multi-symptom day/night oral	Comtrex Cold/Cough Day/Nite MS	Non-Preferred	AL; OTC
cold multi-symptom warm night oral liquid	NyQuil Severe Cold/Flu	Non-Preferred	AL; OTC
cold/flu relief day/night oral	Vicks DayQuil/NyQuil Cld & Flu	Non-Preferred	AL; OTC
<b>COMTREX COLD &amp; COUGH NIGHTTIME ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>COMTREX COLD/COUGH DAY/NITE MS ORAL</b>		Non-Preferred	AL; OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>GILTUSS COLD &amp; FLU CHILDRENS ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>GILTUSS MULTI-SYMP COLD &amp; FLU ORAL LIQUID</b>		Non-Preferred	AL; OTC
head congestion cold day/night oral	Comtrex Cold/Cough Day/Nite MS	Non-Preferred	AL; OTC
herbiomed deep cold & flu nt oral liquid		Non-Preferred	AL; OTC
<b>MUCINEX CHILD FREEFROM CLD/FLU ORAL SOLUTION</b>		Non-Preferred	AL; OTC
<b>MUCINEX NIGHT SEV COLD/FLU MAX ORAL SOLUTION</b>		Non-Preferred	AL; OTC
<b>MUCINEX NIGHT SEV COLD/FLU MAX ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>MUCINEX NIGHTSHIFT SINUS MAXST ORAL CAPSULE</b>		Non-Preferred	OTC
<b>MUCINEX NIGHTSHIFT SINUS MAXST ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>MUCINEX NIGHTSHIFT SINUS ORAL SOLUTION</b>		Non-Preferred	AL; OTC
multi-symptom cold plus child oral suspension	Tylenol Childrens Cold/Flu	Non-Preferred	AL; OTC
nite-time cold/flu relief oral liquid		Non-Preferred	AL; OTC
<b>NYQUIL SEVERE COLD/FLU ORAL CAPSULE</b>		Non-Preferred	AL; OTC
<b>NYQUIL SEVERE COLD/FLU ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>NYQUIL SEVERE+ VAPOCOOL ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>PEDIACARE MULTI-SYMPTOM ORAL LIQUID</b>		Non-Preferred	AL; OTC
severe cold/flu nighttime ms oral liquid	NyQuil Severe Cold/Flu	Non-Preferred	AL; OTC
<b>SINEX SEVERE+ VAPOCOOL ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>THERAFLU SEVERE COLD &amp; COUGH ORAL</b>		Non-Preferred	AL; OTC
<b>THERAFLU SEVERE COLD NIGHTTIME ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>THERAFLU-D NIGHTTIME ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>TYLENOL CHILDRENS COLD/FLU ORAL SUSPENSION</b>		Non-Preferred	AL; OTC

Drug Name	Reference	Status	Notes
TYLENOL CHILDRENS PLUS MS COLD ORAL SUSPENSION		Non-Preferred	AL; OTC
TYLENOL COLD & FLU DAY/NIGHT ORAL TABLET THERAPY PACK		Non-Preferred	AL; OTC
TYLENOL COLD/FLU/COUGH NIGHT ORAL LIQUID		Non-Preferred	AL; OTC
VICKS DAYQUIL/NYQUIL CLD & FLU ORAL		Non-Preferred	AL; OTC
VICKS NYQUIL SEVERE COLD & FLU ORAL TABLET		Non-Preferred	AL; OTC
VICKS NYQUIL SEVERE COLD/FLU ORAL LIQUID		Non-Preferred	AL; OTC
<b>*OPIOID ANTITUSSIVE-ANTIHISTAMINE***</b>			
hydrocod poli-chlorphe poli er oral suspension extended release		Non-Preferred	AL; QL
promethazine-codeine oral solution		Preferred	AL; QL
promethazine-codeine oral syrup		Preferred	AL; QL
TUXARIN ER ORAL TABLET EXTENDED RELEASE 12 HOUR		Non-Preferred	AL
<b>*OPIOID ANTITUSSIVE-DECONGESTANT-ANTIHISTAMINE***</b>			
capcof oral syrup		Non-Preferred	AL; OTC
maxi-tuss cd oral liquid		Non-Preferred	AL; OTC
poly-tussin ac oral liquid		Non-Preferred	AL; OTC
PRO-RED AC ORAL SYRUP		Non-Preferred	AL; OTC
RYDEX ORAL LIQUID		Non-Preferred	AL; OTC
<b>*DERMATOLOGICALS*</b>			
<b>*ACNE ANTIBIOTICS***</b>			
ACZONE EXTERNAL GEL		Non-Preferred	PA; QL
AMZEEQ EXTERNAL FOAM		Non-Preferred	PA; QL
CLEOCIN-T EXTERNAL LOTION		Non-Preferred	QL
CLINDACIN ETZ EXTERNAL SWAB		Preferred	QL
CLINDACIN EXTERNAL FOAM		Non-Preferred	QL
CLINDACIN-P EXTERNAL SWAB		Preferred	QL
CLINDAGEL EXTERNAL GEL		Non-Preferred	QL
clindamycin phosphate external foam	Clindacin	Non-Preferred	QL
clindamycin phosphate external gel	Clindagel	Preferred	QL

Drug Name	Reference	Status	Notes
clindamycin phosphate external lotion	Cleocin-T	Non-Preferred	QL
clindamycin phosphate external solution		Preferred	QL
clindamycin phosphate external swab	Clindacin ETZ	Preferred	QL
dapsone external gel	Aczone	Non-Preferred	PA; QL
ery external pad		Preferred	QL
<b>ERYGEL EXTERNAL GEL</b>		Non-Preferred	QL
erythromycin external gel	Erygel	Non-Preferred	QL
erythromycin external solution		Preferred	QL
<b>KLARON EXTERNAL LOTION</b>		Non-Preferred	
sulfacetamide sodium (acne) external lotion	Klaron	Non-Preferred	
<b>*ACNE CLEANSERS***</b>			
<b>BRASIVOL EXTERNAL PASTE</b>		Non-Preferred	OTC
<b>SASTID SOAP EXTERNAL BAR</b>		Non-Preferred	OTC
<b>*ACNE COMBINATIONS***</b>			
<b>ACANYA EXTERNAL GEL</b>		Non-Preferred	PA
adapalene-benzoyl peroxide external gel	Epiduo	Non-Preferred	PA; QL
<b>ADULT ACNOMEL EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>BENZAMYCIN EXTERNAL GEL</b>		Non-Preferred	PA; QL
benzoyl peroxide-erythromycin external gel	Benzamycin	Preferred	QL
<b>CABTREO EXTERNAL GEL</b>		Non-Preferred	PA; QL
clindamycin phos-benzoyl perox external gel 1.2-2.5 %	Acanya	Non-Preferred	
clindamycin phos-benzoyl perox external gel 1.2-3.75 %	Onexton	Non-Preferred	QL
clindamycin phos-benzoyl perox external gel 1.2-5 %	Neuac	Preferred	QL
clindamycin phos-benzoyl perox external gel 1-5 %		Non-Preferred	QL
clindamycin-tretinoin external gel	Ziana	Non-Preferred	PA; AL; QL
<b>EPIDUO EXTERNAL GEL</b>		Non-Preferred	PA; QL
<b>EPIDUO FORTE EXTERNAL GEL</b>		Non-Preferred	PA; QL
<b>NEUAC EXTERNAL GEL</b>		Non-Preferred	PA; QL
<b>ONEXTON EXTERNAL GEL</b>		Non-Preferred	PA; QL
<b>REZAMID EXTERNAL LOTION</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>TWYNEO EXTERNAL CREAM</b>		Non-Preferred	PA; QL
<b>ZIANA EXTERNAL GEL</b>		Non-Preferred	PA; QL
<b>*ACNE PRODUCTS MISCELLANEOUS***</b>			
<b>CLEARASIL ULT OVERNIGHT PATCH EXTERNAL PATCH</b>		Non-Preferred	OTC
<b>PANOXYL PM OVERNIGHT SPOT EXTERNAL PATCH</b>		Non-Preferred	OTC
<b>*ACNE PRODUCTS***</b>			
<b>ABSORICA LD ORAL CAPSULE</b>		Non-Preferred	PA
<b>ABSORICA ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>ACCUTANE ORAL CAPSULE</b>		Preferred	PA; QL
acne foaming wash external liquid	Medpura Benzoyl Peroxide	Preferred	OTC; QL
acne maximum strength external cream	Clearasil Daily Clear Acne	Preferred	OTC; QL
acne medication 10 external gel	Clean & Clear Persa-Gel Max St	Preferred	OTC; QL
acne medication 10 external lotion		Preferred	OTC; QL
acne medication 2.5 external gel		Preferred	OTC; QL
acne medication 5 external gel	Medpura Benzoyl Peroxide	Preferred	OTC; QL
acne medication 5 external lotion		Preferred	OTC; QL
acne treatment external bar		Preferred	OTC; QL
acne treatment external gel	Clean & Clear Persa-Gel Max St	Preferred	OTC; QL
acne-clear external gel	Clean & Clear Persa-Gel Max St	Preferred	OTC; QL
adapalene external cream	Differin	Non-Preferred	PA; QL
adapalene external gel 0.3 %	Differin	Non-Preferred	PA; QL
adapalene external pad		Non-Preferred	PA; QL
adapalene external solution		Non-Preferred	PA; QL
adapalene gel 0.1 % external (otc)	Differin	Preferred	QL
adapalene gel 0.1 % external (rx)	Differin	Non-Preferred	PA; QL
adapalene treatment external gel	Differin	Preferred	AL; OTC; QL
advanced acne wash external liquid extended release		Preferred	OTC; QL
<b>AKLIEF EXTERNAL CREAM</b>		Non-Preferred	PA; QL
<b>ALTRENO EXTERNAL LOTION</b>		Non-Preferred	PA; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>AMNESTEEM ORAL CAPSULE</b>		Preferred	PA; QL
<b>ARAZLO EXTERNAL LOTION</b>		Non-Preferred	PA; QL
<b>ATRALIN EXTERNAL GEL</b>		Non-Preferred	PA; AL; QL
<b>AZELEX EXTERNAL CREAM</b>		Non-Preferred	PA; QL
benzoyl peroxide external gel 10 %	Clean & Clear Persa-Gel Max St	Preferred	QL
benzoyl peroxide external gel 2.5 %		Preferred	OTC; QL
benzoyl peroxide external gel 5 %	Medpura Benzoyl Peroxide	Preferred	OTC; QL
benzoyl peroxide external liquid	Medpura Benzoyl Peroxide	Preferred	QL
benzoyl peroxide wash external liquid	Differin Cleanser	Preferred	QL
bp wash external liquid	Differin Cleanser	Preferred	OTC; QL
bpo foaming cloths external	BenzePrO Foaming Cloths	Preferred	OTC
<b>CERAVE ACNE FOAMING CREAM EXTERNAL LIQUID</b>		Preferred	OTC; QL
<b>CLARAVIS ORAL CAPSULE</b>		Preferred	PA; QL
<b>CLEAN &amp; CLEAR PERSA-GEL MAX ST EXTERNAL GEL</b>		Preferred	OTC; QL
<b>CLEARASIL DAILY CLEAR ACNE EXTERNAL CREAM</b>		Preferred	OTC; QL
<b>CLEARASIL RAPID RESCUE SPOT EXTERNAL CREAM</b>		Preferred	OTC; QL
<b>CLEARSKIN EXTERNAL CREAM</b>		Preferred	OTC; QL
<b>DIFFERIN CLEANSER EXTERNAL LIQUID</b>		Preferred	OTC; QL
<b>DIFFERIN EXTERNAL CREAM</b>		Non-Preferred	PA; QL
<b>DIFFERIN EXTERNAL GEL 0.1 %</b>		Non-Preferred	AL; OTC; QL
<b>DIFFERIN EXTERNAL GEL 0.3 %</b>		Non-Preferred	PA; QL
<b>DIFFERIN EXTERNAL LOTION</b>		Non-Preferred	PA; QL
effaclar duo external solution		Preferred	OTC; QL
<b>EPSOLAY EXTERNAL CREAM</b>		Non-Preferred	PA; QL
<b>FABIOR EXTERNAL FOAM</b>		Non-Preferred	PA; QL
<b>GRANDPAS THYLOX SOAP EXTERNAL BAR</b>		Non-Preferred	OTC
isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	Accutane	Preferred	PA; QL
isotretinoin oral capsule 25 mg, 35 mg	Absorica	Non-Preferred	PA; QL
<b>LIQUIMAT EXTERNAL LOTION</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>MEDPURA BENZOYL PEROXIDE EXTERNAL GEL</b>		Preferred	OTC; QL
<b>MEDPURA BENZOYL PEROXIDE EXTERNAL LIQUID</b>		Preferred	OTC; QL
<b>NEUTROGENA CLEAR PORE EXTERNAL LIQUID</b>		Preferred	OTC; QL
<b>NEUTROGENA ON-THE-SPOT EXTERNAL CREAM</b>		Preferred	OTC; QL
<b>PALMERS SKIN SUCCESS EXTERNAL BAR</b>		Non-Preferred	OTC
<b>PANOXYL CREAMY WASH EXTERNAL LIQUID</b>		Preferred	OTC; QL
<b>PANOXYL EXTERNAL LIQUID</b>		Preferred	OTC; QL
<b>PANOXYL FOAMING WASH EXTERNAL LIQUID</b>		Preferred	OTC; QL
<b>RETIN-A EXTERNAL CREAM</b>		Non-Preferred	PA; QL
<b>RETIN-A EXTERNAL GEL</b>		Non-Preferred	PA; QL
<b>RETIN-A MICRO EXTERNAL GEL</b>		Non-Preferred	PA; AL; QL
<b>RETIN-A MICRO PUMP EXTERNAL GEL 0.04 %, 0.1 %</b>		Non-Preferred	PA; AL; QL
<b>RETIN-A MICRO PUMP EXTERNAL GEL 0.06 %, 0.08 %</b>		Non-Preferred	PA; QL
spot acne treatment external cream	Neutrogena On-The-Spot	Preferred	OTC; QL
<b>SULFO LO EXTERNAL BAR</b>		Non-Preferred	OTC
sulfur external bar		Non-Preferred	OTC; QL
tazarotene external foam	Fabior	Non-Preferred	PA; QL
tretinoin external cream	Retin-A	Preferred	PA; QL
tretinoin external gel 0.01 %, 0.025 %	Retin-A	Preferred	PA; QL
tretinoin external gel 0.05 %	Atralin	Non-Preferred	PA; AL; QL
tretinoin microsphere external gel 0.04 %	Retin-A Micro	Non-Preferred	PA; AL; QL
tretinoin microsphere external gel 0.08 %	Retin-A Micro Pump	Non-Preferred	PA; QL
tretinoin microsphere external gel 0.1 %	Retin-A Micro	Preferred	PA; AL; QL
tretinoin microsphere pump external gel 0.04 %, 0.1 %	Retin-A Micro	Non-Preferred	PA; AL; QL
tretinoin microsphere pump external gel 0.08 %	Retin-A Micro Pump	Non-Preferred	PA; QL
<b>WINLEVI EXTERNAL CREAM</b>		Non-Preferred	PA; QL



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
ZENATANE ORAL CAPSULE		Preferred	PA; QL
<b>*AGENTS FOR EXTERNAL GENITAL AND PERIANAL WARTS***</b>			
VEREGEN EXTERNAL OINTMENT		Non-Preferred	PA; QL
<b>*ANALGESICS - TOPICAL ***</b>			
ABSORBINE PLUS JR EXTERNAL LIQUID		Non-Preferred	OTC
ABSORBINE PLUS JR EXTERNAL PATCH		Non-Preferred	OTC
arthritis wonder external cream		Non-Preferred	OTC
ASPERCREME MAX ROLL-ON EXTERNAL LIQUID		Non-Preferred	OTC
ASPERFLEX ORIGINAL EXTERNAL PATCH		Non-Preferred	OTC
BAMA FREEZE EXTERNAL GEL		Non-Preferred	OTC
BENGAY ULTRA STRENGTH EXTERNAL PATCH		Non-Preferred	OTC
BIOFREEZE COOL THE PAIN EXTERNAL AEROSOL		Non-Preferred	OTC
BIOFREEZE COOL THE PAIN EXTERNAL CREAM		Non-Preferred	OTC
BIOFREEZE COOL THE PAIN EXTERNAL GEL		Preferred	OTC
BIOFREEZE COOL THE PAIN EXTERNAL LIQUID		Non-Preferred	OTC
BIOFREEZE COOL THE PAIN EXTERNAL PATCH		Non-Preferred	OTC
BIOFREEZE COOL THE PAIN LARGE EXTERNAL PATCH		Non-Preferred	OTC
BIOFREEZE COOL THE PAIN XL EXTERNAL PATCH		Non-Preferred	OTC
BIOFREEZE EXTERNAL CREAM		Non-Preferred	OTC
BIOFREEZE PROFESSIONAL EXTERNAL AEROSOL		Non-Preferred	OTC
BIOFREEZE PROFESSIONAL EXTERNAL GEL		Non-Preferred	OTC
BIOFREEZE ROLL-ON EXTERNAL GEL		Preferred	OTC
BLUE-EMU MAXIMUM STRENGTH EXTERNAL LIQUID		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
cold & hot medicated external patch	Absorbine Plus Jr	Non-Preferred	OTC
cold therapy pain relief external gel		Non-Preferred	OTC
<b>CONTROL MENSTRUAL CRAMP RELIEF EXTERNAL CREAM</b>		Non-Preferred	OTC
cool & heat external patch	Absorbine Plus Jr	Non-Preferred	OTC
cool n heat arm/neck/leg external patch	Absorbine Plus Jr	Non-Preferred	OTC
cool n heat ex st external patch	Absorbine Plus Jr	Non-Preferred	OTC
cool n heat/back external patch	Absorbine Plus Jr	Non-Preferred	OTC
<b>EUCERIN ITCH RELIEF EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>FAST FREEZE PRO STYLE THERAPY EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>GOLD BOND EXTRA STRENGTH EXTERNAL POWDER</b>		Non-Preferred	OTC
<b>GOLD BOND FOOT POWDER MAX ST EXTERNAL POWDER</b>		Non-Preferred	OTC
<b>GOLD BOND FOOT SPRAY MAX ST EXTERNAL AEROSOL POWDER</b>		Non-Preferred	OTC
<b>GOLD BOND ORIG STRENGTH BODY EXTERNAL POWDER</b>		Non-Preferred	OTC
<b>GOLD BOND ORIGINAL STRENGTH EXTERNAL POWDER</b>		Non-Preferred	OTC
<b>GOLD BOND PAIN RELIEVING FOOT EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>GOLD BOND PAIN RELIEVING FOOT EXTERNAL LIQUID</b>		Non-Preferred	OTC
hav ez penetrating pain relief external gel		Non-Preferred	OTC
ice rub roll-on external liquid	Biofreeze Cool The Pain	Non-Preferred	OTC
<b>ICY HOT ADVANCED RELIEF EXTERNAL PATCH</b>		Non-Preferred	OTC
<b>ICY HOT BACK EXTERNAL PATCH</b>		Non-Preferred	OTC
<b>ICY HOT BACK EXTRA STRENGTH EXTERNAL PATCH</b>		Non-Preferred	OTC
<b>ICY HOT EXTERNAL</b>		Non-Preferred	OTC
<b>ICY HOT EXTERNAL PATCH</b>		Non-Preferred	OTC
<b>ICY HOT NATURALS EXTERNAL CREAM</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>ICY HOT ORIGINAL PAIN RELIEF EXTERNAL FOAM</b>		Non-Preferred	OTC
<b>ICY HOT ORIGINAL PAIN RELIEF EXTERNAL GEL</b>		Non-Preferred	OTC
<b>ICY HOT ORIGINAL PAIN RELIEF EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>ICY HOT ORIGINAL PAIN RELIEF EXTERNAL PATCH</b>		Non-Preferred	OTC
<b>ICY HOT PAIN RELIEVING EXTERNAL GEL</b>		Non-Preferred	OTC
<b>ICY HOT PM EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>ICY HOT SLEEVE EXTERNAL</b>		Non-Preferred	OTC
<b>JOINTFLEX NO MESS ROLL-ON EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>KRT HEAT MUSCLE ENDURANCE EXTERNAL CREAM</b>		Non-Preferred	OTC
menthol (topical analgesic) external cream		Non-Preferred	OTC
menthol cold/hot external patch	Absorbine Plus Jr	Non-Preferred	OTC
nitroval blue external cream		Non-Preferred	OTC
pain relieving ultra st external patch	Absorbine Plus Jr	Non-Preferred	OTC
<b>RELIEF PAIN RELIEVING EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>SOMBRA COOL THERAPY EXTERNAL GEL</b>		Non-Preferred	OTC
<b>TWO OLD GOATS ARTHRITIS EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>ZIMS MAX-FREEZE EXTERNAL GEL</b>		Non-Preferred	OTC
<b>ZIMS MAX-FREEZE EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>*ANTIBIOTIC MIXTURES TOPICAL ***</b>			
<b>BACITRAYCIN PLUS EXTERNAL OINTMENT</b>		Non-Preferred	OTC
first aid antibiotic external ointment	Neosporin + Lidocaine Max Str	Non-Preferred	OTC; QL
multi antibiotic plus external cream	Neosporin Plus Pain Relief MS	Non-Preferred	OTC
<b>NEOSPORIN + LIDOCAINE MAX STR EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL

Drug Name	Reference	Status	Notes
<b>NEOSPORIN ORIGINAL EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>NEOSPORIN PLUS PAIN RELIEF MS EXTERNAL CREAM</b>		Non-Preferred	OTC
poly bacitracin external ointment	Polysporin	Preferred	OTC
<b>POLYSPORIN EXTERNAL OINTMENT</b>		Non-Preferred	OTC
triple antibiotic external ointment	Neosporin Original	Preferred	OTC; QL
triple antibiotic plus external ointment	Neosporin + Pain Relief Max St	Preferred	OTC; QL
<b>*ANTIBIOTIC STEROID COMBINATIONS - TOPICAL***</b>			
<b>NEO-SYNALAR EXTERNAL CREAM</b>		Non-Preferred	
<b>*ANTIBIOTICS - TOPICAL***</b>			
antibiotic external ointment	Bacitraycin Plus	Preferred	OTC; QL
bacitracin external ointment	Bacitraycin Plus	Preferred	OTC; QL
bacitracin zinc external ointment		Preferred	OTC; QL
bacitracin zinc-aloe external ointment		Preferred	OTC; QL
<b>BACITRAYCIN PLUS EXTERNAL OINTMENT</b>		Preferred	OTC; QL
gentamicin sulfate external cream		Preferred	QL
gentamicin sulfate external ointment		Preferred	QL
mupirocin calcium external cream		Non-Preferred	PA; QL
mupirocin external ointment		Preferred	QL
<b>*ANTIFUNGALS - TOPICAL COMBINATIONS***</b>			
athletes foot maximum strength external ointment	Undelenic	Non-Preferred	OTC
<b>BREEZEE MIST EXTERNAL AEROSOL POWDER</b>		Non-Preferred	OTC
castellani paint external liquid		Non-Preferred	OTC
castellani paint modified external liquid		Non-Preferred	OTC
clotrimazole-betamethasone external cream		Preferred	QL
clotrimazole-betamethasone external lotion		Preferred	QL
fungimez external solution	Myco Nail	Non-Preferred	
g-myco nail external solution	Myco Nail	Preferred	OTC
<b>GORDONS NO 5 EXTERNAL AEROSOL POWDER</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>MICONATATE EXTERNAL THERAPY PACK</b>		Non-Preferred	OTC
miconazole-zinc oxide-petrolat external ointment	Vusion	Non-Preferred	QL
<b>MYCO NAIL EXTERNAL SOLUTION</b>		Preferred	OTC
nystatin-triamcinolone external cream		Non-Preferred	PA; QL
nystatin-triamcinolone external ointment		Non-Preferred	PA; QL
<b>UNDELENIC EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>UNDELENIC EXTERNAL TINCTURE</b>		Non-Preferred	OTC
<b>VUSION EXTERNAL OINTMENT</b>		Non-Preferred	QL
<b>*ANTIFUNGALS - TOPICAL ***</b>			
antifungal maximum strength external solution	Micotrin AL	Preferred	OTC; QL
<b>BIORX SPONIX ANTI-FUNGAL EXTERNAL SOLUTION</b>		Non-Preferred	OTC
<b>BLIS-TO-SOL EXTERNAL POWDER</b>		Non-Preferred	OTC
butenafine hcl external cream	Lotrimin Ultra	Non-Preferred	PA; OTC; QL
<b>CICLODAN EXTERNAL SOLUTION</b>		Preferred	PA; QL
ciclopirox external gel		Non-Preferred	PA; QL
ciclopirox external shampoo		Non-Preferred	PA; QL
ciclopirox external solution	Ciclodan	Preferred	PA; QL
ciclopirox olamine external cream		Preferred	QL
ciclopirox olamine external suspension		Preferred	QL
<b>FORMULA 7 RAPID MICROGEL EXTERNAL GEL</b>		Non-Preferred	OTC; QL
<b>FUNGIFOAM EXTERNAL FOAM</b>		Non-Preferred	OTC; QL
gentian violet external solution		Non-Preferred	OTC
<b>GORDOCHOM EXTERNAL SOLUTION</b>		Preferred	OTC
<b>LAMISIL AT EXTERNAL CREAM</b>		Non-Preferred	OTC; QL
<b>LAMISIL AT JOCK ITCH EXTERNAL CREAM</b>		Non-Preferred	OTC; QL
<b>LOTRIMIN AF EXTERNAL POWDER</b>		Preferred	OTC; QL
<b>LOTRIMIN ULTRA EXTERNAL CREAM</b>		Non-Preferred	PA; OTC; QL
<b>MICOTRIN AL EXTERNAL SOLUTION</b>		Preferred	OTC; QL
<b>MYCO NAIL A EXTERNAL SOLUTION</b>		Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
naftifine hcl external cream		Non-Preferred	PA; QL
naftifine hcl external gel	Naftin	Non-Preferred	PA; QL
<b>NAFTIN EXTERNAL GEL</b>		Non-Preferred	PA; QL
<b>NYAMYC EXTERNAL POWDER</b>		Preferred	QL
nystatin external cream		Preferred	QL
nystatin external ointment		Preferred	QL
nystatin external powder	Nyamyc	Preferred	QL
<b>NYSTOP EXTERNAL POWDER</b>		Preferred	QL
terbinafine hcl external cream	LamISIL AT	Preferred	OTC; QL
<b>TINACTIN DEODORANT EXTERNAL AEROSOL POWDER</b>		Non-Preferred	OTC; QL
<b>TINACTIN EXTERNAL AEROSOL</b>		Non-Preferred	OTC; QL
<b>TINACTIN EXTERNAL AEROSOL POWDER</b>		Non-Preferred	OTC; QL
<b>TINACTIN EXTERNAL CREAM</b>		Non-Preferred	OTC; QL
<b>TINACTIN JOCK ITCH EXTERNAL AEROSOL POWDER</b>		Non-Preferred	OTC; QL
tolnaftate antifungal external cream	TriTolnacide C	Preferred	OTC; QL
tolnaftate external aerosol powder	Tinactin	Preferred	OTC; QL
tolnaftate external cream	TriTolnacide C	Preferred	OTC; QL
tolnaftate external powder	Lotrimin AF	Preferred	OTC; QL
<b>TRIPENICOL C EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>TRITOLNACIDE C EXTERNAL CREAM</b>		Preferred	OTC; QL
<b>*ANTIHISTAMINES - TOPICAL ***</b>			
<b>BENADRYL ITCH STOPPING EXTERNAL GEL</b>		Non-Preferred	OTC
itch relief external cream		Non-Preferred	OTC
<b>TECNU RASH RELIEF EXTERNAL SOLUTION</b>		Non-Preferred	OTC
<b>THE ITCH ERASER EXTERNAL GEL</b>		Non-Preferred	OTC
<b>THE ITCH ERASER EXTERNAL SOLUTION</b>		Non-Preferred	OTC
<b>*ANTIHISTAMINE-TOPICAL COMBINATIONS***</b>			
<b>ALLEGRA INTENSIVE RELIEF EXTERNAL CREAM</b>		Non-Preferred	OTC
anti-itch external cream	Banophen	Preferred	OTC
anti-itch extra strength external cream	Banophen	Preferred	OTC

Drug Name	Reference	Status	Notes
<b>BANOPHEN EXTERNAL CREAM</b>		Preferred	OTC
<b>BENADRYL EXTRA STRENGTH EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>BENADRYL EXTRA STRENGTH EXTERNAL LIQUID</b>		Preferred	OTC
<b>BENADRYL ITCH RELIEF EXTERNAL STICK</b>		Non-Preferred	OTC
<b>BENADRYL ITCH STOPPING EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>*ANTI-INFLAMMATORY AGENTS - TOPICAL ***</b>			
diclofenac epolamine external patch	Flector	Non-Preferred	PA; QL
diclofenac sodium external gel	Pharmacist Choice Diclofenac	Non-Preferred	QL
diclofenac sodium external solution 1.5 %		Preferred	QL
diclofenac sodium external solution 2 %	Pennsaid	Non-Preferred	PA; QL
<b>FLECTOR EXTERNAL PATCH</b>		Non-Preferred	PA; QL
<b>LICART EXTERNAL PATCH 24 HOUR</b>		Non-Preferred	PA; QL
<b>PENNSAID EXTERNAL SOLUTION</b>		Non-Preferred	PA; QL
<b>PHARMACIST CHOICE DICLOFENAC EXTERNAL GEL</b>		Preferred	OTC; QL
<b>VOLTAREN ARTHRITIS PAIN EXTERNAL GEL</b>		Non-Preferred	OTC; QL
<b>VOLTAREN EXTERNAL GEL</b>		Non-Preferred	PA; QL
<b>*ANTI-INFLAMMATORY COMBINATIONS - TOPICAL ***</b>			
<b>TRIFENA PAIN RELIEF EXTERNAL PATCH</b>		Non-Preferred	OTC
<b>*ANTINEOPLASTIC ANTIMETABOLITES - TOPICAL ***</b>			
<b>CARAC EXTERNAL CREAM</b>		Non-Preferred	PA; QL
<b>EFUDEX EXTERNAL CREAM</b>		Non-Preferred	PA; QL
fluorouracil external cream	Efudex	Preferred	QL
fluorouracil external solution		Preferred	QL
<b>TOLAK EXTERNAL CREAM</b>		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
<b>*ANTINEOPLASTIC RETINOIDS - TOPICAL***</b>			
PANRETIN EXTERNAL GEL		Non-Preferred	SP
<b>*ANTIPRURITIC COMBINATIONS - TOPICAL***</b>			
anti-itch external lotion	Sarna	Non-Preferred	OTC
antiseptic pain relief external liquid	Campho Phenique Maximum St	Non-Preferred	OTC
arctic relief pain relieving external gel	Ortho-Nesic	Non-Preferred	OTC
<b>CAMPHO PHENIQUE MAXIMUM ST EXTERNAL GEL</b>		Non-Preferred	OTC
<b>CAMPHO PHENIQUE MAXIMUM ST EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>CAMPHO-PHENIQUE COLD SORE EXTERNAL GEL</b>		Non-Preferred	OTC
cold sore treatment external gel	Campho Phenique Maximum St	Non-Preferred	OTC
<b>FAST FREEZE PRO STYLE THERAPY EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>ORTHO-NESIC EXTERNAL GEL</b>		Non-Preferred	OTC
<b>RHULI GEL EXTERNAL GEL</b>		Non-Preferred	OTC
<b>SARNA EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>*ANTIPRURITICS - TOPICAL***</b>			
doxepin hcl external cream	Prudoxin	Non-Preferred	PA; QL
<b>JOINTFLEX EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>PRUDOXIN EXTERNAL CREAM</b>		Non-Preferred	PA; QL
<b>ZONALON EXTERNAL CREAM</b>		Non-Preferred	PA; QL
<b>*ANTIPSORIATICS - SYSTEMIC***</b>			
acitretin oral capsule		Non-Preferred	QL
<b>BIMZELX SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Non-Preferred	PA; SP; QL
<b>BIMZELX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; SP; QL
<b>COSENTYX (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Preferred	PA; SP; QL
<b>COSENTYX INTRAVENOUS SOLUTION</b>		Non-Preferred	PA; SP; QL



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>COSENTYX SENSOREADY (300 MG) SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Preferred	PA; SP; QL
<b>COSENTYX SENSOREADY PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Preferred	PA; SP; QL
<b>COSENTYX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Preferred	PA; SP; QL
<b>COSENTYX UNOREADY SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Preferred	PA; SP; QL
<b>ILUMYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; SP; QL
methoxsalen rapid oral capsule		Non-Preferred	PA; SP
<b>SILIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; SP; QL
<b>SKYRIZI PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Non-Preferred	PA; SP; QL
<b>SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; SP; QL
<b>SOTYKTU ORAL TABLET</b>		Non-Preferred	PA; SP; QL
<b>SPEVIGO INTRAVENOUS SOLUTION</b>		Non-Preferred	PA; QL
<b>SPEVIGO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; QL
<b>STELARA SUBCUTANEOUS SOLUTION</b>		Non-Preferred	PA; SP; QL
<b>STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; SP; QL
<b>TALTZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Non-Preferred	PA; SP; QL
<b>TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; SP; QL
<b>TREMFYA INTRAVENOUS SOLUTION</b>		Non-Preferred	PA; QL
<b>TREMFYA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML</b>		Non-Preferred	PA; SP; QL
<b>TREMFYA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/2ML</b>		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
<b>TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML</b>		Non-Preferred	PA; SP; QL
<b>TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/2ML</b>		Non-Preferred	PA; QL
<b>*ANTIPSORIATICS***</b>			
calcipotriene external cream		Preferred	QL
calcipotriene external foam	Sorilux	Non-Preferred	QL
calcipotriene external ointment	Calcitrene	Preferred	QL
calcipotriene external solution		Preferred	QL
calcitriol external ointment	Vectical	Non-Preferred	QL
<b>SORILUX EXTERNAL FOAM</b>		Non-Preferred	QL
tazarotene external cream	Tazorac	Non-Preferred	PA; QL
tazarotene external gel	Tazorac	Non-Preferred	PA; QL
<b>TAZORAC EXTERNAL CREAM</b>		Non-Preferred	PA; QL
<b>TAZORAC EXTERNAL GEL</b>		Non-Preferred	PA; QL
<b>VECTICAL EXTERNAL OINTMENT</b>		Non-Preferred	QL
<b>VTAMA EXTERNAL CREAM</b>		Non-Preferred	PA; QL
<b>ZORYVE EXTERNAL CREAM</b>		Non-Preferred	PA; QL
<b>*ANTISEBORRHEIC COMBINATIONS***</b>			
<b>DERMAZINC BABY EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>DERMAZINC CREAM EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>DERMAZINC SCALP EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>DERMAZINC SOAP EXTERNAL BAR</b>		Non-Preferred	OTC
<b>P &amp; S EXTERNAL LIQUID</b>		Non-Preferred	OTC
sebex external shampoo		Non-Preferred	OTC
<b>*ANTISEBORRHEIC PRODUCTS***</b>			
beta med external shampoo	DermaZinc Shampoo	Non-Preferred	OTC
<b>CONTROLGX ANTI-DANDRUFF EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
dandruff 2 in 1 external shampoo	ControlGX Anti-Dandruff	Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
dandruff dry scalp care external shampoo	ControlGX Anti-Dandruff	Non-Preferred	OTC
dandruff everyday clean external shampoo	ControlGX Anti-Dandruff	Non-Preferred	OTC
dandruff shampoo external shampoo	ControlGX Anti-Dandruff	Non-Preferred	OTC
<b>DERMAZINC SHAMPOO EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>DERMAZINC SPRAY EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>DERMAZINC ZINC THERAPY SOAP EXTERNAL BAR</b>		Non-Preferred	OTC
<b>DHS BODY WASH EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>HEAD &amp; SHOULDERS 2 IN 1 EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>HEAD &amp; SHOULDERS CLASSIC CLEAN EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
selenium sulfide external lotion		Preferred	QL
<b>SELSUN BLUE CARE MENS MAX STR EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>SELSUN BLUE DAILY EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>SELSUN BLUE DRY SCALP EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>SELSUN BLUE EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>SELSUN BLUE FULL &amp; THICK EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>SELSUN BLUE ITCHY DRY SCALP EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>SELSUN BLUE MEDICATED EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>SELSUN BLUE MOISTURIZING EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>SELSUN BLUE SALON EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>ZORYVE EXTERNAL FOAM</b>		Non-Preferred	PA; QL
<b>*ANTIVIRAL TOPICAL COMBINATIONS***</b>			
<b>XERESE EXTERNAL CREAM</b>		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
<b>*ANTIVIRALS - TOPICAL***</b>			
<b>ABREVA EXTERNAL CREAM</b>		Non-Preferred	OTC; QL
acyclovir external cream	Zovirax	Preferred	PA; QL
acyclovir external ointment	Zovirax	Preferred	PA; QL
<b>DENAVIR EXTERNAL CREAM</b>		Non-Preferred	PA; QL
docosanol external cream	Abreva	Preferred	OTC; QL
penciclovir external cream	Denavir	Non-Preferred	PA; QL
<b>ZOVIRAX EXTERNAL CREAM</b>		Non-Preferred	PA; QL
<b>ZOVIRAX EXTERNAL OINTMENT</b>		Non-Preferred	PA; QL
<b>*ASTRINGENTS***</b>			
<b>A.E.R. TRAVELER EXTERNAL PAD</b>		Non-Preferred	OTC
<b>A.E.R. WITCH HAZEL EXTERNAL PAD</b>		Non-Preferred	OTC
aluminum acetate external solution	Dermeleve Anti-Itch Scalp	Non-Preferred	OTC
<b>AQUAPHOR 3 IN 1 DIAPER RASH EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>AQUAPHOR BABY DIAPER RASH EXTERNAL PASTE</b>		Non-Preferred	OTC; QL
astringent external packet	Domeboro	Non-Preferred	OTC
<b>BABY ANTI MONKEY BUTT EXTERNAL POWDER</b>		Non-Preferred	OTC
baby diaper rash external cream	Desitin	Non-Preferred	OTC
<b>BABY EASE EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>BALMEX ADULT CARE EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>BALMEX COMPLETE PROTECTION EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>BALMEX EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>BALMEX EXTERNAL STICK</b>		Non-Preferred	OTC
<b>BAZA PROTECT MOISTURE BARRIER EXTERNAL CREAM</b>		Non-Preferred	OTC
boro-packs external packet	Domeboro	Non-Preferred	OTC
<b>BOUDREAUXS BUTT PASTE EXTERNAL OINTMENT 16 %</b>		Non-Preferred	OTC; QL
<b>BOUDREAUXS BUTT PASTE EXTERNAL OINTMENT 40 %</b>		Preferred	OTC; QL
<b>BOUDREAUXS BUTT PASTE EXTERNAL THERAPY PACK</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>BOUDREAUXS RASH KICKING KIT EXTERNAL KIT</b>		Non-Preferred	OTC
calamine phenolated external lotion		Preferred	OTC
<b>DERMELEVE ADVANCED FORMULA EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>DERMELEVE ANTI-ITCH SCALP EXTERNAL SOLUTION</b>		Non-Preferred	OTC
<b>DESITIN DAILY DEFENSE EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>DESITIN EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>DESITIN EXTERNAL PASTE</b>		Non-Preferred	OTC; QL
<b>DESITIN MAXIMUM STRENGTH EXTERNAL PASTE</b>		Non-Preferred	OTC; QL
<b>DESITIN RAPID RELIEF EXTERNAL CREAM</b>		Non-Preferred	OTC
diaper rash external cream	Secura Protective	Non-Preferred	OTC
diaper rash external ointment	Boudreauxs Butt Paste	Preferred	OTC; QL
diaper rash external paste	Aquaphor Baby Diaper Rash	Non-Preferred	OTC; QL
<b>DOMEBORO EXTERNAL PACKET</b>		Non-Preferred	OTC
<b>DR SMITHS DIAPER EXTERNAL OINTMENT</b>		Non-Preferred	OTC
endit external ointment	Medpura Zinc Oxide	Preferred	OTC; QL
hygienic cleansing external pad	A.E.R. Traveler	Non-Preferred	OTC
<b>MEDPURA ZINC OXIDE EXTERNAL OINTMENT</b>		Preferred	OTC; QL
<b>PHARMABASE BARRIER EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>PINXAV EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>SECURA PROTECTIVE EXTERNAL CREAM</b>		Non-Preferred	OTC
skin protectant external cream	Baza Protect Moisture Barrier	Non-Preferred	OTC
<b>TRIPLE PASTE EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>Z-BUM EXTERNAL CREAM</b>		Non-Preferred	OTC
zinc oxide external ointment 20 %	Medpura Zinc Oxide	Preferred	OTC; QL
zinc oxide external ointment 25 %		Non-Preferred	OTC
zinc oxide external ointment 40 %	Boudreauxs Butt Paste	Preferred	OTC; QL
zinc oxide external paste		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
ZINCTRAL EXTERNAL PASTE		Non-Preferred	OTC
<b>*ATOPIC DERMATITIS - JANUS KINASE (JAK) INHIBITORS***</b>			
CIBINQO ORAL TABLET		Non-Preferred	PA; SP; QL
OPZELURA EXTERNAL CREAM		Non-Preferred	PA; QL
<b>*ATOPIC DERMATITIS - MONOCLONAL ANTIBODIES***</b>			
ADBRY SUBCUTANEOUS SOLUTION AUTO-INJECTOR		Non-Preferred	PA; SP; QL
ADBRY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE		Non-Preferred	PA; SP; QL
DUPIXENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR		Preferred	PA; SP
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE		Preferred	PA; SP
EBGLYSS SUBCUTANEOUS SOLUTION AUTO-INJECTOR		Non-Preferred	PA; QL
<b>*BATH PRODUCTS***</b>			
AVEENO DAILY MOISTURIZING REFI EXTERNAL LIQUID		Non-Preferred	OTC
AVEENO MOISTURIZING BODY WASH EXTERNAL LIQUID		Non-Preferred	OTC
AVEENO POSITIVELY RADIANT WASH EXTERNAL LIQUID		Non-Preferred	OTC
AVEENO POSITIVELY SMOOTH EXTERNAL GEL		Non-Preferred	OTC
AVEENO RESTORATIVE SKIN THERAP EXTERNAL LIQUID		Non-Preferred	OTC
AVEENO SKIN RELIEF BODY REFILL EXTERNAL LIQUID		Non-Preferred	OTC
AVEENO SKIN RELIEF BODY WASH EXTERNAL LIQUID		Non-Preferred	OTC
AVEENO SKIN RELIEF GENTLE EXTERNAL LIQUID		Non-Preferred	OTC
AVEENO STRESS RELIEF BODY WASH EXTERNAL LIQUID		Non-Preferred	OTC
AVEENO THERAPEUTIC EXTERNAL GEL		Non-Preferred	OTC
complete ultra body wash/shear external liquid	Aveeno Daily Moisturizing Refi	Non-Preferred	OTC

Drug Name	Reference	Status	Notes
deep moisture body wash external liquid	Aveeno Daily Moisturizing Refi	Non-Preferred	OTC
<b>GRANDPAS PINE TAR BATH-SHOWER EXTERNAL GEL</b>		Non-Preferred	OTC
<b>KERI MOISTURE RICH EXTERNAL OIL</b>		Preferred	OTC
<b>NEUTROGENA RAINBATH EXTERNAL GEL</b>		Non-Preferred	OTC
<b>NIVEA SHOWER EXTERNAL GEL</b>		Non-Preferred	OTC
<b>NIVEA SHOWER/BATH EXTERNAL GEL</b>		Non-Preferred	OTC
<b>NIVEA SKIN-SMOOTHING COMPLEX EXTERNAL LIQUID</b>		Non-Preferred	OTC
purifying body wash external liquid	Aveeno Daily Moisturizing Refi	Non-Preferred	OTC
<b>ROBATHOL EXTERNAL OIL</b>		Non-Preferred	OTC
sensitive skin body wash external liquid	Aveeno Daily Moisturizing Refi	Non-Preferred	OTC
soothing body wash/oatmeal external liquid	Aveeno Daily Moisturizing Refi	Non-Preferred	OTC
<b>*BURN PRODUCT COMBINATIONS***</b>			
petersons external ointment	Unguentine	Non-Preferred	OTC
<b>UNGUENTINE EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>UNGUENTINE MAXIMUM STRENGTH EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>*BURN PRODUCTS***</b>			
mafenide acetate external packet		Non-Preferred	
<b>SILVADENE EXTERNAL CREAM</b>		Non-Preferred	
silver sulfadiazine external cream	SSD (silver sulfADIAZINE)	Preferred	
<b>SSD (SILVER SULFADIAZINE) EXTERNAL CREAM</b>		Preferred	
<b>SULFAMYLON EXTERNAL CREAM</b>		Non-Preferred	
<b>*CORTICOSTEROIDS - TOPICAL***</b>			
<b>ALA SCALP EXTERNAL LOTION</b>		Non-Preferred	PA; QL
ala-cort external cream	Cortizone-10 Intensive Moisture	Preferred	QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
alclometasone dipropionate external cream		Non-Preferred	PA; QL
alclometasone dipropionate external ointment		Non-Preferred	PA; QL
amcinonide external cream		Non-Preferred	PA; QL
anti-itch maximum strength external cream	Cortizone-10 Intensive Moisture	Preferred	OTC; QL
anti-itch spray external liquid	Cortizone-10 Maximum Strength	Non-Preferred	OTC
<b>APEXICON E EXTERNAL CREAM</b>		Non-Preferred	PA; QL
<b>AQUANIL HC EXTERNAL LOTION</b>		Preferred	OTC; QL
<b>AQUAPHOR ITCH RELIEF CHILDREN EXTERNAL OINTMENT</b>		Preferred	OTC; QL
<b>AQUAPHOR ITCH RELIEF MAX STR EXTERNAL OINTMENT</b>		Preferred	OTC; QL
beta hc external lotion	Aquanil HC	Preferred	OTC; QL
betamethasone dipropionate aug external cream		Preferred	QL
betamethasone dipropionate aug external gel		Non-Preferred	PA; QL
betamethasone dipropionate aug external lotion		Non-Preferred	PA; QL
betamethasone dipropionate aug external ointment	Diprolene	Non-Preferred	PA; QL
betamethasone dipropionate external cream		Non-Preferred	PA; QL
betamethasone dipropionate external lotion		Preferred	QL
betamethasone dipropionate external ointment		Non-Preferred	PA; QL
betamethasone valerate external cream		Preferred	QL
betamethasone valerate external foam		Non-Preferred	PA; QL
betamethasone valerate external lotion		Non-Preferred	PA; QL
betamethasone valerate external ointment		Preferred	QL
<b>BRYHALI EXTERNAL LOTION</b>		Non-Preferred	PA; QL
clobetasol propionate e external cream		Preferred	QL



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
clobetasol propionate emulsion external foam	Tovet	Non-Preferred	PA; QL
clobetasol propionate external cream		Preferred	QL
clobetasol propionate external foam		Non-Preferred	PA; QL
clobetasol propionate external gel		Preferred	QL
clobetasol propionate external liquid	Clobex Spray	Non-Preferred	PA; QL
clobetasol propionate external lotion	Clobex	Non-Preferred	PA; QL
clobetasol propionate external ointment		Preferred	QL
clobetasol propionate external shampoo	Clobex	Non-Preferred	PA; QL
clobetasol propionate external solution		Preferred	QL
<b>CLOBEX EXTERNAL LOTION</b>		Non-Preferred	PA; QL
<b>CLOBEX EXTERNAL SHAMPOO</b>		Non-Preferred	PA; QL
<b>CLOBEX SPRAY EXTERNAL LIQUID</b>		Non-Preferred	PA; QL
clocortolone pivalate external cream	Cloderm	Non-Preferred	PA; QL
<b>CLODAN EXTERNAL SHAMPOO</b>		Non-Preferred	PA; QL
<b>CLODERM EXTERNAL CREAM</b>		Non-Preferred	PA; QL
<b>CORDRAN EXTERNAL TAPE</b>		Non-Preferred	PA; QL
<b>CORTIBALM EXTERNAL STICK</b>		Non-Preferred	OTC
<b>CORTIZONE-10 COOLING EXTERNAL GEL</b>		Preferred	OTC; QL
<b>CORTIZONE-10 DIABETICS SKIN EXTERNAL LOTION</b>		Preferred	OTC; QL
<b>CORTIZONE-10 ECZEMA EXTERNAL LOTION</b>		Preferred	OTC; QL
<b>CORTIZONE-10 EXTERNAL GEL</b>		Preferred	OTC; QL
<b>CORTIZONE-10 EXTERNAL OINTMENT</b>		Preferred	OTC; QL
<b>CORTIZONE-10 HYDRATENSIVE EXTERNAL LOTION</b>		Preferred	OTC; QL
<b>CORTIZONE-10 INTENSIVE MOISTURE EXTERNAL CREAM</b>		Preferred	OTC; QL
<b>CORTIZONE-10 MAXIMUM STRENGTH EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>CORTIZONE-10 OVERNIGHT EXTERNAL CREAM</b>		Preferred	OTC; QL
<b>CORTIZONE-10 PSORIASIS EXTERNAL LOTION</b>		Preferred	OTC; QL

Drug Name	Reference	Status	Notes
<b>CORTIZONE-10 SENSITIVE SKIN EXTERNAL CREAM</b>		Preferred	OTC; QL
<b>CORTIZONE-10 SOOTHING ALOE EXTERNAL CREAM</b>		Preferred	OTC; QL
<b>CORTIZONE-10 ULTRA SOOTHING EXTERNAL CREAM</b>		Preferred	OTC; QL
<b>CORTIZONE-10 WATER RESISTANT EXTERNAL OINTMENT</b>		Preferred	OTC; QL
<b>CORTIZONE-10/ALOE EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>DERMAREST ECZEMA EXTERNAL LOTION</b>		Preferred	OTC; QL
<b>DERMA-SMOOTHIE/FS BODY EXTERNAL OIL</b>		Non-Preferred	PA; QL
desonide external cream	DesOwen	Non-Preferred	PA; QL
desonide external lotion		Non-Preferred	PA; QL
desonide external ointment		Non-Preferred	PA; QL
<b>DESOWEN EXTERNAL CREAM</b>		Non-Preferred	PA; QL
desoximetasone external cream	Topicort	Non-Preferred	PA; QL
desoximetasone external gel	Topicort	Non-Preferred	PA; QL
desoximetasone external liquid	Topicort Spray	Non-Preferred	PA; QL
desoximetasone external ointment	Topicort	Non-Preferred	PA; QL
diflorasone diacetate external cream		Non-Preferred	PA; QL
diflorasone diacetate external ointment		Non-Preferred	PA; QL
<b>DIPROLENE EXTERNAL OINTMENT</b>		Non-Preferred	PA; QL
fluocinolone acetonide body external oil	Derma-Smoothe/FS Body	Non-Preferred	PA; QL
fluocinolone acetonide external cream	Synalar	Non-Preferred	PA; QL
fluocinolone acetonide external ointment	Synalar	Non-Preferred	PA; QL
fluocinolone acetonide external solution		Non-Preferred	PA; QL
fluocinolone acetonide scalp external oil	Derma-Smoothe/FS Scalp	Non-Preferred	PA; QL
fluocinonide emulsified base external cream		Preferred	QL
fluocinonide external cream 0.05 %		Preferred	QL
fluocinonide external cream 0.1 %	Vanos	Non-Preferred	PA; QL
fluocinonide external gel		Preferred	QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
fluocinonide external ointment		Preferred	QL
fluocinonide external solution		Preferred	QL
flurandrenolide external cream		Non-Preferred	PA; QL
flurandrenolide external lotion		Non-Preferred	PA; QL
fluticasone propionate external cream		Preferred	QL
fluticasone propionate external lotion		Non-Preferred	PA; QL
fluticasone propionate external ointment		Preferred	QL
halcinonide external cream	Halog	Non-Preferred	PA; QL
halobetasol propionate external cream		Preferred	QL
halobetasol propionate external foam	Lexette	Non-Preferred	PA; QL
halobetasol propionate external ointment		Preferred	QL
<b>HALOG EXTERNAL CREAM</b>		Non-Preferred	PA; QL
<b>HALOG EXTERNAL OINTMENT</b>		Non-Preferred	PA; QL
<b>HALOG EXTERNAL SOLUTION</b>		Non-Preferred	PA; QL
hydrocortisone acetate external cream		Non-Preferred	OTC; QL
hydrocortisone acetate external ointment		Non-Preferred	OTC; QL
hydrocortisone anti-itch external cream	Cortizone-10 Intensive Moisture	Preferred	OTC; QL
hydrocortisone butyrate external cream		Non-Preferred	PA; QL
hydrocortisone butyrate external lotion	Locoid	Non-Preferred	PA; QL
hydrocortisone butyrate external ointment		Non-Preferred	PA; QL
hydrocortisone butyrate external solution		Non-Preferred	PA; QL
hydrocortisone external cream 0.5 %		Preferred	OTC; QL
hydrocortisone external cream 1 %	Cortizone-10 Intensive Moisture	Preferred	QL
hydrocortisone external cream 2.5 %		Preferred	QL
hydrocortisone external lotion 1 %	Aquanil HC	Preferred	OTC; QL
hydrocortisone external lotion 2 %	Ala Scalp	Non-Preferred	PA; QL
hydrocortisone external lotion 2.5 %		Preferred	QL
hydrocortisone external ointment 0.5 %		Preferred	OTC; QL
hydrocortisone external ointment 1 %	Aquaphor Itch Relief Children	Preferred	QL

Drug Name	Reference	Status	Notes
hydrocortisone external ointment 2.5 %		Preferred	QL
hydrocortisone max st external cream	Cortizone-10 Intensive Moisture	Preferred	OTC; QL
hydrocortisone max st external ointment	Aquaphor Itch Relief Children	Preferred	OTC; QL
hydrocortisone max st/12 moist external cream	Cortizone-10 Intensive Moisture	Preferred	OTC; QL
hydrocortisone plus external cream	Cortizone-10 Intensive Moisture	Preferred	OTC; QL
hydrocortisone valerate external cream		Non-Preferred	PA; QL
hydrocortisone valerate external ointment		Non-Preferred	PA; QL
hydrocortisone/aloe max str external cream	Cortizone-10 Intensive Moisture	Preferred	OTC; QL
<b>IMPOYZ EXTERNAL CREAM</b>		Non-Preferred	PA; QL
instacort 5 external cream		Preferred	OTC; QL
<b>KENALOG EXTERNAL AEROSOL SOLUTION</b>		Non-Preferred	PA; QL
<b>LEXETTE EXTERNAL FOAM</b>		Non-Preferred	PA; QL
<b>LOCOID EXTERNAL LOTION</b>		Non-Preferred	PA; QL
<b>MG217 PSORIASIS ANIT-ITCH EXTERNAL GEL</b>		Preferred	OTC; QL
mometasone furoate external cream		Preferred	QL
mometasone furoate external ointment		Preferred	QL
mometasone furoate external solution		Preferred	QL
<b>PANDEL EXTERNAL CREAM</b>		Non-Preferred	PA; QL
<b>SARNOL-HC EXTERNAL LOTION</b>		Preferred	OTC; QL
scalp relief maximum strength external solution	Scalpicin Maximum Strength	Preferred	OTC; QL
<b>SCALPICIN MAXIMUM STRENGTH EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>SCALPICIN MAXIMUM STRENGTH EXTERNAL SOLUTION</b>		Preferred	OTC; QL
<b>SERNIVO EXTERNAL EMULSION</b>		Non-Preferred	PA; QL
<b>SYNALAR EXTERNAL CREAM</b>		Non-Preferred	PA; QL
<b>SYNALAR EXTERNAL OINTMENT</b>		Non-Preferred	PA; QL
<b>TEXACORT EXTERNAL SOLUTION</b>		Non-Preferred	PA; QL
<b>TOPICORT EXTERNAL CREAM</b>		Non-Preferred	PA; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>TOPICORT EXTERNAL GEL</b>		Non-Preferred	PA; QL
<b>TOPICORT EXTERNAL OINTMENT</b>		Non-Preferred	PA; QL
<b>TOPICORT SPRAY EXTERNAL LIQUID</b>		Non-Preferred	PA; QL
<b>TOVET EXTERNAL FOAM</b>		Non-Preferred	PA; QL
triamcinolone acetonide external aerosol solution	Kenalog	Non-Preferred	PA; QL
triamcinolone acetonide external cream	Triderm	Preferred	QL
triamcinolone acetonide external lotion		Preferred	QL
triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %		Preferred	QL
triamcinolone acetonide external ointment 0.05 %		Non-Preferred	PA; QL
triamcinolone in absorbase external ointment		Non-Preferred	PA; QL
<b>TRIDERM EXTERNAL CREAM</b>		Preferred	PA; QL
<b>ULTRAVATE EXTERNAL LOTION</b>		Non-Preferred	PA; QL
<b>VANICREAM HC MAXIMUM STRENGTH EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>VANOS EXTERNAL CREAM</b>		Non-Preferred	PA; QL
<b>*DIAPER RASH PRODUCTS***</b>			
<b>A+D TREAT EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>AVEENO BABY SOOTHING MULTI-PUR EXTERNAL OINTMENT</b>		Preferred	OTC
<b>BALMEX MULTI-PURPOSE EXTERNAL OINTMENT</b>		Preferred	OTC
<b>BENSONS BOTTOM PAINT EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>CERAVE BABY HEALING OINTMENT EXTERNAL OINTMENT</b>		Preferred	OTC
<b>DESITIN MULTI-PURPOSE HEALING EXTERNAL OINTMENT</b>		Preferred	OTC
<b>FLANDERS BUTTOCKS EXTERNAL OINTMENT</b>		Preferred	OTC
<b>MEDI-PASTE EXTERNAL OINTMENT</b>		Preferred	OTC
<b>PALADIN EXTERNAL OINTMENT</b>		Preferred	OTC
<b>PINXAV EXTERNAL OINTMENT</b>		Preferred	OTC

Drug Name	Reference	Status	Notes
<b>*EMOLLIENT COMBINATIONS***</b>			
mineral oil-hydrophil petrolat external ointment		Preferred	OTC
<b>VITAMIN E &amp; C BEAUTY LOTION EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>VITAMIN E &amp; K BEAUTIFUL SKIN EXTERNAL OIL</b>		Non-Preferred	OTC
vitamin e beauty external oil		Non-Preferred	OTC
<b>VITAMINS E &amp; A BEAUTY OIL EXTERNAL OIL</b>		Non-Preferred	OTC
<b>VITAMINS E &amp; D BEAUTY OIL EXTERNAL OIL</b>		Non-Preferred	OTC
<b>VITA-RAY EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>*EMOLLIENT/KERATOLYTIC AGENTS***</b>			
<b>AQUA CARE EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>AQUA CARE EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>AQUAPHILIC/CARBAMIDE EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>BETA CARE BETAMIDE EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>DERMAL THERAPY FINGER CARE EXTERNAL LOTION</b>		Non-Preferred	OTC
gormel 10 external lotion	Aqua Care	Non-Preferred	OTC
gormel external cream		Preferred	OTC
<b>LANAPHILIC/UREA EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>NUTRAPLUS EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>NUTRAPLUS EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>ULTRA MIDE 25 EXTERNAL LOTION</b>		Non-Preferred	OTC
urea 10 hydrating external cream	Aqua Care	Non-Preferred	OTC
urea 20 intensive hydrating external cream		Preferred	OTC
ureacin-10 external lotion	Aqua Care	Non-Preferred	OTC
ureacin-20 external cream		Preferred	OTC
<b>*EMOLLIENT/KERATOLYTIC COMBINATIONS***</b>			
<b>ATRAC-TAIN EXTERNAL CREAM</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>KERASAL ULTRA20 EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>MYCOCIDE CX CALLUS EXFOLIATOR EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>*EMOLLIENTS***</b>			
a&d external ointment	Medpura Vitamin A & D	Preferred	OTC
advanced healing/baby external ointment	Aqua-Nu	Preferred	OTC; QL
<b>ALOE GRANDE EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>ALOE GRANDE EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>ALOE VESTA SKIN PROTECTANT EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>AMLACTIN DAILY EXTERNAL LOTION</b>		Preferred	OTC
<b>AMLACTIN RAPID RELIEF EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>AMLACTIN ULTRA SMOOTHING EXTERNAL CREAM</b>		Non-Preferred	OTC
ammonium lactate external cream		Preferred	QL
ammonium lactate external lotion	Amlactin Daily	Preferred	
<b>AQUA GLYCOLIC FACE EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>AQUA GLYCOLIC HAND/BODY EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>AQUA LACTEN EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>AQUA-CERIN EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>AQUAMED EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>AQUA-NU EXTERNAL OINTMENT</b>		Preferred	OTC; QL
<b>AQUAPHILIC EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>AQUAPHOR ADV HEALING BABY EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>AQUAPHOR ADV PROTECT HEALING EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>AQUAPHOR ADV REPAIR FOOT MASKS EXTERNAL</b>		Non-Preferred	OTC
<b>AQUAPHOR ADV REPAIR HAND MASKS EXTERNAL</b>		Non-Preferred	OTC
<b>AQUAPHOR ADV THERAPY CHILDRENS EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>AQUAPHOR ADV THERAPY HEALING EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>AQUAPHOR ADVANCED THERAPY BABY EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>AQUAPHOR ADVANCED THERAPY EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>AQUAPHOR BODY SPRY ADV THERAPY EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>AQUAPHOR EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>AQUAPHOR HEALING BALM BABY EXTERNAL STICK</b>		Non-Preferred	OTC
<b>AQUAPHOR HEALING BALM EXTERNAL STICK</b>		Non-Preferred	OTC
<b>AQUAPHOR OINTMENT BODY EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>AVEENO BABY BATH TREATMENT EXTERNAL PACKET</b>		Non-Preferred	OTC
<b>AVEENO BABY ECZEMA THERAPY EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>AVEENO BABY ECZEMA THERAPY EXTERNAL PACKET</b>		Non-Preferred	OTC
<b>AVEENO CALM &amp; RESTORE EXTERNAL GEL</b>		Non-Preferred	OTC
<b>AVEENO CALM &amp; RESTORE SERUM EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>AVEENO CREAMY MOISTURIZING EXTERNAL OIL</b>		Non-Preferred	OTC
<b>AVEENO DAILY MOISTURIZING EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>AVEENO DAILY MOISTURIZING EXTERNAL OIL</b>		Non-Preferred	OTC
<b>AVEENO DAILY MOISTURIZING FACE EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>AVEENO ECZEMA THERAPY EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>AVEENO INTENSE RELIEF HAND EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>AVEENO POSITIVELY RADIANT EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>AVEENO RESTORATIVE SKIN THERAP EXTERNAL CREAM</b>		Non-Preferred	OTC



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>AVEENO SKIN RELF MOIST REPAIR EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>AVEENO SOOTHING BATH TREATMENT EXTERNAL PACKET</b>		Non-Preferred	OTC
<b>AVEENO STRESS RELIEF EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>BAG BALM EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>BALMBARR HAND &amp; BODY EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>BALMBARR HAND &amp; BODY EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>BALMBARR MOISTURIZING EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>BALMBARR STRETCH MARK EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>BEAUTY 360 ADVANCED SKIN CARE EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
beauty lotion external lotion	DML	Preferred	OTC; QL
beta care external cream	AmLactin Ultra Smoothing	Non-Preferred	OTC
beta care external lotion	DML	Non-Preferred	OTC; QL
<b>BETA XMA EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>BIO-OIL EXTERNAL OIL</b>		Non-Preferred	OTC
<b>BOUDREAUXS BABY BUTT SMOOTH EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>CAM EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>CERAVE AM SPF 30 EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>CERAVE DAILY MOISTURIZING EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>CERAVE DIABETICS DRY SKIN EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>CERAVE HEALING EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>CERAVE MOISTURIZING EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>CERAVE PM EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>CERAVE SA ROUGH &amp; BUMPY SKIN EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>CERAVE SA ROUGH &amp; BUMPY SKIN EXTERNAL LOTION</b>		Non-Preferred	OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>CETAPHIL ADVANCED RELIEF EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>CETAPHIL DAILY ADVANCE EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>CETAPHIL DAILY FACIAL SPF 15 EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>CETAPHIL ECZEMA RESTORADERM EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>CETAPHIL MOISTURIZING EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>CETAPHIL MOISTURIZING EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>CETAPHIL PRO ECZEMA SOOTHING EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>CETAPHIL RESTORADERM EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>CETAPHIL THERAPEUTIC HAND EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>CLN FACIAL MOISTURIZER NOURISH EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>COATS ALOE EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>COATS ALOE EXTERNAL GEL</b>		Non-Preferred	OTC
<b>COATS ALOE EXTERNAL LOTION</b>		Non-Preferred	OTC
cocoa butter external lotion	DML	Non-Preferred	OTC; QL
cocoa butter hand & body external lotion	DML	Non-Preferred	OTC; QL
cocoa butter petroleum jelly external gel	Aveeno Calm & Restore	Non-Preferred	OTC
cocoa butter skin external cream	AmLactin Ultra Smoothing	Non-Preferred	OTC
coconut oil beauty external cream	AmLactin Ultra Smoothing	Non-Preferred	OTC
collagen external cream	AmLactin Ultra Smoothing	Non-Preferred	OTC
collagen premium skin external cream	AmLactin Ultra Smoothing	Non-Preferred	OTC
complete moisture external lotion	DML	Preferred	OTC; QL
<b>CORN HUSKERS EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>DAILY MOISTURIZING EXTERNAL LOTION</b>		Non-Preferred	OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>D-CERIN EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>DERMABASE EXTERNAL CREAM</b>		Non-Preferred	OTC
dermaide aloe external cream	AmLactin Ultra Smoothing	Non-Preferred	OTC
<b>DERMAL THERAPY EXTRA STRENGTH EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>DERMAL THERAPY FACE CARE EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>DERMAL THERAPY FOOT MASSAGE EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>DERMAL THERAPY HAND/ELBOW EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>DERMAL THERAPY HEEL CARE EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>DERMEND BRUISE FORMULA EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>DERMEND FRAGILE SKIN EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>DIABETIDERM EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>DIABETIDERM EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>DIABETIDERM FOOT REJUVENATING EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>DML EXTERNAL LOTION</b>		Preferred	OTC; QL
<b>DML FORTE EXTERNAL CREAM</b>		Non-Preferred	OTC
dry skin treatment adv therapy external ointment	Aqua-Nu	Preferred	OTC; QL
dry skin treatment external ointment	Aqua-Nu	Preferred	OTC; QL
e-cream complex external cream		Preferred	OTC
eczema moisturizing external lotion	Cetaphil Eczema Restoraderm	Non-Preferred	OTC
<b>ELON SKIN REPAIR SYSTEM EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>EMOLLIA-CREME EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>EMOLLIA-LOTION EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
e-oil external oil		Preferred	AL; OTC
e-ointment external ointment	Aqua-Nu	Preferred	OTC; QL
<b>EPILYT EXTERNAL LOTION</b>		Non-Preferred	OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
eucerin advanced repair external cream	AmLactin Ultra Smoothing	Non-Preferred	OTC
<b>EUCERIN ADVANCED REPAIR HAND EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>EUCERIN BABY ECZEMA RELIEF EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>EUCERIN BABY EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>EUCERIN CALMING DAILY MOIST EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>EUCERIN DAILY HYDRATION EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>EUCERIN DAILY HYDRATION EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>EUCERIN DAILY HYDRATION SPF15 EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>EUCERIN DAILY PROTECTION/SPF30 EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>EUCERIN ECZEMA RELIEF EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>EUCERIN EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>EUCERIN INTENSIVE REPAIR EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>EUCERIN INTENSIVE REPAIR EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>EUCERIN ORIGINAL HEALING EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>EUCERIN PLUS EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>EUCERIN PLUS EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>EUCERIN PROFESSIONAL REPAIR EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>EUCERIN REDNESS RELIEF NIGHT EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>EUCERIN ROUGHNESS RELIEF EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>EUCERIN ROUGHNESS RELIEF EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>EUCERIN SKIN CALMING EXTERNAL CREAM</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>EUCERIN SMOOTHING REPAIR EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
gel lined heel sleeves external	Aquaphor Adv Repair Foot Masks	Non-Preferred	OTC
gel lined moisturizing booties external	Aquaphor Adv Repair Foot Masks	Non-Preferred	OTC
gel lined moisturizing gloves external	Aquaphor Adv Repair Foot Masks	Non-Preferred	OTC
glycerin external liquid		Preferred	OTC
<b>GOLD BOND ADVANCED HEALING EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>GOLD BOND CREPE CORRECTOR EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>GOLD BOND DIABETICS DRY SKIN EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>GOLD BOND ECZEMA RELIEF EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>GOLD BOND ECZEMA RELIEF HAND EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>GOLD BOND ESSENTIALS MENS EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>GOLD BOND EVERYDAY MOISTURE EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>GOLD BOND FRICTION DEFENSE EXTERNAL STICK</b>		Non-Preferred	OTC
<b>GOLD BOND HEALING EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>GOLD BOND HEALING HAND EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>GOLD BOND MEDICATED BODY EX ST EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>GOLD BOND MEDICATED BODY EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>GOLD BOND PURE MOISTURE EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>GOLD BOND RADIANCE RENEWAL EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>GOLD BOND ULT ROUGH/BUMPY SKIN EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>GOLD BOND ULT SHEER RIBBONS EXTERNAL LOTION</b>		Non-Preferred	OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>GOLD BOND ULTIMATE EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>GOLD BOND ULTIMATE HEALING EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>GOLD BOND ULTIMATE HEALING EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>GOLD BOND ULTIMATE HEALING EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>GOLD BOND ULTIMATE OVERNIGHT EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>GOLD BOND ULTIMATE PROTECTION EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>GOLD BOND ULTIMATE RESTORING EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>GOLD BOND ULTIMATE SOFTENING EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>GOLD BOND ULTIMATE SOOTHING EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>GOLD BOND ULTIMATE SOOTHING EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>GOLD BOND ULTRA ECZEMA RELIEF EXTERNAL CREAM</b>		Non-Preferred	OTC
gordomatic external lotion	DML	Preferred	OTC; QL
<b>GORDONS-VITE A EXTERNAL CREAM</b>		Preferred	OTC
<b>GORDONS-VITE A EXTERNAL LOTION</b>		Non-Preferred	OTC
gordons-vite e external cream	Palmers Natural Vitamin E	Preferred	OTC
<b>HYDRASYN25 EXTERNAL CREAM</b>		Non-Preferred	OTC
hydrazone lotion external lotion	DML	Non-Preferred	OTC; QL
<b>HYDROLATUM EXTERNAL OINTMENT</b>		Preferred	OTC; QL
hydrophor external ointment	Aqua-Nu	Preferred	OTC; QL
<b>J &amp; J BURN CREAM EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>KERADAN EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>KERI NOURISHING SHEA BUTTER EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>KERI ORIGINAL DAILY MOISTURE EXTERNAL LOTION</b>		Non-Preferred	OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>LAC-HYDRIN FIVE EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>LACTINOL HX EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>LAMISILK REPAIR COMPLEX SERUM EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>LANAPHILIC EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
lubricating lotion external lotion	DML	Preferred	OTC; QL
<b>LUBRIDERM ADVANCED THERAPY EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>LUBRIDERM ADVANCED THERAPY EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>LUBRIDERM DAILY MOISTURE EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>LUBRIDERM EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>LUBRIDERM INTENSE SKIN REPAIR EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>LUBRISOFT EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>MEDERMA AG FACE EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>MEDERMA AG HAND &amp; BODY EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>MEDERMA STRETCH MARKS THERAPY EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>MEDPURA VITAMIN A &amp; D EXTERNAL OINTMENT</b>		Preferred	OTC
<b>MG217 ECZEMA TREATMENT EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>MINERIN EXTERNAL LOTION</b>		Preferred	OTC; QL
moisture external lotion	DML	Preferred	OTC; QL
moisture recovery external lotion	DML	Preferred	OTC; QL
moisturizing cream external cream	AmLactin Ultra Smoothing	Non-Preferred	OTC
moisturizing lotion external lotion	DML	Preferred	OTC; QL
moisturizing sensitive skin external lotion	DML	Preferred	OTC; QL
msm skin external lotion	DML	Non-Preferred	OTC; QL
natural oatmeal bath treatment external packet	Aveeno Baby Bath Treatment	Preferred	OTC
natural vitamin e moisturizing external gel		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>NEUTROGENA HAND EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>NEUTROGENA MOISTURE SENS SKIN EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>NISEKO HYDRATING FACIAL EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>NIVEA ESSENTIALLY ENRICHED EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>NIVEA EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>NIVEA EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>NIVEA IN-SHOWER EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>NIVEA INTENSE HEALING EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>NIVEA ORIGINAL MOISTURE EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>NIVEA SHEA NOURISH EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>NIVEA VISAGE EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>NIVEA VISAGE EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>NIVEA VISAGE INNER BEAUTY EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>NUTRADERM ADVANCED FORMULA EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>NUTRADERM EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>NUTRADERM EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
ointment base external ointment	Aqua-Nu	Non-Preferred	OTC; QL
<b>OKEEFFES WORKING HANDS EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>PALMERS COCOA BUTTER FORMULA EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>PALMERS COCOA BUTTER FORMULA EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>PALMERS COCONUT OIL BODY EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>PALMERS INTENSIVE RELIEF HAND EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>PALMERS NATURAL VITAMIN E EXTERNAL CREAM</b>		Preferred	OTC
<b>PALMERS NIGHT CREAM EXTERNAL CREAM</b>		Non-Preferred	OTC



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>PALMERS STRETCH MARKS EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>PALMERS STRETCH MARKS EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>PEN-KERA EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>PENTRAVAN EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>PENTRAVAN PLUS EXTERNAL CREAM</b>		Non-Preferred	OTC
pineapple peel external liquid	Aveeno Calm & Restore Serum	Non-Preferred	OTC
<b>PRETTY FEET/HANDS EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>PREVACARE TOTAL SKIN CARE EXTERNAL SOLUTION</b>		Non-Preferred	OTC
radiaguard advanced external lotion	DML	Non-Preferred	OTC; QL
refreshing aloe external lotion	DML	Preferred	OTC; QL
<b>RESTA EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>RESTA LITE EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>RISABAL-PH EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>SKIN REPAIR EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>SKINEEZ REPLENISHING GARMENT LIQUID</b>		Non-Preferred	OTC
special care external cream	AmLactin Ultra Smoothing	Non-Preferred	OTC
<b>STUDIO 35 EXTRA MOISTURIZING EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>STUDIO 35 MOISTURIZING SKIN EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>SUMMERS EVE SPA INTIMATE SKIN EXTERNAL LIQUID</b>		Non-Preferred	OTC
thera-derm external lotion	DML	Preferred	OTC; QL
therapeutic moisturizing external cream	AmLactin Ultra Smoothing	Non-Preferred	OTC
<b>UDDERLY SMOOTH EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>UDDERLY SMOOTH EXTRA CARE 20 EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>UDDERLY SMOOTH EXTRA CARE EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>VANICREAM EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>VANICREAM EXTERNAL LOTION</b>		Non-Preferred	OTC; QL

Drug Name	Reference	Status	Notes
<b>VANICREAM EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>VELVACHOL EXTERNAL CREAM</b>		Non-Preferred	OTC
vitamin a & d external ointment	Medpura Vitamin A & D	Preferred	OTC
vitamin a & d skin protectant external ointment	Medpura Vitamin A & D	Preferred	OTC
vitamin a wrinkle treatment external gel		Non-Preferred	OTC
vitamin e beauty external oil		Preferred	AL; OTC
vitamin e external cream	Palmers Natural Vitamin E	Preferred	OTC
vitamin e external liquid		Non-Preferred	OTC
vitamin e external oil		Preferred	AL; OTC
vitamin e skin external cream		Preferred	OTC
vitamin e skin external oil		Preferred	AL; OTC
vitamin e with panthenol external cream	AmLactin Ultra Smoothing	Non-Preferred	OTC
vitamin e-vit a & d external cream		Preferred	OTC
vitamins a & d external ointment	Medpura Vitamin A & D	Preferred	OTC
<b>WAXWEL PARAFFIN BATH EXTERNAL KIT</b>		Non-Preferred	OTC
<b>WIBI EXTERNAL LOTION</b>		Non-Preferred	OTC; QL
<b>*ENZYMES - TOPICAL ***</b>			
<b>NEXOBRID EXTERNAL GEL</b>		Non-Preferred	PA; QL
<b>SANTYL EXTERNAL OINTMENT</b>		Non-Preferred	PA; QL
<b>*EYELID CLEANSERS &amp; LUBRICANTS***</b>			
<b>OCUSOFT HYPOCHLOR EXTERNAL SOLUTION</b>		Non-Preferred	OTC
<b>OCUSOFT LID SCRUB ORIGINAL EXTERNAL FOAM</b>		Non-Preferred	OTC
<b>OCUSOFT LID SCRUB ORIGINAL EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>OCUSOFT LID SCRUB PLUS EXTERNAL FOAM</b>		Non-Preferred	OTC
<b>OCUSOFT LID SCRUB PLUS PLATINU EXTERNAL FOAM</b>		Non-Preferred	OTC
<b>OUST DEMODEX CLEANSER EXT ST EXTERNAL FOAM</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>THERATEARS STERILID CLEANSER EXTERNAL SOLUTION</b>		Non-Preferred	OTC
<b>VISTA MEIBO EYELID CLEANSING EXTERNAL FOAM</b>		Non-Preferred	OTC
<b>ZENOPTIQ EXTERNAL GEL</b>		Non-Preferred	OTC
<b>ZENOPTIQ EXTERNAL SOLUTION</b>		Non-Preferred	OTC
<b>*GLABELLAR LINES (FROWN LINES) AGENTS***</b>			
<b>DAXXIFY INTRAMUSCULAR SOLUTION RECONSTITUTED</b>		Non-Preferred	PA
<b>*IMIDAZOLE-RELATED ANTIFUNGALS - TOPICAL ***</b>			
alevazol external ointment		Preferred	OTC; QL
<b>ALOE VESTA ANTIFUNGAL EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
antifungal (clotrimazole) external cream	Micotrin AC	Preferred	OTC; QL
antifungal external powder	Micotrin AP	Preferred	OTC; QL
<b>AZOLEN ANTI-FUNGAL WASH EXTERNAL SOLUTION</b>		Non-Preferred	OTC; QL
<b>AZOLEN TINCTURE EXTERNAL SOLUTION</b>		Non-Preferred	OTC; QL
clotrimazole anti-fungal external cream	Micotrin AC	Preferred	OTC; QL
clotrimazole external cream	Micotrin AC	Preferred	QL
clotrimazole external solution		Preferred	QL
<b>CRITIC-AID CLEAR AF EXTERNAL OINTMENT</b>		Preferred	OTC; QL
econazole nitrate external cream		Non-Preferred	PA; QL
<b>ECOZA EXTERNAL FOAM</b>		Non-Preferred	PA; QL
<b>ERTACZO EXTERNAL CREAM</b>		Non-Preferred	PA; QL
<b>EXELDERM EXTERNAL CREAM</b>		Non-Preferred	PA; QL
<b>EXELDERM EXTERNAL SOLUTION</b>		Non-Preferred	PA; QL
<b>FUNGOID TINCTURE EXTERNAL SOLUTION</b>		Non-Preferred	OTC; QL
<b>JUBLIA EXTERNAL SOLUTION</b>		Non-Preferred	PA; QL
ketoconazole external cream		Preferred	QL
ketoconazole external shampoo		Preferred	QL
<b>KETODAN EXTERNAL FOAM</b>		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
<b>LOTRIMIN AF DEODORANT POWDER EXTERNAL AEROSOL POWDER</b>		Preferred	OTC; QL
<b>LOTRIMIN AF EXTERNAL AEROSOL</b>		Non-Preferred	OTC; QL
<b>LOTRIMIN AF EXTERNAL CREAM</b>		Non-Preferred	OTC; QL
<b>LOTRIMIN AF JOCK ITCH EXTERNAL CREAM</b>		Non-Preferred	OTC; QL
luliconazole external cream	Luzu	Non-Preferred	PA; QL
<b>LUZU EXTERNAL CREAM</b>		Non-Preferred	PA; QL
<b>MICATIN EXTERNAL CREAM</b>		Non-Preferred	OTC; QL
miconazole antifungal external cream	Micatin	Preferred	OTC; QL
miconazole nitrate external cream	Micatin	Preferred	QL
miconazole nitrate external solution	Azolen Anti-Fungal Wash	Non-Preferred	OTC; QL
miconi-al external solution	Azolen Anti-Fungal Wash	Non-Preferred	OTC; QL
<b>MICOTRIN AC EXTERNAL CREAM</b>		Preferred	OTC; QL
<b>MICOTRIN AP EXTERNAL POWDER</b>		Preferred	OTC; QL
<b>MICRO GUARD EXTERNAL POWDER</b>		Preferred	OTC; QL
<b>MYCOZYL AC EXTERNAL CREAM</b>		Preferred	OTC; QL
<b>NIZORAL EXTERNAL SHAMPOO</b>		Non-Preferred	OTC; QL
oxiconazole nitrate external cream		Non-Preferred	PA; QL
<b>OXISTAT EXTERNAL LOTION</b>		Non-Preferred	PA; QL
sulconazole nitrate external cream	Exelderm	Non-Preferred	PA; QL
sulconazole nitrate external solution	Exelderm	Non-Preferred	PA; QL
<b>TRIMAZOLE EXTERNAL CREAM</b>		Preferred	OTC; QL
votriza-al external lotion		Non-Preferred	PA; OTC
<b>*IMMUNOMODULATORS IMIDAZOQUINOLINAMINES - TOPICAL***</b>			
imiquimod external cream 3.75 %	Zyclara	Preferred	QL
imiquimod external cream 5 %		Preferred	PA; QL
imiquimod pump external cream	Zyclara	Non-Preferred	PA; QL
<b>ZYCLARA EXTERNAL CREAM</b>		Non-Preferred	PA; QL
<b>ZYCLARA PUMP EXTERNAL CREAM</b>		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
<b>*INSECT REPELLENTS***</b>			
BULL FROG MOSQUITO COAST EXTERNAL LIQUID		Non-Preferred	OTC
COLEMAN 100 MAX CONTINUOUS SPR EXTERNAL AEROSOL		Non-Preferred	OTC; QL
COLEMAN 100 MAX INSECT REPEL EXTERNAL LIQUID		Non-Preferred	OTC; QL
COLEMAN BOTANICALS INSECT REP EXTERNAL LIQUID		Non-Preferred	OTC
COLEMAN INSECT REPEL HIGH&DRY EXTERNAL AEROSOL		Non-Preferred	OTC; QL
COLEMAN INSECT REPEL SPORTSMEN EXTERNAL AEROSOL		Non-Preferred	OTC; QL
COLEMAN SKINSMART INSECT REPEL EXTERNAL AEROSOL		Non-Preferred	OTC
COLEMAN SKINSMART INSECT REPEL EXTERNAL LIQUID		Non-Preferred	OTC
CUTTER ALL FAMILY EXTERNAL AEROSOL		Non-Preferred	OTC; QL
CUTTER ALL FAMILY EXTERNAL LIQUID		Non-Preferred	OTC; QL
CUTTER BACKWOODS DRY EXTERNAL AEROSOL		Non-Preferred	OTC; QL
CUTTER BACKWOODS EXTERNAL AEROSOL		Preferred	OTC; QL
CUTTER BACKWOODS EXTERNAL LIQUID		Non-Preferred	OTC; QL
CUTTER DRY EXTERNAL AEROSOL		Non-Preferred	OTC; QL
CUTTER EXTERNAL AEROSOL		Non-Preferred	OTC; QL
CUTTER LEMON EUCALYPTUS EXTERNAL LIQUID		Non-Preferred	OTC
CUTTER NATURAL EXTERNAL AEROSOL		Non-Preferred	OTC
CUTTER NATURAL EXTERNAL LIQUID		Non-Preferred	OTC
CUTTER SKINSATIONS EXTERNAL AEROSOL		Non-Preferred	OTC; QL
CUTTER SKINSATIONS EXTERNAL LIQUID		Preferred	OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>CUTTER SPORT EXTERNAL AEROSOL</b>		Non-Preferred	OTC; QL
eagle watch mosquito elim external liquid	Coleman Botanicals Insect Rep	Non-Preferred	OTC
<b>MAXI DEET EXTERNAL LIQUID</b>		Non-Preferred	OTC; QL
<b>NATRAPEL 12-HOUR TICK/INSECT EXTERNAL AEROSOL</b>		Preferred	OTC; QL
<b>NATRAPEL EXTERNAL LIQUID</b>		Non-Preferred	OTC; QL
<b>OFF ACTIVE EXTERNAL AEROSOL</b>		Preferred	OTC; QL
<b>OFF DEEP WOODS DRY EXTERNAL AEROSOL</b>		Preferred	OTC; QL
<b>OFF DEEP WOODS EXTERNAL AEROSOL</b>		Preferred	OTC; QL
<b>OFF DEEP WOODS EXTERNAL LIQUID</b>		Non-Preferred	OTC; QL
<b>OFF DEEP WOODS SPORTSMEN EXTERNAL AEROSOL</b>		Non-Preferred	OTC; QL
<b>OFF DEEP WOODS SPORTSMEN EXTERNAL LIQUID</b>		Non-Preferred	OTC; QL
<b>OFF DEEP WOODS TOWELETTES EXTERNAL SHEET</b>		Non-Preferred	OTC
<b>OFF FAMILYCARE CLEAN FEEL EXTERNAL LIQUID</b>		Non-Preferred	OTC; QL
<b>OFF FAMILYCARE TROPICAL FRESH EXTERNAL LIQUID</b>		Non-Preferred	OTC; QL
<b>OFF FAMILYCARE UNSCENTED EXTERNAL LIQUID</b>		Non-Preferred	OTC; QL
<b>OFF SMOOTH &amp; DRY EXTERNAL AEROSOL</b>		Preferred	OTC; QL
<b>REPEL 100 EXTERNAL LIQUID</b>		Non-Preferred	OTC; QL
<b>REPEL FAMILY DRY EXTERNAL AEROSOL</b>		Non-Preferred	OTC; QL
<b>REPEL FAMILY EXTERNAL AEROSOL</b>		Non-Preferred	OTC; QL
<b>REPEL HUNTERS FORMULA EXTERNAL AEROSOL</b>		Non-Preferred	OTC; QL
<b>REPEL LEMON EUCALYPTUS EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>REPEL SPORTSMEN DRY EXTERNAL AEROSOL</b>		Preferred	OTC; QL
<b>REPEL SPORTSMEN EXTERNAL AEROSOL</b>		Preferred	OTC; QL

Drug Name	Reference	Status	Notes
REPEL SPORTSMEN MAX EXTERNAL AEROSOL		Preferred	OTC; QL
REPEL SPORTSMEN MAX EXTERNAL LIQUID		Non-Preferred	OTC; QL
REPEL SPORTSMEN MAX EXTERNAL LOTION		Non-Preferred	OTC; QL
REPEL TICK DEFENSE EXTERNAL AEROSOL		Non-Preferred	OTC; QL
SAWYER INSECT REPELLENT EXTERNAL AEROSOL		Non-Preferred	OTC; QL
SAWYER INSECT REPELLENT EXTERNAL LIQUID		Preferred	OTC; QL
SAWYER INSECT REPELLENT EXTERNAL LOTION		Non-Preferred	OTC; QL
ULTRATHON INSECT REPELLENT 8 EXTERNAL AEROSOL		Non-Preferred	OTC; QL
ULTRATHON INSECT REPELLENT EXTERNAL LOTION		Non-Preferred	OTC; QL
<b>*INTERLEUKIN-31 RECEPTOR ANTAGONISTS - SYSTEMIC***</b>			
NEMLUVIO SUBCUTANEOUS AUTO-INJECTOR		Non-Preferred	PA; SP; QL
<b>*INTIMACY PRODUCTS***</b>			
EROXON EXTERNAL GEL		Non-Preferred	OTC
<b>*KERATOLYTIC/ANTIMITOTIC/VE SICANT AGENTS***</b>			
acne external pad	Clearasil Rapid Rescue Deep	Preferred	OTC
AMBI EVEN & CLEAR CLEANSER EXTERNAL LIQUID		Non-Preferred	OTC
AMBI EVEN & CLEAR WASH EXTERNAL LIQUID		Non-Preferred	OTC
ATRIX MEDICATED FORMULA EXTERNAL CREAM		Non-Preferred	OTC
BETASAL EXTERNAL SHAMPOO		Non-Preferred	OTC
CERAVE PSORIASIS EXTERNAL CREAM		Non-Preferred	OTC
CLEAN & CLEAR ACNE SCRUB EXTERNAL GEL		Non-Preferred	OTC
CLEAN & CLEAR ACNE TREATMENT EXTERNAL GEL		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>CLEAN &amp; CLEAR BLACKHEAD ERASER EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>CLEAN &amp; CLEAR DEEP CLEANING EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>CLEAN &amp; CLEAR DUAL ACTION EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>CLEARASIL RAPID RESCUE DEEP EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>CLEARASIL RAPID RESCUE DEEP EXTERNAL PAD</b>		Preferred	OTC
<b>CLEARASIL STUBBORN ACNE 5IN1 EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>CLEARASIL STUBBORN ACNE 5IN1 EXTERNAL PAD</b>		Non-Preferred	OTC
<b>CLN ACNE CLEANSER EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>COMPOUND W COMPLETE EXTERNAL KIT</b>		Non-Preferred	OTC
<b>COMPOUND W EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>COMPOUND W FAST ACTING/CONSEAL EXTERNAL GEL</b>		Non-Preferred	OTC
<b>COMPOUND W FOR KIDS EXTERNAL STRIP</b>		Preferred	OTC
<b>COMPOUND W FREEZE OFF ADVANCED EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>COMPOUND W FREEZE OFF FOR KIDS EXTERNAL KIT</b>		Non-Preferred	OTC
<b>COMPOUND W MAXIMUM STRENGTH EXTERNAL GEL</b>		Non-Preferred	OTC
<b>COMPOUND W NITROFREEZE EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>COMPOUND W ONE STEP INVISIBLE EXTERNAL STRIP</b>		Preferred	OTC
<b>CONDYLOX EXTERNAL GEL</b>		Non-Preferred	PA; QL
corn & callus remover external liquid	Gets-It Corn/Callus Remover	Preferred	OTC
corn remover one-step external strip	Compound W for Kids	Preferred	OTC
daily face wash external liquid	Clean & Clear Deep Cleaning	Non-Preferred	OTC
<b>DENOREX EX ST MEDICATED EXTERNAL SHAMPOO</b>		Non-Preferred	OTC



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>DERMAREST PSORIASIS EXTERNAL GEL</b>		Non-Preferred	OTC
<b>DERMAREST PSORIASIS EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>DHS SAL EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>GETS-IT CORN/CALLUS REMOVER EXTERNAL LIQUID</b>		Preferred	OTC
<b>GOLD BOND PSORIASIS RELIEF EXTERNAL CREAM</b>		Non-Preferred	OTC
liquid corn & callus remover external liquid	Gets-It Corn/Callus Remover	Preferred	OTC
liquid wart remover external liquid	Gets-It Corn/Callus Remover	Preferred	OTC
<b>MEDIPLAST EXTERNAL</b>		Non-Preferred	OTC
<b>MG217 DANDRUFF SHAMPOO/COND EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>MG217 PSORIASIS MULTI-SYMPTOM EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>MG217 PSORIASIS MULTI-SYMPTOM EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>MG217 PSORIASIS THER SHAM/COND EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>NEUTROGENA BODY CLEAR WASH EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>NEUTROGENA OIL-FREE ACNE WASH EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>NEUTROGENA RAPID CLEAR EXTERNAL PAD</b>		Preferred	OTC
<b>NEUTROGENA T/SAL EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>P &amp; S EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
podofilox external gel	Condylox	Non-Preferred	PA; QL
podofilox external solution		Preferred	PA; QL
<b>SCALPICIN EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>SELSUN BLUE 3-IN-1 TREATMENT EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>SELSUN BLUE DEEP CLEANSING EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>SELSUN BLUE NATURALS DRY SCALP EXTERNAL SHAMPOO</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
therapeutic dandruff external shampoo	Betasal	Non-Preferred	OTC
therapeutic t+plus max st external shampoo	Betasal	Non-Preferred	OTC
wart remover external gel	Compound W Fast Acting/Conseal	Preferred	OTC
wart remover maximum strength external gel	Compound W Fast Acting/Conseal	Preferred	OTC
wart remover maximum strength external liquid	Gets-It Corn/Callus Remover	Preferred	OTC
<b>WARTSTICK EXTERNAL STICK</b>		Non-Preferred	OTC
<b>YCANTH EXTERNAL SOLUTION</b>		Non-Preferred	PA; QL
<b>*KERATOLYTIC/ANTIMITOTIC/VE SICANT COMBINATIONS***</b>			
<b>COMPOUND W 2-IN-1 TREATMENT EXTERNAL KIT</b>		Non-Preferred	OTC
<b>COMPOUND W FREEZE OFF EXTERNAL KIT</b>		Non-Preferred	OTC
<b>COMPOUND W FREEZE OFF PLANTAR EXTERNAL KIT</b>		Non-Preferred	OTC
<b>DR SCHOLLS FREEZE AWAY EXTERNAL KIT</b>		Non-Preferred	OTC
exfoliating moisturizer external ointment		Non-Preferred	OTC
jessners external solution		Non-Preferred	OTC
<b>KERASAL EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>*LINIMENT COMBINATIONS***</b>			
<b>ACTIVON ARTHRITIS ULTRA ST EXTERNAL STICK</b>		Non-Preferred	OTC
arthritis pain relief external patch	Salonpas Pain Relief Patch	Non-Preferred	OTC
<b>ASPERFLEX ADVANCE EXTERNAL PATCH</b>		Non-Preferred	OTC
<b>BENGAY ULTRA STRENGTH EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>BOROLEUM EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>CAMPHOTROL EXTERNAL GEL</b>		Non-Preferred	OTC
<b>CASTIVA COOLING EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>ICY HOT ADVANCED PAIN RELIEF EXTERNAL CREAM</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>ICY HOT ARTHRITIS PAIN RELIEF EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>ICY HOT EXTRA STRENGTH EXTERNAL STICK</b>		Non-Preferred	OTC
<b>KWAN LOONG PAIN RELIEVING EXTERNAL OIL</b>		Non-Preferred	OTC
limencin external lotion		Non-Preferred	OTC
medicated pain relieving external patch	HM Salonpas Pain Relief	Non-Preferred	OTC
menthol-camphor external cream		Non-Preferred	OTC
<b>MENTHOZEN EXTERNAL CREAM</b>		Non-Preferred	OTC
muscle rub ultra strength external cream	Bengay Ultra Strength	Non-Preferred	OTC
<b>NEURACIN EXTERNAL GEL</b>		Non-Preferred	OTC
<b>NUDROXICIN V2 EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>NUVIRA EXTERNAL PATCH</b>		Non-Preferred	OTC
pain relieving external liquid		Non-Preferred	OTC
pain relieving external patch	Asperflex Advance	Non-Preferred	OTC
pain relieving ultra st external cream	Bengay Ultra Strength	Non-Preferred	OTC
<b>POLAR FREEZE EXTERNAL GEL</b>		Non-Preferred	OTC
<b>SALONPAS DEEP RELIEVING EXTERNAL GEL</b>		Non-Preferred	OTC
<b>SALONPAS EXTERNAL PATCH</b>		Non-Preferred	OTC
<b>SALONPAS JET SPRAY EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>SALONPAS PAIN RELIEF PATCH EXTERNAL PATCH</b>		Non-Preferred	OTC
<b>SLOANS LINIMENT EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>SOLTICE QUICK-RUB EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>SOMBRA WARM THERAPY EXTERNAL GEL</b>		Non-Preferred	OTC
<b>TIGER BALM ARTHRITIS RUB EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>TIGER BALM EXTRA STRENGTH EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>TIGER BALM LINIMENT EXTERNAL LIQUID</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>TIGER BALM MUSCLE RUB EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>TIGER BALM NECK &amp; SHOULDER RUB EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>TIGER BALM PAIN RELIEVING EXTERNAL PATCH</b>		Non-Preferred	OTC
<b>TIGER BALM PAIN RELIEVING LG EXTERNAL PATCH</b>		Non-Preferred	OTC
<b>TIGER BALM RED EXTRA STRENGTH EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>TIGER BALM REGULAR STRENGTH EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>TIGER BALM ULTRA STRENGTH EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>TRICYLATE EXTERNAL CREAM</b>		Preferred	OTC
xoten external lotion	Castiva Cooling	Non-Preferred	OTC
<b>XOTEN-C EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>ZIKS ARTHRITIS PAIN RELIEF EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>*LINIMENTS***</b>			
analgesic creme/aloe external cream	Aspercreme Original	Non-Preferred	OTC
arthricream external cream	Aspercreme Original	Non-Preferred	OTC
arthritis relief/aloe external aerosol		Non-Preferred	OTC
<b>ASPERCREME NIGHTTIME EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>ASPERCREME ORIGINAL EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>ASPERCREME/ALOE EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>AUSTRALIAN DREAM ARTHRITIS EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>BLUE-EMU HEMP EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>BLUE-EMU MAXIMUM PAIN RELIEF EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>BLUE-EMU SUPER STRENGTH EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>COATS ALOE LINIMENT EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>DEEP BLUE RELIEF EXTERNAL GEL</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>DR JH MCLEANS VOLCANIC OIL EXTERNAL LIQUID</b>		Non-Preferred	OTC
gordobalm external lotion		Non-Preferred	OTC
ice menthol external gel	Deep Blue Relief	Non-Preferred	OTC
<b>KRT ATHLETIC MUSCLE EXTERNAL GEL</b>		Non-Preferred	OTC
mecholyl external ointment	Zarbees Chest Rub Eucalyptus	Non-Preferred	OTC
methagual external ointment	Zarbees Chest Rub Eucalyptus	Non-Preferred	OTC
methyl salicylate external cream		Non-Preferred	OTC
methyl salicylate external oil		Non-Preferred	OTC
methyl salicylate external patch		Non-Preferred	OTC
<b>MOBISYL EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>MYOFLEX EXTERNAL CREAM</b>		Non-Preferred	OTC
neuromax external gel		Non-Preferred	OTC
pain relieving external cream	Aspercreme Original	Non-Preferred	OTC
sportbalm external lotion		Non-Preferred	OTC
<b>SPORTSCREME EXTERNAL CREAM</b>		Non-Preferred	OTC
turpentine external spirit		Non-Preferred	
<b>VICKS BABYRUB EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>YAGERS LINIMENT EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>ZARBEES CHEST RUB EUCALYPTUS EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>ZARBEES SOOTH CHEST RUB BABY EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>*LOCAL ANESTHETICS - TOPICAL ***</b>			
afterburn external gel		Preferred	OTC
aftertest topical pain relief external stick		Non-Preferred	OTC
<b>ALOCANE EMERGENCY BURN MAX STR EXTERNAL AEROSOL</b>		Preferred	OTC; QL
<b>ALOCANE EMERGENCY BURN MAX STR EXTERNAL GEL</b>		Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>ALOCANE EMERGENCY BURN MAX STR EXTERNAL PAD</b>		Preferred	OTC
aloe vera burn relief external aerosol	Solarcaine Cool Aloe	Preferred	OTC; QL
aloe/lidocaine pain reliever external gel		Preferred	OTC
<b>AMERICAINE EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>ANECREAM EXTERNAL CREAM</b>		Preferred	OTC
<b>ASPERCREME LIDOCAINE ESSENTIAL EXTERNAL LIQUID</b>		Preferred	OTC
<b>ASPERCREME LIDOCAINE EXTERNAL CREAM</b>		Preferred	OTC
<b>ASPERCREME LIDOCAINE EXTERNAL LIQUID</b>		Preferred	OTC
<b>ASPERCREME LIDOCAINE EXTERNAL PATCH</b>		Preferred	OTC; QL
<b>ASPERCREME MAX STRENGTH EXTERNAL AEROSOL</b>		Preferred	OTC; QL
<b>ASPERCREME W/LIDOCAINE EXTERNAL CREAM</b>		Preferred	OTC
<b>ASPERFLEX LIDOCAINE EXTERNAL CREAM</b>		Preferred	OTC
<b>ASPERFLEX LIDOCAINE EXTERNAL OINTMENT</b>		Preferred	OTC; QL
asperflex max st external patch	Aspercreme Lidocaine	Preferred	OTC; QL
<b>ASPERFLEX PAIN RELIEVING EXTERNAL PATCH</b>		Preferred	OTC; QL
<b>BACTINE MAX DRY SPRAY EXTERNAL AEROSOL</b>		Preferred	OTC; QL
<b>BENGAY LIDOCAINE EXTERNAL CREAM</b>		Preferred	OTC
<b>BOIL EASE MAXIMUM STRENGTH EXTERNAL OINTMENT</b>		Non-Preferred	OTC
boil pain relief external ointment	Boil Ease Maximum Strength	Non-Preferred	OTC
burn jel max external kit		Non-Preferred	OTC
burn relief external aerosol solution		Non-Preferred	OTC; QL
burn relief external gel		Preferred	OTC
capsaicin arthritis relief external liquid	Capzasin	Non-Preferred	OTC
capsaicin external cream	DermacinRx Penetral	Preferred	OTC
capsaicin external patch	Salonpas-Hot	Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
capsaicin heat patch external patch	Salonpas-Hot	Preferred	OTC
capsaicin hot patch external patch	Salonpas-Hot	Preferred	OTC
capsaicin pain relief external cream	Zostrix HP	Preferred	OTC
capsaicin topical pain patch external patch	Salonpas-Hot	Preferred	OTC
capsimide external patch	Salonpas-Hot	Preferred	OTC
<b>CAPZASIN EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>CAPZASIN-HP EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>CAPZASIN-P EXTERNAL CREAM</b>		Non-Preferred	OTC
capzix external cream	Zostrix HP	Preferred	OTC
<b>CASTIVA WARMING EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>CERAVE ITCH RELIEF EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>CERAVE ITCH RELIEF EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>CIRCATA EXTERNAL CREAM</b>		Non-Preferred	OTC
cooling external gel		Preferred	OTC
<b>DERMACINRX CIRCATRIX EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>DERMEND MOISTURIZING ANTI-ITCH EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>DIABETAID PAIN/TINGLING RELIEF EXTERNAL LOTION</b>		Non-Preferred	OTC
dibucaine external ointment		Non-Preferred	OTC
<b>DOLOGESIC PAIN RELIEF ROLL-ON EXTERNAL LIQUID</b>		Preferred	OTC
dyclopro external solution		Non-Preferred	
<b>FIRST CARE PAIN RELIEF EXTERNAL PATCH</b>		Preferred	OTC; QL
<b>GLYDO EXTERNAL PREFILLED SYRINGE</b>		Non-Preferred	
<b>GOLD BOND MULTI-SYMP TOM EXTERNAL CREAM</b>		Preferred	OTC
guadalupano pain relieving external sheet		Non-Preferred	OTC
jelcaine sterile external gel	Regenecare HA	Preferred	OTC
<b>K-Y DURATION SPRAY FOR HIM EXTERNAL SOLUTION</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>LANSINOH PAIN RELIEF SPRAY EXTERNAL SOLUTION</b>		Preferred	OTC
<b>LIDAFLEX EXTERNAL PATCH</b>		Preferred	OTC
lidocaine external cream 3 %		Non-Preferred	PA; OTC
lidocaine external cream 4 %	AneCream	Preferred	OTC
lidocaine external ointment 4 %		Non-Preferred	OTC
lidocaine external ointment 5 %		Non-Preferred	PA; QL
lidocaine external patch 4 %	Aspercreme Lidocaine	Preferred	OTC; QL
lidocaine external patch 5 %	Tridacaine	Preferred	PA; QL
lidocaine hcl external cream	Aspercreme Lidocaine	Preferred	OTC
lidocaine hcl external solution		Non-Preferred	QL
lidocaine hcl urethral/mucosal external prefilled syringe	Glydo	Non-Preferred	
lidocaine max st 24 hours external patch	Aspercreme Lidocaine	Preferred	OTC; QL
lidocaine pain relief external patch	Aspercreme Lidocaine	Preferred	OTC; QL
lidocaine pain relief max st external cream	Aspercreme Lidocaine	Preferred	OTC
lidocaine pain relief max st external patch	Aspercreme Lidocaine	Preferred	OTC; QL
lidocaine pain relieving external patch	Aspercreme Lidocaine	Preferred	OTC; QL
lidocaine plus external cream	Aspercreme Lidocaine	Preferred	OTC
<b>LIDOCARE ARM/NECK/LEG EXTERNAL PATCH</b>		Non-Preferred	OTC; QL
<b>LIDOCARE BACK/SHOULDER EXTERNAL PATCH</b>		Non-Preferred	OTC; QL
<b>LIDODERM EXTERNAL PATCH</b>		Non-Preferred	PA; QL
<b>LIDODOSE EXTERNAL GEL</b>		Preferred	OTC
<b>LIDODOSE PEDIATRIC BULK PACK EXTERNAL GEL</b>		Preferred	OTC
lidotrode external patch	Aspercreme Lidocaine	Preferred	OTC; QL
<b>LMX 4 EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>LUBRICAIN EXTERNAL GEL</b>		Non-Preferred	OTC
<b>MONISTAT CARE MAX ST EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>OUTGRO PAIN RELIEF EXTERNAL LIQUID</b>		Non-Preferred	OTC
pain relief maximum strength external patch	Aspercreme Lidocaine	Preferred	OTC; QL
pain relief roll-on external liquid	Aspercreme Lidocaine	Preferred	OTC



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
pain relieving + lidocaine external cream	Aspercreme Lidocaine	Preferred	OTC
pain relieving lidocaine external patch	Aspercreme Lidocaine	Preferred	OTC; QL
<b>PHARMACIST CHOICE LIDOCAINE EXTERNAL PATCH</b>		Preferred	OTC; QL
pramoxine hcl external lotion	CeraVe Itch Relief	Non-Preferred	OTC
<b>PRAX EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>REGENECARE HA EXTERNAL GEL</b>		Preferred	OTC
<b>REGENECARE HA EXTERNAL LIQUID</b>		Preferred	OTC
<b>SALONPAS PAIN RELIEVING EXTERNAL PATCH</b>		Preferred	OTC; QL
<b>SALONPAS-HOT EXTERNAL PATCH</b>		Non-Preferred	OTC
<b>SARNA SENSITIVE EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>SOLARCAINE COOL ALOE EXTERNAL AEROSOL</b>		Preferred	OTC; QL
<b>SUN BURNT PLUS EXTERNAL GEL</b>		Preferred	OTC
sure result sr relief external cream	DermacinRx Penetral	Preferred	OTC
tetri-ag external ointment		Non-Preferred	OTC
theracare lidocaine max str external patch	Aspercreme Lidocaine	Preferred	OTC; QL
theracare pain relief external patch	Aspercreme Lidocaine	Preferred	OTC; QL
<b>THERAWORX DIABET PAIN ROLL-ON EXTERNAL LIQUID</b>		Preferred	OTC
<b>THERAWORX PAIN RELIEF ROLL-ON EXTERNAL LIQUID</b>		Preferred	OTC
<b>THERAWORX PM PAIN RELF ROLL-ON EXTERNAL LIQUID</b>		Preferred	OTC
<b>TOPICAINE EXTERNAL GEL</b>		Non-Preferred	OTC
<b>TRIDACAINE EXTERNAL PATCH</b>		Preferred	PA; QL
<b>TRIDACAINE II EXTERNAL PATCH</b>		Preferred	PA; QL
<b>TRIDACAINE III EXTERNAL PATCH</b>		Preferred	PA; QL
<b>TRILOGEL EXTERNAL GEL</b>		Preferred	OTC
ultra lido external cream	AneCream	Preferred	OTC
ultra lido external patch	Aspercreme Lidocaine	Preferred	OTC; QL
<b>VAGISIL ANTI-ITCH MEDICATED EXTERNAL</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
VAGISIL MAXIMUM STRENGTH EXTERNAL		Non-Preferred	OTC
WELMATE LIDOCAINE PAIN RELIEV EXTERNAL PATCH		Preferred	OTC; QL
XEROBURN EXTERNAL GEL		Preferred	OTC
ZOSTRIX HP EXTERNAL CREAM		Preferred	OTC
ZOSTRIX NATURAL PAIN RELIEF EXTERNAL CREAM		Non-Preferred	OTC
<b>*LUBRICANTS***</b>			
almost naked external liquid	K-Y	Non-Preferred	OTC
AQUA LUBE EXTERNAL GEL		Non-Preferred	OTC
AQUA LUBE PLUS EXTERNAL GEL		Non-Preferred	OTC
ASTROGLIDE EXTERNAL GEL		Non-Preferred	OTC
feminine moisturizer/lubricant external gel	Aqua Lube	Non-Preferred	OTC
H-R LUBRICATING JELLY 2-X EXTERNAL GEL		Non-Preferred	OTC
H-R LUBRICATING JELLY EXTERNAL GEL		Non-Preferred	OTC
H-R LUBRICATING JELLY ONE SHOT EXTERNAL GEL		Non-Preferred	OTC
HR LUBRICATING JELLY SAFEWRAP EXTERNAL GEL		Non-Preferred	OTC
K-Y EXTERNAL LIQUID		Non-Preferred	OTC
K-Y JELLY EXTERNAL GEL		Non-Preferred	OTC
K-Y LOVE PASSION EXTERNAL GEL		Non-Preferred	OTC
K-Y LUBRICATING EXTERNAL GEL		Non-Preferred	OTC
K-Y NATURAL FEELING ALOE VERA EXTERNAL LIQUID		Non-Preferred	OTC
K-Y NATURAL FEELING/HYALURONIC EXTERNAL LIQUID		Non-Preferred	OTC
K-Y TRUE FEEL DELUXE EXTERNAL LIQUID		Non-Preferred	OTC
K-Y ULTRAGEL EXTERNAL GEL		Non-Preferred	OTC
K-Y WARMING EXTERNAL GEL		Non-Preferred	OTC
K-Y WARMING EXTERNAL LIQUID		Non-Preferred	OTC
lubricating jelly external gel	Aqua Lube	Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
massage/lubricant warming external liquid	K-Y	Non-Preferred	OTC
personal lubricant external gel	Aqua Lube	Non-Preferred	OTC
personal lubricant warming external gel	Aqua Lube	Non-Preferred	OTC
personal lubricant warming external liquid	K-Y	Non-Preferred	OTC
<b>SURGILUBE EXTERNAL GEL</b>		Non-Preferred	OTC
<b>*MACROLIDE IMMUNOSUPPRESSANTS - TOPICAL***</b>			
<b>HYFTOR EXTERNAL GEL</b>		Non-Preferred	PA; QL
pimecrolimus external cream	Elidel	Preferred	PA; AL; QL
tacrolimus external ointment		Preferred	PA; AL; QL
<b>*MELANOCORTIN RECEPTOR AGONISTS (UV PROTECTIVE)***</b>			
<b>SCENESSE SUBCUTANEOUS IMPLANT</b>		Non-Preferred	PA; QL
<b>*MICROTUBULE INHIBITORS - TOPICAL***</b>			
<b>KLISYRI EXTERNAL OINTMENT</b>		Non-Preferred	PA; QL
<b>*MISC. DERMATOLOGICAL PRODUCTS***</b>			
<b>5 DAY FRESH EXTERNAL PAD</b>		Non-Preferred	OTC
bromi-lotion external lotion	DerMend Bruise Formula	Non-Preferred	OTC
calicylic external cream	Wildroot Hair	Non-Preferred	OTC
<b>CERTAIN DRI EVERYDAY STRENGTH EXTERNAL STICK</b>		Non-Preferred	OTC
cure-all external cream	Wildroot Hair	Non-Preferred	OTC
<b>DERMEND BRUISE FORMULA EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>DIABETIDERM MASSAGE STIMULATOR EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>ELON NAIL CONDITIONER EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>EPIIDE EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>FREE &amp; CLEAR EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>FREEDERM ADHESIVE REMOVER EXTERNAL LIQUID</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>FRESHN FEMININE DEODORANT EXTERNAL AEROSOL</b>		Non-Preferred	OTC
iliderm external emulsion	Aladerm Plus	Non-Preferred	
<b>JOBST IT STAYS EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>KERASAL FUNGAL NAIL RENEWAL EXTERNAL SOLUTION</b>		Non-Preferred	OTC
<b>KERASAL MULTI-PURP NAIL REPAIR EXTERNAL SOLUTION</b>		Non-Preferred	OTC
<b>KERASAL NAIL RENEWAL EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>LE STICK DEODORANT EXTERNAL STICK</b>		Non-Preferred	OTC
liquid bandage external liquid	DiabetiDerm Massage Stimulator	Non-Preferred	OTC
<b>NAIL SCRUB EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>NATUREPRO DEODORANT EXTERNAL STICK</b>		Non-Preferred	OTC
<b>NEXCARE LIQUID BANDAGE DROPS EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>NEXCARE LIQUID BANDAGE SPRAY EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>NONYX EXTERNAL GEL</b>		Non-Preferred	OTC
<b>OC8 EXTERNAL GEL</b>		Non-Preferred	OTC
<b>PROTEIN 29 HAIR GROOM EXTERNAL GEL</b>		Non-Preferred	OTC
<b>PROTEIN 29 HAIR TONIC EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>REMOVE ADHESIVE REMOVER EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>RESINOL EXTERNAL OINTMENT</b>		Non-Preferred	OTC
strip ease adhesive remover external liquid	DiabetiDerm Massage Stimulator	Non-Preferred	OTC
<b>SUMMERS EVE ACTIVE EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>SUMMERS EVE DEODORANT EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>SUMMERS EVE DEODORANT ULTRA EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>SUMMERS EVE FRESHENING EXTERNAL AEROSOL</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>SUMMERS EVE SPRAY EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>SWEATBLOCK EXTERNAL</b>		Non-Preferred	OTC
<b>SWEATBLOCK HANDS &amp; FEET EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>SWEATBLOCK MAXIMUM STRENGTH EXTERNAL</b>		Non-Preferred	OTC
<b>THUM EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>VAGISIL ODOR BLOCK DRY WASH EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>VAGISIL SCENTSITIVE DRY WASH EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>WILDROOT HAIR EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>WILDROOT HAIR GROOM EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>WILDROOT HAIR GROOM EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>YODORA DEODORANT EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>*MISC. TOPICAL COMBINATIONS***</b>			
<b>A+D FIRST AID EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
calamine external lotion		Non-Preferred	OTC
calamine-zinc oxide external lotion		Non-Preferred	OTC
calamine-zinc oxide external suspension		Non-Preferred	OTC
<b>CALASOOTHE EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>CALDESENE BABY EXTERNAL POWDER</b>		Non-Preferred	OTC
<b>CALDESENE EXTERNAL POWDER</b>		Non-Preferred	OTC
<b>CALMOSEPTINE EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>CALPROTECT EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>COMFORT CLEAN/COMFORT SHIELD EXTERNAL</b>		Non-Preferred	OTC
<b>DR SMITHS RASH + SKIN EXTERNAL OINTMENT</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>GOLD BOND EXTERNAL POWDER</b>		Non-Preferred	OTC
<b>LAMISIL AT EXTERNAL POWDER</b>		Non-Preferred	OTC
<b>MEDPURA HYDROSEPTINE EXTERNAL OINTMENT</b>		Non-Preferred	OTC
menthol-zinc oxide external ointment	Calasoothe	Non-Preferred	OTC
moisture barrier external ointment	Calmoseptine	Non-Preferred	OTC
<b>RISAMINE EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>ZINC-OXYDE PLUS EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>*MISC. TOPICAL ***</b>			
aloe vera external cream		Non-Preferred	OTC
aloe vera external gel	Sun Burnt After-Sun Gel	Non-Preferred	OTC
aloe vera moisturizing external gel		Non-Preferred	OTC
aloe vera replenishing body external gel	Sun Burnt After-Sun Gel	Non-Preferred	OTC
arnica flower tincture		Non-Preferred	
boric acid external granules		Non-Preferred	
<b>B-SURE WITCH HAZEL EXTERNAL PAD</b>		Non-Preferred	OTC
<b>DICKINSONS WITCH HAZEL EXTERNAL LIQUID</b>		Non-Preferred	OTC
green soap external tincture		Non-Preferred	OTC
hemorrhoidal external pad	B-Sure Witch Hazel	Non-Preferred	OTC
hemorrhoidal hygiene external pad	B-Sure Witch Hazel	Non-Preferred	OTC
medicated pads external pad	B-Sure Witch Hazel	Non-Preferred	OTC
medi-pads external pad	B-Sure Witch Hazel	Non-Preferred	OTC
<b>MG217 FIRST AID DRAWING SALVE EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>MG217 FIRST AID ICHTHAMMOL EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>NORMLGEL EXTERNAL GEL</b>		Non-Preferred	OTC
pre-moistened witch hazel external pad	B-Sure Witch Hazel	Non-Preferred	OTC
<b>PREPARATION H EXTERNAL PAD</b>		Non-Preferred	OTC
<b>PREPARATION H FOR WOMEN EXTERNAL PAD</b>		Non-Preferred	OTC
<b>PREPARATION H SOOTHING RELIEF EXTERNAL LIQUID</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
PREPARATION H SOOTHING RELIEF EXTERNAL PAD		Non-Preferred	OTC
QBREXZA EXTERNAL PAD		Non-Preferred	PA; QL
saline wound wash external solution	Saljet	Non-Preferred	OTC
SALJET EXTERNAL SOLUTION		Non-Preferred	OTC
SALJET RINSE EXTERNAL SOLUTION		Non-Preferred	OTC
SOFDRA EXTERNAL GEL		Non-Preferred	PA; QL
SUN BURNT AFTER-SUN GEL EXTERNAL GEL		Non-Preferred	OTC
SUN BURNT DAILY MOISTURIZING EXTERNAL LOTION		Non-Preferred	OTC
TN DICKINSONS WITCH HAZEL EXTERNAL LIQUID		Non-Preferred	OTC
TN DICKINSONS WITCH HAZEL EXTERNAL PAD		Non-Preferred	OTC
witch hazel external liquid	Dickinsons Witch Hazel	Non-Preferred	OTC
witch hazel external solution		Non-Preferred	OTC
WOUND WASH SALINE EXTERNAL SOLUTION		Non-Preferred	OTC
<b>*NIT REMOVERS***</b>			
LICEMD EXTERNAL GEL		Non-Preferred	OTC
LICEOUT EXTERNAL GEL		Non-Preferred	OTC
LYCELLE EXTERNAL GEL		Non-Preferred	OTC
MEDI-LICE COMBING EXTERNAL GEL		Non-Preferred	OTC
NIX ULTRA 2-IN-1 LICE SYSTEM EXTERNAL KIT		Non-Preferred	OTC
NIX ULTRA EXTERNAL KIT		Non-Preferred	OTC
NIX ULTRA LICE REMOVAL KIT EXTERNAL KIT		Non-Preferred	OTC
SCHOOLTIME SHAMPOO EXTERNAL SHAMPOO		Non-Preferred	OTC
STOP LICE STEP 2 EXTERNAL GEL		Non-Preferred	OTC
<b>*OXABOROLE-RELATED ANTIFUNGALS - TOPICAL ***</b>			
tavaborole external solution		Non-Preferred	PA; QL
<b>*PHOSPHODIESTERASE 4 (PDE4) INHIBITORS - TOPICAL ***</b>			
EUCRISA EXTERNAL OINTMENT		Non-Preferred	PA; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>ZORYVE EXTERNAL CREAM</b>		Non-Preferred	PA; QL
<b>*PHOTODYNAMIC THERAPY AGENTS - TOPICAL***</b>			
<b>AMELUZ EXTERNAL GEL</b>		Non-Preferred	
<b>LEVULAN KERASTICK EXTERNAL SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>*PODIATRIC PRODUCT - COMBINATIONS***</b>			
gordomatic external crystals		Non-Preferred	OTC
<b>*PODIATRIC PRODUCTS***</b>			
<b>AMLACTIN FOOT CREAM THERAPY EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>AMLACTIN FOOT REPAIR EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>AQUAPHOR ADV THERAPY FEET EXTERNAL OINTMENT</b>		Non-Preferred	OTC
cracked heel skin softener external ointment	Aquaphor Adv Therapy Feet	Non-Preferred	OTC
daily exfoliating cleanser external liquid	Lamisilk Cleanse	Non-Preferred	OTC
<b>DR TEALS SHEA ENRICHED FOOT EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>ELON HERBAL FOOT EXTERNAL CREAM</b>		Non-Preferred	OTC
eucerin advanced repair foot external cream	AmLactin Foot Cream Therapy	Non-Preferred	OTC
<b>EXFOLIX EXFOLIATING FOOT SOAP EXTERNAL BAR</b>		Non-Preferred	OTC
<b>FLEXITOL HEEL BALM EXTERNAL OINTMENT</b>		Non-Preferred	OTC
foot treatment advanced external ointment	Aquaphor Adv Therapy Feet	Non-Preferred	OTC
<b>GOLD BOND FOOT EXTERNAL CREAM</b>		Non-Preferred	OTC
heel balm external ointment	Aquaphor Adv Therapy Feet	Non-Preferred	OTC
<b>LAMISILK CLEANSE EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>LAMISILK PROTECT EXTERNAL LIQUID</b>		Non-Preferred	OTC



Drug Name	Reference	Status	Notes
<b>PALMERS FOOT MAGIC SCRUB EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>PALMERS HEEL REPAIR EXTERNAL STICK</b>		Non-Preferred	OTC
<b>SLEEP-N-HEEL EXTERNAL KIT</b>		Non-Preferred	OTC
<b>TOETAL FRESH EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>UDDERLY SMOOTH FOOT EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>*POISON IVY PRODUCT COMBINATIONS***</b>			
poison ivy treatment external aerosol		Non-Preferred	OTC
<b>*POISON IVY PRODUCTS***</b>			
ivy wash poison ivy cleanser external lotion		Non-Preferred	OTC
<b>IVY-RID EXTERNAL AEROSOL</b>		Non-Preferred	OTC
poison ivy wash external	Zanfel	Non-Preferred	OTC
poison ivy wash external lotion		Non-Preferred	OTC
<b>TECNU EXTREME POISON IVY &amp; OAK EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>TECNU OUTDOOR SKIN CLEANSER EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>ZANFEL EXTERNAL</b>		Non-Preferred	OTC
<b>*POWDERS***</b>			
<b>AMB ANTI FRICTION BODY EXTERNAL POWDER</b>		Non-Preferred	OTC
<b>ANTI MONKEY BUTT EXTERNAL POWDER</b>		Non-Preferred	OTC
baby cornstarch external powder	Summers Eve Body/Island Splash	Non-Preferred	OTC
baby powder external powder		Non-Preferred	OTC
<b>BALMEX BABY EXTERNAL POWDER</b>		Non-Preferred	OTC
<b>COLUMBIA ANTISEPTIC EXTERNAL POWDER</b>		Non-Preferred	OTC
<b>DR SCHOLLS ODOR-X/SWEATMAX EXTERNAL AEROSOL POWDER</b>		Non-Preferred	OTC
<b>GOLD BOND NO MESS BODY POWDER EXTERNAL AEROSOL POWDER</b>		Non-Preferred	OTC
<b>GOLD BOND ULTIMATE EXTERNAL POWDER</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
LADY ANTI MONKEY BUTT EXTERNAL POWDER		Non-Preferred	OTC
SUMMERS EVE BODY EXTERNAL POWDER		Non-Preferred	OTC
SUMMERS EVE BODY/ISLAND SPLASH EXTERNAL POWDER		Non-Preferred	OTC
SUMMERS EVE FEMININE EXTERNAL POWDER		Non-Preferred	OTC
VAGISIL DEODORANT EXTERNAL POWDER		Non-Preferred	OTC
ZEASORB (CORN STARCH) EXTERNAL POWDER		Non-Preferred	OTC
<b>*ROSACEA AGENTS***</b>			
azelaic acid external gel	Finacea	Non-Preferred	PA; QL
brimonidine tartrate external gel	Mirvaso	Non-Preferred	QL
doxycycline oral capsule delayed release	Oracea	Non-Preferred	PA; QL
FINACEA EXTERNAL FOAM		Non-Preferred	PA; QL
FINACEA EXTERNAL GEL		Non-Preferred	PA; QL
ivermectin external cream	Soolantra	Non-Preferred	PA; QL
METROCREAM EXTERNAL CREAM		Non-Preferred	PA; QL
METROGEL EXTERNAL GEL		Non-Preferred	PA; QL
METROLOTION EXTERNAL LOTION		Non-Preferred	PA; QL
metronidazole external cream	MetroCream	Preferred	QL
metronidazole external gel	Metrogel	Preferred	QL
metronidazole external lotion	MetroLotion	Preferred	QL
MIRVASO EXTERNAL GEL		Non-Preferred	QL
NORITATE EXTERNAL CREAM		Non-Preferred	PA; QL
ORACEA ORAL CAPSULE DELAYED RELEASE		Non-Preferred	PA; QL
RHOFADE EXTERNAL CREAM		Non-Preferred	
SOOLANTRA EXTERNAL CREAM		Non-Preferred	PA; QL
ZILXI EXTERNAL FOAM		Non-Preferred	PA; QL
<b>*SCABICIDE COMBINATIONS***</b>			
lice killing external shampoo	Rid Lice Killing Shampoo	Preferred	OTC
lice killing maximum strength external shampoo	Rid Lice Killing Shampoo	Preferred	OTC

Drug Name	Reference	Status	Notes
<b>NIX COMPLETE LICE TREATMENT COMBINATION KIT</b>		Non-Preferred	OTC
<b>RID LICE KILLING SHAMPOO EXTERNAL SHAMPOO</b>		Preferred	OTC
<b>VANALICE EXTERNAL GEL</b>		Non-Preferred	OTC
<b>*SCABICIDES &amp; PEDICULICIDES***</b>			
bedding spray lice treatment aerosol		Preferred	OTC
<b>CROTAN EXTERNAL LOTION</b>		Non-Preferred	QL
ivermectin external lotion	Sklice	Non-Preferred	PA; QL
lice treatment external liquid	Nix Creme Rinse	Preferred	OTC; QL
malathion external lotion	Ovide	Non-Preferred	PA; QL
<b>NATROBA EXTERNAL SUSPENSION</b>		Non-Preferred	QL
<b>NIX CREME RINSE EXTERNAL LIQUID</b>		Non-Preferred	OTC; QL
<b>NIX LICE KILLING SPRAY LIQUID</b>		Non-Preferred	OTC
<b>OVIDE EXTERNAL LOTION</b>		Non-Preferred	QL
permethrin external cream		Preferred	QL
<b>SKLICE EXTERNAL LOTION</b>		Non-Preferred	PA; QL
spinosad external suspension	Natroba	Preferred	QL
<b>*SCAR TREATMENT PRODUCTS - COMBINATIONS***</b>			
dermovix external patch		Non-Preferred	OTC
<b>*SCAR TREATMENT PRODUCTS***</b>			
advanced scar external gel	Copaderm	Non-Preferred	OTC
<b>AVOSIL EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>COPADERM EXTERNAL GEL</b>		Non-Preferred	OTC
<b>COPASIL EXTERNAL GEL</b>		Non-Preferred	
<b>MEDERMA ADVANCED SCAR GEL EXTERNAL GEL</b>		Non-Preferred	OTC
<b>MEDERMA EXTERNAL GEL</b>		Non-Preferred	OTC
<b>MEDERMA FOR KIDS EXTERNAL GEL</b>		Non-Preferred	OTC
<b>MEDERMA SPF 30 EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>PALMERS SCAR SERUM EXTERNAL LIQUID</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
scar external gel	Copaderm	Non-Preferred	OTC
scar gel external gel	Copaderm	Non-Preferred	OTC
<b>SCARAWAY EXTERNAL GEL</b>		Non-Preferred	OTC
scarcin external cream	Mederma SPF 30	Non-Preferred	OTC
skarcade external pad		Non-Preferred	OTC
skarjel external gel	Copaderm	Non-Preferred	OTC
<b>*SEBORRHEIC KERATOSIS PRODUCTS**</b>			
<b>ESKATA EXTERNAL SOLUTION</b>		Non-Preferred	
<b>*SHAMPOOS***</b>			
<b>CLN HEALTHY SCALP EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>CLN MOISTURE RICH GENTLE EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>DARA EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>DHS COLOR SAFE EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>DHS COLOR SAFE RINSE/PANTHENOL EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>DHS CONDITIONING RINSE EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>DHS EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
dry shampoo external aerosol		Non-Preferred	OTC
<b>FREE &amp; CLEAR EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>ULTRASWIM CHLORINE REMOVAL EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>ULTRASWIM EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>ULTRASWIM ULTRA REPAIR EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>*SKIN CLEANSERS***</b>			
advanced hand sani/aloe/vit e external liquid		Non-Preferred	OTC
advanced hand sanitizer external liquid		Non-Preferred	OTC
advanced hand sanitizer/aloe external liquid		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
advanced hand sanitizer/vit e external liquid		Non-Preferred	OTC
alcohol wipes external		Non-Preferred	OTC
<b>ALOE VESTA CLEANSING FOAM EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>ALOE VESTA MULTI PURPOSE EXTERNAL FOAM</b>		Non-Preferred	OTC
<b>ALOE VESTA PERINEAL/SKIN EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>BALNEOL EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>CARETOUCH HAND SANITIZER EXTERNAL GEL</b>		Non-Preferred	OTC
ca-rezz norisc external liquid	Aloe Vesta Cleansing Foam	Non-Preferred	OTC
<b>CHANTAL ANTI-BACTERIAL HAND EXTERNAL GEL</b>		Non-Preferred	OTC
<b>CLEVER CHOICE HAND SANITIZER EXTERNAL GEL</b>		Non-Preferred	OTC
<b>GERMPHOBIC HAND SANITIZER EXTERNAL SOLUTION</b>		Non-Preferred	OTC
<b>GERM-X CITRUS HAND SANITIZER EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>GERM-X ORIGINAL HAND SANITIZER EXTERNAL LIQUID</b>		Non-Preferred	OTC
hand sanitizer external gel		Non-Preferred	OTC
hand sanitizer/aloe/vitamin e external liquid		Non-Preferred	OTC
<b>HANDCLEAN HAND SANITIZER EXTERNAL GEL</b>		Non-Preferred	OTC
hygienic cleansing external lotion	Balneol	Non-Preferred	OTC
<b>INSTACLEAN EXTERNAL LIQUID</b>		Non-Preferred	OTC
instant hand sanitizer external liquid	Germ-x Citrus Hand Sanitizer	Non-Preferred	OTC
isopropyl alcohol external		Non-Preferred	OTC
isopropyl alcohol external liquid	Medi-First Isopropyl Alcohol	Non-Preferred	OTC
<b>LANTESEPTIC CLEANSING FOAM EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>LANTISEPTIC ALL BODY WASH EXTERNAL LIQUID</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>LANTISEPTIC DAILY BODY WASH EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>LANTISEPTIC NO-RINSE FOAM EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>LANTISEPTIC PERINEAL WASH EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>MEDI-FIRST ANTISEPTIC CLEANER EXTERNAL GEL</b>		Non-Preferred	OTC
<b>MEDI-FIRST ISOPROPYL ALCOHOL EXTERNAL LIQUID</b>		Non-Preferred	OTC
medpura alcohol pads external		Non-Preferred	OTC
medpura hand sanitizer external gel		Non-Preferred	OTC
medpura hand sanitizer external solution		Non-Preferred	OTC
<b>NEW DIGNITY ODOR ELIMINATOR EXTERNAL SOLUTION</b>		Non-Preferred	OTC
one step perineal external lotion	Balneol	Non-Preferred	OTC
<b>PALMERS SKIN THERAPY CLEANSING EXTERNAL OIL</b>		Non-Preferred	OTC
<b>PERICLEAN EXTERNAL LIQUID</b>		Non-Preferred	OTC
perineal skin cleanser external liquid	Aloe Vesta Cleansing Foam	Non-Preferred	OTC
<b>PERISCENT EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>PREVACARE ANTIMICROBIAL EXTERNAL GEL</b>		Non-Preferred	OTC
<b>PROSHIELD FOAM/SPRAY CLEANSER EXTERNAL FOAM</b>		Non-Preferred	OTC
<b>PROSHIELD SPRAY CLEANSER EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>SENSI-CARE PERINEAL/SKIN EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>*SKIN OILS***</b>			
<b>ALPHA KERI SHOWER &amp; BATH EXTERNAL OIL</b>		Non-Preferred	OTC
baby oil external oil	Alpha Keri Shower & Bath	Non-Preferred	OTC
castor oil external oil	Alpha Keri Shower & Bath	Non-Preferred	OTC
<b>NEUTROGENA BODY EXTERNAL OIL</b>		Non-Preferred	OTC
<b>NIVEA EXTERNAL OIL</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>NIVEA SKIN EXTERNAL OIL</b>		Non-Preferred	OTC
<b>NUTRADERM EXTERNAL OIL</b>		Non-Preferred	OTC
<b>PALMERS SKIN THERAPY EXTERNAL OIL</b>		Non-Preferred	OTC
skin treatment external oil	Alpha Keri Shower & Bath	Non-Preferred	OTC
therabath external oil	Alpha Keri Shower & Bath	Non-Preferred	OTC
<b>*SKIN PROTECTANTS***</b>			
<b>ABSORBASE EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
adult wash cloths with aloe external	Comfort Shield	Non-Preferred	OTC
<b>AFTER BITE EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>AFTER BITE KIDS EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>ALOE VESTA PROTECTIVE EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>ALOE VESTA SKIN CONDITIONER EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>AMEDA TRIPLE ZERO LANOLIN EXTERNAL CREAM</b>		Preferred	OTC
<b>AMERICERIN EXTERNAL CREAM</b>		Preferred	OTC; QL
<b>AMERIDERM PERISHIELD EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>AMERIGEL BARRIER EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>AMERIGEL CARE EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>AMERIPHOR EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>AMERISTORE EXTERNAL LOTION</b>		Preferred	OTC
aquagard hydrating external ointment	Absorbbase	Non-Preferred	OTC; QL
<b>AQUAPHOR LIP REPAIR EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>AQUAPHOR LIP REPAIR EXTERNAL STICK</b>		Non-Preferred	OTC
<b>AVEENO BABY CALMING COMFORT EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>AVEENO BABY DAILY MOISTURE EXTERNAL LOTION</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>AVEENO DAILY MOISTURIZING EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>AVEENO INTENSE RELIEF EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>AVEENO SKIN RELIEF EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>BALMEX SKIN PROTECTANT EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>BASIS FACIAL MOISTURIZER EXTERNAL CREAM</b>		Non-Preferred	OTC; QL
<b>BASIS OVERNIGHT EXTERNAL CREAM</b>		Non-Preferred	OTC; QL
beeswax lip balm external stick	Aquaphor Lip Repair	Non-Preferred	OTC
benzoin compound external tincture	Steri-Strip Compound Benzoin	Non-Preferred	
benzoin external tincture		Non-Preferred	
blood clotting spray external aerosol		Non-Preferred	OTC
<b>BOUDREAU'S BUTT PASTE EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>BOUDREAU'S RASH PREVENTOR EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>CARMEX CLASSIC LIP BALM EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>CARMEX COMFORT CARE LIP BALM EXTERNAL STICK</b>		Non-Preferred	OTC
<b>CERAVE THERAPEUTIC HAND CREAM EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>CHAP-AID EXTERNAL STICK</b>		Non-Preferred	OTC
<b>CHAPSTICK BOTANICAL MEDLEY EXTERNAL STICK</b>		Non-Preferred	OTC
<b>CHAPSTICK CLASSIC MEDICATED EXTERNAL STICK</b>		Non-Preferred	OTC
<b>CHAPSTICK EXTERNAL STICK</b>		Non-Preferred	OTC
<b>CHAPSTICK FLAVA-CRAZE EXTERNAL STICK</b>		Non-Preferred	OTC
<b>CHAPSTICK FRESH EFFECTS EXTERNAL STICK</b>		Non-Preferred	OTC
<b>CHAPSTICK HYDRATION LOCK EXTERNAL STICK</b>		Non-Preferred	OTC
<b>CHAPSTICK MEDICATED EXTERNAL STICK</b>		Non-Preferred	OTC



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>CHAPSTICK MIXSTIX EXTERNAL STICK</b>		Non-Preferred	OTC
<b>CHAPSTICK NATURALS LIP BUTTER EXTERNAL STICK</b>		Non-Preferred	OTC
<b>CHAPSTICK OVERNIGHT EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>CHAPSTICK TRUE SHIMMER EXTERNAL STICK</b>		Non-Preferred	OTC
<b>CHAPSTICK ULTRA RENEWAL EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>CHAPSTICK ULTRA SHIMMER EXTERNAL STICK</b>		Non-Preferred	OTC
<b>CHAPSTICK ULTRASMMOOTH FORTIFY EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>CHAPSTICK ULTRASMMOOTH NOURISH EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>CHAPSTICK ULTRASMMOOTH REJUVEN EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>CHAPSTICK ULTRASMMOOTH SOOTHE EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>COMFORT SHIELD EXTERNAL</b>		Non-Preferred	OTC
<b>CRITIC-AID CLEAR EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>CRITIC-AID THICK MOIST BARRIER EXTERNAL PASTE</b>		Non-Preferred	OTC
daily care skin protectant external ointment		Non-Preferred	OTC
<b>DAILY MOISTURIZING EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>DERMAFIX EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>DERMAFIX EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>DIMOPAIR EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>ELON BARRIER PROTECTANT EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>ENOVASHIELD EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>EUCERIN ORIGINAL HEALING EXTERNAL CREAM</b>		Non-Preferred	OTC; QL
<b>GLOVES IN A BOTTLE EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>GOLD BOND ULTIMATE EXTERNAL CREAM</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>HPA LANOLIN EXTERNAL CREAM</b>		Preferred	OTC
hydrocerin external cream	AmeriCerin	Non-Preferred	OTC; QL
<b>ILEX SKIN PROTECTANT EXTERNAL PASTE</b>		Non-Preferred	OTC
<b>INTERDRY 10"X144" EXTERNAL SHEET</b>		Non-Preferred	OTC
<b>LANOLOR EXTERNAL CREAM</b>		Non-Preferred	OTC
lan-o-smooth external cream	Ameda Triple Zero Lanolin	Preferred	OTC
<b>LANSINOH LANOLIN EXTERNAL CREAM</b>		Preferred	OTC
<b>LANSINOH LANOLIN MINIS NIPPLE EXTERNAL CREAM</b>		Preferred	OTC
<b>LANSINOH LANOLIN NIPPLE EXTERNAL CREAM</b>		Preferred	OTC
lip balm external ointment	Absorbase	Non-Preferred	OTC; QL
lip balm external stick	Aquaphor Lip Repair	Non-Preferred	OTC
lip-care external stick	Aquaphor Lip Repair	Non-Preferred	OTC
<b>MEDELA TENDER CARE LANOLIN EXTERNAL CREAM</b>		Preferred	OTC
<b>MEDERMA PM EXTERNAL CREAM</b>		Non-Preferred	OTC
medi-soothe external lotion	Ameristore	Preferred	OTC
mineral oil light external oil		Non-Preferred	OTC
<b>MINERIN CREME EXTERNAL CREAM</b>		Preferred	OTC; QL
moisturizing skin protectant external cream		Non-Preferred	OTC
<b>MONISTAT COMPLETE CARE EXTERNAL GEL</b>		Non-Preferred	OTC
natural oatmeal external lotion	Aveeno Baby Calming Comfort	Non-Preferred	OTC
<b>NEOSPORIN LIP HEALTH OVERNIGHT EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
<b>NORMLSHIELD EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>PALMERS SWIVEL STICK EXTERNAL STICK</b>		Non-Preferred	OTC
<b>PERISHIELD EXTERNAL OINTMENT</b>		Non-Preferred	OTC; QL
petroleum jelly lip treatment external ointment	Absorbase	Non-Preferred	OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>PREVACARE EXTRA PROTECTIVE EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>PREVACARE PERSONAL PROTECT EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>PROSHIELD SKIN CARE EXTERNAL KIT</b>		Non-Preferred	OTC
<b>RESTORE CLEANSER &amp; MOISTURIZER EXTERNAL LIQUID</b>		Non-Preferred	OTC
restore dimethicreme external cream	Chapstick Ultra Renewal	Non-Preferred	OTC
<b>SCARZEN EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>SECURA DIMETHICONE PROTECTANT EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>SENSI-CARE MOISTURIZING EXTERNAL CREAM</b>		Non-Preferred	OTC; QL
<b>SORBIDON HYDRATE EXTERNAL CREAM</b>		Non-Preferred	OTC; QL
<b>STERI-STRIP COMPOUND BENZOIN EXTERNAL TINCTURE</b>		Non-Preferred	OTC
super duper diaper doo external gel		Non-Preferred	OTC
<b>SUPERSOFT EXTERNAL LOTION</b>		Preferred	OTC
<b>SWEEN 24 ONCE A DAY EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>THE ITCH ERASER SENSITIVE EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>THERASEAL HAND PROTECTION EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>THERATEIN EXTERNAL LOTION</b>		Preferred	OTC
<b>*SOAPS***</b>			
<b>ACNE-AID EXTERNAL BAR</b>		Non-Preferred	OTC
<b>ACUWASH EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>ALBOLENE MOISTURIZING CLEANSER EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>ALOE VESTA BODY WASH/SHAMPOO EXTERNAL LIQUID</b>		Non-Preferred	OTC
anti-bacterial hand external lotion	Aquanil Skin Cleanser	Non-Preferred	OTC
<b>AQUA GLYCOLIC FACIAL CLEANSER EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>AQUA GLYCOLIC SHAMPOO/BODY EXTERNAL LIQUID</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>AQUA GLYCOLIC TONER EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>AQUANIL SKIN CLEANSER EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>AVEENO BABY CALMING COMFORT EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>AVEENO BABY CLEANSING THERAPY EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>AVEENO CALM &amp; RESTORE CLEANSER EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>AVEENO CALM &amp; RESTORE MAKEUP EXTERNAL PAD</b>		Non-Preferred	OTC
<b>AVEENO DAILY MOISTURIZ FACIAL EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>AVEENO MOISTURIZING EXTERNAL BAR</b>		Non-Preferred	OTC
<b>AVEENO SKIN BRIGHTENING SCRUB EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>BASIS ALL CLEAR EXTERNAL BAR</b>		Non-Preferred	OTC
<b>BASIS CLEANSER EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>BASIS COMBINATION EXTERNAL BAR</b>		Non-Preferred	OTC
<b>BASIS EXTRA DRY EXTERNAL BAR</b>		Non-Preferred	OTC
<b>BASIS NORMAL/DRY EXTERNAL BAR</b>		Non-Preferred	OTC
<b>BASIS SENSITIVE SKIN EXTERNAL BAR</b>		Non-Preferred	OTC
body wash & shampoo external foam		Non-Preferred	OTC
<b>BOUDREAUXS BUTT BATH EXTERNAL LIQUID</b>		Non-Preferred	OTC
castile soap towelettes external pad	Aveeno Calm & Restore Makeup	Non-Preferred	OTC
<b>CERAVE FOAMING FACIAL CLEANSER EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>CERAVE HYDRATING CLEANSER EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>CERAVE SA BODY WASH EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>CETAPHIL DERMACONTROL FOAM WSH EXTERNAL LIQUID</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>CETAPHIL EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>CETAPHIL GENTLE CLEANSER EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>CETAPHIL GENTLE CLEANSING EXTERNAL BAR</b>		Non-Preferred	OTC
<b>CETAPHIL RESTORADERM EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>CLEAN &amp; CLEAR ABSORBING SHEETS EXTERNAL PAD</b>		Non-Preferred	OTC
<b>CLEAN &amp; CLEAR ALOE VERA CLEANS EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>CLEAN &amp; CLEAR DEEP ACTION EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>CLEAN &amp; CLEAR DEEP ACTION EXTERNAL GEL</b>		Non-Preferred	OTC
<b>CLEAN &amp; CLEAR ESSENTIALS EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>CLEAN &amp; CLEAR FACIAL CLEANSER EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>CLEAN &amp; CLEAR MORNING BURST EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>CLEAN &amp; CLEAR MORNING SCRUB EXTERNAL GEL</b>		Non-Preferred	OTC
<b>CLEAN &amp; CLEAR NIGHT RELAX WASH EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>CLEAN &amp; CLEAR PORE CLEANSER EXTERNAL CREAM</b>		Non-Preferred	OTC
cleansing external cream	Albolene Moisturizing Cleanser	Non-Preferred	OTC
<b>CLN BODY WASH EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>CLN FACIAL CLEANSER EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>CLN HAND &amp; FOOT WASH EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>CLN SPORT WASH HIGH PERFORM EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>CLN SPORTWASH EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>CONTI CASTILE SOAP EXTERNAL BAR</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>DIABETIDERM CLEANSING EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>DICKINSONS WITCH HAZEL EXTERNAL PAD</b>		Non-Preferred	OTC
<b>EUCERIN ADVANCED CLEANSING EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>EUCERIN EXTERNAL BAR</b>		Non-Preferred	OTC
<b>EUCERIN HYDRATING CLEANSING EXTERNAL GEL</b>		Non-Preferred	OTC
<b>EUCERIN RED RELIEF CLEANSING EXTERNAL GEL</b>		Non-Preferred	OTC
<b>EUCERIN SKIN CALMING BODY WASH EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>EYESCRUB EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>FREE &amp; CLEAR/SENSITIVE EXTERNAL LIQUID</b>		Non-Preferred	OTC
gentle cleansing skin external cream	Albolene Moisturizing Cleanser	Non-Preferred	OTC
gentle skin cleanser external liquid	AcuWash	Non-Preferred	OTC
gentle skin cleanser external lotion	Aquanil Skin Cleanser	Non-Preferred	OTC
<b>GOLD BOND ULT WASH/EXFOLIATING EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>GOLD BOND ULT WASH/HEALING EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>GOLD BOND ULT WASH/SENSITIVE EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>GOLD BOND ULT WASH/SOFTENING EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>GRANDPAS BAKING SODA SOAP EXTERNAL BAR</b>		Non-Preferred	OTC
<b>GRANDPAS INDIAN CORN SOAP EXTERNAL BAR</b>		Non-Preferred	OTC
<b>GRANDPAS LOVE MY LOOFAH SOAP EXTERNAL BAR</b>		Non-Preferred	OTC
<b>GRANDPAS OATMEAL SOAP EXTERNAL BAR</b>		Non-Preferred	OTC
<b>GRANDPAS ORANGE ESSENCE SOAP EXTERNAL BAR</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>GRANDPAS PATCHOULI SOAP EXTERNAL BAR</b>		Non-Preferred	OTC
<b>GRANDPAS SHEA BUTTER SOAP EXTERNAL BAR</b>		Non-Preferred	OTC
<b>GRANDPAS WITCH HAZEL SOAP EXTERNAL BAR</b>		Non-Preferred	OTC
<b>IONIL EXTERNAL LIQUID</b>		Non-Preferred	OTC
kp gentle skin cleanser external liquid	AcuWash	Non-Preferred	OTC
<b>LOBOB CONTACT LENS WEARER SOAP EXTERNAL BAR</b>		Non-Preferred	OTC
<b>MEDERMA AG BODY CLEANSER EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>MEDERMA AG FACIAL CLEANSER EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>MEDERMA AG FACIAL TONER EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>NATURE DE FRANCE ALGOLI SOAP EXTERNAL BAR</b>		Non-Preferred	OTC
<b>NATURE DE FRANCE ARGILE SOAP EXTERNAL BAR</b>		Non-Preferred	OTC
<b>NATURE DE FRANCE ARGIMIEL SOAP EXTERNAL BAR</b>		Non-Preferred	OTC
<b>NEUTROGENA ACNE CLEANSING SOAP EXTERNAL BAR</b>		Non-Preferred	OTC
<b>NEUTROGENA DEEP CLEAN EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>NEUTROGENA FACIAL SOAP EXTERNAL BAR</b>		Non-Preferred	OTC
<b>NIVEA MOISTURIZING BODY WASH EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>NIVEA MOISTURIZING CREME SOAP EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>NIVEA TOUCH OF SMOOTHNESS EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>NIVEA VISAGE EXTERNAL GEL</b>		Non-Preferred	OTC
<b>NIVEA VISAGE EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>NIVEA VISAGE GENTLE CLEANSING EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>OILATUM EXTERNAL BAR</b>		Non-Preferred	OTC
<b>PURPOSE GENTLE CLEANING WASH EXTERNAL LIQUID</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
refresh cleanser external liquid	AcuWash	Non-Preferred	OTC
refreshing facial cleanser external liquid	AcuWash	Non-Preferred	OTC
<b>REHYLA HAIR + BODY CLEANSER EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>REHYLA WASH EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>SENSI-CARE SEPTI-SOFT EXTERNAL LIQUID</b>		Non-Preferred	OTC
shampoo & body wash rinse-free external foam		Non-Preferred	OTC
<b>SUMMERS EVE BATH &amp; SHOWER EXTERNAL GEL</b>		Non-Preferred	OTC
<b>SUMMERS EVE NIGHT-TIME EXTERNAL BAR</b>		Non-Preferred	OTC
<b>TENA SKIN-CARING BODY WASH EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>TENA SKIN-CARING WASH CREAM EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>TENA WASH EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>VANICREAM CLEANSER EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>VANICREAM EXTERNAL BAR</b>		Non-Preferred	OTC
<b>*STEROID-LOCAL ANESTHETIC COMBINATIONS***</b>			
<b>EPIFOAM EXTERNAL FOAM</b>		Non-Preferred	
<b>*SUNSCREENS***</b>			
anthelios 50 anti-aging primer external liquid	Bull Frog FastBlast SPF 36	Non-Preferred	OTC
anthelios 50 mineral external liquid	Bull Frog FastBlast SPF 36	Non-Preferred	OTC
anthelios 60 melt-in milk external liquid	Bull Frog FastBlast SPF 36	Non-Preferred	OTC
anthelios 60 ultra light external aerosol	Bull Frog Marathon Mist Kids	Non-Preferred	OTC
anthelios 60 ultra light external liquid	Bull Frog FastBlast SPF 36	Non-Preferred	OTC
<b>ANTHELIOS MELT-IN MILK SPF100 EXTERNAL LOTION</b>		Non-Preferred	OTC
anthelios sx external cream	DML Facial Moisturizer	Non-Preferred	OTC
anti-wrinkle daily spf15 external lotion	Anthelios Melt-In Milk SPF100	Non-Preferred	OTC



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>AQUAPHOR LIP PROTECT+SUNSCREEN EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>AQUAPHOR LIP REPAIR+SUNSCREEN EXTERNAL STICK</b>		Non-Preferred	OTC
<b>AVEENO BABY CONTINUOUS PROTECT EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>AVEENO BABY SUNSCREEN EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>AVEENO KIDS CONTINUOUS PROTECT EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>AVEENO PROTECT+HYDRATE SPF30 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>AVEENO PROTECT+HYDRATE SPF60 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>BLUE LIZARD SPF30+ SENSITIVE EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>BULL FROG FASTBLAST SPF 36 EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>BULL FROG MARATHON MIST KIDS EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>BULL FROG MARATHON MIST SPF 36 EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>BULL FROG MARATHON MIST SPF50 EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>BULL FROG MOSQUITO COAST SPF30 EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>BULL FROG QUIK EXTERNAL STICK</b>		Non-Preferred	OTC
<b>BULL FROG QUIK SPF 36 EXTERNAL GEL</b>		Non-Preferred	OTC
<b>BULL FROG QUIK SPF50 EXTERNAL GEL</b>		Non-Preferred	OTC
<b>BULL FROG QUIK SPORT SPF 36 EXTERNAL GEL</b>		Non-Preferred	OTC
<b>BULL FROG QUIK SPORT SPF 50 EXTERNAL GEL</b>		Non-Preferred	OTC
<b>BULL FROG SHEER PROTECTION EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>BULL FROG SPF36 EXTERNAL GEL</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>BULL FROG SUPERBLOCK SPF50 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>BULL FROG WATER ARMOR SPORT EXTERNAL GEL</b>		Non-Preferred	OTC
<b>BULL FROG WATER ARMOR SPORT EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>CARMEX CLASSIC LIP BALM EXTERNAL STICK</b>		Non-Preferred	OTC
<b>CARMEX DAILY CARE LIP BALM EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>CARMEX DAILY CARE LIP BALM EXTERNAL STICK</b>		Non-Preferred	OTC
<b>CERAVE SUNSCREEN SPF50 EXTERNAL STICK</b>		Non-Preferred	OTC
<b>CHANTAL SUN SCREEN SPF 30 EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>CHANTAL SUN SCREEN SPF 30 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>CHAP-AID SPF15 EXTERNAL STICK</b>		Non-Preferred	OTC
<b>CHAP-AID SPF4 EXTERNAL STICK</b>		Non-Preferred	OTC
<b>CHAPSTICK ACTIVE SPORT READY EXTERNAL STICK</b>		Non-Preferred	OTC
<b>CHAPSTICK EXTERNAL STICK</b>		Non-Preferred	OTC
<b>CHAPSTICK MOISTURIZER EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>CHAPSTICK MOISTURIZER EXTERNAL STICK</b>		Non-Preferred	OTC
<b>CHAPSTICK SPF EXTERNAL STICK</b>		Non-Preferred	OTC
<b>CHAPSTICK ULTRA SPF30 EXTERNAL STICK</b>		Non-Preferred	OTC
childrens sunblock spf30 external lotion	Anthelios Melt-In Milk SPF100	Non-Preferred	OTC
clear zinc spf 50 external lotion	Anthelios Melt-In Milk SPF100	Non-Preferred	OTC
clear zinc spf 50 external stick	Aquaphor Lip Repair+Sunscreen	Non-Preferred	OTC
continuous spray spf30 external aerosol	Bull Frog Marathon Mist Kids	Non-Preferred	OTC
<b>COPPERTON LIMITED EDITION EXTERNAL AEROSOL</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>COPPERTONE BABY PURE &amp; SIMPLE EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>COPPERTONE BABY PURE &amp; SIMPLE EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE BABY PURE &amp; SIMPLE EXTERNAL STICK</b>		Non-Preferred	OTC
<b>COPPERTONE COMPLETE FACE SPF45 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE COMPLETE SPF30 EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>COPPERTONE COMPLETE SPF30 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE COMPLETE SPF50 EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>COPPERTONE COMPLETE SPF50 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE D &amp; C FACE ZINC EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE DEFEND &amp; CARE EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>COPPERTONE DEFEND &amp; CARE EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE DEFEND &amp; CARE FACE EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE DEFEND &amp; CARE FACE EXTERNAL STICK</b>		Non-Preferred	OTC
<b>COPPERTONE DEFEND &amp; CARE WHIP EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>COPPERTONE DEFEND &amp; CARE ZINC EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE EVERY TONE SPF50 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE GLOW HYDRAGEL SPF30 EXTERNAL GEL</b>		Non-Preferred	OTC
<b>COPPERTONE GLOW HYDRAGEL SPF50 EXTERNAL GEL</b>		Non-Preferred	OTC
<b>COPPERTONE GLOW PROTECT &amp; TAN EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE GLOW SHIMMER SPF15 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE GLOW SHIMMER SPF30 EXTERNAL LOTION</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>COPPERTONE GLOW SHIMMER SPF50 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE KIDS CLEAR SPF50 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE KIDS PURE &amp; SIMPLE EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>COPPERTONE KIDS PURE &amp; SIMPLE EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE KIDS PURE &amp; SIMPLE EXTERNAL STICK</b>		Non-Preferred	OTC
<b>COPPERTONE KIDS SPF50 EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>COPPERTONE KIDS SPF70 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE KIDS SPORT SPF 100 EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>COPPERTONE KIDS SPORT SPF 100 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE KIDS SPORT SPF 50 EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>COPPERTONE KIDS TEAR FREE EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE LIMITED EDITION EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE OIL FREE FACE SPF30 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE OIL FREE FACE SPF50 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE PURE &amp; SIMPLE FACE EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE PURE &amp; SIMPLE SPF50 EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>COPPERTONE PURE &amp; SIMPLE SPF50 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE PURE &amp; SIMPLE SPF50 EXTERNAL STICK</b>		Non-Preferred	OTC
<b>COPPERTONE SPORT 4-IN-1 SPF100 EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>COPPERTONE SPORT 4-IN-1 SPF100 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE SPORT 4-IN-1 SPF15 EXTERNAL AEROSOL</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>COPPERTONE SPORT 4-IN-1 SPF15 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE SPORT 4-IN-1 SPF30 EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>COPPERTONE SPORT 4-IN-1 SPF30 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE SPORT 4-IN-1 SPF50 EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>COPPERTONE SPORT 4-IN-1 SPF50 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE SPORT 4-IN-1 SPF70 EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>COPPERTONE SPORT 4-IN-1 SPF70 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE SPORT 50 LIP BALM EXTERNAL STICK</b>		Non-Preferred	OTC
<b>COPPERTONE SPORT CLEAR EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE SPORT FACE SPF50 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE SPORT FACE+BODY EXTERNAL STICK</b>		Non-Preferred	OTC
<b>COPPERTONE SPORT MINERAL FACE EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE SPORT MINERAL SPF50 EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>COPPERTONE SPORT MINERAL SPF50 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE SPORT SPF 100 EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>COPPERTONE SPORT SPF 30 EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>COPPERTONE SPORT SPF 70 EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>COPPERTONE SPORT SPF 70 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE SPORT SPF15 EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>COPPERTONE SPORT SPF15 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE SPORT SPF30 EXTERNAL AEROSOL</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>COPPERTONE SPORT SPF30 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE SPORT SPF50 COMBO EXTERNAL KIT</b>		Non-Preferred	OTC
<b>COPPERTONE SPORT SPF50 EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>COPPERTONE SPORT SPF50 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE SPORT SPF50 EXTERNAL STICK</b>		Non-Preferred	OTC
<b>COPPERTONE TANNING SPF 8 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE TANNING SPF15 EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>COPPERTONE TANNING SPF15 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE ULTRAGUARD SPF50 EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>COPPERTONE ULTRAGUARD SPF70+ EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE WATERBABIES SPF50 EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>COPPERTONE WATERBABIES SPF50 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>COPPERTONE WATERBABIES WHIPPED EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>COTZ EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>DIABETIDERM SUNSCREEN SPF15 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>DML FACIAL MOISTURIZER EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>EUCERIN ADV HYDRATION SPF 30 EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>EUCERIN ADV HYDRATION SPF 50 EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>EUCERIN ADV HYDRATION SPF 50 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>EUCERIN AGE DEFENSE SPF 50 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>EUCERIN BABY SENS MIN SPF 50 EXTERNAL LOTION</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>EUCERIN OIL CONTROL SPF 50 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>EUCERIN REDNESS RELIEF DAY EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>EUCERIN SENSITIVE MIN SPF 35 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>EUCERIN SENSITIVE MIN SPF 50 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>FACE COTZ EXTERNAL LOTION</b>		Non-Preferred	OTC
general protection sunscreen external aerosol	Bull Frog Marathon Mist Kids	Non-Preferred	OTC
general protection sunscreen external lotion	Anthelios Melt-In Milk SPF100	Non-Preferred	OTC
<b>GOLD BOND AGE RENEW HAND EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>LIP CLEAR LYSINE + SUNSCREEN EXTERNAL STICK</b>		Non-Preferred	OTC
<b>LIPCOTZ EXTERNAL STICK</b>		Non-Preferred	OTC
moisturizing facial spf 15 external lotion	Anthelios Melt-In Milk SPF100	Non-Preferred	OTC
moisturizing spf15 external lotion	Anthelios Melt-In Milk SPF100	Non-Preferred	OTC
<b>NEUTROGENA AGE SHIELD SPF70 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>NEUTROGENA BEACH DEFENSE SPF70 EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>NEUTROGENA BEACH DEFENSE SPF70 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>NEUTROGENA HEALTHY DEFENSE EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>NEUTROGENA PURE &amp; FREE BABY EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>NEUTROGENA SPORT FACE SPF70 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>NEUTROGENA ULTRA SHEER BODY EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>NEUTROGENA ULTRA SHEER SPF 45 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>NEUTROGENA ULTRA SHEER SPF 55 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>NEUTROGENA ULTRA SHEER SPF 70 EXTERNAL LOTION</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>NISEKO SUNSCREEN SPF 25 EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>NIVEA HAND THERAPY EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>NIVEA VISAGE 12-HR DEEP MOIST EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>NIVEA VISAGE ADVANCED VITALITY EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>NIVEA VISAGE ANTI-WRINKLE EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>NIVEA VISAGE EYE CONTOUR EXTERNAL GEL</b>		Non-Preferred	OTC
<b>NIVEA VISAGE UV CARE EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>PALMERS COCONUT OIL LIP BALM EXTERNAL STICK</b>		Non-Preferred	OTC
<b>PALMERS LIP BALM EXTERNAL STICK</b>		Non-Preferred	OTC
<b>PANOXYL AM SPF30 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>PRESUN ULTRA/PARSOL EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>RV PAQUE EXTERNAL CREAM</b>		Non-Preferred	OTC
sheer sunscreen spf 70 external stick	Aquaphor Lip Repair+Sunscreen	Non-Preferred	OTC
<b>SOLBAR AVO EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>SOLBAR FIFTY EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>SOLBAR PF SPF15 EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>SOLBAR PF SPF15 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>SOLBAR SHIELD SPF 40 EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>SOLBAR SPF30 EXTERNAL GEL</b>		Non-Preferred	OTC
<b>SOLBAR SPF50 EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>SOLBAR ZINC SPF38 EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>SPORT SUNSCREEN SPF 30 EXTERNAL AEROSOL</b>		Non-Preferred	OTC
sport sunscreen spf50 external lotion	Anthelios Melt-In Milk SPF100	Non-Preferred	OTC



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
sunblock lotion spf30 external lotion	Anthelios Melt-In Milk SPF100	Non-Preferred	OTC
sunblock spf30 external lotion	Anthelios Melt-In Milk SPF100	Non-Preferred	OTC
sunscreen kids spf 50 external aerosol	Bull Frog Marathon Mist Kids	Non-Preferred	OTC
sunscreen spf50 external lotion	Anthelios Melt-In Milk SPF100	Non-Preferred	OTC
sunscreen sport spf 70 external lotion	Anthelios Melt-In Milk SPF100	Non-Preferred	OTC
sunscreen ultra sheer external lotion	Anthelios Melt-In Milk SPF100	Non-Preferred	OTC
<b>TOTAL BLOCK SPF 60 COVER UP EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>TOTAL BLOCK SPF 65 CLEAR EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>VANICREAM LIP PROTECTANT EXTERNAL STICK</b>		Non-Preferred	OTC
<b>VANICREAM SPF 35 EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>WATER BABIES SPF50 EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>WATER BABIES SPF50 EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>*TAR COMBINATIONS***</b>			
<b>DENOREX MAXIMUM ITCH RELIEF EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>*TAR PRODUCTS***</b>			
<b>BETA CARE BETATAR GEL EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
coal tar external solution		Non-Preferred	
<b>CUTAR EXTERNAL EMULSION</b>		Non-Preferred	OTC
<b>DHS TAR EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>DHS TAR GEL EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>GRANDPAS PINE TAR CONDITIONER EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>GRANDPAS PINE TAR EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>GRANDPAS PINE TAR SOAP EXTERNAL BAR</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>IONIL-T EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>MG217 DANDRUFF THERAPEUTIC EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>MG217 PSORIASIS COAL TAR EXTERNAL GEL</b>		Non-Preferred	OTC
<b>MG217 PSORIASIS MEDICATED EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>MG217 PSORIASIS MEDICATED EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>MG217 PSORIASIS MULTI-SYMPTOM EXTERNAL GEL</b>		Non-Preferred	OTC
<b>MG217 PSORIASIS MULTI-SYMPTOM EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>MG217 PSORIASIS THERAPEUTIC EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>PSORIASIN DEEP MOISTURIZING EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>SCYTERA EXTERNAL FOAM</b>		Non-Preferred	OTC
<b>TARSUM RELIEF EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
therapeutic external shampoo	DHS Tar	Non-Preferred	OTC
<b>THERAPEUTIC T+PLUS EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>X-SEB T PEARL EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>X-SEB T PLUS EXTERNAL SHAMPOO</b>		Non-Preferred	OTC
<b>*TOPICAL ANESTHETIC COMBINATIONS***</b>			
alcohol swabs with benzocaine external pad		Non-Preferred	OTC
allevess external patch		Preferred	OTC
<b>ALOCANE FIRST AID SPRAY EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>ALOCANE MAX EMER BURN W/ ANTI EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>ALOCANE MAX EMER BURN W/ ANTI EXTERNAL PAD</b>		Non-Preferred	OTC
<b>ALOCANE MAX EXTERNAL GEL</b>		Non-Preferred	OTC
<b>ALOCANE PLUS EXTERNAL GEL</b>		Non-Preferred	OTC
aloe vera pain relieving external gel		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>ANECREAM EXTERNAL KIT</b>		Non-Preferred	OTC
anti-itch clear external lotion		Non-Preferred	OTC
<b>ARTH ARREST EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>ASPERFLEX HOT PAIN RELIEVING EXTERNAL PATCH</b>		Non-Preferred	OTC
<b>ASPERFLEX MAX EXTERNAL PATCH</b>		Non-Preferred	OTC
avaderm external cream	Icy Hot Lidocaine Plus Menthol	Non-Preferred	OTC
<b>AVEENO ANTI-ITCH EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>BACTINE EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>BACTINE MAX EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>BACTINE MAX SPRAY EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>BAND-AID ANTISEPTIC CLEANSING EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>BAND-AID ANTISEPTIC SPRAY EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>BAND-AID ANTISEPTIC TO-GO-SPR EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>BIORX SPONIX ARTHR &amp; MUSC EXTERNAL SOLUTION</b>		Non-Preferred	OTC
blt skin external cream		Non-Preferred	OTC
burn relief/lidocaine/aloe external gel		Non-Preferred	OTC
<b>CALACLEAR EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>CALADRYL CLEAR EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>CALADRYL EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>CALAGESIC EXTERNAL LOTION</b>		Non-Preferred	OTC
calahist clear external lotion	Calaclear	Non-Preferred	OTC
calahist external lotion	Caladryl	Non-Preferred	OTC
calamine clear external lotion	Calaclear	Non-Preferred	OTC
calamine plus external lotion	Caladryl	Non-Preferred	OTC
<b>CAPSIDERM EXTERNAL PATCH</b>		Non-Preferred	OTC
<b>CAPZASIN QUICK RELIEF EXTERNAL GEL</b>		Non-Preferred	OTC
<b>CBD KINGS EXTERNAL PATCH</b>		Non-Preferred	OTC
cbd4 freeze pump vanish scent external cream	Icy Hot Lidocaine Plus Menthol	Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>CHIGG AWAY EXTERNAL LOTION</b>		Non-Preferred	OTC
clear anti-itch external lotion	Calaclear	Non-Preferred	OTC
cold & hot plus menthol external patch	Asperflex Max	Non-Preferred	OTC
cool n heat external patch	Asperflex Max	Non-Preferred	OTC
cooling burn relief external aerosol		Non-Preferred	OTC
<b>DERMAGESIC EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>DERMAGESIC EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>DERMOPLAST EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>DERMOPLAST FIRST AID EXTERNAL AEROSOL</b>		Non-Preferred	OTC
first aid antiseptic external liquid	Bactine	Non-Preferred	OTC
first aid antiseptic spray external aerosol		Non-Preferred	OTC
first aid burn external cream	Medi-First/Lidocaine	Non-Preferred	OTC
<b>GOLD BOND INTENSIVE HEALING EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>GOLD BOND MEDICATED ANTI ITCH EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>GOLD BOND RAPID RELIEF EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>ICY HOT LIDOCAINE PLUS MENTHOL EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>ICY HOT LIDOCAINE PLUS MENTHOL EXTERNAL PATCH</b>		Non-Preferred	OTC
<b>ICY HOT MAX EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>ICY HOT MAX LIDOCAINE EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>ICY HOT PM EXTERNAL PATCH</b>		Non-Preferred	OTC
<b>ITCH-X EXTERNAL GEL</b>		Non-Preferred	OTC
<b>ITCH-X EXTERNAL SOLUTION</b>		Non-Preferred	OTC
<b>LANACANE ANTI-BACTERIAL EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>LANACANE EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>LANACANE MAXIMUM STRENGTH EXTERNAL CREAM</b>		Non-Preferred	OTC
lenzapro flex patch external patch	Venia	Non-Preferred	OTC
lidocaine-menthol external gel	LidozenGel	Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
lidocaine-menthol roll-on external liquid	Nervive Roll-On	Non-Preferred	OTC
lidocaine-prilocaine external cream		Preferred	QL
lidocaine-prilocaine external kit	Lido BDK	Non-Preferred	QL
<b>LIDOCREAM EXTERNAL KIT</b>		Non-Preferred	OTC
<b>LIDOPATCH PAIN RELIEF EXTERNAL PATCH</b>		Non-Preferred	OTC
<b>LIDOPRO EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>LIDOPRO EXTERNAL PATCH</b>		Non-Preferred	OTC
lidoreal external patch	Asperflex Max	Non-Preferred	OTC
lidosync external patch	Asperflex Max	Non-Preferred	OTC
<b>LIDOZENGEL EXTERNAL GEL</b>		Non-Preferred	OTC
<b>LIDOZENPATCH EXTERNAL PATCH</b>		Non-Preferred	OTC
liquid bandage external liquid		Non-Preferred	OTC
<b>LMX 4 PLUS EXTERNAL KIT</b>		Non-Preferred	OTC
<b>MEDI-FIRST/LIDOCAINE EXTERNAL CREAM</b>		Non-Preferred	OTC
mega patch external patch		Non-Preferred	OTC
<b>MENTHOZEN HYDROGEL EXTERNAL PATCH</b>		Non-Preferred	OTC
<b>MG217 FIRST AID COOLING SPRAY EXTERNAL LIQUID</b>		Non-Preferred	OTC
mtx topical pain external patch	Asperflex Max	Non-Preferred	OTC
<b>NEPTUNE ICE EXTERNAL GEL</b>		Non-Preferred	OTC
<b>NERVIVE ROLL-ON EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>NULIDO EXTERNAL PATCH</b>		Non-Preferred	OTC
<b>POINT RELIEF LIDOSPOT EXTERNAL PATCH</b>		Non-Preferred	OTC
<b>PROLIDA EXTERNAL PATCH</b>		Non-Preferred	OTC
reliever external patch		Preferred	OTC
<b>SALONPAS LIDOCAINE PLUS EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>SALONPAS LIDOCAINE PLUS EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>SALONPAS PAIN REL GEL-PTCH HOT EXTERNAL PATCH</b>		Non-Preferred	OTC
<b>SARNA CALM + COOL EXTERNAL LOTION</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
siterol external patch		Non-Preferred	OTC
sting & bite pads external pad		Non-Preferred	OTC
synoflex external patch		Non-Preferred	OTC
triceptin external patch		Non-Preferred	OTC
<b>VENIA EXTERNAL PATCH</b>		Non-Preferred	OTC
<b>ZIMS MAX-FREEZE EXTERNAL PATCH</b>		Non-Preferred	OTC
<b>ZIMS MAX-FREEZE PAIN RELIEF EXTERNAL PATCH</b>		Non-Preferred	OTC
<b>ZYLOTROL EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>ZYLOTROL EXTERNAL GEL</b>		Non-Preferred	OTC
<b>ZYLOTROL EXTERNAL PATCH</b>		Non-Preferred	OTC
<b>*TOPICAL ANESTHETIC GASES***</b>			
<b>GEBAUERS INSTANT ICE EXTERNAL AEROSOL</b>		Non-Preferred	OTC
<b>*TOPICAL STEROID COMBINATIONS***</b>			
calcipotriene-betameth diprop external ointment		Non-Preferred	PA; QL
calcipotriene-betameth diprop external suspension	Taclonex	Non-Preferred	PA; QL
<b>DUOBRII EXTERNAL LOTION</b>		Non-Preferred	PA; QL
<b>ENSTILAR EXTERNAL FOAM</b>		Non-Preferred	PA; QL
<b>TACLONEX EXTERNAL SUSPENSION</b>		Non-Preferred	PA; QL
<b>WYNZORA EXTERNAL CREAM</b>		Non-Preferred	PA; QL
<b>*WOUND CARE - GROWTH FACTOR AGENTS***</b>			
<b>REGRANEX EXTERNAL GEL</b>		Non-Preferred	PA; QL
<b>*WOUND CLEANSERS/DECUBITUS ULCER THERAPY***</b>			
<b>ACTIMARIS ALL-NATURAL WOUND EXTERNAL SOLUTION</b>		Non-Preferred	OTC
<b>AMERIGEL WOUND WASH EXTERNAL SOLUTION</b>		Non-Preferred	OTC
lavare wound wash external gel	Microcyn	Non-Preferred	
<b>NEXCARE WOUND CLEANSER EXTERNAL LIQUID</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>PURACYN PLUS DUO-CARE EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>RESTA WOUND CLEANSER EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>SAF-CLENS AF EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>SILVERMED EXTERNAL LIQUID</b>		Non-Preferred	OTC
wound cleanser external liquid	Nexcare Wound Cleanser	Non-Preferred	OTC
wound/skin cleanser external liquid	Nexcare Wound Cleanser	Non-Preferred	OTC
<b>*WOUND DRESSINGS***</b>			
<b>AQUACEL-AG HYDROFIBER EXTERNAL</b>		Non-Preferred	OTC
<b>DERMAPLEX EXTERNAL GEL</b>		Non-Preferred	OTC
<b>FILSUEVEZ EXTERNAL GEL</b>		Non-Preferred	PA
<b>GOLD DUST WOUND FILLER EXTERNAL PACKET</b>		Non-Preferred	OTC
<b>STIMULEN EXTERNAL LOTION</b>		Non-Preferred	OTC
<b>STIMULEN EXTERNAL PACKET</b>		Non-Preferred	OTC
<b>STIMULEN EXTERNAL POWDER</b>		Non-Preferred	OTC
<b>TRIAD HYDROPHILIC WOUND DRESS EXTERNAL PASTE</b>		Non-Preferred	OTC
triple helix collagen external powder	Stimulen	Non-Preferred	OTC
<b>*WOUND TREATMENT - GENE THERAPY***</b>			
<b>VYJUVEK EXTERNAL GEL</b>		Non-Preferred	PA; SP; QL
<b>*DIAGNOSTIC PRODUCTS*</b>			
<b>*DIAGNOSTIC BIOLOGICALS***</b>			
american elm (diagnostic) injection solution		Non-Preferred	
black walnut (diagnostic) injection solution		Non-Preferred	
horse epithelium (diagnostic) injection solution		Non-Preferred	
mouse epithelium (diagnostic) injection solution		Non-Preferred	
red maple (diagnostic) injection solution		Non-Preferred	
red oak (diagnostic) injection solution		Non-Preferred	

Drug Name	Reference	Status	Notes
white alder (diagnostic) injection solution		Non-Preferred	
white ash (diagnostic) injection solution		Non-Preferred	
white birch (diagnostic) injection solution		Non-Preferred	
<b>*DIAGNOSTIC DRUGS***</b>			
adenosine (diagnostic) intravenous solution		Non-Preferred	
adenosine intravenous solution		Non-Preferred	
<b>CORTROSYN INJECTION SOLUTION RECONSTITUTED</b>		Non-Preferred	QL
cosyntropin injection solution reconstituted	Cortrosyn	Preferred	QL
<b>CYSVIEW INTRAVESICAL SOLUTION RECONSTITUTED</b>		Non-Preferred	
dipyridamole intravenous solution		Non-Preferred	
d-xylose powder		Non-Preferred	
<b>GLEOLAN ORAL SOLUTION RECONSTITUTED</b>		Non-Preferred	
glucagon hcl (diagnostic) injection solution reconstituted		Non-Preferred	
<b>PRE-PEN INTRADERMAL SOLUTION</b>		Non-Preferred	
<b>R-GENE 10 INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>*DIAGNOSTIC TESTS***</b>			
<b>ACCU-CHEK AVIVA PLUS IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>ACCU-CHEK SMARTVIEW IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>ACCU-TREND GLUCOSE IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>ADVANCE INTUITION TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>ADVANCE MICRO-DRAW TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>ADVOCATE REDI-CODE IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>ADVOCATE REDI-CODE+ TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>ADVOCATE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>AGAMATRIX AMP TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>AGAMATRIX JAZZ TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>AGAMATRIX KEYNOTE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>AGAMATRIX PRESTO TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>ASSURE 3 TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>ASSURE 4 TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>ASSURE II CHECK IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>ASSURE II IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>ASSURE PLATINUM IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>ASSURE PRISM MULTI TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>ASSURE PRO TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>BIOTEL CARE TEST STRIPS IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
blood glucose test in vitro strip	ReliOn True Metrix Test Strips	Non-Preferred	PA; OTC; QL
<b>BLULINK GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>CAREONE BLOOD GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>CARESENS N GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>CARETOUCH TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>CHEMSTRIP K IN VITRO STRIP</b>		Non-Preferred	AL; OTC; QL
<b>CLEVER CHEK AUTO-CODE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>CLEVER CHEK AUTO-CODE VOICE IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>CLEVER CHEK TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>CLEVER CHOICE AUTO-CODE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>CLEVER CHOICE MICRO TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>CLEVER CHOICE NO CODING IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>CLEVER CHOICE TALK SYSTEM IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>CONTOUR NEXT TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>CONTOUR PLUS TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>CONTOUR TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>COOL BLOOD GLUCOSE TEST STRIPS IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>D-CARE BLOOD GLUCOSE IN VITRO STRIP</b>		Non-Preferred	PA; QL
<b>DIATHRIVE BLOOD GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>DIATHRIVE GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>DIATHRIVE+ GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
diatrue plus test in vitro strip	ReliOn True Metrix Test Strips	Non-Preferred	PA; OTC; QL
<b>DUO-CARE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>EASY MAX BLOOD GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
easy plus ii glucose test in vitro strip	ReliOn True Metrix Test Strips	Non-Preferred	PA; OTC; QL
<b>EASY STEP TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
easy talk blood glucose test in vitro strip	ReliOn True Metrix Test Strips	Non-Preferred	PA; OTC; QL
easy talk plus ii test strips in vitro strip	ReliOn True Metrix Test Strips	Non-Preferred	PA; OTC; QL
<b>EASY TOUCH HEALTHPRO GLUCOSE IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>EASY TOUCH TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
easy trak blood glucose test in vitro strip	ReliOn True Metrix Test Strips	Non-Preferred	PA; OTC; QL
easy trak ii glucose test in vitro strip	ReliOn True Metrix Test Strips	Non-Preferred	PA; OTC; QL
<b>EASYGLUCO IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>EASYMAX 15 TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>EASYMAX TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>EASYPRO BLOOD GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>EASYPRO PLUS IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
element compact test in vitro strip	ReliOn True Metrix Test Strips	Non-Preferred	PA; OTC; QL
<b>ELEMENT TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>EMBRACE BLOOD GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>EMBRACE EVO BLOOD GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>EMBRACE PRO GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>EMBRACE TALK GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>EMBRACE WAVE BLOOD GLUCOSE IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>EVOLUTION AUTOCODE IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>FIFTY50 GLUCOSE TEST 2.0 IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>FORA 6 CONNECT IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>FORA 6 CONNECT/GTEL TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>FORA BLOOD GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>FORA D15G BLOOD GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>FORA D20 BLOOD GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>FORA D40/G31 BLOOD GLUCOSE IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>FORA G20 BLOOD GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>FORA G30/PREM V10 GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>FORA GD20 TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>FORA GD50 BLOOD GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>FORA GTEL BLOOD GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>FORA TN'G ADVANCE PRO IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>FORA TN'G/TN'G VOICE IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>FORA V10 BLOOD GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>FORA V12 BLOOD GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>FORA V20 BLOOD GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>FORA V30A BLOOD GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>FORACARE GD40 TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>FORACARE PREMIUM V10 TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>FORACARE TEST N GO TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>FREESTYLE INSULINX TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>FREESTYLE LITE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>FREESTYLE PRECISION NEO TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>FREESTYLE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
ge100 blood glucose test in vitro strip	ReliOn True Metrix Test Strips	Non-Preferred	PA; OTC; QL
<b>GENULTIMATE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
ght test in vitro strip	ReliOn True Metrix Test Strips	Non-Preferred	PA; OTC; QL
<b>GLUCO PERFECT 3 TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>GLUCOCARD 01 SENSOR PLUS IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>GLUCOCARD EXPRESSION TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>GLUCOCARD SHINE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>GLUCOCARD VITAL TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>GLUCOCARD X-SENSOR IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>GLUCOCOM TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>GLUCONAVII BLOOD GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
glucose meter test in vitro strip	ReliOn True Metrix Test Strips	Non-Preferred	PA; OTC; QL
<b>GOJJI BLOOD GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>GOJJI BLOOD TEST STRIP/LANCETS IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>HW EMBRACE PRO GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>HW EMBRACE TALK GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>IGLUCOSE TEST STRIPS IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>IHEALTH BLOOD GLUCOSE TEST STR IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>IN TOUCH BLOOD GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>INFINITY BLOOD GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>INFINITY VOICE IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
ketone test in vitro strip	Chemstrip K	Non-Preferred	AL; OTC; QL
<b>KETOSTIX IN VITRO STRIP</b>		Non-Preferred	AL; OTC; QL
<b>LIBERTY NEXT GENERATION TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
liberty test in vitro strip	ReliOn True Metrix Test Strips	Non-Preferred	PA; OTC; QL
<b>MICRODOT TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>MYGLUCOHEALTH TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>NEUTEK 2TEK TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>NOVA MAX GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>ON CALL EXPRESS BLOOD GLUCOSE IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
one drop test in vitro strip	ReliOn True Metrix Test Strips	Non-Preferred	PA; OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>ONETOUCH ULTRA IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>ONETOUCH ULTRA TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>ONETOUCH VERIO IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>OPTIUMEZ TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>PHARMACIST CHOICE AUTOCODE IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
pharmacist choice no coding in vitro strip	ReliOn True Metrix Test Strips	Non-Preferred	PA; OTC; QL
<b>PIP BLOOD GLUCOSE TEST STRIP IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>POCKETCHEM EZ TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>POGO AUTOMATIC TEST CARTRIDGES IN VITRO DIAGNOSTIC TEST</b>		Non-Preferred	PA; OTC; QL
<b>PRECISION XTRA BLOOD GLUCOSE IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
premium blood glucose test in vitro strip	ReliOn True Metrix Test Strips	Non-Preferred	PA; OTC; QL
pro voice v8/v9 glucose in vitro strip	ReliOn True Metrix Test Strips	Non-Preferred	PA; OTC; QL
<b>PRODIGY NO CODING BLOOD GLUC IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>PTS PANELS EGLU TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>QUICKTEK TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>QUINTET AC BLOOD GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>QUINTET BLOOD GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>REFUAH PLUS BLOOD GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>RELION BLOOD GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>RELION CONFIRM/MICRO TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>RELION KETONE TEST IN VITRO STRIP</b>		Non-Preferred	AL; OTC; QL
<b>RELION PREMIER TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL

Drug Name	Reference	Status	Notes
<b>RELION PRIME TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>RELION TRUE METRIX TEST STRIPS IN VITRO STRIP</b>		Preferred	OTC; QL
<b>RELION ULTIMA TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>REXALL BLOOD GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>RIGHTEST GS100 BLOOD GLUCOSE IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>RIGHTEST GS300 BLOOD GLUCOSE IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>RIGHTEST GS550 BLOOD GLUCOSE IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>RIGHTEST GT333 BLOOD GLUCOSE IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>SMART SENSE PREMIUM TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>SMART SENSE VALUE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>SMARTEST BLOOD GLUCOSE TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>SOLUS V2 TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>SUPREME TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
tgt blood glucose test in vitro strip	ReliOn True Metrix Test Strips	Non-Preferred	PA; OTC; QL
true focus blood glucose strip in vitro strip	ReliOn True Metrix Test Strips	Non-Preferred	PA; OTC; QL
<b>TRUE METRIX BLOOD GLUCOSE TEST IN VITRO STRIP</b>		Preferred	PA; OTC; QL
<b>TRUETEST TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>TRUETRACK TEST IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>UNISTRIP1 GENERIC IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
verasens blood glucose test in vitro strip	ReliOn True Metrix Test Strips	Non-Preferred	PA; OTC; QL
<b>VIVAGUARD INO TEST STRIPS IN VITRO STRIP</b>		Non-Preferred	PA; OTC; QL
<b>*MULTIPLE SKIN TESTS***</b>			
cockroach mixed (diagnostic) injection solution		Non-Preferred	

Drug Name	Reference	Status	Notes
sheep sorrel-dock (diagnostic) injection solution		Non-Preferred	
short-giant ragweed (diagnost) injection solution		Non-Preferred	
<b>*MULTIPLE URINE TESTS***</b>			
<b>CHEMSTRIP 10 MD IN VITRO STRIP</b>		Non-Preferred	AL; OTC
<b>CHEMSTRIP 10/SG IN VITRO STRIP</b>		Non-Preferred	AL; OTC
<b>CHEMSTRIP 2 GP IN VITRO STRIP</b>		Non-Preferred	AL; OTC
<b>CHEMSTRIP 5 OB IN VITRO STRIP</b>		Non-Preferred	AL; OTC
<b>CHEMSTRIP 7 IN VITRO STRIP</b>		Non-Preferred	AL; OTC
<b>CHEMSTRIP 9 IN VITRO STRIP</b>		Non-Preferred	AL; OTC
<b>CHEMSTRIP UGK IN VITRO STRIP</b>		Preferred	OTC
<b>KETO-DIASTIX IN VITRO STRIP</b>		Preferred	OTC
<b>MULTISTIX 10 SG IN VITRO STRIP</b>		Non-Preferred	AL; OTC
<b>*RADIOGRAPHIC CONTRAST MEDIA - BARIUM***</b>			
barium sulfate powder		Non-Preferred	
<b>*DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS*</b>			
<b>*DIETARY MANAGEMENT PRODUCT COMBINATIONS***</b>			
<b>DENOVO PLUS B12 ORAL CAPSULE</b>		Non-Preferred	OTC
digestive support oral capsule extended release		Non-Preferred	OTC
<b>FDGARD ORAL CAPSULE</b>		Non-Preferred	OTC
<b>METANX FC ORAL CAPSULE</b>		Non-Preferred	
<b>NEOPHE ORAL POWDER</b>		Non-Preferred	OTC
<b>NUFOLA ORAL CAPSULE</b>		Non-Preferred	OTC
<b>TEARS AGAIN HYDRATE ORAL CAPSULE</b>		Non-Preferred	OTC
<b>TYR SPHERE 20 ORAL PACKET</b>		Non-Preferred	OTC
<b>ZYTAZE ORAL CAPSULE</b>		Non-Preferred	OTC
<b>*DIETARY MANAGEMENT PRODUCTS***</b>			
5-mthf es oral capsule		Non-Preferred	OTC
5-mthf oral capsule		Non-Preferred	OTC
cytose oral powder		Non-Preferred	OTC
<b>DENOVO ORAL CAPSULE</b>		Non-Preferred	OTC



Drug Name	Reference	Status	Notes
<b>DEPLIN FC ORAL CAPSULE</b>		Non-Preferred	
d-ribose oral powder		Non-Preferred	OTC
<b>ELFOLATE ORAL TABLET</b>		Non-Preferred	
<b>FOLAFY ER ORAL TABLET EXTENDED RELEASE</b>		Non-Preferred	OTC
l-methylfolate calcium oral tablet	Elfolate	Non-Preferred	
l-methylfolate oral tablet	Elfolate	Non-Preferred	
methylfolate oral capsule		Non-Preferred	OTC
pregnenolone oral tablet		Non-Preferred	OTC
<b>URE-NA ORAL PACKET</b>		Non-Preferred	OTC
<b>*INFANT FOODS***</b>			
<b>GERBER NATURA STAGE 1 ORAL POWDER</b>		Non-Preferred	OTC
<b>*SWEETENERS***</b>			
<b>DIABETISWEET BROWN SUGAR ORAL POWDER</b>		Non-Preferred	OTC
<b>DIABETISWEET ORAL PACKET</b>		Non-Preferred	OTC
<b>DIABETISWEET ORAL POWDER</b>		Non-Preferred	OTC
<b>PEARSON SAKRIN ORAL SOLUTION</b>		Non-Preferred	OTC
sodium saccharin granules		Non-Preferred	
sodium saccharin powder		Non-Preferred	
<b>*DIGESTIVE AIDS*</b>			
<b>*DIGESTIVE AIDS - MIXTURES***</b>			
<b>BILE ACID FACTORS ORAL CAPSULE</b>		Non-Preferred	OTC
<b>*DIGESTIVE ENZYME COMBINATIONS***</b>			
<b>ABATRACE ORAL CAPSULE</b>		Non-Preferred	OTC
betaine hcl oral capsule	Abatrace	Non-Preferred	OTC
<b>BEVITROL ORAL CAPSULE</b>		Non-Preferred	OTC
<b>BIO-ZYME ORAL TABLET</b>		Non-Preferred	OTC
<b>DIGAZ ORAL CAPSULE</b>		Non-Preferred	OTC
digestive enzyme oral capsule	Abatrace	Non-Preferred	OTC
digestive enzymes oral capsule	Abatrace	Non-Preferred	OTC
digestive enzymes oral tablet	Bio-Zyme	Non-Preferred	OTC
digestive support oral capsule	Abatrace	Non-Preferred	OTC
digestive wellness oral capsule	Abatrace	Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>DOCTORS BEST DIGESTIVE ENZYMES ORAL CAPSULE</b>		Non-Preferred	OTC
enzyme digest oral capsule	Abatrace	Non-Preferred	OTC
<b>GASTRACE DIGESTIVE SUPPORT ORAL CAPSULE</b>		Non-Preferred	OTC
<b>GASTRACID ORAL CAPSULE</b>		Non-Preferred	OTC
hepatitis support oral		Non-Preferred	OTC
lipase concentrate-hp oral capsule	Abatrace	Non-Preferred	OTC
<b>OMNIGEST EZ ORAL TABLET</b>		Non-Preferred	OTC
panplex 2-phase oral tablet delayed release		Non-Preferred	OTC
papaya and enzymes oral tablet chewable		Non-Preferred	OTC
parvenzyme digestive enzyme oral tablet	Bio-Zyme	Non-Preferred	OTC
<b>PROTEOXYME ORAL CAPSULE DELAYED RELEASE</b>		Non-Preferred	OTC
<b>SIMILASE LIPO ORAL CAPSULE</b>		Non-Preferred	OTC
super enzymes oral tablet	Bio-Zyme	Non-Preferred	OTC
<b>TYLER SIMILASE ORAL CAPSULE</b>		Non-Preferred	OTC
<b>TYLER SIMILASE SENSITIVE ORAL CAPSULE</b>		Non-Preferred	OTC
<b>XYMOZYME ORAL CAPSULE</b>		Non-Preferred	OTC
<b>*DIGESTIVE ENZYMES***</b>			
<b>CREON ORAL CAPSULE DELAYED RELEASE PARTICLES</b>		Preferred	PA; QL
dairy digestive supplement oral tablet	Lactaid Fast Act	Preferred	OTC
dairy digestive ultra oral tablet	Lactaid Fast Act	Preferred	OTC
dairy relief oral tablet	Lactaid	Preferred	OTC
dairy-digestive oral tablet chewable	Lactaid Fast Act	Preferred	OTC
<b>HISTDAO ORAL CAPSULE</b>		Non-Preferred	OTC
<b>LACTAID FAST ACT ORAL TABLET</b>		Non-Preferred	OTC
<b>LACTAID FAST ACT ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>LACTAID ORAL TABLET</b>		Non-Preferred	OTC
lactase enzyme oral tablet	Lactaid	Preferred	OTC
lactase fast acting oral tablet	Lactaid Fast Act	Preferred	OTC
lactose fast acting relief oral tablet	Lactaid Fast Act	Preferred	OTC

Drug Name	Reference	Status	Notes
lactose fast acting relief oral tablet chewable	Lactaid Fast Act	Preferred	OTC
<b>PANCREAZE ORAL CAPSULE DELAYED RELEASE PARTICLES</b>		Preferred	PA; QL
<b>PERTZYE ORAL CAPSULE DELAYED RELEASE PARTICLES</b>		Preferred	PA; QL
<b>SUCRAID ORAL SOLUTION</b>		Non-Preferred	PA; QL
surelac oral tablet	Lactaid	Preferred	OTC
<b>VIKACE ORAL TABLET</b>		Non-Preferred	PA; QL
<b>ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 10000-32000 UNIT, 15000-47000 UNIT, 20000-63000 UNIT, 25000-79000 UNIT, 3000-10000 UNIT, 40000-126000 UNIT, 5000-24000 UNIT</b>		Non-Preferred	PA; QL
<b>ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 60000-189600 UNIT</b>		Non-Preferred	QL
<b>*GASTRIC ACIDIFIERS***</b>			
betaine hcl oral tablet		Non-Preferred	OTC
<b>*DIURETICS*</b>			
<b>*CARBONIC ANHYDRASE INHIBITORS***</b>			
acetazolamide er oral capsule extended release 12 hour		Preferred	
acetazolamide oral tablet		Preferred	
acetazolamide sodium injection solution reconstituted		Non-Preferred	
dichlorphenamide oral tablet	Keveyis	Non-Preferred	PA; QL
<b>KEVEYIS ORAL TABLET</b>		Non-Preferred	PA; QL
methazolamide oral tablet		Preferred	
<b>ORMALVI ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*DIURETIC COMBINATIONS***</b>			
amiloride-hydrochlorothiazide oral tablet		Preferred	
spironolactone-hctz oral tablet		Preferred	
triamterene-hctz oral capsule		Preferred	
triamterene-hctz oral tablet		Preferred	

Drug Name	Reference	Status	Notes
<b>*DIURETICS - MISCELLANEOUS***</b>			
DIUREX MAX ORAL TABLET		Non-Preferred	OTC
DIUREX ULTRA ORAL TABLET		Non-Preferred	OTC
<b>*LOOP DIURETICS***</b>			
bumetanide injection solution		Non-Preferred	
bumetanide oral tablet	Bumex	Preferred	
BUMEX ORAL TABLET		Non-Preferred	
EDECIN ORAL TABLET		Non-Preferred	
ethacrynate sodium intravenous solution reconstituted		Non-Preferred	
ethacrynic acid oral tablet	Edecrin	Non-Preferred	
FUROSCIX SUBCUTANEOUS CARTRIDGE KIT		Non-Preferred	PA; QL
furosemide injection solution		Non-Preferred	
furosemide oral solution		Preferred	
furosemide oral tablet	Lasix	Preferred	
LASIX ORAL TABLET		Non-Preferred	
SOANZ ORAL TABLET		Non-Preferred	PA
toremide oral tablet 10 mg, 100 mg, 5 mg		Preferred	
toremide oral tablet 20 mg	Soanz	Preferred	AL
<b>*NON PRESCRIPTION DIURETICS***</b>			
hydro-tabs oral tablet		Non-Preferred	OTC
water pills/potassium oral tablet		Non-Preferred	OTC
water tabs oral tablet		Non-Preferred	OTC
<b>*OSMOTIC DIURETICS***</b>			
mannitol intravenous solution	Osmitrol	Non-Preferred	
OSMITROL INTRAVENOUS SOLUTION		Non-Preferred	
<b>*POTASSIUM SPARING DIURETICS***</b>			
ALDACTONE ORAL TABLET		Non-Preferred	
amiloride hcl oral tablet		Preferred	
CAROSPIR ORAL SUSPENSION		Non-Preferred	PA
DYRENIUM ORAL CAPSULE		Non-Preferred	
spironolactone oral suspension	CaroSpir	Non-Preferred	PA

Drug Name	Reference	Status	Notes
spironolactone oral tablet	Aldactone	Preferred	
triamterene oral capsule	Dyrenium	Non-Preferred	
<b>*THIAZIDES AND THIAZIDE-LIKE DIURETICS***</b>			
chlorothiazide sodium intravenous solution reconstituted		Non-Preferred	
chlorthalidone oral tablet		Preferred	
<b>DIURIL ORAL SUSPENSION</b>		Non-Preferred	
hydrochlorothiazide oral capsule		Preferred	
hydrochlorothiazide oral tablet		Preferred	
indapamide oral tablet		Preferred	
metolazone oral tablet		Preferred	
<b>THALITONE ORAL TABLET</b>		Non-Preferred	
<b>*ENDOCRINE AND METABOLIC AGENTS - MISC.*</b>			
<b>*ACID SPHINGOMYELINASE DEFICIENCY (ASMD) - AGENTS***</b>			
XENPOZYME INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP
<b>*ADENOSINE DEAMINASE SCID TREATMENT - AGENTS***</b>			
REVCovi INTRAMUSCULAR SOLUTION		Non-Preferred	PA
<b>*ALPHA-MANNOSIDOSIS TREATMENT - AGENTS***</b>			
LAMZEDE INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA
<b>*BISPHOSPHONATES***</b>			
<b>ACTONEL ORAL TABLET</b>		Non-Preferred	QL
alendronate sodium oral solution		Preferred	QL
alendronate sodium oral tablet	Fosamax	Preferred	QL
<b>ATELVIA ORAL TABLET DELAYED RELEASE</b>		Non-Preferred	QL
<b>BINOSTO ORAL TABLET EFFERVESCENT</b>		Non-Preferred	QL
<b>FOSAMAX ORAL TABLET</b>		Non-Preferred	QL
<b>FOSAMAX PLUS D ORAL TABLET</b>		Non-Preferred	QL

Drug Name	Reference	Status	Notes
ibandronate sodium intravenous solution		Non-Preferred	QL
ibandronate sodium oral tablet		Non-Preferred	QL
pamidronate disodium intravenous solution		Non-Preferred	SP
risedronate sodium oral tablet	Actonel	Non-Preferred	QL
risedronate sodium oral tablet delayed release	Atelvia	Non-Preferred	QL
<b>*CALCIMIMETIC AGENTS***</b>			
cinacalcet hcl oral tablet	Sensipar	Non-Preferred	PA; QL
<b>PARSABIV INTRAVENOUS SOLUTION</b>		Non-Preferred	PA
<b>SENSIPAR ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*CALCITONINS***</b>			
calcitonin (salmon) injection solution	Miacalcin	Non-Preferred	
calcitonin (salmon) nasal solution		Preferred	QL
<b>MIACALCIN INJECTION SOLUTION</b>		Non-Preferred	
<b>*CARNITINE REPLENISHER - AGENTS***</b>			
<b>CARNITOR INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>CARNITOR ORAL SOLUTION</b>		Non-Preferred	
<b>CARNITOR ORAL TABLET</b>		Non-Preferred	
<b>CARNITOR SF ORAL SOLUTION</b>		Non-Preferred	
levocarnitine intravenous solution	Carnitor	Non-Preferred	
levocarnitine oral solution	Carnitor	Preferred	
levocarnitine oral tablet	Carnitor	Preferred	
levocarnitine sf oral solution	Carnitor	Preferred	
<b>*CKD AGENT- SODIUM/HYDROGEN EXCHANGER 3 (NHE3) INHIBITOR***</b>			
<b>XPHOZAH ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*CORTICOTROPIN***</b>			
<b>ACTHAR GEL SUBCUTANEOUS AUTO-INJECTOR</b>		Non-Preferred	PA; SP
<b>ACTHAR INJECTION GEL</b>		Non-Preferred	PA; SP
<b>CORTROPHIN INJECTION GEL</b>		Non-Preferred	PA; SP

Drug Name	Reference	Status	Notes
<b>*CORTISOL SYNTHESIS INHIBITORS***</b>			
ISTURISA ORAL TABLET		Non-Preferred	PA; QL
RECORLEV ORAL TABLET		Non-Preferred	PA; QL
<b>*DOPAMINE RECEPTOR AGONISTS***</b>			
cabergoline oral tablet		Preferred	QL
<b>*FABRY DISEASE - AGENTS***</b>			
ELFABRIO INTRAVENOUS SOLUTION		Non-Preferred	PA; SP
GALAFOLD ORAL CAPSULE		Non-Preferred	PA; QL
<b>*GAA DEFICIENCY TREATMENT - AGENTS***</b>			
NEXVIAZYME INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP
OPFOLDA ORAL CAPSULE		Non-Preferred	PA; SP; QL
POMBILITI INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP
<b>*GNRH/LHRH ANTAGONISTS***</b>			
ORILISSA ORAL TABLET		Non-Preferred	PA; QL
<b>*GROWTH HORMONE RECEPTOR ANTAGONISTS***</b>			
SOMAVERT SUBCUTANEOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP; QL
<b>*GROWTH HORMONE RELEASING HORMONES (GHRH)***</b>			
EGRIFTA SV SUBCUTANEOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; QL
<b>*GROWTH HORMONES***</b>			
GENOTROPIN MINIQUICK SUBCUTANEOUS PREFILLED SYRINGE		Non-Preferred	PA; SP; QL
GENOTROPIN SUBCUTANEOUS CARTRIDGE		Non-Preferred	PA; SP; QL
HUMATROPE INJECTION CARTRIDGE		Non-Preferred	PA; SP; QL
NGENLA SUBCUTANEOUS SOLUTION PEN-INJECTOR		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
<b>NORDITROPIN FLEXPRO SUBCUTANEOUS SOLUTION PEN- INJECTOR</b>		Non-Preferred	PA; SP; QL
<b>NUTROPIN AQ NUSPIN 10 SUBCUTANEOUS SOLUTION PEN- INJECTOR</b>		Non-Preferred	PA; SP; QL
<b>NUTROPIN AQ NUSPIN 20 SUBCUTANEOUS SOLUTION PEN- INJECTOR</b>		Non-Preferred	PA; SP; QL
<b>NUTROPIN AQ NUSPIN 5 SUBCUTANEOUS SOLUTION PEN- INJECTOR</b>		Non-Preferred	PA; SP; QL
<b>OMNITROPE SUBCUTANEOUS SOLUTION CARTRIDGE</b>		Non-Preferred	PA; SP; QL
<b>OMNITROPE SUBCUTANEOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	PA; SP; QL
<b>SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	PA; QL
<b>SKYTROFA SUBCUTANEOUS CARTRIDGE</b>		Non-Preferred	PA; SP; QL
<b>SOGROYA SUBCUTANEOUS SOLUTION PEN-INJECTOR</b>		Non-Preferred	PA; SP; QL
<b>ZOMACTON SUBCUTANEOUS SOLUTION RECONSTITUTED</b>		Preferred	PA; SP; QL
<b>*HEREDITARY OROTIC ACIDURIA TREATMENT - AGENTS**</b>			
<b>XURIDEN ORAL PACKET</b>		Non-Preferred	PA; QL
<b>*HEREDITARY TYROSINEMIA TYPE 1 (HT-1) TREATMENT - AGENTS***</b>			
nitisinone oral capsule 10 mg, 2 mg, 5 mg	Orfadin	Non-Preferred	PA; SP
nitisinone oral capsule 20 mg	Orfadin	Non-Preferred	PA
<b>NITYR ORAL TABLET</b>		Non-Preferred	PA
<b>ORFADIN ORAL CAPSULE 10 MG, 2 MG, 5 MG</b>		Non-Preferred	PA; SP
<b>ORFADIN ORAL CAPSULE 20 MG</b>		Non-Preferred	PA
<b>ORFADIN ORAL SUSPENSION</b>		Non-Preferred	PA



Drug Name	Reference	Status	Notes
<b>*HOMOCYSTINURIA TREATMENT - AGENTS***</b>			
betaine oral powder	Cystadane	Non-Preferred	
<b>CYSTADANE ORAL POWDER</b>		Non-Preferred	
<b>*HYPERAMMONEMIA TREATMENT - AGENTS***</b>			
<b>CARBAGLU ORAL TABLET SOLUBLE</b>		Non-Preferred	PA
carglumic acid oral tablet soluble	Carbaglu	Non-Preferred	PA
<b>*HYPERPARATHYROID TREATMENT - VITAMIN D ANALOGS***</b>			
calcitriol intravenous solution		Non-Preferred	PA
calcitriol oral capsule	Rocaltrol	Preferred	PA
calcitriol oral solution	Rocaltrol	Preferred	PA
doxercalciferol intravenous solution	Hectorol	Non-Preferred	PA
doxercalciferol oral capsule		Non-Preferred	PA
<b>HECTOROL INTRAVENOUS SOLUTION</b>		Non-Preferred	PA
paricalcitol intravenous solution	Zemplar	Non-Preferred	PA
paricalcitol oral capsule	Zemplar	Non-Preferred	PA
<b>RAYALDEE ORAL CAPSULE EXTENDED RELEASE</b>		Non-Preferred	PA; QL
<b>ROCALTROL ORAL CAPSULE</b>		Non-Preferred	PA
<b>ROCALTROL ORAL SOLUTION</b>		Non-Preferred	PA
<b>ZEMPLAR INTRAVENOUS SOLUTION</b>		Non-Preferred	PA
<b>ZEMPLAR ORAL CAPSULE</b>		Non-Preferred	PA
<b>*HYPOPARATHYROID TREATMENT - PARATHYROID HORMONE ANALOGS***</b>			
<b>YORVIPATH SUBCUTANEOUS SOLUTION PEN-INJECTOR</b>		Non-Preferred	PA; QL
<b>*HYPOPHOSPHATASIA (HPP) AGENTS***</b>			
<b>STRENSIQ SUBCUTANEOUS SOLUTION</b>		Non-Preferred	PA

Drug Name	Reference	Status	Notes
<b>*INSULIN-LIKE GROWTH FACTOR-1 RECEPTOR INHIBITORS(IGF-1R)***</b>			
TEPEZZA INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA
<b>*INSULIN-LIKE GROWTH FACTORS (SOMATOMEDINS)***</b>			
INCRELEX SUBCUTANEOUS SOLUTION		Non-Preferred	PA; SP
<b>*LEPTIN ANALOGUES***</b>			
MYALEPT SUBCUTANEOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; QL
<b>*LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS***</b>			
FENSOLVI (6 MONTH) SUBCUTANEOUS KIT		Non-Preferred	PA; SP; QL
LUPRON DEPOT-PED (1-MONTH) INTRAMUSCULAR KIT		Non-Preferred	PA; SP; QL
LUPRON DEPOT-PED (6-MONTH) INTRAMUSCULAR KIT		Non-Preferred	PA; SP; QL
SUPPRELIN LA SUBCUTANEOUS KIT		Non-Preferred	PA; SP; QL
SYNAREL NASAL SOLUTION		Non-Preferred	PA; SP; QL
TRIPTODUR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER		Non-Preferred	PA; QL
<b>*LYSOSOMAL ACID LIPASE (LAL) DEFICIENCY - AGENTS***</b>			
KANUMA INTRAVENOUS SOLUTION		Non-Preferred	PA; SP
<b>*MOLYBDENUM COFACTOR DEFICIENCY (MOCD) - AGENTS***</b>			
NULIBRY INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA
<b>*MUCOPOLYSACCHARIDOSIS I (MPS I) - AGENTS***</b>			
ALDURAZYME INTRAVENOUS SOLUTION		Non-Preferred	PA; SP

Drug Name	Reference	Status	Notes
<b>*MUCOPOLYSACCHARIDOSIS II (MPS II) - AGENTS***</b>			
ELAPRASE INTRAVENOUS SOLUTION		Non-Preferred	PA; SP
<b>*MUCOPOLYSACCHARIDOSIS IV (MPS IV) - AGENTS***</b>			
VIMIZIM INTRAVENOUS SOLUTION		Non-Preferred	PA; SP
<b>*MUCOPOLYSACCHARIDOSIS VI (MPS VI) - AGENTS***</b>			
NAGLAZYME INTRAVENOUS SOLUTION		Non-Preferred	PA; SP
<b>*MUCOPOLYSACCHARIDOSIS VII (MPS VII) - AGENTS***</b>			
MEPSEVII INTRAVENOUS SOLUTION		Non-Preferred	PA
<b>*NATRIURETIC PEPTIDES***</b>			
VOXZOGO SUBCUTANEOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP; QL
<b>*NEUROKININ 3 (NK3) RECEPTOR ANTAGONISTS***</b>			
VEOZAH ORAL TABLET		Non-Preferred	PA; QL
<b>*NON-STEROIDAL MINERALOCORTICOID RECEPTOR ANTAGONISTS***</b>			
KERENDIA ORAL TABLET		Non-Preferred	PA; QL
<b>*OVULATION STIMULANTS-GONADOTROPINS***</b>			
chorionic gonadotropin intramuscular solution reconstituted	Pregnyl	Non-Preferred	PA; SP
NOVAREL INTRAMUSCULAR SOLUTION RECONSTITUTED		Non-Preferred	PA; SP
PREGNYL INTRAMUSCULAR SOLUTION RECONSTITUTED		Non-Preferred	PA; SP
<b>*PARATHYROID HORMONE AND DERIVATIVES***</b>			
FORTEO SUBCUTANEOUS SOLUTION PEN-INJECTOR		Non-Preferred	PA; SP; QL
teriparatide subcutaneous solution pen-injector	Forteo	Non-Preferred	PA; SP; QL

Drug Name	Reference	Status	Notes
TYMLOS SUBCUTANEOUS SOLUTION PEN-INJECTOR		Non-Preferred	PA; SP; QL
<b>*PHENYLKETONURIA TREATMENT - AGENTS***</b>			
JAVYGTOR ORAL PACKET		Non-Preferred	PA; SP
JAVYGTOR ORAL TABLET		Non-Preferred	PA; SP
KUVAN ORAL PACKET		Non-Preferred	PA; SP
KUVAN ORAL TABLET		Non-Preferred	PA; SP
PALYNZIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.5ML		Non-Preferred	PA; SP
PALYNZIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 2.5 MG/0.5ML, 20 MG/ML		Non-Preferred	PA; SP; QL
sapropterin dihydrochloride oral packet	Javygtor	Non-Preferred	PA; SP
sapropterin dihydrochloride oral tablet	Javygtor	Non-Preferred	PA; SP
<b>*SCLEROSTIN INHIBITORS***</b>			
EVENITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE		Non-Preferred	PA; SP; QL
<b>*SELECTIVE ESTROGEN RECEPTOR MODULATORS (SERMS)***</b>			
EVISTA ORAL TABLET		Non-Preferred	QL
OSPHENA ORAL TABLET		Non-Preferred	PA; QL
raloxifene hcl oral tablet	Evista	Preferred	QL
<b>*SELECTIVE VASOPRESSIN V2-RECEPTOR ANTAGONISTS***</b>			
JYNARQUE ORAL TABLET		Non-Preferred	PA; SP; QL
JYNARQUE ORAL TABLET THERAPY PACK		Non-Preferred	PA; QL
SAMSCA ORAL TABLET		Non-Preferred	PA; SP; QL
tolvaptan oral tablet	Jynarque	Non-Preferred	PA; SP; QL
<b>*SOMATOSTATIC AGENTS***</b>			
MYCAPSSA ORAL CAPSULE DELAYED RELEASE		Non-Preferred	PA; QL
octreotide acetate injection solution	SandoSTATIN	Preferred	PA; SP
octreotide acetate subcutaneous solution prefilled syringe		Preferred	PA; SP

Drug Name	Reference	Status	Notes
SANDOSTATIN INJECTION SOLUTION		Non-Preferred	PA; SP
SIGNIFOR LAR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER		Non-Preferred	PA; QL
SIGNIFOR SUBCUTANEOUS SOLUTION		Non-Preferred	PA; QL
<b>*TRIPEPTIDYL PEPTIDASE 1 DEFICIENCY TREATMENT - AGENTS***</b>			
BRINEURA KIT		Non-Preferred	PA
<b>*UREA CYCLE DISORDER - AGENTS***</b>			
AMMONUL INTRAVENOUS SOLUTION		Non-Preferred	
BUPHENYL ORAL POWDER		Non-Preferred	PA; SP; QL
BUPHENYL ORAL TABLET		Non-Preferred	PA; SP; QL
citrulline easy oral tablet extended release		Non-Preferred	
OLPRUVA (2 GM DOSE) ORAL THERAPY PACK		Non-Preferred	PA; QL
OLPRUVA (3 GM DOSE) ORAL THERAPY PACK		Non-Preferred	PA; QL
OLPRUVA (4 GM DOSE) ORAL THERAPY PACK		Non-Preferred	PA; QL
OLPRUVA (5 GM DOSE) ORAL THERAPY PACK		Non-Preferred	PA; QL
OLPRUVA (6 GM DOSE) ORAL THERAPY PACK		Non-Preferred	PA; QL
OLPRUVA (6.67 GM DOSE) ORAL THERAPY PACK		Non-Preferred	PA; QL
PHEBURANE ORAL PELLETT		Preferred	PA; SP; QL
RAVICTI ORAL LIQUID		Non-Preferred	PA; SP; QL
sod benz-sod phenylacet intravenous solution	Ammonul	Non-Preferred	
sodium phenylbutyrate oral powder	Buphenyl	Preferred	PA; SP; QL
sodium phenylbutyrate oral tablet	Buphenyl	Preferred	PA; SP; QL
<b>*VASOPRESSIN***</b>			
DDAVP INJECTION SOLUTION		Non-Preferred	
DDAVP ORAL TABLET 0.1 MG		Non-Preferred	DO; QL
DDAVP ORAL TABLET 0.2 MG		Non-Preferred	QL

Drug Name	Reference	Status	Notes
<b>DDAVP PF INJECTION SOLUTION</b>		Non-Preferred	
desmopressin ace spray refrig nasal solution		Preferred	
desmopressin acetate injection solution	DDAVP	Non-Preferred	
desmopressin acetate nasal solution		Non-Preferred	PA; QL
desmopressin acetate oral tablet 0.1 mg	DDAVP	Preferred	DO; QL
desmopressin acetate oral tablet 0.2 mg	DDAVP	Preferred	QL
desmopressin acetate pf injection solution	DDAVP PF	Non-Preferred	
desmopressin acetate spray nasal solution		Preferred	
<b>NOCDURNA SUBLINGUAL TABLET SUBLINGUAL</b>		Non-Preferred	PA; QL
<b>TERLIVAZ INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	
vasopressin +rfid intravenous solution	Vasostrict	Non-Preferred	
vasopressin intravenous solution	Vasostrict	Non-Preferred	
vasopressin-sodium chloride intravenous solution		Non-Preferred	
<b>VASOSTRICT INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>*X-LINKED HYPOPHOSPHATEMIA (XLH) TREATMENT - AGENTS***</b>			
<b>CRYSVITA SUBCUTANEOUS SOLUTION</b>		Non-Preferred	PA; SP; QL
<b>*ESTROGENS*</b>			
<b>*ESTROGEN &amp; PROGESTIN***</b>			
<b>ACTIVELLA ORAL TABLET</b>		Non-Preferred	
<b>ANGELIQ ORAL TABLET</b>		Non-Preferred	
<b>BIJUVA ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>CLIMARA PRO TRANSDERMAL PATCH WEEKLY</b>		Non-Preferred	QL
<b>COMBIPATCH TRANSDERMAL PATCH TWICE WEEKLY</b>		Non-Preferred	QL
estradiol-norethindrone acet oral tablet	Mimvey	Preferred	
<b>FYAVOLV ORAL TABLET</b>		Preferred	

Drug Name	Reference	Status	Notes
JINTELI ORAL TABLET		Preferred	
MIMVEY ORAL TABLET		Preferred	
norethindrone-eth estradiol oral tablet	Fyavolv	Preferred	
PREMPHASE ORAL TABLET		Non-Preferred	
PREMPRO ORAL TABLET		Non-Preferred	
<b>*ESTROGEN-PROGESTIN-GNRH ANTAGONIST***</b>			
MYFEMBREE ORAL TABLET		Non-Preferred	PA; QL
ORIAHNN ORAL CAPSULE THERAPY PACK		Non-Preferred	PA; QL
<b>*ESTROGENS***</b>			
ALORA TRANSDERMAL PATCH TWICE WEEKLY		Non-Preferred	PA; QL
CLIMARA TRANSDERMAL PATCH WEEKLY		Non-Preferred	PA; QL
DELESTROGEN INTRAMUSCULAR OIL		Non-Preferred	
DEPO-ESTRADIOL INTRAMUSCULAR OIL		Non-Preferred	PA
DIVIGEL TRANSDERMAL GEL		Non-Preferred	PA; QL
DOTTI TRANSDERMAL PATCH TWICE WEEKLY		Non-Preferred	PA; QL
ELESTRIN TRANSDERMAL GEL		Non-Preferred	PA; QL
ESTRACE ORAL TABLET		Non-Preferred	
estradiol oral tablet	Estrace	Preferred	
estradiol transdermal gel	Divigel	Non-Preferred	PA; QL
estradiol transdermal patch twice weekly	Alora	Non-Preferred	PA; QL
estradiol transdermal patch weekly	Climara	Preferred	QL
estradiol valerate intramuscular oil	Delestrogen	Non-Preferred	
ESTROGEL TRANSDERMAL GEL		Non-Preferred	PA; QL
EVAMIST TRANSDERMAL SOLUTION		Non-Preferred	PA; QL
LYLLANA TRANSDERMAL PATCH TWICE WEEKLY		Non-Preferred	PA; QL
MENEST ORAL TABLET		Non-Preferred	
MENOSTAR TRANSDERMAL PATCH WEEKLY		Non-Preferred	PA; QL
MINIVELLE TRANSDERMAL PATCH TWICE WEEKLY		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
PREMARIN INJECTION SOLUTION RECONSTITUTED		Non-Preferred	
PREMARIN ORAL TABLET		Non-Preferred	QL
VIVELLE-DOT TRANSDERMAL PATCH TWICE WEEKLY		Non-Preferred	PA; QL
<b>*ESTROGEN-SELECTIVE ESTROGEN RECEPTOR MODULATOR COMB***</b>			
DUAVEE ORAL TABLET		Non-Preferred	PA
<b>*FLUOROQUINOLONES*</b>			
<b>*FLUOROQUINOLONES***</b>			
BAXDELA INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA
BAXDELA ORAL TABLET		Non-Preferred	PA
CIPRO ORAL SUSPENSION RECONSTITUTED		Non-Preferred	
CIPRO ORAL TABLET		Non-Preferred	
ciprofloxacin hcl oral tablet	Cipro	Preferred	
ciprofloxacin in d5w intravenous solution		Non-Preferred	
levofloxacin in d5w intravenous solution		Non-Preferred	
levofloxacin intravenous solution		Non-Preferred	
levofloxacin oral solution		Preferred	
levofloxacin oral tablet		Preferred	
moxifloxacin hcl in nacl intravenous solution		Non-Preferred	
moxifloxacin hcl intravenous solution		Non-Preferred	
moxifloxacin hcl oral tablet		Non-Preferred	
ofloxacin oral tablet		Preferred	
<b>*GASTROINTESTINAL AGENTS - MISC.*</b>			
<b>*5-HT4 RECEPTOR AGONISTS***</b>			
MOTEGRITY ORAL TABLET		Non-Preferred	PA; QL
<b>*ANTIFLATULENTS***</b>			
anti-gas oral capsule	Gas-X Prevention	Non-Preferred	OTC
BEANO MELTAWAYS ORAL TABLET DISPERSIBLE		Non-Preferred	OTC
BEANO ULTRA 800 ORAL TABLET		Non-Preferred	OTC



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>BICARSIM ORAL TABLET</b>		Non-Preferred	OTC
drxchoice gas relief oral tablet chewable		Preferred	OTC
gas relief & prevention oral capsule	Gas-X Prevention	Non-Preferred	OTC
gas relief extra strength oral capsule	Gas-X Extra Strength	Preferred	OTC
gas relief extra strength oral tablet chewable	Phazyme	Preferred	OTC
gas relief infants oral suspension	PediaCare Infants Gas Relief	Preferred	OTC
gas relief oral liquid	Gas-X Infant Drops	Preferred	OTC
gas relief oral tablet chewable		Preferred	OTC
gas relief ultra strength oral capsule	Gas-X Ultra Strength	Preferred	OTC
<b>GAS-X CHILDRENS ORAL STRIP</b>		Non-Preferred	OTC
<b>GAS-X EXTRA STRENGTH ORAL CAPSULE</b>		Preferred	OTC
<b>GAS-X EXTRA STRENGTH ORAL STRIP</b>		Non-Preferred	OTC
<b>GAS-X EXTRA STRENGTH ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>GAS-X INFANT DROPS ORAL LIQUID</b>		Preferred	OTC
<b>GAS-X PREVENTION ORAL CAPSULE</b>		Non-Preferred	OTC
<b>GAS-X ULTRA STRENGTH ORAL CAPSULE</b>		Preferred	OTC
heartland gas relief oral tablet chewable		Preferred	OTC
infants gas relief oral suspension	PediaCare Infants Gas Relief	Preferred	OTC
<b>MYLANTA GAS MINIS ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>MYLICON INFANTS GAS RELIEF ORAL SUSPENSION</b>		Non-Preferred	OTC
<b>PEDIACARE INFANTS GAS RELIEF ORAL SUSPENSION</b>		Preferred	OTC
<b>PHAZYME MAXIMUM STRENGTH ORAL CAPSULE</b>		Non-Preferred	OTC
<b>PHAZYME ORAL TABLET CHEWABLE</b>		Preferred	OTC
<b>PHAZYME ULTIMATE ORAL CAPSULE</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>PHAZYME ULTRA STRENGTH ORAL CAPSULE</b>		Non-Preferred	OTC
simeped oral suspension	PediaCare Infants Gas Relief	Preferred	OTC
simethicone drops infants oral suspension	PediaCare Infants Gas Relief	Preferred	OTC
simethicone extra strength oral capsule	Gas-X Extra Strength	Preferred	OTC
simethicone oral capsule	Gas-X Extra Strength	Preferred	OTC
simethicone oral suspension	PediaCare Infants Gas Relief	Preferred	OTC
simethicone oral tablet chewable	Phazyme	Preferred	OTC
simethicone ultra strength oral capsule	Gas-X Ultra Strength	Preferred	OTC
<b>*BILE ACID SYNTHESIS DISORDER AGENTS***</b>			
<b>CHOLBAM ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>*FARNESOID X RECEPTOR (FXR) AGONISTS***</b>			
<b>OCALIVA ORAL TABLET</b>		Non-Preferred	PA; SP; QL
<b>*GALLSTONE SOLUBILIZING AGENTS***</b>			
<b>CHENODAL ORAL TABLET</b>		Non-Preferred	PA; QL
<b>RELTONE ORAL CAPSULE</b>		Non-Preferred	PA
<b>URSO FORTE ORAL TABLET</b>		Non-Preferred	
ursodiol oral capsule 200 mg, 400 mg	Reltone	Non-Preferred	PA
ursodiol oral capsule 300 mg		Preferred	
ursodiol oral tablet	Urso Forte	Preferred	
<b>*GASTROINTESTINAL ANTIALLERGY AGENTS***</b>			
cromolyn sodium oral concentrate	Gastrocrom	Non-Preferred	
<b>GASTROCROM ORAL CONCENTRATE</b>		Non-Preferred	
<b>*GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATORS***</b>			
lubiprostone oral capsule	Amitiza	Preferred	PA; QL
<b>*GASTROINTESTINAL STIMULANTS***</b>			
<b>GIMOTI NASAL SOLUTION</b>		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
metoclopramide hcl injection solution		Non-Preferred	
metoclopramide hcl oral solution		Preferred	QL
metoclopramide hcl oral tablet	Reglan	Preferred	QL
metoclopramide hcl oral tablet dispersible		Non-Preferred	PA; QL
<b>REGLAN ORAL TABLET</b>		Non-Preferred	QL
<b>*GLUCAGON-LIKE PEPTIDE-2 (GLP-2) ANALOGS***</b>			
<b>GATTEX SUBCUTANEOUS KIT</b>		Non-Preferred	PA; SP
<b>*HEPATOTROPICS - THYROID HORMONE RECEPTOR-BETA AGONISTS***</b>			
<b>REZDIFFRA ORAL TABLET</b>		Non-Preferred	PA; SP; QL
<b>*IBS AGENT - MU-OPIOID RECEPTOR AGONISTS***</b>			
<b>VIBERZI ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*IBS AGENT - SELECTIVE 5-HT3 RECEPTOR ANTAGONISTS***</b>			
alosetron hcl oral tablet	Lotronex	Non-Preferred	PA; QL
<b>LOTROXEN ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*IBS AGENT - SODIUM/HYDROGEN EXCHANGER 3 (NHE3) INHIBITOR***</b>			
<b>IBSRELA ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*ILEAL BILE ACID TRANSPORTER (IBAT) INHIBITORS***</b>			
<b>BYLVAY (PELLETS) ORAL CAPSULE SPRINKLE</b>		Non-Preferred	PA; QL
<b>BYLVAY ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>LIVMARLI ORAL SOLUTION</b>		Non-Preferred	PA; QL
<b>*INFLAMMATORY BOWEL AGENTS***</b>			
<b>APRISO ORAL CAPSULE EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; QL
<b>AZULFIDINE EN-TABS ORAL TABLET DELAYED RELEASE</b>		Non-Preferred	PA; QL
<b>AZULFIDINE ORAL TABLET</b>		Non-Preferred	PA; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
balsalazide disodium oral capsule	Colazal	Preferred	QL
<b>CANASA RECTAL SUPPOSITORY</b>		Non-Preferred	QL
<b>COLAZAL ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>DELZICOL ORAL CAPSULE DELAYED RELEASE</b>		Non-Preferred	PA; QL
<b>DIPENTUM ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>LIALDA ORAL TABLET DELAYED RELEASE</b>		Non-Preferred	PA; QL
mesalamine er oral capsule extended release	Pentasa	Non-Preferred	PA; QL
mesalamine er oral capsule extended release 24 hour	Apriso	Preferred	QL
mesalamine oral capsule delayed release	Delzicol	Non-Preferred	PA; QL
mesalamine oral tablet delayed release	Lialda	Non-Preferred	PA; QL
mesalamine rectal enema		Preferred	QL
mesalamine rectal suppository	Canasa	Non-Preferred	QL
mesalamine-cleanser rectal kit	Rowasa	Preferred	QL
<b>PENTASA ORAL CAPSULE EXTENDED RELEASE</b>		Non-Preferred	PA; QL
<b>ROWASA RECTAL KIT</b>		Non-Preferred	QL
<b>SFROWASA RECTAL ENEMA</b>		Non-Preferred	QL
sulfasalazine oral tablet	Azulfidine	Preferred	QL
sulfasalazine oral tablet delayed release	Azulfidine EN-tabs	Preferred	QL
<b>*INTEGRIN RECEPTOR ANTAGONISTS***</b>			
<b>ENTYVIO INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	PA; SP; QL
<b>ENTYVIO PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Non-Preferred	PA; SP; QL
<b>*INTERLEUKIN ANTAGONISTS***</b>			
<b>OMVOH INTRAVENOUS SOLUTION</b>		Non-Preferred	PA; SP; QL
<b>OMVOH SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Non-Preferred	PA; SP; QL
<b>OMVOH SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; SP; QL
<b>SKYRIZI INTRAVENOUS SOLUTION</b>		Non-Preferred	PA; SP; QL

Drug Name	Reference	Status	Notes
<b>SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE</b>		Non-Preferred	PA; SP; QL
<b>STELARA INTRAVENOUS SOLUTION</b>		Non-Preferred	PA; SP; QL
<b>*INTESTINAL ACIDIFIERS***</b>			
enulose oral solution		Preferred	QL
generlac oral solution		Preferred	QL
lactulose encephalopathy oral solution		Preferred	QL
<b>*LIVE FECAL MICROBIOTA (HUMAN)**</b>			
<b>REBYOTA RECTAL SUSPENSION</b>		Non-Preferred	PA; QL
<b>VOWST ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>*PERIPHERAL OPIOID RECEPTOR ANTAGONISTS***</b>			
alvimopan oral capsule		Non-Preferred	
<b>RELISTOR ORAL TABLET</b>		Non-Preferred	PA; QL
<b>RELISTOR SUBCUTANEOUS SOLUTION</b>		Non-Preferred	PA; QL
<b>SYMPROIC ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*PEROXISOME PROLIFERATOR-ACTIVATED RECEPTOR AGONISTS***</b>			
<b>IQIRVO ORAL TABLET</b>		Non-Preferred	PA; SP; QL
<b>LIVDELZI ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>*PHOSPHATE BINDER AGENTS***</b>			
<b>AURYXIA ORAL TABLET</b>		Non-Preferred	PA; QL
calcium acetate (phos binder) oral capsule		Preferred	QL
calcium acetate (phos binder) oral tablet	Calphron	Preferred	QL
calcium acetate oral tablet	Calphron	Preferred	QL
<b>CALPHRON ORAL TABLET</b>		Preferred	OTC; QL
<b>FOSRENOL ORAL PACKET</b>		Non-Preferred	PA; QL
<b>FOSRENOL ORAL TABLET CHEWABLE</b>		Non-Preferred	PA; QL
lanthanum carbonate oral tablet chewable	Fosrenol	Preferred	QL
<b>RENAGEL ORAL TABLET</b>		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
REVELA ORAL PACKET		Non-Preferred	PA; QL
REVELA ORAL TABLET		Non-Preferred	PA; QL
sevelamer carbonate oral packet	Renvela	Preferred	QL
sevelamer carbonate oral tablet	Renvela	Preferred	QL
sevelamer hcl oral tablet	Renagel	Non-Preferred	PA; QL
<b>*SPHINGOSINE 1-PHOSPHATE (S1P) RECEPTOR MODULATORS (GI)***</b>			
VELSIPITY ORAL TABLET		Non-Preferred	PA; SP; QL
<b>*TRYPTOPHAN HYDROXYLASE INHIBITORS***</b>			
XERMELO ORAL TABLET		Non-Preferred	PA; QL
<b>*TUMOR NECROSIS FACTOR ALPHA BLOCKERS***</b>			
CIMZIA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT		Non-Preferred	PA; SP; QL
CIMZIA SUBCUTANEOUS KIT		Non-Preferred	PA; SP; QL
CIMZIA-STARTER SUBCUTANEOUS PREFILLED SYRINGE KIT		Non-Preferred	PA; SP; QL
ZYMFENTRA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT		Non-Preferred	PA; SP; QL
ZYMFENTRA (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT		Non-Preferred	PA; SP; QL
ZYMFENTRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT		Non-Preferred	PA; SP; QL
<b>*GENERAL ANESTHETICS*</b>			
<b>*ANESTHETICS - MISC.***</b>			
AMIDATE INTRAVENOUS SOLUTION		Non-Preferred	
anesthesia s/i-40a intravenous kit		Non-Preferred	
anesthesia s/i-40h intravenous kit		Non-Preferred	
anesthesia s/i-40s intravenous kit		Non-Preferred	
DIPRIVAN INTRAVENOUS EMULSION		Non-Preferred	
etomidate intravenous solution	Amidate	Non-Preferred	

Drug Name	Reference	Status	Notes
fresenius propoven intravenous emulsion	Diprivan	Non-Preferred	
<b>KETALAR INJECTION SOLUTION</b>		Non-Preferred	
ketamine hcl injection solution	Ketalar	Non-Preferred	
propofol intravenous emulsion	Diprivan	Non-Preferred	
propofol-lipuro intravenous emulsion	Diprivan	Non-Preferred	
<b>*BARBITURATE ANESTHETICS***</b>			
<b>BREVITAL SODIUM INJECTION SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>*VOLATILE ANESTHETICS***</b>			
desflurane inhalation solution	Suprane	Non-Preferred	
<b>FORANE INHALATION SOLUTION</b>		Non-Preferred	
isoflurane inhalation solution	Forane	Non-Preferred	
sevoflurane inhalation solution	Ultane	Non-Preferred	
<b>SUPRANE INHALATION SOLUTION</b>		Non-Preferred	
<b>TERRELL INHALATION SOLUTION</b>		Non-Preferred	
<b>ULTANE INHALATION SOLUTION</b>		Non-Preferred	
<b>*GENITOURINARY AGENTS - MISCELLANEOUS*</b>			
<b>*5-ALPHA REDUCTASE INHIBITORS***</b>			
<b>AVODART ORAL CAPSULE</b>		Non-Preferred	QL
dutasteride oral capsule	Avodart	Non-Preferred	QL
finasteride oral tablet	Proscar	Preferred	QL
<b>PROSCAR ORAL TABLET</b>		Non-Preferred	QL
<b>*ALPHA 1-ADRENOCEPTOR ANTAGONISTS***</b>			
alfuzosin hcl er oral tablet extended release 24 hour	Uroxatral	Preferred	QL
<b>CARDURA XL ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	QL
<b>FLOMAX ORAL CAPSULE</b>		Non-Preferred	QL
<b>RAPAFLO ORAL CAPSULE</b>		Non-Preferred	QL
silodosin oral capsule	Rapaflo	Non-Preferred	QL
tamsulosin hcl oral capsule	Flomax	Preferred	QL
<b>UROXATRAL ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	QL

Drug Name	Reference	Status	Notes
<b>*ANTI-INFECTIVE GENITOURINARY IRRIGANTS***</b>			
neomycin-polymyxin b gu irrigation solution		Non-Preferred	
<b>*CITRATES***</b>			
<b>CITRATABS ORAL TABLET EXTENDED RELEASE</b>		Non-Preferred	OTC
<b>LITHOLYTE ORAL PACKET</b>		Non-Preferred	OTC
potassium citrate er oral tablet extended release	Urocit-K 10	Preferred	
<b>UROCIT-K 10 ORAL TABLET EXTENDED RELEASE</b>		Non-Preferred	
<b>UROCIT-K 15 ORAL TABLET EXTENDED RELEASE</b>		Non-Preferred	
<b>*CYSTINOSIS AGENTS***</b>			
<b>CYSTAGON ORAL CAPSULE</b>		Non-Preferred	PA; SP
<b>PROCYSBI ORAL CAPSULE DELAYED RELEASE</b>		Non-Preferred	PA
<b>PROCYSBI ORAL PACKET</b>		Non-Preferred	PA
<b>*GENITOURINARY IRRIGANTS***</b>			
acetic acid irrigation solution		Non-Preferred	
<b>ARGYLE STERILE SALINE IRRIGATION SOLUTION</b>		Preferred	
<b>CURITY STERILE SALINE IRRIGATION SOLUTION</b>		Preferred	
glycine irrigation solution		Non-Preferred	
glycine urologic irrigation solution		Non-Preferred	
<b>RENACIDIN IRRIGATION SOLUTION</b>		Non-Preferred	
sodium chloride irrigation solution	Argyle Sterile Saline	Preferred	
sorbitol irrigation solution		Non-Preferred	
sorbitol-mannitol irrigation solution		Non-Preferred	
<b>*IGAN AGENTS - ENDOTHELIN &amp; ANGIOTENSIN II RECEPTOR ANTAG***</b>			
<b>FILSPARI ORAL TABLET</b>		Non-Preferred	PA; SP; QL
<b>*INTERSTITIAL CYSTITIS AGENTS***</b>			
<b>ELMIRON ORAL CAPSULE</b>		Non-Preferred	QL



Drug Name	Reference	Status	Notes
<b>RIMSO-50 INTRAVESICAL SOLUTION</b>		Non-Preferred	
<b>*PHOSPHATES***</b>			
<b>K-PHOS NO 2 ORAL TABLET</b>		Non-Preferred	
<b>*PROSTATIC HYPERTROPHY AGENT COMBINATIONS***</b>			
dutasteride-tamsulosin hcl oral capsule		Non-Preferred	QL
<b>ENTADFI ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>*SMALL INTERFERING RIBONUCLEIC ACID AGENTS (SIRNA)***</b>			
<b>OXLUMO SUBCUTANEOUS SOLUTION</b>		Non-Preferred	PA
<b>RIVFLOZA SUBCUTANEOUS SOLUTION</b>		Non-Preferred	PA; SP; QL
<b>RIVFLOZA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; SP; QL
<b>*URINARY ANALGESIC COMBINATIONS***</b>			
<b>URISTAT ULTRA UTI RELIEF PAK COMBINATION THERAPY PAK</b>		Non-Preferred	OTC
<b>URISTAT UTI RELIEF PAK COMBINATION THERAPY PAK</b>		Non-Preferred	OTC
<b>*URINARY ANALGESICS***</b>			
azo tabs oral tablet	AZO Urinary Pain Relief	Preferred	OTC
<b>AZO URINARY PAIN RELIEF ORAL TABLET 95 MG</b>		Preferred	OTC
<b>AZO URINARY PAIN RELIEF ORAL TABLET 99.5 MG</b>		Non-Preferred	OTC
<b>PHENAZO ORAL TABLET</b>		Preferred	OTC
phenazopyridine hcl oral tablet	AZO Urinary Pain Relief	Preferred	OTC
urinary pain relief max st oral tablet		Preferred	OTC
urinary pain relief oral tablet 95 mg	AZO Urinary Pain Relief	Preferred	OTC
urinary pain relief oral tablet 99.5 mg	AZO Urinary Pain Relief	Non-Preferred	OTC
<b>URISTAT ULTRA ORAL TABLET</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>URO-PAIN MAXIMUM STRENGTH ORAL TABLET</b>		Non-Preferred	OTC
<b>URO-PAIN ORAL TABLET</b>		Preferred	OTC
<b>*URINARY STONE AGENTS***</b>			
<b>LITHOSTAT ORAL TABLET</b>		Non-Preferred	
<b>THIOLA EC ORAL TABLET DELAYED RELEASE</b>		Non-Preferred	PA; QL
<b>THIOLA ORAL TABLET</b>		Non-Preferred	PA; QL
tiopronin oral tablet	Thiola	Non-Preferred	PA; QL
tiopronin oral tablet delayed release	Thiola EC	Non-Preferred	PA; QL
<b>*GOUT AGENTS*</b>			
<b>*GOUT AGENT COMBINATIONS***</b>			
colchicine-probenecid oral tablet		Preferred	
<b>*GOUT AGENTS***</b>			
allopurinol oral tablet 100 mg, 300 mg		Preferred	QL
allopurinol oral tablet 200 mg		Non-Preferred	PA; QL
allopurinol sodium intravenous solution reconstituted	Aloprim	Non-Preferred	
<b>ALOPRIM INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	
colchicine oral capsule	Mitigare	Preferred	QL
colchicine oral tablet		Preferred	QL
febuxostat oral tablet	Uloric	Non-Preferred	PA; QL
<b>GLOPERBA ORAL SOLUTION</b>		Non-Preferred	PA; QL
<b>KRYSTEXXA INTRAVENOUS SOLUTION</b>		Non-Preferred	PA; SP; QL
<b>MITIGARE ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>ULORIC ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*URICOSURICS***</b>			
probenecid oral tablet		Preferred	
<b>*HEMATOLOGICAL AGENTS - MISC.*</b>			
<b>*AMINOLEVULINATE SYNTHASE 1-DIRECTED SIRNA***</b>			
<b>GIVLAARI SUBCUTANEOUS SOLUTION</b>		Non-Preferred	PA

Drug Name	Reference	Status	Notes
<b>*ANTIHEMOPHILIC PRODUCTS - GENE THERAPY AGENTS***</b>			
BEQVEZ INTRAVENOUS SUSPENSION THERAPY PACK		Non-Preferred	SP
ROCTAVIAN INTRAVENOUS SUSPENSION		Non-Preferred	SP
<b>*ANTIHEMOPHILIC PRODUCTS***</b>			
BALFAXAR INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	
COAGADEX INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP
CORIFACT INTRAVENOUS KIT		Non-Preferred	PA; SP
FIBRYGA INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP
KCENTRA INTRAVENOUS KIT		Non-Preferred	
RIASTAP INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP
TRETTEN INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP
VONVENDI INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP
<b>*ANTI-VON WILLEBRAND FACTOR AGENTS***</b>			
CABLIVI INJECTION KIT		Non-Preferred	PA
<b>*BRADYKININ B2 RECEPTOR ANTAGONISTS***</b>			
FIRAZYR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE		Non-Preferred	PA; SP; QL
icatibant acetate subcutaneous solution prefilled syringe	Sajazir	Preferred	PA; SP; QL
SAJAZIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE		Preferred	PA; SP; QL
<b>*C1 ESTERASE INHIBITORS***</b>			
BERINERT INTRAVENOUS KIT		Preferred	PA; SP; QL
CINRYZE INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP; QL
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED		Preferred	PA; SP; QL

Drug Name	Reference	Status	Notes
<b>*COMPLEMENT C1 INHIBITORS***</b>			
ENJAYMO INTRAVENOUS SOLUTION		Non-Preferred	PA; SP; QL
<b>*COMPLEMENT C3 INHIBITORS***</b>			
EMPAVELI SUBCUTANEOUS SOLUTION		Non-Preferred	PA; QL
<b>*COMPLEMENT C5 INHIBITORS***</b>			
SOLIRIS INTRAVENOUS SOLUTION		Non-Preferred	PA; SP; QL
ULTOMIRIS INTRAVENOUS SOLUTION		Non-Preferred	PA; SP; QL
VEOPOZ INJECTION SOLUTION		Non-Preferred	PA; QL
ZILBRYSQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE		Non-Preferred	PA; QL
<b>*COMPLEMENT C5A INHIBITORS***</b>			
gohibic intravenous solution		Non-Preferred	
<b>*COMPLEMENT C5A RECEPTOR INHIBITORS***</b>			
TAVNEOS ORAL CAPSULE		Non-Preferred	PA; QL
<b>*COMPLEMENT FACTOR B INHIBITORS***</b>			
FABHALTA ORAL CAPSULE		Non-Preferred	PA; QL
<b>*COMPLEMENT FACTOR D INHIBITORS***</b>			
VOYDEYA ORAL TABLET		Non-Preferred	PA; QL
VOYDEYA ORAL TABLET THERAPY PACK		Non-Preferred	PA; QL
<b>*DIRECT-ACTING P2Y12 INHIBITORS***</b>			
KENGREAL INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	
<b>*GLYCOPROTEIN IIB/IIIA RECEPTOR INHIBITORS***</b>			
AGGRASTAT INTRAVENOUS CONCENTRATE		Non-Preferred	
AGGRASTAT INTRAVENOUS SOLUTION		Non-Preferred	

Drug Name	Reference	Status	Notes
eptifibatide intravenous solution		Non-Preferred	
tirofiban hcl in nacl intravenous solution	Aggrastat	Non-Preferred	
<b>*HEMATORHEOLOGIC AGENTS***</b>			
pentoxifylline er oral tablet extended release		Preferred	
<b>*HEMIN***</b>			
<b>PANHEMATIN INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>*HUMAN PROTEIN C***</b>			
<b>CEPROTIN INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	SP
<b>*PHOSPHODIESTERASE III INHIBITORS***</b>			
cilostazol oral tablet		Preferred	
<b>*PLASMA EXPANDERS***</b>			
hetastarch-nacl intravenous solution		Non-Preferred	
<b>HEXTEND INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>LMD IN D5W INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>LMD IN NAACL INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>*PLASMA KALLIKREIN INHIBITORS - MONOCLONAL ANTIBODIES***</b>			
<b>TAKHZYRO SUBCUTANEOUS SOLUTION</b>		Preferred	PA; SP; QL
<b>TAKHZYRO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; SP; QL
<b>*PLASMA KALLIKREIN INHIBITORS***</b>			
<b>ORLADEYO ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>*PLASMA PROTEINS***</b>			
<b>ALBUKED 25 INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>ALBUKED 5 INTRAVENOUS SOLUTION</b>		Non-Preferred	
albumin human intravenous solution	Albuked 25	Non-Preferred	

Drug Name	Reference	Status	Notes
<b>ALBUMINEX INTRAVENOUS SOLUTION</b>		Non-Preferred	
albumin-zlb intravenous solution	Albuked 25	Non-Preferred	
alburx intravenous solution	Albuked 5	Non-Preferred	
<b>ALBUTEIN INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>FLEXBUMIN INTRAVENOUS SOLUTION</b>		Non-Preferred	
kedbumin intravenous solution	Albuked 25	Non-Preferred	
<b>OCTAPLAS BLOOD GROUP A INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>OCTAPLAS BLOOD GROUP AB INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>OCTAPLAS BLOOD GROUP B INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>OCTAPLAS BLOOD GROUP O INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>RYPLAZIM INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	PA; SP
<b>THROMBATE III INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>*PLATELET AGGREGATION INHIBITOR COMBINATIONS***</b>			
aspirin-dipyridamole er oral capsule extended release 12 hour		Non-Preferred	PA; QL
<b>YOSPRALA ORAL TABLET DELAYED RELEASE</b>		Non-Preferred	PA; QL
<b>*PLATELET AGGREGATION INHIBITORS***</b>			
dipyridamole oral tablet		Preferred	
<b>*PROTAMINE***</b>			
protamine sulfate intravenous solution		Non-Preferred	
<b>*PROTEASE-ACTIVATED RECEPTOR-1 (PAR-1) ANTAGONISTS***</b>			
<b>ZONTIVITY ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*PYRUVATE KINASE ACTIVATORS***</b>			
<b>PYRUKYND ORAL TABLET</b>		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
<b>PYRUKYND TAPER PACK ORAL TABLET THERAPY PACK</b>		Non-Preferred	PA; QL
<b>*QUINAZOLINE AGENTS***</b>			
<b>AGRYLIN ORAL CAPSULE</b>		Non-Preferred	QL
anagrelide hcl oral capsule	Agrylin	Preferred	QL
<b>*SPLEEN TYROSINE KINASE (SYK) INHIBITORS***</b>			
<b>TAVALISSE ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*THIENOPYRIDINE DERIVATIVES***</b>			
clopidogrel bisulfate oral tablet	Plavix	Preferred	QL
<b>EFFIENT ORAL TABLET</b>		Non-Preferred	QL
<b>PLAVIX ORAL TABLET</b>		Non-Preferred	QL
<b>*THROMBOLYTIC AGENT - MISC***</b>			
<b>DEFITELIO INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>*TISSUE PLASMINOGEN ACTIVATORS***</b>			
<b>ACTIVASE INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>CATHFLO ACTIVASE INJECTION SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>TNKASE INTRAVENOUS KIT</b>		Non-Preferred	
<b>*HEMATOPOIETIC AGENTS*</b>			
<b>*AGENTS FOR GAUCHER DISEASE***</b>			
<b>CERDELGA ORAL CAPSULE</b>		Non-Preferred	PA; SP; QL
<b>CEREZYME INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	PA; SP
<b>ELELYSO INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	PA; SP
miglustat oral capsule	Yargesa	Non-Preferred	PA; SP; QL
<b>VPRIV INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	PA; SP
<b>YARGESA ORAL CAPSULE</b>		Non-Preferred	PA; SP; QL
<b>ZAVESCA ORAL CAPSULE</b>		Non-Preferred	PA; SP; QL

Drug Name	Reference	Status	Notes
<b>*AGENTS FOR SICKLE CELL DISEASE - AUTOLOGOUS GENE THERAPY***</b>			
<b>CASGEVY INTRAVENOUS SUSPENSION</b>		Non-Preferred	
<b>LYFGENIA INTRAVENOUS SUSPENSION</b>		Non-Preferred	SP
<b>*AMINO ACIDS***</b>			
<b>ENDARI ORAL PACKET</b>		Non-Preferred	PA; SP
l-glutamine oral packet	Endari	Non-Preferred	PA; SP
<b>*COBALAMIN COMBINATIONS***</b>			
5-mthf plus b12 oral tablet dispersible	Adeno+Hydroxo B12	Non-Preferred	OTC
<b>ADENO+HYDROXO B12 ORAL TABLET DISPERSIBLE</b>		Non-Preferred	OTC
b-12 + folic acid oral tablet dispersible	Adeno+Hydroxo B12	Non-Preferred	OTC
b-12 plus folic acid oral tablet dispersible	Adeno+Hydroxo B12	Non-Preferred	OTC
b-12 sublingual tablet sublingual		Non-Preferred	OTC
b-12 ultra oral tablet dispersible		Non-Preferred	OTC
<b>COGNIQUIL ORAL CAPSULE</b>		Non-Preferred	OTC
<b>MTX SUPPORT ORAL TABLET</b>		Non-Preferred	OTC
natures truth b-12 sublingual liquid		Non-Preferred	OTC
<b>NEURIVA PLUS ORAL CAPSULE</b>		Non-Preferred	OTC
<b>NEURIVA PLUS ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>OPURITY B12/FOLIC ACID ORAL TABLET</b>		Non-Preferred	OTC
vitamin b12-folic acid oral tablet	MTX Support	Non-Preferred	OTC
<b>*COBALAMINS***</b>			
b-12 (methylcobalamin) sublingual tablet sublingual		Non-Preferred	OTC
<b>B-12 DOTS ORAL TABLET DISPERSIBLE</b>		Preferred	OTC
b12 fast dissolve oral tablet dispersible		Non-Preferred	OTC
b-12 fast dissolve sublingual tablet sublingual	MM Vitamin B12	Non-Preferred	OTC
b-12 methylcobalamin oral tablet dispersible		Non-Preferred	OTC



Drug Name	Reference	Status	Notes
<b>B-12 MICROLOZENGE SUBLINGUAL TABLET SUBLINGUAL</b>		Preferred	OTC
b-12 oral capsule		Non-Preferred	OTC
b-12 oral lozenge		Non-Preferred	OTC
b-12 oral tablet 100 mcg, 1000 mcg, 250 mcg, 50 mcg		Preferred	OTC
b-12 oral tablet 2000 mcg, 2500 mcg		Non-Preferred	OTC
b-12 oral tablet 500 mcg	Finest Nutrition Vitamin B-12	Preferred	OTC
b-12 oral tablet dispersible		Non-Preferred	OTC
b-12 oral tablet extended release		Preferred	OTC
b12 sublingual tablet sublingual	MM Vitamin B12	Non-Preferred	OTC
b-12 sublingual tablet sublingual 1000 mcg, 2500 mcg, 5000 mcg		Preferred	OTC
b-12 sublingual tablet sublingual 3000 mcg		Non-Preferred	OTC
b-12 sublingual tablet sublingual 500 mcg	B-12 Microlozenge	Preferred	OTC
b-12 super strength sublingual liquid		Non-Preferred	OTC
b-12 tr oral tablet extended release		Preferred	OTC
<b>B12-ACTIVE ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
b-12-sl sublingual tablet sublingual		Preferred	OTC
cyanocobalamin injection solution	Dodex	Preferred	
cyanocobalamin nasal solution	Nascobal	Non-Preferred	
cyanocobalamin sublingual liquid		Non-Preferred	OTC
<b>DODEX INJECTION SOLUTION</b>		Preferred	
energy b12 oral tablet chewable		Non-Preferred	OTC
fast acting b12 sublingual tablet sublingual		Non-Preferred	OTC
hydroxocobalamin acetate intramuscular solution		Preferred	
methyl b-12 oral lozenge		Non-Preferred	OTC
methyl b-12 oral tablet chewable		Non-Preferred	OTC
methylcobalamin oral tablet dispersible		Non-Preferred	OTC
<b>NASCOBAL NASAL SOLUTION</b>		Non-Preferred	
<b>VB12 MAX ORAL LIQUID</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>VITAMELTS ENERGY VITAMIN B-12 ORAL TABLET DISPERSIBLE</b>		Non-Preferred	OTC
vitamin b 12 oral lozenge		Non-Preferred	OTC
vitamin b 12 oral tablet	Finest Nutrition Vitamin B-12	Preferred	OTC
vitamin b-12 er oral tablet extended release 1000 mcg, 2000 mcg		Preferred	OTC
vitamin b-12 er oral tablet extended release 1500 mcg		Non-Preferred	OTC
vitamin b-12 oral liquid		Preferred	OTC
vitamin b-12 oral lozenge 50 mcg, 5000 mcg		Non-Preferred	OTC
vitamin b-12 oral lozenge 500 mcg		Preferred	OTC
vitamin b12 oral tablet		Preferred	OTC
vitamin b-12 oral tablet	Finest Nutrition Vitamin B-12	Preferred	OTC
vitamin b-12 oral tablet dispersible		Non-Preferred	OTC
vitamin b12 oral tablet extended release		Preferred	OTC
vitamin b12 sublingual liquid		Preferred	OTC
vitamin b-12 sublingual liquid		Preferred	OTC
vitamin b12 sublingual tablet sublingual		Non-Preferred	OTC
vitamin b-12 sublingual tablet sublingual 1000 mcg, 2500 mcg, 5000 mcg		Preferred	OTC
vitamin b-12 sublingual tablet sublingual 3000 mcg, 6000 mcg		Non-Preferred	OTC
vitamin b-12 sublingual tablet sublingual 500 mcg	B-12 Microlozenge	Preferred	OTC
vitamin b12 tr oral tablet extended release		Preferred	OTC
<b>*CXCR4 RECEPTOR ANTAGONIST***</b>			
<b>APHEXDA SUBCUTANEOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	PA
<b>MOZOBIL SUBCUTANEOUS SOLUTION</b>		Non-Preferred	PA; SP
plerixafor subcutaneous solution	Mozobil	Non-Preferred	PA; SP
<b>XOLREMDI ORAL CAPSULE</b>		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
<b>*CYTOTOXIC AGENTS***</b>			
DROXIA ORAL CAPSULE		Preferred	
SIKLOS ORAL TABLET		Non-Preferred	PA; SP
<b>*ERYTHROID MATURATION AGENTS***</b>			
REBLOZYL SUBCUTANEOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP
<b>*ERYTHROPOIESIS-STIMULATING AGENTS (ESAS)***</b>			
ARANESP (ALBUMIN FREE) INJECTION SOLUTION		Preferred	PA; SP; QL
ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE		Preferred	PA; SP; QL
EPOGEN INJECTION SOLUTION		Preferred	PA; SP; QL
MIRCERA INJECTION SOLUTION PREFILLED SYRINGE		Non-Preferred	PA; QL
PROCRIT INJECTION SOLUTION		Non-Preferred	PA; SP; QL
RETACRIT INJECTION SOLUTION		Preferred	PA; SP; QL
<b>*FOLIC ACID/FOLATE COMBINATIONS***</b>			
ABATREX ORAL TABLET		Non-Preferred	OTC
b complex-folic acid oral tablet		Non-Preferred	OTC
btrex oral tablet extended release		Non-Preferred	OTC
folic acid-vit b6-vit b12 oral tablet		Non-Preferred	OTC
folinic-plus oral tablet		Non-Preferred	OTC
FOLTABS 800 ORAL TABLET		Non-Preferred	OTC
INTRINSI B12-FOLATE ORAL TABLET		Non-Preferred	OTC
l-arginine mens health oral tablet		Non-Preferred	OTC
MOOD POSITIVE 5-HTP ORAL TABLET		Non-Preferred	OTC
NEUROPHX DPN ORAL CAPSULE		Non-Preferred	OTC
newfolic oral capsule		Non-Preferred	OTC
<b>*FOLIC ACID/FOLATES***</b>			
FA-8 ORAL CAPSULE		Non-Preferred	OTC
folate oral tablet		Preferred	OTC
folic acid injection solution		Preferred	

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
folic acid oral capsule	FA-8	Non-Preferred	OTC
folic acid oral tablet 1 mg		Preferred	
folic acid oral tablet 400 mcg, 800 mcg		Preferred	OTC
true folic acid oral tablet		Preferred	OTC
<b>*GRANULOCYTE COLONY-STIMULATING FACTORS (G-CSF)***</b>			
<b>FULPHILA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; SP; QL
<b>FYLNTRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; SP; QL
<b>GRANIX SUBCUTANEOUS SOLUTION</b>		Non-Preferred	PA; SP
<b>GRANIX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; SP
<b>NEULASTA ONPRO SUBCUTANEOUS PREFILLED SYRINGE KIT</b>		Preferred	PA; SP; QL
<b>NEULASTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Preferred	PA; SP; QL
<b>NEUPOGEN INJECTION SOLUTION</b>		Non-Preferred	PA; SP
<b>NEUPOGEN INJECTION SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; SP
<b>NIVESTYM INJECTION SOLUTION</b>		Non-Preferred	PA; SP
<b>NIVESTYM INJECTION SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; SP
<b>NYVEPRIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; SP; QL
releuko subcutaneous solution prefilled syringe		Non-Preferred	PA; SP
<b>ROLVEDON SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; SP; QL
<b>STIMUFEND SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; SP; QL
<b>UDENYCA ONBODY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Preferred	PA; SP; QL
<b>UDENYCA SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Preferred	PA; SP; QL
<b>UDENYCA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Preferred	PA; SP; QL

Drug Name	Reference	Status	Notes
ZARXIO INJECTION SOLUTION PREFILLED SYRINGE		Preferred	PA; SP
ZIEXTENZO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE		Non-Preferred	PA; SP; QL
<b>*GRANULOCYTE/MACROPHAGE COLONY-STIMULATING FACTOR(GM-CSF)***</b>			
LEUKINE INJECTION SOLUTION RECONSTITUTED		Non-Preferred	PA; SP
<b>*HEMATOPOIETIC AUTOLOGOUS CELLULAR GENE THERAPY**</b>			
ZYNTEGLO INTRAVENOUS SUSPENSION		Non-Preferred	
<b>*HYPOXIA-INDUCIBLE FACTOR PROLYL HYDROXYLASE INHIBITORS***</b>			
JESDUVROQ ORAL TABLET		Non-Preferred	PA; QL
VAFSEO ORAL TABLET		Non-Preferred	PA; QL
<b>*IRON COMBINATIONS***</b>			
ABATRON AF ORAL TABLET		Preferred	OTC
ABATRON ORAL LIQUID		Non-Preferred	OTC
ACTIRON ORAL TABLET		Non-Preferred	OTC
BIFERA ORAL TABLET		Non-Preferred	OTC
chewable iron oral tablet chewable		Non-Preferred	OTC
fe c tab oral tablet	Icar-C	Preferred	OTC
fe c tab plus oral tablet	Icar-C Plus	Preferred	OTC; QL
FEOSOL BIFERA ORAL TABLET		Non-Preferred	OTC
FERREX 150 PLUS ORAL CAPSULE		Non-Preferred	OTC
FERRO-SEQUELS ORAL TABLET EXTENDED RELEASE		Non-Preferred	OTC
FOLITAB 500 ORAL TABLET EXTENDED RELEASE		Non-Preferred	OTC
FUSION ORAL CAPSULE		Non-Preferred	OTC
gentle iron oral capsule		Preferred	OTC
HEMATOGEN FORTE ORAL CAPSULE		Non-Preferred	OTC
HEMATOGEN ORAL CAPSULE		Preferred	OTC
HEMATRON-AF ORAL TABLET		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>HEMAX EZY-DOSE ORAL TABLET</b>		Non-Preferred	OTC
<b>HEMAX ORAL TABLET</b>		Preferred	OTC
<b>ICAR-C ORAL TABLET</b>		Non-Preferred	OTC
<b>INTEGRA ORAL CAPSULE</b>		Non-Preferred	OTC
iron 100 plus oral tablet	Icar-C Plus	Preferred	OTC; QL
iron 100/c oral tablet	Icar-C	Preferred	OTC
iron complex oral capsule	Hematogen	Preferred	OTC
iron-vitamin c oral tablet	Icar-C	Preferred	OTC
iro-plex oral liquid		Non-Preferred	OTC
iro-plex oral tablet	Actiron	Non-Preferred	OTC
<b>MAXFE ORAL LIQUID</b>		Non-Preferred	OTC
<b>MAXFE ORAL TABLET</b>		Non-Preferred	OTC
<b>NOVAFERRUM IRON ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>NOVAFERRUM YAY ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>PROTECTIRON ORAL TABLET</b>		Non-Preferred	OTC
vitabex iron oral capsule		Non-Preferred	OTC
<b>VITRON-C ORAL TABLET</b>		Non-Preferred	OTC
<b>*IRON W/ FOLIC ACID***</b>			
<b>PROFERRIN-FORTE ORAL TABLET</b>		Non-Preferred	OTC
<b>*IRON***</b>			
<b>ACCRUFER ORAL CAPSULE</b>		Non-Preferred	
<b>BPROTECTED PEDIA IRON ORAL SOLUTION</b>		Preferred	OTC
easy iron oral capsule		Preferred	OTC
<b>EZFE 200 ORAL CAPSULE</b>		Non-Preferred	OTC
<b>FEOSOL NATURAL RELEASE ORAL TABLET</b>		Non-Preferred	OTC
<b>FEOSOL ORAL TABLET</b>		Non-Preferred	OTC; QL
<b>FERAHEME INTRAVENOUS SOLUTION</b>		Non-Preferred	PA; SP; QL
<b>FERATE ORAL TABLET</b>		Preferred	OTC; QL
<b>FERGON ORAL TABLET</b>		Preferred	OTC; QL
<b>FER-IN-SOL ORAL SOLUTION</b>		Non-Preferred	OTC
<b>FEROSUL ORAL TABLET</b>		Preferred	OTC; QL
ferretts chewable iron oral tablet chewable		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>FERRETT'S IPS ORAL CAPSULE</b>		Non-Preferred	OTC
ferretts ips oral solution		Non-Preferred	OTC
ferretts oral tablet		Preferred	OTC
<b>FERREX 150 ORAL CAPSULE</b>		Preferred	OTC
ferric x-150 oral capsule	Ferrex 150	Preferred	OTC
<b>FERRIMIN 150 ORAL TABLET</b>		Non-Preferred	OTC
<b>FERRLECIT INTRAVENOUS SOLUTION</b>		Non-Preferred	PA; SP; QL
<b>FERROCITE ORAL TABLET</b>		Preferred	OTC
ferrotabs oral tablet	Ferate	Preferred	OTC; QL
ferrous fumarate oral tablet 29 mg		Non-Preferred	OTC
ferrous fumarate oral tablet 324 (106 fe) mg, 324 mg	Ferrocite	Preferred	OTC
ferrous gluconate oral tablet 240 (27 fe) mg	Ferate	Preferred	OTC; QL
ferrous gluconate oral tablet 324 (37.5 fe) mg		Preferred	OTC; QL
ferrous gluconate oral tablet 324 (38 fe) mg		Non-Preferred	OTC; QL
ferrous sulfate er oral tablet extended release	Slow Fe	Preferred	OTC
ferrous sulfate oral solution 220 (44 fe) mg/5ml	One Vite Ferrous Sulfate	Preferred	OTC
ferrous sulfate oral solution 300 (60 fe) mg/5ml		Preferred	OTC
ferrous sulfate oral solution 300 mg/6.8ml	One Vite Ferrous Sulfate	Non-Preferred	OTC
ferrous sulfate oral solution 75 (15 fe) mg/ml	BProtected Pedia Iron	Preferred	OTC
ferrous sulfate oral tablet 27 mg		Preferred	OTC
ferrous sulfate oral tablet 325 (65 fe) mg	FeroSul	Preferred	OTC; QL
ferrous sulfate oral tablet delayed release 324 (65 fe) mg		Non-Preferred	OTC; QL
ferrous sulfate oral tablet delayed release 324 mg, 325 (65 fe) mg		Preferred	OTC; QL
ferumoxytol intravenous solution	Feraheme	Preferred	PA; SP; QL
fe-vite iron oral solution	BProtected Pedia Iron	Preferred	OTC
<b>HEMATEX IRON COMPLEX ORAL TABLET</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>HEMATEX ORAL LIQUID</b>		Non-Preferred	OTC
high potency iron oral capsule		Non-Preferred	OTC
high potency iron oral tablet		Non-Preferred	OTC
<b>ICAR ORAL SUSPENSION</b>		Non-Preferred	OTC; QL
<b>IFEREX 150 ORAL CAPSULE</b>		Preferred	OTC
<b>INFED INJECTION SOLUTION</b>		Preferred	PA; SP
<b>INJECTAFER INTRAVENOUS SOLUTION</b>		Non-Preferred	PA; SP; QL
iron (ferrous sulfate) oral solution	BProtected Pedia Iron	Preferred	OTC
iron (ferrous sulfate) oral tablet	FeroSul	Preferred	OTC; QL
iron 27 oral tablet	Ferate	Preferred	OTC; QL
iron chews pediatric oral tablet chewable		Non-Preferred	OTC
iron glycinate oral capsule		Non-Preferred	OTC
iron high-potency oral tablet	FeroSul	Preferred	OTC; QL
iron high-potency oral tablet extended release	Slow Fe	Preferred	OTC
iron infant & toddler oral solution	BProtected Pedia Iron	Preferred	OTC
iron infant/toddler oral solution	BProtected Pedia Iron	Preferred	OTC
iron oral liquid		Non-Preferred	OTC
iron oral tablet 240 (27 fe) mg	Ferate	Preferred	OTC; QL
iron oral tablet 28 mg		Non-Preferred	OTC
iron oral tablet 325 (65 fe) mg	FeroSul	Preferred	OTC; QL
iron slow release oral tablet extended release	Slow Fe	Preferred	OTC
iron supplement oral solution	One Vite Ferrous Sulfate	Preferred	OTC
<b>IRON UP ORAL LIQUID</b>		Non-Preferred	OTC
<b>MONOFERRIC INTRAVENOUS SOLUTION</b>		Non-Preferred	PA; SP; QL
na ferric gluc cplx in sucrose intravenous solution	Ferrlecit	Preferred	PA; SP; QL
<b>NOVAFERRUM 50 ORAL CAPSULE</b>		Non-Preferred	OTC
<b>NOVAFERRUM ORAL LIQUID</b>		Non-Preferred	OTC
<b>NOVAFERRUM PEDIATRIC DROPS ORAL LIQUID</b>		Non-Preferred	OTC
<b>NU-IRON ORAL CAPSULE</b>		Preferred	OTC
<b>ONE VITE FERROUS SULFATE ORAL SOLUTION</b>		Preferred	OTC



Drug Name	Reference	Status	Notes
<b>POLY-IRON 150 ORAL CAPSULE</b>		Preferred	OTC
polysaccharide iron complex oral capsule	Ferrex 150	Preferred	OTC
polysaccharide-iron complex oral capsule	Ferrex 150	Preferred	OTC
<b>PROFE ORAL CAPSULE</b>		Non-Preferred	OTC
<b>PROFERRIN ES ORAL TABLET</b>		Non-Preferred	OTC
<b>SLOW FE ORAL TABLET EXTENDED RELEASE</b>		Non-Preferred	OTC
slow iron oral tablet extended release		Preferred	OTC
slow release iron oral tablet extended release 45 mg, 50 mg		Preferred	OTC
slow release iron oral tablet extended release 47.5 mg		Non-Preferred	OTC
<b>SPATONE PUR-ABSORB IRON ORAL SOLUTION</b>		Non-Preferred	OTC
<b>VENOFER INTRAVENOUS SOLUTION</b>		Preferred	PA; SP; QL
wee care oral suspension	Icar	Preferred	OTC; QL
<b>*SELECTIN BLOCKERS***</b>			
<b>ADAKVEO INTRAVENOUS SOLUTION</b>		Non-Preferred	PA; SP
<b>*THROMBOPOIETIN (TPO) RECEPTOR AGONISTS***</b>			
<b>ALVAIZ ORAL TABLET 18 MG, 9 MG</b>		Non-Preferred	PA; SP; DO; QL
<b>ALVAIZ ORAL TABLET 36 MG, 54 MG</b>		Non-Preferred	PA; SP; QL
<b>DOPTELET ORAL TABLET</b>		Non-Preferred	PA; SP; QL
<b>MULPLETA ORAL TABLET</b>		Non-Preferred	PA; SP; QL
<b>NPLATE SUBCUTANEOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	PA; SP
<b>PROMACTA ORAL PACKET 12.5 MG</b>		Non-Preferred	PA; SP; DO; QL
<b>PROMACTA ORAL PACKET 25 MG</b>		Non-Preferred	PA; SP; QL
<b>PROMACTA ORAL TABLET 12.5 MG, 25 MG</b>		Non-Preferred	PA; SP; DO; QL
<b>PROMACTA ORAL TABLET 50 MG, 75 MG</b>		Non-Preferred	PA; SP; QL

Drug Name	Reference	Status	Notes
<b>*HEMOSTATICS*</b>			
<b>*HEMOSTATIC COMBINATIONS - TOPICAL***</b>			
ARTISS EXTERNAL KIT		Non-Preferred	
ARTISS EXTERNAL SOLUTION		Non-Preferred	
TISSEEL EXTERNAL KIT		Non-Preferred	
TISSEEL EXTERNAL SOLUTION		Non-Preferred	
<b>*HEMOSTATICS - SYSTEMIC***</b>			
aminocaproic acid intravenous solution		Non-Preferred	
aminocaproic acid oral solution		Non-Preferred	QL
aminocaproic acid oral tablet 1000 mg		Non-Preferred	
aminocaproic acid oral tablet 500 mg		Preferred	QL
<b>CYKLOKAPRON INTRAVENOUS SOLUTION</b>		Non-Preferred	
tranexamic acid intravenous solution	Cyklokapron	Non-Preferred	
tranexamic acid oral tablet		Preferred	QL
tranexamic acid-nacl intravenous solution		Non-Preferred	
<b>*HEMOSTATICS - TOPICAL***</b>			
<b>RECOTHROM EXTERNAL SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>RECOTHROM SPRAY KIT EXTERNAL SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>SURGIFOAM POWDER</b>		Non-Preferred	
<b>THROMBIN-JMI EPISTAXIS EXTERNAL KIT</b>		Non-Preferred	
<b>THROMBIN-JMI EXTERNAL KIT</b>		Non-Preferred	
<b>THROMBIN-JMI EXTERNAL SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>THROMBOGEN EXTERNAL KIT</b>		Non-Preferred	
<b>THROMBOGEN EXTERNAL SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>*HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS*</b>			
<b>*ANTIHISTAMINE HYPNOTIC COMBINATIONS***</b>			
acetaminophen pm ex st oral tablet	Medi-Tabs PM Extra Strength	Preferred	OTC

Drug Name	Reference	Status	Notes
acetaminophen pm oral tablet	Medi-Tabs PM Extra Strength	Preferred	OTC
<b>ADVIL PM ORAL CAPSULE</b>		Non-Preferred	OTC
<b>ADVIL PM ORAL TABLET</b>		Non-Preferred	OTC
<b>ALEVE PM ORAL TABLET</b>		Non-Preferred	OTC
<b>EXCEDRIN PM ORAL TABLET</b>		Non-Preferred	OTC
headache relief pm oral tablet	Excedrin PM	Preferred	OTC
ibuprofen pm oral capsule	Advil PM	Non-Preferred	OTC
ibuprofen pm oral tablet	Motrin PM	Preferred	OTC
<b>MEDI-TABS PM EXTRA STRENGTH ORAL TABLET</b>		Preferred	OTC
<b>MOTRIN PM ORAL TABLET</b>		Preferred	OTC
night time pain medicine ex st oral tablet	Medi-Tabs PM Extra Strength	Preferred	OTC
non-aspirin pm oral tablet	Medi-Tabs PM Extra Strength	Preferred	OTC
pain relief pm extra strength oral tablet	Medi-Tabs PM Extra Strength	Preferred	OTC
pain reliever pm ex st oral tablet	Medi-Tabs PM Extra Strength	Preferred	OTC
pain reliever pm oral liquid		Non-Preferred	OTC
pain reliever pm oral tablet	Medi-Tabs PM Extra Strength	Preferred	OTC
<b>PANADOL PM EXTRA STRENGTH ORAL TABLET</b>		Preferred	OTC
<b>TYLENOL PM EXTRA STRENGTH ORAL TABLET</b>		Non-Preferred	OTC
<b>UNISOM PM PAIN ORAL TABLET</b>		Non-Preferred	OTC
<b>*ANTIHISTAMINE HYPNOTICS***</b>			
diphenhydramine hcl (sleep) oral tablet	Sominex Max St	Preferred	OTC
night time sleep aid oral tablet	Nytol QuickCaps	Preferred	OTC; QL
nighttime sleep aid oral tablet	Nytol QuickCaps	Preferred	OTC; QL
<b>NYTOL QUICKCAPS ORAL TABLET</b>		Preferred	OTC; QL
<b>SIMPLY SLEEP ORAL TABLET</b>		Preferred	OTC; QL
sleep aid (diphenhydramine) oral tablet	Nytol QuickCaps	Preferred	OTC; QL
sleep aid oral liquid	ZzzQuil	Non-Preferred	OTC
sleep aid oral tablet	Unisom SleepTabs	Preferred	OTC
sleep tabs oral tablet	Nytol QuickCaps	Preferred	OTC; QL

Drug Name	Reference	Status	Notes
sleep-aid oral capsule 25 mg	Unisom SleepMinis	Non-Preferred	OTC
sleep-aid oral capsule 50 mg	Unisom Sleepgels	Preferred	OTC
sleep-aid oral tablet	Unisom SleepTabs	Preferred	OTC
sleep-tabs oral tablet	Nytol QuickCaps	Preferred	OTC; QL
<b>SOMINEX MAX ST ORAL TABLET</b>		Preferred	OTC
<b>SOMINEX ORAL TABLET</b>		Preferred	OTC; QL
<b>UNISOM SLEEPGELS ORAL CAPSULE</b>		Non-Preferred	OTC
<b>UNISOM SLEEPMELTS ORAL TABLET DISPERSIBLE</b>		Non-Preferred	OTC
<b>UNISOM SLEEPMINIS ORAL CAPSULE</b>		Non-Preferred	OTC
<b>UNISOM SLEEPTABS ORAL TABLET</b>		Non-Preferred	OTC
<b>ZZZQUIL ORAL CAPSULE</b>		Non-Preferred	OTC
<b>ZZZQUIL ORAL LIQUID</b>		Non-Preferred	OTC
<b>*BARBITURATE HYPNOTICS***</b>			
pentobarbital sodium injection solution		Non-Preferred	
phenobarbital oral elixir		Preferred	QL
phenobarbital oral tablet 100 mg		Preferred	QL
phenobarbital oral tablet 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg		Preferred	DO; QL
phenobarbital sodium injection solution		Non-Preferred	
<b>SEZABY INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>*BENZODIAZEPINE HYPNOTICS***</b>			
<b>BYFAVO INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	
estazolam oral tablet		Preferred	QL
flurazepam hcl oral capsule		Preferred	QL
<b>HALCION ORAL TABLET</b>		Non-Preferred	PA; QL
midazolam hcl (pf) injection solution		Non-Preferred	
midazolam hcl injection solution		Non-Preferred	
midazolam hcl oral syrup		Non-Preferred	QL
midazolam hcl-sodium chloride intravenous solution		Non-Preferred	

Drug Name	Reference	Status	Notes
midazolam-sodium chloride (pf) intravenous solution		Non-Preferred	
midazolam-sodium chloride intravenous solution		Non-Preferred	
quazepam oral tablet		Non-Preferred	PA; QL
<b>RESTORIL ORAL CAPSULE</b>		Non-Preferred	PA; QL
temazepam oral capsule	Restoril	Preferred	QL
triazolam oral tablet	Halcion	Preferred	QL
<b>*HYPNOTICS - TRICYCLIC AGENTS***</b>			
doxepin hcl oral tablet	Silenor	Non-Preferred	PA; QL
<b>SILENOR ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*NON-BENZODIAZEPINE - GABA-RECEPTOR MODULATORS***</b>			
<b>AMBIEN CR ORAL TABLET EXTENDED RELEASE</b>		Non-Preferred	PA; QL
<b>AMBIEN ORAL TABLET</b>		Non-Preferred	PA; QL
<b>EDLUAR SUBLINGUAL TABLET SUBLINGUAL</b>		Non-Preferred	PA; QL
eszopiclone oral tablet	Lunesta	Non-Preferred	PA; QL
<b>LUNESTA ORAL TABLET</b>		Non-Preferred	PA; QL
zaleplon oral capsule		Preferred	QL
zolpidem tartrate er oral tablet extended release	Ambien CR	Non-Preferred	PA; QL
zolpidem tartrate oral capsule		Non-Preferred	PA; QL
zolpidem tartrate oral tablet	Ambien	Preferred	QL
zolpidem tartrate sublingual tablet sublingual		Non-Preferred	PA; QL
<b>*OREXIN RECEPTOR ANTAGONISTS***</b>			
<b>BELSOMRA ORAL TABLET</b>		Non-Preferred	PA; QL
<b>DAYVIGO ORAL TABLET</b>		Non-Preferred	PA; QL
<b>QUVIVIQ ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*SELECTIVE ALPHA2-ADRENORECEPTOR AGONIST SEDATIVES***</b>			
dexmedetomidine hcl in nacl intravenous solution	Precedex	Non-Preferred	

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
dexmedetomidine hcl intravenous solution	Precedex	Non-Preferred	
dexmedetomidine hcl-dextrose intravenous solution		Non-Preferred	
<b>IGALMI SUBLINGUAL FILM</b>		Non-Preferred	PA; QL
<b>PRECEDEX INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>*SELECTIVE MELATONIN RECEPTOR AGONISTS***</b>			
<b>HETLIOZ LQ ORAL SUSPENSION</b>		Non-Preferred	PA; QL
<b>HETLIOZ ORAL CAPSULE</b>		Non-Preferred	PA; QL
tasimelteon oral capsule	Hetlioz	Non-Preferred	PA; QL
<b>*LAXATIVES*</b>			
<b>*BOWEL EVACUANT COMBINATIONS***</b>			
<b>CLENPIQ ORAL SOLUTION</b>		Non-Preferred	QL
<b>GAVILYTE-C ORAL SOLUTION RECONSTITUTED</b>		Preferred	QL
<b>GAVILYTE-G ORAL SOLUTION RECONSTITUTED</b>		Preferred	QL
<b>GAVILYTE-N WITH FLAVOR PACK ORAL SOLUTION RECONSTITUTED</b>		Preferred	QL
<b>GOLYTELY ORAL SOLUTION RECONSTITUTED</b>		Non-Preferred	QL
<b>MOVIPREP ORAL SOLUTION RECONSTITUTED</b>		Non-Preferred	QL
na sulfate-k sulfate-mg sulf oral solution	Suprep Bowel Prep Kit	Non-Preferred	QL
peg 3350-kcl-na bicarb-nacl oral solution reconstituted	GaviLyte-N with Flavor Pack	Preferred	QL
peg-3350/electrolytes oral solution reconstituted	GaviLyte-G	Preferred	QL
peg-3350/electrolytes/ascorbat oral solution reconstituted	MoviPrep	Non-Preferred	QL
peg-kcl-nacl-nasulf-na asc-c oral solution reconstituted	MoviPrep	Non-Preferred	QL
<b>PEG-PREP ORAL KIT</b>		Non-Preferred	QL
<b>PLENVU ORAL SOLUTION RECONSTITUTED</b>		Non-Preferred	QL
<b>SUFLAVE ORAL SOLUTION RECONSTITUTED</b>		Non-Preferred	QL

Drug Name	Reference	Status	Notes
<b>SUPREP BOWEL PREP KIT ORAL SOLUTION</b>		Non-Preferred	QL
<b>SUTAB ORAL TABLET</b>		Non-Preferred	QL
<b>*BULK LAXATIVES***</b>			
advanced fiber complex oral capsule		Non-Preferred	OTC
<b>BANATROL TF ENTERAL LIQUID</b>		Non-Preferred	OTC
<b>BENEFIBER DRINK MIX ORAL PACKET</b>		Non-Preferred	OTC
<b>BENEFIBER FOR CHILDREN ORAL POWDER</b>		Non-Preferred	OTC
<b>BENEFIBER HEALTHY SHAPE ORAL POWDER</b>		Non-Preferred	OTC
<b>BENEFIBER ON THE GO ORAL PACKET</b>		Non-Preferred	OTC
<b>BENEFIBER ON THE GO ORAL POWDER</b>		Preferred	OTC
<b>BENEFIBER ORAL POWDER</b>		Non-Preferred	OTC
<b>BENEFIBER ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
bran oral tablet		Non-Preferred	OTC
<b>CITRUCEL ORAL POWDER</b>		Non-Preferred	OTC
<b>CITRUCEL ORAL TABLET</b>		Non-Preferred	OTC
clear fiber powder oral powder		Preferred	OTC
clear soluble fiber oral powder	Benefiber On The GO	Preferred	OTC
daily fiber oral capsule	Metamucil 3 in 1 Daily Fiber	Preferred	OTC
daily fiber oral packet	Metamucil 4 in 1 Fiber	Non-Preferred	OTC
daily fiber oral powder	Reguloid	Preferred	OTC
<b>EQUALACTIN ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>EVAC ORAL POWDER</b>		Non-Preferred	OTC
fiber (corn dextrin) oral powder		Preferred	OTC
fiber adult gummies oral tablet chewable	Fiber Select Gummies	Preferred	OTC
<b>FIBER CHOICE FRUITY BITES ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>FIBER CHOICE ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>FIBER CHOICE PREBIOTIC FIBER ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>FIBER DIET ORAL TABLET</b>		Non-Preferred	OTC
fiber formula oral capsule		Non-Preferred	OTC
fiber oral powder	Metamucil Smooth Texture	Preferred	OTC
fiber oral tablet	FiberCon	Preferred	OTC; QL
<b>FIBER SELECT GUMMIES ORAL TABLET CHEWABLE</b>		Preferred	OTC
fiber therapy oral tablet	Citrucel	Preferred	OTC
<b>FIBERCEL ORAL PACKET</b>		Non-Preferred	OTC
<b>FIBERCEL ORAL POWDER</b>		Non-Preferred	OTC
<b>FIBERCON ORAL TABLET</b>		Preferred	OTC; QL
<b>FIBEREX F15 ORAL LIQUID</b>		Non-Preferred	OTC
fiber-lax oral tablet	FiberCon	Preferred	OTC; QL
<b>HYDROCIL ORAL PACKET</b>		Non-Preferred	OTC
<b>HYDROCIL ORAL POWDER</b>		Non-Preferred	OTC
<b>HYFIBER WITH FOS ORAL LIQUID</b>		Non-Preferred	OTC
konsyl daily fiber oral packet		Non-Preferred	OTC
<b>KONSYL DAILY PSYLLIUM FIBER ORAL POWDER</b>		Preferred	OTC
<b>METAMUCIL 4 IN 1 FIBER ORAL PACKET</b>		Non-Preferred	OTC
<b>METAMUCIL 4 IN 1 FIBER ORAL POWDER</b>		Non-Preferred	OTC
<b>METAMUCIL FIBER ORAL TABLET CHEWABLE</b>		Preferred	OTC
<b>METAMUCIL FREE &amp; NATURAL ORAL POWDER</b>		Non-Preferred	OTC
<b>METAMUCIL ORAL CAPSULE</b>		Non-Preferred	OTC
<b>METAMUCIL ORAL WAFER</b>		Non-Preferred	OTC
<b>METAMUCIL PREMIUM BLEND ORAL POWDER</b>		Non-Preferred	OTC
<b>METAMUCIL SMOOTH TEXTURE ORAL POWDER</b>		Preferred	OTC
natural fiber laxative oral powder 28.3 %, 58.6 %	Metamucil Smooth Texture	Preferred	OTC
natural fiber laxative oral powder 30.9 %		Non-Preferred	OTC
natural fiber oral powder	Metamucil Smooth Texture	Preferred	OTC



Drug Name	Reference	Status	Notes
<b>NUTRISOURCE FIBER ORAL PACKET</b>		Non-Preferred	OTC
<b>NUTRISOURCE FIBER ORAL POWDER</b>		Non-Preferred	OTC
<b>ONELAX DAILY FIBER ORAL POWDER</b>		Non-Preferred	OTC
<b>ONELAX FIBER THERAPY ORAL POWDER</b>		Preferred	OTC
<b>OPTIFIBER LEAN ORAL CAPSULE</b>		Non-Preferred	OTC
<b>OPTIFIBER LEAN ORAL POWDER</b>		Non-Preferred	OTC
<b>PEDIA-LAX FIBER GUMMIES ORAL TABLET CHEWABLE</b>		Preferred	OTC
<b>PHILLIPS FIBER GOOD ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>PROFIBER ORAL LIQUID</b>		Non-Preferred	OTC
psyllium fiber oral capsule	Reguloid	Preferred	OTC
<b>REGULOID ORAL CAPSULE</b>		Preferred	OTC
<b>REGULOID ORAL POWDER 28.3 %, 43 %, 51.7 %</b>		Preferred	OTC
<b>REGULOID ORAL POWDER 57.6 %</b>		Non-Preferred	OTC
<b>SOLFIBER ORAL POWDER</b>		Non-Preferred	OTC
<b>UNIFIBER ORAL POWDER</b>		Non-Preferred	OTC
<b>YUMVS PREBIOTIC FIBER ORAL TABLET CHEWABLE</b>		Preferred	OTC
<b>YUMVS PREBIOTIC FIBER ZERO ORAL TABLET CHEWABLE</b>		Preferred	OTC
<b>YUMVSKIDS PREBIOTIC FIBER ZERO ORAL TABLET CHEWABLE</b>		Preferred	OTC
<b>*LAXATIVE COMBINATIONS***</b>			
<b>BENEFIBER PLUS B VITS &amp; FA ORAL TABLET</b>		Non-Preferred	OTC
<b>BENEFIBER PLUS CALCIUM ORAL POWDER</b>		Non-Preferred	OTC
<b>BENEFIBER PLUS CALCIUM ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>BENEFIBER PLUS HEART HEALTH ORAL POWDER</b>		Non-Preferred	OTC
fiber/d3 adult gummies oral tablet chewable		Non-Preferred	OTC
<b>METAMUCIL PLUS CALCIUM ORAL CAPSULE</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>PHILLIPS DAILY CARE FIBER GOOD ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>SENOKOT LAXATIVE ORAL</b>		Non-Preferred	OTC
<b>*LAXATIVES - MISCELLANEOUS***</b>			
<b>CLEARLAX ORAL POWDER</b>		Preferred	OTC
constulose oral solution		Preferred	QL
<b>FLEET LIQUID GLYCERIN SUPP RECTAL ENEMA</b>		Non-Preferred	OTC
gavilax oral powder	ClearLax	Preferred	OTC
gentlelax oral powder	ClearLax	Preferred	OTC
glycerin (adult) rectal suppository		Preferred	OTC
glycerin (infants & children) rectal suppository		Preferred	OTC
glycerin (pediatric) rectal suppository		Preferred	OTC
glycerin adult rectal suppository	Avedana Glycerin (Adult)	Preferred	OTC
glycerin childrens rectal suppository		Preferred	OTC
<b>GLYCOLAX ORAL POWDER</b>		Preferred	OTC
<b>HEALTHYLAX ORAL PACKET</b>		Preferred	OTC; QL
<b>KRISTALOSE ORAL PACKET</b>		Non-Preferred	PA; QL
lactulose oral solution		Preferred	QL
<b>MIRALAX MIX-IN PAX ORAL PACKET</b>		Non-Preferred	OTC; QL
<b>MIRALAX ORAL POWDER</b>		Non-Preferred	OTC
<b>PEDIA-LAX RECTAL SUPPOSITORY</b>		Non-Preferred	OTC
peg 3350 oral packet	HealthyLax	Preferred	OTC; QL
peg 3350 oral powder	ClearLax	Preferred	OTC
polyethylene glycol 3350 oral packet	HealthyLax	Preferred	OTC; QL
polyethylene glycol 3350 oral powder	ClearLax	Preferred	
sorbitol oral solution		Non-Preferred	OTC
sorbitol rectal solution		Non-Preferred	OTC
true laxative oral powder	ClearLax	Preferred	OTC
<b>*LAXATIVES &amp; DSS***</b>			
<b>COLACE 2-IN-1 ORAL TABLET</b>		Preferred	OTC
docuzen oral tablet	Colace 2-IN-1	Preferred	OTC
easy-lax plus oral tablet	Colace 2-IN-1	Preferred	OTC

Drug Name	Reference	Status	Notes
laxacin oral tablet	Colace 2-IN-1	Preferred	OTC
medi-laxx oral capsule		Preferred	OTC
medi-natural plus oral tablet	Colace 2-IN-1	Preferred	OTC
senexon-s oral tablet	Colace 2-IN-1	Preferred	OTC
senna plus oral capsule		Preferred	OTC
senna plus oral tablet	Colace 2-IN-1	Preferred	OTC
senna s oral tablet	Colace 2-IN-1	Preferred	OTC
senna-docusate sodium oral tablet	Colace 2-IN-1	Preferred	OTC
senna-plus oral tablet	Colace 2-IN-1	Preferred	OTC
senna-s oral tablet	Colace 2-IN-1	Preferred	OTC
senna-time s oral tablet	Colace 2-IN-1	Preferred	OTC
senosides-docusate sodium oral tablet	Colace 2-IN-1	Preferred	OTC
<b>SENOKOT S ORAL TABLET</b>		Non-Preferred	OTC
stimulant laxative oral tablet	Colace 2-IN-1	Preferred	OTC
stool softener laxative oral tablet	Colace 2-IN-1	Preferred	OTC
stool softener plus laxative oral tablet	Colace 2-IN-1	Preferred	OTC
stool softener/laxative oral capsule		Preferred	OTC
stool softener/laxative oral tablet	Colace 2-IN-1	Preferred	OTC
vegetable lax+stool softener oral tablet	Colace 2-IN-1	Preferred	OTC
<b>*LUBRICANT LAXATIVES***</b>			
enema mineral oil rectal enema	Fleet Oil	Preferred	OTC
<b>FLEET OIL RECTAL ENEMA</b>		Non-Preferred	OTC
mineral oil heavy oral oil	Fleet Laxative Mineral Oil	Non-Preferred	
<b>*SALINE LAXATIVE MIXTURES***</b>			
enema disposable rectal enema	Fleet Enema	Preferred	OTC
enema pediatric rectal enema	Fleet Pediatric	Preferred	OTC
enema rectal enema	Fleet Enema	Preferred	OTC
<b>FLEET ENEMA RECTAL ENEMA</b>		Non-Preferred	OTC
<b>FLEET PEDIATRIC RECTAL ENEMA</b>		Non-Preferred	OTC
<b>FLEET SALINE ENEMA RECTAL ENEMA</b>		Non-Preferred	OTC
<b>*SALINE LAXATIVES***</b>			
citrate of magnesia oral solution	Citroma	Preferred	OTC
<b>CITROMA ORAL SOLUTION</b>		Preferred	OTC

Drug Name	Reference	Status	Notes
<b>DULCOLAX CHEWY FRUIT BITES ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>DULCOLAX SOFT CHEWS KIDS ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>DULCOLAX SOFT CHEWS ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
epsom salt oral granules		Preferred	OTC
gentle laxative oral suspension	Dulcolax	Preferred	OTC
magnesium citrate oral solution	Citroma	Preferred	OTC
milk of magnesia concentrate oral suspension		Non-Preferred	OTC
milk of magnesia oral suspension	Dulcolax	Preferred	OTC
<b>PEDIA-LAX ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>PHILLIPS MILK OF MAGNESIA ORAL SUSPENSION</b>		Non-Preferred	OTC
<b>PHILLIPS MILK OF MAGNESIA ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>PHILLIPS ORAL TABLET</b>		Non-Preferred	OTC
<b>*STIMULANT LAXATIVES***</b>			
bisacodyl ec oral tablet delayed release	Dulcolax	Preferred	QL
bisacodyl laxative rectal suppository	Dulcolax	Preferred	OTC
casacara sagrada oral capsule		Non-Preferred	OTC
casacara sagrada oral tablet		Non-Preferred	OTC
castor oil oral oil		Non-Preferred	OTC
castor oil stimulant laxative oral oil		Non-Preferred	OTC
<b>DULCOLAX ORAL TABLET DELAYED RELEASE</b>		Non-Preferred	OTC; QL
<b>DULCOLAX PINK LAXATIVE ORAL TABLET DELAYED RELEASE</b>		Non-Preferred	OTC; QL
<b>DULCOLAX RECTAL SUPPOSITORY</b>		Non-Preferred	OTC
<b>EX-LAX ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>FLEET BISACODYL RECTAL ENEMA</b>		Non-Preferred	OTC
senna oral capsule		Preferred	OTC
senna oral liquid	OneLAX Senna	Preferred	OTC
senna oral syrup		Non-Preferred	OTC
senna oral tablet	Senokot	Preferred	OTC

Drug Name	Reference	Status	Notes
SENNA SMOOTH ORAL TABLET		Preferred	OTC
SEKOT EXTRA STRENGTH ORAL TABLET		Preferred	OTC
SEKOT LAXATIVE GUMMIES ORAL TABLET CHEWABLE		Non-Preferred	OTC
SEKOT ORAL TABLET		Non-Preferred	OTC
<b>*SURFACTANT LAXATIVES***</b>			
COLACE CLEAR ORAL CAPSULE		Non-Preferred	OTC; QL
COLACE ORAL CAPSULE		Non-Preferred	OTC; QL
docusate calcium oral capsule	Surfak	Preferred	OTC
docusate mini rectal enema	Enemeez Mini	Non-Preferred	OTC
docusate sodium oral capsule 100 mg	DOK	Preferred	OTC; QL
docusate sodium oral capsule 250 mg		Preferred	
docusate sodium oral liquid	OneLAX Docusate Sodium	Preferred	OTC
docusate sodium oral syrup		Non-Preferred	OTC
DOCUSOL KIDS RECTAL ENEMA		Non-Preferred	OTC
DOK ORAL CAPSULE		Preferred	OTC; QL
DOK ORAL TABLET		Preferred	OTC; QL
DULCOLAX PINK STOOL SOFTENER ORAL CAPSULE		Preferred	OTC; QL
DULCOLAX STOOL SOFTENER ORAL CAPSULE		Preferred	OTC; QL
ENEMEEZ KIDS MINI ENEMA RECTAL ENEMA		Non-Preferred	OTC
ENEMEEZ MINI RECTAL ENEMA		Non-Preferred	OTC
ENEMEEZ PLUS RECTAL ENEMA		Non-Preferred	OTC
PEDIA-LAX ORAL LIQUID		Non-Preferred	OTC
PROMOLAXIN ORAL TABLET		Preferred	OTC; QL
stool softener oral capsule	Surfak	Preferred	OTC
<b>*LOCAL ANESTHETICS-PARENTERAL*</b>			
<b>*LOCAL ANESTHETIC &amp; SYMPATHOMIMETIC***</b>			
ARTICADENT DENTAL INJECTION SOLUTION CARTRIDGE		Non-Preferred	
bupivacaine-epinephrine (pf) injection solution	Marcaine/Epinephrine PF	Non-Preferred	

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
bupivacaine-epinephrine injection solution	Marcaine/Epinephrine	Non-Preferred	
lidocaine-epinephrine (pf) injection solution	Xylocaine-MPF/EPINEPHrine	Non-Preferred	
lidocaine-epinephrine injection solution	Xylocaine/EPINEPHrine	Non-Preferred	
<b>MARCAINE/EPINEPHRINE INJECTION SOLUTION</b>		Non-Preferred	
<b>MARCAINE/EPINEPHRINE PF INJECTION SOLUTION</b>		Non-Preferred	
<b>ORABLOC INJECTION SOLUTION CARTRIDGE</b>		Non-Preferred	
<b>SENSORCAINE/EPINEPHRINE INJECTION SOLUTION</b>		Non-Preferred	
<b>SENSORCAINE-MPF/EPINEPHRINE INJECTION SOLUTION</b>		Non-Preferred	
<b>XYLOCAINE/EPINEPHRINE INJECTION SOLUTION</b>		Non-Preferred	
<b>XYLOCAINE-MPF/EPINEPHRINE INJECTION SOLUTION</b>		Non-Preferred	
<b>*LOCAL ANESTHETICS - AMIDES***</b>			
bupivacaine fisiopharma injection solution	Marcaine Preservative Free	Non-Preferred	
bupivacaine hcl (pf) injection solution	Marcaine	Non-Preferred	
bupivacaine hcl injection solution	Marcaine	Non-Preferred	
bupivacaine in dextrose intrathecal solution	Marcaine Spinal	Non-Preferred	
bupivacaine spinal intrathecal solution	Marcaine Spinal	Non-Preferred	
<b>EXPAREL INJECTION SUSPENSION</b>		Non-Preferred	
lidocaine hcl (pf) injection solution	Xylocaine-MPF	Non-Preferred	
lidocaine hcl injection solution	Xylocaine	Non-Preferred	
<b>MARCAINE INJECTION SOLUTION</b>		Non-Preferred	
<b>MARCAINE PRESERVATIVE FREE INJECTION SOLUTION</b>		Non-Preferred	
<b>MARCAINE SPINAL INTRATHECAL SOLUTION</b>		Non-Preferred	
<b>MONOJECT BONE MARROW BIOPSY INJECTION KIT</b>		Non-Preferred	
<b>NAROPIN INJECTION SOLUTION</b>		Non-Preferred	

Drug Name	Reference	Status	Notes
<b>POLOCAINE INJECTION SOLUTION</b>		Non-Preferred	
<b>POLOCAINE-MPF INJECTION SOLUTION</b>		Non-Preferred	
<b>POSIMIR INJECTION SOLUTION</b>		Non-Preferred	
ropivacaine hcl injection solution	Naropin	Non-Preferred	
<b>SENSORCAINE INJECTION SOLUTION</b>		Non-Preferred	
<b>SENSORCAINE-MPF INJECTION SOLUTION</b>		Non-Preferred	
<b>XARACOLL IMPLANT IMPLANT</b>		Non-Preferred	
<b>XYLOCAINE INJECTION SOLUTION</b>		Non-Preferred	
<b>XYLOCAINE-MPF INJECTION SOLUTION</b>		Non-Preferred	
<b>*LOCAL ANESTHETICS - ESTERS***</b>			
chloroprocaine hcl (pf) injection solution	Nesacaine-MPF	Non-Preferred	
<b>CLOROTEKAL INTRATHECAL SOLUTION</b>		Non-Preferred	
<b>NESACAINE INJECTION SOLUTION</b>		Non-Preferred	
<b>NESACAINE-MPF INJECTION SOLUTION</b>		Non-Preferred	
<b>*MACROLIDES*</b>			
<b>*AZITHROMYCIN***</b>			
azithromycin intravenous solution reconstituted	Zithromax	Non-Preferred	
azithromycin oral packet	Zithromax	Preferred	
azithromycin oral suspension reconstituted	Zithromax	Preferred	
azithromycin oral tablet	Zithromax	Preferred	
<b>ZITHROMAX INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>ZITHROMAX ORAL PACKET</b>		Non-Preferred	
<b>ZITHROMAX ORAL SUSPENSION RECONSTITUTED</b>		Non-Preferred	
<b>ZITHROMAX ORAL TABLET</b>		Non-Preferred	
<b>ZITHROMAX TRI-PAK ORAL TABLET</b>		Non-Preferred	
<b>ZITHROMAX Z-PAK ORAL TABLET</b>		Non-Preferred	

Drug Name	Reference	Status	Notes
<b>*CLARITHROMYCIN***</b>			
clarithromycin er oral tablet extended release 24 hour		Preferred	
clarithromycin oral suspension reconstituted		Preferred	
clarithromycin oral tablet		Preferred	
<b>*ERYTHROMYCINS***</b>			
<b>E.E.S. 400 ORAL TABLET</b>		Preferred	
<b>E.E.S. GRANULES ORAL SUSPENSION RECONSTITUTED</b>		Non-Preferred	
<b>ERYPED 200 ORAL SUSPENSION RECONSTITUTED</b>		Non-Preferred	
<b>ERYPED 400 ORAL SUSPENSION RECONSTITUTED</b>		Non-Preferred	
<b>ERY-TAB ORAL TABLET DELAYED RELEASE</b>		Preferred	
<b>ERYTHROCIN LACTOBIONATE INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	
erythromycin base oral capsule delayed release particles		Preferred	
erythromycin base oral tablet		Preferred	
erythromycin base oral tablet delayed release	Ery-Tab	Preferred	
erythromycin ethylsuccinate oral suspension reconstituted	E.E.S. Granules	Non-Preferred	
erythromycin ethylsuccinate oral tablet	E.E.S. 400	Preferred	
erythromycin lactobionate intravenous solution reconstituted	Erythrocin Lactobionate	Non-Preferred	
erythromycin oral tablet delayed release	Ery-Tab	Preferred	
<b>*FIDAXOMICIN***</b>			
<b>DIFICID ORAL SUSPENSION RECONSTITUTED</b>		Non-Preferred	PA; QL
<b>DIFICID ORAL TABLET</b>		Non-Preferred	PA; AL; QL
<b>*MEDICAL DEVICES AND SUPPLIES*</b>			
<b>*APPLICATORS,COTTON BALLS,ETC***</b>			
<b>ADVOCATE ALCOHOL PREP PADS PAD</b>		Non-Preferred	OTC



Drug Name	Reference	Status	Notes
alcohol prep pad	Curity Alcohol Preps	Preferred	OTC
alcohol swabs pad	Curity Alcohol Preps	Preferred	OTC
<b>CARETOUCH ALCOHOL PREP PAD</b>		Non-Preferred	OTC
<b>COMFORT TOUCH ALCOHOL PREP PAD</b>		Non-Preferred	OTC
<b>CURITY ALCOHOL PREPS PAD</b>		Preferred	OTC
<b>DROPSAFE ALCOHOL PREP PAD</b>		Non-Preferred	OTC
easy comfort alcohol pads pad	Curity Alcohol Preps	Non-Preferred	OTC
<b>EASY TOUCH ALCOHOL PREP MEDIUM PAD</b>		Preferred	OTC
<b>FIFTY50 ALCOHOL PREP PAD</b>		Non-Preferred	OTC
h-e-b incontrol alcohol pad	Curity Alcohol Preps	Non-Preferred	OTC
<b>PHARMACIST CHOICE ALCOHOL PAD</b>		Non-Preferred	OTC
pure comfort alcohol prep pad	Curity Alcohol Preps	Non-Preferred	OTC
reality swabs pad	Curity Alcohol Preps	Non-Preferred	OTC
<b>RELION ALCOHOL SWABS PAD</b>		Non-Preferred	OTC
<b>RELION ALCOHOL SWABS PAD 70 %</b>		Preferred	OTC
saps health alcohol prep pad	Curity Alcohol Preps	Non-Preferred	OTC
saps health care alcohol prep pad	Curity Alcohol Preps	Non-Preferred	OTC
true comfort alcohol prep pads pad	Curity Alcohol Preps	Non-Preferred	OTC
true comfort pro alcohol prep pad	Curity Alcohol Preps	Non-Preferred	OTC
<b>ULTICARE ALCOHOL SWABS PAD</b>		Preferred	OTC
ultilet alcohol swabs pad	Curity Alcohol Preps	Non-Preferred	OTC
<b>*CONDOMS - MALE***</b>			
condoms		Preferred	OTC
<b>*DIAPHRAGMS***</b>			
<b>OMNIFLEX DIAPHRAGM VAGINAL DIAPHRAGM</b>		Preferred	
<b>*GLUCOSE MONITOR &amp; BLOOD PRESSURE MONITOR COMBINATIONS***</b>			
<b>ADVOCATE DUO DEVICE</b>		Non-Preferred	PA; OTC
<b>CLEVER CHEK AUTO-CODE DEVICE</b>		Non-Preferred	PA; OTC
<b>DUO-CARE DEVICE</b>		Non-Preferred	PA; OTC
<b>FORA D10 2-IN-1 MONITOR DEVICE</b>		Non-Preferred	PA; OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>FORA D15G 2-IN-1 MONITOR DEVICE</b>		Non-Preferred	PA; OTC
<b>FORA D20 2-IN-1 MONITOR DEVICE</b>		Non-Preferred	PA; OTC
<b>FORA D40 GLUCOSE/PRESSURE DEVICE</b>		Non-Preferred	PA; OTC
<b>FORA D40G GLUCOSE/PRESSURE DEVICE</b>		Non-Preferred	PA; OTC
<b>NEUTEK 2TEK GLUCOSE/PRESSURE DEVICE</b>		Non-Preferred	PA; OTC
<b>*GLUCOSE MONITORING TEST SUPPLIES***</b>			
<b>ACCU-CHEK AVIVA IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>ACCU-CHEK AVIVA PLUS KIT</b>		Non-Preferred	PA; OTC
<b>ACCU-CHEK FASTCLIX LANCET KIT</b>		Non-Preferred	OTC
<b>ACCU-CHEK FASTCLIX LANCETS</b>		Non-Preferred	OTC; QL
<b>ACCU-CHEK GUIDE CONTROL IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>ACCU-CHEK GUIDE KIT</b>		Non-Preferred	PA; OTC
<b>ACCU-CHEK GUIDE ME KIT</b>		Non-Preferred	PA; OTC
<b>ACCU-CHEK SAFE-T PRO LANCETS</b>		Non-Preferred	OTC; QL
<b>ACCU-CHEK SMARTVIEW CONTROL IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>ACCU-CHEK SOFTCLIX LANCET DEV KIT</b>		Non-Preferred	OTC
<b>ACCU-CHEK SOFTCLIX LANCETS</b>		Non-Preferred	OTC; QL
<b>ACCUTREND GLUCOSE CONTROL IN VITRO SOLUTION</b>		Non-Preferred	OTC
acti-lance lite lancets 28g	AgaMatrix Ultra-Thin Lancets	Preferred	OTC; QL
acti-lance special lancets 17g	AgaMatrix Ultra-Thin Lancets	Preferred	OTC; QL
adjustable lancing device	Advocate Lancing Device	Preferred	OTC; QL
<b>ADVANCE INTUITION CONTROL IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>ADVANCE INTUITION METER DEVICE</b>		Non-Preferred	PA; OTC
<b>ADVANCE INTUITION MONITOR KIT</b>		Non-Preferred	PA; OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>ADVANCE MICRO-DRAW CONTROL IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>ADVANCE MICRO-DRAW METER DEVICE</b>		Non-Preferred	PA; OTC
<b>ADVANCE MICRO-DRAW NORMAL IN VITRO LIQUID</b>		Non-Preferred	OTC
advanced mobile lancet	AgaMatrix Ultra-Thin Lancets	Preferred	OTC; QL
<b>ADVOCATE BLOOD GLUCOSE MONITOR DEVICE</b>		Non-Preferred	PA; OTC
<b>ADVOCATE BLOOD GLUCOSE SYSTEM KIT</b>		Non-Preferred	PA; OTC
<b>ADVOCATE CONTROL SOLUTION IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>ADVOCATE LANCETS</b>		Non-Preferred	OTC; QL
<b>ADVOCATE LANCETS 30G</b>		Non-Preferred	OTC; QL
<b>ADVOCATE LANCING DEVICE</b>		Preferred	OTC; QL
<b>ADVOCATE RAPID-SAFE LANCING</b>		Non-Preferred	OTC; QL
<b>ADVOCATE REDI-CODE DEVICE</b>		Non-Preferred	PA; OTC
<b>ADVOCATE REDI-CODE KIT</b>		Non-Preferred	PA; OTC
<b>ADVOCATE REDI-CODE+ CONTROL IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>ADVOCATE REDI-CODE+ DEVICE</b>		Non-Preferred	PA; OTC
<b>ADVOCATE SAFETY LANCETS</b>		Non-Preferred	OTC; QL
<b>ADVOCATE SAFETY LANCETS 26G</b>		Non-Preferred	OTC; QL
<b>AGAMATRIX AMP DEVICE</b>		Non-Preferred	PA; OTC
<b>AGAMATRIX CONTROL IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>AGAMATRIX CONTROL LEVEL 2 IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>AGAMATRIX CONTROL LEVEL 4 IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>AGAMATRIX JAZZ WIRELESS 2 KIT</b>		Non-Preferred	PA; OTC
<b>AGAMATRIX PRESTO KIT</b>		Non-Preferred	PA; OTC
<b>AGAMATRIX PRESTO PRO METER DEVICE</b>		Non-Preferred	PA; OTC
<b>AGAMATRIX ULTRA-THIN LANCETS</b>		Preferred	OTC; QL
aimsco twist lancets 32g	AgaMatrix Ultra-Thin Lancets	Preferred	OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>AIMSCO TWIST LANCETS 33G</b>		Preferred	OTC; QL
<b>ASSURE 3 CONTROL IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>ASSURE 3 METER KIT</b>		Non-Preferred	PA; OTC
<b>ASSURE 4 CONTROL LEVEL 1 &amp; 2 IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>ASSURE 4 METER DEVICE</b>		Non-Preferred	PA; OTC
<b>ASSURE DOSE CONTROL IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>ASSURE DOSE NORM/HIGH CONTROL IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>ASSURE II CONTROL IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>ASSURE II CONTROL LEVEL 1 &amp; 2 IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>ASSURE LANCE LANCETS</b>		Preferred	OTC; QL
<b>ASSURE PLATINUM METER DEVICE</b>		Non-Preferred	PA; OTC
<b>ASSURE PRISM CONTROL LEVEL 1&amp;2 IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>ASSURE PRISM MULTI METER DEVICE</b>		Non-Preferred	PA; OTC
<b>ASSURE PRO BLOOD GLUCOSE METER DEVICE</b>		Non-Preferred	PA; OTC
<b>ASSURE PRO CONTROL LEVEL 1 &amp; 2 IN VITRO LIQUID</b>		Non-Preferred	OTC
aurora lancet super thin 30g	AgaMatrix Ultra-Thin Lancets	Preferred	OTC; QL
<b>AUTO-LANCET</b>		Preferred	OTC; QL
<b>AUTO-LANCET MINI</b>		Preferred	OTC; QL
<b>AUTOLET II CLINISAFE KIT</b>		Preferred	OTC
<b>AUTOLET LANCING DEVICE</b>		Preferred	OTC; QL
<b>AUTOLET LITE CLINISAFE KIT</b>		Preferred	OTC
<b>AUTOLET LITE STARTER PACK KIT</b>		Preferred	OTC
<b>AUTOLET MINI</b>		Preferred	OTC; QL
<b>AUTOLET PLATFORMS</b>		Preferred	OTC; QL
<b>AUTOLET PLUS</b>		Preferred	OTC; QL
<b>BD LATITUDE DIABETES KIT</b>		Non-Preferred	PA; OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>BD LOGIC BLOOD GLUCOSE MONITOR KIT</b>		Non-Preferred	PA; OTC
<b>BD MICROTAINER LANCETS</b>		Non-Preferred	QL
<b>BIOTEL CARE BLOOD GLUCOSE KIT</b>		Non-Preferred	PA; OTC
<b>BIOTEL CARE BLOOD GLUCOSE SYST KIT</b>		Non-Preferred	PA; OTC
blood glucose monitor system kit	ReliOn True Met Air Gluc Meter	Non-Preferred	PA; OTC
blood glucose system pak kit	ReliOn True Met Air Gluc Meter	Non-Preferred	PA; OTC
<b>BLULINK CONTROL HIGH &amp; LOW IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>BLULINK GLUCOSE MONITORING SYS DEVICE</b>		Non-Preferred	PA; OTC
<b>CARDIOCOM LANCING DEVICE</b>		Preferred	OTC; QL
careone advanced lancing dev	Advocate Lancing Device	Preferred	OTC; QL
<b>CAREONE BLOOD GLUCOSE SYSTEM KIT</b>		Non-Preferred	PA; OTC
<b>CAREONE LANCET SUPER THIN 30G</b>		Preferred	OTC; QL
careone lancet thin 23g	AgaMatrix Ultra-Thin Lancets	Preferred	OTC; QL
<b>CARESENS CONTROL A IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>CARESENS CONTROL SOLUTION A/B IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>CARESENS LANCETS</b>		Preferred	OTC; QL
<b>CARESENS N FELIZ BT DEVICE</b>		Non-Preferred	PA; OTC
<b>CARESENS N FELIZ DEVICE</b>		Non-Preferred	PA; OTC
<b>CARESENS N GLUCOSE SYSTEM DEVICE</b>		Non-Preferred	PA; OTC
<b>CARESENS N VOICE SYSTEM DEVICE</b>		Non-Preferred	PA; OTC
<b>CARETOUCH CONTROL SOL LEVEL 2 IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>CARETOUCH LANCING/EJECTOR</b>		Non-Preferred	OTC; QL
<b>CARETOUCH MONITOR SYSTEM KIT</b>		Non-Preferred	PA; OTC
<b>CARETOUCH SAFETY LANCETS</b>		Non-Preferred	OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>CARETOUCH SAFETY LANCETS 26G</b>		Non-Preferred	OTC; QL
<b>CARETOUCH TWIST LANCETS 28G</b>		Non-Preferred	OTC; QL
<b>CARETOUCH TWIST LANCETS 30G</b>		Non-Preferred	OTC; QL
<b>CARETOUCH TWIST LANCETS 33G</b>		Non-Preferred	OTC; QL
<b>CARETOUCH TWIST MC LANCETS 30G</b>		Non-Preferred	OTC; QL
<b>CHOSEN LANCETS 30G</b>		Non-Preferred	OTC; QL
<b>CHOSEN LANCING DEVICE</b>		Non-Preferred	OTC; QL
<b>CHOSEN SAFETY LANCETS 28G</b>		Non-Preferred	OTC; QL
<b>CLEANLET LANCETS 28G</b>		Preferred	OTC; QL
<b>CLEVER CHEK AUTO-CODE SYSTEM DEVICE</b>		Non-Preferred	PA; OTC
<b>CLEVER CHEK AUTO-CODE VOICE DEVICE</b>		Non-Preferred	PA; OTC
<b>CLEVER CHEK LANCETS</b>		Non-Preferred	OTC; QL
<b>CLEVER CHEK SYSTEM KIT</b>		Non-Preferred	PA; OTC
<b>CLEVER CHOICE AUTO-CODE SYSTEM DEVICE</b>		Non-Preferred	PA; OTC
<b>CLEVER CHOICE COMFORT EZ</b>		Non-Preferred	OTC; QL
<b>CLEVER CHOICE GLUCOSE CONTROL IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>CLEVER CHOICE LANCETS 21G</b>		Non-Preferred	OTC; QL
<b>CLEVER CHOICE LANCETS 23G</b>		Non-Preferred	OTC; QL
<b>CLEVER CHOICE LANCETS 28G</b>		Non-Preferred	OTC; QL
<b>CLEVER CHOICE MICRO SYSTEM KIT</b>		Non-Preferred	PA; OTC
<b>CLEVER CHOICE MINI SYSTEM DEVICE</b>		Non-Preferred	PA; OTC
<b>CLEVER CHOICE TALK SYSTEM DEVICE</b>		Non-Preferred	PA; OTC
<b>COAGUCHEK LANCETS</b>		Non-Preferred	OTC; QL
comfort assured lancets 28g	AgaMatrix Ultra-Thin Lancets	Preferred	OTC; QL
comfort assured lancets 33g	AgaMatrix Ultra-Thin Lancets	Preferred	OTC; QL
<b>COMFORT TOUCH LANCETS 31G</b>		Non-Preferred	OTC; QL
<b>COMFORT TOUCH PLUS LANCETS 28G</b>		Non-Preferred	OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>COMFORT TOUCH PLUS LANCETS 30G</b>		Non-Preferred	OTC; QL
<b>COMFORT TOUCH TWIST LANCET 30G</b>		Non-Preferred	OTC; QL
<b>CONTOUR CONTROL IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>CONTOUR MONITOR DEVICE</b>		Non-Preferred	PA; OTC
<b>CONTOUR NEXT CONTROL IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>CONTOUR NEXT EZ KIT</b>		Non-Preferred	PA; OTC
<b>CONTOUR NEXT GEN MONITOR DEVICE</b>		Non-Preferred	PA; OTC
<b>CONTOUR NEXT GEN MONITOR KIT</b>		Non-Preferred	PA; OTC
<b>CONTOUR NEXT LINK KIT</b>		Non-Preferred	PA; OTC
<b>CONTOUR NEXT MONITOR KIT</b>		Non-Preferred	PA; OTC
<b>CONTOUR NEXT ONE DEVICE</b>		Non-Preferred	PA; OTC
<b>CONTOUR NEXT ONE KIT</b>		Non-Preferred	PA; OTC
<b>CONTOUR PLUS BLUE KIT</b>		Non-Preferred	PA; OTC
control in vitro solution	True Metrix Level 2	Non-Preferred	OTC
<b>COOL CONTROL A IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>COOL CONTROL B IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>COOL MONITOR DEVICE</b>		Non-Preferred	PA; OTC
<b>COOL MONITOR KIT KIT</b>		Non-Preferred	PA; OTC
<b>D-CARE GLUCOMETER KIT</b>		Non-Preferred	PA
<b>DEXCOM G6 RECEIVER DEVICE</b>		Preferred	PA; QL
<b>DEXCOM G6 SENSOR</b>		Preferred	PA; QL
<b>DEXCOM G6 TRANSMITTER</b>		Preferred	PA; QL
<b>DEXCOM G7 RECEIVER DEVICE</b>		Preferred	PA; QL
<b>DEXCOM G7 SENSOR</b>		Preferred	PA; QL
<b>DIATHRIVE BLOOD GLUCOSE METER DEVICE</b>		Non-Preferred	PA; OTC
<b>DIATHRIVE GLUCOSE CONTROL SOLN IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>DIATHRIVE LANCETS</b>		Preferred	OTC; QL
<b>DIATHRIVE LANCING DEVICE</b>		Preferred	OTC; QL
<b>DIATHRIVE+ GLUCOSE MONITOR DEVICE</b>		Non-Preferred	PA; OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
diatrue control level 1 in vitro solution	True Metrix Level 1	Non-Preferred	OTC
diatrue control level 2 in vitro solution	True Metrix Level 2	Non-Preferred	OTC
diatrue control level 3 in vitro solution	True Metrix Level 3	Non-Preferred	OTC
diatrue plus blood glucose device	True Metrix Air Glucose Meter	Non-Preferred	PA; OTC
<b>DROPLET GENTEEL LANCING DEVICE</b>		Non-Preferred	OTC; QL
<b>DROPLET LANCETS ULTRA THIN 30G</b>		Preferred	OTC; QL
<b>DROPLET LANCING DEVICE</b>		Preferred	OTC; QL
<b>DROPLET PERSONAL LANCETS 30G</b>		Preferred	OTC; QL
<b>DUO-CARE CONTROL SOLUTION IN VITRO LIQUID</b>		Non-Preferred	OTC
easy comfort lancets	AgaMatrix Ultra-Thin Lancets	Non-Preferred	OTC; QL
easy comfort lancets twist top	AgaMatrix Ultra-Thin Lancets	Non-Preferred	OTC; QL
<b>EASY MAX T1 GLUCOSE SYSTEM KIT</b>		Non-Preferred	PA; OTC
easy mini eject lancing device	Advocate Lancing Device	Non-Preferred	OTC; QL
easy mini lancing device	Advocate Lancing Device	Non-Preferred	OTC; QL
easy plus ii control in vitro solution	True Metrix Level 1	Non-Preferred	OTC
easy plus ii glucose system device	True Metrix Air Glucose Meter	Non-Preferred	PA; OTC
<b>EASY STEP CONTROL IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>EASY STEP GLUCOSE MONITOR DEVICE</b>		Non-Preferred	PA; OTC
easy talk blood glucose system device	True Metrix Air Glucose Meter	Non-Preferred	PA; OTC
easy talk control in vitro solution	True Metrix Level 1	Non-Preferred	OTC
easy talk plus ii control in vitro solution	True Metrix Level 1	Non-Preferred	OTC
<b>EASY TOUCH CONTROL HIGH &amp; LOW IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>EASY TOUCH GLUCOSE SYSTEM KIT</b>		Non-Preferred	PA; OTC
<b>EASY TOUCH HEALTHPRO GLUCOSE KIT</b>		Non-Preferred	PA; OTC



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>EASY TOUCH LANCETS 21G</b>		Preferred	OTC; QL
<b>EASY TOUCH LANCETS 23G</b>		Preferred	OTC; QL
<b>EASY TOUCH LANCETS 26G</b>		Preferred	OTC; QL
<b>EASY TOUCH LANCETS 28G</b>		Preferred	OTC; QL
<b>EASY TOUCH LANCETS 28G/TWIST</b>		Preferred	OTC; QL
<b>EASY TOUCH LANCETS 30G</b>		Preferred	OTC; QL
<b>EASY TOUCH LANCETS 30G/TWIST</b>		Preferred	OTC; QL
<b>EASY TOUCH LANCETS 32G</b>		Preferred	OTC; QL
<b>EASY TOUCH LANCETS 32G/TWIST</b>		Preferred	OTC; QL
<b>EASY TOUCH LANCETS 33G/TWIST</b>		Preferred	OTC; QL
<b>EASY TOUCH LANCING DEVICE</b>		Preferred	OTC; QL
<b>EASY TOUCH SAFETY LANCETS 21G</b>		Preferred	OTC; QL
<b>EASY TOUCH SAFETY LANCETS 23G</b>		Preferred	OTC; QL
<b>EASY TOUCH SAFETY LANCETS 26G</b>		Preferred	OTC; QL
<b>EASY TOUCH SAFETY LANCETS 28G</b>		Preferred	OTC; QL
easy trak blood glucose system device	True Metrix Air Glucose Meter	Non-Preferred	PA; OTC
easy trak control in vitro solution	True Metrix Level 1	Non-Preferred	OTC
easy trak ii blood glucose sys device	True Metrix Air Glucose Meter	Non-Preferred	PA; OTC
easy trak ii control in vitro liquid	True Metrix Level 2	Non-Preferred	OTC
<b>EASYGLUCO KIT</b>		Non-Preferred	PA; OTC
<b>EASYMAX 15 LEVEL 2 CONTROL IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>EASYMAX 15 LEVEL 2-3 CONTROL IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>EASYMAX CONTROL IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>EASYMAX CONTROL NORMAL/HIGH IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>EASYMAX NG BLOOD GLUCOSE DEVICE</b>		Non-Preferred	PA; OTC
<b>EASYMAX NG BLOOD GLUCOSE KIT</b>		Non-Preferred	PA; OTC
<b>EASYMAX V BLOOD GLUCOSE DEVICE</b>		Non-Preferred	PA; OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>EASYPRO BLOOD GLUCOSE MONITOR KIT</b>		Non-Preferred	PA; OTC
<b>EASYPRO PLUS KIT</b>		Non-Preferred	PA; OTC
<b>ELEMENT AUTOCODE SYSTEM KIT</b>		Non-Preferred	PA; OTC
element compact control 2 in vitro solution	Accu-Chek Aviva	Non-Preferred	OTC
element compact control 3 in vitro solution	Accu-Chek Aviva	Non-Preferred	OTC
element compact glucose system device	True Metrix Air Glucose Meter	Non-Preferred	PA; OTC
element compact v glucose sys device	True Metrix Air Glucose Meter	Non-Preferred	PA; OTC
<b>ELEMENT CONTROL IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>ELEMENT PLUS DEVICE</b>		Non-Preferred	PA; OTC
<b>EMBRACE BLOOD GLUCOSE MONITOR DEVICE</b>		Non-Preferred	PA; OTC
<b>EMBRACE CONTROL IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>EMBRACE EVO CONTROL LEVEL 1 IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>EMBRACE EVO GLUCOSE MONITOR DEVICE</b>		Non-Preferred	PA; OTC
<b>EMBRACE EVO GLUCOSE MONITORING KIT</b>		Non-Preferred	PA; OTC
<b>EMBRACE GLUCOSE CONTROL IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>EMBRACE LANCETS ULTRA THIN 30G</b>		Non-Preferred	OTC; QL
embrace lancing device/ejector	Advocate Lancing Device	Non-Preferred	OTC; QL
<b>EMBRACE PRESSURE ACTIVATED 21G</b>		Non-Preferred	OTC; QL
<b>EMBRACE PRESSURE ACTIVATED 28G</b>		Non-Preferred	OTC; QL
<b>EMBRACE PRO GLUCOSE CONTROL IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>EMBRACE PRO GLUCOSE METER DEVICE</b>		Non-Preferred	PA; OTC
<b>EMBRACE TALK BLOOD GLUCOSE DEVICE</b>		Non-Preferred	PA; OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>EMBRACE TALK GLUCOSE CONTROL IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>EMBRACE TALK MONITORING SYSTEM KIT</b>		Non-Preferred	PA; OTC
<b>EMBRACE WAVE BLOOD GLUCOSE DEVICE</b>		Non-Preferred	PA; OTC
<b>EMBRACE WAVE GLUCOSE METER DEVICE</b>		Non-Preferred	PA; OTC
<b>ENLITE GLUCOSE SENSOR</b>		Non-Preferred	PA; QL
<b>EVERSENSE 365 SENSOR/HOLDER</b>		Non-Preferred	PA; QL
<b>EVERSENSE 365 SMART TRANSMIT</b>		Non-Preferred	PA; QL
<b>EVERSENSE E3 SENSOR/HOLDER</b>		Non-Preferred	PA; QL
<b>EVERSENSE E3 SMART TRANSMITTER</b>		Non-Preferred	PA; QL
<b>EVERSENSE SENSOR/HOLDER</b>		Non-Preferred	PA; QL
<b>EVERSENSE SMART TRANSMITTER</b>		Non-Preferred	PA; QL
<b>EVOLUTION AUTOCODE DEVICE</b>		Non-Preferred	PA; OTC
<b>EVOLUTION CONTROL IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>E-Z JECT LANCET MICRO-THIN 33G</b>		Preferred	OTC; QL
<b>E-Z JECT LANCET SUPER THIN 30G</b>		Preferred	OTC; QL
<b>E-Z JECT LANCETS</b>		Preferred	OTC; QL
<b>E-Z JECT LANCETS 21G</b>		Preferred	OTC; QL
<b>EZ-LETS LANCETS 21G</b>		Preferred	OTC; QL
<b>EZ-LETS LANCETS 26G</b>		Preferred	OTC; QL
<b>EZ-LETS LANCETS 28G</b>		Preferred	OTC; QL
<b>EZ-LETS LANCETS 30G</b>		Preferred	OTC; QL
<b>FIFTY50 GLUCOSE METER 2.0 KIT</b>		Non-Preferred	PA; OTC
<b>FINGERSTIX LANCETS</b>		Non-Preferred	OTC; QL
<b>FORA CONTROL IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>FORA G20 BLOOD GLUCOSE SYSTEM KIT</b>		Non-Preferred	PA; OTC
<b>FORA G30A BLOOD GLUCOSE SYSTEM DEVICE</b>		Non-Preferred	PA; OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>FORA GD20 BLOOD GLUCOSE SYSTEM DEVICE</b>		Non-Preferred	PA; OTC
<b>FORA GD50 BLOOD GLUCOSE SYSTEM DEVICE</b>		Non-Preferred	PA; OTC
<b>FORA GTEL BLOOD GLUCOSE SYSTEM DEVICE</b>		Non-Preferred	PA; OTC
<b>FORA LANCING DEVICE</b>		Preferred	OTC; QL
<b>FORA PREMIUM V10 BLE SYSTEM DEVICE</b>		Non-Preferred	PA; OTC
<b>FORA TEST N' GO MONITOR DEVICE</b>		Non-Preferred	PA; OTC
<b>FORA TN'G VOICE KIT</b>		Non-Preferred	PA; OTC
<b>FORA V10 BLOOD GLUCOSE SYSTEM DEVICE</b>		Non-Preferred	PA; OTC
<b>FORA V10/V12/D10/D20 TEST KIT</b>		Non-Preferred	PA; OTC
<b>FORA V12 BLOOD GLUCOSE SYSTEM DEVICE</b>		Non-Preferred	PA; OTC
<b>FORA V20 BLOOD GLUCOSE SYSTEM DEVICE</b>		Non-Preferred	PA; OTC
<b>FORA V30A BLOOD GLUCOSE SYSTEM DEVICE</b>		Non-Preferred	PA; OTC
<b>FORA V30A BLOOD GLUCOSE SYSTEM KIT</b>		Non-Preferred	PA; OTC
<b>FORACARE GD40 MONITOR DEVICE</b>		Non-Preferred	PA; OTC
<b>FORACARE GDH CONTROL IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>FORACARE PREMIUM V10 DEVICE</b>		Non-Preferred	PA; OTC
<b>FORACARE TEST N GO MONITOR DEVICE</b>		Non-Preferred	PA; OTC
<b>FREESTYLE CONTROL SOLUTION IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>FREESTYLE FREEDOM LITE KIT</b>		Non-Preferred	PA; OTC
<b>FREESTYLE LANCETS</b>		Non-Preferred	OTC; QL
<b>FREESTYLE LIBRE 14 DAY READER DEVICE</b>		Preferred	PA; QL
<b>FREESTYLE LIBRE 14 DAY SENSOR</b>		Preferred	PA; QL
<b>FREESTYLE LIBRE 2 READER DEVICE</b>		Preferred	PA; QL
<b>FREESTYLE LIBRE 2 SENSOR</b>		Preferred	PA; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>FREESTYLE LIBRE 3 PLUS SENSOR</b>		Preferred	PA; QL
<b>FREESTYLE LIBRE 3 READER DEVICE</b>		Preferred	PA; QL
<b>FREESTYLE LIBRE 3 SENSOR</b>		Preferred	PA; QL
<b>FREESTYLE LIBRE READER DEVICE</b>		Preferred	PA; QL
<b>FREESTYLE LITE DEVICE</b>		Non-Preferred	PA; OTC
<b>FREESTYLE LITE KIT</b>		Non-Preferred	PA; OTC
<b>FREESTYLE PRECISION NEO SYSTEM KIT</b>		Non-Preferred	PA; OTC
<b>FREESTYLE UNISTICK II LANCETS</b>		Non-Preferred	OTC; QL
ge100 blood glucose system device	True Metrix Air Glucose Meter	Non-Preferred	PA; OTC
ge100 blood glucose system kit	ReliOn True Met Air Gluc Meter	Non-Preferred	PA; OTC
ge100 control in vitro solution	True Metrix Level 2	Non-Preferred	OTC
<b>GENTEEL CONTACT TIPS (BLUE)</b>		Preferred	OTC; QL
<b>GENTEEL CONTACT TIPS (CLEAR)</b>		Preferred	OTC; QL
<b>GENTEEL CONTACT TIPS (GREEN)</b>		Preferred	OTC; QL
<b>GENTEEL CONTACT TIPS (ORANGE)</b>		Preferred	OTC; QL
<b>GENTEEL CONTACT TIPS (RAINBOW)</b>		Preferred	OTC; QL
<b>GENTEEL CONTACT TIPS (VIOLET)</b>		Preferred	OTC; QL
<b>GENTEEL CONTACT TIPS (YELLOW)</b>		Preferred	OTC; QL
<b>GENTEEL LANCING KIT (BLUE) KIT</b>		Preferred	OTC
<b>GENTEEL NOZZLES</b>		Preferred	OTC; QL
<b>GENTEEL PLUS LANCING (BLACK)</b>		Preferred	OTC; QL
<b>GENTEEL PLUS LANCING (PURPLE)</b>		Preferred	OTC; QL
<b>GENTEEL PLUS LANCING (WHITE)</b>		Preferred	OTC; QL
<b>GENTEEL PLUS LANCING DEV(BLUE)</b>		Preferred	OTC; QL
<b>GENTEEL PLUS LANCING DEV(PINK)</b>		Preferred	OTC; QL
ght blood glucose monitor kit	ReliOn True Met Air Gluc Meter	Non-Preferred	PA; OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
global inject ease lancets 28g	AgaMatrix Ultra-Thin Lancets	Non-Preferred	OTC; QL
global inject ease lancets 30g	AgaMatrix Ultra-Thin Lancets	Non-Preferred	OTC; QL
<b>GLUCO PERFECT 3 METER DEVICE</b>		Non-Preferred	PA; OTC
<b>GLUCOCARD 01 BLOOD GLUCOSE DEVICE</b>		Non-Preferred	PA; OTC
<b>GLUCOCARD 01 BLOOD GLUCOSE KIT</b>		Non-Preferred	PA; OTC
<b>GLUCOCARD 01 CONTROL IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>GLUCOCARD 01 CONTROL IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>GLUCOCARD 01-MINI GLUCOSE KIT</b>		Non-Preferred	PA; OTC
<b>GLUCOCARD EXPRESSION CONTROL IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>GLUCOCARD EXPRESSION MONITOR KIT</b>		Non-Preferred	PA; OTC
<b>GLUCOCARD SHINE CONNEX KIT</b>		Non-Preferred	PA; OTC
<b>GLUCOCARD SHINE CONTROL IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>GLUCOCARD SHINE DEVICE</b>		Non-Preferred	PA; OTC
<b>GLUCOCARD SHINE EXPRESS KIT</b>		Non-Preferred	PA; OTC
<b>GLUCOCARD SHINE KIT</b>		Non-Preferred	PA; OTC
<b>GLUCOCARD SHINE XL DEVICE</b>		Non-Preferred	PA; OTC
<b>GLUCOCARD VITAL MONITOR KIT</b>		Non-Preferred	PA; OTC
<b>GLUCOCARD X-METER KIT</b>		Non-Preferred	PA; OTC
<b>GLUCOCARD X-SENSOR CONTROL IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>GLUCOCOM BLOOD GLUCOSE MONITOR DEVICE</b>		Non-Preferred	PA; OTC
<b>GLUCOCOM CONTROL IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>GLUCOCOM LANCETS 28G</b>		Preferred	OTC; QL
<b>GLUCOCOM LANCETS 30G</b>		Preferred	OTC; QL
<b>GLUCOCOM LANCETS 33G</b>		Preferred	OTC; QL
<b>GLUCOCOM MONITOR KIT</b>		Non-Preferred	PA; OTC
<b>GLUCONAVII BLOOD GLUCOSE SYS KIT</b>		Non-Preferred	PA; OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
glucose control in vitro solution	Accu-Chek Aviva	Non-Preferred	OTC
<b>GOJJI CONTROL IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>GOJJI LANCING DEVICE/CLEAR CAP</b>		Non-Preferred	OTC; QL
<b>GOJJI STERILE LANCETS</b>		Non-Preferred	OTC; QL
<b>GUARDIAN 4 GLUCOSE SENSOR</b>		Non-Preferred	PA; QL
<b>GUARDIAN 4 TRANSMITTER</b>		Non-Preferred	PA; QL
<b>GUARDIAN CONNECT TRANSMITTER</b>		Non-Preferred	PA; QL
<b>GUARDIAN LINK 3 TRANSMITTER</b>		Non-Preferred	PA; QL
<b>GUARDIAN REAL-TIME CHARGER</b>		Non-Preferred	PA
<b>GUARDIAN REAL-TIME REPLACE PED DEVICE</b>		Non-Preferred	PA; QL
<b>GUARDIAN REAL-TIME TEST PLUG</b>		Non-Preferred	PA
<b>GUARDIAN SENSOR (3)</b>		Non-Preferred	PA; QL
guardian sensor 3	Dexcom G6 Sensor	Non-Preferred	PA; QL
<b>HAEMOLANCE</b>		Preferred	OTC; QL
<b>HAEMOLANCE PLUS</b>		Preferred	OTC; QL
<b>HEALTHPRO BLOOD GLUCOSE MONITO KIT</b>		Non-Preferred	PA; OTC
<b>HW EMBRACE PRO GLUCOSE METER DEVICE</b>		Non-Preferred	PA; OTC
<b>HW EMBRACE TALK BLOOD GLUCOSE DEVICE</b>		Non-Preferred	PA; OTC
<b>HYPOLANCE AST LANCING KIT</b>		Preferred	OTC
<b>IGLUCOSE MONITORING SYSTEM KIT</b>		Non-Preferred	PA; OTC
<b>IHEALTH CONTROL SOLUTION IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>IHEALTH LANCING DEVICE</b>		Non-Preferred	OTC; QL
<b>IN TOUCH DEVICE</b>		Non-Preferred	PA; OTC
<b>IN TOUCH GLUCOSE CONTROL IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>IN TOUCH LANCING DEVICE</b>		Preferred	OTC; QL
<b>IN TOUCH STERILE LANCETS 30G</b>		Preferred	OTC; QL
<b>INFINITY BLOOD GLUCOSE SYSTEM KIT</b>		Non-Preferred	PA; OTC
<b>INFINITY CONTROL IN VITRO SOLUTION</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>INFINITY VOICE IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>INFINITY VOICE KIT</b>		Non-Preferred	PA; OTC
<b>LANCETS SUPER THIN</b>		Preferred	OTC; QL
<b>LANZO</b>		Preferred	OTC; QL
liberty blood glucose meter device	True Metrix Air Glucose Meter	Non-Preferred	PA; OTC
<b>LIBERTY GLUCOSE CONTROL IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>LIBERTY GLUCOSE CONTROL IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>LIBERTY GLUCOSE CONTROL MID IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>LIBERTY MEDICAL LANCETS</b>		Non-Preferred	OTC; QL
<b>LIBERTY NXT GENERATION MONITOR DEVICE</b>		Non-Preferred	PA; OTC
lite touch lancets	AgaMatrix Ultra-Thin Lancets	Preferred	OTC; QL
<b>LITE TOUCH LANCING PEN</b>		Preferred	OTC; QL
<b>LITETOUCH LANCETS</b>		Preferred	OTC; QL
<b>MEDISENSE GLUCOSE KETONE CONTR IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>MEDISENSE HI/MID/LOW CONTROL IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>MEDLANCE PLUS EXTRA 21G</b>		Preferred	OTC; QL
<b>MEDLANCE PLUS LITE 25G</b>		Preferred	OTC; QL
<b>MEDLANCE PLUS SPECIAL 0.8MM</b>		Preferred	OTC; QL
<b>MEDLANCE PLUS SUPERLITE 30G</b>		Preferred	OTC; QL
<b>MEDLANCE PLUS UNIVERSAL 21G</b>		Preferred	OTC; QL
<b>MICRODOT BLOOD GLUCOSE SYSTEM KIT</b>		Non-Preferred	PA; OTC
<b>MICRODOT CONTROL HIGH/LOW IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>MICROLET LANCETS</b>		Non-Preferred	OTC; QL
<b>MICROLET NEXT LANCING DEVICE</b>		Non-Preferred	OTC; QL
<b>MINILINK REAL-TIME TRANSMITTER</b>		Non-Preferred	PA; QL
<b>MINIMED 630G GUARDIAN PRESS</b>		Non-Preferred	PA; QL
<b>MONOLET LANCETS</b>		Preferred	OTC; QL
<b>MONOLET OPD LANCETS</b>		Preferred	OTC; QL
<b>MONOLETTOR SAFETY LANCETS</b>		Preferred	OTC; QL



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>MYGLUCOHEALTH BLOOD GLUCOSE KIT</b>		Non-Preferred	PA; OTC
<b>MYGLUCOHEALTH CONTROL IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>MYGLUCOHEALTH LANCETS 30G</b>		Preferred	OTC; QL
<b>NEUTEK 2TEK CONTROL IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>NOVA MAX BLOOD GLUCOSE SYSTEM DEVICE</b>		Non-Preferred	PA; OTC
<b>NOVA MAX BLOOD GLUCOSE SYSTEM KIT</b>		Non-Preferred	PA; OTC
<b>NOVA MAX PLUS GLU/KET CONTROL IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>NOVA SAFETY LANCETS 23G</b>		Preferred	OTC; QL
<b>NOVA SAFETY LANCETS 28G</b>		Preferred	OTC; QL
<b>NOVA SUREFLEX LANCETS</b>		Preferred	OTC; QL
<b>NOVA SUREFLEX LANCING DEVICE</b>		Preferred	OTC; QL
<b>ON CALL EXPRESS MONITORING SYS KIT</b>		Non-Preferred	PA; OTC
one drop blood glucose monitor kit	ReliOn True Met Air Gluc Meter	Non-Preferred	PA; OTC
<b>ONETOUCH DELICA PLUS LANCET30G</b>		Non-Preferred	OTC; QL
<b>ONETOUCH DELICA PLUS LANCET33G</b>		Non-Preferred	OTC; QL
<b>ONETOUCH DELICA PLUS LANCING</b>		Non-Preferred	OTC; QL
<b>ONETOUCH DELICA SAFETY LANCING</b>		Non-Preferred	OTC; QL
<b>ONETOUCH ULTRA 2 KIT</b>		Non-Preferred	PA; OTC
<b>ONETOUCH ULTRA CONTROL IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>ONETOUCH ULTRASOFT 2 LANCETS</b>		Non-Preferred	OTC; QL
<b>ONETOUCH VERIO FLEX SYSTEM KIT</b>		Non-Preferred	PA; OTC
<b>ONETOUCH VERIO IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>ONETOUCH VERIO REFLECT KIT</b>		Non-Preferred	PA; OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
oval tape	Guardian REAL-Time Charger	Non-Preferred	PA; OTC
<b>PARADIGM REAL-TIME TRANSMITTER</b>		Non-Preferred	PA; QL
<b>PERFECT POINT SAFETY LANCETS</b>		Non-Preferred	OTC; QL
<b>PHARMACIST CHOICE AUTOCODE SYS KIT</b>		Non-Preferred	PA; OTC
<b>PHARMACIST CHOICE MINI SYSTEM DEVICE</b>		Non-Preferred	PA; OTC
<b>PHARMACY COUNTER LANCETS</b>		Preferred	OTC; QL
<b>PIP BLOOD GLUCOSE MONITORING DEVICE</b>		Non-Preferred	PA; OTC
<b>PIP GLUCOSE CONTROL SOLUTION IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>POCKETCHEM EZ CONTROL IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>POCKETCHEM EZ SYSTEM KIT</b>		Non-Preferred	PA; OTC
<b>POGO AUTOMATIC BLOOD GLUCOSE DEVICE</b>		Non-Preferred	PA; OTC
<b>PRECISION GLUCOSE KETONE CONTR IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>PRECISION XTRA KIT</b>		Non-Preferred	PA; OTC
pro comfort lancets 30g	AgaMatrix Ultra-Thin Lancets	Non-Preferred	OTC; QL
pro comfort lancets 31g	AgaMatrix Ultra-Thin Lancets	Non-Preferred	OTC; QL
pro voice v8 glucose system device	True Metrix Air Glucose Meter	Non-Preferred	PA; OTC
pro voice v9 glucose system device	True Metrix Air Glucose Meter	Non-Preferred	PA; OTC
<b>PRODIGY AUTOCODE BLOOD GLUCOSE DEVICE</b>		Non-Preferred	PA; OTC
<b>PRODIGY AUTOCODE BLOOD GLUCOSE KIT</b>		Non-Preferred	PA; OTC
<b>PRODIGY CONTROL SOLUTION IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>PRODIGY LANCETS 28G</b>		Non-Preferred	OTC; QL
<b>PRODIGY LANCING DEVICE</b>		Non-Preferred	OTC; QL
<b>PRODIGY NO CODING BLOOD GLUC KIT</b>		Non-Preferred	PA; OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>PRODIGY POCKET BLOOD GLUCOSE KIT</b>		Non-Preferred	PA; OTC
<b>PRODIGY SAFETY LANCETS 26G</b>		Non-Preferred	OTC; QL
<b>PRODIGY TWIST TOP LANCETS 28G</b>		Non-Preferred	OTC; QL
<b>PRODIGY VOICE BLOOD GLUCOSE KIT</b>		Non-Preferred	PA; OTC
pure comfort lancets 30g	AgaMatrix Ultra-Thin Lancets	Non-Preferred	OTC; QL
<b>QUICKTEK CONTROL SOLUTION IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>QUICKTEK KIT</b>		Non-Preferred	PA; OTC
<b>QUICKTEK/METER KIT</b>		Non-Preferred	PA; OTC
<b>QUINTET AC BLOOD GLUCOSE DEVICE</b>		Non-Preferred	PA; OTC
<b>QUINTET BLOOD GLUCOSE SYSTEM DEVICE</b>		Non-Preferred	PA; OTC
<b>QUINTET CONTROL HIGH/NORMAL IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>READYLANCE SAFETY LANCETS</b>		Preferred	OTC; QL
<b>REFUAH PLUS GLUCOSE CONTROL IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>REFUAH PLUS MONITORING SYSTEM KIT</b>		Non-Preferred	PA; OTC
<b>RELION ALL-IN-ONE DEVICE</b>		Non-Preferred	PA; OTC
<b>RELION CONFIRM GLUCOSE MONITOR KIT</b>		Non-Preferred	PA; OTC
<b>RELION LANCET DEVICES 30G</b>		Preferred	OTC; QL
<b>RELION LANCETS MICRO-THIN 33G</b>		Preferred	OTC; QL
<b>RELION LANCETS THIN 26G</b>		Preferred	OTC; QL
<b>RELION MICRO KIT</b>		Non-Preferred	PA; OTC
<b>RELION PREMIER BLU MONITOR DEVICE</b>		Non-Preferred	PA; OTC
<b>RELION PREMIER CLASSIC DEVICE</b>		Non-Preferred	PA; OTC
<b>RELION PREMIER COMPACT SYSTEM KIT</b>		Non-Preferred	PA; OTC
<b>RELION PREMIER VOICE MONITOR DEVICE</b>		Non-Preferred	PA; OTC
<b>RELION PRIME MONITOR DEVICE</b>		Non-Preferred	PA; OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>RELION TRUE MET AIR GLUC METER KIT</b>		Preferred	PA; OTC
<b>RELION ULTIMA GLUCOSE SYSTEM KIT</b>		Non-Preferred	PA; OTC
<b>RELION ULTRA THIN LANCETS 30G</b>		Preferred	OTC; QL
<b>RELION ULTRA THIN PLUS LANCETS</b>		Preferred	OTC; QL
<b>REXALL BLOOD GLUCOSE SYSTEM KIT</b>		Non-Preferred	PA; OTC
<b>REXALL LANCETS ULTRA THIN 30G</b>		Preferred	OTC; QL
<b>RIGHTEST ALTERNATE SITE ADAPT</b>		Preferred	OTC; QL
<b>RIGHTEST GC300 CONTROL IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>RIGHTEST GD500 LANCING DEVICE</b>		Preferred	OTC; QL
<b>RIGHTEST GL300 LANCETS</b>		Preferred	OTC; QL
<b>RIGHTEST GM100 BLOOD GLUCOSE KIT</b>		Non-Preferred	PA; OTC
<b>RIGHTEST GM300 BLOOD GLUCOSE KIT</b>		Non-Preferred	PA; OTC
<b>RIGHTEST GM550 BLOOD GLUCOSE KIT</b>		Non-Preferred	PA; OTC
<b>RIGHTEST GT333 BLOOD GLUCOSE DEVICE</b>		Non-Preferred	PA; OTC
safety lancet 30g/pressure act	AgaMatrix Ultra-Thin Lancets	Non-Preferred	OTC; QL
<b>SAFETY LANCETS</b>		Non-Preferred	OTC; QL
<b>SAFETY LANCETS 21G</b>		Preferred	OTC; QL
<b>SAFETY LANCETS 23G</b>		Non-Preferred	OTC; QL
saps health plus lancets	AgaMatrix Ultra-Thin Lancets	Non-Preferred	OTC; QL
<b>SINGLE-LET</b>		Non-Preferred	OTC; QL
<b>SMART DIABETES VANTAGE LANCING</b>		Non-Preferred	OTC; QL
<b>SMART SENSE PREMIUM SYSTEM KIT</b>		Non-Preferred	PA; OTC
<b>SMART SENSE VALUE GLUCOSE SYS KIT</b>		Non-Preferred	PA; OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>SMARTEST CONTROL MEDIUM IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>SMARTEST EJECT DEVICE</b>		Non-Preferred	PA; OTC
<b>SMARTEST EJECT STARTER KIT</b>		Non-Preferred	PA; OTC
<b>SMARTEST PERSONA STARTER KIT</b>		Non-Preferred	PA; OTC
<b>SMARTEST PRONTO STARTER KIT</b>		Non-Preferred	PA; OTC
<b>SMARTEST PROTEGE DEVICE</b>		Non-Preferred	PA; OTC
<b>SMARTEST PROTEGE STARTER KIT</b>		Non-Preferred	PA; OTC
<b>SOLUS V2 BLOOD GLUCOSE SYSTEM DEVICE</b>		Non-Preferred	PA; OTC
<b>SOLUS V2 BLOOD GLUCOSE SYSTEM KIT</b>		Non-Preferred	PA; OTC
<b>SOLUS V2 CONTROL IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>SOLUS V2 LANCETS 28G</b>		Non-Preferred	OTC; QL
<b>SOLUS V2 LANCING DEVICE</b>		Non-Preferred	OTC; QL
<b>SOLUS V2 TWIST LANCETS 30G</b>		Non-Preferred	OTC; QL
supreme ii high/low control in vitro liquid	Accu-Chek Aviva	Non-Preferred	OTC
<b>SURELITE LANCETS</b>		Preferred	OTC; QL
<b>TAI DOC CONTROL IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>TECHLITE AST LANCETS</b>		Preferred	OTC; QL
<b>TECHLITE LANCETS</b>		Preferred	OTC; QL
<b>TECHLITE LANCETS 26G</b>		Non-Preferred	OTC; QL
<b>TEMPO REFILL KIT</b>		Non-Preferred	PA; OTC; QL
<b>TEMPO WELCOME KIT</b>		Non-Preferred	PA
tgt blood glucose monitoring kit	ReliOn True Met Air Gluc Meter	Non-Preferred	PA; OTC
true comfort safety lancets	AgaMatrix Ultra-Thin Lancets	Non-Preferred	OTC; QL
true comfort twist top lancets	AgaMatrix Ultra-Thin Lancets	Non-Preferred	OTC; QL
<b>TRUE FOCUS BLOOD GLUCOSE METER DEVICE</b>		Non-Preferred	PA; OTC
<b>TRUE METRIX AIR GLUCOSE METER DEVICE</b>		Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>TRUE METRIX AIR GLUCOSE METER KIT</b>		Preferred	PA; OTC
<b>TRUE METRIX GO GLUCOSE METER KIT</b>		Preferred	PA; OTC
<b>TRUE METRIX LEVEL 1 IN VITRO SOLUTION</b>		Preferred	OTC
<b>TRUE METRIX LEVEL 2 IN VITRO SOLUTION</b>		Preferred	OTC
<b>TRUE METRIX LEVEL 3 IN VITRO SOLUTION</b>		Preferred	OTC
<b>TRUE METRIX METER DEVICE</b>		Preferred	OTC
<b>TRUE METRIX METER KIT</b>		Preferred	PA; OTC
<b>TRUECONTROL GLUCOSE CONT LEV 0 IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>TRUECONTROL GLUCOSE CONT LEV 1 IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>TRUEDRAW LANCING DEVICE</b>		Preferred	OTC; QL
<b>TRUEPLUS LANCETS 26G</b>		Preferred	OTC; QL
<b>TRUEPLUS LANCETS 28G</b>		Preferred	OTC; QL
<b>TRUEPLUS LANCETS 30G</b>		Preferred	OTC; QL
<b>TRUEPLUS LANCETS 33G</b>		Preferred	OTC; QL
<b>TRUEPLUS SAFETY LANCETS 28G</b>		Preferred	OTC; QL
<b>TRUERESULT BLOOD GLUCOSE KIT</b>		Non-Preferred	PA; OTC
<b>TRUETRACK BLOOD GLUCOSE DEVICE</b>		Non-Preferred	PA; OTC
<b>TRUETRACK BLOOD GLUCOSE KIT</b>		Non-Preferred	PA; OTC
<b>TRUETRACK SMART SYSTEM KIT</b>		Non-Preferred	PA; OTC
<b>ULTI-LANCE AUTOMATIC</b>		Non-Preferred	OTC; QL
<b>ULTILET CLASSIC LANCETS</b>		Non-Preferred	OTC; QL
<b>ULTILET LANCETS</b>		Non-Preferred	OTC; QL
<b>ULTILET SAFETY LANCETS</b>		Non-Preferred	OTC; QL
<b>ULTILET SAFETY LANCETS 23G</b>		Non-Preferred	OTC; QL
ultra thin lancets 31g	AgaMatrix Ultra-Thin Lancets	Non-Preferred	OTC; QL
ultra-care lancets 30g	AgaMatrix Ultra-Thin Lancets	Non-Preferred	OTC; QL
<b>ULTRA-THIN II AUTO LANCET</b>		Preferred	OTC; QL
<b>ULTRA-THIN II LANCETS</b>		Preferred	OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
UNILET COMFORTOUCH LANCET		Preferred	OTC; QL
UNILET EXCELITE		Preferred	OTC; QL
UNILET EXCELITE II		Preferred	OTC; QL
UNILET G.P. LANCET		Preferred	OTC; QL
UNILET G.P. SUPERLITE LANCET		Preferred	OTC; QL
UNILET GP 28 ULTRA THIN		Preferred	OTC; QL
UNILET LANCET		Preferred	OTC; QL
UNILET SUPERLITE LANCET		Preferred	OTC; QL
UNILET SUPER-THIN 30G		Preferred	OTC; QL
UNILET ULTRA-THIN 28G		Preferred	OTC; QL
UNISTIK 1		Preferred	OTC; QL
UNISTIK 2		Preferred	OTC; QL
UNISTIK 2 COMFORT		Preferred	OTC; QL
UNISTIK 2 EXTRA		Preferred	OTC; QL
UNISTIK 2 NEONATAL		Preferred	OTC; QL
UNISTIK 2 NORMAL		Preferred	OTC; QL
UNISTIK 2 SUPER		Preferred	OTC; QL
UNISTIK 3		Preferred	OTC; QL
UNISTIK 3 COMFORT		Preferred	OTC; QL
UNISTIK 3 EXTRA		Preferred	OTC; QL
UNISTIK 3 GENTLE		Preferred	OTC; QL
UNISTIK 3 NEONATAL		Preferred	OTC; QL
UNISTIK 3 NORMAL		Preferred	OTC; QL
UNISTIK CZT COMFORT		Preferred	OTC; QL
UNISTIK CZT NORMAL		Preferred	OTC; QL
UNISTIK NORMAL		Preferred	OTC; QL
UNISTIK PRO SAFETY LANCET		Preferred	OTC; QL
UNISTIK SAFETY LANCETS 28G		Preferred	OTC; QL
UNISTIK SAFETY LANCETS 30G		Preferred	OTC; QL
UNISTIK TOUCH SAFETY LANC 21G		Preferred	OTC; QL
UNISTIK TOUCH SAFETY LANC 23G		Preferred	OTC; QL
UNISTIK TOUCH SAFETY LANC 28G		Preferred	OTC; QL
UNISTIK TOUCH SAFETY LANC 30G		Preferred	OTC; QL

Drug Name	Reference	Status	Notes
<b>UNISTRIP CONTROL IN VITRO SOLUTION</b>		Non-Preferred	OTC
<b>UNIVERSAL 1 LANCETS THIN 26G</b>		Preferred	OTC; QL
<b>UNIVERSAL 1 LANCETS THIN 33G</b>		Preferred	OTC; QL
<b>UNIVERSAL 1 LANCETS ULTRA THIN</b>		Preferred	OTC; QL
verasens blood glucose meter device	True Metrix Air Glucose Meter	Non-Preferred	PA; OTC
verasens blood glucose system kit	ReliOn True Met Air Gluc Meter	Non-Preferred	PA; OTC
verasens glucose control in vitro liquid	Accu-Chek Aviva	Non-Preferred	OTC
<b>VERIFINE SAFE LANCET MINI 21G</b>		Non-Preferred	OTC; QL
<b>VERIFINE SAFE LANCET MINI 23G</b>		Non-Preferred	OTC; QL
<b>VERIFINE SAFE LANCET MINI 28G</b>		Non-Preferred	OTC; QL
<b>VERIFINE SAFE LANCET MINI 30G</b>		Non-Preferred	OTC; QL
<b>VERIFINE UNIVERSAL LANCETS 28G</b>		Non-Preferred	OTC; QL
<b>VERIFINE UNIVERSAL LANCETS 33G</b>		Non-Preferred	OTC; QL
<b>VIVAGUARD INO CONTROL SOLUTION IN VITRO LIQUID</b>		Non-Preferred	OTC
<b>VIVAGUARD INO GLUCOSE METER DEVICE</b>		Non-Preferred	PA; OTC
<b>VIVAGUARD INO GLUCOSE METER KIT</b>		Non-Preferred	PA; OTC
<b>VIVAGUARD INO SMART GLUC METER DEVICE</b>		Non-Preferred	PA; OTC
<b>VIVAGUARD LANCETS</b>		Preferred	OTC; QL
<b>VIVAGUARD LANCETS 30G</b>		Preferred	OTC; QL
<b>VIVAGUARD LANCING DEVICE</b>		Preferred	OTC; QL
<b>WAVESENSE AMP KIT</b>		Non-Preferred	PA; OTC
<b>*HUMIDIFIERS***</b>			
charcoal filter	Kaz Aromatic Inhalant	Non-Preferred	OTC
humidifier filter replacement	Kaz Aromatic Inhalant	Non-Preferred	OTC
<b>KAZ AROMATIC INHALANT PAD</b>		Non-Preferred	OTC
<b>KAZ DEMINERALIZATION CARTRIDGE</b>		Non-Preferred	OTC
<b>KAZ DYNAFILTER K14-3P</b>		Non-Preferred	OTC
<b>KAZ DYNAFILTER K14-S</b>		Non-Preferred	OTC
kaz wicking filter wf1	Kaz Aromatic Inhalant	Non-Preferred	OTC



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
natural mist wicking filter	Kaz Aromatic Inhalant	Non-Preferred	OTC
ultrasonic filter	Kaz Aromatic Inhalant	Non-Preferred	OTC
<b>VICKS HEALTHCHECK MONITOR</b>		Non-Preferred	OTC
<b>WICKING FILTER</b>		Non-Preferred	OTC
<b>*INCONTINENCE SUPPLIES***</b>			
<b>BARD TWO-SIDED ADHESIVE STRIP</b>		Non-Preferred	OTC
<b>*INSULIN ADMINISTRATION SUPPLIES***</b>			
<b>MINIMED 780G INSULIN PUMP KIT</b>		Non-Preferred	
<b>OMNIPOD 5 DEXG7G6 INTRO GEN 5 KIT</b>		Preferred	PA; QL
<b>OMNIPOD 5 DEXG7G6 PODS GEN 5</b>		Preferred	PA; QL
<b>OMNIPOD 5 LIBRE2 PLUS G6 KIT</b>		Preferred	PA; QL
<b>OMNIPOD 5 LIBRE2 PLUS G6 PODS</b>		Preferred	PA; QL
<b>OMNIPOD CLASSIC PODS (GEN 3)</b>		Preferred	PA; QL
<b>OMNIPOD DASH INTRO (GEN 4) KIT</b>		Preferred	PA; QL
<b>OMNIPOD DASH PDM (GEN 4) KIT</b>		Preferred	PA; QL
<b>OMNIPOD DASH PODS (GEN 4)</b>		Preferred	PA; QL
<b>OMNIPOD GO KIT</b>		Non-Preferred	PA
<b>OMNIPOD POD PALS</b>		Preferred	OTC
<b>*NEEDLES &amp; SYRINGES***</b>			
1st tier unifine pentips	Advocate Insulin Pen Needles	Non-Preferred	PA; OTC; QL
1st tier unifine pentips plus	Advocate Insulin Pen Needles	Non-Preferred	PA; OTC; QL
<b>ADVOCATE INSULIN PEN NEEDLE</b>		Non-Preferred	PA; OTC; QL
<b>ADVOCATE INSULIN PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
<b>ADVOCATE INSULIN SYRINGE</b>		Non-Preferred	PA; OTC; QL
aqinject pen needle	BD Pen Needle Mini U/F	Non-Preferred	PA; QL
<b>ASSURE ID DUO PRO PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
<b>ASSURE ID PRO PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
<b>ASSURE ID SAFETY PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
aurora pen needles	BD Pen Needle Short U/F	Non-Preferred	PA; OTC; QL
<b>BD AUTOSHIELD DUO</b>		Preferred	OTC; QL

Drug Name	Reference	Status	Notes
<b>BD ECLIPSE SYRINGE</b>		Non-Preferred	OTC; QL
<b>BD INSULIN SYR ULTRAFINE II</b>		Preferred	OTC; QL
<b>BD INSULIN SYRINGE</b>		Preferred	OTC; QL
<b>BD INSULIN SYRINGE HALF-UNIT</b>		Preferred	OTC; QL
<b>BD INSULIN SYRINGE MICROFINE</b>		Preferred	OTC; QL
<b>BD INSULIN SYRINGE U/F</b>		Preferred	OTC; QL
<b>BD INSULIN SYRINGE U/F 1/2UNIT</b>		Preferred	OTC; QL
<b>BD INSULIN SYRINGE ULTRAFINE</b>		Preferred	OTC; QL
<b>BD PEN NEEDLE MICRO U/F</b>		Preferred	OTC; QL
<b>BD PEN NEEDLE MINI U/F</b>		Preferred	OTC; QL
<b>BD PEN NEEDLE NANO 2ND GEN</b>		Preferred	OTC; QL
<b>BD PEN NEEDLE NANO U/F</b>		Preferred	QL
<b>BD PEN NEEDLE ORIGINAL U/F</b>		Preferred	OTC; QL
<b>BD PEN NEEDLE SHORT U/F</b>		Preferred	OTC; QL
<b>BD PRECISIONGLIDE NEEDLE</b>		Non-Preferred	OTC
<b>BD SAFETYGLIDE INSULIN SYRINGE 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 30G X 5/16" 0.5 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML, 31G X 5/16" 0.3 ML</b>		Preferred	OTC; QL
<b>BD SAFETYGLIDE INSULIN SYRINGE 31G X 15/64" 0.3 ML</b>		Preferred	QL
<b>BD SAFETYGLIDE SYRINGE/NEEDLE</b>		Non-Preferred	OTC; QL
<b>BD VEO INSULIN SYR U/F 1/2UNIT</b>		Preferred	OTC; QL
<b>BD VEO INSULIN SYRINGE U/F</b>		Preferred	QL
<b>CAREFINE PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
careone insulin syringe	BD Insulin Syr Ultrafine II	Non-Preferred	PA; OTC; QL
careone unifine pentips plus	Advocate Insulin Pen Needles	Non-Preferred	PA; OTC; QL
<b>CARETOUCH INSULIN SYRINGE</b>		Non-Preferred	PA; OTC; QL
<b>CARETOUCH PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
<b>CLEVER CHOICE COMFORT EZ</b>		Non-Preferred	PA; OTC; QL
<b>CLICKFINE PEN NEEDLES 31G X 5 MM , 31G X 6 MM , 32G X 4 MM</b>		Non-Preferred	PA; OTC; QL
clickfine pen needles 31g x 8 mm	BD Pen Needle Short U/F	Non-Preferred	PA; OTC; QL
<b>COMFORT ASSIST INSULIN SYRINGE</b>		Non-Preferred	PA; OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>COMFORT EZ INSULIN SYRINGE</b>		Non-Preferred	PA; OTC; QL
<b>COMFORT EZ MICRO PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
<b>COMFORT EZ PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
<b>COMFORT EZ PRO PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
<b>COMFORT EZ SHORT PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
<b>COMFORT TOUCH INSULIN PEN NEED</b>		Non-Preferred	PA; OTC; QL
<b>DIATHRIVE PEN NEEDLE</b>		Non-Preferred	PA; OTC; QL
<b>DROPLET INSULIN SYRINGE</b>		Non-Preferred	PA; OTC; QL
<b>DROPLET PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
dropsafe safety pen needles	BD Pen Needle Mini U/F	Non-Preferred	PA; OTC; QL
<b>DROPSAFE SAFETY SYRINGE/NEEDLE</b>		Non-Preferred	PA; QL
easy comfort insulin syringe	Advocate Insulin Syringe	Non-Preferred	PA; OTC; QL
easy comfort pen needles	Advocate Insulin Pen Needles	Non-Preferred	PA; OTC; QL
easy glide pen needles	Advocate Insulin Pen Needles	Non-Preferred	PA; OTC; QL
<b>EASY TOUCH FLIPLOCK INSULIN SY</b>		Non-Preferred	PA; OTC; QL
<b>EASY TOUCH INSULIN SAFETY SYR</b>		Non-Preferred	PA; OTC; QL
<b>EASY TOUCH INSULIN SYRINGE</b>		Non-Preferred	PA; OTC; QL
<b>EASY TOUCH PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
<b>EASY TOUCH SAFETY PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
<b>EASY TOUCH SHEATHLOCK SYRINGE</b>		Non-Preferred	PA; OTC; QL
<b>EMBRACE PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
<b>FIFTY50 PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
<b>FIFTY50 SUPERIOR COMFORT SYR</b>		Non-Preferred	PA; OTC; QL
global ease inject pen needles	BD Pen Needle Mini U/F	Non-Preferred	PA; OTC; QL
global easy glide insulin syr	BD Insulin Syr Ultrafine II	Non-Preferred	PA; OTC; QL
global easy glide pen needles	BD Pen Needle Nano 2nd Gen	Non-Preferred	PA; OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
global inject ease insulin syr	Advocate Insulin Syringe	Non-Preferred	PA; OTC; QL
global insulin syringes	Advocate Insulin Syringe	Non-Preferred	PA; OTC; QL
<b>GLUCOPRO INSULIN SYRINGE</b>		Non-Preferred	PA; OTC; QL
h-e-b incontrol pen needles	BD Pen Needle Mini U/F	Non-Preferred	PA; OTC; QL
<b>H-E-B INCONTROL UNIFINE PENTIP</b>		Non-Preferred	PA; OTC; QL
<b>HUMATROPEN FOR 12MG DEVICE</b>		Non-Preferred	OTC
<b>HUMATROPEN FOR 24MG DEVICE</b>		Non-Preferred	OTC
<b>HUMATROPEN FOR 6MG DEVICE</b>		Non-Preferred	OTC
<b>INCONTROL ULTICARE PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
insulin syringe	Advocate Insulin Syringe	Non-Preferred	PA; OTC; QL
insulin syringe-needle u-100 27g x 1/2" 0.5 ml	Easy Touch Insulin Syringe	Non-Preferred	PA; QL
insulin syringe-needle u-100 27g x 1/2" 1 ml, 29g x 1/2" 0.5 ml, 29g x 1/2" 1 ml	BD Insulin Syringe	Non-Preferred	PA; QL
insulin syringe-needle u-100 28g x 1/2" 0.5 ml, 28g x 1/2" 1 ml	BD Insulin Syringe MicroFine	Non-Preferred	PA; QL
insulin syringe-needle u-100 30g x 1/2" 1 ml, 31g x 5/16" 0.5 ml, 31g x 5/16" 1 ml	BD Insulin Syringe U/F	Non-Preferred	PA; QL
insulin syringe-needle u-100 30g x 5/16" 0.3 ml, 30g x 5/16" 1 ml	Advocate Insulin Syringe	Non-Preferred	PA; OTC; QL
insulin syringe-needle u-100 30g x 5/16" 0.5 ml	BD SafetyGlide Insulin Syringe	Non-Preferred	PA; QL
insulin syringe-needle u-100 31g x 1/4" 0.3 ml	UltiCare Insulin Syr 1/2 Unit	Non-Preferred	PA; OTC; QL
insulin syringe-needle u-100 31g x 1/4" 0.5 ml, 31g x 1/4" 1 ml	UltiCare Insulin Syringe	Non-Preferred	PA; OTC; QL
insulin syringe-needle u-100 31g x 5/16" 0.3 ml	BD Insulin Syr Ultrafine II	Non-Preferred	PA; OTC; QL
insupen pen needles	BD Pen Needle Mini U/F	Non-Preferred	PA; OTC; QL
<b>LITETOUCH INSULIN SYRINGE</b>		Non-Preferred	PA; OTC; QL
<b>LITETOUCH PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
longs insulin syringe	BD Insulin Syringe U/F	Non-Preferred	PA; OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>MAGELLAN INSULIN SAFETY SYR</b>		Non-Preferred	PA; QL
<b>MARATHON MEDICAL PENTIPS</b>		Non-Preferred	PA; QL
<b>MAXICOMFORT II PEN NEEDLE</b>		Non-Preferred	PA; OTC; QL
<b>MAXI-COMFORT INSULIN SYRINGE</b>		Non-Preferred	PA; OTC; QL
<b>MAXI-COMFORT SAFETY PEN NEEDLE</b>		Non-Preferred	PA; OTC; QL
<b>MAXICOMFORT SYR 27G X 1/2"</b>		Non-Preferred	PA; OTC; QL
medic insulin syringe	Advocate Insulin Syringe	Non-Preferred	PA; OTC; QL
<b>MICRODOT PEN NEEDLE</b>		Non-Preferred	PA; OTC; QL
<b>MONOJECT INSULIN SYRINGE 25G X 5/8" 1 ML, 31G X 5/16" 1 ML</b>		Non-Preferred	PA; OTC; QL
<b>MONOJECT INSULIN SYRINGE 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, 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, U-100 1 ML</b>		Non-Preferred	PA; QL
<b>MONOJECT ULTRA COMFORT SYRINGE 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML</b>		Non-Preferred	PA; QL
<b>MONOJECT ULTRA COMFORT SYRINGE 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML</b>		Non-Preferred	PA; OTC; QL
<b>NOVOFINE PEN NEEDLE</b>		Non-Preferred	PA; OTC; QL
<b>NOVOFINE PLUS PEN NEEDLE</b>		Non-Preferred	PA; OTC; QL
pen needles 29g x 12mm , 31g x 6 mm , 32g x 5 mm	CareFine Pen Needles	Non-Preferred	PA; OTC; QL
pen needles 30g x 5 mm	BD AutoShield Duo	Non-Preferred	PA; QL
pen needles 30g x 8 mm	Assure ID Safety Pen Needles	Non-Preferred	PA; OTC; QL
pen needles 31g x 5 mm	BD Pen Needle Mini U/F	Non-Preferred	PA; QL
pen needles 31g x 8 mm	BD Pen Needle Short U/F	Non-Preferred	PA; QL
pen needles 32g x 4 mm	BD Pen Needle Nano 2nd Gen	Non-Preferred	PA; QL
pen needles 32g x 6 mm	BD Pen Needle Micro U/F	Non-Preferred	PA; OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
pen needles 33g x 4 mm	Advocate Insulin Pen Needles	Non-Preferred	PA; OTC; QL
pen needles 5/16"	BD Pen Needle Short U/F	Non-Preferred	PA; OTC; QL
<b>PENTIPS 29G X 12MM , 31G X 5 MM , 31G X 8 MM , 32G X 4 MM</b>		Non-Preferred	PA; QL
<b>PENTIPS 31G X 6 MM , 32G X 6 MM</b>		Non-Preferred	PA; OTC; QL
<b>PENTIPS GENERIC PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
<b>PRECISION SURE-DOSE SYRINGE</b>		Non-Preferred	PA; OTC; QL
preferred plus insulin syringe	Advocate Insulin Syringe	Non-Preferred	PA; OTC; QL
preferred plus unifine pentips	CareFine Pen Needles	Non-Preferred	PA; OTC; QL
<b>PREVENT DROPSAFE PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
<b>PREVENT SAFETY PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
<b>PRO COMFORT INSULIN SYRINGE</b>		Non-Preferred	PA; OTC; QL
pro comfort pen needles 32g x 4 mm	BD Pen Needle Nano 2nd Gen	Non-Preferred	PA; QL
pro comfort pen needles 32g x 5 mm	CareFine Pen Needles	Non-Preferred	PA; QL
pro comfort pen needles 32g x 6 mm	BD Pen Needle Micro U/F	Non-Preferred	PA; OTC; QL
<b>PRODIGY INSULIN SYRINGE</b>		Non-Preferred	PA; OTC; QL
pure comfort pen needle	BD Pen Needle Micro U/F	Non-Preferred	PA; OTC; QL
pure comfort safety pen needle	BD Pen Needle Mini U/F	Non-Preferred	PA; OTC; QL
raya sure pen needle	BD Pen Needle Mini U/F	Non-Preferred	PA; OTC; QL
reality insulin syringe	BD Insulin Syringe	Non-Preferred	PA; OTC; QL
<b>RELION INSULIN SYRINGE</b>		Non-Preferred	PA; OTC; QL
<b>RELION MINI PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
<b>RELION PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
<b>RELION SHORT PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
safety pen needles	Assure ID Safety Pen Needles	Non-Preferred	PA; OTC; QL
<b>SECURES SAFE INSULIN SYRINGE</b>		Non-Preferred	PA; OTC; QL
<b>SECURES SAFE SAFETY PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
sure comfort insulin syringe	Advocate Insulin Syringe	Non-Preferred	PA; OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
sure comfort pen needles 29g x 12.7mm	BD Pen Needle Original U/F	Non-Preferred	PA; OTC; QL
sure comfort pen needles 30g x 8 mm	Assure ID Safety Pen Needles	Non-Preferred	PA; OTC; QL
sure comfort pen needles 31g x 5 mm	BD Pen Needle Mini U/F	Non-Preferred	PA; OTC; QL
sure comfort pen needles 31g x 6 mm	CareFine Pen Needles	Non-Preferred	PA; QL
sure comfort pen needles 31g x 8 mm	BD Pen Needle Short U/F	Non-Preferred	PA; OTC; QL
sure comfort pen needles 32g x 4 mm	BD Pen Needle Nano 2nd Gen	Non-Preferred	PA; QL
sure comfort pen needles 32g x 6 mm	BD Pen Needle Micro U/F	Non-Preferred	PA; OTC; QL
techlite insulin syringe	BD Insulin Syr Ultrafine II	Non-Preferred	PA; OTC; QL
<b>TECHLITE PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
<b>TECHLITE PLUS PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
today's health pen needles	CareFine Pen Needles	Non-Preferred	PA; OTC; QL
today's health short pen needle	BD Pen Needle Short U/F	Non-Preferred	PA; OTC; QL
topcare clickfine pen needles	BD Pen Needle Short U/F	Non-Preferred	PA; OTC; QL
topcare ultra comfort ins syr	Advocate Insulin Syringe	Non-Preferred	PA; OTC; QL
true comfort insulin syringe	Advocate Insulin Syringe	Non-Preferred	PA; OTC; QL
true comfort pen needles	BD Pen Needle Mini U/F	Non-Preferred	PA; OTC; QL
true comfort pro insulin syr	Advocate Insulin Syringe	Non-Preferred	PA; OTC; QL
true comfort pro pen needles	Advocate Insulin Pen Needles	Non-Preferred	PA; OTC; QL
<b>TRUEPLUS 5-BEVEL PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
<b>TRUEPLUS INSULIN SYRINGE</b>		Non-Preferred	PA; OTC; QL
<b>TRUEPLUS PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
<b>ULTICARE INSULIN SAFETY SYR</b>		Non-Preferred	PA; QL
<b>ULTICARE INSULIN SYR 1/2 UNIT</b>		Non-Preferred	PA; OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>ULTICARE 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 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 1 ML, 31G X 1/4" 0.3 ML, 31G X 1/4" 0.5 ML, 31G X 1/4" 1 ML, 31G X 5/16" 1 ML</b>		Non-Preferred	PA; OTC; QL
<b>ULTICARE INSULIN SYRINGE 30G X 5/16" 0.5 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML</b>		Non-Preferred	PA; QL
<b>ULTICARE MICRO PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
<b>ULTICARE MINI PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
<b>ULTICARE PEN NEEDLES 29G X 12.7MM</b>		Non-Preferred	PA; QL
<b>ULTICARE PEN NEEDLES 31G X 5 MM</b>		Non-Preferred	PA; OTC; QL
<b>ULTICARE SHORT PEN NEEDLES 30G X 8 MM</b>		Non-Preferred	PA; OTC; QL
<b>ULTICARE SHORT PEN NEEDLES 31G X 8 MM</b>		Non-Preferred	PA; QL
<b>ULTIGUARD SAFEPAK PEN NEEDLE</b>		Non-Preferred	PA; OTC; QL
<b>ULTIGUARD SAFEPAK SYR/NEEDLE</b>		Non-Preferred	PA; OTC; QL
<b>ULTILET PEN NEEDLE</b>		Non-Preferred	PA; OTC; QL
ultra comfort insulin syringe	Advocate Insulin Syringe	Non-Preferred	PA; OTC; QL
<b>ULTRA FLO INSULIN PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
<b>ULTRA FLO INSULIN SYR 1/2 UNIT</b>		Non-Preferred	PA; OTC; QL
<b>ULTRA FLO INSULIN SYRINGE</b>		Non-Preferred	PA; OTC; QL
<b>ULTRA THIN PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
ultracare insulin syringe	Advocate Insulin Syringe	Non-Preferred	PA; OTC; QL
ultracare pen needles	Advocate Insulin Pen Needles	Non-Preferred	PA; OTC; QL
<b>ULTRA-THIN II INS SYR SHORT</b>		Non-Preferred	PA; OTC; QL
<b>ULTRA-THIN II INSULIN SYRINGE</b>		Non-Preferred	PA; OTC; QL
<b>ULTRA-THIN II MINI PEN NEEDLE</b>		Non-Preferred	PA; OTC; QL



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>ULTRA-THIN II PEN NEEDLE SHORT</b>		Non-Preferred	PA; OTC; QL
<b>ULTRA-THIN II PEN NEEDLES</b>		Non-Preferred	PA; OTC; QL
<b>UNIFINE PENTIPS</b>		Non-Preferred	PA; OTC; QL
<b>UNIFINE PENTIPS PLUS</b>		Non-Preferred	PA; OTC; QL
<b>UNIFINE PROTECT PEN NEEDLE</b>		Non-Preferred	PA; OTC; QL
<b>UNIFINE SAFECONTROL PEN NEEDLE</b>		Non-Preferred	PA; OTC; QL
<b>UNIFINE ULTRA PEN NEEDLE</b>		Non-Preferred	PA; OTC; QL
<b>VANISHPOINT INSULIN SYRINGE</b>		Non-Preferred	PA; OTC; QL
<b>VERIFINE INSULIN PEN NEEDLE</b>		Non-Preferred	PA; OTC; QL
<b>VERIFINE INSULIN SYRINGE</b>		Non-Preferred	PA; OTC; QL
<b>VERIFINE PLUS PEN NEEDLE</b>		Non-Preferred	PA; OTC; QL
<b>*PEAK FLOW METERS***</b>			
<b>AEROGEAR ACTION ASTHMA KIT KIT</b>		Non-Preferred	
<b>AIRZONE PEAK FLOW METER DEVICE</b>		Preferred	OTC
<b>ASSESS PEAK FLOW METER DEVICE</b>		Non-Preferred	OTC
breathe ease peak flow meter device	Airzone Peak Flow Meter	Non-Preferred	OTC
<b>CLEVER CHOICE PEAK FLOW METER DEVICE</b>		Non-Preferred	OTC
lung perform peak flow meter device	Airzone Peak Flow Meter	Preferred	OTC
<b>MICROLIFE DIGITAL PEAK FLOW DEVICE</b>		Non-Preferred	OTC
<b>MINI WRIGHT PEAK FLOW METER DEVICE</b>		Preferred	OTC
peak a-i-r flow meter device	Airzone Peak Flow Meter	Preferred	OTC
<b>PEAK AIR PEAK FLOW METER DEVICE</b>		Preferred	OTC
peak flow meter universal rang device	Airzone Peak Flow Meter	Non-Preferred	OTC
<b>PERSONAL BEST FULL RANGE DEVICE</b>		Non-Preferred	OTC
<b>PIKO 1 DEVICE</b>		Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>POCKET PEAK FLOW METER DEVICE</b>		Preferred	OTC
<b>POCKETPEAK PEAK FLOW METER DEVICE</b>		Non-Preferred	OTC
pure comfort flow meter adult device	Airzone Peak Flow Meter	Non-Preferred	OTC
pure comfort flow meter child device	Airzone Peak Flow Meter	Non-Preferred	OTC
<b>STRIVE DUAL ZONE PEAK FLOW MTR DEVICE</b>		Non-Preferred	
<b>TRUZONE PEAK FLOW METER DEVICE</b>		Non-Preferred	
<b>*RESPIRATORY THERAPY SUPPLIES***</b>			
adult mask device	In-Check Inspiratory Flow Mtr	Non-Preferred	QL
<b>AEROBIKA DEVICE</b>		Non-Preferred	QL
<b>ALL FLOW 1000 PFT FILTER DEVICE</b>		Non-Preferred	QL
<b>ALL FLOW 2000 PFT FILTER DEVICE</b>		Non-Preferred	QL
<b>ALL FLOW 3000 PFT FILTER DEVICE</b>		Non-Preferred	QL
<b>ALL FLOW 4000 PFT FILTER DEVICE</b>		Non-Preferred	QL
<b>ALL FLOW 5000 PFT FILTER DEVICE</b>		Non-Preferred	QL
<b>ALL FLOW 6000 PFT FILTER DEVICE</b>		Non-Preferred	QL
<b>ALL FLOW 7000 PFT FILTER DEVICE</b>		Non-Preferred	QL
co monitor device	In-Check Inspiratory Flow Mtr	Non-Preferred	QL
<b>EASY FLOW BLACK/BLUE DEVICE</b>		Non-Preferred	OTC; QL
<b>EASY FLOW BLACK/ORANGE DEVICE</b>		Non-Preferred	OTC; QL
<b>EASY FLOW BLACK/RED DEVICE</b>		Non-Preferred	OTC; QL
<b>EASY FLOW BLACK/WHITE DEVICE</b>		Non-Preferred	OTC; QL
<b>EASY FLOW BLACK/YELLOW DEVICE</b>		Non-Preferred	OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>EASY FLOW WHITE/BLUE DEVICE</b>		Non-Preferred	OTC; QL
<b>EASY FLOW WHITE/GREEN DEVICE</b>		Non-Preferred	OTC; QL
<b>EASY FLOW WHITE/PINK DEVICE</b>		Non-Preferred	OTC; QL
<b>EASY FLOW WHITE/WHITE DEVICE</b>		Non-Preferred	OTC; QL
<b>EASY FLOW WHITE/YELLOW DEVICE</b>		Non-Preferred	OTC; QL
<b>IN-CHECK DIAL FLOW TRAINER DEVICE</b>		Non-Preferred	QL
<b>IN-CHECK INSPIRATORY FLOW MTR DEVICE</b>		Preferred	QL
nebulizer cup/tubing device	In-Check Inspiratory Flow Mtr	Non-Preferred	OTC; QL
<b>OMBRA TABLE TOP COMPRESSOR DEVICE</b>		Non-Preferred	QL
<b>ONE FLOW SPIROMETER DEVICE</b>		Non-Preferred	QL
<b>PARI MANUAL INTERRUPTER DEVICE</b>		Non-Preferred	QL
<b>PARI TREK S COMBO PACK DEVICE</b>		Non-Preferred	QL
pure comfort 3-ball breathe ex device	In-Check Inspiratory Flow Mtr	Non-Preferred	OTC; QL
<b>QUAKE DEVICE</b>		Non-Preferred	QL
spiro pd device	In-Check Inspiratory Flow Mtr	Non-Preferred	QL
<b>THRESHOLD PEP DEVICE</b>		Non-Preferred	QL
<b>VERSAPAP DEVICE</b>		Non-Preferred	QL
<b>VERSAPAP W/UNIVERSAL TUBING DEVICE</b>		Non-Preferred	QL
<b>*SPACER/AEROSOL-HOLDING CHAMBERS &amp; SUPPLIES***</b>			
<b>AEROCHAMBER HOLDING CHAMBER DEVICE</b>		Non-Preferred	QL
<b>AEROCHAMBER MINI CHAMBER DEVICE</b>		Non-Preferred	QL
<b>AEROCHAMBER MV</b>		Non-Preferred	QL
<b>AEROCHAMBER PLS FLOVU MTHPIECE DEVICE</b>		Non-Preferred	QL
<b>AEROCHAMBER PLUS FLO-VU</b>		Non-Preferred	QL
<b>AEROCHAMBER PLUS FLO-VU INTERM DEVICE</b>		Non-Preferred	QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>AEROCHAMBER PLUS FLO-VU LARGE</b>		Non-Preferred	QL
<b>AEROCHAMBER PLUS FLO-VU LARGE DEVICE</b>		Non-Preferred	QL
<b>AEROCHAMBER PLUS FLO-VU MEDIUM</b>		Non-Preferred	QL
<b>AEROCHAMBER PLUS FLO-VU MEDIUM DEVICE</b>		Non-Preferred	QL
<b>AEROCHAMBER PLUS FLO-VU SMALL</b>		Non-Preferred	QL
<b>AEROCHAMBER PLUS FLO-VU SMALL DEVICE</b>		Non-Preferred	QL
<b>AEROCHAMBER PLUS FLOW VU</b>		Non-Preferred	QL
<b>AEROCHAMBER W/FLOWSIGNAL</b>		Non-Preferred	QL
<b>AEROCHAMBER Z-STAT PLUS</b>		Non-Preferred	QL
<b>AEROCHAMBER Z-STAT PLUS CHAMBR</b>		Non-Preferred	QL
<b>AEROCHAMBER Z-STAT PLUS/LARGE</b>		Non-Preferred	QL
<b>AEROCHAMBER Z-STAT PLUS/MEDIUM</b>		Non-Preferred	QL
<b>AEROCHAMBER Z-STAT PLUS/SMALL</b>		Non-Preferred	QL
<b>AEROVENT PLUS DEVICE</b>		Preferred	QL
breathe comfort chamber/adult device	AeroVent Plus	Non-Preferred	OTC; QL
breathe comfort chamber/child device	AeroVent Plus	Non-Preferred	OTC; QL
breathe ease large device	AeroVent Plus	Non-Preferred	QL
breathe ease medium device	AeroVent Plus	Non-Preferred	QL
breathe ease small device	AeroVent Plus	Non-Preferred	QL
<b>BREATHERITE VALVED MDI CHAMBER DEVICE</b>		Preferred	QL
<b>CLEVER CHOICE HOLDING CHAMBER DEVICE</b>		Non-Preferred	QL
<b>COMPACT SPACE CHAMBER DEVICE</b>		Preferred	QL
<b>COMPACT SPACE CHAMBER/LG MASK DEVICE</b>		Preferred	QL
<b>COMPACT SPACE CHAMBER/MED MASK DEVICE</b>		Preferred	QL
<b>EASIVENT</b>		Non-Preferred	QL
<b>EASIVENT MASK LARGE</b>		Preferred	QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>EASIVENT MASK MEDIUM</b>		Preferred	QL
<b>EASIVENT MASK SMALL</b>		Preferred	QL
<b>FLEXICHAMBER ADULT MASK/SMALL</b>		Non-Preferred	QL
<b>FLEXICHAMBER CHILD MASK/LARGE</b>		Non-Preferred	QL
<b>FLEXICHAMBER CHILD MASK/SMALL</b>		Non-Preferred	QL
<b>FLEXICHAMBER DEVICE</b>		Non-Preferred	QL
<b>INSPIREASE</b>		Non-Preferred	QL
<b>MASK VORTEX/CHILD/FROG</b>		Non-Preferred	OTC; QL
<b>MASK VORTEX/TODDLER/LADYBUG</b>		Non-Preferred	OTC; QL
<b>MICROCHAMBER</b>		Preferred	QL
<b>MICROCHAMBER DEVICE</b>		Preferred	QL
<b>MICROSPACER</b>		Preferred	QL
<b>OPTICHAMBER DIAMOND</b>		Preferred	QL
<b>OPTICHAMBER DIAMOND DEVICE</b>		Preferred	QL
<b>OPTICHAMBER DIAMOND-LG MASK DEVICE</b>		Preferred	QL
<b>OPTICHAMBER DIAMOND-MD MASK</b>		Preferred	QL
<b>OPTICHAMBER DIAMOND-SM MASK</b>		Preferred	QL
<b>PANDA MASK LARGE</b>		Non-Preferred	OTC; QL
<b>PANDA MASK MEDIUM</b>		Non-Preferred	OTC; QL
<b>PANDA MASK SMALL</b>		Non-Preferred	OTC; QL
<b>PEDIATRIC PANDA MASK</b>		Non-Preferred	OTC; QL
<b>POCKET CHAMBER DEVICE</b>		Preferred	QL
<b>POCKET SPACER DEVICE</b>		Non-Preferred	QL
pro comfort spacer adult	AeroVent Plus	Non-Preferred	OTC; QL
pro comfort spacer child	AeroVent Plus	Non-Preferred	OTC; QL
pro comfort spacer infant device	AeroVent Plus	Non-Preferred	OTC; QL
procare spacer/adult mask device	AeroVent Plus	Non-Preferred	OTC; QL
procare spacer/child mask device	AeroVent Plus	Non-Preferred	OTC; QL
prochamber vhc device	AeroVent Plus	Preferred	QL
pure comfort spacer chamber device	AeroVent Plus	Non-Preferred	OTC; QL
<b>RITEFLO DEVICE</b>		Preferred	QL

Drug Name	Reference	Status	Notes
VORTEX HOLD CHMBR/MASK/CHILD DEVICE		Preferred	QL
VORTEX HOLD CHMBR/MASK/TODDLER DEVICE		Preferred	QL
VORTEX VALVED HOLDING CHAMBER DEVICE		Preferred	QL
<b>*MIGRAINE PRODUCTS*</b>			
<b>*CALCITONIN GENE-RELATED PEPTIDE RECEPTOR ANTAG (CGRP)**</b>			
NURTEC ORAL TABLET DISPERSIBLE		Preferred	PA; QL
QULIPTA ORAL TABLET		Non-Preferred	PA; QL
UBRELVY ORAL TABLET		Non-Preferred	PA; QL
ZAVZPRET NASAL SOLUTION		Non-Preferred	PA; QL
<b>*CGRP RECEPTOR ANTAGONISTS - MONOCLONAL ANTIBODIES**</b>			
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR		Preferred	PA; QL
AJOVY SUBCUTANEOUS SOLUTION AUTO-INJECTOR		Non-Preferred	PA; QL
AJOVY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE		Non-Preferred	PA; QL
EMGALITY (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE		Preferred	PA; QL
EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR		Preferred	PA; QL
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE		Preferred	PA; QL
VYEPTI INTRAVENOUS SOLUTION		Non-Preferred	PA; QL
<b>*ERGOT COMBINATIONS**</b>			
ergotamine-caffeine oral tablet		Preferred	
MIGERGOT RECTAL SUPPOSITORY		Preferred	
<b>*MIGRAINE PRODUCTS - CYCLOOXYGENASE 2 (COX-2) INHIBITORS**</b>			
ELYXYB ORAL SOLUTION		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
<b>*MIGRAINE PRODUCTS - NSAIDS***</b>			
<b>CAMBIA ORAL PACKET</b>		Non-Preferred	PA; QL
diclofenac potassium(migraine) oral packet	Cambia	Non-Preferred	PA; QL
<b>*MIGRAINE PRODUCTS***</b>			
dihydroergotamine mesylate injection solution		Non-Preferred	PA; QL
dihydroergotamine mesylate nasal solution	Migranal	Non-Preferred	PA; QL
<b>ERGOMAR SUBLINGUAL TABLET SUBLINGUAL</b>		Non-Preferred	PA; QL
<b>MIGRANAL NASAL SOLUTION</b>		Non-Preferred	PA; QL
<b>TRUDHESA NASAL AEROSOL SOLUTION</b>		Non-Preferred	PA; QL
<b>*SELECTIVE SEROTONIN AGONISTS 5-HT(1)***</b>			
almotriptan malate oral tablet		Non-Preferred	PA; QL
eletriptan hydrobromide oral tablet	Relpax	Non-Preferred	PA; QL
<b>FROVA ORAL TABLET</b>		Non-Preferred	PA; QL
frovatriptan succinate oral tablet	Frova	Non-Preferred	PA; QL
<b>IMITREX ORAL TABLET</b>		Non-Preferred	PA; QL
<b>IMITREX STATDOSE REFILL SUBCUTANEOUS SOLUTION CARTRIDGE</b>		Non-Preferred	PA; QL
<b>IMITREX STATDOSE SYSTEM SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Non-Preferred	PA; QL
<b>MAXALT ORAL TABLET</b>		Non-Preferred	PA; QL
<b>MAXALT-MLT ORAL TABLET DISPERSIBLE</b>		Non-Preferred	PA; QL
naratriptan hcl oral tablet		Preferred	QL
<b>ONZETRA XSAIL NASAL EXHALER POWDER</b>		Non-Preferred	PA; QL
<b>RELPAK ORAL TABLET</b>		Non-Preferred	PA; QL
rizatriptan benzoate oral tablet	Maxalt	Non-Preferred	PA; QL
rizatriptan benzoate oral tablet dispersible	Maxalt-MLT	Non-Preferred	PA; QL
sumatriptan nasal solution		Preferred	PA; QL
sumatriptan succinate oral tablet	Imitrex	Preferred	QL

Drug Name	Reference	Status	Notes
sumatriptan succinate refill subcutaneous solution cartridge	Imitrex STATdose Refill	Preferred	PA; QL
sumatriptan succinate subcutaneous solution		Preferred	PA; QL
sumatriptan succinate subcutaneous solution auto-injector	Imitrex STATdose System	Preferred	QL
<b>TOSYMRA NASAL SOLUTION</b>		Non-Preferred	PA; QL
<b>ZEMBRACE SYMTOUCH SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Non-Preferred	PA; QL
zolmitriptan nasal solution 2.5 mg	Zomig	Non-Preferred	QL
zolmitriptan nasal solution 5 mg	Zomig	Non-Preferred	PA; QL
zolmitriptan oral tablet	Zomig	Non-Preferred	PA; QL
zolmitriptan oral tablet dispersible		Non-Preferred	PA; QL
<b>ZOMIG NASAL SOLUTION</b>		Non-Preferred	PA; QL
<b>ZOMIG ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*SELECTIVE SEROTONIN AGONISTS 5-HT(1F)***</b>			
<b>REYVOW ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*MINERALS &amp; ELECTROLYTES*</b>			
<b>*BICARBONATES***</b>			
sodium acetate intravenous solution		Non-Preferred	
sodium bicarbonate intravenous solution		Non-Preferred	
<b>THAM INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>*CALCIUM COMBINATIONS***</b>			
600+d3 oral tablet	Pronutrients Calcium+D3	Preferred	OTC; QL
advanced calcium formula oral tablet		Non-Preferred	OTC
<b>ALIVE CALCIUM PLUS VITAMIN D3 ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>AVORIA CAL+D ORAL PACKET</b>		Non-Preferred	OTC
<b>BONE DENSITY ORAL TABLET</b>		Non-Preferred	OTC
bone meal oral tablet		Non-Preferred	OTC
cal/mag oral tablet		Non-Preferred	OTC
<b>CALCET CREAMY BITES ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
calcitrate plus d oral tablet		Preferred	OTC
cal-citrate plus vitamin d oral tablet		Non-Preferred	OTC



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
calcium + d + k oral tablet		Non-Preferred	OTC
calcium + d oral tablet chewable		Non-Preferred	OTC
calcium + vitamin d3 oral tablet	One Vite Calcium + D3	Preferred	OTC; QL
calcium 1000 + d oral tablet		Non-Preferred	OTC
calcium 1200 oral tablet chewable		Non-Preferred	OTC
calcium 500 + d oral tablet	Os-Cal Calcium + D3	Preferred	OTC
calcium 500 + d3 oral tablet	Os-Cal Calcium + D3	Preferred	OTC
calcium 500 + d3 oral tablet chewable		Non-Preferred	OTC
calcium 500/d oral tablet	Os-Cal Calcium + D3	Preferred	OTC
calcium 500/vitamin d oral tablet		Preferred	OTC
calcium 500+d high potency oral tablet		Preferred	OTC
calcium 500+d oral tablet	Os-Cal Calcium + D3	Preferred	OTC
calcium 500+d3 oral tablet	Os-Cal Calcium + D3	Preferred	OTC
calcium 600 + d oral tablet		Preferred	OTC; QL
calcium 600 + minerals oral tablet		Preferred	OTC
calcium 600 +d high potency oral tablet		Non-Preferred	OTC; QL
calcium 600/vitamin d oral tablet	One Vite Calcium + D3	Preferred	OTC; QL
calcium 600/vitamin d oral tablet chewable		Preferred	OTC; QL
calcium 600/vitamin d3 oral tablet	Pronutrients Calcium+D3	Preferred	OTC; QL
calcium 600+d high potency oral tablet	One Vite Calcium + D3	Preferred	OTC; QL
calcium 600+d oral tablet	One Vite Calcium + D3	Preferred	OTC; QL
calcium 600+d plus minerals oral tablet		Preferred	OTC; QL
calcium 600+d plus minerals oral tablet chewable		Preferred	OTC; QL
calcium 600+d3 oral tablet	One Vite Calcium + D3	Preferred	OTC; QL
calcium 600+d3 plus minerals oral tablet	Caltrate 600+D Plus Minerals	Preferred	OTC
calcium 600+d3 plus minerals oral tablet chewable	Caltrate 600+D Plus Minerals	Preferred	OTC; QL
calcium 600-vitamin d3 oral tablet		Non-Preferred	OTC; QL
calcium carb-cholecalciferol oral capsule		Non-Preferred	OTC
calcium carb-cholecalciferol oral tablet 500-10 mg-mcg		Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
calcium carb-cholecalciferol oral tablet 600-10 mg-mcg	One Vite Calcium + D3	Preferred	OTC; QL
calcium carb-cholecalciferol oral tablet 600-20 mg-mcg	Pronutrients Calcium+D3	Preferred	OTC; QL
calcium carb-cholecalciferol oral tablet 600-5 mg-mcg		Preferred	OTC; QL
calcium carb-cholecalciferol oral tablet chewable		Non-Preferred	OTC
calcium carbonate-vitamin d oral capsule		Preferred	OTC; QL
calcium carbonate-vitamin d oral tablet		Preferred	OTC; QL
calcium citrate + d oral tablet 250-5 mg-mcg		Non-Preferred	OTC
calcium citrate + d oral tablet 315-5 mg-mcg		Preferred	OTC
calcium citrate + d3 maximum oral tablet	Citracal Maximum	Preferred	OTC
calcium citrate + d3 oral tablet 200-6.25 mg-mcg	Citracal Petites/Vitamin D	Preferred	OTC
calcium citrate + d3 oral tablet 250-5 mg-mcg		Non-Preferred	OTC
calcium citrate + d3 oral tablet 315-5 mg-mcg		Preferred	OTC
calcium citrate + d3 oral tablet 315-6.25 mg-mcg	Citracal Maximum	Preferred	OTC
calcium citrate + oral tablet		Preferred	OTC
calcium citrate chewy bite oral tablet chewable	Celebrate Calcium Citrate	Non-Preferred	OTC
calcium citrate malate-vit d oral tablet		Non-Preferred	OTC
calcium citrate+d3 oral tablet	Citracal Maximum	Preferred	OTC
calcium citrate+d3 petites oral tablet	Citracal Petites/Vitamin D	Preferred	OTC
calcium citrate-vitamin d oral tablet 200-3.125 mg-mcg, 315-5 mg-mcg		Preferred	OTC
calcium citrate-vitamin d oral tablet 250-1.25 mg-mcg		Non-Preferred	OTC
calcium citrate-vitamin d3 oral liquid		Non-Preferred	OTC
calcium citrate-vitamin d3 oral tablet	Citracal Maximum	Preferred	OTC
calcium creamies oral tablet chewable		Preferred	OTC; QL
calcium for women oral tablet chewable		Preferred	OTC

Drug Name	Reference	Status	Notes
calcium gluconate-nacl intravenous solution		Non-Preferred	
calcium gummies oral tablet chewable		Non-Preferred	OTC
calcium high potency/vitamin d oral tablet		Preferred	OTC; QL
calcium magnesium zinc oral tablet		Preferred	AL; OTC
calcium oral tablet chewable		Non-Preferred	OTC; QL
calcium plus d3 absorbable oral capsule		Non-Preferred	OTC
calcium plus vitamin d oral tablet	Os-Cal Calcium + D3	Preferred	OTC
calcium plus vitamin d3 oral capsule		Preferred	OTC
calcium plus vitamin d3 oral tablet	Pronutrients Calcium+D3	Preferred	OTC; QL
calcium soft chews oral tablet chewable		Non-Preferred	OTC
calcium with d3 oral tablet chewable		Non-Preferred	OTC
calcium/c/d oral tablet chewable		Preferred	OTC; QL
calcium/vitamin d3 gummies oral tablet chewable		Non-Preferred	OTC
calcium/vitamin d3/adult gummy oral tablet chewable		Non-Preferred	OTC
calcium+d3 gradual release oral tablet extended release 24 hour	Citracal Calcium +D3	Preferred	OTC
calcium+d3 oral tablet 500-10 mg-mcg		Preferred	OTC
calcium+d3 oral tablet 500-15 mg-mcg	Os-Cal Extra D3	Preferred	OTC
calcium+d3 oral tablet 600-20 mg-mcg	Pronutrients Calcium+D3	Preferred	OTC; QL
<b>CALCIUM+MENAQ7 ORAL TABLET</b>		Non-Preferred	OTC
calcium-magnesium oral tablet		Non-Preferred	OTC
calcium-magnesium-vitamin d oral capsule		Non-Preferred	OTC
calcium-magnesium-vitamin d oral liquid		Non-Preferred	OTC
calcium-magnesium-vitamin d oral wafer		Non-Preferred	OTC
calcium-magnesium-zinc oral tablet 333-133-5 mg, 333.33-133.33-5 mg		Preferred	AL; OTC
calcium-magnesium-zinc oral tablet 333-133-8.3 mg		Preferred	OTC
calcium-magnesium-zinc oral tablet 334-134-5 mg		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
calcium-vitamin d oral tablet		Non-Preferred	OTC; QL
calcium-vitamin d3 oral capsule 600-10 mg-mcg		Preferred	OTC; QL
calcium-vitamin d3 oral capsule 600-12.5 mg-mcg		Preferred	OTC
calcium-vitamin d3 oral tablet		Preferred	OTC; QL
calcium-vitamin d-minerals oral tablet chewable	Caltrate 600+D Plus Minerals	Preferred	OTC; QL
<b>CAL-MAG COMPLEX ORAL TABLET</b>		Non-Preferred	OTC
<b>CAL-MAG ORAL TABLET</b>		Non-Preferred	OTC
calmag thins oral tablet		Non-Preferred	OTC
<b>CAL-QUICK ORAL LIQUID</b>		Non-Preferred	OTC
<b>CALTRATE 600+D PLUS MINERALS ORAL TABLET</b>		Non-Preferred	OTC
<b>CALTRATE 600+D PLUS MINERALS ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC; QL
<b>CALTRATE 600+D3 ORAL TABLET</b>		Non-Preferred	OTC; QL
<b>CALTRATE 600+D3 SOFT ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>CALTRATE BONE HEALTH ADVANCED ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC; QL
<b>CALTRATE BONE HEALTH ORAL TABLET</b>		Non-Preferred	OTC; QL
<b>CALTRATE BONE HEALTH ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>CALTRATE GUMMY BITES ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>CALTRATE MINIS PLUS MINERALS ORAL TABLET</b>		Non-Preferred	OTC
<b>CELEBRATE CALCIUM CITRATE ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>CELEBRATE CALCIUM PLUS 500 ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
chewable calcium oral tablet chewable		Preferred	OTC
<b>CITRACAL +D3 ORAL TABLET CHEWABLE 250-107-500 MG-MG-UNIT</b>		Non-Preferred	OTC
<b>CITRACAL +D3 ORAL TABLET CHEWABLE 250-112.5-12.5 MG-MG-MCG</b>		Non-Preferred	OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>CITRACAL CALCIUM +D3 ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	OTC
<b>CITRACAL CALCIUM GUMMIES ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>CITRACAL MAXIMUM ORAL TABLET</b>		Non-Preferred	OTC
<b>CITRACAL PETITES/VITAMIN D ORAL TABLET</b>		Non-Preferred	OTC
<b>CITRACAL SLOW RELEASE ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	OTC
citrus calcium/vitamin d oral tablet	Citracal Petites/Vitamin D	Preferred	OTC
coral calcium oral capsule		Non-Preferred	OTC
dolomite oral tablet		Non-Preferred	OTC
finest nutrition calcium/vit d oral capsule		Preferred	OTC
liquid calcium with d3 oral capsule 600-12.5 mg-mcg		Preferred	OTC
liquid calcium with d3 oral capsule 600-25 mg-mcg		Non-Preferred	OTC
liquid calcium/vitamin d oral capsule		Preferred	OTC; QL
localnesium oral tablet		Non-Preferred	OTC
localnesium-c oral tablet		Non-Preferred	OTC
<b>MAGNEBIND 300 ORAL TABLET</b>		Non-Preferred	OTC
<b>NEOFLEX CALCIUM + VITAMIN D ORAL TABLET</b>		Non-Preferred	OTC
<b>OPTIMAG PLUS CALCIUM ORAL POWDER</b>		Non-Preferred	OTC
<b>OPURITY CALCIUM CITRATE PLUS ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>OS-CAL CALCIUM + D3 ORAL TABLET</b>		Preferred	OTC
<b>OS-CAL EXTRA D3 ORAL TABLET</b>		Preferred	OTC
<b>OS-CAL ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>OS-CAL ULTRA ORAL TABLET</b>		Non-Preferred	OTC
<b>OSSOPAN MD ORAL CAPSULE</b>		Non-Preferred	OTC
<b>OYSCO 500+D ORAL TABLET</b>		Preferred	OTC
oyster calcium/d3 oral tablet	Os-Cal Calcium + D3	Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
oyster shell calcium + d oral tablet	Os-Cal Calcium + D3	Preferred	OTC
oyster shell calcium + d3 oral tablet		Preferred	OTC
oyster shell calcium oral tablet		Preferred	OTC
oyster shell calcium plus d oral tablet	Os-Cal Calcium + D3	Preferred	OTC
oyster shell calcium w/d oral tablet	Os-Cal Calcium + D3	Preferred	OTC
oyster shell calcium/d oral tablet 250-3.125 mg-mcg		Preferred	OTC; QL
oyster shell calcium/d oral tablet 250-6.25 mg-mcg, 500-5 mg-mcg		Non-Preferred	OTC
oyster shell calcium/d oral tablet 500-10 mg-mcg		Preferred	OTC
oyster shell calcium/d3 oral tablet	Os-Cal Calcium + D3	Preferred	OTC
oyster shell calcium/vit d oral tablet	Os-Cal Calcium + D3	Preferred	OTC
oyster shell calcium/vit d3 oral tablet		Preferred	OTC; QL
oyster shell calcium/vitamin d oral tablet 250-3.125 mg-mcg		Preferred	OTC; QL
oyster shell calcium/vitamin d oral tablet 500-5 mg-mcg	Os-Cal Calcium + D3	Preferred	OTC
parva-cal oral tablet		Non-Preferred	OTC
<b>POSTURE ORAL TABLET</b>		Non-Preferred	OTC
<b>POSTURE-D CALCIUM/MAGNESIUM ORAL TABLET</b>		Non-Preferred	OTC
<b>PRONUTRIENTS CALCIUM+D3 ORAL TABLET</b>		Preferred	OTC; QL
risacal-d oral tablet		Preferred	OTC
super cal/mag oral tablet		Non-Preferred	OTC
super cal-mag-d oral tablet		Non-Preferred	OTC
<b>UPCAL D ORAL PACKET</b>		Non-Preferred	OTC
<b>UPCAL D ORAL POWDER</b>		Non-Preferred	OTC
<b>VIACTIV CALCIUM IMMUNE ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>VIACTIV CALCIUM PLUS D ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>*CALCIUM***</b>			
cal-citrate oral capsule		Non-Preferred	OTC
calcium 600 high potency oral tablet		Preferred	OTC
calcium 600 oral tablet		Preferred	OTC
calcium acetate oral tablet		Non-Preferred	PA; OTC; QL

Drug Name	Reference	Status	Notes
calcium carbonate oral powder		Non-Preferred	OTC
calcium carbonate oral tablet 1250 (500 ca) mg		Preferred	OTC; QL
calcium carbonate oral tablet 1500 (600 ca) mg, 600 mg		Preferred	OTC
calcium carbonate oral tablet chewable 1250 (500 ca) mg		Non-Preferred	OTC; QL
calcium carbonate oral tablet chewable 260 mg		Non-Preferred	OTC
calcium chloride intravenous solution		Non-Preferred	
calcium citrate oral granules		Non-Preferred	OTC
calcium citrate oral tablet 250 mg, 950 (200 ca) mg		Preferred	OTC
calcium citrate oral tablet 333 mg		Non-Preferred	OTC
calcium gluconate intravenous solution		Non-Preferred	
calcium gluconate oral capsule		Non-Preferred	OTC
calcium high potency oral tablet		Preferred	OTC
calcium lactate oral tablet		Non-Preferred	OTC
calcium oral tablet		Non-Preferred	OTC
calcium oyster shell oral tablet		Preferred	OTC; QL
cal-mint oral tablet chewable		Non-Preferred	OTC
chelated calcium oral tablet		Non-Preferred	OTC
coral calcium oral capsule		Non-Preferred	OTC
<b>OSSOPAN 1100 ORAL CAPSULE</b>		Non-Preferred	OTC
oyster shell calcium oral tablet		Preferred	OTC; QL
pure calcium carbonate oral tablet		Preferred	OTC
super calcium oral tablet		Preferred	OTC
true oyster shell calcium oral tablet		Preferred	OTC; QL
<b>*ELECTROLYTES &amp; DEXTROSE***</b>			
dextrose 5%/electrolyte #48 intravenous solution		Non-Preferred	
dextrose in lactated ringers intravenous solution		Non-Preferred	
dextrose-sodium chloride intravenous solution		Non-Preferred	
<b>ELLIOTTS B INTRATHECAL SOLUTION</b>		Non-Preferred	

Drug Name	Reference	Status	Notes
<b>IONOSOL-MB IN D5W INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>ISOLYTE-P IN D5W INTRAVENOUS SOLUTION</b>		Non-Preferred	
kcl in dextrose-nacl intravenous solution		Non-Preferred	
kcl-lactated ringers-d5w intravenous solution		Non-Preferred	
<b>NORMOSOL-M IN D5W INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>NORMOSOL-R IN D5W INTRAVENOUS SOLUTION</b>		Non-Preferred	
potassium cl in dextrose 5% intravenous solution		Non-Preferred	
<b>*ELECTROLYTES ORAL ***</b>			
<b>ADVANTAGE CARE ELECTROLYTE PED ORAL SOLUTION</b>		Preferred	OTC; QL
<b>BIOLYTE ORAL PACKET</b>		Non-Preferred	OTC
<b>BIOLYTE ORAL SOLUTION</b>		Non-Preferred	OTC; QL
<b>CERALYTE 50 ORAL PACKET</b>		Non-Preferred	OTC
<b>CERALYTE 50 POTASSIUM FREE ORAL PACKET</b>		Non-Preferred	OTC
<b>CERALYTE 70 ORAL PACKET</b>		Non-Preferred	OTC
<b>CERALYTE 70 ORAL SOLUTION</b>		Preferred	OTC; QL
<b>CERALYTE 90 ORAL PACKET</b>		Non-Preferred	OTC
<b>CERASPORT ENDURANCE ORAL PACKET</b>		Non-Preferred	OTC
<b>CERASPORT EX1 ORAL PACKET</b>		Non-Preferred	OTC
<b>CERASPORT EX1 ORAL SOLUTION</b>		Non-Preferred	OTC; QL
<b>CERASPORT EX1 ORAL SOLUTION RECONSTITUTED</b>		Non-Preferred	OTC
<b>CERASPORT ORAL PACKET</b>		Non-Preferred	OTC
<b>CERASPORT ORAL SOLUTION</b>		Non-Preferred	OTC; QL
<b>CERASPORT ORAL SOLUTION RECONSTITUTED</b>		Non-Preferred	OTC
<b>CERASPORT PLUS ORAL PACKET</b>		Non-Preferred	OTC
<b>DRIPDROP HYDRATION ORAL PACKET</b>		Non-Preferred	OTC
<b>DRIPDROP ORAL PACKET</b>		Non-Preferred	OTC



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
electrolyte sr oral tablet extended release		Non-Preferred	OTC
<b>EMERGEN-C ELECTRO MIX ORAL PACKET</b>		Non-Preferred	OTC
<b>ENFAMIL ENFALYTE ORAL SOLUTION</b>		Non-Preferred	OTC; QL
<b>ENSURE RAPID HYDRATION ORAL PACKET</b>		Non-Preferred	OTC
<b>EQUALYTE ORAL SOLUTION</b>		Non-Preferred	OTC; QL
h-e-b oral electrolyte oral solution	Advantage Care Electrolyte Ped	Preferred	OTC; QL
<b>HYDRALYTE FREEZER POPS ORAL SOLUTION</b>		Non-Preferred	OTC; QL
<b>HYDRALYTE ORAL PACKET</b>		Non-Preferred	OTC
<b>HYDRALYTE ORAL SOLUTION</b>		Non-Preferred	OTC; QL
<b>HYDRALYTE ORAL SOLUTION RECONSTITUTED</b>		Non-Preferred	OTC
<b>HYDRALYTE ORAL TABLET EFFERVESCENT</b>		Non-Preferred	OTC
hydrating electrolyte oral packet	Biolyte	Non-Preferred	OTC
<b>KINDERLYTE IMMUNITY ORAL PACKET</b>		Non-Preferred	OTC
<b>KINDERLYTE ORAL PACKET</b>		Non-Preferred	OTC
<b>KINDERLYTE ORAL SOLUTION</b>		Non-Preferred	OTC; QL
<b>KINDERLYTE PREMAX ORAL PACKET</b>		Non-Preferred	OTC
<b>KINDERLYTE PREMAX ORAL SOLUTION</b>		Non-Preferred	OTC; QL
<b>LIQUID I.V. ORAL PACKET</b>		Non-Preferred	OTC
<b>MEDI-LYTE ORAL TABLET</b>		Non-Preferred	OTC
<b>NORMALYTE ORAL PACKET</b>		Non-Preferred	OTC
oral electrolyte freezer pops oral solution	Advantage Care Electrolyte Ped	Preferred	OTC; QL
oral electrolytes oral solution	Advantage Care Electrolyte Ped	Preferred	OTC; QL
<b>ORALYTE ORAL SOLUTION</b>		Preferred	OTC; QL
ped electrolyte freeze pops oral solution	Advantage Care Electrolyte Ped	Preferred	OTC; QL
ped electrolyte freezer pops oral solution	Advantage Care Electrolyte Ped	Preferred	OTC; QL
<b>PEDIA VANCE ORAL SOLUTION</b>		Preferred	OTC; QL

Drug Name	Reference	Status	Notes
<b>PEDIALYTE ADVANCED CARE ORAL SOLUTION</b>		Non-Preferred	OTC; QL
<b>PEDIALYTE FREEZER POPS ORAL SOLUTION</b>		Non-Preferred	OTC; QL
<b>PEDIALYTE IMMUNE SUPPORT ORAL SOLUTION</b>		Non-Preferred	OTC; QL
<b>PEDIALYTE ORAL PACKET</b>		Non-Preferred	OTC
<b>PEDIALYTE ORAL SOLUTION</b>		Non-Preferred	OTC; QL
<b>PEDIALYTE SINGLES ORAL SOLUTION</b>		Non-Preferred	OTC; QL
<b>PEDIALYTE SPARKLING RUSH ORAL PACKET</b>		Non-Preferred	OTC
<b>PEDIA-POP ORAL PACKET</b>		Non-Preferred	OTC
pediatric electrolyte oral packet	Biolyte	Non-Preferred	OTC
pediatric electrolyte oral solution	Advantage Care Electrolyte Ped	Preferred	OTC; QL
<b>REHYDRALYTE ORAL SOLUTION</b>		Preferred	OTC; QL
<b>THERMOTABS ORAL TABLET</b>		Non-Preferred	OTC
truelyte oral solution	Advantage Care Electrolyte Ped	Non-Preferred	OTC; QL
<b>*ELECTROLYTES PARENTERAL ***</b>			
<b>ISOLYTE-S INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>ISOLYTE-S PH 7.4 INTRAVENOUS SOLUTION</b>		Non-Preferred	
kcl (0.149%) in nacl intravenous solution		Non-Preferred	
kcl (0.298%) in nacl intravenous solution		Non-Preferred	
lactated ringers intravenous solution		Non-Preferred	
multiple electro type 1 ph 5.5 intravenous solution		Non-Preferred	
multiple electro type 1 ph 7.4 intravenous solution	Plasma-Lyte A	Non-Preferred	
<b>NORMOSOL-R INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>NORMOSOL-R PH 7.4 INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>PLASMA-LYTE A INTRAVENOUS SOLUTION</b>		Non-Preferred	

Drug Name	Reference	Status	Notes
potassium chloride in nacl intravenous solution		Non-Preferred	
ringers intravenous solution		Non-Preferred	
<b>TPN ELECTROLYTES INTRAVENOUS CONCENTRATE</b>		Non-Preferred	
<b>*FLUORIDE COMBINATIONS***</b>			
<b>FLORICAL ORAL CAPSULE</b>		Non-Preferred	OTC
<b>FLORICAL ORAL TABLET</b>		Non-Preferred	OTC
<b>FLORIVA ORAL LIQUID</b>		Non-Preferred	AL
<b>MONOCAL ORAL TABLET</b>		Non-Preferred	OTC
<b>*FLUORIDE***</b>			
sodium fluoride oral solution	SoluVita	Preferred	AL
sodium fluoride oral tablet		Non-Preferred	AL
sodium fluoride oral tablet chewable		Preferred	AL
<b>SOLUVITA ORAL SOLUTION</b>		Non-Preferred	AL; OTC
<b>*IODINE COMBINATIONS***</b>			
<b>XYMODINE ORAL CAPSULE</b>		Non-Preferred	OTC
<b>*IODINE PRODUCTS***</b>			
kelp oral tablet		Non-Preferred	OTC
<b>*LITHIUM***</b>			
<b>LITH-ORO ORAL CAPSULE</b>		Non-Preferred	OTC
<b>*MAGNESIUM COMBINATIONS***</b>			
<b>BEELITH ORAL TABLET</b>		Non-Preferred	OTC
<b>CHOLEREX ORAL CAPSULE</b>		Non-Preferred	OTC
<b>K-MAG ORAL CAPSULE</b>		Non-Preferred	OTC
<b>K-MAG-60 ORAL CAPSULE</b>		Non-Preferred	OTC
krebs magnesium-potassium oral tablet		Non-Preferred	OTC
<b>MAG-AMIDE ORAL TABLET EXTENDED RELEASE</b>		Non-Preferred	OTC
magnesium fizz-plus oral powder effervescent		Non-Preferred	OTC
<b>MAGNESIUM OPTIMIZER ORAL TABLET</b>		Non-Preferred	OTC
potassium & magnesium aspartat oral capsule		Non-Preferred	OTC
slow magnesium/calcium oral tablet delayed release		Non-Preferred	OTC; QL

Drug Name	Reference	Status	Notes
<b>SLOWMAG MG MUSCLE/HEART ORAL TABLET DELAYED RELEASE</b>		Non-Preferred	OTC
<b>SLOW-MAG ORAL TABLET DELAYED RELEASE</b>		Non-Preferred	OTC
<b>*MAGNESIUM***</b>			
chelated magnesium oral tablet		Non-Preferred	OTC
high absorption magnesium oral tablet		Non-Preferred	OTC
m2 magnesium oral capsule		Non-Preferred	OTC
mag glycinate oral tablet		Non-Preferred	OTC
<b>MAG-200 ORAL TABLET</b>		Non-Preferred	OTC
<b>MAG64 ORAL TABLET DELAYED RELEASE</b>		Non-Preferred	OTC; QL
<b>MAGDELAY ORAL TABLET DELAYED RELEASE</b>		Preferred	OTC; QL
mag-g oral tablet		Non-Preferred	OTC
magnesium bisglycinate oral capsule		Non-Preferred	OTC
magnesium bisglycinate oral tablet		Non-Preferred	OTC
magnesium carbonate oral powder		Non-Preferred	OTC
magnesium chloride oral tablet		Non-Preferred	OTC
magnesium citrate oral capsule		Non-Preferred	OTC
magnesium citrate oral tablet		Non-Preferred	OTC
magnesium citrate oral tablet chewable		Non-Preferred	OTC
magnesium complex high potency oral capsule		Non-Preferred	OTC
magnesium extra strength oral capsule		Non-Preferred	OTC; QL
magnesium gluconate oral tablet 250 mg, 550 mg		Non-Preferred	OTC
magnesium gluconate oral tablet 27.5 mg		Preferred	OTC
magnesium glycinate advanced oral capsule		Non-Preferred	OTC
magnesium glycinate oral capsule		Non-Preferred	OTC
magnesium high absorption oral tablet chewable		Non-Preferred	OTC
magnesium lactate oral tablet extended release	Mag-Tab SR	Non-Preferred	OTC
magnesium malate oral tablet		Non-Preferred	OTC
magnesium oral capsule		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
magnesium oral tablet 200 mg, 250 mg		Preferred	OTC
magnesium oral tablet 30 mg		Non-Preferred	OTC
magnesium oral tablet 400 mg		Preferred	OTC; QL
magnesium oral tablet chewable		Non-Preferred	OTC
magnesium oxide (elemental) oral tablet		Non-Preferred	OTC
magnesium oxide -mg supplement oral capsule 400 mg		Non-Preferred	OTC; QL
magnesium oxide -mg supplement oral capsule 500 mg		Preferred	OTC
magnesium oxide -mg supplement oral tablet 250 mg, 500 mg		Preferred	OTC
magnesium oxide -mg supplement oral tablet 400 (240 mg) mg	MAGnesium-Oxide	Preferred	OTC; QL
magnesium oxide -mg supplement oral tablet 420 (252 mg) mg		Non-Preferred	OTC
magnesium oxide -mg supplement oral tablet chewable		Non-Preferred	OTC
magnesium oxide oral powder		Non-Preferred	OTC
magnesium sulfate in d5w intravenous solution		Non-Preferred	
magnesium sulfate injection solution		Non-Preferred	
magnesium sulfate intravenous solution		Non-Preferred	
<b>MAGNESIUM-OXIDE ORAL TABLET</b>		Preferred	OTC; QL
<b>MAGONATE ORAL LIQUID</b>		Non-Preferred	OTC
<b>MAGOX 400 ORAL TABLET</b>		Non-Preferred	OTC; QL
<b>MAG-OXIDE ORAL TABLET</b>		Preferred	OTC
<b>MAG-TAB SR ORAL TABLET EXTENDED RELEASE</b>		Non-Preferred	OTC
mg aspartate oral tablet		Non-Preferred	OTC
mgo oral tablet	MAGnesium-Oxide	Preferred	OTC; QL
mp magnesium oral capsule		Non-Preferred	OTC
<b>OPTIMAG 125 ORAL CAPSULE</b>		Non-Preferred	OTC
<b>OPTIMAG NEURO ORAL CAPSULE</b>		Non-Preferred	OTC
<b>OPTIMAG NEURO ORAL POWDER</b>		Non-Preferred	OTC
<b>SLOWMAG MG MUSCLE HLTH/RECOVER ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>YUMVS MAGNESIUM ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>*MANGANESE***</b>			
manganese amino acid chelate oral tablet		Non-Preferred	OTC
manganese chloride intravenous solution		Non-Preferred	
manganese gluconate oral tablet		Non-Preferred	OTC
<b>*MINERAL COMBINATIONS***</b>			
<b>ADVANCED CALCIUM/D/MAGNESIUM ORAL TABLET</b>		Non-Preferred	AL; OTC
bone density builder oral tablet	Advanced Calcium/D/Magnesium	Non-Preferred	AL; OTC
bone essentials oral capsule	Nutra-Support Bone	Non-Preferred	OTC
calcium & vit d3 bone health oral liquid		Non-Preferred	OTC
calcium 600+d3 plus minerals oral tablet	Advanced Calcium/D/Magnesium	Non-Preferred	AL; OTC
calcium citrate + oral tablet	Advanced Calcium/D/Magnesium	Preferred	AL; OTC
calcium citrate plus oral tablet	Advanced Calcium/D/Magnesium	Preferred	AL; OTC
calcium citrate plus/magnesium oral tablet	Advanced Calcium/D/Magnesium	Preferred	AL; OTC
calcium citrate-mag-minerals oral tablet	Advanced Calcium/D/Magnesium	Preferred	AL; OTC
calcium-magnesium-zinc-d3 oral tablet	Advanced Calcium/D/Magnesium	Non-Preferred	AL; OTC
<b>CITRACAL MAXIMUM PLUS ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>CITRACAL PLUS ORAL TABLET</b>		Non-Preferred	AL; OTC
fem-cal citrate oral tablet	Advanced Calcium/D/Magnesium	Non-Preferred	AL; OTC
<b>MG/TAURINE FORTE ORAL CAPSULE</b>		Non-Preferred	OTC
<b>MINREX ORAL CAPSULE</b>		Non-Preferred	OTC
<b>MULTI MEGA MINERALS ORAL TABLET</b>		Non-Preferred	AL; OTC
multi-minerals oral tablet		Non-Preferred	OTC
<b>NUTRA-SUPPORT BONE ORAL CAPSULE</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>PROSTEON ORAL TABLET</b>		Non-Preferred	AL; OTC
sv n-acetyl cysteine oral capsule	MG/Taurine Forte	Non-Preferred	OTC
<b>THERACAL D2000 ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>THERACAL D4000 ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>THERACAL RAPID REPLETION ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>YUMVS CALC-MAG-ZINC-VIT D ORAL TABLET CHEWABLE</b>		Preferred	OTC
<b>ZINC BALANCE ORAL CAPSULE</b>		Non-Preferred	OTC
<b>*PHOSPHATE***</b>			
<b>GLYCOPHOS INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>K-PHOS ORAL TABLET</b>		Non-Preferred	
<b>K-PHOS-NEUTRAL ORAL TABLET</b>		Non-Preferred	
phos-nak oral packet		Non-Preferred	OTC
<b>PHOSPHA 250 NEUTRAL ORAL TABLET</b>		Preferred	
phosphorous oral tablet	Phospha 250 Neutral	Preferred	
phosphorus supplement oral packet		Non-Preferred	OTC
phosphorus w/sod & potassium oral packet		Non-Preferred	OTC
<b>PHOSPHO-TRIN 250 NEUTRAL ORAL TABLET</b>		Preferred	
<b>PHOSPHO-TRIN K500 ORAL TABLET</b>		Non-Preferred	
potassium phosphates intravenous solution		Non-Preferred	
potassium phosphates(66 meq k) intravenous solution		Non-Preferred	
potassium phosphates(71 meq k) intravenous solution		Non-Preferred	
sodium phosphates intravenous solution		Non-Preferred	
sodium-potassium-phosphorus oral packet		Non-Preferred	OTC
wes-phos 250 neutral oral tablet	Phospha 250 Neutral	Preferred	
<b>*POTASSIUM***</b>			
k-99 oral capsule		Non-Preferred	OTC
<b>K-BICARB ORAL CAPSULE</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>KLOR-CON 10 ORAL TABLET EXTENDED RELEASE</b>		Preferred	
<b>KLOR-CON M10 ORAL TABLET EXTENDED RELEASE</b>		Preferred	
<b>KLOR-CON M15 ORAL TABLET EXTENDED RELEASE</b>		Preferred	
<b>KLOR-CON M20 ORAL TABLET EXTENDED RELEASE</b>		Preferred	
<b>KLOR-CON ORAL PACKET</b>		Preferred	
<b>KLOR-CON ORAL TABLET EXTENDED RELEASE</b>		Preferred	
<b>K-TAB ORAL TABLET EXTENDED RELEASE</b>		Non-Preferred	
<b>POKONZA ORAL PACKET</b>		Non-Preferred	PA
potassium acetate intravenous solution		Non-Preferred	
potassium chloride crys er oral tablet extended release	Klor-Con M10	Preferred	
potassium chloride er oral capsule extended release		Preferred	
potassium chloride er oral tablet extended release 10 meq	Klor-Con 10	Preferred	
potassium chloride er oral tablet extended release 15 meq		Non-Preferred	
potassium chloride er oral tablet extended release 20 meq	K-Tab	Preferred	
potassium chloride er oral tablet extended release 8 meq	Klor-Con	Preferred	
potassium chloride intravenous solution		Non-Preferred	
potassium chloride oral packet	Klor-Con	Preferred	
potassium chloride oral solution		Preferred	
potassium citrate(elemental k) oral capsule		Non-Preferred	OTC
potassium gluconate oral tablet 2 meq, 550 (90 k) mg, 550 mg		Non-Preferred	OTC; QL
potassium gluconate oral tablet 2.5 meq, 80 mg		Non-Preferred	OTC
potassium gluconate oral tablet 595 (99 k) mg		Preferred	OTC; QL
potassium oral tablet		Non-Preferred	OTC; QL



Drug Name	Reference	Status	Notes
<b>*SODIUM***</b>			
<b>AQUASTAT INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>AQUASTAT SFR INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>BD POSIFLUSH INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>MONOJECT FLUSH SYRINGE INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>MONOJECT SODIUM CHLORIDE FLUSH INTRAVENOUS SOLUTION</b>		Non-Preferred	
normal saline flush intravenous solution	Aquastat	Non-Preferred	
sodium chloride (pf) injection solution		Non-Preferred	
sodium chloride flush intravenous solution	Aquastat	Non-Preferred	
sodium chloride injection solution		Non-Preferred	
sodium chloride intravenous solution		Non-Preferred	
sodium chloride oral solution		Non-Preferred	OTC
sodium chloride oral tablet		Non-Preferred	OTC
<b>*TRACE MINERAL COMBINATIONS***</b>			
cro-man-zin oral tablet		Non-Preferred	OTC
<b>MULTITRACE-4 PEDIATRIC INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>MULTRYS INTRAVENOUS SOLUTION</b>		Non-Preferred	
selenium-yeast oral tablet		Non-Preferred	OTC
<b>THE LIQUILIFT TRACE INTRAVENOUS KIT</b>		Non-Preferred	
<b>TRALEMENT INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>*TRACE MINERALS***</b>			
<b>AQUEOUS SELENIUM ORAL LIQUID</b>		Non-Preferred	OTC
chromic chloride intravenous solution		Non-Preferred	
chromium gtf oral tablet		Non-Preferred	OTC
chromium oral tablet		Non-Preferred	OTC
chromium picolinate oral capsule		Non-Preferred	OTC
chromium picolinate oral tablet		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
chromium picolinate ultra oral tablet		Non-Preferred	OTC
copper gluconate oral tablet		Non-Preferred	OTC
<b>CRM ORAL CAPSULE</b>		Non-Preferred	OTC
cupric chloride intravenous solution		Non-Preferred	
molybdenum oral capsule		Non-Preferred	OTC
oceanic selenium oral tablet		Non-Preferred	OTC
se-100 oral capsule		Non-Preferred	OTC
selenious acid intravenous solution		Non-Preferred	
selenium oral capsule		Non-Preferred	OTC
selenium oral tablet		Non-Preferred	OTC
yl chromium picolinate oral tablet		Non-Preferred	OTC
<b>*ZINC COMBINATIONS***</b>			
zinc magnesium aspartate oral capsule		Non-Preferred	OTC
zinc plus vitamin c oral capsule		Non-Preferred	OTC
zinc-c-b6 mouth/throat lozenge		Non-Preferred	OTC
zinc-vitamin c oral capsule		Non-Preferred	OTC
zinc-vitamin c oral tablet dispersible		Non-Preferred	OTC
zinc-vitamin c-vitamin a mouth/throat lozenge		Non-Preferred	OTC
<b>*ZINC***</b>			
chelated zinc oral tablet	IS-ZC 50	Preferred	OTC; QL
<b>GALZIN ORAL CAPSULE</b>		Non-Preferred	
<b>IS-ZC 50 ORAL TABLET</b>		Preferred	OTC; QL
<b>ORAZINC ORAL CAPSULE</b>		Preferred	OTC
<b>ORAZINC ORAL TABLET</b>		Non-Preferred	OTC
<b>VITAMELTS ZINC FAST DISSOLVE ORAL TABLET DISPERSIBLE</b>		Non-Preferred	OTC
<b>ZINC 15 ORAL TABLET</b>		Non-Preferred	OTC
zinc chelated oral tablet		Non-Preferred	OTC
zinc chloride intravenous solution		Non-Preferred	
zinc extra strength oral tablet chewable		Non-Preferred	OTC
zinc gluconate oral tablet 100 mg, 30 mg		Preferred	OTC
zinc gluconate oral tablet 15 mg		Non-Preferred	OTC
zinc gluconate oral tablet 50 mg		Preferred	OTC; QL
zinc glycinate oral capsule		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
zinc gummy oral tablet chewable		Non-Preferred	OTC
zinc high absorption oral tablet chewable		Non-Preferred	OTC
zinc mouth/throat lozenge		Non-Preferred	OTC
zinc oral capsule 220 (50 zn) mg	Orazinc	Preferred	OTC
zinc oral capsule 30 mg		Non-Preferred	OTC
zinc oral tablet 100 mg		Non-Preferred	OTC
zinc oral tablet 30 mg		Preferred	OTC
zinc oral tablet 50 mg	IS-ZC 50	Preferred	OTC; QL
zinc sulfate intravenous solution		Non-Preferred	
zinc sulfate oral capsule	Orazinc	Preferred	OTC
zinc sulfate oral tablet		Preferred	OTC
zn-50 oral capsule		Non-Preferred	OTC
<b>*MISCELLANEOUS THERAPEUTIC CLASSES*</b>			
<b>*ACTIVATED PHOSPHOINOSITIDE 3-KINASE DELTA SYNDROME AGENT***</b>			
JOENJA ORAL TABLET		Non-Preferred	PA; QL
<b>*ALLOGENEIC THYMUS TISSUE***</b>			
RETHYMIC INTRAMUSCULAR IMPLANT		Non-Preferred	
<b>*ANTILEPROTICS***</b>			
THALOMID ORAL CAPSULE		Non-Preferred	PA; SP; QL
<b>*B-LYMPHOCYTE STIMULATOR (BLYS)-SPECIFIC INHIBITORS***</b>			
BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR		Non-Preferred	PA; SP; QL
BENLYSTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE		Non-Preferred	PA; SP; QL
<b>*CHELATING AGENTS***</b>			
CUPRIMINE ORAL CAPSULE		Non-Preferred	PA; SP; QL
CUVRIOR ORAL TABLET		Non-Preferred	PA; QL
DEPEN TITRATABS ORAL TABLET		Non-Preferred	PA; SP; QL
penicillamine oral capsule	Cuprimine	Non-Preferred	PA; SP; QL
penicillamine oral tablet	Depen Titratabs	Preferred	PA; SP; QL
SYPRINE ORAL CAPSULE		Non-Preferred	PA; SP; QL

Drug Name	Reference	Status	Notes
trientine hcl oral capsule 250 mg	Syprine	Preferred	PA; SP; QL
trientine hcl oral capsule 500 mg		Non-Preferred	PA; SP; QL
<b>*CONTINUOUS RENAL REPLACEMENT THERAPY (CRRT) SOLUTIONS***</b>			
phoxillum b22k4/0 extracorporeal solution		Non-Preferred	
phoxillum bk4/2.5 extracorporeal solution		Non-Preferred	
<b>PRIMASOL B22GK 4/0 EXTRACORPOREAL SOLUTION</b>		Non-Preferred	
<b>PRIMASOL BGK 0/2.5 EXTRACORPOREAL SOLUTION</b>		Non-Preferred	
<b>PRIMASOL BGK 2/0 EXTRACORPOREAL SOLUTION</b>		Non-Preferred	
<b>PRIMASOL BGK 2/3.5 EXTRACORPOREAL SOLUTION</b>		Non-Preferred	
<b>PRIMASOL BGK 4/0/1.2 EXTRACORPOREAL SOLUTION</b>		Non-Preferred	
<b>PRIMASOL BGK 4/2.5 EXTRACORPOREAL SOLUTION</b>		Non-Preferred	
<b>PRIMASOL BK 0/0/1.2 EXTRACORPOREAL SOLUTION</b>		Non-Preferred	
<b>*CYCLOSPORINE ANALOGS***</b>			
cyclosporine modified oral capsule	Gengraf	Preferred	
cyclosporine modified oral solution	Gengraf	Preferred	
cyclosporine oral capsule	SandIMMUNE	Preferred	
<b>GENGRAF ORAL CAPSULE</b>		Preferred	
<b>GENGRAF ORAL SOLUTION</b>		Preferred	
<b>LUPKYNIS ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>NEORAL ORAL CAPSULE</b>		Non-Preferred	
<b>NEORAL ORAL SOLUTION</b>		Non-Preferred	
<b>SANDIMMUNE INTRAVENOUS SOLUTION</b>		Non-Preferred	SP
<b>SANDIMMUNE ORAL CAPSULE</b>		Non-Preferred	
<b>*DIGITAL THERAPY APPLICATION - BEHAVIOR &amp; MENTAL HEALTH***</b>			
coaching app	Deprexis	Non-Preferred	OTC
daylight 2024 app	Deprexis	Non-Preferred	OTC

Drug Name	Reference	Status	Notes
daylight app	Deprexis	Non-Preferred	OTC
<b>DEPREXIS</b>		Non-Preferred	OTC
premium therapy app	Deprexis	Non-Preferred	OTC
<b>REJOYN</b>		Non-Preferred	
silvercloud coached user	Deprexis	Non-Preferred	OTC
silvercloud coaching true up	Deprexis	Non-Preferred	OTC
silvercloud self guided	Deprexis	Non-Preferred	OTC
<b>SLEEPIO</b>		Non-Preferred	OTC
<b>SLEEPIO 2024 APP</b>		Non-Preferred	OTC
<b>SLEEPIO/DAYLIGHT APP BUNDLE</b>		Non-Preferred	OTC
sleepio/daylight group bundle	Sleepio	Non-Preferred	OTC
<b>SLEEPIO/DAYLIGHT STEP BUNDLE</b>		Non-Preferred	OTC
spark direct	Deprexis	Non-Preferred	OTC
spark direct 2024	Deprexis	Non-Preferred	OTC
therapy app	Deprexis	Non-Preferred	OTC
<b>*DIGITAL THERAPY APPLICATION - GASTROINTESTINAL***</b>			
<b>REGULORA</b>		Non-Preferred	OTC
<b>*DIGITAL THERAPY APPLICATION - MISCELLANEOUS***</b>			
<b>TORCHLIGHT CHILD</b>		Non-Preferred	OTC
<b>TORCHLIGHT COMPLETE SUITE</b>		Non-Preferred	OTC
<b>TORCHLIGHT ELDER</b>		Non-Preferred	OTC
<b>*DIGITAL THERAPY APPLICATION - MUSCULOSKELETAL***</b>			
engagement billing-additional	Hinge Health Acute Prog/Chron	Non-Preferred	OTC
engagement billing-first	Hinge Health Acute Prog/Chron	Non-Preferred	OTC
fall prevention standalone kit	Acute Prog-Chron/Surg Y1 Mile2	Non-Preferred	OTC
<b>HINGE HEALTH ACUTE PROG/CHRON</b>		Non-Preferred	OTC
<b>HINGE HEALTH ACUTE YEAR 2</b>		Non-Preferred	OTC
<b>HINGE HEALTH CHRON PROG/ACUTE</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>HINGE HEALTH CHRONIC &amp; SURGERY</b>		Non-Preferred	OTC
<b>*DIGITAL THERAPY APPLICATION - WELLNESS***</b>			
<b>KURBO BY WW</b>		Non-Preferred	OTC
<b>NATURALLY SLIM FOUNDATIONS</b>		Non-Preferred	OTC
<b>NATURALLY SLIM NS4YOU</b>		Non-Preferred	OTC
<b>VIDA GROUP COACHING</b>		Non-Preferred	OTC
vida health	Kurbo by WW	Non-Preferred	OTC
vida health tier 1 prevent/eng	Kurbo by WW	Non-Preferred	OTC
vida health tier 1 prevent/not	Kurbo by WW	Non-Preferred	OTC
vida health tier 2 chronic	Kurbo by WW	Non-Preferred	OTC
vida health tier 3 obesity	Kurbo by WW	Non-Preferred	OTC
vida health tier 4 obesity+	Kurbo by WW	Non-Preferred	OTC
whil app	Kurbo by WW	Non-Preferred	OTC
<b>WW CORE</b>		Non-Preferred	OTC
<b>WW CORE (24 MONTHS)</b>		Non-Preferred	OTC
<b>WW DIGITAL</b>		Non-Preferred	OTC
<b>WW DIGITAL - V2 (50%)</b>		Non-Preferred	OTC
<b>WW DIGITAL 360</b>		Non-Preferred	OTC
<b>*ENZYMES***</b>			
<b>AMPHADASE INJECTION SOLUTION</b>		Non-Preferred	
bromelains oral tablet		Non-Preferred	OTC
<b>HYLENEX INJECTION SOLUTION</b>		Non-Preferred	
papaya enzymes oral tablet chewable		Non-Preferred	OTC
papaya oral tablet		Non-Preferred	OTC
papaya oral tablet chewable		Non-Preferred	OTC
<b>XIAFLEX INJECTION SOLUTION RECONSTITUTED</b>		Non-Preferred	SP
<b>*FARNESYLTRANSFERASE INHIBITORS***</b>			
<b>ZOKINVY ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>*HOMEOPATHIC PRODUCTS***</b>			
<b>4 THRIVE CLEANSING INHALATION OIL</b>		Non-Preferred	OTC
<b>ALKALOL ALLERGY RELIEF NASAL LIQUID</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
arnica montana oral pellet	Oscillococcinum	Non-Preferred	OTC
<b>ARNICARE ARNICA EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>ARNICARE ARNICA EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>ARNICARE ARTHRITIS EXTERNAL CREAM</b>		Non-Preferred	OTC
arnicare arthritis oral tablet dispersible	Zicam Cold Remedy	Non-Preferred	OTC
arnicare arthritis sublingual tablet sublingual	Arnicare Pain Relief	Non-Preferred	OTC
<b>ARNICARE BRUISE EXTERNAL GEL</b>		Non-Preferred	OTC
arnicare external gel	Arnicare Bruise	Non-Preferred	OTC
<b>ARNICARE PAIN RELIEF EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>ARNICARE PAIN RELIEF SUBLINGUAL TABLET SUBLINGUAL</b>		Non-Preferred	OTC
arthritis pain relief sublingual tablet sublingual	Arnicare Pain Relief	Non-Preferred	OTC
<b>AVOCADO REVITALIZING EXTERNAL OIL</b>		Non-Preferred	OTC
<b>AZO YEAST PLUS ORAL TABLET</b>		Non-Preferred	OTC
<b>BERGAMOT SERENITY INHALATION OIL</b>		Non-Preferred	OTC
<b>BIORX SPONIX NAIL EXTERNAL GEL</b>		Non-Preferred	OTC
<b>BODYANEW CLEANSE/DETOX MULTIPK ORAL LIQUID</b>		Non-Preferred	OTC
<b>BREATHE EASY PURIFYING INHALATION OIL</b>		Non-Preferred	OTC
bv treatment vaginal insert		Non-Preferred	OTC
calendula external cream	Arnicare Arnica	Non-Preferred	OTC
calendula external gel	Arnicare Bruise	Non-Preferred	OTC
calendula external ointment	Arnicare Arnica	Non-Preferred	OTC
<b>CALMING INHALATION OIL</b>		Non-Preferred	OTC
<b>CLEARLIFE ALLERGY NASAL NASAL LIQUID</b>		Non-Preferred	OTC
<b>CLEARLIFE ALLERGY ORAL TABLET</b>		Non-Preferred	OTC
coffea cruda oral pellet	Oscillococcinum	Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>COLDCALM SUBLINGUAL TABLET SUBLINGUAL</b>		Non-Preferred	OTC
<b>COLD-EEZE MOUTH/THROAT LOZENGE</b>		Non-Preferred	OTC
<b>COLD-EEZE PLUS COLD &amp; FLU MOUTH/THROAT LOZENGE</b>		Non-Preferred	OTC
<b>COLD-EEZE PLUS DEFENSE MOUTH/THROAT LOZENGE</b>		Non-Preferred	OTC
<b>COPPERFIXX PAIN RELIEF EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>COPPERFIXX PAIN THERAPY EXTERNAL PATCH</b>		Non-Preferred	OTC
cough & cold daytime/kids oral liquid	BodyAnew Cleanse/Detox Multipk	Non-Preferred	OTC
<b>CYCLEASE CRAMP SUBLINGUAL TABLET SUBLINGUAL</b>		Non-Preferred	OTC
drainage oral liquid	BodyAnew Cleanse/Detox Multipk	Non-Preferred	OTC
ear pain relief homeopathic otic solution	Similasan Kids Ear Relief	Non-Preferred	OTC
earache drops otic solution	Similasan Kids Ear Relief	Non-Preferred	OTC
energy inhalation oil	4 Thrive Cleansing	Non-Preferred	OTC
<b>ENGYSTOL IMMUNE SUPPORT ORAL TABLET</b>		Non-Preferred	OTC
<b>EUCALYPTUS INVIGORATING INHALATION OIL</b>		Non-Preferred	OTC
fibromyalgia symptom relief sublingual tablet sublingual	Arnicare Pain Relief	Non-Preferred	OTC
<b>FLORASONE EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>FRANKINCENSE UPLIFTING INHALATION OIL</b>		Non-Preferred	OTC
<b>FREEDOM QUIT SMOKING SYSTEM ORAL KIT</b>		Non-Preferred	OTC
<b>GOOD NITE INHALATION OIL</b>		Non-Preferred	OTC
<b>HYLAFEM PH VAGINAL SUPPOSITORY</b>		Non-Preferred	OTC
ichthammol drawing salve external ointment	Arnicare Arnica	Non-Preferred	OTC
indigestion/bloating relief sublingual tablet sublingual	Arnicare Pain Relief	Non-Preferred	OTC



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
insomnia relief sublingual tablet sublingual	Arnicare Pain Relief	Non-Preferred	OTC
<b>LAVENDER REJUVENATING INHALATION OIL</b>		Non-Preferred	OTC
<b>LEG CRAMP COMPLEX ORAL LIQUID</b>		Non-Preferred	OTC
leg cramp relief sublingual tablet sublingual	Arnicare Pain Relief	Non-Preferred	OTC
leg cramps oral tablet	AZO Yeast Plus	Non-Preferred	OTC
leg cramps pm sublingual tablet sublingual	Arnicare Pain Relief	Non-Preferred	OTC
leg cramps sublingual tablet sublingual	Arnicare Pain Relief	Non-Preferred	OTC
lice treatment spray external solution	Licefreee	Non-Preferred	OTC
<b>LICEFREEE EXTERNAL KIT</b>		Non-Preferred	OTC
<b>LICEFREEE EXTERNAL SOLUTION</b>		Non-Preferred	OTC
<b>LOMA ASTHMA ORAL TABLET</b>		Non-Preferred	OTC
<b>LOMA ECZEMA ORAL TABLET</b>		Non-Preferred	OTC
<b>LOMA LUX ACNEPILL ORAL TABLET</b>		Non-Preferred	OTC
<b>LOMA LUX PSORIASIS ORAL LIQUID</b>		Non-Preferred	OTC
<b>LOMA SINUS/ALLERGY ORAL TABLET</b>		Non-Preferred	OTC
<b>LYMPHOMYOSOT LYMPH SUPPORT ORAL TABLET</b>		Non-Preferred	OTC
<b>MENASTIL EXTERNAL OIL</b>		Non-Preferred	OTC
<b>MENTAL CLARITY INHALATION OIL</b>		Non-Preferred	OTC
<b>MUSCLE CRAMP COMPLEX ORAL LIQUID</b>		Non-Preferred	OTC
<b>MUSCLE THERAPY/ARNICA EXTERNAL GEL</b>		Non-Preferred	OTC
nerve pain relief sublingual tablet sublingual	Arnicare Pain Relief	Non-Preferred	OTC
<b>NEURAGEN EXTERNAL GEL</b>		Non-Preferred	OTC
<b>NEURAGEN PAIN RELIEF EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>NEURAGEN PN EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>OSCILLOCOCCINUM ORAL PELLET</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>OUTDOOR JOE'S RHUS TOX ORAL LIQUID</b>		Non-Preferred	OTC
<b>PEPPERMINT REFRESHING INHALATION OIL</b>		Non-Preferred	OTC
phytolacca decandra oral pellet	Oscillococcinum	Non-Preferred	OTC
<b>PRID EXTERNAL OINTMENT</b>		Non-Preferred	OTC
<b>PROVENT WART EXTERNAL PATCH</b>		Non-Preferred	OTC
<b>PROVENT WART REMOVER EXTERNAL OIL</b>		Non-Preferred	OTC
pulsatilla oral pellet	Oscillococcinum	Non-Preferred	OTC
<b>PURALIN ARTHRITIS FORMULA ORAL TABLET</b>		Non-Preferred	OTC
<b>PURALIN DECONGESTANT ORAL TABLET</b>		Non-Preferred	OTC
<b>PURALIN PM NIGHTTIME SLEEP-AID ORAL TABLET</b>		Non-Preferred	OTC
<b>PURALIN WEIGHT LOSS ORAL TABLET</b>		Non-Preferred	OTC
<b>REBOOST BREATHE EASY NASAL LIQUID</b>		Non-Preferred	OTC
<b>REBOOST ZINC +10 SUBLINGUAL TABLET SUBLINGUAL</b>		Non-Preferred	OTC
<b>REBOOST ZINC +13 ORAL LIQUID</b>		Non-Preferred	OTC
<b>RESTFUL LEGS PM SUBLINGUAL TABLET SUBLINGUAL</b>		Non-Preferred	OTC
<b>RESTFUL LEGS SUBLINGUAL TABLET SUBLINGUAL</b>		Non-Preferred	OTC
<b>SIMILASAN KIDS EAR RELIEF OTIC SOLUTION</b>		Non-Preferred	OTC
<b>SIMILASAN PINK EYE RELIEF KIDS OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>SIMILASAN PINK EYE RELIEF OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
sinus relief sublingual tablet sublingual	Arnicare Pain Relief	Non-Preferred	OTC
skin tag remover external liquid	Arnicare Pain Relief	Non-Preferred	OTC
<b>SLEEP CALM SLEEP RELIEF SUBLINGUAL TABLET SUBLINGUAL</b>		Non-Preferred	OTC
<b>SPASCUPREEL ORAL TABLET</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
stress/exhaustion relief sublingual tablet sublingual	Arnicare Pain Relief	Non-Preferred	OTC
<b>SWEET ALMOND EXTERNAL OIL</b>		Non-Preferred	OTC
<b>TEA TREE PURIFYING INHALATION OIL</b>		Non-Preferred	OTC
<b>THERAWORX FOOT CRAMPS ROLL-ON EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>THERAWORX GLOVE + FOAM EXTERNAL KIT</b>		Non-Preferred	OTC
<b>THERAWORX JOINT RELIEF ROLL-ON EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>THERAWORX KNEE SLEEVE + FOAM EXTERNAL KIT</b>		Non-Preferred	OTC
<b>THERAWORX MUSCLE CRAMP ROLL-ON EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>THERAWORX MUSCLE CRAMPS EXTERNAL FOAM</b>		Non-Preferred	OTC
<b>THERAWORX MUSCLE CRAMPS SPRAY EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>THERAWORX NERVE RELIEF EXTERNAL FOAM</b>		Non-Preferred	OTC
<b>THERAWORX RELIEF EXTERNAL FOAM</b>		Non-Preferred	OTC
<b>THERAWORX RELIEF EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>THERAWORX RELIEF/FOOT CRAMPS EXTERNAL FOAM</b>		Non-Preferred	OTC
<b>TRAUMEEL EXTERNAL OINTMENT</b>		Non-Preferred	
<b>TRAUMEEL ORAL TABLET</b>		Non-Preferred	
<b>T-RELIEF ARNICA + 12 EXTERNAL CREAM</b>		Non-Preferred	OTC
<b>T-RELIEF ARNICA + 12 EXTERNAL GEL</b>		Non-Preferred	OTC
<b>T-RELIEF ARNICA + 12 ORAL LIQUID</b>		Non-Preferred	OTC
<b>T-RELIEF ARNICA + 12 ORAL TABLET</b>		Non-Preferred	OTC
<b>T-RELIEF ARNICA + 12 ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>T-RELIEF ARTHRITIS PAIN EXTERNAL CREAM</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
T-RELIEF ARTHRITIS PAIN ORAL TABLET		Non-Preferred	OTC
T-RELIEF ARTHRITIS MOBILITY EXTERNAL CREAM		Non-Preferred	OTC
T-RELIEF ARTHRITIS MOBILITY ORAL TABLET CHEWABLE		Non-Preferred	OTC
T-RELIEF EXTRA STRENGTH EXTERNAL CREAM		Non-Preferred	OTC
T-RELIEF PAIN RELIEF EXTERNAL CREAM		Non-Preferred	OTC
T-RELIEF PAIN RELIEF EXTERNAL GEL		Non-Preferred	OTC
T-RELIEF SAFE RELIEF ORAL TABLET CHEWABLE		Non-Preferred	OTC
UMCKA COLD+FLU ORAL SYRUP		Non-Preferred	OTC
UMCKA COLDCARE ORAL LIQUID		Non-Preferred	OTC
VEGA ORAL CARE GEL MOUTH/THROAT GEL		Non-Preferred	OTC
VEGA ORAL CARE RECOVERY KIT MOUTH/THROAT KIT		Non-Preferred	OTC
VEGA ORAL CARE RINSE MOUTH/THROAT SOLUTION		Non-Preferred	OTC
WELLMIND CALMING DAY/NIGHT ORAL TABLET		Non-Preferred	OTC
WELLMIND VERTIGO ORAL TABLET		Non-Preferred	
YEAST-GARD ADV HOMEOPATHIC ORAL CAPSULE		Non-Preferred	OTC
YEAST-GARD ADV HOMEOPATHIC VAGINAL SUPPOSITORY		Non-Preferred	OTC
YEAST-GARD ADVANCED DOUCHE VAGINAL SOLUTION		Non-Preferred	OTC
YEAST-GARD FEMININE WASH VAGINAL SOLUTION		Non-Preferred	OTC
YEAST-GARD HOMEOPATHIC VAGINAL GEL		Non-Preferred	OTC
ZEEL ARTHRITIS PAIN RELIEF EXTERNAL OINTMENT		Non-Preferred	OTC
ZEEL ARTHRITIS PAIN RELIEF ORAL TABLET		Non-Preferred	OTC
ZICAM COLD REMEDY ORAL TABLET DISPERSIBLE		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
zinc cold therapy oral tablet chewable	T-Relief Arnica + 12	Non-Preferred	OTC
zinc mouth/throat lozenge	Cold-Eeze	Non-Preferred	OTC
<b>ZYMADERM EXTERNAL SOLUTION</b>		Non-Preferred	OTC
<b>*IMMUNE GLOBULIN IMMUNOSUPPRESSANTS***</b>			
<b>ATGAM INTRAVENOUS SOLUTION</b>		Non-Preferred	SP
<b>THYMOGLOBULIN INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	SP
<b>*IMMUNOMODULATORS - COMBINATIONS***</b>			
<b>VYVGART HYTRULO SUBCUTANEOUS SOLUTION</b>		Non-Preferred	PA; SP; QL
<b>*IMMUNOMODULATORS FOR MYELOYDYSPLASTIC SYNDROMES***</b>			
lenalidomide oral capsule	Revlimid	Non-Preferred	PA; SP; QL
<b>REVLIMID ORAL CAPSULE</b>		Non-Preferred	PA; SP; QL
<b>*INOSINE MONOPHOSPHATE DEHYDROGENASE INHIBITORS***</b>			
<b>CELLCEPT INTRAVENOUS INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	PA; SP
<b>CELLCEPT ORAL CAPSULE</b>		Non-Preferred	PA
<b>CELLCEPT ORAL SUSPENSION RECONSTITUTED</b>		Non-Preferred	PA
<b>CELLCEPT ORAL TABLET</b>		Non-Preferred	PA
mycophenolate mofetil hcl intravenous solution reconstituted	CellCept Intravenous	Non-Preferred	SP
mycophenolate mofetil intravenous solution reconstituted	CellCept Intravenous	Non-Preferred	SP
mycophenolate mofetil oral capsule	CellCept	Preferred	
mycophenolate mofetil oral suspension reconstituted	CellCept	Preferred	PA
mycophenolate mofetil oral tablet	CellCept	Preferred	
mycophenolate sodium oral tablet delayed release	Myfortic	Preferred	
mycophenolic acid oral tablet delayed release	Myfortic	Preferred	

Drug Name	Reference	Status	Notes
<b>MYFORTIC ORAL TABLET DELAYED RELEASE</b>		Non-Preferred	
<b>MYHIBBIN ORAL SUSPENSION</b>		Non-Preferred	PA
<b>*INTERLEUKIN-6 (IL-6) ANTAGONISTS***</b>			
<b>SYLVANT INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	PA; SP
<b>*IRRIGATION SOLUTIONS***</b>			
<b>ARGYLE STERILE WATER IRRIGATION SOLUTION</b>		Non-Preferred	
lactated ringers irrigation solution		Non-Preferred	
<b>PHYSIOLYTE IRRIGATION SOLUTION</b>		Non-Preferred	
<b>PHYSIOSOL IRRIGATION IRRIGATION SOLUTION</b>		Non-Preferred	
ringers irrigation irrigation solution	Tis-U-Sol	Non-Preferred	
sterile water for irrigation irrigation solution	Argyle Sterile Water	Non-Preferred	
<b>TIS-U-SOL IRRIGATION SOLUTION</b>		Non-Preferred	
water for irrigation, sterile irrigation solution	Argyle Sterile Water	Non-Preferred	
<b>*MACROLIDE IMMUNOSUPPRESSANTS***</b>			
<b>ASTAGRAF XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	
<b>ENVARUSUS XR ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	
everolimus oral tablet	Zortress	Non-Preferred	
<b>PROGRAF INTRAVENOUS SOLUTION</b>		Non-Preferred	SP
<b>PROGRAF ORAL CAPSULE</b>		Non-Preferred	
<b>PROGRAF ORAL PACKET</b>		Non-Preferred	
<b>RAPAMUNE ORAL SOLUTION</b>		Non-Preferred	
<b>RAPAMUNE ORAL TABLET</b>		Non-Preferred	
sirolimus oral solution	Rapamune	Preferred	
sirolimus oral tablet	Rapamune	Preferred	
tacrolimus oral capsule	Prograf	Preferred	
<b>ZORTRESS ORAL TABLET</b>		Non-Preferred	

Drug Name	Reference	Status	Notes
<b>*MISC NATURAL PRODUCTS***</b>			
acai+superfruit/green tea oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
<b>ALLERGY RELEAF SYSTEM ORAL</b>		Non-Preferred	OTC
<b>ALLERGY RELEAF SYSTEM ORAL KIT</b>		Non-Preferred	OTC
<b>ARTHRI-FLEX ADVANTAGE ORAL TABLET</b>		Non-Preferred	OTC
<b>BERGACOR PLUS ORAL TABLET</b>		Non-Preferred	OTC
black cohosh menopause complex oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
blood sugar balance oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
<b>BLUES AWAY ORAL LIQUID THERAPY PACK</b>		Non-Preferred	OTC
<b>BODY CHOICE HOODIA WEIGHT LOSS ORAL LIQUID</b>		Non-Preferred	OTC
bowel support oral capsule extended release		Non-Preferred	OTC
<b>BRAINSTRONG MEMORY SUPPORT ORAL TABLET</b>		Non-Preferred	OTC
<b>BUG ITCH RELEAF EXTERNAL SOLUTION</b>		Non-Preferred	OTC
<b>CORTISOL MANAGER ORAL TABLET</b>		Non-Preferred	OTC
<b>COSAMIN VERDE FOR JOINT HEALTH ORAL TABLET</b>		Non-Preferred	OTC
<b>CRAMP RELEAF ORAL LIQUID</b>		Non-Preferred	OTC
cranberry/probiotic oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
<b>CRANBLADDER RELEAF ORAL LIQUID</b>		Non-Preferred	OTC
<b>CRAN-B-OTC ORAL LIQUID</b>		Non-Preferred	OTC
<b>CURCUMAX PRO ORAL TABLET</b>		Non-Preferred	OTC
<b>CYSTEX URINARY HEALTH ORAL LIQUID</b>		Non-Preferred	OTC
<b>DEEP HEALTH ORAL LIQUID</b>		Non-Preferred	OTC
<b>DEEP SLEEP ORAL LIQUID</b>		Non-Preferred	OTC
<b>EARLY ALERT ORAL LIQUID</b>		Non-Preferred	OTC
eczema & psoriasis spray oral liquid	Body Choice Hoodia Weight Loss	Non-Preferred	OTC
elderberry immune complex oral tablet chewable	Esberitox	Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>ESBERITOX ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
essiac tonic oral liquid	Body Choice Hoodia Weight Loss	Non-Preferred	OTC
<b>ESTROVEN + ENERGY MAX STRENGTH ORAL TABLET</b>		Non-Preferred	OTC
flevoxin oral tablet extended release		Non-Preferred	OTC
<b>FLEXCIN MOTION EXTERNAL LOTION</b>		Non-Preferred	OTC
garlin oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
<b>GI BALANCE ORAL POWDER</b>		Non-Preferred	OTC
glucosamine chond cmp advanced oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
glucosamine chond cmp double oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
glucosamine chond cmp triple oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
glucosamine chond complex/msm oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
glucosamine chond double str oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
glucosamine chond msm formula oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
glucosamine chondroitin adv oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
glucosamine chondroitin msm oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
glucosamine chondroitin triple oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
glucosamine-chondroitin ds oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
glucos-chondroit-msm complex oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
glucos-chondroit-msm-turm cmpl oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
glucos-chondroit-msm-turmeric oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
<b>GLUTALOEMINE ORAL POWDER</b>		Non-Preferred	OTC
green tea oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
<b>HERBAPROFEN ORAL LIQUID</b>		Non-Preferred	OTC
<b>HOT FLASH EX ORAL TABLET</b>		Non-Preferred	OTC
<b>IBEROGAST ORAL LIQUID</b>		Non-Preferred	OTC



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
ig 26 df oral powder	GI Balance	Non-Preferred	OTC
ig 26 plus df oral powder	GI Balance	Non-Preferred	OTC
<b>IVY ITCH RELEAF EXTERNAL SOLUTION</b>		Non-Preferred	OTC
<b>JUICEFESTIV ORAL CAPSULE THERAPY PACK</b>		Non-Preferred	OTC
<b>KINDERMED COUGH PLUS INFANTS ORAL SYRUP</b>		Non-Preferred	OTC
<b>KINDERMED NIGHT COUGH INFANTS ORAL SYRUP</b>		Non-Preferred	OTC
<b>LANSINOH HERBAL POSTPARTUM EXTERNAL SOLUTION</b>		Non-Preferred	OTC
<b>LANSINOH POSTPARTUM RECOVERY EXTERNAL KIT</b>		Non-Preferred	OTC
laxative formula oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
leg vein & circulation oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
lipidsave oral capsule delayed release		Non-Preferred	OTC
<b>LOVIRAL ORAL LIQUID</b>		Non-Preferred	OTC
<b>LUNG TONIC ORAL LIQUID</b>		Non-Preferred	OTC
<b>LYDIA PINKHAM ORAL LIQUID</b>		Non-Preferred	OTC
<b>LYDIA PINKHAM ORAL TABLET</b>		Non-Preferred	OTC
<b>LYMPHATONIC ORAL LIQUID</b>		Non-Preferred	OTC
<b>MENOPAUTONIC ORAL LIQUID</b>		Non-Preferred	OTC
mens potent formula oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
<b>METABO-STYLE ORAL TABLET</b>		Non-Preferred	OTC
<b>MIDNITE FOR MENOPAUSE ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>MIDNITE ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>MIDNITE PM ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>MILKFLOW ORAL PACKET</b>		Non-Preferred	OTC
miseflex oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
miseflex-c oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
<b>MORNING SICKLESS ORAL KIT</b>		Non-Preferred	OTC
<b>MORNINGSICKLESS MOUTH/THROAT LOZENGE</b>		Non-Preferred	OTC
<b>MOUTH TONIC ORAL LIQUID</b>		Non-Preferred	OTC
mullein garlic ear drops otic solution		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>NATURAL EMU RELIEF EXTERNAL GEL</b>		Non-Preferred	OTC
<b>NEURIVA ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>NIX LICE PREVENTION EXTERNAL LIQUID</b>		Non-Preferred	OTC
octacosanol oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
<b>ORGANIX PHYTOFOOD ORAL POWDER</b>		Non-Preferred	OTC
orthodiet oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
osha root cough oral syrup	KinderMed Cough Plus Infants	Non-Preferred	OTC
<b>OSTEO BI-FLEX ADV TRIPLE ST ORAL TABLET</b>		Non-Preferred	OTC
<b>OSTEO BI-FLEX TRIPLE STRENGTH ORAL TABLET</b>		Non-Preferred	OTC
<b>OSTEO BI-FLEX/5-LOXIN ADVANCED ORAL TABLET</b>		Non-Preferred	OTC
<b>PHYTOCILLIN ORAL LIQUID</b>		Non-Preferred	OTC
<b>PRO NUTRIENTS FRUIT &amp; VEGGIE ORAL TABLET</b>		Non-Preferred	OTC
<b>PROVENT SKIN TAG REMOVER EXTERNAL PATCH</b>		Non-Preferred	OTC
<b>PROVENT VERTIGO X EXTERNAL OIL</b>		Non-Preferred	OTC
<b>RELAX &amp; SLEEP ORAL TABLET</b>		Non-Preferred	OTC
<b>RELAXMAX ORAL POWDER</b>		Non-Preferred	OTC
<b>RELIZEN ORAL TABLET</b>		Non-Preferred	OTC
<b>RESPIRATONIC ORAL LIQUID</b>		Non-Preferred	OTC
<b>RISTELA ORAL TABLET</b>		Non-Preferred	OTC
<b>SAMBUCUS COUGH RELIEF + IMMUNE ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>SAMBUCUS ELDERBERRY IMMUNE KID ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>SAMBUCUS ELDERBERRY IMMUNE ORAL SYRUP</b>		Non-Preferred	OTC
<b>SAMBUCUS ELDERBERRY IMMUNE ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>SAMBUCUS ELDERBERRY MOUTH/THROAT LOZENGE</b>		Non-Preferred	OTC
<b>SAMBUCUS ELDERBERRY VITAMIN C MOUTH/THROAT LOZENGE</b>		Non-Preferred	OTC
<b>SAMBUCUS ELDERBERRY ZINC MOUTH/THROAT LOZENGE</b>		Non-Preferred	OTC
<b>SAMBUCUS KIDS COUGH + IMMUNE ORAL SYRUP</b>		Non-Preferred	OTC
<b>SAMBUCUS KIDS COUGH + IMMUNE ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>SAMBUCUS RELIEF ORAL SYRUP</b>		Non-Preferred	OTC
<b>SERENOL ORAL TABLET</b>		Non-Preferred	OTC
<b>SINGERS SAVING GRACE THROAT ORAL LIQUID</b>		Non-Preferred	OTC
sleep tonite-valerian oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
<b>SLEEP'N RESTORE ORAL TABLET</b>		Non-Preferred	OTC
<b>SOOTHING NIGHT ORAL POWDER</b>		Non-Preferred	OTC
stomach settle mouth/throat lozenge	Morningsickless	Non-Preferred	OTC
stress & anxiety day/night oral tablet therapy pack		Non-Preferred	OTC
<b>STRESS RELEAF ORAL LIQUID</b>		Non-Preferred	OTC
super energy oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
superior prostate oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
<b>THERAWORX PROTECT U-PAK EXTERNAL KIT</b>		Non-Preferred	OTC
total body cleanse oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
triple strength joint health oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
tumersaid oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
<b>UPSPRING MILKFLOW SUPPLEMENT ORAL POWDER</b>		Non-Preferred	OTC
<b>UPSPRING STOMACH SETTLE MOUTH/THROAT LOZENGE</b>		Non-Preferred	OTC
<b>URINOZINC PLUS ORAL TABLET</b>		Non-Preferred	OTC
varivoda oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC
vertigox external oil	ProVent Vertigo X	Non-Preferred	OTC
water pill oral tablet	Arthri-Flex Advantage	Non-Preferred	OTC

Drug Name	Reference	Status	Notes
YUMVS BEET ROOT-TART CHERRY ORAL TABLET CHEWABLE		Non-Preferred	OTC
ZARBEES ALL-IN-ONE ORAL SYRUP		Non-Preferred	OTC
ZARBEES CGH/MUCUS AGV/IVY BABY ORAL SYRUP		Non-Preferred	OTC
ZARBEES CGH/MUCUS HNY/IVY CHLD ORAL SYRUP		Non-Preferred	OTC
ZARBEES COMP COUGH+IMMUNE BABY ORAL SYRUP		Non-Preferred	OTC
ZARBEES COUGH AGAVE/THYME BABY ORAL SYRUP		Non-Preferred	OTC
ZARBEES COUGH DK HONEY CHILD ORAL SYRUP		Non-Preferred	OTC
ZARBEES COUGH/MUCUS & IMMUNE ORAL SYRUP		Non-Preferred	OTC
ZARBEES COUGH+IMMUNE ORAL SYRUP		Non-Preferred	OTC
ZARBEES THROAT SPRAY CHILDRENS ORAL LIQUID		Non-Preferred	OTC
<b>*MISCELLANEOUS THERAPEUTIC CLASSES***</b>			
ammonia inhalants inhalation inhaler		Non-Preferred	OTC
chlorophyll-alfalfa oral tablet		Non-Preferred	OTC
CHLOROXYGEN ORAL CAPSULE		Non-Preferred	OTC
CHLOROXYGEN ORAL CONCENTRATE		Non-Preferred	OTC
ENNDS ORAL TABLET		Non-Preferred	OTC
gelatin oral capsule		Non-Preferred	OTC
<b>*MONOCLONAL ANTIBODIES***</b>			
ENSPRYNG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE		Preferred	PA; SP; QL
GAMIFANT INTRAVENOUS SOLUTION		Non-Preferred	PA; SP
SIMULECT INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	
UPLIZNA INTRAVENOUS SOLUTION		Preferred	PA; QL

Drug Name	Reference	Status	Notes
<b>*NEONATAL FC RECEPTOR (FCRN) ANTAGONISTS***</b>			
RYSTIGGO SUBCUTANEOUS SOLUTION		Non-Preferred	PA; SP; QL
VYVGART INTRAVENOUS SOLUTION		Non-Preferred	PA; SP; QL
<b>*PATIENT ASSESSMENT SERVICES - NO DRUG DISPENSED***</b>			
eua patient assessment		Non-Preferred	
<b>*PERITONEAL DIALYSIS SOLUTIONS***</b>			
DELFLEX-LC/1.5% DEXTROSE INTRAPERITONEAL SOLUTION		Non-Preferred	
DELFLEX-LC/2.5% DEXTROSE INTRAPERITONEAL SOLUTION		Non-Preferred	
DELFLEX-LC/4.25% DEXTROSE INTRAPERITONEAL SOLUTION		Non-Preferred	
DELFLEX-SM/1.5% DEXTROSE INTRAPERITONEAL SOLUTION		Non-Preferred	
DELFLEX-SM/2.5% DEXTROSE INTRAPERITONEAL SOLUTION		Non-Preferred	
DIANEAL LOW CALCIUM/1.5% DEX INTRAPERITONEAL SOLUTION		Non-Preferred	
DIANEAL LOW CALCIUM/2.5% DEX INTRAPERITONEAL SOLUTION		Non-Preferred	
DIANEAL LOW CALCIUM/4.25% DEX INTRAPERITONEAL SOLUTION		Non-Preferred	
DIANEAL PD-2/1.5% DEXTROSE INTRAPERITONEAL SOLUTION		Non-Preferred	
DIANEAL PD-2/2.5% DEXTROSE INTRAPERITONEAL SOLUTION		Non-Preferred	
DIANEAL PD-2/4.25% DEXTROSE INTRAPERITONEAL SOLUTION		Non-Preferred	
EXTRANEAL INTRAPERITONEAL SOLUTION		Non-Preferred	
ULTRABAG/DIANEAL PD-2/1.5% DEX INTRAPERITONEAL SOLUTION		Non-Preferred	

Drug Name	Reference	Status	Notes
ULTRABAG/DIANEAL PD-2/2.5% DEX INTRAPERITONEAL SOLUTION		Non-Preferred	
ULTRABAG/DIANEAL PD-2/4.25%DEX INTRAPERITONEAL SOLUTION		Non-Preferred	
ULTRABAG/DIANEAL/2.5% DEXTROSE INTRAPERITONEAL SOLUTION		Non-Preferred	
ULTRABAG/DIANEAL/4.25% DEX INTRAPERITONEAL SOLUTION		Non-Preferred	
<b>*PIK3CA-RELATED OVERGROWTH SPECTRUM AGENTS - PI3K INHIB***</b>			
VIJOICE ORAL PACKET		Non-Preferred	PA; SP; QL
VIJOICE ORAL TABLET THERAPY PACK		Non-Preferred	PA; SP; QL
<b>*POTASSIUM REMOVING AGENTS***</b>			
KIONEX COMBINATION SUSPENSION		Preferred	
LOKELMA ORAL PACKET		Preferred	QL
sodium polystyrene sulfonate oral powder		Non-Preferred	
SPS (SODIUM POLYSTYRENE SULF) COMBINATION SUSPENSION		Preferred	
SPS (SODIUM POLYSTYRENE SULF) RECTAL SUSPENSION		Preferred	
VELTASSA ORAL PACKET		Non-Preferred	QL
<b>*PROSTAGLANDINS***</b>			
PROSTIN VR INJECTION SOLUTION		Non-Preferred	
<b>*PURINE ANALOGS***</b>			
AZASAN ORAL TABLET		Preferred	
azathioprine oral tablet	Azasan	Preferred	
azathioprine sodium injection solution reconstituted		Non-Preferred	
IMURAN ORAL TABLET		Non-Preferred	
<b>*ROCK INHIBITORS***</b>			
REZUROCK ORAL TABLET		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
<b>*SCLEROSING AGENTS***</b>			
ASCLERA INTRAVENOUS SOLUTION		Non-Preferred	
ETHAMOLIN INTRAVENOUS SOLUTION		Non-Preferred	
sodium tetradecyl sulfate intravenous solution	Sotradecol	Non-Preferred	
SOTRADECOL INTRAVENOUS SOLUTION		Non-Preferred	
VARITHENA INTRAVENOUS FOAM		Non-Preferred	
<b>*SELECTIVE T-CELL COSTIMULATION BLOCKERS***</b>			
NULOJIX INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA
<b>*THICKENED PRODUCTS***</b>			
THICK-IT ORAL LIQUID		Non-Preferred	OTC
<b>*TYPE I INTERFERON (IFN) RECEPTOR ANTAGONISTS***</b>			
SAPHNELO INTRAVENOUS SOLUTION		Non-Preferred	PA; SP; QL
<b>*UREMIC PRURITUS AGENTS***</b>			
KORSUVA INTRAVENOUS SOLUTION		Non-Preferred	PA
<b>*MOUTH/THROAT/DENTAL AGENTS*</b>			
<b>*ANESTHETICS TOPICAL ORAL - COMBINATIONS***</b>			
CEPACOL DUAL RELIEF MOUTH/THROAT LIQUID		Non-Preferred	OTC
CEPACOL DUAL RELIEF ORAL LIQUID		Non-Preferred	OTC
CEPACOL EXTRA STRENGTH MOUTH/THROAT LOZENGE		Non-Preferred	OTC
CEPACOL SORE THROAT EX ST MOUTH/THROAT LOZENGE		Non-Preferred	OTC
CEPACOL SORE THROAT MAX NUMB MOUTH/THROAT LOZENGE		Non-Preferred	OTC
CEPACOL SORE THROAT MOUTH/THROAT LOZENGE		Non-Preferred	OTC
CEPACOL SORE THROAT SPRAY MOUTH/THROAT LIQUID		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
CHLORASEPTIC MAX SORE THROAT MOUTH/THROAT LOZENGE		Non-Preferred	OTC
CHLORASEPTIC MOUTH/THROAT LOZENGE		Non-Preferred	OTC
CHLORASEPTIC SORE THROAT MOUTH/THROAT LOZENGE		Non-Preferred	OTC
G-BUCAL-C MOUTH/THROAT SOLUTION		Non-Preferred	OTC
GILTUSS BUCALSEP MOUTH/THROAT LIQUID		Non-Preferred	OTC
gumsol mouth/throat liquid		Non-Preferred	OTC
MUCINEX INSTASOO THE SORE THRT MOUTH/THROAT LIQUID		Non-Preferred	OTC
MUCINEX INSTASOO THE THROAT/PN MOUTH/THROAT LIQUID		Non-Preferred	OTC
ORAJEL 2X TOOTHACHE & GUM MOUTH/THROAT GEL		Non-Preferred	OTC
ORAJEL 2X TOOTHACHE RINSE MOUTH/THROAT LIQUID		Non-Preferred	OTC
ORAJEL 3X TOOTHACHE & GUM MOUTH/THROAT GEL		Non-Preferred	OTC
ORASEP MOUTH/THROAT SOLUTION		Non-Preferred	OTC
sore throat mouth/throat lozenge 15-3.6 mg	Cepacol Sore Throat Ex St	Non-Preferred	OTC
sore throat mouth/throat lozenge 6-10 mg	Chloraseptic	Preferred	OTC
<b>*ANESTHETICS TOPICAL ORAL***</b>			
ALLEVACAINE MOUTH/THROAT SOLUTION		Non-Preferred	OTC
ANBESOL MAXIMUM STRENGTH MOUTH/THROAT GEL		Non-Preferred	OTC
ANBESOL MAXIMUM STRENGTH MOUTH/THROAT LIQUID		Non-Preferred	OTC
AVERTEAX MOUTH/THROAT OINTMENT		Non-Preferred	OTC
BABY ANBESOL MOUTH/THROAT GEL		Non-Preferred	OTC
baby teething mouth/throat gel	Baby Anbesol	Non-Preferred	OTC



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
baby teething pain medicine mouth/throat gel	Baby Anbesol	Non-Preferred	OTC
<b>BENZODENT MOUTH/THROAT CREAM</b>		Non-Preferred	OTC
<b>CANKERMELTS MOUTH/THROAT DISK</b>		Non-Preferred	OTC
complete toothache kit mouth/throat solution		Non-Preferred	OTC
<b>DENTEK INSTANT PAIN RELIEF ADV MOUTH/THROAT LIQUID</b>		Non-Preferred	OTC
<b>DENTS TOOTHACHE MOUTH/THROAT GUM</b>		Non-Preferred	OTC
<b>HURRICAIN MOUTH/THROAT AEROSOL</b>		Non-Preferred	OTC
<b>HURRICAIN MOUTH/THROAT GEL</b>		Non-Preferred	OTC
<b>HURRICAIN MOUTH/THROAT SOLUTION</b>		Non-Preferred	OTC
<b>HURRICAIN ONE MOUTH/THROAT SOLUTION</b>		Non-Preferred	OTC
<b>HURRICANE SNAP-N-GO MOUTH/THROAT SWAB</b>		Non-Preferred	OTC
<b>HURRIPAK STARTER KIT MOUTH/THROAT KIT</b>		Non-Preferred	OTC
instant oral pain relief max mouth/throat gel	Anbesol Maximum Strength	Non-Preferred	OTC
intense toothache pain relief mouth/throat gel	Anbesol Maximum Strength	Non-Preferred	OTC
lidocaine hcl mouth/throat solution		Preferred	QL
lidocaine viscous hcl mouth/throat solution		Preferred	QL
<b>LOLLICAIN MOUTH/THROAT GEL</b>		Non-Preferred	OTC
<b>ORA-FILM MOUTH/THROAT STRIP</b>		Non-Preferred	OTC
oral analgesic max st mouth/throat gel	Anbesol Maximum Strength	Non-Preferred	OTC
oral analgesic max st mouth/throat liquid	Anbesol Maximum Strength	Non-Preferred	OTC
oral analgesic max st mouth/throat paste		Non-Preferred	OTC
oral anesthetic mouth/throat paste		Non-Preferred	OTC
<b>ORAMAGIC PLUS MOUTH/THROAT SUSPENSION RECONSTITUTED</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
ZILACTIN BABY MOUTH/THROAT GEL		Non-Preferred	OTC
ZILACTIN MOUTH/THROAT GEL		Non-Preferred	OTC
<b>*ANTI-INFECTIVES - THROAT***</b>			
clotrimazole mouth/throat troche		Preferred	QL
GLY-OXIDE MOUTH/THROAT SOLUTION		Non-Preferred	OTC
nystatin mouth/throat suspension		Preferred	QL
ORAJEL MOUTH SORES RINSE MOUTH/THROAT SOLUTION		Non-Preferred	OTC
ORAVIG BUCCAL TABLET		Non-Preferred	
PEROX-A-MINT MOUTH/THROAT SOLUTION		Non-Preferred	OTC
PEROXYL EXTERNAL SOLUTION		Non-Preferred	OTC
PEROXYL MOUTH/THROAT SOLUTION		Non-Preferred	OTC
PEROXYL SPOT TREATMENT MOUTH/THROAT GEL		Non-Preferred	OTC
<b>*ANTISEPTIC COMBINATIONS - MOUTH/THROAT***</b>			
CHLORASEPTIC MAX SORE THROAT MOUTH/THROAT LIQUID		Non-Preferred	OTC
<b>*ANTISEPTICS - MOUTH/THROAT***</b>			
BETADINE ANTISEPTIC GARGLE MOUTH/THROAT SOLUTION		Non-Preferred	OTC
BETADINE ANTISEPTIC RINSE MOUTH/THROAT SOLUTION		Non-Preferred	OTC
CHLORASEPTIC WARM SORE THROAT MOUTH/THROAT LIQUID		Preferred	OTC
chlorhexidine gluconate mouth/throat solution	Periogard	Preferred	QL
MUCINEX INSTASOOTHE THROAT/CMF MOUTH/THROAT LOZENGE		Non-Preferred	OTC
MUCINEX INSTASOOTHE THROAT/PN MOUTH/THROAT LOZENGE		Non-Preferred	OTC
PERIDEX MOUTH/THROAT SOLUTION		Non-Preferred	QL

Drug Name	Reference	Status	Notes
PERIOGARD MOUTH/THROAT SOLUTION		Preferred	QL
ST-37 MOUTH/THROAT LIQUID		Non-Preferred	OTC
TRIAMINIC SORE THROAT MOUTH/THROAT SOLUTION		Non-Preferred	OTC
<b>*DENTAL PRODUCTS - COMBINATIONS***</b>			
denta 5000 plus sensitive dental gel	Fluoridex Sensitivity Relief	Non-Preferred	
FLUORIDEX SENSITIVITY RELIEF DENTAL GEL		Non-Preferred	
LISTERINE ESSENTIAL CARE DENTAL GEL		Non-Preferred	OTC
PREVIDENT 5000 ENAMEL PROTECT DENTAL GEL		Non-Preferred	
PREVIDENT 5000 SENSITIVE DENTAL GEL		Non-Preferred	
sodium fluoride 5000 enamel dental gel	Fluoridex Sensitivity Relief	Non-Preferred	
sodium fluoride 5000 sensitive dental gel	Fluoridex Sensitivity Relief	Non-Preferred	
<b>*DENTAL PRODUCTS***</b>			
PLAX MOUTH/THROAT LIQUID		Non-Preferred	OTC
<b>*DENTAL WHITENERS***</b>			
NUVORAWHITE MOUTH/THROAT LOZENGE		Non-Preferred	OTC
<b>*DRY MOUTH AGENTS AND ARTIFICIAL SALIVA***</b>			
ACT DRY MOUTH MOISTURIZING MOUTH/THROAT GUM		Non-Preferred	OTC
ACT DRY MOUTH MOUTH/THROAT LOZENGE		Non-Preferred	OTC
BIOTENE DRY MOUTH MOISTURIZING MOUTH/THROAT SOLUTION		Non-Preferred	OTC
BIOTENE DRY MOUTH MOUTH/THROAT GUM		Non-Preferred	OTC
BIOTENE DRY MOUTH MOUTH/THROAT LOZENGE		Non-Preferred	OTC
BIOTENE ORALBALANCE DRY MOUTH MOUTH/THROAT GEL		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>BIOTENE PBF DRY MOUTH MOUTH/THROAT GUM</b>		Non-Preferred	OTC
<b>CAPHOSOL MOUTH/THROAT SOLUTION</b>		Non-Preferred	
dry mouth drops mouth/throat lozenge	ACT Dry Mouth	Non-Preferred	OTC
<b>FRESHMELTS MOUTH/THROAT LOZENGE</b>		Non-Preferred	OTC
<b>MIGHTEAFLOW MOUTH/THROAT GUM</b>		Non-Preferred	OTC
<b>MOI-STIR MOUTH/THROAT SOLUTION</b>		Non-Preferred	OTC
<b>MOUTH KOTE MOUTH/THROAT SOLUTION</b>		Non-Preferred	OTC
<b>MOUTH KOTE REMINT MOUTH/THROAT SOLUTION</b>		Non-Preferred	OTC
oral relief for dry mouth mouth/throat gel	Biotene OralBalance Dry Mouth	Non-Preferred	OTC
oral relief for dry mouth mouth/throat kit		Non-Preferred	OTC
oral relief for dry mouth mouth/throat lozenge	ACT Dry Mouth	Non-Preferred	OTC
oral relief spray mouth/throat solution	Biotene Dry Mouth Moisturizing	Non-Preferred	OTC
<b>SALESE/XYLITOL MOUTH/THROAT LOZENGE</b>		Non-Preferred	OTC
<b>SALIVASURE MOUTH/THROAT LOZENGE</b>		Non-Preferred	OTC
<b>THERABREATH DRY MOUTH MOUTH/THROAT LOZENGE</b>		Non-Preferred	OTC
<b>XYLIGEL MOUTH/THROAT GEL</b>		Non-Preferred	OTC
<b>XYLIMELTS MOUTH/THROAT DISK</b>		Non-Preferred	OTC
xylitol chewing gum mouth/throat gum		Non-Preferred	OTC
<b>*FLUORIDE DENTAL PRODUCTS***</b>			
<b>ACT ANTICAVITY FLUORIDE RINSE MOUTH/THROAT SOLUTION</b>		Non-Preferred	OTC
<b>ACT KIDS ANTICAVITY FLUORIDE MOUTH/THROAT SOLUTION</b>		Non-Preferred	OTC
<b>ACT RESTORING FLUORIDE RINSE MOUTH/THROAT SOLUTION</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>ACT TOTAL CARE DRY MOUTH MOUTH/THROAT SOLUTION</b>		Non-Preferred	OTC
<b>ACT TOTAL CARE MOUTH/THROAT SOLUTION</b>		Non-Preferred	OTC
<b>ACT TOTAL CARE SENSITIVE MOUTH/THROAT SOLUTION</b>		Non-Preferred	OTC
<b>CLINPRO 5000 DENTAL PASTE</b>		Non-Preferred	QL
<b>CREST COMPLETE MOUTH/THROAT PASTE</b>		Non-Preferred	OTC
<b>CREST PRO-HEALTH COMPLETE MOUTH/THROAT SOLUTION</b>		Non-Preferred	OTC
<b>DENTA 5000 PLUS DENTAL CREAM</b>		Preferred	QL
<b>DENTAGEL DENTAL GEL</b>		Preferred	QL
<b>EASYGEL DENTAL GEL</b>		Non-Preferred	
fluoride mouth rinse mouth/throat solution	Crest Pro-Health Complete	Non-Preferred	OTC
<b>FLUORIDEX DAILY RENEWAL MOUTH/THROAT CONCENTRATE</b>		Non-Preferred	
<b>FLUORIDEX DENTAL PASTE</b>		Non-Preferred	QL
<b>FLUORIDEX ENHANCED WHITENING DENTAL PASTE</b>		Non-Preferred	QL
fraiche 5000 dental dental gel	DentaGel	Preferred	QL
fraiche rinse mouth/throat concentrate	PerioMed	Preferred	OTC
<b>GEL-KAM DENTAL GEL</b>		Non-Preferred	OTC
<b>JUST FOR KIDS DENTAL GEL</b>		Non-Preferred	OTC
<b>LISTERINE TOTAL CARE MOUTH/THROAT SOLUTION</b>		Non-Preferred	OTC
<b>LISTERINE TOTAL CARE ZERO MOUTH/THROAT SOLUTION</b>		Non-Preferred	OTC
<b>OMNI GEL DENTAL GEL</b>		Non-Preferred	OTC
<b>PARODONTAX MOUTH/THROAT PASTE</b>		Non-Preferred	OTC
<b>PERIOMED MOUTH/THROAT CONCENTRATE</b>		Preferred	OTC
<b>PREVIDENT 5000 BOOSTER PLUS DENTAL PASTE</b>		Non-Preferred	QL
<b>PREVIDENT 5000 DRY MOUTH DENTAL GEL</b>		Non-Preferred	QL
<b>PREVIDENT 5000 KIDS DENTAL PASTE</b>		Non-Preferred	QL

Drug Name	Reference	Status	Notes
<b>PREVIDENT 5000 ORTHO DEFENSE DENTAL PASTE</b>		Non-Preferred	QL
<b>PREVIDENT 5000 PLUS DENTAL CREAM</b>		Non-Preferred	QL
<b>PREVIDENT DENTAL GEL</b>		Non-Preferred	QL
<b>PREVIDENT MOUTH/THROAT SOLUTION</b>		Non-Preferred	
<b>SENSODYNE COMPLETE PROTECTION MOUTH/THROAT PASTE</b>		Non-Preferred	OTC
<b>SENSODYNE RAPID RELIEF MOUTH/THROAT PASTE</b>		Non-Preferred	OTC
<b>SENSODYNE REPAIR &amp; PROTECT MOUTH/THROAT PASTE</b>		Non-Preferred	OTC
sf 5000 plus dental cream	Denta 5000 Plus	Preferred	QL
sf dental gel	DentaGel	Preferred	QL
sodium fluoride 5000 plus dental cream	Denta 5000 Plus	Preferred	QL
sodium fluoride 5000 ppm dental cream	Denta 5000 Plus	Preferred	QL
sodium fluoride 5000 ppm dental gel	DentaGel	Preferred	QL
sodium fluoride 5000 ppm dental paste	Clinpro 5000	Non-Preferred	QL
sodium fluoride dental cream	Denta 5000 Plus	Preferred	QL
sodium fluoride dental gel	DentaGel	Preferred	QL
sodium fluoride mouth/throat solution	PreviDent	Non-Preferred	
stannous fluoride rinse mouth/throat liquid		Non-Preferred	OTC
<b>THERABREATH ORAL RINSE MOUTH/THROAT SOLUTION</b>		Non-Preferred	OTC
<b>*LOZENGE - COMBINATIONS***</b>			
<b>CEPACOL SORE THROAT &amp; COUGH MOUTH/THROAT LOZENGE</b>		Non-Preferred	AL; OTC
<b>CHLORASEPTIC TOTAL MOUTH/THROAT LOZENGE</b>		Non-Preferred	AL; OTC
<b>DIABETIC TUSSIN THROAT &amp; COUGH MOUTH/THROAT LOZENGE</b>		Non-Preferred	AL; OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>MUCINEX INSTASOOTHE THROAT/CGH MOUTH/THROAT LOZENGE</b>		Non-Preferred	OTC
sore throat & cough lozenges mouth/throat lozenge	Cepacol Sore Throat & Cough	Non-Preferred	AL; OTC
<b>SUCRETS SORE THRT/CGH/DRY MOU MOUTH/THROAT LOZENGE</b>		Non-Preferred	OTC
<b>SUCRETS SORETHROAT/COUGH MOUTH/THROAT LOZENGE</b>		Non-Preferred	OTC
<b>*LOZENGES***</b>			
<b>CEPACOL FIZZLERS MOUTH/THROAT TABLET DISPERSIBLE</b>		Non-Preferred	OTC
<b>CEPACOL REGULAR STRENGTH MOUTH/THROAT LOZENGE</b>		Non-Preferred	OTC
<b>CEPACOL SORE THROAT MOUTH/THROAT LOZENGE</b>		Non-Preferred	OTC
<b>CHLORASEPTIC WARM SORE THROAT MOUTH/THROAT LOZENGE</b>		Non-Preferred	OTC
cough drops mouth/throat lozenge 10 mg, 6.5 mg, 7 mg, 7.6 mg, 8 mg		Preferred	AL; OTC
cough drops mouth/throat lozenge 2.7 mg, 3.1 mg, 5 mg, 5.8 mg, 7.5 mg		Non-Preferred	AL; OTC
cough drops mouth/throat lozenge 5.4 mg	Cepacol Sore Throat	Non-Preferred	AL; OTC
<b>DADS MENTHOL THROAT DROP MOUTH/THROAT LOZENGE</b>		Non-Preferred	AL; OTC
<b>FRUIT FROSTERS MOUTH/THROAT LOZENGE</b>		Non-Preferred	AL; OTC
<b>LUDENS THROAT DROPS MOUTH/THROAT LOZENGE</b>		Non-Preferred	OTC
medikoff drops mouth/throat lozenge		Non-Preferred	AL; OTC
<b>RICOLA CHERRY HONEY HERB MOUTH/THROAT LOZENGE</b>		Non-Preferred	AL; OTC
sore throat lollipops mouth/throat lozenge on a handle		Non-Preferred	OTC
<b>SUCRETS SORE THROAT MOUTH/THROAT LOZENGE</b>		Non-Preferred	OTC
<b>VICKS VAPODROPS MOUTH/THROAT LOZENGE</b>		Non-Preferred	AL; OTC

Drug Name	Reference	Status	Notes
<b>*MOUTHWASHES***</b>			
antiseptic mouth rinse mouth/throat liquid	Astring-O-Sol	Non-Preferred	OTC
antiseptic mouthrinse mouth/throat liquid	Astring-O-Sol	Non-Preferred	OTC
<b>ASTRING-O-SOL MOUTH/THROAT LIQUID</b>		Non-Preferred	OTC
<b>BIOTENE DRY MOUTH GENTLE MOUTH/THROAT LIQUID</b>		Non-Preferred	OTC
<b>BIOTENE DRY MOUTH MOUTH/THROAT LIQUID</b>		Non-Preferred	OTC
<b>BIOTENE PBF DRY MOUTH MOUTH/THROAT LIQUID</b>		Non-Preferred	OTC
<b>CEPACOL ANTIBACTERIAL MOUTH/THROAT LIQUID</b>		Non-Preferred	OTC
<b>CEPACOL MOUTHWASH/GARGLE MOUTH/THROAT LIQUID</b>		Non-Preferred	OTC
<b>CREST PRO-HEALTH MOUTH/THROAT LIQUID</b>		Non-Preferred	OTC
<b>LISTERINE ANTISEPTIC MOUTH/THROAT LIQUID</b>		Non-Preferred	OTC
<b>LISTERINE MOUTH/THROAT LIQUID</b>		Non-Preferred	OTC
<b>LISTERINE POCKETMIST MOUTH/THROAT LIQUID</b>		Non-Preferred	OTC
<b>LISTERINE POCKETPAKS MOUTH/THROAT STRIP</b>		Non-Preferred	OTC
<b>LISTERINE ULTRACLEAN MOUTH/THROAT LIQUID</b>		Non-Preferred	OTC
<b>LISTERINE ZERO MOUTH/THROAT LIQUID</b>		Non-Preferred	OTC
<b>LUMINEUX CLEAN/FRESH MOUTHWASH MOUTH/THROAT LIQUID</b>		Non-Preferred	OTC
<b>LUMINEUX HYDRATING MOUTHWASH MOUTH/THROAT LIQUID</b>		Non-Preferred	OTC
<b>LUMINEUX SENSITIVITY MOUTHWASH MOUTH/THROAT LIQUID</b>		Non-Preferred	OTC



Drug Name	Reference	Status	Notes
<b>LUMINEUX WHITENING MOUTHWASH MOUTH/THROAT LIQUID</b>		Non-Preferred	OTC
mouth rinse mouth/throat liquid	Crest Pro-Health	Non-Preferred	OTC
<b>SCOPE MOUTH/THROAT LIQUID</b>		Non-Preferred	OTC
<b>THERABREATH HEALTHY GUMS RINSE MOUTH/THROAT LIQUID</b>		Non-Preferred	OTC
<b>THERABREATH ORAL RINSE MOUTH/THROAT LIQUID</b>		Non-Preferred	OTC
<b>TONSILINE MOUTH/THROAT LIQUID</b>		Non-Preferred	OTC
<b>*PROTECTANTS - MOUTH/THROAT***</b>			
<b>ABREVA RAPID PAIN RELIEF EXTERNAL GEL</b>		Non-Preferred	OTC
<b>ANBESOL COLD SORE THERAPY EXTERNAL OINTMENT</b>		Non-Preferred	OTC
cold sore treatment external liquid		Non-Preferred	OTC
<b>GELCLAIR MOUTH/THROAT GEL</b>		Non-Preferred	
<b>HERPECIN-L EXTERNAL</b>		Non-Preferred	OTC
<b>LIP CLEAR LYSINE EXTERNAL OINTMENT</b>		Non-Preferred	OTC
lip-guard external ointment	Anbesol Cold Sore Therapy	Non-Preferred	OTC
l-lysine external ointment	Anbesol Cold Sore Therapy	Non-Preferred	OTC
<b>*SALIVA STIMULANTS***</b>			
cevimeline hcl oral capsule	Evoxac	Non-Preferred	
<b>EVOXAC ORAL CAPSULE</b>		Non-Preferred	
pilocarpine hcl oral tablet	Salagen	Preferred	QL
<b>SALAGEN ORAL TABLET</b>		Non-Preferred	QL
<b>*STEROIDS - MOUTH/THROAT/DENTAL ***</b>			
<b>KOURZEQ MOUTH/THROAT PASTE</b>		Preferred	
<b>ORALONE MOUTH/THROAT PASTE</b>		Preferred	
triamcinolone acetonide mouth/throat paste	Kourzeq	Preferred	
<b>*THROAT PRODUCTS - MISC.***</b>			
anti-snore throat spray mouth/throat liquid	Ayr Throat Spray	Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>AYR THROAT SPRAY MOUTH/THROAT LIQUID</b>		Non-Preferred	OTC
<b>ENTERTAINERS SECRET THROAT MOUTH/THROAT LIQUID</b>		Non-Preferred	OTC
lemon-glycerin mouth/throat swab		Non-Preferred	OTC
<b>OASIS MOISTURIZING MOUTH SPRAY MOUTH/THROAT LIQUID</b>		Non-Preferred	OTC
<b>OASIS MOISTURIZING MOUTHWASH MOUTH/THROAT LIQUID</b>		Non-Preferred	OTC
<b>*MULTIVITAMINS*</b>			
<b>*B-COMPLEX VITAMINS***</b>			
<b>APETEX ORAL ELIXIR</b>		Non-Preferred	OTC
<b>APETIGEN ORAL ELIXIR</b>		Non-Preferred	OTC
b complex oral capsule		Preferred	OTC
b complex vitamins oral capsule		Preferred	OTC
b complex-b12 oral tablet		Preferred	OTC
b-complex energy support oral tablet dispersible		Non-Preferred	OTC
b-complex plus b-12 oral tablet		Preferred	OTC
b-complex/b-12 oral tablet		Preferred	OTC
b-complex/b-12 sublingual liquid		Non-Preferred	OTC
biopetit oral elixir	Apetex	Non-Preferred	OTC
vitamin b complex oral capsule		Preferred	OTC
vitamin b complex oral tablet		Preferred	OTC
vitamin-b complex oral tablet		Preferred	OTC
<b>*B-COMPLEX W/ C &amp; E + ZN***</b>			
bec/zinc oral tablet		Preferred	AL; OTC; QL
stress b/zinc oral tablet		Preferred	AL; OTC; QL
stress b-complex/vit c/zinc oral tablet		Preferred	AL; OTC; QL
stress formula/zinc (b-compl) oral tablet		Preferred	AL; OTC; QL
stress plus zinc oral tablet		Preferred	AL; OTC; QL
zinc-vites oral tablet		Preferred	AL; OTC; QL
<b>*B-COMPLEX W/ C &amp; E***</b>			
<b>PRONUTRIENTS SUPER B COMPLEX ORAL TABLET</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>*B-COMPLEX W/ C &amp; FOLIC ACID***</b>			
b complex-c-folic acid oral tablet		Preferred	OTC; QL
b-complex balanced oral tablet		Preferred	OTC; QL
b-complex/folic acid/vitamin c oral tablet extended release		Non-Preferred	OTC
b-complex/vitamin c oral tablet		Preferred	OTC; QL
b-complex-c (w/folic acid) oral tablet		Preferred	OTC; QL
<b>DIALYVITE 800 ORAL TABLET</b>		Preferred	OTC
<b>DIALYVITE 800 ORAL WAFER</b>		Non-Preferred	OTC
nephro vitamins oral tablet	Dialyvite 800	Preferred	OTC
<b>NEPHRONEX ORAL LIQUID</b>		Preferred	OTC
<b>NEPHRO-VITE ORAL TABLET</b>		Preferred	OTC
renal vitamin oral tablet	Dialyvite 800	Preferred	OTC
rena-vite oral tablet	Dialyvite 800	Preferred	OTC
rena-vite rx oral tablet	Dialyvite	Preferred	OTC
stress formula (folic acid) oral tablet		Preferred	OTC; QL
super b complex/fa/vit c oral tablet		Preferred	OTC; QL
super b-complex/vit c/fa oral tablet		Preferred	OTC; QL
<b>*B-COMPLEX W/ C***</b>			
<b>ALLBEE/C ORAL TABLET</b>		Preferred	OTC; QL
b complex-c oral capsule		Preferred	OTC; QL
b complex-c oral tablet	Allbee/C	Preferred	OTC; QL
b complex-vitamin c oral capsule		Preferred	OTC; QL
b-complex-c oral tablet	Allbee/C	Preferred	OTC; QL
better b complex oral tablet	Allbee/C	Preferred	OTC; QL
super b complex/vitamin c oral tablet	Allbee/C	Preferred	OTC; QL
super b/c oral capsule		Preferred	OTC; QL
super b-complex + vitamin c oral tablet	Allbee/C	Preferred	OTC; QL
vitamin b complex-c oral capsule		Preferred	OTC; QL
<b>*B-COMPLEX W/ C-BIOTIN-D &amp; FOLIC ACID***</b>			
<b>DIALYVITE 800 PLUS D ORAL WAFER</b>		Non-Preferred	OTC
<b>*B-COMPLEX W/ C-BIOTIN-E &amp; FOLIC ACID***</b>			
b complex-c-biotin-e-fa oral tablet		Preferred	OTC

Drug Name	Reference	Status	Notes
<b>*B-COMPLEX W/ C-BIOTIN-FE &amp; FOLIC ACID***</b>			
DIALYVITE 800/IRON ORAL TABLET		Non-Preferred	OTC
<b>*B-COMPLEX W/ C-ZN &amp; FOLIC ACID***</b>			
DIALYVITE 800/ZINC ORAL TABLET		Non-Preferred	OTC
DIALYVITE 800-ZINC 15 ORAL TABLET		Non-Preferred	OTC
<b>*B-COMPLEX W/ FOLIC ACID***</b>			
b complex formula 1 (w/ fa) oral tablet	Big 100	Preferred	OTC
b complex vitamins (w/ fa) oral capsule		Preferred	OTC
balanced b-50 oral tablet extended release		Non-Preferred	OTC
b-complex (folic acid) oral tablet	Big 100	Preferred	OTC
b-complex/electrolytes oral tablet	Big 100	Preferred	OTC
benfotiamine multi-b oral capsule		Preferred	OTC
kobee oral tablet	Big 100	Preferred	OTC
<b>*B-COMPLEX W/ IRON***</b>			
APETIGEN-PLUS ORAL SOLUTION		Preferred	OTC
super b-complex/iron/vitamin c oral tablet		Non-Preferred	OTC
<b>*B-COMPLEX W/ LYSINE-MIN-FE &amp; FOLIC ACID***</b>			
ACTRIVIT ORAL LIQUID		Non-Preferred	OTC
<b>*B-COMPLEX W/ MINERALS***</b>			
APETIGEN-PLUS ORAL TABLET		Non-Preferred	OTC
ELDERTONIC ORAL LIQUID		Preferred	AL; OTC; QL
<b>*B-COMPLEX W/BIOTIN &amp; FOLIC ACID***</b>			
B ACTIV ORAL CAPSULE		Non-Preferred	OTC
b complex 100 tr oral tablet extended release	Endur-B	Preferred	OTC
b-100 b-complex oral tablet	Super DEC B-100	Preferred	OTC
b-100 complex cr oral tablet extended release	Endur-B	Preferred	OTC
b-100 high potency balanced oral capsule	B Activ	Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
b-100 tr oral tablet extended release	Endur-B	Preferred	OTC
b-50 complex oral tablet	Super DEC B-100	Preferred	OTC
balance b-50 oral tablet	Super DEC B-100	Preferred	OTC
balanced b complex oral tablet	Super DEC B-100	Preferred	OTC
balanced b-100 oral tablet	Super DEC B-100	Preferred	OTC
balanced b-100 oral tablet extended release	Endur-B	Preferred	OTC
balanced b-50/fa oral tablet	Super DEC B-100	Preferred	OTC
b-compleet-100 oral tablet	Super DEC B-100	Preferred	OTC
b-compleet-50 oral tablet	Super DEC B-100	Preferred	OTC
b-complex oral capsule	B Activ	Non-Preferred	OTC
b-complex oral tablet	Super DEC B-100	Preferred	OTC
b-right optimized b-complex oral capsule	B Activ	Non-Preferred	OTC
complex b-100 oral tablet extended release	Endur-B	Preferred	OTC
complex b-50 prolonged release oral tablet extended release	Endur-B	Preferred	OTC
<b>ENDUR-B ORAL TABLET EXTENDED RELEASE</b>		Preferred	OTC
quin b strong b-25 oral tablet	Super DEC B-100	Preferred	OTC
<b>SUPER B-50 B COMPLEX ORAL CAPSULE</b>		Non-Preferred	OTC
super b-complex oral capsule	B Activ	Non-Preferred	OTC
super b-complex oral tablet	Super DEC B-100	Preferred	OTC
<b>SUPER DEC B-100 ORAL TABLET</b>		Preferred	OTC
<b>SUPER QUINTS B-50 ORAL TABLET</b>		Preferred	OTC
<b>*BIOFLAVONOID PRODUCTS***</b>			
<b>ACTITROM ORAL CAPSULE</b>		Non-Preferred	OTC
<b>ACTITROM-D ORAL CAPSULE</b>		Non-Preferred	OTC
<b>ADVANCED C PLUS ORAL TABLET</b>		Non-Preferred	OTC; QL
anti-allergy oral tablet	Advanced C Plus	Non-Preferred	OTC; QL
<b>BIO C 1:1 ORAL CAPSULE</b>		Non-Preferred	OTC
bioflex oral tablet	Advanced C Plus	Non-Preferred	OTC; QL
c 1000-bioflavonoids-rose hips oral capsule	Actitrom	Non-Preferred	OTC
citrus bioflavonoids oral powder		Non-Preferred	OTC
daflonex-xl oral capsule	Actitrom	Non-Preferred	OTC

Drug Name	Reference	Status	Notes
daflonex-xl oral tablet extended release	Ester-C	Non-Preferred	OTC
<b>EASY-C IMMUNE HEALTH W/BIOFLAV ORAL CAPSULE</b>		Non-Preferred	OTC
<b>EASY-C ORAL TABLET</b>		Non-Preferred	OTC; QL
<b>ESTER-C ORAL TABLET</b>		Non-Preferred	OTC; QL
<b>ESTER-C ORAL TABLET EXTENDED RELEASE</b>		Preferred	OTC
<b>FLEXGEN ORAL TABLET</b>		Non-Preferred	OTC; QL
fruit c 200 oral tablet chewable		Non-Preferred	OTC; QL
grape seed extract oral capsule	Actitrom	Non-Preferred	OTC
grape seed oral capsule	Actitrom	Non-Preferred	OTC
hi c-500 oral tablet	Advanced C Plus	Non-Preferred	OTC; QL
pan-c 500/bioflavonoids oral tablet	Advanced C Plus	Non-Preferred	OTC; QL
<b>PERIDIN-C ORAL TABLET</b>		Non-Preferred	OTC; QL
quercetin complex immune oral capsule	Actitrom	Non-Preferred	OTC
span c oral tablet	Advanced C Plus	Non-Preferred	OTC; QL
<b>THORNE VITAMIN C-FLAVONOIDS ORAL CAPSULE</b>		Non-Preferred	OTC
<b>TRI SUPER FLAVONS ORAL TABLET</b>		Non-Preferred	OTC; QL
<b>TROMBONEX ORAL CAPSULE</b>		Non-Preferred	OTC
<b>TROMBONEX-D ORAL CAPSULE</b>		Non-Preferred	OTC
vasoflex forte oral capsule	Actitrom	Non-Preferred	OTC
vasoflex hd oral tablet	Advanced C Plus	Non-Preferred	OTC; QL
<b>VASOFLEX ORAL CAPSULE</b>		Non-Preferred	OTC
<b>VASOFLEX ORAL TABLET</b>		Non-Preferred	OTC; QL
vita c/bioflavonoids/rose hips oral tablet	Advanced C Plus	Non-Preferred	OTC; QL
vitamin c oral tablet chewable		Non-Preferred	OTC; QL
vitamin c-bioflavonoids oral tablet extended release	Ester-C	Preferred	OTC
<b>*BIOTIN W/ LUTEIN***</b>			
biotin plus beauty oral tablet		Non-Preferred	OTC
<b>*BIOTIN W/ VITAMIN C***</b>			
hair skin nails gummies oral tablet chewable		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>*BIOTIN W/ VITAMINS C &amp; E***</b>			
hair skin & nails gummies oral tablet chewable		Non-Preferred	AL; OTC
hair/skin/nails oral tablet chewable		Non-Preferred	AL; OTC
<b>*BREWERS YEAST***</b>			
brewers yeast oral powder		Non-Preferred	OTC
brewers yeast oral tablet		Non-Preferred	OTC
<b>*IRON W/ VITAMINS***</b>			
<b>GERITOL COMPLETE ORAL TABLET</b>		Non-Preferred	OTC
<b>GERITOL TONIC ORAL LIQUID</b>		Non-Preferred	OTC
<b>*MULTIPLE VITAMINS W/ CALCIUM***</b>			
calci-max oral capsule		Non-Preferred	OTC
essential one daily multivit oral tablet	One-A-Day Womens Formula	Preferred	OTC; QL
<b>ONE-A-DAY WOMENS FORMULA ORAL TABLET</b>		Non-Preferred	OTC; QL
signacal oral tablet	One-A-Day Womens Formula	Preferred	OTC; QL
<b>*MULTIPLE VITAMINS W/ IRON***</b>			
chlorella oral capsule		Non-Preferred	AL; OTC
daily vite multivitamin/iron oral tablet	Tab-A-Vite/Iron/Beta Carotene	Preferred	AL; OTC; QL
multiple vitamins/iron oral tablet	Tab-A-Vite/Iron/Beta Carotene	Preferred	AL; OTC; QL
multivitamin plus iron adult oral tablet	Tab-A-Vite/Iron/Beta Carotene	Preferred	AL; OTC; QL
multi-vitamin/iron oral tablet	Tab-A-Vite/Iron/Beta Carotene	Preferred	AL; OTC; QL
one daily multivitamin/iron oral tablet	Tab-A-Vite/Iron/Beta Carotene	Preferred	AL; OTC; QL
one-daily multi-vitamin/iron oral tablet	Tab-A-Vite/Iron/Beta Carotene	Preferred	AL; OTC; QL
one-daily/iron oral tablet	Tab-A-Vite/Iron/Beta Carotene	Preferred	AL; OTC; QL
<b>PROTECT IRON ORAL LIQUID</b>		Non-Preferred	OTC
stress b complex/iron oral tablet	Tab-A-Vite/Iron/Beta Carotene	Preferred	AL; OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
stress formula/iron oral tablet	Tab-A-Vite/Iron/Beta Carotene	Preferred	AL; OTC; QL
tab-a-vite/iron oral tablet	Tab-A-Vite/Iron/Beta Carotene	Preferred	AL; OTC; QL
<b>TAB-A-VITE/IRON/BETA CAROTENE ORAL TABLET</b>		Non-Preferred	OTC; QL
<b>*MULTIPLE VITAMINS W/ MINERALS &amp; CALCIUM-FOLIC ACID***</b>			
<b>FOLGARD OS ORAL TABLET</b>		Non-Preferred	
<b>*MULTIPLE VITAMINS W/ MINERALS &amp; FLUORIDE-IRON-FOLIC ACID***</b>			
<b>QUFLORA FE ORAL TABLET CHEWABLE</b>		Non-Preferred	
<b>*MULTIPLE VITAMINS W/ MINERALS***</b>			
a thru z advanced adult oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
a thru z advanced oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
a thru z high potency oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
a thru z select 50+ advanced oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
a thru z select 50+ mens oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
a thru z select advanced oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
a thru z select oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
a thru z select oral tablet chewable	Adek Gummies Plus Zn	Non-Preferred	AL; OTC
a thru z select ultimate women oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
a thru z ultimate mens oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
abc complete adult oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
abc complete mens oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
abc complete senior 50+ oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
abc complete senior mens 50+ oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
abc complete senior womens 50+ oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
abc complete womens oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
<b>ACTIVESSENTIALS FOR WOMEN ORAL</b>		Non-Preferred	OTC; QL



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>ACTIVESSENTIALS ORAL PACKET</b>		Non-Preferred	OTC
<b>ACTIVESSENTIALS/ONCOPLEX &amp; D3 ORAL</b>		Non-Preferred	OTC; QL
<b>ACTIVNUTRIENTS ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>ACTIVNUTRIENTS PERFORMANCE ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>ACTIVNUTRIENTS W/O COPPER/IRON ORAL POWDER</b>		Non-Preferred	OTC
<b>ACTIVNUTRIENTS W/O IRON ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>ADEK GUMMIES PLUS ZN ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
adult one daily gummies oral tablet chewable	Adek Gummies Plus Zn	Non-Preferred	AL; OTC
advanced eye health oral capsule	Amoryn Mood Booster	Preferred	AL; OTC; QL
<b>ADVANCED MULTI EA ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>AIRBORNE ELDERBERRY ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>AIRBORNE GUMMIES ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>AIRBORNE KIDS ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>AIRBORNE ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>AIRBORNE ORAL TABLET EFFERVESCENT</b>		Non-Preferred	AL; OTC; QL
<b>ALIVE ADULT PREMIUM ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>ALIVE CALCIUM BONE SUPPORT ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
alive daily energy oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
<b>ALIVE DIABETIC MULTIVITAMIN ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ALIVE ENERGY 50+ ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ALIVE EVERYDAY IMMUNE HEALTH ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>ALIVE HAIR, SKIN &amp; NAILS ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>ALIVE HAIR, SKIN &amp; NAILS ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>ALIVE MENS 50+ MULTI GUMMY ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>ALIVE MENS 50+ ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ALIVE MENS 50+ ULTRA ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ALIVE MENS COMPLETE MULTI ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ALIVE MENS GUMMY MULTIVITAMINS ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>ALIVE MENS ULTRA ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ALIVE MULTI-VITAMIN ORAL LIQUID</b>		Non-Preferred	AL; OTC; QL
<b>ALIVE MULTI-VITAMIN ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>ALIVE ONCE DAILY WOMENS ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ALIVE ULTRA POTENCY WOMENS 50+ ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ALIVE WOMENS 50+ COMPLETE MV ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ALIVE WOMENS 50+ GUMMY ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>ALIVE WOMENS 50+ ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>ALIVE WOMENS ENERGY ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ALIVE WOMENS GUMMY ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>ALPHA BETIC ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>AMORYN MOOD BOOSTER ORAL CAPSULE</b>		Preferred	AL; OTC; QL
antioxidant a/c/e/selenium oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
antioxidant formula oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
antioxidant formula/minerals oral capsule	Amoryn Mood Booster	Preferred	AL; OTC; QL
antioxidant oral capsule	Amoryn Mood Booster	Preferred	AL; OTC; QL
antioxidant vitamins oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
<b>APETIBEX ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>APPE-CURB ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>ATP IGNITE ORAL PACKET</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>ATP IGNITE WORKOUT ORAL POWDER</b>		Non-Preferred	OTC
<b>BARIATRIC FUSION ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
bariatric multivitamins/iron oral capsule	Amoryn Mood Booster	Non-Preferred	AL; OTC; QL
basic am oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
basic pm oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
<b>BEROCCA ORAL TABLET EFFERVESCENT</b>		Non-Preferred	AL; OTC; QL
<b>BIO-35 GLUTEN-FREE ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>BIO-35 IRON FREE ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
biocal oral capsule	Amoryn Mood Booster	Non-Preferred	AL; OTC; QL
<b>BONEUP 3 PER DAY ORAL CAPSULE</b>		Non-Preferred	OTC; QL
<b>BONEUP ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>BONEUP VEGETARIAN ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>BOOSTNOW IMMUNE SUPPORT ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>BOOSTNOW IMMUNE SUPPORT ORAL POWDER</b>		Non-Preferred	OTC
<b>BURIED TREASURE ACTIVE 55 PLUS ORAL LIQUID</b>		Non-Preferred	AL; OTC; QL
c-buff oral powder	ActivNutrients w/o Copper/Iron	Non-Preferred	OTC
<b>CELEBRATE MULTI-COMPLETE 18 ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>CELEBRATE MULTI-COMPLETE 18 ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>CELEBRATE MULTI-COMPLETE 36 ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>CELEBRATE MULTI-COMPLETE 36 ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>CELEBRATE MULTI-COMPLETE 45 ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>CELEBRATE MULTI-COMPLETE 45 ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>CELEBRATE MULTI-COMPLETE 60 ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>CELEBRATE MULTI-COMPLETE 60 ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
centavite a-z complete-mineral oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
centravites 50 plus oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
centravites adults oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
centravites oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
<b>CENTRUM ADULT 50+ MULTIGUMMIES ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>CENTRUM ADULTS MULTIGUMMIES ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>CENTRUM ADULTS ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>CENTRUM CARDIO ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>CENTRUM FLAVOR BURST ADULT ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>CENTRUM FLAVOR BURST DRINK ORAL PACKET</b>		Non-Preferred	OTC
<b>CENTRUM FLAVOR BURST ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>CENTRUM FRESH/FRUITY 50+ ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>CENTRUM FRESH/FRUITY ADULT ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>CENTRUM MEN ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>CENTRUM MINIS ADULTS 50+ ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>CENTRUM MINIS MEN 50+ ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>CENTRUM MINIS WOMEN 50+ ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>CENTRUM MINIS WOMEN IMMUNE SUP ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>CENTRUM MULTI + OMEGA 3 ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>CENTRUM ORAL LIQUID</b>		Non-Preferred	AL; OTC; QL
<b>CENTRUM SILVER 50+MEN ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>CENTRUM SILVER 50+WOMEN ORAL TABLET</b>		Non-Preferred	AL; OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>CENTRUM SILVER ADULT 50+ ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>CENTRUM SILVER ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>CENTRUM SILVER ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>CENTRUM SILVER ULTRA WOMENS ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>CENTRUM SILVER WOMEN 50+ ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>CENTRUM SPECIALIST HEART ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>CENTRUM SPECIALIST IMMUNE ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>CENTRUM SPECIALIST VISION ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>CENTRUM ULTRA WOMENS ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>CENTRUM VITAMINTS ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>CENTRUM WOMEN ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
century mature oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
century oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
<b>CEROVITE SENIOR ORAL TABLET</b>		Preferred	AL; OTC; QL
<b>CERTAVITE SENIOR ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>CERTAVITE SENIOR/ANTIOXIDANT ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>CERTAVITE/ANTIOXIDANTS ORAL TABLET</b>		Preferred	AL; OTC; QL
<b>CHOICEFUL MULTIVITAMIN ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>CHOICEFUL MULTIVITAMIN ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>CITRACAL +D3 ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
companion oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
<b>COMPETE ORAL TABLET</b>		Preferred	AL; OTC; QL
complete multivitamin/mineral oral liquid	Alive Multi-Vitamin	Preferred	AL; OTC; QL
<b>CONCEPTIONXR MOTILITY SUPPORT ORAL</b>		Non-Preferred	OTC; QL
coral calcium plus oral capsule	Amoryn Mood Booster	Preferred	AL; OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>CULTURELLE PROBIOTICS + MULTIV ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
daily betic oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
daily combo multi vitamins oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
daily diabetes health pack oral	ActivEssentials for Women	Non-Preferred	OTC; QL
daily heart health support oral	ActivEssentials for Women	Non-Preferred	OTC; QL
daily multiple vitamins/min oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
daily multivitamin oral capsule	Amoryn Mood Booster	Preferred	AL; OTC; QL
<b>DAILY PAK MAXIMUM MULTIVITAMIN ORAL</b>		Non-Preferred	OTC; QL
<b>DECUBI-VITE ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
dekas bariatric oral tablet chewable	Adek Gummies Plus Zn	Non-Preferred	AL; OTC
<b>DEKAS PLUS OCEAN ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>DEKAS PLUS ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>DEKAS PLUS ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>DERMAVITE ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
diabetes health formula oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
<b>DIABETES HEALTH ORAL</b>		Non-Preferred	OTC; QL
dialyvite 800/ultra d oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
<b>DRY EYE FORMULA ORAL CAPSULE</b>		Preferred	AL; OTC; QL
<b>EMERGEN-C APPLE CIDER VINEGAR ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>EMERGEN-C ASHWAGANDHA ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>EMERGEN-C BLUE ORAL PACKET</b>		Non-Preferred	OTC
<b>EMERGEN-C ELDERBERRY ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>EMERGEN-C FIVE ORAL PACKET</b>		Non-Preferred	OTC
<b>EMERGEN-C HEART HEALTH ORAL PACKET</b>		Non-Preferred	OTC
<b>EMERGEN-C IMMUNE ORAL PACKET</b>		Non-Preferred	OTC
<b>EMERGEN-C IMMUNE PLUS ORAL PACKET</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>EMERGEN-C IMMUNE PLUS/VIT D ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
emergen-c immune+ oral packet	ActivEssentials	Non-Preferred	OTC
emergen-c immune+ oral tablet chewable	Adek Gummies Plus Zn	Non-Preferred	AL; OTC
<b>EMERGEN-C IMMUNE+WARMERS ORAL PACKET</b>		Non-Preferred	OTC
<b>EMERGEN-C JOINT HEALTH ORAL PACKET</b>		Non-Preferred	OTC
<b>EMERGEN-C KIDZ ORAL PACKET</b>		Non-Preferred	OTC
<b>EMERGEN-C MSM LITE ORAL PACKET</b>		Non-Preferred	OTC
<b>EMERGEN-C PINK ORAL PACKET</b>		Non-Preferred	OTC
<b>EMERGEN-C SUPER FRUIT ORAL PACKET</b>		Non-Preferred	OTC
<b>EMERGEN-C TURMERIC &amp; GINGER ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>EMERGEN-C VITAMIN C LITE ORAL PACKET</b>		Non-Preferred	OTC
<b>EMERGEN-C VITAMIN C ORAL PACKET</b>		Non-Preferred	OTC
<b>EMERGEN-C VITAMIN C ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>EMERGEN-C VITAMIN D/CALCIUM ORAL PACKET</b>		Non-Preferred	OTC
<b>ENDUR-VM ORAL TABLET EXTENDED RELEASE</b>		Non-Preferred	OTC; QL
<b>ENDUR-VM WITH IRON ORAL TABLET EXTENDED RELEASE</b>		Non-Preferred	OTC; QL
<b>ENERGY BOOSTER ORAL PACKET</b>		Non-Preferred	OTC
<b>ESSENTIA ORAL TABLET</b>		Preferred	AL; OTC; QL
essential balance oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
<b>EVOLUTION60 ORAL PACKET</b>		Non-Preferred	OTC
eye health + lutein oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
eye health oral capsule	Amoryn Mood Booster	Non-Preferred	AL; OTC; QL
eye multivitamin/sodium oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
<b>EYE VITAMINS ORAL CAPSULE</b>		Preferred	AL; OTC; QL
<b>EYE-VITES ORAL TABLET</b>		Preferred	AL; OTC; QL
<b>FITNESS TABS FOR MEN AM/PM ORAL TABLET</b>		Non-Preferred	AL; OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>FITNESS TABS FOR WOMEN AM/PM ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
freedavite oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
genadek step 1 oral capsule	Amoryn Mood Booster	Non-Preferred	AL; OTC; QL
genadek step 2 oral capsule	Amoryn Mood Booster	Non-Preferred	AL; OTC; QL
geri-freeda senior formula oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
glucoten oral capsule	Amoryn Mood Booster	Preferred	AL; OTC; QL
hair skin & nails advanced oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
hair skin & nails oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
hair skin and nails formula oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
hair skin nails oral capsule	Amoryn Mood Booster	Preferred	AL; OTC; QL
hair/skin/nails oral capsule	Amoryn Mood Booster	Non-Preferred	AL; OTC; QL
hair/skin/nails oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
head care proactive health oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
healthy eyes oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
healthy eyes supervision 2 oral capsule	Amoryn Mood Booster	Non-Preferred	AL; OTC; QL
healthy eyes/lutein-zeaxanthin oral capsule	Amoryn Mood Booster	Preferred	AL; OTC; QL
high potency multivit/fa oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
hi-kovite 2-part formula oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
<b>ICAPS AREDS FORMULA ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ICAPS LUTEIN &amp; OMEGA-3 ORAL CAPSULE</b>		Preferred	AL; OTC; QL
<b>ICAPS MV ORAL TABLET</b>		Preferred	AL; OTC; QL
<b>ICAPS ORAL CAPSULE</b>		Preferred	AL; OTC; QL
<b>IMMUBLAST-C ORAL PACKET</b>		Non-Preferred	OTC
<b>IMMUNE ESSENTIALS DAILY ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
immune support oral tablet chewable	Adek Gummies Plus Zn	Non-Preferred	AL; OTC
i-vite oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
kp mens daily pack oral	ActivEssentials for Women	Non-Preferred	OTC; QL
kp womens daily oral	ActivEssentials for Women	Non-Preferred	OTC; QL
<b>K-PAX IMMUNE PROFESSIONAL ST ORAL TABLET</b>		Non-Preferred	AL; OTC; QL



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>LIFE PACK MENS ORAL</b>		Non-Preferred	OTC; QL
<b>LIFE PACK WOMENS ORAL</b>		Non-Preferred	OTC; QL
liver detox oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
lutein-zeaxanthin oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
<b>LYSIPLEX PLUS ORAL LIQUID</b>		Non-Preferred	AL; OTC; QL
<b>MACULAR HEALTH FORMULA ORAL CAPSULE</b>		Preferred	AL; OTC; QL
<b>MACUVITE EYE CARE ORAL TABLET</b>		Preferred	AL; OTC; QL
<b>MACUVITE ORAL TABLET</b>		Preferred	AL; OTC; QL
<b>MACUVITE/LUTEIN ORAL TABLET</b>		Preferred	AL; OTC; QL
<b>MAXIMIN PACK ORAL PACKET</b>		Non-Preferred	OTC
maximum daily green oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
mega multi for women oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
<b>MEGA MULTI MEN ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
megavite fruits & veggies oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
mens 50+ advanced oral capsule	Amoryn Mood Booster	Non-Preferred	AL; OTC; QL
mens 50+ multivitamin oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
mens daily pack oral packet	ActivEssentials	Non-Preferred	OTC
<b>MENS LIFE PACK ORAL TABLET</b>		Preferred	AL; OTC; QL
mens multivitamin oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
mens multivitamin oral tablet chewable	Adek Gummies Plus Zn	Non-Preferred	AL; OTC
<b>MENS PACK ORAL</b>		Non-Preferred	OTC; QL
<b>MOOD FOOD ES ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>MOOD FOOD ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
multi + omega-3 adult gummies oral tablet chewable	Adek Gummies Plus Zn	Non-Preferred	AL; OTC
multi adult gummies oral tablet chewable	Adek Gummies Plus Zn	Non-Preferred	AL; OTC
<b>MULTI COMPLETE ORAL CAPSULE</b>		Preferred	AL; OTC; QL
multi complete/iron oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
multi for her 50+ oral capsule	Amoryn Mood Booster	Preferred	AL; OTC; QL
multi for her 50+ oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
multi for her oral capsule	Amoryn Mood Booster	Preferred	AL; OTC; QL
multi for her oral packet	ActivEssentials	Non-Preferred	OTC
multi for her oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
multi for him 50+ oral tablet	Cerovite Senior	Preferred	AL; OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>MULTI FOR HIM ORAL CAPSULE</b>		Preferred	AL; OTC; QL
<b>MULTI FOR HIM ORAL PACKET</b>		Non-Preferred	OTC
<b>MULTI FOR HIM ORAL TABLET</b>		Preferred	AL; OTC; QL
multi vitamin/minerals oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
<b>MULTIA ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
multiple vit/minerals/no iron oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
multiple vitamins/womens oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
multiple vitamins-minerals oral liquid	Alive Multi-Vitamin	Preferred	AL; OTC; QL
multivit/multimineral adult oral liquid	Alive Multi-Vitamin	Preferred	AL; OTC; QL
multivitamin adult (minerals) oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
multivitamin adults 50+ oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
multivitamin adults oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
multivitamin gummies adult oral tablet chewable	Adek Gummies Plus Zn	Non-Preferred	AL; OTC
multivitamin gummies mens oral tablet chewable	Adek Gummies Plus Zn	Non-Preferred	AL; OTC
multi-vitamin gummies oral tablet chewable	Adek Gummies Plus Zn	Non-Preferred	AL; OTC
multivitamin gummies womens oral tablet chewable	Adek Gummies Plus Zn	Non-Preferred	AL; OTC
multivitamin men 50+ oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
multivitamin men oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
multi-vitamin monocaps oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
multivitamin oral liquid	Alive Multi-Vitamin	Preferred	AL; OTC; QL
multivitamin women 50+ oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
multivitamin women oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
multivitamin womens 50+ adv oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
multi-vitamin/minerals oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
multivitamin/zinc stress oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
multivitamin-minerals oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
multi-vite oral liquid	Alive Multi-Vitamin	Non-Preferred	AL; OTC; QL
<b>MVW COMPLETE FORMULATION D3000 ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>MVW COMPLETE FORMULATION D5000 ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>MVW COMPLETE FORMULATION MINIS ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>MVW COMPLETE FORMULATION ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
mvw hi-d adek gummies oral tablet chewable	Adek Gummies Plus Zn	Non-Preferred	AL; OTC
<b>MVW MODULATOR FORMULATION MINI ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>MVW MODULATOR FORMULATION ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>MVW ORANGE CHEWABLES ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
myamulti oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
<b>NANOVM ADULT ORAL POWDER</b>		Non-Preferred	OTC
<b>NANOVM SENIOR + ORAL POWDER</b>		Non-Preferred	OTC
nat-rul theravite-m oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
natrul-vites oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
no iron mult vitamin-minerals oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
ocular vitamins oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
ocutabs oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
ocutabs-lutein oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
<b>OCUVITE ADULT 50+ ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>OCUVITE ADULT FORMULA ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>OCUVITE EXTRA ORAL TABLET</b>		Preferred	AL; OTC; QL
<b>OCUVITE EYE + MULTI ORAL TABLET</b>		Preferred	AL; OTC; QL
<b>OCUVITE EYE HEALTH FORMULA ORAL CAPSULE</b>		Preferred	AL; OTC; QL
<b>OCUVITE EYE HEATLH GUMMIES ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>OCUVITE-LUTEIN ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>OCUVITE-LUTEIN ORAL TABLET</b>		Preferred	AL; OTC; QL
<b>ONCOVITE ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ONE A DAY ENERGY ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ONE A DAY IMMUNITY DEFENSE ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>ONE A DAY MEN 50 PLUS ORAL TABLET</b>		Non-Preferred	AL; OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>ONE A DAY MENS VITACRAVES ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>ONE A DAY TRIPLE IMMUNE SUPPRT ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ONE A DAY WOMEN 50 PLUS ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ONE A DAY WOMEN 50 PLUS ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
one daily 50 plus oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
one daily calcium/iron oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
one daily complete for men oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
one daily complete oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
one daily for men 50+ advanced oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
one daily for men/lycopene oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
one daily for women 50+ adv oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
one daily for women oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
one daily healthy weight adv oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
one daily healthy weight oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
one daily maximum oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
one daily men formula w/o iron oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
one daily mens 50+ multivit oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
one daily mens 50+/lycopene oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
one daily mens health oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
one daily mens oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
one daily multivit/iron-free oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
one daily multivitamin men oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
one daily multivitamin women oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
one daily womens 50 plus oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
one daily womens 50+ oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
one daily womens oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
one daily/minerals oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
<b>ONE-A-DAY ENERGY ORAL TABLET</b>		Non-Preferred	AL; OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>ONE-A-DAY FOR HER VITACRAVES ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>ONE-A-DAY FOR HIM VITACRAVES ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>ONE-A-DAY MENOPAUSE FORMULA ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ONE-A-DAY MENS (MINERALS) ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ONE-A-DAY MENS 50+ ADVANTAGE ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ONE-A-DAY MENS 50+ ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ONE-A-DAY MENS HEALTH FORMULA ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ONE-A-DAY MENS PRO EDGE ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ONE-A-DAY MENS VITACRAVES ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>ONE-A-DAY PROACTIVE 65+ ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ONE-A-DAY TEEN ADVANTAGE/HER ORAL TABLET</b>		Preferred	AL; OTC; QL
<b>ONE-A-DAY TEEN ADVANTAGE/HIM ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ONE-A-DAY VITACRAVES ADULT ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>ONE-A-DAY VITACRAVES IMMUNITY ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>ONE-A-DAY VITACRAVES ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>ONE-A-DAY VITACRAVES SOUR ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>ONE-A-DAY WEIGHT SMART ADVANCE ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ONE-A-DAY WOMENS 50 PLUS ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ONE-A-DAY WOMENS 50+ ADVANTAGE ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ONE-A-DAY WOMENS 50+ ORAL TABLET</b>		Non-Preferred	OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>ONE-A-DAY WOMENS HEALTHY SKIN ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ONE-A-DAY WOMENS MIND &amp; BODY ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ONE-A-DAY WOMENS ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ONE-A-DAY WOMENS PETITES ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ONE-A-DAY WOMENS VITACRAVES ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
one-daily multi caps oral capsule	Amoryn Mood Booster	Non-Preferred	AL; OTC; QL
one-daily multi-vit/mineral oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
optic-vites oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
optic-vites with lutein oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
<b>OPTIFAST POST BARIATRIC ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
optimum airvites oral tablet chewable	Adek Gummies Plus Zn	Non-Preferred	AL; OTC
optimum pms oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
<b>OPTISOURCE POST BARIATRIC SURG ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>OPTIVITE P.M.T. ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>OPURITY BYPASS OPTIMIZED ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>OPURITY ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>OSTEOPRIME PLUS ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>OSTEOPRIME ULTRA ORAL TABLET</b>		Preferred	AL; OTC; QL
parvlex oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
<b>PHLEXY-VITS ORAL POWDER</b>		Non-Preferred	OTC
<b>PHYTOMULTI ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>PREMIUM PACKETS ORAL</b>		Non-Preferred	OTC; QL
prescription support multivit oral capsule	Amoryn Mood Booster	Non-Preferred	AL; OTC; QL
<b>PRESERVISION AREDS 2 ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>PRESERVISION AREDS 2 ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>PRESERVISION AREDS 2+MULTI VIT ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>PRESERVISION AREDS ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>PRESERVISION AREDS ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>PRESERVISION/LUTEIN ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>PRO-CAL ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>PROCERV HP ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>PRORENAL + D ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>PRORENAL + D W/ OMEGA-3 ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>PROSIGHT ORAL TABLET</b>		Preferred	AL; OTC; QL
<b>PROTECT CARDIO AF ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>PROTECT PLUS SO ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>PROTEGRA ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>PROVIT ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>PROXEED PLUS ORAL PACKET</b>		Non-Preferred	OTC
quin b strong oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
quintabs-m oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
<b>RENAPLEX ORAL TABLET</b>		Preferred	AL; OTC; QL
<b>RENAPLEX-D ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
senior tabs oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
sentry senior/lutein oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
skin beauty & wellness oral packet	ActivEssentials	Non-Preferred	OTC
skin hair & nails advanced oral capsule	Amoryn Mood Booster	Non-Preferred	AL; OTC; QL
solo oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
<b>SPECTRAVITE ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
stress b complex/antioxid/zinc oral tablet	Cerovite Senior	Preferred	OTC; QL
<b>STRESSTABS ADVANCED ORAL TABLET</b>		Preferred	AL; OTC; QL
super antioxidant oral capsule	Amoryn Mood Booster	Non-Preferred	AL; OTC; QL
super antioxidants protector oral capsule	Amoryn Mood Booster	Preferred	AL; OTC; QL
super d-zinc-selenium-copper oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
superior mens multi oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL

Drug Name	Reference	Status	Notes
superior womens multi oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
<b>SYSTANE ICAPS AREDS2 ORAL CAPSULE</b>		Preferred	AL; OTC; QL
<b>SYSTANE ICAPS AREDS2 ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>SYSTANE ICAPS AREDS2 ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
thera vital-m oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
therabasic-m oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
<b>THERAGRAN-M ADVANCED 50 PLUS ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>THERAGRAN-M ADVANCED ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>THERAGRAN-M ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>THERAGRAN-M PREMIER 50 PLUS ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>THERAGRAN-M PREMIER ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>THERAMILL FORTE ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>THERANATAL LACTATION COMPLETE ORAL</b>		Non-Preferred	OTC; QL
<b>THERANATAL LACTATION ONE ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
therapeutic formula/hematinics oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
therapeutic-m oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
thera-tabs m oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
<b>THERATRUM COMPLETE 50 PLUS ORAL TABLET</b>		Preferred	AL; OTC; QL
<b>THERATRUM COMPLETE ORAL TABLET</b>		Preferred	AL; OTC; QL
thera-vite max-m oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
<b>THRIVE FOR LIFE WOMENS ORAL TABLET</b>		Preferred	AL; OTC; QL
tropical liquid nutrition oral liquid	Alive Multi-Vitamin	Preferred	AL; OTC; QL
t-vites oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
<b>ULTRA BONEUP ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
ultra freeda oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
ultra freeda/iron oral tablet	Cerovite Senior	Preferred	AL; OTC; QL



Drug Name	Reference	Status	Notes
<b>ULTRA MEGA GOLD ORAL TABLET EXTENDED RELEASE</b>		Non-Preferred	OTC; QL
<b>ULTRA MEGA ORAL TABLET EXTENDED RELEASE</b>		Non-Preferred	OTC; QL
<b>ULTRA MEGA TWO ORAL TABLET EXTENDED RELEASE</b>		Non-Preferred	OTC; QL
ultra multi formula/iron oral capsule	Amoryn Mood Booster	Preferred	AL; OTC; QL
<b>ULTRACHOICE ADV FORMULA MATURE ORAL TABLET</b>		Preferred	AL; OTC; QL
<b>ULTRACHOICE ADVANCED FORMULA ORAL TABLET</b>		Preferred	AL; OTC; QL
vision formula 2 oral capsule	Amoryn Mood Booster	Preferred	AL; OTC; QL
vision formula/lutein oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
vision health oral capsule	Amoryn Mood Booster	Non-Preferred	AL; OTC; QL
<b>VISION OPTIMIZER ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
vision plus oral capsule	Amoryn Mood Booster	Preferred	AL; OTC; QL
vision vitamins oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
<b>VISTA ADVANCED AREDS2 FORMULA ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>VISTA ADVANCED DRY EYE FORMULA ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
vita hair oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
vitabasic complete oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
vitabasic senior oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
vitabex oral capsule	Amoryn Mood Booster	Non-Preferred	AL; OTC; QL
vitabex plus oral capsule	Amoryn Mood Booster	Non-Preferred	AL; OTC; QL
vitachew adult multi vitamin oral tablet chewable	Adek Gummies Plus Zn	Non-Preferred	AL; OTC
<b>VITAJoy MULTI GUMMIES ADULT ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
vitamin c effervescent blend oral packet	ActivEssentials	Non-Preferred	OTC
vita-min oral capsule	Amoryn Mood Booster	Preferred	AL; OTC; QL
vitamins a-d-e/selenium oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
<b>VITASANA ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>VITEYES CLASSIC ADVANCED ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
<b>VITEYES CLASSIC MACULAR SUPPOR ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL

Drug Name	Reference	Status	Notes
VITEYES CLASSIC MULTIVITAMIN ORAL TABLET		Non-Preferred	AL; OTC; QL
VITEYES CLASSIC+MULTI ORAL POWDER		Non-Preferred	OTC
VITEYES CLASSIC+OMEGA-3 ORAL CAPSULE		Non-Preferred	AL; OTC; QL
VITEYES COMPLETE ORAL CAPSULE		Preferred	AL; OTC; QL
VITEYES OPTIC NERVE SUPPORT ORAL TABLET		Non-Preferred	AL; OTC; QL
womens 50+ advanced oral capsule	Amoryn Mood Booster	Preferred	AL; OTC; QL
womens 50+ multi vitamin oral tablet	Cerovite Senior	Non-Preferred	AL; OTC; QL
womens daily formula oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
womens daily pack oral packet	ActivEssentials	Non-Preferred	OTC
WOMENS LIFE PACK ORAL TABLET		Preferred	AL; OTC; QL
womens multi gummies oral tablet chewable	Adek Gummies Plus Zn	Non-Preferred	AL; OTC
womens multi oral capsule	Amoryn Mood Booster	Preferred	AL; OTC; QL
womens multivitamin + collagen oral tablet chewable	Adek Gummies Plus Zn	Non-Preferred	AL; OTC
womens multivitamin oral tablet	Cerovite Senior	Preferred	AL; OTC; QL
WOMENS PACK ORAL		Non-Preferred	OTC; QL
YELETS TEENAGE FORMULA ORAL TABLET		Non-Preferred	AL; OTC; QL
YOUR LIFE MULTI ADULT GUMMIES ORAL TABLET CHEWABLE		Non-Preferred	AL; OTC
YUMVS MULTI ZERO ORAL TABLET CHEWABLE		Non-Preferred	AL; OTC
YUMVS ZERO DIABETIC MULTIVITAM ORAL TABLET CHEWABLE		Non-Preferred	AL; OTC
zinc oral lozenge		Non-Preferred	OTC
<b>*MULTIVITAMINS***</b>			
antioxidant formula oral capsule	Chlorocaps	Non-Preferred	AL; OTC
anti-oxidant oral tablet	One Daily Essential	Preferred	AL; OTC; QL
CHLOROCAPS ORAL CAPSULE		Non-Preferred	AL; OTC
daily multiple vitamins oral tablet	One Daily Essential	Preferred	AL; OTC; QL

Drug Name	Reference	Status	Notes
daily stress relief tr oral tablet extended release		Non-Preferred	OTC
daily value multivitamin oral tablet	One Daily Essential	Preferred	AL; OTC; QL
daily vitamins oral tablet	One Daily Essential	Preferred	AL; OTC; QL
daily vite oral tablet	One Daily Essential	Preferred	AL; OTC; QL
daily vites oral tablet	One Daily Essential	Preferred	AL; OTC; QL
daily-vite multivitamin oral tablet	One Daily Essential	Preferred	AL; OTC; QL
daily-vite oral tablet	One Daily Essential	Preferred	AL; OTC; QL
dekas essential oral capsule	Chlorocaps	Non-Preferred	AL; OTC
dekas essential oral liquid	Dialyvite 800	Non-Preferred	AL; OTC
<b>DIALYVITE 800 ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>ESTROFACTORS ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
healthy hair/skin/nails oral tablet	One Daily Essential	Preferred	AL; OTC; QL
high potency multivitamin oral tablet	One Daily Essential	Non-Preferred	AL; OTC; QL
<b>INFUVITE ADULT INTRAVENOUS SOLUTION</b>		Non-Preferred	
multi vitamin oral tablet	One Daily Essential	Non-Preferred	AL; OTC; QL
multi vitamin w/d-3 oral tablet	One Daily Essential	Non-Preferred	AL; OTC; QL
multiple vitamin-folic acid oral tablet	One Daily Essential	Preferred	AL; OTC; QL
multiple vitamins essential oral tablet	One Daily Essential	Preferred	AL; OTC; QL
multiple vitamins oral tablet	One Daily Essential	Preferred	AL; OTC; QL
multivitamin adult oral tablet	One Daily Essential	Non-Preferred	AL; OTC; QL
multivitamin iron-free oral tablet	One Daily Essential	Preferred	AL; OTC; QL
multivitamin oral tablet	One Daily Essential	Non-Preferred	AL; OTC; QL
multi-vitamin oral tablet	One Daily Essential	Preferred	AL; OTC; QL
multivitamin+ oral liquid	Dialyvite 800	Non-Preferred	AL; OTC
multi-vitamins oral tablet	One Daily Essential	Preferred	AL; OTC; QL
mv-one oral capsule	Chlorocaps	Non-Preferred	AL; OTC
<b>NEOMULTIVITE ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
novite oral capsule	Chlorocaps	Non-Preferred	AL
nutra-z+ oral capsule	Chlorocaps	Non-Preferred	AL; OTC
omnicap oral tablet	One Daily Essential	Non-Preferred	AL; OTC; QL
once daily oral tablet	One Daily Essential	Preferred	AL; OTC; QL
<b>ONE DAILY ESSENTIAL ORAL TABLET</b>		Preferred	AL; OTC; QL
one daily essentials oral tablet	One Daily Essential	Non-Preferred	AL; OTC; QL
one daily multivitamin adult oral tablet	One Daily Essential	Preferred	AL; OTC; QL
one daily oral tablet	One Daily Essential	Preferred	AL; OTC; QL

Drug Name	Reference	Status	Notes
<b>ONE VITE DAILY MULTIVITAMIN ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ONE-A-DAY ADULT VITACRAVES+DHA ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>ONE-A-DAY ESSENTIAL ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ONE-A-DAY MENS ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
one-daily multi vitamins oral tablet	One Daily Essential	Preferred	AL; OTC; QL
one-daily multi-vitamin oral tablet	One Daily Essential	Preferred	AL; OTC; QL
quintabs oral tablet	One Daily Essential	Non-Preferred	AL; OTC; QL
stress formula oral tablet	One Daily Essential	Preferred	AL; OTC; QL
stress formula/zinc/energy oral tablet	One Daily Essential	Non-Preferred	AL; OTC; QL
<b>STRESSTABS ENERGY ORAL TABLET</b>		Preferred	AL; OTC; QL
<b>TAB-A-VITE ORAL TABLET</b>		Preferred	AL; OTC; QL
<b>TAB-A-VITE/BETA CAROTENE ORAL TABLET</b>		Preferred	AL; OTC; QL
<b>THERA ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
thera-tabs oral tablet	One Daily Essential	Preferred	AL; OTC; QL
<b>THEREMS ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
tm-daily vite oral tablet	One Daily Essential	Non-Preferred	AL; OTC; QL
true multivitamin oral tablet	One Daily Essential	Non-Preferred	AL; OTC; QL
vit e-vit c-beta carotene oral tablet	One Daily Essential	Preferred	AL; OTC; QL
vitalee oral tablet	One Daily Essential	Preferred	AL; OTC; QL
<b>VITEYES CLASSIC ZINC FREE ORAL CAPSULE</b>		Non-Preferred	AL; OTC
<b>VITLIPID N ADULT INTRAVENOUS EMULSION</b>		Non-Preferred	
<b>ZELDANA ORAL CAPSULE</b>		Non-Preferred	AL; OTC
<b>ZE-PLUS ORAL CAPSULE</b>		Non-Preferred	AL; OTC
<b>*NIACIN W/ INOSITOL ***</b>			
niacin flush free oral capsule		Preferred	OTC
no flush niacin oral capsule		Preferred	OTC
<b>*PED MULTI VITAMINS W/FL &amp; FE***</b>			
multi-vit/iron/fluoride oral solution		Preferred	AL; OTC
multi-vitamin/fluoride/iron oral solution		Preferred	AL

Drug Name	Reference	Status	Notes
POLY-VI-FLOR/IRON ORAL SUSPENSION		Non-Preferred	
POLY-VI-FLOR/IRON ORAL TABLET CHEWABLE		Non-Preferred	
QUFLORA FE PEDIATRIC ORAL LIQUID		Non-Preferred	AL
<b>*PED MULTIPLE VITAMINS W/ MINERALS***</b>			
ACTIVNUTRIENTS ORAL TABLET CHEWABLE		Non-Preferred	AL; OTC
CENTRUM FLAVOR BURST KIDS ORAL TABLET CHEWABLE		Non-Preferred	AL; OTC
CENTRUM KIDS ORAL TABLET CHEWABLE		Non-Preferred	AL; OTC
DEKAS PLUS ORAL LIQUID		Non-Preferred	AL; OTC
emergen-c kidz immune+ oral tablet chewable	ActivNutrients	Non-Preferred	AL; OTC
EMERGEN-C KIDZ ORAL TABLET CHEWABLE		Non-Preferred	AL; OTC
FLINTSTONES + EXTRA IRON ORAL TABLET CHEWABLE		Non-Preferred	AL; OTC
FLINTSTONES COMPLETE ORAL TABLET CHEWABLE		Non-Preferred	AL; OTC
FLINTSTONES GUMMIES COMPLETE ORAL TABLET CHEWABLE		Non-Preferred	AL; OTC
FLINTSTONES GUMMIES ORAL TABLET CHEWABLE		Non-Preferred	AL; OTC
FLINTSTONES GUMMIES-IMMUNITY ORAL TABLET CHEWABLE		Non-Preferred	AL; OTC
FLINTSTONES SOUR GUMMIES ORAL TABLET CHEWABLE		Non-Preferred	AL; OTC
FLINTSTONES TODDLER ORAL TABLET CHEWABLE		Non-Preferred	AL; OTC
FLINTSTONES-IMMUNITY SUPPORT ORAL TABLET CHEWABLE		Non-Preferred	AL; OTC
just 4 kidz multivit/probiotic oral tablet chewable	ActivNutrients	Non-Preferred	AL; OTC
multivitamin childrens gummies oral tablet chewable	ActivNutrients	Non-Preferred	AL; OTC

Drug Name	Reference	Status	Notes
<b>MVW COMPLETE FORMULATION ORAL SOLUTION</b>		Non-Preferred	OTC
mvw hi-d drops w/extra vit d oral liquid	DEKAs Plus	Non-Preferred	AL; OTC
<b>MVW MODULATOR FORMULATION PEDS ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>NANOVM 1-3 YEARS ORAL POWDER</b>		Non-Preferred	OTC
<b>NANOVM 4-8 YEARS ORAL POWDER</b>		Non-Preferred	OTC
<b>NANOVM 9-18 YEARS ORAL POWDER</b>		Non-Preferred	OTC
<b>NANOVM T/F ORAL POWDER</b>		Non-Preferred	OTC
<b>ONE-A-DAY JOLLY RANCHER ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>UPSPRING BABY IRON-IMMUNITY ORAL LIQUID</b>		Non-Preferred	AL; OTC
upspringbaby multivitamin/iron oral liquid	DEKAs Plus	Non-Preferred	AL; OTC
<b>VITALETS CHILDRENS ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>YUMVSKIDS MULTI ZERO ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
<b>*PED MV W/ FLUORIDE***</b>			
<b>FLORAFOL PEDIATRIC ORAL TABLET CHEWABLE</b>		Non-Preferred	
<b>FLORIVA PLUS ORAL SOLUTION</b>		Non-Preferred	
multivitamin w/fluoride oral tablet chewable	FloraFol Pediatric	Preferred	
multivitamin/fluoride oral solution	Floriva Plus	Non-Preferred	AL; OTC
multi-vitamin/fluoride oral solution	Floriva Plus	Preferred	AL
multivitamin/fluoride oral tablet chewable	FloraFol Pediatric	Preferred	
<b>MULTI-VIT-FLOR ORAL TABLET CHEWABLE</b>		Non-Preferred	
<b>POLY-VI-FLOR ORAL SUSPENSION</b>		Non-Preferred	
<b>POLY-VI-FLOR ORAL TABLET CHEWABLE</b>		Non-Preferred	
<b>QUFLORA PEDIATRIC ORAL SOLUTION</b>		Non-Preferred	AL
<b>QUFLORA PEDIATRIC ORAL TABLET CHEWABLE</b>		Non-Preferred	

Drug Name	Reference	Status	Notes
<b>SOLUVITA WITH FLUORIDE ORAL SOLUTION</b>		Non-Preferred	AL; OTC
<b>*PED MV W/ IRON***</b>			
<b>BPROTECTED PEDIA POLY-VITE/FE ORAL SOLUTION</b>		Preferred	OTC; QL
<b>HONEY BEARS W/IRON-ZINC ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC; QL
multivitamin drops/iron oral solution	Poly-Vi-Sol/Iron	Preferred	OTC; QL
multivitamins plus iron child oral tablet chewable	Cerovite Jr	Non-Preferred	OTC
<b>POLY-VI-SOL/IRON ORAL SOLUTION</b>		Preferred	OTC; QL
poly-vita/iron oral solution	BProtected Pedia Poly-Vite/Fe	Preferred	OTC; QL
poly-vite/iron oral solution	Poly-Vi-Sol/Iron	Preferred	OTC; QL
<b>*PED VITAMINS ACD &amp; FA W/ FLUORIDE***</b>			
<b>TRI-VI-FLOR ORAL SUSPENSION</b>		Non-Preferred	
tri-vi-floro oral suspension	Tri-Vi-Flor	Non-Preferred	
<b>*PED VITAMINS ACD W/ FLUORIDE***</b>			
<b>SOLUVITA ACD WITH FLUORIDE ORAL SOLUTION</b>		Non-Preferred	AL; OTC
tri-vite/fluoride oral solution	SoluVita ACD with Fluoride	Preferred	AL
vitamins acd-fluoride oral solution	SoluVita ACD with Fluoride	Non-Preferred	AL; OTC
<b>*PEDIATRIC MULTIPLE VITAMINS &amp; MINERALS W/ FLUORIDE***</b>			
<b>FLORIVA ORAL TABLET CHEWABLE</b>		Non-Preferred	AL
<b>*PEDIATRIC MULTIPLE VITAMINS***</b>			
<b>BPROTECTED PEDIA POLY-VITE ORAL SOLUTION</b>		Preferred	
childrens chew multivitamin oral tablet chewable	One-A-Day VitaCraves+Omega-3	Preferred	AL; OTC
<b>INFUVITE PEDIATRIC INTRAVENOUS SOLUTION</b>		Non-Preferred	

Drug Name	Reference	Status	Notes
multivitamin infant & toddler oral solution	BProtected Pedia Poly-Vite	Preferred	OTC
<b>NOVAMV PEDIATRIC MULTI-VITAMIN ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>ONE-A-DAY VITACRAVES+OMEGA-3 ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>POLY-VI-SOL ORAL SOLUTION</b>		Preferred	OTC
poly-vita oral solution	BProtected Pedia Poly-Vite	Preferred	OTC
poly-vite pediatric oral solution	BProtected Pedia Poly-Vite	Preferred	OTC
<b>VITALIPID N INFANT INTRAVENOUS EMULSION</b>		Non-Preferred	
<b>VITLIPID N INFANT INTRAVENOUS EMULSION</b>		Non-Preferred	
<b>*PEDIATRIC VITAMINS A &amp; D W/ C***</b>			
<b>TRI-VI-SOL A/C/D ORAL SOLUTION</b>		Non-Preferred	OTC
tri-vite pediatric oral solution		Preferred	OTC
vitamin a/c/d/ infant/toddler oral solution	Tri-Vi-Sol A/C/D	Non-Preferred	OTC
vitamin a-c-d infant oral solution	Tri-Vi-Sol A/C/D	Non-Preferred	OTC
<b>*PEDIATRIC VITAMINS***</b>			
<b>HONEY BEARS ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC
multivitamin gummies childrens oral tablet chewable	Honey Bears	Non-Preferred	AL; OTC
<b>*PRENATAL MV &amp; MIN W/FE-FA &amp; COENZYME Q10***</b>			
<b>THERANATAL OVAVITE ORAL THERAPY PACK</b>		Preferred	AL; OTC; QL
<b>*PRENATAL MV &amp; MIN W/FE-FA***</b>			
<b>ATABEX EC ORAL TABLET DELAYED RELEASE</b>		Non-Preferred	AL; QL
<b>ATABEX OB ORAL TABLET</b>		Non-Preferred	AL; QL
<b>ATABEX ORAL TABLET CHEWABLE</b>		Preferred	AL; OTC; QL
azesco oral tablet		Non-Preferred	AL; QL
<b>CITRANATAL B-CALM ORAL</b>		Non-Preferred	AL; QL



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
classic prenatal oral tablet		Preferred	AL; OTC; QL
c-nate dha oral capsule	Viva DHA	Non-Preferred	AL; QL
completenate oral tablet chewable		Non-Preferred	AL; QL
<b>CO-NATAL FA ORAL TABLET</b>		Non-Preferred	AL; QL
<b>CONCEPT DHA ORAL CAPSULE</b>		Non-Preferred	AL; QL
<b>CONCEPT OB ORAL CAPSULE</b>		Non-Preferred	AL; QL
<b>ELITE-OB ORAL TABLET</b>		Non-Preferred	AL; QL
<b>ENBRACE HR ORAL CAPSULE</b>		Non-Preferred	AL; QL
<b>FOLIVANE-OB ORAL CAPSULE</b>		Non-Preferred	AL; QL
<b>HEALTHY MAMA BE WELL ROUNDED ORAL THERAPY PACK</b>		Preferred	AL; OTC; QL
<b>INATAL GT ORAL TABLET</b>		Non-Preferred	AL; QL
jenliva prenatal/postnatal oral capsule		Non-Preferred	AL; QL
kosher prenatal plus iron oral tablet		Non-Preferred	AL; QL
masonatal oral tablet		Preferred	AL; OTC; QL
m-natal plus oral tablet	TheraNatal Core Nutrition	Non-Preferred	AL; QL
multi prenatal oral tablet	Right Step Prenatal	Preferred	AL; OTC; QL
natal pnv oral tablet		Non-Preferred	AL; QL
<b>NATALVIT ORAL TABLET</b>		Non-Preferred	AL; QL
<b>NEEVO DHA ORAL CAPSULE</b>		Non-Preferred	AL; QL
neonatal complete oral tablet	TheraNatal Core Nutrition	Non-Preferred	AL; QL
<b>NEONATAL PLUS ORAL TABLET</b>		Non-Preferred	AL; QL
neonatal prenatal oral tablet	Right Step Prenatal	Preferred	AL; OTC; QL
<b>NEONATAL VITAMIN ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>NESTABS DHA ORAL</b>		Non-Preferred	AL; QL
<b>NESTABS ORAL TABLET</b>		Preferred	AL; QL
<b>NIVA-PLUS ORAL TABLET</b>		Non-Preferred	AL; QL
<b>OB COMPLETE ONE ORAL CAPSULE</b>		Non-Preferred	AL; QL
<b>OB COMPLETE ORAL TABLET</b>		Non-Preferred	AL; QL
<b>OB COMPLETE PETITE ORAL CAPSULE</b>		Non-Preferred	AL; QL
<b>OB COMPLETE PREMIER ORAL TABLET</b>		Non-Preferred	AL; QL
<b>OB COMPLETE/DHA ORAL CAPSULE</b>		Non-Preferred	AL; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>OBTREX ORAL TABLET</b>		Preferred	AL; OTC; QL
one vite womens oral tablet	Right Step Prenatal	Preferred	AL; OTC; QL
one vite womens plus oral tablet	TheraNatal Core Nutrition	Non-Preferred	AL; QL
<b>ONE-A-DAY WOMENS PRENATAL 1 ORAL CAPSULE</b>		Preferred	AL; OTC; QL
<b>ONE-A-DAY WOMENS PRENATAL ORAL</b>		Preferred	AL; OTC; QL
pnv tabs 20-1 oral tablet		Non-Preferred	AL; QL
pnv-omega oral capsule		Non-Preferred	AL; QL
pregenna oral tablet		Non-Preferred	AL; QL
prena1 pearl oral capsule extended release	VitaPearl	Non-Preferred	AL; QL
prenatabs fa oral tablet	Co-Natal FA	Preferred	AL; OTC; QL
<b>PRENATABS RX ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
prenatal (w/iron & fa) oral tablet		Preferred	AL; OTC; QL
prenatal 19 oral tablet		Preferred	AL; OTC; QL
prenatal 19 oral tablet 29-1 mg		Non-Preferred	AL; QL
prenatal 19 oral tablet chewable		Non-Preferred	AL; QL
prenatal complete oral tablet		Preferred	AL; OTC; QL
<b>PRENATAL ESSENTIALS ORAL CAPSULE</b>		Non-Preferred	AL; OTC; QL
prenatal formula a-free oral tablet		Preferred	AL; OTC; QL
prenatal formula oral capsule		Preferred	AL; OTC; QL
prenatal forte oral tablet		Preferred	AL; OTC; QL
prenatal multi +dha oral capsule		Preferred	AL; OTC; QL
prenatal one daily oral tablet	Right Step Prenatal	Preferred	AL; OTC; QL
prenatal oral tablet 27-0.8 mg	Right Step Prenatal	Preferred	AL; QL
prenatal oral tablet 27-1 mg	TheraNatal Core Nutrition	Non-Preferred	AL; QL
prenatal oral tablet 28-0.8 mg, 6.75-0.2 mg		Preferred	AL; OTC; QL
prenatal plus oral tablet	TheraNatal Core Nutrition	Non-Preferred	AL; QL
prenatal plus vitamin/mineral oral tablet	TheraNatal Core Nutrition	Non-Preferred	AL; QL
prenatal vitamin and mineral oral tablet		Preferred	AL; OTC; QL
prenatal vitamins oral tablet	Right Step Prenatal	Preferred	AL; OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
prenatal/iron oral tablet		Preferred	AL; OTC; QL
<b>PRENATAL-U ORAL CAPSULE</b>		Non-Preferred	AL; QL
<b>PRENATE ELITE ORAL TABLET</b>		Non-Preferred	AL; QL
<b>PRENATRIX ORAL TABLET</b>		Non-Preferred	AL; QL
<b>PRENATRYL ORAL TABLET</b>		Non-Preferred	AL; QL
<b>PRIMACARE ORAL CAPSULE</b>		Non-Preferred	AL; QL
<b>PROVIDA OB ORAL CAPSULE</b>		Non-Preferred	AL; QL
relnate dha oral capsule	Viva DHA	Non-Preferred	AL; QL
<b>RIGHT STEP PRENATAL ORAL TABLET</b>		Preferred	AL; OTC; QL
<b>SELECT-OB ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; QL
se-natal 19 oral tablet		Non-Preferred	AL; QL
se-natal 19 oral tablet chewable		Non-Preferred	AL; QL
<b>TARON-C DHA ORAL CAPSULE</b>		Non-Preferred	AL; QL
<b>THERANATAL CORE NUTRITION ORAL TABLET</b>		Preferred	AL; OTC; QL
thrivite rx oral tablet	Prenatabs Rx	Non-Preferred	AL; QL
<b>TRICARE ORAL TABLET</b>		Non-Preferred	AL; QL
trinatal rx 1 oral tablet		Non-Preferred	AL; QL
<b>TRINATE ORAL TABLET</b>		Non-Preferred	AL; QL
<b>UPSPRING PRENATAL COMPLETE ORAL CAPSULE</b>		Preferred	AL; OTC; QL
<b>VINATE CARE ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; OTC; QL
<b>VINATE DHA RF ORAL CAPSULE</b>		Non-Preferred	AL; QL
<b>VITAFOL GUMMIES ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; QL
<b>VITAFOL-OB ORAL TABLET</b>		Non-Preferred	AL; QL
vita-pac oral capsule		Preferred	AL; OTC; QL
<b>VITAPEARL ORAL CAPSULE EXTENDED RELEASE</b>		Non-Preferred	AL; QL
<b>VITATHELY WITH GINGER ORAL TABLET</b>		Non-Preferred	AL; QL
<b>VIVA DHA ORAL CAPSULE</b>		Non-Preferred	AL; QL
westab plus oral tablet	TheraNatal Core Nutrition	Non-Preferred	AL; QL
zalvit oral tablet		Non-Preferred	AL; QL
ziphex oral tablet		Non-Preferred	AL; QL

Drug Name	Reference	Status	Notes
<b>*PRENATAL MV &amp; MIN W/FE-FA-CA-OMEGA 3 FISH OIL***</b>			
complete natal dha oral		Non-Preferred	AL; QL
prenatal + complete multi oral therapy pack		Preferred	AL; OTC; QL
<b>*PRENATAL MV &amp; MIN W/FE-FA-DHA &amp; CHOLINE***</b>			
<b>ONE A DAY PRENATAL ADV BRAIN ORAL THERAPY PACK</b>		Preferred	AL; OTC; QL
<b>*PRENATAL MV &amp; MIN W/FE-FA-DHA***</b>			
cadeau dha oral capsule		Preferred	AL; OTC; QL
<b>CENTRUM SPECIALIST PRENATAL ORAL</b>		Preferred	AL; OTC; QL
<b>CITRANATAL 90 DHA ORAL</b>		Non-Preferred	AL; QL
<b>CITRANATAL ASSURE ORAL</b>		Non-Preferred	AL; QL
<b>CITRANATAL HARMONY ORAL CAPSULE</b>		Non-Preferred	AL; QL
<b>CITRANATAL MEDLEY ORAL CAPSULE</b>		Non-Preferred	AL; QL
<b>ENFAMIL EXPECTA ORAL</b>		Preferred	AL; OTC; QL
<b>NESTABS ONE ORAL CAPSULE</b>		Non-Preferred	AL; QL
<b>OBSTETRIX ONE ORAL CAPSULE</b>		Preferred	AL; OTC; QL
pnv-dha oral capsule		Non-Preferred	AL; QL
pnv-dha+docusate oral capsule		Non-Preferred	AL; QL
pregen dha oral capsule		Non-Preferred	AL; QL
prena 1 true oral	VitaTrue	Non-Preferred	AL; QL
prenaissance oral capsule		Non-Preferred	AL; QL
prenaissance plus oral capsule		Non-Preferred	AL; QL
prenatal multi +dha oral capsule		Preferred	AL; OTC; QL
<b>PRENATAL MULTIVITAMIN + DHA ORAL</b>		Preferred	AL; OTC; QL
prenatal multivitamin plus dha oral capsule		Preferred	AL; OTC; QL
prenatal/folic acid+dha oral capsule		Preferred	AL; OTC; QL
prenatal+dha oral		Preferred	AL; OTC; QL
<b>PRENATE DHA ORAL CAPSULE</b>		Non-Preferred	AL; QL
<b>PRENATE ENHANCE ORAL CAPSULE</b>		Non-Preferred	AL; QL

Drug Name	Reference	Status	Notes
<b>PRENATE ESSENTIAL ORAL CAPSULE</b>		Non-Preferred	AL; QL
<b>PRENATE MINI ORAL CAPSULE</b>		Non-Preferred	AL; QL
<b>PRENATE PIXIE ORAL CAPSULE</b>		Non-Preferred	AL; QL
<b>PRENATE RESTORE ORAL CAPSULE</b>		Non-Preferred	AL; QL
<b>SELECT-OB+DHA ORAL</b>		Non-Preferred	AL; QL
<b>SIMILAC PRENATAL EARLY SHIELD ORAL</b>		Preferred	AL; OTC; QL
<b>STUART ONE ORAL CAPSULE</b>		Preferred	AL; OTC; QL
<b>THERANATAL COMPLETE ORAL</b>		Preferred	AL; OTC; QL
<b>THERANATAL ONE ORAL CAPSULE</b>		Preferred	AL; OTC; QL
tristart dha oral capsule		Non-Preferred	AL; QL
ultra prenatal vit/min + dha oral capsule		Non-Preferred	AL; OTC
<b>VITAFOL FE+ ORAL CAPSULE</b>		Non-Preferred	AL; QL
<b>VITAFOL ULTRA ORAL CAPSULE</b>		Non-Preferred	AL; QL
<b>VITAFOL-OB+DHA ORAL</b>		Non-Preferred	AL; QL
<b>VITAFOL-ONE ORAL CAPSULE</b>		Non-Preferred	AL; QL
<b>VITAMEDMD ONE RX/QUATREFOLIC ORAL CAPSULE</b>		Non-Preferred	QL
<b>VITATRUE ORAL</b>		Non-Preferred	AL; QL
westgel dha oral capsule		Non-Preferred	AL; QL
<b>*PRENATAL MV &amp; MINERALS W/FA WITHOUT IRON***</b>			
<b>ALIVE DAILY SUP PRENATAL GUMMI ORAL TABLET CHEWABLE</b>		Preferred	AL; OTC; QL
<b>ALIVE PRENATAL ORAL TABLET CHEWABLE</b>		Preferred	OTC
<b>GOOD START PRENATAL NOURISH ORAL TABLET CHEWABLE</b>		Preferred	AL; OTC; QL
<b>ONE A DAY PRENATAL ORAL TABLET CHEWABLE</b>		Preferred	AL; OTC; QL
prenatal + complete multi oral therapy pack		Preferred	AL; OTC; QL
prenatal adult gummy/dha/fa oral tablet chewable	One A Day Prenatal	Preferred	AL; OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
prenatal gummies oral tablet chewable	Alive Daily Sup Prenatal Gummi	Preferred	AL; OTC; QL
prenatal gummies/dha & fa oral tablet chewable		Preferred	AL; OTC; QL
<b>PRENATE ORAL TABLET CHEWABLE</b>		Non-Preferred	AL; QL
<b>*PRENATAL VITAMINS***</b>			
<b>PREMESISRX ORAL TABLET</b>		Non-Preferred	AL; QL
prena1 oral tablet chewable		Non-Preferred	AL; QL
<b>PRENATE AM ORAL TABLET</b>		Non-Preferred	AL; QL
<b>*SPECIALTY VITAMINS PRODUCTS***</b>			
a thru z advantage oral tablet	Allerwell Allergy Formula	Preferred	AL; OTC; QL
<b>ADRENAL MANAGER ORAL CAPSULE</b>		Non-Preferred	OTC; QL
<b>ADRENALIV ORAL CAPSULE</b>		Non-Preferred	OTC; QL
adrenoid oral capsule	Adrenal Manager	Non-Preferred	OTC; QL
<b>ALLERWELL ALLERGY FORMULA ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
bilberry plus oral capsule	Adrenal Manager	Non-Preferred	OTC; QL
biotin plus keratin oral tablet	Allerwell Allergy Formula	Non-Preferred	AL; OTC; QL
cardiopress oral capsule	Adrenal Manager	Non-Preferred	OTC; QL
<b>CENTRUM PERFORMANCE ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>CENTRUM SPECIALIST ENERGY ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
cholase control oral capsule	Adrenal Manager	Non-Preferred	OTC; QL
<b>COGNIUM COMPLETE GUMMIES ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
collagen ultra oral capsule	Adrenal Manager	Non-Preferred	OTC; QL
<b>COMPLETE BALANCE MENOPAUSE RLF ORAL</b>		Non-Preferred	OTC
complete menopause am/pm oral	Complete Balance Menopause Rlf	Non-Preferred	OTC
<b>ELON MATRIX 5000 COMPLETE ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ELON MATRIX 5000 ORAL TABLET</b>		Non-Preferred	AL; OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>ELON MATRIX COMPLETE ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ELON MATRIX PLUS ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ELON R3 ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>FEMQUIL ORAL CAPSULE</b>		Non-Preferred	OTC; QL
<b>GERM DEFENSE PM ORAL TABLET EFFERVESCENT</b>		Non-Preferred	OTC
<b>GLYCOTROL COMPLETE ORAL CAPSULE</b>		Non-Preferred	OTC; QL
<b>GLYCOTROL ORAL CAPSULE</b>		Non-Preferred	OTC; QL
hair nourishing supplement oral tablet	Allerwell Allergy Formula	Non-Preferred	AL; OTC; QL
heart savior oral capsule	Adrenal Manager	Non-Preferred	OTC; QL
<b>HEART TABS ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>ICAPS LUTEIN &amp; ZEAXANTHIN ORAL TABLET DELAYED RELEASE</b>		Non-Preferred	OTC
<b>IMMUNERX ORAL CAPSULE</b>		Non-Preferred	OTC; QL
immunicare oral capsule	Adrenal Manager	Non-Preferred	OTC; QL
inulose blood sugar support oral capsule	Adrenal Manager	Non-Preferred	OTC; QL
<b>LIPIDSHIELD PLUS ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>LIPOTRIAD VISION SUPPORT ORAL CAPSULE</b>		Non-Preferred	OTC; QL
lipotriad vision support plus oral capsule	Adrenal Manager	Non-Preferred	OTC; QL
<b>LIPOTRIAD VISIONARY ORAL CAPSULE</b>		Non-Preferred	OTC; QL
<b>MEDCAPS DPO ORAL CAPSULE</b>		Non-Preferred	OTC; QL
<b>MEDCAPS IS ORAL CAPSULE</b>		Non-Preferred	OTC; QL
<b>MEDCAPS T3 ORAL CAPSULE</b>		Non-Preferred	OTC; QL
<b>MEMORALL ORAL CAPSULE</b>		Non-Preferred	OTC; QL
memory complex brain health oral tablet	Allerwell Allergy Formula	Non-Preferred	AL; OTC; QL
<b>METHYL PROTECT ORAL CAPSULE</b>		Non-Preferred	OTC; QL
<b>METHYL-GUARD ORAL CAPSULE</b>		Non-Preferred	OTC; QL
<b>METHYL-GUARD PLUS ORAL CAPSULE</b>		Non-Preferred	OTC; QL
<b>MG PLUS PROTEIN ORAL TABLET</b>		Non-Preferred	AL; OTC; QL

Drug Name	Reference	Status	Notes
<b>MIL ADREGEN ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
<b>RETAINED VISION ORAL CAPSULE</b>		Non-Preferred	OTC; QL
synertropin oral capsule	Adrenal Manager	Non-Preferred	OTC; QL
ultimate fat burner oral tablet	Allerwell Allergy Formula	Preferred	AL; OTC; QL
<b>UPSPRING HE NATAL ORAL TABLET</b>		Non-Preferred	AL; OTC; QL
varisan vitality oral tablet	Allerwell Allergy Formula	Preferred	AL; OTC; QL
vitamins for hair oral capsule	Adrenal Manager	Non-Preferred	OTC; QL
vitamins for hair oral tablet	Allerwell Allergy Formula	Preferred	AL; OTC; QL
<b>WOMENS MENOPAUSE VITA PAK ORAL</b>		Non-Preferred	OTC
<b>WOMENS VITA PAK ORAL</b>		Non-Preferred	OTC
<b>*VITAMIN C, VITAMIN D &amp; ZINC***</b>			
d3/vitamin c/zinc oral tablet		Non-Preferred	OTC
<b>*VITAMIN D &amp; K***</b>			
<b>D3 + K2 DOTS ORAL TABLET</b>		Non-Preferred	OTC
d3 + k2 oral capsule	K2-D3 Max	Non-Preferred	OTC
dosokap oral tablet	D3 + K2 Dots	Non-Preferred	OTC
k2 plus d3 oral tablet	D3 + K2 Dots	Non-Preferred	OTC
k2-d3 10,000 oral capsule	K2-D3 Max	Non-Preferred	OTC
k2-d3 5000 oral capsule	K2-D3 Max	Non-Preferred	OTC
<b>K2-D3 MAX ORAL CAPSULE</b>		Non-Preferred	OTC
<b>VITAMIN D2 + K1 ORAL SOLUTION</b>		Non-Preferred	OTC
<b>*VITAMIN MIXTURES***</b>			
ecee plus oral tablet		Non-Preferred	OTC
<b>*VITAMINS A &amp; D W/ K***</b>			
adk oral capsule		Non-Preferred	OTC
<b>*VITAMINS A &amp; D***</b>			
cod liver oil for kids oral oil		Non-Preferred	OTC
cod liver oil oral capsule		Non-Preferred	OTC
cod liver oil oral oil		Non-Preferred	
cod liver oil oral oil 5000-500 unit/5ml		Non-Preferred	OTC
cod liver oil w/vit a & d oral capsule		Non-Preferred	OTC
cod liver oil/low vitamin a oral capsule		Non-Preferred	OTC



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
cod liver oil/vitamins a & d oral capsule		Non-Preferred	OTC
norwegian cod liver oil oral capsule		Non-Preferred	OTC
norwegian cod liver oil oral oil		Non-Preferred	OTC
vitamin a & d oral capsule		Non-Preferred	OTC
vitamin a & d oral tablet		Non-Preferred	OTC
vitamins a & d oral capsule		Non-Preferred	OTC
vitamins a & d oral tablet		Non-Preferred	OTC
yl natural vitamin a & d oral capsule		Non-Preferred	OTC
<b>*VITAMINS C &amp; E***</b>			
<b>CRANBERRY URINARY COMFORT ORAL CAPSULE</b>		Non-Preferred	OTC
<b>*VITAMINS W/ LIPOTROPICS***</b>			
<b>ACTIFLOVIT EAR HEALTH ORAL TABLET</b>		Non-Preferred	OTC; QL
b complex (lipotropics) oral tablet	Lipo Flavonoid Plus	Preferred	AL; OTC; QL
b complex formula 1 (lipotrop) oral tablet	Lipo Flavonoid Plus	Preferred	AL; OTC; QL
balance b-100 oral tablet	Lipo Flavonoid Plus	Preferred	AL; OTC; QL
balanced b-50 complex oral capsule		Preferred	OTC
balanced b-50 complex oral tablet	Lipo Flavonoid Plus	Preferred	AL; OTC; QL
b-stress oral capsule		Preferred	OTC
complex b-100-inositol oral tablet extended release		Non-Preferred	OTC
ear health formula oral tablet	Lipo Flavonoid Plus	Preferred	AL; OTC; QL
ear health plus oral tablet	Lipo Flavonoid Plus	Preferred	AL; OTC; QL
geravine oral elixir		Non-Preferred	OTC
<b>LIPO FLAVONOID PLUS ORAL TABLET</b>		Preferred	AL; OTC; QL
<b>LIPOFLAVOVIT ORAL TABLET</b>		Preferred	AL; OTC; QL
<b>LIPOTRIAD ORAL TABLET</b>		Non-Preferred	OTC; QL
mega multiple/chelated mineral oral tablet	Lipo Flavonoid Plus	Preferred	AL; OTC; QL
multi-vitamin hp/minerals oral capsule		Preferred	OTC
risanoid plus oral tablet	Lipo Flavonoid Plus	Preferred	AL; OTC; QL
ultra b-100 complex oral tablet	Lipo Flavonoid Plus	Preferred	AL; OTC; QL

Drug Name	Reference	Status	Notes
<b>*MUSCULOSKELETAL THERAPY AGENTS*</b>			
<b>*ARTICULAR CARTILAGE REPAIR THERAPY***</b>			
<b>MACI INTRA-ARTICULAR SHEET</b>		Non-Preferred	
<b>*CENTRAL MUSCLE RELAXANTS***</b>			
<b>AMRIX ORAL CAPSULE EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; QL
baclofen intrathecal solution	Gablofen	Non-Preferred	
baclofen intrathecal solution prefilled syringe	Gablofen	Non-Preferred	
baclofen oral solution	Ozobax DS	Non-Preferred	PA; QL
baclofen oral suspension	Fleqsuvy	Non-Preferred	PA; QL
baclofen oral tablet 10 mg, 20 mg		Preferred	QL
baclofen oral tablet 15 mg, 5 mg		Non-Preferred	QL
carisoprodol oral tablet	Soma	Preferred	QL
chlorzoxazone oral tablet 250 mg, 375 mg, 750 mg		Non-Preferred	PA; QL
chlorzoxazone oral tablet 500 mg		Preferred	QL
cyclobenzaprine hcl er oral capsule extended release 24 hour	Amrix	Non-Preferred	PA; QL
cyclobenzaprine hcl oral tablet 10 mg, 5 mg		Preferred	QL
cyclobenzaprine hcl oral tablet 7.5 mg	Fexmid	Non-Preferred	PA; QL
<b>FEXMID ORAL TABLET</b>		Non-Preferred	PA; QL
<b>FLEQSUVY ORAL SUSPENSION</b>		Non-Preferred	PA; QL
<b>GABLOFEN INTRATHECAL SOLUTION</b>		Non-Preferred	
<b>GABLOFEN INTRATHECAL SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	
<b>LIORESAL INTRATHECAL SOLUTION</b>		Non-Preferred	
<b>LYVISPAH ORAL PACKET</b>		Non-Preferred	PA; QL
metaxalone oral tablet		Non-Preferred	PA; QL
methocarbamol injection solution	Robaxin	Non-Preferred	
methocarbamol oral tablet 1000 mg	Tanlor	Non-Preferred	PA; QL
methocarbamol oral tablet 500 mg, 750 mg		Preferred	QL

Drug Name	Reference	Status	Notes
orphenadrine citrate er oral tablet extended release 12 hour		Preferred	QL
orphenadrine citrate injection solution		Non-Preferred	
<b>OZOBAX DS ORAL SOLUTION</b>		Non-Preferred	PA; QL
<b>ROBAXIN INJECTION SOLUTION</b>		Non-Preferred	
<b>SOMA ORAL TABLET</b>		Non-Preferred	PA; QL
<b>TANLOR ORAL TABLET</b>		Non-Preferred	PA; QL
tizanidine hcl oral capsule	Zanaflex	Non-Preferred	PA; QL
tizanidine hcl oral tablet	Zanaflex	Preferred	QL
<b>ZANAFLEX ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>ZANAFLEX ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*DIRECT MUSCLE RELAXANTS***</b>			
<b>DANTRIUM INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>DANTRIUM ORAL CAPSULE</b>		Non-Preferred	
dantrolene sodium intravenous solution reconstituted	Dantrium	Non-Preferred	
dantrolene sodium oral capsule	Dantrium	Preferred	
<b>REVONTO INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>RYANODEX INTRAVENOUS SUSPENSION RECONSTITUTED</b>		Non-Preferred	
<b>*MUSCLE RELAXANT COMBINATIONS***</b>			
<b>NORGESIC ORAL TABLET</b>		Non-Preferred	PA; QL
<b>ORPHENGESIC FORTE ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*RETINOIC ACID RECEPTOR GAMMA SELECTIVE AGONISTS***</b>			
<b>SOHONOS ORAL CAPSULE</b>		Non-Preferred	PA; SP; QL
<b>*NASAL AGENTS - SYSTEMIC AND TOPICAL*</b>			
<b>*ANESTHETIC COMBINATIONS**</b>			
lidocaine hcl-oxymetazoline nasal solution prefilled syringe		Non-Preferred	

Drug Name	Reference	Status	Notes
<b>*ANTI-HISTAMINE-STEROID***</b>			
azelastine-fluticasone nasal suspension	Dymista	Non-Preferred	QL
<b>DYMISTA NASAL SUSPENSION</b>		Non-Preferred	QL
<b>RYALTRIS NASAL SUSPENSION</b>		Non-Preferred	QL
<b>*DECONGESTANT COMBINATION OTHER***</b>			
<b>AFRIN MENTHOL SPRAY NASAL SOLUTION</b>		Non-Preferred	OTC
<b>*NASAL AGENTS - MISC.***</b>			
<b>AFRIN SALINE NASAL MIST NASAL SOLUTION</b>		Preferred	AL; OTC; QL
<b>ALLERBLOCK ADULT NASAL POWDER</b>		Non-Preferred	OTC
<b>ALLERBLOCK TRAVEL NASAL POWDER</b>		Non-Preferred	OTC
<b>AYR NASAL MIST ALLERGY/SINUS NASAL SOLUTION</b>		Non-Preferred	OTC
<b>AYR SALINE NASAL DROPS NASAL SOLUTION</b>		Preferred	OTC; QL
<b>AYR SALINE NASAL NASAL GEL</b>		Non-Preferred	AL; OTC
<b>AYR SALINE NASAL NO-DRIP NASAL GEL</b>		Non-Preferred	AL; OTC
<b>LITTLE REMEDIES SALINE MIST NASAL AEROSOL SOLUTION</b>		Non-Preferred	OTC
<b>LITTLE REMEDIES SALINE NASAL SOLUTION</b>		Non-Preferred	OTC
<b>NASADROPS SALINE ON THE GO NASAL SOLUTION</b>		Non-Preferred	OTC; QL
<b>NASAL MOIST NASAL SOLUTION</b>		Preferred	AL; OTC; QL
<b>NASOGEL NASAL GEL</b>		Non-Preferred	AL; OTC
<b>NOZIN NASAL SANITIZER NASAL KIT</b>		Non-Preferred	OTC
<b>NOZIN NASAL SANITIZER POPSWAB NASAL SWAB</b>		Non-Preferred	OTC
<b>OCEAN NASAL SPRAY NASAL SOLUTION</b>		Non-Preferred	AL; OTC; QL
saline nasal gel	Ayr Saline Nasal	Non-Preferred	AL; OTC
saline nasal spray nasal solution	Afrin Saline Nasal Mist	Preferred	AL; OTC; QL
<b>SIMPLY SALINE NASAL AEROSOL SOLUTION</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
sinus wash salt nasal crystals		Non-Preferred	OTC
true nasal moisturizing nasal solution	Afrin Saline Nasal Mist	Preferred	AL; OTC; QL
<b>ZARBEES SOOTHING SALINE MIST NASAL AEROSOL SOLUTION</b>		Non-Preferred	OTC
<b>*NASAL AGENTS MISC. - COMBINATIONS***</b>			
<b>ALKALOL NASAL SOLUTION</b>		Non-Preferred	OTC
<b>ALKALOL SALINE NASAL SOLUTION</b>		Non-Preferred	OTC
<b>ALLERRINSE SINUS RINSE KIT NASAL PACKET</b>		Non-Preferred	OTC
<b>AYR SALINE NASAL GEL NASAL SWAB</b>		Non-Preferred	OTC
<b>AYR SALINE NASAL NETI RINSE NASAL PACKET</b>		Non-Preferred	OTC
<b>AYR SALINE NASAL RINSE NASAL PACKET</b>		Non-Preferred	OTC
classic neti pot sinus wash nasal kit	SinuCleanse Neti Pot	Non-Preferred	OTC
<b>GELONASAL NASAL SOLUTION</b>		Non-Preferred	OTC
kettle neti pot sinus wash nasal kit	SinuCleanse Neti Pot	Non-Preferred	OTC
<b>NASADOCK PLUS NASAL PACKET</b>		Non-Preferred	OTC
<b>NASAFLO NETI POT NASAL WASH NASAL PACKET</b>		Non-Preferred	OTC
<b>NASAFLO PORCELAIN NASAL RINSE NASAL PACKET</b>		Non-Preferred	OTC
<b>NASAL MOIST NASAL GEL</b>		Non-Preferred	OTC
<b>NASALCARE FOR KIDS NASAL PACKET</b>		Non-Preferred	OTC
<b>NASALCARE FOR KIDS STARTER KIT NASAL PACKET</b>		Non-Preferred	OTC
<b>NASALCARE NASAL PACKET</b>		Non-Preferred	OTC
<b>NASALCARE NASALCLEANSE KIT NASAL PACKET</b>		Non-Preferred	OTC
<b>NASAMIST ALL-IN-ONE NASAL AEROSOL SOLUTION</b>		Non-Preferred	OTC
<b>NASAMIST HYPERTONIC NASAL AEROSOL SOLUTION</b>		Non-Preferred	OTC
<b>NASAMIST ISOTONIC NASAL AEROSOL SOLUTION</b>		Non-Preferred	OTC
neti pot sinus wash nasal kit	SinuCleanse Neti Pot	Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>NOSE BETTER EXTERNAL GEL</b>		Non-Preferred	OTC
<b>NOSE BETTER NATURAL MIST NASAL SOLUTION</b>		Non-Preferred	OTC
<b>OCEAN COMPLETE SINUS RINSE NASAL AEROSOL SOLUTION</b>		Non-Preferred	OTC
<b>OCEAN NASAL MOISTURIZER NASAL GEL</b>		Non-Preferred	OTC
<b>OCEAN ULTRA SALINE MIST NASAL SOLUTION</b>		Non-Preferred	OTC
<b>PONARIS NASAL SOLUTION</b>		Non-Preferred	OTC
<b>PRETZ IRRIGATION NASAL SOLUTION</b>		Non-Preferred	OTC
<b>PRETZ NASAL SOLUTION</b>		Non-Preferred	OTC
<b>PRETZ NATUR MOIST NASAL SPRAY NASAL SOLUTION</b>		Non-Preferred	OTC
<b>RHINASE NASAL GEL</b>		Non-Preferred	OTC
<b>RHINASE NASAL SOLUTION</b>		Non-Preferred	OTC
saline nasal packet	SinuCleanse Refill	Non-Preferred	OTC
sesame oil nasal spray nasal solution	GeloNasal	Non-Preferred	OTC
<b>SINUCLEANSE NETI POT NASAL KIT</b>		Non-Preferred	OTC
<b>SINUCLEANSE REFILL NASAL PACKET</b>		Non-Preferred	OTC
<b>SINUCLEANSE SQUEEZE NASAL KIT</b>		Non-Preferred	OTC
<b>SINUFLO READYRINSE NASAL KIT</b>		Non-Preferred	OTC
<b>SINUGATOR NASAL WASH NASAL PACKET</b>		Non-Preferred	OTC
<b>SINUS RINSE BOTTLE KIT NASAL PACKET</b>		Non-Preferred	OTC
<b>SINUS RINSE KIT NASAL PACKET</b>		Non-Preferred	OTC
<b>SINUS RINSE KIT PEDIATRIC NASAL PACKET</b>		Non-Preferred	OTC
<b>SINUS RINSE NASAL PACKET</b>		Non-Preferred	OTC
<b>SINUS RINSE PEDIATRIC STARTER NASAL PACKET</b>		Non-Preferred	OTC
<b>SINUS RINSE REFILL NASAL PACKET</b>		Non-Preferred	OTC
<b>SINUS RINSE REFILL PEDIATRIC NASAL PACKET</b>		Non-Preferred	OTC
sinus wash squeeze bottle nasal kit	SinuCleanse Neti Pot	Non-Preferred	OTC

Drug Name	Reference	Status	Notes
squeeze bottle sinus wash nasal kit	SinuCleanse Neti Pot	Non-Preferred	OTC
<b>XLEAR SINUS CARE SPRAY NASAL SOLUTION</b>		Non-Preferred	OTC
<b>XLEAR SINUS CARE SPRAY/KIDS NASAL SOLUTION</b>		Non-Preferred	OTC
<b>XYNASE NASAL SOLUTION</b>		Non-Preferred	OTC
<b>*NASAL ANESTHETICS***</b>			
cocaine hcl nasal solution	Numbrino	Non-Preferred	
goprelto nasal solution	Numbrino	Non-Preferred	
<b>NUMBRINO NASAL SOLUTION</b>		Non-Preferred	
<b>*NASAL ANTICHOLINERGICS***</b>			
ipratropium bromide nasal solution		Preferred	QL
<b>*NASAL ANTIHISTAMINES***</b>			
<b>ASTEPRO CHILDRENS NASAL SOLUTION</b>		Preferred	OTC; QL
<b>ASTEPRO NASAL SOLUTION</b>		Preferred	OTC; QL
azelastine hcl nasal solution	Astepro	Preferred	QL
olopatadine hcl nasal solution		Non-Preferred	QL
<b>*NASAL DECONGESTANT INHALERS***</b>			
<b>BENZEDREX NASAL INHALER</b>		Non-Preferred	OTC
<b>*NASAL MAST CELL STABILIZERS***</b>			
cromolyn sodium nasal aerosol solution	NasalCrom	Preferred	OTC
<b>NASALCROM NASAL AEROSOL SOLUTION</b>		Non-Preferred	OTC
<b>*NASAL STEROIDS***</b>			
allergy nasal spray nasal suspension	Nasonex 24HR	Non-Preferred	PA; OTC; QL
budesonide nasal suspension		Preferred	OTC; QL
<b>CLARISPRAY NASAL SUSPENSION</b>		Preferred	OTC; QL
<b>FLOINASE ALLERGY RELIEF NASAL SUSPENSION</b>		Non-Preferred	OTC; QL
<b>FLOINASE SENSIMIST CHILDRENS NASAL SUSPENSION</b>		Non-Preferred	PA; OTC; QL
<b>FLOINASE SENSIMIST NASAL SUSPENSION</b>		Non-Preferred	PA; OTC; QL
flunisolide nasal solution		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
fluticasone propionate suspension 50 mcg/act nasal (otc)	ClariSpray	Preferred	QL
fluticasone propionate suspension 50 mcg/act nasal (rx)	ClariSpray	Non-Preferred	PA; QL
mometasone furoate nasal suspension	Nasonex 24HR	Non-Preferred	PA; QL
<b>NASACORT ALLERGY 24HR NASAL AEROSOL</b>		Non-Preferred	PA; OTC; QL
<b>NASONEX 24HR NASAL SUSPENSION</b>		Non-Preferred	PA; OTC; QL
<b>OMNARIS NASAL SUSPENSION</b>		Non-Preferred	PA; QL
<b>QNASL CHILDRENS NASAL AEROSOL SOLUTION</b>		Non-Preferred	PA; QL
<b>QNASL NASAL AEROSOL SOLUTION</b>		Non-Preferred	PA; QL
<b>SINUVA NASAL IMPLANT</b>		Non-Preferred	
triamcinolone acetonide nasal aerosol	Nasacort Allergy 24HR	Preferred	OTC; QL
<b>XHANCE NASAL EXHALER SUSPENSION</b>		Non-Preferred	PA; QL
<b>*SYSTEMIC DECONGESTANTS***</b>			
medi-phenyl oral tablet		Non-Preferred	AL; OTC
pseudoephedrine hcl er oral tablet extended release 12 hour	Sudafed Sinus Congestion 12HR	Preferred	AL; OTC
pseudoephedrine hcl oral tablet 30 mg	Sudafed	Preferred	AL; OTC
pseudoephedrine hcl oral tablet 60 mg	SudoGest	Preferred	AL
<b>SUDAFED CHILDRENS ORAL LIQUID</b>		Non-Preferred	AL; OTC
<b>SUDAFED ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>SUDAFED PE CHILDRENS ORAL SOLUTION</b>		Non-Preferred	AL; OTC
<b>SUDAFED PE SINUS CONGESTION ORAL TABLET</b>		Non-Preferred	AL; OTC
<b>SUDAFED SINUS CONGESTION 24HR ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	AL; OTC
<b>SUDAFED SINUS CONGESTION ORAL TABLET</b>		Non-Preferred	AL; OTC
sudanyl pe oral tablet		Non-Preferred	AL; OTC
<b>SUDOGEST PE ORAL TABLET</b>		Non-Preferred	AL; OTC



Drug Name	Reference	Status	Notes
ZEPHREX-D ORAL CAPSULE ABUSE-DETERRENT		Non-Preferred	AL; OTC
ZEPHREX-D ORAL TABLET ABUSE-DETERRENT		Non-Preferred	AL; OTC
<b>*TOPICAL DECONGESTANTS***</b>			
AFRIN 12 HOUR NASAL SOLUTION		Non-Preferred	OTC
AFRIN ALL NIGHT NODRIP NASAL SOLUTION		Non-Preferred	OTC
AFRIN ALLERGY SINUS NASAL SOLUTION		Non-Preferred	OTC
AFRIN CHILDRENS EXTRA MOISTURE NASAL SOLUTION		Non-Preferred	OTC
AFRIN NODRIP CHILDRENS NASAL SOLUTION		Non-Preferred	OTC
AFRIN NODRIP EXTRA MOISTURE NASAL SOLUTION		Non-Preferred	OTC
AFRIN NODRIP NIGHT NASAL SOLUTION		Non-Preferred	OTC
AFRIN NODRIP ORIGINAL NASAL SOLUTION		Non-Preferred	OTC
AFRIN NODRIP SEVERE CONGEST NASAL SOLUTION		Non-Preferred	OTC
AFRIN NODRIP SINUS NASAL SOLUTION		Non-Preferred	OTC
AFRIN ORIGINAL NASAL SOLUTION		Non-Preferred	OTC
AFRIN PUMP MIST NASAL SOLUTION		Non-Preferred	OTC
AFRIN SEVERE CONGESTION NASAL SOLUTION		Non-Preferred	OTC
anefrin spray nasal solution	Mucinex Sinus-Max Clear & Cool	Preferred	OTC
LITTLE REMEDIES DECONG NOSE NASAL SOLUTION		Non-Preferred	OTC
MUCINEX SINUS-MAX CLEAR & COOL NASAL SOLUTION		Preferred	OTC
MUCINEX SINUS-MAX SINUS/ALLRGY NASAL SOLUTION		Preferred	OTC
NEO-SYNEPHRINE COLD/ALLRG MILD NASAL SOLUTION		Non-Preferred	OTC
NEO-SYNEPHRINE COLD/ALLRGY EXT NASAL SOLUTION		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
NEO-SYNEPHRINE COLD/ALLERGY REG NASAL SOLUTION		Non-Preferred	OTC
RHINASE D NASAL GEL		Non-Preferred	OTC
VICKS SINEX 12 HOUR DECONGEST NASAL SOLUTION		Non-Preferred	OTC
VICKS SINEX MOISTURIZING NASAL SOLUTION		Non-Preferred	OTC
VICKS SINEX SEVERE DECONGEST NASAL SOLUTION		Non-Preferred	OTC
VICKS SINEX SEVERE NASAL SOLUTION		Non-Preferred	OTC
<b>*NEUROMUSCULAR AGENTS*</b>			
<b>*ALS AGENTS - ANTISENSE OLIGONUCLEOTIDES***</b>			
QALSODY INTRATHECAL SOLUTION		Non-Preferred	PA; QL
<b>*ALS AGENTS - MISCELLANEOUS***</b>			
edaravone intravenous solution	Radicava	Non-Preferred	PA; SP
RADICAVA INTRAVENOUS SOLUTION		Non-Preferred	PA; SP
RADICAVA ORS ORAL SUSPENSION		Non-Preferred	PA; SP; QL
RADICAVA ORS STARTER KIT ORAL SUSPENSION		Non-Preferred	PA; SP; QL
<b>*BENZATHIAZOLES***</b>			
riluzole oral tablet		Preferred	PA; SP; QL
TEGLUTIK ORAL SUSPENSION		Non-Preferred	PA; QL
<b>*DEPOLARIZING MUSCLE RELAXANTS***</b>			
ANECTINE INJECTION SOLUTION		Non-Preferred	
QUELICIN INJECTION SOLUTION		Non-Preferred	
succinylcholine chloride injection solution	Anectine	Non-Preferred	
succinylcholine chloride injection solution prefilled syringe		Non-Preferred	
<b>*FRIEDRICH'S ATAXIA AGENTS - NRF2 PATHWAY ACTIVATORS***</b>			
SKYCLARYS ORAL CAPSULE		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
<b>*MUSCULAR DYSTROPHY - GENE THERAPY AGENTS***</b>			
amondys 45 intravenous solution		Non-Preferred	
<b>ELEVIDYS 10.0-10.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 10.5-11.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 11.5-12.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 12.5-13.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 13.5-14.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 14.5-15.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 15.5-16.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 16.5-17.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 17.5-18.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 18.5-19.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 19.5-20.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 20.5-21.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 21.5-22.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 22.5-23.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 23.5-24.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 24.5-25.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 25.5-26.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 26.5-27.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 27.5-28.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>ELEVIDYS 28.5-29.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 29.5-30.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 30.5-31.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 31.5-32.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 32.5-33.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 33.5-34.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 34.5-35.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 35.5-36.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 36.5-37.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 37.5-38.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 38.5-39.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 39.5-40.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 40.5-41.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 41.5-42.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 42.5-43.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 43.5-44.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 44.5-45.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 45.5-46.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 46.5-47.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 47.5-48.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 48.5-49.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>ELEVIDYS 49.5-50.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 50.5-51.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 51.5-52.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 52.5-53.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 53.5-54.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 54.5-55.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 55.5-56.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 56.5-57.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 57.5-58.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 58.5-59.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 59.5-60.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 60.5-61.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 61.5-62.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 62.5-63.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 63.5-64.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 64.5-65.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 65.5-66.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 66.5-67.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 67.5-68.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 68.5-69.4 KG INTRAVENOUS KIT</b>		Non-Preferred	SP
<b>ELEVIDYS 69.5 KG PLUS INTRAVENOUS KIT</b>		Non-Preferred	SP

Drug Name	Reference	Status	Notes
VILTEPSO INTRAVENOUS SOLUTION		Non-Preferred	
<b>*MUSCULAR DYSTROPHY - HISTONE DEACETYLASE INHIBITORS**</b>			
DUVYZAT ORAL SUSPENSION		Non-Preferred	PA; QL
<b>*NEUROMUSCULAR BLOCKING AGENT - NEUROTOXINS***</b>			
BOTOX INJECTION SOLUTION RECONSTITUTED		Non-Preferred	PA
<b>*NONDEPOLARIZING MUSCLE RELAXANTS***</b>			
atracurium besylate intravenous solution		Non-Preferred	
cisatracurium besylate (pf) intravenous solution		Non-Preferred	
cisatracurium besylate intravenous solution		Non-Preferred	
rocuronium bromide intravenous solution		Non-Preferred	
vecuronium bromide intravenous solution reconstituted		Non-Preferred	
<b>*RETT SYNDROME AGENTS - GLYCINE-PROLINE-GLUTAMATE ANALOGS***</b>			
DAYBUE ORAL SOLUTION		Non-Preferred	PA; QL
<b>*SPINAL MUSCULAR ATROPHY-SMN2 SPLICING MODIFIERS***</b>			
EVRYSDI ORAL SOLUTION RECONSTITUTED		Non-Preferred	PA; QL
<b>*NUTRIENTS*</b>			
<b>*AMINO ACID MIXTURES***</b>			
ADD-INS COMPLETE ORAL PACKET		Non-Preferred	OTC
ADRENAMAX ORAL CAPSULE		Non-Preferred	OTC
AMINO 4800 ORAL TABLET EXTENDED RELEASE		Non-Preferred	OTC
amino action oral tablet	PhenylAde PheBLOC	Non-Preferred	OTC
AMINOSYN II INTRAVENOUS SOLUTION		Non-Preferred	

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>AMINOSYN-PF 7% INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>AMINOSYN-PF INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>ARGUMENT AT ORAL PACKET</b>		Non-Preferred	OTC
<b>CLINIMIX E/DEXTROSE (2.75/5) INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>CLINIMIX E/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>CLINIMIX E/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>CLINIMIX E/DEXTROSE (5/15) INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>CLINIMIX E/DEXTROSE (5/20) INTRAVENOUS SOLUTION</b>		Non-Preferred	
clinimix e/dextrose (8/10) intravenous solution		Non-Preferred	
clinimix e/dextrose (8/14) intravenous solution		Non-Preferred	
<b>CLINIMIX/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>CLINIMIX/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>CLINIMIX/DEXTROSE (5/15) INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>CLINIMIX/DEXTROSE (5/20) INTRAVENOUS SOLUTION</b>		Non-Preferred	
clinimix/dextrose (6/5) intravenous solution		Non-Preferred	
clinimix/dextrose (8/10) intravenous solution		Non-Preferred	
clinimix/dextrose (8/14) intravenous solution		Non-Preferred	
<b>CLINISOL SF INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>COMPLETE AMINO ACID MIX ORAL POWDER</b>		Non-Preferred	OTC
<b>COMPLEX JUNIOR MSD ORAL POWDER</b>		Non-Preferred	OTC
<b>COMPLEX MSUD ORAL BAR</b>		Non-Preferred	OTC
<b>COMPLEX MSUD ORAL POWDER</b>		Non-Preferred	OTC
daily amino acid oral tablet	PhenylAde PheBLOC	Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>DECUBAMINE ORAL POWDER</b>		Non-Preferred	OTC
<b>ESSENTIAL AMINO ACID MIX ORAL POWDER</b>		Non-Preferred	OTC
<b>GLUTARADE AMINO ACID BLEND ORAL POWDER</b>		Non-Preferred	OTC
<b>GLUTARADE ESSENTIAL GA-1 ORAL POWDER</b>		Non-Preferred	OTC
<b>GLUTARADE JUNIOR GA-1 ORAL POWDER</b>		Non-Preferred	OTC
<b>G-PREPROTEIN ORAL LIQUID</b>		Non-Preferred	OTC
<b>LIQUACEL ORAL LIQUID</b>		Non-Preferred	OTC
<b>LIQUACEL PUMP + GO ORAL LIQUID</b>		Non-Preferred	OTC
nutrasentials oral powder	Complete Amino Acid Mix	Non-Preferred	OTC
<b>PERIFLEX LQ PKU ORAL LIQUID</b>		Non-Preferred	OTC
<b>PHENYLADE AMINO ACID BLEND ORAL PACKET</b>		Non-Preferred	OTC
<b>PHENYLADE AMINO ACID ORAL BAR</b>		Non-Preferred	OTC
<b>PHENYLADE MTE AMINO ACID BLEND ORAL PACKET</b>		Non-Preferred	OTC
<b>PHENYLADE MTE ORAL POWDER</b>		Non-Preferred	OTC
<b>PHENYLADE ORAL POWDER</b>		Non-Preferred	OTC
<b>PHENYLADE PHEBLOC ORAL POWDER</b>		Non-Preferred	OTC
<b>PHENYLADE PHEBLOC ORAL TABLET</b>		Non-Preferred	OTC
<b>PHENYLADE40 DRINK MIX ORAL PACKET</b>		Non-Preferred	OTC
<b>PHLEXY-10 ORAL TABLET</b>		Non-Preferred	OTC
pku golike 10g p.e. oral bar	Complex MSUD	Non-Preferred	OTC
pku golike 5g p.e. oral bar	Complex MSUD	Non-Preferred	OTC
pku golike plus 16+ oral packet	Add-Ins Complete	Non-Preferred	OTC
pku golike plus 4-16 oral packet	Add-Ins Complete	Non-Preferred	OTC
<b>PKU MAXAMUM ORAL POWDER</b>		Non-Preferred	OTC
<b>PLENAMINE INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>PRE PROTEIN ORAL TABLET</b>		Non-Preferred	OTC



Drug Name	Reference	Status	Notes
<b>PREMASOL INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>PREPROTEIN 20 ORAL LIQUID</b>		Non-Preferred	OTC
<b>PREPROTEIN ORAL LIQUID</b>		Non-Preferred	OTC
<b>PROSOL INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>PROTEINEX ORAL TABLET</b>		Non-Preferred	OTC
<b>TRAVASOL INTRAVENOUS SOLUTION</b>		Non-Preferred	
triamino oral tablet	PhenylAde PheBLOC	Non-Preferred	OTC
<b>TROPHAMINE INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>XPHE MAXAMUM ORAL PACKET</b>		Non-Preferred	OTC
<b>XYMOBOIX ORAL POWDER</b>		Non-Preferred	OTC
<b>*AMINO ACIDS-SINGLE***</b>			
acetyl l-carnitine hcl oral capsule		Non-Preferred	OTC
<b>ACTICARNITINE SF ORAL SOLUTION</b>		Non-Preferred	OTC
arginine oral packet		Non-Preferred	OTC
arginine oral tablet		Non-Preferred	OTC
arginine2000 oral packet		Non-Preferred	OTC
<b>CARNITEX ORAL CAPSULE</b>		Non-Preferred	OTC
<b>CITRULLINE 1000 ORAL PACKET</b>		Non-Preferred	OTC
<b>CITRULLINE200 ORAL PACKET</b>		Non-Preferred	OTC
cystine oral packet		Non-Preferred	OTC
<b>CYTO ARG ORAL POWDER</b>		Non-Preferred	OTC
<b>CYTO CARN ORAL POWDER</b>		Non-Preferred	OTC
<b>CYTOLLINE ORAL POWDER</b>		Non-Preferred	OTC
<b>ELCYS INTRAVENOUS SOLUTION</b>		Non-Preferred	
gaba oral tablet dispersible		Non-Preferred	OTC
g-levocarnitine s/f oral solution	Acticarnitine SF	Non-Preferred	OTC
glutamine oral capsule		Non-Preferred	OTC
glutamine oral powder		Non-Preferred	OTC
<b>GLUTASOLVE ORAL PACKET</b>		Non-Preferred	OTC
glutathione reduced oral capsule		Non-Preferred	OTC
glycine oral powder	GlyMax	Non-Preferred	OTC
glycine500 oral packet		Non-Preferred	OTC
<b>GLYMAX ORAL POWDER</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>ISOLEUCINE 1000 ORAL PACKET</b>		Non-Preferred	OTC
isoleucine oral packet		Non-Preferred	OTC
l-arginine double strength oral tablet		Non-Preferred	OTC
l-arginine maximum strength oral tablet		Non-Preferred	OTC
l-arginine oral capsule		Non-Preferred	OTC
l-arginine oral powder	Cyto Arg	Non-Preferred	OTC
l-arginine oral tablet		Non-Preferred	OTC
l-arginine oral tablet extended release		Non-Preferred	OTC
l-carnitine oral capsule		Non-Preferred	OTC
l-carnitine oral tablet		Non-Preferred	OTC
leucine oral packet		Non-Preferred	OTC
levocarnitine (dietary) oral solution	Acticarnitine SF	Non-Preferred	OTC
levocarnitine (dietary) oral tablet		Non-Preferred	OTC
levocarnitine l-tartrate oral capsule		Non-Preferred	OTC
levocarnitine l-tartrate oral tablet		Non-Preferred	OTC
levocarnitine oral capsule		Non-Preferred	OTC
l-formula lysine hcl oral tablet		Non-Preferred	OTC
l-glutamine oral powder		Non-Preferred	OTC
l-glutamine oral tablet		Non-Preferred	OTC
l-lysine hcl oral capsule		Non-Preferred	OTC
l-lysine hcl oral tablet		Non-Preferred	OTC
l-lysine oral capsule		Non-Preferred	OTC
l-lysine oral tablet		Non-Preferred	OTC
l-phenylalanine oral tablet		Non-Preferred	OTC
l-proline oral capsule		Non-Preferred	OTC
l-theanine oral capsule		Non-Preferred	OTC
l-threonine oral tablet		Non-Preferred	OTC
l-tryptophan oral capsule		Non-Preferred	OTC
l-tryptophan oral tablet		Non-Preferred	OTC
l-tyrosine oral capsule		Non-Preferred	OTC
l-tyrosine oral powder		Non-Preferred	OTC
l-tyrosine oral tablet		Non-Preferred	OTC
l-valine oral powder		Non-Preferred	OTC
lysine hcl oral tablet		Non-Preferred	OTC
methionine oral packet		Non-Preferred	OTC
nac 600 oral capsule	NF Formulas NAC	Non-Preferred	OTC

Drug Name	Reference	Status	Notes
nac oral capsule	NF Formulas NAC	Non-Preferred	OTC
<b>N-A-C SUSTAIN ORAL TABLET EXTENDED RELEASE</b>		Non-Preferred	OTC
n-acetyl cysteine oral capsule	NF Formulas NAC	Non-Preferred	OTC
<b>NF FORMULAS NAC ORAL CAPSULE</b>		Non-Preferred	OTC
phenylalanine oral packet		Non-Preferred	OTC
pure l-arginine hcl oral capsule		Non-Preferred	OTC
pure l-citrulline oral capsule		Non-Preferred	OTC
pure l-citrulline oral powder	Cytolline	Non-Preferred	OTC
pure l-tyrosine oral capsule		Non-Preferred	OTC
s-acetyl glutathione oral capsule delayed release		Non-Preferred	OTC
sp l-lysine oral tablet		Non-Preferred	OTC
taurine oral capsule		Non-Preferred	OTC
theanine 100 oral capsule		Non-Preferred	OTC
theanine 200 oral capsule		Non-Preferred	OTC
theanine gummies oral tablet chewable		Non-Preferred	OTC
tyrosine oral packet		Non-Preferred	OTC
<b>VALINE 1000 ORAL PACKET</b>		Non-Preferred	OTC
valine oral packet		Non-Preferred	OTC
<b>VITAMELTS RELAX L-THEANINE ORAL TABLET DISPERSIBLE</b>		Non-Preferred	OTC
<b>*CARBOHYDRATES***</b>			
dextrose intravenous solution		Non-Preferred	
gluco shot oral liquid		Non-Preferred	OTC
<b>GLUCOSE NURSETTE ORAL SOLUTION</b>		Non-Preferred	OTC
glucose oral liquid		Non-Preferred	OTC
<b>GOOD START 5% GLUCOSE WATER ORAL SOLUTION</b>		Preferred	OTC
<b>POLYCOSE ORAL LIQUID</b>		Non-Preferred	OTC
<b>POLYCOSE ORAL POWDER</b>		Non-Preferred	OTC
<b>SIMILAC GLUCOSE WATER ORAL SOLUTION 10 %</b>		Non-Preferred	OTC
<b>SIMILAC GLUCOSE WATER ORAL SOLUTION 5 %</b>		Preferred	OTC

Drug Name	Reference	Status	Notes
<b>*FATTY ACIDS***</b>			
TONALIN CLA ORAL CAPSULE		Non-Preferred	OTC
<b>*LIPIDS***</b>			
CLINOLIPID INTRAVENOUS EMULSION		Non-Preferred	
DOJOLVI ORAL LIQUID		Non-Preferred	PA; SP; QL
INTRALIPID INTRAVENOUS EMULSION		Non-Preferred	
KQUIK ORAL EMULSION		Non-Preferred	OTC
LIQUIGEN ORAL EMULSION		Non-Preferred	OTC
MCT OIL ORAL OIL		Non-Preferred	OTC
NUTRILIPID INTRAVENOUS EMULSION		Non-Preferred	
OMEGAVEN INTRAVENOUS EMULSION		Non-Preferred	
organic mct oil oral oil	MCT Oil	Non-Preferred	OTC
SMOFLIPID INTRAVENOUS EMULSION		Non-Preferred	
<b>*LIPOTROPIC COMBINATIONS***</b>			
ACTIPOCHOL PLUS ORAL TABLET		Non-Preferred	OTC
gram-o-leci oral tablet chewable		Preferred	OTC
lecithin concentrate oral capsule		Non-Preferred	OTC
lecithin oral capsule		Preferred	OTC
lecithin oral granules		Non-Preferred	
LIVERITE ORAL TABLET		Non-Preferred	OTC
OVASITOL ORAL PACKET		Non-Preferred	OTC
PREGNITUDE ORAL PACKET		Non-Preferred	OTC
soya lecithin oral capsule		Preferred	OTC
<b>*LIPOTROPICS***</b>			
choline citrate oral tablet		Non-Preferred	OTC
choline sr oral tablet extended release		Non-Preferred	OTC
inositol oral powder		Non-Preferred	OTC
inositol oral tablet		Preferred	OTC
PHOSPHALINE ORAL CAPSULE		Non-Preferred	OTC
PHOSPHALINE ORAL CONCENTRATE		Non-Preferred	OTC
phosphatidylserine oral capsule		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>*MISC. NUTRITIONAL SUBSTANCES COMBINATIONS***</b>			
cla oral capsule		Non-Preferred	OTC
co q-10 vitamin e fish oil oral capsule		Non-Preferred	OTC
<b>EQUAZEN PRO ORAL CAPSULE</b>		Non-Preferred	OTC
<b>EQUAZEN PRO ORAL LIQUID</b>		Non-Preferred	OTC
evening primrose oil-vit e oral capsule		Non-Preferred	OTC
<b>EXTREME OMEGA HEART HEALTH ORAL CAPSULE</b>		Non-Preferred	OTC
garlic-parsley oral capsule		Non-Preferred	OTC
garlic-parsley oral tablet		Non-Preferred	OTC
kelp-b6-lecithin-vinegar oral capsule		Preferred	OTC
lecithin w/kelp/b-6 oral tablet		Non-Preferred	OTC
lecithin-kelp-b6-cider vinegar oral capsule		Non-Preferred	OTC
lipotriad dry eye oral capsule delayed release		Non-Preferred	OTC
<b>NITEBITE ORAL BAR</b>		Non-Preferred	OTC
omega-3 + vitamin d3 ultra str oral liquid	UpSpring Baby Vit D + Brain	Non-Preferred	OTC
omega-3 complex oral capsule		Non-Preferred	OTC
<b>RELION GLUCOSE SHOT ORAL LIQUID</b>		Non-Preferred	OTC
superior omega3 w/ vitamin d oral capsule		Non-Preferred	OTC
<b>TRUEPLUS GLUCOSE SHOT ORAL LIQUID</b>		Non-Preferred	OTC
<b>UPSPRING BABY VIT D + BRAIN ORAL LIQUID</b>		Non-Preferred	OTC
<b>*MISC. NUTRITIONAL SUBSTANCES***</b>			
<b>ALASKA WILD FISH OIL ORAL CAPSULE DELAYED RELEASE</b>		Non-Preferred	OTC
algal omega-3 dha oral capsule		Preferred	OTC
<b>ALGAL-900 DHA ORAL CAPSULE 300 MG</b>		Non-Preferred	OTC; QL
<b>ALGAL-900 DHA ORAL CAPSULE 450 MG</b>		Non-Preferred	OTC
alp high3 oral capsule delayed release		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
asian ginseng oral capsule		Non-Preferred	OTC
atabex dha 200 oral capsule		Preferred	OTC
<b>COROMEGA OMEGA 3 KIDS ORAL EMULSION</b>		Non-Preferred	OTC
<b>COROMEGA OMEGA 3 SQUEEZE ORAL EMULSION</b>		Non-Preferred	OTC
creatine5000 oral packet		Non-Preferred	OTC
<b>CYTOTINE ORAL LIQUID</b>		Non-Preferred	OTC
<b>DHA ALGAL-900 ORAL CAPSULE</b>		Non-Preferred	OTC; QL
dha complete oral capsule		Preferred	OTC
dha from algae oral capsule		Preferred	OTC
<b>DIALYVITE OMEGA-3 CONCENTRATE ORAL CAPSULE</b>		Non-Preferred	OTC
evening primrose oil oral capsule		Non-Preferred	OTC
fish oil adult gummies oral tablet chewable		Non-Preferred	OTC
fish oil burp-less oral capsule 1000 mg	Maximum EPA	Non-Preferred	OTC
fish oil burp-less oral capsule 1200 mg	Theragran-M Fish Oil Conc	Non-Preferred	OTC; QL
fish oil burp-less oral capsule 500 mg	Ovega-3	Non-Preferred	OTC
fish oil burp-less oral capsule 720 mg		Non-Preferred	OTC
fish oil concentrate oral capsule	Fish Oil Pearls	Non-Preferred	OTC
fish oil double strength oral capsule	Theragran-M Fish Oil Conc	Non-Preferred	OTC; QL
fish oil extra strength oral capsule 1200 mg	Theragran-M Fish Oil Conc	Non-Preferred	OTC; QL
fish oil extra strength oral capsule 435 mg		Non-Preferred	OTC
fish oil high potency oral capsule	Maximum EPA	Non-Preferred	OTC
fish oil maximum strength oral capsule	Theragran-M Fish Oil Conc	Non-Preferred	OTC; QL
fish oil maximum strength oral capsule delayed release		Non-Preferred	OTC; QL
fish oil minis oral capsule	Ovega-3	Non-Preferred	OTC
fish oil odor-less oral capsule	Theragran-M Fish Oil Conc	Non-Preferred	OTC; QL
fish oil omega-3 oral capsule	Maximum EPA	Non-Preferred	OTC
fish oil oral capsule 1000 mg	Maximum EPA	Non-Preferred	
fish oil oral capsule 1200 mg	Theragran-M Fish Oil Conc	Non-Preferred	OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
fish oil oral capsule 300 mg	Fish Oil Pearls	Non-Preferred	OTC
fish oil oral capsule 360 mg, 435 mg, 645 mg, 875 mg		Non-Preferred	OTC
fish oil oral capsule 500 mg	Ovega-3	Non-Preferred	OTC
fish oil oral capsule 600 mg	Dialyvite Omega-3 Concentrate	Non-Preferred	OTC
fish oil oral capsule delayed release 1000 mg	OmegaPure 600 EC	Non-Preferred	OTC
fish oil oral capsule delayed release 1200 mg		Non-Preferred	OTC; QL
<b>FISH OIL PEARLS ORAL CAPSULE</b>		Non-Preferred	OTC
fish oil triple strength oral capsule		Non-Preferred	OTC
fish oil ultra oral capsule		Non-Preferred	OTC
ginseng extract oral capsule	Gin-Zing	Non-Preferred	OTC
ginseng oral capsule	Gin-Zing	Non-Preferred	OTC
<b>GIN-ZING ORAL CAPSULE</b>		Non-Preferred	OTC
gla-45 oral capsule		Non-Preferred	OTC
korean ginseng oral capsule		Non-Preferred	OTC
korean ginseng oral tablet		Non-Preferred	OTC
kp fish oil oral capsule	Theragran-M Fish Oil Conc	Non-Preferred	OTC; QL
kp omega-3 fish oil oral capsule	Theragran-M Fish Oil Conc	Non-Preferred	OTC; QL
kp omega-3 fish oil oral capsule delayed release		Non-Preferred	OTC; QL
lifes dha adult oral capsule		Preferred	OTC
lifes dha kids oral capsule		Non-Preferred	OTC
<b>MAXIMUM EPA ORAL CAPSULE</b>		Non-Preferred	OTC
<b>MEGARED ADVANCED OMEGA-3 ORAL CAPSULE</b>		Non-Preferred	OTC
mini fish oil oral capsule		Non-Preferred	OTC
mini omega-3 burp-less oral capsule		Non-Preferred	OTC
<b>MULTI GINSENG ORAL CAPSULE</b>		Non-Preferred	OTC
norwegian salmon oil oral capsule	Maximum EPA	Non-Preferred	OTC
<b>OCEAN BLUE MINICAPS OMEGA-3 ORAL CAPSULE</b>		Non-Preferred	OTC
odorless coated fish oil oral capsule delayed release	OmegaPure 600 EC	Non-Preferred	OTC
omega 3 oral capsule 1000 mg	Maximum EPA	Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
omega 3 oral capsule 1200 mg	Theragran-M Fish Oil Conc	Non-Preferred	OTC; QL
omega iii epa+dha oral capsule	Maximum EPA	Non-Preferred	OTC
<b>OMEGA MONOPURE 1300 EC ORAL CAPSULE DELAYED RELEASE</b>		Non-Preferred	OTC
<b>OMEGA MONOPURE 650 EC ORAL CAPSULE DELAYED RELEASE</b>		Non-Preferred	OTC
<b>OMEGA MONOPURE EPA EC ORAL CAPSULE DELAYED RELEASE</b>		Non-Preferred	OTC
omega-3 cf oral capsule	Maximum EPA	Non-Preferred	OTC
omega-3 epa fish oil oral capsule		Non-Preferred	OTC
omega-3 fish oil concentrate oral capsule delayed release	OmegaPure 600 EC	Non-Preferred	OTC
omega-3 fish oil ex st oral capsule		Non-Preferred	OTC
omega-3 fish oil oral capsule 1000 mg	Maximum EPA	Non-Preferred	OTC
omega-3 fish oil oral capsule 1200 mg	Theragran-M Fish Oil Conc	Non-Preferred	OTC; QL
omega-3 fish oil oral capsule 300 mg	Fish Oil Pearls	Non-Preferred	OTC
omega-3 fish oil oral capsule 500 mg	Ovega-3	Non-Preferred	OTC
omega-3 microgel oral capsule	Dialyvite Omega-3 Concentrate	Non-Preferred	OTC
omega-3 oral capsule	Maximum EPA	Non-Preferred	OTC
omega-3 oral capsule delayed release		Non-Preferred	OTC
<b>OMEGAPURE 600 EC ORAL CAPSULE DELAYED RELEASE</b>		Non-Preferred	OTC
<b>OMEGAPURE 780 EC ORAL CAPSULE DELAYED RELEASE</b>		Non-Preferred	OTC
<b>OMEGAPURE 820 ORAL CAPSULE</b>		Non-Preferred	OTC
<b>OMEGAPURE 900 EC ORAL CAPSULE DELAYED RELEASE</b>		Non-Preferred	OTC
<b>OMEGAPURE 900-TG ORAL CAPSULE</b>		Non-Preferred	OTC
<b>OMEGAPURE PRM ORAL CAPSULE</b>		Non-Preferred	OTC
<b>OMERA ORAL CAPSULE</b>		Non-Preferred	OTC
<b>OVEGA-3 ORAL CAPSULE</b>		Non-Preferred	OTC
prenatal dha oral capsule		Preferred	OTC
<b>PRO NUTRIENTS OMEGA 3 ORAL CAPSULE DELAYED RELEASE</b>		Non-Preferred	OTC



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>REALROOT GINSENG ORAL CAPSULE</b>		Non-Preferred	OTC
sam-e.p.a. oral capsule	Ovega-3	Non-Preferred	OTC
<b>SEA-OMEGA ORAL CAPSULE</b>		Non-Preferred	OTC
siberian ginseng oral capsule		Non-Preferred	OTC
<b>SUPER DHA GEMS ORAL CAPSULE</b>		Non-Preferred	OTC
<b>SUPER OMEGA-3 ORAL CAPSULE</b>		Non-Preferred	OTC
sustainable vegan omega-3 oral capsule		Non-Preferred	OTC
the very finest fish oil oral liquid		Non-Preferred	OTC
the very finest fish oil/kids oral liquid		Non-Preferred	OTC
<b>THERAGRAN-M FISH OIL CONC ORAL CAPSULE</b>		Non-Preferred	OTC; QL
<b>THEROMEGA ORAL CAPSULE</b>		Non-Preferred	OTC
<b>ULTRA OMEGA 3 ORAL CAPSULE</b>		Non-Preferred	OTC
ultra omega-3 fish oil oral capsule		Non-Preferred	OTC
<b>VITEYES OMEGA-3 TG ORAL CAPSULE</b>		Non-Preferred	OTC
<b>VITEYES OMEGA-3 VISION SUPPORT ORAL CAPSULE DELAYED RELEASE</b>		Non-Preferred	OTC
<b>*PROTEIN COMBINATIONS***</b>			
I-carnitine 500 oral tablet		Non-Preferred	OTC
<b>N.O.MAX ER ORAL TABLET EXTENDED RELEASE</b>		Non-Preferred	OTC
<b>PRO-STAT 101 ORAL LIQUID</b>		Non-Preferred	OTC
<b>PRO-STAT 64 ORAL LIQUID</b>		Non-Preferred	OTC
<b>PRO-STAT AWC ORAL LIQUID</b>		Non-Preferred	OTC
<b>PRO-STAT MAX ORAL LIQUID</b>		Non-Preferred	OTC
<b>PRO-STAT ORAL LIQUID</b>		Non-Preferred	OTC
<b>PRO-STAT PROFILE ORAL LIQUID</b>		Non-Preferred	OTC
<b>PRO-STAT RC ORAL LIQUID</b>		Non-Preferred	OTC
<b>PRO-STAT SUGAR FREE ORAL LIQUID</b>		Non-Preferred	OTC
<b>PRO-STAT/FIBER ORAL LIQUID</b>		Non-Preferred	OTC
<b>PROTEINEX ORAL LIQUID</b>		Non-Preferred	OTC
<b>PROTEINEX P100 ORAL LIQUID</b>		Non-Preferred	OTC
<b>PROTEINEX P18 ORAL LIQUID</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>PROTEINEX-18 ORAL LIQUID</b>		Non-Preferred	OTC
<b>*PROTEIN PRODUCTS***</b>			
<b>BENEPROTEIN ORAL PACKET</b>		Non-Preferred	OTC
<b>BENEPROTEIN ORAL POWDER</b>		Non-Preferred	OTC
<b>CARDIOWHEY ORAL POWDER</b>		Non-Preferred	OTC
<b>FITFOOD LEAN COLLAGEN ORAL POWDER</b>		Non-Preferred	OTC
<b>FITFOOD LEAN ORAL PACKET</b>		Non-Preferred	OTC
<b>FITFOOD LEAN WHEY ORAL PACKET</b>		Non-Preferred	OTC
<b>GI PROTECT ORAL POWDER</b>		Non-Preferred	OTC
<b>IGG 2000 CWP ORAL CAPSULE</b>		Non-Preferred	OTC
<b>IGG 2000 CWP ORAL POWDER</b>		Non-Preferred	OTC
<b>IGG PURE ORAL POWDER</b>		Non-Preferred	OTC
<b>NATURAL WHEY ORAL POWDER</b>		Non-Preferred	OTC
<b>NEW ZEALAND WHEY PROTEIN ORAL POWDER</b>		Non-Preferred	OTC
<b>NUTRA/PRO CHOCOLATE ORAL PACKET</b>		Non-Preferred	OTC
<b>NUTRA/PRO STRAWBERRY ORAL PACKET</b>		Non-Preferred	OTC
<b>NUTRA/PRO VANILLA ORAL PACKET</b>		Non-Preferred	OTC
<b>PRE PROTEIN ORAL POWDER</b>		Non-Preferred	OTC
<b>PROCEL 100 ORAL POWDER</b>		Non-Preferred	OTC
<b>PROCEL ORAL PACKET</b>		Non-Preferred	OTC
<b>PROCEL ORAL POWDER</b>		Non-Preferred	OTC
<b>PROSOURCE GELATEIN PLUS ORAL GEL</b>		Non-Preferred	OTC
<b>PROSOURCE GELATEIN PLUS/MCT ORAL GEL</b>		Non-Preferred	OTC
<b>PROSOURCE GELATEIN20 ORAL GEL</b>		Non-Preferred	OTC
<b>PROSOURCE ORAL PACKET</b>		Non-Preferred	OTC
<b>PROSOURCE PROTEIN ORAL PACKET</b>		Non-Preferred	OTC
<b>PROSOURCE PROTEIN ORAL POWDER</b>		Non-Preferred	OTC
<b>PROSOURCE TF FREE ENTERAL LIQUID</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>PROSOURCE TF20 ENFIT COMPATIBL ENTERAL LIQUID</b>		Non-Preferred	OTC
prosynminic oral powder	Beneprotein	Non-Preferred	OTC
protein oral powder	Beneprotein	Non-Preferred	OTC
protein oral tablet chewable		Non-Preferred	OTC
<b>RENAMENT ORAL PACKET</b>		Non-Preferred	OTC
<b>UNJURY ORAL POWDER</b>		Non-Preferred	OTC
wellness protein shake oral powder	Beneprotein	Non-Preferred	OTC
whey protein concentrate oral powder	Beneprotein	Non-Preferred	OTC
whey protein oral powder	Beneprotein	Non-Preferred	OTC
<b>*PROTEIN-CARBOHYDRATE-LIPID WITH ELECTROLYTE COMBINATIONS***</b>			
<b>KABIVEN INTRAVENOUS EMULSION</b>		Non-Preferred	
<b>PERIKABIVEN INTRAVENOUS EMULSION</b>		Non-Preferred	
<b>*OPHTHALMIC AGENTS*</b>			
<b>*ALPHA ADRENERGIC AGONIST &amp; CARBONIC ANHYDRASE INHIB COMB***</b>			
<b>SIMBRINZA OPHTHALMIC SUSPENSION</b>		Non-Preferred	QL
<b>*ARTIFICIAL TEAR AND LUBRICANT COMBINATIONS***</b>			
<b>ALTALUBE OPHTHALMIC OINTMENT</b>		Preferred	OTC
artificial tears ophthalmic solution	Clear Eyes Natural Tears	Preferred	OTC
artificial tears pf ophthalmic solution	Bion Tears PF	Preferred	OTC
<b>BION TEARS PF OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>CLEAR EYES NATURAL TEARS OPHTHALMIC SOLUTION</b>		Preferred	OTC
dry eye relief drops ophthalmic solution		Preferred	OTC
eye lubricant ophthalmic ointment	Altalube	Preferred	OTC
for sty relief ophthalmic ointment	Altalube	Preferred	OTC
<b>FRESHKOTE OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>FRESHKOTE PF OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>GENTEAL TEARS MODERATE PF OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>GENTEAL TEARS NIGHT-TIME OPHTHALMIC OINTMENT</b>		Preferred	OTC
<b>GENTEAL TEARS OPHTHALMIC SOLUTION</b>		Preferred	OTC
<b>GENTEAL TEARS PF OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>GENTEAL TEARS SEVERE DAY/NIGHT OPHTHALMIC GEL</b>		Non-Preferred	OTC
<b>HYPOTEARs OPHTHALMIC OINTMENT</b>		Preferred	OTC
lubricant drops/dual-action ophthalmic solution	Refresh Optive	Preferred	OTC
lubricant eye drops (pf) ophthalmic solution	Bion Tears PF	Preferred	OTC
lubricant eye drops ophthalmic solution	Systane	Preferred	OTC
lubricant eye fast acting ophthalmic ointment	Altalube	Preferred	OTC
lubricant eye nighttime ophthalmic ointment	Altalube	Preferred	OTC
lubricant eye ophthalmic ointment	Altalube	Preferred	OTC
lubricant pm ophthalmic ointment	Altalube	Preferred	OTC
lubricating eye drops ophthalmic solution	Systane	Preferred	OTC
lubrifresh p.m. ophthalmic ointment	Altalube	Preferred	OTC
<b>MOISTURE EYES OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>REFRESH DIGITAL OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>REFRESH DIGITAL PF OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>REFRESH LACRI-LUBE OPHTHALMIC OINTMENT</b>		Preferred	OTC
<b>REFRESH OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>REFRESH OPTIVE ADVANCED OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
REFRESH OPTIVE ADVANCED PF OPHTHALMIC SOLUTION		Non-Preferred	OTC
REFRESH OPTIVE MEGA-3 OPHTHALMIC SOLUTION		Non-Preferred	OTC
REFRESH OPTIVE OPHTHALMIC GEL		Non-Preferred	OTC
REFRESH OPTIVE OPHTHALMIC SOLUTION		Non-Preferred	OTC
REFRESH OPTIVE PF OPHTHALMIC SOLUTION		Non-Preferred	OTC
REFRESH P.M. OPHTHALMIC OINTMENT		Preferred	OTC
REFRESH RELIEVA OPHTHALMIC SOLUTION		Non-Preferred	OTC
REFRESH RELIEVA PF OPHTHALMIC SOLUTION		Non-Preferred	OTC
REFRESH TEARS PF OPHTHALMIC SOLUTION		Non-Preferred	OTC
RETAINÉ MGD OPHTHALMIC EMULSION		Non-Preferred	OTC
RETAINÉ PM OPHTHALMIC OINTMENT		Preferred	OTC
SOOTHE NIGHTTIME OPHTHALMIC OINTMENT		Preferred	OTC
SOOTHE OPHTHALMIC SOLUTION		Non-Preferred	OTC
STYE OPHTHALMIC OINTMENT		Preferred	OTC
STYE OPHTHALMIC SOLUTION		Preferred	OTC
SYSTANE HYDRATION PF OPHTHALMIC SOLUTION		Non-Preferred	OTC
SYSTANE NIGHTTIME OPHTHALMIC OINTMENT		Preferred	OTC
SYSTANE OPHTHALMIC GEL		Non-Preferred	OTC
SYSTANE OPHTHALMIC SOLUTION		Non-Preferred	OTC
SYSTANE PRESERVATIVE FREE OPHTHALMIC SOLUTION		Non-Preferred	OTC
SYSTANE ULTRA OPHTHALMIC SOLUTION		Non-Preferred	OTC
SYSTANE ULTRA PF OPHTHALMIC SOLUTION		Non-Preferred	OTC
ULTRA FRESH PM OPHTHALMIC OINTMENT		Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
ultra lubricating eye drops ophthalmic solution	Systane	Preferred	OTC
ultra lubricating eye drops pf ophthalmic solution	Systane Hydration PF	Preferred	OTC
<b>*ARTIFICIAL TEAR SOLUTIONS***</b>			
artificial tears ophthalmic solution	GenTeal Tears	Preferred	OTC
<b>GENTEAL TEARS OPHTHALMIC SOLUTION</b>		Preferred	OTC
just tears eye drops ophthalmic solution	GenTeal Tears	Preferred	OTC
<b>SOOTHE HYDRATION OPHTHALMIC SOLUTION</b>		Preferred	OTC
<b>SOOTHE XP OPHTHALMIC SOLUTION</b>		Preferred	OTC
<b>SOOTHE XP XTRA PROTECTION OPHTHALMIC SOLUTION</b>		Preferred	OTC
<b>SYSTANE CONTACTS OPHTHALMIC SOLUTION</b>		Preferred	OTC
<b>*ARTIFICIAL TEARS AND LUBRICANTS***</b>			
artificial tears ophthalmic solution		Non-Preferred	OTC
<b>BIOLLE GEL TEARS OPHTHALMIC GEL</b>		Non-Preferred	OTC
<b>BIOLLE TEARS OPHTHALMIC SOLUTION</b>		Preferred	OTC
<b>BIOTRUE LUBRICANT OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>BLINK TEARS OPHTHALMIC GEL</b>		Non-Preferred	OTC
<b>BLINK TEARS OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
carboxymethylcellulose sodium ophthalmic solution	Ultra Fresh	Preferred	OTC
<b>COMPUTER EYE DROPS OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>GENTEAL SEVERE OPHTHALMIC GEL</b>		Non-Preferred	OTC
<b>IMPROVUE OPHTHALMIC SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	OTC
<b>IVIZIA DRY EYES OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
lubricant eye drops ophthalmic solution	Systane Balance	Preferred	OTC
lubricant eye drops pf ophthalmic solution	Biolle Tears	Preferred	OTC
moisturizing lubricant eye ophthalmic solution	Theratears	Preferred	OTC
<b>OASIS TEARS PF OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>OASIS TEARS PLUS PF OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>OPTASE COMFORT DRY EYE OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>OPTASE DRY EYE INTENSE OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
polyvinyl alcohol ophthalmic solution		Preferred	OTC
<b>PURE &amp; GENTLE LUBRICANT OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>REFRESH CELLUVISC OPHTHALMIC GEL</b>		Non-Preferred	OTC
<b>REFRESH LIQUIGEL OPHTHALMIC GEL</b>		Non-Preferred	OTC
<b>REFRESH PLUS OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>REFRESH TEARS OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>STERILE LUBRICANT OPHTHALMIC LIQUID</b>		Non-Preferred	OTC
<b>SYSTANE BALANCE OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>SYSTANE COMPLETE OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>SYSTANE COMPLETE PF OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>THERATEARS EXTRA OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>THERATEARS EXTRA PF OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>THERATEARS NIGHTTIME OPHTHALMIC GEL</b>		Non-Preferred	OTC
<b>THERATEARS OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>THERATEARS PF OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>ULTRA FRESH OPHTHALMIC SOLUTION</b>		Preferred	OTC
ventiva ophthalmic solution		Non-Preferred	OTC
ventiva tears plus ophthalmic solution		Non-Preferred	OTC
<b>VISINE DRY EYE RELIEF OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>VISINE TIRED EYE RELIEF OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>VISTA GONIO DRY EYE RELIEF OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>*BETA-BLOCKERS - OPHTHALMIC COMBINATIONS***</b>			
brimonidine tartrate-timolol ophthalmic solution	Combigan	Non-Preferred	QL
<b>COMBIGAN OPHTHALMIC SOLUTION</b>		Non-Preferred	QL
<b>COSOPT OPHTHALMIC SOLUTION</b>		Non-Preferred	QL
<b>COSOPT PF OPHTHALMIC SOLUTION</b>		Non-Preferred	QL
dorzolamide hcl-timolol mal ophthalmic solution	Cosopt	Preferred	QL
dorzolamide hcl-timolol mal pf ophthalmic solution	Cosopt PF	Non-Preferred	QL
<b>*BETA-BLOCKERS - OPHTHALMIC***</b>			
betaxolol hcl ophthalmic solution		Preferred	QL
<b>BETIMOL OPHTHALMIC SOLUTION</b>		Non-Preferred	QL
<b>BETOPTIC-S OPHTHALMIC SUSPENSION</b>		Non-Preferred	QL
carteolol hcl ophthalmic solution		Preferred	
<b>ISTALOL OPHTHALMIC SOLUTION</b>		Non-Preferred	QL
levobunolol hcl ophthalmic solution		Preferred	
timolol maleate (once-daily) ophthalmic solution	Istalol	Non-Preferred	QL
<b>TIMOLOL MALEATE OCUDOSE OPHTHALMIC SOLUTION</b>		Non-Preferred	QL
timolol maleate ophthalmic gel forming solution		Preferred	QL



Drug Name	Reference	Status	Notes
timolol maleate ophthalmic solution		Preferred	QL
timolol maleate pf ophthalmic solution	Timolol Maleate Ocudose	Non-Preferred	QL
<b>TIMOPTIC OCUDOSE OPHTHALMIC SOLUTION</b>		Non-Preferred	QL
<b>*CHOLINERGIC AGONISTS***</b>			
<b>TYRVAYA NASAL SOLUTION</b>		Non-Preferred	PA; QL
<b>*CYCLOPLEGIC MYDRIATIC COMBINATIONS***</b>			
<b>CYCLOMYDRIL OPHTHALMIC SOLUTION</b>		Non-Preferred	
<b>MYDCOMBI OPHTHALMIC SOLUTION CARTRIDGE</b>		Non-Preferred	
<b>*CYCLOPLEGIC MYDRIATICS***</b>			
atropine sulfate ophthalmic solution		Preferred	QL
<b>CYCLOGYL OPHTHALMIC SOLUTION 0.5 %, 2 %</b>		Non-Preferred	
<b>CYCLOGYL OPHTHALMIC SOLUTION 1 %</b>		Non-Preferred	QL
cyclopentolate hcl ophthalmic solution	Cyclogyl	Non-Preferred	QL
<b>MYDRIACYL OPHTHALMIC SOLUTION</b>		Non-Preferred	
phenylephrine hcl ophthalmic solution	Altafrin	Preferred	
tropicamide ophthalmic solution	Mydriacyl	Non-Preferred	
<b>*GONIOSCOPIC SOLUTIONS***</b>			
<b>GONIOTAIRE OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>*LYMPHOCYTE FUNCTION-ASSOCIATED ANTIGEN-1 (LFA-1) ANTAG***</b>			
<b>XIIDRA OPHTHALMIC SOLUTION</b>		Non-Preferred	PA; QL
<b>*MIOTICS - CHOLINESTERASE INHIBITORS***</b>			
<b>PHOSPHOLINE IODIDE OPHTHALMIC SOLUTION RECONSTITUTED</b>		Non-Preferred	QL
<b>*MIOTICS - DIRECT ACTING***</b>			
<b>MIOCHOL-E INTRAOCULAR SOLUTION RECONSTITUTED</b>		Non-Preferred	

Drug Name	Reference	Status	Notes
<b>MIOSTAT INTRAOCULAR SOLUTION</b>		Non-Preferred	
pilocarpine hcl ophthalmic solution		Preferred	
<b>VUITY OPHTHALMIC SOLUTION</b>		Non-Preferred	PA; QL
<b>*OPHTHALMIC - MULTIPLE RECEPTOR ANGIOGENESIS INHIBITORS***</b>			
<b>VABYSMO INTRAVITREAL SOLUTION</b>		Non-Preferred	PA; SP
<b>VABYSMO INTRAVITREAL SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; SP
<b>*OPHTHALMIC ANTIALLERGIC***</b>			
<b>ALAWAY CHILDRENS ALLERGY OPHTHALMIC SOLUTION</b>		Preferred	OTC; QL
<b>ALAWAY OPHTHALMIC SOLUTION</b>		Preferred	OTC; QL
<b>ALOCRILOPHTHALMIC SOLUTION</b>		Non-Preferred	PA; QL
<b>ALOMIDOPHTHALMIC SOLUTION</b>		Non-Preferred	PA; QL
azelastine hcl ophthalmic solution		Preferred	QL
bepotastine besilate ophthalmic solution	Bepreve	Non-Preferred	PA; QL
<b>BEPREVE OPHTHALMIC SOLUTION</b>		Non-Preferred	PA; QL
cromolyn sodium ophthalmic solution		Preferred	QL
epinastine hcl ophthalmic solution		Preferred	QL
eye allergy itch relief ophthalmic solution	Pataday	Preferred	OTC; QL
eye allergy itch/redness rel ophthalmic solution	Pataday	Preferred	OTC; QL
eye itch relief ophthalmic solution	Alaway	Preferred	OTC; QL
ketotifen fumarate ophthalmic solution	Alaway	Preferred	OTC; QL
<b>LASTACAFT OPHTHALMIC SOLUTION</b>		Non-Preferred	PA; QL
olopatadine hcl ophthalmic solution 0.1 %	Pataday	Preferred	QL
olopatadine hcl solution 0.2 % ophthalmic (otc)	Pataday	Preferred	QL
olopatadine hcl solution 0.2 % ophthalmic (rx)	Pataday	Non-Preferred	QL

Drug Name	Reference	Status	Notes
<b>PATADAY OPHTHALMIC SOLUTION</b>		Preferred	OTC; QL
<b>ZADITOR OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC; QL
<b>ZERVIATE OPHTHALMIC SOLUTION</b>		Non-Preferred	PA; QL
<b>*OPHTHALMIC ANTIBIOTICS***</b>			
<b>AZASITE OPHTHALMIC SOLUTION</b>		Non-Preferred	QL
bacitracin ophthalmic ointment		Preferred	QL
<b>BESIVANCE OPHTHALMIC SUSPENSION</b>		Non-Preferred	PA; QL
<b>CILOXAN OPHTHALMIC OINTMENT</b>		Non-Preferred	QL
ciprofloxacin hcl ophthalmic solution		Preferred	QL
erythromycin ophthalmic ointment		Preferred	QL
gatifloxacin ophthalmic solution		Preferred	QL
gentamicin sulfate ophthalmic solution		Preferred	QL
levofloxacin ophthalmic solution		Preferred	QL
mitomycin intraocular solution prefilled syringe		Non-Preferred	
<b>MITOSOL OPHTHALMIC KIT</b>		Non-Preferred	
moxifloxacin hcl (2x day) ophthalmic solution		Non-Preferred	PA; QL
moxifloxacin hcl ophthalmic solution	Vigamox	Preferred	QL
<b>OCUFLOX OPHTHALMIC SOLUTION</b>		Non-Preferred	QL
ofloxacin ophthalmic solution	Ocuflox	Preferred	QL
tobramycin ophthalmic solution		Preferred	QL
<b>TOBREX OPHTHALMIC OINTMENT</b>		Non-Preferred	QL
<b>VIGAMOX OPHTHALMIC SOLUTION</b>		Non-Preferred	PA; QL
<b>*OPHTHALMIC ANTIFUNGAL ***</b>			
<b>NATACYN OPHTHALMIC SUSPENSION</b>		Non-Preferred	QL
<b>*OPHTHALMIC ANTI-INFECTIVE COMBINATIONS***</b>			
bacitracin-polymyxin b ophthalmic ointment	Polycin	Preferred	QL
neomycin-bacitracin zn-polymyx ophthalmic ointment	Neo-Polycin	Preferred	QL
neomycin-polymyxin-gramicidin ophthalmic solution		Preferred	QL

Drug Name	Reference	Status	Notes
<b>NEO-POLYCIN OPHTHALMIC OINTMENT</b>		Preferred	QL
<b>POLYCIN OPHTHALMIC OINTMENT</b>		Preferred	QL
polymyxin b-trimethoprim ophthalmic solution		Preferred	QL
<b>*OPHTHALMIC ANTISEPTICS***</b>			
<b>BETADINE OPHTHALMIC PREP OPHTHALMIC SOLUTION</b>		Non-Preferred	
<b>*OPHTHALMIC ANTIVIRALS***</b>			
trifluridine ophthalmic solution		Preferred	QL
<b>ZIRGAN OPHTHALMIC GEL</b>		Non-Preferred	QL
<b>*OPHTHALMIC CARBONIC ANHYDRASE INHIBITORS***</b>			
<b>AZOPT OPHTHALMIC SUSPENSION</b>		Non-Preferred	QL
brinzolamide ophthalmic suspension	Azopt	Non-Preferred	QL
dorzolamide hcl ophthalmic solution		Preferred	QL
<b>*OPHTHALMIC COMPLEMENT C3 INHIBITORS***</b>			
<b>SYFOVRE INTRAVITREAL SOLUTION</b>		Non-Preferred	PA
<b>*OPHTHALMIC COMPLEMENT C5 INHIBITORS***</b>			
<b>IZERVAY INTRAVITREAL SOLUTION</b>		Non-Preferred	PA; SP
<b>*OPHTHALMIC DECONGESTANT COMBINATIONS***</b>			
<b>ADVANCED EYE RELIEF MAX RED OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
advanced lubricant ophthalmic solution	Glitch Advanced Relief	Non-Preferred	OTC; QL
allergy eye ophthalmic solution	Visine	Preferred	OTC; QL
<b>CLEAR EYES COMPLETE OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>CLEAR EYES COOLING COMFORT OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>CLEAR EYES MAX REDNESS RELIEF OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>CLEAR EYES MAXIMUM ITCHY EYE OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>CLEAR EYES PURE RELIEF MS PF OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>CLEAR EYES REDNESS RELIEF OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>CLEAR EYES SENSITIVE EYES OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
eye allergy relief ophthalmic solution 0.025-0.3 %	Visine	Preferred	OTC; QL
eye allergy relief ophthalmic solution 0.027-0.315 %	Opcon-A	Preferred	OTC
eye drops advanced relief ophthalmic solution		Preferred	OTC
eye drops ar ophthalmic solution	Visine A.C.	Preferred	OTC; QL
eye drops maximum relief ophthalmic solution		Preferred	OTC
eye drops ophthalmic solution		Preferred	OTC
<b>GLITCH ADVANCED RELIEF OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC; QL
<b>NAPHCON-A OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC; QL
<b>OPCON-A OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
redness relief max strength ophthalmic solution	Clear Eyes Cooling Comfort	Non-Preferred	OTC
<b>REDNESS RELIEF OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
relief drops ophthalmic solution	Visine A.C.	Preferred	OTC; QL
relief eye drops ophthalmic solution	Visine A.C.	Preferred	OTC; QL
<b>VASOCLEAR-A OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>VISINE OPHTHALMIC SOLUTION</b>		Preferred	OTC; QL
<b>VISINE RED EYE HYDRATING COMF OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC; QL
<b>VISINE RED EYE TOTAL COMFORT OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>*OPHTHALMIC DECONGESTANTS***</b>			
eye drops ophthalmic solution	Visine Red Eye Comfort	Preferred	OTC; QL
redness reliever eye drops ophthalmic solution	Visine Red Eye Comfort	Preferred	OTC; QL

Drug Name	Reference	Status	Notes
<b>VISINE RED EYE COMFORT OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC; QL
<b>*OPHTHALMIC DIAGNOSTIC PRODUCTS***</b>			
ak-fluor intravenous solution	Fluorescein	Non-Preferred	
altafluor benox ophthalmic solution		Non-Preferred	
fluorescein intravenous solution	Fluorescein	Non-Preferred	
fluorescein sodium/benoxinate ophthalmic solution		Non-Preferred	
fluorescein-benoxinate ophthalmic solution		Non-Preferred	
<b>FLUORESCITE INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>*OPHTHALMIC ECTOPARASITICIDE**</b>			
<b>XDEMVY OPHTHALMIC SOLUTION</b>		Non-Preferred	PA; QL
<b>*OPHTHALMIC HYPEROSMOLAR PRODUCTS***</b>			
<b>ALTACHLORE OPHTHALMIC OINTMENT</b>		Non-Preferred	OTC
<b>ALTACHLORE OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>MURO 128 OPHTHALMIC OINTMENT</b>		Non-Preferred	OTC
<b>MURO 128 OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
sodium chloride (hypertonic) ophthalmic ointment	Altachlore	Non-Preferred	OTC
sodium chloride (hypertonic) ophthalmic solution	Altachlore	Non-Preferred	OTC
<b>*OPHTHALMIC IMMUNOMODULATORS***</b>			
<b>CEQUA OPHTHALMIC SOLUTION</b>		Non-Preferred	PA; QL
cyclosporine ophthalmic emulsion	Restasis	Preferred	PA; QL
<b>RESTASIS MULTIDOSE OPHTHALMIC EMULSION</b>		Non-Preferred	PA; QL
<b>RESTASIS OPHTHALMIC EMULSION</b>		Non-Preferred	PA; QL
<b>VERKAZIA OPHTHALMIC EMULSION</b>		Non-Preferred	PA; QL
<b>VEVYE OPHTHALMIC SOLUTION</b>		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
<b>*OPHTHALMIC IRRIGATION SOLUTIONS***</b>			
<b>BSS INTRAOCULAR SOLUTION</b>		Non-Preferred	
<b>BSS PLUS INTRAOCULAR SOLUTION</b>		Non-Preferred	
<b>COLLYRIUM EYE WASH OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
collyrium for fresh eyes ophthalmic solution	Collyrium Eye Wash	Non-Preferred	OTC
<b>EYE STREAM OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
eye wash ophthalmic solution	Collyrium Eye Wash	Non-Preferred	OTC
<b>EYEAID IRRIGATING OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>MEDI-FIRST EYEWASH OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>PHYSICIANS CARE EYEWASH OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>*OPHTHALMIC KINASE INHIBITORS - COMBINATIONS***</b>			
<b>ROCKLATAN OPHTHALMIC SOLUTION</b>		Non-Preferred	QL
<b>*OPHTHALMIC LOCAL ANESTHETIC - COMBINATIONS***</b>			
bup-lido intraocular solution prefilled syringe		Non-Preferred	
lidocaine hcl-bupivacaine hcl intraocular solution prefilled syringe		Non-Preferred	
<b>*OPHTHALMIC LOCAL ANESTHETICS***</b>			
<b>AKTEN OPHTHALMIC GEL</b>		Non-Preferred	
<b>ALCAINE OPHTHALMIC SOLUTION</b>		Non-Preferred	
<b>IHEEZO OPHTHALMIC GEL</b>		Non-Preferred	
proparacaine hcl ophthalmic solution	Alcaine	Non-Preferred	
tetracaine hcl ophthalmic solution	Altacaine	Non-Preferred	
<b>*OPHTHALMIC NERVE GROWTH FACTORS***</b>			
<b>OXERVATE OPHTHALMIC SOLUTION</b>		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
<b>*OPHTHALMIC NONSTEROIDAL ANTI-INFLAMMATORY AGENTS***</b>			
ACULAR LS OPHTHALMIC SOLUTION		Non-Preferred	PA; QL
ACULAR OPHTHALMIC SOLUTION		Non-Preferred	PA; QL
ACUVAIL OPHTHALMIC SOLUTION		Non-Preferred	PA; QL
bromfenac sodium (once-daily) ophthalmic solution		Non-Preferred	PA; QL
bromfenac sodium ophthalmic solution	BromSite	Non-Preferred	PA; QL
<b>BROMSITE OPHTHALMIC SOLUTION</b>		Non-Preferred	PA; QL
diclofenac sodium ophthalmic solution		Preferred	QL
flurbiprofen sodium ophthalmic solution		Preferred	QL
<b>ILEVRO OPHTHALMIC SUSPENSION</b>		Non-Preferred	PA; QL
ketorolac tromethamine ophthalmic solution	Acular	Non-Preferred	PA; QL
<b>NEVANAC OPHTHALMIC SUSPENSION</b>		Non-Preferred	PA; QL
<b>PROLENSA OPHTHALMIC SOLUTION</b>		Non-Preferred	PA; QL
<b>*OPHTHALMIC PHOTOENHANCER COMBINATIONS***</b>			
PHOTREXA-PHOTREXA VISCOUS KIT OPHTHALMIC SOLUTION PREFILLED SYRINGE		Non-Preferred	
<b>*OPHTHALMIC RHO KINASE INHIBITORS***</b>			
RHOPRESSA OPHTHALMIC SOLUTION		Non-Preferred	QL
<b>*OPHTHALMIC SELECTIVE ALPHA ADRENERGIC AGONISTS***</b>			
<b>ALPHAGAN P OPHTHALMIC SOLUTION</b>		Non-Preferred	QL
apraclonidine hcl ophthalmic solution		Preferred	
brimonidine tartrate ophthalmic solution 0.1 %	Alphagan P	Non-Preferred	QL



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
brimonidine tartrate ophthalmic solution 0.15 %	Alphagan P	Preferred	QL
brimonidine tartrate ophthalmic solution 0.2 %		Preferred	QL
<b>IOPIDINE OPHTHALMIC SOLUTION</b>		Non-Preferred	
<b>LUMIFY OPHTHALMIC SOLUTION</b>		Non-Preferred	OTC
<b>*OPHTHALMIC STEROID COMBINATIONS***</b>			
bacitra-neomycin-polymyxin-hc ophthalmic ointment	Neo-Polycin HC	Preferred	QL
<b>MAXITROL OPHTHALMIC OINTMENT</b>		Non-Preferred	QL
<b>MAXITROL OPHTHALMIC SUSPENSION</b>		Non-Preferred	QL
neomycin-polymyxin-dexameth ophthalmic ointment	Maxitrol	Preferred	QL
neomycin-polymyxin-dexameth ophthalmic suspension	Maxitrol	Preferred	QL
neomycin-polymyxin-hc ophthalmic suspension		Preferred	QL
<b>NEO-POLYCYN HC OPHTHALMIC OINTMENT</b>		Preferred	QL
sulfacetamide-prednisolone ophthalmic solution		Preferred	QL
<b>TOBRADEX OPHTHALMIC OINTMENT</b>		Non-Preferred	QL
<b>TOBRADEX ST OPHTHALMIC SUSPENSION</b>		Non-Preferred	QL
tobramycin-dexamethasone ophthalmic suspension		Preferred	QL
<b>ZYLET OPHTHALMIC SUSPENSION</b>		Non-Preferred	QL
<b>*OPHTHALMIC STEROIDS***</b>			
<b>ALREX OPHTHALMIC SUSPENSION</b>		Non-Preferred	
clobetasol propionate ophthalmic suspension		Non-Preferred	QL
dexamethasone sodium phosphate ophthalmic solution		Preferred	
<b>DEXTENZA OPHTHALMIC INSERT</b>		Non-Preferred	
<b>DEXYCU INTRAOCULAR SUSPENSION</b>		Non-Preferred	

Drug Name	Reference	Status	Notes
difluprednate ophthalmic emulsion	Durezol	Non-Preferred	QL
<b>DUREZOL OPHTHALMIC EMULSION</b>		Non-Preferred	QL
<b>EYSUVIS OPHTHALMIC SUSPENSION</b>		Non-Preferred	PA; QL
<b>FLAREX OPHTHALMIC SUSPENSION</b>		Non-Preferred	
fluorometholone ophthalmic suspension	FML Liquifilm	Preferred	
<b>FML FORTE OPHTHALMIC SUSPENSION</b>		Non-Preferred	
<b>FML LIQUIFILM OPHTHALMIC SUSPENSION</b>		Non-Preferred	
<b>ILUVIEN INTRAVITREAL IMPLANT</b>		Non-Preferred	PA; SP
<b>INVELTYS OPHTHALMIC SUSPENSION</b>		Non-Preferred	QL
<b>LOTEMAX OPHTHALMIC GEL</b>		Non-Preferred	QL
<b>LOTEMAX OPHTHALMIC OINTMENT</b>		Non-Preferred	QL
<b>LOTEMAX OPHTHALMIC SUSPENSION</b>		Non-Preferred	QL
<b>LOTEMAX SM OPHTHALMIC GEL</b>		Non-Preferred	QL
loteprednol etabonate ophthalmic gel	Lotemax	Non-Preferred	QL
loteprednol etabonate ophthalmic suspension 0.2 %	Alrex	Non-Preferred	
loteprednol etabonate ophthalmic suspension 0.5 %	Lotemax	Non-Preferred	QL
<b>MAXIDEX OPHTHALMIC SUSPENSION</b>		Non-Preferred	
<b>PRED FORTE OPHTHALMIC SUSPENSION</b>		Non-Preferred	QL
<b>PRED MILD OPHTHALMIC SUSPENSION</b>		Non-Preferred	
prednisolone acetate ophthalmic suspension	Pred Forte	Preferred	QL
prednisolone sodium phosphate ophthalmic solution		Preferred	QL
<b>RETISERT INTRAVITREAL IMPLANT</b>		Non-Preferred	PA; SP
<b>TRIESENCE INTRAOCULAR SUSPENSION</b>		Non-Preferred	

Drug Name	Reference	Status	Notes
XIPERE INTRAOCULAR SUSPENSION		Non-Preferred	PA
YUTIQ INTRAVITREAL IMPLANT		Non-Preferred	PA
<b>*OPHTHALMIC SULFONAMIDES***</b>			
sulfacetamide sodium ophthalmic ointment		Preferred	QL
sulfacetamide sodium ophthalmic solution		Preferred	QL
<b>*OPHTHALMIC SURGICAL AIDS***</b>			
AMVISC INTRAOCULAR SOLUTION PREFILLED SYRINGE		Non-Preferred	
HEALON DUET PRO INTRAOCULAR SOLUTION PREFILLED SYRINGE		Non-Preferred	
HEALON GV PRO INTRAOCULAR SOLUTION PREFILLED SYRINGE		Non-Preferred	
HEALON PRO INTRAOCULAR SOLUTION PREFILLED SYRINGE		Non-Preferred	
HEALON5 PRO INTRAOCULAR SOLUTION PREFILLED SYRINGE		Non-Preferred	
PROVISC INTRAOCULAR SOLUTION PREFILLED SYRINGE		Non-Preferred	
TOTALVISC INTRAOCULAR SOLUTION PREFILLED SYRINGE		Non-Preferred	
<b>*OPHTHALMICS - BLEPHAROPTOSIS AGENTS**</b>			
UPNEEQ OPHTHALMIC SOLUTION		Non-Preferred	PA; QL
<b>*OPHTHALMICS - CYSTINOSIS AGENTS**</b>			
CYSTADROPS OPHTHALMIC SOLUTION		Non-Preferred	PA; QL
CYSTARAN OPHTHALMIC SOLUTION		Non-Preferred	PA; QL
<b>*OPHTHALMICS MISC. - OTHER***</b>			
MIEBO OPHTHALMIC SOLUTION		Non-Preferred	PA; QL
<b>*PROSTAGLANDINS - OPHTHALMIC***</b>			
bimatoprost ophthalmic solution		Non-Preferred	

Drug Name	Reference	Status	Notes
<b>DURYSTA INTRAOCULAR IMPLANT</b>		Non-Preferred	PA; SP; QL
<b>IDOSE TR INTRAOCULAR IMPLANT</b>		Non-Preferred	PA; QL
<b>IYUZEH OPHTHALMIC SOLUTION</b>		Non-Preferred	QL
latanoprost ophthalmic solution	Xalatan	Preferred	QL
<b>LUMIGAN OPHTHALMIC SOLUTION</b>		Non-Preferred	QL
tafluprost (pf) ophthalmic solution	Zioptan	Non-Preferred	QL
<b>TRAVATAN Z OPHTHALMIC SOLUTION</b>		Non-Preferred	QL
travoprost (bak free) ophthalmic solution	Travatan Z	Non-Preferred	QL
<b>VYZULTA OPHTHALMIC SOLUTION</b>		Non-Preferred	QL
<b>XALATAN OPHTHALMIC SOLUTION</b>		Non-Preferred	QL
<b>XELPROS OPHTHALMIC EMULSION</b>		Non-Preferred	QL
<b>ZIOPTAN OPHTHALMIC SOLUTION</b>		Non-Preferred	QL
<b>*SOFT LENS PRODUCTS***</b>			
<b>RENU 1 STEP ENZYMATIC CLEANER TABLET</b>		Non-Preferred	OTC
<b>SENSITIVE EYES ENZYME CLEANER TABLET EFFERVESCENT</b>		Non-Preferred	OTC
<b>*VASCULAR ENDOTHELIAL GROWTH FACTOR (VEGF) ANTAGONISTS***</b>			
<b>BEOVU INTRAVITREAL SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	SP
<b>BYOOVIZ INTRAVITREAL SOLUTION</b>		Non-Preferred	PA; SP
<b>CIMERLI INTRAVITREAL SOLUTION</b>		Non-Preferred	PA; SP
<b>EYLEA HD INTRAVITREAL SOLUTION</b>		Non-Preferred	PA; SP
<b>EYLEA INTRAVITREAL SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; SP
<b>SUSVIMO (IMPLANT 1ST FILL) INTRAVITREAL SOLUTION</b>		Non-Preferred	SP
<b>SUSVIMO (IMPLANT REFILL) INTRAVITREAL SOLUTION</b>		Non-Preferred	SP

Drug Name	Reference	Status	Notes
<b>*OTIC AGENTS*</b>			
<b>*OTIC AGENTS - MISCELLANEOUS***</b>			
acetic acid otic solution		Preferred	
<b>AURO DRI SWIMMERS EARS OTIC LIQUID</b>		Non-Preferred	OTC
<b>CLEARCANAL EAR WAX REMOVAL OTIC KIT</b>		Non-Preferred	OTC
<b>CLEARCANAL EARWAX SOFTENER OTIC SOLUTION</b>		Preferred	OTC
<b>CLINERE EARWAX REMOVAL KIT OTIC OIL</b>		Non-Preferred	OTC
<b>CLINERE EARWAX REMOVAL KIT OTIC SOLUTION</b>		Preferred	OTC
<b>DEBROX OTIC SOLUTION</b>		Non-Preferred	OTC
<b>DEBROX SWIMMERS EAR OTIC LIQUID</b>		Non-Preferred	OTC
ear drops earwax aid otic solution	Clearcanal Earwax Softener	Preferred	OTC
ear drops for swimmers otic liquid	Debrox Swimmers Ear	Non-Preferred	OTC
ear drops otic solution	Clearcanal Earwax Softener	Preferred	OTC
ear wax cleansing otic kit	Clearcanal Ear Wax Removal	Non-Preferred	OTC
ear wax removal drops otic solution	Clearcanal Earwax Softener	Preferred	OTC
ear wax removal kit otic solution	Clearcanal Earwax Softener	Preferred	OTC
ear wax removal system otic oil	Clinere Earwax Removal Kit	Non-Preferred	OTC
ear wax removal system otic solution	Clearcanal Earwax Softener	Preferred	OTC
earwax removal kit otic solution	Clearcanal Earwax Softener	Preferred	OTC
earwax removal otic solution	Clearcanal Earwax Softener	Preferred	OTC
instant ear-dry otic liquid	Debrox Swimmers Ear	Non-Preferred	OTC
<b>MURINE EAR OTIC SOLUTION</b>		Preferred	OTC
<b>MURINE EAR WAX REMOVAL SYSTEM OTIC SOLUTION</b>		Preferred	OTC
<b>SWIM EAR OTIC LIQUID</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
swimmers ear drops otic liquid	Auro Dri Swimmers Ears	Non-Preferred	OTC
<b>*OTIC ANALGESIC COMBINATIONS***</b>			
<b>PRAMOTIC OTIC LIQUID</b>		Non-Preferred	
<b>*OTIC ANTI-INFECTIVES***</b>			
<b>CETRAXAL OTIC SOLUTION</b>		Non-Preferred	PA; QL
ciprofloxacin hcl otic solution	Cetraxal	Preferred	QL
ofloxacin otic solution		Preferred	QL
<b>*OTIC STEROID-ANTI-INFECTIVE COMBINATIONS***</b>			
<b>CIPRO HC OTIC SUSPENSION</b>		Non-Preferred	PA; QL
ciprofloxacin-dexamethasone otic suspension		Non-Preferred	PA; QL
ciprofloxacin-fluocinolone pf otic solution	Otovel	Non-Preferred	PA; QL
<b>CORTISPORIN-TC OTIC SUSPENSION</b>		Non-Preferred	
neomycin-polymyxin-hc otic solution		Preferred	
neomycin-polymyxin-hc otic suspension		Preferred	
<b>OTOVEL OTIC SOLUTION</b>		Non-Preferred	PA; QL
<b>*OTIC STEROIDS***</b>			
<b>DERMOTIC OTIC OIL</b>		Non-Preferred	
<b>FLAC OTIC OIL</b>		Non-Preferred	
fluocinolone acetonide otic oil	DermOtic	Non-Preferred	
hydrocortisone-acetic acid otic solution		Non-Preferred	QL
<b>*OXYTOCICS*</b>			
<b>*ABORTIFACIENTS/CERVICAL RIPENING - PROSTAGLANDINS***</b>			
carboprost tromethamine intramuscular solution	Hemabate	Non-Preferred	
carboprost tromethamine intramuscular solution prefilled syringe		Non-Preferred	
<b>CERVIDIL VAGINAL INSERT</b>		Non-Preferred	
<b>HEMABATE INTRAMUSCULAR SOLUTION</b>		Non-Preferred	

Drug Name	Reference	Status	Notes
PREPIDIL VAGINAL GEL		Non-Preferred	
<b>*OXYTOCICS***</b>			
METHERGINE ORAL TABLET		Preferred	
methylergonovine maleate injection solution		Preferred	
methylergonovine maleate oral tablet	Methergine	Preferred	
oxytocin injection solution	Pitocin	Non-Preferred	
PITOCIN INJECTION SOLUTION		Non-Preferred	
<b>*PASSIVE IMMUNIZING AND TREATMENT AGENTS*</b>			
<b>*ANTITOXINS-ANTIVENINS***</b>			
ANASCORP INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	
ANAVIP INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	
antivenin Iatrodectus mactans injection kit		Non-Preferred	
antivenin micrurus fulvius intravenous solution reconstituted		Non-Preferred	
CROFAB INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	
<b>*ANTIVIRAL MONOCLONAL ANTIBODIES***</b>			
PEMGARDA INTRAVENOUS SOLUTION		Non-Preferred	
SYNAGIS INTRAMUSCULAR SOLUTION		Preferred	PA; SP
<b>*BACTERIAL MONOCLONAL ANTIBODIES***</b>			
ZINPLAVA INTRAVENOUS SOLUTION		Non-Preferred	PA
<b>*IMMUNE SERUMS***</b>			
ASCENIV INTRAVENOUS SOLUTION		Non-Preferred	PA; SP
BABYBIG INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	
BIVIGAM INTRAVENOUS SOLUTION		Preferred	PA; SP
CNJ-016 INTRAVENOUS SOLUTION		Non-Preferred	

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>CUTAQUIG SUBCUTANEOUS SOLUTION</b>		Non-Preferred	PA; SP
<b>CUVITRU SUBCUTANEOUS SOLUTION</b>		Non-Preferred	PA; SP
<b>CYTOGAM INTRAVENOUS SOLUTION</b>		Non-Preferred	SP
<b>FLEBOGAMMA DIF INTRAVENOUS SOLUTION 10 GM/200ML, 5 GM/100ML</b>		Preferred	PA; SP
<b>FLEBOGAMMA DIF INTRAVENOUS SOLUTION 20 GM/400ML</b>		Non-Preferred	PA; SP
<b>GAMASTAN INTRAMUSCULAR INJECTABLE</b>		Non-Preferred	PA; SP
<b>GAMMAGARD INJECTION SOLUTION</b>		Non-Preferred	PA; SP
<b>GAMMAGARD S/D LESS IGA INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	PA; SP
<b>GAMMAKED INJECTION SOLUTION</b>		Non-Preferred	PA; SP
<b>GAMMAPLEX INTRAVENOUS SOLUTION 10 GM/100ML, 10 GM/200ML, 20 GM/200ML, 5 GM/100ML, 5 GM/50ML</b>		Preferred	PA; SP
<b>GAMMAPLEX INTRAVENOUS SOLUTION 20 GM/400ML</b>		Non-Preferred	PA; SP
<b>GAMUNEX-C INJECTION SOLUTION</b>		Preferred	PA; SP
<b>HEPAGAM B INJECTION SOLUTION</b>		Non-Preferred	SP
<b>HIZENTRA SUBCUTANEOUS SOLUTION</b>		Non-Preferred	PA; SP
<b>HIZENTRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; SP
<b>HYPERHEP B INTRAMUSCULAR SOLUTION</b>		Non-Preferred	SP
<b>HYPERHEP B INTRAMUSCULAR SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	SP
<b>HYPERRAB INJECTION SOLUTION</b>		Non-Preferred	SP
<b>HYPERTET INTRAMUSCULAR SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	
<b>IMOGAM RABIES-HT INJECTION SOLUTION</b>		Non-Preferred	SP



Drug Name	Reference	Status	Notes
kedrab injection solution	Imogam Rabies-HT	Non-Preferred	SP
<b>NABI-HB INTRAMUSCULAR SOLUTION</b>		Non-Preferred	SP
<b>OCTAGAM INTRAVENOUS SOLUTION</b>		Preferred	PA; SP
<b>PANZYGA INTRAVENOUS SOLUTION</b>		Non-Preferred	PA; SP
<b>PRIVIGEN INTRAVENOUS SOLUTION 10 GM/100ML, 20 GM/200ML, 5 GM/50ML</b>		Preferred	PA; SP
<b>PRIVIGEN INTRAVENOUS SOLUTION 40 GM/400ML</b>		Non-Preferred	PA; SP
<b>VARIZIG INTRAMUSCULAR SOLUTION</b>		Non-Preferred	
<b>XEMBIFY SUBCUTANEOUS SOLUTION</b>		Non-Preferred	PA; SP
<b>*PASSIVE IMMUNIZING AGENTS - COMBINATIONS***</b>			
<b>HYQVIA SUBCUTANEOUS KIT</b>		Non-Preferred	PA; SP
<b>*PENICILLINS*</b>			
<b>*AMINOPENICILLINS***</b>			
amoxicillin oral capsule		Preferred	
amoxicillin oral suspension reconstituted		Preferred	
amoxicillin oral tablet		Preferred	
amoxicillin oral tablet chewable		Preferred	
ampicillin oral capsule		Preferred	
ampicillin sodium injection solution reconstituted		Non-Preferred	
ampicillin sodium intravenous solution reconstituted		Non-Preferred	
<b>*NATURAL PENICILLINS***</b>			
<b>BICILLIN L-A INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE</b>		Non-Preferred	
<b>EXTENCILLINE INTRAMUSCULAR SUSPENSION RECONSTITUTED</b>		Non-Preferred	
<b>LENTOCILIN INTRAMUSCULAR SUSPENSION RECONSTITUTED</b>		Non-Preferred	
penicillin g pot in dextrose intravenous solution		Non-Preferred	

Drug Name	Reference	Status	Notes
penicillin g potassium injection solution reconstituted	Pfizerpen	Non-Preferred	
penicillin g sodium injection solution reconstituted		Non-Preferred	
penicillin v potassium oral solution reconstituted		Preferred	
penicillin v potassium oral tablet		Preferred	
<b>PFIZERPEN INJECTION SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>*PENICILLIN COMBINATIONS***</b>			
amoxicillin-pot clavulanate er oral tablet extended release 12 hour		Preferred	
amoxicillin-pot clavulanate oral suspension reconstituted	Augmentin ES-600	Preferred	
amoxicillin-pot clavulanate oral tablet	Augmentin	Preferred	
amoxicillin-pot clavulanate oral tablet chewable		Preferred	
ampicillin-sulbactam sodium injection solution reconstituted	Unasyn	Non-Preferred	
ampicillin-sulbactam sodium intravenous solution reconstituted	Unasyn	Non-Preferred	
<b>AUGMENTIN ES-600 ORAL SUSPENSION RECONSTITUTED</b>		Non-Preferred	
<b>AUGMENTIN ORAL SUSPENSION RECONSTITUTED</b>		Non-Preferred	
<b>AUGMENTIN ORAL TABLET</b>		Non-Preferred	
<b>BICILLIN C-R 900/300 INTRAMUSCULAR SUSPENSION</b>		Non-Preferred	
<b>BICILLIN C-R INTRAMUSCULAR SUSPENSION</b>		Non-Preferred	
piperacillin sod-tazobactam so intravenous solution reconstituted		Non-Preferred	
<b>UNASYN INJECTION SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>UNASYN INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>ZOSYN INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>*PENICILLINASE-RESISTANT PENICILLINS***</b>			
dicloxacillin sodium oral capsule		Preferred	

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
nafcillin sodium in dextrose intravenous solution		Non-Preferred	
nafcillin sodium injection solution reconstituted		Non-Preferred	
nafcillin sodium intravenous solution reconstituted		Non-Preferred	
oxacillin sodium in dextrose intravenous solution		Non-Preferred	
oxacillin sodium injection solution reconstituted		Non-Preferred	
oxacillin sodium intravenous solution reconstituted		Non-Preferred	
<b>*PHARMACEUTICAL ADJUVANTS*</b>			
<b>*EXTERNAL VEHICLES***</b>			
<b>ADA EXTERNAL SHAMPOO</b>		Non-Preferred	
collodion flexible external liquid		Non-Preferred	
<b>FOAMIL EXTERNAL LIQUID</b>		Non-Preferred	
<b>RHEOSPRAY EXTERNAL LIQUID</b>		Non-Preferred	
rose water external liquid		Non-Preferred	OTC
supposibase f powder		Non-Preferred	OTC
<b>SUSPENDOL-S LIQUID</b>		Non-Preferred	OTC
<b>U-MILD EXTERNAL SHAMPOO</b>		Non-Preferred	
<b>VERSAPRO EXTERNAL SHAMPOO</b>		Non-Preferred	
<b>*GELATIN CAPSULES (EMPTY)***</b>			
capsule size 1 lactose capsule	DRcaps Size 00	Non-Preferred	OTC
<b>*MISC. VEHICLES***</b>			
multi-peptide serum external liquid	Seraqua	Non-Preferred	
<b>SERAQUA EXTERNAL LIQUID</b>		Non-Preferred	
<b>SOLYDRA EXTERNAL LIQUID</b>		Non-Preferred	
<b>*NON GELATIN CAPSULES (EMPTY)***</b>			
<b>AR CAPS #1 ACID RESISTANT CAPSULE</b>		Non-Preferred	OTC
capsule #0 clear/clear veg capsule	AR Caps #1 Acid Resistant	Non-Preferred	
capsule #0 white/white opq veg capsule	AR Caps #1 Acid Resistant	Non-Preferred	

Drug Name	Reference	Status	Notes
capsule #1 clear/clear veg capsule	AR Caps #1 Acid Resistant	Non-Preferred	
capsule #1 white/white opq veg capsule	AR Caps #1 Acid Resistant	Non-Preferred	
capsule #3 clear/clear veg capsule	AR Caps #1 Acid Resistant	Non-Preferred	
capsule #3 white/white opq veg capsule	AR Caps #1 Acid Resistant	Non-Preferred	
capsule 0 clear veggie capsule	AR Caps #1 Acid Resistant	Non-Preferred	OTC
capsule 00 clear veggie capsule	AR Caps #1 Acid Resistant	Non-Preferred	OTC
capsule 1 clear veggie capsule	AR Caps #1 Acid Resistant	Non-Preferred	OTC
capsule 3 clear veggie capsule	AR Caps #1 Acid Resistant	Non-Preferred	OTC
capsule coni-snap #0 clear veg capsule	AR Caps #1 Acid Resistant	Non-Preferred	
capsule coni-snap #3 clear veg capsule	AR Caps #1 Acid Resistant	Non-Preferred	
<b>*ORAL VEHICLES***</b>			
cherry concentrate oral syrup		Non-Preferred	OTC
cherry oral syrup		Non-Preferred	
cola syrup oral syrup		Non-Preferred	OTC
corn (syrup) oral syrup		Non-Preferred	
distillata distilled water oral liquid	Nice Distilled Water	Non-Preferred	OTC
distilled water oral liquid	Nice Distilled Water	Non-Preferred	OTC
<b>FLAVOR BLEND ORAL SUSPENSION</b>		Non-Preferred	
flavor plus oral liquid	Ora-Plus	Non-Preferred	
flavor sweet oral syrup	MX-Sol	Non-Preferred	
flavor sweet-sf oral syrup	MX-Sol	Non-Preferred	OTC
<b>GERBER GOOD START WATER ORAL LIQUID</b>		Non-Preferred	OTC
<b>GOOD START STERILE WATER ORAL LIQUID</b>		Non-Preferred	OTC
grape syrup oral syrup	MX-Sol	Non-Preferred	OTC
infant drinking water oral liquid	Nice Distilled Water	Non-Preferred	OTC
lozibase	Lozibase S	Non-Preferred	OTC
<b>LOZIBASE S</b>		Non-Preferred	

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>MX-SOL BLEND ORAL SUSPENSION</b>		Non-Preferred	OTC
<b>MX-SOL BLEND SF ORAL SUSPENSION</b>		Non-Preferred	OTC
<b>MX-SOL ORAL SYRUP</b>		Non-Preferred	OTC
<b>MX-SOL SF ORAL SYRUP</b>		Non-Preferred	OTC
<b>MX-SOL SUSPEND ORAL SUSPENSION</b>		Non-Preferred	OTC
<b>NICE DISTILLED WATER ORAL LIQUID</b>		Non-Preferred	OTC
<b>ORA-BLEND ORAL SUSPENSION</b>		Non-Preferred	
<b>ORA-BLEND SF ORAL SUSPENSION</b>		Non-Preferred	
<b>ORAL MIX ORAL SUSPENSION</b>		Non-Preferred	OTC
<b>ORAL MIX SF ORAL SUSPENSION</b>		Non-Preferred	OTC
oral suspend oral liquid	Ora-Plus	Non-Preferred	OTC
oral syrup oral syrup	MX-Sol	Non-Preferred	OTC
oral syrup sf oral syrup	MX-Sol	Non-Preferred	OTC
<b>ORAPENN SD ANHYD SWEETENED ORAL LIQUID</b>		Non-Preferred	
<b>ORAPENN SD ANHYD UNSWEETEN ORAL LIQUID</b>		Non-Preferred	OTC
<b>ORA-PLUS ORAL LIQUID</b>		Non-Preferred	
<b>ORA-SWEET ORAL SYRUP</b>		Non-Preferred	
<b>ORA-SWEET SF ORAL SYRUP</b>		Non-Preferred	
<b>PCCA ACACIA SYRUP BASE ORAL SYRUP</b>		Non-Preferred	
<b>PCCA SWEET-SF ORAL SYRUP</b>		Non-Preferred	
<b>PCCA SYRUP VEHICLE ORAL SYRUP</b>		Non-Preferred	
<b>PCCA-PLUS ORAL SUSPENSION</b>		Non-Preferred	
purified water oral liquid	Nice Distilled Water	Non-Preferred	
raspberry syrup oral syrup		Non-Preferred	
<b>SIMILAC STERILIZED WATER ORAL LIQUID</b>		Non-Preferred	OTC
simple syrup oral syrup	Syrpalta	Non-Preferred	
<b>SOSWEET ORAL SYRUP</b>		Non-Preferred	OTC
<b>SUSPENDIT ANHYDROUS ORAL SUSPENSION</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>SUSPENDRX W/BITTERBLOC SWEET ORAL SUSPENSION</b>		Non-Preferred	
<b>SUSPENDRX W/BITTERBLOC UNSWEET ORAL SUSPENSION</b>		Non-Preferred	
suspension vehicle oral suspension	Flavor Blend	Non-Preferred	
<b>SYRPALTA (RED) ORAL SYRUP</b>		Non-Preferred	
<b>SYRPALTA ORAL SYRUP</b>		Non-Preferred	
<b>SYRSPEND SF ALKA ORAL SUSPENSION RECONSTITUTED</b>		Non-Preferred	OTC
<b>SYRSPEND SF ORAL LIQUID</b>		Non-Preferred	
<b>SYRSPEND SF ORAL SUSPENSION RECONSTITUTED</b>		Non-Preferred	OTC
<b>SYRSPEND SF PH4 ORAL SUSPENSION RECONSTITUTED</b>		Non-Preferred	
syrup nf oral syrup	Syrpalta	Non-Preferred	OTC
syrup vehicle oral syrup	MX-Sol	Non-Preferred	
syrup vehicle sf oral syrup	MX-Sol	Non-Preferred	
trochibase s flakes		Non-Preferred	OTC
<b>UNISPEND ANHYDROUS SWEETENED ORAL SUSPENSION</b>		Non-Preferred	
<b>UNISPEND ANHYDROUS UNSWEETENED ORAL SUSPENSION</b>		Non-Preferred	OTC
<b>VERSAFREE ORAL SYRUP</b>		Non-Preferred	
<b>VERSAPLUS ORAL SYRUP</b>		Non-Preferred	
<b>*PLACEBOS***</b>			
cherry concentrate oral concentrate		Non-Preferred	OTC
<b>*SEMI SOLID VEHICLES***</b>			
alcohol base gel gel	Medihol Base	Non-Preferred	
<b>ALPAWASH EXTERNAL OINTMENT</b>		Non-Preferred	
<b>ANHYDROUS BASE CREAM</b>		Non-Preferred	
anhydrous base ointment	PCCA Anhydrous Base	Non-Preferred	
anhydrous cream base cream	Anhydrous Base	Non-Preferred	
baby skin protectant external ointment		Non-Preferred	OTC
<b>CARBOGEL 940 GEL</b>		Non-Preferred	
<b>CARBOHOL 940 GEL</b>		Non-Preferred	
carbomer aqueous gel	Carbogel 940	Non-Preferred	
carbomer hydroalcoholic gel	Carbogel 940	Non-Preferred	
cold cream external cream		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
cream base with liposome external cream	Lipobase	Non-Preferred	
daily moisturizer external ointment		Non-Preferred	OTC
<b>ESPUMIL FOAM</b>		Non-Preferred	
<b>HYDROGEL GEL</b>		Non-Preferred	
hydrophilic external ointment	Occluvan	Non-Preferred	OTC
hydrophilic petrolatum external ointment		Non-Preferred	OTC
krisgel 100 external gel		Non-Preferred	
lanolin anhydrous external ointment		Non-Preferred	
lecithin organogel external gel	PLO Gel - Mediflo 30 Pre-Mixed	Non-Preferred	
lip balm base external ointment	AlpaWash	Non-Preferred	OTC
<b>LIPOBASE EXTERNAL CREAM</b>		Non-Preferred	OTC
lipofoam rx foam	Espumil	Non-Preferred	
lipolayer external cream	Lipobase	Non-Preferred	
<b>LIPOZYME EXTERNAL CREAM</b>		Non-Preferred	
<b>MEDIHOL BASE GEL</b>		Non-Preferred	
<b>OCCLUVAN EXTERNAL OINTMENT</b>		Non-Preferred	
<b>PCCA ANHYDROUS BASE OINTMENT</b>		Non-Preferred	
<b>PCCA COBASE #1 EXTERNAL OINTMENT</b>		Non-Preferred	
<b>PCCA CUSTOM LIPO-MAX EXTERNAL CREAM</b>		Non-Preferred	
<b>PCCA ELLAGE VAGINAL CREAM</b>		Non-Preferred	
<b>PCCA LIPOSOMIC BASE DRY EXTERNAL CREAM</b>		Non-Preferred	
<b>PCCA LIPOSOMIC BASE NORMAL EXTERNAL CREAM</b>		Non-Preferred	
<b>PCCA LIPOSOMIC BASE OILY EXTERNAL CREAM</b>		Non-Preferred	
<b>PCCA LIPOSOMIC BASE SENSITIVE EXTERNAL CREAM</b>		Non-Preferred	
<b>PCCA POLYPEG BASE EXTERNAL OINTMENT</b>		Non-Preferred	
peg blend external ointment	AlpaWash	Non-Preferred	OTC
peg external ointment	AlpaWash	Non-Preferred	OTC
peg ointment base external ointment	AlpaWash	Non-Preferred	

Drug Name	Reference	Status	Notes
petrolatum external gel	Vaseline Pure Ultra White	Preferred	OTC
petrolatum external ointment		Non-Preferred	OTC
petrolatum white external gel	Vaseline Pure Ultra White	Preferred	OTC
petrolatum white external ointment		Non-Preferred	
petroleum jelly baby external ointment		Non-Preferred	OTC
petroleum jelly external ointment		Non-Preferred	OTC
<b>PLO GEL - MEDIFLO 30 PRE-MIXED EXTERNAL GEL</b>		Non-Preferred	
<b>PLO GEL - MEDIFLO EXTERNAL KIT</b>		Non-Preferred	
<b>PLO GEL - MEDIFLO PRE-MIXED EXTERNAL GEL</b>		Non-Preferred	
<b>PLO20 FLOWABLE EXTERNAL GEL</b>		Non-Preferred	
<b>PLO20 NON-FLOWABLE EXTERNAL GEL</b>		Non-Preferred	
<b>PLO-DICLOGEL EXTERNAL GEL</b>		Non-Preferred	OTC
polyethylene glycol 8000 external ointment		Non-Preferred	
skin protectant external ointment		Non-Preferred	OTC
unibase external cream		Non-Preferred	OTC
universal water gel	Medihol Base	Non-Preferred	
<b>VASELINE EXTERNAL GEL</b>		Non-Preferred	
<b>VASELINE PURE ULTRA WHITE EXTERNAL GEL</b>		Preferred	OTC
<b>VERSAPRO FOAM</b>		Non-Preferred	
water base gel gel	Medihol Base	Non-Preferred	
white petrolatum external gel	Vaseline Pure Ultra White	Non-Preferred	
white petrolatum external ointment		Non-Preferred	
yellow petrolatum external ointment		Non-Preferred	
<b>*PROGESTINS*</b>			
<b>*PROGESTINS***</b>			
<b>GALLIFREY ORAL TABLET</b>		Preferred	
medroxyprogesterone acetate oral tablet	Provera	Preferred	QL
norethindrone acetate oral tablet	Gallifrey	Preferred	
progesterone intramuscular oil		Non-Preferred	



Drug Name	Reference	Status	Notes
progesterone oral capsule	Prometrium	Preferred	QL
<b>PROMETRIUM ORAL CAPSULE</b>		Non-Preferred	QL
<b>PROVERA ORAL TABLET</b>		Non-Preferred	QL
<b>*PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.*</b>			
<b>*AGENTS FOR OPIOID WITHDRAWAL***</b>			
lofexidine hcl oral tablet	Lucemyra	Non-Preferred	QL
<b>LUCEMYRA ORAL TABLET</b>		Non-Preferred	QL
<b>*ALCOHOL DETERRENTS***</b>			
acamprosate calcium oral tablet delayed release		Preferred	QL
disulfiram oral tablet		Preferred	
<b>*ALZHEIMER'S TREATMENT - ANTI-AMYLOID ANTIBODIES***</b>			
<b>KISUNLA INTRAVENOUS SOLUTION</b>		Non-Preferred	SP
<b>*ANTI-CATAPLECTIC AGENTS***</b>			
<b>LUMRYZ ORAL PACKET</b>		Non-Preferred	PA; SP; QL
sodium oxybate oral solution	Xyrem	Non-Preferred	PA; QL
<b>XYREM ORAL SOLUTION</b>		Non-Preferred	PA; QL
<b>*ANTI-CATAPLECTIC COMBINATIONS***</b>			
<b>XYWAV ORAL SOLUTION</b>		Non-Preferred	PA; QL
<b>*ANTIDEMENTIA AGENT COMBINATIONS***</b>			
<b>NAMZARIC ORAL CAPSULE ER 24 HOUR THERAPY PACK</b>		Non-Preferred	PA; QL
<b>NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; QL
<b>*ANTISENSE OLIGONUCLEOTIDE (ASO) INHIBITOR AGENTS***</b>			
<b>WAINUA SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
<b>*BENZODIAZEPINES &amp; TRICYCLIC AGENTS***</b>			
chlordiazepoxide-amitriptyline oral tablet		Preferred	
<b>*CHOLINOMIMETICS - ACHE INHIBITORS***</b>			
<b>ADLARITY TRANSDERMAL PATCH WEEKLY</b>		Non-Preferred	QL
<b>ARICEPT ORAL TABLET 10 MG, 23 MG</b>		Non-Preferred	QL
<b>ARICEPT ORAL TABLET 5 MG</b>		Non-Preferred	DO; QL
donepezil hcl oral tablet 10 mg, 23 mg	Aricept	Preferred	QL
donepezil hcl oral tablet 5 mg	Aricept	Preferred	DO; QL
donepezil hcl oral tablet dispersible 10 mg		Preferred	QL
donepezil hcl oral tablet dispersible 5 mg		Preferred	DO; QL
<b>EXELON TRANSDERMAL PATCH 24 HOUR</b>		Non-Preferred	PA; QL
galantamine hydrobromide er oral capsule extended release 24 hour 16 mg, 24 mg		Preferred	QL
galantamine hydrobromide er oral capsule extended release 24 hour 8 mg		Preferred	DO; QL
galantamine hydrobromide oral solution		Preferred	QL
galantamine hydrobromide oral tablet		Preferred	DO; QL
rivastigmine tartrate oral capsule 1.5 mg, 3 mg		Preferred	DO; QL
rivastigmine tartrate oral capsule 4.5 mg, 6 mg		Preferred	QL
rivastigmine transdermal patch 24 hour	Exelon	Non-Preferred	PA; QL
<b>*FIBROMYALGIA AGENT - SNRIS***</b>			
<b>SAVELLA ORAL TABLET</b>		Non-Preferred	PA; QL
<b>SAVELLA TITRATION PACK ORAL</b>		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
<b>*MLD - AUTOLOGOUS CELLULAR GENE THERAPY AGENTS***</b>			
LENMELDY INTRAVENOUS SUSPENSION		Non-Preferred	
<b>*MOVEMENT DISORDER DRUG THERAPY***</b>			
AUSTEDO ORAL TABLET		Non-Preferred	PA; SP; QL
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR		Non-Preferred	PA; SP; QL
AUSTEDO XR PATIENT TITRATION ORAL TABLET EXTENDED RELEASE THERAPY PACK		Non-Preferred	PA; SP; QL
INGREZZA ORAL CAPSULE 40 MG		Non-Preferred	PA; SP; DO; QL
INGREZZA ORAL CAPSULE 60 MG, 80 MG		Non-Preferred	PA; SP; QL
INGREZZA ORAL CAPSULE SPRINKLE		Non-Preferred	PA; SP; DO; QL
INGREZZA ORAL CAPSULE THERAPY PACK		Non-Preferred	PA; SP; QL
tetrabenazine oral tablet	Xenazine	Non-Preferred	PA; SP; QL
XENAZINE ORAL TABLET		Non-Preferred	PA; SP; QL
<b>*MS AGENTS - PYRIMIDINE SYNTHESIS INHIBITORS***</b>			
AUBAGIO ORAL TABLET		Non-Preferred	PA; SP; QL
teriflunomide oral tablet	Aubagio	Preferred	PA; SP; QL
<b>*MULTIPLE SCLEROSIS AGENTS - ANTIMETABOLITES***</b>			
MAVENCLAD (10 TABS) ORAL TABLET THERAPY PACK		Non-Preferred	PA; SP; QL
MAVENCLAD (4 TABS) ORAL TABLET THERAPY PACK		Non-Preferred	PA; SP; QL
MAVENCLAD (5 TABS) ORAL TABLET THERAPY PACK		Non-Preferred	PA; SP; QL
MAVENCLAD (6 TABS) ORAL TABLET THERAPY PACK		Non-Preferred	PA; SP; QL
MAVENCLAD (7 TABS) ORAL TABLET THERAPY PACK		Non-Preferred	PA; SP; QL
MAVENCLAD (8 TABS) ORAL TABLET THERAPY PACK		Non-Preferred	PA; SP; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>MAVENCLAD (9 TABS) ORAL TABLET THERAPY PACK</b>		Non-Preferred	PA; SP; QL
<b>*MULTIPLE SCLEROSIS AGENTS - COMBINATIONS***</b>			
<b>OCREVUS ZUNOVO SUBCUTANEOUS SOLUTION</b>		Non-Preferred	PA; QL
<b>*MULTIPLE SCLEROSIS AGENTS - INTERFERONS***</b>			
<b>AVONEX PEN INTRAMUSCULAR AUTO-INJECTOR KIT</b>		Preferred	PA; SP; QL
<b>AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT</b>		Preferred	PA; SP; QL
<b>BETASERON SUBCUTANEOUS KIT</b>		Preferred	PA; SP; QL
<b>EXTAVIA SUBCUTANEOUS KIT</b>		Preferred	PA; SP; QL
<b>PLEGRIDY INTRAMUSCULAR SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; SP; QL
<b>PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Non-Preferred	PA; SP; QL
<b>PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; SP; QL
<b>PLEGRIDY SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Non-Preferred	PA; SP; QL
<b>PLEGRIDY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; SP; QL
<b>REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Preferred	PA; SP; QL
<b>REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Preferred	PA; SP; QL
<b>REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Preferred	PA; SP; QL
<b>REBIF TITRATION PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Preferred	PA; SP; QL

Drug Name	Reference	Status	Notes
<b>*MULTIPLE SCLEROSIS AGENTS - MONOCLONAL ANTIBODIES***</b>			
<b>BRIUMVI INTRAVENOUS SOLUTION</b>		Non-Preferred	PA; SP; QL
<b>KESIMPTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>		Non-Preferred	PA; SP; QL
<b>LEMTRADA INTRAVENOUS SOLUTION</b>		Non-Preferred	PA; SP; QL
<b>*MULTIPLE SCLEROSIS AGENTS - NRF2 PATHWAY ACTIVATORS***</b>			
<b>BAFIERTAM ORAL CAPSULE DELAYED RELEASE</b>		Non-Preferred	PA; SP; QL
dimethyl fumarate oral capsule delayed release	Tecfidera	Preferred	PA; SP; QL
dimethyl fumarate starter pack oral capsule delayed release therapy pack	Tecfidera	Preferred	PA; SP; QL
<b>TECFIDERA ORAL CAPSULE DELAYED RELEASE</b>		Non-Preferred	PA; SP; QL
<b>TECFIDERA ORAL CAPSULE DELAYED RELEASE THERAPY PACK</b>		Non-Preferred	PA; SP; QL
<b>VUMERITY ORAL CAPSULE DELAYED RELEASE</b>		Non-Preferred	PA; SP; QL
<b>*MULTIPLE SCLEROSIS AGENTS - POTASSIUM CHANNEL BLOCKERS***</b>			
<b>AMPYRA ORAL TABLET EXTENDED RELEASE 12 HOUR</b>		Non-Preferred	PA; SP; QL
dalfampridine er oral tablet extended release 12 hour	Ampyra	Non-Preferred	PA; SP; QL
<b>*MULTIPLE SCLEROSIS AGENTS***</b>			
<b>COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; SP; QL
glatiramer acetate subcutaneous solution prefilled syringe	Glatopa	Preferred	PA; SP; QL
<b>GLATOPA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Preferred	PA; SP; QL

Drug Name	Reference	Status	Notes
<b>*N-METHYL-D-ASPARTATE (NMDA) RECEPTOR ANTAGONISTS***</b>			
memantine hcl er oral capsule extended release 24 hour 14 mg, 7 mg		Non-Preferred	PA; DO; QL
memantine hcl er oral capsule extended release 24 hour 21 mg, 28 mg		Non-Preferred	PA; QL
memantine hcl oral solution		Preferred	QL
memantine hcl oral tablet 10 mg		Preferred	QL
memantine hcl oral tablet 28 x 5 mg & 21 x 10 mg	Namenda Titration Pak	Preferred	DO; QL
memantine hcl oral tablet 5 mg		Preferred	DO; QL
<b>NAMENDA TITRATION PAK ORAL TABLET</b>		Non-Preferred	DO; QL
<b>*PHENOTHIAZINES &amp; TRICYCLIC AGENTS***</b>			
perphenazine-amitriptyline oral tablet		Preferred	AL
<b>*POSTHERPETIC NEURALGIA (PHN)/NEUROPATHIC PAIN AGENTS***</b>			
gabapentin (once-daily) oral tablet 300 mg	Gralise	Non-Preferred	PA; DO; QL
gabapentin (once-daily) oral tablet 600 mg	Gralise	Non-Preferred	PA; QL
<b>GRALISE ORAL TABLET 300 MG, 450 MG, 750 MG</b>		Non-Preferred	PA; DO; QL
<b>GRALISE ORAL TABLET 600 MG, 900 MG</b>		Non-Preferred	PA; QL
<b>LYRICA CR ORAL TABLET EXTENDED RELEASE 24 HOUR 165 MG, 82.5 MG</b>		Non-Preferred	PA; DO; QL
<b>LYRICA CR ORAL TABLET EXTENDED RELEASE 24 HOUR 330 MG</b>		Non-Preferred	PA; QL
pregabalin er oral tablet extended release 24 hour 165 mg, 82.5 mg	Lyrice CR	Non-Preferred	PA; DO; QL
pregabalin er oral tablet extended release 24 hour 330 mg	Lyrice CR	Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
<b>*PREMENSTRUAL DYSPHORIC DISORDER (PMDD) AGENTS - SSRIS***</b>			
fluoxetine hcl (pmdd) oral tablet 10 mg		Non-Preferred	DO; QL
fluoxetine hcl (pmdd) oral tablet 20 mg		Non-Preferred	QL
<b>*PSEUDOBULBAR AFFECT AGENT COMBINATIONS***</b>			
<b>NUDEXTA ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>*PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.***</b>			
<b>AQNEURSA ORAL PACKET</b>		Non-Preferred	PA; QL
ergoloid mesylates oral tablet		Non-Preferred	QL
<b>MIPLYFFA ORAL CAPSULE</b>		Non-Preferred	PA; QL
pimozide oral tablet		Preferred	PA; QL
<b>*RESTLESS LEG SYNDROME (RLS) AGENTS***</b>			
<b>HORIZANT ORAL TABLET EXTENDED RELEASE</b>		Non-Preferred	PA; QL
<b>*SMALL INTERFERING RIBONUCLEIC ACID (SIRNA) AGENTS***</b>			
<b>AMVUTTRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	PA; SP; QL
<b>ONPATTRO INTRAVENOUS SOLUTION</b>		Non-Preferred	PA; SP; QL
<b>*SMOKING DETERRENTS***</b>			
bupropion hcl er (smoking det) oral tablet extended release 12 hour		Preferred	QL
<b>HABITROL TRANSDERMAL PATCH 24 HOUR</b>		Preferred	OTC; QL
<b>NICODERM CQ TRANSDERMAL PATCH 24 HOUR</b>		Non-Preferred	OTC; QL
<b>NICORETTE MINI MOUTH/THROAT LOZENGE</b>		Non-Preferred	OTC; QL
<b>NICORETTE MOUTH/THROAT GUM</b>		Non-Preferred	OTC; QL
<b>NICORETTE MOUTH/THROAT LOZENGE</b>		Non-Preferred	OTC; QL
<b>NICORETTE STARTER KIT MOUTH/THROAT GUM</b>		Non-Preferred	OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
nicotine mini mouth/throat lozenge	Nicorette	Preferred	OTC; QL
nicotine polacrilex mini mouth/throat lozenge	Nicorette	Preferred	OTC; QL
nicotine polacrilex mouth/throat gum	Nicorette	Preferred	OTC; QL
nicotine polacrilex mouth/throat lozenge	Nicorette	Preferred	OTC; QL
nicotine step 1 transdermal patch 24 hour	Habitrol	Preferred	OTC; QL
nicotine step 2 transdermal patch 24 hour	Nicoderm CQ	Preferred	OTC; QL
nicotine step 3 transdermal patch 24 hour	Nicoderm CQ	Preferred	OTC; QL
nicotine transdermal kit		Preferred	OTC
nicotine transdermal patch 24 hour	Habitrol	Preferred	OTC; QL
<b>NICOTROL INHALATION INHALER</b>		Non-Preferred	PA; QL
<b>NICOTROL NS NASAL SOLUTION</b>		Non-Preferred	PA; QL
<b>THRIVE MOUTH/THROAT GUM</b>		Preferred	OTC; QL
varenicline tartrate (starter) oral tablet therapy pack		Non-Preferred	PA; QL
varenicline tartrate oral tablet	Chantix	Non-Preferred	PA; QL
varenicline tartrate(continue) oral tablet	Chantix	Non-Preferred	PA; QL
<b>*SPHINGOSINE 1-PHOSPHATE (S1P) RECEPTOR MODULATORS***</b>			
fingolimod hcl oral capsule	Gilenya	Non-Preferred	PA; SP; QL
<b>GILENYA ORAL CAPSULE</b>		Non-Preferred	PA; SP; QL
<b>MAYZENT ORAL TABLET</b>		Non-Preferred	PA; SP; QL
<b>MAYZENT STARTER PACK ORAL TABLET THERAPY PACK</b>		Non-Preferred	PA; SP; QL
<b>PONVORY ORAL TABLET</b>		Non-Preferred	PA; SP; QL
<b>PONVORY STARTER PACK ORAL TABLET THERAPY PACK</b>		Non-Preferred	PA; SP; QL
<b>TASCENSO ODT ORAL TABLET DISPERSIBLE</b>		Non-Preferred	PA; QL
<b>ZEPOSIA 7-DAY STARTER PACK ORAL CAPSULE THERAPY PACK</b>		Non-Preferred	PA; SP; QL
<b>ZEPOSIA ORAL CAPSULE</b>		Non-Preferred	PA; SP; QL
<b>ZEPOSIA STARTER KIT ORAL CAPSULE THERAPY PACK</b>		Non-Preferred	PA; SP; QL



Drug Name	Reference	Status	Notes
<b>*THIENBENZODIAZEPINES &amp; OPIOID ANTAGONISTS***</b>			
LYBALVI ORAL TABLET		Non-Preferred	PA; QL
<b>*THIENBENZODIAZEPINES &amp; SSRIS***</b>			
olanzapine-fluoxetine hcl oral capsule 12-25 mg, 12-50 mg, 6-50 mg		Non-Preferred	PA; AL; QL
olanzapine-fluoxetine hcl oral capsule 3-25 mg, 6-25 mg	Symbyax	Non-Preferred	PA; DO; AL; QL
SYMBYAX ORAL CAPSULE		Non-Preferred	PA; DO; AL; QL
<b>*VASOMOTOR SYMPTOM AGENTS - SSRIS***</b>			
paroxetine mesylate oral capsule		Non-Preferred	
<b>*RESPIRATORY AGENTS - MISC.*</b>			
<b>*ALPHA-PROTEINASE INHIBITOR (HUMAN)***</b>			
PROLASTIN-C INTRAVENOUS SOLUTION		Non-Preferred	QL
ZEMAIRA INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	PA; SP
<b>*CFTR POTENTIATORS***</b>			
KALYDECO ORAL PACKET		Non-Preferred	PA; QL
KALYDECO ORAL TABLET		Non-Preferred	PA; QL
<b>*CYSTIC FIBROSIS AGENT - COMBINATIONS***</b>			
ORKAMBI ORAL PACKET		Non-Preferred	PA; QL
ORKAMBI ORAL TABLET		Non-Preferred	PA; QL
SYMDEKO ORAL TABLET THERAPY PACK		Non-Preferred	PA; QL
TRIKAFTA ORAL TABLET THERAPY PACK		Non-Preferred	PA; QL
TRIKAFTA ORAL THERAPY PACK		Non-Preferred	PA; QL
<b>*CYSTIC FIBROSIS AGENTS - MISCELLANEOUS***</b>			
BRONCHITOL INHALATION CAPSULE		Non-Preferred	PA; SP; QL
BRONCHITOL TOLERANCE TEST INHALATION CAPSULE		Non-Preferred	PA; SP; QL

Drug Name	Reference	Status	Notes
<b>*HYDROLYTIC ENZYMES***</b>			
PULMOZYME INHALATION SOLUTION		Preferred	PA; SP; QL
<b>*PLEURAL SCLEROSING AGENTS***</b>			
SCLEROSOL INTRAPLEURAL INTRAPLEURAL AEROSOL POWDER		Non-Preferred	
STERILE TALC POWDER INTRAPLEURAL SUSPENSION RECONSTITUTED		Non-Preferred	
<b>*PULMONARY FIBROSIS AGENTS - KINASE INHIBITORS***</b>			
OFEV ORAL CAPSULE		Non-Preferred	PA; SP; QL
<b>*PULMONARY FIBROSIS AGENTS***</b>			
ESBRIET ORAL CAPSULE		Non-Preferred	PA; SP; QL
ESBRIET ORAL TABLET		Non-Preferred	PA; SP; QL
pirfenidone oral capsule	Esbriet	Non-Preferred	PA; SP; QL
pirfenidone oral tablet 267 mg, 801 mg	Esbriet	Non-Preferred	PA; SP; QL
pirfenidone oral tablet 534 mg		Non-Preferred	PA; QL
<b>*RESPIRATORY AGENTS - MISC.***</b>			
CUROSURF INTRATRACHEAL SUSPENSION		Non-Preferred	
INFASURF INTRATRACHEAL SUSPENSION		Non-Preferred	
SURVANTA INTRATRACHEAL SUSPENSION		Non-Preferred	
<b>*SULFONAMIDES*</b>			
<b>*SULFONAMIDES***</b>			
sulfadiazine oral tablet		Preferred	
<b>*TETRACYCLINES*</b>			
<b>*AMINOMETHYLCYCLINES***</b>			
NUZYRA INTRAVENOUS SOLUTION RECONSTITUTED		Non-Preferred	
NUZYRA ORAL TABLET		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
<b>*FLUOROCYCLINES***</b>			
<b>XERAVA INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>*GLYCYLCYCLINES***</b>			
tigecycline intravenous solution reconstituted	Tygacil	Non-Preferred	
<b>TYGACIL INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>*TETRACYCLINES***</b>			
demeclocycline hcl oral tablet		Preferred	
<b>DORYX MPC ORAL TABLET DELAYED RELEASE</b>		Non-Preferred	PA
<b>DOXY 100 INTRAVENOUS SOLUTION RECONSTITUTED</b>		Preferred	QL
doxycycline hyclate intravenous solution reconstituted	Doxy 100	Preferred	QL
doxycycline hyclate oral capsule		Preferred	QL
doxycycline hyclate oral tablet	TargaDOX	Preferred	QL
doxycycline hyclate oral tablet delayed release		Preferred	QL
doxycycline monohydrate oral capsule	Mondoxyne NL	Preferred	QL
doxycycline monohydrate oral suspension reconstituted		Preferred	QL
doxycycline monohydrate oral tablet		Preferred	QL
<b>MINOCIN INTRAVENOUS SOLUTION RECONSTITUTED</b>		Non-Preferred	
minocycline hcl er oral tablet extended release 24 hour		Non-Preferred	PA; QL
minocycline hcl oral capsule		Preferred	QL
minocycline hcl oral tablet		Preferred	QL
<b>MINOLIRA ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; QL
<b>MONDOXYNE NL ORAL CAPSULE</b>		Preferred	QL
<b>SEYSARA ORAL TABLET</b>		Non-Preferred	PA; QL
<b>TARGADOX ORAL TABLET</b>		Preferred	QL
tetracycline hcl oral capsule		Non-Preferred	PA; QL
tetracycline hcl oral tablet		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
<b>*THYROID AGENTS*</b>			
<b>*ANTITHYROID AGENTS - RADIOPHARMACEUTICALS***</b>			
sodium iodide i-131 oral solution		Non-Preferred	
<b>*ANTITHYROID AGENTS***</b>			
methimazole oral tablet		Preferred	
propylthiouracil oral tablet		Preferred	
<b>*THYROID HORMONES***</b>			
<b>ADTHYZA ORAL TABLET 120 MG, 130 MG, 15 MG, 16.25 MG, 32.5 MG, 65 MG, 90 MG, 97.5 MG</b>		Non-Preferred	
<b>ADTHYZA ORAL TABLET 30 MG, 60 MG</b>		Non-Preferred	QL
<b>ARMOUR THYROID ORAL TABLET 120 MG, 15 MG, 180 MG, 240 MG, 300 MG, 90 MG</b>		Non-Preferred	
<b>ARMOUR THYROID ORAL TABLET 30 MG, 60 MG</b>		Non-Preferred	QL
<b>CYTOMEL ORAL TABLET</b>		Non-Preferred	
<b>ERMEZA ORAL SOLUTION</b>		Non-Preferred	
<b>EUTHYROX ORAL TABLET</b>		Preferred	
<b>LEVO-T ORAL TABLET</b>		Preferred	
levothyroxine sodium intravenous solution		Non-Preferred	
levothyroxine sodium intravenous solution reconstituted		Non-Preferred	
levothyroxine sodium oral capsule	Tirosint	Non-Preferred	
levothyroxine sodium oral tablet	Euthyrox	Preferred	
<b>LEVOXYL ORAL TABLET</b>		Preferred	
liothyronine sodium intravenous solution		Non-Preferred	
liothyronine sodium oral tablet	Cytomel	Preferred	
niva thyroid oral tablet 120 mg, 15 mg, 90 mg	Adthyza	Non-Preferred	
niva thyroid oral tablet 30 mg, 60 mg	Adthyza	Non-Preferred	QL
<b>NP THYROID ORAL TABLET 120 MG, 15 MG, 90 MG</b>		Non-Preferred	
<b>NP THYROID ORAL TABLET 30 MG, 60 MG</b>		Non-Preferred	QL
<b>SYNTHROID ORAL TABLET</b>		Non-Preferred	

Drug Name	Reference	Status	Notes
THYQUIDITY ORAL SOLUTION		Non-Preferred	
TIROSINT ORAL CAPSULE		Non-Preferred	
TIROSINT-SOL ORAL SOLUTION		Non-Preferred	
UNITHROID ORAL TABLET		Preferred	
<b>*TOXOIDS*</b>			
<b>*TOXOID COMBINATIONS***</b>			
ADACEL INTRAMUSCULAR SUSPENSION		Preferred	AL
BOOSTRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE		Preferred	AL
DAPTACEL INTRAMUSCULAR SUSPENSION		Non-Preferred	
INFANRIX INTRAMUSCULAR SUSPENSION		Non-Preferred	
KINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE		Non-Preferred	
PEDIARIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE		Non-Preferred	
PENTACEL INTRAMUSCULAR SUSPENSION RECONSTITUTED		Non-Preferred	
QUADRACEL INTRAMUSCULAR SUSPENSION		Non-Preferred	
QUADRACEL INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE		Non-Preferred	
TDVAX INTRAMUSCULAR SUSPENSION		Preferred	AL
TENIVAC INTRAMUSCULAR INJECTABLE		Preferred	AL; QL
tetanus-diphtheria toxoids td intramuscular suspension	TDVAX	Preferred	AL
VAXELIS INTRAMUSCULAR SUSPENSION		Non-Preferred	
VAXELIS INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE		Non-Preferred	

Drug Name	Reference	Status	Notes
<b>*ULCER DRUGS/ANTISPASMODICS/ANTI CHOLINERGICS*</b>			
<b>*ANTICHOLINERGIC COMBINATIONS***</b>			
chlordiazepoxide-clidinium oral capsule	Librax	Non-Preferred	
<b>LIBRAX ORAL CAPSULE</b>		Non-Preferred	
<b>*ANTISPASMODICS***</b>			
<b>BENTYL INTRAMUSCULAR SOLUTION</b>		Non-Preferred	
dicyclomine hcl intramuscular solution	Bentyl	Non-Preferred	
dicyclomine hcl oral capsule		Preferred	
dicyclomine hcl oral solution		Preferred	
dicyclomine hcl oral tablet		Preferred	
<b>*BELLADONNA ALKALOIDS***</b>			
atropine sulfate injection solution		Non-Preferred	
atropine sulfate injection solution prefilled syringe		Non-Preferred	
atropine sulfate intravenous solution		Non-Preferred	
<b>*H-2 ANTAGONIST-ANTACID COMBINATIONS***</b>			
acid reducer complete oral tablet chewable	Duo Fusion	Preferred	OTC
<b>DUO FUSION ORAL TABLET CHEWABLE</b>		Preferred	OTC
<b>PEPCID COMPLETE ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>*H-2 ANTAGONISTS***</b>			
acid control maximum strength oral tablet	Zantac 360 Max St	Preferred	OTC; QL
acid controller max st oral tablet	Zantac 360 Max St	Preferred	OTC; QL
acid controller oral tablet	Zantac 360	Preferred	DO; OTC; QL
acid reducer maximum strength oral tablet	Zantac 360 Max St	Preferred	OTC; QL
acid reducer oral tablet	Zantac 360	Preferred	DO; OTC; QL
cimetidine 200 oral tablet	Tagamet HB	Non-Preferred	OTC; QL
cimetidine acid reducer oral tablet	Tagamet HB	Non-Preferred	OTC; QL
cimetidine hcl oral solution		Non-Preferred	QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
cimetidine oral tablet	Tagamet HB	Non-Preferred	QL
famotidine (pf) intravenous solution		Preferred	
famotidine intravenous solution		Non-Preferred	
famotidine maximum strength oral tablet	Zantac 360 Max St	Preferred	OTC; QL
famotidine oral suspension reconstituted		Preferred	PA; QL
famotidine oral tablet 10 mg	Zantac 360	Preferred	DO; OTC; QL
famotidine oral tablet 20 mg	Zantac 360 Max St	Non-Preferred	QL
famotidine oral tablet 40 mg	Pepcid	Preferred	QL
famotidine orig st oral tablet	Zantac 360	Preferred	DO; OTC; QL
famotidine premixed intravenous solution		Non-Preferred	
heartburn relief max st oral tablet	Zantac 360 Max St	Preferred	OTC; QL
heartburn relief oral tablet	Zantac 360	Preferred	DO; OTC; QL
nizatidine oral capsule		Preferred	QL
<b>PEPCID AC MAXIMUM STRENGTH ORAL TABLET</b>		Non-Preferred	OTC; QL
<b>PEPCID AC ORAL TABLET</b>		Non-Preferred	DO; OTC; QL
<b>PEPCID ORAL TABLET</b>		Non-Preferred	QL
<b>TAGAMET HB 200 ORAL TABLET</b>		Non-Preferred	OTC; QL
<b>TAGAMET HB ORAL TABLET</b>		Non-Preferred	OTC; QL
<b>ZANTAC 360 MAX ST ORAL TABLET</b>		Preferred	OTC; QL
<b>ZANTAC 360 ORAL TABLET</b>		Preferred	DO; OTC; QL
<b>*MISC. ANTI-ULCER***</b>			
<b>CARAFATE ORAL SUSPENSION</b>		Non-Preferred	
<b>CARAFATE ORAL TABLET</b>		Non-Preferred	
sucralfate oral suspension	Carafate	Non-Preferred	
sucralfate oral tablet	Carafate	Preferred	
<b>*PPI - POTASSIUM-COMPETITIVE ACID BLOCKERS (P-CAB)***</b>			
<b>VOQUEZNA ORAL TABLET</b>		Non-Preferred	PA
<b>*PROTON PUMP INHIBITOR-ANTACID COMBINATIONS***</b>			
<b>KONVOMEK ORAL SUSPENSION RECONSTITUTED</b>		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
omeprazole-sodium bicarbonate capsule 20-1100 mg oral (otc)	Zegerid	Preferred	QL
omeprazole-sodium bicarbonate capsule 20-1100 mg oral (rx)	Zegerid	Non-Preferred	PA; QL
omeprazole-sodium bicarbonate oral capsule 40-1100 mg	Zegerid	Non-Preferred	PA; QL
<b>ZEGERID ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>*PROTON PUMP INHIBITORS***</b>			
acid reducer oral capsule delayed release		Preferred	OTC
acid reducer oral tablet delayed release	PriLOSEC OTC	Preferred	OTC
esomeprazole magnesium oral capsule delayed release	NexIUM	Preferred	
esomeprazole magnesium oral packet	NexIUM	Preferred	
esomeprazole magnesium oral tablet delayed release	NexIUM 24HR	Preferred	OTC
lansoprazole oral capsule delayed release	Prevacid	Preferred	
<b>NEXIUM 24HR CLEAR MINIS ORAL CAPSULE DELAYED RELEASE</b>		Preferred	OTC
<b>NEXIUM 24HR ORAL CAPSULE DELAYED RELEASE</b>		Preferred	OTC
<b>NEXIUM 24HR ORAL TABLET DELAYED RELEASE</b>		Preferred	OTC
<b>NEXIUM ORAL CAPSULE DELAYED RELEASE</b>		Non-Preferred	PA
<b>NEXIUM ORAL PACKET</b>		Non-Preferred	PA
omeprazole magnesium oral capsule delayed release		Preferred	OTC
omeprazole magnesium oral tablet delayed release	PriLOSEC OTC	Preferred	OTC
omeprazole oral capsule delayed release 10 mg, 40 mg		Preferred	
omeprazole oral capsule delayed release 20 mg		Preferred	Preferred for Members less than 6 years of age. PA required for members greater than 6.
omeprazole oral tablet delayed release		Preferred	OTC



Drug Name	Reference	Status	Notes
omeprazole oral tablet delayed release dispersible		Preferred	OTC
pantoprazole sodium oral packet	Protonix	Preferred	
pantoprazole sodium oral tablet delayed release	Protonix	Preferred	
pantoprazole sodium-nacl intravenous solution		Non-Preferred	
<b>PREVACID 24HR ORAL CAPSULE DELAYED RELEASE</b>		Preferred	OTC
<b>PRILOSEC OTC ORAL TABLET DELAYED RELEASE</b>		Preferred	OTC
<b>*QUATERNARY ANTICHOLINERGICS***</b>			
<b>CUVPOSA ORAL SOLUTION</b>		Non-Preferred	
<b>GLYCATE ORAL TABLET</b>		Non-Preferred	PA
glycopyrrolate injection solution		Non-Preferred	
glycopyrrolate oral solution	Cuvposa	Non-Preferred	
glycopyrrolate oral tablet 1 mg	Robinul	Preferred	
glycopyrrolate oral tablet 1.5 mg	Glycate	Non-Preferred	PA
glycopyrrolate oral tablet 2 mg	Robinul-Forte	Preferred	
glycopyrrolate pf injection solution prefilled syringe	Glyrx-PF	Non-Preferred	
<b>GLYRX-PF INJECTION SOLUTION</b>		Non-Preferred	
<b>GLYRX-PF INJECTION SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	
methscopolamine bromide oral tablet		Non-Preferred	
<b>ROBINUL ORAL TABLET</b>		Non-Preferred	
<b>ROBINUL-FORTE ORAL TABLET</b>		Non-Preferred	
<b>*ULCER ANTI-INFECTIVE W/ BISMUTH COMBINATIONS***</b>			
bis subcit-metronid-tetracyc oral capsule	Pylera	Non-Preferred	PA; QL
bismuth/metronidaz/tetracyclin oral capsule	Pylera	Non-Preferred	PA; QL
<b>HELIDAC THERAPY ORAL</b>		Non-Preferred	PA; QL
<b>PYLERA ORAL CAPSULE</b>		Non-Preferred	PA; QL
<b>*ULCER ANTI-INFECTIVE W/ PROTON PUMP INHIBITORS***</b>			
amoxicill-clarithro-lansopraz oral therapy pack		Non-Preferred	PA; QL

Drug Name	Reference	Status	Notes
OMECLAMOX-PAK ORAL		Non-Preferred	PA; QL
TALICIA ORAL CAPSULE DELAYED RELEASE		Non-Preferred	PA; QL
<b>*ULCER ANTI-INFECTIVE-PCAB COMBINATIONS***</b>			
VOQUEZNA DUAL PAK ORAL THERAPY PACK		Non-Preferred	PA; QL
VOQUEZNA TRIPLE PAK ORAL THERAPY PACK		Non-Preferred	PA; QL
<b>*ULCER DRUGS - PROSTAGLANDINS***</b>			
CYTOTEC ORAL TABLET		Non-Preferred	
misoprostol oral tablet	Cytotec	Preferred	
<b>*URINARY ANTISPASMODICS*</b>			
<b>*URINARY ANTISPASMODIC - ANTIMUSCARINIC (ANTICHOLINERGIC)***</b>			
darifenacin hydrobromide er oral tablet extended release 24 hour		Preferred	QL
DETROL LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR		Non-Preferred	PA; QL
DETROL ORAL TABLET		Non-Preferred	PA; QL
fesoterodine fumarate er oral tablet extended release 24 hour	Toviaz	Non-Preferred	PA; QL
GELNIQUE TRANSDERMAL GEL		Non-Preferred	PA; QL
oxybutynin chloride er oral tablet extended release 24 hour		Preferred	QL
oxybutynin chloride oral solution		Preferred	QL
oxybutynin chloride oral tablet 2.5 mg		Non-Preferred	PA; QL
oxybutynin chloride oral tablet 5 mg		Preferred	QL
OXYTROL FOR WOMEN TRANSDERMAL PATCH TWICE WEEKLY		Preferred	OTC; QL
OXYTROL TRANSDERMAL PATCH TWICE WEEKLY		Non-Preferred	PA; QL
solifenacin succinate oral tablet	VESIcare	Non-Preferred	PA; QL
tolterodine tartrate er oral capsule extended release 24 hour	Detrol LA	Preferred	QL
tolterodine tartrate oral tablet	Detrol	Preferred	QL

Drug Name	Reference	Status	Notes
<b>TOVIAZ ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; QL
trospium chloride er oral capsule extended release 24 hour		Preferred	QL
trospium chloride oral tablet		Preferred	QL
<b>VESICARE LS ORAL SUSPENSION</b>		Non-Preferred	PA; QL
<b>VESICARE ORAL TABLET</b>		Non-Preferred	PA; QL
<b>*URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS***</b>			
<b>GEMTESA ORAL TABLET</b>		Non-Preferred	PA; QL
mirabegron er oral tablet extended release 24 hour	Myrbetriq	Non-Preferred	PA; QL
<b>MYRBETRIQ ORAL SUSPENSION RECONSTITUTED ER</b>		Non-Preferred	PA; QL
<b>MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR</b>		Non-Preferred	PA; QL
<b>*URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS***</b>			
bethanechol chloride oral tablet		Preferred	
<b>*URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS***</b>			
flavoxate hcl oral tablet		Preferred	
<b>*VACCINES*</b>			
<b>*BACTERIAL VACCINES***</b>			
<b>ACTHIB INTRAMUSCULAR SOLUTION RECONSTITUTED</b>		Preferred	AL; QL
<b>BEXSERO INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE</b>		Preferred	AL; QL
<b>BIOTHRAX INTRAMUSCULAR SUSPENSION</b>		Preferred	AL
<b>CAPVAXIVE INTRAMUSCULAR SOLUTION PREFILLED SYRINGE</b>		Preferred	AL; QL
<b>HIBERIX INJECTION SOLUTION RECONSTITUTED</b>		Preferred	AL; QL
<b>MENQUADFI INTRAMUSCULAR SOLUTION</b>		Preferred	AL; QL
<b>MENVEO INTRAMUSCULAR SOLUTION</b>		Preferred	AL; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>MENVEO INTRAMUSCULAR SOLUTION RECONSTITUTED</b>		Preferred	AL; QL
<b>PEDVAX HIB INTRAMUSCULAR SUSPENSION</b>		Preferred	AL; QL
<b>PENBRAYA INTRAMUSCULAR SUSPENSION RECONSTITUTED</b>		Preferred	AL; QL
<b>PNEUMOVAX 23 INJECTION SOLUTION PREFILLED SYRINGE</b>		Preferred	AL; QL
<b>PREVNAR 20 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE</b>		Preferred	AL; QL
<b>TRUMENBA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE</b>		Preferred	AL; QL
<b>TYPHIM VI INTRAMUSCULAR SOLUTION</b>		Preferred	AL; QL
<b>TYPHIM VI INTRAMUSCULAR SOLUTION PREFILLED SYRINGE</b>		Preferred	AL; QL
<b>VAXCHORA ORAL SUSPENSION RECONSTITUTED</b>		Preferred	AL; QL
<b>VAXNEUVANCE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE</b>		Preferred	AL; QL
<b>VIVOTIF ORAL CAPSULE DELAYED RELEASE</b>		Preferred	AL; QL
<b>*VIRAL VACCINE COMBINATIONS***</b>			
<b>M-M-R II INJECTION SOLUTION RECONSTITUTED</b>		Preferred	AL; QL
<b>PRIORIX SUBCUTANEOUS SUSPENSION RECONSTITUTED</b>		Preferred	AL; QL
<b>PROQUAD SUBCUTANEOUS SUSPENSION RECONSTITUTED</b>		Preferred	AL; QL
<b>TWINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE</b>		Preferred	AL; QL
<b>*VIRAL VACCINES***</b>			
<b>ABRYSVO INTRAMUSCULAR SOLUTION RECONSTITUTED</b>		Preferred	QL
<b>ACAM2000 INJECTION SOLUTION RECONSTITUTED</b>		Preferred	AL; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>AFLURIA INTRAMUSCULAR SUSPENSION</b>		Preferred	AL; QL
<b>AFLURIA PRESERVATIVE FREE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE</b>		Preferred	AL; QL
<b>AREXVY INTRAMUSCULAR SUSPENSION RECONSTITUTED</b>		Preferred	AL; QL
<b>AUDENZ INTRAMUSCULAR EMULSION</b>		Preferred	AL; QL
<b>AUDENZ INTRAMUSCULAR PREFILLED SYRINGE</b>		Preferred	AL; QL
<b>COMIRNATY INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE</b>		Preferred	AL; QL
<b>DENGVAXIA SUBCUTANEOUS SUSPENSION RECONSTITUTED</b>		Non-Preferred	
<b>ENGERIX-B INJECTION SUSPENSION</b>		Preferred	AL; QL
<b>ENGERIX-B INJECTION SUSPENSION PREFILLED SYRINGE</b>		Preferred	AL; QL
<b>ERVEBO INTRAMUSCULAR SUSPENSION</b>		Preferred	AL
<b>FLUAD INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE</b>		Preferred	AL; QL
<b>FLUARIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE</b>		Preferred	AL; QL
<b>FLUBLOK INTRAMUSCULAR SOLUTION PREFILLED SYRINGE</b>		Preferred	AL; QL
<b>FLUCELVAX INTRAMUSCULAR SUSPENSION</b>		Preferred	AL; QL
<b>FLUCELVAX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE</b>		Preferred	AL; QL
<b>FLULAVAL INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE</b>		Preferred	AL; QL
<b>FLUMIST NASAL LIQUID</b>		Preferred	AL; QL
<b>FLUZONE HIGH-DOSE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE</b>		Preferred	AL; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>FLUZONE INTRAMUSCULAR SUSPENSION</b>		Preferred	AL; QL
<b>FLUZONE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE</b>		Preferred	AL; QL
<b>GARDASIL 9 INTRAMUSCULAR SUSPENSION</b>		Preferred	AL; QL
<b>GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE</b>		Preferred	AL
<b>HAVRIX INTRAMUSCULAR SUSPENSION</b>		Preferred	AL; QL
<b>HEPLISAV-B INTRAMUSCULAR SOLUTION PREFILLED SYRINGE</b>		Preferred	AL; QL
<b>IMOVAX RABIES INTRAMUSCULAR SUSPENSION RECONSTITUTED</b>		Preferred	AL
<b>IPOL INJECTION INJECTABLE</b>		Preferred	AL; QL
<b>IXCHIQ INTRAMUSCULAR SOLUTION RECONSTITUTED</b>		Non-Preferred	
<b>IXIARO INTRAMUSCULAR SUSPENSION</b>		Preferred	AL; QL
<b>JYNNEOS SUBCUTANEOUS SUSPENSION</b>		Preferred	AL; QL
<b>MODERNA COVID-19 VAC 6M-11Y INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE</b>		Preferred	AL
<b>MRESVIA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE</b>		Preferred	AL; QL
novavax covid-19 vaccine intramuscular suspension prefilled syringe		Preferred	AL
<b>PREHEVBRIO INTRAMUSCULAR SUSPENSION</b>		Preferred	AL; QL
<b>RABAVERT INTRAMUSCULAR SUSPENSION RECONSTITUTED</b>		Preferred	AL
<b>RECOMBIVAX HB INJECTION SUSPENSION</b>		Preferred	AL; QL
<b>RECOMBIVAX HB INJECTION SUSPENSION PREFILLED SYRINGE</b>		Preferred	AL; QL
<b>ROTARIX ORAL SUSPENSION</b>		Non-Preferred	

Drug Name	Reference	Status	Notes
ROTATEQ ORAL SOLUTION		Non-Preferred	
SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED		Preferred	AL; QL
SPIKEVAX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE		Preferred	AL; QL
stamaril injection suspension reconstituted		Non-Preferred	
TICOVAC INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE		Preferred	AL; QL
VAQTA INTRAMUSCULAR SUSPENSION		Preferred	AL; QL
VARIVAX INJECTION SUSPENSION RECONSTITUTED		Preferred	AL; QL
YF-VAX SUBCUTANEOUS INJECTABLE		Preferred	AL; QL
<b>*VAGINAL AND RELATED PRODUCTS*</b>			
<b>*DOUCHE PRODUCTS***</b>			
SUMMERS EVE COMPLETE CLEAN VAGINAL SOLUTION		Non-Preferred	OTC
SUMMERS EVE FRESH VAGINAL SOLUTION		Non-Preferred	OTC
SUMMERS EVE ISLAND SPLASH VAGINAL SOLUTION		Non-Preferred	OTC
SUMMERS EVE VAGINAL SOLUTION		Non-Preferred	OTC
<b>*IMIDAZOLE-RELATED ANTIFUNGALS***</b>			
clotrimazole 3 vaginal cream		Preferred	OTC
clotrimazole vaginal cream		Preferred	OTC; QL
clotrimazole-7 vaginal cream		Preferred	OTC; QL
<b>GYNAZOLE-1 VAGINAL CREAM</b>		Non-Preferred	
miconazole 1 vaginal kit	Monistat 1 Combo Pack	Preferred	OTC
miconazole 3 combo pack vaginal kit	Monistat 3 Combo Pack App	Preferred	OTC; QL
miconazole 3 combo-supp vaginal kit	Vagistat-3	Preferred	OTC
miconazole 3 vaginal suppository		Preferred	
miconazole 7 vaginal cream	Monistat 7 Simply Cure	Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
miconazole 7 vaginal suppository		Preferred	OTC
miconazole nitrate vaginal cream	Monistat 7 Simply Cure	Preferred	OTC
<b>MONISTAT 1 COMBO PACK VAGINAL KIT</b>		Non-Preferred	OTC
<b>MONISTAT 1 DAY OR NIGHT VAGINAL KIT</b>		Non-Preferred	OTC
<b>MONISTAT 1-DAY VAGINAL OINTMENT</b>		Preferred	OTC
<b>MONISTAT 3 COMBINATION PACK VAGINAL KIT 200 &amp; 2 MG-% (9GM)</b>		Non-Preferred	OTC
<b>MONISTAT 3 COMBINATION PACK VAGINAL KIT 200-2 MG-%</b>		Non-Preferred	OTC; QL
<b>MONISTAT 3 COMBO PACK APP VAGINAL KIT</b>		Non-Preferred	OTC; QL
<b>MONISTAT 3 VAGINAL CREAM</b>		Non-Preferred	OTC
<b>MONISTAT 7 COMBO PACK APP VAGINAL KIT</b>		Non-Preferred	OTC
<b>MONISTAT 7 COMPLETE THERAPY VAGINAL KIT</b>		Non-Preferred	OTC
<b>MONISTAT 7 SIMPLY CURE VAGINAL CREAM</b>		Non-Preferred	OTC
terconazole vaginal cream		Preferred	QL
terconazole vaginal suppository		Preferred	QL
tioconazole-1 vaginal ointment	Monistat 1-Day	Preferred	OTC
<b>VAGISTAT-3 VAGINAL KIT</b>		Preferred	OTC
<b>*MISCELLANEOUS VAGINAL COMBINATIONS***</b>			
<b>VAGISIL BATH BOMB EXTERNAL</b>		Non-Preferred	OTC
<b>*MISCELLANEOUS VAGINAL PRODUCTS***</b>			
<b>AZO BORIC ACID VAGINAL SUPPOSITORY</b>		Non-Preferred	OTC
douche vinegar/water vaginal solution	Summers Eve Extra Cleansing	Non-Preferred	OTC
<b>FEMINEASE VAGINAL CREAM</b>		Non-Preferred	OTC
<b>HYALO GYN VAGINAL GEL</b>		Non-Preferred	OTC
<b>INTRAROSA VAGINAL INSERT</b>		Non-Preferred	PA; QL
<b>KEY-E COMBINATION SUPPOSITORY</b>		Non-Preferred	OTC
<b>K-Y LIQUIBEADS VAGINAL INSERT</b>		Non-Preferred	OTC



<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
LUVENA DAILY THERAPEUTIC WASH EXTERNAL LIQUID		Non-Preferred	OTC
LUVENA PREBIOTIC LUBRICANT VAGINAL SOLUTION		Non-Preferred	OTC
LUVENA RESTORATIVE RINSE VAGINAL LIQUID		Non-Preferred	OTC
LUVENA VAGINAL MOISTURIZER VAGINAL GEL		Non-Preferred	OTC
MONISTAT CARE VAGINAL GEL		Non-Preferred	OTC
MONISTAT MAINTAIN CLEANSER EXTERNAL LIQUID		Non-Preferred	OTC
MONISTAT MAINTAIN-BORIC ACID EXTERNAL LIQUID		Non-Preferred	OTC
NORFORMS VAGINAL SUPPOSITORY		Non-Preferred	OTC
PH-D VAGINAL SUPPOSITORY		Non-Preferred	OTC
REPHRESH ODOR ELIMINATING VAGINAL GEL		Non-Preferred	OTC
REPLENS EXTERNAL COMFORT VAGINAL GEL		Non-Preferred	OTC
REPLENS VAGINAL MOISTURIZER VAGINAL GEL		Non-Preferred	OTC
REVAREE PLUS VAGINAL SUPPOSITORY		Non-Preferred	OTC
REVAREE VAGINAL SUPPOSITORY		Non-Preferred	OTC
SUMMERS EVE CLEANSING WASH EXTERNAL LIQUID		Non-Preferred	OTC
SUMMERS EVE EXTRA CLEANSING VAGINAL SOLUTION		Non-Preferred	OTC
SUMMERS EVE FEMININE WASH EXTERNAL LIQUID		Non-Preferred	OTC
SUMMERS EVE NIGHT-TIME EXTERNAL LIQUID		Non-Preferred	OTC
THERAWORX HARMONY FOAM WASH EXTERNAL LIQUID		Non-Preferred	OTC
VAGISIL EXTERNAL CREAM		Non-Preferred	OTC
VAGISIL FEMININE MOISTURIZER VAGINAL LOTION		Non-Preferred	OTC
VAGISIL FEMININE WASH EXTERNAL LIQUID		Non-Preferred	OTC
VAGISIL INTIMATE WASH EXTERNAL LIQUID		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>VAGISIL LUBRICANT VAGINAL GEL</b>		Non-Preferred	OTC
<b>VAGISIL MAXIMUM STRENGTH EXTERNAL CREAM</b>		Non-Preferred	OTC
vagisil ph balance external liquid	Luvena Daily Therapeutic Wash	Non-Preferred	OTC
<b>VAGISIL SENSITIVE PLUS WASH EXTERNAL LIQUID</b>		Non-Preferred	OTC
<b>VAGISIL YEAST-CONTROL VAGINAL SUPPOSITORY</b>		Non-Preferred	OTC
<b>VCF VAGINAL ODOR ELIMINATING VAGINAL FILM</b>		Non-Preferred	OTC
<b>VIA VAGINAL GEL</b>		Non-Preferred	OTC
<b>*SPERMICIDES***</b>			
<b>ENCARE VAGINAL SUPPOSITORY</b>		Preferred	OTC
<b>OPTIONS GYNOL II CONTRACEPTIVE VAGINAL GEL</b>		Preferred	OTC
<b>TODAY SPONGE VAGINAL</b>		Preferred	OTC
<b>VCF VAGINAL CONTRACEPTIVE VAGINAL FILM</b>		Preferred	OTC
<b>VCF VAGINAL CONTRACEPTIVE VAGINAL GEL</b>		Preferred	OTC
<b>*VAGINAL ANTI-INFECTIVES***</b>			
<b>CLEOCIN VAGINAL CREAM</b>		Non-Preferred	
<b>CLEOCIN VAGINAL SUPPOSITORY</b>		Preferred	
clindamycin phosphate vaginal cream	Cleocin	Preferred	
<b>CLINDESSE VAGINAL CREAM</b>		Non-Preferred	
medicated douche vaginal solution	Summers Eve Disp Medicated	Non-Preferred	OTC
metronidazole vaginal gel	Vandazole	Preferred	
<b>NUVESSA VAGINAL GEL</b>		Non-Preferred	
<b>SUMMERS EVE DISP MEDICATED VAGINAL SOLUTION</b>		Non-Preferred	OTC
<b>VANDAZOLE VAGINAL GEL</b>		Preferred	
<b>XACIATO VAGINAL GEL</b>		Non-Preferred	PA; QL
<b>*VAGINAL CORTICOSTEROIDS***</b>			
<b>MONISTAT CARE INSTANT ITCH RLF EXTERNAL CREAM</b>		Non-Preferred	OTC; QL

Drug Name	Reference	Status	Notes
<b>*VAGINAL ESTROGENS***</b>			
<b>ESTRACE VAGINAL CREAM</b>		Non-Preferred	PA; QL
estradiol vaginal cream	Estrace	Non-Preferred	PA; QL
estradiol vaginal tablet	Yuvafem	Preferred	
<b>ESTRING VAGINAL RING</b>		Non-Preferred	PA; QL
<b>FEMRING VAGINAL RING</b>		Non-Preferred	PA; QL
<b>IMVEXXY MAINTENANCE PACK VAGINAL INSERT</b>		Non-Preferred	PA; QL
<b>IMVEXXY STARTER PACK VAGINAL INSERT</b>		Non-Preferred	PA; QL
<b>PREMARIN VAGINAL CREAM</b>		Non-Preferred	PA
<b>VAGIFEM VAGINAL TABLET</b>		Non-Preferred	PA
<b>YUVAFEM VAGINAL TABLET</b>		Preferred	
<b>*VAGINAL PROGESTINS***</b>			
<b>CRINONE VAGINAL GEL 4 %</b>		Non-Preferred	PA; SP
<b>CRINONE VAGINAL GEL 8 %</b>		Non-Preferred	PA; SP; QL
<b>*VASOPRESSORS*</b>			
<b>*ANAPHYLAXIS THERAPY AGENTS***</b>			
<b>ADRENALIN INJECTION SOLUTION</b>		Non-Preferred	
<b>AUVI-Q INJECTION SOLUTION AUTO-INJECTOR</b>		Non-Preferred	PA; QL
epinephrine (anaphylaxis) injection solution	Adrenalin	Non-Preferred	
epinephrine injection solution auto-injector	Auvi-Q	Preferred	QL
<b>EPINEPHRINESNAP INJECTION KIT</b>		Non-Preferred	
<b>EPIPEN 2-PAK INJECTION SOLUTION AUTO-INJECTOR</b>		Non-Preferred	PA; QL
<b>EPIPEN JR 2-PAK INJECTION SOLUTION AUTO-INJECTOR</b>		Non-Preferred	PA; QL
<b>NEFFY NASAL SOLUTION</b>		Non-Preferred	PA; QL
<b>*NEUROGENIC ORTHOSTATIC HYPOTENSION (NOH) - AGENTS***</b>			
droxidopa oral capsule	Northera	Non-Preferred	PA; SP; QL
<b>NORTHERA ORAL CAPSULE</b>		Non-Preferred	PA; SP; QL

Drug Name	Reference	Status	Notes
<b>*VASOPRESSORS***</b>			
<b>ADRENALIN-NACL INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>AKOVAZ INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>AKOVAZ INTRAVENOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	
<b>BIORPHEN INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>EMERPHEd INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>EMERPHEd INTRAVENOUS SOLUTION PREFILLED SYRINGE</b>		Non-Preferred	
ephedrine sulfate (pressors) intravenous solution	Akovaz	Non-Preferred	
epinephrine injection solution		Non-Preferred	
epinephrine intravenous solution prefilled syringe		Non-Preferred	
epinephrine pf injection solution		Non-Preferred	
<b>GIAPREZA INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>IMMPHENTIV INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>LEVOPHEd INTRAVENOUS SOLUTION</b>		Non-Preferred	
midodrine hcl oral tablet		Preferred	
norepinephrine bitartrate intravenous solution	Levophed	Non-Preferred	
phenylephrine hcl (pressors) intravenous solution	Vazculep	Non-Preferred	
<b>REZIPRES INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>VAZCULEP INTRAVENOUS SOLUTION</b>		Non-Preferred	
<b>*VITAMINS*</b>			
<b>*BIOFLAVONOID COMBINATIONS***</b>			
<b>DIOVASC ORAL CAPSULE</b>		Non-Preferred	OTC
<b>FLOGEN ORAL TABLET</b>		Non-Preferred	OTC
<b>VASOFLEX D1 ORAL TABLET</b>		Non-Preferred	OTC
venaliv oral tablet		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>*BIOFLAVONOIDS***</b>			
quercetin oral capsule		Non-Preferred	OTC
quercetin oral tablet		Non-Preferred	OTC
rutin oral tablet		Non-Preferred	OTC
<b>*BIOTIN***</b>			
biotin beauty extra strength oral tablet dispersible		Non-Preferred	OTC
biotin fast dissolve oral tablet dispersible		Non-Preferred	OTC
biotin forte oral tablet		Non-Preferred	OTC
biotin maximum strength oral capsule	Meribin	Preferred	OTC
biotin maximum strength oral tablet		Non-Preferred	OTC
biotin oral capsule 1 mg, 10 mg		Non-Preferred	OTC
biotin oral capsule 5 mg, 5000 mcg	Meribin	Preferred	OTC
biotin oral tablet 10 mg, 10000 mcg, 5 mg, 5000 mcg		Non-Preferred	OTC
biotin oral tablet 1000 mcg, 800 mcg		Preferred	OTC
biotin oral tablet chewable		Non-Preferred	OTC
biotin oral tablet dispersible		Non-Preferred	OTC
biotin sublingual tablet sublingual		Non-Preferred	OTC
biotin super potency oral capsule	Meribin	Preferred	OTC
<b>CYTO B7 ORAL LIQUID</b>		Non-Preferred	OTC
<b>HARD NAILS ORAL CAPSULE</b>		Non-Preferred	OTC
<b>LEXINAL ORAL TABLET</b>		Non-Preferred	OTC
mega biotin oral capsule		Non-Preferred	OTC
<b>MERIBIN ORAL CAPSULE</b>		Preferred	OTC
<b>NAIL-EX ORAL TABLET</b>		Non-Preferred	OTC
super biotin oral capsule	Meribin	Preferred	OTC
super biotin oral tablet		Non-Preferred	OTC
<b>VB7 MAX ORAL POWDER</b>		Non-Preferred	OTC
<b>VITAJoy BIOTIN GUMMIES ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>YUMVS BIOTIN HIGH POTENCY ZERO ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>YUMVS BIOTIN MAX POTENCY ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>*VITAMIN A***</b>			
a-25 oral capsule		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>AQUASOL A INTRAMUSCULAR SOLUTION</b>		Non-Preferred	
beta carotene high potency oral capsule		Non-Preferred	OTC
beta carotene oral capsule		Non-Preferred	OTC
beta carotene provitamin a oral capsule		Non-Preferred	OTC
natural vitamin a oral capsule		Preferred	OTC
true vitamin a oral capsule		Preferred	OTC
<b>VITAMIN A FISH ORAL CAPSULE</b>		Non-Preferred	OTC
vitamin a oral capsule 2400 mcg (8000 ut), 3 mg, 3 mg (10000 ut)		Preferred	OTC
vitamin a oral capsule 7.5 mg (25000 ut)		Non-Preferred	OTC
vitamin a oral tablet		Non-Preferred	OTC
vitamin a palmitate oral tablet		Non-Preferred	OTC
vitamin a-beta carotene oral capsule		Non-Preferred	OTC
vitamin a-beta carotene oral tablet		Non-Preferred	OTC
xcellent a 7500 oral capsule		Non-Preferred	OTC
yl beta carotene oral capsule		Non-Preferred	OTC
<b>*VITAMIN B-1***</b>			
arkaliox oral capsule		Non-Preferred	OTC
b1 natural oral tablet		Non-Preferred	OTC
b1 oral tablet		Preferred	OTC
b-1 oral tablet		Preferred	OTC
benfotiamine oral capsule		Non-Preferred	OTC
benfotiamine-v oral capsule		Non-Preferred	OTC
<b>CYTO B1 ORAL POWDER</b>		Non-Preferred	OTC
thiamine hcl injection solution		Preferred	
thiamine hcl oral tablet		Preferred	OTC
thiamine mononitrate oral tablet		Preferred	OTC
true vitamin b1 oral tablet		Non-Preferred	OTC
vitamin b1 oral tablet		Preferred	OTC
vitamin b-1 oral tablet		Preferred	OTC
<b>*VITAMIN B-2***</b>			
b-2 oral tablet		Preferred	OTC
<b>B-2-400 ORAL CAPSULE</b>		Non-Preferred	OTC
<b>CYTO B2 ORAL POWDER</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
riboflavin oral tablet		Non-Preferred	OTC
vitamin b-2 oral tablet		Preferred	OTC
<b>*VITAMIN B-3***</b>			
<b>ENDUR-ACIN ORAL TABLET EXTENDED RELEASE</b>		Preferred	OTC
<b>ENDUR-AMIDE ORAL TABLET EXTENDED RELEASE</b>		Non-Preferred	OTC
niacin er oral capsule extended release 250 mg		Preferred	OTC; QL
niacin er oral capsule extended release 500 mg		Non-Preferred	OTC; QL
niacin er oral tablet extended release 1000 mg		Non-Preferred	OTC
niacin er oral tablet extended release 250 mg, 500 mg, 750 mg	Endur-Acin	Preferred	OTC
niacin oral tablet		Preferred	OTC
niacinamide er oral tablet extended release	Endur-Amide	Non-Preferred	OTC
niacinamide oral tablet		Preferred	OTC
<b>NIAVASC 750 ORAL TABLET EXTENDED RELEASE</b>		Preferred	OTC
<b>NIAVASC ORAL TABLET EXTENDED RELEASE</b>		Preferred	OTC
<b>SLO-NIACIN ORAL TABLET EXTENDED RELEASE</b>		Non-Preferred	OTC
<b>*VITAMIN B-5***</b>			
calcium pantothenate oral tablet 100 mg, 200 mg		Non-Preferred	OTC
calcium pantothenate oral tablet 500 mg		Preferred	OTC
<b>*VITAMIN B-6***</b>			
b6 natural oral tablet		Preferred	OTC
b-6 oral tablet 100 mg, 250 mg, 50 mg		Preferred	OTC
b-6 oral tablet 500 mg		Non-Preferred	OTC
<b>B-NATAL MOUTH/THROAT LOZENGE</b>		Non-Preferred	OTC
<b>B-NATAL MOUTH/THROAT LOZENGE ON A HANDLE</b>		Non-Preferred	OTC
pyridoxine hcl injection solution		Preferred	
pyridoxine hcl oral tablet		Preferred	OTC

Drug Name	Reference	Status	Notes
true vitamin b6 oral tablet		Non-Preferred	OTC
vitamin b-6 er oral tablet extended release		Non-Preferred	OTC
vitamin b6 oral tablet		Preferred	OTC
vitamin b-6 oral tablet		Preferred	OTC
<b>*VITAMIN C***</b>			
<b>ACEROLA C 500 ORAL WAFER</b>		Preferred	OTC
acerola c-500 oral tablet chewable	Sunkist Vitamin C	Preferred	OTC; QL
<b>ASCOR INTRAVENOUS SOLUTION</b>		Non-Preferred	
ascorbic acid oral powder	Cyto C	Non-Preferred	OTC
ascorbic acid oral tablet 1000 mg		Preferred	OTC
ascorbic acid oral tablet 500 mg	Easy-C Immune Health	Preferred	OTC; QL
<b>BPROTECTED VITAMIN C ORAL LIQUID</b>		Preferred	OTC
buffered vitamin c oral capsule		Non-Preferred	OTC
c extra strength oral tablet		Preferred	OTC
calcium ascorbate oral tablet		Preferred	OTC; QL
<b>CYTO C ORAL POWDER</b>		Non-Preferred	OTC
<b>EASY-C IMMUNE HEALTH ORAL TABLET</b>		Preferred	OTC; QL
<b>ENDUR-C ORAL TABLET EXTENDED RELEASE</b>		Preferred	OTC
liquid c oral liquid	BProtected Vitamin C	Preferred	OTC
natural c/rose hips oral tablet 1000 mg		Preferred	OTC
natural c/rose hips oral tablet 500 mg	Easy-C Immune Health	Preferred	OTC; QL
vita-c oral crystals		Preferred	OTC
vitachew vit c citrus burst oral tablet chewable	VitaJoy Daily C Gummies	Non-Preferred	OTC
<b>VITAJEY DAILY C GUMMIES ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>VITAMELTS VITAMIN C ORAL TABLET DISPERSIBLE</b>		Non-Preferred	OTC
vitamin c (calcium ascorbate) oral solution reconstituted		Non-Preferred	OTC
vitamin c adult gummies oral tablet chewable	VitaJoy Daily C Gummies	Non-Preferred	OTC
vitamin c drops mouth/throat lozenge	Crush Vitamin C Drops	Preferred	OTC
vitamin c er oral capsule extended release		Preferred	OTC



Drug Name	Reference	Status	Notes
vitamin c er oral tablet extended release 1500 mg		Non-Preferred	OTC
vitamin c er oral tablet extended release 500 mg	Endur-C	Preferred	OTC
vitamin c gummie oral tablet chewable		Non-Preferred	OTC
vitamin c gummies oral tablet chewable	VitaJoy Daily C Gummies	Non-Preferred	OTC
vitamin c immune health oral tablet chewable	Sunkist Vitamin C	Preferred	OTC; QL
vitamin c oral capsule		Non-Preferred	OTC
vitamin c oral liquid	BProtected Vitamin C	Preferred	OTC
vitamin c oral powder	Cyto C	Non-Preferred	OTC
vitamin c oral tablet 100 mg, 1000 mg		Preferred	OTC
vitamin c oral tablet 250 mg		Preferred	OTC; QL
vitamin c oral tablet 500 mg	Easy-C Immune Health	Preferred	OTC; QL
vitamin c oral tablet chewable 100 mg, 250 mg		Preferred	OTC
vitamin c oral tablet chewable 125 mg	VitaJoy Daily C Gummies	Non-Preferred	OTC
vitamin c oral tablet chewable 500 mg	Sunkist Vitamin C	Preferred	OTC; QL
vitamin c plus wild rose hips oral tablet chewable	Sunkist Vitamin C	Preferred	OTC; QL
vitamin c/bioflavonoids/rosehp oral tablet	Easy-C Immune Health	Preferred	OTC; QL
vitamin c/natural rose hips oral tablet		Preferred	OTC
vitamin c/rose hips oral tablet	Easy-C Immune Health	Preferred	OTC; QL
vitamin c/rose hips tr oral tablet extended release	Endur-C	Preferred	OTC
vitamin c-acerola oral tablet chewable	Sunkist Vitamin C	Preferred	OTC; QL
vitamin c-rose hips er oral tablet extended release	Endur-C	Preferred	OTC
vitamin c-rose hips oral tablet 1000 mg		Preferred	OTC
vitamin c-rose hips oral tablet 500 mg	Easy-C Immune Health	Preferred	OTC; QL
vitamin c-rose hips oral tablet chewable	Sunkist Vitamin C	Preferred	OTC; QL
vitamin c-rose hips tr oral tablet extended release	Endur-C	Preferred	OTC
<b>XCELLENT C ORAL CAPSULE</b>		Non-Preferred	OTC

Drug Name	Reference	Status	Notes
<b>YUMVS VITAMIN C ZERO ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>*VITAMIN D***</b>			
<b>AQUA-D ORAL LIQUID</b>		Non-Preferred	OTC
aqueous vitamin d oral liquid	BProtected Pedia D-Vite	Preferred	OTC
<b>BABY DDROPS ORAL LIQUID</b>		Non-Preferred	OTC
baby super daily d3 oral liquid	Baby Ddrops	Non-Preferred	OTC
baby vitamin d3 oral liquid	Baby Ddrops	Non-Preferred	OTC
<b>BIO-D-MULSION FORTE ORAL LIQUID</b>		Non-Preferred	OTC
<b>BIO-D-MULSION ORAL LIQUID</b>		Non-Preferred	OTC
<b>BPROTECTED PEDIA D-VITE ORAL LIQUID</b>		Preferred	OTC
<b>CALCIDOL ORAL SOLUTION</b>		Preferred	OTC
d 1000 oral capsule	Pronutrients Vitamin D3	Preferred	OTC
d 1000 oral tablet chewable	Kids First Vitamin D3 Gummies	Preferred	OTC
d 10000 oral capsule	IS-D 10,000	Preferred	OTC
d 400 oral tablet		Preferred	OTC; QL
d 5000 oral capsule	Dialyvite Vitamin D 5000	Preferred	OTC; QL
d-1000 extra strength oral tablet	Vitamin D-1000 Max St	Preferred	OTC
d2000 ultra strength oral capsule		Preferred	OTC; QL
d3 2000 oral capsule		Preferred	OTC; QL
d3 5000 oral capsule	Dialyvite Vitamin D 5000	Preferred	OTC; QL
d3 adult oral tablet chewable	Kids First Vitamin D3 Gummies	Preferred	OTC
d3 baby drops oral liquid	UpSpring Baby Vit D	Non-Preferred	OTC
d3 extra strength oral capsule	Dialyvite Vitamin D 5000	Preferred	OTC; QL
d3 high potency oral capsule 125 mcg (5000 ut)	Dialyvite Vitamin D 5000	Preferred	OTC; QL
d3 high potency oral capsule 25 mcg, 25 mcg (1000 ut)	Pronutrients Vitamin D3	Preferred	OTC
d3 high potency oral capsule 50 mcg (2000 ut)		Preferred	OTC; QL
d3 high potency oral tablet		Preferred	OTC; QL

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
d3 kids oral tablet chewable		Preferred	OTC
d3 liquid oral liquid		Non-Preferred	OTC
d3 maximum strength oral capsule	Dialyvite Vitamin D 5000	Preferred	OTC; QL
d3 oral capsule	Pronutrients Vitamin D3	Preferred	OTC
d3 oral tablet	Thera-D 2000	Preferred	OTC
d3 oral tablet chewable	YumVs Vitamin D3 ZERO	Non-Preferred	OTC
d3 super strength oral capsule		Preferred	OTC; QL
d3-1000 oral capsule	Pronutrients Vitamin D3	Preferred	OTC
d3-1000 oral tablet	Vitamin D-1000 Max St	Preferred	OTC
d-3-5 oral capsule	Dialyvite Vitamin D 5000	Preferred	OTC; QL
<b>D3-50 ORAL CAPSULE</b>		Preferred	OTC
d-400 oral tablet		Preferred	OTC; QL
d-5000 oral tablet	Radiance Platinum Vitamin D3	Preferred	OTC
<b>DDROPS BOOSTER ORAL LIQUID</b>		Non-Preferred	OTC
<b>DDROPS ORAL LIQUID</b>		Non-Preferred	OTC
<b>DECARA ORAL CAPSULE 1.25 MG (50000 UT)</b>		Preferred	OTC
<b>DECARA ORAL CAPSULE 625 MCG (25000 UT)</b>		Non-Preferred	OTC
delta d3 oral tablet		Preferred	OTC; QL
<b>DIALYVITE VITAMIN D 5000 ORAL CAPSULE</b>		Preferred	OTC; QL
<b>DIALYVITE VITAMIN D3 MAX ORAL TABLET</b>		Preferred	OTC
<b>DRISDOL ORAL CAPSULE</b>		Non-Preferred	
<b>D-VI-SOL ORAL LIQUID</b>		Non-Preferred	OTC
d-vite pediatric oral liquid	BProtected Pedia D-Vite	Preferred	OTC
ergocalciferol oral capsule	Drisdol	Preferred	
ergocalciferol oral solution	Calcidol	Preferred	OTC
finest nutrition vitamin d3 oral capsule	Pronutrients Vitamin D3	Preferred	OTC
<b>IS-D 10,000 ORAL CAPSULE</b>		Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
<b>KIDS FIRST VITAMIN D3 GUMMIES ORAL TABLET CHEWABLE</b>		Preferred	OTC
<b>MAXIMUM D3 ORAL CAPSULE</b>		Non-Preferred	OTC
natural vitamin d-3 oral tablet	Radiance Platinum Vitamin D3	Preferred	OTC
<b>OPTIMAL D3 M ORAL CAPSULE</b>		Non-Preferred	OTC
<b>OPTIMAL D3 ORAL CAPSULE</b>		Preferred	OTC
<b>OPURITY VITAMIN D ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
osteo-vit3 oral liquid		Non-Preferred	OTC
pharmacist choice d-vitamin oral liquid	BProtected Pedia D-Vite	Preferred	OTC
<b>PRONUTRIENTS VITAMIN D3 ORAL CAPSULE</b>		Preferred	OTC
<b>REPLESTA NX ORAL WAFER</b>		Non-Preferred	OTC
<b>REPLESTA ORAL WAFER</b>		Preferred	OTC
super daily d3 oral liquid	Ddrops	Non-Preferred	OTC
<b>THERA-D 2000 ORAL TABLET</b>		Preferred	OTC
<b>THERA-D 4000 ORAL TABLET</b>		Non-Preferred	OTC
<b>THERA-D RAPID REPLETION ORAL TABLET</b>		Preferred	OTC
<b>UPSPRING BABY VIT D ORAL LIQUID</b>		Non-Preferred	OTC
<b>VITAJOY DAILY D GUMMIES ORAL TABLET CHEWABLE</b>		Preferred	OTC
<b>VITAMELTS VITAMIN D ORAL TABLET DISPERSIBLE</b>		Non-Preferred	OTC
vitamin d (cholecalciferol) oral capsule 10 mcg (400 unit)		Preferred	OTC
vitamin d (cholecalciferol) oral capsule 25 mcg (1000 ut)	Pronutrients Vitamin D3	Preferred	OTC
vitamin d (cholecalciferol) oral capsule 50 mcg (2000 ut)		Preferred	OTC; QL
vitamin d (cholecalciferol) oral tablet 10 mcg (400 unit)		Preferred	OTC; QL
vitamin d (cholecalciferol) oral tablet 25 mcg (1000 ut)	Vitamin D-1000 Max St	Preferred	OTC
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	Drisdol	Preferred	
vitamin d (ergocalciferol) oral capsule 50 mcg (2000 ut)		Non-Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
vitamin d high potency oral capsule	Pronutrients Vitamin D3	Preferred	OTC
vitamin d infant oral liquid	BProtected Pedia D-Vite	Preferred	OTC
vitamin d oral capsule		Preferred	OTC; QL
vitamin d oral liquid	BProtected Pedia D-Vite	Preferred	OTC
vitamin d oral tablet	Thera-D 2000	Preferred	OTC
<b>VITAMIN D-1000 MAX ST ORAL TABLET</b>		Preferred	OTC
vitamin d2 oral tablet 10 mcg (400 unit)		Preferred	OTC
vitamin d2 oral tablet 50 mcg (2000 ut)		Non-Preferred	OTC
vitamin d3 adult gummies oral tablet chewable	Kids First Vitamin D3 Gummies	Preferred	OTC
vitamin d3 fast dissolve oral tablet dispersible		Non-Preferred	OTC
vitamin d3 gummies adult oral tablet chewable	Kids First Vitamin D3 Gummies	Preferred	OTC
vitamin d3 gummies oral tablet chewable	Kids First Vitamin D3 Gummies	Preferred	OTC
<b>VITAMIN D3 IMMUNE HEALTH ORAL LIQUID</b>		Non-Preferred	OTC
vitamin d3 maximum strength oral capsule	Dialyvite Vitamin D 5000	Preferred	OTC; QL
vitamin d-3 oral capsule	Pronutrients Vitamin D3	Preferred	OTC
vitamin d3 oral capsule 1.25 mg (50000 ut)	D3-50	Preferred	OTC
vitamin d3 oral capsule 10 mcg (400 unit)		Preferred	OTC
vitamin d3 oral capsule 125 mcg (5000 ut)	Dialyvite Vitamin D 5000	Preferred	OTC; QL
vitamin d3 oral capsule 25 mcg (1000 ut)	Pronutrients Vitamin D3	Preferred	OTC
vitamin d3 oral capsule 250 mcg (10000 ut)	IS-D 10,000	Preferred	OTC
vitamin d3 oral capsule 50 mcg (2000 ut)		Preferred	OTC; QL
vitamin d3 oral capsule 62.5 mcg		Non-Preferred	OTC
vitamin d3 oral liquid 10 mcg/ml	BProtected Pedia D-Vite	Preferred	OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
vitamin d3 oral liquid 125 mcg/0.5ml, 125 mcg/ml, 30 mcg/15ml		Non-Preferred	OTC
vitamin d3 oral tablet 10 mcg (400 unit)		Preferred	OTC; QL
vitamin d3 oral tablet 125 mcg (5000 ut)	Radiance Platinum Vitamin D3	Preferred	OTC
vitamin d3 oral tablet 20 mcg (800 unit), 75 mcg (3000 ut)		Non-Preferred	OTC
vitamin d3 oral tablet 25 mcg, 25 mcg (1000 ut)	Vitamin D-1000 Max St	Preferred	OTC
vitamin d3 oral tablet 250 mcg (10000 ut)		Preferred	OTC
vitamin d3 oral tablet 50 mcg (2000 ut)	Thera-D 2000	Preferred	OTC
vitamin d3 oral tablet chewable 10 mcg (400 unit)		Preferred	OTC
vitamin d3 oral tablet chewable 125 mcg (5000 ut)	Opurity Vitamin D	Non-Preferred	OTC
vitamin d3 oral tablet chewable 25 mcg (1000 ut)	Kids First Vitamin D3 Gummies	Preferred	OTC
vitamin d3 oral tablet chewable 50 mcg (2000 ut)		Non-Preferred	OTC
vitamin d3 oral tablet dispersible		Non-Preferred	OTC
vitamin d3 ultra potency oral tablet	Dialyvite Vitamin D3 Max	Preferred	OTC
<b>WEEKLY-D ORAL CAPSULE</b>		Preferred	OTC
<b>YUMVS VITAMIN D3 ORAL TABLET CHEWABLE</b>		Preferred	OTC
<b>YUMVS VITAMIN D3 ZERO ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
<b>*VITAMIN E***</b>			
<b>ADVANCED E ORAL CAPSULE</b>		Non-Preferred	OTC
<b>AQUA-E ORAL LIQUID</b>		Non-Preferred	OTC
aqueous vitamin e oral solution		Preferred	AL; OTC
e 1000 oral capsule		Preferred	OTC
e200 oral capsule		Preferred	OTC
e-200 oral capsule		Preferred	OTC
e400 oral capsule		Preferred	OTC
e-400 oral capsule		Preferred	OTC
e-400-clear oral capsule		Preferred	OTC
e-oil oral oil		Non-Preferred	AL; OTC

<b>Drug Name</b>	<b>Reference</b>	<b>Status</b>	<b>Notes</b>
high potency e oral capsule		Preferred	OTC
<b>KEY-E ORAL TABLET CHEWABLE</b>		Non-Preferred	OTC
natural vitamin e oral capsule		Preferred	OTC
natural vitamin e oral tablet		Non-Preferred	OTC
toco-sorb oral capsule		Non-Preferred	OTC
vitamin e blend oral capsule		Preferred	OTC
vitamin e high potency oral capsule		Preferred	OTC
vitamin e oral capsule 100 unit, 1000 unit, 134 mg (200 unit), 180 mg (400 unit), 268 mg (400 unit), 400 unit, 45 mg (100 unit), 450 mg (1000 ut), 670 mg (1000 ut), 90 mg (200 unit)		Preferred	OTC
vitamin e oral capsule 200 unit		Non-Preferred	OTC
vitamin e oral oil		Non-Preferred	AL; OTC
vitamin e oral solution		Preferred	AL; OTC
vitamin e oral tablet		Non-Preferred	OTC
vitamin e oral tablet chewable		Non-Preferred	OTC
vitamin e water soluble oral capsule		Preferred	OTC
vitamin e/d-alpha natural oral capsule		Preferred	OTC
vitamin e/d-alpha oral capsule		Preferred	OTC
<b>XCELLENT E ORAL CAPSULE</b>		Non-Preferred	OTC
<b>*VITAMIN K***</b>			
<b>AQUA-K ORAL LIQUID</b>		Non-Preferred	OTC
k 100 oral tablet		Preferred	OTC
<b>K1-1000 ORAL CAPSULE</b>		Non-Preferred	OTC
k2 oral liquid		Non-Preferred	OTC
k2-45 oral capsule		Non-Preferred	OTC
phytonadione injection solution		Preferred	
phytonadione oral tablet		Preferred	
<b>SUPERIORSOURCE K1 ORAL TABLET DISPERSIBLE</b>		Non-Preferred	OTC
vitamin k (phytonadione) oral tablet		Preferred	OTC
vitamin k oral tablet		Preferred	OTC
vitamin k1 injection solution		Preferred	
vitamin k2 oral capsule		Non-Preferred	OTC
vitamin k2 oral tablet		Non-Preferred	OTC