



2019 New York Comprehensive Formulary

List of Covered Drugs
Essential Plan

Please Read:

This document contains
information about the
drugs we cover in this plan.



What is the WellCare Comprehensive Formulary?

A formulary is a list of covered drugs. WellCare selects the drugs by working with a team of health care providers. The list contains the prescription and over-the-counter (OTC) medications we believe are a necessary part of a quality treatment program. OTC drugs are those medications you can buy without a prescription. WellCare will generally cover the drugs listed in our formulary as long as:

1. the drug is medically necessary,
2. the prescription is filled at a WellCare network pharmacy, and
3. other plan rules are followed.

For more information on how to fill your prescriptions, please see your policy.

Can the Formulary (Drug List) Change?

When we make certain changes to our formulary, we must notify the members who will be affected by the changes. We will do this if we:

- remove drugs from our formulary;
- add restrictions on a drug such as prior authorization, quantity limits and/or step therapy;
- move a drug to a higher cost-sharing tier.

If we make any of these changes, we must notify affected members at least 30 days before the change goes into effect.

If the Food and Drug Administration announces that a drug on our formulary is unsafe, or a drug manufacturer removes a drug from the market, we will immediately remove the drug from our formulary and notify members who take the drug.

The enclosed formulary is current as of 10/01/2019. To get updated information about the drugs covered by WellCare, please visit our website at www.wellcare.com/New-York or call Customer Service at 1-855-582-6172, Monday–Friday, 8 a.m.–8 p.m. TTY users may call 711.

How Do I Use the Formulary?

There are two ways to find your drug within the formulary:

Medical Condition

The formulary begins on page 1. The drugs in this formulary are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category “Cardiovascular Agents.” If you know what your drug is used for, look for the category name in the list that begins on page 1. Then look under the category name for your drug.

Formulary Tiers

What you pay for your prescriptions falls into one of these tiers or levels:

Tier 1 (Generic Drugs): You pay the lowest cost for drugs in this level.

Tier 2 (Preferred Drugs): You pay a slightly higher cost for drugs in this level.

Tier 3 (Non-Preferred and Specialty Drugs): You pay the highest cost for drugs in this level.

Alphabetical Listing

If you are not sure what category to look under, you should look for your drug in the Index that begins on page 121. The Index provides an alphabetical list of all of the drugs included in this document. Both brand-name drugs and generic drugs are listed in the Index. Look in the Index and find your drug. Next to your drug, you will see

the page number where you can find coverage information. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

What are Generic Drugs?

WellCare covers both brand-name drugs and generic drugs. A generic drug is approved by the FDA as having the same active ingredient as the brand-name drug. Generally, generic drugs cost less than brand-name drugs.

Are There any Restrictions on My Coverage?

Some covered drugs may have additional requirements or limits on coverage. These requirements and limits may include:

- **Prior Authorization:** WellCare requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval from us before you fill your prescriptions. If you don't get approval, we may not cover the drug.
- **Quantity Limits:** For certain drugs, we limit the amount of the drug that we will cover. This may be in addition to a standard one-month or three-month supply.
- **Step Therapy:** In some cases, WellCare requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, we may not cover Drug B unless you try Drug A first. If Drug A does not work for you, we will then cover Drug B.

You can find out if your drug has any additional requirements or limits by looking in the formulary that begins on page 1. You can also get more information about the restrictions applied to specific covered drugs by visiting our website at www.wellcare.com/New-York or contact Customer Service at **1-855-582-6172**, Monday–Friday, 8 a.m.–8 p.m. TTY users may call **711**.

You can ask WellCare to make an exception to these restrictions or limits, or for a list of other, similar drugs that may treat your health condition. See the section, “How do I request an exception to the WellCare formulary?” on the next page for information about how to request an exception.

What if My Drug is Not on the Formulary?

If your drug is not included in this formulary (list of covered drugs), you should first contact Customer Service and ask if your drug is covered. You can contact Customer Service at **1-855-582-6172**, Monday–Friday, 8 a.m.–8 p.m. TTY users may call **711**.

If you learn that WellCare does not cover your drug, you have two options:

- You can ask Customer Service for a list of similar drugs that are covered by WellCare. When you receive the list, show it to your doctor and ask him or her to prescribe a similar drug that is covered by WellCare.
- You can ask WellCare to make an exception and cover your drug. See below for information about how to request an exception.

Which Vaccines Do we Cover?

Your prescription benefit may cover many vaccines. For details, see the Immunological Agents section. The cost for vaccines varies, depending on the facility where you receive them. For best coverage, use a network pharmacy.

How Do I Request an Exception to the WellCare Formulary?

You can ask WellCare to make an exception to our coverage rules. There are several types of formulary exceptions that you can ask us to make.

Initial Coverage Decision Exception

You can ask us to cover your drug even if it is not on our formulary. If your request is approved, the drug will be covered at a pre-determined cost-sharing level. You would not be able to ask us to provide the drug at a lower cost-sharing level.

Utilization Restriction Exception

You can ask us to waive coverage restrictions or limits on your drug. For example, for certain drugs, the amount of the drug that we cover is limited. If your drug has a quantity limit, you can ask us to waive the limit and cover a greater amount. Your member contract provides you with specific timelines on requests for exceptions.

What Do I Do Before I Can Talk to My Doctor About Changing My Drugs or Requesting an Exception?

As a new or continuing member in our plan, you may be taking drugs that are not on our formulary. Or, you may be taking a drug that is on our formulary but your ability to get it is limited. For example, you may need a prior authorization from us before you can fill your prescription. You should talk to your doctor to decide if you should switch to an appropriate drug that we cover, or request a formulary exception so that we will cover the drug you take. While you talk to your doctor to determine the right course of action for you, we may cover your drug in certain cases during the first 30 days you are a member of our plan.

For each of your drugs that is not on our formulary, or if your ability to get your drugs is limited, we will cover a temporary 30-day supply (unless you have a prescription written for fewer days) when you go to a network pharmacy.

For More Information

For more details about your WellCare prescription drug coverage, please review your contract and other plan materials.

If you have questions about WellCare, please contact us at **1-855-582-6172**, Monday–Friday, 8 a.m.–8 p.m. TTY users may call **711**. Or visit **www.wellcare.com/New-York**.

WellCare Formulary

The comprehensive formulary that begins on page 1 provides coverage information about the drugs covered by WellCare. If you have trouble finding your drug in the list, turn to the Index that begins on page 121.

The information in small print next to the drug tells you if WellCare has any special requirements for coverage of your drug.

- **PA** stands for Prior Authorization. Please see page II for details.
- **QL** stands for Quantity Limits. Please see page II for details.
- **ST** stands for Step Therapy. Please see page II for details.

* means that a drug may be available for up to a 30-day supply only.

EXCH_CVSC3T NY STND eff 10/01/2019

Drug Name	Drug Tier	Requirements/Limits
-----------	-----------	---------------------

ANALGESICS

COX-2 INHIBITORS

<i>celecoxib cap 50 mg</i>	1	
<i>celecoxib cap 100 mg</i>	1	
<i>celecoxib cap 200 mg</i>	1	
<i>celecoxib cap 400 mg</i>	1	

GOUT

<i>allopurinol tab 100 mg</i>	1	
<i>allopurinol tab 300 mg</i>	1	
<i>colchicine tab 0.6 mg</i>	1	
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	1	
<i>febuxostat tab 40 mg</i>	1	ST; PA**
<i>febuxostat tab 80 mg</i>	1	ST; PA**
<i>probenecid tab 500 mg</i>	1	
ULORIC TAB 40MG	3	ST; PA**
ULORIC TAB 80MG	3	ST; PA**

NON-OPIOID ANALGESICS§

<i>butalbital-acetaminophen-caffeine cap 50-300-40 mg</i>	1	QL (48 caps / 25 days)
<i>butalbital-acetaminophen-caffeine cap 50-325-40 mg</i>	1	QL (48 caps / 25 days)
<i>butalbital-acetaminophen-caffeine tab 50-325-40 mg</i>	1	QL (48 tabs / 25 days)
<i>butalbital-aspirin-caffeine cap 50-325-40 mg</i>	1	QL (48 caps / 25 days)
<i>tencon tab 50-325mg</i>	1	QL (48 tabs / 25 days)

NSAIDS, COMBINATIONS§

<i>diclofenac w/ misoprostol tab delayed release 50-0.2 mg</i>	1	
<i>diclofenac w/ misoprostol tab delayed release 75-0.2 mg</i>	1	

NSAIDS§

<i>diclofenac potassium tab 50 mg</i>	1	
<i>diclofenac sodium tab delayed release 25 mg</i>	1	
<i>diclofenac sodium tab delayed release 50 mg</i>	1	
<i>diclofenac sodium tab delayed release 75 mg</i>	1	
<i>diclofenac sodium tab er 24hr 100 mg</i>	1	
<i>etodolac cap 200 mg</i>	1	
<i>etodolac cap 300 mg</i>	1	
<i>etodolac tab 400 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>etodolac tab 500 mg</i>	1	
<i>etodolac tab er 24hr 400 mg</i>	1	
<i>etodolac tab er 24hr 500 mg</i>	1	
<i>etodolac tab er 24hr 600 mg</i>	1	
<i>fenoprofen calcium cap 400 mg</i>	1	
<i>fenoprofen calcium tab 600 mg</i>	1	
<i>flurbiprofen tab 50 mg</i>	1	
<i>flurbiprofen tab 100 mg</i>	1	
<i>ibuprofen susp 100 mg/5ml</i>	1	
<i>ibuprofen tab 400 mg</i>	1	
<i>ibuprofen tab 600 mg</i>	1	
<i>ibuprofen tab 800 mg</i>	1	
<i>ketoprofen cap er 24hr 200 mg</i>	1	
<i>ketorolac tromethamine im inj 60 mg/2ml (30 mg/ml)</i>	1	
<i>ketorolac tromethamine inj 15 mg/ml</i>	1	
<i>ketorolac tromethamine inj 30 mg/ml</i>	1	
<i>ketorolac tromethamine tab 10 mg</i>	1	QL (20 tabs / 25 days)
<i>meclofenamate sodium cap 50 mg</i>	1	
<i>meclofenamate sodium cap 100 mg</i>	1	
<i>mefenamic acid cap 250 mg</i>	1	
<i>meloxicam tab 7.5 mg</i>	1	
<i>meloxicam tab 15 mg</i>	1	
<i>nabumetone tab 500 mg</i>	1	
<i>nabumetone tab 750 mg</i>	1	
<i>naproxen dr tab 375mg</i>	1	
<i>naproxen dr tab 500mg</i>	1	
<i>naproxen tab 250 mg</i>	1	
<i>naproxen tab 375 mg</i>	1	
<i>naproxen tab 500 mg</i>	1	
<i>oxaprozin tab 600 mg</i>	1	
<i>piroxicam cap 10 mg</i>	1	
<i>piroxicam cap 20 mg</i>	1	
<i>sulindac tab 150 mg</i>	1	
<i>sulindac tab 200 mg</i>	1	
<i>tolmetin sodium cap 400 mg</i>	1	
<i>tolmetin sodium tab 200 mg</i>	1	
<i>tolmetin sodium tab 600 mg</i>	1	
<u>OPIOID AGONIST/ANTAGONISTS</u>		
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	1	QL (90 units / 25 days)
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	1	QL (90 units / 25 days)
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	1	QL (90 units / 25 days)

Drug Name	Drug Tier	Requirements/Limits
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	1	QL (60 units / 25 days)
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	0	QL (90 tabs / 25 days); \$0 copay
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	0	QL (90 tabs / 25 days); \$0 copay
ZUBSOLV SUB 0.7-0.18	2	QL (90 units / 25 days)
ZUBSOLV SUB 1.4-0.36	2	QL (90 units / 25 days)
ZUBSOLV SUB 2.9-0.71	2	QL (90 units / 25 days)
ZUBSOLV SUB 5.7-1.4	2	QL (90 units / 25 days)
ZUBSOLV SUB 8.6-2.1	2	QL (60 units / 25 days)
ZUBSOLV SUB 11.4-2.9	2	QL (30 units / 25 days)

OPIOID ANALGESICS§

<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	1	QL (2700 ml / 25 days), ST; Subject to initial 7-day limit
<i>acetaminophen w/ codeine tab 300-15 mg</i>	1	QL (400 tabs / 25 days), ST; Subject to initial 7-day limit
<i>acetaminophen w/ codeine tab 300-30 mg</i>	1	QL (360 tabs / 25 days), ST; Subject to initial 7-day limit
<i>acetaminophen w/ codeine tab 300-60 mg</i>	1	QL (180 tabs / 25 days), ST; Subject to initial 7-day limit
<i>butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg</i>	1	QL (48 caps / 25 days)
<i>butorphanol tartrate nasal soln 10 mg/ml</i>	1	QL (2 bottles / 25 days)
CAPITAL/COD SUS 120-12/5	3	QL (2700 ml / 25 days), ST; Subject to initial 7-day limit
<i>codeine sulf tab 15mg</i>	1	QL (42 tabs / 25 days), ST; Subject to initial 7-day limit
CODEINE SULF TAB 60MG	1	QL (42 tabs / 25 days), ST; Subject to initial 7-day limit
<i>codeine sulfate tab 30 mg</i>	1	QL (42 tabs / 25 days), ST; Subject to initial 7-day limit
EMBEDA CAP 20-0.8MG	2	QL (60 caps / 25 days), ST
EMBEDA CAP 30-1.2MG	2	QL (60 caps / 25 days), ST
EMBEDA CAP 50-2MG	2	QL (30 caps / 25 days), ST
EMBEDA CAP 60-2.4MG	2	QL (30 caps / 25 days), ST

Drug Name	Drug Tier	Requirements/Limits
EMBEDA CAP 80-3.2MG	2	QL (30 caps / 25 days), ST
EMBEDA CAP 100-4MG	2	PA, ST; High Strength Requires PA
<i>endocet tab 2.5-325</i>	1	QL (360 tabs / 25 days), ST; Subject to initial 7-day limit
<i>endocet tab 5-325mg</i>	1	QL (360 tabs / 25 days), ST; Subject to initial 7-day limit
<i>endocet tab 7.5-325</i>	1	QL (240 tabs / 25 days), ST; Subject to initial 7-day limit
<i>endocet tab 10-325mg</i>	1	QL (180 tabs / 25 days), ST; Subject to initial 7-day limit
<i>fentanyl citrate lozenge on a handle 200 mcg</i>	1	QL (120 lozenges / 25 days), PA
<i>fentanyl citrate lozenge on a handle 400 mcg</i>	1	QL (120 lozenges / 25 days), PA
<i>fentanyl citrate lozenge on a handle 600 mcg</i>	1	QL (120 lozenges / 25 days), PA
<i>fentanyl citrate lozenge on a handle 800 mcg</i>	1	QL (120 lozenges / 25 days), PA
<i>fentanyl citrate lozenge on a handle 1200 mcg</i>	1	QL (120 lozenges / 25 days), PA
<i>fentanyl citrate lozenge on a handle 1600 mcg</i>	1	QL (120 lozenges / 25 days), PA
<i>fentanyl td patch 72hr 12 mcg/hr</i>	1	QL (10 patches / 25 days), ST
<i>fentanyl td patch 72hr 25 mcg/hr</i>	1	QL (10 patches / 25 days), ST
<i>fentanyl td patch 72hr 50 mcg/hr</i>	1	PA, ST; High Strength Requires PA
<i>fentanyl td patch 72hr 75 mcg/hr</i>	1	PA, ST; High Strength Requires PA
<i>fentanyl td patch 72hr 100 mcg/hr</i>	1	PA, ST; High Strength Requires PA
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	1	QL (2700 ml / 25 days), ST; Subject to initial 7-day limit
<i>hydrocodone-acetaminophen tab 5-325 mg</i>	1	QL (240 tabs / 25 days), ST; Subject to initial 7-day limit
<i>hydrocodone-acetaminophen tab 7.5-325 mg</i>	1	QL (180 tabs / 25 days), ST; Subject to initial 7-day limit

Drug Name	Drug Tier	Requirements/Limits
<i>hydrocodone-acetaminophen tab 10-325 mg</i>	1	QL (180 tabs / 25 days), ST; Subject to initial 7-day limit
<i>hydrocodone-ibuprofen tab 10-200 mg</i>	1	QL (50 tabs / 25 days), ST; Subject to initial 7-day limit
HYDROMORPHON SUP 3MG	3	QL (120 suppositories / 25 days), ST; Subject to initial 7-day limit
<i>hydromorphone hcl liqd 1 mg/ml</i>	1	QL (600 ml / 25 days), ST; Subject to initial 7-day limit
<i>hydromorphone hcl tab 2 mg</i>	1	QL (180 tabs / 25 days), ST; Subject to initial 7-day limit
<i>hydromorphone hcl tab 4 mg</i>	1	QL (150 tabs / 25 days), ST; Subject to initial 7-day limit
<i>hydromorphone hcl tab 8 mg</i>	1	QL (60 tabs / 25 days), ST; Subject to initial 7-day limit
<i>hydromorphone hcl tab er 24hr deter 8 mg</i>	1	QL (30 tabs / 25 days), ST
<i>hydromorphone hcl tab er 24hr deter 12 mg</i>	1	QL (30 tabs / 25 days), ST
<i>hydromorphone hcl tab er 24hr deter 16 mg</i>	1	QL (30 tabs / 25 days), ST
<i>hydromorphone hcl tab er 24hr deter 32 mg</i>	1	PA, ST; High Strength Requires PA
HYSINGLA ER TAB 20 MG	2	QL (30 tabs / 25 days), ST
HYSINGLA ER TAB 30 MG	2	QL (30 tabs / 25 days), ST
HYSINGLA ER TAB 40 MG	2	QL (30 tabs / 25 days), ST
HYSINGLA ER TAB 60 MG	2	QL (30 tabs / 25 days), ST
HYSINGLA ER TAB 80 MG	2	QL (30 tabs / 25 days), ST
HYSINGLA ER TAB 100 MG	2	PA, ST; High Strength Requires PA
HYSINGLA ER TAB 120 MG	2	PA, ST; High Strength Requires PA
<i>lortab tab 10-325mg</i>	1	QL (180 tabs / 25 days), ST; Subject to initial 7-day limit

Drug Name	Drug Tier	Requirements/Limits
<i>methadone con 10mg/ml</i>	1	QL (60 mL / 25 days), ST; (generic of Methadone Intensol, indicated for pain)
<i>methadone hcl conc 10 mg/ml</i>	1	QL (30 ml / 25 days); (indicated for opioid addiction)
<i>methadone hcl soln 5 mg/5ml</i>	1	QL (450 ml / 25 days), ST
<i>methadone hcl soln 10 mg/5ml</i>	1	QL (300 mL / 25 days), ST
<i>methadone hcl tab 5 mg</i>	1	QL (90 tabs / 25 days), ST
<i>methadone hcl tab 10 mg</i>	1	QL (60 tabs / 25 days), ST
<i>methadone hcl tab for oral susp 40 mg</i>	1	QL (9 tabs / 25 days)
<i>methadose tab 40mg</i>	1	QL (9 tabs / 25 days)
<i>morphine sulfate beads cap er 24hr 30 mg</i>	1	QL (30 caps / 25 days), ST
<i>morphine sulfate beads cap er 24hr 45 mg</i>	1	QL (30 caps / 25 days), ST
<i>morphine sulfate beads cap er 24hr 60 mg</i>	1	QL (30 caps / 25 days), ST
<i>morphine sulfate beads cap er 24hr 75 mg</i>	1	QL (30 caps / 25 days), ST
<i>morphine sulfate beads cap er 24hr 90 mg</i>	1	QL (30 caps / 25 days), ST
<i>morphine sulfate beads cap er 24hr 120 mg</i>	1	PA, ST; High Strength Requires PA
<i>morphine sulfate cap er 24hr 10 mg</i>	1	QL (60 caps / 25 days), ST
<i>morphine sulfate cap er 24hr 20 mg</i>	1	QL (60 caps / 25 days), ST
<i>morphine sulfate cap er 24hr 30 mg</i>	1	QL (60 caps / 25 days), ST
<i>morphine sulfate cap er 24hr 50 mg</i>	1	QL (30 caps / 25 days), ST
<i>morphine sulfate cap er 24hr 60 mg</i>	1	QL (30 caps / 25 days), ST
<i>morphine sulfate cap er 24hr 80 mg</i>	1	QL (30 caps / 25 days), ST
<i>morphine sulfate cap er 24hr 100 mg</i>	1	PA, ST; High Strength Requires PA
<i>morphine sulfate oral soln 10 mg/5ml</i>	1	QL (900 ml / 25 days), ST; Subject to initial 7- day limit

Drug Name	Drug Tier	Requirements/Limits
<i>morphine sulfate oral soln 20 mg/5ml</i>	1	QL (675 mL / 25 days), ST; Subject to initial 7-day limit
<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	1	QL (135 mL / 25 days), ST; Subject to initial 7-day limit
<i>morphine sulfate suppos 5 mg</i>	1	QL (180 suppositories / 25 days), ST; Subject to initial 7-day limit
<i>morphine sulfate suppos 10 mg</i>	1	QL (180 suppositories / 25 days), ST; Subject to initial 7-day limit
<i>morphine sulfate suppos 20 mg</i>	1	QL (120 supp / 25 days), ST; Subject to initial 7-day limit
<i>morphine sulfate suppos 30 mg</i>	1	QL (90 supp / 25 days), ST; Subject to initial 7-day limit
<i>morphine sulfate tab 15 mg</i>	1	QL (180 tabs / 25 days), ST; Subject to initial 7-day limit
<i>morphine sulfate tab 30 mg</i>	1	QL (90 tabs / 25 days), ST; Subject to initial 7-day limit
<i>morphine sulfate tab er 15 mg</i>	1	QL (90 tabs / 25 days), ST
<i>morphine sulfate tab er 30 mg</i>	1	QL (90 tabs / 25 days), ST
<i>morphine sulfate tab er 60 mg</i>	1	PA, ST; High Strength Requires PA
<i>morphine sulfate tab er 100 mg</i>	1	PA, ST; High Strength Requires PA
<i>morphine sulfate tab er 200 mg</i>	1	PA, ST; High Strength Requires PA
<i>nalbuphine hcl inj 10 mg/ml</i>	1	
<i>nalbuphine hcl inj 20 mg/ml</i>	1	
NUCYNTA ER TAB 50MG	2	QL (60 tabs / 25 days), ST
NUCYNTA ER TAB 100MG	2	QL (60 tabs / 25 days), ST
NUCYNTA ER TAB 150MG	2	PA, ST; High Strength Requires PA
NUCYNTA ER TAB 200MG	2	PA, ST; High Strength Requires PA
NUCYNTA ER TAB 250MG	2	PA, ST; High Strength Requires PA

Drug Name	Drug Tier	Requirements/Limits
NUCYNTA TAB 50MG	2	QL (120 tabs / 25 days), ST; Subject to initial 7-day limit
NUCYNTA TAB 75MG	2	QL (90 tabs / 25 days), ST; Subject to initial 7-day limit
NUCYNTA TAB 100MG	2	QL (60 tabs / 25 days), ST; Subject to initial 7-day limit
<i>oxycodone hcl cap 5 mg</i>	1	QL (180 caps / 25 days), ST; Subject to initial 7-day limit
<i>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</i>	1	QL (90 mL / 25 days), ST; Subject to initial 7-day limit
<i>oxycodone hcl soln 5 mg/5ml</i>	1	QL (900 ml / 25 days), ST; Subject to initial 7-day limit
<i>oxycodone hcl tab 5 mg</i>	1	QL (180 tabs / 25 days), ST; Subject to initial 7-day limit
<i>oxycodone hcl tab 10 mg</i>	1	QL (180 tabs / 25 days), ST; Subject to initial 7-day limit
<i>oxycodone hcl tab 15 mg</i>	1	QL (120 tabs / 25 days), ST; Subject to initial 7-day limit
<i>oxycodone hcl tab 20 mg</i>	1	QL (90 tabs / 25 days), ST; Subject to initial 7-day limit
<i>oxycodone hcl tab 30 mg</i>	1	QL (60 tabs / 25 days), ST; Subject to initial 7-day limit
<i>oxycodone hcl tab er 12hr deter 10 mg</i>	1	QL (60 tabs / 25 days), ST
<i>oxycodone hcl tab er 12hr deter 15 mg</i>	1	QL (60 tabs / 25 days), ST
<i>oxycodone hcl tab er 12hr deter 20 mg</i>	1	QL (60 tabs / 25 days), ST
<i>oxycodone hcl tab er 12hr deter 30 mg</i>	1	QL (60 tabs / 25 days), ST
<i>oxycodone hcl tab er 12hr deter 40 mg</i>	1	PA, ST; High Strength Requires PA
<i>oxycodone hcl tab er 12hr deter 60 mg</i>	1	PA, ST; High Strength Requires PA
<i>oxycodone hcl tab er 12hr deter 80 mg</i>	1	PA, ST; High Strength Requires PA

Drug Name	Drug Tier	Requirements/Limits
<i>oxycodone w/ acetaminophen soln 5-325 mg/5ml</i>	1	QL (1800 ml / 25 days), ST; Subject to initial 7-day limit
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	1	QL (360 tabs / 25 days), ST; Subject to initial 7-day limit
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	1	QL (360 tabs / 25 days), ST; Subject to initial 7-day limit
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	1	QL (240 tabs / 25 days), ST; Subject to initial 7-day limit
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	1	QL (180 tabs / 25 days), ST; Subject to initial 7-day limit
<i>oxycodone-aspirin tab 4.8355-325 mg</i>	1	QL (360 tabs / 25 days), ST; Subject to initial 7-day limit
<i>oxycodone-ibuprofen tab 5-400 mg</i>	1	QL (28 tabs / 25 days), ST; Subject to initial 7-day limit
OXYCONTIN TAB 10MG CR	2	QL (60 tabs / 25 days), ST
OXYCONTIN TAB 15MG CR	2	QL (60 tabs / 25 days), ST
OXYCONTIN TAB 20MG CR	2	QL (60 tabs / 25 days), ST
OXYCONTIN TAB 30MG CR	2	QL (60 tabs / 25 days), ST
OXYCONTIN TAB 40MG CR	2	PA, ST; High Strength Requires PA
OXYCONTIN TAB 60MG CR	2	PA, ST; High Strength Requires PA
OXYCONTIN TAB 80MG CR	2	PA, ST; High Strength Requires PA
<i>oxymorphone hcl tab 5 mg</i>	1	QL (180 tabs / 25 days), ST; Subject to initial 7-day limit
<i>oxymorphone hcl tab 10 mg</i>	1	QL (90 tabs / 25 days), ST; Subject to initial 7-day limit
<i>oxymorphone hcl tab er 12hr 5 mg</i>	1	QL (60 tabs / 25 days), ST
<i>oxymorphone hcl tab er 12hr 7.5 mg</i>	1	QL (60 tabs / 25 days), ST
<i>oxymorphone hcl tab er 12hr 10 mg</i>	1	QL (60 tabs / 25 days), ST

Drug Name	Drug Tier	Requirements/Limits
<i>oxymorphone hcl tab er 12hr 15 mg</i>	1	QL (60 tabs / 25 days), ST
<i>oxymorphone hcl tab er 12hr 20 mg</i>	1	PA, ST; High Strength Requires PA
<i>oxymorphone hcl tab er 12hr 30 mg</i>	1	PA, ST; High Strength Requires PA
<i>oxymorphone hcl tab er 12hr 40 mg</i>	1	PA, ST; High Strength Requires PA
<i>tramadol hcl tab 50 mg</i>	1	QL (180 tabs / 25 days), ST; Subject to initial 7-day limit
<i>tramadol hcl tab er 24hr 100 mg</i>	1	QL (30 tabs / 25 days), ST
<i>tramadol hcl tab er 24hr 200 mg</i>	1	PA, ST; High Strength Requires PA
<i>tramadol hcl tab er 24hr 300 mg</i>	1	PA, ST; High Strength Requires PA
<i>xylon tab 10-200mg</i>	1	QL (50 tabs / 25 days), ST; Subject to initial 7-day limit

OPIOID PARTIAL AGONISTS§

BELBUCA MIS 75MCG	2	QL (60 films / 25 days), ST
BELBUCA MIS 150MCG	2	QL (60 films / 25 days), ST
BELBUCA MIS 300MCG	2	QL (60 films / 25 days), ST
BELBUCA MIS 450MCG	2	QL (60 films / 25 days), ST
BELBUCA MIS 600MCG	2	PA, ST; High Strength Requires Prior Auth
BELBUCA MIS 750MCG	2	PA, ST; High Strength Requires Prior Auth
BELBUCA MIS 900MCG	2	PA, ST; High Strength Requires Prior Auth
<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	0	QL (90 tabs / 25 days); \$0 copay; Must obtain approval after the first 30 day supply
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	0	QL (90 tabs / 25 days); \$0 copay; Must obtain approval after the first 30 day supply

SALICYLATES

Drug Name	Drug Tier	Requirements/Limits
<i>aspirin chw 81mg</i>	0	OTC, QL (100 tabs / 30 days); \$0 copay for members age 50-59 or members at risk for preeclampsia, otherwise not covered
<i>aspirin low tab 81mg ec</i>	0	OTC, QL (100 tabs / 30 days); \$0 copay for members age 50-59 or members at risk for preeclampsia, otherwise not covered
<i>diflunisal tab 500 mg</i>	1	

ANTI-INFECTIVES

ANTI-BACTERIALS - MISCELLANEOUS

MONUROL PAK GRANULES	3	
<i>neomycin sulfate tab 500 mg</i>	1	
<i>paromomycin sulfate cap 250 mg</i>	1	
<i>streptomycin sulfate for inj 1 gm</i>	1	
SULFADIAZINE TAB 500MG	3	
<i>tinidazole tab 250 mg</i>	1	
<i>tinidazole tab 500 mg</i>	1	
<i>tobramycin nebu soln 300 mg/5ml</i>	3	QL (280 mL / 28 days), PA

ANTI-INFECTIVES - MISCELLANEOUS

ALINIA SUS 100/5ML	2	
ALINIA TAB 500MG	2	
<i>atovaquone susp 750 mg/5ml</i>	1	
<i>aztreonam for inj 1 gm</i>	1	
<i>aztreonam for inj 2 gm</i>	1	
CAYSTON INH 75MG	3	QL (84 vials / 28 days), PA
<i>clindamycin hcl cap 75 mg</i>	1	
<i>clindamycin hcl cap 150 mg</i>	1	
<i>clindamycin hcl cap 300 mg</i>	1	
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	1	
<i>dapsone tab 25 mg</i>	1	
<i>dapsone tab 100 mg</i>	1	
<i>daptomycin for iv soln 500 mg</i>	1	
DARAPRIM TAB 25MG	3	
<i>doripenem for iv infusion 250 mg</i>	1	
<i>doripenem for iv infusion 500 mg</i>	1	
EMVERM CHW 100MG	3	QL (12 tabs / 365 days)
<i>ivermectin tab 3 mg</i>	1	
<i>linezolid for susp 100 mg/5ml</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>linezolid tab 600 mg</i>	1	
<i>methenamine hippurate tab 1 gm</i>	1	
<i>metronidazole cap 375 mg</i>	1	
<i>metronidazole tab 250 mg</i>	1	
<i>metronidazole tab 500 mg</i>	1	
NEBUPENT INH 300MG	3	
<i>nitrofurantoin macrocrystalline cap 25 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>nitrofurantoin macrocrystalline cap 50 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>nitrofurantoin macrocrystalline cap 100 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>pentamidine isethionate for soln 300 mg</i>	1	
<i>praziquantel tab 600 mg</i>	1	QL (24 tabs / 365 days)
PRIMSOL SOL 50MG/5ML	2	
SIVEXTRO INJ 200MG	3	
SIVEXTRO TAB 200MG	3	
<i>sulfamethoxazole-trimethoprim susp 200- 40 mg/5ml</i>	1	
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	1	
<i>sulfamethoxazole-trimethoprim tab 800- 160 mg</i>	1	
<i>trimethoprim tab 100 mg</i>	1	
<i>vancomycin hcl cap 125 mg (base equivalent)</i>	1	QL (80 caps / 10 days)
<i>vancomycin hcl cap 250 mg (base equivalent)</i>	1	QL (80 caps / 10 days)
XIFAXAN TAB 200MG	2	
XIFAXAN TAB 550MG	2	PA
ANTIFUNGALS		
<i>amphotericin b for iv soln 50 mg</i>	1	
BIO-STATIN CAP 500000	2	
BIO-STATIN CAP 1000000	2	
<i>bio-statin pow</i>	1	
CRESEMBA CAP 186 MG	3	
<i>fluconazole for susp 10 mg/ml</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>fluconazole for susp 40 mg/ml</i>	1	
<i>fluconazole tab 50 mg</i>	1	
<i>fluconazole tab 100 mg</i>	1	
<i>fluconazole tab 150 mg</i>	1	
<i>fluconazole tab 200 mg</i>	1	
<i>griseofulvin microsize susp 125 mg/5ml</i>	1	
<i>griseofulvin microsize tab 500 mg</i>	1	
<i>griseofulvin ultramicrosize tab 125 mg</i>	1	
<i>griseofulvin ultramicrosize tab 250 mg</i>	1	
<i>itraconazole cap 100 mg</i>	1	PA
<i>itraconazole oral soln 10 mg/ml</i>	1	PA
NOXAFIL SUS 40MG/ML	2	
NOXAFIL TAB 100MG	2	
<i>nystatin tab 500000 unit</i>	1	
<i>terbinafine hcl tab 250 mg</i>	1	PA
<i>voriconazole for susp 40 mg/ml</i>	3	PA
<i>voriconazole tab 50 mg</i>	3	PA
<i>voriconazole tab 200 mg</i>	3	PA

ANTIMALARIALS

<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	1	
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	1	
<i>chloroquine phosphate tab 250 mg</i>	1	
<i>chloroquine phosphate tab 500 mg</i>	1	
COARTEM TAB 20-120MG	3	
<i>mefloquine hcl tab 250 mg</i>	1	
<i>primaquine phosphate tab 26.3 mg (15 mg base)</i>	1	
<i>quinine sulfate cap 324 mg</i>	1	

ANTIRETROVIRAL AGENTS

<i>abacavir sulfate soln 20 mg/ml (base equiv)</i>	1	QL (900 mL / 30 days)
<i>abacavir sulfate tab 300 mg (base equiv)</i>	1	QL (60 tabs / 30 days)
APTIVUS CAP 250MG	2	QL (120 caps / 30 days)
APTIVUS SOL	2	QL (285 mL / 28 days)
<i>atazanavir sulfate cap 150 mg (base equiv)</i>	1	QL (30 caps / 30 days)
<i>atazanavir sulfate cap 200 mg (base equiv)</i>	1	QL (60 caps / 30 days)
<i>atazanavir sulfate cap 300 mg (base equiv)</i>	1	QL (30 caps / 30 days)
CRIXIVAN CAP 200MG	2	QL (450 caps / 30 days)
CRIXIVAN CAP 400MG	2	QL (180 caps / 30 days)
<i>didanosine delayed release capsule 200 mg</i>	1	QL (30 caps / 30 days)
<i>didanosine delayed release capsule 250 mg</i>	1	QL (30 caps / 30 days)
<i>didanosine delayed release capsule 400 mg</i>	1	QL (30 caps / 30 days)
EDURANT TAB 25MG	2	QL (60 tabs / 30 days)
<i>efavirenz cap 50 mg</i>	1	QL (90 caps / 30 days)
<i>efavirenz cap 200 mg</i>	1	QL (90 caps / 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>efavirenz tab 600 mg</i>	1	QL (30 tabs / 30 days)
EMTRIVA CAP 200MG	2	QL (30 caps / 30 days)
EMTRIVA SOL 10MG/ML	2	QL (680 ml / 28 days)
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	1	QL (120 tabs / 30 days)
FUZEON INJ 90MG	3	QL (60 vials / 30 days)
INTELENCE TAB 25MG	2	QL (120 tabs / 30 days)
INTELENCE TAB 100MG	2	QL (120 tabs / 30 days)
INTELENCE TAB 200MG	2	QL (60 tabs / 30 days)
INVIRASE CAP 200MG	2	QL (300 caps / 30 days)
INVIRASE TAB 500MG	2	QL (120 tabs / 30 days)
ISENTRESS CHW 25MG	2	QL (180 tabs / 30 days)
ISENTRESS CHW 100MG	2	QL (180 tabs / 30 days)
ISENTRESS HD TAB 600MG	2	QL (60 tabs / 30 days)
ISENTRESS POW 100MG	2	QL (60 packets / 30 days)
ISENTRESS TAB 400MG	2	QL (120 tabs / 30 days)
<i>lamivudine oral soln 10 mg/ml</i>	1	QL (900 ml / 30 days)
<i>lamivudine tab 150 mg</i>	1	QL (60 tabs / 30 days)
<i>lamivudine tab 300 mg</i>	1	QL (30 tabs / 30 days)
LEXIVA SUS 50MG/ML	2	QL (1575 mL / 28 days)
<i>nevirapine susp 50 mg/5ml</i>	1	QL (1200 mL / 30 days)
<i>nevirapine tab 200 mg</i>	1	QL (60 tabs / 30 days)
<i>nevirapine tab er 24hr 100 mg</i>	1	QL (90 tabs / 30 days)
<i>nevirapine tab er 24hr 400 mg</i>	1	QL (30 tabs / 30 days)
NORVIR CAP 100MG	2	QL (360 caps / 30 days)
NORVIR POW 100MG	2	QL (360 packets / 30 days)
NORVIR SOL 80MG/ML	2	QL (480 mL / 30 days)
PREZISTA SUS 100MG/ML	2	QL (400 ml / 30 days)
PREZISTA TAB 75MG	2	QL (300 tabs / 30 days)
PREZISTA TAB 150MG	2	QL (180 tabs / 30 days)
PREZISTA TAB 600MG	2	QL (60 tabs / 30 days)
PREZISTA TAB 800MG	2	QL (30 tabs / 30 days)
REYATAZ POW 50MG	2	QL (180 packets / 30 days)
<i>ritonavir tab 100 mg</i>	1	QL (360 tabs / 30 days)
SELZENTRY SOL 20MG/ML	2	QL (1840 mL / 30 days)
SELZENTRY TAB 25MG	2	QL (240 tabs / 30 days)
SELZENTRY TAB 75MG	2	QL (60 tabs / 30 days)
SELZENTRY TAB 150MG	2	QL (60 tabs / 30 days)
SELZENTRY TAB 300MG	2	QL (120 tabs / 30 days)
<i>stavudine cap 15 mg</i>	1	QL (60 caps / 30 days)
<i>stavudine cap 20 mg</i>	1	QL (60 caps / 30 days)
<i>stavudine cap 30 mg</i>	1	QL (60 caps / 30 days)
<i>stavudine cap 40 mg</i>	1	QL (60 caps / 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>tenofovir disoproxil fumarate tab 300 mg</i>	1	QL (30 tabs / 30 days)
TIVICAY TAB 10MG	2	QL (60 tabs / 30 days)
TIVICAY TAB 25MG	2	QL (60 tabs / 30 days)
TIVICAY TAB 50MG	2	QL (60 tabs / 30 days)
TROGARZO INJ 150MG/ML	3	
TYBOST TAB 150MG	2	QL (30 tabs / 30 days)
VIDEX EC CAP 125MG	2	QL (30 caps / 30 days)
VIDEX SOL 2GM	2	QL (1200 ml / 30 days)
VIDEX SOL 4GM	2	QL (1200 ml / 30 days)
VIRACEPT TAB 250MG	2	QL (300 tabs / 30 days)
VIRACEPT TAB 625MG	2	QL (120 tabs / 30 days)
VIREAD POW 40MG/GM	2	QL (240 gm / 30 days)
VIREAD TAB 150MG	2	QL (30 tabs / 30 days)
VIREAD TAB 200MG	2	QL (30 tabs / 30 days)
VIREAD TAB 250MG	2	QL (30 tabs / 30 days)
ZERIT SOL 1MG/ML	2	QL (2400 ml / 30 days)
<i>zidovudine cap 100 mg</i>	1	QL (180 caps / 30 days)
<i>zidovudine syrup 10 mg/ml</i>	1	QL (1800 ml / 30 days)
<i>zidovudine tab 300 mg</i>	1	QL (60 tabs / 30 days)

ANTIRETROVIRAL COMBINATION AGENTS

<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	1	QL (30 tabs / 30 days)
<i>abacavir sulfate-lamivudine-zidovudine tab 300-150-300 mg</i>	1	QL (60 tabs / 30 days)
BIKTARVY TAB	2	QL (30 tabs / 30 days)
CIMDUO TAB 300-300	2	QL (30 tabs / 30 days)
COMPLERA TAB	2	QL (30 tabs / 30 days)
DESCOVY TAB 200/25	2	QL (30 tabs / 30 days)
EVOTAZ TAB 300-150	2	QL (30 tabs / 30 days)
GENVOYA TAB	2	QL (30 tabs / 30 days)
KALETRA TAB 100-25MG	2	QL (240 tabs / 30 days)
KALETRA TAB 200-50MG	2	QL (120 tabs / 30 days)
<i>lamivudine-zidovudine tab 150-300 mg</i>	1	QL (60 tabs / 30 days)
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	1	QL (390 mL / 30 days)
ODEFSEY TAB	2	QL (30 tabs / 30 days)
PREZCOBIX TAB 800-150	2	QL (30 tabs / 30 days)
STRIBILD TAB	2	QL (30 tabs / 30 days)
SYMFI LO TAB	2	QL (30 tabs / 30 days)
SYMFI TAB	2	QL (30 tabs / 30 days)
TRIUMEQ TAB	2	QL (30 tabs / 30 days)
TRUVADA TAB 100-150	2	QL (30 tabs / 30 days)
TRUVADA TAB 133-200	2	QL (30 tabs / 30 days)
TRUVADA TAB 167-250	2	QL (30 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
TRUVADA TAB 200-300	2	QL (30 tabs / 30 days), ST; PA**; (coverage for pre and post-exposure prophylaxis only)

ANTITUBERCULAR AGENTS

<i>cycloserine cap 250 mg</i>	1	
<i>ethambutol hcl tab 100 mg</i>	1	
<i>ethambutol hcl tab 400 mg</i>	1	
<i>isoniazid syrup 50 mg/5ml</i>	1	
<i>isoniazid tab 100 mg</i>	1	
<i>isoniazid tab 300 mg</i>	1	
PASER GRA 4GM	3	
PRIFTIN TAB 150MG	2	
<i>pyrazinamide tab 500 mg</i>	1	
<i>rifabutin cap 150 mg</i>	1	
RIFAMATE CAP	2	
<i>rifampin cap 150 mg</i>	1	
<i>rifampin cap 300 mg</i>	1	
RIFATER TAB	2	
SIRTURO TAB 100MG	3	
TRECTOR TAB 250MG	2	

ANTIVIRALS§

<i>acyclovir cap 200 mg</i>	1	
<i>acyclovir susp 200 mg/5ml</i>	1	
<i>acyclovir tab 400 mg</i>	1	
<i>acyclovir tab 800 mg</i>	1	
<i>adefovir dipivoxil tab 10 mg</i>	3	
BARACLUDE SOL .05MG/ML	3	
<i>entecavir tab 0.5 mg</i>	3	
<i>entecavir tab 1 mg</i>	3	
EPIVIR HBV SOL 5MG/ML	2	
<i>famciclovir tab 125 mg</i>	1	
<i>famciclovir tab 250 mg</i>	1	
<i>famciclovir tab 500 mg</i>	1	
<i>lamivudine tab 100 mg (hbv)</i>	1	
<i>oseltamivir phosphate cap 30 mg (base equiv)</i>	1	QL (40 caps / 90 days)
<i>oseltamivir phosphate cap 45 mg (base equiv)</i>	1	QL (20 caps / 90 days)
<i>oseltamivir phosphate cap 75 mg (base equiv)</i>	1	QL (20 caps / 90 days)
<i>oseltamivir phosphate for susp 6 mg/ml (base equiv)</i>	1	QL (360 mL / 90 days)
RELENZA MIS DISKHALE	2	QL (2 inhalers / 90 days)
<i>rimantadine hydrochloride tab 100 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>valacyclovir hcl tab 1 gm</i>	1	
<i>valacyclovir hcl tab 500 mg</i>	1	
<i>valganciclovir hcl for soln 50 mg/ml (base equiv)</i>	1	
<i>valganciclovir hcl tab 450 mg (base equivalent)</i>	1	
VEMLIDY TAB 25MG	3	
CEPHALOSPORINS		
<i>cefaclor cap 250 mg</i>	1	
<i>cefaclor cap 500 mg</i>	1	
CEFACLOR ER TAB 500MG	2	
<i>cefaclor for susp 125 mg/5ml</i>	1	
<i>cefaclor for susp 250 mg/5ml</i>	1	
<i>cefaclor for susp 375 mg/5ml</i>	1	
<i>cefadroxil cap 500 mg</i>	1	
<i>cefadroxil for susp 250 mg/5ml</i>	1	
<i>cefadroxil for susp 500 mg/5ml</i>	1	
<i>cefadroxil tab 1 gm</i>	1	
<i>cefdinir cap 300 mg</i>	1	
<i>cefdinir for susp 125 mg/5ml</i>	1	
<i>cefdinir for susp 250 mg/5ml</i>	1	
<i>cefditoren pivoxil tab 200 mg (base equivalent)</i>	1	
<i>cefditoren pivoxil tab 400 mg (base equivalent)</i>	1	
<i>cefepime hcl for inj 1 gm</i>	1	
<i>cefepime hcl for inj 2 gm</i>	1	
<i>cefixime cap 400 mg</i>	1	
<i>cefixime for susp 100 mg/5ml</i>	1	
<i>cefixime for susp 200 mg/5ml</i>	1	
<i>cefpodoxime proxetil for susp 50 mg/5ml</i>	1	
<i>cefpodoxime proxetil for susp 100 mg/5ml</i>	1	
<i>cefpodoxime proxetil tab 100 mg</i>	1	
<i>cefpodoxime proxetil tab 200 mg</i>	1	
<i>cefprozil for susp 125 mg/5ml</i>	1	
<i>cefprozil for susp 250 mg/5ml</i>	1	
<i>cefprozil tab 250 mg</i>	1	
<i>cefprozil tab 500 mg</i>	1	
<i>ceftazidime for inj 2 gm</i>	1	
<i>ceftibuten cap 400 mg</i>	1	
<i>ceftibuten for susp 180 mg/5ml</i>	1	
CEFTIN SUS 125/5ML	2	
CEFTIN SUS 250/5ML	2	
<i>ceftriaxone sodium for inj 1 gm</i>	1	
<i>ceftriaxone sodium for inj 2 gm</i>	1	
<i>ceftriaxone sodium for inj 10 gm</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>ceftriaxone sodium for inj 250 mg</i>	1	
<i>ceftriaxone sodium for inj 500 mg</i>	1	
<i>ceftriaxone sodium for iv soln 1 gm</i>	1	
<i>ceftriaxone sodium for iv soln 2 gm</i>	1	
<i>cefuroxime axetil tab 250 mg</i>	1	
<i>cefuroxime axetil tab 500 mg</i>	1	
<i>cephalexin cap 250 mg</i>	1	
<i>cephalexin cap 500 mg</i>	1	
<i>cephalexin cap 750 mg</i>	1	
<i>cephalexin for susp 125 mg/5ml</i>	1	
<i>cephalexin for susp 250 mg/5ml</i>	1	
<i>cephalexin tab 250 mg</i>	1	
<i>cephalexin tab 500 mg</i>	1	
SUPRAX CHW 100MG	2	
SUPRAX CHW 200MG	2	
SUPRAX SUS 500/5ML	2	
<i>tazicef inj 1gm</i>	1	
<i>tazicef inj 2gm</i>	1	
<i>tazicef inj 6gm</i>	1	

ERYTHROMYCINS/MACROLIDES

<i>azithromycin for susp 100 mg/5ml</i>	1	
<i>azithromycin for susp 200 mg/5ml</i>	1	
<i>azithromycin powd pack for susp 1 gm</i>	1	
<i>azithromycin tab 250 mg</i>	1	
<i>azithromycin tab 500 mg</i>	1	
<i>azithromycin tab 600 mg</i>	1	
<i>clarithromycin for susp 125 mg/5ml</i>	1	
<i>clarithromycin for susp 250 mg/5ml</i>	1	
<i>clarithromycin tab 250 mg</i>	1	
<i>clarithromycin tab 500 mg</i>	1	
<i>clarithromycin tab er 24hr 500 mg</i>	1	
DIFICID TAB 200MG	2	PA
<i>e.e.s. 400 tab 400mg</i>	1	
<i>ery-tab tab 250mg ec</i>	1	
<i>ery-tab tab 333mg ec</i>	1	
<i>ery-tab tab 500mg ec</i>	1	
<i>erythrocin tab 250mg</i>	1	
<i>erythromycin ethylsuccinate for susp 200 mg/5ml</i>	1	
<i>erythromycin ethylsuccinate for susp 400 mg/5ml</i>	1	
<i>erythromycin ethylsuccinate tab 400 mg</i>	1	
<i>erythromycin tab 250 mg</i>	1	
<i>erythromycin tab 500 mg</i>	1	
<i>erythromycin w/ delayed release particles cap 250 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
FLUOROQUINOLONES		
<i>ciprofloxacin for oral susp 250 mg/5ml (5%) (5 gm/100ml)</i>	1	
<i>ciprofloxacin for oral susp 500 mg/5ml (10%) (10 gm/100ml)</i>	1	
<i>ciprofloxacin hcl tab 100 mg (base equiv)</i>	1	
<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>	1	
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	1	
<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	1	
<i>ciprofloxacin-ciprofloxacin hcl tab er 24hr 500 mg (base eq)</i>	1	
<i>ciprofloxacin-ciprofloxacin hcl tab er 24hr 1000 mg(base eq)</i>	1	
FACTIVE TAB 320MG	3	
<i>levofloxacin oral soln 25 mg/ml</i>	1	
<i>levofloxacin tab 250 mg</i>	1	
<i>levofloxacin tab 500 mg</i>	1	
<i>levofloxacin tab 750 mg</i>	1	
<i>moxifloxacin hcl tab 400 mg (base equiv)</i>	1	
<i>ofloxacin tab 300 mg</i>	1	
<i>ofloxacin tab 400 mg</i>	1	
HEPATITIS C		
EPCLUSA TAB 400-100	3	QL (28 tabs / 28 days), PA
HARVONI TAB 90-400MG	3	QL (28 tabs / 28 days), PA
PEGASYS INJ	3	PA
PEGASYS INJ 180MCG/M	3	PA
PEGASYS INJ PROCLICK	3	PA
REBETOL SOL 40MG/ML	3	PA
<i>ribasphere cap 200mg</i>	1	PA
<i>ribasphere tab 200mg</i>	1	PA
RIBASPHERE TAB 400MG	1	PA
<i>ribasphere tab 600mg</i>	1	PA
<i>ribavirin cap 200 mg</i>	1	PA
<i>ribavirin tab 200 mg</i>	1	PA
SOVALDI TAB 400MG	3	QL (28 tabs / 28 days), PA, ST
VOSEVITAB	3	QL (28 tabs / 28 days), PA
ZEPATIER TAB 50-100MG	3	QL (28 tabs / 28 days), PA, ST
PENICILLINS		
<i>amoxicillin & k clavulanate chew tab 200-28.5 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>amoxicillin & k clavulanate chew tab 400-57 mg</i>	1	
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	1	
<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	1	
<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	1	
<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	1	
<i>amoxicillin & k clavulanate tab 250-125 mg</i>	1	
<i>amoxicillin & k clavulanate tab 500-125 mg</i>	1	
<i>amoxicillin & k clavulanate tab 875-125 mg</i>	1	
<i>amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg</i>	1	
<i>amoxicillin (trihydrate) cap 250 mg</i>	1	
<i>amoxicillin (trihydrate) cap 500 mg</i>	1	
<i>amoxicillin (trihydrate) chew tab 125 mg</i>	1	
<i>amoxicillin (trihydrate) chew tab 250 mg</i>	1	
<i>amoxicillin (trihydrate) for susp 125 mg/5ml</i>	1	
<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i>	1	
<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i>	1	
<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i>	1	
<i>amoxicillin (trihydrate) tab 500 mg</i>	1	
<i>amoxicillin (trihydrate) tab 875 mg</i>	1	
<i>ampicillin cap 250 mg</i>	1	
<i>ampicillin cap 500 mg</i>	1	
<i>ampicillin for susp 125 mg/5ml</i>	1	
<i>ampicillin for susp 250 mg/5ml</i>	1	
AUGMENTIN SUS 125/5ML	2	
<i>dicloxacillin sodium cap 250 mg</i>	1	
<i>dicloxacillin sodium cap 500 mg</i>	1	
<i>penicillin v potassium for soln 125 mg/5ml</i>	1	
<i>penicillin v potassium for soln 250 mg/5ml</i>	1	
<i>penicillin v potassium tab 250 mg</i>	1	
<i>penicillin v potassium tab 500 mg</i>	1	
TETRACYCLINES		
<i>avidoxy tab 100mg</i>	1	
<i>demeclocycline hcl tab 150 mg</i>	1	
<i>demeclocycline hcl tab 300 mg</i>	1	
<i>doxycycline hyclate cap 50 mg</i>	1	
<i>doxycycline hyclate cap 100 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>doxycycline hyclate tab 20 mg</i>	1	
<i>doxycycline hyclate tab 100 mg</i>	1	
<i>doxycycline monohydrate cap 50 mg</i>	1	
<i>doxycycline monohydrate cap 75 mg</i>	1	
<i>doxycycline monohydrate cap 100 mg</i>	1	
<i>doxycycline monohydrate cap 150 mg</i>	1	
<i>doxycycline monohydrate for susp 25 mg/5ml</i>	1	
<i>doxycycline monohydrate tab 50 mg</i>	1	
<i>doxycycline monohydrate tab 75 mg</i>	1	
<i>doxycycline monohydrate tab 150 mg</i>	1	
<i>minocycline hcl cap 50 mg</i>	1	
<i>minocycline hcl cap 75 mg</i>	1	
<i>minocycline hcl cap 100 mg</i>	1	
<i>minocycline hcl tab 50 mg</i>	1	
<i>minocycline hcl tab 75 mg</i>	1	
<i>minocycline hcl tab 100 mg</i>	1	
<i>morgidox cap 1x100mg</i>	1	
<i>tetracycline hcl cap 250 mg</i>	1	
<i>tetracycline hcl cap 500 mg</i>	1	

ANTINEOPLASTIC AGENTS

ALKYLATING AGENTS

<i>busulfan inj 6 mg/ml</i>	1	
<i>carmustine for inj 100 mg</i>	1	
<i>cyclophosphamide cap 25 mg</i>	1	
<i>cyclophosphamide cap 50 mg</i>	1	
<i>cyclophosphamide for inj 1 gm</i>	3	
<i>cyclophosphamide for inj 2 gm</i>	3	
<i>cyclophosphamide for inj 500 mg</i>	3	
<i>dacarbazine for inj 100 mg</i>	1	
<i>dacarbazine for inj 200 mg</i>	1	
EMCYT CAP 140MG	3	
GLEOSTINE CAP 5MG	3	
GLEOSTINE CAP 10MG	3	
GLEOSTINE CAP 40MG	3	
GLEOSTINE CAP 100MG	3	
GLIADEL WAF 7.7MG	2	
HEXALEN CAP 50MG	2	
<i>ifosfamide for inj 1 gm</i>	1	
<i>ifosfamide iv inj 1 gm/20ml (50 mg/ml)</i>	1	
<i>ifosfamide iv inj 3 gm/60ml (50 mg/ml)</i>	1	
LEUKERAN TAB 2MG	2	
<i>melphalan tab 2 mg</i>	1	
TEMODAR INJ 100MG	3	PA
<i>temozolomide cap 5 mg</i>	3	PA

Drug Name	Drug Tier	Requirements/Limits
<i>temozolomide cap 20 mg</i>	3	PA
<i>temozolomide cap 100 mg</i>	3	PA
<i>temozolomide cap 140 mg</i>	3	PA
<i>temozolomide cap 180 mg</i>	3	PA
<i>temozolomide cap 250 mg</i>	3	PA

ANTHRACYCLINES

<i>daunorubicin hcl iv soln 20 mg/4ml (base equiv)</i>	1	
<i>doxorubicin hcl for inj 10 mg</i>	1	
<i>doxorubicin hcl for inj 50 mg</i>	1	
<i>doxorubicin hcl inj 2 mg/ml</i>	1	
<i>doxorubicin hcl liposomal inj (for iv infusion) 2 mg/ml</i>	1	
<i>epirubicin hcl iv soln 50 mg/25ml (2 mg/ml)</i>	1	
<i>epirubicin hcl iv soln 200 mg/100ml (2 mg/ml)</i>	1	
<i>idarubicin hcl iv inj 5 mg/5ml (1 mg/ml)</i>	1	
<i>idarubicin hcl iv inj 10 mg/10ml (1 mg/ml)</i>	1	
<i>idarubicin hcl iv inj 20 mg/20ml (1 mg/ml)</i>	1	

ANTIBIOTICS

<i>bleomycin sulfate for inj 15 unit</i>	1	
<i>bleomycin sulfate for inj 30 unit</i>	1	
<i>mitomycin for iv soln 5 mg</i>	1	
<i>mitomycin for iv soln 20 mg</i>	1	
<i>mitomycin for iv soln 40 mg</i>	1	

ANTIMETABOLITES

<i>adrucil inj 2.5g/50m</i>	1	
<i>adrucil inj 500/10ml</i>	1	
<i>ALIMTA INJ 100MG</i>	3	
<i>ALIMTA INJ 500MG</i>	3	
<i>ARRANON INJ 5MG/ML</i>	2	
<i>azacitidine for inj 100 mg</i>	3	PA
<i>capecitabine tab 150 mg</i>	3	QL (120 tabs / 30 days), PA
<i>capecitabine tab 500 mg</i>	3	QL (300 tabs / 30 days), PA
<i>cladribine iv soln 10 mg/10ml (1 mg/ml)</i>	1	
<i>clofarabine iv soln 1 mg/ml</i>	1	
<i>cytarabine inj 20 mg/ml</i>	1	
<i>cytarabine inj pf 20 mg/ml</i>	1	
<i>cytarabine inj pf 100 mg/ml</i>	1	
<i>decitabine for inj 50 mg</i>	3	PA
<i>floxuridine for inj 0.5 gm</i>	1	
<i>fludarabine phosphate for inj 50 mg</i>	1	
<i>fludarabine phosphate inj 25 mg/ml</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>fluorouracil iv soln 1 gm/20ml (50 mg/ml)</i>	1	
<i>fluorouracil iv soln 2.5 gm/50ml (50 mg/ml)</i>	1	
<i>fluorouracil iv soln 5 gm/100ml (50 mg/ml)</i>	1	
<i>fluorouracil iv soln 500 mg/10ml (50 mg/ml)</i>	1	
<i>gemcitabine hcl for inj 1 gm</i>	3	
<i>gemcitabine hcl for inj 2 gm</i>	3	
<i>gemcitabine hcl for inj 200 mg</i>	3	
<i>gemcitabine hcl inj 1 gm/26.3ml (38 mg/ml) (base equiv)</i>	3	
<i>gemcitabine hcl inj 2 gm/52.6ml (38 mg/ml) (base equiv)</i>	3	
<i>gemcitabine hcl inj 200 mg/5.26ml (38 mg/ml) (base equiv)</i>	3	
<i>mercaptopurine tab 50 mg</i>	1	
<i>methotrexate sodium for inj 1 gm</i>	1	
<i>methotrexate sodium inj 50 mg/2ml (25 mg/ml)</i>	1	
<i>methotrexate sodium inj 250 mg/10ml (25 mg/ml)</i>	1	
<i>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)</i>	1	
<i>methotrexate sodium inj pf 250 mg/10ml (25 mg/ml)</i>	1	
<i>methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)</i>	1	
NIPENT INJ 10MG	2	
TABLOID TAB 40MG	2	
ANTIMITOTIC, TAXOIDS		
ABRAXANE INJ 100MG	2	
DOCEFREZ INJ 20MG	2	
<i>docetaxel for inj conc 20 mg/ml</i>	1	
<i>docetaxel for inj conc 80 mg/4ml (20 mg/ml)</i>	1	
<i>docetaxel for inj conc 160 mg/8ml (20 mg/ml)</i>	1	
DOCETAXEL INJ 20/0.5ML	2	
DOCETAXEL INJ 80MG/2ML	2	
DOCETAXEL INJ 140/7ML	2	
DOCETAXEL INJ 160/8ML	2	
DOCETAXEL INJ NON-ALCO	2	
<i>docetaxel soln for iv infusion 20 mg/2ml</i>	1	
<i>docetaxel soln for iv infusion 80 mg/8ml</i>	1	
<i>docetaxel soln for iv infusion 160 mg/16ml</i>	1	
<i>paclitaxel iv conc 30 mg/5ml (6 mg/ml)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>paclitaxel iv conc 100 mg/16.7ml (6 mg/ml)</i>	1	
<i>paclitaxel iv conc 150 mg/25ml (6 mg/ml)</i>	1	
<i>paclitaxel iv conc 300 mg/50ml (6 mg/ml)</i>	1	
ANTIMITOTIC, VINCA ALKALOIDS		
<i>vinblastine sulfate inj 1 mg/ml</i>	1	
<i>vincasar pfs inj 1mg/ml</i>	1	
<i>vincristine sulfate iv soln 1 mg/ml</i>	1	
<i>vinorelbine tartrate inj 10 mg/ml (base equiv)</i>	1	
<i>vinorelbine tartrate inj 50 mg/5ml (10 mg/ml) (base equiv)</i>	1	
BIOLOGIC RESPONSE MODIFIERS		
ERBITUX INJ 100MG	3	PA
ERBITUX INJ 200MG	3	PA
ERIVEDGE CAP 150MG	3	QL (30 caps / 30 days), PA
FARYDAK CAP 10MG	3	PA
FARYDAK CAP 15MG	3	PA
FARYDAK CAP 20MG	3	PA
GAZYVA INJ 25MG/ML	3	PA
IBRANCE CAP 75MG	3	QL (21 caps / 28 days), PA
IBRANCE CAP 100MG	3	QL (21 caps / 28 days), PA
IBRANCE CAP 125MG	3	QL (21 caps / 28 days), PA
KADCYLA INJ 100MG	3	PA
KADCYLA INJ 160MG	3	PA
KEYTRUDA INJ 100MG/4M	3	PA
KISQALI TAB 200DOSE	3	QL (63 tabs / 28 days), PA
KISQALI TAB 400DOSE	3	QL (63 tabs / 28 days), PA
KISQALI TAB 600DOSE	3	QL (63 tabs / 28 days), PA
LYNPARZA CAP 50MG	3	QL (480 caps / 30 days), PA
LYNPARZA TAB 100MG	3	QL (180 tabs / 30 days), PA
LYNPARZA TAB 150MG	3	QL (120 tabs / 30 days), PA
RYDAPT CAP 25MG	3	QL (224 caps / 28 days), PA
ZEJULA CAP 100MG	3	QL (90 caps / 30 days), PA

Drug Name	Drug Tier	Requirements/Limits
ZOLINZA CAP 100MG	3	QL (120 caps / 30 days), PA

HORMONAL ANTINEOPLASTIC AGENTS

<i>abiraterone acetate tab 250 mg</i>	3	QL (120 tabs / 30 days), PA
<i>anastrozole tab 1 mg</i>	1	
<i>bicalutamide tab 50 mg</i>	1	
ELIGARD INJ 7.5MG	3	PA
ELIGARD INJ 22.5MG	3	PA
ELIGARD INJ 30MG	3	PA
ELIGARD INJ 45MG	3	PA
<i>exemestane tab 25 mg</i>	1	
<i>flutamide cap 125 mg</i>	1	
<i>fulvestrant inj 250 mg/5ml</i>	1	
<i>letrozole tab 2.5 mg</i>	1	
<i>leuprolide acetate inj kit 5 mg/ml</i>	3	PA
LUPR DEP-PED INJ 3M 30MG	3	PA
LUPR DEP-PED INJ 7.5MG	3	PA
LUPR DEP-PED INJ 11.25MG	3	PA
LUPR DEP-PED INJ 15MG	3	PA
LYSODREN TAB 500MG	2	
<i>megestrol acetate susp 40 mg/ml</i>	1	
<i>megestrol acetate tab 20 mg</i>	1	
<i>megestrol acetate tab 40 mg</i>	1	
<i>nilutamide tab 150 mg</i>	1	
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	1	\$0 copay for women ages 35 and older for the primary prevention of breast cancer
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	1	\$0 copay for women ages 35 and older for the primary prevention of breast cancer
<i>toremifene citrate tab 60 mg (base equivalent)</i>	1	
XTANDI CAP 40MG	3	QL (120 caps / 30 days), PA
ZYTIGA TAB 500MG	3	QL (60 tabs / 30 days), PA

KINASE INHIBITORS

AFINITOR DIS TAB 2MG	3	QL (60 tabs / 30 days), PA
AFINITOR DIS TAB 3MG	3	QL (90 tabs / 30 days), PA
AFINITOR DIS TAB 5MG	3	QL (60 tabs / 30 days), PA

Drug Name	Drug Tier	Requirements/Limits
AFINITOR TAB 2.5MG	3	QL (30 tabs / 30 days), PA
AFINITOR TAB 5MG	3	QL (30 tabs / 30 days), PA
AFINITOR TAB 7.5MG	3	QL (30 tabs / 30 days), PA
AFINITOR TAB 10MG	3	QL (30 tabs / 30 days), PA
ALECENSA CAP 150MG	3	QL (240 caps / 30 days), PA
BOSULIF TAB 100MG	3	QL (90 tabs / 30 days), PA
BOSULIF TAB 400MG	3	QL (30 tabs / 30 days), PA
BOSULIF TAB 500MG	3	QL (30 tabs / 30 days), PA
CALQUENCE CAP 100MG	3	QL (60 caps / 30 days), PA
CAPRELSA TAB 100MG	3	QL (60 tabs / 30 days), PA
CAPRELSA TAB 300MG	3	QL (30 tabs / 30 days), PA
COMETRIQ KIT 60MG	3	QL (1 kit / 28 days), PA
COMETRIQ KIT 100MG	3	QL (1 kit / 28 days), PA
COMETRIQ KIT 140MG	3	QL (1 kit / 28 days), PA
<i>erlotinib hcl tab 25 mg (base equivalent)</i>	3	QL (60 tabs / 30 days), PA
<i>erlotinib hcl tab 100 mg (base equivalent)</i>	3	QL (30 tabs / 30 days), PA
<i>erlotinib hcl tab 150 mg (base equivalent)</i>	3	QL (30 tabs / 30 days), PA
ICLUSIG TAB 15MG	3	QL (60 tabs / 30 days), PA
ICLUSIG TAB 45MG	3	QL (30 tabs / 30 days), PA
IDHIFA TAB 50MG	3	QL (30 tabs / 30 days), PA
IDHIFA TAB 100MG	3	QL (30 tabs / 30 days), PA
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	3	QL (90 tabs / 30 days), PA
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	3	QL (60 tabs / 30 days), PA
IMBRUVICA CAP 70MG	3	QL (30 caps / 30 days), PA
IMBRUVICA CAP 140MG	3	QL (90 caps / 30 days), PA

Drug Name	Drug Tier	Requirements/Limits
IMBRUVICA TAB 140MG	3	QL (30 tabs / 30 days), PA
IMBRUVICA TAB 280MG	3	QL (30 tabs / 30 days), PA
IMBRUVICA TAB 420MG	3	QL (30 tabs / 30 days), PA
IMBRUVICA TAB 560MG	3	QL (30 tabs / 30 days), PA
INLYTA TAB 1MG	3	QL (180 tabs / 30 days), PA
INLYTA TAB 5MG	3	QL (120 tabs / 30 days), PA
JAKAFI TAB 5MG	3	QL (60 tabs / 30 days), PA
JAKAFI TAB 10MG	3	QL (60 tabs / 30 days), PA
JAKAFI TAB 15MG	3	QL (60 tabs / 30 days), PA
JAKAFI TAB 20MG	3	QL (60 tabs / 30 days), PA
JAKAFI TAB 25MG	3	QL (60 tabs / 30 days), PA
LENVIMA CAP 4MG	3	QL (30 caps / 30 days), PA
LENVIMA CAP 8 MG	3	QL (60 caps / 30 days), PA
LENVIMA CAP 10 MG	3	QL (30 caps / 30 days), PA
LENVIMA CAP 12MG	3	QL (90 caps / 30 days), PA
LENVIMA CAP 14 MG	3	QL (60 caps / 30 days), PA
LENVIMA CAP 18 MG	3	QL (90 caps / 30 days), PA
LENVIMA CAP 20 MG	3	QL (60 caps / 30 days), PA
LENVIMA CAP 24 MG	3	QL (90 caps / 30 days), PA
LORBRENA TAB 25MG	3	QL (90 tabs / 30 days), PA
LORBRENA TAB 100MG	3	QL (30 tabs / 30 days), PA
MEKINIST TAB 0.5MG	3	QL (90 tabs / 30 days), PA
MEKINIST TAB 2MG	3	QL (30 tabs / 30 days), PA
NEXAVAR TAB 200MG	3	QL (120 tabs / 30 days), PA

Drug Name	Drug Tier	Requirements/Limits
SPRYCEL TAB 20MG	3	QL (90 tabs / 30 days), PA
SPRYCEL TAB 50MG	3	QL (30 tabs / 30 days), PA
SPRYCEL TAB 70MG	3	QL (30 tabs / 30 days), PA
SPRYCEL TAB 80MG	3	QL (30 tabs / 30 days), PA
SPRYCEL TAB 100MG	3	QL (30 tabs / 30 days), PA
SPRYCEL TAB 140MG	3	QL (30 tabs / 30 days), PA
STIVARGA TAB 40MG	3	QL (84 tabs / 28 days), PA
SUTENT CAP 12.5MG	3	QL (30 caps / 30 days), PA
SUTENT CAP 25MG	3	QL (30 caps / 30 days), PA
SUTENT CAP 37.5MG	3	QL (30 caps / 30 days), PA
SUTENT CAP 50MG	3	QL (30 caps / 30 days), PA
TAFINLAR CAP 50MG	3	QL (120 caps / 30 days), PA
TAFINLAR CAP 75MG	3	QL (120 caps / 30 days), PA
TYKERB TAB 250MG	3	QL (180 tabs / 30 days), PA
VITRAKVI CAP 25MG	3	QL (180 caps / 30 days), PA
VITRAKVI CAP 100MG	3	QL (60 caps / 30 days), PA
VITRAKVI SOL 20MG/ML	3	QL (300 mL / 30 days), PA
VOTRIENT TAB 200MG	3	QL (120 tabs / 30 days), PA
XALKORI CAP 200MG	3	QL (60 caps / 30 days), PA
XALKORI CAP 250MG	3	QL (60 caps / 30 days), PA
ZELBORAF TAB 240MG	3	QL (240 tabs / 30 days), PA
ZYDELIG TAB 100MG	3	QL (60 tabs / 30 days), PA
ZYDELIG TAB 150MG	3	QL (60 tabs / 30 days), PA
ZYKADIA CAP 150MG	3	QL (90 caps / 30 days), PA

Drug Name	Drug Tier	Requirements/Limits
ZYKADIA TAB 150MG	3	QL (90 tabs / 30 days), PA
MISCELLANEOUS		
<i>arsenic trioxide inj 10 mg/10ml (1 mg/ml)</i>	1	
<i>bexarotene cap 75 mg</i>	3	PA
DROXIA CAP 200MG	2	
DROXIA CAP 300MG	2	
DROXIA CAP 400MG	2	
<i>hydroxyurea cap 500 mg</i>	1	
MATULANE CAP 50MG	2	
<i>mitoxantrone hcl inj conc 20 mg/10ml (2 mg/ml)</i>	3	PA
<i>mitoxantrone hcl inj conc 25 mg/12.5ml (2 mg/ml)</i>	3	PA
<i>mitoxantrone hcl inj conc 30 mg/15ml (2 mg/ml)</i>	3	PA
ODOMZO CAP 200MG	3	QL (30 caps / 30 days), PA
ONCASPAR INJ 750/ML	3	PA
PHOTOFRIN INJ 75MG	2	
QUADRAMET INJ	2	
THERACYS INJ	2	
TICE BCG INJ	2	
<i>tretinoin cap 10 mg</i>	1	
TRISENOX INJ 12MG/6ML	2	
UVADEX INJ 20MCG/ML	2	
VISTOGARD PAK 10GM	2	
PLATINUM-BASED AGENTS		
<i>carboplatin iv soln 50 mg/5ml</i>	1	
<i>carboplatin iv soln 150 mg/15ml</i>	1	
<i>carboplatin iv soln 450 mg/45ml</i>	1	
<i>carboplatin iv soln 600 mg/60ml</i>	1	
<i>cisplatin inj 50 mg/50ml (1 mg/ml)</i>	1	
<i>cisplatin inj 100 mg/100ml (1 mg/ml)</i>	1	
<i>cisplatin inj 200 mg/200ml (1 mg/ml)</i>	1	
<i>oxaliplatin for iv inj 50 mg</i>	3	
<i>oxaliplatin for iv inj 100 mg</i>	3	
<i>oxaliplatin iv soln 50 mg/10ml</i>	3	
<i>oxaliplatin iv soln 100 mg/20ml</i>	3	
PROTECTIVE AGENTS		
<i>amifostine for inj 500 mg</i>	1	
<i>dexrazoxane hcl for inj 250 mg (base equivalent)</i>	1	
<i>dexrazoxane hcl for inj 500 mg (base equivalent)</i>	1	
<i>leucovorin calcium for inj 50 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>leucovorin calcium for inj 100 mg</i>	1	
<i>leucovorin calcium for inj 200 mg</i>	1	
<i>leucovorin calcium for inj 350 mg</i>	1	
<i>leucovorin calcium for inj 500 mg</i>	1	
<i>leucovorin calcium tab 5 mg</i>	1	
<i>leucovorin calcium tab 10 mg</i>	1	
<i>leucovorin calcium tab 15 mg</i>	1	
<i>leucovorin calcium tab 25 mg</i>	1	
<i>mesna inj 100 mg/ml</i>	1	
MESNEX TAB 400MG	3	

TOPOISOMERASE INHIBITORS

CAMPTOSAR INJ 300/15ML	2	
<i>etoposide cap 50 mg</i>	1	
<i>etoposide inj 100 mg/5ml (20 mg/ml)</i>	1	
<i>irinotecan hcl inj 40 mg/2ml (20 mg/ml)</i>	3	
<i>irinotecan hcl inj 100 mg/5ml (20 mg/ml)</i>	3	
<i>irinotecan hcl inj 500 mg/25ml (20 mg/ml)</i>	3	
TENIPOSIDE INJ 50MG/5ML	2	
<i>toposar inj 20mg/ml</i>	1	
<i>toposar inj 100/5ml</i>	1	
<i>topotecan hcl for inj 4 mg (base equiv)</i>	1	

ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

ANTINEOPLASTIC, BCL-2 INHIBITORS

VENCLEXTA TAB 10MG	3	PA
VENCLEXTA TAB 50MG	3	PA
VENCLEXTA TAB 100MG	3	PA
VENCLEXTA TAB START PK	3	PA

CARDIOVASCULAR

ACE INHIBITOR COMBINATIONS

<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>	1	
<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	1	
<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	1	
<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	1	
<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>	1	
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	1	
<i>benazepril & hydrochlorothiazide tab 5-6.25 mg</i>	1	
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	1	
<i>captopril & hydrochlorothiazide tab 25-15 mg</i>	1	
<i>captopril & hydrochlorothiazide tab 25-25 mg</i>	1	
<i>captopril & hydrochlorothiazide tab 50-15 mg</i>	1	
<i>captopril & hydrochlorothiazide tab 50-25 mg</i>	1	
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	1	
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	1	
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i>	1	
<i>moexipril-hydrochlorothiazide tab 7.5-12.5 mg</i>	1	
<i>moexipril-hydrochlorothiazide tab 15-12.5 mg</i>	1	
<i>moexipril-hydrochlorothiazide tab 15-25 mg</i>	1	
<i>quinapril-hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>quinapril-hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	1	
<i>trandolapril-verapamil hcl tab er 1-240 mg</i>	1	
<i>trandolapril-verapamil hcl tab er 2-180 mg</i>	1	
<i>trandolapril-verapamil hcl tab er 2-240 mg</i>	1	
<i>trandolapril-verapamil hcl tab er 4-240 mg</i>	1	
ACE INHIBITORS		
<i>benazepril hcl tab 5 mg</i>	1	
<i>benazepril hcl tab 10 mg</i>	1	
<i>benazepril hcl tab 20 mg</i>	1	
<i>benazepril hcl tab 40 mg</i>	1	
<i>captopril tab 12.5 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>captopril tab 25 mg</i>	1	
<i>captopril tab 50 mg</i>	1	
<i>captopril tab 100 mg</i>	1	
<i>enalapril maleate tab 2.5 mg</i>	1	
<i>enalapril maleate tab 5 mg</i>	1	
<i>enalapril maleate tab 10 mg</i>	1	
<i>enalapril maleate tab 20 mg</i>	1	
<i>fosinopril sodium tab 10 mg</i>	1	
<i>fosinopril sodium tab 20 mg</i>	1	
<i>fosinopril sodium tab 40 mg</i>	1	
<i>lisinopril tab 2.5 mg</i>	1	
<i>lisinopril tab 5 mg</i>	1	
<i>lisinopril tab 10 mg</i>	1	
<i>lisinopril tab 20 mg</i>	1	
<i>lisinopril tab 30 mg</i>	1	
<i>lisinopril tab 40 mg</i>	1	
<i>moexipril hcl tab 7.5 mg</i>	1	
<i>moexipril hcl tab 15 mg</i>	1	
<i>perindopril erbumine tab 2 mg</i>	1	
<i>perindopril erbumine tab 4 mg</i>	1	
<i>perindopril erbumine tab 8 mg</i>	1	
<i>quinapril hcl tab 5 mg</i>	1	
<i>quinapril hcl tab 10 mg</i>	1	
<i>quinapril hcl tab 20 mg</i>	1	
<i>quinapril hcl tab 40 mg</i>	1	
<i>ramipril cap 1.25 mg</i>	1	
<i>ramipril cap 2.5 mg</i>	1	
<i>ramipril cap 5 mg</i>	1	
<i>ramipril cap 10 mg</i>	1	
<i>trandolapril tab 1 mg</i>	1	
<i>trandolapril tab 2 mg</i>	1	
<i>trandolapril tab 4 mg</i>	1	
ALDOSTERONE RECEPTOR ANTAGONISTS		
<i>eplerenone tab 25 mg</i>	1	
<i>eplerenone tab 50 mg</i>	1	
ALPHA BLOCKERS		
<i>doxazosin mesylate tab 1 mg</i>	1	
<i>doxazosin mesylate tab 2 mg</i>	1	
<i>doxazosin mesylate tab 4 mg</i>	1	
<i>doxazosin mesylate tab 8 mg</i>	1	
<i>prazosin hcl cap 1 mg</i>	1	
<i>prazosin hcl cap 2 mg</i>	1	
<i>prazosin hcl cap 5 mg</i>	1	
<i>terazosin hcl cap 1 mg (base equivalent)</i>	1	
<i>terazosin hcl cap 2 mg (base equivalent)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>terazosin hcl cap 5 mg (base equivalent)</i>	1	
<i>terazosin hcl cap 10 mg (base equivalent)</i>	1	
ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS		
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	1	
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	1	
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	1	
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	1	
<i>amlodipine besylate-valsartan tab 5-160 mg</i>	1	
<i>amlodipine besylate-valsartan tab 5-320 mg</i>	1	
<i>amlodipine besylate-valsartan tab 10-160 mg</i>	1	
<i>amlodipine besylate-valsartan tab 10-320 mg</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg</i>	1	
BYVALSON TAB 5-80MG	3	
<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg</i>	1	
<i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg</i>	1	
<i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg</i>	1	
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	1	
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 100-25 mg</i>	1	
<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i>	1	
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i>	1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg</i>	1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg</i>	1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg</i>	1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg</i>	1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg</i>	1	
<i>telmisartan-amlodipine tab 40-5 mg</i>	1	
<i>telmisartan-amlodipine tab 40-10 mg</i>	1	
<i>telmisartan-amlodipine tab 80-5 mg</i>	1	
<i>telmisartan-amlodipine tab 80-10 mg</i>	1	
<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i>	1	
<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i>	1	
<i>telmisartan-hydrochlorothiazide tab 80-25 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	1	
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
<i>candesartan cilexetil tab 4 mg</i>	1	
<i>candesartan cilexetil tab 8 mg</i>	1	
<i>candesartan cilexetil tab 16 mg</i>	1	
<i>candesartan cilexetil tab 32 mg</i>	1	
EDARBITAB 40MG	3	ST; PA**
EDARBITAB 80MG	3	ST; PA**
<i>eprosartan mesylate tab 600 mg</i>	1	
<i>irbesartan tab 75 mg</i>	1	
<i>irbesartan tab 150 mg</i>	1	
<i>irbesartan tab 300 mg</i>	1	
<i>losartan potassium tab 25 mg</i>	1	
<i>losartan potassium tab 50 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>losartan potassium tab 100 mg</i>	1	
<i>olmesartan medoxomil tab 5 mg</i>	1	
<i>olmesartan medoxomil tab 20 mg</i>	1	
<i>olmesartan medoxomil tab 40 mg</i>	1	
<i>telmisartan tab 20 mg</i>	1	
<i>telmisartan tab 40 mg</i>	1	
<i>telmisartan tab 80 mg</i>	1	
<i>valsartan tab 40 mg</i>	1	
<i>valsartan tab 80 mg</i>	1	
<i>valsartan tab 160 mg</i>	1	
<i>valsartan tab 320 mg</i>	1	

ANTIARRHYTHMICS

<i>amiodarone hcl tab 200 mg</i>	1	
<i>amiodarone hcl tab 400 mg</i>	1	
<i>disopyramide phosphate cap 100 mg</i>	1	
<i>disopyramide phosphate cap 150 mg</i>	1	
<i>dofetilide cap 125 mcg (0.125 mg)</i>	1	PA
<i>dofetilide cap 250 mcg (0.25 mg)</i>	1	PA
<i>dofetilide cap 500 mcg (0.5 mg)</i>	1	PA
<i>flecainide acetate tab 50 mg</i>	1	
<i>flecainide acetate tab 100 mg</i>	1	
<i>flecainide acetate tab 150 mg</i>	1	
<i>mexiletine hcl cap 150 mg</i>	1	
<i>mexiletine hcl cap 200 mg</i>	1	
<i>mexiletine hcl cap 250 mg</i>	1	
MULTAQ TAB 400MG	3	PA
NORPACE CAP 100MG CR	2	
NORPACE CAP 150MG CR	2	
<i>pacerone tab 100mg</i>	1	
<i>pacerone tab 200mg</i>	1	
<i>procainamide hcl inj 100 mg/ml</i>	1	
<i>propafenone hcl cap er 12hr 225 mg</i>	1	
<i>propafenone hcl cap er 12hr 325 mg</i>	1	
<i>propafenone hcl cap er 12hr 425 mg</i>	1	
<i>propafenone hcl tab 150 mg</i>	1	
<i>propafenone hcl tab 225 mg</i>	1	
<i>propafenone hcl tab 300 mg</i>	1	
<i>sorine tab 80mg</i>	1	
<i>sorine tab 120mg</i>	1	
<i>sorine tab 160mg</i>	1	
<i>sorine tab 240mg</i>	1	
<i>sotalol hcl (afib/afl) tab 80 mg</i>	1	
<i>sotalol hcl (afib/afl) tab 120 mg</i>	1	
<i>sotalol hcl (afib/afl) tab 160 mg</i>	1	
<i>sotalol hcl tab 80 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>sotalol hcl tab 120 mg</i>	1	
<i>sotalol hcl tab 160 mg</i>	1	
<i>sotalol hcl tab 240 mg</i>	1	
ANTILIPEMICS, BILE ACID RESINS		
<i>cholestyramine light powder 4 gm/dose</i>	1	
<i>cholestyramine light powder packets 4 gm</i>	1	
<i>cholestyramine powder 4 gm/dose</i>	1	
<i>cholestyramine powder packets 4 gm</i>	1	
<i>colesevelam hcl packet for susp 3.75 gm</i>	1	
<i>colesevelam hcl tab 625 mg</i>	1	
<i>colestipol hcl granule packets 5 gm</i>	1	
<i>colestipol hcl granules 5 gm</i>	1	
<i>colestipol hcl tab 1 gm</i>	1	
<i>prevalite pow 4gm</i>	1	
ANTILIPEMICS, CHOLESTEROL ABSORPTION INHIBITOR		
<i>ezetimibe tab 10 mg</i>	1	
ANTILIPEMICS, FIBRATES		
<i>fenofibrate cap 50 mg</i>	1	
<i>fenofibrate cap 150 mg</i>	1	
<i>fenofibrate micronized cap 43 mg</i>	1	
<i>fenofibrate micronized cap 67 mg</i>	1	
<i>fenofibrate micronized cap 130 mg</i>	1	
<i>fenofibrate micronized cap 134 mg</i>	1	
<i>fenofibrate micronized cap 200 mg</i>	1	
<i>fenofibrate tab 48 mg</i>	1	
<i>fenofibrate tab 54 mg</i>	1	
<i>fenofibrate tab 145 mg</i>	1	
<i>fenofibrate tab 160 mg</i>	1	
<i>gemfibrozil tab 600 mg</i>	1	
ANTILIPEMICS, HMG-COA REDUCTASE INHIBITORS/COMBINATIONS		
<i>ezetimibe-simvastatin tab 10-10 mg</i>	1	
<i>ezetimibe-simvastatin tab 10-20 mg</i>	1	
<i>ezetimibe-simvastatin tab 10-40 mg</i>	1	
<i>ezetimibe-simvastatin tab 10-80 mg</i>	1	
ANTILIPEMICS, HMG-CoA REDUCTASE INHIBITORS		
<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	1	\$0 copay for members age 40 through 75
<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	1	\$0 copay for members age 40 through 75
<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	1	
<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>fluvastatin sodium cap 20 mg (base equivalent)</i>	1	\$0 copay for members age 40 through 75
<i>fluvastatin sodium cap 40 mg (base equivalent)</i>	1	\$0 copay for members age 40 through 75
<i>fluvastatin sodium tab er 24 hr 80 mg (base equivalent)</i>	1	\$0 copay for members age 40 through 75
LIVALO TAB 1MG	3	ST; PA**
LIVALO TAB 2MG	3	ST; PA**
LIVALO TAB 4MG	3	ST; PA**
<i>lovastatin tab 10 mg</i>	1	\$0 copay for members age 40 through 75
<i>lovastatin tab 20 mg</i>	1	\$0 copay for members age 40 through 75
<i>lovastatin tab 40 mg</i>	1	\$0 copay for members age 40 through 75
<i>pravastatin sodium tab 10 mg</i>	1	\$0 copay for members age 40 through 75
<i>pravastatin sodium tab 20 mg</i>	1	\$0 copay for members age 40 through 75
<i>pravastatin sodium tab 40 mg</i>	1	\$0 copay for members age 40 through 75
<i>pravastatin sodium tab 80 mg</i>	1	\$0 copay for members age 40 through 75
<i>rosuvastatin calcium tab 5 mg</i>	1	ST; \$0 copay for members age 40 through 75; PA**
<i>rosuvastatin calcium tab 10 mg</i>	1	ST; \$0 copay for members age 40 through 75; PA**
<i>rosuvastatin calcium tab 20 mg</i>	1	
<i>rosuvastatin calcium tab 40 mg</i>	1	
<i>simvastatin tab 5 mg</i>	1	\$0 copay for members age 40 through 75
<i>simvastatin tab 10 mg</i>	1	\$0 copay for members age 40 through 75
<i>simvastatin tab 20 mg</i>	1	\$0 copay for members age 40 through 75
<i>simvastatin tab 40 mg</i>	1	\$0 copay for members age 40 through 75
<i>simvastatin tab 80 mg</i>	1	ST; PA**
ANTILIPEMICS, MISCELLANEOUS		
<i>niacin tab er 500 mg (antihyperlipidemic)</i>	1	
<i>niacin tab er 750 mg (antihyperlipidemic)</i>	1	
<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	1	
ANTILIPEMICS, OMEGA-3 FATTY ACIDS		
<i>omega-3-acid ethyl esters cap 1 gm</i>	1	PA
VASCEPA CAP 0.5GM	2	

Drug Name	Drug Tier	Requirements/Limits
VASCEPA CAP 1GM	2	
ANTILIPEMICS, PCSK9 INHIBITORS		
REPATHA INJ 140MG/ML	3	QL (2 syringes / 28 days), PA
REPATHA PUSH INJ 420/3.5	3	QL (1 cartridge / 28 days), PA
REPATHA SURE INJ 140MG/ML	3	QL (2 pens / 28 days), PA
BETA-BLOCKER/DIURETIC COMBINATIONS		
<i>atenolol & chlorthalidone tab 50-25 mg</i>	1	
<i>atenolol & chlorthalidone tab 100-25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg</i>	1	
<i>metoprolol & hydrochlorothiazide tab 50-25 mg</i>	1	
<i>metoprolol & hydrochlorothiazide tab 100-25 mg</i>	1	
<i>metoprolol & hydrochlorothiazide tab 100-50 mg</i>	1	
<i>nadolol & bendroflumethiazide tab 40-5 mg</i>	1	
<i>propranolol & hydrochlorothiazide tab 40-25 mg</i>	1	
<i>propranolol & hydrochlorothiazide tab 80-25 mg</i>	1	
BETA-BLOCKERS		
<i>acebutolol hcl cap 200 mg</i>	1	
<i>acebutolol hcl cap 400 mg</i>	1	
<i>atenolol tab 25 mg</i>	1	
<i>atenolol tab 50 mg</i>	1	
<i>atenolol tab 100 mg</i>	1	
<i>betaxolol hcl tab 10 mg</i>	1	
<i>betaxolol hcl tab 20 mg</i>	1	
<i>bisoprolol fumarate tab 5 mg</i>	1	
<i>bisoprolol fumarate tab 10 mg</i>	1	
BYSTOLIC TAB 2.5MG	3	
BYSTOLIC TAB 5MG	3	
BYSTOLIC TAB 10MG	3	
BYSTOLIC TAB 20MG	3	
<i>carvedilol tab 3.125 mg</i>	1	
<i>carvedilol tab 6.25 mg</i>	1	
<i>carvedilol tab 12.5 mg</i>	1	
<i>carvedilol tab 25 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>labetalol hcl tab 100 mg</i>	1	
<i>labetalol hcl tab 200 mg</i>	1	
<i>labetalol hcl tab 300 mg</i>	1	
<i>metoprolol succinate tab er 24hr 25 mg (tartrate equiv)</i>	1	
<i>metoprolol succinate tab er 24hr 50 mg (tartrate equiv)</i>	1	
<i>metoprolol succinate tab er 24hr 100 mg (tartrate equiv)</i>	1	
<i>metoprolol succinate tab er 24hr 200 mg (tartrate equiv)</i>	1	
<i>metoprolol tartrate tab 25 mg</i>	1	
<i>metoprolol tartrate tab 50 mg</i>	1	
<i>metoprolol tartrate tab 100 mg</i>	1	
<i>nadolol tab 20 mg</i>	1	
<i>nadolol tab 40 mg</i>	1	
<i>nadolol tab 80 mg</i>	1	
<i>pindolol tab 5 mg</i>	1	
<i>pindolol tab 10 mg</i>	1	
<i>propranolol hcl cap er 24hr 60 mg</i>	1	
<i>propranolol hcl cap er 24hr 80 mg</i>	1	
<i>propranolol hcl cap er 24hr 120 mg</i>	1	
<i>propranolol hcl cap er 24hr 160 mg</i>	1	
<i>propranolol hcl oral soln 20 mg/5ml</i>	1	
<i>propranolol hcl oral soln 40 mg/5ml</i>	1	
<i>propranolol hcl tab 10 mg</i>	1	
<i>propranolol hcl tab 20 mg</i>	1	
<i>propranolol hcl tab 40 mg</i>	1	
<i>propranolol hcl tab 60 mg</i>	1	
<i>propranolol hcl tab 80 mg</i>	1	
<i>timolol maleate tab 5 mg</i>	1	
<i>timolol maleate tab 10 mg</i>	1	
<i>timolol maleate tab 20 mg</i>	1	

CALCIUM CHANNEL BLOCKER/ANTILIPEMIC COMBINATIONS

<i>amlodipine besylate-atorvastatin calcium tab 2.5-10 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 2.5-20 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 2.5-40 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 5-10 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 5-20 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 5-40 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>amlodipine besylate-atorvastatin calcium tab 5-80 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 10-10 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 10-20 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 10-40 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 10-80 mg</i>	1	

CALCIUM CHANNEL BLOCKERS

<i>afeditab tab 30mg cr</i>	1	
<i>afeditab tab 60mg cr</i>	1	
<i>amlodipine besylate tab 2.5 mg (base equivalent)</i>	1	
<i>amlodipine besylate tab 5 mg (base equivalent)</i>	1	
<i>amlodipine besylate tab 10 mg (base equivalent)</i>	1	
CARDIZEM LA TAB 120MG	2	
<i>cartia xt cap 120/24hr</i>	1	
<i>cartia xt cap 180/24hr</i>	1	
<i>cartia xt cap 240/24hr</i>	1	
<i>cartia xt cap 300/24hr</i>	1	
<i>diltiazem hcl cap er 12hr 60 mg</i>	1	
<i>diltiazem hcl cap er 12hr 90 mg</i>	1	
<i>diltiazem hcl cap er 12hr 120 mg</i>	1	
<i>diltiazem hcl cap er 24hr 120 mg</i>	1	
<i>diltiazem hcl cap er 24hr 180 mg</i>	1	
<i>diltiazem hcl cap er 24hr 240 mg</i>	1	
<i>diltiazem hcl coated beads cap er 24hr 120 mg</i>	1	
<i>diltiazem hcl coated beads cap er 24hr 180 mg</i>	1	
<i>diltiazem hcl coated beads cap er 24hr 240 mg</i>	1	
<i>diltiazem hcl coated beads cap er 24hr 300 mg</i>	1	
<i>diltiazem hcl coated beads cap er 24hr 360 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 120 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 180 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 240 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>diltiazem hcl extended release beads cap er 24hr 300 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 360 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 420 mg</i>	1	
<i>diltiazem hcl tab 30 mg</i>	1	
<i>diltiazem hcl tab 60 mg</i>	1	
<i>diltiazem hcl tab 90 mg</i>	1	
<i>diltiazem hcl tab 120 mg</i>	1	
<i>felodipine tab er 24hr 2.5 mg</i>	1	
<i>felodipine tab er 24hr 5 mg</i>	1	
<i>felodipine tab er 24hr 10 mg</i>	1	
<i>isradipine cap 2.5 mg</i>	1	
<i>isradipine cap 5 mg</i>	1	
<i>matzim la tab 180mg/24</i>	1	
<i>matzim la tab 240mg/24</i>	1	
<i>matzim la tab 300mg/24</i>	1	
<i>matzim la tab 360mg/24</i>	1	
<i>matzim la tab 420mg/24</i>	1	
<i>nicardipine hcl cap 20 mg</i>	1	
<i>nicardipine hcl cap 30 mg</i>	1	
<i>nifedipine tab er 24hr 30 mg</i>	1	
<i>nifedipine tab er 24hr 60 mg</i>	1	
<i>nifedipine tab er 24hr 90 mg</i>	1	
<i>nifedipine tab er 24hr osmotic release 90 mg</i>	1	
<i>nimodipine cap 30 mg</i>	1	
<i>nisoldipine tab er 24hr 8.5 mg</i>	1	
<i>nisoldipine tab er 24hr 17 mg</i>	1	
<i>nisoldipine tab er 24hr 20 mg</i>	1	
<i>nisoldipine tab er 24hr 25.5 mg</i>	1	
<i>nisoldipine tab er 24hr 30 mg</i>	1	
<i>nisoldipine tab er 24hr 34 mg</i>	1	
<i>nisoldipine tab er 24hr 40 mg</i>	1	
<i>taztia xt cap 120mg/24</i>	1	
<i>taztia xt cap 180mg/24</i>	1	
<i>taztia xt cap 240mg/24</i>	1	
<i>taztia xt cap 300mg er</i>	1	
<i>taztia xt cap 360mg/24</i>	1	
<i>verapamil hcl cap er 24hr 100 mg</i>	1	
<i>verapamil hcl cap er 24hr 120 mg</i>	1	
<i>verapamil hcl cap er 24hr 180 mg</i>	1	
<i>verapamil hcl cap er 24hr 200 mg</i>	1	
<i>verapamil hcl cap er 24hr 240 mg</i>	1	
<i>verapamil hcl cap er 24hr 300 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>verapamil hcl cap er 24hr 360 mg</i>	1	
<i>verapamil hcl tab 40 mg</i>	1	
<i>verapamil hcl tab 80 mg</i>	1	
<i>verapamil hcl tab 120 mg</i>	1	
<i>verapamil hcl tab er 120 mg</i>	1	
<i>verapamil hcl tab er 180 mg</i>	1	
<i>verapamil hcl tab er 240 mg</i>	1	
<i>DIGITALIS GLYCOSIDES</i>		
<i>digoxin oral soln 0.05 mg/ml</i>	1	
<i>digoxin tab 125 mcg (0.125 mg)</i>	1	
<i>digoxin tab 250 mcg (0.25 mg)</i>	1	
LANOXIN TAB 0.0625MG	2	
LANOXIN TAB 0.1875MG	2	
<i>DIRECT RENIN INHIBITORS/COMBINATIONS</i>		
<i>aliskiren fumarate tab 150 mg (base equivalent)</i>	1	
<i>aliskiren fumarate tab 300 mg (base equivalent)</i>	1	
<i>DIURETICS</i>		
<i>acetazolamide cap er 12hr 500 mg</i>	1	
<i>acetazolamide sodium for inj 500 mg</i>	1	
<i>acetazolamide tab 125 mg</i>	1	
<i>acetazolamide tab 250 mg</i>	1	
ALDACTAZIDE TAB 50/50	2	
<i>amiloride & hydrochlorothiazide tab 5-50 mg</i>	1	
<i>amiloride hcl tab 5 mg</i>	1	
<i>bumetanide tab 0.5 mg</i>	1	
<i>bumetanide tab 1 mg</i>	1	
<i>bumetanide tab 2 mg</i>	1	
<i>chlorothiazide tab 250 mg</i>	1	
<i>chlorothiazide tab 500 mg</i>	1	
<i>chlorthalidone tab 25 mg</i>	1	
<i>chlorthalidone tab 50 mg</i>	1	
DIURIL SUS 250/5ML	3	
DYRENIUM CAP 50MG	3	
DYRENIUM CAP 100MG	3	
<i>ethacrynate sodium for inj 50 mg</i>	1	
<i>ethacrynic acid tab 25 mg</i>	1	
<i>furosemide oral soln 8 mg/ml</i>	1	
<i>furosemide oral soln 10 mg/ml</i>	1	
<i>furosemide tab 20 mg</i>	1	
<i>furosemide tab 40 mg</i>	1	
<i>furosemide tab 80 mg</i>	1	
<i>hydrochlorothiazide cap 12.5 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>hydrochlorothiazide tab 12.5 mg</i>	1	
<i>hydrochlorothiazide tab 25 mg</i>	1	
<i>hydrochlorothiazide tab 50 mg</i>	1	
<i>indapamide tab 1.25 mg</i>	1	
<i>indapamide tab 2.5 mg</i>	1	
<i>methazolamide tab 25 mg</i>	1	
<i>methazolamide tab 50 mg</i>	1	
<i>methyclothiazide tab 5 mg</i>	1	
<i>metolazone tab 2.5 mg</i>	1	
<i>metolazone tab 5 mg</i>	1	
<i>metolazone tab 10 mg</i>	1	
<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	1	
<i>spironolactone tab 25 mg</i>	1	
<i>spironolactone tab 50 mg</i>	1	
<i>spironolactone tab 100 mg</i>	1	
<i>torsemide tab 5 mg</i>	1	
<i>torsemide tab 10 mg</i>	1	
<i>torsemide tab 20 mg</i>	1	
<i>torsemide tab 100 mg</i>	1	
<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	1	
<i>triamterene & hydrochlorothiazide cap 50-25 mg</i>	1	
<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	1	
<i>triamterene & hydrochlorothiazide tab 75-50 mg</i>	1	
MISCELLANEOUS		
<i>clonidine hcl tab 0.1 mg</i>	1	
<i>clonidine hcl tab 0.2 mg</i>	1	
<i>clonidine hcl tab 0.3 mg</i>	1	
<i>clonidine td patch weekly 0.1 mg/24hr</i>	1	
<i>clonidine td patch weekly 0.2 mg/24hr</i>	1	
<i>clonidine td patch weekly 0.3 mg/24hr</i>	1	
ENTRESTO TAB 24-26MG	2	
ENTRESTO TAB 49-51MG	2	
ENTRESTO TAB 97-103MG	2	
<i>guanfacine hcl tab 1 mg</i>	1	
<i>guanfacine hcl tab 2 mg</i>	1	
<i>hydralazine hcl tab 10 mg</i>	1	
<i>hydralazine hcl tab 25 mg</i>	1	
<i>hydralazine hcl tab 50 mg</i>	1	
<i>hydralazine hcl tab 100 mg</i>	1	
<i>methyldopa tab 250 mg</i>	1	
<i>methyldopa tab 500 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>midodrine hcl tab 2.5 mg</i>	1	
<i>midodrine hcl tab 5 mg</i>	1	
<i>midodrine hcl tab 10 mg</i>	1	
<i>minoxidil tab 2.5 mg</i>	1	
<i>minoxidil tab 10 mg</i>	1	
<i>phenoxybenzamine hcl cap 10 mg</i>	1	
<i>ranolazine tab er 12hr 500 mg</i>	1	ST; PA**
<i>ranolazine tab er 12hr 1000 mg</i>	1	ST; PA**

NITRATES

ISORDIL TAB 40MG	2	
<i>isosorbide dinitrate tab 5 mg</i>	1	
<i>isosorbide dinitrate tab 10 mg</i>	1	
<i>isosorbide dinitrate tab 20 mg</i>	1	
<i>isosorbide dinitrate tab 30 mg</i>	1	
<i>isosorbide dinitrate tab er 40 mg</i>	1	
<i>isosorbide mononitrate tab 10 mg</i>	1	
<i>isosorbide mononitrate tab 20 mg</i>	1	
<i>isosorbide mononitrate tab er 24hr 30 mg</i>	1	
<i>isosorbide mononitrate tab er 24hr 60 mg</i>	1	
<i>isosorbide mononitrate tab er 24hr 120 mg</i>	1	
<i>minitran dis 0.1mg/hr</i>	1	
<i>minitran dis 0.2mg/hr</i>	1	
<i>minitran dis 0.4mg/hr</i>	1	
<i>minitran dis 0.6mg/hr</i>	1	
NITRO-DUR DIS 0.3MG/HR	2	
NITRO-DUR DIS 0.8MG/HR	2	
<i>nitroglycerin sl tab 0.3 mg</i>	1	
<i>nitroglycerin sl tab 0.4 mg</i>	1	
<i>nitroglycerin sl tab 0.6 mg</i>	1	
<i>nitroglycerin td patch 24hr 0.1 mg/hr</i>	1	
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>	1	
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>	1	
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>	1	
<i>nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)</i>	1	

PULMONARY ARTERIAL HYPERTENSION

ADEMPAS TAB 0.5MG	3	QL (90 tabs / 30 days), PA
ADEMPAS TAB 1.5MG	3	QL (90 tabs / 30 days), PA
ADEMPAS TAB 1MG	3	QL (90 tabs / 30 days), PA
ADEMPAS TAB 2.5MG	3	QL (90 tabs / 30 days), PA
ADEMPAS TAB 2MG	3	QL (90 tabs / 30 days), PA

Drug Name	Drug Tier	Requirements/Limits
<i>ambrisentan tab 5 mg</i>	3	QL (30 tabs / 30 days), PA
<i>ambrisentan tab 10 mg</i>	3	QL (30 tabs / 30 days), PA
<i>bosentan tab 62.5 mg</i>	3	QL (60 tabs / 30 days), PA
<i>bosentan tab 125 mg</i>	3	QL (60 tabs / 30 days), PA
<i>epoprostenol sodium for inj 0.5 mg</i>	3	PA
<i>epoprostenol sodium for inj 1.5 mg</i>	3	PA
LETAIRIS TAB 5MG	3	QL (30 tabs / 30 days), PA
LETAIRIS TAB 10MG	3	QL (30 tabs / 30 days), PA
OPSUMIT TAB 10MG	3	QL (30 tabs / 30 days), PA
ORENITRAM TAB 0.25MG	3	PA
ORENITRAM TAB 0.125MG	3	PA
ORENITRAM TAB 1MG	3	PA
ORENITRAM TAB 2.5MG	3	PA
ORENITRAM TAB 5MG	3	PA
REMODULIN INJ 1MG/ML	3	PA
REMODULIN INJ 2.5MG/ML	3	PA
REMODULIN INJ 5MG/ML	3	PA
REMODULIN INJ 10MG/ML	3	PA
<i>sildenafil citrate iv soln 10 mg/12.5ml (base equivalent)</i>	3	PA
<i>sildenafil citrate tab 20 mg</i>	3	QL (90 tabs / 30 days), PA
<i>tadalafil tab 20 mg (pah)</i>	3	QL (60 tabs / 30 days), PA
TRACLEER TAB 32MG	3	QL (112 tabs / 28 days), PA
TRACLEER TAB 62.5MG	3	QL (60 tabs / 30 days), PA
TRACLEER TAB 125MG	3	QL (60 tabs / 30 days), PA
TYVASO START SOL 0.6MG/ML	3	QL (28 ampules / 28 days), PA
UPTRAVI TAB 200/800	3	PA
UPTRAVI TAB 200MCG	3	PA
UPTRAVI TAB 400MCG	3	PA
UPTRAVI TAB 600MCG	3	PA
UPTRAVI TAB 800MCG	3	PA
UPTRAVI TAB 1000MCG	3	PA
UPTRAVI TAB 1200MCG	3	PA
UPTRAVI TAB 1400MCG	3	PA

Drug Name	Drug Tier	Requirements/Limits
UPTRAVI TAB 1600MCG	3	PA
VENTAVIS SOL 10MCG/ML	3	QL (270 ampules / 30 days), PA
VENTAVIS SOL 20MCG/ML	3	QL (270 ampules / 30 days), PA

CENTRAL NERVOUS SYSTEM

ANTI-ANXIETY§

ALPRAZOLAM CON 1 MG/ML	2	QL (300 mL / 25 days)
<i>alprazolam orally disintegrating tab 0.5 mg</i>	1	QL (150 tabs / 25 days)
<i>alprazolam orally disintegrating tab 0.25 mg</i>	1	QL (150 tabs / 25 days)
<i>alprazolam orally disintegrating tab 1 mg</i>	1	QL (150 tabs / 25 days)
<i>alprazolam orally disintegrating tab 2 mg</i>	1	QL (150 tabs / 25 days)
<i>alprazolam tab 0.5 mg</i>	1	QL (150 tabs / 25 days)
<i>alprazolam tab 0.25 mg</i>	1	QL (150 tabs / 25 days)
<i>alprazolam tab 1 mg</i>	1	QL (150 tabs / 25 days)
<i>alprazolam tab 2 mg</i>	1	QL (150 tabs / 25 days)
<i>lorazepam conc 2 mg/ml</i>	1	QL (150 mL / 25 days)
<i>lorazepam tab 0.5 mg</i>	1	QL (150 tabs / 25 days)
<i>lorazepam tab 1 mg</i>	1	QL (150 tabs / 25 days)
<i>lorazepam tab 2 mg</i>	1	QL (150 tabs / 25 days)
<i>meprobamate tab 200 mg</i>	1	
<i>meprobamate tab 400 mg</i>	1	
<i>oxazepam cap 10 mg</i>	1	QL (120 caps / 25 days)
<i>oxazepam cap 15 mg</i>	1	QL (120 caps / 25 days)
<i>oxazepam cap 30 mg</i>	1	QL (120 caps / 25 days)

ANTI-CONVULSANTS§

APTIO M TAB 200MG	3	PA
APTIO M TAB 400MG	3	PA
APTIO M TAB 600MG	3	PA
APTIO M TAB 800MG	3	PA
BANZEL SUS 40MG/ML	3	PA
BANZEL TAB 200MG	3	PA
BANZEL TAB 400MG	3	PA
BRIVIACT INJ 50MG/5ML	3	PA
BRIVIACT SOL 10MG/ML	3	PA
BRIVIACT TAB 10MG	3	PA
BRIVIACT TAB 25MG	3	PA
BRIVIACT TAB 50MG	3	PA
BRIVIACT TAB 75MG	3	PA
BRIVIACT TAB 100MG	3	PA
<i>carbamazepine cap er 12hr 100 mg</i>	1	
<i>carbamazepine cap er 12hr 200 mg</i>	1	
<i>carbamazepine cap er 12hr 300 mg</i>	1	
<i>carbamazepine chew tab 100 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>carbamazepine susp 100 mg/5ml</i>	1	
<i>carbamazepine tab 200 mg</i>	1	
<i>carbamazepine tab er 12hr 100 mg</i>	1	
<i>carbamazepine tab er 12hr 200 mg</i>	1	
<i>carbamazepine tab er 12hr 400 mg</i>	1	
CELONTIN CAP 300MG	3	
<i>clobazam suspension 2.5 mg/ml</i>	1	PA
<i>clobazam tab 10 mg</i>	1	PA
<i>clobazam tab 20 mg</i>	1	PA
<i>clonazepam tab 0.5 mg</i>	1	
<i>clonazepam tab 1 mg</i>	1	
<i>clonazepam tab 2 mg</i>	1	
<i>clorazepate dipotassium tab 3.75 mg</i>	1	QL (180 tabs / 25 days)
<i>clorazepate dipotassium tab 7.5 mg</i>	1	QL (180 tabs / 25 days)
<i>clorazepate dipotassium tab 15 mg</i>	1	QL (180 tabs / 25 days)
<i>diazepam con 5mg/ml</i>	1	QL (240 mL / 25 days)
<i>diazepam inj 5 mg/ml</i>	1	
<i>diazepam oral soln 1 mg/ml</i>	1	QL (1200 mL / 25 days)
<i>diazepam tab 2 mg</i>	1	QL (120 tabs / 25 days)
<i>diazepam tab 5 mg</i>	1	QL (120 tabs / 25 days)
<i>diazepam tab 10 mg</i>	1	QL (120 tabs / 25 days)
<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	1	
<i>divalproex sodium tab delayed release 125 mg</i>	1	
<i>divalproex sodium tab delayed release 250 mg</i>	1	
<i>divalproex sodium tab delayed release 500 mg</i>	1	
<i>divalproex sodium tab er 24 hr 250 mg</i>	1	
<i>divalproex sodium tab er 24 hr 500 mg</i>	1	
<i>epitol tab 200mg</i>	1	
<i>ethosuximide cap 250 mg</i>	1	
<i>ethosuximide soln 250 mg/5ml</i>	1	
<i>felbamate susp 600 mg/5ml</i>	1	
<i>felbamate tab 400 mg</i>	1	
<i>felbamate tab 600 mg</i>	1	
FYCOMPA SUS 0.5MG/ML	2	
FYCOMPA TAB 2MG	2	
FYCOMPA TAB 4MG	2	
FYCOMPA TAB 6MG	2	
FYCOMPA TAB 8MG	2	
FYCOMPA TAB 10MG	2	
FYCOMPA TAB 12MG	2	
<i>gabapentin cap 100 mg</i>	1	
<i>gabapentin cap 300 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>gabapentin cap 400 mg</i>	1	
<i>gabapentin oral soln 250 mg/5ml</i>	1	
<i>gabapentin tab 600 mg</i>	1	
<i>gabapentin tab 800 mg</i>	1	
<i>lamotrigine orally disintegrating tab 25 mg</i>	1	
<i>lamotrigine orally disintegrating tab 50 mg</i>	1	
<i>lamotrigine orally disintegrating tab 100 mg</i>	1	
<i>lamotrigine orally disintegrating tab 200 mg</i>	1	
<i>lamotrigine tab 25 mg</i>	1	
<i>lamotrigine tab 25 mg (35) starter kit</i>	1	
<i>lamotrigine tab 25 mg (42) & 100 mg (7) starter kit</i>	1	
<i>lamotrigine tab 25 mg (84) & 100 mg (14) starter kit</i>	1	
<i>lamotrigine tab 100 mg</i>	1	
<i>lamotrigine tab 150 mg</i>	1	
<i>lamotrigine tab 200 mg</i>	1	
<i>lamotrigine tab chewable dispersible 5 mg</i>	1	
<i>lamotrigine tab chewable dispersible 25 mg</i>	1	
<i>lamotrigine tab er 24hr 25 mg</i>	1	
<i>lamotrigine tab er 24hr 50 mg</i>	1	
<i>lamotrigine tab er 24hr 100 mg</i>	1	
<i>lamotrigine tab er 24hr 200 mg</i>	1	
<i>lamotrigine tab er 24hr 250 mg</i>	1	
<i>lamotrigine tab er 24hr 300 mg</i>	1	
<i>levetiracetam oral soln 100 mg/ml</i>	1	
<i>levetiracetam tab 250 mg</i>	1	
<i>levetiracetam tab 500 mg</i>	1	
<i>levetiracetam tab 750 mg</i>	1	
<i>levetiracetam tab 1000 mg</i>	1	
<i>levetiracetam tab er 24hr 500 mg</i>	1	
<i>levetiracetam tab er 24hr 750 mg</i>	1	
LYRICA CAP 25MG	3	ST; PA**
LYRICA CAP 50MG	3	ST; PA**
LYRICA CAP 75MG	3	ST; PA**
LYRICA CAP 100MG	3	ST; PA**
LYRICA CAP 150MG	3	ST; PA**
LYRICA CAP 200MG	3	ST; PA**
LYRICA CAP 225MG	3	ST; PA**
LYRICA CAP 300MG	3	ST; PA**
LYRICA SOL 20MG/ML	3	ST; PA**
<i>oxcarbazepine susp 300 mg/5ml (60 mg/ml)</i>	1	
<i>oxcarbazepine tab 150 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>oxcarbazepine tab 300 mg</i>	1	
<i>oxcarbazepine tab 600 mg</i>	1	
PEGANONE TAB 250MG	3	
<i>phenobarbital elixir 20 mg/5ml</i>	1	
<i>phenobarbital tab 15 mg</i>	1	
<i>phenobarbital tab 16.2 mg</i>	1	
<i>phenobarbital tab 30 mg</i>	1	
<i>phenobarbital tab 32.4 mg</i>	1	
<i>phenobarbital tab 60 mg</i>	1	
<i>phenobarbital tab 64.8 mg</i>	1	
<i>phenobarbital tab 97.2 mg</i>	1	
<i>phenobarbital tab 100 mg</i>	1	
<i>phenytoin chew tab 50 mg</i>	1	
<i>phenytoin sodium extended cap 100 mg</i>	1	
<i>phenytoin sodium extended cap 200 mg</i>	1	
<i>phenytoin sodium extended cap 300 mg</i>	1	
<i>phenytoin susp 125 mg/5ml</i>	1	
<i>pregabalin cap 25 mg</i>	1	ST; PA**
<i>pregabalin cap 50 mg</i>	1	ST; PA**
<i>pregabalin cap 75 mg</i>	1	ST; PA**
<i>pregabalin cap 100 mg</i>	1	ST; PA**
<i>pregabalin cap 150 mg</i>	1	ST; PA**
<i>pregabalin cap 200 mg</i>	1	ST; PA**
<i>pregabalin cap 225 mg</i>	1	ST; PA**
<i>pregabalin cap 300 mg</i>	1	ST; PA**
<i>pregabalin soln 20 mg/ml</i>	1	ST; PA**
<i>primidone tab 50 mg</i>	1	
<i>primidone tab 250 mg</i>	1	
<i>tiagabine hcl tab 2 mg</i>	1	
<i>tiagabine hcl tab 4 mg</i>	1	
<i>tiagabine hcl tab 12 mg</i>	1	
<i>tiagabine hcl tab 16 mg</i>	1	
<i>topiramate sprinkle cap 15 mg</i>	1	
<i>topiramate sprinkle cap 25 mg</i>	1	
<i>topiramate tab 25 mg</i>	1	
<i>topiramate tab 50 mg</i>	1	
<i>topiramate tab 100 mg</i>	1	
<i>topiramate tab 200 mg</i>	1	
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i>	1	
<i>valproic acid cap 250 mg</i>	1	
<i>vigabatrin powd pack 500 mg</i>	3	QL (180 packets / 30 days), PA
<i>vigabatrin tab 500 mg</i>	3	QL (180 tabs / 30 days), PA
VIMPAT SOL 10MG/ML	3	

Drug Name	Drug Tier	Requirements/Limits
VIMPAT TAB 50MG	3	
VIMPAT TAB 100MG	3	
VIMPAT TAB 150MG	3	
VIMPAT TAB 200MG	3	
<i>zonisamide cap 25 mg</i>	1	
<i>zonisamide cap 50 mg</i>	1	
<i>zonisamide cap 100 mg</i>	1	
ANTIDEMENTIA		
<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>	1	
<i>donepezil hydrochloride orally disintegrating tab 10 mg</i>	1	
<i>donepezil hydrochloride tab 5 mg</i>	1	
<i>donepezil hydrochloride tab 10 mg</i>	1	
<i>donepezil hydrochloride tab 23 mg</i>	1	
<i>ergoloid mesylates tab 1 mg</i>	1	
<i>galantamine hydrobromide cap er 24hr 8 mg</i>	1	
<i>galantamine hydrobromide cap er 24hr 16 mg</i>	1	
<i>galantamine hydrobromide cap er 24hr 24 mg</i>	1	
<i>galantamine hydrobromide oral soln 4 mg/ml</i>	1	
<i>galantamine hydrobromide tab 4 mg</i>	1	
<i>galantamine hydrobromide tab 8 mg</i>	1	
<i>galantamine hydrobromide tab 12 mg</i>	1	
<i>memantine hcl cap er 24hr 7 mg</i>	1	PA; PA applies for members less than 30 years of age
<i>memantine hcl cap er 24hr 14 mg</i>	1	PA; PA applies for members less than 30 years of age
<i>memantine hcl cap er 24hr 21 mg</i>	1	PA; PA applies for members less than 30 years of age
<i>memantine hcl cap er 24hr 28 mg</i>	1	PA; PA applies for members less than 30 years of age
<i>memantine hcl oral solution 2 mg/ml</i>	1	PA; PA applies for members less than 30 years of age
<i>memantine hcl tab 5 mg</i>	1	PA; PA applies for members less than 30 years of age

Drug Name	Drug Tier	Requirements/Limits
<i>memantine hcl tab 5 mg (28) & 10 mg (21) titration pak</i>	1	PA; PA applies for members less than 30 years of age
<i>memantine hcl tab 10 mg</i>	1	PA; PA applies for members less than 30 years of age
NAMENDA XR CAP TITRATIO	2	PA; PA applies for members less than 30 years of age
<i>rivastigmine tartrate cap 1.5 mg (base equivalent)</i>	1	PA
<i>rivastigmine tartrate cap 3 mg (base equivalent)</i>	1	PA
<i>rivastigmine tartrate cap 4.5 mg (base equivalent)</i>	1	PA
<i>rivastigmine tartrate cap 6 mg (base equivalent)</i>	1	PA
ANTIDEPRESSANTS§		
<i>amitriptyline hcl tab 10 mg</i>	1	QL (150 tabs / 25 days); QL applies to members age 65 and older
<i>amitriptyline hcl tab 25 mg</i>	1	QL (60 tabs / 25 days); QL applies to members age 65 and older
<i>amitriptyline hcl tab 50 mg</i>	1	QL (30 tabs / 25 days); QL applies to members age 65 and older
<i>amitriptyline hcl tab 75 mg</i>	1	PA; Members 70 and older subject to PA
<i>amitriptyline hcl tab 100 mg</i>	1	PA; Members 70 and older subject to PA
<i>amitriptyline hcl tab 150 mg</i>	1	PA; Members 70 and older subject to PA
<i>amoxapine tab 25 mg</i>	1	QL (90 tabs / 25 days); QL applies to members age 65 and older
<i>amoxapine tab 50 mg</i>	1	QL (90 tabs / 25 days); QL applies to members age 65 and older
<i>amoxapine tab 100 mg</i>	1	QL (90 tabs / 25 days); QL applies to members age 65 and older
<i>amoxapine tab 150 mg</i>	1	QL (60 tabs / 25 days); QL applies to members age 65 and older
<i>bupropion hcl tab 75 mg</i>	1	
<i>bupropion hcl tab 100 mg</i>	1	
<i>bupropion hcl tab er 12hr 100 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>bupropion hcl tab er 12hr 150 mg</i>	1	
<i>bupropion hcl tab er 12hr 200 mg</i>	1	
<i>bupropion hcl tab er 24hr 150 mg</i>	1	
<i>bupropion hcl tab er 24hr 300 mg</i>	1	
<i>citalopram hydrobromide oral soln 10 mg/5ml</i>	1	
<i>citalopram hydrobromide tab 10 mg (base equiv)</i>	1	
<i>citalopram hydrobromide tab 20 mg (base equiv)</i>	1	
<i>citalopram hydrobromide tab 40 mg (base equiv)</i>	1	
<i>desipramine hcl tab 10 mg</i>	1	QL (90 tabs / 25 days); QL applies to members age 65 and older
<i>desipramine hcl tab 25 mg</i>	1	QL (90 tabs / 25 days); QL applies to members age 65 and older
<i>desipramine hcl tab 50 mg</i>	1	QL (90 tabs / 25 days); QL applies to members age 65 and older
<i>desipramine hcl tab 75 mg</i>	1	QL (60 tabs / 25 days); QL applies to members age 65 and older
<i>desipramine hcl tab 100 mg</i>	1	QL (30 tabs / 25 days); QL applies to members age 65 and older
<i>desipramine hcl tab 150 mg</i>	1	QL (30 tabs / 25 days); QL applies to members age 65 and older
<i>desvenlafaxine succinate tab er 24hr 25 mg (base equiv)</i>	1	ST; (generic of Pristiq) PA**
<i>desvenlafaxine succinate tab er 24hr 50 mg (base equiv)</i>	1	ST; (generic of Pristiq) PA**
<i>desvenlafaxine succinate tab er 24hr 100 mg (base equiv)</i>	1	ST; (generic of Pristiq) PA**
<i>doxepin hcl cap 10 mg</i>	1	QL (90 caps / 25 days); QL applies to members age 65 and older
<i>doxepin hcl cap 25 mg</i>	1	QL (90 caps / 25 days); QL applies to members age 65 and older
<i>doxepin hcl cap 50 mg</i>	1	QL (90 caps / 25 days); QL applies to members age 65 and older
<i>doxepin hcl cap 75 mg</i>	1	QL (60 caps / 25 days); QL applies to members age 65 and older

Drug Name	Drug Tier	Requirements/Limits
<i>doxepin hcl cap 100 mg</i>	1	QL (30 caps / 25 days); QL applies to members age 65 and older
<i>doxepin hcl cap 150 mg</i>	1	QL (30 caps / 25 days); QL applies to members age 65 and older
<i>doxepin hcl conc 10 mg/ml</i>	1	QL (450 mL / 25 days); QL applies to members age 65 and older
<i>duloxetine hcl cap 20 mg</i>	1	
<i>duloxetine hcl cap 30 mg</i>	1	
<i>duloxetine hcl cap 60 mg</i>	1	
EMSAM DIS 6MG/24HR	3	PA
EMSAM DIS 9MG/24HR	3	PA
EMSAM DIS 12MG/24H	3	PA
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	1	
<i>escitalopram oxalate tab 5 mg (base equiv)</i>	1	
<i>escitalopram oxalate tab 10 mg (base equiv)</i>	1	
<i>escitalopram oxalate tab 20 mg (base equiv)</i>	1	
FETZIMA CAP 20MG	3	ST; PA**
FETZIMA CAP 40MG	3	ST; PA**
FETZIMA CAP 80MG	3	ST; PA**
FETZIMA CAP 120MG	3	ST; PA**
FETZIMA CAP TITRATIO	3	ST; PA**
<i>fluoxetine hcl cap 10 mg</i>	1	
<i>fluoxetine hcl cap 20 mg</i>	1	
<i>fluoxetine hcl cap 40 mg</i>	1	
<i>fluoxetine hcl solution 20 mg/5ml</i>	1	
<i>fluoxetine hcl tab 10 mg</i>	1	(generic Sarafem not covered)
<i>fluoxetine hcl tab 20 mg</i>	1	(generic Sarafem not covered)
<i>imipramine hcl tab 10 mg</i>	1	QL (120 tabs / 25 days); QL applies to members age 65 and older
<i>imipramine hcl tab 25 mg</i>	1	QL (120 tabs / 25 days); QL applies to members age 65 and older
<i>imipramine hcl tab 50 mg</i>	1	QL (60 tabs / 25 days); QL applies to members age 65 and older
<i>imipramine pamoate cap 75 mg</i>	1	QL (30 caps / 25 days); QL applies to members age 65 and older

Drug Name	Drug Tier	Requirements/Limits
<i>imipramine pamoate cap 100 mg</i>	1	QL (30 caps / 25 days); QL applies to members age 65 and older
<i>imipramine pamoate cap 125 mg</i>	1	PA; Members 70 and older subject to PA
<i>imipramine pamoate cap 150 mg</i>	1	PA; Members 70 and older subject to PA
<i>maprotiline hcl tab 25 mg</i>	1	
<i>maprotiline hcl tab 50 mg</i>	1	
<i>maprotiline hcl tab 75 mg</i>	1	
MARPLAN TAB 10MG	3	
<i>mirtazapine orally disintegrating tab 15 mg</i>	1	
<i>mirtazapine orally disintegrating tab 30 mg</i>	1	
<i>mirtazapine orally disintegrating tab 45 mg</i>	1	
<i>mirtazapine tab 7.5 mg</i>	1	
<i>mirtazapine tab 15 mg</i>	1	
<i>mirtazapine tab 30 mg</i>	1	
<i>mirtazapine tab 45 mg</i>	1	
<i>nefazodone hcl tab 50 mg</i>	1	
<i>nefazodone hcl tab 100 mg</i>	1	
<i>nefazodone hcl tab 150 mg</i>	1	
<i>nefazodone hcl tab 200 mg</i>	1	
<i>nefazodone hcl tab 250 mg</i>	1	
<i>nortriptyline hcl cap 10 mg</i>	1	QL (150 caps / 25 days); QL applies to members age 65 and older
<i>nortriptyline hcl cap 25 mg</i>	1	QL (60 caps / 25 days); QL applies to members age 65 and older
<i>nortriptyline hcl cap 50 mg</i>	1	QL (30 caps / 25 days); QL applies to members age 65 and older
<i>nortriptyline hcl cap 75 mg</i>	1	PA; Members 70 and older subject to PA
<i>nortriptyline hcl soln 10 mg/5ml</i>	1	QL (750 mL / 25 days); QL applies to members age 65 and older
<i>paroxetine hcl tab 10 mg</i>	1	
<i>paroxetine hcl tab 20 mg</i>	1	
<i>paroxetine hcl tab 30 mg</i>	1	
<i>paroxetine hcl tab 40 mg</i>	1	
<i>paroxetine hcl tab er 24hr 12.5 mg</i>	1	
<i>paroxetine hcl tab er 24hr 25 mg</i>	1	
<i>paroxetine hcl tab er 24hr 37.5 mg</i>	1	
<i>phenelzine sulfate tab 15 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>protriptyline hcl tab 5 mg</i>	1	QL (90 tabs / 25 days); QL applies to members age 65 and older
<i>protriptyline hcl tab 10 mg</i>	1	QL (60 tabs / 25 days); QL applies to members age 65 and older
<i>sertraline hcl oral concentrate for solution 20 mg/ml</i>	1	
<i>sertraline hcl tab 25 mg</i>	1	
<i>sertraline hcl tab 50 mg</i>	1	
<i>sertraline hcl tab 100 mg</i>	1	
<i>tranylcypromine sulfate tab 10 mg</i>	1	
<i>trazodone hcl tab 50 mg</i>	1	
<i>trazodone hcl tab 100 mg</i>	1	
<i>trazodone hcl tab 150 mg</i>	1	
<i>trazodone hcl tab 300 mg</i>	1	
<i>trimipramine maleate cap 25 mg</i>	1	QL (60 caps / 25 days); QL applies to members age 65 and older
<i>trimipramine maleate cap 50 mg</i>	1	QL (60 caps / 25 days); QL applies to members age 65 and older
<i>trimipramine maleate cap 100 mg</i>	1	QL (30 caps / 25 days); QL applies to members age 65 and older
TRINTELLIX TAB 5MG	3	ST; PA**
TRINTELLIX TAB 10MG	3	ST; PA**
TRINTELLIX TAB 20MG	3	ST; PA**
<i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)</i>	1	
<i>venlafaxine hcl cap er 24hr 75 mg (base equivalent)</i>	1	
<i>venlafaxine hcl cap er 24hr 150 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab 25 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab 37.5 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab 50 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab 75 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab 100 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab er 24hr 37.5 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab er 24hr 75 mg (base equivalent)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>venlafaxine hcl tab er 24hr 150 mg (base equivalent)</i>	1	
VIIBRYD KIT STARTER	3	ST; PA**
VIIBRYD TAB 10MG	3	ST; PA**
VIIBRYD TAB 20MG	3	ST; PA**
VIIBRYD TAB 40MG	3	ST; PA**

ANTIPARKINSONIAN AGENTS

<i>amantadine hcl cap 100 mg</i>	1	
<i>amantadine hcl syrup 50 mg/5ml</i>	1	
<i>amantadine hcl tab 100 mg</i>	1	
APOKYN INJ 10MG/ML	3	PA
<i>benztropine mesylate tab 0.5 mg</i>	1	
<i>benztropine mesylate tab 1 mg</i>	1	
<i>benztropine mesylate tab 2 mg</i>	1	
<i>bromocriptine mesylate cap 5 mg (base equivalent)</i>	1	
<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	1	
<i>carbidopa & levodopa orally disintegrating tab 10-100 mg</i>	1	
<i>carbidopa & levodopa orally disintegrating tab 25-100 mg</i>	1	
<i>carbidopa & levodopa orally disintegrating tab 25-250 mg</i>	1	
<i>carbidopa & levodopa tab 10-100 mg</i>	1	
<i>carbidopa & levodopa tab 25-100 mg</i>	1	
<i>carbidopa & levodopa tab 25-250 mg</i>	1	
<i>carbidopa & levodopa tab er 25-100 mg</i>	1	
<i>carbidopa & levodopa tab er 50-200 mg</i>	1	
<i>carbidopa tab 25 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	1	
<i>entacapone tab 200 mg</i>	1	
<i>pramipexole dihydrochloride tab 0.5 mg</i>	1	
<i>pramipexole dihydrochloride tab 0.25 mg</i>	1	
<i>pramipexole dihydrochloride tab 0.75 mg</i>	1	
<i>pramipexole dihydrochloride tab 0.125 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>pramipexole dihydrochloride tab 1 mg</i>	1	
<i>pramipexole dihydrochloride tab 1.5 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 0.75 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 0.375 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 1.5 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 2.25 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 3 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 3.75 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 4.5 mg</i>	1	
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	1	
<i>rasagiline mesylate tab 1 mg (base equiv)</i>	1	
<i>ropinirole hydrochloride tab 0.5 mg</i>	1	
<i>ropinirole hydrochloride tab 0.25 mg</i>	1	
<i>ropinirole hydrochloride tab 1 mg</i>	1	
<i>ropinirole hydrochloride tab 2 mg</i>	1	
<i>ropinirole hydrochloride tab 3 mg</i>	1	
<i>ropinirole hydrochloride tab 4 mg</i>	1	
<i>ropinirole hydrochloride tab 5 mg</i>	1	
<i>selegiline hcl cap 5 mg</i>	1	
<i>selegiline hcl tab 5 mg</i>	1	
<i>tolcapone tab 100 mg</i>	1	
<i>trihexyphenidyl hcl elixir 0.4 mg/ml</i>	1	
<i>trihexyphenidyl hcl tab 2 mg</i>	1	
<i>trihexyphenidyl hcl tab 5 mg</i>	1	

ANTIPSYCHOTICS

<i>aripiprazole oral solution 1 mg/ml</i>	1	
<i>aripiprazole orally disintegrating tab 10 mg</i>	1	
<i>aripiprazole orally disintegrating tab 15 mg</i>	1	
<i>aripiprazole tab 2 mg</i>	1	
<i>aripiprazole tab 5 mg</i>	1	
<i>aripiprazole tab 10 mg</i>	1	
<i>aripiprazole tab 15 mg</i>	1	
<i>aripiprazole tab 20 mg</i>	1	
<i>aripiprazole tab 30 mg</i>	1	
ARISTADA INJ 441MG/1.	2	
ARISTADA INJ 662MG/2	2	
ARISTADA INJ 882MG/3	2	
ARISTADA INJ 1064MG	2	

Drug Name	Drug Tier	Requirements/Limits
ARISTADA INJ INITIO	2	
<i>chlorpromazine hcl tab 10 mg</i>	1	
<i>chlorpromazine hcl tab 25 mg</i>	1	
<i>chlorpromazine hcl tab 50 mg</i>	1	
<i>chlorpromazine hcl tab 100 mg</i>	1	
<i>chlorpromazine hcl tab 200 mg</i>	1	
<i>clozapine orally disintegrating tab 12.5 mg</i>	1	
<i>clozapine orally disintegrating tab 25 mg</i>	1	
<i>clozapine orally disintegrating tab 100 mg</i>	1	
<i>clozapine orally disintegrating tab 150 mg</i>	1	
<i>clozapine orally disintegrating tab 200 mg</i>	1	
<i>clozapine tab 25 mg</i>	1	
<i>clozapine tab 50 mg</i>	1	
<i>clozapine tab 100 mg</i>	1	
<i>clozapine tab 200 mg</i>	1	
<i>fluphenazine hcl elixir 2.5 mg/5ml</i>	1	
<i>fluphenazine hcl oral conc 5 mg/ml</i>	1	
<i>fluphenazine hcl tab 1 mg</i>	1	
<i>fluphenazine hcl tab 2.5 mg</i>	1	
<i>fluphenazine hcl tab 5 mg</i>	1	
<i>fluphenazine hcl tab 10 mg</i>	1	
<i>haloperidol decanoate im soln 50 mg/ml</i>	1	
<i>haloperidol decanoate im soln 100 mg/ml</i>	1	
<i>haloperidol lactate oral conc 2 mg/ml</i>	1	
<i>haloperidol tab 0.5 mg</i>	1	
<i>haloperidol tab 1 mg</i>	1	
<i>haloperidol tab 2 mg</i>	1	
<i>haloperidol tab 5 mg</i>	1	
<i>haloperidol tab 10 mg</i>	1	
<i>haloperidol tab 20 mg</i>	1	
LATUDA TAB 20MG	2	ST; PA**
LATUDA TAB 40MG	2	ST; PA**
LATUDA TAB 60MG	2	ST; PA**
LATUDA TAB 80MG	2	ST; PA**
LATUDA TAB 120MG	2	ST; PA**
<i>loxapine succinate cap 5 mg</i>	1	
<i>loxapine succinate cap 10 mg</i>	1	
<i>loxapine succinate cap 25 mg</i>	1	
<i>loxapine succinate cap 50 mg</i>	1	
NUPLAZID TAB 17MG	3	PA
<i>olanzapine orally disintegrating tab 5 mg</i>	1	
<i>olanzapine orally disintegrating tab 10 mg</i>	1	
<i>olanzapine orally disintegrating tab 15 mg</i>	1	
<i>olanzapine orally disintegrating tab 20 mg</i>	1	
<i>olanzapine tab 2.5 mg</i>	1	
<i>olanzapine tab 5 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>olanzapine tab 7.5 mg</i>	1	
<i>olanzapine tab 10 mg</i>	1	
<i>olanzapine tab 15 mg</i>	1	
<i>olanzapine tab 20 mg</i>	1	
<i>paliperidone tab er 24hr 1.5 mg</i>	1	
<i>paliperidone tab er 24hr 3 mg</i>	1	
<i>paliperidone tab er 24hr 6 mg</i>	1	
<i>paliperidone tab er 24hr 9 mg</i>	1	
<i>perphenazine tab 2 mg</i>	1	
<i>perphenazine tab 4 mg</i>	1	
<i>perphenazine tab 8 mg</i>	1	
<i>perphenazine tab 16 mg</i>	1	
<i>quetiapine fumarate tab 25 mg</i>	1	
<i>quetiapine fumarate tab 50 mg</i>	1	
<i>quetiapine fumarate tab 100 mg</i>	1	
<i>quetiapine fumarate tab 200 mg</i>	1	
<i>quetiapine fumarate tab 300 mg</i>	1	
<i>quetiapine fumarate tab 400 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 50 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 150 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 200 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 300 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 400 mg</i>	1	
REXULTITAB 0.5MG	3	ST; PA**
REXULTITAB 0.25MG	3	ST; PA**
REXULTITAB 1MG	3	ST; PA**
REXULTITAB 2MG	3	ST; PA**
REXULTITAB 3MG	3	ST; PA**
REXULTITAB 4MG	3	ST; PA**
<i>risperidone orally disintegrating tab 0.5 mg</i>	1	
<i>risperidone orally disintegrating tab 0.25 mg</i>	1	
<i>risperidone orally disintegrating tab 1 mg</i>	1	
<i>risperidone orally disintegrating tab 2 mg</i>	1	
<i>risperidone orally disintegrating tab 3 mg</i>	1	
<i>risperidone orally disintegrating tab 4 mg</i>	1	
<i>risperidone soln 1 mg/ml</i>	1	
<i>risperidone tab 0.5 mg</i>	1	
<i>risperidone tab 0.25 mg</i>	1	
<i>risperidone tab 1 mg</i>	1	
<i>risperidone tab 2 mg</i>	1	
<i>risperidone tab 3 mg</i>	1	
<i>risperidone tab 4 mg</i>	1	
SAPHRIS SUB 2.5MG	3	ST; PA**
SAPHRIS SUB 5MG	3	ST; PA**
SAPHRIS SUB 10MG	3	ST; PA**

Drug Name	Drug Tier	Requirements/Limits
<i>thioridazine hcl tab 10 mg</i>	1	
<i>thioridazine hcl tab 25 mg</i>	1	
<i>thioridazine hcl tab 50 mg</i>	1	
<i>thioridazine hcl tab 100 mg</i>	1	
<i>thiothixene cap 1 mg</i>	1	
<i>thiothixene cap 2 mg</i>	1	
<i>thiothixene cap 5 mg</i>	1	
<i>thiothixene cap 10 mg</i>	1	
<i>trifluoperazine hcl tab 1 mg (base equivalent)</i>	1	
<i>trifluoperazine hcl tab 2 mg (base equivalent)</i>	1	
<i>trifluoperazine hcl tab 5 mg (base equivalent)</i>	1	
<i>trifluoperazine hcl tab 10 mg (base equivalent)</i>	1	
<i>ziprasidone hcl cap 20 mg</i>	1	
<i>ziprasidone hcl cap 40 mg</i>	1	
<i>ziprasidone hcl cap 60 mg</i>	1	
<i>ziprasidone hcl cap 80 mg</i>	1	

ATTENTION DEFICIT HYPERACTIVITY DISORDERS

<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	1	QL (90 caps / 25 days)
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	1	QL (90 caps / 25 days)
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	1	QL (30 caps / 25 days)
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	1	QL (30 caps / 25 days)
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	1	QL (30 caps / 25 days)
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	1	QL (30 caps / 25 days)
<i>amphetamine-dextroamphetamine tab 5 mg</i>	1	QL (90 tabs / 25 days)
<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	1	QL (90 tabs / 25 days)
<i>amphetamine-dextroamphetamine tab 10 mg</i>	1	QL (90 tabs / 25 days)
<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	1	QL (90 tabs / 25 days)
<i>amphetamine-dextroamphetamine tab 15 mg</i>	1	QL (60 tabs / 25 days)
<i>amphetamine-dextroamphetamine tab 20 mg</i>	1	QL (60 tabs / 25 days)
<i>amphetamine-dextroamphetamine tab 30 mg</i>	1	QL (30 tabs / 25 days)

Drug Name	Drug Tier	Requirements/Limits
<i>atomoxetine hcl cap 10 mg (base equiv)</i>	1	
<i>atomoxetine hcl cap 18 mg (base equiv)</i>	1	
<i>atomoxetine hcl cap 25 mg (base equiv)</i>	1	
<i>atomoxetine hcl cap 40 mg (base equiv)</i>	1	
<i>atomoxetine hcl cap 60 mg (base equiv)</i>	1	
<i>atomoxetine hcl cap 80 mg (base equiv)</i>	1	
<i>atomoxetine hcl cap 100 mg (base equiv)</i>	1	
<i>dexmethylphenidate hcl cap er 24 hr 5 mg</i>	1	QL (60 caps / 25 days)
<i>dexmethylphenidate hcl cap er 24 hr 10 mg</i>	1	QL (60 caps / 25 days)
<i>dexmethylphenidate hcl cap er 24 hr 15 mg</i>	1	QL (60 caps / 25 days)
<i>dexmethylphenidate hcl cap er 24 hr 20 mg</i>	1	QL (60 caps / 25 days)
<i>dexmethylphenidate hcl cap er 24 hr 25 mg</i>	1	QL (30 caps / 25 days)
<i>dexmethylphenidate hcl cap er 24 hr 30 mg</i>	1	QL (30 caps / 25 days)
<i>dexmethylphenidate hcl cap er 24 hr 35 mg</i>	1	QL (30 caps / 25 days)
<i>dexmethylphenidate hcl cap er 24 hr 40 mg</i>	1	QL (30 caps / 25 days)
<i>dexmethylphenidate hcl tab 2.5 mg</i>	1	QL (120 tabs / 25 days)
<i>dexmethylphenidate hcl tab 5 mg</i>	1	QL (120 tabs / 25 days)
<i>dexmethylphenidate hcl tab 10 mg</i>	1	QL (60 tabs / 25 days)
<i>dextroamphetamine sulfate cap er 24hr 5 mg</i>	1	QL (120 caps / 25 days)
<i>dextroamphetamine sulfate cap er 24hr 10 mg</i>	1	QL (120 caps / 25 days)
<i>dextroamphetamine sulfate cap er 24hr 15 mg</i>	1	QL (60 caps / 25 days)
<i>dextroamphetamine sulfate oral solution 5 mg/5ml</i>	1	QL (1,200 mL / 25 days)
<i>dextroamphetamine sulfate tab 5 mg</i>	1	QL (120 tabs / 25 days)
<i>dextroamphetamine sulfate tab 10 mg</i>	1	QL (120 tabs / 25 days)
<i>guanfacine hcl tab er 24hr 1 mg (base equiv)</i>	1	ST; PA**
<i>guanfacine hcl tab er 24hr 2 mg (base equiv)</i>	1	ST; PA**
<i>guanfacine hcl tab er 24hr 3 mg (base equiv)</i>	1	ST; PA**
<i>guanfacine hcl tab er 24hr 4 mg (base equiv)</i>	1	ST; PA**
<i>methamphetamine hcl tab 5 mg</i>	1	QL (150 tabs / 25 days)
<i>methylphenidate hcl cap er 10 mg (cd)</i>	1	QL (60 caps / 25 days)
<i>methylphenidate hcl cap er 20 mg (cd)</i>	1	QL (60 caps / 25 days)

Drug Name	Drug Tier	Requirements/Limits
<i>methylphenidate hcl cap er 24hr 20 mg (la)</i>	1	QL (60 caps / 25 days)
<i>methylphenidate hcl cap er 24hr 30 mg (la)</i>	1	QL (60 caps / 25 days)
<i>methylphenidate hcl cap er 24hr 40 mg (la)</i>	1	QL (30 caps / 25 days)
<i>methylphenidate hcl cap er 24hr 60 mg (la)</i>	1	QL (30 caps / 25 days)
<i>methylphenidate hcl cap er 30 mg (cd)</i>	1	QL (60 caps / 25 days)
<i>methylphenidate hcl cap er 40 mg (cd)</i>	1	QL (30 caps / 25 days)
<i>methylphenidate hcl cap er 50 mg (cd)</i>	1	QL (30 caps / 25 days)
<i>methylphenidate hcl cap er 60 mg (cd)</i>	1	QL (30 caps / 25 days)
<i>methylphenidate hcl chew tab 2.5 mg</i>	1	QL (180 chew tabs / 25 days)
<i>methylphenidate hcl chew tab 5 mg</i>	1	QL (180 chew tabs / 25 days)
<i>methylphenidate hcl chew tab 10 mg</i>	1	QL (180 chew tabs / 25 days)
<i>methylphenidate hcl soln 5 mg/5ml</i>	1	QL (1800 mL / 25 days)
<i>methylphenidate hcl soln 10 mg/5ml</i>	1	QL (900 mL / 25 days)
<i>methylphenidate hcl tab 5 mg</i>	1	QL (180 tabs / 25 days)
<i>methylphenidate hcl tab 10 mg</i>	1	QL (180 tabs / 25 days)
<i>methylphenidate hcl tab 20 mg</i>	1	QL (90 tabs / 25 days)
<i>methylphenidate hcl tab er 10 mg</i>	1	QL (90 tabs / 25 days)
<i>methylphenidate hcl tab er 20 mg</i>	1	QL (90 tabs / 25 days)
<i>methylphenidate hcl tab er 24hr 18 mg</i>	1	QL (60 tabs / 25 days)
<i>methylphenidate hcl tab er 24hr 27 mg</i>	1	QL (60 tabs / 25 days)
<i>methylphenidate hcl tab er 24hr 36 mg</i>	1	QL (60 tabs / 25 days)
<i>methylphenidate hcl tab er 24hr 54 mg</i>	1	QL (30 tabs / 25 days)
<i>methylphenidate hcl tab er osmotic release (osm) 18 mg</i>	1	QL (60 tabs / 25 days)
<i>methylphenidate hcl tab er osmotic release (osm) 27 mg</i>	1	QL (60 tabs / 25 days)
<i>methylphenidate hcl tab er osmotic release (osm) 36 mg</i>	1	QL (60 tabs / 25 days)
<i>methylphenidate hcl tab er osmotic release (osm) 54 mg</i>	1	QL (30 tabs / 25 days)
VYVANSE CAP 10MG	2	
VYVANSE CAP 20MG	2	
VYVANSE CAP 30MG	2	
VYVANSE CAP 40MG	2	
VYVANSE CAP 50MG	2	
VYVANSE CAP 60MG	2	
VYVANSE CAP 70MG	2	
VYVANSE CHW 10MG	2	
VYVANSE CHW 20MG	2	
VYVANSE CHW 30MG	2	

Drug Name	Drug Tier	Requirements/Limits
VYVANSE CHW 40MG	2	
VYVANSE CHW 50MG	2	
VYVANSE CHW 60MG	2	
<i>zenzedi tab 2.5mg</i>	1	QL (120 tabs / 25 days)
<i>zenzedi tab 7.5mg</i>	1	QL (120 tabs / 25 days)
<i>zenzedi tab 15mg</i>	1	QL (60 tabs / 25 days)
<i>zenzedi tab 20mg</i>	1	QL (60 tabs / 25 days)
<i>zenzedi tab 30mg</i>	1	QL (30 tabs / 25 days)

HYPNOTICS

BELSOMRA TAB 5MG	2	ST; PA**
BELSOMRA TAB 10MG	2	ST; PA**
BELSOMRA TAB 15MG	2	ST; PA**
BELSOMRA TAB 20MG	2	ST; PA**
<i>doxylamine succinate tab 25mg</i>	1	OTC
<i>eszopiclone tab 1 mg</i>	1	QL (15 tabs / 25 days)
<i>eszopiclone tab 2 mg</i>	1	QL (15 tabs / 25 days)
<i>eszopiclone tab 3 mg</i>	1	QL (15 tabs / 25 days)
<i>ramelteon tab 8 mg</i>	1	QL (15 tabs / 25 days)
ROZEREM TAB 8MG	3	QL (15 tabs / 25 days), ST; PA**
SILENOR TAB 3MG	2	QL (30 tabs / 25 days), ST; QL applies to members age 65 and older; PA**
SILENOR TAB 6MG	2	QL (30 tabs / 25 days), ST; QL applies to members age 65 and older; PA**
<i>temazepam cap 7.5 mg</i>	1	QL (15 caps / 25 days)
<i>temazepam cap 15 mg</i>	1	QL (15 caps / 25 days)
<i>temazepam cap 22.5 mg</i>	1	QL (15 caps / 25 days)
<i>temazepam cap 30 mg</i>	1	QL (15 caps / 25 days)
<i>zaleplon cap 5 mg</i>	1	QL (15 caps / 25 days)
<i>zaleplon cap 10 mg</i>	1	QL (15 caps / 25 days)
<i>zolpidem tartrate tab 5 mg</i>	1	QL (15 tabs / 25 days)
<i>zolpidem tartrate tab 10 mg</i>	1	QL (15 tabs / 25 days)
<i>zolpidem tartrate tab er 6.25 mg</i>	1	QL (15 tabs / 25 days)
<i>zolpidem tartrate tab er 12.5 mg</i>	1	QL (15 tabs / 25 days)

MIGRAINES

<i>almotriptan malate tab 6.25 mg</i>	1	QL (12 tabs / 25 days)
<i>almotriptan malate tab 12.5 mg</i>	1	QL (12 tabs / 25 days)
<i>dihydroergotamine mesylate inj 1 mg/ml</i>	1	
<i>dihydroergotamine mesylate nasal spray 4 mg/ml</i>	1	QL (8 units / 25 days)
<i>eletriptan hydrobromide tab 20 mg (base equivalent)</i>	1	QL (12 tabs / 25 days)

Drug Name	Drug Tier	Requirements/Limits
<i>eletriptan hydrobromide tab 40 mg (base equivalent)</i>	1	QL (12 tabs / 25 days)
<i>ergotamine w/ caffeine tab 1-100 mg</i>	1	
<i>frovatriptan succinate tab 2.5 mg (base equivalent)</i>	1	QL (18 tabs / 25 days)
<i>naratriptan hcl tab 1 mg (base equiv)</i>	1	QL (12 tabs / 25 days)
<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	1	QL (12 tabs / 25 days)
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i>	1	QL (18 tabs / 25 days)
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i>	1	QL (18 tabs / 25 days)
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	1	QL (18 tabs / 25 days)
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	1	QL (18 tabs / 25 days)
<i>sumatriptan nasal spray 5 mg/act</i>	1	QL (24 sprays / 25 days)
<i>sumatriptan nasal spray 20 mg/act</i>	1	QL (12 sprays / 25 days)
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	1	QL (12 vials / 25 days)
<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml</i>	1	QL (18 syringes / 25 days)
<i>sumatriptan succinate solution auto-injector 6 mg/0.5ml</i>	1	QL (12 units / 25 days)
<i>sumatriptan succinate solution cartridge 4 mg/0.5ml</i>	1	QL (18 syringes / 25 days)
<i>sumatriptan succinate solution cartridge 6 mg/0.5ml</i>	1	QL (12 units / 25 days)
<i>sumatriptan succinate solution prefilled syringe 6 mg/0.5ml</i>	1	QL (12 units / 25 days)
<i>sumatriptan succinate tab 25 mg</i>	1	QL (12 tabs / 25 days)
<i>sumatriptan succinate tab 50 mg</i>	1	QL (12 tabs / 25 days)
<i>sumatriptan succinate tab 100 mg</i>	1	QL (12 tabs / 25 days)
<i>zolmitriptan orally disintegrating tab 2.5 mg</i>	1	QL (12 tabs / 25 days)
<i>zolmitriptan orally disintegrating tab 5 mg</i>	1	QL (12 tabs / 25 days)
<i>zolmitriptan tab 2.5 mg</i>	1	QL (12 tabs / 25 days)
<i>zolmitriptan tab 5 mg</i>	1	QL (12 tabs / 25 days)
ZOMIG SPR 2.5MG	3	QL (12 sprays / 25 days)
ZOMIG SPR 5MG	3	QL (12 sprays / 25 days)

MISCELLANEOUS

<i>buspirone hcl tab 5 mg</i>	1	
<i>buspirone hcl tab 7.5 mg</i>	1	
<i>buspirone hcl tab 10 mg</i>	1	
<i>buspirone hcl tab 15 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>buspirone hcl tab 30 mg</i>	1	
<i>clomipramine hcl cap 25 mg</i>	1	QL (150 caps / 25 days); QL applies to members age 65 and older
<i>clomipramine hcl cap 50 mg</i>	1	QL (150 caps / 25 days); QL applies to members age 65 and older
<i>clomipramine hcl cap 75 mg</i>	1	QL (90 caps / 25 days); QL applies to members age 65 and older
<i>fluvoxamine maleate cap er 24hr 100 mg</i>	1	
<i>fluvoxamine maleate cap er 24hr 150 mg</i>	1	
<i>fluvoxamine maleate tab 25 mg</i>	1	
<i>fluvoxamine maleate tab 50 mg</i>	1	
<i>fluvoxamine maleate tab 100 mg</i>	1	
GUANIDINE TAB 125MG	3	
<i>lithium carbonate cap 150 mg</i>	1	
<i>lithium carbonate cap 300 mg</i>	1	
<i>lithium carbonate cap 600 mg</i>	1	
<i>lithium carbonate tab 300 mg</i>	1	
<i>lithium carbonate tab er 300 mg</i>	1	
<i>lithium carbonate tab er 450 mg</i>	1	
LITHIUM SOL 8MEQ/5ML	3	
NUDEXTA CAP 20-10MG	2	PA
<i>pimozide tab 1 mg</i>	1	
<i>pimozide tab 2 mg</i>	1	
<i>pyridostigmine bromide syrup 60 mg/5ml</i>	1	
<i>pyridostigmine bromide tab 60 mg</i>	1	
<i>pyridostigmine bromide tab er 180 mg</i>	1	
<i>riluzole tab 50 mg</i>	1	
SAVELLA MIS TITR PAK	3	ST; PA**
SAVELLA TAB 12.5MG	3	ST; PA**
SAVELLA TAB 25MG	3	ST; PA**
SAVELLA TAB 50MG	3	ST; PA**
SAVELLA TAB 100MG	3	ST; PA**
<i>tetrabenazine tab 12.5 mg</i>	3	QL (240 tabs / 30 days), PA
<i>tetrabenazine tab 25 mg</i>	3	QL (120 tabs / 30 days), PA
MULTIPLE SCLEROSIS AGENTS		
AUBAGIO TAB 7MG	3	QL (30 tabs / 30 days), PA
AUBAGIO TAB 14MG	3	QL (30 tabs / 30 days), PA

Drug Name	Drug Tier	Requirements/Limits
AVONEX KIT 30MCG	3	QL (4 injections / 28 days), PA, ST
AVONEX PEN KIT 30MCG	3	QL (4 injections / 28 days), PA, ST
AVONEX PREFL KIT 30MCG	3	QL (4 injections / 28 days), PA, ST
BETASERON INJ 0.3MG	3	QL (14 injections / 28 days), PA
COPAXONE INJ 20MG/ML	3	QL (30 injections / 30 days), PA
COPAXONE INJ 40MG/ML	3	QL (12 syringes / 28 days), PA
<i>dalfampridine tab er 12hr 10 mg</i>	3	QL (60 tabs / 30 days), PA
GILENYA CAP 0.5MG	3	QL (30 caps / 30 days), PA
<i>glatiramer acetate soln prefilled syringe 20 mg/ml</i>	2	QL (30 injections / 30 days), PA
<i>glatiramer acetate soln prefilled syringe 40 mg/ml</i>	2	QL (12 syringes / 28 days), PA
PLEGRIDY INJ	3	QL (1 carton / 28 days), PA, ST
PLEGRIDY INJ PEN	3	QL (1 carton / 28 days), PA, ST
PLEGRIDY INJ STARTER	3	QL (1 kit / 28 days), PA, ST
PLEGRIDY PEN INJ STARTER	3	QL (1 pack / 28 days), PA, ST
REBIF INJ 22/0.5	3	QL (12 syringes / 28 days), PA
REBIF INJ 44/0.5	3	QL (12 syringes / 28 days), PA
REBIF REBIDO INJ 22/0.5	3	QL (12 syringes / 28 days), PA
REBIF REBIDO INJ 44/0.5	3	QL (12 syringes / 28 days), PA
REBIF REBIDO INJ TITRATN	3	QL (1 box / 28 days), PA
REBIF TITRTN INJ PACK	3	QL (1 box / 28 days), PA
TECFIDERA CAP 120MG	3	QL (14 caps / 28 days), PA
TECFIDERA CAP 240MG	3	QL (60 caps / 30 days), PA
TECFIDERA MIS STARTER	3	QL (1 kit / 30 days), PA
TYSABRI INJ 300/15ML	3	QL (1 vial / 28 days), PA

MUSCULOSKELETAL THERAPY AGENTS

<i>baclofen tab 5 mg</i>	1	
<i>baclofen tab 10 mg</i>	1	
<i>baclofen tab 20 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>carisoprodol tab 250 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>carisoprodol tab 350 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>chlorzoxazone tab 500 mg</i>	1	
<i>cyclobenzaprine hcl tab 5 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>cyclobenzaprine hcl tab 7.5 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>cyclobenzaprine hcl tab 10 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>dantrolene sodium cap 25 mg</i>	1	
<i>dantrolene sodium cap 50 mg</i>	1	
<i>dantrolene sodium cap 100 mg</i>	1	
<i>metaxalone tab 400 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>metaxalone tab 800 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>methocarbamol tab 500 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>methocarbamol tab 750 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>orphenadrine citrate inj 30 mg/ml</i>	1	
<i>orphenadrine citrate tab er 12hr 100 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>tizanidine hcl tab 2 mg (base equivalent)</i>	1	
<i>tizanidine hcl tab 4 mg (base equivalent)</i>	1	

NARCOLEPSY/CATAPLEXY

Drug Name	Drug Tier	Requirements/Limits
<i>armodafinil tab 50 mg</i>	1	PA
<i>armodafinil tab 150 mg</i>	1	PA
<i>armodafinil tab 200 mg</i>	1	PA
<i>armodafinil tab 250 mg</i>	1	PA
<i>modafinil tab 100 mg</i>	1	PA
<i>modafinil tab 200 mg</i>	1	PA
XYREM SOL 500MG/ML	3	PA

PSYCHOTHERAPEUTIC-MISC

<i>acamprosate calcium tab delayed release 333 mg</i>	1	PA
CHANTIX PAK 0.5& 1MG	0	\$0 limited to 2 treatment cycles/year
CHANTIX PAK 1MG	0	\$0 limited to 2 treatment cycles/year
CHANTIX TAB 0.5MG	0	\$0 limited to 2 treatment cycles/year
CHANTIX TAB 1MG	0	\$0 limited to 2 treatment cycles/year
<i>disulfiram tab 250 mg</i>	1	
<i>disulfiram tab 500 mg</i>	1	
<i>naloxone hcl inj 0.4 mg/ml</i>	1	
<i>naloxone hcl inj 4 mg/10ml</i>	1	
<i>naloxone hcl soln cartridge 0.4 mg/ml</i>	1	
<i>naloxone hcl soln prefilled syringe 2 mg/2ml</i>	1	
<i>naltrexone hcl tab 50 mg</i>	0	\$0 copay
NARCAN SPR	2	
<i>nicorelief gum 4mg mint</i>	0	OTC; \$0 limited to 2 treatment cycles/year
<i>nicotine dis 7mg/24hr</i>	0	OTC; \$0 limited to 2 treatment cycles/year
<i>nicotine pol loz 4mg mint</i>	0	OTC; \$0 limited to 2 treatment cycles/year
<i>nicotine polacrilex gum 2 mg</i>	0	OTC; \$0 limited to 2 treatment cycles/year
<i>nicotine polacrilex gum 4 mg</i>	0	OTC; \$0 limited to 2 treatment cycles/year
<i>nicotine polacrilex lozenge 2 mg</i>	0	OTC; \$0 limited to 2 treatment cycles/year
<i>nicotine td patch 24hr 7 mg/24hr</i>	0	OTC; \$0 limited to 2 treatment cycles/year
<i>nicotine td patch 24hr 14 mg/24hr</i>	0	OTC; \$0 limited to 2 treatment cycles/year
<i>nicotine td patch 24hr 21 mg/24hr</i>	0	OTC; \$0 limited to 2 treatment cycles/year

Drug Name	Drug Tier	Requirements/Limits
NICOTROL INH	0	QL (max 168 days / year); \$0 limited to 2 treatment cycles/year
NICOTROL NS SPR 10MG/ML	0	QL (max 168 days / year); \$0 limited to 2 treatment cycles/year
<i>sm nicotine dis 7mg/24hr</i>	0	OTC; \$0 limited to 2 treatment cycles/year
<i>sm nicotine dis 14mg/24h</i>	0	OTC; \$0 limited to 2 treatment cycles/year
<i>sm nicotine dis 21mg</i>	0	OTC; \$0 limited to 2 treatment cycles/year

ENDOCRINE AND METABOLIC

ANDROGENS

INTRAROSA SUP 6.5MG	3	
<i>methyltestosterone cap 10 mg</i>	1	PA
<i>testosterone cypionate im inj in oil 100 mg/ml</i>	1	PA
<i>testosterone cypionate im inj in oil 200 mg/ml</i>	1	PA
<i>testosterone enanthate im inj in oil 200 mg/ml</i>	1	PA
<i>testosterone td gel 10mg/act (2%)</i>	1	PA
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	1	PA

ANTIDIABETICS, ALPHA-GLUCOSIDASE INHIBITORS^

<i>acarbose tab 25 mg</i>	1	
<i>acarbose tab 50 mg</i>	1	
<i>acarbose tab 100 mg</i>	1	
<i>miglitol tab 25 mg</i>	1	
<i>miglitol tab 50 mg</i>	1	
<i>miglitol tab 100 mg</i>	1	

ANTIDIABETICS, AMYLIN ANALOGS^

SYMLINPEN 60 INJ 1000MCG	3	ST; PA**
SYMLINPEN 120 INJ 1000MCG	3	ST; PA**

ANTIDIABETICS, BIGUANIDE/ SULFONYLUREA COMBINATIONS^

<i>glipizide-metformin hcl tab 2.5-250 mg</i>	1	
<i>glipizide-metformin hcl tab 2.5-500 mg</i>	1	
<i>glipizide-metformin hcl tab 5-500 mg</i>	1	
<i>glyburide-metformin tab 1.25-250 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>glyburide-metformin tab 2.5-500 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older

Drug Name	Drug Tier	Requirements/Limits
<i>glyburide-metformin tab 5-500 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
ANTIDIABETICS, BIGUANIDE^		
<i>metformin hcl tab 500 mg</i>	1	
<i>metformin hcl tab 850 mg</i>	1	
<i>metformin hcl tab 1000 mg</i>	1	
<i>metformin hcl tab er 24hr 500 mg</i>	1	
<i>metformin hcl tab er 24hr 750 mg</i>	1	
ANTIDIABETICS, DIPEPTIDYL PEPTIDASE-4 INHIBITORS^		
<i>alogliptin benzoate tab 6.25 mg (base equiv)</i>	1	
<i>alogliptin benzoate tab 12.5 mg (base equiv)</i>	1	
<i>alogliptin benzoate tab 25 mg (base equiv)</i>	1	
JANUVIA TAB 25MG	2	ST; PA**
JANUVIA TAB 50MG	2	ST; PA**
JANUVIA TAB 100MG	2	ST; PA**
TRADJENTA TAB 5MG	2	ST; PA**
ANTIDIABETICS, DOPAMINE RECEPTOR AGONISTS^		
CYCLOSET TAB 0.8MG	3	
ANTIDIABETICS, DPP-4 INHIBITOR COMBINATIONS^		
JANUMET TAB 50-500MG	2	ST; PA**
JANUMET TAB 50-1000	2	ST; PA**
JANUMET XR TAB 50-500MG	2	ST; PA**
JANUMET XR TAB 50-1000	2	ST; PA**
JANUMET XR TAB 100-1000	2	ST; PA**
JENTADUETO TAB XR	3	ST; PA**
ANTIDIABETICS, INCRETIN MIMETIC AGENTS^		
OZEMPIC INJ 2/1.5ML	2	ST; PA**
TRULICITY INJ 0.75/0.5	2	ST; PA**
TRULICITY INJ 1.5/0.5	2	ST; PA**
VICTOZA INJ 18MG/3ML	2	ST; PA**
ANTIDIABETICS, INCRETIN MIMETIC COMBINATION AGENTS^		
SOLIQUA INJ 100/33	2	ST; PA**
XULTOPHY INJ 100/3.6	3	ST; PA**
ANTIDIABETICS, INSULIN SENSITIZER/BIGUANIDE COMBINATION^		
<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i>	1	
<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>	1	
ANTIDIABETICS, INSULIN SENSITIZER/SULFONYLUREA COMBINATION^		

Drug Name	Drug Tier	Requirements/Limits
<i>pioglitazone hcl-glimepiride tab 30-2 mg</i>	1	
<i>pioglitazone hcl-glimepiride tab 30-4 mg</i>	1	
ANTIDIABETICS, INSULIN SENSITIZER^		
<i>pioglitazone hcl tab 15 mg (base equiv)</i>	1	
<i>pioglitazone hcl tab 30 mg (base equiv)</i>	1	
<i>pioglitazone hcl tab 45 mg (base equiv)</i>	1	
ANTIDIABETICS, INSULIN^		
BASAGLAR KWIKPEN	2	
FIASP FLEX INJ TOUCH	2	
FIASP INJ 100/ML	2	
HUMULIN INJ 70/30	3	OTC
HUMULIN INJ 70/30KWP	3	OTC
HUMULIN N INJ U-100	3	OTC
HUMULIN N INJ U-100KWP	3	OTC
HUMULIN R INJ U-100	3	OTC
HUMULIN R INJ U-500	2	
LEVEMIR INJ	2	
LEVEMIR INJ FLEXTouc	2	
NOVOLIN INJ 70/30	2	OTC; RELION not covered
NOVOLIN INJ FLEXPEN	2	OTC; RELION not covered
NOVOLIN N INJ U-100	2	OTC; RELION not covered
NOVOLIN R INJ U-100	2	OTC; RELION not covered
NOVOLOG INJ 100/ML	2	
NOVOLOG INJ FLEXPEN	2	
NOVOLOG INJ PENFILL	2	
NOVOLOG MIX INJ 70/30	2	
NOVOLOG MIX INJ FLEXPEN	2	
TRESIBA FLEX INJ 100UNIT	2	
TRESIBA FLEX INJ 200UNIT	2	
TRESIBA INJ 100UNIT	2	
ANTIDIABETICS, MEGLITINIDE/BIGUANIDE COMBINATION^		
<i>repaglinide-metformin hcl tab 1-500 mg</i>	1	
<i>repaglinide-metformin hcl tab 2-500 mg</i>	1	
ANTIDIABETICS, MEGLITINIDE^		
<i>nateglinide tab 60 mg</i>	1	
<i>nateglinide tab 120 mg</i>	1	
<i>repaglinide tab 0.5 mg</i>	1	
<i>repaglinide tab 1 mg</i>	1	
<i>repaglinide tab 2 mg</i>	1	
ANTIDIABETICS, SODIUM-GLUC CO-TRANSPOR2 INHIB (SGLT2) COMBO^		

Drug Name	Drug Tier	Requirements/Limits
SYNJARDY TAB	2	ST; PA**
SYNJARDY TAB 5-500MG	2	ST; PA**
SYNJARDY TAB 5-1000MG	2	ST; PA**
SYNJARDY TAB 12.5-500	2	ST; PA**
SYNJARDY XR TAB	2	ST; PA**
SYNJARDY XR TAB 5-1000MG	2	ST; PA**
SYNJARDY XR TAB 10-1000	2	ST; PA**
SYNJARDY XR TAB 25-1000	2	ST; PA**
XIGDUO XR TAB 2.5-1000	2	ST; PA**
XIGDUO XR TAB 5-500MG	2	ST; PA**
XIGDUO XR TAB 5-1000MG	2	ST; PA**
XIGDUO XR TAB 10-500MG	2	ST; PA**
XIGDUO XR TAB 10-1000	2	ST; PA**

ANTIDIABETICS, SODIUM-GLUC CO-TRANSPOR2 INHIB (SGLT2)/DPP-4 INHIBITOR COMBINATIONS^

GLYXAMBI TAB 10-5 MG	2	ST; PA**
GLYXAMBI TAB 25-5 MG	2	ST; PA**
QTERN TAB 5-5MG	2	ST; PA**
QTERN TAB 10MG/5MG	2	ST; PA**

ANTIDIABETICS, SODIUM-GLUCOSE COTRANSPORTER2(SGLT2) INHIB^

FARXIGA TAB 5MG	2	ST; PA**
FARXIGA TAB 10MG	2	ST; PA**
JARDIANCE TAB 10MG	2	ST; PA**
JARDIANCE TAB 25MG	2	ST; PA**

ANTIDIABETICS, SULFONYLUREA^

<i>glimepiride tab 1 mg</i>	1	
<i>glimepiride tab 2 mg</i>	1	
<i>glimepiride tab 4 mg</i>	1	
<i>glipizide tab 5 mg</i>	1	
<i>glipizide tab 10 mg</i>	1	
<i>glipizide tab er 24hr 2.5 mg</i>	1	
<i>glipizide tab er 24hr 5 mg</i>	1	
<i>glipizide tab er 24hr 10 mg</i>	1	
<i>glyburide micronized tab 1.5 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>glyburide micronized tab 3 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>glyburide micronized tab 6 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older

Drug Name	Drug Tier	Requirements/Limits
<i>glyburide tab 1.25 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>glyburide tab 2.5 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>glyburide tab 5 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older

BISPHOSPHONATES

<i>alendronate sodium oral soln 70 mg/75ml</i>	1	
<i>alendronate sodium tab 5 mg</i>	1	
<i>alendronate sodium tab 10 mg</i>	1	
<i>alendronate sodium tab 35 mg</i>	1	
<i>alendronate sodium tab 40 mg</i>	1	
<i>alendronate sodium tab 70 mg</i>	1	
FOSAMAX + D TAB 70-2800	3	ST; PA**
FOSAMAX + D TAB 70-5600	3	ST; PA**
<i>ibandronate sodium tab 150 mg (base equivalent)</i>	1	
<i>pamidronate disodium for inj 30 mg</i>	1	
<i>pamidronate disodium for inj 90 mg</i>	1	
<i>pamidronate disodium iv soln 3 mg/ml</i>	1	
<i>pamidronate disodium iv soln 9 mg/ml</i>	1	
<i>risedronate sodium tab 5 mg</i>	1	
<i>risedronate sodium tab 30 mg</i>	1	
<i>risedronate sodium tab 35 mg</i>	1	
<i>risedronate sodium tab 150 mg</i>	1	
<i>risedronate sodium tab delayed release 35 mg</i>	1	
<i>zoledronic acid inj conc for iv infusion 4 mg/5ml</i>	3	PA
<i>zoledronic acid iv soln 5 mg/100ml</i>	3	PA

CALCIUM RECEPTOR AGONISTS

SENSIPAR TAB 30MG	3	QL (60 tabs / 30 days), PA
SENSIPAR TAB 60MG	3	QL (60 tabs / 30 days), PA
SENSIPAR TAB 90MG	3	QL (120 tabs / 30 days), PA

CHELATING AGENTS

CHEMET CAP 100MG	3	
DEPEN TITRA TAB 250MG	3	
FERRIPROX SOL 100MG/ML	3	PA

Drug Name	Drug Tier	Requirements/Limits
FERRIPROX TAB 500MG	3	PA
<i>kionex sus 15gm/60</i>	1	
<i>sodium polystyrene sulfonate oral susp 15 gm/60ml</i>	1	
<i>sodium polystyrene sulfonate rectal susp 30 gm/120ml</i>	1	
<i>trientine hcl cap 250 mg</i>	1	
CONTRACEPTIVES		
<i>altavera tab</i>	0	
<i>alyacen tab 1/35</i>	0	
<i>alyacen tab 7/7/7</i>	0	
<i>amethia tab</i>	0	
<i>amethyst tab 90-20mcg</i>	0	
ANNOVERA MIS	0	QL (1 / 300 days)
<i>apri tab</i>	0	
<i>aranelle tab</i>	0	
<i>ashlyna tab</i>	0	
<i>aviane tab</i>	0	
<i>azurette tab 28 day</i>	0	
BALCOLTRA TAB 0.1-20	0	
<i>camila tab 0.35mg</i>	0	
<i>caziant pak</i>	0	
<i>chateal tab 0.15/30</i>	0	
<i>cryselle-28 tab 28 tabs</i>	0	
<i>cyclafem tab 1/35</i>	0	
<i>cyclafem tab 7/7/7</i>	0	
<i>dasetta tab 1/35</i>	0	
<i>dasetta tab 7/7/7</i>	0	
<i>delyla tab 0.1-0.02</i>	0	
DEPO-SQ PROV INJ 104	0	QL (4 inj / 300 days)
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg</i>	0	
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i>	0	
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	0	
<i>elinest tab</i>	0	
ELLA TAB 30MG	0	
<i>emoquette tab</i>	0	
<i>enpresse-28 tab</i>	0	
<i>enskyce tab</i>	0	
<i>errin tab 0.35mg</i>	0	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50mcg</i>	0	
<i>falmina tab</i>	0	
<i>fayosim tab</i>	0	

Drug Name	Drug Tier	Requirements/Limits
<i>gianvi tab 3-0.02mg</i>	0	
<i>gildess fe tab 1.5/30</i>	0	
<i>gildess fe tab 1/20</i>	0	
<i>heather tab 0.35mg</i>	0	
<i>introvale tab</i>	0	
<i>jolessa tab</i>	0	
<i>jolivette tab 0.35mg</i>	0	
<i>junel 1.5/30 tab</i>	0	
<i>junel 1/20 tab</i>	0	
<i>junel fe tab 1.5/30</i>	0	
<i>junel fe tab 1/20</i>	0	
<i>kariva tab 28 day</i>	0	
<i>kelnor tab 1/35</i>	0	
<i>kurvelo tab 0.15/30</i>	0	
KYLEENA IUD 19.5MG	0	QL (1 / 300 days)
<i>larin tab 1.5/30</i>	0	
<i>leena tab</i>	0	
<i>lessina tab</i>	0	
<i>levonest tab</i>	0	
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	0	
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	0	
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	0	
<i>levora-28 tab 0.15/30</i>	0	
LILETTA IUD 52MG	0	QL (1 / 300 days)
LO LOESTRIN TAB 1-10-10	0	
<i>loryna tab 3-0.02mg</i>	0	
<i>low-ogestrel tab</i>	0	
<i>lutra tab</i>	0	
<i>marlissa tab 0.15/30</i>	0	
<i>medroxyprogesterone acetate im susp 150 mg/ml</i>	0	QL (4 inj / 300 days)
<i>medroxyprogesterone acetate im susp prefilled syr 150 mg/ml</i>	0	QL (4 inj / 300 days)
<i>mibelas 24 chw fe</i>	0	
<i>microgestin tab 1.5/30</i>	0	
MIRENA IUD SYSTEM	0	QL (1 / 300 days)
<i>mono-lynyah tab 0.25-35</i>	0	
<i>mononessa tab</i>	0	
<i>myzilra tab</i>	0	
NATAZIA TAB	0	
<i>necon tab 0.5/35</i>	0	
<i>necon tab 1/35</i>	0	
<i>necon tab 1/50-28</i>	0	

Drug Name	Drug Tier	Requirements/Limits
NECON TAB 10/11-28	0	
NEXPLANON IMP 68MG	0	QL (1 / 300 days)
<i>nikki tab 3-0.02mg</i>	0	
<i>nora-be tab 0.35mg</i>	0	
<i>norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i>	0	
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	0	
<i>norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</i>	0	
<i>norethindrone tab 0.35 mg</i>	0	
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	0	
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	0	
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	0	
<i>nortrel tab 0.5/35</i>	0	
<i>nortrel tab 1/35</i>	0	
<i>nortrel tab 7/7/7</i>	0	
NUVARING MIS	0	QL (13 / 300 days)
<i>ocella tab 3-0.03mg</i>	0	
<i>ogestrel tab</i>	0	
<i>orsythia tab</i>	0	
PARAGARD IUD T380A	0	QL (1 unit / 300 days)
<i>pirmella tab 1/35</i>	0	
<i>pirmella tab 7/7/7</i>	0	
<i>portia-28 tab</i>	0	
<i>previfem tab</i>	0	
<i>quasense tab</i>	0	
<i>reclipsen tab</i>	0	
<i>rivelsa tab</i>	0	
SKYLA IUD 13.5MG	0	QL (1 / 300 days)
SLYND TAB 4MG	0	
<i>sprintec 28 tab 28 day</i>	0	
<i>sronyx tab</i>	0	
<i>syeda tab 3-0.03mg</i>	0	
<i>take action tab 1.5mg</i>	0	OTC
TAYTULLA CAP 1MG/20MC	0	
<i>tilia fe tab</i>	0	
<i>tri-lynyah tab</i>	0	
<i>tri-sprintec tab</i>	0	
<i>trinessa tab</i>	0	
<i>trivora-28 tab</i>	0	
<i>velivet pak</i>	0	
<i>vestura tab 3-0.02mg</i>	0	

Drug Name	Drug Tier	Requirements/Limits
<i>viorele tab</i>	0	
<i>wera tab 0.5/35</i>	0	
<i>xulane dis 150-35</i>	0	
<i>zarah tab 3-0.03mg</i>	0	
<i>zenchent fe chw 0.4mg-35</i>	0	
<i>zenchent tab</i>	0	
<i>zovia 1/35e tab</i>	0	
ENDOMETRIOSIS		
<i>danazol cap 50 mg</i>	1	
<i>danazol cap 100 mg</i>	1	
<i>danazol cap 200 mg</i>	1	
SYNAREL SOL 2MG/ML	2	
ENZYME REPLACEMENTS		
CERDELGA CAP 84MG	3	QL (60 caps / 30 days), PA
CYSTADANE POW	3	
CYSTAGON CAP 50MG	3	PA
CYSTAGON CAP 150MG	3	PA
KUVAN POW 100MG	3	PA
KUVAN POW 500MG	3	PA
KUVAN TAB 100MG	3	PA
ORFADIN CAP 2MG	3	PA
ORFADIN CAP 5MG	3	PA
ORFADIN CAP 10MG	3	PA
ORFADIN CAP 20MG	3	PA
ORFADIN SUS 4MG/ML	3	PA
ESTROGENS		
CLIMARA PRO DIS WEEKLY	2	
DUAVEE TAB 0.45-20	2	
<i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i>	1	
<i>estradiol & norethindrone acetate tab 1-0.5 mg</i>	1	
<i>estradiol tab 0.5 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol tab 1 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol tab 2 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older

Drug Name	Drug Tier	Requirements/Limits
<i>estradiol td patch twice weekly 0.1 mg/24hr</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td patch twice weekly 0.05 mg/24hr</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td patch twice weekly 0.025 mg/24hr</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td patch twice weekly 0.075 mg/24hr</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td patch twice weekly 0.0375 mg/24hr</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td patch weekly 0.1 mg/24hr</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td patch weekly 0.05 mg/24hr</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td patch weekly 0.06 mg/24hr</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td patch weekly 0.025 mg/24hr</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td patch weekly 0.075 mg/24hr</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>estradiol vaginal cream 0.1 mg/gm</i>	1	
<i>estropipate tab 0.75 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older

Drug Name	Drug Tier	Requirements/Limits
<i>estropipate tab 1.5 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>estropipate tab 3 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>jinteli tab 1mg-5mcg</i>	1	
MENEST TAB 0.3MG	3	PA; High Risk Medications require PA for members age 70 and older
MENEST TAB 0.625MG	3	PA; High Risk Medications require PA for members age 70 and older
MENEST TAB 1.25MG	3	PA; High Risk Medications require PA for members age 70 and older
MENEST TAB 2.5MG	3	PA; High Risk Medications require PA for members age 70 and older
<i>mimvey lo tab 0.5-0.1</i>	1	
<i>mimvey tab 1-0.5mg</i>	1	
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	1	
PREMARIN TAB 0.3MG	3	PA; High Risk Medications require PA for members age 70 and older
PREMARIN TAB 0.9MG	3	PA; High Risk Medications require PA for members age 70 and older
PREMARIN TAB 0.45MG	3	PA; High Risk Medications require PA for members age 70 and older
PREMARIN TAB 0.625MG	3	PA; High Risk Medications require PA for members age 70 and older
PREMARIN TAB 1.25MG	3	PA; High Risk Medications require PA for members age 70 and older

Drug Name	Drug Tier	Requirements/Limits
PREMARIN VAG CRE 0.625MG	3	
<i>yuvaferm tab 10mcg</i>	1	
FERTILITY REGULATORS		
CHOR GONADOT INJ 10000UNT	3	PA
<i>clomiphene citrate tab 50 mg</i>	1	
<i>ganirelix acetate inj 250 mcg/0.5ml</i>	3	PA
GONAL-F INJ 450UNIT	3	QL (10 vials / 28 days), PA
GONAL-F INJ 1050UNIT	3	QL (6 vials / 28 days), PA
GONAL-F RFF INJ 75UNIT	3	QL (60 vials / 28 days), PA
GONAL-F RFF INJ 300/0.5	3	QL (15 cartridges / 28 days), PA
GONAL-F RFF INJ 450/0.75	3	QL (10 cartridges / 28 days), PA
GONAL-F RFF INJ 900/1.5	3	QL (7 cartridges / 28 days), PA
OVIDREL INJ	3	PA
GLUCOCORTICOIDS		
<i>cortisone acetate tab 25 mg</i>	1	
DEXAMETHASON CON 1MG/ML	2	
<i>dexamethasone elixir 0.5 mg/5ml</i>	1	
<i>dexamethasone soln 0.5 mg/5ml</i>	1	
<i>dexamethasone tab 0.5 mg</i>	1	
<i>dexamethasone tab 0.75 mg</i>	1	
<i>dexamethasone tab 1 mg</i>	1	
<i>dexamethasone tab 1.5 mg</i>	1	
<i>dexamethasone tab 2 mg</i>	1	
<i>dexamethasone tab 4 mg</i>	1	
<i>dexamethasone tab 6 mg</i>	1	
<i>fludrocortisone acetate tab 0.1 mg</i>	1	
<i>hydrocortisone tab 5 mg</i>	1	
<i>hydrocortisone tab 10 mg</i>	1	
<i>hydrocortisone tab 20 mg</i>	1	
MEDROL TAB 2MG	2	
<i>methylprednisolone tab 4 mg</i>	1	
<i>methylprednisolone tab 8 mg</i>	1	
<i>methylprednisolone tab 16 mg</i>	1	
<i>methylprednisolone tab 32 mg</i>	1	
<i>methylprednisolone tab therapy pack 4 mg (21)</i>	1	
<i>prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)</i>	1	
<i>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)</i>	1	
<i>prednisolone syrup 15 mg/5ml (usp solution equivalent)</i>	1	
PREDNISON CON 5MG/ML	2	
<i>prednisone oral soln 5 mg/5ml</i>	1	
<i>prednisone tab 1 mg</i>	1	
<i>prednisone tab 2.5 mg</i>	1	
<i>prednisone tab 5 mg</i>	1	
<i>prednisone tab 10 mg</i>	1	
<i>prednisone tab 20 mg</i>	1	
<i>prednisone tab 50 mg</i>	1	
<i>prednisone tab therapy pack 5 mg (21)</i>	1	
<i>prednisone tab therapy pack 5 mg (48)</i>	1	
<i>prednisone tab therapy pack 10 mg (21)</i>	1	
<i>prednisone tab therapy pack 10 mg (48)</i>	1	
GLUCOSE ELEVATING AGENTS^		
GLUCAGON KIT 1MG	2	
ORAL GLUCOSE REPLACEMENT	2	OTC
HUMAN GROWTH HORMONES		
HUMATROPE INJ 5MG	3	PA
HUMATROPE INJ 6MG	3	PA
HUMATROPE INJ 12MG	3	PA
HUMATROPE INJ 24MG	3	PA
MISCELLANEOUS		
<i>cabergoline tab 0.5 mg</i>	1	
<i>calcitonin (salmon) nasal soln 200 unit/act</i>	1	
INCRELEX INJ 40MG/4ML	3	PA
<i>octreotide acetate inj 50 mcg/ml (0.05 mg/ml)</i>	3	QL (90 ml / 30 days), PA
<i>octreotide acetate inj 100 mcg/ml (0.1 mg/ml)</i>	3	QL (90 ml / 30 days), PA
<i>octreotide acetate inj 200 mcg/ml (0.2 mg/ml)</i>	3	QL (225 ml / 30 days), PA
<i>octreotide acetate inj 500 mcg/ml (0.5 mg/ml)</i>	3	QL (90 ml / 30 days), PA
<i>octreotide acetate inj 1000 mcg/ml (1 mg/ml)</i>	3	QL (45 ml / 30 days), PA
OSPHEA TAB 60MG	2	
PROLIA SOL 60MG/ML	3	QL (60mg / 24 weeks), PA
<i>raloxifene hcl tab 60 mg</i>	1	\$0 copay for women ages 35 and older for the primary prevention of breast cancer
SAMSCA TAB 15MG	3	PA

Drug Name	Drug Tier	Requirements/Limits
SAMSCA TAB 30MG	3	PA
SOMATULINE INJ 60/0.2ML	3	QL (1 injection / 28 days), PA
SOMATULINE INJ 90/0.3ML	3	QL (1 injection / 28 days), PA
SOMATULINE INJ 120/.5ML	3	QL (1 injection / 28 days), PA
SOMAVERT INJ 10MG	3	QL (30 vials / 30 days), PA
SOMAVERT INJ 15MG	3	QL (30 vials / 30 days), PA
SOMAVERT INJ 20MG	3	QL (30 vials / 30 days), PA
SOMAVERT INJ 25MG	3	QL (30 vials / 30 days), PA
SOMAVERT INJ 30MG	3	QL (30 vials / 30 days), PA
TYMLOS INJ	3	QL (1 pen / 30 days), PA

PHOSPHATE BINDER AGENTS

<i>calcium acetate (phosphate binder) cap 667 mg (169 mg ca)</i>	1	
<i>calcium acetate (phosphate binder) tab 667 mg</i>	1	
FOSRENOL POW 750MG	3	
FOSRENOL POW 1000MG	3	
<i>lanthanum carbonate chew tab 500 mg (elemental)</i>	1	
<i>lanthanum carbonate chew tab 750 mg (elemental)</i>	1	
<i>lanthanum carbonate chew tab 1000 mg (elemental)</i>	1	
<i>sevelamer carbonate packet 0.8 gm</i>	1	
<i>sevelamer carbonate packet 2.4 gm</i>	1	
<i>sevelamer carbonate tab 800 mg</i>	1	
VELPHORO CHW 500MG	3	

PROGESTINS

CRINONE GEL 4% VAG	2	
CRINONE GEL 8% VAG	2	
LUPANETA KIT 3.75-5	3	PA
LUPANETA KIT 11.25-5	3	PA
<i>medroxyprogesterone acetate tab 2.5 mg</i>	1	
<i>medroxyprogesterone acetate tab 5 mg</i>	1	
<i>medroxyprogesterone acetate tab 10 mg</i>	1	
<i>norethindrone acetate tab 5 mg</i>	1	
<i>progesterone micronized cap 100 mg</i>	1	
<i>progesterone micronized cap 200 mg</i>	1	

THYROID AGENTS

Drug Name	Drug Tier	Requirements/Limits
<i>levothyroxine sodium tab 25 mcg</i>	1	
<i>levothyroxine sodium tab 50 mcg</i>	1	
<i>levothyroxine sodium tab 75 mcg</i>	1	
<i>levothyroxine sodium tab 88 mcg</i>	1	
<i>levothyroxine sodium tab 100 mcg</i>	1	
<i>levothyroxine sodium tab 112 mcg</i>	1	
<i>levothyroxine sodium tab 125 mcg</i>	1	
<i>levothyroxine sodium tab 137 mcg</i>	1	
<i>levothyroxine sodium tab 150 mcg</i>	1	
<i>levothyroxine sodium tab 175 mcg</i>	1	
<i>levothyroxine sodium tab 200 mcg</i>	1	
<i>levothyroxine sodium tab 300 mcg</i>	1	
<i>levoxyl tab 25mcg</i>	1	
<i>levoxyl tab 50mcg</i>	1	
<i>levoxyl tab 75mcg</i>	1	
<i>levoxyl tab 88mcg</i>	1	
<i>levoxyl tab 100mcg</i>	1	
<i>levoxyl tab 112mcg</i>	1	
<i>levoxyl tab 125mcg</i>	1	
<i>levoxyl tab 137mcg</i>	1	
<i>levoxyl tab 150mcg</i>	1	
<i>levoxyl tab 175mcg</i>	1	
<i>levoxyl tab 200mcg</i>	1	
<i>liothyronine sodium tab 5 mcg</i>	1	
<i>liothyronine sodium tab 25 mcg</i>	1	
<i>liothyronine sodium tab 50 mcg</i>	1	
<i>methimazole tab 5 mg</i>	1	
<i>methimazole tab 10 mg</i>	1	
<i>propylthiouracil tab 50 mg</i>	1	
SYNTHROID TAB 25MCG	2	
SYNTHROID TAB 50MCG	2	
SYNTHROID TAB 75MCG	2	
SYNTHROID TAB 88MCG	2	
SYNTHROID TAB 100MCG	2	
SYNTHROID TAB 112MCG	2	
SYNTHROID TAB 125MCG	2	
SYNTHROID TAB 137MCG	2	
SYNTHROID TAB 150MCG	2	
SYNTHROID TAB 175MCG	2	
SYNTHROID TAB 200MCG	2	
SYNTHROID TAB 300MCG	2	
THYROLAR-1 TAB 60MG	3	
THYROLAR-1/2 TAB 30MG	3	
THYROLAR-1/4 TAB 15MG	3	
THYROLAR-2 TAB 120MG	3	
THYROLAR-3 TAB 180MG	3	

Drug Name	Drug Tier	Requirements/Limits
<i>unithroid tab 25mcg</i>	1	
<i>unithroid tab 50mcg</i>	1	
<i>unithroid tab 75mcg</i>	1	
<i>unithroid tab 88mcg</i>	1	
<i>unithroid tab 100mcg</i>	1	
<i>unithroid tab 112mcg</i>	1	
<i>unithroid tab 125mcg</i>	1	
<i>unithroid tab 200mcg</i>	1	
<i>unithroid tab 300mcg</i>	1	

VASOPRESSINS

<i>desmopressin acetate nasal spray soln 0.01%</i>	1	
<i>desmopressin acetate nasal spray soln 0.01% (refrigerated)</i>	1	
<i>desmopressin acetate tab 0.1 mg</i>	1	
<i>desmopressin acetate tab 0.2 mg</i>	1	

GASTROINTESTINAL

ANTICHOLINERGICS

<i>CUVPOSA SOL 1MG/5ML</i>	2	
<i>dicyclomine hcl cap 10 mg</i>	1	
<i>dicyclomine hcl oral soln 10 mg/5ml</i>	1	
<i>dicyclomine hcl tab 20 mg</i>	1	
<i>ed-spaz tab 0.125mg</i>	1	
<i>hyoscyamine sulfate sl tab 0.125 mg</i>	1	
<i>hyoscyamine sulfate tab 0.125 mg</i>	1	
<i>hyoscyamine sulfate tab disint 0.125 mg</i>	1	
<i>hyoscyamine sulfate tab er 12hr 0.375 mg</i>	1	
<i>methscopolamine bromide tab 2.5 mg</i>	1	
<i>methscopolamine bromide tab 5 mg</i>	1	
<i>nulev tab 0.125mg</i>	1	
<i>oscimin sr tab 0.375mg</i>	1	
<i>oscimin sub 0.125mg</i>	1	
<i>oscimin tab 0.125mg</i>	1	
<i>symax-sl sub 0.125mg</i>	1	

ANTIEMETICS§

<i>AKYNZEO CAP 300-0.5</i>	3	QL (2 caps / 21 days)
<i>aprepitant capsule 40 mg</i>	1	QL (3 caps / 180 days)
<i>aprepitant capsule 80 mg</i>	1	QL (4 caps / 21 days)
<i>aprepitant capsule 125 mg</i>	1	QL (2 caps / 21 days)
<i>aprepitant capsule therapy pack 80 & 125 mg</i>	1	QL (2 packs / 21 days)
<i>compro sup 25mg</i>	1	
<i>dronabinol cap 2.5 mg</i>	1	QL (60 caps / 25 days)
<i>dronabinol cap 5 mg</i>	1	QL (60 caps / 25 days)
<i>dronabinol cap 10 mg</i>	1	QL (60 caps / 25 days)

Drug Name	Drug Tier	Requirements/Limits
<i>granisetron hcl tab 1 mg</i>	1	QL (12 tabs / 21 days)
<i>meclizine hcl tab 12.5 mg</i>	1	
<i>meclizine hcl tab 25 mg</i>	1	
<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i>	1	
<i>metoclopramide hcl tab 5 mg (base equivalent)</i>	1	
<i>metoclopramide hcl tab 10 mg (base equivalent)</i>	1	
<i>ondansetron hcl oral soln 4 mg/5ml</i>	1	QL (200 mL / 21 days)
<i>ondansetron hcl tab 4 mg</i>	1	QL (18 tabs / 21 days)
<i>ondansetron hcl tab 8 mg</i>	1	QL (18 tabs / 21 days)
<i>ondansetron hcl tab 24 mg</i>	1	QL (2 tabs / 21 days)
<i>ondansetron orally disintegrating tab 4 mg</i>	1	QL (18 tabs / 21 days)
<i>ondansetron orally disintegrating tab 8 mg</i>	1	QL (18 tabs / 21 days)
<i>phenadoz sup 25mg</i>	1	
<i>prochlorperazine maleate tab 5 mg (base equivalent)</i>	1	
<i>prochlorperazine maleate tab 10 mg (base equivalent)</i>	1	
<i>prochlorperazine suppos 25 mg</i>	1	
<i>promethazine hcl suppos 12.5 mg</i>	1	
<i>promethazine hcl suppos 25 mg</i>	1	
<i>promethazine hcl syrup 6.25 mg/5ml</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>promethazine hcl tab 12.5 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>promethazine hcl tab 25 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>promethazine hcl tab 50 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>promethegan sup 12.5mg</i>	1	
<i>promethegan sup 25mg</i>	1	
<i>promethegan sup 50mg</i>	1	
SANCUSO DIS 3.1MG	2	QL (2 patches / 21 days)
<i>scopolamine td patch 72hr 1 mg/3days</i>	1	
TRANSDERM-SC DIS 1.5MG	3	
<i>trimethobenzamide hcl cap 300 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
VARUBI INJ	2	
VARUBITAB 90MG	2	
H2-RECEPTOR ANTAGONISTS		
<i>cimetidine hcl soln 300 mg/5ml</i>	1	
<i>cimetidine tab 200 mg</i>	1	
<i>cimetidine tab 300 mg</i>	1	
<i>cimetidine tab 400 mg</i>	1	
<i>cimetidine tab 800 mg</i>	1	
<i>famotidine for susp 40 mg/5ml</i>	1	
<i>famotidine tab 20 mg</i>	1	
<i>famotidine tab 40 mg</i>	1	
<i>nizatidine cap 150 mg</i>	1	
<i>nizatidine cap 300 mg</i>	1	
<i>nizatidine oral soln 15 mg/ml</i>	1	
<i>ranitidine hcl cap 150 mg</i>	1	
<i>ranitidine hcl cap 300 mg</i>	1	
<i>ranitidine hcl syrup 15 mg/ml (75 mg/5ml)</i>	1	
<i>ranitidine hcl tab 150 mg</i>	1	
<i>ranitidine hcl tab 300 mg</i>	1	
INFLAMMATORY BOWEL DISEASE		
APRISO CAP 0.375GM	2	
<i>balsalazide disodium cap 750 mg</i>	1	
<i>budesonide delayed release particles cap 3 mg</i>	1	
<i>colocort ene 100mg</i>	1	
DIPENTUM CAP 250MG	3	
<i>mesalamine enema 4 gm</i>	1	
<i>mesalamine rectal enema 4 gm & cleanser wipe kit</i>	1	
<i>mesalamine suppos 1000 mg</i>	1	
<i>sulfasalazine tab 500 mg</i>	1	
<i>sulfasalazine tab delayed release 500 mg</i>	1	
IRRITABLE BOWEL SYNDROME WITH CONSTIPATION		
AMITIZA CAP 8MCG	2	
AMITIZA CAP 24MCG	2	
LINZESS CAP 72MCG	2	
LINZESS CAP 145MCG	2	
LINZESS CAP 290MCG	2	
IRRITABLE BOWEL SYNDROME WITH DIARRHEA		
<i>alosetron hcl tab 0.5 mg (base equiv)</i>	1	PA
<i>alosetron hcl tab 1 mg (base equiv)</i>	1	PA
LAXATIVES		
CLENPIQ SOL	0	\$0 copay for members age 50 through 74, otherwise not covered

Drug Name	Drug Tier	Requirements/Limits
<i>enulose sol 10gm/15</i>	1	
<i>gavilyte-c sol</i>	1	
<i>gavilyte-g sol</i>	1	
<i>gavilyte-h kit</i>	0	\$0 copay for members age 50 through 74, otherwise not covered
<i>gavilyte-n sol flav pk</i>	1	
<i>generlac sol 10gm/15</i>	1	
GOLYTELY SOL	2	
<i>lactulose solution 10 gm/15ml</i>	1	
MOVIPREP SOL	0	\$0 copay for members age 50 through 74; Tier 2 for all others
OSMOPREP TAB 1.5GM	3	
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	1	
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm</i>	1	
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	1	
PLENVU SOL	0	\$0 copay for members age 50 through 74, otherwise not covered
<i>polyethylene glycol 3350 oral powder</i>	1	OTC
PREPOPIK PAK	0	\$0 copay for members age 50 through 74, otherwise not covered
SUPREP BOWEL SOL PREP KIT	0	\$0 copay for members age 50 through 74; Tier 2 for all others
MISCELLANEOUS		
<i>anti-diarrhe tab 2mg</i>	1	OTC
CARAFATE SUS 1GM/10ML	3	
<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	1	
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	1	
<i>loperamide hcl cap 2 mg</i>	1	
<i>misoprostol tab 100 mcg</i>	1	
<i>misoprostol tab 200 mcg</i>	1	
MOTOFEN TAB 1-0.025	3	
MOVANTIK TAB 12.5MG	2	
MOVANTIK TAB 25MG	2	
SUCRAID SOL 8500/ML	3	
<i>sucralfate tab 1 gm</i>	1	
<i>ursodiol cap 300 mg</i>	1	
<i>ursodiol tab 250 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>ursodiol tab 500 mg</i>	1	
PANCREATIC ENZYMES		
CREON CAP 3000UNIT	2	
CREON CAP 6000UNIT	2	
CREON CAP 12000UNT	2	
CREON CAP 24000UNT	2	
CREON CAP 36000UNT	2	
VIOKACE TAB 10440	2	
VIOKACE TAB 20880	2	
ZENPEP CAP 3000UNIT	2	
ZENPEP CAP 5000UNIT	2	
ZENPEP CAP 10000UNT	2	
ZENPEP CAP 15000UNT	2	
ZENPEP CAP 20000UNT	2	
ZENPEP CAP 25000	2	
ZENPEP CAP 40000	2	
PROTON PUMP INHIBITORS§		
DEXILANT CAP 30MG DR	3	QL (90 caps / 365 days), ST; PA**
DEXILANT CAP 60MG DR	3	QL (90 caps / 365 days), ST; PA**
<i>esomepra mag cap 20mg dr</i>	1	OTC, QL (90 caps / 365 days)
<i>esomeprazole magnesium cap delayed release 20 mg (base eq)</i>	1	QL (90 caps / 365 days), ST
<i>esomeprazole magnesium cap delayed release 40 mg (base eq)</i>	1	QL (90 caps / 365 days), ST
<i>lansoprazole cap 15mg dr</i>	1	OTC, QL (90 caps / 365 days)
<i>lansoprazole cap delayed release 15 mg</i>	1	QL (90 caps / 365 days), ST
<i>lansoprazole cap delayed release 30 mg</i>	1	QL (90 caps / 365 days), ST
NEXIUM 24HR CAP 20MG	1	OTC, QL (90 caps / 365 days)
NEXIUM 24HR TAB 20MG	1	OTC, QL (90 tabs / 365 days)
<i>omepra/bicar cap 20-1100</i>	1	OTC, QL (90 caps / 365 days)
<i>omeprazole cap delayed release 10 mg</i>	1	QL (90 caps / 365 days), ST
<i>omeprazole cap delayed release 20 mg</i>	1	QL (90 caps / 365 days), ST
<i>omeprazole cap delayed release 40 mg</i>	1	QL (90 caps / 365 days), ST
<i>omeprazole magnesium cap dr 20.6 mg (20 mg base equiv)</i>	1	OTC, QL (90 caps / 365 days)

Drug Name	Drug Tier	Requirements/Limits
OMEPRazole TAB 20MG	1	OTC, QL (90 tabs / 365 days)
<i>pantoprazole sodium ec tab 20 mg (base equiv)</i>	1	QL (90 tabs / 365 days), ST
<i>pantoprazole sodium ec tab 40 mg (base equiv)</i>	1	QL (90 tabs / 365 days), ST
<i>rabeprazole sodium ec tab 20 mg</i>	1	QL (90 tabs / 365 days), ST

RECTAL,CORTICOSTEROIDS

<i>procto-pak cre 1%</i>	1	
<i>proctosol hc cre 2.5%</i>	1	

GENITOURINARY

BENIGN PROSTATIC HYPERPLASIA

<i>alfuzosin hcl tab er 24hr 10 mg</i>	1	
CARDURA XL TAB 4MG	3	ST; PA**
CARDURA XL TAB 8MG	3	ST; PA**
<i>dutasteride cap 0.5 mg</i>	1	
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	1	
<i>finasteride tab 5 mg</i>	1	
<i>silodosin cap 4 mg</i>	1	
<i>silodosin cap 8 mg</i>	1	
<i>tadalafil tab 2.5 mg</i>	1	QL (30 tabs / 25 days), PA
<i>tadalafil tab 5 mg</i>	1	QL (30 tabs / 25 days), PA
<i>tamsulosin hcl cap 0.4 mg</i>	1	

CONTRACEPTIVES

CONCEPTROL GEL 4%	0	OTC
ENCARE SUP 100MG	0	OTC
GYNOL II GEL 3%	0	OTC
SHUR-SEAL GEL 2%	0	OTC
TODAY SPONGE MIS	0	OTC
VCF VAGINAL AER CONTRACP	0	OTC
VCF VAGINAL MIS CONTRACP	0	OTC

MISCELLANEOUS

<i>bethanechol chloride tab 5 mg</i>	1	
<i>bethanechol chloride tab 10 mg</i>	1	
<i>bethanechol chloride tab 25 mg</i>	1	
<i>bethanechol chloride tab 50 mg</i>	1	
ELMIRON CAP 100MG	3	
<i>flavoxate hcl tab 100 mg</i>	1	
<i>phenazopyridine tab 95mg</i>	1	OTC
<i>potassium citrate tab er 5 meq (540 mg)</i>	1	
<i>potassium citrate tab er 10 meq (1080 mg)</i>	1	
<i>potassium citrate tab er 15 meq (1620 mg)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
URINARY ANTISPASMODICS		
<i>darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv)</i>	1	
<i>darifenacin hydrobromide tab er 24hr 15 mg (base equiv)</i>	1	
MYRBETRIQ TAB 25MG	3	ST; PA**
MYRBETRIQ TAB 50MG	3	ST; PA**
<i>oxybutynin chloride syrup 5 mg/5ml</i>	1	
<i>oxybutynin chloride tab 5 mg</i>	1	
<i>oxybutynin chloride tab er 24hr 5 mg</i>	1	
<i>oxybutynin chloride tab er 24hr 10 mg</i>	1	
<i>oxybutynin chloride tab er 24hr 15 mg</i>	1	
<i>solifenacin succinate tab 5 mg</i>	1	
<i>solifenacin succinate tab 10 mg</i>	1	
<i>tolterodine tartrate cap er 24hr 2 mg</i>	1	
<i>tolterodine tartrate cap er 24hr 4 mg</i>	1	
<i>tolterodine tartrate tab 1 mg</i>	1	
<i>tolterodine tartrate tab 2 mg</i>	1	
TOVIAZ TAB 4MG	2	
TOVIAZ TAB 8MG	2	
<i>trospium chloride cap er 24hr 60 mg</i>	1	
<i>trospium chloride tab 20 mg</i>	1	
VAGINAL ANTI-INFECTIVES		
CLEOCIN SUP 100MG	2	
<i>clindamycin phosphate vaginal cream 2%</i>	1	
GYNAZOLE-1 CRE 2%	3	
<i>metronidazole vaginal gel 0.75%</i>	1	
<i>miconazole 1 kit 1200-2%</i>	1	OTC
<i>miconazole 3 kit 4%</i>	1	OTC
<i>miconazole 3 kit combo pk</i>	1	OTC
<i>miconazole 3 sup 200mg</i>	1	
<i>miconazole 7 cre tube/kit</i>	1	OTC
<i>terconazole vaginal cream 0.4%</i>	1	
<i>terconazole vaginal suppos 80 mg</i>	1	
<i>vandazole gel 0.75%</i>	1	
<i>zazole cre 0.8%</i>	1	
<i>zazole sup 80mg</i>	1	
HEMATOLOGIC		
ANTICOAGULANTS		
ARGATRB/NACL INJ 50MG/50	3	
ARGATROBAN INJ 125/125	3	
<i>argatroban inj 250 mg/2.5ml (concentrate for iv infusion)</i>	1	
ARGATROBAN INJ 250/250	3	
ELIQUIS TAB 2.5MG	2	

Drug Name	Drug Tier	Requirements/Limits
ELIQUIS TAB 5MG	2	
<i>enoxaparin sodium inj 30 mg/0.3ml</i>	1	
<i>enoxaparin sodium inj 40 mg/0.4ml</i>	1	
<i>enoxaparin sodium inj 60 mg/0.6ml</i>	1	
<i>enoxaparin sodium inj 80 mg/0.8ml</i>	1	
<i>enoxaparin sodium inj 100 mg/ml</i>	1	
<i>enoxaparin sodium inj 120 mg/0.8ml</i>	1	
<i>enoxaparin sodium inj 150 mg/ml</i>	1	
<i>enoxaparin sodium inj 300 mg/3ml</i>	1	
<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml</i>	1	
<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml</i>	1	
<i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml</i>	1	
<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i>	1	
FRAGMIN INJ 2500/0.2	3	
FRAGMIN INJ 5000/0.2	3	
FRAGMIN INJ 7500/0.3	3	
FRAGMIN INJ 10000/ML	3	
FRAGMIN INJ 12500UNT	3	
FRAGMIN INJ 15000UNT	3	
FRAGMIN INJ 18000UNT	3	
FRAGMIN INJ 95000UNT	3	
<i>heparin sodium (porcine) inj 1000 unit/ml</i>	1	
<i>heparin sodium (porcine) inj 5000 unit/ml</i>	1	
<i>heparin sodium (porcine) inj 10000 unit/ml</i>	1	
<i>heparin sodium (porcine) inj 20000 unit/ml</i>	1	
<i>heparin sodium (porcine) pf inj 5000 unit/0.5ml</i>	1	
<i>jantoven tab 1mg</i>	1	
<i>jantoven tab 2.5mg</i>	1	
<i>jantoven tab 2mg</i>	1	
<i>jantoven tab 3mg</i>	1	
<i>jantoven tab 4mg</i>	1	
<i>jantoven tab 5mg</i>	1	
<i>jantoven tab 6mg</i>	1	
<i>jantoven tab 7.5mg</i>	1	
<i>jantoven tab 10mg</i>	1	
PRADAXA CAP 75MG	3	
PRADAXA CAP 110MG	3	
PRADAXA CAP 150MG	3	
<i>warfarin sodium tab 1 mg</i>	1	
<i>warfarin sodium tab 2 mg</i>	1	
<i>warfarin sodium tab 2.5 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>warfarin sodium tab 3 mg</i>	1	
<i>warfarin sodium tab 4 mg</i>	1	
<i>warfarin sodium tab 5 mg</i>	1	
<i>warfarin sodium tab 6 mg</i>	1	
<i>warfarin sodium tab 7.5 mg</i>	1	
<i>warfarin sodium tab 10 mg</i>	1	
XARELTO STAR TAB 15/20MG	2	
XARELTO TAB 2.5MG	2	
XARELTO TAB 10MG	2	
XARELTO TAB 15MG	2	
XARELTO TAB 20MG	2	

HEMATOPOIETIC GROWTH FACTORS

ARANESP INJ 10MCG	3	PA
ARANESP INJ 25MCG	3	PA
ARANESP INJ 40MCG	3	PA
ARANESP INJ 60MCG	3	PA
ARANESP INJ 100MCG	3	PA
ARANESP INJ 150MCG	3	PA
ARANESP INJ 200MCG	3	PA
ARANESP INJ 300MCG	3	PA
ARANESP INJ 500MCG	3	PA
FULPHILA INJ 6/0.6ML	3	QL (2 injections / 28 days), PA
RETACRIT INJ 2000UNIT	3	PA
RETACRIT INJ 3000UNIT	3	PA
RETACRIT INJ 4000UNIT	3	PA
RETACRIT INJ 10000UNT	3	PA
RETACRIT INJ 40000UNT	3	PA
ZARXIO INJ 300/0.5	3	PA
ZARXIO INJ 480/0.8	3	PA

MISCELLANEOUS

<i>anagrelide hcl cap 0.5 mg</i>	1	
<i>anagrelide hcl cap 1 mg</i>	1	
<i>cilostazol tab 50 mg</i>	1	
<i>cilostazol tab 100 mg</i>	1	
FIRAZYR INJ 30MG/3ML	3	PA
HEMLIBRA INJ 30MG/ML	3	PA
HEMLIBRA INJ 60/0.4	3	PA
HEMLIBRA INJ 105/0.7	3	PA
HEMLIBRA INJ 150/ML	3	PA
<i>icatibant acetate inj 30 mg/3ml (base equivalent)</i>	3	PA
<i>pentoxifylline tab er 400 mg</i>	1	
<i>tranexamic acid iv soln 1000 mg/10ml (100 mg/ml)</i>	1	
<i>tranexamic acid tab 650 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
PLATELET AGGREGATION INHIBITORS		
<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	1	
BRILINTA TAB 60MG	2	
BRILINTA TAB 90MG	2	
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	1	
<i>clopidogrel bisulfate tab 300 mg (base equiv)</i>	1	
<i>dipyridamole tab 25 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>dipyridamole tab 50 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>dipyridamole tab 75 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>prasugrel hcl tab 5 mg (base equiv)</i>	1	
<i>prasugrel hcl tab 10 mg (base equiv)</i>	1	
ZONTIVITY TAB 2.08MG	2	

IMMUNOLOGIC AGENTS

BIOLOGIC DISEASE-MODIFYING AGENTS

ACTEMRA INJ 80MG/4ML	3	QL (5 vials / 28 days), PA, ST
ACTEMRA INJ 162/0.9	3	QL (4 syringes / 28 days), PA, ST
ACTEMRA INJ 200/10ML	3	QL (4 vials / 14 days), PA, ST
ACTEMRA INJ 400/20ML	3	QL (2 vials / 14 days), PA, ST
ENBREL INJ 25/0.5ML	3	QL (8 syringes / 28 days), PA; Preferred agent for Ankylosing Spondylitis, Psoriatic Arthritis, and Rheumatoid Arthritis
ENBREL INJ 25MG	3	QL (8 syringes / 28 days), PA; Preferred agent for Ankylosing Spondylitis, Psoriatic Arthritis, and Rheumatoid Arthritis

Drug Name	Drug Tier	Requirements/Limits
ENBREL INJ 50MG/ML	3	QL (8 syringes / 28 days), PA; Preferred agent for Ankylosing Spondylitis, Psoriatic Arthritis, and Rheumatoid Arthritis
ENBREL MINI INJ 50MG/ML	3	QL (8 cartridges / 28 days), PA; Preferred agent for Ankylosing Spondylitis, Psoriatic Arthritis, and Rheumatoid Arthritis
ENBREL SRCLK INJ 50MG/ML	3	QL (8 syringes / 28 days), PA; Preferred agent for Ankylosing Spondylitis, Psoriatic Arthritis, and Rheumatoid Arthritis
HUMIRA INJ 10/0.1ML	3	QL (2 injections / 28 days), PA
HUMIRA INJ 10MG/0.2	3	QL (2 injections / 28 days), PA
HUMIRA INJ 20/0.2ML	3	QL (2 injections / 28 days), PA
HUMIRA INJ 40/0.4ML	3	QL (4 injections / 28 days), PA
HUMIRA KIT 20MG/0.4	3	QL (2 injections / 28 days), PA
HUMIRA KIT 40MG/0.8	3	QL (4 injections / 28 days), PA
HUMIRA PEDIA INJ CROHNS	3	QL (2 injections / 28 days), PA; (80mg and 40mg dual strength kit)
HUMIRA PEDIA INJ CROHNS	3	QL (3 injections / 28 days), PA; (80mg single strength kit)
HUMIRA PEN INJ 40/0.4ML	3	QL (4 injections / 28 days), PA
HUMIRA PEN INJ CD/UC/HS	3	QL (6 pens / 28 days), PA
HUMIRA PEN INJ PS/UV	3	QL (4 pens / 28 days), PA
HUMIRA PEN KIT CD/UC/HS	3	QL (1 kit / 28 days), PA
HUMIRA PEN KIT PS/UV	3	QL (1 kit / 28 days), PA
KEVZARA INJ 150/1.14	3	QL (2 pens / 28 days), PA; Preferred agent for Rheumatoid Arthritis

Drug Name	Drug Tier	Requirements/Limits
KEVZARA INJ 150/1.14	3	QL (2 syringes / 4 weeks), PA; Preferred agent for Rheumatoid Arthritis
KEVZARA INJ 200/1.14	3	QL (2 pens / 28 days), PA; Preferred agent for Rheumatoid Arthritis
KEVZARA INJ 200/1.14	3	QL (2 syringes / 4 weeks), PA; Preferred agent for Rheumatoid Arthritis
SIMPONI ARIA SOL 50MG/4ML	3	QL (200 mg / 8 weeks), PA
SIMPONI INJ 50/0.5ML	3	QL (1 injection / 28 days), PA; Preferred agent for Ulcerative Colitis
SIMPONI INJ 100MG/ML	3	QL (1 injection / 28 days), PA; Preferred agent for Ulcerative Colitis
SKYRIZI INJ 150DOSE	3	QL (2 syringes / 12 weeks), PA; Preferred agent for Psoriasis
STELARA INJ 45MG/0.5	3	QL (1 syringe / 84 days), PA; Preferred agent for Crohn's Disease (after failure of Humira) and Psoriasis
STELARA INJ 90MG/ML	3	QL (1 syringe / 56 days), PA; Preferred agent for Crohn's Disease (after failure of Humira) and Psoriasis
TALTZ INJ 80MG/ML	3	QL (1 injection / 28 days), PA; Preferred agent for Psoriasis
XELJANZ TAB 5MG	3	QL (60 tabs / 30 days), PA; Preferred agent for Rheumatoid Arthritis
XELJANZ XR TAB 11MG	3	QL (30 tabs / 30 days), PA; Preferred agent for Rheumatoid Arthritis

DISEASE-MODIFYING ANTI-RHEUMATIC DRUGS (DMARDS)

<i>hydroxychloroquine sulfate tab 200 mg</i>	1
<i>leflunomide tab 10 mg</i>	1
<i>leflunomide tab 20 mg</i>	1

Drug Name	Drug Tier	Requirements/Limits
<i>methotrexate sodium tab 2.5 mg (base equiv)</i>	1	
OTEZLA TAB 10/20/30	3	QL (55 tabs / 28 days), PA; Preferred agent for Psoriasis and Psoriatic Arthritis
OTEZLA TAB 30MG	3	QL (60 tabs / 30 days), PA; Preferred agent for Psoriasis and Psoriatic Arthritis
IMMUNOGLOBULIN		
HYQVIA INJ 2.5-200	3	PA
HYQVIA INJ 5-400	3	PA
HYQVIA INJ 10-800	3	PA
HYQVIA INJ 20-1600	3	PA
HYQVIA INJ 30-2400	3	PA
IMMUNOMODULATORS		
ALFERON N INJ 5MU/ML	3	
INTRON A INJ 10MU	3	PA
INTRON A INJ 18MU	3	PA
INTRON A INJ 25MU	3	PA
INTRON A INJ 50MU	3	PA
POMALYST CAP 1MG	3	QL (21 caps / 21 days), PA
POMALYST CAP 2MG	3	QL (21 caps / 21 days), PA
POMALYST CAP 3MG	3	QL (21 caps / 21 days), PA
POMALYST CAP 4MG	3	QL (21 caps / 21 days), PA
REVLIMID CAP 2.5MG	3	QL (28 caps / 28 days), PA
REVLIMID CAP 5MG	3	QL (28 caps / 28 days), PA
REVLIMID CAP 10MG	3	QL (28 caps / 28 days), PA
REVLIMID CAP 15MG	3	QL (28 caps / 28 days), PA
REVLIMID CAP 20MG	3	QL (21 caps / 28 days), PA
REVLIMID CAP 25MG	3	QL (21 caps / 28 days), PA
THALOMID CAP 50MG	3	QL (28 caps / 28 days), PA
THALOMID CAP 100MG	3	QL (28 caps / 28 days), PA

Drug Name	Drug Tier	Requirements/Limits
THALOMID CAP 150MG	3	QL (56 caps / 28 days), PA
THALOMID CAP 200MG	3	QL (56 caps / 28 days), PA

IMMUNOSUPPRESSANTS

<i>azathioprine tab 50 mg</i>	1	
<i>cyclosporine modified cap 25 mg</i>	1	
<i>cyclosporine modified cap 50 mg</i>	1	
<i>cyclosporine modified cap 100 mg</i>	1	
<i>cyclosporine modified oral soln 100 mg/ml</i>	1	
<i>engraf cap 25mg</i>	1	
<i>engraf cap 100mg</i>	1	
<i>engraf sol 100mg/ml</i>	1	
<i>mycophenolate mofetil cap 250 mg</i>	1	
<i>mycophenolate mofetil for oral susp 200 mg/ml</i>	1	
<i>mycophenolate mofetil tab 500 mg</i>	1	
<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i>	1	
<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i>	1	
<i>sirolimus oral soln 1 mg/ml</i>	1	
<i>sirolimus tab 0.5 mg</i>	1	
<i>sirolimus tab 1 mg</i>	1	
<i>sirolimus tab 2 mg</i>	1	
<i>tacrolimus cap 0.5 mg</i>	1	
<i>tacrolimus cap 1 mg</i>	1	
<i>tacrolimus cap 5 mg</i>	1	
ZORTRESS TAB 0.5MG	2	
ZORTRESS TAB 0.25MG	2	
ZORTRESS TAB 0.75MG	2	
ZORTRESS TAB 1MG	2	

VACCINES

ACTHIB INJ	0	\$0 copay for members age 18 and younger, otherwise not covered
ADACEL INJ	0	
AFLURIA QUAD INJ 2019-20	0	
BEXSERO INJ	0	
BOOSTRIX INJ	0	
DAPTACEL INJ	0	\$0 copay for members age 18 and younger, otherwise not covered
DIP/TET PED INJ 25-5LFU	0	\$0 copay for members age 18 and younger, otherwise not covered

Drug Name	Drug Tier	Requirements/Limits
ENGERIX-B INJ 10/0.5ML	0	
ENGERIX-B INJ 20MCG/ML	0	
FLUAD INJ 2019-20	0	
FLUARIX QUAD INJ 2019-20	0	
FLUBLOK QUAD INJ 2019-20	0	
FLUCLVX QUAD INJ 2019-20	0	
FLULAVAL QUA INJ 2019-20	0	
FLUMIST QUAD SUS 2019-20	0	
FLUZONE HD INJ PF 19-20	0	
FLUZONE QUAD INJ 2019-20	0	
GARDASIL 9 INJ	0	
GARDASIL INJ	0	
HAVRIX INJ 720UNIT	0	
HAVRIX INJ 1440UNIT	0	
HEPLISAV-B INJ 20/0.5ML	0	
HEPLISAV-B INJ 20MCG	0	
HIBERIX SOL 10MCG	0	\$0 copay for members age 18 and younger, otherwise not covered
INFANRIX INJ	0	\$0 copay for members age 18 and younger, otherwise not covered
IPOL INJ INACTIVE	0	\$0 copay for members age 18 and younger, otherwise not covered
KINRIX INJ	0	\$0 copay for members age 18 and younger, otherwise not covered
M-M-R II INJ	0	
MENACTRA INJ	0	
MENHIBRIX INJ	0	\$0 copay for members age 18 and younger, otherwise not covered
MENOMUNE INJ A/C/Y/W	0	
MENVEO INJ	0	
PEDIARIX INJ 0.5ML	0	\$0 copay for members age 18 and younger, otherwise not covered
PEDVAX HIB INJ	0	\$0 copay for members age 18 and younger, otherwise not covered
PENTACEL INJ	0	\$0 copay for members age 18 and younger, otherwise not covered
PNEUMOVAX 23 INJ 25/0.5	0	
PREVNAR 13 INJ	0	

Drug Name	Drug Tier	Requirements/Limits
PROQUAD INJ	0	\$0 copay for members age 18 and younger, otherwise not covered
RECOMBIVA HB INJ 5MCG/0.5	0	
RECOMBIVA HB INJ 10MCG/ML	0	
RECOMBIVA-HB INJ 40MCG/ML	0	
ROTARIX SUS	0	\$0 copay for members age 18 and younger, otherwise not covered
ROTATEQ SOL	0	\$0 copay for members age 18 and younger, otherwise not covered
SHINGRIX INJ 50MCG	0	\$0 copay for members age 19 and older, otherwise not covered
TDVAX INJ 2-2 LF	0	\$0 copay for members age 19 and older, otherwise not covered
TENIVAC INJ 5-2LF	0	\$0 copay for members age 19 and older, otherwise not covered
TRUMENBA INJ	0	
TWINRIX INJ	0	\$0 copay for members age 19 and older, otherwise not covered
VAQTA INJ 25/0.5ML	0	
VAQTA INJ 50UNT/ML	0	
VARIVAX INJ	0	
ZOSTAVAX INJ	0	\$0 copay for members age 19 and older, otherwise not covered

MEDICAL DEVICES

CONTRACEPTIVES

CAYA DPR	0	QL (1 / 300 days)
FC2 FEMALE MIS CONDOM	0	OTC
FEMCAP MIS 22MM	0	QL (1 / 300 days)
FEMCAP MIS 26MM	0	QL (1 / 300 days)
FEMCAP MIS 30MM	0	QL (1 / 300 days)
OMNIFLEX DPR	0	QL (1 / 300 days)
WIDE-SEAL DPR KIT 60	0	QL (1 / 300 days)
WIDE-SEAL DPR KIT 65	0	QL (1 / 300 days)
WIDE-SEAL DPR KIT 70	0	QL (1 / 300 days)
WIDE-SEAL DPR KIT 75	0	QL (1 / 300 days)
WIDE-SEAL DPR KIT 80	0	QL (1 / 300 days)
WIDE-SEAL DPR KIT 85	0	QL (1 / 300 days)
WIDE-SEAL DPR KIT 90	0	QL (1 / 300 days)
WIDE-SEAL DPR KIT 95	0	QL (1 / 300 days)

Drug Name	Drug Tier	Requirements/Limits
DIABETIC SUPPLIES^		
ACCU-CHEK BLOOD GLUCOSE TEST KITS	2	OTC
ACCU-CHEK BLOOD GLUCOSE TEST STRIPS	2	OTC, QL (204 Test Strips / 25 days)
ALCOH-WIPE MIS 12"X12"	2	
ALCOHOL PREP WIPES AND SWABS	2	OTC
BLOOD GLUCOSE CALIBRATION SOLUTION	2	OTC
GLUCOSE URINE TEST STRIPS	2	OTC
INSULIN PEN NEEDLES	2	OTC
INSULIN PEN NEEDLES/SYRINGES	2	OTC
KETONE URINE TEST STRIPS	2	OTC
LANCETS	2	OTC
LANCING DEVICE	2	OTC
MISC LANCETS	2	OTC
SHARPS CONTAINER	2	OTC
URINE GLUCOSE MONITORING SUPPLIES	2	OTC
URINE TEST STRIPS	2	OTC
MISCELLANEOUS		
ADULT RESPIRATORY MASK	2	
ADULT RESPIRATORY MASK	2	OTC
HUMATROPEN MIS FOR 6MG	2	OTC
HUMATROPEN MIS FOR 12MG	2	OTC
HUMATROPEN MIS FOR 24MG	2	OTC
PEDIATRIC RESPIRATORY MASK	2	
PEDIATRIC RESPIRATORY MASK	2	OTC
NUTRITIONAL/SUPPLEMENTS		
ELECTROLYTES		
<i>fluor-a-day dro 0.125mg</i>	0	\$0 applies for ages 5 and under, otherwise not covered
FLUORABON DRO	0	\$0 applies for ages 5 and under, otherwise not covered
<i>fluoritab chw 0.5mg f</i>	0	\$0 applies for ages 5 and under, otherwise not covered
<i>fluoritab chw 0.25mg f</i>	0	\$0 applies for ages 5 and under, otherwise not covered
<i>fluoritab chw 2.2mg</i>	1	
<i>flura-drops dro 0.25mg f</i>	0	\$0 applies for ages 5 and under, otherwise not covered
<i>k-effervesce tab 25meq ef</i>	1	
<i>klor-con 8 tab 8meq er</i>	1	
<i>klor-con 10 tab 10meq er</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>klor-con m15 tab 15meq er</i>	1	
<i>klor-con m20 tab 20meq er</i>	1	
<i>ludent chw 0.5mg f</i>	0	\$0 applies for ages 5 and under, otherwise not covered
<i>ludent chw 0.25mg f</i>	0	\$0 applies for ages 5 and under, otherwise not covered
<i>ludent chw 1mg f</i>	1	
LURIDE DRO 0.5MG/ML	0	\$0 applies for ages 5 and under, otherwise not covered
<i>nafrinse chw 1mg f</i>	1	
<i>nafrinse dro 0.125mg</i>	0	\$0 applies for ages 5 and under, otherwise not covered
<i>potassium chloride cap er 8 meq</i>	1	
<i>potassium chloride cap er 10 meq</i>	1	
<i>potassium chloride microencapsulated crys er tab 10 meq</i>	1	
<i>potassium chloride microencapsulated crys er tab 20 meq</i>	1	
<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	1	
<i>potassium chloride oral soln 20% (40 meq/15ml)</i>	1	
<i>potassium chloride tab er 8 meq (600 mg)</i>	1	
<i>potassium chloride tab er 10 meq</i>	1	
<i>potassium chloride tab er 20 meq (1500 mg)</i>	1	
<i>sodium chloride flush iv soln 0.9%</i>	1	
<i>sodium chloride inj 2.5 meq/ml (14.6%)</i>	1	
<i>sodium fluoride chew tab 0.5 mg f (from 1.1 mg naf)</i>	0	\$0 applies for ages 5 and under, otherwise not covered
<i>sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf)</i>	0	\$0 applies for ages 5 and under, otherwise not covered
<i>sodium fluoride chew tab 1 mg f (from 2.2 mg naf)</i>	1	
<i>sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)</i>	0	\$0 applies for ages 5 and under, otherwise not covered
<i>sodium fluoride tab 0.5 mg f (from 1.1 mg naf)</i>	0	\$0 applies for ages 5 and under, otherwise not covered
<i>sodium fluoride tab 1 mg f (from 2.2 mg naf)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
IV REPLACEMENT SOLUTIONS		
<i>sodium chloride inj 0.9%</i>	1	
<i>sodium chloride iv soln 0.9%</i>	1	
<i>sodium chloride iv soln 0.45%</i>	1	
<i>sodium chloride iv soln 3%</i>	1	
<i>sodium chloride iv soln 5%</i>	1	
VITAMINS		
<i>calcitriol cap 0.5 mcg</i>	1	
<i>calcitriol cap 0.25 mcg</i>	1	
<i>calcitriol oral soln 1 mcg/ml</i>	1	
<i>cholecalciferol cap 50000 unit</i>	1	OTC
CITRANATAL CAP HARMONY	2	
CITRANATAL CAP MEDLEY	2	
CITRANATAL MIS	2	
CITRANATAL MIS 90 DHA	2	
CITRANATAL MIS B-CALM	2	
CITRANATAL PAK ASSURE	2	
CITRANATAL PAK DHA	2	
CITRANATAL TAB BLOOM	2	
CITRANATAL TAB RX	2	
<i>cyanocobalamin inj 1000 mcg/ml</i>	1	
<i>doxercalciferol cap 0.5 mcg</i>	1	
<i>doxercalciferol cap 1 mcg</i>	1	
<i>doxercalciferol cap 2.5 mcg</i>	1	
<i>elite-ob tab</i>	1	
<i>ergocalciferol cap 50000 unit</i>	1	
<i>folic acid cap 0.8 mg</i>	0	OTC, QL (100 caps / 30 days); \$0 copay for women ages 55 and under, otherwise not covered
<i>folic acid tab 1 mg</i>	1	
<i>folic acid tab 400 mcg</i>	0	OTC, QL (100 tabs / 30 days); \$0 copay for women ages 55 and under, otherwise not covered
<i>folic acid tab 800 mcg</i>	0	OTC, QL (100 tabs / 30 days); \$0 copay for women ages 55 and under, otherwise not covered
<i>multi-vit/fe dro /fl 0.25</i>	1	
<i>multi-vit/fl dro 0.5mg/ml</i>	1	
<i>multi-vit/fl dro 0.25mg</i>	1	
<i>multivit/fl chw 0.5mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>multivit/fl chw 0.25mg</i>	1	
<i>multivit/fl chw 1mg</i>	1	
<i>mvc-fluoride chw 1mg</i>	1	
<i>paricalcitol cap 1 mcg</i>	1	
<i>paricalcitol cap 2 mcg</i>	1	
<i>paricalcitol cap 4 mcg</i>	1	
<i>phytonadione tab 5 mg</i>	1	
<i>prenatabs rx tab</i>	1	
<i>pyridoxine hcl tab 25 mg</i>	1	OTC
<i>pyridoxine hcl tab 50 mg</i>	1	OTC
<i>tri-vit/fe dro /fl 0.25</i>	1	
<i>tri-vit/fl dro 0.5mg</i>	1	
<i>tri-vit/fl dro 0.25mg</i>	1	
<i>virt-vite tab forte</i>	1	
<i>vit a/c/d/fl dro 0.25mg</i>	1	

OPHTHALMIC

ANTI-INFECTIVE/ANTI-INFLAMMATORY

<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	1	
BLEPHAMIDE OIN S.O.P.	2	
BLEPHAMIDE SUS OP	2	
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	1	
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	1	
<i>neomycin-polymyxin-hc ophth susp</i>	1	
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	1	
TOBRADEX OIN 0.3-0.1%	2	
TOBRADEX ST SUS 0.3-0.05	2	
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	1	

ANTI-INFECTIVES

AZASITE SOL 1%	2	
<i>bacitracin ophth oint 500 unit/gm</i>	1	
<i>bacitracin-polymyxin b ophth oint</i>	1	
BESIVANCE SUS 0.6%	3	
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	1	
<i>erythromycin ophth oint 5 mg/gm</i>	1	
<i>gatifloxacin ophth soln 0.5%</i>	1	
<i>gentamicin sulfate ophth oint 0.3%</i>	1	
<i>gentamicin sulfate ophth soln 0.3%</i>	1	
<i>levofloxacin ophth soln 0.5%</i>	1	
MOXEZA SOL 0.5%	2	

Drug Name	Drug Tier	Requirements/Limits
<i>moxifloxacin hcl ophth soln 0.5% (base equiv)</i>	1	
NATACYN SUS 5% OP	2	
<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	1	
<i>ofloxacin ophth soln 0.3%</i>	1	
<i>polycin oin op</i>	1	
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	1	
<i>sulfacetamide sodium ophth oint 10%</i>	1	
<i>sulfacetamide sodium ophth soln 10%</i>	1	
<i>tobramycin ophth soln 0.3%</i>	1	
<i>trifluridine ophth soln 1%</i>	1	
ZIRGAN GEL 0.15%	3	
ANTI-INFLAMMATORIES		
ACUVAIL SOL 0.45%	2	
ALREX SUS 0.2%	3	
<i>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</i>	1	
<i>bromfenac sodium ophth soln 0.09% (base equivalent)</i>	1	
<i>dexamethasone sodium phosphate ophth soln 0.1%</i>	1	
<i>diclofenac sodium ophth soln 0.1%</i>	1	
DUREZOL EMU 0.05%	2	
FLAREX SUS 0.1% OP	2	
<i>fluorometholone ophth susp 0.1%</i>	1	
<i>flurbiprofen sodium ophth soln 0.03%</i>	1	
FML FORTE SUS 0.25% OP	2	
FML OIN 0.1% OP	2	
ILEVRO DRO 0.3% OP	2	
<i>ketorolac tromethamine ophth soln 0.4%</i>	1	
<i>ketorolac tromethamine ophth soln 0.5%</i>	1	
LOTEMAX GEL 0.5%	3	
LOTEMAX OIN 0.5%	3	
LOTEMAX SUS 0.5%	3	
<i>loteprednol etabonate ophth susp 0.5%</i>	1	
MAXIDEX SUS 0.1% OP	2	
NEVANAC SUS 0.1%	2	
PRED MILD SUS 0.12% OP	2	
PRED SOD PHO SOL 1% OP	2	
<i>prednisolone acetate ophth susp 1%</i>	1	
ANTIALLERGICS		
ALOCRI SOL 2%	3	
ALOMIDE SOL 0.1% OP	3	
<i>azelastine hcl ophth soln 0.05%</i>	1	ST

Drug Name	Drug Tier	Requirements/Limits
BEPREVE DRO 1.5%	3	ST
<i>cromolyn sodium ophth soln 4%</i>	1	
EMADINE SOL 0.05% OP	3	ST
<i>epinastine hcl ophth soln 0.05%</i>	1	ST
<i>ketotif fum dro 0.025%op</i>	1	OTC
LASTACFT SOL 0.25%	2	ST
<i>olopatadine hcl ophth soln 0.1% (base equivalent)</i>	1	ST
<i>olopatadine hcl ophth soln 0.2% (base equivalent)</i>	1	ST
PAZEO DRO 0.7%	2	
ANTIGLAUCOMA		
<i>apraclonidine hcl ophth soln 0.5% (base equivalent)</i>	1	
AZOPT SUS 1% OP	2	
<i>betaxolol hcl ophth soln 0.5%</i>	1	
BETIMOL SOL 0.5%	3	
BETIMOL SOL 0.25%	3	
BETOPTIC-S SUS 0.25% OP	2	
<i>bimatoprost ophth soln 0.03%</i>	1	
<i>brimonidine tartrate ophth soln 0.2%</i>	1	
<i>brimonidine tartrate ophth soln 0.15%</i>	1	
<i>carteolol hcl ophth soln 1%</i>	1	
COMBIGAN SOL 0.2/0.5%	2	
<i>dorzolamide hcl ophth soln 2%</i>	1	
<i>dorzolamide hcl-timolol maleate ophth soln 22.3-6.8 mg/ml</i>	1	
<i>latanoprost ophth soln 0.005%</i>	1	
<i>levobunolol hcl ophth soln 0.5%</i>	1	
LUMIGAN SOL 0.01%	2	ST; PA**
<i>metipranolol ophth soln 0.3%</i>	1	
PHOSPHOLINE SOL 0.125%OP	3	
<i>pilocarpine hcl ophth soln 1%</i>	1	
SIMBRINZA SUS 1-0.2%	2	
<i>timolol maleate ophth gel forming soln 0.5%</i>	1	
<i>timolol maleate ophth gel forming soln 0.25%</i>	1	
<i>timolol maleate ophth soln 0.5%</i>	1	
<i>timolol maleate ophth soln 0.25%</i>	1	
TIMOPTIC OCU SOL 0.5% OP	2	
TIMOPTIC OCU SOL 0.25% OP	2	
TRAVATAN Z DRO 0.004%	2	
ZIOPTAN DRO 0.0015%	3	ST; PA**
MISCELLANEOUS		
ATROPINE SUL SOL 1% OP	1	

Drug Name	Drug Tier	Requirements/Limits
CYSTARAN SOL 0.44%	3	PA
LACRISERT MIS 5MG OP	3	
<i>phenylephrine hcl ophth soln 2.5%</i>	1	
<i>phenylephrine hcl ophth soln 10%</i>	1	
RESTASIS EMU 0.05%	2	
<i>tropicamide ophth soln 0.5%</i>	1	
<i>tropicamide ophth soln 1%</i>	1	

OTHER

IRRIGATION SOLUTIONS

<i>physiolyte sol</i>	1	
<i>tis-u-sol sol</i>	1	

RESPIRATORY

ANAPHYLAXIS TREATMENT AGENTS

<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	1	(generic of Adrenaclick)
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	1	(generics manufactured by Teva/Mylan)
<i>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)</i>	1	
<i>epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000)</i>	1	(generic of Adrenaclick)
EPIPEN 2-PAK INJ 0.3MG	2	
EPIPEN-JR INJ 0.15MG	2	

ANTICHOLINERGIC/BETA AGONIST COMBINATIONS§

BEVESPI AER 9-4.8MCG	2	QL (1 package / 25 days)
COMBIVENT AER 20-100	2	QL (2 inhalers / 25 days)
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	1	QL (6 boxes / 25 days)

ANTICHOLINERGICS§

INCRUSE ELPT INH 62.5MCG	2	QL (1 package / 25 days)
<i>ipratropium bromide inhal soln 0.02%</i>	1	QL (5 boxes / 25 days)
<i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)</i>	1	
<i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)</i>	1	
SPIRIVA AER 1.25MCG	2	QL (1 package / 25 days)
SPIRIVA CAP HANDIHLR	2	QL (1 package / 25 days)
SPIRIVA SPR 2.5MCG	2	QL (1 package / 25 days)

ANTI-HISTAMINE COMBINATIONS

Drug Name	Drug Tier	Requirements/Limits
DYMISTA SPR 137-50	2	QL (1 package / 25 days)

ANTIHIISTAMINES

<i>all day allg cap 10mg</i>	1	OTC
<i>all day allg chw 10mg</i>	1	OTC
<i>allergy relf tab 10mg</i>	1	OTC
<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	1	QL (2 bottles / 25 days)
<i>azelastine hcl nasal spray 0.15% (205.5 mcg/spray)</i>	1	QL (2 bottles / 25 days)
<i>brompheniramine tannate chew tab 12 mg</i>	1	
<i>carbinoxamine maleate tab 4 mg</i>	1	
<i>cetirizine hcl chew tab 5 mg</i>	1	OTC
<i>cetirizine hcl tab 5 mg</i>	1	OTC
<i>cetirizine hcl tab 10 mg</i>	1	OTC
<i>cetirizine sol 1mg/ml</i>	1	OTC
CLARINEX SYP 0.5MG/ML	3	ST
<i>clemastine fumarate tab 2.68 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>cyproheptadine hcl syrup 2 mg/5ml</i>	1	
<i>cyproheptadine hcl tab 4 mg</i>	1	
<i>desloratadine tab 5 mg</i>	1	ST
<i>desloratadine tab orally disintegrating 2.5 mg</i>	1	ST
<i>desloratadine tab orally disintegrating 5 mg</i>	1	ST
<i>diphenhydramine hcl elixir 12.5 mg/5ml</i>	1	
<i>diphenhydramine hcl inj 50 mg/ml</i>	1	
<i>fexofenadine hcl tab 60 mg</i>	1	OTC
<i>fexofenadine hcl tab 180 mg</i>	1	OTC
<i>fexofenadine sus 30mg/5ml</i>	1	OTC
<i>hydroxyzine hcl syrup 10 mg/5ml</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>hydroxyzine hcl tab 10 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>hydroxyzine hcl tab 25 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older

Drug Name	Drug Tier	Requirements/Limits
<i>hydroxyzine hcl tab 50 mg</i>	1	PA; High Risk Medications require PA for members age 70 and older
<i>levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)</i>	1	
<i>levocetirizine dihydrochloride tab 5 mg</i>	1	
<i>loratadine cap 10 mg</i>	1	OTC
<i>loratadine syp 5mg/5ml</i>	1	OTC
<i>loratadine tab 10mg</i>	1	OTC

BETA AGONISTS§

<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	1	QL (2 inhalers / 25 days)
<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	1	QL (60 mL / 25 days)
<i>albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)</i>	1	QL (5 boxes / 25 days)
<i>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)</i>	1	QL (5 boxes / 25 days)
<i>albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)</i>	1	QL (5 boxes / 25 days)
<i>albuterol sulfate syrup 2 mg/5ml</i>	1	
<i>albuterol sulfate tab 2 mg</i>	1	
<i>albuterol sulfate tab 4 mg</i>	1	
<i>albuterol sulfate tab er 12hr 4 mg</i>	1	
<i>albuterol sulfate tab er 12hr 8 mg</i>	1	
<i>levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv)</i>	1	QL (300 mL / 25 days)
<i>levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv)</i>	1	QL (300 mL / 25 days)
<i>levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv)</i>	1	QL (300 mL / 25 days)
<i>levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)</i>	1	QL (45 mL / 25 days)
<i>metaproterenol sulfate syrup 10 mg/5ml</i>	1	
<i>metaproterenol sulfate tab 10 mg</i>	1	
<i>metaproterenol sulfate tab 20 mg</i>	1	
PROAIR HFA AER	2	QL (2 inhalers / 25 days)
PROAIR RESPI AER	2	QL (2 packages / 25 days)
STRIVERDIAER 2.5MCG	2	QL (1 package / 25 days)
<i>terbutaline sulfate tab 2.5 mg</i>	1	
<i>terbutaline sulfate tab 5 mg</i>	1	

BIOLOGIC RESPONSE MODIFIERS

NUCALA INJ 100MG	3	QL (3 injections / 28 days), PA
------------------	---	------------------------------------

Drug Name	Drug Tier	Requirements/Limits
NUCALA INJ 100MG/ML	3	QL (3 injections / 28 days), PA
XOLAIR INJ 75/0.5	3	QL (2 syringes / 28 days), PA
XOLAIR INJ 150MG/ML	3	QL (4 syringes / 28 days), PA
XOLAIR SOL 150MG	3	QL (6 vials / 28 days), PA
COLD/COUGH		
<i>benzonatate cap 100 mg</i>	1	
<i>benzonatate cap 200 mg</i>	1	
<i>cheratussin syp ac</i>	1	OTC
<i>hydrocodone w/ homatropine syrup 5-1.5 mg/5ml</i>	1	
<i>hydrocodone w/ homatropine tab 5-1.5 mg</i>	1	
NORTUSS-EX LIQ 200-20/5	2	
<i>prometh vc sol plain</i>	1	
<i>prometh vc/ syp codeine</i>	1	
<i>promethazine w/ codeine syrup 6.25-10 mg/5ml</i>	1	
<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	1	
<i>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml</i>	1	
<i>tussigon tab 5-1.5mg</i>	1	
TUZISTRA XR SUS	3	
LEUKOTRIENE MODIFIERS		
<i>zileuton tab er 12hr 600 mg</i>	3	
LEUKOTRIENE RECEPTOR ANTAGONISTS		
<i>montelukast sodium chew tab 4 mg (base equiv)</i>	1	
<i>montelukast sodium chew tab 5 mg (base equiv)</i>	1	
<i>montelukast sodium oral granules packet 4 mg (base equiv)</i>	1	
<i>montelukast sodium tab 10 mg (base equiv)</i>	1	
<i>zafirlukast tab 10 mg</i>	1	
<i>zafirlukast tab 20 mg</i>	1	
MAST CELL STABILIZERS\$		
<i>cromolyn sodium soln nebu 20 mg/2ml</i>	1	QL (2 boxes / 25 days)
MISCELLANEOUS		
<i>acetylcysteine inhal soln 10%</i>	1	
<i>acetylcysteine inhal soln 20%</i>	1	
DALIRESPTAB 250MCG	3	PA
DALIRESPTAB 500MCG	3	PA

Drug Name	Drug Tier	Requirements/Limits
ESBRIET CAP 267MG	3	QL (270 caps / 30 days), PA
ESBRIET TAB 267MG	3	QL (270 tabs / 30 days), PA
ESBRIET TAB 801MG	3	QL (90 tabs / 30 days), PA
GLASSIA INJ	3	PA
KALYDECO PAK 25MG	3	QL (56 packets / 28 days), PA
KALYDECO PAK 50MG	3	QL (56 packets / 28 days), PA
KALYDECO PAK 75MG	3	QL (56 packets / 28 days), PA
KALYDECO TAB 150MG	3	QL (56 tabs / 28 days), PA
ORKAMBI GRA 100-125	3	QL (56 packets / 28 days), PA
ORKAMBI GRA 150-188	3	QL (56 packets / 28 days), PA
ORKAMBI TAB 100-125	3	QL (112 tabs / 28 days), PA
ORKAMBI TAB 200-125	3	QL (112 tabs / 28 days), PA
PROLASTIN-C INJ 1000MG	3	PA
<i>sodium chloride soln nebu 0.9%</i>	1	
<i>sodium chloride soln nebu 3%</i>	1	
<i>sodium chloride soln nebu 7%</i>	1	
<i>sodium chloride soln nebu 10%</i>	1	
SYMDEKO TAB 50-75MG	3	QL (56 tabs / 28 days), PA
SYMDEKO TAB 100-150	3	QL (56 tabs / 28 days), PA

NASAL STEROIDS§

<i>flunisolide nasal soln 25 mcg/act (0.025%)</i>	1	QL (3 containers / 25 days)
<i>fluticasone propionate nasal susp 50 mcg/act</i>	1	QL (1 container / 25 days)
<i>fluticasone spr 50mcg</i>	1	OTC, QL (1 container / 25 days)
OMNARIS SPR	3	QL (1 package / 25 days), ST; PA**
<i>rhinocort sus allergy</i>	1	OTC, QL (1 bottle / 25 days)
<i>triamcinolone acetonide nasal aerosol suspension 55 mcg/act</i>	1	OTC, QL (1 bottle / 25 days)

STEROID INHALANTS§

Drug Name	Drug Tier	Requirements/Limits
ASMANEX 30 AER 110MCG	2	QL (2 inhalers / 25 days)
ASMANEX 30 AER 220MCG	2	QL (4 inhalers / 25 days)
ASMANEX 60 AER 220MCG	2	QL (2 inhalers / 25 days)
ASMANEX 120 AER 220MCG	2	QL (1 inhaler / 25 days)
ASMANEX HFA AER 100 MCG	2	QL (1 inhaler / 25 days)
ASMANEX HFA AER 200 MCG	2	QL (1 inhaler / 25 days)
<i>budesonide inhalation susp 0.5 mg/2ml</i>	1	QL (2 boxes / 25 days)
<i>budesonide inhalation susp 0.25 mg/2ml</i>	1	QL (3 boxes / 25 days)
<i>budesonide inhalation susp 1 mg/2ml</i>	1	QL (1 box / 25 days)
QVAR REDIHA AER 80MCG	2	QL (2 packages / 25 days)
QVAR REDIHAL AER 40MCG	2	QL (2 packages / 25 days)

STEROID/BETA-AGONIST COMBINATIONS§

ADVAIR DISKU AER 100/50	1	QL (1 package / 25 days)
ADVAIR DISKU AER 250/50	1	QL (1 package / 25 days)
ADVAIR DISKU AER 500/50	1	QL (1 package / 25 days)
ADVAIR HFA AER 45/21	2	QL (1 package / 25 days)
ADVAIR HFA AER 115/21	2	QL (1 package / 25 days)
ADVAIR HFA AER 230/21	2	QL (1 package / 25 days)
BREO ELLIPTA INH 100-25	2	QL (1 package / 25 days)
BREO ELLIPTA INH 200-25	2	QL (1 package / 25 days)
SYMBICORT AER 80-4.5	2	QL (1 package / 25 days)
SYMBICORT AER 160-4.5	2	QL (1 package / 25 days)

XANTHINES

<i>theochron tab 100mg cr</i>	1	
<i>theochron tab 200mg cr</i>	1	
<i>theochron tab 300mg cr</i>	1	
<i>theophylline soln 80 mg/15ml</i>	1	
<i>theophylline tab er 12hr 450 mg</i>	1	
<i>theophylline tab er 24hr 400 mg</i>	1	
<i>theophylline tab er 24hr 600 mg</i>	1	

TOPICAL

DERMATOLOGY, ACNE

Drug Name	Drug Tier	Requirements/Limits
<i>acne cleansi bar 10%</i>	1	OTC
<i>acne medicat gel 5%</i>	1	OTC
ACNE MEDICAT LOT 5%	1	OTC
ACNE MEDICAT LOT 10%	1	OTC
<i>adapalene cream 0.1%</i>	1	PA; PA applies for members age 35 and older
<i>adapalene gel 0.1%</i>	1	PA; PA applies for members age 35 and older
<i>adapalene gel 0.3%</i>	1	PA; PA applies for members age 35 and older
<i>adapalene lotion 0.1%</i>	1	PA; PA applies for members age 35 and older
<i>adapalene-benzoyl peroxide gel 0.1-2.5%</i>	1	ST
<i>amnestem cap 10mg</i>	1	PA
<i>amnestem cap 20mg</i>	1	PA
<i>amnestem cap 40mg</i>	1	PA
<i>avita cre 0.025%</i>	1	PA; PA applies for members age 35 and older
<i>avita gel 0.025%</i>	1	PA; PA applies for members age 35 and older
AZELEX CRE 20%	3	ST; PA**
BENZIQL GEL 5.25%	2	ST
BENZIQL LS GEL 2.75%	2	ST
<i>benziq wash liq 5.25%</i>	1	ST
BENZOYL PER GEL 2.5%	1	OTC
<i>benzoyl per gel 10%</i>	1	OTC
<i>benzoyl per liq 5% wash</i>	1	OTC
BENZOYL PER LIQ 6%	1	OTC
<i>benzoyl per liq 10% wash</i>	1	OTC
<i>benzoyl peroxide gel 5%</i>	1	OTC
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	1	
<i>bp gel gel 10%</i>	1	OTC
<i>bp wash liq 2.5%</i>	1	ST
<i>bp wash liq 5%</i>	1	OTC
<i>bpo-5 wash liq 5%</i>	1	OTC
<i>claravis cap 10mg</i>	1	PA
<i>claravis cap 20mg</i>	1	PA
<i>claravis cap 30mg</i>	1	PA
<i>claravis cap 40mg</i>	1	PA
<i>clean&clear cre 10%</i>	1	OTC
CLEAR PORE LIQ 3.5%	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>clearplex x gel 10%</i>	1	ST
CLINDACIN KIT PAC 1%	3	
<i>clindacin mis etz 1%</i>	1	
<i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</i>	1	
<i>clindamycin phosphate foam 1%</i>	1	
<i>clindamycin phosphate gel 1%</i>	1	
<i>clindamycin phosphate lotion 1%</i>	1	
<i>clindamycin phosphate soln 1%</i>	1	
<i>clindamycin phosphate-benzoyl peroxide gel 1-5%</i>	1	
<i>clindamycin phosphate-benzoyl peroxide gel 1.2-2.5%</i>	1	
<i>creamy face liq wash 4%</i>	1	OTC
EPIDUO FORTE GEL 0.3-2.5%	3	ST
<i>ery pad 2%</i>	1	
<i>erythromycin gel 2%</i>	1	
<i>erythromycin soln 2%</i>	1	
<i>isotretinoin cap 10 mg</i>	1	PA
<i>myorisan cap 20mg</i>	1	PA
<i>myorisan cap 40mg</i>	1	PA
<i>sulfacetamide sodium lotion 10% (acne)</i>	1	
<i>targetd acne cre 2.5%</i>	1	OTC
<i>tretinoin cream 0.1%</i>	1	PA; PA applies for members age 35 and older
<i>tretinoin cream 0.05%</i>	1	PA; PA applies for members age 35 and older
<i>tretinoin cream 0.025%</i>	1	PA; PA applies for members age 35 and older
<i>tretinoin gel 0.01%</i>	1	PA; PA applies for members age 35 and older
<i>tretinoin gel 0.05%</i>	1	PA; PA applies for members age 35 and older
<i>tretinoin gel 0.025%</i>	1	PA; PA applies for members age 35 and older
<i>zenatane cap 30mg</i>	1	PA
DERMATOLOGY, ACTINIC KERATOSIS		
FLUOROPLEX CRE 1%	3	
<i>fluorouracil cream 0.5%</i>	1	
<i>fluorouracil cream 5%</i>	1	
<i>fluorouracil soln 2%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>fluorouracil soln 5%</i>	1	
<i>imiquimod cream 5%</i>	1	
PICATO GEL 0.05%	3	
PICATO GEL 0.015%	3	

DERMATOLOGY, ANTIBIOTICS

ALTABAX OIN 1%	3	ST
<i>bacitracin oin 500/gm</i>	1	OTC
CENTANY AT KIT 2%	3	ST
CORTISPORIN CRE 0.5%	3	ST
CORTISPORIN OIN 1%	3	ST
<i>gentamicin sulfate cream 0.1%</i>	1	
<i>gentamicin sulfate oint 0.1%</i>	1	
IV PREP WIPE PAD	2	OTC
<i>mupirocin oint 2%</i>	1	
<i>silver sulfadiazine cream 1%</i>	1	
<i>ssd cre 1%</i>	1	
SULFAMYLON CRE 85MG/GM	3	
<i>triple antib oin</i>	1	OTC

DERMATOLOGY, ANTIFUNGALS

<i>anti-fungal pow 1%</i>	1	OTC
<i>antifungal cre 1%</i>	1	OTC
<i>antifungal cre 2%</i>	1	OTC
<i>ath foot spr aer 1%</i>	1	OTC
<i>butenafine hcl cream 1%</i>	1	OTC
<i>ciclopirox gel 0.77%</i>	1	ST
<i>ciclopirox olamine cream 0.77% (base equiv)</i>	1	ST
<i>ciclopirox olamine susp 0.77% (base equiv)</i>	1	ST
<i>ciclopirox shampoo 1%</i>	1	
<i>ciclopirox solution 8%</i>	1	
<i>clotrimazole cre 1%</i>	1	OTC
<i>clotrimazole cream 1%</i>	1	ST
<i>clotrimazole soln 1%</i>	1	
<i>clotrimazole soln 1%</i>	1	OTC
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	1	
<i>clotrimazole w/ betamethasone lotion 1-0.05%</i>	1	
<i>cruex aer 2%</i>	1	OTC
<i>econazole nitrate cream 1%</i>	1	ST
ERTACZO CRE 2%	3	
EXELDERM CRE 1%	3	ST; PA**
EXELDERM SOL 1%	3	ST; PA**
JUBLIA SOL 10%	3	PA
<i>ketoconazole cream 2%</i>	1	ST

Drug Name	Drug Tier	Requirements/Limits
<i>ketoconazole foam 2%</i>	1	ST
LAMISIL ADV GEL 1%	1	OTC
LAMISIL AT SPR 1%	1	OTC
LOTRIMIN AF AER 2%	1	OTC
LOTRIMIN ULT CRE 1%	1	OTC
MENTAX CRE 1%	3	
<i>miconazorb pow af 2%</i>	1	OTC
<i>naftifine hcl cream 1%</i>	1	ST
<i>naftifine hcl cream 2%</i>	1	ST
<i>nyamyc pow 100000</i>	1	ST
<i>nystatin cream 100000 unit/gm</i>	1	ST
<i>nystatin oint 100000 unit/gm</i>	1	ST
<i>nystatin-triamcinolone cream 100000-0.1 unit/gm -%</i>	1	
<i>nystatin-triamcinolone oint 100000-0.1 unit/gm -%</i>	1	
<i>nystop pow 100000</i>	1	ST
<i>oxiconazole nitrate cream 1%</i>	1	ST
OXISTAT LOT 1%	3	ST
<i>terbinafine cre 1%</i>	1	OTC
<i>tolnaftate aerosol pow 1%</i>	1	OTC
<i>tolnaftate soln 1%</i>	1	OTC
<i>triple paste oin af 2%</i>	1	OTC

DERMATOLOGY, ANTIPRURITIC

<i>doxepin hcl cream 5%</i>	1	QL (90 grams / 25 days), ST; PA**
-----------------------------	---	-----------------------------------

DERMATOLOGY, ANTIPSORIATICS

<i>acitretin cap 10 mg</i>	1	
<i>acitretin cap 17.5 mg</i>	1	
<i>acitretin cap 25 mg</i>	1	
<i>calcipotriene cream 0.005%</i>	3	
<i>calcipotriene oint 0.005%</i>	1	
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	1	
<i>calcitriol oint 3 mcg/gm</i>	1	
COSENTYX INJ 150MG/ML	3	QL (1 box / 28 days), PA; Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis
COSENTYX INJ 300DOSE	3	QL (1 box / 28 days), PA; Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis
COSENTYX PEN INJ 150MG/ML	3	QL (1 box / 28 days), PA; Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis

Drug Name	Drug Tier	Requirements/Limits
COSENTYX PEN INJ 300DOSE	3	QL (1 box / 28 days), PA; Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis
<i>methoxsalen rapid cap 10 mg</i>	1	
<i>tazarotene cream 0.1%</i>	1	PA
TAZORAC CRE 0.05%	2	PA
TAZORAC GEL 0.1%	2	PA
TAZORAC GEL 0.05%	2	PA

DERMATOLOGY, ANTISEBORRHEICS

<i>ketoconazole shampoo 2%</i>	1	
<i>selenium sulfide lotion 2.5%</i>	1	

DERMATOLOGY, CORTICOSTEROIDS

<i>alclometasone dipropionate cream 0.05%</i>	1	QL (120g / 25 days)
<i>alclometasone dipropionate oint 0.05%</i>	1	QL (120g / 25 days)
<i>alphatrex gel 0.05%</i>	1	QL (120g / 25 days)
<i>amcinonide cream 0.1%</i>	1	QL (120g / 25 days)
<i>amcinonide lotion 0.1%</i>	1	QL (120mL / 25 days)
AMCINONIDE OIN 0.1%	2	QL (120g / 25 days)
<i>betamethasone dipropionate augmented cream 0.05%</i>	1	QL (120g / 25 days)
<i>betamethasone dipropionate augmented gel 0.05%</i>	1	QL (120g / 25 days)
<i>betamethasone dipropionate augmented lotion 0.05%</i>	1	QL (120mL / 25 days)
<i>betamethasone dipropionate augmented oint 0.05%</i>	1	QL (120g / 25 days)
<i>betamethasone dipropionate cream 0.05%</i>	1	QL (120g / 25 days)
<i>betamethasone dipropionate lotion 0.05%</i>	1	QL (120mL / 25 days)
<i>betamethasone dipropionate oint 0.05%</i>	1	QL (120g / 25 days)
<i>betamethasone valerate aerosol foam 0.12%</i>	1	
<i>betamethasone valerate cream 0.1% (base equivalent)</i>	1	QL (120g / 25 days)
<i>betamethasone valerate lotion 0.1% (base equivalent)</i>	1	QL (120mL / 25 days)
<i>betamethasone valerate oint 0.1% (base equivalent)</i>	1	QL (120g / 25 days)
<i>calcipotriene-betamethasone dipropionate oint 0.005-0.064%</i>	3	
<i>clobetasol propionate cream 0.05%</i>	1	QL (120g / 25 days)
<i>clobetasol propionate foam 0.05%</i>	1	
<i>clobetasol propionate gel 0.05%</i>	1	QL (120g / 25 days)
<i>clobetasol propionate lotion 0.05%</i>	1	QL (120mL / 25 days)
<i>clobetasol propionate oint 0.05%</i>	1	QL (120g / 25 days)
<i>clobetasol propionate shampoo 0.05%</i>	1	
<i>clobetasol propionate soln 0.05%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>clobetasol propionate spray 0.05%</i>	1	
<i>clocortolone pivalate cream 0.1%</i>	1	QL (120g / 25 days)
<i>desonide cream 0.05%</i>	1	QL (120g / 25 days)
<i>desonide lotion 0.05%</i>	1	QL (120mL / 25 days)
<i>desonide oint 0.05%</i>	1	QL (120g / 25 days)
<i>desoximetasone cream 0.05%</i>	1	QL (120g / 25 days)
<i>desoximetasone cream 0.25%</i>	1	QL (120g / 25 days)
<i>desoximetasone gel 0.05%</i>	1	QL (120g / 25 days)
<i>desoximetasone oint 0.05%</i>	1	QL (120g / 25 days)
<i>desoximetasone oint 0.25%</i>	1	QL (120g / 25 days)
<i>diflorasone diacetate cream 0.05%</i>	1	QL (120g / 25 days)
<i>diflorasone diacetate oint 0.05%</i>	1	QL (120g / 25 days)
<i>fluocinolone acetonide cream 0.01%</i>	1	
<i>fluocinolone acetonide cream 0.025%</i>	1	QL (120g / 25 days)
<i>fluocinolone acetonide oil 0.01% (body oil)</i>	1	
<i>fluocinolone acetonide oil 0.01% (scalp oil)</i>	1	
<i>fluocinolone acetonide oint 0.025%</i>	1	QL (120g / 25 days)
<i>fluocinolone acetonide soln 0.01%</i>	1	
<i>fluocinonide cream 0.05%</i>	1	QL (120g / 25 days)
<i>fluocinonide gel 0.05%</i>	1	QL (120g / 25 days)
<i>fluocinonide oint 0.05%</i>	1	QL (120g / 25 days)
<i>fluocinonide soln 0.05%</i>	1	
<i>flurandrenolide cream 0.05%</i>	1	QL (120g / 25 days)
<i>flurandrenolide lotion 0.05%</i>	1	QL (120mL / 25 days)
<i>flurandrenolide oint 0.05%</i>	1	QL (120g / 25 days)
<i>fluticasone propionate cream 0.05%</i>	1	QL (120g / 25 days)
<i>fluticasone propionate lotion 0.05%</i>	1	QL (120mL / 25 days)
<i>fluticasone propionate oint 0.005%</i>	1	QL (120g / 25 days)
<i>halobetasol propionate cream 0.05%</i>	1	QL (120g / 25 days)
<i>halobetasol propionate oint 0.05%</i>	1	QL (120g / 25 days)
<i>HALOG CRE 0.1%</i>	3	QL (120g / 25 days)
<i>HALOG OIN 0.1%</i>	3	QL (120g / 25 days)
<i>hydrocortisone butyrate cream 0.1%</i>	1	QL (120g / 25 days)
<i>hydrocortisone butyrate hydrophilic lipo base cream 0.1%</i>	1	QL (120g / 25 days)
<i>hydrocortisone butyrate oint 0.1%</i>	1	QL (120g / 25 days)
<i>hydrocortisone butyrate soln 0.1%</i>	1	
<i>hydrocortisone cream 1%</i>	1	
<i>hydrocortisone cream 2.5%</i>	1	
<i>hydrocortisone lotion 2.5%</i>	1	
<i>hydrocortisone oint 1%</i>	1	
<i>hydrocortisone oint 2.5%</i>	1	
<i>hydrocortisone valerate cream 0.2%</i>	1	QL (120g / 25 days)
<i>hydrocortisone valerate oint 0.2%</i>	1	QL (120g / 25 days)
<i>lokara lot 0.05%</i>	1	QL (120mL / 25 days)
<i>mometasone furoate cream 0.1%</i>	1	QL (120g / 25 days)

Drug Name	Drug Tier	Requirements/Limits
<i>mometasone furoate oint 0.1%</i>	1	QL (120g / 25 days)
<i>mometasone furoate solution 0.1% (lotion)</i>	1	QL (120mL / 25 days)
<i>prednicarbate cream 0.1%</i>	1	QL (120g / 25 days)
<i>prednicarbate oint 0.1%</i>	1	QL (120g / 25 days)
<i>triamcinolone acetonide aerosol soln 0.147 mg/gm</i>	1	
<i>triamcinolone acetonide cream 0.1%</i>	1	
<i>triamcinolone acetonide cream 0.5%</i>	1	
<i>triamcinolone acetonide cream 0.025%</i>	1	
<i>triamcinolone acetonide lotion 0.1%</i>	1	
<i>triamcinolone acetonide lotion 0.025%</i>	1	
<i>triamcinolone acetonide oint 0.1%</i>	1	
<i>triamcinolone acetonide oint 0.5%</i>	1	
<i>triamcinolone acetonide oint 0.025%</i>	1	
<i>triderm cre 0.1%</i>	1	

DERMATOLOGY, LOCAL ANESTHETICS

<i>lidocaine hcl soln 4%</i>	1	QL (50mL / 25 days)
<i>lidocaine hcl urethral/mucosal gel 2%</i>	1	QL (30gm / 25 days)
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	1	QL (30gm / 25 days)
<i>lidocaine-prilocaine cream kit 2.5-2.5%</i>	1	
<i>pramox gel 1%</i>	1	
SYNERA DIS 70-70MG	3	QL (2 patches / 25 days)
<i>7t lido gel 2%</i>	1	QL (30gm / 25 days)

DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE

<i>acyclovir oint 5%</i>	1	
AVAGE CRE 0.1%	3	
CONDYLOX GEL 0.5%	3	
DENAVIR CRE 1%	3	ST
<i>diclofenac sodium gel 1%</i>	1	QL (500g / 25 days)
<i>docosanol cream 10%</i>	1	OTC
EUCRISA OIN 2%	2	
<i>lactic acid (am monium lactate) cream 12%</i>	1	
<i>lactic acid (am monium lactate) lotion 10%</i>	1	
<i>lactic acid (am monium lactate) lotion 12%</i>	1	
<i>pimecrolimus cream 1%</i>	1	
<i>podofilox soln 0.5%</i>	1	
RECTIV OIN 0.4%	3	
<i>tacrolimus oint 0.1%</i>	1	
<i>tacrolimus oint 0.03%</i>	1	
TARGRETIN GEL 1%	3	PA
VEREGEN OIN 15%	3	

DERMATOLOGY, ROSACEA

<i>azelaic acid gel 15%</i>	1	
FINACEA AER 15%	2	

Drug Name	Drug Tier	Requirements/Limits
<i>metronidazole cream 0.75%</i>	1	
<i>metronidazole gel 0.75%</i>	1	
<i>metronidazole gel 1%</i>	1	
<i>metronidazole lotion 0.75%</i>	1	
MIRVASO GEL 0.33%	3	
<i>rosadan cre 0.75%</i>	1	
DERMATOLOGY, SCABICIDES AND PEDICULIDES		
<i>crotan lot 10%</i>	1	
EURAX CRE 10%	3	
<i>lice treatmt lot 1%</i>	1	OTC
<i>lice trtm nt liq 1%</i>	1	OTC
<i>lindane shampoo 1%</i>	1	
<i>malathion lotion 0.5%</i>	1	
<i>permethrin cream 5%</i>	1	
SKLICE LOT 0.5%	3	ST
<i>spinosad susp 0.9%</i>	1	
ULESFIA LOT 5%	3	ST
DERMATOLOGY, WOUND CARE AGENTS		
REGRANEX GEL 0.01%	3	PA
SANTYL OIN 250/GM	3	PA
<i>sodium chloride irrigation soln 0.9%</i>	1	
MOUTH/THROAT/DENTAL AGENTS		
<i>cevimeline hcl cap 30 mg</i>	1	
<i>chlorhexidine gluconate soln 0.12%</i>	1	
<i>clotrimazole troche 10 mg</i>	1	
<i>lidocaine hcl laryngotracheal soln 4%</i>	1	
<i>lidocaine hcl viscous soln 2%</i>	1	
<i>nystatin susp 100000 unit/ml</i>	1	
<i>oralone dent pst 0.1%</i>	1	
<i>periogard sol 0.12%</i>	1	
<i>pilocarpine hcl tab 5 mg</i>	1	
<i>pilocarpine hcl tab 7.5 mg</i>	1	
<i>triamcinolone acetonide dental paste 0.1%</i>	1	
OTIC		
<i>acetic acid 2% in aluminum acetate otic soln</i>	1	
<i>acetic acid otic soln 2%</i>	1	
CIPRO HC SUS OTIC	3	
CIPRODEX SUS 0.3-0.1%	2	
COLY-MYCIN S SUS OTIC	3	
<i>fluocinolone acetonide (otic) oil 0.01%</i>	1	
<i>hydrocortisone w/ acetic acid otic soln 1-2%</i>	1	
<i>neomycin-polymyxin-hc otic soln 1%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	1	
<i>ofloxacin otic soln 0.3%</i>	1	

Index

7

7t lido gel 2% 118

A

abacavir sulfate soln 20 mg/ml (base equiv) 13

abacavir sulfate tab 300 mg (base equiv) 13

abacavir sulfate-lamivudine tab 600-300 mg..... 15

abacavir sulfate-lamivudine-zidovudine tab 300-150-300 mg..... 15

abiraterone acetate tab 250 mg..... 25

ABRAXANE INJ 100MG..... 23

acamprosate calcium tab delayed release 333 mg 68

acarbose tab 100 mg..... 69

acarbose tab 25 mg 69

acarbose tab 50 mg 69

ACCU-CHEK BLOOD GLUCOSE TEST KITS 100

ACCU-CHEK BLOOD GLUCOSE TEST STRIPS 100

acebutolol hcl cap 200 mg 38

acebutolol hcl cap 400 mg 38

acetaminophen w/ codeine soln 120-12 mg/5ml..... 3

acetaminophen w/ codeine tab 300-15 mg..... 3

acetaminophen w/ codeine tab 300-30 mg..... 3

acetaminophen w/ codeine tab 300-60 mg..... 3

acetazolamide cap er 12hr 500 mg 42

acetazolamide sodium for inj 500 mg . 42

acetazolamide tab 125 mg..... 42

acetazolamide tab 250 mg..... 42

acetic acid 2% in aluminum acetate otic soln 119

acetic acid otic soln 2% 119

acetylcysteine inhal soln 10%..... 109

acetylcysteine inhal soln 20%..... 109

acitretin cap 10 mg 115

acitretin cap 17.5 mg 115

acitretin cap 25 mg 115

acne cleansi bar 10% 112

acne medicat gel 5% 112

ACNE MEDICAT LOT 10% 112

ACNE MEDICAT LOT 5% 112

ACTEMRA INJ 162/0.9 93

ACTEMRA INJ 200/10ML..... 93

ACTEMRA INJ 400/20ML..... 93

ACTEMRA INJ 80MG/4ML..... 93

ACTHIB INJ 97

ACUVAIL SOL 0.45% 104

acyclovir cap 200 mg 16

acyclovir oint 5% 118

acyclovir susp 200 mg/5ml..... 16

acyclovir tab 400 mg..... 16

acyclovir tab 800 mg..... 16

ADACEL INJ 97

adapalene cream 0.1%..... 112

adapalene gel 0.1% 112

adapalene gel 0.3% 112

adapalene lotion 0.1%..... 112

adapalene-benzoyl peroxide gel 0.1-2.5% 112

adefovir dipivoxil tab 10 mg 16

ADEMPAS TAB 0.5MG 44

ADEMPAS TAB 1.5MG 44

ADEMPAS TAB 1MG 44

ADEMPAS TAB 2.5MG 44

ADEMPAS TAB 2MG 44

adrucil inj 2.5g/50m..... 22

adrucil inj 500/10ml..... 22

ADULT RESPIRATORY MASK 100

ADVAIR DISKU AER 100/50..... 111

ADVAIR DISKU AER 250/50..... 111

ADVAIR DISKU AER 500/50..... 111

ADVAIR HFA AER 115/21..... 111

ADVAIR HFA AER 230/21..... 111

ADVAIR HFA AER 45/21..... 111

afeditab tab 30mg cr..... 40

afeditab tab 60mg cr..... 40

AFINITOR DIS TAB 2MG 25

AFINITOR DIS TAB 3MG 25

AFINITOR DIS TAB 5MG 25

AFINITOR TAB 10MG..... 26

AFINITOR TAB 2.5MG..... 26

AFINITOR TAB 5MG..... 26

AFINITOR TAB 7.5MG..... 26

AFLURIA QUAD INJ 2019-20..... 97

AKYNZEO CAP 300-0.5..... 84

<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	108	<i>alogliptin benzoate tab 12.5 mg (base equiv)</i>	70
<i>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)</i>	108	<i>alogliptin benzoate tab 25 mg (base equiv)</i>	70
<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	108	<i>alogliptin benzoate tab 6.25 mg (base equiv)</i>	70
<i>albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)</i>	108	<i>ALOMIDE SOL 0.1% OP</i>	104
<i>albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)</i>	108	<i>alose tron hcl tab 0.5 mg (base equiv)</i> .	86
<i>albuterol sulfate syrup 2 mg/5ml</i>	108	<i>alose tron hcl tab 1 mg (base equiv)</i>	86
<i>albuterol sulfate tab 2 mg</i>	108	<i>alphatrex gel 0.05%</i>	116
<i>albuterol sulfate tab 4 mg</i>	108	<i>ALPRAZOLAM CON 1 MG/ML</i>	46
<i>albuterol sulfate tab er 12hr 4 mg</i>	108	<i>alprazolam orally disintegrating tab 0.25 mg</i>	46
<i>albuterol sulfate tab er 12hr 8 mg</i>	108	<i>alprazolam orally disintegrating tab 0.5 mg</i>	46
<i>alclometasone dipropionate cream 0.05%</i>	116	<i>alprazolam orally disintegrating tab 1 mg</i>	46
<i>alclometasone dipropionate oint 0.05%</i>	116	<i>alprazolam orally disintegrating tab 2 mg</i>	46
<i>ALCOHOL PREP WIPES AND SWABS</i> ..	100	<i>alprazolam tab 0.25 mg</i>	46
<i>ALCOH-WIPE MIS 12"X12"</i>	100	<i>alprazolam tab 0.5 mg</i>	46
<i>ALDACTAZIDE TAB 50/50</i>	42	<i>alprazolam tab 1 mg</i>	46
<i>ALECENSA CAP 150MG</i>	26	<i>alprazolam tab 2 mg</i>	46
<i>alendronate sodium oral soln 70 mg/75ml</i>	73	<i>ALREX SUS 0.2%</i>	104
<i>alendronate sodium tab 10 mg</i>	73	<i>ALTABAX OIN 1%</i>	114
<i>alendronate sodium tab 35 mg</i>	73	<i>altavera tab</i>	74
<i>alendronate sodium tab 40 mg</i>	73	<i>alyacen tab 1/35</i>	74
<i>alendronate sodium tab 5 mg</i>	73	<i>alyacen tab 7/7/7</i>	74
<i>alendronate sodium tab 70 mg</i>	73	<i>amantadine hcl cap 100 mg</i>	56
<i>ALFERON N INJ 5MU/ML</i>	96	<i>amantadine hcl syrup 50 mg/5ml</i>	56
<i>alfuzosin hcl tab er 24hr 10 mg</i>	89	<i>amantadine hcl tab 100 mg</i>	56
<i>ALIMTA INJ 100MG</i>	22	<i>ambrisentan tab 10 mg</i>	45
<i>ALIMTA INJ 500MG</i>	22	<i>ambrisentan tab 5 mg</i>	45
<i>ALINIA SUS 100/5ML</i>	11	<i>amcinonide cream 0.1%</i>	116
<i>ALINIA TAB 500MG</i>	11	<i>amcinonide lotion 0.1%</i>	116
<i>aliskiren fumarate tab 150 mg (base equivalent)</i>	42	<i>AMCINONIDE OIN 0.1%</i>	116
<i>aliskiren fumarate tab 300 mg (base equivalent)</i>	42	<i>amethia tab</i>	74
<i>all day allg cap 10mg</i>	107	<i>amethyst tab 90-20mcg</i>	74
<i>all day allg chw 10mg</i>	107	<i>amifostine for inj 500 mg</i>	29
<i>allergy relf tab 10mg</i>	107	<i>amiloride & hydrochlorothiazide tab 5-50 mg</i>	42
<i>allopurinol tab 100 mg</i>	1	<i>amiloride hcl tab 5 mg</i>	42
<i>allopurinol tab 300 mg</i>	1	<i>amiodarone hcl tab 200 mg</i>	35
<i>almotriptan malate tab 12.5 mg</i>	63	<i>amiodarone hcl tab 400 mg</i>	35
<i>almotriptan malate tab 6.25 mg</i>	63	<i>AMITIZA CAP 24MCG</i>	86
<i>ALOCRIIL SOL 2%</i>	104	<i>AMITIZA CAP 8MCG</i>	86
		<i>amitriptyline hcl tab 10 mg</i>	51
		<i>amitriptyline hcl tab 100 mg</i>	51

<i>amitriptyline hcl tab 150 mg</i>	51	<i>amlodipine besylate-olmesartan</i>	
<i>amitriptyline hcl tab 25 mg</i>	51	<i>medoxomil tab 5-20 mg</i>	33
<i>amitriptyline hcl tab 50 mg</i>	51	<i>amlodipine besylate-olmesartan</i>	
<i>amitriptyline hcl tab 75 mg</i>	51	<i>medoxomil tab 5-40 mg</i>	33
<i>amlodipine besylate tab 10 mg (base</i>		<i>amlodipine besylate-valsartan tab 10-</i>	
<i>equivalent)</i>	40	<i>160 mg</i>	33
<i>amlodipine besylate tab 2.5 mg (base</i>		<i>amlodipine besylate-valsartan tab 10-</i>	
<i>equivalent)</i>	40	<i>320 mg</i>	33
<i>amlodipine besylate tab 5 mg (base</i>		<i>amlodipine besylate-valsartan tab 5-160</i>	
<i>equivalent)</i>	40	<i>mg</i>	33
<i>amlodipine besylate-atorvastatin calcium</i>		<i>amlodipine besylate-valsartan tab 5-320</i>	
<i>tab 10-10 mg</i>	40	<i>mg</i>	33
<i>amlodipine besylate-atorvastatin calcium</i>		<i>amlodipine-valsartan-hydrochlorothiazide</i>	
<i>tab 10-20 mg</i>	40	<i>tab 10-160-12.5 mg</i>	33
<i>amlodipine besylate-atorvastatin calcium</i>		<i>amlodipine-valsartan-hydrochlorothiazide</i>	
<i>tab 10-40 mg</i>	40	<i>tab 10-160-25 mg</i>	33
<i>amlodipine besylate-atorvastatin calcium</i>		<i>amlodipine-valsartan-hydrochlorothiazide</i>	
<i>tab 10-80 mg</i>	40	<i>tab 10-320-25 mg</i>	33
<i>amlodipine besylate-atorvastatin calcium</i>		<i>amlodipine-valsartan-hydrochlorothiazide</i>	
<i>tab 2.5-10 mg</i>	39	<i>tab 5-160-12.5 mg</i>	33
<i>amlodipine besylate-atorvastatin calcium</i>		<i>amlodipine-valsartan-hydrochlorothiazide</i>	
<i>tab 2.5-20 mg</i>	39	<i>tab 5-160-25 mg</i>	33
<i>amlodipine besylate-atorvastatin calcium</i>		<i>amnestem cap 10mg</i>	112
<i>tab 2.5-40 mg</i>	39	<i>amnestem cap 20mg</i>	112
<i>amlodipine besylate-atorvastatin calcium</i>		<i>amnestem cap 40mg</i>	112
<i>tab 5-10 mg</i>	39	<i>amoxapine tab 100 mg</i>	51
<i>amlodipine besylate-atorvastatin calcium</i>		<i>amoxapine tab 150 mg</i>	51
<i>tab 5-20 mg</i>	39	<i>amoxapine tab 25 mg</i>	51
<i>amlodipine besylate-atorvastatin calcium</i>		<i>amoxapine tab 50 mg</i>	51
<i>tab 5-40 mg</i>	39	<i>amoxicillin & k clavulanate chew tab 200-</i>	
<i>amlodipine besylate-atorvastatin calcium</i>		<i>28.5 mg</i>	19
<i>tab 5-80 mg</i>	40	<i>amoxicillin & k clavulanate chew tab 400-</i>	
<i>amlodipine besylate-benazepril hcl cap</i>		<i>57 mg</i>	20
<i>10-20 mg</i>	30	<i>amoxicillin & k clavulanate for susp 200-</i>	
<i>amlodipine besylate-benazepril hcl cap</i>		<i>28.5 mg/5ml</i>	20
<i>10-40 mg</i>	30	<i>amoxicillin & k clavulanate for susp 250-</i>	
<i>amlodipine besylate-benazepril hcl cap</i>		<i>62.5 mg/5ml</i>	20
<i>2.5-10 mg</i>	30	<i>amoxicillin & k clavulanate for susp 400-</i>	
<i>amlodipine besylate-benazepril hcl cap 5-</i>		<i>57 mg/5ml</i>	20
<i>10 mg</i>	30	<i>amoxicillin & k clavulanate for susp 600-</i>	
<i>amlodipine besylate-benazepril hcl cap 5-</i>		<i>42.9 mg/5ml</i>	20
<i>20 mg</i>	30	<i>amoxicillin & k clavulanate tab 250-125</i>	
<i>amlodipine besylate-benazepril hcl cap 5-</i>		<i>mg</i>	20
<i>40 mg</i>	30	<i>amoxicillin & k clavulanate tab 500-125</i>	
<i>amlodipine besylate-olmesartan</i>		<i>mg</i>	20
<i>medoxomil tab 10-20 mg</i>	33	<i>amoxicillin & k clavulanate tab 875-125</i>	
<i>amlodipine besylate-olmesartan</i>		<i>mg</i>	20
<i>medoxomil tab 10-40 mg</i>	33	<i>amoxicillin & k clavulanate tab er 12hr</i>	

1000-62.5 mg.....	20	anagrelide hcl cap 0.5 mg	92
amoxicillin (trihydrate) cap 250 mg	20	anagrelide hcl cap 1 mg	92
amoxicillin (trihydrate) cap 500 mg	20	anastrozole tab 1 mg.....	25
amoxicillin (trihydrate) chew tab 125 mg		ANNOVERA MIS	74
.....	20	anti-diarrhe tab 2mg	87
amoxicillin (trihydrate) chew tab 250 mg		antifungal cre 1%.....	114
.....	20	antifungal cre 2%.....	114
amoxicillin (trihydrate) for susp 125		anti-fungal pow 1%.....	114
mg/5ml.....	20	APOKYN INJ 10MG/ML.....	56
amoxicillin (trihydrate) for susp 200		apraclonidine hcl ophth soln 0.5% (base	
mg/5ml.....	20	equivalent).....	105
amoxicillin (trihydrate) for susp 250		aprepitant capsule 125 mg	84
mg/5ml.....	20	aprepitant capsule 40 mg	84
amoxicillin (trihydrate) for susp 400		aprepitant capsule 80 mg	84
mg/5ml.....	20	aprepitant capsule therapy pack 80 &	
amoxicillin (trihydrate) tab 500 mg.....	20	125 mg	84
amoxicillin (trihydrate) tab 875 mg.....	20	apri tab	74
amphetamine-dextroamphetamine cap er		APRISO CAP 0.375GM	86
24hr 10 mg.....	60	APTiom TAB 200MG	46
amphetamine-dextroamphetamine cap er		APTiom TAB 400MG	46
24hr 15 mg.....	60	APTiom TAB 600MG	46
amphetamine-dextroamphetamine cap er		APTiom TAB 800MG	46
24hr 20 mg.....	60	APTIVUS CAP 250MG.....	13
amphetamine-dextroamphetamine cap er		APTIVUS SOL	13
24hr 25 mg.....	60	aranelle tab.....	74
amphetamine-dextroamphetamine cap er		ARANESP INJ 100MCG.....	92
24hr 30 mg.....	60	ARANESP INJ 10MCG.....	92
amphetamine-dextroamphetamine cap er		ARANESP INJ 150MCG.....	92
24hr 5 mg.....	60	ARANESP INJ 200MCG.....	92
amphetamine-dextroamphetamine tab		ARANESP INJ 25MCG.....	92
10 mg.....	60	ARANESP INJ 300MCG.....	92
amphetamine-dextroamphetamine tab		ARANESP INJ 40MCG.....	92
12.5 mg.....	60	ARANESP INJ 500MCG.....	92
amphetamine-dextroamphetamine tab		ARANESP INJ 60MCG.....	92
15 mg.....	60	ARGATRB/NACL INJ 50MG/50.....	90
amphetamine-dextroamphetamine tab		ARGATROBAN INJ 125/125.....	90
20 mg.....	60	argatroban inj 250 mg/2.5ml	
amphetamine-dextroamphetamine tab		(concentrate for iv infusion)	90
30 mg.....	60	ARGATROBAN INJ 250/250.....	90
amphetamine-dextroamphetamine tab 5		aripiprazole oral solution 1 mg/ml	57
mg.....	60	aripiprazole orally disintegrating tab 10	
amphetamine-dextroamphetamine tab		mg.....	57
7.5 mg.....	60	aripiprazole orally disintegrating tab 15	
amphotericin b for iv soln 50 mg	12	mg.....	57
ampicillin cap 250 mg.....	20	aripiprazole tab 10 mg	57
ampicillin cap 500 mg.....	20	aripiprazole tab 15 mg	57
ampicillin for susp 125 mg/5ml.....	20	aripiprazole tab 2 mg	57
ampicillin for susp 250 mg/5ml.....	20	aripiprazole tab 20 mg	57

<i>aripiprazole tab 30 mg</i>	57	.....	61
<i>aripiprazole tab 5 mg</i>	57	<i>atomoxetine hcl cap 60 mg (base equiv)</i>	61
ARISTADA INJ 1064MG	57	.....	61
ARISTADA INJ 441MG/1.....	57	<i>atomoxetine hcl cap 80 mg (base equiv)</i>	61
ARISTADA INJ 662MG/2	57	.....	61
ARISTADA INJ 882MG/3.....	57	<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	36
ARISTADA INJ INITIO.....	58	<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	36
<i>armodafinil tab 150 mg</i>	68	<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	36
<i>armodafinil tab 200 mg</i>	68	<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	36
<i>armodafinil tab 250 mg</i>	68	<i>atovaquone susp 750 mg/5ml</i>	11
<i>armodafinil tab 50 mg</i>	68	<i>atovaquone-proguanil hcl tab 250-100 mg</i>	13
ARRANON INJ 5MG/ML.....	22	<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	13
<i>arsenic trioxide inj 10 mg/10ml (1 mg/ml)</i>	29	ATROPINE SUL SOL 1% OP.....	105
<i>ashlyna tab</i>	74	AUBAGIO TAB 14MG.....	65
ASMANEX 120 AER 220MCG	111	AUBAGIO TAB 7MG	65
ASMANEX 30 AER 110MCG.....	111	AUGMENTIN SUS 125/5ML	20
ASMANEX 30 AER 220MCG.....	111	AVAGE CRE 0.1%	118
ASMANEX 60 AER 220MCG.....	111	<i>aviane tab</i>	74
ASMANEX HFA AER 100 MCG.....	111	<i>avidoxy tab 100mg</i>	20
ASMANEX HFA AER 200 MCG.....	111	<i>avita cre 0.025%</i>	112
<i>aspirin chw 81mg</i>	11	<i>avita gel 0.025%</i>	112
<i>aspirin low tab 81mg ec</i>	11	AVONEX KIT 30MCG.....	66
<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	93	AVONEX PEN KIT 30MCG.....	66
<i>atazanavir sulfate cap 150 mg (base equiv)</i>	13	AVONEX PREFL KIT 30MCG.....	66
<i>atazanavir sulfate cap 200 mg (base equiv)</i>	13	<i>azacitidine for inj 100 mg</i>	22
<i>atazanavir sulfate cap 300 mg (base equiv)</i>	13	AZASITE SOL 1%	103
<i>atenolol & chlorthalidone tab 100-25 mg</i>	38	<i>azathioprine tab 50 mg</i>	97
<i>atenolol & chlorthalidone tab 50-25 mg</i>	38	<i>azelaic acid gel 15%</i>	118
<i>atenolol tab 100 mg</i>	38	<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	107
<i>atenolol tab 25 mg</i>	38	<i>azelastine hcl nasal spray 0.15% (205.5 mcg/spray)</i>	107
<i>atenolol tab 50 mg</i>	38	<i>azelastine hcl ophth soln 0.05%</i>	104
<i>ath foot spr aer 1%</i>	114	AZELEX CRE 20%.....	112
<i>atomoxetine hcl cap 10 mg (base equiv)</i>	61	<i>azithromycin for susp 100 mg/5ml</i>	18
<i>atomoxetine hcl cap 100 mg (base equiv)</i>	61	<i>azithromycin for susp 200 mg/5ml</i>	18
<i>atomoxetine hcl cap 18 mg (base equiv)</i>	61	<i>azithromycin powd pack for susp 1 gm</i> 18	
<i>atomoxetine hcl cap 25 mg (base equiv)</i>	61	<i>azithromycin tab 250 mg</i>	18
<i>atomoxetine hcl cap 40 mg (base equiv)</i>	61	<i>azithromycin tab 500 mg</i>	18
		<i>azithromycin tab 600 mg</i>	18
		AZOPT SUS 1% OP.....	105
		<i>aztreonam for inj 1 gm</i>	11

<i>aztreonam for inj 2 gm</i>	11
<i>azurette tab 28 day</i>	74
B	
<i>bacitracin oin 500/gm</i>	114
<i>bacitracin ophth oint 500 unit/gm</i>	103
<i>bacitracin-polymyxin b ophth oint</i>	103
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	103
<i>baclofen tab 10 mg</i>	66
<i>baclofen tab 20 mg</i>	66
<i>baclofen tab 5 mg</i>	66
<i>BALCOLTRA TAB 0.1-20</i>	74
<i>balsalazide disodium cap 750 mg</i>	86
<i>BANZEL SUS 40MG/ML</i>	46
<i>BANZEL TAB 200MG</i>	46
<i>BANZEL TAB 400MG</i>	46
<i>BARACLUDE SOL .05MG/ML</i>	16
<i>BASAGLAR KWIKPEN</i>	71
<i>BELBUCA MIS 150MCG</i>	10
<i>BELBUCA MIS 300MCG</i>	10
<i>BELBUCA MIS 450MCG</i>	10
<i>BELBUCA MIS 600MCG</i>	10
<i>BELBUCA MIS 750MCG</i>	10
<i>BELBUCA MIS 75MCG</i>	10
<i>BELBUCA MIS 900MCG</i>	10
<i>BELSOMRA TAB 10MG</i>	63
<i>BELSOMRA TAB 15MG</i>	63
<i>BELSOMRA TAB 20MG</i>	63
<i>BELSOMRA TAB 5MG</i>	63
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	30
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	31
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	31
<i>benazepril & hydrochlorothiazide tab 5-6.25 mg</i>	30
<i>benazepril hcl tab 10 mg</i>	31
<i>benazepril hcl tab 20 mg</i>	31
<i>benazepril hcl tab 40 mg</i>	31
<i>benazepril hcl tab 5 mg</i>	31
<i>BENZIQL GEL 5.25%</i>	112
<i>BENZIQL LS GEL 2.75%</i>	112
<i>benziq wash liq 5.25%</i>	112
<i>benzonatate cap 100 mg</i>	109
<i>benzonatate cap 200 mg</i>	109
<i>benzoyl per gel 10%</i>	112
<i>BENZOYL PER GEL 2.5%</i>	112

<i>benzoyl per liq 10% wash</i>	112
<i>benzoyl per liq 5% wash</i>	112
<i>BENZOYL PER LIQ 6%</i>	112
<i>benzoyl peroxide gel 5%</i>	112
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	112
<i>benztropine mesylate tab 0.5 mg</i>	56
<i>benztropine mesylate tab 1 mg</i>	56
<i>benztropine mesylate tab 2 mg</i>	56
<i>BEPREVE DRO 1.5%</i>	105
<i>BESIVANCE SUS 0.6%</i>	103
<i>betamethasone dipropionate augmented cream 0.05%</i>	116
<i>betamethasone dipropionate augmented gel 0.05%</i>	116
<i>betamethasone dipropionate augmented lotion 0.05%</i>	116
<i>betamethasone dipropionate augmented oint 0.05%</i>	116
<i>betamethasone dipropionate cream 0.05%</i>	116
<i>betamethasone dipropionate lotion 0.05%</i>	116
<i>betamethasone dipropionate oint 0.05%</i>	116
<i>betamethasone valerate aerosol foam 0.12%</i>	116
<i>betamethasone valerate cream 0.1% (base equivalent)</i>	116
<i>betamethasone valerate lotion 0.1% (base equivalent)</i>	116
<i>betamethasone valerate oint 0.1% (base equivalent)</i>	116
<i>BETASERON INJ 0.3MG</i>	66
<i>betaxolol hcl ophth soln 0.5%</i>	105
<i>betaxolol hcl tab 10 mg</i>	38
<i>betaxolol hcl tab 20 mg</i>	38
<i>bethanechol chloride tab 10 mg</i>	89
<i>bethanechol chloride tab 25 mg</i>	89
<i>bethanechol chloride tab 5 mg</i>	89
<i>bethanechol chloride tab 50 mg</i>	89
<i>BETIMOL SOL 0.25%</i>	105
<i>BETIMOL SOL 0.5%</i>	105
<i>BETOPTIC-S SUS 0.25% OP</i>	105
<i>BEVESPI AER 9-4.8MCG</i>	106
<i>bexarotene cap 75 mg</i>	29
<i>BEXSERO INJ</i>	97
<i>bicalutamide tab 50 mg</i>	25

BIKTARVY TAB	15	equivalent)	56
<i>bimatoprost ophth soln 0.03%</i>	105	<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	56
BIO-STATIN CAP 1000000	12	<i>brompheniramine tannate chew tab 12 mg</i>	107
BIO-STATIN CAP 500000	12	<i>budesonide delayed release particles cap 3 mg</i>	86
<i>bio-statin pow</i>	12	<i>budesonide inhalation susp 0.25 mg/2ml</i>	111
<i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg</i>	38	<i>budesonide inhalation susp 0.5 mg/2ml</i>	111
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	38	<i>budesonide inhalation susp 1 mg/2ml</i>	111
<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	38	<i>bumetanide tab 0.5 mg</i>	42
<i>bisoprolol fumarate tab 10 mg</i>	38	<i>bumetanide tab 1 mg</i>	42
<i>bisoprolol fumarate tab 5 mg</i>	38	<i>bumetanide tab 2 mg</i>	42
<i>bleomycin sulfate for inj 15 unit</i>	22	<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	10
<i>bleomycin sulfate for inj 30 unit</i>	22	<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	10
BLEPHAMIDE OIN S.O.P.	103	<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	3
BLEPHAMIDE SUS OP	103	<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	2
BLOOD GLUCOSE CALIBRATION SOLUTION	100	<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	2
BOOSTRIX INJ	97	<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	2
<i>bosentan tab 125 mg</i>	45	<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	3
<i>bosentan tab 62.5 mg</i>	45	<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	3
BOSULIF TAB 100MG	26	<i>bupropion hcl tab 100 mg</i>	51
BOSULIF TAB 400MG	26	<i>bupropion hcl tab 75 mg</i>	51
BOSULIF TAB 500MG	26	<i>bupropion hcl tab er 12hr 100 mg</i>	51
<i>bp gel gel 10%</i>	112	<i>bupropion hcl tab er 12hr 150 mg</i>	52
<i>bp wash liq 2.5%</i>	112	<i>bupropion hcl tab er 12hr 200 mg</i>	52
<i>bp wash liq 5%</i>	112	<i>bupropion hcl tab er 24hr 150 mg</i>	52
<i>bpo-5 wash liq 5%</i>	112	<i>bupropion hcl tab er 24hr 300 mg</i>	52
BREO ELLIPTA INH 100-25	111	<i>buspirone hcl tab 10 mg</i>	64
BREO ELLIPTA INH 200-25	111	<i>buspirone hcl tab 15 mg</i>	64
BRILINTA TAB 60MG	93	<i>buspirone hcl tab 30 mg</i>	65
BRILINTA TAB 90MG	93	<i>buspirone hcl tab 5 mg</i>	64
<i>brimonidine tartrate ophth soln 0.15%</i>	105	<i>buspirone hcl tab 7.5 mg</i>	64
<i>brimonidine tartrate ophth soln 0.2%</i>	105	<i>busulfan inj 6 mg/ml</i>	21
BRIVIACT INJ 50MG/5ML	46	<i>butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg</i>	3
BRIVIACT SOL 10MG/ML	46	<i>butalbital-acetaminophen-caffeine cap 50-300-40 mg</i>	1
BRIVIACT TAB 100MG	46		
BRIVIACT TAB 10MG	46		
BRIVIACT TAB 25MG	46		
BRIVIACT TAB 50MG	46		
BRIVIACT TAB 75MG	46		
<i>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</i>	104		
<i>bromfenac sodium ophth soln 0.09% (base equivalent)</i>	104		
<i>bromocriptine mesylate cap 5 mg (base</i>			

<i>butalbital-acetaminophen-caffeine cap</i>	
<i>50-325-40 mg</i>	1
<i>butalbital-acetaminophen-caffeine tab</i>	
<i>50-325-40 mg</i>	1
<i>butalbital-aspirin-caffeine cap 50-325-40</i>	
<i>mg</i>	1
<i>butenafine hcl cream 1%</i>	114
<i>butorphanol tartrate nasal soln 10 mg/ml</i>	
.....	3
BYSTOLIC TAB 10MG.....	38
BYSTOLIC TAB 2.5MG.....	38
BYSTOLIC TAB 20MG.....	38
BYSTOLIC TAB 5MG.....	38
BYVALSON TAB 5-80MG	33
C	
<i>cabergoline tab 0.5 mg</i>	81
<i>calcipotriene cream 0.005%</i>	115
<i>calcipotriene oint 0.005%</i>	115
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	
.....	115
<i>calcipotriene-betamethasone</i>	
<i>dipropionate oint 0.005-0.064%</i>	116
<i>calcitonin (salmon) nasal soln 200</i>	
<i>unit/act</i>	81
<i>calcitriol cap 0.25 mcg</i>	102
<i>calcitriol cap 0.5 mcg</i>	102
<i>calcitriol oint 3 mcg/gm</i>	115
<i>calcitriol oral soln 1 mcg/ml</i>	102
<i>calcium acetate (phosphate binder) cap</i>	
<i>667 mg (169 mg ca)</i>	82
<i>calcium acetate (phosphate binder) tab</i>	
<i>667 mg</i>	82
CALQUENCE CAP 100MG	26
<i>camila tab 0.35mg</i>	74
CAMPTOSAR INJ 300/15ML.....	30
<i>candesartan cilexetil tab 16 mg</i>	34
<i>candesartan cilexetil tab 32 mg</i>	34
<i>candesartan cilexetil tab 4 mg</i>	34
<i>candesartan cilexetil tab 8 mg</i>	34
<i>candesartan cilexetil-hydrochlorothiazide</i>	
<i>tab 16-12.5 mg</i>	33
<i>candesartan cilexetil-hydrochlorothiazide</i>	
<i>tab 32-12.5 mg</i>	33
<i>candesartan cilexetil-hydrochlorothiazide</i>	
<i>tab 32-25 mg</i>	33
<i>capecitabine tab 150 mg</i>	22
<i>capecitabine tab 500 mg</i>	22
CAPITAL/COD SUS 120-12/5	3

CAPRELSA TAB 100MG	26
CAPRELSA TAB 300MG	26
<i>captopril & hydrochlorothiazide tab 25-15</i>	
<i>mg</i>	31
<i>captopril & hydrochlorothiazide tab 25-25</i>	
<i>mg</i>	31
<i>captopril & hydrochlorothiazide tab 50-15</i>	
<i>mg</i>	31
<i>captopril & hydrochlorothiazide tab 50-25</i>	
<i>mg</i>	31
<i>captopril tab 100 mg</i>	32
<i>captopril tab 12.5 mg</i>	31
<i>captopril tab 25 mg</i>	32
<i>captopril tab 50 mg</i>	32
CARAFATE SUS 1GM/10ML	87
<i>carbamazepine cap er 12hr 100 mg</i>	46
<i>carbamazepine cap er 12hr 200 mg</i>	46
<i>carbamazepine cap er 12hr 300 mg</i>	46
<i>carbamazepine chew tab 100 mg</i>	46
<i>carbamazepine susp 100 mg/5ml</i>	47
<i>carbamazepine tab 200 mg</i>	47
<i>carbamazepine tab er 12hr 100 mg</i>	47
<i>carbamazepine tab er 12hr 200 mg</i>	47
<i>carbamazepine tab er 12hr 400 mg</i>	47
<i>carbidopa & levodopa orally</i>	
<i>disintegrating tab 10-100 mg</i>	56
<i>carbidopa & levodopa orally</i>	
<i>disintegrating tab 25-100 mg</i>	56
<i>carbidopa & levodopa orally</i>	
<i>disintegrating tab 25-250 mg</i>	56
<i>carbidopa & levodopa tab 10-100 mg</i> .	56
<i>carbidopa & levodopa tab 25-100 mg</i> .	56
<i>carbidopa & levodopa tab 25-250 mg</i> .	56
<i>carbidopa & levodopa tab er 25-100 mg</i>	
.....	56
<i>carbidopa & levodopa tab er 50-200 mg</i>	
.....	56
<i>carbidopa tab 25 mg</i>	56
<i>carbidopa-levodopa-entacapone tabs</i>	
<i>12.5-50-200 mg</i>	56
<i>carbidopa-levodopa-entacapone tabs</i>	
<i>18.75-75-200 mg</i>	56
<i>carbidopa-levodopa-entacapone tabs 25-</i>	
<i>100-200 mg</i>	56
<i>carbidopa-levodopa-entacapone tabs</i>	
<i>31.25-125-200 mg</i>	56
<i>carbidopa-levodopa-entacapone tabs</i>	
<i>37.5-150-200 mg</i>	56

<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	56	<i>mg/5ml</i>	17
<i>carbinoxamine maleate tab 4 mg</i>	107	<i>cefpodoxime proxetil for susp 50 mg/5ml</i>	17
<i>carboplatin iv soln 150 mg/15ml</i>	29	<i>cefpodoxime proxetil tab 100 mg</i>	17
<i>carboplatin iv soln 450 mg/45ml</i>	29	<i>cefpodoxime proxetil tab 200 mg</i>	17
<i>carboplatin iv soln 50 mg/5ml</i>	29	<i>cefprozil for susp 125 mg/5ml</i>	17
<i>carboplatin iv soln 600 mg/60ml</i>	29	<i>cefprozil for susp 250 mg/5ml</i>	17
<i>CARDIZEM LA TAB 120MG</i>	40	<i>cefprozil tab 250 mg</i>	17
<i>CARDURA XL TAB 4MG</i>	89	<i>cefprozil tab 500 mg</i>	17
<i>CARDURA XL TAB 8MG</i>	89	<i>ceftazidime for inj 2 gm</i>	17
<i>carisoprodol tab 250 mg</i>	67	<i>ceftibuten cap 400 mg</i>	17
<i>carisoprodol tab 350 mg</i>	67	<i>ceftibuten for susp 180 mg/5ml</i>	17
<i>carmustine for inj 100 mg</i>	21	<i>CEFTIN SUS 125/5ML</i>	17
<i>carteolol hcl ophth soln 1%</i>	105	<i>CEFTIN SUS 250/5ML</i>	17
<i>cartia xt cap 120/24hr</i>	40	<i>ceftriaxone sodium for inj 1 gm</i>	17
<i>cartia xt cap 180/24hr</i>	40	<i>ceftriaxone sodium for inj 10 gm</i>	17
<i>cartia xt cap 240/24hr</i>	40	<i>ceftriaxone sodium for inj 2 gm</i>	17
<i>cartia xt cap 300/24hr</i>	40	<i>ceftriaxone sodium for inj 250 mg</i>	18
<i>carvedilol tab 12.5 mg</i>	38	<i>ceftriaxone sodium for inj 500 mg</i>	18
<i>carvedilol tab 25 mg</i>	38	<i>ceftriaxone sodium for iv soln 1 gm</i>	18
<i>carvedilol tab 3.125 mg</i>	38	<i>ceftriaxone sodium for iv soln 2 gm</i>	18
<i>carvedilol tab 6.25 mg</i>	38	<i>cefuroxime axetil tab 250 mg</i>	18
<i>CAYA DPR</i>	99	<i>cefuroxime axetil tab 500 mg</i>	18
<i>CAYSTON INH 75MG</i>	11	<i>celecoxib cap 100 mg</i>	1
<i>caziant pak</i>	74	<i>celecoxib cap 200 mg</i>	1
<i>cefaclor cap 250 mg</i>	17	<i>celecoxib cap 400 mg</i>	1
<i>cefaclor cap 500 mg</i>	17	<i>celecoxib cap 50 mg</i>	1
<i>CEFACLOR ER TAB 500MG</i>	17	<i>CELONTIN CAP 300MG</i>	47
<i>cefaclor for susp 125 mg/5ml</i>	17	<i>CENTANY AT KIT 2%</i>	114
<i>cefaclor for susp 250 mg/5ml</i>	17	<i>cephalexin cap 250 mg</i>	18
<i>cefaclor for susp 375 mg/5ml</i>	17	<i>cephalexin cap 500 mg</i>	18
<i>cefadroxil cap 500 mg</i>	17	<i>cephalexin cap 750 mg</i>	18
<i>cefadroxil for susp 250 mg/5ml</i>	17	<i>cephalexin for susp 125 mg/5ml</i>	18
<i>cefadroxil for susp 500 mg/5ml</i>	17	<i>cephalexin for susp 250 mg/5ml</i>	18
<i>cefadroxil tab 1 gm</i>	17	<i>cephalexin tab 250 mg</i>	18
<i>cefdinir cap 300 mg</i>	17	<i>cephalexin tab 500 mg</i>	18
<i>cefdinir for susp 125 mg/5ml</i>	17	<i>CERDELGA CAP 84MG</i>	77
<i>cefdinir for susp 250 mg/5ml</i>	17	<i>cetirizine hcl chew tab 5 mg</i>	107
<i>cefditoren pivoxil tab 200 mg (base equivalent)</i>	17	<i>cetirizine hcl tab 10 mg</i>	107
<i>cefditoren pivoxil tab 400 mg (base equivalent)</i>	17	<i>cetirizine hcl tab 5 mg</i>	107
<i>cefepime hcl for inj 1 gm</i>	17	<i>cetirizine sol 1mg/ml</i>	107
<i>cefepime hcl for inj 2 gm</i>	17	<i>cevimeline hcl cap 30 mg</i>	119
<i>cefixime cap 400 mg</i>	17	<i>CHANTIX PAK 0.5& 1MG</i>	68
<i>cefixime for susp 100 mg/5ml</i>	17	<i>CHANTIX PAK 1MG</i>	68
<i>cefixime for susp 200 mg/5ml</i>	17	<i>CHANTIX TAB 0.5MG</i>	68
<i>cefpodoxime proxetil for susp 100</i>		<i>CHANTIX TAB 1MG</i>	68
		<i>chateal tab 0.15/30</i>	74
		<i>CHEMET CAP 100MG</i>	73

<i>cheratussin syp ac</i>	109	.....	19
<i>chlorhexidine gluconate soln 0.12%</i> ..	119	<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	19
<i>chloroquine phosphate tab 250 mg</i>	13	.....	19
<i>chloroquine phosphate tab 500 mg</i>	13	<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	19
<i>chlorothiazide tab 250 mg</i>	42	.....	19
<i>chlorothiazide tab 500 mg</i>	42	<i>ciprofloxacin-ciprofloxacin hcl tab er 24hr</i>	
<i>chlorpromazine hcl tab 10 mg</i>	58	<i>1000 mg(base eq)</i>	19
<i>chlorpromazine hcl tab 100 mg</i>	58	<i>ciprofloxacin-ciprofloxacin hcl tab er 24hr</i>	
<i>chlorpromazine hcl tab 200 mg</i>	58	<i>500 mg (base eq)</i>	19
<i>chlorpromazine hcl tab 25 mg</i>	58	<i>cisplatin inj 100 mg/100ml (1 mg/ml)</i>	29
<i>chlorpromazine hcl tab 50 mg</i>	58	<i>cisplatin inj 200 mg/200ml (1 mg/ml)</i>	29
<i>chlorthalidone tab 25 mg</i>	42	<i>cisplatin inj 50 mg/50ml (1 mg/ml)</i>	29
<i>chlorthalidone tab 50 mg</i>	42	<i>citalopram hydrobromide oral soln 10</i>	
<i>chlorzoxazone tab 500 mg</i>	67	<i>mg/5ml</i>	52
<i>cholecalciferol cap 50000 unit</i>	102	<i>citalopram hydrobromide tab 10 mg</i>	
<i>cholestyramine light powder 4 gm/dose</i>		<i>(base equiv)</i>	52
.....	36	<i>citalopram hydrobromide tab 20 mg</i>	
<i>cholestyramine light powder packets 4</i>		<i>(base equiv)</i>	52
<i>gm</i>	36	<i>citalopram hydrobromide tab 40 mg</i>	
<i>cholestyramine powder 4 gm/dose</i>	36	<i>(base equiv)</i>	52
<i>cholestyramine powder packets 4 gm</i>	36	CITRANATAL CAP HARMONY.....	102
CHOR GONADOT INJ 10000UNT.....	80	CITRANATAL CAP MEDLEY.....	102
<i>ciclopirox gel 0.77%</i>	114	CITRANATAL MIS.....	102
<i>ciclopirox olamine cream 0.77% (base</i>		CITRANATAL MIS 90 DHA.....	102
<i>equiv)</i>	114	CITRANATAL MIS B-CALM.....	102
<i>ciclopirox olamine susp 0.77% (base</i>		CITRANATAL PAK ASSURE.....	102
<i>equiv)</i>	114	CITRANATAL PAK DHA.....	102
<i>ciclopirox shampoo 1%</i>	114	CITRANATAL TAB BLOOM.....	102
<i>ciclopirox solution 8%</i>	114	CITRANATAL TAB RX.....	102
<i>cilostazol tab 100 mg</i>	92	<i>cladribine iv soln 10 mg/10ml (1 mg/ml)</i>	
<i>cilostazol tab 50 mg</i>	92	.....	22
CIMDUO TAB 300-300.....	15	<i>claravis cap 10mg</i>	112
<i>cimetidine hcl soln 300 mg/5ml</i>	86	<i>claravis cap 20mg</i>	112
<i>cimetidine tab 200 mg</i>	86	<i>claravis cap 30mg</i>	112
<i>cimetidine tab 300 mg</i>	86	<i>claravis cap 40mg</i>	112
<i>cimetidine tab 400 mg</i>	86	CLARINEX SYP 0.5MG/ML.....	107
<i>cimetidine tab 800 mg</i>	86	<i>clarithromycin for susp 125 mg/5ml</i> ...	18
CIPRO HC SUS OTIC.....	119	<i>clarithromycin for susp 250 mg/5ml</i> ...	18
CIPRODEX SUS 0.3-0.1%.....	119	<i>clarithromycin tab 250 mg</i>	18
<i>ciprofloxacin for oral susp 250 mg/5ml</i>		<i>clarithromycin tab 500 mg</i>	18
<i>(5%) (5 gm/100ml)</i>	19	<i>clarithromycin tab er 24hr 500 mg</i>	18
<i>ciprofloxacin for oral susp 500 mg/5ml</i>		<i>clean&clear cre 10%</i>	112
<i>(10%) (10 gm/100ml)</i>	19	CLEAR PORE LIQ 3.5%.....	112
<i>ciprofloxacin hcl ophth soln 0.3% (base</i>		<i>clearplex x gel 10%</i>	113
<i>equivalent)</i>	103	<i>clemastine fumarate tab 2.68 mg</i>	107
<i>ciprofloxacin hcl tab 100 mg (base equiv)</i>		CLENPIQ SOL.....	86
.....	19	CLEOCIN SUP 100MG.....	90
<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>		CLIMARA PRO DIS WEEKLY.....	77

CLINDACIN KIT PAC 1%	113
clindacin mis etz 1%	113
clindamycin hcl cap 150 mg.....	11
clindamycin hcl cap 300 mg.....	11
clindamycin hcl cap 75 mg.....	11
clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)	11
clindamycin phosphate foam 1%	113
clindamycin phosphate gel 1%	113
clindamycin phosphate lotion 1%	113
clindamycin phosphate soln 1%.....	113
clindamycin phosphate vaginal cream 2%	90
clindamycin phosphate-benzoyl peroxide gel 1.2-2.5%.....	113
clindamycin phosphate-benzoyl peroxide gel 1-5%.....	113
clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%	113
clobazam suspension 2.5 mg/ml.....	47
clobazam tab 10 mg.....	47
clobazam tab 20 mg.....	47
clobetasol propionate cream 0.05%..	116
clobetasol propionate foam 0.05%....	116
clobetasol propionate gel 0.05%	116
clobetasol propionate lotion 0.05%...	116
clobetasol propionate oint 0.05%	116
clobetasol propionate shampoo 0.05%	116
clobetasol propionate soln 0.05%	116
clobetasol propionate spray 0.05% ...	117
clocortolone pivalate cream 0.1%	117
clofarabine iv soln 1 mg/ml	22
clomiphene citrate tab 50 mg	80
clomipramine hcl cap 25 mg	65
clomipramine hcl cap 50 mg	65
clomipramine hcl cap 75 mg	65
clonazepam tab 0.5 mg	47
clonazepam tab 1 mg	47
clonazepam tab 2 mg	47
clonidine hcl tab 0.1 mg	43
clonidine hcl tab 0.2 mg	43
clonidine hcl tab 0.3 mg	43
clonidine td patch weekly 0.1 mg/24hr	43
clonidine td patch weekly 0.2 mg/24hr	43
clonidine td patch weekly 0.3 mg/24hr	43
clopidogrel bisulfate tab 300 mg (base equiv)	93

clopidogrel bisulfate tab 75 mg (base equiv)	93
clorazepate dipotassium tab 15 mg.....	47
clorazepate dipotassium tab 3.75 mg..	47
clorazepate dipotassium tab 7.5 mg ...	47
clotrimazole cre 1%.....	114
clotrimazole cream 1%.....	114
clotrimazole soln 1%	114
clotrimazole troche 10 mg	119
clotrimazole w/ betamethasone cream 1- 0.05%.....	114
clotrimazole w/ betamethasone lotion 1- 0.05%.....	114
clozapine orally disintegrating tab 100 mg.....	58
clozapine orally disintegrating tab 12.5 mg.....	58
clozapine orally disintegrating tab 150 mg.....	58
clozapine orally disintegrating tab 200 mg.....	58
clozapine orally disintegrating tab 25 mg	58
clozapine tab 100 mg	58
clozapine tab 200 mg	58
clozapine tab 25 mg	58
clozapine tab 50 mg	58
COARTEM TAB 20-120MG.....	13
codeine sulf tab 15mg	3
CODEINE SULF TAB 60MG	3
codeine sulfate tab 30 mg	3
colchicine tab 0.6 mg	1
colchicine w/ probenecid tab 0.5-500 mg	1
colesevelam hcl packet for susp 3.75 gm	36
colesevelam hcl tab 625 mg	36
colestipol hcl granule packets 5 gm	36
colestipol hcl granules 5 gm	36
colestipol hcl tab 1 gm	36
colocort ene 100mg.....	86
COLY-MYCIN S SUS OTIC	119
COMBIGAN SOL 0.2/0.5%	105
COMBIVENT AER 20-100	106
COMETRIQ KIT 100MG	26
COMETRIQ KIT 140MG	26
COMETRIQ KIT 60MG	26
COMPLERA TAB	15

compro sup 25mg 84
 CONCEPTROL GEL 4% 89
 CONDYLOX GEL 0.5%..... 118
 COPAXONE INJ 20MG/ML..... 66
 COPAXONE INJ 40MG/ML..... 66
cortisone acetate tab 25 mg 80
 CORTISPORIN CRE 0.5% 114
 CORTISPORIN OIN 1% 114
 COSENTYX INJ 150MG/ML 115
 COSENTYX INJ 300DOSE..... 115
 COSENTYX PEN INJ 150MG/ML..... 115
 COSENTYX PEN INJ 300DOSE..... 116
creamy face liq wash 4%..... 113
 CREON CAP 12000UNT 88
 CREON CAP 24000UNT 88
 CREON CAP 3000UNIT..... 88
 CREON CAP 36000UNT 88
 CREON CAP 6000UNIT..... 88
 CRESEMBA CAP 186 MG 12
 CRINONE GEL 4% VAG 82
 CRINONE GEL 8% VAG 82
 CRIXIVAN CAP 200MG..... 13
 CRIXIVAN CAP 400MG..... 13
cromolyn sodium ophth soln 4%..... 105
cromolyn sodium soln nebu 20 mg/2ml
 109
crotan lot 10% 119
crux aer 2% 114
cryselle-28 tab 28 tabs..... 74
 CUVPOSA SOL 1MG/5ML..... 84
cyanocobalamin inj 1000 mcg/ml 102
cyclafem tab 1/35 74
cyclafem tab 7/7/7 74
cyclobenzaprine hcl tab 10 mg..... 67
cyclobenzaprine hcl tab 5 mg 67
cyclobenzaprine hcl tab 7.5 mg 67
cyclophosphamide cap 25 mg 21
cyclophosphamide cap 50 mg 21
cyclophosphamide for inj 1 gm 21
cyclophosphamide for inj 2 gm 21
cyclophosphamide for inj 500 mg 21
cycloserine cap 250 mg 16
 CYCLOSET TAB 0.8MG..... 70
cyclosporine modified cap 100 mg 97
cyclosporine modified cap 25 mg 97
cyclosporine modified cap 50 mg 97
cyclosporine modified oral soln 100 mg/ml..... 97

cycloheptadine hcl syrup 2 mg/5ml.. 107
cycloheptadine hcl tab 4 mg 107
 CYSTADANE POW 77
 CYSTAGON CAP 150MG 77
 CYSTAGON CAP 50MG 77
 CYSTARAN SOL 0.44% 106
cytarabine inj 20 mg/ml 22
cytarabine inj pf 100 mg/ml 22
cytarabine inj pf 20 mg/ml 22
D
dacarbazine for inj 100 mg..... 21
dacarbazine for inj 200 mg..... 21
dalfampridine tab er 12hr 10 mg 66
 DALIRESP TAB 250MCG..... 109
 DALIRESP TAB 500MCG..... 109
danazol cap 100 mg 77
danazol cap 200 mg 77
danazol cap 50 mg 77
dantrolene sodium cap 100 mg..... 67
dantrolene sodium cap 25 mg..... 67
dantrolene sodium cap 50 mg..... 67
dapsone tab 100 mg 11
dapsone tab 25 mg 11
 DAPTACEL INJ 97
daptomycin for iv soln 500 mg 11
 DARAPRIM TAB 25MG..... 11
darifenacin hydrobromide tab er 24hr 15 mg (base equiv) 90
darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv) 90
dasetta tab 1/35 74
dasetta tab 7/7/7..... 74
daunorubicin hcl iv soln 20 mg/4ml (base equiv) 22
decitabine for inj 50 mg 22
delyla tab 0.1-0.02..... 74
demeclocycline hcl tab 150 mg..... 20
demeclocycline hcl tab 300 mg..... 20
 DENAVIR CRE 1% 118
 DEPEN TITRA TAB 250MG..... 73
 DEPO-SQ PROV INJ 104 74
 DESCOVY TAB 200/25 15
desipramine hcl tab 10 mg 52
desipramine hcl tab 100 mg 52
desipramine hcl tab 150 mg 52
desipramine hcl tab 25 mg 52
desipramine hcl tab 50 mg 52
desipramine hcl tab 75 mg 52

<i>desloratadine tab 5 mg</i>	107	<i>mg</i>	61
<i>desloratadine tab orally disintegrating</i>		<i>dexmethylphenidate hcl cap er 24 hr 35</i>	
<i>2.5 mg</i>	107	<i>mg</i>	61
<i>desloratadine tab orally disintegrating 5</i>		<i>dexmethylphenidate hcl cap er 24 hr 40</i>	
<i>mg</i>	107	<i>mg</i>	61
<i>desmopressin acetate nasal spray soln</i>		<i>dexmethylphenidate hcl cap er 24 hr 5</i>	
<i>0.01%</i>	84	<i>mg</i>	61
<i>desmopressin acetate nasal spray soln</i>		<i>dexmethylphenidate hcl tab 10 mg</i>	61
<i>0.01% (refrigerated)</i>	84	<i>dexmethylphenidate hcl tab 2.5 mg</i>	61
<i>desmopressin acetate tab 0.1 mg</i>	84	<i>dexmethylphenidate hcl tab 5 mg</i>	61
<i>desmopressin acetate tab 0.2 mg</i>	84	<i>dexrazoxane hcl for inj 250 mg (base</i>	
<i>desonide cream 0.05%</i>	117	<i>equivalent)</i>	29
<i>desonide lotion 0.05%</i>	117	<i>dexrazoxane hcl for inj 500 mg (base</i>	
<i>desonide oint 0.05%</i>	117	<i>equivalent)</i>	29
<i>desoximetasone cream 0.05%</i>	117	<i>dextroamphetamine sulfate cap er 24hr</i>	
<i>desoximetasone cream 0.25%</i>	117	<i>10 mg</i>	61
<i>desoximetasone gel 0.05%</i>	117	<i>dextroamphetamine sulfate cap er 24hr</i>	
<i>desoximetasone oint 0.05%</i>	117	<i>15 mg</i>	61
<i>desoximetasone oint 0.25%</i>	117	<i>dextroamphetamine sulfate cap er 24hr 5</i>	
<i>desvenlafaxine succinate tab er 24hr 100</i>		<i>mg</i>	61
<i>mg (base equiv)</i>	52	<i>dextroamphetamine sulfate oral solution</i>	
<i>desvenlafaxine succinate tab er 24hr 25</i>		<i>5 mg/5ml</i>	61
<i>mg (base equiv)</i>	52	<i>dextroamphetamine sulfate tab 10 mg</i> 61	
<i>desvenlafaxine succinate tab er 24hr 50</i>		<i>dextroamphetamine sulfate tab 5 mg</i> .	61
<i>mg (base equiv)</i>	52	<i>diazepam con 5mg/ml</i>	47
<i>DEXAMETHASON CON 1MG/ML</i>	80	<i>diazepam inj 5 mg/ml</i>	47
<i>dexamethasone elixir 0.5 mg/5ml</i>	80	<i>diazepam oral soln 1 mg/ml</i>	47
<i>dexamethasone sodium phosphate ophth</i>		<i>diazepam tab 10 mg</i>	47
<i>soln 0.1%</i>	104	<i>diazepam tab 2 mg</i>	47
<i>dexamethasone soln 0.5 mg/5ml</i>	80	<i>diazepam tab 5 mg</i>	47
<i>dexamethasone tab 0.5 mg</i>	80	<i>diclofenac potassium tab 50 mg</i>	1
<i>dexamethasone tab 0.75 mg</i>	80	<i>diclofenac sodium gel 1%</i>	118
<i>dexamethasone tab 1 mg</i>	80	<i>diclofenac sodium ophth soln 0.1%</i> ... 104	
<i>dexamethasone tab 1.5 mg</i>	80	<i>diclofenac sodium tab delayed release 25</i>	
<i>dexamethasone tab 2 mg</i>	80	<i>mg</i>	1
<i>dexamethasone tab 4 mg</i>	80	<i>diclofenac sodium tab delayed release 50</i>	
<i>dexamethasone tab 6 mg</i>	80	<i>mg</i>	1
<i>DEXILANT CAP 30MG DR</i>	88	<i>diclofenac sodium tab delayed release 75</i>	
<i>DEXILANT CAP 60MG DR</i>	88	<i>mg</i>	1
<i>dexmethylphenidate hcl cap er 24 hr 10</i>		<i>diclofenac sodium tab er 24hr 100 mg</i> ..	1
<i>mg</i>	61	<i>diclofenac w/ misoprostol tab delayed</i>	
<i>dexmethylphenidate hcl cap er 24 hr 15</i>		<i>release 50-0.2 mg</i>	1
<i>mg</i>	61	<i>diclofenac w/ misoprostol tab delayed</i>	
<i>dexmethylphenidate hcl cap er 24 hr 20</i>		<i>release 75-0.2 mg</i>	1
<i>mg</i>	61	<i>dicloxacillin sodium cap 250 mg</i>	20
<i>dexmethylphenidate hcl cap er 24 hr 25</i>		<i>dicloxacillin sodium cap 500 mg</i>	20
<i>mg</i>	61	<i>dicyclomine hcl cap 10 mg</i>	84
<i>dexmethylphenidate hcl cap er 24 hr 30</i>		<i>dicyclomine hcl oral soln 10 mg/5ml</i> ... 84	

<i>dicyclomine hcl tab 20 mg</i>	84	<i>diltiazem hcl tab 60 mg</i>	41
<i>didanosine delayed release capsule 200 mg</i>	13	<i>diltiazem hcl tab 90 mg</i>	41
<i>didanosine delayed release capsule 250 mg</i>	13	<i>DIP/TET PED INJ 25-5LFU</i>	97
<i>didanosine delayed release capsule 400 mg</i>	13	<i>DIPENTUM CAP 250MG</i>	86
<i>DIFICID TAB 200MG</i>	18	<i>diphenhydramine hcl elixir 12.5 mg/5ml</i>	107
<i>diflorasone diacetate cream 0.05%</i> ...	117	<i>diphenhydramine hcl inj 50 mg/ml</i> ...	107
<i>diflorasone diacetate oint 0.05%</i>	117	<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	87
<i>diflunisal tab 500 mg</i>	11	<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	87
<i>digoxin oral soln 0.05 mg/ml</i>	42	<i>dipyridamole tab 25 mg</i>	93
<i>digoxin tab 125 mcg (0.125 mg)</i>	42	<i>dipyridamole tab 50 mg</i>	93
<i>digoxin tab 250 mcg (0.25 mg)</i>	42	<i>dipyridamole tab 75 mg</i>	93
<i>dihydroergotamine mesylate inj 1 mg/ml</i>	63	<i>disopyramide phosphate cap 100 mg</i> ..	35
<i>dihydroergotamine mesylate nasal spray 4 mg/ml</i>	63	<i>disopyramide phosphate cap 150 mg</i> ..	35
<i>diltiazem hcl cap er 12hr 120 mg</i>	40	<i>disulfiram tab 250 mg</i>	68
<i>diltiazem hcl cap er 12hr 60 mg</i>	40	<i>disulfiram tab 500 mg</i>	68
<i>diltiazem hcl cap er 12hr 90 mg</i>	40	<i>DIURIL SUS 250/5ML</i>	42
<i>diltiazem hcl cap er 24hr 120 mg</i>	40	<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	47
<i>diltiazem hcl cap er 24hr 180 mg</i>	40	<i>divalproex sodium tab delayed release 125 mg</i>	47
<i>diltiazem hcl cap er 24hr 240 mg</i>	40	<i>divalproex sodium tab delayed release 250 mg</i>	47
<i>diltiazem hcl coated beads cap er 24hr 120 mg</i>	40	<i>divalproex sodium tab delayed release 500 mg</i>	47
<i>diltiazem hcl coated beads cap er 24hr 180 mg</i>	40	<i>divalproex sodium tab er 24 hr 250 mg</i>	47
<i>diltiazem hcl coated beads cap er 24hr 240 mg</i>	40	<i>divalproex sodium tab er 24 hr 500 mg</i>	47
<i>diltiazem hcl coated beads cap er 24hr 300 mg</i>	40	<i>DOCEFREZ INJ 20MG</i>	23
<i>diltiazem hcl coated beads cap er 24hr 360 mg</i>	40	<i>docetaxel for inj conc 160 mg/8ml (20 mg/ml)</i>	23
<i>diltiazem hcl extended release beads cap er 24hr 120 mg</i>	40	<i>docetaxel for inj conc 20 mg/ml</i>	23
<i>diltiazem hcl extended release beads cap er 24hr 180 mg</i>	40	<i>docetaxel for inj conc 80 mg/4ml (20 mg/ml)</i>	23
<i>diltiazem hcl extended release beads cap er 24hr 240 mg</i>	40	<i>DOCETAXEL INJ 140/7ML</i>	23
<i>diltiazem hcl extended release beads cap er 24hr 300 mg</i>	41	<i>DOCETAXEL INJ 160/8ML</i>	23
<i>diltiazem hcl extended release beads cap er 24hr 360 mg</i>	41	<i>DOCETAXEL INJ 20/0.5ML</i>	23
<i>diltiazem hcl extended release beads cap er 24hr 420 mg</i>	41	<i>DOCETAXEL INJ 80MG/2ML</i>	23
<i>diltiazem hcl tab 120 mg</i>	41	<i>DOCETAXEL INJ NON-ALCO</i>	23
<i>diltiazem hcl tab 30 mg</i>	41	<i>docetaxel soln for iv infusion 160 mg/16ml</i>	23
		<i>docetaxel soln for iv infusion 20 mg/2ml</i>	23
		<i>docetaxel soln for iv infusion 80 mg/8ml</i>	23

<i>docosanol cream 10%</i>	118	<i>doxycycline monohydrate tab 75 mg ..</i>	21
<i>dofetilide cap 125 mcg (0.125 mg)</i>	35	<i>doxylamine succinate tab 25mg.....</i>	63
<i>dofetilide cap 250 mcg (0.25 mg).....</i>	35	<i>dronabinol cap 10 mg.....</i>	84
<i>dofetilide cap 500 mcg (0.5 mg).....</i>	35	<i>dronabinol cap 2.5 mg.....</i>	84
<i>donepezil hydrochloride orally</i>		<i>dronabinol cap 5 mg.....</i>	84
<i>disintegrating tab 10 mg</i>	50	<i>drospirenone-ethinyl estradiol tab 3-0.03</i>	
<i>donepezil hydrochloride orally</i>		<i>mg.....</i>	74
<i>disintegrating tab 5 mg</i>	50	<i>drospirenone-ethinyl estrad-levomefolate</i>	
<i>donepezil hydrochloride tab 10 mg</i>	50	<i>tab 3-0.02-0.451 mg.....</i>	74
<i>donepezil hydrochloride tab 23 mg</i>	50	<i>drospirenone-ethinyl estrad-levomefolate</i>	
<i>donepezil hydrochloride tab 5 mg</i>	50	<i>tab 3-0.03-0.451 mg.....</i>	74
<i>doripenem for iv infusion 250 mg</i>	11	<i>DROXIA CAP 200MG.....</i>	29
<i>doripenem for iv infusion 500 mg</i>	11	<i>DROXIA CAP 300MG.....</i>	29
<i>dorzolamide hcl ophth soln 2%</i>	105	<i>DROXIA CAP 400MG.....</i>	29
<i>dorzolamide hcl-timolol maleate ophth</i>		<i>DUAVEE TAB 0.45-20</i>	77
<i>soln 22.3-6.8 mg/ml</i>	105	<i>duloxetine hcl cap 20 mg.....</i>	53
<i>doxazosin mesylate tab 1 mg</i>	32	<i>duloxetine hcl cap 30 mg.....</i>	53
<i>doxazosin mesylate tab 2 mg</i>	32	<i>duloxetine hcl cap 60 mg.....</i>	53
<i>doxazosin mesylate tab 4 mg</i>	32	<i>DUREZOL EMU 0.05%</i>	104
<i>doxazosin mesylate tab 8 mg</i>	32	<i>dutasteride cap 0.5 mg</i>	89
<i>doxepin hcl cap 10 mg</i>	52	<i>dutasteride-tamsulosin hcl cap 0.5-0.4</i>	
<i>doxepin hcl cap 100 mg.....</i>	53	<i>mg.....</i>	89
<i>doxepin hcl cap 150 mg.....</i>	53	<i>DYMISTA SPR 137-50.....</i>	107
<i>doxepin hcl cap 25 mg</i>	52	<i>DYRENIUM CAP 100MG.....</i>	42
<i>doxepin hcl cap 50 mg</i>	52	<i>DYRENIUM CAP 50MG</i>	42
<i>doxepin hcl cap 75 mg</i>	52	E	
<i>doxepin hcl conc 10 mg/ml.....</i>	53	<i>e.e.s. 400 tab 400mg.....</i>	18
<i>doxepin hcl cream 5%</i>	115	<i>econazole nitrate cream 1%</i>	114
<i>doxercalciferol cap 0.5 mcg</i>	102	<i>EDARBI TAB 40MG</i>	34
<i>doxercalciferol cap 1 mcg</i>	102	<i>EDARBI TAB 80MG</i>	34
<i>doxercalciferol cap 2.5 mcg</i>	102	<i>ed-spaz tab 0.125mg</i>	84
<i>doxorubicin hcl for inj 10 mg</i>	22	<i>EDURANT TAB 25MG</i>	13
<i>doxorubicin hcl for inj 50 mg</i>	22	<i>efavirenz cap 200 mg.....</i>	13
<i>doxorubicin hcl inj 2 mg/ml</i>	22	<i>efavirenz cap 50 mg.....</i>	13
<i>doxorubicin hcl liposomal inj (for iv</i>		<i>efavirenz tab 600 mg</i>	14
<i>infusion) 2 mg/ml.....</i>	22	<i>eletriptan hydrobromide tab 20 mg (base</i>	
<i>doxycycline hyclate cap 100 mg</i>	20	<i>equivalent)</i>	63
<i>doxycycline hyclate cap 50 mg</i>	20	<i>eletriptan hydrobromide tab 40 mg (base</i>	
<i>doxycycline hyclate tab 100 mg.....</i>	21	<i>equivalent)</i>	64
<i>doxycycline hyclate tab 20 mg.....</i>	21	<i>ELIGARD INJ 22.5MG</i>	25
<i>doxycycline monohydrate cap 100 mg</i>	21	<i>ELIGARD INJ 30MG</i>	25
<i>doxycycline monohydrate cap 150 mg</i>	21	<i>ELIGARD INJ 45MG</i>	25
<i>doxycycline monohydrate cap 50 mg ..</i>	21	<i>ELIGARD INJ 7.5MG</i>	25
<i>doxycycline monohydrate cap 75 mg ..</i>	21	<i>elinest tab</i>	74
<i>doxycycline monohydrate for susp 25</i>		<i>ELIQUIS TAB 2.5MG</i>	90
<i>mg/5ml.....</i>	21	<i>ELIQUIS TAB 5MG</i>	91
<i>doxycycline monohydrate tab 150 mg.</i>	21	<i>elite-ob tab</i>	102
<i>doxycycline monohydrate tab 50 mg ..</i>	21	<i>ELLA TAB 30MG.....</i>	74

ELMIRON CAP 100MG.....	89	<i>entecavir tab 1 mg</i>	16
EMADINE SOL 0.05% OP	105	ENTRESTO TAB 24-26MG	43
EMBEDA CAP 100-4MG.....	4	ENTRESTO TAB 49-51MG	43
EMBEDA CAP 20-0.8MG.....	3	ENTRESTO TAB 97-103MG.....	43
EMBEDA CAP 30-1.2MG.....	3	<i>enulose sol 10gm/15</i>	87
EMBEDA CAP 50-2MG.....	3	EPCLUSA TAB 400-100.....	19
EMBEDA CAP 60-2.4MG.....	3	EPIDUO FORTE GEL 0.3-2.5%	113
EMBEDA CAP 80-3.2MG.....	4	<i>epinastine hcl ophth soln 0.05%</i>	105
EMCYT CAP 140MG.....	21	<i>epinephrine solution auto-injector 0.15</i>	
<i>emoquette tab</i>	74	<i>mg/0.15ml (1:1000)</i>	106
EMSAM DIS 12MG/24H.....	53	<i>epinephrine solution auto-injector 0.15</i>	
EMSAM DIS 6MG/24HR.....	53	<i>mg/0.3ml (1:2000)</i>	106
EMSAM DIS 9MG/24HR.....	53	<i>epinephrine solution auto-injector 0.3</i>	
EMTRIVA CAP 200MG	14	<i>mg/0.3ml (1:1000)</i>	106
EMTRIVA SOL 10MG/ML	14	EPIPEN 2-PAK INJ 0.3MG.....	106
EMVERM CHW 100MG.....	11	EPIPEN-JR INJ 0.15MG	106
<i>enalapril maleate & hydrochlorothiazide</i>		<i>epirubicin hcl iv soln 200 mg/100ml (2</i>	
<i>tab 10-25 mg</i>	31	<i>mg/ml)</i>	22
<i>enalapril maleate & hydrochlorothiazide</i>		<i>epirubicin hcl iv soln 50 mg/25ml (2</i>	
<i>tab 5-12.5 mg</i>	31	<i>mg/ml)</i>	22
<i>enalapril maleate tab 10 mg</i>	32	<i>epitol tab 200mg</i>	47
<i>enalapril maleate tab 2.5 mg</i>	32	EPIVIR HBV SOL 5MG/ML	16
<i>enalapril maleate tab 20 mg</i>	32	<i>eplerenone tab 25 mg</i>	32
<i>enalapril maleate tab 5 mg</i>	32	<i>eplerenone tab 50 mg</i>	32
ENBREL INJ 25/0.5ML	93	<i>epoprostenol sodium for inj 0.5 mg</i>	45
ENBREL INJ 25MG	93	<i>epoprostenol sodium for inj 1.5 mg</i>	45
ENBREL INJ 50MG/ML.....	94	<i>eprosartan mesylate tab 600 mg</i>	34
ENBREL MINI INJ 50MG/ML.....	94	ERBITUX INJ 100MG.....	24
ENBREL SRCLK INJ 50MG/ML.....	94	ERBITUX INJ 200MG.....	24
ENCARE SUP 100MG.....	89	<i>ergocalciferol cap 50000 unit</i>	102
<i>endocet tab 10-325mg</i>	4	<i>ergoloid mesylates tab 1 mg</i>	50
<i>endocet tab 2.5-325</i>	4	<i>ergotamine w/ caffeine tab 1-100 mg</i> . 64	
<i>endocet tab 5-325mg</i>	4	ERIVEDGE CAP 150MG	24
<i>endocet tab 7.5-325</i>	4	<i>erlotinib hcl tab 100 mg (base</i>	
ENERGIX-B INJ 10/0.5ML	98	<i>equivalent)</i>	26
ENERGIX-B INJ 20MCG/ML.....	98	<i>erlotinib hcl tab 150 mg (base</i>	
<i>enoxaparin sodium inj 100 mg/ml</i>	91	<i>equivalent)</i>	26
<i>enoxaparin sodium inj 120 mg/0.8ml</i> . 91		<i>erlotinib hcl tab 25 mg (base equivalent)</i>	
<i>enoxaparin sodium inj 150 mg/ml</i>	91	.....	26
<i>enoxaparin sodium inj 30 mg/0.3ml</i> ... 91		<i>errin tab 0.35mg</i>	74
<i>enoxaparin sodium inj 300 mg/3ml</i> 91		ERTACZO CRE 2%	114
<i>enoxaparin sodium inj 40 mg/0.4ml</i> ... 91		<i>ery pad 2%</i>	113
<i>enoxaparin sodium inj 60 mg/0.6ml</i> ... 91		<i>ery-tab tab 250mg ec</i>	18
<i>enoxaparin sodium inj 80 mg/0.8ml</i> ... 91		<i>ery-tab tab 333mg ec</i>	18
<i>enpresse-28 tab</i>	74	<i>ery-tab tab 500mg ec</i>	18
<i>enskyce tab</i>	74	<i>erythrocin tab 250mg</i>	18
<i>entacapone tab 200 mg</i>	56	<i>erythromycin ethylsuccinate for susp 200</i>	
<i>entecavir tab 0.5 mg</i>	16	<i>mg/5ml</i>	18

<i>erythromycin ethylsuccinate for susp 400 mg/5ml</i>	18	<i>estradiol td patch weekly 0.05 mg/24hr</i>	78
<i>erythromycin ethylsuccinate tab 400 mg</i>	18	<i>estradiol td patch weekly 0.06 mg/24hr</i>	78
<i>erythromycin gel 2%</i>	113	<i>estradiol td patch weekly 0.075 mg/24hr</i>	78
<i>erythromycin ophth oint 5 mg/gm</i>	103	<i>estradiol td patch weekly 0.1 mg/24hr</i>	78
<i>erythromycin soln 2%</i>	113	<i>estradiol vaginal cream 0.1 mg/gm</i>	78
<i>erythromycin tab 250 mg</i>	18	<i>estropipate tab 0.75 mg</i>	78
<i>erythromycin tab 500 mg</i>	18	<i>estropipate tab 1.5 mg</i>	79
<i>erythromycin w/ delayed release</i>		<i>estropipate tab 3 mg</i>	79
<i>particles cap 250 mg</i>	18	<i>eszopiclone tab 1 mg</i>	63
<i>ESBRIET CAP 267MG</i>	110	<i>eszopiclone tab 2 mg</i>	63
<i>ESBRIET TAB 267MG</i>	110	<i>eszopiclone tab 3 mg</i>	63
<i>ESBRIET TAB 801MG</i>	110	<i>ethacrynate sodium for inj 50 mg</i>	42
<i>escitalopram oxalate soln 5 mg/5ml</i>		<i>ethacrynic acid tab 25 mg</i>	42
<i>(base equiv)</i>	53	<i>ethambutol hcl tab 100 mg</i>	16
<i>escitalopram oxalate tab 10 mg (base</i>		<i>ethambutol hcl tab 400 mg</i>	16
<i>equiv)</i>	53	<i>ethosuximide cap 250 mg</i>	47
<i>escitalopram oxalate tab 20 mg (base</i>		<i>ethosuximide soln 250 mg/5ml</i>	47
<i>equiv)</i>	53	<i>ethynodiol diacetate & ethinyl estradiol</i>	
<i>escitalopram oxalate tab 5 mg (base</i>		<i>tab 1 mg-50 mcg</i>	74
<i>equiv)</i>	53	<i>etodolac cap 200 mg</i>	1
<i>esomepra mag cap 20mg dr</i>	88	<i>etodolac cap 300 mg</i>	1
<i>esomeprazole magnesium cap delayed</i>		<i>etodolac tab 400 mg</i>	1
<i>release 20 mg (base eq)</i>	88	<i>etodolac tab 500 mg</i>	2
<i>esomeprazole magnesium cap delayed</i>		<i>etodolac tab er 24hr 400 mg</i>	2
<i>release 40 mg (base eq)</i>	88	<i>etodolac tab er 24hr 500 mg</i>	2
<i>estradiol & norethindrone acetate tab</i>		<i>etodolac tab er 24hr 600 mg</i>	2
<i>0.5-0.1 mg</i>	77	<i>etoposide cap 50 mg</i>	30
<i>estradiol & norethindrone acetate tab 1-</i>		<i>etoposide inj 100 mg/5ml (20 mg/ml)</i>	30
<i>0.5 mg</i>	77	<i>EUCRISA OIN 2%</i>	118
<i>estradiol tab 0.5 mg</i>	77	<i>EURAX CRE 10%</i>	119
<i>estradiol tab 1 mg</i>	77	<i>EVOTAZ TAB 300-150</i>	15
<i>estradiol tab 2 mg</i>	77	<i>EXELDERM CRE 1%</i>	114
<i>estradiol td patch twice weekly 0.025</i>		<i>EXELDERM SOL 1%</i>	114
<i>mg/24hr</i>	78	<i>exemestane tab 25 mg</i>	25
<i>estradiol td patch twice weekly 0.0375</i>		<i>ezetimibe tab 10 mg</i>	36
<i>mg/24hr</i>	78	<i>ezetimibe-simvastatin tab 10-10 mg...</i>	36
<i>estradiol td patch twice weekly 0.05</i>		<i>ezetimibe-simvastatin tab 10-20 mg...</i>	36
<i>mg/24hr</i>	78	<i>ezetimibe-simvastatin tab 10-40 mg...</i>	36
<i>estradiol td patch twice weekly 0.075</i>		<i>ezetimibe-simvastatin tab 10-80 mg...</i>	36
<i>mg/24hr</i>	78	F	
<i>estradiol td patch twice weekly 0.1</i>		<i>FACTIVE TAB 320MG</i>	19
<i>mg/24hr</i>	78	<i>falmina tab</i>	74
<i>estradiol td patch weekly 0.025 mg/24hr</i>		<i>famciclovir tab 125 mg</i>	16
<i>.....</i>	78	<i>famciclovir tab 250 mg</i>	16
<i>estradiol td patch weekly 0.0375</i>		<i>famciclovir tab 500 mg</i>	16
<i>mg/24hr (37.5 mcg/24hr)</i>	78		

<i>famotidine for susp 40 mg/5ml</i>	86	<i>fentanyl td patch 72hr 25 mcg/hr</i>	4
<i>famotidine tab 20 mg</i>	86	<i>fentanyl td patch 72hr 50 mcg/hr</i>	4
<i>famotidine tab 40 mg</i>	86	<i>fentanyl td patch 72hr 75 mcg/hr</i>	4
FARXIGA TAB 10MG	72	FERRIPROX SOL 100MG/ML.....	73
FARXIGA TAB 5MG	72	FERRIPROX TAB 500MG.....	74
FARYDAK CAP 10MG.....	24	FETZIMA CAP 120MG.....	53
FARYDAK CAP 15MG.....	24	FETZIMA CAP 20MG.....	53
FARYDAK CAP 20MG.....	24	FETZIMA CAP 40MG.....	53
<i>fayosim tab</i>	74	FETZIMA CAP 80MG.....	53
FC2 FEMALE MIS CONDOM	99	FETZIMA CAP TITRATIO.....	53
<i>febuxostat tab 40 mg</i>	1	<i>fexofenadine hcl tab 180 mg</i>	107
<i>febuxostat tab 80 mg</i>	1	<i>fexofenadine hcl tab 60 mg</i>	107
<i>felbamate susp 600 mg/5ml</i>	47	<i>fexofenadine sus 30mg/5ml</i>	107
<i>felbamate tab 400 mg</i>	47	FIASP FLEX INJ TOUCH.....	71
<i>felbamate tab 600 mg</i>	47	FIASP INJ 100/ML	71
<i>felodipine tab er 24hr 10 mg</i>	41	FINACEA AER 15%	118
<i>felodipine tab er 24hr 2.5 mg</i>	41	<i>finasteride tab 5 mg</i>	89
<i>felodipine tab er 24hr 5 mg</i>	41	FIRAZYR INJ 30MG/3ML	92
FEMCAP MIS 22MM.....	99	FLAREX SUS 0.1% OP	104
FEMCAP MIS 26MM.....	99	<i>flavoxate hcl tab 100 mg</i>	89
FEMCAP MIS 30MM.....	99	<i>flecainide acetate tab 100 mg</i>	35
<i>fenofibrate cap 150 mg</i>	36	<i>flecainide acetate tab 150 mg</i>	35
<i>fenofibrate cap 50 mg</i>	36	<i>flecainide acetate tab 50 mg</i>	35
<i>fenofibrate micronized cap 130 mg</i>	36	<i>floxuridine for inj 0.5 gm</i>	22
<i>fenofibrate micronized cap 134 mg</i>	36	FLUAD INJ 2019-20.....	98
<i>fenofibrate micronized cap 200 mg</i>	36	FLUARIX QUAD INJ 2019-20.....	98
<i>fenofibrate micronized cap 43 mg</i>	36	FLUBLOK QUAD INJ 2019-20.....	98
<i>fenofibrate micronized cap 67 mg</i>	36	FLUCLVX QUAD INJ 2019-20	98
<i>fenofibrate tab 145 mg</i>	36	<i>fluconazole for susp 10 mg/ml</i>	12
<i>fenofibrate tab 160 mg</i>	36	<i>fluconazole for susp 40 mg/ml</i>	13
<i>fenofibrate tab 48 mg</i>	36	<i>fluconazole tab 100 mg</i>	13
<i>fenofibrate tab 54 mg</i>	36	<i>fluconazole tab 150 mg</i>	13
<i>fenoprofen calcium cap 400 mg</i>	2	<i>fluconazole tab 200 mg</i>	13
<i>fenoprofen calcium tab 600 mg</i>	2	<i>fluconazole tab 50 mg</i>	13
<i>fentanyl citrate lozenge on a handle 1200 mcg</i>	4	<i>fludarabine phosphate for inj 50 mg</i> ..	22
<i>fentanyl citrate lozenge on a handle 1600 mcg</i>	4	<i>fludarabine phosphate inj 25 mg/ml</i> ...	22
<i>fentanyl citrate lozenge on a handle 200 mcg</i>	4	<i>fludrocortisone acetate tab 0.1 mg</i>	80
<i>fentanyl citrate lozenge on a handle 400 mcg</i>	4	FLULAVAL QUA INJ 2019-20.....	98
<i>fentanyl citrate lozenge on a handle 600 mcg</i>	4	FLUMIST QUAD SUS 2019-20	98
<i>fentanyl citrate lozenge on a handle 800 mcg</i>	4	<i>flunisolide nasal soln 25 mcg/act (0.025%)</i>	110
<i>fentanyl td patch 72hr 100 mcg/hr</i>	4	<i>fluocinolone acetonide (otic) oil 0.01%</i>	119
<i>fentanyl td patch 72hr 12 mcg/hr</i>	4	<i>fluocinolone acetonide cream 0.01%</i> ..	117
		<i>fluocinolone acetonide cream 0.025%</i>	117
		<i>fluocinolone acetonide oil 0.01% (body oil)</i>	117
		<i>fluocinolone acetonide oil 0.01% (scalp</i>	

oil)	117	fluticasone propionate lotion 0.05%..	117
fluocinolone acetonide oint 0.025% ..	117	fluticasone propionate nasal susp 50	
fluocinolone acetonide soln 0.01%	117	mcg/act	110
fluocinonide cream 0.05%	117	fluticasone propionate oint 0.005% ..	117
fluocinonide gel 0.05%	117	fluticasone spr 50mcg	110
fluocinonide oint 0.05%.....	117	fluvastatin sodium cap 20 mg (base	
fluocinonide soln 0.05%	117	equivalent)	37
FLUORABON DRO	100	fluvastatin sodium cap 40 mg (base	
fluor-a-day dro 0.125mg	100	equivalent)	37
fluoritab chw 0.25mg f	100	fluvastatin sodium tab er 24 hr 80 mg	
fluoritab chw 0.5mg f	100	(base equivalent)	37
fluoritab chw 2.2mg	100	fluvoxamine maleate cap er 24hr 100 mg	
fluorometholone ophth susp 0.1%	104	.....	65
FLUOROPLEX CRE 1%	113	fluvoxamine maleate cap er 24hr 150 mg	
fluorouracil cream 0.5%	113	.....	65
fluorouracil cream 5%	113	fluvoxamine maleate tab 100 mg.....	65
fluorouracil iv soln 1 gm/20ml (50		fluvoxamine maleate tab 25 mg	65
mg/ml)	23	fluvoxamine maleate tab 50 mg	65
fluorouracil iv soln 2.5 gm/50ml (50		FLUZONE HD INJ PF 19-20	98
mg/ml)	23	FLUZONE QUAD INJ 2019-20.....	98
fluorouracil iv soln 5 gm/100ml (50		FML FORTE SUS 0.25% OP	104
mg/ml)	23	FML OIN 0.1% OP	104
fluorouracil iv soln 500 mg/10ml (50		folic acid cap 0.8 mg	102
mg/ml)	23	folic acid tab 1 mg	102
fluorouracil soln 2%	113	folic acid tab 400 mcg	102
fluorouracil soln 5%	114	folic acid tab 800 mcg	102
fluoxetine hcl cap 10 mg	53	fondaparinux sodium subcutaneous inj	
fluoxetine hcl cap 20 mg	53	10 mg/0.8ml.....	91
fluoxetine hcl cap 40 mg	53	fondaparinux sodium subcutaneous inj	
fluoxetine hcl solution 20 mg/5ml.....	53	2.5 mg/0.5ml.....	91
fluoxetine hcl tab 10 mg	53	fondaparinux sodium subcutaneous inj 5	
fluoxetine hcl tab 20 mg	53	mg/0.4ml.....	91
fluphenazine hcl elixir 2.5 mg/5ml	58	fondaparinux sodium subcutaneous inj	
fluphenazine hcl oral conc 5 mg/ml.....	58	7.5 mg/0.6ml.....	91
fluphenazine hcl tab 1 mg	58	FOSAMAX + D TAB 70-2800	73
fluphenazine hcl tab 10 mg.....	58	FOSAMAX + D TAB 70-5600.....	73
fluphenazine hcl tab 2.5 mg	58	fosamprenavir calcium tab 700 mg (base	
fluphenazine hcl tab 5 mg	58	equiv)	14
flura-drops dro 0.25mg f	100	fosinopril sodium & hydrochlorothiazide	
flurandrenolide cream 0.05%	117	tab 10-12.5 mg.....	31
flurandrenolide lotion 0.05%	117	fosinopril sodium & hydrochlorothiazide	
flurandrenolide oint 0.05%	117	tab 20-12.5 mg.....	31
flurbiprofen sodium ophth soln 0.03%		fosinopril sodium tab 10 mg	32
.....	104	fosinopril sodium tab 20 mg	32
flurbiprofen tab 100 mg.....	2	fosinopril sodium tab 40 mg	32
flurbiprofen tab 50 mg.....	2	FOSRENOL POW 1000MG	82
flutamide cap 125 mg.....	25	FOSRENOL POW 750MG	82
fluticasone propionate cream 0.05%. 117		FRAGMIN INJ 10000/ML	91

FRAGMIN INJ 12500UNT.....	91	<i>gavilyte-h kit.....</i>	87
FRAGMIN INJ 15000UNT.....	91	<i>gavilyte-n sol flav pk.....</i>	87
FRAGMIN INJ 18000UNT.....	91	GAZYVA INJ 25MG/ML.....	24
FRAGMIN INJ 2500/0.2.....	91	<i>gemcitabine hcl for inj 1 gm.....</i>	23
FRAGMIN INJ 5000/0.2.....	91	<i>gemcitabine hcl for inj 2 gm.....</i>	23
FRAGMIN INJ 7500/0.3.....	91	<i>gemcitabine hcl for inj 200 mg.....</i>	23
FRAGMIN INJ 95000UNT.....	91	<i>gemcitabine hcl inj 1 gm/26.3ml (38</i>	
<i>frovatriptan succinate tab 2.5 mg (base</i>		<i>mg/ml) (base equiv).....</i>	23
<i>equivalent).....</i>	64	<i>gemcitabine hcl inj 2 gm/52.6ml (38</i>	
FULPHILA INJ 6/0.6ML.....	92	<i>mg/ml) (base equiv).....</i>	23
<i>fulvestrant inj 250 mg/5ml.....</i>	25	<i>gemcitabine hcl inj 200 mg/5.26ml (38</i>	
<i>furosemide oral soln 10 mg/ml.....</i>	42	<i>mg/ml) (base equiv).....</i>	23
<i>furosemide oral soln 8 mg/ml.....</i>	42	<i>gemfibrozil tab 600 mg.....</i>	36
<i>furosemide tab 20 mg.....</i>	42	<i>generlac sol 10gm/15.....</i>	87
<i>furosemide tab 40 mg.....</i>	42	<i>gengraf cap 100mg.....</i>	97
<i>furosemide tab 80 mg.....</i>	42	<i>gengraf cap 25mg.....</i>	97
FUZEON INJ 90MG.....	14	<i>gengraf sol 100mg/ml.....</i>	97
FYCOMPA SUS 0.5MG/ML.....	47	<i>gentamicin sulfate cream 0.1%.....</i>	114
FYCOMPA TAB 10MG.....	47	<i>gentamicin sulfate oint 0.1%.....</i>	114
FYCOMPA TAB 12MG.....	47	<i>gentamicin sulfate ophth oint 0.3% ..</i>	103
FYCOMPA TAB 2MG.....	47	<i>gentamicin sulfate ophth soln 0.3% ..</i>	103
FYCOMPA TAB 4MG.....	47	GENVOYA TAB.....	15
FYCOMPA TAB 6MG.....	47	<i>gianvi tab 3-0.02mg.....</i>	75
FYCOMPA TAB 8MG.....	47	<i>gildess fe tab 1.5/30.....</i>	75
G		<i>gildess fe tab 1/20.....</i>	75
<i>gabapentin cap 100 mg.....</i>	47	GILENYA CAP 0.5MG.....	66
<i>gabapentin cap 300 mg.....</i>	47	GLASSIA INJ.....	110
<i>gabapentin cap 400 mg.....</i>	48	<i>glatiramer acetate soln prefilled syringe</i>	
<i>gabapentin oral soln 250 mg/5ml.....</i>	48	<i>20 mg/ml.....</i>	66
<i>gabapentin tab 600 mg.....</i>	48	<i>glatiramer acetate soln prefilled syringe</i>	
<i>gabapentin tab 800 mg.....</i>	48	<i>40 mg/ml.....</i>	66
<i>galantamine hydrobromide cap er 24hr</i>		GLEOSTINE CAP 100MG.....	21
<i>16 mg.....</i>	50	GLEOSTINE CAP 10MG.....	21
<i>galantamine hydrobromide cap er 24hr</i>		GLEOSTINE CAP 40MG.....	21
<i>24 mg.....</i>	50	GLEOSTINE CAP 5MG.....	21
<i>galantamine hydrobromide cap er 24hr 8</i>		GLIADEL WAF 7.7MG.....	21
<i>mg.....</i>	50	<i>glimepiride tab 1 mg.....</i>	72
<i>galantamine hydrobromide oral soln 4</i>		<i>glimepiride tab 2 mg.....</i>	72
<i>mg/ml.....</i>	50	<i>glimepiride tab 4 mg.....</i>	72
<i>galantamine hydrobromide tab 12 mg</i>	50	<i>glipizide tab 10 mg.....</i>	72
<i>galantamine hydrobromide tab 4 mg ..</i>	50	<i>glipizide tab 5 mg.....</i>	72
<i>galantamine hydrobromide tab 8 mg ..</i>	50	<i>glipizide tab er 24hr 10 mg.....</i>	72
<i>ganirelix acetate inj 250 mcg/0.5ml....</i>	80	<i>glipizide tab er 24hr 2.5 mg.....</i>	72
GARDASIL 9 INJ.....	98	<i>glipizide tab er 24hr 5 mg.....</i>	72
GARDASIL INJ.....	98	<i>glipizide-metformin hcl tab 2.5-250 mg</i>	
<i>gatifloxacin ophth soln 0.5%.....</i>	103	<i>.....</i>	69
<i>gavilyte-c sol.....</i>	87	<i>glipizide-metformin hcl tab 2.5-500 mg</i>	
<i>gavilyte-g sol.....</i>	87	<i>.....</i>	69

<i>glipizide-metformin hcl tab 5-500 mg</i> . 69	58
GLUCAGON KIT 1MG 81	<i>haloperidol lactate oral conc 2 mg/ml</i> . 58
GLUCOSE URINE TEST STRIPS 100	<i>haloperidol tab 0.5 mg</i> 58
<i>glyburide micronized tab 1.5 mg</i> 72	<i>haloperidol tab 1 mg</i> 58
<i>glyburide micronized tab 3 mg</i> 72	<i>haloperidol tab 10 mg</i> 58
<i>glyburide micronized tab 6 mg</i> 72	<i>haloperidol tab 2 mg</i> 58
<i>glyburide tab 1.25 mg</i> 73	<i>haloperidol tab 20 mg</i> 58
<i>glyburide tab 2.5 mg</i> 73	<i>haloperidol tab 5 mg</i> 58
<i>glyburide tab 5 mg</i> 73	HARVONI TAB 90-400MG 19
<i>glyburide-metformin tab 1.25-250 mg</i> 69	HAVRIX INJ 1440UNIT 98
<i>glyburide-metformin tab 2.5-500 mg</i> .. 69	HAVRIX INJ 720UNIT 98
<i>glyburide-metformin tab 5-500 mg</i> 70	<i>heather tab 0.35mg</i> 75
GLYXAMBI TAB 10-5 MG..... 72	HEMLIBRA INJ 105/0.7 92
GLYXAMBI TAB 25-5 MG..... 72	HEMLIBRA INJ 150/ML..... 92
GOLYTELY SOL 87	HEMLIBRA INJ 30MG/ML..... 92
GONAL-F INJ 1050UNIT 80	HEMLIBRA INJ 60/0.4..... 92
GONAL-F INJ 450UNIT 80	<i>heparin sodium (porcine) inj 1000</i>
GONAL-F RFF INJ 300/0.5 80	<i>unit/ml</i> 91
GONAL-F RFF INJ 450/0.75 80	<i>heparin sodium (porcine) inj 10000</i>
GONAL-F RFF INJ 75UNIT 80	<i>unit/ml</i> 91
GONAL-F RFF INJ 900/1.5 80	<i>heparin sodium (porcine) inj 20000</i>
<i>granisetron hcl tab 1 mg</i> 85	<i>unit/ml</i> 91
<i>griseofulvin microsize susp 125 mg/5ml</i>	<i>heparin sodium (porcine) inj 5000</i>
..... 13	<i>unit/ml</i> 91
<i>griseofulvin microsize tab 500 mg</i> 13	<i>heparin sodium (porcine) pf inj 5000</i>
<i>griseofulvin ultramicrosize tab 125 mg</i> 13	<i>unit/0.5ml</i> 91
<i>griseofulvin ultramicrosize tab 250 mg</i> 13	HEPLISAV-B INJ 20/0.5ML..... 98
<i>guanfacine hcl tab 1 mg</i> 43	HEPLISAV-B INJ 20MCG 98
<i>guanfacine hcl tab 2 mg</i> 43	HEXALEN CAP 50MG..... 21
<i>guanfacine hcl tab er 24hr 1 mg (base</i>	HIBERIX SOL 10MCG..... 98
<i>equiv)</i> 61	HUMATROPE INJ 12MG 81
<i>guanfacine hcl tab er 24hr 2 mg (base</i>	HUMATROPE INJ 24MG 81
<i>equiv)</i> 61	HUMATROPE INJ 5MG 81
<i>guanfacine hcl tab er 24hr 3 mg (base</i>	HUMATROPE INJ 6MG 81
<i>equiv)</i> 61	HUMATROPEN MIS FOR 12MG 100
<i>guanfacine hcl tab er 24hr 4 mg (base</i>	HUMATROPEN MIS FOR 24MG 100
<i>equiv)</i> 61	HUMATROPEN MIS FOR 6MG 100
GUANIDINE TAB 125MG 65	HUMIRA INJ 10/0.1ML..... 94
GYNAZOLE-1 CRE 2%..... 90	HUMIRA INJ 10MG/0.2 94
GYNOL II GEL 3% 89	HUMIRA INJ 20/0.2ML..... 94
H	HUMIRA INJ 40/0.4ML..... 94
<i>halobetasol propionate cream 0.05%</i> 117	HUMIRA KIT 20MG/0.4 94
<i>halobetasol propionate oint 0.05%</i> ... 117	HUMIRA KIT 40MG/0.8..... 94
HALOG CRE 0.1%..... 117	HUMIRA PEDIA INJ CROHNS 94
HALOG OIN 0.1%..... 117	HUMIRA PEN INJ 40/0.4ML..... 94
<i>haloperidol decanoate im soln 100 mg/ml</i>	HUMIRA PEN INJ CD/UC/HS..... 94
..... 58	HUMIRA PEN INJ PS/UV..... 94
<i>haloperidol decanoate im soln 50 mg/ml</i>	HUMIRA PEN KIT CD/UC/HS 94

HUMIRA PEN KIT PS/UV	94	hydromorphone hcl tab 4 mg.....	5
HUMULIN INJ 70/30	71	hydromorphone hcl tab 8 mg.....	5
HUMULIN INJ 70/30KWP	71	hydromorphone hcl tab er 24hr deter 12	
HUMULIN N INJ U-100.....	71	mg.....	5
HUMULIN N INJ U-100KWP.....	71	hydromorphone hcl tab er 24hr deter 16	
HUMULIN R INJ U-100.....	71	mg.....	5
HUMULIN R INJ U-500.....	71	hydromorphone hcl tab er 24hr deter 32	
hydralazine hcl tab 10 mg	43	mg.....	5
hydralazine hcl tab 100 mg	43	hydromorphone hcl tab er 24hr deter 8	
hydralazine hcl tab 25 mg	43	mg.....	5
hydralazine hcl tab 50 mg	43	hydroxychloroquine sulfate tab 200 mg	
hydrochlorothiazide cap 12.5 mg	42	.....	95
hydrochlorothiazide tab 12.5 mg	43	hydroxyurea cap 500 mg.....	29
hydrochlorothiazide tab 25 mg	43	hydroxyzine hcl syrup 10 mg/5ml.....	107
hydrochlorothiazide tab 50 mg	43	hydroxyzine hcl tab 10 mg	107
hydrocodone w/ homatropine syrup 5-		hydroxyzine hcl tab 25 mg	107
1.5 mg/5ml.....	109	hydroxyzine hcl tab 50 mg	108
hydrocodone w/ homatropine tab 5-1.5		hyoscyamine sulfate sl tab 0.125 mg..	84
mg.....	109	hyoscyamine sulfate tab 0.125 mg	84
hydrocodone-acetaminophen soln 7.5-		hyoscyamine sulfate tab disint 0.125 mg	
325 mg/15ml	4	.....	84
hydrocodone-acetaminophen tab 10-325		hyoscyamine sulfate tab er 12hr 0.375	
mg.....	5	mg.....	84
hydrocodone-acetaminophen tab 5-325		HYQVIA INJ 10-800.....	96
mg.....	4	HYQVIA INJ 2.5-200.....	96
hydrocodone-acetaminophen tab 7.5-325		HYQVIA INJ 20-1600.....	96
mg.....	4	HYQVIA INJ 30-2400.....	96
hydrocodone-ibuprofen tab 10-200 mg.	5	HYQVIA INJ 5-400.....	96
hydrocortisone butyrate cream 0.1% 117		HYSINGLA ER TAB 100 MG	5
hydrocortisone butyrate hydrophilic lipo		HYSINGLA ER TAB 120 MG	5
base cream 0.1%	117	HYSINGLA ER TAB 20 MG	5
hydrocortisone butyrate oint 0.1% ...	117	HYSINGLA ER TAB 30 MG	5
hydrocortisone butyrate soln 0.1% ...	117	HYSINGLA ER TAB 40 MG	5
hydrocortisone cream 1%.....	117	HYSINGLA ER TAB 60 MG	5
hydrocortisone cream 2.5%.....	117	HYSINGLA ER TAB 80 MG	5
hydrocortisone lotion 2.5%.....	117	I	
hydrocortisone oint 1%	117	ibandronate sodium tab 150 mg (base	
hydrocortisone oint 2.5%	117	equivalent).....	73
hydrocortisone tab 10 mg.....	80	IBRANCE CAP 100MG	24
hydrocortisone tab 20 mg.....	80	IBRANCE CAP 125MG	24
hydrocortisone tab 5 mg.....	80	IBRANCE CAP 75MG	24
hydrocortisone valerate cream 0.2% 117		ibuprofen susp 100 mg/5ml.....	2
hydrocortisone valerate oint 0.2%	117	ibuprofen tab 400 mg.....	2
hydrocortisone w/ acetic acid otic soln 1-		ibuprofen tab 600 mg.....	2
2%	119	ibuprofen tab 800 mg.....	2
HYDROMORPHON SUP 3MG	5	icatibant acetate inj 30 mg/3ml (base	
hydromorphone hcl liqd 1 mg/ml	5	equivalent).....	92
hydromorphone hcl tab 2 mg.....	5	ICLUSIG TAB 15MG.....	26

ICLUSIG TAB 45MG.....	26	INTRON A INJ 25MU.....	96
<i>idarubicin hcl iv inj 10 mg/10ml (1</i>		INTRON A INJ 50MU.....	96
<i>mg/ml)</i>	22	<i>introvale tab.....</i>	75
<i>idarubicin hcl iv inj 20 mg/20ml (1</i>		INVIRASE CAP 200MG.....	14
<i>mg/ml)</i>	22	INVIRASE TAB 500MG.....	14
<i>idarubicin hcl iv inj 5 mg/5ml (1 mg/ml)</i>		IPOL INJ INACTIVE.....	98
<i>.....</i>	22	<i>ipratropium bromide inhal soln 0.02%</i>	
IDHIFA TAB 100MG.....	26	<i>.....</i>	106
IDHIFA TAB 50MG.....	26	<i>ipratropium bromide nasal soln 0.03%</i>	
<i>ifosfamide for inj 1 gm</i>	21	<i>(21 mcg/spray).....</i>	106
<i>ifosfamide iv inj 1 gm/20ml (50 mg/ml)</i>		<i>ipratropium bromide nasal soln 0.06%</i>	
<i>.....</i>	21	<i>(42 mcg/spray).....</i>	106
<i>ifosfamide iv inj 3 gm/60ml (50 mg/ml)</i>		<i>ipratropium-albuterol nebu soln 0.5-</i>	
<i>.....</i>	21	<i>2.5(3) mg/3ml.....</i>	106
ILEVRO DRO 0.3% OP.....	104	<i>irbesartan tab 150 mg.....</i>	34
<i>imatinib mesylate tab 100 mg (base</i>		<i>irbesartan tab 300 mg.....</i>	34
<i>equivalent).....</i>	26	<i>irbesartan tab 75 mg.....</i>	34
<i>imatinib mesylate tab 400 mg (base</i>		<i>irbesartan-hydrochlorothiazide tab 150-</i>	
<i>equivalent).....</i>	26	<i>12.5 mg.....</i>	33
IMBRUVICA CAP 140MG.....	26	<i>irbesartan-hydrochlorothiazide tab 300-</i>	
IMBRUVICA CAP 70MG.....	26	<i>12.5 mg.....</i>	33
IMBRUVICA TAB 140MG.....	27	<i>irinotecan hcl inj 100 mg/5ml (20</i>	
IMBRUVICA TAB 280MG.....	27	<i>mg/ml)</i>	30
IMBRUVICA TAB 420MG.....	27	<i>irinotecan hcl inj 40 mg/2ml (20 mg/ml)</i>	
IMBRUVICA TAB 560MG.....	27	<i>.....</i>	30
<i>imipramine hcl tab 10 mg.....</i>	53	<i>irinotecan hcl inj 500 mg/25ml (20</i>	
<i>imipramine hcl tab 25 mg.....</i>	53	<i>mg/ml)</i>	30
<i>imipramine hcl tab 50 mg.....</i>	53	ISENTRESS CHW 100MG.....	14
<i>imipramine pamoate cap 100 mg.....</i>	54	ISENTRESS CHW 25MG.....	14
<i>imipramine pamoate cap 125 mg.....</i>	54	ISENTRESS HD TAB 600MG.....	14
<i>imipramine pamoate cap 150 mg.....</i>	54	ISENTRESS POW 100MG.....	14
<i>imipramine pamoate cap 75 mg</i>	53	ISENTRESS TAB 400MG.....	14
<i>imiquimod cream 5%</i>	114	<i>isoniazid syrup 50 mg/5ml</i>	16
INCRELEX INJ 40MG/4ML.....	81	<i>isoniazid tab 100 mg.....</i>	16
INCRUSE ELPT INH 62.5MCG.....	106	<i>isoniazid tab 300 mg.....</i>	16
<i>indapamide tab 1.25 mg.....</i>	43	ISORDIL TAB 40MG.....	44
<i>indapamide tab 2.5 mg</i>	43	<i>isosorbide dinitrate tab 10 mg</i>	44
INFANRIX INJ.....	98	<i>isosorbide dinitrate tab 20 mg</i>	44
INLYTA TAB 1MG.....	27	<i>isosorbide dinitrate tab 30 mg</i>	44
INLYTA TAB 5MG.....	27	<i>isosorbide dinitrate tab 5 mg</i>	44
INSULIN PEN NEEDLES.....	100	<i>isosorbide dinitrate tab er 40 mg</i>	44
INSULIN PEN NEEDLES/SYRINGES....	100	<i>isosorbide mononitrate tab 10 mg</i>	44
INTELENCE TAB 100MG.....	14	<i>isosorbide mononitrate tab 20 mg</i>	44
INTELENCE TAB 200MG.....	14	<i>isosorbide mononitrate tab er 24hr 120</i>	
INTELENCE TAB 25MG.....	14	<i>mg.....</i>	44
INTRAROSA SUP 6.5MG.....	69	<i>isosorbide mononitrate tab er 24hr 30</i>	
INTRON A INJ 10MU.....	96	<i>mg.....</i>	44
INTRON A INJ 18MU.....	96	<i>isosorbide mononitrate tab er 24hr 60</i>	

<i>mg</i>	44
<i>isotretinoin cap 10 mg</i>	113
<i>isradipine cap 2.5 mg</i>	41
<i>isradipine cap 5 mg</i>	41
<i>itraconazole cap 100 mg</i>	13
<i>itraconazole oral soln 10 mg/ml</i>	13
IV PREP WIPE PAD	114
<i>ivermectin tab 3 mg</i>	11

J

JAKAFI TAB 10MG	27
JAKAFI TAB 15MG	27
JAKAFI TAB 20MG	27
JAKAFI TAB 25MG	27
JAKAFI TAB 5MG	27
<i>jantoven tab 10mg</i>	91
<i>jantoven tab 1mg</i>	91
<i>jantoven tab 2.5mg</i>	91
<i>jantoven tab 2mg</i>	91
<i>jantoven tab 3mg</i>	91
<i>jantoven tab 4mg</i>	91
<i>jantoven tab 5mg</i>	91
<i>jantoven tab 6mg</i>	91
<i>jantoven tab 7.5mg</i>	91
JANUMET TAB 50-1000.....	70
JANUMET TAB 50-500MG.....	70
JANUMET XR TAB 100-1000	70
JANUMET XR TAB 50-1000	70
JANUMET XR TAB 50-500MG	70
JANUVIA TAB 100MG.....	70
JANUVIA TAB 25MG.....	70
JANUVIA TAB 50MG.....	70
JARDIANCE TAB 10MG.....	72
JARDIANCE TAB 25MG.....	72
JENTADUETO TAB XR	70
<i>jinteli tab 1mg-5mcg</i>	79
<i>jolessa tab</i>	75
<i>jolivette tab 0.35mg</i>	75
JUBLIA SOL 10%.....	114
<i>junel 1.5/30 tab</i>	75
<i>junel 1/20 tab</i>	75
<i>junel fe tab 1.5/30</i>	75
<i>junel fe tab 1/20</i>	75

K

KADCYLA INJ 100MG.....	24
KADCYLA INJ 160MG.....	24
KALETRA TAB 100-25MG.....	15
KALETRA TAB 200-50MG.....	15
KALYDECO PAK 25MG.....	110

KALYDECO PAK 50MG.....	110
KALYDECO PAK 75MG.....	110
KALYDECO TAB 150MG.....	110
<i>kariva tab 28 day</i>	75
<i>k-effervesce tab 25meq ef</i>	100
<i>kelnor tab 1/35</i>	75
<i>ketoconazole cream 2%</i>	114
<i>ketoconazole foam 2%</i>	115
<i>ketoconazole shampoo 2%</i>	116
KETONE URINE TEST STRIPS.....	100
<i>ketoprofen cap er 24hr 200 mg</i>	2
<i>ketorolac tromethamine im inj 60 mg/2ml (30 mg/ml)</i>	2
<i>ketorolac tromethamine inj 15 mg/ml</i> ...	2
<i>ketorolac tromethamine inj 30 mg/ml</i> ...	2
<i>ketorolac tromethamine ophth soln 0.4%</i>	104
<i>ketorolac tromethamine ophth soln 0.5%</i>	104
<i>ketorolac tromethamine tab 10 mg</i>	2
<i>ketotif fum dro 0.025%op</i>	105
KEVZARA INJ 150/1.14	94, 95
KEVZARA INJ 200/1.14	95
KEYTRUDA INJ 100MG/4M.....	24
KINRIX INJ.....	98
<i>kionex sus 15gm/60</i>	74
KISQALI TAB 200DOSE	24
KISQALI TAB 400DOSE	24
KISQALI TAB 600DOSE	24
<i>klor-con 10 tab 10meq er</i>	100
<i>klor-con 8 tab 8meq er</i>	100
<i>klor-con m15 tab 15meq er</i>	101
<i>klor-con m20 tab 20meq er</i>	101
<i>kurvelo tab 0.15/30</i>	75
KUVAN POW 100MG	77
KUVAN POW 500MG	77
KUVAN TAB 100MG	77
KYLEENA IUD 19.5MG	75

L

<i>labetalol hcl tab 100 mg</i>	39
<i>labetalol hcl tab 200 mg</i>	39
<i>labetalol hcl tab 300 mg</i>	39
LACRISERT MIS 5MG OP.....	106
<i>lactic acid (ammonium lactate) cream 12%</i>	118
<i>lactic acid (ammonium lactate) lotion 10%</i>	118
<i>lactic acid (ammonium lactate) lotion</i>	

12%.....	118	<i>lanthanum carbonate chew tab 500 mg (elemental)</i>	82
<i>lactulose solution 10 gm/15ml</i>	87	<i>lanthanum carbonate chew tab 750 mg (elemental)</i>	82
LAMISIL ADV GEL 1%	115	<i>larin tab 1.5/30</i>	75
LAMISIL AT SPR 1%	115	LASTACRAFT SOL 0.25%.....	105
<i>lamivudine oral soln 10 mg/ml</i>	14	<i>latanoprost ophth soln 0.005%</i>	105
<i>lamivudine tab 100 mg (hbv)</i>	16	LATUDA TAB 120MG.....	58
<i>lamivudine tab 150 mg</i>	14	LATUDA TAB 20MG.....	58
<i>lamivudine tab 300 mg</i>	14	LATUDA TAB 40MG.....	58
<i>lamivudine-zidovudine tab 150-300 mg</i>	15	LATUDA TAB 60MG.....	58
<i>lamotrigine orally disintegrating tab 100 mg</i>	48	LATUDA TAB 80MG.....	58
<i>lamotrigine orally disintegrating tab 200 mg</i>	48	<i>leena tab</i>	75
<i>lamotrigine orally disintegrating tab 25 mg</i>	48	<i>leflunomide tab 10 mg</i>	95
<i>lamotrigine orally disintegrating tab 50 mg</i>	48	<i>leflunomide tab 20 mg</i>	95
<i>lamotrigine tab 100 mg</i>	48	LENVIMA CAP 10 MG	27
<i>lamotrigine tab 150 mg</i>	48	LENVIMA CAP 12MG	27
<i>lamotrigine tab 200 mg</i>	48	LENVIMA CAP 14 MG	27
<i>lamotrigine tab 25 mg</i>	48	LENVIMA CAP 18 MG	27
<i>lamotrigine tab 25 mg (35) starter kit</i>	48	LENVIMA CAP 20 MG	27
<i>lamotrigine tab 25 mg (42) & 100 mg (7) starter kit</i>	48	LENVIMA CAP 24 MG	27
<i>lamotrigine tab 25 mg (84) & 100 mg (14) starter kit</i>	48	LENVIMA CAP 4MG	27
<i>lamotrigine tab chewable dispersible 25 mg</i>	48	LENVIMA CAP 8 MG	27
<i>lamotrigine tab chewable dispersible 5 mg</i>	48	<i>lessina tab</i>	75
<i>lamotrigine tab er 24hr 100 mg</i>	48	LETAIRIS TAB 10MG.....	45
<i>lamotrigine tab er 24hr 200 mg</i>	48	LETAIRIS TAB 5MG.....	45
<i>lamotrigine tab er 24hr 25 mg</i>	48	<i>letrozole tab 2.5 mg</i>	25
<i>lamotrigine tab er 24hr 250 mg</i>	48	<i>leucovorin calcium for inj 100 mg</i>	30
<i>lamotrigine tab er 24hr 300 mg</i>	48	<i>leucovorin calcium for inj 200 mg</i>	30
<i>lamotrigine tab er 24hr 50 mg</i>	48	<i>leucovorin calcium for inj 350 mg</i>	30
LANCETS	100	<i>leucovorin calcium for inj 50 mg</i>	29
LANCING DEVICE	100	<i>leucovorin calcium for inj 500 mg</i>	30
LANOXIN TAB 0.0625MG	42	<i>leucovorin calcium tab 10 mg</i>	30
LANOXIN TAB 0.1875MG	42	<i>leucovorin calcium tab 15 mg</i>	30
<i>lansoprazole cap 15mg dr</i>	88	<i>leucovorin calcium tab 25 mg</i>	30
<i>lansoprazole cap delayed release 15 mg</i>	88	<i>leucovorin calcium tab 5 mg</i>	30
<i>lansoprazole cap delayed release 30 mg</i>	88	LEUKERAN TAB 2MG.....	21
<i>lanthanum carbonate chew tab 1000 mg (elemental)</i>	82	<i>leuprolide acetate inj kit 5 mg/ml</i>	25
		<i>levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv)</i>	108
		<i>levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv)</i>	108
		<i>levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv)</i>	108
		<i>levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)</i>	108
		LEVEMIR INJ	71
		LEVEMIR INJ FLEXTUOC	71

<i>levetiracetam oral soln 100 mg/ml</i>	48	LEXIVA SUS 50MG/ML.....	14
<i>levetiracetam tab 1000 mg</i>	48	<i>lice treatmt lot 1%</i>	119
<i>levetiracetam tab 250 mg</i>	48	<i>lice trtmnt liq 1%</i>	119
<i>levetiracetam tab 500 mg</i>	48	<i>lidocaine hcl laryngotracheal soln 4%</i>	119
<i>levetiracetam tab 750 mg</i>	48	<i>lidocaine hcl soln 4%</i>	118
<i>levetiracetam tab er 24hr 500 mg</i>	48	<i>lidocaine hcl urethral/mucosal gel 2%</i>	118
<i>levetiracetam tab er 24hr 750 mg</i>	48	<i>lidocaine hcl viscous soln 2%</i>	119
<i>levobunolol hcl ophth soln 0.5%</i>	105	<i>lidocaine-prilocaine cream 2.5-2.5%</i>	118
<i>levocetirizine dihydrochloride soln 2.5</i>		<i>lidocaine-prilocaine cream kit 2.5-2.5%</i>	
<i>mg/5ml (0.5 mg/ml)</i>	108	.....	118
<i>levocetirizine dihydrochloride tab 5 mg</i>		LILETTA IUD 52MG.....	75
.....	108	<i>lindane shampoo 1%</i>	119
<i>levofloxacin ophth soln 0.5%</i>	103	<i>linezolid for susp 100 mg/5ml</i>	11
<i>levofloxacin oral soln 25 mg/ml</i>	19	<i>linezolid tab 600 mg</i>	12
<i>levofloxacin tab 250 mg</i>	19	LINZESS CAP 145MCG.....	86
<i>levofloxacin tab 500 mg</i>	19	LINZESS CAP 290MCG.....	86
<i>levofloxacin tab 750 mg</i>	19	LINZESS CAP 72MCG.....	86
<i>levonest tab</i>	75	<i>liothyronine sodium tab 25 mcg</i>	83
<i>levonorgestrel & ethinyl estradiol (91-</i>		<i>liothyronine sodium tab 5 mcg</i>	83
<i>day) tab 0.15-0.03 mg</i>	75	<i>liothyronine sodium tab 50 mcg</i>	83
<i>levonorgestrel & ethinyl estradiol tab</i>		<i>lisinopril & hydrochlorothiazide tab 10-</i>	
<i>0.15 mg-30 mcg</i>	75	<i>12.5 mg</i>	31
<i>levonorg-eth est tab 0.1-0.02mg(84) &</i>		<i>lisinopril & hydrochlorothiazide tab 20-</i>	
<i>eth est tab 0.01mg(7)</i>	75	<i>12.5 mg</i>	31
<i>levora-28 tab 0.15/30</i>	75	<i>lisinopril & hydrochlorothiazide tab 20-25</i>	
<i>levothyroxine sodium tab 100 mcg</i>	83	<i>mg</i>	31
<i>levothyroxine sodium tab 112 mcg</i>	83	<i>lisinopril tab 10 mg</i>	32
<i>levothyroxine sodium tab 125 mcg</i>	83	<i>lisinopril tab 2.5 mg</i>	32
<i>levothyroxine sodium tab 137 mcg</i>	83	<i>lisinopril tab 20 mg</i>	32
<i>levothyroxine sodium tab 150 mcg</i>	83	<i>lisinopril tab 30 mg</i>	32
<i>levothyroxine sodium tab 175 mcg</i>	83	<i>lisinopril tab 40 mg</i>	32
<i>levothyroxine sodium tab 200 mcg</i>	83	<i>lisinopril tab 5 mg</i>	32
<i>levothyroxine sodium tab 25 mcg</i>	83	<i>lithium carbonate cap 150 mg</i>	65
<i>levothyroxine sodium tab 300 mcg</i>	83	<i>lithium carbonate cap 300 mg</i>	65
<i>levothyroxine sodium tab 50 mcg</i>	83	<i>lithium carbonate cap 600 mg</i>	65
<i>levothyroxine sodium tab 75 mcg</i>	83	<i>lithium carbonate tab 300 mg</i>	65
<i>levothyroxine sodium tab 88 mcg</i>	83	<i>lithium carbonate tab er 300 mg</i>	65
<i>levoxyl tab 100mcg</i>	83	<i>lithium carbonate tab er 450 mg</i>	65
<i>levoxyl tab 112mcg</i>	83	LITHIUM SOL 8MEQ/5ML	65
<i>levoxyl tab 125mcg</i>	83	LIVALO TAB 1MG.....	37
<i>levoxyl tab 137mcg</i>	83	LIVALO TAB 2MG.....	37
<i>levoxyl tab 150mcg</i>	83	LIVALO TAB 4MG.....	37
<i>levoxyl tab 175mcg</i>	83	LO LOESTRIN TAB 1-10-10.....	75
<i>levoxyl tab 200mcg</i>	83	<i>lokara lot 0.05%</i>	117
<i>levoxyl tab 25mcg</i>	83	<i>loperamide hcl cap 2 mg</i>	87
<i>levoxyl tab 50mcg</i>	83	<i>lopinavir-ritonavir soln 400-100 mg/5ml</i>	
<i>levoxyl tab 75mcg</i>	83	<i>(80-20 mg/ml)</i>	15
<i>levoxyl tab 88mcg</i>	83	<i>loratadine cap 10 mg</i>	108

<i>loratadine syp 5mg/5ml</i>	108
<i>loratadine tab 10mg</i>	108
<i>lorazepam conc 2 mg/ml</i>	46
<i>lorazepam tab 0.5 mg</i>	46
<i>lorazepam tab 1 mg</i>	46
<i>lorazepam tab 2 mg</i>	46
LORBRENA TAB 100MG.....	27
LORBRENA TAB 25MG	27
<i>lortab tab 10-325mg</i>	5
<i>loryna tab 3-0.02mg</i>	75
<i>losartan potassium & hydrochlorothiazide</i> <i>tab 100-12.5 mg</i>	33
<i>losartan potassium & hydrochlorothiazide</i> <i>tab 100-25 mg</i>	33
<i>losartan potassium & hydrochlorothiazide</i> <i>tab 50-12.5 mg</i>	33
<i>losartan potassium tab 100 mg</i>	35
<i>losartan potassium tab 25 mg</i>	34
<i>losartan potassium tab 50 mg</i>	34
LOTEMAX GEL 0.5%	104
LOTEMAX OIN 0.5%	104
LOTEMAX SUS 0.5%.....	104
<i>loteprednol etabonate ophth susp 0.5%</i>	104
LOTRIMIN AF AER 2%	115
LOTRIMIN ULT CRE 1%	115
<i>lovastatin tab 10 mg</i>	37
<i>lovastatin tab 20 mg</i>	37
<i>lovastatin tab 40 mg</i>	37
<i>low-ogestrel tab</i>	75
<i>loxapine succinate cap 10 mg</i>	58
<i>loxapine succinate cap 25 mg</i>	58
<i>loxapine succinate cap 5 mg</i>	58
<i>loxapine succinate cap 50 mg</i>	58
<i>ludent chw 0.25mg f</i>	101
<i>ludent chw 0.5mg f</i>	101
<i>ludent chw 1mg f</i>	101
LUMIGAN SOL 0.01%	105
LUPANETA KIT 11.25-5.....	82
LUPANETA KIT 3.75-5	82
LUPR DEP-PED INJ 11.25MG.....	25
LUPR DEP-PED INJ 15MG.....	25
LUPR DEP-PED INJ 3M 30MG	25
LUPR DEP-PED INJ 7.5MG.....	25
LURIDE DRO 0.5MG/ML.....	101
<i>luteru tab</i>	75
LYNPARZA CAP 50MG	24
LYNPARZA TAB 100MG	24

LYNPARZA TAB 150MG	24
LYRICA CAP 100MG.....	48
LYRICA CAP 150MG.....	48
LYRICA CAP 200MG.....	48
LYRICA CAP 225MG.....	48
LYRICA CAP 25MG.....	48
LYRICA CAP 300MG.....	48
LYRICA CAP 50MG	48
LYRICA CAP 75MG	48
LYRICA SOL 20MG/ML.....	48
LYSODREN TAB 500MG	25

M

<i>malathion lotion 0.5%</i>	119
<i>maprotiline hcl tab 25 mg</i>	54
<i>maprotiline hcl tab 50 mg</i>	54
<i>maprotiline hcl tab 75 mg</i>	54
<i>marlissa tab 0.15/30</i>	75
MARPLAN TAB 10MG	54
MATULANE CAP 50MG	29
<i>matzim la tab 180mg/24</i>	41
<i>matzim la tab 240mg/24</i>	41
<i>matzim la tab 300mg/24</i>	41
<i>matzim la tab 360mg/24</i>	41
<i>matzim la tab 420mg/24</i>	41
MAXIDEX SUS 0.1% OP.....	104
<i>meclizine hcl tab 12.5 mg</i>	85
<i>meclizine hcl tab 25 mg</i>	85
<i>meclofenamate sodium cap 100 mg</i>	2
<i>meclofenamate sodium cap 50 mg</i>	2
MEDROL TAB 2MG	80
<i>medroxyprogesterone acetate im susp</i> <i>150 mg/ml</i>	75
<i>medroxyprogesterone acetate im susp</i> <i>prefilled syr 150 mg/ml</i>	75
<i>medroxyprogesterone acetate tab 10 mg</i>	82
<i>medroxyprogesterone acetate tab 2.5</i> <i>mg</i>	82
<i>medroxyprogesterone acetate tab 5 mg</i>	82
<i>mefenamic acid cap 250 mg</i>	2
<i>mefloquine hcl tab 250 mg</i>	13
<i>megestrol acetate susp 40 mg/ml</i>	25
<i>megestrol acetate tab 20 mg</i>	25
<i>megestrol acetate tab 40 mg</i>	25
MEKINIST TAB 0.5MG.....	27
MEKINIST TAB 2MG.....	27
<i>meloxicam tab 15 mg</i>	2

<i>meloxicam tab 7.5 mg</i>	2	<i>methamphetamine hcl tab 5 mg</i>	61
<i>melphalan tab 2 mg</i>	21	<i>methazolamide tab 25 mg</i>	43
<i>memantine hcl cap er 24hr 14 mg</i>	50	<i>methazolamide tab 50 mg</i>	43
<i>memantine hcl cap er 24hr 21 mg</i>	50	<i>methenamine hippurate tab 1 gm</i>	12
<i>memantine hcl cap er 24hr 28 mg</i>	50	<i>methimazole tab 10 mg</i>	83
<i>memantine hcl cap er 24hr 7 mg</i>	50	<i>methimazole tab 5 mg</i>	83
<i>memantine hcl oral solution 2 mg/ml</i> ..	50	<i>methocarbamol tab 500 mg</i>	67
<i>memantine hcl tab 10 mg</i>	51	<i>methocarbamol tab 750 mg</i>	67
<i>memantine hcl tab 5 mg</i>	50	<i>methotrexate sodium for inj 1 gm</i>	23
<i>memantine hcl tab 5 mg (28) & 10 mg</i> <i>(21) titration pak</i>	51	<i>methotrexate sodium inj 250 mg/10ml</i> <i>(25 mg/ml)</i>	23
<i>MENACTRA INJ</i>	98	<i>methotrexate sodium inj 50 mg/2ml (25</i> <i>mg/ml)</i>	23
<i>MENEST TAB 0.3MG</i>	79	<i>methotrexate sodium inj pf 1000</i> <i>mg/40ml (25 mg/ml)</i>	23
<i>MENEST TAB 0.625MG</i>	79	<i>methotrexate sodium inj pf 250 mg/10ml</i> <i>(25 mg/ml)</i>	23
<i>MENEST TAB 1.25MG</i>	79	<i>methotrexate sodium inj pf 50 mg/2ml</i> <i>(25 mg/ml)</i>	23
<i>MENEST TAB 2.5MG</i>	79	<i>methotrexate sodium tab 2.5 mg (base</i> <i>equiv)</i>	96
<i>MENHIBRIX INJ</i>	98	<i>methoxsalen rapid cap 10 mg</i>	116
<i>MENOMUNE INJ A/C/Y/W</i>	98	<i>methscopolamine bromide tab 2.5 mg</i> 84	
<i>MENTAX CRE 1%</i>	115	<i>methscopolamine bromide tab 5 mg</i> ...	84
<i>MENVEO INJ</i>	98	<i>methyclothiazide tab 5 mg</i>	43
<i>meprobamate tab 200 mg</i>	46	<i>methyldopa tab 250 mg</i>	43
<i>meprobamate tab 400 mg</i>	46	<i>methyldopa tab 500 mg</i>	43
<i>mercaptopurine tab 50 mg</i>	23	<i>methylphenidate hcl cap er 10 mg (cd)</i> 61	
<i>mesalamine enema 4 gm</i>	86	<i>methylphenidate hcl cap er 20 mg (cd)</i> 61	
<i>mesalamine rectal enema 4 gm &</i> <i>cleanser wipe kit</i>	86	<i>methylphenidate hcl cap er 24hr 20 mg</i> <i>(la)</i>	62
<i>mesalamine suppos 1000 mg</i>	86	<i>methylphenidate hcl cap er 24hr 30 mg</i> <i>(la)</i>	62
<i>mesna inj 100 mg/ml</i>	30	<i>methylphenidate hcl cap er 24hr 40 mg</i> <i>(la)</i>	62
<i>MESNEX TAB 400MG</i>	30	<i>methylphenidate hcl cap er 24hr 60 mg</i> <i>(la)</i>	62
<i>metaproterenol sulfate syrup 10 mg/5ml</i>	108	<i>methylphenidate hcl cap er 30 mg (cd)</i> 62	
<i>metaproterenol sulfate tab 10 mg</i>	108	<i>methylphenidate hcl cap er 40 mg (cd)</i> 62	
<i>metaproterenol sulfate tab 20 mg</i>	108	<i>methylphenidate hcl cap er 50 mg (cd)</i> 62	
<i>metaxalone tab 400 mg</i>	67	<i>methylphenidate hcl cap er 60 mg (cd)</i> 62	
<i>metaxalone tab 800 mg</i>	67	<i>methylphenidate hcl chew tab 10 mg</i> ..	62
<i>metformin hcl tab 1000 mg</i>	70	<i>methylphenidate hcl chew tab 2.5 mg</i> 62	
<i>metformin hcl tab 500 mg</i>	70	<i>methylphenidate hcl chew tab 5 mg</i> ...	62
<i>metformin hcl tab 850 mg</i>	70	<i>methylphenidate hcl soln 10 mg/5ml</i> ..	62
<i>metformin hcl tab er 24hr 500 mg</i>	70	<i>methylphenidate hcl soln 5 mg/5ml</i>	62
<i>metformin hcl tab er 24hr 750 mg</i>	70	<i>methylphenidate hcl tab 10 mg</i>	62
<i>methadone con 10mg/ml</i>	6	<i>methylphenidate hcl tab 20 mg</i>	62
<i>methadone hcl conc 10 mg/ml</i>	6		
<i>methadone hcl soln 10 mg/5ml</i>	6		
<i>methadone hcl soln 5 mg/5ml</i>	6		
<i>methadone hcl tab 10 mg</i>	6		
<i>methadone hcl tab 5 mg</i>	6		
<i>methadone hcl tab for oral susp 40 mg</i> .	6		
<i>methadose tab 40mg</i>	6		

<i>methylphenidate hcl tab 5 mg</i>	62	<i>metoprolol succinate tab er 24hr 50 mg</i> (tartrate equiv)	39
<i>methylphenidate hcl tab er 10 mg</i>	62	<i>metoprolol tartrate tab 100 mg</i>	39
<i>methylphenidate hcl tab er 20 mg</i>	62	<i>metoprolol tartrate tab 25 mg</i>	39
<i>methylphenidate hcl tab er 24hr 18 mg</i>	62	<i>metoprolol tartrate tab 50 mg</i>	39
<i>methylphenidate hcl tab er 24hr 27 mg</i>	62	<i>metronidazole cap 375 mg</i>	12
<i>methylphenidate hcl tab er 24hr 36 mg</i>	62	<i>metronidazole cream 0.75%</i>	119
<i>methylphenidate hcl tab er 24hr 54 mg</i>	62	<i>metronidazole gel 0.75%</i>	119
<i>methylphenidate hcl tab er osmotic</i> <i>release (osm) 18 mg</i>	62	<i>metronidazole gel 1%</i>	119
<i>methylphenidate hcl tab er osmotic</i> <i>release (osm) 27 mg</i>	62	<i>metronidazole lotion 0.75%</i>	119
<i>methylphenidate hcl tab er osmotic</i> <i>release (osm) 36 mg</i>	62	<i>metronidazole tab 250 mg</i>	12
<i>methylphenidate hcl tab er osmotic</i> <i>release (osm) 54 mg</i>	62	<i>metronidazole tab 500 mg</i>	12
<i>methylprednisolone tab 16 mg</i>	80	<i>metronidazole vaginal gel 0.75%</i>	90
<i>methylprednisolone tab 32 mg</i>	80	<i>mexiletine hcl cap 150 mg</i>	35
<i>methylprednisolone tab 4 mg</i>	80	<i>mexiletine hcl cap 200 mg</i>	35
<i>methylprednisolone tab 8 mg</i>	80	<i>mexiletine hcl cap 250 mg</i>	35
<i>methylprednisolone tab therapy pack 4</i> <i>mg (21)</i>	80	<i>mibelas 24 chw fe</i>	75
<i>methyltestosterone cap 10 mg</i>	69	<i>miconazole 1 kit 1200-2%</i>	90
<i>metipranolol ophth soln 0.3%</i>	105	<i>miconazole 3 kit 4%</i>	90
<i>metoclopramide hcl soln 5 mg/5ml (10</i> <i>mg/10ml) (base equiv)</i>	85	<i>miconazole 3 kit combo pk</i>	90
<i>metoclopramide hcl tab 10 mg (base</i> <i>equivalent)</i>	85	<i>miconazole 3 sup 200mg</i>	90
<i>metoclopramide hcl tab 5 mg (base</i> <i>equivalent)</i>	85	<i>miconazole 7 cre tube/kit</i>	90
<i>metolazone tab 10 mg</i>	43	<i>miconazorb pow af 2%</i>	115
<i>metolazone tab 2.5 mg</i>	43	<i>microgestin tab 1.5/30</i>	75
<i>metolazone tab 5 mg</i>	43	<i>midodrine hcl tab 10 mg</i>	44
<i>metoprolol & hydrochlorothiazide tab</i> <i>100-25 mg</i>	38	<i>midodrine hcl tab 2.5 mg</i>	44
<i>metoprolol & hydrochlorothiazide tab</i> <i>100-50 mg</i>	38	<i>midodrine hcl tab 5 mg</i>	44
<i>metoprolol & hydrochlorothiazide tab 50-</i> <i>25 mg</i>	38	<i>miglitol tab 100 mg</i>	69
<i>metoprolol succinate tab er 24hr 100 mg</i> (tartrate equiv)	39	<i>miglitol tab 25 mg</i>	69
<i>metoprolol succinate tab er 24hr 200 mg</i> (tartrate equiv)	39	<i>miglitol tab 50 mg</i>	69
<i>metoprolol succinate tab er 24hr 25 mg</i> (tartrate equiv)	39	<i>mimvey lo tab 0.5-0.1</i>	79
		<i>mimvey tab 1-0.5mg</i>	79
		<i>minitrans dis 0.1mg/hr</i>	44
		<i>minitrans dis 0.2mg/hr</i>	44
		<i>minitrans dis 0.4mg/hr</i>	44
		<i>minitrans dis 0.6mg/hr</i>	44
		<i>minocycline hcl cap 100 mg</i>	21
		<i>minocycline hcl cap 50 mg</i>	21
		<i>minocycline hcl cap 75 mg</i>	21
		<i>minocycline hcl tab 100 mg</i>	21
		<i>minocycline hcl tab 50 mg</i>	21
		<i>minocycline hcl tab 75 mg</i>	21
		<i>minoxidil tab 10 mg</i>	44
		<i>minoxidil tab 2.5 mg</i>	44
		<i>MIRENA IUD SYSTEM</i>	75
		<i>mirtazapine orally disintegrating tab 15</i> <i>mg</i>	54
		<i>mirtazapine orally disintegrating tab 30</i> <i>mg</i>	54

<i>mg</i>	54	<i>mg</i>	6
<i>mirtazapine orally disintegrating tab</i>	45	<i>morphine sulfate beads cap er 24hr</i>	30
<i>mg</i>	54	<i>mg</i>	6
<i>mirtazapine tab 15 mg</i>	54	<i>morphine sulfate beads cap er 24hr</i>	45
<i>mirtazapine tab 30 mg</i>	54	<i>mg</i>	6
<i>mirtazapine tab 45 mg</i>	54	<i>morphine sulfate beads cap er 24hr</i>	60
<i>mirtazapine tab 7.5 mg</i>	54	<i>mg</i>	6
MIRVASO GEL 0.33%	119	<i>morphine sulfate beads cap er 24hr</i>	75
MISC LANCETS	100	<i>mg</i>	6
<i>misoprostol tab 100 mcg</i>	87	<i>morphine sulfate beads cap er 24hr</i>	90
<i>misoprostol tab 200 mcg</i>	87	<i>mg</i>	6
<i>mitomycin for iv soln 20 mg</i>	22	<i>morphine sulfate cap er 24hr 10 mg</i>	6
<i>mitomycin for iv soln 40 mg</i>	22	<i>morphine sulfate cap er 24hr 100 mg</i> ...	6
<i>mitomycin for iv soln 5 mg</i>	22	<i>morphine sulfate cap er 24hr 20 mg</i>	6
<i>mitoxantrone hcl inj conc 20 mg/10ml (2</i>		<i>morphine sulfate cap er 24hr 30 mg</i>	6
<i>mg/ml)</i>	29	<i>morphine sulfate cap er 24hr 50 mg</i>	6
<i>mitoxantrone hcl inj conc 25 mg/12.5ml</i>		<i>morphine sulfate cap er 24hr 60 mg</i>	6
<i>(2 mg/ml)</i>	29	<i>morphine sulfate cap er 24hr 80 mg</i>	6
<i>mitoxantrone hcl inj conc 30 mg/15ml (2</i>		<i>morphine sulfate oral soln 10 mg/5ml ..</i>	6
<i>mg/ml)</i>	29	<i>morphine sulfate oral soln 100 mg/5ml</i>	
M-M-R II INJ	98	<i>(20 mg/ml)</i>	7
<i>modafinil tab 100 mg</i>	68	<i>morphine sulfate oral soln 20 mg/5ml ..</i>	7
<i>modafinil tab 200 mg</i>	68	<i>morphine sulfate suppos 10 mg</i>	7
<i>moexipril hcl tab 15 mg</i>	32	<i>morphine sulfate suppos 20 mg</i>	7
<i>moexipril hcl tab 7.5 mg</i>	32	<i>morphine sulfate suppos 30 mg</i>	7
<i>moexipril-hydrochlorothiazide tab 15-</i>		<i>morphine sulfate suppos 5 mg</i>	7
<i>12.5 mg</i>	31	<i>morphine sulfate tab 15 mg</i>	7
<i>moexipril-hydrochlorothiazide tab 15-25</i>		<i>morphine sulfate tab 30 mg</i>	7
<i>mg</i>	31	<i>morphine sulfate tab er 100 mg</i>	7
<i>moexipril-hydrochlorothiazide tab 7.5-</i>		<i>morphine sulfate tab er 15 mg</i>	7
<i>12.5 mg</i>	31	<i>morphine sulfate tab er 200 mg</i>	7
<i>mometasone furoate cream 0.1%</i>	117	<i>morphine sulfate tab er 30 mg</i>	7
<i>mometasone furoate oint 0.1%</i>	118	<i>morphine sulfate tab er 60 mg</i>	7
<i>mometasone furoate solution 0.1%</i>		MOTOFEN TAB 1-0.025.....	87
<i>(lotion)</i>	118	MOVANTIK TAB 12.5MG	87
<i>mono-linyah tab 0.25-35</i>	75	MOVANTIK TAB 25MG	87
<i>mononessa tab</i>	75	MOVIPREP SOL.....	87
<i>montelukast sodium chew tab 4 mg</i>		MOXEZA SOL 0.5%	103
<i>(base equiv)</i>	109	<i>moxifloxacin hcl ophth soln 0.5% (base</i>	
<i>montelukast sodium chew tab 5 mg</i>		<i>equiv)</i>	104
<i>(base equiv)</i>	109	<i>moxifloxacin hcl tab 400 mg (base equiv)</i>	
<i>montelukast sodium oral granules packet</i>		.....	19
<i>4 mg (base equiv)</i>	109	MULTAQ TAB 400MG	35
<i>montelukast sodium tab 10 mg (base</i>		<i>multi-vit/fe dro /fl 0.25</i>	102
<i>equiv)</i>	109	<i>multivit/fl chw 0.25mg</i>	103
MONUROL PAK GRANULES	11	<i>multivit/fl chw 0.5mg</i>	102
<i>morgidox cap 1x100mg</i>	21	<i>multivit/fl chw 1mg</i>	103
<i>morphine sulfate beads cap er 24hr</i>	120	<i>multi-vit/fl dro 0.25mg</i>	102

<i>multi-vit/fl dro 0.5mg/ml</i>	102
<i>mupirocin oint 2%</i>	114
<i>mvc-fluoride chw 1mg</i>	103
<i>mycophenolate mofetil cap 250 mg</i>	97
<i>mycophenolate mofetil for oral susp 200 mg/ml</i>	97
<i>mycophenolate mofetil tab 500 mg</i>	97
<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i>	97
<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i>	97
<i>myorisan cap 20mg</i>	113
<i>myorisan cap 40mg</i>	113
<i>MYRBETRIQ TAB 25MG</i>	90
<i>MYRBETRIQ TAB 50MG</i>	90
<i>myzilra tab</i>	75

N

<i>nabumetone tab 500 mg</i>	2
<i>nabumetone tab 750 mg</i>	2
<i>nadolol & bendroflumethiazide tab 40-5 mg</i>	38
<i>nadolol tab 20 mg</i>	39
<i>nadolol tab 40 mg</i>	39
<i>nadolol tab 80 mg</i>	39
<i>nafrinse chw 1mg f</i>	101
<i>nafrinse dro 0.125mg</i>	101
<i>naftifine hcl cream 1%</i>	115
<i>naftifine hcl cream 2%</i>	115
<i>nalbuphine hcl inj 10 mg/ml</i>	7
<i>nalbuphine hcl inj 20 mg/ml</i>	7
<i>naloxone hcl inj 0.4 mg/ml</i>	68
<i>naloxone hcl inj 4 mg/10ml</i>	68
<i>naloxone hcl soln cartridge 0.4 mg/ml</i> 68	
<i>naloxone hcl soln prefilled syringe 2 mg/2ml</i>	68
<i>naltrexone hcl tab 50 mg</i>	68
<i>NAMENDA XR CAP TITRATIO</i>	51
<i>naproxen dr tab 375mg</i>	2
<i>naproxen dr tab 500mg</i>	2
<i>naproxen tab 250 mg</i>	2
<i>naproxen tab 375 mg</i>	2
<i>naproxen tab 500 mg</i>	2
<i>naratriptan hcl tab 1 mg (base equiv)</i> .	64
<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	64
<i>NARCAN SPR</i>	68
<i>NATACYN SUS 5% OP</i>	104
<i>NATAZIA TAB</i>	75

<i>nateglinide tab 120 mg</i>	71
<i>nateglinide tab 60 mg</i>	71
<i>NEBUPENT INH 300MG</i>	12
<i>necon tab 0.5/35</i>	75
<i>necon tab 1/35</i>	75
<i>necon tab 1/50-28</i>	75
<i>NECON TAB 10/11-28</i>	76
<i>nefazodone hcl tab 100 mg</i>	54
<i>nefazodone hcl tab 150 mg</i>	54
<i>nefazodone hcl tab 200 mg</i>	54
<i>nefazodone hcl tab 250 mg</i>	54
<i>nefazodone hcl tab 50 mg</i>	54
<i>neomycin sulfate tab 500 mg</i>	11
<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	104
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	103
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	103
<i>neomycin-polymyxin-hc ophth susp</i> ..	103
<i>neomycin-polymyxin-hc otic soln 1%</i> 119	
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	120
<i>NEVANAC SUS 0.1%</i>	104
<i>nevirapine susp 50 mg/5ml</i>	14
<i>nevirapine tab 200 mg</i>	14
<i>nevirapine tab er 24hr 100 mg</i>	14
<i>nevirapine tab er 24hr 400 mg</i>	14
<i>NEXAVAR TAB 200MG</i>	27
<i>NEXIUM 24HR CAP 20MG</i>	88
<i>NEXIUM 24HR TAB 20MG</i>	88
<i>NEXPLANON IMP 68MG</i>	76
<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	37
<i>niacin tab er 500 mg (antihyperlipidemic)</i>	37
<i>niacin tab er 750 mg (antihyperlipidemic)</i>	37
<i>nicardipine hcl cap 20 mg</i>	41
<i>nicardipine hcl cap 30 mg</i>	41
<i>nicorelief gum 4mg mint</i>	68
<i>nicotine dis 7mg/24hr</i>	68
<i>nicotine pol loz 4mg mint</i>	68
<i>nicotine polacrilex gum 2 mg</i>	68
<i>nicotine polacrilex gum 4 mg</i>	68
<i>nicotine polacrilex lozenge 2 mg</i>	68
<i>nicotine td patch 24hr 14 mg/24hr</i>	68
<i>nicotine td patch 24hr 21 mg/24hr</i>	68

<i>nicotine td patch 24hr 7 mg/24hr</i>	68	<i>norethindrone acetate tab 5 mg</i>	82
NICOTROL INH	69	<i>norethindrone acetate-ethinyl estradiol</i>	
NICOTROL NS SPR 10MG/ML	69	<i>tab 0.5 mg-2.5 mcg</i>	79
<i>nifedipine tab er 24hr 30 mg</i>	41	<i>norethindrone tab 0.35 mg</i>	76
<i>nifedipine tab er 24hr 60 mg</i>	41	<i>norgestimate & ethinyl estradiol tab 0.25</i>	
<i>nifedipine tab er 24hr 90 mg</i>	41	<i>mg-35 mcg</i>	76
<i>nifedipine tab er 24hr osmotic release 90</i>		<i>norgestimate-eth estrad tab 0.18-</i>	
<i>mg</i>	41	<i>25/0.215-25/0.25-25 mg-mcg</i>	76
<i>nikki tab 3-0.02mg</i>	76	<i>norgestimate-eth estrad tab 0.18-</i>	
<i>nilutamide tab 150 mg</i>	25	<i>35/0.215-35/0.25-35 mg-mcg</i>	76
<i>nimodipine cap 30 mg</i>	41	NORPACE CAP 100MG CR	35
NIPENT INJ 10MG	23	NORPACE CAP 150MG CR	35
<i>nisoldipine tab er 24hr 17 mg</i>	41	<i>nortrel tab 0.5/35</i>	76
<i>nisoldipine tab er 24hr 20 mg</i>	41	<i>nortrel tab 1/35</i>	76
<i>nisoldipine tab er 24hr 25.5 mg</i>	41	<i>nortrel tab 7/7/7</i>	76
<i>nisoldipine tab er 24hr 30 mg</i>	41	<i>nortriptyline hcl cap 10 mg</i>	54
<i>nisoldipine tab er 24hr 34 mg</i>	41	<i>nortriptyline hcl cap 25 mg</i>	54
<i>nisoldipine tab er 24hr 40 mg</i>	41	<i>nortriptyline hcl cap 50 mg</i>	54
<i>nisoldipine tab er 24hr 8.5 mg</i>	41	<i>nortriptyline hcl cap 75 mg</i>	54
NITRO-DUR DIS 0.3MG/HR	44	<i>nortriptyline hcl soln 10 mg/5ml</i>	54
NITRO-DUR DIS 0.8MG/HR	44	NORTUSS-EX LIQ 200-20/5	109
<i>nitrofurantoin macrocrystalline cap 100</i>		NORVIR CAP 100MG	14
<i>mg</i>	12	NORVIR POW 100MG	14
<i>nitrofurantoin macrocrystalline cap 25</i>		NORVIR SOL 80MG/ML	14
<i>mg</i>	12	NOVOLIN INJ 70/30	71
<i>nitrofurantoin macrocrystalline cap 50</i>		NOVOLIN INJ FLEXPEN	71
<i>mg</i>	12	NOVOLIN N INJ U-100	71
<i>nitrofurantoin monohydrate</i>		NOVOLIN R INJ U-100	71
<i>macrocrystalline cap 100 mg</i>	12	NOVOLOG INJ 100/ML	71
<i>nitroglycerin sl tab 0.3 mg</i>	44	NOVOLOG INJ FLEXPEN	71
<i>nitroglycerin sl tab 0.4 mg</i>	44	NOVOLOG INJ PENFILL	71
<i>nitroglycerin sl tab 0.6 mg</i>	44	NOVOLOG MIX INJ 70/30	71
<i>nitroglycerin td patch 24hr 0.1 mg/hr</i> .	44	NOVOLOG MIX INJ FLEXPEN	71
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i> .	44	NOXAFIL SUS 40MG/ML	13
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i> .	44	NOXAFIL TAB 100MG	13
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i> .	44	NUCALA INJ 100MG	108
<i>nitroglycerin tl soln 0.4 mg/spray (400</i>		NUCALA INJ 100MG/ML	109
<i>mcg/spray)</i>	44	NUCYNTA ER TAB 100MG	7
<i>nizatidine cap 150 mg</i>	86	NUCYNTA ER TAB 150MG	7
<i>nizatidine cap 300 mg</i>	86	NUCYNTA ER TAB 200MG	7
<i>nizatidine oral soln 15 mg/ml</i>	86	NUCYNTA ER TAB 250MG	7
<i>nora-be tab 0.35mg</i>	76	NUCYNTA ER TAB 50MG	7
<i>norethindrone & ethinyl estradiol-fe chew</i>		NUCYNTA TAB 100MG	8
<i>tab 0.8 mg-25 mcg</i>	76	NUCYNTA TAB 50MG	8
<i>norethindrone ace & ethinyl estradiol tab</i>		NUCYNTA TAB 75MG	8
<i>1 mg-20 mcg</i>	76	NUDEXTA CAP 20-10MG	65
<i>norethindrone ace-ethinyl estradiol-fe</i>		<i>nulev tab 0.125mg</i>	84
<i>tab 1 mg-20 mcg (24)</i>	76	NUPLAZID TAB 17MG	58

NUVARING MIS	76	hydrochlorothiazide tab 20-12.5 mg ...	33
nyamyc pow 100000	115	olmesartan medoxomil-	
nystatin cream 100000 unit/gm	115	hydrochlorothiazide tab 40-12.5 mg ...	34
nystatin oint 100000 unit/gm	115	olmesartan medoxomil-	
nystatin susp 100000 unit/ml	119	hydrochlorothiazide tab 40-25 mg	34
nystatin tab 500000 unit	13	olmesartan-amlodipine-	
nystatin-triamcinolone cream 100000-		hydrochlorothiazide tab 20-5-12.5 mg	34
0.1 unit/gm-%	115	olmesartan-amlodipine-	
nystatin-triamcinolone oint 100000-0.1		hydrochlorothiazide tab 40-10-12.5 mg	
unit/gm-%	115	.....	34
nystop pow 100000	115	olmesartan-amlodipine-	
O		hydrochlorothiazide tab 40-10-25 mg.	34
ocella tab 3-0.03mg	76	olmesartan-amlodipine-	
octreotide acetate inj 100 mcg/ml (0.1		hydrochlorothiazide tab 40-5-12.5 mg	34
mg/ml)	81	olmesartan-amlodipine-	
octreotide acetate inj 1000 mcg/ml (1		hydrochlorothiazide tab 40-5-25 mg ...	34
mg/ml)	81	olopatadine hcl ophth soln 0.1% (base	
octreotide acetate inj 200 mcg/ml (0.2		equivalent)	105
mg/ml)	81	olopatadine hcl ophth soln 0.2% (base	
octreotide acetate inj 50 mcg/ml (0.05		equivalent)	105
mg/ml)	81	omega-3-acid ethyl esters cap 1 gm ...	37
octreotide acetate inj 500 mcg/ml (0.5		omepra/bicar cap 20-1100	88
mg/ml)	81	omeprazole cap delayed release 10 mg	88
ODEFSEY TAB	15	omeprazole cap delayed release 20 mg	88
ODOMZO CAP 200MG	29	omeprazole cap delayed release 40 mg	88
ofloxacin ophth soln 0.3%	104	omeprazole magnesium cap dr 20.6 mg	
ofloxacin otic soln 0.3%	120	(20 mg base equiv)	88
ofloxacin tab 300 mg	19	OMEPRAZOLE TAB 20MG	89
ofloxacin tab 400 mg	19	OMNARIS SPR	110
ogestrel tab	76	OMNIFLEX DPR	99
olanzapine orally disintegrating tab 10		ONCASPAR INJ 750/ML	29
mg	58	ondansetron hcl oral soln 4 mg/5ml ...	85
olanzapine orally disintegrating tab 15		ondansetron hcl tab 24 mg	85
mg	58	ondansetron hcl tab 4 mg	85
olanzapine orally disintegrating tab 20		ondansetron hcl tab 8 mg	85
mg	58	ondansetron orally disintegrating tab 4	
olanzapine orally disintegrating tab 5 mg		mg	85
.....	58	ondansetron orally disintegrating tab 8	
olanzapine tab 10 mg	59	mg	85
olanzapine tab 15 mg	59	OPSUMIT TAB 10MG	45
olanzapine tab 2.5 mg	58	ORAL GLUCOSE REPLACEMENT	81
olanzapine tab 20 mg	59	oralone dent pst 0.1%	119
olanzapine tab 5 mg	58	ORENITRAM TAB 0.125MG	45
olanzapine tab 7.5 mg	59	ORENITRAM TAB 0.25MG	45
olmesartan medoxomil tab 20 mg	35	ORENITRAM TAB 1MG	45
olmesartan medoxomil tab 40 mg	35	ORENITRAM TAB 2.5MG	45
olmesartan medoxomil tab 5 mg	35	ORENITRAM TAB 5MG	45
olmesartan medoxomil-		ORFADIN CAP 10MG	77

ORFADIN CAP 20MG.....	77
ORFADIN CAP 2MG.....	77
ORFADIN CAP 5MG.....	77
ORFADIN SUS 4MG/ML.....	77
ORKAMBI GRA 100-125.....	110
ORKAMBI GRA 150-188.....	110
ORKAMBI TAB 100-125	110
ORKAMBI TAB 200-125	110
orphenadrine citrate inj 30 mg/ml	67
orphenadrine citrate tab er 12hr 100 mg	67
orsythia tab.....	76
oscimin sr tab 0.375mg.....	84
oscimin sub 0.125mg	84
oscimin tab 0.125mg.....	84
oseltamivir phosphate cap 30 mg (base equiv)	16
oseltamivir phosphate cap 45 mg (base equiv)	16
oseltamivir phosphate cap 75 mg (base equiv)	16
oseltamivir phosphate for susp 6 mg/ml (base equiv).....	16
OSMOPREP TAB 1.5GM.....	87
OSPHENA TAB 60MG	81
OTEZLA TAB 10/20/30	96
OTEZLA TAB 30MG.....	96
OVIDREL INJ	80
oxaliplatin for iv inj 100 mg.....	29
oxaliplatin for iv inj 50 mg.....	29
oxaliplatin iv soln 100 mg/20ml.....	29
oxaliplatin iv soln 50 mg/10ml.....	29
oxaprozin tab 600 mg	2
oxazepam cap 10 mg	46
oxazepam cap 15 mg	46
oxazepam cap 30 mg	46
oxcarbazepine susp 300 mg/5ml (60 mg/ml)	48
oxcarbazepine tab 150 mg	48
oxcarbazepine tab 300 mg	49
oxcarbazepine tab 600 mg	49
oxiconazole nitrate cream 1%	115
OXISTAT LOT 1%	115
oxybutynin chloride syrup 5 mg/5ml...	90
oxybutynin chloride tab 5 mg	90
oxybutynin chloride tab er 24hr 10 mg	90
oxybutynin chloride tab er 24hr 15 mg	90
oxybutynin chloride tab er 24hr 5 mg .	90

oxycodone hcl cap 5 mg	8
oxycodone hcl conc 100 mg/5ml (20 mg/ml)	8
oxycodone hcl soln 5 mg/5ml	8
oxycodone hcl tab 10 mg.....	8
oxycodone hcl tab 15 mg.....	8
oxycodone hcl tab 20 mg.....	8
oxycodone hcl tab 30 mg.....	8
oxycodone hcl tab 5 mg	8
oxycodone hcl tab er 12hr deter 10 mg	8
oxycodone hcl tab er 12hr deter 15 mg	8
oxycodone hcl tab er 12hr deter 20 mg	8
oxycodone hcl tab er 12hr deter 30 mg	8
oxycodone hcl tab er 12hr deter 40 mg	8
oxycodone hcl tab er 12hr deter 60 mg	8
oxycodone hcl tab er 12hr deter 80 mg	8
oxycodone w/ acetaminophen soln 5-325 mg/5ml.....	9
oxycodone w/ acetaminophen tab 10-325 mg.....	9
oxycodone w/ acetaminophen tab 2.5-325 mg	9
oxycodone w/ acetaminophen tab 5-325 mg.....	9
oxycodone w/ acetaminophen tab 7.5-325 mg	9
oxycodone-aspirin tab 4.8355-325 mg..	9
oxycodone-ibuprofen tab 5-400 mg.....	9
OXYCONTIN TAB 10MG CR	9
OXYCONTIN TAB 15MG CR	9
OXYCONTIN TAB 20MG CR	9
OXYCONTIN TAB 30MG CR	9
OXYCONTIN TAB 40MG CR	9
OXYCONTIN TAB 60MG CR	9
OXYCONTIN TAB 80MG CR	9
oxymorphone hcl tab 10 mg	9
oxymorphone hcl tab 5 mg	9
oxymorphone hcl tab er 12hr 10 mg.....	9
oxymorphone hcl tab er 12hr 15 mg...	10
oxymorphone hcl tab er 12hr 20 mg...	10
oxymorphone hcl tab er 12hr 30 mg...	10
oxymorphone hcl tab er 12hr 40 mg...	10
oxymorphone hcl tab er 12hr 5 mg.....	9
oxymorphone hcl tab er 12hr 7.5 mg....	9
OZEMPIC INJ 2/1.5ML	70

P

pacerone tab 100mg	35
pacerone tab 200mg	35

<i>paclitaxel iv conc 100 mg/16.7ml (6 mg/ml)</i>	24	<i>mg/5ml</i>	20
<i>paclitaxel iv conc 150 mg/25ml (6 mg/ml)</i>	24	<i>penicillin v potassium for soln 250 mg/5ml</i>	20
<i>paclitaxel iv conc 30 mg/5ml (6 mg/ml)</i>	23	<i>penicillin v potassium tab 250 mg</i>	20
<i>paclitaxel iv conc 300 mg/50ml (6 mg/ml)</i>	24	<i>penicillin v potassium tab 500 mg</i>	20
<i>paliperidone tab er 24hr 1.5 mg</i>	59	PENTACEL INJ	98
<i>paliperidone tab er 24hr 3 mg</i>	59	<i>pentamidine isethionate for soln 300 mg</i>	12
<i>paliperidone tab er 24hr 6 mg</i>	59	<i>pentoxifylline tab er 400 mg</i>	92
<i>paliperidone tab er 24hr 9 mg</i>	59	<i>perindopril erbumine tab 2 mg</i>	32
<i>pamidronate disodium for inj 30 mg</i> ...	73	<i>perindopril erbumine tab 4 mg</i>	32
<i>pamidronate disodium for inj 90 mg</i> ...	73	<i>perindopril erbumine tab 8 mg</i>	32
<i>pamidronate disodium iv soln 3 mg/ml</i>	73	<i>periogard sol 0.12%</i>	119
<i>pamidronate disodium iv soln 9 mg/ml</i>	73	<i>permethrin cream 5%</i>	119
<i>pantoprazole sodium ec tab 20 mg (base equiv)</i>	89	<i>perphenazine tab 16 mg</i>	59
<i>pantoprazole sodium ec tab 40 mg (base equiv)</i>	89	<i>perphenazine tab 2 mg</i>	59
PARAGARD IUD T380A	76	<i>perphenazine tab 4 mg</i>	59
<i>paricalcitol cap 1 mcg</i>	103	<i>perphenazine tab 8 mg</i>	59
<i>paricalcitol cap 2 mcg</i>	103	<i>phenadoz sup 25mg</i>	85
<i>paricalcitol cap 4 mcg</i>	103	<i>phenazopyridine tab 95mg</i>	89
<i>paromomycin sulfate cap 250 mg</i>	11	<i>phenelzine sulfate tab 15 mg</i>	54
<i>paroxetine hcl tab 10 mg</i>	54	<i>phenobarbital elixir 20 mg/5ml</i>	49
<i>paroxetine hcl tab 20 mg</i>	54	<i>phenobarbital tab 100 mg</i>	49
<i>paroxetine hcl tab 30 mg</i>	54	<i>phenobarbital tab 15 mg</i>	49
<i>paroxetine hcl tab 40 mg</i>	54	<i>phenobarbital tab 16.2 mg</i>	49
<i>paroxetine hcl tab er 24hr 12.5 mg</i>	54	<i>phenobarbital tab 30 mg</i>	49
<i>paroxetine hcl tab er 24hr 25 mg</i>	54	<i>phenobarbital tab 32.4 mg</i>	49
<i>paroxetine hcl tab er 24hr 37.5 mg</i>	54	<i>phenobarbital tab 60 mg</i>	49
PASER GRA 4GM	16	<i>phenobarbital tab 64.8 mg</i>	49
PAZEO DRO 0.7%	105	<i>phenobarbital tab 97.2 mg</i>	49
PEDIARIX INJ 0.5ML.....	98	<i>phenoxybenzamine hcl cap 10 mg</i>	44
PEDIATRIC RESPIRATORY MASK	100	<i>phenylephrine hcl ophth soln 10%</i>	106
PEDVAX HIB INJ	98	<i>phenylephrine hcl ophth soln 2.5%</i> ...	106
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	87	<i>phenytoin chew tab 50 mg</i>	49
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm</i>	87	<i>phenytoin sodium extended cap 100 mg</i>	49
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	87	<i>phenytoin sodium extended cap 200 mg</i>	49
PEGANONE TAB 250MG	49	<i>phenytoin sodium extended cap 300 mg</i>	49
PEGASYS INJ	19	<i>phenytoin susp 125 mg/5ml</i>	49
PEGASYS INJ 180MCG/M	19	PHOSPHOLINE SOL 0.125%OP	105
PEGASYS INJ PROCLICK	19	PHOTOFRIN INJ 75MG	29
<i>penicillin v potassium for soln 125 mg/5ml</i>	20	<i>physiolyte sol</i>	106
		<i>phytonadione tab 5 mg</i>	103
		PICATO GEL 0.015%	114
		PICATO GEL 0.05%	114
		<i>pilocarpine hcl ophth soln 1%</i>	105

<i>pilocarpine hcl tab 5 mg</i>	119	<i>meq/15ml)</i>	101
<i>pilocarpine hcl tab 7.5 mg</i>	119	<i>potassium chloride oral soln 20% (40</i>	
<i>pimecrolimus cream 1%</i>	118	<i>meq/15ml)</i>	101
<i>pimozide tab 1 mg</i>	65	<i>potassium chloride tab er 10 meq</i>	101
<i>pimozide tab 2 mg</i>	65	<i>potassium chloride tab er 20 meq (1500</i>	
<i>pindolol tab 10 mg</i>	39	<i>mg)</i>	101
<i>pindolol tab 5 mg</i>	39	<i>potassium chloride tab er 8 meq (600</i>	
<i>pioglitazone hcl tab 15 mg (base equiv)</i>		<i>mg)</i>	101
.....	71	<i>potassium citrate tab er 10 meq (1080</i>	
<i>pioglitazone hcl tab 30 mg (base equiv)</i>		<i>mg)</i>	89
.....	71	<i>potassium citrate tab er 15 meq (1620</i>	
<i>pioglitazone hcl tab 45 mg (base equiv)</i>		<i>mg)</i>	89
.....	71	<i>potassium citrate tab er 5 meq (540 mg)</i>	
<i>pioglitazone hcl-glimepiride tab 30-2 mg</i>		.....	89
.....	71	PRADAXA CAP 110MG.....	91
<i>pioglitazone hcl-glimepiride tab 30-4 mg</i>		PRADAXA CAP 150MG.....	91
.....	71	PRADAXA CAP 75MG	91
<i>pioglitazone hcl-metformin hcl tab 15-</i>		<i>pramipexole dihydrochloride tab 0.125</i>	
<i>500 mg</i>	70	<i>mg</i>	56
<i>pioglitazone hcl-metformin hcl tab 15-</i>		<i>pramipexole dihydrochloride tab 0.25 mg</i>	
<i>850 mg</i>	70	.....	56
<i>pirmella tab 1/35</i>	76	<i>pramipexole dihydrochloride tab 0.5 mg</i>	
<i>pirmella tab 7/7/7</i>	76	.....	56
<i>piroxicam cap 10 mg</i>	2	<i>pramipexole dihydrochloride tab 0.75 mg</i>	
<i>piroxicam cap 20 mg</i>	2	.....	56
PLEGRIDY INJ	66	<i>pramipexole dihydrochloride tab 1 mg</i>	57
PLEGRIDY INJ PEN	66	<i>pramipexole dihydrochloride tab 1.5 mg</i>	
PLEGRIDY INJ STARTER.....	66	.....	57
PLEGRIDY PEN INJ STARTER.....	66	<i>pramipexole dihydrochloride tab er 24hr</i>	
PLENVU SOL.....	87	<i>0.375 mg</i>	57
PNEUMOVAX 23 INJ 25/0.5	98	<i>pramipexole dihydrochloride tab er 24hr</i>	
<i>podofilox soln 0.5%</i>	118	<i>0.75 mg</i>	57
<i>polycin oin op</i>	104	<i>pramipexole dihydrochloride tab er 24hr</i>	
<i>polyethylene glycol 3350 oral powder</i> .	87	<i>1.5 mg</i>	57
<i>polymyxin b-trimethoprim ophth soln</i>		<i>pramipexole dihydrochloride tab er 24hr</i>	
<i>10000 unit/ml-0.1%</i>	104	<i>2.25 mg</i>	57
POMALYST CAP 1MG.....	96	<i>pramipexole dihydrochloride tab er 24hr</i>	
POMALYST CAP 2MG.....	96	<i>3 mg</i>	57
POMALYST CAP 3MG.....	96	<i>pramipexole dihydrochloride tab er 24hr</i>	
POMALYST CAP 4MG.....	96	<i>3.75 mg</i>	57
<i>portia-28 tab</i>	76	<i>pramipexole dihydrochloride tab er 24hr</i>	
<i>potassium chloride cap er 10 meq</i>	101	<i>4.5 mg</i>	57
<i>potassium chloride cap er 8 meq</i>	101	<i>pramox gel 1%</i>	118
<i>potassium chloride microencapsulated</i>		<i>prasugrel hcl tab 10 mg (base equiv)</i> .	93
<i>crys er tab 10 meq</i>	101	<i>prasugrel hcl tab 5 mg (base equiv)</i> ...	93
<i>potassium chloride microencapsulated</i>		<i>pravastatin sodium tab 10 mg</i>	37
<i>crys er tab 20 meq</i>	101	<i>pravastatin sodium tab 20 mg</i>	37
<i>potassium chloride oral soln 10% (20</i>		<i>pravastatin sodium tab 40 mg</i>	37

<i>pravastatin sodium tab 80 mg</i>	37	PREMARIN VAG CRE 0.625MG	80
<i>praziquantel tab 600 mg</i>	12	<i>prenatabs rx tab</i>	103
<i>prazosin hcl cap 1 mg</i>	32	PREPOPIK PAK	87
<i>prazosin hcl cap 2 mg</i>	32	<i>prevalite pow 4gm</i>	36
<i>prazosin hcl cap 5 mg</i>	32	<i>previfem tab</i>	76
PRED MILD SUS 0.12% OP	104	PREVNAR 13 INJ	98
PRED SOD PHO SOL 1% OP	104	PREZCOBIX TAB 800-150	15
<i>prednicarbate cream 0.1%</i>	118	PREZISTA SUS 100MG/ML	14
<i>prednicarbate oint 0.1%</i>	118	PREZISTA TAB 150MG	14
<i>prednisolone acetate ophth susp 1%</i>	104	PREZISTA TAB 600MG	14
<i>prednisolone sod phosph oral soln 6.7</i> <i>mg/5ml (5 mg/5ml base)</i>	80	PREZISTA TAB 75MG	14
<i>prednisolone sod phosphate oral soln 15</i> <i>mg/5ml (base equiv)</i>	80	PREZISTA TAB 800MG	14
<i>prednisolone sodium phosphate oral soln</i> <i>25 mg/5ml (base eq)</i>	81	PRIFTIN TAB 150MG	16
<i>prednisolone syrup 15 mg/5ml (usp</i> <i>solution equivalent)</i>	81	<i>primaquine phosphate tab 26.3 mg (15</i> <i>mg base)</i>	13
PREDNISON CON 5MG/ML	81	<i>primidone tab 250 mg</i>	49
<i>prednisone oral soln 5 mg/5ml</i>	81	<i>primidone tab 50 mg</i>	49
<i>prednisone tab 1 mg</i>	81	PRIMSOL SOL 50MG/5ML	12
<i>prednisone tab 10 mg</i>	81	PROAIR HFA AER	108
<i>prednisone tab 2.5 mg</i>	81	PROAIR RESPI AER	108
<i>prednisone tab 20 mg</i>	81	<i>probenecid tab 500 mg</i>	1
<i>prednisone tab 5 mg</i>	81	<i>procainamide hcl inj 100 mg/ml</i>	35
<i>prednisone tab 50 mg</i>	81	<i>prochlorperazine maleate tab 10 mg</i> <i>(base equivalent)</i>	85
<i>prednisone tab therapy pack 10 mg (21)</i>	81	<i>prochlorperazine maleate tab 5 mg (base</i> <i>equivalent)</i>	85
<i>prednisone tab therapy pack 10 mg (48)</i>	81	<i>prochlorperazine suppos 25 mg</i>	85
<i>prednisone tab therapy pack 5 mg (21)</i>	81	<i>procto-pak cre 1%</i>	89
<i>prednisone tab therapy pack 5 mg (48)</i>	81	<i>proctosol hc cre 2.5%</i>	89
<i>pregabalin cap 100 mg</i>	49	<i>progesterone micronized cap 100 mg</i> .	82
<i>pregabalin cap 150 mg</i>	49	<i>progesterone micronized cap 200 mg</i> .	82
<i>pregabalin cap 200 mg</i>	49	PROLASTIN-C INJ 1000MG	110
<i>pregabalin cap 225 mg</i>	49	PROLIA SOL 60MG/ML	81
<i>pregabalin cap 25 mg</i>	49	<i>prometh vc sol plain</i>	109
<i>pregabalin cap 300 mg</i>	49	<i>prometh vc/ syp codeine</i>	109
<i>pregabalin cap 50 mg</i>	49	<i>promethazine hcl suppos 12.5 mg</i>	85
<i>pregabalin cap 75 mg</i>	49	<i>promethazine hcl suppos 25 mg</i>	85
<i>pregabalin soln 20 mg/ml</i>	49	<i>promethazine hcl syrup 6.25 mg/5ml</i> .	85
PREMARIN TAB 0.3MG	79	<i>promethazine hcl tab 12.5 mg</i>	85
PREMARIN TAB 0.45MG	79	<i>promethazine hcl tab 25 mg</i>	85
PREMARIN TAB 0.625MG	79	<i>promethazine hcl tab 50 mg</i>	85
PREMARIN TAB 0.9MG	79	<i>promethazine w/ codeine syrup 6.25-10</i> <i>mg/5ml</i>	109
PREMARIN TAB 1.25MG	79	<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	109
		<i>promethegan sup 12.5mg</i>	85
		<i>promethegan sup 25mg</i>	85
		<i>promethegan sup 50mg</i>	85

<i>propafenone hcl cap er 12hr 225 mg ..</i>	35	<i>.....</i>	59
<i>propafenone hcl cap er 12hr 325 mg ..</i>	35	<i>quetiapine fumarate tab er 24hr 300 mg</i>	
<i>propafenone hcl cap er 12hr 425 mg ..</i>	35	<i>.....</i>	59
<i>propafenone hcl tab 150 mg.....</i>	35	<i>quetiapine fumarate tab er 24hr 400 mg</i>	
<i>propafenone hcl tab 225 mg.....</i>	35	<i>.....</i>	59
<i>propafenone hcl tab 300 mg.....</i>	35	<i>quetiapine fumarate tab er 24hr 50 mg</i>	
<i>propranolol & hydrochlorothiazide tab</i>		<i>.....</i>	59
<i>40-25 mg.....</i>	38	<i>quinapril hcl tab 10 mg.....</i>	32
<i>propranolol & hydrochlorothiazide tab</i>		<i>quinapril hcl tab 20 mg.....</i>	32
<i>80-25 mg.....</i>	38	<i>quinapril hcl tab 40 mg.....</i>	32
<i>propranolol hcl cap er 24hr 120 mg</i>	39	<i>quinapril hcl tab 5 mg</i>	32
<i>propranolol hcl cap er 24hr 160 mg</i>	39	<i>quinapril-hydrochlorothiazide tab 10-12.5</i>	
<i>propranolol hcl cap er 24hr 60 mg</i>	39	<i>mg.....</i>	31
<i>propranolol hcl cap er 24hr 80 mg</i>	39	<i>quinapril-hydrochlorothiazide tab 20-12.5</i>	
<i>propranolol hcl oral soln 20 mg/5ml ...</i>	39	<i>mg.....</i>	31
<i>propranolol hcl oral soln 40 mg/5ml ...</i>	39	<i>quinapril-hydrochlorothiazide tab 20-25</i>	
<i>propranolol hcl tab 10 mg.....</i>	39	<i>mg.....</i>	31
<i>propranolol hcl tab 20 mg.....</i>	39	<i>quinine sulfate cap 324 mg.....</i>	13
<i>propranolol hcl tab 40 mg.....</i>	39	<i>QVAR REDIHA AER 80MCG</i>	111
<i>propranolol hcl tab 60 mg.....</i>	39	<i>QVAR REDIHAL AER 40MCG.....</i>	111
<i>propranolol hcl tab 80 mg.....</i>	39	R	
<i>propylthiouracil tab 50 mg.....</i>	83	<i>rabeprazole sodium ec tab 20 mg</i>	89
<i>PROQUAD INJ</i>	99	<i>raloxifene hcl tab 60 mg</i>	81
<i>protriptyline hcl tab 10 mg</i>	55	<i>ramelteon tab 8 mg.....</i>	63
<i>protriptyline hcl tab 5 mg</i>	55	<i>ramipril cap 1.25 mg</i>	32
<i>pseudoephed-bromphen-dm syrup 30-2-</i>		<i>ramipril cap 10 mg</i>	32
<i>10 mg/5ml.....</i>	109	<i>ramipril cap 2.5 mg</i>	32
<i>pyrazinamide tab 500 mg.....</i>	16	<i>ramipril cap 5 mg</i>	32
<i>pyridostigmine bromide syrup 60 mg/5ml</i>		<i>ranitidine hcl cap 150 mg</i>	86
<i>.....</i>	65	<i>ranitidine hcl cap 300 mg</i>	86
<i>pyridostigmine bromide tab 60 mg</i>	65	<i>ranitidine hcl syrup 15 mg/ml (75</i>	
<i>pyridostigmine bromide tab er 180 mg</i>	65	<i>mg/5ml)</i>	86
<i>pyridoxine hcl tab 25 mg</i>	103	<i>ranitidine hcl tab 150 mg.....</i>	86
<i>pyridoxine hcl tab 50 mg</i>	103	<i>ranitidine hcl tab 300 mg.....</i>	86
Q		<i>ranolazine tab er 12hr 1000 mg</i>	44
<i>QTERN TAB 10MG/5MG</i>	72	<i>ranolazine tab er 12hr 500 mg</i>	44
<i>QTERN TAB 5-5MG.....</i>	72	<i>rasagiline mesylate tab 0.5 mg (base</i>	
<i>QUADRAMET INJ</i>	29	<i>equiv)</i>	57
<i>quasense tab.....</i>	76	<i>rasagiline mesylate tab 1 mg (base</i>	
<i>quetiapine fumarate tab 100 mg.....</i>	59	<i>equiv)</i>	57
<i>quetiapine fumarate tab 200 mg.....</i>	59	<i>REBETOL SOL 40MG/ML</i>	19
<i>quetiapine fumarate tab 25 mg</i>	59	<i>REBIF INJ 22/0.5.....</i>	66
<i>quetiapine fumarate tab 300 mg.....</i>	59	<i>REBIF INJ 44/0.5.....</i>	66
<i>quetiapine fumarate tab 400 mg.....</i>	59	<i>REBIF REBIDO INJ 22/0.5</i>	66
<i>quetiapine fumarate tab 50 mg</i>	59	<i>REBIF REBIDO INJ 44/0.5</i>	66
<i>quetiapine fumarate tab er 24hr 150 mg</i>		<i>REBIF REBIDO INJ TITRATN</i>	66
<i>.....</i>	59	<i>REBIF TITRTN INJ PACK</i>	66
<i>quetiapine fumarate tab er 24hr 200 mg</i>		<i>reclipsen tab</i>	76

RECOMBIVA HB INJ 10MCG/ML.....	99	<i>rifampin cap 150 mg</i>	16
RECOMBIVA HB INJ 5MCG/0.5.....	99	<i>rifampin cap 300 mg</i>	16
RECOMBIVA-HB INJ 40MCG/ML.....	99	RIFATER TAB.....	16
RECTIV OIN 0.4%	118	<i>riluzole tab 50 mg</i>	65
REGRANEX GEL 0.01%	119	<i>rimantadine hydrochloride tab 100 mg</i>	16
RELENZA MIS DISKHALE	16	<i>risedronate sodium tab 150 mg</i>	73
REMODULIN INJ 10MG/ML.....	45	<i>risedronate sodium tab 30 mg</i>	73
REMODULIN INJ 1MG/ML.....	45	<i>risedronate sodium tab 35 mg</i>	73
REMODULIN INJ 2.5MG/ML.....	45	<i>risedronate sodium tab 5 mg</i>	73
REMODULIN INJ 5MG/ML.....	45	<i>risedronate sodium tab delayed release</i>	
<i>repaglinide tab 0.5 mg</i>	71	<i>35 mg.....</i>	73
<i>repaglinide tab 1 mg</i>	71	<i>risperidone orally disintegrating tab 0.25</i>	
<i>repaglinide tab 2 mg</i>	71	<i>mg.....</i>	59
<i>repaglinide-metformin hcl tab 1-500 mg</i>		<i>risperidone orally disintegrating tab 0.5</i>	
<i>.....</i>	71	<i>mg.....</i>	59
<i>repaglinide-metformin hcl tab 2-500 mg</i>		<i>risperidone orally disintegrating tab 1 mg</i>	
<i>.....</i>	71	<i>.....</i>	59
REPATHA INJ 140MG/ML	38	<i>risperidone orally disintegrating tab 2 mg</i>	
REPATHA PUSH INJ 420/3.5	38	<i>.....</i>	59
REPATHA SURE INJ 140MG/ML.....	38	<i>risperidone orally disintegrating tab 3 mg</i>	
RESTASIS EMU 0.05%.....	106	<i>.....</i>	59
RETACRIT INJ 10000UNT.....	92	<i>risperidone orally disintegrating tab 4 mg</i>	
RETACRIT INJ 2000UNIT	92	<i>.....</i>	59
RETACRIT INJ 3000UNIT	92	<i>risperidone soln 1 mg/ml.....</i>	59
RETACRIT INJ 40000UNT.....	92	<i>risperidone tab 0.25 mg</i>	59
RETACRIT INJ 4000UNIT	92	<i>risperidone tab 0.5 mg</i>	59
REVLIMID CAP 10MG.....	96	<i>risperidone tab 1 mg</i>	59
REVLIMID CAP 15MG.....	96	<i>risperidone tab 2 mg</i>	59
REVLIMID CAP 2.5MG.....	96	<i>risperidone tab 3 mg</i>	59
REVLIMID CAP 20MG.....	96	<i>risperidone tab 4 mg</i>	59
REVLIMID CAP 25MG.....	96	<i>ritonavir tab 100 mg</i>	14
REVLIMID CAP 5MG.....	96	<i>rivastigmine tartrate cap 1.5 mg (base</i>	
REXULTI TAB 0.25MG.....	59	<i>equivalent)</i>	51
REXULTI TAB 0.5MG.....	59	<i>rivastigmine tartrate cap 3 mg (base</i>	
REXULTI TAB 1MG	59	<i>equivalent)</i>	51
REXULTI TAB 2MG.....	59	<i>rivastigmine tartrate cap 4.5 mg (base</i>	
REXULTI TAB 3MG	59	<i>equivalent)</i>	51
REXULTI TAB 4MG.....	59	<i>rivastigmine tartrate cap 6 mg (base</i>	
REYATAZ POW 50MG.....	14	<i>equivalent)</i>	51
<i>rhinocort sus allergy</i>	110	<i>rivelsa tab</i>	76
<i>ribasphere cap 200mg.....</i>	19	<i>rizatriptan benzoate oral disintegrating</i>	
<i>ribasphere tab 200mg</i>	19	<i>tab 10 mg (base eq).....</i>	64
RIBASPHERE TAB 400MG.....	19	<i>rizatriptan benzoate oral disintegrating</i>	
<i>ribasphere tab 600mg</i>	19	<i>tab 5 mg (base eq)</i>	64
<i>ribavirin cap 200 mg</i>	19	<i>rizatriptan benzoate tab 10 mg (base</i>	
<i>ribavirin tab 200 mg.....</i>	19	<i>equivalent)</i>	64
<i>rifabutin cap 150 mg</i>	16	<i>rizatriptan benzoate tab 5 mg (base</i>	
RIFAMATE CAP	16	<i>equivalent)</i>	64

<i>ropinirole hydrochloride tab 0.25 mg ..</i>	57	<i>sevelamer carbonate packet 2.4 gm ...</i>	82
<i>ropinirole hydrochloride tab 0.5 mg</i>	57	<i>sevelamer carbonate tab 800 mg</i>	82
<i>ropinirole hydrochloride tab 1 mg</i>	57	SHARPS CONTAINER	100
<i>ropinirole hydrochloride tab 2 mg</i>	57	SHINGRIX INJ 50MCG	99
<i>ropinirole hydrochloride tab 3 mg</i>	57	SHUR-SEAL GEL 2%	89
<i>ropinirole hydrochloride tab 4 mg</i>	57	<i>sildenafil citrate iv soln 10 mg/12.5ml</i>	
<i>ropinirole hydrochloride tab 5 mg</i>	57	<i>(base equivalent)</i>	45
<i>rosadan cre 0.75%.....</i>	119	<i>sildenafil citrate tab 20 mg</i>	45
<i>rosuvastatin calcium tab 10 mg</i>	37	SILENOR TAB 3MG	63
<i>rosuvastatin calcium tab 20 mg</i>	37	SILENOR TAB 6MG	63
<i>rosuvastatin calcium tab 40 mg</i>	37	<i>silodosin cap 4 mg.....</i>	89
<i>rosuvastatin calcium tab 5 mg</i>	37	<i>silodosin cap 8 mg.....</i>	89
ROTARIX SUS	99	<i>silver sulfadiazine cream 1%</i>	114
ROTATEQ SOL	99	SIMBRINZA SUS 1-0.2%	105
ROZEREM TAB 8MG.....	63	SIMPONIA ARIA SOL 50MG/4ML	95
RYDAPT CAP 25MG	24	SIMPONI INJ 100MG/ML.....	95
S		SIMPONI INJ 50/0.5ML.....	95
SAMSCA TAB 15MG	81	<i>simvastatin tab 10 mg.....</i>	37
SAMSCA TAB 30MG	82	<i>simvastatin tab 20 mg.....</i>	37
SANCUSO DIS 3.1MG	85	<i>simvastatin tab 40 mg.....</i>	37
SANTYL OIN 250/GM.....	119	<i>simvastatin tab 5 mg.....</i>	37
SAPHRIS SUB 10MG.....	59	<i>simvastatin tab 80 mg.....</i>	37
SAPHRIS SUB 2.5MG.....	59	<i>sirolimus oral soln 1 mg/ml</i>	97
SAPHRIS SUB 5MG.....	59	<i>sirolimus tab 0.5 mg</i>	97
SAVELLA MIS TITR PAK	65	<i>sirolimus tab 1 mg</i>	97
SAVELLA TAB 100MG.....	65	<i>sirolimus tab 2 mg</i>	97
SAVELLA TAB 12.5MG	65	SIRTURO TAB 100MG.....	16
SAVELLA TAB 25MG	65	SIVEXTRO INJ 200MG	12
SAVELLA TAB 50MG	65	SIVEXTRO TAB 200MG	12
<i>scopolamine td patch 72hr 1 mg/3days</i>		SKLICE LOT 0.5%	119
.....	85	SKYLA IUD 13.5MG	76
<i>selegiline hcl cap 5 mg</i>	57	SKYRIZI INJ 150DOSE.....	95
<i>selegiline hcl tab 5 mg.....</i>	57	SLYND TAB 4MG.....	76
<i>selenium sulfide lotion 2.5%.....</i>	116	<i>sm nicotine dis 14mg/24h</i>	69
SELZENTRY SOL 20MG/ML.....	14	<i>sm nicotine dis 21mg</i>	69
SELZENTRY TAB 150MG	14	<i>sm nicotine dis 7mg/24hr.....</i>	69
SELZENTRY TAB 25MG	14	<i>sodium chloride flush iv soln 0.9% ...</i>	101
SELZENTRY TAB 300MG	14	<i>sodium chloride inj 0.9%</i>	102
SELZENTRY TAB 75MG	14	<i>sodium chloride inj 2.5 meq/ml (14.6%)</i>	
SENSIPAR TAB 30MG	73	.....	101
SENSIPAR TAB 60MG	73	<i>sodium chloride irrigation soln 0.9% .</i>	119
SENSIPAR TAB 90MG	73	<i>sodium chloride iv soln 0.45%</i>	102
<i>sertraline hcl oral concentrate for</i>		<i>sodium chloride iv soln 0.9%</i>	102
<i>solution 20 mg/ml.....</i>	55	<i>sodium chloride iv soln 3%</i>	102
<i>sertraline hcl tab 100 mg.....</i>	55	<i>sodium chloride iv soln 5%</i>	102
<i>sertraline hcl tab 25 mg</i>	55	<i>sodium chloride soln nebu 0.9%</i>	110
<i>sertraline hcl tab 50 mg</i>	55	<i>sodium chloride soln nebu 10%</i>	110
<i>sevelamer carbonate packet 0.8 gm ...</i>	82	<i>sodium chloride soln nebu 3%</i>	110

<i>sodium chloride soln nebu 7%</i>	110	<i>spironolactone tab 50 mg</i>	43
<i>sodium fluoride chew tab 0.25 mg f</i>		<i>sprintec 28 tab 28 day</i>	76
<i>(from 0.55 mg naf)</i>	101	<i>SPRYCEL TAB 100MG.....</i>	28
<i>sodium fluoride chew tab 0.5 mg f (from</i>		<i>SPRYCEL TAB 140MG.....</i>	28
<i>1.1 mg naf).....</i>	101	<i>SPRYCEL TAB 20MG</i>	28
<i>sodium fluoride chew tab 1 mg f (from</i>		<i>SPRYCEL TAB 50MG</i>	28
<i>2.2 mg naf).....</i>	101	<i>SPRYCEL TAB 70MG</i>	28
<i>sodium fluoride soln 0.5 mg/ml f (from</i>		<i>SPRYCEL TAB 80MG</i>	28
<i>1.1 mg/ml naf).....</i>	101	<i>sronyx tab.....</i>	76
<i>sodium fluoride tab 0.5 mg f (from 1.1</i>		<i>ssd cre 1%.....</i>	114
<i>mg naf).....</i>	101	<i>stavudine cap 15 mg</i>	14
<i>sodium fluoride tab 1 mg f (from 2.2 mg</i>		<i>stavudine cap 20 mg</i>	14
<i>na f)</i>	101	<i>stavudine cap 30 mg</i>	14
<i>sodium polystyrene sulfonate oral susp</i>		<i>stavudine cap 40 mg</i>	14
<i>15 gm/60ml.....</i>	74	<i>STELARA INJ 45MG/0.5.....</i>	95
<i>sodium polystyrene sulfonate rectal susp</i>		<i>STELARA INJ 90MG/ML.....</i>	95
<i>30 gm/120ml.....</i>	74	<i>STIVARGA TAB 40MG</i>	28
<i>solifenacin succinate tab 10 mg</i>	90	<i>streptomycin sulfate for inj 1 gm</i>	11
<i>solifenacin succinate tab 5 mg</i>	90	<i>STRIBILD TAB</i>	15
<i>SOLQUA INJ 100/33.....</i>	70	<i>STRIVERDI AER 2.5MCG.....</i>	108
<i>SOMATULINE INJ 120/.5ML</i>	82	<i>SUCRAID SOL 8500/ML.....</i>	87
<i>SOMATULINE INJ 60/0.2ML</i>	82	<i>sucrafate tab 1 gm</i>	87
<i>SOMATULINE INJ 90/0.3ML</i>	82	<i>sulfacetamide sodium lotion 10% (acne)</i>	
<i>SOMAVERT INJ 10MG</i>	82	<i>.....</i>	113
<i>SOMAVERT INJ 15MG</i>	82	<i>sulfacetamide sodium ophth oint 10%</i>	
<i>SOMAVERT INJ 20MG</i>	82	<i>.....</i>	104
<i>SOMAVERT INJ 25MG</i>	82	<i>sulfacetamide sodium ophth soln 10%</i>	
<i>SOMAVERT INJ 30MG</i>	82	<i>.....</i>	104
<i>sorine tab 120mg.....</i>	35	<i>sulfacetamide sodium-prednisolone</i>	
<i>sorine tab 160mg.....</i>	35	<i>ophth soln 10-0.23(0.25)%.....</i>	103
<i>sorine tab 240mg.....</i>	35	<i>SULFADIAZINE TAB 500MG</i>	11
<i>sorine tab 80mg.....</i>	35	<i>sulfamethoxazole-trimethoprim susp</i>	
<i>sotalol hcl (afib/afl) tab 120 mg.....</i>	35	<i>200-40 mg/5ml.....</i>	12
<i>sotalol hcl (afib/afl) tab 160 mg.....</i>	35	<i>sulfamethoxazole-trimethoprim tab 400-</i>	
<i>sotalol hcl (afib/afl) tab 80 mg</i>	35	<i>80 mg</i>	12
<i>sotalol hcl tab 120 mg.....</i>	36	<i>sulfamethoxazole-trimethoprim tab 800-</i>	
<i>sotalol hcl tab 160 mg.....</i>	36	<i>160 mg</i>	12
<i>sotalol hcl tab 240 mg.....</i>	36	<i>SULFAMYLON CRE 85MG/GM</i>	114
<i>sotalol hcl tab 80 mg.....</i>	35	<i>sulfasalazine tab 500 mg.....</i>	86
<i>SOVALDI TAB 400MG</i>	19	<i>sulfasalazine tab delayed release 500 mg</i>	
<i>spinosad susp 0.9%</i>	119	<i>.....</i>	86
<i>SPIRIVA AER 1.25MCG</i>	106	<i>sulindac tab 150 mg</i>	2
<i>SPIRIVA CAP HANDIHLR</i>	106	<i>sulindac tab 200 mg.....</i>	2
<i>SPIRIVA SPR 2.5MCG</i>	106	<i>sumatriptan nasal spray 20 mg/act</i>	64
<i>spironolactone & hydrochlorothiazide tab</i>		<i>sumatriptan nasal spray 5 mg/act</i>	64
<i>25-25 mg.....</i>	43	<i>sumatriptan succinate inj 6 mg/0.5ml.</i>	64
<i>spironolactone tab 100 mg</i>	43	<i>sumatriptan succinate solution auto-</i>	
<i>spironolactone tab 25 mg</i>	43	<i>injector 4 mg/0.5ml</i>	64

<i>sumatriptan succinate solution auto-injector 6 mg/0.5ml</i>	64	SYNTHROID TAB 50MCG.....	83
<i>sumatriptan succinate solution cartridge 4 mg/0.5ml</i>	64	SYNTHROID TAB 75MCG.....	83
<i>sumatriptan succinate solution cartridge 6 mg/0.5ml</i>	64	SYNTHROID TAB 88MCG.....	83
<i>sumatriptan succinate solution prefilled syringe 6 mg/0.5ml</i>	64	T	
<i>sumatriptan succinate tab 100 mg</i>	64	TABLOID TAB 40MG	23
<i>sumatriptan succinate tab 25 mg</i>	64	<i>tacrolimus cap 0.5 mg</i>	97
<i>sumatriptan succinate tab 50 mg</i>	64	<i>tacrolimus cap 1 mg</i>	97
SUPRAX CHW 100MG	18	<i>tacrolimus cap 5 mg</i>	97
SUPRAX CHW 200MG	18	<i>tacrolimus oint 0.03%</i>	118
SUPRAX SUS 500/5ML.....	18	<i>tacrolimus oint 0.1%</i>	118
SUPREP BOWEL SOL PREP KIT	87	<i>tadalafil tab 2.5 mg</i>	89
SUTENT CAP 12.5MG.....	28	<i>tadalafil tab 20 mg (pah)</i>	45
SUTENT CAP 25MG.....	28	<i>tadalafil tab 5 mg</i>	89
SUTENT CAP 37.5MG.....	28	TAFINLAR CAP 50MG	28
SUTENT CAP 50MG.....	28	TAFINLAR CAP 75MG	28
<i>syeda tab 3-0.03mg</i>	76	<i>take action tab 1.5mg</i>	76
<i>symax-sl sub 0.125mg</i>	84	TALTZ INJ 80MG/ML.....	95
SYMBICORT AER 160-4.5	111	<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	25
SYMBICORT AER 80-4.5	111	<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	25
SYMDEKO TAB 100-150.....	110	<i>tamsulosin hcl cap 0.4 mg</i>	89
SYMDEKO TAB 50-75MG.....	110	<i>targetd acne cre 2.5%</i>	113
SYMFI LO TAB	15	TARGRETIN GEL 1%	118
SYMFI TAB	15	TAYTULLA CAP 1MG/20MC.....	76
SYMLINPEN 60 INJ 1000MCG.....	69	<i>tazarotene cream 0.1%</i>	116
SYMLNPEN 120 INJ 1000MCG.....	69	<i>tazicef inj 1gm</i>	18
SYNAREL SOL 2MG/ML	77	<i>tazicef inj 2gm</i>	18
SYNERA DIS 70-70MG.....	118	<i>tazicef inj 6gm</i>	18
SYNJARDY TAB	72	TAZORAC CRE 0.05%.....	116
SYNJARDY TAB 12.5-500.....	72	TAZORAC GEL 0.05%.....	116
SYNJARDY TAB 5-1000MG	72	TAZORAC GEL 0.1%	116
SYNJARDY TAB 5-500MG.....	72	<i>taztia xt cap 120mg/24</i>	41
SYNJARDY XR TAB.....	72	<i>taztia xt cap 180mg/24</i>	41
SYNJARDY XR TAB 10-1000.....	72	<i>taztia xt cap 240mg/24</i>	41
SYNJARDY XR TAB 25-1000.....	72	<i>taztia xt cap 300mg er</i>	41
SYNJARDY XR TAB 5-1000MG.....	72	<i>taztia xt cap 360mg/24</i>	41
SYNTHROID TAB 100MCG.....	83	TDVAX INJ 2-2 LF.....	99
SYNTHROID TAB 112MCG.....	83	TECFIDERA CAP 120MG.....	66
SYNTHROID TAB 125MCG.....	83	TECFIDERA CAP 240MG.....	66
SYNTHROID TAB 137MCG.....	83	TECFIDERA MIS STARTER.....	66
SYNTHROID TAB 150MCG.....	83	<i>telmisartan tab 20 mg</i>	35
SYNTHROID TAB 175MCG.....	83	<i>telmisartan tab 40 mg</i>	35
SYNTHROID TAB 200MCG.....	83	<i>telmisartan tab 80 mg</i>	35
SYNTHROID TAB 25MCG.....	83	<i>telmisartan-amlodipine tab 40-10 mg</i> .	34
SYNTHROID TAB 300MCG.....	83	<i>telmisartan-amlodipine tab 40-5 mg...</i>	34
		<i>telmisartan-amlodipine tab 80-10 mg</i> .	34
		<i>telmisartan-amlodipine tab 80-5 mg...</i>	34

<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i>	34	THALOMID CAP 100MG.....	96
<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i>	34	THALOMID CAP 150MG.....	97
<i>telmisartan-hydrochlorothiazide tab 80-25 mg</i>	34	THALOMID CAP 200MG.....	97
<i>temazepam cap 15 mg</i>	63	THALOMID CAP 50MG.....	96
<i>temazepam cap 22.5 mg</i>	63	<i>theochron tab 100mg cr</i>	111
<i>temazepam cap 30 mg</i>	63	<i>theochron tab 200mg cr</i>	111
<i>temazepam cap 7.5 mg</i>	63	<i>theochron tab 300mg cr</i>	111
TEMODAR INJ 100MG.....	21	<i>theophylline soln 80 mg/15ml</i>	111
<i>temozolomide cap 100 mg</i>	22	<i>theophylline tab er 12hr 450 mg</i>	111
<i>temozolomide cap 140 mg</i>	22	<i>theophylline tab er 24hr 400 mg</i>	111
<i>temozolomide cap 180 mg</i>	22	<i>theophylline tab er 24hr 600 mg</i>	111
<i>temozolomide cap 20 mg</i>	22	THERACYS INJ.....	29
<i>temozolomide cap 250 mg</i>	22	<i>thioridazine hcl tab 10 mg</i>	60
<i>temozolomide cap 5 mg</i>	21	<i>thioridazine hcl tab 100 mg</i>	60
<i>tencon tab 50-325mg</i>	1	<i>thioridazine hcl tab 25 mg</i>	60
TENIPOSIDE INJ 50MG/5ML.....	30	<i>thioridazine hcl tab 50 mg</i>	60
TENIVAC INJ 5-2LF.....	99	<i>thiothixene cap 1 mg</i>	60
<i>tenofovir disoproxil fumarate tab 300 mg</i>	15	<i>thiothixene cap 10 mg</i>	60
<i>terazosin hcl cap 1 mg (base equivalent)</i>	32	<i>thiothixene cap 2 mg</i>	60
<i>terazosin hcl cap 10 mg (base equivalent)</i>	33	<i>thiothixene cap 5 mg</i>	60
<i>terazosin hcl cap 2 mg (base equivalent)</i>	32	THYROLAR-1 TAB 60MG.....	83
<i>terazosin hcl cap 5 mg (base equivalent)</i>	33	THYROLAR-1/2 TAB 30MG.....	83
<i>terbinafine cre 1%</i>	115	THYROLAR-1/4 TAB 15MG.....	83
<i>terbinafine hcl tab 250 mg</i>	13	THYROLAR-2 TAB 120MG.....	83
<i>terbutaline sulfate tab 2.5 mg</i>	108	THYROLAR-3 TAB 180MG.....	83
<i>terbutaline sulfate tab 5 mg</i>	108	<i>tiagabine hcl tab 12 mg</i>	49
<i>terconazole vaginal cream 0.4%</i>	90	<i>tiagabine hcl tab 16 mg</i>	49
<i>terconazole vaginal suppos 80 mg</i>	90	<i>tiagabine hcl tab 2 mg</i>	49
<i>testosterone cypionate im inj in oil 100 mg/ml</i>	69	<i>tiagabine hcl tab 4 mg</i>	49
<i>testosterone cypionate im inj in oil 200 mg/ml</i>	69	TICE BCG INJ.....	29
<i>testosterone enanthate im inj in oil 200 mg/ml</i>	69	<i>tilia fe tab</i>	76
<i>testosterone td gel 10mg/act (2%)</i>	69	<i>timolol maleate ophth gel forming soln 0.25%</i>	105
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	69	<i>timolol maleate ophth gel forming soln 0.5%</i>	105
<i>tetrabenazine tab 12.5 mg</i>	65	<i>timolol maleate ophth soln 0.25%</i>	105
<i>tetrabenazine tab 25 mg</i>	65	<i>timolol maleate ophth soln 0.5%</i>	105
<i>tetracycline hcl cap 250 mg</i>	21	<i>timolol maleate tab 10 mg</i>	39
<i>tetracycline hcl cap 500 mg</i>	21	<i>timolol maleate tab 20 mg</i>	39
		<i>timolol maleate tab 5 mg</i>	39
		TIMOPTIC OCU SOL 0.25% OP.....	105
		TIMOPTIC OCU SOL 0.5% OP.....	105
		<i>tinidazole tab 250 mg</i>	11
		<i>tinidazole tab 500 mg</i>	11
		<i>tis-u-sol sol</i>	106
		TIVICAY TAB 10MG.....	15
		TIVICAY TAB 25MG.....	15
		TIVICAY TAB 50MG.....	15

<i>tizanidine hcl tab 2 mg (base equivalent)</i>		<i>trandolapril tab 4 mg</i>	32
.....	67	<i>trandolapril-verapamil hcl tab er 1-240</i>	
<i>tizanidine hcl tab 4 mg (base equivalent)</i>		<i>mg</i>	31
.....	67	<i>trandolapril-verapamil hcl tab er 2-180</i>	
TOBRADEX OIN 0.3-0.1%.....	103	<i>mg</i>	31
TOBRADEX ST SUS 0.3-0.05	103	<i>trandolapril-verapamil hcl tab er 2-240</i>	
<i>tobramycin nebu soln 300 mg/5ml</i>	11	<i>mg</i>	31
<i>tobramycin ophth soln 0.3%</i>	104	<i>trandolapril-verapamil hcl tab er 4-240</i>	
<i>tobramycin-dexamethasone ophth susp</i>		<i>mg</i>	31
<i>0.3-0.1%</i>	103	<i>tranexamic acid iv soln 1000 mg/10ml</i>	
TODAY SPONGE MIS.....	89	<i>(100 mg/ml)</i>	92
<i>tolcapone tab 100 mg</i>	57	<i>tranexamic acid tab 650 mg</i>	92
<i>tolmetin sodium cap 400 mg</i>	2	TRANSDERM-SC DIS 1.5MG	85
<i>tolmetin sodium tab 200 mg</i>	2	<i>tranylcypromine sulfate tab 10 mg</i>	55
<i>tolmetin sodium tab 600 mg</i>	2	TRAVATAN Z DRO 0.004%	105
<i>tolnaftate aerosol pow 1%</i>	115	<i>trazodone hcl tab 100 mg</i>	55
<i>tolnaftate soln 1%</i>	115	<i>trazodone hcl tab 150 mg</i>	55
<i>tolterodine tartrate cap er 24hr 2 mg.</i>	90	<i>trazodone hcl tab 300 mg</i>	55
<i>tolterodine tartrate cap er 24hr 4 mg.</i>	90	<i>trazodone hcl tab 50 mg</i>	55
<i>tolterodine tartrate tab 1 mg</i>	90	TRECATOR TAB 250MG.....	16
<i>tolterodine tartrate tab 2 mg</i>	90	TRESIBA FLEX INJ 100UNIT.....	71
<i>topiramate sprinkle cap 15 mg</i>	49	TRESIBA FLEX INJ 200UNIT.....	71
<i>topiramate sprinkle cap 25 mg</i>	49	TRESIBA INJ 100UNIT	71
<i>topiramate tab 100 mg</i>	49	<i>tretinoin cap 10 mg</i>	29
<i>topiramate tab 200 mg</i>	49	<i>tretinoin cream 0.025%</i>	113
<i>topiramate tab 25 mg</i>	49	<i>tretinoin cream 0.05%</i>	113
<i>topiramate tab 50 mg</i>	49	<i>tretinoin cream 0.1%</i>	113
<i>toposar inj 100/5ml</i>	30	<i>tretinoin gel 0.01%</i>	113
<i>toposar inj 20mg/ml</i>	30	<i>tretinoin gel 0.025%</i>	113
<i>topotecan hcl for inj 4 mg (base equiv)</i>	30	<i>tretinoin gel 0.05%</i>	113
<i>toremifene citrate tab 60 mg (base</i>		<i>triamcinolone acetonide aerosol soln</i>	
<i>equivalent)</i>	25	<i>0.147 mg/gm</i>	118
<i>torsemide tab 10 mg</i>	43	<i>triamcinolone acetonide cream 0.025%</i>	
<i>torsemide tab 100 mg</i>	43	.....	118
<i>torsemide tab 20 mg</i>	43	<i>triamcinolone acetonide cream 0.1%</i>	118
<i>torsemide tab 5 mg</i>	43	<i>triamcinolone acetonide cream 0.5%</i>	118
TOVIAZ TAB 4MG	90	<i>triamcinolone acetonide dental paste</i>	
TOVIAZ TAB 8MG	90	<i>0.1%</i>	119
TRACLEER TAB 125MG	45	<i>triamcinolone acetonide lotion 0.025%</i>	
TRACLEER TAB 32MG	45	.....	118
TRACLEER TAB 62.5MG	45	<i>triamcinolone acetonide lotion 0.1%</i>	118
TRADJENTA TAB 5MG	70	<i>triamcinolone acetonide nasal aerosol</i>	
<i>tramadol hcl tab 50 mg</i>	10	<i>suspension 55 mcg/act</i>	110
<i>tramadol hcl tab er 24hr 100 mg</i>	10	<i>triamcinolone acetonide oint 0.025%</i>	118
<i>tramadol hcl tab er 24hr 200 mg</i>	10	<i>triamcinolone acetonide oint 0.1%</i>	118
<i>tramadol hcl tab er 24hr 300 mg</i>	10	<i>triamcinolone acetonide oint 0.5%</i>	118
<i>trandolapril tab 1 mg</i>	32	<i>triamterene & hydrochlorothiazide cap</i>	
<i>trandolapril tab 2 mg</i>	32	<i>37.5-25 mg</i>	43

<i>triamterene & hydrochlorothiazide cap</i> 50-25 mg.....	43	TRUVADA TAB 133-200	15
<i>triamterene & hydrochlorothiazide tab</i> 37.5-25 mg.....	43	TRUVADA TAB 167-250	15
<i>triamterene & hydrochlorothiazide tab</i> 75-50 mg.....	43	TRUVADA TAB 200-300	16
<i>triderm cre 0.1%</i>	118	<i>tussigon tab 5-1.5mg</i>	109
<i>trientine hcl cap 250 mg</i>	74	TUZISTRA XR SUS.....	109
<i>trifluoperazine hcl tab 1 mg (base</i> <i>equivalent)</i>	60	TWINRIX INJ	99
<i>trifluoperazine hcl tab 10 mg (base</i> <i>equivalent)</i>	60	TYBOST TAB 150MG	15
<i>trifluoperazine hcl tab 2 mg (base</i> <i>equivalent)</i>	60	TYKERB TAB 250MG	28
<i>trifluoperazine hcl tab 5 mg (base</i> <i>equivalent)</i>	60	TYMLOS INJ	82
<i>trifluridine ophth soln 1%</i>	104	TYSABRI INJ 300/15ML	66
<i>trihexyphenidyl hcl elixir 0.4 mg/ml</i>	57	TYVASO START SOL 0.6MG/ML.....	45
<i>trihexyphenidyl hcl tab 2 mg</i>	57	U	
<i>trihexyphenidyl hcl tab 5 mg</i>	57	ULESFIA LOT 5%.....	119
<i>tri-lynh tab</i>	76	ULORIC TAB 40MG	1
<i>trimethobenzamide hcl cap 300 mg</i>	85	ULORIC TAB 80MG	1
<i>trimethoprim tab 100 mg</i>	12	<i>unithroid tab 100mcg</i>	84
<i>trimipramine maleate cap 100 mg</i>	55	<i>unithroid tab 112mcg</i>	84
<i>trimipramine maleate cap 25 mg</i>	55	<i>unithroid tab 125mcg</i>	84
<i>trimipramine maleate cap 50 mg</i>	55	<i>unithroid tab 200mcg</i>	84
<i>trinessa tab</i>	76	<i>unithroid tab 25mcg</i>	84
TRINTELLIX TAB 10MG	55	<i>unithroid tab 300mcg</i>	84
TRINTELLIX TAB 20MG	55	<i>unithroid tab 50mcg</i>	84
TRINTELLIX TAB 5MG	55	<i>unithroid tab 75mcg</i>	84
<i>triple antib oin</i>	114	<i>unithroid tab 88mcg</i>	84
<i>triple paste oin af 2%</i>	115	UPTRAVI TAB 1000MCG.....	45
TRISENOX INJ 12MG/6ML.....	29	UPTRAVI TAB 1200MCG.....	45
<i>tri-sprintec tab</i>	76	UPTRAVI TAB 1400MCG.....	45
TRIUMEQ TAB	15	UPTRAVI TAB 1600MCG.....	46
<i>tri-vit/fe dro /fl 0.25</i>	103	UPTRAVI TAB 200/800	45
<i>tri-vit/fl dro 0.25mg</i>	103	UPTRAVI TAB 200MCG.....	45
<i>tri-vit/fl dro 0.5mg</i>	103	UPTRAVI TAB 400MCG.....	45
<i>trivora-28 tab</i>	76	UPTRAVI TAB 600MCG.....	45
TROGARZO INJ 150MG/ML	15	UPTRAVI TAB 800MCG.....	45
<i>tropicamide ophth soln 0.5%</i>	106	URINE GLUCOSE MONITORING SUPPLIES	
<i>tropicamide ophth soln 1%</i>	106	.....	100
<i>trospium chloride cap er 24hr 60 mg</i> ..	90	URINE TEST STRIPS	100
<i>trospium chloride tab 20 mg</i>	90	<i>ursodiol cap 300 mg</i>	87
TRULICITY INJ 0.75/0.5	70	<i>ursodiol tab 250 mg</i>	87
TRULICITY INJ 1.5/0.5	70	<i>ursodiol tab 500 mg</i>	88
TRUMENBA INJ	99	UVADEX INJ 20MCG/ML.....	29
TRUVADA TAB 100-150	15	V	
		<i>valacyclovir hcl tab 1 gm</i>	17
		<i>valacyclovir hcl tab 500 mg</i>	17
		<i>valganciclovir hcl for soln 50 mg/ml</i> <i>(base equiv)</i>	17
		<i>valganciclovir hcl tab 450 mg (base</i> <i>equivalent)</i>	17
		<i>valproate sodium oral soln 250 mg/5ml</i>	

<i>(base equiv)</i>	49	<i>equivalent)</i>	55
<i>valproic acid cap 250 mg</i>	49	<i>venlafaxine hcl tab 50 mg (base</i>	
<i>valsartan tab 160 mg</i>	35	<i>equivalent)</i>	55
<i>valsartan tab 320 mg</i>	35	<i>venlafaxine hcl tab 75 mg (base</i>	
<i>valsartan tab 40 mg</i>	35	<i>equivalent)</i>	55
<i>valsartan tab 80 mg</i>	35	<i>venlafaxine hcl tab er 24hr 150 mg (base</i>	
<i>valsartan-hydrochlorothiazide tab 160-</i>		<i>equivalent)</i>	56
<i>12.5 mg</i>	34	<i>venlafaxine hcl tab er 24hr 37.5 mg</i>	
<i>valsartan-hydrochlorothiazide tab 160-25</i>		<i>(base equivalent)</i>	55
<i>mg</i>	34	<i>venlafaxine hcl tab er 24hr 75 mg (base</i>	
<i>valsartan-hydrochlorothiazide tab 320-</i>		<i>equivalent)</i>	55
<i>12.5 mg</i>	34	VENTAVIS SOL 10MCG/ML.....	46
<i>valsartan-hydrochlorothiazide tab 320-25</i>		VENTAVIS SOL 20MCG/ML.....	46
<i>mg</i>	34	<i>verapamil hcl cap er 24hr 100 mg</i>	41
<i>valsartan-hydrochlorothiazide tab 80-</i>		<i>verapamil hcl cap er 24hr 120 mg</i>	41
<i>12.5 mg</i>	34	<i>verapamil hcl cap er 24hr 180 mg</i>	41
<i>vancomycin hcl cap 125 mg (base</i>		<i>verapamil hcl cap er 24hr 200 mg</i>	41
<i>equivalent)</i>	12	<i>verapamil hcl cap er 24hr 240 mg</i>	41
<i>vancomycin hcl cap 250 mg (base</i>		<i>verapamil hcl cap er 24hr 300 mg</i>	41
<i>equivalent)</i>	12	<i>verapamil hcl cap er 24hr 360 mg</i>	42
<i>vandazole gel 0.75%</i>	90	<i>verapamil hcl tab 120 mg</i>	42
VAQTA INJ 25/0.5ML.....	99	<i>verapamil hcl tab 40 mg</i>	42
VAQTA INJ 50UNT/ML.....	99	<i>verapamil hcl tab 80 mg</i>	42
VARIVAX INJ.....	99	<i>verapamil hcl tab er 120 mg</i>	42
VARUBI INJ.....	86	<i>verapamil hcl tab er 180 mg</i>	42
VARUBI TAB 90MG.....	86	<i>verapamil hcl tab er 240 mg</i>	42
VASCEPA CAP 0.5GM.....	37	VEREGEN OIN 15%.....	118
VASCEPA CAP 1GM.....	38	<i>vestura tab 3-0.02mg</i>	76
VCF VAGINAL AER CONTRACP.....	89	VICTOZA INJ 18MG/3ML.....	70
VCF VAGINAL MIS CONTRACP.....	89	VIDEX EC CAP 125MG.....	15
<i>velivet pak</i>	76	VIDEX SOL 2GM.....	15
VELPHORO CHW 500MG.....	82	VIDEX SOL 4GM.....	15
VEMLIDY TAB 25MG.....	17	<i>vigabatrin powd pack 500 mg</i>	49
VENCLEXTA TAB 100MG.....	30	<i>vigabatrin tab 500 mg</i>	49
VENCLEXTA TAB 10MG.....	30	VIIBRYD KIT STARTER.....	56
VENCLEXTA TAB 50MG.....	30	VIIBRYD TAB 10MG.....	56
VENCLEXTA TAB START PK.....	30	VIIBRYD TAB 20MG.....	56
<i>venlafaxine hcl cap er 24hr 150 mg</i>		VIIBRYD TAB 40MG.....	56
<i>(base equivalent)</i>	55	VIMPAT SOL 10MG/ML.....	49
<i>venlafaxine hcl cap er 24hr 37.5 mg</i>		VIMPAT TAB 100MG.....	50
<i>(base equivalent)</i>	55	VIMPAT TAB 150MG.....	50
<i>venlafaxine hcl cap er 24hr 75 mg (base</i>		VIMPAT TAB 200MG.....	50
<i>equivalent)</i>	55	VIMPAT TAB 50MG.....	50
<i>venlafaxine hcl tab 100 mg (base</i>		<i>vinblastine sulfate inj 1 mg/ml</i>	24
<i>equivalent)</i>	55	<i>vincasar pfs inj 1mg/ml</i>	24
<i>venlafaxine hcl tab 25 mg (base</i>		<i>vincristine sulfate iv soln 1 mg/ml</i>	24
<i>equivalent)</i>	55	<i>vinorelbine tartrate inj 10 mg/ml (base</i>	
<i>venlafaxine hcl tab 37.5 mg (base</i>		<i>equiv)</i>	24

<i>vinorelbine tartrate inj 50 mg/5ml (10 mg/ml) (base equiv)</i>	24
VIOKACE TAB 10440	88
VIOKACE TAB 20880	88
<i>viorele tab</i>	77
VIRACEPT TAB 250MG.....	15
VIRACEPT TAB 625MG.....	15
VIREAD POW 40MG/GM.....	15
VIREAD TAB 150MG	15
VIREAD TAB 200MG	15
VIREAD TAB 250MG	15
<i>virt-vite tab forte</i>	103
VISTOGARD PAK 10GM.....	29
<i>vit a/c/d/fl dro 0.25mg</i>	103
VITRAKVI CAP 100MG	28
VITRAKVI CAP 25MG	28
VITRAKVI SOL 20MG/ML	28
<i>voriconazole for susp 40 mg/ml</i>	13
<i>voriconazole tab 200 mg</i>	13
<i>voriconazole tab 50 mg</i>	13
VOSEVI TAB	19
VOTRIENT TAB 200MG	28
VYVANSE CAP 10MG.....	62
VYVANSE CAP 20MG.....	62
VYVANSE CAP 30MG.....	62
VYVANSE CAP 40MG.....	62
VYVANSE CAP 50MG.....	62
VYVANSE CAP 60MG.....	62
VYVANSE CAP 70MG.....	62
VYVANSE CHW 10MG	62
VYVANSE CHW 20MG	62
VYVANSE CHW 30MG	62
VYVANSE CHW 40MG	63
VYVANSE CHW 50MG	63
VYVANSE CHW 60MG	63
W	
<i>warfarin sodium tab 1 mg</i>	91
<i>warfarin sodium tab 10 mg</i>	92
<i>warfarin sodium tab 2 mg</i>	91
<i>warfarin sodium tab 2.5 mg</i>	91
<i>warfarin sodium tab 3 mg</i>	92
<i>warfarin sodium tab 4 mg</i>	92
<i>warfarin sodium tab 5 mg</i>	92
<i>warfarin sodium tab 6 mg</i>	92
<i>warfarin sodium tab 7.5 mg</i>	92
<i>wera tab 0.5/35</i>	77
WIDE-SEAL DPR KIT 60.....	99
WIDE-SEAL DPR KIT 65.....	99

WIDE-SEAL DPR KIT 70.....	99
WIDE-SEAL DPR KIT 75.....	99
WIDE-SEAL DPR KIT 80.....	99
WIDE-SEAL DPR KIT 85.....	99
WIDE-SEAL DPR KIT 90.....	99
WIDE-SEAL DPR KIT 95.....	99
X	
XALKORI CAP 200MG	28
XALKORI CAP 250MG	28
XARELTO STAR TAB 15/20MG.....	92
XARELTO TAB 10MG	92
XARELTO TAB 15MG	92
XARELTO TAB 2.5MG.....	92
XARELTO TAB 20MG	92
XELJANZ TAB 5MG	95
XELJANZ XR TAB 11MG	95
XIFAXAN TAB 200MG.....	12
XIFAXAN TAB 550MG.....	12
XIGDUO XR TAB 10-1000.....	72
XIGDUO XR TAB 10-500MG.....	72
XIGDUO XR TAB 2.5-1000	72
XIGDUO XR TAB 5-1000MG.....	72
XIGDUO XR TAB 5-500MG	72
XOLAIR INJ 150MG/ML.....	109
XOLAIR INJ 75/0.5	109
XOLAIR SOL 150MG	109
XTANDI CAP 40MG	25
<i>xulane dis 150-35</i>	77
XULTOPHY INJ 100/3.6.....	70
<i>xylon tab 10-200mg</i>	10
XYREM SOL 500MG/ML.....	68
Y	
<i>yuvaferm tab 10mcg</i>	80
Z	
<i>zafirlukast tab 10 mg</i>	109
<i>zafirlukast tab 20 mg</i>	109
<i>zaleplon cap 10 mg</i>	63
<i>zaleplon cap 5 mg</i>	63
<i>zarah tab 3-0.03mg</i>	77
ZARXIO INJ 300/0.5.....	92
ZARXIO INJ 480/0.8.....	92
<i>zazole cre 0.8%</i>	90
<i>zazole sup 80mg</i>	90
ZEJULA CAP 100MG.....	24
ZELBORAF TAB 240MG.....	28
<i>zenatane cap 30mg</i>	113
<i>zenchent fe chw 0.4mg-35</i>	77
<i>zenchent tab</i>	77

ZENPEP CAP 10000UNT.....	88	<i>mg</i>	64
ZENPEP CAP 15000UNT.....	88	<i>zolmitriptan tab 2.5 mg</i>	64
ZENPEP CAP 20000UNT.....	88	<i>zolmitriptan tab 5 mg</i>	64
ZENPEP CAP 25000.....	88	<i>zolpidem tartrate tab 10 mg</i>	63
ZENPEP CAP 3000UNIT.....	88	<i>zolpidem tartrate tab 5 mg</i>	63
ZENPEP CAP 40000.....	88	<i>zolpidem tartrate tab er 12.5 mg</i>	63
ZENPEP CAP 5000UNIT.....	88	<i>zolpidem tartrate tab er 6.25 mg</i>	63
<i>zenzedi tab 15mg</i>	63	ZOMIG SPR 2.5MG.....	64
<i>zenzedi tab 2.5mg</i>	63	ZOMIG SPR 5MG.....	64
<i>zenzedi tab 20mg</i>	63	<i>zonisamide cap 100 mg</i>	50
<i>zenzedi tab 30mg</i>	63	<i>zonisamide cap 25 mg</i>	50
<i>zenzedi tab 7.5mg</i>	63	<i>zonisamide cap 50 mg</i>	50
ZEPATIER TAB 50-100MG.....	19	ZONTIVITY TAB 2.08MG.....	93
ZERIT SOL 1MG/ML.....	15	ZORTRESS TAB 0.25MG.....	97
<i>zidovudine cap 100 mg</i>	15	ZORTRESS TAB 0.5MG.....	97
<i>zidovudine syrup 10 mg/ml</i>	15	ZORTRESS TAB 0.75MG.....	97
<i>zidovudine tab 300 mg</i>	15	ZORTRESS TAB 1MG.....	97
<i>zileuton tab er 12hr 600 mg</i>	109	ZOSTAVAX INJ.....	99
ZIOPTAN DRO 0.0015%.....	105	<i>zovia 1/35e tab</i>	77
<i>ziprasidone hcl cap 20 mg</i>	60	ZUBSOLV SUB 0.7-0.18.....	3
<i>ziprasidone hcl cap 40 mg</i>	60	ZUBSOLV SUB 1.4-0.36.....	3
<i>ziprasidone hcl cap 60 mg</i>	60	ZUBSOLV SUB 11.4-2.9.....	3
<i>ziprasidone hcl cap 80 mg</i>	60	ZUBSOLV SUB 2.9-0.71.....	3
ZIRGAN GEL 0.15%.....	104	ZUBSOLV SUB 5.7-1.4.....	3
<i>zoledronic acid inj conc for iv infusion 4</i> <i>mg/5ml</i>	73	ZUBSOLV SUB 8.6-2.1.....	3
<i>zoledronic acid iv soln 5 mg/100ml</i>	73	ZYDELIG TAB 100MG.....	28
ZOLINZA CAP 100MG.....	25	ZYDELIG TAB 150MG.....	28
<i>zolmitriptan orally disintegrating tab 2.5</i> <i>mg</i>	64	ZYKADIA CAP 150MG.....	28
<i>zolmitriptan orally disintegrating tab 5</i> <i>mg</i>	64	ZYKADIA TAB 150MG.....	29
		ZYTIGA TAB 500MG.....	25

NOTICE OF NON-DISCRIMINATION

WellCare of New York complies with Federal civil rights laws. WellCare of New York does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

ATTENTION: Language assistance services, free of charge, are available to you. Call 1-855-582-6172. (TTY: 711).

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-855-582-6172. (TTY: 711).

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-855-582-6172。(TTY: 711)。



1-855-582-6172 (TTY 711)



www.wellcare.com/New-York