

Comprehensive

DRUG FORMULARY LIST

Delaware First Health

Delaware First Health: Drug Formulary List



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

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

Delaware First Health Plan Pharmacy Program

Delaware First Health Plan, Inc. (Delaware First Health) is committed to providing appropriate, high quality, and cost-effective drug therapy to all Delaware First Health members. Delaware First Health works with providers and pharmacists to ensure that medications used to treat a variety of conditions and diseases are covered according to Centers for Medicare and Medicaid Services (CMS) designation of an outpatient covered drug. Delaware First Health covers prescription medications and certain over the counter (OTC) medications when ordered by a physician/clinician. Some medications require prior authorization (PA) or have limitations on age, dosage, and maximum quantities.

This section provides an overview of the Delaware First Health pharmacy program. For more detailed information, please visit our website at [Delawarefirsthealth.com](https://www.delawarefirsthealth.com) or call Pharmacy Services to talk to someone about the list of drugs Delaware First Health covers. The Pharmacy Services phone number is 1-833-236-1887 (TTY 711).

Preferred Drug List (PDL)

Delaware First Health uses the Preferred Drug List (PDL) as developed by the Delaware Medicaid Program. The comprehensive drug formulary list contains additional drugs that are not listed on the Delaware Medicaid Program PDL. For more detailed information, please visit their website at <https://medicaid.dhss.delaware.gov/provider/Home/PharmacyCornerLanding/tabid/2096/Default.aspx>

Prior Authorization (PA) Process

Delaware First Health works with Centene Pharmacy Services to process all pharmacy claims for prescribed drugs. Some drugs on the Delaware First Health Drug List (DL) require a PA as well as any brand name drugs not listed on the PDL. Centene Pharmacy Services is responsible for administering this process.

Delaware First Health will cover the medication if it is determined that:

1. There is a medical reason you need the specific medication.
2. Depending on the medication, other medications on the PDL have not worked or cannot be tried

Follow these guidelines for efficient processing of your authorization requests:

1. Complete the Delaware First Health Prior Authorization Request Form for Prescription Drugs which can be found at Delawarefirsthealth.com
2. Fax to Centene Pharmacy Services at 1-844-233-6130.
3. Prior Authorization decisions will be completed within 24 hours of receipt.
4. Once approved, Centene Pharmacy Services notifies the prescriber
5. If the clinical information provided does not explain the medical necessity for the requested PA medication, the request will be denied, and the prescriber and the member will be notified.
6. A pharmacy can provide up to a 72-hour supply of a medication by calling Pharmacy Services at 1-833-236-1887

Transition Period

Delaware First Health members new to the plan will be able to receive their prescription drugs with no new prior authorization (PA) requirements for first 60 days for regular non-Behavioral Health Medications and 90 days for Behavioral Health Medications. Specialty medications and non-formulary diabetic meters are exceptions to the transition period allowance and will require coverage determination. This transition period will allow you and your doctor time to consider other medications that do not require PA and to learn the steps to getting a PA. Delaware First Health's PDL and PA List identify the drugs that will require a PA. If you are not sure when you will need to have your medications prior authorized or have other questions about continuing to get your medications, Pharmacy Services at 1-833-236-1887 (TTY 711).

72-Hour Supply Policy

State and federal law require that a pharmacy dispense a 72-hour (3-day) supply of medication to any patient awaiting a PA determination. The purpose is to avoid interruption of current therapy or delay in the initiation of therapy. All participating pharmacies are authorized to provide a 72-hour supply of medication and will be reimbursed for the ingredient cost and dispensing fee of the 72-hour supply of medication, whether the PA request is ultimately approved or denied. The pharmacy must call the Pharmacy Services at 1-833-236-1887 (TTY 711) for a prescription override to submit the 72-hour medication supply for payment.

Dispensing Limits, Quantity Limits, and Age Limits

You may receive up to a maximum 34-day supply for each new or refill prescription. A total of 90 percent (90%) of the days supplied must have elapsed before the prescription for a medication can be refilled. For example, with a 34 day supply you must have taken 31 days of the medication before you can get the next refill. Prescriptions that exceed the quantity limit (QL) allowed or age limits (AL) require PA. Delaware First Health may limit how much of a medication you can get at one time. If the physician/clinician feels you have a medical reason for getting a larger amount, he or she can ask for PA. If Delaware First Health does not grant PA, we will notify you and your physician/clinician and provide information regarding the appeal process. Some medications on

the Delaware First Health Drug List may have Age Limits. These are set for certain drugs based on Food and Drug Administration (FDA) approved labeling and for safety concerns and quality standards of care. The Age Limit aligns with current FDA alerts for the appropriate use of pharmaceuticals.

Medical Necessity Requests

If you require a medication that does not appear on the Preferred Drug List (PDL), you or your physician/clinician can make a medical necessity request for the medication. It is anticipated that such exceptions will be rare and that Drug List medications will be appropriate to treat the vast majority of medical conditions. Delaware First Health requires:

Documentation of failure of at least two PDL agents within the same therapeutic class (provided two agents exist in the therapeutic category with comparable labeled indications) for the same diagnosis (e.g., migraine, neuropathic pain, etc.); or

Documented intolerance or contraindication to at least two PDL agents within the same therapeutic class (provided two agents exist in the therapeutic category with comparable labeled indications); or

Documented clinical history or presentation where the patient is not a candidate for any of the PDL agents for the indication.

Appropriate Use and Safety Edits

Your health and safety are a priority for Delaware First Health. One of the ways we address your safety is through Point-of-Sale (POS) edits at the time a prescription is processed at the pharmacy. These edits are based on FDA recommendations and promote safe and effective medication utilization.

Medicare Eligible Members

Members that are also eligible for Medicare must bill the pharmacy claim to Medicare first. Delaware First Health will not cover medications covered by Medicare. If the drug is part of the Medicare benefit but Medicare denies coverage, Delaware First Health will not cover the drug. Delaware First Health will cover medications not covered by Medicare if they are covered by Medicaid.

DUR (Drug Utilization Review) Programs

Delaware First Health will monitor ongoing prescribing of medications for clinical appropriateness. Delaware First Health reviews prescribing retrospectively to review for both safety and efficacy. Delaware First Health will work with Centene Pharmacy Services to review for such things as disease management, fraud and abuse, and prescriber profiling. Prescriber or member outreach may occur based on prescribing/dispensing patterns.

Delaware First Health will continue to monitor for issues going forward and take action as needed.

Mandatory Generic Substitution

When generic drugs are available, the brand name drug will not be covered without Delaware First Health PA. Generic drugs have the same active ingredient and work the same as brand name drugs. If you or your physician/clinician feels a brand name drug is medically necessary, the physician/clinician can ask for PA.

We will cover the brand name drug according to our clinical guidelines if there is a medical reason you need the particular brand name drug. If Delaware First Health does not grant PA we will notify you and your physician/clinician and provide information regarding the appeal process. Certain brand name drugs that have generics available are preferred (covered) on the Medicaid PDL and will be covered by Delaware First Health as determined by Delaware Medicaid.

Over-The-Counter Medications

The pharmacy program covers a selection of OTC medications. All covered OTC medications appear in the Drug List. All OTC medications must be written on a valid prescription by a licensed physician/clinician in order to be reimbursed.

Drug Efficacy Study and Implementation Drugs

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

Filling a Prescription

You can have prescriptions filled at a Delaware First Health network pharmacy. If you decide to have a prescription filled at a network pharmacy, you can locate a pharmacy near you by contacting Pharmacy Services at 1-833-236-1887 (TTY 711).

Specialty Medication

AcariaHealth is one of the providers of specialty medications for Delaware First Health. Most specialty drugs require a PA to be approved for payment.

Providers can request that AcariaHealth deliver the specialty drug to the office/member. If you want AcariaHealth to deliver the specialty drug to the office/member, contact them at 1-800-511-5144 (TTY 711).

Unapproved Use of Preferred Medication

Medication coverage under this program is limited to non-experimental indications as approved by the FDA. Other indications may also be covered if they are accepted as safe and effective using current medical and pharmaceutical reference texts and evidence-based medicine. Reimbursement decisions for specific non-approved indications will be made by Delaware First Health. Experimental drugs and investigational drugs are not eligible for coverage.

Benefit Exclusions

The following drug categories are not part of the Delaware First Health benefit and are not covered by the 72-hour supply policy:

- Fertility enhancing drugs
- Anorexia, weight loss, or weight gain drugs
- Drug Efficacy Study Implementation (DESI) and Identical, Related and Similar (IRS) – drugs that are classified as ineffective- Drugs and other agents used for cosmetic purposes or for hair growth
- Erectile dysfunction drugs prescribed to treat impotence
- Bulk powders, because there is a lack of substantial evidence of effectiveness for all labeling indications and because a compelling justification for their medical need has not been established.
- Drugs and devices classified as experimental by the FDA
- Drugs and devices not approved by the FDA

Newly Approved Products

We review new drugs for safety and effectiveness before adding them to the Delaware First Health Drug List. During this period, access to these medications will be considered through the PA review process. If Delaware First Health does not grant PA, we will notify you and your physician/clinician and provide information regarding the appeal process.

DME/Home Health Benefits

The following medical services are a part of the Delaware First Health medical benefit and are not available at the retail pharmacy:

1. Enteral products
2. Nebulizers
3. Medical Supplies – this does not include diabetic supplies as those are available at the retail pharmacy.

Contacts for Pharmacy Appeals/Grievances

Members: In the event a member disagrees with the decision regarding coverage of a medication, the member may file an appeal with Delaware First Health by calling Pharmacy Services at 1-833-236-1887 (TTY 711).

Physicians / Clinicians: In the event a clinician disagrees with the decision regarding coverage of a medication, the clinician may request an appeal by submitting additional information to Delaware First Health in writing to the Appeals Department at the following address:

Delaware First Health
Appeals Department
PO Box 31398
Tampa, FL 33631-3398
Appeals Fax: 1-888-865-6531

A decision will be rendered, and the clinician will be notified with a mailed response. An expedited appeal may be requested at any time the provider believes the adverse determination might seriously jeopardize the life or health of a member by calling Pharmacy Services at 1-833-236-1887(TTY 711). A response will be rendered the same day as receipt of complete information. In circumstances that require research, a same day response may not be possible.

Member Copay Responsibility

Price of Medication \$10.00 or less = \$0.50 copay

Price of Medication \$10.01 to \$25.00 = \$1.00 copay

Price of Medication \$25.01 to \$50.00 = \$2.00 copay

Price of Medication \$50.01 or more = \$3.00 copay

The most a member will pay for prescription copays, in a calendar month, is \$15. Once the member reaches the \$15 of accumulated prescription copays in a calendar month, copays are waived for the remainder of the calendar month in which the member reaches the \$15 maximum. The copays and the \$15 copay maximum will start over on the next calendar month.

Members and Services exempt for copays:

1. Children under the age of 21
2. Pregnant women, including the post-partum period (12 months)
3. Chronic Renal Disease Program (CRDP) members
4. Individuals eligible under the long-term care nursing facility group or the acute care hospital group
5. Family planning services and supplies
6. Hospice services
7. Naloxone opioid overdose rescue medications
8. Medication-Assisted Treatment (MAT) used for Opioid Use Disorder
9. Tobacco cessation products

Contact Information

Delaware First Health Member Services:	1-877-236-1341 (TTY 711)
Pharmacy Prior Authorizations Telephone:	1-833-236-1887 (TTY 711)
Pharmacy Prior Authorizations Fax:	1-844-233-6130
Pharmacy Services (Member and Provider):	1-833-236-1887 (TTY 711)
AcariaHealth Shipping Questions:	1-800-511-5144 (TTY 711)

Drug List ABBREVIATIONS

PREFERRED DRUG LIST TIER ABBREVIATIONS			
Tier	Tier Definitions		
P	Preferred Drug		
NP	Non-Preferred Drug		
REQUIREMENT or LIMITS			
Requirement/Limits	Requirement/Limit Description		
AL	Age Limit: Drug is limited to a specific age		
PA	Prior Authorization: Review required before prescription can be filled		
QL	Quantity Limit: There is a limit on the amount covered per prescription or within a set time frame.		
Rx/OTC	Product has both prescription and over the counter coverage		
SP	Specialty Drug: High-cost drugs used to treat complex conditions, such as multiple sclerosis, rheumatoid arthritis, hepatitis C, and hemophilia and may be limited to a specific pharmacy.		
ST	Step Therapy: Requires trial and failure of one or more preferred products prior to coverage.		
STANDARD ABBREVIATIONS			
Dose Form	Dose Form Description	Dose Form	Dose Form Description
<i>AEPB</i>	Aerosol Powder Breath Activated	<i>EX</i>	External
<i>AERB</i>	Aerosol, breath activated	<i>GRAN</i>	Granules
<i>AERO</i>	Aerosol	<i>IJ</i>	Injection
<i>AJKT</i>	Auto-injector Kit	<i>IMPL</i>	Implant
<i>AUIJ</i>	Auto-injector	<i>INHA</i>	Inhaler
<i>CAPS</i>	Capsule	<i>INJ</i>	Injectable
<i>CHEW</i>	Tablet Chewable	<i>IUD</i>	Intrauterine Device
<i>CONC</i>	Concentrate	<i>IV</i>	Intravenous
<i>CP12</i>	Capsule ER 12 HR	<i>LIQD</i>	Liquid
<i>CP24</i>	Capsule ER 24 HR	<i>LOTN</i>	Lotion
<i>CPCR</i>	Capsule ER	<i>LOZG</i>	Lozenge
<i>CPDR</i>	Capsule Delayed Release	<i>LPOP</i>	Lollipop
<i>CPEP</i>	Capsule Enteric Coated Particles	<i>MISC</i>	Miscellaneous
<i>CPSP</i>	Capsule Sprinkle	<i>NA</i>	Nasal
<i>CREA</i>	Cream	<i>NEBU</i>	Nebulization solution
<i>CSDR</i>	Capsule Delayed Release Sprinkle	<i>OINT</i>	Ointment
<i>DEVI</i>	Device	<i>OP</i>	Ophthalmic
<i>ELIX</i>	Elixir	<i>OPHT</i>	Ophthalmic
<i>EMUL</i>	Emulsion	<i>OR</i>	Oral
<i>ENEM</i>	Enema	<i>PACK</i>	Packet

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

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders					
Amphetamines					
ADDERALL XR CP24 (amphetamine-dextroamphetamine)	NP	AL(Up to 21 yrs old)	amphetamine-dextroamphetamine TABS	P	QL(60 ea per 30 day(s) retail); AL(Up to 21 yrs old)
ADDERALL TABS (amphetamine-dextroamphetamine)	NP	QL(60 ea per 30 day(s) retail); AL(Up to 21 yrs old)	DEXEDRINE CP24 10 MG, 15 MG (dextroamphetamine sulfate)	NP	AL(Up to 21 yrs old)
ADZENYS XR-ODT TBED	NP	AL(Up to 21 yrs old)	dextroamphetamine sulfate CP24	P	AL(Up to 21 yrs old)
amphetamine sulfate TABS 10 MG	NP	QL(180 ea per 30 day(s) retail); AL(Up to 21 yrs old)	dextroamphetamine sulfate SOLN	P	QL(15 ml daily); AL(Up to 21 yrs old)
amphetamine sulfate TABS 5 MG	NP	QL(60 ea per 30 day(s) retail); AL(Up to 21 yrs old)	dextroamphetamine sulfate SOLN	NP	QL(15 ml daily); AL(Up to 21 yrs old)
amphetamine-dextroamphetamine CP24 1.25 MG-1.25 MG-1.25 MG-1.25 MG, 12.5 MG-12.5 MG-12.5 MG-12.5 MG, 2.5 MG-2.5 MG-2.5 MG-2.5 MG, 3.125 MG-3.125 MG-3.125 MG, 3.75 MG-3.75 MG-3.75 MG, 5 MG-5 MG-5 MG, 6.25 MG-6.25 MG-6.25 MG-6.25 MG, 7.5 MG-7.5 MG-7.5 MG, 9.375 MG-9.375 MG-9.375 MG	P	AL(Up to 21 yrs old)	dextroamphetamine sulfate TABS 30 MG	P	QL(60 ea per 30 day(s) retail); AL(Up to 21 yrs old)
amphetamine-dextroamphetamine TABS 1.25 MG-1.25 MG-1.25 MG-1.25 MG, 2.5 MG-2.5 MG, 3.75 MG-3.75 MG-3.75 MG-3.75 MG, 5 MG-5 MG-5 MG-5 MG, 7.5 MG-7.5 MG-7.5 MG	NP	QL(60 ea per 30 day(s) retail); AL(Up to 21 yrs old)	dextroamphetamine sulfate TABS 2.5 MG, 5 MG, 7.5 MG, 10 MG, 15 MG, 20 MG	NP	QL(90 ea per 30 day(s) retail); AL(Up to 21 yrs old)
			dextroamphetamine sulfate TABS 30 MG	NP	QL(60 ea per 30 day(s) retail); AL(Up to 21 yrs old)
			DYANAVEL XR CHER	NP	AL(Up to 21 yrs old)
			DYANAVEL XR SUER	P	AL(Up to 21 yrs old)
			EVEKEO ODT TBDP	NP	QL(60 ea per 30 day(s) retail); AL(Up to 21 yrs old)
			EVEKEO TABS 5 MG (amphetamine sulfate)	NP	QL(60 ea per 30 day(s) retail); AL(Up to 21 yrs old)
			EVEKEO TABS 10 MG (amphetamine sulfate)	NP	QL(180 ea per 30 day(s) retail); AL(Up to 21 yrs old)

Drug Name	Drug Tier	Requirements/Limits
<i>lisdexamfetamine dimesylate CAPS</i>	NP	AL(Up to 21 yrs old)
<i>lisdexamfetamine dimesylate CHEW</i>	NP	AL(Up to 21 yrs old)
<i>methamphetamine hcl</i>	NP	QL(5 ea daily; 150 ea per 30 day(s) retail); AL(Up to 21 yrs old)
MYDAYIS CP24 (<i>amphetamine-dextroamphetamine</i>)	NP	AL(Up to 21 yrs old)
VYVANSE CAPS	P	AL(Up to 21 yrs old)
VYVANSE CHEW	NP	AL(Up to 21 yrs old)
XELSTRYM	NP	
Anorexiant Non-Amphetamine		
ADIPEX-P TABS (<i>phentermine hcl</i>)	NP	PA
<i>benzphetamine hcl 50 MG</i>	NP	
<i>diethylpropion hcl TABS</i>	NP	
<i>diethylpropion hcl TB24</i>	NP	
LOMAIRA TABS	NP	
PHENDIMETRAZINE TARTRATEER CP24	NP	
<i>phendimetrazine tartrate TABS</i>	NP	
<i>phentermine hcl CAPS</i>	P	PA
<i>phentermine hcl TABS</i>	NP	PA
<i>phentermine hcl TABS</i>	P	PA
Anti-Obesity Agents		
<i>orlistat</i>	NP	
SAXENDA	P	PA
WEGOVY	P	PA
XENICAL (<i>orlistat</i>)	NP	
ZEPBOUND	NP	
Attention-Deficit/Hyperactivity Disorder (ADHD) Agents		

Drug Name	Drug Tier	Requirements/Limits
<i>atomoxetine hcl</i>	P	AL(Up to 21 yrs old)
<i>clonidine hcl (adhd) TB12</i>	P	AL(Up to 21 yrs old)
<i>guanfacine hcl (adhd)</i>	P	AL(Up to 21 yrs old)
INTUNIV (<i>guanfacine hcl (adhd)</i>)	NP	AL(Up to 21 yrs old)
QELBREE	NP	AL(Up to 21 yrs old)
STRATTERA (<i>atomoxetine hcl</i>)	NP	AL(Up to 21 yrs old)
Dopamine and Norepinephrine Reuptake Inhibitors (DNRIs)		
SUNOSI	NP	AL(Up to 21 yrs old)
Histamine H3-Receptor Antagonist/Inverse Agonists		
WAKIX 4.45 MG	NP	AL(Up to 21 yrs old); SP
WAKIX 17.8 MG	NP	SP
Stimulants - Misc.		
APTENSIO XR CP24 (<i>methylphenidate hcl</i>)	NP	AL(Up to 21 yrs old)
<i>armodafinil</i>	P	AL(Up to 21 yrs old)
AZSTARYS	NP	AL(Up to 21 yrs old)
CONCERTA TBCR (<i>methylphenidate hcl</i>)	P	AL(Up to 21 yrs old)
COTEMPLA XR-ODT TBED	NP	AL(Up to 21 yrs old)
DAYTRANA PTCH (<i>methylphenidate</i>)	P	AL(Up to 21 yrs old)
<i>dexmethylphenidate hcl CP24</i>	P	AL(Up to 21 yrs old)
<i>dexmethylphenidate hcl TABS 5 MG</i>	P	QL(90 ea per 30 day(s) retail); AL(Up to 21 yrs old)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>dexmethylphenidate hcl TABS 2.5 MG, 10 MG</i>	P	QL(60 ea per 30 day(s) retail); AL(Up to 21 yrs old)	<i>methylphenidate hcl TBCR 45 MG, 63 MG</i>	NP	
FOCALIN XR CP24 (<i>dexmethylphenidate hcl</i>)	NP	AL(Up to 21 yrs old)	<i>methylphenidate hcl TBCR 10 MG, 18 MG, 20 MG, 27 MG, 36 MG, 54 MG</i>	P	AL(Up to 21 yrs old)
FOCALIN TABS 5 MG (<i>dexmethylphenidate hcl</i>)	NP	QL(90 ea per 30 day(s) retail); AL(Up to 21 yrs old)	<i>methylphenidate PTCH</i>	NP	AL(Up to 21 yrs old)
FOCALIN TABS 2.5 MG, 10 MG (<i>dexmethylphenidate hcl</i>)	NP	QL(60 ea per 30 day(s) retail); AL(Up to 21 yrs old)	<i>modafinil</i>	P	AL(Up to 21 yrs old)
JORNAY PM CP24	NP	AL(Up to 21 yrs old)	NUVIGIL (<i>armodafinil</i>)	NP	AL(Up to 21 yrs old)
METHYLIN SOLN 10 MG/5ML (<i>methylphenidate hcl</i>)	NP	QL(30 ml daily); AL(Up to 21 yrs old)	PROVIGIL (<i>modafinil</i>)	NP	AL(Up to 21 yrs old)
METHYLIN SOLN 5 MG/5ML (<i>methylphenidate hcl</i>)	NP	QL(60 ml daily); AL(Up to 21 yrs old)	QUILLICHEW ER CHER	P	AL(Up to 21 yrs old)
<i>methylphenidate hcl CHEW</i>	NP	QL(3 ea daily; 90 ea per 30 day(s) retail); AL(Up to 21 yrs old)	QUILLIVANT XR SRER	P	AL(Up to 21 yrs old)
<i>methylphenidate hcl CP24 10 MG, 20 MG, 30 MG, 40 MG, 60 MG</i>	P	AL(Up to 21 yrs old)	RELEXXII TBCR 45 MG, 63 MG (<i>methylphenidate hcl</i>)	NP	
<i>methylphenidate hcl CP24</i>	NP	AL(Up to 21 yrs old)	RELEXXII TBCR	NP	AL(Up to 21 yrs old)
<i>methylphenidate hcl CPCR</i>	P	AL(Up to 21 yrs old)	RITALIN LA CP24 (<i>methylphenidate hcl</i>)	NP	AL(Up to 21 yrs old)
<i>methylphenidate hcl SOLN 5 MG/5ML</i>	P	QL(60 ml daily); AL(Up to 21 yrs old)	RITALIN TABS (<i>methylphenidate hcl</i>)	NP	QL(90 ea per 30 day(s) retail); AL(Up to 21 yrs old)
<i>methylphenidate hcl SOLN 10 MG/5ML</i>	P	QL(30 ml daily); AL(Up to 21 yrs old)	ALTERNATIVE MEDICINES		
<i>methylphenidate hcl TABS</i>	P	QL(90 ea per 30 day(s) retail); AL(Up to 21 yrs old)	Alternative Medicine - C's		
<i>methylphenidate hcl TB24</i>	P	AL(Up to 21 yrs old)	PRELIEF	P	
<i>methylphenidate hcl TBCR 72 MG</i>	NP	AL(Up to 21 yrs old)	Alternative Medicine - L's		
			<i>lycopene CAPS</i>	P	
			Alternative Medicine - M's		
			<i>melatonin TABS 3 MG</i>	NP	
			AMEBICIDES		
			Amebicides		
			SOLOSEC	NP	
			AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Aminoglycosides			ADALIMUMAB-AATY 2-PEN KIT AJKT	NP	SP
ARIKAYCE	NP	SP	ADALIMUMAB-AATY 2-SYRINGE KIT PSKT 20 MG/0.2ML	NP	
BETHKIS NEBU (<i>tobramycin</i>)	NP	SP	ADALIMUMAB-AATY 2-SYRINGE KIT PSKT 40 MG/0.4ML	NP	SP
<i>gentamicin in saline 0.8 MG/ML-0.9 %, 1 MG/ML-0.9 %, 1.2 MG/ML-0.9 %, 1.6 MG/ML-0.9 %, 2 MG/ML-0.9 %</i>	P		ADALIMUMAB-ADAZ SOAJ	NP	SP
<i>gentamicin sulfate IJ 40 MG/ML, 80 MG/2ML</i>	P		ADALIMUMAB-ADAZ SOSY	NP	SP
KITABIS PAK NEBU (<i>tobramycin</i>)	NP	SP	ADALIMUMAB-ADBM CROHNS/UC/HS STARTER AJKT	NP	SP
<i>neomycin sulfate TABS</i>	P		ADALIMUMAB-ADBM PSORIASIS/UEVITIS STARTER AJKT	NP	SP
TOBI PODHALER CAPS	NP	SP	ADALIMUMAB-ADBM STARTER PACKAGE FOR CROHNS DISEASE/UC/HS AJKT	NP	
TOBI NEBU (<i>tobramycin</i>)	NP	SP	ADALIMUMAB-ADBM STARTER PACKAGE FOR PSORIASIS/UEVITIS AJKT	NP	
<i>tobramycin sulfate SOLN IJ 1.2 GM/30ML, 40 MG/ML, 80 MG/2ML</i>	P		ADALIMUMAB-ADBM AJKT	NP	
<i>tobramycin NEBU</i>	P	SP	ADALIMUMAB-ADBM AJKT	NP	SP
<i>tobramycin NEBU</i>	NP	SP	ADALIMUMAB-ADBM PSKT	NP	SP
ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions			ADALIMUMAB-ADBM PSKT 40 MG/0.4ML	NP	
Antirheumatic - Enzyme Inhibitors			ADALIMUMAB-FKJP AJKT	NP	SP
OLUMIANT	NP	SP; PA	ADALIMUMAB-FKJP PSKT 20 MG/0.4ML	NP	
RINVOQ TB24	NP	SP; PA	ADALIMUMAB-FKJP PSKT	NP	SP
XELJANZ XR TB24	NP	SP; PA	ADALIMUMAB-RYVK (2 PEN)	NP	SP
XELJANZ SOLN	NP	SP; PA	AMJEVITA SOAJ	NP	SP
XELJANZ TABS	P	SP; PA			
Anti-TNF-alpha - Monoclonal Antibodies					
ABRILADA 1-PEN KIT AJKT	NP	SP			
ABRILADA 2-PEN KIT AJKT	NP	SP			
ABRILADA PSKT	NP	SP			
ADALIMUMAB-AACF (2 PEN) AJKT	NP	SP			
ADALIMUMAB-AATY 1-PEN KIT AJKT	NP	SP			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
AMJEVITA SOSY	NP	SP	HYRIMOZ PEDIATRIC CROHNSDISEASE STARTER PACK SOSY	NP	SP
CYLTEZO STARTER PACKAGE FOR CROHNS DISEASE/UC/HS AJKT	NP		HYRIMOZ PEDIATRIC CROHN'SDISEASE STARTER PACK SOSY	NP	SP
CYLTEZO STARTER PACKAGE FOR CROHNS DISEASE/UC/HS AJKT	NP	SP	HYRIMOZ PLAQUE PSORIASISSTARTER PACK SOAJ	NP	SP
CYLTEZO STARTER PACKAGE FOR PSORIASIS/UVEITIS AJKT	NP		HYRIMOZ SOAJ	NP	SP
CYLTEZO STARTER PACKAGE FOR PSORIASIS AJKT	NP	SP	HYRIMOZ SOSY	NP	SP
CYLTEZO AJKT	NP	SP	IDACIO (2 PEN) AJKT	NP	SP
CYLTEZO AJKT	NP		IDACIO (2 SYRINGE) PSKT	NP	SP
CYLTEZO PSKT 40 MG/0.4ML	NP		IDACIO STARTER PACKAGE FOR CROHNS DISEASE AJKT	NP	SP
CYLTEZO PSKT	NP	SP	IDACIO STARTER PACKAGE FOR PLAQUE PSORIASIS AJKT	NP	SP
HADLIMA PUSHTOUCH SOAJ	NP	SP	SIMLANDI 1-PEN KIT	NP	SP
HADLIMA SOSY	NP	SP	SIMLANDI 2-PEN KIT	NP	SP
HULIO AJKT	NP	SP	SIMPONI ARIA SOLN	NP	SP; PA
HULIO PSKT	NP	SP	SIMPONI SOAJ	NP	SP; PA
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT 80 MG/0.8ML	P	SP; PA	SIMPONI SOSY	NP	SP; PA
HUMIRA PEN-CD/UC/HS STARTER PNKT 80 MG/0.8ML	P	SP; PA	YUFLYMA 1-PEN KIT AJKT	NP	SP
HUMIRA PEN-PEDIATRIC UC STARTER PACK PNKT	P	SP; PA	YUFLYMA 2-PEN KIT AJKT	NP	SP
HUMIRA PEN PNKT	P	SP; PA	YUFLYMA 2-SYRINGE KIT PSKT	NP	SP
HUMIRA PEN-PS/UV STARTER PNKT	P	SP; PA	YUFLYMA CD/UC/HS STARTER AJKT	NP	SP
HUMIRA PSKT	P	SP; PA	YUSIMRY	NP	SP
HYRIMOZ CROHN'S DISEASE AND ULCERATIVE COLITIS STARTER PACK SOAJ	NP	SP	Gold Compounds		
			RIDAURA	P	
			Interleukin-1 Receptor Antagonist (IL-1Ra)		
			KINERET SOSY	P	SP; PA
			Interleukin-1beta Blockers		
			ILARIS SOLN	NP	SP; PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Interleukin-6 Receptor Inhibitors			<i>ibuprofen SUSP 50 MG/1.25ML, 100 MG/5ML</i>	P	RX/OTC
ACTEMRA ACTPEN SOAJ	NP	SP; PA	<i>ibuprofen TABS 400 MG, 600 MG, 800 MG</i>	NP	
ACTEMRA SOSY	NP	SP; PA	<i>ibuprofen TABS 200 MG, 400 MG, 600 MG, 800 MG</i>	P	
KEVZARA SOAJ	NP	SP; PA	<i>indomethacin CAPS 25 MG, 50 MG</i>	P	
KEVZARA SOSY	NP	SP; PA	<i>indomethacin CPCR</i>	P	
Nonsteroidal Anti-inflammatory Agents (NSAIDs)			<i>indomethacin SUPP</i>	NP	
ARTHROTEC 50 TBEC (<i>diclofenac w/ misoprostol</i>)	NP		<i>ketoprofen CAPS 25 MG</i>	NP	
ARTHROTEC 75 TBEC (<i>diclofenac w/ misoprostol</i>)	NP		<i>ketoprofen CP24</i>	NP	
CELEBREX (<i>celecoxib</i>)	NP		KETOROLAC TROMETHAMINE SOLN NA 15.75 MG/SPRAY	NP	
<i>celecoxib</i>	P		<i>ketorolac tromethamine TABS</i>	P	
DAYPRO TABS (<i>oxaprozin</i>)	NP		<i>meclofenamate sodium CAPS</i>	NP	
<i>diclofenac potassium CAPS</i>	NP		<i>mefenamic acid CAPS</i>	NP	
<i>diclofenac potassium TABS</i>	NP		<i>meloxicam CAPS</i>	P	
<i>diclofenac sodium TB24</i>	P		<i>meloxicam CAPS</i>	NP	
<i>diclofenac sodium TBEC</i>	P		<i>meloxicam TABS</i>	P	
<i>diclofenac w/ misoprostol TBEC</i>	NP		<i>nabumetone</i>	P	
DUEXIS (<i>ibuprofen-famotidine</i>)	NP		NALFON CAPS (<i>fenoprofen calcium</i>)	NP	
<i>etodolac CAPS</i>	NP		NALFON TABS (<i>fenoprofen calcium</i>)	NP	
<i>etodolac TABS</i>	NP		NAPRELAN TB24 (<i>naproxen sodium</i>)	NP	
<i>etodolac TB24</i>	NP		NAPROSYN SUSP (<i>naproxen</i>)	NP	
FELDENE CAPS (<i>piroxicam</i>)	NP		<i>naproxen sodium CAPS</i>	NP	
<i>fenoprofen calcium CAPS 400 MG</i>	NP		<i>naproxen sodium TABS 220 MG</i>	P	
<i>fenoprofen calcium TABS</i>	NP		<i>naproxen sodium TABS</i>	NP	
<i>flurbiprofen TABS 100 MG</i>	NP		<i>naproxen sodium TB24</i>	NP	
<i>ibuprofen CAPS</i>	P		<i>naproxen-esomeprazole magnesium</i>	NP	
<i>ibuprofen CHEW</i>	P		<i>naproxen SUSP</i>	NP	
<i>ibuprofen-famotidine</i>	NP				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>naproxen TABS</i>	P		ANACIN TABS	P	
<i>naproxen TBEC</i>	NP		<i>aspirin-acetaminophen-caffeine TABS</i>	P	
<i>oxaprozin TABS</i>	NP		<i>aspirin-acetaminophen-caffeine TABS</i>	P	
<i>piroxicam CAPS</i>	NP		<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG</i>	P	
RELAFEN DS	NP		<i>butalbital-acetaminophen-caffeine SOLN</i>	P	
<i>sulindac TABS</i>	P		<i>butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG</i>	P	
<i>tolmetin sodium CAPS</i>	NP		<i>butalbital-acetaminophen TABS 50 MG-325 MG</i>	P	
<i>tolmetin sodium TABS 600 MG</i>	NP		<i>butalbital-aspirin-caffeine CAPS</i>	P	
VIMOVO (<i>naproxen-esomeprazole magnesium</i>)	NP		CRAMP TABS	P	
Phosphodiesterase 4 (PDE4) Inhibitors			CVS TENSION HEADACHE CAPS	P	
OTEZLA TABS	P	SP; PA	VANQUISH	P	
OTEZLA TBPk	P	SP; PA	Analgesics Other		
Pyrimidine Synthesis Inhibitors			<i>acetaminophen CAPS 500 MG</i>	P	
<i>leflunomide</i>	P		<i>acetaminophen CHEW</i>	P	
Selective Costimulation Modulators			<i>acetaminophen CHEW</i>	P	
ORENCIA CLICKJECT SOAJ	P	SP; PA	<i>acetaminophen ELIX</i>	P	
ORENCIA SOSY	P	SP; PA	<i>acetaminophen LIQD 160 MG/5ML, 500 MG/15ML</i>	P	
Soluble Tumor Necrosis Factor Receptor Agents			<i>acetaminophen LIQD 160 MG/5ML</i>	NP	
ENBREL MINI SOCT	P	SP; PA	<i>acetaminophen LIQD 160 MG/5ML, 500 MG/15ML</i>	P	
ENBREL SURECLICK SOAJ	P	SP; PA	<i>acetaminophen SOLN OR 160 MG/5ML, 325 MG/10.15ML, 650 MG/20.3ML</i>	NP	
ENBREL SOLN	P	SP; PA	<i>acetaminophen SOLN OR 160 MG/5ML, 325 MG/10.15ML, 650 MG/20.3ML</i>	P	
ENBREL SOSY	P	SP; PA			
ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions					
Analgesic Combinations					
<i>acetaminophen w/ pamabrom</i>	P				
<i>acetaminophen-caffeine TABS</i>	P				
<i>acetaminophen-pamabrom-pyrimilamine TABS</i>	P				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>acetaminophen SUPP 120 MG, 650 MG</i>	P		<i>aspirin TABS 325 MG, 500 MG</i>	P	
<i>acetaminophen SUSP 80 MG/2.5ML, 160 MG/5ML, 650 MG/20.3ML</i>	P		<i>aspirin TABS 325 MG, 500 MG</i>	P	
<i>acetaminophen SUSP 160 MG/5ML</i>	NP		<i>aspirin TBEC 81 MG, 325 MG</i>	P	
<i>acetaminophen SUSP 80 MG/2.5ML, 160 MG/5ML, 650 MG/20.3ML</i>	P		<i>aspirin TBEC 81 MG, 325 MG</i>	P	
<i>acetaminophen TABS 325 MG, 500 MG</i>	NP		<i>aspirin TBEC 81 MG</i>	NP	
<i>acetaminophen TABS 325 MG, 500 MG</i>	P		<i>magnesium salicylate 500 MG</i>	P	
<i>acetaminophen TABS 325 MG, 500 MG</i>	P		<i>magnesium salicylate tetrahydrate</i>	P	
<i>acetaminophen TBCR</i>	P		<i>salsalate</i>	P	
<i>acetaminophen TBCR</i>	P		ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions		
<i>acetaminophen TBCR</i>	NP		Opioid Agonists		
FEVERALL INFANTS SUPP	P		ACTIQ LPOP 400 MCG, 800 MCG, 1600 MCG (<i>fentanyl citrate</i>)	NP	
FEVERALL JUNIOR STRENGTH SUPP	P		<i>codeine sulfate TABS 30 MG</i>	P	
TRIAMINIC FEVER REDUCERPAIN RELIEVER CHILDRENS SYRP	P		CODEINE SULFATE TABS 60 MG	P	
TRIAMINIC FEVER REDUCERPAIN RELIEVER INFANTS SYRP	P		CONZIP CP24 (<i>tramadol hcl</i>)	NP	
Salicylates			DILAUDID LIQD (<i>hydromorphone hcl</i>)	NP	
<i>aspirin buffered (cal carb-mag carb-mag oxide) 325 MG-158 MG-34 MG-63 MG, 325 MG-35 MG-40 MG</i>	P		DILAUDID TABS (<i>hydromorphone hcl</i>)	NP	
<i>aspirin effervescent</i>	P		DSUVIA SUBL	NP	
<i>aspirin CHEW</i>	P		<i>fentanyl citrate LPOP</i>	NP	
<i>aspirin CHEW</i>	P		<i>fentanyl citrate TABS 200 MCG, 400 MCG, 600 MCG, 800 MCG</i>	NP	
ASPIRIN SUPP 300 MG	P		<i>fentanyl PT72 37.5 MCG/HR, 62.5 MCG/HR, 87.5 MCG/HR</i>	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR</i>	P	PA	<i>morphine sulfate SUPP</i>	NP	
FENTORA TABS (<i>fentanyl citrate</i>)	NP		<i>morphine sulfate TABS</i>	P	
<i>hydrocodone bitartrate CP12</i>	NP		<i>morphine sulfate TBCR</i>	P	
<i>hydrocodone bitartrate T24A</i>	NP	PA	MS CONTIN TBCR (<i>morphine sulfate</i>)	NP	
<i>hydromorphone hcl LIQD</i>	NP		NUCYNTA ER TB12	NP	
HYDROMORPHONE HCL SUPP	NP		NUCYNTA TABS	NP	
<i>hydromorphone hcl TABS</i>	P		<i>oxycodone hcl CAPS</i>	P	
<i>hydromorphone hcl TB24</i>	NP		<i>oxycodone hcl CONC 100 MG/5ML</i>	NP	
HYSINGLA ER T24A	NP	PA	<i>oxycodone hcl SOLN</i>	P	
<i>levorphanol tartrate TABS</i>	NP		<i>oxycodone hcl T12A 10 MG, 20 MG, 40 MG, 80 MG</i>	NP	PA
<i>meperidine hcl SOLN OR 50 MG/5ML</i>	NP		<i>oxycodone hcl TABS</i>	P	
<i>meperidine hcl TABS 50 MG</i>	NP		OXYCONTIN T12A	NP	PA
<i>methadone hcl CONC</i>	P		<i>oxymorphone hcl TABS</i>	NP	
<i>methadone hcl SOLN OR</i>	P		<i>oxymorphone hcl TB12</i>	NP	
<i>methadone hcl TABS</i>	P		QDOLO SOLN (<i>tramadol hcl</i>)	NP	
<i>methadone hcl TBSO</i>	P		ROXICODONE TABS 15 MG, 30 MG (<i>oxycodone hcl</i>)	NP	
METHADOSE SUGAR-FREE CONC (<i>methadone hcl</i>)	P		<i>tramadol hcl CP24 100 MG, 200 MG, 300 MG</i>	NP	
METHADOSE CONC (<i>methadone hcl</i>)	P		<i>tramadol hcl SOLN</i>	NP	
<i>morphine sulfate beads</i>	NP		<i>tramadol hcl TABS</i>	P	
<i>morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG</i>	NP		<i>tramadol hcl TB24</i>	P	PA
<i>morphine sulfate SOLN OR 10 MG/5ML, 20 MG/5ML, 20 MG/ML, 100 MG/5ML</i>	P		TRAMADOL HYDROCHLORIDE SOLN (<i>tramadol hcl</i>)	NP	
<i>morphine sulfate SOLN OR 20 MG/ML, 100 MG/5ML</i>	NP		XTAMPZA ER	P	PA
			Opioid Combinations		
			<i>acetaminophen w/ codeine SOLN</i>	P	
			<i>acetaminophen w/ codeine TABS 15 MG-300 MG, 30 MG-300 MG, 60 MG-300 MG</i>	P	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG</i>	NP		BELBUCA FILM 75 MCG, 150 MCG, 300 MCG, 450 MCG, 600 MCG, 750 MCG	NP	
<i>butalbital-acetaminophen-caffeine w/ codeine</i>	P		BRIXADI SOSY	P	SP
<i>butalbital-aspirin-caffeine w/cod</i>	P		<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 2 MG-8 MG</i>	P	QL(3 ea daily)
<i>hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML</i>	P		<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 3 MG-12 MG</i>	P	
<i>hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG, 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	P		<i>buprenorphine hcl-naloxone hcl dihydrate SUBL 0.5 MG-2 MG</i>	P	
<i>hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG, 7.5 MG-200 MG</i>	NP		<i>buprenorphine hcl-naloxone hcl dihydrate SUBL 2 MG-8 MG</i>	P	QL(3 ea daily)
NALOCET TABS	NP		<i>buprenorphine hcl SUBL</i>	P	
<i>oxycodone w/acetaminophen SOLN</i>	P		<i>buprenorphine PTWK</i>	NP	PA
<i>oxycodone w/acetaminophen TABS 325 MG-10 MG, 325 MG-2.5 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	P		<i>butorphanol tartrate NA 10 MG/ML</i>	NP	
PERCOCET TABS 325 MG-10 MG, 325 MG-2.5 MG, 325 MG-5 MG, 325 MG-7.5 MG (<i>oxycodone w/acetaminophen</i>)	NP		BUTRANS PTWK (<i>buprenorphine</i>)	P	PA
PROLATE SOLN	NP		<i>pentazocine w/ naloxone hcl</i>	NP	
PROLATE TABS	NP		SUBLOCADE SOSY	P	SP
SEGLENTIS	NP		SUBOXONE FILM SL 2 MG-8 MG (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	NP	QL(3 ea daily)
<i>tramadol-acetaminophen</i>	P		SUBOXONE FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 3 MG-12 MG (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	NP	
Opioid Partial Agonists			ZUBSOLV SUBL	NP	
BELBUCA FILM 900 MCG	NP	PA	ANDROGENS-ANABOLIC - Drugs to Regulate Hormones		
			Anabolic Steroids		
			<i>oxandrolone 2.5 MG</i>	P	
			Androgens		

Drug Name	Drug Tier	Requirements/Limits
ANDRODERM PT24 2 MG/24HR, 4 MG/24HR	NP	PA
ANDROGEL PUMP GEL TD 1.62 % (testosterone)	NP	PA
ANDROGEL GEL TD (testosterone)	NP	PA
AVEED SOLN	NP	SP; PA
danazol CAPS	P	PA
FORTESTA GEL TD (testosterone)	NP	PA
JATENZO CAPS	NP	PA
METHITEST TABS	NP	PA
methyltestosterone CAPS	NP	PA
NATESTO GEL NA	NP	PA
TESTIM GEL TD (testosterone)	NP	PA
testosterone cypionate SOLN IM	P	PA
testosterone enanthate SOLN IM	P	PA
testosterone GEL TD 1 %, 1.62 %, 10 MG/ACT	P	PA
testosterone GEL TD 1 %, 20.25 MG/1.25GM, 25 MG/2.5GM, 40.5 MG/2.5GM, 50 MG/5GM	NP	PA
testosterone SOLN	NP	PA
testosterone SOLN	P	PA
TLANDO CAPS	NP	PA
VOGELXO PUMP GEL TD (testosterone)	NP	PA
VOGELXO GEL TD (testosterone)	NP	PA
XYOSTED SOAJ	NP	PA
ANORECTAL AND RELATED PRODUCTS - Rectal Drugs to Treat Pain, Swelling and Itching		
Intrarectal Steroids		
budesonide (intrarectal)	NP	
hydrocortisone (intrarectal)	P	

Drug Name	Drug Tier	Requirements/Limits
Rectal Combinations		
lidocaine-hydrocortisone acetate (rectal) CREA EX	P	
Rectal Local Anesthetics		
AMERICAINE	P	
dibucaine (rectal) EX	P	
lidocaine (anorectal) CREA	P	
Rectal Steroids		
hydrocortisone (rectal) EX 2.5 %	P	
Vasodilating Agents		
nitroglycerin (intra-anal)	NP	
ANTACIDS		
Antacid Combinations		
alum & mag hydrox-simethicone CHEW 200 MG-25 MG-200 MG	P	
alum & mag hydrox-simethicone LIQD	P	
alum & mag hydrox-simethicone SUSP	P	
alum & mag hydrox-simethicone SUSP	P	
aluminum hydroxide-mag carb CHEW	P	
aluminum hydroxide-mag carb SUSP 237.5 MG/5ML-254 MG/5ML, 358 MG/15ML-95 MG/15ML	P	
ANTACID CHEW	P	
calcium carbonate-mag hydrox SUSP	P	
calcium carbonate-simethicone CHEW 1000 MG-60 MG	P	
SM FOAMING ANTACID	P	
Antacids - Aluminum Salts		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ALUMINUM HYDROXIDE SUSP 320 MG/5ML	P		RANEXA TB12 500 MG (ranolazine)	NP	
Antacids - Bicarbonate			ranolazine TB12	P	
sodium bicarbonate (antacid) TABS 325 MG, 650 MG	P		Nitrates		
Antacids - Calcium Salts			GONITRO PACK	NP	
calcium carbonate (antacid) CHEW 400 MG, 420 MG, 500 MG, 750 MG, 1000 MG	P		ISORDIL TITRADOSE TABS (isosorbide dinitrate)	NP	
calcium carbonate (antacid) CHEW 400 MG, 420 MG, 500 MG, 750 MG, 1000 MG	P		isosorbide dinitrate TABS	P	
calcium carbonate (antacid) CHEW 750 MG	NP		isosorbide mononitrate TABS	P	
calcium carbonate (antacid) SUSP	P		isosorbide mononitrate TB24	P	
TUMS ULTRA 1000 CHEW (calcium carbonate (antacid))	P		NITRO-BID OINT	NP	
Antacids - Magnesium Salts			NITRO-DUR PT24	NP	
magnesium oxide TABS 400 MG	NP		NITRO-DUR PT24 (nitroglycerin)	NP	
magnesium oxide TABS 400 MG	P		nitroglycerin PT24	P	
ANTHELMINTICS - Drugs to Treat Worm Infections			nitroglycerin SOLN TL 0.4 MG/SPRAY	NP	
Anthelmintics			nitroglycerin SUBL	P	
albendazole	P		NITROLINGUAL SOLN TL (nitroglycerin)	NP	
BENZNIDAZOLE	P	SP	NITROSTAT SUBL (nitroglycerin)	NP	
praziquantel	P		ANTIANGIETY AGENTS - Drugs to Treat Anxiety		
ANTIANGINAL AGENTS - Drugs to Treat Chest Pain			Antianxiety Agents - Misc.		
Antianginals-Other			bupirone hcl	NP	
ASPRUZYO SPRINKLE PACK	NP		bupirone hcl	P	
			droperidol SOLN 2.5 MG/ML	P	
			hydroxyzine hcl SYRP	P	
			hydroxyzine hcl SYRP	NP	
			hydroxyzine hcl TABS	P	
			hydroxyzine pamoate CAPS	P	
			meprobamate	NP	
			VISTARIL CAPS (hydroxyzine pamoate)	NP	

Drug Name	Drug Tier	Requirements/Limits
Benzodiazepines		
ALPRAZOLAM INTENSOL CONC	NP	
<i>alprazolam TABS</i>	NP	
<i>alprazolam TB24</i>	NP	
<i>alprazolam TBDP</i>	NP	
ATIVAN TABS (<i>lorazepam</i>)	NP	
<i>chlordiazepoxide hcl CAPS</i>	P	
<i>clorazepate dipotassium TABS</i>	P	
<i>diazepam CONC</i>	NP	
<i>diazepam SOLN OR 5 MG/5ML</i>	P	
<i>diazepam SOLN IJ 5 MG/ML</i>	NP	
<i>diazepam TABS</i>	P	
<i>lorazepam CONC</i>	NP	
<i>lorazepam TABS</i>	P	
LOREEV XR CS24 1 MG, 2 MG, 3 MG	NP	
<i>oxazepam CAPS</i>	NP	
TRANXENE T TABS 7.5 MG (<i>clorazepate dipotassium</i>)	NP	
XANAX XR TB24 (<i>alprazolam</i>)	NP	
XANAX TABS (<i>alprazolam</i>)	NP	
ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms		
Antiarrhythmics Type I-A		
<i>disopyramide phosphate CAPS</i>	P	
NORPACE CR CP12	P	
<i>quinidine gluconate TBCR</i>	P	
<i>quinidine sulfate TABS</i>	P	
Antiarrhythmics Type I-B		

Drug Name	Drug Tier	Requirements/Limits
<i>mexiletine hcl</i>	P	
Antiarrhythmics Type I-C		
<i>flecainide acetate</i>	P	
<i>propafenone hcl TABS</i>	P	
Antiarrhythmics Type III		
<i>amiodarone hcl SOLN 50 MG/ML</i>	P	
<i>amiodarone hcl TABS</i>	P	
<i>dofetilide</i>	P	
MULTAQ	P	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions		
Antiasthmatic - Monoclonal Antibodies		
FASENRA PEN SOAJ	P	SP; PA
FASENRA SOSY 30 MG/ML	P	SP; PA
FASENRA SOSY 10 MG/0.5ML	P	
NUCALA SOAJ	P	SP; PA
NUCALA SOLR	NP	SP; PA
NUCALA SOSY 100 MG/ML	NP	SP; PA
NUCALA SOSY 40 MG/0.4ML	P	SP; PA
TEZSPIRE SOAJ	P	SP
TEZSPIRE SOSY	NP	SP
XOLAIR SOAJ	NP	SP
XOLAIR SOLR	P	SP; PA
XOLAIR SOSY 75 MG/0.5ML, 150 MG/ML	NP	SP; PA
XOLAIR SOSY 300 MG/2ML	NP	SP
Bronchodilators - Anticholinergics		
ATROVENT HFA	P	
INCRUSE ELLIPTA	P	
<i>ipratropium bromide SOLN 0.02 %</i>	P	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SPIRIVA HANDIHALER CAPS (<i>tiotropium bromide monohydrate</i>)	P		ASMANEX TWISTHALER 14 METERED DOSES AEPB	P	
SPIRIVA RESPIMAT AERS	P		ASMANEX TWISTHALER 30 METERED DOSES AEPB	P	
<i>tiotropium bromide monohydrate</i> CAPS	NP		ASMANEX TWISTHALER 60 METERED DOSES AEPB	P	
TUDORZA PRESSAIR	NP		<i>budesonide (inhalation)</i> SUSP 0.25 MG/2ML, 0.5 MG/2ML	P	
YUPELRI	NP		<i>budesonide (inhalation)</i> SUSP 1 MG/2ML	NP	
Leukotriene Modulators			FLOVENT DISKUS AEPB (<i>fluticasone propionate (inhalation)</i>)	P	
ACCOLATE 10 MG (<i>zafirlukast</i>)	NP		FLOVENT HFA	P	
<i>montelukast sodium</i> CHEW	P		<i>fluticasone propionate (inhalation)</i> AEPB	P	AL(Up to 18 yrs old)
<i>montelukast sodium</i> PACK	NP		<i>fluticasone propionate hfa</i>	P	AL(Up to 18 yrs old)
<i>montelukast sodium</i> TABS	P		PULMICORT FLEXHALER AEPB	P	
SINGULAIR CHEW (<i>montelukast sodium</i>)	NP		PULMICORT SUSP (<i>budesonide (inhalation)</i>)	NP	
SINGULAIR PACK (<i>montelukast sodium</i>)	NP		QVAR REDIHALER	P	
SINGULAIR TABS (<i>montelukast sodium</i>)	NP		Sympathomimetics		
<i>zafirlukast</i>	NP		ADVAIR DISKUS AEPB (<i>fluticasone-salmeterol</i>)	P	
<i>zileuton</i> TB12	NP		ADVAIR HFA AERO (<i>fluticasone-salmeterol</i>)	P	
ZYFLO TABS	NP		AIRDUO DIGIHALER 113/14	NP	
Selective Phosphodiesterase 4 (PDE4) Inhibitors			AIRDUO DIGIHALER 232/14	NP	
DALIRESP (<i>roflumilast</i>)	NP		AIRDUO DIGIHALER 55/14	NP	
<i>roflumilast</i>	NP		AIRDUO RESPICLICK 113/14 AEPB (<i>fluticasone-salmeterol</i>)	NP	
Steroid Inhalants					
ALVESCO	NP				
ARMONAIR DIGIHALER	NP				
ARNUITY ELLIPTA	P				
ASMANEX HFA AERO	P				
ASMANEX TWISTHALER 120 METERED DOSES AEPB	P				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
AIRDUO RESPICLICK 232/14 AEPB (<i>fluticasone-salmeterol</i>)	NP		<i>levalbuterol tartrate</i>	P	
AIRDUO RESPICLICK 55/14 AEPB (<i>fluticasone-salmeterol</i>)	NP		PERFORMIST NEBU (<i>formoterol fumarate</i>)	NP	
AIRSUPRA	NP		PROAIR DIGIHALER	NP	
<i>albuterol sulfate</i> AERS	P		PROAIR HFA AERS (<i>albuterol sulfate</i>)	P	
<i>albuterol sulfate</i> NEBU 0.083 %, 0.63 MG/3ML, 1.25 MG/3ML, 2.5 MG/0.5ML	P		PROAIR RESPICLICK AEPB	P	
<i>albuterol sulfate</i> SYRP	P		PROVENTIL HFA AERS (<i>albuterol sulfate</i>)	P	
<i>albuterol sulfate</i> TABS	NP		SEREVENT DISKUS	P	
ANORO ELLIPTA	P		STIOLTO RESPIMAT	P	
<i>arformoterol tartrate</i>	NP		STRIVERDI RESPIMAT	P	
BEVESPI AEROSPHERE	NP		SYMBICORT (<i>budesonide-formoterol fumarate dihydrate</i>)	P	
BREO ELLIPTA	NP		<i>terbutaline sulfate</i> TABS	P	
BREO ELLIPTA (<i>fluticasone furoate- vilanterol</i>)	NP		TRELEGY ELLIPTA	NP	
BREZTRI AEROSPHERE	NP		VENTOLIN HFA AERS (<i>albuterol sulfate</i>)	P	
BROVANA (<i>arformoterol tartrate</i>)	NP		XOPENEX HFA (<i>levalbuterol tartrate</i>)	P	
<i>budesonide-formoterol fumarate dihydrate</i>	NP		Xanthines		
COMBIVENT RESPIMAT AERS	P		<i>theophylline</i> ELIX	P	
DUAKLIR PRESSAIR	NP		<i>theophylline</i> SOLN	P	
DULERA	P		<i>theophylline</i> TB12 300 MG, 450 MG	P	
<i>fluticasone furoate- vilanterol</i>	NP		<i>theophylline</i> TB24	P	
<i>fluticasone-salmeterol AEPB</i>	NP		ANTICOAGULANTS - Blood Thinners		
<i>fluticasone-salmeterol AERO</i>	NP		Coumarin Anticoagulants		
<i>formoterol fumarate NEBU</i>	NP		<i>warfarin sodium</i> TABS	P	
<i>ipratropium-albuterol SOLN</i>	P		Direct Factor Xa Inhibitors		
<i>levalbuterol hcl</i>	NP		ELIQUIS STARTER PACK TBPK	P	
			ELIQUIS TABS	P	
			SAVAYSA	NP	42 day(s) max supply per 365 day(s) retail

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
XARELTO STARTER PACK TBPK	P		HEPARIN SODIUM/NAACL 0.45% SOLN IV 0.45 %-25000 UNIT/250ML	P	
XARELTO SUSR	NP		HEPARIN SODIUM/SODIUM CHLORIDE SOLN IV 0.45 %-25000 UNIT/250ML, 0.45 %-25000 UNIT/500ML	P	
XARELTO TABS	P		LOVENOX SOLN IJ 300 MG/3ML (<i>enoxaparin sodium</i>)	NP	42 day(s) max supply per 365 day(s) retail; SP
Heparins And Heparinoid-Like Agents			LOVENOX SOSY (<i>enoxaparin sodium</i>)	NP	42 day(s) max supply per 365 day(s) retail; SP
ARIXTRA (<i>fondaparinux sodium</i>)	NP	42 day(s) max supply per 365 day(s) retail; SP	Thrombin Inhibitors		
<i>enoxaparin sodium SOLN IJ 300 MG/3ML</i>	P	42 day(s) max supply per 365 day(s) retail; SP	<i>dabigatran etexilate mesylate CAPS</i>	NP	
<i>enoxaparin sodium SOSY</i>	P	42 day(s) max supply per 365 day(s) retail; SP	PRADAXA CAPS	P	
<i>fondaparinux sodium</i>	NP	42 day(s) max supply per 365 day(s) retail; SP	PRADAXA CAPS (<i>dabigatran etexilate mesylate</i>)	P	
FRAGMIN SOLN 10000 UNIT/4ML	NP	SP	PRADAXA PACK	NP	SP
FRAGMIN SOLN 95000 UNIT/3.8ML	NP	42 day(s) max supply per 365 day(s) retail; SP	ANTICONVULSANTS - Drugs to Treat Seizures		
FRAGMIN SOSY	NP	42 day(s) max supply per 365 day(s) retail; SP	AMPA Glutamate Receptor Antagonists		
<i>heparin sodium (porcine) lock flush 10 UNIT/ML, 100 UNIT/ML</i>	P		FYCOMPA SUSP	NP	
<i>heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML</i>	P		FYCOMPA TABS	NP	
HEPARIN SODIUM/D5W 5 %-100 UNIT/ML, 5 %-25000 UNIT/250ML	P		Anticonvulsants - Benzodiazepines		
HEPARIN SODIUM/DEXTROSE 5 %-25000 UNIT/250ML	P		<i>clobazam SUSP</i>	P	
			<i>clobazam TABS</i>	P	
			<i>clonazepam TABS</i>	P	
			<i>clonazepam TBDP</i>	NP	
			DIASTAT ACUDIAL GEL (<i>diazepam anticonvulsant</i>)	P	
			DIASTAT PEDIATRIC GEL (<i>diazepam anticonvulsant</i>)	P	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>diazepam (anticonvulsant) GEL</i>	P		<i>gabapentin CAPS</i>	P	
KLONOPIN TABS (<i>clonazepam</i>)	P		<i>gabapentin SOLN</i>	P	
LIBERVANT FILM	NP		<i>gabapentin TABS 600 MG, 800 MG</i>	P	
NAYZILAM	P		KEPPRA XR TB24 (<i>levetiracetam</i>)	NP	
ONFI SUSP (<i>clobazam</i>)	P		KEPPRA SOLN OR 100 MG/ML (<i>levetiracetam</i>)	P	
ONFI TABS (<i>clobazam</i>)	P		KEPPRA TABS (<i>levetiracetam</i>)	P	
SYMPAZAN FILM	NP		<i>lacosamide SOLN OR 10 MG/ML, 50 MG/5ML, 100 MG/10ML</i>	P	
VALTOCO 10 MG DOSE LIQD	P		<i>lacosamide TABS</i>	P	
VALTOCO 15 MG DOSE LQPK	P		LAMICTAL CHEWABLE DISPERSIBLE CHEW (<i>lamotrigine</i>)	P	
VALTOCO 20 MG DOSE LQPK	P		LAMICTAL ODT KIT	NP	
VALTOCO 5 MG DOSE LIQD	P		LAMICTAL ODT KIT (<i>lamotrigine</i>)	NP	
Anticonvulsants - Misc.			LAMICTAL ODT TBDP (<i>lamotrigine</i>)	NP	
APTIOM	NP		LAMICTAL ODT TBDP (<i>lamotrigine</i>)	NP	
BANZEL SUSP (<i>rufinamide</i>)	NP	SP	LAMICTAL STARTER/NOT TAKING CARBAMAZEPINE KIT (<i>lamotrigine</i>)	NP	
BANZEL TABS (<i>rufinamide</i>)	NP	SP	LAMICTAL STARTER/TAKING CARBAMAZEPINE/NOT TAKING VALPROATE KIT (<i>lamotrigine</i>)	NP	
BRIVIACT SOLN OR 10 MG/ML	P	SP	LAMICTAL STARTER/TAKING VALPROATE KIT (<i>lamotrigine</i>)	NP	
BRIVIACT TABS	P	SP	LAMICTAL XR KIT	NP	
<i>carbamazepine CHEW</i>	P		LAMICTAL XR TB24 (<i>lamotrigine</i>)	NP	
<i>carbamazepine CP12</i>	P		LAMICTAL TABS (<i>lamotrigine</i>)	P	
<i>carbamazepine SUSP</i>	P		<i>lamotrigine CHEW</i>	P	
<i>carbamazepine TABS</i>	P		<i>lamotrigine KIT 25 MG</i>	P	
<i>carbamazepine TB12</i>	P		<i>lamotrigine TABS</i>	P	
CARBATROL CP12 (<i>carbamazepine</i>)	P				
DIACOMIT CAPS	NP	SP			
DIACOMIT PACK	NP	SP			
ELEPSIA XR TB24	NP				
EPIDIOLEX	NP	SP			
EPRONTIA SOLN	NP				
FINTEPLA	NP	SP			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>lamotrigine TB24</i>	NP		<i>topiramate CP24</i>	NP	
<i>lamotrigine TBDP</i>	NP		<i>topiramate CPSP</i>	P	
<i>levetiracetam SOLN OR 100 MG/ML, 500 MG/5ML</i>	P		<i>topiramate CS24</i>	NP	
<i>levetiracetam TABS</i>	P		<i>topiramate TABS</i>	P	
<i>levetiracetam TB24</i>	NP		TRILEPTAL SUSP (<i>oxcarbazepine</i>)	P	
LYRICA CAPS (<i>pregabalin</i>)	P		TRILEPTAL TABS (<i>oxcarbazepine</i>)	P	
LYRICA SOLN (<i>pregabalin</i>)	P		TROKENDI XR CP24 (<i>topiramate</i>)	NP	
MOTPOLY XR CP24	NP		VIMPAT SOLN OR 10 MG/ML (<i>lacosamide</i>)	P	
MYSOLINE (<i>primidone</i>)	P		VIMPAT TABS (<i>lacosamide</i>)	P	
NEURONTIN CAPS (<i>gabapentin</i>)	P		ZONEGRAN CAPS 25 MG, 100 MG (<i>zonisamide</i>)	P	
NEURONTIN SOLN (<i>gabapentin</i>)	P		ZONISADE SUSP	NP	
NEURONTIN TABS (<i>gabapentin</i>)	P		<i>zonisamide CAPS</i>	P	
<i>oxcarbazepine SUSP</i>	P		<i>zonisamide CAPS</i>	P	
<i>oxcarbazepine TABS</i>	P		ZTALMY	NP	
OXTELLAR XR TB24	NP		Carbamates		
<i>pregabalin CAPS</i>	P		<i>felbamate SUSP</i>	NP	
<i>pregabalin SOLN</i>	P		<i>felbamate TABS</i>	NP	
<i>primidone</i>	P		FELBATOL SUSP (<i>felbamate</i>)	NP	
<i>primidone</i>	P		FELBATOL TABS (<i>felbamate</i>)	NP	
QUDEXY XR CS24 (<i>topiramate</i>)	NP		XCOPRI TABS	NP	
<i>rufinamide SUSP</i>	NP	SP	XCOPRI TBPK	NP	
<i>rufinamide TABS</i>	NP	SP	GABA Modulators		
SPRITAM TB3D	NP		SABRIL PACK (<i>vigabatrin</i>)	NP	SP
TEGRETOL SUSP (<i>carbamazepine</i>)	P		SABRIL TABS (<i>vigabatrin</i>)	NP	SP
TEGRETOL TABS (<i>carbamazepine</i>)	P		<i>tiagabine hcl</i>	P	
TEGRETOL-XR TB12 (<i>carbamazepine</i>)	P		<i>vigabatrin PACK</i>	NP	SP
TOPAMAX SPRINKLE CPSP (<i>topiramate</i>)	P		<i>vigabatrin TABS</i>	NP	SP
TOPAMAX TABS (<i>topiramate</i>)	P		Hydantoins		

Drug Name	Drug Tier	Requirements/Limits
DILANTIN (<i>phenytoin sodium extended</i>)	P	
DILANTIN	P	
DILANTIN INFATABS CHEW (<i>phenytoin</i>)	P	
DILANTIN-125 SUSP (<i>phenytoin</i>)	P	
<i>phenytoin sodium extended 100 MG, 200 MG, 300 MG</i>	P	
<i>phenytoin CHEW</i>	P	
<i>phenytoin SUSP</i>	P	
Succinimides		
CELONTIN (<i>methsuximide</i>)	P	
<i>ethosuximide CAPS</i>	NP	
<i>ethosuximide SOLN</i>	P	
<i>methsuximide</i>	NP	
ZARONTIN CAPS (<i>ethosuximide</i>)	NP	
ZARONTIN SOLN (<i>ethosuximide</i>)	P	
Valproic Acid		
DEPAKOTE ER TB24 (<i>divalproex sodium</i>)	P	
DEPAKOTE SPRINKLES CSDR (<i>divalproex sodium</i>)	P	
DEPAKOTE TBEC (<i>divalproex sodium</i>)	P	
<i>divalproex sodium CSDR</i>	P	
<i>divalproex sodium TB24</i>	P	
<i>divalproex sodium TBEC</i>	P	
<i>valproate sodium SOLN OR 250 MG/5ML</i>	P	
<i>valproic acid CAPS</i>	P	
ANTIDEPRESSANTS - Drugs to Treat Depression		
Alpha-2 Receptor Antagonists (Tetracyclics)		

Drug Name	Drug Tier	Requirements/Limits
<i>mirtazapine TABS</i>	P	AL(At least 6 yrs old)
<i>mirtazapine TBDP</i>	NP	AL(At least 6 yrs old)
REMERON SOLTAB TBDP (<i>mirtazapine</i>)	NP	AL(At least 6 yrs old)
REMERON TABS 15 MG, 30 MG (<i>mirtazapine</i>)	NP	AL(At least 6 yrs old)
Antidepressant Combinations		
AUVELITY	NP	
Antidepressants - Misc.		
APLENZIN	NP	AL(At least 6 yrs old)
<i>bupropion hcl TABS</i>	P	AL(At least 6 yrs old)
<i>bupropion hcl TB12</i>	P	AL(At least 6 yrs old)
<i>bupropion hcl TB24 450 MG</i>	NP	AL(At least 6 yrs old)
<i>bupropion hcl TB24 150 MG, 300 MG</i>	P	AL(At least 6 yrs old)
FORFIVO XL TB24 (<i>bupropion hcl</i>)	NP	AL(At least 6 yrs old)
WELLBUTRIN SR TB12 (<i>bupropion hcl</i>)	NP	AL(At least 6 yrs old)
WELLBUTRIN XL TB24 (<i>bupropion hcl</i>)	NP	AL(At least 6 yrs old)
GABA Receptor Modulator - Neuroactive Steroid		
ZURZUVAE	NP	SP
Monoamine Oxidase Inhibitors (MAOIs)		
EMSAM	NP	AL(At least 6 yrs old)
MARPLAN	P	AL(At least 6 yrs old)
NARDIL (<i>phenelzine sulfate</i>)	NP	AL(At least 6 yrs old)
<i>phenelzine sulfate</i>	P	AL(At least 6 yrs old)
<i>tranylcypromine sulfate</i>	P	AL(At least 6 yrs old)
N-Methyl-D-aspartic acid (NMDA) Receptor Antagonists		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SPRAVATO 56MG DOSE	P	SP	PAXIL SUSP (<i>paroxetine hcl</i>)	NP	AL(At least 6 yrs old - Up to 10 yrs old)
SPRAVATO 84MG DOSE	P	SP	PAXIL TABS (<i>paroxetine hcl</i>)	NP	AL(At least 6 yrs old)
Selective Serotonin Reuptake Inhibitors (SSRIs)			PROZAC CAPS (<i>fluoxetine hcl</i>)	NP	AL(At least 6 yrs old)
CELEXA TABS (<i>citalopram hydrobromide</i>)	NP	AL(At least 6 yrs old)	<i>sertraline hcl CONC</i>	P	AL(At least 6 yrs old - Up to 10 yrs old)
CITALOPRAM HYDROBROMIDE CAPS	NP	AL(At least 6 yrs old)	<i>sertraline hcl TABS</i>	P	AL(At least 6 yrs old)
<i>citalopram hydrobromide SOLN</i>	P	AL(At least 6 yrs old - Up to 10 yrs old)	SERTRALINE HYDROCHLORIDE CAPS	NP	AL(At least 6 yrs old)
<i>citalopram hydrobromide TABS</i>	P	AL(At least 6 yrs old)	ZOLOFT TABS (<i>sertraline hcl</i>)	NP	AL(At least 6 yrs old)
<i>escitalopram oxalate SOLN</i>	NP	AL(At least 6 yrs old - Up to 10 yrs old)	Serotonin Modulators		
<i>escitalopram oxalate TABS</i>	P	AL(At least 6 yrs old)	<i>nefazodone hcl</i>	NP	AL(At least 6 yrs old)
<i>fluoxetine hcl CAPS</i>	P	AL(At least 6 yrs old)	<i>trazodone hcl TABS 300 MG</i>	NP	AL(At least 6 yrs old)
<i>fluoxetine hcl CPDR</i>	NP	AL(At least 6 yrs old)	<i>trazodone hcl TABS 50 MG, 100 MG, 150 MG</i>	P	AL(At least 6 yrs old)
<i>fluoxetine hcl SOLN</i>	P	AL(At least 6 yrs old - Up to 10 yrs old)	TRINTELLIX	NP	AL(At least 6 yrs old)
<i>fluoxetine hcl TABS</i>	NP	AL(At least 6 yrs old)	VIIBRYD TABS (<i>vilazodone hcl</i>)	NP	AL(At least 6 yrs old)
FLUOXETINE HYDROCHLORIDE TABS (<i>fluoxetine hcl</i>)	NP	AL(At least 6 yrs old)	<i>vilazodone hcl TABS</i>	NP	AL(At least 6 yrs old)
<i>fluvoxamine maleate CP24</i>	NP	AL(At least 6 yrs old)	<i>vilazodone hcl TABS</i>	P	AL(At least 6 yrs old)
<i>fluvoxamine maleate TABS</i>	P	AL(At least 6 yrs old)	Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)		
LEXAPRO TABS (<i>escitalopram oxalate</i>)	NP	AL(At least 6 yrs old)	CYMBALTA CPEP (<i>duloxetine hcl</i>)	NP	AL(At least 6 yrs old)
<i>paroxetine hcl SUSP</i>	NP	AL(At least 6 yrs old - Up to 10 yrs old)	DESVENLAFAXINE ER	P	AL(At least 6 yrs old)
<i>paroxetine hcl TABS</i>	P	AL(At least 6 yrs old)	<i>desvenlafaxine succinate</i>	P	AL(At least 6 yrs old)
<i>paroxetine hcl TB24</i>	NP	AL(At least 6 yrs old)	DRIZALMA SPRINKLE CSDR	NP	AL(At least 6 yrs old)
PAXIL CR TB24 (<i>paroxetine hcl</i>)	NP	AL(At least 6 yrs old)	<i>duloxetine hcl CPEP 20 MG, 30 MG, 60 MG</i>	P	AL(At least 6 yrs old)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>duloxetine hcl CPEP 40 MG</i>	NP	AL(At least 6 yrs old)	<i>nortriptyline hcl SOLN</i>	P	AL(At least 6 yrs old)
EFFEXOR XR CP24 (<i>venlafaxine hcl</i>)	NP	AL(At least 6 yrs old)	PAMELOR CAPS (<i>nortriptyline hcl</i>)	NP	AL(At least 6 yrs old)
FETZIMA TITRATION PACK C4PK	NP	AL(At least 6 yrs old)	<i>protriptyline hcl</i>	NP	AL(At least 6 yrs old)
FETZIMA CP24	NP	AL(At least 6 yrs old)	<i>trimipramine maleate CAPS</i>	NP	AL(At least 6 yrs old)
PRISTIQ (<i>desvenlafaxine succinate</i>)	NP	AL(At least 6 yrs old)	ANTIDIABETICS - Drugs to Regulate Blood Sugar		
VENLAFAXINE BESYLATE ER	NP	AL(At least 6 yrs old)	Alpha-Glucosidase Inhibitors		
<i>venlafaxine hcl CP24</i>	NP	AL(At least 6 yrs old)	<i>acarbose</i>	P	
<i>venlafaxine hcl CP24</i>	P	AL(At least 6 yrs old)	<i>miglitol</i>	NP	
<i>venlafaxine hcl TABS</i>	P	AL(At least 6 yrs old)	PRECOSE (<i>acarbose</i>)	NP	
<i>venlafaxine hcl TB24</i>	NP	AL(At least 6 yrs old)	Antidiabetic - Amylin Analogs		
Tricyclic Agents			SYMLINPEN 120 SOPN	NP	PA
<i>amitriptyline hcl TABS</i>	P	AL(At least 6 yrs old)	SYMLINPEN 60 SOPN	NP	PA
<i>amoxapine</i>	NP	AL(At least 6 yrs old)	Antidiabetic Combinations		
ANAFRANIL (<i>clomipramine hcl</i>)	NP	AL(At least 6 yrs old)	ACTOPLUS MET TABS 850 MG-15 MG (<i>pioglitazone hcl-metformin hcl</i>)	NP	
<i>clomipramine hcl</i>	P	AL(At least 6 yrs old)	<i>alogliptin-metformin hcl</i>	NP	PA
<i>desipramine hcl TABS</i>	NP	AL(At least 6 yrs old)	<i>alogliptin-pioglitazone 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG</i>	NP	PA
<i>doxepin hcl CAPS 10 MG, 25 MG, 50 MG, 75 MG, 100 MG</i>	NP	AL(At least 6 yrs old)	<i>dapagliflozin propanediol-metformin hcl</i>	NP	
<i>doxepin hcl CAPS</i>	P	AL(At least 6 yrs old)	DUETACT (<i>pioglitazone hcl-glimepiride</i>)	NP	
<i>doxepin hcl CONC</i>	P	AL(At least 6 yrs old)	<i>glipizide-metformin hcl</i>	P	
<i>imipramine hcl TABS</i>	P	AL(At least 6 yrs old)	<i>glyburide-metformin</i>	P	
<i>imipramine pamoate</i>	NP	AL(At least 6 yrs old)	GLYXAMBI	NP	
<i>nortriptyline hcl CAPS</i>	P	AL(At least 6 yrs old)	INVOKAMET XR TB24	P	
<i>nortriptyline hcl CAPS</i>	NP	AL(At least 6 yrs old)	INVOKAMET TABS	P	
			JANUMET XR TB24	P	PA
			JANUMET TABS	P	PA
			JENTADUETO XR TB24	NP	PA
			JENTADUETO TABS	P	PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
KAZANO (<i>alogliptin-metformin hcl</i>)	NP	PA	BAQSIMI TWO PACK POWD	P	
KOMBIGLYZE XR (<i>saxagliptin-metformin hcl</i>)	NP	PA	CVS GLUCOSE CHEW	P	
OSENI 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG (<i>alogliptin-pioglitazone</i>)	NP	PA	CVS SOFT GLUCOSE CHEW	P	
<i>pioglitazone hcl-glimepiride</i>	NP		DEX4	P	
<i>pioglitazone hcl-metformin hcl TABS</i>	NP		DEX4 FAST ACTING GLUCOSE	P	
QTERN	NP		DEX4 NATURALS	P	
<i>saxagliptin-metformin hcl</i>	NP	PA	DEX4 POUCH PACK	P	
SEGLUROMET	NP		DEX4 QUICK DISSOLVE GLUCOSE CHEW	P	
SOLIQUA 100/33	NP	PA	<i>dextrose (diabetic use) GEL</i>	P	
STEGLUJAN	NP		GLUCAGEN HYPOKIT	P	
SYNJARDY XR TB24	NP		<i>glucagon (rdna)</i>	P	
SYNJARDY TABS	P		GLUCAGON EMERGENCY KIT FOR LOW BLOOD SUGAR	P	
TRIJARDY XR	NP		GLUCO TO GO CHEW	P	
XIGDUO XR	P		GLUCOSE INSTANT ENERGY	P	
XULTOPHY 100/3.6	NP	PA	GLUCOSE CHEW	P	
Biguanides			GNP GLUCOSE CHEW	P	
GLUMETZA TB24 (<i>metformin hcl</i>)	NP		GNP QUICK DISSOLVE GLUCOSE CHEW	P	
<i>metformin hcl SOLN</i>	NP		GOODSENSE GLUCOSE	P	
<i>metformin hcl TABS 625 MG</i>	NP		GVOKE HYPOPEN 1-PACK SOAJ	NP	
<i>metformin hcl TABS 500 MG, 850 MG, 1000 MG</i>	P		GVOKE HYPOPEN 2-PACK SOAJ	NP	
<i>metformin hcl TB24 500 MG, 1000 MG</i>	NP		GVOKE KIT SOLN	NP	
<i>metformin hcl TB24 500 MG, 750 MG</i>	P		GVOKE PFS SOSY 1 MG/0.2ML	NP	
RIOMET SOLN (<i>metformin hcl</i>)	NP		HY-VEE GLUCOSE	P	
Diabetic Other			KROGER GLUCOSE	P	
BAQSIMI ONE PACK POWD	P		LEADER GLUCOSE 6 MG-4 GM	P	
			LEADER QUICK DISSOLVE GLUCOSE CHEW	P	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
LONGS GLUCOSE	P		RYBELSUS TABS	NP	PA
MEIJER GLUCOSE	P		TRULICITY	P	PA
PREFERRED PLUS GLUCOSE	P		VICTOZA	P	PA
PX GLUCOSE	P		Insulin		
RA GLUCOSE	P		ADMELOG SOLOSTAR SOPN	NP	
RELION GLUCOSE	P		ADMELOG SOLN IJ	NP	
SM GLUCOSE	P		AFREZZA POWD 4 UNIT, 8 UNIT, 12 UNIT	NP	
SMART SENSE GLUCOSE	P		APIDRA SOLOSTAR SOPN	P	
SMART SENSE GLUCOSE TABLETS	P		APIDRA SOLN	P	
TGT GLUCOSE	P		BASAGLAR KWIKPEN SOPN	NP	
TRUEPLUS GLUCOSE ON THE GO CHEW	P		BASAGLAR TEMPO PEN SOPN	NP	
TRUEPLUS GLUCOSE CHEW	P		FIASP FLEXTOUCH SOPN	NP	
UP & UP GLUCOSE	P		FIASP PENFILL SOCT	NP	
VALUE PLUS GLUCOSE	P		FIASP PUMPCART SOCT	NP	
WALGREENS GLUCOSE	P		FIASP SOLN	NP	
ZEGALOGUE SOAJ	P		HUMALOG JUNIOR KWIKPEN SOPN	NP	
ZEGALOGUE SOSY	P		HUMALOG KWIKPEN SOPN	NP	
Dipeptidyl Peptidase-4 (DPP-4) Inhibitors			HUMALOG MIX 50/50 KWIKPEN SUPN	P	
<i>alogliptin benzoate</i>	NP	PA	HUMALOG MIX 75/25 KWIKPEN SUPN	NP	
JANUVIA	P	PA	HUMALOG MIX 75/25 SUSP	P	
NESINA (<i>alogliptin benzoate</i>)	NP	PA	HUMALOG TEMPO PEN SOPN	NP	
ONGLYZA (<i>saxagliptin hcl</i>)	NP	PA	HUMALOG SOCT	NP	
<i>saxagliptin hcl</i>	NP	PA	HUMALOG SOLN IJ	NP	
SITAGLIPTIN	NP		HUMULIN 70/30 KWIKPEN SUPN	NP	
TRADJENTA	P	PA	HUMULIN 70/30 SUSP	P	
ZITUVIO	NP		HUMULIN N KWIKPEN SUPN	NP	
Incretin Mimetic Agents					
BYDUREON BCISE AUIJ	NP	PA			
BYETTA SOPN	NP	PA			
MOUNJARO	NP	PA			
OZEMPIC SOPN	P	PA			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
HUMULIN N SUSP	NP		LANTUS SOLOSTAR SOPN	P	
HUMULIN R U-500 (CONCENTRATED) SOLN SC	P		LANTUS SOLN	P	
HUMULIN R U-500 KWIKPEN SOPN SC	P		LEVEMIR FLEXPEN SOPN	P	
HUMULIN R SOLN IJ	P		LEVEMIR FLEXTOUCH SOPN	P	
HUMULIN R SOLN IJ	NP		LEVEMIR SOLN	P	
INSULIN ASPART FLEXPEN SOPN	P		LYUMJEV KWIKPEN SOPN	NP	
INSULIN ASPART PENFILL SOCT	P		LYUMJEV TEMPO PEN SOPN	NP	
INSULIN ASPART PROTAMINE/INSULIN ASPART FLEXPEN SUPN	P		LYUMJEV SOLN	NP	
INSULIN ASPART PROTAMINE/INSULIN ASPART SUSP	P		NOVOLIN 70/30 FLEXPEN RELION SUPN	NP	
INSULIN ASPART SOLN IJ	P		NOVOLIN 70/30 FLEXPEN SUPN	NP	
INSULIN DEGLUDEC FLEXTOUCH SOPN	NP		NOVOLIN 70/30 RELION SUSP	NP	
INSULIN DEGLUDEC SOLN	NP		NOVOLIN 70/30 SUSP	NP	
INSULIN GLARGINE MAX SOLOSTAR SOPN	P		NOVOLIN N FLEXPEN RELION SUPN	NP	
INSULIN GLARGINE SOLOSTAR SOPN	P		NOVOLIN N FLEXPEN SUPN	P	
INSULIN GLARGINE SOLN	P		NOVOLIN N RELION SUSP	NP	
INSULIN GLARGINE-YFGN SOLN	NP		NOVOLIN N SUSP	NP	
INSULIN GLARGINE-YFGN SOPN	NP		NOVOLIN R FLEXPEN RELION SOPN IJ	NP	
INSULIN LISPRO JUNIOR KWIKPEN SOPN	P		NOVOLIN R FLEXPEN SOPN IJ	P	
INSULIN LISPRO KWIKPEN SOPN	P		NOVOLIN R RELION SOLN IJ	NP	
INSULIN LISPRO PROTAMINE/INSULIN LISPRO KWIKPEN SUPN	P		NOVOLIN R SOLN IJ	NP	
INSULIN LISPRO SOLN IJ	P		NOVOLOG FLEXPEN RELION SOPN	NP	
			NOVOLOG FLEXPEN SOPN	NP	
			NOVOLOG MIX 70/30 PREFILLED FLEXPEN RELION SUPN	NP	

Drug Name	Drug Tier	Requirements/Limits
NOVOLOG MIX 70/30 PREFILLED FLEXPEN SUPN	NP	
NOVOLOG MIX 70/30 RELION SUSP	NP	
NOVOLOG MIX 70/30 SUSP	NP	
NOVOLOG PENFILL SOCT	NP	
NOVOLOG RELION SOLN IJ	NP	
NOVOLOG SOLN IJ	NP	
REZVOGLAR KWIKPEN	NP	
SEMGLEE SOLN	NP	
SEMGLEE SOPN	NP	
TOUJEO MAX SOLOSTAR SOPN	P	
TOUJEO SOLOSTAR SOPN	P	
TRESIBA FLEXTOUCH SOPN	NP	
TRESIBA SOLN	NP	
Insulin Sensitizing Agents		
ACTOS (<i>pioglitazone hcl</i>)	NP	
<i>pioglitazone hcl</i>	P	
Meglitinide Analogues		
<i>nateglinide</i>	P	
<i>repaglinide</i>	P	
Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors		
<i>dapagliflozin propanediol</i>	NP	
FARXIGA	P	
FARXIGA	P	
INVOKANA	P	
JARDIANCE	P	
STEGLATRO	NP	
Sulfonylureas		

Drug Name	Drug Tier	Requirements/Limits
<i>glimepiride</i>	P	
<i>glipizide TABS 5 MG, 10 MG</i>	P	
<i>glipizide TB24</i>	P	
<i>glyburide micronized 1.5 MG, 3 MG, 6 MG</i>	P	
<i>glyburide TABS</i>	P	
ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea		
Antidiarrheal/Probiotic Agents - Misc.		
<i>bismuth subsalicylate CHEW 262 MG</i>	P	
<i>bismuth subsalicylate SUSP 525 MG/30ML</i>	P	
<i>bismuth subsalicylate TABS</i>	P	
Antidiarrheal/Probiotic Combinations		
<i>loperamide-simethicone TABS</i>	P	
Antiperistaltic Agents		
<i>diphenoxylate w/ atropine LIQD</i>	P	
<i>diphenoxylate w/ atropine TABS</i>	P	
<i>loperamide hcl CAPS</i>	P	RX/OTC
<i>loperamide hcl TABS</i>	P	
ANTIDOTES AND SPECIFIC ANTAGONISTS		
Antidotes - Chelating Agents		
CHEMET	P	
Antidotes and Specific Antagonists		
VISTOGARD	NP	
Opioid Antagonists		
KLOXXADO LIQD	P	
<i>naloxone hcl LIQD</i>	P	RX/OTC
<i>naloxone hcl SOCT</i>	P	

Drug Name	Drug Tier	Requirements/Limits
<i>naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML</i>	P	
<i>naloxone hcl SOSY</i>	P	
<i>naltrexone hcl</i>	P	
NARCAN LIQD (<i>naloxone hcl</i>)	P	RX/OTC
OPVEE NA	P	
REXTOVY LIQD	NP	
VIVITROL	P	SP
ZIMHI SOSY	NP	
ANTIEMETICS - Drugs to Treat Nausea and Vomiting		
5-HT3 Receptor Antagonists		
ANZEMET TABS 50 MG	NP	
<i>granisetron hcl SOLN IV 1 MG/ML, 4 MG/4ML</i>	P	
<i>granisetron hcl TABS</i>	NP	
<i>ondansetron hcl SOLN OR 4 MG/5ML</i>	P	
<i>ondansetron hcl SOLN IJ</i>	P	
<i>ondansetron hcl SOSY</i>	P	
<i>ondansetron hcl TABS 4 MG, 8 MG</i>	P	
<i>ondansetron TBDP</i>	P	
SANCUSO PTCH	NP	
Antiemetics - Anticholinergic		
<i>dimenhydrinate TABS</i>	P	
DRAMAMINE CHEW	P	
<i>meclizine hcl CHEW</i>	P	RX/OTC
<i>meclizine hcl TABS 12.5 MG, 25 MG</i>	P	RX/OTC
<i>meclizine hcl TABS 12.5 MG, 25 MG</i>	NP	RX/OTC
<i>meclizine hcl TABS 12.5 MG, 25 MG</i>	P	RX/OTC
<i>scopolamine</i>	NP	
TRANSDERM-SCOP (<i>scopolamine</i>)	P	

Drug Name	Drug Tier	Requirements/Limits
<i>trimethobenzamide hcl CAPS</i>	NP	
Antiemetics - Miscellaneous		
AKYNZEO	NP	
AKYNZEO SOLN	NP	
BONJESTA TBCR	NP	PA
DICLEGIS TBEC (<i>doxylamine-pyridoxine</i>)	P	
<i>doxylamine-pyridoxine TBEC</i>	NP	
<i>dronabinol CAPS</i>	NP	PA
<i>fructose-dextrose-phosphoric acid SOLN</i>	P	
Substance P/Neurokinin 1 (NK1) Receptor Antagonists		
<i>aprepitant CAPS</i>	NP	
<i>aprepitant MISC</i>	NP	
CINVANTI EMUL	P	
EMEND TRIPACK CAPS (<i>aprepitant</i>)	NP	
EMEND CAPS 80 MG (<i>aprepitant</i>)	NP	
EMEND SUSR	NP	
ANTIFUNGALS - Drugs to Treat Fungal Infections		
Antifungal - Glucan Synthesis Inhibitors		
BREXAFEMME	NP	
Antifungals		
ANCOBON (<i>flucytosine</i>)	NP	
<i>flucytosine</i>	NP	
<i>griseofulvin microsize SUSP</i>	P	
<i>griseofulvin microsize TABS</i>	NP	
<i>griseofulvin ultramicrosize</i>	NP	
<i>nystatin TABS</i>	P	
<i>terbinafine hcl TABS</i>	P	
Imidazole-Related Antifungals		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CRESEMBA CAPS	NP		<i>diphenhydramine hcl CAPS</i>	P	
DIFLUCAN SUSR (<i>fluconazole</i>)	NP		<i>diphenhydramine hcl CHEW 12.5 MG</i>	P	
DIFLUCAN TABS 100 MG, 200 MG (<i>fluconazole</i>)	NP		<i>diphenhydramine hcl ELIX 12.5 MG/5ML</i>	P	
<i>fluconazole in nacl 0.9 %-200 MG/100ML, 0.9 %-400 MG/200ML</i>	P		<i>diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML</i>	P	
<i>fluconazole SUSR</i>	P		<i>diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML</i>	NP	
<i>fluconazole TABS</i>	P		<i>diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML</i>	P	
<i>itraconazole CAPS</i>	NP		<i>diphenhydramine hcl SOLN 50 MG/ML</i>	P	
<i>itraconazole SOLN</i>	NP		<i>diphenhydramine hcl TABS 25 MG</i>	P	
<i>ketoconazole</i>	NP		<i>diphenhydramine hcl TABS 25 MG</i>	P	
NOXAFIL PACK	NP		<i>diphenhydramine hcl TABS 25 MG</i>	NP	
NOXAFIL SUSP (<i>posaconazole</i>)	NP		<i>diphenhydramine hcl TABS 25 MG</i>	NP	
NOXAFIL TBEC (<i>posaconazole</i>)	NP		Antihistamines - Non-Sedating		
<i>posaconazole SUSP</i>	NP		<i>cetirizine hcl CAPS</i>	NP	
<i>posaconazole TBEC</i>	NP		<i>cetirizine hcl CHEW</i>	NP	
SPORANOX CAPS (<i>itraconazole</i>)	NP		<i>cetirizine hcl SOLN OR</i>	P	RX/OTC
SPORANOX SOLN (<i>itraconazole</i>)	NP		<i>cetirizine hcl TABS</i>	P	
TOLSURA CAPS	NP		CLARINEX TABS (<i>desloratadine</i>)	NP	
VFEND SUSR (<i>voriconazole</i>)	NP		<i>desloratadine TABS</i>	NP	
VFEND TABS (<i>voriconazole</i>)	NP		<i>desloratadine TBDP</i>	NP	
VIVJOA	NP		<i>fexofenadine hcl SUSP</i>	NP	
<i>voriconazole SUSR</i>	NP		<i>fexofenadine hcl TABS 60 MG, 180 MG</i>	P	
<i>voriconazole TABS</i>	NP		<i>fexofenadine hcl TABS 60 MG, 180 MG</i>	NP	
ANTIHISTAMINES - Drugs to Treat Allergies			<i>levocetirizine dihydrochloride SOLN</i>	NP	RX/OTC
Antihistamines - Alkylamines			<i>levocetirizine dihydrochloride TABS</i>	NP	RX/OTC
<i>chlorpheniramine maleate SYRP</i>	P				
<i>chlorpheniramine maleate TABS</i>	P				
Antihistamines - Ethanolamines					

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>loratadine CHEW</i>	NP		<i>cholestyramine light PACK</i>	P	
<i>loratadine CHEW</i>	P		<i>cholestyramine light POWD</i>	P	
<i>loratadine SOLN</i>	P		<i>cholestyramine PACK</i>	P	
<i>loratadine TABS</i>	P		<i>cholestyramine POWD</i>	P	
<i>loratadine TBDP 10 MG</i>	P		<i>colesevelam hcl PACK</i>	NP	
<i>loratadine TBDP 10 MG</i>	NP		<i>colesevelam hcl TABS</i>	P	
Antihistamines - Phenothiazines			COLESTID GRAN (<i>colestipol hcl</i>)	NP	
<i>promethazine hcl SOLN OR 6.25 MG/5ML</i>	P		COLESTID PACK (<i>colestipol hcl</i>)	NP	
<i>promethazine hcl SUPP</i>	P		COLESTID TABS (<i>colestipol hcl</i>)	NP	
<i>promethazine hcl TABS</i>	P		<i>colestipol hcl GRAN</i>	P	
Antihistamines - Piperidines			<i>colestipol hcl PACK</i>	P	
<i>cyproheptadine hcl SYRP</i>	P		<i>colestipol hcl TABS</i>	P	
<i>cyproheptadine hcl TABS</i>	P		QUESTRAN LIGHT POWD (<i>cholestyramine light</i>)	NP	
ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol			QUESTRAN PACK (<i>cholestyramine</i>)	NP	
Adenosine Triphosphate-Citrate Lyase (ACL) Inhibitors			QUESTRAN POWD (<i>cholestyramine</i>)	NP	
NEXLETOL	NP		WELCHOL TABS (<i>colesevelam hcl</i>)	NP	
Angiotensin-like Protein Inhibitors			Fibric Acid Derivatives		
EVKEEZA	NP	SP	<i>choline fenofibrate</i>	P	
Antihyperlipidemics - Combinations			<i>fenofibrate micronized</i>	P	
<i>ezetimibe-simvastatin</i>	NP		<i>fenofibrate CAPS</i>	P	
NEXLIZET	NP		<i>fenofibrate TABS</i>	P	
VYTORIN (<i>ezetimibe-simvastatin</i>)	NP		<i>fenofibric acid</i>	P	
Antihyperlipidemics - Misc.			FENOGLIDE TABS (<i>fenofibrate</i>)	NP	
<i>icosapent ethyl</i>	NP		FIBRICOR (<i>fenofibric acid</i>)	NP	
LOVAZA (<i>omega-3-acid ethyl esters</i>)	NP		<i>gemfibrozil TABS</i>	P	
<i>omega-3-acid ethyl esters</i>	P		LIPOFEN CAPS (<i>fenofibrate</i>)	NP	
VASCEPA (<i>icosapent ethyl</i>)	NP		LOPID TABS (<i>gemfibrozil</i>)	NP	
Bile Acid Sequestrants					

Drug Name	Drug Tier	Requirements/Limits
TRICOR TABS (fenofibrate)	NP	
TRILIPIX (choline fenofibrate)	NP	
HMG CoA Reductase Inhibitors		
ALTOPREV TB24 20 MG, 40 MG, 60 MG	NP	QL(1 ea daily)
ATORVALIQ SUSP	NP	
atorvastatin calcium TABS	P	QL(1 ea daily)
atorvastatin calcium TABS	NP	QL(1 ea daily)
CRESTOR TABS (rosuvastatin calcium)	NP	QL(1 ea daily)
EZALLOR SPRINKLE CPSP	NP	QL(1 ea daily)
FLOLIPID SUSP	NP	
fluvastatin sodium CAPS	NP	QL(1 ea daily)
fluvastatin sodium TB24	NP	QL(1 ea daily)
LESCOL XL TB24 (fluvastatin sodium)	NP	QL(1 ea daily)
LIPITOR TABS (atorvastatin calcium)	NP	QL(1 ea daily)
LIVALO (pitavastatin calcium)	NP	QL(1 ea daily)
lovastatin TABS	P	QL(1 ea daily)
pitavastatin calcium	NP	QL(1 ea daily)
pravastatin sodium 20 MG, 40 MG, 80 MG	NP	QL(1 ea daily)
pravastatin sodium	P	QL(1 ea daily)
rosuvastatin calcium TABS	P	QL(1 ea daily)
simvastatin TABS	P	QL(1 ea daily)
ZOCOR TABS 10 MG, 20 MG, 40 MG (simvastatin)	NP	QL(1 ea daily)
ZYPITAMAG 2 MG, 4 MG	NP	QL(1 ea daily)
Intestinal Cholesterol Absorption Inhibitors		
ezetimibe	P	
ZETIA (ezetimibe)	NP	
Microsomal Triglyceride Transfer Protein (MTP) Inhibitors		

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

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
QBRELIS SOLN	NP	QL(40 ml daily)	MINIPRESS CAPS 2 MG, 5 MG (<i>prazosin hcl</i>)	NP	
<i>quinapril hcl</i>	P	QL(1 ea daily)	NEXICLON XR TB24 (<i>clonidine hcl</i>)	P	
<i>ramipril CAPS</i>	P	QL(1 ea daily)	<i>prazosin hcl CAPS</i>	P	
<i>trandolapril</i>	P	QL(1 ea daily)	<i>terazosin hcl</i>	P	
VASOTEC TABS (<i>enalapril maleate</i>)	NP	QL(1 ea daily)	Antihypertensive Combinations		
ZESTRIL TABS (<i>lisinopril</i>)	NP	QL(1 ea daily)	ACCURETIC (<i>quinapril-hydrochlorothiazide</i>)	NP	QL(1 ea daily)
Agents for Pheochromocytoma			<i>amlodipine besylate-benazepril hcl</i>	P	QL(1 ea daily)
<i>metirosine</i>	P	SP	<i>amlodipine besylate-olmesartan medoxomil</i>	P	QL(1 ea daily)
Angiotensin II Receptor Antagonists			<i>amlodipine besylate-valsartan</i>	P	QL(1 ea daily)
ATACAND (<i>candesartan cilexetil</i>)	NP	QL(1 ea daily)	<i>amlodipine-valsartan-hydrochlorothiazide</i>	P	QL(1 ea daily)
AVAPRO (<i>irbesartan</i>)	NP	QL(1 ea daily)	ATACAND HCT (<i>candesartan cilexetil-hydrochlorothiazide</i>)	NP	QL(1 ea daily)
BENICAR 40 MG (<i>olmesartan medoxomil</i>)	NP	QL(1 ea daily)	<i>atenolol & chlorthalidone</i>	P	
<i>candesartan cilexetil</i>	NP	QL(1 ea daily)	AVALIDE (<i>irbesartan-hydrochlorothiazide</i>)	NP	QL(1 ea daily)
COZAAR (<i>losartan potassium</i>)	NP	QL(1 ea daily)	AZOR 10 MG-20 MG, 10 MG-40 MG, 5 MG-20 MG (<i>amlodipine besylate-olmesartan medoxomil</i>)	NP	QL(1 ea daily)
DIOVAN TABS (<i>valsartan</i>)	NP	QL(1 ea daily)	<i>benazepril & hydrochlorothiazide</i>	P	QL(1 ea daily)
EDARBI	NP	QL(1 ea daily)	BENICAR HCT 12.5 MG-20 MG, 12.5 MG-40 MG (<i>olmesartan medoxomil-hydrochlorothiazide</i>)	NP	QL(1 ea daily)
<i>irbesartan</i>	P	QL(1 ea daily)	<i>bisoprolol & hydrochlorothiazide</i>	P	
<i>losartan potassium</i>	P	QL(1 ea daily)	<i>candesartan cilexetil-hydrochlorothiazide</i>	NP	QL(1 ea daily)
MICARDIS (<i>telmisartan</i>)	NP	QL(1 ea daily)	<i>captopril & hydrochlorothiazide</i>	NP	QL(1 ea daily)
<i>olmesartan medoxomil</i>	P	QL(1 ea daily)	DIOVAN HCT (<i>valsartan-hydrochlorothiazide</i>)	NP	QL(1 ea daily)
<i>telmisartan</i>	NP	QL(1 ea daily)			
<i>valsartan SOLN</i>	P				
<i>valsartan TABS</i>	P	QL(1 ea daily)			
Antiadrenergic Antihypertensives					
CARDURA (<i>doxazosin mesylate</i>)	NP				
<i>clonidine</i>	NP				
<i>clonidine</i>	P				
<i>clonidine hcl TABS</i>	P				
<i>clonidine hcl TB24</i>	P				
<i>doxazosin mesylate</i>	P				
<i>guanfacine hcl</i>	P				
<i>methyl dopa TABS</i>	P				

Drug Name	Drug Tier	Requirements/Limits
EDARBYCLOR 25 MG-40 MG	NP	QL(1 ea daily)
EDARBYCLOR 12.5 MG-40 MG	NP	
<i>enalapril maleate & hydrochlorothiazide</i>	P	QL(1 ea daily)
EXFORGE (<i>amlodipine besylate-valsartan</i>)	NP	QL(1 ea daily)
EXFORGE HCT (<i>amlodipine-valsartan-hydrochlorothiazide</i>)	NP	QL(1 ea daily)
<i>fosinopril sodium & hydrochlorothiazide</i>	NP	QL(1 ea daily)
HYZAAR (<i>losartan potassium & hydrochlorothiazide</i>)	NP	QL(1 ea daily)
<i>irbesartan-hydrochlorothiazide</i>	P	QL(1 ea daily)
<i>lisinopril & hydrochlorothiazide</i>	P	QL(1 ea daily)
<i>losartan potassium & hydrochlorothiazide</i>	P	QL(1 ea daily)
LOTENSIN HCT 12.5 MG-10 MG, 12.5 MG-20 MG, 25 MG-20 MG (<i>benazepril & hydrochlorothiazide</i>)	NP	QL(1 ea daily)
LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (<i>amlodipine besylate-benazepril hcl</i>)	NP	QL(1 ea daily)
<i>metoprolol & hydrochlorothiazide TABS</i>	NP	
MICARDIS HCT (<i>telmisartan-hydrochlorothiazide</i>)	NP	QL(1 ea daily)
<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>	P	QL(1 ea daily)
<i>olmesartan medoxomil-hydrochlorothiazide</i>	P	QL(1 ea daily)
<i>quinapril-hydrochlorothiazide</i>	P	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
TEKTURN HCT 12.5 MG-300 MG, 25 MG-300 MG	NP	QL(1 ea daily)
<i>telmisartan-amlodipine</i>	NP	
<i>telmisartan-hydrochlorothiazide</i>	NP	QL(1 ea daily)
TENORETIC 100 (<i>atenolol & chlorthalidone</i>)	NP	
TENORETIC 50 (<i>atenolol & chlorthalidone</i>)	NP	
<i>trandolapril-verapamil hcl</i>	NP	QL(1 ea daily)
TRIBENZOR 12.5 MG-5 MG-20 MG, 12.5 MG-5 MG-40 MG, 25 MG-5 MG-40 MG (<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>)	NP	QL(1 ea daily)
<i>valsartan-hydrochlorothiazide</i>	P	QL(1 ea daily)
VASERETIC 25 MG-10 MG (<i>enalapril maleate & hydrochlorothiazide</i>)	NP	QL(1 ea daily)
ZESTORETIC (<i>lisinopril & hydrochlorothiazide</i>)	NP	QL(1 ea daily)
ZIAC (<i>bisoprolol & hydrochlorothiazide</i>)	NP	
Direct Renin Inhibitors		
<i>aliskiren fumarate</i>	NP	QL(1 ea daily)
TEKTURN (<i>aliskiren fumarate</i>)	NP	QL(1 ea daily)
Vasodilators		
<i>hydralazine hcl TABS</i>	P	
<i>minoxidil 2.5 MG, 10 MG</i>	P	
ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections		
Anti-infective Agents - Misc.		
AEMCOLO	NP	
FLAGYL CAPS (<i>metronidazole</i>)	NP	
LIKMEZ SUSP	NP	

Drug Name	Drug Tier	Requirements/Limits
<i>metronidazole CAPS</i>	NP	
<i>metronidazole TABS</i>	P	
<i>pentamidine isethionate IN</i>	P	
<i>tinidazole 500 MG</i>	P	
<i>trimethoprim TABS</i>	P	
XIFAXAN 200 MG	P	
XIFAXAN 550 MG	NP	
Anti-infective Misc. - Combinations		
<i>sulfamethoxazole-trimethoprim SUSP</i>	P	
<i>sulfamethoxazole-trimethoprim TABS</i>	P	
Antiprotozoal Agents		
<i>atovaquone</i>	P	
Carbapenems		
<i>imipenem-cilastatin IV</i>	P	
<i>meropenem</i>	P	
Glycopeptides		
FIRVANQ SOLR OR (<i>vancomycin hcl</i>)	P	
VANCOCIN CAPS 250 MG (<i>vancomycin hcl</i>)	NP	
VANCOCIN CAPS 125 MG (<i>vancomycin hcl</i>)	NP	AL(Up to 10 yrs old)
<i>vancomycin hcl CAPS 125 MG</i>	P	AL(Up to 10 yrs old)
<i>vancomycin hcl CAPS 250 MG</i>	P	
<i>vancomycin hcl SOLR OR 25 MG/ML, 50 MG/ML, 250 MG/5ML</i>	NP	
<i>vancomycin hcl SOLR IV 500 MG</i>	P	
VANCOMYCIN HYDROCHLORIDE/DEXTROSE 500 MG/100ML-5 %	P	

Drug Name	Drug Tier	Requirements/Limits
VANCOMYCIN HYDROCHLORIDE SOLR IV 500 MG	P	
Leprostatics		
<i>dapsone</i>	P	
Lincosamides		
CLEOCIN (<i>clindamycin hcl</i>)	NP	
CLEOCIN PEDIATRIC GRANULES (<i>clindamycin palmitate hydrochloride</i>)	NP	AL(Up to 9 yrs old)
<i>clindamycin hcl</i>	P	
<i>clindamycin palmitate hydrochloride</i>	P	AL(Up to 9 yrs old)
Monobactams		
CAYSTON	NP	SP
Oxazolidinones		
<i>linezolid SUSR</i>	NP	AL(Up to 10 yrs old); PA
<i>linezolid TABS</i>	NP	PA
SIVEXTRO TABS	NP	
ZYVOX SUSR (<i>linezolid</i>)	NP	AL(Up to 10 yrs old); PA
ZYVOX TABS (<i>linezolid</i>)	NP	PA
Urinary Anti-infectives		
<i>fosfomycin tromethamine</i>	NP	
MACROBID (<i>nitrofurantoin monohydrate macro</i>)	NP	
MACRODANTIN (<i>nitrofurantoin macrocrystal</i>)	NP	
<i>methenamine hippurate</i>	P	
<i>methenamine mandelate 0.5 GM, 1 GM</i>	P	
<i>nitrofurantoin</i>	NP	
NITROFURANTOIN	NP	
<i>nitrofurantoin macrocrystal 25 MG</i>	P	

Drug Name	Drug Tier	Requirements/Limits
<i>nitrofurantoin macrocrystal 50 MG, 100 MG</i>	NP	
<i>nitrofurantoin monohyd macro</i>	P	
ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)		
Antimalarial Combinations		
<i>atovaquone-proguanil hcl</i>	P	
Antimalarials		
<i>chloroquine phosphate TABS</i>	P	
<i>hydroxychloroquine sulfate 200 MG</i>	P	
<i>mefloquine hcl</i>	P	
<i>primaquine phosphate TABS</i>	P	
<i>pyrimethamine</i>	P	SP
<i>quinine sulfate CAPS 324 MG</i>	P	
SOVUNA 200 MG	P	
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
Antimyasthenic/Cholinergic Agents		
<i>pyridostigmine bromide SOLN OR</i>	P	
<i>pyridostigmine bromide TABS 60 MG</i>	P	
<i>pyridostigmine bromide TBCR</i>	P	
ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)		
Antimycobacterial Agents		
<i>cycloserine</i>	P	
<i>ethambutol hcl TABS</i>	P	
<i>isoniazid SYRP</i>	P	
<i>isoniazid TABS</i>	P	
PRIFTIN	P	

Drug Name	Drug Tier	Requirements/Limits
<i>pyrazinamide</i>	P	
<i>rifabutin</i>	P	
<i>rifampin CAPS</i>	P	
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer		
Alkylating Agents		
BELRAPZO SOLN	P	SP
<i>bendamustine hcl SOLR</i>	NP	SP
<i>bendamustine hcl SOLR</i>	P	SP
BENDAMUSTINE HYDROCHLORIDE SOLN	P	SP
BENDEKA SOLN	P	SP
BICNU (<i>carmustine</i>)	P	
<i>busulfan SOLN</i>	NP	
<i>busulfan SOLN</i>	P	
BUSULFEX SOLN (<i>busulfan</i>)	P	
<i>carboplatin SOLN 50 MG/5ML, 450 MG/45ML</i>	NP	SP
<i>carboplatin SOLN 50 MG/5ML, 150 MG/15ML, 450 MG/45ML, 600 MG/60ML, 1000 MG/100ML</i>	P	SP
<i>carmustine</i>	P	
CARMUSTINE	P	
<i>cisplatin SOLN 50 MG/50ML, 100 MG/100ML, 200 MG/200ML</i>	P	SP
CISPLATIN SOLR	P	SP
CYCLOPHOSPHAMIDE MONOHYDRATE SOLN	P	SP
<i>cyclophosphamide CAPS</i>	P	
CYCLOPHOSPHAMIDE SOLN	P	SP
CYCLOPHOSPHAMIDE SOLN	P	SP
<i>cyclophosphamide SOLR IJ</i>	P	SP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CYCLOPHOSPHAMIDE TABS	P		CLOLAR (<i>clofarabine</i>)	P	
EVOMELA IV	NP	SP	<i>cytarabine SOLN</i>	P	SP
GLIADEL WAFER	P		DACOGEN (<i>decitabine</i>)	P	SP
IFEX SOLR (<i>ifosfamide</i>)	P		<i>decitabine</i>	P	SP
IFEX SOLR	P		<i>fludarabine phosphate SOLN</i>	P	SP
<i>ifosfamide SOLN</i>	P		<i>fludarabine phosphate SOLR</i>	P	SP
<i>ifosfamide SOLR</i>	P		<i>fluorouracil</i>	P	
IFOSFAMIDE SOLR	P		<i>fluorouracil 500 MG/10ML</i>	NP	
LEUKERAN	P		FOLOTYN	P	SP
<i>melphalan hcl IV</i>	NP	SP	<i>gemcitabine hcl SOLN</i>	P	
<i>melphalan hcl IV</i>	P		<i>gemcitabine hcl SOLR</i>	P	
MYLERAN TABS	NP		GEMCITABINE HYDROCHLORIDE SOLN	P	
<i>oxaliplatin SOLN 50 MG/10ML, 100 MG/20ML</i>	NP		GEMCITABINE HYDROCHLORIDE SOLN	P	
<i>oxaliplatin SOLN 50 MG/10ML, 100 MG/20ML</i>	P		GEMCITABINE HYDROCHLORIDE SOLN (<i>gemcitabine hcl</i>)	P	
<i>oxaliplatin SOLR</i>	P		INFUGEM	P	
TEMODAR SOLR	NP	SP	JYLAMVO SOLN	P	SP
<i>temozolomide CAPS</i>	P	SP	<i>mercaptopurine TABS</i>	P	
TEPADINA (<i>thiotepa</i>)	P	SP	<i>methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML</i>	P	
<i>thiotepa</i>	P	SP	<i>methotrexate sodium SOLR</i>	P	
TREANDA SOLR (<i>bendamustine hcl</i>)	P	SP	<i>methotrexate sodium TABS 2.5 MG</i>	P	
VIVIMUSTA SOLN	P	SP	<i>nelarabine</i>	P	
YONDELIS	P	SP	ONUREG TABS	P	SP
ZANOSAR	P		PEMETREXED	P	SP
ZEPZELCA	P	SP	<i>pemetrexed disodium SOLR</i>	P	SP
Antimetabolites			PEMETREXED SOLN	P	SP
ALIMTA SOLR (<i>pemetrexed disodium</i>)	P	SP	PEMETREXED SOLN	P	SP
ARRANON (<i>nelarabine</i>)	P		PEMFEXY	P	SP
<i>azacitidine SUSR</i>	NP	SP	PEMRYDI RTU SOLN	P	SP
<i>azacitidine SUSR</i>	P	SP			
<i>capecitabine</i>	NP	SP			
<i>capecitabine</i>	P	SP			
<i>cladribine 10 MG/10ML</i>	P	SP			
<i>clofarabine</i>	P				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>pralatrexate</i>	P	SP	COLUMVI	P	SP
PURIXAN SUSP	P		DANYELZA	NP	
TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	P		DARZALEX	P	SP
VIDAZA SUSR (<i>azacitidine</i>)	P	SP	ELAHERE	P	SP
XATMEP SOLN	P		ELREXFIO	P	SP
XELODA (<i>capecitabine</i>)	NP	SP; ST	EMPLICITI	P	SP
Antineoplastic - Angiogenesis Inhibitors			ENHERTU	P	SP
ALYMSYS	P	SP	EPKINLY	P	SP
AVASTIN	P	SP	GAZYVA	P	SP
CYRAMZA	P	SP	IMDELLTRA	P	
FRUZAQLA	P	SP	IMFINZI	P	SP
INLYTA	NP	SP	JEMPERLI	P	SP
LENVIMA 10 MG DAILY DOSE	P	SP	KADCYLA	P	SP
LENVIMA 12MG DAILY DOSE	P	SP	KEYTRUDA	P	SP
LENVIMA 14 MG DAILY DOSE	P	SP	KIMMTRAK	NP	SP
LENVIMA 18 MG DAILY DOSE	P	SP	LIBTAYO	P	SP
LENVIMA 20 MG DAILY DOSE	P	SP	LOQTORZI	P	SP
LENVIMA 24 MG DAILY DOSE	P	SP	LUMOXITI	P	SP
LENVIMA 4 MG DAILY DOSE	P	SP	LUNSUMIO	P	SP
LENVIMA 8 MG DAILY DOSE	P	SP	MONJUVI	P	SP
MVASI	P	SP	MYLOTARG	P	SP
VEGZELMA	P	SP	OPDIVO	P	SP
ZALTRAP	P	SP	PADCEV	P	SP
ZIRABEV	P	SP	POLIVY	P	SP
Antineoplastic - Antibodies			POTELIGEO	P	SP
ADCETRIS	P	SP	RIABNI	P	SP
BAVENCIO	P	SP	RITUXAN	P	SP
BESPOLSA	P	SP	RUXIENCE	P	SP
BLINCYTO	P	SP	RYBREVANT	P	SP
			SARCLISA	P	SP
			TALVEY	P	SP
			TECENTRIQ	P	SP
			TIVDAK	P	SP
			TRUXIMA	P	SP
			UNITUXIN	P	SP
			YERVOY	P	SP
			ZEVALIN Y-90	P	SP

Drug Name	Drug Tier	Requirements/Limits
ZYNLONTA	NP	SP
ZYNYZ	P	SP
Antineoplastic - Anti-HER2 Agents		
HERCEPTIN 150 MG	P	SP
HERZUMA	P	SP
KANJINTI	P	SP
MARGENZA	NP	SP
OGIVRI	P	SP
ONTRUZANT	NP	
ONTRUZANT	NP	SP
PERJETA	P	SP
TRAZIMERA	P	SP
TUKYSA	P	SP
Antineoplastic - BCL-2 Inhibitors		
VENCLEXTA STARTING PACK TBPB	P	SP
VENCLEXTA TABS	P	SP
Antineoplastic - Cellular Immunotherapy		
CARVYKTI	P	SP
PROVENGE	P	SP
Antineoplastic - EGFR Inhibitors		
ERBITUX	P	SP
<i>erlotinib hcl</i>	P	SP
<i>erlotinib hcl</i>	NP	SP
EXKIVITY	P	SP
<i>gefitinib</i>	P	SP
GILOTRIF	NP	SP
IRESSA (<i>gefitinib</i>)	NP	SP; ST
PORTRAZZA	P	SP
TAGRISSE	P	SP
TARCEVA (<i>erlotinib hcl</i>)	NP	SP; ST
VECTIBIX 100 MG/5ML, 400 MG/20ML	P	SP
VIZIMPRO	P	SP
Antineoplastic - Gene Therapy Agents		

Drug Name	Drug Tier	Requirements/Limits
ADSTILADRIN	P	SP
Antineoplastic - Hedgehog Pathway Inhibitors		
DAURISMO	P	SP
ERIVEDGE	P	SP
ODOMZO	P	SP
Antineoplastic - Hormonal and Related Agents		
<i>abiraterone acetate</i>	P	SP
AKEEGA	P	SP
<i>anastrozole</i>	P	GL
ARIMIDEX (<i>anastrozole</i>)	P	ST; GL
AROMASIN (<i>exemestane</i>)	P	ST; GL
<i>bicalutamide</i>	P	
CAMCEVI	P	SP
CASODEX (<i>bicalutamide</i>)	NP	ST
ELIGARD SC	P	SP
ELIGARD KIT SC 22.5 MG	NP	SP
EMCYT	P	SP
ERLEADA	P	SP
<i>exemestane</i>	P	GL
FARESTON (<i>toremifene citrate</i>)	P	
FASLODEX SOSY (<i>fulvestrant</i>)	P	
FEMARA (<i>letrozole</i>)	P	ST; GL
FIRMAGON	P	SP
<i>flutamide</i>	P	
<i>fulvestrant SOSY</i>	P	
<i>fulvestrant SOSY</i>	NP	
<i>hydroxyprogesterone caproate (antineoplastic)</i>	NP	SP
<i>letrozole</i>	P	GL
LEUPROLIDE ACETATE INJ	P	
<i>leuprolide acetate KIT IJ 1 MG/0.2ML</i>	P	SP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
LUPRON DEPOT (1-MONTH) KIT IM	P	SP	XPOVIO 60 MG TWICE WEEKLY	P	SP
LUPRON DEPOT (3-MONTH) KIT IM	P	SP	XPOVIO 80 MG TWICE WEEKLY	P	SP
LUPRON DEPOT (4-MONTH) IM	P	SP	Antineoplastic Antibiotics		
LUPRON DEPOT (6-MONTH) IM	P	SP	<i>bleomycin sulfate</i>	P	
LYSODREN	P	SP	COSMEGEN (<i>dactinomycin</i>)	P	
<i>megestrol acetate TABS 40 MG</i>	NP		<i>dactinomycin</i>	P	
<i>megestrol acetate TABS</i>	P		<i>daunorubicin hcl SOLN</i>	P	SP
<i>nilutamide</i>	P		DAUNORUBICIN HYDROCHLORIDE SOLN	P	SP
NUBEQA	P	SP	DAUNORUBICIN HYDROCHLORIDE SOLN (<i>daunorubicin hcl</i>)	P	SP
ORGOVYX	NP	SP	DOXIL (<i>doxorubicin hcl liposomal</i>)	P	
ORSERDU	P	SP	<i>doxorubicin hcl liposomal</i>	NP	
SOLTAMOX SOLN	P		<i>doxorubicin hcl liposomal</i>	P	
<i>tamoxifen citrate TABS</i>	P		<i>doxorubicin hcl SOLN</i>	P	
<i>toremifene citrate</i>	P		<i>doxorubicin hcl SOLR 10 MG, 50 MG</i>	P	
TRELSTAR MIXJECT	NP	SP	ELLENCE SOLN	P	SP
XTANDI CAPS	P	SP	IDAMYCIN PFS (<i>idarubicin hcl</i>)	P	
XTANDI TABS	P	SP	<i>idarubicin hcl</i>	P	
YONSA	P	SP	JELMYTO SOLR UL	NP	
ZYTIGA (<i>abiraterone acetate</i>)	NP	SP; ST	<i>mitomycin SOLR IV</i>	P	
Antineoplastic - Hypoxia-Inducible Factor Inhibitors			<i>mitomycin SOLR IV 5 MG</i>	NP	
WELIREG	P	SP	<i>mitoxantrone hcl 2 MG/ML</i>	P	SP
Antineoplastic - Immunomodulators			<i>valrubicin</i>	P	SP
POMALYST	P	SP	VALSTAR (<i>valrubicin</i>)	P	SP
Antineoplastic - PDGFR-alpha Inhibitors			Antineoplastic Combinations		
AYVAKIT 25 MG, 50 MG	P	SP	DARZALEX FASPRO	P	SP
AYVAKIT 100 MG, 200 MG, 300 MG	NP	SP	HERCEPTIN HYLECTA	P	SP
Antineoplastic - XPO1 Inhibitors			INQOVI	P	SP
XPOVIO	P	SP	KISQALI FEMARA 200 DOSE	P	SP

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
KISQALI FEMARA 400 DOSE	P	SP	FOTIVDA	NP	SP
KISQALI FEMARA 600 DOSE	P	SP	FYARRO	NP	SP
LONSURF	P	SP	GAVRETO	P	
OPDUALAG	P	SP	GAVRETO	P	SP
PHESGO	P	SP	GAVRETO	P	
RITUXAN HYCELA	P	SP	GLEEVEC (<i>imatinib mesylate</i>)	NP	SP; ST
VYXEOS	P	SP	IBRANCE CAPS	P	SP
Antineoplastic Enzyme Inhibitors			IBRANCE TABS	P	SP
AFINITOR DISPERZ TBSO (<i>everolimus</i>)	NP	SP; ST	ICLUSIG	P	SP
AFINITOR TABS (<i>everolimus</i>)	NP	SP; ST	IDHIFA	P	SP
ALECENSA	P	SP	<i>imatinib mesylate</i>	NP	SP
ALIQOPA	P	SP	<i>imatinib mesylate</i>	P	SP
ALUNBRIG TABS	P	SP	IMBRUVICA CAPS	P	SP
ALUNBRIG TBPK	P	SP	IMBRUVICA SUSP	P	SP
AUGTYRO	P	SP	IMBRUVICA TABS	P	SP
BALVERSA	P	SP	INREBIC	P	SP
BELEODAQ	NP	SP	ISTODAX SOLR (<i>romidepsin</i>)	P	SP
BORTEZOMIB SOLN	P	SP	JAKAFI	P	SP
<i>bortezomib SOLR IJ</i>	P	SP	JAYPIRCA	P	SP
BORTEZOMIB SOLR IJ 1 MG, 2.5 MG	P	SP	KISQALI	P	SP
BOSULIF CAPS	P	SP	KOSELUGO	P	SP
BOSULIF TABS	P	SP	KRAZATI	P	SP
BRAFTOVI 75 MG	P	SP	KYPROLIS	P	SP
BRUKINSA	NP	SP	<i>lapatinib ditosylate</i>	P	SP
CABOMETYX TABS	P	SP	LORBRENA	P	SP
CALQUENCE	P	SP	LUMAKRAS	P	SP
CALQUENCE	P	SP	LYNPARZA TABS	P	SP
CAPRELSA	P	SP	LYTGOBI	P	SP
COMETRIQ KIT	P	SP	MEKINIST SOLR	P	SP
COPIKTRA	P	SP	MEKINIST TABS	P	SP
COTELLIC	P	SP	MEKTOVI	P	SP
<i>everolimus TABS</i>	P	SP	NERLYNX	P	SP
<i>everolimus TBSO</i>	P	SP	NEXAVAR (<i>sorafenib tosylate</i>)	NP	SP; ST
			NINLARO	P	SP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
OGSIVEO 50 MG, 100 MG	P	SP	TIBSOVO	P	SP
OGSIVEO 150 MG	P		TORISEL (<i>temsirolimus</i>)	P	SP
OJEMDA SUSR	NP		TRUQAP	P	SP
OJEMDA TABS	NP		TURALIO 125 MG	P	SP
OJJAARA	P	SP	TYKERB (<i>lapatinib ditosylate</i>)	NP	SP; ST
<i>pazopanib hcl</i>	P	SP	VANFLYTA	P	SP
PEMAZYRE	P	SP	VELCADE SOLR IJ (<i>bortezomib</i>)	P	SP
PIQRAY 200MG DAILY DOSE	P	SP	VERZENIO	P	SP
PIQRAY 250MG DAILY DOSE	P	SP	VITRAKVI CAPS	P	SP
PIQRAY 300MG DAILY DOSE	P	SP	VITRAKVI SOLN	P	SP
QINLOCK	NP	SP	VONJO	NP	SP
RETEVMO	P	SP	VOTRIENT (<i>pazopanib hcl</i>)	P	SP
REZLIDHIA	P	SP	XALKORI CAPS	P	SP
<i>romidepsin SOLR</i>	P	SP	XALKORI CPSP	P	SP
ROZLYTREK CAPS	P	SP	XOSPATA	P	SP
ROZLYTREK PACK	P	SP	ZEJULA CAPS	P	SP
RUBRACA	P	SP	ZEJULA TABS	P	SP
RYDAPT	P	SP	ZELBORAF	P	SP
SCEMBLIX	P	SP	ZOLINZA	P	SP
<i>sorafenib tosylate</i>	P	SP	ZYDELIG	P	SP
SPRYCEL	P	SP	ZYKADIA TABS	P	SP
STIVARGA	P	SP	Antineoplastic Enzymes		
<i>sunitinib malate</i>	P	SP	ASPARLAS	P	SP
SUTENT (<i>sunitinib malate</i>)	NP	SP; ST	ONCASPAR	P	SP
TABRECTA	P	SP	RYLAZE	P	SP
TAFINLAR CAPS	P	SP	Antineoplastic Radiopharmaceuticals		
TAFINLAR TBSO	P	SP	AZEDRA DOSIMETRIC	P	SP
TALZENNA	P		AZEDRA THERAPEUTIC	P	SP
TALZENNA	P	SP	LUTATHERA	P	SP
TASIGNA	P	SP	PLUVICTO	P	SP
TAZVERIK	P	SP	XOFIGO	P	
<i>temsirolimus</i>	P	SP	Antineoplastics Misc.		
TEPMETKO	P	SP	ACTIMMUNE 100 MCG/0.5ML	P	SP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ANKTIVA	NP		<i>docetaxel CONC 20 MG/ML, 80 MG/4ML, 160 MG/8ML</i>	P	
<i>arsenic trioxide</i>	P	SP	DOCETAXEL CONC 20 MG/ML, 80 MG/4ML, 160 MG/8ML (<i>docetaxel</i>)	P	SP
<i>bexarotene</i>	P	SP	DOCETAXEL CONC 20 MG/ML, 80 MG/4ML, 160 MG/8ML	P	SP
<i>dacarbazine SOLR</i>	P		<i>docetaxel SOLN</i>	P	SP
ELZONRIS	P		DOCETAXEL SOLN (<i>docetaxel</i>)	P	SP
HYDREA (<i>hydroxyurea</i>)	NP	ST	DOCETAXEL SOLN 20 MG/2ML, 80 MG/8ML, 160 MG/16ML	P	SP
<i>hydroxyurea</i>	P		DOCIVYX SOLN	NP	SP
MATULANE	P	SP	<i>eribulin mesylate</i>	P	
NIPENT	P		ETOPOPHOS	P	
TARGRETIN (<i>bexarotene</i>)	P	SP	<i>etoposide CAPS</i>	P	SP
TICE BCG	P		<i>etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML</i>	P	SP
<i>tretinoin (chemotherapy)</i>	P	SP	HALAVEN (<i>eribulin mesylate</i>)	P	SP
TRISENOX (<i>arsenic trioxide</i>)	P	SP	IXEMPRA KIT	P	SP
Chemotherapy Adjuncts			JEVTANA	P	SP
ELITEK	P		<i>paclitaxel</i>	P	
KEPIVANCE 6.25 MG	P	SP	<i>paclitaxel protein-bound particles</i>	P	SP
Chemotherapy Rescue/Antidote/Protective Agents			PACLITAXEL PROTEIN-BOUND PARTICLES	P	SP
COSELA	NP		PACLITAXEL PROTEIN-BOUND PARTICLES	P	SP
<i>dexrazoxane hcl</i>	P	SP	<i>vinblastine sulfate SOLN</i>	P	
IWILFIN	P	SP	<i>vincristine sulfate</i>	P	SP
<i>leucovorin calcium SOLN IJ 100 MG/10ML, 500 MG/50ML</i>	P		<i>vinorelbine tartrate</i>	P	
<i>leucovorin calcium SOLR</i>	P		Oncolytic Viral Agents		
<i>leucovorin calcium TABS</i>	P		IMLYGIC	P	SP
<i>levoleucovorin calcium SOLN 175 MG/17.5ML</i>	P	SP	Topoisomerase I Inhibitors		
<i>levoleucovorin calcium SOLR</i>	P	SP			
<i>mesna SOLN</i>	P	SP			
MESNEX SOLN (<i>mesna</i>)	NP	SP; ST			
MESNEX TABS	NP	SP			
Mitotic Inhibitors					
ABRAXANE	P	SP			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CAMPTOSAR (<i>irinotecan hcl</i>)	P	SP	<i>bromocriptine mesylate CAPS</i>	P	
HYCAMTIN CAPS	P	SP	<i>bromocriptine mesylate TABS 2.5 MG</i>	P	
<i>irinotecan hcl 40 MG/2ML, 100 MG/5ML</i>	NP	SP	<i>carbidopa-levodopa-entacapone</i>	NP	
<i>irinotecan hcl</i>	P	SP	<i>carbidopa-levodopa TABS</i>	P	
ONIVYDE	P	SP	<i>carbidopa-levodopa TBCR</i>	P	
<i>topotecan hcl SOLN</i>	P	SP	<i>carbidopa-levodopa TBDP</i>	NP	
TOPOTECAN HCL SOLN	P	SP	DHIVY TABS	NP	
TOPOTECAN HCL SOLN (<i>topotecan hcl</i>)	P	SP	DUOPA SUSP	NP	
<i>topotecan hcl SOLR</i>	P	SP	GOCOVRI CP24	NP	SP
TRODELVY	NP	SP	INBRIJA CAPS	NP	
ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease			MIRAPEX ER TB24 0.375 MG, 0.75 MG, 2.25 MG, 3 MG, 3.75 MG, 4.5 MG (<i>pramipexole dihydrochloride</i>)	NP	
Antiparkinson Adjunctive Therapy			NEUPRO	NP	
<i>carbidopa</i>	NP		OSMOLEX ER TB24 129 MG, 193 MG	NP	
LODOSYN (<i>carbidopa</i>)	NP		PARLODEL CAPS (<i>bromocriptine mesylate</i>)	NP	
NOURIANZ	NP		<i>pramipexole dihydrochloride TABS</i>	P	
Antiparkinson Anticholinergics			<i>pramipexole dihydrochloride TB24</i>	NP	
<i>benztropine mesylate TABS</i>	P		<i>ropinirole hydrochloride TABS</i>	P	
<i>trihexyphenidyl hcl SOLN</i>	P		<i>ropinirole hydrochloride TB24</i>	NP	
<i>trihexyphenidyl hcl TABS</i>	P		RYTARY CPCR	NP	
Antiparkinson COMT Inhibitors			SINEMET TABS 100 MG-10 MG, 100 MG-25 MG (<i>carbidopa-levodopa</i>)	NP	
COMTAN (<i>entacapone</i>)	NP		STALEVO 100 (<i>carbidopa-levodopa-entacapone</i>)	NP	
<i>entacapone</i>	P		STALEVO 125 (<i>carbidopa-levodopa-entacapone</i>)	NP	
ONGENTYS	NP				
TASMAR (<i>tolcapone</i>)	NP				
<i>tolcapone</i>	NP				
Antiparkinson Dopaminergics					
<i>amantadine hcl CAPS</i>	P				
<i>amantadine hcl CAPS</i>	NP				
<i>amantadine hcl SOLN</i>	P	AL(Up to 10 yrs old)			
<i>amantadine hcl TABS</i>	NP				

Drug Name	Drug Tier	Requirements/Limits
STALEVO 150 (<i>carbidopa-levodopa-entacapone</i>)	NP	
STALEVO 200 (<i>carbidopa-levodopa-entacapone</i>)	NP	
STALEVO 50 (<i>carbidopa-levodopa-entacapone</i>)	NP	
STALEVO 75 (<i>carbidopa-levodopa-entacapone</i>)	NP	
Antiparkinson Monoamine Oxidase Inhibitors		
AZILECT (<i>rasagiline mesylate</i>)	NP	
<i>rasagiline mesylate</i>	NP	
<i>selegiline hcl CAPS</i>	P	
<i>selegiline hcl TABS</i>	P	
<i>selegiline hcl TABS</i>	NP	
XADAGO	NP	
ZELAPAR TBDP	NP	
ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders		
Antimanic Agents		
<i>lithium</i>	P	
<i>lithium carbonate CAPS</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
<i>lithium carbonate TABS</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)

Drug Name	Drug Tier	Requirements/Limits
<i>lithium carbonate TBCR</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
LITHOBID TBCR (<i>lithium carbonate</i>)	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
Antipsychotics - Misc.		
CAPLYTA	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
EQUETRO	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
GEODON 40 MG (<i>ziprasidone hcl</i>)	NP	AL(At least 18 yrs old)
GEODON 20 MG, 60 MG, 80 MG (<i>ziprasidone hcl</i>)	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
GEODON (<i>ziprasidone mesylate</i>)	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
LATUDA (<i>lurasidone hcl</i>)	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	<i>ziprasidone hcl</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
<i>lurasidone hcl</i>	P	AL(At least 18 yrs old)	<i>ziprasidone mesylate</i>	P	AL(At least 18 yrs old)
<i>lurasidone hcl</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	Benzisoxazoles		
NUPLAZID CAPS	NP	PA required for all antipsychotics for patients under 18 years old	FANAPT	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
NUPLAZID TABS 10 MG	NP	PA required for all antipsychotics for patients under 18 years old	FANAPT TITRATION PACK	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
VRAYLAR CAPS	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	INVEGA 3 MG, 6 MG, 9 MG (<i>paliperidone</i>)	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
VRAYLAR CPPK	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	INVEGA HAFYERA	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old); SP; PA
<i>ziprasidone hcl</i>	P	AL(At least 18 yrs old)	INVEGA SUSTENNA	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old); SP; PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
INVEGA TRINZA	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old); SP; PA	<i>risperidone SOLN</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
<i>paliperidone</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	<i>risperidone TABS</i>	P	AL(At least 18 yrs old)
<i>paliperidone</i>	P	AL(At least 18 yrs old)	<i>risperidone TABS</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
PERSERIS PRSY	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old); SP; PA	<i>risperidone TBDP</i>	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
RISPERDAL CONSTA (<i>risperidone microspheres</i>)	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old); SP; PA	RYKINDO SRER	NP	SP
RISPERDAL SOLN (<i>risperidone</i>)	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	UZEDY SUSY	NP	SP
RISPERDAL TABS 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG (<i>risperidone</i>)	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	Butyrophenones		
<i>risperidone microspheres</i>	NP	AL(At least 18 yrs old); SP; PA	HALDOL DECANOATE 100 (<i>haloperidol decanoate</i>)	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
			HALDOL DECANOATE 50 (<i>haloperidol decanoate</i>)	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
			<i>haloperidol decanoate</i>	P	AL(At least 18 yrs old)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>haloperidol lactate CONC</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	<i>clozapine TBDP</i>	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
<i>haloperidol lactate SOLN</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	<i>clozapine TBDP 150 MG, 200 MG</i>	NP	AL(At least 18 yrs old)
<i>haloperidol TABS</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	<i>CLOZARIL TABS 25 MG, 100 MG (clozapine)</i>	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
<i>haloperidol TABS 0.5 MG, 1 MG, 2 MG, 5 MG, 10 MG</i>	P	AL(At least 18 yrs old)	<i>loxapine succinate</i>	P	AL(At least 18 yrs old)
Dibenzapines			<i>olanzapine SOLR</i>	P	AL(At least 18 yrs old)
<i>ADASUVE</i>	NP	AL(At least 18 yrs old)	<i>olanzapine TABS</i>	P	AL(At least 18 yrs old)
<i>asenapine maleate</i>	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	<i>olanzapine TABS</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
<i>clozapine TABS 50 MG</i>	P	AL(At least 18 yrs old)	<i>olanzapine TBDP</i>	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
<i>clozapine TABS</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	<i>quetiapine fumarate TABS</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
			<i>quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG, 300 MG, 400 MG</i>	P	AL(At least 18 yrs old)
			<i>quetiapine fumarate TB24</i>	P	AL(At least 18 yrs old)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>quetiapine fumarate TB24</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	ZYPREXA ZYDIS TBDP (<i>olanzapine</i>)	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
SAPHRIS (<i>asenapine maleate</i>)	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	ZYPREXA SOLR (<i>olanzapine</i>)	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
SECUADO	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	ZYPREXA TABS (<i>olanzapine</i>)	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
SEROQUEL XR TB24 (<i>quetiapine fumarate</i>)	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	Dihydroindolones		
SEROQUEL TABS (<i>quetiapine fumarate</i>)	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	<i>molindone hcl</i>	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
VERSACLOZ SUSP	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	Phenothiazines		
ZYPREXA RELPREVV	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old); SP	<i>chlorpromazine hcl CONC</i>	NP	AL(At least 18 yrs old)
			<i>chlorpromazine hcl SOLN</i>	P	AL(At least 18 yrs old)
			<i>chlorpromazine hcl TABS</i>	NP	AL(At least 18 yrs old)
			<i>chlorpromazine hcl TABS</i>	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
			<i>fluphenazine decanoate</i>	P	AL(At least 18 yrs old)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>fluphenazine hcl CONC</i>	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	<i>prochlorperazine maleate TABS</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
<i>fluphenazine hcl ELIX</i>	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	<i>thioridazine hcl</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
<i>fluphenazine hcl SOLN</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	<i>trifluoperazine hcl TABS</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
<i>fluphenazine hcl TABS</i>	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	Quinolinone Derivatives		
<i>fluphenazine hcl TABS</i>	NP	AL(At least 18 yrs old)	ABILIFY ASIMTUFII PRSY	P	SP
<i>perphenazine TABS</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	ABILIFY MAINTENA PRSY	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old); SP; PA
<i>perphenazine TABS 4 MG</i>	P	AL(At least 18 yrs old)	ABILIFY MAINTENA SRER	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old); SP; PA
<i>prochlorperazine</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	ABILIFY MYCITE MAINTENANCE KIT	NP	SP
			ABILIFY MYCITE STARTER KIT	NP	SP

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ABILIFY TABS (aripiprazole)	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	<i>thiothixene</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
<i>aripiprazole SOLN OR</i>	NP	AL(At least 18 yrs old)	ANTISEPTICS & DISINFECTANTS		
<i>aripiprazole TABS</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	Chlorine Antiseptics		
<i>aripiprazole TABS</i>	P	AL(At least 18 yrs old)	<i>chlorhexidine gluconate SOLN EX 4 %</i>	P	
<i>aripiprazole TBDP</i>	NP	AL(At least 18 yrs old)	Iodine Antiseptics		
ARISTADA	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old); SP; PA	BETADINE SOLN (<i>povidone-iodine</i>)	P	
ARISTADA INITIO	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old); SP; PA	FIRST AID ANTISEPTIC OINTMENT OINT	P	
REXULTI	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	<i>povidone-iodine SOLN 10 %</i>	P	
Thioxanthenes			<i>povidone-iodine SOLN 10 %</i>	P	
			ANTIVIRALS - Drugs to Treat Viral Infections		
			Antiretrovirals		
			<i>abacavir sulfate-lamivudine</i>	P	SP
			<i>abacavir sulfate SOLN</i>	P	SP
			<i>abacavir sulfate TABS</i>	P	SP
			APRETUDE	P	SP
			APTIVUS CAPS	NP	SP
			<i>atazanavir sulfate CAPS</i>	P	SP
			BIKTARVY	P	SP
			CABENUVA	P	SP
			CIMDUO	NP	SP
			COMBIVIR (<i>lamivudine-zidovudine</i>)	NP	SP
			COMPLERA	P	SP
			<i>darunavir TABS</i>	P	
			DELSTRIGO	P	SP
			DESCOVY	P	SP
			DOVATO	P	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
DOVATO	P	SP	KALETRA TABS (<i>lopinavir-ritonavir</i>)	NP	SP
EDURANT	P	SP	<i>lamivudine SOLN</i>	P	SP
<i>efavirenz CAPS</i>	P	SP	<i>lamivudine TABS</i>	P	SP
<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	P	SP	<i>lamivudine-zidovudine</i>	P	SP
<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	NP	SP	LEXIVA SUSP	NP	SP
<i>efavirenz TABS</i>	P	SP	LEXIVA TABS (<i>fosamprenavir calcium</i>)	NP	SP
<i>emtricitabine CAPS</i>	NP	SP	<i>lopinavir-ritonavir SOLN</i>	P	SP
<i>emtricitabine-tenofovir disoproxil fumarate</i>	P	SP	<i>lopinavir-ritonavir TABS</i>	P	SP
EMTRIVA CAPS (<i>emtricitabine</i>)	P	SP	<i>maraviroc TABS</i>	NP	SP
EMTRIVA SOLN	P	SP	<i>nevirapine SUSP</i>	P	SP
EPIVIR SOLN (<i>lamivudine</i>)	NP	SP	<i>nevirapine TABS</i>	P	SP
EPIVIR TABS (<i>lamivudine</i>)	NP	SP	<i>nevirapine TB24</i>	NP	SP
EPZICOM (<i>abacavir sulfate-lamivudine</i>)	NP	SP	NORVIR PACK	P	SP
<i>etravirine</i>	NP	SP	NORVIR TABS (<i>ritonavir</i>)	NP	SP
EVOTAZ	P	SP	ODEFSEY	P	SP
<i>fosamprenavir calcium TABS</i>	NP	SP	PIFELTRO	NP	SP
FUZEON SOLR	NP	SP	PREZCOBIX	P	SP
GENVOYA	P	SP	PREZISTA SUSP	P	SP
INTELENCE	NP	SP	PREZISTA TABS 75 MG, 150 MG	P	SP
INTELENCE (<i>etravirine</i>)	NP	SP	PREZISTA TABS (<i>darunavir</i>)	NP	SP
ISENTRESS HD TABS	NP	SP	RETROVIR IV INFUSION SOLN	P	SP
ISENTRESS CHEW	P	SP	RETROVIR CAPS (<i>zidovudine</i>)	NP	SP
ISENTRESS PACK	P	SP	RETROVIR SYRP (<i>zidovudine</i>)	NP	SP
ISENTRESS TABS	P	SP	REYATAZ CAPS 200 MG, 300 MG (<i>atazanavir sulfate</i>)	NP	SP
JULUCA	NP	SP	REYATAZ PACK	P	SP
KALETRA SOLN (<i>lopinavir-ritonavir</i>)	NP	SP	<i>ritonavir TABS</i>	P	SP
KALETRA TABS (<i>lopinavir-ritonavir</i>)	NP	SP	RUKOBIA	NP	SP
			SELZENTRY SOLN	NP	SP
			SELZENTRY TABS	NP	SP

Drug Name	Drug Tier	Requirements/Limits
SELZENTRY TABS (<i>maraviroc</i>)	NP	SP
STRIBILD	NP	SP
SUNLENCA SOLN	NP	SP
SUNLENCA TBPk	NP	SP
SYMFI (<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	NP	SP
SYMFI LO (<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	NP	SP
SYMTUZA	NP	SP
<i>tenofovir disoproxil fumarate</i> TABS	P	SP
TIVICAY PD TBSO	P	SP
TIVICAY TABS	P	SP
TRIUMEQ PD TBSO	NP	SP
TRIUMEQ TABS	P	SP
TRIZIVIR	NP	SP
TROGARZO	NP	SP
TRUVADA (<i>emtricitabine-tenofovir disoproxil fumarate</i>)	NP	SP
TYBOST	P	SP
VIRACEPT TABS	NP	SP
VIREAD POWD	P	SP
VIREAD TABS 150 MG, 200 MG, 250 MG	P	SP
VIREAD TABS (<i>tenofovir disoproxil fumarate</i>)	NP	SP
ZIAGEN SOLN (<i>abacavir sulfate</i>)	NP	SP
<i>zidovudine</i> CAPS	P	SP
<i>zidovudine</i> SYRP	P	SP
<i>zidovudine</i> TABS	P	SP
Antiviral Combinations		
PAXLOVID 100 MG-150 MG	P	
CMV Agents		

Drug Name	Drug Tier	Requirements/Limits
LIVTENCITY	NP	SP
PREVYMIS TABS	NP	SP
VALCYTE SOLR (<i>valganciclovir hcl</i>)	NP	AL(Up to 10 yrs old)
VALCYTE TABS (<i>valganciclovir hcl</i>)	NP	
<i>valganciclovir hcl</i> SOLR	P	AL(Up to 10 yrs old)
<i>valganciclovir hcl</i> TABS	P	
Hepatitis Agents		
EPCLUSA PACK	NP	84 day(s) max supply per 365 day(s) retail; SP
EPCLUSA TABS	NP	84 day(s) max supply per 365 day(s) retail; SP
EPCLUSA TABS	NP	84 day(s) max supply per 365 day(s) retail; SP
HARVONI PACK	NP	84 day(s) max supply per 365 day(s) retail; SP; PA
HARVONI TABS	NP	84 day(s) max supply per 365 day(s) retail; SP; PA
HARVONI TABS	NP	84 day(s) max supply per 365 day(s) retail; SP; PA
LEDIPASVIR/SOFOSBUV IR TABS	NP	84 day(s) max supply per 365 day(s) retail; SP; PA
MAVYRET PACK	P	112 day(s) max supply per 365 day(s) retail; SP
MAVYRET TABS	P	112 day(s) max supply per 365 day(s) retail; SP

Drug Name	Drug Tier	Requirements/Limits
PEGASYS SOLN	NP	84 day(s) max supply per 365 day(s) retail; SP; PA
PEGASYS SOSY	NP	84 day(s) max supply per 365 day(s) retail; SP; PA
<i>ribavirin (hepatitis c) CAPS</i>	P	84 day(s) max supply per 365 day(s) retail; SP
<i>ribavirin (hepatitis c) TABS 200 MG</i>	P	84 day(s) max supply per 365 day(s) retail; SP
SOFOSBUVIR/VELPATA SVIR TABS	P	84 day(s) max supply per 365 day(s) retail; SP
SOVALDI PACK	NP	84 day(s) max supply per 365 day(s) retail; SP; PA
SOVALDI TABS	NP	84 day(s) max supply per 365 day(s) retail; SP; PA
VOSEVI	NP	84 day(s) max supply per 365 day(s) retail; SP; PA
ZEPATIER	NP	84 day(s) max supply per 365 day(s) retail; SP; PA
Herpes Agents		
<i>acyclovir CAPS</i>	P	
<i>acyclovir SUSP</i>	P	AL(Up to 10 yrs old)
<i>acyclovir TABS OR</i>	P	
<i>famciclovir</i>	P	
SITAVIG TABS BU	NP	
<i>valacyclovir hcl</i>	P	
VALTREX (<i>valacyclovir hcl</i>)	NP	

Drug Name	Drug Tier	Requirements/Limits
Influenza Agents		
<i>oseltamivir phosphate CAPS</i>	P	1 max fill(s) per 180 day(s) retail
<i>oseltamivir phosphate SUSR</i>	P	1 max fill(s) per 180 day(s) retail; AL(Up to 10 yrs old)
RELENZA DISKHALER	NP	1 max fill(s) per 180 day(s) retail
<i>rimantadine hydrochloride TABS</i>	NP	
TAMIFLU CAPS (<i>oseltamivir phosphate</i>)	NP	1 max fill(s) per 180 day(s) retail
TAMIFLU SUSR (<i>oseltamivir phosphate</i>)	NP	1 max fill(s) per 180 day(s) retail; AL(Up to 10 yrs old)
XOFLUZA 40 MG, 80 MG	NP	
Misc. Antivirals		
LAGEVRIO	NP	
BETA BLOCKERS - Drugs to Treat High Blood Pressure		
Alpha-Beta Blockers		
<i>carvedilol</i>	P	
<i>carvedilol phosphate</i>	NP	
COREG (<i>carvedilol</i>)	NP	
COREG CR (<i>carvedilol phosphate</i>)	NP	
<i>labetalol hcl TABS</i>	NP	
<i>labetalol hcl TABS</i>	P	
Beta Blockers Cardio-Selective		
<i>acebutolol hcl CAPS</i>	NP	
<i>atenolol TABS</i>	P	
<i>betaxolol hcl</i>	NP	
<i>bisoprolol fumarate</i>	P	
BYSTOLIC (<i>nebivolol hcl</i>)	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
KASPARGO SPRINKLE CS24	NP		High Blood Pressure		
LOPRESSOR TABS (metoprolol tartrate)	NP		Calcium Channel Blockers		
metoprolol succinate TB24 50 MG, 100 MG, 200 MG	NP		amlodipine besylate TABS	P	QL(1 ea daily)
metoprolol succinate TB24	P		CALAN SR TBCR 240 MG (verapamil hcl)	NP	QL(2 ea daily)
metoprolol tartrate TABS	P		CARDIZEM CD CP24 (diltiazem hcl coated beads)	NP	QL(1 ea daily)
nebivolol hcl	P		CARDIZEM LA TB24 (diltiazem hcl)	NP	QL(1 ea daily)
TENORMIN TABS (atenolol)	NP		CARDIZEM TABS 30 MG, 60 MG, 120 MG (diltiazem hcl)	NP	QL(1 ea daily)
TOPROL XL TB24 (metoprolol succinate)	NP		diltiazem hcl coated beads CP24	P	QL(1 ea daily)
Beta Blockers Non-Selective			diltiazem hcl extended release beads	P	QL(1 ea daily)
BETAPACE AF (sotalol hcl (afib/af))	NP		diltiazem hcl CP12	P	QL(1 ea daily)
BETAPACE TABS 80 MG, 120 MG, 160 MG (sotalol hcl)	NP		diltiazem hcl CP24	P	QL(1 ea daily)
CORGARD TABS 20 MG, 40 MG (nadolol)	NP		DILTIAZEM HCL SOLR	P	
HEMANGEOL SOLN OR	NP	SP	diltiazem hcl TABS	P	QL(1 ea daily)
INDERAL LA CP24 (propranolol hcl)	NP		diltiazem hcl TB24	NP	QL(1 ea daily)
INDERAL XL	NP		felodipine	P	QL(1 ea daily)
INNOPRAN XL	NP		isradipine CAPS	NP	QL(2 ea daily)
nadolol TABS 20 MG, 40 MG, 80 MG	P		KATERZIA	NP	QL(10 ml daily)
pindolol TABS	NP		levamlodipine maleate 5 MG	NP	
propranolol hcl CP24	P		nicardipine hcl CAPS	NP	QL(3 ea daily)
propranolol hcl SOLN OR 20 MG/5ML, 40 MG/5ML	P		nifedipine CAPS	P	QL(3 ea daily)
propranolol hcl TABS	P		nifedipine TB24	P	QL(1 ea daily)
sotalol hcl (afib/af)	P		nimodipine CAPS	P	QL(1 ea daily)
sotalol hcl TABS	P		nisoldipine	NP	QL(1 ea daily)
SOTYLIZE SOLN OR	NP		NORLIQVA SOLN	NP	QL(10 ml daily)
timolol maleate TABS	NP		NORVASC TABS (amlodipine besylate)	NP	QL(1 ea daily)
CALCIUM CHANNEL BLOCKERS - Drugs to Treat			NYMALIZE SOLN 6 MG/ML	P	QL(10 ml daily)
			PROCARDIA XL TB24 (nifedipine)	NP	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
SULAR 8.5 MG, 17 MG, 34 MG (<i>nisoldipine</i>)	NP	QL(1 ea daily)
TIAZAC (<i>diltiazem hcl extended release beads</i>)	NP	QL(1 ea daily)
<i>verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG</i>	P	QL(1 ea daily)
<i>verapamil hcl CP24 100 MG, 120 MG, 180 MG, 200 MG, 240 MG, 300 MG</i>	NP	QL(1 ea daily)
<i>verapamil hcl TABS</i>	P	QL(3 ea daily)
<i>verapamil hcl TBCR</i>	P	QL(2 ea daily)
VERAPAMIL HYDROCHLORIDE ER CP24 (<i>verapamil hcl</i>)	NP	QL(1 ea daily)
VERELAN PM CP24 (<i>verapamil hcl</i>)	NP	QL(1 ea daily)
VERELAN CP24 (<i>verapamil hcl</i>)	NP	QL(1 ea daily)
CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm		
Cardiac Glycosides		
<i>digoxin SOLN OR 0.05 MG/ML</i>	P	
<i>digoxin TABS 0.125 MG, 0.25 MG, 125 MCG, 250 MCG</i>	P	
CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions		
Cardiovascular Agents Misc. - Combinations		
<i>amlodipine besylate-atorvastatin calcium</i>	NP	
BIDIL (<i>isosorbide dinitrate-hydralazine hcl</i>)	NP	

Drug Name	Drug Tier	Requirements/Limits
CADUET 10 MG-10 MG, 10 MG-20 MG, 10 MG-40 MG, 10 MG-80 MG, 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG (<i>amlodipine besylate-atorvastatin calcium</i>)	NP	
ENTRESTO	P	
<i>isosorbide dinitrate-hydralazine hcl</i>	NP	
OPSYNVI	NP	SP
Cardiovascular Sodium-Glucose Co-Transporter 2 Inhibitors		
INPEFA	NP	
Peripheral Vasodilators		
<i>inositol niacinate CAPS</i>	P	
Prostaglandin Vasodilators		
ORENITRAM TITRATION KIT MONTH 1 TEPK	NP	SP
ORENITRAM TITRATION KIT MONTH 2 TEPK	NP	SP
ORENITRAM TITRATION KIT MONTH 3 TEPK	NP	SP
ORENITRAM TBCR	NP	SP
<i>treprostinil SOLN IJ</i>	NP	SP
TYVASO DPI INSTITUTIONALKIT POWD	NP	SP
TYVASO DPI MAINTENANCE KIT POWD	NP	SP
TYVASO DPI TITRATION KIT POWD	NP	SP
TYVASO REFILL SOLN IN	NP	SP; PA
TYVASO STARTER SOLN IN	NP	SP; PA
TYVASO SOLN IN	NP	SP; PA
VENTAVIS	P	SP; PA
Pulmonary Hypertension - Activin Signaling		

Drug Name	Drug Tier	Requirements/Limits
Inhibitor		
WINREVAIR	NP	SP
Pulmonary Hypertension - Endothelin Receptor Antagonists		
<i>ambrisentan</i>	P	SP; PA
<i>bosentan TABS</i>	P	SP; PA
LETAIRIS (<i>ambrisentan</i>)	NP	SP; PA
OPSUMIT	NP	SP; PA
TRACLEER TABS (<i>bosentan</i>)	NP	SP; PA
TRACLEER TBSO	NP	SP; PA
Pulmonary Hypertension - Phosphodiesterase Inhibitors		
ADCIRCA TABS (<i>tadalafil (pulmonary hypertension)</i>)	NP	SP; PA
LIQREV SUSP	NP	SP
REVATIO SUSR (<i>sildenafil citrate (pulmonary hypertension)</i>)	NP	SP; PA
REVATIO TABS (<i>sildenafil citrate (pulmonary hypertension)</i>)	NP	SP; PA
<i>sildenafil citrate (pulmonary hypertension) SUSR</i>	NP	SP; PA
<i>sildenafil citrate (pulmonary hypertension) TABS</i>	P	SP; PA
<i>tadalafil (pulmonary hypertension) TABS</i>	NP	SP; PA
<i>tadalafil (pulmonary hypertension) TABS</i>	P	SP; PA
TADLIQ SUSP	NP	SP
Pulmonary Hypertension - Prostacyclin Receptor Agonist		
UPTRAVI TITRATION PACK TBPK	NP	SP; PA
UPTRAVI SOLR	NP	SP; PA

Drug Name	Drug Tier	Requirements/Limits
UPTRAVI TABS	NP	SP; PA
Pulmonary Hypertension - Sol Guanylate Cyclase Stimulator		
ADEMPAS	NP	SP; PA
Vasoactive Soluble Guanylate Cyclase Stimulator (sGC)		
VERQUVO	NP	
CEPHALOSPORINS - Drugs to Treat Bacterial Infections		
Cephalosporins - 1st Generation		
<i>cefadroxil CAPS</i>	NP	
<i>cefadroxil SUSR</i>	NP	
<i>cefadroxil TABS</i>	NP	
<i>cefazolin sodium SOLR IJ 1 GM, 10 GM, 500 MG</i>	P	
<i>cephalexin CAPS</i>	P	
<i>cephalexin SUSR</i>	P	
<i>cephalexin TABS</i>	NP	
Cephalosporins - 2nd Generation		
CEFACTOR ER TB12	NP	
<i>cefaclor CAPS</i>	P	
<i>cefaclor SUSR 125 MG/5ML, 375 MG/5ML</i>	NP	
<i>cefotetan disodium IJ 1 GM, 2 GM</i>	P	
<i>cefoxitin sodium IV</i>	P	
<i>cefprozil SUSR</i>	P	
<i>cefprozil TABS</i>	P	
<i>cefuroxime axetil TABS</i>	P	
<i>cefuroxime sodium IJ 750 MG</i>	P	
Cephalosporins - 3rd Generation		
<i>cefdinir CAPS</i>	P	
<i>cefdinir SUSR</i>	P	
<i>cefixime CAPS</i>	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>cefixime SUSR</i>	NP		<i>desogestrel-ethinyl estradiol (biphasic)</i>	P	
<i>cefpodoxime proxetil SUSR</i>	NP		<i>desogestrel-ethinyl estradiol (triphasic)</i>	P	
<i>cefpodoxime proxetil TABS</i>	NP		<i>drospirenone-ethinyl estradiol</i>	P	
<i>ceftazidime IJ 1 GM, 6 GM</i>	P		<i>drospirenone-ethinyl estradiol-levomefolate calcium</i>	NP	
<i>ceftriaxone sodium IJ 1 GM, 2 GM, 250 MG, 500 MG</i>	P		<i>ethynodiol diacet & eth estrad</i>	P	
<i>ceftriaxone sodium in dextrose</i>	P		<i>levonorgestrel & eth estradiol TABS</i>	P	
Cephalosporins - 4th Generation			<i>levonorgestrel-eth estradiol (triphasic)</i>	P	
<i>cefepime hcl SOLR IJ 1 GM</i>	P		<i>levonorgestrel-ethinyl estradiol (91-day)</i>	NP	
CEFEPIME SOLN	P		<i>levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG</i>	P	
CHEMICALS			<i>levonorgestrel-ethinyl estradiol (continuous)</i>	NP	
Bulk Chemicals - C's			<i>levonorgestrel-ethinyl estradiol-iron</i>	NP	
CHOLESTYRAMINE	NP		<i>levonorgestrel-ethinyl estradiol-iron</i>	P	
Bulk Chemicals - L's			LO LOESTRIN FE TABS	NP	
LEVOTHYROXINE SODIUM (T4)	NP		MIRCETTE (<i>desogestrel-ethinyl estradiol (biphasic)</i>)	NP	
Bulk Chemicals - N's			NATAZIA	P	
NYSTATIN	NP		NEXTSTELLIS	NP	
Liquids			<i>norethin acet & estrad-fe CAPS</i>	NP	
CAMPHOR SPIRIT	P		<i>norethin acet & estrad-fe CAPS</i>	P	
SM CAMPHOR SPIRIT	P		<i>norethin acet & estrad-fe CHEW</i>	P	
CONTRACEPTIVES - Drugs to Prevent Pregnancy			<i>norethin acet & estrad-fe CHEW</i>	NP	
Combination Contraceptives - Oral					
BALCOLTRA (<i>levonorgestrel-ethinyl estradiol-iron</i>)	NP				
BEYAZ (<i>drospirenone-ethinyl estradiol-levomefolate calcium</i>)	NP				
<i>desogestrel & ethinyl estradiol</i>	P				

Drug Name	Drug Tier	Requirements/Limits
<i>norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG</i>	P	
<i>norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG</i>	NP	
<i>norethindrone & eth estradiol</i>	P	
<i>norethindrone & ethinyl estradiol-fe</i>	P	
<i>norethindrone & ethinyl estradiol-fe 25 MCG-0.8 MG-75 MG</i>	NP	
<i>norethindrone acet & eth estra</i>	NP	
<i>norethindrone acet & eth estra</i>	P	
<i>norethindrone acetate-ethinyl estradiol-fe</i>	NP	
<i>norethindrone acetate-ethinyl estradiol-fe</i>	P	
<i>norethindrone-eth estradiol (triphasic)</i>	P	
<i>norgestimate-ethinyl estradiol</i>	P	
<i>norgestimate-ethinyl estradiol (triphasic)</i>	P	
<i>norgestrel & ethinyl estradiol 30 MCG-0.3 MG</i>	NP	
<i>norgestrel & ethinyl estradiol 30 MCG-0.3 MG</i>	P	
QUARTETTE <i>(levonorgestrel-ethinyl estradiol (91-day))</i>	NP	
SAFYRAL <i>(drospirenone-ethinyl estradiol-levomefolate calcium)</i>	NP	
SEASONIQUE <i>(levonorgestrel-ethinyl estradiol (91-day))</i>	NP	
TAYTULLA CAPS <i>(norethin acet & estrad-fe)</i>	NP	

Drug Name	Drug Tier	Requirements/Limits
TYBLUME CHEW	P	
YASMIN 28 <i>(drospirenone-ethinyl estradiol)</i>	NP	
YAZ <i>(drospirenone-ethinyl estradiol)</i>	NP	
Combination Contraceptives - Transdermal		
<i>norelgestromin-ethinyl estradiol</i>	P	
<i>norelgestromin-ethinyl estradiol</i>	NP	
TWIRLA	NP	
Combination Contraceptives - Vaginal		
ANNOVERA	NP	
<i>etonogestrel-ethinyl estradiol</i>	NP	
NUVARING <i>(etonogestrel-ethinyl estradiol)</i>	NP	
Copper Contraceptives - IUD		
PARAGARD INTRAUTERINE COPPER CONTRACEPTIVE T380A	P	SP
Emergency Contraceptives		
<i>levonorgestrel (emergency oc) 1.5 MG</i>	P	
Progestin Contraceptives - Implants		
NEXPLANON	P	SP
Progestin Contraceptives - Injectable		
DEPO-PROVERA CONTRACEPTIVE SUSP IM <i>(medroxyprogesterone acetate (contraceptive))</i>	P	
DEPO-PROVERA CONTRACEPTIVE SUSY IM <i>(medroxyprogesterone acetate (contraceptive))</i>	P	
DEPO-SUBQ PROVERA 104 SUSY SC	P	

Drug Name	Drug Tier	Requirements/Limits
<i>medroxyprogesterone acetate (contraceptive) SUSP IM</i>	P	
<i>medroxyprogesterone acetate (contraceptive) SUSY IM</i>	NP	
<i>medroxyprogesterone acetate (contraceptive) SUSY IM</i>	P	
Progestin Contraceptives - IUD		
KYLEENA	P	SP
LILETTA 20.1 MCG/DAY	P	SP
MIRENA	P	SP
SKYLA	P	SP
Progestin Contraceptives - Oral		
<i>norethindrone (contraceptive)</i>	P	
<i>norethindrone (contraceptive)</i>	NP	
OPILL	P	
SLYND	P	
CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions		
Glucocorticosteroids		
ALKINDI SPRINKLE CPSP	NP	
<i>budesonide CPEP</i>	NP	
<i>budesonide CPEP</i>	P	
<i>budesonide TB24</i>	NP	
CORTEF TABS (<i>hydrocortisone</i>)	NP	
CORTISONE ACETATE TABS	NP	
<i>deflazacort TABS</i>	NP	SP
DEPO-MEDROL SUSP	P	
DEXAMETHASONE INTENSOL CONC	P	
<i>dexamethasone ELIX</i>	P	
<i>dexamethasone SOLN</i>	P	

Drug Name	Drug Tier	Requirements/Limits
<i>dexamethasone TABS</i>	P	
<i>dexamethasone TBPk</i>	NP	
EMFLAZA SUSP	NP	SP
EOHILIA SUSP	NP	
HEMADY TABS	NP	
<i>hydrocortisone TABS</i>	P	
MEDROL DOSEPAK TBPk (<i>methylprednisolone</i>)	NP	
MEDROL TABS	NP	
MEDROL TABS (<i>methylprednisolone</i>)	NP	
<i>methylprednisolone acetate SUSP</i>	P	
METHYLPREDNISOLON E ACETATE SUSP 40 MG/ML, 80 MG/ML	P	
<i>methylprednisolone sod succ 40 MG, 500 MG, 1000 MG</i>	P	
<i>methylprednisolone TABS 8 MG, 16 MG, 32 MG</i>	NP	
<i>methylprednisolone TABS 4 MG</i>	P	
<i>methylprednisolone TBPk</i>	P	
<i>prednisolone sodium phosphate SOLN</i>	P	
<i>prednisolone sodium phosphate TBPk</i>	NP	
<i>prednisolone SOLN</i>	P	
<i>prednisolone TABS</i>	NP	
PREDNISONE INTENSOL CONC	NP	
<i>prednisone SOLN</i>	P	
<i>prednisone TABS</i>	P	
<i>prednisone TBPk</i>	P	
RAYOS TBEC	NP	
SOLU-MEDROL 2 GM, 40 MG, 500 MG, 1000 MG	P	
TARPEYO CPDR	NP	SP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
UCERIS TB24 (budesonide)	NP		ALAHIST DM LIQD 7.5 MG/5ML-15 MG/5ML-2 MG/5ML (phenylephrine- dextromethorphan)	NP	
Mineralocorticoids			ALAHIST PE TABS	NP	
fludrocortisone acetate TABS	P		AQUANAZ TABS	NP	
COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms			brompheniramine & phenyleph ELIX	NP	
Antitussives			brompheniramine & pseudoeph LIQD 15 MG/5ML-1 MG/5ML	NP	
benzonatate 100 MG	NP		CAPCOF SYRP	NP	
benzonatate	P		CAPMIST DM TABS 400 MG-15 MG-60 MG	NP	
DELSYM COUGH CHILDRENS SUER (dextromethorphan polistirex)	NP		CAPRON DM LIQD	NP	
DELSYM SUER (dextromethorphan polistirex)	NP		CAPRON DMT TABS	NP	
DELSYM TABS	NP		cetirizine- pseudoephedrine	NP	
dextromethorphan hbr CAPS	P		CHLO HIST	NP	
dextromethorphan polistirex SUER	NP		CHLO TUSS 30 MG/5ML- 12.5 MG/5ML-1 MG/5ML	NP	
dextromethorphan polistirex SUER	P		chlorpheniramine & phenylephrine LIQD 10 MG/5ML-4 MG/5ML	NP	
HYCODAN SOLN (hydrocodone bitartrate- homatropine methylbromide)	NP		chlorpheniramine & phenylephrine TABS 10 MG-4 MG	NP	
HYCODAN TABS 1.5 MG- 5 MG (hydrocodone bitartrate-homatropine methylbromide)	NP	QL(8 ea daily)	chlorpheniramine & pseudoeph TABS	NP	
hydrocodone bitartrate- homatropine methylbromide SOLN	P		chlorpheniramine-dm TABS 4 MG-30 MG	NP	
hydrocodone bitartrate- homatropine methylbromide TABS	NP	QL(8 ea daily)	chlorpheniramine- phenylephrine- acetaminophen MISC	NP	
Cough/Cold/Allergy Combinations			chlorpheniramine- phenylephrine- acetaminophen TABS 5 MG-325 MG-2 MG	NP	
ALAHIST CF TABS	NP		CLARINEX-D 12 HOUR TB12	NP	
ALAHIST D	NP		CONEX COLD/ALLERGY PEDIATRIC SOLN	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CONEX COLD/ALLERGY SOLN	NP		<i>dextromethorphan-guaifenesin LIQD 100 MG/5ML-5 MG/5ML, 200 MG/20ML-20 MG/20ML, 400 MG/20ML-20 MG/20ML</i>	NP	
CONEX COLD/ALLERGY TABS	NP		<i>dextromethorphan-guaifenesin SYRP 100 MG/5ML-10 MG/5ML, 200 MG/10ML-20 MG/10ML</i>	P	
COUGH AND CHEST CONGESTION DM COUGH SYRUP SYRP	P		<i>dextromethorphan-guaifenesin TABS 400 MG-20 MG</i>	NP	
DECONEX DMX TABS 10 MG-400 MG-17.5 MG	NP		<i>dextromethorphan-guaifenesin TB12 1200 MG-60 MG, 600 MG-30 MG</i>	P	
DECONEX IR TABS	NP		<i>dextromethorphan-guaifenesin TB12 1200 MG-60 MG, 600 MG-30 MG</i>	NP	
DELSYM CHILDRENS COUGH PLUS SORE THROAT LIQD	NP		<i>dextromethorphan-phenylephrine-acetaminophen CAPS</i>	NP	
DELSYM CHILDRENS DAY NIGHT MISC	NP		<i>dextromethorphan-phenylephrine-acetaminophen LIQD</i>	NP	
DELSYM COUGH/SORE THROAT LIQD	NP		<i>dextromethorphan-phenylephrine-acetaminophen PACK</i>	NP	
DELSYM NIGHTTIME COUGH MAXIMUM STRENGTH SOLN	NP		<i>dextromethorphan-phenylephrine-acetaminophen TABS 5 MG-325 MG-10 MG</i>	NP	
<i>dexbrompheniramine-phenylephrine TABS</i>	NP		<i>diphenhydramine-phenylephrine-acetaminophen LIQD 5 MG/10ML-325 MG/10ML-12.5 MG/10ML</i>	NP	
<i>dextromethorphan-acetaminophen-chlorpheniramine TABS 325 MG-2 MG-10 MG</i>	NP		<i>diphenhydramine-phenylephrine-acetaminophen PACK</i>	NP	
<i>dextromethorphan-doxylamine-acetaminophen CAPS</i>	NP		<i>diphenhydramine-phenylephrine-acetaminophen TABS 5 MG-325 MG-12.5 MG</i>	NP	
<i>dextromethorphan-doxylamine-acetaminophen LIQD</i>	NP				
<i>dextromethorphan-guaifenesin CAPS</i>	NP				
<i>dextromethorphan-guaifenesin LIQD 100 MG/5ML-10 MG/5ML, 100 MG/5ML-5 MG/5ML, 200 MG/10ML-20 MG/10ML, 200 MG/20ML-20 MG/20ML, 400 MG/20ML-20 MG/20ML</i>	P				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>doxylamine-dm LIQD 15 MG/15ML-6.25 MG/15ML</i>	NP		MUCINEX CHILDRENS FREEFORM MULTI-SYMPTOM COLD,FLU & SORE THR LIQD (<i>phenylephrine-dm-gg w/ apap</i>)	NP	
<i>doxylamine-phenylephrine</i>	NP		MUCINEX CHILDRENS FREEFROM DAY TIME/NIGHT TIME LQPK	NP	
DURAFLU TABS 200 MG-325 MG-20 MG-60 MG	NP		MUCINEX CHILDRENS FREEFROM MULTI-SYMPTOM COLD & FLU NIGHTTIM SOLN	NP	
ED A-HIST DM TABS	NP		MUCINEX CHILDRENS FREEFROM MULTI-SYMPTOM COLD AND STUFFY NOS LIQD (<i>phenylephrine w/ dm-gg</i>)	NP	
ED A-HIST LIQD (<i>chlorpheniramine & phenylephrine</i>)	NP		MUCINEX CHILDRENS MULTI-SYMPTOM COLD LIQD (<i>phenylephrine w/ dm-gg</i>)	NP	
ED BRON GP LIQD	NP		MUCINEX CHILDRENS PACK	NP	
ENDAL	NP		MUCINEX CLEAR & COOL DAY/NIGHT LQPK	NP	
<i>fexofenadine-pseudoephedrine TB12</i>	NP		MUCINEX CLEAR & COOL/FASTMAX/NIGHTS HIFT LQPK	NP	
<i>fexofenadine-pseudoephedrine TB24</i>	NP		MUCINEX COLD & FLU CAPS	NP	
<i>guaifenesin-codeine SOLN</i>	P		MUCINEX COUGH & CONGESTION CHILDRENS LIQD (<i>phenylephrine w/ dm-gg</i>)	NP	
<i>guaifenesin-codeine SOLN 10 MG/5ML-100 MG/5ML</i>	NP		MUCINEX D MAXIMUM STRENGTH TB12 (<i>pseudoephedrine-guaifenesin</i>)	NP	
HISTEX-AC	NP		MUCINEX DM MAXIMUM STRENGTH TB12 (<i>dextromethorphan-guaifenesin</i>)	NP	
HISTEX-DM SYRP	NP		MUCINEX DM TB12 (<i>dextromethorphan-guaifenesin</i>)	NP	
HM DIBROMM COLD AND ALLERGY CHILDRENS LIQD	P				
<i>hydrocodone polistirex-chlorpheniramine polistirex SUER</i>	P				
LOHIST-D LIQD	NP				
LOHIST-DM SYRP	NP				
<i>loratadine & pseudoephedrine TB12</i>	NP				
<i>loratadine & pseudoephedrine TB24</i>	NP				
MAR-COF CG EXPECTORANT LIQD	NP				
M-END DMX	NP				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MUCINEX D TB12 (<i>pseudoephedrine-guaifenesin</i>)	NP		MUCINEX FAST-MAX DAY/NITE M/S MISC	NP	
MUCINEX FAST-MAX COLD & FLU DAY/NIGHT CPPK (<i>phenylephrine- doxylamine-dm- guaifenesin-apap</i>)	NP		MUCINEX FAST-MAX KICKSTART SEVERE COLD & FLU LIQD (<i>phenylephrine-dm-gg w/ apap</i>)	NP	
MUCINEX FAST-MAX COLD FLU& SORE THROAT CLEAR & COOL LIQD (<i>phenylephrine-dm- gg w/ apap</i>)	NP		MUCINEX FAST-MAX SEVERE CONGESTION & COUGH ARCTIC BURST LIQD (<i>phenylephrine w/ dm-gg</i>)	NP	
MUCINEX FAST-MAX COLD FLU& SORE THROAT LIQD (<i>phenylephrine-dm-gg w/ apap</i>)	NP		MUCINEX FAST-MAX SEVERE CONGESTION & COUGH LIQD (<i>phenylephrine w/ dm-gg</i>)	NP	
MUCINEX FAST-MAX COLD/FLU MAXIMUM STRENGTH LIQD (<i>phenylephrine-dm-gg w/ apap</i>)	NP		MUCINEX FAST-MAX SEVERE CONGESTION & COUGH TABS	NP	
MUCINEX FAST-MAX COLD/FLU/SORE THROAT MAXIMUM STRENGTH CAPS (<i>phenylephrine-dm-gg w/ apap</i>)	NP		MUCINEX FAST-MAX SEVERE CONGESTION/COUGH NIGHTSHIFT COLD/FLU TBPK	NP	
MUCINEX FAST-MAX COLD/FLU LIQD (<i>phenylephrine-dm-gg w/ apap</i>)	NP		MUCINEX FAST- MAX/NIGHTSHIFT DM MAX/COLD & FLU/DAY/NIGHT	NP	
MUCINEX FAST-MAX COLD/FLUMAXIMUM STRENGTH CAPS (<i>phenylephrine-dm-gg w/ apap</i>)	NP		MUCINEX FAST-MAY DAY/NIGHT COLD & FLU MAXIMUM STRENGTH CPPK (<i>phenylephrine- doxylamine-dm- guaifenesin-apap</i>)	NP	
MUCINEX FAST-MAX COLD/FLUNIGHTSHIFT SEV CLD/FLU DAY&NIGHT MS LQPK	NP		MUCINEX FREEFROM COLD & FLU DAYTIME/NIGHTTIME LQPK	NP	
MUCINEX FAST-MAX COLD/FLUNIGHTSHIFT SEV CLD/FLU DAY&NIGHT MS TBPK	NP		MUCINEX FREEFROM COLD & FLU NIGHTTIME SOLN	NP	
			MUCINEX JUNIOR COLD & FLU TABS	NP	
			MUCINEX JUNIOR COUGH & CONGESTION TABS	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MUCINEX MULTI-SYMPTOM COLD DAY/NIGHT PACK MISC	NP		MUCINEX SINUS-MAX/NIGHTSHIFT LQPK	NP	
MUCINEX NIGHTSHIFT COLD & FLU ARCTIC BURST SOLN	NP		NASOPEN PE	NP	
MUCINEX NIGHTSHIFT COLD & FLU SOLN	NP		NINJACOF LIQD	NP	
MUCINEX NIGHTSHIFT COLD & FLU MAXIMUM STRENGTH TABS	NP		NINJACOF-XG LIQD	NP	
MUCINEX NIGHTSHIFT SEVERECOLD & FLU MAXIMUM STRENGTH SOLN	NP		<i>phenylephrine w/ acetaminophen TABS 5 MG-325 MG</i>	NP	
MUCINEX NIGHTSHIFT SEVERECOLD & FLU MAXIMUM STRENGTH TABS	NP		<i>phenylephrine w/ dm-gg LIQD 10 MG/10ML-200 MG/10ML-20 MG/10ML, 10 MG/15ML-200 MG/15ML-18 MG/15ML, 10 MG/20ML-400 MG/20ML-20 MG/20ML, 2.5 MG/5ML-100 MG/5ML-5 MG/5ML, 5 MG/5ML-100 MG/5ML-10 MG/5ML</i>	NP	
MUCINEX NIGHTSHIFT SINUSCLEAR&COOL SOLN	NP		<i>phenylephrine w/ dm-gg SYRP 5 MG/5ML-100 MG/5ML-10 MG/5ML</i>	NP	
MUCINEX NIGHTSHIFT SINUSMAXIMUM STRENGTH TABS	NP		<i>phenylephrine w/ dm-gg TABS 10 MG-385 MG-17.5 MG</i>	NP	
MUCINEX NIGHTSHIFT SINUS SOLN	NP		<i>phenylephrine-acetaminophen-guaifenesin LIQD</i>	NP	
MUCINEX SEVERE CONGESTIONU COUGH/COLD & FLU DAY/NIGHT LQPK	NP		<i>phenylephrine-acetaminophen-guaifenesin TABS 5 MG-200 MG-325 MG</i>	NP	
MUCINEX SINUS-MAX DAY/NIGHT MAXIMUM STRENGTH CPPK (<i>phenylephrine-doxylamine-dm-guaifenesin-apap</i>)	NP		<i>phenylephrine-brompheniramine-dm LIQD 2.5 MG/5ML-5 MG/5ML-1 MG/5ML</i>	NP	
MUCINEX SINUS-MAX PRESSURE/PAIN/COUGH MAXIMUM STRENGTH CAPS (<i>phenylephrine-dm-gg w/ apap</i>)	NP		<i>phenylephrine-brompheniramine-dm LIQD 5 MG/10ML-10 MG/10ML-2 MG/10ML</i>	P	
MUCINEX SINUS-MAX/NIGHTSHIFT DAY/NIGHT MAXIMUM STRENGTH TBPB	NP		<i>phenylephrine-chlorphen-dm LIQD 10 MG/5ML-4 MG/5ML-15 MG/5ML</i>	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>phenylephrine-chlorpheniramine-dm w/ apap MISC</i>	NP		<i>promethazine w/codeine SYRP</i>	P	
<i>phenylephrine-chlorpheniramine-dm w/ apap TABS 5 MG-325 MG-2 MG-10 MG</i>	NP		<i>promethazine-dm SYRP</i>	P	
<i>phenylephrine-dexbrompheniramine-dextromethorphan LIQD</i>	NP		<i>pseudoephed-bromphen-dm SYRP 10 MG/5ML-30 MG/5ML-2 MG/5ML</i>	P	
<i>phenylephrine-diphenhydramine-dm-guaifenesin-apap TBPK</i>	NP		<i>pseudoephed-bromphen-dm SYRP 10 MG/5ML-30 MG/5ML-2 MG/5ML</i>	NP	
<i>phenylephrine-dm-gg w/ apap LIQD</i>	NP		PSEUDOEPHEDRINE HYDROCHLORIDE/ GUAIFENESIN TABS	NP	
<i>phenylephrine-dm-gg w/ apap TABS 5 MG-200 MG-325 MG-10 MG</i>	NP		<i>pseudoephedrine-guaifenesin SYRP 100 MG/5ML-30 MG/5ML</i>	P	
<i>phenylephrine-doxylamine-dextromethorphan-acetaminophen LIQD</i>	NP		<i>pseudoephedrine-guaifenesin TB12 1200 MG-120 MG, 600 MG-60 MG</i>	NP	
<i>phenylephrine-doxylamine-dextromethorphan-acetaminophen MISC 5 MG-325 MG-6.25 MG</i>	NP		<i>pseudoephedrine-ibuprofen CAPS</i>	NP	
<i>phenylephrine-guaifenesin TABS 10 MG-400 MG</i>	NP		PX NITETIME MULTI-SYMPTOM CAPS	P	
POLY HIST FORTE 10 MG-10.5 MG	NP		RU-HIST D TABS	NP	
POLY-HIST DM	NP		RYMED TABS	NP	
POLY-TUSSIN AC LIQD 10 MG/5ML-10 MG/5ML-4 MG/5ML	NP		SCOT-TUSSIN DM LIQD	NP	
POLYTUSSIN DM LIQD	NP		SCOT-TUSSIN SENIOR LIQD	NP	
POLYTUSSIN DM LIQD (<i>phenylephrine-dexbrompheniramine-dextromethorphan</i>)	NP		SM COLD & ALLERGY CHILDRENS LIQD	NP	
POLY-VENT DM TABS	NP		TRIPONEL LIQD	NP	
POLY-VENT IR TABS	NP		<i>triprolidine & pseudoephedrine TABS</i>	NP	
<i>promethazine w/codeine SOLN</i>	P		TUSNEL PEDIATRIC LIQD 1.25 MG/ML-25 MG/ML, 50 MG/5ML-5 MG/5ML-15 MG/5ML	NP	
			TUSNEL-DM PEDIATRIC LIQD 1.25 MG/ML-25 MG/ML-2.5 MG/ML	NP	
			TUSNEL LIQD	NP	
			TUSNEL TABS	NP	
			VANACOF	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
VANACOF 2	NP		ACNE MEDICATION 5 LOTN	P	AL(Up to 20 yrs old)
VANACOF CP LIQD	NP		<i>adapalene-benzoyl peroxide GEL</i>	P	AL(Up to 20 yrs old)
VANACOF DM LIQD (<i>phenylephrine w/ dm-gg</i>)	NP		<i>adapalene CREA</i>	NP	AL(Up to 20 yrs old)
VANACOF DMX LIQD	NP		<i>adapalene GEL</i>	NP	AL(Up to 20 yrs old)
VANACOF XP LIQD	NP		ALTRENO LOTN	NP	AL(Up to 20 yrs old)
VANATAB DM TABS	NP		ARAZLO LOTN	NP	AL(Up to 20 yrs old)
WESTUSSIN DM	NP		ATRALIN GEL (<i>tretinoin</i>)	NP	AL(Up to 20 yrs old)
Expectorants			BENZAMYCIN GEL (<i>benzoyl peroxide-erythromycin</i>)	NP	AL(Up to 20 yrs old)
<i>guaifenesin LIQD 200 MG/10ML, 400 MG/20ML</i>	NP		<i>benzoyl peroxide-erythromycin GEL</i>	NP	AL(Up to 20 yrs old)
<i>guaifenesin LIQD 100 MG/5ML, 200 MG/10ML</i>	P		<i>benzoyl peroxide FOAM 10 %</i>	NP	
<i>guaifenesin TABS</i>	NP		<i>benzoyl peroxide GEL 2.5 %, 5 %, 10 %</i>	P	AL(Up to 20 yrs old)
<i>guaifenesin TB12 1200 MG</i>	NP		<i>benzoyl peroxide GEL 2.5 %</i>	NP	AL(Up to 20 yrs old)
<i>guaifenesin TB12</i>	P		<i>benzoyl peroxide LIQD 5 %, 10 %</i>	P	AL(Up to 20 yrs old)
MUCINEX MAXIMUM STRENGTH TB12 (<i>guaifenesin</i>)	P		<i>benzoyl peroxide MISC 6 %</i>	NP	AL(Up to 20 yrs old); RX/OTC
MUCINEX TB12 (<i>guaifenesin</i>)	P		CABTREO	NP	
Misc. Respiratory Inhalants			CLEOCIN-T LOTN (<i>clindamycin phosphate (topical)</i>)	NP	AL(Up to 20 yrs old)
<i>camphor (inhalant)</i>	P		CLINDACIN ETZ	NP	AL(Up to 20 yrs old)
CVS HOT STEAM LIQD	P		CLINDACIN PAC	NP	AL(Up to 20 yrs old)
<i>sodium chloride (inhalant) NEBU 0.9 %, 3 %</i>	P		CLINDAGEL GEL (<i>clindamycin phosphate (topical)</i>)	NP	AL(Up to 20 yrs old)
Mucolytics			<i>clindamycin phosphate (topical) FOAM</i>	NP	AL(Up to 20 yrs old)
<i>acetylcysteine SOLN 10 %</i>	P		<i>clindamycin phosphate (topical) GEL</i>	NP	AL(Up to 20 yrs old)
DERMATOLOGICALS - Drugs to Treat Skin					
Conditions					
Acne Products					
ACANYA GEL (<i>clindamycin phosphate-benzoyl peroxide</i>)	NP	AL(Up to 20 yrs old)			
ACNE MEDICATION 10 LOTN	NP	AL(Up to 20 yrs old)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>clindamycin phosphate (topical) LOTN</i>	P	AL(Up to 20 yrs old)	RETIN-A MICRO	NP	AL(Up to 20 yrs old)
<i>clindamycin phosphate (topical) SOLN</i>	P	AL(Up to 20 yrs old)	RETIN-A MICRO PUMP (<i>tretinoin microsphere</i>)	NP	AL(Up to 20 yrs old)
<i>clindamycin phosphate (topical) SWAB</i>	P	AL(Up to 20 yrs old)	RETIN-A CREA (<i>tretinoin</i>)	NP	AL(Up to 20 yrs old)
<i>clindamycin phosphate (topical) SWAB</i>	NP	AL(Up to 20 yrs old)	RETIN-A GEL (<i>tretinoin</i>)	NP	AL(Up to 20 yrs old)
<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	P	AL(Up to 20 yrs old)	<i>sulfacetamide sodium (acne)</i>	NP	AL(Up to 20 yrs old)
<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	NP	AL(Up to 20 yrs old)	<i>sulfacetamide sodium w/ sulfur CREA 10 %-2 %, 10 %-5 %</i>	NP	AL(Up to 20 yrs old)
<i>clindamycin phosphate-benzoyl peroxide GEL</i>	NP	AL(Up to 20 yrs old)	<i>sulfacetamide sodium w/ sulfur EMUL 10 %-1 %</i>	NP	AL(Up to 20 yrs old)
<i>clindamycin phosphate-tretinoin</i>	NP	AL(Up to 20 yrs old)	<i>sulfacetamide sodium w/ sulfur FOAM</i>	NP	AL(Up to 20 yrs old)
<i>dapsone (topical)</i>	NP	AL(Up to 20 yrs old)	<i>sulfacetamide sodium w/ sulfur LIQD</i>	NP	AL(Up to 20 yrs old)
ERYGEL GEL (<i>erythromycin (acne aid)</i>)	NP	AL(Up to 20 yrs old)	<i>sulfacetamide sodium w/ sulfur PADS 10 %-4 %</i>	NP	AL(Up to 20 yrs old)
<i>erythromycin (acne aid) GEL</i>	P	AL(Up to 20 yrs old)	<i>sulfacetamide sodium w/ sulfur SUSP 8 %-4 %</i>	NP	AL(Up to 20 yrs old)
<i>erythromycin (acne aid) PADS</i>	NP	AL(Up to 20 yrs old)	<i>sulfacetamide sodium-sulfur in urea vehicle EMUL 10 %-10 %-4 %</i>	NP	AL(Up to 20 yrs old)
<i>erythromycin (acne aid) SOLN</i>	P	AL(Up to 20 yrs old)	SUMADAN KIT	NP	AL(Up to 20 yrs old)
EVOCLIN FOAM (<i>clindamycin phosphate (topical)</i>)	NP	AL(Up to 20 yrs old)	SUMADAN WASH LIQD (<i>sulfacetamide sodium w/ sulfur</i>)	NP	AL(Up to 20 yrs old)
FABIOR FOAM	NP	AL(Up to 20 yrs old)	SUMADAN XLT KIT	NP	AL(Up to 20 yrs old)
<i>isotretinoin</i>	P		SUMAXIN CP KIT	NP	AL(Up to 20 yrs old)
<i>isotretinoin</i>	P		SUMAXIN PADS	NP	AL(Up to 20 yrs old)
KLARON (<i>sulfacetamide sodium (acne)</i>)	NP	AL(Up to 20 yrs old)	TAZAROTENE FOAM	NP	AL(Up to 20 yrs old)
NEUAC KIT	NP	AL(Up to 20 yrs old)	<i>tretinoin microsphere</i>	NP	AL(Up to 20 yrs old)
ONEXTON GEL (<i>clindamycin phosphate-benzoyl peroxide</i>)	NP	AL(Up to 20 yrs old)	<i>tretinoin CREA 0.025 %, 0.05 %, 0.1 %</i>	P	AL(Up to 20 yrs old)
RETIN-A MICRO (<i>tretinoin microsphere</i>)	NP	AL(Up to 20 yrs old)	<i>tretinoin GEL 0.05 %</i>	NP	AL(Up to 20 yrs old)

Drug Name	Drug Tier	Requirements/Limits
<i>tretinoin GEL 0.01 %</i> , <i>0.025 %</i>	P	AL(Up to 20 yrs old)
WINLEVI	NP	AL(Up to 20 yrs old)
ZIANA (<i>clindamycin phosphate-tretinoin</i>)	NP	AL(Up to 20 yrs old)
ZMA CLEAR SUSP	NP	
Agents for External Genital and Perianal Warts		
VEREGEN	NP	
Analgesics - Topical		
<i>menthol (topical analgesic) AERO</i>	P	
Antibiotics - Topical		
<i>bacitracin (topical) OINT</i>	P	
<i>bacitracin zinc OINT</i>	NP	
<i>bacitracin zinc OINT</i>	P	
<i>bacitracin-polymyxin b OINT</i>	P	
CENTANY AT KIT	NP	
CENTANY OINT	NP	
<i>gentamicin sulfate (topical) CREA</i>	P	
<i>gentamicin sulfate (topical) OINT</i>	P	
<i>mupirocin calcium (topical)</i>	NP	
<i>mupirocin OINT</i>	P	
<i>neomycin-bacitracin-polymyxin OINT</i>	P	
<i>neomycin-bacitracin-polymyxin OINT</i>	NP	
<i>neomycin-bacitracin-polymyxin-pramoxine</i>	NP	
<i>neomycin-polymyxin w/ pramoxine</i>	NP	
NEO-SYNALAR	NP	
NEO-SYNALAR KIT	NP	
XEPI	NP	
Antifungals - Topical		

Drug Name	Drug Tier	Requirements/Limits
ALEVAZOL OINT	NP	
<i>butenafine hcl</i>	P	RX/OTC
<i>ciclopirox olamine CREA</i>	P	
<i>ciclopirox olamine SUSP</i>	NP	
<i>ciclopirox GEL</i>	NP	
<i>ciclopirox KIT</i>	P	
<i>ciclopirox SHAM</i>	NP	
<i>ciclopirox SOLN</i>	NP	
<i>ciclopirox SOLN</i>	P	
<i>clotrimazole (topical) CREA</i>	P	RX/OTC
<i>clotrimazole (topical) SOLN</i>	NP	RX/OTC
<i>clotrimazole w/ betamethasone CREA</i>	P	
<i>clotrimazole w/ betamethasone LOTN</i>	P	
<i>econazole nitrate CREA</i>	P	
ERTACZO	NP	
EXTINA FOAM (<i>ketoconazole (topical)</i>)	NP	
FUNGOID TINCTURE SOLN	NP	
JUBLIA	NP	
<i>ketoconazole (topical) CREA</i>	P	
<i>ketoconazole (topical) FOAM</i>	NP	
<i>ketoconazole (topical) SHAM 2 %</i>	P	
KETODAN KIT	NP	
LOPROX	NP	
LOPROX KIT	NP	
LOPROX CREA (<i>ciclopirox olamine</i>)	NP	
LOPROX SUSP (<i>ciclopirox olamine</i>)	NP	
<i>luliconazole</i>	NP	
LUZU (<i>luliconazole</i>)	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>miconazole nitrate (topical) AERP</i>	NP		<i>tolnaftate SOLN</i>	NP	RX/OTC
<i>miconazole nitrate (topical) CREA</i>	P		<i>undecylenic acid-zinc undecylenate OINT</i>	P	
<i>miconazole nitrate (topical) CREA</i>	NP		VOTRIZA-AL LOTN	NP	
<i>miconazole nitrate (topical) POWD EX</i>	NP		VUSION (<i>miconazole-zinc oxide-white petrolatum</i>)	NP	
MICONAZOLE NITRATE SOLN	P		Anti-inflammatory Agents - Topical		
<i>miconazole-zinc oxide-white petrolatum</i>	NP		<i>diclofenac epolamine PTCH EX</i>	NP	
MICONI-AL SOLN	NP		<i>diclofenac sodium (topical) GEL EX</i>	P	RX/OTC
<i>naftifine hcl CREA</i>	NP		<i>diclofenac sodium (topical) GEL EX</i>	NP	RX/OTC
<i>naftifine hcl GEL 2 %</i>	NP		<i>diclofenac sodium (topical) SOLN EX</i>	NP	
NAFTIN GEL (<i>naftifine hcl</i>)	NP		<i>diclofenac sodium (topical) SOLN EX 1.5 %</i>	P	
NAFTIN GEL	NP		FLECTOR PTCH EX (<i>diclofenac epolamine</i>)	NP	
<i>nystatin (topical) CREA</i>	NP		LICART PT24	NP	
<i>nystatin (topical) CREA</i>	P		PENNSAID SOLN EX 2 % (<i>diclofenac sodium (topical)</i>)	NP	
<i>nystatin (topical) OINT</i>	P		Antineoplastic or Premalignant Lesion Agents - Topical		
<i>nystatin (topical) POWD EX</i>	NP		<i>bexarotene (topical)</i>	P	SP
<i>nystatin (topical) POWD EX</i>	P		<i>diclofenac sodium (actinic keratoses) EX</i>	NP	
<i>nystatin-triamcinolone CREA</i>	NP		<i>fluorouracil (topical) CREA</i>	P	
<i>nystatin-triamcinolone OINT</i>	P		<i>fluorouracil (topical) SOLN</i>	P	
<i>oxiconazole nitrate CREA</i>	NP		Antipruritics - Topical		
OXISTAT LOTN	NP		<i>camphor & menthol LOTN</i>	P	
<i>tavaborole</i>	NP		<i>doxepin hcl (antipruritic)</i>	P	
<i>terbinafine hcl (topical) CREA</i>	NP		PRUDOXIN (<i>doxepin hcl (antipruritic)</i>)	P	
<i>terbinafine hcl (topical) CREA</i>	P		ZONALON (<i>doxepin hcl (antipruritic)</i>)	P	
<i>tolnaftate AERP</i>	NP				
<i>tolnaftate CREA</i>	NP				
<i>tolnaftate CREA</i>	P				
<i>tolnaftate POWD EX</i>	NP				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Antipsoriatics			DERMAZINC SPRAY LIQD	P	
<i>acitretin</i>	P		DERMAZINC ZINC THERAPY SOAP BAR	P	
BIMZELX SOAJ	NP	SP	NUTRASEB CREA	P	RX/OTC
BIMZELX SOSY	NP	SP	PROMISEB CREA	P	RX/OTC
<i>calcipotriene CREA</i>	P		<i>pyrithione zinc BAR</i>	P	
CALCIPOTRIENE FOAM	P		<i>pyrithione zinc SHAM</i>	P	
<i>calcipotriene OINT</i>	P		SEBEX	P	
<i>calcipotriene SOLN</i>	P		<i>selenium sulfide LOTN</i>	P	
<i>calcitriol (topical)</i>	NP		<i>selenium sulfide LOTN</i>	P	
COSENTYX SENSOREADY PEN SOAJ	NP	SP; PA	<i>selenium sulfide SHAM 1 %</i>	P	
COSENTYX UNOREADY SOAJ	NP	SP	<i>sulfacetamide sodium GEL</i>	NP	
COSENTYX SOLN	NP	SP	<i>sulfacetamide sodium LIQD</i>	NP	
COSENTYX SOSY	NP	SP; PA	ZORYVE	NP	
ILUMYA	NP	SP; PA	Antivirals - Topical		
<i>methoxsalen rapid</i>	NP		<i>acyclovir topical CREA</i>	NP	
SILIQ	NP	SP; PA	<i>acyclovir topical OINT</i>	P	
SKYRIZI PEN SOAJ	NP	SP; PA	DENAVIR (<i>penciclovir</i>)	NP	
SKYRIZI SOSY	NP	SP; PA	<i>docosanol</i>	P	
SORILUX FOAM	NP		<i>penciclovir</i>	NP	
SOTYKTU	NP	SP	XERESE	NP	
SPEVIGO SOLN	NP	SP	ZOVIRAX CREA (<i>acyclovir topical</i>)	NP	
SPEVIGO SOSY	NP	SP	ZOVIRAX OINT (<i>acyclovir topical</i>)	NP	
STELARA SOSY	NP	SP; PA	Burn Products		
TALTZ SOAJ	P	SP; PA	<i>silver sulfadiazine</i>	P	
TALTZ SOSY	P	SP; PA	Corticosteroids - Topical		
<i>tazarotene CREA</i>	NP		<i>alclometasone dipropionate CREA</i>	NP	
<i>tazarotene GEL</i>	NP		<i>alclometasone dipropionate OINT</i>	NP	
TREMFYA SOPN	NP	SP; PA	<i>amcinonide CREA</i>	NP	
TREMFYA SOSY	NP	SP; PA	APEXICON E CREA	NP	
VTAMA	NP				
ZORYVE	NP				
Antiseborrheic Products					
DERMAZINC CREAM CREA	P	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>betamethasone dipropionate (topical) CREA</i>	NP		<i>clobetasol propionate GEL 0.05 %</i>	NP	
<i>betamethasone dipropionate (topical) LOTN</i>	NP		<i>clobetasol propionate LIQD</i>	NP	
<i>betamethasone dipropionate (topical) OINT</i>	NP		<i>clobetasol propionate LOTN</i>	NP	
<i>betamethasone dipropionate augmented CREA</i>	NP		<i>clobetasol propionate OINT 0.05 %</i>	P	
<i>betamethasone dipropionate augmented GEL 0.05 %</i>	NP		<i>clobetasol propionate SHAM</i>	NP	
<i>betamethasone dipropionate augmented LOTN</i>	NP		<i>clobetasol propionate SOLN 0.05 %</i>	P	
<i>betamethasone dipropionate augmented OINT</i>	NP		<i>clocortolone pivalate CLODAN KIT</i>	NP	
<i>betamethasone valerate CREA</i>	NP		<i>CLODERM (clocortolone pivalate)</i>	NP	
<i>betamethasone valerate FOAM</i>	NP		<i>DERMA-SMOOTH/FS BODY OIL (fluocinolone acetonide)</i>	NP	
<i>betamethasone valerate LOTN</i>	NP		<i>DERMA-SMOOTH/FS SCALP OIL (fluocinolone acetonide)</i>	NP	
<i>betamethasone valerate OINT</i>	NP		<i>desonide CREA</i>	NP	
BRYHALI LOTN	NP		<i>desonide LOTN</i>	NP	
<i>calcipotriene-betamethasone dipropionate OINT</i>	NP		<i>desonide OINT</i>	NP	
<i>calcipotriene-betamethasone dipropionate SUSP</i>	NP		<i>desoximetasone CREA</i>	NP	
<i>clobetasol propionate emollient base 0.05 %</i>	NP		<i>desoximetasone GEL</i>	NP	
<i>clobetasol propionate emulsion</i>	NP		<i>desoximetasone LIQD</i>	NP	
<i>clobetasol propionate CREA 0.05 %</i>	NP		<i>desoximetasone OINT</i>	NP	
<i>clobetasol propionate FOAM</i>	NP		<i>diflorasone diacetate CREA</i>	NP	
			<i>diflorasone diacetate OINT</i>	NP	
			<i>DIPROLENE OINT (betamethasone dipropionate augmented)</i>	NP	
			<i>DUOBRII</i>	NP	
			<i>ENSTILAR FOAM</i>	NP	
			<i>EPIFOAM FOAM</i>	P	
			<i>fluocinolone acetonide CREA</i>	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>fluocinolone acetonide OIL</i>	P		<i>hydrocortisone butyrate hydrophilic lipo base</i>	NP	
<i>fluocinolone acetonide OINT</i>	NP		<i>hydrocortisone butyrate CREA</i>	NP	
<i>fluocinolone acetonide SOLN</i>	NP		<i>hydrocortisone butyrate LOTN</i>	NP	
<i>fluocinolone acetonide SOLN</i>	P		<i>hydrocortisone butyrate OINT</i>	NP	
<i>fluocinonide emulsified base</i>	NP		<i>hydrocortisone butyrate SOLN</i>	NP	
<i>fluocinonide CREA</i>	NP		HYDROCORTISONE COMPLETE KIT THPK	P	
<i>fluocinonide GEL</i>	NP		<i>hydrocortisone valerate CREA</i>	NP	
<i>fluocinonide OINT</i>	P		<i>hydrocortisone valerate OINT</i>	NP	
<i>fluocinonide SOLN</i>	NP		HYDROCORTISONE CREA	NP	
<i>flurandrenolide LOTN</i>	NP		HYDROXYM GEL	P	
<i>fluticasone propionate CREA 0.05 %</i>	P		IMPEKLO LOTN	NP	
<i>fluticasone propionate LOTN</i>	NP		KENALOG AERS (<i>triamcinolone acetonide (topical)</i>)	NP	
<i>fluticasone propionate OINT</i>	P		LEXETTE FOAM	NP	
<i>halcinonide CREA</i>	NP		LOCOID LIPOCREAM	NP	
<i>halobetasol propionate CREA</i>	NP		LOCOID LOTN (<i>hydrocortisone butyrate</i>)	NP	
<i>halobetasol propionate FOAM</i>	NP		<i>mometasone furoate CREA</i>	P	
<i>halobetasol propionate OINT</i>	NP		<i>mometasone furoate OINT</i>	P	
HALOG CREA (<i>halcinonide</i>)	NP		<i>mometasone furoate SOLN</i>	P	
HALOG OINT	NP		OLUX FOAM (<i>clobetasol propionate</i>)	NP	
HALOG SOLN	NP		PANDEL	NP	
<i>hydrocortisone (topical) CREA</i>	P	RX/OTC	<i>prednicarbate OINT</i>	NP	
<i>hydrocortisone (topical) LOTN 2.5 %</i>	P		SYNALAR CREAM KIT	NP	
<i>hydrocortisone (topical) OINT 1 %, 2.5 %</i>	P	RX/OTC	SYNALAR OINTMENT KIT	NP	
<i>hydrocortisone acetate (topical) OINT</i>	P		SYNALAR TS	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SYNALAR CREA <i>(fluocinolone acetonide)</i>	NP		DUPIXENT SOSY	P	SP; PA
SYNALAR OINT <i>(fluocinolone acetonide)</i>	NP		OPZELURA	NP	
SYNALAR SOLN <i>(fluocinolone acetonide)</i>	NP		Emollient/Keratolytic Agents		
TACLONEX OINT <i>(calcipotriene-betamethasone dipropionate)</i>	NP		<i>urea CREA 20 %</i>	NP	RX/OTC
TACLONEX SUSP <i>(calcipotriene-betamethasone dipropionate)</i>	NP		Emollients		
TEXACORT SOLN 2.5 %	NP		<i>colloidal oatmeal PACK 100 %</i>	P	
TOPICORT CREA <i>(desoximetasone)</i>	NP		<i>glycerin (topical)</i>	P	
TOPICORT GEL <i>(desoximetasone)</i>	NP		LACTIC ACID E	P	
TOPICORT LIQD <i>(desoximetasone)</i>	NP		LACTIC ACID LOTN	P	
TOPICORT OINT <i>(desoximetasone)</i>	NP		Hair Growth Agents		
TOVET KIT	NP		<i>bimatoprost (topical)</i>	NP	
<i>triamcinolone acetonide (topical) AERS</i>	NP		Immunomodulating Agents - Topical		
<i>triamcinolone acetonide (topical) CREA</i>	P		<i>imiquimod 3.75 %</i>	NP	
<i>triamcinolone acetonide (topical) LOTN</i>	P		<i>imiquimod</i>	P	
<i>triamcinolone acetonide (topical) OINT 0.05 %</i>	NP		ZYCLARA (<i>imiquimod</i>)	NP	
<i>triamcinolone acetonide (topical) OINT</i>	P		ZYCLARA PUMP	NP	
ULTRAVATE LOTN	NP		ZYCLARA PUMP <i>(imiquimod)</i>	NP	
VANOS CREA <i>(fluocinonide)</i>	NP		Immunosuppressive Agents - Topical		
Eczema Agents			ELIDEL (<i>pimecrolimus</i>)	P	QL(400 gm per 365 day(s) retail); PA
ADBRY	P	SP; PA	<i>pimecrolimus</i>	NP	QL(400 gm per 365 day(s) retail); PA
CIBINQO	NP	SP	<i>tacrolimus (topical) OINT</i>	P	QL(400 gm per 365 day(s) retail); PA
DUPIXENT SOPN	P	SP; PA	Keratolytic/Antimitotic/Vesicant Agents		
			BETASAL SHAM	P	
			CVS PSORIASIS MEDICATED SHAMPOO PLUS CONDITIONER SHAM	P	
			CVS THERAPEUTIC DANDRUFFMAXIMUM STRENGTH SHAM	P	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
DENOREX EXTRA STRENGTH MEDICATED SHAM	P		BURN RELIEF/LIDOCAINE/ALOE	P	
DERMAREST PSORIASIS MEDICATED SHAMPOO PLUS CONDITIONER SHAM	P		<i>capsaicin CREA 0.025 %, 0.075 %</i>	P	
DHS SAL SHAM	P		CVS AFTERSUN ALOE VERA COOLING GEL/LIDOCAINE GEL	P	
MG217 DANDRUFF THERAPEUTIC SHAMPOO/CONDITIONER SHAM	P		<i>dibucaine</i>	P	
MG217 PSORIASIS THERAPEUTIC SHAMPOO/CONDITIONER SHAM	P		ITCH-X GEL	P	
NEUTROGENA T/SAL SHAM	P		ITCH-X SOLN	P	
P & S SHAM	P		<i>lidocaine hcl CREA 3 %, 4 %</i>	P	
PODOCON-25 SOLN	P		<i>lidocaine hcl CREA 4 %</i>	NP	
<i>podofilox GEL</i>	P		<i>lidocaine hcl GEL</i>	P	RX/OTC
<i>podofilox SOLN</i>	P		<i>lidocaine hcl PRSY</i>	P	
<i>salicylic acid LIQD 2 %</i>	NP		<i>lidocaine AERO</i>	P	
<i>salicylic acid LIQD 3 %, 17 %</i>	P		<i>lidocaine-benzalkonium LIQD 2.5 %-0.13 %</i>	P	
SELSUN BLUE DEEP CLEANSING SHAM	P		<i>lidocaine CREA 4 %</i>	P	
SELSUN BLUE NATURALS DRYSCALP SHAM	P		<i>lidocaine OINT</i>	P	
THERAPEUTIC DANDRUFF SHAM	P		<i>lidocaine-prilocaine CREA</i>	P	
THERAPEUTIC T+PLUS MAXIMUM STRENGTH SHAM	P		<i>lidocaine-prilocaine KIT</i>	P	
Liniments			<i>lidocaine PTCH 4 %, 5 %</i>	P	
<i>liniments & rubs LOTN</i>	P		<i>lidocaine PTCH 5 %</i>	NP	
<i>trolamine salicylate CREA</i>	P		<i>lidocaine-transparent dressing 4 %</i>	P	
Local Anesthetics - Topical			LIDODERM PTCH (<i>lidocaine</i>)	NP	
<i>benzocaine (topical) OINT</i>	P		OUTGRO PAIN RELIEF LIQD	P	
<i>benzocaine-triclosan</i>	P		<i>pramoxine hcl LOTN</i>	P	
			<i>pramoxine-calamine LOTN</i>	P	
			<i>pramoxine-menthol CREA</i>	P	
			<i>pramoxine-zinc acetate</i>	P	
			QUTENZA	NP	
			ZTLIDO PTCH	NP	
			Misc. Dermatological Products		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ALEVICYN ANTIPRURITIC GEL GEL	P	RX/OTC	CUTTER SKINSATIONS LIQD	P	
ALEVICYN ANTIPRURITIC SG GEL	P	RX/OTC	CUTTER SPORT AERO	P	
HALUCORT GEL	P	RX/OTC	CUTTER AERO	P	
LEVICYN GEL	P	RX/OTC	CVS INSECT REPELLENT AERO	P	
NONYX GEL	P	RX/OTC	CVS TOTAL HOME INSECT REPELLENT AERO	P	
OC8 GEL	P	RX/OTC	DRYSOL SOLN	P	
SEBUDERM GEL	P	RX/OTC	MAXI DEET LIQD	P	
STRATA CTX GEL	P	RX/OTC	NATRAPEL 12-HOUR TICK & INSECT REPELLENT CONTINUOUS SPRAY AERO	P	
STRATA MARK GEL	P	RX/OTC	NATRAPEL LIQD	P	
STRATA XRT GEL	P	RX/OTC	OFF ACTIVE AERO	P	
Misc. Topical			OFF DEEP WOODS DRY AERO	P	
<i>benzoin compound TINC</i>	P	RX/OTC	OFF DEEP WOODS SPORTSMEN AERO	P	
COLEMAN 100 MAX INSECT REPELLENT/CONTINUOUS SPRAY AERO	P		OFF DEEP WOODS SPORTSMEN LIQD	P	
COLEMAN 100 MAX INSECT REPELLENT LIQD	P		OFF DEEP WOODS AERO	P	
COLEMAN INSECT REPELLENT/HIGH & DRY AERO	P		OFF DEEP WOODS LIQD	P	
COLEMAN INSECT REPELLENT/SPORTSMEN AERO	P		OFF FAMILYCARE CLEAN FEEL LIQD	P	
CUTTER ALL FAMILY AERO	P		OFF FAMILYCARE SMOOTH & DRY AERO	P	
CUTTER ALL FAMILY LIQD	P		OFF FAMILYCARE TROPICAL FRESH LIQD	P	
CUTTER BACKWOODS DRY AERO	P		OFF FAMILYCARE UNSCENTED LIQD	P	
CUTTER BACKWOODS AERO	P		OFF SMOOTH & DRY AERO	P	
CUTTER BACKWOODS LIQD	P		RANGER READY REPELLENT LIQD	P	
CUTTER DRY AERO	P		REPEL 100 LIQD	P	
CUTTER SKINSATIONS AERO	P		REPEL FAMILY DRY AERO	P	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
REPEL FAMILY AERO	P		PALMERS COCOA BUTTER FORMULA FOOT MAGIC SCRUB CREA	P	
REPEL HUNTERS FORMULA AERO	P		UDDERLY SMOOTH FOOT CREA	P	
REPEL SPORTSMEN DRY AERO	P		Rosacea Agents		
REPEL SPORTSMEN MAX AERO	P		<i>azelaic acid GEL</i>	P	
REPEL SPORTSMEN MAX LIQD	P		<i>doxycycline (rosacea)</i>	NP	
REPEL SPORTSMEN AERO	P		<i>metronidazole (topical) CREA</i>	P	
REPEL TICK DEFENSE AERO	P		<i>metronidazole (topical) GEL</i>	P	
SAWYER INSECT REPELLENT AERO	P		<i>metronidazole (topical) LOTN</i>	P	
SAWYER PREMIUM INSECT REPELLENT LIQD	P		NORITATE CREA	P	
ULTRATHON INSECT REPELLENT 8 AERO	P		ROSADAN KIT	P	
<i>zinc oxide (topical) OINT 20 %</i>	P		Scabicides & Pediculicides		
Phosphodiesterase 4 (PDE4) Inhibitors - Topical			<i>crotamiton LOTN</i>	NP	
EUCRISA	NP	QL(400 gm per 365 day(s) retail); ST	<i>ivermectin (pediculicide)</i>	NP	RX/OTC
Podiatric Products			<i>malathion</i>	NP	
AMLACTIN FOOT CREAM THERAPY CREA	P		NATROBA (<i>spinosad</i>)	P	
AMLACTIN FOOT REPAIR CREA	P		OVIDE (<i>malathion</i>)	NP	
DR TEALS SHEA ENRICHED FOOT CREA	P		<i>permethrin AERO</i>	P	
ELON HERBAL FOOT CREAM CREA	P		<i>permethrin CREA</i>	P	
EUCERIN ADVANCED REPAIR LIGHT FEEL FOOT CREAM CREA	P		<i>permethrin LIQD EX</i>	P	
GOLD BOND FOOT CREA	P		<i>pyrethrins-piperonyl butoxide SHAM 4 %-0.3 %-0.33 %, 4 %-0.33 %</i>	P	
			RID ESSENTIAL LICE ELIMINATION KIT KIT EX	NP	
			SKLICE (<i>ivermectin (pediculicide)</i>)	NP	RX/OTC
			<i>spinosad</i>	NP	
			VANALICE GEL	NP	
			Tar Products		
			BETA CARE BETATAR GEL SHAM	P	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
coal tar extract SHAM 0.5 %, 1 %	P		INTRASITE GEL	P	RX/OTC
coal tar extract SHAM 0.5 %, 1 %	P		APPLIPAK GEL		
coal tar extract SOLN	P		KENDALL AMORPHOUS HYDROGEL WOUND DRESSING GEL	P	RX/OTC
DHS TAR GEL SHAM (coal tar extract)	P		KERAGEL GEL	P	RX/OTC
DHS TAR SHAM (coal tar extract)	P		KERAGELT GEL	P	RX/OTC
X-SEB T PEARL SHAM	P		L-MESITRAN SOFT WOUND GEL GEL	P	RX/OTC
X-SEB T PLUS SHAM	P		MEDIHONEY WOUND/BURN DRESSING GEL	P	RX/OTC
Wound Care Products			NORMLGEL AG GEL	P	RX/OTC
ACTIMARIS WOUND GEL GEL	P	RX/OTC	NU-GEL COLLAGEN WOUND DRESSING GEL	P	RX/OTC
AMERIGEL HYDROGEL WOUND DRESSING GEL	P	RX/OTC	RADIAPLEXRX GEL	P	RX/OTC
AMERIGEL WOUND DRESSING GEL	P	RX/OTC	RESTA SILVER GEL GEL	P	RX/OTC
ARIDA GEL	P	RX/OTC	RESTORE HYDROGEL DRESSING GEL	P	RX/OTC
ATRAPRO ANTIPRURITIC HYDROGEL GEL	P	RX/OTC	REVITADERM WOUND CARE GEL	P	RX/OTC
AZADROX GEL	P	RX/OTC	SILVERMED GEL	P	RX/OTC
BASADROX GEL	P	RX/OTC	SILVRSTAT WOUND DRESSING GEL	P	RX/OTC
CURAFIL GEL WOUND DRESSING GEL	P	RX/OTC	SOLOSITE GEL	P	RX/OTC
CVS ANTI-MICROBIAL SILVER WOUND GEL GEL	P	RX/OTC	SOLOX GEL	P	RX/OTC
CVS MANUKA HONEY WOUND GEL GEL	P	RX/OTC	STIMULEN GEL	P	RX/OTC
DERMAGRAN HYDROGEL WOUND DRESSING GEL	P	RX/OTC	STRATA GRT GEL	P	RX/OTC
DERMAGRAN-B HYDROPHILIC WOUND DRESSING GEL	P	RX/OTC	TEGADERM HYDROGEL WOUND FILLER GEL	P	RX/OTC
DERPIXA GEL	P	RX/OTC	TRIDERGEL GEL	P	RX/OTC
DYNAGEL GEL	P	RX/OTC	WOUND GEL SPRAY GEL	P	RX/OTC
EXCEL-GEL GEL	P	RX/OTC	WOUND GEL GEL	P	RX/OTC
HAPRODERM GEL	P	RX/OTC	WOUN'DRES GEL	P	RX/OTC
			ZANABIN ANTIPRURITIC HYDROGEL GEL	P	RX/OTC
			ZENPHOR WOUND GEL GEL	P	RX/OTC
			DIAGNOSTIC PRODUCTS		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Diagnostic Drugs			BLOOD GLUCOSE TEST STRIPS PREMIUM STRP	NP	RX/OTC
GLUCAGON	P		BLOOD GLUCOSE TEST STRIPS333 STRP	NP	RX/OTC
Diagnostic Tests			BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC
ACCU-CHEK AVIVA PLUS STRP	NP	RX/OTC	BLULINK GLUCOSE TEST STRIPS STRP	NP	RX/OTC
ACCU-CHEK GUIDE TEST STRIPS STRP	NP	RX/OTC	CAREONE BLOOD GLUCOSE TEST STRIPS/PREMIUM STRP	NP	RX/OTC
ACCU-CHEK GUIDE STRP	NP	RX/OTC	CAREONE BLOOD GLUCOSE TEST STRIPS/VALUE STRP	NP	RX/OTC
ACCU-CHEK SMARTVIEW STRIPS STRP	NP	RX/OTC	CARESENS N BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC
ACCUTREND GLUCOSE STRP	NP	RX/OTC	CARESTART COVID-19 ANTIGEN HOME TEST KIT	P	
ADVOCATE REDI-CODE+ TESTSTRIPS STRP	NP	RX/OTC	CARETOUCH BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC
ADVOCATE REDI-CODE STRP	NP	RX/OTC	CHEMSTRIP 10 MD	P	
ADVOCATE TEST STRIPS STRP	NP	RX/OTC	CHEMSTRIP -10 WITH SG	P	
AGAMATRIX AMP NO CODE TEST STRIPS STRP	NP	RX/OTC	CHEMSTRIP 2 GP STRIPS	P	
AGAMATRIX JAZZ TEST STRIPS STRP	NP	RX/OTC	CHEMSTRIP 5 OB	P	
AGAMATRIX PRESTO TEST STRIPS STRP	NP	RX/OTC	CHEMSTRIP 7	P	
ALBUSTIX STRP	P		CHEMSTRIP 9 STRIPS	P	
ASSURE 4 TEST STRIPS STRP	NP	RX/OTC	CHEMSTRIP MICRAL STRP	P	
ASSURE PLATINUM TEST STRIPS STRP	NP	RX/OTC	CHEMSTRIP UGK	P	
ASSURE PRISM MULTI TEST STRIPS STRP	NP	RX/OTC	CHEMSTRIP-K STRP	P	
AZO TEST STRIPS STRP	P		CLEVER CHEK AUTO-CODE TEST STRIPS STRP	NP	RX/OTC
BINAXNOW COVID-19 AG CARD HOME TEST KIT	P		CLEVER CHEK AUTO-CODE VOICE TEST STRIPS STRP	NP	RX/OTC
BIOTEL CARE BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	CLEVER CHEK TEST STRIPS STRP	NP	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CLEVER CHOICE AUTO-CODE PRO TEST STRIPS STRP	NP	RX/OTC	EASY TRAK II BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC
CLEVER CHOICE MICRO TESTSTRIPS STRP	NP	RX/OTC	EASYGLUCO STRP	NP	RX/OTC
CLEVER CHOICE NO CODING TEST STRIPS STRP	NP	RX/OTC	EASYMAX 15 TEST STRIPS STRP	NP	RX/OTC
CLEVER CHOICE TALK NO CODING TEST STRIPS STRP	NP	RX/OTC	EASYMAX TEST STRIPS STRP	NP	RX/OTC
CLINISTIX UTI TEST STRIPS STRP	P		ELEMENT COMPACT TEST STRIPS STRP	NP	RX/OTC
CONTOUR BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	ELEMENT TEST STRIPS STRP	NP	RX/OTC
CONTOUR NEXT BLOOD GLUCOSE TEST STRP	NP	RX/OTC	ELLUME COVID-19 HOME TEST KIT	P	
COOL BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	EMBRACE BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC
CVS ADVANCED GLUCOSE METER TEST STRIPS STRP	NP	RX/OTC	EMBRACE EVO BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC
CVS GLUCOSE METER TEST STRIPS STRP	NP	RX/OTC	EMBRACE PRO BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC
CVS KETONE CARE	P		EMBRACE TALK BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC
DIATRUE PLUS BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	EQ BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC
EASY PLUS II BLOOD GLUCOSE TEST STRP	NP	RX/OTC	EVOLUTION AUTOCODE STRP	NP	RX/OTC
EASY STEP TEST STRIPS STRP	NP	RX/OTC	FIFTY50 GLUCOSE TEST STRIP 2.0 STRP	NP	RX/OTC
EASY TALK BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	FLOWFLEX COVID-19 ANTIGEN HOME TEST KIT	P	
EASY TALK PLUS II BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	FORA 6 CONNECT/GTEL BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC
EASY TOUCH GLUCOSE TEST STRIPS STRP	NP	RX/OTC	FORA 6 CONNECT STRP	NP	RX/OTC
EASY TRAK BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	FORA BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
FORA D15G BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	FORACARE TEST N GO TEST STRIPS STRP	NP	RX/OTC
FORA D20 BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	FORTISCARE BLOOD GLUCOSETEST STRIP STRP	NP	RX/OTC
FORA D40/G31 BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	FORTISCARE G1 BLOOD GLUCOSE TEST STRIP STRP	NP	RX/OTC
FORA G20 BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	FREESTYLE INSULINX BLOODGLUCOSE TEST STRIPS STRP	P	RX/OTC
FORA G30/PREMIUM V10 BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	FREESTYLE INSULINX BLOODGLUCOSE TEST STRP	NP	RX/OTC
FORA GD20 TEST STRIPS STRP	NP	RX/OTC	FREESTYLE LITE TEST STRIPS STRP	NP	RX/OTC
FORA GD50 BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	FREESTYLE LITE TEST STRIPS STRP	P	RX/OTC
FORA GTEL BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	FREESTYLE PRECISION NEO BLOOD GLUCOSE TEST STRIPS STRP	P	RX/OTC
FORA TN'G ADVANCE PRO BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	FREESTYLE TEST STRIPS STRP	P	RX/OTC
FORA TN'G/TN'G VOICE BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	GE100 BLOOD GLUCOSE TESTSTRIPS STRP	NP	RX/OTC
FORA V10 BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	GENABIO COVID-19 RAPID SELF TEST KIT 1-PACK KIT	P	
FORA V12 BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	GENABIO COVID-19 RAPID SELF TEST KIT 2-PACK KIT	P	
FORA V20 BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	GHT TEST STRIPS STRP	NP	RX/OTC
FORA V30A BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	GLUCOCARD 01 SENSOR PLUS STRP	NP	RX/OTC
FORACARE GD40 STRP	NP	RX/OTC	GLUCOCARD 01 SENSOR PLUSTEST STRIPS STRP	NP	RX/OTC
FORACARE PREMIUM V10 TESTSTRIPS STRP	NP	RX/OTC	GLUCOCARD EXPRESSION BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC
			GLUCOCARD SHINE TEST STRIPS STRP	NP	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
GLUCOCARD VITAL TEST STRIPS STRP	NP	RX/OTC	KETO-DIASTIX	P	
GLUCOCOM TEST STRIPS STRP	NP	RX/OTC	KETONE TEST STRIPS STRP	P	
GLUCONAVII BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	KETONE STRP	P	
GLUCOSE METER TEST STRIPS ADVANCED STRP	NP	RX/OTC	KETOSTIX STRP	P	
GNP EASY TOUCH GLUCOSE TEST STRIPS STRP	NP	RX/OTC	KROGER BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC
GNP TRUE METRIX SELF MONITORING BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	KROGER HEALTHPRO GLUCOSE TEST STRIPS STRP	NP	RX/OTC
GNP TRUETRACK BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	KROGER PREMIUM BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC
GNP URINARY TRACT INFECTION TEST STRIPS STRP	P		LUCIRA CHECK IT COVID-19 TEST KIT	P	RX/OTC
GOODSENSE PREMIUM BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	MEIJER BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC
HW EMBRACE PRO BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	MICRODOT TEST STRIPS STRP	NP	RX/OTC
HW EMBRACE TALK BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	MICRODOT XTRA TEST STRIPS STRP	NP	RX/OTC
IGLUCOSE BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	MM BLULINK GLUCOSE TEST STRIPS STRP	NP	RX/OTC
IHEALTH COVID-19 ANTIGEN RAPID TEST KIT	P		MM EASY TOUCH GLUCOSE TEST STRIPS STRP	NP	RX/OTC
INFINITY BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	MULTISTIX 10 SG	P	
INFINITY VOICE STRP	NP	RX/OTC	MYGLUCOHEALTH BLOOD GLUCOSE TEST STRP	NP	RX/OTC
INTELISWAB COVID-19 RAPID TEST KIT	P		NEUTEK 2TEK TEST STRIPS STRP	NP	RX/OTC
			NOVA MAX GLUCOSE TEST STRIPS STRP	NP	RX/OTC
			ON CALL EXPRESS BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC
			ONETOUCH ULTRA STRP	NP	RX/OTC
			ONETOUCH VERIO TEST STRIPS STRP	NP	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
OPTIUMEZ TEST STRIPS STRP	NP	RX/OTC	RELION KETONE TEST STRIPS STRP	P	
PHARMACIST CHOICE AUTOCODE BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	RELION PREMIER BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC
PHARMACIST CHOICE NO CODING BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	RELION PRIME BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC
PIP BLOOD GLUCOSE TEST STRIP STRP	NP	RX/OTC	RELION TRUE METRIX BLOODGLUCOSE TEST STRIPS STRP	NP	RX/OTC
PRECISION XTRA BLOOD GLUCOSE TEST STRIPS STRP	P	RX/OTC	RELION ULTIMA BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC
PREMIUM BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	REXALL BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC
PRO VOICE V8/V9 BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	RIGHTEST GS100 BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC
PRODIGY NO CODING BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	RIGHTEST GS300 BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC
PTS PANELS LIPID PANEL+EGLU TEST STRIPS	NP		RIGHTEST GS333 BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC
QUICKVUE AT-HOME COVID-19 TEST KIT	P		RIGHTEST GS550 BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC
QUINTET AC BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	RIGHTEST GT333 BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC
QUINTET BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	SMART SENSE PREMIUM BLOODGLUCOSE STRIPS STRP	NP	RX/OTC
RA URINARY TRACT INFECTION TEST STRIPS STRP	P		SMART SENSE VALUE BLOOD GLUCOSE STRIPS STRP	NP	RX/OTC
REFUAH PLUS BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	SMARTTEST BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC
RELION CONFIRM/MICRO TEST STRIPS STRP	NP	RX/OTC	SOLUS V2 AUDIBLE TEST STRP	NP	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TGT BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	HORMONE PROTECT CAPS	P	RX/OTC
TRUE METRIX BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	LEPTIN MANAGER CAPS	P	RX/OTC
TRUE METRIX PRO GLUCOSE TEST STRIPS STRP	NP	RX/OTC	MALE SUPPORT CAPS	P	RX/OTC
TRUE METRIX SELF MONITORING BLOOD GLUCOSE STRIPS STRP	NP	RX/OTC	METHIONINE-200 CAPS	P	RX/OTC
TRUETEST STRIPS STRP	NP	RX/OTC	<i>nutritional supplements</i> CAPS	P	RX/OTC
TRUETRACK BLOOD GLUCOSE TEST STRP	NP	RX/OTC	PROSTATE 2.4 CAPS	P	RX/OTC
TRUETRACK TEST STRP	NP	RX/OTC	PROTEOLIN CAPS	P	RX/OTC
UNISTRIP1 GENERIC STRP	NP	RX/OTC	VITEYES TEAR SUPPORT CAPS	P	RX/OTC
VERASENS BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes		
VIVAGUARD INO BLOOD GLUCOSE TEST STRIPS STRP	NP	RX/OTC	Digestive Enzymes		
DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS			Digestive Enzymes		
Nutritional Supplements			BIO-ZYME TABS	P	
AMINO PM RMS CAPS	P	RX/OTC	CREON CPEP	P	
ANTI-INFLAMMATORY ENZYME FORMULA CAPS	P	RX/OTC	CVS DAIRY RELIEF EXTRA STRENGTH TABS	P	
ANTIOXIDANT FORMULA CAPS	P	RX/OTC	DIGESTIVE ENZYMES TABS	P	
BIO-IMMUNEX CAPS	P	RX/OTC	EQL DIGESTIVE ENZYMES TABS	P	
CARDIO COMPLETE CAPS	P	RX/OTC	<i>lactase CHEW 9000 UNIT</i>	P	
CHRONOVISION CAPS	P	RX/OTC	<i>lactase TABS 3000 UNIT, 9000 UNIT</i>	P	
ESTROVEN WEIGHT MANAGEMENT CAPS	P	RX/OTC	OMNIGEST EZ TABS	P	
HOMOCYSTEINE SUPPORT CAPS	P	RX/OTC	PARVENZYME DIGESTIVE ENZYME FORMULA TABS	P	
			PERTZYE CPEP	NP	
			SUPER ENZYMES TABS	P	
			TYLER PANPLEX 2-PHASE TBEC	P	
			VIOKACE TABS	NP	

Drug Name	Drug Tier	Requirements/Limits
ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 252600 UNIT-189600 UNIT-60000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT	P	
DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure		
Carbonic Anhydrase Inhibitors		
<i>acetazolamide CP12</i>	P	
<i>acetazolamide TABS</i>	P	
<i>dichlorphenamide</i>	NP	SP
KEVEYIS (<i>dichlorphenamide</i>)	NP	SP
<i>methazolamide TABS</i>	NP	
Diuretic Combinations		
ALDACTAZIDE	NP	
<i>amiloride & hydrochlorothiazide</i>	P	
<i>spironolactone & hydrochlorothiazide</i>	P	
<i>triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG</i>	P	
<i>triamterene & hydrochlorothiazide TABS</i>	P	
Loop Diuretics		
<i>bumetanide TABS</i>	P	
EDECIN (<i>ethacrynic acid</i>)	NP	
<i>ethacrynic acid</i>	NP	
<i>furosemide SOLN OR 10 MG/ML, 40 MG/5ML</i>	P	
<i>furosemide TABS</i>	P	

Drug Name	Drug Tier	Requirements/Limits
LASIX TABS (<i>furosemide</i>)	NP	
<i>torseamide TABS</i>	P	
Potassium Sparing Diuretics		
ALDACTONE TABS (<i>spironolactone</i>)	NP	
<i>amiloride hcl TABS</i>	P	
CAROSPIR SUSP (<i>spironolactone</i>)	NP	
<i>spironolactone SUSP</i>	P	
<i>spironolactone TABS</i>	P	
<i>triamterene CAPS</i>	NP	
Thiazides and Thiazide-Like Diuretics		
<i>chlorthalidone 25 MG, 50 MG</i>	P	
DIURIL SUSP	P	
<i>hydrochlorothiazide CAPS</i>	P	
<i>hydrochlorothiazide TABS</i>	P	
<i>indapamide TABS 1.25 MG, 2.5 MG</i>	P	
<i>metolazone</i>	P	
THALITONE	NP	
ENDOCRINE AND METABOLIC AGENTS - MISC. - Drugs to Treat Bone Disease and Regulate Hormones		
Bone Density Regulators		
ACTONEL TABS 35 MG, 150 MG (<i>risedronate sodium</i>)	NP	
<i>alendronate sodium SOLN</i>	NP	
<i>alendronate sodium TABS 10 MG, 35 MG, 70 MG</i>	P	
AELVIA TBEC (<i>risedronate sodium</i>)	NP	
BINOSTO TBEF	NP	
<i>calcitonin (salmon) IJ</i>	P	
<i>calcitonin (salmon) NA</i>	P	
EVENTY	NP	SP; PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
FORTEO SOPN <i>(teriparatide recombinant)</i>	NP	SP; PA	Hormone Receptor Modulators		
FOSAMAX PLUS D	NP		EVISTA <i>(raloxifene hcl)</i>	NP	ST
FOSAMAX TABS 70 MG <i>(alendronate sodium)</i>	NP		<i>raloxifene hcl</i>	NP	
<i>ibandronate sodium TABS</i>	P		LHRH/GnRH Agonist Analog Pituitary Suppressants		
PROLIA SOSY	P	SP; PA	FENSOLVI SC	P	SP
<i>risedronate sodium TABS</i>	NP		LUPRON DEPOT-PED (1-MONTH)	P	SP
<i>risedronate sodium TBEC</i>	NP		LUPRON DEPOT-PED (3-MONTH)	P	SP
<i>teriparatide (recombinant) SOPN</i>	NP	SP; PA	LUPRON DEPOT-PED (6-MONTH) IM	P	SP
TYMLOS	NP	SP; PA	SUPPRELIN LA	P	SP
XGEVA SOLN	NP	SP; PA	SYNAREL	P	SP
GnRH/LHRH Antagonists			TRIPTODUR	P	SP
ORILISSA	P	SP; PA	Metabolic Modifiers		
Growth Hormones			<i>calcitriol CAPS</i>	P	
GENOTROPIN MINIQUICK PRSY	P	SP; PA	<i>calcitriol SOLN OR</i>	P	
GENOTROPIN CART SC	P	SP; PA	<i>levocarnitine (metabolic modifiers) SOLN OR 1 GM/10ML</i>	P	
HUMATROPE CART IJ	NP	SP; PA	<i>levocarnitine (metabolic modifiers) TABS</i>	P	
NGENLA	NP	SP	<i>nitisinone CAPS</i>	P	SP
NORDITROPIN FLEXP SOPN	P	SP; PA	RAYALDEE	NP	
NUTROPIN AQ NUSPIN 10 SOPN	P	SP; PA	Mineralocorticoid Receptor Antagonists		
NUTROPIN AQ NUSPIN 20 SOPN	P	SP; PA	KERENDIA	NP	
NUTROPIN AQ NUSPIN 5 SOPN	P	SP; PA	Natriuretic Peptides		
OMNITROPE SOCT	NP	SP; PA	VOXZOGO	NP	SP
OMNITROPE SOLR SC	NP	SP; PA	Posterior Pituitary Hormones		
SAIZEN IJ 5 MG	NP	SP; PA	<i>desmopressin acetate spray</i>	P	
SEROSTIM SC 4 MG, 5 MG, 6 MG	NP	SP; PA	<i>desmopressin acetate spray refrigerated</i>	P	
SKYTROFA	NP	SP; PA	<i>desmopressin acetate SOLN IJ</i>	P	SP
SOGROYA	NP	SP			
ZOMACTON SOLR SC	NP	SP; PA			

Drug Name	Drug Tier	Requirements/Limits
<i>desmopressin acetate</i> TABS	P	
NOCDURNA SUBL	NP	
Somatostatic Agents		
<i>lanreotide acetate</i>	P	SP
LANREOTIDE ACETATE	P	SP
<i>octreotide acetate SOLN</i>	P	SP
<i>octreotide acetate SOSY</i>	P	SP
SANDOSTATIN LAR DEPOT KIT	P	SP
SOMATULINE DEPOT	P	SP
ESTROGENS - Hormone Replacement/Modifying Drugs		
Estrogen Combinations		
BIJUVA 1 MG-100 MG	NP	
<i>estradiol & norethindrone acetate</i> TABS	P	
MYFEMBREE	P	PA
<i>norethindrone acetate-ethinyl estradiol</i>	P	
ORIAHNN	NP	PA
PREMPRO	P	
Estrogens		
<i>estradiol PTWK</i>	P	
<i>estradiol</i> TABS	P	
MENEST 0.3 MG, 0.625 MG, 1.25 MG	P	
PREMARIN TABS	P	
FLUOROQUINOLONES - Drugs to Treat Bacterial Infections		
Fluoroquinolones		
BAXDELA TABS	NP	
<i>ciprofloxacin hcl</i> TABS	P	
<i>ciprofloxacin in d5w 5 %-400 MG/200ML</i>	P	
<i>ciprofloxacin SUSR 5 GM/100ML, 500 MG/5ML</i>	NP	

Drug Name	Drug Tier	Requirements/Limits
CIPRO SUSR	NP	
CIPRO TABS 250 MG, 500 MG (<i>ciprofloxacin hcl</i>)	NP	
<i>levofloxacin SOLN OR</i>	NP	
<i>levofloxacin</i> TABS	P	
<i>moxifloxacin hcl</i> TABS	NP	
<i>ofloxacin 300 MG, 400 MG</i>	NP	
GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs		
5-HT4 Receptor Agonists		
MOTEGRITY	NP	
Agents for Chronic Idiopathic Constipation (CIC)		
TRULANCE	P	
Antiflatulents		
<i>simethicone CAPS 125 MG</i>	P	
<i>simethicone CHEW</i>	P	
<i>simethicone CHEW</i>	P	
<i>simethicone LIQD OR 20 MG/0.3ML</i>	P	
<i>simethicone SUSP 20 MG/0.3ML</i>	P	
Bile Acid Synthesis Disorder Agents		
CHOLBAM	NP	SP
Gallstone Solubilizing Agents		
CHENODAL	NP	SP
URSO 250 TABS (<i>ursodiol</i>)	NP	
URSO FORTE TABS (<i>ursodiol</i>)	NP	
<i>ursodiol CAPS</i>	NP	
<i>ursodiol CAPS</i>	P	
<i>ursodiol</i> TABS	P	
Gastrointestinal Chloride Channel Activators		
AMITIZA (<i>lubiprostone</i>)	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>lubiprostone</i>	P		<i>mesalamine CPDR</i>	NP	
Gastrointestinal Stimulants			<i>mesalamine ENEM</i>	P	
<i>metoclopramide hcl SOLN OR 5 MG/5ML, 10 MG/10ML</i>	P		<i>mesalamine SUPP</i>	P	
<i>metoclopramide hcl TABS</i>	P		<i>mesalamine TBEC 800 MG</i>	NP	
Hepatotropics			<i>mesalamine TBEC 1.2 GM</i>	P	
REZDIFFRA	P	SP	OMVOH SOSY	NP	
Inflammatory Bowel Agents			PENTASA CPCR (<i>mesalamine</i>)	P	
APRISO CP24 (<i>mesalamine</i>)	P		PENTASA CPCR	P	
ASACOL HD TBEC (<i>mesalamine</i>)	NP		RENFLEXIS	P	SP
AVSOLA	P	SP	ROWASA (<i>mesalamine w/ cleanser</i>)	NP	
AZULFIDINE EN-TABS TBEC (<i>sulfasalazine</i>)	NP		SFROWASA ENEM	NP	
AZULFIDINE TABS (<i>sulfasalazine</i>)	NP		SKYRIZI SOCT 360 MG/2.4ML	NP	SP; PA
<i>balsalazide disodium CAPS</i>	P		SKYRIZI SOCT 180 MG/1.2ML	NP	SP
CANASA SUPP (<i>mesalamine</i>)	NP		SKYRIZI SOLN	NP	SP; PA
CIMZIA STARTER KIT PSKT	NP	SP; PA	STELARA 130 MG/26ML	NP	SP; PA
CIMZIA KIT	NP	SP; PA	<i>sulfasalazine TABS</i>	P	
CIMZIA PSKT	NP	SP; PA	<i>sulfasalazine TBEC</i>	P	
COLAZAL CAPS (<i>balsalazide disodium</i>)	NP		VELSIPTITY	NP	SP
DELZICOL CPDR (<i>mesalamine</i>)	P		Intestinal Acidifiers		
DIPENTUM	NP		<i>lactulose (encephalopathy)</i>	P	
ENTYVIO SOLR	NP	SP	Irritable Bowel Syndrome (IBS) Agents		
ENTYVIO SOPN	NP	SP	IBSRELA	NP	
INFLECTRA SOLR	P	SP	LINZESS	P	
LIALDA TBEC (<i>mesalamine</i>)	NP		Live Fecal Microbiota		
<i>mesalamine w/ cleanser</i>	NP		VOWST	NP	SP
<i>mesalamine CP24</i>	NP		Peripheral Opioid Receptor Antagonists		
<i>mesalamine CPCR</i>	NP		MOVANTIK	P	
			RELISTOR TABS	NP	
			SYMPROIC	NP	
			Phosphate Binder Agents		

Drug Name	Drug Tier	Requirements/Limits
AURYXIA	NP	PA
<i>calcium acetate (phosphate binder) CAPS</i>	P	
<i>calcium acetate (phosphate binder) TABS</i>	NP	RX/OTC
FOSRENOL CHEW (<i>lanthanum carbonate</i>)	NP	PA
FOSRENOL PACK	NP	PA
<i>lanthanum carbonate CHEW</i>	NP	PA
RENVELA PACK (<i>sevelamer carbonate</i>)	NP	PA
RENVELA TABS (<i>sevelamer carbonate</i>)	NP	PA
<i>sevelamer carbonate PACK</i>	NP	PA
<i>sevelamer carbonate TABS</i>	P	PA
<i>sevelamer hcl</i>	NP	PA
VELPHORO	NP	PA
GENERAL ANESTHETICS		
Volatile Anesthetics		
<i>desflurane</i>	P	
<i>sevoflurane</i>	P	
GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive Organs and Urinary System		
Alkalinizers		
<i>potassium citrate (alkalinizer) TBCR 10 MEQ, 540 MG, 1080 MG</i>	P	
<i>sodium citrate & citric acid</i>	P	RX/OTC
Genitourinary Irrigants		
<i>acetic acid 0.25 %</i>	P	
RENACIDIN	P	
Interstitial Cystitis Agents		
ELMIRON CAPS	P	

Drug Name	Drug Tier	Requirements/Limits
Prostatic Hypertrophy Agents		
<i>alfuzosin hcl</i>	P	
AVODART (<i>dutasteride</i>)	NP	
CARDURA XL	NP	
<i>dutasteride</i>	NP	
<i>dutasteride-tamsulosin hcl</i>	NP	
<i>finasteride</i>	P	
FLOMAX (<i>tamsulosin hcl</i>)	NP	
PROSCAR (<i>finasteride</i>)	NP	
RAPAFLO (<i>silodosin</i>)	NP	
<i>silodosin</i>	NP	
<i>tamsulosin hcl</i>	P	
Urinary Analgesics		
<i>phenazopyridine hcl TABS 100 MG, 95 MG, 99.5 MG, 100 MG, 200 MG</i>	P	
<i>phenazopyridine hcl TABS 100 MG, 95 MG, 99.5 MG, 100 MG, 200 MG</i>	P	
<i>phenazopyridine hcl TABS 95 MG, 99.5 MG</i>	NP	
GOUT AGENTS - Drugs to Treat Gout		
Gout Agent Combinations		
<i>colchicine w/ probenecid</i>	P	
Gout Agents		
<i>allopurinol</i>	P	
ALLOPURINOL	P	
<i>colchicine CAPS</i>	NP	
<i>colchicine TABS</i>	P	PA
COLCRYS TABS (<i>colchicine</i>)	NP	PA
<i>febuxostat</i>	P	
<i>febuxostat</i>	NP	
GLOPERBA SOLN OR	NP	

Drug Name	Drug Tier	Requirements/Limits
MITIGARE CAPS (<i>colchicine</i>)	NP	
ULORIC (<i>febuxostat</i>)	NP	
ZYLOPRIM 100 MG (<i>allopurinol</i>)	NP	
Uricosurics		
<i>probenecid</i>	P	
HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders		
Antihemophilic Products		
ADVATE	NP	SP
ADYNOVATE	NP	SP
AFSTYLA	P	SP
ALPHANATE SOLR	P	SP
ALPHANINE SD 500 UNIT, 1000 UNIT, 1500 UNIT	P	SP
ALPROLIX	P	SP
ALTUVIIIIO 250 UNIT, 500 UNIT, 1000 UNIT, 2000 UNIT, 3000 UNIT, 4000 UNIT	NP	SP
BENEFIX KIT	P	SP
ELOCTATE	NP	SP
ESPEROCT	NP	SP
HEMLIBRA	P	SP
HEMOFIL M SOLR 250 UNIT, 500 UNIT, 1000 UNIT, 1700 UNIT	P	SP
HUMATE-P SOLR	P	SP
IDELVION	NP	SP
IXINITY SOLR	P	SP
JIVI	P	SP
KOATE-DVI SOLR 1000 UNIT	P	SP
KOATE SOLR	P	SP
KOGENATE FS KIT	NP	SP
KOVALTRY	P	SP

Drug Name	Drug Tier	Requirements/Limits
NOVOEIGHT	P	SP
NUWIQ KIT 250 UNIT, 500 UNIT, 1000 UNIT, 2000 UNIT, 2500 UNIT, 3000 UNIT, 4000 UNIT	P	SP
NUWIQ KIT 1500 UNIT	NP	SP
NUWIQ SOLR 250 UNIT, 500 UNIT, 1000 UNIT, 2000 UNIT, 2500 UNIT, 3000 UNIT, 4000 UNIT	P	SP
NUWIQ SOLR 1500 UNIT	NP	SP
PROFILNINE	P	SP
REBINYN	NP	SP
RECOMBINATE SOLR	NP	SP
RIXUBIS SOLR	P	SP
ROCTAVIAN	NP	SP
VONVENDI	NP	SP
WILATE KIT	P	SP
XYNTHA	P	SP
XYNTHA SOLOFUSE	P	SP
Bradykinin B2 Receptor Antagonists		
FIRAZYR SOSY (<i>icatibant acetate</i>)	P	SP; PA
<i>icatibant acetate SOSY</i>	P	SP; PA
Complement Inhibitors		
BERINERT KIT	P	SP; PA
CINRYZE SOLR IV	P	SP; PA
HAEGARDA SOLR SC	P	SP; PA
RUCONEST	P	SP; PA
Hematorheologic Agents		
<i>pentoxifylline</i>	P	
Plasma Kallikrein Inhibitors		
KALBITOR	P	SP; PA
ORLADEYO	P	SP; PA
TAKHZYRO SOLN	P	SP; PA
TAKHZYRO SOSY	P	SP; PA
Platelet Aggregation Inhibitors		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>anagrelide hcl</i>	P		ALVAIZ	NP	SP
<i>aspirin-dipyridamole</i>	P		ARANESP ALBUMIN FREE SOLN 25 MCG/ML, 40 MCG/ML, 60 MCG/ML, 100 MCG/ML, 200 MCG/ML	NP	SP; PA
BRILINTA	P		ARANESP ALBUMIN FREE SOSY	NP	SP; PA
<i>cilostazol</i>	P		EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	P	SP; PA
<i>clopidogrel bisulfate</i>	P		FULPHILA	NP	SP
<i>dipyridamole</i>	P		FYLNETRA	NP	SP
PLAVIX 75 MG (<i>clopidogrel bisulfate</i>)	NP		GRANIX SOLN	P	SP
<i>prasugrel hcl</i>	P		GRANIX SOSY	P	SP
HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders			LEUKINE SOLR IJ	NP	SP
Agents for Sickle Cell Disease			MIRCERA	P	SP; PA
ADAKVEO	NP	SP	NEULASTA ONPRO KIT PSKT	NP	SP
DROXIA CAPS	P		NEULASTA SOSY	NP	SP
ENDARI	NP	SP	NEUPOGEN SOLN	P	SP
OXBRYTA TABS 500 MG	NP	SP	NEUPOGEN SOSY	P	SP
OXBRYTA TBSO	NP	SP	NIVESTYM SOLN	NP	SP
SIKLOS TABS	NP		NIVESTYM SOSY	NP	SP
Cobalamins			NYVEPRIA	P	SP
B-12 DOTS TBDP	P		PROCRIT	NP	SP; PA
B-12 TABS 2000 MCG	P		PROCRIT	NP	SP; PA
<i>cyanocobalamin SOLN NA 500 MCG/0.1ML</i>	P		RELEUKO SOLN	P	SP
<i>cyanocobalamin SUBL 2500 MCG</i>	P		RELEUKO SOSY	P	SP
<i>cyanocobalamin TABS 500 MCG, 1000 MCG</i>	NP		RETACRIT	P	SP; PA
<i>cyanocobalamin TABS 50 MCG, 100 MCG, 250 MCG, 500 MCG, 1000 MCG</i>	P		ROLVEDON	NP	SP
<i>cyanocobalamin TBCR</i>	P		STIMUFEND	NP	SP
Folic Acid/Folates			UDENYCA ONBODY SOSY	NP	SP
FOLIC ACID CAPS	P		UDENYCA SOAJ	NP	SP
<i>folic acid SOLN</i>	P		UDENYCA SOSY	NP	SP
<i>folic acid TABS</i>	P		ZARXIO	NP	SP
Hematopoietic Growth Factors			ZIEXTENZO	P	SP

Drug Name	Drug Tier	Requirements/Limits
Hematopoietic Mixtures		
ABATRON	P	
B COMPLEX/FOLIC ACID TABS	P	
<i>cyanocobalamin-methylcobalamin SUBL</i>	P	
<i>ferrous fumarate w/ b12-vit c-fa-ifc</i>	P	
<i>ferrous fumarate-fa-b complex-c-zn-mg-mn-cu TABS</i>	P	
<i>ferrous fumarate-folic acid</i>	P	
<i>folic acid-vitamin b6-vitamin b12 TABS 10 MG-800 MCG-115 MCG</i>	P	
FOLTABS 800 TABS	P	
HEMATINIC/FOLIC ACID	P	
<i>iron polysaccharide complex-vit b12-folic acid CAPS</i>	P	RX/OTC
<i>iron-vitamin c</i>	P	
<i>iron-vitamin c-vitamin b12-folic acid TABS</i>	P	RX/OTC
Iron		
<i>carbonyl iron SUSP</i>	P	
<i>carbonyl iron TABS</i>	P	
<i>ferrous fumarate TABS 324 MG</i>	P	
<i>ferrous gluconate TABS 27 MG, 240 MG</i>	P	
<i>ferrous sulfate dried TABS 200 MG</i>	P	
<i>ferrous sulfate SOLN 15 MG/ML, 300 MG/5ML</i>	P	
<i>ferrous sulfate SOLN 15 MG/ML, 300 MG/5ML</i>	P	
<i>ferrous sulfate TABS 27 MG, 65 MG, 325 MG</i>	P	
<i>ferrous sulfate TBEC 325 MG</i>	P	

Drug Name	Drug Tier	Requirements/Limits
<i>ferrous sulfate TBEC 324 MG</i>	NP	
INFED	P	
IRON CHEWS PEDIATRIC CHEW	P	
<i>polysaccharide iron complex CAPS 150 MG</i>	P	
PROFERRIN ES	P	
HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders		
Hemostatics - Systemic		
<i>aminocaproic acid TABS</i>	P	SP
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
Antihistamine Hypnotics		
<i>diphenhydramine hcl (sleep) CAPS 50 MG</i>	P	
<i>diphenhydramine hcl (sleep) TABS 25 MG</i>	P	
<i>diphenhydramine hcl (sleep) TABS 25 MG</i>	P	
<i>diphenhydramine-acetaminophen (sleep) TABS 500 MG-25 MG</i>	P	
Barbiturate Hypnotics		
<i>phenobarbital ELIX</i>	P	
<i>phenobarbital TABS</i>	P	
Hypnotics - Tricyclic Agents		
<i>doxepin hcl (sleep)</i>	NP	QL(1 ea daily)
Non-Barbiturate Hypnotics		
AMBIEN CR TBCR (<i>zolpidem tartrate</i>)	NP	QL(1 ea daily)
AMBIEN TABS (<i>zolpidem tartrate</i>)	NP	QL(1 ea daily)
DORAL (<i>quazepam</i>)	NP	
EDLUAR SUBL	NP	QL(1 ea daily)
<i>estazolam</i>	NP	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>eszopiclone</i>	NP	QL(1 ea daily)	EQUALACTIN CHEW	P	
<i>flurazepam hcl</i>	NP	QL(1 ea daily)	HYDROCIL INSTANT PACK	P	
HALCION 0.25 MG (<i>triazolam</i>)	NP	QL(1 ea daily)	KONSYL DAILY FIBER PACK 100 %	P	
IGALMI FILM	NP	QL(1 ea daily)	KONSYL ORIGINAL DAILY FIBER PACK	P	
LUNESTA (<i>eszopiclone</i>)	NP	QL(1 ea daily)	KONSYL-D POWD	P	
<i>quazepam</i>	NP		METAMUCIL WAFR	P	
RESTORIL (<i>temazepam</i>)	NP	QL(1 ea daily)	<i>methylcellulose (laxative) POWD</i>	P	
<i>temazepam 15 MG, 30 MG</i>	P	QL(1 ea daily)	<i>methylcellulose (laxative) TABS</i>	P	
<i>temazepam 7.5 MG, 22.5 MG</i>	NP	QL(1 ea daily)	NATURAL FIBER LAXATIVE POWD	P	
<i>triazolam</i>	NP	QL(1 ea daily)	NUTRISOURCE FIBER PACK	P	
<i>zaleplon</i>	P	QL(1 ea daily)	NUTRISOURCE FIBER POWD	P	
ZOLPIDEM TARTRATE CAPS	NP	QL(1 ea daily)	<i>psyllium CAPS 0.52 GM</i>	P	
<i>zolpidem tartrate SUBL</i>	NP	QL(1 ea daily)	<i>psyllium POWD 28.3 %, 30 %, 30.9 %, 33 %, 49 %, 58.6 %, 95 %, 100 %</i>	P	
<i>zolpidem tartrate TABS</i>	P	QL(1 ea daily)	Laxative Combinations		
<i>zolpidem tartrate TBCR</i>	NP	QL(1 ea daily)	CLENPIQ SOLN 12 GM/175ML-3.5 GM/175ML-10 MG/175ML	P	
Orexin Receptor Antagonists			GOLYTELY SOLR (<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate</i>)	P	
BELSOMRA	NP	QL(1 ea daily)	MOVIPREP (<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid</i>)	P	
DAYVIGO	NP	QL(1 ea daily)	<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid</i>	P	
QUVIVIQ	NP	QL(1 ea daily)	<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR</i>	P	
Selective Melatonin Receptor Agonists			<i>peg 3350-potassium chloride-sod bicarbonate-sod chloride</i>	P	
HETLIOZ LQ SUSP	NP	QL(5 ml daily); SP			
HETLIOZ CAPS (<i>tasimelteon</i>)	NP	QL(1 ea daily); SP			
<i>ramelteon</i>	NP	QL(1 ea daily)			
ROZEREM (<i>ramelteon</i>)	NP	QL(1 ea daily)			
<i>tasimelteon CAPS</i>	NP	QL(1 ea daily); SP			
LAXATIVES - Bowel Treatment Drugs					
Bulk Laxatives					
<i>calcium polycarbophil TABS</i>	P				
<i>calcium polycarbophil TABS</i>	P				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PLENVU	P		Saline Laxatives		
SENNAPLUS CAPS	P		FLEET ENEMA ENEM (sodium phosphates)	P	
<i>sennosides-docusate sodium TABS</i>	NP		<i>magnesium citrate 1.745 GM/30ML</i>	P	
<i>sennosides-docusate sodium TABS</i>	P		<i>magnesium citrate 1.745 GM/30ML</i>	NP	
<i>sennosides-docusate sodium TABS</i>	P		<i>magnesium hydroxide SUSP 7.75 %, 400 MG/5ML, 1200 MG/15ML, 2400 MG/30ML</i>	P	
SENNAPLUS S TABS (sennosides-docusate sodium)	P		<i>magnesium hydroxide SUSP 7.75 %, 400 MG/5ML, 1200 MG/15ML, 2400 MG/30ML</i>	P	
<i>sodium sulfate-potassium sulfate-magnesium sulfate</i>	P		<i>magnesium hydroxide SUSP 2400 MG/30ML</i>	NP	
STOOL SOFTENER + STIMULANT LAXATIVE CAPS	P		<i>magnesium sulfate (laxative) GRAN OR</i>	P	
SUPREP BOWEL PREP KIT (sodium sulfate-potassium sulfate-magnesium sulfate)	P		PHILLIPS MILK OF MAGNESIA CHEWABLE CHEW	P	
SUTAB	NP		<i>sodium phosphates ENEM</i>	P	
Laxatives - Miscellaneous			<i>sodium phosphates ENEM</i>	P	
CEO-TWO	P		Stimulant Laxatives		
<i>glycerin (laxative) SUPP 1 GM, 1.2 GM, 2 GM, 2.1 GM, 80.7 %</i>	P		<i>bisacodyl SUPP</i>	NP	
<i>lactulose SOLN</i>	P		<i>bisacodyl SUPP</i>	P	
<i>polyethylene glycol 3350 PACK</i>	P		<i>bisacodyl SUPP</i>	P	
<i>polyethylene glycol 3350 PACK</i>	P		<i>bisacodyl TBEC</i>	P	
<i>polyethylene glycol 3350 POWD</i>	P		<i>bisacodyl TBEC</i>	P	
<i>polyethylene glycol 3350 POWD</i>	P		<i>castor oil OIL 100 %</i>	P	
Lubricant Laxatives			FLEET BISACODYL ENEM	P	
FLEET OIL ENEM (mineral oil)	P		SENNAPLUS SYRP	P	
<i>mineral oil ENEM</i>	P		<i>sennosides CAPS</i>	P	
<i>mineral oil OIL OR</i>	P	RX/OTC	<i>sennosides CHEW</i>	P	
<i>mineral oil OIL OR</i>	P	RX/OTC	<i>sennosides LIQD</i>	P	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>sennosides SYRP 8.8 MG/5ML</i>	P		<i>azithromycin PACK</i>	P	
<i>sennosides SYRP 8.8 MG/5ML</i>	P		<i>azithromycin SUSR</i>	P	
<i>sennosides TABS 8.6 MG, 15 MG, 17.2 MG, 25 MG</i>	P		<i>azithromycin TABS</i>	P	
<i>sennosides TABS 8.6 MG</i>	NP		ZITHROMAX TRI-PAK TABS (<i>azithromycin</i>)	NP	
<i>sennosides TABS 8.6 MG, 15 MG, 17.2 MG, 25 MG</i>	P		ZITHROMAX Z-PAK TABS (<i>azithromycin</i>)	NP	
SENOKOT TABS (<i>sennosides</i>)	P		ZITHROMAX PACK (<i>azithromycin</i>)	NP	
Surfactant Laxatives			ZITHROMAX SUSR (<i>azithromycin</i>)	NP	
COLACE CLEAR CAPS (<i>docusate sodium</i>)	P		ZITHROMAX TABS 250 MG, 500 MG (<i>azithromycin</i>)	NP	
COLACE CAPS 100 MG (<i>docusate sodium</i>)	P		Clarithromycin		
<i>docusate calcium</i>	P		<i>clarithromycin SUSR</i>	NP	
<i>docusate sodium CAPS</i>	P		<i>clarithromycin TABS</i>	NP	
<i>docusate sodium CAPS 100 MG</i>	NP		<i>clarithromycin TB24</i>	NP	
<i>docusate sodium CAPS</i>	P		Erythromycins		
<i>docusate sodium ENEM 283 MG/5ML</i>	P		E.E.S. GRANULES SUSR (<i>erythromycin ethylsuccinate</i>)	NP	
<i>docusate sodium LIQD</i>	P		ERYPED 200 SUSR (<i>erythromycin ethylsuccinate</i>)	NP	
<i>docusate sodium SYRP</i>	P		ERYPED 400 SUSR (<i>erythromycin ethylsuccinate</i>)	NP	
<i>docusate sodium TABS</i>	P		<i>erythromycin base CPEP</i>	NP	
PEDIA-LAX LIQD	P		<i>erythromycin base TABS</i>	NP	
LOCAL ANESTHETICS-Parenteral - Drugs for Numbing			<i>erythromycin base TBEC</i>	NP	
Local Anesthetics - Amides			<i>erythromycin ethylsuccinate SUSR</i>	P	
<i>lidocaine hcl (local anesth.) SOLN 0.5 %, 1 %, 2 %, 4 %</i>	P		<i>erythromycin ethylsuccinate TABS</i>	NP	
LIDOCAINE HYDROCHLORIDE SOLN	P		<i>erythromycin stearate TABS 250 MG</i>	NP	
MACROLIDES - Drugs to Treat Bacterial Infections			Fidaxomicin		
Azithromycin			DIFICID SUSR	NP	
			DIFICID TABS	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MEDICAL DEVICES AND SUPPLIES			ADVOCATE LANCETS 30G	P	RX/OTC
Diabetic Supplies			ADVOCATE LANCING DEVICE MISC	P	
1ST TIER UNILET COMFORTOUCH LANCETS 28G	P	RX/OTC	ADVOCATE RAPID-SAFE LANCING DEVICE MISC	P	
1ST TIER UNILET COMFORTOUCH LANCETS 30G	P	RX/OTC	ADVOCATE REDI-CODE/TALKING KIT	NP	RX/OTC
ACCU-CHEK AVIVA PLUS KIT	NP	RX/OTC	ADVOCATE REDI-CODE+ BLOOD GLUCOSE SYSTEM/SPEAKING DEVI	NP	
ACCU-CHEK FASTCLIX LANCETS	P	RX/OTC	ADVOCATE REDI-CODE+ BLOODGLUCOSE MONITORING SYSTEM DEVI	NP	
ACCU-CHEK GUIDE ME KIT	NP	RX/OTC	ADVOCATE REDI-CODE DEVI	NP	
ACCU-CHEK GUIDE KIT	NP	RX/OTC	ADVOCATE SAFETY LANCETS	P	RX/OTC
ACCU-CHEK SAFE-T-PRO LANCETS	P	RX/OTC	ADVOCATE SAFETY LANCETS 26G	P	RX/OTC
ACCU-CHEK SAFE-T-PRO PLUSLANCETS	P	RX/OTC	AGAMATRIX AMP NO CODE ADVANCED BLOOD GLUCOSE MONITORING SYST DEVI	NP	
ACCU-CHEK SOFTCLIX LANCETS	P	RX/OTC	AGAMATRIX JAZZ WIRELESS 2 KIT	NP	RX/OTC
ACTI-LANCE LANCETS 28G	P	RX/OTC	AGAMATRIX PRESTO PRO METER DEVI	NP	
ACTI-LANCE LITE SAFETY LANCETS 28G	P	RX/OTC	AGAMATRIX PRESTO KIT	NP	RX/OTC
ACTI-LANCE SPECIAL SAFETY LANCETS 17G	P	RX/OTC	AGAMATRIX ULTRA-THIN LANCETS 33G	P	RX/OTC
ACTI-LANCE SPECIAL SAFETYLANCETS 17G	P	RX/OTC	AIMSCO TWIST LANCETS 32G	P	RX/OTC
ACTI-LANCE UNIVERSAL SAFETY LANCETS 23G	P	RX/OTC	AIMSCO TWIST LANCETS 33G	P	RX/OTC
ADJUSTABLE LANCING DEVICE MISC	P		AQUALANCE LANCETS ULTRA THIN 30G	P	RX/OTC
ADVANCED MOBILE LANCET 30G	P	RX/OTC			
ADVOCATE BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP				
ADVOCATE BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC			
ADVOCATE LANCETS	P	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ASSURE COMFORT LANCETS ULTRA THIN 28G	P	RX/OTC	BLULINK BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP	
ASSURE LANCE LANCETS	P	RX/OTC	CARDIOCOM LANCING DEVICE MISC	P	
ASSURE LANCE LANCETS 21G	P	RX/OTC	CAREONE ADVANCED LANCINGDEVICE MISC	P	
ASSURE LANCE PLUS SAFETYLANCETS 25G	P	RX/OTC	CAREONE BLOOD GLUCOSE MONITORING SYSTEM/PREMIUM KIT	NP	RX/OTC
ASSURE LANCE PLUS SAFETYLANCETS 30G	P	RX/OTC	CAREONE BLOOD GLUCOSE MONITORING SYSTEM/VALUE KIT	NP	RX/OTC
ASSURE LANCE SAFETY LANCET 28G	P	RX/OTC	CAREONE LANCET SUPER THIN/30G	P	RX/OTC
ASSURE PLATINUM BLOOD GLUCOSE METER DEVI	NP		CAREONE LANCET THIN	P	RX/OTC
ASSURE PRISM MULTI BLOODGLUCOSE MONITORING SYSTEM DEVI	NP		CARESENS LANCETS	NP	RX/OTC
AURORA LANCET SUPER THIN30G	P	RX/OTC	CARESENS LANCETS	P	RX/OTC
AURORA LANCET THIN 23G	P	RX/OTC	CARESENS N FELIZ BT DEVI	NP	
AUTO-LANCET MINI MISC	P		CARESENS N FELIZ DEVI	NP	
AUTO-LANCET MISC	P		CARESENS N GLUCOSE MONITORING SYSTEM DEVI	NP	
AUTOLET IMPRESSION LANCING DEVICE MISC	P		CARESENS N VOICE BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP	
AUTOLET LANCING DEVICE MISC	P		CARETOUCH LANCING DEVICewith EJECTOR MISC	P	
AUTOLET LANCING DEVICE MISC	P		CARETOUCH SAFETY LANCETS/26G	P	RX/OTC
AUTOLET MINI MISC	P		CARETOUCH SAFETY LANCETS/28G	P	RX/OTC
AUTOLET PLUS MISC	P		CARETOUCH SAFETY LANCETS/30G	P	RX/OTC
BD MICROTAINER LANCETS	P	RX/OTC	CARETOUCH TWIST LANCETS 28G	P	RX/OTC
BLOOD GLUCOSE MONITORINGSYSTEM 333 DEVI	NP		CARETOUCH TWIST LANCETS 30G	P	RX/OTC
BLOOD GLUCOSE MONITORINGSYSTEM KIT	NP	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CARETOUCH TWIST LANCETS 33G	P	RX/OTC	CLEVER CHOICE COMFORT EZLANCETS 28G	P	RX/OTC
CARETOUCH TWIST LANCETS MULTI COLOR/30G	P	RX/OTC	CLEVER CHOICE MICRO BLOODGLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC
CHOSEN LANCETS 30G	NP	RX/OTC	CLEVER CHOICE MINI BLOODGLUCOSE MONITORING SYSTEM DEVI	NP	
CHOSEN LANCING DEVICE MISC	NP		CLEVER CHOICE TALK BLOODGLUCOSE MONITORING SYSTEM DEVI	NP	
CHOSEN SAFETY LANCETS 28G	NP	RX/OTC	COAGUCHEK LANCETS	P	RX/OTC
CLEANLET LANCETS 28G	P	RX/OTC	COMFORT ASSURED LANCETS MICRO THIN 33G	P	RX/OTC
CLEVER CHEK AUTO CODE VOICE BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP		COMFORT ASSURED LANCETS SUPER THIN 28G	P	RX/OTC
CLEVER CHEK AUTO-CODE BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP		COMFORT LANCETS	P	RX/OTC
CLEVER CHEK AUTO-CODE VOICE BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP		COMFORT TOUCH LANCETS ULTRA THIN 31G	P	RX/OTC
CLEVER CHEK AUTO-CODE DEVI	NP		COMFORT TOUCH PLUS SAFETY LANCETS PRESSURE ACTIVATED 28G	P	RX/OTC
CLEVER CHEK BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC	COMFORT TOUCH PLUS SAFETY LANCETS PRESSURE ACTIVATED 30G	P	RX/OTC
CLEVER CHEK LANCETS ULTRATHIN	P	RX/OTC	CONTOUR BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP	
CLEVER CHEK LANCETS ULTRATHIN 30G	P	RX/OTC	CONTOUR BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC
CLEVER CHOICE AUTO-CODE PRO BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP		CONTOUR NEXT BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC
CLEVER CHOICE COMFORT EZLANCETS 21G	P	RX/OTC			
CLEVER CHOICE COMFORT EZLANCETS 23G	P	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CONTOUR NEXT EZ BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC	CVS LANCETS ULTRA THIN 30G	P	RX/OTC
CONTOUR NEXT GEN BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP		CVS LANCETS ULTRA-THIN 30G	P	RX/OTC
CONTOUR NEXT GEN BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC	CVS LANCING DEVICE MISC	P	
CONTOUR NEXT LINK 2.4 WIRELESS BLOOD GLUCOSE MONITORING SYST KIT	NP	RX/OTC	CVS ULTRA THIN LANCETS	P	RX/OTC
CONTOUR NEXT LINK BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC	DEXCOM G6 RECEIVER	P	
CONTOUR NEXT ONE BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP		DEXCOM G6 SENSOR	P	
CONTOUR NEXT ONE BLOOD GLUCOSE MONITORING SYSTEM KIT	NP		DEXCOM G6 TRANSMITTER	P	
COOL BLOOD GLUCOSE MONITORING KIT KIT	NP	RX/OTC	DEXCOM G7 RECEIVER	P	
COOL BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP		DEXCOM G7 SENSOR	P	
CVS ADVANCED GLUCOSE METER KIT	NP	RX/OTC	DIATHRIVE LANCETS	P	RX/OTC
CVS LANCETS 21G	P	RX/OTC	DIATHRIVE LANCETS ULTRA THIN 30G	P	RX/OTC
CVS LANCETS MICRO THIN 33G	P	RX/OTC	DIATHRIVE LANCING DEVICE MISC	P	
CVS LANCETS MICRO-THIN 33G	P	RX/OTC	DIATRUE PLUS BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP	
CVS LANCETS ORIGINAL	P	RX/OTC	DROPLET GENTEEL LANCING DEVICE MISC	P	
CVS LANCETS THIN 26G	P	RX/OTC	DROPLET LANCETS ULTRA THIN 30G	P	RX/OTC
			DROPLET LANCING DEVICE MISC	P	
			DROPLET PERSONAL LANCETS30G	P	RX/OTC
			DRUG MART ADJUSTABLE LANCING DEVICE MISC	P	
			DRUG MART LANCETS THIN	P	RX/OTC
			DRUG MART ON-THE-GO LANCETS GENTLE 30G	P	RX/OTC
			DRUG MART UNILET LANCETSSUPER THIN 30G	P	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
DRUG MART UNILET LANCETSULTRA THIN 28G	P	RX/OTC	EASY TOUCH LANCETS 28G/PULL-TOP	P	RX/OTC
DRUG MART UNILET MICRO THIN LANCETS 33G	P	RX/OTC	EASY TOUCH LANCETS 28G/TWIST	P	RX/OTC
EASY COMFORT LANCETS	P	RX/OTC	EASY TOUCH LANCETS 30G/BUTTON-ACTIVATED	P	RX/OTC
EASY COMFORT LANCETS 30G/PULL TOP	P	RX/OTC	EASY TOUCH LANCETS 30G/PRESSURE ACTIVATED	P	RX/OTC
EASY COMFORT LANCETS 30G/THIN TOP	P	RX/OTC	EASY TOUCH LANCETS 30G/PULL-TOP	P	RX/OTC
EASY COMFORT LANCETS TWIST TOP	P	RX/OTC	EASY TOUCH LANCETS 30G/TWIST	P	RX/OTC
EASY MINI EJECT LANCING DEVICE MISC	P		EASY TOUCH LANCETS 32G/PRESSURE ACTIVATED	P	RX/OTC
EASY MINI LANCING DEVICE MISC	P		EASY TOUCH LANCETS 32G/PULL-TOP	P	RX/OTC
EASY PLUS II BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP		EASY TOUCH LANCETS 32G/TWIST	P	RX/OTC
EASY STEP BLOOD GLUCOSE MONITOR DEVI	NP		EASY TOUCH LANCETS 33G/TWIST	P	RX/OTC
EASY TALK BLOOD GLUCOSE MONITORING SYSTEM/TALKING DEVI	NP		EASY TOUCH LANCING DEVICE/EJECTOR MISC	P	
EASY TOUCH GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC	EASY TOUCH SAFETY LANCETS21G/PRESSUR E ACTIVATED	P	RX/OTC
EASY TOUCH LANCETS 21G/PRESSURE ACTIVATED	P	RX/OTC	EASY TOUCH SAFETY LANCETS23G/PRESSUR E ACTIVATED	P	RX/OTC
EASY TOUCH LANCETS 23G/PRESSURE ACTIVATED	P	RX/OTC	EASY TOUCH SAFETY LANCETS26G/BUTTON ACTIVATED	P	RX/OTC
EASY TOUCH LANCETS 26G/PRESSURE ACTIVATED	P	RX/OTC	EASY TOUCH SAFETY LANCETS26G/PRESSUR E ACTIVATED	P	RX/OTC
EASY TOUCH LANCETS 26G/PULL-TOP	P	RX/OTC	EASY TOUCH SAFETY LANCETS28G/BUTTON ACTIVATED	P	RX/OTC
EASY TOUCH LANCETS 28G/PRESSURE ACTIVATED	P	RX/OTC	EASY TOUCH SAFETY LANCETS28G/PRESSUR E ACTIVATED	P	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EASY TRAK BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP		EMBRACE PRESSURE ACTIVATED SAFETY LANCET/21G	P	RX/OTC
EASY TRAK II BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP		EMBRACE PRESSURE ACTIVATED SAFETY LANCET/28G	P	RX/OTC
EASYGLUCO STARTER KIT KIT	NP		EMBRACE PRO BLOOD GLUCOSE METER DEVI	NP	
EASYGLUCO KIT	NP		EMBRACE TALK BLOOD GLUCOSE MONITOR DEVI	NP	
EASYMAX NG SELF-MONITORING BLOOD GLUCOSE SYSTEM DEVI	NP		EMBRACE TALK BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC
EASYMAX NG SELF-MONITORING BLOOD GLUCOSE SYSTEM KIT	NP	RX/OTC	EMBRACE WAVE BLOOD GLUCOSE METER DEVI	NP	
EASYMAX V BLOOD GLUCOSE SYSTEM DEVI	NP		EQL COLOR LANCETS 21G	P	RX/OTC
ELEMENT COMPACT BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP		EQL COLOR LANCETS MICRO THIN 33G	P	RX/OTC
ELEMENT COMPACT V BLOODGLUCOSE MONITORING SYSTEM DEVI	NP		EQL SUPER THIN LANCETS 30G	P	RX/OTC
ELEMENT PLUS BLOOD GLUCOSE METER DEVI	NP		EQL THIN LANCETS 26G	P	RX/OTC
EMBRACE BLOOD GLUCOSE MONITORING SYSTEM/TALKING DEVI	NP		EVERSENSE E3 SENSOR/HOLDER	NP	
EMBRACE EVO BLOOD GLUCOSE MONITORING KIT KIT	NP	RX/OTC	EVERSENSE E3 SMART TRANSMITTER	NP	
EMBRACE EVO COMPACT BLOODGLUCOSE MONITOR DEVI	NP		EVOLUTION AUTOCODE DEVI	NP	
EMBRACE LANCETS ULTRA THIN 30G	P	RX/OTC	E-Z JECT LANCETS	P	RX/OTC
EMBRACE LANCING DEVICE WITH EJECTOR MISC	P		E-Z JECT LANCETS 21G	P	RX/OTC
			E-Z JECT LANCETS COLOR	P	RX/OTC
			E-Z JECT LANCETS SUPER THIN 30G	P	RX/OTC
			E-Z JECT LANCETS THIN 26G	P	RX/OTC
			E-ZJECT LANCETS MICRO-THIN 33G	P	RX/OTC
			EZ-LETS LANCETS 21G	P	RX/OTC
			EZ-LETS LANCETS 26G SUPER-SOFT	P	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EZ-LETS LANCETS 28G ULTRA-SOFT	P	RX/OTC	FORA TN'G ADVANCE PRO MULTI-FUNCTIONAL MONITORING SYSTEM DEVI	NP	
EZ-LETS LANCETS 30G	P	RX/OTC	FORA TN'G VOICE BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC
FIFTY50 GLUCOSE METER 2.0 KIT	NP	RX/OTC	FORA V10 BLOOD GLUCOSE MONITORING SYSTEM/TALKING DEVI	NP	
FIFTY50 SAFETY SEAL LANCETS 30G	P	RX/OTC	FORA V12 BLOOD GLUCOSE MONITORING SYSTEM/NO-CODING DEVI	NP	
FIFTY50 SAFETY SEAL LANCETS 32G	P	RX/OTC	FORA V12 BLOOD GLUCOSE MONITORING SYSTEM/TALKING DEVI	NP	
FIFTY50 UNILET LANCETS 33G	P	RX/OTC	FORA V20 BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP	
FINE 30	P	RX/OTC	FORA V30A BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP	
FINGERSTIX LANCETS	P	RX/OTC	FORA V30A BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC
FORA D20 2-IN-1 BLOOD GLUCOSE AND PRESSURE MONITOR DEVI	NP		FORACARE GD40 BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP	
FORA G20 BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC	FORACARE PREMIUM V10 BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP	
FORA G30A BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP		FORACARE TEST N GO BLOODGLUCOSE MONITORING SYSTEM DEVI	NP	
FORA GD20 BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP		FORTISCARE T1 SELF-MONITORING BLOOD GLUCOSE SYSTEM DEVI	NP	
FORA GD50 BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP		FREDS PHARMACY AUTOLET LANCING DEVICE MISC	P	
FORA LANCETS	P	RX/OTC			
FORA LANCING DEVICE/CLEARCAP MISC	P				
FORA LANCING DEVICE MISC	P				
FORA PREMIUM V10 BLE BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP				
FORA TEST N' GO VOICE BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
FREDS PHARMACY UNILET LANCETS SUPER THIN 30G	P	RX/OTC	FREESTYLE PRECISION NEO BLOOD GLUCOSE MONITORING SYSTEM KIT	P	RX/OTC
FREDS PHARMACY UNILET LANCETS ULTRA THIN 28G	P	RX/OTC	FREESTYLE UNISTICK II LANCETS	P	RX/OTC
FREESTYLE FREEDOM LITE KIT	NP	RX/OTC	GE100 BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP	
FREESTYLE FREEDOM LITE KIT	P	RX/OTC	GE100 BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC
FREESTYLE LANCETS	P	RX/OTC	GENTEEL BUTTERFLY TOUCH LANCETS	P	RX/OTC
FREESTYLE LIBRE 14 DAY/READER/FLASH MONITORING SYSTEM	P		GENTEEL PLUS LANCING DEVICE/BUFF BLACK MISC	P	
FREESTYLE LIBRE 14 DAY/SENSOR/FLASH MONITORING SYSTEM	P		GENTEEL PLUS LANCING DEVICE/BUTTERFLY BLUE MISC	P	
FREESTYLE LIBRE 2/READER/FLASH GLUCOSE MONITORING SYSTEM	P		GENTEEL PLUS LANCING DEVICE/PLAYFUL PURPLE MISC	P	
FREESTYLE LIBRE 2/SENSOR/FLASH GLUCOSE MONITORING SYSTEM	P		GENTEEL PLUS LANCING DEVICE/PRINCESS PINK MISC	P	
FREESTYLE LIBRE 3/READER/GLUCOSE MONITORING SYSTEM	P		GENTEEL PLUS LANCING DEVICE/WILLOWY WHITE MISC	P	
FREESTYLE LIBRE 3/SENSOR/GLUCOSE MONITORING SYSTEM	P		GENTLE-LET GP LANCETS	P	RX/OTC
FREESTYLE LIBRE/READER/FLASH MONITORING SYSTEM	P		GENTLE-LET LANCETS GENERAL PURPOSE STYLE/FINE POINT	P	RX/OTC
FREESTYLE LITE BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP		GENTLE-LET LANCETS GENERAL PURPOSE STYLE/MEDIUM POINT	P	RX/OTC
FREESTYLE LITE BLOOD GLUCOSE MONITORING SYSTEM KIT	P	RX/OTC	GENTLE-LET LANCETS SAFETY STYLE/FINE POINT	P	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
GENTLE-LET LANCETS SAFETY STYLE/MEDIUM POINT	P	RX/OTC	GLUCOCARD VITAL BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC
GHT BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC	GLUCOCOM BLOOD GLUCOSE MONITOR DEVI	NP	
GLOBAL INJECT EASE LANCETS 28G	P	RX/OTC	GLUCOCOM BLOOD GLUCOSE MONITORING SYSTEM VALUE KIT KIT	NP	RX/OTC
GLOBAL INJECT EASE LANCETS 30G	P	RX/OTC	GLUCOCOM BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC
GLOBAL LANCING DEVICE MISC	P		GLUCOCOM LANCETS 28G	P	RX/OTC
GLUCOCARD 01 BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC	GLUCOCOM LANCETS 30G	P	RX/OTC
GLUCOCARD EXPRESSION AUDIO-ENABLED BLOOD GLUCOSE MONITORING KIT	NP	RX/OTC	GLUCOCOM LANCETS 33G	P	RX/OTC
GLUCOCARD SHINE CONNEX BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC	GNP EASY TOUCH GLUCOSE MONITORING SYSTEM/NO CODING DEVI	NP	
GLUCOCARD SHINE EXPRESS BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC	GNP LANCETS 21G	P	RX/OTC
GLUCOCARD SHINE XL DEVI	NP		GNP LANCETS THIN 26G	P	RX/OTC
GLUCOCARD SHINE DEVI	NP		GNP LANCING SYSTEM DEVICE MISC	P	
GLUCOCARD SHINE KIT	NP	RX/OTC	GNP STERILE LANCETS 28G	P	RX/OTC
GLUCOCARD VITAL BLOOD GLUCOSE MONITORING SYSTEM BLACK KIT	NP	RX/OTC	GNP STERILE LANCETS 30G	P	RX/OTC
GLUCOCARD VITAL BLOOD GLUCOSE MONITORING SYSTEM BLUE KIT	NP	RX/OTC	GNP STERILE LANCETS 33G	P	RX/OTC
GLUCOCARD VITAL BLOOD GLUCOSE MONITORING SYSTEM PINK KIT	NP	RX/OTC	GOJJI LANCING DEVICE/CLEAR CAP MISC	P	
			GOJJI MULTI-FUNCTIONAL MONITORING SYSTEM WELCOME KIT KIT	NP	
			GOJJI MULTI-FUNCTIONAL MONITORING SYSTEM DEVI	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
GOJJI STERILE LANCETS 30G	P	RX/OTC	HEALTHPRO BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC
GOODSENSE COLOR LANCETS MICRO-THIN 33G UNIVERSAL	P	RX/OTC	HEALTHY ACCENTS AUTOLET IMPRESSION LANCING DEVICE MISC	P	
GOODSENSE LANCETS MICRO-THIN 33G	P	RX/OTC	HEALTHY ACCENTS UNILET LANCETS SUPER THIN 30G	P	RX/OTC
GOODSENSE LANCETS MICRO-THIN 33G UNIVERSAL	P	RX/OTC	H-E-B INCONTROL ADVANCEDLANCING DEVICE MISC	P	
GOODSENSE LANCETS ULTRA-THIN 26G UNIVERSAL	P	RX/OTC	H-E-B INCONTROL LANCETS MICRO THIN 33G	P	RX/OTC
GOODSENSE LANCETS ULTRA-THIN 30G	P	RX/OTC	H-E-B INCONTROL LANCETS SUPER THIN 30G	P	RX/OTC
GOODSENSE LANCETS ULTRA-THIN 30G UNIVERSAL	P	RX/OTC	H-E-B INCONTROL LANCETS ULTRA THIN 28G	P	RX/OTC
GOODSENSE LANCING DEVICE MISC	P		HW EMBRACE PRO BLOOD GLUCOSE METER DEVI	NP	
GOODSENSE PREMIUM BLOODGLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC	HW EMBRACE TALK BLOOD GLUCOSE MONITOR DEVI	NP	
GUARDIAN 4 GLUCOSE SENSOR	NP		HW EMBRACE TALK BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC
GUARDIAN 4 TRANSMITTER KIT	NP		HY-VEE LANCETS	P	RX/OTC
HAEMOLANCE	P	RX/OTC	HY-VEE THIN LANCETS	P	RX/OTC
HAEMOLANCE LOW FLOW LANCETS	P	RX/OTC	IGLUCOSE BLOOD GLUCOSE MOITORING SYSTEM KIT	NP	RX/OTC
HAEMOLANCE PLUS	P	RX/OTC	IN TOUCH LANCING DEVICE MISC	P	
HAEMOLANCE PLUS HIGH FLOW	P	RX/OTC	IN TOUCH STERILE LANCETS30G	P	RX/OTC
HAEMOLANCE PLUS LOW FLOW	P	RX/OTC	INFINITY BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC
HAEMOLANCE PLUS MAX FLOW	P	RX/OTC	INFINITY VOICE KIT	NP	RX/OTC
HAEMOLANCE PLUS PEDIATRIC FLOW	P	RX/OTC			
HEALTH CARE LANCING DEVICE MISC	P				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
KINNEY LANCETS	P	RX/OTC	LANCETS ULTRA THIN	P	RX/OTC
KINNEY THIN LANCETS	P	RX/OTC	LANCETS ULTRA THIN 30G	P	RX/OTC
KROGER AUTOLET LANCING DEVICE MISC	P		LANCING DEVICE MISC	P	
KROGER HEALTHPRO TWIST LANCETS/26G	P	RX/OTC	LANZO MISC	P	
KROGER LANCETS	P	RX/OTC	LEADER ADVANCED LANCING DEVICE MISC	P	
KROGER LANCETS 21G	P	RX/OTC	LIBERTY MEDICAL LANCETS 30G	P	RX/OTC
KROGER LANCETS MICRO THIN33G	P	RX/OTC	LIBERTY MINI LANCING DEVICE MISC	P	
KROGER LANCETS SUPER THIN	P	RX/OTC	LITE TOUCH LANCETS	P	RX/OTC
KROGER LANCETS THIN	P	RX/OTC	LITE TOUCH LANCING PEN MISC	P	
KROGER LANCETS THIN 26G	P	RX/OTC	LITETOUCH LANCETS MICRO THIN 33G	P	RX/OTC
KROGER LANCETS ULTRATHIN30G	P	RX/OTC	LIVE BETTER ADVANCED LANCING DEVICE MISC	P	
KROGER LANCING DEVICE MISC	P		LIVE BETTER LANCET SUPERTHIN 30G	P	RX/OTC
KROGER PREMIUM BLOOD GLUCOSE MONITORING KIT KIT	NP	RX/OTC	LIVE BETTER LANCET ULTRATHIN 28G	P	RX/OTC
LANCET DEVICE ADJUSTABLE MISC	P		LONGS LANCETS STANDARD	P	RX/OTC
LANCET DEVICE WITH EJECTOR MISC	P		LONGS LANCETS THIN	P	RX/OTC
LANCETS	P	RX/OTC	LONGS LANCETS ULTRA THIN	P	RX/OTC
LANCETS 30G	P	RX/OTC	MEDICHOICE PRE-SET SAFETY LANCET DUAL USE	P	RX/OTC
LANCETS 30G TWIST TOP	P	RX/OTC	MEDICHOICE PRE-SET SAFETY LANCET LOW FLOW	P	RX/OTC
LANCETS 30G/TWIST TOP	P	RX/OTC	MEDICHOICE PRE-SET SAFETY LANCET MEDIUM FLOW	P	RX/OTC
LANCETS 33G EXTRA FINE	P	RX/OTC	MEDICHOICE PRE-SET SAFETY LANCET MODERATE FLOW	P	RX/OTC
LANCETS 33G UNIVERSAL DESIGN	P	RX/OTC	MEDICHOICE SAFETY LANCETEXTRA	P	RX/OTC
LANCETS MICRO THIN 33G	P	RX/OTC			
LANCETS SUPER THIN 28G	P	RX/OTC			
LANCETS THIN	P	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MEDICHOICE SAFETY LANCETNORMAL	P	RX/OTC	MEIJER SUPER THIN LANCETS	P	RX/OTC
MEDLANCE PLUS EXTRA LANCETS 21G	P	RX/OTC	MICROLET LANCETS	P	RX/OTC
MEDLANCE PLUS LANCETS	P	RX/OTC	MICROLET NEXT MISC	P	
MEDLANCE PLUS LANCETS LITE 25G	P	RX/OTC	MINI LANCING DEVICE MISC	P	
MEDLANCE PLUS LITE LANCETS 25G	P	RX/OTC	MM BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC
MEDLANCE PLUS SPECIAL LANCETS 0.8MM	P	RX/OTC	MM BLULINK GLUCOSE MONITORING SYSTEM DEVI	NP	
MEDLANCE PLUS SUPERLITE 30G	P	RX/OTC	MM EASY TOUCH BLOOD GLUCOSE METER KIT	NP	RX/OTC
MEDLANCE PLUS SUPERLITE 30G/COMFORT MAX	P	RX/OTC	MM LANCING DEVICE MISC	P	
MEDLANCE PLUS UNIVERSAL LANCETS 21G	P	RX/OTC	MM TWIST LANCETS	P	RX/OTC
MEDLANCE PLUS/LITE 25G	P	RX/OTC	MONOLET LANCETS	P	RX/OTC
MEDLANCE/EXTRA	P	RX/OTC	MONOLET OPD LANCETS	P	RX/OTC
MEDLANCE/LITE	P	RX/OTC	MONOLETTOR SAFETY LANCETS	P	RX/OTC
MEDLANCE/UNIVERSAL	P	RX/OTC	MPD SAFETY LANCET 21G/1.8MM	P	RX/OTC
MEIJER BLOOD GLUCOSE MONITORING KIT KIT	NP	RX/OTC	MPD SAFETY LANCET 28G/1.8MM	P	RX/OTC
MEIJER COLOR LANCETS UNIVERSAL 33G	P	RX/OTC	MPD SAFETY LANCET 30G/1.8MM	P	RX/OTC
MEIJER LANCETS	P	RX/OTC	MPD SAFETY LANCETS 23G/1.8MM	P	RX/OTC
MEIJER LANCETS THIN	P	RX/OTC	MULTI-LANCET DEVICE MISC	P	
MEIJER LANCETS UNIVERSAL21G	P	RX/OTC	MYGLUCOHEALTH BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC
MEIJER LANCETS UNIVERSAL30G	P	RX/OTC	MYGLUCOHEALTH MGH SOFTLANCE LANCETS 30G	P	RX/OTC
MEIJER LANCETS UNIVERSAL33G	P	RX/OTC	NOVA MAX BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP	
MEIJER PREMIUM BLOOD GLUCOSE MONITORING KIT KIT	NP	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
NOVA MAX BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC	ONETOUCH DELICA PLUS LANCETS EXTRA FINE 33G	P	RX/OTC
NOVA SAFETY LANCETS 23G	P	RX/OTC	ONETOUCH DELICA PLUS LANCETS FINE 30G	P	RX/OTC
NOVA SAFETY LANCETS 28G	P	RX/OTC	ONETOUCH DELICA PLUS LANCING DEVICE MISC	P	
NOVA SUREFLEX LANCETS	P	RX/OTC	ONETOUCH DELICA SAFETY LANCING DEVICE	P	RX/OTC
NOVA SUREFLEX LANCING DEVICE MISC	P		ONETOUCH DELICA SAFETY LANCING DEVICE 30G	P	RX/OTC
OMNIPOD 5 G6 INTRO KIT (GEN 5) KIT	P		ONETOUCH SOLUTIONS COMPLETE KIT	NP	RX/OTC
OMNIPOD 5 G6 PODS (GEN 5) MISC	P		ONETOUCH SOLUTIONS FIT KIT	NP	
OMNIPOD 5 G7 INTRO KIT (GEN 5) KIT	P		ONETOUCH ULTRA 2 KIT	NP	RX/OTC
OMNIPOD 5 G7 PODS (GEN 5) MISC	P		ONETOUCH ULTRASOFT 2 LANCETS FINE 30G	NP	RX/OTC
OMNIPOD CLASSIC PODS (GEN 3) MISC	P		ONETOUCH ULTRASOFT 2 LANCETS FINE 30G	P	RX/OTC
OMNIPOD DASH INTRO KIT (GEN 4) KIT	NP		ONETOUCH ULTRASOFT LANCETS	P	RX/OTC
OMNIPOD DASH PODS (GEN 4) MISC	P		ONETOUCH VERIO FLEX BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP	
OMNIPOD GO 10 UNITS/DAY KIT	P		ONETOUCH VERIO FLEX BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC
OMNIPOD GO 15 UNITS/DAY KIT	P		ONETOUCH VERIO REFLECT KIT	NP	RX/OTC
OMNIPOD GO 20 UNITS/DAY KIT	P		PC LANCETS SUPER THIN 30G	P	RX/OTC
OMNIPOD GO 25 UNITS/DAY KIT	P		PERFECT LANCETS 30G	P	RX/OTC
OMNIPOD GO 30 UNITS/DAY KIT	P		PERFECT PRESSURE ACTIVATED SAFETY LANCETS 28G	P	RX/OTC
OMNIPOD GO 35 UNITS/DAY KIT	P				
OMNIPOD GO 40 UNITS/DAY KIT	P				
ON CALL EXPRESS BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PHARMACIST CHOICE AUTOCODE BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC	PREFERRED PLUS LANCETS SUPER THIN 30G	P	RX/OTC
PHARMACIST CHOICE MINI BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP		PREFERRED PLUS LANCETS THIN 26G	P	RX/OTC
PHARMACIST CHOICE SELECTLANCETS/ULTR A THIN	P	RX/OTC	PRO COMFORT LANCETS 30G	P	RX/OTC
PHARMACIST CHOICE ULTRA THIN LANCETS	P	RX/OTC	PRO COMFORT LANCETS 31G	P	RX/OTC
PHARMACIST CHOICE ULTRA THIN LANCETS 28G	P	RX/OTC	PRO COMFORT SAFETY LANCETS 30G PRESSURE ACTIVATED	P	RX/OTC
PHARMACIST CHOICE ULTRA THIN LANCETS 30G	P	RX/OTC	PRO VOICE V8 BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP	
PHARMACIST CHOICE ULTRA THIN LANCETS 31G	P	RX/OTC	PRO VOICE V9 BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP	
PHARMACIST CHOICE ULTRA THIN LANCETS 33G	P	RX/OTC	PRODIGY AUTOCODE BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP	
PHARMACY COUNTER LANCETS	P	RX/OTC	PRODIGY AUTOCODE BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC
PIP BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP		PRODIGY AUTOCODE BLOOD GLUCOSE MONITORING/TALKING KIT	NP	RX/OTC
PIP LANCETS/28G	P	RX/OTC	PRODIGY LANCING DEVICE MISC	P	
PIP LANCETS/30G	P	RX/OTC	PRODIGY POCKET BLOOD GLUCOSE METER KIT KIT	NP	RX/OTC
POGO AUTOMATIC BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP		PRODIGY PRESSURE ACTIVATED SAFETY LANCETS	P	RX/OTC
PRECISION THINS GP LANCET	P	RX/OTC	PRODIGY SAFETY LANCETS	P	RX/OTC
PRECISION XTRA KIT	NP	RX/OTC	PRODIGY TWIST TOP LANCETS	P	RX/OTC
PREFERRED PLUS LANCETS COLORED 21G	P	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PRODIGY VOICE BLOOD GLUCOSE METER KIT KIT	NP	RX/OTC	READYLANCE SAFETY LANCETS/21G/2.2MM	P	RX/OTC
PSS SELECT GP LANCETS	P	RX/OTC	READYLANCE SAFETY LANCETS/23G/1.8MM	P	RX/OTC
PSS SELECT SAFETY LANCETS	P	RX/OTC	READYLANCE SAFETY LANCETS/26G/1.8MM	P	RX/OTC
PURE COMFORT LANCETS 30G	P	RX/OTC	READYLANCE SAFETY LANCETS/28G/1.8MM	P	RX/OTC
PX ADVANCED LANCING DEVICE MISC	P		READYLANCE SAFETY LANCETS/30G/1.6MM	P	RX/OTC
PX LANCET AUTO INJECTOR MISC	P		REALITY LANCETS	P	RX/OTC
PX LANCETS MICROTHIN 33G	P	RX/OTC	REALITY TRIGGER LANCETS	P	RX/OTC
PX LANCETS ULTRA THIN	P	RX/OTC	REFUAH PLUS BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC
PX LANCETS ULTRA THIN 28G	P	RX/OTC	RELION 2-IN-1 LANCET DEVICES 30G	P	RX/OTC
QC ADVANCED LANCING DEVICE MISC	P		RELION 2-IN-1 LANCING DEVICE 25G	P	RX/OTC
QC LANCETS SUPER THIN	P	RX/OTC	RELION 2-IN-1 LANCING DEVICE 30G	P	RX/OTC
QC LANCETS ULTRA THIN	P	RX/OTC	RELION ALL-IN-ONE COMPACT BLOOD GLUCOSE TESTING SYSTEM	NP	
QC UNILET LANCETS 28G/ULTRA THIN	P	RX/OTC	RELION CONFIRM BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC
QC UNILET LANCETS 33G/MICRO THIN	P	RX/OTC	RELION LANCETS MICRO-THIN 33G	P	RX/OTC
QUINTET AC BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP		RELION LANCETS THIN 26G	P	RX/OTC
QUINTET BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP		RELION LANCETS ULTRA-THIN 30G	P	RX/OTC
RA E-ZJECT LANCETS 28G	P	RX/OTC	RELION LANCING DEVICE MISC	P	
RA E-ZJECT LANCETS THIN 26G	P	RX/OTC	RELION MICRO BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC
RA E-ZJECT LANCETS THIN 28G	P	RX/OTC			
RA E-ZJECT LANCETS ULTRATHIN 30G	P	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
RELION PREMIER BLU BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP		RIGHTEST GM100 BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC
RELION PREMIER CLASSIC BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP		RIGHTEST GM300 BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC
RELION PREMIER COMPACT BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC	RIGHTEST GM550 BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC
RELION PREMIER VOICE BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP		RIGHTEST GT333 BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP	
RELION PRIME BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP		SAFE-T-LANCE LOW FLOW 25G	P	RX/OTC
RELION TRUE METRIX AIR BLOOD GLUCOSE METER/BLUETOOTH KIT	NP	RX/OTC	SAFE-T-LANCE NORMAL FLOW21G	P	RX/OTC
RELION ULTIMA BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC	SAFE-T-LANCE PLUS SAFETYLANCET HIGH FLOW	P	RX/OTC
RELION ULTRA THIN LANCETS/30G	P	RX/OTC	SAFE-T-LANCE PLUS SAFETYLANCET LOW FLOW	P	RX/OTC
RELION ULTRA THIN LANCETS30G	P	RX/OTC	SAFE-T-LANCE PLUS SAFETYLANCET NORMAL FLOW	P	RX/OTC
RELION ULTRA THIN PLUS LANCETS 32G	P	RX/OTC	SAFETY LANCET 30G/PRESSURE ACTIVATED	P	RX/OTC
RELION ULTRA THIN PLUS LANCETS 33G	P	RX/OTC	SAFETY LANCETS	P	RX/OTC
REXALL BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC	SAFETY LANCETS 21G	P	RX/OTC
REXALL LANCETS ULTRA THIN	P	RX/OTC	SAFETY LANCETS 21G	NP	RX/OTC
RIGHTEST GD500 LANCING DEVICE MISC	P		SAFETY LANCETS 23G	NP	RX/OTC
RIGHTEST GL300 LANCETS	P	RX/OTC	SAFETY LANCETS 28G	NP	RX/OTC
			SAFETY LANCETS 28G	P	RX/OTC
			SAFETY LANCETS/PRESSURE ACTIVATED/28G	P	RX/OTC
			SAPS HEALTH CARE TWIST TOP LANCETS	P	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SAPS HEALTH PLUS TWIST TOP LANCETS 30G	P	RX/OTC	SMART SENSE SUPER THIN LANCETS UNIVERSAL 30G	P	RX/OTC
SAPS HEALTH TWIST TOP LANCETS 30G	P	RX/OTC	SMART SENSE THIN LANCETSUNIVERSAL 26G	P	RX/OTC
SAPSCARE TWIST TOP LANCETS 30G	P	RX/OTC	SMART SENSE VALUE BLOODGLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC
SB LANCETS THIN	P	RX/OTC	SMARTEST EJECT BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP	
SB LANCETS ULTRA THIN	P	RX/OTC	SMARTEST EJECT STARTER KIT KIT	NP	RX/OTC
SELECT-LITE LANCING DEVICE MISC	P		SMARTEST LANCETS 28G	P	RX/OTC
SHOPKO AUTOLET LANCING DEVICE MISC	P		SMARTEST PERSONA STARTERKIT KIT	NP	RX/OTC
SHOPKO ON-THE-GO COMFORTLANCETS 30G	P	RX/OTC	SMARTEST PRONTO STARTERKIT KIT	NP	RX/OTC
SHOPKO UNILET LANCETS SUPER THIN 30G	P	RX/OTC	SMARTEST PROTEGE BLOOD GLUCOSE MONITORING SYSTEM DEVI	NP	
SHOPKO UNILET LANCETS ULTRA THIN 28G	P	RX/OTC	SMARTEST PROTEGE STARTERKIT KIT	NP	RX/OTC
SIMPLE DIAGNOSTICS LANCING DEVICE MISC	P		SOLUS V2 AUDIBLE BLOOD GLUCOSE MANAGEMENT SYSTEM DEVI	NP	
SINGLE-LET	P	RX/OTC	SOLUS V2 AUDIBLE BLOOD GLUCOSE MANAGEMENT SYSTEM KIT	NP	RX/OTC
SM MICRO THIN LANCETS 33G	P	RX/OTC	SOLUS V2 LANCING DEVICE MISC	P	
SM TRUEDRAW LANCING DEVICE MISC	P		SOLUS V2 PRESSURE ACTIVATED SAFETY LANCETS 28G	P	RX/OTC
SMART DIABETES VANTAGE LANCING DEVICE MISC	P		SOLUS V2 TWIST LANCETS 30G	P	RX/OTC
SMART SENSE COLOR LANCETS UNIVERSAL 33G	P	RX/OTC	STERILANCE TL	P	RX/OTC
SMART SENSE PREMIUM BLOODGLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC			
SMART SENSE STANDARD LANCETS UNIVERSAL 21G	P	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SUPER THIN LANCETS	P	RX/OTC	TRUE COMFORT SAFETY LANCETS/30G	P	RX/OTC
SURE COMFORT LANCETS 18G	P	RX/OTC	TRUE COMFORT TWIST TOP LANCETS 30G	P	RX/OTC
SURE COMFORT LANCETS 21G	P	RX/OTC	TRUE METRIX AIR BLOOD GLUCOSE METER/BLUETOOTH SMART KIT	NP	RX/OTC
SURE COMFORT LANCETS 23G	P	RX/OTC	TRUE METRIX AIR BLOOD GLUCOSE METER/BLUETOOTH DEVI	NP	
SURE COMFORT LANCETS 28G	P	RX/OTC	TRUE METRIX AIR W/BLUETOOTH SMART KIT	NP	RX/OTC
SURE COMFORT LANCETS 30G	P	RX/OTC	TRUE METRIX BLOOD GLUCOSE METER KIT	NP	RX/OTC
SURE COMFORT LANCING PEN MISC	P		TRUE METRIX GO BLOOD GLUCOSE METER KIT	NP	RX/OTC
SURELITE LANCETS	P	RX/OTC	TRUE METRIX DEVI	NP	
TECHLITE AST LANCETS	P	RX/OTC	TRUEDRAW LANCING DEVICE MISC	P	
TECHLITE LANCETS	P	RX/OTC	TRUEPLUS LANCETS 26G	P	RX/OTC
TECHLITE LANCETS 26G	P	RX/OTC	TRUEPLUS LANCETS 28G	P	RX/OTC
TGT BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC	TRUEPLUS LANCETS 28G SUPER THIN	P	RX/OTC
TGT LANCET MICRO THIN 33G	P	RX/OTC	TRUEPLUS LANCETS 30G	P	RX/OTC
TGT LANCET THIN 26G	P	RX/OTC	TRUEPLUS LANCETS 30G ULTRA THIN	P	RX/OTC
TGT LANCET ULTRA THIN 30G	P	RX/OTC	TRUEPLUS LANCETS 33G	P	RX/OTC
TGT LANCING DEVICE MISC	P		TRUEPLUS LANCETS 33G MICRO THIN	P	RX/OTC
THINLETS GP LANCETS	P	RX/OTC	TRUEPLUS SAFETY LANCETS 28G	P	RX/OTC
TODAYS HEALTH ADVANCED LANCING DEVICE MISC	P		TRUERESULT BLOOD GLUCOSE MONITORING SYSTEM/NO CODING KIT	NP	RX/OTC
TODAYS HEALTH SUPER THINLANCETS 30G	P	RX/OTC			
TODAYS HEALTH ULTRA THINLANCETS 28G	P	RX/OTC			
TOPCARE LANCETS MICRO-THIN 33G	P	RX/OTC			
TRAVEL LANCETS 30G	P	RX/OTC			
TRAVEL LANCETS ADVANCED 28G	P	RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TRUETRACK BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC	UNILET LANCETS SUPER-THIN30G	P	RX/OTC
TRUETRACK SMART SYSTEM KIT	NP	RX/OTC	UNILET LANCETS SUPER-THIN30G	P	RX/OTC
TWIST TOP LANCETS 30G	P	RX/OTC	UNILET LANCETS ULTRA-THIN 28G	P	RX/OTC
ULTI-LANCE AUTOMATIC/ CLEAR TIP MISC	P		UNILET LANCETS ULTRA-THIN 28G	P	RX/OTC
ULTILET CLASSIC LANCETS	P	RX/OTC	UNILET SUPERLITE LANCET	P	RX/OTC
ULTILET LANCETS	P	RX/OTC	UNISTIK 3 COMFORT MISC	P	
ULTILET LANCETS 33G	P	RX/OTC	UNISTIK 3 EXTRA MISC	P	
ULTILET SAFETY LANCETS 21G X 2.2MM	P	RX/OTC	UNISTIK 3 GENTLE	P	RX/OTC
ULTILET SAFETY LANCETS 23G	P	RX/OTC	UNISTIK 3 GENTLE	P	RX/OTC
ULTRA THIN LANCETS 31G	P	RX/OTC	UNISTIK 3 NORMAL MISC	P	
ULTRA-CARE LANCETS 30G	P	RX/OTC	UNISTIK PRO SAFETY LANCET 21G	P	RX/OTC
ULTRA-THIN II AUTO LANCET	P	RX/OTC	UNISTIK PRO SAFETY LANCET 25G	P	RX/OTC
ULTRA-THIN II LANCETS 28G	P	RX/OTC	UNISTIK PRO SAFETY LANCET 28G	P	RX/OTC
ULTRA-THIN II LANCETS 30G	P	RX/OTC	UNISTIK SAFETY LANCETS 28G	P	RX/OTC
UNILET COMFORTOUCH LANCET	P	RX/OTC	UNISTIK SAFETY LANCETS 30G	P	RX/OTC
UNILET EXCELITE	P	RX/OTC	UNISTIK TOUCH SAFETY LANCETS 21G	P	RX/OTC
UNILET EXCELITE II	P	RX/OTC	UNISTIK TOUCH SAFETY LANCETS 23G	P	RX/OTC
UNILET G.P. LANCET	P	RX/OTC	UNISTIK TOUCH SAFETY LANCETS 28G	P	RX/OTC
UNILET G.P. SUPERLITE LANCET	P	RX/OTC	UNISTIK TOUCH SAFETY LANCETS 30G	P	RX/OTC
UNILET GP 28 ULTRA THIN	P	RX/OTC	UNIVERSAL 1 LANCETS THIN26G	P	RX/OTC
UNILET LANCET	P	RX/OTC	UNIVERSAL 1 LANCETS ULTRA THIN 30G	P	RX/OTC
UNILET LANCETS MICRO-THIN33G	P	RX/OTC	UNIVERSAL 1 LANCETS/33G/MICRO-THIN	P	RX/OTC
UNILET LANCETS MICRO-THIN33G	P	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
VALUE PLUS LANCETS STANDARD 21G	P	RX/OTC	VIDA MIA UNILET LANCETS ULTRA THIN 28G	P	RX/OTC
VALUE PLUS LANCETS SUPER THIN 30G	P	RX/OTC	VIVAGUARD INO BLOOD GLUCOSE METER DEVI	NP	
VALUE PLUS LANCETS THIN 26G	P	RX/OTC	VIVAGUARD INO BLOOD GLUCOSE METER KIT	NP	
VALUE PLUS LANCING DEVICE MISC	P		VIVAGUARD INO SMART BLOOD GLUCOSE METER DEVI	NP	
VALUMARK LANCET SUPER THIN 30G	P	RX/OTC	VIVAGUARD LANCETS	P	RX/OTC
VALUMARK LANCET ULTRA THIN 28G	P	RX/OTC	VIVAGUARD LANCETS 30G	NP	RX/OTC
VERASENS BLOOD GLUCOSE MONITORING SYSTEM METER KIT DEVI	NP		VIVAGUARD LANCING DEVICE MISC	P	
VERASENS BLOOD GLUCOSE MONITORING SYSTEM KIT	NP	RX/OTC	VIVAGUARD LANCING DEVICE MISC	NP	
VERIFINE SAFETY LANCET MINI 21G X 2.4MM	P	RX/OTC	VIVAGUARD SAFETY LANCETS/28G	P	RX/OTC
VERIFINE SAFETY LANCET MINI 23G X 1.8MM	P	RX/OTC	VIVAGUARD SAFETY LANCETS28G	NP	RX/OTC
VERIFINE SAFETY LANCET MINI 28G X 1.8MM	P	RX/OTC	WALGREENS ADVANCED TRAVELLANCETS 28G	P	RX/OTC
VERIFINE SAFETY LANCET MINI 30G X 1.8MM	P	RX/OTC	WALGREENS COMFORT ASSURED LANCETS MICRO THIN/33G	P	RX/OTC
VERIFINE UNIVERSAL LANCETS 28G	P	RX/OTC	WALGREENS COMFORT ASSURED LANCETS SUPER THIN/28G	P	RX/OTC
VERIFINE UNIVERSAL LANCETS 30G	P	RX/OTC	WALGREENS LANCETS	P	RX/OTC
VERIFINE UNIVERSAL LANCETS 33G	P	RX/OTC	WALGREENS THIN LANCETS	P	RX/OTC
VIDA MIA AUTOLET LANCING DEVICE MISC	P		WALGREENS ULTRA THIN LANCETS	P	RX/OTC
VIDA MIA UNILET LANCETS SUPER THIN 30G	P	RX/OTC	WAVESENSE AMP KIT	NP	RX/OTC
			ZEV RX TWIST TOP LANCETS 30G	P	RX/OTC
			Misc. Devices		
			ADVOCATE ALCOHOL PREP PADS	P	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ALCOH-GLOVE CONTOURED WIPE	P	RX/OTC	PHARMACIST CHOICE ALCOHOLPREP PADS	P	RX/OTC
ALCOHOL PADS	P	RX/OTC	PRO COMFORT ALCOHOL PADS	P	RX/OTC
ALCOHOL PREP PAD	P	RX/OTC	PURE COMFORT ALCOHOL PREPPADS	P	RX/OTC
ALCOHOL PREP PADS	P	RX/OTC	QC ALCOHOL SWABS	P	RX/OTC
ALCOHOL PREPS	P	RX/OTC	RA ALCOHOL SWABS	P	RX/OTC
ALCOHOL SWABS	P	RX/OTC	REALITY SWABS	P	RX/OTC
ALCOHOL SWABSTICKS	P	RX/OTC	RELION ALCOHOL SWABS	P	RX/OTC
AUM ALCOHOL PREP PADS	P	RX/OTC	SAPS CARE ALCOHOL PREP PADS	P	RX/OTC
BD SWABS SINGLE USE	P	RX/OTC	SAPS HEALTH ALCOHOL PREPPADS	P	RX/OTC
CARETOUCH ALCOHOL PREP PADS	P	RX/OTC	SAPS HEALTH CARE ALCOHOLPREP PADS	P	RX/OTC
COMFORT TOUCH ALCOHOL PREP PADS	P	RX/OTC	SB ALCOHOL PREP PADS	P	RX/OTC
CURITY ALCOHOL PREPS/MEDIUM 2 PLY	P	RX/OTC	SM ALCOHOL PREP PADS	P	RX/OTC
CVS ALCOHOL PREP PADS	P	RX/OTC	SURE COMFORT ALCOHOL PREP PADS	P	RX/OTC
CVS PREP PADS	P	RX/OTC	TRUE COMFORT ALCOHOL PREP PADS	P	RX/OTC
DROPSAFE ALCOHOL PREP PADS	P	RX/OTC	TRUE COMFORT PRO ALCOHOLPREP PADS	P	RX/OTC
EASY COMFORT ALCOHOL PADS	P	RX/OTC	ULTICARE ALCOHOL SWABS	P	RX/OTC
EASY TOUCH ALCOHOL PREP PADS/MEDIUM	P	RX/OTC	ULTILET ALCOHOL SWABS	P	RX/OTC
EQL ALCOHOL SWABS	P	RX/OTC	ULTRA-CARE ALCOHOL PREP PADS	P	RX/OTC
FIFTY50 ALCOHOL PREP PADS	P	RX/OTC	WEBCOL ALCOHOL PREP LARGE 1 PLY	P	RX/OTC
GLOBAL ALCOHOL PREP EASEPADS	P	RX/OTC	WEBCOL ALCOHOL PREP LARGE 2 PLY	P	RX/OTC
GNP ALCOHOL SWABS	P	RX/OTC	WEBCOL ALCOHOL PREP MEDIUM 2 PLY	P	RX/OTC
H-E-B INCONTROL ALCOHOL PADS	P	RX/OTC	ZEVrx STERILE ALCOHOL PREP PADS	P	RX/OTC
HM STERILE ALCOHOL PREP PADS	P	RX/OTC			
MEIJER ALCOHOL SWABS EXTRA-THICK	P	RX/OTC			
PHARMACIST CHOICE ALCOHOL PRED PADS	P	RX/OTC			
Parenteral Therapy Supplies					

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
1ST TIER UNIFINE PENTIPS/MINI/31GX5MM	P	RX/OTC	ADVOCATE INSULIN SYRINGE/U-100/0.5ML/31GX5/16"	P	RX/OTC
1ST TIER UNIFINE PENTIPS31GX8MM	P	RX/OTC	ADVOCATE INSULIN SYRINGE/U-100/1ML/29GX1/2"	P	RX/OTC
1ST TIER UNIFINE PENTIPS32GX4MM	P	RX/OTC	ADVOCATE INSULIN SYRINGE/U-100/1ML/31GX5/16"	P	RX/OTC
1ST TIER UNIFINE PENTIPS32GX6MM	P		AQ INSULIN SYRINGE/0.5ML/30G X 5/16"	P	RX/OTC
1ST TIER UNIFINE PENTIPSPLUS 31GX8MM	P	RX/OTC	AQ INSULIN SYRINGE/1ML/29G X 1/2"	P	RX/OTC
1ST TIER UNIFINE PENTIPSPLUS 32GX4MM	P	RX/OTC	AQ INSULIN SYRINGE/1ML/31G X 5/16"	P	RX/OTC
1ST TIER UNIFINE PENTIPSPLUS/MINI/31GX5MM	P	RX/OTC	AQINJECT PEN NEEDLE/31G X 3/16"	P	RX/OTC
ABOUTTIME PEN NEEDLE 32GX 5/32"	P	RX/OTC	AQINJECT PEN NEEDLE/32G X 5/32"	P	RX/OTC
ABOUTTIME PEN NEEDLES 31G X 3/16"	P	RX/OTC	ASSURE ID DUO PRO SAFETYPEN NEEDLES 31G X 5MM	P	RX/OTC
ABOUTTIME PEN NEEDLES 31G X 5/16"	P	RX/OTC	AUM INSULIN SAFETY PEN NEEDLE/31GX5MM	P	RX/OTC
ADVOCATE INSULIN PEN NEEDLE/32GX4MM	NP	RX/OTC	AUM MINI INSULIN PEN NEEDLE/32GX4MM	P	RX/OTC
ADVOCATE INSULIN PEN NEEDLES 29GX12.7MM	P		AUM MINI INSULIN PEN NEEDLE/32GX6MM	P	
ADVOCATE INSULIN PEN NEEDLES 31GX5MM	P	RX/OTC	AUM PEN NEEDLE/32GX4MM	P	RX/OTC
ADVOCATE INSULIN PEN NEEDLES 31GX8MM	P	RX/OTC	AUM PEN NEEDLE/32GX6MM	P	
ADVOCATE INSULIN SYRINGE/U-100/0.3ML/29GX1/2"	P	RX/OTC	AUM READYGARD DUO SAFETYPEN NEEDLE/32GX4MM/DUAL AUTO PROTEC	P	RX/OTC
ADVOCATE INSULIN SYRINGE/U-100/0.3ML/31GX5/16"	P	RX/OTC	AUM SAFETY PEN NEEDLE/31G X 5MM	P	RX/OTC
ADVOCATE INSULIN SYRINGE/U-100/0.5ML/29GX1/2"	P	RX/OTC	AURORA PEN NEEDLES 31G X8MM	P	RX/OTC
ADVOCATE INSULIN SYRINGE/U-100/0.5ML/30GX5/16"	P	RX/OTC	AURORA UNIFINE PENTIPS/32GX5/32"	P	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
AURORA UNIFINE PENTIPS/MINI/31GX3/16"	P	RX/OTC	B-D INSULIN SYRINGE ULTRAFINE/0.3ML/30G X 1/2"	P	
AUTOPEN DEVI	P	RX/OTC	BD INSULIN SYRINGE ULTRA-FINE/0.3ML/30G X 12.7MM	P	
BD LO-DOSE INSULIN SYRINGE MICROFINE IV/0.5ML/28G X 1/2"	P	RX/OTC	BD INSULIN SYRINGE ULTRA-FINE/0.3ML/30G X 12.7MM	P	
BD AUTOSHIELD DUO 30G X 5MM	P	RX/OTC	BD INSULIN SYRINGE ULTRAFINE/0.3ML/31G X 5/16"	P	RX/OTC
BD INSULIN SYRINGE LUER-LOK/U-100/1ML	P	RX/OTC	BD INSULIN SYRINGE ULTRA-FINE/0.3ML/31G X 8MM	P	RX/OTC
BD INSULIN SYRINGE MICROFINE IV/U-100/0.5ML/28G X 1/2"	P	RX/OTC	BD INSULIN SYRINGE ULTRA-FINE/0.3ML/31G X 8MM	P	RX/OTC
BD INSULIN SYRINGE MICROFINE IV/U-100/1ML/27G X 5/8"	P		BD INSULIN SYRINGE ULTRAFINE/0.5ML/30G X 1/2"	P	RX/OTC
BD INSULIN SYRINGE MICROFINE IV/U-100/1ML/28G X 1/2"	P	RX/OTC	B-D INSULIN SYRINGE ULTRAFINE/0.5ML/30G X 1/2"	P	RX/OTC
BD INSULIN SYRINGE MICROFINE IV/U-100/1ML/28G X 1/2"	P		BD INSULIN SYRINGE ULTRA-FINE/0.5ML/30G X 12.7MM	P	RX/OTC
BD INSULIN SYRINGE SAFETYGLIDE/1ML/29G X 1/2"	P	RX/OTC	BD INSULIN SYRINGE ULTRA-FINE/0.5ML/30G X 12.7MM	P	RX/OTC
BD INSULIN SYRINGE ULTRAFINE HALF-UNIT/0.3ML/31G X 5/16"	P	RX/OTC	BD INSULIN SYRINGE ULTRAFINE/0.5ML/31G X 5/16"	P	RX/OTC
B-D INSULIN SYRINGE ULTRAFINE II/0.3ML/31G X 5/16"	P	RX/OTC	BD INSULIN SYRINGE ULTRA-FINE/0.5ML/31G X 8MM	P	RX/OTC
B-D INSULIN SYRINGE ULTRAFINE II/0.5ML/31G X 5/16"	P	RX/OTC	BD INSULIN SYRINGE ULTRA-FINE/0.5ML/31G X 8MM	P	RX/OTC
B-D INSULIN SYRINGE ULTRAFINE II/1ML/31G X 5/16"	P	RX/OTC	BD INSULIN SYRINGE ULTRA-FINE/1/2 UNIT/0.3ML/31G X 8MM	P	RX/OTC
BD INSULIN SYRINGE ULTRAFINE/0.3ML/30G X 1/2"	P		BD INSULIN SYRINGE ULTRAFINE/1ML/30G X 1/2"	P	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
BD INSULIN SYRINGE ULTRA-FINE/1ML/30G X 12.7MM	P	RX/OTC	BD PEN NEEDLE/MINI/ULTRA-FINE/31G X 5MM	P	RX/OTC
BD INSULIN SYRINGE ULTRA-FINE/1ML/30G X 12.7MM	P	RX/OTC	BD PEN NEEDLE/NANO 2ND GEN/32G X 4MM	P	RX/OTC
BD INSULIN SYRINGE ULTRA-FINE/1ML/31G X 8MM	P	RX/OTC	BD PEN NEEDLE/NANO 2ND GEN/32G X 5/32"	P	RX/OTC
BD INSULIN SYRINGE ULTRA-FINE/1ML/31G X 8MM	P	RX/OTC	BD PEN NEEDLE/NANO/ULTRA-FINE/32G X 4MM	P	RX/OTC
BD INSULIN SYRINGE ULTRAFINE/U-100/0.3ML/29G X 1/2"	P	RX/OTC	BD PEN NEEDLE/NANO/ULTRA-FINE/32G X 4MM	P	RX/OTC
BD INSULIN SYRINGE ULTRAFINE/U-100/0.5ML/29G X 1/2"	P	RX/OTC	BD PEN NEEDLE/ORIGINAL/ULTRA-FINE/29G X 12.7MM	P	
BD INSULIN SYRINGE ULTRAFINE/U-100/1ML/31G X 5/16"	P	RX/OTC	BD PEN NEEDLE/ORIGINAL/ULTRA-FINE/29G X 12.7MM	P	
BD INSULIN SYRINGE/0.3ML/29G X 12.7MM	P	RX/OTC	BD PEN NEEDLE/SHORT/ULTRA-FINE/31G X 8MM	P	RX/OTC
BD INSULIN SYRINGE/0.5ML/29G X 12.7MM	P	RX/OTC	BD PEN NEEDLE/SHORT/ULTRA-FINE/31G X 8MM	P	RX/OTC
BD INSULIN SYRINGE/1ML/27G X 12.7MM	P	RX/OTC	BD PEN MISC	P	RX/OTC
BD INSULIN SYRINGE/1ML/29G X 12.7MM	P	RX/OTC	BD SAFETYGLIDE 1ML 27GX5/8"	P	
BD INSULIN SYRINGE/U-100/1ML/27G X 1/2"	P	RX/OTC	BD SAFETYGLIDE INSULIN SYRINGE/0.3ML/29G X 1/2"	P	RX/OTC
BD INSULIN SYRINGE/U-500/0.5ML/31G X 6MM	P		BD SAFETYGLIDE INSULIN SYRINGE/0.3ML/31G X 15/64"	P	RX/OTC
BD PEN MINI MISC	P	RX/OTC	BD SAFETYGLIDE INSULIN SYRINGE/0.3ML/31G X 5/16"	P	RX/OTC
BD PEN NEEDLE/MICRO/ULTRA-FINE/32G X 6MM	P		BD SAFETYGLIDE INSULIN SYRINGE/0.5ML/29G X 1/2"	P	RX/OTC
BD PEN NEEDLE/MINI/ULTRA-FINE/31G X 5MM	P	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
BD SAFETY-GLIDE INSULIN SYRINGE/0.5ML/29G X 1/2"	P	RX/OTC	CAREONE INSULIN SYRINGES/0.5ML/31G X 5/16"	P	RX/OTC
BD SAFETYGLIDE INSULIN SYRINGE/0.5ML/30G X 5/16"	P	RX/OTC	CAREONE INSULIN SYRINGES/1ML/30G X 1/2"	P	RX/OTC
BD VEO INSULIN SYRINGE ULTRA-FINE/0.3ML/31G X 6MM	P	RX/OTC	CAREONE INSULIN SYRINGES/1ML/31GX5/16"	P	RX/OTC
BD VEO INSULIN SYRINGE ULTRA-FINE/0.5ML/31G X 6MM	P	RX/OTC	CAREONE UNIFINE PENTIPS 31GX5MM	P	RX/OTC
BD VEO INSULIN SYRINGE ULTRA-FINE/1/2 UNIT/0.3ML/31G X 6MM	P	RX/OTC	CAREONE UNIFINE PENTIPS 31GX8MM	P	RX/OTC
BD VEO INSULIN SYRINGE ULTRA-FINE/1/2 UNIT/0.3ML/31G X 6MM	P	RX/OTC	CAREONE UNIFINE PENTIPS PEN NEEDLES 32GX4MM	P	RX/OTC
BD VEO INSULIN SYRINGE ULTRA-FINE/1/2 UNIT/0.3ML/31G X 6MM	P	RX/OTC	CAREONE UNIFINE PENTIPS PLUS PEN NEEDLES 31GX5MM	P	RX/OTC
BD VEO INSULIN SYRINGE ULTRA-FINE/1ML/31G X 6MM	P	RX/OTC	CAREONE UNIFINE PENTIPS PLUS PEN NEEDLES 31GX8MM	P	RX/OTC
BD VEO INSULIN SYRINGE ULTRA-FINE/U-100/0.3ML/31G X 15/64"	P	RX/OTC	CAREONE UNIFINE PENTIPS PLUS PEN NEEDLES 32GX4MM	P	RX/OTC
CAREFINE PEN NEEDLE 32GX4MM	P	RX/OTC	CARETOUCH INSULIN SYRINGE/0.3ML/31GX5/16"	P	RX/OTC
CAREFINE PEN NEEDLES 31GX8MM	P	RX/OTC	CARETOUCH INSULIN SYRINGE/0.5ML/31GX5/16"	P	RX/OTC
CAREFINE PEN NEEDLES 32GX6MM	P		CARETOUCH INSULIN SYRINGE/1ML/31GX5/16"	P	RX/OTC
CAREONE INSULIN SYRINGES/0.3ML/30G X 1/2"	P		CARETOUCH INSULIN SYRINGE0.5ML/30GX5/16"	P	RX/OTC
CAREONE INSULIN SYRINGES/0.3ML/31G X 5/16"	P	RX/OTC	CARETOUCH PEN NEEDLES 31GX 5MM	P	RX/OTC
CAREONE INSULIN SYRINGES/0.5ML/30G X 1/2"	P	RX/OTC	CARETOUCH PEN NEEDLES 31GX 8MM	P	RX/OTC
			CARETOUCH PEN NEEDLES 32GX 4MM	P	RX/OTC
			CEQUR SIMPLICITY 2U DEVI	P	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CLEVER CHOICE COMFORT EZINSULIN PEN NEEDLES 31GX8MM	P	RX/OTC	CLEVER CHOICE COMFORT EZINSULIN SYRINGE/U-100/1ML/31GX5/16"	P	RX/OTC
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.3ML/29G X 1/2"	P	RX/OTC	CLEVER CHOICE COMFORT EZPEN NEEDLES 31GX5MM	P	RX/OTC
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.3ML/30G X 1/2"	P		CLEVER CHOICE COMFORT EZPEN NEEDLES 31GX8MM	P	RX/OTC
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.3ML/31G X 5/16"	P	RX/OTC	CLEVER CHOICE COMFORT EZPEN NEEDLES 32GX4MM	P	RX/OTC
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.5ML/28G X 1/2"	P	RX/OTC	CLEVER CHOICE COMFORT EZPEN NEEDLES 32GX6MM	P	
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.5ML/29G X 1/2"	P	RX/OTC	CLICKFINE PEN NEEDLE 32GX5/32"	P	RX/OTC
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.5ML/30G X 1/2"	P	RX/OTC	CLICKFINE PEN NEEDLE UNIVERSAL/31GX5/16"	P	RX/OTC
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.5ML/30G X 1/2"	P	RX/OTC	CLICKFINE PEN NEEDLES 31G X 3/16"	P	RX/OTC
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.5ML/30G X 1/2"	P	RX/OTC	CLICKFINE PEN NEEDLES 31G X 5/16"	P	RX/OTC
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.5ML/30G X 5/16"	P	RX/OTC	CLICKFINE PEN NEEDLES 31G X 8MM	P	RX/OTC
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.5ML/31G X 5/16"	P	RX/OTC	CLICKFINE PEN NEEDLES 32G X 5/32"	P	RX/OTC
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/1.0ML/30G X 1/2"	P	RX/OTC	CLICKFINE UNIVERSAL PEN NEEDLES 31GX5/16"	P	RX/OTC
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/1ML/28G X 1/2"	P	RX/OTC	COMFORT ASSIST INSULIN SYRINGE/0.3ML/31G X 5/16"	P	RX/OTC
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/1ML/29G X 1/2"	P	RX/OTC	COMFORT EZ INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	P	RX/OTC
			COMFORT EZ INSULIN SYRINGE/U-100/1ML/31G X 5/16"	P	RX/OTC
			COMFORT EZ MICRO/32G X 4MM	P	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
COMFORT EZ PRO SAFETY PEN NEEDLES 31G X 5MM	P	RX/OTC	DROPLET INSULIN SYRINGE U-100/0.5ML/31G X 5/16"	P	RX/OTC
COMFORT EZ SHORT/31G X 8MM	P	RX/OTC	DROPLET INSULIN SYRINGE U-100/1ML/30G X 1/2"	P	RX/OTC
COMFORT EZ/31G X 5MM	P	RX/OTC	DROPLET INSULIN SYRINGE U-100/1ML/31G X 5/16"	P	RX/OTC
COMFORT TOUCH PEN NEEDLES/31G X 5MM	P	RX/OTC	DROPLET INSULIN SYRINGE/U-100/0.3ML/31G X 15/64"	P	RX/OTC
COMFORT TOUCH PEN NEEDLES/31G X 8 MM	P	RX/OTC	DROPLET INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	P	RX/OTC
COMFORT TOUCH PEN NEEDLES/32G X 4MM	P	RX/OTC	DROPLET INSULIN SYRINGE/U-100/0.5ML/30G X 1/2"	P	RX/OTC
COMFORT TOUCH PEN NEEDLES/32G X 6MM	P		DROPLET INSULIN SYRINGE/U-100/1ML/30G X 1/2"	P	RX/OTC
DIATHRIVE PEN NEEDLE/31 GX 8MM	P	RX/OTC	DROPLET INSULIN SYRINGE/U-100/1ML/31G X 5/16"	P	RX/OTC
DIATHRIVE PEN NEEDLE/31GX 5MM	P	RX/OTC	DROPLET INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	P	RX/OTC
DIATHRIVE PEN NEEDLE/32GX 4MM	P	RX/OTC	DROPLET INSULIN SYRINGE/U-100/1ML/30G X 1/2"	P	RX/OTC
DROPLET INSULIN SYRINGE 0.3ML/29G X 1/2"	P	RX/OTC	DROPLET INSULIN SYRINGE/U-100/1ML/31G X 5/16"	P	RX/OTC
DROPLET INSULIN SYRINGE 0.5ML/29G X 1/2"	P	RX/OTC	DROPLET PEN NEEDLE/MICRON/34G X 9/64"	NP	
DROPLET INSULIN SYRINGE 1ML/29G X 1/2"	P	RX/OTC	DROPLET PEN NEEDLES 31G X3/16"	P	RX/OTC
DROPLET INSULIN SYRINGE U-100/0.3/31G X 5/16"	P	RX/OTC	DROPLET PEN NEEDLES 31G X5/16"	P	RX/OTC
DROPLET INSULIN SYRINGE U-100/0.3ML/30G X 1/2"	P		DROPLET PEN NEEDLES 31GX5MM	P	RX/OTC
DROPLET INSULIN SYRINGE U-100/0.3ML/31G X 15/64"	P	RX/OTC	DROPLET PEN NEEDLES 31GX8MM	P	RX/OTC
DROPLET INSULIN SYRINGE U-100/0.5ML/30G X 1/2"	P	RX/OTC	DROPLET PEN NEEDLES 32G X 1/4"	P	
DROPLET INSULIN SYRINGE U-100/0.5ML/30G X 5/16"	P	RX/OTC	DROPLET PEN NEEDLES 32G X 5/32"	P	RX/OTC
			DROPLET PEN NEEDLES 32GX4MM	P	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
DROPLET PEN NEEDLES 32GX6MM	P		EASY COMFORT INSULIN SYRINGE/0.5ML/31G X 5/16"	P	RX/OTC
DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 29GX12.5MM 1ML	P	RX/OTC	EASY COMFORT INSULIN SYRINGE/1ML/31G X 5/16"	P	RX/OTC
DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX6MM 0.3ML	P	RX/OTC	EASY COMFORT INSULIN SYRINGE/U-100/0.5ML/30G X 1/2"	P	RX/OTC
DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX8MM 0.3ML	P	RX/OTC	EASY COMFORT INSULIN SYRINGE/U-100/1ML/30G X 1/2"	P	RX/OTC
DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX8MM 0.5ML	P	RX/OTC	EASY COMFORT PEN NEEDLES31GX3/16"	P	RX/OTC
DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX8MM 1ML	P	RX/OTC	EASY COMFORT PEN NEEDLES31GX5/16"	P	RX/OTC
DROPSAFE SAFETY PEN NEEDLE/31GX5MM	P	RX/OTC	EASY COMFORT PEN NEEDLES32GX5/32"	P	RX/OTC
DROPSAFE SAFETY PEN NEEDLES/31G X 5/16"	P	RX/OTC	EASY COMFORT SAFETY PEN NEEDLES 31GX5MM	NP	RX/OTC
DRUG MART UNIFINE PENTIPS 31GX5MM	P	RX/OTC	EASY COMFORT SAFETY PEN NEEDLES 31GX6MM	NP	RX/OTC
DRUG MART UNIFINE PENTIPS31GX8MM	P	RX/OTC	EASY COMFORT SAFETY PEN NEEDLES 32GX4MM	NP	RX/OTC
DRUG MART UNIFINE PENTIPS32GX4MM	P	RX/OTC	EASY TOUCH 32GX6MM	P	
DRUG MART UNIFINE PENTIPSPLUS 32GX4MM	P	RX/OTC	EASY TOUCH FLIPLOCK SAFETY INSULIN SYRINGE 1ML/29GX1/2"	P	RX/OTC
EASY COMFORT INSULIN SYRINGE/0.3ML/31G X 5/16"	P	RX/OTC	EASY TOUCH FLIPLOCK SAFETY INSULIN SYRINGE 1ML/30GX1/2"	P	RX/OTC
EASY COMFORT INSULIN SYRINGE/0.5ML/30G X 5/16"	P	RX/OTC	EASY TOUCH FLIPLOCK SAFETY INSULIN SYRINGE 1ML/31GX5/16"	P	RX/OTC
			EASY TOUCH INSULIN SYRINGE/0.3ML/31G X 5/16"	P	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EASY TOUCH INSULIN SYRINGE/0.5ML/29G X 1/2"	P	RX/OTC	EASY TOUCH INSULIN SYRINGE/U-100/1ML/30G X 1/2"	P	RX/OTC
EASY TOUCH INSULIN SYRINGE/0.5ML/30G X 5/16"	P	RX/OTC	EASY TOUCH INSULIN SYRINGE/U-100/1ML/31G X 5/16"	P	RX/OTC
EASY TOUCH INSULIN SYRINGE/SAFETY/U-100/0.5ML/29G X 1/2"	P	RX/OTC	EASY TOUCH PEN NEEDLES 31GX5/16"	P	RX/OTC
EASY TOUCH INSULIN SYRINGE/SAFETY/U-100/0.5ML/30G X 5/16"	P	RX/OTC	EASY TOUCH PEN NEEDLES 32GX1/4"	P	
EASY TOUCH INSULIN SYRINGE/SAFETY/U-100/1ML/29G X 1/2"	P	RX/OTC	EASY TOUCH PEN NEEDLES 32GX5/32"	P	RX/OTC
EASY TOUCH INSULIN SYRINGE/SAFETY/U-100/1ML/30G X 1/2"	P	RX/OTC	EASY TOUCH PEN NEEDLES/31G X 3/16"	P	RX/OTC
EASY TOUCH INSULIN SYRINGE/U-100/0.3ML/30G X 1/2"	P		EASY TOUCH SHEATHLOCK SAFETY INSULIN SYRINGE 1ML/29GX1/2"	P	RX/OTC
EASY TOUCH INSULIN SYRINGE/U-100/0.5ML/28G X 1/2"	P	RX/OTC	EASY TOUCH SHEATHLOCK SAFETY INSULIN SYRINGE 1ML/31GX5/16"	P	RX/OTC
EASY TOUCH INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	P	RX/OTC	EASY TOUCH SHEATHLOCK SAFETY SYRINGE 1ML/30GX1/2"	P	RX/OTC
EASY TOUCH INSULIN SYRINGE/U-100/0.5ML/30G X 1/2"	P	RX/OTC	EMBRACE PEN NEEDLES/31G X 5MM	P	RX/OTC
EASY TOUCH INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	P	RX/OTC	EMBRACE PEN NEEDLES/31G X 8MM	P	RX/OTC
EASY TOUCH INSULIN SYRINGE/U-100/1ML/27G X 1/2"	P	RX/OTC	EMBRACE PEN NEEDLES/32G X 4MM	P	RX/OTC
EASY TOUCH INSULIN SYRINGE/U-100/1ML/27G X 5/8"	P		EQL INSULIN SYRINGE/0.3ML/29G X 1/2"	P	RX/OTC
EASY TOUCH INSULIN SYRINGE/U-100/1ML/28G X 1/2"	P	RX/OTC	EQL INSULIN SYRINGE/0.3ML/31G X 5/16"	P	RX/OTC
EASY TOUCH INSULIN SYRINGE/U-100/1ML/29G X 1/2"	P	RX/OTC	EQL INSULIN SYRINGE/0.5ML/29G X 1/2"	P	RX/OTC
			EQL INSULIN SYRINGE/0.5ML/30G X 5/16"	P	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EQL INSULIN SYRINGE/0.5ML/31G X 5/16"	P	RX/OTC	FIFTY50 PEN NEEDLES/32GX6MM	P	
EQL INSULIN SYRINGE/1ML/29G X 1/2"	P	RX/OTC	FIFTY50 SUPERIOR COMFORTINSULIN SYRINGE/0.3ML/31G X 5/16"	P	RX/OTC
EQL INSULIN SYRINGE/1ML/31G X 5/16"	P	RX/OTC	FIFTY50 SUPERIOR COMFORTINSULIN SYRINGE/0.5ML/31G X 5/16"	P	RX/OTC
EXEL COMFORT POINT INSULIN PEN NEEDLES 31G X 8MM	P	RX/OTC	FIFTY50 SUPERIOR COMFORTINSULIN SYRINGE/1ML/31G X 5/16"	P	RX/OTC
EXEL COMFORT POINT INSULIN SYRINGE/0.3ML/29G X 1/2"	P	RX/OTC	FREDS PHARMACY UNIFINE PENTIPS PEN NEEDLES 32GX4MM	P	RX/OTC
EXEL COMFORT POINT INSULIN SYRINGE/0.5ML/28G X 1/2"	P	RX/OTC	FREDS PHARMACY UNIFINE PENTIPS PLUS 31GX5MM	P	RX/OTC
EXEL COMFORT POINT INSULIN SYRINGE/0.5ML/29G X 1/2"	P	RX/OTC	FREDS PHARMACY UNIFINE PENTIPS PLUS 31GX8MM	P	RX/OTC
EXEL COMFORT POINT INSULIN SYRINGE/0.5ML/30G X 5/16"	P	RX/OTC	GLOBAL EASE INJECT PEN NEEDLES 31GX8MM	P	RX/OTC
EXEL COMFORT POINT INSULIN SYRINGE/1ML/28G X 1/2"	P	RX/OTC	GLOBAL EASE INJECT PEN NEEDLES 32GX4MM	P	RX/OTC
EXEL COMFORT POINT INSULIN SYRINGE/1ML/29G X 1/2"	P	RX/OTC	GLOBAL EASE INJECT PEN NEEDLES 31GX5MM	P	RX/OTC
FIFTY50 PEN NEEDLES 31G X3/16" (5MM)	P	RX/OTC	GLOBAL EASY GLIDE INSULIN SYRINGE/0.3ML/31G X 15/64"	P	RX/OTC
FIFTY50 PEN NEEDLES 31G X5/16" (8MM)	P	RX/OTC	GLOBAL EASY GLIDE INSULINSYRINGE/U-100/0.3ML/31G X 5/16"	P	RX/OTC
FIFTY50 PEN NEEDLES 31GX5MM	P	RX/OTC	GLOBAL EASY GLIDE PEN NEEDLES 32GX4MM	P	RX/OTC
FIFTY50 PEN NEEDLES/31GX8MM	P	RX/OTC	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.3ML/29G X 1/2"	P	RX/OTC
FIFTY50 PEN NEEDLES/32GX4MM	P	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.3ML/30G X 1/2"	P		GLUCOPRO INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	P	RX/OTC
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	P	RX/OTC	GLUCOPRO INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	P	RX/OTC
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/28G X 1/2"	P	RX/OTC	GLUCOPRO INSULIN SYRINGE/U-100/1ML/30G X 1/2"	P	RX/OTC
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	P	RX/OTC	GLUCOPRO INSULIN SYRINGE/U-100/1ML/31G X 5/16"	P	RX/OTC
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/30G X 1/2"	P	RX/OTC	GNP CLICKFINE UNIVERSAL PEN NEEDLES 31GX5/16"	P	RX/OTC
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	P	RX/OTC	GNP INSULIN SYRINGE/0.3ML/29G X 1/2"	P	RX/OTC
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	P	RX/OTC	GNP INSULIN SYRINGE/0.3ML/31G X 5/16"	P	RX/OTC
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/28G X 1/2"	P	RX/OTC	GNP INSULIN SYRINGE/0.5ML/28G X 1/2"	P	RX/OTC
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/29G X 1/2"	P	RX/OTC	GNP INSULIN SYRINGE/0.5ML/29G X 1/2"	P	RX/OTC
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/30G X 1/2"	P	RX/OTC	GNP INSULIN SYRINGE/0.5ML/30G X 5/16"	P	RX/OTC
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/31G X 5/16"	P	RX/OTC	GNP INSULIN SYRINGE/0.5ML/31G X 5/16"	P	RX/OTC
GLOBAL INSULIN SYRINGE/U-100/0.3ML/30G X 1/2"	P		GNP INSULIN SYRINGE/1ML/29G X 1/2"	P	RX/OTC
GLUCOPRO INSULIN SYRINGE/U-100/0.3ML/30G X 1/2"	P		GNP INSULIN SYRINGE/1ML/31G X 5/16"	P	RX/OTC
GLUCOPRO INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	P	RX/OTC	GNP INSULIN SYRINGES/1/2ML/29GX1/2"	P	RX/OTC
GLUCOPRO INSULIN SYRINGE/U-100/0.5ML/30G X 1/2"	P	RX/OTC	GNP INSULIN SYRINGES/1ML/28GX1/2"	P	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
GNP INSULIN SYRINGES/1ML/29GX1/2"	P	RX/OTC	HEALTHWISE INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	P	RX/OTC
GNP INSULIN SYRINGES/3ML/31GX5/16"	P	RX/OTC	HEALTHWISE INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	P	RX/OTC
GNP ULTICARE PEN NEEDLES/31GX5/16"	P	RX/OTC	HEALTHWISE INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	P	RX/OTC
GNP ULTICARE PEN NEEDLES/32GX 5/32"	P	RX/OTC	HEALTHWISE INSULIN SYRINGE/U-100/1ML/31G X 5/16"	P	RX/OTC
GNP ULTICARE PEN NEEDLES/32GX1/4"	P		HEALTHWISE MICRON PEN NEEDLES/32G X 5/32"	P	RX/OTC
GNP ULTICARE PEN NEEDLES31G X 5MM	P	RX/OTC	HEALTHWISE SHORT PEN NEEDLES 31GX8MM	P	RX/OTC
GNP ULTIGUARD SAFEPACK/MICRO PEN NEEDLE/32GX4MM	P	RX/OTC	HEALTHWISE SHORT PEN NEEDLES/31G X 3/16"	P	RX/OTC
GNP ULTIGUARD SAFEPACK/MINI PEN NEEDLE/31GX5MM	P	RX/OTC	HEALTHWISE SHORT PEN NEEDLES/31G X 5/16"	P	RX/OTC
GNP ULTIGUARD SAFEPACK/MINI PEN NEEDLE/32GX6MM	P		HEALTHWISE UNIFINE PENTIPS PEN NEEDLES 32GX4MM	P	RX/OTC
GNP ULTIGUARD SAFEPACK/SHORT PEN NEEDLE/31GX8MM	P	RX/OTC	HEALTHY ACCENTS UNIFINE PENTIPS PEN NEEDLES 31GX5MM	P	RX/OTC
GNP ULTRA COMFORT INSULIN SYRINGE/1ML/28G X 1/2"	P	RX/OTC	HEALTHY ACCENTS UNIFINE PENTIPS PEN NEEDLES 31GX8MM	P	RX/OTC
GOODSENSE CLICKFINE SAFETY PEN NEEDLE/31G X 3/16"	P	RX/OTC	HEALTHY ACCENTS UNIFINE PENTIPS PEN NEEDLES 32GX4MM	P	RX/OTC
GOODSENSE PEN NEEDLE/PENFINE CLASSIC/31G X 3/16"	P	RX/OTC	H-E-B IN CONTROL PEN NEEDLE 31GX3/16"	P	RX/OTC
GOODSENSE PEN NEEDLE/PENFINE CLASSIC/31G X 5/16"	P	RX/OTC	H-E-B IN CONTROL PEN NEEDLES 31GX5MM	P	RX/OTC
GOODSENSE PEN NEEDLE/PENFINE CLASSIC/32G X 1/4"	P		H-E-B IN CONTROL PEN NEEDLES 31GX8MM	P	RX/OTC
GOODSENSE PEN NEEDLE/PENFINE CLASSIC/32G X 5/32"	P	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
H-E-B IN CONTROL PEN NEEDLES/NANO/32GX4 MM	P	RX/OTC	INPEN 100/GREY/HUMALOG DEVI	P	RX/OTC
H-E-B IN CONTROL UNIFINEPENTIPS PLUS 31GX3/16"	P	RX/OTC	INPEN 100/GREY/LILLY/HUMALOG DEVI	P	RX/OTC
H-E-B IN CONTROL UNIFINEPENTIPS PLUS 31GX5/16"	P	RX/OTC	INPEN 100/GREY/NOVOLOG/FIASP DEVI	P	RX/OTC
H-E-B IN CONTROL UNIFINEPENTIPS PLUS 31GX5MM	P	RX/OTC	INPEN 100/PINK/HUMALOG DEVI	P	RX/OTC
H-E-B IN CONTROL UNIFINEPENTIPS PLUS 32GX4MM	P	RX/OTC	INPEN 100/PINK/LILLY/HUMALOG DEVI	P	RX/OTC
H-E-B IN CONTROL UNIFINEPENTIPS PLUS 32GX5/32"	P	RX/OTC	INPEN 100/PINK/NOVOLOG/FIASP DEVI	P	RX/OTC
HM ULTICARE INSULIN SYRINGE/1ML/30G X 1/2"	P	RX/OTC	INSULIN SYRINGE/0.3ML/31G X 5/16"	P	RX/OTC
HM ULTICARE INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	P	RX/OTC	INSULIN SYRINGE/0.5ML/28G X 1/2"	P	RX/OTC
HM ULTICARE MINI PEN NEEDLES/31G X 5MM (3/16")	P	RX/OTC	INSULIN SYRINGE/0.5ML/30G X 5/16"	P	RX/OTC
HM ULTICARE SHORT PEN NEEDLES 31GX8MM	P	RX/OTC	INSULIN SYRINGE/0.5ML/31G X 5/16"	P	RX/OTC
INCONTROL ULTICARE MINI PEN NEEDLES/31GX8MM	P	RX/OTC	INSULIN SYRINGE/1ML/28G X 1/2"	P	RX/OTC
INCONTROL ULTICARE MINI PEN NEEDLES/32G X 4MM	P	RX/OTC	INSULIN SYRINGE/1ML/29G X 1/2"	P	RX/OTC
INPEN 100/BLUE/HUMALOG DEVI	P	RX/OTC	INSULIN SYRINGE/NEEDLE 0.3ML/31G X 5/16"	P	RX/OTC
INPEN 100/BLUE/LILLY/HUMALOG DEVI	P	RX/OTC	INSULIN SYRINGE/NEEDLE 0.5ML/29G X 1/2"	P	RX/OTC
INPEN 100/BLUE/NOVOLOG/FIASP DEVI	P	RX/OTC	INSULIN SYRINGE/NEEDLE 0.5ML/30G X 5/16"	P	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
INSULIN SYRINGE/NEEDLE 0.5ML/31G X 5/16"	P	RX/OTC	INSUPEN SENSITIVE 32GX6MM	P	
INSULIN SYRINGE/NEEDLE 1ML/29G X 1/2"	P	RX/OTC	INSUPEN ULTRAFIN 31GX8MM	P	RX/OTC
INSULIN SYRINGE/NEEDLE 1ML/31G X 5/16"	P	RX/OTC	KINRAY INSULIN SYRINGE PREFERRED PLUS/0.3ML/31G X 5/16"	P	RX/OTC
INSULIN SYRINGE/U-100/0.3ML/29G X 1/2"	P	RX/OTC	KINRAY INSULIN SYRINGE PREFERRED PLUS/0.5ML/31G X 5/16"	P	RX/OTC
INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	P	RX/OTC	KINRAY INSULIN SYRINGE PREFERRED PLUS/1ML/31G X 5/16"	P	RX/OTC
INSULIN SYRINGE/U-100/1ML/29G X 1/2"	P	RX/OTC	KINRAY INSULIN SYRINGE/0.5ML/29G X 1/2"	P	RX/OTC
INSULIN SYRINGE/U-100/1ML/30G X 5/16"	P	RX/OTC	KMART VALU PLUS INSULIN SYRINGE/1ML/29G	P	RX/OTC
INSULIN SYRINGE/U-100/1ML/31G X 5/16"	P	RX/OTC	KMART VALU PLUS INSULIN SYRINGE/1ML/30G	P	RX/OTC
INSULIN SYRINGES/U-100/0.5ML/28GX1/2"	P	RX/OTC	KROGER INSULIN SYRINGE/0.3ML/29G X 1/2"	P	RX/OTC
INSULIN SYRINGES/U-100/0.5ML/29GX1/2"	P	RX/OTC	KROGER INSULIN SYRINGE/0.3ML/31G X 5/16"	P	RX/OTC
INSULIN SYRINGES/U-100/0.5ML/30GX5/16"	P	RX/OTC	KROGER INSULIN SYRINGE/0.5ML/29G X 1/2"	P	RX/OTC
INSULIN SYRINGES/U-100/0.5ML/31GX5/16"	P	RX/OTC	KROGER INSULIN SYRINGE/0.5ML/30G X 5/16"	P	RX/OTC
INSULIN SYRINGES/U-100/1ML/27GX1/2"	P	RX/OTC	KROGER INSULIN SYRINGE/0.5ML/31G X 5/16"	P	RX/OTC
INSULIN SYRINGES/U-100/1ML/28GX1/2"	P	RX/OTC	KROGER INSULIN SYRINGE/1ML/29G X 1/2"	P	RX/OTC
INSULIN SYRINGES/U-100/1ML/29GX1/2"	P	RX/OTC	KROGER INSULIN SYRINGE/1ML/31G X 5/16"	P	RX/OTC
INSULIN SYRINGES/U-100/1ML/30GX1/2"	P	RX/OTC			
INSULIN SYRINGES/U-100/1ML/31GX5/16"	P	RX/OTC			
INSUPEN 31G X 5MM	P	RX/OTC			
INSUPEN 31G X 8MM	P	RX/OTC			
INSUPEN 32G X 4MM	P	RX/OTC			
INSUPEN PEN NEEDLES 32G X4MM	P	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
KROGER PEN NEEDLES/31G X3/16"	P	RX/OTC	LEADER UNIFINE PENTIPS/PLUS/32GX5/32"	P	RX/OTC
KROGER PEN NEEDLES/31G X5/16"	P	RX/OTC	LITETOUCH INSULIN PEN NEEDLES/32G X 4MM/MINI	P	RX/OTC
KROGER PEN NEEDLES/32G X5/32"	P	RX/OTC	LITETOUCH INSULIN SYRINGE/0.3ML/29G X 1/2"	P	RX/OTC
LEADER INSULIN SYRINGE/0.3ML/29G X 1/2"	P	RX/OTC	LITETOUCH INSULIN SYRINGE/0.3ML/31G X 5/16"	P	RX/OTC
LEADER INSULIN SYRINGE/0.3ML/31G X 5/16"	P	RX/OTC	LITETOUCH INSULIN SYRINGE/0.5ML/30G X 5/16"	P	RX/OTC
LEADER INSULIN SYRINGE/0.5ML/28G X 1/2"	P	RX/OTC	LITETOUCH INSULIN SYRINGE/0.5ML/31G X 5/16"	P	RX/OTC
LEADER INSULIN SYRINGE/0.5ML/29G X 1/2"	P	RX/OTC	LITETOUCH INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	P	RX/OTC
LEADER INSULIN SYRINGE/0.5ML/30G X 5/16"	P	RX/OTC	LITETOUCH INSULIN SYRINGE/U-100/0.5ML/28G X 1/2"	P	RX/OTC
LEADER INSULIN SYRINGE/0.5ML/31G X 5/16"	P	RX/OTC	LITETOUCH INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	P	RX/OTC
LEADER INSULIN SYRINGE/1ML/28G X 1/2"	P	RX/OTC	LITETOUCH INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	P	RX/OTC
LEADER INSULIN SYRINGE/1ML/29G X 1/2"	P	RX/OTC	LITETOUCH INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	P	RX/OTC
LEADER INSULIN SYRINGE/1ML/31G X 5/16"	P	RX/OTC	LITETOUCH INSULIN SYRINGE/U-100/1ML/28G X 1/2"	P	RX/OTC
LEADER UNIFINE PENTIPS PLUS/MINI/31GX3/16"	P	RX/OTC	LITETOUCH INSULIN SYRINGE/U-100/1ML/29G X 1/2"	P	RX/OTC
LEADER UNIFINE PENTIPS PLUS/SHORT/31GX5/16"	P	RX/OTC	LITETOUCH INSULIN SYRINGE/U-100/1ML/31G X 5/16"	P	RX/OTC
LEADER UNIFINE PENTIPS/MINI/31GX3/16"	P	RX/OTC	LITETOUCH PEN NEEDLES 29GX12.7MM	P	
LEADER UNIFINE PENTIPS/NANO/32GX5/32"	P	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
LITETOUCH PEN NEEDLES 31GX8MM SHORT	P	RX/OTC	MEDICINE SHOPPE PEN NEEDLES 31G X 8MM	P	RX/OTC
LITETOUCH PEN NEEDLES/31G X 3/16"	P	RX/OTC	MEIJER PEN NEEDLES 31G X8MM	P	RX/OTC
LITETOUCH PEN NEEDLES/31G X 5MM/MINI	P	RX/OTC	MICRODOT PEN NEEDLE/32G X 4 MM	P	RX/OTC
LITETOUCH PEN NEEDLES/31G X 8MM/SHORT	P	RX/OTC	MM INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	P	RX/OTC
LONGS INSULIN SYRINGE/0.5ML/31G X 5/16"	P	RX/OTC	MM INSULIN SYRINGE/U-100/1/2ML/30G X 5/16"	P	RX/OTC
MAGELLAN INSULIN SAFETY SYRINGE/U-100/0.3ML/29G X 1/2"	P	RX/OTC	MM INSULIN SYRINGE/U-100/1/2ML/31G X 5/16"	P	RX/OTC
MAGELLAN INSULIN SAFETY SYRINGE/U-100/0.5ML/29G X 1/2"	P	RX/OTC	MM INSULIN SYRINGE/U-100/1ML/31G X 5/16"	P	RX/OTC
MAGELLAN INSULIN SAFETY SYRINGE/U-100/0.5ML/30G X 5/16"	P	RX/OTC	MM PEN NEEDLES 31G X 3/16"	P	RX/OTC
MAGELLAN INSULIN SAFETY SYRINGE/U-100/1ML/29G X 1/2"	P	RX/OTC	MM PEN NEEDLES 31G X 5/16"	P	RX/OTC
MARATHON MEDICAL PENTIPS31GX5MM	P	RX/OTC	MM PEN NEEDLES 32G X 5/32"	P	RX/OTC
MARATHON MEDICAL PENTIPS31GX8MM	P	RX/OTC	MONOJECT INSULIN SYRINGE/1ML	P	RX/OTC
MARATHON MEDICAL PENTIPS32GX4MM	P	RX/OTC	MONOJECT INSULIN SYRINGE/1ML/31G X 5/16"	P	RX/OTC
MAXI-COMFORT INSULIN SYRINGE/U-100/0.5ML/28GX1/2"	P	RX/OTC	MONOJECT INSULIN SYRINGE/DETACH NEEDLE/1ML/25G X 5/8"	P	
MAXI-COMFORT INSULIN SYRINGE/U-100/1ML/28GX1/2"	P	RX/OTC	MONOJECT INSULIN SYRINGE/DETACH NEEDLE/1ML/27G X 1/2"	P	RX/OTC
MAXICOMFORT INSULIN SYRINGES 27G X 1/2"	P	RX/OTC	MONOJECT INSULIN SYRINGE/PERM NEEDLE/1ML/28G X 1/2"	P	RX/OTC
MEDIC INSULIN SYRINGE/0.5ML/30G X 5/16"	P	RX/OTC	MONOJECT INSULIN SYRINGE/PERM NEEDLE/U-100/0.5ML/28G X 1/2"	P	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MONOJECT INSULIN SYRINGE/SAFETY/PERM NEEDLE/0.3ML/29G X 1/2"	P	RX/OTC	MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.5ML/30G X 5/16"	P	RX/OTC
MONOJECT INSULIN SYRINGE/SAFETY/PERM NEEDLE/0.3ML/29GX1/2"	P	RX/OTC	MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.5ML/31G X 5/16"	P	RX/OTC
MONOJECT INSULIN SYRINGE/SAFETY/PERM NEEDLE/0.5ML/29G X 1/2"	P	RX/OTC	MONOJECT ULTRA COMFORT INSULIN SYRINGE/1ML/28G X 1/2"	P	RX/OTC
MONOJECT INSULIN SYRINGE/SAFETY/PERM NEEDLE/1ML/29G X 1/2"	P	RX/OTC	MONOJECT ULTRA COMFORT INSULIN SYRINGE/1ML/29G X 1/2"	P	RX/OTC
MONOJECT INSULIN SYRINGE/SOFTPACK/1ML/27G X 1/2"	P	RX/OTC	MS INSULIN SYRINGE/0.3ML/31G X 5/16"	P	RX/OTC
MONOJECT INSULIN SYRINGE/SOFTPACK/U-100/0.5ML/28G X 1/2"	P	RX/OTC	MS INSULIN SYRINGE/0.5ML/31G X 5/16"	P	RX/OTC
MONOJECT INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	P	RX/OTC	MS INSULIN SYRINGE/1ML/31G X 5/16"	P	RX/OTC
MONOJECT INSULIN SYRINGE/U-100/1ML/28G X 1/2"	P	RX/OTC	NOVOFINE PEN NEEDLE 32G X 6MM	P	
MONOJECT INSULIN SYRINGE REGULAR LUER TIP/SOFTPACK/1ML	P	RX/OTC	NOVOFINE PLUS PEN NEEDLE 32G X 4MM	P	RX/OTC
MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.3ML/29G X 1/2"	P	RX/OTC	NOVOPEN ECHO DEVI	P	RX/OTC
MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.3ML/31G X 5/16"	P	RX/OTC	PC UNIFINE PENTIPS 31G X 5MM MINI	P	RX/OTC
MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.5ML/28G X 1/2"	P	RX/OTC	PC UNIFINE PENTIPS 31G X 8MM SHORT	P	RX/OTC
MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.5ML/29G X 1/2"	P	RX/OTC	PEN NEEDLES 31G X 3/16"	P	RX/OTC
			PEN NEEDLES 31G X 5MM	P	RX/OTC
			PEN NEEDLES 31G X 8MM	NP	RX/OTC
			PEN NEEDLES 31G X 8MM	P	RX/OTC
			PEN NEEDLES 31GX5/16"	P	RX/OTC
			PEN NEEDLES 31GX5MM	P	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PEN NEEDLES 31GX8MM	P	RX/OTC	PREFERRED PLUS INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	P	RX/OTC
PEN NEEDLES 31GX8MM (5/16")	P	RX/OTC	PREFERRED PLUS INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	P	RX/OTC
PEN NEEDLES 32G X 4MM	P	RX/OTC	PREFERRED PLUS INSULIN SYRINGE/U-100/1ML/28G X 1/2"	P	RX/OTC
PEN NEEDLES 32G X 4MM	NP	RX/OTC	PREFERRED PLUS INSULIN SYRINGE/U-100/1ML/29G X 1/2"	P	RX/OTC
PEN NEEDLES 32G X 6MM	P		PREFERRED PLUS UNIFINE PENTIPS 31G X 8MM SHORT	P	RX/OTC
PEN NEEDLES 32GX4MM	P	RX/OTC	PREFERRED PLUS UNIFINE PENTIPS 32GX4MM	P	RX/OTC
PEN NEEDLES/31G X 3/16"	P	RX/OTC	PREFERRED PLUS UNIFINE PENTIPS/MINI/31GX5MM	P	RX/OTC
PEN NEEDLES/31G X 5/16"	P	RX/OTC	PREVENT DROPSAFE SAFETY PEN NEEDLES 31GX5/16"	P	RX/OTC
PEN NEEDLES/32G X 5/32"	P	RX/OTC	PREVENT SAFETY PEN NEEDLES 31GX5/16"	P	RX/OTC
PENTIPS 29GX12MM	P	RX/OTC	PRO COMFORT INSULIN SYRINGES/0.5ML/30G X 1/2"	P	RX/OTC
PENTIPS 31G X 5MM	P	RX/OTC	PRO COMFORT INSULIN SYRINGES/0.5ML/30G X 5/16"	NP	RX/OTC
PENTIPS 31G X 8MM	P	RX/OTC	PRO COMFORT INSULIN SYRINGES/0.5ML/30G X 5/16"	P	RX/OTC
PENTIPS 31GX5MM	P	RX/OTC	PRO COMFORT INSULIN SYRINGES/0.5ML/31G X 5/16"	NP	RX/OTC
PENTIPS 31GX5MM	P	RX/OTC	PRO COMFORT INSULIN SYRINGES/0.5ML/31G X 5/16"	P	RX/OTC
PENTIPS 31GX6MM	P	RX/OTC	PRO COMFORT INSULIN SYRINGES/1ML/30G X 1/2"	P	RX/OTC
PENTIPS 31GX8MM	P	RX/OTC			
PENTIPS 31GX8MM	P	RX/OTC			
PENTIPS 32G X 4MM	P	RX/OTC			
PENTIPS 32GX4MM	P	RX/OTC			
PENTIPS 32GX4MM	P	RX/OTC			
PENTIPS 32GX4MM	P	RX/OTC			
PENTIPS 32GX6MM	P				
PIP PEN NEEDLES 31G X 5MM	P	RX/OTC			
PIP PEN NEEDLES 32G X 4MM	P	RX/OTC			
PREFERRED PLUS INSULIN SYRINGE/U-100/0.3ML/29G X 1/2"	P	RX/OTC			
PREFERRED PLUS INSULIN SYRINGE/U-100/0.5ML/28G X 1/2"	P	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PRO COMFORT INSULIN SYRINGES/1ML/30G X 5/16"	NP	RX/OTC	QC UNIFINE PENTIPS 32GX4MM	P	RX/OTC
PRO COMFORT INSULIN SYRINGES/1ML/31G X 5/16"	NP	RX/OTC	RA INSULIN SYRINGE/0.5ML/29G X 1/2"	P	RX/OTC
PRO COMFORT INSULIN SYRINGES/1ML/31G X 5/16"	P	RX/OTC	RA INSULIN SYRINGE/1ML/29G X 1/2"	P	RX/OTC
PRO COMFORT PEN NEEDLES/31G X 8MM	P	RX/OTC	RA INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	P	RX/OTC
PRO COMFORT PEN NEEDLES/32G X 4MM	P	RX/OTC	RA PEN NEEDLES 31G X 5MM3/16"	P	RX/OTC
PRO COMFORT PEN NEEDLES/32G X 6MM	P		RA PEN NEEDLES 31G X 8MM5/16"	P	RX/OTC
PRODIGY INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	P	RX/OTC	RAYA SURE PEN NEEDLE 31GX 5MM	P	RX/OTC
PRODIGY INSULIN SYRINGE/1/2ML/31G X 5/16"	P	RX/OTC	RAYA SURE PEN NEEDLE 31GX 8MM	P	RX/OTC
PRODIGY INSULIN SYRINGE/1ML/28G X 1/2"	P	RX/OTC	REALITY INSULIN SYRINGE/U-100/0.5ML/28G X 1/2"	P	RX/OTC
PURE COMFORT PEN NEEDLE 32G X6MM	P		REALITY INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	P	RX/OTC
PURE COMFORT PEN NEEDLE/32G X4MM	P	RX/OTC	REALITY INSULIN SYRINGE/U-100/1ML/28G X 1/2"	P	RX/OTC
PURE COMFORT SAFETY PEN NEEDLE 31G X 5MM	P	RX/OTC	REALITY INSULIN SYRINGE/U-100/1ML/29G X 1/2"	P	RX/OTC
PURE COMFORT SAFETY PEN NEEDLE 32G X 4MM	P	RX/OTC	RELION INSULIN SYRINGE/U-100/0.3ML/31G X 15/64"	P	RX/OTC
PX INSULIN SYRINGE/U-100/0.5ML/30G X 1/2"	P	RX/OTC	RELION INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	P	RX/OTC
PX MINI PEN NEEDLES 31GX5MM	P	RX/OTC	RELION INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	P	RX/OTC
PX PEN NEEDLE 31GX8MM	P	RX/OTC	RELION INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	P	RX/OTC
PX SHORTLENGTH PEN NEEDLES/31GX8MM	P	RX/OTC	RELION INSULIN SYRINGE/U-100/1ML/31G X 5/16"	P	RX/OTC
QC PEN NEEDLES 31G X 8MM	P	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
RELION PEN NEEDLES 31G X8MM	P	RX/OTC	SHOPKO UNIFINE PENTIPS PEN NEEDLES/MINI/31GX5MM	P	RX/OTC
RELION PEN NEEDLES 31GX5/16"	P	RX/OTC	SHOPKO UNIFINE PENTIPS PEN NEEDLES/SHORT/31GX8MM	P	RX/OTC
RELION PEN NEEDLES 31GX8MM	P	RX/OTC	SHOPKO UNIFINE PENTIPS PLUS PEN NEEDLES/MICRO/REMOV R/32GX4MM	P	RX/OTC
RELION PEN NEEDLES 32G X4MM	P	RX/OTC	SHOPKO UNIFINE PENTIPS PLUS PEN NEEDLES/MINI/REMOVE R/31GX5MM	P	RX/OTC
RELION PEN NEEDLES 32G X5/32"	P	RX/OTC	SHOPKO UNIFINE PENTIPS PLUS PEN NEEDLES/SHORT/REMOV R/31GX8MM	P	RX/OTC
RELION PEN NEEDLES 32GX4MM	P	RX/OTC	SURE COMFORT AUTOKEEPER SAFETY PEN NEEDLES 32GX5/32"	P	RX/OTC
RELION SHORT PEN NEEDLES31GX8MM	P	RX/OTC	SURE COMFORT INSULIN SYRINGE/U-100/0.3ML/29G X 1/2"	P	RX/OTC
SAFETY INSULIN SYRINGES 0.5ML/29GX1/2"	P	RX/OTC	SURE COMFORT INSULIN SYRINGE/U-100/0.3ML/30G X 1/2"	P	RX/OTC
SAFETY INSULIN SYRINGES 0.5ML/30GX5/16"	P	RX/OTC	SURE COMFORT INSULIN SYRINGE/U-100/0.3ML/31G X 5/16	P	RX/OTC
SAFETY INSULIN SYRINGES 1ML/29GX1/2"	P	RX/OTC	SURE COMFORT INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	P	RX/OTC
SAFETY INSULIN SYRINGES 1ML/30GX1/2"	P	RX/OTC	SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/28G X 1/2"	P	RX/OTC
SB INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	P	RX/OTC	SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	P	RX/OTC
SB INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	P	RX/OTC	SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/30G X 1/2"	P	RX/OTC
SB INSULIN SYRINGE/U-100/1ML/29G X 1/2"	P	RX/OTC	SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/30G X 1/2"	P	RX/OTC
SB INSULIN SYRINGE/U-100/1ML/31G X 5/16"	P	RX/OTC			
SECURES SAFE SAFETY INSULIN SYRINGES/U-100/0.5ML/29GX1/2"	P	RX/OTC			
SECURES SAFE SAFETY INSULIN SYRINGES/U-100/1ML/29GX1/2"	P	RX/OTC			
SHOPKO UNIFINE PENTIPS PEN NEEDLES/MICRO/32GX4MM	P	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	P	RX/OTC	TECHLITE INSULIN SYRINGEU-100/0.5ML/30G X 1/2"	P	RX/OTC
SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	P	RX/OTC	TECHLITE INSULIN SYRINGEU-100/0.5ML/30G X 5/16"	P	RX/OTC
SURE COMFORT INSULIN SYRINGE/U-100/1ML/28G X 1/2"	P	RX/OTC	TECHLITE INSULIN SYRINGEU-100/0.5ML/31G X 5/16"	P	RX/OTC
SURE COMFORT INSULIN SYRINGE/U-100/1ML/29G X 1/2"	P	RX/OTC	TECHLITE INSULIN SYRINGEU-100/1ML/29G X 1/2"	P	RX/OTC
SURE COMFORT INSULIN SYRINGE/U-100/1ML/30G X 1/2"	P	RX/OTC	TECHLITE INSULIN SYRINGEU-100/1ML/30G X 1/2"	P	RX/OTC
SURE COMFORT INSULIN SYRINGE/U-100/1ML/30G X 5/16"	P	RX/OTC	TECHLITE INSULIN SYRINGEU-100/1ML/31G X 5/16"	P	RX/OTC
SURE COMFORT INSULIN SYRINGE/U-100/1ML/31G X 5/16"	P	RX/OTC	TECHLITE PEN NEEDLES 31GX 5MM	P	RX/OTC
SURE COMFORT PEN NEEDLES29GX1/2" 12.7MM	P		TECHLITE PEN NEEDLES/31GX 8MM	P	RX/OTC
SURE COMFORT PEN NEEDLES31GX3/16" (5MM)	P	RX/OTC	TECHLITE PEN NEEDLES/32GX 6MM	P	
SURE COMFORT PEN NEEDLES31GX5/16" (8MM)	P	RX/OTC	TECHLITE PLUS PEN NEEDLES32G X 4MM	P	RX/OTC
SURE COMFORT PEN NEEDLES32GX5/32"	P	RX/OTC	TODAYS HEALTH SHORT PEN NEEDLES 31G X 5/16"	P	RX/OTC
SURE COMFORT PEN NEEDLES32GX5/32" (4MM)	P	RX/OTC	TOPCARE CLICKFINE UNIVERSAL PEN NEEDLES 31GX5/16"	P	RX/OTC
SURE COMFORT PEN NEEDLES32GX6MM	P		TOPCARE ULTRA COMFORT INSULIN SYRINGE/0.3ML/31G X 5/16"	P	RX/OTC
TECHLITE INSULIN SYRINGEU-100/0.3ML/31G X 15/64"	P	RX/OTC	TOPCARE ULTRA COMFORT INSULIN SYRINGE/0.5ML/30G X 5/16"	P	RX/OTC
TECHLITE INSULIN SYRINGEU-100/0.3ML/31G X 5/16"	P	RX/OTC	TOPCARE ULTRA COMFORT INSULIN SYRINGE/0.5ML/31G X 5/16"	P	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TOPCARE ULTRA COMFORT INSULIN SYRINGE/1ML/31G X 5/16"	P	RX/OTC	TRUE COMFORT PRO PEN NEEDLES 31G X 5MM	P	RX/OTC
TOPCARE ULTRA COMFORT INSULIN SYRINGE/U-100/0.3ML/29G X 1/2"	P	RX/OTC	TRUE COMFORT PRO PEN NEEDLES 31G X 8MM	P	RX/OTC
TOPCARE ULTRA COMFORT INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	P	RX/OTC	TRUE COMFORT PRO PEN NEEDLES 32G X 4MM	P	RX/OTC
TOPCARE ULTRA COMFORT INSULIN SYRINGE/U-100/1ML/29G X 1/2"	P	RX/OTC	TRUE COMFORT PRO PEN NEEDLES 32G X 6MM	P	
TRUE COMFORT INSULIN SYRINGE/0.5ML/31G X 5/16"	P	RX/OTC	TRUE COMFORT SAFETY INSULIN SYRINGE/0.5ML/30G X 5/16"	P	RX/OTC
TRUE COMFORT INSULIN SYRINGE/1ML/31G X 5/16"	P	RX/OTC	TRUE COMFORT SAFETY INSULIN SYRINGE/0.5ML/31G X 5/16"	P	RX/OTC
TRUE COMFORT PEN NEEDLES31G X 5MM	P	RX/OTC	TRUE COMFORT SAFETY INSULIN SYRINGE/1ML/31G X 5/16"	P	RX/OTC
TRUE COMFORT PEN NEEDLES32G X 4MM	P	RX/OTC	TRUE COMFORT SAFETY INSULIN SYRINGE/U-100/0.5ML/30G X 1/2"	P	RX/OTC
TRUE COMFORT PRO INSULINSYRINGE/0.5ML/30G X 5/16"	P	RX/OTC	TRUE COMFORT SAFETY INSULIN SYRINGE/U-100/1ML/30G X 1/2"	P	RX/OTC
TRUE COMFORT PRO INSULINSYRINGE/0.5ML/31G X 5/16"	P	RX/OTC	TRUE COMFORT SAFETY PEN NEEDLES 31G X 5MM	NP	RX/OTC
TRUE COMFORT PRO INSULINSYRINGE/1ML/31G X 5/16"	P	RX/OTC	TRUE COMFORT SAFETY PEN NEEDLES 31G X 5MM	P	RX/OTC
TRUE COMFORT PRO INSULINSYRINGE/U-100/0.5ML/30G X 1/2"	P	RX/OTC	TRUE COMFORT SAFETY PEN NEEDLES 32G X 4MM	P	RX/OTC
TRUE COMFORT PRO INSULINSYRINGE/U-100/1ML/30G X 1/2"	P	RX/OTC	TRUEPLUS 5-BEVEL PEN NEEDLES 29GX12.7MM	P	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TRUEPLUS 5-BEVEL PEN NEEDLES 31GX5MM	P	RX/OTC	ULTICARE INSULIN SAFETY SYRINGE/0.5ML/29G X 1/2"	P	RX/OTC
TRUEPLUS 5-BEVEL PEN NEEDLES 31GX8MM	P	RX/OTC	ULTICARE INSULIN SAFETY SYRINGE/1ML/29G X 1/2"	P	RX/OTC
TRUEPLUS 5-BEVEL PEN NEEDLES 32GX4MM	P	RX/OTC	ULTICARE INSULIN SYRINGE/0.3ML/29G X 1/2"	P	RX/OTC
TRUEPLUS INSULIN SYRINGE/U-100/0.3ML/29G X 1/2"	P	RX/OTC	ULTICARE INSULIN SYRINGE/0.3ML/30G X 1/2"	P	
TRUEPLUS INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	P	RX/OTC	ULTICARE INSULIN SYRINGE/0.5ML/28G X 1/2"	P	RX/OTC
TRUEPLUS INSULIN SYRINGE/U-100/0.5ML/28G X 1/2"	P	RX/OTC	ULTICARE INSULIN SYRINGE/0.5ML/29G X 1/2"	P	RX/OTC
TRUEPLUS INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	P	RX/OTC	ULTICARE INSULIN SYRINGE/0.5ML/30G X 1/2"	P	RX/OTC
TRUEPLUS INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	P	RX/OTC	ULTICARE INSULIN SYRINGE/0.5ML/30G X 5/16"	P	RX/OTC
TRUEPLUS INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	P	RX/OTC	ULTICARE INSULIN SYRINGE/1ML/28G X 1/2"	P	RX/OTC
TRUEPLUS INSULIN SYRINGE/U-100/1ML/28G X 1/2"	P	RX/OTC	ULTICARE INSULIN SYRINGE/1ML/29G X 1/2"	P	RX/OTC
TRUEPLUS INSULIN SYRINGE/U-100/1ML/29G X 1/2"	P	RX/OTC	ULTICARE INSULIN SYRINGE/1ML/30G X 1/2"	P	RX/OTC
TRUEPLUS INSULIN SYRINGE/U-100/1ML/31G X 5/16"	P	RX/OTC	ULTICARE INSULIN SYRINGE/SHORT/0.3ML/31G X 5/16"	P	RX/OTC
TRUEPLUS PEN NEEDLES 31GX5MM	P	RX/OTC	ULTICARE INSULIN SYRINGE/SHORT/0.5ML/30G X 5/16"	P	RX/OTC
TRUEPLUS PEN NEEDLES 31GX8MM	P	RX/OTC	ULTICARE INSULIN SYRINGE/SHORT/0.5ML/31G X 5/16"	P	RX/OTC
TRUEPLUS PEN NEEDLES 32GX4MM	P	RX/OTC	ULTICARE INSULIN SYRINGE/SHORT/1ML/31G X 5/16"	P	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ULTICARE INSULIN SYRINGE/U-100/0.3ML/30G X 1/2"	P		ULTICARE PEN NEEDLES 31GX 5MM/MINI	P	RX/OTC
ULTICARE INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	P	RX/OTC	ULTICARE PEN NEEDLES/29GX 12.7MM	P	
ULTICARE INSULIN SYRINGE/U-100/0.5ML/30G X 1/2"	P	RX/OTC	ULTICARE SHORT PEN NEEDLES 31GX8MM	P	RX/OTC
ULTICARE INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	P	RX/OTC	ULTICARE SHORT PEN NEEDLES ULTI-FINE IV	P	RX/OTC
ULTICARE INSULIN SYRINGE/U-100/1ML/30G X 1/2"	P	RX/OTC	ULTICARE SHORT PEN NEEDLES/31G X 8MM	P	RX/OTC
ULTICARE INSULIN SYRINGE/U-100/1ML/31G X 5/16"	P	RX/OTC	ULTICARE TUBERCULIN SAFETY SYRINGES/1ML/27G X 5/8"	P	
ULTICARE INSULIN SYRINGE ULTRAFINE U-100/0.3ML/31G X 5/16"	P	RX/OTC	ULTIGUARD SAFEPACK INSULIN SYRINGE 0.3ML/30G X 1/2"/SHARPS C	P	
ULTICARE INSULIN SYRINGE ULTRAFINE U-100/0.5ML/31G X 5/16"	P	RX/OTC	ULTIGUARD SAFEPACK INSULIN SYRINGE 1/2ML 30G X 1/2"/SHARPS C	P	RX/OTC
ULTICARE INSULIN SYRINGE ULTRAFINE U-100/1ML/31G X 5/16"	P	RX/OTC	ULTIGUARD SAFEPACK INSULIN SYRINGE 1ML 30G X 1/2"/SHARPS CON	P	RX/OTC
ULTICARE MICRO PEN NEEDLES 31G X 8MM	P	RX/OTC	ULTIGUARD SAFEPACK INSULIN SYRINGE 1ML 31G X 5/16"/SHARPS CO	P	RX/OTC
ULTICARE MICRO PEN NEEDLES 32G X 4MM	P	RX/OTC	ULTIGUARD SAFEPACK INSULIN SYRINGE/0.3ML/30G X 1/2"/SHARPS C	P	
ULTICARE MICRO PEN NEEDLES/31G X 5/16"	P	RX/OTC	ULTIGUARD SAFEPACK INSULIN SYRINGE/0.3ML/31G X 5/16"/SHARPS	P	RX/OTC
ULTICARE MICRO PEN NEEDLES/32G X 4MM	P	RX/OTC	ULTIGUARD SAFEPACK INSULIN SYRINGE/0.5ML/30G X 1/2"/SHARPS C	P	RX/OTC
ULTICARE MICRO PEN NEEDLES/32G X 5/32"	P	RX/OTC	ULTIGUARD SAFEPACK MINI PEN NEEDLE/31G X 3/16"/SHARPS CONTAI	P	RX/OTC
ULTICARE MINI PEN NEEDLES/32G X 1/4"	P				
ULTICARE ORIGINAL PEN NEEDLES ULTI-FINE	P				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ULTIGUARD SAFEPACK PEN NEEDLE/29G X 1/2"/SHARPS CONTAINER	P		ULTILET PEN NEEDLE 32GX4MM	P	RX/OTC
ULTIGUARD SAFEPACK/MICROPEN NEEDLE/32G X 4 MM	P	RX/OTC	ULTILET PEN NEEDLE 32GX4MM/SHORT	P	RX/OTC
ULTIGUARD SAFEPACK/MICROPEN NEEDLE/32G X 4MM/SHARPS CONTAIN	P	RX/OTC	ULTILET SHORT PEN NEEDLES 31GX5/16"	P	RX/OTC
ULTIGUARD SAFEPACK/MICROPEN NEEDLE/32G X 5/32"	P	RX/OTC	ULTILET SHORT PEN NEEDLES31GX3/16"	P	RX/OTC
ULTIGUARD SAFEPACK/MICROPEN NEEDLE/32G X 5/32"/SHARPS CONTA	P	RX/OTC	ULTRA FLO INSULIN PEN NEEDLE 31GX5MM	P	RX/OTC
ULTIGUARD SAFEPACK/MINI PEN NEEDLE/31G X 3/16"/SHARPS CONTAI	P	RX/OTC	ULTRA FLO INSULIN PEN NEEDLE 32GX4MM	P	RX/OTC
ULTIGUARD SAFEPACK/MINI PEN NEEDLE/32G X 1/4"/SHARPS CONTAIN	P		ULTRA FLO INSULIN PEN NEELE 31GX8MM	P	RX/OTC
ULTIGUARD SAFEPACK/SHORTPEN NEEDLE/31G X 5/16"/SHARPS CONTA	P	RX/OTC	ULTRA FLO INSULIN SYRINGE 0.3ML/29G X 1/2"	P	RX/OTC
ULTIGUARD SAFEPACK/SHORTPEN NEEDLE/31G X 8MM/SHARPS CONTAIN	P	RX/OTC	ULTRA FLO INSULIN SYRINGE 0.3ML/30GX1/2"	P	
ULTIGUARD SAFEPACK/SYRINGE/NEEDLE/31G X 5/16"/SHARPS CONTAIN	P	RX/OTC	ULTRA FLO INSULIN SYRINGE 0.3ML/31GX5/16"	P	RX/OTC
ULTILET PEN NEEDLE 29GX12.7MM	P		ULTRA FLO INSULIN SYRINGE 0.5ML/29GX1/2"	P	RX/OTC
ULTILET PEN NEEDLE 31GX5MM	P	RX/OTC	ULTRA FLO INSULIN SYRINGE 0.5ML/30GX1/2"	P	RX/OTC
ULTILET PEN NEEDLE 31GX8MM	P	RX/OTC	ULTRA FLO INSULIN SYRINGE 0.5ML/30GX5/16"	P	RX/OTC
			ULTRA FLO INSULIN SYRINGE 0.5ML/31GX5/16"	P	RX/OTC
			ULTRA FLO INSULIN SYRINGE 1/2 UNIT/0.3ML/30GX1/2"	P	
			ULTRA FLO INSULIN SYRINGE 1/2 UNIT/0.3ML/31GX5/16"	P	RX/OTC
			ULTRA FLO INSULIN SYRINGE 1M/29GX1/2"	P	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ULTRA FLO INSULIN SYRINGE 1ML/30GX1/2"	P	RX/OTC	ULTRA-THIN II INSULIN SYRINGE/U-100/0.5ML/29GX1/2"	P	RX/OTC
ULTRA FLO INSULIN SYRINGE 1ML/31GX5/16"	P	RX/OTC	ULTRA-THIN II INSULIN SYRINGE/U-100/1ML/29GX1/2"	P	RX/OTC
ULTRA THIN PEN NEEDLES 32G X 4MM	P	RX/OTC	ULTRA-THIN II MINI PEN NEEDLES/31GX3/16"	P	RX/OTC
ULTRACARE INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	P	RX/OTC	ULTRA-THIN II PEN NEEDLES 29GX1/2"	P	
ULTRACARE INSULIN SYRINGE/U-100/0.5ML/30G X 1/2"	P	RX/OTC	ULTRA-THIN II PEN NEEDLES/SHORT/31GX5/16"	P	RX/OTC
ULTRACARE INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	P	RX/OTC	UNIFINE PEN NEEDLE/32G X4MM	P	RX/OTC
ULTRACARE INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	P	RX/OTC	UNIFINE PENTIPS 29GX12MM	P	RX/OTC
ULTRACARE INSULIN SYRINGE/U-100/1ML/30G X 1/2"	P	RX/OTC	UNIFINE PENTIPS 31G X 3/16"	P	RX/OTC
ULTRACARE INSULIN SYRINGE/U-100/1ML/31G X 5/16"	P	RX/OTC	UNIFINE PENTIPS 31G X 3/16"	P	RX/OTC
ULTRACARE PEN NEEDLES/31G X 3/16"	P	RX/OTC	UNIFINE PENTIPS 31GX5MM	P	RX/OTC
ULTRACARE PEN NEEDLES/31G X 5/16"	P	RX/OTC	UNIFINE PENTIPS 31GX6MM	P	RX/OTC
ULTRACARE PEN NEEDLES/32G X 1/14"	P		UNIFINE PENTIPS 31GX8MM	P	RX/OTC
ULTRACARE PEN NEEDLES/32G X 5/32"	P	RX/OTC	UNIFINE PENTIPS 31GX8MM	P	RX/OTC
ULTRA-THIN II INSULIN SYRINGE SHORT/U-100/0.3ML/31GX5/16"	P	RX/OTC	UNIFINE PENTIPS 32GX4MM	P	RX/OTC
ULTRA-THIN II INSULIN SYRINGE SHORT/U-100/0.5ML/30GX5/16"	P	RX/OTC	UNIFINE PENTIPS 32GX4MM	P	RX/OTC
ULTRA-THIN II INSULIN SYRINGE SHORT/U-100/0.5ML/31GX5/16"	P	RX/OTC	UNIFINE PENTIPS 32GX6MM	P	
ULTRA-THIN II INSULIN SYRINGE SHORT/U-100/1ML/31GX5/16"	P	RX/OTC	UNIFINE PENTIPS 32GX6MM	P	
			UNIFINE PENTIPS 33GX4MM	P	
			UNIFINE PENTIPS PLUS 29GX12MM	P	RX/OTC
			UNIFINE PENTIPS PLUS 31GX5MM	P	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
UNIFINE PENTIPS PLUS 31GX5MM	P	RX/OTC	UNIFINE ULTRA PEN NEEDLE/31GX6MM	P	RX/OTC
UNIFINE PENTIPS PLUS 31GX6MM	P	RX/OTC	UNIFINE ULTRA PEN NEEDLE/31GX8MM	P	RX/OTC
UNIFINE PENTIPS PLUS 31GX8MM	P	RX/OTC	UNIFINE ULTRA PEN NEEDLE/32GX4MM	P	RX/OTC
UNIFINE PENTIPS PLUS 31GX8MM	P	RX/OTC	VALUE HEALTH INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	P	RX/OTC
UNIFINE PENTIPS PLUS 32GX4MM	P	RX/OTC	VALUE HEALTH INSULIN SYRINGE/U-100/1ML/29G X 1/2"	P	RX/OTC
UNIFINE PENTIPS PLUS 32GX4MM	P	RX/OTC	VALUMARK PEN NEEDLES 31GX 8MM	P	RX/OTC
UNIFINE PENTIPS PLUS 33GX4MM	P		VANISHPOINT INSULIN SYRINGE/0.5ML/30G X 1/2"	P	RX/OTC
UNIFINE PENTIPS PLUS/30GX 3/16"	P	RX/OTC	VANISHPOINT INSULIN SYRINGE/0.5ML/30G X 5/16"	P	RX/OTC
UNIFINE PENTIPS/30G X 3/16"	P	RX/OTC	VANISHPOINT INSULIN SYRINGE/1ML/29G X 1/2"	P	RX/OTC
UNIFINE PROTECT SAFETY PEN NEEDLE 30G X 5MM	NP	RX/OTC	VERIFINE INSULIN PEN NEEDLE 31G X 5MM	P	RX/OTC
UNIFINE PROTECT SAFETY PEN NEEDLE 30G X 8MM	NP		VERIFINE INSULIN PEN NEEDLE 31G X 8MM	P	RX/OTC
UNIFINE PROTECT SAFETY PEN NEEDLE 32G X 4MM	NP	RX/OTC	VERIFINE INSULIN PEN NEEDLE 32G X 4MM	P	RX/OTC
UNIFINE SAFECONTROL PEN NEEDLE 31GX5MM	NP	RX/OTC	VERIFINE INSULIN PEN NEEDLE 32G X 6MM	P	
UNIFINE SAFECONTROL PEN NEEDLE 31GX6MM	NP	RX/OTC	VERIFINE INSULIN SYRINGE/0.3ML/31G X 8MM	P	RX/OTC
UNIFINE SAFECONTROL PEN NEEDLE 31GX8MM	NP	RX/OTC	VERIFINE INSULIN SYRINGE/0.5ML/29G X 12MM	P	RX/OTC
UNIFINE SAFECONTROL PEN NEEDLE 32GX4MM	P	RX/OTC	VERIFINE INSULIN SYRINGE/0.5ML/31G X 8MM	P	RX/OTC
UNIFINE SAFECONTROL PEN NEEDLE/30G X 3/16"	P	RX/OTC	VERIFINE INSULIN SYRINGE/1ML/29G X 12MM	P	RX/OTC
UNIFINE SAFECONTROL PEN NEEDLE/30G X 5/16"	P				
UNIFINE ULTRA PEN NEEDLE/31GX5MM	P	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
VERIFINE INSULIN SYRINGE/1ML/31G X 8MM	P	RX/OTC	ZEV RX INSULIN SYRINGE/0.5ML/30G X 1/2"	P	RX/OTC
VERIFINE INSULIN SYRINGE0.3ML/31G X 8MM	P	RX/OTC	ZEV RX INSULIN SYRINGE/0.5ML/30G X 5/16"	P	RX/OTC
VERIFINE INSULIN SYRINGE0.5ML/29G X 12MM	P	RX/OTC	ZEV RX INSULIN SYRINGE/1ML/30G X 1/2"	P	RX/OTC
VERIFINE INSULIN SYRINGE0.5ML/31G X 8MM	P	RX/OTC	ZEV RX PEN NEEDLES 31G X 5MM	P	RX/OTC
VERIFINE INSULIN SYRINGE1ML/29G X 12MM	P	RX/OTC	ZEV RX PEN NEEDLES 31G X 8MM	P	RX/OTC
VERIFINE INSULIN SYRINGE1ML/31G X 8MM	P	RX/OTC	ZEV RX PEN NEEDLES 32G X 4MM	P	RX/OTC
VERIFINE PLUS INSULIN PEN NEEDLE 31G X 5MM	P	RX/OTC	Respiratory Therapy Supplies		
VERIFINE PLUS INSULIN PEN NEEDLE 31G X 8MM	P	RX/OTC	ACE AEROSOL CLOUD ENHANCER MISC	P	RX/OTC
VERIFINE PLUS INSULIN PEN NEEDLES 32G X 4MM	P	RX/OTC	ADULT MASK LARGE MISC	P	RX/OTC
VERIFINE PLUS PEN NEEDLE/32G X 4MM	NP	RX/OTC	ADULT MASK DEVI	P	RX/OTC
VIDA MIA UNIFINE PENTIPS32GX4MM	P	RX/OTC	AEROBIKA DEVI	P	RX/OTC
VIDA MIA UNIPFINE PENTIPSSHORT 31GX8MM	P	RX/OTC	AEROCHAMBER MINI AEROSOLCHAMBER DEVI	P	RX/OTC
VP INSULIN SYRINGE/U-100/0.3ML/29G X 1/2"	P	RX/OTC	AEROCHAMBER MV MISC	P	RX/OTC
WEGMANS UNIFINE PENTIPS PLUS 32GX4MM	P	RX/OTC	AEROCHAMBER PLUS FLOW VU MISC	NP	RX/OTC
WEGMANS UNIFINE PENTIPS PLUS/MINI/31GX5MM	P	RX/OTC	AEROCHAMBER PLUS FLOW VUMOUTHPIECE DEVI	NP	RX/OTC
WEGMANS UNIFINE PENTIPS PLUS/SHORT/31GX8MM	P	RX/OTC	AEROCHAMBER PLUS FLOW-VU/INTERMEDIATE MASK DEVI	NP	RX/OTC
			AEROCHAMBER PLUS FLOW-VU/LARGE MASK DEVI	NP	RX/OTC
			AEROCHAMBER PLUS FLOW-VU/LARGE MASK MISC	NP	RX/OTC
			AEROCHAMBER PLUS FLOW-VU/MASK MISC	NP	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
AEROCHAMBER PLUS FLOW-VU/MEDIUM MASK DEVI	NP	RX/OTC	ALL FLOW 5000 PFT FILTER DEVI	P	RX/OTC
AEROCHAMBER PLUS FLOW-VU/MEDIUM MASK MISC	NP	RX/OTC	ALL FLOW 6000 PFT FILTER DEVI	P	RX/OTC
AEROCHAMBER PLUS FLOW-VU/SMALL MASK DEVI	NP	RX/OTC	ALL FLOW 7000 PFT FILTER DEVI	P	RX/OTC
AEROCHAMBER PLUS FLOW-VU/SMALL MASK MISC	NP	RX/OTC	BREATHERITE VALVED MDI CHAMBER/COLLAPSIBLE DEVI	P	RX/OTC
AEROCHAMBER PLUS FLOW-VU MISC	NP	RX/OTC	BREATHERITE VALVED MDI CHAMBER/RIGID DEVI	P	RX/OTC
AEROCHAMBER Z-STAT PLUS VALVED HOLDING CHAMBER W/FLOW VU MISC	P	RX/OTC	CLEVER CHOICE ANTI-STATICVALVED HOLDING CHAMBER/ADULT LARGE DEVI	P	RX/OTC
AEROCHAMBER Z-STAT PLUS/FLOWSIGNAL MISC	P	RX/OTC	CLEVER CHOICE ANTI-STATICVALVED HOLDING CHAMBER/MEDIUM/3 YEA DEVI	P	RX/OTC
AEROCHAMBER Z-STAT PLUS/LARGE MASK MISC	P	RX/OTC	CLEVER CHOICE ANTI-STATICVALVED HOLDING CHAMBER/MEDIUM DEVI	P	RX/OTC
AEROCHAMBER Z-STAT PLUS/MEDIUM MASK MISC	P	RX/OTC	CLEVER CHOICE ANTI-STATICVALVED HOLDING CHAMBER/SMALL INFANT DEVI	P	RX/OTC
AEROCHAMBER Z-STAT PLUS/SMALL MASK MISC	P	RX/OTC	CLEVER CHOICE ANTI-STATICVALVED HOLDING CHAMBER/SMALL DEVI	P	RX/OTC
AEROCHAMBER/FLOWSIGNAL MISC	P	RX/OTC	CO MONITOR DEVI	P	RX/OTC
AEROVENT PLUS HOLDING CHAMBER/COLLAPSIBLE DEVI	P	RX/OTC	COMPACT SPACE CHAMBER/ANTI-STATIC/LARGE MASK DEVI	NP	RX/OTC
ALL FLOW 1000 PFT FILTER DEVI	P	RX/OTC	COMPACT SPACE CHAMBER/ANTI-STATIC/MEDIUM MASK DEVI	NP	RX/OTC
ALL FLOW 2000 PFT FILTER DEVI	P	RX/OTC			
ALL FLOW 3000 PFT FILTER DEVI	P	RX/OTC			
ALL FLOW 4000 PFT FILTER DEVI	P	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
COMPACT SPACE CHAMBER/ANTI-STATIC/SMALL MASK DEVI	NP	RX/OTC	EQ SPACE CHAMBER ANTI-STATIC DEVI	P	RX/OTC
COMPACT SPACE CHAMBER/ANTI-STATIC DEVI	NP	RX/OTC	FLEXICHAMBER ADULT MASK/SMALL	NP	RX/OTC
EASIVENT/MASK-LARGE MISC	P	RX/OTC	FLEXICHAMBER CHILD MASK/LARGE	NP	RX/OTC
EASIVENT/MASK-MEDIUM MISC	P	RX/OTC	FLEXICHAMBER CHILD MASK/SMALL	NP	RX/OTC
EASIVENT/MASK-SMALL MISC	P	RX/OTC	FLEXICHAMBER DEVI	NP	RX/OTC
EASIVENT MISC	P	RX/OTC	IN-CHECK DIAL INSPIRATORYFLOW TRAINER DEVI	P	RX/OTC
EASY FLOW BLACK/BLUE DEVI	P	RX/OTC	IN-CHECK INSPIRATORY FLOWMETER/NASAL WITH MASK DEVI	P	RX/OTC
EASY FLOW BLACK/ORANGE DEVI	P	RX/OTC	IN-CHECK INSPIRATORY FLOWMETER/ORAL DEVI	P	RX/OTC
EASY FLOW BLACK/RED DEVI	P	RX/OTC	MICROCHAMBER DEVI	P	RX/OTC
EASY FLOW BLACK/WHITE DEVI	P	RX/OTC	MICROCHAMBER MISC	P	RX/OTC
EASY FLOW BLACK/YELLOW DEVI	P	RX/OTC	MICROSPACER MISC	P	RX/OTC
EASY FLOW WHITE/BLUE DEVI	P	RX/OTC	NEBULIZER CUP/TUBING DEVI	P	RX/OTC
EASY FLOW WHITE/GREEN DEVI	P	RX/OTC	OMBRA TABLE TOP COMPRESSOR DEVI	P	RX/OTC
EASY FLOW WHITE/PINK DEVI	P	RX/OTC	ONE FLOW FVC MONITORING SPIROMETER DEVI	P	RX/OTC
EASY FLOW WHITE/WHITE DEVI	P	RX/OTC	OPTICHAMBER DIAMOND/LARGEFACE MASK DEVI	P	RX/OTC
EASY FLOW WHITE/YELLOW DEVI	P	RX/OTC	OPTICHAMBER DIAMOND/MEDIUM FACE MASK MISC	P	RX/OTC
EQ SPACE CHAMBER ANTI-STATIC/LARGE MASK DEVI	P	RX/OTC	OPTICHAMBER DIAMOND/SMALLFACE MASK MISC	P	RX/OTC
EQ SPACE CHAMBER ANTI-STATIC/MEDIUM MASK DEVI	P	RX/OTC	OPTICHAMBER DIAMOND MISC	P	RX/OTC
EQ SPACE CHAMBER ANTI-STATIC/SMALL MASK DEVI	P	RX/OTC	PARI MANUAL INTERRUPTER DEVI	P	RX/OTC
			PARI TREK S COMBO PACK DEVI	P	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
POCKET CHAMBER DEVI	P	RX/OTC	VERSAPAP DEVI	P	RX/OTC
PRO COMFORT INHALER SPACER CHAMBER ADULT MISC	P	RX/OTC	VORTEX HOLDING CHAMBER/MASK/CHILD S/FROG DEVI	P	RX/OTC
PRO COMFORT INHALER SPACER CHAMBER CHILD MISC	P	RX/OTC	VORTEX HOLDING CHAMBER/MASK/TODDLER/LADY BUG DEVI	P	RX/OTC
PRO COMFORT INHALER SPACER CHAMBER INFANT DEVI	P	RX/OTC	VORTEX VALVED HOLDING CHAMBER DEVI	P	RX/OTC
PROCARE SPACER CHAMBER W/ADULT MASK DEVI	P	RX/OTC	MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches		
PROCARE SPACER CHAMBER W/CHILD MASK DEVI	P	RX/OTC	Calcitonin Gene-Related Peptide (CGRP) Receptor Antag		
PROCHAMBER VALVED HOLDINGCHAMBER DEVI	P	RX/OTC	AIMOVIG	P	SP
PURE COMFORT 3-BALL BREATH EXERCISER DEVI	P	RX/OTC	AJOVY SOAJ	P	SP
PURE COMFORT INHALER SPACER CHAMBER ADULT DEVI	P	RX/OTC	AJOVY SOSY	P	SP
QUAKE DEVI	P	RX/OTC	EMGALITY SOAJ	P	SP
REUSABLE COMFORTSEAL MASK/LARGE/AEROECLIPSE MISC	NP	RX/OTC	EMGALITY SOSY	P	SP
REUSABLE COMFORTSEAL MASK/MEDIUM/AEROECLIPSE MISC	NP	RX/OTC	NURTEC	P	PA
REUSABLE COMFORTSEAL MASK/SMALL/AEROECLIPSE MISC	NP	RX/OTC	QULIPTA	NP	
RITEFLO DEVI	P	RX/OTC	UBRELVY	NP	
SPIRO PD DEVI	P	RX/OTC	VYEPTI	NP	SP
THRESHOLD PEP DEVI	P	RX/OTC	ZAVZPRET	NP	
VERSAPAP/UNIVERSAL TUBING DEVI	P	RX/OTC	Migraine Combinations		
			CAFERGOT TABS (ergotamine w/ caffeine)	NP	
			ergotamine w/ caffeine TABS	NP	
			sumatriptan-naproxen sodium	NP	
			Migraine Products		
			dihydroergotamine mesylate SOLN NA 4 MG/ML	NP	
			MIGRANAL SOLN NA (dihydroergotamine mesylate)	NP	
			Migraine Products - NSAIDs		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>diclofenac potassium (migraine)</i>	NP		<i>sumatriptan succinate SOAJ</i>	NP	QL(4.5 ml per 40 day(s) retail; 4 ml per 40 days mail)
ELYXYB	NP		<i>sumatriptan succinate SOCT</i>	NP	QL(4.5 ml per 40 day(s) retail; 4 ml per 40 days mail)
Serotonin Agonists			<i>sumatriptan succinate SOLN 6 MG/0.5ML</i>	P	QL(4.5 ml per 40 day(s) retail; 4 ml per 40 days mail)
<i>almotriptan malate</i>	NP		<i>sumatriptan succinate TABS</i>	P	
<i>eletriptan hydrobromide</i>	NP		TOSYMRA	NP	QL(9 ea per 40 day(s) retail; 9 ea per 40 days mail)
FROVA (<i>frovatriptan succinate</i>)	NP		ZEMBRACE SYMTOUCH SOAJ	NP	QL(4.5 ml per 40 day(s) retail; 4 ml per 40 days mail)
<i>frovatriptan succinate</i>	NP		<i>zolmitriptan SOLN</i>	NP	QL(9 ea per 40 day(s) retail; 9 ea per 40 days mail)
IMITREX 5 MG/ACT, 20 MG/ACT (<i>sumatriptan</i>)	NP	QL(9 ea per 40 day(s) retail; 9 ea per 40 days mail)	<i>zolmitriptan TABS</i>	P	
IMITREX STATDOSE REFILL SOCT (<i>sumatriptan succinate</i>)	NP	QL(4.5 ml per 40 day(s) retail; 4 ml per 40 days mail)	<i>zolmitriptan TBDP</i>	P	
IMITREX STATDOSE SYSTEM SOAJ (<i>sumatriptan succinate</i>)	NP	QL(4.5 ml per 40 day(s) retail; 4 ml per 40 days mail)	ZOMIG SOLN (<i>zolmitriptan</i>)	NP	QL(9 ea per 40 day(s) retail; 9 ea per 40 days mail)
IMITREX TABS (<i>sumatriptan succinate</i>)	NP		ZOMIG TABS 2.5 MG, 5 MG (<i>zolmitriptan</i>)	NP	
MAXALT-MLT TBDP 10 MG (<i>rizatriptan benzoate</i>)	NP		MINERALS & ELECTROLYTES		
MAXALT TABS 10 MG (<i>rizatriptan benzoate</i>)	NP		Calcium		
<i>naratriptan hcl</i>	P		CALCIUM 600+D HIGH POTENCY TABS	P	
RELPAX (<i>eletriptan hydrobromide</i>)	NP		CALCIUM ACETATE	NP	
REYVOW	NP		CALCIUM CARBONATE CHEW 500 MG	P	
<i>rizatriptan benzoate TABS</i>	P		<i>calcium carbonate-cholecalciferol TABS</i>	P	
<i>rizatriptan benzoate TBDP</i>	P				
<i>sumatriptan</i>	P	QL(9 ea per 40 day(s) retail; 9 ea per 40 days mail)			
<i>sumatriptan 20 MG/ACT</i>	NP	QL(9 ea per 40 day(s) retail; 9 ea per 40 days mail)			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>calcium carbonate TABS 500 MG, 600 MG, 1250 MG, 1500 MG</i>	P		BIOLYTE SOLN	P	
<i>calcium carbonate-vitamin d TABS 125 UNIT-250 MG, 125 UNIT-600 MG, 250 MG-125 UNIT, 600 MG-200 UNIT</i>	P		CERALYTE 70 SOLN	P	
CALCIUM CITRATE + D3 TABS	P		CERASPORT EX1 SOLN	P	
CALCIUM CITRATE+ D TABS	P		CERASPORT SOLN	P	
<i>calcium citrate TABS 200 MG</i>	P		ENFAMIL ENFALYTE SOLN	P	
CALCIUM CITRATE TABS 250 MG	P		HYDRALYTE FREEZER POPS SOLN	P	
<i>calcium citrate-vitamin d TABS 200 UNIT-315 MG, 250 UNIT-315 MG, 5 MCG-315 MG, 6.25 MCG-315 MG</i>	P		HYDRALYTE SOLN	P	
CALCIUM GLUCONATE CAPS	P		KINDERLYTE PREMAX SOLN	P	
CALCIUM/C/D	P		KINDERLYTE SOLN	P	
CALCIUM CHEW 100 UNIT-500 MG	P		<i>oral electrolytes SOLN</i>	P	
<i>calcium-magnesium-zinc</i>	P		PEDIALYTE IMMUNE SUPPORT SOLN	P	
CALTRATE 600+D3 SOFT CHEWS CHEW	NP		TRUELYTE SOLN	P	
CITRACAL + D3 MAXIMUM TABS (<i>calcium citrate-vitamin d</i>)	P		Fluoride		
CORAL CALCIUM PLUS	P		<i>sodium fluoride CHEW 0.25 MG, 0.5 MG, 1 MG</i>	NP	
CORAL CALCIUM CAPS 100 UNIT-50 MG-185 MG	P		<i>sodium fluoride CHEW 0.25 MG, 0.5 MG, 1 MG</i>	P	
<i>oyster shell</i>	P		<i>sodium fluoride SOLN 0.125 MG/DROP, 0.5 MG/ML</i>	P	RX/OTC
<i>oyster shell</i>	NP		<i>sodium fluoride SOLN 0.125 MG/DROP, 0.5 MG/ML</i>	P	
OYSTER SHELL CALCIUM/D TABS	P		<i>sodium fluoride TABS 0.5 MG</i>	P	
RA CALCIUM/BORON	P		Magnesium		
RA CALCIUM TABS	P		<i>magnesium oxide (mg supplement) TABS 400 MG</i>	NP	
Electrolyte Mixtures			<i>magnesium oxide (mg supplement) TABS 400 MG</i>	P	
			<i>magnesium TABS 400 MG, 400 MG</i>	P	
			SLOW-MAG	P	
			Mineral Combinations		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ADVANCED CALCIUM/VITAMIND/MAGNESIUM TABS	P		K-PHOS NEUTRAL (<i>pot phosphate monobasic w/ sod phosphate dibasic & monobasic</i>)	P	
BONE DENSITY BUILDER TABS	P		K-PHOS NEUTRAL (<i>pot phosphate monobasic w/ sod phosphate dibasic & monobasic</i>)	P	
CAL MAG ZINC +D3 TABS	P		<i>pot phosphate monobasic w/ sod phosphate dibasic & monobasic</i>	P	
CALCIUM 600+D3 PLUS MINERALS TABS	P		<i>potassium & sodium phosphates PACK</i>	P	
CALCIUM/MAGNESIUM/ZINC/D3 TABS	P		Potassium		
CALCIUM/MAGNESIUM/ZINC/VITAMIN D3 TABS	P		<i>potassium bicarbonate TBEF</i>	P	
CALCIUM/MAGNESIUM/ZINC TABS 200 UNIT-333 MG-133 MG-5 MG	P		<i>potassium chloride microencapsulated crystals er</i>	P	
CAL-MAG-ZINC-D3 TABS	P		<i>potassium chloride CPCR</i>	P	
CAL-MAG-ZINC-D TABS	P		<i>potassium chloride PACK OR 20 MEQ</i>	P	
CITRACAL MAXIMUM PLUS TABS	P		<i>potassium chloride SOLN OR 10 %, 20 %</i>	P	
CITRACAL PLUS TABS	P		<i>potassium chloride TBCR 8 MEQ, 10 MEQ</i>	P	
CVS CALCIUM CITRATE+D3 W/MAGNESIUM TABS	P		Sodium		
CVS CALCIUM CITRATE+D3 TABS	P		<i>sodium chloride SOLN IJ 0.9 %</i>	P	
FEM-CAL CITRATE TABS	P		<i>sodium chloride TABS</i>	P	
MULTI MEGA MINERALS TABS	P		MISCELLANEOUS THERAPEUTIC CLASSES		
MULTI-MINERALS TABS	P		Chelating Agents		
<i>multiple minerals w/ vitamins TABS</i>	P		<i>penicillamine CAPS</i>	P	
MULTISOURCE CALCIUM MAGNESIUM & D FORMULA TABS	P		<i>penicillamine TABS</i>	P	
PROSTEON TABS	P		Enzymes		
THERACAL D2000 TABS	P		<i>papaya CHEW</i>	P	
THERACAL D4000 TABS	P		Immunomodulators		
THERACAL RAPID REPLETION TABS	P		<i>lenalidomide</i>	P	SP
Phosphate					

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>lenalidomide 5 MG, 10 MG, 15 MG, 25 MG</i>	NP	SP	<i>benzocaine (dental) SOLN 20 %</i>	P	
REVLIMID	NP	SP; ST	<i>benzocaine-menthol (mouth-throat) LOZG 15 MG-3.6 MG</i>	P	
Immunosuppressive Agents			HURRICAIN SNAP-N-GO SWAB	P	
<i>azathioprine TABS 50 MG</i>	P		MUCINEX INSTASOOTHE SORETHROAT + PAIN RELIEF LIQD	P	
<i>cyclosporine modified (for microemulsion) CAPS 25 MG, 100 MG</i>	P		ORAJEL 3X TOOTHACHE & GUM GEL	P	
<i>cyclosporine modified (for microemulsion) SOLN</i>	P		Anti-infectives - Throat		
<i>cyclosporine CAPS</i>	P		<i>clotrimazole</i>	NP	
<i>mycophenolate mofetil CAPS</i>	P		NYSTATIN (<i>nystatin (mouth-throat)</i>)	P	
<i>mycophenolate mofetil TABS</i>	P		<i>nystatin (mouth-throat)</i>	P	
SANDIMMUNE SOLN OR	P		ORAVIG	NP	
<i>sirolimus SOLN</i>	P		Antiseptics - Mouth/Throat		
<i>sirolimus TABS</i>	P		<i>chlorhexidine gluconate (mouth-throat)</i>	P	
<i>tacrolimus CAPS</i>	P		MUCINEX INSTASOOTHE SORETHROAT + PAIN RELIEF LOZG	NP	
Lymphatic Agents			MUCINEX INSTASOOTHE SORETHROAT + PAIN RELIEF LOZG	P	
SYLVANT	NP	SP	MUCINEX INSTASOOTHE SORETHROAT + SOOTHING COMFORT LOZG	P	
Potassium Removing Agents			MUCINEX INSTASOOTHE SORETHROAT + SOOTHING COMFORT LOZG	NP	
LOKELMA	P		<i>phenol (antiseptic) LIQD 1.4 %</i>	P	
<i>sodium polystyrene sulfonate POWD</i>	P				
<i>sodium polystyrene sulfonate SUSP OR 15 GM/60ML</i>	P				
VELTASSA	NP				
Prostaglandins					
<i>alprostadil</i>	P				
PROSTIN VR PEDIATRIC	P				
MOUTH/THROAT/DENTAL AGENTS					
Anesthetics Topical Oral					
<i>benzocaine (dental) GEL 20 %</i>	P				
<i>benzocaine (dental) LIQD 20 %</i>	P				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Dental Products			PRONUTRIENTS SUPER B-COMPLEX+ANTIOXIDANTS	P	
PREVIDENT RINSE SOLN	P		RA B-COMPLEX/VITAMIN C TR TBCR	P	
<i>sodium fluoride (dental) CREA</i>	P		B-Complex w/ Folic Acid		
<i>sodium fluoride (dental) GEL</i>	P		ACTRIVIT	P	RX/OTC
<i>sodium fluoride (dental) SOLN 0.2 %</i>	P		BALANCED B-50 TBCR	P	
Lozenges			<i>b-complex w/ c & folic acid CAPS</i>	P	RX/OTC
MUCINEX INSTASOOTHE SORETHROAT + COUGH RELIEF	P		<i>b-complex w/ c & folic acid TABS 60 MG-300 MCG-1 MG-1.5 MG-20 MG-10 MG-10 MG-1.7 MG-6 MCG</i>	NP	RX/OTC
MUCINEX INSTASOOTHE SORETHROAT + COUGH RELIEF	NP		<i>b-complex w/ c & folic acid TABS</i>	P	
Steroids - Mouth/Throat/Dental			<i>b-complex w/ c & folic acid TABS</i>	P	
<i>triamcinolone acetonide (mouth)</i>	P		<i>b-complex w/ folic acid CAPS</i>	P	
Throat Products - Misc.			<i>b-complex w/ folic acid TABS</i>	P	
<i>cevimeline hcl</i>	P		<i>b-complex w/biotin & folic acid TABS</i>	P	
<i>pilocarpine hcl (oral) 5 MG</i>	P		<i>b-complex w/biotin & folic acid TBCR</i>	P	
MULTIVITAMINS			NUTRIVIT	P	RX/OTC
B-Complex Vitamins			SM B-COMPLEX/VITAMIN C TABS	P	RX/OTC
<i>b-complex vitamins CAPS</i>	P		B-Complex w/ Iron		
<i>b-complex vitamins TABS</i>	NP		APETIGEN-PLUS SOLN	P	
<i>b-complex vitamins TABS</i>	P		<i>b complex w/ iron TABS</i>	P	
<i>b-complex vitamins TBCR</i>	P		SUPER B-COMPLEX/IRON/VITAMIN C TABS	P	
CVS BALANCED B100 TBCR	P		B-Complex w/ Minerals		
B-Complex w/ C			<i>b-complex w/ minerals LIQD</i>	P	
<i>b complex w/ c CAPS</i>	P				
<i>b complex w/ c TABS</i>	P				
<i>b-complex w/ c & calcium</i>	P				
<i>b-complex w/ c & e + zn</i>	P				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Bioflavonoid Products			<i>multiple vitamins w/ iron TABS</i>	P	
ACTITROM CAPS	P		TAB-A-VITE MULTIVITAMIN/IRON AND BETA-CAROTENE TABS	P	
ACTITROM-D CAPS	P		Multiple Vitamins w/ Minerals		
ADRENAL C FORMULA TABS	P	RX/OTC	ACTIVESSENTIALS FOR WOMEN MISC	P	
ADVANCED C PLUS TABS	P	RX/OTC	ACTIVESSENTIALS/ONC OPLEX& D3 MISC	P	
BIO C 1:1 CAPS	P		ACTIVNUTRIENTS PERFORMANCE CAPS	P	RX/OTC
<i>bioflavonoid products TABS</i>	P	RX/OTC	ACTIVNUTRIENTS W/O IRON CAPS	P	RX/OTC
<i>bioflavonoid products TBCR</i>	P		ACTIVNUTRIENTS CAPS	P	RX/OTC
C 1000/BIOFLAVONOIDS/R OSEHIPS CAPS	P		ADEK GUMMIES PLUS ZN CHEW	P	
DAFLONEX-XL CAPS	P		ADULT ONE DAILY GUMMIES CHEW	P	
DAFLONEX-XL TBCR	P		AIRBORNE KIDS CHEW	P	
EASY-C IMMUNE HEALTH CAPS	P		AIRBORNE+GOOD REST CHEW	P	
FRUIT C 200 CHEW	P		AIRBORNE+NATURAL ENERGY LIQD	P	RX/OTC
GRAPE SEED CAPS	P		AIRBORNE+PROBIOTIC CHEW	P	
QUERCETIN COMPLEX CAPS	P		AIRBORNE CHEW	P	
THORNE VITAMIN C/FLAVONOIDS CAPS	P		ALIVE EVERYDAY IMMUNE HEALTH CAPS	P	RX/OTC
TROMBONEX CAPS	P		ALIVE HAIR, SKIN & NAILS CHEW	P	
TROMBONEX-D CAPS	P		ALIVE MENS 50+ MULTIVITAMAMIN GUMMY CHEW	P	
VASOFLEX FORTE CAPS	P		ALIVE MENS GUMMY MULTIVITAMIN CHEW	P	
VASOFLEX CAPS	P		ALIVE MULTI-VITAMIN CHEW	P	
VITAMIN C CHEW	P		ALIVE MULTI-VITAMIN LIQD	P	RX/OTC
Iron w/ Vitamins					
<i>iron w/ vitamins TABS</i>	NP	RX/OTC			
Multiple Vitamins w/ Calcium					
<i>multiple vitamins w/ calcium TABS</i>	P				
SM ONE DAILY ESSENTIAL TABS	P				
Multiple Vitamins w/ Iron					

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ALIVE WOMENS 50+ GUMMY MULTIVITAMIN CHEW	P		CENTRUM ADULT MULTIGUMMIES CHEW	P	
ALIVE WOMENS 50+ CHEW	P		CENTRUM ADULTS 50+ MULTIGUMMIES CHEW	P	
ALIVE WOMENS GUMMY MULTIVITAMIN CHEW	P		CENTRUM FLAVOR BURST ADULT CHEW	P	
APETIBEX CAPS	P	RX/OTC	CENTRUM FLAVOR BURST CHEW	P	
APPE-CURB CAPS	P	RX/OTC	CENTRUM FRESH/FRUITY ADULTS 50+ CHEW	P	
BARIATRIC FUSION CHEW	P		CENTRUM FRESH/FRUITY ADULTS CHEW	P	
BARIATRIC MULTIVITAMINS/IRON CAPS	P	RX/OTC	CENTRUM MULTIGUMMIES MULTI +OMEGA 3 CHEW	P	
BIO-35 GLUTEN-FREE CAPS	P	RX/OTC	CENTRUM SILVER CHEW	P	
BIO-35 IRON FREE CAPS	P	RX/OTC	CENTRUM VITAMINTS CHEW	P	
BIOCAL CAPS	P	RX/OTC	CHOICEFUL MULTIVITAMIN CAPS	P	RX/OTC
BONEUP 3 PER DAY CAPS	P	RX/OTC	CHOICEFUL MULTIVITAMIN CHEW	P	
BONEUP CAPS	P	RX/OTC	CONCEPTIONXR MOTILITY SUPPORT FORMULA MISC	P	
BOOSTNOW IMMUNE SUPPORT CAPS	P	RX/OTC	CULTURELLE PROBIOTICS + MULTIVITAMIN CHEW	P	
BURIED TREASURE ACTIVE 55PLUS SENIOR COMPLEX LIQD	P	RX/OTC	CVS ADULT 50+ EYE HEALTH CAPS	P	RX/OTC
CELEBRATE MULTI-COMplete18 CAPS	P	RX/OTC	CVS AIRSHIELD IMMUNITY SUPPORT CHEW	P	
CELEBRATE MULTI-COMplete18 CHEW	P		CVS DIABETES HEALTH SUPPORT MISC	P	
CELEBRATE MULTI-COMplete36 CAPS	P	RX/OTC	CVS EYE HEALTH ADULT 50+ CAPS	P	RX/OTC
CELEBRATE MULTI-COMplete36 CHEW	P		CVS IMMUNE SUPPORT CAPS	P	RX/OTC
CELEBRATE MULTI-COMplete45 CAPS	P	RX/OTC			
CELEBRATE MULTI-COMplete45 CHEW	P				
CELEBRATE MULTI-COMplete60 CAPS	P	RX/OTC			
CELEBRATE MULTI-COMplete60 CHEW	P				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CVS SPECTRAVITE ADULT 50+ CHEW	P		FOLAMED DHA CAPS	P	RX/OTC
CVS SPECTRAVITE WOMEN CHEW	P		GENADEK STEP 1 CAPS	P	RX/OTC
CVS VISION HEALTH CAPS	P	RX/OTC	GENADEK STEP 2 CAPS	P	RX/OTC
DAILY DIABETES HEALTH PACK MISC	P		HAIR/SKIN/NAILS CAPS	P	RX/OTC
DAILY HEART HEALTH SUPPORT MISC	P		HEALTHY EYES SUPERVISION2 CAPS	P	RX/OTC
DAILY PAK MAXIMUM MULTIVITAMIN/ASIAN GINSENG EXTRACT MISC	P		IMMUNE ESSENTIALS DAILY CAPS	P	RX/OTC
DECUBI-VITE CAPS	P	RX/OTC	IMMUNE SUPPORT CHEW	P	
DEKAS BARIATRIC CHEW	P		KEYFOLIC TABS	NP	RX/OTC
DEKAS PLUS OCEAN CAPS	P	RX/OTC	KP MENS DAILY PACK MISC	P	
DEKAS PLUS CAPS	P	RX/OTC	KP WOMENS DAILY PACK MISC	P	
DEKAS PLUS CHEW	P		LIFE PACK MENS MISC	P	
DEXATRAN CAPS	P	RX/OTC	LIFE PACK WOMENS MISC	P	
DIABETES HEALTH PACK MISC	P		LIVITA ADULTS LIQD	P	RX/OTC
EMERGEN-C IMMUNE PLUS/VITAMIN D CHEW	P		LYSIPLEX PLUS LIQD	P	RX/OTC
EMERGEN-C VITAMIN C CHEW	P		MENATROL CAPS	P	RX/OTC
ENDUR-VM WITH IRON TBCR	P		MENS 50+ ADVANCED CAPS	P	RX/OTC
ENDUR-VM TBCR	P		MENS MULTIVITAMIN CHEW	P	
EQ MULTIVITAMINS ADULT GUMMY CHEW	P		MENS PACK MISC	P	
EQL ONE DAILY ADULT GUMMIES CHEW	P		MOOD FOOD ES CAPS	P	RX/OTC
EYE HEALTH CAPS	P	RX/OTC	MOOD FOOD CAPS	P	RX/OTC
EYE MULTIVITAMIN/LUTEIN CAPS	P	RX/OTC	MULTIA CAPS	P	RX/OTC
EYE MULTIVITAMIN CAPS	P	RX/OTC	<i>multiple vitamins w/ minerals CAPS</i>	P	RX/OTC
FOLAGENT DHA CAPS	P	RX/OTC	<i>multiple vitamins w/ minerals CHEW</i>	P	
			<i>multiple vitamins w/ minerals CHEW</i>	P	
			<i>multiple vitamins w/ minerals LIQD</i>	P	RX/OTC
			<i>multiple vitamins w/ minerals TBCR</i>	P	
			MULTI-VITE LIQD	P	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MVW COMPLETE FORMULATION CAPS	P	RX/OTC	ONE-A-DAY MENS VITACRAVES GUMMIES CHEW	P	
MVW COMPLETE FORMULATIOND3000 CAPS	P	RX/OTC	ONE-A-DAY VITACRAVES ADULT CHEW	P	
MVW COMPLETE FORMULATIOND500 CAPS	P	RX/OTC	ONE-A-DAY VITACRAVES GUMMIES/IMMUNITY SUPPORT CHEW	P	
MVW COMPLETE FORMULATIONMINIS CAPS	P	RX/OTC	ONE-A-DAY VITACRAVES SOURGUMMIES CHEW	P	
MVW HI-D ADEK GUMMIES CHEW	P		ONE-A-DAY VITACRAVES WOMENS MULTI CHEW	P	
MVW MODULATOR FORMULATION MINIS CAPS	P	RX/OTC	ONE-A-DAY VITACRAVES CHEW	P	
MVW MODULATOR FORMULATION CAPS	P	RX/OTC	ONE-A-DAY WOMENS VITACRAVES GUMMIES CHEW	P	
OCUVEL CAPS 250 MG-0.5 MG-5 MG-1 MG-40 MG-1 MG-200 UNIT	P	RX/OTC	ONE-DAILY MULTI CAPS CAPS	P	RX/OTC
OCUVITE ADULT 50+ CAPS	P	RX/OTC	OPTIFAST POST BARIATRIC CHEW	P	
OCUVITE ADULT FORMULA CAPS	P	RX/OTC	OPTIMUM AIRVITES CHEW	P	
OCUVITE LUTEIN CAPS	P	RX/OTC	OPTISOURCE POST BARIATRIC SURGERY CHEW	P	
ONE A DAY IMMUNITY DEFENSE TEENS MULTI + CHEW	P		OPURITY/BYPASS OPTIMIZED CHEW	P	
ONE A DAY MENS VITACRAVES MULTI GUMMIES CHEW	P		PREMIUM PACKETS MISC	P	
ONE A DAY MENS VITACRAVES CHEW	P		PRESCRIPTION SUPPORT CAPS	P	RX/OTC
ONE A DAY WOMENS 50+ ADVANCED CHEW	P		PRESERVISION AREDS 2 + MULTI VITAMIN CAPS	P	RX/OTC
ONE-A-DAY FOR HER VITACRAVES TEEN MULTI GUMMIES CHEW	P		PRESERVISION AREDS 2 CAPS	P	RX/OTC
ONE-A-DAY FOR HIM/VITACRAVES TEEN MULTI GUMMIES CHEW	P		PRESERVISION AREDS 2 CHEW	P	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PRESERVISION AREDS CAPS	P	RX/OTC	VISTA ADVANCED AREDS2 FORMULA CAPS	P	RX/OTC
PRESERVISION/LUTEIN CAPS	P	RX/OTC	VISTA ADVANCED DRY EYE FORMULA CAPS	P	RX/OTC
PRORENAL+D/OMEGA-3 CAPS	P	RX/OTC	VITABEX PLUS CAPS	P	RX/OTC
PROTECT CARDIO AF CAPS	P	RX/OTC	VITABEX CAPS	P	RX/OTC
PROTECT PLUS SO CAPS	P	RX/OTC	VITACHEW ADULT MULTI VITAMIN CHEW	P	
PROTEGRA CAPS	P	RX/OTC	VITAJoy MULTI GUMMIIES ADULT CHEW	P	
QC OCUHEALTH VISION SUPPORT 2 CAPS	P	RX/OTC	VITEYES CLASSIC ADVANCED CAPS	P	RX/OTC
REMEDIENT CAPS	P	RX/OTC	VITEYES CLASSIC MACULAR SUPPORT CAPS	P	RX/OTC
SKIN HAIR & NAILS ADVANCED BEAUTY CAPS	P	RX/OTC	VITEYES CLASSIC/OMEGA-3 CAPS	P	RX/OTC
SUPER ANTIOXIDANT CAPS	P	RX/OTC	VITEYES CLASSIC+OMEGA-3 CAPS	P	RX/OTC
SUPPORT-500 CAPS	P	RX/OTC	VITEYES CLASSIC CAPS	P	RX/OTC
SUPPORT LIQD	P	RX/OTC	WAL-BORN VITAMIN C CHEW	P	
SYSTANE ICAPS AREDS2 CHEW	P		WOMENS MULTI GUMMIIES CHEW	P	
THERA M PLUS TABS	P	RX/OTC	WOMENS MULTIVITAMIN + COLLAGEN GUMMIIES CHEW	P	
THERAMILL FORTE CAPS	P	RX/OTC	WOMENS PACK MISC	P	
THERANATAL LACTATION COMPLETE MISC	P		YOUR LIFE MULTI ADULT GUMMIIES CHEW	P	
THERANATAL LACTATION ONE CAPS	P	RX/OTC	YUMVS MULTI ZERO CHEW	P	
THRIVITE 19 TABS	NP	RX/OTC	YUMVS ZERO DIABETIC MULTIVITAMIN CHEW	P	
ULTRA MEGA GOLD TBCR	P		Multivitamins		
ULTRA MEGA TWO TBCR	P		AMLADEX TABS	P	RX/OTC
ULTRA MEGA TBCR	P		DAILY MULTIPLE VITAMINS TABS	P	RX/OTC
VISION HEALTH CAPS	P	RX/OTC			
VISION OPTIMIZER CAPS	P	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
DEKAS ESSENTIAL CAPS	P	RX/OTC	TRUE MULTIVITAMIN TABS	P	RX/OTC
DEKAS ESSENTIAL LIQD	P		VITAZYME TABS	P	RX/OTC
ESTROFACTORS TABS	P	RX/OTC	ZELDANA CAPS	P	RX/OTC
FOLCYTEINE TABS	P	RX/OTC	Ped Multi Vitamins w/FI & FE		
GENICIN VITA-Q TABS	P	RX/OTC	<i>ped multivitamins w/fl & iron SOLN 35 MG/ML-0.4 MG/ML-0.5 MG/ML-400 UNIT/ML-1500 UNIT/ML-0.6 MG/ML-8 MG/ML-0.25 MG/ML-10 MG/ML-5 UNIT/ML</i>	P	RX/OTC
HIGH POTENCY MULTIVITAMIN TABS	P	RX/OTC	Ped Multiple Vitamins w/ Minerals		
MOMMYS BLISS MULTIVITAMINORGANIC DROPS LIQD	P		LIVITA CHILDREN LIQD	NP	RX/OTC
MULTI VITAMIN/D-3 TABS	P	RX/OTC	<i>pediatric multiple vitamin w/ minerals & c CHEW 400 UNIT-60 MG-2 MG-45 MCG-400 MCG-6 MCG-1.7 MG-10 MCG-20 MG-3500 UNIT-10 MG-1.5 MG-15 MG-2 MG-40 MG-108 MG-20 MCG-150 MCG-30 UNIT-50 MG-1 MG-20 MCG-18 MG</i>	P	
MULTI VITAMIN TABS	P	RX/OTC	Ped MV w/ Fluoride		
<i>multiple vitamin CAPS</i>	P	RX/OTC	DAVIMET/FLUORIDE CHEW	NP	
<i>multiple vitamin TABS</i>	P	RX/OTC	MULTIVITAMIN WITH FLUORIDE CHEW	P	RX/OTC
<i>multiple vitamin TABS</i>	NP	RX/OTC	MULTIVITAMIN WITH FLUORIDE CHEW	P	RX/OTC
MULTIVITAMIN ADULT TABS	P	RX/OTC	MULTI-VIT-FLOR CHEW	P	RX/OTC
MULTIVITAMIN+ LIQD	P		<i>pediatric multivitamins w/fl CHEW</i>	P	RX/OTC
MULTIVITAMIN TABS 37.5 MG-0.1 MG-10 MCG-2 MG-20 MG-1500 MCG-1 MG-1.5 MG-28.5 MG	P	RX/OTC			
NEOMULTIVITE TABS	P	RX/OTC			
NUTRA-Z+ CAPS	P	RX/OTC			
OMNICAP TABS	P	RX/OTC			
ONE DAILY ESSENTIAL TABS	P	RX/OTC			
ONE VITE DAILY MULTIVITAMIN TABS	P	RX/OTC			
ONE-A-DAY ESSENTIAL TABS (<i>multiple vitamin</i>)	P	RX/OTC			
ONE-A-DAY MENS TABS (<i>multiple vitamin</i>)	P	RX/OTC			
QUINTABS TABS	P	RX/OTC			
THERA TABS	P	RX/OTC			
THEREMS MULTIVITAMIN TABS	P	RX/OTC			
TM-DAILY VITE TABS	P	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>pediatric multivitamins w/fl CHEW 60 MG-300 MCG-1.05 MG-13.5 MG-1.05 MG-1.2 MG-10 MCG-13.5 MG-750 MCG-4.5 MCG-0.5 MG, 60 MG-300 MCG-1.05 MG-13.5 MG-1.05 MG-1.2 MG-10 MCG-13.5 MG-750 MCG-4.5 MCG-1 MG</i>	NP	RX/OTC	PC PEDIATRIC POLY-VITAMIN DROPS SOLN OR	P	
<i>pediatric multivitamins w/fl SOLN</i>	P	RX/OTC	<i>pediatric multiple vitamins CHEW</i>	P	
<i>pediatric vitamins acd w/ fluoride SOLN</i>	P		POLY-VI-SOL SOLN OR	P	
POLY-VI-FLOR CHEW	P	RX/OTC	POLY-VITA SOLN OR	P	
QUFLORA PEDIATRIC CHEW	P	RX/OTC	POLY-VITE PEDIATRIC SOLN OR	P	
Ped MV w/ Iron			Pediatric Vitamins		
HONEY BEARS W/IRON AND ZINC CHEW	P		HONEY BEARS	P	
MULTIVITAMIN PLUS IRON CHILDRENS CHEW	P		MULTIVITAMIN GUMMIES CHILDRENS 3 MG-1.5 UNIT-34 MG-50 UNIT-250 UNIT-16 MG-50 MG	P	
MULTIVITAMIN W/IRON/INFANT/TODDLER SOLN	P		Prenatal Vitamins		
<i>pediatric multiple vitamins w/ iron CHEW</i>	P		ALIVE DAILY SUPPORT PRENATAL GUMMIES	NP	
POLY-VI-SOL/IRON SOLN	P		ALIVE PREMIUM PRENATAL DAILY SUPPORT	NP	
POLY-VITE/IRON SOLN	P		AZESCO TABS	NP	
SCOOBY-DOO ONE A DAY CHEW	P		BRAINSTRONG PRENATAL MISC	NP	
Pediatric Multiple Vitamins			CADEAU DHA	NP	
BPROTECTED PEDIA POLY-VITE SOLN OR	P		CITRANATAL 90 DHA 120 MG-20 MG-1 MG-3 MG-400 UNIT-3.4 MG-20 MG-50 MG-25 MG-2 MG-159 MG-90 MG-150 MCG-30 UNIT-0.75 MG-300 MG	NP	
MULTIVITAMIN INFANT & TODDLER SOLN OR	P		CITRANATAL ASSURE	NP	
MULTIVITAMIN INFANT/TODDLER SOLN OR	P		CITRANATAL B-CALM 120 MG-25 MG-1 MG-400 UNIT-120 MG-20 MG	NP	
NOVAFERRUM PEDIATRIC MULTIVITAMIN LIQD	P		CITRANATAL BLOOM	NP	
			CITRANATAL DHA	NP	
			CITRANATAL HARMONY 25 MG-1 MG-400 UNIT-50 MG-104 MG-27 MG-30 UNIT-260 MG	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CITRANATAL MEDLEY	NP		NATAL PNV TABS	NP	
C-NATE DHA CAPS	NP		NEONATAL COMPLETE TABS 120 MG-3 MG-30 MCG-1000 MCG-25 MCG-8 MCG-3 MG-20 MG-7 MG-29 MG-200 MG-3 MG-100 MG-15 MG-3 MG-1200 MCG-150 MCG-18.4 MG	NP	RX/OTC
COMPLETE NATAL DHA	P		NEONATAL FE	NP	
COMPLETENATE CHEW	NP		NEONATAL PLUS TABS	NP	RX/OTC
CONCEPT DHA	NP		NEONATAL/DHA MISC	NP	
CONCEPT OB	NP		NESTABS	NP	
CVS PRENATAL GUMMIES 15 MG-1.25 MG-15 MCG-400 MCG-10 MG-300 UNIT-4 MCG-1250 UNIT-50 MG-75 MCG-15 UNIT, 15 MG-1.25 MG-400 MCG-200 UNIT-4 MCG-5 MG-2000 UNIT-25 MG-10 MG-7.5 UNIT-1.9 MG-5 MG-35 MG	NP		NESTABS DHA	NP	
CVS PRENATAL GUMMY/DHA/FOLIC ACID	NP		NESTABS ONE	NP	
CVS PRENATAL MULTI+DHA CAPS	NP		NIVA-PLUS TABS	P	RX/OTC
CVS PRENATAL TABS 100 MG-2.6 MG-800 MCG-400 UNIT-4 MCG-1.7 MG-18 MG-27 MG-1.5 MG-25 MG-263 MG-11 UNIT-4000 UNIT	NP		OB COMPLETE ONE	NP	
CVS WOMENS PRENATAL+DHA MISC	NP		OB COMPLETE PETITE	NP	
DERMACINRX PRETRATE TABS	NP		OB COMPLETE PREMIER	NP	
ENBRACE HR	NP		OB COMPLETE/DHA	NP	
FOLIVANE-OB	NP		OB COMPLETE TABS	NP	
GNP PRENATAL TABS	NP		OBSTETRIX DHA MISC	NP	
KOSHER PRENATAL PLUS IRON TABS	NP		OBSTETRIX EC TABS	NP	RX/OTC
KP PRENATAL MULTIVITAMINS TABS	NP		OBTREX DHA MISC 120 MG-1 MG-3 MG-20 MG-40 MG-10 MCG-12 MCG-3.4 MG-8.1 MG-350 MG-30 MG-25 MG-65 MCG-810 MCG-29 MG	NP	
KPN PRENATAL TABS	NP		ONE A DAY WOMENS PRENATAL/DHA MISC	NP	
M-NATAL PLUS TABS	P	RX/OTC	ONE A DAY WOMENS PRENATAL1	NP	
MULTI PRENATAL TABS	NP		PERRY PRENATAL CAPS	NP	
MULTI-MAC	NP		PNV PRENATAL PLUS MULTIVITAMIN + DHA MISC	NP	
			PNV TABS 20-1	NP	
			PNV-DHA+DOCUSATE	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PNV-OMEGA	NP		PRENATAL MULTIVITAMIN TABS	NP	
PREGEN DHA CAPS	NP		PRENATAL ONE DAILY TABS	NP	
PREGENNA	NP		PRENATAL PLUS VITAMIN AND MINERAL TABS	NP	RX/OTC
PRENA 1 TRUE	NP		<i>prenatal vit w/ ferrous fumarate-folic acid CHEW</i>	NP	
PRENA1 CHEW	NP		<i>prenatal vit w/ ferrous fumarate-folic acid TABS 120 MG-25 MG-1 MG-400 UNIT-12 MCG-4 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-25 MG-2 MG-3000 UNIT-22 MG</i>	NP	
PRENA1 PEARL	NP		<i>prenatal vit w/ ferrous fumarate-l methylfolate-folic acid</i>	NP	
PRENAISSANCE	NP		<i>prenatal vit w/ iron carbonyl-folic acid TABS 120 MG-10 MG-1.25 MG-315 UNIT-15 MCG-3.4 MG-10 MG-1 MG-2 MG-15 MG-10 MG-20 UNIT-2100 UNIT-50 MG, 120 MG-3 MG-30 MCG-1 MG-400 UNIT-8 MCG-3 MG-20 MG-7 MG-3 MG-100 MG-15 MG-3 MG-4000 UNIT-200 MG-150 MCG-30 UNIT-29 MG</i>	NP	
PRENAISSANCE PLUS CAPS	NP		PRENATAL VITAMIN & MINERAL TABS	NP	
PRENATABS FA TABS	NP	RX/OTC	PRENATAL VITAMIN/IRON TABS	NP	
PRENATAL + COMPLETE MULTI/DHA/CHOLINE/FOLATE	NP		PRENATAL VITAMINS AND MINERALS/DHA CAPS	NP	
PRENATAL 19 TABS	NP	RX/OTC	PRENATAL VITAMINS PLUS LOW IRON TABS	P	RX/OTC
PRENATAL AND IRON TABS	NP	RX/OTC			
PRENATAL COMPLETE TABS	NP				
PRENATAL ESSENTIALS CAPS	NP				
PRENATAL FORMULA A-FREE TABS	NP				
PRENATAL FORMULA CAPS	NP				
PRENATAL GUMMIES/DHA & FOLIC ACID	NP				
PRENATAL MULTI + DHA CAPS 60 MG-2.6 MG-800 MCG-400 UNIT-4 MCG-1.7 MG-18 MG-27 MG-38 MG-1.5 MG-25 MG-4000 UNIT-11 UNIT-250 MG	NP				
PRENATAL MULTI +DHA CAPS	NP				
PRENATAL MULTIVITAMIN + DHA MISC	NP				
PRENATAL MULTIVITAMIN PLUS DHA CAPS	NP				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PRENATAL VITAMINS TABS 120 MG-2.6 MG-800 MCG-400 UNIT-8 MG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-4000 UNIT-30 UNIT	NP		PRENATE MINI 60 MG-26 MG-280 MCG-400 MCG-1000 UNIT-13 MCG-80 MG-25 MG-350 MG-18 MG-150 MCG-10 UNIT-600 MCG-25 MG	NP	
PRENATAL VITAMIN TABS	NP		PRENATE PIXIE	NP	
<i>prenatal without a w/ fe fumarate-l methylfolate-fa-dha</i>	NP		PRENATE RESTORE	NP	
PRENATAL+DHA MISC	NP		PRENATRIX TABS	NP	RX/OTC
PRENATAL TABS	NP		PRENATRYL TABS	NP	RX/OTC
PRENATAL TABS 120 MG-10 MG-1 MG-10 MCG-12 MCG-3 MG-20 MG-1200 MCG-27 MG-200 MG-1.84 MG-25 MG-2 MG-10 MG	P	RX/OTC	PRIMACARE	NP	
PRENATAL-U CAPS	NP		PROVIDA OB	NP	
PRENATE	NP		RA PRENATAL TABS	NP	
PRENATE AM	NP		SELECT-OB+DHA MISC	NP	
PRENATE DHA 90 MG-26 MG-400 MCG-400 UNIT-25 MCG-155 MG-50 MG-300 MG-40 UNIT-600 MCG-18 MG	NP		SELECT-OB CHEW	NP	
PRENATE ELITE 75 MG-21 MG-330 MCG-400 MCG-600 UNIT-13 MCG-3.5 MG-21 MG-3 MG-155 MG-25 MG-15 MG-1.5 MG-2600 UNIT-150 MCG-40 UNIT-600 MCG-20 MG	NP		SE-NATAL 19 CHEW	P	
PRENATE ENHANCE	NP		SE-NATAL 19 TABS	P	RX/OTC
PRENATE ESSENTIAL 90 MG-26 MG-280 MCG-400 MCG-220 UNIT-13 MCG-155 MG-50 MG-300 MG-150 MCG-10 UNIT-40 MG-600 MCG-18 MG	NP		SM ONE DAILY PRENATAL MISC	NP	
			SM PRENATAL VITAMINS TABS	NP	
			TARON-C DHA	NP	
			THERANATAL COMPLETE MISC	NP	
			THERANATAL CORE NUTRITION TABS	NP	RX/OTC
			THERANATAL ONE CAPS	NP	
			THERANATAL OVAVITE	NP	
			THRIVITE RX TABS	P	RX/OTC
			TRICARE TABS	NP	RX/OTC
			TRINATAL RX 1 TABS	P	
			TRISTART DHA	NP	
			ULTRA PRENATAL + DHA CAPS	NP	
			VINATE DHA RF	NP	
			VIRT-C DHA	P	
			VIRT-NATE DHA CAPS	NP	
			VIRT-PN DHA	NP	
			VITAFOL FE+	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
VITAFOL GUMMIES	NP		CVS HAIR/SKIN/NAILS TABS	P	RX/OTC
VITAFOL ULTRA	NP		ELON MATRIX 5000 TABS	P	RX/OTC
VITAFOL-OB+DHA MISC	NP		ELON MATRIX PLUS TABS	P	RX/OTC
VITAFOL-OB TABS	NP		ELON MATRIX 5000 COMPLETE TABS	P	RX/OTC
VITAFOL-ONE CAPS	NP		ELON MATRIX COMPLETE TABS	P	RX/OTC
VITAMEDMD ONE RX/QUATREFOLIC	NP		ELON R3 TABS	P	RX/OTC
VITAMEDMD REDICHEW RX	NP		FEMQUIL CAPS	P	RX/OTC
VITAPEARL	NP		GLYCOTROL COMPLETE CAPS	P	RX/OTC
VITATRUE	NP		GLYCOTROL CAPS	P	RX/OTC
WESCAP-PN DHA	NP		HAIR FARE TABS	P	RX/OTC
WESNATAL DHA COMPLETE	P		HAIR NOURISHING SUPPLEMENT TABS	P	RX/OTC
WESNATE DHA CAPS	NP		HEART SAVIOR CAPS	P	RX/OTC
WESTAB PLUS TABS	P	RX/OTC	HEART TABS TABS	P	RX/OTC
WESTGEL DHA	NP		IMMUNERX CAPS	P	RX/OTC
ZALVIT TABS	NP		IMMUNICARE CAPS	P	RX/OTC
ZATEAN-PN DHA	NP		INULOSE BLOOD SUGAR SUPPORT CAPS	P	RX/OTC
Specialty Vitamins Products			LIPIDSHIELD PLUS TABS	P	RX/OTC
ADRENAL MANAGER CAPS	P	RX/OTC	LIPOTRIAD VISION SUPPORT CAPS	P	RX/OTC
ADRENALIV CAPS	P	RX/OTC	LIPOTRIAD VISION SUPPORTPLUS CAPS	P	RX/OTC
ADRENOID CAPS	P	RX/OTC	LIPOTRIAD VISIONARY CAPS	P	RX/OTC
ALLERWELL ALLERGY FORMULA TABS	P	RX/OTC	MEDCAPS DPO CAPS	P	RX/OTC
BILBERRY PLUS CAPS	P	RX/OTC	MEDCAPS GI CAPS	P	RX/OTC
BIOTIN PLUS KERATIN TABS	P	RX/OTC	MEDCAPS IS CAPS	P	RX/OTC
CARDIOPRESS CAPS	P	RX/OTC	MEDCAPS T3 CAPS	P	RX/OTC
CENTRUM PERFORMANCE TABS	P	RX/OTC	MEMORALL CAPS	P	RX/OTC
CENTRUM SPECIALIST ENERGY TABS	P	RX/OTC	MEMORY COMPLEX BRAIN HEALTH TABS	P	RX/OTC
CHOLASE CONTROL CAPS	P	RX/OTC	METHYL PROTECT CAPS	P	RX/OTC
COLLAGEN ULTRA CAPS	P	RX/OTC			
CORTICARE B CAPS	P	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits
METHYL-GUARD PLUS CAPS	P	RX/OTC
METHYL-GUARD CAPS	P	RX/OTC
MG PLUS PROTEIN TABS	P	RX/OTC
MIL ADREGEN TABS	P	RX/OTC
MM BIOTIN/KERATIN CAPS	P	RX/OTC
NITRIVIA CAPS	P	RX/OTC
PRO HERS RX CAPS	P	RX/OTC
PRO HIS RX CAPS	P	RX/OTC
PRO PCOS RX CAPS	P	RX/OTC
RA EAR CARE TABS	P	RX/OTC
RETAIN VISION CAPS	P	RX/OTC
<i>specialty vitamins products TABS</i>	P	RX/OTC
SYNERTROPIN CAPS	P	RX/OTC
THERABETIC EYE HEALTH TABS	P	RX/OTC
UPSPRING HE NATAL TABS	P	RX/OTC
VITAMINS FOR HAIR CAPS	P	RX/OTC
Vitamin Mixtures		
COD LIVER OIL FOR KIDS OIL	P	RX/OTC
<i>cod liver oil CAPS</i>	P	
COD LIVER OIL OIL	P	RX/OTC
CRANBERRY URINARY COMFORT	P	
E-400/SELENIUM CAPS	P	
ECEE PLUS TABS	P	
<i>niacin w/ inositol</i>	P	
NORWEGIAN COD LIVER OIL OIL	P	RX/OTC
QC COD LIVER OIL OIL	P	RX/OTC
RA COD LIVER OIL OIL	P	RX/OTC
<i>vitamins a & d w/ c</i>	P	
<i>vitamins a & d CAPS</i>	P	

Drug Name	Drug Tier	Requirements/Limits
Vitamins w/ Lipotropics		
ACTIFLOVIT EAR HEALTH TABS	P	
<i>vitamins w/ lipotropics CAPS</i>	P	
<i>vitamins w/ lipotropics TABS</i>	P	
MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms		
Central Muscle Relaxants		
AMRIX CP24 <i>(cyclobenzaprine hcl)</i>	NP	
<i>baclofen SOLN OR 5 MG/5ML, 10 MG/5ML</i>	NP	
<i>baclofen SUSP</i>	NP	
<i>baclofen TABS</i>	P	
<i>baclofen TABS 5 MG, 10 MG, 20 MG</i>	NP	
<i>carisoprodol TABS</i>	NP	PA
<i>chlorzoxazone TABS</i>	NP	
<i>cyclobenzaprine hcl CP24</i>	NP	
<i>cyclobenzaprine hcl TABS 7.5 MG</i>	NP	
<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	P	
FLEQSUVY SUSP <i>(baclofen)</i>	NP	
LYVISPAH PACK	NP	
<i>metaxalone</i>	NP	
<i>methocarbamol TABS 500 MG, 750 MG</i>	P	
<i>orphenadrine citrate TB12</i>	NP	
SOMA TABS <i>(carisoprodol)</i>	NP	PA
<i>tizanidine hcl CAPS</i>	NP	
<i>tizanidine hcl TABS</i>	P	
ZANAFLEX CAPS <i>(tizanidine hcl)</i>	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ZANAFLEX TABS 4 MG (tizanidine hcl)	NP		azelastine hcl 0.1 %, 137 MCG/SPRAY	P	
Direct Muscle Relaxants			cromolyn sodium (nasal) 5.2 MG/ACT	P	
DANTRIUM CAPS 25 MG (dantrolene sodium)	NP		olopatadine hcl (nasal)	NP	
dantrolene sodium CAPS	NP		Nasal Anticholinergics		
Muscle Relaxant Combinations			ipratropium bromide (nasal)	P	
carisoprodol w/ aspirin & codeine	NP	PA	Nasal Steroids		
NORGESIC FORTE (orphenadrine w/ aspirin & caff)	NP		BECONASE AQ	NP	
orphenadrine w/ aspirin & caff	NP		budesonide (nasal)	P	
Viscosupplements			flunisolide (nasal) 0.025 %	NP	
SYNVISC ONE SOSY	P	SP	fluticasone propionate (nasal) SUSP	NP	RX/OTC
SYNVISC SOSY	P	SP	fluticasone propionate (nasal) SUSP	P	RX/OTC
NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus			mometasone furoate (nasal) SUSP	NP	RX/OTC
Nasal Agent Combinations			NASACORT ALLERGY 24HR CHILDRENS AERO (triamcinolone acetonide (nasal))	NP	
azelastine hcl-fluticasone propionate SUSP	NP		NASACORT ALLERGY 24HR AERO (triamcinolone acetonide (nasal))	NP	
DYMISTA SUSP (azelastine hcl-fluticasone propionate)	NP		NASONEX 24HR SUSP (mometasone furoate (nasal))	NP	RX/OTC
RYALTRIS	NP		OMNARIS SUSP	NP	
Nasal Agents - Misc.			QNASL	NP	
AYR NASAL DROPS SOLN	P		QNASL CHILDRENS	NP	
LITTLE REMEDIES SALINE SPRAY/DROPS SOLN	P		triamcinolone acetonide (nasal) AERO	P	
OCEAN NASAL SPRAY SOLN (saline)	P		triamcinolone acetonide (nasal) AERO	NP	
saline SOLN	P		XHANCE EXHU	NP	
Nasal Antiallergy			ZETONNA AERS	NP	
azelastine hcl 0.15 %	NP	RX/OTC	Sympathomimetic Decongestants		
			epinephrine hcl (nasal)	P	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>oxymetazoline hcl SOLN 0.05 %</i>	NP		<i>carboxymethylcellulose sodium (ophth) SOLN 0.25 %, 0.5 %</i>	P	
<i>phenylephrine hcl (oral) TABS</i>	NP		<i>dextran 70-hypromellose 0.3 %-0.1 %</i>	P	
<i>phenylephrine hcl (oral) TABS</i>	P		GENTEAL TEARS MODERATE PF (<i>dextran 70-hypromellose</i>)	P	
<i>pseudoephedrine hcl TABS</i>	P		<i>glycerin-hypromellose-polyethylene glycol 400</i>	P	
<i>pseudoephedrine hcl TB12</i>	P		ISOPTO TEARS SOLN	P	
NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles			LACRISERT	P	
ALS Agents			<i>polyethylene glycol-propylene glycol (ophth) SOLN 0.3 %-0.4 %</i>	P	
<i>riluzole TABS</i>	P		<i>polyvinyl alcohol 1.4 %</i>	NP	
Neuromuscular Blocking Agent - Neurotoxins			<i>polyvinyl alcohol 1.4 %</i>	P	
BOTOX IJ	NP	SP	<i>propylene glycol-glycerin</i>	P	
NUTRIENTS			PURE & GENTLE LUBRICANT SOLN	P	
Misc. Nutritional Substances			REFRESH LIQUIGEL GEL (<i>carboxymethylcellulose sodium (ophth)</i>)	P	
KELP/LECITHIN/B-6 CAPS	P		REFRESH PLUS SOLN (<i>carboxymethylcellulose sodium (ophth)</i>)	P	
<i>omega-3 fatty acids CAPS 3 MG-108 MG-1000 MG-162 MG</i>	NP		REFRESH TEARS SOLN (<i>carboxymethylcellulose sodium (ophth)</i>)	P	
<i>omega-3 fatty acids CAPS 120 MG-1000 MG-180 MG-300 MG, 1000 MG</i>	P		VENTIVA	NP	
Proteins			<i>white petrolatum-mineral oil</i>	P	
<i>glutamine TABS</i>	P		<i>white petrolatum-mineral oil</i>	P	
OPHTHALMIC AGENTS - Drugs to Treat the Eye			Beta-blockers - Ophthalmic		
Artificial Tears and Lubricants			<i>betaxolol hcl (ophth) SOLN</i>	NP	
ALCON TEARS SOLN	P		BETIMOL	NP	
<i>artificial tear solution</i>	P		BETOPTIC-S SUSP	NP	
BION TEARS	P		<i>brimonidine tartrate-timolol maleate</i>	NP	
<i>carboxymethylcellulose sodium (ophth) GEL</i>	P				
<i>carboxymethylcellulose sodium (ophth) SOLN 0.25 %, 0.5 %</i>	P				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>carteolol hcl (ophth)</i>	P		ISOPTO ATROPINE SOLN	P	
COMBIGAN (<i>brimonidine tartrate-timolol maleate</i>)	P		<i>phenylephrine hcl (mydriatic) SOLN</i>	P	
COSOPT (<i>dorzolamide hcl-timolol maleate</i>)	NP		<i>tropicamide SOLN</i>	P	
COSOPT PF (<i>dorzolamide hcl-timolol maleate</i>)	NP		Miotics		
<i>dorzolamide hcl-timolol maleate</i>	NP		PHOSPHOLINE IODIDE	NP	
<i>dorzolamide hcl-timolol maleate</i>	P		<i>pilocarpine hcl SOLN 1 %, 2 %, 4 %</i>	P	
<i>dorzolamide hcl-timolol maleate</i>	P		VUITY SOLN	NP	
<i>dorzolamide hcl-timolol maleate</i>	P		Ophthalmic Adrenergic Agents		
ISTALOL SOLN (<i>timolol maleate (ophth)</i>)	P		ALPHAGAN P (<i>brimonidine tartrate</i>)	P	
<i>levobunolol hcl 0.5 %</i>	P		<i>apraclonidine hcl</i>	NP	
<i>timolol maleate (ophth) SOLG</i>	NP		<i>brimonidine tartrate 0.2 %</i>	P	
<i>timolol maleate (ophth) SOLN</i>	P		<i>brimonidine tartrate 0.1 %, 0.15 %</i>	NP	
<i>timolol maleate (ophth) SOLN</i>	NP		IOPIDINE	NP	
TIMOPTIC OCUDOSE SOLN (<i>timolol maleate (ophth)</i>)	NP		LUMIFY	NP	
TIMOPTIC SOLN (<i>timolol maleate (ophth)</i>)	NP		SIMBRINZA	P	
TIMOPTIC-XE SOLG (<i>timolol maleate (ophth)</i>)	NP		Ophthalmic Anti-infectives		
Cholinergic Agonists			AZASITE	NP	
TYRVAYA	NP		<i>bacitracin (ophthalmic)</i>	NP	
Cycloplegic Mydriatics			<i>bacitracin-polymyxin b (ophth)</i>	P	
<i>atropine sulfate (ophthalmic) OINT</i>	P		BESIVANCE	NP	
<i>atropine sulfate (ophthalmic) SOLN</i>	P		CILOXAN OINT	P	
ATROPINE SULFATE SOLN 1 %	P		<i>ciprofloxacin hcl (ophth) SOLN</i>	P	
CYCLOGYL	P		<i>erythromycin (ophth)</i>	P	
<i>cyclopentolate hcl</i>	P		<i>gatifloxacin (ophth)</i>	NP	
			<i>gentamicin sulfate (ophth) SOLN</i>	P	
			<i>moxifloxacin hcl (ophth) SOLN OP</i>	NP	
			<i>moxifloxacin hcl (ophth) SOLN OP</i>	P	
			NATACYN	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>neomycin-bacitracin zn-polymyxin</i>	NP		<i>tetrahydrozoline-dextran-polyethylene glycol-povidone</i>	P	
<i>neomycin-polymyxin-gramicidin</i>	NP		Ophthalmic Immunomodulators		
OCUFLOX (<i>ofloxacin (ophth)</i>)	NP		CEQUA SOLN	NP	
<i>ofloxacin (ophth)</i>	P		<i>cyclosporine (ophth) EMUL</i>	NP	
<i>polymyxin b-trimethoprim</i>	P		RESTASIS MULTIDOSE EMUL	NP	
<i>sulfacetamide sodium (ophth) OINT</i>	NP		RESTASIS EMUL (<i>cyclosporine (ophth)</i>)	P	
<i>sulfacetamide sodium (ophth) SOLN</i>	NP		VERKAZIA EMUL	NP	
<i>tobramycin (ophth) SOLN</i>	P		VEVYE SOLN	NP	
TOBEX OINT	NP		Ophthalmic Integrin Antagonists		
<i>trifluridine</i>	P		XIIDRA	NP	
VIGAMOX SOLN OP (<i>moxifloxacin hcl (ophth)</i>)	NP		Ophthalmic Kinase Inhibitors		
XDEMVY	NP		RHOPRESSA	NP	
Ophthalmic Decongestants			ROCKLATAN	NP	
ADVANCED EYE RELIEF MAXIMUM REDNESS/MAXIMUM STRENGTH	P		Ophthalmic Steroids		
<i>naphazoline w/ pheniramine 0.3 %-0.025 %</i>	P		ALREX SUSP (<i>loteprednol etabonate</i>)	NP	
<i>naphazoline w/ pheniramine 0.315 %-0.027 %</i>	NP		<i>bacitracin-poly-neomycin-hc</i>	NP	
<i>naphazoline-polyethylene glycol 300</i>	P		<i>dexamethasone sodium phosphate (ophth)</i>	P	
NAPHCON-A (<i>naphazoline w/ pheniramine</i>)	P		DEXTENZA INST	NP	SP
<i>tetrahydrozoline hcl (ophth) 0.05 %</i>	P		DEXYCU SUSP IO	NP	SP
<i>tetrahydrozoline w/ polyethylene glycol</i>	P		<i>difluprednate</i>	NP	
<i>tetrahydrozoline w/ zinc sulfate</i>	P		DUREZOL (<i>difluprednate</i>)	P	
			EYSUVIS SUSP	NP	
			FLAREX	P	
			<i>fluorometholone (ophth) SUSP</i>	P	
			FML FORTE SUSP	P	
			FML LIQUIFILM SUSP (<i>fluorometholone (ophth)</i>)	NP	
			ILUVIEN	NP	SP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
INVELTYS SUSP	NP		<i>tobramycin-dexamethasone SUSP</i>	NP	
LOTEMAX SM GEL	NP		TRIESENCE	NP	SP
LOTEMAX GEL (<i>loteprednol etabonate</i>)	P		YUTIQ	NP	SP
LOTEMAX OINT	P		ZYLET	NP	
LOTEMAX SUSP (<i>loteprednol etabonate</i>)	P		Ophthalmics - Misc.		
<i>loteprednol etabonate GEL</i>	NP		ACULAR (<i>ketorolac tromethamine (ophth)</i>)	NP	
<i>loteprednol etabonate SUSP</i>	NP		ACULAR LS (<i>ketorolac tromethamine (ophth)</i>)	NP	
MAXIDEX SUSP OP	P		ACUVAIL	NP	
MAXITROL OINT (<i>neomycin-polymyxin-dexameth</i>)	NP		ALOCRIAL	NP	
MAXITROL SUSP (<i>neomycin-polymyxin-dexameth</i>)	NP		ALOMIDE	NP	
<i>neomycin-polymyxin-dexameth OINT</i>	P		<i>azelastine hcl (ophth)</i>	P	
<i>neomycin-polymyxin-dexameth SUSP</i>	P		AZOPT (<i>brinzolamide</i>)	NP	
<i>neomycin-polymyxin-hc (ophth)</i>	P		<i>bepotastine besilate</i>	NP	
OZURDEX IMPL	NP	SP	BEPREVE (<i>bepotastine besilate</i>)	NP	
PRED FORTE (<i>prednisolone acetate (ophth)</i>)	P		<i>brinzolamide</i>	NP	
PRED MILD	P		<i>bromfenac sodium (ophth)</i>	NP	
<i>prednisolone acetate (ophth)</i>	P		BROMSITE (<i>bromfenac sodium (ophth)</i>)	NP	
PREDNISOLONE SODIUM PHOSPHATE	P		<i>cromolyn sodium (ophth)</i>	P	
RETISERT	NP	SP	<i>diclofenac sodium (ophth)</i>	P	
<i>sulfacetamide sod-prednisolone SOLN</i>	P		<i>dorzolamide hcl</i>	P	
TOBRADEX ST SUSP	NP		<i>epinastine hcl (ophth)</i>	NP	
TOBRADEX OINT	P		<i>flurbiprofen sodium</i>	P	
TOBRADEX SUSP (<i>tobramycin-dexamethasone</i>)	P		ILEVRO	NP	
			<i>ketorolac tromethamine (ophth)</i>	P	
			<i>ketotifen fumarate (ophth) 0.035 %</i>	P	
			LASTACAFT	NP	
			MIEBO	NP	
			MURO 128 OINT (<i>sodium chloride hypertonic</i>)	P	
			MURO 128 SOLN	P	

Drug Name	Drug Tier	Requirements/Limits
MURO 128 SOLN (sodium chloride hypertonic)	P	
NEVANAC	P	
olopatadine hcl	P	RX/OTC
PATADAY (olopatadine hcl)	P	RX/OTC
PATADAY EXTRA STRENGTH	P	
PROLENSA (bromfenac sodium (ophth))	NP	
sodium chloride hypertonic OINT	P	
sodium chloride hypertonic SOLN	P	
ZADITOR 0.035 % (ketotifen fumarate (ophth))	P	
ZERVIAE	NP	
Prostaglandins - Ophthalmic		
bimatoprost SOLN	NP	
IYUZEH SOLN	NP	
latanoprost SOLN	P	
LUMIGAN SOLN 0.01 %	NP	
tafluprost	NP	
TRAVATAN Z SOLN (travoprost)	NP	
travoprost SOLN	P	
VYZULTA	NP	
XALATAN SOLN (latanoprost)	NP	
XELPROS EMUL	NP	
ZIOPTAN (tafluprost)	NP	
OTIC AGENTS - Drugs to Treat the Ear		
Otic Agents - Miscellaneous		
acetic acid (otic)	P	
carbamide peroxide (otic) 6.5 %	P	
Otic Anti-infectives		

Drug Name	Drug Tier	Requirements/Limits
ciprofloxacin hcl (otic)	NP	
ofloxacin (otic)	P	
Otic Combinations		
CIPRO HC	P	
CIPRODEX (ciprofloxacin-dexamethasone)	P	
ciprofloxacin-dexamethasone	P	
ciprofloxacin-dexamethasone	NP	
ciprofloxacin-fluocinolone acetonide	NP	
CORTISPORIN-TC	P	
neomycin-polymyxin-hc (otic) SOLN	P	
neomycin-polymyxin-hc (otic) SUSP	P	
Otic Steroids		
hydrocortisone w/acetic acid	NP	
HYDROCORTISONE/ACETIC ACID (hydrocortisone w/acetic acid)	NP	
OXYTOCICS - Drugs to Prevent/Control Uterine Bleeding		
Oxytocics		
methylergonovine maleate TABS	P	
PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System		
Monoclonal Antibodies		
BEYFORTUS	P	SP
SYNAGIS SOLN	P	SP; PA
PENICILLINS - Drugs to Treat Bacterial Infections		
Aminopenicillins		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>amoxicillin CAPS</i>	P		AUGMENTIN SUSR 31.25 MG/5ML-125 MG/5ML	NP	
<i>amoxicillin CHEW 125 MG, 250 MG</i>	P		BICILLIN C-R 300000 UNIT/2ML-900000 UNIT/2ML, 300000 UNIT/ML-300000 UNIT/ML	P	
<i>amoxicillin SUSR</i>	P		Penicillinase-Resistant Penicillins		
AMOXICILLIN SUSR (<i>amoxicillin</i>)	NP		<i>dicloxacillin sodium</i>	P	
<i>amoxicillin TABS</i>	P		PHARMACEUTICAL ADJUVANTS		
<i>ampicillin sodium IJ 1 GM, 2 GM</i>	P		Liquid Vehicles		
<i>ampicillin CAPS 500 MG</i>	P		<i>bacteriostatic sodium chloride</i>	P	
Natural Penicillins			CHERRY CONCENTRATE	P	RX/OTC
BICILLIN L-A SUSY	P		CHERRY SYRUP	P	RX/OTC
<i>penicillin v potassium SOLR</i>	P		FLAVOR PLUS LIQD	P	RX/OTC
<i>penicillin v potassium TABS</i>	P		FLAVOR SWEET-SF SYRP	P	RX/OTC
Penicillin Combinations			FLAVOR SWEET SYRP	P	RX/OTC
<i>amoxicillin & pot clavulanate CHEW</i>	P		GERBER GOOD START WATER	P	
<i>amoxicillin & pot clavulanate SUSR 62.5 MG/5ML-250 MG/5ML</i>	NP		GOOD START SUPREME STERILE WATER	P	
<i>amoxicillin & pot clavulanate SUSR 28.5 MG/5ML-200 MG/5ML, 42.9 MG/5ML-600 MG/5ML, 57 MG/5ML-400 MG/5ML</i>	P		GRAPE SYRUP SYRP	P	RX/OTC
<i>amoxicillin & pot clavulanate TABS 125 MG-500 MG, 125 MG-875 MG</i>	P		MX-SOL SF SYRP	P	RX/OTC
<i>amoxicillin & pot clavulanate TABS 125 MG-250 MG</i>	NP		MX-SOL SYRP	P	RX/OTC
<i>amoxicillin & pot clavulanate TB12</i>	NP		ORAL SUSPEND LIQD	P	RX/OTC
<i>ampicillin & sulbactam sodium IV 10 GM-5 GM</i>	P		ORAL SYRUP FLAVORED VEHICLE SYRP	P	RX/OTC
AUGMENTIN ES-600 SUSR (<i>amoxicillin & pot clavulanate</i>)	NP		ORAL SYRUP SF SYRP	P	RX/OTC
			ORAPENN SD ANHYDROUS SWEETENED LIQD	P	RX/OTC
			ORAPENN SD ANHYDROUS UNSWEETENED LIQD	P	RX/OTC
			ORA-PLUS LIQD	P	RX/OTC
			ORA-SWEET SF SYRP 10 %-9 %	P	RX/OTC

Drug Name	Drug Tier	Requirements/Limits
ORA-SWEET SYRP 4 %-5 %-54 %	P	RX/OTC
PCCA SWEET-SF SYRP	P	RX/OTC
PCCA SYRUP VEHICLE SYRP	P	RX/OTC
SIMILAC STERILIZED WATER	P	
SOSWEET SYRP	P	RX/OTC
SYRPALTA SYRP 83 %	P	RX/OTC
SYRSPEND SF LIQD	P	RX/OTC
SYRUP VEHICLE SF SYRP	P	RX/OTC
SYRUP VEHICLE SYRP	P	RX/OTC
VERSAFREE SYRP	P	RX/OTC
VERSAPLUS SYRP	P	RX/OTC
water for injection, sterile IJ	P	

PROGESTINS - Hormone Replacement/Modifying Drugs

Progestins		
AYGESTIN TABS (norethindrone acetate)	NP	
hydroxyprogesterone caproate OIL	NP	SP; PA
MAKENA SOAJ	NP	SP; PA
medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG	P	
norethindrone acetate TABS	P	
progesterone CAPS	P	
progesterone OIL	P	
PROMETRIUM CAPS (progesterone)	NP	
PROVERA 5 MG, 10 MG (medroxyprogesterone acetate)	NP	

PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and

Drug Name	Drug Tier	Requirements/Limits
Emotional Conditions		
Agents for Chemical Dependency		
disulfiram	P	
LUCEMYRA	NP	
Anti-Cataplectic Agents		
XYWAV	NP	SP
Antidementia Agents		
ADLARITY PTWK	NP	PA
ADUHELM	NP	SP
ARICEPT TABS (donepezil hydrochloride)	NP	PA
donepezil hydrochloride TABS 23 MG	NP	PA
donepezil hydrochloride TABS 5 MG, 10 MG	P	PA
donepezil hydrochloride TBDP	NP	PA
EXELON (rivastigmine)	NP	PA
galantamine hydrobromide CP24	NP	PA
galantamine hydrobromide SOLN	NP	PA
galantamine hydrobromide TABS	NP	PA
LEQEMBI	NP	SP
memantine hcl CP24	NP	PA
memantine hcl SOLN 2 MG/ML	NP	PA
memantine hcl TABS	P	PA
NAMENDA TITRATION PAK TABS (memantine hcl)	NP	PA
NAMENDA XR CP24 (memantine hcl)	NP	PA
NAMZARIC C4PK	NP	PA
NAMZARIC CP24	NP	PA
rivastigmine	P	PA
rivastigmine tartrate CAPS	NP	PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Combination Psychotherapeutics			<i>dalfampridine</i>	P	SP; PA
<i>chlordiazepoxide-amitriptyline</i>	NP		<i>dimethyl fumarate CDPK</i>	P	SP; PA
LYBALVI	NP		<i>dimethyl fumarate CPDR</i>	P	SP; PA
<i>olanzapine-fluoxetine hcl</i>	NP		<i>dimethyl fumarate CPDR</i>	NP	SP; PA
<i>perphenazine-amitriptyline</i>	P		<i> fingolimod hcl</i>	P	PA
SYMBYAX 25 MG-3 MG, 25 MG-6 MG (<i>olanzapine-fluoxetine hcl</i>)	NP		GILENYA (<i>fingolimod hcl</i>)	NP	SP; PA
Fibromyalgia Agents			<i>glatiramer acetate SOSY</i>	P	SP; PA
SAVELLA TITRATION PACK MISC	NP		KESIMPTA	P	SP; PA
SAVELLA TABS	NP		LEMTRADA	NP	SP; PA
Movement Disorder Drug Therapy			MAVENCLAD	NP	SP; PA
AUSTEDO XR PATIENT TITRATION KIT TEPK	P	SP	MAYZENT STARTER PACK TBPK	NP	SP; PA
AUSTEDO XR TB24 6 MG, 12 MG, 24 MG	P	SP	MAYZENT TABS	NP	SP; PA
AUSTEDO TABS	P	SP; PA	OCREVUS	NP	SP; PA
INGREZZA CAPS	P	QL(1 ea daily); SP	PLEGRIDY STARTER PACK SOPN	NP	SP; PA
INGREZZA CPPK	P	QL(1 ea daily); SP	PLEGRIDY STARTER PACK SOSY SC	NP	SP; PA
INGREZZA CPSP	P		PLEGRIDY SOPN	NP	SP; PA
<i>tetrabenazine</i>	P	SP	PLEGRIDY SOSY IM	NP	SP; PA
XENAZINE (<i>tetrabenazine</i>)	NP	SP	PONVORY 14-DAY STARTER PACK TBPK	NP	SP; PA
Multiple Sclerosis Agents			PONVORY TABS	NP	SP; PA
AMPYRA (<i>dalfampridine</i>)	NP	SP; PA	REBIF REBIDOSE TITRATIONPACK SOAJ	P	SP; PA
AUBAGIO (<i>teriflunomide</i>)	NP	SP; PA	REBIF REBIDOSE SOAJ	P	SP; PA
AVONEX PEN AJKT	P	SP; PA	REBIF TITRATION PACK SOSY	P	SP; PA
AVONEX PSKT	P	SP; PA	REBIF SOSY	P	SP; PA
BAFIERTAM	NP	SP; PA	TASCENSO ODT 0.25 MG	NP	SP; PA
BETASERON KIT	P	SP; PA	TASCENSO ODT 0.5 MG	NP	SP
BRIUMVI	NP	SP	TECFIDERA STARTER PACK CDPK (<i>dimethyl fumarate</i>)	NP	SP; PA
COPAXONE SOSY (<i>glatiramer acetate</i>)	NP	SP; PA	TECFIDERA CPDR (<i>dimethyl fumarate</i>)	NP	SP; PA
<i>dalfampridine</i>	NP	SP; PA	<i>teriflunomide</i>	P	SP; PA
			TYSABRI	P	SP; PA

Drug Name	Drug Tier	Requirements/Limits
VUMERITY	NP	SP; PA
ZEPOSIA 7-DAY STARTER PACK CPPK	NP	SP; PA
ZEPOSIA STARTER KIT CPPK	NP	SP
ZEPOSIA STARTER KIT CPPK	NP	SP; PA
ZEPOSIA CAPS	NP	SP; PA
Postherpetic Neuralgia (PHN)/Neuropathic Pain Agents		
<i>gabapentin (once-daily) TABS</i>	NP	
GRALISE TABS	NP	
GRALISE TABS (<i>gabapentin (once-daily)</i>)	NP	
LYRICA CR (<i>pregabalin (once-daily)</i>)	NP	
<i>pregabalin (once-daily)</i>	NP	
Premenstrual Dysphoric Disorder (PMDD) Agents		
<i>fluoxetine hcl (pmdd) TABS</i>	NP	
Pseudobulbar Affect (PBA) Agents		
NUDEXTA	P	
Psychotherapeutic and Neurological Agents - Misc.		
<i>pimozide</i>	P	
Restless Leg Syndrome (RLS) Agents		
HORIZANT	NP	
Smoking Deterrents		
<i>bupropion hcl (smoking deterrent)</i>	P	
<i>nicotine polacrilex GUM</i>	P	
<i>nicotine polacrilex GUM 2 MG</i>	NP	
<i>nicotine polacrilex GUM</i>	P	
<i>nicotine polacrilex LOZG</i>	P	
<i>nicotine polacrilex LOZG</i>	P	

Drug Name	Drug Tier	Requirements/Limits
<i>nicotine polacrilex LOZG</i>	NP	
NICOTINE TRANSDERMAL SYSTEM KIT	P	
<i>nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR</i>	P	
<i>nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR</i>	P	
NICOTROL INHALER INHA	P	
NICOTROL NS SOLN	P	
<i>varenicline tartrate TABS 1 MG</i>	P	
Vasomotor Symptom Agents		
<i>paroxetine mesylate (vasomotor)</i>	NP	
RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions		
Cystic Fibrosis Agents		
PULMOZYME	P	SP
TRIKAFTA TBPK 50 MG-25 MG	NP	SP
Respiratory Agents - Misc.		
INFASURF TR	P	
SULFONAMIDES - Drugs to Treat Bacterial Infections		
Sulfonamides		
<i>sulfadiazine TABS</i>	P	
TETRACYCLINES - Drugs to Treat Bacterial Infections		
Aminomethylcyclines		
NUZYRA TABS	NP	
Tetracyclines		
<i>demeclocycline hcl TABS</i>	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
DORYX MPC TBEC	NP		Thyroid Hormones		
DORYX TBEC 80 MG, 200 MG (<i>doxycycline hyclate</i>)	NP		ADTHYZA TABS	NP	
<i>doxycycline (monohydrate) CAPS 50 MG, 100 MG</i>	P		ARMOUR THYROID TABS	P	
<i>doxycycline (monohydrate) CAPS 75 MG, 150 MG</i>	NP		CYTOMEL TABS (<i>liothyronine sodium</i>)	NP	
<i>doxycycline (monohydrate) SUSR</i>	NP		ERMEZA SOLN OR	P	
<i>doxycycline (monohydrate) TABS</i>	P		<i>levothyroxine sodium CAPS</i>	NP	
<i>doxycycline hyclate CAPS</i>	P		LEVOTHYROXINE SODIUM SOLN IV	NP	
<i>doxycycline hyclate TABS 20 MG, 100 MG, 150 MG</i>	P		LEVOTHYROXINE SODIUM SOLN IV	NP	
<i>doxycycline hyclate TABS 50 MG, 75 MG, 100 MG, 150 MG</i>	NP		<i>levothyroxine sodium SOLR IV</i>	NP	
<i>doxycycline hyclate TBEC</i>	NP		LEVOTHYROXINE SODIUM SOLR IV (<i>levothyroxine sodium</i>)	NP	
<i>minocycline hcl CAPS</i>	P		<i>levothyroxine sodium TABS</i>	P	
<i>minocycline hcl TABS</i>	NP		<i>levothyroxine sodium TABS</i>	NP	
<i>minocycline hcl TB24</i>	NP		<i>liothyronine sodium SOLN</i>	NP	
MINOLIRA TB24	NP		<i>liothyronine sodium TABS</i>	P	
SOLODYN TB24 55 MG, 65 MG, 80 MG, 105 MG, 115 MG (<i>minocycline hcl</i>)	NP		NIVA THYROID TABS	P	
<i>tetracycline hcl CAPS</i>	NP		NP THYROID 120 TABS	P	
TETRACYCLINE HYDROCHLORIDE TABS	NP		NP THYROID 15 TABS	P	
TETRACYCLINE HYDROCHLORID TABS	NP		NP THYROID 30 TABS	P	
VIBRAMYCIN CAPS (<i>doxycycline hyclate</i>)	NP		NP THYROID 60 TABS	P	
THYROID AGENTS - Drugs to Regulate Thyroid Hormones			NP THYROID 90 TABS	P	
Antithyroid Agents			SYNTHROID TABS (<i>levothyroxine sodium</i>)	NP	
<i>methimazole TABS</i>	P		THYQUIDITY SOLN OR	NP	
<i>propylthiouracil</i>	P		THYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	P	
			TIROSINT CAPS	NP	
			TIROSINT CAPS (<i>levothyroxine sodium</i>)	NP	
			TIROSINT-SOL SOLN OR	NP	

Drug Name	Drug Tier	Requirements/Limits
TRIOSTAT SOLN (<i>lithyronine sodium</i>)	NP	
ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions		
Antispasmodics		
BELLADONNA/OPIUM 16.2 MG-60 MG	P	
<i>dicyclomine hcl CAPS</i>	P	
<i>dicyclomine hcl SOLN OR</i>	P	
<i>dicyclomine hcl TABS</i>	P	
H-2 Antagonists		
<i>cimetidine hcl OR 300 MG/5ML</i>	NP	
<i>cimetidine TABS</i>	NP	RX/OTC
<i>famotidine SUSR</i>	P	
<i>famotidine TABS</i>	P	
<i>nizatidine CAPS</i>	P	
PEPCID TABS (<i>famotidine</i>)	NP	RX/OTC
Misc. Anti-Ulcer		
<i>sucralfate SUSP</i>	P	
<i>sucralfate TABS</i>	P	
Proton Pump Inhibitors		
ACIPHEX TBEC (<i>rabeprazole sodium</i>)	NP	QL(2 ea daily)
DEXILANT (<i>dexlansoprazole</i>)	NP	QL(1 ea daily)
<i>dexlansoprazole</i>	NP	QL(1 ea daily)
<i>esomeprazole magnesium CPDR</i>	NP	QL(1 ea daily); RX/OTC
<i>esomeprazole magnesium PACK</i>	NP	QL(1 ea daily); AL(Up to 10 yrs old)
<i>esomeprazole magnesium TBEC</i>	NP	QL(1 ea daily)
<i>lansoprazole CPDR</i>	NP	QL(1 ea daily); RX/OTC
<i>lansoprazole TBDD</i>	NP	QL(2 ea daily); RX/OTC

Drug Name	Drug Tier	Requirements/Limits
NEXIUM 24HR CLEAR MINIS CPDR (<i>esomeprazole magnesium</i>)	NP	QL(1 ea daily); RX/OTC
NEXIUM 24HR CPDR (<i>esomeprazole magnesium</i>)	NP	QL(1 ea daily); RX/OTC
NEXIUM CPDR (<i>esomeprazole magnesium</i>)	NP	QL(1 ea daily); RX/OTC
NEXIUM PACK (<i>esomeprazole magnesium</i>)	NP	QL(1 ea daily); AL(Up to 10 yrs old)
NEXIUM PACK	NP	QL(1 ea daily); AL(Up to 10 yrs old)
<i>omeprazole magnesium CPDR 20.6 MG</i>	NP	QL(1 ea daily)
<i>omeprazole magnesium TBEC</i>	P	QL(1 ea daily)
<i>omeprazole CPDR</i>	P	QL(1 ea daily)
<i>omeprazole TBDD</i>	NP	QL(1 ea daily)
<i>omeprazole TBEC</i>	NP	QL(1 ea daily)
<i>pantoprazole sodium PACK</i>	NP	QL(2 ea daily); AL(Up to 10 yrs old)
<i>pantoprazole sodium SOLR</i>	P	
<i>pantoprazole sodium TBEC</i>	P	QL(2 ea daily)
PREVACID 24HR CPDR (<i>lansoprazole</i>)	NP	QL(1 ea daily); RX/OTC
PREVACID SOLUTAB TBDD (<i>lansoprazole</i>)	NP	QL(2 ea daily); RX/OTC
PREVACID CPDR 30 MG (<i>lansoprazole</i>)	NP	QL(1 ea daily)
PRILOSEC OTC TBEC (<i>omeprazole magnesium</i>)	NP	QL(1 ea daily)
PRILOSEC PACK	NP	QL(1 ea daily); AL(Up to 10 yrs old)
PROTONIX PACK (<i>pantoprazole sodium</i>)	P	QL(2 ea daily); AL(Up to 10 yrs old)

Drug Name	Drug Tier	Requirements/Limits
PROTONIX TBEC (<i>pantoprazole sodium</i>)	NP	QL(2 ea daily)
<i>rabeprazole sodium TBEC</i>	NP	QL(2 ea daily)
VOQUEZNA	NP	
Ulcer Drugs - Prostaglandins		
<i>misoprostol</i>	P	
Ulcer Therapy Combinations		
<i>amoxicillin-clarithromycin w/ lansoprazole THPK</i>	NP	
<i>bismuth subcitrate potassium-metronidazole-tetracycline</i>	NP	
<i>famotidine-calcium carbonate-magnesium hydroxide</i>	NP	
KONVOMEK SUSR	NP	
OMECLAMOX-PAK	NP	
<i>omeprazole-sodium bicarbonate CAPS</i>	NP	RX/OTC
<i>omeprazole-sodium bicarbonate PACK</i>	NP	
PYLERA (<i>bismuth subcitrate potassium-metronidazole-tetracycline</i>)	P	
TALICIA	NP	
VOQUEZNA DUAL PAK	NP	
VOQUEZNA TRIPLE PAK	NP	
ZEGERID CAPS (<i>omeprazole-sodium bicarbonate</i>)	NP	RX/OTC
ZEGERID PACK (<i>omeprazole-sodium bicarbonate</i>)	NP	
URINARY ANTISPASMODICS - Drugs to Treat		
Miscellaneous Bladder Spasms		
Urinary Antispasmodic - Antimuscarinics (Anticholinergic)		
<i>darifenacin hydrobromide</i>	NP	

Drug Name	Drug Tier	Requirements/Limits
DETROL LA CP24 (<i>tolterodine tartrate</i>)	NP	
DETROL TABS (<i>tolterodine tartrate</i>)	NP	
<i>fesoterodine fumarate</i>	NP	
GELNIQUE GEL 10 %	NP	
<i>oxybutynin chloride SOLN</i>	P	
<i>oxybutynin chloride TABS 2.5 MG</i>	NP	
<i>oxybutynin chloride TABS 5 MG</i>	P	
<i>oxybutynin chloride TB24</i>	P	
<i>oxybutynin chloride TB24</i>	NP	
OXYTROL FOR WOMEN PTTW	NP	RX/OTC
OXYTROL PTTW	NP	RX/OTC
<i>solifenacin succinate TABS</i>	NP	
<i>solifenacin succinate TABS</i>	P	
<i>tolterodine tartrate CP24</i>	NP	
<i>tolterodine tartrate TABS</i>	NP	
TOVIAZ (<i>fesoterodine fumarate</i>)	NP	
<i>trospium chloride CP24</i>	NP	
<i>trospium chloride TABS</i>	NP	
VESICARE LS SUSP	NP	
VESICARE TABS (<i>solifenacin succinate</i>)	NP	
Urinary Antispasmodics - Beta-3 Adrenergic Agonists		
GEMTESA	NP	
<i>mirabegron TB24</i>	NP	
MYRBETRIQ SRER	NP	
MYRBETRIQ TB24 (<i>mirabegron</i>)	P	
Urinary Antispasmodics - Direct Muscle Relaxants		
<i>flavoxate hcl</i>	P	
VACCINES		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Bacterial Vaccines			AFLURIA QUADRIVALENT 2023-2024 SUSP	P	
ACTHIB SOLR IM	P		AFLURIA QUADRIVALENT 2023-2024 SUSY	P	
BEXSERO	P		AREXVY	P	
BIOTHRAX	P		COMIRNATY 2023-24 SUSP	P	
HIBERIX SOLR IJ	P		COMIRNATY 2023-24 SUSY	P	
MENACTRA	P		COMIRNATY SUSP	P	
MENQUADFI	P		DENGVAXIA	P	
MENVEO SOLN	P		ENGERIX-B SUSP 20 MCG/ML	P	3 max fill(s) per 999 day(s) retail
MENVEO SOLR	P		ENGERIX-B SUSY	P	3 max fill(s) per 999 day(s) retail
PEDVAX HIB SUSP	P		FLUAD QUADRIVALENT 2021-2022	P	
PNEUMOVAX 23	P		FLUAD QUADRIVALENT 2022-2023	P	
PNEUMOVAX 23/1 DOSE	P		FLUAD QUADRIVALENT 2023-2024	P	
PREVNAR 13	P		FLUARIX QUADRIVALENT 2021-2022 SUSY	P	
PREVNAR 20	P		FLUARIX QUADRIVALENT 2022-2023 SUSY	P	
TRUMENBA	P		FLUARIX QUADRIVALENT 2023-2024 SUSY	P	
TYPHIM VI SOLN	P		FLUBLOK QUADRIVALENT 2021-2022	P	
TYPHIM VI SOSY	P		FLUBLOK QUADRIVALENT 2022-2023	P	
VAXCHORA	P		FLUBLOK QUADRIVALENT 2023-2024	P	
VAXNEUVANCE	P				
VIVOTIF	P				
Viral Vaccines					
ABRYSVO	P	QL(1 ea per 365 day(s) retail); AL(At least 60 yrs old)			
ACAM2000	P				
AFLURIA QUADRIVALENT 2021-2022 SUSP	P				
AFLURIA QUADRIVALENT 2021-2022 SUSY	P				
AFLURIA QUADRIVALENT 2022-2023 SUSP	P				
AFLURIA QUADRIVALENT 2022-2023 SUSY	P				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
FLUCELVAX QUADRIVALENT 2021-2022 SUSP	P		FLUZONE QUADRIVALENT 2022-2023 SUSY	P	
FLUCELVAX QUADRIVALENT 2021-2022 SUSY	P		FLUZONE QUADRIVALENT 2023-2024 SUSP	P	
FLUCELVAX QUADRIVALENT 2022-2023 SUSP	P		FLUZONE QUADRIVALENT 2023-2024 SUSY	P	
FLUCELVAX QUADRIVALENT 2022-2023 SUSY	P		GARDASIL 9 SUSP	P	3 max fill(s) per 999 day(s) retail; AL(Up to 45 yrs old)
FLUCELVAX QUADRIVALENT 2023-2024 SUSP	P		GARDASIL 9 SUSY	P	3 max fill(s) per 999 day(s) retail; AL(Up to 45 yrs old)
FLUCELVAX QUADRIVALENT 2023-2024 SUSY	P		HAVRIX	P	
FLULAVAL QUADRIVALENT 2021-2022 SUSY	P		HEPLISAV-B SOSY	P	3 max fill(s) per 999 day(s) retail
FLULAVAL QUADRIVALENT 2022-2023 SUSY	P		IMOVAX RABIES (H.D.C.V.) SUSR	P	
FLULAVAL QUADRIVALENT 2023-2024 SUSY	P		IPOV INACTIVATED IPV	P	
FLUMIST QUADRIVALENT	P		IXCHIQ	P	QL(1 ea per fill retail)
FLUZONE HIGH-DOSE PF 2021-2022	P		IXIARO	P	
FLUZONE HIGH-DOSE PF 2022-2023	P		JANSSEN COVID-19 VACCINE	P	
FLUZONE HIGH-DOSE PF 2023-2024	P		JYNNEOS	P	QL(0.5 ml per fill retail)
FLUZONE QUADRIVALENT 2021-2022 SUSP	P		M-M-R II SOLR	P	
FLUZONE QUADRIVALENT 2021-2022 SUSY	P		MODERNA COVID-19 VACCINE,BIVALENT ORIGINAL AND OMICRON	P	
FLUZONE QUADRIVALENT 2022-2023 SUSP	P		MODERNA COVID-19 VACCINE/6MO-11Y/2023-24 SUSP	P	
			MODERNA COVID-19 VACCINE/BIVALENT/6M O-5Y	P	
			MODERNA COVID-19 VACCINE/BIVALENT/BA.4/BA.5	P	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MODERNA COVID-19 VACCINE6MO-5Y SUSP	P		RABAVERT	P	
MODERNA COVID-19 VACCINE SUSP	P		RECOMBIVAX HB SUSP	P	3 max fill(s) per 999 day(s) retail
NOVAVAX COVID-19 VACCINE	P		RECOMBIVAX HB SUSY	P	3 max fill(s) per 999 day(s) retail
NOVAVAX COVID-19 VACCINE/2023-24	P		ROTARIX SUSP	P	
PFIZER-BIONTECH COVID-19VACCINE/5-11Y/2023-24 SUSP	P		ROTARIX SUSR	P	
PFIZER-BIONTECH COVID-19VACCINE/5-11Y SUSP	P		ROTATEQ SOLN	P	
PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y/2023-24 SUSP	P		SHINGRIX	P	2 max fill(s) per 999 day(s) retail; AL(At least 50 yrs old)
PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y SUSP	P		SPIKEVAX COVID-19 VACCINE/2023-24 SUSP	P	
PFIZER-BIONTECH COVID-19VACCINE/ADULT RTU SUSP	P		SPIKEVAX COVID-19 VACCINE/2023-24 SUSY	P	
PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/5-11Y	P		SPIKEVAX COVID-19 VACCINE SUSP	P	
PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/6 M-4Y	P		STAMARIL SUSR	P	
PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/B A.4/BA.5	P		TWINRIX SUSY	P	
PFIZER-BIONTECH COVID-19VACCINE SUSP	P		VAQTA	P	
PREHEVBRIO	P	3 max fill(s) per 999 day(s) retail	VARIVAX INJ	P	2 max fill(s) per 999 day(s) retail
PRIORIX SUSR	P		YF-VAX INJ	P	
PROQUAD SUSR	P		VAGINAL AND RELATED PRODUCTS		
			Miscellaneous Vaginal Products		
			VAGISIL EX	P	
			Vaginal Anti-infectives		
			CLEOCIN CREA <i>(clindamycin phosphate vaginal)</i>	NP	
			CLEOCIN SUPP	P	
			<i>clindamycin phosphate vaginal CREA</i>	P	
			CLINDESSE	P	
			<i>clotrimazole vaginal CREA</i>	P	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
GYNAZOLE-1	P		Oil Soluble Vitamins		
<i>metronidazole vaginal</i>	P		<i>beta carotene CAPS 7500 MCG, 25000 UNIT</i>	P	
<i>miconazole nitrate vaginal CREA</i>	P		<i>cholecalciferol CAPS 10 MCG, 125 MCG, 400 UNIT, 5000 UNIT</i>	P	
<i>miconazole nitrate vaginal CREA</i>	P		<i>cholecalciferol LIQD OR 10 MCG/ML, 400 UNIT/ML</i>	P	
<i>miconazole nitrate vaginal KIT</i>	P		<i>cholecalciferol TABS 10 MCG, 400 UNIT</i>	P	
<i>miconazole nitrate vaginal SUPP</i>	P		<i>ergocalciferol CAPS</i>	P	
<i>miconazole nitrate vaginal SUPP</i>	P		<i>ergocalciferol SOLN OR</i>	P	
NUVESSA	P		<i>phytonadione TABS</i>	P	
<i>terconazole vaginal CREA</i>	P		VITAMIN A PALMITATE TABS	P	
<i>tioconazole vaginal 6.5 %</i>	P		<i>vitamin a CAPS 3000 MCG, 8000 UNIT, 10000 UNIT</i>	P	
VANDAZOLE	NP		VITAMIN D2 TABS 400 UNIT	P	
XACIATO GEL	NP		<i>vitamin e CAPS 45 MG, 90 MG, 100 UNIT, 180 MG, 200 UNIT, 268 MG, 400 UNIT, 450 MG, 1000 UNIT</i>	P	
Vaginal Estrogens			<i>vitamin e CAPS 90 MG, 180 MG, 450 MG</i>	NP	
<i>estradiol vaginal CREA</i>	P		VITAMIN E CAPS 200 UNIT	P	
<i>estradiol vaginal TABS</i>	P		<i>vitamin e SOLN</i>	P	
Vaginal Progestins			<i>vitamin e SOLN</i>	P	
CRINONE GEL	NP		Water Soluble Vitamins		
VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions			ACEROLA C 500 WAFR	P	
Anaphylaxis Therapy Agents			<i>ascorbic acid CHEW</i>	P	
AUVI-Q SOAJ	NP		<i>ascorbic acid CPCR</i>	P	
<i>epinephrine (anaphylaxis) SOAJ</i>	P		ASCORBIC ACID POWD OR	P	
<i>epinephrine (anaphylaxis) SOAJ</i>	NP		<i>ascorbic acid TABS</i>	P	
EPIPEN 2-PAK SOAJ (<i>epinephrine (anaphylaxis)</i>)	NP		<i>ascorbic acid TABS 1000 MG</i>	NP	
EPIPEN-JR 2-PAK SOAJ (<i>epinephrine (anaphylaxis)</i>)	NP				
SYMJEPI SOSY	NP				
VITAMINS					

Drug Name	Drug Tier	Requirements/ Limits
<i>ascorbic acid TBCR</i>	P	
B-6 TABS	P	
<i>biotin CAPS 5 MG, 5000 MCG</i>	P	
<i>biotin TABS 10 MG, 800 MCG, 10000 MCG</i>	P	
BIOTIN TABS 300 MCG	P	
<i>calcium ascorbate TABS</i>	P	
CYTO C POWD OR	P	
<i>niacinamide TABS</i>	P	
<i>niacin CPCR 250 MG</i>	P	
<i>niacin TABS</i>	P	
<i>niacin TBCR 500 MG, 750 MG</i>	NP	
<i>pyridoxine hcl TABS 25 MG, 50 MG, 100 MG, 250 MG</i>	P	
<i>riboflavin TABS 100 MG</i>	NP	
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ASSURE PRISM MULTI BLOODGLUCOSE MONITORING SYSTEM DEVI	94	AUGMENTIN SUSR 31.25 MG/5ML-125 MG/5ML	167	AUTOLET PLUS MISC	94
ASSURE PRISM MULTI TEST STRIPS STRP	76	AUGTYRO	38	AUTOPEN DEVI	115
ATACAND (candesartan cilexetil)	30	AUM ALCOHOL PREP PADS	113	AUVELITY	19
ATACAND HCT (candesartan cilexetil-hydrochlorothiazide)	30	AUM INSULIN SAFETY PEN NEEDLE/31GX5MM	114	AUVI-Q SOAJ	177
atazanavir sulfate CAPS	48	AUM MINI INSULIN PEN NEEDLE/32GX4MM	114	AVALIDE (irbesartan-hydrochlorothiazide)	30
ATELVIA TBEC (risedronate sodium)	82	AUM MINI INSULIN PEN NEEDLE/32GX6MM	114		
		AUM PEN NEEDLE/32GX4MM	114		
		AUM PEN NEEDLE/32GX6MM	114		

AVAPRO (irbesartan)	30	AZO TEST STRIPS STRP	76	BALCOLTRA (levonorgestrel-ethinyl estradiol-iron)	55
AVASTIN	35	AZOPT (brinzolamide)	165	balsalazide disodium CAPS	85
AVEED SOLN	11	AZOR 10 MG-20 MG, 10 MG-40 MG, 5 MG-20 MG (amlodipine besylate-olmesartan medoxomil)	30	BALVERSA	38
AVODART (dutasteride)	86	AZSTARYS	2	BANZEL SUSP (rufinamide)	17
AVONEX PEN AJKT	169	AZULFIDINE EN-TABS TBEC (sulfasalazine)	85	BANZEL TABS (rufinamide)	17
AVONEX PSKT	169	AZULFIDINE TABS (sulfasalazine) 85		BAQSIMI ONE PACK POWD	22
AVSOLA	85			BAQSIMI TWO PACK POWD	22
AYGESTIN TABS (norethindrone acetate)	168	b complex w/ c CAPS	148	BARIATRIC FUSION CHEW	150
AYR NASAL DROPS SOLN	161	b complex w/ c TABS	148	BARIATRIC MULTIVITAMINS/IRON CAPS	150
AYVAKIT 100 MG, 200 MG, 300 MG 37		b complex w/ iron TABS	148	BASADROX GEL	75
AYVAKIT 25 MG, 50 MG	37	B COMPLEX/FOLIC ACID TABS ..	89	BASAGLAR KWIKPEN SOPN	23
azacitidine SUSR	34	B-12 DOTS TBDP	88	BASAGLAR TEMPO PEN SOPN ..	23
AZADROX GEL	75	B-12 TABS 2000 MCG	88	BAVENCIO	35
AZASITE	163	B-6 TABS	178	BAXDELA TABS	84
azathioprine TABS 50 MG	147	bacitracin (ophthalmic)	163	b-complex vitamins CAPS	148
AZEDRA DOSIMETRIC	39	bacitracin (topical) OINT	66	b-complex vitamins TABS	148
AZEDRA THERAPEUTIC	39	bacitracin zinc OINT	66	b-complex vitamins TBCR	148
azelaic acid GEL	74	bacitracin-polymyxin b (ophth) ...	163	b-complex w/ c & calcium	148
azelastine hcl (ophth)	165	bacitracin-polymyxin b OINT	66	b-complex w/ c & e + zn	148
azelastine hcl 0.1 %, 137 MCG/SPRAY	161	bacitracin-poly-neomycin-hc	164	b-complex w/ c & folic acid CAPS 148	
azelastine hcl 0.15 %	161	baclofen SOLN OR 5 MG/5ML, 10 MG/5ML	160	b-complex w/ c & folic acid TABS 60 MG-300 MCG-1 MG-1.5 MG-20 MG-10 MG-10 MG-1.7 MG-6 MCG ...	148
azelastine hcl-fluticasone propionate SUSP	161	baclofen SUSP	160	b-complex w/ c & folic acid TABS 148	
AZESCO TABS	155	baclofen TABS 5 MG, 10 MG, 20 MG	160	b-complex w/ folic acid CAPS	148
AZILECT (rasagiline mesylate) ...	42	baclofen TABS	160	b-complex w/ folic acid TABS	148
azithromycin PACK	92	bacteriostatic sodium chloride ...	167	b-complex w/ minerals LIQD	148
azithromycin SUSR	92	BAFIERTAM	169	b-complex w/biotin & folic acid TABS 148	
azithromycin TABS	92	BALANCED B-50 TBCR	148		

b-complex w/biotin & folic acid TBCR 148	BD INSULIN SYRINGE ULTRAFINE/0.3ML/31G X 5/16" 115	12.7MM 116
BD LO-DOSE INSULIN SYRINGE MICROFINE IV/0.5ML/28G X 1/2" 115	BD INSULIN SYRINGE ULTRA- FINE/0.3ML/31G X 8MM .....115	BD INSULIN SYRINGE/1ML/29G X 12.7MM 116
BD AUTOSHIELD DUO 30G X 5MM.....115	BD INSULIN SYRINGE ULTRAFINE/0.5ML/30G X 1/2" ..115	BD INSULIN SYRINGE/U- 100/1ML/27G X 1/2" 116
BD INSULIN SYRINGE LUER- LOK/U-100/1ML .....115	B-D INSULIN SYRINGE ULTRAFINE/0.5ML/30G X 1/2" ..115	BD INSULIN SYRINGE/U- 500/0.5ML/31G X 6MM 116
BD INSULIN SYRINGE MICROFINE IV/U-100/0.5ML/28G X 1/2" .....115	BD INSULIN SYRINGE ULTRA- FINE/0.5ML/30G X 12.7MM 115	BD MICROTAINER LANCETS ... 94
BD INSULIN SYRINGE MICROFINE IV/U-100/1ML/27G X 5/8" .....115	BD INSULIN SYRINGE ULTRAFINE/0.5ML/31G X 5/16" 115	BD PEN MINI MISC 116
BD INSULIN SYRINGE MICROFINE IV/U-100/1ML/28G X 1/2" .....115	BD INSULIN SYRINGE ULTRA- FINE/0.5ML/31G X 8MM .....115	BD PEN MISC 116
BD INSULIN SYRINGE MICROFINE/U-100/1ML/27G X 5/8" 115	BD INSULIN SYRINGE ULTRA- FINE/1/2 UNIT/0.3ML/31G X 8MM 115	BD PEN NEEDLE/MICRO/ULTRA- FINE/32G X 6MM 116
BD INSULIN SYRINGE MICROFINE/U-100/1ML/28G X 1/2" 115	BD INSULIN SYRINGE ULTRA- FINE/1ML/30G X 12.7MM 116	BD PEN NEEDLE/MINI/ULTRA- FINE/31G X 5MM 116
BD INSULIN SYRINGE SAFETYGLIDE/1ML/29G X 1/2" .115	BD INSULIN SYRINGE ULTRAFINE/1ML/30G X 12.7MM 116	BD PEN NEEDLE/NANO 2ND GEN/32G X 4MM 116
BD INSULIN SYRINGE ULTRAFINE HALF-UNIT/0.3ML/31G X 5/16" .115	BD INSULIN SYRINGE ULTRA- FINE/1ML/31G X 8MM .....116	BD PEN NEEDLE/NANO 2ND GEN/32G X 5/32" 116
B-D INSULIN SYRINGE ULTRAFINE II/0.3ML/31G X 5/16" .....115	BD INSULIN SYRINGE ULTRAFINE/U-100/0.3ML/29G X 1/2" .....116	BD PEN NEEDLE/NANO/ULTRA- FINE/32G X 4MM 116
B-D INSULIN SYRINGE ULTRAFINE II/0.5ML/31G X 5/16" .....115	BD INSULIN SYRINGE ULTRAFINE/U-100/0.5ML/29G X 1/2" .....116	BD PEN NEEDLE/ORIGINAL/ULTRA- FINE/29G X 12.7MM .....116
B-D INSULIN SYRINGE ULTRAFINE II/1ML/31G X 5/16" .....115	BD INSULIN SYRINGE ULTRAFINE/U-100/1ML/31G X 5/16" .....116	BD PEN NEEDLE/SHORT/ULTRA- FINE/31G X 8MM 116
BD INSULIN SYRINGE ULTRAFINE/0.3ML/30G X 1/2" ..115	BD INSULIN SYRINGE/0.3ML/29G X 12.7MM 116	BD SAFETYGLIDE 1ML 27GX5/8" 116
B-D INSULIN SYRINGE ULTRAFINE/0.3ML/30G X 1/2" ..115	BD INSULIN SYRINGE/0.5ML/29G X 12.7MM 116	BD SAFETYGLIDE INSULIN SYRINGE/0.3ML/29G X 1/2" 116
BD INSULIN SYRINGE ULTRA- FINE/0.3ML/30G X 12.7MM 115	BD INSULIN SYRINGE/1ML/27G X	BD SAFETYGLIDE INSULIN SYRINGE/0.3ML/31G X 15/64" ..116
		BD SAFETYGLIDE INSULIN SYRINGE/0.3ML/31G X 5/16" ... 116
		BD SAFETYGLIDE INSULIN SYRINGE/0.5ML/29G X 1/2" 116

BD SAFETY-GLIDE INSULIN SYRINGE/0.5ML/29G X 1/2"	117	BENICAR 40 MG (olmesartan medoxomil)	30	BESPONSA	35
BD SAFETYGLIDE INSULIN SYSYRINGE/0.5ML/30G X 5/16" 117		BENICAR HCT 12.5 MG-20 MG, 12.5 MG-40 MG (olmesartan medoxomil-hydrochlorothiazide) ...	30	BETA CARE BETATAR GEL SHAM . 74	
BD SWABS SINGLE USE	113	BENZAMYCIN GEL (benzoyl peroxide-erythromycin)	64	beta carotene CAPS 7500 MCG, 25000 UNIT	177
BD VEO INSULIN SYRINGE ULTRA-FINE/0.3ML/31G X 6MM	117	BENZNIDAZOLE	12	BETADINE SOLN (povidone-iodine) . 48	
BD VEO INSULIN SYRINGE ULTRA-FINE/0.5ML/31G X 6MM	117	benzocaine (dental) GEL 20 % ...	147	betamethasone dipropionate (topical) CREA	69
BD VEO INSULIN SYRINGE ULTRA-FINE/1/2 UNIT/0.3ML/31G X 6MM 117		benzocaine (dental) LIQD 20 % ..	147	betamethasone dipropionate (topical) LOTN	69
BD VEO INSULIN SYRINGE ULTRA-FINE/1ML/31G X 6MM	117	benzocaine (dental) SOLN 20 % .	147	betamethasone dipropionate (topical) OINT	69
BD VEO INSULIN SYRINGE ULTRA-FINE/U-100/0.3ML/31G X 15/64" 117		benzocaine (topical) OINT	72	betamethasone dipropionate augmented CREA	69
BECONASE AQ	161	benzocaine-menthol (mouth-throat) LOZG 15 MG-3.6 MG	147	betamethasone dipropionate augmented GEL 0.05 %	69
BELBUCA FILM 75 MCG, 150 MCG, 300 MCG, 450 MCG, 600 MCG, 750 MCG	10	benzocaine-triclosan	72	betamethasone dipropionate augmented LOTN	69
BELBUCA FILM 900 MCG	10	benzoin compound TINC	73	betamethasone dipropionate augmented OINT	69
BELEODAQ	38	benzonatate	58	betamethasone valerate CREA ...	69
BELLADONNA/OPIUM 16.2 MG-60 MG	172	benzonatate 100 MG	58	betamethasone valerate FOAM ...	69
BELRAPZO SOLN	33	benzoyl peroxide FOAM 10 %	64	betamethasone valerate LOTN	69
BELSOMRA	90	benzoyl peroxide GEL 2.5 %, 5 %, 10 %	64	betamethasone valerate OINT	69
benazepril & hydrochlorothiazide .	30	benzoyl peroxide GEL 2.5 %	64	BETAPACE AF (sotalol hcl (afib/afll))	52
benazepril hcl	29	benzoyl peroxide LIQD 5 %, 10 % .	64	BETAPACE TABS 80 MG, 120 MG, 160 MG (sotalol hcl)	52
bendamustine hcl SOLR	33	benzoyl peroxide MISC 6 %	64	BETASAL SHAM	71
BENDAMUSTINE HYDROCHLORIDE SOLN	33	benzoyl peroxide-erythromycin GEL . 64		BETASERON KIT	169
BENDEKA SOLN	33	benzphetamine hcl 50 MG	2	betaxolol hcl (ophth) SOLN	162
BENEFIX KIT	87	benztropine mesylate TABS	41	betaxolol hcl	51
		bepotastine besilate	165	BETHKIS NEBU (tobramycin)	4
		BEPREVE (bepotastine besilate) 165			
		BERINERT KIT	87		
		BESIVANCE	163		

BETIMOL	162	bioflavonoid products TBCR	149	STRP	76
BETOPTIC-S SUSP	162	BIO-IMMUNEX CAPS	81	BLOOD GLUCOSE TEST STRIPS333 STRP	76
BEVESPI AEROSPHERE	15	BIOLYTE SOLN	145	BLULINK BLOOD GLUCOSE MONITORING SYSTEM DEVI	94
bexarotene (topical)	67	BION TEARS	162	BLULINK GLUCOSE TEST STRIPS STRP	76
bexarotene	40	BIOTEL CARE BLOOD GLUCOSE TEST STRIPS STRP	76	BONE DENSITY BUILDER TABS	146
BEXSERO	174	BIOTHRAX	174	BONEUP 3 PER DAY CAPS	150
BEYAZ (drospirenone-ethinyl estradiol-levomefolate calcium)	55	biotin CAPS 5 MG, 5000 MCG	178	BONEUP CAPS	150
BEYFORTUS	166	BIOTIN PLUS KERATIN TABS	159	BONJESTA TBCR	26
bicalutamide	36	biotin TABS 10 MG, 800 MCG, 10000 MCG	178	BOOSTNOW IMMUNE SUPPORT CAPS	150
BICILLIN C-R 300000 UNIT/2ML-900000 UNIT/2ML, 300000 UNIT/ML-300000 UNIT/ML	167	BIOTIN TABS 300 MCG	178	BORTEZOMIB SOLN	38
BICILLIN L-A SUSY	167	BIO-ZYME TABS	81	BORTEZOMIB SOLR IJ 1 MG, 2.5 MG	38
BICNU (carmustine)	33	bisacodyl SUPP	91	bortezomib SOLR IJ	38
BIDIL (isosorbide dinitrate-hydralazine hcl)	53	bisacodyl TBEC	91	bosentan TABS	54
BIJUVA 1 MG-100 MG	84	bismuth subcitrate potassium-metronidazole-tetracycline	173	BOSULIF CAPS	38
BIKTARVY	48	bismuth subsalicylate CHEW 262 MG	25	BOSULIF TABS	38
BILBERRY PLUS CAPS	159	bismuth subsalicylate SUSP 525 MG/30ML	25	BOTOX IJ	162
bimatoprost (topical)	71	bismuth subsalicylate TABS	25	BPROTECTED PEDIA POLY-VITE SOLN OR	155
bimatoprost SOLN	166	bisoprolol & hydrochlorothiazide	30	BRAFTOVI 75 MG	38
BIMZELX SOAJ	68	bisoprolol fumarate	51	BRAINSTRONG PRENATAL MISC	155
BIMZELX SOSY	68	bleomycin sulfate	37	BREATHERITE VALVED MDI CHAMBER/COLLAPSIBLE DEVI	141
BINAXNOW COVID-19 AG CARD HOME TEST KIT	76	BLINCYTO	35	BREATHERITE VALVED MDI CHAMBER/RIGID DEVI	141
BINOSTO TBEF	82	BLOOD GLUCOSE MONITORINGSYSTEM 333 DEVI	94	BREO ELLIPTA (fluticasone furoate-vilanterol)	15
BIO C 1:1 CAPS	149	BLOOD GLUCOSE MONITORINGSYSTEM KIT	94	BREO ELLIPTA	15
BIO-35 GLUTEN-FREE CAPS	150	BLOOD GLUCOSE TEST STRIPS PREMIUM STRP	76		
BIO-35 IRON FREE CAPS	150	BLOOD GLUCOSE TEST STRIPS			
BIOCAL CAPS	150				
bioflavonoid products TABS	149				

BREXAFEMME	26	budesonide TB24	57	butalbital-acetaminophen-caffeine SOLN	7
BREZTRI AEROSPHERE	15	budesonide-formoterol fumarate dihydrate	15	butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG	7
BRILINTA	88	bumetanide TABS	82	butalbital-acetaminophen-caffeine w/ codeine	10
brimonidine tartrate 0.1 %, 0.15 % 163		buprenorphine hcl SUBL	10	butalbital-aspirin-caffeine CAPS	7
brimonidine tartrate 0.2 %	163	buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 3 MG-12 MG	10	butalbital-aspirin-caffeine w/cod ...	10
brimonidine tartrate-timolol maleate . 162		buprenorphine hcl-naloxone hcl dihydrate FILM SL 2 MG-8 MG	10	butenafine hcl	66
brinzolamide	165	buprenorphine hcl-naloxone hcl dihydrate SUBL 0.5 MG-2 MG	10	butorphanol tartrate NA 10 MG/ML 10	
BRIUMVI	169	buprenorphine hcl-naloxone hcl dihydrate SUBL 2 MG-8 MG	10	BUTRANS PTWK (buprenorphine) 10	
BRIVIACT SOLN OR 10 MG/ML ..	17	buprenorphine hcl-naloxone hcl dihydrate SUBL 2 MG-8 MG	10	BYDUREON BCISE AUIJ	23
BRIVIACT TABS	17	buprenorphine PTWK	10	BYETTA SOPN	23
BRIXADI SOSY	10	bupropion hcl (smoking deterrent) 170		BYSTOLIC (nebivolol hcl)	51
bromfenac sodium (ophth)	165	bupropion hcl TABS	19	C	
bromocriptine mesylate CAPS	41	bupropion hcl TB12	19	1000/BIOFLAVONOIDS/ROSEHIPS CAPS	149
bromocriptine mesylate TABS 2.5 MG	41	bupropion hcl TB24 150 MG, 300 MG	19	CABENUVA	48
brompheniramine & phenyleph ELIX . 58		bupropion hcl TB24 450 MG	19	CABOMETYX TABS	38
brompheniramine & pseudoeph LIQD 15 MG/5ML-1 MG/5ML	58	BURIED TREASURE ACTIVE 55PLUS SENIOR COMPLEX LIQD 150		CABTREO	64
BROMSITE (bromfenac sodium (ophth))	165	BURN RELIEF/LIDOCAINE/ALOE 72		CADEAU DHA	155
BROVANA (arformoterol tartrate) .	15	buspirone hcl	12	CADUET 10 MG-10 MG, 10 MG-20 MG, 10 MG-40 MG, 10 MG-80 MG, 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG (amlodipine besylate-atorvastatin calcium)	53
BRUKINSA	38	busulfan SOLN	33	CAFERGOT TABS (ergotamine w/ caffeine)	143
BRYHALI LOTN	69	BUSULFEX SOLN (busulfan)	33	CAL MAG ZINC +D3 TABS	146
budesonide (inhalation) SUSP 0.25 MG/2ML, 0.5 MG/2ML	14	butalbital-acetaminophen TABS 50 MG-325 MG	7	CALAN SR TBCR 240 MG (verapamil hcl)	52
budesonide (inhalation) SUSP 1 MG/2ML	14	butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG	7	calcipotriene CREA	68
budesonide (intrarectal)	11				
budesonide (nasal)	161				
budesonide CPEP	57				

CALCIPOTRIENE FOAM	68	calcium carbonate-mag hydrox SUSP	11	CAMCEVI	36
calcipotriene OINT	68	calcium carbonate-simethicone CHEW 1000 MG-60 MG	11	camphor & menthol LOTN	67
calcipotriene SOLN	68	calcium carbonate-vitamin d TABS 125 UNIT-250 MG, 125 UNIT-600 MG, 250 MG-125 UNIT, 600 MG-200 UNIT	145	camphor (inhalant)	64
calcipotriene-betamethasone dipropionate OINT	69	CALCIUM CHEW 100 UNIT-500 MG 145		CAMPBOR SPIRIT	55
calcipotriene-betamethasone dipropionate SUSP	69	CALCIUM CITRATE + D3 TABS .	145	CAMPTOSAR (irinotecan hcl)	41
calcitonin (salmon) IJ	82	calcium citrate TABS 200 MG	145	CANASA SUPP (mesalamine)	85
calcitonin (salmon) NA	82	CALCIUM CITRATE TABS 250 MG 145		candesartan cilexetil	30
calcitriol (topical)	68	CALCIUM CITRATE+ D TABS ...	145	candesartan cilexetil-hydrochlorothiazide	30
calcitriol CAPS	83	calcium citrate-vitamin d TABS 200 UNIT-315 MG, 250 UNIT-315 MG, 5 MCG-315 MG, 6.25 MCG-315 MG 145		CAPCOF SYRP	58
calcitriol SOLN OR	83	CALCIUM GLUCONATE CAPS ..	145	capecitabine	34
CALCIUM 600+D HIGH POTENCY TABS	144	calcium polycarbophil TABS	90	CAPLYTA	42
CALCIUM 600+D3 PLUS MINERALS TABS	146	CALCIUM/C/D	145	CAPMIST DM TABS 400 MG-15 MG-60 MG	58
calcium acetate (phosphate binder) CAPS	86	CALCIUM/MAGNESIUM/ZINC TABS 200 UNIT-333 MG-133 MG-5 MG 146		CAPRELSA	38
calcium acetate (phosphate binder) TABS	86	CALCIUM/MAGNESIUM/ZINC/D3 TABS	146	CAPRON DM LIQD	58
CALCIUM ACETATE	144	CALCIUM/MAGNESIUM/ZINC/VITA MIN D3 TABS	146	CAPRON DMT TABS	58
calcium ascorbate TABS	178	calcium-magnesium-zinc	145	capsaicin CREA 0.025 %, 0.075 % 72	
calcium carbonate (antacid) CHEW 400 MG, 420 MG, 500 MG, 750 MG, 1000 MG	12	CAL-MAG-ZINC-D TABS	146	captopril & hydrochlorothiazide ...	30
calcium carbonate (antacid) CHEW 750 MG	12	CAL-MAG-ZINC-D3 TABS	146	captopril	29
calcium carbonate (antacid) SUSP 12		CALQUENCE	38	carbamazepine CHEW	17
CALCIUM CARBONATE CHEW 500 MG	144	CALTRATE 600+D3 SOFT CHEWS CHEW	145	carbamazepine CP12	17
calcium carbonate TABS 500 MG, 600 MG, 1250 MG, 1500 MG	145			carbamazepine SUSP	17
calcium carbonate-cholecalciferol TABS	144			carbamazepine TABS	17
				carbamazepine TB12	17
				carbamide peroxide (otic) 6.5 % ..	166
				CARBATROL CP12 (carbamazepine)	17
				carbidopa	41
				carbidopa-levodopa TABS	41

carbidopa-levodopa TBCR	41	CAREONE BLOOD GLUCOSE MONITORING SYSTEM/PREMIUM KIT	94	CARESENS LANCETS	94
carbidopa-levodopa TBDP	41	CAREONE BLOOD GLUCOSE MONITORING SYSTEM/VALUE KIT 94		CARESENS N BLOOD GLUCOSETEST STRIPS STRP ...	76
carbidopa-levodopa-entacapone ..	41	CAREONE BLOOD GLUCOSE MONITORING SYSTEM/VALUE KIT 94		CARESENS N FELIZ BT DEVI	94
carbonyl iron SUSP	89	CAREONE BLOOD GLUCOSE TEST STRIPS/PREMIUM STRP ..	76	CARESENS N FELIZ DEVI	94
carbonyl iron TABS	89	CAREONE BLOOD GLUCOSE TEST STRIPS/VALUE STRP	76	CARESENS N GLUCOSE MONITORING SYSTEM DEVI	94
carboplatin SOLN 50 MG/5ML, 150 MG/15ML, 450 MG/45ML, 600 MG/60ML, 1000 MG/100ML	33	CAREONE BLOOD GLUCOSE TEST STRIPS/VALUE STRP	76	CARESENS N VOICE BLOOD GLUCOSE MONITORING SYSTEM DEVI	94
carboplatin SOLN 50 MG/5ML, 450 MG/45ML	33	CAREONE INSULIN SYRINGES/0.3ML/30G X 1/2" ...	117	CARESTART COVID-19 ANTIGEN HOME TEST KIT	76
carboxymethylcellulose sodium (ophth) GEL	162	CAREONE INSULIN SYRINGES/0.3ML/31G X 5/16" .	117	CARETOUCH ALCOHOL PREP PADS	113
carboxymethylcellulose sodium (ophth) SOLN 0.25 %, 0.5 %	162	CAREONE INSULIN SYRINGES/0.5ML/30G X 1/2" ...	117	CARETOUCH BLOOD GLUCOSE TEST STRIPS STRP	76
CARDIO COMPLETE CAPS	81	CAREONE INSULIN SYRINGES/0.5ML/31G X 5/16" .	117	CARETOUCH INSULIN SYRINGE/0.3ML/31GX5/16"	117
CARDIOCOM LANCING DEVICE MISC	94	CAREONE INSULIN SYRINGES/1ML/30G X 1/2"	117	CARETOUCH INSULIN SYRINGE/0.5ML/31GX5/16"	117
CARDIOPRESS CAPS	159	CAREONE INSULIN SYRINGES/1ML/31GX5/16"	117	CARETOUCH INSULIN SYRINGE/1ML/31GX5/16"	117
CARDIZEM CD CP24 (diltiazem hcl coated beads)	52	CAREONE LANCET SUPER THIN/30G	94	CARETOUCH INSULIN SYRINGE0.5ML/30GX5/16"	117
CARDIZEM LA TB24 (diltiazem hcl) 52		CAREONE LANCET THIN	94	CARETOUCH LANCING DEVICewith EJECTOR MISC ...	94
CARDIZEM TABS 30 MG, 60 MG, 120 MG (diltiazem hcl)	52	CAREONE UNIFINE PENTIPS 31GX5MM	117	CARETOUCH PEN NEEDLES 31GX 5MM	117
CARDURA (doxazosin mesylate) .	30	CAREONE UNIFINE PENTIPS 31GX8MM	117	CARETOUCH PEN NEEDLES 31GX 8MM	117
CARDURA XL	86	CAREONE UNIFINE PENTIPS PLUS PEN NEEDLES 31GX5MM	117	CARETOUCH PEN NEEDLES 32GX 4MM	117
CAREFINE PEN NEEDLE 32GX4MM	117	CAREONE UNIFINE PENTIPS PLUS PEN NEEDLES 31GX8MM	117	CARETOUCH SAFETY LANCETS/26G	94
CAREFINE PEN NEEDLES 31GX8MM	117	CAREONE UNIFINE PENTIPS PLUS PEN NEEDLES 32GX4MM	117	CARETOUCH SAFETY LANCETS/28G	94
CAREFINE PEN NEEDLES 32GX6MM	117				
CAREONE ADVANCED LANCINGDEVICE MISC	94				

CARETOUCH SAFETY LANCETS/30G	94	cefdinir CAPS	54	CHEW	150
CARETOUCH TWIST LANCETS 28G	94	cefdinir SUSR	54	CELEBREX (celecoxib)	6
CARETOUCH TWIST LANCETS 30G	94	cefepime hcl SOLR IJ 1 GM	55	celecoxib	6
CARETOUCH TWIST LANCETS 33G	95	CEFEPIME SOLN	55	CELEXA TABS (citalopram hydrobromide)	20
CARETOUCH TWIST LANCETS MULTI COLOR/30G	95	cefixime CAPS	54	CELONTIN (methsuximide)	19
carisoprodol TABS	160	cefixime SUSR	55	CENTANY AT KIT	66
carisoprodol w/ aspirin & codeine 161		cefotetan disodium IJ 1 GM, 2 GM	54	CENTANY OINT	66
carmustine	33	cefoxitin sodium IV	54	CENTRUM ADULT MULTIGUMMIES CHEW	150
CARMUSTINE	33	cefpodoxime proxetil SUSR	55	CENTRUM ADULTS 50+ MULTIGUMMIES CHEW	150
CAROSPIR SUSP (spironolactone) 82		cefpodoxime proxetil TABS	55	CENTRUM FLAVOR BURST ADULT CHEW	150
carteolol hcl (ophth)	163	cefprozil SUSR	54	CENTRUM FLAVOR BURST CHEW 150	
carvedilol	51	cefprozil TABS	54	CENTRUM FRESH/FRUITY ADULTS 50+ CHEW	150
carvedilol phosphate	51	ceftazidime IJ 1 GM, 6 GM	55	CENTRUM FRESH/FRUITY ADULTS CHEW	150
CARVYKTI	36	ceftriaxone sodium IJ 1 GM, 2 GM, 250 MG, 500 MG	55	CENTRUM MULTIGUMMIES MULTI +OMEGA 3 CHEW	150
CASODEX (bicalutamide)	36	ceftriaxone sodium in dextrose	55	CENTRUM PERFORMANCE TABS . 159	
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CAYSTON	32	cefuroxime sodium IJ 750 MG	54	CENTRUM SPECIALIST ENERGY TABS	159
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cefadroxil SUSR	54	CELEBRATE MULTI-COMPLETE45 CAPS	150	cephalexin TABS	54
cefadroxil TABS	54	CELEBRATE MULTI-COMPLETE45 CHEW	150	CEQUA SOLN	164
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		CELEBRATE MULTI-COMPLETE60			

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CORTISPORIN-TC	166	CURITY ALCOHOL PREPS/MEDIUM 2 PLY	113	CVS EYE HEALTH ADULT 50+ CAPS	150
COSELA	40	CUTTER AERO	73	CVS GLUCOSE CHEW	22
COSENTYX SENSOREADY PEN SOAJ	68	CUTTER ALL FAMILY AERO	73	CVS GLUCOSE METER TEST STRIPS STRP	77
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COSENTYX UNOREADY SOAJ ..	68	CUTTER BACKWOODS DRY AERO	73	CVS IMMUNE SUPPORT CAPS .	150
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CULTURELLE PROBIOTICS +					

CVS PRENATAL GUMMY/DHA/FOLIC ACID	156	cyanocobalamin-methylcobalamin SUBL	89	cyproheptadine hcl SYRP	28
CVS PRENATAL MULTI+DHA CAPS	156	cyclobenzaprine hcl CP24	160	cyproheptadine hcl TABS	28
CVS PRENATAL TABS 100 MG-2.6 MG-800 MCG-400 UNIT-4 MCG-1.7 MG-18 MG-27 MG-1.5 MG-25 MG- 263 MG-11 UNIT-4000 UNIT	156	cyclobenzaprine hcl TABS 5 MG, 10 MG	160	CYRAMZA	35
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		CYLTEZO STARTER PACKAGE FOR CROHNS DISEASE/UC/HS AJKT	5	DANTRIUM CAPS 25 MG (dantrolene sodium)	161
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darunavir TABS	48	DELSYM NIGHTTIME COUGH MAXIMUM STRENGTH SOLN	59	DERMAREST PSORIASIS MEDICATED SHAMPOO PLUS CONDITIONER SHAM	72
DARZALEX	35	DELSYM SUER (dextromethorphan polistirex)	58	DERMA-SMOOTH/FS BODY OIL (fluocinolone acetonide)	69
DARZALEX FASPRO	37	DELSYM TABS	58	DERMA-SMOOTH/FS SCALP OIL (fluocinolone acetonide)	69
daunorubicin hcl SOLN	37	DELZICOL CPDR (mesalamine) ..	85	DERMAZINC CREAM CREA	68
DAUNORUBICIN HYDROCHLORIDE SOLN (daunorubicin hcl)	37	demeclocycline hcl TABS	170	DERMAZINC SPRAY LIQD	68
DAUNORUBICIN HYDROCHLORIDE SOLN	37	DENAVIR (penciclovir)	68	DERMAZINC ZINC THERAPY SOAP BAR	68
DAURISMO	36	DENG VAXIA	174	DERPIXA GEL	75
DAVIMET/FLUORIDE CHEW	154	DENOREX EXTRA STRENGTH MEDICATED SHAM	72	DESCOVY	48
DAYPRO TABS (oxaprozin)	6	DEPAKOTE ER TB24 (divalproex sodium)	19	desflurane	86
DAYTRANA PTCH (methylphenidate)	2	DEPAKOTE SPRINKLES CSDR (divalproex sodium)	19	desipramine hcl TABS	21
DAYVIGO	90	DEPAKOTE TBEC (divalproex sodium)	19	desloratadine TABS	27
decitabine	34	DEPO-MEDROL SUSP	57	desloratadine TBDP	27
DECONEX DMX TABS 10 MG-400 MG-17.5 MG	59	DEPO-PROVERA CONTRACEPTIVE SUSP IM (medroxyprogesterone acetate (contraceptive))	56	desmopressin acetate SOLN IJ ...	83
DECONEX IR TABS	59	DEPO-PROVERA CONTRACEPTIVE SUSY IM (medroxyprogesterone acetate (contraceptive))	56	desmopressin acetate spray	83
DECUBI-VITE CAPS	151	DEPO-SUBQ PROVERA 104 SUSY		desmopressin acetate spray refrigerated	83
deflazacort TABS	57			desmopressin acetate TABS	84
DEKAS BARIATRIC CHEW	151			desogestrel & ethinyl estradiol	55
DEKAS ESSENTIAL CAPS	154			desogestrel-ethinyl estradiol (biphasic)	55
DEKAS ESSENTIAL LIQD	154			desogestrel-ethinyl estradiol (triphasic)	55
DEKAS PLUS CAPS	151				
DEKAS PLUS CHEW	151				
DEKAS PLUS OCEAN CAPS	151				
DELSTRIGO	48				

desonide CREA	69	DEXCOM G6 TRANSMITTER	96	.....	59
desonide LOTN	69	DEXCOM G7 RECEIVER	96	dextromethorphan-guaifenesin LIQD	
desonide OINT	69	DEXCOM G7 SENSOR	96	100 MG/5ML-10 MG/5ML, 100	
desoximetasone CREA	69	DEXEDRINE CP24 10 MG, 15 MG		MG/5ML-5 MG/5ML, 200 MG/10ML-	
desoximetasone GEL	69	(dextroamphetamine sulfate)	1	20 MG/10ML, 200 MG/20ML-20	
desoximetasone LIQD	69	DEXILANT (dexlansoprazole) ...	172	MG/20ML, 400 MG/20ML-20	
desoximetasone OINT	69	dexlansoprazole	172	MG/20ML	59
DESVENLAFAXINE ER	20	dexmethylphenidate hcl CP24	2	dextromethorphan-guaifenesin LIQD	
desvenlafaxine succinate	20	dexmethylphenidate hcl TABS 2.5		100 MG/5ML-5 MG/5ML, 200	
DETROL LA CP24 (tolterodine		MG, 10 MG	3	MG/20ML-20 MG/20ML, 400	
tartrate)	173	dexmethylphenidate hcl TABS 5 MG		MG/20ML-20 MG/20ML	59
DETROL TABS (tolterodine tartrate)		2		dextromethorphan-guaifenesin SYRP	
173		dexrazoxane hcl	40	100 MG/5ML-10 MG/5ML, 200	
DEX4	22	DEXTENZA INST	164	MG/10ML-20 MG/10ML	59
DEX4 FAST ACTING GLUCOSE	22	dextran 70-hypromellose 0.3 %-0.1		dextromethorphan-guaifenesin TABS	
DEX4 NATURALS	22	%	162	400 MG-20 MG	59
DEX4 POUCH PACK	22	dextroamphetamine sulfate CP24 ...	1	dextromethorphan-guaifenesin TB12	
DEX4 QUICK DISSOLVE GLUCOSE		dextroamphetamine sulfate SOLN ..	1	1200 MG-60 MG, 600 MG-30 MG	.59
CHEW	22	dextroamphetamine sulfate TABS 2.5		dextromethorphan-phenylephrine-	
dexamethasone ELIX	57	MG, 5 MG, 7.5 MG, 10 MG, 15 MG,		acetaminophen CAPS	59
DEXAMETHASONE INTENSOL		20 MG	1	dextromethorphan-phenylephrine-	
CONC	57	dextroamphetamine sulfate TABS 30		acetaminophen LIQD	59
dexamethasone sodium phosphate		MG	1	dextromethorphan-phenylephrine-	
(ophth)	164	dextromethorphan hbr CAPS	58	acetaminophen TABS 5 MG-325 MG-	
dexamethasone SOLN	57	dextromethorphan polistirex SUER		10 MG	59
dexamethasone TABS	57	58		dextrose (diabetic use) GEL	22
dexamethasone TBPK	57	dextromethorphan-acetaminophen-		DEXYCU SUSP IO	164
DEXATRAN CAPS	151	chlorpheniramine TABS 325 MG-2		DHIVY TABS	41
dexbrompheniramine-phenylephrine		MG-10 MG	59	DHS SAL SHAM	72
TABS	59	dextromethorphan-doxylamine-		DHS TAR GEL SHAM (coal tar	
DEXCOM G6 RECEIVER	96	acetaminophen CAPS	59	extract)	75
DEXCOM G6 SENSOR	96	dextromethorphan-doxylamine-		DHS TAR SHAM (coal tar extract)	.75
		acetaminophen LIQD	59	DIABETES HEALTH PACK MISC	
		dextromethorphan-guaifenesin CAPS		151	
				DIACOMIT CAPS	17

DIACOMIT PACK	17	diclofenac potassium TABS	6	NA 4 MG/ML	143
DIASTAT ACUDIAL GEL (diazepam (anticonvulsant))	16	diclofenac sodium (actinic keratoses) EX	67	DILANTIN (phenytoin sodium extended)	19
DIASTAT PEDIATRIC GEL (diazepam (anticonvulsant))	16	diclofenac sodium (ophth)	165	DILANTIN	19
DIATHRIVE LANCETS	96	diclofenac sodium (topical) GEL EX 67		DILANTIN INFATABS CHEW (phenytoin)	19
DIATHRIVE LANCETS ULTRA THIN 30G	96	diclofenac sodium (topical) SOLN EX 1.5 %	67	DILANTIN-125 SUSP (phenytoin) .	19
DIATHRIVE LANCING DEVICE MISC	96	diclofenac sodium (topical) SOLN EX	67	DILAUDID LIQD (hydromorphone hcl)	8
DIATHRIVE PEN NEEDLE/31 GX 8MM	119	diclofenac sodium TB24	6	DILAUDID TABS (hydromorphone hcl)	8
DIATHRIVE PEN NEEDLE/31GX 5MM	119	diclofenac sodium TBEC	6	diltiazem hcl coated beads CP24 .	52
DIATHRIVE PEN NEEDLE/32GX 4MM	119	diclofenac w/ misoprostol TBEC	6	diltiazem hcl CP12	52
DIATRUE PLUS BLOOD GLUCOSE MONITORING SYSTEM DEVI	96	dicloxacillin sodium	167	diltiazem hcl CP24	52
DIATRUE PLUS BLOOD GLUCOSE TEST STRIPS STRP	77	dicyclomine hcl CAPS	172	diltiazem hcl extended release beads	52
diazepam (anticonvulsant) GEL ...	17	dicyclomine hcl SOLN OR	172	DILTIAZEM HCL SOLR	52
diazepam CONC	13	dicyclomine hcl TABS	172	diltiazem hcl TABS	52
diazepam SOLN IJ 5 MG/ML	13	diethylpropion hcl TABS	2	diltiazem hcl TB24	52
diazepam SOLN OR 5 MG/5ML ...	13	diethylpropion hcl TB24	2	dimenhydrinate TABS	26
diazepam TABS	13	DIFICID SUSR	92	dimethyl fumarate CDPK	169
dibucaine (rectal) EX	11	DIFICID TABS	92	dimethyl fumarate CPDR	169
dibucaine	72	diflorasone diacetate CREA	69	DIOVAN HCT (valsartan- hydrochlorothiazide)	30
dichlorphenamide	82	diflorasone diacetate OINT	69	DIOVAN TABS (valsartan)	30
DICLEGIS TBEC (doxylamine- pyridoxine)	26	DIFLUCAN SUSR (fluconazole) ...	27	DIPENTUM	85
diclofenac epolamine PTCH EX ...	67	DIFLUCAN TABS 100 MG, 200 MG (fluconazole)	27	diphenhydramine hcl (sleep) CAPS 50 MG	89
diclofenac potassium (migraine) .	144	difluprednate	164	diphenhydramine hcl (sleep) TABS 25 MG	89
diclofenac potassium CAPS	6	DIGESTIVE ENZYMES TABS	81	diphenhydramine hcl CAPS	27
		digoxin SOLN OR 0.05 MG/ML ...	53	diphenhydramine hcl CHEW 12.5 MG	27
		digoxin TABS 0.125 MG, 0.25 MG, 125 MCG, 250 MCG	53		
		dihydroergotamine mesylate SOLN			

diphenhydramine hcl ELIX 12.5 MG/5ML	27	MG/4ML, 160 MG/8ML	40	doxepin hcl CAPS 10 MG, 25 MG, 50 MG, 75 MG, 100 MG	21
diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML	27	DOCETAXEL SOLN (docetaxel) ..	40	doxepin hcl CAPS	21
diphenhydramine hcl SOLN 50 MG/ML	27	DOCETAXEL SOLN 20 MG/2ML, 80 MG/8ML, 160 MG/16ML	40	doxepin hcl CONC	21
diphenhydramine hcl TABS 25 MG 27		docetaxel SOLN	40	DOXIL (doxorubicin hcl liposomal) 37	
diphenhydramine-acetaminophen (sleep) TABS 500 MG-25 MG	89	DOCIVYX SOLN	40	doxorubicin hcl liposomal	37
diphenhydramine-phenylephrine- acetaminophen LIQD 5 MG/10ML- 325 MG/10ML-12.5 MG/10ML	59	docosanol	68	doxorubicin hcl SOLN	37
diphenhydramine-phenylephrine- acetaminophen PACK	59	docusate calcium	92	doxorubicin hcl SOLR 10 MG, 50 MG	37
diphenhydramine-phenylephrine- acetaminophen TABS 5 MG-325 MG- 12.5 MG	59	docusate sodium CAPS 100 MG ..	92	doxycycline (monohydrate) CAPS 50 MG, 100 MG	171
diphenoxylate w/ atropine LIQD ...	25	docusate sodium CAPS	92	doxycycline (monohydrate) CAPS 75 MG, 150 MG	171
diphenoxylate w/ atropine TABS ...	25	docusate sodium ENEM 283 MG/5ML	92	doxycycline (monohydrate) SUSR 171	
DIPROLENE OINT (betamethasone dipropionate augmented)	69	docusate sodium LIQD	92	doxycycline (monohydrate) TABS 171	
dipyridamole	88	docusate sodium SYRP	92	doxycycline (rosacea)	74
disopyramide phosphate CAPS ...	13	docusate sodium TABS	92	doxycycline hyclate CAPS	171
disulfiram	168	dofetilide	13	doxycycline hyclate TABS 20 MG, 100 MG, 150 MG	171
DIURIL SUSP	82	donepezil hydrochloride TABS 23 MG	168	doxycycline hyclate TABS 50 MG, 75 MG, 100 MG, 150 MG	171
divalproex sodium CSDR	19	donepezil hydrochloride TABS 5 MG, 10 MG	168	doxycycline hyclate TBEC	171
divalproex sodium TB24	19	donepezil hydrochloride TBDP ...	168	doxylamine-dm LIQD 15 MG/15ML- 6.25 MG/15ML	60
divalproex sodium TBEC	19	DORAL (quazepam)	89	doxylamine-phenylephrine	60
DOCETAXEL CONC 20 MG/ML, 80 MG/4ML, 160 MG/8ML (docetaxel) 40		DORYX MPC TBEC	171	doxylamine-pyridoxine TBEC	26
docetaxel CONC 20 MG/ML, 80 MG/4ML, 160 MG/8ML	40	DORYX TBEC 80 MG, 200 MG (doxycycline hyclate)	171	DR TEALS SHEA ENRICHED FOOT CREA	74
DOCETAXEL CONC 20 MG/ML, 80		dorzolamide hcl	165	DRAMAMINE CHEW	26
Index 27		dorzolamide hcl-timolol maleate .	163	DRIZALMA SPRINKLE CSDR	20
		DOVATO	48	dronabinol CAPS	26
		DOVATO	49		
		doxazosin mesylate	30		
		doxepin hcl (antipruritic)	67		
		doxepin hcl (sleep)	89		

droperidol SOLN 2.5 MG/ML	12	100/1ML/31G X 5/16"	119	SYRINGE/FIXED NEEDLE 31GX8MM 0.5ML	120
DROPLET GENTEEL LANCING DEVICE MISC	96	DROPLET LANCETS ULTRA THIN 30G	96	DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX8MM 1ML	120
DROPLET INSULIN SYRINGE 0.3ML/29G X 1/2"	119	DROPLET LANCING DEVICE MISC . 96		DROPSAFE SAFETY PEN NEEDLE/31GX5MM	120
DROPLET INSULIN SYRINGE 0.5ML/29G X 1/2"	119	DROPLET PEN NEEDLE/MICRON/34G X 9/64" .	119	DROPSAFE SAFETY PEN NEEDLES/31G X 5/16"	120
DROPLET INSULIN SYRINGE 1ML/29G X 1/2"	119	DROPLET PEN NEEDLES 31G X3/16"	119	drospirenone-ethinyl estradiol	55
DROPLET INSULIN SYRINGE U- 100/0.3/31G X 5/16"	119	DROPLET PEN NEEDLES 31G X5/16"	119	drospirenone-ethinyl estradiol- levomefolate calcium	55
DROPLET INSULIN SYRINGE U- 100/0.3ML/30G X 1/2"	119	DROPLET PEN NEEDLES 31GX5MM	119	DROXIA CAPS	88
DROPLET INSULIN SYRINGE U- 100/0.3ML/31G X 15/64"	119	DROPLET PEN NEEDLES 31GX8MM	119	DRUG MART ADJUSTABLE LANCING DEVICE MISC	96
DROPLET INSULIN SYRINGE U- 100/0.5ML/30G X 1/2"	119	DROPLET PEN NEEDLES 32G X 1/4"	119	DRUG MART LANCETS THIN	96
DROPLET INSULIN SYRINGE U- 100/0.5ML/30G X 5/16"	119	DROPLET PEN NEEDLES 32G X 5/32"	119	DRUG MART ON-THE-GO LANCETS GENTLE 30G	96
DROPLET INSULIN SYRINGE U- 100/0.5ML/31G X 5/16"	119	DROPLET PEN NEEDLES 32GX4MM	119	DRUG MART UNIFINE PENTIPS 31GX5MM	120
DROPLET INSULIN SYRINGE U- 100/1ML/30G X 1/2"	119	DROPLET PEN NEEDLES 32GX6MM	120	DRUG MART UNIFINE PENTIPS31GX8MM	120
DROPLET INSULIN SYRINGE U- 100/1ML/31G X 5/16"	119	DROPLET PERSONAL LANCETS30G	96	DRUG MART UNIFINE PENTIPS32GX4MM	120
DROPLET INSULIN SYRINGE/U- 100/0.3ML/31G X 15/64"	119	DROPSAFE ALCOHOL PREP PADS	113	DRUG MART UNIFINE PENTIPSPLUS 32GX4MM	120
DROPLET INSULIN SYRINGE/U- 100/0.3ML/31G X 5/16"	119	DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 29GX12.5MM 1ML	120	DRUG MART UNILET LANCETSSUPER THIN 30G	96
DROPLET INSULIN SYRINGE/U- 100/0.5ML/30G X 1/2"	119	DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX6MM 0.3ML	120	DRUG MART UNILET LANCETSULTRA THIN 28G	97
DROPLET INSULIN SYRINGE/U- 100/0.5ML/31G X 5/16"	119	DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX8MM 0.3ML	120	DRUG MART UNILET MICRO THIN LANCETS 33G	97
DROPLET INSULIN SYRINGE/U- 100/1ML/30G X 1/2"	119	DROPSAFE INSULIN SAFETY		DRYSOL SOLN	73
DROPLET INSULIN SYRINGE/U-		DROPSAFE INSULIN SAFETY		DSUVIA SUBL	8
		DROPSAFE INSULIN SAFETY		DUAKLIR PRESSAIR	15

DUETACT (pioglitazone hcl-glimepiride)	21	EASY COMFORT INSULIN SYRINGE/0.5ML/30G X 5/16" ...	120	EASY FLOW BLACK/WHITE DEVI	142
DUEXIS (ibuprofen-famotidine)	6	EASY COMFORT INSULIN SYRINGE/0.5ML/31G X 5/16" ...	120	EASY FLOW BLACK/YELLOW DEVI	142
DULERA	15	EASY COMFORT INSULIN SYRINGE/1ML/31G X 5/16"	120	EASY FLOW WHITE/BLUE DEVI	142
duloxetine hcl CPEP 20 MG, 30 MG, 60 MG	20	EASY COMFORT INSULIN SYRINGE/U-100/0.5ML/30G X 1/2" .	120	EASY FLOW WHITE/GREEN DEVI	142
duloxetine hcl CPEP 40 MG	21	120		EASY FLOW WHITE/PINK DEVI	142
DUOBRII	69	EASY COMFORT INSULIN SYRINGE/U-100/1ML/30G X 1/2"	120	EASY FLOW WHITE/WHITE DEVI	142
DUOPA SUSP	41	EASY COMFORT LANCETS	97	EASY FLOW WHITE/YELLOW DEVI	142
DUPIXENT SOPN	71	EASY COMFORT LANCETS 30G/PULL TOP	97	EASY MINI EJECT LANCING DEVICE MISC	97
DUPIXENT SOSY	71	EASY COMFORT LANCETS 30G/THIN TOP	97	EASY MINI LANCING DEVICE MISC	97
DURAFLU TABS 200 MG-325 MG-20 MG-60 MG	60	EASY COMFORT LANCETS TWIST TOP	97	EASY PLUS II BLOOD GLUCOSE MONITORING SYSTEM DEVI	97
DUREZOL (difluprednate)	164	EASY COMFORT PEN NEEDLES31GX3/16"	120	EASY PLUS II BLOOD GLUCOSE TEST STRP	77
dutasteride	86	EASY COMFORT PEN NEEDLES31GX5/16"	120	EASY STEP BLOOD GLUCOSE MONITOR DEVI	97
dutasteride-tamsulosin hcl	86	EASY COMFORT PEN NEEDLES32GX5/32"	120	EASY STEP TEST STRIPS STRP	77
DYANAVAL XR CHER	1	EASY COMFORT SAFETY PEN NEEDLES 31GX5MM	120	EASY TALK BLOOD GLUCOSE MONITORING SYSTEM/TALKING DEVI	97
DYANAVAL XR SUER	1	EASY COMFORT SAFETY PEN NEEDLES 31GX6MM	120	EASY TALK BLOOD GLUCOSE TEST STRIPS STRP	77
DYMISTA SUSP (azelastine hcl-fluticasone propionate)	161	EASY COMFORT SAFETY PEN NEEDLES 32GX4MM	120	EASY TALK PLUS II BLOOD GLUCOSE TEST STRIPS STRP ..	77
DYNAGEL GEL	75	EASY FLOW BLACK/BLUE DEVI	142	EASY TOUCH 32GX6MM	120
E.E.S. GRANULES SUSR (erythromycin ethylsuccinate)	92	EASY FLOW BLACK/ORANGE DEVI	142	EASY TOUCH ALCOHOL PREP PADS/MEDIUM	113
E-400/SELENIUM CAPS	160	EASY FLOW BLACK/RED DEVI	142	EASY TOUCH FLIPLOCK SAFETY INSULIN SYRINGE 1ML/29GX1/2"	
EASIVENT MISC	142				
EASIVENT/MASK-LARGE MISC	142				
EASIVENT/MASK-MEDIUM MISC	142				
EASIVENT/MASK-SMALL MISC	142				
EASY COMFORT ALCOHOL PADS	113				
EASY COMFORT INSULIN SYRINGE/0.3ML/31G X 5/16" ...	120				

120	EASY TOUCH INSULIN SYRINGE/U-100/0.5ML/30G X 1/2" .	EASY TOUCH LANCETS 30G/BUTTON-ACTIVATED97
EASY TOUCH FLIPLOCK SAFETY INSULIN SYRINGE 1ML/30GX1/2"	121	EASY TOUCH LANCETS 30G/PRESSURE ACTIVATED ... 97
120	EASY TOUCH INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	EASY TOUCH LANCETS 30G/PULL- TOP97
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EASY TOUCH GLUCOSE TEST STRIPS STRP 77	EASY TOUCH INSULIN SYRINGE/U-100/1ML/27G X 5/8"	EASY TOUCH LANCETS 32G/TWIST97
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EASY TOUCH INSULIN SYRINGE/0.5ML/30G X 5/16" ...121	121	EASY TOUCH PEN NEEDLES 31GX5/16" 121
EASY TOUCH INSULIN SYRINGE/SAFETY/U- 100/0.5ML/29G X 1/2" 121	EASY TOUCH INSULIN SYRINGE/U-100/1ML/30G X 1/2"	EASY TOUCH PEN NEEDLES 32GX1/4"121
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EASY TOUCH INSULIN SYRINGE/U-100/0.5ML/29G X 1/2" .	EASY TOUCH LANCETS 28G/TWIST97	
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ACTIVATED	97	EASYMAX V BLOOD GLUCOSE SYSTEM DEVI	98	ELEPSIA XR TB24	17
EASY TOUCH SAFETY LANCETS28G/BUTTON ACTIVATED	97	ECEE PLUS TABS	160	eletriptan hydrobromide	144
EASY TOUCH SAFETY LANCETS28G/PRESSURE ACTIVATED	97	econazole nitrate CREA	66	ELIDEL (pimecrolimus)	71
EASY TOUCH SHEATHLOCK SAFETY INSULIN SYRINGE 1ML/29GX1/2"	121	ED A-HIST DM TABS	60	ELIGARD KIT SC 22.5 MG	36
EASY TOUCH SHEATHLOCK SAFETY INSULIN SYRINGE 1ML/31GX5/16"	121	ED A-HIST LIQD (chlorpheniramine & phenylephrine)	60	ELIGARD SC	36
EASY TOUCH SHEATHLOCK SAFETY SYRINGE 1ML/30GX1/2" 121		ED BRON GP LIQD	60	ELIQUIS STARTER PACK TBPK .	15
EASY TRAK BLOOD GLUCOSE MONITORING SYSTEM DEVI	98	EDARBI	30	ELIQUIS TABS	15
EASY TRAK BLOOD GLUCOSE TEST STRIPS STRP	77	EDARBYCLOR 12.5 MG-40 MG ..	31	ELITEK	40
EASY TRAK II BLOOD GLUCOSE MONITORING SYSTEM DEVI	98	EDARBYCLOR 25 MG-40 MG	31	ELLEENCE SOLN	37
EASY TRAK II BLOOD GLUCOSE TEST STRIPS STRP	77	EDECIN (ethacrynic acid)	82	ELLUME COVID-19 HOME TEST KIT	77
EASY-C IMMUNE HEALTH CAPS 149		EDLUAR SUBL	89	ELMIRON CAPS	86
EASYGLUCO KIT	98	EDURANT	49	ELOCTATE	87
EASYGLUCO STARTER KIT KIT .	98	efavirenz CAPS	49	ELON HERBAL FOOT CREAM CREA	74
EASYGLUCO STRP	77	efavirenz TABS	49	ELON MATRIX 5000 TABS	159
EASYMAX 15 TEST STRIPS STRP .	77	efavirenz-emtricitabine-tenofovir disoproxil fumarate	49	ELON MATRIX PLUS TABS	159
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EVEKEO TABS 10 MG (amphetamine sulfate)	1	famciclovir	51
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FLEQSUVY SUSP (baclofen)	160	FLUCELVAX QUADRIVALENT 2021-2022 SUSY	175	fluocinonide GEL	70
FLEXICHAMBER ADULT MASK/SMALL	142	FLUCELVAX QUADRIVALENT 2022-2023 SUSP	175	fluocinonide OINT	70
FLEXICHAMBER CHILD MASK/LARGE	142	FLUCELVAX QUADRIVALENT 2022-2023 SUSY	175	fluocinonide SOLN	70
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FLOMAX (tamsulosin hcl)	86	fluconazole SUSR	27	fluorouracil	34
FLOVENT DISKUS AEPB (fluticasone propionate (inhalation))	14	fluconazole TABS	27	fluorouracil 500 MG/10ML	34
FLOVENT HFA	14	fluocytosine	26	fluoxetine hcl (pmdd) TABS	170
FLOWFLEX COVID-19 ANTIGEN HOME TEST KIT	77	fludarabine phosphate SOLN	34	fluoxetine hcl CAPS	20
FLUAD QUADRIVALENT 2021-2022	174	fludarabine phosphate SOLR	34	fluoxetine hcl CPDR	20
FLUAD QUADRIVALENT 2022-2023	174	fludrocortisone acetate TABS	58	fluoxetine hcl SOLN	20
FLUAD QUADRIVALENT 2023-2024	174	FLULAVAL QUADRIVALENT 2021-2022 SUSY	175	fluoxetine hcl TABS	20
FLUARIX QUADRIVALENT 2021-2022 SUSY	174	FLULAVAL QUADRIVALENT 2022-2023 SUSY	175	FLUOXETINE HYDROCHLORIDE TABS (fluoxetine hcl)	20
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FLUBLOK QUADRIVALENT 2021-2022	174	flunisolide (nasal) 0.025 %	161	fluphenazine hcl ELIX	47
FLUBLOK QUADRIVALENT 2022-2023	174	fluocinolone acetonide CREA	69	fluphenazine hcl SOLN	47
		fluocinolone acetonide OIL	70	fluphenazine hcl TABS	47
		fluocinolone acetonide OINT	70	flurandrenolide LOTN	70
		fluocinolone acetonide SOLN	70	flurazepam hcl	90
				flurbiprofen sodium	165
				flurbiprofen TABS 100 MG	6
				flutamide	36
				fluticasone furoate-vilanterol	15
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fluticasone propionate hfa	14	FOCALIN XR CP24 (dexmethylphenidate hcl)	3	FORA G30A BLOOD GLUCOSE MONITORING SYSTEM DEVI	99
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fluticasone propionate OINT	70	FOLAMED DHA CAPS	151	FORA GD20 TEST STRIPS STRP	78
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fluticasone-salmeterol AERO	15	FOLIC ACID CAPS	88	FORA GD50 BLOOD GLUCOSE TEST STRIPS STRP	78
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fluvastatin sodium TB24	29	folic acid TABS	88	FORA GTEL BLOOD GLUCOSE TEST STRIPS STRP	78
fluvoxamine maleate CP24	20	folic acid-vitamin b6-vitamin b12 TABS 10 MG-800 MCG-115 MCG	89	FORA LANCETS	99
fluvoxamine maleate TABS	20	FOLIVANE-OB	156	FORA LANCING DEVICE MISC ..	99
FLUZONE HIGH-DOSE PF 2021- 2022	175	FOLOTYN	34	FORA LANCING DEVICE/CLEARCAP MISC	99
FLUZONE HIGH-DOSE PF 2022- 2023	175	FOLTABS 800 TABS	89	FORA PREMIUM V10 BLE BLOOD GLUCOSE MONITORING SYSTEM DEVI	99
FLUZONE HIGH-DOSE PF 2023- 2024	175	fondaparinux sodium	16	FORA TEST N' GO VOICE BLOOD GLUCOSE MONITORING SYSTEM DEVI	99
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FLUZONE QUADRIVALENT 2022- 2023 SUSP	175	FORA BLOOD GLUCOSE TEST STRIPS STRP	77	FORA TN'G VOICE BLOOD GLUCOSE MONITORING SYSTEM KIT	99
FLUZONE QUADRIVALENT 2022- 2023 SUSY	175	FORA D15G BLOOD GLUCOSE TEST STRIPS STRP	78	FORA TN'G/TN'G VOICE BLOOD GLUCOSE TEST STRIPS STRP ..	78
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FLUZONE QUADRIVALENT 2023- 2024 SUSP	175	FORA D20 BLOOD GLUCOSE TEST STRIPS STRP	78		
FML FORTE SUSP	164	FORA D40/G31 BLOOD GLUCOSE TEST STRIPS STRP	78		
FML LIQUIFILM SUSP (fluorometholone (ophth))	164	FORA G20 BLOOD GLUCOSE MONITORING SYSTEM KIT	99		
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FORA V30A BLOOD GLUCOSE MONITORING SYSTEM KIT 99	fosamprenavir calcium TABS49	FREESTYLE LIBRE 14 DAY/READER/FLASH MONITORING SYSTEM100
FORA V30A BLOOD GLUCOSE TEST STRIPS STRP 78	fosfomycin tromethamine 32	FREESTYLE LIBRE 14 DAY/SENSOR/FLASH MONITORING SYSTEM100
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FORACARE GD40 STRP78	fosinopril sodium 29	FREESTYLE LIBRE 2/SENSOR/FLASH GLUCOSE MONITORING SYSTEM100
FORACARE PREMIUM V10 BLOOD GLUCOSE MONITORING SYSTEM DEVI99	FOSRENOL CHEW (lanthanum carbonate)86	FREESTYLE LIBRE 3/READER/GLUCOSE MONITORING SYSTEM100
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DEVI	100	gabapentin CAPS	17	GENADEK STEP 1 CAPS	151
FREESTYLE LITE BLOOD GLUCOSE MONITORING SYSTEM KIT	100	gabapentin SOLN	17	GENADEK STEP 2 CAPS	151
FREESTYLE LITE TEST STRIPS STRP	78	gabapentin TABS 600 MG, 800 MG 17		GENICIN VITA-Q TABS	154
FREESTYLE PRECISION NEO BLOOD GLUCOSE MONITORING SYSTEM KIT	100	galantamine hydrobromide CP24	168	GENOTROPIN CART SC	83
FREESTYLE PRECISION NEO BLOOD GLUCOSE TEST STRIPS STRP	78	galantamine hydrobromide SOLN	168	GENOTROPIN MINIQUICK PRSY	83
FREESTYLE TEST STRIPS STRP 78		galantamine hydrobromide TABS	168	gentamicin in saline 0.8 MG/ML-0.9 %, 1 MG/ML-0.9 %, 1.2 MG/ML-0.9 %, 1.6 MG/ML-0.9 %, 2 MG/ML-0.9 %	4
FREESTYLE UNISTICK II LANCETS	100	GARDASIL 9 SUSP	175	gentamicin sulfate (ophth) SOLN	.163
FROVA (frovatriptan succinate) .	144	GARDASIL 9 SUSY	175	gentamicin sulfate (topical) CREA	.66
frovatriptan succinate	144	gatifloxacin (ophth)	163	gentamicin sulfate (topical) OINT	.66
fructose-dextrose-phosphoric acid SOLN	26	GAVRETO	38	gentamicin sulfate IJ 40 MG/ML, 80 MG/2ML	4
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FULPHILA	88	GE100 BLOOD GLUCOSE MONITORING SYSTEM KIT	100	GENTEEL PLUS LANCING DEVICE/BUFF BLACK MISC	100
fulvestrant SOSY	36	GE100 BLOOD GLUCOSE TESTSTRIPS STRP	78	GENTEEL PLUS LANCING DEVICE/BUTTERFLY BLUE MISC	100
FUNGOID TINCTURE SOLN	66	gefitinib	36	GENTEEL PLUS LANCING DEVICE/PLAYFUL PURPLE MISC	100
furosemide SOLN OR 10 MG/ML, 40 MG/5ML	82	GELNIQUE GEL 10 %	173	GENTEEL PLUS LANCING DEVICE/PRINCESS PINK MISC .	100
furosemide TABS	82	gemcitabine hcl SOLN	34	GENTEEL PLUS LANCING DEVICE/WILLOWY WHITE MISC	100
FUZEON SOLR	49	gemcitabine hcl SOLR	34	GENTLE-LET GP LANCETS	100
FYARRO	38	GEMCITABINE HYDROCHLORIDE SOLN (gemcitabine hcl)	34	GENTLE-LET LANCETS GENERAL PURPOSE STYLE/FINE POINT .	100
FYCOMPA SUSP	16	GEMCITABINE HYDROCHLORIDE SOLN	34	GENTLE-LET LANCETS GENERAL	
FYCOMPA TABS	16	gemfibrozil TABS	28		
FYLNETRA	88	GEMTESA	173		
gabapentin (once-daily) TABS ...	170	GENABIO COVID-19 RAPID SELF TEST KIT 1-PACK KIT	78		
		GENABIO COVID-19 RAPID SELF TEST KIT 2-PACK KIT	78		

PURPOSE STYLE/MEDIUM POINT 100	GLOBAL EASY GLIDE INSULIN SYRINGE/0.3ML/31G X 15/64" ..122	123	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/31G X 5/16"	123
GENTLE-LET LANCETS SAFETY STYLE/FINE POINT 100	GLOBAL EASY GLIDE INSULINSYRINGE/U-100/0.3ML/31G X 5/16" 122	123	GLOBAL INJECT EASE LANCETS 28G .....101	101
GENTLE-LET LANCETS SAFETY STYLE/MEDIUM POINT .....101	GLOBAL EASY GLIDE PEN NEEDLES 32GX4MM .....122	123	GLOBAL INJECT EASE LANCETS 30G .....101	101
GENVOYA .....49	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.3ML/29G X 1/2" . 122	123	GLOBAL INSULIN SYRINGE/U- 100/0.3ML/30G X 1/2" 123	123
GEODON (ziprasidone mesylate) 42	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.3ML/30G X 1/2" . 123	123	GLOBAL LANCING DEVICE MISC 101	101
GEODON 20 MG, 60 MG, 80 MG (ziprasidone hcl) 42	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.3ML/31G X 5/16" .....123	123	GLOPERBA SOLN OR 86	86
GEODON 40 MG (ziprasidone hcl) 42	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/28G X 1/2" . 123	123	GLUCAGEN HYPOKIT 22	22
GERBER GOOD START WATER 167	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/29G X 1/2" . 123	123	glucagon (rdna) 22	22
GHT BLOOD GLUCOSE MONITORING SYSTEM KIT .....101	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/30G X 1/2" . 123	123	GLUCAGON .....76	76
GHT TEST STRIPS STRP .....78	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/30G X 5/16" .....123	123	GLUCAGON EMERGENCY KIT FOR LOW BLOOD SUGAR 22	22
GILENYA (fingolimod hcl) .....169	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/31G X 5/16" .....123	123	GLUCO TO GO CHEW .....22	22
GILOTRIF 36	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/30G X 1/2" . 123	123	GLUCOCARD 01 BLOOD GLUCOSE MONITORING SYSTEM KIT 101	101
glatiramer acetate SOSY 169	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/30G X 5/16" .....123	123	GLUCOCARD 01 SENSOR PLUS STRP .....78	78
GLEEVEC (imatinib mesylate) ....38	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/31G X 5/16" .....123	123	GLUCOCARD 01 SENSOR PLUSTEST STRIPS STRP 78	78
GLIADEL WAFER .....34	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/28G X 1/2" 123	123	GLUCOCARD EXPRESSION AUDIO-ENABLED BLOOD GLUCOSE MONITORING KIT ... 101	101
glimepiride .....25	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/29G X 1/2" 123	123	GLUCOCARD EXPRESSION BLOOD GLUCOSE TEST STRIPS STRP .....78	78
glipizide TABS 5 MG, 10 MG .....25	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/30G X 1/2" 123	123	GLUCOCARD SHINE CONNEX BLOOD GLUCOSE MONITORING SYSTEM KIT 101	101
glipizide TB24 .....25	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/30G X 1/2" 123	123	GLUCOCARD SHINE DEVI .....101	101
glipizide-metformin hcl 21				
GLOBAL ALCOHOL PREP EASEPADS 113				
GLOBAL EASE INJECT PEN NEEDLES 31GX8MM .....122				
GLOBAL EASE INJECT PEN NEEDLES 32GX4MM .....122				
GLOBAL EASE INJECT PEN NEEDLES 31GX5MM 122				

GLUCOCARD SHINE EXPRESS BLOOD GLUCOSE MONITORING SYSTEM KIT 101	GLUCOPRO INSULIN SYRINGE/U- 100/0.3ML/31G X 5/16" .....123	GNP EASY TOUCH GLUCOSE MONITORING SYSTEM/NO CODING DEVI .....101
GLUCOCARD SHINE KIT .....101	GLUCOPRO INSULIN SYRINGE/U- 100/0.5ML/30G X 1/2" 123	GNP EASY TOUCH GLUCOSE TEST STRIPS STRP 79
GLUCOCARD SHINE TEST STRIPS STRP .....78	GLUCOPRO INSULIN SYRINGE/U- 100/0.5ML/30G X 5/16" .....123	GNP GLUCOSE CHEW 22
GLUCOCARD SHINE XL DEVI .. 101	GLUCOPRO INSULIN SYRINGE/U- 100/0.5ML/31G X 5/16" .....123	GNP INSULIN SYRINGE/0.3ML/29G X 1/2" .....123
GLUCOCARD VITAL BLOOD GLUCOSE MONITORING SYSTEM BLACK KIT .....101	GLUCOPRO INSULIN SYRINGE/U- 100/1ML/30G X 1/2" 123	GNP INSULIN SYRINGE/0.3ML/31G X 5/16" 123
GLUCOCARD VITAL BLOOD GLUCOSE MONITORING SYSTEM BLUE KIT 101	GLUCOPRO INSULIN SYRINGE/U- 100/1ML/31G X 5/16" .....123	GNP INSULIN SYRINGE/0.5ML/28G X 1/2" .....123
GLUCOCARD VITAL BLOOD GLUCOSE MONITORING SYSTEM KIT 101	GLUCOSE CHEW 22	GNP INSULIN SYRINGE/0.5ML/29G X 1/2" .....123
GLUCOCARD VITAL BLOOD GLUCOSE MONITORING SYSTEM PINK KIT .....101	GLUCOSE INSTANT ENERGY ..22	GNP INSULIN SYRINGE/0.5ML/30G X 5/16" 123
GLUCOCARD VITAL TEST STRIPS STRP .....79	GLUCOSE METER TEST STRIPS ADVANCED STRP .....79	GNP INSULIN SYRINGE/0.5ML/31G X 5/16" 123
GLUCOCOM BLOOD GLUCOSE MONITOR DEVI 101	GLUMETZA TB24 (metformin hcl) .22	GNP INSULIN SYRINGE/1ML/29G X 1/2" 123
GLUCOCOM BLOOD GLUCOSE MONITORING SYSTEM KIT .....101	glutamine TABS 162	GNP INSULIN SYRINGE/1ML/31G X 5/16" .....123
GLUCOCOM BLOOD GLUCOSE MONITORING SYSTEM VALUE KIT KIT 101	glyburide micronized 1.5 MG, 3 MG, 6 MG 25	GNP INSULIN SYRINGE/1ML/29GX1/2" 123
GLUCOCOM LANCETS 28G ....101	glyburide TABS 25	GNP INSULIN SYRINGES/1/2ML/29GX1/2" 123
GLUCOCOM LANCETS 30G ....101	glyburide-metformin .....21	GNP INSULIN SYRINGES/1ML/28GX1/2" 123
GLUCOCOM LANCETS 33G ....101	glycerin (laxative) SUPP 1 GM, 1.2 GM, 2 GM, 2.1 GM, 80.7 %91	GNP INSULIN SYRINGES/1ML/29GX1/2" 124
GLUCOCOM TEST STRIPS STRP 79	glycerin (topical) .....71	GNP INSULIN SYRINGES/3ML/31GX5/16" .....124
GLUCONAVII BLOOD GLUCOSETEST STRIPS STRP ...79	glycerin-hypromellose-polyethylene glycol 400 162	GNP LANCETS 21G .....101
GLUCOPRO INSULIN SYRINGE/U- 100/0.3ML/30G X 1/2" 123	GLYCOTROL CAPS .....159	GNP LANCETS THIN 26G 101
	GLYCOTROL COMPLETE CAPS 159	GNP LANCING SYSTEM DEVICE MISC .....101
	GLYXAMBI .....21	GNP PRENATAL TABS 156
	GNP ALCOHOL SWABS 113	
	GNP CLICKFINE UNIVERSAL PEN NEEDLES 31GX5/16" 123	

GNP QUICK DISSOLVE GLUCOSE CHEW	22	MONITORING SYSTEM DEVI ...	101	1/4"	124
GNP STERILE LANCETS 28G ..	101	GOJJI MULTI-FUNCTIONAL MONITORING SYSTEM WELCOME KIT KIT	101	GOODSENSE PEN NEEDLE/PENFINE CLASSIC/32G X 5/32"	124
GNP STERILE LANCETS 30G ..	101	GOJJI STERILE LANCETS 30G	102	GOODSENSE PREMIUM BLOOD GLUCOSE TEST STRIPS STRP ..	79
GNP STERILE LANCETS 33G ..	101	GOLD BOND FOOT CREA	74	GOODSENSE PREMIUM BLOODGLUCOSE MONITORING SYSTEM KIT	102
GNP TRUE METRIX SELF MONITORING BLOOD GLUCOSE TEST STRIPS STRP	79	GOLYTELY SOLR (peg 3350-kcl-sod bicarb-sod chloride-sod sulfate) ...	90	GRALISE TABS (gabapentin (once-daily))	170
GNP TRUETRACK BLOOD GLUCOSE TEST STRIPS STRP ..	79	GONITRO PACK	12	GRALISE TABS	170
GNP ULTICARE PEN NEEDLES/31GX5/16"	124	GOOD START SUPREME STERILE WATER	167	granisetron hcl SOLN IV 1 MG/ML, 4 MG/4ML	26
GNP ULTICARE PEN NEEDLES/32GX 5/32"	124	GOODSENSE CLICKFINE SAFETY PEN NEEDLE/31G X 3/16"	124	granisetron hcl TABS	26
GNP ULTICARE PEN NEEDLES/32GX1/4"	124	GOODSENSE COLOR LANCETS MICRO-THIN 33G UNIVERSAL ..	102	GRANIX SOLN	88
GNP ULTICARE PEN NEEDLES31G X 5MM	124	GOODSENSE GLUCOSE	22	GRANIX SOSY	88
GNP ULTIGUARD SAFEPACK/MICRO PEN NEEDLE/32GX4MM	124	GOODSENSE LANCETS MICRO-THIN 33G	102	GRAPE SEED CAPS	149
GNP ULTIGUARD SAFEPACK/MINI PEN NEEDLE/31GX5MM	124	GOODSENSE LANCETS MICRO-THIN 33G UNIVERSAL	102	GRAPE SYRUP SYRP	167
GNP ULTIGUARD SAFEPACK/MINI PEN NEEDLE/32GX6MM	124	GOODSENSE LANCETS ULTRA-THIN 26G UNIVERSAL	102	griseofulvin microsize SUSP	26
GNP ULTIGUARD SAFEPACK/MINI PEN NEEDLE/31GX8MM	124	GOODSENSE LANCETS ULTRA-THIN 30G	102	griseofulvin microsize TABS	26
GNP ULTRA COMFORT INSULIN SYRINGE/1ML/28G X 1/2"	124	GOODSENSE LANCETS ULTRA-THIN 30G UNIVERSAL	102	griseofulvin ultramicrosize	26
GNP URINARY TRACT INFECTION TEST STRIPS STRP	79	GOODSENSE LANCING DEVICE MISC	102	guaifenesin LIQD 100 MG/5ML, 200 MG/10ML	64
GOCOVRI CP24	41	GOODSENSE PEN NEEDLE/PENFINE CLASSIC/31G X 3/16"	124	guaifenesin LIQD 200 MG/10ML, 400 MG/20ML	64
GOJJI LANCING DEVICE/CLEAR CAP MISC	101	GOODSENSE PEN NEEDLE/PENFINE CLASSIC/31G X 5/16"	124	guaifenesin TABS	64
GOJJI MULTI-FUNCTIONAL		GOODSENSE PEN NEEDLE/PENFINE CLASSIC/32G X		guaifenesin TB12 1200 MG	64
				guaifenesin TB12	64
				guaifenesin-codeine SOLN 10 MG/5ML-100 MG/5ML	60
				guaifenesin-codeine SOLN	60
				guanfacine hcl (adhd)	2

guanfacine hcl	30	HALCION 0.25 MG (triazolam)	90	SYRINGE/U-100/0.5ML/31G X 5/16" 124
GUARDIAN 4 GLUCOSE SENSOR 102		HALDOL DECANOATE 100 (haloperidol decanoate)	44	HEALTHWISE INSULIN SYRINGE/U-100/1ML/31G X 5/16" 124
GUARDIAN 4 TRANSMITTER KIT 102		HALDOL DECANOATE 50 (haloperidol decanoate)	44	HEALTHWISE MICRON PEN NEEDLES/32G X 5/32"
GVOKE HYOPEN 1-PACK SOAJ 22		halobetasol propionate CREA	70	124
GVOKE HYOPEN 2-PACK SOAJ 22		halobetasol propionate FOAM	70	HEALTHWISE SHORT PEN NEEDLES 31GX8MM
GVOKE KIT SOLN	22	halobetasol propionate OINT	70	124
GVOKE PFS SOSY 1 MG/0.2ML ..	22	HALOG CREA (halcinonide)	70	HEALTHWISE SHORT PEN NEEDLES/31G X 3/16"
GNAZOLE-1	177	HALOG OINT	70	124
HADLIMA PUSHTOUCH SOAJ	5	HALOG SOLN	70	HEALTHWISE SHORT PEN NEEDLES/31G X 5/16"
HADLIMA SOSY	5	haloperidol decanoate	44	124
HAEGARDA SOLR SC	87	haloperidol lactate CONC	45	HEALTHWISE UNIFINE PENTIPS PEN NEEDLES 32GX4MM
HAEMOLANCE	102	haloperidol lactate SOLN	45	124
HAEMOLANCE LOW FLOW LANCETS	102	haloperidol TABS 0.5 MG, 1 MG, 2 MG, 5 MG, 10 MG	45	HEALTHY ACCENTS AUTOLET IMPRESSION LANCING DEVICE MISC
HAEMOLANCE PLUS	102	haloperidol TABS	45	102
HAEMOLANCE PLUS HIGH FLOW 102		HALUCORT GEL	73	HEALTHY ACCENTS UNIFINE PENTIPS PEN NEEDLES 31GX5MM
HAEMOLANCE PLUS LOW FLOW 102		HAPRODERM GEL	75	124
HAEMOLANCE PLUS MAX FLOW 102		HARVONI PACK	50	HEALTHY ACCENTS UNIFINE PENTIPS PEN NEEDLES 31GX8MM
HAEMOLANCE PLUS PEDIATRIC FLOW	102	HARVONI TABS	50	124
HAIR FARE TABS	159	HAVRIX	175	HEALTHY ACCENTS UNIFINE PENTIPS PEN NEEDLES 32GX4MM
HAIR NOURISHING SUPPLEMENT TABS	159	HEALTH CARE LANCING DEVICE MISC	102	124
HAIR/SKIN/NAILS CAPS	151	HEALTHPRO BLOOD GLUCOSE MONITORING SYSTEM KIT	102	HEALTHY ACCENTS UNILET LANCETS SUPER THIN 30G ...
HALAVEN (eribulin mesylate)	40	HEALTHWISE INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	124	HEALTHY EYES SUPERVISION2 CAPS
halcinonide CREA	70	HEALTHWISE INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	124	151
		HEALTHWISE INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	124	HEART SAVIOR CAPS
				159
				HEART TABS TABS
				159
				H-E-B IN CONTROL PEN NEEDLE 31GX3/16"
				124
				H-E-B IN CONTROL PEN NEEDLES 31GX5MM
				124

H-E-B IN CONTROL PEN NEEDLES 31GX8MM	124	10 UNIT/ML, 100 UNIT/ML	16	.....	125
H-E-B IN CONTROL PEN NEEDLES/NANO/32GX4MM	125	heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	16	HM ULTICARE MINI PEN NEEDLES/31G X 5MM (3/16") ..	125
H-E-B IN CONTROL UNIFINEPENTIPS PLUS 31GX3/16"	125	HEPARIN SODIUM/D5W 5 %-100 UNIT/ML, 5 %-25000 UNIT/250ML 16		HM ULTICARE SHORT PEN NEEDLES 31GX8MM	125
H-E-B IN CONTROL UNIFINEPENTIPS PLUS 31GX5/16"	125	HEPARIN SODIUM/DEXTROSE 5 %-25000 UNIT/250ML	16	HOMOCYSTEINE SUPPORT CAPS . 81	
H-E-B IN CONTROL UNIFINEPENTIPS PLUS 31GX5MM	125	HEPARIN SODIUM/NAACL 0.45% SOLN IV 0.45 %-25000 UNIT/250ML 16		HONEY BEARS	155
H-E-B IN CONTROL UNIFINEPENTIPS PLUS 32GX4MM	125	HEPARIN SODIUM/SODIUM CHLORIDE SOLN IV 0.45 %-25000 UNIT/250ML, 0.45 %-25000 UNIT/500ML	16	HONEY BEARS W/IRON AND ZINC CHEW	155
H-E-B IN CONTROL UNIFINEPENTIPS PLUS 32GX5/32"	125	HEPLISAV-B SOSY	175	HORIZANT	170
H-E-B INCONTROL ADVANCEDLANCING DEVICE MISC	102	HERCEPTIN 150 MG	36	HORMONE PROTECT CAPS	81
H-E-B INCONTROL ALCOHOL PADS	113	HERCEPTIN HYLECTA	37	HULIO AJKT	5
H-E-B INCONTROL LANCETS MICRO THIN 33G	102	HERZUMA	36	HULIO PSKT	5
H-E-B INCONTROL LANCETS SUPER THIN 30G	102	HETLIOZ CAPS (tasimelteon)	90	HUMALOG JUNIOR KWIKPEN SOPN	23
H-E-B INCONTROL LANCETS ULTRA THIN 28G	102	HETLIOZ LQ SUSP	90	HUMALOG KWIKPEN SOPN	23
HEMADY TABS	57	HIBERIX SOLR IJ	174	HUMALOG MIX 50/50 KWIKPEN SUPN	23
HEMANGEOL SOLN OR	52	HIGH POTENCY MULTIVITAMIN TABS	154	HUMALOG MIX 75/25 KWIKPEN SUPN	23
HEMATINIC/FOLIC ACID	89	HISTEX-AC	60	HUMALOG MIX 75/25 SUSP	23
HEMLIBRA	87	HISTEX-DM SYRP	60	HUMALOG SOCT	23
HEMOFIL M SOLR 250 UNIT, 500 UNIT, 1000 UNIT, 1700 UNIT	87	HM DIBROMM COLD AND ALLERGY CHILDRENS LIQD	60	HUMALOG SOLN IJ	23
heparin sodium (porcine) lock flush		HM STERILE ALCOHOL PREP PADS	113	HUMALOG TEMPO PEN SOPN ..	23
		HM ULTICARE INSULIN SYRINGE/1ML/30G X 1/2"	125	HUMATE-P SOLR	87
		HM ULTICARE INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"		HUMATROPE CART IJ	83
				HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT 80 MG/0.8ML	5
				HUMIRA PEN PNKT	5
				HUMIRA PEN-CD/UC/HS STARTER PNKT 80 MG/0.8ML	5

HUMIRA PEN-PEDIATRIC UC STARTER PACK PNKT	5	HYDRALYTE FREEZER POPS SOLN	145	hydrocortisone butyrate CREA	70
HUMIRA PEN-PS/UV STARTER PNKT	5	HYDRALYTE SOLN	145	hydrocortisone butyrate hydrophilic lipo base	70
HUMIRA PSKT	5	HYDREA (hydroxyurea)	40	hydrocortisone butyrate LOTN	70
HUMULIN 70/30 KWIKPEN SUPN	23	hydrochlorothiazide CAPS	82	hydrocortisone butyrate OINT	70
HUMULIN 70/30 SUSP	23	hydrochlorothiazide TABS	82	hydrocortisone butyrate SOLN	70
HUMULIN N KWIKPEN SUPN	23	HYDROCIL INSTANT PACK	90	HYDROCORTISONE COMPLETE KIT THPK	70
HUMULIN N SUSP	24	hydrocodone bitartrate CP12	9	HYDROCORTISONE CREA	70
HUMULIN R SOLN IJ	24	hydrocodone bitartrate T24A	9	hydrocortisone TABS	57
HUMULIN R U-500 (CONCENTRATED) SOLN SC	24	hydrocodone bitartrate-homatropine methylbromide SOLN	58	hydrocortisone valerate CREA	70
HUMULIN R U-500 KWIKPEN SOPN SC	24	hydrocodone bitartrate-homatropine methylbromide TABS	58	hydrocortisone valerate OINT	70
HURRICAIN SNAP-N-GO SWAB 147		hydrocodone polistirex-chlorpheniramine polistirex SUER ..	60	hydrocortisone w/acetic acid	166
HW EMBRACE PRO BLOOD GLUCOSE METER DEVI	102	hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML	10	HYDROCORTISONE/ACETIC ACID (hydrocortisone w/acetic acid)	166
HW EMBRACE PRO BLOOD GLUCOSE TEST STRIPS STRP ..	79	hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG, 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG	10	hydromorphone hcl LIQD	9
HW EMBRACE TALK BLOOD GLUCOSE MONITOR DEVI	102	hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG, 7.5 MG-200 MG ..	10	HYDROMORPHONE HCL SUPP ..	9
HW EMBRACE TALK BLOOD GLUCOSE MONITORING SYSTEM KIT	102	hydrocortisone (intrarectal)	11	hydromorphone hcl TABS	9
HW EMBRACE TALK BLOOD GLUCOSE TEST STRIPS STRP ..	79	hydrocortisone (rectal) EX 2.5 % ..	11	hydromorphone hcl TB24	9
HYCAMTIN CAPS	41	hydrocortisone (topical) CREA	70	hydroxychloroquine sulfate 200 MG 33	
HYCODAN SOLN (hydrocodone bitartrate-homatropine methylbromide)	58	hydrocortisone (topical) LOTN 2.5 % ..	70	HYDROXYM GEL	70
HYCODAN TABS 1.5 MG-5 MG (hydrocodone bitartrate-homatropine methylbromide)	58	hydrocortisone (topical) OINT 1 %, 2.5 %	70	hydroxyprogesterone caproate (antineoplastic)	36
hydralazine hcl TABS	31	hydrocortisone acetate (topical) OINT	70	hydroxyprogesterone caproate OIL 168	
				hydroxyurea	40
				hydroxyzine hcl SYRP	12
				hydroxyzine hcl TABS	12
				hydroxyzine pamoate CAPS	12
				HYRIMOZ CROHN'S DISEASE AND ULCERATIVE COLITIS STARTER PACK SOAJ	5

HYRIMOZ PEDIATRIC CROHNSDISEASE STARTER PACK SOSY	5	IDACIO (2 PEN) AJKT	5	imipenem-cilastatin IV	32
HYRIMOZ PEDIATRIC CROHN'SDISEASE STARTER PACK SOSY	5	IDACIO (2 SYRINGE) PSKT	5	imipramine hcl TABS	21
HYRIMOZ PLAQUE PSORIASISSTARTER PACK SOAJ . 5		IDACIO STARTER PACKAGE FOR CROHNS DISEASE AJKT	5	imipramine pamoate	21
HYRIMOZ SOAJ	5	IDACIO STARTER PACKAGE FOR PLAQUE PSORIASIS AJKT	5	imiquimod	71
HYRIMOZ SOSY	5	IDAMYCIN PFS (idarubicin hcl) ...	37	imiquimod 3.75 %	71
HYSINGLA ER T24A	9	idarubicin hcl	37	IMITREX 5 MG/ACT, 20 MG/ACT (sumatriptan)	144
HY-VEE GLUCOSE	22	IDELVION	87	IMITREX STATDOSE REFILL SOCT (sumatriptan succinate)	144
HY-VEE LANCETS	102	IDHIFA	38	IMITREX STATDOSE SYSTEM SOAJ (sumatriptan succinate) ...	144
HY-VEE THIN LANCETS	102	IFEX SOLR (ifosfamide)	34	IMITREX TABS (sumatriptan succinate)	144
HYZAAR (losartan potassium & hydrochlorothiazide)	31	IFEX SOLR	34	IMLYGIC	40
ibandronate sodium TABS	83	ifosfamide SOLN	34	IMMUNE ESSENTIALS DAILY CAPS	151
IBRANCE CAPS	38	ifosfamide SOLR	34	IMMUNE SUPPORT CHEW	151
IBRANCE TABS	38	IFOSFAMIDE SOLR	34	IMMUNERX CAPS	159
IBSRELA	85	IGALMI FILM	90	IMMUNICARE CAPS	159
ibuprofen CAPS	6	IGLUCOSE BLOOD GLUCOSE MOITORING SYSTEM KIT	102	IMOVAX RABIES (H.D.C.V.) SUSR 175	
ibuprofen CHEW	6	IGLUCOSE BLOOD GLUCOSE TEST STRIPS STRP	79	IMPEKLO LOTN	70
ibuprofen SUSP 50 MG/1.25ML, 100 MG/5ML	6	IHEALTH COVID-19 ANTIGENRAPID TEST KIT	79	IN TOUCH LANCING DEVICE MISC 102	
ibuprofen TABS 200 MG, 400 MG, 600 MG, 800 MG	6	ILARIS SOLN	5	IN TOUCH STERILE LANCETS30G 102	
ibuprofen TABS 400 MG, 600 MG, 800 MG	6	ILEVRO	165	INBRIJA CAPS	41
ibuprofen-famotidine	6	ILUMYA	68	IN-CHECK DIAL INSPIRATORYFLOW TRAINER DEVI	142
icatibant acetate SOSY	87	ILUVIEN	164	IN-CHECK INSPIRATORY FLOWMETER/NASAL WITH MASK DEVI	142
ICLUSIG	38	imatinib mesylate	38	IN-CHECK INSPIRATORY	
icosapent ethyl	28	IMBRUVICA CAPS	38		
		IMBRUVICA SUSP	38		
		IMBRUVICA TABS	38		
		IMDELLTRA	35		
		IMFINZI	35		

FLOWMETER/ORAL DEVI	142	125	INSULIN GLARGINE SOLN	24
INCONTROL ULTICARE MINI PEN NEEDLES/31GX8MM	125	INPEN 100/BLUE/LILLY/HUMALOG DEVI	125	INSULIN GLARGINE SOLOSTAR SOPN
INCONTROL ULTICARE MINI PEN NEEDLES/32G X 4MM	125	INPEN 100/BLUE/NOVOLOG/FIASP DEVI	125	24
INCRUSE ELLIPTA	13	INPEN 100/GREY/HUMALOG DEVI .	125	INSULIN GLARGINE-YFGN SOPN 24
indapamide TABS 1.25 MG, 2.5 MG . 82		INPEN 100/GREY/LILLY/HUMALOG DEVI	125	INSULIN LISPRO JUNIOR KWIKPEN SOPN
INDERAL LA CP24 (propranolol hcl) . 52		INPEN 100/GREY/NOVOLOG/FIASP DEVI	125	24
INDERAL XL	52	INPEN 100/PINK/HUMALOG DEVI	125	INSULIN LISPRO PROTAMINE/INSULIN LISPRO KWIKPEN SUPN
indomethacin CAPS 25 MG, 50 MG 6		INPEN 100/PINK/LILLY/HUMALOG DEVI	125	24
indomethacin CPR	6	INPEN 100/PINK/NOVOLOG/FIASP DEVI	125	INSULIN LISPRO SOLN IJ
indomethacin SUPP	6	INPEN 100/PINK/NOVOLOG/FIASP DEVI	125	5/16"
INFASURF TR	170	INQOVI	37	INSULIN SYRINGE/0.5ML/28G X 1/2"
INFED	89	INREBIC	38	INSULIN SYRINGE/0.5ML/30G X 5/16"
INFINITY BLOOD GLUCOSE MONITORING SYSTEM KIT	102	INSULIN ASPART FLEXPEN SOPN .	24	INSULIN SYRINGE/0.5ML/31G X 5/16"
INFINITY BLOOD GLUCOSE TEST STRIPS STRP	79	INSULIN ASPART PENFILL SOCT	24	INSULIN SYRINGE/1ML/28G X 1/2" 125
INFINITY VOICE KIT	102	INSULIN ASPART PROTAMINE/INSULIN ASPART FLEXPEN SUPN	24	INSULIN SYRINGE/1ML/29G X 1/2" 125
INFINITY VOICE STRP	79	INSULIN ASPART PROTAMINE/INSULIN ASPART SUSP	24	INSULIN SYRINGE/NEEDLE 0.3ML/31G X 5/16"
INFLECTRA SOLR	85	INSULIN ASPART SOLN IJ	24	INSULIN SYRINGE/NEEDLE 0.5ML/29G X 1/2"
INFUGEM	34	INSULIN DEGLUDEC FLEXTOUCH SOPN	24	INSULIN SYRINGE/NEEDLE 0.5ML/30G X 5/16"
INGREZZA CAPS	169	INSULIN DEGLUDEC SOLN	24	INSULIN SYRINGE/NEEDLE 0.5ML/31G X 5/16"
INGREZZA CPPK	169	INSULIN GLARGINE MAX SOLOSTAR SOPN	24	INSULIN SYRINGE/NEEDLE
INGREZZA CPSP	169			
INLYTA	35			
INNOPRAN XL	52			
inositol niacinate CAPS	53			
INPEFA	53			
INPEN 100/BLUE/HUMALOG DEVI				

1ML/29G X 1/2"	126	X4MM	126	MG/5ML	41
INSULIN SYRINGE/NEEDLE 1ML/31G X 5/16"	126	INSUPEN SENSITIVE 32GX6MM 126		IRON CHEWS PEDIATRIC CHEW 89	
INSULIN SYRINGE/U- 100/0.3ML/29G X 1/2"	126	INSUPEN ULTRAFIN 31GX8MM 126		iron polysaccharide complex-vit b12- folic acid CAPS	89
INSULIN SYRINGE/U- 100/0.5ML/29G X 1/2"	126	INTELENCE (etravirine)	49	iron w/ vitamins TABS	149
INSULIN SYRINGE/U-100/1ML/29G X 1/2"	126	INTELENCE	49	iron-vitamin c	89
INSULIN SYRINGE/U-100/1ML/30G X 5/16"	126	INTELISWAB COVID-19 RAPID TEST KIT	79	iron-vitamin c-vitamin b12-folic acid TABs	89
INSULIN SYRINGES/U- 100/0.5ML/28GX1/2"	126	INTRASITE GEL APPLIPAK GEL .	75	ISENTRESS CHEW	49
INSULIN SYRINGES/U- 100/0.5ML/29GX1/2"	126	INTUNIV (guanfacine hcl (adhd)) ..	2	ISENTRESS HD TABS	49
INSULIN SYRINGES/U- 100/0.5ML/30GX5/16"	126	INULOSE BLOOD SUGAR SUPPORT CAPS	159	ISENTRESS PACK	49
INSULIN SYRINGES/U- 100/1ML/27GX1/2"	126	INVEGA 3 MG, 6 MG, 9 MG (paliperidone)	43	ISENTRESS TABS	49
INSULIN SYRINGES/U- 100/1ML/28GX1/2"	126	INVEGA HAFYERA	43	isoniazid SYRP	33
INSULIN SYRINGES/U- 100/1ML/29GX1/2"	126	INVEGA SUSTENNA	43	isoniazid TABS	33
INSULIN SYRINGES/U- 100/1ML/30GX1/2"	126	INVEGA TRINZA	44	ISOPTO ATROPINE SOLN	163
INSULIN SYRINGES/U- 100/1ML/31GX5/16"	126	INVELTYS SUSP	165	ISOPTO TEARS SOLN	162
INSULIN SYRINGES/U- 100/1ML/30GX1/2"	126	INVOKAMET TABS	21	ISORDIL TITRADOSE TABS (isosorbide dinitrate)	12
INSULIN SYRINGES/U- 100/1ML/29GX1/2"	126	INVOKAMET XR TB24	21	isosorbide dinitrate TABS	12
INSUPEN 31G X 5MM	126	INVOKANA	25	isosorbide dinitrate-hydralazine hcl 53	
INSUPEN 31G X 8MM	126	IOPIDINE	163	isosorbide mononitrate TABS	12
INSUPEN 32G X 4MM	126	IPOL INACTIVATED IPV	175	isosorbide mononitrate TB24	12
INSUPEN PEN NEEDLES 32G		ipratropium bromide (nasal)	161	isotretinoin	65
		ipratropium bromide SOLN 0.02 %	13	isradipine CAPS	52
		ipratropium-albuterol SOLN	15	ISTALOL SOLN (timolol maleate (ophth))	163
		irbesartan	30	ISTODAX SOLR (romidepsin)	38
		irbesartan-hydrochlorothiazide	31	ITCH-X GEL	72
		IRESSA (gefitinib)	36	ITCH-X SOLN	72
		irinotecan hcl	41	itraconazole CAPS	27
		irinotecan hcl 40 MG/2ML, 100			

itraconazole SOLN	27	KALBITOR	87	KETONE TEST STRIPS STRP	79
ivermectin (pediculicide)	74	KALETRA SOLN (lopinavir-ritonavir) .	49	ketoprofen CAPS 25 MG	6
IWILFIN	40	KALETRA TABS (lopinavir-ritonavir) .	49	ketoprofen CP24	6
IXCHIQ	175	KANJINTI	36	ketorolac tromethamine (ophth) .	165
IXEMPRA KIT	40	KAPSPARGO SPRINKLE CS24 ..	52	KETOROLAC TROMETHAMINE	
IXIARO	175	KATERZIA	52	SOLN NA 15.75 MG/SPRAY	6
IXINITY SOLR	87	KAZANO (alogliptin-metformin hcl)	22	ketorolac tromethamine TABS	6
IYUZEH SOLN	166	KELP/LECITHIN/B-6 CAPS	162	KETOSTIX STRP	79
JAKAFI	38	KENALOG AERS (triamcinolone		ketotifen fumarate (ophth) 0.035 %	165
JANSSEN COVID-19 VACCINE .	175	acetamide (topical))	70	KEVEYIS (dichlorphenamide)	82
JANUMET TABS	21	KENDALL AMORPHOUS		KEVZARA SOAJ	6
JANUMET XR TB24	21	HYDROGEL WOUND DRESSING		KEVZARA SOSY	6
JANUVIA	23	GEL	75	KEYFOLIC TABS	151
JARDIANCE	25	KEPIVANCE 6.25 MG	40	KEYTRUDA	35
JATENZO CAPS	11	KEPPRA SOLN OR 100 MG/ML		KIMMTRAK	35
JAYPIRCA	38	(levetiracetam)	17	KINDERLYTE PREMAX SOLN ..	145
JELMYTO SOLR UL	37	KEPPRA TABS (levetiracetam) ...	17	KINDERLYTE SOLN	145
JEMPERLI	35	KEPPRA XR TB24 (levetiracetam) 17		KINERET SOSY	5
JENTADUETO TABS	21	KERAGEL GEL	75	KINNEY LANCETS	103
JENTADUETO XR TB24	21	KERAGELT GEL	75	KINNEY THIN LANCETS	103
JEVTANA	40	KERENDIA	83	KINRAY INSULIN SYRINGE	
JIVI	87	KESIMPTA	169	PREFERRED PLUS/0.3ML/31G X	
JORNAY PM CP24	3	ketoconazole (topical) CREA	66	5/16"	126
JUBLIA	66	ketoconazole (topical) FOAM	66	KINRAY INSULIN SYRINGE	
JULUCA	49	ketoconazole (topical) SHAM 2 % .	66	PREFERRED PLUS/0.5ML/31G X	
JUXTAPID 5 MG, 10 MG, 20 MG, 30		MG	27	5/16"	126
MG	29	KETODAN KIT	66	KINRAY INSULIN SYRINGE	
JYLAMVO SOLN	34	KETO-DIASTIX	79	PREFERRED PLUS/1ML/31G X	
JYNNEOS	175	KETONE STRP	79	5/16"	126
KADCYLA	35			KINRAY INSULIN	
				SYRINGE/0.5ML/29G X 1/2"	126
				KISQALI	38

KISQALI FEMARA 200 DOSE	....37	monobasic w/ sod phosphate dibasic & monobasic)	.....146	KROGER LANCETS ULTRATHIN30G	.....103
KISQALI FEMARA 400 DOSE	....38				
KISQALI FEMARA 600 DOSE	....38	KPN PRENATAL TABS	.....156	KROGER LANCING DEVICE MISC	103
KITABIS PAK NEBU (tobramycin)	..4	KRAZATI	.....38	KROGER PEN NEEDLES 31G X8MM	.....126
KLARON (sulfacetamide sodium (acne))	.....65	KROGER AUTOLET LANCING DEVICE MISC	.....103	KROGER PEN NEEDLES/31G X3/16"	.....127
KLONOPIN TABS (clonazepam)	..17	KROGER BLOOD GLUCOSE TESTSTRIPS STRP	.....79	KROGER PEN NEEDLES/31G X5/16"	.....127
KLOXXADO LIQD	.....25	KROGER GLUCOSE	.....22	KROGER PEN NEEDLES/32G X5/32"	.....127
KMART VALU PLUS INSULIN SYRINGE/1ML/29G	.....126	KROGER HEALTHPRO GLUCOSETEST STRIPS STRP	...79	KROGER PREMIUM BLOOD GLUCOSE MONITORING KIT KIT	103
KMART VALU PLUS INSULIN SYRINGE/1ML/30G	.....126	KROGER HEALTHPRO TWIST LANCETS/26G	.....103	KROGER PREMIUM BLOOD GLUCOSE TEST STRIPS STRP	..79
KOATE SOLR	.....87	KROGER INSULIN SYRINGE/0.3ML/29G X 1/2"	....126	KYLEENA	.....57
KOATE-DVI SOLR 1000 UNIT	....87	KROGER INSULIN SYRINGE/0.3ML/31G X 5/16"	...126	KYPROLIS	.....38
KOGENATE FS KIT	.....87	KROGER INSULIN SYRINGE/0.5ML/29G X 1/2"	....126	labetalol hcl TABS	.....51
KOMBIGLYZE XR (saxagliptin-metformin hcl)	.....22	KROGER INSULIN SYRINGE/0.5ML/30G X 5/16"	...126	lacosamide SOLN OR 10 MG/ML, 50 MG/5ML, 100 MG/10ML	.....17
KONSYL DAILY FIBER PACK 100 %	.....90	KROGER INSULIN SYRINGE/0.5ML/31G X 5/16"	...126	lacosamide TABS	.....17
KONSYL ORIGINAL DAILY FIBER PACK	.....90	KROGER INSULIN SYRINGE/1ML/29G X 1/2"	.....126	LACRISERT	.....162
KONSYL-D POWD	.....90	KROGER INSULIN SYRINGE/1ML/31G X 5/16"	.....126	lactase CHEW 9000 UNIT	.....81
KONVOMEF SUSR	.....173	KROGER LANCETS	.....103	lactase TABS 3000 UNIT, 9000 UNIT	.....81
KOSELUGO	.....38	KROGER LANCETS 21G	.....103	LACTIC ACID E	.....71
KOSHER PRENATAL PLUS IRON TABS	.....156	KROGER LANCETS MICRO THIN33G	.....103	LACTIC ACID LOTN	.....71
KOVALTRY	.....87	KROGER LANCETS SUPER THIN	103	lactulose (encephalopathy)	.....85
KP MENS DAILY PACK MISC	...151	KROGER LANCETS THIN	.....103	lactulose SOLN	.....91
KP PRENATAL MULTIVITAMINS TABS	.....156	KROGER LANCETS THIN 26G	..103	LAGEVRIO	.....51
KP WOMENS DAILY PACK MISC	151			LAMICTAL CHEWABLE DISPERSIBLE CHEW (lamotrigine)	
K-PHOS NEUTRAL (pot phosphate					

17	LANCETS 33G UNIVERSAL DESIGN	103	LEADER INSULIN SYRINGE/0.5ML/30G X 5/16" ...	127	
LAMICTAL ODT KIT (lamotrigine) .	17	LANCETS MICRO THIN 33G	103	LEADER INSULIN SYRINGE/0.5ML/31G X 5/16" ...	127
LAMICTAL ODT KIT	17	LANCETS SUPER THIN 28G ...	103	LEADER INSULIN SYRINGE/1ML/28G X 1/2"	127
LAMICTAL ODT TBDP (lamotrigine) .	17	LANCETS THIN	103	LEADER INSULIN SYRINGE/1ML/29G X 1/2"	127
LAMICTAL STARTER/NOT TAKING CARBAMAZEPINE KIT (lamotrigine) .	17	LANCETS ULTRA THIN	103	LEADER INSULIN SYRINGE/1ML/31G X 5/16"	127
LAMICTAL STARTER/TAKING CARBAMAZEPINE/NOT TAKING VALPROATE KIT (lamotrigine)	17	LANCETS ULTRA THIN 30G	103	LEADER INSULIN SYRINGE/1ML/31G X 5/16"	127
LAMICTAL STARTER/TAKING VALPROATE KIT (lamotrigine)	17	LANCING DEVICE MISC	103	LEADER QUICK DISSOLVE GLUCOSE CHEW	22
LAMICTAL TABS (lamotrigine)	17	lanreotide acetate	84	LEADER UNIFINE PENTIPS PLUS/MINI/31GX3/16"	127
LAMICTAL XR KIT	17	LANREOTIDE ACETATE	84	LEADER UNIFINE PENTIPS PLUS/SHORT/31GX5/16"	127
LAMICTAL XR TB24 (lamotrigine) .	17	lansoprazole CPDR	172	LEADER UNIFINE PENTIPS PLUS/SHORT/31GX5/16"	127
lamivudine SOLN	49	lansoprazole TBDD	172	LEADER UNIFINE PENTIPS/MINI/31GX3/16"	127
lamivudine TABS	49	lanthanum carbonate CHEW	86	LEADER UNIFINE PENTIPS/NANO/32GX5/32"	127
lamivudine-zidovudine	49	LANTUS SOLN	24	LEADER UNIFINE PENTIPS/PLUS/32GX5/32"	127
lamotrigine CHEW	17	LANTUS SOLOSTAR SOPN	24	LEDIPASVIR/SOFOSBUVIR TABS 50	
lamotrigine KIT 25 MG	17	LANZO MISC	103	leflunomide	7
lamotrigine TABS	17	lapatinib ditosylate	38	LEMTRADA	169
lamotrigine TB24	18	LASIX TABS (furosemide)	82	lenalidomide	146
lamotrigine TBDP	18	LASTACFT	165	lenalidomide 5 MG, 10 MG, 15 MG, 25 MG	147
LANCET DEVICE ADJUSTABLE MISC	103	latanoprost SOLN	166	LENVIMA 10 MG DAILY DOSE ...	35
LANCET DEVICE WITH EJECTOR MISC	103	LATUDA (lurasidone hcl)	43	LENVIMA 12MG DAILY DOSE ...	35
LANCETS	103	LEADER ADVANCED LANCING DEVICE MISC	103	LENVIMA 14 MG DAILY DOSE ...	35
LANCETS 30G	103	LEADER GLUCOSE 6 MG-4 GM .	22	LENVIMA 18 MG DAILY DOSE ...	35
LANCETS 30G TWIST TOP	103	LEADER INSULIN SYRINGE/0.3ML/29G X 1/2"	127	LENVIMA 20 MG DAILY DOSE ...	35
LANCETS 30G/TWIST TOP	103	LEADER INSULIN SYRINGE/0.3ML/31G X 5/16" ...	127		
LANCETS 33G EXTRA FINE	103	LEADER INSULIN SYRINGE/0.5ML/28G X 1/2"	127		
		LEADER INSULIN SYRINGE/0.5ML/29G X 1/2"	127		

LENVIMA 24 MG DAILY DOSE ...35	levocarnitine (metabolic modifiers) SOLN OR 1 GM/10ML 83	levothyroxine sodium TABS 171
LENVIMA 4 MG DAILY DOSE ....35	levocarnitine (metabolic modifiers) TABs 83	LEXAPRO TABS (escitalopram oxalate) 20
LENVIMA 8 MG DAILY DOSE ....35	levocetirizine dihydrochloride SOLN 27	LEXETTE FOAM 70
LEPTIN MANAGER CAPS 81	levocetirizine dihydrochloride TABS 27	LEXIVA SUSP 49
LEQEMBI 168	levofloxacin SOLN OR 84	LEXIVA TABS (fosamprenavir calcium) 49
LEQVIO 29	levofloxacin TABS 84	LIALDA TBEC (mesalamine) 85
LESCOL XL TB24 (fluvastatin sodium) 29	levoleucovorin calcium SOLN 175 MG/17.5ML 40	LIBERTY MEDICAL LANCETS 30G . 103
LETAIRIS (ambrisentan) 54	levoleucovorin calcium SOLR 40	LIBERTY MINI LANCING DEVICE MISC 103
letrozole 36	levonorgestrel & eth estradiol TABS 55	LIBERVANT FILM 17
leucovorin calcium SOLN IJ 100 MG/10ML, 500 MG/50ML 40	levonorgestrel (emergency oc) 1.5 MG 56	LIBTAYO 35
leucovorin calcium SOLR 40	levonorgestrel-eth estradiol (triphasic) 55	LICART PT24 67
leucovorin calcium TABS 40	levonorgestrel-ethinyl estradiol (91- day) 55	lidocaine (anorectal) CREA 11
LEUKERAN 34	levonorgestrel-ethinyl estradiol (91- day) 0.03 MG-0.15 MG 55	lidocaine AERO 72
LEUKINE SOLR IJ 88	levonorgestrel-ethinyl estradiol (continuous) 55	lidocaine CREA 4 % 72
LEUPROLIDE ACETATE INJ 36	levonorgestrel-ethinyl estradiol-iron 55	lidocaine hcl (local anesth.) SOLN 0.5 %, 1 %, 2 %, 4 % 92
leuprolide acetate KIT IJ 1 MG/0.2ML 36	levorphanol tartrate TABS 9	lidocaine hcl CREA 3 %, 4 % 72
levalbuterol hcl 15	LEVOTHYROXINE SODIUM (T4) 55	lidocaine hcl CREA 4 % 72
levalbuterol tartrate 15	levothyroxine sodium CAPS 171	lidocaine hcl GEL 72
levamlodipine maleate 5 MG 52	LEVOTHYROXINE SODIUM SOLN IV 171	lidocaine hcl PRSY 72
LEVEMIR FLEXPEN SOPN 24	LEVOTHYROXINE SODIUM SOLR IV (levothyroxine sodium) 171	LIDOCAINE HYDROCHLORIDE SOLN 92
LEVEMIR FLEXTOUCH SOPN ... 24	levobunolol hcl 0.5 % 163	lidocaine OINT 72
LEVEMIR SOLN 24		lidocaine PTCH 4 %, 5 % 72
levetiracetam SOLN OR 100 MG/ML, 500 MG/5ML 18		lidocaine PTCH 5 % 72
levetiracetam TABS 18		lidocaine-benzalkonium LIQD 2.5 %- 0.13 % 72
levetiracetam TB24 18		lidocaine-hydrocortisone acetate (rectal) CREA EX 11
LEVICYN GEL 73		
levobunolol hcl 0.5 % 163		

lidocaine-prilocaine CREA	72	LITE TOUCH LANCING PEN MISC 103	LITETOUCH PEN NEEDLES/31G X 5MM/MINI	128	
lidocaine-prilocaine KIT	72	LITETOUCH INSULIN PEN NEEDLES/32G X 4MM/MINI	127	LITETOUCH PEN NEEDLES/31G X 8MM/SHORT	128
lidocaine-transparent dressing 4 % 72		LITETOUCH INSULIN SYRINGE/0.3ML/29G X 1/2"	127	lithium	42
LIDODERM PTCH (lidocaine)	72	LITETOUCH INSULIN SYRINGE/0.3ML/31G X 5/16" ...	127	lithium carbonate CAPS	42
LIFE PACK MENS MISC	151	LITETOUCH INSULIN SYRINGE/0.5ML/30G X 5/16" ...	127	lithium carbonate TABS	42
LIFE PACK WOMENS MISC	151	LITETOUCH INSULIN SYRINGE/0.5ML/31G X 5/16" ...	127	lithium carbonate TBCR	42
LIKMEZ SUSP	31	LITETOUCH INSULIN SYRINGE/U- 100/0.3ML/31G X 5/16"	127	LITHOBID TBCR (lithium carbonate) . 42	
LILETTA 20.1 MCG/DAY	57	LITETOUCH INSULIN SYRINGE/U- 100/0.5ML/28G X 1/2"	127	LITTLE REMEDIES SALINE SPRAY/DROPS SOLN	161
linezolid SUSR	32	LITETOUCH INSULIN SYRINGE/U- 100/0.5ML/29G X 1/2"	127	LIVALO (pitavastatin calcium)	29
linezolid TABS	32	LITETOUCH INSULIN SYRINGE/U- 100/0.5ML/30G X 5/16"	127	LIVE BETTER ADVANCED LANCING DEVICE MISC	103
liniments & rubs LOTN	72	LITETOUCH INSULIN SYRINGE/U- 100/0.5ML/29G X 1/2"	127	LIVE BETTER LANCET SUPERTHIN 30G	103
LINZESS	85	LITETOUCH INSULIN SYRINGE/U- 100/0.5ML/31G X 5/16"	127	LIVE BETTER LANCET ULTRATHIN 28G	103
liothyronine sodium SOLN	171	LITETOUCH INSULIN SYRINGE/U- 100/0.5ML/31G X 5/16"	127	LIVITA ADULTS LIQD	151
liothyronine sodium TABS	171	LITETOUCH INSULIN SYRINGE/U- 100/1ML/28G X 1/2"	127	LIVITA CHILDREN LIQD	154
LIPIDSHIELD PLUS TABS	159	LITETOUCH INSULIN SYRINGE/U- 100/1ML/29G X 1/2"	127	LIVTENCITY	50
LIPITOR TABS (atorvastatin calcium)	29	LITETOUCH INSULIN SYRINGE/U- 100/1ML/31G X 5/16"	127	L-MESITRAN SOFT WOUND GEL GEL	75
LIPOFEN CAPS (fenofibrate)	28	LITETOUCH LANCETS MICRO THIN 33G	103	LO LOESTRIN FE TABS	55
LIPOTRIAD VISION SUPPORT CAPS	159	LITETOUCH PEN NEEDLES 29GX12.7MM	127	LOCOID LIPOCREAM	70
LIPOTRIAD VISION SUPPORTPLUS CAPS	159	LITETOUCH PEN NEEDLES 31GX8MM SHORT	128	LOCOID LOTN (hydrocortisone butyrate)	70
LIPOTRIAD VISIONARY CAPS ..	159	LITETOUCH PEN NEEDLES/31G X 3/16"	128	LODOSYN (carbidopa)	41
LIQREV SUSP	54			LOHIST-D LIQD	60
lisdexamfetamine dimesylate CAPS 2				LOHIST-DM SYRP	60
lisdexamfetamine dimesylate CHEW . 2				LOKELMA	147
lisinopril & hydrochlorothiazide	31			LOMAIRA TABS	2
lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG	29				
LITE TOUCH LANCETS	103				

LONGS GLUCOSE	23	lorazepam TABS	13	LUCIRA CHECK IT COVID-19TEST KIT KIT	79
LONGS INSULIN SYRINGE/0.5ML/31G X 5/16" ...	128	LORBRENA	38	luliconazole	66
LONGS LANCETS STANDARD .	103	LOREEV XR CS24 1 MG, 2 MG, 3 MG	13	LUMAKRAS	38
LONGS LANCETS THIN	103	losartan potassium & hydrochlorothiazide	31	LUMIFY	163
LONGS LANCETS ULTRA THIN 103		losartan potassium	30	LUMIGAN SOLN 0.01 %	166
LONSURF	38	LOTEMAX GEL (loteprednol etabonate)	165	LUMOXITI	35
loperamide hcl CAPS	25	LOTEMAX OINT	165	LUNESTA (eszopiclone)	90
loperamide hcl TABS	25	LOTEMAX SM GEL	165	LUNSUMIO	35
loperamide-simethicone TABS	25	LOTEMAX SUSP (loteprednol etabonate)	165	LUPRON DEPOT (1-MONTH) KIT IM	37
LOPID TABS (gemfibrozil)	28	LOTENSIN 10 MG, 20 MG, 40 MG (benazepril hcl)	29	LUPRON DEPOT (3-MONTH) KIT IM	37
lopinavir-ritonavir SOLN	49	LOTENSIN HCT 12.5 MG-10 MG, 12.5 MG-20 MG, 25 MG-20 MG (benazepril & hydrochlorothiazide) 31		LUPRON DEPOT (4-MONTH) IM .	37
lopinavir-ritonavir TABS	49	loteprednol etabonate GEL	165	LUPRON DEPOT (6-MONTH) IM .	37
LOPRESSOR TABS (metoprolol tartrate)	52	loteprednol etabonate SUSP	165	LUPRON DEPOT-PED (1-MONTH) .	83
LOPROX	66	LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (amlodipine besylate-benazepril hcl) .	31	LUPRON DEPOT-PED (3-MONTH) .	83
LOPROX CREA (ciclopirox olamine) .	66	lovastatin TABS	29	LUPRON DEPOT-PED (6-MONTH) IM	83
LOPROX KIT	66	LOVAZA (omega-3-acid ethyl esters)	28	lurasidone hcl	43
LOPROX SUSP (ciclopirox olamine) .	66	LOVENOX SOLN IJ 300 MG/3ML (enoxaparin sodium)	16	LUTATHERA	39
LOQTORZI	35	LOVENOX SOSY (enoxaparin sodium)	16	LUZU (luliconazole)	66
loratadine & pseudoephedrine TB12 .	60	loxapine succinate	45	LYBALVI	169
loratadine & pseudoephedrine TB24 .	60	lubiprostone	85	lycopene CAPS	3
loratadine CHEW	28	LUCEMYRA	168	LYNPARZA TABS	38
loratadine SOLN	28			LYRICA CAPS (pregabalin)	18
loratadine TABS	28			LYRICA CR (pregabalin (once- daily))	170
loratadine TBDP 10 MG	28			LYRICA SOLN (pregabalin)	18
lorazepam CONC	13			LYSIPLEX PLUS LIQD	151

LYSODREN	37	OR	91	MAXITROL OINT (neomycin-polymy- dexameth)	165
LYTGOBI	38	magnesium TABS 400 MG, 400 MG . 145		MAXITROL SUSP (neomycin- polymy-dexameth)	165
LYUMJEV KWIKPEN SOPN	24	MAKENA SOAJ	168	MAYZENT STARTER PACK TBPK 169	
LYUMJEV SOLN	24	malathion	74	MAYZENT TABS	169
LYUMJEV TEMPO PEN SOPN ...	24	MALE SUPPORT CAPS	81	meclizine hcl CHEW	26
LYVISPAH PACK	160	MARATHON MEDICAL PENTIPS31GX5MM	128	meclizine hcl TABS 12.5 MG, 25 MG 26	
MACROBID (nitrofurantoin monohyd macro)	32	MARATHON MEDICAL PENTIPS31GX8MM	128	meclofenamate sodium CAPS	6
MACRODANTIN (nitrofurantoin macrocrystal)	32	MARATHON MEDICAL PENTIPS32GX4MM	128	MEDCAPS DPO CAPS	159
MAGELLAN INSULIN SAFETY SYRINGE/U-100/0.3ML/29G X 1/2" . 128		maraviroc TABS	49	MEDCAPS GI CAPS	159
MAGELLAN INSULIN SAFETY SYRINGE/U-100/0.5ML/29G X 1/2" . 128		MAR-COF CG EXPECTORANT LIQD	60	MEDCAPS IS CAPS	159
MAGELLAN INSULIN SAFETY SYRINGE/U-100/0.5ML/30G X 5/16"	128	MARGENZA	36	MEDCAPS T3 CAPS	159
MAGELLAN INSULIN SAFETY SYRINGE/U-100/1ML/29G X 1/2" 128		MARPLAN	19	MEDIC INSULIN SYRINGE/0.5ML/30G X 5/16" ...	128
magnesium citrate 1.745 GM/30ML 91		MATULANE	40	MEDICHOICE PRE-SET SAFETY LANCET DUAL USE	103
magnesium hydroxide SUSP 2400 MG/30ML	91	MAVENCLAD	169	MEDICHOICE PRE-SET SAFETY LANCET LOW FLOW	103
magnesium hydroxide SUSP 7.75 %, 400 MG/5ML, 1200 MG/15ML, 2400 MG/30ML	91	MAVYRET PACK	50	MEDICHOICE PRE-SET SAFETY LANCET MEDIUM FLOW	103
magnesium oxide (mg supplement) TABS 400 MG	145	MAVYRET TABS	50	MEDICHOICE PRE-SET SAFETY LANCET MODERATE FLOW ...	103
magnesium oxide TABS 400 MG ..	12	MAXALT TABS 10 MG (rizatriptan benzoate)	144	MEDICHOICE SAFETY LANCETEXTRA	103
magnesium salicylate 500 MG	8	MAXALT-MLT TBDP 10 MG (rizatriptan benzoate)	144	MEDICHOICE SAFETY LANCETNORMAL	104
magnesium salicylate tetrahydrate .	8	MAXI DEET LIQD	73	MEDICINE SHOPPE PEN NEEDLES 31G X 8MM	128
magnesium sulfate (laxative) GRAN		MAXI-COMFORT INSULIN SYRINGE/U-100/0.5ML/28GX1/2" 128		MEDIHONEY WOUND/BURNDRESSING GEL ..	75
		MAXI-COMFORT INSULIN SYRINGE/U-100/1ML/28GX1/2" ..	128	MEDLANCE PLUS EXTRA LANCETS 21G	104
		MAXICOMFORT INSULIN SYRINGES 27G X 1/2"	128		
		MAXIDEX SUSP OP	165		

MEDLANCE PLUS LANCETS ...104	MEIJER BLOOD GLUCOSE MONITORING KIT KIT 104	MEMORY COMPLEX BRAIN HEALTH TABS 159
MEDLANCE PLUS LANCETS LITE 25G .....104	MEIJER BLOOD GLUCOSE TESTSTRIPS STRP .....79	MENACTRA .....174
MEDLANCE PLUS LITE LANCETS 25G .....104	MEIJER COLOR LANCETS UNIVERSAL 33G 104	MENATROL CAPS 151
MEDLANCE PLUS SPECIAL LANCETS 0.8MM .....104	MEIJER GLUCOSE .....23	M-END DMX 60
MEDLANCE PLUS SUPERLITE 30G .....104	MEIJER LANCETS 104	MENEST 0.3 MG, 0.625 MG, 1.25 MG 84
MEDLANCE PLUS SUPERLITE 30G/COMFORT MAX .....104	MEIJER LANCETS THIN .....104	MENQUADFI .....174
MEDLANCE PLUS UNIVERSAL LANCETS 21G .....104	MEIJER LANCETS UNIVERSAL21G .....104	MENS 50+ ADVANCED CAPS ...151
MEDLANCE PLUS/LITE 25G ....104	MEIJER LANCETS UNIVERSAL30G .....104	MENS MULTIVITAMIN CHEW ...151
MEDLANCE/EXTRA 104	MEIJER LANCETS UNIVERSAL33G .....104	MENS PACK MISC .....151
MEDLANCE/LITE 104	MEIJER PEN NEEDLES 31G X8MM .....128	menthol (topical analgesic) AERO .66
MEDLANCE/UNIVERSAL 104	MEIJER PREMIUM BLOOD GLUCOSE MONITORING KIT KIT 104	MENVEO SOLN 174
MEDROL DOSEPAK TBPK (methylprednisolone) .....57	MEIJER SUPER THIN LANCETS 104	MENVEO SOLR 174
MEDROL TABS (methylprednisolone) .....57	MEKINIST SOLR .....38	meperidine hcl SOLN OR 50 MG/5ML 9
MEDROL TABS .....57	MEKINIST TABS .....38	meperidine hcl TABS 50 MG .....9
medroxyprogesterone acetate (contraceptive) SUSP IM .....57	MEKTOVI .....38	meprobamate .....12
medroxyprogesterone acetate (contraceptive) SUSY IM .....57	melatonin TABS 3 MG 3	mercaptopurine TABS 34
medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG .....168	meloxicam CAPS .....6	meropenem .....32
mefenamic acid CAPS 6	meloxicam TABS .....6	mesalamine CP24 85
mefloquine hcl .....33	melphalan hcl IV 34	mesalamine CPR 85
megestrol acetate TABS 40 MG ...37	memantine hcl CP24 168	mesalamine CPDR 85
megestrol acetate TABS .....37	memantine hcl SOLN 2 MG/ML ..168	mesalamine ENEM 85
MEIJER ALCOHOL SWABS EXTRA-THICK .....113	memantine hcl TABS .....168	mesalamine SUPP .....85
	MEMORALL CAPS .....159	mesalamine TBEC 1.2 GM 85
		mesalamine TBEC 800 MG .....85
		mesalamine w/ cleanser 85
		mesna SOLN .....40
		MESNEX SOLN (mesna) .....40
		MESNEX TABS .....40

METAMUCIL WAFR	90	34	ACETATE SUSP 40 MG/ML, 80 MG/ML	57
metaxalone	160	methoxsalen rapid	68	methylprednisolone acetate SUSP
metformin hcl SOLN	22	methsuximide	19	57
metformin hcl TABS 500 MG, 850 MG, 1000 MG	22	METHYL PROTECT CAPS	159	methylprednisolone sod succ 40 MG, 500 MG, 1000 MG
metformin hcl TABS 625 MG	22	methylcellulose (laxative) POWD ..	90	57
metformin hcl TB24 500 MG, 1000 MG	22	methylcellulose (laxative) TABS ..	90	methylprednisolone TABS 4 MG ..
metformin hcl TB24 500 MG, 750 MG	22	methylcellulose (laxative) TABS ..	90	57
methadone hcl CONC	9	methylcellulose (laxative) TABS ..	90	methylprednisolone TABS 8 MG, 16 MG, 32 MG
methadone hcl SOLN OR	9	methylcellulose (laxative) TABS ..	90	57
methadone hcl TABS	9	methylcellulose (laxative) TABS ..	90	methylprednisolone TBPK
methadone hcl TBSO	9	methylcellulose (laxative) TABS ..	90	57
METHADOSE CONC (methadone hcl)	9	METHYL-GUARD CAPS	160	methylprednisolone TBPK
METHADOSE SUGAR-FREE CONC (methadone hcl)	9	METHYL-GUARD PLUS CAPS ..	160	57
methamphetamine hcl	2	METHYLIN SOLN 10 MG/5ML (methylphenidate hcl)	3	metoclopramide hcl SOLN OR 5 MG/5ML, 10 MG/10ML
methazolamide TABS	82	METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	85
methenamine hippurate	32	METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	metoclopramide hcl TABS
methenamine mandelate 0.5 GM, 1 GM	32	METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	85
methimazole TABS	171	METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	metolazone
METHIONINE-200 CAPS	81	METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	82
METHITEST TABS	11	METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	metoprolol & hydrochlorothiazide TABs
methocarbamol TABS 500 MG, 750 MG	160	METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	31
methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML	34	METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	metoprolol succinate TB24 50 MG, 100 MG, 200 MG
methotrexate sodium SOLR	34	METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	52
methotrexate sodium TABS 2.5 MG		METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	metoprolol succinate TB24
		METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	52
		METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	metoprolol tartrate TABS
		METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	52
		METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	metronidazole (topical) CREA
		METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	74
		METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	metronidazole (topical) GEL
		METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	74
		METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	metronidazole (topical) LOTN
		METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	74
		METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	metronidazole CAPS
		METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	32
		METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	metronidazole TABS
		METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	32
		METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	metronidazole vaginal
		METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	177
		METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	metyrosine
		METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	30
		METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	mexiletine hcl
		METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	13
		METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	MG PLUS PROTEIN TABS
		METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	160
		METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	MG217 DANDRUFF THERAPEUTIC SHAMPOO/CONDITIONER SHAM
		METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	72
		METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	MG217 PSORIASIS THERAPEUTIC
		METHYLIN SOLN 5 MG/5ML (methylphenidate hcl)	3	

SHAMPOO/CONDITIONER SHAM 72	mineral oil OIL OR 91	MM EASY TOUCH GLUCOSE TEST STRIPS STRP 79
MICARDIS (telmisartan) 30	MINI LANCING DEVICE MISC ... 104	MM INSULIN SYRINGE/U- 100/0.3ML/31G X 5/16" 128
MICARDIS HCT (telmisartan- hydrochlorothiazide) 31	MINIPRESS CAPS 2 MG, 5 MG (prazosin hcl) 30	MM INSULIN SYRINGE/U- 100/1/2ML/30G X 5/16" 128
miconazole nitrate (topical) AERP .67	minocycline hcl CAPS 171	MM INSULIN SYRINGE/U- 100/1/2ML/31G X 5/16" 128
miconazole nitrate (topical) CREA .67	minocycline hcl TABS 171	MM INSULIN SYRINGE/U- 100/1ML/31G X 5/16" 128
miconazole nitrate (topical) POWD EX 67	minocycline hcl TB24 171	MM LANCING DEVICE MISC 104
MICONAZOLE NITRATE SOLN .. 67	MINOLIRA TB24 171	MM PEN NEEDLES 31G X 3/16" 128
miconazole nitrate vaginal CREA 177	minoxidil 2.5 MG, 10 MG 31	MM PEN NEEDLES 31G X 5/16" 128
miconazole nitrate vaginal KIT ... 177	mirabegron TB24 173	MM PEN NEEDLES 32G X 5/32" 128
miconazole nitrate vaginal SUPP 177	MIRAPEX ER TB24 0.375 MG, 0.75 MG, 2.25 MG, 3 MG, 3.75 MG, 4.5 MG (pramipexole dihydrochloride) 41	MM TWIST LANCETS 104
miconazole-zinc oxide-white petrolatum 67	MIRCERA 88	M-M-R II SOLR 175
MICONI-AL SOLN 67	MIRCETTE (desogestrel-ethinyl estradiol (biphasic)) 55	M-NATAL PLUS TABS 156
MICROCHAMBER DEVI 142	MIRENA 57	modafinil 3
MICROCHAMBER MISC 142	mirtazapine TABS 19	MODERNA COVID-19 VACCINE SUSP 176
MICRODOT PEN NEEDLE/32G X 4 MM 128	mirtazapine TBDP 19	MODERNA COVID-19 VACCINE,BIVALENT ORIGINAL AND OMICRON 175
MICRODOT TEST STRIPS STRP .79	misoprostol 173	MODERNA COVID-19 VACCINE/6MO-11Y/2023-24 SUSP . 175
MICRODOT XTRA TEST STRIPS STRP 79	MITIGARE CAPS (colchicine) 87	MODERNA COVID-19 VACCINE/BIVALENT/6MO-5Y .. 175
MICROLET LANCETS 104	mitomycin SOLR IV 5 MG 37	MODERNA COVID-19 VACCINE/BIVALENT/BA.4/BA.5 175
MICROLET NEXT MISC 104	mitomycin SOLR IV 37	MODERNA COVID-19 VACCINE6MO-5Y SUSP 176
MICROSPACER MISC 142	mitoxantrone hcl 2 MG/ML 37	
MIEBO 165	MM BIOTIN/KERATIN CAPS 160	
miglitol 21	MM BLOOD GLUCOSE MONITORING SYSTEM KIT 104	
MIGRANAL SOLN NA (dihydroergotamine mesylate) 143	MM BLULINK GLUCOSE MONITORING SYSTEM DEVI ... 104	
MIL ADREGEN TABS 160	MM BLULINK GLUCOSE TEST STRIPS STRP 79	
mineral oil ENEM 91	MM EASY TOUCH BLOOD GLUCOSE METER KIT 104	

moexipril hcl	29	SYRINGE/SAFETY/PERM NEEDLE/1ML/29G X 1/2"	129	MONOLET LANCETS	104
molindone hcl	46	MONOJECT INSULIN SYRINGE/SOFTPACK/1ML/27G X 1/2"	129	MONOLET OPD LANCETS	104
mometasone furoate (nasal) SUSP 161		MONOJECT INSULIN SYRINGE/SOFTPACK/U- 100/0.5ML/28G X 1/2"	129	MONOLETTOR SAFETY LANCETS 104	
mometasone furoate CREA	70	MONOJECT INSULIN SYRINGE/SOFTPACK/U- 100/0.5ML/28G X 1/2"	129	montelukast sodium CHEW	14
mometasone furoate OINT	70	MONOJECT INSULIN SYRINGE/U- 100/0.5ML/30G X 5/16"	129	montelukast sodium PACK	14
mometasone furoate SOLN	70	MONOJECT INSULIN SYRINGE/U- 100/1ML/28G X 1/2"	129	montelukast sodium TABS	14
MOMMYS BLISS MULTIVITAMINORGANIC DROPS LIQD	154	MONOJECT INSULIN SYRINGE/REGULAR LUER TIP/SOFTPACK/1ML	129	MOOD FOOD CAPS	151
MONJUVI	35	MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.3ML/29G X 1/2"	129	MOOD FOOD ES CAPS	151
MONOJECT INSULIN SYRINGE/1ML	128	MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.3ML/31G X 5/16"	129	morphine sulfate beads	9
MONOJECT INSULIN SYRINGE/1ML/31G X 5/16"	128	MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.5ML/28G X 1/2"	129	morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG	9
MONOJECT INSULIN SYRINGE/DETACH NEEDLE/1ML/25G X 5/8"	128	MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.5ML/29G X 1/2"	129	morphine sulfate SOLN OR 10 MG/5ML, 20 MG/5ML, 20 MG/ML, 100 MG/5ML	9
MONOJECT INSULIN SYRINGE/DETACH NEEDLE/1ML/27G X 1/2"	128	MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.5ML/31G X 5/16"	129	morphine sulfate SOLN OR 20 MG/ML, 100 MG/5ML	9
MONOJECT INSULIN SYRINGE/PERM NEEDLE/1ML/28G X 1/2"	128	MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.5ML/30G X 5/16"	129	morphine sulfate SUPP	9
MONOJECT INSULIN SYRINGE/PERM NEEDLE/U- 100/0.5ML/28G X 1/2"	128	MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.5ML/31G X 5/16"	129	morphine sulfate TABS	9
MONOJECT INSULIN SYRINGE/SAFETY/PERM NEEDLE/0.3ML/29G X 1/2"	129	MONOJECT ULTRA COMFORT INSULIN SYRINGE/1ML/28G X 1/2" 129		morphine sulfate TBCR	9
MONOJECT INSULIN SYRINGE/SAFETY/PERM NEEDLE/0.3ML/29GX1/2"	129	MONOJECT ULTRA COMFORT INSULIN SYRINGE/1ML/29G X 1/2" 129		MOTTEGRITY	84
MONOJECT INSULIN SYRINGE/SAFETY/PERM NEEDLE/0.5ML/29G X 1/2"	129			MOTPOLY XR CP24	18
MONOJECT INSULIN				MOUNJARO	23
				MOVANTIK	85
				MOVIPREP (peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid) 90	
				moxifloxacin hcl (ophth) SOLN OP 163	
				moxifloxacin hcl TABS	84
				MPD SAFETY LANCET 21G/1.8MM 104	

MPD SAFETY LANCET 28G/1.8MM 104	MUCINEX COUGH & CONGESTION CHILDRENS LIQD (phenylephrine w/ dm-gg) .....60	CLD/FLU DAY&NIGHT MS LQPK .61
MPD SAFETY LANCET 30G/1.8MM 104	MUCINEX D MAXIMUM STRENGTH TB12 (pseudoephedrine-guaifenesin) .....60	MUCINEX FAST-MAX COLD/FLUNIGHTSHIFT SEV CLD/FLU DAY&NIGHT MS TBPk .61
MPD SAFETY LANCETS 23G/1.8MM .....104	MUCINEX D TB12 (pseudoephedrine-guaifenesin) ...61	MUCINEX FAST-MAX DAY/NITE M/S MISC .....61
MS CONTIN TBCR (morphine sulfate) .....9	MUCINEX DM MAXIMUM STRENGTH TB12 (dextromethorphan-guaifenesin) ...60	MUCINEX FAST-MAX KICKSTART SEVERE COLD & FLU LIQD (phenylephrine-dm-gg w/ apap) ... 61
MS INSULIN SYRINGE/0.3ML/31G X 5/16" .....129	MUCINEX DM TB12 (dextromethorphan-guaifenesin) ...60	MUCINEX FAST-MAX SEVERE CONGESTION & COUGH ARCTIC BURST LIQD (phenylephrine w/ dm- gg) .....61
MS INSULIN SYRINGE/0.5ML/31G X 5/16" .....129	MUCINEX FAST-MAX COLD & FLU DAY/NIGHT CPPK (phenylephrine- doxylamine-dm-guaifenesin-apap) 61	MUCINEX FAST-MAX SEVERE CONGESTION & COUGH LIQD (phenylephrine w/ dm-gg) .....61
MS INSULIN SYRINGE/1ML/31G X 5/16" .....129	MUCINEX FAST-MAX COLD FLU& SORE THROAT CLEAR & COOL LIQD (phenylephrine-dm-gg w/ apap) .....61	MUCINEX FAST-MAX SEVERE CONGESTION & COUGH TABS .61
MUCINEX CHILDRENS FREEFORM MULTI-SYMP TOM COLD,FLU & SORE THR LIQD (phenylephrine- dm-gg w/ apap) .....60	MUCINEX FAST-MAX COLD/FLU LIQD (phenylephrine-dm-gg w/ apap) .....61	MUCINEX FAST-MAX SEVERE CONGESTION/COUGH NIGHTSHIFT COLD/FLU TBPk ...61
MUCINEX CHILDRENS FREEFROM DAY TIME/NIGHT TIME LQPK ....60	MUCINEX FAST-MAX COLD/FLU LIQD (phenylephrine-dm-gg w/ apap) .....61	MUCINEX FAST-MAX/NIGHTSHIFT DM MAX/COLD & FLU/DAY/NIGHT . 61
MUCINEX CHILDRENS FREEFROM MULTI-SYMP TOM COLD & FLU NIGHTTIM SOLN .....60	MUCINEX FAST-MAX COLD/FLU MAXIMUM STRENGTH LIQD (phenylephrine-dm-gg w/ apap) ... 61	MUCINEX FAST-MAY DAY/NIGHT COLD & FLU MAXIMUM STRENGTH CPPK (phenylephrine- doxylamine-dm-guaifenesin-apap) 61
MUCINEX CHILDRENS FREEFROM MULTI-SYMP TOM COLD AND STUFFY NOS LIQD (phenylephrine w/ dm-gg) .....60	MUCINEX FAST-MAX COLD/FLU/SORE THROAT MAXIMUM STRENGTH CAPS (phenylephrine-dm-gg w/ apap) ... 61	MUCINEX FREEFROM COLD & FLU DAYTIME/NIGHTTIME LQPK .....61
MUCINEX CHILDRENS MULTI- SYMPTOM COLD LIQD (phenylephrine w/ dm-gg) .....60	MUCINEX FAST-MAX COLD/FLUMAXIMUM STRENGTH CAPS (phenylephrine-dm-gg w/ apap) .....61	MUCINEX FREEFROM COLD & FLU NIGHTTIME SOLN .....61
MUCINEX CHILDRENS PACK ....60	MUCINEX FAST-MAX COLD/FLUNIGHTSHIFT SEV	MUCINEX INSTASOOTHE SORETHROAT + COUGH RELIEF 148
MUCINEX CLEAR & COOL DAY/NIGHT LQPK .....60		MUCINEX INSTASOOTHE SORETHROAT + PAIN RELIEF LIQD 147
MUCINEX CLEAR & COOL/FASTMAX/NIGHTSHIFT LQPK .....60		
MUCINEX COLD & FLU CAPS ....60		

MUCINEX INSTASOOTHE SORETHROAT + PAIN RELIEF LOZG 147	MAXIMUM STRENGTH CPPK (phenylephrine-doxylamine-dm- guaifenesin-apap) 62	151 multiple vitamins w/ minerals TBCR 151
MUCINEX INSTASOOTHE SORETHROAT + SOOTHING COMFORT LOZG 147	MUCINEX SINUS-MAX PRESSURE/PAIN/COUGH MAXIMUM STRENGTH CAPS (phenylephrine-dm-gg w/ apap) ... 62	MULTISOURCE CALCIUM MAGNESIUM & D FORMULA TABS . 146
MUCINEX JUNIOR COLD & FLU TABS 61	MUCINEX SINUS- MAX/NIGHTSHIFT DAY/NIGHT MAXIMUM STRENGTH TBPK 62	MULTISTIX 10 SG 79 MULTIVITAMIN ADULT TABS ... 154
MUCINEX JUNIOR COUGH & CONGESTION TABS 61	MUCINEX SINUS- MAX/NIGHTSHIFT LQPK 62	MULTIVITAMIN GUMMIES CHILDRENS 3 MG-1.5 UNIT-34 MG- 50 UNIT-250 UNIT-16 MG-50 MG 155
MUCINEX MAXIMUM STRENGTH TB12 (guaifenesin) 64	MUCINEX TB12 (guaifenesin) 64	MULTIVITAMIN INFANT & TODDLER SOLN OR 155
MUCINEX MULTI-SYMPTOM COLD DAY/NIGHT PACK MISC 62	MULTAQ 13	MULTIVITAMIN INFANT/TODDLER SOLN OR 155
MUCINEX NIGHTSHIFT COLD & FLU ARCTIC BURST SOLN 62	MULTI MEGA MINERALS TABS .146	MULTIVITAMIN PLUS IRON CHILDRENS CHEW 155
MUCINEX NIGHTSHIFT COLD & FLU SOLN 62	MULTI PRENATAL TABS 156	MULTIVITAMIN TABS 37.5 MG-0.1 MG-10 MCG-2 MG-20 MG-1500 MCG-1 MG-1.5 MG-28.5 MG 154
MUCINEX NIGHTSHIFT COLD &FLU MAXIMUM STRENGTH TABS 62	MULTI VITAMIN TABS 154	MULTIVITAMIN W/IRON/INFANT/TODDLER SOLN 155
MUCINEX NIGHTSHIFT COLD &FLU MAXIMUM STRENGTH TABS 62	MULTI VITAMIN/D-3 TABS 154	MULTIVITAMIN WITH FLUORIDE CHEW 154
MUCINEX NIGHTSHIFT SEVERECOLD & FLU MAXIMUM STRENGTH SOLN 62	MULTIA CAPS 151	MULTIVITAMIN+ LIQD 154
MUCINEX NIGHTSHIFT SEVERECOLD & FLU MAXIMUM STRENGTH TABS 62	MULTI-LANCET DEVICE MISC ..104	MULTI-VITE LIQD 151
MUCINEX NIGHTSHIFT SINUS SOLN 62	MULTI-MAC 156	MULTI-VIT-FLOR CHEW 154
MUCINEX NIGHTSHIFT SINUSCLEAR&COOL SOLN 62	MULTI-MINERALS TABS 146	mupirocin calcium (topical) 66
MUCINEX NIGHTSHIFT SINUSMAXIMUM STRENGTH TABS 62	multiple minerals w/ vitamins TABS 146	mupirocin OINT 66
MUCINEX SEVERE CONGESTIONU COUGH/COLD & FLU DAY/NIGHT LQPK 62	multiple vitamin CAPS 154	MURO 128 OINT (sodium chloride hypertonic) 165
MUCINEX SINUS-MAX DAY/NIGHT Index 61	multiple vitamin TABS 154	MURO 128 SOLN (sodium chloride hypertonic) 166
	multiple vitamins w/ calcium TABS 149	
	multiple vitamins w/ iron TABS ... 149	
	multiple vitamins w/ minerals CAPS 151	
	multiple vitamins w/ minerals CHEW . 151	
	multiple vitamins w/ minerals LIQD	

MURO 128 SOLN	165	MYSOLINE (primidone)	18	NAPRELAN TB24 (naproxen sodium)	6
MVASI	35	nabumetone	6	6
MVW COMPLETE FORMULATION		nadolol TABS 20 MG, 40 MG, 80 MG		NAPROSYN SUSP (naproxen)	6
CAPS	152	52	naproxen sodium CAPS	6
MVW COMPLETE		naftifine hcl CREA	67	naproxen sodium TABS 220 MG ...	6
FORMULATIOND3000 CAPS	152	naftifine hcl GEL 2 %	67	naproxen sodium TABS	6
MVW COMPLETE		NAFTIN GEL (naftifine hcl)	67	naproxen sodium TB24	6
FORMULATIOND500 CAPS	152	NAFTIN GEL	67	naproxen SUSP	6
MVW COMPLETE		NALFON CAPS (fenoprofen calcium)		naproxen TABS	7
FORMULATIONMINIS CAPS	152	6	naproxen TBEC	7
MVW HI-D ADEK GUMMIES CHEW .		NALFON TABS (fenoprofen calcium)		naproxen-esomeprazole magnesium	
152		6		6
MVW MODULATOR FORMULATION		NALOCET TABS	10	naratriptan hcl	144
CAPS	152	naloxone hcl LIQD	25	NARCAN LIQD (naloxone hcl)	26
MVW MODULATOR FORMULATION		naloxone hcl SOCT	25	NARDIL (phenelzine sulfate)	19
MINIS CAPS	152	naloxone hcl SOLN 0.4 MG/ML, 4		NASACORT ALLERGY 24HR AERO	
MX-SOL SF SYRP	167	MG/10ML	26	(triamcinolone acetonide (nasal))	161
MX-SOL SYRP	167	naloxone hcl SOSY	26	NASACORT ALLERGY 24HR	
mycophenolate mofetil CAPS	147	naltrexone hcl	26	CHILDRENS AERO (triamcinolone	
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GLUCOSE TEST STRP	79	naphazoline w/ pheniramine 0.315		NATESTO GEL NA	11
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penciclovir	68	permethrin LIQD EX	74	PHARMACIST CHOICE SELECTLANCETS/ULTRA THIN 106	
penicillamine CAPS	146	perphenazine TABS 4 MG	47	PHARMACIST CHOICE ULTRA THIN LANCETS	106
penicillamine TABS	146	perphenazine TABS	47	PHARMACIST CHOICE ULTRA THIN LANCETS 28G	106
penicillin v potassium SOLR	167	perphenazine-amitriptyline	169	PHARMACIST CHOICE ULTRA THIN LANCETS 30G	106
penicillin v potassium TABS	167	PERRY PRENATAL CAPS	156	PHARMACIST CHOICE ULTRA THIN LANCETS 31G	106
PENNSAID SOLN EX 2 % (diclofenac sodium (topical))	67	PERSERIS PRSY	44	PHARMACIST CHOICE ULTRA THIN LANCETS 33G	106
pentamidine isethionate IN	32	PERTZYE CPEP	81		
PENTASA CPCR (mesalamine) ...	85	PFIZER-BIONTECH COVID-19VACCINE SUSP	176		
PENTASA CPCR	85	PFIZER-BIONTECH COVID-19VACCINE/5-11Y SUSP	176		
pentazocine w/ naloxone hcl	10	PFIZER-BIONTECH COVID-19VACCINE/5-11Y/2023-24 SUSP 176			
PENTIPS 29GX12MM	130	PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y SUSP	176		
PENTIPS 31G X 5MM	130	PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y/2023-24 SUSP 176			
PENTIPS 31G X 8MM	130				
PENTIPS 31GX5MM	130				
PENTIPS 31GX6MM	130				
PENTIPS 31GX8MM	130				
PENTIPS 32G X 4MM	130				
PENTIPS 32GX4MM	130				
PENTIPS 32GX6MM	130				

PHARMACY COUNTER LANCETS . 106	phenylephrine-acetaminophen- guaifenesin TABS 5 MG-200 MG-325 MG 62	PHESGO 38
phenazopyridine hcl TABS 100 MG, 95 MG, 99.5 MG, 100 MG, 200 MG 86	phenylephrine-brompheniramine-dm LIQD 2.5 MG/5ML-5 MG/5ML-1 MG/5ML 62	PHILLIPS MILK OF MAGNESIA CHEWABLE CHEW 91
phenazopyridine hcl TABS 95 MG, 99.5 MG 86	phenylephrine-brompheniramine-dm LIQD 5 MG/10ML-10 MG/10ML-2 MG/10ML 62	PHOSPHOLINE IODIDE 163
phendimetrazine tartrate TABS 2	phenylephrine-chlorphen-dm LIQD 10 MG/5ML-4 MG/5ML-15 MG/5ML 62	phytonadione TABS 177
PHENDIMETRAZINE TARTRATEER CP24 2	phenylephrine-chlorpheniramine-dm w/ apap MISC 63	PIFELTRO 49
phenelzine sulfate 19	phenylephrine-chlorpheniramine-dm w/ apap TABS 5 MG-325 MG-2 MG- 10 MG 63	pilocarpine hcl (oral) 5 MG 148
phenobarbital ELIX 89	phenylephrine-dexbrompheniramine- dextromethorphan LIQD 63	pilocarpine hcl SOLN 1 %, 2 %, 4 % . 163
phenobarbital TABS 89	phenylephrine-diphenhydramine-dm- guaifenesin-apap TBPK 63	pimecrolimus 71
phenol (antiseptic) LIQD 1.4 % ... 147	phenylephrine-dm-gg w/ apap LIQD 63	pimozide 170
phentermine hcl CAPS 2	phenylephrine-dm-gg w/ apap TABS 5 MG-200 MG-325 MG-10 MG 63	pindolol TABS 52
phentermine hcl TABS 2	phenylephrine-doxylamine- dextromethorphan-acetaminophen LIQD 63	pioglitazone hcl 25
phenylephrine hcl (mydriatic) SOLN 163	phenylephrine-doxylamine- dextromethorphan-acetaminophen MISC 5 MG-325 MG-6.25 MG 63	pioglitazone hcl-glimepiride 22
phenylephrine hcl (oral) TABS ... 162	phenylephrine-guaifenesin TABS 10 MG-400 MG 63	pioglitazone hcl-metformin hcl TABS . 22
phenylephrine w/ acetaminophen TABS 5 MG-325 MG 62	phenytoin CHEW 19	PIP BLOOD GLUCOSE MONITORING SYSTEM DEVI ... 106
phenylephrine w/ dm-gg LIQD 10 MG/10ML-200 MG/10ML-20 MG/10ML, 10 MG/15ML-200 MG/15ML-18 MG/15ML, 10 MG/20ML-400 MG/20ML-20 MG/20ML, 2.5 MG/5ML-100 MG/5ML-5 MG/5ML, 5 MG/5ML-100 MG/5ML-10 MG/5ML 62	phenytoin sodium extended 100 MG, 200 MG, 300 MG 19	PIP BLOOD GLUCOSE TEST STRIP STRP 80
phenylephrine w/ dm-gg SYRP 5 MG/5ML-100 MG/5ML-10 MG/5ML 62	phenytoin SUSP 19	PIP LANCETS/28G 106
phenylephrine w/ dm-gg TABS 10 MG-385 MG-17.5 MG 62		PIP LANCETS/30G 106
phenylephrine-acetaminophen- guaifenesin LIQD 62		PIP PEN NEEDLES 31G X 5MM 130
		PIP PEN NEEDLES 32G X 4MM 130
		PIQRAY 200MG DAILY DOSE ... 39
		PIQRAY 250MG DAILY DOSE ... 39
		PIQRAY 300MG DAILY DOSE ... 39
		piroxicam CAPS 7
		pitavastatin calcium 29
		PLAVIX 75 MG (clopidogrel bisulfate) 88

PLEGRIDY SOPN	169	POLY-TUSSIN AC LIQD 10 MG/5ML-10 MG/5ML-4 MG/5ML ..	63	potassium chloride SOLN OR 10 %, 20 %	146
PLEGRIDY SOSY IM	169	POLYTUSSIN DM LIQD (phenylephrine-dexbrompheniramine- dextromethorphan)	63	potassium chloride TBCR 8 MEQ, 10 MEQ	146
PLEGRIDY STARTER PACK SOPN . 169		POLYTUSSIN DM LIQD	63	potassium citrate (alkalinizer) TBCR 10 MEQ, 540 MG, 1080 MG	86
PLEGRIDY STARTER PACK SOSY SC	169	POLY-VENT DM TABS	63	POTELIGEO	35
PLENVU	91	POLY-VENT IR TABS	63	povidone-iodine SOLN 10 %	48
PLUVICTO	39	POLY-VI-FLOR CHEW	155	PRADAXA CAPS (dabigatran etexilate mesylate)	16
PNEUMOVAX 23	174	polyvinyl alcohol 1.4 %	162	PRADAXA CAPS	16
PNEUMOVAX 23/1 DOSE	174	POLY-VI-SOL SOLN OR	155	PRADAXA PACK	16
PNV PRENATAL PLUS MULTIVITAMIN + DHA MISC	156	POLY-VI-SOL/IRON SOLN	155	pralatrexate	35
PNV TABS 20-1	156	POLY-VITA SOLN OR	155	PRALUENT SOAJ	29
PNV-DHA+DOCUSATE	156	POLY-VITE PEDIATRIC SOLN OR 155		pramipexole dihydrochloride TABS 41	
PNV-OMEGA	157	POLY-VITE/IRON SOLN	155	pramipexole dihydrochloride TB24	41
POCKET CHAMBER DEVI	143	POMALYST	37	pramoxine hcl LOTN	72
PODOCON-25 SOLN	72	PONVORY 14-DAY STARTER PACK TBPK	169	pramoxine-calamine LOTN	72
podofilox GEL	72	PONVORY TABS	169	pramoxine-menthol CREA	72
podofilox SOLN	72	PORTRAZZA	36	pramoxine-zinc acetate	72
POGO AUTOMATIC BLOOD GLUCOSE MONITORING SYSTEM DEVI	106	posaconazole SUSP	27	prasugrel hcl	88
POLIVY	35	posaconazole TBEC	27	pravastatin sodium	29
POLY HIST FORTE 10 MG-10.5 MG 63		pot phosphate monobasic w/ sod phosphate dibasic & monobasic ..	146	pravastatin sodium 20 MG, 40 MG, 80 MG	29
polyethylene glycol 3350 PACK ...	91	potassium & sodium phosphates PACK	146	praziquantel	12
polyethylene glycol 3350 POWD ..	91	potassium bicarbonate TBEF	146	prazosin hcl CAPS	30
polyethylene glycol-propylene glycol (ophth) SOLN 0.3 %-0.4 %	162	potassium chloride CPCR	146	PRECISION THINS GP LANCET 106	
POLY-HIST DM	63	potassium chloride microencapsulated crystals er ...	146	PRECISION XTRA BLOOD GLUCOSE TEST STRIPS STRP ..	80
polymyxin b-trimethoprim	164	potassium chloride PACK OR 20 MEQ	146	PRECISION XTRA KIT	106
polysaccharide iron complex CAPS 150 MG	89			PRECOSE (acarbose)	21

PRED FORTE (prednisolone acetate (ophth))	165	PREDNISONONE SODIUM PHOSPHATE	165	PRENATAL 19 TABS	157
PRED MILD	165	prednisolone sodium phosphate SOLN	57	PRENATAL AND IRON TABS ...	157
prednicarbate OINT	70	prednisolone sodium phosphate TBDP	57	PRENATAL COMPLETE TABS ..	157
prednisolone acetate (ophth)	165	prednisolone SOLN	57	PRENATAL ESSENTIALS CAPS	157
PREDNISONONE SODIUM PHOSPHATE	165	prednisolone TABS	57	PRENATAL FORMULA A-FREE TABS	157
prednisolone sodium phosphate SOLN	57	PREDNISONONE INTENSOL CONC	57	PRENATAL FORMULA CAPS ...	157
prednisolone sodium phosphate TBDP	57	prednisone SOLN	57	PRENATAL GUMMIES/DHA & FOLIC ACID	157
prednisolone SOLN	57	prednisone TABS	57	PRENATAL MULTI + DHA CAPS 60 MG-2.6 MG-800 MCG-400 UNIT-4 MCG-1.7 MG-18 MG-27 MG-38 MG-1.5 MG-25 MG-4000 UNIT-11 UNIT-250 MG	157
prednisolone TABS	57	prednisone TBPK	57	PRENATAL MULTI +DHA CAPS	157
PREDNISONONE INTENSOL CONC	57	PREFERRED PLUS GLUCOSE ..23		PRENATAL MULTIVITAMIN + DHA MISC	157
prednisone SOLN	57	PREFERRED PLUS INSULIN SYRINGE/U-100/0.3ML/29G X 1/2" .	130	PRENATAL MULTIVITAMIN PLUS DHA CAPS	157
prednisone TABS	57	PREFERRED PLUS INSULIN SYRINGE/U-100/0.5ML/28G X 1/2" .	130	PRENATAL MULTIVITAMIN TABS	157
prednisone TBPK	57	PREFERRED PLUS INSULIN SYRINGE/U-100/0.5ML/29G X 1/2" .	130	PRENATAL ONE DAILY TABS ..	157
PREFERRED PLUS GLUCOSE ..23		PREFERRED PLUS INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	130	PRENATAL PLUS VITAMIN ANDMINERAL TABS	157
PREFERRED PLUS INSULIN SYRINGE/U-100/0.3ML/29G X 1/2" .	130	PREFERRED PLUS INSULIN SYRINGE/U-100/1ML/28G X 1/2" .	130	PRENATAL TABS 120 MG-10 MG-1 MG-10 MCG-12 MCG-3 MG-20 MG-1200 MCG-27 MG-200 MG-1.84 MG-25 MG-2 MG-10 MG	158
PREFERRED PLUS INSULIN SYRINGE/U-100/0.5ML/28G X 1/2" .	130	PREFERRED PLUS INSULIN SYRINGE/U-100/1ML/29G X 1/2" .	130	PRENATAL TABS	158
PREFERRED PLUS INSULIN SYRINGE/U-100/0.5ML/29G X 1/2" .	130			prenatal vit w/ ferrous fumarate-folic acid CHEW	157
PREFERRED PLUS INSULIN SYRINGE/U-100/1ML/28G X 1/2" .	130			prenatal vit w/ ferrous fumarate-folic acid TABS 120 MG-25 MG-1 MG-400 UNIT-12 MCG-4 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-25 MG-2 MG-3000 UNIT-22 MG	157
PREFERRED PLUS INSULIN SYRINGE/U-100/1ML/29G X 1/2" .	130				
		PREFERRED PLUS LANCETS COLORED 21G	106		
		PREFERRED PLUS LANCETS SUPER THIN 30G	106		
		PREFERRED PLUS LANCETS THIN 26G	106		
		PREFERRED PLUS UNIFINE PENTIPS 31G X 8MM SHORT ..	130		
		PREFERRED PLUS UNIFINE PENTIPS 32GX4MM	130		
		PREFERRED PLUS UNIFINE PENTIPS/MINI/31GX5MM	130		
		pregabalin (once-daily)	170		
		pregabalin CAPS	18		
		pregabalin SOLN	18		
		PREGEN DHA CAPS	157		
		PREGENNA	157		
		PREHEVBRIO	176		
		PRELIEF	3		
		PREMARIN TABS	84		
		PREMIUM BLOOD GLUCOSE TEST STRIPS STRP	80		
		PREMIUM PACKETS MISC	152		
		PREMPRO	84		
		PRENA 1 TRUE	157		
		PRENA1 CHEW	157		
		PRENA1 PEARL	157		
		PRENAISSANCE	157		
		PRENAISSANCE PLUS CAPS ...	157		
		PRENATABS FA TABS	157		
		PRENATAL + COMPLETE MULTI/DHA/CHOLINE/FOLATE	157		

prenatal vit w/ ferrous fumarate-l methylfolate-folic acid	157	MG-15 MG-1.5 MG-2600 UNIT-150 MCG-40 UNIT-600 MCG-20 MG .	158	PREVIDENT RINSE SOLN	148
prenatal vit w/ iron carbonyl-folic acid TABS 120 MG-10 MG-1.25 MG-315 UNIT-15 MCG-3.4 MG-10 MG-1 MG- 2 MG-15 MG-10 MG-20 UNIT-2100 UNIT-50 MG, 120 MG-3 MG-30 MCG-1 MG-400 UNIT-8 MCG-3 MG- 20 MG-7 MG-3 MG-100 MG-15 MG-3 MG-4000 UNIT-200 MG-150 MCG- 30 UNIT-29 MG	157	PRENATE ENHANCE	158	PREVNAR 13	174
PRENATAL VITAMIN & MINERAL TABS	157	PRENATE ESSENTIAL 90 MG-26 MG-280 MCG-400 MCG-220 UNIT- 13 MCG-155 MG-50 MG-300 MG- 150 MCG-10 UNIT-40 MG-600 MCG- 18 MG	158	PREVNAR 20	174
PRENATAL VITAMIN TABS	158	PRENATE MINI 60 MG-26 MG-280 MCG-400 MCG-1000 UNIT-13 MCG- 80 MG-25 MG-350 MG-18 MG-150 MCG-10 UNIT-600 MCG-25 MG .	158	PREVYMIS TABS	50
PRENATAL VITAMIN/IRON TABS 157		PRENATE PIXIE	158	PREZCOBIX	49
PRENATAL VITAMINS AND MINERALS/DHA CAPS	157	PRENATE RESTORE	158	PREZISTA SUSP	49
PRENATAL VITAMINS PLUS LOW IRON TABS	157	PRENATRIX TABS	158	PREZISTA TABS (darunavir)	49
PRENATAL VITAMINS TABS 120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-4000 UNIT-30 UNIT	158	PRENATRYL TABS	158	PREZISTA TABS 75 MG, 150 MG	49
prenatal without a w/ fe fumarate-l methylfolate-fa-dha	158	PRESERVISION AREDS 2 + MULTI VITAMIN CAPS	152	PRIFTIN	33
PRENATAL+DHA MISC	158	PRESERVISION AREDS 2 CAPS 152		PRILOSEC OTC TBEC (omeprazole magnesium)	172
PRENATAL-U CAPS	158	PRESERVISION AREDS 2 CHEW 152		PRILOSEC PACK	172
PRENATE	158	PRESERVISION AREDS 2 CAPS 152		PRIMACARE	158
PRENATE AM	158	PRESERVISION AREDS 2 CHEW 152		primaquine phosphate TABS	33
PRENATE DHA 90 MG-26 MG-400 MCG-400 UNIT-25 MCG-155 MG-50 MG-300 MG-40 UNIT-600 MCG-18 MG	158	PRESERVISION AREDS CAPS .	153	primidone	18
PRENATE ELITE 75 MG-21 MG-330 MCG-400 MCG-600 UNIT-13 MCG- 3.5 MG-21 MG-3 MG-155 MG-25		PRESERVISION/LUTEIN CAPS .	153	PRIORIX SUSR	176
		PREVACID 24HR CPDR (lansoprazole)	172	PRISTIQ (desvenlafaxine succinate) 21	
		PREVACID CPDR 30 MG (lansoprazole)	172	PRO COMFORT ALCOHOL PADS 113	
		PREVACID SOLUTAB TBDD (lansoprazole)	172	PRO COMFORT INHALER SPACER CHAMBER ADULT MISC	143
		PREVENT DROPSAFE SAFETY PEN NEEDLES 31GX5/16"	130	PRO COMFORT INHALER SPACER CHAMBER CHILD MISC	143
		PREVENT SAFETY PEN NEEDLES 31GX5/16"	130	PRO COMFORT INHALER SPACER CHAMBER INFANT DEVI	143
				PRO COMFORT INSULIN SYRINGES/0.5ML/30G X 1/2" ...	130
				PRO COMFORT INSULIN SYRINGES/0.5ML/30G X 5/16" .	130
				PRO COMFORT INSULIN SYRINGES/0.5ML/31G X 5/16" .	130
				PRO COMFORT INSULIN	

SYRINGES/1ML/30G X 1/2"	130	PROCARE SPACER CHAMBER W/CHILD MASK DEVI	143	PROFILNINE	87
PRO COMFORT INSULIN SYRINGES/1ML/30G X 5/16" ...	131	PROCHAMBER VALVED HOLDINGCHAMBER DEVI	143	progesterone CAPS	168
PRO COMFORT INSULIN SYRINGES/1ML/31G X 5/16" ...	131	prochlorperazine	47	progesterone OIL	168
PRO COMFORT LANCETS 30G 106		prochlorperazine maleate TABS ..	47	PROLATE SOLN	10
PRO COMFORT LANCETS 31G 106		PROCRIT	88	PROLATE TABS	10
PRO COMFORT PEN NEEDLES/31G X 8MM	131	PRODIGY AUTOCODE BLOOD GLUCOSE MONITORING SYSTEM DEVI	106	PROLENSA (bromfenac sodium (ophth))	166
PRO COMFORT PEN NEEDLES/32G X 4MM	131	PRODIGY AUTOCODE BLOOD GLUCOSE MONITORING SYSTEM KIT	106	PROLIA SOSY	83
PRO COMFORT PEN NEEDLES/32G X 6MM	131	PRODIGY AUTOCODE BLOOD GLUCOSE MONITORING/TALKING KIT	106	promethazine hcl SOLN OR 6.25 MG/5ML	28
PRO COMFORT SAFETY LANCETS 30G PRESSURE ACTIVATED ..	106	PRODIGY INSULIN SYRINGE/U- 100/0.3ML/31G X 5/16"	131	promethazine hcl SUPP	28
PRO HERS RX CAPS	160	PRODIGY INSULIN SYRINGE/1/2ML/31G X 5/16" ...	131	promethazine hcl TABS	28
PRO HIS RX CAPS	160	PRODIGY INSULIN SYRINGE/1ML/28G X 1/2"	131	promethazine w/codeine SOLN ...	63
PRO PCOS RX CAPS	160	PRODIGY LANCING DEVICE MISC .	106	promethazine w/codeine SYRP ...	63
PRO VOICE V8 BLOOD GLUCOSE MONITORING SYSTEM DEVI ...	106	PRODIGY INSULIN SYRINGE/1/2ML/31G X 5/16"	131	promethazine-dm SYRP	63
PRO VOICE V8/V9 BLOOD GLUCOSE TEST STRIPS STRP ..	80	PRODIGY INSULIN SYRINGE/1ML/28G X 1/2"	131	PROMETRIUM CAPS (progesterone)	168
PRO VOICE V9 BLOOD GLUCOSE MONITORING SYSTEM DEVI ...	106	PRODIGY NO CODING BLOOD GLUCOSE TEST STRIPS STRP ..	80	PROMISEB CREA	68
PROAIR DIGIHALER	15	PRODIGY POCKET BLOOD GLUCOSE METER KIT KIT	106	PRONUTRIENTS SUPER B- COMPLEX+ANTIOXIDANTS	148
PROAIR HFA AERS (albuterol sulfate)	15	PRODIGY PRESSURE ACTIVATED SAFETY LANCETS	106	propafenone hcl TABS	13
PROAIR RESPICLICK AEPB	15	PRODIGY SAFETY LANCETS ..	106	propranolol hcl CP24	52
probenecid	87	PRODIGY TWIST TOP LANCETS 106		propranolol hcl SOLN OR 20 MG/5ML, 40 MG/5ML	52
PROCARDIA XL TB24 (nifedipine) 52		PRODIGY VOICE BLOOD GLUCOSE METER KIT KIT	107	propranolol hcl TABS	52
PROCARE SPACER CHAMBER W/ADULT MASK DEVI	143	PROFERRIN ES	89	propylene glycol-glycerin	162
				propylthiouracil	171
				PROQUAD SUSR	176
				PRORENAL+D/OMEGA-3 CAPS	153
				PROSCAR (finasteride)	86
				PROSTATE 2.4 CAPS	81
				PROSTEON TABS	146

PROSTIN VR PEDIATRIC	147	PSS SELECT GP LANCETS	107	PX GLUCOSE	23
PROTECT CARDIO AF CAPS ...	153	PSS SELECT SAFETY LANCETS	107	PX INSULIN SYRINGE/U-	
PROTECT PLUS SO CAPS	153			100/0.5ML/30G X 1/2"	131
PROTEGRA CAPS	153	psyllium CAPS 0.52 GM	90	PX LANCET AUTO INJECTOR MISC	
PROTEOLIN CAPS	81	psyllium POWD 28.3 %, 30 %, 30.9		.....	107
PROTONIX PACK (pantoprazole		%, 33 %, 49 %, 58.6 %, 95 %, 100 %		PX LANCETS MICROTHIN 33G	107
sodium)	172	.....	90	PX LANCETS ULTRA THIN	107
PROTONIX TBEC (pantoprazole		PTS PANELS LIPID PANEL+EGLU		PX LANCETS ULTRA THIN 28G	
sodium)	173	TEST STRIPS	80	107	
protriptyline hcl	21	PULMICORT FLEXHALER AEPB .	14	PX MINI PEN NEEDLES 31GX5MM	
PROVENGE	36	PULMICORT SUSP (budesonide		131	
PROVENTIL HFA AERS (albuterol		(inhalation))	14	PX NITETIME MULTI-SYMPTOM	
sulfate)	15	PULMOZYME	170	CAPS	63
PROVERA 5 MG, 10 MG		PURE & GENTLE LUBRICANT		PX PEN NEEDLE 31GX8MM ...	131
(medroxyprogesterone acetate) ..	168	SOLN	162	PX SHORTLENGTH PEN	
PROVIDA OB	158	PURE COMFORT 3-BALL BREATH		NEEDLES/31GX8MM	131
PROVIGIL (modafinil)	3	EXERCISER DEVI	143	PYLERA (bismuth subcitrate	
PROZAC CAPS (fluoxetine hcl) ...	20	PURE COMFORT ALCOHOL		potassium-metronidazole-	
PRUDOXIN (doxepin hcl		PREPPADS	113	tetracycline)	173
(antipruritic))	67	PURE COMFORT INHALER		pyrazinamide	33
pseudoephed-bromphen-dm SYRP		SPACER CHAMBER ADULT DEVI		pyrethrins-piperonyl butoxide SHAM	
10 MG/5ML-30 MG/5ML-2 MG/5ML		143		4 %-0.3 %-0.33 %, 4 %-0.33 % ...	74
63		PURE COMFORT LANCETS 30G		pyridostigmine bromide SOLN OR	33
pseudoephedrine hcl TABS	162	107		pyridostigmine bromide TABS 60 MG	
pseudoephedrine hcl TB12	162	PURE COMFORT PEN NEEDLE		.....	33
PSEUDOEPHEDRINE		32G X6MM	131	pyridostigmine bromide TBCR	33
HYDROCHLORIDE/ GUAIFENESIN		PURE COMFORT PEN		pyridoxine hcl TABS 25 MG, 50 MG,	
TABS	63	NEEDLE/32G X4MM	131	100 MG, 250 MG	178
pseudoephedrine-guaifenesin SYRP		PURE COMFORT SAFETY PEN		pyrimethamine	33
100 MG/5ML-30 MG/5ML	63	NEEDLE 31G X 5MM	131	pyrithione zinc BAR	68
pseudoephedrine-guaifenesin TB12		PURE COMFORT SAFETY PEN		pyrithione zinc SHAM	68
1200 MG-120 MG, 600 MG-60 MG		NEEDLE 32G X 4MM	131	QBRELIS SOLN	30
63		PURIXAN SUSP	35	QC ADVANCED LANCING DEVICE	
pseudoephedrine-ibuprofen CAPS	63	PX ADVANCED LANCING DEVICE		MISC	107
		MISC	107		

QC ALCOHOL SWABS	113	MG	45	RA CALCIUM/BORON	145
QC COD LIVER OIL OIL	160	quetiapine fumarate TABS	45	RA COD LIVER OIL OIL	160
QC LANCETS SUPER THIN	107	quetiapine fumarate TB24	45	RA EAR CARE TABS	160
QC LANCETS ULTRA THIN	107	quetiapine fumarate TB24	46	RA E-ZJECT LANCETS 28G	107
QC OCUHEALTH VISION SUPPORT 2 CAPS	153	QUFLORA PEDIATRIC CHEW ..	155	RA E-ZJECT LANCETS THIN 26G 107	
QC PEN NEEDLES 31G X 8MM	131	QUICKVUE AT-HOME COVID-19 TEST KIT	80	RA E-ZJECT LANCETS THIN 28G 107	
QC UNIFINE PENTIPS 32GX4MM 131		QUILLICHEW ER CHER	3	RA E-ZJECT LANCETS ULTRATHIN 30G	107
QC UNILET LANCETS 28G/ULTRA THIN	107	QUILLIVANT XR SRER	3	RA GLUCOSE	23
QC UNILET LANCETS 33G/MICRO THIN	107	quinapril hcl	30	RA INSULIN SYRINGE/0.5ML/29G X 1/2"	131
QDOLO SOLN (tramadol hcl)	9	quinapril-hydrochlorothiazide	31	RA INSULIN SYRINGE/1ML/29G X 1/2"	131
QELBREE	2	quinidine gluconate TBCR	13	RA INSULIN SYRINGE/U- 100/0.5ML/30G X 5/16"	131
QINLOCK	39	quinidine sulfate TABS	13	RA INSULIN SYRINGE/U- 100/0.5ML/30G X 5/16"	131
QNASL	161	quinine sulfate CAPS 324 MG	33	RA INSULIN SYRINGE/U- 100/0.5ML/30G X 5/16"	131
QNASL CHILDRENS	161	QUINTABS TABS	154	RA PEN NEEDLES 31G X 5MM3/16"	131
QTERN	22	QUINTET AC BLOOD GLUCOSE MONITORING SYSTEM DEVI	107	RA PEN NEEDLES 31G X 8MM5/16"	131
QUAKE DEVI	143	QUINTET AC BLOOD GLUCOSE TEST STRIPS STRP ..	80	RA PRENATAL TABS	158
QUARTETTE (levonorgestrel-ethinyl estradiol (91-day))	56	QUINTET BLOOD GLUCOSE MONITORING SYSTEM DEVI ...	107	RA URINARY TRACT INFECTION TEST STRIPS STRP	80
quazepam	90	QUINTET BLOOD GLUCOSE TEST STRIPS STRP	80	RABAVERT	176
QUDEXY XR CS24 (topiramate) ..	18	QULIPTA	143	rabeprazole sodium TBEC	173
QUERCETIN COMPLEX CAPS ..	149	QUTENZA	72	RADIAPLEXRX GEL	75
QUESTRAN LIGHT POWD (cholestyramine light)	28	QUVIVIQ	90	raloxifene hcl	83
QUESTRAN PACK (cholestyramine) 28		QVAR REDIHALER	14	ramelteon	90
QUESTRAN POWD (cholestyramine)	28	RA ALCOHOL SWABS	113	ramipril CAPS	30
quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG, 300 MG, 400		RA B-COMPLEX/VITAMIN C TR TBCR	148	RANEXA TB12 500 MG (ranolazine) . 12	
		RA CALCIUM TABS	145	RANGER READY REPELLENT LIQD	73

ranolazine TB12	12	REBIF TITRATION PACK SOSY	169	TESTING SYSTEM	107
RAPAFLO (silodosin)	86	REBINYN	87	RELION CONFIRM BLOOD GLUCOSE MONITORING SYSTEM KIT	107
rasagiline mesylate	42	RECOMBINATE SOLR	87	RELION CONFIRM/MICRO TEST STRIPS STRP	80
RAYA SURE PEN NEEDLE 31GX 5MM	131	RECOMBIVAX HB SUSP	176	RELION GLUCOSE	23
RAYA SURE PEN NEEDLE 31GX 8MM	131	RECOMBIVAX HB SUSY	176	RELION INSULIN SYRINGE/U- 100/0.3ML/31G X 15/64"	131
RAYALDEE	83	REFRESH LIQUIGEL GEL (carboxymethylcellulose sodium (ophth))	162	RELION INSULIN SYRINGE/U- 100/0.3ML/31G X 5/16"	131
RAYOS TBEC	57	REFRESH PLUS SOLN (carboxymethylcellulose sodium (ophth))	162	RELION INSULIN SYRINGE/U- 100/0.5ML/29G X 1/2"	131
READYLANCE SAFETY LANCETS/21G/2.2MM	107	REFRESH TEARS SOLN (carboxymethylcellulose sodium (ophth))	162	RELION INSULIN SYRINGE/U- 100/0.5ML/31G X 5/16"	131
READYLANCE SAFETY LANCETS/23G/1.8MM	107	REFUAH PLUS BLOOD GLUCOSEMONITORING SYSTEM KIT	107	RELION INSULIN SYRINGE/U- 100/1ML/31G X 5/16"	131
READYLANCE SAFETY LANCETS/26G/1.8MM	107	REFUAH PLUS BLOOD GLUCOSETEST STRIPS STRP ..	80	RELION KETONE TEST STRIPS STRP	80
READYLANCE SAFETY LANCETS/28G/1.8MM	107	RELAFEN DS	7	RELION LANCETS MICRO- THIN33G	107
READYLANCE SAFETY LANCETS/30G/1.6MM	107	RELENZA DISKHALER	51	RELION LANCETS THIN 26G ...	107
REALITY INSULIN SYRINGE/U- 100/0.5ML/28G X 1/2"	131	RELEUKO SOLN	88	RELION LANCETS ULTRA- THIN30G	107
REALITY INSULIN SYRINGE/U- 100/0.5ML/29G X 1/2"	131	RELEUKO SOSY	88	RELION LANCING DEVICE MISC 107	
REALITY INSULIN SYRINGE/U- 100/1ML/28G X 1/2"	131	RELEXXII TBCR 45 MG, 63 MG (methylphenidate hcl)	3	RELION MICRO BLOOD GLUCOSE MONITORING SYSTEM KIT	107
REALITY INSULIN SYRINGE/U- 100/1ML/29G X 1/2"	131	RELEXXII TBCR	3	RELION PEN NEEDLES 31G X8MM	132
REALITY LANCETS	107	RELION 2-IN-1 LANCET DEVICES 30G	107	RELION PEN NEEDLES 31GX5/16" 132	
REALITY SWABS	113	RELION 2-IN-1 LANCING DEVICE 25G	107	RELION PEN NEEDLES 31GX8MM 132	
REALITY TRIGGER LANCETS ..	107	RELION 2-IN-1 LANCING DEVICE 30G	107	RELION PEN NEEDLES 32G X4MM	132
REBIF REBIDOSE SOAJ	169	RELION ALCOHOL SWABS	113		
REBIF REBIDOSE TITRATIONPACK SOAJ	169	RELION ALL-IN-ONE COMPACTBLOOD GLUCOSE			
REBIF SOSY	169				

RELION PEN NEEDLES 32G X5/32"	132	RELION ULTRA THIN PLUS LANCETS 32G	108	REPEL TICK DEFENSE AERO ...	74
RELION PEN NEEDLES 32GX4MM 132		RELION ULTRA THIN PLUS LANCETS 33G	108	RESTA SILVER GEL GEL	75
RELION PREMIER BLOOD GLUCOSE TEST STRIPS STRP ..	80	RELISTOR TABS	85	RESTASIS EMUL (cyclosporine (ophth))	164
RELION PREMIER BLU BLOOD GLUCOSE MONITORING SYSTEM DEVI	108	RELMAX (eletriptan hydrobromide) 144		RESTASIS MULTIDOSE EMUL ..	164
RELION PREMIER CLASSIC BLOOD GLUCOSE MONITORING SYSTEM DEVI	108	REMEDIENT CAPS	153	RESTORE HYDROGEL DRESSING GEL	75
RELION PREMIER COMPACT BLOOD GLUCOSE MONITORING SYSTEM KIT	108	REMERON SOLTAB TBDP (mirtazapine)	19	RESTORIL (temazepam)	90
RELION PREMIER VOICE BLOOD GLUCOSE MONITORING SYSTEM DEVI	108	REMERON TABS 15 MG, 30 MG (mirtazapine)	19	RETACRIT	88
RELION PRIME BLOOD GLUCOSE MONITORING SYSTEM DEVI ...	108	RENACIDIN	86	RETAIN VISION CAPS	160
RELION PRIME BLOOD GLUCOSE TEST STRIPS STRP	80	RENFLEXIS	85	RETEVMO	39
RELION SHORT PEN NEEDLES31GX8MM	132	REVELA PACK (sevelamer carbonate)	86	RETIN-A CREA (tretinoin)	65
RELION TRUE METRIX AIR BLOOD GLUCOSE METER/BLUETOOTH KIT	108	REVELA TABS (sevelamer carbonate)	86	RETIN-A GEL (tretinoin)	65
RELION TRUE METRIX BLOODGLUCOSE TEST STRIPS STRP	80	repaglinide	25	RETIN-A MICRO (tretinoin microsphere)	65
RELION ULTIMA BLOOD GLUCOSE MONITORING SYSTEM KIT	108	REPATHA PUSHTRONEX SYSTEM SOCT	29	RETIN-A MICRO	65
RELION ULTIMA BLOOD GLUCOSE TEST STRIPS STRP	80	REPATHA SOSY	29	RETIN-A MICRO PUMP (tretinoin microsphere)	65
RELION ULTRA THIN LANCETS/30G	108	REPATHA SURECLICK SOAJ ...	29	RETISERT	165
RELION ULTRA THIN LANCETS30G	108	REPEL 100 LIQD	73	RETROVIR CAPS (zidovudine) ...	49
		REPEL FAMILY AERO	74	RETROVIR IV INFUSION SOLN ..	49
		REPEL FAMILY DRY AERO	73	RETROVIR SYRP (zidovudine) ...	49
		REPEL HUNTERS FORMULA AERO	74	REUSABLE COMFORTSEAL MASK/LARGE/AEROECLIPSE MISC	143
		REPEL SPORTSMEN AERO	74	REUSABLE COMFORTSEAL MASK/MEDIUM/AEROECLIPSE MISC	143
		REPEL SPORTSMEN DRY AERO 74		REUSABLE COMFORTSEAL MASK/SMALL/AEROECLIPSE MISC	143
		REPEL SPORTSMEN MAX AERO 74		REVATIO SUSR (sildenafil citrate (pulmonary hypertension))	54
		REPEL SPORTSMEN MAX LIQD .	74	REVATIO TABS (sildenafil citrate	

(pulmonary hypertension)) .....54	RIGHTEST GL300 LANCETS ... 108	risperidone SOLN 44
REVITADERM WOUND CARE GEL . 75	RIGHTEST GM100 BLOOD GLUCOSE MONITORING SYSTEM KIT 108	risperidone TABS 44
REVLIMID .....147	RIGHTEST GM300 BLOOD GLUCOSE MONITORING SYSTEM KIT 108	risperidone TBDP 44
REXALL BLOOD GLUCOSE MONITORING SYSTEM KIT 108	RIGHTEST GM550 BLOOD GLUCOSE MONITORING SYSTEM KIT 108	RITALIN LA CP24 (methylphenidate hcl) 3
REXALL BLOOD GLUCOSE TEST STRIPS STRP 80	RIGHTEST GS100 BLOOD GLUCOSE TEST STRIPS STRP .. 80	RITALIN TABS (methylphenidate hcl) 3
REXALL LANCETS ULTRA THIN 108	RIGHTEST GS300 BLOOD GLUCOSE TEST STRIPS STRP .. 80	RITEFLO DEVI 143
REXTOVY LIQD 26	RIGHTEST GS333 BLOOD GLUCOSE TEST STRIPS STRP .. 80	ritonavir TABS 49
REXULTI 48	RIGHTEST GS550 BLOOD GLUCOSE TEST STRIPS STRP .. 80	RITUXAN 35
REYATAZ CAPS 200 MG, 300 MG (atazanavir sulfate) 49	RIGHTEST GT333 BLOOD GLUCOSE MONITORING SYSTEM DEVI 108	RITUXAN HYCELA 38
REYATAZ PACK 49	RIGHTEST GT333 BLOOD GLUCOSE TEST STRIPS STRP .. 80	rivastigmine 168
REYVOW 144	riluzole TABS 162	rivastigmine tartrate CAPS 168
REZDIFFRA 85	rimantadine hydrochloride TABS .. 51	RIXUBIS SOLR 87
REZLIDHIA 39	RINVOQ TB24 4	rizatriptan benzoate TABS 144
REZVOGLAR KWIKPEN 25	RIOMET SOLN (metformin hcl) ... 22	rizatriptan benzoate TBDP 144
RHOPRESSA 164	risedronate sodium TABS 83	ROCKLATAN 164
RIABNI 35	risedronate sodium TBEC 83	ROCTAVIAN 87
ribavirin (hepatitis c) CAPS 51	RISPERDAL CONSTA (risperidone microspheres) 44	roflumilast 14
ribavirin (hepatitis c) TABS 200 MG 51	RISPERDAL SOLN (risperidone) .. 44	ROLVEDON 88
riboflavin TABS 100 MG 178	RISPERDAL TABS 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG (risperidone) 44	romidepsin SOLR 39
riboflavin TABS 178	risperidone microspheres 44	ropinirole hydrochloride TABS 41
RID ESSENTIAL LICE ELIMINATION KIT KIT EX 74		ropinirole hydrochloride TB24 41
RIDAURA 5		ROSADAN KIT 74
rifabutin 33		rosuvastatin calcium TABS 29
rifampin CAPS 33		ROTARIX SUSP 176
RIGHTEST GD500 LANCING DEVICE MISC 108		ROTARIX SUSR 176
		ROTATEQ SOLN 176
		ROWASA (mesalamine w/ cleanser) 85
		ROXICODONE TABS 15 MG, 30 MG

(oxycodone hcl)	9	SAFETY INSULIN SYRINGES	SAPS HEALTH CARE TWIST TOP
ROZEREM (ramelteon)	90	0.5ML/29GX1/2"	LANCETS
ROZLYTREK CAPS	39	SAFETY INSULIN SYRINGES	SAPS HEALTH PLUS TWIST TOP
ROZLYTREK PACK	39	0.5ML/30GX5/16"	LANCETS 30G
RUBRACA	39	SAFETY INSULIN SYRINGES	SAPS HEALTH TWIST TOP
RUCONEST	87	1ML/29GX1/2"	LANCETS 30G
rufinamide SUSP	18	SAFETY INSULIN SYRINGES	SAPSCARE TWIST TOP LANCETS
rufinamide TABS	18	1ML/30GX1/2"	30G
RU-HIST D TABS	63	SAFETY LANCET 30G/PRESSURE	SARCLISA
RUKOBIA	49	ACTIVATED	SAVAYSA
RUXIENCE	35	SAFETY LANCETS	SAVELLA TABS
RYALTRIS	161	SAFETY LANCETS 21G	SAVELLA TITRATION PACK MISC
RYBELSUS TABS	23	SAFETY LANCETS 23G	169
RYBREVANT	35	SAFETY LANCETS 28G	SAWYER INSECT REPELLENT
RYDAPT	39	SAFETY LANCETS/PRESSURE	AERO
RYKINDO SRER	44	ACTIVATED/28G	SAWYER PREMIUM INSECT
RYLAZE	39	SAFYRAL (drospirenone-ethinyl	REPELLENT LIQD
RYMED TABS	63	estradiol-levomefolate calcium) ...	saxagliptin hcl
RYTARY CPCR	41	SAIZEN IJ 5 MG	saxagliptin-metformin hcl
SABRIL PACK (vigabatrin)	18	salicylic acid LIQD 2 %	SAXENDA
SABRIL TABS (vigabatrin)	18	salicylic acid LIQD 3 %, 17 %	SB ALCOHOL PREP PADS
SAFE-T-LANCE LOW FLOW 25G		saline SOLN	SB INSULIN SYRINGE/U-
108		salsalate	100/0.5ML/29G X 1/2"
SAFE-T-LANCE NORMAL		SANCUSO PTCH	SB INSULIN SYRINGE/U-
FLOW21G	108	SANDIMMUNE SOLN OR	100/0.5ML/30G X 5/16"
SAFE-T-LANCE PLUS		SANDOSTATIN LAR DEPOT KIT	SB INSULIN SYRINGE/U-
SAFETYLANCET HIGH FLOW	108	SAPHRIS (asenapine maleate) ...	100/1ML/29G X 1/2"
SAFE-T-LANCE PLUS		SAPS CARE ALCOHOL PREP	SB INSULIN SYRINGE/U-
SAFETYLANCET LOW FLOW	108	PADS	100/1ML/31G X 5/16"
SAFE-T-LANCE PLUS		SAPS HEALTH ALCOHOL	SB LANCETS THIN
SAFETYLANCET NORMAL FLOW		PREPPADS	SB LANCETS ULTRA THIN
108		SAPS HEALTH CARE	SCEMBLIX
		ALCOHOLPREP PADS	SCOOBY-DOO ONE A DAY CHEW .
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scopolamine	26	SE-NATAL 19 CHEW	158	SHINGRIX	176
SCOT-TUSSIN DM LIQD	63	SE-NATAL 19 TABS	158	SHOPKO AUTOLET LANCING DEVICE MISC	109
SCOT-TUSSIN SENIOR LIQD	63	SENNAL PLUS CAPS	91	SHOPKO ON-THE-GO COMFORTLANCETS 30G	109
SEASONIQUE (levonorgestrel- ethinyl estradiol (91-day))	56	SENNAL SYRP	91	SHOPKO UNIFINE PENTIPS PEN NEEDLES/MICRO/32GX4MM ...	132
SEBEX	68	sennosides CAPS	91	SHOPKO UNIFINE PENTIPS PEN NEEDLES/MINI/31GX5MM	132
SEBUDERM GEL	73	sennosides CHEW	91	SHOPKO UNIFINE PENTIPS PEN NEEDLES/SHORT/31GX8MM ..	132
SECUADO	46	sennosides LIQD	91	SHOPKO UNIFINE PENTIPS PLUS PEN NEEDLES/MICRO/REMOVR/32GX4 MM	132
SECURESAFE SAFETY INSULIN SYRINGES/U-100/0.5ML/29GX1/2" .	132	sennosides SYRP 8.8 MG/5ML ...	92	SHOPKO UNIFINE PENTIPS PLUS PEN NEEDLES/MINI/REMOVER/31GX5M M	132
SECURESAFE SAFETY INSULIN SYRINGES/U-100/1ML/29GX1/2"	132	sennosides TABS 8.6 MG, 15 MG, 17.2 MG, 25 MG	92	SHOPKO UNIFINE PENTIPS PLUS PEN NEEDLES/SHORT/REMOVR/31GX8 MM	132
SEGLENTIS	10	sennosides TABS 8.6 MG	92	SHOPKO UNILET LANCETS SUPER THIN 30G	109
SEGLUROMET	22	sennosides-docusate sodium TABS 91	91	SHOPKO UNILET LANCETS ULTRA THIN 28G	109
SELECT-LITE LANCING DEVICE MISC	109	SENOKOT S TABS (sennosides- docusate sodium)	91	SIKLOS TABS	88
SELECT-OB CHEW	158	SENOKOT TABS (sennosides) ...	92	sildenafil citrate (pulmonary hypertension) SUSR	54
SELECT-OB+DHA MISC	158	SEREVENT DISKUS	15	sildenafil citrate (pulmonary hypertension) TABS	54
selegiline hcl CAPS	42	SEROQUEL TABS (quetiapine fumarate)	46	SILIQ	68
selegiline hcl TABS	42	SEROQUEL XR TB24 (quetiapine fumarate)	46	silodosin	86
selenium sulfide LOTN	68	SEROSTIM SC 4 MG, 5 MG, 6 MG 83	83	silver sulfadiazine	68
selenium sulfide SHAM 1 %	68	sertraline hcl CONC	20	SILVERMED GEL	75
SELSUN BLUE DEEP CLEANSING SHAM	72	sertraline hcl TABS	20		
SELSUN BLUE NATURALS DRYSCALP SHAM	72	SERTRALINE HYDROCHLORIDE CAPS	20		
SELZENTRY SOLN	49	sevelamer carbonate PACK	86		
SELZENTRY TABS (maraviroc) ...	50	sevelamer carbonate TABS	86		
SELZENTRY TABS	49	sevelamer hcl	86		
SEMGLEE SOLN	25	sevoflurane	86		
SEMGLEE SOPN	25	SFROWASA ENEM	85		

SILVRSTAT WOUND DRESSING GEL	75	BEAUTY CAPS	153	SMART SENSE COLOR LANCETS UNIVERSAL 33G	109
SIMBRINZA	163	SKLICE (ivermectin (pediculicide)) 74		SMART SENSE GLUCOSE	23
simethicone CAPS 125 MG	84	SKYLA	57	SMART SENSE GLUCOSE TABLETS	23
simethicone CHEW	84	SKYRIZI PEN SOAJ	68	SMART SENSE PREMIUM BLOODGLUCOSE MONITORING SYSTEM KIT	109
simethicone LIQD OR 20 MG/0.3ML . 84		SKYRIZI SOCT 180 MG/1.2ML ...	85	SMART SENSE PREMIUM BLOODGLUCOSE STRIPS STRP	80
simethicone SUSP 20 MG/0.3ML . 84		SKYRIZI SOCT 360 MG/2.4ML ...	85	SMART SENSE STANDARD LANCETS UNIVERSAL 21G	109
SIMILAC STERILIZED WATER .	168	SKYRIZI SOLN	85	SMART SENSE SUPER THIN LANCETS UNIVERSAL 30G	109
SIMLANDI 1-PEN KIT	5	SKYRIZI SOSY	68	SMART SENSE THIN LANCETSUNIVERSAL 26G	109
SIMLANDI 2-PEN KIT	5	SKYTROFA	83	SMART SENSE VALUE BLOOD GLUCOSE STRIPS STRP	80
SIMPLE DIAGNOSTICS LANCING DEVICE MISC	109	SLO-NIACIN TBCR (niacin)	178	SMART SENSE VALUE BLOODGLUCOSE MONITORING SYSTEM KIT	109
SIMPONI ARIA SOLN	5	SLOW-MAG	145	SMARTEST BLOOD GLUCOSE TEST STRIPS STRP	80
SIMPONI SOAJ	5	SLYND	57	SMARTEST EJECT BLOOD GLUCOSE MONITORING SYSTEM DEVI	109
SIMPONI SOSY	5	SM ALCOHOL PREP PADS	113	SMARTEST EJECT STARTER KIT KIT	109
simvastatin TABS	29	SM B-COMPLEX/VITAMIN C TABS . 148		SMARTEST LANCETS 28G	109
SINEMET TABS 100 MG-10 MG, 100 MG-25 MG (carbidopa-levodopa)	41	SM CAMPHOR SPIRIT	55	SMARTEST PERSONA STARTERKIT KIT	109
SINGLE-LET	109	SM COLD & ALLERGY CHILDRENS LIQD	63	SMARTEST PRONTO STARTERKIT KIT	109
SINGULAIR CHEW (montelukast sodium)	14	SM FOAMING ANTACID	11	SMARTEST PROTEGE BLOOD GLUCOSE MONITORING SYSTEM DEVI	109
SINGULAIR PACK (montelukast sodium)	14	SM GLUCOSE	23	SMARTEST PROTEGE	
SINGULAIR TABS (montelukast sodium)	14	SM MICRO THIN LANCETS 33G 109			
sirolimus SOLN	147	SM ONE DAILY ESSENTIAL TABS 149			
sirolimus TABS	147	SM ONE DAILY PRENATAL MISC 158			
SITAGLIPTIN	23	SM PRENATAL VITAMINS TABS 158			
SITAVIG TABS BU	51	SM TRUEDRAW LANCING DEVICE MISC	109		
SIVEXTRO TABS	32	SMART DIABETES VANTAGE LANCING DEVICE MISC	109		
SKIN HAIR & NAILS ADVANCED					

STARTERKIT KIT	109	hcl)	171	160
sodium bicarbonate (antacid) TABS 325 MG, 650 MG	12	SOLOSEC	3	SPEVIGO SOLN
sodium chloride (inhalant) NEBU 0.9 %, 3 %	64	SOLOSITE GEL	75	SPEVIGO SOSY
sodium chloride hypertonic OINT	166	SOLOX GEL	75	SPIKEVAX COVID-19 VACCINE SUSP
sodium chloride hypertonic SOLN 166		SOLTAMOX SOLN	37	176
sodium chloride SOLN IJ 0.9 % ..	146	SOLU-MEDROL 2 GM, 40 MG, 500 MG, 1000 MG	57	SPIKEVAX COVID-19 VACCINE/2023-24 SUSP
sodium chloride TABS	146	SOLUS V2 AUDIBLE BLOOD GLUCOSE MANAGEMENT SYSTEM DEVI	109	176
sodium citrate & citric acid	86	SOLUS V2 AUDIBLE BLOOD GLUCOSE MANAGEMENT SYSTEM KIT	109	SPIKEVAX COVID-19 VACCINE/2023-24 SUSY
sodium fluoride (dental) CREA ...	148	SOLUS V2 AUDIBLE TEST STRP	80	spinosad
sodium fluoride (dental) GEL	148	SOLUS V2 LANCING DEVICE MISC	109	74
sodium fluoride (dental) SOLN 0.2 % 148		SOLUS V2 PRESSURE ACTIVATED SAFETY LANCETS 28G	109	SPIRIVA HANDIHALER CAPS (tiotropium bromide monohydrate) .
sodium fluoride CHEW 0.25 MG, 0.5 MG, 1 MG	145	SOLUS V2 TWIST LANCETS 30G	109	(tiotropium bromide monohydrate) .14
sodium fluoride SOLN 0.125 MG/DROP, 0.5 MG/ML	145	SOMA TABS (carisoprodol)	160	SPIRIVA RESPIMAT AERS
sodium fluoride TABS 0.5 MG	145	SOMATULINE DEPOT	84	14
sodium phosphates ENEM	91	sorafenib tosylate	39	SPIRO PD DEVI
sodium polystyrene sulfonate POWD 147		SORILUX FOAM	68	143
sodium polystyrene sulfonate SUSP OR 15 GM/60ML	147	SOSWEET SYRP	168	spironolactone & hydrochlorothiazide
sodium sulfate-potassium sulfate- magnesium sulfate	91	sotalol hcl (afib/af)	52	82
SOFOSBUVIR/VELPATASVIR TABS	51	sotalol hcl TABS	52	spironolactone SUSP
SOGROYA	83	SOTYKTU	68	82
solifenacin succinate TABS	173	SOTYLIZE SOLN OR	52	SPIRONOLACTONE TABS
SOLIQUA 100/33	22	SOVALDI PACK	51	82
SOLODYN TB24 55 MG, 65 MG, 80 MG, 105 MG, 115 MG (minocycline specialty vitamins products TABS		SOVALDI TABS	51	SPORANOX CAPS (itraconazole) .27
		SOVUNA 200 MG	33	SPORANOX SOLN (itraconazole) .27
				SPRAVATO 56MG DOSE
				20
				SPRAVATO 84MG DOSE
				20
				SPRITAM TB3D
				18
				SPRYCEL
				39
				STALEVO 100 (carbidopa-levodopa- entacapone)
				41
				STALEVO 125 (carbidopa-levodopa- entacapone)
				41
				STALEVO 150 (carbidopa-levodopa- entacapone)
				42
				STALEVO 200 (carbidopa-levodopa- entacapone)
				42
				STALEVO 50 (carbidopa-levodopa-

entacapone) .....42	SULAR 8.5 MG, 17 MG, 34 MG (nisoldipine) 53	SUMADAN WASH LIQD (sulfacetamide sodium w/ sulfur) .. 65
STALEVO 75 (carbidopa-levodopa- entacapone) .....42	sulfacetamide sodium (acne) 65	SUMADAN XLT KIT 65
STAMARIL SUSR 176	sulfacetamide sodium (ophth) OINT 164	sumatriptan .....144
STEGLATRO .....25	sulfacetamide sodium (ophth) SOLN . 164	sumatriptan 20 MG/ACT .....144
STEGLUJAN .....22	sulfacetamide sodium GEL 68	sumatriptan succinate SOAJ 144
STELARA 130 MG/26ML .....85	sulfacetamide sodium LIQD 68	sumatriptan succinate SOCT .....144
STELARA SOSY .....68	sulfacetamide sodium w/ sulfur CREA 10 %-2 %, 10 %-5 % 65	sumatriptan succinate SOLN 6 MG/0.5ML .....144
STERILANCE TL 109	sulfacetamide sodium w/ sulfur EMUL 10 %-1 % 65	sumatriptan succinate TABS 144
STIMUFEND 88	sulfacetamide sodium w/ sulfur FOAM 65	sumatriptan-naproxen sodium ...143
STIMULEN GEL 75	sulfacetamide sodium w/ sulfur LIQD 65	SUMAXIN CP KIT .....65
STIOLTO RESPIMAT 15	sulfacetamide sodium w/ sulfur PADS 65	SUMAXIN PADS .....65
STIVARGA .....39	sulfacetamide sodium w/ sulfur PADS 10 %-4 %65	sunitinib malate .....39
STOOL SOFTENER + STIMULANT LAXATIVE CAPS 91	sulfacetamide sodium w/ sulfur SUSP 8 %-4 % 65	SUNLENCA SOLN .....50
STRATA CTX GEL .....73	sulfacetamide sodium-sulfur in urea vehicle EMUL 10 %-10 %-4 %65	SUNLENCA TBPK .....50
STRATA GRT GEL 75	sulfacetamide sod-prednisolone SOLN 165	SUNOSI 2
STRATA MARK GEL 73	sulfadiazine TABS .....170	SUPER ANTIOXIDANT CAPS ... 153
STRATA XRT GEL .....73	sulfamethoxazole-trimethoprim SUSP.....32	SUPER B- COMPLEX/IRON/VITAMIN C TABS . 148
STRATTERA (atomoxetine hcl) .....2	sulfamethoxazole-trimethoprim TABS.....32	SUPER ENZYMES TABS 81
STRIBILD .....50	sulfasalazine TABS 85	SUPER THIN LANCETS .....110
STRIVERDI RESPIMAT .....15	sulfasalazine TBEC 85	SUPPORT LIQD .....153
SUBLOCADE SOSY .....10	sulindac TABS .....7	SUPPORT-500 CAPS 153
SUBOXONE FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 3 MG-12 MG (buprenorphine hcl-naloxone hcl dihydrate) 10	SUMADAN KIT .....65	SUPPRELIN LA 83
SUBOXONE FILM SL 2 MG-8 MG (buprenorphine hcl-naloxone hcl dihydrate) 10		SUPREP BOWEL PREP KIT (sodium sulfate-potassium sulfate- magnesium sulfate) .....91
sucralfate SUSP 172		SURE COMFORT ALCOHOL PREP PADS .....113
sucralfate TABS 172		SURE COMFORT AUTOKEEPER SAFETY PEN NEEDLES 32GX5/32" ..

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UNITUXIN	35	valproate sodium SOLN OR 250 MG/5ML	19	VANACOF CP LIQD	64
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UNIVERSAL 1 LANCETS ULTRA THIN 30G	111	valrubicin	37	VANACOF DMX LIQD	64
UNIVERSAL 1 LANCETS/33G/MICRO-THIN ...	111	valsartan SOLN	30	VANACOF XP LIQD	64
UP & UP GLUCOSE	23	valsartan TABS	30	VANALICE GEL	74
		valsartan-hydrochlorothiazide	31	VANATAB DM TABS	64
		VALSTAR (valrubicin)	37	VANCOCIN CAPS 125 MG (vancomycin hcl)	32
		VALTOCO 10 MG DOSE LIQD	17	VANCOCIN CAPS 250 MG (vancomycin hcl)	32
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VERIFINE PLUS PEN NEEDLE/32G X 4MM	140	VICTOZA	23	VIRT-C DHA	158
VERIFINE SAFETY LANCET MINI 21G X 2.4MM	112	VIDA MIA AUTOLET LANCINGDEVICE MISC	112	VIRT-NATE DHA CAPS	158
VERIFINE SAFETY LANCET MINI 23G X 1.8MM	112	VIDA MIA UNIFINE PENTIPS32GX4MM	140	VIRT-PN DHA	158
VERIFINE SAFETY LANCET MINI 28G X 1.8MM	112	VIDA MIA UNILET LANCETS SUPER THIN 30G	112	VISION HEALTH CAPS	153
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VERIFINE UNIVERSAL LANCETS 30G	112	VIDAZA SUSR (azacitidine)	35	VISTA ADVANCED DRY EYE FORMULA CAPS	153
VERIFINE UNIVERSAL LANCETS 33G	112	vigabatrin PACK	18	VISTARIL CAPS (hydroxyzine pamoate)	12
VERKAZIA EMUL	164	vigabatrin TABS	18	VISTOGARD	25
VERQUVO	54	VIGAMOX SOLN OP (moxifloxacin hcl (ophth))	164	VITABEX CAPS	153
VERSACLOZ SUSP	46	VIIBRYD TABS (vilazodone hcl)	20	VITABEX PLUS CAPS	153
VERSAFREE SYRP	168	vilazodone hcl TABS	20	VITA-C CRYSTALS	178
VERSAPAP DEVI	143	VIMOVO (naproxen-esomeprazole magnesium)	7	VITACHEW ADULT MULTI VITAMIN CHEW	153
VERSAPAP/UNIVERSAL TUBING DEVI	143	VIMPAT SOLN OR 10 MG/ML (lacosamide)	18	VITAFOL FE+	158
VERSAPLUS SYRP	168	VIMPAT TABS (lacosamide)	18	VITAFOL GUMMIES	159
VERZENIO	39	VINATE DHA RF	158	VITAFOL ULTRA	159
VESICARE LS SUSP	173	vinblastine sulfate SOLN	40	VITAFOL-OB TABS	159
VESICARE TABS (solifenacin succinate)	173	vincristine sulfate	40	VITAFOL-OB+DHA MISC	159
VEVYE SOLN	164	vinorelbine tartrate	40	VITAFOL-ONE CAPS	159
VFEND SUSR (voriconazole)	27	VIOKACE TABS	81	VITAJOY MULTI GUMMIIES ADULT CHEW	153
VFEND TABS (voriconazole)	27	VIRACEPT TABS	50	VITAMEDMD ONE RX/QUATREFOLIC	159
VIBRAMYCIN CAPS (doxycycline hyclate)	171	VIREAD POWD	50	VITAMEDMD REDICHEW RX	159
		VIREAD TABS (tenofovir disoproxil fumarate)	50	vitamin a CAPS 3000 MCG, 8000 UNIT, 10000 UNIT	177
				VITAMIN A PALMITATE TABS	177

VITAMIN B-6 TR TBCR	178	VITRAKVI SOLN	39	CHAMBER/MASK/CHILDS/FROG DEVI	143
VITAMIN C CHEW	149	VIVAGUARD INO BLOOD GLUCOSE METER DEVI	112	VORTEX HOLDING CHAMBER/MASK/TODDLER/LADY BUG DEVI	143
VITAMIN C POWD OR	178	VIVAGUARD INO BLOOD GLUCOSE METER KIT	112	VORTEX VALVED HOLDING CHAMBER DEVI	143
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VITAMIN C TR TBCR	178	VIVAGUARD INO SMART BLOOD GLUCOSE METER DEVI	112	VOTRIENT (pazopanib hcl)	39
VITAMIN D2 TABS 400 UNIT	177	VIVAGUARD LANCETS	112	VOTRIZA-AL LOTN	67
VITAMIN E CAPS 200 UNIT	177	VIVAGUARD LANCETS 30G	112	VOWST	85
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vitamin e CAPS 90 MG, 180 MG, 450 MG	177	VIVAGUARD SAFETY LANCETS/28G	112	VP INSULIN SYRINGE/U- 100/0.3ML/29G X 1/2"	140
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VITAMINS FOR HAIR CAPS	160	VIVJOA	27	VUITY SOLN	163
vitamins w/ lipotropics CAPS	160	VIVOTIF	174	VUMERITY	170
vitamins w/ lipotropics TABS	160	VIZIMPRO	36	VUSION (miconazole-zinc oxide- white petrolatum)	67
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VITATRUE	159	VOGELXO PUMP GEL TD (testosterone)	11	VYTORIN (ezetimibe-simvastatin) 28	
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VITEYES CLASSIC CAPS	153	VOQUEZNA	173	VYXEOS	38
VITEYES CLASSIC MACULAR SUPPORT CAPS	153	VOQUEZNA DUAL PAK	173	VYZULTA	166
VITEYES CLASSIC/OMEGA-3 CAPS	153	VOQUEZNA TRIPLE PAK	173	WAKIX 17.8 MG	2
VITEYES CLASSIC+OMEGA-3 CAPS	153	voriconazole SUSR	27	WAKIX 4.45 MG	2
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WALGREENS COMFORT ASSUREDLANCETS SUPER THIN/28G	112	WESNATE DHA CAPS	159	XELJANZ SOLN	4
WALGREENS GLUCOSE	23	WESTAB PLUS TABS	159	XELJANZ TABS	4
WALGREENS LANCETS	112	WESTGEL DHA	159	XELJANZ XR TB24	4
WALGREENS THIN LANCETS ..	112	WESTUSSIN DM	64	XELODA (capecitabine)	35
WALGREENS ULTRA THIN LANCETS	112	white petrolatum-mineral oil	162	XELPROS EMUL	166
warfarin sodium TABS	15	WILATE KIT	87	XELSTRYM	2
water for injection, sterile IJ	168	WINLEVI	66	XENAZINE (tetrabenazine)	169
WAVESENSE AMP KIT	112	WINREVAIR	54	XENICAL (orlistat)	2
WEBCOL ALCOHOL PREP LARGE 1 PLY	113	WOMENS MULTI GUMMIES CHEW 153		XEPI	66
WEBCOL ALCOHOL PREP LARGE 2 PLY	113	WOMENS MULTIVITAMIN + COLLAGEN GUMMIES CHEW ..	153	XERESE	68
WEBCOL ALCOHOL PREP MEDIUM 2 PLY	113	WOMENS PACK MISC	153	XGEVA SOLN	83
WEGMANS UNIFINE PENTIPS PLUS 32GX4MM	140	WOUND GEL GEL	75	XHANCE EXHU	161
WEGMANS UNIFINE PENTIPS PLUS/MINI/31GX5MM	140	WOUND GEL SPRAY GEL	75	XIFAXAN 200 MG	32
WEGMANS UNIFINE PENTIPS PLUS/SHORT/31GX8MM	140	WOUN'DRES GEL	75	XIFAXAN 550 MG	32
WEGOVIY	2	XACIATO GEL	177	XIGDUO XR	22
WELCHOL TABS (colesevelam hcl) . 28		XADAGO	42	XIIDRA	164
WELIREG	37	XALATAN SOLN (latanoprost) ...	166	XOFIGO	39
WELLBUTRIN SR TB12 (bupropion hcl)	19	XALKORI CAPS	39	XOFLUZA 40 MG, 80 MG	51
WELLBUTRIN XL TB24 (bupropion hcl)	19	XALKORI CPSP	39	XOLAIR SOAJ	13
WESCAP-PN DHA	159	XANAX TABS (alprazolam)	13	XOLAIR SOLR	13
		XANAX XR TB24 (alprazolam)	13	XOLAIR SOSY 300 MG/2ML	13
		XARELTO STARTER PACK TBPK 16		XOLAIR SOSY 75 MG/0.5ML, 150 MG/ML	13
		XARELTO SUSR	16	XOPENEX HFA (levalbuterol tartrate)	15
		XARELTO TABS	16	XOSPATA	39
		XATMEP SOLN	35	XPOVIO	37
		XCOPRI TABS	18	XPOVIO 60 MG TWICE WEEKLY	
		XCOPRI TBPK	18	37	
				XPOVIO 80 MG TWICE WEEKLY	

37	ZADITOR 0.035 % (ketotifen fumarate (ophth))	UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 252600 UNIT-189600 UNIT-60000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT			
X-SEB T PEARL SHAM	75	zafirlukast	14	ZENPHOR WOUND GEL GEL	75
X-SEB T PLUS SHAM	75	zaleplon	90	ZEPATIER	51
XTAMPZA ER	9	ZALTRAP	35	ZEPBOUND	2
XTANDI CAPS	37	ZALVIT TABS	159	ZEPOSIA 7-DAY STARTER PACK CPPK	170
XTANDI TABS	37	ZANABIN ANTIPRURITIC HYDROGEL GEL	75	ZEPOSIA CAPS	170
XULTOPHY 100/3.6	22	ZANAFLEX CAPS (tizanidine hcl) 160		ZEPOSIA STARTER KIT CPPK	170
XYNTHA	87	ZANAFLEX TABS 4 MG (tizanidine hcl)	161	ZEPZELCA	34
XYNTHA SOLOFUSE	87	ZANOSAR	34	ZERVIATE	166
XYOSTED SOAJ	11	ZARONTIN CAPS (ethosuximide)	19	ZESTORETIC (lisinopril & hydrochlorothiazide)	31
XYWAV	168	ZARONTIN SOLN (ethosuximide)	19	ZESTRIL TABS (lisinopril)	30
YASMIN 28 (drospirenone-ethinyl estradiol)	56	ZARXIO	88	ZETIA (ezetimibe)	29
YAZ (drospirenone-ethinyl estradiol) 56		ZATEAN-PN DHA	159	ZETONNA AERS	161
YERVOY	35	ZAVZPRET	143	ZEVALIN Y-90	35
YF-VAX INJ	176	ZEGALOGUE SOAJ	23	ZEV RX INSULIN SYRINGE/0.5ML/30G X 1/2"	140
YONDELIS	34	ZEGALOGUE SOSY	23	ZEV RX INSULIN SYRINGE/0.5ML/30G X 5/16"	140
YONSA	37	ZEGERID CAPS (omeprazole-sodium bicarbonate)	173	ZEV RX INSULIN SYRINGE/1ML/30G X 1/2"	140
YOUR LIFE MULTI ADULT GUMMIES CHEW	153	ZEGERID PACK (omeprazole-sodium bicarbonate)	173	ZEV RX PEN NEEDLES 31G X 5MM	140
YUFLYMA 1-PEN KIT AJKT	5	ZEJULA CAPS	39	ZEV RX PEN NEEDLES 31G X 8MM	140
YUFLYMA 2-PEN KIT AJKT	5	ZEJULA TABS	39	ZEV RX PEN NEEDLES 32G X 4MM	140
YUFLYMA 2-SYRINGE KIT PSKT	5	ZELAPAR TBDP	42	ZEV RX STERILE ALCOHOL PREP	
YUFLYMA CD/UC/HS STARTER AJKT	5	ZELBORAF	39		
YUMVS MULTI ZERO CHEW	153	ZELDANA CAPS	154		
YUMVS ZERO DIABETIC MULTIVITAMIN CHEW	153	ZEMBRACE SYMTOUCH SOAJ	144		
YUPELRI	14	ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-10000 UNIT-3000 UNIT, 168000			
YUSIMRY	5				
YUTIQ	165				

PADS	113	ZOLINZA	39	ZYFLO TABS	14
ZEVRX TWIST TOP LANCETS 30G 112		zolmitriptan SOLN	144	ZYKADIA TABS	39
ZIAC (bisoprolol & hydrochlorothiazide)	31	zolmitriptan TABS	144	ZYLET	165
ZIAGEN SOLN (abacavir sulfate) ..	50	zolmitriptan TBDP	144	ZYLOPRIM 100 MG (allopurinol) ..	87
ZIANA (clindamycin phosphate- tretinoin)	66	ZOLOFT TABS (sertraline hcl)	20	ZYNLONTA	36
zidovudine CAPS	50	ZOLPIDEM TARTRATE CAPS	90	ZYNYZ	36
zidovudine SYRP	50	zolpidem tartrate SUBL	90	ZYPITAMAG 2 MG, 4 MG	29
zidovudine TABS	50	zolpidem tartrate TABS	90	ZYPREXA RELPREVV	46
ZIEXTENZO	88	zolpidem tartrate TBCR	90	ZYPREXA SOLR (olanzapine)	46
zileuton TB12	14	ZOMACTON SOLR SC	83	ZYPREXA TABS (olanzapine)	46
ZIMHI SOSY	26	ZOMIG SOLN (zolmitriptan)	144	ZYPREXA ZYDIS TBDP (olanzapine)	46
zinc oxide (topical) OINT 20 %	74	ZOMIG TABS 2.5 MG, 5 MG (zolmitriptan)	144	ZYTIGA (abiraterone acetate)	37
ZIOPTAN (tafluprost)	166	ZONALON (doxepin hcl (antipruritic))	67	ZYVOX SUSR (linezolid)	32
ziprasidone hcl	43	ZONEGRAN CAPS 25 MG, 100 MG (zonisamide)	18	ZYVOX TABS (linezolid)	32
ziprasidone mesylate	43	ZONISADE SUSP	18		
ZIRABEV	35	zonisamide CAPS	18		
ZITHROMAX PACK (azithromycin) 92		ZORYVE	68		
ZITHROMAX SUSR (azithromycin) 92		ZOVIRAX CREA (acyclovir topical) 68			
ZITHROMAX TABS 250 MG, 500 MG (azithromycin)	92	ZOVIRAX OINT (acyclovir topical) .68			
ZITHROMAX TRI-PAK TABS (azithromycin)	92	ZTALMY	18		
ZITHROMAX Z-PAK TABS (azithromycin)	92	ZTLIDO PTCH	72		
ZITUVIO	23	ZUBSOLV SUBL	10		
ZMA CLEAR SUSP	66	ZURZUVAE	19		
ZOCOR TABS 10 MG, 20 MG, 40 MG (simvastatin)	29	ZYCLARA (imiquimod)	71		
		ZYCLARA PUMP (imiquimod)	71		
		ZYCLARA PUMP	71		
		ZYDELIG	39		