

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://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	
AEPB	Aerosol Powder Breath Activated	EX	External
AERB	Aerosol, breath activated	GRAN	Granules
AERO	Aerosol	IJ	Injection
AJKT	Auto-injector Kit	IMPL	Implant
AUIJ	Auto-injector	INHA	Inhaler
CAPS	Capsule	INJ	Injectable
CHEW	Tablet Chewable	IUD	Intrauterine Device
CONC	Concentrate	IV	Intravenous
CP12	Capsule ER 12 HR	LIQD	Liquid
CP24	Capsule ER 24 HR	LOTN	Lotion
CPCR	Capsule ER	LOZG	Lozenge
CPDR	Capsule Delayed Release	LPOP	Lollipop
CPEP	Capsule Enteric Coated Particles	MISC	Miscellaneous
CPSP	Capsule Sprinkle	NA	Nasal
CREA	Cream	NEBU	Nebulization solution
CSDR	Capsule Delayed Release Sprinkle	OINT	Ointment
DEVI	Device	OP	Ophthalmic
ELIX	Elixir	OPHT	Ophthalmic
EMUL	Emulsion	OR	Oral
ENEM	Enema	PACK	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			<i>dextroamphetamine sulfate TABS PO 30 MG</i>	NP	QL(60 EA per 30 day(s) retail); AL(Up to 21 yrs old)
Amphetamines			<i>dextroamphetamine sulfate TABS PO 30 MG</i>	P	QL(60 EA per 30 day(s) retail); AL(Up to 21 yrs old)
ADDERALL XR CP24 PO (<i>amphetamine-dextroamphetamine</i>)	NP	AL(Up to 21 yrs old)	<i>dextroamphetamine sulfate TABS PO 2.5 MG, 5 MG, 7.5 MG, 10 MG, 15 MG, 20 MG</i>	P	QL(90 EA per 30 day(s) retail); AL(Up to 21 yrs old)
ADDERALL TABS PO (<i>amphetamine-dextroamphetamine</i>)	NP	QL(60 EA per 30 day(s) retail); AL(Up to 21 yrs old)	<i>dextroamphetamine sulfate TABS PO 2.5 MG, 5 MG, 7.5 MG, 10 MG, 15 MG, 20 MG</i>	NP	QL(90 EA per 30 day(s) retail); AL(Up to 21 yrs old)
ADZENYS XR-ODT TBED	NP	AL(Up to 21 yrs old)	DYANAVEL XR SUER	P	AL(Up to 21 yrs old)
<i>amphetamine sulfate TABS PO 10 MG</i>	NP	QL(180 EA per 30 day(s) retail); AL(Up to 21 yrs old)	DYANAVEL XR TBCR	NP	AL(Up to 21 yrs old)
<i>amphetamine sulfate TABS PO 5 MG</i>	NP	QL(60 EA per 30 day(s) retail); AL(Up to 21 yrs old)	EVEKEO ODT TBDP	NP	QL(60 EA per 30 day(s) retail); AL(Up to 21 yrs old)
<i>amphetamine-dextroamphetamine CP24 PO 12.5 MG, 25 MG, 37.5 MG, 50 MG</i>	NP	AL(Up to 21 yrs old)	EVEKEO TABS PO 10 MG (<i>amphetamine sulfate</i>)	NP	QL(180 EA per 30 day(s) retail); AL(Up to 21 yrs old)
<i>amphetamine-dextroamphetamine CP24 PO 5 MG, 10 MG, 15 MG, 20 MG, 25 MG, 30 MG</i>	P	AL(Up to 21 yrs old)	EVEKEO TABS PO 5 MG (<i>amphetamine sulfate</i>)	NP	QL(60 EA per 30 day(s) retail); AL(Up to 21 yrs old)
<i>amphetamine-dextroamphetamine TABS PO</i>	P	QL(60 EA per 30 day(s) retail); AL(Up to 21 yrs old)	<i>lisdexamfetamine dimesylate CAPS PO</i>	NP	AL(Up to 21 yrs old)
DEXEDRINE CP24 PO 10 MG (<i>dextroamphetamine sulfate</i>)	NP	AL(Up to 21 yrs old)	<i>lisdexamfetamine dimesylate CHEW</i>	NP	AL(Up to 21 yrs old)
<i>dextroamphetamine sulfate CP24 PO</i>	P	AL(Up to 21 yrs old)	<i>methamphetamine hcl PO</i>	NP	QL(5 EA daily; 150 EA per 30 day(s) retail); AL(Up to 21 yrs old)
<i>dextroamphetamine sulfate SOLN PO</i>	NP	QL(15 ML daily); AL(Up to 21 yrs old)	MYDAYIS CP24 PO (<i>amphetamine-dextroamphetamine</i>)	NP	AL(Up to 21 yrs old)
<i>dextroamphetamine sulfate SOLN PO</i>	P	QL(15 ML daily); AL(Up to 21 yrs old)	VYVANSE CAPS PO	P	AL(Up to 21 yrs old)
			VYVANSE CHEW	NP	AL(Up to 21 yrs old)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
XELSTRYM	NP		INTUNIV PO 3 MG, 4 MG (<i>guanfacine hcl (adhd)</i>)	NP	AL(Up to 21 yrs old)
Anorexiants Non-Amphetamine			ONYDA XR SUER PO	NP	
ADIPEX-P TABS PO (<i>phentermine hcl</i>)	NP	PA	QELBREE	NP	AL(Up to 21 yrs old)
<i>benzphetamine hcl PO 50 MG</i>	NP		STRATTERA PO (<i>atomoxetine hcl</i>)	NP	AL(Up to 21 yrs old)
<i>diethylpropion hcl TABS PO</i>	NP		Dopamine and Norepinephrine Reuptake Inhibitors (DNRIs)		
<i>diethylpropion hcl TB24 PO</i>	NP		SUNOSI PO	NP	AL(Up to 21 yrs old)
LOMAIRA TABS PO	NP		Histamine H3-Receptor Antagonist/Inverse Agonists		
PHENDIMETRAZINE TARTRATE ER CP24 PO	NP		WAKIX 4.45 MG	NP	AL(Up to 21 yrs old); SP
<i>phendimetrazine tartrate TABS PO</i>	NP		WAKIX 17.8 MG	NP	SP
<i>phentermine hcl CAPS PO</i>	P	PA	Stimulants - Misc.		
<i>phentermine hcl TABS PO</i>	P	PA	APTENSIO XR CP24 PO (<i>methylphenidate hcl</i>)	NP	AL(Up to 21 yrs old)
Anti-Obesity Agents			<i>armodafinil PO</i>	P	AL(Up to 21 yrs old)
<i>orlistat PO</i>	NP		AZSTARYS	NP	AL(Up to 21 yrs old)
SAXENDA	NP	PA	CONCERTA TBCR PO (<i>methylphenidate hcl</i>)	NP	AL(Up to 21 yrs old)
WEGOVY	P	PA	COTEMPLA XR-ODT TBED	NP	AL(Up to 21 yrs old)
XENICAL PO (<i>orlistat</i>)	NP		DAYTRANA PTCH (<i>methylphenidate</i>)	P	AL(Up to 21 yrs old)
ZEPBOUND SOAJ	P		<i>dexmethylphenidate hcl CP24 PO</i>	P	AL(Up to 21 yrs old)
ZEPBOUND SOLN	NP		<i>dexmethylphenidate hcl TABS PO 5 MG</i>	P	QL(90 EA per 30 day(s) retail); AL(Up to 21 yrs old)
Attention-Deficit/Hyperactivity Disorder (ADHD) Agents			<i>dexmethylphenidate hcl TABS PO 2.5 MG, 10 MG</i>	P	QL(60 EA per 30 day(s) retail); AL(Up to 21 yrs old)
<i>atomoxetine hcl PO</i>	P	AL(Up to 21 yrs old)	FOCALIN XR CP24 PO (<i>dexmethylphenidate hcl</i>)	NP	AL(Up to 21 yrs old)
<i>clonidine hcl (adhd) TB12 PO</i>	P	AL(Up to 21 yrs old)			
<i>guanfacine hcl (adhd) PO 1 MG, 2 MG</i>	P	QL(1 EA daily); AL(Up to 21 yrs old)			
<i>guanfacine hcl (adhd) PO 3 MG, 4 MG</i>	P	AL(Up to 21 yrs old)			
INTUNIV PO 1 MG, 2 MG (<i>guanfacine hcl (adhd)</i>)	NP	QL(1 EA daily); AL(Up to 21 yrs old)			

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

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ARIKAYCE	NP	SP	ABRILADA (2 SYRINGE) PSKT	NP	SP
BETHKIS NEBU (tobramycin)	NP	SP	ADALIMUMAB-AACF (2 PEN) AJKT	NP	SP
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 %	P		ADALIMUMAB-AACF (2 SYRINGE) PSKT	NP	SP
gentamicin sulfate IJ 40 MG/ML	P		ADALIMUMAB-AACF(CD/UC/HS STRT) AJKT	NP	SP
KITABIS PAK NEBU (tobramycin)	NP	SP	ADALIMUMAB-AACF(PS/UV STARTER) AJKT	NP	SP
neomycin sulfate TABS PO	P		ADALIMUMAB-AATY (1 PEN) AJKT	NP	SP
paromomycin sulfate PO	NP	SP	ADALIMUMAB-AATY (2 PEN) AJKT	NP	SP
TOBI PODHALER CAPS	NP	SP	ADALIMUMAB-AATY (2 SYRINGE) PSKT	NP	SP
TOBI NEBU (tobramycin)	NP	SP	ADALIMUMAB-ADAZ SOAJ 40 MG/0.4ML	NP	SP
tobramycin sulfate SOLN IJ 1.2 GM/30ML, 2 GM/50ML, 80 MG/2ML	P		ADALIMUMAB-ADAZ SOSY	NP	SP
tobramycin NEBU	NP	SP	ADALIMUMAB-ADBM (2 PEN) AJKT	NP	SP
tobramycin NEBU	P	SP	ADALIMUMAB-ADBM (2 SYRINGE) PSKT	NP	SP
ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions			ADALIMUMAB-ADBM(CD/UC/HS STRT) AJKT	NP	SP
Antirheumatic - Enzyme Inhibitors			ADALIMUMAB-ADBM(PS/UV STARTER) AJKT	NP	SP
OLUMIANT 4 MG	NP	SP; PA	ADALIMUMAB-FKJP (2 PEN) AJKT	NP	SP
OLUMIANT 1 MG, 2 MG	NP	QL(1 EA daily); SP; PA	ADALIMUMAB-FKJP (2 SYRINGE) PSKT	NP	SP
RINVOQ LQ SOLN	NP	SP; PA	ADALIMUMAB-RYVK (2 PEN) AJKT	NP	SP
RINVOQ TB24 PO	P	SP; PA	ADALIMUMAB-RYVK (2 SYRINGE) PSKT	NP	SP
XELJANZ XR TB24 PO 22 MG	NP	SP; PA	AMJEVITA-PED 10KG TO <15KG SOSY	NP	SP
XELJANZ XR TB24 PO 11 MG	P	SP; PA			
XELJANZ SOLN	NP	SP; PA			
XELJANZ TABS	P	SP; PA			
Anti-TNF-alpha - Monoclonal Antibodies					
ABRILADA (1 PEN) AJKT	NP	SP			
ABRILADA (2 PEN) AJKT	NP	SP			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
AMJEVITA-PED 15KG TO <30KG SOSY	NP	SP	IDACIO (2 SYRINGE) PSKT	NP	SP
AMJEVITA SOAJ	NP	SP	IDACIO-CROHNS/UC STARTER AJKT	NP	SP
AMJEVITA SOSY	NP	SP	IDACIO-PSORIASIS STARTER AJKT	NP	SP
CYLTEZO (2 PEN) AJKT	NP	SP	SIMLANDI (1 PEN) AJKT	NP	SP
CYLTEZO (2 SYRINGE) PSKT	NP	SP	SIMLANDI (2 PEN) AJKT	NP	SP
CYLTEZO-CD/UC/HS STARTER AJKT	NP	SP	SIMLANDI (2 SYRINGE) PSKT	NP	SP
CYLTEZO-PSORIASIS/UV STARTER AJKT	NP	SP	SIMPONI ARIA SOLN	NP	SP; PA
HADLIMA PUSHTOUCH SOAJ	NP	SP	SIMPONI SOAJ	NP	SP; PA
HADLIMA SOSY	NP	SP	SIMPONI SOSY	NP	SP; PA
HULIO (2 PEN) AJKT	NP	SP	YUFLYMA (1 PEN) AJKT	NP	SP
HULIO (2 SYRINGE) PSKT	NP	SP	YUFLYMA (2 PEN) AJKT	NP	SP
HUMIRA (2 PEN) AJKT	P	SP; PA	YUFLYMA (2 SYRINGE) PSKT	NP	SP
HUMIRA (2 SYRINGE) PSKT	P	SP; PA	YUFLYMA-CD/UC/HS STARTER AJKT	NP	SP
HUMIRA-CD/UC/HS STARTER AJKT 80 MG/0.8ML	P	SP; PA	YUSIMRY	NP	SP
HUMIRA-PED>=40KG UC STARTER AJKT	P	SP; PA	Gold Compounds		
HUMIRA-PSORIASIS/UEIT STARTER AJKT	P	SP; PA	RIDAURA PO	P	
HYRIMOZ-CROHNS/UC STARTER SOAJ	NP	SP	Interleukin-1 Blockers		
HYRIMOZ-PED<40KG CROHN STARTER SOSY	NP	SP	ARCALYST	NP	SP; PA
HYRIMOZ-PED>=40KG CROHN START SOSY	NP	SP	Interleukin-1 Receptor Antagonist (IL-1Ra)		
HYRIMOZ-PLAQ PSOR/UEIT START SOAJ	NP	SP	KINERET SOSY	P	SP; PA
HYRIMOZ SOAJ	NP	SP	Interleukin-1beta Blockers		
HYRIMOZ SOSY	NP	SP	ILARIS SOLN	NP	SP; PA
IDACIO (2 PEN) AJKT	NP	SP	Interleukin-6 Receptor Inhibitors		
			ACTEMRA ACTPEN SOAJ	NP	SP; PA
			ACTEMRA SOSY	NP	SP; PA
			KEVZARA SOAJ	NP	SP; PA
			KEVZARA SOSY	NP	SP; PA
			TOFIDENCE	NP	SP
			TYENNE SOAJ	P	SP
			TYENNE SOLN	P	SP

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TYENNE SOSY	P	SP	<i>ibuprofen TABS PO 200 MG, 400 MG, 600 MG, 800 MG</i>	P	
Nonsteroidal Anti-inflammatory Agents (NSAIDs)			<i>indomethacin CAPS PO 25 MG, 50 MG</i>	P	
<i>ARTHROTEC TBEC PO (diclofenac w/ misoprostol)</i>	NP		<i>indomethacin CPCR PO</i>	NP	
<i>CELEBREX PO (celecoxib)</i>	NP		<i>indomethacin CPCR PO</i>	P	
<i>celecoxib PO</i>	P		<i>indomethacin SUPP PR</i>	NP	
<i>DAYPRO TABS PO (oxaprozin)</i>	NP		<i>indomethacin SUSP PO</i>	NP	
<i>diclofenac potassium CAPS PO</i>	NP		<i>ketoprofen CAPS PO 25 MG</i>	NP	
<i>diclofenac potassium TABS PO</i>	NP		<i>ketoprofen CP24 PO</i>	NP	
<i>diclofenac sodium TB24 PO</i>	P		<i>ketorolac tromethamine TABS PO</i>	P	
<i>diclofenac sodium TBEC PO</i>	P		<i>meclofenamate sodium CAPS PO</i>	NP	
<i>diclofenac w/ misoprostol TBEC PO</i>	NP		<i>mefenamic acid CAPS PO</i>	NP	
<i>etodolac CAPS PO</i>	NP		<i>meloxicam CAPS PO 10 MG</i>	NP	
<i>etodolac TABS PO</i>	NP		<i>meloxicam CAPS PO 5 MG</i>	NP	QL(1 EA daily)
<i>etodolac TB24 PO</i>	NP		<i>meloxicam TABS PO 15 MG</i>	P	
<i>FELDENE CAPS PO 10 MG (piroxicam)</i>	NP		<i>meloxicam TABS PO 7.5 MG</i>	P	QL(1 EA daily)
<i>fenoprofen calcium CAPS PO 400 MG</i>	NP		<i>nabumetone PO</i>	P	
<i>fenoprofen calcium TABS PO</i>	NP		<i>NALFON CAPS PO (fenoprofen calcium)</i>	NP	
<i>flurbiprofen TABS PO 100 MG</i>	NP		<i>NALFON TABS PO (fenoprofen calcium)</i>	NP	
<i>ibuprofen CAPS PO</i>	P		<i>NAPRELAN TB24 PO (naproxen sodium)</i>	NP	
<i>ibuprofen CHEW PO</i>	P		<i>NAPROSYN SUSP PO (naproxen)</i>	NP	
<i>ibuprofen-famotidine</i>	NP		<i>naproxen sodium CAPS PO</i>	NP	
<i>ibuprofen SUSP PO</i>	P		<i>naproxen sodium TABS PO</i>	NP	
<i>ibuprofen SUSP PO 100 MG/5ML</i>	NP	RX/OTC	<i>naproxen sodium TABS PO 220 MG</i>	P	
<i>ibuprofen TABS PO 800 MG</i>	NP				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>naproxen sodium TB24 PO</i>	NP		ENBREL SOSY	P	SP; PA
<i>naproxen-esomeprazole magnesium PO</i>	NP		ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions		
<i>naproxen SUSP PO</i>	NP		Analgesic Combinations		
<i>naproxen TABS PO 250 MG, 375 MG</i>	NP		<i>acetaminophen w/ pamabrom PO</i>	P	
<i>naproxen TABS PO</i>	P		<i>acetaminophen-caffeine TABS PO</i>	P	
<i>naproxen TBEC PO</i>	NP		<i>acetaminophen-pamabrom-pyrimidine TABS PO</i>	P	
<i>oxaprozin TABS PO</i>	NP		ANACIN TABS PO	P	
<i>piroxicam CAPS PO</i>	NP		<i>aspirin-acetaminophen-caffeine TABS PO</i>	P	
RELAFEN DS PO	NP		<i>aspirin-acetaminophen-caffeine TABS PO</i>	P	
<i>sulindac TABS PO</i>	P		<i>butalbital-acetaminophen-caffeine CAPS PO 40 MG-50 MG-300 MG, 40 MG-50 MG-325 MG</i>	NP	
TOLECTIN 600 TABS PO	NP		<i>butalbital-acetaminophen-caffeine TABS PO 40 MG-50 MG-325 MG</i>	P	
<i>tolmetin sodium CAPS PO</i>	NP		<i>butalbital-acetaminophen TABS PO 50 MG-325 MG</i>	P	
<i>tolmetin sodium TABS PO 600 MG</i>	NP		<i>butalbital-aspirin-caffeine CAPS PO</i>	P	
VIMOVO PO 500 MG-20 MG (<i>naproxen-esomeprazole magnesium</i>)	NP		CRAMP TABS PO	P	
Phosphodiesterase 4 (PDE4) Inhibitors			FIORICET CAPS PO (<i>butalbital-acetaminophen-caffeine</i>)	NP	
OTZLA TABS PO 30 MG	P	SP; PA	VANQUISH	P	
OTZLA TABS PO 20 MG	NP	SP	Analgesics Other		
OTZLA TBPK PO	NP	SP	<i>acetaminophen CAPS PO 500 MG</i>	P	
OTZLA TBPK PO	P	SP; PA	<i>acetaminophen CHEW PO 160 MG</i>	NP	
Pyrimidine Synthesis Inhibitors			<i>acetaminophen CHEW PO 160 MG</i>	P	
<i>leflunomide PO 20 MG</i>	P		<i>acetaminophen ELIX PO</i>	P	
<i>leflunomide PO 10 MG</i>	P	QL(1 EA daily)	<i>acetaminophen LIQD PO</i>	P	
Selective Costimulation Modulators					
ORENCIA CLICKJECT SOAJ	P	SP; PA			
ORENCIA SOSY	P	SP; PA			
Soluble Tumor Necrosis Factor Receptor Agents					
ENBREL MINI SOCT	P	SP; PA			
ENBREL SURECLICK SOAJ	P	SP; PA			
ENBREL SOLN	P	SP; PA			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>acetaminophen LIQD PO 160 MG/5ML</i>	NP		<i>aspirin buffered (cal carb-mag carb-mag oxide) PO</i>	P	
<i>acetaminophen LIQD PO</i>	P		<i>aspirin effervescent PO</i>	P	
<i>acetaminophen SOLN PO 160 MG/5ML, 325 MG/10.15ML, 650 MG/20.3ML</i>	P		<i>aspirin CHEW PO</i>	P	
<i>acetaminophen SOLN PO 160 MG/5ML, 325 MG/10.15ML, 650 MG/20.3ML</i>	P		<i>aspirin CHEW PO</i>	P	
<i>acetaminophen SOLN PO 160 MG/5ML, 325 MG/10.15ML, 650 MG/20.3ML</i>	NP		ASPIRIN SUPP PR 300 MG	P	
<i>acetaminophen SUPP PR 120 MG, 650 MG</i>	P		<i>aspirin TABS PO 325 MG, 500 MG</i>	P	
ACETAMINOPHEN SUPP PR	P		<i>aspirin TABS PO 325 MG, 500 MG</i>	P	
<i>acetaminophen SUSP PO 160 MG/5ML, 650 MG/20.3ML</i>	P		<i>aspirin TBEC PO 81 MG, 325 MG</i>	P	
<i>acetaminophen SUSP PO 160 MG/5ML</i>	NP		<i>aspirin TBEC PO 81 MG</i>	NP	
<i>acetaminophen SUSP PO 160 MG/5ML, 650 MG/20.3ML</i>	P		<i>aspirin TBEC PO 81 MG, 325 MG</i>	P	
<i>acetaminophen TABS PO 325 MG, 500 MG</i>	P		BAYER PLUS PO	P	
<i>acetaminophen TABS PO 325 MG, 500 MG</i>	P		<i>diflunisal TABS PO</i>	NP	
<i>acetaminophen TABS PO 325 MG, 500 MG</i>	NP		DOLOBID TABS PO	NP	
<i>acetaminophen TBCR PO</i>	P		<i>magnesium salicylate PO 500 MG</i>	P	
<i>acetaminophen TBCR PO</i>	P		<i>magnesium salicylate tetrahydrate PO</i>	P	
<i>acetaminophen TBCR PO</i>	NP		<i>salsalate PO</i>	P	
FEVERALL INFANTS SUPP PR	P		ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions		
FEVERALL JUNIOR STRENGTH SUPP PR	P		Opioid Agonists		
TRIAMINIC FEVER REDUCER SYRP PO	P		ACTIQ LPOP 400 MCG, 1600 MCG (<i>fentanyl citrate</i>)	NP	
Salicylates			<i>codeine sulfate TABS PO 30 MG</i>	P	
			CODEINE SULFATE TABS PO 60 MG	P	
			CONZIP CP24 PO (<i>tramadol hcl</i>)	NP	
			DILAUDID LIQD PO (<i>hydromorphone hcl</i>)	NP	
			DILAUDID TABS PO (<i>hydromorphone hcl</i>)	NP	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
DSUVIA SUBL	NP		<i>morphine sulfate SUPP PR</i>	NP	
<i>fentanyl citrate LPOP</i>	NP		<i>morphine sulfate TABS PO</i>	P	
<i>fentanyl citrate TABS 400 MCG, 600 MCG, 800 MCG</i>	NP		<i>morphine sulfate TBCR PO</i>	P	
<i>fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR</i>	P	PA	MS CONTIN TBCR PO (<i>morphine sulfate</i>)	NP	
<i>fentanyl PT72 37.5 MCG/HR, 62.5 MCG/HR, 87.5 MCG/HR</i>	NP	PA	<i>oxycodone hcl CAPS PO</i>	P	
FENTORA TABS (<i>fentanyl citrate</i>)	NP		<i>oxycodone hcl CONC PO 100 MG/5ML</i>	NP	
<i>hydrocodone bitartrate CP12 PO</i>	NP	PA	<i>oxycodone hcl SOLN PO</i>	P	
<i>hydrocodone bitartrate T24A</i>	NP	PA	<i>oxycodone hcl T12A PO 10 MG, 20 MG, 40 MG, 80 MG</i>	NP	PA
<i>hydromorphone hcl LIQD PO</i>	NP		<i>oxycodone hcl TABS PO 5 MG, 10 MG</i>	P	
HYDROMORPHONE HCL SUPP PR	NP		<i>oxycodone hcl TABS PO 20 MG</i>	P	QL(120 EA per 365 day(s) retail)
<i>hydromorphone hcl TABS PO</i>	P		<i>oxycodone hcl TABS PO 30 MG</i>	P	QL(60 EA per 365 day(s) retail)
<i>hydromorphone hcl TB24 PO</i>	NP	PA	<i>oxycodone hcl TABS PO 15 MG</i>	P	QL(240 EA per 365 day(s) retail)
HYSINGLA ER T24A	NP	PA	OXYCONTIN T12A PO	NP	PA
<i>levorphanol tartrate TABS PO</i>	NP		<i>oxymorphone hcl TABS PO</i>	NP	
<i>meperidine hcl SOLN PO 50 MG/5ML</i>	NP		<i>oxymorphone hcl TB12 PO</i>	NP	PA
<i>meperidine hcl TABS PO 50 MG</i>	NP		ROXICODONE TABS PO 15 MG (<i>oxycodone hcl</i>)	NP	QL(240 EA per 365 day(s) retail)
<i>morphine sulfate beads PO</i>	NP	PA	ROXICODONE TABS PO 30 MG (<i>oxycodone hcl</i>)	NP	QL(60 EA per 365 day(s) retail)
<i>morphine sulfate CP24 PO 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG</i>	NP	PA	ROXYBOND TABA PO	NP	
<i>morphine sulfate SOLN PO 10 MG/5ML, 20 MG/5ML, 20 MG/ML, 100 MG/5ML</i>	P		<i>tramadol hcl CP24 PO 100 MG, 200 MG, 300 MG</i>	NP	
			<i>tramadol hcl SOLN</i>	NP	
			TRAMADOL HCL SOLN (<i>tramadol hcl</i>)	NP	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>tramadol hcl TABS PO 50 MG</i>	P		<i>oxycodone w/ acetaminophen TABS PO 325 MG-10 MG, 325 MG-2.5 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	P	
<i>tramadol hcl TABS PO 25 MG, 75 MG, 100 MG</i>	NP		PERCOCET TABS PO 325 MG-10 MG, 325 MG-2.5 MG, 325 MG-5 MG, 325 MG-7.5 MG (oxycodone w/ acetaminophen)	NP	
<i>tramadol hcl TB24 PO</i>	P	PA	PROLATE SOLN PO	NP	
<i>tramadol hcl TB24 PO</i>	NP	PA	PROLATE TABS PO	NP	
Opioid Combinations			SEGLENTIS	NP	
<i>acetaminophen w/ codeine SOLN PO</i>	P		<i>tramadol-acetaminophen PO</i>	P	
<i>acetaminophen w/ codeine TABS PO 15 MG-300 MG, 30 MG-300 MG, 60 MG-300 MG</i>	P		Opioid Partial Agonists		
<i>acetaminophen-caff-dihydrocod CAPS PO 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 PO</i>	P		BELBUCA FILM 900 MCG	NP	PA
<i>butalbital-aspirin-caffeine w/cod PO</i>	P		BRIXADI (WEEKLY) SOSY	P	SP
FIORICET/CODEINE PO 30 MG-40 MG-50 MG-300 MG (butalbital-acetaminophen-caffeine w/ codeine)	NP		BRIXADI SOSY 64 MG/0.18ML, 96 MG/0.27ML, 128 MG/0.36ML	P	SP
<i>hydrocodone-acetaminophen SOLN PO</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 PO 325 MG-2.5 MG</i>	NP		<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 2 MG-8 MG</i>	P	QL(3 EA daily)
<i>hydrocodone-acetaminophen TABS PO 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 PO 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 PO	NP		<i>buprenorphine hcl SUBL</i>	P	
<i>oxycodone w/ acetaminophen SOLN PO</i>	P		<i>buprenorphine PTWK</i>	NP	PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>butorphanol tartrate NA 10 MG/ML</i>	NP		<i>testosterone enanthate SOLN IM</i>	P	PA
BUTRANS PTWK (<i>buprenorphine</i>)	P	PA	<i>testosterone GEL TD 1 %, 1.62 %, 10 MG/ACT, 1.62 %</i>	P	PA
<i>pentazocine w/ naloxone hcl PO</i>	NP		<i>testosterone GEL TD 1 %, 20.25 MG/1.25GM, 25 MG/2.5GM, 40.5 MG/2.5GM, 50 MG/5GM</i>	NP	PA
SUBLOCADE SOSY	P	SP	<i>testosterone SOLN</i>	P	PA
SUBOXONE FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 3 MG-12 MG (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	NP		TLANDO CAPS	NP	PA
SUBOXONE FILM SL 2 MG-8 MG (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	NP	QL(3 EA daily)	VOGELXO PUMP GEL TD (<i>testosterone</i>)	NP	PA
ZUBSOLV SUBL	NP		VOGELXO GEL TD (<i>testosterone</i>)	NP	PA
ANDROGENS-ANABOLIC - Drugs to Regulate Hormones			XYOSTED SOAJ	NP	PA
Anabolic Steroids			ANORECTAL AND RELATED PRODUCTS - Rectal Drugs to Treat Pain, Swelling and Itching		
<i>oxandrolone PO 2.5 MG</i>			Intrarectal Steroids		
Androgens			<i>budesonide (intrarectal)</i>	NP	
ANDROGEL PUMP GEL TD (<i>testosterone</i>)	NP	PA	<i>hydrocortisone (intrarectal) PR</i>	P	
ANDROGEL GEL TD 25 MG/2.5GM (<i>testosterone</i>)	NP	PA	UCERIS (<i>budesonide (intrarectal)</i>)	NP	
AVEED SOLN	NP	SP; PA	Rectal Combinations		
AZMIRO SOSY	NP		<i>lidocaine-hydrocortisone acetate (rectal) CREA EX</i>	P	
<i>danazol CAPS PO</i>	P	PA	Rectal Local Anesthetics		
JATENZO CAPS	NP	PA	AMERICAINE	P	
<i>methyltestosterone CAPS PO</i>	NP	PA	<i>dibucaine (rectal) EX</i>	P	
<i>methyltestosterone TABS</i>	NP	PA	<i>lidocaine (anorectal) CREA</i>	P	
NATESTO GEL NA	NP	PA	Rectal Steroids		
TESTIM GEL TD (<i>testosterone</i>)	NP	PA	ANUSOL-HC EX (<i>hydrocortisone (rectal)</i>)	NP	
TESTOPEL PLLT	NP	SP	<i>hydrocortisone (rectal) EX 1 %</i>	P	RX/OTC
<i>testosterone cypionate SOLN IM</i>	P	PA	<i>hydrocortisone (rectal) EX</i>	NP	
			Vasodilating Agents		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>nitroglycerin (intra-anal) PR</i>	NP		<i>calcium carbonate (antacid) CHEW PO 400 MG, 420 MG, 500 MG, 750 MG, 1000 MG</i>	P	
RECTIV PR (<i>nitroglycerin (intra-anal)</i>)	NP		<i>calcium carbonate (antacid) CHEW PO 750 MG</i>	NP	
ANTACIDS			<i>calcium carbonate (antacid) CHEW PO 400 MG, 420 MG, 500 MG, 750 MG, 1000 MG</i>	P	
Antacid Combinations			<i>calcium carbonate (antacid) CHEW PO 400 MG, 420 MG, 500 MG, 750 MG, 1000 MG</i>	P	
<i>alum & mag hydrox-simethicone CHEW PO 200 MG-25 MG-200 MG</i>	P		<i>calcium carbonate (antacid) CHEW PO 400 MG, 420 MG, 500 MG, 750 MG, 1000 MG</i>	P	
<i>alum & mag hydrox-simethicone LIQD PO</i>	P		<i>calcium carbonate (antacid) CHEW PO 400 MG, 420 MG, 500 MG, 750 MG, 1000 MG</i>	P	
<i>alum & mag hydrox-simethicone SUSP PO</i>	P		<i>calcium carbonate (antacid) SUSP</i>	P	
<i>alum & mag hydrox-simethicone SUSP PO</i>	P		CALCIUM CARBONATE ANTACID SUSP	P	
<i>aluminum hydroxide-mag carb CHEW PO</i>	P		TUMS ULTRA 1000 CHEW PO (<i>calcium carbonate (antacid)</i>)	P	
<i>aluminum hydroxide-mag carb SUSP PO 237.5 MG/5ML-254 MG/5ML, 358 MG/15ML-95 MG/15ML</i>	P		Antacids - Magnesium Salts		
ANTACID CHEW PO	P		<i>magnesium oxide TABS PO 400 MG</i>	P	
<i>calcium carbonate-mag hydrox SUSP PO</i>	P		<i>magnesium oxide TABS PO 400 MG</i>	NP	
<i>calcium carbonate-simethicone CHEW PO 1000 MG-60 MG</i>	P		ANTHELMINTICS - Drugs to Treat Worm Infections		
SM FOAMING ANTACID PO	P		Anthelmintics		
Antacids - Aluminum Salts			<i>albendazole PO</i>	P	
ALUMINUM HYDROXIDE GEL SUSP PO	P		BENZNIDAZOLE	P	SP
Antacids - Bicarbonate			<i>praziquantel PO</i>	P	
<i>sodium bicarbonate (antacid) TABS PO 325 MG, 650 MG</i>	P		ANTIANGINAL AGENTS - Drugs to Treat Chest Pain		
Antacids - Calcium Salts			Antianginals-Other		
			ASPRUZYO SPRINKLE PACK	NP	
			RANEXA TB12 PO 500 MG (<i>ranolazine</i>)	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>ranolazine TB12 PO</i>	P		VISTARIL CAPS PO (hydroxyzine pamoate)	NP	
Nitrates			Benzodiazepines		
GONITRO PACK	NP		ALPRAZOLAM INTENSOL CONC	NP	
ISORDIL TITRADOSE TABS PO (<i>isosorbide dinitrate</i>)	NP		<i>alprazolam TABS PO</i>	NP	
<i>isosorbide dinitrate TABS PO</i>	P		<i>alprazolam TB24 PO</i>	NP	
<i>isosorbide mononitrate TABS PO</i>	P		<i>alprazolam TBDP PO</i>	NP	
ISOSORBIDE MONONITRATE TABS PO	P		ATIVAN TABS PO (lorazepam)	NP	
<i>isosorbide mononitrate TB24 PO</i>	P		<i>chlordiazepoxide hcl CAPS PO</i>	P	
NITRO-BID OINT	NP		<i>clorazepate dipotassium TABS PO</i>	P	
NITRO-DUR PT24 (<i>nitroglycerin</i>)	NP		<i>diazepam CONC</i>	NP	
NITRO-DUR PT24	NP		DIAZEPAM SOAJ	NP	
<i>nitroglycerin PT24</i>	P		<i>diazepam SOLN PO 5 MG/5ML</i>	P	
<i>nitroglycerin SOLN TL 0.4 MG/SPRAY</i>	NP		<i>diazepam SOLN IJ 5 MG/ML, 10 MG/2ML</i>	NP	
<i>nitroglycerin SUBL</i>	P		DIAZEPAM SOLN IJ 5 MG/ML	NP	
NITROLINGUAL SOLN TL (<i>nitroglycerin</i>)	NP		<i>diazepam TABS PO</i>	P	
NITROSTAT SUBL (<i>nitroglycerin</i>)	NP		<i>lorazepam CONC PO</i>	NP	
ANTIANXIETY AGENTS - Drugs to Treat Anxiety			<i>lorazepam TABS PO</i>	P	
Antianxiety Agents - Misc.			LOREEV XR CS24 1 MG, 2 MG, 3 MG	NP	
<i>buspirone hcl PO</i>	P		<i>oxazepam CAPS PO</i>	NP	
<i>droperidol SOLN 2.5 MG/ML</i>	P		TRANXENE-T TABS PO (<i>clorazepate dipotassium</i>)	NP	
<i>hydroxyzine hcl SYRP PO</i>	P		VALIUM TABS PO (<i>diazepam</i>)	NP	
<i>hydroxyzine hcl TABS PO</i>	P		XANAX XR TB24 PO (<i>alprazolam</i>)	NP	
<i>hydroxyzine pamoate CAPS PO</i>	P		XANAX TABS PO (<i>alprazolam</i>)	NP	
<i>hydroxyzine pamoate CAPS PO</i>	P		ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms		
<i>meprobamate PO</i>	NP		Antiarrhythmics Type I-A		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>disopyramide phosphate CAPS PO</i>	P		<i>ipratropium bromide SOLN 0.02 %</i>	P	
NORPACE CR CP12 PO	P		SPIRIVA HANDIHALER CAPS (<i>tiotropium bromide monohydrate</i>)	P	
<i>quinidine gluconate TBCR PO</i>	P		SPIRIVA RESPIMAT AERS	P	
<i>quinidine sulfate TABS PO</i>	P		<i>tiotropium bromide monohydrate CAPS</i>	NP	
Antiarrhythmics Type I-B			TUDORZA PRESSAIR	NP	
<i>mexiletine hcl PO</i>	P		YUPELRI	NP	
Antiarrhythmics Type I-C			Leukotriene Modulators		
<i>flecainide acetate PO</i>	P		ACCOLATE PO (<i>zafirlukast</i>)	NP	QL(1 EA daily)
<i>propafenone hcl TABS PO</i>	P		<i>montelukast sodium CHEW PO</i>	P	
Antiarrhythmics Type III			<i>montelukast sodium PACK PO</i>	NP	
<i>amiodarone hcl SOLN 150 MG/3ML</i>	P		<i>montelukast sodium TABS PO</i>	P	
<i>amiodarone hcl TABS PO</i>	P		SINGULAIR CHEW PO (<i>montelukast sodium</i>)	NP	
<i>dofetilide PO</i>	P		SINGULAIR PACK PO (<i>montelukast sodium</i>)	NP	
MULTAQ PO	P		SINGULAIR TABS PO (<i>montelukast sodium</i>)	NP	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions			<i>zafirlukast PO</i>	NP	QL(1 EA daily)
Antiasthmatic - Monoclonal Antibodies			<i>zileuton TB12 PO</i>	NP	
CINQAIR	NP	SP	ZYFLO TABS PO	NP	
FASENRA PEN SOAJ	P	SP; PA	Phosphodiesterase 3 & 4 (PDE3 & PDE4) Inhibitors		
FASENRA SOSY	P	SP; PA	OHTUVAYRE	NP	SP
NUCALA SOAJ	P	SP; PA	Selective Phosphodiesterase 4 (PDE4) Inhibitors		
NUCALA SOLR	P	SP; PA	DALIRESP PO (<i>roflumilast</i>)	NP	
NUCALA SOSY	P	SP; PA	<i>roflumilast PO</i>	NP	
TEZSPIRE SOAJ	P	SP; PA	Steroid Inhalants		
TEZSPIRE SOSY	P	SP; PA	ALVESCO	NP	
XOLAIR SOAJ	P	SP; PA			
XOLAIR SOLR	P	SP; PA			
XOLAIR SOSY	P	SP; PA			
Bronchodilators - Anticholinergics					
ATROVENT HFA	P				
INCRUSE ELLIPTA	P				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ARMONAIR DIGIHALER 113 MCG/ACT, 232 MCG/ACT	NP		AIRDUO RESPICLICK 113/14 AEPB (<i>fluticasone-salmeterol</i>)	NP	
ARNUITY ELLIPTA	P		AIRDUO RESPICLICK 232/14 AEPB (<i>fluticasone-salmeterol</i>)	NP	
ASMANEX (120 METERED DOSES) AEPB	P		AIRDUO RESPICLICK 55/14 AEPB (<i>fluticasone-salmeterol</i>)	NP	
ASMANEX (14 METERED DOSES) AEPB	P		AIRSUPRA	NP	
ASMANEX (30 METERED DOSES) AEPB	P		<i>albuterol sulfate</i> AERS	P	
ASMANEX (60 METERED DOSES) AEPB	P		<i>albuterol sulfate</i> AERS	NP	
ASMANEX HFA AERO	P		<i>albuterol sulfate</i> NEBU 0.083 %, 2.5 MG/0.5ML, 0.63 MG/3ML, 1.25 MG/3ML, 2.5 MG/0.5ML	P	
<i>budesonide (inhalation) SUSP 0.25 MG/2ML, 0.5 MG/2ML</i>	P		<i>albuterol sulfate</i> SYRP PO	P	
<i>budesonide (inhalation) SUSP 1 MG/2ML</i>	NP		<i>albuterol sulfate</i> TABS PO	NP	
FLOVENT DISKUS AEPB (<i>fluticasone propionate (inhalation)</i>)	P		ANORO ELLIPTA	P	
FLOVENT HFA (<i>fluticasone propionate hfa</i>)	P		<i>arformoterol tartrate</i>	NP	
<i>fluticasone propionate (inhalation) AEPB</i>	P	AL(Up to 18 yrs old)	BEVESPI AEROSPHERE	NP	
<i>fluticasone propionate hfa</i>	P	AL(Up to 18 yrs old)	BREO ELLIPTA	NP	
PULMICORT FLEXHALER AEPB	P		BREO ELLIPTA (<i>fluticasone furoate-vilanterol</i>)	NP	
PULMICORT SUSP (<i>budesonide (inhalation)</i>)	NP		BREZTRI AEROSPHERE	NP	
QVAR REDHALER	P		BROVANA (<i>arformoterol tartrate</i>)	NP	
Sympathomimetics			<i>budesonide-formoterol fumarate dihydrate</i>	NP	
ADVAIR DISKUS AEPB (<i>fluticasone-salmeterol</i>)	P		COMBIVENT RESPIMAT AERS	P	
ADVAIR HFA AERO (<i>fluticasone-salmeterol</i>)	P		DUAKLIR PRESSAIR	NP	
AIRDUO DIGIHALER 113 MCG/ACT-14 MCG/ACT, 232 MCG/ACT-14 MCG/ACT	NP		DULERA	P	
			<i>fluticasone furoate-vilanterol</i>	NP	
			<i>fluticasone-salmeterol</i> AEPB	NP	
			<i>fluticasone-salmeterol</i> AERO	NP	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>formoterol fumarate NEBU</i>	NP		ELIQUIS TABS	P	
<i>ipratropium-albuterol SOLN</i>	P		SAVAYSA PO 60 MG	NP	42 day(s) max supply per 365 day(s) retail
<i>levalbuterol hcl</i>	NP		SAVAYSA PO 15 MG, 30 MG	NP	QL(1 EA daily); 42 day(s) max supply per 365 day(s) retail
<i>levalbuterol tartrate</i>	NP		XARELTO STARTER PACK TBPK	P	
PERFOROMIST NEBU (<i>formoterol fumarate</i>)	NP		XARELTO SUSR	NP	
PROAIR DIGIHALER	NP		XARELTO TABS	P	
PROAIR RESPICLICK AEPB	NP		Heparins And Heparinoid-Like Agents		
SEREVENT DISKUS	P		ARIXTRA (<i>fondaparinux sodium</i>)	NP	42 day(s) max supply per 365 day(s) retail; SP
STIOLTO RESPIMAT	P		<i>enoxaparin sodium SOLN IJ 300 MG/3ML</i>	P	42 day(s) max supply per 365 day(s) retail; SP
STRIVERDI RESPIMAT	P		<i>enoxaparin sodium SOSY</i>	P	42 day(s) max supply per 365 day(s) retail; SP
SYMBICORT (<i>budesonide-formoterol fumarate dihydrate</i>)	P		<i>fondaparinux sodium</i>	NP	42 day(s) max supply per 365 day(s) retail; SP
SYMBICORT (<i>budesonide-formoterol fumarate dihydrate</i>)	NP		FRAGMIN SOLN 95000 UNIT/3.8ML	NP	42 day(s) max supply per 365 day(s) retail; SP
<i>terbutaline sulfate TABS PO</i>	P		FRAGMIN SOLN 10000 UNIT/4ML	NP	SP
TRELEGY ELLIPTA	NP		FRAGMIN SOSY	NP	42 day(s) max supply per 365 day(s) retail; SP
VENTOLIN HFA AERS (<i>albuterol sulfate</i>)	P		HEPARIN (PORCINE) IN NACL SOLN IV 0.45 %-25000 UNIT/250ML, 0.45 %-25000 UNIT/500ML	P	
XOPENEX HFA (<i>levalbuterol tartrate</i>)	NP		HEPARIN SOD (PORCINE) IN D5W	P	
Xanthines					
<i>theophylline ELIX PO</i>	P				
<i>theophylline SOLN PO</i>	P				
<i>theophylline TB12 PO 300 MG, 450 MG</i>	P				
<i>theophylline TB24 PO</i>	P				
ANTICOAGULANTS - Blood Thinners					
Coumarin Anticoagulants					
<i>warfarin sodium TABS PO</i>	P				
Direct Factor Xa Inhibitors					
ELIQUIS DVT/PE STARTER PACK TBPK	P				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>heparin sodium (porcine) lock flush 10 UNIT/ML, 100 UNIT/ML</i>	P		LIBERVANT FILM	NP	
<i>heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML</i>	P		NAYZILAM	P	
LOVENOX SOLN IJ 300 MG/3ML (<i>enoxaparin sodium</i>)	NP	42 day(s) max supply per 365 day(s) retail; SP	ONFI SUSP (<i>clobazam</i>)	P	
LOVENOX SOSY (<i>enoxaparin sodium</i>)	NP	42 day(s) max supply per 365 day(s) retail; SP	ONFI TABS PO (<i>clobazam</i>)	P	
Thrombin Inhibitors			SYMPAZAN FILM	NP	
<i>dabigatran etexilate mesylate CAPS PO</i>	NP		VALTOCO 10 MG DOSE LIQD	P	
PRADAXA CAPS PO (<i>dabigatran etexilate mesylate</i>)	P		VALTOCO 15 MG DOSE LQPK	P	
PRADAXA PACK	NP	SP	VALTOCO 20 MG DOSE LQPK	P	
ANTICONVULSANTS - Drugs to Treat Seizures			VALTOCO 5 MG DOSE LIQD	P	
AMPA Glutamate Receptor Antagonists			Anticonvulsants - Misc.		
FYCOMPA SUSP	NP		APTOM	NP	
FYCOMPA TABS	NP		BANZEL SUSP (<i>rufinamide</i>)	NP	SP
Anticonvulsants - Benzodiazepines			BANZEL TABS PO (<i>rufinamide</i>)	NP	SP
<i>clobazam SUSP</i>	P		BRIVIACT SOLN PO 10 MG/ML	P	SP
<i>clobazam TABS PO</i>	P		BRIVIACT TABS	P	SP
<i>clonazepam TABS PO</i>	P		<i>carbamazepine CHEW PO 100 MG</i>	P	
<i>clonazepam TBDP PO</i>	NP		<i>carbamazepine CHEW PO 200 MG</i>	NP	
DIASTAT ACUDIAL GEL PR (<i>diazepam (anticonvulsant)</i>)	P		<i>carbamazepine CP12 PO</i>	P	
DIASTAT PEDIATRIC GEL PR (<i>diazepam (anticonvulsant)</i>)	P		<i>carbamazepine SUSP PO</i>	P	
<i>diazepam (anticonvulsant) GEL PR</i>	P		<i>carbamazepine TABS PO</i>	P	
KLONOPIN TABS PO (<i>clonazepam</i>)	P		<i>carbamazepine TB12 PO</i>	P	
			CARBATROL CP12 PO (<i>carbamazepine</i>)	P	
			DIACOMIT CAPS	NP	SP
			DIACOMIT PACK	NP	SP
			ELEPSIA XR TB24 PO	NP	
			EPIDIOLEX	NP	SP
			EPRONTIA SOLN	NP	
			FINTEPLA	NP	SP

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>gabapentin CAPS PO</i>	P		MOTPOLY XR CP24	NP	
<i>gabapentin SOLN PO</i>	P		MYSOLINE PO (<i>primidone</i>)	P	
<i>gabapentin TABS PO 600 MG, 800 MG</i>	P		NEURONTIN CAPS PO (<i>gabapentin</i>)	P	
KEPPRA XR TB24 PO (<i>levetiracetam</i>)	NP		NEURONTIN SOLN PO (<i>gabapentin</i>)	P	
KEPPRA SOLN PO 100 MG/ML (<i>levetiracetam</i>)	P		NEURONTIN TABS PO (<i>gabapentin</i>)	P	
KEPPRA TABS PO (<i>levetiracetam</i>)	P		<i>oxcarbazepine SUSP PO</i>	P	
<i>lacosamide SOLN PO 10 MG/ML, 50 MG/5ML, 100 MG/10ML</i>	P		<i>oxcarbazepine TABS PO</i>	P	
<i>lacosamide TABS PO</i>	P		<i>oxcarbazepine TB24</i>	NP	
LAMICTAL ODT KIT PO (<i>lamotrigine</i>)	NP		OXTELLAR XR TB24 (<i>oxcarbazepine</i>)	NP	
LAMICTAL ODT TBDP PO (<i>lamotrigine</i>)	NP		<i>pregabalin CAPS PO</i>	P	
LAMICTAL STARTER KIT PO 25 MG (<i>lamotrigine</i>)	NP		<i>pregabalin SOLN</i>	P	
LAMICTAL XR KIT PO	NP		<i>primidone PO</i>	P	
LAMICTAL XR TB24 PO (<i>lamotrigine</i>)	NP		<i>primidone PO</i>	P	
LAMICTAL CHEW PO (<i>lamotrigine</i>)	P		QUDEXY XR CS24 PO (<i>topiramate</i>)	NP	
LAMICTAL TABS PO (<i>lamotrigine</i>)	P		<i>rufinamide SUSP</i>	NP	SP
<i>lamotrigine CHEW PO</i>	P		<i>rufinamide TABS PO</i>	NP	SP
<i>lamotrigine KIT PO 25 MG</i>	P		SPRITAM TB3D	NP	
<i>lamotrigine KIT PO</i>	NP		TEGRETOL SUSP PO (<i>carbamazepine</i>)	P	
<i>lamotrigine TABS PO</i>	P		TEGRETOL TABS PO (<i>carbamazepine</i>)	P	
<i>lamotrigine TB24 PO</i>	NP		TEGRETOL-XR TB12 PO (<i>carbamazepine</i>)	P	
<i>lamotrigine TBDP PO</i>	NP		TOPAMAX SPRINKLE CPSP PO (<i>topiramate</i>)	P	
<i>levetiracetam SOLN PO 100 MG/ML, 500 MG/5ML</i>	P		TOPAMAX TABS PO (<i>topiramate</i>)	P	
<i>levetiracetam TABS PO</i>	P		<i>topiramate CP24 PO</i>	NP	
<i>levetiracetam TB24 PO</i>	NP		<i>topiramate CPSP PO</i>	P	
LYRICA CAPS PO (<i>pregabalin</i>)	P		<i>topiramate CS24 PO</i>	NP	
LYRICA SOLN (<i>pregabalin</i>)	P		<i>topiramate TABS PO</i>	P	
			TRILEPTAL SUSP PO (<i>oxcarbazepine</i>)	NP	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TRILEPTAL TABS PO (oxcarbazepine)	P		DILANTIN PO	P	
TROKENDI XR CP24 PO (topiramate)	NP		DILANTIN INFATABS CHEW PO (phenytoin)	P	
VIMPAT SOLN PO 10 MG/ML (lacosamide)	P		DILANTIN-125 SUSP PO (phenytoin)	P	
VIMPAT TABS PO (lacosamide)	P		DILANTIN SUSP PO (phenytoin)	P	
ZONEGRAN CAPS PO 25 MG, 100 MG (zonisamide)	P		phenytoin sodium extended PO 100 MG, 200 MG, 300 MG	P	
ZONISADE SUSP	NP		phenytoin CHEW PO	P	
zonisamide CAPS PO	P		phenytoin SUSP PO	P	
zonisamide CAPS PO	P		Succinimides		
ZTALMY	NP		CELONTIN (methsuximide)	NP	
Carbamates			ethosuximide CAPS PO	NP	
felbamate SUSP	NP		ethosuximide SOLN PO	P	
felbamate TABS PO	NP		methsuximide	NP	
FELBATOL SUSP (felbamate)	NP		ZARONTIN CAPS PO (ethosuximide)	NP	
FELBATOL TABS PO (felbamate)	NP		ZARONTIN SOLN PO (ethosuximide)	P	
XCOPRI (250 MG DAILY DOSE) TBPK	NP		Valproic Acid		
XCOPRI (350 MG DAILY DOSE) TBPK	NP		DEPAKOTE ER TB24 PO 250 MG (divalproex sodium)	P	QL(1 EA daily)
XCOPRI TABS	NP		DEPAKOTE ER TB24 PO 500 MG (divalproex sodium)	P	
XCOPRI TBPK	NP		DEPAKOTE SPRINKLES CSDR PO (divalproex sodium)	P	
GABA Modulators			DEPAKOTE TBEC PO (divalproex sodium)	P	
SABRIL PACK (vigabatrin)	NP	SP	divalproex sodium CSDR PO	P	
SABRIL TABS (vigabatrin)	NP	SP	divalproex sodium TB24 PO 500 MG	P	
tiagabine hcl PO	NP		divalproex sodium TB24 PO 250 MG	P	QL(1 EA daily)
vigabatrin PACK	NP	SP			
vigabatrin TABS	NP	SP			
VIGAFYDE SOLN	NP	SP			
Hydantoins					
DILANTIN PO (phenytoin sodium extended)	P				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>divalproex sodium TBEC PO</i>	P		<i>bupropion hcl TB24 PO 450 MG</i>	NP	AL(At least 6 yrs old)
<i>valproate sodium SOLN PO 250 MG/5ML, 500 MG/10ML</i>	P		<i>bupropion hcl TB24 PO 150 MG, 300 MG</i>	P	AL(At least 6 yrs old)
<i>valproic acid CAPS PO</i>	P		FORFIVO XL TB24 PO (<i>bupropion hcl</i>)	NP	AL(At least 6 yrs old)
ANTIDEPRESSANTS - Drugs to Treat Depression			WELLBUTRIN SR TB12 PO (<i>bupropion hcl</i>)	NP	AL(At least 6 yrs old)
Alpha-2 Receptor Antagonists (Tetracyclics)			WELLBUTRIN XL TB24 PO (<i>bupropion hcl</i>)	NP	AL(At least 6 yrs old)
<i>mirtazapine TABS PO 15 MG, 30 MG</i>	P	QL(1 EA daily); AL(At least 6 yrs old)	GABA Receptor Modulator - Neuroactive Steroid		
<i>mirtazapine TABS PO 7.5 MG, 45 MG</i>	P	AL(At least 6 yrs old)	ZURZUVAE	NP	AL(At least 6 yrs old); SP
<i>mirtazapine TBDP PO 30 MG, 45 MG</i>	NP	AL(At least 6 yrs old)	Monoamine Oxidase Inhibitors (MAOIs)		
<i>mirtazapine TBDP PO 15 MG</i>	NP	QL(1 EA daily); AL(At least 6 yrs old)	EMSAM	NP	AL(At least 6 yrs old)
REMERON SOLTAB TBDP PO 30 MG, 45 MG (<i>mirtazapine</i>)	NP	AL(At least 6 yrs old)	MARPLAN PO	P	AL(At least 6 yrs old)
REMERON SOLTAB TBDP PO 15 MG (<i>mirtazapine</i>)	NP	QL(1 EA daily); AL(At least 6 yrs old)	NARDIL PO (<i>phenelzine sulfate</i>)	NP	AL(At least 6 yrs old)
REMERON TABS PO 15 MG, 30 MG (<i>mirtazapine</i>)	NP	QL(1 EA daily); AL(At least 6 yrs old)	<i>phenelzine sulfate PO</i>	P	AL(At least 6 yrs old)
Antidepressant Combinations			<i>tranylcypromine sulfate PO</i>	P	AL(At least 6 yrs old)
AUVELITY	NP	AL(At least 6 yrs old)	N-Methyl-D-aspartic acid (NMDA) Receptor Antagonists		
Antidepressants - Misc.			SPRAVATO (56 MG DOSE)	P	AL(At least 6 yrs old); SP; PA
APLENZIN PO 348 MG	NP	QL(1 EA daily); AL(At least 6 yrs old)	SPRAVATO (84 MG DOSE)	P	AL(At least 6 yrs old); SP; PA
APLENZIN PO 174 MG, 522 MG	NP	AL(At least 6 yrs old)	Selective Serotonin Reuptake Inhibitors (SSRIs)		
<i>bupropion hcl TABS PO</i>	P	AL(At least 6 yrs old)	CELEXA TABS PO 10 MG, 40 MG (<i>citalopram hydrobromide</i>)	NP	AL(At least 6 yrs old)
<i>bupropion hcl TB12 PO</i>	P	AL(At least 6 yrs old)	CELEXA TABS PO 20 MG (<i>citalopram hydrobromide</i>)	NP	QL(1 EA daily); AL(At least 6 yrs old)
<i>bupropion hcl TB12 PO</i>	NP	AL(At least 6 yrs old)	CITALOPRAM HYDROBROMIDE CAPS	NP	AL(At least 6 yrs old)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>citalopram hydrobromide SOLN PO</i>	P	AL(At least 6 yrs old - Up to 10 yrs old)	<i>paroxetine hcl TB24 PO 25 MG, 37.5 MG</i>	NP	AL(At least 6 yrs old)
<i>citalopram hydrobromide TABS PO 20 MG</i>	P	QL(1 EA daily); AL(At least 6 yrs old)	PAXIL CR TB24 PO 12.5 MG (<i>paroxetine hcl</i>)	NP	QL(1 EA daily); AL(At least 6 yrs old)
<i>citalopram hydrobromide TABS PO 10 MG, 40 MG</i>	P	AL(At least 6 yrs old)	PAXIL CR TB24 PO 25 MG, 37.5 MG (<i>paroxetine hcl</i>)	NP	AL(At least 6 yrs old)
<i>escitalopram oxalate SOLN PO</i>	NP	AL(At least 6 yrs old - Up to 10 yrs old)	PAXIL SUSP PO (<i>paroxetine hcl</i>)	NP	AL(At least 6 yrs old - Up to 10 yrs old)
<i>escitalopram oxalate TABS PO 5 MG, 10 MG</i>	P	QL(1 EA daily); AL(At least 6 yrs old)	PAXIL TABS PO 10 MG, 20 MG (<i>paroxetine hcl</i>)	NP	QL(1 EA daily); AL(At least 6 yrs old)
<i>escitalopram oxalate TABS PO 20 MG</i>	P	AL(At least 6 yrs old)	PAXIL TABS PO 30 MG, 40 MG (<i>paroxetine hcl</i>)	NP	AL(At least 6 yrs old)
<i>fluoxetine hcl CAPS PO</i>	P	AL(At least 6 yrs old)	PROZAC CAPS PO (<i>fluoxetine hcl</i>)	NP	AL(At least 6 yrs old)
<i>fluoxetine hcl CPDR PO</i>	NP	AL(At least 6 yrs old)	SERTRALINE HCL CAPS	NP	AL(At least 6 yrs old)
<i>fluoxetine hcl SOLN PO</i>	P	AL(At least 6 yrs old - Up to 10 yrs old)	<i>sertraline hcl CONC PO</i>	P	AL(At least 6 yrs old - Up to 10 yrs old)
<i>fluoxetine hcl TABS PO</i>	NP	AL(At least 6 yrs old)	<i>sertraline hcl TABS PO 25 MG, 50 MG</i>	P	QL(1 EA daily); AL(At least 6 yrs old)
FLUOXETINE HCL TABS PO (<i>fluoxetine hcl</i>)	NP	AL(At least 6 yrs old)	<i>sertraline hcl TABS PO 100 MG</i>	P	AL(At least 6 yrs old)
<i>fluvoxamine maleate CP24 PO</i>	NP	AL(At least 6 yrs old)	ZOLOFT CONC PO (<i>sertraline hcl</i>)	NP	AL(At least 6 yrs old - Up to 10 yrs old)
<i>fluvoxamine maleate TABS PO</i>	P	AL(At least 6 yrs old)	ZOLOFT TABS PO 25 MG, 50 MG (<i>sertraline hcl</i>)	NP	QL(1 EA daily); AL(At least 6 yrs old)
LEXAPRO TABS PO 20 MG (<i>escitalopram oxalate</i>)	NP	AL(At least 6 yrs old)	ZOLOFT TABS PO 100 MG (<i>sertraline hcl</i>)	NP	AL(At least 6 yrs old)
LEXAPRO TABS PO 5 MG, 10 MG (<i>escitalopram oxalate</i>)	NP	QL(1 EA daily); AL(At least 6 yrs old)	Serotonin Modulators		
<i>paroxetine hcl SUSP PO</i>	NP	AL(At least 6 yrs old - Up to 10 yrs old)	<i>nefazodone hcl PO</i>	NP	AL(At least 6 yrs old)
<i>paroxetine hcl TABS PO 30 MG, 40 MG</i>	P	AL(At least 6 yrs old)	<i>trazodone hcl TABS PO 50 MG, 100 MG, 150 MG</i>	P	AL(At least 6 yrs old)
<i>paroxetine hcl TABS PO 10 MG, 20 MG</i>	P	QL(1 EA daily); AL(At least 6 yrs old)	<i>trazodone hcl TABS PO 300 MG</i>	NP	AL(At least 6 yrs old)
<i>paroxetine hcl TB24 PO 12.5 MG</i>	NP	QL(1 EA daily); AL(At least 6 yrs old)	TRINTELLIX PO 5 MG, 10 MG	NP	QL(1 EA daily); AL(At least 6 yrs old)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TRINTELLIX PO 20 MG	NP	AL(At least 6 yrs old)	FETZIMA CP24 20 MG, 40 MG	NP	QL(1 EA daily); AL(At least 6 yrs old)
VIIBRYD TABS 10 MG, 20 MG (<i>vilazodone hcl</i>)	NP	QL(1 EA daily); AL(At least 6 yrs old)	PRISTIQ PO 100 MG (<i>desvenlafaxine succinate</i>)	NP	AL(At least 6 yrs old)
VIIBRYD TABS 40 MG (<i>vilazodone hcl</i>)	NP	AL(At least 6 yrs old)	PRISTIQ PO 25 MG, 50 MG (<i>desvenlafaxine succinate</i>)	NP	QL(1 EA daily); AL(At least 6 yrs old)
<i>vilazodone hcl</i> TABS 10 MG, 20 MG	NP	QL(1 EA daily); AL(At least 6 yrs old)	VENLAFAXINE BESYLATE ER	NP	AL(At least 6 yrs old)
<i>vilazodone hcl</i> TABS 40 MG	NP	AL(At least 6 yrs old)	<i>venlafaxine hcl</i> CP24 PO 37.5 MG, 75 MG	P	QL(1 EA daily); AL(At least 6 yrs old)
Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)			<i>venlafaxine hcl</i> CP24 PO 150 MG	P	AL(At least 6 yrs old)
CYMBALTA CPEP PO (<i>duloxetine hcl</i>)	NP	AL(At least 6 yrs old)	<i>venlafaxine hcl</i> TABS PO	P	AL(At least 6 yrs old)
DESVENLAFAXINE ER PO	NP	AL(At least 6 yrs old)	<i>venlafaxine hcl</i> TB24 PO 150 MG, 225 MG	NP	AL(At least 6 yrs old)
<i>desvenlafaxine succinate</i> PO 100 MG	P	AL(At least 6 yrs old)	<i>venlafaxine hcl</i> TB24 PO 37.5 MG, 75 MG	NP	QL(1 EA daily); AL(At least 6 yrs old)
<i>desvenlafaxine succinate</i> PO 25 MG, 50 MG	P	QL(1 EA daily); AL(At least 6 yrs old)	Tricyclic Agents		
DRIZALMA SPRINKLE CSDR 20 MG, 40 MG, 60 MG	NP	AL(At least 6 yrs old)	<i>amitriptyline hcl</i> TABS PO	P	AL(At least 6 yrs old)
DRIZALMA SPRINKLE CSDR 30 MG	NP	QL(1 EA daily); AL(At least 6 yrs old)	<i>amoxapine</i> PO	NP	AL(At least 6 yrs old)
<i>duloxetine hcl</i> CPEP PO 40 MG	NP	AL(At least 6 yrs old)	ANAFRANIL PO (<i>clomipramine hcl</i>)	NP	AL(At least 6 yrs old)
<i>duloxetine hcl</i> CPEP PO 20 MG, 30 MG, 60 MG	P	AL(At least 6 yrs old)	<i>clomipramine hcl</i> PO	P	AL(At least 6 yrs old)
EFFEXOR XR CP24 PO 37.5 MG, 75 MG (<i>venlafaxine hcl</i>)	NP	QL(1 EA daily); AL(At least 6 yrs old)	<i>desipramine hcl</i> TABS PO	NP	AL(At least 6 yrs old)
EFFEXOR XR CP24 PO 150 MG (<i>venlafaxine hcl</i>)	NP	AL(At least 6 yrs old)	<i>doxepin hcl</i> CAPS PO	P	AL(At least 6 yrs old)
FETZIMA TITRATION C4PK	NP	AL(At least 6 yrs old)	<i>doxepin hcl</i> CONC PO	P	AL(At least 6 yrs old)
FETZIMA CP24 80 MG, 120 MG	NP	AL(At least 6 yrs old)	<i>imipramine hcl</i> TABS PO	P	AL(At least 6 yrs old)
			<i>imipramine pamoate</i> PO	NP	AL(At least 6 yrs old)
			<i>nortriptyline hcl</i> CAPS PO	P	AL(At least 6 yrs old)
			<i>nortriptyline hcl</i> SOLN PO	P	AL(At least 6 yrs old)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PAMELOR CAPS PO (nortriptyline hcl)	NP	AL(At least 6 yrs old)	KOMBIGLYZE XR PO (saxagliptin-metformin hcl)	NP	PA
protriptyline hcl PO	NP	AL(At least 6 yrs old)	OSENI 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG (alogliptin-pioglitazone)	NP	PA
trimipramine maleate CAPS PO	NP	AL(At least 6 yrs old)	pioglitazone hcl-glimepiride	NP	
ANTIDIABETICS - Drugs to Regulate Blood Sugar			pioglitazone hcl-metformin hcl TABS PO	NP	
Alpha-Glucosidase Inhibitors			QTERN	NP	
acarbose PO	P		saxagliptin-metformin hcl PO	NP	PA
miglitol PO	NP		SEGLUROMET	NP	
Antidiabetic - Amylin Analogs			SITAGLIPTIN BASE-METFORMIN HCL TABS	NP	
SYMLINPEN 120 SOPN	NP	PA	SOLIQUA	NP	PA
SYMLINPEN 60 SOPN	NP	PA	STEGLUJAN	NP	
Antidiabetic Combinations			SYNJARDY XR TB24	NP	
ACTOPLUS MET TABS PO 850 MG-15 MG (pioglitazone hcl-metformin hcl)	NP		SYNJARDY TABS	P	
alogliptin-metformin hcl	NP	PA	TRIJARDY XR	NP	
alogliptin-pioglitazone 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG	NP	PA	XIGDUO XR PO 1000 MG-10 MG, 1000 MG-2.5 MG, 1000 MG-5 MG, 500 MG-10 MG	P	
dapagliflozin propanediol-metformin hcl PO	NP		XIGDUO XR PO 500 MG-5 MG	P	QL(1 EA daily)
DUETACT (pioglitazone hcl-glimepiride)	NP		XIGDUO XR PO (dapagliflozin propanediol-metformin hcl)	P	
glipizide-metformin hcl PO	P		XULTOPHY	NP	PA
glyburide-metformin PO	P		ZITUVIMET XR TB24	NP	
GLYXAMBI PO	NP		ZITUVIMET TABS	NP	
INVOKAMET XR TB24	P		Biguanides		
INVOKAMET TABS	P		GLUMETZA TB24 PO (metformin hcl)	NP	
JANUMET XR TB24 PO	P	PA	metformin hcl SOLN PO	NP	
JANUMET TABS PO	P	PA	metformin hcl TABS PO 500 MG, 850 MG, 1000 MG	P	
JENTADUETO XR TB24	NP	PA			
JENTADUETO TABS	P	PA			
KAZANO (alogliptin-metformin hcl)	NP	PA			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>metformin hcl TABS PO 625 MG</i>	NP		GOODSENSE GLUCOSE PO	P	
<i>metformin hcl TB24 PO 500 MG, 750 MG</i>	P		GVOKE HYOPEN 1-PACK SOAJ	NP	
<i>metformin hcl TB24 PO</i>	NP		GVOKE HYOPEN 2-PACK SOAJ	NP	
RIOMET SOLN PO (<i>metformin hcl</i>)	NP		GVOKE KIT SOLN	NP	
Diabetic Other			GVOKE PFS SOSY 1 MG/0.2ML	NP	
BAQSIMI ONE PACK POWD	P		HY-VEE GLUCOSE PO	P	
BAQSIMI ONE PACK POWD	NP		KROGER GLUCOSE PO	P	
BAQSIMI TWO PACK POWD	NP		LEADER GLUCOSE PO 6 MG-4 GM	P	
BAQSIMI TWO PACK POWD	P		LEADER QUICK DISSOLVE GLUCOSE CHEW PO	P	
CVS GLUCOSE CHEW PO	P		LONGS GLUCOSE PO	P	
CVS SOFT GLUCOSE CHEW PO	P		MEIJER GLUCOSE PO	P	
DEX4 PO	P		PREFERRED PLUS GLUCOSE PO	P	
DEX4 GLUCOSE PO	P		PX GLUCOSE PO	P	
DEX4 NATURALS PO	P		RA GLUCOSE PO	P	
DEX4 POUCH PACK PO	P		RELION GLUCOSE PO	P	
DEX4 QUICK DISSOLVE GLUCOSE CHEW PO	P		SM GLUCOSE PO	P	
<i>dextrose (diabetic use) GEL PO</i>	P		SMART SENSE GLUCOSE PO	P	
GLUCAGEN HYPOKIT	P		TGT GLUCOSE PO	P	
<i>glucagon (rdna)</i>	P		TRUEPLUS GLUCOSE ON THE GO CHEW PO	P	
GLUCAGON EMERGENCY	P		TRUEPLUS GLUCOSE CHEW PO	P	
GLUCO TO GO CHEW PO	P		UP & UP GLUCOSE PO	P	
GLUCOSE INSTANT ENERGY PO	P		VALUE PLUS GLUCOSE PO	P	
GLUCOSE CHEW PO	P		WALGREENS GLUCOSE PO	P	
GNP GLUCOSE CHEW PO	P		ZEGALOGUE SOAJ	P	
GNP QUICK DISSOLVE GLUCOSE CHEW PO	P		ZEGALOGUE SOSY	P	
			Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
			<i>alogliptin benzoate</i>	NP	PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
JANUVIA PO 25 MG, 50 MG	P	QL(1 EA daily); PA	Insulin		
JANUVIA PO 100 MG	P	PA	ADMELOG SOLOSTAR SOPN	NP	
NESINA (<i>alogliptin benzoate</i>)	NP	PA	ADMELOG SOLN IJ	NP	
ONGLYZA PO 2.5 MG (<i>saxagliptin hcl</i>)	NP	QL(1 EA daily); PA	AFREZZA POWD 4 UNIT, 8 UNIT, 12 UNIT	NP	
ONGLYZA PO 5 MG (<i>saxagliptin hcl</i>)	NP	PA	APIDRA SOLOSTAR SOPN	NP	
<i>saxagliptin hcl PO 2.5 MG</i>	NP	QL(1 EA daily); PA	APIDRA SOLN	NP	
<i>saxagliptin hcl PO 5 MG</i>	NP	PA	BASAGLAR KWIKPEN SOPN	NP	
SITAGLIPTIN 100 MG	NP		FIASP FLEXTOUCH SOPN	NP	
SITAGLIPTIN 25 MG, 50 MG	NP	QL(1 EA daily)	FIASP PENFILL SOCT	NP	
TRADJENTA	P	PA	FIASP PUMPCART SOCT	NP	
ZITUVIO 100 MG	NP		FIASP SOLN	NP	
ZITUVIO 25 MG, 50 MG	NP	QL(1 EA daily)	HUMALOG JUNIOR KWIKPEN SOPN	NP	
Incretin Mimetic Agents			HUMALOG KWIKPEN SOPN	NP	
BYDUREON BCISE AUIJ	NP	PA	HUMALOG MIX 50/50 KWIKPEN SUPN	P	
BYETTA 10 MCG PEN SOPN	NP	PA	HUMALOG MIX 75/25 KWIKPEN SUPN	NP	
BYETTA 5 MCG PEN SOPN	NP	PA	HUMALOG MIX 75/25 SUSP	P	
<i>liraglutide</i>	NP	PA	HUMALOG TEMPO PEN SOPN	NP	
MOUNJARO	NP	PA	HUMALOG SOCT	NP	
OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN	P	PA	HUMALOG SOLN IJ	NP	
OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN	NP	PA	HUMULIN 70/30 KWIKPEN SUPN	NP	
OZEMPIC (1 MG/DOSE) SOPN 4 MG/3ML	P	PA	HUMULIN 70/30 SUSP	P	
OZEMPIC (2 MG/DOSE) SOPN	P	PA	HUMULIN N KWIKPEN SUPN	NP	
RYBELSUS TABS PO 7 MG	NP	QL(1 EA daily); PA	HUMULIN N SUSP	NP	
RYBELSUS TABS PO 3 MG, 14 MG	NP	PA	HUMULIN R U-500 (CONCENTRATED) SOLN SC	P	
TRULICITY	P	PA	HUMULIN R U-500 KWIKPEN SOPN SC	P	
VICTOZA (<i>liraglutide</i>)	P	PA			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
HUMULIN R SOLN IJ	NP		LYUMJEV TEMPO PEN SOPN	NP	
HUMULIN R SOLN IJ	P		LYUMJEV SOLN	NP	
INSULIN ASP PROT & ASP FLEXPEN SUPN	P		NOVOLIN 70/30 FLEXPEN RELION SUPN	NP	
INSULIN ASPART FLEXPEN SOPN	P		NOVOLIN 70/30 FLEXPEN SUPN	NP	
INSULIN ASPART PENFILL SOCT	P		NOVOLIN 70/30 RELION SUSP	NP	
INSULIN ASPART PROT & ASPART SUSP	P		NOVOLIN 70/30 SUSP	NP	
INSULIN ASPART SOLN IJ	P		NOVOLIN N FLEXPEN RELION SUPN	NP	
INSULIN DEGLUDEC FLEXTOUCH SOPN	NP		NOVOLIN N FLEXPEN SUPN	P	
INSULIN DEGLUDEC SOLN	NP		NOVOLIN N RELION SUSP	NP	
INSULIN GLARGINE MAX SOLOSTAR SOPN	NP		NOVOLIN N SUSP	NP	
INSULIN GLARGINE SOLOSTAR SOPN 300 UNIT/ML	NP		NOVOLIN R FLEXPEN RELION SOPN IJ	NP	
INSULIN GLARGINE SOLOSTAR SOPN 100 UNIT/ML	P		NOVOLIN R FLEXPEN SOPN IJ	P	
INSULIN GLARGINE SOLN	P		NOVOLIN R RELION SOLN IJ	NP	
INSULIN GLARGINE-YFGN SOLN	NP		NOVOLIN R SOLN IJ	NP	
INSULIN GLARGINE-YFGN SOPN	NP		NOVOLOG 70/30 FLEXPEN RELION SUPN	NP	
INSULIN LISPRO (1 UNIT DIAL) SOPN	P		NOVOLOG FLEXPEN RELION SOPN	NP	
INSULIN LISPRO JUNIOR KWIKPEN SOPN	P		NOVOLOG FLEXPEN SOPN	NP	
INSULIN LISPRO PROT & LISPRO SUPN	P		NOVOLOG MIX 70/30 FLEXPEN SUPN	NP	
INSULIN LISPRO SOLN IJ	P		NOVOLOG MIX 70/30 RELION SUSP	NP	
LANTUS SOLOSTAR SOPN	P		NOVOLOG MIX 70/30 SUSP	NP	
LANTUS SOLN	P		NOVOLOG PENFILL SOCT	NP	
LYUMJEV KWIKPEN SOPN	NP		NOVOLOG RELION SOLN IJ	NP	
			NOVOLOG SOLN IJ	NP	

Drug Name	Drug Tier	Requirements/Limits
REZVOGLAR KWIKPEN	NP	
SEMGLEE (YFGN) SOLN	NP	
SEMGLEE (YFGN) SOPN	NP	
TOUJEO MAX SOLOSTAR SOPN	P	
TOUJEO SOLOSTAR SOPN	P	
TRESIBA FLEXTOUCH SOPN	NP	
TRESIBA SOLN	NP	
Insulin Sensitizing Agents		
ACTOS PO (<i>pioglitazone hcl</i>)	NP	QL(1 EA daily)
<i>pioglitazone hcl PO</i>	P	QL(1 EA daily)
Meglitinide Analogues		
<i>nateglinide PO</i>	P	
<i>repaglinide PO</i>	P	
Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors		
<i>dapagliflozin propanediol PO 10 MG</i>	NP	
<i>dapagliflozin propanediol PO 5 MG</i>	NP	QL(1 EA daily)
FARXIGA PO 10 MG (<i>dapagliflozin propanediol</i>)	P	
FARXIGA PO 5 MG (<i>dapagliflozin propanediol</i>)	P	QL(1 EA daily)
INVOKANA	P	
JARDIANCE PO	P	
STEGLATRO	NP	
Sulfonylureas		
<i>glimepiride PO 2 MG, 4 MG</i>	P	QL(1 EA daily)
<i>glimepiride PO 1 MG</i>	P	
<i>glipizide TABS PO 5 MG, 10 MG</i>	P	
<i>glipizide TB24 PO</i>	P	

Drug Name	Drug Tier	Requirements/Limits
<i>glyburide micronized PO 1.5 MG, 3 MG</i>	P	QL(1 EA daily)
<i>glyburide micronized PO 6 MG</i>	P	
<i>glyburide TABS PO</i>	P	
ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea		
Antidiarrheal - Chloride Channel Antagonists		
MYTESI PO	NP	
Antidiarrheal/Probiotic Agents - Misc.		
<i>bismuth subsalicylate CHEW PO 262 MG</i>	P	
<i>bismuth subsalicylate SUSP PO 525 MG/30ML</i>	P	
<i>bismuth subsalicylate TABS PO</i>	P	
Antidiarrheal/Probiotic Combinations		
<i>loperamide-simethicone TABS PO</i>	P	
Antiperistaltic Agents		
ANTI-DIARRHEAL LIQD PO	P	
<i>diphenoxylate w/ atropine LIQD PO</i>	P	
<i>diphenoxylate w/ atropine TABS PO</i>	P	
<i>loperamide hcl CAPS PO</i>	P	RX/OTC
<i>loperamide hcl TABS PO</i>	P	
ANTIDOTES AND SPECIFIC ANTAGONISTS		
Antidotes - Chelating Agents		
CHEMET PO	P	
<i>deferasirox PACK</i>	NP	SP
<i>deferasirox TABS PO</i>	P	SP
<i>deferasirox TBSO</i>	NP	SP
<i>deferiprone TABS</i>	NP	SP
EXJADE TBSO (<i>deferasirox</i>)	NP	SP

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FERRIPROX TWICE-A-DAY TABS	NP	SP	<i>ondansetron hcl TABS PO 4 MG, 8 MG</i>	P	
FERRIPROX SOLN	NP	SP	<i>ondansetron TBDP PO 16 MG</i>	NP	
FERRIPROX TABS (<i>deferiprone</i>)	NP	SP	<i>ondansetron TBDP PO 4 MG, 8 MG</i>	P	
JADENU SPRINKLE PACK (<i>deferasirox</i>)	NP	SP	SANCUSO PTCH	NP	
JADENU TABS PO (<i>deferasirox</i>)	NP	SP	Antiemetics - Anticholinergic		
Antidotes and Specific Antagonists			ANTIVERT CHEW PO (<i>meclizine hcl</i>)	NP	RX/OTC
VISTOGARD	NP		<i>dimenhydrinate TABS PO</i>	P	
Opioid Antagonists			DRAMAMINE CHEW PO	P	
KLOXXADO LIQD	P		<i>meclizine hcl CHEW PO</i>	P	RX/OTC
NALMEFENE HCL IJ	NP		<i>meclizine hcl TABS PO 12.5 MG, 25 MG</i>	P	RX/OTC
<i>naloxone hcl LIQD</i>	P	RX/OTC	<i>meclizine hcl TABS PO 12.5 MG, 25 MG</i>	P	RX/OTC
<i>naloxone hcl SOCT</i>	P		<i>meclizine hcl TABS PO 12.5 MG, 25 MG</i>	NP	RX/OTC
<i>naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML</i>	P		<i>scopolamine</i>	NP	
<i>naloxone hcl SOSY</i>	P		TRANSDERM-SCOP (<i>scopolamine</i>)	P	
<i>naltrexone hcl PO</i>	P		<i>trimethobenzamide hcl CAPS PO</i>	NP	
NARCAN LIQD (<i>naloxone hcl</i>)	P	RX/OTC	Antiemetics - Miscellaneous		
OPVEE NA	NP		AKYNZEO PO	NP	
REXTOVY LIQD	NP		AKYNZEO (READY-TO-USE) SOLN	NP	
VIVITROL	P	SP	AKYNZEO (TO-BE-DILUTED) SOLN	NP	
ZIMHI SOSY	NP		BONJESTA TBCR	NP	PA
ANTIEMETICS - Drugs to Treat Nausea and Vomiting			DICLEGIS TBEC PO (<i>doxylamine-pyridoxine</i>)	P	
5-HT3 Receptor Antagonists			<i>doxylamine-pyridoxine TBEC PO</i>	NP	
ANZEMET TABS PO 50 MG	NP		<i>dronabinol CAPS PO</i>	NP	PA
<i>granisetron hcl SOLN IV 1 MG/ML, 4 MG/4ML</i>	P		<i>fructose-dextrose-phosphoric acid SOLN PO</i>	P	
<i>granisetron hcl TABS PO</i>	NP		MARINOL CAPS PO 2.5 MG (<i>dronabinol</i>)	NP	PA
<i>ondansetron hcl SOLN IJ</i>	P				
<i>ondansetron hcl SOLN PO 4 MG/5ML</i>	P				
<i>ondansetron hcl SOSY</i>	P				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Substance P/Neurokinin 1 (NK1) Receptor Antagonists			<i>fluconazole TABS PO 150 MG, 200 MG</i>	P	
<i>aprepitant CAPS PO</i>	NP		<i>fluconazole TABS PO 50 MG, 100 MG</i>	P	QL(1 EA daily)
<i>aprepitant MISC PO</i>	NP		<i>itraconazole CAPS PO</i>	NP	
CINVANTI EMUL	P		<i>itraconazole SOLN</i>	NP	
EMEND TRI-PACK CAPS PO (<i>aprepitant</i>)	NP		<i>ketoconazole PO</i>	NP	
EMEND CAPS PO 80 MG (<i>aprepitant</i>)	NP		NOXAFIL PACK	NP	
EMEND SUSR	NP		NOXAFIL SUSP (<i>posaconazole</i>)	NP	
ANTIFUNGALS - Drugs to Treat Fungal Infections			NOXAFIL TBEC (<i>posaconazole</i>)	NP	
Antifungal - Glucan Synthesis Inhibitors			<i>posaconazole SUSP</i>	NP	
BREXAFEMME	NP		<i>posaconazole TBEC</i>	NP	
Antifungals			SPORANOX CAPS PO (<i>itraconazole</i>)	NP	
ANCOBON PO (<i>flucytosine</i>)	NP		SPORANOX SOLN (<i>itraconazole</i>)	NP	
<i>flucytosine PO</i>	NP		TOLSURA CAPS PO	NP	
<i>griseofulvin microsize SUSP PO</i>	P		VFEND SUSR PO (<i>voriconazole</i>)	NP	
<i>griseofulvin microsize TABS PO</i>	NP		VFEND TABS PO (<i>voriconazole</i>)	NP	
<i>griseofulvin ultramicrosize PO</i>	NP		VIVJOA	NP	
<i>nystatin TABS PO</i>	P		<i>voriconazole SUSR PO</i>	NP	
<i>terbinafine hcl TABS PO</i>	P		<i>voriconazole TABS PO</i>	NP	
Imidazole-Related Antifungals			ANTIHIISTAMINES - Drugs to Treat Allergies		
CRESEMBA CAPS	NP		Antihistamines - Alkylamines		
DIFLUCAN SUSR PO 40 MG/ML (<i>fluconazole</i>)	NP		<i>chlorpheniramine maleate SYRP PO</i>	P	
DIFLUCAN TABS PO 100 MG (<i>fluconazole</i>)	NP	QL(1 EA daily)	<i>chlorpheniramine maleate TABS PO</i>	P	
DIFLUCAN TABS PO 200 MG (<i>fluconazole</i>)	NP		Antihistamines - Ethanolamines		
<i>fluconazole in nacl 0.9 %-200 MG/100ML, 0.9 %-400 MG/200ML</i>	P		<i>diphenhydramine hcl CAPS PO</i>	P	
<i>fluconazole SUSR PO</i>	P		<i>diphenhydramine hcl CAPS PO</i>	P	
			<i>diphenhydramine hcl CHEW PO 12.5 MG</i>	P	

Drug Name	Drug Tier	Requirements/ Limits
<i>diphenhydramine hcl ELIX PO 12.5 MG/5ML</i>	P	
<i>diphenhydramine hcl LIQD PO 12.5 MG/5ML</i>	P	
<i>diphenhydramine hcl LIQD PO 12.5 MG/5ML, 25 MG/10ML</i>	NP	
<i>diphenhydramine hcl LIQD PO 12.5 MG/5ML</i>	P	
<i>diphenhydramine hcl SOLN 50 MG/ML</i>	P	
<i>diphenhydramine hcl TABS PO 25 MG</i>	P	
<i>diphenhydramine hcl TABS PO 25 MG</i>	NP	
<i>diphenhydramine hcl TABS PO 25 MG</i>	P	
Antihistamines - Non-Sedating		
<i>cetirizine hcl CAPS PO</i>	NP	
<i>cetirizine hcl CHEW PO</i>	NP	
<i>cetirizine hcl SOLN PO</i>	P	RX/OTC
<i>cetirizine hcl TABS PO</i>	P	
<i>CLARINEX TABS PO (desloratadine)</i>	NP	
<i>desloratadine TABS PO</i>	NP	
<i>desloratadine TBDP PO</i>	NP	
<i>fexofenadine hcl SUSP PO</i>	NP	
<i>fexofenadine hcl TABS PO 60 MG, 180 MG</i>	NP	
<i>fexofenadine hcl TABS PO 60 MG, 180 MG</i>	P	
<i>levocetirizine dihydrochloride SOLN PO</i>	NP	RX/OTC
<i>levocetirizine dihydrochloride TABS PO</i>	NP	RX/OTC
<i>loratadine CHEW PO</i>	NP	
<i>loratadine CHEW PO</i>	P	
<i>loratadine SOLN PO</i>	P	
<i>loratadine TABS PO</i>	P	

Drug Name	Drug Tier	Requirements/ Limits
<i>loratadine TBDP PO 10 MG</i>	NP	
<i>loratadine TBDP PO 10 MG</i>	P	
Antihistamines - Phenothiazines		
<i>promethazine hcl SOLN PO 6.25 MG/5ML</i>	P	
<i>promethazine hcl SUPP PR</i>	P	
<i>promethazine hcl TABS PO</i>	P	
Antihistamines - Piperidines		
<i>cycloheptadine hcl SYRP PO</i>	P	
<i>cycloheptadine hcl TABS PO</i>	P	
ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol		
Adenosine Triphosphate-Citrate Lyase (ACL) Inhibitors		
NEXLETOL	NP	
Angiopoietin-like Protein Inhibitors		
EVKEEZA	NP	SP
Antihyperlipidemics - Combinations		
<i>ezetimibe-simvastatin PO</i>	NP	
NEXLIZET	NP	
<i>VYTORIN PO (ezetimibe-simvastatin)</i>	NP	
Antihyperlipidemics - Misc.		
<i>icosapent ethyl</i>	NP	
<i>LOVAZA PO (omega-3-acid ethyl esters)</i>	NP	
<i>omega-3-acid ethyl esters PO</i>	P	
Bile Acid Sequestrants		
<i>cholestyramine light PACK PO</i>	P	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>cholestyramine light POWD PO</i>	P		FENOGLIDE TABS PO (<i>fenofibrate</i>)	NP	
<i>cholestyramine PACK PO</i>	P		FIBRICOR PO 105 MG (<i>fenofibric acid</i>)	NP	
<i>cholestyramine POWD PO</i>	P		<i>gemfibrozil TABS PO</i>	P	
<i>colesevelam hcl PACK</i>	NP		LIPOFEN CAPS PO (<i>fenofibrate</i>)	NP	
<i>colesevelam hcl TABS PO</i>	P		LOPID TABS PO (<i>gemfibrozil</i>)	NP	
COLESTID GRAN PO (<i>colestipol hcl</i>)	NP		TRICOR TABS PO (<i>fenofibrate</i>)	NP	
COLESTID PACK PO (<i>colestipol hcl</i>)	NP		TRILIPIX PO (<i>choline fenofibrate</i>)	NP	
COLESTID TABS PO (<i>colestipol hcl</i>)	NP		HMG CoA Reductase Inhibitors		
<i>colestipol hcl GRAN PO</i>	P		ALTOPREV TB24 PO 20 MG, 40 MG, 60 MG	NP	QL(1 EA daily)
<i>colestipol hcl PACK PO</i>	P		ATORVALIQ SUSP	NP	
<i>colestipol hcl TABS PO</i>	P		<i>atorvastatin calcium TABS PO</i>	P	QL(1 EA daily)
QUESTRAN LIGHT POWD PO (<i>cholestyramine light</i>)	NP		<i>atorvastatin calcium TABS PO 10 MG, 80 MG</i>	NP	QL(1 EA daily)
QUESTRAN PACK PO (<i>cholestyramine</i>)	NP		CRESTOR TABS PO (<i>rosuvastatin calcium</i>)	NP	QL(1 EA daily)
QUESTRAN POWD PO (<i>cholestyramine</i>)	NP		EZALLOR SPRINKLE CPSP	NP	QL(1 EA daily)
WELCHOL PACK (<i>colesevelam hcl</i>)	NP		FLOLIPID SUSP PO	NP	
WELCHOL TABS PO (<i>colesevelam hcl</i>)	NP		<i>fluvastatin sodium CAPS PO</i>	NP	QL(1 EA daily)
Fibric Acid Derivatives			<i>fluvastatin sodium TB24 PO</i>	NP	QL(1 EA daily)
<i>choline fenofibrate PO</i>	NP		LESCOL XL TB24 PO (<i>fluvastatin sodium</i>)	NP	QL(1 EA daily)
<i>fenofibrate micronized PO 43 MG, 90 MG, 130 MG</i>	NP		LIPITOR TABS PO (<i>atorvastatin calcium</i>)	NP	QL(1 EA daily)
<i>fenofibrate micronized PO 67 MG, 134 MG, 200 MG</i>	P		LIVALO PO (<i>pitavastatin calcium</i>)	NP	QL(1 EA daily)
<i>fenofibrate CAPS PO</i>	NP		<i>lovastatin TABS PO</i>	P	QL(1 EA daily)
<i>fenofibrate TABS PO 40 MG, 120 MG</i>	NP		<i>pitavastatin calcium PO</i>	NP	QL(1 EA daily)
<i>fenofibrate TABS PO 48 MG, 54 MG, 145 MG, 160 MG</i>	P		<i>pravastatin sodium PO</i>	P	QL(1 EA daily)
<i>fenofibric acid PO</i>	NP		<i>pravastatin sodium PO 20 MG, 40 MG</i>	NP	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>rosuvastatin calcium TABS PO</i>	P	QL(1 EA daily)	ACCUPRIL PO (<i>quinapril hcl</i>)	NP	QL(1 EA daily)
<i>simvastatin TABS PO 80 MG</i>	NP	QL(1 EA daily)	ALTACE CAPS PO 1.25 MG, 2.5 MG, 5 MG, 10 MG (<i>ramipril</i>)	NP	QL(1 EA daily)
<i>simvastatin TABS PO</i>	P	QL(1 EA daily)	<i>benazepril hcl PO</i>	P	QL(1 EA daily)
ZOCOR TABS PO 10 MG, 20 MG, 40 MG (<i>simvastatin</i>)	NP	QL(1 EA daily)	<i>captopril PO</i>	NP	QL(1 EA daily)
ZYPITAMAG PO 2 MG, 4 MG	NP	QL(1 EA daily)	<i>enalapril maleate SOLN</i>	P	
Intestinal Cholesterol Absorption Inhibitors			<i>enalapril maleate TABS PO</i>	P	QL(1 EA daily)
<i>ezetimibe PO</i>	P		EPANED SOLN (<i>enalapril maleate</i>)	NP	
ZETIA PO (<i>ezetimibe</i>)	NP		<i>fosinopril sodium PO</i>	NP	
Microsomal Triglyceride Transfer Protein (MTP) Inhibitors			<i>fosinopril sodium PO</i>	P	QL(1 EA daily)
JUXTAPID PO 5 MG, 10 MG, 20 MG, 30 MG	NP	SP	<i>lisinopril TABS PO 2.5 MG, 5 MG, 10 MG</i>	P	
Nicotinic Acid Derivatives			<i>lisinopril TABS PO 20 MG</i>	NP	QL(1 EA daily)
<i>niacin (antihyperlipidemic) TABS PO</i>	NP		<i>lisinopril TABS PO 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG</i>	P	QL(1 EA daily)
<i>niacin (antihyperlipidemic) TBCR PO 500 MG</i>	P	QL(1 EA daily)	LOTENSIN PO 10 MG, 20 MG, 40 MG (<i>benazepril hcl</i>)	NP	QL(1 EA daily)
<i>niacin (antihyperlipidemic) TBCR PO 750 MG, 1000 MG</i>	P		<i>moexipril hcl PO</i>	NP	QL(1 EA daily)
Proprotein Convertase Subtilisin/Kexin Type 9 Inhibitors			<i>perindopril erbumine PO</i>	NP	QL(1 EA daily)
LEQVIO	NP	SP	QBRELIS SOLN	NP	QL(40 ML daily)
PRALUENT SOAJ	P	SP; PA	<i>quinapril hcl PO</i>	P	QL(1 EA daily)
REPATHA PUSHTRONEX SYSTEM SOCT	P	SP; PA	<i>ramipril CAPS PO</i>	P	QL(1 EA daily)
REPATHA SURECLICK SOAJ	P	SP; PA	<i>trandolapril PO</i>	P	QL(1 EA daily)
REPATHA SOSY	NP	SP; PA	VASOTEC TABS PO (<i>enalapril maleate</i>)	NP	QL(1 EA daily)
REPATHA SOSY	P	SP; PA	ZESTRIL TABS PO (<i>lisinopril</i>)	NP	QL(1 EA daily)
ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure			Agents for Pheochromocytoma		
ACE Inhibitors			<i>metirosine PO</i>	P	SP
			Angiotensin II Receptor Antagonists		
			ATACAND PO (<i>candesartan cilexetil</i>)	NP	QL(1 EA daily)
			AVAPRO PO (<i>irbesartan</i>)	NP	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
BENICAR PO (<i>olmesartan medoxomil</i>)	NP	QL(1 EA daily)	<i>prazosin hcl CAPS PO</i>	P	
<i>candesartan cilexetil PO</i>	NP	QL(1 EA daily)	<i>terazosin hcl PO</i>	P	
COZAAR PO (<i>losartan potassium</i>)	NP	QL(1 EA daily)	Antihypertensive Combinations		
DIOVAN TABS PO (<i>valsartan</i>)	NP	QL(1 EA daily)	ACCURETIC PO (<i>quinapril-hydrochlorothiazide</i>)	NP	QL(1 EA daily)
EDARBI PO	NP	QL(1 EA daily)	<i>amlodipine besylate-benazepril hcl PO</i>	P	QL(1 EA daily)
<i>irbesartan PO</i>	P	QL(1 EA daily)	<i>amlodipine besylate-olmesartan medoxomil PO</i>	P	QL(1 EA daily)
<i>irbesartan PO</i>	NP	QL(1 EA daily)	<i>amlodipine besylate-valsartan PO</i>	P	QL(1 EA daily)
<i>losartan potassium PO</i>	NP	QL(1 EA daily)	<i>amlodipine-valsartan-hydrochlorothiazide PO</i>	P	QL(1 EA daily)
<i>losartan potassium PO</i>	P	QL(1 EA daily)	ATACAND HCT PO (<i>candesartan cilexetil-hydrochlorothiazide</i>)	NP	QL(1 EA daily)
MICARDIS PO (<i>telmisartan</i>)	NP	QL(1 EA daily)	<i>atenolol & chlorthalidone PO</i>	P	
<i>olmesartan medoxomil PO</i>	P	QL(1 EA daily)	AVALIDE PO (<i>irbesartan-hydrochlorothiazide</i>)	NP	QL(1 EA daily)
<i>telmisartan PO</i>	NP	QL(1 EA daily)	AZOR PO (<i>amlodipine besylate-olmesartan medoxomil</i>)	NP	QL(1 EA daily)
<i>valsartan SOLN</i>	NP		<i>benazepril & hydrochlorothiazide PO</i>	P	QL(1 EA daily)
<i>valsartan TABS PO</i>	P	QL(1 EA daily)	BENICAR HCT PO (<i>olmesartan medoxomil-hydrochlorothiazide</i>)	NP	QL(1 EA daily)
<i>valsartan TABS PO</i>	NP	QL(1 EA daily)	<i>bisoprolol & hydrochlorothiazide PO</i>	P	
Antiadrenergic Antihypertensives			<i>candesartan cilexetil-hydrochlorothiazide PO</i>	NP	QL(1 EA daily)
CARDURA PO 8 MG (<i>doxazosin mesylate</i>)	NP		<i>captopril & hydrochlorothiazide PO</i>	NP	QL(1 EA daily)
CARDURA PO 1 MG, 2 MG, 4 MG (<i>doxazosin mesylate</i>)	NP	QL(1 EA daily)	DIOVAN HCT PO (<i>valsartan-hydrochlorothiazide</i>)	NP	QL(1 EA daily)
<i>clonidine hcl TABS PO</i>	P		EDARBYCLOR PO 25 MG-40 MG	NP	QL(1 EA daily)
<i>clonidine PTWK</i>	P				
<i>clonidine TB24</i>	NP				
<i>doxazosin mesylate PO 1 MG, 2 MG, 4 MG</i>	P	QL(1 EA daily)			
<i>doxazosin mesylate PO 8 MG</i>	P				
<i>guanfacine hcl PO</i>	P				
<i>methyldopa TABS PO</i>	P				
MINIPRESS CAPS PO 2 MG, 5 MG (<i>prazosin hcl</i>)	NP				
NEXICLON XR TB24 (<i>clonidine</i>)	NP				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
EDARBYCLOR PO 12.5 MG-40 MG	NP		<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide PO</i>	P	QL(1 EA daily)
<i>enalapril maleate & hydrochlorothiazide PO</i>	P	QL(1 EA daily)	<i>olmesartan medoxomil-hydrochlorothiazide PO</i>	P	QL(1 EA daily)
EXFORGE PO (<i>amlodipine besylate-valsartan</i>)	NP	QL(1 EA daily)	<i>quinapril-hydrochlorothiazide PO</i>	P	QL(1 EA daily)
EXFORGE HCT PO (<i>amlodipine-valsartan-hydrochlorothiazide</i>)	NP	QL(1 EA daily)	TEKTURNA HCT PO 12.5 MG-300 MG, 25 MG-300 MG	NP	QL(1 EA daily)
<i>fosinopril sodium & hydrochlorothiazide PO</i>	NP	QL(1 EA daily)	<i>telmisartan-amlodipine PO 5 MG-40 MG</i>	NP	QL(1 EA daily)
<i>HYZAAR PO (losartan potassium & hydrochlorothiazide)</i>	NP	QL(1 EA daily)	<i>telmisartan-amlodipine PO 10 MG-40 MG, 10 MG-80 MG, 5 MG-80 MG</i>	NP	
<i>irbesartan-hydrochlorothiazide PO 12.5 MG-300 MG</i>	NP	QL(1 EA daily)	<i>telmisartan-hydrochlorothiazide PO</i>	NP	QL(1 EA daily)
<i>irbesartan-hydrochlorothiazide PO</i>	P	QL(1 EA daily)	TENORETIC 100 PO (<i>atenolol & chlorthalidone</i>)	NP	
<i>lisinopril & hydrochlorothiazide PO</i>	P	QL(1 EA daily)	TENORETIC 50 PO (<i>atenolol & chlorthalidone</i>)	NP	
<i>losartan potassium & hydrochlorothiazide PO</i>	P	QL(1 EA daily)	<i>trandolapril-verapamil hcl PO</i>	NP	QL(1 EA daily)
<i>losartan potassium & hydrochlorothiazide PO</i>	NP	QL(1 EA daily)	TRIBENZOR PO (<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>)	NP	QL(1 EA daily)
LOTENSIN HCT PO 12.5 MG-10 MG, 12.5 MG-20 MG, 25 MG-20 MG (<i>benazepril & hydrochlorothiazide</i>)	NP	QL(1 EA daily)	<i>valsartan-hydrochlorothiazide PO</i>	NP	QL(1 EA daily)
LOTREL PO 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>valsartan-hydrochlorothiazide PO</i>	P	QL(1 EA daily)
<i>metoprolol & hydrochlorothiazide TABS PO</i>	NP		VASERETIC PO 25 MG-10 MG (<i>enalapril maleate & hydrochlorothiazide</i>)	NP	QL(1 EA daily)
MICARDIS HCT PO (<i>telmisartan-hydrochlorothiazide</i>)	NP	QL(1 EA daily)	ZESTORETIC PO (<i>lisinopril & hydrochlorothiazide</i>)	NP	QL(1 EA daily)
			ZIAC PO (<i>bisoprolol & hydrochlorothiazide</i>)	NP	
			Direct Renin Inhibitors		
			<i>aliskiren fumarate PO</i>	NP	QL(1 EA daily)
			TEKTURNA PO (<i>aliskiren fumarate</i>)	NP	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
Vasodilators		
<i>hydralazine hcl TABS PO</i>	P	
<i>minoxidil PO 2.5 MG, 10 MG</i>	P	
ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections		
Anti-infective Agents - Misc.		
AEMCOLO PO	NP	
FLAGYL CAPS PO (<i>metronidazole</i>)	NP	
LIKMEZ SUSP	NP	
<i>metronidazole CAPS PO</i>	NP	
<i>metronidazole TABS PO</i>	P	
<i>pentamidine isethionate IN</i>	P	
<i>tinidazole PO</i>	P	
<i>trimethoprim TABS PO</i>	NP	
XIFAXAN PO 550 MG	NP	
XIFAXAN PO 200 MG	P	
Anti-infective Misc. - Combinations		
<i>methenamine-hyoscamine-methylene blue-sodium phosphate TABS PO</i>	NP	
<i>methenamine-hyosc-methylene blue-benzoic acid-phenyl sal PO</i>	NP	
<i>methenamine-hyosc-methylene blue-sod phos-phenyl sal CAPS PO 118 MG</i>	NP	
<i>methenamine-hyosc-methylene blue-sod phos-phenyl sal TABS PO 81 MG, 81.6 MG</i>	NP	
<i>sulfamethoxazole-trimethoprim SUSP PO</i>	P	
<i>sulfamethoxazole-trimethoprim TABS PO</i>	P	
URIBEL PO	NP	

Drug Name	Drug Tier	Requirements/ Limits
UROGESIC-BLUE TABS PO (<i>methenamine-hyoscamine-methylene blue-sodium phosphate</i>)	NP	
Antiprotozoal Agents		
<i>atovaquone PO</i>	P	
<i>nitazoxanide TABS PO</i>	NP	
Carbapenems		
<i>imipenem-cilastatin IV</i>	P	
<i>meropenem</i>	P	
Glycopeptides		
FIRVANQ SOLR PO (<i>vancomycin hcl</i>)	NP	
VANCOCIN CAPS PO (<i>vancomycin hcl</i>)	NP	
VANCOMYCIN HCL IN DEXTROSE 500 MG/100ML-5 %	P	
<i>vancomycin hcl CAPS PO</i>	P	
<i>vancomycin hcl SOLR IV 500 MG</i>	P	
<i>vancomycin hcl SOLR PO 25 MG/ML, 50 MG/ML, 250 MG/5ML</i>	P	
VANCOMYCIN HCL SOLR IV 500 MG	P	
Leprostatics		
<i>dapsone PO</i>	P	
Lincosamides		
CLEOCIN PO (<i>clindamycin hcl</i>)	NP	
CLEOCIN PO (<i>clindamycin palmitate hydrochloride</i>)	NP	AL(Up to 9 yrs old)
<i>clindamycin hcl PO</i>	P	
<i>clindamycin palmitate hydrochloride PO</i>	P	AL(Up to 9 yrs old)
Monobactams		

Drug Name	Drug Tier	Requirements/ Limits
CAYSTON	NP	SP
Oxazolidinones		
<i>linezolid SUSR</i>	NP	AL(Up to 10 yrs old); PA
<i>linezolid TABS PO</i>	NP	PA
SIVEXTRO SOLR	NP	
SIVEXTRO TABS	NP	
ZYVOX SUSR (<i>linezolid</i>)	NP	AL(Up to 10 yrs old); PA
ZYVOX TABS PO (<i>linezolid</i>)	NP	PA
Urinary Anti-infectives		
<i>fosfomycin tromethamine</i>	NP	
MACROBID PO (<i>nitrofurantoin monohyd macro</i>)	NP	
<i>methenamine hippurate PO</i>	P	
<i>methenamine mandelate</i>	P	
<i>nitrofurantoin PO</i>	NP	
NITROFURANTOIN PO	NP	
<i>nitrofurantoin macrocrystal PO</i>	P	
<i>nitrofurantoin monohyd macro PO</i>	P	
ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)		
Antimalarial Combinations		
<i>atovaquone-proguanil hcl PO</i>	P	
Antimalarials		
<i>chloroquine phosphate TABS PO</i>	P	
<i>hydroxychloroquine sulfate PO 200 MG</i>	P	
<i>mefloquine hcl PO</i>	P	
<i>primaquine phosphate TABS PO</i>	P	
<i>pyrimethamine PO</i>	P	SP

Drug Name	Drug Tier	Requirements/ Limits
<i>quinine sulfate CAPS PO 324 MG</i>	P	
SOVUNA PO 200 MG	P	
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
Antimyasthenic/Cholinergic Agents		
<i>pyridostigmine bromide SOLN PO</i>	P	
<i>pyridostigmine bromide TABS PO 60 MG</i>	P	
<i>pyridostigmine bromide TBCR PO</i>	P	
ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)		
Antimycobacterial Agents		
<i>cycloserine PO</i>	P	
<i>ethambutol hcl TABS PO</i>	P	
<i>isoniazid SYRP PO</i>	P	
<i>isoniazid TABS PO</i>	P	
PRIFTIN PO	P	
<i>pyrazinamide PO</i>	P	
<i>rifabutin PO</i>	P	
<i>rifampin CAPS PO</i>	P	
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer		
Alkylating Agents		
BELRAPZO SOLN	P	SP
BENDAMUSTINE HCL SOLN	P	SP
<i>bendamustine hcl SOLR</i>	P	SP
BENDEKA SOLN	P	SP
BICNU (<i>carmustine</i>)	P	
<i>busulfan SOLN</i>	P	
BUSULFEX SOLN (<i>busulfan</i>)	P	
<i>carboplatin SOLN 450 MG/45ML, 600 MG/60ML</i>	NP	SP

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>carboplatin SOLN 50 MG/5ML, 150 MG/15ML, 450 MG/45ML, 600 MG/60ML, 1000 MG/100ML</i>	P	SP	TREANDA SOLR (<i>bendamustine hcl</i>)	P	SP
<i>carmustine</i>	P		VIVIMUSTA SOLN	P	SP
CARMUSTINE	P		YONDELIS	P	SP
<i>cisplatin SOLN 50 MG/50ML, 100 MG/100ML, 200 MG/200ML</i>	P	SP	ZANOSAR	P	
CISPLATIN SOLR	P	SP	ZEPZELCA	P	SP
<i>cyclophosphamide CAPS</i>	P		Antimetabolites		
CYCLOPHOSPHAMIDE SOLN	P	SP	ALIMTA SOLR (<i>pemetrexed disodium</i>)	P	SP
CYCLOPHOSPHAMIDE SOLN (<i>cyclophosphamide</i>)	P	SP	ARRANON (<i>nelarabine</i>)	P	
<i>cyclophosphamide SOLR IJ</i>	P	SP	AXTLE	P	
CYCLOPHOSPHAMIDE TABS PO 50 MG	P		<i>azacitidine SUSR</i>	P	SP
EVOMELA IV	P	SP	<i>capecitabine PO</i>	P	SP
GLIADEL WAFER	P		<i>cladribine 10 MG/10ML</i>	P	SP
IFEX SOLR	P		<i>clofarabine</i>	P	
IFEX SOLR (<i>ifosfamide</i>)	P		<i>cytarabine SOLN</i>	P	SP
<i>ifosfamide SOLN</i>	P		<i>decitabine</i>	P	SP
<i>ifosfamide SOLR</i>	P		<i>fludarabine phosphate SOLN</i>	P	SP
IFOSFAMIDE SOLR	P		<i>fludarabine phosphate SOLR</i>	P	SP
LEUKERAN PO	P		<i>fluorouracil</i>	P	
<i>melphalan hcl IV</i>	P	SP	FOLOTYN	P	SP
MYLERAN TABS PO	P		<i>gemcitabine hcl SOLN</i>	P	
<i>oxaliplatin SOLN 50 MG/10ML, 100 MG/20ML</i>	P		GEMCITABINE HCL SOLN	P	
<i>oxaliplatin SOLR</i>	P		GEMCITABINE HCL SOLN	P	
TEMODAR SOLR	P	SP	GEMCITABINE HCL SOLN (<i>gemcitabine hcl</i>)	P	
<i>temozolomide CAPS PO</i>	P	SP	<i>gemcitabine hcl SOLR</i>	P	
TEPADINA (<i>thiotepa</i>)	P	SP	INFUGEM	P	
<i>thiotepa</i>	P	SP	JYLAMVO SOLN	P	SP
			<i>mercaptopurine TABS PO</i>	P	
			<i>methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML</i>	P	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
METHOTREXATE SODIUM SOLN 50 MG/2ML	P		LENVIMA (18 MG DAILY DOSE)	P	SP
<i>methotrexate sodium SOLR</i>	P		LENVIMA (20 MG DAILY DOSE)	P	SP
<i>methotrexate sodium TABS PO 2.5 MG</i>	P		LENVIMA (24 MG DAILY DOSE)	P	SP
<i>nelarabine</i>	P		LENVIMA (4 MG DAILY DOSE)	P	SP
ONUREG TABS	P	SP	LENVIMA (8 MG DAILY DOSE)	P	SP
PEMETREXED	P	SP	MVASI	P	SP
PEMETREXED DISODIUM SOLN	P	SP	VEGZELMA	P	SP
<i>pemetrexed disodium SOLR</i>	P	SP	ZALTRAP	P	SP
PEMETREXED DITROMETHAMINE	P	SP	ZIRABEV	P	SP
PEMFEXY	P	SP	Antineoplastic - Antibodies		
PEMRYDI RTU SOLN	P	SP	ADCETRIS	P	SP
<i>pralatrexate</i>	P	SP	BAVENCIO	P	SP
PURIXAN SUSP	P		BESPONSA	P	SP
TREXALL TABS PO 5 MG, 7.5 MG, 10 MG, 15 MG	P		BIZENGRI (750 MG DOSE)	P	
VIDAZA SUSR (<i>azacitidine</i>)	P	SP	BLINCYTO	P	SP
XATMEP SOLN	P		COLUMVI	P	SP
XELODA PO (<i>capecitabine</i>)	NP	SP; ST	DANYELZA	P	
Antineoplastic - Angiogenesis Inhibitors			DARZALEX	P	SP
ALYMSYS	P	SP	ELAHERE	P	SP
AVASTIN	P	SP; ST	ELREXFIO	P	SP
CYRAMZA	P	SP	EMPLICITI	P	SP
FRUZAQLA	P	SP	ENHERTU	P	SP
INLYTA	P	SP	EPKINLY	P	SP
LENVIMA (10 MG DAILY DOSE)	P	SP	GAZYVA	P	SP
LENVIMA (12 MG DAILY DOSE)	P	SP	IMDELLTRA	P	SP
LENVIMA (14 MG DAILY DOSE)	P	SP	IMFINZI	P	SP
			JEMPERLI	P	SP
			KADCYLA	P	SP
			KEYTRUDA	P	SP
			KIMMTRAK	P	SP
			LIBTAYO	P	SP
			LOQTORZI	P	SP

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
LUNSUMIO	P	SP	VENCLEXTA STARTING PACK TBPk	P	SP
MONJUVI	P	SP	VENCLEXTA TABS	P	SP
OPDIVO	P	SP	Antineoplastic - Cellular Immunotherapy		
PADCEV	P	SP	CARVYKTI	P	SP
POLIVY	P	SP	PROVENGE	P	SP
POTELIGEO	P	SP	TECELRA	P	SP
RIABNI	P	SP	Antineoplastic - EGFR Inhibitors		
RITUXAN	P	SP; ST	ERBITUX	P	SP
RUXIENCE	P	SP	<i>erlotinib hcl</i>	P	SP
RYBREVENT	P	SP	<i>gefitinib</i>	P	SP
SARCLISA	P	SP	GILOTRIF	P	SP
TALVEY	P	SP	IRESSA (<i>gefitinib</i>)	NP	SP; ST
TECENTRIQ	P	SP	LAZCLUZE	P	SP
TEVIMBRA	P	SP	PORTRAZZA	P	SP
TIVDAK	P	SP	TAGRISSO	P	SP
TRUXIMA	P	SP	TARCEVA 100 MG (<i>erlotinib hcl</i>)	NP	SP; ST
UNITUXIN	P	SP	VECTIBIX 100 MG/5ML, 400 MG/20ML	P	SP
VYLOY	P	SP	VIZIMPRO	P	SP
YERVOY	P	SP	Antineoplastic - Gene Therapy Agents		
ZEVALIN Y-90	P	SP	ADSTILADRIN	P	SP
ZYNLONTA	P	SP	Antineoplastic - Hedgehog Pathway Inhibitors		
ZYNYZ	P	SP	DAURISMO	P	SP
Antineoplastic - Anti-HER2 Agents			ERIVEDGE	P	SP
HERCEPTIN 150 MG	P	SP; ST	ODOMZO PO	P	SP
HERCESSI	P	SP	Antineoplastic - Hormonal and Related Agents		
HERZUMA	P	SP	<i>abiraterone acetate</i>	P	SP
KANJINTI	P	SP	AKEEGA	P	SP
MARGENZA	P	SP	<i>anastrozole PO</i>	P	GL
OGIVRI	P	SP	ARIMIDEX PO (<i>anastrozole</i>)	P	ST; GL
ONTRUZANT	P	SP	AROMASIN PO (<i>exemestane</i>)	P	ST; GL
PERJETA	P	SP	<i>bicalutamide PO</i>	P	
TRAZIMERA	P	SP			
TUKYSA	P	SP			
ZIIHERA	P	SP			
Antineoplastic - BCL-2 Inhibitors					

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CAMCEVI	P	SP	TRELSTAR MIXJECT	P	SP
CASODEX PO (bicalutamide)	NP	ST	XTANDI CAPS	P	SP
ELIGARD KIT SC	P	SP	XTANDI TABS	P	SP
ERLEADA	P	SP	YONSA	P	SP
exemestane PO	P	GL	ZYTIGA (abiraterone acetate)	NP	SP; ST
FARESTON PO (toremifene citrate)	P		Antineoplastic - Hypoxia-Inducible Factor Inhibitors		
FASLODEX SOSY (fulvestrant)	P		WELIREG	P	SP
FEMARA PO (letrozole)	P	ST; GL	Antineoplastic - Immunomodulators		
FIRMAGON 80 MG	P	SP	POMALYST	P	SP
FIRMAGON (240 MG DOSE)	P	SP	Antineoplastic - Menin Inhibitors		
flutamide PO	P		REVUFORJ	P	
fulvestrant SOSY	P		Antineoplastic - PDGFR-alpha Inhibitors		
letrozole PO	P	GL	AYVAKIT	P	SP
LEUPROLIDE ACETATE (3 MONTH) INJ	P		Antineoplastic - XPO1 Inhibitors		
leuprolide acetate KIT IJ 1 MG/0.2ML	P	SP	XPOVIO (100 MG ONCE WEEKLY) PO 50 MG	P	SP
LUPRON DEPOT (1-MONTH) KIT IM	P	SP	XPOVIO (40 MG ONCE WEEKLY) PO 40 MG	P	SP
LUPRON DEPOT (3-MONTH) KIT IM	P	SP	XPOVIO (40 MG TWICE WEEKLY) PO 40 MG	P	SP
LUPRON DEPOT (4-MONTH) IM	P	SP	XPOVIO (60 MG ONCE WEEKLY) PO 60 MG	P	SP
LUPRON DEPOT (6-MONTH) IM	P	SP	XPOVIO (60 MG TWICE WEEKLY) PO	P	SP
LYSODREN PO	P	SP	XPOVIO (80 MG ONCE WEEKLY) PO 40 MG	P	SP
megestrol acetate TABS PO	P		XPOVIO (80 MG TWICE WEEKLY) PO	P	SP
nilutamide PO	P		Antineoplastic Antibiotics		
NUBEQA	P	SP	bleomycin sulfate	P	
ORGOVYX	P	SP	dactinomycin	P	
ORSERDU	P	SP	daunorubicin hcl SOLN	P	SP
SOLTAMOX SOLN PO	P		DAUNORUBICIN HCL SOLN (daunorubicin hcl)	P	SP
tamoxifen citrate TABS PO	P				
toremifene citrate PO	P				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
DOXIL SUSP (<i>doxorubicin hcl liposomal</i>)	P		AFINITOR TABS (<i>everolimus</i>)	NP	SP; ST
<i>doxorubicin hcl liposomal SUSP</i>	P		ALECENSA	P	SP
<i>doxorubicin hcl SOLN</i>	P		ALUNBRIG TABS PO	P	SP
DOXORUBICIN HCL SOLN (<i>doxorubicin hcl</i>)	P		ALUNBRIG TBPk	P	SP
<i>doxorubicin hcl SOLR 10 MG, 50 MG</i>	P		AUGTYRO PO	P	SP
ELLEENCE SOLN	P	SP	BALVERSA	P	SP
IDAMYCIN PFS (<i>idarubicin hcl</i>)	P		BELEODAQ	P	SP
<i>idarubicin hcl</i>	P		BORTEZOMIB SOLN IV	P	SP
JELMYTO SOLR UL	P		<i>bortezomib SOLR IJ</i>	P	SP
<i>mitomycin SOLR IV</i>	P		BORTEZOMIB SOLR IJ 1 MG, 2.5 MG	P	SP
<i>mitoxantrone hcl 20 MG/10ML, 25 MG/12.5ML, 30 MG/15ML</i>	P	SP	BORUZU SOLN IJ	P	SP
<i>valrubicin</i>	P	SP	BOSULIF CAPS	P	SP
VALSTAR (<i>valrubicin</i>)	P	SP	BOSULIF TABS	P	SP
Antineoplastic Combinations			BRAFTOVI PO 75 MG	P	SP
DARZALEX FASPRO	P	SP	BRUKINSA	P	SP
HERCEPTIN HYLECTA	P	SP	CABOMETYX TABS PO	P	SP
INQOVI	P	SP	CALQUENCE	P	SP
KISQALI FEMARA (200 MG DOSE)	P	SP	CALQUENCE	P	SP
KISQALI FEMARA (400 MG DOSE)	P	SP	CAPRELSA PO	P	SP
KISQALI FEMARA (600 MG DOSE)	P	SP	COMETRIQ (100 MG DAILY DOSE) KIT	P	SP
LONSURF	P	SP	COMETRIQ (140 MG DAILY DOSE) KIT	P	SP
OPDUALAG	P	SP	COMETRIQ (60 MG DAILY DOSE) KIT	P	SP
PHESGO	P	SP	COPIKTRA PO	P	SP
RITUXAN HYCELA	P	SP	COTELLIC	P	SP
TECENTRIQ HYBREZA	P	SP	DANZITEN	NP	SP
VYXEOS	P	SP	<i>dasatinib</i>	NP	SP; ST
Antineoplastic Enzyme Inhibitors			<i>everolimus TABS</i>	P	SP
AFINITOR DISPERZ TBSO (<i>everolimus</i>)	NP	SP; ST	<i>everolimus TBSO</i>	P	SP
			FOTIVDA	P	SP
			FYARRO	P	SP
			GAVRETO	P	SP
			GAVRETO	P	SP

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
GLEEVEC TABS PO 400 MG (<i>imatinib mesylate</i>)	NP	SP	MEKTOVI	P	SP
GLEEVEC TABS PO (<i>imatinib mesylate</i>)	NP	SP; ST	NERLYNX	P	SP
IBRANCE CAPS	P	SP	NEXAVAR PO (<i>sorafenib tosylate</i>)	NP	SP
IBRANCE TABS	P	SP	NEXAVAR PO (<i>sorafenib tosylate</i>)	NP	SP; ST
ICLUSIG PO	P	SP	NINLARO	P	SP
IDHIFA	P	SP	OGSIVEO	P	SP
<i>imatinib mesylate TABS PO</i>	P	SP	OJEMDA SUSR	P	SP
IMBRUVICA CAPS	P	SP	OJEMDA TABS	P	SP
IMBRUVICA SUSP	P	SP	OJJAARA	P	SP
IMBRUVICA TABS	P	SP	<i>pazopanib hcl</i>	P	SP
IMKELDI SOLN	NP	SP	PEMAZYRE 4.5 MG	P	QL(1 EA daily); SP
INREBIC	P	SP	PEMAZYRE 9 MG, 13.5 MG	P	SP
ISTODAX SOLR (<i>romidepsin</i>)	P	SP	PIQRAY (200 MG DAILY DOSE)	P	SP
ITOVEBI	P	SP	PIQRAY (250 MG DAILY DOSE)	P	SP
JAKAFI	P	SP	PIQRAY (300 MG DAILY DOSE)	P	SP
JAYPIRCA	P	SP	QINLOCK	P	SP
KISQALI (200 MG DOSE)	P	SP	RETEVMO CAPS	P	SP
KISQALI (400 MG DOSE)	P	SP	RETEVMO TABS	P	SP
KISQALI (600 MG DOSE)	P	SP	REZLIDHIA	P	SP
KOSELUGO	P	SP	ROMIDEPSIN SOLN	P	SP
KRAZATI	P	SP	<i>romidepsin SOLR</i>	P	SP
KYPROLIS	P	SP	ROZLYTREK CAPS	P	SP
<i>lapatinib ditosylate</i>	P	SP	ROZLYTREK PACK	P	SP
LORBRENA	P	SP	RUBRACA	P	SP
LUMAKRAS	P	SP	RYDAPT	P	SP
LYNPARZA TABS PO	P	SP	RYTELO	P	SP
LYTGOBI (12 MG DAILY DOSE)	P	SP	SCEMBLIX	P	SP
LYTGOBI (16 MG DAILY DOSE)	P	SP	<i>sorafenib tosylate PO</i>	P	SP
LYTGOBI (20 MG DAILY DOSE)	P	SP	SPRYCEL (<i>dasatinib</i>)	P	SP
MEKINIST SOLR	P	SP	STIVARGA	P	SP
MEKINIST TABS PO	P	SP	<i>sunitinib malate PO</i>	P	SP

Drug Name	Drug Tier	Requirements/ Limits
SUTENT PO (<i>sunitinib malate</i>)	NP	SP; ST
TABRECTA	P	SP
TAFINLAR CAPS PO	P	SP
TAFINLAR TBSO	P	SP
TALZENNA	P	SP
TASIGNA	P	SP
TAZVERIK	P	SP
<i>temsirolimus</i>	P	SP
TEPMETKO	P	SP
TIBSOVO	P	SP
TORISEL (<i>temsirolimus</i>)	P	SP
TRUQAP TABS	P	SP
TRUQAP TBPK PO	P	SP
TURALIO PO 125 MG	P	SP
TYKERB (<i>lapatinib ditosylate</i>)	NP	SP; ST
VANFLYTA	P	SP
VELCADE SOLR IJ (<i>bortezomib</i>)	P	SP
VERZENIO	P	SP
VITRAKVI CAPS PO	P	SP
VITRAKVI SOLN	P	SP
VONJO	P	SP
VORANIGO	P	SP
VOTRIENT (<i>pazopanib hcl</i>)	P	SP
XALKORI CAPS	P	SP
XALKORI CPSP	P	SP
XOSPATA	P	SP
ZEJULA TABS	P	SP
ZELBORAF PO	P	SP
ZOLINZA	P	SP
ZYDELIG	P	SP
ZYKADIA TABS	P	SP
Antineoplastic Enzymes		
ASPARLAS	P	SP

Drug Name	Drug Tier	Requirements/ Limits
ONCASPAR	P	SP
RYLAZE	P	SP
Antineoplastic Radiopharmaceuticals		
AZEDRA DOSIMETRIC	P	SP
AZEDRA THERAPEUTIC	P	SP
LUTATHERA	P	SP
PLUVICTO	P	SP
XOFIGO	P	
Antineoplastics Misc.		
ACTIMMUNE 100 MCG/0.5ML	P	SP
ANKTIVA	P	SP
<i>arsenic trioxide</i>	P	SP
<i>bexarotene PO</i>	P	SP
<i>dacarbazine SOLR</i>	P	
ELZONRIS	P	
HYDREA PO (<i>hydroxyurea</i>)	NP	ST
<i>hydroxyurea PO</i>	P	
MATULANE PO	P	SP
NIPENT	P	
TARGRETIN PO (<i>bexarotene</i>)	P	SP
TICE BCG	P	
<i>tretinoin (chemotherapy) PO</i>	P	SP
TRISENOX (<i>arsenic trioxide</i>)	P	SP
Chemotherapy Adjuncts		
ELITEK	P	
KEPIVANCE 6.25 MG	P	SP
Chemotherapy Rescue/Antidote/Protective Agents		
COSELA	P	
<i>dexrazoxane hcl</i>	P	SP
IWILFIN	P	SP

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>leucovorin calcium SOLN IJ 100 MG/10ML, 500 MG/50ML</i>	P		JEVTANA	P	SP
<i>leucovorin calcium SOLR</i>	P		<i>paclitaxel 30 MG/5ML, 100 MG/16.7ML, 150 MG/25ML, 300 MG/50ML</i>	P	
<i>leucovorin calcium TABS PO</i>	P		PACLITAXEL PROTEIN-BOUND PART	P	SP
<i>levoleucovorin calcium SOLN 175 MG/17.5ML</i>	P	SP	<i>paclitaxel protein-bound particles</i>	P	SP
<i>levoleucovorin calcium SOLR</i>	P	SP	<i>vinblastine sulfate SOLN</i>	P	
<i>mesna SOLN</i>	P	SP	<i>vincristine sulfate</i>	P	SP
MESNEX SOLN (<i>mesna</i>)	NP	SP; ST	<i>vinorelbine tartrate</i>	P	
MESNEX TABS PO	P	SP	Oncolytic Viral Agents		
Mitotic Inhibitors			IMLYGIC	P	SP
ABRAXANE (<i>paclitaxel protein-bound particles</i>)	P	SP	Topoisomerase I Inhibitors		
<i>docetaxel CONC 20 MG/ML, 80 MG/4ML, 160 MG/8ML</i>	P	SP	CAMPTOSAR (<i>irinotecan hcl</i>)	P	SP
DOCETAXEL CONC 20 MG/ML, 80 MG/4ML, 160 MG/8ML (<i>docetaxel</i>)	P	SP	HYCANTIN CAPS PO	P	SP
DOCETAXEL CONC 20 MG/ML, 80 MG/4ML, 160 MG/8ML	P	SP	<i>irinotecan hcl</i>	P	SP
<i>docetaxel SOLN</i>	P	SP	ONIVYDE	P	SP
DOCETAXEL SOLN 20 MG/2ML, 80 MG/8ML, 160 MG/16ML	P	SP	<i>topotecan hcl SOLN</i>	P	SP
DOCETAXEL SOLN (<i>docetaxel</i>)	P	SP	TOPOTECAN HCL SOLN	P	SP
DOCIVYX SOLN	P	SP	TOPOTECAN HCL SOLN (<i>topotecan hcl</i>)	P	SP
<i>eribulin mesylate</i>	P	SP	<i>topotecan hcl SOLR</i>	P	SP
ETOPOPHOS	P		TRODELVY	P	SP
<i>etoposide CAPS PO</i>	P	SP	ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease		
<i>etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML</i>	P	SP	Antiparkinson Adjunctive Therapy		
HALAVEN (<i>eribulin mesylate</i>)	P	SP	<i>carbidopa PO</i>	NP	
IXEMPRA KIT	P	SP	LODOSYN PO (<i>carbidopa</i>)	NP	
			NOURIANZ PO 40 MG	NP	
			NOURIANZ PO 20 MG	NP	QL(1 EA daily)
			Antiparkinson Anticholinergics		
			<i>benztropine mesylate TABS PO</i>	P	
			<i>trihexyphenidyl hcl SOLN</i>	P	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>trihexyphenidyl hcl TABS PO</i>	P		<i>pramipexole dihydrochloride TB24 PO 0.75 MG, 1.5 MG, 2.25 MG, 3.75 MG</i>	NP	QL(1 EA daily)
Antiparkinson COMT Inhibitors			<i>ropinirole hydrochloride TABS PO</i>	P	
<i>entacapone PO</i>	P		<i>ropinirole hydrochloride TB24 PO 8 MG, 12 MG</i>	NP	
ONGENTYS	NP		<i>ropinirole hydrochloride TB24 PO 2 MG, 4 MG, 6 MG</i>	NP	QL(1 EA daily)
TASMAR PO (<i>tolcapone</i>)	NP		RYTARY CPCR PO	NP	
<i>tolcapone PO</i>	NP		SINEMET TABS PO 100 MG-10 MG, 100 MG-25 MG (<i>carbidopa-levodopa</i>)	NP	
Antiparkinson Dopaminergics			STALEVO 100 PO (<i>carbidopa-levodopa-entacapone</i>)	NP	
<i>amantadine hcl CAPS PO</i>	P		STALEVO 125 PO (<i>carbidopa-levodopa-entacapone</i>)	NP	
<i>amantadine hcl SOLN</i>	P	AL(Up to 10 yrs old)	STALEVO 50 PO (<i>carbidopa-levodopa-entacapone</i>)	NP	
<i>amantadine hcl TABS PO</i>	NP		STALEVO 75 PO (<i>carbidopa-levodopa-entacapone</i>)	NP	
<i>bromocriptine mesylate CAPS PO</i>	P		VYALEV	NP	SP
<i>bromocriptine mesylate TABS PO 2.5 MG</i>	P		Antiparkinson Monoamine Oxidase Inhibitors		
<i>carbidopa-levodopa-entacapone PO</i>	NP		AZILECT PO 0.5 MG (<i>rasagiline mesylate</i>)	NP	QL(2 EA daily)
<i>carbidopa-levodopa TABS PO</i>	P		AZILECT PO 1 MG (<i>rasagiline mesylate</i>)	NP	
<i>carbidopa-levodopa TBCR PO</i>	P		<i>rasagiline mesylate PO 1 MG</i>	NP	
<i>carbidopa-levodopa TBDP PO</i>	NP		<i>rasagiline mesylate PO 0.5 MG</i>	NP	QL(2 EA daily)
CREXONT CPCR PO	NP		<i>selegiline hcl CAPS PO</i>	P	
DHIVY TABS PO	NP		<i>selegiline hcl TABS PO</i>	P	
DUOPA SUSP	NP		XADAGO 100 MG	NP	
GOCOVRI CP24 68.5 MG	NP	QL(1 EA daily); SP	XADAGO 50 MG	NP	QL(1 EA daily)
GOCOVRI CP24 137 MG	NP	SP	ZELAPAR TBDP	NP	
INBRIJA CAPS	NP				
NEUPRO	NP				
OSMOLEX ER TB24 129 MG	NP				
<i>pramipexole dihydrochloride TABS PO</i>	P				
<i>pramipexole dihydrochloride TB24 PO 0.375 MG, 3 MG, 4.5 MG</i>	NP				

Drug Name	Drug Tier	Requirements/ Limits
ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders		
Antimanic Agents		
<i>lithium PO</i>	P	
<i>lithium carbonate CAPS PO</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
<i>lithium carbonate TABS PO</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
<i>lithium carbonate TBCR PO</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
LITHOBID TBCR PO (<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 10.5 MG, 21 MG	NP	PA required for all antipsychotics for patients under 18 years old; QL(1 EA daily); AL(At least 18 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
CAPLYTA 42 MG	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
EQUETRO PO	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
GEODON PO 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 PO 40 MG (<i>ziprasidone hcl</i>)	NP	AL(At least 18 yrs old)
GEODON (<i>ziprasidone mesylate</i>)	NP	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)
LATUDA PO 80 MG, 120 MG (<i>lurasidone hcl</i>)	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
LATUDA PO 20 MG, 40 MG, 60 MG (<i>lurasidone hcl</i>)	NP	PA required for all antipsychotics for patients under 18 years old; QL(1 EA daily); AL(At least 18 yrs old)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>lurasidone hcl PO 20 MG, 40 MG, 60 MG</i>	P	QL(1 EA daily); AL(At least 18 yrs old)	VRAYLAR CAPS 4.5 MG, 6 MG	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
<i>lurasidone hcl PO 20 MG, 40 MG, 60 MG</i>	P	PA required for all antipsychotics for patients under 18 years old; QL(1 EA daily); AL(At least 18 yrs old)	<i>ziprasidone hcl PO</i>	P	AL(At least 18 yrs old)
<i>lurasidone hcl PO 80 MG, 120 MG</i>	P	AL(At least 18 yrs old)	<i>ziprasidone hcl PO</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
NUPLAZID CAPS	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	<i>ziprasidone mesylate</i>	P	AL(At least 18 yrs old)
NUPLAZID TABS PO 10 MG	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	<i>ziprasidone mesylate</i>	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
VRAYLAR CAPS 1.5 MG, 3 MG	NP	PA required for all antipsychotics for patients under 18 years old; QL(1 EA daily); AL(At least 18 yrs old)	Benzisoxazoles		
VRAYLAR CAPS 1.5 MG, 3 MG	P	PA required for all antipsychotics for patients under 18 years old; QL(1 EA daily); AL(At least 18 yrs old)	ERZOFRI	NP	AL(At least 18 yrs old); SP; PA
			FANAPT PO	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
			FANAPT TITRATION PACK PO	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
INVEGA PO 3 MG (<i>paliperidone</i>)	NP	PA required for all antipsychotics for patients under 18 years old; QL(1 EA daily); AL(At least 18 yrs old)	<i>paliperidone PO 1.5 MG, 3 MG</i>	P	PA required for all antipsychotics for patients under 18 years old; QL(1 EA daily); AL(At least 18 yrs old)
INVEGA PO 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)	<i>paliperidone PO 1.5 MG, 3 MG</i>	P	QL(1 EA daily); AL(At least 18 yrs old)
			<i>paliperidone PO 6 MG, 9 MG</i>	P	AL(At least 18 yrs old)
INVEGA HAFYERA	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old); SP; PA	PERSERIS PRSY	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old); SP; PA
INVEGA SUSTENNA	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old); SP; PA	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
INVEGA TRINZA	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old); SP; PA	RISPERDAL SOLN PO (<i>risperidone</i>)	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
<i>paliperidone PO 6 MG, 9 MG</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	RISPERDAL TABS PO 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)
			<i>risperidone microspheres</i>	NP	AL(At least 18 yrs old); SP; PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>risperidone SOLN PO</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	<i>haloperidol lactate CONC PO</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
<i>risperidone TABS PO</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	<i>haloperidol lactate CONC PO</i>	P	AL(At least 18 yrs old)
<i>risperidone TABS PO</i>	P	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>risperidone TBDP PO</i>	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	<i>haloperidol TABS PO</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
RYKINDO SRER	NP	AL(At least 18 yrs old); SP	<i>haloperidol TABS PO</i>	P	AL(At least 18 yrs old)
UZEDY SUSY	NP	AL(At least 18 yrs old); SP; PA	Dibenzapines		
Butyrophenones			ADASUVE	NP	AL(At least 18 yrs old)
HALDOL DECANOATE (<i>haloperidol decanoate</i>)	NP	PA required for all antipsychotics for patients under 18 years old; 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>haloperidol decanoate</i>	P	AL(At least 18 yrs old)	<i>clozapine TABS PO 50 MG</i>	P	AL(At least 18 yrs old)
<i>haloperidol decanoate</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	<i>clozapine TABS PO</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
			<i>clozapine TBDP PO 150 MG, 200 MG</i>	NP	AL(At least 18 yrs old)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>clozapine TBDP PO</i>	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	<i>olanzapine TBDP PO 10 MG, 15 MG, 20 MG</i>	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
CLOZARIL TABS PO 25 MG, 100 MG (<i>clozapine</i>)	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	<i>olanzapine TBDP PO 5 MG</i>	NP	PA required for all antipsychotics for patients under 18 years old; QL(1 EA daily); AL(At least 18 yrs old)
<i>loxapine succinate PO</i>	P	AL(At least 18 yrs old)	<i>quetiapine fumarate TABS PO</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
<i>olanzapine SOLR</i>	P	AL(At least 18 yrs old)	<i>quetiapine fumarate TABS PO 25 MG, 50 MG, 100 MG, 200 MG, 300 MG, 400 MG</i>	P	AL(At least 18 yrs old)
<i>olanzapine TABS PO 10 MG, 15 MG, 20 MG</i>	P	AL(At least 18 yrs old)	<i>quetiapine fumarate TB24 PO 150 MG, 200 MG</i>	P	PA required for all antipsychotics for patients under 18 years old; QL(1 EA daily); AL(At least 18 yrs old)
<i>olanzapine TABS PO 2.5 MG, 5 MG, 7.5 MG</i>	P	PA required for all antipsychotics for patients under 18 years old; QL(1 EA daily); AL(At least 18 yrs old)	<i>quetiapine fumarate TB24 PO 50 MG, 300 MG, 400 MG</i>	P	AL(At least 18 yrs old)
<i>olanzapine TABS PO 2.5 MG, 5 MG, 7.5 MG</i>	P	QL(1 EA daily); AL(At least 18 yrs old)	<i>quetiapine fumarate TB24 PO 150 MG, 200 MG</i>	P	QL(1 EA daily); AL(At least 18 yrs old)
<i>olanzapine TABS PO 10 MG, 15 MG, 20 MG</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	<i>quetiapine fumarate TB24 PO 50 MG, 300 MG, 400 MG</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
<i>olanzapine TBDP PO 10 MG, 15 MG, 20 MG</i>	NP	AL(At least 18 yrs old)			
<i>olanzapine TBDP PO 5 MG</i>	NP	QL(1 EA daily); AL(At least 18 yrs old)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SAPHRIS (<i>asenapine maleate</i>)	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	ZYPREXA RELPREVV	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old); SP; PA
SECUADO	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	ZYPREXA ZYDIS TBDP PO 10 MG, 15 MG, 20 MG (<i>olanzapine</i>)	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
SEROQUEL XR TB24 PO 50 MG, 300 MG, 400 MG (<i>quetiapine fumarate</i>)	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	ZYPREXA ZYDIS TBDP PO 5 MG (<i>olanzapine</i>)	NP	PA required for all antipsychotics for patients under 18 years old; QL(1 EA daily); AL(At least 18 yrs old)
SEROQUEL XR TB24 PO 150 MG, 200 MG (<i>quetiapine fumarate</i>)	NP	PA required for all antipsychotics for patients under 18 years old; QL(1 EA daily); 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)
SEROQUEL TABS PO (<i>quetiapine fumarate</i>)	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	ZYPREXA TABS PO 20 MG (<i>olanzapine</i>)	NP	AL(At least 18 yrs old)
VERSACLOZ SUSP PO	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	ZYPREXA TABS PO 2.5 MG, 5 MG, 7.5 MG (<i>olanzapine</i>)	NP	PA required for all antipsychotics for patients under 18 years old; QL(1 EA daily); AL(At least 18 yrs old)
			ZYPREXA TABS PO 10 MG, 15 MG, 20 MG (<i>olanzapine</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
Dihydroindolones			<i>fluphenazine hcl SOLN</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
<i>molindone hcl PO</i>	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	<i>fluphenazine hcl TABS PO</i>	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
Muscarinic Agents			<i>fluphenazine hcl TABS PO</i>	NP	AL(At least 18 yrs old)
COBENFY STARTER PACK CPPK	NP	PA	<i>perphenazine TABS PO</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
COBENFY CAPS	NP	PA	<i>perphenazine TABS PO</i>	P	AL(At least 18 yrs old)
Phenothiazines			<i>prochlorperazine PR</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
<i>chlorpromazine hcl CONC PO</i>	NP	AL(At least 18 yrs old)	<i>prochlorperazine maleate TABS PO</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
<i>chlorpromazine hcl SOLN</i>	P	AL(At least 18 yrs old)	<i>thioridazine hcl PO</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
<i>chlorpromazine hcl TABS PO</i>	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)			
<i>chlorpromazine hcl TABS PO</i>	NP	AL(At least 18 yrs old)			
<i>fluphenazine decanoate</i>	P	AL(At least 18 yrs old)			
<i>fluphenazine hcl CONC PO</i>	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)			
<i>fluphenazine hcl ELIX PO</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
<i>trifluoperazine hcl TABS PO</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	<i>aripiprazole SOLN PO</i>	P	AL(At least 18 yrs old)
Quinolinone Derivatives			<i>aripiprazole TABS PO 2 MG, 5 MG, 30 MG</i>	P	AL(At least 18 yrs old)
			<i>aripiprazole TABS PO 2 MG, 5 MG, 30 MG</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)
	P	AL(At least 18 yrs old); SP; PA			
	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old); SP; PA	<i>aripiprazole TABS PO 10 MG, 15 MG, 20 MG</i>	P	PA required for all antipsychotics for patients under 18 years old; QL(1 EA daily); AL(At least 18 yrs old)
	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old); SP; PA	<i>aripiprazole TABS PO 10 MG, 15 MG, 20 MG</i>	P	QL(1 EA daily); AL(At least 18 yrs old)
	NP	AL(At least 18 yrs old); SP	<i>aripiprazole TBDP PO</i>	NP	AL(At least 18 yrs old)
	NP	AL(At least 18 yrs old); SP	ARISTADA	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old); SP; PA
ABILIFY TABS PO 10 MG, 15 MG, 20 MG (<i>aripiprazole</i>)	NP	PA required for all antipsychotics for patients under 18 years old; QL(1 EA daily); AL(At least 18 yrs old)	ARISTADA INITIO	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old); SP; PA
ABILIFY TABS PO 2 MG, 5 MG, 30 MG (<i>aripiprazole</i>)	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	OPIPZA FILM	NP	PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
REXULTI 0.25 MG, 0.5 MG, 1 MG, 2 MG	NP	PA required for all antipsychotics for patients under 18 years old; QL(1 EA daily); AL(At least 18 yrs old)	APRETUDE	P	SP
REXULTI 3 MG, 4 MG	NP	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	APRETUDE	NP	SP
Thioxanthenes			APTIVUS CAPS	NP	SP
<i>thiothixene PO</i>	P	PA required for all antipsychotics for patients under 18 years old; AL(At least 18 yrs old)	<i>atazanavir sulfate CAPS PO</i>	P	SP
ANTISEPTICS & DISINFECTANTS			ATRIPLA PO (<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>)	NP	
Chlorine Antiseptics			BIKTARVY	P	SP
<i>chlorhexidine gluconate SOLN EX 4 %</i>	P		CABENUVA	P	SP
<i>chlorhexidine gluconate SOLN EX 4 %</i>	NP		CIMDUO	NP	SP
Iodine Antiseptics			COMBIVIR PO (<i>lamivudine-zidovudine</i>)	NP	SP
BETADINE SOLN (<i>povidone-iodine</i>)	P		COMPLERA	P	SP
FIRST AID ANTISEPTIC OINT	P		<i>darunavir TABS</i>	P	
<i>povidone-iodine SOLN 10 %</i>	P		DELSTRIGO	P	SP
ANTIVIRALS - Drugs to Treat Viral Infections			DESCOVY	P	SP
Antiretrovirals			DOVATO	P	SP
<i>abacavir sulfate-lamivudine PO</i>	P	SP	DOVATO	P	
<i>abacavir sulfate SOLN PO</i>	P	SP	EDURANT	P	SP
<i>abacavir sulfate TABS PO</i>	P	SP	<i>efavirenz CAPS PO</i>	P	SP
			<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate PO</i>	P	SP
			<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	NP	SP
			<i>efavirenz TABS PO</i>	P	SP
			<i>emtricitabine CAPS PO</i>	P	SP
			<i>emtricitabine-tenofovir disoproxil fumarate PO</i>	P	SP
			EMTRIVA CAPS PO (<i>emtricitabine</i>)	NP	SP
			EMTRIVA SOLN	NP	SP
			EPIVIR SOLN PO (<i>lamivudine</i>)	NP	SP
			EPIVIR TABS PO (<i>lamivudine</i>)	NP	SP
			EPZICOM PO (<i>abacavir sulfate-lamivudine</i>)	NP	SP

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>etravirine PO</i>	NP	SP	PREZCOBIX	P	SP
EVOTAZ	P	SP	PREZISTA SUSP	P	SP
<i>fosamprenavir calcium TABS PO</i>	NP	SP	PREZISTA TABS 75 MG, 150 MG	P	SP
FUZEON SOLR	NP	SP	PREZISTA TABS (<i>darunavir</i>)	NP	SP
GENVOYA	P	SP	RETROVIR CAPS PO (<i>zidovudine</i>)	NP	SP
INTELENCE PO (<i>etravirine</i>)	NP	SP	RETROVIR SOLN	P	SP
INTELENCE PO	NP	SP	RETROVIR SYRP PO (<i>zidovudine</i>)	NP	SP
ISENTRESS HD TABS PO	NP	SP	REYATAZ CAPS PO 200 MG, 300 MG (<i>atazanavir sulfate</i>)	NP	SP
ISENTRESS CHEW	P	SP	REYATAZ PACK	P	SP
ISENTRESS PACK PO	P	SP	<i>ritonavir TABS PO</i>	P	SP
ISENTRESS TABS PO	P	SP	RUKOBIA	NP	SP
JULUCA	NP	SP	SELZENTRY SOLN	NP	SP
KALETRA SOLN PO (<i>lopinavir-ritonavir</i>)	NP	SP	SELZENTRY TABS PO (<i>maraviroc</i>)	NP	SP
KALETRA TABS PO (<i>lopinavir-ritonavir</i>)	NP	SP	SELZENTRY TABS PO	NP	SP
KALETRA TABS PO (<i>lopinavir-ritonavir</i>)	NP	SP	STRIBILD	NP	SP
<i>lamivudine SOLN PO</i>	P	SP	SUNLENCA SOLN	NP	SP
<i>lamivudine TABS PO</i>	P	SP	SUNLENCA TBPK 300 MG	NP	SP
<i>lamivudine-zidovudine PO</i>	P	SP	SYMFI (<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	NP	SP
LEXIVA TABS PO (<i>fosamprenavir calcium</i>)	NP	SP	SYMFI LO (<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	NP	SP
<i>lopinavir-ritonavir SOLN PO</i>	P	SP	SYMTUZA	P	SP
<i>lopinavir-ritonavir TABS PO</i>	P	SP	<i>tenofovir disoproxil fumarate TABS PO</i>	P	SP
<i>maraviroc TABS PO</i>	NP	SP	TIVICAY PD TBSO	P	SP
<i>nevirapine SUSP PO</i>	P	SP	TIVICAY TABS	P	SP
<i>nevirapine TABS PO</i>	P	SP	TRIUMEQ PD TBSO	P	SP
<i>nevirapine TB24 PO</i>	NP	SP	TRIUMEQ PD TBSO	P	
NORVIR PACK	NP	SP	TRIUMEQ TABS	P	SP
NORVIR TABS PO (<i>ritonavir</i>)	NP	SP	TROGARZO	NP	SP
ODEFSEY	P	SP			
PIFELTRO	NP	SP			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TRUVADA PO (<i>emtricitabine-tenofovir disoproxil fumarate</i>)	NP	SP	EPCLUSA TABS	NP	84 day(s) max supply per 365 day(s) retail; SP
TYBOST	P	SP	HARVONI PACK	NP	84 day(s) max supply per 365 day(s) retail; SP; PA
VIRACEPT TABS PO	NP	SP	HARVONI TABS	NP	84 day(s) max supply per 365 day(s) retail; SP; PA
VIREAD POWD	P	SP	HARVONI TABS	NP	84 day(s) max supply per 365 day(s) retail; SP; PA
VIREAD TABS PO 150 MG, 200 MG, 250 MG	P	SP	LEDIPASVIR-SOFOSBUVIR TABS	NP	84 day(s) max supply per 365 day(s) retail; SP; PA
VIREAD TABS PO (<i>tenofovir disoproxil fumarate</i>)	NP	SP	MAVYRET PACK	P	112 day(s) max supply per 365 day(s) retail; SP
ZIAGEN SOLN PO (<i>abacavir sulfate</i>)	NP	SP	MAVYRET TABS PO	P	112 day(s) max supply per 365 day(s) retail; SP
<i>zidovudine CAPS PO</i>	P	SP	PEGASYS SOLN	NP	84 day(s) max supply per 365 day(s) retail; SP; PA
<i>zidovudine SYRP PO</i>	P	SP	PEGASYS SOSY	NP	84 day(s) max supply per 365 day(s) retail; SP; PA
<i>zidovudine TABS PO</i>	P	SP	<i>ribavirin (hepatitis c) CAPS PO</i>	P	84 day(s) max supply per 365 day(s) retail; SP
Antiviral Combinations			<i>ribavirin (hepatitis c) TABS PO 200 MG</i>	P	84 day(s) max supply per 365 day(s) retail; SP
PAXLOVID (150/100)	P		SOFOSBUVIR-VELPATASVIR TABS	P	84 day(s) max supply per 365 day(s) retail; SP
PAXLOVID (300/100)	P				
CMV Agents					
LIVTENCITY	NP	SP			
PREVYMIS TABS	NP	SP			
VALCYTE SOLR (<i>valganciclovir hcl</i>)	NP	AL(Up to 10 yrs old)			
VALCYTE TABS PO (<i>valganciclovir hcl</i>)	NP				
<i>valganciclovir hcl SOLR</i>	P	AL(Up to 10 yrs old)			
<i>valganciclovir hcl SOLR</i>	NP	AL(Up to 10 yrs old)			
<i>valganciclovir hcl TABS PO</i>	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			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SOVALDI PACK	NP	84 day(s) max supply per 365 day(s) retail; SP; PA	TAMIFLU SUSR PO (<i>oseltamivir phosphate</i>)	NP	1 max fill(s) per 180 day(s) retail; AL(Up to 10 yrs old)
SOVALDI TABS	NP	84 day(s) max supply per 365 day(s) retail; SP; PA	XOFLUZA (40 MG DOSE) PO 40 MG	NP	
VOSEVI	NP	84 day(s) max supply per 365 day(s) retail; SP; PA	XOFLUZA (80 MG DOSE) PO 80 MG	NP	
ZEPATIER	NP	84 day(s) max supply per 365 day(s) retail; SP; PA	Misc. Antivirals		
Herpes Agents			LAGEVRIO	NP	
<i>acyclovir CAPS PO</i>	P		BETA BLOCKERS - Drugs to Treat High Blood Pressure		
<i>acyclovir SUSP PO</i>	P	AL(Up to 10 yrs old)	Alpha-Beta Blockers		
<i>acyclovir TABS PO</i>	P		<i>carvedilol PO</i>	P	
<i>famciclovir PO</i>	P		<i>carvedilol phosphate PO 40 MG, 80 MG</i>	NP	
SITAVIG TABS BU	NP		<i>carvedilol phosphate PO 10 MG, 20 MG</i>	NP	QL(1 EA daily)
<i>valacyclovir hcl PO</i>	P		COREG PO (<i>carvedilol</i>)	NP	
<i>valacyclovir hcl PO 500 MG</i>	NP		COREG CR PO 10 MG, 20 MG (<i>carvedilol phosphate</i>)	NP	QL(1 EA daily)
VALTREX PO (<i>valacyclovir hcl</i>)	NP		COREG CR PO 40 MG, 80 MG (<i>carvedilol phosphate</i>)	NP	
Influenza Agents			<i>labetalol hcl TABS PO 400 MG</i>	NP	
<i>oseltamivir phosphate CAPS PO</i>	P	1 max fill(s) per 180 day(s) retail	<i>labetalol hcl TABS PO 100 MG, 200 MG, 300 MG</i>	P	
<i>oseltamivir phosphate SUSR PO</i>	P	1 max fill(s) per 180 day(s) retail; AL(Up to 10 yrs old)	Beta Blockers Cardio-Selective		
RELENZA DISKHALER	NP	1 max fill(s) per 180 day(s) retail	<i>acebutolol hcl CAPS PO</i>	NP	
<i>rimantadine hydrochloride TABS PO</i>	NP		<i>atenolol TABS PO</i>	P	
TAMIFLU CAPS PO (<i>oseltamivir phosphate</i>)	NP	1 max fill(s) per 180 day(s) retail	<i>betaxolol hcl PO 10 MG</i>	NP	QL(1 EA daily)
			<i>betaxolol hcl PO 20 MG</i>	NP	
			<i>bisoprolol fumarate PO 10 MG</i>	P	
			<i>bisoprolol fumarate PO 5 MG</i>	P	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
BYSTOLIC PO 2.5 MG, 5 MG (<i>nebivolol hcl</i>)	NP	QL(1 EA daily)	INDERAL LA CP24 PO 120 MG, 160 MG (<i>propranolol hcl</i>)	NP	
BYSTOLIC PO 10 MG, 20 MG (<i>nebivolol hcl</i>)	NP		INDERAL XL PO	NP	
KAPSPARGO SPRINKLE CS24	NP		INNOPRAN XL PO	NP	
LOPRESSOR TABS PO (<i>metoprolol tartrate</i>)	NP		<i>nadolol</i> TABS PO 20 MG, 40 MG, 80 MG	P	QL(1 EA daily)
<i>metoprolol succinate</i> TB24 PO 100 MG, 200 MG	P		<i>pindolol</i> TABS PO	NP	
<i>metoprolol succinate</i> TB24 PO 25 MG, 50 MG	P	QL(1 EA daily)	<i>propranolol hcl</i> CP24 PO 60 MG, 80 MG	P	QL(1 EA daily)
<i>metoprolol tartrate</i> TABS PO	P		<i>propranolol hcl</i> CP24 PO 120 MG, 160 MG	P	
<i>nebivolol hcl</i> PO 10 MG, 20 MG	NP		<i>propranolol hcl</i> SOLN PO 20 MG/5ML, 40 MG/5ML	P	
<i>nebivolol hcl</i> PO 2.5 MG, 5 MG	NP	QL(1 EA daily)	<i>propranolol hcl</i> TABS PO	P	
<i>nebivolol hcl</i> PO 10 MG, 20 MG	P		<i>sotalol hcl (afib/afl)</i> PO	P	
<i>nebivolol hcl</i> PO 2.5 MG, 5 MG	P	QL(1 EA daily)	<i>sotalol hcl</i> TABS PO	P	
TENORMIN TABS PO (<i>atenolol</i>)	NP		SOTYLIZE SOLN PO	NP	
TOPROL XL TB24 PO 100 MG, 200 MG (<i>metoprolol succinate</i>)	NP		<i>timolol maleate</i> TABS PO	NP	
TOPROL XL TB24 PO 25 MG, 50 MG (<i>metoprolol succinate</i>)	NP	QL(1 EA daily)	CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure		
Beta Blockers Non-Selective			Calcium Channel Blockers		
BETAPACE AF PO (<i>sotalol hcl (afib/afl)</i>)	NP		<i>amlodipine besylate</i> TABS PO 2.5 MG, 5 MG	NP	QL(1 EA daily)
BETAPACE TABS PO 80 MG, 120 MG, 160 MG (<i>sotalol hcl</i>)	NP		<i>amlodipine besylate</i> TABS PO	P	QL(1 EA daily)
HEMANGEOL SOLN PO	NP	SP	CARDIZEM CD CP24 PO (<i>diltiazem hcl coated beads</i>)	NP	QL(1 EA daily)
INDERAL LA CP24 PO 60 MG, 80 MG (<i>propranolol hcl</i>)	NP	QL(1 EA daily)	CARDIZEM LA TB24 (<i>diltiazem hcl</i>)	NP	QL(1 EA daily)
			CARDIZEM TABS PO 30 MG, 60 MG, 120 MG (<i>diltiazem hcl</i>)	NP	QL(1 EA daily)
			<i>diltiazem hcl coated beads</i> CP24 PO	P	QL(1 EA daily)
			<i>diltiazem hcl coated beads</i> CP24 PO 300 MG	NP	QL(1 EA daily)
			<i>diltiazem hcl extended release beads</i> PO	P	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>diltiazem hcl CP12 PO</i>	P	QL(1 EA daily)	VERELAN PM CP24 PO (<i>verapamil hcl</i>)	NP	QL(1 EA daily)
<i>diltiazem hcl CP24 PO</i>	P	QL(1 EA daily)	CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm		
DILTIAZEM HCL SOLR	P		Cardiac Glycosides		
<i>diltiazem hcl TABS PO</i>	P	QL(1 EA daily)	<i>digoxin SOLN PO 0.05 MG/ML</i>	P	
<i>diltiazem hcl TB24</i>	NP	QL(1 EA daily)	<i>digoxin TABS PO 125 MCG, 250 MCG</i>	P	
<i>felodipine PO</i>	P	QL(1 EA daily)	CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions		
<i>isradipine CAPS PO</i>	NP	QL(2 EA daily)	Cardiovascular Agents Misc. - Combinations		
KATERZIA	NP	QL(10 ML daily)	<i>amlodipine besylate-atorvastatin calcium PO 10 MG-10 MG, 10 MG-20 MG, 10 MG-40 MG, 10 MG-80 MG, 2.5 MG-10 MG, 2.5 MG-20 MG, 2.5 MG-40 MG, 5 MG-80 MG</i>	NP	
<i>levamlodipine maleate 5 MG</i>	NP		<i>amlodipine besylate-atorvastatin calcium PO 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG</i>	NP	QL(1 EA daily)
<i>levamlodipine maleate 2.5 MG</i>	NP	QL(1 EA daily)	BIDIL PO (<i>isosorbide dinitrate-hydralazine hcl</i>)	NP	
<i>nicardipine hcl CAPS PO</i>	NP	QL(3 EA daily)	CADUET PO 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG (<i>amlodipine besylate-atorvastatin calcium</i>)	NP	QL(1 EA daily)
<i>nifedipine CAPS PO</i>	P	QL(3 EA daily)	CADUET PO 10 MG-10 MG, 10 MG-20 MG, 10 MG-40 MG, 10 MG-80 MG, 5 MG-80 MG (<i>amlodipine besylate-atorvastatin calcium</i>)	NP	
<i>nifedipine TB24 PO</i>	P	QL(1 EA daily)	ENTRESTO CPSP	NP	
<i>nimodipine CAPS PO</i>	P	QL(1 EA daily)	ENTRESTO TABS PO	P	
<i>nisoldipine PO</i>	NP	QL(1 EA daily)	<i>isosorbide dinitrate-hydralazine hcl PO</i>	NP	
NORLIQVA SOLN	NP	QL(10 ML daily)	OPSYNVI	NP	SP
NORVASC TABS PO (<i>amlodipine besylate</i>)	NP	QL(1 EA daily)	Cardiovascular Anti-inflammatory/Immune		
NYMALIZE SOLN PO 6 MG/ML	P	QL(10 ML daily)			
PROCARDIA XL TB24 PO (<i>nifedipine</i>)	NP	QL(1 EA daily)			
SULAR PO 8.5 MG, 17 MG, 34 MG (<i>nisoldipine</i>)	NP	QL(1 EA daily)			
TIAZAC PO (<i>diltiazem hcl extended release beads</i>)	NP	QL(1 EA daily)			
VERAPAMIL HCL ER CP24 PO (<i>verapamil hcl</i>)	NP	QL(1 EA daily)			
<i>verapamil hcl CP24 PO 100 MG, 120 MG, 180 MG, 200 MG, 240 MG, 300 MG</i>	NP	QL(1 EA daily)			
<i>verapamil hcl CP24 PO 120 MG, 180 MG, 240 MG, 360 MG</i>	P	QL(1 EA daily)			
<i>verapamil hcl TABS PO</i>	P	QL(3 EA daily)			
<i>verapamil hcl TBCR PO</i>	P	QL(2 EA daily)			

Drug Name	Drug Tier	Requirements/ Limits
Modulators		
LODOCO	NP	
Cardiovascular Sodium-Glucose Co-Transporter 2 Inhibitors		
INPEFA	NP	
Impotence Agents		
CIALIS PO 5 MG (<i>tadalafil</i>)	NP	
<i>tadalafil PO 5 MG</i>	NP	
Peripheral Vasodilators		
<i>inositol niacinate CAPS PO</i>	P	
Prostaglandin Vasodilators		
ORENITRAM MONTH 1 TEPK	NP	SP
ORENITRAM MONTH 2 TEPK	NP	SP
ORENITRAM MONTH 3 TEPK	NP	SP
ORENITRAM TBCR	NP	SP
REMODULIN SOLN IJ	NP	SP
<i>treprostinil SOLN IJ</i>	NP	SP
TYVASO DPI INSTITUTIONAL KIT POWD	NP	SP
TYVASO DPI MAINTENANCE KIT POWD	NP	SP
TYVASO DPI TITRATION KIT POWD	NP	SP
TYVASO REFILL KIT SOLN IN	NP	SP; PA
TYVASO STARTER KIT SOLN IN	NP	SP; PA
TYVASO SOLN IN	NP	SP; PA
VENTAVIS IN	P	SP; PA
Pulmonary Hypertension - Activin Signaling Inhibitor		

Drug Name	Drug Tier	Requirements/ Limits
WINREVAIR	NP	SP
Pulmonary Hypertension - Endothelin Receptor Antagonists		
<i>ambrisentan PO</i>	P	SP; PA
<i>bosentan TABS</i>	P	SP; PA
LETAIRIS PO (<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 PO (<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 PO (<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 PO</i>	P	SP; PA
<i>tadalafil (pulmonary hypertension) TABS PO</i>	NP	SP; PA
<i>tadalafil (pulmonary hypertension) TABS PO</i>	P	SP; PA
TADLIQ SUSP	NP	SP
Pulmonary Hypertension - Prostacyclin Receptor Agonist		
UPTRAVI TITRATION 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 PO	NP	SP; PA
Vasoactive Soluble Guanylate Cyclase Stimulator (sGC)		
VERQUVO 10 MG	NP	
VERQUVO 2.5 MG, 5 MG	NP	QL(1 EA daily)
CEPHALOSPORINS - Drugs to Treat Bacterial Infections		
Cephalosporins - 1st Generation		
<i>cefadroxil CAPS PO</i>	NP	
<i>cefadroxil SUSR PO</i>	NP	
<i>cefadroxil TABS PO</i>	NP	
<i>cefazolin sodium SOLR IJ 1 GM, 10 GM, 500 MG</i>	P	
<i>cephalexin CAPS PO</i>	P	
<i>cephalexin SUSR PO</i>	P	
<i>cephalexin TABS PO</i>	NP	
Cephalosporins - 2nd Generation		
CEFACLOR ER TB12 PO	NP	
<i>cefaclor CAPS PO</i>	P	
<i>cefaclor SUSR PO 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 PO</i>	P	
<i>cefprozil TABS PO</i>	P	
<i>cefuroxime axetil TABS PO</i>	P	
<i>cefuroxime sodium IJ 750 MG</i>	P	
Cephalosporins - 3rd Generation		
<i>cefdinir CAPS PO</i>	P	
<i>cefdinir SUSR PO</i>	P	

Drug Name	Drug Tier	Requirements/ Limits
<i>cefixime CAPS PO</i>	NP	
<i>cefixime SUSR PO</i>	NP	
<i>cefpodoxime proxetil SUSR PO</i>	NP	
<i>cefpodoxime proxetil TABS PO</i>	NP	
<i>ceftazidime IJ 1 GM, 6 GM</i>	P	
<i>ceftriaxone sodium IJ 1 GM, 2 GM, 250 MG, 500 MG</i>	P	
<i>ceftriaxone sodium in dextrose</i>	P	
Cephalosporins - 4th Generation		
CEFEPIME HCL SOLN	P	
<i>cefepime hcl SOLR IJ 1 GM</i>	P	
CHEMICALS		
Bulk Chemicals - C's		
CHOLESTYRAMINE	NP	
Bulk Chemicals - I's		
ISOTRETINOIN	NP	
Bulk Chemicals - L's		
LEVOTHYROXINE SODIUM	NP	
PCCA T4 SODIUM	NP	
Bulk Chemicals - N's		
NITAZOXANIDE	NP	
Liquids		
CAMPHOR SPIRIT	P	
SM CAMPHOR SPIRIT	P	
CONTRACEPTIVES - Drugs to Prevent Pregnancy		
Combination Contraceptives - Oral		
BALCOLTRA PO (<i>levonorgestrel-ethinyl estradiol-iron</i>)	NP	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
BEYAZ PO (drospirenone-ethinyl estradiol-levomefolate calcium)	NP		norethin acet & estrad-fe TABS PO 1 MG-20 MCG- 75 MG, 1.5 MG-30 MCG- 75 MG	P	
desogestrel & ethinyl estradiol PO	P		norethin acet & estrad-fe TABS PO 1 MG-20 MCG- 75 MG, 1.5 MG-30 MCG- 75 MG	NP	
desogestrel-ethinyl estradiol (biphasic) PO	P		norethindrone & eth estradiol PO	P	
desogestrel-ethinyl estradiol (triphasic) PO	P		norethindrone & ethinyl estradiol-fe PO 25 MCG- 0.8 MG-75 MG	NP	
drospirenone-ethinyl estradiol PO	P		norethindrone & ethinyl estradiol-fe PO	P	
drospirenone-ethinyl estradiol-levomefolate calcium PO	NP		norethindrone acet & eth estra TABS PO	P	
ethynodiol diacet & eth estradiol PO	P		norethindrone acet & eth estra TABS PO	NP	
FEMLYV TBDP	NP		norethindrone acetate- ethinyl estradiol-fe PO	P	
levonorgestrel & eth estradiol TABS PO	P		norethindrone acetate- ethinyl estradiol-fe PO	NP	
levonorgestrel-eth estradiol (triphasic) PO	P		norethindrone-eth estradiol (triphasic) PO	P	
levonorgestrel-ethinyl estradiol (91-day) PO 0.03 MG-0.15 MG	P		norgestimate-ethinyl estradiol PO	P	
levonorgestrel-ethinyl estradiol (91-day) PO	NP		norgestimate-ethinyl estradiol (triphasic) PO	P	
levonorgestrel-ethinyl estradiol (continuous) PO	NP		norgestrel & ethinyl estradiol PO 30 MCG-0.3 MG	NP	
levonorgestrel-ethinyl estradiol-iron PO	NP		norgestrel & ethinyl estradiol PO 30 MCG-0.3 MG	P	
LO LOESTRIN FE TABS	NP		QUARTETTE PO (levonorgestrel-ethinyl estradiol (91-day))	NP	
NATAZIA	P		SAFYRAL PO (drospirenone-ethinyl estradiol-levomefolate calcium)	NP	
NEXTSTELLIS	NP		TAYTULLA CAPS (norethin acet & estrad-fe)	NP	
norethin acet & estrad-fe CAPS	P				
norethin acet & estrad-fe CAPS	NP				
norethin acet & estrad-fe CHEW PO	P				
norethin acet & estrad-fe CHEW PO	NP				

Drug Name	Drug Tier	Requirements/ Limits
TYBLUME CHEW	P	
YASMIN 28 PO (drospirenone-ethinyl estradiol)	NP	
YAZ PO (drospirenone-ethinyl estradiol)	NP	
Combination Contraceptives - Transdermal		
norelgestromin-ethinyl estradiol	P	
norelgestromin-ethinyl estradiol	NP	
TWIRLA	NP	
Combination Contraceptives - Vaginal		
ANNOVERA	NP	
etonogestrel-ethinyl estradiol	NP	
NUVARING (etonogestrel-ethinyl estradiol)	P	
Copper Contraceptives - IUD		
PARAGARD INTRAUTERINE COPPER	P	SP
Emergency Contraceptives		
levonorgestrel (emergency oc) PO 1.5 MG	P	QL(4 EA per 120 day(s) retail; 4 EA per 120 days mail)
Progestin Contraceptives - Implants		
NEXPLANON	P	SP
Progestin Contraceptives - Injectable		
DEPO-PROVERA SUSP IM (medroxyprogesterone acetate (contraceptive))	P	
DEPO-PROVERA SUSY IM (medroxyprogesterone acetate (contraceptive))	P	
DEPO-SUBQ PROVERA 104 SUSY SC	P	

Drug Name	Drug Tier	Requirements/ Limits
medroxyprogesterone acetate (contraceptive) SUSP IM	P	
medroxyprogesterone acetate (contraceptive) SUSY IM	P	
Progestin Contraceptives - IUD		
KYLEENA	P	SP
LILETTA (52 MG)	P	SP
MIRENA (52 MG)	P	SP
SKYLA	P	SP
Progestin Contraceptives - Oral		
norethindrone (contraceptive) PO	P	
OPILL PO	P	
SLYND PO	P	
CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions		
Glucocorticosteroids		
AGAMREE	NP	SP
ALKINDI SPRINKLE CPSP	NP	
budesonide CPEP PO	P	
budesonide TB24 PO	NP	
CORTEF TABS PO (hydrocortisone)	NP	
CORTISONE ACETATE TABS PO	NP	
deflazacort SUSP PO	NP	SP
deflazacort TABS PO	NP	SP
DEPO-MEDROL SUSP	P	
DEXAMETHASONE INTENSOL CONC	P	
dexamethasone ELIX PO	P	
dexamethasone SOLN PO	P	
dexamethasone TABS PO	P	
dexamethasone TBPk PO	NP	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
EMFLAZA SUSP PO (deflazacort)	NP	SP	UCERIS TB24 PO (budesonide)	NP	
EMFLAZA TABS PO (deflazacort)	NP	SP	Mineralocorticoids		
EOHILIA SUSP PO	NP		<i>fludrocortisone acetate</i> TABS PO	P	
HEMADY TABS PO	NP		COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms		
<i>hydrocortisone</i> TABS PO	P		Antitussives		
MEDROL TABS PO	NP		<i>benzonatate</i> PO	P	
MEDROL TABS PO (<i>methylprednisolone</i>)	NP		<i>dextromethorphan hbr</i> CAPS PO	P	
MEDROL TBPB PO (<i>methylprednisolone</i>)	NP		<i>dextromethorphan</i> <i>polistirex</i> SUER PO	P	
<i>methylprednisolone</i> <i>acetate</i> SUSP	P		<i>dextromethorphan</i> <i>polistirex</i> SUER PO	NP	
METHYLPREDNISOLON E ACETATE SUSP 40 MG/ML, 80 MG/ML	P		HYCODAN SOLN PO (<i>hydrocodone bitartrate- homatropine</i> <i>methylbromide</i>)	NP	
<i>methylprednisolone sod succ</i> 40 MG, 500 MG, 1000 MG	P		HYCODAN TABS PO 1.5 MG-5 MG (<i>hydrocodone bitartrate-homatropine methylbromide</i>)	NP	QL(8 EA daily)
<i>methylprednisolone</i> TABS PO 4 MG	P		<i>hydrocodone bitartrate- homatropine</i> <i>methylbromide</i> SOLN PO	P	
<i>methylprednisolone</i> TABS PO 8 MG, 16 MG, 32 MG	NP		<i>hydrocodone bitartrate- homatropine</i> <i>methylbromide</i> TABS PO	NP	QL(8 EA daily)
<i>methylprednisolone</i> TBPB PO	P		Cough/Cold/Allergy Combinations		
<i>prednisolone sodium phosphate</i> SOLN PO	P		ALAHIST CF TABS	NP	
<i>prednisolone</i> SOLN	P		ALAHIST D	NP	
<i>prednisolone</i> TABS PO	NP		ALAHIST DM LIQD PO 7.5 MG/5ML-15 MG/5ML-2 MG/5ML (<i>phenylephrine- dextromethorphan</i>)	NP	
PREDNISONE INTENSOL CONC	NP		ALAHIST PE TABS PO	NP	
<i>prednisone</i> SOLN PO	P		AQUANAZ TABS PO	NP	
<i>prednisone</i> TABS PO	P		<i>brompheniramine & phenyleph</i> ELIX PO	NP	
<i>prednisone</i> TBPB PO	P				
RAYOS TBEC	NP				
SOLU-MEDROL 2 GM	P				
SOLU-MEDROL (PF) 40 MG, 500 MG, 1000 MG	P				
TARPEYO CPDR	NP	SP			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>brompheniramine & pseudoeph LIQD PO 15 MG/5ML-1 MG/5ML</i>	NP		<i>dextromethorphan-acetaminophen-chlorpheniramine TABS PO 325 MG-2 MG-10 MG</i>	NP	
CAPMIST DM TABS PO 400 MG-15 MG-60 MG	NP		<i>dextromethorphan-doxylamine-acetaminophen CAPS PO</i>	NP	
<i>cetirizine-pseudoephedrine PO</i>	NP		<i>dextromethorphan-doxylamine-acetaminophen LIQD PO</i>	NP	
CHLO HIST	NP		<i>dextromethorphan-guaifenesin LIQD PO 200 MG/20ML-20 MG/20ML, 400 MG/20ML-20 MG/20ML</i>	NP	
CHLO TUSS 30 MG/5ML-12.5 MG/5ML-1 MG/5ML	NP		<i>dextromethorphan-guaifenesin LIQD PO 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	
<i>chlorpheniramine & phenylephrine LIQD PO 10 MG/5ML-4 MG/5ML</i>	NP		<i>dextromethorphan-guaifenesin SYRP PO 100 MG/5ML-10 MG/5ML, 200 MG/10ML-20 MG/10ML</i>	P	
<i>chlorpheniramine & phenylephrine TABS PO 10 MG-4 MG</i>	NP		<i>dextromethorphan-guaifenesin TABS PO 400 MG-20 MG</i>	NP	
<i>chlorpheniramine & pseudoeph TABS PO</i>	NP		<i>dextromethorphan-guaifenesin TABS PO 400 MG-20 MG</i>	P	
<i>chlorpheniramine-dm TABS PO 4 MG-30 MG</i>	NP		<i>dextromethorphan-guaifenesin TB12 PO 1200 MG-60 MG, 600 MG-30 MG</i>	NP	
<i>chlorpheniramine-phenylephrine-acetaminophen TABS PO 5 MG-325 MG-2 MG</i>	NP		<i>dextromethorphan-guaifenesin TB12 PO 1200 MG-60 MG, 600 MG-30 MG</i>	P	
CLARINEX-D 12 HOUR TB12 PO	NP		<i>dextromethorphan-phenylephrine-acetaminophen CAPS PO</i>	NP	
CONEX COLD/ALLERGY PEDIATRIC SOLN	NP				
CONEX COLD/ALLERGY SOLN	NP				
CONEX COLD/ALLERGY TABS	NP				
COUGH & CHEST CONGESTION DM SYRP PO	P				
DECONEX DMX TABS PO 10 MG-400 MG-17.5 MG	NP				
DECONEX IR TABS PO	NP				
<i>dexbrompheniramine-phenylephrine TABS PO</i>	NP				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>dextromethorphan-phenylephrine-acetaminophen LIQD PO</i>	NP		<i>loratadine & pseudoephedrine TB12 PO</i>	NP	
<i>dextromethorphan-phenylephrine-acetaminophen PACK PO</i>	NP		<i>loratadine & pseudoephedrine TB24 PO</i>	NP	
<i>dextromethorphan-phenylephrine-acetaminophen TABS PO 5 MG-325 MG-10 MG</i>	NP		MAR-COF CG EXPECTORANT LIQD PO	NP	
<i>diphenhydramine-phenylephrine-acetaminophen PACK PO</i>	NP		M-END DMX	NP	
<i>doxylamine-dm LIQD PO 15 MG/15ML-6.25 MG/15ML</i>	NP		NASOPEN PE	NP	
<i>doxylamine-phenylephrine PO</i>	NP		NINJACOF LIQD PO	NP	
DURAFLU TABS PO 200 MG-325 MG-20 MG-60 MG	NP		NINJACOF-XG LIQD PO	NP	
ED A-HIST DM TABS PO	NP		<i>phenylephrine w/ acetaminophen TABS PO 5 MG-325 MG</i>	NP	
ED A-HIST LIQD PO (<i>chlorpheniramine & phenylephrine</i>)	NP		<i>phenylephrine w/ dm-gg LIQD PO 10 MG/10ML-200 MG/10ML-20 MG/10ML, 10 MG/15ML-200 MG/15ML-18 MG/15ML, 2.5 MG/5ML-100 MG/5ML-5 MG/5ML, 5 MG/5ML-100 MG/5ML-10 MG/5ML</i>	NP	
ED BRON GP LIQD PO	NP		<i>phenylephrine w/ dm-gg SYRP PO 5 MG/5ML-100 MG/5ML-10 MG/5ML</i>	NP	
ENDAL	NP		<i>phenylephrine w/ dm-gg TABS PO 10 MG-385 MG-17.5 MG</i>	NP	
<i>fexofenadine-pseudoephedrine TB12 PO</i>	NP		<i>phenylephrine-acetaminophen-guaifenesin TABS PO 5 MG-200 MG-325 MG</i>	NP	
<i>fexofenadine-pseudoephedrine TB24 PO</i>	NP		<i>phenylephrine-brompheniramine-dm LIQD PO 5 MG/10ML-10 MG/10ML-2 MG/10ML</i>	P	
<i>guaifenesin-codeine SOLN PO</i>	P		<i>phenylephrine-brompheniramine-dm LIQD PO 2.5 MG/5ML-5 MG/5ML-1 MG/5ML</i>	NP	
HISTEX-DM SYRP PO	NP		<i>phenylephrine-chlorphen-dm LIQD PO 10 MG/5ML-4 MG/5ML-15 MG/5ML</i>	NP	
<i>hydrocodone polistirex-chlorpheniramine polistirex SUER PO</i>	P				
LOHIST-D LIQD PO	NP				
LOHIST-DM SYRP PO	NP				

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

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
VANACOF DM LIQD PO (phenylephrine w/ dm-gg)	NP		ACNE MEDICATION 5 LOTN	P	AL(Up to 20 yrs old)
VANACOF DMX LIQD PO	NP		adapalene-benzoyl peroxide GEL	P	AL(Up to 20 yrs old)
VANACOF XP LIQD PO	NP		adapalene CREA	NP	AL(Up to 20 yrs old)
VANATAB DM TABS PO	NP		adapalene GEL 0.3 %	P	AL(Up to 20 yrs old)
WESTUSSIN DM	NP		adapalene GEL 0.1 %	NP	AL(Up to 20 yrs old); RX/OTC
Expectorants			AKLIEF	NP	
guaifenesin LIQD PO 100 MG/5ML, 200 MG/10ML, 300 MG/15ML	P		ALTRENO LOTN	NP	AL(Up to 20 yrs old)
guaifenesin LIQD PO 100 MG/5ML, 200 MG/10ML	NP		ARAZLO LOTN	NP	AL(Up to 20 yrs old)
guaifenesin TABS PO 400 MG	P		ATRALIN GEL (tretinoin)	NP	AL(Up to 20 yrs old)
guaifenesin TABS PO	NP		AVAR LS CLEANSER LIQD (sulfacetamide sodium w/ sulfur)	NP	AL(Up to 20 yrs old)
guaifenesin TB12 PO 1200 MG	NP		AVAR-E LS CREA (sulfacetamide sodium w/ sulfur)	NP	AL(Up to 20 yrs old)
guaifenesin TB12 PO	P		BENZAMYCIN GEL (benzoyl peroxide-erythromycin)	NP	AL(Up to 20 yrs old)
Misc. Respiratory Inhalants			benzoyl peroxide-erythromycin GEL	NP	AL(Up to 20 yrs old)
camphor (inhalant)	P		benzoyl peroxide FOAM 10 %	NP	
CVS HOT STEAM LIQD	P		benzoyl peroxide GEL 2.5 %, 5 %, 10 %	P	AL(Up to 20 yrs old)
sodium chloride (inhalant) NEBU 0.9 %, 3 %	P		benzoyl peroxide GEL 2.5 %	NP	AL(Up to 20 yrs old)
Mucolytics			benzoyl peroxide LIQD 5 %, 10 %	P	AL(Up to 20 yrs old)
acetylcysteine SOLN 10 %	P		benzoyl peroxide MISC 6 %	NP	AL(Up to 20 yrs old); RX/OTC
DERMATOLOGICALS - Drugs to Treat Skin Conditions			CABTREO	NP	
Acne Products			CLEOCIN-T LOTN (clindamycin phosphate topical)	NP	AL(Up to 20 yrs old)
ABSORICA PO (isotretinoin)	NP		CLINDACIN ETZ	NP	AL(Up to 20 yrs old)
ABSORICA LD	NP				
ACANYA GEL (clindamycin phosphate-benzoyl peroxide)	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
CLINDACIN PAC	NP	AL(Up to 20 yrs old)	<i>erythromycin (acne aid) GEL</i>	P	AL(Up to 20 yrs old)
CLINDAGEL GEL (<i>clindamycin phosphate (topical)</i>)	NP	AL(Up to 20 yrs old)	<i>erythromycin (acne aid) PADS</i>	NP	AL(Up to 20 yrs old)
<i>clindamycin phosphate (topical) FOAM</i>	NP	AL(Up to 20 yrs old)	<i>erythromycin (acne aid) SOLN</i>	P	AL(Up to 20 yrs old)
<i>clindamycin phosphate (topical) GEL</i>	P	AL(Up to 20 yrs old)	EVOClin FOAM (<i>clindamycin phosphate (topical)</i>)	NP	AL(Up to 20 yrs old)
<i>clindamycin phosphate (topical) GEL</i>	NP	AL(Up to 20 yrs old)	FABIOR FOAM	NP	AL(Up to 20 yrs old)
<i>clindamycin phosphate (topical) LOTN</i>	P	AL(Up to 20 yrs old)	<i>isotretinoin PO</i>	P	
<i>clindamycin phosphate (topical) SOLN</i>	P	AL(Up to 20 yrs old)	KLARON (<i>sulfacetamide sodium (acne)</i>)	NP	AL(Up to 20 yrs old)
<i>clindamycin phosphate (topical) SWAB</i>	P	AL(Up to 20 yrs old)	NEUAC	NP	AL(Up to 20 yrs old)
<i>clindamycin phosphate (topical) SWAB</i>	NP	AL(Up to 20 yrs old)	ONEXTON GEL (<i>clindamycin phosphate-benzoyl peroxide</i>)	NP	AL(Up to 20 yrs old)
<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	P	AL(Up to 20 yrs old)	RETIN-A MICRO (<i>tretinoin microsphere</i>)	NP	AL(Up to 20 yrs old)
<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	NP	AL(Up to 20 yrs old)	RETIN-A MICRO PUMP (<i>tretinoin microsphere</i>)	NP	AL(Up to 20 yrs old)
<i>clindamycin phosphate-benzoyl peroxide GEL</i>	NP	AL(Up to 20 yrs old)	RETIN-A MICRO PUMP	NP	AL(Up to 20 yrs old)
<i>clindamycin phosphate-tretinoin</i>	NP	AL(Up to 20 yrs old)	RETIN-A CREA (<i>tretinoin</i>)	NP	AL(Up to 20 yrs old)
<i>dapsone (topical)</i>	NP	AL(Up to 20 yrs old)	RETIN-A GEL (<i>tretinoin</i>)	NP	AL(Up to 20 yrs old)
DIFFERIN CREA (<i>adapalene</i>)	NP	AL(Up to 20 yrs old)	<i>sulfacetamide sodium (acne)</i>	NP	AL(Up to 20 yrs old)
DIFFERIN GEL (<i>adapalene</i>)	NP	AL(Up to 20 yrs old); RX/OTC	<i>sulfacetamide sodium w/ sulfur CREA 10 %-2 %, 10 %-5 %</i>	NP	AL(Up to 20 yrs old)
DIFFERIN LOTN	NP		<i>sulfacetamide sodium w/ sulfur EMUL 10 %-1 %</i>	NP	AL(Up to 20 yrs old)
EPIDUO FORTE GEL (<i>adapalene-benzoyl peroxide</i>)	NP	AL(Up to 20 yrs old)	<i>sulfacetamide sodium w/ sulfur FOAM</i>	NP	AL(Up to 20 yrs old)
EPSOLAY CREA	NP		<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 LOTN 10 %-5 %</i>	NP	
			<i>sulfacetamide sodium w/ sulfur PADS 10 %-4 %</i>	NP	AL(Up to 20 yrs old)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>sulfacetamide sodium w/ sulfur SUSP 10 %-5 %</i>	NP		<i>bacitracin zinc OINT</i>	NP	
<i>sulfacetamide sodium w/ sulfur SUSP 8 %-4 %</i>	NP	AL(Up to 20 yrs old)	<i>bacitracin zinc OINT</i>	P	
<i>sulfacetamide sodium-sulfur in urea vehicle EMUL 10 %-10 %-4 %</i>	NP	AL(Up to 20 yrs old)	<i>bacitracin-polymyxin b OINT</i>	P	
SULFACETAMIDE SODIUM-SULFUR SUSP	NP		CENTANY AT KIT	NP	
SUMADAN	NP	AL(Up to 20 yrs old)	CENTANY OINT	NP	
SUMADAN WASH LIQD (<i>sulfacetamide sodium w/ sulfur</i>)	NP	AL(Up to 20 yrs old)	<i>gentamicin sulfate (topical) CREA</i>	P	
SUMADAN XLT KIT	NP	AL(Up to 20 yrs old)	<i>gentamicin sulfate (topical) OINT</i>	P	
SUMAXIN CP	NP	AL(Up to 20 yrs old)	<i>mupirocin calcium (topical)</i>	NP	
SUMAXIN PADS	NP	AL(Up to 20 yrs old)	<i>mupirocin OINT</i>	P	
TAZAROTENE FOAM	NP	AL(Up to 20 yrs old)	<i>neomycin-bacitracin-polymyxin OINT</i>	NP	
<i>tretinoin microsphere</i>	NP	AL(Up to 20 yrs old)	<i>neomycin-bacitracin-polymyxin OINT</i>	P	
<i>tretinoin CREA 0.025 %, 0.05 %, 0.1 %</i>	P	AL(Up to 20 yrs old)	<i>neomycin-bacitracin-polymyxin OINT</i>	NP	
<i>tretinoin GEL 0.01 %, 0.025 %</i>	P	AL(Up to 20 yrs old)	<i>neomycin-bacitracin-polymyxin-pramoxine</i>	NP	
<i>tretinoin GEL 0.05 %</i>	NP	AL(Up to 20 yrs old)	<i>neomycin-polymyxin w/ pramoxine</i>	NP	
TWYNEO	NP		NEO-SYNALAR	NP	
WINLEVI	NP	AL(Up to 20 yrs old)	NEO-SYNALAR	NP	
ZIANA (<i>clindamycin phosphate-tretinoin</i>)	NP	AL(Up to 20 yrs old)	XEPI	NP	
ZMA CLEAR SUSP	NP		Antifungals - Topical		
Agents for External Genital and Perianal Warts			ALEVAZOL OINT	NP	
VEREGEN	NP		<i>butenafine hcl</i>	P	RX/OTC
Analgesics - Topical			<i>ciclopirox olamine CREA</i>	P	
<i>menthol (topical analgesic) AERO</i>	P		<i>ciclopirox olamine SUSP</i>	NP	
Antibiotics - Topical			<i>ciclopirox GEL</i>	NP	
<i>bacitracin (topical) OINT</i>	P		<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) CREA</i>	NP	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>clotrimazole (topical) SOLN</i>	NP	RX/OTC	<i>naftifine hcl GEL 2 %</i>	NP	
<i>clotrimazole w/ betamethasone CREA</i>	P		NAFTIN GEL (<i>naftifine hcl</i>)	NP	
<i>clotrimazole w/ betamethasone LOTN</i>	P		NAFTIN GEL	NP	
<i>econazole nitrate CREA</i>	P		<i>nystatin (topical) CREA</i>	P	
ERTACZO	NP		<i>nystatin (topical) OINT</i>	P	
EXTINA FOAM (<i>ketoconazole (topical)</i>)	NP		<i>nystatin (topical) POWD EX</i>	NP	
FUNGOID TINCTURE SOLN	NP		<i>nystatin (topical) POWD EX</i>	P	
JUBLIA	NP		<i>nystatin-triamcinolone CREA</i>	NP	
<i>ketoconazole (topical) CREA</i>	P		<i>nystatin-triamcinolone OINT</i>	P	
<i>ketoconazole (topical) FOAM</i>	NP		<i>oxiconazole nitrate CREA</i>	NP	
<i>ketoconazole (topical) SHAM 2 %</i>	P		OXISTAT LOTN	NP	
KETODAN	NP		<i>tavaborole</i>	NP	
LOPROX	NP		<i>terbinafine hcl (topical) CREA</i>	P	
LOPROX CREA (<i>ciclopirox olamine</i>)	NP		<i>terbinafine hcl (topical) CREA</i>	NP	
LOPROX SUSP (<i>ciclopirox olamine</i>)	NP		<i>tolnaftate AERP</i>	NP	
<i>luliconazole</i>	NP		<i>tolnaftate CREA</i>	P	
LUZU (<i>luliconazole</i>)	NP		<i>tolnaftate CREA</i>	NP	
<i>miconazole nitrate (topical) AERP</i>	NP		<i>tolnaftate POWD EX</i>	NP	
<i>miconazole nitrate (topical) CREA</i>	P		<i>tolnaftate SOLN</i>	NP	RX/OTC
<i>miconazole nitrate (topical) CREA</i>	NP		<i>undecylenic acid-zinc undecylenate OINT</i>	P	
<i>miconazole nitrate (topical) POWD EX</i>	NP		VOTRIZA-AL LOTN	NP	
MICONAZOLE NITRATE SOLN	P		VUSION (<i>miconazole-zinc oxide-white petrolatum</i>)	NP	
<i>miconazole-zinc oxide-white petrolatum</i>	NP		Anti-inflammatory Agents - Topical		
MICONI-AL SOLN	NP		<i>diclofenac epolamine PTCH EX</i>	NP	
<i>naftifine hcl CREA</i>	NP		<i>diclofenac sodium (topical) GEL EX</i>	NP	RX/OTC
			<i>diclofenac sodium (topical) GEL EX</i>	P	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>diclofenac sodium (topical) SOLN EX 2 %</i>	NP		COSENTYX SENSOREADY PEN SOAJ	NP	SP; PA
<i>diclofenac sodium (topical) SOLN EX 1.5 %</i>	P		COSENTYX UNOREADY SOAJ	NP	SP
PENNSAID SOLN EX 2 % (<i>diclofenac sodium (topical)</i>)	NP		COSENTYX SOLN	NP	SP
Antineoplastic or Premalignant Lesion Agents - Topical			COSENTYX SOSY	NP	SP; PA
<i>bexarotene (topical)</i>	P	SP	ILUMYA	NP	SP; PA
<i>diclofenac sodium (actinic keratoses) EX</i>	NP		<i>methoxsalen rapid PO</i>	NP	
<i>fluorouracil (topical) CREA</i>	P		SILIQ	NP	SP; PA
<i>fluorouracil (topical) SOLN</i>	P		SKYRIZI PEN SOAJ	NP	SP; PA
Antipruritics - Topical			SKYRIZI SOSY	NP	SP; PA
<i>camphor & menthol LOTN</i>	P		SORILUX FOAM	NP	
<i>doxepin hcl (antipruritic)</i>	P		SOTYKTU	NP	SP
Antipsoriatics			SPEVIGO SOLN	NP	SP
<i>acitretin PO</i>	P		SPEVIGO SOSY	NP	SP
BIMZELX SOAJ 160 MG/ML	NP	SP	STELARA SOSY	NP	SP; PA
BIMZELX SOAJ 320 MG/2ML	NP		TALTZ SOAJ	P	SP; PA
BIMZELX SOSY 320 MG/2ML	NP		TALTZ SOSY 80 MG/ML	P	SP; PA
BIMZELX SOSY 160 MG/ML	NP	SP	TALTZ SOSY 20 MG/0.25ML, 40 MG/0.5ML	P	SP
<i>calcipotriene CREA</i>	P		<i>tazarotene CREA</i>	NP	
CALCIPOTRIENE FOAM	NP		<i>tazarotene GEL</i>	NP	
<i>calcipotriene OINT</i>	P		TREMFYA SOAJ 200 MG/2ML	NP	SP
<i>calcipotriene SOLN</i>	P		TREMFYA SOAJ 100 MG/ML	NP	SP; PA
<i>calcitriol (topical)</i>	NP		TREMFYA SOLN	NP	SP
COSENTYX (300 MG DOSE) SOSY	NP	SP; PA	TREMFYA SOSY 100 MG/ML	NP	SP; PA
COSENTYX SENSOREADY (300 MG) SOAJ	NP	SP; PA	TREMFYA SOSY 200 MG/2ML	NP	SP
			VECTICAL (<i>calcitriol (topical)</i>)	NP	
			VTAMA	NP	
			Antiseborrheic Products		
			DERMAZINC CREAM CREA	P	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
DERMAZINC SPRAY LIQD	P		<i>silver sulfadiazine</i>	P	
DERMAZINC ZINC THERAPY SOAP BAR	P		Corticosteroids - Topical		
NUTRASEB CREA	P	RX/OTC	<i>alclometasone dipropionate CREA</i>	NP	
OVACE PLUS WASH GEL (<i>sulfacetamide sodium</i>)	NP		<i>alclometasone dipropionate OINT</i>	NP	
OVACE PLUS WASH LIQD (<i>sulfacetamide sodium</i>)	NP		<i>amcinonide CREA</i>	NP	
OVACE PLUS SHAM (<i>sulfacetamide sodium</i>)	NP		<i>betamethasone dipropionate (topical) CREA</i>	NP	
OVACE WASH LIQD (<i>sulfacetamide sodium</i>)	NP		<i>betamethasone dipropionate (topical) LOTN</i>	NP	
PROMISEB CREA	P	RX/OTC	<i>betamethasone dipropionate (topical) OINT</i>	NP	
<i>pyrithione zinc SHAM</i>	P		<i>betamethasone dipropionate augmented CREA</i>	NP	
SEBEX	P		<i>betamethasone dipropionate augmented GEL 0.05 %</i>	NP	
<i>selenium sulfide LOTN</i>	P		<i>betamethasone dipropionate augmented LOTN</i>	NP	
<i>selenium sulfide LOTN</i>	P		<i>betamethasone dipropionate augmented OINT</i>	NP	
<i>selenium sulfide SHAM 1 %</i>	P		<i>betamethasone valerate CREA</i>	NP	
<i>sulfacetamide sodium GEL</i>	NP		<i>betamethasone valerate FOAM</i>	NP	
<i>sulfacetamide sodium LIQD</i>	NP		<i>betamethasone valerate LOTN</i>	NP	
<i>sulfacetamide sodium SHAM 10 %</i>	NP		<i>betamethasone valerate OINT</i>	NP	
ZORYVE	NP		BRYHALI LOTN	NP	
Antivirals - Topical			<i>calcipotriene-betamethasone dipropionate OINT</i>	NP	
<i>acyclovir topical CREA</i>	NP		<i>calcipotriene-betamethasone dipropionate SUSP</i>	NP	
<i>acyclovir topical OINT</i>	P				
DENAVIR (<i>penciclovir</i>)	NP				
<i>docosanol</i>	P				
<i>penciclovir</i>	NP				
XERESE	NP				
ZOVIRAX CREA (<i>acyclovir topical</i>)	NP				
ZOVIRAX OINT (<i>acyclovir topical</i>)	NP				
Burn Products					

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CAPEX SHAM	NP		<i>desoximetasone OINT</i>	NP	
<i>clobetasol propionate emollient base 0.05 %</i>	NP		<i>diflorasone diacetate CREA</i>	NP	
<i>clobetasol propionate emulsion</i>	NP		<i>diflorasone diacetate OINT</i>	NP	
<i>clobetasol propionate CREA 0.05 %</i>	NP		DIPROLENE OINT (<i>betamethasone dipropionate augmented</i>)	NP	
<i>clobetasol propionate FOAM</i>	NP		DUOBRII	NP	
<i>clobetasol propionate GEL 0.05 %</i>	NP		ENSTILAR FOAM	NP	
<i>clobetasol propionate LIQD</i>	NP		EPIFOAM FOAM	P	
<i>clobetasol propionate LOTN</i>	NP		<i>fluocinolone acetonide CREA</i>	NP	
<i>clobetasol propionate OINT 0.05 %</i>	P		<i>fluocinolone acetonide OIL</i>	NP	
<i>clobetasol propionate SHAM</i>	NP		<i>fluocinolone acetonide OIL</i>	P	
<i>clobetasol propionate SOLN 0.05 %</i>	P		<i>fluocinolone acetonide OINT</i>	NP	
CLOBEX SPRAY LIQD (<i>clobetasol propionate</i>)	NP		<i>fluocinolone acetonide SOLN</i>	P	
CLOBEX SHAM (<i>clobetasol propionate</i>)	NP		<i>fluocinonide emulsified base</i>	NP	
<i>clocortolone pivalate</i>	NP		<i>fluocinonide CREA</i>	NP	
CLODAN	NP		<i>fluocinonide GEL</i>	NP	
CLODERM (<i>clocortolone pivalate</i>)	NP		<i>fluocinonide OINT</i>	P	
DERMA-SMOOTH/FS BODY OIL (<i>fluocinolone acetonide</i>)	NP		<i>fluocinonide SOLN</i>	NP	
DERMA-SMOOTH/FS SCALP OIL (<i>fluocinolone acetonide</i>)	NP		<i>flurandrenolide LOTN</i>	NP	
<i>desonide CREA</i>	NP		<i>fluticasone propionate CREA 0.05 %</i>	P	
<i>desonide LOTN</i>	NP		<i>fluticasone propionate LOTN</i>	NP	
<i>desonide OINT</i>	NP		<i>fluticasone propionate OINT</i>	P	
<i>desoximetasone CREA</i>	NP		<i>halcinonide CREA</i>	NP	
<i>desoximetasone GEL</i>	NP		<i>halobetasol propionate CREA</i>	NP	
<i>desoximetasone LIQD</i>	NP		<i>halobetasol propionate FOAM</i>	NP	
			<i>halobetasol propionate OINT</i>	NP	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
HALOG CREA (halcinonide)	NP		mometasone furoate OINT	P	
HALOG OINT	NP		mometasone furoate SOLN	P	
HALOG SOLN	NP		OLUX FOAM (clobetasol propionate)	NP	
hydrocortisone (topical) CREA	P	RX/OTC	PANDEL	NP	
hydrocortisone (topical) LOTN 2.5 %	P		prednicarbate OINT	NP	
hydrocortisone (topical) OINT 1 %, 2.5 %	P	RX/OTC	SYNALAR (CREAM)	NP	
hydrocortisone (topical) SOLN 2.5 %	NP		SYNALAR (OINTMENT)	NP	
hydrocortisone acetate (topical) OINT	P		SYNALAR TS	NP	
HYDROCORTISONE ACETATE CREA	NP		SYNALAR CREA (fluocinolone acetonide)	NP	
hydrocortisone butyrate hydrophilic lipo base	NP		SYNALAR OINT (fluocinolone acetonide)	NP	
hydrocortisone butyrate CREA	NP		SYNALAR SOLN (fluocinolone acetonide)	NP	
hydrocortisone butyrate LOTN	NP		TACLONEX OINT (calcipotriene- betamethasone dipropionate)	NP	
hydrocortisone butyrate OINT	NP		TACLONEX SUSP (calcipotriene- betamethasone dipropionate)	NP	
hydrocortisone butyrate SOLN	NP		TOPICORT SPRAY LIQD (desoximetasone)	NP	
HYDROCORTISONE COMPLETE KIT THPK	P		TOPICORT CREA (desoximetasone)	NP	
hydrocortisone valerate CREA	NP		TOPICORT GEL (desoximetasone)	NP	
hydrocortisone valerate OINT	NP		TOPICORT OINT (desoximetasone)	NP	
HYDROXYM GEL	P		TOVET	NP	
IMPEKLO LOTN	NP		triamcinolone acetonide (topical) AERS	NP	
KENALOG AERS (triamcinolone acetonide (topical))	NP		triamcinolone acetonide (topical) CREA	P	
LOCOID LIPOCREAM	NP		triamcinolone acetonide (topical) LOTN	P	
LOCOID LOTN (hydrocortisone butyrate)	NP		triamcinolone acetonide (topical) OINT 0.05 %	NP	
mometasone furoate CREA	P				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>triamcinolone acetonide (topical) OINT 0.025 %, 0.1 %, 0.5 %</i>	P		<i>imiquimod</i>	P	
ULTRAVATE LOTN	NP		<i>imiquimod 3.75 %</i>	NP	
VANOS CREA (<i>fluocinonide</i>)	NP		ZYCLARA (<i>imiquimod</i>)	NP	
Eczema Agents			ZYCLARA PUMP	NP	
ADBRY SOAJ	P	SP; PA	ZYCLARA PUMP (<i>imiquimod</i>)	NP	
ADBRY SOSY	P	SP; PA	Immunosuppressive Agents - Topical		
CIBINQO	NP	SP; PA	ELIDEL (<i>pimecrolimus</i>)	NP	QL(400 GM per 365 day(s) retail); PA
DUPIXENT SOAJ	NP	SP; PA	<i>pimecrolimus</i>	P	QL(400 GM per 365 day(s) retail); PA
DUPIXENT SOAJ	P	SP; PA	<i>tacrolimus (topical) OINT</i>	P	QL(400 GM per 365 day(s) retail); PA
DUPIXENT SOSY 100 MG/0.67ML, 300 MG/2ML	NP	SP; PA	Keratolytic/Antimitotic/Vesicant Agents		
DUPIXENT SOSY 200 MG/1.14ML, 300 MG/2ML	P	SP; PA	BETASAL SHAM	P	
EBGLYSS SOAJ	NP	SP	CVS PSORIASIS MEDICATED SHAM	P	
EBGLYSS SOSY	NP	SP	CVS THERAPEUTIC DANDRUFF SHAM	P	
OPZELURA	NP	QL(400 GM per 365 day(s) retail; 400 GM per 365 days mail); PA	DENOREX EX ST MEDICATED SHAM	P	
Emollient/Keratolytic Agents			DERMAREST PSORIASIS SHAM	P	
<i>urea CREA 20 %</i>	NP	RX/OTC	DHS SAL SHAM	P	
Emollients			DUOFILM SOLN	P	
<i>colloidal oatmeal PACK</i>	P		MG217 DANDRUFF SHAMPOO/COND SHAM	P	
<i>glycerin (topical)</i>	P		MG217 PSORIASIS THER SHAM/COND SHAM	P	
LACTIC ACID E	P		NEUTROGENA T/SAL SHAM	P	
LACTIC ACID LOTN	P		NIZORAL PSORIASIS SHAMPOO/COND SHAM	P	
Hair Growth Agents			P & S SHAM	P	
<i>bimatoprost (topical)</i>	NP		PODOCON-25 SOLN	P	
LATISSE (<i>bimatoprost (topical)</i>)	NP		<i>podofilox GEL</i>	P	
LITFULO	NP	SP	<i>podofilox SOLN</i>	P	
Immunomodulating Agents - Systemic			<i>salicylic acid LIQD 2 %</i>	NP	
NEMLUVIO	NP	SP			
Immunomodulating Agents - Topical					

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>salicylic acid LIQD 3 %, 17 %</i>	P		<i>lidocaine PTCH 5 %</i>	NP	
SELSUN BLUE DEEP CLEANSING SHAM	P		<i>lidocaine PTCH 4 %, 5 %</i>	P	
SELSUN BLUE NATURALS DRY SCALP SHAM	P		<i>lidocaine-transparent dressing 4 %</i>	P	
THERAPEUTIC DANDRUFF SHAM	P		LIDODERM PTCH (<i>lidocaine</i>)	NP	
THERAPEUTIC T+PLUS MAX ST SHAM	P		OUTGRO PAIN RELIEF LIQD	P	
Liniments			<i>pramoxine hcl LOTN</i>	P	
<i>liniments & rubs LOTN</i>	P		<i>pramoxine-calamine LOTN</i>	P	
<i>trolamine salicylate CREA</i>	P		<i>pramoxine-menthol CREA</i>	P	
Local Anesthetics - Topical			<i>pramoxine-zinc acetate</i>	P	
<i>benzocaine (topical) OINT</i>	P		QUTENZA	NP	
<i>benzocaine-triclosan</i>	P		QUTENZA (2 PATCH)	NP	
BURN RELIEF/LIDOCAINE/ALOE	P		QUTENZA (4 PATCH)	NP	
<i>capsaicin CREA 0.025 %, 0.075 %</i>	P		ZTLIDO PTCH	NP	
CVS AFTERSUN ALOE/LIDOCAINE GEL	P		Misc. Dermatological Products		
<i>dibucaine</i>	P		ALEVICYN ANTIPRURITIC SG GEL	P	RX/OTC
ITCH-X GEL	P		ALEVICYN ANTIPRURITIC GEL	P	RX/OTC
ITCH-X SOLN	P		HALUCORT GEL	P	RX/OTC
<i>lidocaine hcl CREA 3 %, 4 %</i>	P		LEVICYN GEL	P	RX/OTC
<i>lidocaine hcl GEL 0.5 %, 2 %</i>	P	RX/OTC	NONYX GEL	P	RX/OTC
<i>lidocaine hcl PRSY</i>	P		OC8 GEL	P	RX/OTC
<i>lidocaine AERO</i>	P		PROTEIN 29 HAIR GROOM GEL	P	RX/OTC
<i>lidocaine-benzalkonium LIQD 2.5 %-0.13 %</i>	P		SEBUDERM GEL	P	RX/OTC
<i>lidocaine CREA 4 %</i>	P		STRATA CTX GEL	P	RX/OTC
<i>lidocaine OINT 5 %</i>	NP		STRATA MARK GEL	P	RX/OTC
<i>lidocaine-prilocaine CREA</i>	P		STRATA XRT GEL	P	RX/OTC
<i>lidocaine-prilocaine KIT</i>	P		Misc. Topical		
			<i>benzoin compound TINC</i>	P	RX/OTC
			COLEMAN 100 MAX CONTINUOUS SPR AERO	P	
			COLEMAN 100 MAX INSECT REPEL LIQD	P	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
COLEMAN INSECT REPEL HIGH&DRY AERO	P		OFF FAMILYCARE CLEAN FEEL LIQD	P	
COLEMAN INSECT REPEL SPORTSMEN AERO	P		OFF FAMILYCARE TROPICAL FRESH LIQD	P	
CUTTER ALL FAMILY AERO	P		OFF FAMILYCARE UNSCENTED LIQD	P	
CUTTER ALL FAMILY LIQD	P		OFF SMOOTH & DRY AERO	P	
CUTTER BACKWOODS DRY AERO	P		RANGER READY REPELLENT LIQD	P	
CUTTER BACKWOODS AERO	P		REPEL 100 LIQD	P	
CUTTER BACKWOODS LIQD	P		REPEL FAMILY DRY AERO	P	
CUTTER DRY AERO	P		REPEL FAMILY AERO	P	
CUTTER SKINSATIONS AERO	P		REPEL HUNTERS FORMULA AERO	P	
CUTTER SKINSATIONS LIQD	P		REPEL SPORTSMEN DRY AERO	P	
CUTTER SPORT AERO	P		REPEL SPORTSMEN MAX AERO	P	
CUTTER AERO	P		REPEL SPORTSMEN MAX LIQD	P	
CVS INSECT REPELLENT AERO	P		REPEL SPORTSMEN AERO	P	
CVS TOTAL HOME INSECT REPEL AERO	P		REPEL TICK DEFENSE AERO	P	
MAXI DEET LIQD	P		SAWYER INSECT REPELLENT AERO	P	
NATRAPEL 12-HOUR TICK/INSECT AERO	P		SAWYER INSECT REPELLENT LIQD	P	
NATRAPEL LIQD	P		ULTRATHON INSECT REPELLENT 8 AERO	P	
OFF ACTIVE AERO	P		<i>zinc oxide (topical) OINT 20 %</i>	P	
OFF DEEP WOODS DRY AERO	P		Phosphodiesterase 4 (PDE4) Inhibitors - Topical		
OFF DEEP WOODS SPORTSMEN AERO	P		EUCRISA	P	QL(400 GM per 365 day(s) retail); ST
OFF DEEP WOODS SPORTSMEN LIQD	P		ZORYVE	NP	
OFF DEEP WOODS AERO	P		Podiatric Products		
OFF DEEP WOODS LIQD	P				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
AMLACTIN FOOT CREAM THERAPY CREA	P		ELIMITE CREA (permethrin)	NP	
AMLACTIN FOOT REPAIR CREA	P		ivermectin (pediculicide)	NP	
DR TEALS SHEA ENRICHED FOOT CREA	P		malathion	NP	
ELON HERBAL FOOT CREA	P		NATROBA (spinosad)	P	
EUCERIN ADVANCED REPAIR FOOT CREA	P		OVIDE (malathion)	NP	
GOLD BOND FOOT CREA	P		permethrin AERO	P	
PALMERS FOOT MAGIC SCRUB CREA	P		permethrin CREA	P	
UDDERLY SMOOTH FOOT CREA	P		permethrin LIQD EX	P	
Rosacea Agents			pyrethrins-piperonyl butoxide-permethrin-nit remover 4 %-0.33 %-0.5 %	P	
azelaic acid GEL	P		pyrethrins-piperonyl butoxide SHAM 4 %-0.33 %	P	
doxycycline (rosacea) PO	NP		SKLICE (ivermectin (pediculicide))	NP	
FINACEA GEL (azelaic acid)	NP		spinosad	NP	
ivermectin (rosacea)	NP		VANALICE GEL	NP	
METROCREAM CREA (metronidazole (topical))	NP		Tar Products		
metronidazole (topical) CREA	NP		BETA CARE BETATAR GEL SHAM	P	
metronidazole (topical) CREA	P		coal tar extract SHAM 0.5 %, 1 %	P	
metronidazole (topical) GEL	P		coal tar extract SHAM 0.5 %, 1 %	P	
metronidazole (topical) LOTN	P		coal tar extract SOLN	P	
NORITATE CREA	P		DHS TAR GEL SHAM (coal tar extract)	P	
ORACEA PO (doxycycline (rosacea))	NP		DHS TAR SHAM (coal tar extract)	P	
ROSADAN	P		X-SEB T PEARL SHAM	P	
SOOLANTRA (ivermectin (rosacea))	NP		X-SEB T PLUS SHAM	P	
Scabicides & Pediculicides			Wound Care Products		
crotamiton LOTN	NP		ACTIMARIS WOUND GEL	P	RX/OTC
			AMERIGEL WOUND DRESSING GEL	P	RX/OTC
			ARIDA GEL	P	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ATRAPRO HYDROGEL GEL	P	RX/OTC	SOLOSITE WOUND GEL GEL	P	RX/OTC
AZADROX GEL	P	RX/OTC	SOLOX GEL	P	RX/OTC
BASADROX GEL	P	RX/OTC	STIMULEN GEL	P	RX/OTC
CURAFIL WOUND DRESSING GEL	P	RX/OTC	STRATA GRT GEL	P	RX/OTC
CVS ANTI-MICROBIAL SILVER GEL	P	RX/OTC	TEGADERM HYDROGEL WOUND FILLER GEL	P	RX/OTC
CVS MANUKA HONEY WOUND GEL	P	RX/OTC	TRIDERGEL GEL	P	RX/OTC
DERMAGRAN HYDROGEL WOUND GEL	P	RX/OTC	WOUND GEL SPRAY GEL	P	RX/OTC
DERMAGRAN-B HYDROPHILIC GEL	P	RX/OTC	WOUND GEL GEL	P	RX/OTC
DERPIXA GEL	P	RX/OTC	WOUN'DRES GEL	P	RX/OTC
DYNAGEL GEL	P	RX/OTC	ZANABIN HYDROGEL GEL	P	RX/OTC
EXCEL-GEL GEL	P	RX/OTC	ZENPHOR WOUND GEL GEL	P	RX/OTC
HAPRODERM GEL	P	RX/OTC	DIAGNOSTIC PRODUCTS		
INTRASITE GEL APPLIPAK GEL	P	RX/OTC	Diagnostic Drugs		
KENDALL AMORPHOUS WOUND GEL	P	RX/OTC	GLUCAGON HCL (DIAGNOSTIC)	P	
KERAGEL GEL	P	RX/OTC	Diagnostic Tests		
KERAGELT GEL	P	RX/OTC	ALBUSTIX STRP	P	
L-MESITRAN SOFT WOUND GEL	P	RX/OTC	AZO TEST STRIPS STRP	P	
MEDIHONEY WOUND/BURN DRESSING GEL	P	RX/OTC	AZO TEST STRP	P	
NORMLGEL AG GEL	P	RX/OTC	CHEMSTRIP 10 MD	P	
NU-GEL GEL	P	RX/OTC	CHEMSTRIP 10/SG	P	
RADIAPLEXRX GEL	P	RX/OTC	CHEMSTRIP 2 GP	P	
RESTA SILVER GEL	P	RX/OTC	CHEMSTRIP 5 OB	P	
RESTORE HYDROGEL DRESSING GEL	P	RX/OTC	CHEMSTRIP 7	P	
REVITADERM WOUND CARE GEL	P	RX/OTC	CHEMSTRIP 9	P	
SILVERMED GEL	P	RX/OTC	CHEMSTRIP K STRP	P	
SILVRSTAT WOUND DRESSING GEL	P	RX/OTC	CHEMSTRIP MICRAL STRP	P	
			CHEMSTRIP UGK	P	
			CLINISTIX UTI TEST STRIPS STRP	P	
			CVS KETONE CARE	P	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FREESTYLE INSULINX TEST STRP	P	RX/OTC	HORMONE PROTECT CAPS PO	P	RX/OTC
FREESTYLE LITE TEST STRP	P	RX/OTC	LEPTIN MANAGER CAPS PO	P	RX/OTC
FREESTYLE PRECISION NEO TEST STRP	P	RX/OTC	MALE SUPPORT CAPS PO	P	RX/OTC
FREESTYLE TEST STRP	P	RX/OTC	METHIONINE-200 CAPS PO	P	RX/OTC
GNP URINARY TRACT TEST STRIPS STRP	P		<i>nutritional supplements CAPS PO</i>	P	RX/OTC
KETO-DIASTIX	P		PROSTATE 2.4 CAPS PO	P	RX/OTC
KETONE TEST STRP	P		PROTEOLIN CAPS PO	P	RX/OTC
KETOSTIX STRP	P		VITEYES TEAR SUPPORT CAPS PO	P	RX/OTC
MULTISTIX 10 SG	P		DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes		
PRECISION XTRA BLOOD GLUCOSE STRP	P	RX/OTC	Digestive Enzymes		
RA URINARY TRACT INFECTION STRP	P		BIO-ZYME TABS PO	P	
RELION KETONE TEST STRP	P		CREON CPEP PO	P	
DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS			CVS DAIRY RELIEF EX ST TABS PO	P	
Nutritional Supplements			DIGESTIVE ENZYMES TABS PO	P	
AMINOPMRMS CAPS PO	P	RX/OTC	EQL DIGESTIVE ENZYMES TABS PO	P	
ANTI-INFLAMMATORY ENZYME CAPS PO	P	RX/OTC	<i>lactase CHEW PO 9000 UNIT</i>	P	
ANTIOXIDANT FORMULA CAPS PO	P	RX/OTC	<i>lactase TABS PO 3000 UNIT, 9000 UNIT</i>	P	
ASILNASALRMS CAPS PO	P	RX/OTC	OMNIGEST EZ TABS PO	P	
BIO-IMMUNEX CAPS PO	P	RX/OTC	PANPLEX 2-PHASE TBEC	P	
BRAIN SUPPORT CAPS PO	P	RX/OTC	PARVENZYME DIGESTIVE ENZYME TABS PO	P	
CARDIO COMPLETE CAPS PO	P	RX/OTC	PERTZYE CPEP PO	NP	
CHRONOVISION CAPS PO	P	RX/OTC	SUPER ENZYMES TABS PO	P	
ESTROVEN WEIGHT MANAGEMENT CAPS PO	P	RX/OTC	VIOKACE TABS	NP	
HOMOCYSTEINE SUPPORT CAPS PO	P	RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits
ZENPEP CPEP PO 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 PO</i>	P	
<i>acetazolamide TABS PO</i>	P	
<i>dichlorphenamide PO</i>	NP	SP
KEVEYIS PO (<i>dichlorphenamide</i>)	NP	SP
<i>methazolamide TABS PO</i>	NP	
Diuretic Combinations		
<i>amiloride & hydrochlorothiazide PO</i>	P	
<i>spironolactone & hydrochlorothiazide PO</i>	P	
<i>triamterene & hydrochlorothiazide CAPS PO 25 MG-37.5 MG</i>	P	
<i>triamterene & hydrochlorothiazide TABS PO</i>	P	
Loop Diuretics		
<i>bumetanide TABS PO</i>	P	
EDECRIIN PO (<i>ethacrynic acid</i>)	NP	
<i>ethacrynic acid PO</i>	NP	
<i>furosemide SOLN PO 8 MG/ML, 10 MG/ML</i>	P	

Drug Name	Drug Tier	Requirements/ Limits
<i>furosemide TABS PO</i>	P	
LASIX TABS PO (<i>furosemide</i>)	NP	
<i>torsemide TABS PO</i>	P	
Potassium Sparing Diuretics		
ALDACTONE TABS PO (<i>spironolactone</i>)	NP	
<i>amiloride hcl TABS PO</i>	P	
CAROSPIR SUSP (<i>spironolactone</i>)	NP	
<i>spironolactone SUSP</i>	P	
<i>spironolactone TABS PO</i>	P	
<i>triamterene CAPS PO</i>	NP	
Thiazides and Thiazide-Like Diuretics		
<i>chlorthalidone PO 25 MG, 50 MG</i>	P	
DIURIL SUSP PO	P	
<i>hydrochlorothiazide CAPS PO</i>	P	
<i>hydrochlorothiazide TABS PO</i>	P	
<i>indapamide TABS PO 1.25 MG, 2.5 MG</i>	P	
<i>metolazone PO 10 MG</i>	P	
<i>metolazone PO 2.5 MG, 5 MG</i>	P	QL(1 EA daily)
THALITONE PO	NP	
ENDOCRINE AND METABOLIC AGENTS - MISC. - Drugs to Treat Bone Disease and Regulate Hormones		
Bone Density Regulators		
ACTONEL TABS PO 35 MG, 150 MG (<i>risedronate sodium</i>)	NP	
<i>alendronate sodium SOLN PO</i>	NP	
<i>alendronate sodium TABS PO 10 MG, 35 MG, 70 MG</i>	P	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ATELVIA TBEC PO (<i>risedronate sodium</i>)	NP		OMNITROPE SOLR SC	NP	SP; PA
BINOSTO TBEF PO	NP		SEROSTIM SC 4 MG, 5 MG, 6 MG	NP	SP; PA
<i>calcitonin (salmon) IJ</i>	P		SKYTROFA	NP	SP; PA
<i>calcitonin (salmon) NA</i>	P		SKYTROFA	P	SP; PA
EVENITY	NP	SP; PA	SOGROYA	NP	SP
FORTEO SOPN (<i>teriparatide</i>)	P	SP; PA	ZOMACTON SOLR SC	NP	SP; PA
FOSAMAX PLUS D PO	NP		Hormone Receptor Modulators		
FOSAMAX TABS PO 70 MG (<i>alendronate sodium</i>)	NP		EVISTA PO (<i>raloxifene hcl</i>)	NP	ST
<i>ibandronate sodium TABS PO</i>	P		<i>raloxifene hcl PO</i>	NP	
PROLIA SOSY	P	SP; PA	LHRH/GnRH Agonist Analog Pituitary Suppressants		
<i>risedronate sodium TABS PO</i>	NP		FENSOLVI (6 MONTH) SC	P	SP
<i>risedronate sodium TBEC PO</i>	NP		LUPRON DEPOT-PED (1-MONTH)	P	SP
<i>teriparatide SOPN</i>	NP	SP; PA	LUPRON DEPOT-PED (3-MONTH)	P	SP
TERIPARATIDE SOPN	NP	SP	LUPRON DEPOT-PED (6-MONTH) IM	P	SP
TYMLOS	NP	SP; PA	SUPPRELIN LA	P	SP
XGEVA SOLN	P	SP; PA	SYNAREL	P	SP
GnRH/LHRH Antagonists			TRIPTODUR	NP	SP
ORILISSA	P	SP; PA	Menopausal Symptoms Suppressants		
Growth Hormones			VEOZAH PO	NP	
GENOTROPIN MINIQUICK PRSY	P	SP; PA	Metabolic Modifiers		
GENOTROPIN CART SC	P	SP; PA	BUPHENYL POWD PO (<i>sodium phenylbutyrate</i>)	NP	SP
HUMATROPE CART IJ	NP	SP; PA	BUPHENYL TABS PO (<i>sodium phenylbutyrate</i>)	NP	SP
NGENLA	NP	SP	<i>calcitriol CAPS PO</i>	P	
NORDITROPIN FLEXPRO SOPN	P	SP; PA	<i>calcitriol SOLN PO</i>	P	
NUTROPIN AQ NUSPIN 10 SOPN	NP	SP; PA	CARBAGLU (<i>carglumic acid</i>)	NP	SP
NUTROPIN AQ NUSPIN 20 SOPN	NP	SP; PA	<i>carglumic acid</i>	P	SP
NUTROPIN AQ NUSPIN 5 SOPN	NP	SP; PA	<i>carglumic acid</i>	NP	SP
OMNITROPE SOCT	NP	SP; PA			

Drug Name	Drug Tier	Requirements/ Limits
<i>cinacalcet hcl PO</i>	P	SP
<i>levocarnitine (metabolic modifiers) SOLN PO 1 GM/10ML</i>	P	
<i>levocarnitine (metabolic modifiers) TABS PO</i>	P	
<i>nitisinone CAPS PO</i>	P	SP
OLPRUVA (2 GM DOSE) THPK	NP	SP
OLPRUVA (3 GM DOSE) THPK	NP	SP
OLPRUVA (4 GM DOSE) THPK	NP	SP
OLPRUVA (5 GM DOSE) THPK	NP	SP
OLPRUVA (6 GM DOSE) THPK	NP	SP
OLPRUVA (6.67 GM DOSE) THPK	NP	SP
<i>paricalcitol CAPS PO</i>	NP	
<i>paricalcitol SOLN</i>	NP	SP
PHEBURANE PLLT	P	
RAVICTI PO	NP	SP
RAYALDEE	NP	
SENSIPAR PO (<i>cinacalcet hcl</i>)	NP	SP
<i>sodium phenylbutyrate POWD PO</i>	P	SP
<i>sodium phenylbutyrate TABS PO</i>	P	SP
XPHOZAH	NP	SP
ZEMPLAR CAPS PO 1 MCG, 2 MCG (<i>paricalcitol</i>)	NP	
ZEMPLAR SOLN (<i>paricalcitol</i>)	NP	SP
Mineralocorticoid Receptor Antagonists		
KERENDIA PO	NP	
Natriuretic Peptides		
VOXZOGO	NP	SP

Drug Name	Drug Tier	Requirements/ Limits
Posterior Pituitary Hormones		
<i>desmopressin acetate spray</i>	P	
<i>desmopressin acetate spray refrigerated 0.01 %</i>	P	
<i>desmopressin acetate SOLN IJ</i>	P	SP
<i>desmopressin acetate TABS PO</i>	P	
NOCDURNA SUBL	NP	
Somatostatic Agents		
<i>lanreotide acetate</i>	P	SP
LANREOTIDE ACETATE	P	SP
<i>octreotide acetate KIT</i>	P	SP
<i>octreotide acetate SOLN</i>	P	SP
<i>octreotide acetate SOSY</i>	P	SP
SANDOSTATIN LAR DEPOT KIT 10 MG	P	SP
SOMATULINE DEPOT	P	SP
ESTROGENS - Hormone Replacement/Modifying Drugs		
Estrogen Combinations		
BIJUVA 1 MG-100 MG	NP	
<i>estradiol & norethindrone acetate TABS PO</i>	P	
MYFEMBREE	P	PA
<i>norethindrone acetate-ethinyl estradiol PO</i>	P	
ORIAHNN	NP	PA
PREMPRO PO	P	
Estrogens		
<i>estradiol PTWK</i>	P	
<i>estradiol TABS PO</i>	P	
MENEST PO 0.3 MG, 0.625 MG, 1.25 MG	P	
PREMARIN TABS PO	P	
FLUOROQUINOLONES - Drugs to Treat Bacterial		

Drug Name	Drug Tier	Requirements/ Limits
Infections		
Fluoroquinolones		
BAXDELA TABS	NP	
<i>ciprofloxacin hcl TABS PO 250 MG, 500 MG, 750 MG</i>	P	
<i>ciprofloxacin in d5w 400 MG/200ML</i>	P	
<i>ciprofloxacin SUSR PO</i>	NP	
CIPRO SUSR PO	NP	
CIPRO TABS PO 250 MG, 500 MG (<i>ciprofloxacin hcl</i>)	NP	
<i>levofloxacin SOLN PO</i>	NP	
<i>levofloxacin TABS PO 250 MG</i>	P	QL(1 EA daily)
<i>levofloxacin TABS PO 500 MG, 750 MG</i>	P	
<i>moxifloxacin hcl TABS PO</i>	NP	
<i>ofloxacin PO 300 MG, 400 MG</i>	NP	
GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs		
5-HT4 Receptor Agonists		
MOTEGRITY PO (<i>prucalopride succinate</i>)	NP	
Agents for Chronic Idiopathic Constipation (CIC)		
TRULANCE PO	P	
Antiflatulents		
<i>simethicone CAPS PO 125 MG</i>	P	
<i>simethicone CHEW PO</i>	P	
<i>simethicone CHEW PO</i>	P	
<i>simethicone LIQD PO</i>	P	
<i>simethicone SUSP PO 20 MG/0.3ML</i>	P	
Bile Acid Synthesis Disorder Agents		
CHOLBAM	NP	SP

Drug Name	Drug Tier	Requirements/ Limits
Farnesoid X Receptor (FXR) Agonists		
OICALIVA	NP	SP
Gallstone Solubilizing Agents		
CHENODAL PO	NP	SP
RELTONE CAPS PO	NP	
URSO FORTE TABS PO (<i>ursodiol</i>)	NP	
<i>ursodiol CAPS PO</i>	P	
<i>ursodiol TABS PO</i>	P	
Gastrointestinal Chloride Channel Activators		
AMITIZA PO (<i>lubiprostone</i>)	NP	
<i>lubiprostone PO</i>	P	
Gastrointestinal Stimulants		
<i>metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML</i>	P	
<i>metoclopramide hcl TABS PO</i>	P	
Hepatotropics		
REZDIFFRA	NP	SP
Inflammatory Bowel Agents		
APRISO CP24 (<i>mesalamine</i>)	P	
ASACOL HD TBEC PO (<i>mesalamine</i>)	NP	
AVSOLA	P	SP
AZULFIDINE EN-TABS TBEC PO (<i>sulfasalazine</i>)	NP	
AZULFIDINE TABS PO (<i>sulfasalazine</i>)	NP	
<i>balsalazide disodium CAPS PO</i>	P	
CANASA SUPP PR (<i>mesalamine</i>)	NP	
CIMZIA (2 SYRINGE) PSKT	NP	SP; PA
CIMZIA KIT	NP	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
CIMZIA-STARTER PSKT	NP	SP; PA
COLAZAL CAPS PO (balsalazide disodium)	NP	
DELZICOL CPDR PO (mesalamine)	P	
DIPENTUM PO	NP	
ENTYVIO PEN SOAJ	P	SP
ENTYVIO SOLR	P	SP
INFLECTRA SOLR	NP	SP
INFLIXIMAB	P	SP
LIALDA TBEC PO (mesalamine)	NP	
mesalamine w/ cleanser PR	NP	
mesalamine CP24	NP	
mesalamine CPCR PO	NP	
mesalamine CPDR PO	NP	
mesalamine ENEM PR	P	
mesalamine SUPP PR	P	
mesalamine TBEC PO 1.2 GM	P	
mesalamine TBEC PO 800 MG	NP	
OMVOH SOSY	NP	SP
PENTASA CPCR PO	P	
PENTASA CPCR PO (mesalamine)	P	
REMICADE	NP	SP; ST
RENFLEXIS	NP	SP
ROWASA PR (mesalamine w/ cleanser)	NP	
SFROWASA ENEM PR	NP	
SKYRIZI SOCT	NP	SP; PA
SKYRIZI SOLN	NP	SP; PA
STELARA 130 MG/26ML	NP	SP; PA
sulfasalazine TABS PO	P	
sulfasalazine TBEC PO	P	
VELSIPITY	NP	SP

Drug Name	Drug Tier	Requirements/ Limits
ZYMFENTRA (1 PEN) AJKT	NP	SP
ZYMFENTRA (2 PEN) AJKT	NP	SP
ZYMFENTRA (2 SYRINGE) PSKT	NP	SP
Intestinal Acidifiers		
<i>lactulose</i> (encephalopathy) PO	P	
Irritable Bowel Syndrome (IBS) Agents		
<i>alose tron hcl</i> PO	NP	
IBSRELA	NP	
LINZESS 145 MCG	P	QL(1 EA daily)
LINZESS 72 MCG, 290 MCG	P	
LOTROXON PO (alose tron hcl)	NP	
VIBERZI	NP	
Live Fecal Microbiota		
VOWST	NP	SP
Peripheral Opioid Receptor Antagonists		
MOVANTIK PO 12.5 MG	P	QL(1 EA daily)
MOVANTIK PO 25 MG	P	
RELISTOR TABS	NP	
SYMPROIC PO	NP	
Peroxisome Proliferator-Activated Receptor(PPAR) Agonists		
IQIRVO	NP	SP
LIVDELZI	NP	SP
Phosphate Binder Agents		
AURYXIA	NP	PA
<i>calcium acetate</i> (phosphate binder) CAPS PO	P	
<i>calcium acetate</i> (phosphate binder) TABS PO	NP	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FOSRENOL CHEW PO (lanthanum carbonate)	NP	PA	CARDURA XL 8 MG	NP	
FOSRENOL PACK	NP	PA	dutasteride PO	NP	
lanthanum carbonate CHEW PO	NP	PA	dutasteride-tamsulosin hcl PO	NP	
RENVELA PACK (sevelamer carbonate)	NP	PA	ENTADFI	NP	
RENVELA TABS PO (sevelamer carbonate)	NP	PA	finasteride PO	P	
sevelamer carbonate PACK	NP	PA	FLOMAX PO (tamsulosin hcl)	NP	
sevelamer carbonate TABS PO	P	PA	PROSCAR PO (finasteride)	NP	
sevelamer hcl PO	NP	PA	RAPAFLO PO 4 MG (silodosin)	NP	QL(1 EA daily)
VELPHORO	NP	PA	RAPAFLO PO 8 MG (silodosin)	NP	
GENERAL ANESTHETICS			silodosin PO 8 MG	NP	
Volatile Anesthetics			silodosin PO 4 MG	NP	QL(1 EA daily)
desflurane	P		tamsulosin hcl PO	P	
sevoflurane	P		Urinary Analgesics		
GENITOURINARY AGENTS - MISCELLANEOUS -			phenazopyridine hcl TABS PO 95 MG, 99.5 MG, 100 MG, 200 MG	P	
Miscellaneous Drugs to Treat Reproductive Organs and Urinary System			phenazopyridine hcl TABS PO 95 MG, 99.5 MG, 100 MG, 200 MG	P	
Alkalinizers			phenazopyridine hcl TABS PO 95 MG, 99.5 MG	NP	
potassium citrate (alkalinizer) TBCR PO	P		GOUT AGENTS - Drugs to Treat Gout		
sodium citrate & citric acid PO	P	RX/OTC	Gout Agent Combinations		
Genitourinary Irrigants			colchicine w/ probenecid PO	P	
acetic acid 0.25 %	P		Gout Agents		
RENACIDIN	P		allopurinol PO 100 MG, 300 MG	P	
Interstitial Cystitis Agents			allopurinol PO 200 MG	NP	
ELMIRON CAPS PO	P		colchicine CAPS	NP	
Prostatic Hypertrophy Agents			colchicine TABS PO	P	
alfuzosin hcl PO	P		COLCRYS TABS PO (colchicine)	NP	
AVODART PO (dutasteride)	NP				
CARDURA XL 4 MG	NP	QL(1 EA daily)			

Drug Name	Drug Tier	Requirements/ Limits
<i>febuxostat 80 MG</i>	P	
<i>febuxostat 40 MG</i>	P	QL(1 EA daily)
GLOPERBA SOLN PO	NP	
MITIGARE CAPS (<i>colchicine</i>)	NP	
ULORIC 80 MG (<i>febuxostat</i>)	NP	
ULORIC 40 MG (<i>febuxostat</i>)	NP	QL(1 EA daily)
ZYLOPRIM PO 100 MG (<i>allopurinol</i>)	NP	
Uricosurics		
<i>probenecid PO</i>	P	
HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders		
Antihemophilic Products		
ADVATE	NP	SP
ADYNOVATE	NP	SP
AFSTYLA 250 UNIT, 500 UNIT, 1000 UNIT, 1500 UNIT, 2000 UNIT, 2500 UNIT	P	SP
ALPHANATE SOLR	P	SP
ALPHANINE SD 500 UNIT, 1000 UNIT, 1500 UNIT	P	SP
ALPROLIX	P	SP
ALTUVIIIO 250 UNIT, 500 UNIT, 1000 UNIT, 2000 UNIT, 3000 UNIT, 4000 UNIT	NP	SP
BENEFIX KIT	P	SP
ELOCTATE	NP	SP
ESPEROCT	NP	SP
FEIBA	P	SP
HEMLIBRA	P	SP
HEMOFIL M SOLR 250 UNIT, 500 UNIT, 1000 UNIT, 1700 UNIT	P	SP

Drug Name	Drug Tier	Requirements/ Limits
HUMATE-P SOLR	P	SP
HYMPAVZI	NP	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 250 UNIT, 500 UNIT, 3000 UNIT	NP	SP
KOVALTRY	P	SP
NOVOEIGHT	P	SP
NOVOSEVEN RT	P	SP
NUWIQ KIT	P	SP
NUWIQ SOLR 1500 UNIT	NP	SP
NUWIQ SOLR 250 UNIT, 500 UNIT, 1000 UNIT, 2000 UNIT, 2500 UNIT, 3000 UNIT, 4000 UNIT	P	SP
OBIZUR	P	SP
PROFILNINE	P	SP
REBINYN	P	SP
REBINYN	NP	SP
RECOMBINATE SOLR	NP	SP
RIXUBIS SOLR	P	SP
SEVENFACT	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>)	NP	SP; PA
<i>icatibant acetate SOSY</i>	P	SP; PA
Complement Inhibitors		
BERINERT KIT	P	SP; PA
CINRYZE SOLR IV	P	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
HAEGARDA SOLR SC	P	SP; PA
RUCONEST	P	SP; PA
Hemataologic - Tyrosine Kinase Inhibitors		
TAVALISSE	NP	SP
Hematorheologic Agents		
<i>pentoxifylline PO</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		
<i>anagrelide hcl PO</i>	P	
<i>aspirin-dipyridamole PO</i>	P	
BRILINTA PO	P	
<i>cilostazol PO</i>	P	
<i>clopidogrel bisulfate PO</i>	P	
<i>dipyridamole PO</i>	P	
EFFIENT PO (<i>prasugrel hcl</i>)	NP	
PLAVIX PO 75 MG (<i>clopidogrel bisulfate</i>)	NP	
<i>prasugrel hcl PO</i>	P	
HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders		
Agents for Sickle Cell Disease		
ADAKVEO	NP	SP
DROXIA CAPS	P	
ENDARI (<i>glutamine sickle cell</i>)	NP	SP
<i>glutamine (sickle cell)</i>	NP	SP
SIKLOS TABS	NP	
Cobalamins		
B-12 DOTS TBDP PO	P	
B-12 TABS PO 2000 MCG	P	

Drug Name	Drug Tier	Requirements/ Limits
<i>cyanocobalamin SOLN IJ 1000 MCG/ML</i>	P	
<i>cyanocobalamin SUBL 2500 MCG</i>	P	
<i>cyanocobalamin TABS PO 500 MCG, 1000 MCG</i>	NP	
<i>cyanocobalamin TABS PO 50 MCG, 100 MCG, 250 MCG, 500 MCG, 1000 MCG</i>	P	
<i>cyanocobalamin TBCR PO 1000 MCG, 2000 MCG</i>	P	
<i>cyanocobalamin TBCR PO 1000 MCG</i>	NP	
Folic Acid/Folates		
FOLIC ACID CAPS PO	P	
<i>folic acid SOLN</i>	P	
<i>folic acid TABS PO</i>	P	
<i>folic acid TABS PO 400 MCG, 800 MCG</i>	NP	
Hematopoietic Growth Factors		
ALVAIZ	NP	SP
ARANESP (ALBUMIN FREE) SOLN	NP	SP; PA
ARANESP (ALBUMIN FREE) SOSY	NP	SP; PA
DOPTelet	NP	SP
EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	NP	SP; PA
FULPHILA	P	SP
FYLNETRA	NP	SP
GRANIX SOLN	NP	SP
GRANIX SOSY	NP	SP
LEUKINE SOLR IJ	NP	SP
MIRCERA	P	SP; PA
MULPLETA	NP	SP

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
NEULASTA ONPRO PSKT	NP	SP	<i>folic acid-vitamin b6-vitamin b12 TABS PO 10 MG-800 MCG-115 MCG</i>	P	
NEULASTA SOSY	NP	SP; ST	FOLTABS 800 TABS PO	P	
NEUPOGEN SOLN	P	SP; ST	HEMATINIC PLUS VIT/MINERALS TABS PO	P	
NEUPOGEN SOSY	P	SP; ST	HEMATINIC/FOLIC ACID PO	P	
NIVESTYM SOLN	NP	SP	HOMOCYSTEINE FORMULA TABS PO	P	
NIVESTYM SOSY	NP	SP	<i>iron polysaccharide complex-vit b12-folic acid CAPS PO</i>	P	RX/OTC
NPLATE	P	SP	<i>iron-vitamin c PO</i>	P	
NYVEPRIA	P	SP	<i>iron-vitamin c-vitamin b12-folic acid TABS PO</i>	P	RX/OTC
PROCRIT	NP	SP; PA	Iron		
PROCRIT	NP	SP; PA	<i>carbonyl iron SUSP PO</i>	P	
PROMACTA PACK	NP	SP	<i>carbonyl iron TABS PO</i>	P	
PROMACTA TABS PO	P	SP	<i>ferrous fumarate TABS PO 324 MG</i>	P	
RELEUKO SOLN 480 MCG/1.6ML	NP	SP	<i>ferrous gluconate TABS PO</i>	P	
RELEUKO SOSY	NP	SP	<i>ferrous gluconate TABS PO 240 MG</i>	NP	
RETACRIT	P	SP; PA	<i>ferrous sulfate dried TABS PO</i>	P	
RETACRIT	NP	SP; PA	<i>ferrous sulfate SOLN PO 220 MG/5ML, 300 MG/5ML</i>	P	
ROLVEDON	NP	SP	<i>ferrous sulfate SOLN PO 220 MG/5ML, 300 MG/5ML</i>	P	
STIMUFEND	NP	SP	<i>ferrous sulfate SOLN PO</i>	NP	
UDENYCA ONBODY SOSY	NP	SP	<i>ferrous sulfate TABS PO</i>	P	
UDENYCA SOAJ	NP	SP	<i>ferrous sulfate TABS PO</i>	NP	
UDENYCA SOSY	NP	SP	<i>ferrous sulfate TBEC PO 325 MG</i>	P	
ZARXIO	NP	SP	<i>ferrous sulfate TBEC PO 324 MG</i>	NP	
ZIEXTENZO	NP	SP	INFED	P	
Hematopoietic Mixtures					
ABATRON PO	P				
B COMPLEX-FOLIC ACID TABS PO	P				
<i>cyanocobalamin-methylcobalamin SUBL</i>	P				
<i>ferrous fumarate w/ b12-vit c-fa-ifc PO</i>	P				
<i>ferrous fumarate-fa-b complex-c-zn-mg-mn-cu TABS PO</i>	P				

Drug Name	Drug Tier	Requirements/ Limits
IRON CHEWS PEDIATRIC CHEW PO	P	
IRON TABS PO 90 MG	P	
<i>polysaccharide iron complex CAPS PO</i>	P	
PROFERRIN ES PO	P	
HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders		
Hemostatics - Systemic		
<i>aminocaproic acid TABS PO</i>	P	SP
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
Antihistamine Hypnotics		
<i>diphenhydramine hcl (sleep) CAPS PO 50 MG</i>	P	
<i>diphenhydramine hcl (sleep) TABS PO 25 MG</i>	P	
<i>diphenhydramine hcl (sleep) TABS PO 25 MG</i>	P	
<i>diphenhydramine- acetaminophen (sleep) TABS PO 500 MG-25 MG</i>	P	
<i>ibuprofen- diphenhydramine citrate PO</i>	NP	
Barbiturate Hypnotics		
<i>phenobarbital ELIX PO</i>	P	
<i>phenobarbital TABS PO</i>	P	
Hypnotics - Tricyclic Agents		
<i>doxepin hcl (sleep) PO</i>	NP	QL(1 EA daily)
Non-Barbiturate Hypnotics		
AMBIEN CR TBCR PO (<i>zolpidem tartrate</i>)	NP	QL(1 EA daily)
AMBIEN TABS PO (<i>zolpidem tartrate</i>)	NP	QL(1 EA daily)
DORAL PO (<i>quazepam</i>)	NP	
EDLUAR SUBL	NP	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>estazolam PO</i>	NP	QL(1 EA daily)
<i>eszopiclone PO</i>	NP	QL(1 EA daily)
<i>flurazepam hcl PO</i>	NP	QL(1 EA daily)
HALCION PO 0.25 MG (<i>triazolam</i>)	NP	QL(1 EA daily)
IGALMI FILM	NP	QL(1 EA daily)
LUNESTA PO (<i>eszopiclone</i>)	NP	QL(1 EA daily)
<i>quazepam PO</i>	NP	
RESTORIL PO (<i>temazepam</i>)	NP	QL(1 EA daily)
<i>temazepam PO 7.5 MG, 22.5 MG</i>	NP	QL(1 EA daily)
<i>temazepam PO 15 MG, 30 MG</i>	P	QL(1 EA daily)
<i>triazolam PO</i>	NP	QL(1 EA daily)
<i>zaleplon PO</i>	P	QL(1 EA daily)
ZOLPIDEM TARTRATE CAPS	NP	QL(1 EA daily)
<i>zolpidem tartrate SUBL</i>	NP	QL(1 EA daily)
<i>zolpidem tartrate TABS PO</i>	P	QL(1 EA daily)
<i>zolpidem tartrate TBCR PO</i>	NP	QL(1 EA daily)
Orexin Receptor Antagonists		
BELSOMRA	NP	QL(1 EA daily)
DAYVIGO	NP	QL(1 EA daily)
QUVIVIQ	NP	QL(1 EA daily)
Selective Melatonin Receptor Agonists		
HETLIOZ LQ SUSP	NP	QL(5 ML daily); SP
HETLIOZ CAPS (<i>tasimelteon</i>)	NP	QL(1 EA daily); SP
<i>ramelteon PO</i>	NP	QL(1 EA daily)
ROZEREM PO (<i>ramelteon</i>)	NP	QL(1 EA daily)
<i>tasimelteon CAPS</i>	NP	QL(1 EA daily); SP
LAXATIVES - Bowel Treatment Drugs		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Bulk Laxatives			<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR PO</i>	P	
<i>calcium polycarbophil TABS PO</i>	P		<i>peg 3350-potassium chloride-sod bicarbonate-sod chloride PO</i>	P	
<i>calcium polycarbophil TABS PO</i>	P		PLENVU PO	P	
EQUALACTIN CHEW PO	P		SENNALAX PLUS CAPS PO	P	
HYDROCIL PACK PO	P		<i>sennosides-docusate sodium TABS PO</i>	P	
KONSYL DAILY FIBER PACK PO 100 %	P		<i>sennosides-docusate sodium TABS PO</i>	NP	
KONSYL ORIGINAL DAILY FIBER PACK PO	P		<i>sennosides-docusate sodium TABS PO</i>	P	
METAMUCIL WAFR	P		SENOKOT S TABS PO (<i>sennosides-docusate sodium</i>)	P	
<i>methylcellulose (laxative) POWD PO</i>	P		<i>sodium sulfate-potassium sulfate-magnesium sulfate</i>	P	
<i>methylcellulose (laxative) TABS PO</i>	P		STOOL SOFTENER/LAXATIVE CAPS PO	P	
NATURAL FIBER LAXATIVE POWD PO	P		SUFLAVE	NP	
NUTRISOURCE FIBER PACK PO	P		SUPREP BOWEL PREP KIT (<i>sodium sulfate-potassium sulfate-magnesium sulfate</i>)	P	
NUTRISOURCE FIBER POWD PO	P		SUTAB PO	NP	
<i>psyllium CAPS PO 0.52 GM</i>	P		Laxatives - Miscellaneous		
<i>psyllium POWD PO 28.3 %, 30 %, 33 %, 48.57 %, 49 %, 58.6 %, 95 %, 100 %</i>	P		CEO-TWO PR	P	
Laxative Combinations			<i>glycerin (laxative) SUPP PR 1 GM, 1.2 GM, 2 GM, 2.1 GM, 80.7 %</i>	P	
CLENPIQ SOLN 12 GM/175ML-3.5 GM/175ML-10 MG/175ML	P		<i>lactulose SOLN PO</i>	P	
GOLYTELY SOLR PO (<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate</i>)	P		<i>polyethylene glycol 3350 PACK PO</i>	P	
MOVIPREP PO (<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid</i>)	P		<i>polyethylene glycol 3350 PACK PO</i>	NP	
<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid PO</i>	P		<i>polyethylene glycol 3350 POWD PO</i>	NP	
			<i>polyethylene glycol 3350 POWD PO</i>	P	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>polyethylene glycol 3350 POWD PO</i>	P		<i>bisacodyl TBEC PO</i>	P	
Lubricant Laxatives			<i>castor oil OIL PO 100 %</i>	P	
FLEET OIL ENEM PR (<i>mineral oil</i>)	P		FLEET BISACODYL ENEM	P	
<i>mineral oil ENEM PR</i>	P		SENNA SYRP	P	
<i>mineral oil ENEM PR</i>	P		<i>sennosides CAPS PO</i>	P	
<i>mineral oil OIL PO</i>	P	RX/OTC	<i>sennosides CHEW PO</i>	P	
<i>mineral oil OIL PO</i>	P	RX/OTC	<i>sennosides LIQD PO</i>	P	
Saline Laxatives			<i>sennosides SYRP PO 8.8 MG/5ML</i>	P	
FLEET ENEMA ENEM PR (<i>sodium phosphates</i>)	P		<i>sennosides SYRP PO 8.8 MG/5ML</i>	P	
FLEET SALINE ENEMA ENEM PR (<i>sodium phosphates</i>)	P		<i>sennosides TABS PO 8.6 MG, 15 MG, 17.2 MG, 25 MG</i>	P	
<i>magnesium citrate PO 1.745 GM/30ML</i>	NP		<i>sennosides TABS PO 8.6 MG</i>	NP	
<i>magnesium citrate PO 1.745 GM/30ML</i>	P		<i>sennosides TABS PO 8.6 MG, 15 MG, 17.2 MG, 25 MG</i>	P	
<i>magnesium hydroxide SUSP PO 2400 MG/30ML</i>	NP		SENOKOT TABS PO (<i>sennosides</i>)	P	
<i>magnesium hydroxide SUSP PO 7.75 %, 400 MG/5ML, 1200 MG/15ML, 2400 MG/30ML</i>	P		Surfactant Laxatives		
<i>magnesium hydroxide SUSP PO 7.75 %, 400 MG/5ML, 1200 MG/15ML, 2400 MG/30ML</i>	P		COLACE CLEAR CAPS PO (<i>docusate sodium</i>)	P	
<i>magnesium sulfate (laxative) GRAN PO</i>	P		COLACE CAPS PO 100 MG (<i>docusate sodium</i>)	P	
PHILLIPS MILK OF MAGNESIA CHEW PO	P		<i>docusate calcium PO</i>	P	
<i>sodium phosphates ENEM PR</i>	P		<i>docusate sodium CAPS PO</i>	P	
Stimulant Laxatives			<i>docusate sodium CAPS PO</i>	P	
<i>bisacodyl SUPP PR</i>	P		<i>docusate sodium CAPS PO 50 MG, 100 MG</i>	NP	
<i>bisacodyl SUPP PR</i>	NP		<i>docusate sodium ENEM PR 283 MG/5ML</i>	P	
<i>bisacodyl SUPP PR</i>	P		<i>docusate sodium LIQD PO 50 MG/5ML, 100 MG/10ML</i>	P	
<i>bisacodyl TBEC PO</i>	P		DOCUSATE SODIUM SYRP PO	P	

Drug Name	Drug Tier	Requirements/ Limits
<i>docusate sodium TABS PO</i>	P	
PEDIA-LAX LIQD PO	P	
LOCAL ANESTHETICS-Parenteral - Drugs for Numbing		
Local Anesthetics - Amides		
<i>lidocaine hcl (local anesth.) SOLN 0.5 %, 1 %, 2 %, 4 %</i>	P	
LIDOCAINE HCL SOLN	P	
MACROLIDES - Drugs to Treat Bacterial Infections		
Azithromycin		
<i>azithromycin PACK PO</i>	P	
<i>azithromycin SUSR PO</i>	P	
<i>azithromycin TABS PO</i>	P	
ZITHROMAX TRI-PAK TABS PO (<i>azithromycin</i>)	NP	
ZITHROMAX Z-PAK TABS PO (<i>azithromycin</i>)	NP	
ZITHROMAX PACK PO	NP	
ZITHROMAX SUSR PO (<i>azithromycin</i>)	NP	
ZITHROMAX TABS PO 250 MG, 500 MG (<i>azithromycin</i>)	NP	
Clarithromycin		
<i>clarithromycin SUSR PO</i>	NP	
<i>clarithromycin TABS PO</i>	P	
<i>clarithromycin TB24 PO</i>	NP	
Erythromycins		
E.E.S. GRANULES SUSR PO (<i>erythromycin ethylsuccinate</i>)	NP	
ERYPED 200 SUSR PO (<i>erythromycin ethylsuccinate</i>)	NP	
ERYPED 400 SUSR PO (<i>erythromycin ethylsuccinate</i>)	NP	

Drug Name	Drug Tier	Requirements/ Limits
<i>erythromycin base CPEP PO</i>	NP	
<i>erythromycin base TABS PO</i>	NP	
<i>erythromycin base TBEC PO</i>	NP	
<i>erythromycin ethylsuccinate SUSR PO</i>	P	
<i>erythromycin ethylsuccinate TABS PO</i>	NP	
<i>erythromycin stearate TABS PO 250 MG</i>	NP	
Fidaxomicin		
DIFICID SUSR	NP	ST
DIFICID TABS	NP	ST
MEDICAL DEVICES AND SUPPLIES		
Diabetic Supplies		
1ST TIER UNILET COMFORTOUCH	P	RX/OTC
ACCU-CHEK FASTCLIX LANCETS	P	RX/OTC
ACCU-CHEK SAFE-T PRO LANCETS	P	RX/OTC
ACCU-CHEK SOFTCLIX LANCETS	P	RX/OTC
ACTI-LANCE 28G	P	RX/OTC
ACTI-LANCE LITE LANCETS 28G	P	RX/OTC
ACTI-LANCE SPECIAL LANCETS 17G	P	RX/OTC
ACTI-LANCE UNIVERSAL 23G	P	RX/OTC
ADJUSTABLE LANCING DEVICE MISC	P	
ADVANCED MOBILE LANCET	P	RX/OTC
ADVOCATE LANCETS	P	RX/OTC
ADVOCATE LANCETS 30G	P	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ADVOCATE LANCING DEVICE MISC	P		AUTO-LANCET MINI MISC	P	
ADVOCATE RAPID-SAFE LANCING MISC	P		AUTO-LANCET MISC	P	
ADVOCATE SAFETY LANCETS	P	RX/OTC	AUTOLET LANCING DEVICE MISC	P	
ADVOCATE SAFETY LANCETS 26G	P	RX/OTC	AUTOLET LANCING DEVICE MISC	P	
AGAMATRIX ULTRA-THIN LANCETS	P	RX/OTC	AUTOLET MINI MISC	P	
AIMSCO TWIST LANCETS 32G	P	RX/OTC	AUTOLET PLUS MISC	P	
AIMSCO TWIST LANCETS 33G	P	RX/OTC	BD LANCET ULTRAFINE 30G	P	RX/OTC
AQUALANCE LANCETS 30G	P	RX/OTC	BD LANCET ULTRAFINE 33G	P	RX/OTC
ASSURE COMFORT LANCETS 28G	P	RX/OTC	BD MICROTAINER LANCETS	P	RX/OTC
ASSURE HAEMOLANCE PLUS HIGH	P	RX/OTC	CARDIOMOM LANCING DEVICE MISC	P	
ASSURE HAEMOLANCE PLUS LOW	P	RX/OTC	CAREONE ADVANCED LANCING DEV MISC	P	
ASSURE HAEMOLANCE PLUS MICRO	P	RX/OTC	CAREONE LANCET SUPER THIN 30G	P	RX/OTC
ASSURE HAEMOLANCE PLUS NORMAL	P	RX/OTC	CAREONE LANCET THIN 23G	P	RX/OTC
ASSURE HAEMOLANCE PLUS PED	P	RX/OTC	CARESENS LANCETS	P	RX/OTC
ASSURE LANCE LANCETS	P	RX/OTC	CARESENS LANCETS 30G	P	RX/OTC
ASSURE LANCE LANCETS 21G	P	RX/OTC	CARETOUCH LANCING/EJECTOR MISC	P	
ASSURE LANCE PLUS SAFETY 25G	P	RX/OTC	CARETOUCH SAFETY LANCETS	P	RX/OTC
ASSURE LANCE PLUS SAFETY 30G	P	RX/OTC	CARETOUCH SAFETY LANCETS 26G	P	RX/OTC
ASSURE LANCE SAFETY LANCET 28G	P	RX/OTC	CARETOUCH TWIST LANCETS 28G	P	RX/OTC
AURORA LANCET SUPER THIN 30G	P	RX/OTC	CARETOUCH TWIST LANCETS 30G	P	RX/OTC
AURORA LANCET THIN 23G	P	RX/OTC	CARETOUCH TWIST LANCETS 33G	P	RX/OTC
			CARETOUCH TWIST MC LANCETS 30G	P	RX/OTC
			CHOSEN LANCETS 30G	P	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CHOSEN LANCING DEVICE MISC	P		CVS ULTRA THIN LANCETS	P	RX/OTC
CHOSEN SAFETY LANCETS 28G	P	RX/OTC	DEXCOM G6 RECEIVER	P	
CLEANLET LANCETS 28G	P	RX/OTC	DEXCOM G6 SENSOR	P	
CLEVER CHEK LANCETS	P	RX/OTC	DEXCOM G6 TRANSMITTER	P	
CLEVER CHOICE COMFORT EZ	P	RX/OTC	DEXCOM G7 RECEIVER	P	
CLEVER CHOICE LANCETS 21G	P	RX/OTC	DEXCOM G7 SENSOR	P	
CLEVER CHOICE LANCETS 23G	P	RX/OTC	DIATHRIVE LANCET ULTRA THIN 30	P	RX/OTC
CLEVER CHOICE LANCETS 28G	P	RX/OTC	DIATHRIVE LANCETS	P	RX/OTC
COAGUCHEK LANCETS	P	RX/OTC	DIATHRIVE LANCING DEVICE MISC	P	
COMFORT ASSURED LANCETS 28G	P	RX/OTC	DROPLET GENTEEL LANCING DEVICE MISC	P	
COMFORT ASSURED LANCETS 33G	P	RX/OTC	DROPLET LANCETS ULTRA THIN 30G	P	RX/OTC
COMFORT LANCETS	P	RX/OTC	DROPLET LANCING DEVICE MISC	P	
COMFORT TOUCH LANCETS 31G	P	RX/OTC	DROPLET PERSONAL LANCETS 30G	P	RX/OTC
COMFORT TOUCH PLUS LANCETS 28G	P	RX/OTC	DRUG MART LANCETS THIN 26G	P	RX/OTC
COMFORT TOUCH PLUS LANCETS 30G	P	RX/OTC	DRUG MART LANCING DEVICE MISC	P	
COMFORT TOUCH TWIST LANCET 30G	P	RX/OTC	DRUG MART ON-THE-GO LANCET 30G	P	RX/OTC
CVS LANCETS 21G	P	RX/OTC	DRUG MART UNILET LANCETS 28G	P	RX/OTC
CVS LANCETS MICRO THIN 33G	P	RX/OTC	DRUG MART UNILET LANCETS 30G	P	RX/OTC
CVS LANCETS ORIGINAL	P	RX/OTC	DRUG MART UNILET LANCETS 33G	P	RX/OTC
CVS LANCETS THIN 26G	P	RX/OTC	EASY COMFORT LANCETS	P	RX/OTC
CVS LANCETS ULTRA THIN 30G	P	RX/OTC	EASY COMFORT LANCETS TWIST TOP	P	RX/OTC
CVS LANCETS ULTRA-THIN 30G	P	RX/OTC	EASY MINI EJECT LANCING DEVICE MISC	P	
CVS LANCING DEVICE MISC	P		EASY MINI LANCING DEVICE MISC	P	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
EASY TOUCH LANCETS 21G	P	RX/OTC	EQL SUPER THIN LANCETS 30G	P	RX/OTC
EASY TOUCH LANCETS 23G	P	RX/OTC	EQL THIN LANCETS 26G	P	RX/OTC
EASY TOUCH LANCETS 26G	P	RX/OTC	E-Z JECT LANCET MICRO-THIN 33G	P	RX/OTC
EASY TOUCH LANCETS 28G	P	RX/OTC	E-Z JECT LANCET SUPER THIN 30G	P	RX/OTC
EASY TOUCH LANCETS 28G/TWIST	P	RX/OTC	E-Z JECT LANCETS	P	RX/OTC
EASY TOUCH LANCETS 30G	P	RX/OTC	E-Z JECT LANCETS 21G	P	RX/OTC
EASY TOUCH LANCETS 30G/TWIST	P	RX/OTC	E-Z JECT LANCETS THIN 26G	P	RX/OTC
EASY TOUCH LANCETS 32G	P	RX/OTC	EZ-LETS LANCETS 21G	P	RX/OTC
EASY TOUCH LANCETS 32G/TWIST	P	RX/OTC	EZ-LETS LANCETS 26G	P	RX/OTC
EASY TOUCH LANCETS 33G/TWIST	P	RX/OTC	EZ-LETS LANCETS 28G	P	RX/OTC
EASY TOUCH LANCING DEVICE MISC	P		EZ-LETS LANCETS 30G	P	RX/OTC
EASY TOUCH SAFETY LANCETS 21G	P	RX/OTC	FIFTY50 SAFETY SEAL LANCETS	P	RX/OTC
EASY TOUCH SAFETY LANCETS 23G	P	RX/OTC	FIFTY50 UNILET LANCETS 33G	P	RX/OTC
EASY TOUCH SAFETY LANCETS 26G	P	RX/OTC	FINE 30	P	RX/OTC
EASY TOUCH SAFETY LANCETS 28G	P	RX/OTC	FINGERSTIX LANCETS	P	RX/OTC
EMBRACE LANCETS ULTRA THIN 30G	P	RX/OTC	FORA LANCETS	P	RX/OTC
EMBRACE LANCING DEVICE/EJECTOR MISC	P		FORA LANCING DEVICE MISC	P	
EMBRACE PRESSURE ACTIVATED 21G	P	RX/OTC	FREDS PHARMACY AUTOLET LANCING MISC	P	
EMBRACE PRESSURE ACTIVATED 28G	P	RX/OTC	FREDS PHARMACY UNILET LANC 28G	P	RX/OTC
EQL COLOR LANCETS 21G	P	RX/OTC	FREDS PHARMACY UNILET LANC 30G	P	RX/OTC
EQL COLOR LANCETS MICRO 33G	P	RX/OTC	FREESTYLE FREEDOM LITE KIT	P	RX/OTC
			FREESTYLE LANCETS	P	RX/OTC
			FREESTYLE LIBRE 14 DAY READER	P	
			FREESTYLE LIBRE 14 DAY SENSOR	P	
			FREESTYLE LIBRE 2 PLUS SENSOR	P	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FREESTYLE LIBRE 2 READER	P		GLUCOCOM LANCETS 33G	P	RX/OTC
FREESTYLE LIBRE 2 SENSOR	P		GNP LANCETS 21G	P	RX/OTC
FREESTYLE LIBRE 3 PLUS SENSOR	P		GNP LANCETS THIN 26G	P	RX/OTC
FREESTYLE LIBRE 3 READER	P		GNP LANCING SYSTEM DEVICE MISC	P	
FREESTYLE LIBRE 3 SENSOR	P		GNP STERILE LANCETS 28G	P	RX/OTC
FREESTYLE LITE KIT	P	RX/OTC	GNP STERILE LANCETS 30G	P	RX/OTC
FREESTYLE PRECISION NEO SYSTEM KIT	P	RX/OTC	GNP STERILE LANCETS 33G	P	RX/OTC
FREESTYLE UNISTICK II LANCETS	P	RX/OTC	GOJJI LANCING DEVICE/CLEAR CAP MISC	P	
GENTEEL BUTTERFLY TOUCH LANCET	P	RX/OTC	GOJJI STERILE LANCETS	P	RX/OTC
GENTEEL PLUS LANCING (BLACK) MISC	P		GOODSENSE COLOR LANCETS 33G	P	RX/OTC
GENTEEL PLUS LANCING (PURPLE) MISC	P		GOODSENSE LANCETS 26G UNIV	P	RX/OTC
GENTEEL PLUS LANCING (WHITE) MISC	P		GOODSENSE LANCETS 30G	P	RX/OTC
GENTEEL PLUS LANCING DEV(BLUE) MISC	P		GOODSENSE LANCETS 30G UNIV	P	RX/OTC
GENTEEL PLUS LANCING DEV(PINK) MISC	P		GOODSENSE LANCETS 33G	P	RX/OTC
GENTLE-LET GP LANCETS	P	RX/OTC	GOODSENSE LANCETS 33G UNIV	P	RX/OTC
GENTLE-LET LANCETS	P	RX/OTC	GOODSENSE LANCING DEVICE MISC	P	
GLOBAL INJECT EASE LANCETS 28G	P	RX/OTC	HAEMOLANCE	P	RX/OTC
GLOBAL INJECT EASE LANCETS 30G	P	RX/OTC	HAEMOLANCE LOW FLOW LANCETS	P	RX/OTC
GLOBAL LANCING DEVICE MISC	P		HAEMOLANCE PLUS	P	RX/OTC
GLUCOCOM LANCETS 28G	P	RX/OTC	HAEMOLANCE PLUS HIGH FLOW	P	RX/OTC
GLUCOCOM LANCETS 30G	P	RX/OTC	HAEMOLANCE PLUS LOW FLOW	P	RX/OTC
			HAEMOLANCE PLUS MAX FLOW	P	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
HAEMOLANCE PLUS PEDIATRIC FLOW	P	RX/OTC	KROGER LANCING DEVICE MISC	P	
HEALTH CARE LANCING DEVICE MISC	P		LANCET DEVICE WITH EJECTOR MISC	P	
HEALTHY ACCENTS LANCING DEVICE MISC	P		LANCET DEVICE MISC	P	
HEALTHY ACCENTS UNILET LANCETS	P	RX/OTC	LANCETS	P	RX/OTC
H-E-B INCONTROL ADV LANCING MISC	P		LANCETS 28G THIN	P	RX/OTC
H-E-B INCONTROL LANCETS 28G	P	RX/OTC	LANCETS 30G	P	RX/OTC
H-E-B INCONTROL LANCETS 30G	P	RX/OTC	LANCETS 33G	P	RX/OTC
H-E-B INCONTROL LANCETS 33G	P	RX/OTC	LANCETS MICRO THIN 33G	P	RX/OTC
HY-VEE LANCETS	P	RX/OTC	LANCETS SUPER THIN	P	RX/OTC
HY-VEE THIN LANCETS	P	RX/OTC	LANCETS SUPER THIN 28G	P	RX/OTC
IHEALTH LANCING DEVICE MISC	P		LANCETS THIN	P	RX/OTC
IN TOUCH LANCING DEVICE MISC	P		LANCETS ULTRA THIN	P	RX/OTC
IN TOUCH STERILE LANCETS 30G	P	RX/OTC	LANCETS ULTRA THIN 30G	P	RX/OTC
KINNEY LANCETS	P	RX/OTC	LANCING DEVICE MISC	P	
KINNEY THIN LANCETS	P	RX/OTC	LANZO MISC	P	
KROGER AUTOLET LANCING DEVICE MISC	P		LEADER ADVANCED LANCING DEVICE MISC	P	
KROGER HEALTHPRO LANCET 26G	P	RX/OTC	LIBERTY MEDICAL LANCETS	P	RX/OTC
KROGER LANCETS	P	RX/OTC	LIBERTY MINI LANCING DEVICE MISC	P	
KROGER LANCETS 21G	P	RX/OTC	LIFESCAN UNISTIK 2	P	RX/OTC
KROGER LANCETS MICRO THIN 33G	P	RX/OTC	LIFESCAN UNISTIK II LANCETS	P	RX/OTC
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	P	RX/OTC
KROGER LANCETS ULTRATHIN 30G	P	RX/OTC	LIVE BETTER ADV LANCING DEVICE MISC	P	
			LIVE BETTER LANCET SUPER THIN	P	RX/OTC
			LIVE BETTER LANCET ULTRA THIN	P	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
LONGS LANCETS STANDARD	P	RX/OTC	MINI LANCING DEVICE MISC	P	
LONGS LANCETS THIN	P	RX/OTC	MM LANCING DEVICE MISC	P	
LONGS LANCETS ULTRA THIN	P	RX/OTC	MM TWIST LANCETS	P	RX/OTC
MEDICHOICE SAFETY LANCET	P	RX/OTC	MONOLET LANCETS	P	RX/OTC
MEDICHOICE SAFETY LANCET EXTRA	P	RX/OTC	MONOLET OPD LANCETS	P	RX/OTC
MEDICHOICE SAFETY LANCET NORM	P	RX/OTC	MONOLETTOR SAFETY LANCETS	P	RX/OTC
MEDLANCE EXTRA 21G	P	RX/OTC	MPD SAFETY LANCET 21G	P	RX/OTC
MEDLANCE LITE 25G	P	RX/OTC	MPD SAFETY LANCET 23G	P	RX/OTC
MEDLANCE PLUS EXTRA 21G	P	RX/OTC	MPD SAFETY LANCET 28G	P	RX/OTC
MEDLANCE PLUS LANCETS	P	RX/OTC	MPD SAFETY LANCET 30G	P	RX/OTC
MEDLANCE PLUS LITE 25G	P	RX/OTC	MULTI-LANCET DEVICE MISC	P	
MEDLANCE PLUS SPECIAL 0.8MM	P	RX/OTC	MYGLUCOHEALTH LANCETS 30G	P	RX/OTC
MEDLANCE PLUS SUPERLITE 30G	P	RX/OTC	NOVA SAFETY LANCETS 23G	P	RX/OTC
MEDLANCE PLUS UNIVERSAL 21G	P	RX/OTC	NOVA SAFETY LANCETS 28G	P	RX/OTC
MEDLANCE UNIVERSAL 21G	P	RX/OTC	NOVA SUREFLEX LANCETS	P	RX/OTC
MEIJER LANCETS	P	RX/OTC	NOVA SUREFLEX LANCING DEVICE MISC	P	
MEIJER LANCETS THIN	P	RX/OTC	OMNIPOD 5 DEXG7G6 INTRO GEN 5 KIT	P	PA
MEIJER LANCETS UNIVERSAL 21G	P	RX/OTC	OMNIPOD 5 DEXG7G6 PODS GEN 5 MISC	P	PA
MEIJER LANCETS UNIVERSAL 30G	P	RX/OTC	OMNIPOD 5 LIBRE2 PLUS G6 PODS MISC	P	PA
MEIJER LANCETS UNIVERSAL 33G	P	RX/OTC	OMNIPOD 5 LIBRE2 PLUS G6 KIT	P	PA
MEIJER SUPER THIN LANCETS	P	RX/OTC	OMNIPOD DASH PODS (GEN 4) MISC	P	PA
MICROLET LANCETS	P	RX/OTC	OMNIPOD GO KIT	P	PA
MICROLET NEXT LANCING DEVICE MISC	P				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ONETOUCH CLUB LANCETS FINE PT	P	RX/OTC	PRO COMFORT LANCETS 30G	P	RX/OTC
ONETOUCH DELICA LANCETS 30G	P	RX/OTC	PRO COMFORT LANCETS 31G	P	RX/OTC
ONETOUCH DELICA LANCETS 33G	P	RX/OTC	PRO COMFORT SAFETY LANCETS 30G	P	RX/OTC
ONETOUCH DELICA LANCING DEV MISC	P		PRODIGY LANCETS 28G	P	RX/OTC
ONETOUCH DELICA PLUS LANCET30G	P	RX/OTC	PRODIGY LANCING DEVICE MISC	P	
ONETOUCH DELICA PLUS LANCET33G	P	RX/OTC	PRODIGY SAFETY LANCETS 26G	P	RX/OTC
ONETOUCH DELICA PLUS LANCING MISC	P		PRODIGY TWIST TOP LANCETS 28G	P	RX/OTC
ONETOUCH DELICA SAFETY LANCING	P	RX/OTC	PSS SELECT GP LANCETS	P	RX/OTC
ONETOUCH FINEPOINT LANCETS	P	RX/OTC	PSS SELECT SAFETY LANCETS	P	RX/OTC
ONETOUCH ULTRASOFT 2 LANCETS	P	RX/OTC	PURE COMFORT LANCETS 30G	P	RX/OTC
ONETOUCH ULTRASOFT LANCETS	P	RX/OTC	PX ADVANCED LANCING DEVICE MISC	P	
PC LANCETS SUPER THIN 30G	P	RX/OTC	PX LANCET AUTO INJECTOR MISC	P	
PERFECT LANCETS 28G	P	RX/OTC	PX LANCETS MICROTHIN 33G	P	RX/OTC
PERFECT LANCETS 30G	P	RX/OTC	PX LANCETS ULTRA THIN	P	RX/OTC
PERFECT POINT SAFETY LANCETS	P	RX/OTC	PX LANCETS ULTRA THIN 28G	P	RX/OTC
PHARMACIST CHOICE LANCETS	P	RX/OTC	QC ADVANCED LANCING DEVICE MISC	P	
PHARMACY COUNTER LANCETS	P	RX/OTC	QC LANCETS SUPER THIN 30G	P	RX/OTC
PIP LANCETS 28G	P	RX/OTC	QC LANCETS ULTRA THIN	P	RX/OTC
PIP LANCETS 30G	P	RX/OTC	QC UNILET LANCETS 28G	P	RX/OTC
PRECISION THINS GP LANCETS	P	RX/OTC	QC UNILET LANCETS MICRO THIN	P	RX/OTC
PRECISION XTRA-GLUCOSE/KETONE DEVI	P		RA E-ZJECT LANCETS 28G	P	RX/OTC
PREFERRED PLUS LANCETS COLORED	P	RX/OTC			
PREFERRED PLUS LANCETS THIN	P	RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
RA E-ZJECT LANCETS THIN 26G	P	RX/OTC	SAPS HEALTH PLUS LANCETS	P	RX/OTC
RA E-ZJECT LANCETS THIN 28G	P	RX/OTC	SAPS HEALTH TWIST TOP LANCETS	P	RX/OTC
RA E-ZJECT LANCETS ULTRA THIN	P	RX/OTC	SAPS TWIST TOP LANCETS	P	RX/OTC
READYLANCE SAFETY LANCETS	P	RX/OTC	SAPSCARE TWIST TOP LANCETS	P	RX/OTC
REALITY LANCETS	P	RX/OTC	SB LANCETS THIN	P	RX/OTC
REALITY TRIGGER LANCETS	P	RX/OTC	SB LANCETS ULTRA THIN	P	RX/OTC
RELION LANCET DEVICES 30G	P	RX/OTC	SELECT-LITE LANCING DEVICE MISC	P	
RELION LANCETS	P	RX/OTC	SHOPKO AUTOLET LANCING DEVICE MISC	P	
RELION LANCETS MICRO-THIN 33G	P	RX/OTC	SHOPKO ON-THE-GO LANCETS 30G	P	RX/OTC
RELION LANCETS THIN 26G	P	RX/OTC	SHOPKO UNILET LANCETS 28G	P	RX/OTC
RELION LANCETS ULTRA-THIN 30G	P	RX/OTC	SHOPKO UNILET LANCETS 30G	P	RX/OTC
RELION LANCING DEVICE MISC	P		SIMPLE DIAGNOSTICS LANCING DEV MISC	P	
RELION ULTRA THIN LANCETS 30G	P	RX/OTC	SINGLE-LET	P	RX/OTC
RELION ULTRA THIN PLUS LANCETS	P	RX/OTC	SM LANCETS 33G	P	RX/OTC
REXALL LANCETS ULTRA THIN 30G	P	RX/OTC	SM TRUEDRAW LANCING DEVICE MISC	P	
RIGHTTEST GD500 LANCING DEVICE MISC	P		SMART DIABETES VANTAGE LANCING MISC	P	
RIGHTTEST GL300 LANCETS	P	RX/OTC	SMART SENSE COLOR LANCETS 33G	P	RX/OTC
SAFE-T-LANCE	P	RX/OTC	SMART SENSE STANDARD LANCETS	P	RX/OTC
SAFE-T-LANCE PLUS	P	RX/OTC	SMART SENSE SUPER THIN LANCETS	P	RX/OTC
SAFETY LANCET 30G/PRESSURE ACT	P	RX/OTC	SMART SENSE THIN LANCETS 26G	P	RX/OTC
SAFETY LANCETS	P	RX/OTC	SMARTTEST LANCETS 28G	P	RX/OTC
SAFETY LANCETS 21G	P	RX/OTC	SOLUS V2 LANCETS 28G	P	RX/OTC
SAFETY LANCETS 23G	P	RX/OTC			
SAFETY LANCETS 28G	P	RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SOLUS V2 LANCING DEVICE MISC	P		TRAVEL LANCETS ADVANCED 28G	P	RX/OTC
SOLUS V2 TWIST LANCETS 30G	P	RX/OTC	TRUE COMFORT SAFETY LANCETS	P	RX/OTC
STERILANCE TL	P	RX/OTC	TRUE COMFORT TWIST TOP LANCETS	P	RX/OTC
SUPER THIN LANCETS	P	RX/OTC	TRUEDRAW LANCING DEVICE MISC	P	
SURE COMFORT LANCETS 18G	P	RX/OTC	TRUEPLUS LANCETS 26G	P	RX/OTC
SURE COMFORT LANCETS 21G	P	RX/OTC	TRUEPLUS LANCETS 28G	P	RX/OTC
SURE COMFORT LANCETS 23G	P	RX/OTC	TRUEPLUS LANCETS 30G	P	RX/OTC
SURE COMFORT LANCETS 28G	P	RX/OTC	TRUEPLUS LANCETS 33G	P	RX/OTC
SURE COMFORT LANCETS 30G	P	RX/OTC	TRUEPLUS SAFETY LANCETS 28G	P	RX/OTC
SURE COMFORT LANCING PEN MISC	P		TWIST TOP LANCETS 30G	P	RX/OTC
SURELITE LANCETS	P	RX/OTC	ULTI-LANCE AUTOMATIC MISC	P	
TECHLITE AST LANCETS	P	RX/OTC	ULTILET CLASSIC LANCETS	P	RX/OTC
TECHLITE LANCETS	P	RX/OTC	ULTILET LANCETS	P	RX/OTC
TECHLITE LANCETS 26G	P	RX/OTC	ULTILET SAFETY LANCETS	P	RX/OTC
TECHLITE LANCETS 30G	P	RX/OTC	ULTILET SAFETY LANCETS 23G	P	RX/OTC
TGT LANCET MICRO THIN 33G	P	RX/OTC	ULTRA THIN LANCETS 31G	P	RX/OTC
TGT LANCET THIN 26G	P	RX/OTC	ULTRA-CARE LANCETS 30G	P	RX/OTC
TGT LANCET ULTRA THIN 30G	P	RX/OTC	ULTRA-THIN II AUTO LANCET	P	RX/OTC
TGT LANCING DEVICE MISC	P		ULTRA-THIN II LANCETS	P	RX/OTC
THINLETS GP LANCETS	P	RX/OTC	UNILET COMFORTOUCH LANCET	P	RX/OTC
TODAYS HEALTH LANCING DEVICE MISC	P		UNILET EXCELITE	P	RX/OTC
TODAYS HEALTH THIN LANCETS 28G	P	RX/OTC	UNILET EXCELITE II	P	RX/OTC
TODAYS HEALTH THIN LANCETS 30G	P	RX/OTC	UNILET G.P. LANCET	P	RX/OTC
TODAYS HEALTH THIN LANCETS 30G	P	RX/OTC			
TOPCARE LANCETS MICRO-THIN 33G	P	RX/OTC			
TRAVEL LANCETS	P	RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
UNILET G.P. SUPERLITE LANCET	P	RX/OTC	UNISTIK SAFETY LANCETS 28G	P	RX/OTC
UNILET GP 28 ULTRA THIN	P	RX/OTC	UNISTIK SAFETY LANCETS 30G	P	RX/OTC
UNILET LANCET	P	RX/OTC	UNISTIK TOUCH SAFETY LANC 21G	P	RX/OTC
UNILET MICRO-THIN 33G	P	RX/OTC	UNISTIK TOUCH SAFETY LANC 21G	P	RX/OTC
UNILET MICRO-THIN 33G	P	RX/OTC	UNISTIK TOUCH SAFETY LANC 23G	P	RX/OTC
UNILET SUPERLITE LANCET	P	RX/OTC	UNISTIK TOUCH SAFETY LANC 23G	P	RX/OTC
UNILET SUPER-THIN 30G	P	RX/OTC	UNISTIK TOUCH SAFETY LANC 28G	P	RX/OTC
UNILET SUPER-THIN 30G	P	RX/OTC	UNISTIK TOUCH SAFETY LANC 30G	P	RX/OTC
UNILET ULTRA-THIN 28G	P	RX/OTC	UNIVERSAL 1 LANCETS THIN 26G	P	RX/OTC
UNILET ULTRA-THIN 28G	P	RX/OTC	UNIVERSAL 1 LANCETS THIN 33G	P	RX/OTC
UNISTIK 1	P	RX/OTC	UNIVERSAL 1 LANCETS ULTRA THIN	P	RX/OTC
UNISTIK 2	P	RX/OTC	VALUE PLUS LANCET STANDARD 21G	P	RX/OTC
UNISTIK 2 COMFORT	P	RX/OTC	VALUE PLUS LANCETS SUPER THIN	P	RX/OTC
UNISTIK 2 EXTRA	P	RX/OTC	VALUE PLUS LANCETS THIN 26G	P	RX/OTC
UNISTIK 2 NEONATAL	P	RX/OTC	VALUE PLUS LANCING DEVICE MISC	P	
UNISTIK 2 NORMAL	P	RX/OTC	VALUMARK LANCET SUPER THIN 30G	P	RX/OTC
UNISTIK 2 SUPER	P	RX/OTC	VALUMARK LANCET ULTRA THIN 28G	P	RX/OTC
UNISTIK 3	P	RX/OTC	VERIFINE SAFE LANCET MINI 21G	P	RX/OTC
UNISTIK 3 COMFORT	P	RX/OTC	VERIFINE SAFE LANCET MINI 23G	P	RX/OTC
UNISTIK 3 COMFORT	P	RX/OTC	VERIFINE SAFE LANCET MINI 28G	P	RX/OTC
UNISTIK 3 EXTRA	P	RX/OTC	VERIFINE SAFE LANCET MINI 30G	P	RX/OTC
UNISTIK 3 EXTRA	P	RX/OTC			
UNISTIK 3 GENTLE	P	RX/OTC			
UNISTIK 3 GENTLE	P	RX/OTC			
UNISTIK 3 NEONATAL	P	RX/OTC			
UNISTIK 3 NORMAL	P	RX/OTC			
UNISTIK 3 NORMAL	P	RX/OTC			
UNISTIK CZT COMFORT	P	RX/OTC			
UNISTIK CZT NORMAL	P	RX/OTC			
UNISTIK NORMAL	P	RX/OTC			
UNISTIK PRO SAFETY LANCET	P	RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
VERIFINE UNIVERSAL LANCETS 28G	P	RX/OTC	ALCOHOL SWABSTICK	P	RX/OTC
VERIFINE UNIVERSAL LANCETS 30G	P	RX/OTC	AUM ALCOHOL PREP PADS	P	RX/OTC
VERIFINE UNIVERSAL LANCETS 33G	P	RX/OTC	BD SWAB SINGLE USE REGULAR	P	RX/OTC
VIDA MIA AUTOLET LANCING DEV MISC	P		CARETOUCH ALCOHOL PREP	P	RX/OTC
VIDA MIA UNILET LANCETS 28G	P	RX/OTC	COMFORT TOUCH ALCOHOL PREP	P	RX/OTC
VIDA MIA UNILET LANCETS 30G	P	RX/OTC	CURITY ALCOHOL PREPS	P	RX/OTC
VIVAGUARD LANCETS	P	RX/OTC	CVS ALCOHOL PREP PADS	P	RX/OTC
VIVAGUARD LANCETS 30G	P	RX/OTC	CVS PREP	P	RX/OTC
VIVAGUARD LANCING DEVICE MISC	P		DROPSAFE ALCOHOL PREP	P	RX/OTC
VIVAGUARD SAFETY LANCETS 28G	P	RX/OTC	EASY COMFORT ALCOHOL PADS	P	RX/OTC
WALGREENS ADV TRAVEL LANCETS	P	RX/OTC	EASY TOUCH ALCOHOL PREP MEDIUM	P	RX/OTC
WALGREENS LANCETS	P	RX/OTC	EQL ALCOHOL SWABS	P	RX/OTC
WALGREENS LANCETS MICRO THIN	P	RX/OTC	FIFTY50 ALCOHOL PREP	P	RX/OTC
WALGREENS LANCETS SUPER THIN	P	RX/OTC	GLOBAL ALCOHOL PREP EASE	P	RX/OTC
WALGREENS THIN LANCETS	P	RX/OTC	GNP ALCOHOL SWABS	P	RX/OTC
WALGREENS ULTRA THIN LANCETS	P	RX/OTC	GOODSENSE ALCOHOL SWABS	P	RX/OTC
ZEVRX TWIST TOP LANCETS 30G	P	RX/OTC	H-E-B INCONTROL ALCOHOL	P	RX/OTC
Misc. Devices			HM STERILE ALCOHOL PREP	P	RX/OTC
ADVOCATE ALCOHOL PREP PADS	P	RX/OTC	MEIJER ALCOHOL SWABS	P	RX/OTC
ALCOH-GLOVE CONTOURED WIPE	P	RX/OTC	PHARMACIST CHOICE ALCOHOL	P	RX/OTC
ALCOHOL PADS	P	RX/OTC	PRO COMFORT ALCOHOL	P	RX/OTC
ALCOHOL PREP	P	RX/OTC	PURE COMFORT ALCOHOL PREP	P	RX/OTC
ALCOHOL PREP PADS	P	RX/OTC	QC ALCOHOL SWABS	P	RX/OTC
ALCOHOL SWABS	P	RX/OTC	RA ALCOHOL SWABS	P	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
REALITY SWABS	P	RX/OTC	ADVOCATE INSULIN SYRINGE	P	RX/OTC
RELION ALCOHOL SWABS	P	RX/OTC	AQ INSULIN SYRINGE	P	RX/OTC
SAPS CARE ALCOHOL PREP	P	RX/OTC	AQINJECT PEN NEEDLE	P	RX/OTC
SAPS HEALTH ALCOHOL PREP	P	RX/OTC	ASSURE ID DUO PRO PEN NEEDLES	P	RX/OTC
SAPS HEALTH CARE ALCOHOL PREP	P	RX/OTC	AUM INSULIN SAFETY PEN NEEDLE	P	RX/OTC
SB ALCOHOL PREP	P	RX/OTC	AUM MINI INSULIN PEN NEEDLE	P	RX/OTC
SM ALCOHOL PREP	P	RX/OTC	AUM PEN NEEDLE	P	RX/OTC
SURE COMFORT ALCOHOL PREP	P	RX/OTC	AUM READYGARD DUO PEN NEEDLE	P	RX/OTC
TRUE COMFORT ALCOHOL PREP PADS	P	RX/OTC	AUM SAFETY PEN NEEDLE	P	RX/OTC
TRUE COMFORT PRO ALCOHOL PREP	P	RX/OTC	AURORA PEN NEEDLES	P	RX/OTC
ULTICARE ALCOHOL SWABS	P	RX/OTC	AURORA UNIFINE PENTIPS	P	RX/OTC
ULTILET ALCOHOL SWABS	P	RX/OTC	AUTOPEN DEVI	P	RX/OTC
ULTRA-CARE ALCOHOL PREP PADS	P	RX/OTC	BD INSULIN SYR ULTRAFINE II	P	RX/OTC
WEBCOL ALCOHOL PREP LARGE	P	RX/OTC	BD INSULIN SYRINGE	P	RX/OTC
WEBCOL ALCOHOL PREP MEDIUM	P	RX/OTC	BD INSULIN SYRINGE HALF-UNIT	P	RX/OTC
ZEV RX STERILE ALCOHOL PREP PAD	P	RX/OTC	BD INSULIN SYRINGE MICROFINE	P	RX/OTC
Parenteral Therapy Supplies			BD INSULIN SYRINGE U/F	P	RX/OTC
1ST TIER UNIFINE PENTIPS	P		BD INSULIN SYRINGE U/F 1/2UNIT	P	
1ST TIER UNIFINE PENTIPS PLUS	P	RX/OTC	BD INSULIN SYRINGE U-500	P	
ABOUTTIME PEN NEEDLE	P	RX/OTC	BD INSULIN SYRINGE ULTRAFINE	P	RX/OTC
ADVOCATE INSULIN PEN NEEDLE	P	RX/OTC	BD PEN MINI MISC	P	RX/OTC
ADVOCATE INSULIN PEN NEEDLES	P		BD PEN NEEDLE MICRO U/F	P	
			BD PEN NEEDLE MINI U/F	P	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
BD PEN NEEDLE NANO 2ND GEN	P	RX/OTC	COMFORT EZ INSULIN SYRINGE	P	RX/OTC
BD PEN NEEDLE NANO U/F	P	RX/OTC	COMFORT EZ MICRO PEN NEEDLES	P	RX/OTC
BD PEN NEEDLE ORIGINAL U/F	P		COMFORT EZ PEN NEEDLES	P	RX/OTC
BD PEN NEEDLE SHORT U/F	P	RX/OTC	COMFORT EZ PRO PEN NEEDLES	P	RX/OTC
BD PEN MISC	P	RX/OTC	COMFORT EZ SHORT PEN NEEDLES	P	RX/OTC
BD SAFETYGLIDE INSULIN SYRINGE	P	RX/OTC	COMFORT TOUCH INSULIN PEN NEED	P	RX/OTC
BD SAFETYGLIDE SYRINGE/NEEDLE	P		DIATHRIVE PEN NEEDLE	P	RX/OTC
BD SAFETY-LOK INSULIN SYRINGE	P	RX/OTC	DROPLET INSULIN SYRINGE	P	RX/OTC
BD VEO INSULIN SYR U/F 1/2UNIT	P	RX/OTC	DROPLET PEN NEEDLES	P	RX/OTC
BD VEO INSULIN SYR U/F 1/2UNIT	P	RX/OTC	DROPSAFE SAFETY PEN NEEDLES	P	RX/OTC
BD VEO INSULIN SYRINGE U/F	P	RX/OTC	DROPSAFE SAFETY SYRINGE/NEEDLE	P	RX/OTC
BD VEO INSULIN SYRINGE U/F	P	RX/OTC	DRUG MART UNIFINE PENTIPS	P	RX/OTC
CAREFINE PEN NEEDLES	P	RX/OTC	DRUG MART UNIFINE PENTIPS PLUS	P	RX/OTC
CAREONE INSULIN SYRINGE	P		EASY COMFORT INSULIN SYRINGE	P	RX/OTC
CAREONE UNIFINE PENTIPS	P	RX/OTC	EASY COMFORT PEN NEEDLES	P	RX/OTC
CAREONE UNIFINE PENTIPS PLUS	P	RX/OTC	EASY TOUCH FLIPLOCK INSULIN SY	P	RX/OTC
CARETOUCH INSULIN SYRINGE	P	RX/OTC	EASY TOUCH INSULIN SAFETY SYR	P	RX/OTC
CARETOUCH PEN NEEDLES	P	RX/OTC	EASY TOUCH INSULIN SYRINGE	P	RX/OTC
CEQUR SIMPLICITY 2U DEVI	P	RX/OTC	EASY TOUCH PEN NEEDLES	P	RX/OTC
CLICKFINE PEN NEEDLES	P	RX/OTC	EASY TOUCH SHEATHLOCK SYRINGE	P	RX/OTC
COMFORT ASSIST INSULIN SYRINGE	P	RX/OTC	EMBRACE PEN NEEDLES	P	RX/OTC
			EQL INSULIN SYRINGE	P	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FIFTY50 PEN NEEDLES	P	RX/OTC	HEALTHWISE SHORT PEN NEEDLES	P	RX/OTC
FIFTY50 SUPERIOR COMFORT SYR	P	RX/OTC	HEALTHWISE UNIFINE PENTIPS	P	RX/OTC
FREDS PHARMACY UNIFINE PENTIP+	P	RX/OTC	HEALTHY ACCENTS UNIFINE PENTIP	P	RX/OTC
FREDS PHARMACY UNIFINE PENTIPS	P	RX/OTC	H-E-B INCONTROL PEN NEEDLES	P	RX/OTC
GLOBAL EASE INJECT PEN NEEDLES	P	RX/OTC	H-E-B INCONTROL UNIFINE PENTIP	P	RX/OTC
GLOBAL EASY GLIDE INSULIN SYR	P	RX/OTC	HM ULTICARE INSULIN SYRINGE	P	RX/OTC
GLOBAL EASY GLIDE PEN NEEDLES	P	RX/OTC	HM ULTICARE MINI PEN NEEDLES	P	RX/OTC
GLOBAL INJECT EASE INSULIN SYR	P	RX/OTC	HM ULTICARE SHORT PEN NEEDLES	P	RX/OTC
GLOBAL INSULIN SYRINGES	P		INCONTROL ULTICARE PEN NEEDLES	P	RX/OTC
GLUCOPRO INSULIN SYRINGE	P		INPEN 100-BLUE-LILLY-HUMALOG DEVI	P	RX/OTC
GNP CLICKFINE PEN NEEDLES	P	RX/OTC	INPEN 100-BLUE-NOVOLOG-FIASP DEVI	P	RX/OTC
GNP INSULIN SYRINGE	P	RX/OTC	INPEN 100-GREY-LILLY-HUMALOG DEVI	P	RX/OTC
GNP INSULIN SYRINGES 28GX1/2"	P	RX/OTC	INPEN 100-GREY-NOVOLOG-FIASP DEVI	P	RX/OTC
GNP INSULIN SYRINGES 29GX1/2"	P	RX/OTC	INPEN 100-PINK-LILLY-HUMALOG DEVI	P	RX/OTC
GNP INSULIN SYRINGES 31GX5/16"	P	RX/OTC	INPEN 100-PINK-NOVOLOG-FIASP DEVI	P	RX/OTC
GNP ULTICARE PEN NEEDLES	P	RX/OTC	INSULIN SYRINGE	P	RX/OTC
GNP ULTIGUARD SAFEPACK NEEDLE	P	RX/OTC	INSULIN SYRINGE-NEEDLE U-100	P	RX/OTC
GNP ULTRA COM INSULIN SYRINGE	P	RX/OTC	INSUPEN PEN NEEDLES	P	RX/OTC
GOODSENSE CLICKFINE PEN NEEDLE	P	RX/OTC	INSUPEN SENSITIVE	P	
GOODSENSE PEN NEEDLE PENFINE	P	RX/OTC	INSUPEN ULTRAFIN	P	RX/OTC
HEALTHWISE INSULIN SYR/NEEDLE	P	RX/OTC	KINRAY INSULIN SYRINGE	P	RX/OTC
HEALTHWISE MICRON PEN NEEDLES	P	RX/OTC	KMART VALU INSULIN SYRINGE 29G	P	RX/OTC
			KMART VALU INSULIN SYRINGE 30G	P	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
KROGER INSULIN SYRINGE	P	RX/OTC	NOVOPEN ECHO DEVI	P	RX/OTC
KROGER PEN NEEDLES	P	RX/OTC	PC UNIFINE PENTIPS	P	RX/OTC
LEADER INSULIN SYRINGE	P	RX/OTC	PEN NEEDLE/5-BEVEL TIP	P	RX/OTC
LEADER UNIFINE PENTIPS	P	RX/OTC	PEN NEEDLES	P	RX/OTC
LEADER UNIFINE PENTIPS PLUS	P	RX/OTC	PEN NEEDLES 5/16"	P	RX/OTC
LITETOUCH INSULIN SYRINGE	P	RX/OTC	PENTIPS	P	RX/OTC
LITETOUCH PEN NEEDLES	P	RX/OTC	PENTIPS GENERIC PEN NEEDLES	P	
LONGS INSULIN SYRINGE	P	RX/OTC	PIP PEN NEEDLES 31G X 5MM	P	RX/OTC
MAGELLAN INSULIN SAFETY SYR	P	RX/OTC	PIP PEN NEEDLES 32G X 4MM	P	RX/OTC
MARATHON MEDICAL PENTIPS	P	RX/OTC	PREFERRED PLUS INSULIN SYRINGE	P	RX/OTC
MAXI-COMFORT INSULIN SYRINGE	P	RX/OTC	PREFERRED PLUS UNIFINE PENTIPS	P	RX/OTC
MAXICOMFORT SYR 27G X 1/2"	P	RX/OTC	PREVENT DROPSAFE PEN NEEDLES	P	RX/OTC
MEDIC INSULIN SYRINGE	P	RX/OTC	PREVENT SAFETY PEN NEEDLES	P	RX/OTC
MEDICINE SHOPPE PEN NEEDLES	P	RX/OTC	PRO COMFORT INSULIN SYRINGE	P	RX/OTC
MEIJER PEN NEEDLES	P	RX/OTC	PRO COMFORT PEN NEEDLES	P	RX/OTC
MICRODOT PEN NEEDLE	P	RX/OTC	PRODIGY INSULIN SYRINGE	P	RX/OTC
MM INSULIN SYRINGE/NEEDLE	P	RX/OTC	PURE COMFORT PEN NEEDLE	P	RX/OTC
MM PEN NEEDLES	P	RX/OTC	PURE COMFORT SAFETY PEN NEEDLE	P	RX/OTC
MONOJECT INSULIN SYRINGE	P	RX/OTC	PX INSULIN SYRINGE	P	
MONOJECT ULTRA COMFORT SYRINGE	P	RX/OTC	PX MINI PEN NEEDLES	P	RX/OTC
MS INSULIN SYRINGE	P	RX/OTC	PX PEN NEEDLE	P	RX/OTC
NOVOFINE PEN NEEDLE	P		PX SHORTLENGTH PEN NEEDLES	P	RX/OTC
NOVOFINE PLUS PEN NEEDLE	P	RX/OTC	QC PEN NEEDLES	P	RX/OTC
			QC UNIFINE PENTIPS	P	RX/OTC
			RA INSULIN SYRINGE	P	RX/OTC
			RA PEN NEEDLES	P	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
RAYA SURE PEN NEEDLE	P	RX/OTC	TRUEPLUS INSULIN SYRINGE	P	RX/OTC
REALITY INSULIN SYRINGE	P	RX/OTC	TRUEPLUS PEN NEEDLES	P	RX/OTC
RELION INSULIN SYRINGE	P	RX/OTC	ULTICARE INSULIN SAFETY SYR	P	RX/OTC
RELION PEN NEEDLES	P	RX/OTC	ULTICARE INSULIN SYRINGE	P	RX/OTC
RELION SHORT PEN NEEDLES	P	RX/OTC	ULTICARE MICRO PEN NEEDLES	P	RX/OTC
SB INSULIN SYRINGE	P	RX/OTC	ULTICARE MINI PEN NEEDLES	P	
SECURESAFE INSULIN SYRINGE	P	RX/OTC	ULTICARE PEN NEEDLES	P	RX/OTC
SHOPKO UNIFINE PENTIPS	P	RX/OTC	ULTICARE SHORT PEN NEEDLES	P	RX/OTC
SHOPKO UNIFINE PENTIPS PLUS	P	RX/OTC	ULTICARE TUBERCULIN SAFETY SYR	P	
SURE COMFORT INSULIN SYRINGE	P	RX/OTC	ULTIGUARD SAFEPAK PEN NEEDLE	P	RX/OTC
SURE COMFORT PEN NEEDLES	P	RX/OTC	ULTIGUARD SAFEPAK SYR/NEEDLE	P	
TECHLITE INSULIN SYRINGE	P	RX/OTC	ULILET PEN NEEDLE	P	
TECHLITE PEN NEEDLES	P	RX/OTC	ULTRA FLO INSULIN PEN NEEDLES	P	RX/OTC
TECHLITE PLUS PEN NEEDLES	P	RX/OTC	ULTRA FLO INSULIN SYR 1/2 UNIT	P	
TODAYS HEALTH SHORT PEN NEEDLE	P	RX/OTC	ULTRA FLO INSULIN SYRINGE	P	
TOPCARE CLICKFINE PEN NEEDLES	P	RX/OTC	ULTRA THIN PEN NEEDLES	P	RX/OTC
TOPCARE ULTRA COMFORT INS SYR	P	RX/OTC	ULTRACARE INSULIN SYRINGE	P	RX/OTC
TRUE COMFORT INSULIN SYRINGE	P	RX/OTC	ULTRACARE PEN NEEDLES	P	RX/OTC
TRUE COMFORT PEN NEEDLES	P	RX/OTC	ULTRA-THIN II INS SYR SHORT	P	RX/OTC
TRUE COMFORT PRO INSULIN SYR	P	RX/OTC	ULTRA-THIN II INSULIN SYRINGE	P	RX/OTC
TRUE COMFORT PRO PEN NEEDLES	P	RX/OTC	ULTRA-THIN II MINI PEN NEEDLE	P	RX/OTC
TRUEPLUS 5-BEVEL PEN NEEDLES	P				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ULTRA-THIN II PEN NEEDLE SHORT	P	RX/OTC	AEROBIKA DEVI	P	RX/OTC
ULTRA-THIN II PEN NEEDLES	P		AEROCHAMBER HOLDING CHAMBER DEVI	NP	RX/OTC
UNIFINE PEN NEEDLES	P	RX/OTC	AEROCHAMBER MINI CHAMBER DEVI	P	RX/OTC
UNIFINE PENTIPS	P	RX/OTC	AEROCHAMBER MV MISC	P	RX/OTC
UNIFINE PENTIPS	P		AEROCHAMBER PLS FLOVU MTHPIECE DEVI	NP	RX/OTC
UNIFINE PENTIPS PLUS	P	RX/OTC	AEROCHAMBER PLUS FLO-VU INTERM DEVI	NP	RX/OTC
UNIFINE PENTIPS PLUS	P	RX/OTC	AEROCHAMBER PLUS FLO-VU LARGE DEVI	NP	RX/OTC
UNIFINE PROTECT PEN NEEDLE	P	RX/OTC	AEROCHAMBER PLUS FLO-VU LARGE MISC	NP	RX/OTC
UNIFINE SAFECONTROL PEN NEEDLE	P	RX/OTC	AEROCHAMBER PLUS FLO-VU MEDIUM DEVI	NP	RX/OTC
UNIFINE ULTRA PEN NEEDLE	P	RX/OTC	AEROCHAMBER PLUS FLO-VU MEDIUM MISC	NP	RX/OTC
VALUE HEALTH INSULIN SYRINGE	P	RX/OTC	AEROCHAMBER PLUS FLO-VU SMALL DEVI	NP	RX/OTC
VALUMARK PEN NEEDLES	P	RX/OTC	AEROCHAMBER PLUS FLO-VU SMALL MISC	NP	RX/OTC
VANISHPOINT INSULIN SYRINGE	P	RX/OTC	AEROCHAMBER PLUS FLO-VU W/MASK MISC	NP	RX/OTC
VERIFINE INSULIN PEN NEEDLE	P	RX/OTC	AEROCHAMBER PLUS FLO-VU MISC	NP	RX/OTC
VERIFINE INSULIN SYRINGE	P	RX/OTC	AEROCHAMBER PLUS FLOW VU MISC	NP	RX/OTC
VERIFINE PLUS PEN NEEDLE	P	RX/OTC	AEROCHAMBER W/FLOWSIGNAL MISC	P	RX/OTC
VIDA MIA UNIFINE PENTIPS	P	RX/OTC	AEROCHAMBER Z-STAT PLUS CHAMBR MISC	P	RX/OTC
VP INSULIN SYRINGE	P	RX/OTC	AEROCHAMBER Z-STAT PLUS/LARGE MISC	P	RX/OTC
WEGMANS UNIFINE PENTIPS PLUS	P	RX/OTC	AEROCHAMBER Z-STAT PLUS/MEDIUM MISC	P	RX/OTC
ZEV RX INSULIN SYRINGE	P	RX/OTC	AEROCHAMBER Z-STAT PLUS/SMALL MISC	P	RX/OTC
ZEV RX PEN NEEDLES	P	RX/OTC	AEROCHAMBER Z-STAT PLUS MISC	P	RX/OTC
Respiratory Therapy Supplies					
ACE AEROSOL CLOUD ENHANCER MISC	P	RX/OTC			
ADULT MASK LARGE MISC	P	RX/OTC			
ADULT MASK DEVI	P	RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
AEROVENT PLUS DEVI	P	RX/OTC	EASIVENT MASK LARGE MISC	P	RX/OTC
ALL FLOW 1000 PFT FILTER DEVI	P	RX/OTC	EASIVENT MASK MEDIUM MISC	P	RX/OTC
ALL FLOW 2000 PFT FILTER DEVI	P	RX/OTC	EASIVENT MASK SMALL MISC	P	RX/OTC
ALL FLOW 3000 PFT FILTER DEVI	P	RX/OTC	EASIVENT MISC	P	RX/OTC
ALL FLOW 4000 PFT FILTER DEVI	P	RX/OTC	EASY FLOW BLACK/BLUE DEVI	P	RX/OTC
ALL FLOW 5000 PFT FILTER DEVI	P	RX/OTC	EASY FLOW BLACK/ORANGE DEVI	P	RX/OTC
ALL FLOW 6000 PFT FILTER DEVI	P	RX/OTC	EASY FLOW BLACK/RED DEVI	P	RX/OTC
ALL FLOW 7000 PFT FILTER DEVI	P	RX/OTC	EASY FLOW BLACK/WHITE DEVI	P	RX/OTC
BREATHE COMFORT CHAMBER/ADULT DEVI	P	RX/OTC	EASY FLOW BLACK/YELLOW DEVI	P	RX/OTC
BREATHE COMFORT CHAMBER/CHILD DEVI	P	RX/OTC	EASY FLOW WHITE/BLUE DEVI	P	RX/OTC
BREATHE EASE LARGE DEVI	P	RX/OTC	EASY FLOW WHITE/GREEN DEVI	P	RX/OTC
BREATHE EASE MEDIUM DEVI	P	RX/OTC	EASY FLOW WHITE/PINK DEVI	P	RX/OTC
BREATHE EASE SMALL DEVI	P	RX/OTC	EASY FLOW WHITE/WHITE DEVI	P	RX/OTC
BREATHERITE VALVED MDI CHAMBER DEVI	P	RX/OTC	EASY FLOW WHITE/YELLOW DEVI	P	RX/OTC
CLEVER CHOICE HOLDING CHAMBER DEVI	P	RX/OTC	EQ SPACE CHAMBER ANTI-STATIC L DEVI	P	RX/OTC
CO MONITOR DEVI	P	RX/OTC	EQ SPACE CHAMBER ANTI-STATIC M DEVI	P	RX/OTC
COMPACT SPACE CHAMBER/LG MASK DEVI	NP	RX/OTC	EQ SPACE CHAMBER ANTI-STATIC S DEVI	P	RX/OTC
COMPACT SPACE CHAMBER/MED MASK DEVI	NP	RX/OTC	EQ SPACE CHAMBER ANTI-STATIC DEVI	P	RX/OTC
COMPACT SPACE CHAMBER/SM MASK DEVI	NP	RX/OTC	FLEXICHAMBER ADULT MASK/SMALL	NP	RX/OTC
COMPACT SPACE CHAMBER DEVI	NP	RX/OTC	FLEXICHAMBER CHILD MASK/LARGE	NP	RX/OTC
			FLEXICHAMBER CHILD MASK/SMALL	NP	RX/OTC
			FLEXICHAMBER DEVI	NP	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
IN-CHECK DIAL FLOW TRAINER DEVI	P	RX/OTC	PRO COMFORT SPACER ADULT MISC	P	RX/OTC
IN-CHECK INSPIRATORY FLOW MTR DEVI	P	RX/OTC	PRO COMFORT SPACER CHILD MISC	P	RX/OTC
INSPIRACHAMBER/LARGE DEVI	P	RX/OTC	PRO COMFORT SPACER INFANT DEVI	P	RX/OTC
INSPIRACHAMBER/MEDIUM DEVI	P	RX/OTC	PROCARE SPACER/ADULT MASK DEVI	P	RX/OTC
INSPIRACHAMBER/MOUTHPIECE DEVI	P	RX/OTC	PROCARE SPACER/CHILD MASK DEVI	P	RX/OTC
INSPIRACHAMBER/SMALL DEVI	P	RX/OTC	PROCHAMBER VHC DEVI	P	RX/OTC
INSPIREASE MISC	P	RX/OTC	PURE COMFORT 3-BALL BREATHE EX DEVI	P	RX/OTC
MICROCHAMBER DEVI	P	RX/OTC	PURE COMFORT SPACER CHAMBER DEVI	P	RX/OTC
MICROCHAMBER MISC	P	RX/OTC	QUAKE DEVI	P	RX/OTC
MICROSPACER MISC	P	RX/OTC	REUSABLE COMFORTSEAL MASK-LRG MISC	NP	RX/OTC
NEBULIZER CUP/TUBING DEVI	P	RX/OTC	REUSABLE COMFORTSEAL MASK-MED MISC	NP	RX/OTC
OMBRA TABLE TOP COMPRESSOR DEVI	P	RX/OTC	REUSABLE COMFORTSEAL MASK-SML MISC	NP	RX/OTC
ONE FLOW SPIROMETER DEVI	P	RX/OTC	RITEFLO DEVI	P	RX/OTC
OPTICHAMBER DIAMOND DEVI	P	RX/OTC	SPIRO PD DEVI	P	RX/OTC
OPTICHAMBER DIAMOND-LG MASK DEVI	P	RX/OTC	THRESHOLD PEP DEVI	P	RX/OTC
OPTICHAMBER DIAMOND-MD MASK MISC	P	RX/OTC	VERSAPAP W/UNIVERSAL TUBING DEVI	P	RX/OTC
OPTICHAMBER DIAMOND MISC	P	RX/OTC	VERSAPAP DEVI	P	RX/OTC
OPTICHAMBER DIAMOND-SM MASK MISC	P	RX/OTC	VORTEX HOLD CHMBR/MASK/CHILD DEVI	P	RX/OTC
PARI MANUAL INTERRUPTER DEVI	P	RX/OTC	VORTEX HOLD CHMBR/MASK/TODDLER DEVI	P	RX/OTC
PARI TREK S COMBO PACK DEVI	P	RX/OTC			
POCKET CHAMBER DEVI	P	RX/OTC			
POCKET SPACER DEVI	P	RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits
VORTEX VALVED HOLDING CHAMBER DEVI	P	RX/OTC
MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches		
Calcitonin Gene-Related Peptide (CGRP) Receptor Antag		
AIMOVIG	P	SP; PA
AJOVY SOAJ	P	SP; PA
AJOVY SOSY	P	SP; PA
EMGALITY (300 MG DOSE) SOSY	NP	SP; PA
EMGALITY SOAJ	P	SP; PA
EMGALITY SOSY	P	SP; PA
NURTEC	P	PA
QULIPTA 30 MG	NP	QL(1 EA daily)
QULIPTA 10 MG, 60 MG	NP	
UBRELVY PO	NP	
VYEPTI	NP	SP
ZAVZPRET	NP	
Migraine Combinations		
CAFERGOT TABS PO (<i>ergotamine w/ caffeine</i>)	NP	
<i>ergotamine w/ caffeine TABS PO</i>	NP	
<i>sumatriptan-naproxen sodium PO</i>	NP	
Migraine Products		
<i>dihydroergotamine mesylate SOLN NA 4 MG/ML</i>	NP	
MIGRANAL SOLN NA (<i>dihydroergotamine mesylate</i>)	NP	
Migraine Products - NSAIDs		
<i>diclofenac potassium (migraine) PO</i>	NP	
ELYXYB	NP	

Drug Name	Drug Tier	Requirements/ Limits
Serotonin Agonists		
<i>almotriptan malate PO</i>	NP	
<i>eletriptan hydrobromide PO</i>	NP	
FROVA PO (<i>frovatriptan succinate</i>)	NP	
<i>frovatriptan succinate PO</i>	NP	
IMITREX 5 MG/ACT (<i>sumatriptan</i>)	NP	QL(9 EA per 40 day(s) retail; 9 EA per 40 days mail)
IMITREX STATDOSE REFILL SOCT (<i>sumatriptan succinate</i>)	NP	QL(4.5 ML per 40 day(s) retail; 4 ML per 40 days mail)
IMITREX STATDOSE SYSTEM SOAJ (<i>sumatriptan succinate</i>)	NP	QL(4.5 ML per 40 day(s) retail; 4 ML per 40 days mail)
IMITREX TABS PO (<i>sumatriptan succinate</i>)	NP	
MAXALT-MLT TBDP PO 10 MG (<i>rizatriptan benzoate</i>)	NP	
MAXALT TABS PO 10 MG (<i>rizatriptan benzoate</i>)	NP	
<i>naratriptan hcl PO</i>	P	
RELPAK PO (<i>eletriptan hydrobromide</i>)	NP	
REYVOW	NP	
<i>rizatriptan benzoate TABS PO</i>	P	
<i>rizatriptan benzoate TABS PO 10 MG</i>	NP	
<i>rizatriptan benzoate TBDP PO 10 MG</i>	NP	
<i>rizatriptan benzoate TBDP PO</i>	P	
<i>sumatriptan</i>	P	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>sumatriptan succinate SOAJ</i>	NP	QL(4.5 ML per 40 day(s) retail; 4 ML per 40 days mail)	<i>calcium carbonate-cholecalciferol TABS PO 10 MCG-600 MG, 20 MCG-600 MG, 5 MCG-500 MG, 800 UNIT-600 MG</i>	NP	
<i>sumatriptan succinate SOCT</i>	NP	QL(4.5 ML per 40 day(s) retail; 4 ML per 40 days mail)	<i>calcium carbonate TABS PO 1250 MG, 600 MG</i>	NP	
<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>calcium carbonate TABS PO 1250 MG, 1500 MG, 500 MG, 600 MG, 600 MG</i>	P	
<i>sumatriptan succinate TABS PO</i>	P		<i>calcium carbonate-vitamin d TABS PO 125 UNIT-250 MG, 125 UNIT-600 MG, 250 MG-125 UNIT, 3.125 MCG-600 MG, 600 MG-200 UNIT</i>	P	
TOSYMRA	NP	QL(9 EA per 40 day(s) retail; 9 EA per 40 days mail)	CALCIUM CITRATE + D3 TABS PO	P	
ZEMBRACE SYMTOUCH SOAJ	NP	QL(4.5 ML per 40 day(s) retail; 4 ML per 40 days mail)	CALCIUM CITRATE + D TABS PO	P	
<i>zolmitriptan SOLN 2.5 MG</i>	NP		<i>calcium citrate TABS PO</i>	P	
<i>zolmitriptan SOLN 5 MG</i>	NP	QL(9 EA per 40 day(s) retail; 9 EA per 40 days mail)	CALCIUM CITRATE TABS PO 250 MG	P	
<i>zolmitriptan TABS PO</i>	P		<i>calcium citrate-vitamin d TABS PO 200 UNIT-315 MG, 250 UNIT-315 MG, 5 MCG-315 MG, 6.25 MCG-315 MG</i>	P	
<i>zolmitriptan TABS PO</i>	NP		<i>calcium citrate-vitamin d TABS PO 250 UNIT-315 MG, 6.25 MCG-315 MG</i>	NP	
<i>zolmitriptan TBDP PO</i>	P		CALCIUM GLUCONATE CAPS PO	P	
ZOMIG SOLN 2.5 MG (<i>zolmitriptan</i>)	NP		CALCIUM/C/D	P	
ZOMIG SOLN 5 MG (<i>zolmitriptan</i>)	NP	QL(9 EA per 40 day(s) retail; 9 EA per 40 days mail)	CALCIUM CHEW PO	P	
MINERALS & ELECTROLYTES			<i>calcium-magnesium-zinc PO</i>	P	
Calcium			CALCIUM-MAGNESIUM-ZINC PO 334 MG-134 MG-5 MG	P	
CALCIUM 600 +D HIGH POTENCY TABS PO	P		CALTRATE 600+D3 SOFT CHEW PO	NP	
CALCIUM ACETATE	NP				
CALCIUM CARBONATE CHEW PO	P				
<i>calcium carbonate-cholecalciferol TABS PO</i>	P				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CALTRATE 600+D3 TABS PO (<i>calcium carbonate-cholecalciferol</i>)	P		PEDIALYTE IMMUNE SUPPORT SOLN PO	P	
CALTRATE BONE HEALTH TABS PO (<i>calcium carbonate-cholecalciferol</i>)	P		TRUELYTE SOLN PO	P	
CALTRATE BONE HEALTH TABS PO (<i>calcium carbonate-cholecalciferol</i>)	NP		Fluoride		
CITRACAL MAXIMUM TABS PO (<i>calcium citrate-vitamin d</i>)	P		<i>sodium fluoride CHEW PO</i>	NP	
CORAL CALCIUM CAPS 100 UNIT-50 MG-185 MG	P		<i>sodium fluoride CHEW PO</i>	P	
<i>oyster shell PO</i>	NP		<i>sodium fluoride SOLN PO 0.125 MG/DROP, 0.5 MG/ML</i>	P	RX/OTC
<i>oyster shell PO</i>	P		<i>sodium fluoride SOLN PO 0.125 MG/DROP, 0.5 MG/ML</i>	P	
OYSTER SHELL CALCIUM/D TABS PO 500 MG-200 UNIT	P		<i>sodium fluoride TABS PO 0.5 MG</i>	P	
RA CALCIUM-BORON	P		SOLUVITA SOLN PO	NP	RX/OTC
RA CALCIUM TABS PO	P		Magnesium		
Electrolyte Mixtures			<i>magnesium oxide (mg supplement) TABS PO</i>	NP	
BIOLYTE SOLN PO	P		<i>magnesium oxide (mg supplement) TABS PO 400 MG, 400 MG</i>	P	
CERASPORT EX1 SOLN PO	P		<i>magnesium TABS PO 400 MG</i>	P	
CERASPORT SOLN PO	P		SLOW-MAG	P	
ENFAMIL ENFALYTE SOLN PO	P		SLOWMAG MG MUSCLE/HEART	P	
FT ELECTROLYTE SOLN PO	P		Mineral Combinations		
GOODSENSE ELECTROLYTE ADV CARE SOLN PO	P		ADVANCED CALCIUM/D/MAGNESIUM TABS PO	P	
HYDRALYTE FREEZER POPS SOLN PO	P		BONE DENSITY BUILDER TABS PO	P	
HYDRALYTE SOLN PO	P		CALCIUM 600+D3 PLUS MINERALS TABS PO	P	
KINDERLYTE PREMAX SOLN PO	P		CALCIUM-MAGNESIUM-ZINC-D3 TABS PO	P	
KINDERLYTE SOLN PO	P		CAL-MAG-ZINC W/D TABS PO	P	
<i>oral electrolytes SOLN PO</i>	P				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CITRACAL MAXIMUM PLUS TABS PO	P		Potassium		
CITRACAL PLUS TABS PO	P		<i>potassium bicarbonate TBEF PO</i>	P	
CVS CALCIUM CITRATE+D3 W/MAGNE TABS PO	P		<i>potassium chloride microencapsulated crystals er PO</i>	P	
CVS CALCIUM CITRATE+D3 TABS PO	P		<i>potassium chloride CPCR PO</i>	P	
FEM-CAL CITRATE TABS PO	P		<i>potassium chloride PACK PO 20 MEQ</i>	P	
MULTI MEGA MINERALS TABS PO	P		<i>potassium chloride SOLN PO 10 %, 20 %, 10 %</i>	P	
MULTI-MINERALS TABS PO	P		<i>potassium chloride TBCR PO 8 MEQ, 10 MEQ</i>	P	
<i>multiple minerals w/ vitamins TABS PO</i>	P		Sodium		
MULTISOURCE CALCIUM MAG/D TABS PO	P		<i>sodium chloride SOLN IJ 0.9 %</i>	P	
PROSTEON TABS PO	P		<i>sodium chloride TABS PO</i>	P	
THERACAL D2000 TABS PO	P		MISCELLANEOUS THERAPEUTIC CLASSES		
THERACAL D4000 TABS PO	P		Chelating Agents		
THERACAL RAPID REPLETION TABS PO	P		<i>penicillamine CAPS PO</i>	P	
Phosphate			<i>penicillamine TABS PO</i>	P	
K-PHOS-NEUTRAL PO (<i>pot phosphate monobasic w/ sod phosphate dibasic & monobasic</i>)	P		Enzymes		
K-PHOS-NEUTRAL PO (<i>pot phosphate monobasic w/ sod phosphate dibasic & monobasic</i>)	P		<i>papaya CHEW PO</i>	P	
<i>pot phosphate monobasic w/ sod phosphate dibasic & monobasic PO</i>	P		Immunomodulators		
<i>potassium & sodium phosphates PACK PO</i>	P		<i>lenalidomide PO</i>	P	SP
			REVLIMID PO	NP	SP; ST
			Immunosuppressive Agents		
			<i>azathioprine TABS PO 50 MG</i>	P	
			<i>cyclosporine modified (for microemulsion) CAPS PO 25 MG, 100 MG</i>	P	
			<i>cyclosporine modified (for microemulsion) SOLN PO</i>	P	
			<i>cyclosporine CAPS PO</i>	P	
			<i>mycophenolate mofetil CAPS PO</i>	P	

Drug Name	Drug Tier	Requirements/ Limits
<i>mycophenolate mofetil TABS PO</i>	P	
SANDIMMUNE SOLN PO 100 MG/ML	P	
<i>sirolimus SOLN</i>	P	
<i>sirolimus TABS PO</i>	P	
<i>tacrolimus CAPS PO</i>	P	
Lymphatic Agents		
SYLVANT	P	SP
PIK3CA-Related Overgrowth Spectrum (PROS) Agents		
VIJOICE PACK	P	SP
Potassium Removing Agents		
LOKELMA	P	
LOKELMA	NP	
<i>sodium polystyrene sulfonate POWD PO</i>	P	
<i>sodium polystyrene sulfonate SUSP CO 15 GM/60ML</i>	P	
VELTASSA PO 8.4 GM, 16.8 GM, 25.2 GM	NP	
Prostaglandins		
<i>alprostadil</i>	P	
PROSTIN VR	P	
MOUTH/THROAT/DENTAL AGENTS		
Anesthetics Topical Oral		
<i>benzocaine (dental) GEL 20 %</i>	P	
<i>benzocaine (dental) LIQD 20 %</i>	P	
<i>benzocaine (dental) SOLN 20 %</i>	P	
<i>benzocaine-menthol (mouth-throat) LOZG 15 MG-3.6 MG</i>	P	
HURRICANE SNAP-N-GO SWAB	P	

Drug Name	Drug Tier	Requirements/ Limits
Anti-infectives - Throat		
<i>clotrimazole</i>	NP	
NYSTATIN (<i>nystatin (mouth-throat)</i>)	P	
<i>nystatin (mouth-throat)</i>	P	
ORAVIG	NP	
Antiseptics - Mouth/Throat		
<i>chlorhexidine gluconate (mouth-throat)</i>	P	
<i>phenol (antiseptic) LIQD 1.4 %</i>	P	
Dental Products		
<i>sodium fluoride (dental) CREA</i>	P	
<i>sodium fluoride (dental) GEL</i>	P	
<i>sodium fluoride (dental) SOLN 0.2 %</i>	P	
Steroids - Mouth/Throat/Dental		
<i>triamcinolone acetonide (mouth)</i>	NP	
Throat Products - Misc.		
<i>cevimeline hcl PO</i>	P	
<i>pilocarpine hcl (oral) PO 5 MG</i>	P	
MULTIVITAMINS		
B-Complex Vitamins		
<i>b-complex vitamins CAPS PO</i>	P	
<i>b-complex vitamins TABS PO</i>	NP	
<i>b-complex vitamins TABS PO</i>	P	
<i>b-complex vitamins TBCR PO</i>	P	
CVS BALANCED B100 TBCR PO	P	
B-Complex w/ C		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>b complex w/ c CAPS PO</i>	P		SUPER B-COMPLEX/IRON/VITAMIN C TABS PO	P	
<i>b complex w/ c TABS PO</i>	P		B-Complex w/ Minerals		
<i>b-complex w/ c & calcium PO</i>	P		<i>b-complex w/ minerals LIQD PO</i>	P	
<i>b-complex w/ c & e + zn PO</i>	P		Bioflavonoid Products		
PRONUTRIENTS SUPER B COMPLEX PO	P		ACTITROM CAPS PO	P	
RA B-COMPLEX/VITAMIN C CR TBCR PO	P		ACTITROM-D CAPS PO	P	
B-Complex w/ Folic Acid			ADRENAL C FORMULA TABS PO	P	RX/OTC
ACTRIVIT	P	RX/OTC	ADVANCED C PLUS TABS PO	P	RX/OTC
BALANCED B-50 TBCR PO	P		BIO C 1:1 CAPS PO	P	
<i>b-complex w/ c & folic acid CAPS PO</i>	P	RX/OTC	<i>bioflavonoid products TABS PO</i>	P	RX/OTC
<i>b-complex w/ c & folic acid TABS PO</i>	P	RX/OTC	<i>bioflavonoid products TBCR PO</i>	P	
<i>b-complex w/ c & folic acid TABS PO 1 MG</i>	NP	RX/OTC	C 1000-BIOFLAVONOIDS-ROSE HIPS CAPS PO	P	
<i>b-complex w/ c & folic acid TABS PO</i>	P		DAFLONEX-XL TBCR PO	P	
<i>b-complex w/ folic acid CAPS PO</i>	P		EASY-C IMMUNE HEALTH W/BIOFLAV CAPS PO	P	
<i>b-complex w/ folic acid TABS PO</i>	P		FRUIT C 200 CHEW	P	
<i>b-complex w/biotin & folic acid TABS PO</i>	P		GRAPE SEED EXTRACT CAPS PO	P	
<i>b-complex w/biotin & folic acid TBCR PO</i>	P		GRAPE SEED CAPS PO	P	
NUTRIVIT	P	RX/OTC	QUERCETIN COMPLEX IMMUNE CAPS PO	P	
SM B-COMPLEX/VITAMIN C TABS PO	P	RX/OTC	THORNE VITAMIN C-FLAVONOIDS CAPS PO	P	
B-Complex w/ Iron			TROMBONEX CAPS PO	P	
APETIGEN-PLUS SOLN PO	P		TROMBONEX-D CAPS PO	P	
<i>b complex w/ iron TABS PO</i>	P		VASOFLEX FORTE CAPS PO	P	
			VASOFLEX CAPS PO	P	
			VITAMIN C CHEW	P	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Multiple Vitamins w/ Calcium			ALIVE ADULT PREMIUM CHEW PO	P	
<i>multiple vitamins w/ calcium TABS PO</i>	P		ALIVE CALCIUM BONE SUPPORT TABS PO	NP	RX/OTC
SM ONE DAILY ESSENTIAL TABS PO	P		ALIVE EVERYDAY IMMUNE HEALTH CAPS PO	P	RX/OTC
Multiple Vitamins w/ Iron			ALIVE HAIR, SKIN & NAILS CAPS PO	NP	RX/OTC
DAVIMET-IRON CHEW	NP		ALIVE HAIR, SKIN & NAILS CHEW PO	P	
<i>multiple vitamins w/ iron TABS PO</i>	P		ALIVE MENS 50+ MULTI GUMMY CHEW PO	P	
TAB-A-VITE/IRON/BETA CAROTENE TABS PO	P		ALIVE MENS GUMMY MULTIVITAMINS CHEW PO	P	
Multiple Vitamins w/ Minerals			ALIVE MULTI-VITAMIN CHEW PO	P	
ACTIVESSENTIALS FOR WOMEN MISC PO	P		ALIVE MULTI-VITAMIN LIQD PO	P	RX/OTC
ACTIVESSENTIALS/ONC OPLEX & D3 MISC PO	P		ALIVE ULTRA POTENCY ADULT TABS PO	NP	RX/OTC
ACTIVNUTRIENTS PERFORMANCE CAPS PO	P	RX/OTC	ALIVE WOMENS 50+ GUMMY CHEW PO	P	
ACTIVNUTRIENTS W/O IRON CAPS PO	P	RX/OTC	ALIVE WOMENS 50+ CHEW PO	P	
ACTIVNUTRIENTS CAPS PO	P	RX/OTC	ALIVE WOMENS GUMMY CHEW PO	P	
ADEK GUMMIES PLUS ZN CHEW PO	P		APETIBEX CAPS PO	P	RX/OTC
ADULT ONE DAILY GUMMIES CHEW PO	P		APPE-CURB CAPS PO	P	RX/OTC
AIRBORNE ELDERBERRY CHEW PO 90 MG-3.15 MCG-3.35 MG-7.5 MG-1 MG-150 MG	P		BARIATRIC FUSION CHEW PO	P	
AIRBORNE KIDS CHEW PO	P		BARIATRIC MULTIVITAMINS/IRON CAPS PO	P	RX/OTC
AIRBORNE+GOOD REST CHEW PO	P		BARIATRIC MULTIVITAMINS/IRON CHEW PO	P	
AIRBORNE+NATURAL ENERGY LIQD PO	P	RX/OTC	BARIATRIC MULTIVITAMINS CAPS PO	P	RX/OTC
AIRBORNE+PROBIOTIC CHEW PO	P		BIO-35 GLUTEN-FREE CAPS PO	P	RX/OTC
AIRBORNE CHEW PO	P				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
BIO-35 IRON FREE CAPS PO	P	RX/OTC	CENTRUM FRESH/FRUITY ADULT CHEW PO	P	
BIOCAL CAPS PO	P	RX/OTC	CENTRUM MULTI + OMEGA 3 CHEW PO	P	
BIOTECT PLUS CAPS PO	P	RX/OTC	CENTRUM SILVER CHEW PO	P	
BONEUP 3 PER DAY CAPS PO	P	RX/OTC	CENTRUM VITAMINTS CHEW PO	P	
BONEUP CAPS PO	P	RX/OTC	CHOICEFUL MULTIVITAMIN CAPS PO	P	RX/OTC
BOOSTNOW IMMUNE SUPPORT CAPS PO	P	RX/OTC	CHOICEFUL MULTIVITAMIN CHEW PO	P	
BURIED TREASURE ACTIVE 55 PLUS LIQD PO	P	RX/OTC	CONCEPTIONXR MOTILITY SUPPORT MISC PO	P	
CELEBRATE MULTI-COMplete 18 CAPS PO	P	RX/OTC	CULTURELLE PROBIOTICS + MULTIV CHEW PO	P	
CELEBRATE MULTI-COMplete 18 CHEW PO	P		CVS ADULT 50+ EYE HEALTH CAPS PO	P	RX/OTC
CELEBRATE MULTI-COMplete 36 CAPS PO	P	RX/OTC	CVS ADULT MULTIVITAMIN CHEW PO	P	
CELEBRATE MULTI-COMplete 36 CHEW PO	P		CVS AIRSHIELD IMMUNITY SUPPORT CHEW PO	P	
CELEBRATE MULTI-COMplete 45 CAPS PO	P	RX/OTC	CVS DIABETES HEALTH SUPPORT MISC PO	P	
CELEBRATE MULTI-COMplete 45 CHEW PO	P		CVS EYE HEALTH ADULT 50+ CAPS PO	P	RX/OTC
CELEBRATE MULTI-COMplete 60 CAPS PO	P	RX/OTC	CVS IMMUNE SUPPORT CAPS PO	P	RX/OTC
CELEBRATE MULTI-COMplete 60 CHEW PO	P		CVS SPECTRAVITE ADULT 50+ CHEW PO	P	
CENTRUM ADULT 50+ MULTIGUMMIES CHEW PO	P		CVS SPECTRAVITE WOMEN CHEW PO	P	
CENTRUM ADULTS MULTIGUMMIES CHEW PO	P		CVS VISION HEALTH CAPS PO	P	RX/OTC
CENTRUM FLAVOR BURST ADULT CHEW PO	P		DAILY DIABETES HEALTH PACK MISC PO	P	
CENTRUM FLAVOR BURST CHEW PO	P				
CENTRUM FRESH/FRUITY 50+ CHEW PO	P				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
DAILY HEART HEALTH SUPPORT MISC PO	P		EYE MULTIVITAMIN/LUTEIN CAPS PO	P	RX/OTC
DAILY PAK MAXIMUM MULTIVITAMIN MISC PO	P		EYE MULTIVITAMIN CAPS PO	P	RX/OTC
DECUBI-VITE CAPS PO	P	RX/OTC	FOLAGENT DHA CAPS PO	P	RX/OTC
DEKAS BARIATRIC CHEW PO	P		FOLAMED DHA CAPS PO	P	RX/OTC
DEKAS PLUS OCEAN CAPS PO	P	RX/OTC	FOLAPRIME TABS PO	NP	RX/OTC
DEKAS PLUS CAPS PO	P	RX/OTC	FT IMMUNE SUPPORT CHEW PO	P	
DEKAS PLUS CHEW PO	P		GENADEK STEP 1 CAPS PO	P	RX/OTC
DEPLIN MA CAPS PO	P	RX/OTC	GENADEK STEP 2 CAPS PO	P	RX/OTC
DEXATRAN CAPS PO	P	RX/OTC	HAIR/SKIN/NAILS CAPS PO	P	RX/OTC
DIABETES HEALTH MISC PO	P		HEALTHY EYES SUPERVISION 2 CAPS PO	P	RX/OTC
EMERGEN-C APPLE CIDER VINEGAR CHEW PO	P		IMMUNE ESSENTIALS DAILY CAPS PO	P	RX/OTC
EMERGEN-C ASHWAGANDHA CHEW PO	P		IMMUNE SUPPORT CHEW PO	P	
EMERGEN-C ELDERBERRY CHEW PO	P		KEYFOLIC TABS PO	NP	RX/OTC
EMERGEN-C IMMUNE PLUS/VIT D CHEW PO	P		KP MENS DAILY PACK MISC PO	P	
EMERGEN-C IMMUNE+ CHEW PO	P		KP WOMENS DAILY MISC PO	P	
EMERGEN-C TURMERIC & GINGER CHEW PO	P		LIFE PACK MENS MISC PO	P	
EMERGEN-C VITAMIN C CHEW PO	P		LIFE PACK WOMENS MISC PO	P	
ENDUR-VM WITH IRON TBCR PO	P		LIVITA ADULTS LIQD PO	P	RX/OTC
ENDUR-VM TBCR PO	P		LYSIPLEX PLUS LIQD PO	P	RX/OTC
EQ MULTIVITAMINS ADULT GUMMY CHEW PO	P		MENATROL CAPS PO	P	RX/OTC
EQL ONE DAILY ADULT GUMMIES CHEW PO	P		MENS 50+ ADVANCED CAPS PO	P	RX/OTC
EYE HEALTH CAPS PO	P	RX/OTC	MENS MULTIVITAMIN GUMMIES CHEW PO	P	
			MENS MULTIVITAMIN CHEW PO	P	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MENS PACK MISC PO	P		OCUVITE ADULT FORMULA CAPS PO	P	RX/OTC
MOOD FOOD ES CAPS PO	P	RX/OTC	OCUVITE-LUTEIN CAPS PO	P	RX/OTC
MOOD FOOD CAPS PO	P	RX/OTC	ONE A DAY IMMUNITY DEFENSE CHEW PO	P	
MULTIA CAPS PO	P	RX/OTC	ONE A DAY MENS VITACRAVES CHEW PO	P	
<i>multiple vitamins w/ minerals CAPS PO</i>	P	RX/OTC	ONE A DAY WOMEN 50 PLUS CHEW PO	P	
<i>multiple vitamins w/ minerals CHEW PO</i>	P		ONE-A-DAY FOR HER VITACRAVES CHEW PO	P	
<i>multiple vitamins w/ minerals CHEW PO</i>	P		ONE-A-DAY FOR HIM VITACRAVES CHEW PO	P	
<i>multiple vitamins w/ minerals LIQD PO</i>	P	RX/OTC	ONE-A-DAY MENS VITACRAVES CHEW PO	P	
<i>multiple vitamins w/ minerals TBCR PO</i>	P		ONE-A-DAY VITACRAVES ADULT CHEW PO	P	
MULTI-VITE LIQD PO	P	RX/OTC	ONE-A-DAY VITACRAVES IMMUNITY CHEW PO	P	
MVW COMPLETE FORMULATION D3000 CAPS PO	P	RX/OTC	ONE-A-DAY VITACRAVES SOUR CHEW PO	P	
MVW COMPLETE FORMULATION D5000 CAPS PO	P	RX/OTC	ONE-A-DAY VITACRAVES CHEW PO	P	
MVW COMPLETE FORMULATION MINIS CAPS PO	P	RX/OTC	ONE-A-DAY WOMENS VITACRAVES CHEW PO	P	
MVW COMPLETE FORMULATION CAPS PO	P	RX/OTC	ONE-DAILY MULTI CAPS CAPS PO	P	RX/OTC
MVW HI-D ADEK GUMMIES CHEW PO	P		OPTIFAST POST BARIATRIC CHEW PO	P	
MVW MODULATOR FORMULATION MINI CAPS PO	P	RX/OTC	OPTIMUM AIRVITES CHEW PO	P	
MVW MODULATOR FORMULATION CAPS PO	P	RX/OTC	OPTISOURCE POST BARIATRIC SURG CHEW PO	P	
MVW ORANGE CHEWABLES CHEW PO	P		OPURITY BYPASS OPTIMIZED CHEW PO	P	
OCUVEL CAPS PO 250 MG-0.5 MG-5 MG-1 MG-40 MG-1 MG-200 UNIT	P	RX/OTC	PREMIUM PACKETS MISC PO	P	
OCUVITE ADULT 50+ CAPS PO	P	RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PRESCRIPTION SUPPORT MULTIVIT CAPS PO	P	RX/OTC	ULTRA MEGA GOLD TBCR PO	P	
PRESERVISION AREDS 2+MULTI VIT CAPS PO	P	RX/OTC	ULTRA MEGA TWO TBCR PO	P	
PRESERVISION AREDS 2 CAPS PO	P	RX/OTC	ULTRA MEGA TBCR PO	P	
PRESERVISION AREDS 2 CHEW PO	P		VISION HEALTH CAPS PO	P	RX/OTC
PRESERVISION AREDS CAPS PO	P	RX/OTC	VISION OPTIMIZER CAPS PO	P	RX/OTC
PRESERVISION/LUTEIN CAPS PO	P	RX/OTC	VISTA ADVANCED AREDS2 FORMULA CAPS PO	P	RX/OTC
PROBIOTICS + BARIATRIC MULTI CAPS PO	P	RX/OTC	VISTA ADVANCED DRY EYE FORMULA CAPS PO	P	RX/OTC
PRORENAL + D W/ OMEGA-3 CAPS PO	P	RX/OTC	VITABEX PLUS CAPS PO	P	RX/OTC
PROTECT CARDIO AF CAPS PO	P	RX/OTC	VITABEX CAPS PO	P	RX/OTC
PROTECT PLUS SO CAPS PO	P	RX/OTC	VITACHEW ADULT MULTI VITAMIN CHEW PO	P	
PROTEGRA CAPS PO	P	RX/OTC	VITAJoy MULTI GUMMIES ADULT CHEW PO	P	
QC OCUHEALTH VISION SUPPORT 2 CAPS PO	P	RX/OTC	VITEYES CLASSIC ADVANCED CAPS PO	P	RX/OTC
REMEDIENT CAPS PO	P	RX/OTC	VITEYES CLASSIC MACULAR SUPPOR CAPS PO	P	RX/OTC
SKIN HAIR & NAILS ADVANCED CAPS PO	P	RX/OTC	VITEYES CLASSIC+OMEGA-3 CAPS PO	P	RX/OTC
SUPER ANTIOXIDANT CAPS PO	P	RX/OTC	WAL-BORN VITAMIN C CHEW PO	P	
SUPPORT LIQD PO	P	RX/OTC	WOMENS MULTI GUMMIES CHEW PO	P	
SYSTANE ICAPS AREDS2 CHEW PO	P		WOMENS MULTIVITAMIN + COLLAGEN CHEW PO	P	
THERA M PLUS TABS PO	P	RX/OTC	WOMENS MULTIVITAMIN GUMMIES CHEW PO	P	
THERAMILL FORTE CAPS PO	P	RX/OTC	WOMENS PACK MISC PO	P	
THERANATAL LACTATION COMPLETE MISC PO	P		YOUR LIFE MULTI ADULT GUMMIES CHEW PO	P	
THERANATAL LACTATION ONE CAPS PO	P	RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
YUM-VS COMPLETE MULTIVITAMIN CHEW PO	P		OMNICAP TABS PO	P	RX/OTC
YUMVS MULTI ZERO CHEW PO	P		ONE DAILY ESSENTIALS TABS PO	P	RX/OTC
YUMVS ZERO DIABETIC MULTIVITAM CHEW PO	P		ONE DAILY ESSENTIAL TABS PO	P	RX/OTC
Multivitamins			ONE VITE DAILY MULTIVITAMIN TABS PO	P	RX/OTC
ALTRIXA TABS PO	P	RX/OTC	ONE-A-DAY ESSENTIAL TABS PO (<i>multiple vitamin</i>)	P	RX/OTC
AMLADEX TABS PO	P	RX/OTC	ONE-A-DAY MENS TABS PO (<i>multiple vitamin</i>)	P	RX/OTC
DAILY MULTIPLE VITAMINS TABS PO	P	RX/OTC	QUINTABS TABS PO	P	RX/OTC
DEKAS ESSENTIAL CAPS PO	P	RX/OTC	STRESS FORMULA/ZINC/ENERGY TABS PO	P	RX/OTC
DEKAS ESSENTIAL LIQD PO	P		THERA TABS PO	P	RX/OTC
DIALYVITE 800 LIQD PO	P		THEREMS TABS PO	P	RX/OTC
ESTROFACTORS TABS PO	P	RX/OTC	TM-DAILY VITE TABS PO	P	RX/OTC
FOLCYTEINE TABS PO	P	RX/OTC	TRUE MULTIVITAMIN TABS PO	P	RX/OTC
GENICIN VITA-Q TABS PO	P	RX/OTC	ZELDANA CAPS PO	P	RX/OTC
HIGH POTENCY MULTIVITAMIN TABS PO	P	RX/OTC	Ped Multi Vitamins w/Fl & FE		
MOMMY'S BLISS MV ORGANIC DROPS LIQD PO	P		<i>ped multivitamins w/fl & iron SOLN PO 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
MULTI VITAMIN W/D-3 TABS PO	P	RX/OTC	Ped Multiple Vitamins w/ Minerals		
MULTI VITAMIN TABS PO	P	RX/OTC	LIVITA CHILDREN LIQD PO	NP	RX/OTC
<i>multiple vitamin CAPS PO</i>	P	RX/OTC	Ped MV w/ Fluoride		
<i>multiple vitamin TABS PO</i>	P	RX/OTC	DAVIMET-FLUORIDE CHEW PO	NP	
<i>multiple vitamin TABS PO</i>	NP	RX/OTC	FLORAFOL PEDIATRIC CHEW PO	NP	RX/OTC
MULTIVITAMIN ADULT TABS PO	P	RX/OTC	MULTIVITAMIN + FLUORIDE CHEW PO 0.25 MG	P	RX/OTC
MULTIVITAMIN+ LIQD PO	P				
MULTIVITAMIN TABS PO	P	RX/OTC			
NEOMULTIVITE TABS PO	P	RX/OTC			
NUTRA-Z+ CAPS PO	P	RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MULTIVITAMIN/FLUORIDE CHEW PO	P	RX/OTC	PC PEDIATRIC POLY-VITAMIN DROP SOLN PO	P	
MULTIVITAMIN/FLUORIDE CHEW PO	P	RX/OTC	<i>pediatric multiple vitamins CHEW PO</i>	P	
MULTIVITAMIN/FLUORIDE SOLN PO	P	RX/OTC	POLY-VI-SOL SOLN PO	P	
MULTI-VIT-FLOR CHEW PO	P	RX/OTC	POLY-VITA SOLN PO	P	
<i>pediatric multivitamins w/fl CHEW PO</i>	P	RX/OTC	POLY-VITE PEDIATRIC SOLN PO	P	
<i>pediatric multivitamins w/fl CHEW PO 0.5 MG, 1 MG</i>	NP	RX/OTC	Pediatric Vitamins		
POLY-VI-FLOR CHEW PO	P	RX/OTC	HONEY BEARS PO	P	
QUFLORA PEDIATRIC CHEW PO	P	RX/OTC	MULTIVITAMIN GUMMIES CHILDRENS PO	P	
SOLUVITA ACD WITH FLUORIDE SOLN PO	NP	RX/OTC	Prenatal Vitamins		
VITAMINS ACD-FLUORIDE SOLN PO	P	RX/OTC	ALIVE DAILY SUP PRENATAL GUMMI	NP	QL(2 EA daily); AL(Up to 50 yrs old)
Ped MV w/ Iron			ALIVE PRENATAL	NP	QL(1 EA daily); AL(Up to 50 yrs old)
HONEY BEARS W/IRON-ZINC CHEW PO	P		AZESCO TABS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)
MULTIVITAMIN DROPS/IRON SOLN PO	P		BRAINSTRONG PRENATAL MISC	NP	QL(2 EA daily); AL(Up to 50 yrs old)
MULTIVITAMINS PLUS IRON CHILD CHEW PO	P		CADEAU DHA PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)
<i>pediatric multiple vitamins w/ iron CHEW PO</i>	P		CITRANATAL B-CALM PO 120 MG-25 MG-1 MG-400 UNIT-120 MG-20 MG	NP	QL(2 EA daily); AL(Up to 50 yrs old)
POLY-VITE/IRON SOLN PO	P		CITRANATAL MEDLEY	NP	QL(1 EA daily); AL(Up to 50 yrs old)
Pediatric Multiple Vitamins			C-NATE DHA CAPS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)
BPROTECTED PEDIA POLY-VITE SOLN PO	P		COMPLETE NATAL DHA PO	P	QL(2 EA daily); AL(Up to 50 yrs old)
FT CHILDRENS MULTI PLUS IMMUNE CHEW PO	P		COMPLETENATE CHEW PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)
MULTIVITAMIN INFANT & TODDLER SOLN PO	P				
NOVAMV PEDIATRIC MULTI-VITAMIN LIQD PO	P				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CONCEPT DHA PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)	KPN PRENATAL TABS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)
CONCEPT OB PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)	M-NATAL PLUS TABS PO	P	QL(1 EA daily); AL(Up to 50 yrs old); RX/OTC
CVS PRENATAL GUMMY 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	QL(2 EA daily); AL(Up to 50 yrs old)	MULTI PRENATAL TABS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)
CVS PRENATAL GUMMY	NP	QL(1 EA daily); AL(Up to 50 yrs old)	MULTI-MAC PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)
CVS PRENATAL MULTI+DHA CAPS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)	NATAL PNV TABS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)
CVS PRENATAL TABS PO 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	QL(1 EA daily); AL(Up to 50 yrs old)	NEONATAL + DHA MISC PO	NP	QL(2 EA daily); AL(Up to 50 yrs old)
CVS WOMENS PRENATAL+DHA MISC PO	NP	QL(2 EA daily); AL(Up to 50 yrs old)	NEONATAL COMPLETE TABS PO 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	QL(1 EA daily); AL(Up to 50 yrs old); RX/OTC
DERMACINRX PRETRATE TABS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)	NEONATAL FE	NP	QL(1 EA daily); AL(Up to 50 yrs old)
ENBRACE HR	NP	QL(1 EA daily); AL(Up to 50 yrs old)	NEONATAL PLUS TABS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old); RX/OTC
FOLIVANE-OB PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)	NEO-VITAL RX TABS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)
GNP PRENATAL TABS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)	NESTABS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)
KOSHER PRENATAL PLUS IRON TABS PO	NP	QL(2 EA daily); AL(Up to 50 yrs old)	NESTABS DHA PO	NP	QL(2 EA daily); AL(Up to 50 yrs old)
KOSHER PRENATAL PLUS IRON TABS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)	NESTABS ONE	NP	QL(1 EA daily); AL(Up to 50 yrs old)
KP PRENATAL MULTIVITAMINS TABS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)	NIVA-PLUS TABS PO	P	QL(1 EA daily); AL(Up to 50 yrs old); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
OB COMPLETE ONE PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)	PREGENNA PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)
OB COMPLETE PETITE	NP	QL(1 EA daily); AL(Up to 50 yrs old)	PRENA 1 TRUE	NP	QL(2 EA daily); AL(Up to 50 yrs old)
OB COMPLETE PREMIER	NP	QL(1 EA daily); AL(Up to 50 yrs old)	PRENA1	NP	QL(1 EA daily); AL(Up to 50 yrs old)
OB COMPLETE/DHA	NP	QL(2 EA daily); AL(Up to 50 yrs old)	PRENA1 PEARL	NP	QL(1 EA daily); AL(Up to 50 yrs old)
OB COMPLETE TABS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)	PRENATABS FA TABS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old); RX/OTC
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	QL(2 EA daily); AL(Up to 50 yrs old)	PRENATAL (W/IRON & FA) TABS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old); RX/OTC
			PRENATAL 19 TABS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old); RX/OTC
ONE-A-DAY WOMENS PRENATAL 1	NP	QL(1 EA daily); AL(Up to 50 yrs old)	PRENATAL COMPLETE TABS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)
ONE-A-DAY WOMENS PRENATAL 1	NP	QL(2 EA daily); AL(Up to 50 yrs old)	PRENATAL ESSENTIALS CAPS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)
ONE-A-DAY WOMENS PRENATAL MISC PO 60 MG-2.5 MG-300 MCG-800 MCG-400 UNIT-8 MCG-2 MG-20 MG-4000 UNIT-10 MG-28 MG-1.7 MG-50 MG-15 MG-2 MG-200 MG-300 MG-150 MCG-30 UNIT-23 MG-223 MG	NP	QL(2 EA daily); AL(Up to 50 yrs old)	PRENATAL FORMULA A-FREE TABS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)
			PRENATAL FORMULA CAPS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)
			PRENATAL GUMMIES/DHA & FA	NP	QL(2 EA daily); AL(Up to 50 yrs old)
PNV PRENATAL PLUS MULTIVIT+DHA MISC PO	NP	QL(2 EA daily); AL(Up to 50 yrs old)	PRENATAL MULTI +DHA CAPS PO 100 MG-2.6 MG-800 MCG-400 UNIT-4 MCG-1.7 MG-18 MG-27 MG-150 MG-1.5 MG-25 MG-200 MG-11 UNIT-28 MG-4000 UNIT-228 MG, 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	QL(1 EA daily); AL(Up to 50 yrs old)
PNV TABS 20-1 PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)			
PNV-OMEGA PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)			
PREGEN DHA CAPS	NP	QL(1 EA daily); AL(Up to 50 yrs old)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PRENATAL MULTIVITAMIN + DHA MISC PO	NP	QL(2 EA daily); AL(Up to 50 yrs old)	PRENATAL/IRON TABS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)
PRENATAL MULTIVITAMIN PLUS DHA CAPS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)	PRENATAL+DHA MISC PO	NP	QL(2 EA daily); AL(Up to 50 yrs old)
PRENATAL ONE DAILY TABS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)	PRENATAL TABS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)
PRENATAL PLUS VITAMIN/MINERAL TABS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old); RX/OTC	PRENATAL TABS PO 100 UNIT-0.75 MG-25 MCG-200 MCG-0.5 MG-2.5 MCG-500 UNIT-0.75 MG-5 MG-2.5 MG-6.75 MG-0.5 MG-3.75 MG-15 MG-25 MG-0.5 MG-50 MG-3.75 UNIT, 120 MG-2.6 MG-0.8 MG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-4000 UNIT-30 UNIT, 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	NP	QL(2 EA daily); AL(Up to 50 yrs old)
<i>prenatal vit w/ ferrous fumarate-folic acid CHEW PO</i>	NP	QL(1 EA daily); AL(Up to 50 yrs old)			
<i>prenatal vit w/ ferrous fumarate-folic acid TABS PO 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	QL(1 EA daily); AL(Up to 50 yrs old)			
<i>prenatal vit w/ ferrous fumarate-l methylfolate-folic acid PO</i>	NP	QL(1 EA daily); AL(Up to 50 yrs old)			
<i>prenatal vit w/ iron carbonyl-folic acid TABS PO 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	QL(1 EA daily); AL(Up to 50 yrs old)	PRENATAL TABS PO 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	QL(1 EA daily); AL(Up to 50 yrs old); RX/OTC
PRENATAL VITAMIN AND MINERAL TABS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)	PRENATAL-U CAPS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)
PRENATAL VITAMIN TABS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)	PRENATE	NP	QL(1 EA daily); AL(Up to 50 yrs old)
<i>prenatal without a w/ fe fumarate-l methylfolate-fa-dha PO</i>	NP	QL(1 EA daily); AL(Up to 50 yrs old)	PRENATE AM	NP	QL(1 EA daily); AL(Up to 50 yrs old)
			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	QL(1 EA daily); AL(Up to 50 yrs old)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
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	QL(1 EA daily); AL(Up to 50 yrs old)	SE-NATAL 19 CHEW PO	P	QL(1 EA daily); AL(Up to 50 yrs old)
PRENATE ENHANCE PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)	SE-NATAL 19 TABS PO	P	QL(1 EA daily); AL(Up to 50 yrs old); 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	QL(1 EA daily); AL(Up to 50 yrs old)	TARON-C DHA PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)
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	QL(1 EA daily); AL(Up to 50 yrs old)	THERANATAL COMPLETE MISC PO	NP	QL(2 EA daily); AL(Up to 50 yrs old)
PRENATE PIXIE	NP	QL(1 EA daily); AL(Up to 50 yrs old)	THERANATAL CORE NUTRITION TABS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old); RX/OTC
PRENATE RESTORE PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)	THERANATAL ONE CAPS	NP	QL(1 EA daily); AL(Up to 50 yrs old)
PRENATRIX TABS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old); RX/OTC	THERANATAL OVAVITE	NP	QL(2 EA daily); AL(Up to 50 yrs old)
PRENATRYL TABS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old); RX/OTC	THRIVITE RX TABS PO	P	QL(1 EA daily); AL(Up to 50 yrs old); RX/OTC
PRIMACARE PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)	TRICARE TABS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old); RX/OTC
PROVIDA OB PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)	TRINATAL RX 1 TABS PO	P	QL(1 EA daily); AL(Up to 50 yrs old)
RA PRENATAL TABS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)	TRISTART DHA PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)
SELECT-OB+DHA MISC PO	NP	QL(2 EA daily); AL(Up to 50 yrs old)	ULTRA PRENATAL VIT/MIN + DHA CAPS	NP	
SELECT-OB CHEW	NP	QL(1 EA daily); AL(Up to 50 yrs old)	VIRT-NATE DHA CAPS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)
			VIRT-PN DHA PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)
			VITAFOL FE+	NP	QL(1 EA daily); AL(Up to 50 yrs old)
			VITAFOL GUMMIES	NP	QL(2 EA daily); AL(Up to 50 yrs old)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
VITAFOL ULTRA	NP	QL(1 EA daily); AL(Up to 50 yrs old)	ADRENAL STRESS CALM TABS PO	P	RX/OTC
VITAFOL-OB+DHA MISC PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)	ADRENALIV CAPS PO	P	RX/OTC
VITAFOL-OB TABS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)	ADRENOLD CAPS PO	P	RX/OTC
VITAFOL-ONE CAPS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)	ALLERWELL ALLERGY FORMULA TABS PO	P	RX/OTC
VITAMEDMD ONE RX/QUATREFOLIC PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)	BILBERRY PLUS CAPS PO	P	RX/OTC
VITAMEDMD REDICHEW RX	NP	QL(1 EA daily); AL(Up to 50 yrs old)	BIOTIN PLUS KERATIN TABS PO	P	RX/OTC
VITAPEARL	NP	QL(1 EA daily); AL(Up to 50 yrs old)	BRAIN MIGHT/DHA & CO Q10 TABS PO	P	RX/OTC
VITATRUE	NP	QL(2 EA daily); AL(Up to 50 yrs old)	CARDIOPRESS CAPS PO	P	RX/OTC
WESCAP-PN DHA PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)	CENTRUM PERFORMANCE TABS PO	P	RX/OTC
WESNATAL DHA COMPLETE PO	P	QL(2 EA daily); AL(Up to 50 yrs old)	CENTRUM SPECIALIST ENERGY TABS PO	P	RX/OTC
WESNATE DHA CAPS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)	CHOLASE CONTROL CAPS PO	P	RX/OTC
WESTAB PLUS TABS PO	P	QL(1 EA daily); AL(Up to 50 yrs old); RX/OTC	COLLAGEN ULTRA CAPS PO	P	RX/OTC
WESTGEL DHA PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)	CORTICARE B CAPS PO	P	RX/OTC
ZALVIT TABS PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)	CVS HAIR/SKIN/NAILS TABS PO	P	RX/OTC
ZATEAN-PN DHA PO	NP	QL(1 EA daily); AL(Up to 50 yrs old)	ELON MATRIX 5000 COMPLETE TABS PO	P	RX/OTC
Specialty Vitamins Products			ELON MATRIX 5000 TABS PO	P	RX/OTC
ADRENAL MANAGER CAPS PO	P	RX/OTC	ELON MATRIX COMPLETE TABS PO	P	RX/OTC
			ELON MATRIX PLUS TABS PO	P	RX/OTC
			ELON R3 TABS PO	P	RX/OTC
			FEMQUIL CAPS PO	P	RX/OTC
			GLYCOTROL COMPLETE CAPS PO	P	RX/OTC
			GLYCOTROL CAPS PO	P	RX/OTC
			HAIR FARE TABS PO	P	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
HAIR NOURISHING SUPPLEMENT TABS PO	P	RX/OTC	NERVIVE NERVE RELIEF TABS PO	P	RX/OTC
HEALTHY HEART COMPLEX TABS PO	P	RX/OTC	NITRIVIA CAPS PO	P	RX/OTC
HEART SAVIOR CAPS PO	P	RX/OTC	PRO HERS RX CAPS PO	P	RX/OTC
HEART TABS TABS PO	P	RX/OTC	PRO HIS RX CAPS PO	P	RX/OTC
IMMUNERX CAPS PO	P	RX/OTC	PRO PCOS RX CAPS PO	P	RX/OTC
IMMUNICARE CAPS PO	P	RX/OTC	RA EAR CARE TABS PO	P	RX/OTC
INFLAMEX CAPS PO	P	RX/OTC	RETAIN VISION CAPS PO	P	RX/OTC
INULOSE BLOOD SUGAR SUPPORT CAPS PO	P	RX/OTC	<i>specialty vitamins products TABS PO</i>	P	RX/OTC
LIPIDSHIELD PLUS TABS PO	P	RX/OTC	SYNERTROPIN CAPS PO	P	RX/OTC
LIPOTRIAD VISION SUPPORT PLUS CAPS PO	P	RX/OTC	THERABETIC EYE HEALTH TABS PO	P	RX/OTC
LIPOTRIAD VISION SUPPORT CAPS PO	P	RX/OTC	UPSPRING HE NATAL TABS PO	P	RX/OTC
LIPOTRIAD VISIONARY CAPS PO	P	RX/OTC	Vitamin Mixtures		
MEDCAPS DPO CAPS PO	P	RX/OTC	COD LIVER OIL FOR KIDS OIL PO	P	RX/OTC
MEDCAPS GI CAPS PO	P	RX/OTC	<i>cod liver oil CAPS PO</i>	P	
MEDCAPS IS CAPS PO	P	RX/OTC	COD LIVER OIL OIL PO	P	RX/OTC
MEDCAPS T3 CAPS PO	P	RX/OTC	CRANBERRY URINARY COMFORT PO	P	
MEMORALL CAPS PO	P	RX/OTC	E-400/SELENIUM CAPS PO	P	
MEMORY COMPLEX BRAIN HEALTH TABS PO	P	RX/OTC	ECEE PLUS TABS PO	P	
METHYL PROTECT CAPS PO	P	RX/OTC	<i>niacin w/ inositol PO</i>	P	
METHYL-GUARD PLUS CAPS PO	P	RX/OTC	NORWEGIAN COD LIVER OIL OIL PO	P	RX/OTC
METHYL-GUARD CAPS PO	P	RX/OTC	QC COD LIVER OIL OIL PO	P	RX/OTC
MG PLUS PROTEIN TABS PO	P	RX/OTC	RA COD LIVER OIL OIL PO	P	RX/OTC
MIL ADREGEN TABS PO	P	RX/OTC	<i>vitamins a & d w/ c PO</i>	P	
MM BIOTIN/KERATIN CAPS PO	P	RX/OTC	<i>vitamins a & d CAPS PO</i>	P	
			Vitamins w/ Lipotropics		
			ACTIFLOVIT EAR HEALTH TABS PO	P	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>vitamins w/ lipotropics CAPS PO</i>	P		ZANAFLEX TABS PO 4 MG (<i>tizanidine hcl</i>)	NP	
<i>vitamins w/ lipotropics TABS PO</i>	P		Direct Muscle Relaxants		
MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms			DANTRIUM CAPS PO 25 MG (<i>dantrolene sodium</i>)	NP	
Central Muscle Relaxants			<i>dantrolene sodium CAPS PO</i>	NP	
AMRIX CP24 PO (<i>cyclobenzaprine hcl</i>)	NP		Muscle Relaxant Combinations		
<i>baclofen SOLN PO 5 MG/5ML, 10 MG/5ML</i>	NP		NORGESIC FORTE PO (<i>orphenadrine w/ aspirin & caff</i>)	NP	
<i>baclofen SUSP</i>	NP		<i>orphenadrine w/ aspirin & caff PO</i>	NP	
<i>baclofen TABS PO 5 MG, 10 MG, 20 MG</i>	P		Viscosupplements		
<i>baclofen TABS PO 15 MG</i>	NP		SYNISC ONE SOSY	P	SP
<i>carisoprodol TABS PO</i>	NP	PA	SYNISC SOSY	P	SP
<i>chlorzoxazone TABS PO</i>	NP		NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus		
<i>cyclobenzaprine hcl CP24 PO</i>	NP		Nasal Agent Combinations		
<i>cyclobenzaprine hcl TABS PO 5 MG, 10 MG</i>	P		<i>azelastine hcl-fluticasone propionate SUSP</i>	NP	
<i>cyclobenzaprine hcl TABS PO 7.5 MG</i>	NP		DYMISTA SUSP (<i>azelastine hcl-fluticasone propionate</i>)	NP	
FLEQSUVY SUSP (<i>baclofen</i>)	NP		RYALTRIS	NP	
LYVISPAH PACK	NP		Nasal Agents - Misc.		
<i>metaxalone PO</i>	NP		AYR SALINE NASAL DROPS SOLN	P	
<i>methocarbamol TABS PO 1000 MG</i>	NP		FT SALINE NASAL SPRAY SOLN	NP	
<i>methocarbamol TABS PO 500 MG, 750 MG</i>	P		FT SALINE NASAL SPRAY SOLN	P	
<i>orphenadrine citrate TB12 PO</i>	NP		LITTLE REMEDIES SALINE SOLN	P	
SOMA TABS PO (<i>carisoprodol</i>)	NP	PA	<i>saline SOLN 0.65 %</i>	P	
<i>tizanidine hcl CAPS PO</i>	NP		Nasal Antiallergy		
<i>tizanidine hcl TABS PO</i>	P		<i>azelastine hcl 0.1 %, 137 MCG/SPRAY</i>	P	
ZANAFLEX CAPS PO (<i>tizanidine hcl</i>)	NP				

Drug Name	Drug Tier	Requirements/ Limits
<i>azelastine hcl 0.15 %</i>	NP	RX/OTC
<i>cromolyn sodium (nasal) 5.2 MG/ACT</i>	P	
<i>olopatadine hcl (nasal)</i>	NP	
PATANASE (<i>olopatadine hcl (nasal)</i>)	NP	
Nasal Anticholinergics		
<i>ipratropium bromide (nasal)</i>	P	
Nasal Steroids		
BECONASE AQ	NP	
<i>budesonide (nasal)</i>	NP	
<i>flunisolide (nasal)</i>	NP	
<i>fluticasone propionate (nasal) SUSP</i>	NP	RX/OTC
<i>fluticasone propionate (nasal) SUSP</i>	P	RX/OTC
<i>mometasone furoate (nasal) SUSP</i>	NP	RX/OTC
NASACORT ALLERGY 24HR AERO (<i>triamcinolone acetonide (nasal)</i>)	NP	
NASONEX 24HR SUSP (<i>mometasone furoate (nasal)</i>)	NP	RX/OTC
OMNARIS SUSP	NP	
QNASL	NP	
QNASL CHILDRENS	NP	
<i>triamcinolone acetonide (nasal) AERO</i>	P	
<i>triamcinolone acetonide (nasal) AERO</i>	NP	
XHANCE EXHU	NP	
ZETONNA AERS	NP	
Sympathomimetic Decongestants		
<i>epinephrine hcl (nasal)</i>	P	
<i>oxymetazoline hcl SOLN 0.05 %</i>	NP	

Drug Name	Drug Tier	Requirements/ Limits
<i>phenylephrine hcl (oral) TABS PO</i>	P	
<i>pseudoephedrine hcl TABS PO</i>	P	
<i>pseudoephedrine hcl TB12 PO</i>	P	
NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles		
ALS Agents		
<i>riluzole TABS PO</i>	P	
Neuromuscular Blocking Agent - Neurotoxins		
BOTOX IJ	NP	SP
NUTRIENTS		
Misc. Nutritional Substances		
KELP-B6-LECITHIN-VINEGAR CAPS PO	P	
<i>omega-3 fatty acids CAPS PO 1000 MG</i>	P	
Proteins		
<i>glutamine TABS PO</i>	P	
OPHTHALMIC AGENTS - Drugs to Treat the Eye		
Artificial Tears and Lubricants		
ALCON TEARS SOLN	P	
<i>artificial tear solution</i>	P	
BION TEARS PF	P	
<i>carboxymethylcellulose sodium (ophth) GEL</i>	P	
<i>carboxymethylcellulose sodium (ophth) SOLN 0.25 %, 0.5 %</i>	P	
<i>carboxymethylcellulose sodium (ophth) SOLN 0.25 %, 0.5 %</i>	P	
<i>dextran 70-hypromellose 0.3 %-0.1 %</i>	P	
GENTEAL TEARS MODERATE PF (<i>dextran 70-hypromellose</i>)	P	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>glycerin-hypromellose-polyethylene glycol 400</i>	P		COSOPT PF (<i>dorzolamide hcl-timolol maleate</i>)	NP	
LACRISERT	P		<i>dorzolamide hcl-timolol maleate</i>	P	
<i>polyethylene glycol-propylene glycol (ophth) SOLN 0.3 %-0.4 %</i>	P		<i>dorzolamide hcl-timolol maleate</i>	P	
<i>polyvinyl alcohol 1.4 %</i>	NP		<i>dorzolamide hcl-timolol maleate</i>	NP	
<i>polyvinyl alcohol 1.4 %</i>	P		ISTALOL SOLN (<i>timolol maleate (ophth)</i>)	P	
<i>propylene glycol-glycerin</i>	P		<i>levobunolol hcl 0.5 %</i>	P	
PURE & GENTLE LUBRICANT SOLN	P		<i>timolol</i>	NP	
REFRESH LIQUIGEL GEL (<i>carboxymethylcellulose sodium (ophth)</i>)	P		<i>timolol maleate (ophth) SOLG</i>	NP	
REFRESH PLUS SOLN (<i>carboxymethylcellulose sodium (ophth)</i>)	P		<i>timolol maleate (ophth) SOLN</i>	P	
REFRESH TEARS SOLN (<i>carboxymethylcellulose sodium (ophth)</i>)	P		<i>timolol maleate (ophth) SOLN 0.5 %</i>	NP	
VENTIVA	NP		TIMOPTIC OCUDOSE SOLN (<i>timolol maleate (ophth)</i>)	NP	
<i>white petrolatum-mineral oil</i>	P		TIMOPTIC SOLN (<i>timolol maleate (ophth)</i>)	NP	
<i>white petrolatum-mineral oil</i>	P		TIMOPTIC-XE SOLG (<i>timolol maleate (ophth)</i>)	NP	
Beta-blockers - Ophthalmic			Cholinergic Agonists		
<i>betaxolol hcl (ophth) SOLN</i>	NP		TYRVAYA	NP	
BETIMOL	NP		Cycloplegic Mydriatics		
BETOPTIC-S SUSP	NP		<i>atropine sulfate (ophthalmic) OINT</i>	P	
<i>brimonidine tartrate-timolol maleate</i>	P		<i>atropine sulfate (ophthalmic) SOLN</i>	P	
<i>brimonidine tartrate-timolol maleate</i>	NP		ATROPINE SULFATE SOLN 1 %	P	
<i>carteolol hcl (ophth)</i>	P		CYCLOGYL	P	
COMBIGAN (<i>brimonidine tartrate-timolol maleate</i>)	P		<i>cyclopentolate hcl</i>	P	
COSOPT (<i>dorzolamide hcl-timolol maleate</i>)	NP		ISOPTO ATROPINE SOLN	P	
			<i>phenylephrine hcl (mydriatic) SOLN</i>	P	

Drug Name	Drug Tier	Requirements/ Limits
<i>tropicamide SOLN</i>	P	
Miotics		
PHOSPHOLINE IODIDE	NP	
<i>pilocarpine hcl SOLN 1 %, 2 %, 4 %</i>	P	
Ophthalmic Adrenergic Agents		
ALPHAGAN P (<i>brimonidine tartrate</i>)	P	
<i>apraclonidine hcl</i>	NP	
<i>brimonidine tartrate 0.1 %, 0.15 %</i>	NP	
<i>brimonidine tartrate 0.2 %</i>	P	
IOPIDINE	NP	
LUMIFY	NP	
SIMBRINZA	P	
Ophthalmic Anti-infectives		
AZASITE	NP	
<i>bacitracin (ophthalmic)</i>	NP	
<i>bacitracin-polymyxin b (ophth)</i>	P	
BESIVANCE	NP	
CILOXAN OINT	P	
<i>ciprofloxacin hcl (ophth) SOLN</i>	P	
<i>erythromycin (ophth)</i>	P	
<i>gatifloxacin (ophth)</i>	NP	
<i>gentamicin sulfate (ophth) SOLN</i>	NP	
<i>gentamicin sulfate (ophth) SOLN</i>	P	
<i>moxifloxacin hcl (ophth) SOLN OP</i>	P	
<i>moxifloxacin hcl (ophth) SOLN OP</i>	NP	
NATACYN	NP	
<i>neomycin-bacitracin zn-polymyxin</i>	NP	

Drug Name	Drug Tier	Requirements/ Limits
<i>neomycin-polymyxin-gramicidin</i>	NP	
OCUFLOX (<i>ofloxacin (ophth)</i>)	NP	
<i>ofloxacin (ophth)</i>	P	
<i>polymyxin b-trimethoprim</i>	P	
<i>sulfacetamide sodium (ophth) OINT</i>	NP	
<i>sulfacetamide sodium (ophth) SOLN</i>	NP	
<i>tobramycin (ophth) SOLN</i>	P	
TOBREX OINT	NP	
<i>trifluridine</i>	P	
VIGAMOX SOLN OP (<i>moxifloxacin hcl (ophth)</i>)	NP	
XDEMVY	NP	
Ophthalmic Decongestants		
ADVANCED EYE RELIEF MAX RED	P	
<i>naphazoline w/ pheniramine 0.315 %-0.027 %</i>	NP	
<i>naphazoline w/ pheniramine 0.3 %-0.025 %</i>	P	
<i>naphazoline-polyethylene glycol 300</i>	P	
NAPHCN-A (<i>naphazoline w/ pheniramine</i>)	P	
<i>tetrahydrozoline hcl (ophth) 0.05 %</i>	P	
<i>tetrahydrozoline w/ polyethylene glycol</i>	P	
<i>tetrahydrozoline w/ zinc sulfate</i>	P	
<i>tetrahydrozoline-dextran-polyethylene glycol-povidone</i>	P	
Ophthalmic Immunomodulators		
CEQUA SOLN	NP	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>cyclosporine (ophth) EMUL</i>	NP		LOTEMAX SUSP (<i>loteprednol etabonate</i>)	P	
RESTASIS MULTIDOSE EMUL	NP		<i>loteprednol etabonate GEL</i>	NP	
RESTASIS EMUL (<i>cyclosporine (ophth)</i>)	P		<i>loteprednol etabonate SUSP</i>	NP	
VERKAZIA EMUL	NP		MAXIDEX SUSP OP	P	
VEVYE SOLN	NP		MAXITROL OINT (<i>neomycin-polymy-dexameth</i>)	NP	
Ophthalmic Integrin Antagonists			MAXITROL SUSP (<i>neomycin-polymy-dexameth</i>)	NP	
XIIDRA	NP		<i>neomycin-polymy-dexameth OINT</i>	P	
Ophthalmic Kinase Inhibitors			<i>neomycin-polymy-dexameth SUSP</i>	P	
RHOPRESSA	NP		<i>neomycin-polymyxin-hc (ophth)</i>	P	
ROCKLATAN	NP		OZURDEX IMPL	NP	SP
Ophthalmic Steroids			PRED FORTE (<i>prednisolone acetate (ophth)</i>)	P	
ALREX SUSP (<i>loteprednol etabonate</i>)	NP		PRED MILD	P	
<i>bacitracin-poly-neomycin-hc</i>	NP		<i>prednisolone acetate (ophth)</i>	P	
<i>dexamethasone sodium phosphate (ophth)</i>	P		PREDNISOLONE SODIUM PHOSPHATE	P	
DEXTENZA INST	NP	SP	RETISERT	NP	SP
<i>difluprednate</i>	NP		<i>sulfacetamide sod-prednisolone SOLN</i>	P	
DUREZOL (<i>difluprednate</i>)	P		TOBRADEX ST SUSP	NP	
EYSUVIS SUSP	NP		TOBRADEX OINT	P	
FLAREX	P		<i>tobramycin-dexamethasone SUSP</i>	NP	
<i>fluorometholone (ophth) SUSP</i>	P		TRIESENCE	NP	SP
FML FORTE SUSP	P		YUTIQ	NP	SP
FML LIQUIFILM SUSP (<i>fluorometholone (ophth)</i>)	NP		ZYLET	NP	
ILUVIEN	NP	SP	Ophthalmics - Misc.		
INVELTYS SUSP	NP		ACULAR (<i>ketorolac tromethamine (ophth)</i>)	NP	
LOTEMAX SM GEL	NP				
LOTEMAX GEL (<i>loteprednol etabonate</i>)	P				
LOTEMAX OINT	P				

Drug Name	Drug Tier	Requirements/ Limits
ACULAR LS (<i>ketorolac tromethamine (ophth)</i>)	NP	
ACUVAIL	NP	
ALOCRIL	NP	
ALOMIDE	NP	
<i>azelastine hcl (ophth)</i>	P	
AZOPT (<i>brinzolamide</i>)	NP	
<i>bepotastine besilate</i>	NP	
BEPREVE (<i>bepotastine besilate</i>)	NP	
<i>brinzolamide</i>	NP	
<i>bromfenac sodium (ophth)</i>	NP	
BROMSITE (<i>bromfenac sodium (ophth)</i>)	NP	
<i>cromolyn sodium (ophth)</i>	P	
<i>diclofenac sodium (ophth)</i>	P	
<i>dorzolamide hcl</i>	P	
<i>epinastine hcl (ophth)</i>	NP	
<i>flurbiprofen sodium</i>	P	
ILEVRO	NP	
<i>ketorolac tromethamine (ophth)</i>	P	
<i>ketotifen fumarate (ophth) 0.035 %</i>	P	
LASTACFT	NP	
MIEBO	NP	
MURO 128 OINT (<i>sodium chloride hypertonic</i>)	P	
MURO 128 SOLN	P	
MURO 128 SOLN (<i>sodium chloride hypertonic</i>)	P	
NEVANAC	P	
<i>olopatadine hcl 0.1 %</i>	NP	RX/OTC
<i>olopatadine hcl</i>	P	RX/OTC
PATADAY (<i>olopatadine hcl</i>)	NP	RX/OTC
PATADAY	NP	

Drug Name	Drug Tier	Requirements/ Limits
PROLENSA (<i>bromfenac sodium (ophth)</i>)	NP	
<i>sodium chloride hypertonic OINT</i>	P	
<i>sodium chloride hypertonic SOLN</i>	P	
ZADITOR 0.035 % (<i>ketotifen fumarate (ophth)</i>)	NP	
ZERViate	NP	
Prostaglandins - Ophthalmic		
<i>bimatoprost SOLN</i>	NP	
DURYSTA IMPL	NP	
IDOSE TR IMPL	NP	
IYUZEH SOLN	NP	
<i>latanoprost SOLN</i>	P	
LUMIGAN SOLN 0.01 %	NP	
<i>tafluprost</i>	NP	
TRAVATAN Z SOLN (<i>travoprost</i>)	NP	
<i>travoprost SOLN</i>	P	
VYZULTA	NP	
XALATAN SOLN (<i>latanoprost</i>)	NP	
XELPROS EMUL	NP	
ZIOPTAN (<i>tafluprost</i>)	NP	
OTIC AGENTS - Drugs to Treat the Ear		
Otic Agents - Miscellaneous		
<i>acetic acid (otic)</i>	NP	
<i>acetic acid (otic)</i>	P	
<i>carbamide peroxide (otic) 6.5 %</i>	P	
Otic Anti-infectives		
<i>ciprofloxacin hcl (otic)</i>	NP	
<i>ofloxacin (otic)</i>	P	
Otic Combinations		
CIPRO HC	P	

Drug Name	Drug Tier	Requirements/Limits
<i>ciprofloxacin-dexamethasone</i>	NP	
<i>ciprofloxacin-fluocinolone acetonide</i>	NP	
CORTISPORIN-TC	P	
<i>neomycin-polymyxin-hc (otic) SOLN</i>	P	
<i>neomycin-polymyxin-hc (otic) SUSP</i>	P	
Otic Steroids		
<i>hydrocortisone w/acetic acid</i>	NP	
OXYTOCICS - Drugs to Prevent/Control Uterine Bleeding		
Oxytocics		
<i>methylergonovine maleate TABS PO</i>	P	
PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System		
Immune Serums		
ALYGLO	NP	SP
ASCENIV	NP	
BIVIGAM SOLN 10 GM/100ML	P	SP
BIVIGAM SOLN 5 GM/50ML	P	
CUTAQUIG	NP	SP
CUVITRU SOLN	NP	SP
FLEBOGAMMA DIF SOLN 2.5 GM/50ML	NP	SP
GAMASTAN	NP	SP
GAMMAGARD	P	SP
GAMMAGARD S/D LESS IGA SOLR	P	SP
GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	NP	SP

Drug Name	Drug Tier	Requirements/Limits
GAMMAPLEX SOLN	NP	SP
GAMMAPLEX SOLN 5 GM/50ML	NP	
GAMUNEX-C	P	SP
HIZENTRA SOLN	NP	SP
HIZENTRA SOSY	NP	SP
OCTAGAM SOLN 5 GM/50ML	P	
OCTAGAM SOLN	P	SP
PANZYGA	NP	SP
PRIVIGEN SOLN 5 GM/50ML	P	
PRIVIGEN SOLN 10 GM/100ML, 20 GM/200ML, 40 GM/400ML	P	SP
XEMBIFY	P	SP
Passive Immunizing Agents - Combinations		
HYQVIA	NP	SP
PENICILLINS - Drugs to Treat Bacterial Infections		
Aminopenicillins		
<i>amoxicillin CAPS PO</i>	P	
<i>amoxicillin CHEW PO 125 MG, 250 MG</i>	P	
<i>amoxicillin SUSR PO</i>	P	
AMOXICILLIN SUSR PO (<i>amoxicillin</i>)	P	
<i>amoxicillin TABS PO</i>	P	
<i>ampicillin sodium IJ 1 GM, 2 GM</i>	P	
<i>ampicillin CAPS PO 500 MG</i>	P	
Natural Penicillins		
BICILLIN L-A SUSY	P	
<i>penicillin v potassium SOLR PO</i>	P	
<i>penicillin v potassium TABS PO</i>	P	
Penicillin Combinations		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>amoxicillin & pot clavulanate CHEW PO</i>	P		FLAVOR SWEET SYRP PO	P	RX/OTC
<i>amoxicillin & pot clavulanate SUSR PO 28.5 MG/5ML-200 MG/5ML, 42.9 MG/5ML-600 MG/5ML, 57 MG/5ML-400 MG/5ML</i>	P		GERBER GOOD START WATER	P	
<i>amoxicillin & pot clavulanate SUSR PO 62.5 MG/5ML-250 MG/5ML</i>	NP		GOOD START STERILE WATER	P	
<i>amoxicillin & pot clavulanate TABS PO 125 MG-500 MG, 125 MG-875 MG</i>	P		GRAPE SYRUP SYRP PO	P	RX/OTC
<i>amoxicillin & pot clavulanate TABS PO 125 MG-250 MG</i>	NP		MX-SOL SF SYRP PO	P	RX/OTC
<i>amoxicillin & pot clavulanate TB12 PO</i>	NP		MX-SOL SYRP PO	P	RX/OTC
AUGMENTIN ES-600 SUSR PO (<i>amoxicillin & pot clavulanate</i>)	NP		ORAL SUSPEND LIQD PO	P	RX/OTC
AUGMENTIN SUSR PO 31.25 MG/5ML-125 MG/5ML	NP		ORAL SYRUP SF SYRP PO	P	RX/OTC
BICILLIN C-R	P		ORAL SYRUP SYRP PO	P	RX/OTC
BICILLIN C-R 900/300	P		ORAPENN SD ANHYD SWEETENED LIQD PO	P	RX/OTC
Penicillinase-Resistant Penicillins			ORAPENN SD ANHYD UNSWEETEN LIQD PO	P	RX/OTC
<i>dicloxacillin sodium PO</i>	P		ORA-PLUS LIQD PO	P	RX/OTC
PHARMACEUTICAL ADJUVANTS			ORA-SWEET SF SYRP PO 10 %-9 %	P	RX/OTC
Liquid Vehicles			ORA-SWEET SYRP PO 4 %-5 %-54 %	P	RX/OTC
<i>bacteriostatic sodium chloride</i>	P		PCCA SWEET-SF SYRP PO	P	RX/OTC
CHERRY PO	P	RX/OTC	PCCA SYRUP VEHICLE SYRP PO	P	RX/OTC
CHERRY CONCENTRATE PO	P	RX/OTC	SIMILAC STERILIZED WATER	P	
FLAVOR PLUS LIQD PO	P	RX/OTC	SOSWEET SYRP PO	P	RX/OTC
FLAVOR SWEET-SF SYRP PO	P	RX/OTC	STERILE WATER FOR INJECTION IJ	P	
			SYRPALTA (RED) SYRP PO	P	RX/OTC
			SYRPALTA SYRP PO	P	RX/OTC
			SYRSPEND SF LIQD PO	P	RX/OTC
			SYRUP VEHICLE SF SYRP PO	P	RX/OTC
			SYRUP VEHICLE SYRP PO	P	RX/OTC
			VERSAFREE SYRP PO	P	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
VERSAPLUS SYRP PO	P	RX/OTC
<i>water for injection, sterile IJ</i>	P	
PROGESTINS - Hormone Replacement/Modifying Drugs		
Progestins		
<i>hydroxyprogesterone caproate OIL</i>	NP	SP; PA
MAKENA SOAJ	NP	SP; PA
<i>medroxyprogesterone acetate PO 2.5 MG, 5 MG</i>	P	QL(1 EA daily)
<i>medroxyprogesterone acetate PO 10 MG</i>	P	
<i>norethindrone acetate TABS PO</i>	P	
<i>progesterone CAPS PO</i>	P	
<i>progesterone OIL</i>	P	
PROMETRIUM CAPS PO (<i>progesterone</i>)	NP	
PROVERA PO 10 MG (<i>medroxyprogesterone acetate</i>)	NP	
PROVERA PO 5 MG (<i>medroxyprogesterone acetate</i>)	NP	QL(1 EA daily)
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions		
Agents for Chemical Dependency		
<i>disulfiram PO</i>	P	
<i>lofexidine hcl</i>	NP	
LUCEMYRA	NP	
LUCEMYRA (<i>lofexidine hcl</i>)	NP	
Anti-Cataleptic Agents		
SODIUM OXYBATE SOLN PO	NP	SP
XYREM SOLN PO	NP	SP

Drug Name	Drug Tier	Requirements/ Limits
XYWAV	NP	SP
Antidementia Agents		
ADLARITY PTWK	NP	QL(0.143 EA daily); PA
ADUHELM	NP	SP
ARICEPT TABS PO 23 MG (<i>donepezil hydrochloride</i>)	NP	PA
ARICEPT TABS PO 5 MG, 10 MG (<i>donepezil hydrochloride</i>)	NP	QL(1 EA daily); PA
<i>donepezil hydrochloride TABS PO 5 MG, 10 MG</i>	P	QL(1 EA daily); PA
<i>donepezil hydrochloride TABS PO 23 MG</i>	NP	PA
<i>donepezil hydrochloride TBDP PO</i>	NP	QL(1 EA daily); PA
EXELON (<i>rivastigmine</i>)	NP	PA
<i>galantamine hydrobromide CP24 PO 16 MG, 24 MG</i>	NP	PA
<i>galantamine hydrobromide CP24 PO 8 MG</i>	NP	QL(1 EA daily); PA
<i>galantamine hydrobromide SOLN PO</i>	NP	PA
<i>galantamine hydrobromide TABS PO</i>	NP	PA
LEQEMBI	NP	SP
<i>memantine hcl CP24 PO 21 MG, 28 MG</i>	NP	PA
<i>memantine hcl CP24 PO 7 MG, 14 MG</i>	NP	QL(1 EA daily); PA
<i>memantine hcl SOLN PO 2 MG/ML</i>	NP	PA
<i>memantine hcl TABS PO</i>	P	PA
<i>memantine hcl TABS PO</i>	NP	PA
NAMENDA TITRATION PAK TABS PO (<i>memantine hcl</i>)	NP	PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
NAMENDA XR CP24 PO 7 MG, 14 MG (<i>memantine hcl</i>)	NP	QL(1 EA daily); PA	INGREZZA CPSP	NP	QL(1 EA daily); SP
NAMENDA XR CP24 PO 21 MG, 28 MG (<i>memantine hcl</i>)	NP	PA	<i>tetrabenazine PO</i>	P	SP
NAMZARIC C4PK	NP	PA	XENAZINE PO (<i>tetrabenazine</i>)	NP	SP
NAMZARIC CP24	NP	PA	Multiple Sclerosis Agents		
<i>rivastigmine 4.6 MG/24HR, 9.5 MG/24HR</i>	NP	PA	AMPYRA (<i>dalfampridine</i>)	NP	SP; PA
<i>rivastigmine</i>	P	PA	AUBAGIO PO 7 MG (<i>teriflunomide</i>)	NP	QL(1 EA daily); SP; PA
<i>rivastigmine tartrate CAPS PO</i>	NP	PA	AUBAGIO PO 14 MG (<i>teriflunomide</i>)	NP	SP; PA
Combination Psychotherapeutics			AVONEX PEN AJKT	P	SP; PA
<i>chlordiazepoxide-amitriptyline PO</i>	NP		AVONEX PREFILLED PSKT	P	SP; PA
LYBALVI	NP		BAFIERTAM	NP	SP; PA
<i>olanzapine-fluoxetine hcl PO 25 MG-3 MG, 25 MG-6 MG</i>	NP	QL(1 EA daily)	BETASERON KIT	NP	SP; PA
<i>olanzapine-fluoxetine hcl PO 25 MG-12 MG, 50 MG-12 MG, 50 MG-6 MG</i>	NP		BRIUMVI	NP	SP
<i>perphenazine-amitriptyline PO</i>	P		COPAXONE SOSY (<i>glatiramer acetate</i>)	NP	SP; PA
SYMBYAX PO 25 MG-6 MG (<i>olanzapine-fluoxetine hcl</i>)	NP	QL(1 EA daily)	<i>dalfampridine</i>	P	SP; PA
Fibromyalgia Agents			<i>dimethyl fumarate CDPK</i>	P	SP; PA
SAVELLA TITRATION PACK MISC	NP		<i>dimethyl fumarate CPDR</i>	P	SP; PA
SAVELLA TABS PO	NP		<i> fingolimod hcl PO</i>	P	SP; PA
Movement Disorder Drug Therapy			GILENYA PO (<i>fingolimod hcl</i>)	NP	SP; PA
AUSTEDO XR PATIENT TITRATION TEPK	NP	SP	<i>glatiramer acetate SOSY</i>	P	SP; PA
AUSTEDO XR TB24	NP	SP	KESIMPTA	P	SP; PA
AUSTEDO TABS	P	SP; PA	LEMTRADA	NP	SP; PA
INGREZZA CAPS	P	QL(1 EA daily); SP	MAVENCLAD (10 TABS) PO	NP	SP; PA
INGREZZA CPPK	P	QL(1 EA daily); SP	MAVENCLAD (4 TABS) PO	NP	SP; PA
			MAVENCLAD (5 TABS) PO	NP	SP; PA
			MAVENCLAD (6 TABS) PO	NP	SP; PA
			MAVENCLAD (7 TABS) PO	NP	SP; PA
			MAVENCLAD (8 TABS) PO	NP	SP; PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MAVENCLAD (9 TABS) PO	NP	SP; PA	<i>gabapentin (once-daily) TABS PO</i>	NP	
MAYZENT STARTER PACK TBPK 0.25 MG	NP	SP; PA	GRALISE TABS PO	NP	
MAYZENT TABS PO	NP	SP; PA	GRALISE TABS PO (<i>gabapentin (once-daily)</i>)	NP	
OCREVUS	NP	SP; PA	LYRICA CR (<i>pregabalin (once-daily)</i>)	NP	
OCREVUS ZUNOVO	NP	SP	<i>pregabalin (once-daily)</i>	NP	
PLEGRIDY STARTER PACK SOAJ	NP	SP; PA	Premenstrual Dysphoric Disorder (PMDD) Agents		
PLEGRIDY STARTER PACK SOSY SC	NP	SP; PA	<i>fluoxetine hcl (pmdd) TABS PO</i>	NP	
PLEGRIDY SOAJ	NP	SP; PA	Pseudobulbar Affect (PBA) Agents		
PLEGRIDY SOSY IM	NP	SP; PA	NUDEXTA	P	
PONVORY STARTER PACK TBPK	NP	SP; PA	Psychotherapeutic and Neurological Agents - Misc.		
PONVORY TABS	NP	SP; PA	<i>pimozide PO</i>	P	
REBIF REBIDOSE TITRATION PACK SOAJ	P	SP; PA	Restless Leg Syndrome (RLS) Agents		
REBIF REBIDOSE SOAJ	P	SP; PA	HORIZANT PO	NP	
REBIF TITRATION PACK SOSY	P	SP; PA	Smoking Deterrents		
REBIF SOSY	P	SP; PA	<i>bupropion hcl (smoking deterrent) PO</i>	P	
TASCENSO ODT	NP	SP; PA	CHANTIX STARTING MONTH PAK TBPK (<i>varenicline tartrate</i>)	NP	
TECFIDERA CDPK (<i>dimethyl fumarate</i>)	NP	SP; PA	<i>nicotine polacrilex GUM</i>	P	
TECFIDERA CPDR (<i>dimethyl fumarate</i>)	NP	SP; PA	<i>nicotine polacrilex GUM</i>	P	
<i>teriflunomide PO 14 MG</i>	P	SP; PA	<i>nicotine polacrilex LOZG</i>	P	
<i>teriflunomide PO 7 MG</i>	P	QL(1 EA daily); SP; PA	<i>nicotine polacrilex LOZG</i>	P	
TYSABRI	P	SP; PA	NICOTINE KIT	P	
VUMERITY PO	NP	SP; PA	<i>nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR</i>	P	
ZEPOSIA 7-DAY STARTER PACK CPPK	NP	SP; PA	<i>nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR</i>	P	
ZEPOSIA STARTER KIT CPPK	NP	SP; PA	NICOTROL NS SOLN	NP	
ZEPOSIA CAPS	NP	SP; PA	NICOTROL INHA	P	
Postherpetic Neuralgia (PHN)/Neuropathic Pain Agents					

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>varenicline tartrate TABS PO</i>	P		<i>doxycycline (monohydrate) TABS PO</i>	P	
<i>varenicline tartrate TBPk</i>	P		<i>doxycycline hyclate CAPS PO</i>	P	
Vasomotor Symptom Agents			<i>doxycycline hyclate TABS PO 20 MG, 100 MG</i>	P	
<i>paroxetine mesylate (vasomotor) PO</i>	NP		<i>doxycycline hyclate TABS PO 50 MG, 75 MG, 100 MG, 150 MG</i>	NP	
RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions			<i>doxycycline hyclate TBEC PO</i>	NP	
Cystic Fibrosis Agents			<i>minocycline hcl CAPS PO</i>	P	
PULMOZYME	P	SP	<i>minocycline hcl TABS PO</i>	NP	
Respiratory Agents - Misc.			<i>minocycline hcl TB24 PO</i>	NP	
INFASURF TR	P		MINOLIRA TB24 PO	NP	
SULFONAMIDES - Drugs to Treat Bacterial Infections			SOLODYN TB24 PO 65 MG, 80 MG, 105 MG, 115 MG (<i>minocycline hcl</i>)	NP	
Sulfonamides			<i>tetracycline hcl CAPS PO</i>	NP	
<i>sulfadiazine TABS PO</i>	P		TETRACYCLINE HCL TABS PO	NP	
TETRACYCLINES - Drugs to Treat Bacterial Infections			THYROID AGENTS - Drugs to Regulate Thyroid Hormones		
Aminomethylcyclines			Antithyroid Agents		
NUZYRA TABS PO	NP		<i>methimazole TABS PO</i>	P	
Tetracyclines			<i>propylthiouracil PO</i>	P	
<i>demeclocycline hcl TABS PO</i>	NP		Thyroid Hormones		
DORYX MPC TBEC PO 60 MG	NP		ADTHYZA TABS PO	NP	
DORYX TBEC PO 80 MG, 200 MG (<i>doxycycline hyclate</i>)	NP		ARMOUR THYROID TABS PO	P	
<i>doxycycline (monohydrate) CAPS PO 50 MG, 100 MG</i>	P		CYTOMEL TABS PO (<i>liothyronine sodium</i>)	NP	
<i>doxycycline (monohydrate) CAPS PO 75 MG, 150 MG</i>	NP		ERMEZA SOLN PO	P	
<i>doxycycline (monohydrate) SUSR PO</i>	NP		<i>levothyroxine sodium CAPS PO</i>	NP	
			LEVOTHYROXINE SODIUM SOLN IV	NP	
			LEVOTHYROXINE SODIUM SOLN IV	NP	

Drug Name	Drug Tier	Requirements/Limits
<i>levothyroxine sodium TABS PO</i>	NP	
<i>levothyroxine sodium TABS PO</i>	P	
<i>liothyronine sodium SOLN</i>	NP	
<i>liothyronine sodium TABS PO</i>	P	
NIVA THYROID TABS PO	P	
NP THYROID TABS PO	P	
SYNTHROID TABS PO (<i>levothyroxine sodium</i>)	NP	
THYQUIDITY SOLN PO	NP	
THYROID TABS PO 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	P	
TRIOSTAT SOLN (<i>liothyronine sodium</i>)	NP	
ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions		
Antispasmodics		
BELLADONNA ALKALOIDS-OPIUM PR 16.2 MG-60 MG	P	
<i>dicyclomine hcl CAPS PO</i>	P	
<i>dicyclomine hcl SOLN PO</i>	P	
<i>dicyclomine hcl TABS PO</i>	P	
<i>propantheline bromide TABS PO</i>	P	
H-2 Antagonists		
<i>cimetidine hcl PO 300 MG/5ML</i>	NP	
<i>cimetidine TABS PO</i>	NP	RX/OTC
<i>famotidine SUSR PO</i>	P	
<i>famotidine TABS PO</i>	P	RX/OTC
<i>nizatidine CAPS PO</i>	P	
PEPCID TABS PO (<i>famotidine</i>)	NP	RX/OTC
Misc. Anti-Ulcer		
<i>sucralfate SUSP PO</i>	P	

Drug Name	Drug Tier	Requirements/Limits
<i>sucralfate TABS PO</i>	P	
Proton Pump Inhibitors		
DEXILANT PO (<i>dexlansoprazole</i>)	NP	QL(1 EA daily)
<i>dexlansoprazole PO</i>	NP	QL(1 EA daily)
<i>esomeprazole magnesium CPDR PO</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 PO</i>	NP	QL(1 EA daily); RX/OTC
<i>lansoprazole TBDD</i>	NP	QL(2 EA daily); RX/OTC
NEXIUM 24HR CLEAR MINIS CPDR PO (<i>esomeprazole magnesium</i>)	NP	QL(1 EA daily); RX/OTC
NEXIUM 24HR CPDR PO (<i>esomeprazole magnesium</i>)	NP	QL(1 EA daily); RX/OTC
NEXIUM CPDR PO (<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)
<i>omeprazole magnesium CPDR PO</i>	NP	QL(1 EA daily)
<i>omeprazole magnesium TBEC PO</i>	NP	QL(1 EA daily)
<i>omeprazole CPDR PO</i>	P	QL(1 EA daily)
<i>omeprazole TBDD</i>	NP	QL(1 EA daily)
<i>omeprazole TBEC PO</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 PO</i>	P	QL(2 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PREVACID 24HR CPDR PO (<i>lansoprazole</i>)	NP	QL(1 EA daily); RX/OTC	<i>omeprazole-sodium bicarbonate</i> PACK PO 1680 MG-40 MG	NP	
PREVACID SOLUTAB TBDD (<i>lansoprazole</i>)	NP	QL(2 EA daily); RX/OTC	<i>omeprazole-sodium bicarbonate</i> PACK PO 1680 MG-20 MG	NP	QL(1 EA daily)
PREVACID CPDR PO 30 MG (<i>lansoprazole</i>)	NP	QL(1 EA daily)	PYLERA PO (<i>bismuth subcitrate potassium-metronidazole-tetracycline</i>)	P	
PRILOSEC OTC TBEC PO (<i>omeprazole magnesium</i>)	NP	QL(1 EA daily)	TALICIA	NP	
PRILOSEC PACK PO	NP	QL(1 EA daily); AL(Up to 10 yrs old)	VOQUEZNA DUAL PAK	NP	
PROTONIX PACK (<i>pantoprazole sodium</i>)	P	QL(2 EA daily); AL(Up to 10 yrs old)	VOQUEZNA TRIPLE PAK	NP	
PROTONIX TBEC PO (<i>pantoprazole sodium</i>)	NP	QL(2 EA daily)	ZEGERID CAPS PO 1100 MG-40 MG (<i>omeprazole-sodium bicarbonate</i>)	NP	
<i>rabeprazole sodium</i> TBEC PO	NP	QL(2 EA daily)	ZEGERID CAPS PO 1100 MG-20 MG (<i>omeprazole-sodium bicarbonate</i>)	NP	QL(1 EA daily); RX/OTC
VOQUEZNA 20 MG	NP		ZEGERID PACK PO 1680 MG-20 MG (<i>omeprazole-sodium bicarbonate</i>)	NP	QL(1 EA daily)
VOQUEZNA 10 MG	NP	QL(1 EA daily)	ZEGERID PACK PO 1680 MG-40 MG (<i>omeprazole-sodium bicarbonate</i>)	NP	
Ulcer Drugs - Prostaglandins			URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms		
<i>misoprostol</i> PO	P		Urinary Antispasmodic - Antimuscarinics (Anticholinergic)		
Ulcer Therapy Combinations			<i>darifenacin hydrobromide</i> PO 7.5 MG	NP	QL(1 EA daily)
<i>amoxicillin-clarithromycin</i> w/ <i>lansoprazole</i> THPK	NP		<i>darifenacin hydrobromide</i> PO 15 MG	NP	
<i>bismuth subcitrate potassium-metronidazole-tetracycline</i> PO	NP		DETROL LA CP24 PO 4 MG (<i>tolterodine tartrate</i>)	NP	
<i>famotidine-calcium carbonate-magnesium hydroxide</i> PO	NP		DETROL LA CP24 PO 2 MG (<i>tolterodine tartrate</i>)	NP	QL(1 EA daily)
KONVOMEK SUSR	NP		DETROL TABS PO (<i>tolterodine tartrate</i>)	NP	
OMECLAMOX-PAK PO	NP		<i>fesoterodine fumarate</i> 8 MG	NP	
<i>omeprazole-sodium bicarbonate</i> CAPS PO 1100 MG-20 MG	NP	QL(1 EA daily); RX/OTC			
<i>omeprazole-sodium bicarbonate</i> CAPS PO 1100 MG-40 MG	NP				

Drug Name	Drug Tier	Requirements/ Limits
<i>fesoterodine fumarate 4 MG</i>	NP	QL(1 EA daily)
<i>oxybutynin chloride SOLN</i>	P	
<i>oxybutynin chloride TABS PO 2.5 MG</i>	NP	
<i>oxybutynin chloride TABS PO 5 MG</i>	P	
<i>oxybutynin chloride TB24 PO 5 MG</i>	P	QL(1 EA daily)
<i>oxybutynin chloride TB24 PO 10 MG, 15 MG</i>	P	
OXYTROL FOR WOMEN PTTW	NP	RX/OTC
OXYTROL PTTW	NP	RX/OTC
<i>solifenacin succinate TABS PO 10 MG</i>	P	
<i>solifenacin succinate TABS PO 5 MG</i>	P	QL(1 EA daily)
<i>tolterodine tartrate CP24 PO 2 MG</i>	NP	QL(1 EA daily)
<i>tolterodine tartrate CP24 PO 4 MG</i>	NP	
<i>tolterodine tartrate TABS PO</i>	NP	
TOVIAZ 4 MG (<i>fesoterodine fumarate</i>)	NP	QL(1 EA daily)
TOVIAZ 8 MG (<i>fesoterodine fumarate</i>)	NP	
<i>trospium chloride CP24 PO</i>	NP	
<i>trospium chloride TABS PO</i>	NP	
VESICARE LS SUSP	NP	
VESICARE TABS PO 10 MG (<i>solifenacin succinate</i>)	NP	
VESICARE TABS PO 5 MG (<i>solifenacin succinate</i>)	NP	QL(1 EA daily)
Urinary Antispasmodics - Beta-3 Adrenergic Agonists		

Drug Name	Drug Tier	Requirements/ Limits
GEMTESA	NP	
<i>mirabegron TB24 PO 25 MG</i>	NP	QL(1 EA daily)
<i>mirabegron TB24 PO 50 MG</i>	NP	
MYRBETRIQ SRER	NP	
MYRBETRIQ TB24 PO 25 MG (<i>mirabegron</i>)	P	QL(1 EA daily)
MYRBETRIQ TB24 PO 50 MG (<i>mirabegron</i>)	P	
Urinary Antispasmodics - Direct Muscle Relaxants		
<i>flavoxate hcl PO</i>	P	
VACCINES		
Bacterial Vaccines		
ACTHIB SOLR IM	P	
BEXSERO	P	
BIOTHRAX	P	
CAPVAXIVE	P	
HIBERIX SOLR IJ	P	
MENACTRA	P	
MENQUADFI	P	
MENVEO SOLN	P	
MENVEO SOLR	P	
PEDVAX HIB SUSP	P	
PNEUMOVAX 23 SOLN	P	
PNEUMOVAX 23 SOSY	P	
PREVNAR 13	P	
PREVNAR 20	P	
TRUMENBA	P	
TYPHIM VI SOLN	P	
TYPHIM VI SOSY	P	
VAXCHORA	P	
VAXNEUVANCE	P	
VIVOTIF PO	P	
Viral Vaccines		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ABRYSVO	P	QL(1 EA per 365 day(s) retail); AL(At least 60 yrs old)	FLULAVAL QUADRIVALENT SUSY	P	
			FLULAVAL SUSY	P	
			FLUMIST	P	
ACAM2000	P		FLUMIST QUADRIVALENT	P	
AFLURIA PRESERVATIVE FREE SUSY	P		FLUZONE HIGH-DOSE QUADRIVALENT	P	
AFLURIA QUADRIVALENT SUSP	P		FLUZONE HIGH-DOSE SUSY	P	
AFLURIA QUADRIVALENT SUSY 0.5 ML	P		FLUZONE QUADRIVALENT SUSP	P	
AFLURIA SUSP	P		FLUZONE QUADRIVALENT SUSY	P	
AREXVY	P		FLUZONE SUSP	P	
AUDENZ EMUL	P		FLUZONE SUSY	P	
AUDENZ PRSY	P		GARDASIL 9 SUSP	P	3 max fill(s) per 999 day(s) retail; AL(Up to 45 yrs old)
COMIRNATY SUSP	P				
COMIRNATY SUSY	P		GARDASIL 9 SUSY	P	3 max fill(s) per 999 day(s) retail; AL(Up to 45 yrs old)
DENG VAXIA	P				
ENGERIX-B SUSP 20 MCG/ML	P	3 max fill(s) per 999 day(s) retail	HAVRIX	P	
ENGERIX-B SUSY	P	3 max fill(s) per 999 day(s) retail	HEPLISAV-B SOSY	P	3 max fill(s) per 999 day(s) retail
FLUAD	P		IMOVAX RABIES SUSR	P	
FLUAD QUADRIVALENT	P		I POL	P	
FLUARIX QUADRIVALENT SUSY	P		IXCHIQ	P	QL(1 EA per fill retail)
FLUARIX SUSY	P		IXIARO	P	
FLUBLOK QUADRIVALENT	P		JANSSEN COVID-19 VACCINE	P	
FLUBLOK SOSY	P		JYNNEOS	P	QL(0.5 ML per fill retail)
FLUCELVAX QUADRIVALENT SUSP	P				
FLUCELVAX QUADRIVALENT SUSY	P		M-M-R II SOLR	P	
FLUCELVAX SUSP	P		MODERNA COVID-19 BIVAL 6M-5Y	P	
FLUCELVAX SUSY	P		MODERNA COVID-19 BIVALENT	P	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MODERNA COVID-19 VAC (BOOSTER) SUSP	P		SHINGRIX	P	2 max fill(s) per 999 day(s) retail; AL(At least 50 yrs old)
MODERNA COVID-19 VAC 6M-11Y SUSP	P		SPIKEVAX COVID-19 VACCINE SUSP	P	
MODERNA COVID-19 VAC 6M-11Y SUSY	P		SPIKEVAX SUSP	P	
MODERNA COVID-19 VACC 6M-5Y SUSP	P		SPIKEVAX SUSY	P	
MODERNA COVID-19 VACCINE SUSP	P		STAMARIL SUSR	P	
NOVAVAX COVID-19 VACCINE SUSP	P		TWINRIX SUSY	P	
NOVAVAX COVID-19 VACCINE SUSY	P		VAQTA	P	
PFIZER COVID-19 BIVAL 6MO-4YR	P		VARIVAX SUSR	P	2 max fill(s) per 999 day(s) retail
PFIZER COVID-19 VAC BIVAL 5-11	P		YF-VAX INJ	P	
PFIZER COVID-19 VAC BIVALENT	P		VAGINAL AND RELATED PRODUCTS		
PFIZER COVID-19 VAC-TRIS 5-11Y SUSP	P		Miscellaneous Vaginal Products		
PFIZER COVID-19 VAC-TRIS 6M-4Y SUSP	P		VAGISIL EX	P	
PFIZER-BIONT COVID-19 VAC-TRIS SUSP	P		Vaginal Anti-infectives		
PFIZER-BIONTECH COVID-19 VACC SUSP	P		CLEOCIN CREA (<i>clindamycin phosphate vaginal</i>)	NP	
PREHEVBRIO	P	3 max fill(s) per 999 day(s) retail	CLEOCIN SUPP	P	
PRIORIX SUSR	P		<i>clindamycin phosphate vaginal CREA</i>	P	
PROQUAD SUSR	P		CLINDESSE	NP	
RABAVERT	P		<i>clotrimazole vaginal CREA</i>	NP	
RECOMBIVAX HB SUSP	P	3 max fill(s) per 999 day(s) retail	<i>clotrimazole vaginal CREA</i>	P	
RECOMBIVAX HB SUSY	P	3 max fill(s) per 999 day(s) retail	GYNAZOLE-1	P	
ROTARIX SUSP	P		<i>metronidazole vaginal</i>	NP	
ROTARIX SUSR PO	P		<i>metronidazole vaginal</i>	P	
ROTATEQ SOLN PO	P		<i>miconazole nitrate vaginal CREA 2 %</i>	P	
			<i>miconazole nitrate vaginal KIT</i>	P	
			<i>miconazole nitrate vaginal SUPP</i>	P	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>miconazole nitrate vaginal SUPP</i>	P		<i>cholecalciferol CAPS PO 10 MCG, 125 MCG, 400 UNIT, 5000 UNIT</i>	P	
MONISTAT 3 CREA 4 %	P		<i>cholecalciferol LIQD PO 10 MCG/ML, 400 UNIT/ML</i>	P	
NUVESSA	P		<i>cholecalciferol TABS PO 10 MCG, 400 UNIT</i>	P	
<i>terconazole vaginal CREA</i>	P		<i>ergocalciferol CAPS PO</i>	P	
<i>tioconazole vaginal 6.5 %</i>	P		<i>ergocalciferol SOLN PO 200 MCG/ML</i>	P	
VANDAZOLE	NP		<i>phytonadione TABS PO</i>	P	
XACIATO GEL	NP		VITAMIN A PALMITATE TABS PO	P	
Vaginal Estrogens			<i>vitamin a CAPS PO</i>	P	
<i>estradiol vaginal CREA</i>	P		VITAMIN D2 TABS 400 UNIT	P	
<i>estradiol vaginal TABS</i>	P		<i>vitamin e CAPS PO</i>	P	
Vaginal Progestins			<i>vitamin e CAPS PO 90 MG, 180 MG, 450 MG</i>	NP	
CRINONE GEL	NP		VITAMIN E CAPS PO	P	
VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions			<i>vitamin e SOLN PO</i>	P	
Anaphylaxis Therapy Agents			<i>vitamin e SOLN PO</i>	P	
AUVI-Q SOAJ	NP		Water Soluble Vitamins		
<i>epinephrine (anaphylaxis) SOAJ</i>	NP		ACEROLA C 500 WAFR PO	P	
<i>epinephrine (anaphylaxis) SOAJ</i>	P		<i>ascorbic acid CHEW PO 100 MG, 250 MG, 500 MG</i>	P	
EPIPEN 2-PAK SOAJ (<i>epinephrine (anaphylaxis)</i>)	NP		<i>ascorbic acid CPCR PO</i>	P	
EPIPEN JR 2-PAK SOAJ (<i>epinephrine (anaphylaxis)</i>)	NP		ASCORBIC ACID POWD PO	P	
Vasopressors			<i>ascorbic acid TABS PO</i>	P	
<i>epinephrine SOLN IJ</i>	NP		<i>ascorbic acid TABS PO 500 MG-10 MG, 500 MG, 1000 MG</i>	NP	
VITAMINS			<i>ascorbic acid TBCR PO 500 MG, 1000 MG, 1500 MG</i>	P	
Oil Soluble Vitamins			B-1 TABS PO	P	
<i>beta carotene CAPS PO 25000 UNIT</i>	P		B-6 TABS PO	P	
<i>cholecalciferol CAPS PO 125 MCG, 25 MCG, 50 MCG</i>	NP				

Drug Name	Drug Tier	Requirements/ Limits
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<i>biotin TABS PO 10 MG, 800 MCG, 10000 MCG</i>	P	
BIOTIN TABS PO 300 MCG	P	
<i>calcium ascorbate TABS PO</i>	P	
CYTO C POWD PO	P	
<i>niacinamide TABS PO</i>	P	
<i>niacin CPCR PO 250 MG</i>	P	
<i>niacin TABS PO</i>	P	
<i>niacin TBCR PO 500 MG, 750 MG</i>	NP	
<i>pyridoxine hcl TABS PO 25 MG, 50 MG, 100 MG, 250 MG</i>	P	
<i>riboflavin TABS PO</i>	P	
<i>riboflavin TABS PO 100 MG</i>	NP	
SLO-NIACIN TBCR PO (<i>niacin</i>)	NP	
<i>thiamine hcl TABS PO</i>	P	
<i>thiamine mononitrate TABS PO 100 MG</i>	NP	
<i>thiamine mononitrate TABS PO 100 MG</i>	P	
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calcipotriene SOLN	72	calcium carbonate-cholecalciferol TABS PO 10 MCG-600 MG, 20 MCG-600 MG, 5 MCG-500 MG, 800 UNIT-600 MG	115	calcium-magnesium-zinc PO	115
calcipotriene-betamethasone dipropionate OINT	73	calcium carbonate-cholecalciferol TABS PO	115	CALCIUM-MAGNESIUM-ZINC-D3 TABS PO	116
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		CHERRY PO140
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MG	49	COLEMAN INSECT REPEL		COMFORT ASSURED LANCETS	
clozapine TBDP PO	50	HIGH&DRY AERO	78	33G	96
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MG (clozapine)	50	SPORTSMEN AERO	78	107	
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MG	8	COMBIGAN (brimonidine tartrate-		96	
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(docusate sodium)	93	COMBIVENT RESPIMAT AERS ..	15	28G	96
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				30G	96
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COMIRNATY SUSY	148			cromolyn sodium (nasal) 5.2	
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COMPACT SPACE CHAMBER/SM					
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50 MG-185 MG	116	CRESEMBA CAPS	29	CVS AIRSHIELD IMMUNITY	
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(carvedilol phosphate)	57	calcium)	31	CVS ALCOHOL PREP PADS ...	105
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EDECIN PO (ethacrynic acid)	82	ELON MATRIX PLUS TABS PO	131	EMFLAZA TABS PO (deflazacort)	64
EDLUAR SUBL	91	ELON R3 TABS PO	131	EMGALITY (300 MG DOSE) SOSY	114
EDURANT	54	ELREXFIO	38	EMGALITY SOAJ	114
efavirenz CAPS PO	54	ELYXYB	114	EMGALITY SOSY	114
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efavirenz-emtricitabine-tenofovir disoproxil fumarate PO	54	EMBRACE LANCETS ULTRA THIN 30G	97	EMSAM	20
efavirenz-lamivudine-tenofovir disoproxil fumarate	54	EMBRACE LANCING DEVICE/EJECTOR MISC	97	emtricitabine CAPS PO	54
EFFEXOR XR CP24 PO 150 MG (venlafaxine hcl)	22	EMBRACE PEN NEEDLES	107	emtricitabine-tenofovir disoproxil fumarate PO	54
EFFEXOR XR CP24 PO 37.5 MG, 75 MG (venlafaxine hcl)	22	EMBRACE PRESSURE ACTIVATED 21G	97	EMTRIVA CAPS PO (emtricitabine)	54
EFFIENT PO (prasugrel hcl)	89	EMBRACE PRESSURE ACTIVATED 28G	97	EMTRIVA SOLN	54
ELAHERE	38	EMEND CAPS PO 80 MG (aprepitant)	29	enalapril maleate & hydrochlorothiazide PO	34
ELEPSIA XR TB24 PO	17	EMEND SUSR	29	enalapril maleate SOLN	32
eletriptan hydrobromide PO	114	EMEND TRI-PACK CAPS PO (aprepitant)	29	enalapril maleate TABS PO	32
ELIDEL (pimecrolimus)	76	EMERGEN-C APPLE CIDER VINEGAR CHEW PO	122	ENBRACE HR	127
ELIGARD KIT SC	40	EMERGEN-C ASHWAGANDHA CHEW PO	122	ENBREL MINI SOCT	7
ELIMITE CREA (permethrin)	79	EMERGEN-C ELDERBERRY CHEW PO	122	ENBREL SOLN	7
ELIQUIS DVT/PE STARTER PACK TBPK	16	EMERGEN-C IMMUNE PLUS/VIT D CHEW PO	122	ENBREL SOSY	7
ELIQUIS TABS	16	EMERGEN-C IMMUNE+ CHEW PO	122	ENBREL SURECLICK SOAJ	7
ELITEK	43			ENDAL	66
ELLEENCE SOLN	41			ENDARI (glutamine (sickle cell))	89
ELMIRON CAPS PO	87			ENDUR-VM TBCR PO	122
ELOCTATE	88			ENDUR-VM WITH IRON TBCR PO	122
ELON HERBAL FOOT CREA	79			ENFAMIL ENFALYTE SOLN PO	116
ELON MATRIX 5000 COMPLETE TABS PO	131	EMERGEN-C TURMERIC & GINGER CHEW PO	122	ENERGIX-B SUSP 20 MCG/ML	148
ELON MATRIX 5000 TABS PO	131	EMERGEN-C VITAMIN C CHEW PO	122	ENERGIX-B SUSY	148
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enoxaparin sodium SOLN IJ 300 MG/3ML	16	UNIT/ML, 20000 UNIT/ML	89	eribulin mesylate	44
enoxaparin sodium SOSY	16	EPRONTIA SOLN	17	ERIVEDGE	39
ENSTILAR FOAM	74	EPSOLAY CREA	69	ERLEADA	40
entacapone PO	45	EPZICOM PO (abacavir sulfate- lamivudine)	54	erlotinib hcl	39
ENTADFI	87	EQ MULTIVITAMINS ADULT GUMMY CHEW PO	122	ERMEZA SOLN PO	144
ENTRESTO CPSP	59	EQ SPACE CHAMBER ANTI- STATIC DEVI	112	ERTACZO	71
ENTRESTO TABS PO	59	EQ SPACE CHAMBER ANTI- STATIC L DEVI	112	ERYGEL GEL (erythromycin (acne aid))	69
ENTYVIO PEN SOAJ	86	EQ SPACE CHAMBER ANTI- STATIC M DEVI	112	ERYPED 200 SUSR PO (erythromycin ethylsuccinate)	94
ENTYVIO SOLR	86	EQ SPACE CHAMBER ANTI- STATIC S DEVI	112	ERYPED 400 SUSR PO (erythromycin ethylsuccinate)	94
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EPANED SOLN (enalapril maleate) 32	32	EQL COLOR LANCETS 21G	97	erythromycin (acne aid) PADS	69
EPCLUSA PACK	56	EQL COLOR LANCETS MICRO 33G	97	erythromycin (acne aid) SOLN	69
EPCLUSA TABS	56	EQL DIGESTIVE ENZYMES TABS PO	81	erythromycin (ophth)	136
EPIDIOLEX	17	EQL INSULIN SYRINGE	107	erythromycin base CPEP PO	94
EPIDUO FORTE GEL (adapalene- benzoyl peroxide)	69	EQL ONE DAILY ADULT GUMMIES CHEW PO	122	erythromycin base TABS PO	94
EPIFOAM FOAM	74	EQL SUPER THIN LANCETS 30G 97	97	erythromycin base TBEC PO	94
epinastine hcl (ophth)	138	EQL THIN LANCETS 26G	97	erythromycin ethylsuccinate SUSR PO	94
epinephrine (anaphylaxis) SOAJ ..	150	EQUALACTIN CHEW PO	92	erythromycin ethylsuccinate TABS PO	94
epinephrine hcl (nasal)	134	EQUETRO PO	46	erythromycin stearate TABS PO 250 MG	94
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EPIPEN 2-PAK SOAJ (epinephrine (anaphylaxis))	150	ergocalciferol CAPS PO	150	escitalopram oxalate SOLN PO ...	21
EPIPEN JR 2-PAK SOAJ (epinephrine (anaphylaxis))	150	ergocalciferol SOLN PO 200 MCG/ML	150	escitalopram oxalate TABS PO 20 MG	21
EPIVIR SOLN PO (lamivudine)	54	ergotamine w/ caffeine TABS PO	114	escitalopram oxalate TABS PO 5 MG, 10 MG	21
EPIVIR TABS PO (lamivudine)	54			esomeprazole magnesium CPDR PO	145
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EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000					

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estradiol PTWK84	everolimus TABS41	EZ-LETS LANCETS 21G97
estradiol TABS PO84	everolimus TBSO41	EZ-LETS LANCETS 26G97
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ethacrynic acid PO82	EXCEL-GEL GEL80	famotidine-calcium carbonate-
ethambutol hcl TABS PO36	EXELON (rivastigmine)141	magnesium hydroxide PO146
ethosuximide CAPS PO19	exemestane PO40	FANAPT PO47
ethosuximide SOLN PO19	EXFORGE HCT PO (amlodipine-	FANAPT TITRATION PACK PO ...47
ethynodiol diacet & eth estrad PO .62	valsartan-hydrochlorothiazide)34	FARESTON PO (toremifene citrate)
etodolac CAPS PO6	EXFORGE PO (amlodipine besylate-	40
etodolac TABS PO6	valsartan)34	FARXIGA PO 10 MG (dapagliflozin
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FELBATOL SUSP (felbamate)	19	FERRIPROX SOLN	28	fexofenadine-pseudoephedrine TB24
FELBATOL TABS PO (felbamate) .19		FERRIPROX TABS (deferiprone) . 28		PO
FELDENE CAPS PO 10 MG		FERRIPROX TWICE-A-DAY TABS		66
(piroxicam)	6	28		FIASP FLEXTOUCH SOPN
felodipine PO	59	ferrous fumarate TABS PO 324 MG		25
FEMARA PO (letrozole)	40	90		FIASP PENFILL SOCT
FEM-CAL CITRATE TABS PO ...117		ferrous fumarate w/ b12-vit c-fa-ifc		25
FEMLYV TBDP	62	PO		25
FEMQUIL CAPS PO	131	ferrous fumarate-fa-b complex-c-zn-		FIASP SOLN
fenofibrate CAPS PO	31	mg-mn-cu TABS PO		25
fenofibrate micronized PO 43 MG, 90		90		FIASP SOLN
MG, 130 MG	31	ferrous gluconate TABS PO 240 MG .		25
fenofibrate micronized PO 67 MG,		90		FIASP SOLN
134 MG, 200 MG	31	ferrous gluconate TABS PO		25
fenofibrate TABS PO 40 MG, 120		90		FIBRICOR PO 105 MG (fenofibric
MG	31	ferrous sulfate dried TABS PO90		acid)
fenofibrate TABS PO 48 MG, 54 MG,		ferrous sulfate SOLN PO 220		31
145 MG, 160 MG	31	MG/5ML, 300 MG/5ML		FIFTY50 ALCOHOL PREP
fenofibric acid PO	31	90		105
FENOGLIDE TABS PO (fenofibrate) .		ferrous sulfate SOLN PO		FIFTY50 PEN NEEDLES
31		90		108
fenoprofen calcium CAPS PO 400		ferrous sulfate TABS PO		FIFTY50 SAFETY SEAL LANCETS .
MG	6	90		97
fenoprofen calcium TABS PO	6	ferrous sulfate TBEC PO 324 MG .90		FIFTY50 SUPERIOR COMFORT
FENSOLVI (6 MONTH) SC	83	ferrous sulfate TBEC PO 325 MG .90		SYR
fentanyl citrate LPOP	9	fesoterodine fumarate 4 MG		108
fentanyl citrate TABS 400 MCG, 600		fesoterodine fumarate 8 MG		FIFTY50 UNILET LANCETS 33G .97
MCG, 800 MCG	9	146		FINACEA GEL (azelaic acid)
fentanyl PT72 12 MCG/HR, 25		FETZIMA CP24 20 MG, 40 MG ... 22		79
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100 MCG/HR	9	FETZIMA TITRATION C4PK		87
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MCG/HR, 87.5 MCG/HR	9	FEVERALL JUNIOR STRENGTH		97
		SUPP PR		FINGERSTIX LANCETS
		8		97
		fexofenadine hcl SUSP PO		fingolimod hcl PO
		30		142
		fexofenadine hcl TABS PO 60 MG,		FINTEPLA
		180 MG		17
		30		FIORICET CAPS PO (butalbital-
		fexofenadine-pseudoephedrine TB12		acetaminophen-caffeine)
				7
				FIORICET/CODEINE PO 30 MG-40
				MG-50 MG-300 MG (butalbital-
				acetaminophen-caffeine w/ codeine) .
				10
				FIRAZYR SOSY (icatibant acetate)
				88
				FIRMAGON (240 MG DOSE)
				40
				FIRMAGON 80 MG
				40
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FIRVANQ SOLR PO (vancomycin hcl)	35	FLOVENT HFA (fluticasone propionate hfa)	15	fluocinolone acetone OIL	74
FLAGYL CAPS PO (metronidazole) 35		FLUAD	148	fluocinolone acetone OINT	74
FLAREX	137	FLUAD QUADRIVALENT	148	fluocinolone acetone SOLN	74
FLAVOR PLUS LIQD PO	140	FLUARIX QUADRIVALENT SUSY 148		fluocinonide CREA	74
FLAVOR SWEET SYRP PO	140	FLUARIX SUSY	148	fluocinonide emulsified base	74
FLAVOR SWEET-SF SYRP PO .	140	FLUBLOK QUADRIVALENT	148	fluocinonide GEL	74
flavoxate hcl PO	147	FLUBLOK SOSY	148	fluocinonide OINT	74
FLEBOGAMMA DIF SOLN 2.5 GM/50ML	139	FLUCELVAX QUADRIVALENT SUSP	148	fluocinonide SOLN	74
flecainide acetate PO	14	FLUCELVAX QUADRIVALENT SUSY	148	fluorometholone (ophth) SUSP ...	137
FLEET BISACODYL ENEM	93	FLUCELVAX SUSP	148	fluorouracil (topical) CREA	72
FLEET ENEMA ENEM PR (sodium phosphates)	93	FLUCELVAX SUSY	148	fluorouracil (topical) SOLN	72
FLEET OIL ENEM PR (mineral oil) 93		fluconazole in nacl 0.9 %-200 MG/100ML, 0.9 %-400 MG/200ML 29		fluorouracil	37
FLEET SALINE ENEMA ENEM PR (sodium phosphates)	93	fluconazole SUSR PO	29	fluoxetine hcl (pmdd) TABS PO ..	143
FLEQSUVY SUSP (baclofen)	133	fluconazole TABS PO 150 MG, 200 MG	29	fluoxetine hcl CAPS PO	21
FLEXICHAMBER ADULT MASK/SMALL	112	fluconazole TABS PO 50 MG, 100 MG	29	fluoxetine hcl CPDR PO	21
FLEXICHAMBER CHILD MASK/LARGE	112	flucytosine PO	29	fluoxetine hcl SOLN PO	21
FLEXICHAMBER CHILD MASK/SMALL	112	fludarabine phosphate SOLN	37	FLUOXETINE HCL TABS PO (fluoxetine hcl)	21
FLEXICHAMBER DEVI	112	fludarabine phosphate SOLR	37	fluoxetine hcl TABS PO	21
FLOLIPID SUSP PO	31	fludrocortisone acetate TABS PO .	64	fluphenazine decanoate	52
FLOMAX PO (tamsulosin hcl)	87	FLULAVAL QUADRIVALENT SUSY . 148		fluphenazine hcl CONC PO	52
FLORAFOL PEDIATRIC CHEW PO .	125	FLULAVAL SUSY	148	fluphenazine hcl ELIX PO	52
FLOVENT DISKUS AEPB (fluticasone propionate (inhalation)) 15		FLUMIST	148	fluphenazine hcl SOLN	52
		FLUMIST QUADRIVALENT	148	fluphenazine hcl TABS PO	52
		flunisolide (nasal)	134	flurandrenolide LOTN	74
		fluocinolone acetone CREA	74	flurazepam hcl PO	91
				flurbiprofen sodium	138
				flurbiprofen TABS PO 100 MG	6
				flutamide PO	40
				fluticasone furoate-vilanterol	15

fluticasone propionate (inhalation) AEPB15	FOLAGENT DHA CAPS PO122	FOSRENOL PACK87
fluticasone propionate (nasal) SUSP . 134	FOLAMED DHA CAPS PO122	FOTIVDA41
fluticasone propionate CREA 0.05 % 74	FOLAPRIME TABS PO122	FRAGMIN SOLN 10000 UNIT/4ML 16
fluticasone propionate hfa15	FOLCYTEINE TABS PO125	FRAGMIN SOLN 95000 UNIT/3.8ML 16
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fluticasone-salmeterol AERO15	folic acid TABS PO89	FREDS PHARMACY UNIFINE PENTIPS108
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	fosinopril sodium PO32	
	FOSRENOL CHEW PO (lanthanum carbonate)87	

FREESTYLE LITE KIT98	FYLNETRA89	gemcitabine hcl SOLN37
FREESTYLE LITE TEST STRP ...81	gabapentin (once-daily) TABS PO 143	GEMCITABINE HCL SOLN37
FREESTYLE PRECISION NEO SYSTEM KIT98	gabapentin CAPS PO18	gemcitabine hcl SOLR37
FREESTYLE PRECISION NEO TEST STRP81	gabapentin SOLN PO18	gemfibrozil TABS PO31
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fructose-dextrose-phosphoric acid SOLN PO28	galantamine hydrobromide TABS PO141	GENOTROPIN CART SC83
FRUIT C 200 CHEW119	GAMASTAN139	GENOTROPIN MINIQUEL PRSY 83
FRUZAQLA38	GAMMAGARD139	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
FT CHILDRENS MULTI PLUS IMMUNE CHEW PO126	GAMMAGARD S/D LESS IGA SOLR139	gentamicin sulfate (ophth) SOLN .136
FT ELECTROLYTE SOLN PO ...116	GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML139	gentamicin sulfate (topical) CREA .70
FT IMMUNE SUPPORT CHEW PO 122	GAMMAPLEX SOLN 5 GM/50ML 139	gentamicin sulfate (topical) OINT .70
FT SALINE NASAL SPRAY SOLN 133	GAMMAPLEX SOLN139	gentamicin sulfate IJ 40 MG/ML4
FULPHILA89	GAMUNEX-C139	GENTEAL TEARS MODERATE PF (dextran 70-hypromellose)134
fulvestrant SOSY40	GARDASIL 9 SUSP148	GENTEEL BUTTERFLY TOUCH LANCET98
FUNGOID TINCTURE SOLN71	GARDASIL 9 SUSY148	GENTEEL PLUS LANCING (BLACK) MISC98
furosemide SOLN PO 8 MG/ML, 10 MG/ML82	gatifloxacin (ophth)136	GENTEEL PLUS LANCING (PURPLE) MISC98
furosemide TABS PO82	GAVRETO41	GENTEEL PLUS LANCING (WHITE) MISC98
FUZEON SOLR55	GAZYVA38	GENTEEL PLUS LANCING DEV(BLUE) MISC98
FYARRO41	gefitinib39	GENTEEL PLUS LANCING DEV(PINK) MISC98
FYCOMPA SUSP17	GEMCITABINE HCL SOLN (gemcitabine hcl)37	GENTLE-LET GP LANCETS98
FYCOMPA TABS17		

GENTLE-LET LANCETS	98	GLOBAL INJECT EASE LANCETS 30G	98	glycol 400	135
GENVOYA	55	GLOBAL INSULIN SYRINGES ..	108	GLYCOTROL CAPS PO	131
GEODON (ziprasidone mesylate) ..	46	GLOBAL LANCING DEVICE MISC 98		GLYCOTROL COMPLETE CAPS PO	131
GEODON PO 20 MG, 60 MG, 80 MG (ziprasidone hcl)	46	GLOPERBA SOLN PO	88	GLYXAMBI PO	23
GEODON PO 40 MG (ziprasidone hcl)	46	GLUCAGEN HYPOKIT	24	GNP ALCOHOL SWABS	105
GERBER GOOD START WATER 140		glucagon (rdna)	24	GNP CLICKFINE PEN NEEDLES 108	
GILENYA PO (fingolimod hcl)	142	GLUCAGON EMERGENCY	24	GNP GLUCOSE CHEW PO	24
GILOTRIF	39	GLUCAGON HCL (DIAGNOSTIC) 80		GNP INSULIN SYRINGE	108
glatiramer acetate SOSY	142	GLUCO TO GO CHEW PO	24	GNP INSULIN SYRINGES 28GX1/2"	108
GLEEEVEC TABS PO (imatinib mesylate)	42	GLUCOCOM LANCETS 28G	98	GNP INSULIN SYRINGES 29GX1/2"	108
GLEEEVEC TABS PO 400 MG (imatinib mesylate)	42	GLUCOCOM LANCETS 30G	98	GNP INSULIN SYRINGES 31GX5/16"	108
GLIADEL WAFER	37	GLUCOCOM LANCETS 33G	98	GNP LANCETS 21G	98
glimepiride PO 1 MG	27	GLUCOPRO INSULIN SYRINGE 108		GNP LANCETS THIN 26G	98
glimepiride PO 2 MG, 4 MG	27	GLUCOSE CHEW PO	24	GNP LANCING SYSTEM DEVICE MISC	98
glipizide TABS PO 5 MG, 10 MG ..	27	GLUCOSE INSTANT ENERGY PO 24		GNP PRENATAL TABS PO	127
glipizide TB24 PO	27	GLUMETZA TB24 PO (metformin hcl)	23	GNP QUICK DISSOLVE GLUCOSE CHEW PO	24
glipizide-metformin hcl PO	23	glutamine (sickle cell)	89	GNP STERILE LANCETS 28G ...	98
GLOBAL ALCOHOL PREP EASE 105		glutamine TABS PO	134	GNP STERILE LANCETS 30G ...	98
GLOBAL EASE INJECT PEN NEEDLES	108	glyburide micronized PO 1.5 MG, 3 MG	27	GNP STERILE LANCETS 33G ...	98
GLOBAL EASY GLIDE INSULIN SYR	108	glyburide micronized PO 6 MG	27	GNP ULTICARE PEN NEEDLES 108	
GLOBAL EASY GLIDE PEN NEEDLES	108	glyburide TABS PO	27	GNP ULTIGUARD SAFEPAK NEEDLE	108
GLOBAL INJECT EASE INSULIN SYR	108	glyburide-metformin PO	23	GNP ULTRA COM INSULIN SYRINGE	108
GLOBAL INJECT EASE LANCETS 28G	98	glycerin (laxative) SUPP PR 1 GM, 1.2 GM, 2 GM, 2.1 GM, 80.7 %	92	GNP URINARY TRACT TEST STRIPS STRP	81
		glycerin (topical)	76		
		glycerin-hypromellose-polyethylene			

GOCOVRI CP24 137 MG45	GRALISE TABS PO143	GYNAZOLE-1149
GOCOVRI CP24 68.5 MG45	granisetron hcl SOLN IV 1 MG/ML, 4 MG/4ML28	HADLIMA PUSHTOUCH SOAJ5
GOJJI LANCING DEVICE/CLEAR CAP MISC98	granisetron hcl TABS PO28	HADLIMA SOSY5
GOJJI STERILE LANCETS98	GRANIX SOLN89	HAEGARDA SOLR SC89
GOLD BOND FOOT CREA79	GRANIX SOSY89	HAEMOLANCE98
GOLYTELY SOLR PO (peg 3350-kcl- sod bicarb-sod chloride-sod sulfate) 92	GRAPE SEED CAPS PO119	HAEMOLANCE LOW FLOW LANCETS98
GONITRO PACK13	GRAPE SEED EXTRACT CAPS PO . 119	HAEMOLANCE PLUS98
GOOD START STERILE WATER 140	GRAPE SYRUP SYRP PO140	HAEMOLANCE PLUS HIGH FLOW . 98
GOODSENSE ALCOHOL SWABS 105	griseofulvin microsize SUSP PO ..29	HAEMOLANCE PLUS LOW FLOW . 98
GOODSENSE CLICKFINE PEN NEEDLE108	griseofulvin microsize TABS PO ..29	HAEMOLANCE PLUS MAX FLOW 98
GOODSENSE COLOR LANCETS 33G98	griseofulvin ultramicrosize PO29	HAEMOLANCE PLUS PEDIATRIC FLOW99
GOODSENSE ELECTROLYTE ADV CARE SOLN PO116	guaifenesin LIQD PO 100 MG/5ML, 200 MG/10ML, 300 MG/15ML68	HAIR FARE TABS PO131
GOODSENSE GLUCOSE PO24	guaifenesin LIQD PO 100 MG/5ML, 200 MG/10ML68	HAIR NOURISHING SUPPLEMENT TABS PO132
GOODSENSE LANCETS 26G UNIV98	guaifenesin TABS PO 400 MG68	HAIR/SKIN/NAILS CAPS PO122
GOODSENSE LANCETS 30G98	guaifenesin TABS PO68	HALAVEN (eribulin mesylate)44
GOODSENSE LANCETS 30G UNIV98	guaifenesin TB12 PO 1200 MG ...68	halcinonide CREA74
GOODSENSE LANCETS 33G98	guaifenesin TB12 PO68	HALCION PO 0.25 MG (triazolam) 91
GOODSENSE LANCETS 33G UNIV98	guaifenesin-codeine SOLN PO66	HALDOL DECANOATE (haloperidol decanoate)49
GOODSENSE LANCING DEVICE MISC98	guanfacine hcl (adhd) PO 1 MG, 2 MG2	halobetasol propionate CREA74
GOODSENSE PEN NEEDLE PENFINE108	guanfacine hcl (adhd) PO 3 MG, 4 MG2	halobetasol propionate FOAM74
GRALISE TABS PO (gabapentin (once-daily))143	guanfacine hcl PO33	halobetasol propionate OINT74
	GVOKE HYPOPEN 1-PACK SOAJ 24	HALOG CREA (halcinonide)75
	GVOKE HYPOPEN 2-PACK SOAJ 24	HALOG OINT75
	GVOKE KIT SOLN24	HALOG SOLN75
	GVOKE PFS SOSY 1 MG/0.2ML ..24	haloperidol decanoate49

haloperidol lactate CONC PO 49	99	HIBERIX SOLR IJ 147
haloperidol lactate SOLN 49	H-E-B INCONTROL LANCETS 30G . 99	HIGH POTENCY MULTIVITAMIN TABS PO 125
haloperidol TABS PO 49	H-E-B INCONTROL LANCETS 33G . 99	HISTEX-DM SYRP PO 66
HALUCORT GEL 77	H-E-B INCONTROL PEN NEEDLES108	HIZENTRA SOLN 139
HAPRODERM GEL 80	H-E-B INCONTROL UNIFINE PENTIP108	HIZENTRA SOSY 139
HARVONI PACK 56	HEMADY TABS PO 64	HM STERILE ALCOHOL PREP .105
HARVONI TABS 56	HEMANGEOL SOLN PO 58	HM ULTICARE INSULIN SYRINGE . 108
HAVRIX 148	HEMATINIC PLUS VIT/MINERALS TABS PO90	HM ULTICARE MINI PEN NEEDLES108
HEALTH CARE LANCING DEVICE MISC 99	HEMATINIC/FOLIC ACID PO 90	HM ULTICARE SHORT PEN NEEDLES108
HEALTHWISE INSULIN SYR/NEEDLE108	HEMLIBRA 88	HOMOCYSTEINE FORMULA TABS PO90
HEALTHWISE MICRON PEN NEEDLES108	HEMOFIL M SOLR 250 UNIT, 500 UNIT, 1000 UNIT, 1700 UNIT 88	HOMOCYSTEINE SUPPORT CAPS PO81
HEALTHWISE SHORT PEN NEEDLES108	HEPARIN (PORCINE) IN NACL SOLN IV 0.45 %-25000 UNIT/250ML, 0.45 %-25000 UNIT/500ML16	HONEY BEARS PO 126
HEALTHWISE UNIFINE PENTIPS 108	HEPARIN SOD (PORCINE) IN D5W16	HONEY BEARS W/IRON-ZINC CHEW PO 126
HEALTHY ACCENTS LANCING DEVICE MISC 99	heparin sodium (porcine) lock flush 10 UNIT/ML, 100 UNIT/ML 17	HORIZANT PO 143
HEALTHY ACCENTS UNIFINE PENTIP108	heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML17	HORMONE PROTECT CAPS PO .81
HEALTHY ACCENTS UNILET LANCETS 99	HEPLISAV-B SOSY148	HULIO (2 PEN) AJKT 5
HEALTHY EYES SUPERVISION 2 CAPS PO122	HERCEPTIN 150 MG39	HULIO (2 SYRINGE) PSKT5
HEALTHY HEART COMPLEX TABS PO 132	HERCEPTIN HYLECTA41	HUMALOG JUNIOR KWIKPEN SOPN 25
HEART SAVIOR CAPS PO 132	HERCESSI39	HUMALOG KWIKPEN SOPN 25
HEART TABS TABS PO 132	HERZUMA39	HUMALOG MIX 50/50 KWIKPEN SUPN 25
H-E-B INCONTROL ADV LANCING MISC99	HETLIOZ CAPS (tasimelteon)91	HUMALOG MIX 75/25 KWIKPEN SUPN 25
H-E-B INCONTROL ALCOHOL . 105	HETLIOZ LQ SUSP91	HUMALOG MIX 75/25 SUSP25
H-E-B INCONTROL LANCETS 28G .		HUMALOG SOCT 25

HUMALOG SOLN IJ25	HYDREA PO (hydroxyurea)43	75
HUMALOG TEMPO PEN SOPN .. 25	hydrochlorothiazide CAPS PO82	HYDROCORTISONE ACETATE
HUMATE-P SOLR88	hydrochlorothiazide TABS PO82	CREA75
HUMATROPE CART IJ83	HYDROCIL PACK PO92	hydrocortisone butyrate CREA 75
HUMIRA (2 PEN) AJKT5	hydrocodone bitartrate CP12 PO ... 9	hydrocortisone butyrate hydrophilic
HUMIRA (2 SYRINGE) PSKT5	hydrocodone bitartrate T24A9	lipo base75
HUMIRA-CD/UC/HS STARTER	hydrocodone bitartrate-homatropine	hydrocortisone butyrate LOTN75
AJKT 80 MG/0.8ML5	methylbromide SOLN PO64	hydrocortisone butyrate OINT 75
HUMIRA-PED>/=40KG UC	hydrocodone bitartrate-homatropine	hydrocortisone butyrate SOLN75
STARTER AJKT5	methylbromide TABS PO64	HYDROCORTISONE COMPLETE
HUMIRA-PSORIASIS/UVEIT	hydrocodone polistirex-	KIT THPK75
STARTER AJKT5	chlorpheniramine polistirex SUER PO	hydrocortisone TABS PO64
HUMULIN 70/30 KWIKPEN SUPN 2566	hydrocortisone valerate CREA75
HUMULIN 70/30 SUSP25	hydrocodone-acetaminophen SOLN	hydrocortisone valerate OINT 75
HUMULIN N KWIKPEN SUPN 25	PO10	hydrocortisone w/acetic acid139
HUMULIN N SUSP25	hydrocodone-acetaminophen TABS	hydromorphone hcl LIQD PO 9
HUMULIN R SOLN IJ26	PO 300 MG-10 MG, 300 MG-5 MG,	HYDROMORPHONE HCL SUPP PR
HUMULIN R U-500	300 MG-7.5 MG, 325 MG-10 MG,9
(CONCENTRATED) SOLN SC25	325 MG-5 MG, 325 MG-7.5 MG ...10	hydromorphone hcl TABS PO9
HUMULIN R U-500 KWIKPEN SOPN	hydrocodone-acetaminophen TABS	hydromorphone hcl TB24 PO9
SC25	PO 325 MG-2.5 MG10	hydroxychloroquine sulfate PO 200
HURRICANE SNAP-N-GO SWAB	hydrocodone-ibuprofen PO 10 MG-	MG36
118	200 MG, 5 MG-200 MG, 7.5 MG-200	HYDROXYM GEL75
HYCANTIN CAPS PO44	MG10	hydroxyprogesterone caproate OIL
HYCODAN SOLN PO (hydrocodone	hydrocortisone (intrarectal) PR 11	141
bitartrate-homatropine	hydrocortisone (rectal) EX 1 % 11	hydroxyurea PO43
methylbromide)64	hydrocortisone (rectal) EX11	hydroxyzine hcl SYRP PO13
HYCODAN TABS PO 1.5 MG-5 MG	hydrocortisone (topical) CREA75	hydroxyzine hcl TABS PO13
(hydrocodone bitartrate-homatropine	hydrocortisone (topical) LOTN 2.5 % .	hydroxyzine pamoate CAPS PO ...13
methylbromide)64	75	HYMPAVZI88
hydralazine hcl TABS PO35	hydrocortisone (topical) OINT 1 %,	HYQVIA139
HYDRALYTE FREEZER POPS	2.5 %75	HYRIMOZ SOAJ5
SOLN PO116	hydrocortisone (topical) SOLN 2.5 %	
HYDRALYTE SOLN PO116	75	
	hydrocortisone acetate (topical) OINT	

HYRIMOZ SOSY	5	IDACIO (2 PEN) AJKT	5	imipramine pamoate PO	22
HYRIMOZ-CROHNS/UC STARTER SOAJ	5	IDACIO (2 SYRINGE) PSKT	5	imiquimod	76
HYRIMOZ-PED<40KG CROHN STARTER SOSY	5	IDACIO-CROHNS/UC STARTER AJKT	5	imiquimod 3.75 %	76
HYRIMOZ-PED>=40KG CROHN START SOSY	5	IDACIO-PSORIASIS STARTER AJKT	5	IMITREX 5 MG/ACT (sumatriptan) 114	
HYRIMOZ-PLAQ PSOR/UEIT START SOAJ	5	IDAMYCIN PFS (idarubicin hcl) ..	41	IMITREX STATDOSE REFILL SOCT (sumatriptan succinate)	114
HYSINGLA ER T24A	9	idarubicin hcl	41	IMITREX STATDOSE SYSTEM SOAJ (sumatriptan succinate) ...	114
HY-VEE GLUCOSE PO	24	IDELVION	88	IMITREX TABS PO (sumatriptan succinate)	114
HY-VEE LANCETS	99	IDHIFA	42	IMKELDI SOLN	42
HY-VEE THIN LANCETS	99	IDOSE TR IMPL	138	IMLYGIC	44
HYZAAR PO (losartan potassium & hydrochlorothiazide)	34	IFEX SOLR (ifosfamide)	37	IMMUNE ESSENTIALS DAILY CAPS PO	122
ibandronate sodium TABS PO	83	IFEX SOLR	37	IMMUNE SUPPORT CHEW PO .	122
IBRANCE CAPS	42	ifosfamide SOLN	37	IMMUNERX CAPS PO	132
IBRANCE TABS	42	ifosfamide SOLR	37	IMMUNICARE CAPS PO	132
IBSRELA	86	IFOSFAMIDE SOLR	37	IMOVAX RABIES SUSR	148
ibuprofen CAPS PO	6	IGALMI FILM	91	IMPEKLO LOTN	75
ibuprofen CHEW PO	6	IHEALTH LANCING DEVICE MISC 99		IN TOUCH LANCING DEVICE MISC 99	
ibuprofen SUSP PO 100 MG/5ML ..	6	ILARIS SOLN	5	IN TOUCH STERILE LANCETS 30G	99
ibuprofen SUSP PO	6	ILEVRO	138	INBRIJA CAPS	45
ibuprofen TABS PO 200 MG, 400 MG, 600 MG, 800 MG	6	ILUMYA	72	IN-CHECK DIAL FLOW TRAINER DEVI	113
ibuprofen TABS PO 800 MG	6	ILUVIEN	137	IN-CHECK INSPIRATORY FLOW MTR DEVI	113
ibuprofen-diphenhydramine citrate PO	91	imatinib mesylate TABS PO	42	INCONTROL ULTICARE PEN NEEDLES	108
ibuprofen-famotidine	6	IMBRUVICA CAPS	42	INCRUSE ELLIPTA	14
icatibant acetate SOSY	88	IMBRUVICA SUSP	42	indapamide TABS PO 1.25 MG, 2.5 MG	82
ICLUSIG PO	42	IMBRUVICA TABS	42		
icosapent ethyl	30	IMDELLTRA	38		
		IMFINZI	38		
		imipenem-cilastatin IV	35		
		imipramine hcl TABS PO	22		

INDERAL LA CP24 PO 120 MG, 160 MG (propranolol hcl)	58	INPEN 100-PINK-NOVOLOG-FIASP DEVI	108	INSULIN LISPRO (1 UNIT DIAL) SOPN	26
INDERAL LA CP24 PO 60 MG, 80 MG (propranolol hcl)	58	INQOVI	41	INSULIN LISPRO JUNIOR KWIKPEN SOPN	26
INDERAL XL PO	58	INREBIC	42	INSULIN LISPRO PROT & LISPRO SUPN	26
indomethacin CAPS PO 25 MG, 50 MG	6	INSPIRACHAMBER/LARGE DEVI 113		INSULIN LISPRO SOLN IJ	26
indomethacin CPR PO	6	INSPIRACHAMBER/MEDIUM DEVI 113		INSULIN SYRINGE	108
indomethacin SUPP PR	6	INSPIRACHAMBER/SMALL DEVI 113		INSULIN SYRINGE-NEEDLE U-100	108
indomethacin SUSP PO	6	INSPIREASE MISC	113	INSUPEN PEN NEEDLES	108
INFASURF TR	144	INSULIN ASP PROT & ASP FLEXPEN SUPN	26	INSUPEN SENSITIVE	108
INFED	90	INSULIN ASPART FLEXPEN SOPN 26		INSUPEN ULTRAFIN	108
INFLAMEX CAPS PO	132	INSULIN ASPART PENFILL SOCT 26		INTELENCE PO (etravirine)	55
INFLECTRA SOLR	86	INSULIN ASPART PROT & ASPART SUSP	26	INTELENCE PO	55
INFLIXIMAB	86	INSULIN ASPART SOLN IJ	26	INTRASITE GEL APPLIPAK GEL	80
INFUGEM	37	INSULIN DEGLUDEC FLEXTOUCH SOPN	26	INTUNIV PO 1 MG, 2 MG (guanfacine hcl (adhd))	2
INGREZZA CAPS	142	INSULIN DEGLUDEC SOLN	26	INTUNIV PO 3 MG, 4 MG (guanfacine hcl (adhd))	2
INGREZZA CPPK	142	INSULIN GLARGINE MAX SOLOSTAR SOPN	26	INULOSE BLOOD SUGAR SUPPORT CAPS PO	132
INGREZZA CPSP	142	INSULIN GLARGINE SOLN	26	INVEGA HAFYERA	48
INLYTA	38	INSULIN GLARGINE SOLOSTAR SOPN 100 UNIT/ML	26	INVEGA PO 3 MG (paliperidone) .	48
INNOPRAN XL PO	58	INSULIN GLARGINE SOLOSTAR SOPN 300 UNIT/ML	26	INVEGA PO 6 MG, 9 MG (paliperidone)	48
inositol niacinate CAPS PO	60	INSULIN GLARGINE-YFGN SOLN 26		INVEGA SUSTENNA	48
INPEFA	60	INSULIN GLARGINE-YFGN SOPN		INVEGA TRINZA	48
INPEN 100-BLUE-LILLY-HUMALOG DEVI	108			INVELTYS SUSP	137
INPEN 100-BLUE-NOVOLOG-FIASP DEVI	108			INVOKAMET TABS	23
INPEN 100-GREY-LILLY-HUMALOG DEVI	108			INVOKAMET XR TB24	23
INPEN 100-GREY-NOVOLOG-FIASP DEVI	108			INVOKANA	27
INPEN 100-PINK-LILLY-HUMALOG DEVI	108				

IOPIDINE	136	isosorbide mononitrate TABS PO ..	13	JANUVIA PO 25 MG, 50 MG	25
IPOL	148	ISOSORBIDE MONONITRATE		JARDIANCE PO	27
ipratropium bromide (nasal)	134	TABS PO	13	JATENZO CAPS	11
ipratropium bromide SOLN 0.02 %	14	isosorbide mononitrate TB24 PO ..	13	JAYPIRCA	42
ipratropium-albuterol SOLN	16	ISOTRETINOIN	61	JELMYTO SOLR UL	41
IQIRVO	86	isotretinoin PO	69	JEMPERLI	38
irbesartan PO	33	isradipine CAPS PO	59	JENTADUETO TABS	23
irbesartan-hydrochlorothiazide PO		ISTALOL SOLN (timolol maleate		JENTADUETO XR TB24	23
12.5 MG-300 MG	34	(ophth))	135	JEVTANA	44
irbesartan-hydrochlorothiazide PO	34	ISTODAX SOLR (romidepsin)	42	JIVI	88
IRESSA (gefitinib)	39	ITCH-X GEL	77	JORNAY PM CP24 PO	3
irinotecan hcl	44	ITCH-X SOLN	77	JUBLIA	71
IRON CHEWS PEDIATRIC CHEW		ITOVEBI	42	JULUCA	55
PO	91	itraconazole CAPS PO	29	JUXTAPID PO 5 MG, 10 MG, 20 MG,	
iron polysaccharide complex-vit b12-		itraconazole SOLN	29	30 MG	32
folic acid CAPS PO	90	ivermectin (pediculicide)	79	JYLAMVO SOLN	37
IRON TABS PO 90 MG	91	ivermectin (rosacea)	79	JYNNEOS	148
iron-vitamin c PO	90	IWILFIN	43	KADCYLA	38
iron-vitamin c-vitamin b12-folic acid		IXCHIQ	148	KALBITOR	89
TABS PO	90	IXEMPRA KIT	44	KALETRA SOLN PO (lopinavir-	
ISENTRESS CHEW	55	IXIARO	148	ritonavir)	55
ISENTRESS HD TABS PO	55	IXINITY SOLR	88	KALETRA TABS PO (lopinavir-	
ISENTRESS PACK PO	55	IYUZEH SOLN	138	ritonavir)	55
ISENTRESS TABS PO	55	JADENU SPRINKLE PACK		KANJINTI	39
isoniazid SYRP PO	36	(deferasirox)	28	KAPSPARGO SPRINKLE CS24 ..	58
isoniazid TABS PO	36	JADENU TABS PO (deferasirox) ..	28	KATERZIA	59
ISOPTO ATROPINE SOLN	135	JAKAFI	42	KAZANO (alogliptin-metformin hcl)	
ISORDIL TITRADOSE TABS PO		JANSSEN COVID-19 VACCINE ..	148	23	
(isosorbide dinitrate)	13	JANUMET TABS PO	23	KELP-B6-LECITHIN-VINEGAR	
isosorbide dinitrate TABS PO	13	JANUMET XR TB24 PO	23	CAPS PO	134
isosorbide dinitrate-hydralazine hcl		JANUVIA PO 100 MG	25	KENALOG AERS (triamcinolone	
PO	59			acetonide (topical))	75

KENDALL AMORPHOUS WOUND GEL	80	KIMMTRAK	38	KONSYL DAILY FIBER PACK PO 100 %	92
KEPIVANCE 6.25 MG	43	KINDERLYTE PREMAX SOLN PO 116		KONSYL ORIGINAL DAILY FIBER PACK PO	92
KEPPRA SOLN PO 100 MG/ML (levetiracetam)	18	KINDERLYTE SOLN PO	116	KONVOMEF SUSR	146
KEPPRA TABS PO (levetiracetam) 18		KINERET SOSY	5	KOSELUGO	42
KEPPRA XR TB24 PO (levetiracetam)	18	KINNEY LANCETS	99	KOSHER PRENATAL PLUS IRON TABS PO	127
KERAGEL GEL	80	KINNEY THIN LANCETS	99	KOVALTRY	88
KERAGELT GEL	80	KINRAY INSULIN SYRINGE	108	KP MENS DAILY PACK MISC PO 122	
KERENDIA PO	84	KISQALI (200 MG DOSE)	42	KP PRENATAL MULTIVITAMINS TABS PO	127
KESIMPTA	142	KISQALI (400 MG DOSE)	42	KP WOMENS DAILY MISC PO ..	122
ketoconazole (topical) CREA	71	KISQALI (600 MG DOSE)	42	K-PHOS-NEUTRAL PO (pot phosphate monobasic w/ sod phosphate dibasic & monobasic) .	117
ketoconazole (topical) FOAM	71	KISQALI FEMARA (200 MG DOSE) . 41		KPN PRENATAL TABS PO	127
ketoconazole (topical) SHAM 2 % .	71	KISQALI FEMARA (400 MG DOSE) . 41		KRAZATI	42
ketoconazole PO	29	KISQALI FEMARA (600 MG DOSE) . 41		KROGER AUTOLET LANCING DEVICE MISC	99
KETODAN	71	KITABIS PAK NEBU (tobramycin) ..	4	KROGER GLUCOSE PO	24
KETO-DIASTIX	81	KLARON (sulfacetamide sodium (acne))	69	KROGER HEALTHPRO LANCET 26G	99
KETONE TEST STRP	81	KLONOPIN TABS PO (clonazepam) . 17		KROGER INSULIN SYRINGE ...	109
ketoprofen CAPS PO 25 MG	6	KLOXXADO LIQD	28	KROGER LANCETS	99
ketoprofen CP24 PO	6	KMART VALU INSULIN SYRINGE 29G	108	KROGER LANCETS 21G	99
ketorolac tromethamine (ophth) .	138	KMART VALU INSULIN SYRINGE 30G	108	KROGER LANCETS MICRO THIN 33G	99
ketorolac tromethamine TABS PO ..	6	KOATE SOLR	88	KROGER LANCETS SUPER THIN 99	
KETOSTIX STRP	81	KOATE-DVI SOLR 1000 UNIT	88	KROGER LANCETS THIN	99
ketotifen fumarate (ophth) 0.035 % 138		KOGENATE FS KIT 250 UNIT, 500 UNIT, 3000 UNIT	88	KROGER LANCETS THIN 26G ..	99
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mirtazapine TABS PO 7.5 MG, 45 MG 20	mometasone furoate OINT 75	MOUNJARO 25
mirtazapine TBDP PO 15 MG 20	mometasone furoate SOLN 75	MOVANTIK PO 12.5 MG 86
mirtazapine TBDP PO 30 MG, 45 MG 20	MOMMY'S BLISS MV ORGANIC DROPS LIQD PO 125	MOVANTIK PO 25 MG 86
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MM INSULIN SYRINGE/NEEDLE 109	MONOLET OPD LANCETS 100	MPD SAFETY LANCET 28G 100
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MS CONTIN TBCR PO (morphine sulfate)	9	MULTIVITAMIN + FLUORIDE CHEW PO 0.25 MG	125	MVW COMPLETE FORMULATION MINIS CAPS PO	123
MS INSULIN SYRINGE	109	MULTIVITAMIN ADULT TABS PO	125	MVW HI-D ADEK GUMMIES CHEW PO	123
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MULTI PRENATAL TABS PO	127	MULTIVITAMIN TABS PO	125	MX-SOL SF SYRP PO	140
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multiple vitamin CAPS PO	125	mupirocin OINT	70	MYRBETRIQ SRER	147
multiple vitamin TABS PO	125	MURO 128 OINT (sodium chloride hypertonic)	138	MYRBETRIQ TB24 PO 25 MG (mirabegron)	147
multiple vitamins w/ calcium TABS PO	120	MURO 128 SOLN (sodium chloride hypertonic)	138	MYRBETRIQ TB24 PO 50 MG (mirabegron)	147
multiple vitamins w/ iron TABS PO	120	MURO 128 SOLN	138	MYSOLINE PO (primidone)	18
multiple vitamins w/ minerals CAPS PO	123	MVASI	38	MYTESI PO	27
multiple vitamins w/ minerals CHEW PO	123	MVW COMPLETE FORMULATION CAPS PO	123	nabumetone PO	6
multiple vitamins w/ minerals LIQD PO	123	MVW COMPLETE FORMULATION D3000 CAPS PO	123	nadolol TABS PO 20 MG, 40 MG, 80 MG	58
multiple vitamins w/ minerals TBCR PO	123	MVW COMPLETE FORMULATION D5000 CAPS PO	123	naftifine hcl CREA	71
MULTISOURCE CALCIUM MAG/D TABS PO	117			naftifine hcl GEL 2 %	71
MULTISTIX 10 SG	81			NAFTIN GEL (naftifine hcl)	71

NAFTIN GEL71	6	NEBULIZER CUP/TUBING DEVI	113
NALFON CAPS PO (fenoprofen calcium)6	naproxen sodium TABS PO6	nefazodone hcl PO21	
NALFON TABS PO (fenoprofen calcium)6	naproxen sodium TB24 PO7	nelarabine38	
NALMEFENE HCL IJ28	naproxen SUSP PO7	NEMLUVIO76	
NALOCET TABS PO10	naproxen TABS PO 250 MG, 375 MG7	NEOMULTIVITE TABS PO125	
naloxone hcl LIQD28	naproxen TABS PO7	neomycin sulfate TABS PO4	
naloxone hcl SOCT28	naproxen TBEC PO7	neomycin-bacitracin zn-polymyxin	136
naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML28	naproxen-esomeprazole magnesium PO7	neomycin-bacitracin-polymyxin OINT	70
naloxone hcl SOSY28	naratriptan hcl PO114	neomycin-bacitracin-polymyxin-pramoxine70	
naltrexone hcl PO28	NARCAN LIQD (naloxone hcl)28	neomycin-polymy-dexameth OINT	137
NAMENDA TITRATION PAK TABS PO (memantine hcl)141	NARDIL PO (phenelzine sulfate) ..20	neomycin-polymy-dexameth SUSP	137
NAMENDA XR CP24 PO 21 MG, 28 MG (memantine hcl)142	NASACORT ALLERGY 24HR AERO (triamcinolone acetonide (nasal))	neomycin-polymyxin w/ pramoxine	70
NAMENDA XR CP24 PO 7 MG, 14 MG (memantine hcl)142	NASONEX 24HR SUSP (mometasone furoate (nasal))134	neomycin-polymyxin-gramicidin .	136
NAMZARIC C4PK142	NASOPEN PE66	neomycin-polymyxin-hc (ophth) .	137
NAMZARIC CP24142	NATACYN136	neomycin-polymyxin-hc (otic) SOLN .	139
naphazoline w/ pheniramine 0.3 %-0.025 %136	NATAL PNV TABS PO127	neomycin-polymyxin-hc (otic) SUSP .	139
naphazoline w/ pheniramine 0.315 %-0.027 %136	NATAZIA62	NEONATAL + DHA MISC PO127	
naphazoline-polyethylene glycol 300	nateglinide PO27	NEONATAL COMPLETE TABS PO	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 MG127
NAPHCON-A (naphazoline w/ pheniramine)136	NATESTO GEL NA11	NEONATAL FE127	
NAPRELAN TB24 PO (naproxen sodium)6	NATRAPEL 12-HOUR TICK/INSECT AERO78	NEONATAL PLUS TABS PO127	
NAPROSYN SUSP PO (naproxen) .6	NATRAPEL LIQD78	NEO-SYNALAR70	
naproxen sodium CAPS PO6	NATROBA (spinosad)79		
naproxen sodium TABS PO 220 MG .	NATURAL FIBER LAXATIVE POWD PO92		
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	nebivolol hcl PO 2.5 MG, 5 MG58		

NEO-VITAL RX TABS PO	127	magnesium)	145	NINJACOF LIQD PO	66
NERLYNX	42	NEXIUM PACK (esomeprazole magnesium)	145	NINJACOF-XG LIQD PO	66
NERVIVE NERVE RELIEF TABS PO	132	NEXLETOL	30	NINLARO	42
NESINA (alogliptin benzoate)	25	NEXLIZET	30	NIPENT	43
NESTABS DHA PO	127	NEXPLANON	63	nisoldipine PO	59
NESTABS ONE	127	NEXTSTELLIS	62	NITAZOXANIDE	61
NESTABS PO	127	NGENLA	83	nitazoxanide TABS PO	35
NEUAC	69	niacin (antihyperlipidemic) TABS PO . 32		nitisinone CAPS PO	84
NEULASTA ONPRO PSKT	90	niacin (antihyperlipidemic) TBCR PO 500 MG	32	NITRIVIA CAPS PO	132
NEULASTA SOSY	90	niacin (antihyperlipidemic) TBCR PO 750 MG, 1000 MG	32	NITRO-BID OINT	13
NEUPOGEN SOLN	90	niacin CPCR PO 250 MG	151	NITRO-DUR PT24 (nitroglycerin) ..	13
NEUPOGEN SOSY	90	niacin TABS PO	151	NITRO-DUR PT24	13
NEUPRO	45	niacin TBCR PO 500 MG, 750 MG 151		nitrofurantoin macrocrystal PO	36
NEURONTIN CAPS PO (gabapentin)	18	niacin w/ inositol PO	132	nitrofurantoin monohyd macro PO .36	
NEURONTIN SOLN PO (gabapentin)	18	niacinamide TABS PO	151	nitrofurantoin PO	36
NEURONTIN TABS PO (gabapentin)	18	nicardipine hcl CAPS PO	59	NITROFURANTOIN PO	36
NEUTROGENA T/SAL SHAM	76	NICOTINE KIT	143	nitroglycerin (intra-anal) PR	12
NEVANAC	138	nicotine polacrilex GUM	143	nitroglycerin PT24	13
nevirapine SUSP PO	55	nicotine polacrilex LOZG	143	nitroglycerin SOLN TL 0.4 MG/SPRAY	13
nevirapine TABS PO	55	nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR	143	nitroglycerin SUBL	13
nevirapine TB24 PO	55	NICOTROL INHA	143	NITROLINGUAL SOLN TL (nitroglycerin)	13
NEXAVAR PO (sorafenib tosylate) 42		NICOTROL NS SOLN	143	NITROSTAT SUBL (nitroglycerin) .13	
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NEXIUM 24HR CPDR PO (esomeprazole magnesium)	145	nilutamide PO	40	NIVESTYM SOLN	90
NEXIUM CPDR PO (esomeprazole		nimodipine CAPS PO	59	NIVESTYM SOSY	90
				nizatidine CAPS PO	145
				NIZORAL PSORIASIS SHAMPOO/COND SHAM	76

NOC DURNA SUBL	84	NORMLGEL AG GEL	80	SUPN	26
NONYX GEL	77	NORPACE CR CP12 PO	14	NOVOLIN N FLEXPEN SUPN	26
NORDITROPIN FLEXPEN SOPN	83	nortriptyline hcl CAPS PO	22	NOVOLIN N RELION SUSP	26
norelgestromin-ethinyl estradiol ...	63	nortriptyline hcl SOLN PO	22	NOVOLIN N SUSP	26
norethin acet & estrad-fe CAPS ...	62	NORVASC TABS PO (amlodipine besylate)	59	NOVOLIN R FLEXPEN RELION SOPN IJ	26
norethin acet & estrad-fe CHEW PO .	62	NORVIR PACK	55	NOVOLIN R FLEXPEN SOPN IJ ..	26
norethin acet & estrad-fe TABS PO 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG	62	NORVIR TABS PO (ritonavir)	55	NOVOLIN R RELION SOLN IJ	26
norethindrone & eth estradiol PO ..	62	NORWEGIAN COD LIVER OIL OIL PO	132	NOVOLIN R SOLN IJ	26
norethindrone & ethinyl estradiol-fe PO 25 MCG-0.8 MG-75 MG	62	NOURIANZ PO 20 MG	44	NOVOLOG 70/30 FLEXPEN RELION SUPN	26
norethindrone & ethinyl estradiol-fe PO	62	NOURIANZ PO 40 MG	44	NOVOLOG FLEXPEN RELION SOPN	26
norethindrone (contraceptive) PO .	63	NOVA SAFETY LANCETS 23G .	100	NOVOLOG FLEXPEN SOPN	26
norethindrone acet & eth estra TABS PO	62	NOVA SAFETY LANCETS 28G .	100	NOVOLOG MIX 70/30 FLEXPEN SUPN	26
norethindrone acetate TABS PO .	141	NOVA SUREFLEX LANCETS ...	100	NOVOLOG MIX 70/30 RELION SUSP	26
norethindrone acetate-ethinyl estradiol PO	84	NOVA SUREFLEX LANCING DEVICE MISC	100	NOVOLOG MIX 70/30 SUSP	26
norethindrone acetate-ethinyl estradiol-fe PO	62	NOVAMV PEDIATRIC MULTI-VITAMIN LIQD PO	126	NOVOLOG PENFILL SOCT	26
norethindrone-eth estradiol (triphasic) PO	62	NOVAVAX COVID-19 VACCINE SUSP	149	NOVOLOG RELION SOLN IJ	26
NORGESIC FORTE PO (orphenadrine w/ aspirin & caff) ..	133	NOVAVAX COVID-19 VACCINE SUSY	149	NOVOLOG SOLN IJ	26
norgestimate-ethinyl estradiol (triphasic) PO	62	NOVOEIGHT	88	NOVOPEN ECHO DEVI	109
norgestimate-ethinyl estradiol PO .	62	NOVOFINE PEN NEEDLE	109	NOVOSEVEN RT	88
norgestrel & ethinyl estradiol PO 30 MCG-0.3 MG	62	NOVOFINE PLUS PEN NEEDLE	109	NOXAFIL PACK	29
NORITATE CREA	79	NOVOLIN 70/30 FLEXPEN RELION SUPN	26	NOXAFIL SUSP (posaconazole) ..	29
NORLIQVA SOLN	59	NOVOLIN 70/30 FLEXPEN SUPN	26	NOXAFIL TBEC (posaconazole) ..	29
		NOVOLIN 70/30 RELION SUSP ..	26	NP THYROID TABS PO	145
		NOVOLIN 70/30 SUSP	26	NPLATE	90
		NOVOLIN N FLEXPEN RELION		NUBEQA	40
				NUCALA SOAJ	14
				NUCALA SOLR	14

NUCALA SOSY	14	nystatin (topical) CREA	71	OCUVITE ADULT FORMULA CAPS PO	123
NUEDEXTA	143	nystatin (topical) OINT	71	OCUVITE-LUTEIN CAPS PO	123
NU-GEL GEL	80	nystatin (topical) POWD EX	71	ODEFSEY	55
NUPLAZID CAPS	47	nystatin TABS PO	29	ODOMZO PO	39
NUPLAZID TABS PO 10 MG	47	nystatin-triamcinolone CREA	71	OFF ACTIVE AERO	78
NURTEC	114	nystatin-triamcinolone OINT	71	OFF DEEP WOODS AERO	78
NUTRASEB CREA	73	NYVEPRIA	90	OFF DEEP WOODS DRY AERO ..	78
NUTRA-Z+ CAPS PO	125	OB COMPLETE ONE PO	128	OFF DEEP WOODS LIQD	78
NUTRISOURCE FIBER PACK PO 92		OB COMPLETE PETITE	128	OFF DEEP WOODS SPORTSMEN AERO	78
NUTRISOURCE FIBER POWD PO 92		OB COMPLETE PREMIER	128	OFF DEEP WOODS SPORTSMEN LIQD	78
nutritional supplements CAPS PO .81		OB COMPLETE TABS PO	128	OFF DEEP WOODS SPORTSMEN LIQD	78
NUTRIVIT	119	OB COMPLETE/DHA	128	OFF FAMILYCARE CLEAN FEEL LIQD	78
NUTROPIN AQ NUSPIN 10 SOPN 83		OBIZUR	88	OFF FAMILYCARE TROPICAL FRESH LIQD	78
NUTROPIN AQ NUSPIN 20 SOPN 83		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	128	OFF FAMILYCARE UNSCENTED LIQD	78
NUTROPIN AQ NUSPIN 5 SOPN .83		OC8 GEL	77	OFF SMOOTH & DRY AERO	78
NUVARING (etonogestrel-ethinyl estradiol)	63	OCALIVA	85	ofloxacin (ophth)	136
NUVESSA	150	OCREVUS	143	ofloxacin (otic)	138
NUVIGIL PO (armodafinil)	3	OCREVUS ZUNOVO	143	ofloxacin PO 300 MG, 400 MG	85
NUWIQ KIT	88	OCTAGAM SOLN 5 GM/50ML ...	139	OGIVRI	39
NUWIQ SOLR 1500 UNIT	88	OCTAGAM SOLN	139	OGSIVEO	42
NUWIQ SOLR 250 UNIT, 500 UNIT, 1000 UNIT, 2000 UNIT, 2500 UNIT, 3000 UNIT, 4000 UNIT	88	octreotide acetate KIT	84	OHTUVAYRE	14
NUZYRA TABS PO	144	octreotide acetate SOLN	84	OJEMDA SUSR	42
NYMALIZE SOLN PO 6 MG/ML ...	59	octreotide acetate SOSY	84	OJEMDA TABS	42
NYSTATIN (nystatin (mouth-throat)) . 118		OCUFLOX (ofloxacin (ophth)) ...	136	OJJAARA	42
nystatin (mouth-throat)	118	OCUVEL CAPS PO 250 MG-0.5 MG- 5 MG-1 MG-40 MG-1 MG-200 UNIT . 123		olanzapine SOLR	50
		OCUVITE ADULT 50+ CAPS PO 123		olanzapine TABS PO 10 MG, 15 MG, 20 MG	50

olanzapine TABS PO 2.5 MG, 5 MG, 7.5 MG	50	omega-3-acid ethyl esters PO	30	ondansetron hcl SOLN IJ	28
olanzapine TBDP PO 10 MG, 15 MG, 20 MG	50	omeprazole CPDR PO	145	ondansetron hcl SOLN PO 4 MG/5ML	28
olanzapine TBDP PO 5 MG	50	omeprazole magnesium CPDR PO 145		ondansetron hcl SOSY	28
olanzapine-fluoxetine hcl PO 25 MG-12 MG, 50 MG-12 MG, 50 MG-6 MG .	142	omeprazole magnesium TBEC PO 145		ondansetron hcl TABS PO 4 MG, 8 MG	28
olanzapine-fluoxetine hcl PO 25 MG-3 MG, 25 MG-6 MG	142	omeprazole TBDD	145	ondansetron TBDP PO 16 MG	28
olmesartan medoxomil PO	33	omeprazole TBEC PO	145	ondansetron TBDP PO 4 MG, 8 MG .	28
olmesartan medoxomil-amlodipine-hydrochlorothiazide PO	34	omeprazole-sodium bicarbonate CAPS PO 1100 MG-20 MG	146	ONE A DAY IMMUNITY DEFENSE CHEW PO	123
olmesartan medoxomil-hydrochlorothiazide PO	34	omeprazole-sodium bicarbonate CAPS PO 1100 MG-40 MG	146	ONE A DAY MENS VITACRAVES CHEW PO	123
olopatadine hcl (nasal)	134	omeprazole-sodium bicarbonate PACK PO 1680 MG-20 MG	146	ONE A DAY WOMEN 50 PLUS CHEW PO	123
olopatadine hcl	138	omeprazole-sodium bicarbonate PACK PO 1680 MG-40 MG	146	ONE DAILY ESSENTIAL TABS PO 125	
olopatadine hcl 0.1 %	138	OMNARIS SUSP	134	ONE DAILY ESSENTIALS TABS PO 125	
OLPRUVA (2 GM DOSE) THPK ...	84	OMNICAP TABS PO	125	ONE FLOW SPIROMETER DEVI 113	
OLPRUVA (3 GM DOSE) THPK ...	84	OMNIGEST EZ TABS PO	81	ONE VITE DAILY MULTIVITAMIN TABS PO	125
OLPRUVA (4 GM DOSE) THPK ..	84	OMNIPOD 5 DEXG7G6 INTRO GEN 5 KIT	100	ONE-A-DAY ESSENTIAL TABS PO (multiple vitamin)	125
OLPRUVA (5 GM DOSE) THPK ..	84	OMNIPOD 5 DEXG7G6 PODS GEN 5 MISC	100	ONE-A-DAY FOR HER VITACRAVES CHEW PO	123
OLPRUVA (6 GM DOSE) THPK ...	84	OMNIPOD 5 LIBRE2 PLUS G6 KIT 100		ONE-A-DAY FOR HIM VITACRAVES CHEW PO	123
OLPRUVA (6.67 GM DOSE) THPK 84		OMNIPOD 5 LIBRE2 PLUS G6 PODS MISC	100	ONE-A-DAY MENS TABS PO (multiple vitamin)	125
OLUMIANT 1 MG, 2 MG	4	OMNIPOD DASH PODS (GEN 4) MISC	100	ONE-A-DAY MENS VITACRAVES CHEW PO	123
OLUMIANT 4 MG	4	OMNIPOD GO KIT	100	ONE-A-DAY VITACRAVES ADULT CHEW PO	123
OLUX FOAM (clobetasol propionate) 75		OMNITROPE SOCT	83		
OMBRA TABLE TOP COMPRESSOR DEVI	113	OMNITROPE SOLR SC	83		
OMECLAMOX-PAK PO	146	OMVOH SOSY	86		
omega-3 fatty acids CAPS PO 1000 MG	134	ONCASPAR	43		

ONE-A-DAY VITACRAVES CHEW PO 123	ONETOUCH ULTRASOFT 2 LANCETS 101	OPTIFAST POST BARIATRIC CHEW PO 123
ONE-A-DAY VITACRAVES IMMUNITY CHEW PO 123	ONETOUCH ULTRASOFT LANCETS 101	OPTIMUM AIRVITES CHEW PO 123
ONE-A-DAY VITACRAVES SOUR CHEW PO 123	ONEXTON GEL (clindamycin phosphate-benzoyl peroxide) 69	OPTISOURCE POST BARIATRIC SURG CHEW PO 123
ONE-A-DAY WOMENS PRENATAL 1 128	ONFI SUSP (clobazam) 17	OPURITY BYPASS OPTIMIZED CHEW PO 123
ONE-A-DAY WOMENS PRENATAL MISC PO 60 MG-2.5 MG-300 MCG- 800 MCG-400 UNIT-8 MCG-2 MG-20 MG-4000 UNIT-10 MG-28 MG-1.7 MG-50 MG-15 MG-2 MG-200 MG- 300 MG-150 MCG-30 UNIT-23 MG- 223 MG 128	ONFI TABS PO (clobazam) 17	OPVEE NA 28
ONE-A-DAY WOMENS VITACRAVES CHEW PO 123	ONGENTYS 45	OPZELURA 76
ONE-DAILY MULTI CAPS CAPS PO 123	ONGLYZA PO 2.5 MG (saxagliptin hcl) 25	ORACEA PO (doxycycline (rosacea)) 79
ONETOUCH CLUB LANCETS FINE PT 101	ONGLYZA PO 5 MG (saxagliptin hcl) 25	oral electrolytes SOLN PO 116
ONETOUCH DELICA LANCETS 30G 101	ONIVYDE 44	ORAL SUSPEND LIQD PO 140
ONETOUCH DELICA LANCETS 33G 101	ONTRUZANT 39	ORAL SYRUP SF SYRP PO 140
ONETOUCH DELICA LANCING DEV MISC 101	ONUREG TABS 38	ORAL SYRUP SYRP PO 140
ONETOUCH DELICA PLUS LANCET30G 101	ONYDA XR SUER PO 2	ORAPENN SD ANHYD SWEETENED LIQD PO 140
ONETOUCH DELICA PLUS LANCET33G 101	OPDIVO 39	ORAPENN SD ANHYD UNSWEETEN LIQD PO 140
ONETOUCH DELICA PLUS LANCING MISC 101	OPDUALAG 41	ORA-PLUS LIQD PO 140
ONETOUCH DELICA SAFETY LANCING 101	OPILL PO 63	ORA-SWEET SF SYRP PO 10 %-9 % 140
ONETOUCH FINEPOINT LANCETS 101	OPIPZA FILM 53	ORA-SWEET SYRP PO 4 %-5 %-54 % 140
	OPSUMIT 60	ORAVIG 118
	OPSYNVI 59	ORENCIA CLICKJECT SOAJ 7
	OPTICHAMBER DIAMOND DEVI 113	ORENCIA SOSY 7
	OPTICHAMBER DIAMOND MISC 113	ORENITRAM MONTH 1 TEPK 60
	OPTICHAMBER DIAMOND-LG MASK DEVI 113	ORENITRAM MONTH 2 TEPK 60
	OPTICHAMBER DIAMOND-MD MASK MISC 113	ORENITRAM MONTH 3 TEPK 60
	OPTICHAMBER DIAMOND-SM MASK MISC 113	ORENITRAM TBCR 60
		ORGOVYX 40
		ORIAHNN 84

ORILISSA	83	oxcarbazepine TABS PO	18	oxymorphone hcl TB12 PO	9
ORLADEYO	89	oxcarbazepine TB24	18	OXYTROL FOR WOMEN PTTW .	147
orlistat PO	2	oxiconazole nitrate CREA	71	OXYTROL PTTW	147
orphenadrine citrate TB12 PO	133	OXISTAT LOTN	71	OYSTER SHELL CALCIUM/D TABS	
orphenadrine w/ aspirin & caff PO		OXTELLAR XR TB24		PO 500 MG-200 UNIT	116
133		(oxcarbazepine)	18	oyster shell PO	116
ORSERDU	40	oxybutynin chloride SOLN	147	OZEMPIC (0.25 OR 0.5 MG/DOSE)	
oseltamivir phosphate CAPS PO ..	57	oxybutynin chloride TABS PO 2.5		SOPN	25
oseltamivir phosphate SUSR PO ..	57	MG	147	OZEMPIC (1 MG/DOSE) SOPN 4	
OSENI 15 MG-25 MG, 30 MG-12.5		oxybutynin chloride TABS PO 5 MG .		MG/3ML	25
MG, 30 MG-25 MG, 45 MG-25 MG		147		OZEMPIC (2 MG/DOSE) SOPN ...	25
(alogliptin-pioglitazone)	23	oxybutynin chloride TB24 PO 10 MG,		OZURDEX IMPL	137
OSMOLEX ER TB24 129 MG	45	15 MG	147	P & S SHAM	76
OTEZLA TABS PO 20 MG	7	oxybutynin chloride TB24 PO 5 MG		paclitaxel 30 MG/5ML, 100	
OTEZLA TABS PO 30 MG	7	147		MG/16.7ML, 150 MG/25ML, 300	
OTEZLA TBPK PO	7	oxycodone hcl CAPS PO	9	MG/50ML	44
OUTGRO PAIN RELIEF LIQD	77	oxycodone hcl CONC PO 100		PACLITAXEL PROTEIN-BOUND	
OVACE PLUS SHAM (sulfacetamide		MG/5ML	9	PART	44
sodium)	73	oxycodone hcl SOLN PO	9	paclitaxel protein-bound particles .	44
OVACE PLUS WASH GEL		oxycodone hcl T12A PO 10 MG, 20		PADCEV	39
(sulfacetamide sodium)	73	MG, 40 MG, 80 MG	9	paliperidone PO 1.5 MG, 3 MG	48
OVACE PLUS WASH LIQD		oxycodone hcl TABS PO 15 MG ...	9	paliperidone PO 6 MG, 9 MG	48
(sulfacetamide sodium)	73	oxycodone hcl TABS PO 20 MG ...	9	PALMERS FOOT MAGIC SCRUB	
OVACE WASH LIQD (sulfacetamide		oxycodone hcl TABS PO 30 MG ...	9	CREA	79
sodium)	73	oxycodone hcl TABS PO 5 MG, 10		PAMELOR CAPS PO (nortriptyline	
OVIDE (malathion)	79	MG	9	hcl)	23
oxaliplatin SOLN 50 MG/10ML, 100		oxycodone w/ acetaminophen SOLN		PANDEL	75
MG/20ML	37	PO	10	PANPLEX 2-PHASE TBEC	81
oxaliplatin SOLR	37	oxycodone w/ acetaminophen TABS		pantoprazole sodium PACK	145
oxandrolone PO 2.5 MG	11	PO 325 MG-10 MG, 325 MG-2.5 MG,		pantoprazole sodium SOLR	145
oxaprozin TABS PO	7	325 MG-5 MG, 325 MG-7.5 MG ...	10	pantoprazole sodium TBEC PO ..	145
oxazepam CAPS PO	13	OXYCONTIN T12A PO	9	PANZYGA	139
oxcarbazepine SUSP PO	18	oxymetazoline hcl SOLN 0.05 % .	134	papaya CHEW PO	117
		oxymorphone hcl TABS PO	9		

PARAGARD INTRAUTERINE COPPER	63	PAXLOVID (150/100)	56	PEGASYS SOLN	56
PARI MANUAL INTERRUPTER DEVI	113	PAXLOVID (300/100)	56	PEGASYS SOSY	56
PARI TREK S COMBO PACK DEVI . 113		pazopanib hcl	42	PEMAZYRE 4.5 MG	42
paricalcitol CAPS PO	84	PC LANCETS SUPER THIN 30G 101		PEMAZYRE 9 MG, 13.5 MG	42
paricalcitol SOLN	84	PC PEDIATRIC POLY-VITAMIN DROP SOLN PO	126	PEMETREXED	38
paromomycin sulfate PO	4	PC UNIFINE PENTIPS	109	PEMETREXED DISODIUM SOLN	38
paroxetine hcl SUSP PO	21	PCCA SWEET-SF SYRP PO	140	pemetrexed disodium SOLR	38
paroxetine hcl TABS PO 10 MG, 20 MG	21	PCCA SYRUP VEHICLE SYRP PO 140		PEMETREXED DITROMETHAMINE	38
paroxetine hcl TABS PO 30 MG, 40 MG	21	PCCA T4 SODIUM	61	PEMFEXY	38
paroxetine hcl TB24 PO 12.5 MG .	21	ped multivitamins w/fl & iron SOLN PO 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 ...	125	PEMRYDI RTU SOLN	38
paroxetine hcl TB24 PO 25 MG, 37.5 MG	21	PEDIA-LAX LIQD PO	94	PEN NEEDLE/5-BEVEL TIP	109
paroxetine mesylate (vasomotor) PO 144		PEDIALYTE IMMUNE SUPPORT SOLN PO	116	PEN NEEDLES	109
PARVENZYME DIGESTIVE ENZYME TABS PO	81	pediatric multiple vitamins CHEW PO	126	PEN NEEDLES 5/16"	109
PATADAY (olopatadine hcl)	138	pediatric multiple vitamins w/ iron CHEW PO	126	penciclovir	73
PATADAY	138	pediatric multivitamins w/fl CHEW PO 0.5 MG, 1 MG	126	penicillamine CAPS PO	117
PATANASE (olopatadine hcl (nasal))	134	pediatric multivitamins w/fl CHEW PO	126	penicillamine TABS PO	117
PAXIL CR TB24 PO 12.5 MG (paroxetine hcl)	21	PEDVAX HIB SUSP	147	penicillin v potassium SOLR PO .	139
PAXIL CR TB24 PO 25 MG, 37.5 MG (paroxetine hcl)	21	peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid PO	92	penicillin v potassium TABS PO ..	139
PAXIL SUSP PO (paroxetine hcl) .	21	peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR PO	92	PENNSAID SOLN EX 2 % (diclofenac sodium (topical))	72
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REVUFORJ	40	RINVOQ TB24 PO	4	rizatriptan benzoate TBDP PO	114
REXALL LANCETS ULTRA THIN 30G	102	RIOMET SOLN PO (metformin hcl)	24	ROCKLATAN	137
REXTOVY LIQD	28	risedronate sodium TABS PO	83	roflumilast PO	14
REXULTI 0.25 MG, 0.5 MG, 1 MG, 2 MG	54	risedronate sodium TBEC PO	83	ROLVEDON	90
REXULTI 3 MG, 4 MG	54	RISPERDAL CONSTA (risperidone microspheres)	48	ROMIDEPSIN SOLN	42
REYATAZ CAPS PO 200 MG, 300 MG (atazanavir sulfate)	55	RISPERDAL SOLN PO (risperidone)	48	romidepsin SOLR	42
REYATAZ PACK	55	RISPERDAL TABS PO 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG (risperidone)	48	ropinirole hydrochloride TABS PO	45
REYVOW	114	risperidone microspheres	48	ropinirole hydrochloride TB24 PO 2 MG, 4 MG, 6 MG	45
REZDIFFRA	85	risperidone SOLN PO	49	ropinirole hydrochloride TB24 PO 8 MG, 12 MG	45
REZLIDHIA	42	risperidone TABS PO	49	ROSADAN	79
REZVOGLAR KWIKPEN	27	risperidone TBDP PO	49	rosuvastatin calcium TABS PO	32
RHOPRESSA	137	RITALIN LA CP24 PO (methylphenidate hcl)	3	ROTARIX SUSP	149
RIABNI	39	RITALIN TABS PO (methylphenidate hcl)	3	ROTARIX SUSR PO	149
ribavirin (hepatitis c) CAPS PO	56	RITEFLO DEVI	113	ROTATEQ SOLN PO	149
ribavirin (hepatitis c) TABS PO 200 MG	56	ritonavir TABS PO	55	ROWASA PR (mesalamine w/ cleanser)	86
riboflavin TABS PO 100 MG	151	RITUXAN	39	ROXICODONE TABS PO 15 MG (oxycodone hcl)	9
riboflavin TABS PO	151	RITUXAN HYCELA	41	ROXICODONE TABS PO 30 MG (oxycodone hcl)	9
RIDAURA PO	5	rivastigmine	142	ROXYBOND TABA PO	9
rifabutin PO	36	rivastigmine 4.6 MG/24HR, 9.5 MG/24HR	142	ROZEREM PO (ramelteon)	91
rifampin CAPS PO	36	rivastigmine tartrate CAPS PO	142	ROZLYTREK CAPS	42
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RUBRACA	42	salicylic acid LIQD 3 %, 17 %	77	saxagliptin-metformin hcl PO	23
RUCONEST	89	saline SOLN 0.65 %	133	SAXENDA	2
rufinamide SUSP	18	salsalate PO	8	SB ALCOHOL PREP	106
rufinamide TABS PO	18	SANCUSO PTCH	28	SB INSULIN SYRINGE	110
RU-HIST D TABS PO	67	SANDIMMUNE SOLN PO 100		SB LANCETS THIN	102
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sorafenib tosylate PO	42	SPRAVATO (84 MG DOSE)	20	STRIVERDI RESPIMAT	16
SORILUX FOAM	72	SPRITAM TB3D	18	SUBLOCADE SOSY	11
SOSWEET SYRP PO	140	SPRYCEL (dasatinib)	42	SUBOXONE FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 3 MG-12 MG (buprenorphine hcl-naloxone hcl dihydrate)	11
sotalol hcl (afib/af) PO	58	STALEVO 100 PO (carbidopa- levodopa-entacapone)	45	SUBOXONE FILM SL 2 MG-8 MG (buprenorphine hcl-naloxone hcl dihydrate)	11
sotalol hcl TABS PO	58	STALEVO 125 PO (carbidopa- levodopa-entacapone)	45	sucralfate SUSP PO	145
SOTYKTU	72	STALEVO 50 PO (carbidopa- levodopa-entacapone)	45	sucralfate TABS PO	145
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sulfacetamide sodium w/ sulfur SUSP 8 %-4 %	70	SUNLENCA TBPk 300 MG	55	SYLVANT	118
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sulfacetamide sod-prednisolone SOLN	137	SUPER B- COMPLEX/IRON/VITAMIN C TABS PO	119	SYMFI (efavirenz-lamivudine- tenofovir disoproxil fumarate)	55
sulfadiazine TABS PO	144	SUPER ENZYMES TABS PO	81	SYMFI LO (efavirenz-lamivudine- tenofovir disoproxil fumarate)	55
sulfamethoxazole-trimethoprim SUSP PO	35	SUPER THIN LANCETS	103	SYMLINPEN 120 SOPN	23
sulfamethoxazole-trimethoprim TABS PO	35	SUPPORT LIQD PO	124	SYMLINPEN 60 SOPN	23
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sulfasalazine TBEC PO	86	SUPREP BOWEL PREP KIT (sodium sulfate-potassium sulfate- magnesium sulfate)	92	SYMPROIC PO	86
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SUMADAN XLT KIT	70	SURE COMFORT LANCETS 21G 103		SYNALAR CREA (fluocinolone acetoneide)	75
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TIMOPTIC SOLN (timolol maleate (ophth))	135	TOFIDENCE	5	topiramate CPSP PO	18
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TREMFYA SOAJ 200 MG/2ML72		TRISENOX (arsenic trioxide) 43
TREMFYA SOLN 72		TRISTART DHA PO130
		TRIUMEQ PD TBSO55

TRIUMEQ TABS55	TRUEPLUS GLUCOSE CHEW PO 24	TWINRIX SUSY 149
TRODELVY44	TRUEPLUS GLUCOSE ON THE GO CHEW PO24	TWIRLA 63
TROGARZO55	TRUEPLUS INSULIN SYRINGE 110	TWIST TOP LANCETS 30G103
TROKENDI XR CP24 PO (topiramate) 19	TRUEPLUS LANCETS 26G103	TWYNEO70
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TRUE COMFORT PEN NEEDLES 110	TRUQAP TABS43	TYPHIM VI SOSY 147
TRUE COMFORT PRO ALCOHOL PREP106	TRUQAP TBPk PO43	TYRVAYA135
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TRUE COMFORT SAFETY LANCETS103	TUDORZA PRESSAIR14	TYVASO DPI MAINTENANCE KIT POWD60
TRUE COMFORT TWIST TOP LANCETS103	TUKYSA39	TYVASO DPI TITRATION KIT POWD60
TRUE MULTIVITAMIN TABS PO 125	TUMS ULTRA 1000 CHEW PO (calcium carbonate (antacid))12	TYVASO REFILL KIT SOLN IN ...60
TRUE VITAMIN B1 TABS PO151	TURALIO PO 125 MG43	TYVASO SOLN IN60
TRUEDRAW LANCING DEVICE MISC103	TUSNEL LIQD PO67	TYVASO STARTER KIT SOLN IN .60
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	TUSNEL-DM PEDIATRIC LIQD PO 1.25 MG/ML-25 MG/ML-2.5 MG/ML 67	UCERIS TB24 PO (budesonide) ..64
		UDDERLY SMOOTH FOOT CREA 79
		UDENYCA ONBODY SOSY90
		UDENYCA SOAJ90

UDENYCA SOSY90	110	UNIFINE PROTECT PEN NEEDLE . 111
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ULORIC 80 MG (febuxostat)88	ULTRA MEGA TBCR PO124	UNIFINE ULTRA PEN NEEDLE .111
ULTICARE ALCOHOL SWABS . 106	ULTRA MEGA TWO TBCR PO .. 124	UNILET COMFORTOUCH LANCET 103
ULTICARE INSULIN SAFETY SYR . 110	ULTRA PRENATAL VIT/MIN + DHA CAPS 130	UNILET EXCELITE 103
ULTICARE INSULIN SYRINGE . 110	ULTRA THIN LANCETS 31G103	UNILET EXCELITE II 103
ULTICARE MICRO PEN NEEDLES . 110	ULTRA THIN PEN NEEDLES ...110	UNILET G.P. LANCET103
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ULTIGUARD SAFEPAK SYR/NEEDLE110	ULTRA-THIN II INS SYR SHORT 110	UNILET SUPER-THIN 30G104
ULTI-LANCE AUTOMATIC MISC 103	ULTRA-THIN II INSULIN SYRINGE . 110	UNILET ULTRA-THIN 28G 104
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ULTRA FLO INSULIN SYR 1/2 UNIT110	UNIFINE PEN NEEDLES111	UNISTIK 3104
ULTRA FLO INSULIN SYRINGE	UNIFINE PENTIPS 111	UNISTIK 3 COMFORT104
	UNIFINE PENTIPS PLUS 111	UNISTIK 3 EXTRA104
		UNISTIK 3 GENTLE 104
		UNISTIK 3 NEONATAL104
		UNISTIK 3 NORMAL104

UNISTIK CZT COMFORT	104	methylene blue-sodium phosphate) 35	VALUE PLUS GLUCOSE PO	24
UNISTIK CZT NORMAL	104		VALUE PLUS LANCET STANDARD 21G	104
UNISTIK NORMAL	104	URSO FORTE TABS PO (ursodiol) 85	VALUE PLUS LANCETS SUPER THIN	104
UNISTIK PRO SAFETY LANCET 104		ursodiol CAPS PO	85	
UNISTIK SAFETY LANCETS 28G 104		ursodiol TABS PO	85	VALUE PLUS LANCETS THIN 26G . 104
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UNISTIK TOUCH SAFETY LANC 21G	104	VAGISIL EX	149	VALUE PLUS LANCING DEVICE MISC
UNISTIK TOUCH SAFETY LANC 23G	104	valacyclovir hcl PO 500 MG	57	104
UNISTIK TOUCH SAFETY LANC 28G	104	valacyclovir hcl PO	57	VALUMARK LANCET SUPER THIN 30G
UNISTIK TOUCH SAFETY LANC 30G	104	VALCYTE SOLR (valganciclovir hcl) . 56		104
UNISTIK TOUCH SAFETY LANC 30G	104	VALCYTE TABS PO (valganciclovir hcl)	56	VALUMARK LANCET ULTRA THIN 28G
UNISTIK TOUCH SAFETY LANC 30G	104	valganciclovir hcl SOLR	56	111
UNITUXIN	39	valganciclovir hcl TABS PO	56	
UNIVERSAL 1 LANCETS THIN 26G	104	VALIUM TABS PO (diazepam)	13	VANACOF 2
UNIVERSAL 1 LANCETS THIN 33G	104	valproate sodium SOLN PO 250 MG/5ML, 500 MG/10ML	20	67
UNIVERSAL 1 LANCETS ULTRA THIN	104	valproic acid CAPS PO	20	VANACOF CP LIQD PO
UP & UP GLUCOSE PO	24	valrubicin	41	67
UPSPRING HE NATAL TABS PO 132		valsartan SOLN	33	VANACOF DM LIQD PO (phenylephrine w/ dm-gg)
UPTRAVI SOLR	60	valsartan TABS PO	33	68
UPTRAVI TABS	61	valsartan-hydrochlorothiazide PO .	34	VANACOF DMX LIQD PO
UPTRAVI TITRATION TBPK	60	VALSTAR (valrubicin)	41	67
urea CREA 20 %	76	VALTOCO 10 MG DOSE LIQD	17	VANACOF PO
URIBEL PO	35	VALTOCO 15 MG DOSE LQPK ...	17	67
UROGESIC-BLUE TABS PO (methenamine-hyoscamine-		VALTOCO 20 MG DOSE LQPK ...	17	VANACOF XP LIQD PO
		VALTOCO 5 MG DOSE LIQD	17	68
		VALTREX PO (valacyclovir hcl) ...	57	VANALICE GEL
		VALUE HEALTH INSULIN SYRINGE	111	79
				VANATAB DM TABS PO
				68
				VANCOCIN CAPS PO (vancomycin hcl)
				35
				vancomycin hcl CAPS PO
				35
				VANCOMYCIN HCL IN DEXTROSE 500 MG/100ML-5 %
				35
				vancomycin hcl SOLR IV 500 MG .
				35
				VANCOMYCIN HCL SOLR IV 500 MG
				35
				vancomycin hcl SOLR PO 25 MG/ML, 50 MG/ML, 250 MG/5ML .
				35
				VANDAZOLE
				150

VANFLYTA	43	venlafaxine hcl CP24 PO 37.5 MG, 75 MG	22	VERIFINE SAFE LANCET MINI 30G	104
VANISHPOINT INSULIN SYRINGE 111		venlafaxine hcl TABS PO	22	VERIFINE UNIVERSAL LANCETS 28G	105
VANOS CREA (fluocinonide)	76	venlafaxine hcl TB24 PO 150 MG, 225 MG	22	VERIFINE UNIVERSAL LANCETS 30G	105
VANQUISH	7	venlafaxine hcl TB24 PO 37.5 MG, 75 MG	22	VERIFINE UNIVERSAL LANCETS 33G	105
VAQTA	149	VENTAVIS IN	60	VERKAZIA EMUL	137
varenicline tartrate TABS PO	144	VENTIVA	135	VERQUVO 10 MG	61
varenicline tartrate TBPK	144	VENTOLIN HFA AERS (albuterol sulfate)	16	VERQUVO 2.5 MG, 5 MG	61
VARIVAX SUSR	149	VEOZAH PO	83	VERSACLOZ SUSP PO	51
VASERETIC PO 25 MG-10 MG (enalapril maleate & hydrochlorothiazide)	34	verapamil hcl CP24 PO 100 MG, 120 MG, 180 MG, 200 MG, 240 MG, 300 MG	59	VERSAFREE SYRP PO	140
VASOFLEX CAPS PO	119	verapamil hcl CP24 PO 120 MG, 180 MG, 240 MG, 360 MG	59	VERSAPAP DEVI	113
VASOFLEX FORTE CAPS PO	119	VERAPAMIL HCL ER CP24 PO (verapamil hcl)	59	VERSAPAP W/UNIVERSAL TUBING DEVI	113
VASOTEC TABS PO (enalapril maleate)	32	verapamil hcl TABS PO	59	VERSAPLUS SYRP PO	141
VAXCHORA	147	verapamil hcl TBCR PO	59	VERZENIO	43
VAXNEUVANCE	147	VEREGEN	70	VESICARE LS SUSP	147
VECTIBIX 100 MG/5ML, 400 MG/20ML	39	VERELAN PM CP24 PO (verapamil hcl)	59	VESICARE TABS PO 10 MG (solifenacin succinate)	147
VECTICAL (calcitriol (topical))	72	VERIFINE INSULIN PEN NEEDLE 111		VESICARE TABS PO 5 MG (solifenacin succinate)	147
VEGZELMA	38	VERIFINE INSULIN SYRINGE ..	111	VEVYE SOLN	137
VELCADE SOLR IJ (bortezomib) ..	43	VERIFINE PLUS PEN NEEDLE ..	111	VFEND SUSR PO (voriconazole) ..	29
VELPHORO	87	VERIFINE SAFE LANCET MINI 21G	104	VFEND TABS PO (voriconazole) ..	29
VELSIPITY	86	VERIFINE SAFE LANCET MINI 23G	104	VIBERZI	86
VELTASSA PO 8.4 GM, 16.8 GM, 25.2 GM	118	VERIFINE SAFE LANCET MINI 28G	104	VICTOZA (liraglutide)	25
VENCLEXTA STARTING PACK TBPK	39	VERIFINE SAFE LANCET MINI 28G 105		VIDA MIA AUTOLET LANCING DEV MISC	105
VENCLEXTA TABS	39			VIDA MIA UNIFINE PENTIPS ...	111
VENLAFAXINE BESYLATE ER ..	22			VIDA MIA UNILET LANCETS 28G 105	
venlafaxine hcl CP24 PO 150 MG ..	22				

VIDA MIA UNILET LANCETS 30G 105	VIRT-PN DHA PO130	VITAMIN C POWD PO151
VIDAZA SUSR (azacitidine)38	VISION HEALTH CAPS PO124	VITAMIN C TABS PO151
vigabatrin PACK19	VISION OPTIMIZER CAPS PO ..124	VITAMIN D2 TABS 400 UNIT150
vigabatrin TABS19	VISTA ADVANCED AREDS2 FORMULA CAPS PO124	vitamin e CAPS PO 90 MG, 180 MG, 450 MG150
VIGAFYDE SOLN19	VISTA ADVANCED DRY EYE FORMULA CAPS PO124	vitamin e CAPS PO150
VIGAMOX SOLN OP (moxifloxacin hcl (ophth))136	VISTARIL CAPS PO (hydroxyzine pamoate)13	VITAMIN E CAPS PO150
VIIBRYD TABS 10 MG, 20 MG (vilazodone hcl)22	VISTOGARD28	vitamin e SOLN PO150
VIIBRYD TABS 40 MG (vilazodone hcl)22	VITABEX CAPS PO124	vitamins a & d CAPS PO132
VIJOICE PACK118	VITABEX PLUS CAPS PO124	vitamins a & d w/ c PO132
vilazodone hcl TABS 10 MG, 20 MG .22	VITA-C CRYSTALS PO151	VITAMINS ACD-FLUORIDE SOLN PO126
vilazodone hcl TABS 40 MG22	VITACHEW ADULT MULTI VITAMIN CHEW PO124	vitamins w/ lipotropics CAPS PO .133
VIMOVO PO 500 MG-20 MG (naproxen-esomeprazole magnesium)7	VITAFOL FE+130	vitamins w/ lipotropics TABS PO .133
VIMPAT SOLN PO 10 MG/ML (lacosamide)19	VITAFOL GUMMIES130	VITAPEARL131
VIMPAT TABS PO (lacosamide) ..19	VITAFOL ULTRA131	VITATRUE131
vinblastine sulfate SOLN44	VITAFOL-OB TABS PO131	VITEYES CLASSIC ADVANCED CAPS PO124
vincristine sulfate44	VITAFOL-OB+DHA MISC PO131	VITEYES CLASSIC MACULAR SUPPOR CAPS PO124
vinorelbine tartrate44	VITAFOL-ONE CAPS PO131	VITEYES CLASSIC+OMEGA-3 CAPS PO124
VIOKACE TABS81	VITAJEY MULTI GUMMIES ADULT CHEW PO124	VITEYES TEAR SUPPORT CAPS PO81
VIRACEPT TABS PO56	VITAMEDMD ONE RX/QUATREFOLIC PO131	VITRAKVI CAPS PO43
VIREAD POWD56	VITAMEDMD REDICHEW RX ...131	VITRAKVI SOLN43
VIREAD TABS PO (tenofovir disoproxil fumarate)56	vitamin a CAPS PO150	VIVAGUARD LANCETS105
VIREAD TABS PO 150 MG, 200 MG, 250 MG56	VITAMIN A PALMITATE TABS PO 150	VIVAGUARD LANCETS 30G105
VIRT-NATE DHA CAPS PO130	VITAMIN B-6 ER TBCR PO151	VIVAGUARD LANCING DEVICE MISC105
	VITAMIN C CHEW119	VIVAGUARD SAFETY LANCETS 28G105
	VITAMIN C ER TBCR PO151	VIVIMUSTA SOLN37

VIVITROL	28	VUMERITY PO	143	WEGMANS UNIFINE PENTIPS PLUS	111
VIVJOA	29	VUSION (miconazole-zinc oxide-white petrolatum)	71	WEGOVY	2
VIVOTIF PO	147	VYALEV	45	WELCHOL PACK (colesevelam hcl) .	31
VIZIMPRO	39	VYEPTI	114	WELCHOL TABS PO (colesevelam hcl)	31
VOGELXO GEL TD (testosterone) 11		VYLOY	39	WELIREG	40
VOGELXO PUMP GEL TD (testosterone)	11	VYTORIN PO (ezetimibe-simvastatin)	30	WELLBUTRIN SR TB12 PO (bupropion hcl)	20
VONJO	43	VYVANSE CAPS PO	1	WELLBUTRIN XL TB24 PO (bupropion hcl)	20
VONVENDI	88	VYVANSE CHEW	1	WESCAP-PN DHA PO	131
VOQUEZNA 10 MG	146	VYXEOS	41	WESNATAL DHA COMPLETE PO 131	
VOQUEZNA 20 MG	146	VYZULTA	138	WESNATE DHA CAPS PO	131
VOQUEZNA DUAL PAK	146	WAKIX 17.8 MG	2	WESTAB PLUS TABS PO	131
VOQUEZNA TRIPLE PAK	146	WAKIX 4.45 MG	2	WESTGEL DHA PO	131
VORANIGO	43	WAL-BORN VITAMIN C CHEW PO 124		WESTUSSIN DM	68
voriconazole SUSR PO	29	WALGREENS ADV TRAVEL LANCETS	105	white petrolatum-mineral oil	135
voriconazole TABS PO	29	WALGREENS GLUCOSE PO	24	WILATE KIT	88
VORTEX HOLD CHMBR/MASK/CHILD DEVI	113	WALGREENS LANCETS	105	WINLEVI	70
VORTEX HOLD CHMBR/MASK/TODDLER DEVI	113	WALGREENS LANCETS MICRO THIN	105	WINREVAIR	60
VORTEX VALVED HOLDING CHAMBER DEVI	114	WALGREENS LANCETS SUPER THIN	105	WOMENS MULTI GUMMIES CHEW PO	124
VOSEVI	57	WALGREENS THIN LANCETS .	105	WOMENS MULTIVITAMIN + COLLAGEN CHEW PO	124
VOTRIENT (pazopanib hcl)	43	WALGREENS ULTRA THIN LANCETS	105	WOMENS MULTIVITAMIN GUMMIES CHEW PO	124
VOTRIZA-AL LOTN	71	warfarin sodium TABS PO	16	WOMENS PACK MISC PO	124
VOWST	86	water for injection, sterile IJ	141	WOUND GEL GEL	80
VOXZOGO	84	WEBCOL ALCOHOL PREP LARGE 106		WOUND GEL SPRAY GEL	80
VP INSULIN SYRINGE	111	WEBCOL ALCOHOL PREP MEDIUM	106	WOUN'DRES GEL	80
VRAYLAR CAPS 1.5 MG, 3 MG ..	47				
VRAYLAR CAPS 4.5 MG, 6 MG ..	47				
VTAMA	72				

XACIATO GEL	150	XERESE	73	XPOVIO (80 MG ONCE WEEKLY) PO 40 MG	40
XADAGO 100 MG	45	XGEVA SOLN	83	XPOVIO (80 MG TWICE WEEKLY) PO	40
XADAGO 50 MG	45	XHANCE EXHU	134	X-SEB T PEARL SHAM	79
XALATAN SOLN (latanoprost) ...	138	XIFAXAN PO 200 MG	35	X-SEB T PLUS SHAM	79
XALKORI CAPS	43	XIFAXAN PO 550 MG	35	XTANDI CAPS	40
XALKORI CPSP	43	XIGDUO XR PO (dapagliflozin propanediol-metformin hcl)	23	XTANDI TABS	40
XANAX TABS PO (alprazolam)	13	XIGDUO XR PO 1000 MG-10 MG, 1000 MG-2.5 MG, 1000 MG-5 MG, 500 MG-10 MG	23	XULTOPHY	23
XANAX XR TB24 PO (alprazolam) 13		XIGDUO XR PO 500 MG-5 MG ...	23	XYNTHA	88
XARELTO STARTER PACK TBPK 16		XIIDRA	137	XYNTHA SOLOFUSE	88
XARELTO SUSR	16	XOFIGO	43	XYOSTED SOAJ	11
XARELTO TABS	16	XOFLUZA (40 MG DOSE) PO 40 MG	57	XYREM SOLN PO	141
XATMEP SOLN	38	XOFLUZA (80 MG DOSE) PO 80 MG	57	XYWAV	141
XCOPRI (250 MG DAILY DOSE) TBPK	19	XOLAIR SOAJ	14	YASMIN 28 PO (drospirenone-ethinyl estradiol)	63
XCOPRI (350 MG DAILY DOSE) TBPK	19	XOLAIR SOLR	14	YAZ PO (drospirenone-ethinyl estradiol)	63
XCOPRI TABS	19	XOLAIR SOSY	14	YERVOY	39
XCOPRI TBPK	19	XOPENEX HFA (levalbuterol tartrate)	16	YF-VAX INJ	149
XDEMVI	136	XOSPATA	43	YONDELIS	37
XELJANZ SOLN	4	XPHOZAH	84	YONSA	40
XELJANZ TABS	4	XPOVIO (100 MG ONCE WEEKLY) PO 50 MG	40	YOUR LIFE MULTI ADULT GUMMIES CHEW PO	124
XELJANZ XR TB24 PO 11 MG	4	XPOVIO (40 MG ONCE WEEKLY) PO 40 MG	40	YUFLYMA (1 PEN) AJKT	5
XELJANZ XR TB24 PO 22 MG	4	XPOVIO (40 MG TWICE WEEKLY) PO 40 MG	40	YUFLYMA (2 PEN) AJKT	5
XELODA PO (capecitabine)	38	XPOVIO (60 MG ONCE WEEKLY) PO 60 MG	40	YUFLYMA (2 SYRINGE) PSKT	5
XELPROS EMUL	138	XPOVIO (60 MG TWICE WEEKLY) PO	40	YUFLYMA-CD/UC/HS STARTER AJKT	5
XELSTRYM	2			YUM-VS COMPLETE MULTIVITAMIN CHEW PO	125
XEMBIFY	139			YUMVS MULTI ZERO CHEW PO 125	
XENAZINE PO (tetrabenazine) ...	142				
XENICAL PO (orlistat)	2				
XEPI	70				

YUMVS ZERO DIABETIC MULTIVITAM CHEW PO	125	bicarbonate)	146	ZETIA PO (ezetimibe)	32
YUPELRI	14	ZEGERID PACK PO 1680 MG-40 MG (omeprazole-sodium bicarbonate)	146	ZETONNA AERS	134
YUSIMRY	5	ZEJULA TABS	43	ZEVALIN Y-90	39
YUTIQ	137	ZELAPAR TBDP	45	ZEVRX INSULIN SYRINGE	111
ZADITOR 0.035 % (ketotifen fumarate (ophth))	138	ZELBORAF PO	43	ZEVRX PEN NEEDLES	111
zafirlukast PO	14	ZELDANA CAPS PO	125	ZEVRX STERILE ALCOHOL PREP PAD	106
zaleplon PO	91	ZEMBRACE SYMTOUCH SOAJ	115	ZEVRX TWIST TOP LANCETS 30G 105	
ZALTRAP	38	ZEMPLAR CAPS PO 1 MCG, 2 MCG (paricalcitol)	84	ZIAC PO (bisoprolol & hydrochlorothiazide)	34
ZALVIT TABS PO	131	ZEMPLAR SOLN (paricalcitol)	84	ZIAGEN SOLN PO (abacavir sulfate) 56	
ZANABIN HYDROGEL GEL	80	ZENPEP CPEP PO 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	82	ZIANA (clindamycin phosphate- tretinoin)	70
ZANAFLEX CAPS PO (tizanidine hcl)	133	ZENPHOR WOUND GEL GEL	80	zidovudine CAPS PO	56
ZANAFLEX TABS PO 4 MG (tizanidine hcl)	133	ZEPATIER	57	zidovudine SYRP PO	56
ZANOSAR	37	ZEPBOUND SOAJ	2	zidovudine TABS PO	56
ZARONTIN CAPS PO (ethosuximide)	19	ZEPBOUND SOLN	2	ZIEXTENZO	90
ZARONTIN SOLN PO (ethosuximide)	19	ZEPOSIA 7-DAY STARTER PACK CPPK	143	ZIIHERA	39
ZARXIO	90	ZEPOSIA CAPS	143	zileuton TB12 PO	14
ZATEAN-PN DHA PO	131	ZEPOSIA STARTER KIT CPPK	143	ZIMHI SOSY	28
ZAVZPRET	114	ZEPZELCA	37	zinc oxide (topical) OINT 20 %	78
ZEGALOGUE SOAJ	24	ZERViate	138	ZIOPTAN (tafluprost)	138
ZEGALOGUE SOSY	24	ZESTORETIC PO (lisinopril & hydrochlorothiazide)	34	ziprasidone hcl PO	47
ZEGERID CAPS PO 1100 MG-20 MG (omeprazole-sodium bicarbonate)	146	ZESTRIL TABS PO (lisinopril)	32	ziprasidone mesylate	47
ZEGERID CAPS PO 1100 MG-40 MG (omeprazole-sodium bicarbonate)	146			ZIRABEV	38
ZEGERID PACK PO 1680 MG-20 MG (omeprazole-sodium				ZITHROMAX PACK PO	94

ZITHROMAX TRI-PAK TABS PO (azithromycin)	94	ZONISADE SUSP	19	7.5 MG (olanzapine)	51
ZITHROMAX Z-PAK TABS PO (azithromycin)	94	zonisamide CAPS PO	19	ZYPREXA TABS PO 20 MG (olanzapine)	51
ZITUVIMET TABS	23	ZORYVE	73	ZYPREXA ZYDIS TBDP PO 10 MG, 15 MG, 20 MG (olanzapine)	51
ZITUVIMET XR TB24	23	ZORYVE	78	ZYPREXA ZYDIS TBDP PO 5 MG (olanzapine)	51
ZITUVIO 100 MG	25	ZOVIRAX CREA (acyclovir topical) 73		ZYTIGA (abiraterone acetate)	40
ZITUVIO 25 MG, 50 MG	25	ZOVIRAX OINT (acyclovir topical) .	73	ZYVOX SUSR (linezolid)	36
ZMA CLEAR SUSP	70	ZTALMY	19	ZYVOX TABS PO (linezolid)	36
ZOCOR TABS PO 10 MG, 20 MG, 40 MG (simvastatin)	32	ZTLIDO PTCH	77		
ZOLINZA	43	ZUBSOLV SUBL	11		
zolmitriptan SOLN 2.5 MG	115	ZURZUVAE	20		
zolmitriptan SOLN 5 MG	115	ZYCLARA (imiquimod)	76		
zolmitriptan TABS PO	115	ZYCLARA PUMP (imiquimod)	76		
zolmitriptan TBDP PO	115	ZYCLARA PUMP	76		
		ZYDELIG	43		
ZOLOFT CONC PO (sertraline hcl) 21		ZYFLO TABS PO	14		
ZOLOFT TABS PO 100 MG (sertraline hcl)	21	ZYKADIA TABS	43		
ZOLOFT TABS PO 25 MG, 50 MG (sertraline hcl)	21	ZYLET	137		
ZOLPIDEM TARTRATE CAPS	91	ZYLOPRIM PO 100 MG (allopurinol) .	88		
zolpidem tartrate SUBL	91	ZYMFENTRA (1 PEN) AJKT	86		
zolpidem tartrate TABS PO	91	ZYMFENTRA (2 PEN) AJKT	86		
zolpidem tartrate TBCR PO	91	ZYMFENTRA (2 SYRINGE) PSKT	86		
ZOMACTON SOLR SC	83	ZYNLONTA	39		
ZOMIG SOLN 2.5 MG (zolmitriptan) .	115	ZYNYZ	39		
ZOMIG SOLN 5 MG (zolmitriptan)	115	ZYPITAMAG PO 2 MG, 4 MG	32		
ZONEGRAN CAPS PO 25 MG, 100 MG (zonisamide)	19	ZYPREXA RELPREVV	51		
		ZYPREXA SOLR (olanzapine)	51		
		ZYPREXA TABS PO 10 MG, 15 MG, 20 MG (olanzapine)	51		
		ZYPREXA TABS PO 2.5 MG, 5 MG,			