

Comprehensive Drug List

The Absolute Total Care Comprehensive Drug List (CDL) lists drugs covered by your prescription benefit. The CDL is updated often and may change. For more information, you may view the latest CDL on our website at absolutetotalcare.com or call us at 1-866-433-6041 (TTY: 711).

Comprehensive Drug List Medication Locator Instructions:

1. With the PDF open, click on the Edit menu, then click Find.
2. In the Find box type the name of the medicine you want to locate.
3. Click the Next button until you find the medicine(s) you are looking for.

Notice of Non-Discrimination

Absolute Total Care complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex (including pregnancy, sexual orientation, and gender identity). Absolute Total Care does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex (including pregnancy, sexual orientation, and gender identity).

Absolute Total Care:

Provides free aids and services to people with disabilities to communicate effectively with us, such as:

- Qualified sign language interpreters
- Written information in other formats (large print, audio, accessible electronic formats, other formats)

Provides free language services to people whose primary language is not English, such as:

- Qualified interpreters
- Information written in other languages
- If you need these services, contact Member Services, by mail at: 100 Center Point Circle, Suite 100, Columbia, SC 29210; by phone at: 1-866-433-6041 (TTY: 711); or by email at: ATCMBRSVC@centene.com.

If you believe that **Absolute Total Care** has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex (including pregnancy, sexual orientation, and gender identity), you can file a grievance with:

1557 Coordinator

PO Box 31384, Tampa, FL 33631

855-577-8234 (TTY: 711)

FAX: 866-388-1769

SM_Section1557Coord@centene.com

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, our **1557 Coordinator** is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at: <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services

200 Independence Avenue, SW

Room 509F, HHH Building

Washington, D.C. 20201

1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at <https://www.hhs.gov/ocr/complaints/index.html>

This notice is available at **Absolute Total Care's** website:

<https://www.absolutetotalcare.com/members/medicaid/nondiscrimination-notice.html>

Language Services

If your primary language is not English, language assistance services are available to you, free of charge. Call: 1-866-433-6041 (TTY: 711).

Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-866-433-6041 (TTY: 711).

إذا كانت لغتك الأساسية غير اللغة الانكليزية فان خدمات المساعدات اللغوية متوفرة لك مجاناً. اتصل على الرقم:

1-866-433-6041 (رقم هاتف الصم والبكم 711)

Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-866-433-6041 (TTY: 711).

Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-866-433-6041 (телетайп: 711).

Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-866-433-6041 (TTY: 711).

Se você fala português do Brasil, os serviços de assistência em sua lingua estão disponíveis para você de forma gratuita. Chame 1-866-433-6041 (TTY: 711)

如果您使用繁體中文，您可以免費獲得語言援助服務。請致電1-866-433-6041 (TTY: 711)

Falam tawng thiam tu na si le tawng let nak asi mi 1-866-433-6041 (TTY: 711) ah tang ka pek tul lo in na ko thei.

धयद आप हद्दी बोलते ह तो आपके िलए मुफ्त म भाषा सहायता सेवाएं उपलब्ध ह। 1-866-433-6041 (TTY: 711) पर कॉल कर।

한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-866-433-6041 (TTY: 711)번으로 전화해 주십시오.

Haka tawng thiam tu na si le tawng let asi mi 1-866-433-6041 (TTY: 711) ah tang ka pek tul lo in ko thei.

Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-866-433-6041 (ATS: 711).

နမူကတိကညီ ကျိအလိ, နမူနီ ကျိအတိမၤစၢလၢ တလံာ်ဘျုးလၢ်စ့ၤ နီတမံၤဘျုးသ့န့ၣ်လီၤ. ကိး 866-433-6041 (TTY: 711)

ማስታወሻ: የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም አርዳታ ድርጅቶች፣ በነጻ ሊያግዝዎት ተዘጋጅተዋል፡ ወደ ሚክሳው ቁጥር ይደውሉ 1-866-433-6041 (መስማት ለተሳናቸው፡ 711)፡

အကယ်၍ သင်သည် မြန်မာစကားကို ပြောပါက၊ ဘာသာစကား အကူအညီ၊ အခမဲ့၊ သင့် ၎င်းအတွက် စီစဉ်ဆောင်ရွက်ပေးပါမည်။ ဖုန်းနံပါတ် 1-866-433-6041 (TTY: 711) သို့ ခေါ်ဆိုပါ။

Pharmacy Program

It's important to Absolute Total Care that our members receive medications that are appropriate and high quality. We work hard to make sure you have access to safe and effective medications that are proven to help you get healthy and stay healthy.

The pharmacy program does not cover all medicines. Some medicines require prior authorization (PA). Some have limits on age, dosage and maximum quantities.

Comprehensive Drug List (CDL)

The Absolute Total Care CDL is the list of covered drugs. The CDL applies to drugs you can receive at retail pharmacies. The Absolute Total Care CDL is reviewed often by Absolute Total Care to make sure the use of medicines is appropriate.

Pharmacy Benefit Manager

Absolute Total Care works with Pharmacy Services to process pharmacy claims for prescribed drugs. Some drugs on the Absolute Total Care CDL may require PA. Pharmacy Services is responsible for the PA process. Express Scripts is our Pharmacy Benefit Manager (PBM).

Specialty Drugs

The preferred specialty pharmacy provider of Absolute Total Care is AcariaHealth Specialty Pharmacy. All specialty drugs must have PA to be approved for payment by Absolute Total Care. The Absolute Total Care Medical Director and Absolute Total Care Pharmacy Director are in charge of the clinical review of these PA requests.

AcariaHealth Specialty Pharmacy provides the following services:

- Delivers drugs to your home or provider's office
- Provides staff pharmacists. The pharmacists can help you 24 hours a day, seven days a week to answer your questions and offer help with your drugs
- Gives you information, materials and ongoing support to help you take the drugs to manage your health condition
- Hepatitis C agents

Dispensing Limits

Drugs may be filled up to a maximum of 31 days' supply for each new prescription or refill. A total of 80% of the days' supply or 25 days must have passed before the prescription can be refilled for non-controlled-substance CDL drugs. A total of 90% of the days' supply must have passed before the prescription can be refilled for controlled substances and narcotic CDL drugs.

Appropriate Use and Safety Edits

The health and safety of our members is important to Absolute Total Care. One way we make sure our members are safe is through point-of-sale (POS) edits. This happens at the time a prescription is

processed at the pharmacy. These edits are based on U.S. Food and Drug Administration (FDA) recommendations. They promote safe and effective medicine use.

Prior Authorizations (PAs)

Some medicines listed on the Absolute Total Care CDL may need PA. The information for PAs should be sent to Pharmacy Services. The information should be sent by your provider or pharmacist. They can fill this information out on the **Medication Prior Authorization Form**. This form should be **faxed to Pharmacy Services at 1-833-982-4001**. This document can be found on the Absolute Total Care website, absolutetotalcare.com. All completed authorizations are reviewed within 24 hours from the time of receipt.

Absolute Total Care will cover the medicine if it is determined that:

1. There is a medical reason the member needs the specific medicine.
2. Depending on the medicine, other medicines on the CDL have not worked.

PA requests are reviewed by a licensed clinical pharmacist. The pharmacist uses criteria established by the Centene Corporate P&T Committee. If the request is approved, the provider will be notified by fax. If the information provided does not meet the criteria for the requested medicine, member and their provider will be notified. Alternative options and appeal process information will also be provided.

Step Therapy

Sometimes Absolute Total Care requires you to do step therapy. This means you will have to try medicines in the CDL in a certain order before we cover another medicine.

If Absolute Total Care has record that the first medicine was tried and did not work, the next medicine is automatically covered. If Absolute Total Care does not have a record that the required medicine was tried, the provider may have to send more information about the request.

If Absolute Total Care does not approve the PA, we will notify the member and their provider. We will also send information about the appeal process.

Quantity Limits

Sometimes, Absolute Total Care limits how much of a certain medicine a member can get at once. If your provider thinks that you have a reason to get more than the limit, they can submit a PA. If Absolute Total Care does not approve the PA, we will notify the member and their provider. They will also send information about the appeal process.

Age Limits

Sometimes, medicines on the Absolute Total Care CDL have age limits. This is because of drug maker, FDA or clinical guidelines. It is to keep you healthy and safe. Age limits meet FDA alerts for the appropriate use of pharmaceuticals. They also align with South Carolina Healthy Connections Medicaid Guidelines.

Medical Necessity Requests

Sometimes, a member needs a medicine that is not listed in the CDL. When this happens, the member's provider can make a medical necessity (MN) request for the medicine. A MN request does not happen often. This is because the list of medicines on the CDL treat most medical conditions.

For a MN request, Absolute Total Care requires:

- Documented failure of at least two CDL drugs within the same therapeutic class for the same diagnosis. This is required as long as two drugs are listed in the same category with comparable labeled indications; or
- Documented intolerance or contraindication to at least two CDL drugs within the same therapeutic class. This is required as long as two drugs are listed in the same category with comparable labeled indications; or
- Documented clinical history or presentation where the patient is not a candidate for any of the CDL drugs for the indication.

These requests are reviewed by a licensed clinical pharmacist. The pharmacist uses criteria established by the Centene Corporate P&T Committee. If the request is approved, the provider will be notified by fax. If the information provided does not meet the criteria for the requested medicine, member and provider will be notified. Alternative options and appeal process information will also be provided.

Emergency Supply Policy

State and federal law require that a pharmacy fill a 72-hour supply of CDL medicine to any member awaiting PA determination. This is so the member's therapy is not interrupted or delayed. All participating pharmacies are authorized to provide a 72-hour supply of medicine. They are reimbursed for the ingredient cost and dispensing fee of the 72-hour supply of medication. They are reimbursed whether or not the PA request ends up being approved or denied. If the pharmacy has any questions, they may call the Pharmacy Help Desk at **1-833-750-4506**.

Exclusions

The following drug categories are not part of the Absolute Total Care CDL, unless noted as covered on the CDL. They are also not covered by the 72-hour emergency supply policy:

- Weight control products
- Pharmaceuticals used for cosmetic purposes or hair growth
- Investigational pharmaceuticals or products
- Immunizing agents
- Drug Efficacy Study Implementation (DESI) and Identical, Related, and Similar (IRS) drugs that are classified as ineffective
- Fertility products
- Erectile dysfunction products prescribed to treat impotence

- Nutritional supplements
- Injectables (except those listed in the CDL)
- Infusion supplies
- Gender transition pharmaceuticals or products

Medicaid Drug Rebate Program

Absolute Total Care only covers rebated drugs that are in the Medicaid Drug Rebate program and Food and Drug Administration (FDA) approved are covered on the pharmacy benefit. Requests for coverage of a non-rebated drug will require an appeal for medical necessity review on a case-by-case basis

340B Program

Per SCDHHS Pharmacy Services Provider Manual “340B Program Effective with dates of service on or after July 1, 2019, the following policy will apply regarding the submission of claims for drugs purchased through the 340B Program, as described in Section 340B of the Public Health Act of 1992.

For drugs purchased through the 340B Program, covered entities must submit a value of “20” in the Submission Clarification Code field (420-DK). When submitting Medicaid FFS claims, an amount not to exceed the 340B ceiling price plus an enhanced 340B dispensing fee should be submitted in the usual and customary field.

Claims submitted by covered entities without a value of “20” in the Submission Clarification Code field will be considered eligible for Medicaid rebates. This policy applies to all covered entities, regardless.”

Newly-Approved Products

Absolute Total Care reviews new drugs before adding them to the CDL. While the new drugs are being reviewed, access to them will be considered through the PA review process. If

Absolute Total Care does not approve PA, we will notify the member and their practitioner. We will also provide information about the appeal process.

Over-The-Counter (OTC) Medications

Absolute Total Care covers many OTC medicines. These medicines can be found in the Absolute Total Care CDL. These products are covered as long as you have a prescription from a licensed practitioner that meets all the legal requirements for a prescription.

Generic Drugs

Generic drugs are made up of the same active ingredient as brand-name drugs. When generic drugs are available, the brand-name drug will not be covered without Absolute Total Care PA unless the Brand name drug is preferred by the SCDHHS Single PDL.

If you or your provider think a brand-name drug is medically necessary, the provider must request the drug using the PA process. Absolute Total Care will cover the brand-name drug according to our clinical guidelines if there is a medical reason the member needs the particular brand-name drug. If Absolute Total Care does not approve the PA, we will notify the member and their provider. We will also send information about the appeal process.

Drug Efficacy Study Implementation (DESI) Drugs

DESI products and known related drug products are defined as less than effective by the FDA. This is because there is not much evidence that it is effective for all labeling indications. It is also because *justification* for their medical need has not been established. DESI products are not covered by Absolute Total Care.

Filling a Prescription

Members can have prescriptions filled at an Absolute Total Care network pharmacy. You can find a network pharmacy near you by contacting **Absolute Total Care Member Services at 1-866-433--6041 (TTY: 711)**. You can also visit Absolute Total Care's website at absolutetotalcare.com and click Find a Provider to locate a pharmacy. You can type in your address or zip code and see pharmacies that are close by. At the pharmacy, you will need to provide your prescription and your Absolute Total Care member ID card.

If members are traveling more than 30 miles from the South Carolina border, they can have a one-time fill of their medicine. All necessary prescriptions are required to be filled on the same day for a maximum 31-day supply.

Copayments

Effective July 1, 2024, Absolute Total Care charges \$0.00 for each prescription.

Drug Tiers

The following notations define the comprehensive drug list status in the Drug Tier column.

P:	Preferred
NP:	Non-preferred
PA:	Preferred with Clinical PA

Non-managed/Supplemental (clinical criteria may apply):

C:	Non-Managed Covered
NC:	Non-Managed Not Covered
X:	Pharmacy Benefit Exclusion

Abbreviations

The following notations and abbreviations may be found in the drug listing requirements/limits column.

Abbreviations		
AL	Age Limit	Drug is limited to specific age.
QL	Quantity Limit	There is a limit on the amount of drug covered per prescription or within a specific timeframe.
Max Day(s) Supply	Day(s) Supply	There is a limit on the amount of the drug that is covered per time.
Max Fill	Fill Limit	There is a limit on the number of times the drug can be filled.
Opioid Smart PA	Unique Limits for Opioid Drugs	There may be limits on use such as maximum seven-day supply for short-acting opioids or prior authorization required. Exceptions exist for specific diagnoses and/or history of use.
PA, Smart PA	Prior Authorization	Prior authorization is required before prescription can be filled.
Pack Lmt	Package Limit	There is a limit on the number of packages covered per prescription.
Rtl	Retail	The limit or restriction applies to coverage at a retail pharmacy.
RX/OTC	Prescription/Over-the-Counter	The drug is available as both prescription and over-the-counter.
SP	Specialty Drug	High-cost drugs used to treat complex or rare conditions such as multiple sclerosis, rheumatoid arthritis, hepatitis C and hemophilia.
ST	Step Therapy	Requires trial and failure of one or more preferred products prior to coverage.

Clinical Edit Descriptions

Edit Name	Edit Description
Opioid	Short-acting opioid medicines can only be filled for 7-days at a time when no opioids are filled in the past 180 days (Treatment-Naïve). This limit is extended to 30-day fills when a member has a medical history of cancer, sickle cell, or palliative care in their records. Treatment-Naïve* Limits: • Daily Dose Max = 90 MME** • Day Supply Max = 7 days • Must use short-acting opioids before long-acting opioids *Treatment-Naïve means no opioid fill in last 180 days **MME = Morphine Milligram Equivalent
Test Strips	Insulin users are limited to 150 strips per 30 days; Non-insulin users are limited to 100 strips per 90 days.

Contact Information

Contact Information	
Absolute Total Care	Phone: 1-866-433-6041 Fax: 1-855-865-9469 Website: www.absolutetotalcare.com
AcariaHealth Specialty Pharmacy	Phone: 1-855-535-1815 Fax: 1-855-217-0926 Website: www.acariahealth.com
Pharmacy Services	PA Phone: 1-866-399-0928 PA Fax: 1-833-982-4001 Help Desk: 1-800-460-8988
Pharmacy Help Desk	Phone: 1-833-750-4506

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 2.5 MG, 7.5 MG, 15 MG, 20 MG, 30 MG</i>	NP	
Amphetamines			<i>dextroamphetamine sulfate TABS 5 MG, 10 MG</i>	NP	QL(2 EA daily); AL(At least 3 yrs old)
ADDERALL XR CP24 (<i>amphetamine-dextroamphetamine</i>)	NP	QL(1 EA daily); AL(At least 6 yrs old)	<i>dextroamphetamine sulfate TABS 5 MG, 10 MG</i>	P	QL(2 EA daily); AL(At least 3 yrs old)
ADDERALL TABS (<i>amphetamine-dextroamphetamine</i>)	P	QL(2 EA daily); AL(At least 3 yrs old)	<i>dextroamphetamine sulfate TABS 15 MG, 20 MG, 30 MG</i>	P	
ADZENYS XR-ODT TBED 3.1 MG, 6.3 MG, 9.4 MG, 12.5 MG, 15.7 MG, 18.8 MG (<i>amphetamine</i>)	NP		DYANAVEL XR SUER	P	
<i>amphetamine sulfate TABS</i>	NP		DYANAVEL XR TBCR	NP	
<i>amphetamine-dextroamphetamine CP24 5 MG, 10 MG, 15 MG, 20 MG, 25 MG, 30 MG</i>	P	QL(1 EA daily); AL(At least 6 yrs old)	EVEKEO TABS (<i>amphetamine sulfate</i>)	NP	
<i>amphetamine-dextroamphetamine CP24 12.5 MG, 25 MG, 37.5 MG, 50 MG</i>	NP		<i>lisdexamfetamine dimesylate CAPS</i>	NP	Brand Preferred; QL(1 EA daily)
<i>amphetamine-dextroamphetamine TABS</i>	P	QL(2 EA daily); AL(At least 3 yrs old)	<i>lisdexamfetamine dimesylate CHEW</i>	NP	Brand Preferred
<i>amphetamine TBED 3.1 MG, 6.3 MG, 9.4 MG, 12.5 MG, 15.7 MG, 18.8 MG</i>	NP		<i>methamphetamine hcl</i>	NP	
DEXEDRINE CP24 10 MG, 15 MG (<i>dextroamphetamine sulfate</i>)	NP	QL(2 EA daily); AL(At least 6 yrs old)	MYDAYIS CP24 (<i>amphetamine-dextroamphetamine</i>)	NP	
<i>dextroamphetamine sulfate CP24 10 MG, 15 MG</i>	P	QL(2 EA daily); AL(At least 6 yrs old)	VYVANSE CAPS	P	Brand Preferred; QL(1 EA daily)
<i>dextroamphetamine sulfate CP24 5 MG</i>	P	QL(1 EA daily); AL(At least 6 yrs old)	VYVANSE CHEW	P	Brand Preferred
<i>dextroamphetamine sulfate SOLN</i>	NP		XELSTRYM	NP	
			Analeptics		
			<i>caffeine citrate SOLN PO</i>	C	Limit 2 fills per Lifetime; QL(45 ML per fill retail); 2 max fill(s) per 999 day(s) retail
			Anti-Obesity Agents		
			<i>liraglutide (weight management) 18 MG/3ML</i>	NP	

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SAXENDA 18 MG/3ML (liraglutide (weight management))	NP		DAYTRANA PTCH (methylphenidate)	P	Brand Preferred
WEGOVY 0.25 MG/0.5ML, 0.5 MG/0.5ML, 1 MG/0.5ML	PA	QL(2 ML per 28 day(s) retail; 2 ML per 28 days mail); PA	dexmethylphenidate hcl CP24	P	
WEGOVY 1.7 MG/0.75ML, 2.4 MG/0.75ML	PA	QL(3 ML per 28 day(s) retail; 2 ML per 28 days mail); PA	dexmethylphenidate hcl TABS	P	QL(2 EA daily); AL(At least 6 yrs old)
Attention-Deficit/Hyperactivity Disorder (ADHD) Agents			FOCALIN XR CP24 (dexmethylphenidate hcl)	NP	
atomoxetine hcl	P	AL(At least 6 yrs old)	FOCALIN TABS (dexmethylphenidate hcl)	NP	QL(2 EA daily); AL(At least 6 yrs old)
clonidine hcl (adhd) TB12	P		JORNAY PM CP24	NP	
guanfacine hcl (adhd)	P	QL(1 EA daily); AL(At least 6 yrs old)	METHYLIN SOLN (methylphenidate hcl)	NP	
INTUNIV (guanfacine hcl (adhd))	NP	QL(1 EA daily); AL(At least 6 yrs old)	methylphenidate hcl CHEW	NP	
ONYDA XR SUER	NP		methylphenidate hcl CP24 10 MG, 20 MG, 30 MG, 40 MG, 60 MG	P	
QELBREE	NP		methylphenidate hcl CP24	NP	
STRATTERA (atomoxetine hcl)	NP	AL(At least 6 yrs old)	methylphenidate hcl CPCR	P	QL(1 EA daily); AL(At least 6 yrs old)
Histamine H3-Receptor Antagonist/Inverse Agonists			methylphenidate hcl SOLN	P	
WAKIX	NP	SP	methylphenidate hcl TABS 10 MG, 20 MG	P	QL(3 EA daily); AL(At least 3 yrs old)
Stimulants - Misc.			methylphenidate hcl TABS 5 MG	P	QL(6 EA daily); AL(At least 3 yrs old)
APTENSIO XR CP24 (methylphenidate hcl)	NP		methylphenidate hcl TB24 18 MG, 27 MG, 54 MG	P	QL(1 EA daily)
armodafinil	PA	PA	methylphenidate hcl TB24 36 MG	P	QL(2 EA daily)
AZSTARYS	NP		methylphenidate hcl TBCR 18 MG, 27 MG, 54 MG	P	QL(1 EA daily); AL(At least 6 yrs old)
CONCERTA TBCR 36 MG (methylphenidate hcl)	NP	QL(2 EA daily); AL(At least 6 yrs old)	methylphenidate hcl TBCR 10 MG, 20 MG, 36 MG	P	QL(2 EA daily); AL(At least 6 yrs old)
CONCERTA TBCR 18 MG, 27 MG, 54 MG (methylphenidate hcl)	NP	QL(1 EA daily); AL(At least 6 yrs old)	methylphenidate hcl TBCR 45 MG, 63 MG, 72 MG	NP	
COTEMPLA XR-ODT TBED	NP				

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>methylphenidate PTCH</i>	NP	Brand Preferred
<i>modafinil</i>	PA	PA
NUVIGIL (<i>armodafinil</i>)	NP	
PROVIGIL (<i>modafinil</i>)	NP	
QUILLICHEW ER CHER	P	
QUILLIVANT XR SRER	P	
RELEXXII TBCR 18 MG, 27 MG, 54 MG	NP	QL(1 EA daily); AL(At least 6 yrs old)
RELEXXII TBCR 36 MG	NP	QL(2 EA daily); AL(At least 6 yrs old)
RELEXXII TBCR 45 MG, 63 MG, 72 MG (<i>methylphenidate hcl</i>)	NP	
RELEXXII TBCR 45 MG, 63 MG, 72 MG	NP	
RITALIN LA CP24 (<i>methylphenidate hcl</i>)	NP	
RITALIN TABS 10 MG, 20 MG (<i>methylphenidate hcl</i>)	NP	QL(3 EA daily); AL(At least 3 yrs old)
RITALIN TABS 5 MG (<i>methylphenidate hcl</i>)	NP	QL(6 EA daily); AL(At least 3 yrs old)
ALLERGENIC EXTRACTS/BIOLOGICALS MISC		
Allergenic Extracts		
GRASTEK SUBL	C	QL(1 EA daily); AL(At least 5 yrs old - Up to 65 yrs old)
RAGWITEK SUBL	C	QL(1 EA daily); AL(At least 18 yrs old - Up to 65 yrs old)
AMEBICIDES		
Amebicides		
SOLOSEC	NP	ST
AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections		
Aminoglycosides		

Drug Name	Drug Tier	Requirements/ Limits
ARIKAYCE	NP	SP
BETHKIS NEBU (<i>tobramycin</i>)	NP	SP
KITABIS PAK (W/ NEBULIZER) NEBU 300 MG/5ML (<i>tobramycin</i>)	NP	SP
<i>neomycin sulfate TABS</i>	NP	
TOBI PODHALER CAPS	PA	SP; PA
TOBI NEBU (<i>tobramycin</i>)	NP	SP
<i>tobramycin sulfate SOLN IJ 1.2 GM/30ML, 10 MG/ML, 80 MG/2ML</i>	C	PA
<i>tobramycin sulfate SOLR</i>	C	PA
<i>tobramycin NEBU</i>	PA	PA
<i>tobramycin NEBU</i>	NP	SP
<i>tobramycin NEBU</i>	PA	SP; PA
ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions		
Antirheumatic - Enzyme Inhibitors		
OLUMIANT	NP	SP
RINVOQ LQ SOLN	NP	SP
RINVOQ TB24	NP	SP
XELJANZ XR TB24	NP	SP
XELJANZ SOLN	NP	SP
XELJANZ TABS	NP	SP
Antirheumatic Antimetabolites		
OTREXUP SOAJ 10 MG/0.4ML, 12.5 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 20 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML	NP	SP

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
RASUVO SOAJ 7.5 MG/0.15ML, 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML	P	SP	ADALIMUMAB-FKJP (2 PEN) AJKT	NP	SP
Anti-TNF-alpha - Monoclonal Antibodies			ADALIMUMAB-FKJP (2 SYRINGE) PSKT	NP	SP
			ADALIMUMAB-RYVK (1 PEN) AJKT 80 MG/0.8ML	NP	
			ADALIMUMAB-RYVK (2 PEN) AJKT	NP	
			ADALIMUMAB-RYVK (2 PEN) AJKT	NP	SP
			ADALIMUMAB-RYVK (2 SYRINGE) PSKT	NP	SP
			AMJEVITA-PED 10KG TO <15KG SOSY	NP	SP
			AMJEVITA-PED 15KG TO <30KG SOSY	NP	SP
			AMJEVITA SOAJ	NP	SP
			AMJEVITA SOSY	NP	SP
			CYLTEZO (2 PEN) AJKT	NP	SP
			CYLTEZO (2 SYRINGE) PSKT	NP	SP
			CYLTEZO-CD/UC/HS STARTER AJKT	NP	SP
			CYLTEZO-PSORIASIS/UV STARTER AJKT	NP	SP
			HADLIMA PUSHTOUCH SOAJ	NP	SP
			HADLIMA SOSY	NP	SP
			HULIO (2 PEN) AJKT	NP	SP
			HULIO (2 SYRINGE) PSKT	NP	SP
			HUMIRA (2 PEN) AJKT 40 MG/0.4ML	P	QL(4 EA per 28 day(s) retail); AL(At least 2 yrs old); SP
			HUMIRA (2 PEN) AJKT 40 MG/0.8ML	P	QL(0.14 EA daily; 4 EA per 28 day(s) retail); AL(At least 2 yrs old); SP
ABRILADA (1 PEN) AJKT	NP	SP			
ABRILADA (2 PEN) AJKT	NP	SP			
ABRILADA (2 SYRINGE) PSKT	NP	SP			
ADALIMUMAB-AACF (2 PEN) AJKT	NP	SP			
ADALIMUMAB-AACF (2 SYRINGE) PSKT	NP	SP			
ADALIMUMAB-AACF(CD/UC/HS STRT) AJKT	NP	SP			
ADALIMUMAB-AACF(PS/UV STARTER) AJKT	NP	SP			
ADALIMUMAB-AATY (1 PEN) AJKT	NP	SP			
ADALIMUMAB-AATY (2 PEN) AJKT	NP	SP			
ADALIMUMAB-AATY (2 SYRINGE) PSKT	NP	SP			
ADALIMUMAB-AATY CD/UC/HS START AJKT 80 MG/0.8ML	NP				
ADALIMUMAB-ADAZ SOAJ	NP	SP			
ADALIMUMAB-ADAZ SOSY 10 MG/0.1ML	NP				
ADALIMUMAB-ADAZ SOSY	NP	SP			
ADALIMUMAB-ADBM (2 PEN) AJKT	NP	SP			
ADALIMUMAB-ADBM (2 SYRINGE) PSKT	NP	SP			

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
HUMIRA (2 PEN) AJKT 80 MG/0.8ML	P	QL(2 EA per 28 day(s) retail; 2 EA per 28 days mail); AL(At least 2 yrs old); SP	SIMLANDI (1 SYRINGE) PSKT	NP	SP
			SIMLANDI (2 PEN) AJKT	NP	SP
			SIMLANDI (2 SYRINGE) PSKT	NP	SP
HUMIRA (2 SYRINGE) PSKT 40 MG/0.8ML	P	QL(0.14 EA daily; 4 EA per 28 day(s) retail); AL(At least 2 yrs old); SP	SIMPONI SOAJ	NP	QL(1 ML per 28 day(s) retail; 1 ML per 28 days mail); AL(At least 2 yrs old); SP
HUMIRA (2 SYRINGE) PSKT 40 MG/0.4ML	P	QL(4 EA per 28 day(s) retail); AL(At least 2 yrs old); SP	SIMPONI SOSY	NP	QL(1 ML per 28 day(s) retail; 1 ML per 28 days mail); AL(At least 2 yrs old); SP
HUMIRA (2 SYRINGE) PSKT 10 MG/0.1ML, 20 MG/0.2ML	P	QL(2 EA per 28 day(s) retail); AL(At least 2 yrs old); SP	YUFLYMA (1 PEN) AJKT	NP	SP
HUMIRA-CD/UC/HS STARTER AJKT 80 MG/0.8ML	P	QL(3 EA per 365 day(s) retail); AL(At least 2 yrs old); SP	YUFLYMA (2 PEN) AJKT	NP	SP
HUMIRA-PSORIASIS/UEIT STARTER AJKT	P	QL(3 EA per 365 day(s) retail); AL(At least 2 yrs old); SP	YUFLYMA (2 SYRINGE) PSKT	NP	SP
			YUFLYMA-CD/UC/HS STARTER AJKT	NP	SP
			YUSIMRY	NP	SP
			YUSIMRY	NP	
HYRIMOZ-CROHNS/UC STARTER SOAJ	NP	SP	Interleukin-1 Blockers		
HYRIMOZ-PED<40KG CROHN STARTER SOSY	NP	SP	ARCALYST	NP	SP
HYRIMOZ-PED>=40KG CROHN START SOSY	NP	SP	Interleukin-1 Receptor Antagonist (IL-1Ra)		
HYRIMOZ-PLAQ PSOR/UEIT START SOAJ	NP	SP	KINERET SOSY	NP	SP
HYRIMOZ SOAJ	NP	SP	Interleukin-6 Receptor Inhibitors		
HYRIMOZ SOSY	NP	SP	ACTEMRA ACTPEN SOAJ	NP	SP
IDACIO-CROHNS/UC STARTER AJKT	NP	SP	ACTEMRA SOLN	C	SP; PA
IDACIO-PSORIASIS STARTER AJKT	NP	SP	ACTEMRA SOSY	NP	SP
SIMLANDI (1 PEN) AJKT	NP	SP	KEVZARA SOAJ	NP	SP
			KEVZARA SOSY	NP	SP
			TYENNE SOAJ	NP	SP
			TYENNE SOAJ	NP	
			TYENNE SOSY	NP	
			TYENNE SOSY	NP	SP

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Nonsteroidal Anti-inflammatory Agents (NSAIDs)			<i>indomethacin SUSP</i>	NP	
ARTHROTEC TBEC (<i>diclofenac w/ misoprostol</i>)	NP		<i>ketoprofen CP24</i>	NP	
<i>celecoxib</i>	C	QL(2 EA daily); PA	<i>ketorolac tromethamine TABS</i>	P	QL(20 EA per 31 day(s) retail); AL(At least 17 yrs old)
COXANTO CAPS (<i>oxaprozin</i>)	NP		LURBIRO TABS 100 MG (<i>flurbiprofen</i>)	NP	
DAYPRO TABS (<i>oxaprozin</i>)	NP		<i>meclofenamate sodium CAPS</i>	NP	
<i>diclofenac potassium CAPS</i>	NP		<i>mefenamic acid CAPS</i>	NP	
<i>diclofenac potassium TABS</i>	NP		<i>meloxicam CAPS</i>	NP	
<i>diclofenac sodium TB24</i>	P		<i>meloxicam TABS</i>	P	
<i>diclofenac sodium TBEC</i>	P		<i>nabumetone</i>	P	
<i>diclofenac w/ misoprostol TBEC</i>	NP		NALFON CAPS (<i>fenoprofen calcium</i>)	NP	
<i>etodolac CAPS</i>	NP		NALFON TABS 600 MG	NP	
<i>etodolac TABS</i>	NP		NAPRELAN TB24 (<i>naproxen sodium</i>)	NP	
<i>etodolac TB24</i>	NP		NAPROSYN SUSP (<i>naproxen</i>)	NP	
<i>fenoprofen calcium CAPS 400 MG</i>	NP		<i>naproxen sodium TABS 275 MG, 550 MG</i>	NP	
<i>fenoprofen calcium TABS</i>	NP		<i>naproxen sodium TABS 220 MG</i>	C	QL(2 EA daily)
FENOPRON CAPS	NP		<i>naproxen sodium TB24</i>	NP	
<i>flurbiprofen TABS 100 MG</i>	NP		<i>naproxen-esomeprazole magnesium</i>	NP	
<i>ibuprofen CHEW</i>	C		<i>naproxen SUSP</i>	P	
<i>ibuprofen-famotidine</i>	NP		<i>naproxen TABS</i>	P	
<i>ibuprofen SUSP 40 MG/ML, 50 MG/1.25ML</i>	C		<i>naproxen TBEC</i>	P	QL(2 EA daily)
<i>ibuprofen SUSP 100 MG/5ML, 200 MG/10ML</i>	P	RX/OTC	<i>oxaprozin TABS</i>	NP	
<i>ibuprofen TABS 200 MG</i>	C		<i>piroxicam CAPS</i>	P	
<i>ibuprofen TABS 400 MG, 600 MG, 800 MG</i>	P		RELAFEN DS	NP	
<i>ibuprofen TABS 300 MG</i>	NP		<i>sulindac TABS</i>	P	
<i>indomethacin CAPS 25 MG, 50 MG</i>	P		<i>tolmetin sodium CAPS</i>	NP	
<i>indomethacin CPCR</i>	NP		<i>tolmetin sodium TABS 600 MG</i>	NP	
<i>indomethacin SUPP</i>	NP		VYSCOXA PO 10 MG/ML	NP	AL(At least 2 yrs old)

Updated January 2026

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Phosphodiesterase 4 (PDE4) Inhibitors			ENBREL SOSY 50 MG/ML	P	QL(8 ML per 28 day(s) retail); AL(At least 2 yrs old); SP
OTEZLA XR TB24 PO 75 MG	NP	SP	ENBREL SOSY 25 MG/0.5ML	P	QL(4 ML per 28 day(s) retail); AL(At least 2 yrs old); SP
OTEZLA/OTEZLA XR INITIATION PK TBPk	NP	1 package(s) per 365 day(s) retail; 1 package(s) per 365 day(s) mail; AL(At least 6 yrs old); SP	ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions		
OTEZLA TABS 20 MG	NP	SP	Analgesic Combinations		
OTEZLA TABS 30 MG	NP	QL(2 EA daily); AL(At least 6 yrs old); SP	<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG</i>	C	QL(4 EA daily)
OTEZLA TBPk	NP	1 package(s) per 365 day(s) retail; 1 package(s) per 365 day(s) mail; AL(At least 6 yrs old); SP	<i>butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG</i>	C	QL(4 EA daily)
Pyrimidine Synthesis Inhibitors			<i>butalbital-acetaminophen TABS 50 MG-325 MG</i>	C	
<i>leflunomide</i>	C	QL(1 EA daily)	<i>butalbital-aspirin-caffeine CAPS</i>	C	QL(4 EA daily)
Selective Costimulation Modulators			Analgesics - Sodium Channel Pain Signal Inhibitors		
ORENCIA CLICKJECT SOAJ	NP	SP	JOURNAVX	P	Does not exceed healthplan QL; QL(29 EA per fill retail; 29 per fill mail); 14 day(s) max supply per 60 day(s) retail; 14 day(s) max supply per 60 day(s) mail; AL(At least 18 yrs old)
ORENCIA SOSY	NP	SP	Analgesics Other		
Soluble Tumor Necrosis Factor Receptor Agents			<i>acetaminophen CHEW</i>	C	
ENBREL MINI SOCT	P	QL(8 ML per 28 day(s) retail); AL(At least 2 yrs old); SP	<i>acetaminophen LIQD 160 MG/5ML</i>	C	
ENBREL SURECLICK SOAJ	P	QL(8 ML per 28 day(s) retail); AL(At least 2 yrs old); SP			
ENBREL SOLN	P	QL(4 ML per 28 day(s) retail); AL(At least 2 yrs old); SP			

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>acetaminophen SOLN PO 160 MG/5ML, 325 MG/10.15ML, 650 MG/20.3ML</i>	C	QL(240 ML per fill retail)	DILAUDID TABS 8 MG (<i>hydromorphone hcl</i>)	NP	Opioid Smart PA; QL(4 EA daily)
<i>acetaminophen SUPP 120 MG, 650 MG</i>	C	QL(12 EA per 31 day(s) retail)	DILAUDID TABS 4 MG (<i>hydromorphone hcl</i>)	NP	Opioid Smart PA
<i>acetaminophen SUSP 160 MG/5ML, 650 MG/20.3ML</i>	C		<i>fentanyl citrate TABS 400 MCG, 600 MCG, 800 MCG</i>	NP	Opioid Smart PA
<i>acetaminophen TABS 325 MG, 500 MG</i>	C		<i>fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR</i>	P	QL(0.34 EA daily)
FEVERALL JUNIOR STRENGTH SUPP	C	QL(12 EA per 31 day(s) retail)	<i>fentanyl PT72 37.5 MCG/HR, 62.5 MCG/HR, 87.5 MCG/HR</i>	NP	
Salicylates			<i>hydrocodone bitartrate CP12</i>	NP	Opioid Smart PA
<i>aspirin buffered (cal carb-mag carb-mag oxide)</i>	C		<i>hydrocodone bitartrate T24A</i>	NP	Opioid Smart PA
<i>aspirin CHEW</i>	C		<i>hydromorphone hcl LIQD</i>	P	Opioid Smart PA
ASPIRIN SUPP 300 MG	C	QL(12 EA per 31 day(s) retail)	HYDROMORPHONE HCL SUPP	P	Opioid Smart PA; QL(2 EA daily)
<i>aspirin TABS 325 MG</i>	C		<i>hydromorphone hcl TABS 2 MG</i>	P	Opioid Smart PA; QL(8 EA daily)
<i>aspirin TBEC 81 MG, 325 MG</i>	C		<i>hydromorphone hcl TABS 8 MG</i>	P	Opioid Smart PA; QL(4 EA daily)
<i>diflunisal TABS</i>	NP		<i>hydromorphone hcl TABS 4 MG</i>	P	Opioid Smart PA
<i>salsalate</i>	C		<i>hydromorphone hcl TB24</i>	NP	Opioid Smart PA
ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions			HYSINGLA ER T24A	NP	Opioid Smart PA
Opioid Agonists			<i>levorphanol tartrate TABS 2 MG</i>	NP	
<i>codeine sulfate TABS 30 MG</i>	P	Opioid Smart PA; AL(At least 12 yrs old)	<i>levorphanol tartrate TABS</i>	NP	Opioid Smart PA
CODEINE SULFATE TABS	P	Opioid Smart PA; AL(At least 12 yrs old)	<i>meperidine hcl SOLN PO 50 MG/5ML</i>	P	Opioid Smart PA
CONZIP CP24 (<i>tramadol hcl</i>)	NP	Opioid Smart PA	<i>meperidine hcl TABS 50 MG</i>	P	Opioid Smart PA; QL(6 EA daily)
DILAUDID LIQD (<i>hydromorphone hcl</i>)	NP	Opioid Smart PA			
DILAUDID TABS 2 MG (<i>hydromorphone hcl</i>)	NP	Opioid Smart PA; QL(8 EA daily)			

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>methadone hcl TABS 5 MG</i>	C	Opioid Smart PA; QL(4 EA daily); PA	OXYCONTIN T12A	P	Brand Preferred; Opioid Smart PA
<i>methadone hcl TABS 10 MG</i>	C	Opioid Smart PA; QL(10 EA daily); PA	<i>oxymorphone hcl TABS</i>	NP	Opioid Smart PA
<i>morphine sulfate beads</i>	NP	Opioid Smart PA	<i>oxymorphone hcl TB12</i>	NP	Opioid Smart PA
<i>morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG</i>	NP	Opioid Smart PA	ROXICODONE TABS 15 MG, 30 MG (<i>oxycodone hcl</i>)	NP	Opioid Smart PA; QL(6 EA daily)
<i>morphine sulfate SOLN PO 10 MG/5ML, 20 MG/5ML</i>	P	Opioid Smart PA; QL(16.67 ML daily)	ROXYBOND TABA	NP	Opioid Smart PA
<i>morphine sulfate SOLN PO 10 MG/5ML</i>	P	QL(16.67 ML daily)	<i>tramadol hcl CP24 100 MG, 200 MG, 300 MG</i>	NP	Opioid Smart PA
<i>morphine sulfate SOLN PO 100 MG/5ML</i>	P	Opioid Smart PA	<i>tramadol hcl SOLN</i>	NP	Opioid Smart PA
<i>morphine sulfate SUPP</i>	P	Opioid Smart PA; QL(0.78 EA daily)	TRAMADOL HCL SOLN (<i>tramadol hcl</i>)	NP	Opioid Smart PA
<i>morphine sulfate TABS</i>	P	Opioid Smart PA; QL(6 EA daily)	<i>tramadol hcl TABS 50 MG</i>	P	Opioid Smart PA; QL(8 EA daily); AL(At least 18 yrs old)
<i>morphine sulfate TBCR</i>	P	Opioid Smart PA; QL(3 EA daily)	<i>tramadol hcl TABS 25 MG</i>	P	Opioid Smart PA
MS CONTIN TBCR (<i>morphine sulfate</i>)	NP	Opioid Smart PA; QL(3 EA daily)	<i>tramadol hcl TABS 75 MG, 100 MG</i>	NP	
<i>oxycodone hcl CAPS</i>	P	Opioid Smart PA; QL(6 EA daily)	<i>tramadol hcl TABS 50 MG</i>	P	QL(8 EA daily); AL(At least 18 yrs old)
<i>oxycodone hcl CONC 100 MG/5ML</i>	P	QL(4 ML daily)	<i>tramadol hcl TB24</i>	NP	Opioid Smart PA
<i>oxycodone hcl CONC 100 MG/5ML</i>	P	Opioid Smart PA; QL(4 ML daily)	<i>tramadol hcl TB24</i>	P	Opioid Smart PA
<i>oxycodone hcl SOLN</i>	P		<i>tramadol hcl TB24</i>	P	
<i>oxycodone hcl SOLN</i>	P	Opioid Smart PA	Opioid Combinations		
<i>oxycodone hcl T12A 20 MG, 40 MG</i>	NP		<i>acetaminophen w/ codeine SOLN</i>	P	QL(30 ML daily); AL(At least 12 yrs old)
<i>oxycodone hcl TABS</i>	P	Opioid Smart PA; QL(6 EA daily)	<i>acetaminophen w/ codeine SOLN</i>	P	Opioid Smart PA; QL(30 ML daily); AL(At least 12 yrs old)

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>acetaminophen w/ codeine TABS 15 MG-300 MG, 30 MG-300 MG, 60 MG-300 MG</i>	P	Opioid Smart PA; QL(6 EA daily); AL(At least 12 yrs old)	<i>hydrocodone-acetaminophen TABS 325 MG-2.5 MG</i>	P	
<i>acetaminophen w/ codeine TABS</i>	P	QL(6 EA daily); AL(At least 12 yrs old)	<i>hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	P	QL(10 EA daily)
<i>acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG</i>	NP	Opioid Smart PA	<i>hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG</i>	P	Opioid Smart PA
<i>butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG</i>	P	Opioid Smart PA; QL(4 EA daily); AL(At least 12 yrs old)	<i>hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	P	Opioid Smart PA; QL(10 EA daily)
<i>butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-300 MG</i>	P	Opioid Smart PA	<i>hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG, 7.5 MG-200 MG</i>	P	Opioid Smart PA
<i>butalbital-aspirin-caffeine w/cod</i>	NP	Opioid Smart PA; QL(4 EA daily); AL(At least 12 yrs old)	NALOCET TABS	NP	Opioid Smart PA
<i>butalbital-aspirin-caffeine w/cod</i>	P	Opioid Smart PA; QL(4 EA daily); AL(At least 12 yrs old)	<i>oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	P	Opioid Smart PA; QL(6 EA daily)
FIORICET/CODEINE 30 MG-40 MG-50 MG-300 MG (<i>butalbital-acetaminophen-caffeine w/ codeine</i>)	NP	Opioid Smart PA	<i>oxycodone w/ acetaminophen TABS 325 MG-2.5 MG</i>	P	QL(6 EA daily)
<i>hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML</i>	P	Opioid Smart PA; QL(180 ML daily)	<i>oxycodone w/ acetaminophen TABS 325 MG-2.5 MG</i>	P	Opioid Smart PA
<i>hydrocodone-acetaminophen SOLN 325 MG/15ML-10 MG/15ML</i>	P	Opioid Smart PA	PERCOCET TABS 325 MG-2.5 MG (<i>oxycodone w/ acetaminophen</i>)	NP	Opioid Smart PA
<i>hydrocodone-acetaminophen SOLN</i>	P		PERCOCET TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG (<i>oxycodone w/ acetaminophen</i>)	NP	Opioid Smart PA; QL(6 EA daily)
			PROLATE SOLN	NP	Opioid Smart PA
			PROLATE TABS	NP	Opioid Smart PA
			<i>tramadol-acetaminophen</i>	P	Opioid Smart PA; QL(4 EA daily); AL(At least 18 yrs old)

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
Opioid Partial Agonists		
BELBUCA FILM	NP	Opioid Smart PA
BRIXADI (WEEKLY) SOSY	P	Opioid Smart PA; SP
BRIXADI SOSY 64 MG/0.18ML, 96 MG/0.27ML, 128 MG/0.36ML	P	Opioid Smart PA; SP
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL</i>	NP	Brand Preferred; QL(3 EA daily); AL(At least 16 yrs old)
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG</i>	NP	Brand Preferred; Opioid Smart PA; QL(3 EA daily); AL(At least 16 yrs old)
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG</i>	NP	Brand Preferred; Opioid Smart PA; QL(2 EA daily); AL(At least 16 yrs old)
<i>buprenorphine hcl-naloxone hcl dihydrate SUBL 2 MG-8 MG</i>	P	Opioid Smart PA; QL(3 EA daily); AL(At least 16 yrs old)
<i>buprenorphine hcl-naloxone hcl dihydrate SUBL 0.5 MG-2 MG</i>	P	Opioid Smart PA; QL(12 EA daily); AL(At least 16 yrs old)
<i>buprenorphine hcl SUBL</i>	P	Opioid Smart PA
<i>buprenorphine PTWK</i>	NP	Brand Preferred; Opioid Smart PA
<i>butorphanol tartrate NA 10 MG/ML</i>	NP	Opioid Smart PA

Drug Name	Drug Tier	Requirements/ Limits
BUTRANS PTWK (<i>buprenorphine</i>)	P	Brand Preferred; Opioid Smart PA
<i>pentazocine w/ naloxone hcl</i>	NP	Opioid Smart PA
SUBLOCADE SOSY	P	Opioid Smart PA; SP
SUBOXONE FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	P	Brand Preferred; Opioid Smart PA; QL(3 EA daily); AL(At least 16 yrs old)
SUBOXONE FILM SL 3 MG-12 MG (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	P	Brand Preferred; Opioid Smart PA; QL(2 EA daily); AL(At least 16 yrs old)
ZUBSOLV SUBL	NP	Opioid Smart PA; AL(At least 16 yrs old)
ANDROGENS-ANABOLIC - Drugs to Regulate Hormones		
Androgens		
ANDROGEL PUMP GEL TD (<i>testosterone</i>)	NP	
<i>methyltestosterone TABS</i>	C	
NATESTO GEL NA	NP	
TESTIM GEL TD (<i>testosterone</i>)	PA	Brand Preferred; PA
<i>testosterone cypionate SOLN IM 200 MG/ML</i>	C	QL(4 ML per 31 day(s) retail)
<i>testosterone cypionate SOLN IM 100 MG/ML</i>	C	QL(0.2858 ML daily)
<i>testosterone enanthate SOLN IM</i>	C	QL(0.1429 ML daily)
<i>testosterone GEL TD 1.62 %, 1.62 %</i>	PA	PA
<i>testosterone GEL TD 1 %, 50 MG/5GM</i>	NP	Brand Preferred

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>testosterone GEL TD 1 %, 10 MG/ACT, 20.25 MG/1.25GM, 25 MG/2.5GM, 40.5 MG/2.5GM</i>	NP	
<i>testosterone SOLN</i>	NP	
VOGELXO PUMP GEL TD (<i>testosterone</i>)	NP	
VOGELXO GEL TD (<i>testosterone</i>)	NP	
ANORECTAL AND RELATED PRODUCTS - Rectal Drugs to Treat Pain, Swelling and Itching		
Intrarectal Steroids		
<i>budesonide (intrarectal)</i>	NP	
<i>hydrocortisone (intrarectal)</i>	C	
Rectal Steroids		
<i>hydrocortisone (rectal) EX 1 %</i>	C	1 package(s) per fill retail; RX/OTC
<i>hydrocortisone (rectal) EX 2.5 %</i>	C	
PREPARATION H EX 1 %	C	1 package(s) per fill retail; RX/OTC
PREPARATION H SOOTHING RELIEF EX 1 %	C	1 package(s) per fill retail; RX/OTC
ANTACIDS		
Antacid Combinations		
<i>alum & mag hydrox-simethicone LIQD</i>	C	QL(24 ML daily)
<i>alum & mag hydrox-simethicone SUSP 1200 MG/30ML-120 MG/30ML-1200 MG/30ML, 200 MG/5ML-20 MG/5ML-200 MG/5ML, 400 MG/10ML-40 MG/10ML-400 MG/10ML</i>	C	QL(24 ML daily)
Antacids - Aluminum Salts		

Drug Name	Drug Tier	Requirements/ Limits
ALUMINUM HYDROXIDE GEL SUSP	C	
Antacids - Bicarbonate		
<i>sodium bicarbonate (antacid) TABS 325 MG, 650 MG</i>	C	QL(3.34 EA daily)
Antacids - Calcium Salts		
<i>calcium carbonate (antacid) CHEW 500 MG</i>	C	
Antacids - Magnesium Salts		
<i>magnesium oxide TABS 400 MG</i>	C	
ANTHELMINTICS - Drugs to Treat Worm Infections		
Anthelmintics		
EMVERM CHEW	C	QL(1 EA per fill retail)
ANTIANGINAL AGENTS - Drugs to Treat Chest Pain		
Antianginals-Other		
<i>ranolazine TB12</i>	P	
Nitrates		
<i>isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG</i>	C	
<i>isosorbide mononitrate TABS</i>	C	QL(2 EA daily)
ISOSORBIDE MONONITRATE TABS	C	QL(2 EA daily)
<i>isosorbide mononitrate TB24</i>	C	QL(1 EA daily)
NITRO-BID OINT	C	
<i>nitroglycerin CPCR</i>	C	
<i>nitroglycerin PT24</i>	C	
<i>nitroglycerin SUBL</i>	C	
ANTIANXIETY AGENTS - Drugs to Treat Anxiety		
Antianxiety Agents - Misc.		

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>buspirone hcl 7.5 MG, 30 MG</i>	C	QL(3 EA daily)
<i>buspirone hcl 15 MG</i>	C	QL(4 EA daily)
<i>buspirone hcl 5 MG, 10 MG</i>	C	QL(6 EA daily)
<i>hydroxyzine hcl SYRP</i>	C	
<i>hydroxyzine hcl TABS</i>	C	
<i>hydroxyzine pamoate CAPS</i>	C	
<i>meprobamate</i>	C	
Benzodiazepines		
<i>alprazolam TABS</i>	C	QL(3 EA daily)
<i>chlordiazepoxide hcl CAPS</i>	C	QL(4 EA daily)
<i>clorazepate dipotassium TABS</i>	C	QL(3 EA daily)
<i>diazepam SOLN PO 5 MG/5ML</i>	C	
<i>diazepam TABS</i>	C	QL(4 EA daily)
<i>lorazepam TABS 0.5 MG, 2 MG</i>	C	QL(3 EA daily)
<i>lorazepam TABS 1 MG</i>	C	QL(4 EA daily)
<i>oxazepam CAPS</i>	C	QL(4 EA daily)
ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms		
Antiarrhythmics Type I-A		
<i>disopyramide phosphate CAPS</i>	C	
<i>NORPACE CR CP12 150 MG</i>	C	
<i>quinidine gluconate TBCR</i>	C	
<i>quinidine sulfate TABS</i>	C	
Antiarrhythmics Type I-B		
<i>mexiletine hcl</i>	C	
Antiarrhythmics Type I-C		
<i>flecainide acetate</i>	C	
<i>propafenone hcl CP12</i>	C	

Drug Name	Drug Tier	Requirements/ Limits
<i>propafenone hcl TABS</i>	C	
Antiarrhythmics Type III		
<i>amiodarone hcl TABS 200 MG</i>	C	
<i>dofetilide</i>	C	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions		
Antiasthmatic - Monoclonal Antibodies		
<i>FASENRA PEN SOAJ</i>	PA	SP; PA
<i>FASENRA SOSY</i>	PA	SP; PA
<i>NUCALA SOAJ</i>	NP	SP
<i>NUCALA SOLR</i>	NP	SP
<i>NUCALA SOSY</i>	NP	SP
<i>TEZSPIRE SOAJ</i>	NP	SP
<i>TEZSPIRE SOSY</i>	NP	SP
<i>XOLAIR SOAJ</i>	PA	SP; PA
<i>XOLAIR SOSY</i>	PA	SP; PA
<i>XOLAIR SOSY 75 MG/0.5ML, 150 MG/ML</i>	PA	PA
Anti-Inflammatory Agents		
<i>cromolyn sodium NEBU</i>	C	QL(8 ML daily)
Bronchodilators - Anticholinergics		
<i>ATROVENT HFA</i>	P	1 package(s) per 31 day(s) retail
<i>INCRUSE ELLIPTA</i>	P	1 package(s) per 31 day(s) retail
<i>ipratropium bromide SOLN 0.02 %</i>	P	QL(375 ML per 25 day(s) retail)
<i>SPIRIVA HANDIHALER CAPS IN (tiotropium bromide)</i>	P	Brand Preferred
<i>SPIRIVA RESPIMAT AERS IN</i>	NP	
<i>tiotropium bromide CAPS IN 18 MCG</i>	NP	Brand Preferred

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
TUDORZA PRESSAIR	NP	1 package(s) per 31 day(s) retail
YUPELRI	NP	
Leukotriene Modulators		
ACCOLATE (<i>zafirlukast</i>)	NP	
<i>montelukast sodium CHEW</i>	P	QL(1 EA daily)
<i>montelukast sodium PACK</i>	P	QL(1 EA daily)
<i>montelukast sodium TABS</i>	P	QL(1 EA daily)
SINGULAIR CHEW (<i>montelukast sodium</i>)	NP	QL(1 EA daily)
SINGULAIR TABS (<i>montelukast sodium</i>)	NP	QL(1 EA daily)
<i>zafirlukast</i>	P	
<i>zileuton TB12</i>	NP	
ZYFLO TABS	NP	
Phosphodiesterase 3 & 4 (PDE3 & PDE4) Inhibitors		
OHTUVAYRE	NP	SP
Selective Phosphodiesterase 4 (PDE4) Inhibitors		
DALIRESP (<i>roflumilast</i>)	NP	QL(1 EA daily)
<i>roflumilast</i>	NP	QL(1 EA daily)
Steroid Inhalants		
ALVESCO	P	
ARNUITY ELLIPTA 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT (<i>fluticasone furoate (inhalation)</i>)	P	Brand Preferred; QL(1 EA daily)
ASMANEX (120 METERED DOSES) AEPB	P	
ASMANEX (14 METERED DOSES) AEPB	P	
ASMANEX (30 METERED DOSES) AEPB	P	

Drug Name	Drug Tier	Requirements/ Limits
ASMANEX (60 METERED DOSES) AEPB	P	
ASMANEX HFA AERO	P	QL(0.44 GM daily)
<i>budesonide (inhalation) SUSP 1 MG/2ML</i>	P	QL(60 ML per 31 day(s) retail); AL(Up to 8 yrs old)
<i>budesonide (inhalation) SUSP 0.25 MG/2ML, 0.5 MG/2ML</i>	P	QL(120 ML per fill retail); AL(Up to 8 yrs old)
<i>fluticasone furoate (inhalation) 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT</i>	NP	QL(1 EA daily)
<i>fluticasone propionate (inhalation) AEPB</i>	NP	
<i>fluticasone propionate hfa 110 MCG/ACT, 220 MCG/ACT</i>	P	QL(12 GM per 25 day(s) retail)
<i>fluticasone propionate hfa 44 MCG/ACT</i>	P	QL(11 GM per 25 day(s) retail)
PULMICORT FLEXHALER AEPB	P	1 package(s) per fill retail
PULMICORT SUSP 0.25 MG/2ML, 0.5 MG/2ML (<i>budesonide (inhalation)</i>)	NP	QL(120 ML per fill retail); AL(Up to 8 yrs old)
PULMICORT SUSP 1 MG/2ML (<i>budesonide (inhalation)</i>)	NP	QL(60 ML per 31 day(s) retail); AL(Up to 8 yrs old)
QVAR REDHALER 80 MCG/ACT	P	QL(0.72 GM daily)
QVAR REDHALER 40 MCG/ACT	P	QL(0.36 GM daily)
Sympathomimetics		
ADVAIR DISKUS AEPB (<i>fluticasone-salmeterol</i>)	P	Brand Preferred; QL(60 EA per 30 day(s) retail); AL(At least 4 yrs old)
ADVAIR HFA AERO (<i>fluticasone-salmeterol</i>)	P	Brand Preferred

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
AIRDUO RESPICLICK 113/14 AEPB (<i>fluticasone-salmeterol</i>)	NP		<i>budesonide-formoterol fumarate dihydrate</i>	NP	Brand Preferred; QL(30.9 GM per 30 day(s) retail)
AIRDUO RESPICLICK 232/14 AEPB (<i>fluticasone-salmeterol</i>)	NP		<i>budesonide-formoterol fumarate dihydrate</i>	NP	Brand Preferred; QL(30.6 GM per 30 day(s) retail)
AIRDUO RESPICLICK 55/14 AEPB (<i>fluticasone-salmeterol</i>)	NP		COMBIVENT RESPIMAT AERS	P	QL(4 GM per 31 day(s) retail)
AIRSUPRA	NP		DUAKLIR PRESSAIR	NP	
<i>albuterol sulfate AERS</i>	P	QL(13.4 GM per 30 day(s) retail)	DULERA	P	QL(39 GM per 30 day(s) retail)
<i>albuterol sulfate AERS</i>	P	QL(36 GM per 30 day(s) retail; 36 GM per 30 days mail)	DULERA 100 MCG/ACT-5 MCG/ACT, 200 MCG/ACT-5 MCG/ACT	P	QL(26.4 GM per 30 day(s) retail)
<i>albuterol sulfate AERS</i>	P	QL(17 GM per 30 day(s) retail; 17 GM per 30 days mail)	<i>fluticasone furoate-vilanterol</i>	NP	
<i>albuterol sulfate NEBU</i>	P		<i>fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT</i>	NP	Brand Preferred; QL(60 EA per 30 day(s) retail); AL(At least 4 yrs old)
<i>albuterol sulfate NEBU 0.083 %</i>	P	QL(12.5 ML daily)	<i>fluticasone-salmeterol AEPB 113 MCG/ACT-14 MCG/ACT, 232 MCG/ACT-14 MCG/ACT, 55 MCG/ACT-14 MCG/ACT</i>	NP	
<i>albuterol sulfate NEBU 0.63 MG/3ML, 1.25 MG/3ML</i>	P	QL(375 ML per 31 day(s) retail)	<i>fluticasone-salmeterol AERO</i>	NP	
<i>albuterol sulfate SYRP</i>	P		<i>formoterol fumarate NEBU</i>	NP	
<i>albuterol sulfate TABS</i>	P		<i>ipratropium-albuterol SOLN</i>	P	QL(12 ML daily)
ANORO ELLIPTA 25 MCG/ACT-62.5 MCG/ACT (<i>umeclidinium-vilanterol</i>)	P	Brand Preferred	<i>levalbuterol hcl</i>	NP	
<i>arformoterol tartrate</i>	P		<i>levalbuterol tartrate</i>	NP	QL(0.5 GM daily; 30 GM per 30 day(s) retail)
BEVESPI AEROSPHERE	NP		PERFOROMIST NEBU (<i>formoterol fumarate</i>)	NP	
BREO ELLIPTA	NP				
BREO ELLIPTA (<i>fluticasone furoate-vilanterol</i>)	NP				
BREZTRI AEROSPHERE	NP				
BROVANA (<i>arformoterol tartrate</i>)	NP				

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
PROAIR RESPICLICK AEPB	P	QL(2 EA per 30 day(s) retail)
SEREVENT DISKUS	P	1 package(s) per fill retail
STIOLTO RESPIMAT	P	
STRIVERDI RESPIMAT	NP	
SYMBICORT 80 MCG/ACT-4.5 MCG/ACT (<i>budesonide-formoterol fumarate dihydrate</i>)	P	Brand Preferred; QL(20.7 GM per 30 day(s) retail)
SYMBICORT 160 MCG/ACT-4.5 MCG/ACT (<i>budesonide-formoterol fumarate dihydrate</i>)	P	Brand Preferred; QL(18 GM per 30 day(s) retail)
SYMBICORT (<i>budesonide-formoterol fumarate dihydrate</i>)	P	Brand Preferred; QL(30.6 GM per 30 day(s) retail)
<i>terbutaline sulfate TABS</i>	NP	ST
TRELEGY ELLIPTA	NP	
<i>umeclidinium-vilanterol</i>	NP	
VENTOLIN HFA AERS (<i>albuterol sulfate</i>)	P	QL(36 GM per 30 day(s) retail)
VENTOLIN HFA AERS (<i>albuterol sulfate</i>)	P	QL(16 GM per 30 day(s) retail)
XOPENEX HFA (<i>levalbuterol tartrate</i>)	NP	QL(0.5 GM daily; 30 GM per 30 day(s) retail)
Xanthines		
THEO-24 CP24	C	
<i>theophylline ELIX</i>	C	
<i>theophylline SOLN</i>	C	QL(475 ML per fill retail)
<i>theophylline TB12 300 MG, 450 MG</i>	C	
<i>theophylline TB24</i>	C	
ANTICOAGULANTS - Blood Thinners		
Coumarin Anticoagulants		
<i>warfarin sodium TABS</i>	P	

Drug Name	Drug Tier	Requirements/ Limits
Direct Factor Xa Inhibitors		
ELIQUIS (1.5 MG PACK) TBSO PO	P	
ELIQUIS (2 MG PACK) TBSO PO	P	
ELIQUIS DVT/PE STARTER PACK TBPk	P	QL(2.47 EA daily)
ELIQUIS CPSP PO 0.15 MG	P	
ELIQUIS TABS	P	QL(2 EA daily)
ELIQUIS TBSO PO 0.5 MG	P	
<i>rivaroxaban SUSR 1 MG/ML</i>	NP	Brand Preferred
<i>rivaroxaban TABS 2.5 MG</i>	NP	Brand Preferred
SAVAYSA	NP	
XARELTO STARTER PACK TBPk	P	
XARELTO SUSR 1 MG/ML (<i>rivaroxaban</i>)	P	Brand Preferred
XARELTO TABS 2.5 MG, 10 MG, 15 MG, 20 MG (<i>rivaroxaban</i>)	P	Brand Preferred
XARELTO TABS	P	Brand Preferred
Heparins And Heparinoid-Like Agents		
ARIXTRA (<i>fondaparinux sodium</i>)	NP	SP
<i>enoxaparin sodium SOLN IJ 300 MG/3ML</i>	P	QL(126 ML per 180 day(s) retail); SP
<i>enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML</i>	P	QL(33.6 ML per 180 day(s) retail); SP
<i>enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML</i>	P	QL(42 ML per 180 day(s) retail); SP
<i>enoxaparin sodium SOSY 40 MG/0.4ML</i>	P	QL(16.8 ML per 180 day(s) retail); SP
<i>enoxaparin sodium SOSY 30 MG/0.3ML</i>	P	QL(12.6 ML per 180 day(s) retail); SP

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>enoxaparin sodium SOSY 60 MG/0.6ML</i>	P	QL(25.2 ML per 180 day(s) retail); SP	LOVENOX SOSY 40 MG/0.4ML (<i>enoxaparin sodium</i>)	NP	QL(16.8 ML per 180 day(s) retail); SP
<i>fondaparinux sodium</i>	NP	SP	LOVENOX SOSY 40 MG/0.4ML (<i>enoxaparin sodium</i>)	NP	Max 42 syringes in 180 days; QL(16.8 ML per 180 day(s) retail); SP
FRAGMIN SOLN 10000 UNIT/4ML, 95000 UNIT/3.8ML	NP	SP	LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML (<i>enoxaparin sodium</i>)	NP	QL(33.6 ML per 180 day(s) retail); SP
FRAGMIN SOSY	NP	SP	LOVENOX SOSY 60 MG/0.6ML (<i>enoxaparin sodium</i>)	NP	Max 42 syringes in 180 days; QL(25.2 ML per 180 day(s) retail); SP
<i>heparin sodium (porcine) SOLN IJ 1000 UNIT/ML, 5000 UNIT/0.5ML, 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML</i>	C		LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML (<i>enoxaparin sodium</i>)	NP	Max 42 syringes in 180 days; QL(33.6 ML per 180 day(s) retail); SP
HEPARIN SODIUM (PORCINE) SOSY IJ	C		Thrombin Inhibitors		
LOVENOX SOLN IJ 300 MG/3ML (<i>enoxaparin sodium</i>)	NP	Max 42 syringes in 180 days; QL(126 ML per 180 day(s) retail); SP	<i>dabigatran etexilate mesylate CAPS</i>	NP	Brand Preferred
LOVENOX SOLN IJ 300 MG/3ML (<i>enoxaparin sodium</i>)	NP	QL(126 ML per 180 day(s) retail); SP	PRADAXA CAPS (<i>dabigatran etexilate mesylate</i>)	P	Brand Preferred
LOVENOX SOSY 100 MG/ML, 150 MG/ML (<i>enoxaparin sodium</i>)	NP	QL(42 ML per 180 day(s) retail); SP	PRADAXA PACK	NP	SP
LOVENOX SOSY 60 MG/0.6ML (<i>enoxaparin sodium</i>)	NP	QL(25.2 ML per 180 day(s) retail); SP	ANTICONVULSANTS - Drugs to Treat Seizures		
LOVENOX SOSY 100 MG/ML, 150 MG/ML (<i>enoxaparin sodium</i>)	NP	Max 42 syringes in 180 days; QL(42 ML per 180 day(s) retail); SP	AMPA Glutamate Receptor Antagonists		
LOVENOX SOSY 30 MG/0.3ML (<i>enoxaparin sodium</i>)	NP	Max 42 syringes in 180 days; QL(12.6 ML per 180 day(s) retail); SP	FYCOMPA SUSP 0.5 MG/ML (<i>perampanel</i>)	PA	Brand Preferred; PA
LOVENOX SOSY 30 MG/0.3ML (<i>enoxaparin sodium</i>)	NP	QL(12.6 ML per 180 day(s) retail); SP	FYCOMPA TABS 2 MG, 4 MG, 6 MG, 8 MG, 10 MG, 12 MG (<i>perampanel</i>)	PA	Brand Preferred; PA
			<i>perampanel TABS 2 MG, 4 MG, 6 MG, 8 MG, 10 MG, 12 MG</i>	NP	Brand Preferred
			Anticonvulsants - Benzodiazepines		
			<i>clobazam SUSP</i>	P	PA

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>clobazam TABS</i>	P		DIACOMIT CAPS 250 MG	NP	QL(12 EA daily); SP
<i>clobazam TABS</i>	P	PA	DIACOMIT CAPS 500 MG	NP	QL(6 EA daily); SP
<i>clonazepam TABS</i>	C	QL(4 EA daily)	DIACOMIT PACK 500 MG	NP	QL(6 EA daily); SP
<i>diazepam (anticonvulsant) GEL 10 MG, 20 MG</i>	P	QL(1 EA per fill retail); AL(At least 2 yrs old)	DIACOMIT PACK 250 MG	NP	QL(12 EA daily); SP
LIBERVANT FILM	NP		ELEPSIA XR TB24	NP	
NAYZILAM	P	QL(10 EA per 30 day(s) retail)	EPIDIOLEX	NP	SP
ONFI SUSP (<i>clobazam</i>)	NP		EPRONTIA SOLN 25 MG/ML (<i>topiramate</i>)	NP	
ONFI TABS (<i>clobazam</i>)	NP		<i>eslicarbazepine acetate</i> 200 MG, 400 MG, 600 MG, 800 MG	NP	
SYMPAZAN FILM	NP		FINTEPLA	NP	SP
VALTOCO 10 MG DOSE LIQD	P	QL(10 EA per 30 day(s) retail)	<i>gabapentin CAPS</i>	P	QL(9 EA daily)
VALTOCO 15 MG DOSE LQPK 7.5 MG/0.1ML	P	QL(10 EA per 30 day(s) retail)	<i>gabapentin SOLN</i>	P	
VALTOCO 20 MG DOSE LQPK 10 MG/0.1ML	P	QL(10 EA per 30 day(s) retail)	<i>gabapentin TABS 600 MG</i>	P	QL(6 EA daily)
VALTOCO 5 MG DOSE LIQD	P	QL(10 EA per 30 day(s) retail)	<i>gabapentin TABS 800 MG</i>	P	QL(4 EA daily)
Anticonvulsants - Misc.			GABARONE TABS 100 MG, 400 MG	NP	
APTOM 200 MG, 400 MG, 600 MG, 800 MG (<i>eslicarbazepine acetate</i>)	NP		KEPPRA XR TB24 (<i>levetiracetam</i>)	NP	
BANZEL SUSP (<i>rufinamide</i>)	NP	SP; PA	KEPPRA SOLN PO 100 MG/ML (<i>levetiracetam</i>)	NP	QL(16 ML daily)
BANZEL TABS (<i>rufinamide</i>)	PA	Brand Preferred; SP; PA	KEPPRA TABS 500 MG (<i>levetiracetam</i>)	NP	QL(6 EA daily)
BRIVIACT SOLN PO 10 MG/ML	NP	SP	KEPPRA TABS 250 MG, 750 MG (<i>levetiracetam</i>)	NP	QL(4 EA daily)
BRIVIACT TABS	NP	SP	KEPPRA TABS 1000 MG (<i>levetiracetam</i>)	NP	
<i>carbamazepine CHEW</i>	P		<i>lacosamide SOLN PO 10 MG/ML, 50 MG/5ML, 100 MG/10ML</i>	P	
<i>carbamazepine CP12</i>	NP	Brand Preferred	<i>lacosamide TABS</i>	P	
<i>carbamazepine SUSP</i>	NP		LAMICTAL ODT KIT (<i>lamotrigine</i>)	NP	
<i>carbamazepine TABS</i>	P		LAMICTAL ODT TBDP (<i>lamotrigine</i>)	NP	
<i>carbamazepine TB12</i>	NP	Brand Preferred	LAMICTAL STARTER KIT 25 MG (<i>lamotrigine</i>)	NP	
CARBATROL CP12 (<i>carbamazepine</i>)	P	Brand Preferred			

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
LAMICTAL XR KIT	NP		OXTELLAR XR TB24 (oxcarbazepine)	NP	
LAMICTAL XR TB24 (lamotrigine)	NP	QL(1 EA daily)	pregabalin CAPS	P	
LAMICTAL CHEW (lamotrigine)	NP		pregabalin SOLN	NP	
LAMICTAL TABS (lamotrigine)	NP		primidone	P	
lamotrigine CHEW	P		QUDEXY XR CS24 (topiramate)	NP	
lamotrigine KIT 25 MG	NP		rufinamide SUSP	PA	SP; PA
lamotrigine TABS	NP		rufinamide SUSP	PA	PA
lamotrigine TABS	P		rufinamide TABS	NP	Brand Preferred; SP
lamotrigine TB24	P	QL(1 EA daily)	SPRITAM TB3D	NP	
lamotrigine TBDP	P		SPRITAM TB3D	NP	
levetiracetam SOLN PO 100 MG/ML, 500 MG/5ML	P	QL(16 ML daily)	SUBVENITE SUSP PO 10 MG/ML	NP	
levetiracetam TABS 500 MG	P	QL(6 EA daily)	TEGRETOL SUSP (carbamazepine)	NP	
levetiracetam TABS 250 MG, 750 MG	P	QL(4 EA daily)	TEGRETOL TABS (carbamazepine)	NP	
levetiracetam TABS 1000 MG	P		TEGRETOL-XR TB12 (carbamazepine)	P	Brand Preferred
levetiracetam TB24	P		TOPAMAX SPRINKLE CPSP 25 MG (topiramate)	NP	QL(8 EA daily)
LEVETIRACETAM TB3D	NP		TOPAMAX SPRINKLE CPSP 15 MG (topiramate)	NP	QL(6 EA daily)
LYRICA CAPS (pregabalin)	NP		TOPAMAX TABS 200 MG (topiramate)	NP	QL(2 EA daily)
LYRICA SOLN (pregabalin)	NP		TOPAMAX TABS 25 MG, 50 MG (topiramate)	NP	QL(6 EA daily)
MOTPOLY XR CP24	NP		TOPAMAX TABS 100 MG (topiramate)	NP	QL(4 EA daily)
NEURONTIN CAPS (gabapentin)	NP	QL(9 EA daily)	topiramate CP24	NP	
NEURONTIN SOLN (gabapentin)	NP		topiramate CPSP 25 MG	P	QL(8 EA daily)
NEURONTIN TABS 600 MG (gabapentin)	NP	QL(6 EA daily)	topiramate CPSP 50 MG	P	
NEURONTIN TABS 800 MG (gabapentin)	NP	QL(4 EA daily)	topiramate CPSP 15 MG	P	QL(6 EA daily)
oxcarbazepine SUSP	NP	Brand Preferred	topiramate CS24	NP	
oxcarbazepine TABS	P		topiramate SOLN 25 MG/ML	NP	
oxcarbazepine TB24	NP		topiramate TABS 200 MG	P	QL(2 EA daily)
			topiramate TABS 25 MG, 50 MG	P	QL(6 EA daily)

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>topiramate TABS 100 MG</i>	P	QL(4 EA daily)	DILANTIN (<i>phenytoin sodium extended</i>)	NP	
TRILEPTAL SUSP (<i>oxcarbazepine</i>)	P	Brand Preferred	DILANTIN	NP	
TRILEPTAL TABS (<i>oxcarbazepine</i>)	NP		DILANTIN INFATABS CHEW (<i>phenytoin</i>)	NP	
TROKENDI XR CP24 (<i>topiramate</i>)	NP		DILANTIN-125 SUSP (<i>phenytoin</i>)	NP	
VIMPAT SOLN PO 10 MG/ML (<i>lacosamide</i>)	NP	PA	<i>phenytoin sodium extended 200 MG, 300 MG</i>	NP	
VIMPAT TABS (<i>lacosamide</i>)	NP	PA	<i>phenytoin sodium extended 100 MG, 200 MG, 300 MG</i>	P	
ZONISADE SUSP	NP		<i>phenytoin CHEW</i>	P	
<i>zonisamide CAPS</i>	P		<i>phenytoin SUSP 125 MG/5ML</i>	P	
ZTALMY	NP		Succinimides		
Carbamates			CELONTIN (<i>methsuximide</i>)	P	Brand Preferred
<i>felbamate SUSP</i>	P		<i>ethosuximide CAPS</i>	P	
<i>felbamate TABS</i>	P		<i>ethosuximide SOLN</i>	P	
FELBATOL TABS (<i>felbamate</i>)	NP		<i>methsuximide</i>	NP	Brand Preferred
XCOPRI (250 MG DAILY DOSE) TBPk	NP		ZARONTIN CAPS (<i>ethosuximide</i>)	NP	
XCOPRI (350 MG DAILY DOSE) TBPk	NP		ZARONTIN SOLN (<i>ethosuximide</i>)	NP	
XCOPRI TABS	NP		Valproic Acid		
XCOPRI TBPk	NP		DEPAKOTE ER TB24 500 MG (<i>divalproex sodium</i>)	NP	QL(7 EA daily)
GABA Modulators			DEPAKOTE ER TB24 250 MG (<i>divalproex sodium</i>)	NP	QL(3 EA daily)
SABRIL PACK (<i>vigabatrin</i>)	PA	Brand Preferred; SP; PA	DEPAKOTE SPRINKLES CSDR (<i>divalproex sodium</i>)	NP	QL(8 EA daily)
SABRIL TABS (<i>vigabatrin</i>)	NP	SP; PA	DEPAKOTE TBEC 500 MG (<i>divalproex sodium</i>)	NP	QL(7 EA daily)
<i>tiagabine hcl</i>	PA	PA	DEPAKOTE TBEC 250 MG (<i>divalproex sodium</i>)	NP	QL(3 EA daily)
<i>vigabatrin PACK</i>	NP	Brand Preferred; SP	DEPAKOTE TBEC 125 MG (<i>divalproex sodium</i>)	NP	QL(2 EA daily)
<i>vigabatrin PACK</i>	PA	Brand Preferred; SP; PA			
<i>vigabatrin TABS</i>	NP	SP			
<i>vigabatrin TABS</i>	PA	SP; PA			
VIGAFYDE SOLN	NP	SP			
Hydantoins					

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>divalproex sodium CSDR</i>	P	QL(8 EA daily)
<i>divalproex sodium TB24 250 MG</i>	P	QL(3 EA daily)
<i>divalproex sodium TB24 500 MG</i>	P	QL(7 EA daily)
<i>divalproex sodium TBEC 250 MG</i>	P	QL(3 EA daily)
<i>divalproex sodium TBEC 500 MG</i>	P	QL(7 EA daily)
<i>divalproex sodium TBEC 125 MG</i>	P	QL(2 EA daily)
<i>valproate sodium SOLN IV 100 MG/ML, 500 MG/5ML</i>	C	PA
<i>valproate sodium SOLN PO 250 MG/5ML, 500 MG/10ML</i>	P	
<i>valproic acid CAPS</i>	P	
ANTIDEPRESSANTS - Drugs to Treat Depression		
Alpha-2 Receptor Antagonists (Tetracyclics)		
<i>mirtazapine TABS 30 MG</i>	P	QL(1.5 EA daily)
<i>mirtazapine TABS 7.5 MG, 45 MG</i>	P	QL(1 EA daily)
<i>mirtazapine TABS 15 MG</i>	P	QL(3 EA daily)
<i>mirtazapine TBDP 30 MG</i>	P	QL(1.5 EA daily)
<i>mirtazapine TBDP 15 MG</i>	P	QL(3 EA daily)
<i>mirtazapine TBDP 45 MG</i>	P	QL(1 EA daily)
REMERON SOLTAB TBDP 15 MG (<i>mirtazapine</i>)	NP	QL(3 EA daily)
REMERON SOLTAB TBDP 30 MG (<i>mirtazapine</i>)	NP	QL(1.5 EA daily)
REMERON SOLTAB TBDP 45 MG (<i>mirtazapine</i>)	NP	QL(1 EA daily)
REMERON TABS 15 MG (<i>mirtazapine</i>)	NP	QL(3 EA daily)
REMERON TABS 30 MG (<i>mirtazapine</i>)	NP	QL(1.5 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
Antidepressant Combinations		
AUVELITY	NP	
Antidepressants - Misc.		
<i>bupropion hcl TABS</i>	P	QL(3 EA daily)
<i>bupropion hcl TB12 100 MG</i>	P	QL(4 EA daily)
<i>bupropion hcl TB12 150 MG</i>	P	QL(3 EA daily)
<i>bupropion hcl TB12 200 MG</i>	P	QL(2 EA daily)
<i>bupropion hcl TB24 450 MG</i>	NP	
<i>bupropion hcl TB24 150 MG</i>	P	QL(3 EA daily)
<i>bupropion hcl TB24 300 MG</i>	P	QL(1 EA daily)
FORFIVO XL TB24 (<i>bupropion hcl</i>)	NP	
WELLBUTRIN SR TB12 150 MG (<i>bupropion hcl</i>)	NP	QL(3 EA daily)
WELLBUTRIN SR TB12 100 MG (<i>bupropion hcl</i>)	NP	QL(4 EA daily)
WELLBUTRIN SR TB12 200 MG (<i>bupropion hcl</i>)	NP	QL(2 EA daily)
GABA Receptor Modulator - Neuroactive Steroid		
ZURZUVAE	NP	SP
Monoamine Oxidase Inhibitors (MAOIs)		
EMSAM	NP	
MARPLAN	NP	
NARDIL (<i>phenelzine sulfate</i>)	NP	
<i>phenelzine sulfate</i>	P	
<i>tranylcypromine sulfate</i>	NP	
Selective Serotonin Reuptake Inhibitors (SSRIs)		
CELEXA TABS 40 MG (<i>citalopram hydrobromide</i>)	NP	QL(1 EA daily); AL(At least 7 yrs old)

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CELEXA TABS 20 MG (<i>citalopram hydrobromide</i>)	NP	QL(2 EA daily); AL(At least 7 yrs old)	FLUOXETINE HCL TABS (<i>fluoxetine hcl</i>)	NP	
CELEXA TABS 10 MG (<i>citalopram hydrobromide</i>)	NP	QL(4 EA daily)	<i>fluvoxamine maleate</i> CP24	NP	
CITALOPRAM HYDROBROMIDE CAPS	NP		<i>fluvoxamine maleate</i> TABS 100 MG	P	QL(3 EA daily)
<i>citalopram hydrobromide</i> SOLN	P		<i>fluvoxamine maleate</i> TABS 25 MG, 50 MG	P	QL(2 EA daily); AL(At least 7 yrs old)
<i>citalopram hydrobromide</i> TABS 20 MG	P	QL(2 EA daily); AL(At least 7 yrs old)	LEXAPRO TABS 10 MG (<i>escitalopram oxalate</i>)	NP	QL(2 EA daily); AL(At least 7 yrs old)
<i>citalopram hydrobromide</i> TABS 10 MG	P	QL(4 EA daily)	LEXAPRO TABS 5 MG (<i>escitalopram oxalate</i>)	NP	QL(4 EA daily)
<i>citalopram hydrobromide</i> TABS 40 MG	P	QL(1 EA daily); AL(At least 7 yrs old)	LEXAPRO TABS 20 MG (<i>escitalopram oxalate</i>)	NP	QL(1 EA daily); AL(At least 7 yrs old)
ESCITALOPRAM OXALATE CAPS PO 15 MG	NP		<i>paroxetine hcl</i> SUSP	NP	QL(40 ML daily)
<i>escitalopram oxalate</i> SOLN	NP		<i>paroxetine hcl</i> TABS 10 MG	P	QL(6 EA daily)
<i>escitalopram oxalate</i> TABS 5 MG	P	QL(4 EA daily)	<i>paroxetine hcl</i> TABS 30 MG, 40 MG	P	QL(2 EA daily); AL(At least 7 yrs old)
<i>escitalopram oxalate</i> TABS 20 MG	P	QL(1 EA daily); AL(At least 7 yrs old)	<i>paroxetine hcl</i> TABS 20 MG	P	QL(3 EA daily)
<i>escitalopram oxalate</i> TABS 10 MG	P	QL(2 EA daily); AL(At least 7 yrs old)	<i>paroxetine hcl</i> TB24	NP	QL(1 EA daily); AL(At least 7 yrs old)
<i>fluoxetine hcl</i> CAPS 40 MG	P	QL(2 EA daily); AL(At least 7 yrs old)	PAXIL CR TB24 (<i>paroxetine hcl</i>)	NP	QL(1 EA daily); AL(At least 7 yrs old)
<i>fluoxetine hcl</i> CAPS 10 MG, 20 MG	P	QL(4 EA daily)	PAXIL TABS 30 MG, 40 MG (<i>paroxetine hcl</i>)	NP	QL(2 EA daily); AL(At least 7 yrs old)
<i>fluoxetine hcl</i> CPDR	NP		PAXIL TABS 20 MG (<i>paroxetine hcl</i>)	NP	QL(3 EA daily)
<i>fluoxetine hcl</i> SOLN	P	QL(120 ML per fill retail)	PAXIL TABS 10 MG (<i>paroxetine hcl</i>)	NP	QL(6 EA daily)
<i>fluoxetine hcl</i> TABS 10 MG	P	QL(1 EA daily); AL(At least 7 yrs old)	PROZAC CAPS 40 MG (<i>fluoxetine hcl</i>)	NP	QL(2 EA daily); AL(At least 7 yrs old)
<i>fluoxetine hcl</i> TABS 20 MG	P	QL(4 EA daily)	PROZAC CAPS 10 MG, 20 MG (<i>fluoxetine hcl</i>)	NP	QL(4 EA daily)
<i>fluoxetine hcl</i> TABS 60 MG	NP		<i>sertraline hcl</i> CAPS 150 MG, 200 MG	NP	

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SERTRALINE HCL CAPS 150 MG, 200 MG (<i>sertraline hcl</i>)	NP		<i>desvenlafaxine succinate</i> 100 MG	P	QL(4 EA daily)
<i>sertraline hcl CONC</i>	NP	QL(186 ML per 31 day(s) retail)	<i>desvenlafaxine succinate</i> 25 MG, 50 MG	P	QL(1 EA daily)
<i>sertraline hcl TABS 25 MG, 50 MG</i>	P	QL(4 EA daily)	DRIZALMA SPRINKLE CSDR	NP	
<i>sertraline hcl TABS 100 MG</i>	P	QL(2 EA daily); AL(At least 7 yrs old)	<i>duloxetine hcl CPEP</i> 40 MG	NP	
ZOLOFT CONC (<i>sertraline hcl</i>)	NP	QL(186 ML per 31 day(s) retail)	<i>duloxetine hcl CPEP</i> 20 MG, 30 MG, 60 MG	P	QL(1 EA daily); AL(At least 7 yrs old)
ZOLOFT TABS 100 MG (<i>sertraline hcl</i>)	NP	QL(2 EA daily); AL(At least 7 yrs old)	EFFEXOR XR CP24 150 MG (<i>venlafaxine hcl</i>)	NP	QL(2 EA daily)
ZOLOFT TABS 25 MG, 50 MG (<i>sertraline hcl</i>)	NP	QL(4 EA daily)	EFFEXOR XR CP24 37.5 MG (<i>venlafaxine hcl</i>)	NP	QL(4 EA daily)
Serotonin Modulators			EFFEXOR XR CP24 75 MG (<i>venlafaxine hcl</i>)	NP	QL(5 EA daily)
EXXUA TITRATION PACK TB24 PO 18.2 MG	NP	AL(At least 18 yrs old)	FETZIMA TITRATION C4PK	NP	
EXXUA TB24 PO 18.2 MG, 36.3 MG, 54.5 MG, 72.6 MG	NP	AL(At least 18 yrs old)	FETZIMA CP24	NP	
<i>nefazodone hcl</i>	P		PRISTIQ 25 MG, 50 MG (<i>desvenlafaxine succinate</i>)	NP	QL(1 EA daily)
RALDESY SOLN PO 10 MG/ML	NP		PRISTIQ 100 MG (<i>desvenlafaxine succinate</i>)	NP	QL(4 EA daily)
<i>trazodone hcl TABS 50 MG, 100 MG, 150 MG</i>	P		VENLAFAXINE BESYLATE ER	NP	
<i>trazodone hcl TABS 300 MG</i>	P	QL(2 EA daily)	<i>venlafaxine hcl CP24</i> 150 MG	P	QL(2 EA daily)
TRINTELLIX	NP	QL(1 EA daily); AL(At least 18 yrs old)	<i>venlafaxine hcl CP24</i> 37.5 MG	P	QL(4 EA daily)
VIIBRYD TABS (<i>vilazodone hcl</i>)	NP	QL(1 EA daily)	<i>venlafaxine hcl CP24</i> 75 MG	P	QL(5 EA daily)
<i>vilazodone hcl TABS</i>	P	QL(1 EA daily)	<i>venlafaxine hcl TABS</i>	P	
Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)			<i>venlafaxine hcl TB24</i> 150 MG	NP	QL(1 EA daily)
CYMBALTA CPEP (<i>duloxetine hcl</i>)	NP	QL(1 EA daily); AL(At least 7 yrs old)	<i>venlafaxine hcl TB24</i> 37.5 MG, 75 MG, 225 MG	NP	QL(1 EA daily); AL(At least 7 yrs old)
DESVENLAFAXINE ER	NP		Tricyclic Agents		
			<i>amitriptyline hcl TABS</i>	C	

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>amoxapine</i>	C		<i>glyburide-metformin</i>	P	
<i>clomipramine hcl 75 MG</i>	C		GLYXAMBI	NP	
<i>desipramine hcl TABS 10 MG, 50 MG, 75 MG, 100 MG, 150 MG</i>	C		INVOKAMET XR TB24	NP	
<i>desipramine hcl TABS 25 MG</i>	C	QL(2 EA daily)	INVOKAMET TABS	P	ST
<i>doxepin hcl CAPS</i>	C		JANUMET XR TB24	NP	
<i>doxepin hcl CONC</i>	C		JANUMET TABS	P	ST
<i>imipramine hcl TABS</i>	C		JENTADUETO XR TB24	NP	
<i>nortriptyline hcl CAPS</i>	C		JENTADUETO TABS	P	ST
<i>nortriptyline hcl SOLN</i>	C	QL(20 ML daily)	KAZANO (<i>alogliptin-metformin hcl</i>)	NP	QL(2 EA daily)
ANTIDIABETICS - Drugs to Regulate Blood Sugar			OSENI 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG (<i>alogliptin-pioglitazone</i>)	NP	QL(1 EA daily)
Alpha-Glucosidase Inhibitors			<i>pioglitazone hcl-glimepiride</i>	NP	
<i>acarbose</i>	P		<i>pioglitazone hcl-metformin hcl TABS</i>	NP	QL(2 EA daily)
<i>miglitol</i>	NP		QTERN	NP	
Antidiabetic - Amylin Analogs			<i>saxagliptin-metformin hcl</i>	NP	QL(1 EA daily)
SYMLINPEN 120 SOPN	P	QL(11 ML per 31 day(s) retail; 11 ML per 31 days mail); ST	SEGLUROMET	NP	QL(2 EA daily)
SYMLINPEN 60 SOPN	P	QL(6 ML per 31 day(s) retail; 6 ML per 31 days mail); ST	SITAGLIPT BASE-METFORM HCL ER TB24	NP	
Antidiabetic Combinations			SITAGLIPTIN BASE-METFORMIN HCL TABS	NP	
ACTOPLUS MET TABS 850 MG-15 MG (<i>pioglitazone hcl-metformin hcl</i>)	NP	QL(2 EA daily)	SOLQUA	NP	QL(18 ML per 31 day(s) retail)
<i>alogliptin-metformin hcl</i>	NP	QL(2 EA daily)	STEGLUJAN	NP	
<i>alogliptin-pioglitazone 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG</i>	NP	QL(1 EA daily)	SYNJARDY XR TB24	NP	
<i>dapagliflozin propanediol-metformin hcl</i>	NP		SYNJARDY TABS	NP	
DUETACT (<i>pioglitazone hcl-glimepiride</i>)	NP		TRIJARDY XR	NP	
<i>glipizide-metformin hcl</i>	NP		XIGDUO XR (<i>dapagliflozin propanediol-metformin hcl</i>)	P	Brand Preferred
			XIGDUO XR 1000 MG-2.5 MG, 500 MG-10 MG, 500 MG-5 MG	P	Brand Preferred; ST
			XULTOPHY	NP	
			ZITUVIMET XR TB24	NP	
			ZITUVIMET TABS	NP	

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Biguanides			GLUCO TO GO CHEW	C	Limit 50 ea per 31 days retail; QL(50 EA per 31 day(s) retail)
<i>metformin hcl SOLN</i>	NP		GLUCOSE CHEW	C	Limit 50 ea per 31 days retail; QL(50 EA per 31 day(s) retail)
<i>metformin hcl TABS 1000 MG</i>	P	QL(2 EA daily)	GNP GLUCOSE CHEW	C	Limit 50 ea per 31 days retail; QL(50 EA per 31 day(s) retail)
<i>metformin hcl TABS 750 MG</i>	P		GVOKE HYPOPEN 1-PACK SOAJ	P	
<i>metformin hcl TABS 850 MG</i>	P	QL(3 EA daily)	GVOKE HYPOPEN 2-PACK SOAJ	P	
<i>metformin hcl TABS 500 MG</i>	P	QL(5 EA daily)	GVOKE KIT SOLN	NP	
<i>metformin hcl TABS 625 MG</i>	NP		GVOKE PFS SOSY 1 MG/0.2ML	NP	
<i>metformin hcl TB24 500 MG</i>	P	QL(4 EA daily)	PROGLYCEM (<i>diazoxide</i>)	P	Brand Preferred
<i>metformin hcl TB24 750 MG</i>	P	QL(3 EA daily)	TRUEPLUS GLUCOSE ON THE GO CHEW	C	Limit 50 ea per 31 days retail; QL(50 EA per 31 day(s) retail)
<i>metformin hcl TB24 500 MG, 1000 MG</i>	NP		TRUEPLUS GLUCOSE CHEW	C	Limit 50 ea per 31 days retail; QL(50 EA per 31 day(s) retail)
RIOMET SOLN (<i>metformin hcl</i>)	NP		ZEGALOGUE SOAJ	P	
Diabetic Other			ZEGALOGUE SOSY	P	
BAQSIMI ONE PACK POWD	P		Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
BAQSIMI TWO PACK POWD	P		<i>alogliptin benzoate</i>	NP	QL(1 EA daily)
CVS GLUCOSE CHEW	C	Limit 50 ea per 31 days retail; QL(50 EA per 31 day(s) retail)	BRYNOVIN SOLN PO 25 MG/ML	NP	
CVS SOFT GLUCOSE CHEW	C	Limit 50 ea per 31 days retail; QL(50 EA per 31 day(s) retail)	JANUVIA	P	ST
<i>diazoxide</i>	NP	Brand Preferred	NESINA (<i>alogliptin benzoate</i>)	NP	QL(1 EA daily)
FT GLUCOSE CHEW 4 GM	C	Limit 50 ea per 31 days retail; QL(50 EA per 31 day(s) retail)	<i>saxagliptin hcl</i>	NP	QL(1 EA daily)
GLUCAGON EMERGENCY	NP		SITAGLIPTIN	NP	
<i>glucagon SOLR IJ 1 MG</i>	P	QL(4 EA per 365 day(s) retail)	TRADJENTA	P	ST
			ZITUVIO	NP	
			Incretin Mimetic Agents		

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
BYDUREON BCISE AUIJ	NP	QL(3.4 ML per 28 day(s) retail)
BYETTA 10 MCG PEN SOPN 10 MCG/0.04ML (<i>exenatide</i>)	NP	QL(2.4 ML per 31 day(s) retail); AL(At least 18 yrs old)
BYETTA 5 MCG PEN SOPN 5 MCG/0.02ML (<i>exenatide</i>)	NP	QL(1.2 ML per 31 day(s) retail); AL(At least 18 yrs old)
<i>exenatide SOPN 5 MCG/0.02ML</i>	NP	QL(1.2 ML per 31 day(s) retail); AL(At least 18 yrs old)
<i>exenatide SOPN 10 MCG/0.04ML</i>	NP	QL(2.4 ML per 31 day(s) retail); AL(At least 18 yrs old)
<i>liraglutide</i>	NP	Brand Preferred; QL(12 ML per 28 day(s) retail); AL(At least 10 yrs old)
MOUNJARO	NP	
OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN	PA	PA
OZEMPIC (1 MG/DOSE) SOPN 4 MG/3ML	PA	PA
OZEMPIC (2 MG/DOSE) SOPN	PA	PA
TRULICITY	PA	QL(2 ML per 28 day(s) retail); PA
VICTOZA (<i>liraglutide</i>)	PA	Brand Preferred; QL(12 ML per 28 day(s) retail); AL(At least 10 yrs old); PA
Insulin		

Drug Name	Drug Tier	Requirements/ Limits
ADMELOG SOLOSTAR SOPN	NP	QL(30 ML per 31 day(s) retail; 30 ML per 31 days mail)
ADMELOG SOLN IJ	NP	QL(30 ML per 30 day(s) retail; 30 ML per 30 days mail)
AFREZZA POWD	NP	
APIDRA SOLOSTAR SOPN	P	
APIDRA SOLN	NP	
BASAGLAR KWIKPEN SOPN	NP	
FIASP FLEXTOUCH SOPN	NP	
FIASP PENFILL SOCT	NP	
FIASP SOLN	NP	
HUMALOG JUNIOR KWIKPEN SOPN	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)
HUMALOG KWIKPEN SOPN 200 UNIT/ML	P	USE BRAND NAME or Authorized Generic
HUMALOG KWIKPEN SOPN 100 UNIT/ML	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail; 30 ML per 31 days mail)
HUMALOG MIX 50/50 KWIKPEN SUPN	P	USE BRAND NAME or Authorized Generic
HUMALOG MIX 75/25 KWIKPEN SUPN	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
HUMALOG MIX 75/25 SUSP	P	USE BRAND NAME or Authorized Generic	INSULIN ASPART PENFILL SOCT	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)
HUMALOG TEMPO PEN SOPN	P	USE BRAND NAME or Authorized Generic	INSULIN ASPART PROT & ASPART SUSP	P	QL(40 ML per 31 day(s) retail)
HUMALOG SOCT	P	USE BRAND NAME or Authorized Generic	INSULIN ASPART SOLN IJ	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)
HUMALOG SOLN IJ	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 30 day(s) retail; 30 ML per 30 days mail)	INSULIN DEGLUDEC FLEXTOUCH SOPN 200 UNIT/ML	NP	QL(0.9 ML daily)
HUMULIN 70/30 KWIKPEN SUPN	P	QL(1 ML daily)	INSULIN DEGLUDEC FLEXTOUCH SOPN 100 UNIT/ML	NP	QL(1.5 ML daily)
HUMULIN 70/30 SUSP	P	Limit 40mls per month	INSULIN DEGLUDEC SOLN	NP	QL(1.5 ML daily)
HUMULIN N KWIKPEN SUPN	P	QL(1 ML daily)	INSULIN GLARGINE MAX SOLOSTAR SOPN	NP	
HUMULIN N SUSP	P	Limit 40mls per month	INSULIN GLARGINE SOLOSTAR SOPN 300 UNIT/ML	NP	
HUMULIN R U-500 (CONCENTRATED) SOLN SC	P		INSULIN GLARGINE-YFGN SOLN	NP	QL(30 ML per 31 day(s) retail; 30 ML per 31 days mail)
HUMULIN R U-500 KWIKPEN SOPN SC	P		INSULIN GLARGINE-YFGN SOPN	NP	QL(30 ML per 31 day(s) retail; 30 ML per 31 days mail)
HUMULIN R SOLN IJ	P	Limit 40mls per month	INSULIN LISPRO (1 UNIT DIAL) SOPN	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail; 30 ML per 31 days mail)
INSULIN ASP PROT & ASP FLEXPEN SUPN	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)			
INSULIN ASPART FLEXPEN SOPN	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)			

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
INSULIN LISPRO JUNIOR KWIKPEN SOPN	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)	NOVOLIN N FLEXPEN RELION SUPN	NP	QL(1 ML daily)
INSULIN LISPRO PROT & LISPRO SUPN	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)	NOVOLIN N FLEXPEN SUPN	NP	QL(1 ML daily)
INSULIN LISPRO SOLN IJ	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 30 day(s) retail; 30 ML per 30 days mail)	NOVOLIN N RELION SUSP	NP	
KIRSTY SOLN IJ 100 UNIT/ML	NP		NOVOLIN N SUSP	NP	Limit 40mls per month
KIRSTY SOPN SC 100 UNIT/ML	NP		NOVOLIN R FLEXPEN RELION SOPN IJ	NP	
LANTUS SOLOSTAR SOPN	P	Brand Preferred	NOVOLIN R FLEXPEN SOPN IJ	NP	
LANTUS SOLN	P	Brand Preferred	NOVOLIN R RELION SOLN IJ	NP	
LEVEMIR SOLN	P		NOVOLIN R SOLN IJ	NP	Limit 40mls per month
LYUMJEV KWIKPEN SOPN	NP		NOVOLOG 70/30 FLEXPEN RELION SUPN	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)
LYUMJEV TEMPO PEN SOPN	NP		NOVOLOG FLEXPEN RELION SOPN	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)
LYUMJEV SOLN	NP		NOVOLOG FLEXPEN SOPN	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)
MERILOG SOLOSTAR SOPN SC 100 UNIT/ML	NP		NOVOLOG MIX 70/30 FLEXPEN SUPN	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)
MERILOG SOLN SC 100 UNIT/ML	NP		NOVOLOG MIX 70/30 RELION SUSP	P	USE BRAND NAME or Authorized Generic
NOVOLIN 70/30 FLEXPEN RELION SUPN	NP	QL(1 ML daily)	NOVOLOG MIX 70/30 SUSP	P	USE BRAND NAME or Authorized Generic
NOVOLIN 70/30 FLEXPEN SUPN	NP	QL(1 ML daily)			
NOVOLIN 70/30 RELION SUSP	NP				
NOVOLIN 70/30 SUSP	NP	Limit 40mls per month			

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
NOVOLOG PENFILL SOCT	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)
NOVOLOG RELION SOLN IJ	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)
NOVOLOG SOLN IJ	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)
REZVOGLAR KWIKPEN	NP	
SEMGLEE (YFGN) SOLN	NP	QL(30 ML per 31 day(s) retail; 30 ML per 31 days mail)
SEMGLEE (YFGN) SOPN	NP	QL(30 ML per 31 day(s) retail; 30 ML per 31 days mail)
TOUJEO MAX SOLOSTAR SOPN	NP	
TOUJEO SOLOSTAR SOPN	NP	
TRESIBA FLEXTOUCH SOPN 200 UNIT/ML	P	QL(0.9 ML daily)
TRESIBA FLEXTOUCH SOPN 100 UNIT/ML	P	QL(1.5 ML daily)
TRESIBA SOLN	P	Brand Preferred; QL(1.5 ML daily)
Insulin Sensitizing Agents		
ACTOS (<i>pioglitazone hcl</i>)	NP	QL(1 EA daily)
<i>pioglitazone hcl</i>	P	QL(1 EA daily)
Meglitinide Analogues		
<i>nateglinide</i>	P	QL(3 EA daily)
<i>repaglinide</i>	NP	

Drug Name	Drug Tier	Requirements/ Limits
Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors		
<i>dapagliflozin propanediol</i>	NP	ST
FARXIGA (<i>dapagliflozin propanediol</i>)	P	Brand Preferred; ST
INVOKANA	P	ST
JARDIANCE	P	ST
STEGLATRO	NP	QL(1 EA daily)
Sulfonylureas		
<i>glimepiride 1 MG, 2 MG</i>	P	QL(4 EA daily)
<i>glimepiride 3 MG</i>	P	
<i>glimepiride 4 MG</i>	P	QL(2 EA daily)
<i>glipizide TABS</i>	P	
<i>glipizide TB24</i>	P	
GLUCOTROL XL TB24 5 MG, 10 MG (<i>glipizide</i>)	NP	
<i>glyburide micronized 1.5 MG, 3 MG, 6 MG</i>	P	
<i>glyburide TABS</i>	P	
ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea		
Antidiarrheal/Probiotic Agents - Misc.		
<i>bismuth subsalicylate CHEW 262 MG</i>	C	
<i>bismuth subsalicylate SUSP 525 MG/15ML, 1050 MG/30ML</i>	C	
Antiperistaltic Agents		
<i>diphenoxylate w/ atropine LIQD</i>	C	
<i>diphenoxylate w/ atropine TABS</i>	C	
<i>loperamide hcl CAPS</i>	C	QL(8 EA daily); RX/OTC
<i>loperamide hcl TABS</i>	C	QL(8 EA daily)
ANTIDOTES AND SPECIFIC ANTAGONISTS		
Antidotes - Chelating Agents		

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CHEMET	C		<i>ondansetron hcl TABS 4 MG, 8 MG</i>	P	QL(20 EA per 31 day(s) retail)
<i>deferasirox PACK</i>	C	SP; PA	<i>ondansetron TBDP 4 MG, 8 MG</i>	P	QL(20 EA per 31 day(s) retail; 20 EA per 31 days mail)
<i>deferasirox TABS</i>	C	SP; PA	<i>ondansetron TBDP 16 MG</i>	P	
<i>deferasirox TBSO</i>	C	SP; PA	SANCUSO PTCH	NP	
Opioid Antagonists			Antiemetics - Anticholinergic		
KLOXXADO LIQD	NP		ANTIVERT CHEW (<i>meclizine hcl</i>)	NP	RX/OTC
<i>naloxone hcl LIQD</i>	NP	Brand Preferred; QL(4 EA per 90 day(s) retail); RX/OTC	ANTIVERT TABS 50 MG (<i>meclizine hcl</i>)	NP	
<i>naloxone hcl SOCT</i>	P	QL(2 ML per 90 day(s) retail)	<i>dimenhydrinate TABS</i>	C	QL(24 EA per fill retail)
<i>naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML</i>	P	QL(2 ML per 90 day(s) retail)	<i>meclizine hcl TABS 12.5 MG, 25 MG, 50 MG</i>	NP	RX/OTC
<i>naloxone hcl SOSY 2 MG/2ML</i>	P	QL(4 ML per 90 day(s) retail)	<i>scopolamine</i>	P	
<i>naloxone hcl SOSY 0.4 MG/ML</i>	P		TRANSDERM SCOP 1 MG/3DAYS (<i>scopolamine</i>)	NP	
<i>naltrexone hcl</i>	C		TRANSDERM-SCOP (<i>scopolamine</i>)	NP	
NARCAN LIQD (<i>naloxone hcl</i>)	P	Brand Preferred; QL(4 EA per 90 day(s) retail); RX/OTC	<i>trimethobenzamide hcl CAPS</i>	NP	
OPVEE NA	NP		Antiemetics - Miscellaneous		
REXTOVY LIQD	NP		AKYNZEO	NP	
VIVITROL	P	QL(1 EA per 30 day(s) retail); SP	BONJESTA TBCR	NP	
ZIMHI SOSY	NP		DICLEGIS TBEC (<i>doxylamine-pyridoxine</i>)	NP	
ZURNAI IJ 1.5 MG/0.5ML	NP		<i>doxylamine-pyridoxine TBEC</i>	NP	
ANTIEMETICS - Drugs to Treat Nausea and Vomiting			<i>dronabinol CAPS</i>	NP	
5-HT3 Receptor Antagonists			MARINOL CAPS 2.5 MG (<i>dronabinol</i>)	NP	
<i>granisetron hcl TABS</i>	NP		Substance P/Neurokinin 1 (NK1) Receptor Antagonists		
<i>ondansetron hcl SOLN IJ</i>	C		<i>aprepitant CAPS</i>	P	
<i>ondansetron hcl SOLN PO 4 MG/5ML</i>	P	QL(50 ML per 31 day(s) retail)	EMEND BIPACK CAPS 80 MG (<i>aprepitant</i>)	NP	
<i>ondansetron hcl SOSY</i>	C				

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
EMEND TRIPACK CAPS (<i>aprepitant</i>)	NP	
EMEND SUSR	NP	
ANTIFUNGALS - Drugs to Treat Fungal Infections		
Antifungal - Glucan Synthesis Inhibitors		
BREXAFEMME	NP	
Antifungals		
<i>griseofulvin microsize SUSP</i>	P	
<i>griseofulvin microsize TABS</i>	NP	
<i>griseofulvin ultramicrosize</i>	P	
<i>nystatin TABS</i>	P	QL(6 EA daily)
<i>terbinafine hcl TABS</i>	P	QL(1 EA daily; 90 EA per 120 day(s) retail)
Imidazole-Related Antifungals		
CRESEMBA CAPS	NP	
DIFLUCAN SUSR 40 MG/ML (<i>fluconazole</i>)	NP	QL(70 ML per fill retail)
<i>fluconazole SUSR</i>	P	QL(70 ML per fill retail)
<i>fluconazole TABS 150 MG</i>	P	QL(2 EA per fill retail)
<i>fluconazole TABS 100 MG, 200 MG</i>	P	
<i>fluconazole TABS 50 MG</i>	P	QL(3 EA per 14 day(s) retail)
<i>itraconazole CAPS</i>	NP	QL(1 EA daily)
<i>itraconazole SOLN</i>	NP	
<i>ketoconazole</i>	NP	
SPORANOX CAPS (<i>itraconazole</i>)	NP	QL(1 EA daily)
VFEND SUSR (<i>voriconazole</i>)	NP	
<i>voriconazole SUSR</i>	NP	
<i>voriconazole TABS</i>	NP	
ANTIHISTAMINES - Drugs to Treat Allergies		
Antihistamines - Alkylamines		

Drug Name	Drug Tier	Requirements/ Limits
<i>chlorpheniramine maleate SYRP</i>	C	
<i>chlorpheniramine maleate TABS</i>	C	QL(120 EA per fill retail)
<i>dexchlorpheniramine maleate SOLN</i>	C	
Antihistamines - Ethanolamines		
<i>diphenhydramine hcl CAPS</i>	C	QL(4 EA daily)
<i>diphenhydramine hcl ELIX 12.5 MG/5ML</i>	C	QL(240 ML per fill retail)
<i>diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML</i>	C	QL(240 ML per fill retail)
<i>diphenhydramine hcl TABS 25 MG</i>	C	QL(4 EA daily)
Antihistamines - Non-Sedating		
<i>cetirizine hcl CHEW</i>	C	QL(1 EA daily)
<i>cetirizine hcl SOLN PO</i>	P	QL(300 ML per fill retail); AL(Up to 12 yrs old); RX/OTC
<i>cetirizine hcl TABS</i>	P	QL(1 EA daily)
CLARINEX TABS (<i>desloratadine</i>)	NP	
DESLOMATADINE SOLN PO 0.5 MG/ML	NP	
<i>desloratadine TABS</i>	NP	
<i>desloratadine TBDP</i>	NP	AL(Up to 12 yrs old)
<i>fexofenadine hcl TABS 180 MG</i>	C	QL(1 EA daily)
<i>fexofenadine hcl TABS 60 MG</i>	C	QL(2 EA daily)
<i>levocetirizine dihydrochloride SOLN</i>	NP	AL(Up to 12 yrs old); RX/OTC
<i>levocetirizine dihydrochloride TABS</i>	P	QL(1 EA daily); RX/OTC
<i>loratadine CHEW</i>	P	
<i>loratadine TABS</i>	P	QL(1 EA daily)

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>loratadine TBDP 10 MG</i>	P	QL(1 EA daily); AL(Up to 12 yrs old)	COLESTID TABS (<i>colestipol hcl</i>)	NP	
Antihistamines - Phenothiazines			<i>colestipol hcl GRAN</i>	P	
<i>promethazine hcl SOLN PO 6.25 MG/5ML, 12.5 MG/10ML</i>	P	QL(240 ML per fill retail); AL(At least 2 yrs old)	<i>colestipol hcl PACK</i>	P	
<i>promethazine hcl SUPP</i>	P	QL(12 EA per fill retail); AL(At least 2 yrs old)	<i>colestipol hcl TABS</i>	P	
<i>promethazine hcl TABS</i>	P	AL(At least 2 yrs old)	QUESTRAN LIGHT POWD (<i>cholestyramine light</i>)	NP	
Antihistamines - Piperidines			QUESTRAN PACK (<i>cholestyramine</i>)	NP	
<i>cyproheptadine hcl SYRP</i>	C		QUESTRAN POWD (<i>cholestyramine</i>)	NP	
<i>cyproheptadine hcl TABS</i>	C		WELCHOL PACK (<i>colesevelam hcl</i>)	NP	
ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol			WELCHOL TABS (<i>colesevelam hcl</i>)	NP	
Antihyperlipidemics - Combinations			Fibric Acid Derivatives		
<i>ezetimibe-simvastatin</i>	NP	QL(1 EA daily)	<i>choline fenofibrate</i>	NP	
VYTORIN (<i>ezetimibe-simvastatin</i>)	NP	QL(1 EA daily)	<i>fenofibrate micronized 134 MG, 200 MG</i>	NP	QL(1 EA daily)
Antihyperlipidemics - Misc.			<i>fenofibrate micronized 43 MG, 130 MG</i>	NP	
<i>icosapent ethyl</i>	P		<i>fenofibrate micronized 67 MG</i>	NP	QL(2 EA daily)
<i>omega-3-acid ethyl esters</i>	P		<i>fenofibrate CAPS</i>	NP	
Bile Acid Sequestrants			<i>fenofibrate TABS 48 MG, 145 MG</i>	P	
<i>cholestyramine light PACK</i>	NP		<i>fenofibrate TABS 54 MG</i>	NP	QL(3 EA daily)
<i>cholestyramine light PACK</i>	P		<i>fenofibrate TABS 160 MG</i>	NP	QL(1 EA daily)
<i>cholestyramine light POWD</i>	NP		<i>fenofibrate TABS 40 MG, 120 MG</i>	NP	
<i>cholestyramine light POWD</i>	P		<i>fenofibric acid</i>	NP	
<i>cholestyramine PACK</i>	P		FIBRICOR (<i>fenofibric acid</i>)	NP	
<i>cholestyramine POWD</i>	P		<i>gemfibrozil TABS</i>	P	QL(2 EA daily)
<i>colesevelam hcl PACK</i>	NP		LIPOFEN CAPS (<i>fenofibrate</i>)	NP	
<i>colesevelam hcl TABS</i>	NP		LOPID TABS (<i>gemfibrozil</i>)	NP	QL(2 EA daily)
COLESTID GRAN (<i>colestipol hcl</i>)	NP		TRICOR TABS 145 MG (<i>fenofibrate</i>)	NP	

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
HMG CoA Reductase Inhibitors		
ALTOPREV TB24 20 MG, 40 MG, 60 MG	NP	
ATORVALIQ SUSP	NP	
<i>atorvastatin calcium TABS</i>	P	QL(1 EA daily)
CRESTOR TABS (<i>rosuvastatin calcium</i>)	NP	QL(1 EA daily)
<i>fluvastatin sodium CAPS</i>	P	
<i>fluvastatin sodium TB24</i>	NP	
LESCOL XL TB24 (<i>fluvastatin sodium</i>)	NP	
LIPITOR TABS (<i>atorvastatin calcium</i>)	NP	QL(1 EA daily)
LIVALO (<i>pitavastatin calcium</i>)	NP	
<i>lovastatin TABS 10 MG, 20 MG</i>	P	QL(1 EA daily)
<i>lovastatin TABS 40 MG</i>	P	QL(2 EA daily)
<i>pitavastatin calcium</i>	NP	
<i>pravastatin sodium</i>	P	QL(1 EA daily)
<i>rosuvastatin calcium TABS</i>	P	QL(1 EA daily)
<i>simvastatin TABS 5 MG, 10 MG, 20 MG, 40 MG</i>	P	QL(1 EA daily)
<i>simvastatin TABS 80 MG</i>	P	
ZOCOR TABS 10 MG, 20 MG, 40 MG (<i>simvastatin</i>)	NP	QL(1 EA daily)
ZYPITAMAG 2 MG, 4 MG	NP	
Intestinal Cholesterol Absorption Inhibitors		
<i>ezetimibe</i>	P	
ZETIA (<i>ezetimibe</i>)	NP	
ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure		
ACE Inhibitors		
ACCUPRIL (<i>quinapril hcl</i>)	NP	
ALTACE CAPS 1.25 MG, 5 MG, 10 MG (<i>ramipril</i>)	NP	QL(2 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>benazepril hcl 5 MG, 10 MG, 20 MG</i>	P	QL(1 EA daily)
<i>benazepril hcl 40 MG</i>	P	QL(2 EA daily)
<i>captopril</i>	P	QL(3 EA daily)
<i>enalapril maleate SOLN</i>	NP	
<i>enalapril maleate TABS</i>	P	QL(2 EA daily)
EPANED SOLN (<i>enalapril maleate</i>)	NP	
<i>fosinopril sodium</i>	NP	QL(1 EA daily)
<i>lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG</i>	P	
LOTENSIN 10 MG, 20 MG (<i>benazepril hcl</i>)	NP	QL(1 EA daily)
LOTENSIN 40 MG (<i>benazepril hcl</i>)	NP	QL(2 EA daily)
<i>moexipril hcl</i>	NP	
<i>perindopril erbumine</i>	NP	
QBRELIS SOLN	NP	
<i>quinapril hcl</i>	NP	
<i>ramipril CAPS</i>	P	QL(2 EA daily)
<i>trandolapril 4 MG</i>	NP	QL(2 EA daily)
<i>trandolapril 1 MG, 2 MG</i>	NP	QL(1 EA daily)
ZESTRIL TABS (<i>lisinopril</i>)	NP	
Angiotensin II Receptor Antagonists		
ARBLI PO 10 MG/ML	NP	
ATACAND (<i>candesartan cilexetil</i>)	NP	
AVAPRO 150 MG, 300 MG (<i>irbesartan</i>)	NP	QL(1 EA daily)
BENICAR (<i>olmesartan medoxomil</i>)	NP	QL(1 EA daily)
<i>candesartan cilexetil</i>	NP	
COZAAR (<i>losartan potassium</i>)	NP	QL(1 EA daily)
DIOVAN TABS (<i>valsartan</i>)	NP	QL(1 EA daily)
EDARBI	NP	
<i>irbesartan</i>	P	QL(1 EA daily)
<i>losartan potassium</i>	P	QL(1 EA daily)

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MICARDIS (<i>telmisartan</i>)	NP		<i>amlodipine besylate-valsartan 5 MG-160 MG</i>	P	
<i>olmesartan medoxomil</i>	P	QL(1 EA daily)	<i>amlodipine-valsartan-hydrochlorothiazide</i>	P	
<i>telmisartan</i>	P		ATACAND HCT (<i>candesartan cilexetil-hydrochlorothiazide</i>)	NP	
<i>valsartan SOLN</i>	NP		<i>atenolol & chlorthalidone</i>	P	QL(2 EA daily)
<i>valsartan TABS</i>	P	QL(1 EA daily)	AVALIDE (<i>irbesartan-hydrochlorothiazide</i>)	NP	QL(1 EA daily)
Antiadrenergic Antihypertensives			AZOR (<i>amlodipine besylate-olmesartan medoxomil</i>)	NP	ST
CARDURA (<i>doxazosin mesylate</i>)	NP		<i>benazepril & hydrochlorothiazide</i>	P	QL(1 EA daily)
<i>clonidine hcl TABS</i>	P		BENICAR HCT (<i>olmesartan medoxomil-hydrochlorothiazide</i>)	NP	QL(1 EA daily)
<i>clonidine PTWK</i>	P		<i>bisoprolol & hydrochlorothiazide 6.25 MG-10 MG, 6.25 MG-5 MG</i>	P	QL(1 EA daily)
<i>clonidine TB24</i>	NP		<i>bisoprolol & hydrochlorothiazide 6.25 MG-2.5 MG</i>	P	
<i>doxazosin mesylate</i>	P		<i>candesartan cilexetil-hydrochlorothiazide</i>	NP	
<i>guanfacine hcl</i>	P		<i>captopril & hydrochlorothiazide 15 MG-25 MG, 15 MG-50 MG, 25 MG-25 MG</i>	NP	QL(2 EA daily)
JAVADIN SOLN PO 0.02 MG/ML	NP		<i>captopril & hydrochlorothiazide 25 MG-50 MG</i>	NP	QL(3 EA daily)
<i>methyldopa TABS</i>	P		DIOVAN HCT (<i>valsartan-hydrochlorothiazide</i>)	NP	QL(1 EA daily)
<i>methyldopa TABS 500 MG</i>	C		EDARBYCLOR	NP	
NEXICLON XR TB24 (<i>clonidine</i>)	NP		<i>enalapril maleate & hydrochlorothiazide</i>	P	QL(2 EA daily)
<i>prazosin hcl CAPS</i>	C		EXFORGE (<i>amlodipine besylate-valsartan</i>)	NP	
<i>terazosin hcl</i>	P		EXFORGE HCT (<i>amlodipine-valsartan-hydrochlorothiazide</i>)	NP	
TEZRULY PO 1 MG/ML	NP				
Antihypertensive Combinations					
ACCURETIC 12.5 MG-10 MG (<i>quinapril-hydrochlorothiazide</i>)	NP	QL(3 EA daily)			
ACCURETIC 12.5 MG-20 MG (<i>quinapril-hydrochlorothiazide</i>)	NP	QL(4 EA daily)			
<i>amlodipine besylate-benazepril hcl</i>	P	QL(1 EA daily)			
<i>amlodipine besylate-olmesartan medoxomil</i>	NP	ST			
<i>amlodipine besylate-olmesartan medoxomil</i>	NP				
<i>amlodipine besylate-valsartan 10 MG-160 MG, 10 MG-320 MG, 5 MG-320 MG</i>	P				

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>fosinopril sodium & hydrochlorothiazide</i>	NP	QL(1 EA daily)
<i>HYZAAR (losartan potassium & hydrochlorothiazide)</i>	NP	QL(1 EA daily)
<i>irbesartan-hydrochlorothiazide</i>	P	QL(1 EA daily)
<i>lisinopril & hydrochlorothiazide</i>	P	
<i>losartan potassium & hydrochlorothiazide</i>	P	QL(1 EA daily)
<i>LOTENSIN HCT 12.5 MG-10 MG, 12.5 MG-20 MG, 25 MG-20 MG (benazepril & hydrochlorothiazide)</i>	NP	QL(1 EA daily)
<i>LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (amlodipine besylate-benazepril hcl)</i>	NP	QL(1 EA daily)
<i>metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 25 MG-50 MG</i>	NP	QL(2 EA daily)
<i>metoprolol & hydrochlorothiazide TABS 50 MG-100 MG</i>	NP	QL(1 EA daily)
<i>MICARDIS HCT (telmisartan-hydrochlorothiazide)</i>	NP	QL(1 EA daily)
<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>	NP	ST
<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>	NP	
<i>olmesartan medoxomil-hydrochlorothiazide</i>	P	QL(1 EA daily)
<i>quinapril-hydrochlorothiazide 25 MG-20 MG</i>	NP	QL(2 EA daily)
<i>quinapril-hydrochlorothiazide 12.5 MG-20 MG</i>	NP	QL(4 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>quinapril-hydrochlorothiazide 12.5 MG-10 MG</i>	NP	QL(3 EA daily)
<i>telmisartan-amlodipine</i>	NP	ST
<i>telmisartan-hydrochlorothiazide</i>	P	QL(1 EA daily)
<i>TENORETIC 100 (atenolol & chlorthalidone)</i>	NP	QL(2 EA daily)
<i>TENORETIC 50 (atenolol & chlorthalidone)</i>	NP	QL(2 EA daily)
<i>trandolapril-verapamil hcl</i>	P	
<i>TRIBENZOR (olmesartan medoxomil-amlodipine-hydrochlorothiazide)</i>	NP	ST
<i>valsartan-hydrochlorothiazide</i>	P	QL(1 EA daily)
<i>ZESTORETIC (lisinopril & hydrochlorothiazide)</i>	NP	
Direct Renin Inhibitors		
<i>aliskiren fumarate</i>	NP	Brand Preferred; ST
<i>TEKTURNA (aliskiren fumarate)</i>	P	Brand Preferred; ST
Vasodilators		
<i>hydralazine hcl TABS</i>	C	
<i>minoxidil 2.5 MG</i>	C	QL(3 EA daily)
<i>minoxidil 10 MG</i>	C	QL(10 EA daily)
ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections		
Anti-infective Agents - Misc.		
<i>FLAGYL CAPS (metronidazole)</i>	NP	
<i>LIKMEZ SUSP</i>	NP	
<i>metronidazole CAPS</i>	P	
<i>metronidazole TABS</i>	P	
<i>tinidazole</i>	NP	ST
<i>trimethoprim TABS</i>	C	
Anti-infective Misc. - Combinations		

Updated January 2026

Drug Name	Drug Tier	Requirements/Limits
<i>methenamine-hyosc-methylene blue-sod phos-phenyl sal TABS 81.6 MG</i>	C	
<i>sulfamethoxazole-trimethoprim SUSP</i>	C	
<i>sulfamethoxazole-trimethoprim TABS</i>	C	
Antiprotozoal Agents		
<i>nitazoxanide TABS</i>	NP	ST
Glycopeptides		
FIRVANQ SOLR PO (<i>vancomycin hcl</i>)	NP	QL(300 ML per fill retail; 300 per fill mail); ST
VANOCIN CAPS 250 MG (<i>vancomycin hcl</i>)	NP	QL(8 EA daily); ST
VANOCIN CAPS 125 MG (<i>vancomycin hcl</i>)	NP	QL(4 EA daily); ST
<i>vancomycin hcl CAPS 250 MG</i>	P	QL(8 EA daily); ST
<i>vancomycin hcl CAPS 125 MG</i>	P	QL(4 EA daily); ST
<i>vancomycin hcl SOLR IV 500 MG</i>	C	QL(14 EA per 31 day(s) retail)
<i>vancomycin hcl SOLR PO 25 MG/ML, 50 MG/ML, 250 MG/5ML</i>	P	QL(300 ML per fill retail; 300 per fill mail); ST
<i>vancomycin hcl SOLR IV 1 GM</i>	C	QL(14 EA per fill retail)
VANCOMYCIN HCL SOLR IV 1 GM	C	QL(14 EA per fill retail)
VANCOMYCIN HCL SOLR IV 500 MG	C	QL(14 EA per 31 day(s) retail)
Leprostatics		
<i>dapsone</i>	C	
Lincosamides		
<i>clindamycin hcl 150 MG, 300 MG</i>	C	
<i>clindamycin palmitate hydrochloride</i>	C	QL(300 ML per fill retail)
Monobactams		

Drug Name	Drug Tier	Requirements/Limits
CAYSTON	NP	SP
Oxazolidinones		
SIVEXTRO TABS	C	QL(6 EA per fill retail); PA
Urinary Anti-infectives		
<i>methenamine mandelate</i>	C	
<i>nitrofurantoin</i>	C	QL(40 ML daily)
<i>nitrofurantoin macrocrystal 50 MG, 100 MG</i>	C	
<i>nitrofurantoin monohyd macro</i>	C	
ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)		
Antimalarial Combinations		
COARTEM	C	QL(24 EA per fill retail)
Antimalarials		
<i>chloroquine phosphate TABS 500 MG</i>	C	QL(1 EA daily)
<i>chloroquine phosphate TABS 250 MG</i>	C	
<i>hydroxychloroquine sulfate 100 MG, 200 MG</i>	C	
KRINTAFEL	C	QL(0.67 EA daily)
<i>mefloquine hcl</i>	C	
<i>primaquine phosphate TABS</i>	C	
SOVUNA 200 MG	C	
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
Antimyasthenic/Cholinergic Agents		
<i>pyridostigmine bromide TABS 60 MG</i>	C	
<i>pyridostigmine bromide TBCR</i>	C	
ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)		

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
Antimycobacterial Agents		
<i>ethambutol hcl TABS</i>	C	
<i>isoniazid SYRP</i>	C	
<i>isoniazid TABS</i>	C	
<i>pyrazinamide</i>	C	
<i>rifabutin</i>	C	
<i>rifampin CAPS</i>	C	
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer		
Antimetabolites		
JYLAMVO SOLN PO	NP	SP
<i>mercaptopurine SUSP 2000 MG/100ML</i>	C	
<i>mercaptopurine TABS</i>	C	
<i>methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML</i>	P	
<i>methotrexate sodium SOLR</i>	P	
<i>methotrexate sodium TABS 2.5 MG</i>	P	
TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	NP	
XATMEP SOLN PO	NP	
Antineoplastic - Angiogenesis Inhibitors		
MVASI	C	SP; PA
ZIRABEV	C	SP; PA
Antineoplastic - Antibodies		
ENHERTU	C	SP; PA
PADCEV	C	SP; PA
RUXIENCE	C	SP; PA
TRUXIMA	C	SP; PA
Antineoplastic - Anti-HER2 Agents		
KANJINTI	C	SP; PA
OGIVRI	C	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
TRAZIMERA 420 MG	C	SP; PA
Antineoplastic - Hormonal and Related Agents		
<i>abiraterone acetate</i>	C	SP; PA
<i>anastrozole</i>	C	
<i>bicalutamide</i>	C	QL(1 EA daily)
<i>exemestane</i>	C	
<i>letrozole</i>	C	
<i>megestrol acetate SUSP</i>	P	
<i>megestrol acetate TABS</i>	C	
<i>tamoxifen citrate TABS</i>	C	
<i>toremifene citrate</i>	C	PA
Antineoplastic Combinations		
PHESGO	C	SP; PA
Antineoplastic Enzyme Inhibitors		
BRAFTOVI 75 MG	C	SP; PA
IBRANCE CAPS	C	SP; PA
IBRANCE TABS	C	SP; PA
ICLUSIG	C	QL(1 EA daily); SP; PA
INREBIC	C	SP; PA
MEKTOVI	C	SP; PA
ROZLYTREK CAPS	C	SP; PA
Antineoplastic Enzymes		
ASPARLAS	C	SP; PA
Antineoplastics Misc.		
<i>hydroxyurea</i>	P	
Chemotherapy Rescue/Antidote/Protective Agents		
<i>leucovorin calcium TABS</i>	C	
ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease		
Antiparkinson Adjunctive Therapy		
<i>carbidopa</i>	C	
Antiparkinson Anticholinergics		

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>benztropine mesylate TABS</i>	C	
<i>trihexyphenidyl hcl SOLN</i>	C	QL(16.67 ML daily)
<i>trihexyphenidyl hcl TABS</i>	C	
Antiparkinson Dopaminergics		
<i>amantadine hcl CAPS</i>	C	
<i>amantadine hcl SOLN</i>	C	
<i>bromocriptine mesylate CAPS</i>	C	
<i>bromocriptine mesylate TABS 2.5 MG</i>	C	
<i>carbidopa-levodopa TABS</i>	C	
<i>carbidopa-levodopa TBCR</i>	C	
DHIVY TABS	C	
NEUPRO	NP	
<i>pramipexole dihydrochloride TABS</i>	P	QL(3 EA daily); AL(At least 18 yrs old)
<i>pramipexole dihydrochloride TB24</i>	NP	
<i>ropinirole hydrochloride TABS 0.25 MG, 3 MG, 4 MG</i>	P	QL(6 EA daily)
<i>ropinirole hydrochloride TABS 0.5 MG, 1 MG, 2 MG, 5 MG</i>	P	QL(3 EA daily)
<i>ropinirole hydrochloride TB24</i>	NP	
Antiparkinson Monoamine Oxidase Inhibitors		
<i>selegiline hcl CAPS</i>	C	
<i>selegiline hcl TABS</i>	C	
ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders		
Antimanic Agents		
<i>lithium</i>	C	QL(10 ML daily)
<i>lithium carbonate CAPS</i>	C	
<i>lithium carbonate TABS</i>	C	

Drug Name	Drug Tier	Requirements/ Limits
<i>lithium carbonate TBCR</i>	C	
Antipsychotics - Misc.		
CAPLYTA	NP	AL(At least 18 yrs old); ST
EQUETRO	NP	
GEODON (<i>ziprasidone hcl</i>)	NP	QL(2 EA daily); AL(At least 18 yrs old)
LATUDA (<i>lurasidone hcl</i>)	NP	AL(At least 10 yrs old)
<i>lurasidone hcl</i>	P	AL(At least 10 yrs old)
<i>lurasidone hcl</i>	P	AL(At least 10 yrs old)
NUPLAZID CAPS	NP	QL(1 EA daily); AL(At least 18 yrs old); ST
NUPLAZID TABS 10 MG	NP	QL(1 EA daily); AL(At least 18 yrs old); ST
VRAYLAR CAPS	P	AL(At least 18 yrs old)
<i>ziprasidone hcl</i>	P	QL(2 EA daily); AL(At least 18 yrs old)
<i>ziprasidone mesylate</i>	NP	AL(At least 18 yrs old); ST
Benzisoxazoles		
ERZOFRI 39 MG/0.25ML	NP	QL(0.25 ML per 28 day(s) retail); AL(At least 18 yrs old); SP
ERZOFRI 78 MG/0.5ML	NP	QL(0.5 ML per 28 day(s) retail); AL(At least 18 yrs old); SP
ERZOFRI 117 MG/0.75ML	NP	QL(1.5 ML per 28 day(s) retail); AL(At least 18 yrs old); SP
ERZOFRI 351 MG/2.25ML	NP	AL(At least 18 yrs old); SP

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ERZOFRI 234 MG/1.5ML	NP	QL(3 ML per 28 day(s) retail); AL(At least 18 yrs old); SP	INVEGA TRINZA 273 MG/0.88ML	P	QL(0.88 ML per fill retail); 1 max fill(s) per 84 day(s) retail; AL(At least 18 yrs old); SP
ERZOFRI 156 MG/ML	NP	QL(2 ML per 28 day(s) retail); AL(At least 18 yrs old); SP	INVEGA TRINZA 546 MG/1.75ML	P	QL(1.8 ML per fill retail); 1 max fill(s) per 84 day(s) retail; AL(At least 18 yrs old); SP
FANAPT	NP	AL(At least 18 yrs old); ST	INVEGA TRINZA 819 MG/2.63ML	P	QL(2.7 ML per fill retail); 1 max fill(s) per 84 day(s) retail; AL(At least 18 yrs old); SP
FANAPT TITRATION PACK A	NP	AL(At least 18 yrs old); ST	INVEGA TRINZA 410 MG/1.32ML	P	QL(1.4 ML per fill retail); 1 max fill(s) per 84 day(s) retail; AL(At least 18 yrs old); SP
FANAPT TITRATION PACK B	NP		<i>paliperidone</i>	NP	AL(At least 12 yrs old)
FANAPT TITRATION PACK C	NP		<i>paliperidone</i>	NP	AL(At least 12 yrs old); ST
INVEGA 3 MG, 6 MG, 9 MG (<i>paliperidone</i>)	NP	AL(At least 12 yrs old); ST	PERSERIS PRSY	P	QL(1 EA per 28 day(s) retail); AL(At least 18 yrs old); SP
INVEGA HAFYERA	P	AL(At least 18 yrs old); SP	RISPERDAL CONSTA (<i>risperidone microspheres</i>)	P	2 max fill(s) per 28 day(s) retail; AL(At least 18 yrs old); SP
INVEGA SUSTENNA 39 MG/0.25ML	P	QL(0.25 ML per 28 day(s) retail); AL(At least 18 yrs old); SP	RISPERDAL SOLN (<i>risperidone</i>)	NP	QL(4 ML daily); AL(At least 7 yrs old); ST
INVEGA SUSTENNA 156 MG/ML	P	QL(2 ML per 28 day(s) retail); AL(At least 18 yrs old); SP	RISPERDAL TABS 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG (<i>risperidone</i>)	NP	QL(4 EA daily); AL(At least 7 yrs old)
INVEGA SUSTENNA 117 MG/0.75ML	P	QL(1.5 ML per 28 day(s) retail); AL(At least 18 yrs old); SP	<i>risperidone SOLN</i>	P	QL(4 ML daily); AL(At least 7 yrs old)
INVEGA SUSTENNA 234 MG/1.5ML	P	QL(3 ML per 28 day(s) retail); AL(At least 18 yrs old); SP	<i>risperidone SOLN</i>	P	QL(4 ML daily); AL(At least 7 yrs old); ST
INVEGA SUSTENNA 78 MG/0.5ML	P	QL(0.5 ML per 28 day(s) retail); AL(At least 18 yrs old); SP			

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>risperidone TABS 0.25 MG</i>	P	QL(4 EA daily); AL(At least 7 yrs old); ST	<i>loxapine succinate</i>	C	QL(4 EA daily); AL(At least 18 yrs old)
<i>risperidone TABS</i>	P	QL(4 EA daily); AL(At least 7 yrs old)	<i>olanzapine TABS 7.5 MG, 10 MG</i>	P	QL(2 EA daily); AL(At least 10 yrs old)
<i>risperidone TABS 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG</i>	P	QL(4 EA daily); AL(At least 7 yrs old)	<i>olanzapine TABS 15 MG, 20 MG</i>	P	QL(1 EA daily); AL(At least 10 yrs old)
<i>risperidone TBDP</i>	P	QL(2 EA daily); AL(At least 7 yrs old)	<i>olanzapine TABS 2.5 MG, 5 MG</i>	P	QL(4 EA daily); AL(At least 10 yrs old)
RYKINDO SRER	NP	AL(At least 18 yrs old); SP	<i>olanzapine TBDP</i>	NP	AL(At least 10 yrs old); ST
UZEDY SUSY	P	AL(At least 18 yrs old); SP	<i>quetiapine fumarate TABS 300 MG, 400 MG</i>	P	QL(2 EA daily); AL(At least 10 yrs old)
Butyrophenones			<i>quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG</i>	P	QL(4 EA daily); AL(At least 10 yrs old)
<i>haloperidol decanoate</i>	C		<i>quetiapine fumarate TABS 150 MG</i>	P	AL(At least 10 yrs old); ST
<i>haloperidol lactate CONC</i>	C		<i>quetiapine fumarate TB24</i>	P	AL(At least 10 yrs old)
<i>haloperidol TABS 0.5 MG, 1 MG, 2 MG, 5 MG, 10 MG</i>	C	QL(3 EA daily)	SAPHRIS (<i>asenapine maleate</i>)	NP	AL(At least 10 yrs old)
<i>haloperidol TABS 20 MG</i>	C		SECUADO	NP	AL(At least 18 yrs old); ST
Dibenzapines			SEROQUEL XR TB24 (<i>quetiapine fumarate</i>)	NP	AL(At least 10 yrs old)
ADASUVE	NP	AL(At least 18 yrs old); ST	SEROQUEL TABS 25 MG, 50 MG, 100 MG, 200 MG (<i>quetiapine fumarate</i>)	NP	QL(4 EA daily); AL(At least 10 yrs old)
<i>asenapine maleate</i>	P	AL(At least 10 yrs old)	SEROQUEL TABS 300 MG, 400 MG (<i>quetiapine fumarate</i>)	NP	QL(2 EA daily); AL(At least 10 yrs old)
<i>clozapine TABS 25 MG, 50 MG, 200 MG</i>	P	QL(3 EA daily); AL(At least 18 yrs old)	VERSACLOZ SUSP	NP	AL(At least 18 yrs old); ST
<i>clozapine TABS 100 MG</i>	P	QL(9 EA daily); AL(At least 18 yrs old)	ZYPREXA RELPREVV	NP	AL(At least 18 yrs old); SP
<i>clozapine TBDP</i>	NP	AL(At least 18 yrs old); ST	ZYPREXA TABS 20 MG (<i>olanzapine</i>)	NP	QL(1 EA daily); AL(At least 10 yrs old)
<i>clozapine TBDP</i>	NP	AL(At least 18 yrs old)	ZYPREXA TABS 2.5 MG, 5 MG (<i>olanzapine</i>)	NP	QL(4 EA daily); AL(At least 10 yrs old)
CLOZARIL TABS 100 MG (<i>clozapine</i>)	NP	QL(9 EA daily); AL(At least 18 yrs old)	Muscarinic Agents		
CLOZARIL TABS 25 MG, 50 MG, 200 MG (<i>clozapine</i>)	NP	QL(3 EA daily); AL(At least 18 yrs old)			

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
COBENFY STARTER PACK CPPK	NP	AL(At least 18 yrs old); ST
COBENFY CAPS	NP	AL(At least 18 yrs old)
Phenothiazines		
<i>chlorpromazine hcl TABS 10 MG</i>	C	QL(10 EA daily)
<i>chlorpromazine hcl TABS 25 MG, 50 MG, 100 MG, 200 MG</i>	C	QL(3 EA daily)
<i>fluphenazine decanoate</i>	C	
<i>fluphenazine hcl TABS</i>	C	
<i>perphenazine TABS</i>	C	QL(4 EA daily); AL(At least 12 yrs old)
<i>prochlorperazine</i>	NP	
<i>prochlorperazine</i>	P	
<i>prochlorperazine maleate TABS</i>	P	
<i>thioridazine hcl</i>	C	QL(3 EA daily)
<i>trifluoperazine hcl TABS</i>	C	QL(2 EA daily)
Quinolinone Derivatives		
ABILIFY ASIMTUFII PRSY	P	AL(At least 18 yrs old); SP
ABILIFY MAINTENA PRSY	P	QL(1 EA per 28 day(s) retail); AL(At least 18 yrs old); SP
ABILIFY MAINTENA SRER	P	QL(1 EA per 28 day(s) retail); AL(At least 18 yrs old); SP
ABILIFY MAINTENA SRER	P	QL(1 EA per 28 day(s) retail); AL(At least 18 yrs old)
ABILIFY MYCITE MAINTENANCE KIT	NP	AL(At least 18 yrs old); SP; ST
ABILIFY MYCITE STARTER KIT	NP	AL(At least 18 yrs old); SP; ST
ABILIFY TABS 5 MG (<i>aripiprazole</i>)	NP	QL(1.5 EA daily); AL(At least 7 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
ABILIFY TABS 2 MG, 10 MG, 15 MG, 20 MG, 30 MG (<i>aripiprazole</i>)	NP	QL(1 EA daily); AL(At least 7 yrs old)
<i>aripiprazole SOLN PO</i>	NP	QL(750 ML per 31 day(s) retail; 750 ML per 31 days mail); AL(At least 7 yrs old)
<i>aripiprazole SOLN PO</i>	NP	QL(750 ML per 31 day(s) retail; 750 ML per 31 days mail); AL(At least 7 yrs old); ST
<i>aripiprazole TABS 2 MG, 10 MG, 15 MG, 20 MG, 30 MG</i>	P	QL(1 EA daily); AL(At least 7 yrs old)
<i>aripiprazole TABS 5 MG</i>	P	QL(1.5 EA daily); AL(At least 7 yrs old)
<i>aripiprazole TBDP</i>	NP	QL(1 EA daily); AL(At least 7 yrs old); ST
ARISTADA 441 MG/1.6ML	P	QL(1.6 ML per 28 day(s) retail); AL(At least 18 yrs old); SP
ARISTADA 662 MG/2.4ML	P	QL(2.4 ML per 28 day(s) retail); AL(At least 18 yrs old); SP
ARISTADA 1064 MG/3.9ML	P	QL(4 ML per fill retail); 1 max fill(s) per 56 day(s) retail; AL(At least 18 yrs old); SP
ARISTADA 882 MG/3.2ML	P	QL(3.2 ML per 28 day(s) retail); AL(At least 18 yrs old); SP

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ARISTADA INITIO	P	QL(2.5 ML per fill retail); 1 max fill(s) per 180 day(s) retail; AL(At least 18 yrs old); SP	DESCOVY 200 MG-25 MG	P	QL(1 EA daily)
OPIPZA FILM	NP	AL(At least 7 yrs old); ST	DESCOVY 120 MG-15 MG	P	QL(1 EA daily); PA
REXULTI	NP	AL(At least 13 yrs old); ST	DOVATO	P	QL(1 EA daily)
Thioxanthenes			EDURANT	P	QL(1 EA daily)
<i>thiothixene</i>	C	QL(3 EA daily)	EDURANT PED PO 2.5 MG	P	
ANTISEPTICS & DISINFECTANTS			<i>efavirenz CAPS 200 MG</i>	C	QL(1 EA daily)
Chlorine Antiseptics			<i>efavirenz CAPS 50 MG</i>	C	QL(2 EA daily)
<i>chlorhexidine gluconate SOLN EX 4 %</i>	C		<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	P	QL(1 EA daily)
ANTIVIRALS - Drugs to Treat Viral Infections			<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	P	QL(1 EA daily)
Antiretrovirals			<i>efavirenz TABS</i>	C	QL(1 EA daily)
<i>abacavir sulfate-lamivudine</i>	P	QL(1 EA daily)	<i>efavirenz TABS</i>	P	QL(1 EA daily)
<i>abacavir sulfate SOLN</i>	P	QL(30 ML daily)	<i>emtricitabine CAPS</i>	P	QL(1 EA daily)
<i>abacavir sulfate TABS</i>	P	QL(2 EA daily)	<i>emtricitabine-rilpivirine-tenofovir disoproxil fumarate</i>	P	QL(1 EA daily)
<i>abacavir sulfate TABS</i>	C	QL(2 EA daily)	<i>emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG</i>	P	
APTIVUS CAPS	P	QL(4 EA daily)	<i>emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG</i>	P	QL(1 EA daily)
<i>atazanavir sulfate CAPS 200 MG</i>	C	QL(2 EA daily)	<i>emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG</i>	C	QL(1 EA daily)
<i>atazanavir sulfate CAPS 300 MG</i>	P		EMTRIVA CAPS (<i>emtricitabine</i>)	P	QL(1 EA daily)
<i>atazanavir sulfate CAPS 150 MG, 200 MG</i>	P	QL(2 EA daily)	EMTRIVA SOLN	P	QL(24 ML daily)
BIKTARVY	P	QL(1 EA daily)	EPIVIR SOLN (<i>lamivudine</i>)	P	QL(30 ML daily)
CIMDUO	P	QL(1 EA daily)	EPIVIR TABS 300 MG (<i>lamivudine</i>)	P	QL(1 EA daily)
COMPLERA 200 MG-300 MG-25 MG (<i>emtricitabine-rilpivirine-tenofovir disoproxil fumarate</i>)	P	QL(1 EA daily)	EPIVIR TABS 150 MG (<i>lamivudine</i>)	P	QL(2 EA daily)
<i>darunavir TABS 800 MG</i>	P	QL(1 EA daily)	<i>etravirine 200 MG</i>	P	QL(2 EA daily)
<i>darunavir TABS 600 MG</i>	P	QL(2 EA daily)			
<i>darunavir TABS 800 MG</i>	P	QL(1 EA daily)			
DELSTRIGO	P	QL(1 EA daily)			

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>etravirine 100 MG</i>	P	QL(4 EA daily)	<i>lopinavir-ritonavir SOLN</i>	P	QL(16 ML daily)
EVOTAZ	P	QL(1 EA daily)	<i>lopinavir-ritonavir TABS 50 MG-200 MG</i>	P	QL(6 EA daily)
<i>fosamprenavir calcium TABS</i>	P	QL(4 EA daily)	<i>lopinavir-ritonavir TABS 25 MG-100 MG</i>	P	QL(4 EA daily)
FUZEON SOLR	NP	SP	<i>maraviroc TABS 300 MG</i>	P	QL(4 EA daily)
GENVOYA	P	QL(1 EA daily)	<i>maraviroc TABS 300 MG</i>	C	QL(4 EA daily)
INTELENCE 200 MG (<i>etravirine</i>)	P	QL(2 EA daily)	<i>maraviroc TABS 150 MG</i>	C	QL(2 EA daily)
INTELENCE	P	QL(4 EA daily)	<i>maraviroc TABS 150 MG</i>	P	QL(2 EA daily)
INTELENCE (<i>etravirine</i>)	P	QL(4 EA daily)	<i>nevirapine SUSP</i>	P	QL(40 ML daily)
ISENTRESS HD TABS	P		<i>nevirapine TABS</i>	P	QL(2 EA daily)
ISENTRESS CHEW 25 MG	P	QL(12 EA daily)	<i>nevirapine TB24 400 MG</i>	P	QL(1 EA daily)
ISENTRESS CHEW 100 MG	P	QL(6 EA daily)	NORVIR PACK	P	
ISENTRESS PACK	P	QL(2 EA daily)	NORVIR TABS (<i>ritonavir</i>)	P	QL(12 EA daily)
ISENTRESS TABS	P	QL(2 EA daily)	ODEFSEY	P	
JULUCA	P	QL(1 EA daily)	PIFELTRO	P	QL(1 EA daily)
KALETRA SOLN	P	QL(16 ML daily)	PREZCOBIX	P	
KALETRA TABS 25 MG-100 MG (<i>lopinavir-ritonavir</i>)	P	QL(4 EA daily)	PREZCOBIX	P	QL(1 EA daily)
KALETRA TABS 50 MG-200 MG (<i>lopinavir-ritonavir</i>)	P	QL(6 EA daily)	PREZISTA SUSP	P	QL(12 ML daily)
KALETRA TABS 25 MG-100 MG (<i>lopinavir-ritonavir</i>)	P	QL(4 EA daily)	PREZISTA TABS (<i>darunavir</i>)	P	QL(2 EA daily)
KALETRA TABS 50 MG-200 MG (<i>lopinavir-ritonavir</i>)	P	QL(6 EA daily)	PREZISTA TABS 150 MG	P	QL(3 EA daily)
<i>lamivudine SOLN</i>	C	QL(30 ML daily)	PREZISTA TABS 800 MG (<i>darunavir</i>)	P	QL(1 EA daily)
<i>lamivudine SOLN</i>	P	QL(30 ML daily)	PREZISTA TABS 75 MG, 600 MG	P	QL(2 EA daily)
<i>lamivudine TABS 150 MG</i>	C	QL(2 EA daily)	RETROVIR CAPS (<i>zidovudine</i>)	P	QL(6 EA daily)
<i>lamivudine TABS 150 MG</i>	P	QL(2 EA daily)	RETROVIR SYRP (<i>zidovudine</i>)	P	QL(60 ML daily)
<i>lamivudine TABS 300 MG</i>	P	QL(1 EA daily)	REYATAZ CAPS 200 MG (<i>atazanavir sulfate</i>)	P	QL(2 EA daily)
<i>lamivudine-zidovudine</i>	P		REYATAZ CAPS 300 MG (<i>atazanavir sulfate</i>)	P	
LEXIVA SUSP	C	QL(56 ML daily)	REYATAZ PACK	P	QL(6 EA daily)
			<i>ritonavir TABS</i>	P	QL(12 EA daily)
			RUKOBIA	P	

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
SELZENTRY SOLN	P	QL(35 ML daily)
SELZENTRY TABS 300 MG (<i>maraviroc</i>)	P	QL(4 EA daily)
SELZENTRY TABS 150 MG (<i>maraviroc</i>)	P	QL(2 EA daily)
STRIBILD	P	QL(1 EA daily)
SYMFI (<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	P	QL(1 EA daily)
SYMFI LO (<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	P	QL(1 EA daily)
SYMTUZA	P	
<i>tenofovir disoproxil fumarate</i> TABS	C	QL(1 EA daily)
<i>tenofovir disoproxil fumarate</i> TABS	P	QL(1 EA daily)
TIVICAY PD TBSO	P	
TIVICAY TABS 50 MG	P	
TRIUMEQ PD TBSO	P	
TRIUMEQ TABS	P	QL(1 EA daily); AL(At least 18 yrs old)
TRUVADA 200 MG-300 MG (<i>emtricitabine-tenofovir disoproxil fumarate</i>)	P	QL(1 EA daily)
TRUVADA 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG (<i>emtricitabine-tenofovir disoproxil fumarate</i>)	P	
TYBOST	P	QL(1 EA daily); AL(At least 18 yrs old)
VIRACEPT TABS 250 MG	P	QL(9 EA daily)
VIRACEPT TABS 625 MG	P	QL(4 EA daily)
VIREAD POWD	P	QL(8 GM daily)
VIREAD TABS	P	QL(1 EA daily)
VIREAD TABS (<i>tenofovir disoproxil fumarate</i>)	P	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
ZIAGEN SOLN (<i>abacavir sulfate</i>)	P	QL(30 ML daily)
<i>zidovudine CAPS</i>	P	QL(6 EA daily)
<i>zidovudine SYRP</i>	P	QL(60 ML daily)
<i>zidovudine TABS</i>	P	QL(2 EA daily)
Antiviral Combinations		
PAXLOVID (150/100)	P	1 package(s) per 90 day(s) retail; 1 package(s) per 90 day(s) mail; AL(At least 18 yrs old)
PAXLOVID (300/100 & 150/100)	P	1 package(s) per 90 day(s) retail; 1 package(s) per 90 day(s) mail; AL(At least 18 yrs old)
PAXLOVID (300/100)	P	1 package(s) per 90 day(s) retail; 1 package(s) per 90 day(s) mail; AL(At least 18 yrs old)
CMV Agents		
<i>valganciclovir hcl</i> TABS	C	QL(2 EA daily)
Hepatitis Agents		
<i>adefovir dipivoxil</i>	NP	
BARACLUDE SOLN	P	
BARACLUDE TABS (<i>entecavir</i>)	NP	
<i>entecavir</i> TABS	P	
EPCLUSA PACK	PA	SP; PA
EPCLUSA TABS 50 MG-200 MG	PA	SP; PA
EPCLUSA TABS 100 MG-400 MG	NP	QL(1 EA daily); SP
HARVONI PACK	NP	SP
HARVONI TABS	NP	SP

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
HARVONI TABS	NP	SP
<i>lamivudine (hbv) TABS</i>	P	
LEDIPASVIR-SOFOSBUVIR TABS	NP	SP
MAVYRET PACK	PA	QL(6 EA daily); SP; PA
MAVYRET TABS	PA	QL(3 EA daily); PA
MAVYRET TABS	PA	QL(3 EA daily); SP; PA
PEGASYS SOLN	NP	SP
PEGASYS SOSY	NP	SP
<i>ribavirin (hepatitis c) CAPS</i>	NP	SP
<i>ribavirin (hepatitis c) TABS 200 MG</i>	NP	SP
SOFOVIR-SOFOSBUVIR VELPATASVIR TABS	PA	QL(1 EA daily); SP; PA
SOVALDI PACK	NP	SP
SOVALDI TABS	NP	SP
VEMLIDY	P	SP
VOSEVI	PA	SP; PA
ZEPATIER	NP	SP
Herpes Agents		
<i>acyclovir CAPS</i>	P	QL(50 EA per 31 day(s) retail)
<i>acyclovir SUSP</i>	P	QL(400 ML per 31 day(s) retail; 400 ML per 31 days mail)
<i>acyclovir TABS PO 800 MG</i>	P	QL(50 EA per 31 day(s) retail)
<i>acyclovir TABS PO 400 MG</i>	P	QL(3 EA daily)
<i>famciclovir</i>	NP	
<i>valacyclovir hcl 1 GM</i>	P	QL(42 EA per 21 day(s) retail)
<i>valacyclovir hcl 500 MG</i>	P	QL(2 EA daily)
VALTrex 1 GM (<i>valacyclovir hcl</i>)	NP	QL(42 EA per 21 day(s) retail)
VALTrex 500 MG (<i>valacyclovir hcl</i>)	NP	QL(2 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
Influenza Agents		
<i>oseltamivir phosphate CAPS 45 MG, 75 MG</i>	C	QL(10 EA per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail
<i>oseltamivir phosphate CAPS 30 MG</i>	C	QL(20 EA per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail
<i>oseltamivir phosphate SUSP</i>	C	QL(120 ML per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail
RELENZA DISKHALER	C	1 package(s) per 31 day(s) retail; AL(At least 5 yrs old)
BETA BLOCKERS - Drugs to Treat High Blood Pressure		
Alpha-Beta Blockers		
<i>carvedilol 3.125 MG, 6.25 MG, 12.5 MG</i>	P	QL(2 EA daily)
<i>carvedilol 25 MG</i>	P	QL(4 EA daily)
<i>carvedilol phosphate</i>	NP	QL(1 EA daily)
<i>labetalol hcl TABS 300 MG</i>	P	QL(8 EA daily)
<i>labetalol hcl TABS 200 MG</i>	P	QL(6 EA daily)
<i>labetalol hcl TABS 100 MG</i>	P	QL(3 EA daily)
<i>labetalol hcl TABS 400 MG</i>	P	
Beta Blockers Cardio-Selective		
<i>acebutolol hcl CAPS</i>	P	
<i>atenolol TABS</i>	P	QL(2 EA daily)
<i>betaxolol hcl</i>	NP	
<i>bisoprolol fumarate</i>	P	QL(1 EA daily)
<i>bisoprolol fumarate 2.5 MG</i>	P	

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
BYSTOLIC (<i>nebivolol hcl</i>)	NP		<i>pindolol TABS</i>	NP	
KAPSPARGO SPRINKLE CS24	NP		<i>propranolol hcl CP24</i>	P	QL(2 EA daily)
LOPRESSOR SOLN PO 10 MG/ML	NP		<i>propranolol hcl SOLN PO 20 MG/5ML, 40 MG/5ML</i>	P	
LOPRESSOR TABS 100 MG (<i>metoprolol tartrate</i>)	NP	QL(4.5 EA daily)	<i>propranolol hcl TABS</i>	P	
LOPRESSOR TABS 50 MG (<i>metoprolol tartrate</i>)	NP	QL(4 EA daily)	<i>sotalol hcl (afib/af)</i>	P	QL(2 EA daily)
<i>metoprolol succinate TB24 25 MG, 50 MG, 100 MG</i>	P	QL(4 EA daily)	<i>sotalol hcl TABS</i>	P	
<i>metoprolol succinate TB24 200 MG</i>	P	QL(2 EA daily)	SOTYLIZE SOLN PO	NP	
<i>metoprolol tartrate TABS 25 MG, 50 MG</i>	P	QL(4 EA daily)	<i>timolol maleate TABS</i>	NP	
<i>metoprolol tartrate TABS 100 MG</i>	P	QL(4.5 EA daily)	CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure		
<i>metoprolol tartrate TABS 37.5 MG, 75 MG</i>	P		Calcium Channel Blockers		
<i>nebivolol hcl</i>	NP		<i>amlodipine besylate TABS</i>	P	QL(1 EA daily)
TENORMIN TABS (<i>atenolol</i>)	NP	QL(2 EA daily)	<i>diltiazem hcl coated beads CP24 360 MG</i>	P	
TOPROL XL TB24 200 MG (<i>metoprolol succinate</i>)	NP	QL(2 EA daily)	<i>diltiazem hcl coated beads CP24 240 MG</i>	P	QL(2 EA daily)
TOPROL XL TB24 25 MG, 50 MG, 100 MG (<i>metoprolol succinate</i>)	NP	QL(4 EA daily)	<i>diltiazem hcl coated beads CP24 120 MG, 180 MG, 300 MG</i>	P	QL(1 EA daily)
Beta Blockers Non-Selective			<i>diltiazem hcl extended release beads 240 MG</i>	P	QL(2 EA daily)
BETAPACE AF (<i>sotalol hcl (afib/af)</i>)	NP	QL(2 EA daily)	<i>diltiazem hcl extended release beads 120 MG, 180 MG, 300 MG, 360 MG, 420 MG</i>	P	QL(1 EA daily)
BETAPACE TABS 80 MG, 120 MG, 160 MG (<i>sotalol hcl</i>)	NP		<i>diltiazem hcl CP12</i>	P	QL(2 EA daily)
HEMANGEOL SOLN PO	NP	SP	<i>diltiazem hcl CP24 240 MG</i>	P	QL(2 EA daily)
INDERAL LA CP24 (<i>propranolol hcl</i>)	NP	QL(2 EA daily)	<i>diltiazem hcl CP24 120 MG, 180 MG</i>	P	QL(1 EA daily)
INDERAL XL	NP		<i>diltiazem hcl TABS</i>	P	QL(3 EA daily)
INNOPRAN XL	NP		<i>diltiazem hcl TB24</i>	P	
<i>nadolol TABS 20 MG, 40 MG, 80 MG</i>	P	QL(2 EA daily)	<i>diltiazem hcl TB24 180 MG, 240 MG, 300 MG, 360 MG, 420 MG</i>	NP	
			<i>felodipine</i>	P	QL(1 EA daily)
			<i>isradipine CAPS</i>	P	
			KATERZIA	NP	
			<i>levamlodipine maleate</i>	NP	

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>nicardipine hcl CAPS</i>	P	
<i>nifedipine CAPS</i>	NP	QL(4 EA daily)
<i>nifedipine TB24 30 MG, 90 MG</i>	P	QL(1 EA daily)
<i>nifedipine TB24 60 MG</i>	P	QL(2 EA daily)
<i>nimodipine CAPS</i>	NP	
<i>nimodipine SOLN</i>	NP	
<i>nisoldipine</i>	NP	
NORLIQVA SOLN	NP	
NORVASC TABS (<i>amlodipine besylate</i>)	NP	QL(1 EA daily)
NYMALIZE SOLN 6 MG/ML	NP	
PROCARDIA XL TB24 30 MG, 90 MG (<i>nifedipine</i>)	NP	QL(1 EA daily)
PROCARDIA XL TB24 60 MG (<i>nifedipine</i>)	NP	QL(2 EA daily)
SULAR 8.5 MG, 17 MG, 34 MG (<i>nisoldipine</i>)	NP	
VERAPAMIL HCL ER CP24 (<i>verapamil hcl</i>)	NP	
<i>verapamil hcl CP24 100 MG, 200 MG, 300 MG</i>	NP	
<i>verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG</i>	P	QL(1 EA daily)
<i>verapamil hcl TABS</i>	P	QL(3 EA daily)
<i>verapamil hcl TBCR</i>	P	QL(2 EA daily)
VERELAN PM CP24 (<i>verapamil hcl</i>)	NP	
CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm		
Cardiac Glycosides		
<i>digoxin SOLN PO 0.05 MG/ML</i>	C	
<i>digoxin TABS 125 MCG, 250 MCG</i>	C	
CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions		

Drug Name	Drug Tier	Requirements/ Limits
Cardiovascular Agents Misc. - Combinations		
<i>amlodipine besylate-atorvastatin calcium</i>	NP	
CADUET 10 MG-10 MG, 10 MG-20 MG, 10 MG-40 MG, 10 MG-80 MG, 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG (<i>amlodipine besylate-atorvastatin calcium</i>)	NP	
ENTRESTO CPSP	P	
ENTRESTO TABS 103 MG-97 MG, 26 MG-24 MG, 51 MG-49 MG (<i>sacubitril-valsartan</i>)	P	Brand Preferred
OPSYNVI	NP	SP
<i>sacubitril-valsartan TABS</i>	NP	Brand Preferred
Cardiovascular Sodium-Glucose Co-Transporter 2 Inhibitors		
INPEFA	NP	
Prostaglandin Vasodilators		
ORENITRAM MONTH 1 TEPK	NP	SP
ORENITRAM MONTH 2 TEPK	NP	SP
ORENITRAM MONTH 3 TEPK	NP	SP
ORENITRAM TBCR	NP	SP
Pulmonary Hypertension - Endothelin Receptor Antagonists		
<i>ambrisentan</i>	P	SP
<i>bosentan TABS</i>	P	SP
<i>bosentan TBSO 32 MG</i>	NP	
LETAIRIS (<i>ambrisentan</i>)	NP	SP
OPSUMIT	NP	SP
TRACLEER TABS (<i>bosentan</i>)	NP	SP

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
TRACLEER TBSO 32 MG (bosentan)	NP	SP
Pulmonary Hypertension - Phosphodiesterase Inhibitors		
ADCIRCA TABS (tadalafil (pulmonary hypertension))	NP	SP
REVATIO TABS (sildenafil citrate (pulmonary hypertension))	NP	SP
sildenafil citrate (pulmonary hypertension) SUSR	NP	SP
sildenafil citrate (pulmonary hypertension) TABs	PA	PA
sildenafil citrate (pulmonary hypertension) TABs	PA	SP; PA
tadalafil (pulmonary hypertension) TABs	PA	SP; PA
TADLIQ SUSP	NP	SP
Pulmonary Hypertension - Prostacyclin Receptor Agonist		
UPTRAVI TITRATION TBPk	NP	SP
UPTRAVI SOLR	C	SP; PA
UPTRAVI TABs	NP	SP
Pulmonary Hypertension - Sol Guanylate Cyclase Stimulator		
ADEMPAS	NP	SP
Transthyretin Stabilizers		
VYNDAMAX	C	SP; PA
CEPHALOSPORINS - Drugs to Treat Bacterial Infections		
Cephalosporins - 1st Generation		
cefadroxil CAPs	P	
cefadroxil SUSR	P	

Drug Name	Drug Tier	Requirements/ Limits
cefadroxil TABs	NP	
cephalexin CAPs	P	
cephalexin CAPs	P	
cephalexin SUSR	P	
cephalexin TABs	P	
Cephalosporins - 2nd Generation		
CEFACLOR ER TB12	NP	
cefaclor CAPs	P	
cefprozil SUSR 125 MG/5ML	P	2 package(s) per fill retail; AL(Up to 12 yrs old)
cefprozil SUSR 250 MG/5ML	P	1 package(s) per fill retail; AL(Up to 12 yrs old)
cefprozil TABs	P	QL(20 EA per fill retail)
cefuroxime axetil TABs 250 MG	P	QL(20 EA per fill retail; 20 per fill mail)
cefuroxime axetil TABs 500 MG	P	QL(20 EA per fill retail)
Cephalosporins - 3rd Generation		
cefdinir CAPs	P	QL(20 EA per fill retail)
cefdinir SUSR	P	1 package(s) per fill retail
cefixime CAPs	P	
cefixime SUSR	P	
cefpodoxime proxetil SUSR	P	
cefpodoxime proxetil TABs	P	
ceftriaxone sodium IJ 1 GM, 250 MG, 500 MG	C	QL(3 EA per fill retail); 1 max fill(s) per 31 day(s) retail
CHEMICALS		
Bulk Chemicals - H's		
HYDROXYUREA	P	
CONTRACEPTIVES - Drugs to Prevent Pregnancy		

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
Combination Contraceptives - Oral		
<i>desogestrel & ethinyl estradiol</i>	C	
<i>desogestrel-ethinyl estradiol (biphasic)</i>	C	
<i>desogestrel-ethinyl estradiol (triphasic)</i>	C	
<i>drospirenone-ethinyl estradiol 0.03 MG-3 MG</i>	C	
<i>drospirenone-ethinyl estradiol 0.02 MG-3 MG</i>	C	QL(1 EA daily)
<i>ethynodiol diacet & eth estrad 50 MCG-1 MG</i>	C	QL(1 EA daily)
<i>ethynodiol diacet & eth estrad 35 MCG-1 MG</i>	C	
<i>levonorgestrel & eth estradiol TABS</i>	C	
<i>levonorgestrel-eth estradiol (triphasic)</i>	C	
<i>levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG</i>	C	
<i>norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG</i>	C	
<i>norethindrone & eth estradiol</i>	C	
<i>norethindrone & ethinyl estradiol-fe</i>	C	
<i>norethindrone acet & eth estra TABS</i>	C	
<i>norethindrone acetate-ethinyl estradiol-fe</i>	C	
<i>norethindrone-eth estradiol (triphasic)</i>	C	
<i>norgestimate-ethinyl estradiol</i>	C	
<i>norgestimate-ethinyl estradiol (triphasic)</i>	C	
<i>norgestrel & ethinyl estradiol 30 MCG-0.3 MG</i>	C	QL(2 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
TYBLUME CHEW	C	
Combination Contraceptives - Transdermal		
<i>norelgestromin-ethinyl estradiol</i>	C	
Combination Contraceptives - Vaginal		
<i>etonogestrel-ethinyl estradiol</i>	C	QL(6 EA per fill retail)
Emergency Contraceptives		
ELLA	C	QL(4 EA per 365 day(s) retail)
<i>levonorgestrel (emergency oc) 1.5 MG</i>	C	QL(1 EA per 21 day(s) retail); 4 max fill(s) per 365 day(s) retail
Progestin Contraceptives - Injectable		
DEPO-SUBQ PROVERA 104 SUSY SC	C	QL(1 ML per fill retail)
<i>medroxyprogesterone acetate (contraceptive) SUSP IM</i>	C	QL(1 ML per fill retail)
<i>medroxyprogesterone acetate (contraceptive) SUSY IM</i>	C	QL(1 ML per fill retail)
Progestin Contraceptives - Oral		
<i>norethindrone (contraceptive)</i>	C	
CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions		
Glucocorticosteroids		
AGAMREE	NP	SP
ALKINDI SPRINKLE CPSP	NP	
<i>budesonide CPEP</i>	P	
<i>budesonide TB24</i>	NP	
CORTEF TABS (hydrocortisone)	NP	

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CORTISONE ACETATE TABS	P		<i>prednisolone sodium phosphate SOLN 20 MG/5ML</i>	P	QL(150 ML per fill retail)
<i>deflazacort SUSP</i>	NP	SP	PREDNISOLONE SODIUM PHOSPHATE TBDP 10 MG, 15 MG, 30 MG	P	
<i>deflazacort TABS</i>	NP		<i>prednisolone SOLN</i>	NP	
<i>deflazacort TABS</i>	NP	SP	<i>prednisolone SOLN</i>	P	
DEXAMETHASONE INTENSOL CONC	NP		<i>prednisolone TABS</i>	NP	
<i>dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML</i>	C	QL(150 ML per 31 day(s) retail)	PREDNISONE INTENSOL CONC	NP	
<i>dexamethasone sodium phosphate SOSY IJ 4 MG/ML</i>	C	QL(150 ML per 31 day(s) retail)	<i>prednisone SOLN</i>	P	
<i>dexamethasone ELIX</i>	P		<i>prednisone TABS</i>	P	
<i>dexamethasone SOLN</i>	P		<i>prednisone TBPk</i>	P	
<i>dexamethasone TABS</i>	P		TARPEYO CPDR	NP	SP
<i>dexamethasone TBPk</i>	P		Mineralocorticoids		
<i>dexamethasone TBPk</i>	NP		<i>fludrocortisone acetate TABS</i>	C	
EMFLAZA SUSP (<i>deflazacort</i>)	NP	SP	COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms		
EMFLAZA TABS (<i>deflazacort</i>)	NP	SP	Antitussives		
EOHILIA SUSP	NP		<i>benzonatate 200 MG</i>	C	QL(3 EA daily); 1 max fill(s) per 31 day(s) retail; AL(At least 10 yrs old)
HEMADY TABS	NP		<i>benzonatate 100 MG</i>	C	QL(6 EA daily); AL(At least 10 yrs old)
<i>hydrocortisone TABS</i>	P		<i>dextromethorphan polistirex SUER</i>	C	QL(240 ML per 6 day(s) retail)
KHINDIVI SOLN PO 1 MG/ML	NP	PA	<i>hydrocodone bitartrate-homatropine methylbromide SOLN</i>	C	AL(At least 18 yrs old)
MEDROL TABS (<i>methylprednisolone</i>)	NP		Cough/Cold/Allergy Combinations		
MEDROL TABS	NP		<i>brompheniramine & phenyleph ELIX</i>	C	QL(120 ML per fill retail); 1 max fill(s) per 31 day(s) retail
MEDROL TBPk (<i>methylprednisolone</i>)	NP				
<i>methylprednisolone TABS</i>	P				
<i>methylprednisolone TBPk</i>	P				
<i>prednisolone sodium phosphate SOLN 5 MG/5ML, 10 MG/5ML, 15 MG/5ML, 25 MG/5ML</i>	P				

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>cetirizine-pseudoephedrine</i>	C	QL(2 EA daily)
CLARINEX-D 12 HOUR TB12	NP	
<i>dextromethorphan-guaifenesin LIQD 100 MG/5ML-5 MG/5ML, 200 MG/5ML-30 MG/5ML, 400 MG/20ML-20 MG/20ML</i>	C	
<i>dextromethorphan-guaifenesin LIQD 100 MG/5ML-10 MG/5ML, 150 MG/7.5ML-15 MG/7.5ML, 200 MG/10ML-20 MG/10ML, 200 MG/5ML-10 MG/5ML</i>	C	QL(240 EA per fill retail)
<i>dextromethorphan-guaifenesin SYRP 100 MG/5ML-10 MG/5ML, 200 MG/10ML-20 MG/10ML</i>	C	QL(240 ML per fill retail)
<i>dextromethorphan-guaifenesin TB12 600 MG-30 MG</i>	C	QL(2 EA daily)
<i>dextromethorphan-phenylephrine-acetaminophen CAPS</i>	C	
ED BRON GP LIQD	C	QL(240 ML per 6 day(s) retail)
<i>guaifenesin-codeine SOLN</i>	C	
<i>guaifenesin-codeine SYRP</i>	C	
LOHIST-D LIQD	C	
<i>loratadine & pseudoephedrine TB12</i>	C	QL(2 EA daily)
<i>loratadine & pseudoephedrine TB24</i>	C	QL(1 EA daily)
MAXI-TUSS PE MAX LIQD	C	QL(240 ML per 6 day(s) retail)
<i>phenylephrine-chlorphen-dm LIQD 10 MG/5ML-4 MG/5ML-15 MG/5ML</i>	C	QL(240 ML per fill retail)

Drug Name	Drug Tier	Requirements/ Limits
<i>promethazine & phenylephrine SYRP</i>	C	QL(240 ML per 6 day(s) retail); AL(At least 2 yrs old)
<i>promethazine w/codeine SOLN</i>	C	QL(240 ML per fill retail); AL(At least 18 yrs old)
<i>promethazine w/codeine SYRP</i>	C	QL(240 ML per fill retail); AL(At least 18 yrs old)
<i>promethazine-dm SYRP</i>	C	QL(240 ML per fill retail); AL(At least 2 yrs old)
<i>promethazine-phenylephrine-codeine</i>	C	QL(240 ML per fill retail); AL(At least 18 yrs old)
<i>pseudoephed-bromphen-dm SYRP 10 MG/5ML-30 MG/5ML-2 MG/5ML</i>	C	QL(240 ML per fill retail)
<i>pseudoephedrine-guaifenesin TB12 600 MG-60 MG</i>	C	QL(210 EA per fill retail)
<i>pseudoephedrine-guaifenesin TB12 1200 MG-120 MG</i>	C	
Expectorants		
<i>guaifenesin TB12 1200 MG</i>	C	
<i>guaifenesin TB12 600 MG</i>	C	QL(40 EA per fill retail); 1 max fill(s) per 31 day(s) retail
<i>potassium iodide (expectorant) SOLN</i>	C	
Misc. Respiratory Inhalants		
<i>sodium chloride (inhalant) NEBU 0.9 %, 3 %, 10 %</i>	C	
Mucolytics		
<i>acetylcysteine SOLN</i>	C	

DERMATOLOGICALS - Drugs to Treat Skin Conditions

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Acne Products			<i>clindamycin phosphate-benzoyl peroxide GEL</i>	NP	
<i>adapalene-benzoyl peroxide GEL</i>	NP		<i>clindamycin phosphate-tretinoin</i>	NP	
<i>adapalene CREA</i>	NP		<i>dapsone (topical)</i>	NP	
<i>adapalene GEL 0.3 %</i>	NP		DIFFERIN CREA (<i>adapalene</i>)	NP	
<i>adapalene GEL 0.3 %</i>	P		DIFFERIN GEL (<i>adapalene</i>)	NP	RX/OTC
AKLIEF	NP		DIFFERIN LOTN	NP	
AVAR LS CLEANSER LIQD (<i>sulfacetamide sodium w/ sulfur</i>)	NP		EPIDUO FORTE GEL (<i>adapalene-benzoyl peroxide</i>)	NP	
<i>benzoyl peroxide-erythromycin GEL</i>	NP		EPSOLAY CREA	NP	
<i>benzoyl peroxide GEL 2.5 %, 5 %, 10 %</i>	C		<i>erythromycin (acne aid) GEL</i>	NP	1 package(s) per fill retail
BENZOYL PEROXIDE GEL	C		<i>erythromycin (acne aid) PADS</i>	P	
<i>benzoyl peroxide LIQD 5 %, 10 %</i>	P		<i>erythromycin (acne aid) SOLN</i>	P	
<i>benzoyl peroxide LOTN 5 %, 10 %</i>	C		FABIOR FOAM	NP	
BENZOYL PEROXIDE LOTN 5 %, 10 %	C		<i>isotretinoin 10 MG, 20 MG, 30 MG, 40 MG</i>	C	QL(2 EA daily); AL(At least 12 yrs old); PA
CLEOCIN-T LOTN (<i>clindamycin phosphate (topical)</i>)	NP		<i>sulfacetamide sodium (acne)</i>	NP	QL(118 ML per fill retail)
<i>clindamycin phosphate (topical) FOAM</i>	NP		<i>sulfacetamide sodium w/ sulfur CREA 10 %-2 %, 10 %-5 %</i>	NP	
<i>clindamycin phosphate (topical) GEL</i>	NP	QL(60 ML per fill retail; 60 per fill mail)	<i>sulfacetamide sodium w/ sulfur EMUL 10 %-1 %</i>	NP	
<i>clindamycin phosphate (topical) LOTN</i>	NP		<i>sulfacetamide sodium w/ sulfur FOAM</i>	NP	
<i>clindamycin phosphate (topical) SOLN</i>	P		<i>sulfacetamide sodium w/ sulfur LIQD</i>	NP	
<i>clindamycin phosphate (topical) SWAB</i>	NP		<i>sulfacetamide sodium w/ sulfur LOTN 9.8 %-4.8 %</i>	NP	
<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	P		<i>sulfacetamide sodium w/ sulfur LOTN 10 %-5 %</i>	NP	1 package(s) per 31 day(s) retail
<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	NP		<i>sulfacetamide sodium w/ sulfur SUSP 10 %-5 %</i>	NP	1 package(s) per fill retail; 1 max fill(s) per 30 day(s) retail

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>sulfacetamide sodium w/ sulfur SUSP 8 %-4 %</i>	NP		<i>gentamicin sulfate (topical) OINT</i>	P	QL(1 GM daily; 30 GM per fill retail)
SULFACETAMIDE SODIUM-SULFUR SUSP	NP		<i>mupirocin calcium (topical)</i>	NP	1 package(s) per 31 day(s) retail
SUMADAN	NP		<i>mupirocin OINT</i>	P	QL(30 GM per 31 day(s) retail)
SUMADAN WASH LIQD (<i>sulfacetamide sodium w/ sulfur</i>)	NP		<i>neomycin-bacitracin-polymyxin OINT</i>	C	QL(60 GM per 31 day(s) retail)
SUMADAN XLT KIT	NP		<i>neomycin-polymyxin w/ pramoxine</i>	C	1 package(s) per fill retail
SUMAXIN CP	NP		XEPI	NP	
SUMAXIN PADS	NP		Antifungals - Topical		
TAZAROTENE FOAM	NP		<i>ciclopirox olamine CREA</i>	P	
<i>tretinoin microsphere</i>	NP		<i>ciclopirox olamine SUSP</i>	P	
<i>tretinoin CREA 0.025 %, 0.05 %, 0.1 %</i>	P	QL(20 GM per fill retail); AL(Up to 35 yrs old)	<i>ciclopirox GEL</i>	NP	
<i>tretinoin GEL 0.05 %</i>	NP		<i>ciclopirox KIT</i>	NP	
<i>tretinoin GEL 0.01 %</i>	P	QL(30 GM per fill retail); AL(Up to 35 yrs old)	<i>ciclopirox SHAM</i>	NP	
<i>tretinoin GEL 0.01 %</i>	P	QL(45 GM per fill retail); AL(Up to 35 yrs old)	<i>ciclopirox SOLN</i>	NP	
<i>tretinoin GEL 0.025 %</i>	P	AL(Up to 35 yrs old)	<i>ciclopirox SOLN</i>	P	
TWYNEO	NP		<i>clotrimazole (topical) CREA</i>	P	QL(60 GM per 31 day(s) retail; 60 GM per 31 days mail); RX/OTC
WINLEVI	NP		<i>clotrimazole (topical) SOLN</i>	P	1 package(s) per fill retail; RX/OTC
ZMA CLEAR SUSP	NP		<i>clotrimazole w/ betamethasone CREA</i>	P	QL(45 GM per 31 day(s) retail)
Agents for External Genital and Perianal Warts			<i>clotrimazole w/ betamethasone LOTN</i>	P	QL(31 ML per 31 day(s) retail)
VEREGEN	NP		<i>econazole nitrate CREA</i>	P	QL(30 GM per fill retail)
Antibiotics - Topical			ECONAZOLE NITRATE FOAM 1 %	NP	
<i>bacitracin (topical) OINT</i>	C	1 package(s) per fill retail	ERTACZO	NP	
<i>bacitracin zinc OINT</i>	C	1 package(s) per fill retail	<i>ketoconazole (topical) CREA</i>	P	1 package(s) per 31 day(s) retail
CENTANY AT KIT	NP		<i>ketoconazole (topical) FOAM</i>	NP	
<i>gentamicin sulfate (topical) CREA</i>	C	QL(1 GM daily; 30 GM per fill retail)			

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>ketoconazole (topical) SHAM 2 %</i>	P	QL(120 ML per fill retail)
KETODAN	NP	
<i>miconazole nitrate (topical) CREA</i>	C	QL(200 GM per 31 day(s) retail)
<i>miconazole-zinc oxide-white petrolatum</i>	NP	
<i>naftifine hcl CREA</i>	NP	
<i>naftifine hcl GEL 2 %</i>	NP	
NAFTIN GEL 2 % (<i>naftifine hcl</i>)	NP	
<i>nystatin (topical) CREA</i>	P	1 package(s) per 31 day(s) retail
<i>nystatin (topical) OINT</i>	P	1 package(s) per fill retail
<i>nystatin (topical) POWD EX</i>	P	1 package(s) per 31 day(s) retail
<i>nystatin-triamcinolone CREA</i>	P	1 package(s) per fill retail
<i>nystatin-triamcinolone OINT</i>	P	1 package(s) per fill retail
<i>oxiconazole nitrate CREA</i>	NP	
OXISTAT LOTN	NP	
<i>tavaborole</i>	NP	
<i>terbinafine hcl (topical) CREA</i>	C	
<i>tolnaftate CREA</i>	C	QL(30 GM per fill retail)
VUSION (<i>miconazole-zinc oxide-white petrolatum</i>)	NP	
Anti-inflammatory Agents - Topical		
<i>diclofenac epolamine PTCH EX</i>	NP	
<i>diclofenac sodium (topical) GEL EX</i>	P	QL(6.68 GM daily); RX/OTC
<i>diclofenac sodium (topical) SOLN EX</i>	NP	
Antineoplastic or Premalignant Lesion Agents - Topical		

Drug Name	Drug Tier	Requirements/ Limits
<i>fluorouracil (topical) CREA 5 %</i>	C	QL(40 GM per 31 day(s) retail)
<i>fluorouracil (topical) CREA 0.5 %</i>	C	
<i>fluorouracil (topical) SOLN</i>	C	QL(10 ML per 31 day(s) retail)
Antipruritics - Topical		
<i>camphor & menthol LOTN</i>	C	1 package(s) per fill retail
Antipsoriatics		
BIMZELX SOAJ	NP	SP
BIMZELX SOSY	NP	SP
<i>calcipotriene CREA</i>	P	1 package(s) per fill retail; 1 max fill(s) per 31 day(s) retail
CALCIPOTRIENE FOAM	NP	
<i>calcipotriene OINT</i>	P	
<i>calcipotriene SOLN</i>	P	1 package(s) per fill retail; 1 max fill(s) per 31 day(s) retail
<i>calcitriol (topical)</i>	NP	
COSENTYX (300 MG DOSE) SOSY	NP	SP
COSENTYX SENSOREADY (300 MG) SOAJ	NP	SP
COSENTYX SENSOREADY PEN SOAJ	NP	SP
COSENTYX UNOREADY SOAJ	NP	SP
COSENTYX SOSY	NP	SP
IMULDOSA SOSY SC 90 MG/ML	NP	SP
IMULDOSA SOSY SC 45 MG/0.5ML	NP	
OTULFI SOLN SC 45 MG/0.5ML	NP	SP
OTULFI SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	SP

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
PYZCHIVA 45 MG/0.5ML, 90 MG/ML	NP	SP
PYZCHIVA SC 45 MG/0.5ML	NP	SP
SELARSDI SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	AL(At least 6 yrs old); SP
SKYRIZI PEN SOAJ	NP	SP
SKYRIZI SOSY	NP	SP
SORILUX FOAM	NP	
SOTYKTU	NP	SP
SPEVIGO SOSY	NP	SP
STARJEMZA SOLN SC 45 MG/0.5ML	NP	SP
STARJEMZA SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	SP
STELARA SOSY	NP	SP
STEQEYMA	NP	SP
TALTZ SOAJ	NP	SP
TALTZ SOSY	NP	SP
<i>tazarotene CREA</i>	NP	1 package(s) per fill retail; AL(Up to 18 yrs old)
<i>tazarotene GEL</i>	NP	1 package(s) per fill retail; AL(Up to 18 yrs old)
TREMFYA ONE-PRESS SOPN SC 100 MG/ML	NP	SP
TREMFYA PEN SOAJ 100 MG/ML	NP	
USTEKINUMAB-AAUZ SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	
USTEKINUMAB-AEKN SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	AL(At least 6 yrs old)
USTEKINUMAB SOSY 45 MG/0.5ML, 90 MG/ML	NP	
USTEKINUMAB-TTWE	NP	
VECTICAL (<i>calcitriol (topical)</i>)	NP	

Drug Name	Drug Tier	Requirements/ Limits
VTAMA	NP	
YESINTEK SOLN 45 MG/0.5ML	NP	SP
YESINTEK SOSY	NP	SP
Antiseborrheic Products		
OVACE PLUS WASH GEL (<i>sulfacetamide sodium</i>)	NP	
OVACE PLUS WASH LIQD (<i>sulfacetamide sodium</i>)	NP	
OVACE PLUS CREA	NP	
OVACE PLUS LOTN	NP	
OVACE PLUS SHAM (<i>sulfacetamide sodium</i>)	NP	
OVACE WASH LIQD (<i>sulfacetamide sodium</i>)	NP	
<i>selenium sulfide LOTN 2.5 %</i>	C	1 package(s) per fill retail; 1 max fill(s) per 30 day(s) retail
<i>selenium sulfide LOTN 1 %</i>	C	1 package(s) per fill retail
<i>selenium sulfide SHAM 1 %</i>	C	1 package(s) per fill retail
<i>sulfacetamide sodium GEL</i>	NP	
<i>sulfacetamide sodium LIQD</i>	NP	
<i>sulfacetamide sodium SHAM 10 %</i>	NP	
Antivirals - Topical		
<i>acyclovir topical CREA</i>	P	1 package(s) per 31 day(s) retail
<i>acyclovir topical OINT</i>	NP	1 package(s) per fill retail
DENAVIR (<i>penciclovir</i>)	NP	
<i>penciclovir</i>	NP	
Burn Products		
<i>silver sulfadiazine</i>	C	
Corticosteroids - Topical		

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>alclometasone dipropionate CREA</i>	P		<i>clobetasol propionate emollient base 0.05 %</i>	P	1 package(s) per fill retail
<i>alclometasone dipropionate OINT</i>	P		<i>clobetasol propionate emulsion</i>	NP	
<i>amcinonide CREA</i>	NP		<i>clobetasol propionate CREA 0.05 %</i>	P	1 package(s) per fill retail
APEXICON E CREA	NP		<i>clobetasol propionate CREA 0.025 %</i>	P	
<i>betamethasone dipropionate (topical) CREA</i>	P	1 package(s) per 30 day(s) retail	<i>clobetasol propionate FOAM</i>	NP	
<i>betamethasone dipropionate (topical) LOTN</i>	P		<i>clobetasol propionate GEL 0.05 %</i>	P	1 package(s) per fill retail
<i>betamethasone dipropionate (topical) OINT</i>	NP		<i>clobetasol propionate LIQD</i>	NP	
<i>betamethasone dipropionate augmented CREA</i>	P	1 package(s) per fill retail	<i>clobetasol propionate LOTN</i>	NP	
<i>betamethasone dipropionate augmented GEL 0.05 %</i>	NP		<i>clobetasol propionate OINT 0.05 %</i>	P	1 package(s) per fill retail
<i>betamethasone dipropionate augmented LOTN</i>	NP		<i>clobetasol propionate SHAM</i>	NP	
<i>betamethasone dipropionate augmented OINT</i>	NP		<i>clobetasol propionate SOLN 0.05 %</i>	P	1 package(s) per fill retail
<i>betamethasone valerate CREA</i>	P		CLOBEX SPRAY LIQD (<i>clobetasol propionate</i>)	NP	
<i>betamethasone valerate FOAM</i>	NP		CLOBEX SHAM (<i>clobetasol propionate</i>)	NP	
<i>betamethasone valerate LOTN</i>	P		<i>clocortolone pivalate</i>	NP	
<i>betamethasone valerate OINT</i>	NP		DERMA-SMOOTH/FS BODY OIL (<i>fluocinolone acetonide</i>)	NP	
<i>calcipotriene-betamethasone dipropionate OINT</i>	NP		DERMA-SMOOTH/FS SCALP OIL (<i>fluocinolone acetonide</i>)	NP	
<i>calcipotriene-betamethasone dipropionate SUSP</i>	NP		<i>desonide CREA</i>	P	QL(2 GM daily)
CAPEX SHAM	NP		<i>desonide LOTN</i>	P	
			<i>desonide OINT</i>	P	QL(2 GM daily)
			<i>desoximetasone CREA</i>	NP	1 package(s) per fill retail
			<i>desoximetasone GEL</i>	NP	
			<i>desoximetasone LIQD</i>	NP	
			<i>desoximetasone OINT</i>	NP	

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>diflorasone diacetate CREA</i>	NP		<i>halobetasol propionate OINT</i>	P	
<i>diflorasone diacetate OINT</i>	NP		HALOG CREA (<i>halcinonide</i>)	NP	
DIPROLENE OINT (<i>betamethasone dipropionate augmented</i>)	NP		HALOG SOLN 0.1 % (<i>halcinonide</i>)	NP	
ENSTILAR FOAM	NP		<i>hydrocortisone (topical) CREA 2.5 %</i>	P	QL(120 GM per 31 day(s) retail)
EPIFOAM FOAM	C		<i>hydrocortisone (topical) CREA 1 %</i>	P	1 package(s) per fill retail; RX/OTC
<i>fluocinolone acetonide CREA</i>	P		<i>hydrocortisone (topical) CREA 0.5 %</i>	C	1 package(s) per fill retail
<i>fluocinolone acetonide OIL</i>	P		<i>hydrocortisone (topical) LOTN 2.5 %</i>	P	1 package(s) per fill retail
<i>fluocinolone acetonide OINT</i>	P		<i>hydrocortisone (topical) OINT 1 %</i>	P	QL(2 GM daily); 1 package(s) per 31 day(s) retail; RX/OTC
<i>fluocinolone acetonide SOLN</i>	P				
<i>fluocinonide emulsified base</i>	P	1 package(s) per fill retail	<i>hydrocortisone (topical) OINT 2.5 %</i>	P	
<i>fluocinonide CREA 0.1 %</i>	P		<i>hydrocortisone (topical) SOLN 2.5 %</i>	NP	
<i>fluocinonide CREA 0.05 %</i>	P	1 package(s) per fill retail	<i>hydrocortisone butyrate CREA</i>	NP	
<i>fluocinonide GEL</i>	P	1 package(s) per fill retail	<i>hydrocortisone butyrate LOTN</i>	NP	
<i>fluocinonide OINT</i>	NP	1 package(s) per fill retail	<i>hydrocortisone butyrate OINT</i>	P	
<i>fluocinonide SOLN</i>	P	1 package(s) per fill retail	<i>hydrocortisone butyrate SOLN</i>	P	
<i>flurandrenolide LOTN</i>	NP		<i>hydrocortisone valerate CREA</i>	P	
<i>fluticasone propionate CREA 0.05 %</i>	P	1 package(s) per 31 day(s) retail	<i>hydrocortisone valerate OINT</i>	NP	
<i>fluticasone propionate LOTN</i>	NP		HYDROXYM GEL	NP	
<i>fluticasone propionate OINT</i>	P	1 package(s) per fill retail	KENALOG AERS (<i>triamcinolone acetonide (topical)</i>)	NP	
<i>halcinonide CREA</i>	NP		<i>mometasone furoate CREA</i>	P	1 package(s) per fill retail
<i>halcinonide SOLN 0.1 %</i>	NP		<i>mometasone furoate OINT</i>	P	1 package(s) per fill retail
<i>halobetasol propionate CREA</i>	P				
<i>halobetasol propionate FOAM</i>	NP				

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>mometasone furoate SOLN</i>	P	1 package(s) per fill retail	ANZUPGO CREA EX 20 MG/GM	NP	
PANDEL	NP		CIBINQO	NP	SP
SYNALAR CREA (<i>fluocinolone acetonide</i>)	NP		DUPIXENT SOAJ	PA	SP; PA
SYNALAR OINT (<i>fluocinolone acetonide</i>)	NP		DUPIXENT SOSY 200 MG/1.14ML, 300 MG/2ML	PA	SP; PA
SYNALAR SOLN (<i>fluocinolone acetonide</i>)	NP		EBGLYSS SOAJ	NP	SP
TACLONEX SUSP (<i>calcipotriene-betamethasone dipropionate</i>)	NP		EBGLYSS SOAJ	NP	
TOPICORT SPRAY LIQD (<i>desoximetasone</i>)	NP		EBGLYSS SOSY	NP	SP
TOPICORT CREA (<i>desoximetasone</i>)	NP	1 package(s) per fill retail	OPZELURA	NP	QL(240 GM per 365 day(s) retail; 240 GM per 365 days mail); AL(At least 2 yrs old)
TOPICORT GEL (<i>desoximetasone</i>)	NP		Emollient/Keratolytic Agents		
TOPICORT OINT (<i>desoximetasone</i>)	NP		<i>urea CREA 40 %</i>	C	RX/OTC
<i>triamcinolone acetonide (topical) AERS</i>	NP		Emollients		
<i>triamcinolone acetonide (topical) CREA 0.1 %</i>	P		AMLACTIN INTENSIVE HEALING LOTN 15 %	C	
<i>triamcinolone acetonide (topical) CREA 0.025 %</i>	P	QL(30 GM per fill retail)	AQUA GLYCOLIC HAND/BODY LOTN	C	
<i>triamcinolone acetonide (topical) CREA 0.5 %</i>	P	1 package(s) per fill retail	AQUA LACTEN LOTN	C	
<i>triamcinolone acetonide (topical) LOTN</i>	P	1 package(s) per fill retail	AQUAMED LOTN	C	
<i>triamcinolone acetonide (topical) OINT 0.05 %, 0.1 %</i>	P		AVEENO DAILY MOISTURIZING LOTN	C	
<i>triamcinolone acetonide (topical) OINT 0.025 %, 0.5 %</i>	P	1 package(s) per fill retail	AVEENO STRESS RELIEF LOTN	C	
ULTRAVATE LOTN	NP		BALMBARR HAND & BODY LOTN	C	
Eczema Agents			BEAUTY 360 ADVANCED SKIN CARE LOTN	C	
ADBRY SOAJ	PA	SP; PA	BETA CARE LOTN	C	
ADBRY SOSY	PA	SP; PA	CAM LOTN	C	
			CERAVE AM SPF 30 LOTN	C	
			CERAVE DAILY MOISTURIZING LOTN	C	
			CERAVE PM LOTN	C	

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CERAVE SA ROUGH & BUMPY SKIN LOTN	C		DIABETIDERM LOTN	C	
CETAPHIL ADVANCED RELIEF LOTN	C		EMOLLIA-LOTION LOTN	C	
CETAPHIL DAILY ADVANCE LOTN	C		<i>emollient</i> LOTN	C	
CETAPHIL DAILY FACIAL SPF 15 LOTN	C		EPILYT LOTN	C	
CETAPHIL MOISTURIZING LOTN	C		EQL ADVANCED RECOVERY LOTN	C	
CETAPHIL RESTORADERM LOTN	C		EQL ULTRA MOISTURIZING DAILY LOTN	C	
CLN FACIAL MOISTURIZER NOURISH LOTN	C		EUCERIN BABY LOTN	C	
COCOA BUTTER HAND & BODY LOTN	C		EUCERIN DAILY HYDRATION SPF15 LOTN	C	
COCOA BUTTER LOTN	C		EUCERIN DAILY HYDRATION LOTN	C	
CVS BEAUTY 360 DRY SKIN LOTN	C		EUCERIN DAILY PROTECTION/SPF30 LOTN	C	
CVS DAILY ULTRA MOISTURE LOTN	C		EUCERIN INTENSIVE REPAIR LOTN	C	
CVS DRY SKIN THERAPY LOTN	C		EUCERIN ORIGINAL HEALING LOTN	C	
CVS GENTLE SKIN CLEANSER LOTN	C		EUCERIN PLUS LOTN	C	
CVS MOISTURIZING LOTN	C		EUCERIN PROFESSIONAL REPAIR LOTN	C	
CVS SKIN THERAPY LOTN	C		EUCERIN ROUGHNESS RELIEF LOTN	C	
DAILY MOISTURIZING LOTN	C		EUCERIN SMOOTHING REPAIR LOTN	C	
DERMAL THERAPY EXTRA STRENGTH LOTN	C		EUCERIN LOTN	C	
DERMAL THERAPY FACE CARE LOTN	C		FLEXITOL SENSITIVE SKIN LOTN	C	
DERMAL THERAPY FOOT MASSAGE LOTN	C		GOLD BOND EVERYDAY MOISTURE LOTN	C	
DERMAL THERAPY HAND/ELBOW LOTN	C		GOLD BOND HEALING LOTN	C	
DERMAL THERAPY HEEL CARE LOTN	C		GOLD BOND MEDICATED BODY EX ST LOTN	C	
			GOLD BOND MEDICATED BODY LOTN	C	

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
GOLD BOND PURE MOISTURE LOTN	C		<i>lactic acid (ammonium lactate) CREA</i>	C	QL(385 GM per 31 day(s) retail); RX/OTC
GOLD BOND ULT SHEER RIBBONS LOTN	C		<i>lactic acid (ammonium lactate) LOTN 12 %</i>	C	QL(567 GM per 31 day(s) retail); RX/OTC
GOLD BOND ULTIMATE HEALING LOTN	C		LUBRIDERM ADVANCED THERAPY LOTN	C	
GOLD BOND ULTIMATE OVERNIGHT LOTN	C		LUBRIDERM DAILY MOISTURE LOTN	C	
GOLD BOND ULTIMATE PROTECTION LOTN	C		LUBRIDERM INTENSE SKIN REPAIR LOTN	C	
GOLD BOND ULTIMATE RESTORING LOTN	C		LUBRIDERM LOTN	C	
GOLD BOND ULTIMATE SOFTENING LOTN	C		LUBRISOFT LOTN	C	
GOLD BOND ULTIMATE SOOTHING LOTN	C		MEDERMA AG HAND & BODY LOTN	C	
GOLD BOND ULTIMATE LOTN	C		MOISTURE-ALL LOTN	C	
HYDRAZONE LOTION LOTN	C		MSM SKIN LOTN	C	
JOHNSONS SKIN NOURISH MOIST LOTN	C		NEUTROGENA MOISTURE SENS SKIN LOTN	C	
KERI ADVANCED MOISTURE THERAPY LOTN	C		NIVEA ESSENTIALLY ENRICHED LOTN	C	
KERI BASIC ESSENTIALS LOTN	C		NIVEA IN-SHOWER LOTN	C	
KERI NOURISHING SHEA BUTTER LOTN	C		NIVEA INTENSE HEALING LOTN	C	
KERI ORIGINAL DAILY MOISTURE LOTN	C		NIVEA SHEA NOURISH LOTN	C	
KERI ORIGINAL LOTN	C		NIVEA VISAGE LOTN	C	
KERI OVERNIGHT LOTN	C		NIVEA LOTN	C	
KERI RENEWAL MILK BODY LOTN	C		PALMERS COCOA BUTTER FORMULA LOTN	C	
KERI RENEWAL SKIN FIRING LOTN	C		PALMERS COCONUT OIL BODY LOTN	C	
KERI RENEWAL STRETCH MARK LOTN	C		PALMERS STRETCH MARKS LOTN	C	
KERI SENSITIVE SKIN LOTN	C		RADIAGUARD ADVANCED LOTN	C	
			RESTA LITE LOTN	C	
			SEBASORB LOTN	C	

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
SKIN REPAIR LOTN	C	
STUDIO 35 EXTRA MOISTURIZING LOTN	C	
VANICREAM LOTN	C	
Hair Growth Agents		
LEQSELVI TABS PO 8 MG	NP	SP
LITFULO	NP	SP
Immunomodulating Agents - Systemic		
NEMLUVIO	NP	SP
Immunomodulating Agents - Topical		
<i>imiquimod 5 %</i>	P	QL(48 EA per 180 day(s) retail)
<i>imiquimod 3.75 %</i>	NP	
Immunosuppressive Agents - Topical		
HYFTOR	NP	
<i>pimecrolimus</i>	P	QL(100 GM per 31 day(s) retail; 100 GM per 31 days mail); AL(At least 2 yrs old)
<i>tacrolimus (topical) OINT 0.1 %</i>	P	QL(100 GM per 31 day(s) retail; 100 GM per 31 days mail); AL(At least 16 yrs old)
<i>tacrolimus (topical) OINT 0.03 %</i>	P	QL(100 GM per 31 day(s) retail; 100 GM per 31 days mail); AL(At least 2 yrs old)
Keratolytic/Antimitotic/Vesicant Agents		
CONDYLOX GEL (<i>podofilox</i>)	NP	
<i>podofilox GEL</i>	NP	
<i>podofilox SOLN</i>	NP	
<i>salicylic acid GEL 6 %</i>	C	

Drug Name	Drug Tier	Requirements/ Limits
SALICYLIC ACID OINT	NP	RX/OTC
Local Anesthetics - Topical		
<i>capsaicin CREA 0.025 %, 0.035 %, 0.075 %, 0.1 %</i>	C	1 package(s) per fill retail
<i>dibucaine</i>	C	1 package(s) per fill retail
<i>lidocaine hcl CREA 3 %, 4 %</i>	C	1 package(s) per fill retail; RX/OTC
<i>lidocaine hcl GEL 2 %</i>	C	QL(1 ML daily; 30 ML per fill retail)
<i>lidocaine CREA 4 %</i>	C	1 package(s) per fill retail
<i>lidocaine-prilocaine CREA</i>	C	1 package(s) per fill retail
Misc. Topical		
<i>zinc oxide (topical) OINT 20 %</i>	C	1 package(s) per fill retail
Phosphodiesterase 4 (PDE4) Inhibitors - Topical		
EUCRISA	NP	
ZORYVE CREA EX	NP	AL(At least 2 yrs old)
ZORYVE FOAM EX	NP	AL(At least 9 yrs old)
Rosacea Agents		
<i>azelaic acid GEL</i>	P	
<i>brimonidine tartrate (topical)</i>	NP	
<i>doxycycline (rosacea)</i>	NP	
FINACEA FOAM	NP	
<i>ivermectin (rosacea)</i>	NP	
METROCREAM CREA (<i>metronidazole (topical)</i>)	NP	QL(45 GM per 31 day(s) retail)
METROGEL GEL 1 % (<i>metronidazole (topical)</i>)	NP	
<i>metronidazole (topical) CREA</i>	P	QL(45 GM per 31 day(s) retail)
<i>metronidazole (topical) GEL 1 %</i>	NP	

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>metronidazole (topical) GEL 1 %</i>	P		ACCU-CHEK AVIVA PLUS STRP	P	RX/OTC
<i>metronidazole (topical) GEL 0.75 %</i>	P	QL(45 GM per 31 day(s) retail)	ACCU-CHEK GUIDE TEST STRP	P	RX/OTC
<i>metronidazole (topical) LOTN</i>	P		ACCU-CHEK SMARTVIEW STRP	P	RX/OTC
MIRVASO (<i>brimonidine tartrate (topical)</i>)	NP		CHEMSTRIP K STRP	C	
ORACEA (<i>doxycycline (rosacea)</i>)	NP		KETONE TEST STRP	C	
RHOFADE	NP		KETOSTIX STRP	C	
SOOLANTRA (<i>ivermectin (rosacea)</i>)	NP		RELION KETONE TEST STRP	C	
Scabicides & Pediculicides			RELION TRUE METRIX TEST STRIPS STRP	P	RX/OTC
<i>crotamiton LOTN</i>	NP	1 package(s) per fill retail	TRUE METRIX BLOOD GLUCOSE TEST STRP	P	RX/OTC
ELIMITE CREA (<i>permethrin</i>)	NP	QL(60 GM per fill retail)	DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes		
<i>malathion</i>	NP	QL(59 ML per fill retail); 2 max fill(s) per 31 day(s) retail	Digestive Enzymes		
NATROBA (<i>spinosad</i>)	P	Brand Preferred	CREON CPEP 120000 UNIT-76000 UNIT-24000 UNIT, 180000 UNIT-114000 UNIT-36000 UNIT, 30000 UNIT-19000 UNIT-6000 UNIT, 60000 UNIT-38000 UNIT-12000 UNIT	P	Smart PA
OVIDE (<i>malathion</i>)	NP	QL(59 ML per fill retail); 2 max fill(s) per 31 day(s) retail	CREON CPEP 15000 UNIT-9500 UNIT-3000 UNIT	P	
<i>permethrin CREA</i>	P	QL(60 GM per fill retail)	PERTZYE CPEP	NP	
<i>permethrin LIQD EX</i>	P		VIOKACE TABS	NP	
<i>pyrethrins-piperonyl butoxide SHAM 4 %-0.33 %</i>	C		ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 252600 UNIT-189600 UNIT-60000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT	P	
<i>spinosad</i>	NP	Brand Preferred			
Tar Products					
<i>coal tar extract SHAM 0.5 %</i>	C				
DIAGNOSTIC PRODUCTS					
Diagnostic Tests					

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure		
Carbonic Anhydrase Inhibitors		
<i>acetazolamide CP12</i>	C	
<i>acetazolamide TABS</i>	C	
<i>methazolamide TABS</i>	C	
Diuretic Combinations		
<i>amiloride & hydrochlorothiazide</i>	C	QL(1 EA daily)
<i>spironolactone & hydrochlorothiazide</i>	C	
<i>triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG</i>	C	
<i>triamterene & hydrochlorothiazide TABS 50 MG-75 MG</i>	C	
<i>triamterene & hydrochlorothiazide TABS 25 MG-37.5 MG</i>	C	QL(2 EA daily)
Loop Diuretics		
<i>bumetanide TABS</i>	C	
<i>furosemide SOLN PO 8 MG/ML, 10 MG/ML</i>	C	
<i>furosemide TABS</i>	C	
<i>torsemide TABS 20 MG</i>	C	
<i>torsemide TABS 5 MG, 10 MG, 100 MG</i>	C	QL(1 EA daily)
Potassium Sparing Diuretics		
<i>amiloride hcl TABS</i>	C	QL(4 EA daily)
<i>spironolactone TABS</i>	C	
Thiazides and Thiazide-Like Diuretics		
<i>chlorthalidone 25 MG, 50 MG</i>	C	
<i>hydrochlorothiazide CAPS</i>	C	
<i>hydrochlorothiazide TABS 25 MG, 50 MG</i>	C	

Drug Name	Drug Tier	Requirements/ Limits
<i>indapamide TABS 1.25 MG, 2.5 MG</i>	C	
<i>metolazone</i>	C	
ENDOCRINE AND METABOLIC AGENTS - MISC. - Drugs to Treat Bone Disease and Regulate Hormones		
Bone Density Regulators		
ACTONEL TABS 150 MG (<i>risedronate sodium</i>)	NP	
ACTONEL TABS 35 MG (<i>risedronate sodium</i>)	NP	QL(4 EA per 28 day(s) retail)
<i>alendronate sodium SOLN</i>	NP	QL(10.8 ML daily)
<i>alendronate sodium TABS 35 MG, 70 MG</i>	P	QL(0.15 EA daily)
<i>alendronate sodium TABS 10 MG</i>	P	QL(1 EA daily)
ATELVIA TBEC (<i>risedronate sodium</i>)	NP	QL(4 EA per 28 day(s) retail)
BINOSTO TBEF	NP	
BONSITY SOPN 560 MCG/2.24ML	NP	
<i>calcitonin (salmon) NA</i>	P	1 package(s) per fill retail
<i>calcitonin (salmon) IJ</i>	C	QL(2 ML per fill retail)
FORTEO SOPN (<i>teriparatide</i>)	NP	
FORTEO SOPN (<i>teriparatide</i>)	NP	SP
FOSAMAX PLUS D	NP	
FOSAMAX TABS 70 MG (<i>alendronate sodium</i>)	NP	QL(0.15 EA daily)
<i>ibandronate sodium TABS</i>	P	
<i>risedronate sodium TABS 5 MG, 30 MG</i>	NP	QL(1 EA daily)
<i>risedronate sodium TABS 150 MG</i>	NP	
<i>risedronate sodium TABS 35 MG</i>	NP	QL(4 EA per 28 day(s) retail)

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>risedronate sodium TBEC</i>	NP	QL(4 EA per 28 day(s) retail)
<i>teriparatide SOPN</i>	P	
<i>teriparatide SOPN</i>	P	SP
TERIPARATIDE SOPN	P	SP
TYMLOS	NP	SP
Growth Hormones		
GENOTROPIN MINIQUICK PRSY	PA	SP; PA
GENOTROPIN CART SC	PA	SP; PA
HUMATROPE CART IJ	NP	SP
NGENLA	NP	SP
NORDITROPIN FLEXPPO SOPN	PA	SP; PA
NUTROPIN AQ NUSPIN 10 SOPN	NP	SP
NUTROPIN AQ NUSPIN 20 SOPN	NP	SP
NUTROPIN AQ NUSPIN 5 SOPN	NP	SP
OMNITROPE SOCT	NP	SP
OMNITROPE SOLR SC	NP	SP
SEROSTIM SC 4 MG, 5 MG, 6 MG	NP	SP
SKYTROFA	NP	SP
SOGROYA	NP	SP
ZOMACTON SOLR SC	NP	SP
Hormone Receptor Modulators		
EVISTA (<i>raloxifene hcl</i>)	NP	QL(1 EA daily)
<i>raloxifene hcl</i>	NP	QL(1 EA daily)
Insulin-Like Growth Factors (Somatomedins)		
INCRELEX	NP	SP
INCRELEX	NP	
LHRH/GnRH Agonist Analog Pituitary Suppressants		
FENSOLVI (6 MONTH) SC	C	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
Metabolic Modifiers		
<i>calcitriol CAPS</i>	C	
GALAFOLD	C	QL(0.5 EA daily); SP; PA
<i>levocarnitine (metabolic modifiers) SOLN PO 1 GM/10ML</i>	C	QL(30 ML daily)
<i>levocarnitine (metabolic modifiers) TABS</i>	C	QL(3 EA daily)
XPHOZAH	NP	SP
Posterior Pituitary Hormones		
<i>desmopressin acetate spray</i>	C	QL(5 ML per fill retail); PA
<i>desmopressin acetate spray refrigerated 0.01 %</i>	C	QL(5 ML per fill retail); PA
<i>desmopressin acetate TABS</i>	C	QL(6 EA daily)
Somatostatic Agents		
<i>octreotide acetate KIT</i>	C	SP; PA
ESTROGENS - Hormone Replacement/Modifying Drugs		
Estrogen Combinations		
COMBIPATCH PTTW	C	Limit 8 patches per month; QL(0.286 EA daily)
<i>estradiol & norethindrone acetate TABS</i>	C	QL(1 EA daily)
<i>norethindrone acetate-ethinyl estradiol</i>	C	
PREMPRO	C	
Estrogens		
ALORA PTTW 0.025 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR	C	Limit 8 patches per month; QL(0.286 EA daily)
<i>estradiol PTTW 0.0375 MG/24HR</i>	C	QL(0.286 EA daily)

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>estradiol PTTW 0.025 MG/24HR, 0.05 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR</i>	C	Limit 8 patches per month; QL(0.286 EA daily)
<i>estradiol PTWK</i>	C	Limit 4 patches per month; QL(0.143 EA daily)
<i>estradiol TABS</i>	C	
<i>estrogens, conjugated TABS 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG</i>	C	QL(1 EA daily)
FLUOROQUINOLONES - Drugs to Treat Bacterial Infections		
Fluoroquinolones		
<i>BAXDELA TABS</i>	NP	
<i>ciprofloxacin hcl TABS 250 MG, 500 MG, 750 MG</i>	P	
<i>CIPRO SUSR</i>	NP	
<i>CIPRO TABS 250 MG, 500 MG (ciprofloxacin hcl)</i>	NP	
<i>levofloxacin SOLN PO</i>	NP	
<i>levofloxacin TABS</i>	P	QL(14 EA per fill retail)
<i>moxifloxacin hcl TABS</i>	NP	
<i>ofloxacin 400 MG</i>	NP	QL(56 EA per fill retail)
<i>ofloxacin 300 MG</i>	NP	
GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs		
5-HT4 Receptor Agonists		
<i>MOTEGRITY (prucalopride succinate)</i>	NP	
<i>prucalopride succinate</i>	NP	
Antiflatulents		
<i>simethicone CHEW 80 MG</i>	C	
<i>simethicone SUSP</i>	C	

Drug Name	Drug Tier	Requirements/ Limits
Bile Acid Synthesis Disorder Agents		
<i>CTEXLI TABS PO 250 MG</i>	C	PA
Gallstone Solubilizing Agents		
<i>ursodiol CAPS</i>	C	
<i>ursodiol TABS 250 MG</i>	C	QL(7 EA daily)
Gastrointestinal Chloride Channel Activators		
<i>AMITIZA (lubiprostone)</i>	NP	
<i>lubiprostone</i>	P	
Gastrointestinal Stimulants		
<i>GIMOTI SOLN NA</i>	NP	SP
<i>metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML</i>	P	
<i>metoclopramide hcl TABS</i>	P	
<i>REGLAN TABS (metoclopramide hcl)</i>	NP	
Inflammatory Bowel Agents		
<i>AVSOLA</i>	C	SP; PA
<i>AZULFIDINE EN-TABS TBEC (sulfasalazine)</i>	NP	
<i>AZULFIDINE TABS (sulfasalazine)</i>	NP	
<i>balsalazide disodium CAPS</i>	P	QL(9 EA daily)
<i>CANASA SUPP (mesalamine)</i>	NP	
<i>CIMZIA (1 SYRINGE) PSKT 200 MG/ML</i>	NP	
<i>CIMZIA (2 SYRINGE) PSKT</i>	NP	SP
<i>CIMZIA KIT</i>	NP	SP
<i>CIMZIA-STARTER PSKT</i>	NP	SP
<i>DIPENTUM</i>	NP	
<i>ENTYVIO PEN SOAJ</i>	NP	SP
<i>INFLECTRA SOLR</i>	C	SP; PA
<i>LIALDA TBEC (mesalamine)</i>	NP	

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>mesalamine w/ cleanser</i>	NP	
<i>mesalamine CP24</i>	P	
<i>mesalamine CPR</i>	NP	Brand Preferred
<i>mesalamine CPDR</i>	NP	
<i>mesalamine ENEM</i>	P	QL(60 ML daily)
<i>mesalamine SUPP</i>	P	
<i>mesalamine TBEC 800 MG</i>	NP	QL(3 EA daily)
<i>mesalamine TBEC 1.2 GM</i>	NP	
OMVOH (300 MG DOSE) SOAJ	NP	SP
OMVOH (300 MG DOSE) SOSY	NP	SP
OMVOH SOAJ	NP	SP
OMVOH SOAJ	NP	
OMVOH SOSY	NP	
OMVOH SOSY	NP	SP
PENTASA CPR	P	Brand Preferred
PENTASA CPR (<i>mesalamine</i>)	P	Brand Preferred
RENFLEXIS	C	SP; PA
ROWASA (<i>mesalamine w/ cleanser</i>)	NP	
SFROWASA ENEM	NP	
SKYRIZI SOCT	NP	SP
<i>sulfasalazine TABS</i>	P	
<i>sulfasalazine TBEC</i>	P	
TREMFYA PEN SOAJ SC 200 MG/2ML	NP	SP
TREMFYA-CD/UC INDUCTION SOAJ SC 200 MG/2ML	NP	
TREMFYA SOSY SC	NP	SP
USTEKINUMAB 130 MG/26ML	NP	SP
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 (encephalopathy)</i>	P	
Irritable Bowel Syndrome (IBS) Agents		
<i>alosetron hcl</i>	NP	
IBSRELA	NP	
LINZESS	P	
LOTIRONEX (<i>alosetron hcl</i>)	NP	
VIBERZI	NP	
Peripheral Opioid Receptor Antagonists		
MOVANTIK	P	
SYMPROIC	NP	
Phosphate Binder Agents		
AURYXIA 210 MG (<i>ferric citrate</i>)	NP	
<i>calcium acetate (phosphate binder) CAPS</i>	P	
<i>calcium acetate (phosphate binder) TABS</i>	P	RX/OTC
<i>calcium acetate (phosphate binder) TABS</i>	NP	RX/OTC
FOSRENOL CHEW (<i>lanthanum carbonate</i>)	NP	
FOSRENOL PACK	NP	
<i>lanthanum carbonate CHEW</i>	NP	
RENVELA PACK (<i>sevelamer carbonate</i>)	NP	
RENVELA TABS (<i>sevelamer carbonate</i>)	NP	
<i>sevelamer carbonate PACK</i>	NP	

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>sevelamer carbonate TABS</i>	P	
<i>sevelamer hcl</i>	NP	
VELPHORO	NP	
GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive Organs and Urinary System		
Alkalinizers		
<i>potassium citrate (alkalinizer) TBCR</i>	C	
<i>sodium citrate & citric acid</i>	C	QL(16.67 ML daily); RX/OTC
Genitourinary Irrigants		
<i>sodium chloride (gu irrigant) 0.9 %</i>	C	
Prostatic Hypertrophy Agents		
<i>alfuzosin hcl</i>	P	
CARDURA XL	NP	
<i>dutasteride</i>	P	
<i>dutasteride-tamsulosin hcl</i>	NP	
<i>finasteride</i>	P	QL(1 EA daily)
PROSCAR (<i>finasteride</i>)	NP	QL(1 EA daily)
RAPAFLO (<i>silodosin</i>)	NP	
<i>silodosin</i>	NP	
<i>tamsulosin hcl</i>	P	QL(2 EA daily)
Urinary Analgesics		
<i>phenazopyridine hcl TABS 100 MG, 200 MG</i>	C	
GOUT AGENTS - Drugs to Treat Gout		
Gout Agent Combinations		
<i>colchicine w/ probenecid</i>	P	
Gout Agents		
<i>allopurinol 200 MG</i>	NP	
<i>allopurinol 100 MG, 300 MG</i>	P	
<i>colchicine CAPS</i>	NP	

Drug Name	Drug Tier	Requirements/ Limits
<i>colchicine TABS</i>	P	QL(6 EA per fill retail); 1 max fill(s) per 31 day(s) retail
COLCRYS TABS (<i>colchicine</i>)	NP	QL(6 EA per fill retail); 1 max fill(s) per 31 day(s) retail
<i>febuxostat</i>	NP	
GLOPERBA SOLN PO	NP	
MITIGARE CAPS (<i>colchicine</i>)	NP	
ULORIC (<i>febuxostat</i>)	NP	
Uricosurics		
<i>probenecid</i>	P	
HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders		
Aminolevulinate Synthase 1-Directed siRNA		
GIVLAARI	C	SP; PA
Bradykinin B2 Receptor Antagonists		
<i>icatibant acetate SOSY</i>	C	SP; PA
Complement Inhibitors		
HAEGARDA SOLR SC	C	SP; PA
TAVNEOS	NP	SP
Hematorheologic Agents		
<i>pentoxifylline</i>	C	
Platelet Aggregation Inhibitors		
<i>aspirin-dipyridamole</i>	NP	
BRILINTA 60 MG, 90 MG (<i>ticagrelor</i>)	P	Brand Preferred; QL(2 EA daily)
<i>cilostazol</i>	C	QL(2 EA daily)
<i>clopidogrel bisulfate 300 MG</i>	P	
<i>clopidogrel bisulfate 75 MG</i>	P	QL(1 EA daily)
<i>dipyridamole</i>	NP	
EFFIENT (<i>prasugrel hcl</i>)	NP	QL(1 EA daily)

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
PLAVIX 75 MG (clopidogrel bisulfate)	NP	QL(1 EA daily)
prasugrel hcl	P	QL(1 EA daily)
ticagrelor 60 MG, 90 MG	NP	Brand Preferred; QL(2 EA daily)
HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders		
Agents for Gaucher Disease		
CERDELGA	C	SP; PA
CEREZYME 400 UNIT	C	SP; PA
Agents for Sickle Cell Disease		
ADAKVEO	C	SP; PA
CASGEVY	PA	SP; PA
DROXIA CAPS	P	
ENDARI (glutamine (sickle cell))	PA	SP; PA
glutamine (sickle cell)	PA	SP; PA
LYFGENIA	PA	SP; PA
SIKLOS TABS	P	
XROMI SOLN PO 100 MG/ML	P	SP
Cobalamins		
cyanocobalamin SOLN IJ 1000 MCG/ML	C	QL(10 ML per 270 day(s) retail)
Folic Acid/Folates		
folic acid TABS 400 MCG	C	QL(1 EA daily)
folic acid TABS 1 MG	C	RX/OTC
Hematopoietic Growth Factors		
ARANESP (ALBUMIN FREE) SOLN	NP	SP
ARANESP (ALBUMIN FREE) SOSY	NP	SP
EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	P	SP

Drug Name	Drug Tier	Requirements/ Limits
MIRCERA	NP	SP
PROCRIT	NP	SP
PROCRIT	NP	SP
REBLOZYL	C	SP
RETACRIT	P	SP
VAFSEO	NP	SP
ZARXIO	C	SP; PA
Iron		
ferrous fumarate TABS	C	QL(2 EA daily)
FERROUS GLUCONATE TABS 324 MG	C	QL(3.34 EA daily)
ferrous sulfate SOLN 15 MG/ML, 15 MG/ML	C	QL(3.4 ML daily)
ferrous sulfate SOLN 220 MG/5ML, 300 MG/6.8ML	C	
ferrous sulfate TABS 325 MG, 65 MG, 325 MG	C	
ferrous sulfate TBEC	C	
IRON CHEWS PEDIATRIC CHEW	C	
polysaccharide iron complex CAPS	C	QL(1 EA daily)
HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders		
Hemostatics - Systemic		
tranexamic acid TABS	C	QL(30 EA per 5 day(s) retail); 1 max fill(s) per 31 day(s) retail; AL(At least 12 yrs old)
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
Antihistamine Hypnotics		
diphenhydramine hcl (sleep) TABS 25 MG	C	QL(1 EA daily)
doxylamine succinate (sleep)	C	
Barbiturate Hypnotics		

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>phenobarbital ELIX</i>	C	
<i>phenobarbital TABS</i>	C	
Hypnotics - Tricyclic Agents		
<i>doxepin hcl (sleep)</i>	NP	
Non-Barbiturate Hypnotics		
AMBIEN CR TBCR (<i>zolpidem tartrate</i>)	NP	
AMBIEN TABS (<i>zolpidem tartrate</i>)	NP	QL(1 EA daily)
DORAL (<i>quazepam</i>)	NP	
EDLUAR SUBL	NP	
<i>estazolam</i>	NP	
<i>eszopiclone</i>	NP	
<i>flurazepam hcl</i>	NP	QL(1 EA daily)
HALCION 0.25 MG (<i>triazolam</i>)	NP	
IGALMI FILM	NP	
<i>midazolam hcl SOLN IJ</i>	C	
MIDAZOLAM HCL SOLN IJ	C	
<i>quazepam</i>	NP	
RESTORIL 7.5 MG, 22.5 MG (<i>temazepam</i>)	NP	
RESTORIL 15 MG, 30 MG (<i>temazepam</i>)	NP	QL(1 EA daily); AL(At least 18 yrs old)
<i>temazepam 7.5 MG, 22.5 MG</i>	P	
<i>temazepam 15 MG, 30 MG</i>	P	QL(1 EA daily); AL(At least 18 yrs old)
<i>triazolam</i>	NP	
<i>zaleplon 5 MG</i>	NP	QL(1 EA daily); AL(At least 18 yrs old)
<i>zaleplon 10 MG</i>	NP	QL(2 EA daily); AL(At least 18 yrs old)
ZOLPIDEM TARTRATE CAPS	NP	
<i>zolpidem tartrate SUBL</i>	NP	

Drug Name	Drug Tier	Requirements/ Limits
<i>zolpidem tartrate TABS</i>	P	QL(1 EA daily)
<i>zolpidem tartrate TBCR</i>	NP	
Orexin Receptor Antagonists		
BELSOMRA	NP	
DAYVIGO	NP	
QUVIVIQ	NP	
Selective Melatonin Receptor Agonists		
HETLIOZ LQ SUSP	NP	SP
HETLIOZ CAPS (<i>tasimelteon</i>)	NP	SP
<i>ramelteon</i>	NP	
ROZEREM (<i>ramelteon</i>)	NP	
<i>tasimelteon CAPS</i>	NP	SP
LAXATIVES - Bowel Treatment Drugs		
Bulk Laxatives		
<i>calcium polycarbophil TABS</i>	C	QL(10 EA daily)
Laxative Combinations		
CLENPIQ SOLN 12 GM/175ML-3.5 GM/175ML-10 MG/175ML	NP	
GOLYTELY SOLR (<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate</i>)	NP	1 package(s) per fill retail
<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid</i>	NP	
<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR</i>	P	1 package(s) per fill retail
<i>peg 3350-potassium chloride-sod bicarbonate-sod chloride</i>	NP	1 package(s) per fill retail
<i>sennosides-docusate sodium TABS</i>	C	QL(4 EA daily)
<i>sodium sulfate-potassium sulfate-magnesium sulfate</i>	NP	
SUFLAVE	NP	

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
SUPREP BOWEL PREP KIT (<i>sodium sulfate-potassium sulfate-magnesium sulfate</i>)	NP	
SUTAB	NP	
Laxatives - Miscellaneous		
<i>glycerin (laxative) SUPP 2 GM</i>	C	
INSTALAX POWD 17 GM/SCOOP	P	QL(34 GM daily)
<i>lactulose PACK</i>	NP	
<i>lactulose SOLN</i>	P	
<i>polyethylene glycol 3350 PACK</i>	P	
<i>polyethylene glycol 3350 POWD</i>	P	QL(34 GM daily)
Saline Laxatives		
<i>magnesium citrate 1.745 GM/30ML</i>	P	
<i>magnesium hydroxide SUSP 7.75 %, 400 MG/5ML, 1200 MG/15ML, 2400 MG/30ML</i>	C	QL(32 ML daily)
<i>sodium phosphates ENEM</i>	C	
Stimulant Laxatives		
<i>bisacodyl SUPP</i>	C	QL(12 EA per fill retail)
<i>bisacodyl TBEC</i>	C	QL(1 EA daily)
<i>sennosides TABS 8.6 MG</i>	C	
Surfactant Laxatives		
<i>docusate sodium CAPS 50 MG</i>	C	
<i>docusate sodium CAPS 100 MG, 250 MG</i>	C	QL(3 EA daily)
<i>docusate sodium LIQD 50 MG/5ML, 100 MG/10ML</i>	C	
DOCUSATE SODIUM SYRP	C	
<i>docusate sodium TABS</i>	C	

Drug Name	Drug Tier	Requirements/ Limits
MACROLIDES - Drugs to Treat Bacterial Infections		
Azithromycin		
<i>azithromycin PACK</i>	P	QL(2 EA per fill retail)
<i>azithromycin SUSR 200 MG/5ML</i>	P	QL(60 ML per fill retail)
<i>azithromycin SUSR 100 MG/5ML</i>	P	1 package(s) per fill retail
<i>azithromycin TABS 500 MG</i>	P	QL(4 EA daily)
<i>azithromycin TABS 250 MG</i>	P	QL(6 EA per fill retail)
<i>azithromycin TABS 600 MG</i>	P	QL(8 EA per 28 day(s) retail)
ZITHROMAX TRI-PAK TABS (<i>azithromycin</i>)	NP	QL(4 EA daily)
ZITHROMAX Z-PAK TABS (<i>azithromycin</i>)	NP	QL(6 EA per fill retail)
ZITHROMAX SUSR 100 MG/5ML (<i>azithromycin</i>)	NP	1 package(s) per fill retail
ZITHROMAX SUSR 200 MG/5ML (<i>azithromycin</i>)	NP	QL(60 ML per fill retail)
ZITHROMAX TABS 250 MG (<i>azithromycin</i>)	NP	QL(6 EA per fill retail)
ZITHROMAX TABS 500 MG (<i>azithromycin</i>)	NP	QL(4 EA daily)
Clarithromycin		
<i>clarithromycin SUSR 125 MG/5ML</i>	P	1 package(s) per fill retail
<i>clarithromycin SUSR 250 MG/5ML</i>	P	2 package(s) per fill retail
<i>clarithromycin TABS</i>	P	QL(28 EA per fill retail)
<i>clarithromycin TB24</i>	NP	QL(14 EA per fill retail)
Erythromycins		
E.E.S. GRANULES SUSR (<i>erythromycin ethylsuccinate</i>)	NP	

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
ERYPED 200 SUSR (erythromycin ethylsuccinate)	NP	
ERYPED 400 SUSR (erythromycin ethylsuccinate)	NP	
erythromycin base CPEP	NP	
erythromycin base TABS	NP	
erythromycin base TBEC	NP	
erythromycin ethylsuccinate SUSR	P	
erythromycin ethylsuccinate TABS	NP	
erythromycin stearate TABS 250 MG	P	
Fidaxomicin		
DIFICID SUSR	P	
DIFICID TABS 200 MG (fidaxomicin)	P	Brand Preferred
fidaxomicin TABS 200 MG	NP	Brand Preferred
MEDICAL DEVICES AND SUPPLIES		
Diabetic Supplies		
ACCU-CHEK GUIDE ME KIT	P	QL(1 EA per 365 day(s) retail); RX/OTC
ACCU-CHEK GUIDE KIT	P	QL(1 EA per 365 day(s) retail); RX/OTC
ACCU-CHEK SOFTCLIX LANCETS	P	RX/OTC
DEXCOM G6 RECEIVER	PA	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); PA
DEXCOM G6 SENSOR	PA	3 package(s) per 90 day(s) retail; 3 package(s) per 90 day(s) mail; PA

Drug Name	Drug Tier	Requirements/ Limits
DEXCOM G6 TRANSMITTER	PA	QL(1 EA per 90 day(s) retail; 1 EA per 90 days mail); PA
DEXCOM G7 15 DAY SENSOR	PA	QL(2 EA per 30 day(s) retail; 2 EA per 30 days mail); AL(At least 18 yrs old); PA
DEXCOM G7 RECEIVER	PA	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); PA
DEXCOM G7 SENSOR	PA	QL(9 EA per 90 day(s) retail); PA
FREESTYLE LIBRE 14 DAY SENSOR	PA	QL(6 EA per 90 day(s) retail); PA
FREESTYLE LIBRE 2 PLUS SENSOR	PA	QL(6 EA per 90 day(s) retail; 6 EA per 90 days mail); PA
FREESTYLE LIBRE 2 READER	PA	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); PA
FREESTYLE LIBRE 2 SENSOR	PA	QL(6 EA per 90 day(s) retail); PA
FREESTYLE LIBRE 3 PLUS SENSOR	PA	QL(6 EA per 90 day(s) retail; 6 EA per 90 days mail); PA
FREESTYLE LIBRE 3 READER	PA	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); PA
FREESTYLE LIBRE 3 SENSOR	PA	QL(6 EA per 90 day(s) retail); PA
OMNIPOD 5 DEXG7G6 INTRO GEN 5 KIT	PA	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); PA

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
OMNIPOD 5 DEXG7G6 PODS GEN 5 MISC	PA	2 package(s) per 30 day(s) retail; 2 package(s) per 30 day(s) mail; PA	Parenteral Therapy Supplies		
OMNIPOD 5 G7 INTRO (GEN 5) KIT	PA	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); PA	AQ INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
OMNIPOD 5 G7 PODS (GEN 5) MISC	PA	2 package(s) per 30 day(s) retail; 2 package(s) per 30 day(s) mail; PA	ASSURE ID INSULIN SAFETY SYR	C	QL(5 EA daily); RX/OTC
OMNIPOD 5 LIBRE2 G6 INTRO GEN5 KIT	PA	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); PA	BD AUTOSHIELD DUO	C	QL(5 EA daily); RX/OTC
OMNIPOD 5 LIBRE2 PLUS G6 PODS MISC	PA	2 package(s) per 30 day(s) retail; 2 package(s) per 30 day(s) mail; PA	BD INSULIN SYR ULTRAFINE II	C	QL(5 EA daily); RX/OTC
OMNIPOD DASH PODS (GEN 4) MISC	PA	2 package(s) per 30 day(s) retail; 2 package(s) per 30 day(s) mail; PA	BD INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
RELION TRUE MET AIR GLUC METER KIT	P	QL(1 EA per 365 day(s) retail); RX/OTC	BD INSULIN SYRINGE MICROFINE	C	QL(5 EA daily); RX/OTC
TRUE METRIX AIR GLUCOSE METER KIT	P	QL(1 EA per 365 day(s) retail); RX/OTC	BD INSULIN SYRINGE U/F	C	QL(5 EA daily); RX/OTC
TRUE METRIX METER KIT	P	QL(1 EA per 365 day(s) retail); RX/OTC	BD INSULIN SYRINGE ULTRAFINE	C	QL(5 EA daily)
TRUEPLUS LANCETS 28G	P	RX/OTC	BD PEN NEEDLE MICRO ULTRAFINE	C	QL(5 EA daily)
TRUEPLUS LANCETS 30G	P	RX/OTC	BD PEN NEEDLE MINI ULTRAFINE	C	QL(5 EA daily); RX/OTC
TRUEPLUS LANCETS 33G	P	RX/OTC	BD PEN NEEDLE NANO 2ND GEN	C	QL(5 EA daily); RX/OTC
			BD PEN NEEDLE NANO ULTRAFINE	C	QL(5 EA daily); RX/OTC
			BD PEN NEEDLE ORIG ULTRAFINE	C	QL(5 EA daily)
			BD PEN NEEDLE SHORT ULTRAFINE	C	QL(5 EA daily); RX/OTC
			BD VEO INSULIN SYR ULTRAFINE	C	QL(5 EA daily); RX/OTC
			CAREONE INSULIN SYRINGE	C	QL(5 EA daily)
			CARETOUCH INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
			COMFORT EZ INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
			DROPLET INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
			EASY TOUCH FLIPLOCK INSULIN SY	C	QL(5 EA daily); RX/OTC
			EASY TOUCH INSULIN BARRELS	C	QL(5 EA daily); RX/OTC

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
EASY TOUCH INSULIN SAFETY SYR	C	QL(5 EA daily); RX/OTC	LITETOUCH INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
EASY TOUCH INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	MAGELLAN INSULIN SAFETY SYR	C	QL(5 EA daily); RX/OTC
EASY TOUCH SHEATHLOCK SYRINGE	C	QL(5 EA daily); RX/OTC	MAXI-COMFORT INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
EMBECTA INSULIN SYR ULTRAFINE	C	QL(5 EA daily); RX/OTC	MAXICOMFORT SYR 27G X 1/2"	C	QL(5 EA daily); RX/OTC
EMBECTA INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	MEDIC INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
EMBECTA INSULIN SYRINGE U-100	C	QL(5 EA daily); RX/OTC	MM INSULIN SYRINGE/NEEDLE	C	QL(5 EA daily); RX/OTC
EMBECTA PEN NEEDLE ULTRAFINE	C	QL(5 EA daily)	MONOJECT INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
FIFTY50 SUPERIOR COMFORT SYR	C	QL(5 EA daily); RX/OTC	MONOJECT ULTRA COMFORT SYRINGE	C	QL(5 EA daily); RX/OTC
GLUCOPRO INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	PRECISION SURE-DOSE SYRINGE	C	QL(5 EA daily); RX/OTC
GNP INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	PRODIGY INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
GNP INSULIN SYRINGES	C	QL(5 EA daily); RX/OTC	PX INSULIN SYRINGE	C	QL(5 EA daily)
GNP INSULIN SYRINGES 28GX1/2"	C	QL(5 EA daily); RX/OTC	REALITY INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
GNP INSULIN SYRINGES 29GX1/2"	C	QL(5 EA daily); RX/OTC	RELION INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
GNP INSULIN SYRINGES 30GX5/16"	C	QL(5 EA daily); RX/OTC	SB INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
GNP INSULIN SYRINGES 31GX5/16"	C	QL(5 EA daily); RX/OTC	SECURESAFE INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
GNP ULTRA COM INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	SURE COMFORT INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
HEALTHWISE INSULIN SYR/NEEDLE	C	QL(5 EA daily); RX/OTC	TECHLITE INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
HM ULTICARE INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	TRUE COMFORT INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	TRUE COMFORT PRO INSULIN SYR	C	QL(5 EA daily); RX/OTC
INSULIN SYRINGE-NEEDLE U-100	C	QL(5 EA daily); RX/OTC	TRUEPLUS 5-BEVEL PEN NEEDLES	C	QL(5 EA daily)
KINRAY INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	TRUEPLUS INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TRUEPLUS PEN NEEDLES	C	QL(5 EA daily); RX/OTC	AEROCHAMBER PLUS FLO-VU SMALL MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC
ULTRA COMFORT INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	AEROCHAMBER PLUS FLO-VU W/MASK MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC
ULTRA FLO INSULIN SYR 1/2 UNIT	C	QL(5 EA daily); RX/OTC	AEROCHAMBER PLUS FLO-VU MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC
ULTRA FLO INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	AEROCHAMBER PLUS FLOW VU MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC
ULTRACARE INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	AEROCHAMBER W/FLOWSIGNAL MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC
ULTRA-THIN II INS SYR SHORT	C	QL(5 EA daily); RX/OTC	AEROCHAMBER Z-STAT PLUS CHAMBR MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC
ULTRA-THIN II INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	AEROCHAMBER Z-STAT PLUS/LARGE MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC
Respiratory Therapy Supplies			AEROCHAMBER Z-STAT PLUS/MEDIUM MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC
AEROCHAMBER HOLDING CHAMBER DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	AEROCHAMBER Z-STAT PLUS/SMALL MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC
AEROCHAMBER MINI CHAMBER DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	AEROCHAMBER Z-STAT PLUS MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC
AEROCHAMBER MV MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC	AEROCHAMBER2GO ANTI-STATIC DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
AEROCHAMBER PLS FLOVU MTHPIECE DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	AEROVENT PLUS DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLO-VU INTERM DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	BREATHE COMFORT CHAMBER/ADULT DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLO-VU LARGE DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	BREATHE COMFORT CHAMBER/CHILD DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLO-VU LARGE MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC	BREATHE EASE LARGE DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLO-VU MEDIUM DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	BREATHE EASE MEDIUM DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLO-VU MEDIUM MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC			
AEROCHAMBER PLUS FLO-VU SMALL DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC			

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
BREATHE EASE SMALL DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	FLEXICHAMBER CHILD MASK/LARGE	C	QL(2 EA per 360 day(s) retail); RX/OTC
BREATHERITE VALVED MDI CHAMBER DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	FLEXICHAMBER CHILD MASK/SMALL	C	QL(2 EA per 360 day(s) retail); RX/OTC
CLEVER CHOICE HOLDING CHAMBER DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	FLEXICHAMBER DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
COMPACT SPACE CHAMBER/LG MASK DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	INSPIREASE RESERVOIR BAGS	C	QL(3 EA per 180 day(s) retail)
COMPACT SPACE CHAMBER/MED MASK DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	INSPIREASE MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC
COMPACT SPACE CHAMBER/SM MASK DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	MASK VORTEX/CHILD/FROG	C	QL(2 EA per 360 day(s) retail); RX/OTC
COMPACT SPACE CHAMBER DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	MASK VORTEX/TODDLER/LAD YBUG	C	QL(2 EA per 360 day(s) retail); RX/OTC
EASIVENT MASK LARGE MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC	MICROCHAMBER DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
EASIVENT MASK MEDIUM MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC	MICROCHAMBER MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC
EASIVENT MASK SMALL MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC	MICROSPACER MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC
EASIVENT MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC	OPTICHAMBER DIAMOND DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
EQ SPACE CHAMBER ANTI-STATIC L DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	OPTICHAMBER DIAMOND-LG MASK DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
EQ SPACE CHAMBER ANTI-STATIC M DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	OPTICHAMBER DIAMOND-MD MASK MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC
EQ SPACE CHAMBER ANTI-STATIC S DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	OPTICHAMBER DIAMOND MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC
EQ SPACE CHAMBER ANTI-STATIC DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	OPTICHAMBER DIAMOND-SM MASK MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC
FLEXICHAMBER ADULT MASK/SMALL	C	QL(2 EA per 360 day(s) retail); RX/OTC	PANDA MASK LARGE	C	QL(2 EA per 360 day(s) retail); RX/OTC

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PANDA MASK MEDIUM	C	QL(2 EA per 360 day(s) retail); RX/OTC	VORTEX HOLD CHMBR/MASK/TODDLER DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
PANDA MASK SMALL	C	QL(2 EA per 360 day(s) retail); RX/OTC	VORTEX VALVE CHAMBER-PEDI MASK DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
PARI VORTEX ADULT MASK	C	QL(2 EA per 360 day(s) retail); RX/OTC	VORTEX VALVED HOLDING CHAMBER DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
PARI VORTEX PEDIATRIC MASK	C	QL(2 EA per 360 day(s) retail); RX/OTC	MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches		
PEDIATRIC PANDA MASK	C	QL(2 EA per 360 day(s) retail); RX/OTC	Calcitonin Gene-Related Peptide (CGRP) Receptor Antag		
POCKET CHAMBER DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	AIMOVIG	NP	SP
POCKET SPACER DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	AJOVY SOAJ	PA	SP; PA
PRO COMFORT SPACER ADULT MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC	AJOVY SOSY	PA	SP; PA
PRO COMFORT SPACER CHILD MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC	EMGALITY (300 MG DOSE) SOSY	NP	SP
PRO COMFORT SPACER INFANT DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	EMGALITY SOAJ	PA	SP; PA
PROCARE SPACER/ADULT MASK DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	EMGALITY SOSY	PA	SP; PA
PROCARE SPACER/CHILD MASK DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	NURTEC	NP	
PROCHAMBER VHC DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	QULIPTA	PA	PA
PURE COMFORT SPACER CHAMBER DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	UBRELVY	PA	PA
RITEFLO DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	ZAVZPRET	NP	
VORTEX HOLD CHMBR/MASK/CHILD DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	Migraine Combinations		
			<i>sumatriptan-naproxen sodium</i>	NP	
			SYMBRAVO TABS PO	NP	
			Serotonin Agonists		
			<i>almotriptan malate</i>	NP	
			<i>eletriptan hydrobromide</i>	NP	Brand Preferred; QL(6 EA per 31 day(s) retail)
			FROVA (<i>frovatriptan succinate</i>)	NP	
			<i>frovatriptan succinate</i>	NP	

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
IMITREX STATDOSE REFILL SOCT 4 MG/0.5ML	NP		<i>sumatriptan 20 MG/ACT</i>	NP	20 MG/ACT; Brand Preferred; QL(6 EA per 31 day(s) retail); AL(At least 12 yrs old)
IMITREX STATDOSE REFILL SOCT 6 MG/0.5ML	NP	QL(2 ML per 31 day(s) retail); AL(At least 12 yrs old)	<i>sumatriptan 5 MG/ACT</i>	NP	5 MG/ACT; Brand Preferred; QL(6 EA per 31 day(s) retail); AL(At least 12 yrs old)
IMITREX STATDOSE SYSTEM SOAJ 6 MG/0.5ML (<i>sumatriptan succinate</i>)	NP	QL(2 ML per 31 day(s) retail); AL(At least 12 yrs old)	<i>sumatriptan succinate SOAJ 6 MG/0.5ML</i>	P	QL(2 ML per 31 day(s) retail); AL(At least 12 yrs old)
IMITREX STATDOSE SYSTEM SOAJ 4 MG/0.5ML	NP		<i>sumatriptan succinate SOLN 6 MG/0.5ML</i>	P	QL(2.5 ML per 30 day(s) retail); AL(At least 12 yrs old)
IMITREX TABS (<i>sumatriptan succinate</i>)	NP	QL(9 EA per 31 day(s) retail); AL(At least 12 yrs old)	<i>sumatriptan succinate TABS</i>	P	QL(9 EA per 31 day(s) retail); AL(At least 12 yrs old)
MAXALT-MLT TBDP 10 MG (<i>rizatriptan benzoate</i>)	NP	QL(12 EA per 31 day(s) retail); AL(At least 6 yrs old)	TOSYMRA	NP	
MAXALT TABS 10 MG (<i>rizatriptan benzoate</i>)	NP	QL(12 EA per 31 day(s) retail); AL(At least 6 yrs old)	ZEMBRACE SYMTOUCH SOAJ	NP	
<i>naratriptan hcl</i>	NP	QL(9 EA per 31 day(s) retail); AL(At least 18 yrs old)	<i>zolmitriptan SOLN 2.5 MG</i>	NP	
RELPAx (<i>eletriptan hydrobromide</i>)	P	Brand Preferred; QL(6 EA per 31 day(s) retail)	<i>zolmitriptan SOLN 5 MG</i>	NP	QL(6 EA per 31 day(s) retail); AL(At least 12 yrs old)
RELPAx (<i>eletriptan hydrobromide</i>)	P	Brand Preferred ; QL(6 EA per 31 day(s) retail)	<i>zolmitriptan TABS</i>	NP	QL(6 EA per 31 day(s) retail)
<i>rizatriptan benzoate TABS</i>	P	QL(12 EA per 31 day(s) retail); AL(At least 6 yrs old)	<i>zolmitriptan TBDP</i>	NP	QL(6 EA per 31 day(s) retail)
<i>rizatriptan benzoate TBDP</i>	P	QL(12 EA per 31 day(s) retail); AL(At least 6 yrs old)	ZOMIG SOLN 5 MG (<i>zolmitriptan</i>)	NP	QL(6 EA per 31 day(s) retail); AL(At least 12 yrs old)
			ZOMIG SOLN 2.5 MG (<i>zolmitriptan</i>)	NP	
MINERALS & ELECTROLYTES					
Calcium					

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>calcium carbonate-cholecalciferol TABS 10 MCG-600 MG, 400 UNIT-600 MG</i>	C	QL(2 EA daily)	<i>sodium fluoride SOLN 0.5 MG/ML</i>	C	RX/OTC
<i>calcium carbonate-cholecalciferol TABS 200 UNIT-500 MG, 5 MCG-500 MG, 500 MG-5 MCG</i>	C		SODIUM FLUORIDE SOLN 0.5 MG/ML	C	RX/OTC
<i>oyster shell</i>	C		Magnesium		
Electrolyte Mixtures			<i>magnesium oxide (mg supplement) TABS</i>	C	
BIOLYTE SOLN	C		Phosphate		
CERASPORT EX1 SOLN	C		<i>pot phosphate monobasic w/ sod phosphate dibasic & monobasic</i>	C	QL(8 EA daily); RX/OTC
CERASPORT SOLN	C		Potassium		
ENFAMIL ENFALYTE SOLN	C		<i>potassium bicarbonate TBEF</i>	C	
FT ELECTROLYTE SOLN	C		<i>potassium chloride microencapsulated crystals er</i>	C	
GNP ELECTROLYTE SOLUTION SOLN 280 MG/360ML-370 MG/360ML-2.8 MG/360ML-440 MG/360ML, 9 GM/360ML-280 MG/360ML-370 MG/360ML-2.8 MG/360ML-440 MG/360ML	C		<i>potassium chloride CPCR 8 MEQ</i>	C	QL(1 EA daily)
GOODSENSE ELECTROLYTE ADV CARE SOLN	C		<i>potassium chloride CPCR 10 MEQ</i>	C	
HYDRALYTE FREEZER POPS SOLN	C		<i>potassium chloride PACK PO 20 MEQ</i>	C	
HYDRALYTE SOLN	C		<i>potassium chloride SOLN PO 10 %, 20 %, 10 %</i>	C	
KINDERLYTE PREMAX SOLN	C		<i>potassium chloride TBCR</i>	C	
KINDERLYTE SOLN	C		MISCELLANEOUS THERAPEUTIC CLASSES		
<i>oral electrolytes SOLN</i>	C		Chelating Agents		
PEDIALYTE IMMUNE SUPPORT SOLN	C		<i>penicillamine TABS</i>	C	
TRUELYTE SOLN	C		Immunomodulators		
Fluoride			REZUROCK	NP	SP
<i>sodium fluoride CHEW</i>	C		RHAPSIDO TABS PO 25 MG	NP	AL(At least 18 yrs old); SP
			Immunosuppressive Agents		
			ASTAGRAF XL CP24	NP	
			<i>azathioprine TABS</i>	P	
			CELLCEPT CAPS (<i>mycophenolate mofetil</i>)	NP	

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CELLCEPT SUSR (mycophenolate mofetil)	NP		ZORTRESS (everolimus (immunosuppressant))	NP	
CELLCEPT TABS (mycophenolate mofetil)	NP		Potassium Removing Agents		
cyclosporine modified (for microemulsion) CAPS	P		LOKELMA	P	
cyclosporine modified (for microemulsion) SOLN	P		sodium polystyrene sulfonate POWD	P	
cyclosporine CAPS	P	USE BRAND NAME or Authorized Generic SP	sodium polystyrene sulfonate SUSP PR 30 GM/120ML	P	
ENSPRYNG	NP		sodium polystyrene sulfonate SUSP CO 15 GM/60ML	P	
ENVARUS XR TB24	NP		VELTASSA 1 GM, 8.4 GM, 16.8 GM	P	
everolimus (immunosuppressant)	NP		MOUTH/THROAT/DENTAL AGENTS		
IMURAN TABS (azathioprine)	NP		Anesthetics Topical Oral		
mycophenolate mofetil CAPS	P		lidocaine hcl (mouth- throat) 2 %	C	QL(100 ML per fill retail)
mycophenolate mofetil SUSR	P		Anti-infectives - Throat		
mycophenolate mofetil TABS	P		NYSTATIN (nystatin (mouth-throat))	P	2 package(s) per fill retail
mycophenolate sodium	P		nystatin (mouth-throat)	P	2 package(s) per fill retail
MYFORTIC (mycophenolate sodium)	NP		Antiseptics - Mouth/Throat		
MYHIBBIN SUSP	NP		chlorhexidine gluconate (mouth-throat)	C	
NEORAL CAPS (cyclosporine modified (for microemulsion))	NP		Dental Products		
NEORAL SOLN (cyclosporine modified (for microemulsion))	NP		sodium fluoride (dental) CREA	C	QL(113 GM per 60 day(s) retail)
PROGRAF CAPS (tacrolimus)	NP		sodium fluoride (dental) GEL	C	QL(113 GM per 60 day(s) retail)
PROGRAF PACK	NP		sodium fluoride (dental) PSTE DT	C	QL(113 GM per 60 day(s) retail)
SANDIMMUNE CAPS (cyclosporine)	P		Steroids - Mouth/Throat/Dental		
sirolimus SOLN	P		triamcinolone acetonide (mouth)	C	1 package(s) per fill retail
sirolimus TABS	P		Throat Products - Misc.		
tacrolimus CAPS	P		pilocarpine hcl (oral) 5 MG	C	QL(6 EA daily)

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MULTIVITAMINS			ALIVE DIABETIC MULTIVITAMIN TABS	C	QL(1 EA daily); RX/OTC
B-Complex Vitamins			ALIVE ENERGY 50+ TABS	C	QL(1 EA daily); RX/OTC
<i>b-complex vitamins CAPS</i>	C	QL(1 EA daily)	ALIVE EVERYDAY IMMUNE HEALTH CAPS	C	QL(1 EA daily); RX/OTC
<i>b-complex vitamins TABS</i>	C	QL(1 EA daily)	ALIVE GARDEN GOODNESS TABS	C	QL(1 EA daily); RX/OTC
B-Complex w/ C			ALIVE HAIR, SKIN & NAILS CAPS	C	QL(1 EA daily); RX/OTC
<i>b complex w/ c CAPS</i>	C	RX/OTC	ALIVE MAX 6 POTENCY CAPS	C	QL(1 EA daily); RX/OTC
LUMAVEX CAPS	C	RX/OTC	ALIVE MENS 50+ ULTRA TABS	C	QL(1 EA daily); RX/OTC
LUNAVIRA CAPS	C	RX/OTC	ALIVE MENS 50+ TABS	C	QL(1 EA daily); RX/OTC
B-Complex w/ Folic Acid			ALIVE MENS COMPLETE MULTI TABS	C	QL(1 EA daily); RX/OTC
<i>b-complex w/ c & folic acid CAPS</i>	C	QL(1 EA daily); RX/OTC	ALIVE MENS ULTRA TABS	C	QL(1 EA daily); RX/OTC
Multiple Vitamins w/ Calcium			ALIVE ONCE DAILY WOMENS TABS	C	QL(1 EA daily); RX/OTC
<i>multiple vitamins w/ calcium TABS</i>	C	QL(1 EA daily)	ALIVE ULTRA POTENCY ADULT TABS	C	QL(1 EA daily); RX/OTC
Multiple Vitamins w/ Minerals			ALIVE ULTRA POTENCY WOMENS 50+ TABS	C	QL(1 EA daily); RX/OTC
ABC COMPLETE ADULT TABS	C	QL(1 EA daily); RX/OTC	ALIVE WOMENS 50+ COMPLETE MV TABS	C	QL(1 EA daily); RX/OTC
ABC COMPLETE MENS TABS	C	QL(1 EA daily); RX/OTC	ALIVE WOMENS ENERGY TABS	C	QL(1 EA daily); RX/OTC
ABC COMPLETE SENIOR 50+ TABS	C	QL(1 EA daily); RX/OTC	ALPHA BETIC TABS	C	QL(1 EA daily); RX/OTC
ABC COMPLETE SENIOR MENS 50+ TABS	C	QL(1 EA daily); RX/OTC	ANTIOXIDANT FORMULA TABS	C	QL(1 EA daily); RX/OTC
ABC COMPLETE SENIOR WOMENS 50+ TABS	C	QL(1 EA daily); RX/OTC	APETIBEX CAPS	C	QL(1 EA daily); RX/OTC
ABC COMPLETE WOMENS TABS	C	QL(1 EA daily); RX/OTC	APPE-CURB CAPS	C	QL(1 EA daily); RX/OTC
ACTIVNUTRIENTS PERFORMANCE CAPS	C	QL(1 EA daily); RX/OTC	AZO HORMONAL HEALTH CYCLE CARE TABS	C	QL(1 EA daily); RX/OTC
ACTIVNUTRIENTS W/O IRON CAPS	C	QL(1 EA daily); RX/OTC	AZO HORMONAL HEALTH HAPPY CYCL TABS	C	QL(1 EA daily); RX/OTC
ACTIVNUTRIENTS CAPS	C	QL(1 EA daily); RX/OTC			
AFLORA TABS	C	QL(1 EA daily); RX/OTC			
ALIVE CALCIUM BONE SUPPORT TABS	C	QL(1 EA daily); RX/OTC			
ALIVE DAILY ENERGY TABS	C	QL(1 EA daily); RX/OTC			

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
BACMIN TABS	C	QL(1 EA daily); RX/OTC
BARIATRIC MULTIVITAMINS/IRON CAPS	C	QL(1 EA daily); RX/OTC
BARIATRIC MULTIVITAMINS CAPS	C	QL(1 EA daily); RX/OTC
BARIATRIC MULTIVITAMINS TABS	C	QL(1 EA daily); RX/OTC
BASIC AM TABS	C	QL(1 EA daily); RX/OTC
BASIC PM TABS	C	QL(1 EA daily); RX/OTC
BIO-35 GLUTEN-FREE CAPS	C	QL(1 EA daily); RX/OTC
BIO-35 IRON FREE CAPS	C	QL(1 EA daily); RX/OTC
BIOCAL CAPS	C	QL(1 EA daily); RX/OTC
BIOTECT PLUS CAPS	C	QL(1 EA daily); RX/OTC
BLOOD SUGAR MANAGER TABS	C	QL(1 EA daily); RX/OTC
BONEUP 3 PER DAY CAPS	C	QL(1 EA daily); RX/OTC
BONEUP VEGETARIAN TABS	C	QL(1 EA daily); RX/OTC
BONEUP CAPS	C	QL(1 EA daily); RX/OTC
BOOSTNOW IMMUNE SUPPORT CAPS	C	QL(1 EA daily); RX/OTC
CELEBRATE MULTI- COMPLETE 18 CAPS	C	QL(1 EA daily); RX/OTC
CELEBRATE MULTI- COMPLETE 36 CAPS	C	QL(1 EA daily); RX/OTC
CELEBRATE MULTI- COMPLETE 45 CAPS	C	QL(1 EA daily); RX/OTC
CELEBRATE MULTI- COMPLETE 60 CAPS	C	QL(1 EA daily); RX/OTC
CENTRAVITES 50 PLUS TABS	C	QL(1 EA daily); RX/OTC
CENTRAVITES ADULTS TABS	C	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
CENTRUM CARDIO TABS	C	QL(1 EA daily); RX/OTC
CENTRUM MENOPAUSE HOT FLASH TABS	C	QL(1 EA daily); RX/OTC
CENTRUM MEN TABS	C	QL(1 EA daily); RX/OTC
CENTRUM MINIS ADULTS 50+ TABS	C	QL(1 EA daily); RX/OTC
CENTRUM MINIS MEN 50+ TABS	C	QL(1 EA daily); RX/OTC
CENTRUM MINIS WOMEN 50+ TABS	C	QL(1 EA daily); RX/OTC
CENTRUM MINIS WOMEN IMMUNE SUP TABS	C	QL(1 EA daily); RX/OTC
CENTRUM SILVER ULTRA WOMENS TABS	C	QL(1 EA daily); RX/OTC
CENTRUM SPECIALIST HEART TABS	C	QL(1 EA daily); RX/OTC
CENTRUM SPECIALIST IMMUNE TABS	C	QL(1 EA daily); RX/OTC
CENTRUM SPECIALIST VISION TABS	C	QL(1 EA daily); RX/OTC
CENTRUM ULTRA WOMENS TABS	C	QL(1 EA daily); RX/OTC
CERTAVITE SENIOR/ANTIOXIDANT TABS	C	QL(1 EA daily); RX/OTC
CERTAVITE SENIOR TABS	C	QL(1 EA daily); RX/OTC
CERTAVITE/ANTIOXIDA NTS TABS	C	QL(1 EA daily); RX/OTC
CHOICEFUL MULTIVITAMIN CAPS	C	QL(1 EA daily); RX/OTC
CITRACAL +D3 TABS	C	QL(1 EA daily); RX/OTC
CULTURELLE PROBIOTIC MEN DAILY CAPS	C	QL(1 EA daily); RX/OTC
CVS ADULT 50+ EYE HEALTH CAPS	C	QL(1 EA daily); RX/OTC
CVS DAILY MULTIV/MINERAL MENS TABS	C	QL(1 EA daily); RX/OTC

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CVS DAILY MULTIVITAMIN MENS TABS	C	QL(1 EA daily); RX/OTC	DERMAVITE TABS	C	QL(1 EA daily); RX/OTC
CVS DAILY MULTIVITAMIN WOMENS TABS	C	QL(1 EA daily); RX/OTC	DEXATRAN CAPS	C	QL(1 EA daily); RX/OTC
CVS EYE HEALTH ADULT 50+ CAPS	C	QL(1 EA daily); RX/OTC	DIALYVITE SUPREME D TABS	C	QL(1 EA daily); RX/OTC
CVS IMMUNE SUPPORT CAPS	C	QL(1 EA daily); RX/OTC	DIATROL TABS	C	QL(1 EA daily); RX/OTC
CVS ONE DAILY MENS 50+ ADV TABS	C	QL(1 EA daily); RX/OTC	EQ COMPLETE MULTIVITAMIN-ADULT TABS	C	QL(1 EA daily); RX/OTC
CVS ONE DAILY WOMENS 50+ ADV TABS	C	QL(1 EA daily); RX/OTC	EQ ONE DAILY MENS 50+ TABS	C	QL(1 EA daily); RX/OTC
CVS SPECTRAVITE ADULT 50+ TABS	C	QL(1 EA daily); RX/OTC	EQ ONE DAILY MENS HEALTH TABS	C	QL(1 EA daily); RX/OTC
CVS SPECTRAVITE ADULTS TABS	C	QL(1 EA daily); RX/OTC	EQ ONE DAILY WOMENS 50+ TABS	C	QL(1 EA daily); RX/OTC
CVS SPECTRAVITE ULTRA MEN 50+ TABS	C	QL(1 EA daily); RX/OTC	EQ ONE DAILY WOMENS HEALTH TABS	C	QL(1 EA daily); RX/OTC
CVS SPECTRAVITE ULTRA MENS TABS	C	QL(1 EA daily); RX/OTC	EQL CENTURY MATURE ADULTS 50+ TABS	C	QL(1 EA daily); RX/OTC
CVS SPECTRAVITE ULTRA WOMEN TABS	C	QL(1 EA daily); RX/OTC	EQL CENTURY MENS TABS	C	QL(1 EA daily); RX/OTC
CVS VISION HEALTH CAPS	C	QL(1 EA daily); RX/OTC	EQL CENTURY WOMENS TABS	C	QL(1 EA daily); RX/OTC
DAYAVITE TABS	C	QL(1 EA daily); RX/OTC	EQL ONE DAILY MENS TABS	C	QL(1 EA daily); RX/OTC
DECUBI-VITE CAPS	C	QL(1 EA daily); RX/OTC	ESTROVEN MENOPAUSE SUPPLEMENT TABS	C	QL(1 EA daily); RX/OTC
DEKAS PLUS OCEAN CAPS	C	QL(1 EA daily); RX/OTC	EYE HEALTH + LUTEIN TABS	C	QL(1 EA daily); RX/OTC
DEKAS PLUS CAPS	C	QL(1 EA daily); RX/OTC	EYE HEALTH AREDS 2 CAPS	C	QL(1 EA daily); RX/OTC
DEPLIN MA CAPS	C	QL(1 EA daily); RX/OTC	EYE HEALTH CAPS	C	QL(1 EA daily); RX/OTC
DEPLINPRO MOOD HEALTH CAPS	C	QL(1 EA daily); RX/OTC	EYE MULTIVITAMIN/SODIUM TABS	C	QL(1 EA daily); RX/OTC
DERMACINRX MULTITAM TABS	C	QL(1 EA daily); RX/OTC	FINAZOL TABS	C	QL(1 EA daily); RX/OTC
DERMACINRX RIBOTIN-E TABS	C	QL(1 EA daily); RX/OTC	FITNESS TABS FOR MEN AM/PM TABS	C	QL(1 EA daily); RX/OTC
DERMACINRX ZINTREXYL-C TABS	C	QL(1 EA daily); RX/OTC			

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FITNESS TABS FOR WOMEN AM/PM TABS	C	QL(1 EA daily); RX/OTC	FT ONE DAILY WOMENS TABS	C	QL(1 EA daily); RX/OTC
FLORRAVITE TABS	C	QL(1 EA daily); RX/OTC	GENADEK STEP 1 CAPS	C	QL(1 EA daily); RX/OTC
FLORRAXYL TABS	C	QL(1 EA daily); RX/OTC	GENADEK STEP 2 CAPS	C	QL(1 EA daily); RX/OTC
FOLAGENT DHA CAPS	C	QL(1 EA daily); RX/OTC	GERI-FREEDA SENIOR FORMULA TABS	C	QL(1 EA daily); RX/OTC
FOLAMAX TABS	C	QL(1 EA daily); RX/OTC	GNP CENTURY ADULTS MEN TABS	C	QL(1 EA daily); RX/OTC
FOLAMED DHA CAPS	C	QL(1 EA daily); RX/OTC	GNP CENTURY ADULTS WOMEN TABS	C	QL(1 EA daily); RX/OTC
FOLAPRIME TABS	C	QL(1 EA daily); RX/OTC	GNP CENTURY ADULT TABS	C	QL(1 EA daily); RX/OTC
FOLASYNC DHA CAPS	C	QL(1 EA daily); RX/OTC	GNP CENTURY MATURE ADULTS 50+ TABS	C	QL(1 EA daily); RX/OTC
FOLIFLEX TABS	C	QL(1 EA daily); RX/OTC	GNP THERAPEUTIC-M TABS	C	QL(1 EA daily); RX/OTC
FOLITIN-Z TABS	C	QL(1 EA daily); RX/OTC	HAIR SKIN & NAILS ADVANCED TABS	C	QL(1 EA daily); RX/OTC
FREEDAVITE TABS	C	QL(1 EA daily); RX/OTC	HAIR SKIN & NAILS TABS	C	QL(1 EA daily); RX/OTC
FT CENTURY 50+ TABS	C	QL(1 EA daily); RX/OTC	HAIR/SKIN/NAILS CAPS	C	QL(1 EA daily); RX/OTC
FT CENTURY ADULTS TABS	C	QL(1 EA daily); RX/OTC	HEAD CARE PROACTIVE HEALTH TABS	C	QL(1 EA daily); RX/OTC
FT CENTURY MEN 50+ TABS	C	QL(1 EA daily); RX/OTC	HEALTHY EYES SUPERVISION 2 CAPS	C	QL(1 EA daily); RX/OTC
FT CENTURY MEN TABS	C	QL(1 EA daily); RX/OTC	HIGH POT MULTIVITAMIN/BETA-CAR TABS	C	QL(1 EA daily); RX/OTC
FT CENTURY WOMEN 50+ TABS	C	QL(1 EA daily); RX/OTC	HIGH POTENCY MULTIVIT/FA TABS	C	QL(1 EA daily); RX/OTC
FT CENTURY WOMEN TABS	C	QL(1 EA daily); RX/OTC	HM COMPLETE MEN TABS	C	QL(1 EA daily); RX/OTC
FT EYE HEALTH CAPS	C	QL(1 EA daily); RX/OTC	HM HAIR/SKIN/NAILS TABS	C	QL(1 EA daily); RX/OTC
FT EYE HEALTH TABS	C	QL(1 EA daily); RX/OTC	HYLAZINC TABS	C	QL(1 EA daily); RX/OTC
FT HAIR SKIN & NAILS EXTRA STR TABS	C	QL(1 EA daily); RX/OTC	ICAPS AREDS FORMULA TABS	C	QL(1 EA daily); RX/OTC
FT ONE DAILY MENS 50+ TABS	C	QL(1 EA daily); RX/OTC	IMMUNE ESSENTIALS DAILY CAPS	C	QL(1 EA daily); RX/OTC
FT ONE DAILY MENS TABS	C	QL(1 EA daily); RX/OTC			
FT ONE DAILY WOMENS 50+ TABS	C	QL(1 EA daily); RX/OTC			

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
JOINT HEALTH & BONE STRENGTH TABS	C	QL(1 EA daily); RX/OTC	MULTITOL-M TABS	C	QL(1 EA daily); RX/OTC
KEYFOLIC TABS	C	QL(1 EA daily); RX/OTC	MULTIVITAMIN ADULT (MINERALS) TABS	C	QL(1 EA daily); RX/OTC
KEYLOSA TABS	C	QL(1 EA daily); RX/OTC	MULTIVITAMIN HEALTH FORM/CA/FE TABS	C	QL(1 EA daily); RX/OTC
K-PAX IMMUNE PROFESSIONAL ST TABS	C	QL(1 EA daily); RX/OTC	MULTIVITAMIN MEN TABS	C	QL(1 EA daily); RX/OTC
LIVER DETOX TABS	C	QL(1 EA daily); RX/OTC	MULTI-VITAMIN MONOCAPS TABS	C	QL(1 EA daily); RX/OTC
LUTEIN-ZEAXANTHIN TABS 60 MG-5 MG-1 MG-15 MG-1 MG-750 MCG-20 MG	C	QL(1 EA daily); RX/OTC	MULTIVITAMIN WOMEN TABS	C	QL(1 EA daily); RX/OTC
MEDI TAB TABS	C	QL(1 EA daily); RX/OTC	MULTIVITAMIN/ZINC STRESS TABS	C	QL(1 EA daily); RX/OTC
MEGA MULTI FOR WOMEN TABS	C	QL(1 EA daily); RX/OTC	MULTIVITAMIN-MINERALS TABS	C	QL(1 EA daily); RX/OTC
MEGA MULTI MEN TABS	C	QL(1 EA daily); RX/OTC	MVW COMPLETE FORMULATION D3000 CAPS	C	QL(1 EA daily); RX/OTC
MEGAVITE FRUITS & VEGGIES TABS	C	QL(1 EA daily); RX/OTC	MVW COMPLETE FORMULATION D5000 CAPS	C	QL(1 EA daily); RX/OTC
MEGAVITE GOLDEN YEARS 55+ TABS	C	QL(1 EA daily); RX/OTC	MVW COMPLETE FORMULATION MINIS CAPS	C	QL(1 EA daily); RX/OTC
MENATROL CAPS	C	QL(1 EA daily); RX/OTC	MVW COMPLETE FORMULATION CAPS	C	QL(1 EA daily); RX/OTC
MENS 50+ ADVANCED CAPS	C	QL(1 EA daily); RX/OTC	MVW MODULATOR FORMULATION MINI CAPS	C	QL(1 EA daily); RX/OTC
MENS 50+ MULTIVITAMIN TABS	C	QL(1 EA daily); RX/OTC	MVW MODULATOR FORMULATION CAPS	C	QL(1 EA daily); RX/OTC
MENS MULTI HEALTH FORMULA TABS	C	QL(1 EA daily); RX/OTC	NAT-RUL THERAVITE-M TABS	C	QL(1 EA daily); RX/OTC
MENS MULTIVITAMIN TABS	C	QL(1 EA daily); RX/OTC	NATRUL-VITES TABS	C	QL(1 EA daily); RX/OTC
MOOD FOOD ES CAPS	C	QL(1 EA daily); RX/OTC	NEOVITE TABS	C	QL(1 EA daily); RX/OTC
MOOD FOOD CAPS	C	QL(1 EA daily); RX/OTC	NICADAN TABS	C	QL(1 EA daily); RX/OTC
MULTIA CAPS	C	QL(1 EA daily); RX/OTC	NICAZEL FORTE TABS	C	QL(1 EA daily); RX/OTC
<i>multiple vitamins w/ minerals CAPS</i>	C	QL(1 EA daily); RX/OTC	NICAZEL TABS	C	QL(1 EA daily); RX/OTC
<i>multiple vitamins w/ minerals TABS</i>	C	QL(1 EA daily); RX/OTC			

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
NO IRON MULT VITAMIN-MINERALS TABS	C	QL(1 EA daily); RX/OTC	ONE-A-DAY MENS (MINERALS) TABS	C	QL(1 EA daily); RX/OTC
NUTRALYN TABS	C	QL(1 EA daily); RX/OTC	ONE-A-DAY MENS 50+ ADVANTAGE TABS	C	QL(1 EA daily); RX/OTC
NUTRICAP TABS	C	QL(1 EA daily); RX/OTC	ONE-A-DAY MENS 50+ TABS	C	QL(1 EA daily); RX/OTC
OCULAR VITAMINS TABS	C	QL(1 EA daily); RX/OTC	ONE-A-DAY MENS HEALTH FORMULA TABS	C	QL(1 EA daily); RX/OTC
OCUVEL CAPS 250 MG-0.5 MG-5 MG-1 MG-40 MG-1 MG-200 UNIT	C	QL(1 EA daily); RX/OTC	ONE-A-DAY MENS PRO EDGE TABS	C	QL(1 EA daily); RX/OTC
OCUVITE ADULT 50+ CAPS	C	QL(1 EA daily); RX/OTC	ONE-A-DAY PROACTIVE 65+ TABS	C	QL(1 EA daily); RX/OTC
OCUVITE ADULT FORMULA CAPS	C	QL(1 EA daily); RX/OTC	ONE-A-DAY TEEN ADVANTAGE/HIM TABS	C	QL(1 EA daily); RX/OTC
OCUVITE EYE PERFORMANCE CAPS	C	QL(1 EA daily); RX/OTC	ONE-A-DAY WOMENS 50+ TABS	C	QL(1 EA daily); RX/OTC
OCUVITE-LUTEIN CAPS	C	QL(1 EA daily); RX/OTC	ONE-A-DAY WOMENS TABS	C	QL(1 EA daily); RX/OTC
ONCOVITE TABS	C	QL(1 EA daily); RX/OTC	ONE-DAILY MULTI CAPS CAPS	C	QL(1 EA daily); RX/OTC
ONE A DAY ENERGY TABS	C	QL(1 EA daily); RX/OTC	ONEVITE TABS	C	QL(1 EA daily); RX/OTC
ONE A DAY MEN 50 PLUS TABS	C	QL(1 EA daily); RX/OTC	OPURITY TABS	C	QL(1 EA daily); RX/OTC
ONE A DAY TRIPLE IMMUNE SUPPRT TABS	C	QL(1 EA daily); RX/OTC	OSTEOPRIME PLUS TABS	C	QL(1 EA daily); RX/OTC
ONE A DAY WOMEN 50 PLUS TABS	C	QL(1 EA daily); RX/OTC	PARVLEX TABS	C	QL(1 EA daily); RX/OTC
ONE DAILY MEN FORMULA W/O IRON TABS	C	QL(1 EA daily); RX/OTC	PHYTOMULTI TABS	C	QL(1 EA daily); RX/OTC
ONE DAILY MENS 50+ MULTIVIT TABS	C	QL(1 EA daily); RX/OTC	PRESCRIPTION SUPPORT MULTIVIT CAPS	C	QL(1 EA daily); RX/OTC
ONE DAILY MULTIVITAMIN WOMEN TABS	C	QL(1 EA daily); RX/OTC	PRESERVISION AREDS 2+COQ10 CAPS	C	QL(1 EA daily); RX/OTC
ONE DAILY WOMENS TABS	C	QL(1 EA daily); RX/OTC	PRESERVISION AREDS 2+MULTI VIT CAPS	C	QL(1 EA daily); RX/OTC
ONE-A-DAY ENERGY TABS	C	QL(1 EA daily); RX/OTC	PRESERVISION AREDS 2 CAPS	C	QL(1 EA daily); RX/OTC
ONE-A-DAY MENOPAUSE FORMULA TABS	C	QL(1 EA daily); RX/OTC	PRESERVISION AREDS CAPS	C	QL(1 EA daily); RX/OTC
			PRESERVISION AREDS TABS	C	QL(1 EA daily); RX/OTC

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PRESERVISION/LUTEIN CAPS	C	QL(1 EA daily); RX/OTC	SIDEROL TABS	C	QL(1 EA daily); RX/OTC
PREV-RX TABS	C	QL(1 EA daily); RX/OTC	SKIN HAIR & NAILS ADVANCED CAPS	C	QL(1 EA daily); RX/OTC
PROBIOTICS + BARIATRIC MULTI CAPS	C	QL(1 EA daily); RX/OTC	SOLO TABS	C	QL(1 EA daily); RX/OTC
PRO-CAL TABS	C	QL(1 EA daily); RX/OTC	SPECTRAVITE TABS	C	QL(1 EA daily); RX/OTC
PROCERV HP TABS	C	QL(1 EA daily); RX/OTC	STROVITE ONE TABS	C	QL(1 EA daily); RX/OTC
PROFOLA TABS	C	QL(1 EA daily); RX/OTC	SUPER ANTIOXIDANT CAPS	C	QL(1 EA daily); RX/OTC
PRORENAL + D W/ OMEGA-3 CAPS	C	QL(1 EA daily); RX/OTC	SUPER D-ZINC-SELENIUM-COPPER TABS	C	QL(1 EA daily); RX/OTC
PRORENAL + D TABS	C	QL(1 EA daily); RX/OTC	SUPERIOR MENS MULTI TABS	C	QL(1 EA daily); RX/OTC
PROTECT CARDIO AF CAPS	C	QL(1 EA daily); RX/OTC	SUPERIOR WOMENS MULTI TABS	C	QL(1 EA daily); RX/OTC
PROTECT PLUS SO CAPS	C	QL(1 EA daily); RX/OTC	SUPPORT-500 CAPS	C	QL(1 EA daily); RX/OTC
PROTEGRA CAPS	C	QL(1 EA daily); RX/OTC	SYSTANE ICAPS AREDS2 TABS	C	QL(1 EA daily); RX/OTC
PROVIT TABS	C	QL(1 EA daily); RX/OTC	THERAGRAN-M ADVANCED 50 PLUS TABS	C	QL(1 EA daily); RX/OTC
QC MULTI-VITE TABS	C	QL(1 EA daily); RX/OTC	THERAGRAN-M ADVANCED TABS	C	QL(1 EA daily); RX/OTC
QC OCUHEALTH VISION SUPPORT 2 CAPS	C	QL(1 EA daily); RX/OTC	THERAGRAN-M PREMIER 50 PLUS TABS	C	QL(1 EA daily); RX/OTC
QUIN B STRONG TABS	C	QL(1 EA daily); RX/OTC	THERAGRAN-M PREMIER TABS	C	QL(1 EA daily); RX/OTC
QUINTABS-M TABS	C	QL(1 EA daily); RX/OTC	THERAGRAN-M TABS	C	QL(1 EA daily); RX/OTC
RAYAVIT TABS	C	QL(1 EA daily); RX/OTC	THERA-M PLUS MV W/BETA-CAROT TABS	C	QL(1 EA daily); RX/OTC
REMEDIENT CAPS	C	QL(1 EA daily); RX/OTC	THERAMILL FORTE CAPS	C	QL(1 EA daily); RX/OTC
RENAL MULTIVITAMIN TABS	C	QL(1 EA daily); RX/OTC	THERA-M TABS	C	QL(1 EA daily); RX/OTC
RENAPLEX-D TABS	C	QL(1 EA daily); RX/OTC	THERANATAL LACTATION ONE CAPS	C	QL(1 EA daily); RX/OTC
SENTRY SENIOR MENS 50+ TABS	C	QL(1 EA daily); RX/OTC	THERA-TABS M TABS	C	QL(1 EA daily); RX/OTC
SENTRY SENIOR/LUTEIN TABS	C	QL(1 EA daily); RX/OTC			
SENTRY TABS	C	QL(1 EA daily); RX/OTC			

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
THERA-VITE MAX-M TABS	C	QL(1 EA daily); RX/OTC	VITEYES AREDS 2 FORMULA +MULTI CAPS	C	QL(1 EA daily); RX/OTC
THEREMS-M TABS	C	QL(1 EA daily); RX/OTC	VITEYES AREDS 2 FORMULA CAPS	C	QL(1 EA daily); RX/OTC
T-VITES TABS	C	QL(1 EA daily); RX/OTC	VITEYES CLASSIC ADVANCED CAPS	C	QL(1 EA daily); RX/OTC
UDAMIN SP TABS 12.5 MG-1000 MCG-250 MCG-2.5 MG-17 MG-7.5 MG-100 MCG-75 UNIT-320 MG	C	QL(1 EA daily); RX/OTC	VITEYES CLASSIC MACULAR SUPPORT CAPS	C	QL(1 EA daily); RX/OTC
ULTRA BONEUP TABS	C	QL(1 EA daily); RX/OTC	VITEYES CLASSIC MULTIVITAMIN TABS	C	QL(1 EA daily); RX/OTC
VENEXA FE TABS	C	QL(1 EA daily); RX/OTC	VITEYES CLASSIC+OMEGA-3 CAPS	C	QL(1 EA daily); RX/OTC
VENEXA TABS	C	QL(1 EA daily); RX/OTC	VITEYES OPTIC NERVE SUPPORT TABS	C	QL(1 EA daily); RX/OTC
VENTRIXYL FE TABS	C	QL(1 EA daily); RX/OTC	VITRAMYN TABS	C	QL(1 EA daily); RX/OTC
VENTRIXYL TABS	C	QL(1 EA daily); RX/OTC	VITRANOL FE TABS	C	QL(1 EA daily); RX/OTC
VISION HEALTH CAPS	C	QL(1 EA daily); RX/OTC	VITRANOL TABS	C	QL(1 EA daily); RX/OTC
VISION OPTIMIZER CAPS	C	QL(1 EA daily); RX/OTC	VITREXATE FE TABS	C	QL(1 EA daily); RX/OTC
VISTA ADVANCED AREDS2 FORMULA CAPS	C	QL(1 EA daily); RX/OTC	VITREXATE TABS	C	QL(1 EA daily); RX/OTC
VISTA ADVANCED DRY EYE FORMULA CAPS	C	QL(1 EA daily); RX/OTC	VITREXYL + IRON TABS	C	QL(1 EA daily); RX/OTC
VITABASIC COMPLETE TABS	C	QL(1 EA daily); RX/OTC	VITREXYL TABS	C	QL(1 EA daily); RX/OTC
VITABASIC SENIOR TABS	C	QL(1 EA daily); RX/OTC	VITRUM 50+ ADULT-MULTI TABS	C	QL(1 EA daily); RX/OTC
VITABEX PLUS CAPS	C	QL(1 EA daily); RX/OTC	VITRUM 50+ SENIOR MULTI TABS	C	QL(1 EA daily); RX/OTC
VITABEX CAPS	C	QL(1 EA daily); RX/OTC	WELLFOLA TABS	C	QL(1 EA daily); RX/OTC
VITACORE TABS	C	QL(1 EA daily); RX/OTC	WOMENS 50+ MULTI VITAMIN TABS	C	QL(1 EA daily); RX/OTC
VITAMIN D3 COMPLETE TABS	C	QL(1 EA daily); RX/OTC	YELETS TEENAGE FORMULA TABS	C	QL(1 EA daily); RX/OTC
VITASANA TABS	C	QL(1 EA daily); RX/OTC	Multivitamins		
VITATRUM TABS	C	QL(1 EA daily); RX/OTC	ALTRIXA TABS	C	QL(1 EA daily); RX/OTC
			AMLADEX TABS	C	QL(1 EA daily); RX/OTC

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CENTRUM MENOPAUSE MIND/MOOD TABS	C	QL(1 EA daily); RX/OTC	ONE-A-DAY ADULT VITACRAVES+DHA CHEW	C	QL(1 EA daily); RX/OTC
DAILY MULTIPLE VITAMINS TABS	C	QL(1 EA daily); RX/OTC	QUINTABS TABS	C	QL(1 EA daily); RX/OTC
DAVIMET-M CHEW	C	QL(1 EA daily); RX/OTC	RELCARE TABS	C	QL(1 EA daily); RX/OTC
DERMACINRX DAVIMET CHEW	C	QL(1 EA daily); RX/OTC	STRESS FORMULA/ZINC/ENERGY TABS	C	QL(1 EA daily); RX/OTC
DERMACINRX MULTIVITAMIN CHEW	C	QL(1 EA daily); RX/OTC	THERA TABS	C	QL(1 EA daily); RX/OTC
ESTROFACTORS TABS	C	QL(1 EA daily); RX/OTC	THEREMS TABS	C	QL(1 EA daily); RX/OTC
FOLACHEW CHEW	C	QL(1 EA daily); RX/OTC	TM-DAILY VITE TABS	C	QL(1 EA daily); RX/OTC
FOLAWISE TABS	C	QL(1 EA daily); RX/OTC	TRUE MULTIVITAMIN TABS	C	QL(1 EA daily); RX/OTC
FOLCYTEINE TABS	C	QL(1 EA daily); RX/OTC	VIREXA TABS	C	QL(1 EA daily); RX/OTC
GENICIN VITA-Q TABS	C	QL(1 EA daily); RX/OTC	VITRAX TABS	C	QL(1 EA daily); RX/OTC
HIGH POTENCY MULTIVITAMIN TABS	C	QL(1 EA daily); RX/OTC	Ped Multi Vitamins w/Fl & FE		
MINCORA TABS	C	QL(1 EA daily); RX/OTC	<i>ped multivitamins w/fl & iron SOLN</i>	C	QL(50 ML per fill retail); AL(Up to 21 yrs old); RX/OTC
MULTI VITAMIN W/D-3 TABS	C	QL(1 EA daily); RX/OTC	Ped MV w/ Iron		
MULTI VITAMIN TABS	C	QL(1 EA daily); RX/OTC	BPROTECTED PEDIA POLY-VITE/FE SOLN	C	QL(60 ML per fill retail)
<i>multiple vitamin TABS</i>	C	QL(1 EA daily); RX/OTC	ENFAMIL POLY-VI-SOL-IRON SOLN 11 MG/ML	C	QL(60 ML per fill retail)
MULTIVITAMIN ADULT TABS	C	QL(1 EA daily); RX/OTC	MULTIVITAMIN DROPS/IRON SOLN	C	QL(60 ML per fill retail)
MULTIVITAMIN TABS	C	QL(1 EA daily); RX/OTC	MULTIVITAMIN INFANT & TODDLER SOLN	C	QL(60 ML per fill retail)
NEOMULTIVITE TABS	C	QL(1 EA daily); RX/OTC	POLY-VITE/IRON SOLN	C	QL(60 ML per fill retail)
NEVVITE TABS	C	QL(1 EA daily); RX/OTC	Pediatric Multiple Vitamins		
OMNICAP TABS	C	QL(1 EA daily); RX/OTC	BPROTECTED PEDIA POLY-VITE SOLN PO	C	QL(50 ML per fill retail)
ONE DAILY ESSENTIALS TABS	C	QL(1 EA daily); RX/OTC	MULTIVITAMIN INFANT & TODDLER SOLN PO	C	QL(50 ML per fill retail)
ONE DAILY ESSENTIAL TABS	C	QL(1 EA daily); RX/OTC			
ONE VITE DAILY MULTIVITAMIN TABS	C	QL(1 EA daily); RX/OTC			

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PC PEDIATRIC POLY-VITAMIN DROP SOLN PO	C	QL(50 ML per fill retail)	HAIR NOURISHING SUPPLEMENT TABS	C	QL(1 EA daily); RX/OTC
POLY-VI-SOL SOLN PO	C	QL(50 ML per fill retail)	HEALTHY HEART COMPLEX TABS	C	QL(1 EA daily); RX/OTC
POLY-VITA SOLN PO	C	QL(50 ML per fill retail)	HEART TABS TABS	C	QL(1 EA daily); RX/OTC
POLY-VITE PEDIATRIC SOLN PO	C	QL(50 ML per fill retail)	LIPIDSHIELD PLUS TABS	C	QL(1 EA daily); RX/OTC
Prenatal Vitamins			MEMORY COMPLEX BRAIN HEALTH TABS	C	QL(1 EA daily); RX/OTC
KPN PRENATAL TABS	C	QL(1 EA daily)	MG PLUS PROTEIN TABS	C	QL(1 EA daily); RX/OTC
<i>prenatal vit w/ docusate-iron carbonyl-folic acid TABS</i>	C	QL(1 EA daily)	MIL ADREGEN TABS	C	QL(1 EA daily); RX/OTC
SELECT-OB+DHA MISC	C	QL(1 EA daily)	NERVIVE NERVE RELIEF TABS	C	QL(1 EA daily); RX/OTC
VITAFOL-ONE CAPS	C	QL(1 EA daily)	<i>specialty vitamins products TABS</i>	C	QL(1 EA daily); RX/OTC
Specialty Vitamins Products			SYNVERA TABS	C	QL(1 EA daily); RX/OTC
ADRENAL STRESS CALM TABS	C	QL(1 EA daily); RX/OTC	UPSPRING HE NATAL TABS	C	QL(1 EA daily); RX/OTC
ALLERWELL ALLERGY FORMULA TABS	C	QL(1 EA daily); RX/OTC	Vitamins w/ Lipotropics		
BIOTIN PLUS KERATIN TABS	C	QL(1 EA daily); RX/OTC	<i>vitamins w/ lipotropics CAPS</i>	C	QL(1 EA daily)
BRAIN MIGHT/DHA & CO Q10 TABS	C	QL(1 EA daily); RX/OTC	MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms		
CENTRUM PERFORMANCE TABS	C	QL(1 EA daily); RX/OTC	Central Muscle Relaxants		
CENTRUM SPECIALIST ENERGY TABS	C	QL(1 EA daily); RX/OTC	AMRIX CP24 (<i>cyclobenzaprine hcl</i>)	NP	
CVS HAIR/SKIN/NAILS TABS	C	QL(1 EA daily); RX/OTC	<i>baclofen SOLN PO 5 MG/5ML, 10 MG/5ML</i>	NP	
ELON MATRIX 5000 COMPLETE TABS	C	QL(1 EA daily); RX/OTC	<i>baclofen SUSP</i>	NP	
ELON MATRIX 5000 TABS	C	QL(1 EA daily); RX/OTC	<i>baclofen TABS</i>	P	
ELON MATRIX COMPLETE TABS	C	QL(1 EA daily); RX/OTC	<i>carisoprodol TABS</i>	NP	
ELON MATRIX PLUS TABS	C	QL(1 EA daily); RX/OTC	<i>chlorzoxazone TABS</i>	P	
ELON R3 TABS	C	QL(1 EA daily); RX/OTC	<i>chlorzoxazone TABS 375 MG, 750 MG</i>	NP	
GLP-DLAX TABS	C	QL(1 EA daily); RX/OTC	<i>cyclobenzaprine hcl CP24</i>	NP	
			<i>cyclobenzaprine hcl TABS 7.5 MG</i>	P	QL(4 EA daily)

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>cyclobenzaprine hcl TABS 7.5 MG</i>	NP	QL(4 EA daily)
<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	P	QL(3 EA daily)
<i>FLEQSUVY SUSP (baclofen)</i>	NP	
<i>LYVISPAH PACK</i>	NP	
<i>metaxalone</i>	NP	
<i>METAXALONE 640 MG</i>	NP	
<i>methocarbamol TABS 1000 MG</i>	NP	
<i>methocarbamol TABS</i>	P	
<i>orphenadrine citrate TB12</i>	P	QL(2 EA daily)
<i>OZOBAX DS SOLN PO (baclofen)</i>	NP	
<i>OZOBAX SOLN PO (baclofen)</i>	NP	
<i>SOMA TABS (carisoprodol)</i>	NP	
<i>tizanidine hcl CAPS</i>	NP	
<i>tizanidine hcl TABS</i>	P	
<i>ZANAFLEX CAPS (tizanidine hcl)</i>	NP	
<i>ZANAFLEX CAPS</i>	NP	
<i>ZANAFLEX TABS 4 MG (tizanidine hcl)</i>	NP	
Direct Muscle Relaxants		
<i>DANTRIUM CAPS 25 MG (dantrolene sodium)</i>	NP	
<i>dantrolene sodium CAPS</i>	P	
Muscle Relaxant Combinations		
<i>orphenadrine w/ aspirin & caff</i>	NP	
NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus		
Nasal Agent Combinations		
<i>azelastine hcl-fluticasone propionate SUSP</i>	NP	

Drug Name	Drug Tier	Requirements/ Limits
<i>DYMISTA SUSP (azelastine hcl-fluticasone propionate)</i>	NP	
<i>RYALTRIS</i>	NP	
Nasal Agents - Misc.		
<i>saline SOLN 0.65 %</i>	C	1 package(s) per fill retail
Nasal Antiallergy		
<i>azelastine hcl 0.15 %</i>	NP	1 package(s) per 31 day(s) retail; RX/OTC
<i>azelastine hcl 0.1 %, 137 MCG/SPRAY</i>	P	1 package(s) per 31 day(s) retail; 1 package(s) per 31 day(s) mail
<i>cromolyn sodium (nasal) 5.2 MG/ACT</i>	C	QL(26 ML per 31 day(s) retail)
<i>olopatadine hcl (nasal)</i>	NP	
Nasal Anticholinergics		
<i>ipratropium bromide (nasal) 0.06 %</i>	P	QL(15 ML per 31 day(s) retail)
<i>ipratropium bromide (nasal) 0.03 %</i>	P	QL(31 ML per 31 day(s) retail)
Nasal Steroids		
<i>budesonide (nasal)</i>	C	QL(9 ML per 31 day(s) retail)
<i>flunisolide (nasal)</i>	NP	QL(25 ML per 31 day(s) retail)
<i>fluticasone propionate (nasal) SUSP</i>	P	1 package(s) per fill retail; RX/OTC
<i>mometasone furoate (nasal) SUSP</i>	P	RX/OTC
<i>OMNARIS SUSP</i>	NP	
<i>QNASL</i>	NP	
<i>QNASL CHILDRENS</i>	NP	
<i>triamcinolone acetonide (nasal) AERO</i>	C	QL(17 ML per 31 day(s) retail); AL(At least 2 yrs old)
<i>XHANCE EXHU</i>	NP	

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
Sympathomimetic Decongestants		
<i>pseudoephedrine hcl TABS</i>	C	
<i>pseudoephedrine hcl TB12</i>	C	QL(2 EA daily)
NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles		
ALS Agents		
<i>riluzole TABS</i>	C	PA
Muscular Dystrophy Agents		
VYONDYS 53	C	SP; PA
NUTRIENTS		
Misc. Nutritional Substances		
<i>omega-3 fatty acids CAPS 1000 MG</i>	C	QL(6 EA daily)
OPHTHALMIC AGENTS - Drugs to Treat the Eye		
Artificial Tears and Lubricants		
<i>polyvinyl alcohol 1.4 %</i>	C	
<i>white petrolatum-mineral oil</i>	C	1 package(s) per fill retail
Beta-blockers - Ophthalmic		
<i>betaxolol hcl (ophth) SOLN</i>	P	1 package(s) per 31 day(s) retail
BETIMOL	NP	
BETIMOL (<i>timolol</i>)	NP	
BETOPTIC-S SUSP	NP	
<i>brimonidine tartrate-timolol maleate</i>	NP	Brand Preferred
<i>carteolol hcl (ophth)</i>	P	1 max fill(s) per 31 day(s) retail
COMBIGAN (<i>brimonidine tartrate-timolol maleate</i>)	P	Brand Preferred
COSOPT (<i>dorzolamide hcl-timolol maleate</i>)	NP	QL(10 ML per 31 day(s) retail)
COSOPT PF (<i>dorzolamide hcl-timolol maleate</i>)	NP	

Drug Name	Drug Tier	Requirements/ Limits
<i>dorzolamide hcl-timolol maleate</i>	P	QL(10 ML per 31 day(s) retail)
<i>dorzolamide hcl-timolol maleate</i>	NP	
ISTALOL SOLN (<i>timolol maleate (ophth)</i>)	NP	
<i>levobunolol hcl 0.5 %</i>	P	QL(15 ML per 31 day(s) retail)
<i>timolol</i>	NP	
<i>timolol maleate (ophth) SOLG</i>	P	
<i>timolol maleate (ophth) SOLN</i>	P	QL(15 ML per 31 day(s) retail)
<i>timolol maleate (ophth) SOLN 0.5 %</i>	NP	
TIMOPTIC OCUDOSE SOLN (<i>timolol maleate (ophth)</i>)	NP	QL(15 EA per 31 day(s) retail)
Cholinergic Agonists		
TYRVAYA	NP	
Cycloplegic Mydriatics		
<i>atropine sulfate (ophthalmic) OINT</i>	C	QL(4 GM per fill retail)
<i>atropine sulfate (ophthalmic) SOLN</i>	C	
ATROPINE SULFATE SOLN 1 %	C	
CYCLOGYL 2 %	C	1 package(s) per 31 day(s) retail
CYCLOGYL 0.5 %	C	
<i>cyclopentolate hcl 1 %</i>	C	
<i>tropicamide SOLN</i>	C	
Miotics		
<i>pilocarpine hcl SOLN 1 %, 2 %, 4 %</i>	C	
Ophthalmic - Angiogenesis Inhibitors		
EYLEA SOSY	C	SP; PA
Ophthalmic Adrenergic Agents		

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ALPHAGAN P (brimonidine tartrate)	P	Brand Preferred	sulfacetamide sodium (ophth) SOLN	P	QL(15 ML per 31 day(s) retail)
apraclonidine hcl	NP		sulfacetamide sodium (ophth) SOLN	C	QL(15 ML per 31 day(s) retail)
brimonidine tartrate 0.2 %	P	1 package(s) per 31 day(s) retail	tobramycin (ophth) SOLN	NP	QL(5 ML per 31 day(s) retail)
brimonidine tartrate 0.1 %, 0.15 %	NP	Brand Preferred	TOBREX OINT	NP	
IOPIDINE	NP		trifluridine	C	QL(8 ML per 31 day(s) retail)
SIMBRINZA	NP		VIGAMOX SOLN OP (moxifloxacin hcl (ophth))	NP	QL(3 ML per fill retail)
Ophthalmic Anti-infectives			Ophthalmic Decongestants		
AZASITE	NP		naphazoline w/ pheniramine 0.3 %-0.025 %	C	QL(15 ML per 31 day(s) retail)
bacitracin (ophthalmic)	P	QL(4 GM per 31 day(s) retail)	naphazoline w/ pheniramine 0.315 %-0.027 %	C	QL(15 ML per 31 day(s) retail; 15 ML per 31 days mail)
bacitracin-polymyxin b (ophth)	P	QL(4 GM per 31 day(s) retail)	tetrahydrozoline hcl (ophth) 0.05 %	C	1 package(s) per 31 day(s) retail
BESIVANCE	NP		Ophthalmic Immunomodulators		
CILOXAN OINT	NP	1 package(s) per fill retail	CEQUA SOLN	NP	
ciprofloxacin hcl (ophth) SOLN	P	1 package(s) per fill retail	cyclosporine (ophth) EMUL	NP	Brand Preferred
erythromycin (ophth)	P		RESTASIS MULTIDOSE EMUL	P	Brand Preferred
gatifloxacin (ophth)	NP		RESTASIS EMUL (cyclosporine (ophth))	P	Brand Preferred
gentamicin sulfate (ophth) SOLN	P	2 package(s) per fill retail	VERKAZIA EMUL	NP	
levofloxacin (ophth) 0.5 %	NP		VEVYE SOLN	NP	
moxifloxacin hcl (ophth) SOLN OP	P	QL(3 ML per fill retail)	Ophthalmic Integrin Antagonists		
neomycin-bacitracin zn-polymyxin	P	QL(4 GM per 31 day(s) retail)	XIIDRA	P	
neomycin-polymyxin-gramicidin	P	1 package(s) per fill retail	Ophthalmic Kinase Inhibitors		
OCUFLOX (ofloxacin (ophth))	NP	QL(10 ML per 31 day(s) retail)	RHOPRESSA	P	
ofloxacin (ophth)	P	QL(10 ML per 31 day(s) retail)	ROCKLATAN	P	
polymyxin b-trimethoprim	P	1 package(s) per fill retail; 1 max fill(s) per 30 day(s) retail	Ophthalmic Local Anesthetics		
sulfacetamide sodium (ophth) OINT	P	QL(4 GM per 31 day(s) retail)	TETRACAIN HCL 0.5 %	C	
			tetracaine hcl (ophth)	C	

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Ophthalmic Steroids			<i>neomycin-polymy-dexameth OINT</i>	P	QL(4 GM per 31 day(s) retail)
ALREX SUSP (<i>loteprednol etabonate</i>)	NP		<i>neomycin-polymy-dexameth SUSP</i>	P	QL(10 ML per 31 day(s) retail)
<i>bacitracin-poly-neomycin-hc</i>	P		<i>neomycin-polymyxin-hc (ophth)</i>	P	QL(15 ML per 31 day(s) retail)
<i>dexamethasone sodium phosphate (ophth)</i>	P		PRED FORTE (<i>prednisolone acetate (ophth)</i>)	NP	QL(15 ML per 31 day(s) retail)
<i>difluprednate</i>	NP	Brand Preferred	PRED MILD	P	1 package(s) per 31 day(s) retail
DUREZOL (<i>difluprednate</i>)	P	Brand Preferred	<i>prednisolone acetate (ophth)</i>	P	QL(15 ML per 31 day(s) retail)
EYSUVIS SUSP	NP		PREDNISOLONE ACETATE P-F	C	QL(15 ML per 31 day(s) retail)
FLAREX	P		PREDNISOLONE SODIUM PHOSPHATE	NP	1 package(s) per 31 day(s) retail
<i>fluorometholone (ophth) SUSP</i>	P	1 package(s) per 31 day(s) retail	<i>sulfacetamide sod-prednisolone SOLN</i>	P	QL(10 ML per 31 day(s) retail)
FML FORTE SUSP	NP		TOBRADEX ST SUSP	NP	
FML LIQUIFILM SUSP (<i>fluorometholone (ophth)</i>)	NP	1 package(s) per 31 day(s) retail	TOBRADEX OINT	NP	QL(4 GM per 31 day(s) retail)
INVELTYS SUSP	NP		<i>tobramycin-dexamethasone SUSP</i>	P	1 package(s) per 31 day(s) retail
LOTEMAX SM GEL	NP		ZYLET	NP	
LOTEMAX GEL (<i>loteprednol etabonate</i>)	NP		Ophthalmics - Misc.		
LOTEMAX OINT	NP		ACULAR (<i>ketorolac tromethamine (ophth)</i>)	NP	1 package(s) per 31 day(s) retail
LOTEMAX SUSP (<i>loteprednol etabonate</i>)	NP		ACULAR LS (<i>ketorolac tromethamine (ophth)</i>)	NP	1 max fill(s) per 31 day(s) retail
<i>loteprednol etabonate GEL</i>	NP		ACUVAIL	NP	
<i>loteprednol etabonate SUSP</i>	NP		<i>azelastine hcl (ophth)</i>	NP	QL(6 ML per 31 day(s) retail)
MAXIDEX SUSP OP	P		AZOPT (<i>brinzolamide</i>)	P	Brand Preferred; 1 package(s) per 31 day(s) retail
MAXITROL OINT (<i>neomycin-polymy-dexameth</i>)	NP	QL(4 GM per 31 day(s) retail)	<i>bepotastine besilate</i>	NP	
MAXITROL SUSP (<i>neomycin-polymy-dexameth</i>)	NP	QL(10 ML per 31 day(s) retail)	BEPREVE (<i>bepotastine besilate</i>)	NP	
MAXITROL SUSP (<i>neomycin-polymy-dexameth</i>)	NP	QL(10 ML per 31 day(s) retail)			

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>brinzolamide</i>	NP	Brand Preferred; 1 package(s) per 31 day(s) retail
<i>bromfenac sodium (ophth)</i>	NP	
BROMSITE (<i>bromfenac sodium (ophth)</i>)	NP	
<i>cromolyn sodium (ophth)</i>	P	QL(10 ML per 31 day(s) retail)
<i>diclofenac sodium (ophth)</i>	P	QL(3 ML per 31 day(s) retail)
<i>dorzolamide hcl</i>	P	QL(10 ML per 31 day(s) retail)
<i>epinastine hcl (ophth)</i>	NP	
<i>flurbiprofen sodium</i>	P	QL(5 ML per 31 day(s) retail)
ILEVRO	NP	
<i>ketorolac tromethamine (ophth) 0.4 %</i>	P	1 max fill(s) per 31 day(s) retail
<i>ketorolac tromethamine (ophth) 0.5 %</i>	P	1 package(s) per 31 day(s) retail
<i>ketotifen fumarate (ophth) 0.035 %</i>	P	QL(10 ML per 31 day(s) retail)
MIEBO	NP	
NEVANAC	P	
<i>olopatadine hcl 0.2 %</i>	P	RX/OTC
PROLENSA (<i>bromfenac sodium (ophth)</i>)	NP	
TRYPTYR SOLN OP 0.003 %	NP	
ZADITOR 0.035 % (<i>ketotifen fumarate (ophth)</i>)	P	QL(10 ML per 31 day(s) retail)
ZERVIAE	NP	
Prostaglandins - Ophthalmic		
<i>bimatoprost SOLN</i>	NP	
IYUZEH SOLN	NP	
<i>latanoprost SOLN</i>	P	QL(5 ML per 31 day(s) retail)
LUMIGAN SOLN 0.01 %	P	Brand Preferred
<i>tafluprost</i>	NP	

Drug Name	Drug Tier	Requirements/ Limits
TRAVATAN Z SOLN (<i>travoprost</i>)	P	Brand Preferred
<i>travoprost SOLN</i>	NP	Brand Preferred
VYZULTA	NP	
XALATAN SOLN (<i>latanoprost</i>)	NP	QL(5 ML per 31 day(s) retail)
ZIOPTAN (<i>tafluprost</i>)	NP	
OTIC AGENTS - Drugs to Treat the Ear		
Otic Agents - Miscellaneous		
<i>acetic acid (otic)</i>	C	QL(15 ML per 31 day(s) retail)
<i>carbamide peroxide (otic) 6.5 %</i>	C	QL(15 ML per 31 day(s) retail)
Otic Anti-infectives		
<i>ciprofloxacin hcl (otic)</i>	NP	
<i>ofloxacin (otic)</i>	P	1 package(s) per fill retail
Otic Combinations		
CIPRO HC 1 %-0.2 % (<i>ciprofloxacin-hydrocortisone</i>)	NP	
<i>ciprofloxacin-dexamethasone</i>	P	Brand Preferred; QL(7.5 ML per fill retail); 1 max fill(s) per 30 day(s) retail
<i>ciprofloxacin-fluocinolone acetone</i>	NP	
<i>ciprofloxacin-hydrocortisone</i>	NP	
CORTISPORIN-TC	NP	
<i>neomycin-polymyxin-hc (otic) SOLN</i>	P	QL(10 ML per fill retail)
<i>neomycin-polymyxin-hc (otic) SUSP</i>	P	1 package(s) per fill retail
Otic Steroids		
<i>fluocinolone acetone (otic)</i>	C	1 package(s) per 31 day(s) retail

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
<i>hydrocortisone w/acetic acid</i>	C	QL(20 ML per 31 day(s) retail)
OXYTOCICS - Drugs to Prevent/Control Uterine Bleeding		
Oxytocics		
<i>methylergonovine maleate TABS</i>	C	
PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System		
Immune Serums		
GAMMAGARD	C	SP; PA
GAMMAGARD S/D LESS IGA SOLR	C	SP; PA
GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	C	SP; PA
GAMUNEX-C 1 GM/10ML, 2.5 GM/25ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	C	SP; PA
HYPERRHO SOSY IM 1500 UNIT	C	SP
OCTAGAM SOLN 30 GM/300ML	C	SP; PA
RHOGAM ULTRA-FILTERED PLUS SOSY IM	C	SP
XEMBIFY	C	SP; PA
PENICILLINS - Drugs to Treat Bacterial Infections		
Aminopenicillins		
<i>amoxicillin CAPS</i>	P	
<i>amoxicillin CAPS</i>	P	
<i>amoxicillin CHEW 125 MG, 250 MG</i>	P	
<i>amoxicillin SUSR</i>	P	
<i>amoxicillin TABS</i>	P	
<i>ampicillin CAPS 500 MG</i>	P	

Drug Name	Drug Tier	Requirements/ Limits
Natural Penicillins		
EXTENCILLINE SUSR	C	QL(1 EA per 28 day(s) retail)
LENTOCILIN SUSR	C	QL(1 EA per 28 day(s) retail)
<i>penicillin v potassium SOLR</i>	P	
<i>penicillin v potassium TABS</i>	P	
Penicillin Combinations		
<i>amoxicillin & pot clavulanate CHEW</i>	P	QL(20 EA per fill retail)
<i>amoxicillin & pot clavulanate SUSR 42.9 MG/5ML-600 MG/5ML, 57 MG/5ML-400 MG/5ML</i>	P	2 package(s) per fill retail
<i>amoxicillin & pot clavulanate SUSR 57 MG/5ML-400 MG/5ML</i>	C	2 package(s) per fill retail
<i>amoxicillin & pot clavulanate SUSR 28.5 MG/5ML-200 MG/5ML, 62.5 MG/5ML-250 MG/5ML</i>	P	1 package(s) per fill retail
<i>amoxicillin & pot clavulanate SUSR 42.9 MG/5ML-600 MG/5ML, 57 MG/5ML-400 MG/5ML</i>	P	2 package(s) per fill retail
<i>amoxicillin & pot clavulanate TABS 125 MG-250 MG, 125 MG-500 MG</i>	P	QL(30 EA per fill retail)
<i>amoxicillin & pot clavulanate TABS 125 MG-875 MG</i>	P	QL(20 EA per fill retail)
<i>amoxicillin & pot clavulanate TB12</i>	P	QL(40 EA per 31 day(s) retail)
AUGMENTIN ES-600 SUSR (<i>amoxicillin & pot clavulanate</i>)	NP	2 package(s) per fill retail
AUGMENTIN SUSR 31.25 MG/5ML-125 MG/5ML	NP	1 package(s) per fill retail
AUGMENTIN SUSR 31.25 MG/5ML-125 MG/5ML	NP	1 package(s) per fill retail

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
AUGMENTIN TABS 125 MG-500 MG (<i>amoxicillin & pot clavulanate</i>)	NP	QL(30 EA per fill retail)
Penicillinase-Resistant Penicillins		
<i>dicloxacillin sodium</i>	P	
PHARMACEUTICAL ADJUVANTS		
Liquid Vehicles		
SORBITOL XX	C	RX/OTC
Semi Solid Vehicles		
LANOLIN XX	C	
PROGESTINS - Hormone Replacement/Modifying Drugs		
Progestins		
<i>medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG</i>	C	
<i>megestrol acetate (appetite)</i>	NP	
<i>norethindrone acetate TABS</i>	C	
<i>progesterone CAPS</i>	C	QL(1 EA daily)
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions		
Agents for Chemical Dependency		
<i>disulfiram 250 MG</i>	C	
Antidementia Agents		
ADLARITY PTWK	NP	
ARICEPT TABS 23 MG (<i>donepezil hydrochloride</i>)	NP	
ARICEPT TABS 5 MG, 10 MG (<i>donepezil hydrochloride</i>)	NP	QL(1 EA daily)
<i>donepezil hydrochloride TABS 5 MG, 10 MG</i>	P	QL(1 EA daily)
<i>donepezil hydrochloride TABS 23 MG</i>	NP	

Drug Name	Drug Tier	Requirements/ Limits
<i>donepezil hydrochloride TBDP</i>	P	
EXELON 4.6 MG/24HR, 9.5 MG/24HR (<i>rivastigmine</i>)	P	QL(1 EA daily)
EXELON 13.3 MG/24HR (<i>rivastigmine</i>)	P	Brand Preferred
EXELON 13.3 MG/24HR (<i>rivastigmine</i>)	P	
EXELON 4.6 MG/24HR, 9.5 MG/24HR (<i>rivastigmine</i>)	P	Brand Preferred; QL(1 EA daily)
<i>galantamine hydrobromide CP24</i>	NP	QL(1 EA daily)
<i>galantamine hydrobromide SOLN</i>	NP	QL(6 ML daily)
<i>galantamine hydrobromide TABS</i>	NP	QL(2 EA daily)
<i>memantine hcl CP24</i>	NP	
<i>memantine hcl-donepezil hcl CP24</i>	NP	
<i>memantine hcl SOLN</i>	P	QL(10 ML daily)
<i>memantine hcl TABS</i>	NP	
<i>memantine hcl TABS</i>	P	QL(2 EA daily)
NAMZARIC CP24 (<i>memantine hcl-donepezil hcl</i>)	NP	
NAMZARIC CP24	NP	
<i>rivastigmine 4.6 MG/24HR, 9.5 MG/24HR</i>	NP	Brand Preferred; QL(1 EA daily)
<i>rivastigmine 13.3 MG/24HR</i>	NP	Brand Preferred
<i>rivastigmine tartrate CAPS</i>	P	QL(2 EA daily)
ZUNVEYL TBEC PO 5 MG, 10 MG, 15 MG	NP	
Combination Psychotherapeutics		
LYBALVI	NP	AL(At least 18 yrs old); ST

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>olanzapine-fluoxetine hcl</i> 25 MG-12 MG, 50 MG-12 MG, 50 MG-6 MG	NP	ST	COPAXONE SOSY 20 MG/ML (<i>glatiramer acetate</i>)	P	Brand Preferred; SP
<i>olanzapine-fluoxetine hcl</i> 25 MG-3 MG, 25 MG-6 MG	NP	AL(At least 10 yrs old); ST	<i>dalfampridine</i>	P	
<i>perphenazine-amitriptyline</i>	C	QL(4 EA daily)	<i>dalfampridine</i>	P	SP
Fibromyalgia Agents			<i>dimethyl fumarate CDPK</i>	P	SP
SAVELLA TITRATION PACK MISC	NP	QL(55 EA per 365 day(s) retail)	<i>dimethyl fumarate CPDR</i>	P	
SAVELLA TABS	NP	QL(2 EA daily)	<i>dimethyl fumarate CPDR</i>	P	SP
TONMYA SUBL SL 2.8 MG	NP		<i> fingolimod hcl</i>	P	QL(1 EA daily); SP
Movement Disorder Drug Therapy			GILENYA (<i> fingolimod hcl</i>)	NP	QL(1 EA daily); SP
AUSTEDO XR PATIENT TITRATION TEPK	NP	SP	GILENYA 0.25 MG	NP	SP
AUSTEDO XR TB24	P	SP	<i>glatiramer acetate SOSY</i> 40 MG/ML	NP	SP
AUSTEDO TABS	P	SP	<i>glatiramer acetate SOSY</i> 20 MG/ML	NP	Brand Preferred; SP
INGREZZA CAPS	P	SP	<i>glatiramer acetate SOSY</i> 40 MG/ML	NP	
INGREZZA CPPK	P	SP	<i>glatiramer acetate SOSY</i> 20 MG/ML	NP	Brand Preferred
INGREZZA CPSP	P	SP	KESIMPTA	PA	SP; PA
<i>tetrabenazine</i>	P		MAVENCLAD (10 TABS) 10 MG (<i>cladribine</i> (<i>multiple sclerosis</i>))	NP	SP
<i>tetrabenazine</i>	P	SP	MAVENCLAD (4 TABS) 10 MG (<i>cladribine</i> (<i>multiple sclerosis</i>))	NP	SP
XENAZINE (<i>tetrabenazine</i>)	NP	SP	MAVENCLAD (5 TABS) 10 MG (<i>cladribine</i> (<i>multiple sclerosis</i>))	NP	SP
Multiple Sclerosis Agents			MAVENCLAD (6 TABS) 10 MG (<i>cladribine</i> (<i>multiple sclerosis</i>))	NP	SP
AMPYRA (<i>dalfampridine</i>)	NP	SP	MAVENCLAD (7 TABS) 10 MG (<i>cladribine</i> (<i>multiple sclerosis</i>))	NP	SP
AUBAGIO (<i>teriflunomide</i>)	NP	QL(1 EA daily); SP	MAVENCLAD (8 TABS) 10 MG (<i>cladribine</i> (<i>multiple sclerosis</i>))	NP	SP
AVONEX PEN AJKT	P	SP	MAVENCLAD (9 TABS) 10 MG (<i>cladribine</i> (<i>multiple sclerosis</i>))	NP	SP
AVONEX PREFILLED PSKT	P	SP			
BAFIERTAM	NP	SP			
BETASERON KIT	P	SP			
<i>cladribine</i> (<i>multiple sclerosis</i>) 10 MG	NP				
COPAXONE SOSY 40 MG/ML (<i>glatiramer acetate</i>)	NP	SP			

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MAYZENT STARTER PACK TBPK 0.25 MG	NP	SP	GRALISE TABS (gabapentin (once-daily))	NP	
MAYZENT TABS	NP	SP	LYRICA CR (pregabalin (once-daily))	NP	
PLEGRIDY STARTER PACK SOAJ	NP	SP	pregabalin (once-daily)	NP	
PLEGRIDY STARTER PACK SOSY SC	NP	SP	Premenstrual Dysphoric Disorder (PMDD) Agents		
PLEGRIDY SOAJ	NP	SP	fluoxetine hcl (pmdd) TABS	P	
PLEGRIDY SOSY IM	NP	SP	Restless Leg Syndrome (RLS) Agents		
PONVORY STARTER PACK TBPK	NP	SP	HORIZANT	NP	
PONVORY STARTER PACK TBPK	NP		Smoking Deterrents		
PONVORY TABS	NP	SP	bupropion hcl (smoking deterrent)	P	QL(2 EA daily)
PONVORY TABS	NP		CHANTIX CONTINUING MONTH PAK TABS (varenicline tartrate)	P	QL(2 EA daily; 56 EA per 30 day(s) retail)
REBIF REBIDOSE TITRATION PACK SOAJ	NP	SP	CHANTIX STARTING MONTH PAK TBPK (varenicline tartrate)	P	QL(2 EA daily; 53 EA per 30 day(s) retail)
REBIF REBIDOSE SOAJ	NP	SP	CHANTIX TABS 0.5 MG (varenicline tartrate)	P	QL(2 EA daily)
REBIF TITRATION PACK SOSY	NP	SP	CHANTIX TABS 1 MG (varenicline tartrate)	P	QL(2 EA daily; 56 EA per 30 day(s) retail)
REBIF SOSY	NP	SP	nicotine polacrilex GUM	P	QL(24 EA daily)
TASCENSO ODT	NP	SP	nicotine polacrilex LOZG	P	QL(20 EA daily)
TECFIDERA CDPK (dimethyl fumarate)	NP	SP	NICOTINE KIT	P	QL(56 EA per fill retail)
TECFIDERA CPDR (dimethyl fumarate)	NP	SP	nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR	P	QL(1 EA daily)
teriflunomide	P	QL(1 EA daily); SP	NICOTROL NS SOLN	P	QL(4 ML daily); SL
TYRUKO CONC IV 300 MG/15ML	C	AL(At least 18 yrs old); SP; PA	varenicline tartrate TABS 1 MG	P	QL(2 EA daily; 56 EA per 30 day(s) retail)
VUMERITY	NP	SP	varenicline tartrate TABS 0.5 MG	P	QL(2 EA daily)
ZEPOSIA 7-DAY STARTER PACK CPPK	NP	SP	varenicline tartrate TBPK	P	QL(2 EA daily; 53 EA per 30 day(s) retail)
ZEPOSIA STARTER KIT CPPK	NP	SP			
ZEPOSIA CAPS	NP	SP			
Postherpetic Neuralgia (PHN)/Neuropathic Pain Agents					
gabapentin (once-daily) TABS	NP				

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
Transthyretin Amyloidosis Agents		
TEGSEDI	C	SP; PA
Vasomotor Symptom Agents		
<i>paroxetine mesylate (vasomotor)</i>	NP	
RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions		
Cystic Fibrosis Agents		
ORKAMBI PACK	C	SP; PA
ORKAMBI TABS	C	SP; PA
SYMDEKO	C	SP; PA
TRIKAFTA TBPk	C	QL(3 EA daily); SP; PA
Pulmonary Fibrosis Agents		
OFEV	C	SP; PA
<i>pirfenidone CAPS</i>	C	SP; PA
<i>pirfenidone TABS</i>	C	SP; PA
TETRACYCLINES - Drugs to Treat Bacterial Infections		
Aminomethylcyclines		
NUZYRA TABS	NP	
Tetracyclines		
<i>demeclocycline hcl TABS</i>	NP	
DORYX MPC TBEC 60 MG	NP	
<i>doxycycline (monohydrate) CAPS</i>	NP	
<i>doxycycline (monohydrate) SUSR</i>	NP	
<i>doxycycline (monohydrate) TABS</i>	NP	
<i>doxycycline hyclate CAPS</i>	P	
<i>doxycycline hyclate TABS</i>	P	
<i>doxycycline hyclate TBEC</i>	NP	
<i>minocycline hcl CAPS</i>	P	
<i>minocycline hcl TABS</i>	P	

Drug Name	Drug Tier	Requirements/ Limits
<i>minocycline hcl TB24</i>	NP	
<i>tetracycline hcl CAPS</i>	P	
TETRACYCLINE HCL TABS	P	
THYROID AGENTS - Drugs to Regulate Thyroid Hormones		
Antithyroid Agents		
<i>methimazole TABS</i>	C	
<i>propylthiouracil</i>	C	
Thyroid Hormones		
ADTHYZA TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	C	
ARMOUR THYROID TABS	C	
EVEXITHROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG, 180 MG	C	
<i>levothyroxine sodium TABS</i>	C	
<i>liothyronine sodium TABS</i>	C	
NIVA THYROID TABS	C	
NP THYROID TABS	C	
RENTHYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	C	
THYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	C	
TOXOIDS		
Toxoid Combinations		
ADACEL SUSP	C	QL(0.5 ML per fill retail; 0.5 per fill mail)
ADACEL SUSY 2 LF/0.5ML-5 LF/0.5ML-15.5 MCG/0.5ML	C	QL(0.5 ML per fill retail; 0.5 per fill mail)
BOOSTRIX SUSP	C	QL(0.5 ML per fill retail; 0.5 per fill mail)

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
BOOSTRIX SUSY	C	QL(0.5 ML per fill retail; 0.5 per fill mail)	<i>sucralfate TABS</i>	C	QL(4 EA daily)
TETANUS-DIPHThERIA TOXOIDS TD SUSP	C	QL(0.5 ML per fill retail; 0.5 per fill mail)	Proton Pump Inhibitors		
ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions			DEXILANT (<i>dexlansoprazole</i>)	P	Brand Preferred
Antispasmodics			<i>dexlansoprazole</i>	NP	Brand Preferred
<i>dicyclomine hcl CAPS</i>	C		<i>esomeprazole magnesium CPDR 20 MG</i>	NP	QL(2 EA daily); RX/OTC
<i>dicyclomine hcl SOLN PO</i>	C	QL(496 ML per 31 day(s) retail)	<i>esomeprazole magnesium CPDR 40 MG</i>	NP	
<i>dicyclomine hcl TABS</i>	C		<i>esomeprazole magnesium PACK</i>	P	
<i>glycopyrrolate TABS 1 MG, 2 MG</i>	C	QL(4 EA daily)	<i>lansoprazole CPDR 30 MG</i>	NP	QL(2 EA daily)
<i>hyoscyamine sulfate ELIX</i>	C		<i>lansoprazole CPDR 15 MG</i>	NP	QL(4 EA daily); RX/OTC
<i>hyoscyamine sulfate SOLN PO 0.125 MG/ML</i>	C		<i>lansoprazole TBDD</i>	NP	RX/OTC
<i>hyoscyamine sulfate SUBL 0.125 MG</i>	C		NEXIUM CPDR 20 MG (<i>esomeprazole magnesium</i>)	NP	QL(2 EA daily); RX/OTC
<i>hyoscyamine sulfate TABS 0.125 MG</i>	C		NEXIUM CPDR 40 MG (<i>esomeprazole magnesium</i>)	NP	
<i>hyoscyamine sulfate TB12 0.375 MG</i>	C	QL(4 EA daily)	NEXIUM PACK (<i>esomeprazole magnesium</i>)	NP	
<i>hyoscyamine sulfate TBDP 0.125 MG</i>	C		<i>omeprazole magnesium TBEC</i>	C	QL(1 EA daily)
H-2 Antagonists			<i>omeprazole CPDR</i>	P	QL(2 EA daily)
<i>cimetidine hcl PO 300 MG/5ML</i>	NP		<i>omeprazole TBEC</i>	C	QL(1 EA daily)
<i>cimetidine TABS</i>	NP	RX/OTC	<i>pantoprazole sodium PACK</i>	NP	Brand Preferred
<i>famotidine SUSR</i>	P		<i>pantoprazole sodium TBEC 20 MG</i>	P	QL(1 EA daily)
<i>famotidine TABS 20 MG, 40 MG</i>	P	RX/OTC	<i>pantoprazole sodium TBEC 40 MG</i>	P	QL(2 EA daily)
<i>famotidine TABS 10 MG</i>	C		PREVACID SOLUTAB TBDD (<i>lansoprazole</i>)	NP	RX/OTC
<i>nizatidine CAPS</i>	NP		PREVACID CPDR 30 MG (<i>lansoprazole</i>)	NP	QL(2 EA daily)
RANITIDINE HCL TABS 150 MG, 300 MG	NP		PRILOSEC PACK	NP	
Misc. Anti-Ulcer					
<i>sucralfate SUSP</i>	C	QL(420 ML per fill retail)			

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
PROTONIX PACK (<i>pantoprazole sodium</i>)	P	Brand Preferred
PROTONIX TBEC 40 MG (<i>pantoprazole sodium</i>)	NP	QL(2 EA daily)
PROTONIX TBEC 20 MG (<i>pantoprazole sodium</i>)	NP	QL(1 EA daily)
<i>rabeprazole sodium TBEC</i>	NP	
Ulcer Drugs - Prostaglandins		
<i>misoprostol</i>	C	PA
Ulcer Therapy Combinations		
<i>amoxicillin-clarithromycin w/ lansoprazole THPK</i>	C	14 day(s) max supply per 365 day(s) retail
KONVOMEK SUSR	NP	
<i>omeprazole-sodium bicarbonate CAPS</i>	NP	RX/OTC
<i>omeprazole-sodium bicarbonate PACK</i>	NP	
URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms		
Urinary Antispasmodic - Antimuscarinics (Anticholinergic)		
<i>darifenacin hydrobromide</i>	NP	
DETROL LA CP24 (<i>tolterodine tartrate</i>)	NP	QL(1 EA daily)
DETROL TABS (<i>tolterodine tartrate</i>)	NP	QL(2 EA daily)
<i>fesoterodine fumarate</i>	P	
<i>oxybutynin chloride SOLN</i>	P	
<i>oxybutynin chloride TABS 5 MG</i>	P	QL(3 EA daily)
<i>oxybutynin chloride TABS 2.5 MG</i>	P	
<i>oxybutynin chloride TB24</i>	P	QL(2 EA daily)
OXYTROL PTTW	NP	RX/OTC
<i>solifenacin succinate TABS</i>	P	
<i>tolterodine tartrate CP24</i>	NP	QL(1 EA daily)
<i>tolterodine tartrate TABS</i>	NP	QL(2 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
TOVIAZ (<i>fesoterodine fumarate</i>)	NP	
<i>trospium chloride CP24</i>	NP	
<i>trospium chloride TABS</i>	NP	QL(2 EA daily)
VESICARE LS SUSP	NP	
VESICARE TABS (<i>solifenacin succinate</i>)	NP	
Urinary Antispasmodics - Beta-3 Adrenergic Agonists		
GEMTESA	NP	
<i>mirabegron TB24</i>	NP	Brand Preferred
MYRBETRIQ SRER	NP	
MYRBETRIQ TB24 (<i>mirabegron</i>)	P	Brand Preferred
Urinary Antispasmodics - Cholinergic Agonists		
<i>bethanechol chloride</i>	C	
Urinary Antispasmodics - Direct Muscle Relaxants		
<i>flavoxate hcl</i>	NP	
VACCINES		
Bacterial Vaccines		
ACTHIB SOLR IM	C	
BCG VACCINE	C	
BEXSERO 0.5 ML	C	
BIOTHRAX	C	AL(Up to 65 yrs old)
CAPVAXIVE	C	Max 1 per lifetime; QL(0.5 ML per fill retail; 0.5 per fill mail); 1 max fill(s) per 720 day(s) retail; 1 max fill(s) per 720 day(s) mail; AL(At least 19 yrs old)
HIBERIX SOLR IJ	C	

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MENACTRA	C	AL(Up to 55 yrs old)	PREVNAR 20	C	Max 1 per lifetime; QL(0.5 ML per fill retail; 0.5 per fill mail); 1 max fill(s) per 720 day(s) retail; 1 max fill(s) per 720 day(s) mail; AL(At least 19 yrs old)
MENQUADFI 0.5 ML	C				
MENVEO SOLN	C	AL(Up to 55 yrs old)	TRUMENBA 0.5 ML	C	
MENVEO SOLR	C	AL(Up to 55 yrs old)	TYPHIM VI SOLN	C	
PEDVAX HIB SUSP	C		TYPHIM VI SOSY	C	
PENBRAYA	C	AL(Up to 25 yrs old)	VAXCHORA	C	
PENMENVY SUSR IM	C		VAXNEUVANCE	C	Max 1 per lifetime; QL(0.5 ML per fill retail; 0.5 per fill mail); 1 max fill(s) per 720 day(s) retail; 1 max fill(s) per 720 day(s) mail; AL(At least 19 yrs old)
PNEUMOVAX 23 SOLN	P	Max 1 per lifetime; QL(0.5 ML per fill retail; 0.5 per fill mail); 1 max fill(s) per 720 day(s) retail; 1 max fill(s) per 720 day(s) mail; AL(At least 19 yrs old)	VIVOTIF	C	
PNEUMOVAX 23 SOSY	C	Max 1 per lifetime; QL(0.5 ML per fill retail; 0.5 per fill mail); 1 max fill(s) per 720 day(s) retail; 1 max fill(s) per 720 day(s) mail; AL(At least 19 yrs old)	Viral Vaccines		
			ABRYSVO	C	AL(At least 60 yrs old)
			ACAM2000	C	
			AFLURIA PRESERVATIVE FREE SUSY	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
			AFLURIA SUSP	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
			AREXVY	C	AL(At least 60 yrs old)
			COMIRNATY 5-11 YEARS SUSP 10 MCG/0.3ML	C	
PREVNAR 13	C	Max 1 per lifetime; QL(0.5 ML per fill retail; 0.5 per fill mail); 1 max fill(s) per 720 day(s) retail; 1 max fill(s) per 720 day(s) mail; AL(At least 19 yrs old)			

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
COMIRNATY SUSY	C		FLUMIST	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
ENGERIX-B SUSP 20 MCG/ML	C	3 max fill(s) per 999 day(s) retail	FLUZONE HIGH-DOSE QUADRIVALENT	C	
ENGERIX-B SUSY	C	3 max fill(s) per 999 day(s) retail	FLUZONE HIGH-DOSE SUSY	C	QL(0.5 ML per fill retail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
ERVEBO	C		FLUZONE QUADRIVALENT SUSY	C	
FLUAD	C	QL(0.5 ML per fill retail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail	FLUZONE SUSP	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
FLUAD QUADRIVALENT	C		FLUZONE SUSY	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
FLUARIX QUADRIVALENT SUSY	C		GARDASIL 9 SUSP 0.5 ML	C	3 max fill(s) per 999 day(s) retail; AL(Up to 45 yrs old)
FLUARIX SUSY	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail	GARDASIL 9 SUSY 0.5 ML	C	3 max fill(s) per 999 day(s) retail; AL(Up to 45 yrs old)
FLUBLOK QUADRIVALENT	C		HAVRIX IM 720 EL U/0.5ML, 1440 EL U/ML	C	
FLUBLOK SOSY	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail	HEPLISAV-B SOSY	C	3 max fill(s) per 999 day(s) retail
FLUCELVAX QUADRIVALENT SUSY	C		IMOVAX RABIES SUSR	C	
FLUCELVAX SUSP	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail	IPOLE	C	
FLUCELVAX SUSY	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail	IXIARO	C	
FLULAVAL SUSY	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail	JYNNEOS	C	
			M-M-R II SOLR	C	
			MNEXSPIKE SUSY 10 MCG/0.2ML	C	

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
MODERNA COVID-19 BIVALENT	C	
MODERNA COVID-19 VACCINE SUSP	C	
MRESVIA	C	AL(Up to 60 yrs old)
NUVAXOVID COVID-19 VACCINE SUSY 5 MCG/0.5ML	C	1 max fill(s) per 180 day(s) mail
PFIZER COVID-19 VAC BIVALENT	C	
PFIZER COVID-19 VAC-TRIS 5-11Y SUSP	C	
PFIZER-BIONT COVID-19 VAC-TRIS SUSP	C	
PFIZER-BIONTECH COVID-19 VACC SUSP	C	
PREHEVBRIO	C	3 max fill(s) per 999 day(s) retail
PRIORIX SUSR	C	
RABAVERT	C	
RECOMBIVAX HB SUSP	C	3 max fill(s) per 999 day(s) retail
RECOMBIVAX HB SUSY	C	3 max fill(s) per 999 day(s) retail
SHINGRIX	C	2 max fill(s) per 999 day(s) retail; AL(At least 50 yrs old)
SPIKEVAX 6M-11Y SUSY 25 MCG/0.25ML	C	
SPIKEVAX SUSY	C	
STAMARIL SUSR	C	
TICOVAC	C	
TWINRIX SUSY	C	
VAQTA	C	
VAQTA IM 25 UNIT/0.5ML, 50 UNIT/ML	C	

Drug Name	Drug Tier	Requirements/ Limits
VARIVAX SUSR	C	2 max fill(s) per 999 day(s) retail
YF-VAX SUSR	C	
VAGINAL AND RELATED PRODUCTS		
Vaginal Anti-infectives		
<i>clindamycin phosphate vaginal CREA</i>	C	
<i>clotrimazole vaginal CREA 1 %</i>	C	QL(45 GM per 31 day(s) retail)
<i>clotrimazole vaginal CREA 2 %</i>	C	QL(21 GM per 31 day(s) retail)
GYNAZOLE-1	C	
<i>metronidazole vaginal</i>	C	
MICONAZOLE 7 SUPP 100 MG	C	QL(7 EA per 31 day(s) retail)
<i>miconazole nitrate vaginal CREA 2 %</i>	C	QL(45 GM per 31 day(s) retail)
<i>miconazole nitrate vaginal KIT</i>	C	1 package(s) per fill retail
<i>miconazole nitrate vaginal SUPP 100 MG</i>	C	QL(7 EA per 31 day(s) retail)
<i>miconazole nitrate vaginal SUPP 200 MG</i>	C	QL(3 EA per fill retail; 3 EA per 31 day(s) retail)
<i>terconazole vaginal CREA</i>	C	
<i>terconazole vaginal SUPP</i>	C	
<i>tioconazole vaginal 6.5 %</i>	C	
VANDAZOLE	C	
Vaginal Estrogens		
<i>estradiol vaginal CREA</i>	C	QL(43 GM per 31 day(s) retail)
<i>estradiol vaginal TABS</i>	C	
PREMARIN	C	
VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions		
Anaphylaxis Therapy Agents		
AUVI-Q SOAJ 0.1 MG/0.1ML, 0.15 MG/0.15ML	NP	

Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
AUVI-Q SOAJ 0.3 MG/0.3ML	NP	QL(0.067 EA daily; 4 EA per 365 day(s) retail)	<i>ergocalciferol SOLN PO 200 MCG/ML</i>	C	QL(60 ML per 90 day(s) retail)
<i>epinephrine (anaphylaxis) SOAJ</i>	NP	Brand Preferred; QL(0.067 EA daily; 4 EA per 365 day(s) retail)	<i>phytonadione TABS 5 MG</i>	C	
<i>epinephrine (anaphylaxis) SOAJ</i>	P	Brand Preferred; QL(0.067 EA daily; 4 EA per 365 day(s) retail)	<i>vitamin e CAPS 180 MG, 200 UNIT, 400 UNIT, 90 MG, 90 MG, 180 MG</i>	C	QL(2 EA daily)
<i>epinephrine (anaphylaxis) SOAJ 0.15 MG/0.15ML</i>	NP		Water Soluble Vitamins		
<i>epinephrine (anaphylaxis) SOAJ 0.3 MG/0.3ML</i>	NP	QL(0.067 EA daily; 4 EA per 365 day(s) retail)	<i>ascorbic acid TABS</i>	C	QL(3.34 EA daily)
EPIPEN 2-PAK SOAJ (<i>epinephrine (anaphylaxis)</i>)	P	Brand Preferred; QL(0.067 EA daily; 4 EA per 365 day(s) retail)	B-1 TABS	C	QL(3.34 EA daily)
EPIPEN JR 2-PAK SOAJ (<i>epinephrine (anaphylaxis)</i>)	P	Brand Preferred; QL(0.067 EA daily; 4 EA per 365 day(s) retail)	<i>niacin CPCR 250 MG, 500 MG</i>	C	
Vasopressors			<i>niacin TABS 500 MG</i>	C	
<i>midodrine hcl</i>	C		<i>niacin TBCR</i>	C	
VITAMINS			<i>pyridoxine hcl TABS 25 MG, 50 MG, 100 MG</i>	C	
Oil Soluble Vitamins			<i>riboflavin TABS</i>	C	QL(3.34 EA daily)
<i>cholecalciferol CAPS 1.25 MG, 1250 MCG, 50000 UNIT</i>	C	QL(8 EA per 31 day(s) retail)	<i>thiamine hcl TABS 100 MG</i>	C	QL(3.34 EA daily)
<i>cholecalciferol CAPS</i>	C	QL(100 EA per fill retail)	<i>thiamine hcl TABS 50 MG, 250 MG</i>	C	
<i>cholecalciferol LIQD PO 10 MCG/ML</i>	C		<i>thiamine mononitrate TABS 100 MG</i>	C	QL(3.34 EA daily)
<i>ergocalciferol CAPS</i>	C				

Updated January 2026

INDEX

abacavir sulfate SOLN	42	ACCU-CHEK GUIDE KIT	71	ACTEMRA ACTPEN SOAJ	5
abacavir sulfate TABS	42	ACCU-CHEK GUIDE ME KIT	71	ACTEMRA SOLN	5
abacavir sulfate-lamivudine	42	ACCU-CHEK GUIDE TEST STRP	62	ACTEMRA SOSY	5
ABC COMPLETE ADULT TABS ..	80	ACCU-CHEK SMARTVIEW STRP	62	ACTHIB SOLR IM	101
ABC COMPLETE MENS TABS ...	80	ACCU-CHEK SOFTCLIX LANCETS	71	ACTIVNUTRIENTS CAPS	80
ABC COMPLETE SENIOR 50+ TABS	80	ACCUPRIL (quinapril hcl)	33	ACTIVNUTRIENTS PERFORMANCE CAPS	80
ABC COMPLETE SENIOR MENS 50+ TABS	80	ACCURETIC 12.5 MG-10 MG (quinapril-hydrochlorothiazide)	34	ACTIVNUTRIENTS W/O IRON CAPS	80
ABC COMPLETE SENIOR WOMENS 50+ TABS	80	ACCURETIC 12.5 MG-20 MG (quinapril-hydrochlorothiazide)	34	ACTONEL TABS 150 MG (risedronate sodium)	63
ABC COMPLETE WOMENS TABS 80		acebutolol hcl CAPS	45	ACTONEL TABS 35 MG (risedronate sodium)	63
ABILIFY ASIMTUFII PRSY	41	acetaminophen CHEW	7	ACTOPLUS MET TABS 850 MG-15 MG (pioglitazone hcl-metformin hcl) 24	
ABILIFY MAINTENA PRSY	41	acetaminophen LIQD 160 MG/5ML	7	ACTOS (pioglitazone hcl)	29
ABILIFY MAINTENA SRER	41	acetaminophen SOLN PO 160 MG/5ML, 325 MG/10.15ML, 650 MG/20.3ML	8	ACULAR (ketorolac tromethamine (ophth))	93
ABILIFY MYCITE MAINTENANCE KIT	41	acetaminophen SUPP 120 MG, 650 MG	8	ACULAR LS (ketorolac tromethamine (ophth))	93
ABILIFY MYCITE STARTER KIT ..	41	acetaminophen SUSP 160 MG/5ML, 650 MG/20.3ML	8	ACUVAIL	93
ABILIFY TABS 2 MG, 10 MG, 15 MG, 20 MG, 30 MG (aripiprazole) ..	41	acetaminophen TABS 325 MG, 500 MG	8	acyclovir CAPS	45
ABILIFY TABS 5 MG (aripiprazole) 41		acetaminophen w/ codeine SOLN ..	9	acyclovir SUSP	45
abiraterone acetate	37	acetaminophen w/ codeine TABS 15 MG-300 MG, 30 MG-300 MG, 60 MG-300 MG	10	acyclovir TABS PO 400 MG	45
ABRILADA (1 PEN) AJKT	4	acetaminophen w/ codeine TABS ..	10	acyclovir TABS PO 800 MG	45
ABRILADA (2 PEN) AJKT	4	acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG ...	10	acyclovir topical CREA	55
ABRILADA (2 SYRINGE) PSKT	4	acetazolamide CP12	63	acyclovir topical OINT	55
ABRYSVO	102	acetazolamide TABS	63	ADACEL SUSP	99
ACAM2000	102	acetic acid (otic)	94	ADACEL SUSY 2 LF/0.5ML-5 LF/0.5ML-15.5 MCG/0.5ML	99
acarbose	24	acetylcysteine SOLN	51	ADAKVEO	68
ACCOLATE (zafirlukast)	14			ADALIMUMAB-AACF (2 PEN) AJKT ..	
ACCU-CHEK AVIVA PLUS STRP ..	62				

4	adapalene-benzoyl peroxide GEL .52	INTERM DEVI74
ADALIMUMAB-AACF (2 SYRINGE) PSKT4	ADASUVE40	AEROCHAMBER PLUS FLO-VU LARGE DEVI74
ADALIMUMAB-AACF(CD/UC/HS STRT) AJKT4	ADBRY SOAJ58	AEROCHAMBER PLUS FLO-VU LARGE MISC74
ADALIMUMAB-AACF(PS/UV STARTER) AJKT4	ADBRY SOSY58	AEROCHAMBER PLUS FLO-VU MEDIUM DEVI74
ADALIMUMAB-AATY (1 PEN) AJKT .4	ADCIRCA TABS (tadalafil (pulmonary hypertension))48	AEROCHAMBER PLUS FLO-VU MEDIUM MISC74
ADALIMUMAB-AATY (2 PEN) AJKT .4	ADDERALL TABS (amphetamine-dextroamphetamine)1	AEROCHAMBER PLUS FLO-VU MISC74
ADALIMUMAB-AATY (2 SYRINGE) PSKT4	ADDERALL XR CP24 (amphetamine-dextroamphetamine) .1	AEROCHAMBER PLUS FLO-VU SMALL DEVI74
ADALIMUMAB-AATY CD/UC/HS START AJKT 80 MG/0.8ML4	adefovir dipivoxil44	AEROCHAMBER PLUS FLO-VU SMALL MISC74
ADALIMUMAB-ADAZ SOAJ4	ADEMPAS48	AEROCHAMBER PLUS FLO-VU W/MASK MISC74
ADALIMUMAB-ADAZ SOSY 10 MG/0.1ML4	ADLARITY PTWK96	AEROCHAMBER PLUS FLOW VU MISC74
ADALIMUMAB-ADAZ SOSY4	ADMELOG SOLN IJ26	AEROCHAMBER W/FLOWSIGNAL MISC74
ADALIMUMAB-ADBM (2 PEN) AJKT 4	ADMELOG SOLOSTAR SOPN ...26	AEROCHAMBER Z-STAT PLUS CHAMBR MISC74
ADALIMUMAB-ADBM (2 SYRINGE) PSKT4	ADRENAL STRESS CALM TABS .89	AEROCHAMBER Z-STAT PLUS/MEDIUM MISC74
ADALIMUMAB-FKJP (2 PEN) AJKT .4	ADTHYZA TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG99	AEROCHAMBER Z-STAT PLUS/LARGE MISC74
ADALIMUMAB-FKJP (2 SYRINGE) PSKT4	ADVAIR DISKUS AEPB (fluticasone-salmeterol)14	AEROCHAMBER Z-STAT PLUS/SMALL MISC74
ADALIMUMAB-FKJP (2 SYRINGE) PSKT4	ADVAIR HFA AERO (fluticasone-salmeterol)14	AEROCHAMBER2GO ANTI-STATIC DEVI74
ADALIMUMAB-RYVK (1 PEN) AJKT 80 MG/0.8ML4	ADZENYS XR-ODT TBED 3.1 MG, 6.3 MG, 9.4 MG, 12.5 MG, 15.7 MG, 18.8 MG (amphetamine)1	AEROVENT PLUS DEVI74
ADALIMUMAB-RYVK (2 PEN) AJKT .4	AEROCHAMBER HOLDING CHAMBER DEVI74	AFLOTA TABS80
ADALIMUMAB-RYVK (2 SYRINGE) PSKT4	AEROCHAMBER MINI CHAMBER DEVI74	
adapalene CREA52	AEROCHAMBER MV MISC74	
adapalene GEL 0.3 %52	AEROCHAMBER PLS FLOVU MTHPIECE DEVI74	
	AEROCHAMBER PLUS FLO-VU	

AFLURIA PRESERVATIVE FREE SUSY	102	ALIVE CALCIUM BONE SUPPORT TABS	80	alogliptin-metformin hcl	24
AFLURIA SUSP	102	ALIVE DAILY ENERGY TABS	80	alogliptin-pioglitazone 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG	24
AFREZZA POWD	26	ALIVE DIABETIC MULTIVITAMIN TABS	80	ALORA PTTW 0.025 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR ...	64
AGAMREE	49	ALIVE ENERGY 50+ TABS	80	alose tron hcl	66
AIMOVIG	76	ALIVE EVERYDAY IMMUNE HEALTH CAPS	80	ALPHA BETIC TABS	80
AIRDUO RESPICLICK 113/14 AEPB (fluticasone-salmeterol)	15	ALIVE GARDEN GOODNESS TABS 80		ALPHAGAN P (brimonidine tartrate) 92	
AIRDUO RESPICLICK 232/14 AEPB (fluticasone-salmeterol)	15	ALIVE HAIR, SKIN & NAILS CAPS 80		alprazolam TABS	13
AIRDUO RESPICLICK 55/14 AEPB (fluticasone-salmeterol)	15	ALIVE MAX 6 POTENCY CAPS ...	80	ALREX SUSP (lote prednol etabonate)	93
AIRSUPRA	15	ALIVE MENS 50+ TABS	80	ALTACE CAPS 1.25 MG, 5 MG, 10 MG (ramipril)	33
AJOVY SOAJ	76	ALIVE MENS 50+ ULTRA TABS ...	80	ALTOPREV TB24 20 MG, 40 MG, 60 MG	33
AJOVY SOSY	76	ALIVE MENS COMPLETE MULTI TABS	80	ALTRIXA TABS	87
AKLIEF	52	ALIVE MENS ULTRA TABS	80	alum & mag hydrox-simethicone LIQD	12
AKYNZEO	30	ALIVE ONCE DAILY WOMENS TABS	80	alum & mag hydrox-simethicone SUSP 1200 MG/30ML-120 MG/30ML-1200 MG/30ML, 200 MG/5ML-20 MG/5ML-200 MG/5ML, 400 MG/10ML-40 MG/10ML-400 MG/10ML	12
albuterol sulfate AERS	15	ALIVE ULTRA POTENCY ADULT TABS	80	ALUMINUM HYDROXIDE GEL SUSP	12
albuterol sulfate NEBU 0.083 % ...	15	ALIVE ULTRA POTENCY WOMENS 50+ TABS	80	ALVESCO	14
albuterol sulfate NEBU 0.63 MG/3ML, 1.25 MG/3ML	15	ALIVE WOMENS 50+ COMPLETE MV TABS	80	amantadine hcl CAPS	38
albuterol sulfate NEBU	15	ALIVE WOMENS ENERGY TABS	80	amantadine hcl SOLN	38
albuterol sulfate SYRP	15	ALKINDI SPRINKLE CPSP	49	AMBIEN CR TBCR (zolpidem tartrate)	69
albuterol sulfate TABS	15	ALLERWELL ALLERGY FORMULA TABS	89	AMBIEN TABS (zolpidem tartrate)	69
alclometasone dipropionate CREA	56	allopurinol 100 MG, 300 MG	67	ambrisentan	47
alclometasone dipropionate OINT	56	allopurinol 200 MG	67		
alendronate sodium SOLN	63	almotriptan malate	76		
alendronate sodium TABS 10 MG	63	alogliptin benzoate	25		
alendronate sodium TABS 35 MG, 70 MG	63				
alfuzosin hcl	67				
aliskiren fumarate	35				

amcinonide CREA	56	MG/5ML-250 MG/5ML	95	anastrozole	37
amiloride & hydrochlorothiazide ...	63	amoxicillin & pot clavulanate SUSR		ANDROGEL PUMP GEL TD	
amiloride hcl TABS	63	42.9 MG/5ML-600 MG/5ML, 57		(testosterone)	11
amiodarone hcl TABS 200 MG	13	MG/5ML-400 MG/5ML	95	ANORO ELLIPTA 25 MCG/ACT-62.5	
AMITIZA (lubiprostone)	65	amoxicillin & pot clavulanate SUSR		MCG/ACT (umeclidinium-vilanterol)	
amitriptyline hcl TABS	23	57 MG/5ML-400 MG/5ML	95	15	
AMJEVITA SOAJ	4	amoxicillin & pot clavulanate TABS		ANTIOXIDANT FORMULA TABS .	80
AMJEVITA SOSY	4	125 MG-250 MG, 125 MG-500 MG		ANTIVERT CHEW (meclizine hcl) .	30
AMJEVITA-PED 10KG TO <15KG		95		ANTIVERT TABS 50 MG (meclizine	
SOSY	4	amoxicillin & pot clavulanate TABS		hcl)	30
AMJEVITA-PED 15KG TO <30KG		125 MG-875 MG	95	ANZUPGO CREA EX 20 MG/GM .	58
SOSY	4	amoxicillin & pot clavulanate TB12	95	APETIBEX CAPS	80
AMLACTIN INTENSIVE HEALING		amoxicillin CAPS	95	APEXICON E CREA	56
LOTN 15 %	58	amoxicillin CHEW 125 MG, 250 MG .		APIDRA SOLN	26
AMLADEX TABS	87	95		APIDRA SOLOSTAR SOPN	26
amlodipine besylate TABS	46	amoxicillin SUSR	95	APPE-CURB CAPS	80
amlodipine besylate-atorvastatin		amoxicillin TABS	95	apraclonidine hcl	92
calcium	47	amoxicillin-clarithromycin w/		aprepitant CAPS	30
amlodipine besylate-benazepril hcl		lansoprazole THPK	101	APTENSIO XR CP24	
34		amphetamine sulfate TABS	1	(methylphenidate hcl)	2
amlodipine besylate-olmesartan		amphetamine TBED 3.1 MG, 6.3 MG,		APTIOM 200 MG, 400 MG, 600 MG,	
medoxomil	34	9.4 MG, 12.5 MG, 15.7 MG, 18.8 MG		800 MG (eslicarbazepine acetate) .	18
amlodipine besylate-valsartan 10			1	APTIVUS CAPS	42
MG-160 MG, 10 MG-320 MG, 5 MG-		amphetamine-dextroamphetamine		AQ INSULIN SYRINGE	72
320 MG	34	CP24 12.5 MG, 25 MG, 37.5 MG, 50		AQUA GLYCOLIC HAND/BODY	
amlodipine besylate-valsartan 5 MG-		MG	1	LOTN	58
160 MG	34	amphetamine-dextroamphetamine		AQUA LACTEN LOTN	58
amlodipine-valsartan-		CP24 5 MG, 10 MG, 15 MG, 20 MG,		AQUAMED LOTN	58
hydrochlorothiazide	34	25 MG, 30 MG	1	ARANESP (ALBUMIN FREE) SOLN .	
amoxapine	24	amphetamine-dextroamphetamine		68	
amoxicillin & pot clavulanate CHEW .		TABS	1	ARANESP (ALBUMIN FREE) SOSY .	
95		ampicillin CAPS 500 MG	95	68	
amoxicillin & pot clavulanate SUSR		AMPYRA (dalfampridine)	97	ARBLI PO 10 MG/ML	33
28.5 MG/5ML-200 MG/5ML, 62.5		AMRIX CP24 (cyclobenzaprine hcl)			
		89			

ARCALYST	5	AEPB	14	ATROPINE SULFATE SOLN 1 %	91
AREXVY	102	ASMANEX (60 METERED DOSES) AEPB	14	ATROVENT HFA	13
arformoterol tartrate	15	ASMANEX HFA AERO	14	AUBAGIO (teriflunomide)	97
ARICEPT TABS 23 MG (donepezil hydrochloride)	96	ASPARLAS	37	AUGMENTIN ES-600 SUSR (amoxicillin & pot clavulanate)	95
ARICEPT TABS 5 MG, 10 MG (donepezil hydrochloride)	96	aspirin buffered (cal carb-mag carb- mag oxide)	8	AUGMENTIN SUSR 31.25 MG/5ML- 125 MG/5ML	95
ARIKAYCE	3	aspirin CHEW	8	AUGMENTIN TABS 125 MG-500 MG (amoxicillin & pot clavulanate)	96
aripiprazole SOLN PO	41	ASPIRIN SUPP 300 MG	8	AURYXIA 210 MG (ferric citrate) ..	66
aripiprazole TABS 2 MG, 10 MG, 15 MG, 20 MG, 30 MG	41	aspirin TABS 325 MG	8	AUSTEDO TABS	97
aripiprazole TABS 5 MG	41	aspirin TBEC 81 MG, 325 MG	8	AUSTEDO XR PATIENT TITRATION TEPK	97
aripiprazole TBDP	41	aspirin-dipyridamole	67	AUSTEDO XR TB24	97
ARISTADA 1064 MG/3.9ML	41	ASSURE ID INSULIN SAFETY SYR 72		AUVELITY	21
ARISTADA 441 MG/1.6ML	41	ASTAGRAF XL CP24	78	AUVI-Q SOAJ 0.1 MG/0.1ML, 0.15 MG/0.15ML	104
ARISTADA 662 MG/2.4ML	41	ATACAND (candesartan cilexetil)	33	AUVI-Q SOAJ 0.3 MG/0.3ML	105
ARISTADA 882 MG/3.2ML	41	ATACAND HCT (candesartan cilexetil-hydrochlorothiazide)	34	AVALIDE (irbesartan- hydrochlorothiazide)	34
ARISTADA INITIO	42	atazanavir sulfate CAPS 150 MG, 200 MG	42	AVAPRO 150 MG, 300 MG (irbesartan)	33
ARIXTRA (fondaparinux sodium) ..	16	atazanavir sulfate CAPS 200 MG ..	42	AVAR LS CLEANSER LIQD (sulfacetamide sodium w/ sulfur) ..	52
armodafinil	2	atazanavir sulfate CAPS 300 MG ..	42	AVEENO DAILY MOISTURIZING LOTN	58
ARMOUR THYROID TABS	99	ATELVIA TBEC (risedronate sodium)	63	AVEENO STRESS RELIEF LOTN ..	58
ARNUITY ELLIPTA 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT (fluticasone furoate (inhalation)) ..	14	atenolol & chlorthalidone	34	AVONEX PEN AJKT	97
ARTHROTEC TBEC (diclofenac w/ misoprostol)	6	atenolol TABS	45	AVONEX PREFILLED PSKT	97
ascorbic acid TABS	105	atomoxetine hcl	2	AVSOLA	65
asenapine maleate	40	ATORVALIQ SUSP	33	AZASITE	92
ASMANEX (120 METERED DOSES) AEPB	14	atorvastatin calcium TABS	33	azathioprine TABS	78
ASMANEX (14 METERED DOSES) AEPB	14	atropine sulfate (ophthalmic) OINT ..	91	azelaic acid GEL	61
ASMANEX (30 METERED DOSES)		atropine sulfate (ophthalmic) SOLN 91			

azelastine hcl (ophth)	93	baclofen SUSP	89	BD INSULIN SYRINGE U/F	72
azelastine hcl 0.1 %, 137 MCG/SPRAY	90	baclofen TABS	89	BD INSULIN SYRINGE ULTRAFINE	72
azelastine hcl 0.15 %	90	BACMIN TABS	81	BD PEN NEEDLE MICRO ULTRAFINE	72
azelastine hcl-fluticasone propionate SUSP	90	BAFIERTAM	97	BD PEN NEEDLE MINI ULTRAFINE	72
azithromycin PACK	70	BALMBARR HAND & BODY LOTN 58		BD PEN NEEDLE NANO 2ND GEN . 72	
azithromycin SUSR 100 MG/5ML .	70	balsalazide disodium CAPS	65	BD PEN NEEDLE NANO ULTRAFINE	72
azithromycin SUSR 200 MG/5ML .	70	BANZEL SUSP (rufinamide)	18	BD PEN NEEDLE ORIG ULTRAFINE	72
azithromycin TABS 250 MG	70	BANZEL TABS (rufinamide)	18	BD PEN NEEDLE SHORT ULTRAFINE	72
azithromycin TABS 500 MG	70	BAQSIMI ONE PACK POWD	25	BD VEO INSULIN SYR ULTRAFINE	72
azithromycin TABS 600 MG	70	BAQSIMI TWO PACK POWD	25	BEAUTY 360 ADVANCED SKIN CARE LOTN	58
AZO HORMONAL HEALTH CYCLE CARE TABS	80	BARACLUDE SOLN	44	BELBUCA FILM	11
AZO HORMONAL HEALTH HAPPY CYCL TABS	80	BARACLUDE TABS (entecavir) ...	44	BELSOMRA	69
AZOPT (brinzolamide)	93	BARIATRIC MULTIVITAMINS CAPS 81		benazepril & hydrochlorothiazide .	34
AZOR (amlodipine besylate- olmesartan medoxomil)	34	BARIATRIC MULTIVITAMINS TABS . 81		benazepril hcl 40 MG	33
AZSTARYS	2	BASAGLAR KWIKPEN SOPN	26	benazepril hcl 5 MG, 10 MG, 20 MG . 33	
AZULFIDINE EN-TABS TBEC (sulfasalazine)	65	BASIC AM TABS	81	BENICAR (olmesartan medoxomil) 33	
AZULFIDINE TABS (sulfasalazine) 65		BASIC PM TABS	81	BENICAR HCT (olmesartan medoxomil-hydrochlorothiazide) ...	34
b complex w/ c CAPS	80	BAXDELA TABS	65	benzonatate 100 MG	50
B-1 TABS	105	BCG VACCINE	101	benzonatate 200 MG	50
bacitracin (ophthalmic)	92	b-complex vitamins CAPS	80	benzoyl peroxide GEL 2.5 %, 5 %, 10 %	52
bacitracin (topical) OINT	53	b-complex vitamins TABS	80	BENZOYL PEROXIDE GEL	52
bacitracin zinc OINT	53	b-complex w/ c & folic acid CAPS .	80		
bacitracin-polymyxin b (ophth)	92	BD AUTOSHIELD DUO	72		
bacitracin-poly-neomycin-hc	93	BD INSULIN SYR ULTRAFINE II .	72		
baclofen SOLN PO 5 MG/5ML, 10 MG/5ML	89	BD INSULIN SYRINGE	72		
		BD INSULIN SYRINGE MICROFINE	72		

benzoyl peroxide LIQD 5 %, 10 % .52	BETASERON KIT97	bisoprolol & hydrochlorothiazide 6.25 MG-2.5 MG34
benzoyl peroxide LOTN 5 %, 10 % 52	betaxolol hcl (ophth) SOLN91	bisoprolol fumarate45
BENZOYL PEROXIDE LOTN 5 %, 10 %52	betaxolol hcl45	bisoprolol fumarate 2.5 MG45
benzoyl peroxide-erythromycin GEL . 52	bethanechol chloride101	BLOOD SUGAR MANAGER TABS 81
benztropine mesylate TABS38	BETHKIS NEBU (tobramycin)3	BONEUP 3 PER DAY CAPS81
bepotastine besilate93	BETIMOL (timolol)91	BONEUP CAPS81
BEPREVE (bepotastine besilate) .93	BETIMOL91	BONEUP VEGETARIAN TABS ...81
BESIVANCE92	BETOPTIC-S SUSP91	BONJESTA TBCR30
BETA CARE LOTN58	BEVESPI AEROSPHERE15	BONSITY SOPN 560 MCG/2.24ML 63
betamethasone dipropionate (topical) CREA56	BEXSERO 0.5 ML101	BOOSTNOW IMMUNE SUPPORT CAPS81
betamethasone dipropionate (topical) LOTN56	bicalutamide37	BOOSTRIX SUSP99
betamethasone dipropionate (topical) OINT56	BIKTARVY42	BOOSTRIX SUSY100
betamethasone dipropionate augmented CREA56	bimatoprost SOLN94	bosentan TABS47
betamethasone dipropionate augmented GEL 0.05 %56	BIMZELX SOAJ54	bosentan TBSO 32 MG47
betamethasone dipropionate augmented LOTN56	BIMZELX SOSY54	BPROTECTED PEDIA POLY-VITE SOLN PO88
betamethasone dipropionate augmented OINT56	BINOSTO TBEF63	BPROTECTED PEDIA POLY- VITE/FE SOLN88
betamethasone valerate CREA ...56	BIO-35 GLUTEN-FREE CAPS ...81	BRAFTOVI 75 MG37
betamethasone valerate FOAM ...56	BIO-35 IRON FREE CAPS81	BRAIN MIGHT/DHA & CO Q10 TABS89
betamethasone valerate LOTN56	BIOCAL CAPS81	BREATHE COMFORT CHAMBER/ADULT DEVI74
betamethasone valerate OINT56	BIOLYTE SOLN78	BREATHE COMFORT CHAMBER/CHILD DEVI74
BETAPACE AF (sotalol hcl (afib/af))46	BIOTECT PLUS CAPS81	BREATHE EASE LARGE DEVI ...74
BETAPACE TABS 80 MG, 120 MG, 160 MG (sotalol hcl)46	BIOTHRAX101	BREATHE EASE MEDIUM DEVI ..74
	BIOTIN PLUS KERATIN TABS ...89	BREATHE EASE SMALL DEVI75
	bisacodyl SUPP70	BREATHERITE VALVED MDI
	bisacodyl TBEC70	
	bismuth subsalicylate CHEW 262 MG29	
	bismuth subsalicylate SUSP 525 MG/15ML, 1050 MG/30ML29	
	bisoprolol & hydrochlorothiazide 6.25 MG-10 MG, 6.25 MG-5 MG34	

CHAMBER DEVI	75	budesonide (intrarectal)	12	butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG	7
BREO ELLIPTA (fluticasone furoate- vilanterol)	15	budesonide (nasal)	90	butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG	7
BREO ELLIPTA	15	budesonide CPEP	49	butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-300 MG	10
BREXAFEMME	31	budesonide TB24	49	butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG	10
BREZTRI AEROSPHERE	15	budesonide-formoterol fumarate dihydrate	15	butalbital-aspirin-caffeine CAPS	7
BRILINTA 60 MG, 90 MG (ticagrelor) 67		buprenorphine hcl SUBL	11	butalbital-aspirin-caffeine w/cod ...	10
brimonidine tartrate (topical)	61	buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG	11	butorphanol tartrate NA 10 MG/ML 11	
brimonidine tartrate 0.1 %, 0.15 %	92	buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG ...	11	BUTRANS PTWK (buprenorphine) 11	
brimonidine tartrate 0.2 %	92	buprenorphine hcl-naloxone hcl dihydrate FILM SL	11	BYDUREON BCISE AUIJ	26
brimonidine tartrate-timolol maleate . 91		buprenorphine hcl-naloxone hcl dihydrate SUBL 0.5 MG-2 MG	11	BYETTA 10 MCG PEN SOPN 10 MCG/0.04ML (exenatide)	26
brinzolamide	94	buprenorphine hcl-naloxone hcl dihydrate SUBL 2 MG-8 MG	11	BYETTA 5 MCG PEN SOPN 5 MCG/0.02ML (exenatide)	26
BRIVIACT SOLN PO 10 MG/ML ...	18	bupropion hcl (smoking deterrent)	98	BYSTOLIC (nebivolol hcl)	46
BRIVIACT TABS	18	bupropion hcl TABS	21	CADUET 10 MG-10 MG, 10 MG-20 MG, 10 MG-40 MG, 10 MG-80 MG, 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG (amlodipine besylate-atorvastatin calcium)	47
BRIXADI (WEEKLY) SOSY	11	bupropion hcl TB12 100 MG	21	caffeine citrate SOLN PO	1
BRIXADI SOSY 64 MG/0.18ML, 96 MG/0.27ML, 128 MG/0.36ML	11	bupropion hcl TB12 150 MG	21	calcipotriene CREA	54
bromfenac sodium (ophth)	94	bupropion hcl TB12 200 MG	21	CALCIPOTRIENE FOAM	54
bromocriptine mesylate CAPS	38	bupropion hcl TB24 150 MG	21	calcipotriene OINT	54
bromocriptine mesylate TABS 2.5 MG	38	bupropion hcl TB24 300 MG	21	calcipotriene SOLN	54
brompheniramine & phenyleph ELIX . 50		bupropion hcl TB24 450 MG	21	calcipotriene-betamethasone dipropionate OINT	56
BROMSITE (bromfenac sodium (ophth))	94	buspirone hcl 15 MG	13	calcipotriene-betamethasone	
BROVANA (arformoterol tartrate) .	15	buspirone hcl 5 MG, 10 MG	13		
BRYNOVIN SOLN PO 25 MG/ML .	25	buspirone hcl 7.5 MG, 30 MG	13		
budesonide (inhalation) SUSP 0.25 MG/2ML, 0.5 MG/2ML	14	butalbital-acetaminophen TABS 50 MG-325 MG	7		
budesonide (inhalation) SUSP 1 MG/2ML	14				

dipropionate SUSP56	CAPVAXIVE 101	cefdinir SUSR48
calcitonin (salmon) IJ 63	carbamazepine CHEW18	cefixime CAPS48
calcitonin (salmon) NA63	carbamazepine CP1218	cefixime SUSR48
calcitriol (topical)54	carbamazepine SUSP 18	cefpodoxime proxetil SUSR 48
calcitriol CAPS64	carbamazepine TABS18	cefpodoxime proxetil TABS48
calcium acetate (phosphate binder) CAPS66	carbamazepine TB12 18	cefprozil SUSR 125 MG/5ML48
calcium acetate (phosphate binder) TABS66	carbamide peroxide (otic) 6.5 % ...94	cefprozil SUSR 250 MG/5ML48
calcium carbonate (antacid) CHEW 500 MG12	CARBATROL CP12 (carbamazepine)18	cefprozil TABS48
calcium carbonate-cholecalciferol TABS 10 MCG-600 MG, 400 UNIT- 600 MG78	carbidopa37	ceftriaxone sodium IJ 1 GM, 250 MG, 500 MG48
calcium carbonate-cholecalciferol TABS 200 UNIT-500 MG, 5 MCG- 500 MG, 500 MG-5 MCG78	carbidopa-levodopa TABS38	cefuroxime axetil TABS 250 MG ..48
calcium polycarbophil TABS69	carbidopa-levodopa TBCR38	cefuroxime axetil TABS 500 MG ..48
CAM LOTN58	CARDURA (doxazosin mesylate) .34	CELEBRATE MULTI-COMPLETE 18 CAPS81
camphor & menthol LOTN54	CARDURA XL67	CELEBRATE MULTI-COMPLETE 36 CAPS81
CANASA SUPP (mesalamine)65	CAREONE INSULIN SYRINGE ..72	CELEBRATE MULTI-COMPLETE 45 CAPS81
candesartan cilexetil33	CARETOUCH INSULIN SYRINGE 72	CELEBRATE MULTI-COMPLETE 60 CAPS81
candesartan cilexetil- hydrochlorothiazide34	carisoprodol TABS89	celecoxib6
CAPEX SHAM56	carteolol hcl (ophth)91	CELEXA TABS 10 MG (citalopram hydrobromide)22
CAPLYTA38	carvedilol 25 MG45	CELEXA TABS 20 MG (citalopram hydrobromide)22
capsaicin CREA 0.025 %, 0.035 %, 0.075 %, 0.1 %61	carvedilol 3.125 MG, 6.25 MG, 12.5 MG45	CELEXA TABS 40 MG (citalopram hydrobromide)21
captopril & hydrochlorothiazide 15 MG-25 MG, 15 MG-50 MG, 25 MG- 25 MG34	carvedilol phosphate45	CELLCEPT CAPS (mycophenolate mofetil)78
captopril & hydrochlorothiazide 25 MG-50 MG34	CASGEVY68	CELLCEPT SUSR (mycophenolate mofetil)79
captopril33	CAYSTON36	CELLCEPT TABS (mycophenolate mofetil)79
	cefaclor CAPS48	CELONTIN (methsuximide)20
	CEFACLOER ER TB1248	
	cefadroxil CAPS48	
	cefadroxil SUSR48	
	cefadroxil TABS48	
	cefdinir CAPS48	

CENTANY AT KIT	53	CEQUA SOLN	92	CHANTIX TABS 0.5 MG (varenicline tartrate)	98
CENTRAVITES 50 PLUS TABS ...	81	CERASPORT EX1 SOLN	78	CHANTIX TABS 1 MG (varenicline tartrate)	98
CENTRAVITES ADULTS TABS ...	81	CERASPORT SOLN	78	CHEMET	30
CENTRUM CARDIO TABS	81	CERAVE AM SPF 30 LOTN	58	CHEMSTRIP K STRP	62
CENTRUM MEN TABS	81	CERAVE DAILY MOISTURIZING LOTN	58	chlordiazepoxide hcl CAPS	13
CENTRUM MENOPAUSE HOT FLASH TABS	81	CERAVE PM LOTN	58	chlorhexidine gluconate (mouth-throat)	79
CENTRUM MENOPAUSE MIND/MOOD TABS	88	CERAVE SA ROUGH & BUMPY SKIN LOTN	59	chlorhexidine gluconate SOLN EX 4 %	42
CENTRUM MINIS ADULTS 50+ TABS	81	CERDELGA	68	chloroquine phosphate TABS 250 MG	36
CENTRUM MINIS MEN 50+ TABS 81		CEREZYME 400 UNIT	68	chloroquine phosphate TABS 500 MG	36
CENTRUM MINIS WOMEN 50+ TABS	81	CERTAVITE SENIOR TABS	81	chlorpheniramine maleate SYRP ..	31
CENTRUM MINIS WOMEN IMMUNE SUP TABS	81	CERTAVITE SENIOR/ANTIOXIDANT TABS ...	81	chlorpheniramine maleate TABS ..	31
CENTRUM PERFORMANCE TABS .	89	CERTAVITE/ANTIOXIDANTS TABS .	81	chlorpromazine hcl TABS 10 MG ..	41
CENTRUM SILVER ULTRA WOMENS TABS	81	CETAPHIL ADVANCED RELIEF LOTN	59	chlorpromazine hcl TABS 25 MG, 50 MG, 100 MG, 200 MG	41
CENTRUM SPECIALIST ENERGY TABS	89	CETAPHIL DAILY ADVANCE LOTN .	59	chlorthalidone 25 MG, 50 MG	63
CENTRUM SPECIALIST HEART TABS	81	CETAPHIL DAILY FACIAL SPF 15 LOTN	59	chlorzoxazone TABS 375 MG, 750 MG	89
CENTRUM SPECIALIST IMMUNE TABS	81	CETAPHIL MOISTURIZING LOTN	59	chlorzoxazone TABS	89
CENTRUM SPECIALIST VISION TABS	81	CETAPHIL RESTORADERM LOTN .	59	CHOICEFUL MULTIVITAMIN CAPS .	81
CENTRUM ULTRA WOMENS TABS 81		cetirizine hcl CHEW	31	cholecalciferol CAPS 1.25 MG, 1250 MCG, 50000 UNIT	105
cephalexin CAPS	48	cetirizine hcl SOLN PO	31	cholecalciferol CAPS	105
cephalexin SUSR	48	cetirizine hcl TABS	31	cholecalciferol LIQD PO 10 MCG/ML	105
cephalexin TABS	48	cetirizine-pseudoephedrine	51	cholestyramine light PACK	32
		CHANTIX CONTINUING MONTH PAK TABS (varenicline tartrate) ...	98	cholestyramine light POWD	32
		CHANTIX STARTING MONTH PAK TBPK (varenicline tartrate)	98	cholestyramine PACK	32

cholestyramine POWD	32	CITALOPRAM HYDROBROMIDE SOLN	52
choline fenofibrate	32	clindamycin phosphate (topical) SWAB	52
CIBINQO	58	clindamycin phosphate vaginal CREA	104
ciclopirox GEL	53	clindamycin phosphate-benzoyl peroxide (refrigerate)	52
ciclopirox KIT	53	clindamycin phosphate-benzoyl peroxide GEL	52
ciclopirox olamine CREA	53	clindamycin phosphate-tretinoin ..	52
ciclopirox olamine SUSP	53	CLN FACIAL MOISTURIZER NOURISH LOTN	59
ciclopirox SHAM	53	clobazam SUSP	17
ciclopirox SOLN	53	clobazam TABS	18
cilostazol	67	clobetasol propionate CREA 0.025 %	56
CILOXAN OINT	92	clobetasol propionate CREA 0.05 % .	56
CIMDUO	42	clobetasol propionate emollient base 0.05 %	56
cimetidine hcl PO 300 MG/5ML ..	100	clobetasol propionate emulsion ...	56
cimetidine TABS	100	clobetasol propionate FOAM	56
CIMZIA (1 SYRINGE) PSKT 200 MG/ML	65	clobetasol propionate GEL 0.05 %	56
CIMZIA (2 SYRINGE) PSKT	65	clobetasol propionate LIQD	56
CIMZIA KIT	65	clobetasol propionate LOTN	56
CIMZIA-STARTER PSKT	65	clobetasol propionate OINT 0.05 %	56
CIPRO HC 1 %-0.2 % (ciprofloxacin-hydrocortisone)	94	clobetasol propionate SHAM	56
CIPRO SUSR	65	clobetasol propionate SOLN 0.05 % .	56
CIPRO TABS 250 MG, 500 MG (ciprofloxacin hcl)	65	CLOBEX SHAM (clobetasol propionate)	56
ciprofloxacin hcl (ophth) SOLN	92	CLOBEX SPRAY LIQD (clobetasol propionate)	56
ciprofloxacin hcl (otic)	94		
ciprofloxacin hcl TABS 250 MG, 500 MG, 750 MG	65		
ciprofloxacin-dexamethasone	94		
ciprofloxacin-fluocinolone acetone .	94		
ciprofloxacin-hydrocortisone	94		
CITALOPRAM HYDROBROMIDE CAPS	22		
citalopram hydrobromide SOLN ...	22		
citalopram hydrobromide TABS 10 MG	22		
citalopram hydrobromide TABS 20 MG	22		
citalopram hydrobromide TABS 40 MG	22		
CITRACAL +D3 TABS	81		
cladribine (multiple sclerosis) 10 MG .	97		
CLARINEX TABS (desloratadine) .	31		
CLARINEX-D 12 HOUR TB12	51		
clarithromycin SUSR 125 MG/5ML	70		
clarithromycin SUSR 250 MG/5ML	70		
clarithromycin TABS	70		
clarithromycin TB24	70		
CLENPIQ SOLN 12 GM/175ML-3.5 GM/175ML-10 MG/175ML	69		
CLEOCIN-T LOTN (clindamycin phosphate (topical))	52		
CLEVER CHOICE HOLDING CHAMBER DEVI	75		
clindamycin hcl 150 MG, 300 MG .	36		
clindamycin palmitate hydrochloride .	36		
clindamycin phosphate (topical) FOAM	52		
clindamycin phosphate (topical) GEL	52		
clindamycin phosphate (topical) LOTN	52		
clindamycin phosphate (topical)			

clocortolone pivalate	56	LOTN	59	COMPLERA 200 MG-300 MG-25 MG (emtricitabine-rilpivirine-tenofovir disoproxil fumarate)	42
clomipramine hcl 75 MG	24	COCOA BUTTER LOTN	59	CONCERTA TBCR 18 MG, 27 MG, 54 MG (methylphenidate hcl)	2
clonazepam TABS	18	codeine sulfate TABS 30 MG	8	CONCERTA TBCR 36 MG (methylphenidate hcl)	2
clonidine hcl (adhd) TB12	2	CODEINE SULFATE TABS	8	CONDYLOX GEL (podofilox)	61
clonidine hcl TABS	34	colchicine CAPS	67	CONZIP CP24 (tramadol hcl)	8
clonidine PTWK	34	colchicine TABS	67	COPAXONE SOSY 20 MG/ML (glatiramer acetate)	97
clonidine TB24	34	colchicine w/ probenecid	67	COPAXONE SOSY 40 MG/ML (glatiramer acetate)	97
clopidogrel bisulfate 300 MG	67	COLCRYS TABS (colchicine)	67	CORTEF TABS (hydrocortisone) ..	49
clopidogrel bisulfate 75 MG	67	colesevelam hcl PACK	32	CORTISONE ACETATE TABS	50
clorazepate dipotassium TABS	13	colesevelam hcl TABS	32	CORTISPORIN-TC	94
clotrimazole (topical) CREA	53	COLESTID GRAN (colestipol hcl) ..	32	COSENTYX (300 MG DOSE) SOSY .	54
clotrimazole (topical) SOLN	53	COLESTID TABS (colestipol hcl) ..	32	COSENTYX SENSOREADY (300 MG) SOAJ	54
clotrimazole vaginal CREA 1 % ..	104	colestipol hcl GRAN	32	COSENTYX SENSOREADY PEN SOAJ	54
clotrimazole vaginal CREA 2 % ..	104	colestipol hcl PACK	32	COSENTYX SOSY	54
clotrimazole w/ betamethasone CREA	53	colestipol hcl TABS	32	COSENTYX UNOREADY SOAJ ..	54
clotrimazole w/ betamethasone LOTN	53	COMBIGAN (brimonidine tartrate- timolol maleate)	91	COSOPT (dorzolamide hcl-timolol maleate)	91
clozapine TABS 100 MG	40	COMBIPATCH PTTW	64	COSOPT PF (dorzolamide hcl- timolol maleate)	91
clozapine TABS 25 MG, 50 MG, 200 MG	40	COMBIVENT RESPIMAT AERS ..	15	COTEMPLA XR-ODT TBED	2
clozapine TBDP	40	COMFORT EZ INSULIN SYRINGE .	72	COXANTO CAPS (oxaprozin)	6
CLOZARIL TABS 100 MG (clozapine)	40	COMIRNATY 5-11 YEARS SUSP 10 MCG/0.3ML	102	COZAAR (losartan potassium)	33
CLOZARIL TABS 25 MG, 50 MG, 200 MG (clozapine)	40	COMIRNATY SUSY	103	CREON CPEP 120000 UNIT-76000 UNIT-24000 UNIT, 180000 UNIT- 114000 UNIT-36000 UNIT, 30000 UNIT-19000 UNIT-6000 UNIT, 60000	
coal tar extract SHAM 0.5 %	62	COMPACT SPACE CHAMBER DEVI	75		
COARTEM	36	COMPACT SPACE CHAMBER/LG MASK DEVI	75		
COBENFY CAPS	41	COMPACT SPACE CHAMBER/MED MASK DEVI	75		
COBENFY STARTER PACK CPPK 41		COMPACT SPACE CHAMBER/SM MASK DEVI	75		
COCOA BUTTER HAND & BODY					

UNIT-38000 UNIT-12000 UNIT62	CVS MOISTURIZING LOTN59	CYLTEZO (2 PEN) AJKT 4
CREON CPEP 15000 UNIT-9500 UNIT-3000 UNIT62	CVS ONE DAILY MENS 50+ ADV TABS82	CYLTEZO (2 SYRINGE) PSKT4
CRESEMBA CAPS 31	CVS ONE DAILY WOMENS 50+ ADV TABS 82	CYLTEZO-CD/UC/HS STARTER AJKT 4
CRESTOR TABS (rosuvastatin calcium) 33	CVS SKIN THERAPY LOTN59	CYLTEZO-PSORIASIS/UV STARTER AJKT 4
cromolyn sodium (nasal) 5.2 MG/ACT90	CVS SOFT GLUCOSE CHEW 25	CYMBALTA CPEP (duloxetine hcl) 23
cromolyn sodium (ophth)94	CVS SPECTRAVITE ADULT 50+ TABS82	cyproheptadine hcl SYRP 32
cromolyn sodium NEBU 13	CVS SPECTRAVITE ADULTS TABS 82	cyproheptadine hcl TABS32
crotamiton LOTN62	CVS SPECTRAVITE ULTRA MEN 50+ TABS82	dabigatran etexilate mesylate CAPS . 17
CTEXLI TABS PO 250 MG65	CVS SPECTRAVITE ULTRA MENS TABS82	DAILY MOISTURIZING LOTN59
CULTURELLE PROBIOTIC MEN DAILY CAPS81	CVS SPECTRAVITE ULTRA WOMEN TABS82	DAILY MULTIPLE VITAMINS TABS . 88
CVS ADULT 50+ EYE HEALTH CAPS81	CVS VISION HEALTH CAPS82	dalfampridine97
CVS BEAUTY 360 DRY SKIN LOTN . 59	cyanocobalamin SOLN IJ 1000 MCG/ML68	DALIRESP (roflumilast) 14
CVS DAILY MULTIV/MINERAL MENS TABS81	cyclobenzaprine hcl CP2489	DANTRIUM CAPS 25 MG (dantrolene sodium)90
CVS DAILY MULTIVITAMIN MENS TABS82	cyclobenzaprine hcl TABS 5 MG, 10 MG 90	dantrolene sodium CAPS90
CVS DAILY MULTIVITAMIN WOMENS TABS82	cyclobenzaprine hcl TABS 7.5 MG 89	dapagliflozin propanediol29
CVS DAILY ULTRA MOISTURE LOTN59	cyclobenzaprine hcl TABS 7.5 MG 90	dapagliflozin propanediol-metformin hcl 24
CVS DRY SKIN THERAPY LOTN .59	CYCLOGYL 0.5 %91	dapsone (topical)52
CVS EYE HEALTH ADULT 50+ CAPS82	CYCLOGYL 2 %91	dapsone36
CVS GENTLE SKIN CLEANSER LOTN59	cyclopentolate hcl 1 %91	darifenacin hydrobromide101
CVS GLUCOSE CHEW25	cyclosporine (ophth) EMUL92	darunavir TABS 600 MG42
CVS HAIR/SKIN/NAILS TABS89	cyclosporine CAPS 79	darunavir TABS 800 MG42
CVS IMMUNE SUPPORT CAPS ..82	cyclosporine modified (for microemulsion) CAPS 79	DAVIMET-M CHEW 88
	cyclosporine modified (for microemulsion) SOLN 79	DAYAVITE TABS82
		DAYPRO TABS (oxaprozin) 6
		DAYTRANA PTCH (methylphenidate)2

DAYVIGO	69	DERMACINRX RIBOTIN-E TABS .	82	desogestrel-ethinyl estradiol (triphasic)	49
DECUBI-VITE CAPS	82	DERMACINRX ZINTREXYL-C TABS	82	desonide CREA	56
deferasirox PACK	30	DERMAL THERAPY EXTRA STRENGTH LOTN	59	desonide LOTN	56
deferasirox TABS	30	DERMAL THERAPY FACE CARE LOTN	59	desonide OINT	56
deferasirox TBSO	30	DERMAL THERAPY FOOT MASSAGE LOTN	59	desoximetasone CREA	56
deflazacort SUSP	50	DERMAL THERAPY HAND/ELBOW LOTN	59	desoximetasone GEL	56
deflazacort TABS	50	DERMAL THERAPY HEEL CARE LOTN	59	desoximetasone LIQD	56
DEKAS PLUS CAPS	82	DERMA-SMOOTH/FS BODY OIL (fluocinolone acetonide)	56	desoximetasone OINT	56
DEKAS PLUS OCEAN CAPS	82	DERMA-SMOOTH/FS SCALP OIL (fluocinolone acetonide)	56	DESVENLAFAXINE ER	23
DELSTRIGO	42	DERMAVITE TABS	82	desvenlafaxine succinate 100 MG .	23
demeclocycline hcl TABS	99	DESCOVY 120 MG-15 MG	42	desvenlafaxine succinate 25 MG, 50 MG	23
DENAVIR (penciclovir)	55	DESCOVY 200 MG-25 MG	42	DETROL LA CP24 (tolterodine tartrate)	101
DEPAKOTE ER TB24 250 MG (divalproex sodium)	20	desipramine hcl TABS 10 MG, 50 MG, 75 MG, 100 MG, 150 MG	24	DETROL TABS (tolterodine tartrate) .	101
DEPAKOTE ER TB24 500 MG (divalproex sodium)	20	desipramine hcl TABS 25 MG	24	dexamethasone ELIX	50
DEPAKOTE SPRINKLES CSDR (divalproex sodium)	20	DESLOTATADINE SOLN PO 0.5 MG/ML	31	DEXAMETHASONE INTENSOL CONC	50
DEPAKOTE TBEC 125 MG (divalproex sodium)	20	desloratadine TABS	31	dexamethasone sodium phosphate (ophth)	93
DEPAKOTE TBEC 250 MG (divalproex sodium)	20	desloratadine TBDP	31	dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML	50
DEPAKOTE TBEC 500 MG (divalproex sodium)	20	desmopressin acetate spray	64	dexamethasone sodium phosphate SOSY IJ 4 MG/ML	50
DEPLIN MA CAPS	82	desmopressin acetate spray refrigerated 0.01 %	64	dexamethasone SOLN	50
DEPLINPRO MOOD HEALTH CAPS 82		desmopressin acetate TABS	64	dexamethasone TABS	50
DEPO-SUBQ PROVERA 104 SUSY SC	49	desogestrel & ethinyl estradiol	49	dexamethasone TBPk	50
DERMACINRX DAVIMET CHEW .	88	desogestrel-ethinyl estradiol (biphasic)	49	DEXATLAN CAPS	82
DERMACINRX MULTITAM TABS .	82			dexchlorpheniramine maleate SOLN .	31
DERMACINRX MULTIVITAMIN CHEW	88				

DEXCOM G6 RECEIVER71	dextromethorphan-guaifenesin SYRP 100 MG/5ML-10 MG/5ML, 200 MG/10ML-20 MG/10ML51	diclofenac w/ misoprostol TBEC6
DEXCOM G6 SENSOR71	dextromethorphan-guaifenesin TB12 600 MG-30 MG51	dicloxacillin sodium96
DEXCOM G6 TRANSMITTER71	dextromethorphan-phenylephrine- acetaminophen CAPS51	dicyclomine hcl CAPS100
DEXCOM G7 15 DAY SENSOR ..71	DHIVY TABS38	dicyclomine hcl SOLN PO100
DEXCOM G7 RECEIVER71	DIABETIDERM LOTN59	dicyclomine hcl TABS100
DEXCOM G7 SENSOR71	DIACOMIT CAPS 250 MG18	DIFFERIN CREA (adapalene)52
DEXEDRINE CP24 10 MG, 15 MG (dextroamphetamine sulfate)1	DIACOMIT CAPS 500 MG18	DIFFERIN GEL (adapalene)52
DEXILANT (dexlansoprazole) ... 100	DIACOMIT PACK 250 MG18	DIFFERIN LOTN52
dexlansoprazole100	DIACOMIT PACK 500 MG18	DIFICID SUSR71
dexmethylphenidate hcl CP242	DIALYVITE SUPREME D TABS ..82	DIFICID TABS 200 MG (fidaxomicin) 71
dexmethylphenidate hcl TABS2	DIATROL TABS82	diflorasone diacetate CREA57
dextroamphetamine sulfate CP24 10 MG, 15 MG1	diazepam (anticonvulsant) GEL 10 MG, 20 MG18	diflorasone diacetate OINT57
dextroamphetamine sulfate CP24 5 MG1	diazepam SOLN PO 5 MG/5ML ...13	DIFLUCAN SUSR 40 MG/ML (fluconazole)31
dextroamphetamine sulfate SOLN ..1	diazepam TABS13	diflunisal TABS8
dextroamphetamine sulfate TABS 15 MG, 20 MG, 30 MG1	diazoxide25	difluprednate93
dextroamphetamine sulfate TABS 2.5 MG, 7.5 MG, 15 MG, 20 MG, 30 MG . 1	dibucaine61	digoxin SOLN PO 0.05 MG/ML47
dextroamphetamine sulfate TABS 5 MG, 10 MG1	DICLEGIS TBEC (doxylamine- pyridoxine)30	digoxin TABS 125 MCG, 250 MCG 47
dextromethorphan polistirex SUER 50	diclofenac epolamine PTCH EX ...54	DILANTIN (phenytoin sodium extended)20
dextromethorphan-guaifenesin LIQD 100 MG/5ML-10 MG/5ML, 150 MG/7.5ML-15 MG/7.5ML, 200 MG/10ML-20 MG/10ML, 200 MG/5ML-10 MG/5ML51	diclofenac potassium CAPS6	DILANTIN20
dextromethorphan-guaifenesin LIQD 100 MG/5ML-5 MG/5ML, 200 MG/5ML-30 MG/5ML, 400 MG/20ML- 20 MG/20ML51	diclofenac potassium TABS6	DILANTIN INFATABS CHEW (phenytoin)20
	diclofenac sodium (ophth)94	DILANTIN-125 SUSP (phenytoin) .20
	diclofenac sodium (topical) GEL EX 54	DILAUDID LIQD (hydromorphone hcl)8
	diclofenac sodium (topical) SOLN EX54	DILAUDID TABS 2 MG (hydromorphone hcl)8
	diclofenac sodium TB246	DILAUDID TABS 4 MG (hydromorphone hcl)8
	diclofenac sodium TBEC6	DILAUDID TABS 8 MG

(hydromorphone hcl)	8		31	dorzolamide hcl-timolol maleate ..	91
diltiazem hcl coated beads CP24 120 MG, 180 MG, 300 MG	46	diphenhydramine hcl TABS 25 MG 31		DOVATO	42
diltiazem hcl coated beads CP24 240 MG	46	diphenoxylate w/ atropine LIQD ...	29	doxazosin mesylate	34
diltiazem hcl coated beads CP24 360 MG	46	diphenoxylate w/ atropine TABS ...	29	doxepin hcl (sleep)	69
diltiazem hcl CP12	46	DIPROLENE OINT (betamethasone dipropionate augmented)	57	doxepin hcl CAPS	24
diltiazem hcl CP24 120 MG, 180 MG 46		dipyridamole	67	doxepin hcl CONC	24
diltiazem hcl CP24 240 MG	46	disopyramide phosphate CAPS ...	13	doxycycline (monohydrate) CAPS .	99
diltiazem hcl extended release beads 120 MG, 180 MG, 300 MG, 360 MG, 420 MG	46	disulfiram 250 MG	96	doxycycline (monohydrate) SUSR .	99
diltiazem hcl extended release beads 240 MG	46	divalproex sodium CSDR	21	doxycycline (monohydrate) TABS .	99
diltiazem hcl TABS	46	divalproex sodium TB24 250 MG ..	21	doxycycline (rosacea)	61
diltiazem hcl TB24 180 MG, 240 MG, 300 MG, 360 MG, 420 MG	46	divalproex sodium TB24 500 MG ..	21	doxycycline hyclate CAPS	99
diltiazem hcl TB24	46	divalproex sodium TB24 500 MG ..	21	doxycycline hyclate TABS	99
dimenhydrinate TABS	30	divalproex sodium TBEC 125 MG .	21	doxycycline hyclate TBEC	99
dimethyl fumarate CDPK	97	divalproex sodium TBEC 250 MG .	21	doxylamine succinate (sleep)	68
dimethyl fumarate CPDR	97	divalproex sodium TBEC 500 MG .	21	doxylamine-pyridoxine TBEC	30
DIOVAN HCT (valsartan-hydrochlorothiazide)	34	docusate sodium CAPS 100 MG, 250 MG	70	DRIZALMA SPRINKLE CSDR	23
DIOVAN TABS (valsartan)	33	docusate sodium CAPS 50 MG ...	70	dronabinol CAPS	30
DIPENTUM	65	docusate sodium LIQD 50 MG/5ML, 100 MG/10ML	70	DROPLET INSULIN SYRINGE ...	72
diphenhydramine hcl (sleep) TABS 25 MG	68	DOCUSATE SODIUM SYRP	70	drospirenone-ethinyl estradiol 0.02 MG-3 MG	49
diphenhydramine hcl CAPS	31	docusate sodium TABS	70	drospirenone-ethinyl estradiol 0.03 MG-3 MG	49
diphenhydramine hcl ELIX 12.5 MG/5ML	31	dofetilide	13	DROXIA CAPS	68
diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML		donepezil hydrochloride TABS 23 MG	96	DUAKLIR PRESSAIR	15
		donepezil hydrochloride TABS 5 MG, 10 MG	96	DUETACT (pioglitazone hcl-glimepiride)	24
		donepezil hydrochloride TBDP	96	DULERA	15
		DORAL (quazepam)	69	DULERA 100 MCG/ACT-5 MCG/ACT, 200 MCG/ACT-5 MCG/ACT	15
		DORYX MPC TBEC 60 MG	99	duloxetine hcl CPEP 20 MG, 30 MG, 60 MG	23
		dorzolamide hcl	94		

duloxetine hcl CPEP 40 MG23	EDARBI33	ELON MATRIX 5000 TABS89
DUPIXENT SOAJ58	EDARBYCLOR34	ELON MATRIX COMPLETE TABS 89
DUPIXENT SOSY 200 MG/1.14ML, 300 MG/2ML58	EDLUAR SUBL69	ELON MATRIX PLUS TABS89
DUREZOL (difluprednate)93	EDURANT42	ELON R3 TABS89
dutasteride67	EDURANT PED PO 2.5 MG42	EMBECTA INSULIN SYR ULTRAFINE73
dutasteride-tamsulosin hcl67	efavirenz CAPS 200 MG42	EMBECTA INSULIN SYRINGE ...73
DYANAVEL XR SUER1	efavirenz CAPS 50 MG42	EMBECTA INSULIN SYRINGE U- 10073
DYANAVEL XR TBCR1	efavirenz TABS42	EMBECTA PEN NEEDLE ULTRAFINE73
DYMISTA SUSP (azelastine hcl- fluticasone propionate)90	efavirenz-emtricitabine-tenofovir disoproxil fumarate42	EMEND BIPACK CAPS 80 MG (aprepitant)30
E.E.S. GRANULES SUSR (erythromycin ethylsuccinate)70	efavirenz-lamivudine-tenofovir disoproxil fumarate42	EMEND SUSR31
EASIVENT MASK LARGE MISC ..75	EFFEXOR XR CP24 150 MG (venlafaxine hcl)23	EMEND TRIPACK CAPS (aprepitant)31
EASIVENT MASK MEDIUM MISC 75	EFFEXOR XR CP24 37.5 MG (venlafaxine hcl)23	EMFLAZA SUSP (deflazacort)50
EASIVENT MASK SMALL MISC ..75	EFFEXOR XR CP24 75 MG (venlafaxine hcl)23	EMFLAZA TABS (deflazacort)50
EASIVENT MISC75	EFFIENT (prasugrel hcl)67	EMGALITY (300 MG DOSE) SOSY 76
EASY TOUCH FLIPLOCK INSULIN SY72	ELEPSIA XR TB2418	EMGALITY SOAJ76
EASY TOUCH INSULIN BARRELS . 72	eletriptan hydrobromide76	EMGALITY SOSY76
EASY TOUCH INSULIN SAFETY SYR73	ELIMITE CREA (permethrin)62	EMOLLIA-LOTION LOTN59
EASY TOUCH INSULIN SYRINGE 73	ELIQUIS (1.5 MG PACK) TBSO PO . 16	emollient LOTN59
EASY TOUCH SHEATHLOCK SYRINGE73	ELIQUIS (2 MG PACK) TBSO PO .16	EMSAM21
EBGLYSS SOAJ58	ELIQUIS CPSP PO 0.15 MG16	emtricitabine CAPS42
EBGLYSS SOSY58	ELIQUIS DVT/PE STARTER PACK TBPk16	emtricitabine-rilpivirine-tenofovir disoproxil fumarate42
econazole nitrate CREA53	ELIQUIS TABS16	emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG- 200 MG, 167 MG-250 MG42
ECONAZOLE NITRATE FOAM 1 % . 53	ELIQUIS TBSO PO 0.5 MG16	emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG42
ED BRON GP LIQD51	ELLA49	
	ELON MATRIX 5000 COMPLETE TABs89	

EMTRIVA CAPS (emtricitabine) ...42	entecavir TABS 44	EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML68
EMTRIVA SOLN42	ENTRESTO CPSP47	EPRONTIA SOLN 25 MG/ML (topiramate) 18
EMVERM CHEW12	ENTRESTO TABS 103 MG-97 MG, 26 MG-24 MG, 51 MG-49 MG (sacubitril-valsartan) 47	EPSOLAY CREA 52
enalapril maleate & hydrochlorothiazide34	ENTYVIO PEN SOAJ65	EQ COMPLETE MULTIVITAMIN- ADULT TABS 82
enalapril maleate SOLN 33	ENVARUSUS XR TB24 79	EQ ONE DAILY MENS 50+ TABS .82
enalapril maleate TABS33	EOHILIA SUSP 50	EQ ONE DAILY MENS HEALTH TABs82
ENBREL MINI SOCT7	EPANED SOLN (enalapril maleate) 33	EQ ONE DAILY WOMENS 50+ TABs82
ENBREL SOLN7	EPCLUSA PACK44	EQ ONE DAILY WOMENS HEALTH TABs82
ENBREL SOSY 25 MG/0.5ML7	EPCLUSA TABS 100 MG-400 MG 44	EQ SPACE CHAMBER ANTI- STATIC DEVI 75
ENBREL SOSY 50 MG/ML 7	EPCLUSA TABS 50 MG-200 MG . 44	EQ SPACE CHAMBER ANTI- STATIC L DEVI 75
ENBREL SURECLICK SOAJ7	EPIDIOLEX18	EQ SPACE CHAMBER ANTI- STATIC M DEVI75
ENDARI (glutamine (sickle cell)) .68	EPIDUO FORTE GEL (adapalene- benzoyl peroxide)52	EQ SPACE CHAMBER ANTI- STATIC S DEVI75
ENFAMIL ENFALYTE SOLN78	EPIFOAM FOAM57	EQL ADVANCED RECOVERY LOTN59
ENFAMIL POLY-VI-SOL-IRON SOLN 11 MG/ML88	EPILYT LOTN59	EQL CENTURY MATURE ADULTS 50+ TABS82
ENERGIX-B SUSP 20 MCG/ML . 103	epinastine hcl (ophth) 94	EQL CENTURY MENS TABS 82
ENERGIX-B SUSY 103	epinephrine (anaphylaxis) SOAJ 0.15 MG/0.15ML 105	EQL CENTURY WOMENS TABS .82
ENHERTU37	epinephrine (anaphylaxis) SOAJ 0.3 MG/0.3ML105	EQL ONE DAILY MENS TABS82
enoxaparin sodium SOLN IJ 300 MG/3ML16	epinephrine (anaphylaxis) SOAJ .105	EQL ULTRA MOISTURIZING DAILY LOTN59
enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML 16	EPIPEN 2-PAK SOAJ (epinephrine (anaphylaxis))105	EQUETRO38
enoxaparin sodium SOSY 30 MG/0.3ML16	EPIPEN JR 2-PAK SOAJ (epinephrine (anaphylaxis)) 105	ergocalciferol CAPS 105
enoxaparin sodium SOSY 40 MG/0.4ML16	EPIVIR SOLN (lamivudine)42	ergocalciferol SOLN PO 200
enoxaparin sodium SOSY 60 MG/0.6ML17	EPIVIR TABS 150 MG (lamivudine) 42	
enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML 16	EPIVIR TABS 300 MG (lamivudine) 42	
ENSPRYNG79		
ENSTILAR FOAM57		

MCG/ML	105	escitalopram oxalate TABS 5 MG ..	22	etodolac TABS	6
ERTACZO	53	eslicarbazepine acetate 200 MG, 400		etodolac TB24	6
ERVEBO	103	MG, 600 MG, 800 MG	18	etonogestrel-ethinyl estradiol	49
ERYPED 200 SUSR (erythromycin		esomeprazole magnesium CPDR 20		etravirine 100 MG	43
ethylsuccinate)	71	MG	100	etravirine 200 MG	42
ERYPED 400 SUSR (erythromycin		esomeprazole magnesium CPDR 40		EUCERIN BABY LOTN	59
ethylsuccinate)	71	MG	100	EUCERIN DAILY HYDRATION	
erythromycin (acne aid) GEL	52	esomeprazole magnesium PACK 100		LOTN	59
erythromycin (acne aid) PADS	52	estazolam	69	EUCERIN DAILY HYDRATION	
erythromycin (acne aid) SOLN	52	estradiol & norethindrone acetate		SPF15 LOTN	59
erythromycin (ophth)	92	TABS	64	EUCERIN DAILY	
erythromycin base CPEP	71	estradiol PTTW 0.025 MG/24HR,		PROTECTION/SPF30 LOTN	59
erythromycin base TABS	71	0.05 MG/24HR, 0.075 MG/24HR, 0.1		EUCERIN INTENSIVE REPAIR	
erythromycin base TBEC	71	MG/24HR	65	LOTN	59
erythromycin ethylsuccinate SUSR		estradiol PTTW 0.0375 MG/24HR ..	64	EUCERIN LOTN	59
71		estradiol PTWK	65	EUCERIN ORIGINAL HEALING	
erythromycin ethylsuccinate TABS 71		estradiol TABS	65	LOTN	59
erythromycin stearate TABS 250 MG		estradiol vaginal CREA	104	EUCERIN PLUS LOTN	59
71		estradiol vaginal TABS	104	EUCERIN PROFESSIONAL REPAIR	
ERZOFRI 117 MG/0.75ML	38	ESTROFACTORS TABS	88	LOTN	59
ERZOFRI 156 MG/ML	39	estrogens, conjugated TABS 0.3 MG,		EUCERIN ROUGHNESS RELIEF	
ERZOFRI 234 MG/1.5ML	39	0.45 MG, 0.625 MG, 0.9 MG, 1.25		LOTN	59
ERZOFRI 351 MG/2.25ML	38	MG	65	EUCERIN SMOOTHING REPAIR	
ERZOFRI 39 MG/0.25ML	38	ESTROVEN MENOPAUSE		LOTN	59
ERZOFRI 78 MG/0.5ML	38	SUPPLEMENT TABS	82	EUCRISA	61
ESCITALOPRAM OXALATE CAPS		eszopiclone	69	EVEKEO TABS (amphetamine	
PO 15 MG	22	ethambutol hcl TABS	37	sulfate)	1
escitalopram oxalate SOLN	22	ethosuximide CAPS	20	everolimus (immunosuppressant) ..	79
escitalopram oxalate TABS 10 MG		ethosuximide SOLN	20	EVEXITHROID TABS 15 MG, 30	
22		ethynodiol diacet & eth estrad 35		MG, 60 MG, 90 MG, 120 MG, 180	
escitalopram oxalate TABS 20 MG		MCG-1 MG	49	MG	99
22		ethynodiol diacet & eth estrad 50		EVISTA (raloxifene hcl)	64
		MCG-1 MG	49	EVOTAZ	43
		etodolac CAPS	6	EXELON 13.3 MG/24HR	

(rivastigmine)	96	FANAPT TITRATION PACK C	39	ferrous fumarate TABS	68
EXELON 4.6 MG/24HR, 9.5 MG/24HR (rivastigmine)	96	FARXIGA (dapagliflozin propanediol)	29	FERROUS GLUCONATE TABS 324 MG	68
exemestane	37	FASENRA PEN SOAJ	13	ferrous sulfate SOLN 15 MG/ML, 15 MG/ML	68
exenatide SOPN 10 MCG/0.04ML	26	FASENRA SOSY	13	ferrous sulfate SOLN 220 MG/5ML, 300 MG/6.8ML	68
exenatide SOPN 5 MCG/0.02ML	26	febuxostat	67	ferrous sulfate TABS 325 MG, 65 MG, 325 MG	68
EXFORGE (amlodipine besylate- valsartan)	34	felbamate SUSP	20	ferrous sulfate TBEC	68
EXFORGE HCT (amlodipine- valsartan-hydrochlorothiazide)	34	felbamate TABS	20	fesoterodine fumarate	101
EXTENCILLINE SUSR	95	FELBATOL TABS (felbamate)	20	FETZIMA CP24	23
EXXUA TB24 PO 18.2 MG, 36.3 MG, 54.5 MG, 72.6 MG	23	felodipine	46	FETZIMA TITRATION C4PK	23
EXXUA TITRATION PACK TB24 PO 18.2 MG	23	fenofibrate CAPS	32	FEVERALL JUNIOR STRENGTH SUPP	8
EYE HEALTH + LUTEIN TABS	82	fenofibrate micronized 134 MG, 200 MG	32	fexofenadine hcl TABS 180 MG ...	31
EYE HEALTH AREDS 2 CAPS	82	fenofibrate micronized 43 MG, 130 MG	32	fexofenadine hcl TABS 60 MG	31
EYE HEALTH CAPS	82	fenofibrate micronized 67 MG	32	FIASP FLEXTOUCH SOPN	26
EYE MULTIVITAMIN/SODIUM TABS	82	fenofibrate TABS 160 MG	32	FIASP PENFILL SOCT	26
EYLEA SOSY	91	fenofibrate TABS 40 MG, 120 MG .	32	FIASP SOLN	26
EYSUVIS SUSP	93	fenofibrate TABS 48 MG, 145 MG .	32	FIBRICOR (fenofibric acid)	32
ezetimibe	33	fenofibrate TABS 54 MG	32	fidaxomicin TABS 200 MG	71
ezetimibe-simvastatin	32	fenofibric acid	32	FIFTY50 SUPERIOR COMFORT SYR	73
FABIOR FOAM	52	fenopropfen calcium CAPS 400 MG .	6	FINACEA FOAM	61
famciclovir	45	fenopropfen calcium TABS	6	finasteride	67
famotidine SUSR	100	FENOPRON CAPS	6	FINAZOL TABS	82
famotidine TABS 10 MG	100	FENSOLVI (6 MONTH) SC	64	fingolimod hcl	97
famotidine TABS 20 MG, 40 MG .	100	fentanyl citrate TABS 400 MCG, 600 MCG, 800 MCG	8	FINTEPLA	18
FANAPT	39	fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR	8	FIORICET/CODEINE 30 MG-40 MG- 50 MG-300 MG (butalbital- acetaminophen-caffeine w/ codeine) . 10	
FANAPT TITRATION PACK A	39	fentanyl PT72 37.5 MCG/HR, 62.5 MCG/HR, 87.5 MCG/HR	8		
FANAPT TITRATION PACK B	39				

FIRVANQ SOLR PO (vancomycin hcl)	36	fluconazole SUSR	31	hcl)	22
FITNESS TABS FOR MEN AM/PM TABS	82	fluconazole TABS 100 MG, 200 MG .	31	fluoxetine hcl TABS 10 MG	22
FITNESS TABS FOR WOMEN AM/PM TABS	83	fluconazole TABS 150 MG	31	fluoxetine hcl TABS 20 MG	22
FLAGYL CAPS (metronidazole) ...	35	fluconazole TABS 50 MG	31	fluoxetine hcl TABS 60 MG	22
FLAREX	93	fludrocortisone acetate TABS	50	fluphenazine decanoate	41
flavoxate hcl	101	FLULAVAL SUSY	103	fluphenazine hcl TABS	41
flecainide acetate	13	FLUMIST	103	flurandrenolide LOTN	57
FLEQSUVY SUSP (baclofen)	90	flunisolide (nasal)	90	flurazepam hcl	69
FLEXICHAMBER ADULT MASK/SMALL	75	fluocinolone acetonide (otic)	94	flurbiprofen sodium	94
FLEXICHAMBER CHILD MASK/LARGE	75	fluocinolone acetonide CREA	57	flurbiprofen TABS 100 MG	6
FLEXICHAMBER CHILD MASK/SMALL	75	fluocinolone acetonide OIL	57	fluticasone furoate (inhalation) 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT	14
FLEXICHAMBER DEVI	75	fluocinolone acetonide OINT	57	fluticasone furoate-vilanterol	15
FLEXITOL SENSITIVE SKIN LOTN 59		fluocinolone acetonide SOLN	57	fluticasone propionate (inhalation) AEPB	14
FLORRAVITE TABS	83	fluocinonide CREA 0.05 %	57	fluticasone propionate (nasal) SUSP .	90
FLORRAXYL TABS	83	fluocinonide CREA 0.1 %	57	fluticasone propionate CREA 0.05 %	57
FLUAD	103	fluocinonide emulsified base	57	fluticasone propionate hfa 110 MCG/ACT, 220 MCG/ACT	14
FLUAD QUADRIVALENT	103	fluocinonide GEL	57	fluticasone propionate hfa 44 MCG/ACT	14
FLUARIX QUADRIVALENT SUSY 103		fluocinonide OINT	57	fluticasone propionate LOTN	57
FLUARIX SUSY	103	fluocinonide SOLN	57	fluticasone propionate OINT	57
FLUBLOK QUADRIVALENT	103	fluorometholone (ophth) SUSP	93	fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT	15
FLUBLOK SOSY	103	fluorouracil (topical) CREA 0.5 % .	54	fluticasone-salmeterol AEPB 113 MCG/ACT-14 MCG/ACT, 232 MCG/ACT-14 MCG/ACT, 55 MCG/ACT-14 MCG/ACT	15
FLUCELVAX QUADRIVALENT SUSY	103	fluorouracil (topical) CREA 5 %	54		
FLUCELVAX SUSP	103	fluorouracil (topical) SOLN	54		
FLUCELVAX SUSY	103	fluoxetine hcl (pmdd) TABS	98		
		fluoxetine hcl CAPS 10 MG, 20 MG	22		
		fluoxetine hcl CAPS 40 MG	22		
		fluoxetine hcl CPDR	22		
		fluoxetine hcl SOLN	22		
		FLUOXETINE HCL TABS (fluoxetine			

fluticasone-salmeterol AERO 15	FOLIFLEX TABS 83	FT CENTURY 50+ TABS 83
fluvastatin sodium CAPS 33	FOLITIN-Z TABS 83	FT CENTURY ADULTS TABS 83
fluvastatin sodium TB24 33	fondaparinux sodium 17	FT CENTURY MEN 50+ TABS 83
fluvoxamine maleate CP24 22	FORFIVO XL TB24 (bupropion hcl) 21	FT CENTURY MEN TABS 83
fluvoxamine maleate TABS 100 MG . 22	formoterol fumarate NEBU 15	FT CENTURY WOMEN 50+ TABS 83
fluvoxamine maleate TABS 25 MG, 50 MG 22	FORTEO SOPN (teriparatide) 63	FT CENTURY WOMEN TABS 83
FLUZONE HIGH-DOSE QUADRIVALENT 103	FOSAMAX PLUS D 63	FT ELECTROLYTE SOLN 78
FLUZONE HIGH-DOSE SUSY ... 103	FOSAMAX TABS 70 MG (alendronate sodium) 63	FT EYE HEALTH CAPS 83
FLUZONE QUADRIVALENT SUSY 103	fosamprenavir calcium TABS 43	FT EYE HEALTH TABS 83
FLUZONE SUSP 103	fosinopril sodium & hydrochlorothiazide 35	FT GLUCOSE CHEW 4 GM 25
FLUZONE SUSY 103	fosinopril sodium 33	FT HAIR SKIN & NAILS EXTRA STR TABS 83
FML FORTE SUSP 93	FOSRENOL CHEW (lanthanum carbonate) 66	FT ONE DAILY MENS 50+ TABS . 83
FML LIQUIFILM SUSP (fluorometholone (ophth)) 93	FOSRENOL PACK 66	FT ONE DAILY MENS TABS 83
FOCALIN TABS (dexmethylphenidate hcl) 2	FRAGMIN SOLN 10000 UNIT/4ML, 95000 UNIT/3.8ML 17	FT ONE DAILY WOMENS 50+ TABS 83
FOCALIN XR CP24 (dexmethylphenidate hcl) 2	FRAGMIN SOSY 17	FT ONE DAILY WOMENS TABS . 83
FOLACHEW CHEW 88	FREEDAVITE TABS 83	furosemide SOLN PO 8 MG/ML, 10 MG/ML 63
FOLAGENT DHA CAPS 83	FREESTYLE LIBRE 14 DAY SENSOR 71	furosemide TABS 63
FOLAMAX TABS 83	FREESTYLE LIBRE 2 PLUS SENSOR 71	FUZEON SOLR 43
FOLAMED DHA CAPS 83	FREESTYLE LIBRE 2 READER .. 71	FYCOMPA SUSP 0.5 MG/ML (perampanel) 17
FOLAPRIME TABS 83	FREESTYLE LIBRE 2 SENSOR .. 71	FYCOMPA TABS 2 MG, 4 MG, 6 MG, 8 MG, 10 MG, 12 MG (perampanel) 17
FOLASYNC DHA CAPS 83	FREESTYLE LIBRE 3 PLUS SENSOR 71	gabapentin (once-daily) TABS 98
FOLAWISE TABS 88	FREESTYLE LIBRE 3 READER .. 71	gabapentin CAPS 18
FOLCYTEINE TABS 88	FREESTYLE LIBRE 3 SENSOR .. 71	gabapentin SOLN 18
folic acid TABS 1 MG 68	FROVA (frovatriptan succinate) ... 76	gabapentin TABS 600 MG 18
folic acid TABS 400 MCG 68	frovatriptan succinate 76	gabapentin TABS 800 MG 18

GABARONE TABS 100 MG, 400 MG	18	GILENYA (fingolimod hcl)	97	GNP CENTURY ADULT TABS	83
GALAFOLD	64	GILENYA 0.25 MG	97	GNP CENTURY ADULTS MEN TABS	83
galantamine hydrobromide CP24 ..	96	GIMOTI SOLN NA	65	GNP CENTURY ADULTS WOMEN TABS	83
galantamine hydrobromide SOLN ..	96	GIVLAARI	67	GNP CENTURY MATURE ADULTS 50+ TABS	83
galantamine hydrobromide TABS ..	96	glatiramer acetate SOSY 20 MG/ML . 97		GNP ELECTROLYTE SOLUTION SOLN 280 MG/360ML-370 MG/360ML-2.8 MG/360ML-440 MG/360ML, 9 GM/360ML-280 MG/360ML-370 MG/360ML-2.8 MG/360ML-440 MG/360ML	78
GAMMAGARD	95	glatiramer acetate SOSY 40 MG/ML . 97		GNP GLUCOSE CHEW	25
GAMMAGARD S/D LESS IGA SOLR	95	glimepiride 1 MG, 2 MG	29	GNP INSULIN SYRINGE	73
GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	95	glimepiride 3 MG	29	GNP INSULIN SYRINGES	73
GAMUNEX-C 1 GM/10ML, 2.5 GM/25ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	95	glimepiride 4 MG	29	GNP INSULIN SYRINGES 28GX1/2"	73
GARDASIL 9 SUSP 0.5 ML	103	glipizide TABS	29	GNP INSULIN SYRINGES 29GX1/2"	73
GARDASIL 9 SUSY 0.5 ML	103	glipizide TB24	29	GNP INSULIN SYRINGES 30GX5/16"	73
gatifloxacin (ophth)	92	glipizide-metformin hcl	24	GNP INSULIN SYRINGES 31GX5/16"	73
gemfibrozil TABS	32	GLOPERBA SOLN PO	67	GNP THERAPEUTIC-M TABS	83
GEMTESA	101	GLP-DLAX TABS	89	GNP ULTRA COM INSULIN SYRINGE	73
GENADEK STEP 1 CAPS	83	GLUCAGON EMERGENCY	25	GOLD BOND EVERYDAY MOISTURE LOTN	59
GENADEK STEP 2 CAPS	83	glucagon SOLR IJ 1 MG	25	GOLD BOND HEALING LOTN	59
GENICIN VITA-Q TABS	88	GLUCO TO GO CHEW	25	GOLD BOND MEDICATED BODY EX ST LOTN	59
GENOTROPIN CART SC	64	GLUCOPRO INSULIN SYRINGE .73		GOLD BOND MEDICATED BODY LOTN	59
GENOTROPIN MINIQUEL PRSY 64		GLUCOSE CHEW	25	GOLD BOND PURE MOISTURE LOTN	60
gentamicin sulfate (ophth) SOLN ..	92	GLUCOTROL XL TB24 5 MG, 10 MG (glipizide)	29		
gentamicin sulfate (topical) CREA .53		glutamine (sickle cell)	68		
gentamicin sulfate (topical) OINT ..53		glyburide micronized 1.5 MG, 3 MG, 6 MG	29		
GENVOYA	43	glyburide TABS	29		
GEODON (ziprasidone hcl)	38	glyburide-metformin	24		
GERI-FREEDA SENIOR FORMULA TABS	83	glycerin (laxative) SUPP 2 GM	70		
		glycopyrrolate TABS 1 MG, 2 MG 100			
		GLYXAMBI	24		

GOLD BOND ULT SHEER RIBBONS LOTN60	GVOKE HYPOPEN 2-PACK SOAJ 25	EL U/ML 103
GOLD BOND ULTIMATE HEALING LOTN60	GVOKE KIT SOLN25	HEAD CARE PROACTIVE HEALTH TABS83
GOLD BOND ULTIMATE LOTN ...60	GVOKE PFS SOSY 1 MG/0.2ML ..25	HEALTHWISE INSULIN SYR/NEEDLE73
GOLD BOND ULTIMATE OVERNIGHT LOTN60	GYNAZOLE-1104	HEALTHY EYES SUPERVISION 2 CAPS83
GOLD BOND ULTIMATE PROTECTION LOTN60	HADLIMA PUSHTOUCH SOAJ4	HEALTHY HEART COMPLEX TABS 89
GOLD BOND ULTIMATE RESTORING LOTN60	HADLIMA SOSY4	HEART TABS TABS89
GOLD BOND ULTIMATE SOFTENING LOTN60	HAEGARDA SOLR SC67	HEMADY TABS50
GOLD BOND ULTIMATE SOOTHING LOTN60	HAIR NOURISHING SUPPLEMENT TABS89	HEMANGEOL SOLN PO46
GOLD BOND ULTIMATE SOOTHING LOTN60	HAIR SKIN & NAILS ADVANCED TABS83	heparin sodium (porcine) SOLN IJ 1000 UNIT/ML, 5000 UNIT/0.5ML, 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML17
GOLYTELY SOLR (peg 3350-kcl-sod bicarb-sod chloride-sod sulfate) ...69	HAIR SKIN & NAILS TABS83	HEPARIN SODIUM (PORCINE) SOSY IJ17
GOODSENSE ELECTROLYTE ADV CARE SOLN78	HAIR/SKIN/NAILS CAPS83	HEPLISAV-B SOSY103
GRALISE TABS (gabapentin (once- daily))98	halcinonide CREA57	HETLIOZ CAPS (tasimelteon)69
granisetron hcl TABS30	halcinonide SOLN 0.1 %57	HETLIOZ LQ SUSP69
GRASTEK SUBL3	HALCION 0.25 MG (triazolam)69	HIBERIX SOLR IJ101
griseofulvin microsize SUSP31	halobetasol propionate CREA57	HIGH POT MULTIVITAMIN/BETA- CAR TABS83
griseofulvin microsize TABS31	halobetasol propionate FOAM57	HIGH POTENCY MULTIVIT/FA TABS83
griseofulvin ultramicrosize31	halobetasol propionate OINT57	HIGH POTENCY MULTIVITAMIN TABS88
guaifenesin TB12 1200 MG51	HALOG CREA (halcinonide)57	HM COMPLETE MEN TABS83
guaifenesin TB12 600 MG51	HALOG SOLN 0.1 % (halcinonide) 57	HM HAIR/SKIN/NAILS TABS83
guaifenesin-codeine SOLN51	haloperidol decanoate40	HM ULTICARE INSULIN SYRINGE . 73
guaifenesin-codeine SYRP51	haloperidol lactate CONC40	HORIZANT98
guanfacine hcl (adhd)2	haloperidol TABS 0.5 MG, 1 MG, 2 MG, 5 MG, 10 MG40	HULIO (2 PEN) AJKT4
guanfacine hcl34	haloperidol TABS 20 MG40	
GVOKE HYPOPEN 1-PACK SOAJ 25	HARVONI PACK44	
	HARVONI TABS44	
	HARVONI TABS45	
	HAVRIX IM 720 EL U/0.5ML, 1440	

HULIO (2 SYRINGE) PSKT4	HUMULIN N KWIKPEN SUPN 27	hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG, 7.5 MG-200 MG 10
HUMALOG JUNIOR KWIKPEN SOPN26	HUMULIN N SUSP 27	hydrocortisone (intrarectal)12
HUMALOG KWIKPEN SOPN 100 UNIT/ML26	HUMULIN R SOLN IJ27	hydrocortisone (rectal) EX 1 % 12
HUMALOG KWIKPEN SOPN 200 UNIT/ML26	HUMULIN R U-500 (CONCENTRATED) SOLN SC27	hydrocortisone (rectal) EX 2.5 % .. 12
HUMALOG MIX 50/50 KWIKPEN SUPN26	HUMULIN R U-500 KWIKPEN SOPN SC27	hydrocortisone (topical) CREA 0.5 % 57
HUMALOG MIX 75/25 KWIKPEN SUPN26	hydralazine hcl TABS35	hydrocortisone (topical) CREA 1 % 57
HUMALOG MIX 75/25 SUSP27	HYDRALYTE FREEZER POPS SOLN78	hydrocortisone (topical) CREA 2.5 % 57
HUMALOG SOCT27	HYDRALYTE SOLN 78	hydrocortisone (topical) LOTN 2.5 % . 57
HUMALOG SOLN IJ27	HYDRAZONE LOTION LOTN60	hydrocortisone (topical) OINT 1 % .57
HUMALOG TEMPO PEN SOPN .. 27	hydrochlorothiazide CAPS63	hydrocortisone (topical) OINT 2.5 % . 57
HUMATROPE CART IJ64	hydrochlorothiazide TABS 25 MG, 50 MG 63	hydrocortisone (topical) SOLN 2.5 % 57
HUMIRA (2 PEN) AJKT 40 MG/0.4ML4	hydrocodone bitartrate CP128	hydrocortisone butyrate CREA 57
HUMIRA (2 PEN) AJKT 40 MG/0.8ML4	hydrocodone bitartrate T24A8	hydrocortisone butyrate LOTN57
HUMIRA (2 PEN) AJKT 80 MG/0.8ML5	hydrocodone bitartrate-homatropine methylbromide SOLN50	hydrocortisone butyrate OINT 57
HUMIRA (2 SYRINGE) PSKT 10 MG/0.1ML, 20 MG/0.2ML5	hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML10	hydrocortisone butyrate SOLN 57
HUMIRA (2 SYRINGE) PSKT 40 MG/0.4ML5	hydrocodone-acetaminophen SOLN 325 MG/15ML-10 MG/15ML10	hydrocortisone TABS 50
HUMIRA (2 SYRINGE) PSKT 40 MG/0.8ML5	hydrocodone-acetaminophen SOLN . 10	hydrocortisone valerate CREA 57
HUMIRA-CD/UC/HS STARTER AJKT 80 MG/0.8ML5	hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG10	hydrocortisone valerate OINT 57
HUMIRA-PSORIASIS/UVEIT STARTER AJKT5	hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG10	hydrocortisone w/acetic acid95
HUMULIN 70/30 KWIKPEN SUPN 27	hydrocodone-acetaminophen TABS 325 MG-2.5 MG10	hydromorphone hcl LIQD 8
HUMULIN 70/30 SUSP27		HYDROMORPHONE HCL SUPP ...8
		hydromorphone hcl TABS 2 MG 8
		hydromorphone hcl TABS 4 MG 8
		hydromorphone hcl TABS 8 MG 8
		hydromorphone hcl TB24 8

hydroxychloroquine sulfate 100 MG, 200 MG36	HYZAAR (losartan potassium & hydrochlorothiazide) 35	IMITREX STATDOSE SYSTEM SOAJ 4 MG/0.5ML77
HYDROXYM GEL57	ibandronate sodium TABS63	IMITREX STATDOSE SYSTEM SOAJ 6 MG/0.5ML (sumatriptan succinate) 77
hydroxyurea37	IBRANCE CAPS37	IMITREX TABS (sumatriptan succinate)77
HYDROXYUREA48	IBRANCE TABS37	
hydroxyzine hcl SYRP13	IBSRELA66	
hydroxyzine hcl TABS13	ibuprofen CHEW6	IMMUNE ESSENTIALS DAILY CAPS83
hydroxyzine pamoate CAPS13	ibuprofen SUSP 100 MG/5ML, 200 MG/10ML6	IMOVAX RABIES SUSR103
HYFTOR61	ibuprofen SUSP 40 MG/ML, 50 MG/1.25ML6	IMULDOSA SOSY SC 45 MG/0.5ML 54
HYLAZINC TABS83	ibuprofen TABS 200 MG6	IMULDOSA SOSY SC 90 MG/ML .54
hyoscyamine sulfate ELIX100	ibuprofen TABS 300 MG6	IMURAN TABS (azathioprine)79
hyoscyamine sulfate SOLN PO 0.125 MG/ML100	ibuprofen TABS 400 MG, 600 MG, 800 MG6	INCRELEX64
hyoscyamine sulfate SUBL 0.125 MG100	ibuprofen-famotidine6	INCRUSE ELLIPTA13
hyoscyamine sulfate TABS 0.125 MG100	ICAPS AREDS FORMULA TABS .83	indapamide TABS 1.25 MG, 2.5 MG . 63
hyoscyamine sulfate TB12 0.375 MG 100	icatibant acetate SOSY67	INDERAL LA CP24 (propranolol hcl) . 46
hyoscyamine sulfate TBDP 0.125 MG100	ICLUSIG37	INDERAL XL46
	icosapent ethyl32	indomethacin CAPS 25 MG, 50 MG 6
HYPERRHO SOSY IM 1500 UNIT 95	IDACIO-CROHNS/UC STARTER AJKT5	indomethacin CPR6
HYRIMOZ SOAJ5	IDACIO-PSORIASIS STARTER AJKT5	indomethacin SUPP6
HYRIMOZ SOSY5	IGALMI FILM69	indomethacin SUSP6
HYRIMOZ-CROHNS/UC STARTER SOAJ5	ILEVRO94	INFLECTRA SOLR65
HYRIMOZ-PED<40KG CROHN STARTER SOSY5	imipramine hcl TABS24	INGREZZA CAPS97
HYRIMOZ-PED>=40KG CROHN START SOSY5	imiquimod 3.75 %61	INGREZZA CPPK97
	imiquimod 5 %61	INGREZZA CPSP97
HYRIMOZ-PLAQ PSOR/UVEIT START SOAJ5	IMITREX STATDOSE REFILL SOCT 4 MG/0.5ML77	INNOPRAN XL46
HYSINGLA ER T24A8	IMITREX STATDOSE REFILL SOCT 6 MG/0.5ML77	INPEFA47
		INREBIC37
		INSPIREASE MISC75

INSPIREASE RESERVOIR BAGS 75	73	ipratropium-albuterol SOLN15
INSTALAX POWD 17 GM/SCOOP 70	INTELENCE (etravirine)43	irbesartan33
INSULIN ASP PROT & ASP FLEXPEN SUPN27	INTELENCE43	irbesartan-hydrochlorothiazide35
INSULIN ASPART FLEXPEN SOPN . 27	INTELENCE 200 MG (etravirine) ..43	IRON CHEWS PEDIATRIC CHEW 68
INSULIN ASPART PENFILL SOCT 27	INTUNIV (guanfacine hcl (adhd)) ..2	ISENTRESS CHEW 100 MG43
INSULIN ASPART PROT & ASPART SUSP27	INVEGA 3 MG, 6 MG, 9 MG (paliperidone)39	ISENTRESS CHEW 25 MG43
INSULIN ASPART SOLN IJ27	INVEGA HAFYERA39	ISENTRESS HD TABS43
INSULIN DEGLUDEC FLEXTOUCH SOPN 100 UNIT/ML27	INVEGA SUSTENNA 117 MG/0.75ML39	ISENTRESS PACK43
INSULIN DEGLUDEC FLEXTOUCH SOPN 200 UNIT/ML27	INVEGA SUSTENNA 156 MG/ML .39	ISENTRESS TABS43
INSULIN DEGLUDEC SOLN27	INVEGA SUSTENNA 234 MG/1.5ML 39	isoniazid SYRP37
INSULIN GLARGINE MAX SOLOSTAR SOPN27	INVEGA SUSTENNA 39 MG/0.25ML 39	isoniazid TABS37
INSULIN GLARGINE SOLOSTAR SOPN 300 UNIT/ML27	INVEGA SUSTENNA 78 MG/0.5ML 39	isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG12
INSULIN GLARGINE-YFGN SOLN 27	INVEGA TRINZA 273 MG/0.88ML .39	isosorbide mononitrate TABS12
INSULIN GLARGINE-YFGN SOPN 27	INVEGA TRINZA 410 MG/1.32ML .39	ISOSORBIDE MONONITRATE TABs12
INSULIN LISPRO (1 UNIT DIAL) SOPN27	INVEGA TRINZA 546 MG/1.75ML .39	isosorbide mononitrate TB2412
INSULIN LISPRO JUNIOR KWIKPEN SOPN28	INVEGA TRINZA 819 MG/2.63ML .39	isotretinoin 10 MG, 20 MG, 30 MG, 40 MG52
INSULIN LISPRO PROT & LISPRO SUPN28	INVELTYS SUSP93	isradipine CAPS46
INSULIN LISPRO SOLN IJ28	INVOKAMET TABS24	ISTALOL SOLN (timolol maleate (ophth))91
INSULIN SYRINGE73	INVOKAMET XR TB2424	itraconazole CAPS31
INSULIN SYRINGE-NEEDLE U-100	INVOKANA29	itraconazole SOLN31
	IOPIDINE92	ivermectin (rosacea)61
	IPOL IJ103	IXIARO103
	ipratropium bromide (nasal) 0.03 % 90	IYUZEH SOLN94
	ipratropium bromide (nasal) 0.06 % 90	JANUMET TABS24
	ipratropium bromide SOLN 0.02 % 13	JANUMET XR TB2424
		JANUVIA25
		JARDIANCE29

JAVADIN SOLN PO 0.02 MG/ML . 34	KERI ADVANCED MOISTURE THERAPY LOTN60	KEVZARA SOSY5
JENTADUETO TABS24	KERI BASIC ESSENTIALS LOTN .60	KEYFOLIC TABS84
JENTADUETO XR TB2424	KERI NOURISHING SHEA BUTTER LOTN60	KEYLOSA TABS84
JOHNSONS SKIN NOURISH MOIST LOTN60	KERI ORIGINAL DAILY MOISTURE LOTN60	KHINDIVI SOLN PO 1 MG/ML50
JOINT HEALTH & BONE STRENGTH TABS84	KERI ORIGINAL LOTN60	KINDERLYTE PREMAX SOLN78
JORNAY PM CP242	KERI OVERNIGHT LOTN60	KINDERLYTE SOLN78
JOURNAVX7	KERI RENEWAL MILK BODY LOTN . 60	KINERET SOSY5
JULUCA43	KERI RENEWAL SKIN FIRMING LOTN60	KINRAY INSULIN SYRINGE73
JYLAMVO SOLN PO37	KERI RENEWAL STRETCH MARK LOTN60	KIRSTY SOLN IJ 100 UNIT/ML ...28
JYNNEOS103	KERI SENSITIVE SKIN LOTN60	KIRSTY SOPN SC 100 UNIT/ML .28
KALETRA SOLN43	KESIMPTA97	KITABIS PAK (W/ NEBULIZER) NEBU 300 MG/5ML (tobramycin) ...3
KALETRA TABS 25 MG-100 MG (lopinavir-ritonavir)43	ketoconazole (topical) CREA53	KLOXXADO LIQD30
KALETRA TABS 50 MG-200 MG (lopinavir-ritonavir)43	ketoconazole (topical) FOAM53	KONVOMEK SUSR101
KANJINTI37	ketoconazole (topical) SHAM 2 % .54	K-PAX IMMUNE PROFESSIONAL ST TABS84
KAPSPARGO SPRINKLE CS24 ..46	ketoconazole31	KPN PRENATAL TABS89
KATERZIA46	KETODAN54	KRINTAFEL36
KAZANO (alogliptin-metformin hcl) 24	KETONE TEST STRP62	labetalol hcl TABS 100 MG45
KENALOG AERS (triamcinolone acetone (topical))57	ketoprofen CP246	labetalol hcl TABS 200 MG45
KEPPRA SOLN PO 100 MG/ML (levetiracetam)18	ketorolac tromethamine (ophth) 0.4 %94	labetalol hcl TABS 300 MG45
KEPPRA TABS 1000 MG (levetiracetam)18	ketorolac tromethamine (ophth) 0.5 %94	labetalol hcl TABS 400 MG45
KEPPRA TABS 250 MG, 750 MG (levetiracetam)18	KETOSTIX STRP62	lacosamide SOLN PO 10 MG/ML, 50 MG/5ML, 100 MG/10ML18
KEPPRA TABS 500 MG (levetiracetam)18	ketotifen fumarate (ophth) 0.035 % 94	lacosamide TABS18
KEPPRA XR TB24 (levetiracetam) 18	KEVZARA SOAJ5	lactic acid (ammonium lactate) CREA60
		lactic acid (ammonium lactate) LOTN 12 %60
		lactulose (encephalopathy)66
		lactulose PACK70
		lactulose SOLN70

LAMICTAL CHEW (lamotrigine) ... 19	LENTOCILIN SUSR 95	levonorgestrel (emergency oc) 1.5 MG 49
LAMICTAL ODT KIT (lamotrigine) . 18	LEQSELVI TABS PO 8 MG 61	levonorgestrel-eth estradiol (triphasic) 49
LAMICTAL ODT TBDP (lamotrigine) . 18	LESCOL XL TB24 (fluvastatin sodium) 33	levonorgestrel-ethinyl estradiol (91- day) 0.03 MG-0.15 MG 49
LAMICTAL STARTER KIT 25 MG (lamotrigine) 18	LETAIRIS (ambrisentan) 47	levorphanol tartrate TABS 2 MG 8
LAMICTAL TABS (lamotrigine) 19	letrozole 37	levorphanol tartrate TABS 8
LAMICTAL XR KIT 19	leucovorin calcium TABS 37	levothyroxine sodium TABS 99
LAMICTAL XR TB24 (lamotrigine) . 19	levalbuterol hcl 15	LEXAPRO TABS 10 MG (escitalopram oxalate) 22
lamivudine (hbv) TABS 45	levalbuterol tartrate 15	LEXAPRO TABS 20 MG (escitalopram oxalate) 22
lamivudine SOLN 43	levamlodipine maleate 46	LEXAPRO TABS 5 MG (escitalopram oxalate) 22
lamivudine TABS 150 MG 43	LEVEMIR SOLN 28	LEXIVA SUSP 43
lamivudine TABS 300 MG 43	levetiracetam SOLN PO 100 MG/ML, 500 MG/5ML 19	LIALDA TBEC (mesalamine) 65
lamivudine-zidovudine 43	levetiracetam TABS 1000 MG 19	LIBERVANT FILM 18
lamotrigine CHEW 19	levetiracetam TABS 250 MG, 750 MG 19	lidocaine CREA 4 % 61
lamotrigine KIT 25 MG 19	levetiracetam TABS 500 MG 19	lidocaine hcl (mouth-throat) 2 % ... 79
lamotrigine TABS 19	levetiracetam TB24 19	lidocaine hcl CREA 3 %, 4 % 61
lamotrigine TB24 19	LEVETIRACETAM TB3D 19	lidocaine hcl GEL 2 % 61
lamotrigine TBDP 19	levobunolol hcl 0.5 % 91	lidocaine-prilocaine CREA 61
LANOLIN XX 96	levocarnitine (metabolic modifiers) SOLN PO 1 GM/10ML 64	LIKMEZ SUSP 35
lansoprazole CPDR 15 MG 100	levocarnitine (metabolic modifiers) TABs 64	LINZESS 66
lansoprazole CPDR 30 MG 100	levocetirizine dihydrochloride SOLN 31	liothyronine sodium TABS 99
lansoprazole TBDD 100	levocetirizine dihydrochloride TABS 31	LIPIDSHIELD PLUS TABS 89
lanthanum carbonate CHEW 66	levofloxacin (ophth) 0.5 % 92	LIPITOR TABS (atorvastatin calcium) 33
LANTUS SOLN 28	levofloxacin SOLN PO 65	LIPOFEN CAPS (fenofibrate) 32
LANTUS SOLOSTAR SOPN 28	levofloxacin TABS 65	liraglutide (weight management) 18 MG/3ML 1
latanoprost SOLN 94	levonorgestrel & eth estradiol TABS 49	liraglutide 26
LATUDA (lurasidone hcl) 38		
LEDIPASVIR-SOFOSBUVIR TABS 45		
leflunomide 7		

lisdexamphetamine dimesylate CAPS 1	51	MG/ML (enoxaparin sodium)	17
lisdexamphetamine dimesylate CHEW 1	loratadine CHEW 31	LOVENOX SOSY 30 MG/0.3ML (enoxaparin sodium)	17
lisinopril & hydrochlorothiazide 35	loratadine TABS 31	LOVENOX SOSY 40 MG/0.4ML (enoxaparin sodium)	17
lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG 33	loratadine TBDP 10 MG 32	LOVENOX SOSY 60 MG/0.6ML (enoxaparin sodium)	17
LITETOUCH INSULIN SYRINGE . 73	lorazepam TABS 0.5 MG, 2 MG . . . 13	LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML (enoxaparin sodium) . . . 17	
LITFULO 61	lorazepam TABS 1 MG 13	loxapine succinate	40
lithium 38	losartan potassium & hydrochlorothiazide 35	lubiprostone	65
lithium carbonate CAPS 38	losartan potassium 33	LUBRIDERM ADVANCED THERAPY LOTN	60
lithium carbonate TABS 38	LOTEMAX GEL (loteprednol etabonate) 93	LUBRIDERM DAILY MOISTURE LOTN	60
lithium carbonate TBCR 38	LOTEMAX OINT 93	LUBRIDERM INTENSE SKIN REPAIR LOTN	60
LIVALO (pitavastatin calcium) 33	LOTEMAX SM GEL 93	LUBRIDERM LOTN	60
LIVER DETOX TABS 84	LOTEMAX SUSP (loteprednol etabonate) 93	LUBRISOFT LOTN	60
LOHIST-D LIQD 51	LOTENSIN 10 MG, 20 MG (benazepril hcl) 33	LUMAVEX CAPS	80
LOKELMA 79	LOTENSIN 40 MG (benazepril hcl) 33	LUMIGAN SOLN 0.01 %	94
loperamide hcl CAPS 29	LOTENSIN HCT 12.5 MG-10 MG, 12.5 MG-20 MG, 25 MG-20 MG (benazepril & hydrochlorothiazide) 35	LUNAVIRA CAPS	80
loperamide hcl TABS 29	loteprednol etabonate GEL 93	lurasidone hcl	38
LOPID TABS (gemfibrozil) 32	loteprednol etabonate SUSP 93	LURBIRO TABS 100 MG (flurbiprofen)	6
lopinavir-ritonavir SOLN 43	LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (amlodipine besylate-benazepril hcl) . 35	LUTEIN-ZEAXANTHIN TABS 60 MG-5 MG-1 MG-15 MG-1 MG-750 MCG-20 MG	84
lopinavir-ritonavir TABS 25 MG-100 MG 43	LOTRONEX (alosetron hcl) 66	LYBALVI	96
lopinavir-ritonavir TABS 50 MG-200 MG 43	lovastatin TABS 10 MG, 20 MG . . . 33	LYFGENIA	68
LOPRESSOR SOLN PO 10 MG/ML . 46	lovastatin TABS 40 MG 33	LYRICA CAPS (pregabalin)	19
LOPRESSOR TABS 100 MG (metoprolol tartrate) 46	LOVENOX SOLN IJ 300 MG/3ML (enoxaparin sodium) 17	LYRICA CR (pregabalin (once-daily))	98
LOPRESSOR TABS 50 MG (metoprolol tartrate) 46	LOVENOX SOSY 100 MG/ML, 150	LYRICA SOLN (pregabalin)	19
loratadine & pseudoephedrine TB12 . 51			
loratadine & pseudoephedrine TB24 .			

LYUMJEV KWIKPEN SOPN 28	(cladribine (multiple sclerosis)) 97	(contraceptive) SUSP IM 49
LYUMJEV SOLN 28	MAVENCLAD (9 TABS) 10 MG	medroxyprogesterone acetate
LYUMJEV TEMPO PEN SOPN ... 28	(cladribine (multiple sclerosis)) 97	(contraceptive) SUSY IM 49
LYVISPAH PACK 90	MAVYRET PACK 45	medroxyprogesterone acetate 2.5
MAGELLAN INSULIN SAFETY SYR	MAVYRET TABS 45	MG, 5 MG, 10 MG 96
..... 73	MAXALT TABS 10 MG (rizatriptan	mefenamic acid CAPS 6
magnesium citrate 1.745 GM/30ML	benzoate) 77	mefloquine hcl 36
70	MAXALT-MLT TBDP 10 MG	MEGA MULTI FOR WOMEN TABS
magnesium hydroxide SUSP 7.75 %,	(rizatriptan benzoate) 77	84
400 MG/5ML, 1200 MG/15ML, 2400	MAXI-COMFORT INSULIN	MEGA MULTI MEN TABS 84
MG/30ML 70	SYRINGE 73	MEGAVITE FRUITS & VEGGIES
magnesium oxide (mg supplement)	MAXICOMFORT SYR 27G X 1/2" 73	TABS 84
TABS 78	MAXIDEX SUSP OP 93	MEGAVITE GOLDEN YEARS 55+
magnesium oxide TABS 400 MG .. 12	MAXITROL OINT (neomycin-polymy-	TABS 84
malathion 62	dexameth) 93	megestrol acetate (appetite) 96
maraviroc TABS 150 MG 43	MAXITROL SUSP (neomycin-	megestrol acetate SUSP 37
maraviroc TABS 300 MG 43	polymy-dexameth) 93	megestrol acetate TABS 37
MARINOL CAPS 2.5 MG	MAXI-TUSS PE MAX LIQD 51	MEKTOVI 37
(dronabinol) 30	MAYZENT STARTER PACK TBPK	meloxicam CAPS 6
MARPLAN 21	0.25 MG 98	meloxicam TABS 6
MASK VORTEX/CHILD/FROG ... 75	MAYZENT TABS 98	memantine hcl CP24 96
MASK	meclizine hcl TABS 12.5 MG, 25 MG,	memantine hcl SOLN 96
VORTEX/TODDLER/LADYBUG .. 75	50 MG 30	memantine hcl TABS 96
MAVENCLAD (10 TABS) 10 MG	meclofenamate sodium CAPS 6	memantine hcl-donepezil hcl CP24
(cladribine (multiple sclerosis)) 97	MEDERMA AG HAND & BODY	96
MAVENCLAD (4 TABS) 10 MG	LOTN 60	MEMORY COMPLEX BRAIN
(cladribine (multiple sclerosis)) 97	MEDI TAB TABS 84	HEALTH TABS 89
MAVENCLAD (5 TABS) 10 MG	MEDIC INSULIN SYRINGE 73	MENACTRA 102
(cladribine (multiple sclerosis)) 97	MEDROL TABS	MENATROL CAPS 84
MAVENCLAD (6 TABS) 10 MG	(methylprednisolone) 50	MENQUADFI 0.5 ML 102
(cladribine (multiple sclerosis)) 97	MEDROL TABS 50	MENS 50+ ADVANCED CAPS 84
MAVENCLAD (7 TABS) 10 MG	MEDROL TBPK	MENS 50+ MULTIVITAMIN TABS .84
(cladribine (multiple sclerosis)) 97	(methylprednisolone) 50	
MAVENCLAD (8 TABS) 10 MG	medroxyprogesterone acetate	

MENS MULTI HEALTH FORMULA TABS84	metformin hcl TB24 500 MG, 1000 MG 25	methylphenidate hcl TABS 10 MG, 20 MG 2
MENS MULTIVITAMIN TABS 84	metformin hcl TB24 500 MG25	methylphenidate hcl TABS 5 MG ... 2
MENVEO SOLN 102	metformin hcl TB24 750 MG25	methylphenidate hcl TB24 18 MG, 27 MG, 54 MG2
MENVEO SOLR 102	methadone hcl TABS 10 MG9	methylphenidate hcl TB24 36 MG .. 2
meperidine hcl SOLN PO 50 MG/5ML 8	methadone hcl TABS 5 MG9	methylphenidate hcl TBCR 10 MG, 20 MG, 36 MG2
meperidine hcl TABS 50 MG8	methamphetamine hcl1	methylphenidate hcl TBCR 18 MG, 27 MG, 54 MG2
meprobamate13	methazolamide TABS63	methylphenidate hcl TBCR 45 MG, 63 MG, 72 MG2
mercaptopurine SUSP 2000 MG/100ML37	methenamine mandelate36	methylphenidate PTCH 3
mercaptopurine TABS 37	methenamine-hyosc-methylene blue- sod phos-phenyl sal TABS 81.6 MG . 36	methylprednisolone TABS50
MERILOG SOLN SC 100 UNIT/ML 28	methimazole TABS 99	methylprednisolone TBPk50
MERILOG SOLOSTAR SOPN SC 100 UNIT/ML28	methocarbamol TABS 1000 MG ...90	methyltestosterone TABS11
mesalamine CP24 66	methocarbamol TABS 90	metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML 65
mesalamine CPCR66	methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML 37	metoclopramide hcl TABS65
mesalamine CPDR66	methotrexate sodium SOLR37	metolazone63
mesalamine ENEM 66	methotrexate sodium TABS 2.5 MG 37	metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 25 MG-50 MG35
mesalamine SUPP66	methsuximide20	metoprolol & hydrochlorothiazide TABS 50 MG-100 MG 35
mesalamine TBEC 1.2 GM 66	methyldopa TABS 500 MG 34	metoprolol succinate TB24 200 MG 46
mesalamine TBEC 800 MG66	methyldopa TABS34	metoprolol succinate TB24 25 MG, 50 MG, 100 MG46
mesalamine w/ cleanser66	methylergonovine maleate TABS ..95	metoprolol tartrate TABS 100 MG .46
metaxalone90	METHYLIN SOLN (methylphenidate hcl)2	metoprolol tartrate TABS 25 MG, 50 MG 46
METAXALONE 640 MG 90	methylphenidate hcl CHEW2	metoprolol tartrate TABS 37.5 MG, 75 MG46
metformin hcl SOLN 25	methylphenidate hcl CP24 10 MG, 20 MG, 30 MG, 40 MG, 60 MG2	
metformin hcl TABS 1000 MG25	methylphenidate hcl CP24 2	
metformin hcl TABS 500 MG 25	methylphenidate hcl CPCR 2	
metformin hcl TABS 625 MG 25	methylphenidate hcl SOLN2	
metformin hcl TABS 750 MG 25		
metformin hcl TABS 850 MG 25		

METROCREAM CREA (metronidazole (topical))	61	MIDAZOLAM HCL SOLN IJ	69	SUSP	104
METROGEL GEL 1 % (metronidazole (topical))	61	midodrine hcl	105	moexipril hcl	33
metronidazole (topical) CREA	61	MIEBO	94	MOISTURE-ALL LOTN	60
metronidazole (topical) GEL 0.75 %	62	miglitol	24	mometasone furoate (nasal) SUSP	90
metronidazole (topical) GEL 1 %	61	MIL ADREGEN TABS	89	mometasone furoate CREA	57
metronidazole (topical) GEL 1 %	62	MINCORA TABS	88	mometasone furoate OINT	57
metronidazole (topical) LOTN	62	minocycline hcl CAPS	99	mometasone furoate SOLN	58
metronidazole CAPS	35	minocycline hcl TABS	99	MONOJECT INSULIN SYRINGE	73
metronidazole TABS	35	minocycline hcl TB24	99	MONOJECT ULTRA COMFORT SYRINGE	73
metronidazole vaginal	104	minoxidil 10 MG	35	montelukast sodium CHEW	14
mexiletine hcl	13	minoxidil 2.5 MG	35	montelukast sodium PACK	14
MG PLUS PROTEIN TABS	89	mirabegron TB24	101	montelukast sodium TABS	14
MICARDIS (telmisartan)	34	MIRCERA	68	MOOD FOOD CAPS	84
MICARDIS HCT (telmisartan- hydrochlorothiazide)	35	mirtazapine TABS 15 MG	21	MOOD FOOD ES CAPS	84
MICONAZOLE 7 SUPP 100 MG	104	mirtazapine TABS 30 MG	21	morphine sulfate beads	9
miconazole nitrate (topical) CREA	54	mirtazapine TABS 7.5 MG, 45 MG	21	morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG	9
miconazole nitrate vaginal CREA 2 %	104	mirtazapine TBDP 15 MG	21	morphine sulfate SOLN PO 10 MG/5ML, 20 MG/5ML	9
miconazole nitrate vaginal KIT	104	mirtazapine TBDP 30 MG	21	morphine sulfate SOLN PO 10 MG/5ML	9
miconazole nitrate vaginal SUPP 100 MG	104	mirtazapine TBDP 45 MG	21	morphine sulfate SOLN PO 100 MG/5ML	9
miconazole nitrate vaginal SUPP 200 MG	104	MIRVASO (brimonidine tartrate (topical))	62	morphine sulfate SUPP	9
miconazole-zinc oxide-white petrolatum	54	misoprostol	101	morphine sulfate TABS	9
MICROCHAMBER DEVI	75	MITIGARE CAPS (colchicine)	67	morphine sulfate TBCR	9
MICROCHAMBER MISC	75	MM INSULIN SYRINGE/NEEDLE	73	MOTEGRITY (prucalopride succinate)	65
MICROSPACER MISC	75	M-M-R II SOLR	103	MOTPOLY XR CP24	19
midazolam hcl SOLN IJ	69	MNEXSPIKE SUSY 10 MCG/0.2ML	103	MOUNJARO	26
		modafinil	3		
		MODERNA COVID-19 BIVALENT	104		
		MODERNA COVID-19 VACCINE			

MOVANTIK	66	MULTIVITAMIN/ZINC STRESS TABS	84	naftifine hcl GEL 2 %	54
moxifloxacin hcl (ophth) SOLN OP	92	MULTIVITAMIN-MINERALS TABS	84	NAFTIN GEL 2 % (naftifine hcl) ...	54
moxifloxacin hcl TABS	65	mupirocin calcium (topical)	53	NALFON CAPS (fenoprofen calcium)	6
MRESVIA	104	mupirocin OINT	53	NALFON TABS 600 MG	6
MS CONTIN TBCR (morphine sulfate)	9	MVASI	37	NALOCET TABS	10
MSM SKIN LOTN	60	MVW COMPLETE FORMULATION CAPS	84	naloxone hcl LIQD	30
MULTI VITAMIN TABS	88	MVW COMPLETE FORMULATION D3000 CAPS	84	naloxone hcl SOCT	30
MULTI VITAMIN W/D-3 TABS	88	MVW COMPLETE FORMULATION D5000 CAPS	84	naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML	30
MULTIA CAPS	84	MVW COMPLETE FORMULATION MINIS CAPS	84	naloxone hcl SOSY 0.4 MG/ML ...	30
multiple vitamin TABS	88	MVW MODULATOR FORMULATION CAPS	84	naloxone hcl SOSY 2 MG/2ML	30
multiple vitamins w/ calcium TABS	80	MVW MODULATOR FORMULATION MINI CAPS	84	naltrexone hcl	30
multiple vitamins w/ minerals CAPS	84	mycophenolate mofetil CAPS	79	NAMZARIC CP24 (memantine hcl- donepezil hcl)	96
multiple vitamins w/ minerals TABS	84	mycophenolate mofetil SUSR	79	NAMZARIC CP24	96
MULTITOL-M TABS	84	mycophenolate mofetil TABS	79	naphazoline w/ pheniramine 0.3 %- 0.025 %	92
MULTIVITAMIN ADULT (MINERALS) TABS	84	mycophenolate sodium	79	naphazoline w/ pheniramine 0.315 %-0.027 %	92
MULTIVITAMIN ADULT TABS	88	MYDAYIS CP24 (amphetamine- dextroamphetamine)	1	NAPRELAN TB24 (naproxen sodium)	6
MULTIVITAMIN DROPS/IRON SOLN	88	MYFORTIC (mycophenolate sodium)	79	NAPROSYN SUSP (naproxen)	6
MULTIVITAMIN HEALTH FORM/CA/FE TABS	84	MYHIBBIN SUSP	79	naproxen sodium TABS 220 MG ...	6
MULTIVITAMIN INFANT & TODDLER SOLN PO	88	MYRBETRIQ SRER	101	naproxen sodium TABS 275 MG, 550 MG	6
MULTIVITAMIN INFANT & TODDLER SOLN	88	MYRBETRIQ TB24 (mirabegron)	101	naproxen sodium TB24	6
MULTIVITAMIN MEN TABS	84	nabumetone	6	naproxen SUSP	6
MULTI-VITAMIN MONOCAPS TABS	84	nadolol TABS 20 MG, 40 MG, 80 MG	46	naproxen TABS	6
MULTIVITAMIN TABS	88	naftifine hcl CREA	54	naproxen TBEC	6
MULTIVITAMIN WOMEN TABS ...	84			naproxen-esomeprazole magnesium	6
				naratriptan hcl	77

NARCAN LIQD (naloxone hcl)30	NERVIVE NERVE RELIEF TABS . 89	nicotine polacrilex GUM98
NARDIL (phenelzine sulfate)21	NESINA (alogliptin benzoate)25	nicotine polacrilex LOZG98
nateglinide29	NEUPRO38	nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR98
NATESTO GEL NA11	NEURONTIN CAPS (gabapentin) . 19	NICOTROL NS SOLN98
NATROBA (spinosad)62	NEURONTIN SOLN (gabapentin) . 19	nifedipine CAPS47
NAT-RUL THERAVITE-M TABS . . 84	NEURONTIN TABS 600 MG (gabapentin)19	nifedipine TB24 30 MG, 90 MG . . .47
NATRUL-VITES TABS84	NEURONTIN TABS 800 MG (gabapentin)19	nifedipine TB24 60 MG47
NAYZILAM18	NEUTROGENA MOISTURE SENS SKIN LOTN60	nimodipine CAPS47
nebivolol hcl46	NEVANAC94	nimodipine SOLN47
nefazodone hcl23	nevirapine SUSP43	nisoldipine47
NEMLUVIO61	nevirapine TABS43	nitazoxanide TABS36
NEOMULTIVITE TABS88	nevirapine TB24 400 MG43	NITRO-BID OINT12
neomycin sulfate TABS3	NEWVITE TABS88	nitrofurantoin36
neomycin-bacitracin zn-polymyxin 92	NEXICLON XR TB24 (clonidine) . . 34	nitrofurantoin macrocrystal 50 MG, 100 MG36
neomycin-bacitracin-polymyxin OINT 53	NEXIUM CPDR 20 MG (esomeprazole magnesium)100	nitrofurantoin monohyd macro . . .36
neomycin-polymy-dexameth OINT 93	NEXIUM CPDR 40 MG (esomeprazole magnesium)100	nitroglycerin CPCR12
neomycin-polymy-dexameth SUSP 93	NEXIUM PACK (esomeprazole magnesium)100	nitroglycerin PT2412
neomycin-polymyxin w/ pramoxine 53	NGENLA64	nitroglycerin SUBL12
neomycin-polymyxin-gramicidin . .92	niacin CPCR 250 MG, 500 MG . .105	NIVA THYROID TABS99
neomycin-polymyxin-hc (ophth) . .93	niacin TABS 500 MG105	NIVEA ESSENTIALLY ENRICHED LOTN60
neomycin-polymyxin-hc (otic) SOLN . 94	niacin TBCR105	NIVEA IN-SHOWER LOTN60
neomycin-polymyxin-hc (otic) SUSP . 94	NICADAN TABS84	NIVEA INTENSE HEALING LOTN 60
NEORAL CAPS (cyclosporine modified (for microemulsion))79	nicardipine hcl CAPS47	NIVEA LOTN60
NEORAL SOLN (cyclosporine modified (for microemulsion))79	NICAZEL FORTE TABS84	NIVEA SHEA NOURISH LOTN . . .60
NEOVITE TABS84	NICAZEL TABS84	NIVEA VISAGE LOTN60
	NICOTINE KIT98	nizatidine CAPS100
		NO IRON MULT VITAMIN- MINERALS TABS85

NORDITROPIN FLEXPEN SOPN .64	NOVOLIN 70/30 RELION SUSP ..28	NUTRALYN TABS85
norelgestromin-ethinyl estradiol ...49	NOVOLIN 70/30 SUSP28	NUTRICAP TABS85
norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG49	NOVOLIN N FLEXPEN RELION SUPN28	NUTROPIN AQ NUSPIN 10 SOPN 64
norethindrone & eth estradiol49	NOVOLIN N FLEXPEN SUPN28	NUTROPIN AQ NUSPIN 20 SOPN 64
norethindrone & ethinyl estradiol-fe 49	NOVOLIN N RELION SUSP28	NUTROPIN AQ NUSPIN 5 SOPN .64
norethindrone (contraceptive)49	NOVOLIN N SUSP28	NUVAXOVID COVID-19 VACCINE SUSY 5 MCG/0.5ML 104
norethindrone acet & eth estra TABS 49	NOVOLIN R FLEXPEN RELION SOPN IJ28	NUVIGIL (armodafinil)3
norethindrone acetate TABS96	NOVOLIN R FLEXPEN SOPN IJ ..28	NUZYRA TABS99
norethindrone acetate-ethinyl estradiol64	NOVOLIN R RELION SOLN IJ28	NYMALIZE SOLN 6 MG/ML47
norethindrone acetate-ethinyl estradiol-fe49	NOVOLIN R SOLN IJ28	NYSTATIN (nystatin (mouth-throat)) . 79
norethindrone-eth estradiol (triphasic)49	NOVOLOG 70/30 FLEXPEN RELION SUPN28	nystatin (mouth-throat)79
norgestimate-ethinyl estradiol (triphasic)49	NOVOLOG FLEXPEN RELION SOPN28	nystatin (topical) CREA54
norgestimate-ethinyl estradiol49	NOVOLOG FLEXPEN SOPN28	nystatin (topical) OINT54
norgestrel & ethinyl estradiol 30 MCG-0.3 MG49	NOVOLOG MIX 70/30 FLEXPEN SUPN28	nystatin (topical) POWD EX54
NORLIQVA SOLN47	NOVOLOG MIX 70/30 RELION SUSP28	nystatin TABS31
NORPACE CR CP12 150 MG13	NOVOLOG MIX 70/30 SUSP28	nystatin-triamcinolone CREA54
nortriptyline hcl CAPS24	NOVOLOG MIX 70/30 SUSP28	nystatin-triamcinolone OINT54
nortriptyline hcl SOLN24	NOVOLOG PENFILL SOCT29	OCTAGAM SOLN 30 GM/300ML .95
NORVASC TABS (amlodipine besylate)47	NOVOLOG RELION SOLN IJ29	octreotide acetate KIT64
NORVIR PACK43	NOVOLOG SOLN IJ29	OCUFLOX (ofloxacin (ophth))92
NORVIR TABS (ritonavir)43	NP THYROID TABS99	OCULAR VITAMINS TABS85
NOVOLIN 70/30 FLEXPEN RELION SUPN28	NUCALA SOAJ13	OCUVEL CAPS 250 MG-0.5 MG-5 MG-1 MG-40 MG-1 MG-200 UNIT 85
NOVOLIN 70/30 FLEXPEN SUPN 28	NUCALA SOLR13	OCUVITE ADULT 50+ CAPS85
	NUCALA SOSY13	OCUVITE ADULT FORMULA CAPS . 85
	NUPLAZID CAPS38	OCUVITE ADULT PERFORMANCE CAPS85
	NUPLAZID TABS 10 MG38	
	NURTEC76	

OCUVITE-LUTEIN CAPS	85	CAPS	101	ondansetron TBDP 4 MG, 8 MG ...	30
ODEFSEY	43	omeprazole-sodium bicarbonate		ONE A DAY ENERGY TABS	85
OFEV	99	PACK	101	ONE A DAY MEN 50 PLUS TABS	85
ofloxacin (ophth)	92	OMNARIS SUSP	90	ONE A DAY TRIPLE IMMUNE	
ofloxacin (otic)	94	OMNICAP TABS	88	SUPPRT TABS	85
ofloxacin 300 MG	65	OMNIPOD 5 DEXG7G6 INTRO GEN		ONE A DAY WOMEN 50 PLUS	
ofloxacin 400 MG	65	5 KIT	71	TABS	85
OGIVRI	37	OMNIPOD 5 DEXG7G6 PODS GEN		ONE DAILY ESSENTIAL TABS ...	88
OHTUVAYRE	14	5 MISC	72	ONE DAILY ESSENTIALS TABS	88
olanzapine TABS 15 MG, 20 MG	40	OMNIPOD 5 G7 INTRO (GEN 5) KIT		ONE DAILY MEN FORMULA W/O	
olanzapine TABS 2.5 MG, 5 MG	40	72		IRON TABS	85
olanzapine TABS 7.5 MG, 10 MG	40	OMNIPOD 5 G7 PODS (GEN 5)		ONE DAILY MENS 50+ MULTIVIT	
olanzapine TBDP	40	MISC	72	TABS	85
olanzapine-fluoxetine hcl 25 MG-12		OMNIPOD 5 LIBRE2 G6 INTRO		ONE DAILY MULTIVITAMIN	
MG, 50 MG-12 MG, 50 MG-6 MG	97	GEN5 KIT	72	WOMEN TABS	85
olanzapine-fluoxetine hcl 25 MG-3		OMNIPOD 5 LIBRE2 PLUS G6		ONE DAILY WOMENS TABS	85
MG, 25 MG-6 MG	97	PODS MISC	72	ONE VITE DAILY MULTIVITAMIN	
olmesartan medoxomil	34	OMNIPOD DASH PODS (GEN 4)		TABS	88
olmesartan medoxomil-amlodipine-		MISC	72	ONE-A-DAY ADULT	
hydrochlorothiazide	35	OMNITROPE SOCT	64	VITACRAVES+DHA CHEW	88
olmesartan medoxomil-		OMNITROPE SOLR SC	64	ONE-A-DAY ENERGY TABS	85
hydrochlorothiazide	35	OMVOH (300 MG DOSE) SOAJ	66	ONE-A-DAY MENOPAUSE	
olopatadine hcl (nasal)	90	OMVOH (300 MG DOSE) SOSY	66	FORMULA TABS	85
olopatadine hcl 0.2 %	94	OMVOH SOAJ	66	ONE-A-DAY MENS (MINERALS)	
OLUMIANT	3	OMVOH SOSY	66	TABS	85
omega-3 fatty acids CAPS 1000 MG		ONCOVITE TABS	85	ONE-A-DAY MENS 50+	
91		ondansetron hcl SOLN IJ	30	ADVANTAGE TABS	85
omega-3-acid ethyl esters	32	ondansetron hcl SOLN PO 4		ONE-A-DAY MENS 50+ TABS	85
omeprazole CPDR	100	MG/5ML	30	ONE-A-DAY MENS HEALTH	
omeprazole magnesium TBEC ...	100	ondansetron hcl SOSY	30	FORMULA TABS	85
omeprazole TBEC	100	ondansetron hcl TABS 4 MG, 8 MG		ONE-A-DAY MENS PRO EDGE	
omeprazole-sodium bicarbonate		30		TABS	85
Index 37		ondansetron TBDP 16 MG	30	ONE-A-DAY PROACTIVE 65+ TABS	
					85

ONE-A-DAY TEEN ADVANTAGE/HIM TABS85	ORKAMBI PACK99	OVACE WASH LIQD (sulfacetamide sodium)55
ONE-A-DAY WOMENS 50+ TABS 85	ORKAMBI TABS99	OVIDE (malathion)62
ONE-A-DAY WOMENS TABS85	orphenadrine citrate TB1290	oxaprozin TABS6
ONE-DAILY MULTI CAPS CAPS ..85	orphenadrine w/ aspirin & caff90	oxazepam CAPS13
ONEVITE TABS85	oseltamivir phosphate CAPS 30 MG . 45	oxcarbazepine SUSP19
ONFI SUSP (clobazam)18	oseltamivir phosphate CAPS 45 MG, 75 MG45	oxcarbazepine TABS19
ONFI TABS (clobazam)18	oseltamivir phosphate SUSP45	oxcarbazepine TB2419
ONYDA XR SUER2	OSENI 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG (alogliptin-pioglitazone)24	oxiconazole nitrate CREA54
OPIPZA FILM42	OSTEOPRIME PLUS TABS85	OXISTAT LOTN54
OPSUMIT47	OTEZLA TABS 20 MG7	OXTELLAR XR TB24 (oxcarbazepine)19
OPSYNVI47	OTEZLA TABS 30 MG7	oxybutynin chloride SOLN101
OPTICHAMBER DIAMOND DEVI .75	OTEZLA TBPK7	oxybutynin chloride TABS 2.5 MG 101
OPTICHAMBER DIAMOND MISC .75	OTEZLA XR TB24 PO 75 MG7	oxybutynin chloride TABS 5 MG . 101
OPTICHAMBER DIAMOND-LG MASK DEVI75	OTEZLA/OTEZLA XR INITIATION PK TBPK7	oxybutynin chloride TB24101
OPTICHAMBER DIAMOND-MD MASK MISC75	OTREXUP SOAJ 10 MG/0.4ML, 12.5 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 20 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML3	oxycodone hcl CAPS9
OPTICHAMBER DIAMOND-SM MASK MISC75	OTULFI SOLN SC 45 MG/0.5ML ..54	oxycodone hcl CONC 100 MG/5ML 9
OPURITY TABS85	OTULFI SOSY SC 45 MG/0.5ML, 90 MG/ML54	oxycodone hcl SOLN9
OPVEE NA30	OVACE PLUS CREA55	oxycodone hcl T12A 20 MG, 40 MG . 9
OPZELURA58	OVACE PLUS LOTN55	oxycodone hcl TABS9
ORACEA (doxycycline (rosacea)) 62	OVACE PLUS SHAM (sulfacetamide sodium)55	oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG10
oral electrolytes SOLN78	OVACE PLUS WASH GEL (sulfacetamide sodium)55	oxycodone w/ acetaminophen TABS 325 MG-2.5 MG10
ORENCIA CLICKJECT SOAJ7	OVACE PLUS WASH LIQD (sulfacetamide sodium)55	oxycodone w/ acetaminophen TABS . 10
ORENCIA SOSY7		OXYCONTIN T12A9
ORENITRAM MONTH 1 TEPK47		oxymorphone hcl TABS9
ORENITRAM MONTH 2 TEPK47		oxymorphone hcl TB129
ORENITRAM MONTH 3 TEPK47		
ORENITRAM TBCR47		

OXYTROL PTTW101	22	penicillin v potassium SOLR95
oyster shell78	paroxetine hcl TB2422	penicillin v potassium TABS95
OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN26	paroxetine mesylate (vasomotor) .99	PENMENVY SUSR IM102
OZEMPIC (1 MG/DOSE) SOPN 4 MG/3ML26	PARVLEX TABS85	PENTASA CPCR (mesalamine) ...66
OZEMPIC (2 MG/DOSE) SOPN ...26	PAXIL CR TB24 (paroxetine hcl) ..22	PENTASA CPCR66
OZOBAX DS SOLN PO (baclofen) 90	PAXIL TABS 10 MG (paroxetine hcl) . 22	pentazocine w/ naloxone hcl11
OZOBAX SOLN PO (baclofen)90	PAXIL TABS 20 MG (paroxetine hcl) . 22	pentoxifylline67
PADCEV37	PAXIL TABS 30 MG, 40 MG (paroxetine hcl)22	perampanel TABS 2 MG, 4 MG, 6 MG, 8 MG, 10 MG, 12 MG17
paliperidone39	PAXLOVID (150/100)44	PERCOCET TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG (oxycodone w/ acetaminophen) ...10
PALMERS COCOA BUTTER FORMULA LOTN60	PAXLOVID (300/100 & 150/100) .44	PERCOCET TABS 325 MG-2.5 MG (oxycodone w/ acetaminophen) ...10
PALMERS COCONUT OIL BODY LOTN60	PAXLOVID (300/100)44	PERFOROMIST NEBU (formoterol fumarate)15
PALMERS STRETCH MARKS LOTN60	PC PEDIATRIC POLY-VITAMIN DROP SOLN PO89	perindopril erbumine33
PANDA MASK LARGE75	ped multivitamins w/fl & iron SOLN 88	permethrin CREA62
PANDA MASK MEDIUM76	PEDIALYTE IMMUNE SUPPORT SOLN78	permethrin LIQD EX62
PANDA MASK SMALL76	PEDIATRIC PANDA MASK76	perphenazine TABS41
PANDEL58	PEDVAX HIB SUSP102	perphenazine-amitriptyline97
pantoprazole sodium PACK100	peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid69	PERSERIS PRSY39
pantoprazole sodium TBEC 20 MG 100	peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR69	PERTZYE CPEP62
pantoprazole sodium TBEC 40 MG 100	peg 3350-potassium chloride-sod bicarbonate-sod chloride69	PFIZER COVID-19 VAC BIVALENT . 104
PARI VORTEX ADULT MASK76	PEGASYS SOLN45	PFIZER COVID-19 VAC-TRIS 5-11Y SUSP104
PARI VORTEX PEDIATRIC MASK 76	PEGASYS SOSY45	PFIZER-BIONT COVID-19 VAC- TRIS SUSP104
paroxetine hcl SUSP22	PENBRAYA102	PFIZER-BIONTECH COVID-19 VACC SUSP104
paroxetine hcl TABS 10 MG22	penciclovir55	phenazopyridine hcl TABS 100 MG, 200 MG67
paroxetine hcl TABS 20 MG22	penicillamine TABS78	
paroxetine hcl TABS 30 MG, 40 MG .		

phenelzine sulfate	21	PLEGRIDY SOSY IM	98	potassium chloride PACK PO 20 MEQ	78
phenobarbital ELIX	69	PLEGRIDY STARTER PACK SOAJ . 98		potassium chloride SOLN PO 10 %, 20 %, 10 %	78
phenobarbital TABS	69	PLEGRIDY STARTER PACK SOSY SC	98	potassium chloride TBCR	78
phenylephrine-chlorphen-dm LIQD 10 MG/5ML-4 MG/5ML-15 MG/5ML 51		PNEUMOVAX 23 SOLN	102	potassium citrate (alkalinizer) TBCR . 67	
phenytoin CHEW	20	PNEUMOVAX 23 SOSY	102	potassium iodide (expectorant) SOLN	51
phenytoin sodium extended 100 MG, 200 MG, 300 MG	20	POCKET CHAMBER DEVI	76	PRADAXA CAPS (dabigatran etexilate mesylate)	17
phenytoin sodium extended 200 MG, 300 MG	20	POCKET SPACER DEVI	76	PRADAXA PACK	17
phenytoin SUSP 125 MG/5ML	20	podofilox GEL	61	pramipexole dihydrochloride TABS 38	
PHESGO	37	podofilox SOLN	61	pramipexole dihydrochloride TB24	38
PHYTOMULTI TABS	85	polyethylene glycol 3350 PACK ...	70	prasugrel hcl	68
phytonadione TABS 5 MG	105	polyethylene glycol 3350 POWD ..	70	pravastatin sodium	33
PIFELTRO	43	polymyxin b-trimethoprim	92	prazosin hcl CAPS	34
pilocarpine hcl (oral) 5 MG	79	polysaccharide iron complex CAPS 68		PRECISION SURE-DOSE SYRINGE	73
pilocarpine hcl SOLN 1 %, 2 %, 4 % . 91		polyvinyl alcohol 1.4 %	91	PRED FORTE (prednisolone acetate (ophth))	93
pimecrolimus	61	POLY-VI-SOL SOLN PO	89	PRED MILD	93
pindolol TABS	46	POLY-VITA SOLN PO	89	prednisolone acetate (ophth)	93
pioglitazone hcl	29	POLY-VITE PEDIATRIC SOLN PO 89		PREDNISOLONE ACETATE P-F	93
pioglitazone hcl-glimepiride	24	POLY-VITE/IRON SOLN	88	PREDNISOLONE SODIUM PHOSPHATE	93
pioglitazone hcl-metformin hcl TABS . 24		PONVORY STARTER PACK TBPk 98		prednisolone sodium phosphate SOLN 20 MG/5ML	50
pirfenidone CAPS	99	PONVORY TABS	98	prednisolone sodium phosphate SOLN 5 MG/5ML, 10 MG/5ML, 15 MG/5ML, 25 MG/5ML	50
pirfenidone TABS	99	pot phosphate monobasic w/ sod		PREDNISOLONE SODIUM PHOSPHATE TBDP 10 MG, 15 MG, 30 MG	50
piroxicam CAPS	6	phosphate dibasic & monobasic ..	78		
pitavastatin calcium	33	potassium bicarbonate TBEF	78		
PLAVIX 75 MG (clopidogrel bisulfate)	68	potassium chloride CPCR 10 MEQ 78			
PLEGRIDY SOAJ	98	potassium chloride CPCR 8 MEQ .	78		
		potassium chloride microencapsulated crystals er	78		

prednisolone SOLN50	PREVNAR 20102	DEVI76
prednisolone TABS50	PREV-RX TABS86	PROCARE SPACER/CHILD MASK DEVI76
PREDNISONE INTENSOL CONC .50	PREZCOBIX43	PROCERV HP TABS86
prednisone SOLN50	PREZISTA SUSP43	PROCHAMBER VHC DEVI76
prednisone TABS50	PREZISTA TABS (darunavir)43	prochlorperazine41
prednisone TBPk50	PREZISTA TABS 150 MG43	prochlorperazine maleate TABS ...41
pregabalin (once-daily)98	PREZISTA TABS 75 MG, 600 MG 43	PROCRIT68
pregabalin CAPS19	PREZISTA TABS 800 MG (darunavir)43	PRODIGY INSULIN SYRINGE ...73
pregabalin SOLN19	PRILOSEC PACK100	PROFOLA TABS86
PREHEVBRIO104	primaquine phosphate TABS36	progesterone CAPS96
PREMARIN104	primidone19	PROGLYCEM (diazoxide)25
PREMPRO64	PRIORIX SUSR104	PROGRAF CAPS (tacrolimus)79
prenatal vit w/ docusate-iron carbonyl-folic acid TABS89	PRISTIQ 100 MG (desvenlafaxine succinate)23	PROGRAF PACK79
PREPARATION H EX 1 %12	PRISTIQ 25 MG, 50 MG (desvenlafaxine succinate)23	PROLATE SOLN10
PREPARATION H SOOTHING RELIEF EX 1 %12	PRO COMFORT SPACER ADULT MISC76	PROLATE TABS10
PRESCRIPTION SUPPORT MULTIVIT CAPS85	PRO COMFORT SPACER CHILD MISC76	PROLENSA (bromfenac sodium (ophth))94
PRESERVISION AREDS 2 CAPS .85	PRO COMFORT SPACER INFANT DEVI76	promethazine & phenylephrine SYRP51
PRESERVISION AREDS 2+COQ10 CAPS85	PROAIR RESPICLICK AEPB16	promethazine hcl SOLN PO 6.25 MG/5ML, 12.5 MG/10ML32
PRESERVISION AREDS 2+MULTI VIT CAPS85	probenecid67	promethazine hcl SUPP32
PRESERVISION AREDS CAPS ...85	PROBIOTICS + BARIATRIC MULTI CAPS86	promethazine hcl TABS32
PRESERVISION AREDS TABS ...85	PRO-CAL TABS86	promethazine w/codeine SOLN ...51
PRESERVISION/LUTEIN CAPS ..86	PROCARDIA XL TB24 30 MG, 90 MG (nifedipine)47	promethazine w/codeine SYRP ...51
PREVACID CPDR 30 MG (lansoprazole)100	PROCARDIA XL TB24 60 MG (nifedipine)47	promethazine-dm SYRP51
PREVACID SOLUTAB TBDD (lansoprazole)100	PROCARE SPACER/ADULT MASK	promethazine-phenylephrine-codeine51
PREVNAR 13102		propafenone hcl CP1213
		propafenone hcl TABS13
		propranolol hcl CP2446

propranolol hcl SOLN PO 20 MG/5ML, 40 MG/5ML46	PULMICORT SUSP 0.25 MG/2ML, 0.5 MG/2ML (budesonide (inhalation)) 14	32	quetiapine fumarate TABS 150 MG 40
propranolol hcl TABS46	PULMICORT SUSP 1 MG/2ML (budesonide (inhalation)) 14		quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG 40
propylthiouracil99	PURE COMFORT SPACER CHAMBER DEVI76		quetiapine fumarate TABS 300 MG, 400 MG 40
PRORENAL + D TABS86	PX INSULIN SYRINGE 73		quetiapine fumarate TB24 40
PRORENAL + D W/ OMEGA-3 CAPS86	pyrazinamide37		QUILLICHEW ER CHER3
PROSCAR (finasteride)67	pyrethrins-piperonyl butoxide SHAM 4 %-0.33 %62		QUILLIVANT XR SRER3
PROTECT CARDIO AF CAPS 86	pyridostigmine bromide TABS 60 MG36		QUIN B STRONG TABS86
PROTECT PLUS SO CAPS86	pyridostigmine bromide TBCR36		quinapril hcl33
PROTEGRA CAPS 86	pyridoxine hcl TABS 25 MG, 50 MG, 100 MG 105		quinapril-hydrochlorothiazide 12.5 MG-10 MG 35
PROTONIX PACK (pantoprazole sodium) 101	PYZCHIVA 45 MG/0.5ML, 90 MG/ML55		quinapril-hydrochlorothiazide 12.5 MG-20 MG 35
PROTONIX TBEC 20 MG (pantoprazole sodium)101	PYZCHIVA SC 45 MG/0.5ML55		quinapril-hydrochlorothiazide 25 MG- 20 MG35
PROTONIX TBEC 40 MG (pantoprazole sodium)101	QBRELIS SOLN 33		quinidine gluconate TBCR13
PROVIGIL (modafinil) 3	QC MULTI-VITE TABS 86		quinidine sulfate TABS13
PROVIT TABS86	QC OCUHEALTH VISION SUPPORT 2 CAPS 86		QUINTABS TABS88
PROZAC CAPS 10 MG, 20 MG (fluoxetine hcl) 22	QELBREE 2		QUINTABS-M TABS86
PROZAC CAPS 40 MG (fluoxetine hcl) 22	QNASL 90		QULIPTA76
prucalopride succinate65	QNASL CHILDRENS90		QUVIVIQ69
pseudoephed-bromphen-dm SYRP 10 MG/5ML-30 MG/5ML-2 MG/5ML 51	QTERN24		QVAR REDHALER 40 MCG/ACT .14
pseudoephedrine hcl TABS91	quazepam 69		QVAR REDHALER 80 MCG/ACT .14
pseudoephedrine hcl TB1291	QUDEXY XR CS24 (topiramate) .. 19		RABAVERT 104
pseudoephedrine-guaifenesin TB12 1200 MG-120 MG51	QUESTRAN LIGHT POWD (cholestyramine light)32		rabeprazole sodium TBEC 101
pseudoephedrine-guaifenesin TB12 600 MG-60 MG51	QUESTRAN PACK (cholestyramine) 32		RADIAGUARD ADVANCED LOTN 60
PULMICORT FLEXHALER AEPB .14	QUESTRAN POWD (cholestyramine)		RAGWITEK SUBL3
			RALDESY SOLN PO 10 MG/ML .. 23

raloxifene hcl	64	MG	3	RESTORIL 15 MG, 30 MG (temazepam)	69
ramelteon	69	RELION INSULIN SYRINGE	73	RESTORIL 7.5 MG, 22.5 MG (temazepam)	69
ramipril CAPS	33	RELION KETONE TEST STRP ...	62	RETACRIT	68
RANITIDINE HCL TABS 150 MG, 300 MG	100	RELION TRUE MET AIR GLUC METER KIT	72	RETROVIR CAPS (zidovudine) ...	43
ranolazine TB12	12	RELION TRUE METRIX TEST STRIPS STRP	62	RETROVIR SYRP (zidovudine) ...	43
RAPAFLO (silodosin)	67	RELPAX (eletriptan hydrobromide) 77		REVATIO TABS (sildenafil citrate (pulmonary hypertension))	48
RASUVO SOAJ 7.5 MG/0.15ML, 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML	4	REMEDIENT CAPS	86	REXTOVY LIQD	30
RAYAVIT TABS	86	REMERON SOLTAB TBDP 15 MG (mirtazapine)	21	REXULTI	42
REALITY INSULIN SYRINGE	73	REMERON SOLTAB TBDP 30 MG (mirtazapine)	21	REYATAZ CAPS 200 MG (atazanavir sulfate)	43
REBIF REBIDOSE SOAJ	98	REMERON SOLTAB TBDP 45 MG (mirtazapine)	21	REYATAZ CAPS 300 MG (atazanavir sulfate)	43
REBIF REBIDOSE TITRATION PACK SOAJ	98	REMERON TABS 15 MG (mirtazapine)	21	REYATAZ PACK	43
REBIF SOSY	98	REMERON TABS 30 MG (mirtazapine)	21	REZUROCK	78
REBIF TITRATION PACK SOSY ..	98	RENAL MULTIVITAMIN TABS	86	REZVOGLAR KWIKPEN	29
REBLOZYL	68	RENAPLEX-D TABS	86	RHAPSIDO TABS PO 25 MG	78
RECOMBIVAX HB SUSP	104	RENFLEXIS	66	RHOFADE	62
RECOMBIVAX HB SUSY	104	RENTHYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	99	RHOGAM ULTRA-FILTERED PLUS SOSY IM	95
REGLAN TABS (metoclopramide hcl)	65	RENVELA PACK (sevelamer carbonate)	66	RHOPRESSA	92
RELAFEN DS	6	RENVELA TABS (sevelamer carbonate)	66	ribavirin (hepatitis c) CAPS	45
RELCARE TABS	88	repaglinide	29	ribavirin (hepatitis c) TABS 200 MG 45	
RELENZA DISKHALER	45	RESTA LITE LOTN	60	riboflavin TABS	105
RELEXXII TBCR 18 MG, 27 MG, 54 MG	3	RESTASIS EMUL (cyclosporine (ophth))	92	rifabutin	37
RELEXXII TBCR 36 MG	3	RESTASIS MULTIDOSE EMUL ...	92	rifampin CAPS	37
RELEXXII TBCR 45 MG, 63 MG, 72 MG (methylphenidate hcl)	3			riluzole TABS	91
RELEXXII TBCR 45 MG, 63 MG, 72				RINVOQ LQ SOLN	3
				RINVOQ TB24	3

RIOMET SOLN (metformin hcl) ... 25	ROCKLATAN92	SAVAYSA 16
risedronate sodium TABS 150 MG 63	roflumilast14	SAVELLA TABS 97
risedronate sodium TABS 35 MG .63	ropinirole hydrochloride TABS 0.25	SAVELLA TITRATION PACK MISC
risedronate sodium TABS 5 MG, 30	MG, 3 MG, 4 MG38	97
MG 63	ropinirole hydrochloride TABS 0.5	saxagliptin hcl 25
risedronate sodium TBEC 64	MG, 1 MG, 2 MG, 5 MG 38	saxagliptin-metformin hcl 24
RISPERDAL CONSTA (risperidone	ropinirole hydrochloride TB24 38	SAXENDA 18 MG/3ML (liraglutide
microspheres)39	rosuvastatin calcium TABS 33	(weight management)) 2
RISPERDAL SOLN (risperidone) ..39	ROWASA (mesalamine w/ cleanser)	SB INSULIN SYRINGE 73
RISPERDAL TABS 0.5 MG, 1 MG, 2	66	scopolamine30
MG, 3 MG, 4 MG (risperidone) 39	ROXICODONE TABS 15 MG, 30 MG	SEBASORB LOTN60
risperidone SOLN39	(oxycodone hcl) 9	SECUADO 40
risperidone TABS 0.25 MG 40	ROXYBOND TABA9	SECURESAFE INSULIN SYRINGE .
risperidone TABS 0.5 MG, 1 MG, 2	ROZEREM (ramelteon) 69	73
MG, 3 MG, 4 MG 40	ROZLYTREK CAPS 37	SEGLUROMET 24
risperidone TABS 40	rufinamide SUSP19	SELARSDI SOSY SC 45 MG/0.5ML,
risperidone TBDP 40	rufinamide TABS19	90 MG/ML55
RITALIN LA CP24 (methylphenidate	RUKOBIA43	SELECT-OB+DHA MISC89
hcl)3	RUXIENCE 37	selegiline hcl CAPS38
RITALIN TABS 10 MG, 20 MG	RYALTRIS90	selegiline hcl TABS 38
(methylphenidate hcl) 3	RYKINDO SRER40	selenium sulfide LOTN 1 %55
RITALIN TABS 5 MG	SABRIL PACK (vigabatrin) 20	selenium sulfide LOTN 2.5 %55
(methylphenidate hcl) 3	SABRIL TABS (vigabatrin)20	selenium sulfide SHAM 1 % 55
RITEFLO DEVI76	sacubitril-valsartan TABS47	SELZENTRY SOLN 44
ritonavir TABS 43	salicylic acid GEL 6 % 61	SELZENTRY TABS 150 MG
rivaroxaban SUSR 1 MG/ML 16	SALICYLIC ACID OINT61	(maraviroc)44
rivaroxaban TABS 2.5 MG16	saline SOLN 0.65 % 90	SELZENTRY TABS 300 MG
rivastigmine 13.3 MG/24HR 96	salsalate 8	(maraviroc)44
rivastigmine 4.6 MG/24HR, 9.5	SANCUSO PTCH30	SEMGLEE (YFGN) SOLN29
MG/24HR 96	SANDIMMUNE CAPS (cyclosporine)	SEMGLEE (YFGN) SOPN29
rivastigmine tartrate CAPS96	79	sennosides TABS 8.6 MG 70
rizatriptan benzoate TABS77	SAPHRIS (asenapine maleate) ...40	sennosides-docusate sodium TABS
rizatriptan benzoate TBDP77		

69		silodosin67	SKYTROFA64
SENTRY SENIOR MENS 50+ TABS .86		silver sulfadiazine55	sodium bicarbonate (antacid) TABS 325 MG, 650 MG12
SENTRY SENIOR/LUTEIN TABS .86		SIMBRINZA92	sodium chloride (gu irrigant) 0.9 % 67
SENTRY TABS86		simethicone CHEW 80 MG65	sodium chloride (inhalant) NEBU 0.9 %, 3 %, 10 %51
SEREVENT DISKUS16		simethicone SUSP65	sodium citrate & citric acid67
SEROQUEL TABS 25 MG, 50 MG, 100 MG, 200 MG (quetiapine fumarate)40		SIMLANDI (1 PEN) AJKT5	sodium fluoride (dental) CREA79
		SIMLANDI (1 SYRINGE) PSKT5	sodium fluoride (dental) GEL79
SEROQUEL TABS 300 MG, 400 MG (quetiapine fumarate)40		SIMLANDI (2 PEN) AJKT5	sodium fluoride (dental) PSTE DT .79
SEROQUEL XR TB24 (quetiapine fumarate)40		SIMLANDI (2 SYRINGE) PSKT5	sodium fluoride (dental) PSTE DT .79
		SIMPONI SOAJ5	sodium fluoride CHEW78
SEROSTIM SC 4 MG, 5 MG, 6 MG 64		SIMPONI SOSY5	sodium fluoride SOLN 0.5 MG/ML .78
		simvastatin TABS 5 MG, 10 MG, 20 MG, 40 MG33	SODIUM FLUORIDE SOLN 0.5 MG/ML78
SERTRALINE HCL CAPS 150 MG, 200 MG (sertraline hcl)23		simvastatin TABS 80 MG33	sodium phosphates ENEM70
sertraline hcl CAPS 150 MG, 200 MG22		SINGULAIR CHEW (montelukast sodium)14	sodium polystyrene sulfonate POWD 79
sertraline hcl CONC23		SINGULAIR TABS (montelukast sodium)14	sodium polystyrene sulfonate SUSP CO 15 GM/60ML79
sertraline hcl TABS 100 MG23		sirolimus SOLN79	sodium polystyrene sulfonate SUSP PR 30 GM/120ML79
sertraline hcl TABS 25 MG, 50 MG 23		sirolimus TABS79	sodium sulfate-potassium sulfate- magnesium sulfate69
sevelamer carbonate PACK66		SITAGLIPT BASE-METFORM HCL ER TB2424	SOFOSBUVIR-VELPATASVIR TABS45
sevelamer carbonate TABS67		SITAGLIPTIN25	SOGROYA64
sevelamer hcl67		SITAGLIPTIN BASE-METFORMIN HCL TABS24	solifenacin succinate TABS101
SFROWASA ENEM66		SIVEXTRO TABS36	SOLQUA24
SHINGRIX104		SKIN HAIR & NAILS ADVANCED CAPS86	SOLO TABS86
SIDEROL TABS86		SKIN REPAIR LOTN61	SOLOSEC3
SIKLOS TABS68		SKYRIZI PEN SOAJ55	SOMA TABS (carisoprodol)90
sildenafil citrate (pulmonary hypertension) SUSR48		SKYRIZI SOCT66	SOOLANTRA (ivermectin (rosacea))62
sildenafil citrate (pulmonary hypertension) TABS48		SKYRIZI SOSY55	

SORBITOL XX	96	STEQEYMA	55	sulfacetamide sodium w/ sulfur CREA 10 %-2 %, 10 %-5 %	52
SORILUX FOAM	55	STIOLTO RESPIMAT	16	sulfacetamide sodium w/ sulfur EMUL 10 %-1 %	52
sotalol hcl (afib/afib)	46	STRATTERA (atomoxetine hcl)	2	sulfacetamide sodium w/ sulfur FOAM	52
sotalol hcl TABS	46	STRESS FORMULA/ZINC/ENERGY TABS	88	sulfacetamide sodium w/ sulfur LIQD	52
SOTYKTU	55	STRIBILD	44	52	
SOTYLIZE SOLN PO	46	STRIVERDI RESPIMAT	16	sulfacetamide sodium w/ sulfur LOTN 10 %-5 %	52
SOVALDI PACK	45	STROVITE ONE TABS	86	sulfacetamide sodium w/ sulfur LOTN 9.8 %-4.8 %	52
SOVALDI TABS	45	STUDIO 35 EXTRA MOISTURIZING LOTN	61	sulfacetamide sodium w/ sulfur SUSP 10 %-5 %	52
SOVUNA 200 MG	36	SUBLOCADE SOSY	11	sulfacetamide sodium w/ sulfur SUSP 8 %-4 %	53
specialty vitamins products TABS .	89	SUBOXONE FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG (buprenorphine hcl-naloxone hcl dihydrate)	11	SULFACETAMIDE SODIUM- SULFUR SUSP	53
SPECTRAVITE TABS	86	SUBOXONE FILM SL 3 MG-12 MG (buprenorphine hcl-naloxone hcl dihydrate)	11	sulfacetamide sod-prednisolone SOLN	93
SPEVIGO SOSY	55	SUBVENITE SUSP PO 10 MG/ML 19		sulfamethoxazole-trimethoprim SUSP	36
SPIKEVAX 6M-11Y SUSY 25 MCG/0.25ML	104	sucralfate SUSP	100	sulfamethoxazole-trimethoprim TABS	36
SPIKEVAX SUSY	104	sucralfate TABS	100	sulfasalazine TABS	66
spinosad	62	SUFLAVE	69	sulfasalazine TBEC	66
SPIRIVA HANDIHALER CAPS IN (tiotropium bromide)	13	SULAR 8.5 MG, 17 MG, 34 MG (nisoldipine)	47	sulindac TABS	6
SPIRIVA RESPIMAT AERS IN	13	sulfacetamide sodium (acne)	52	SUMADAN	53
spironolactone & hydrochlorothiazide	63	sulfacetamide sodium (ophth) OINT 92		SUMADAN WASH LIQD (sulfacetamide sodium w/ sulfur) ..	53
spironolactone TABS	63	sulfacetamide sodium (ophth) SOLN . 92		SUMADAN XLT KIT	53
SPORANOX CAPS (itraconazole) .	31	sulfacetamide sodium GEL	55	sumatriptan 20 MG/ACT	77
SPRITAM TB3D	19	sulfacetamide sodium LIQD	55	sumatriptan 5 MG/ACT	77
STAMARIL SUSR	104	sulfacetamide sodium SHAM 10 % 55		sumatriptan succinate SOAJ 6 MG/0.5ML	77
STARJEMZA SOLN SC 45 MG/0.5ML	55				
STARJEMZA SOSY SC 45 MG/0.5ML, 90 MG/ML	55				
STEGLATRO	29				
STEGLUJAN	24				
STELARA SOSY	55				

sumatriptan succinate SOLN 6 MG/0.5ML77	SYMLINPEN 60 SOPN24	tazarotene CREA55
sumatriptan succinate TABS77	SYMPAZAN FILM18	TAZAROTENE FOAM53
sumatriptan-naproxen sodium76	SYMPROIC66	tazarotene GEL55
SUMAXIN CP53	SYMTUZA44	TECFIDERA CDPK (dimethyl fumarate)98
SUMAXIN PADS53	SYNALAR CREA (fluocinolone acetone)58	TECFIDERA CPDR (dimethyl fumarate)98
SUPER ANTIOXIDANT CAPS86	SYNALAR OINT (fluocinolone acetone)58	TECHLITE INSULIN SYRINGE ...73
SUPER D-ZINC-SELENIUM- COPPER TABS86	SYNALAR SOLN (fluocinolone acetone)58	TEGRETOL SUSP (carbamazepine) . 19
SUPERIOR MENS MULTI TABS ..86	SYNJARDY TABS24	TEGRETOL TABS (carbamazepine) . 19
SUPERIOR WOMENS MULTI TABS 86	SYNJARDY XR TB2424	TEGRETOL-XR TB12 (carbamazepine)19
SUPPORT-500 CAPS86	SYNVERA TABS89	TEGSEDl99
SUPREP BOWEL PREP KIT (sodium sulfate-potassium sulfate- magnesium sulfate)70	SYSTANE ICAPS AREDS2 TABS 86	TEKTURNa (aliskiren fumarate) ..35
SURE COMFORT INSULIN SYRINGE73	TACLONEX SUSP (calcipotriene- betamethasone dipropionate)58	telmisartan34
SUTAB70	tacrolimus (topical) OINT 0.03 % ..61	telmisartan-amlodipine35
SYMBICORT (budesonide- formoterol fumarate dihydrate)16	tacrolimus (topical) OINT 0.1 % ...61	telmisartan-hydrochlorothiazide ...35
SYMBICORT 160 MCG/ACT-4.5 MCG/ACT (budesonide-formoterol fumarate dihydrate)16	tacrolimus CAPS79	temazepam 15 MG, 30 MG69
SYMBICORT 80 MCG/ACT-4.5 MCG/ACT (budesonide-formoterol fumarate dihydrate)16	tadalafil (pulmonary hypertension) TABs48	temazepam 7.5 MG, 22.5 MG69
SYMBRAVO TABS PO76	TADLIQ SUSP48	tenofovir disoproxil fumarate TABS 44
SYMDEKO99	tafluprost94	TENORETIC 100 (atenolol & chlorthalidone)35
SYMFI (efavirenz-lamivudine- tenofovir disoproxil fumarate)44	TALTZ SOAJ55	TENORETIC 50 (atenolol & chlorthalidone)35
SYMFI LO (efavirenz-lamivudine- tenofovir disoproxil fumarate)44	TALTZ SOSY55	TENORMIN TABS (atenolol)46
SYMLINPEN 120 SOPN24	tamoxifen citrate TABS37	terazosin hcl34
	tamsulosin hcl67	terbinafine hcl (topical) CREA54
	TARPEYO CPDR50	terbinafine hcl TABS31
	TASCENSO ODT98	terbutaline sulfate TABS16
	tasimelteon CAPS69	terconazole vaginal CREA104
	tavaborole54	
	TAVNEOS67	

terconazole vaginal SUPP	104	theophylline TB12 300 MG, 450 MG .	16	TICOVAC	104
teriflunomide	98	theophylline TB24	16	timolol	91
teriparatide SOPN	64	THERA TABS	88	timolol maleate (ophth) SOLG	91
TERIPARATIDE SOPN	64	THERAGRAN-M ADVANCED 50		timolol maleate (ophth) SOLN 0.5 % .	91
TESTIM GEL TD (testosterone) ...	11	PLUS TABS	86	timolol maleate (ophth) SOLN	91
testosterone cypionate SOLN IM 100		THERAGRAN-M ADVANCED TABS .	86	timolol maleate TABS	46
MG/ML	11	THERAGRAN-M PREMIER 50 PLUS		TIMOPTIC OCUDOSE SOLN (timolol	
testosterone cypionate SOLN IM 200		TABS	86	maleate (ophth))	91
MG/ML	11	THERAGRAN-M PREMIER TABS	86	tinidazole	35
testosterone enanthate SOLN IM ..	11	THERAGRAN-M TABS	86	tioconazole vaginal 6.5 %	104
testosterone GEL TD 1 %, 10		THERA-M PLUS MV W/BETA-		tiotropium bromide CAPS IN 18 MCG	
MG/ACT, 20.25 MG/1.25GM, 25		CAROT TABS	86		13
MG/2.5GM, 40.5 MG/2.5GM	12	THERA-M TABS	86	TIVICAY PD TBSO	44
testosterone GEL TD 1 %, 50		THERAMILL FORTE CAPS	86	TIVICAY TABS 50 MG	44
MG/5GM	11	THERANATAL LACTATION ONE		tizanidine hcl CAPS	90
testosterone GEL TD 1.62 %, 1.62 %		CAPS	86	tizanidine hcl TABS	90
.....	11	THERA-TABS M TABS	86	TM-DAILY VITE TABS	88
testosterone SOLN	12	THERA-VITE MAX-M TABS	87	TOBI NEBU (tobramycin)	3
TETANUS-DIPHThERIA TOXOIDS		THEREMS TABS	88	TOBI PODHALER CAPS	3
TD SUSP	100	THEREMS-M TABS	87	TOBRADEX OINT	93
tetrabenazine	97	thiamine hcl TABS 100 MG	105	TOBRADEX ST SUSP	93
tetracaine hcl (ophth)	92	thiamine hcl TABS 50 MG, 250 MG	105	tobramycin (ophth) SOLN	92
TETRACAINE HCL 0.5 %	92	thiamine mononitrate TABS 100 MG .	105	tobramycin NEBU	3
tetracycline hcl CAPS	99	thioridazine hcl	41	tobramycin sulfate SOLN IJ 1.2	
TETRACYCLINE HCL TABS	99	thiothixene	42	GM/30ML, 10 MG/ML, 80 MG/2ML .	3
tetrahydrozoline hcl (ophth) 0.05 %	92	THYROID TABS 15 MG, 30 MG, 60		tobramycin sulfate SOLR	3
TEZRULY PO 1 MG/ML	34	MG, 90 MG, 120 MG	99	tobramycin-dexamethasone SUSP	93
TEZSPIRE SOAJ	13	tiagabine hcl	20	TOBREX OINT	92
TEZSPIRE SOSY	13	ticagrelor 60 MG, 90 MG	68	tolmetin sodium CAPS	6
THEO-24 CP24	16			tolmetin sodium TABS 600 MG	6
theophylline ELIX	16				
theophylline SOLN	16				

tolnaftate CREA	54	TOPROL XL TB24 25 MG, 50 MG, 100 MG (metoprolol succinate)	46	tranylcypromine sulfate	21
tolterodine tartrate CP24	101	toremifene citrate	37	TRAVATAN Z SOLN (travoprost) ..	94
tolterodine tartrate TABS	101	torsemide TABS 20 MG	63	travoprost SOLN	94
TONMYA SUBL SL 2.8 MG	97	torsemide TABS 5 MG, 10 MG, 100 MG	63	TRAZIMERA 420 MG	37
TOPAMAX SPRINKLE CPSP 15 MG (topiramate)	19	TOSYMRA	77	trazodone hcl TABS 300 MG	23
TOPAMAX SPRINKLE CPSP 25 MG (topiramate)	19	TOUJEO MAX SOLOSTAR SOPN 29		trazodone hcl TABS 50 MG, 100 MG, 150 MG	23
TOPAMAX TABS 100 MG (topiramate)	19	TOUJEO SOLOSTAR SOPN	29	TRELEGY ELLIPTA	16
TOPAMAX TABS 200 MG (topiramate)	19	TOVIAZ (fesoterodine fumarate) 101		TREMFYA ONE-PRESS SOPN SC 100 MG/ML	55
TOPAMAX TABS 25 MG, 50 MG (topiramate)	19	TRACLEER TABS (bosentan)	47	TREMFYA PEN SOAJ 100 MG/ML 55	
TOPAMAX TABS 25 MG, 50 MG (topiramate)	19	TRACLEER TBSO 32 MG (bosentan)	48	TREMFYA PEN SOAJ SC 200 MG/2ML	66
TOPICORT CREA (desoximetasone)	58	TRADJENTA	25	TREMFYA SOSY SC	66
TOPICORT GEL (desoximetasone) 58		tramadol hcl CP24 100 MG, 200 MG, 300 MG	9	TREMFYA-CD/UC INDUCTION SOAJ SC 200 MG/2ML	66
TOPICORT OINT (desoximetasone) . 58		TRAMADOL HCL SOLN (tramadol hcl)	9	TRESIBA FLEXTOUCH SOPN 100 UNIT/ML	29
TOPICORT SPRAY LIQD (desoximetasone)	58	tramadol hcl SOLN	9	TRESIBA FLEXTOUCH SOPN 200 UNIT/ML	29
topiramate CP24	19	tramadol hcl TABS 25 MG	9	TRESIBA SOLN	29
topiramate CPSP 15 MG	19	tramadol hcl TABS 50 MG	9	tretinoin CREA 0.025 %, 0.05 %, 0.1 %	53
topiramate CPSP 25 MG	19	tramadol hcl TABS 75 MG, 100 MG 9		tretinoin GEL 0.01 %	53
topiramate CPSP 50 MG	19	tramadol hcl TB24	9	tretinoin GEL 0.025 %	53
topiramate CS24	19	tramadol-acetaminophen	10	tretinoin GEL 0.05 %	53
topiramate SOLN 25 MG/ML	19	trandolapril 1 MG, 2 MG	33	tretinoin GEL 0.05 %	53
topiramate TABS 100 MG	20	trandolapril 4 MG	33	tretinoin microsphere	53
topiramate TABS 200 MG	19	trandolapril-verapamil hcl	35	TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	37
topiramate TABS 25 MG, 50 MG ..	19	tranexamic acid TABS	68	triamcinolone acetonide (mouth) ..	79
TOPROL XL TB24 200 MG (metoprolol succinate)	46	TRANSDERM SCOP 1 MG/3DAYS (scopolamine)	30	triamcinolone acetonide (nasal) AERO	90
		TRANSDERM-SCOP (scopolamine) 30			

triamcinolone acetonide (topical) AERS58	20	TRUMENBA 0.5 ML 102
triamcinolone acetonide (topical) CREA 0.025 %58	trimethobenzamide hcl CAPS 30	TRUVADA 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG (emtricitabine-tenofovir disoproxil fumarate)44
triamcinolone acetonide (topical) CREA 0.1 %58	trimethoprim TABS35	TRUVADA 200 MG-300 MG (emtricitabine-tenofovir disoproxil fumarate)44
triamcinolone acetonide (topical) CREA 0.5 %58	TRINTELLIX23	TRUXIMA37
triamcinolone acetonide (topical) LOTN58	TRIUMEQ PD TBSO44	TRYPTYR SOLN OP 0.003 %94
triamcinolone acetonide (topical) OINT 0.025 %, 0.5 %58	TRIUMEQ TABS44	TUDORZA PRESSAIR14
triamcinolone acetonide (topical) OINT 0.05 %, 0.1 %58	TROKENDI XR CP24 (topiramate) 20	T-VITES TABS87
triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG63	tropicamide SOLN 91	TWINRIX SUSY 104
triamterene & hydrochlorothiazide TABS 25 MG-37.5 MG63	tropium chloride CP24101	TWYNEO53
triamterene & hydrochlorothiazide TABS 50 MG-75 MG63	tropium chloride TABS 101	TYBLUME CHEW49
triazolam69	TRUE COMFORT INSULIN SYRINGE73	TYBOST44
TRIBENZOR (olmesartan medoxomil-amlodipine- hydrochlorothiazide)35	TRUE COMFORT PRO INSULIN SYR73	TYENNE SOAJ5
TRICOR TABS 145 MG (fenofibrate) . 32	TRUE METRIX AIR GLUCOSE METER KIT72	TYENNE SOSY5
trifluoperazine hcl TABS41	TRUE METRIX BLOOD GLUCOSE TEST STRP62	TYMLOS64
trifluridine92	TRUE METRIX METER KIT72	TYPHIM VI SOLN 102
trihexyphenidyl hcl SOLN38	TRUE MULTIVITAMIN TABS88	TYPHIM VI SOSY 102
trihexyphenidyl hcl TABS38	TRUELYTE SOLN78	TYRUKO CONC IV 300 MG/15ML 98
TRIJARDY XR24	TRUEPLUS 5-BEVEL PEN NEEDLES73	TYRVAYA91
TRIKAFTA TBPK99	TRUEPLUS GLUCOSE CHEW ...25	UBRELVY76
TRILEPTAL SUSP (oxcarbazepine) 20	TRUEPLUS GLUCOSE ON THE GO CHEW25	UDAMIN SP TABS 12.5 MG-1000 MCG-250 MCG-2.5 MG-17 MG-7.5 MG-100 MCG-75 UNIT-320 MG ...87
TRILEPTAL TABS (oxcarbazepine)	TRUEPLUS INSULIN SYRINGE ..73	ULORIC (febuxostat)67
	TRUEPLUS LANCETS 28G 72	ULTRA BONEUP TABS87
	TRUEPLUS LANCETS 30G 72	ULTRA COMFORT INSULIN SYRINGE74
	TRUEPLUS LANCETS 33G 72	ULTRA FLO INSULIN SYR 1/2 UNIT74
	TRUEPLUS PEN NEEDLES74	
	TRULICITY26	

ULTRA FLO INSULIN SYRINGE . 74	valproic acid CAPS 21	varenicline tartrate TABS 1 MG 98
ULTRACARE INSULIN SYRINGE 74	valsartan SOLN 34	varenicline tartrate TBPK 98
ULTRA-THIN II INS SYR SHORT . 74	valsartan TABS 34	VARIVAX SUSR 104
ULTRA-THIN II INSULIN SYRINGE . 74	valsartan-hydrochlorothiazide 35	VAXCHORA 102
ULTRAVATE LOTN 58	VALTOCO 10 MG DOSE LIQD 18	VAXNEUVANCE 102
umeclidinium-vilanterol 16	VALTOCO 15 MG DOSE LQPK 7.5 MG/0.1ML 18	VECTICAL (calcitriol (topical)) 55
UPSPRING HE NATAL TABS 89	VALTOCO 20 MG DOSE LQPK 10 MG/0.1ML 18	VELPHORO 67
UPTRAVI SOLR 48	VALTOCO 5 MG DOSE LIQD 18	VELSIPITY 66
UPTRAVI TABS 48	VALTREX 1 GM (valacyclovir hcl) . 45	VELTASSA 1 GM, 8.4 GM, 16.8 GM . 79
UPTRAVI TITRATION TBPK 48	VALTREX 500 MG (valacyclovir hcl) . 45	VEMLIDY 45
urea CREA 40 % 58	VANCOCIN CAPS 125 MG (vancomycin hcl) 36	VENEXA FE TABS 87
ursodiol CAPS 65	VANCOCIN CAPS 250 MG (vancomycin hcl) 36	VENEXA TABS 87
ursodiol TABS 250 MG 65	vancomycin hcl CAPS 125 MG 36	VENLAFAXINE BESYLATE ER .. 23
USTEKINUMAB 130 MG/26ML 66	vancomycin hcl CAPS 250 MG 36	venlafaxine hcl CP24 150 MG 23
USTEKINUMAB SOSY 45 MG/0.5ML, 90 MG/ML 55	vancomycin hcl SOLR IV 1 GM 36	venlafaxine hcl CP24 37.5 MG 23
USTEKINUMAB-AAUZ SOSY SC 45 MG/0.5ML, 90 MG/ML 55	VANCOMYCIN HCL SOLR IV 1 GM . 36	venlafaxine hcl CP24 75 MG 23
USTEKINUMAB-AEKN SOSY SC 45 MG/0.5ML, 90 MG/ML 55	vancomycin hcl SOLR IV 500 MG . 36	venlafaxine hcl TABS 23
USTEKINUMAB-TTWE 55	VANCOMYCIN HCL SOLR IV 500 MG 36	venlafaxine hcl TB24 150 MG 23
UZEDY SUSY 40	VANDAZOLE 104	venlafaxine hcl TB24 37.5 MG, 75 MG, 225 MG 23
VAFSEO 68	VANICREAM LOTN 61	VENTOLIN HFA AERS (albuterol sulfate) 16
valacyclovir hcl 1 GM 45	VAQTA 104	VENTRIXYL FE TABS 87
valacyclovir hcl 500 MG 45	VAQTA IM 25 UNIT/0.5ML, 50 UNIT/ML 104	VENTRIXYL TABS 87
valganciclovir hcl TABS 44	varenicline tartrate TABS 0.5 MG . 98	verapamil hcl CP24 100 MG, 200 MG, 300 MG 47
valproate sodium SOLN IV 100 MG/ML, 500 MG/5ML 21		verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG 47
valproate sodium SOLN PO 250 MG/5ML, 500 MG/10ML 21		VERAPAMIL HCL ER CP24 (verapamil hcl) 47
		verapamil hcl TABS 47

verapamil hcl TBCR	47	VISION OPTIMIZER CAPS	87	VITRANOL TABS	87
VEREGEN	53	VISTA ADVANCED AREDS2 FORMULA CAPS	87	VITRAX TABS	88
VERELAN PM CP24 (verapamil hcl) . 47		VISTA ADVANCED DRY EYE FORMULA CAPS	87	VITREXATE FE TABS	87
VERKAZIA EMUL	92	VITABASIC COMPLETE TABS ...	87	VITREXATE TABS	87
VERSACLOZ SUSP	40	VITABASIC SENIOR TABS	87	VITREXYL + IRON TABS	87
VESICARE LS SUSP	101	VITABEX CAPS	87	VITREXYL TABS	87
VESICARE TABS (solifenacin succinate)	101	VITABEX PLUS CAPS	87	VITRUM 50+ ADULT-MULTI TABS 87	
VEVYE SOLN	92	VITACORE TABS	87	VITRUM 50+ SENIOR MULTI TABS . 87	
VFEND SUSR (voriconazole)	31	VITAFOL-ONE CAPS	89	VIVITROL	30
VIBERZI	66	VITAMIN D3 COMPLETE TABS ..	87	VIVOTIF	102
VICTOZA (liraglutide)	26	vitamin e CAPS 180 MG, 200 UNIT, 400 UNIT, 90 MG, 90 MG, 180 MG 105		VOGELXO GEL TD (testosterone) 12	
vigabatrin PACK	20	vitamins w/ lipotropics CAPS	89	VOGELXO PUMP GEL TD (testosterone)	12
vigabatrin TABS	20	VITASANA TABS	87	voriconazole SUSR	31
VIGAFYDE SOLN	20	VITATRUM TABS	87	voriconazole TABS	31
VIGAMOX SOLN OP (moxifloxacin hcl (ophth))	92	VITEYES AREDS 2 FORMULA +MULTI CAPS	87	VORTEX HOLD CHMBR/MASK/CHILD DEVI	76
VIIBRYD TABS (vilazodone hcl) ...	23	VITEYES AREDS 2 FORMULA CAPS	87	VORTEX HOLD CHMBR/MASK/TODDLER DEVI ..	76
vilazodone hcl TABS	23	VITEYES CLASSIC ADVANCED CAPS	87	VORTEX VALVE CHAMBER-PEDI MASK DEVI	76
VIMPAT SOLN PO 10 MG/ML (lacosamide)	20	VITEYES CLASSIC MACULAR SUPPOR CAPS	87	VORTEX VALVED HOLDING CHAMBER DEVI	76
VIMPAT TABS (lacosamide)	20	VITEYES CLASSIC MULTIVITAMIN TABs	87	VOSEVI	45
VIOKACE TABS	62	VITEYES CLASSIC+OMEGA-3 CAPS	87	VRAYLAR CAPS	38
VIRACEPT TABS 250 MG	44	VITEYES OPTIC NERVE SUPPORT TABs	87	VTAMA	55
VIRACEPT TABS 625 MG	44	VITRAMYN TABS	87	VUMERITY	98
VIREAD POWD	44	VITRANOL FE TABS	87	VUSION (miconazole-zinc oxide- white petrolatum)	54
VIREAD TABS (tenofovir disoproxil fumarate)	44			VYNDAMAX	48
VIREAD TABS	44			VYONDYS 53	91
VIREXA TABS	88				
VISION HEALTH CAPS	87				

VYSCOXIA PO 10 MG/ML6	XATMEP SOLN PO37	YESINTEK SOSY55
VYTORIN (ezetimibe-simvastatin) 32	XCOPRI (250 MG DAILY DOSE) TBPK20	YF-VAX SUSR104
VYVANSE CAPS1	XCOPRI (350 MG DAILY DOSE) TBPK20	YUFLYMA (1 PEN) AJKT5
VYVANSE CHEW1	XCOPRI TABS20	YUFLYMA (2 PEN) AJKT5
VYZULTA94	XCOPRI TBPK20	YUFLYMA (2 SYRINGE) PSKT5
WAKIX2	XELJANZ SOLN3	YUFLYMA-CD/UC/HS STARTER AJKT5
warfarin sodium TABS16	XELJANZ TABS3	YUPELRI14
WEGOVY 0.25 MG/0.5ML, 0.5 MG/0.5ML, 1 MG/0.5ML2	XELJANZ XR TB243	YUSIMRY5
WEGOVY 1.7 MG/0.75ML, 2.4 MG/0.75ML2	XELSTRYM1	ZADITOR 0.035 % (ketotifen fumarate (ophth))94
WELCHOL PACK (colesevelam hcl) . 32	XEMBIFY95	zafirlukast14
WELCHOL TABS (colesevelam hcl) . 32	XENAZINE (tetrabenazine)97	zaleplon 10 MG69
WELLBUTRIN SR TB12 100 MG (bupropion hcl)21	XEPI53	zaleplon 5 MG69
WELLBUTRIN SR TB12 150 MG (bupropion hcl)21	XHANCE EXHU90	ZANAFLEX CAPS (tizanidine hcl) .90
WELLBUTRIN SR TB12 200 MG (bupropion hcl)21	XIGDUO XR (dapagliflozin propanediol-metformin hcl)24	ZANAFLEX CAPS90
WELLFOLA TABS87	XIGDUO XR 1000 MG-2.5 MG, 500 MG-10 MG, 500 MG-5 MG24	ZANAFLEX TABS 4 MG (tizanidine hcl)90
white petrolatum-mineral oil91	XIIDRA92	ZARONTIN CAPS (ethosuximide) .20
WINLEVI53	XOLAIR SOAJ13	ZARONTIN SOLN (ethosuximide) .20
WOMENS 50+ MULTI VITAMIN TABS87	XOLAIR SOSY 75 MG/0.5ML, 150 MG/ML13	ZARXIO68
XALATAN SOLN (latanoprost)94	XOLAIR SOSY13	ZAVZPRET76
XARELTO STARTER PACK TBPK 16	XOPENEX HFA (levalbuterol tartrate)16	ZEGALOGUE SOAJ25
XARELTO SUSR 1 MG/ML (rivaroxaban)16	XPHOZAH64	ZEGALOGUE SOSY25
XARELTO TABS 2.5 MG, 10 MG, 15 MG, 20 MG (rivaroxaban)16	XROMI SOLN PO 100 MG/ML68	ZEMBRACE SYMTOUCH SOAJ ..77
XARELTO TABS16	XULTOPHY24	ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 252600 UNIT-189600 UNIT-60000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-
	YELETS TEENAGE FORMULA TABS87	
	YESINTEK SOLN 45 MG/0.5ML ..55	

63000 UNIT-20000 UNIT	62	ZITHROMAX Z-PAK TABS		ZUBSOLV SUBL	11
ZEPATIER	45	(azithromycin)	70	ZUNVEYL TBEC PO 5 MG, 10 MG, 15 MG	96
ZEPOSIA 7-DAY STARTER PACK CPPK	98	ZITUVIMET TABS	24	ZURNAI IJ 1.5 MG/0.5ML	30
ZEPOSIA CAPS	98	ZITUVIMET XR TB24	24	ZURZUVAE	21
ZEPOSIA STARTER KIT CPPK ...	98	ZITUVIO	25	ZYFLO TABS	14
ZERVIAE	94	ZMA CLEAR SUSP	53	ZYLET	93
ZESTORETIC (lisinopril & hydrochlorothiazide)	35	ZOCOR TABS 10 MG, 20 MG, 40 MG (simvastatin)	33	ZYMFENTRA (1 PEN) AJKT	66
ZESTRIL TABS (lisinopril)	33	zolmitriptan SOLN 2.5 MG	77	ZYMFENTRA (2 PEN) AJKT	66
ZETIA (ezetimibe)	33	zolmitriptan SOLN 5 MG	77	ZYMFENTRA (2 SYRINGE) PSKT	66
ZIAGEN SOLN (abacavir sulfate) .	44	zolmitriptan TABS	77	ZYPITAMAG 2 MG, 4 MG	33
zidovudine CAPS	44	zolmitriptan TBDP	77	ZYPREXA RELPREVV	40
zidovudine SYRP	44	ZOLOFT CONC (sertraline hcl) ...	23	ZYPREXA TABS 2.5 MG, 5 MG (olanzapine)	40
zidovudine TABS	44	ZOLOFT TABS 100 MG (sertraline hcl)	23	ZYPREXA TABS 20 MG (olanzapine)	40
zileuton TB12	14	ZOLOFT TABS 25 MG, 50 MG (sertraline hcl)	23		
ZIMHI SOSY	30	ZOLPIDEM TARTRATE CAPS	69		
zinc oxide (topical) OINT 20 %	61	zolpidem tartrate SUBL	69		
ZIOPTAN (tafluprost)	94	zolpidem tartrate TABS	69		
ziprasidone hcl	38	zolpidem tartrate TBCR	69		
ziprasidone mesylate	38	ZOMACTON SOLR SC	64		
ZIRABEV	37	ZOMIG SOLN 2.5 MG (zolmitriptan) .	77		
ZITHROMAX SUSR 100 MG/5ML (azithromycin)	70	ZOMIG SOLN 5 MG (zolmitriptan) .	77		
ZITHROMAX SUSR 200 MG/5ML (azithromycin)	70	ZONISADE SUSP	20		
ZITHROMAX TABS 250 MG (azithromycin)	70	zonisamide CAPS	20		
ZITHROMAX TABS 500 MG (azithromycin)	70	ZORTRESS (everolimus (immunosuppressant))	79		
ZITHROMAX TRI-PAK TABS (azithromycin)	70	ZORYVE CREA EX	61		
		ZORYVE FOAM EX	61		
		ZTALMY	20		