

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 እርዳታ 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 5 MG, 10 MG</i>	P	QL(2 EA daily); AL(At least 3 yrs old)
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 2.5 MG, 7.5 MG, 15 MG, 20 MG, 30 MG</i>	NP	
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	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>	NC	QL(1 EA daily); AL(At least 6 yrs old)	EVEKEO ODT TBDP	NC	
<i>amphetamine-dextroamphetamine CP24 12.5 MG, 25 MG, 37.5 MG, 50 MG</i>	NP		EVEKEO TABS (<i>amphetamine sulfate</i>)	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)	<i>lisdexamfetamine dimesylate CAPS 10 MG</i>	NP	QL(1 EA daily)
<i>amphetamine-dextroamphetamine TABS</i>	P	QL(2 EA daily); AL(At least 3 yrs old)	<i>lisdexamfetamine dimesylate CAPS</i>	NP	Brand Preferred; QL(1 EA daily)
DEXEDRINE CP24 10 MG (<i>dextroamphetamine sulfate</i>)	NP	QL(2 EA daily); AL(At least 6 yrs old)	<i>lisdexamfetamine dimesylate CHEW</i>	NP	Brand Preferred
<i>dextroamphetamine sulfate CP24 10 MG, 15 MG</i>	NC	QL(2 EA daily); AL(At least 6 yrs old)	<i>lisdexamfetamine dimesylate CHEW</i>	NP	
<i>dextroamphetamine sulfate CP24 5 MG</i>	P	QL(1 EA daily); AL(At least 6 yrs old)	<i>methamphetamine hcl</i>	NP	
<i>dextroamphetamine sulfate CP24 10 MG, 15 MG</i>	P	QL(2 EA daily); AL(At least 6 yrs old)	MYDAYIS CP24 (<i>amphetamine-dextroamphetamine</i>)	NP	
<i>dextroamphetamine sulfate SOLN</i>	NP		VYVANSE CAPS	P	Brand Preferred; QL(1 EA daily)
			VYVANSE CHEW	P	Brand Preferred
			XELSTRYM	NP	
			Analeptics		
			<i>caffeine & sodium benzoate</i>	NC	
			CAFFEINE ANHYDROUS POWD	NC	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
CAFFEINE CITRATED POWD	NC	
<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
<i>caffeine citrate SOLN IV 60 MG/3ML</i>	NC	
CAFFEINE POWD	NC	RX/OTC
DOPRAM	NC	
Anorexiant Non-Amphetamine		
<i>diethylpropion hcl TABS</i>	NC	
<i>diethylpropion hcl TB24</i>	NC	
Anti-Obesity Agents		
IMCIVREE	NC	SP
<i>orlistat</i>	NC	
SAXENDA	NP	
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
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
ZEPBOUND SOAJ	NC	
ZEPBOUND SOLN	NC	
Attention-Deficit/Hyperactivity Disorder (ADHD) Agents		
<i>atomoxetine hcl</i>	P	AL(At least 6 yrs old)
<i>clonidine hcl (adhd) TB12</i>	P	
<i>clonidine hcl (adhd) TB12</i>	NC	
<i>guanfacine hcl (adhd)</i>	P	QL(1 EA daily); AL(At least 6 yrs old)
INTUNIV (<i>guanfacine hcl (adhd)</i>)	NP	QL(1 EA daily); AL(At least 6 yrs old)
ONYDA XR SUER	NP	

Drug Name	Drug Tier	Requirements/ Limits
QELBREE	NP	
STRATTERA (<i>atomoxetine hcl</i>)	NP	AL(At least 6 yrs old)
Dopamine and Norepinephrine Reuptake Inhibitors (DNRI)		
SUNOSI	NC	
Histamine H3-Receptor Antagonist/Inverse Agonists		
WAKIX	NC	SP
Stimulants - Misc.		
APTENSIO XR CP24 (<i>methylphenidate hcl</i>)	NP	
<i>armodafinil</i>	NP	
<i>armodafinil</i>	NC	
AZSTARYS	NP	
CONCERTA TBCR 18 MG, 27 MG, 54 MG (<i>methylphenidate hcl</i>)	NP	QL(1 EA daily); AL(At least 6 yrs old)
CONCERTA TBCR 36 MG (<i>methylphenidate hcl</i>)	NP	QL(2 EA daily); AL(At least 6 yrs old)
COTEMPLA XR-ODT TBED	NP	
DAYTRANA PTCH (<i>methylphenidate</i>)	P	Brand Preferred
<i>dexmethylphenidate hcl CP24</i>	P	
<i>dexmethylphenidate hcl TABS</i>	P	QL(2 EA daily); AL(At least 6 yrs old)
FOCALIN XR CP24 (<i>dexmethylphenidate hcl</i>)	NP	
FOCALIN TABS (<i>dexmethylphenidate hcl</i>)	NP	QL(2 EA daily); AL(At least 6 yrs old)
JORNAY PM CP24	NP	
METHYLIN SOLN (<i>methylphenidate hcl</i>)	NP	
<i>methylphenidate hcl CHEW</i>	NP	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>methylphenidate hcl CP24 10 MG, 20 MG, 30 MG, 40 MG, 60 MG</i>	P		RELEXXII TBCR 36 MG	NP	QL(2 EA daily); AL(At least 6 yrs old)
<i>methylphenidate hcl CP24</i>	NP		RITALIN LA CP24 (<i>methylphenidate hcl</i>)	NP	
<i>methylphenidate hcl CPCR</i>	P	QL(1 EA daily); AL(At least 6 yrs old)	RITALIN TABS 10 MG, 20 MG (<i>methylphenidate hcl</i>)	NP	QL(3 EA daily); AL(At least 3 yrs old)
<i>methylphenidate hcl SOLN</i>	P		RITALIN TABS 5 MG (<i>methylphenidate hcl</i>)	NP	QL(6 EA daily); AL(At least 3 yrs old)
<i>methylphenidate hcl TABS 5 MG</i>	P	QL(6 EA daily); AL(At least 3 yrs old)	ALLERGENIC EXTRACTS/BIOLOGICALS MISC		
<i>methylphenidate hcl TABS 10 MG, 20 MG</i>	P	QL(3 EA daily); AL(At least 3 yrs old)	Allergenic Extracts		
<i>methylphenidate hcl TB24 18 MG, 27 MG, 54 MG</i>	P	QL(1 EA daily)	GRASTEK SUBL	C	QL(1 EA daily); AL(At least 5 yrs old - Up to 65 yrs old)
<i>methylphenidate hcl TB24 36 MG</i>	P	QL(2 EA daily)	ODACTRA SUBL	NC	
<i>methylphenidate hcl TBCR 45 MG, 63 MG, 72 MG</i>	NP		ORALAIR SUBL	NC	
<i>methylphenidate hcl TBCR 10 MG, 20 MG, 36 MG</i>	P	QL(2 EA daily); AL(At least 6 yrs old)	PALFORZIA (12 MG DAILY DOSE) CSPK	NC	SP
<i>methylphenidate hcl TBCR 18 MG, 27 MG, 54 MG</i>	P	QL(1 EA daily); AL(At least 6 yrs old)	PALFORZIA (120 MG DAILY DOSE) CSPK	NC	SP
<i>methylphenidate PTCH</i>	NP	Brand Preferred	PALFORZIA (160 MG DAILY DOSE) CSPK	NC	SP
<i>modafinil</i>	NP		PALFORZIA (20 MG DAILY DOSE) CSPK	NC	SP
<i>modafinil</i>	NC		PALFORZIA (200 MG DAILY DOSE) CSPK	NC	SP
NUVIGIL (<i>armodafinil</i>)	NP		PALFORZIA (240 MG DAILY DOSE) CSPK	NC	SP
PROVIGIL (<i>modafinil</i>)	NP		PALFORZIA (3 MG DAILY DOSE) CSPK	NC	SP
QUILLICHEW ER CHER	P		PALFORZIA (300 MG MAINTENANCE) PACK	NC	SP
QUILLIVANT XR SRER	P		PALFORZIA (300 MG TITRATION) PACK	NC	SP
RELEXXII TBCR 45 MG, 63 MG, 72 MG (<i>methylphenidate hcl</i>)	NP		PALFORZIA (40 MG DAILY DOSE) CSPK	NC	SP
RELEXXII TBCR 45 MG, 63 MG, 72 MG	NP		PALFORZIA (6 MG DAILY DOSE) CSPK	NC	SP
RELEXXII TBCR 18 MG, 27 MG, 54 MG	NP	QL(1 EA daily); AL(At least 6 yrs old)	PALFORZIA (80 MG DAILY DOSE) CSPK	NC	SP

Drug Name	Drug Tier	Requirements/ Limits
PALFORZIA INITIAL DOSE 4-17YRS CSPK	NC	SP
PALFORZIA INITIAL ESCALATION CSPK	NC	SP
RAGWITEK SUBL	C	QL(1 EA daily); AL(At least 18 yrs old - Up to 65 yrs old)
ALTERNATIVE MEDICINES		
Alternative Medicine Combinations		
SLOWMAG MG CALM/SLEEP	NC	
AMEBICIDES		
Amebicides		
IDOQUINOL POWD	NC	
SOLOSEC	NP	
SOLOSEC	NP	ST
AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections		
Aminoglycosides		
AMIKACIN SULFATE POWD	NC	
<i>amikacin sulfate SOLN 1 GM/4ML, 500 MG/2ML</i>	NC	
ARIKAYCE	NP	SP
BETHKIS NEBU (<i>tobramycin</i>)	NP	SP
<i>gentamicin in saline 0.8 MG/ML-0.9 %, 1 MG/ML-0.9 %, 1.2 MG/ML-0.9 %, 1.6 MG/ML-0.9 %, 2 MG/ML-0.9 %</i>	NC	
<i>gentamicin sulfate IJ</i>	NC	
KITABIS PAK (W/ NEBULIZER) NEBU 300 MG/5ML (<i>tobramycin</i>)	NP	SP
<i>neomycin sulfate TABS</i>	NP	
<i>paromomycin sulfate</i>	NP	ST
STREPTOMYCIN SULFATE POWD	NC	

Drug Name	Drug Tier	Requirements/ Limits
<i>streptomycin sulfate SOLR</i>	NC	
TOBI PODHALER CAPS	PA	SP; PA
TOBI NEBU (<i>tobramycin</i>)	NP	SP
TOBRAMYCIN SULFATE POWD	NC	
<i>tobramycin sulfate SOLN IJ 2 GM/50ML</i>	NC	
<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>	NP	SP
<i>tobramycin NEBU</i>	PA	PA
<i>tobramycin NEBU</i>	PA	SP; PA
ZEMDRI	NC	
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

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-ADBM(CD/UC/HS STRT) AJKT	NP	SP
Anti-TNF-alpha - Monoclonal Antibodies			ADALIMUMAB-ADBM(PS/UV STARTER) AJKT	NP	SP
			ADALIMUMAB-FKJP (2 PEN) AJKT	NP	SP
			ADALIMUMAB-FKJP (2 SYRINGE) PSKT	NP	SP
			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 80 MG/0.8ML	P	QL(4 EA per 365 day(s) retail); AL(At least 2 yrs old); 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
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	NC	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	NP	SP			
ADALIMUMAB-ADAZ SOSY 10 MG/0.1ML	NP				
ADALIMUMAB-ADBM (2 PEN) AJKT	NP	SP			
ADALIMUMAB-ADBM (2 SYRINGE) PSKT	NP	SP			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
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	IDACIO-PSORIASIS STARTER AJKT	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	SIMLANDI (1 PEN) AJKT	NP	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	SIMLANDI (1 SYRINGE) PSKT	NP	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	SIMLANDI (2 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	SIMLANDI (2 SYRINGE) PSKT	NP	SP
HUMIRA-PSORIASIS/UEIT STARTER AJKT	P	QL(3 EA per 365 day(s) retail); AL(At least 2 yrs old); SP	SIMPONI ARIA SOLN	NC	SP
HYRIMOZ-CROHNS/UC STARTER SOAJ	NP	SP	SIMPONI SOAJ	NP	SP
HYRIMOZ-PED<40KG CROHN STARTER SOSY	NP	SP	SIMPONI SOSY	NP	SP
HYRIMOZ-PED>=40KG CROHN START SOSY	NP	SP	YUFLYMA (1 PEN) AJKT	NP	SP
HYRIMOZ-PLAQ PSOR/UEIT START SOAJ	NP	SP	YUFLYMA (2 PEN) AJKT	NP	SP
HYRIMOZ SOAJ	NP	SP	YUFLYMA (2 SYRINGE) PSKT	NP	SP
HYRIMOZ SOSY	NP	SP	YUFLYMA-CD/UC/HS STARTER AJKT	NP	SP
IDACIO (2 PEN) AJKT	NP	SP	YUSIMRY	NP	SP
IDACIO (2 SYRINGE) PSKT	NP	SP	Gold Compounds		
IDACIO-CROHNS/UC STARTER AJKT	NP	SP	AURANOFIN 3 MG	NC	
			RIDAURA	NC	
			Interleukin-1 Blockers		
			ARCALYST	NP	SP
			Interleukin-1 Receptor Antagonist (IL-1Ra)		
			KINERET SOSY	NP	SP
			Interleukin-6 Receptor Inhibitors		
			ACTEMRA ACTPEN SOAJ	NP	SP
			ACTEMRA SOLN	C	SP; PA
			ACTEMRA SOSY	NP	SP
			KEVZARA SOAJ	NP	SP
			KEVZARA SOSY	NP	SP
			TYENNE SOAJ	NP	SP
			TYENNE SOLN	NC	SP
			TYENNE SOSY	NP	SP
			Nonsteroidal Anti-inflammatory Agents (NSAIDs)		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ADVIL TABS (<i>ibuprofen</i>)	NC		<i>ibuprofen-acetaminophen</i> TABS	NC	
ALEVE ALL DAY STRONG TABS 220 MG (<i>naproxen sodium</i>)	NC	QL(2 EA daily)	<i>ibuprofen</i> CHEW	C	
ALEVE TABS (<i>naproxen sodium</i>)	NC	QL(2 EA daily)	<i>ibuprofen-famotidine</i>	NP	
ARTHROTEC TBEC (<i>diclofenac w/ misoprostol</i>)	NP		IBUPROFEN POWD	NC	
CALDOLOR SOLN	NC		<i>ibuprofen SUSP</i> 100 MG/5ML, 200 MG/10ML	NC	RX/OTC
CELEBREX (<i>celecoxib</i>)	NC	QL(2 EA daily); PA	<i>ibuprofen SUSP</i> 40 MG/ML, 50 MG/1.25ML	C	
<i>celecoxib</i>	C	QL(2 EA daily); PA	<i>ibuprofen SUSP</i> 100 MG/5ML, 200 MG/10ML	P	RX/OTC
COMBOGESIC SOLN	NC		<i>ibuprofen</i> TABS 200 MG	C	
DAYPRO TABS (<i>oxaprozin</i>)	NP		<i>ibuprofen</i> TABS 400 MG, 600 MG, 800 MG	P	
<i>diclofenac potassium</i> CAPS	NP		INDOMETHACIN SODIUM	NC	
<i>diclofenac potassium</i> TABS	NP		<i>indomethacin</i> CAPS 25 MG, 50 MG	P	
<i>diclofenac sodium</i> TB24	NC		<i>indomethacin</i> CPCR	NP	
<i>diclofenac sodium</i> TB24	P		INDOMETHACIN POWD	NC	
<i>diclofenac sodium</i> TBEC	NC		<i>indomethacin</i> SUPP	NP	
<i>diclofenac sodium</i> TBEC	P		<i>indomethacin</i> SUSP	NP	
<i>diclofenac w/ misoprostol</i> TBEC	NP		INFANTS ADVIL SUSP (<i>ibuprofen</i>)	NC	
<i>etodolac</i> CAPS	NP		<i>ketoprofen</i> CAPS 25 MG	NP	
<i>etodolac</i> TABS	NP		<i>ketoprofen</i> CP24	NP	
<i>etodolac</i> TB24	NP		<i>ketorolac tromethamine</i> SOLN IM 60 MG/2ML	NC	
FELDENE CAPS (<i>piroxicam</i>)	NP		KETOROLAC TROMETHAMINE SOLN IJ 30 MG/ML	NC	
<i>fenoprofen calcium</i> CAPS 400 MG	NP		<i>ketorolac tromethamine</i> TABS	P	QL(20 EA per 31 day(s) retail); AL(At least 17 yrs old)
FENOPROFEN CALCIUM POWD	NC		<i>meclofenamate sodium</i> CAPS	NP	
<i>fenoprofen calcium</i> TABS	NP		MECLOFENAMATE SODIUM POWD	NC	
FENOPRON CAPS	NP		<i>mefenamic acid</i> CAPS	NP	
FLURBIPROFEN POWD	NC				
<i>flurbiprofen</i> TABS 100 MG	NP				
<i>ibuprofen lysine</i>	NC				

Drug Name	Drug Tier	Requirements/ Limits
MEFENAMIC ACID POWD	NC	
<i>meloxicam CAPS</i>	NP	
<i>meloxicam TABS</i>	P	
<i>meloxicam TABS</i>	NC	
MOTRIN CHILDRENS CHEW (<i>ibuprofen</i>)	NC	
MOTRIN INFANTS DROPS SUSP (<i>ibuprofen</i>)	NC	
<i>nabumetone</i>	P	
NALFON CAPS (<i>fenoprofen calcium</i>)	NP	
NALFON TABS 600 MG	NP	
NAPRELAN TB24 (<i>naproxen sodium</i>)	NP	
NAPROSYN SUSP (<i>naproxen</i>)	NP	
NAPROTIN	NC	
NAPROXEN SODIUM POWD	NC	
<i>naproxen sodium TABS 220 MG</i>	C	QL(2 EA daily)
<i>naproxen sodium TABS 275 MG, 550 MG</i>	NP	
<i>naproxen sodium TB24</i>	NP	
<i>naproxen-esomeprazole magnesium</i>	NP	
NAPROXEN POWD	NC	
<i>naproxen SUSP</i>	P	
<i>naproxen TABS</i>	P	
<i>naproxen TBEC</i>	P	QL(2 EA daily)
<i>naproxen TBEC</i>	NC	QL(2 EA daily)
<i>oxaprozin TABS</i>	NP	
PHENYLBUTAZONE	NC	
<i>piroxicam CAPS</i>	P	
PIROXICAM POWD	NC	
RELAFEN DS	NP	
SULINDAC POWD	NC	
<i>sulindac TABS</i>	P	

Drug Name	Drug Tier	Requirements/ Limits
<i>tolmetin sodium CAPS</i>	NP	
<i>tolmetin sodium CAPS</i>	NC	
<i>tolmetin sodium TABS 600 MG</i>	NC	
<i>tolmetin sodium TABS 600 MG</i>	NP	
VIMOVO (<i>naproxen-esomeprazole magnesium</i>)	NP	
ZYNRELEF	NC	
Phosphodiesterase 4 (PDE4) Inhibitors		
OTEZLA TABS	NP	SP
OTEZLA TBPK	NP	SP
Pyrimidine Synthesis Inhibitors		
ARAVA (<i>leflunomide</i>)	NC	QL(1 EA daily)
<i>leflunomide</i>	C	QL(1 EA daily)
Selective Costimulation Modulators		
ORENCIA CLICKJECT SOAJ	NP	SP
ORENCIA SOLR	NC	SP
ORENCIA SOSY	NP	SP
Soluble Tumor Necrosis Factor Receptor Agents		
ENBREL MINI SOCT	P	QL(8 ML per 28 day(s) retail); AL(At least 2 yrs old); SP
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
ENBREL SOSY 25 MG/0.5ML	P	QL(4 ML per 28 day(s) retail); AL(At least 2 yrs old); SP
ENBREL SOSY 50 MG/ML	P	QL(8 ML per 28 day(s) retail); AL(At least 2 yrs old); SP

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions			<i>acetaminophen TABS 325 MG, 500 MG</i>	C	
Analgesic Combinations			<i>clonidine hcl (analgesia) EP</i>	NC	
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-300 MG</i>	NC		CLONIDINE HCL (BULK) XX	NC	
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG</i>	C	QL(4 EA daily)	FEVERALL JUNIOR STRENGTH SUPP	C	QL(12 EA per 31 day(s) retail)
<i>butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG</i>	C	QL(4 EA daily)	TYLENOL CHILDRENS CHEWABLES CHEW (<i>acetaminophen</i>)	NC	
<i>butalbital-acetaminophen CAPS 50 MG-300 MG</i>	NC		TYLENOL CHILDRENS PAIN + FEVER SUSP (<i>acetaminophen</i>)	NC	
<i>butalbital-acetaminophen TABS 50 MG-325 MG</i>	C		TYLENOL CHILDRENS SUSP (<i>acetaminophen</i>)	NC	
<i>butalbital-acetaminophen TABS 50 MG-300 MG</i>	NC		TYLENOL EXTRA STRENGTH TABS (<i>acetaminophen</i>)	NC	
<i>butalbital-aspirin-caffeine CAPS</i>	C	QL(4 EA daily)	TYLENOL FOR CHILDREN + ADULTS SUSP (<i>acetaminophen</i>)	NC	
<i>ESGIC TABS (butalbital-acetaminophen-caffeine)</i>	NC	QL(4 EA daily)	TYLENOL INFANTS PAIN+FEVER SUSP (<i>acetaminophen</i>)	NC	
Analgesics - Sodium Channel Pain Signal Inhibitors			TYLENOL TABS (<i>acetaminophen</i>)	NC	
JOURNAVX	NP		Salicylates		
Analgesics Other			ACETYL SALICYLIC ACID POWD	NC	RX/OTC
<i>acetaminophen CHEW</i>	C		<i>aspirin buffered (cal carb-mag carb-mag oxide)</i>	C	
<i>acetaminophen LIQD 160 MG/5ML</i>	C		<i>aspirin effervescent</i>	NC	
<i>acetaminophen SOLN IV 10 MG/ML, 1000 MG/100ML</i>	NC		<i>aspirin CHEW</i>	C	
<i>acetaminophen SOLN PO 160 MG/5ML, 325 MG/10.15ML, 650 MG/20.3ML</i>	C	QL(240 ML per fill retail)	ASPIRIN POWD	NC	RX/OTC
<i>acetaminophen SUPP 120 MG, 650 MG</i>	C	QL(12 EA per 31 day(s) retail)	ASPIRIN SUPP 300 MG	C	QL(12 EA per 31 day(s) retail)
<i>acetaminophen SUSP 160 MG/5ML, 650 MG/20.3ML</i>	C		<i>aspirin TABS 325 MG</i>	C	
			<i>aspirin TBEC 81 MG, 325 MG</i>	C	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
BUFFERIN (<i>aspirin buffered (cal carb-mag carb-mag oxide)</i>)	NC		FENTANYL CITRATE PF SOSY IJ	NC	Opioid Smart PA
DIFLUNISAL POWD	NC		<i>fentanyl citrate LPOP</i>	NP	Opioid Smart PA
<i>diflunisal TABS</i>	NP		FENTANYL CITRATE POWD	NC	Opioid Smart PA
DOLOBID TABS	NC		<i>fentanyl citrate SOLN IJ 50 MCG/ML, 100 MCG/2ML, 250 MCG/5ML, 500 MCG/10ML, 1000 MCG/20ML, 2500 MCG/50ML</i>	NC	Opioid Smart PA
ECOTRIN ARTHRTIS PAIN TBEC (<i>aspirin</i>)	NC		<i>fentanyl citrate SOSY IJ</i>	NC	Opioid Smart PA
ECOTRIN TBEC (<i>aspirin</i>)	NC		FENTANYL CITRATE SOSY IJ 100 MCG/2ML	NC	Opioid Smart PA
<i>salsalate</i>	C		<i>fentanyl citrate TABS 200 MCG, 400 MCG, 600 MCG, 800 MCG</i>	NP	Opioid Smart PA
SODIUM SALICYLATE CRYST	NC		<i>fentanyl PT72 37.5 MCG/HR, 62.5 MCG/HR, 87.5 MCG/HR</i>	NP	
SODIUM SALICYLATE POWD	NC		<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)
ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions			FENTORA TABS (<i>fentanyl citrate</i>)	NP	Opioid Smart PA
Opioid Agonists			<i>hydrocodone bitartrate CP12</i>	NP	Opioid Smart PA
ACTIQ LPOP (<i>fentanyl citrate</i>)	NC	Opioid Smart PA	<i>hydrocodone bitartrate T24A</i>	NP	Opioid Smart PA
CODEINE PHOSPHATE POWD	NC	Opioid Smart PA	HYDROMORPHONE HCL (BULK) SOLN XX	NC	Opioid Smart PA
<i>codeine sulfate TABS 30 MG</i>	P	Opioid Smart PA; AL(At least 12 yrs old)	HYDROMORPHONE HCL PF SOLN IJ	NC	Opioid Smart PA
CODEINE SULFATE TABS	P	Opioid Smart PA; AL(At least 12 yrs old)	<i>hydromorphone hcl LIQD</i>	P	Opioid Smart PA
CONZIP CP24 (<i>tramadol hcl</i>)	NP	Opioid Smart PA	HYDROMORPHONE HCL POWD	NC	Opioid Smart PA
DEMEROL SOLN IJ	NC	Opioid Smart PA			
DILAUDID LIQD (<i>hydromorphone hcl</i>)	NP	Opioid Smart PA			
DILAUDID TABS 8 MG (<i>hydromorphone hcl</i>)	NP	Opioid Smart PA; QL(4 EA daily)			
DILAUDID TABS 2 MG (<i>hydromorphone hcl</i>)	NP	Opioid Smart PA; QL(8 EA daily)			
DILAUDID TABS 4 MG (<i>hydromorphone hcl</i>)	NP	Opioid Smart PA			
FENTANYL CITRATE (BULK) SOLN XX	NC	Opioid Smart PA			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>hydromorphone hcl SOLN IJ 0.2 MG/ML, 1 MG/ML, 2 MG/ML, 4 MG/ML, 10 MG/ML, 50 MG/5ML, 500 MG/50ML</i>	NC	Opioid Smart PA	<i>methadone hcl TBSO</i>	NC	Opioid Smart PA
HYDROMORPHONE HCL SOLN IJ	NC	Opioid Smart PA	MORPHINE SULFATE (BULK) SOLN XX	NC	Opioid Smart PA
HYDROMORPHONE HCL SUPP	P	Opioid Smart PA; QL(2 EA daily)	MORPHINE SULFATE (PF) SOLN IV 1 MG/ML, 2 MG/ML, 4 MG/ML, 8 MG/ML, 10 MG/ML	NC	Opioid Smart PA
<i>hydromorphone hcl TABS 4 MG</i>	P	Opioid Smart PA	<i>morphine sulfate beads</i>	NP	Opioid Smart PA
<i>hydromorphone hcl TABS 2 MG</i>	P	Opioid Smart PA; QL(8 EA daily)	<i>morphine sulfate for continuous microinfusion</i>	NC	Opioid Smart PA
<i>hydromorphone hcl TABS 8 MG</i>	P	Opioid Smart PA; QL(4 EA daily)	<i>morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG</i>	NP	Opioid Smart PA
<i>hydromorphone hcl TB24</i>	NP	Opioid Smart PA	MORPHINE SULFATE POWD	NC	Opioid Smart PA
HYSINGLA ER T24A	NP	Opioid Smart PA	<i>morphine sulfate SOLN IJ 0.5 MG/ML, 1 MG/ML</i>	NC	Opioid Smart PA
<i>levorphanol tartrate TABS</i>	NP	Opioid Smart PA	<i>morphine sulfate SOLN PO 10 MG/5ML, 20 MG/5ML</i>	P	Opioid Smart PA; QL(16.67 ML daily)
MEPERIDINE HCL POWD	NC	Opioid Smart PA	<i>morphine sulfate SOLN IV 2 MG/ML</i>	NC	
<i>meperidine hcl SOLN PO 50 MG/5ML</i>	P	Opioid Smart PA	<i>morphine sulfate SOLN PO 20 MG/ML, 100 MG/5ML</i>	P	Opioid Smart PA
<i>meperidine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML</i>	NC	Opioid Smart PA	MORPHINE SULFATE SOLN IV 50 MG/ML	NC	Opioid Smart PA
<i>meperidine hcl TABS 50 MG</i>	P	Opioid Smart PA; QL(6 EA daily)	<i>morphine sulfate SUPP</i>	P	Opioid Smart PA; QL(0.78 EA daily)
<i>methadone hcl CONC</i>	NC	Opioid Smart PA	<i>morphine sulfate TABS</i>	P	Opioid Smart PA; QL(6 EA daily)
METHADONE HCL POWD	NC	Opioid Smart PA	<i>morphine sulfate TBCR</i>	P	Opioid Smart PA; QL(3 EA daily)
<i>methadone hcl SOLN IJ 10 MG/ML</i>	NC	Opioid Smart PA	<i>morphine sulfate TBCR</i>	NC	Opioid Smart PA; QL(3 EA daily)
<i>methadone hcl TABS 10 MG</i>	C	Opioid Smart PA; QL(10 EA daily); PA	MS CONTIN TBCR (<i>morphine sulfate</i>)	NP	Opioid Smart PA; QL(3 EA daily)
<i>methadone hcl TABS 5 MG</i>	C	Opioid Smart PA; QL(4 EA daily); PA			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
OLINVYK	NC	Opioid Smart PA	ROXICODONE TABS 15 MG, 30 MG (<i>oxycodone hcl</i>)	NP	Opioid Smart PA; QL(6 EA daily)
<i>oxycodone hcl CAPS</i>	P	Opioid Smart PA; QL(6 EA daily)	ROXYBOND TABA	NP	Opioid Smart PA
<i>oxycodone hcl CAPS</i>	NC	Opioid Smart PA; QL(6 EA daily)	SUFENTANIL CITRATE (BULK) SOLN XX	NC	Opioid Smart PA
<i>oxycodone hcl CONC 100 MG/5ML</i>	NC	Opioid Smart PA; QL(4 ML daily)	<i>sufentanil citrate SOLN IV 50 MCG/ML</i>	NC	Opioid Smart PA
<i>oxycodone hcl CONC 100 MG/5ML</i>	P	Opioid Smart PA; QL(4 ML daily)	<i>tramadol hcl CP24 100 MG, 200 MG, 300 MG</i>	NP	Opioid Smart PA
<i>oxycodone hcl CONC 100 MG/5ML</i>	P	QL(4 ML daily)	<i>tramadol hcl SOLN</i>	NP	Opioid Smart PA
OXYCODONE HCL POWD	NC	Opioid Smart PA	TRAMADOL HCL SOLN (<i>tramadol hcl</i>)	NP	Opioid Smart PA
<i>oxycodone hcl SOLN</i>	P	Opioid Smart PA	<i>tramadol hcl TABS 75 MG, 100 MG</i>	NP	
<i>oxycodone hcl SOLN</i>	NC	Opioid Smart PA	<i>tramadol hcl TABS 50 MG</i>	P	Opioid Smart PA; QL(8 EA daily); AL(At least 18 yrs old)
<i>oxycodone hcl SOLN</i>	P		<i>tramadol hcl TABS 50 MG</i>	P	QL(8 EA daily); AL(At least 18 yrs old)
<i>oxycodone hcl T12A 10 MG, 20 MG, 40 MG</i>	NP	Brand Preferred; Opioid Smart PA	<i>tramadol hcl TABS 25 MG</i>	P	Opioid Smart PA
<i>oxycodone hcl T12A 10 MG, 20 MG, 40 MG, 80 MG</i>	NC	Brand Preferred; Opioid Smart PA	<i>tramadol hcl TB24</i>	P	Opioid Smart PA
<i>oxycodone hcl TABS 10 MG, 15 MG, 30 MG</i>	NC	Opioid Smart PA; QL(6 EA daily)	<i>tramadol hcl TB24</i>	NP	Opioid Smart PA
<i>oxycodone hcl TABS</i>	P	Opioid Smart PA; QL(6 EA daily)	Opioid Combinations		
OXYCONTIN T12A	P	Brand Preferred; Opioid Smart PA	<i>acetaminophen w/ codeine SOLN</i>	P	QL(30 ML daily); AL(At least 12 yrs old)
<i>oxymorphone hcl TABS</i>	NP	Opioid Smart PA	<i>acetaminophen w/ codeine SOLN</i>	P	Opioid Smart PA; QL(30 ML daily); AL(At least 12 yrs old)
<i>oxymorphone hcl TABS</i>	NC	Opioid Smart PA	<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>oxymorphone hcl TB12</i>	NP	Opioid Smart PA			
<i>remifentanil hcl</i>	NC	Opioid Smart PA			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG</i>	NP	Opioid Smart PA	<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-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	P	QL(10 EA daily)
<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 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 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)	<i>hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG</i>	NC	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>hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG, 7.5 MG-200 MG</i>	P	Opioid Smart PA
FIORICET/CODEINE 30 MG-40 MG-50 MG-300 MG (<i>butalbital-acetaminophen-caffeine w/ codeine</i>)	NP	Opioid Smart PA	NALOCET TABS	NP	Opioid Smart PA
<i>hydrocodone-acetaminophen SOLN 325 MG/15ML-10 MG/15ML</i>	P	Opioid Smart PA	<i>oxycodone w/ acetaminophen SOLN</i>	NP	Opioid Smart PA
<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-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	P	Opioid Smart PA; QL(6 EA daily)
<i>hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	NC	Opioid Smart PA; QL(10 EA daily)	<i>oxycodone w/ acetaminophen TABS 325 MG-2.5 MG</i>	P	Opioid Smart PA
<i>hydrocodone-acetaminophen TABS 325 MG-2.5 MG</i>	P		<i>oxycodone w/ acetaminophen TABS</i>	P	QL(6 EA daily)
			<i>oxycodone w/ acetaminophen TABS 325 MG-2.5 MG</i>	NC	Opioid Smart PA
			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)
			PERCOCET TABS 325 MG-2.5 MG (<i>oxycodone w/ acetaminophen</i>)	NP	Opioid Smart PA
			PROLATE SOLN	NP	Opioid Smart PA

Drug Name	Drug Tier	Requirements/ Limits
PROLATE TABS	NP	Opioid Smart PA
SEGLENTIS	NP	Opioid Smart PA
<i>tramadol-acetaminophen</i>	P	Opioid Smart PA; QL(4 EA daily); AL(At least 18 yrs old)
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
BUPRENEX SOLN (<i>buprenorphine hcl</i>)	NC	Opioid Smart PA
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 2 MG-8 MG, 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 FILM SL 0.5 MG-2 MG, 1 MG-4 MG</i>	NP	Brand Preferred; 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-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 SOLN</i>	NC	Opioid Smart PA
<i>buprenorphine hcl SUBL</i>	P	Opioid Smart PA

Drug Name	Drug Tier	Requirements/ Limits
<i>buprenorphine PTWK</i>	NP	Brand Preferred; Opioid Smart PA
<i>butorphanol tartrate NA 10 MG/ML</i>	NP	Opioid Smart PA
<i>butorphanol tartrate IJ 1 MG/ML, 2 MG/ML</i>	NC	Opioid Smart PA
BUTRANS PTWK (<i>buprenorphine</i>)	P	Brand Preferred; Opioid Smart PA
<i>nalbuphine hcl</i>	NC	Opioid Smart PA
<i>pentazocine w/ naloxone hcl</i>	NP	Opioid Smart PA
SUBLOCADE SOSY	P	Opioid Smart PA; SP
SUBOXONE FILM SL 2 MG-8 MG, 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)
SUBOXONE FILM SL 0.5 MG-2 MG, 1 MG-4 MG (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	P	Brand Preferred; Opioid Smart PA; QL(3 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		
Anabolic Steroids		
<i>oxandrolone</i>	NC	
Androgens		
ANDROGEL PUMP GEL TD (<i>testosterone</i>)	NP	
AZMIRO SOSY	NC	
<i>danazol CAPS</i>	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
DANAZOL POWD	NC		CORTENEMA (hydrocortisone intrarectal))	NC	
JATENZO CAPS	NC		CORTIFOAM EX 10 %	NC	
KYZATREX CAPS 200 MG	NC		hydrocortisone (intrarectal)	C	
<i>methyltestosterone CAPS</i>	NC		UCERIS (budesonide intrarectal))	NP	
METHYLTESTOSTERON E POWD	NC		Rectal Combinations		
<i>methyltestosterone TABS</i>	C		ANALPRAM HC SINGLES CREA EX (hydrocortisone acetate w/ pramoxine)	NC	
NATESTO GEL NA	NP		hydrocortisone acetate w/ pramoxine CREA EX	NC	
TESTIM GEL TD (testosterone)	PA	Brand Preferred; PA	LIDOCAINE- HYDROCORTISONE ACE GEL	NC	
<i>testosterone cypionate SOLN IM 200 MG/ML</i>	C	QL(4 ML per 31 day(s) retail)	lidocaine-hydrocortisone acetate (rectal) CREA EX	NC	
<i>testosterone cypionate SOLN IM 100 MG/ML</i>	C	QL(0.2858 ML daily)	lidocaine-hydrocortisone acetate (rectal) KIT	NC	
<i>testosterone enanthate SOLN IM</i>	C	QL(0.1429 ML daily)	PROCTOFOAM HC FOAM EX	NC	
<i>testosterone GEL TD 1.62 %, 10 MG/ACT</i>	NC		Rectal Steroids		
<i>testosterone GEL TD 1 %, 50 MG/5GM</i>	NP	Brand Preferred	ANUSOL-HC EX (hydrocortisone (rectal))	NC	
<i>testosterone GEL TD 1 %, 10 MG/ACT, 20.25 MG/1.25GM, 25 MG/2.5GM, 40.5 MG/2.5GM</i>	NP		hydrocortisone (rectal) EX 2.5 %	C	
<i>testosterone GEL TD 1.62 %, 1.62 %</i>	PA	PA	hydrocortisone (rectal) EX 1 %	C	1 package(s) per fill retail; RX/OTC
<i>testosterone SOLN</i>	NP		hydrocortisone acetate (rectal)	NC	
TLANDO CAPS	NC		PREPARATION H EX 1 %	C	1 package(s) per fill retail; RX/OTC
UNDECATREX CAPS	NC		PREPARATION H SOOTHING RELIEF EX 1 %	C	1 package(s) per fill retail; RX/OTC
VOGELXO PUMP GEL TD (testosterone)	NP		Vasodilating Agents		
VOGELXO GEL TD (testosterone)	NP	Brand Preferred	nitroglycerin (intra-anal)	NC	
XYOSTED SOAJ	NC		ANTACIDS		
ANORECTAL AND RELATED PRODUCTS - Rectal Drugs to Treat Pain, Swelling and Itching					
Intrarectal Steroids					
<i>budesonide (intrarectal)</i>	NP				

Drug Name	Drug Tier	Requirements/ Limits
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)
PHAZYME GAS & ACID MAX ST CHEW	NC	
Antacids - Aluminum Salts		
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	
TUMS LASTING EFFECTS CHEW (<i>calcium carbonate (antacid)</i>)	NC	
TUMS CHEW (<i>calcium carbonate (antacid)</i>)	NC	
Antacids - Magnesium Salts		
MAG 440 TABS 440 MG	NC	
MAGNESIUM CARBONATE GRAN	NC	
MAGNESIUM OXIDE POWD	NC	RX/OTC
<i>magnesium oxide TABS 400 MG</i>	C	
MAGNESIUM TRISILICATE	NC	
ANTHELMINTICS - Drugs to Treat Worm		

Drug Name	Drug Tier	Requirements/ Limits
Infections		
Anthelmintics		
<i>albendazole</i>	NC	
EMVERM CHEW	C	QL(1 EA per fill retail)
<i>ivermectin</i>	NC	
MEBENDAZOLE POWD	NC	
PIPERAZINE CITRATE	NC	
<i>praziquantel</i>	NC	
THIABENDAZOLE POWD	NC	
ANTIANGINAL AGENTS - Drugs to Treat Chest Pain		
Antianginals-Other		
<i>ranolazine TB12</i>	NC	
<i>ranolazine TB12</i>	P	
Nitrates		
GONITRO PACK	NC	
ISORDIL TITRADOSE TABS (<i>isosorbide dinitrate</i>)	NC	
<i>isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG</i>	C	
<i>isosorbide dinitrate TABS 40 MG</i>	NC	
<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	
NITRO-DUR PT24	NC	
NITRO-DUR PT24 (<i>nitroglycerin</i>)	NC	
<i>nitroglycerin in d5w</i>	NC	
<i>nitroglycerin CPCR</i>	C	
<i>nitroglycerin PT24</i>	C	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>nitroglycerin SOLN TL 0.4 MG/SPRAY</i>	NC		ATIVAN TABS 1 MG (<i>lorazepam</i>)	NC	QL(4 EA daily)
NITROGLYCERIN SOLN IV	NC		ATIVAN TABS 0.5 MG, 2 MG (<i>lorazepam</i>)	NC	QL(3 EA daily)
<i>nitroglycerin SUBL</i>	C		<i>chlordiazepoxide hcl CAPS</i>	C	QL(4 EA daily)
NITROSTAT SUBL (<i>nitroglycerin</i>)	NC		<i>clorazepate dipotassium TABS</i>	C	QL(3 EA daily)
ANTIANKXIETY AGENTS - Drugs to Treat Anxiety			<i>diazepam CONC</i>	NC	
Antianxiety Agents - Misc.			<i>diazepam SOLN PO 5 MG/5ML</i>	C	
BUCAPSOL PO 7.5 MG, 10 MG, 15 MG	NC		<i>diazepam SOLN IJ 5 MG/ML, 10 MG/2ML</i>	NC	
<i>buspirone hcl 7.5 MG, 30 MG</i>	C	QL(3 EA daily)	DIAZEPAM SOLN IJ 5 MG/ML	NC	
<i>buspirone hcl 15 MG</i>	C	QL(4 EA daily)	<i>diazepam TABS</i>	C	QL(4 EA daily)
<i>buspirone hcl 5 MG, 10 MG</i>	C	QL(6 EA daily)	<i>lorazepam CONC</i>	NC	
DROPERIDOL POWD	NC		<i>lorazepam SOLN</i>	NC	
<i>droperidol SOLN 2.5 MG/ML</i>	NC		<i>lorazepam TABS 1 MG</i>	C	QL(4 EA daily)
<i>hydroxyzine hcl SOLN 25 MG/ML, 50 MG/ML</i>	NC		<i>lorazepam TABS 0.5 MG, 2 MG</i>	C	QL(3 EA daily)
HYDROXYZINE HCL SOLN 50 MG/ML	NC		LOREEV XR CS24	NC	
<i>hydroxyzine hcl SYRP</i>	C		<i>oxazepam CAPS</i>	C	QL(4 EA daily)
<i>hydroxyzine hcl TABS</i>	C		VALIUM TABS (<i>diazepam</i>)	NC	QL(4 EA daily)
<i>hydroxyzine pamoate CAPS</i>	C		XANAX TABS (<i>alprazolam</i>)	NC	QL(3 EA daily)
HYDROXYZINE PAMOATE POWD	NC		ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms		
<i>meprobamate</i>	C		Antiarrhythmics - Misc.		
VISTARIL CAPS (<i>hydroxyzine pamoate</i>)	NC		<i>adenosine SOLN</i>	NC	
Benzodiazepines			Antiarrhythmics Type I-A		
ALPRAZOLAM INTENSOL CONC	NC		<i>disopyramide phosphate CAPS</i>	C	
<i>alprazolam TABS</i>	C	QL(3 EA daily)	NORPACE CR CP12 150 MG	C	
<i>alprazolam TB24</i>	NC		NORPACE CR CP12 100 MG	NC	
<i>alprazolam TBDP</i>	NC				

Drug Name	Drug Tier	Requirements/ Limits
NORPACE CAPS (disopyramide phosphate)	NC	
PROCAINAMIDE HCL POWD	NC	
<i>procainamide hcl SOLN</i>	NC	
<i>quinidine gluconate TBCR</i>	C	
<i>quinidine sulfate TABS</i>	C	
Antiarrhythmics Type I-B		
LIDOCAINE HCL (CARDIAC) PF SOLN	NC	
<i>lidocaine hcl (cardiac) SOSY</i>	NC	
LIDOCAINE HCL (CARDIAC) SOSY 100 MG/5ML	NC	
<i>lidocaine in d5w 5 %-4 MG/ML, 5 %-8 MG/ML</i>	NC	
<i>mexiletine hcl</i>	C	
Antiarrhythmics Type I-C		
<i>flecainide acetate</i>	C	
<i>propafenone hcl CP12</i>	C	
<i>propafenone hcl TABS</i>	C	
RYTHMOL SR CP12 (<i>propafenone hcl</i>)	NC	
Antiarrhythmics Type III		
<i>amiodarone hcl SOLN 150 MG/3ML, 450 MG/9ML, 900 MG/18ML</i>	NC	
<i>amiodarone hcl TABS 100 MG, 400 MG</i>	NC	
<i>amiodarone hcl TABS 200 MG</i>	C	
<i>dofetilide</i>	C	
<i>ibutilide fumarate</i>	NC	
MULTAQ	NC	
NEXTERONE	NC	
TIKOSYN (<i>dofetilide</i>)	NC	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions		

Drug Name	Drug Tier	Requirements/ Limits
Antiasthmatic - Monoclonal Antibodies		
FASENRA PEN SOAJ	PA	Brand Preferred; SP; PA
FASENRA SOSY	PA	Brand Preferred; SP; PA
NUCALA SOAJ	NP	SP
NUCALA SOLR	NP	SP
NUCALA SOSY	NP	SP
TEZSPIRE SOAJ	NP	SP
TEZSPIRE SOSY	NP	SP
XOLAIR SOAJ	PA	Brand Preferred; SP; PA
XOLAIR SOLR	PA	Brand Preferred; SP; PA
XOLAIR SOSY 75 MG/0.5ML, 150 MG/ML	PA	PA
XOLAIR SOSY	PA	Brand Preferred; SP; PA
Anti-Inflammatory Agents		
<i>cromolyn sodium NEBU</i>	C	QL(8 ML daily)
CROMOLYN SODIUM POWD	NC	
Bronchodilators - Anticholinergics		
ATROVENT HFA	P	1 package(s) per 31 day(s) retail
INCRUSE ELLIPTA	P	1 package(s) per 31 day(s) retail
IPRATROPIUM BROMIDE POWD	NC	
<i>ipratropium bromide SOLN 0.02 %</i>	P	QL(375 ML per 25 day(s) retail)
SPIRIVA HANDIHALER CAPS (<i>tiotropium bromide monohydrate</i>)	P	Brand Preferred
SPIRIVA RESPIMAT AERS	NP	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>tiotropium bromide monohydrate CAPS</i>	NP	Brand Preferred	ARNUITY ELLIPTA	P	QL(1 EA daily)
TUDORZA PRESSAIR	NC	1 package(s) per 31 day(s) retail	ASMANEX (120 METERED DOSES) AEPB	P	
TUDORZA PRESSAIR	NP	1 package(s) per 31 day(s) retail	ASMANEX (14 METERED DOSES) AEPB	P	
YUPELRI	NP		ASMANEX (30 METERED DOSES) AEPB	P	
Leukotriene Modulators			ASMANEX (60 METERED DOSES) AEPB	P	
ACCOLATE (<i>zafirlukast</i>)	NP		ASMANEX HFA AERO	P	QL(0.44 GM daily)
<i>montelukast sodium CHEW</i>	P	QL(1 EA daily)	<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>montelukast sodium PACK</i>	P	QL(1 EA 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>montelukast sodium TABS</i>	P	QL(1 EA daily)	FLOVENT DISKUS AEPB (<i>fluticasone propionate (inhalation)</i>)	NC	
SINGULAIR CHEW (<i>montelukast sodium</i>)	NP	QL(1 EA daily)	FLUNISOLIDE POWD	NC	
SINGULAIR PACK (<i>montelukast sodium</i>)	NP	QL(1 EA daily)	<i>fluticasone propionate (inhalation) AEPB</i>	NP	
SINGULAIR TABS (<i>montelukast sodium</i>)	NP	QL(1 EA daily)	<i>fluticasone propionate hfa 44 MCG/ACT</i>	P	QL(11 GM per 25 day(s) retail)
<i>zafirlukast</i>	P		<i>fluticasone propionate hfa 110 MCG/ACT, 220 MCG/ACT</i>	P	QL(12 GM per 25 day(s) retail)
<i>zileuton TB12</i>	NC		PULMICORT FLEXHALER AEPB	NC	1 package(s) per fill retail
<i>zileuton TB12</i>	NP		PULMICORT FLEXHALER AEPB	NP	1 package(s) per fill retail
ZYFLO TABS	NP		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)
Phosphodiesterase 3 & 4 (PDE3 & PDE4) Inhibitors			PULMICORT SUSP 1 MG/2ML (<i>budesonide (inhalation)</i>)	NP	QL(60 ML per 31 day(s) retail); AL(Up to 8 yrs old)
OHTUVAYRE	NP	SP	QVAR REDHALER 80 MCG/ACT	P	QL(0.72 GM daily)
Selective Phosphodiesterase 4 (PDE4) Inhibitors					
DALIRESP (<i>roflumilast</i>)	NP	QL(1 EA daily)			
<i>roflumilast</i>	NP	QL(1 EA daily)			
<i>roflumilast 500 MCG</i>	NC	QL(1 EA daily)			
Steroid Inhalants					
ALVESCO	P				
ALVESCO	NC				
ARMONAIR DIGIHALER	NP				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
QVAR REDHALER 40 MCG/ACT	P	QL(0.36 GM daily)	ALBUTEROL SULFATE POWD	NC	
Sympathomimetics			<i>albuterol sulfate SYRP</i>	P	
ADVAIR DISKUS AEPB (<i>fluticasone-salmeterol</i>)	P	Brand Preferred; QL(60 EA per 30 day(s) retail); AL(At least 4 yrs old)	<i>albuterol sulfate TABS</i>	P	
ADVAIR HFA AERO (<i>fluticasone-salmeterol</i>)	P	Brand Preferred	ANORO ELLIPTA 25 MCG/ACT-62.5 MCG/ACT (<i>umeclidinium-vilanterol</i>)	P	Brand Preferred
AIRDUO DIGIHALER	NP		<i>arformoterol tartrate</i>	P	
AIRDUO RESPICLICK 113/14 AEPB (<i>fluticasone-salmeterol</i>)	NP		BEVESPI AEROSPHERE	NP	
AIRDUO RESPICLICK 232/14 AEPB (<i>fluticasone-salmeterol</i>)	NP		BREO ELLIPTA	NP	
AIRDUO RESPICLICK 55/14 AEPB (<i>fluticasone-salmeterol</i>)	NP		BREO ELLIPTA (<i>fluticasone furoate-vilanterol</i>)	NP	
AIRSUPRA	NP		BREZTRI AEROSPHERE	NP	
<i>albuterol sulfate AERS</i>	NP	Brand Preferred - Ventolin HFA; QL(17 GM per 30 day(s) retail)	BROVANA (<i>arformoterol tartrate</i>)	NP	
<i>albuterol sulfate AERS</i>	P	Brand Preferred - Ventolin HFA; QL(13.4 GM per 30 day(s) retail)	<i>budesonide-formoterol fumarate dihydrate</i>	NP	Brand Preferred; QL(30.6 GM per 30 day(s) retail)
<i>albuterol sulfate AERS</i>	NP	Brand Preferred - Ventolin HFA; QL(36 GM per 30 day(s) retail)	<i>budesonide-formoterol fumarate dihydrate</i>	NP	Brand Preferred; QL(30.9 GM per 30 day(s) retail)
<i>albuterol sulfate NEBU</i>	P		COMBIVENT RESPIMAT AERS	P	QL(4 GM per 31 day(s) retail)
<i>albuterol sulfate NEBU 0.083 %</i>	P	QL(12.5 ML daily)	DUAKLIR PRESSAIR	NP	
<i>albuterol sulfate NEBU 0.63 MG/3ML, 1.25 MG/3ML</i>	P	QL(375 ML per 31 day(s) retail)	DULERA	P	QL(39 GM per 30 day(s) retail)
			DULERA 100 MCG/ACT-5 MCG/ACT, 200 MCG/ACT-5 MCG/ACT	P	QL(26.4 GM per 30 day(s) retail)
			EPHEDRINE HCL POWD	NC	
			EPHEDRINE SULFATE POWD	NC	
			<i>fluticasone furoate-vilanterol</i>	NP	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>fluticasone-salmeterol</i> AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT	NP	Brand Preferred; QL(60 EA per 30 day(s) retail); AL(At least 4 yrs old)	SYMBICORT (<i>budesonide-formoterol fumarate dihydrate</i>)	P	Brand Preferred; QL(30.6 GM per 30 day(s) retail)
<i>fluticasone-salmeterol</i> AEPB 113 MCG/ACT-14 MCG/ACT, 232 MCG/ACT-14 MCG/ACT, 55 MCG/ACT-14 MCG/ACT	NP		TERBUTALINE SULFATE POWD	NC	
<i>fluticasone-salmeterol</i> AERO	NP	Brand Preferred	<i>terbutaline sulfate SOLN</i>	NC	
<i>formoterol fumarate</i> NEBU	NP		<i>terbutaline sulfate TABS</i>	NP	ST
<i>ipratropium-albuterol</i> SOLN	P	QL(12 ML daily)	TRELEGY ELLIPTA	NP	
<i>isoproterenol hcl</i>	NC		<i>umeclidinium-vilanterol</i>	NP	Brand Preferred
<i>levalbuterol hcl</i>	NP		VENTOLIN HFA AERS (<i>albuterol sulfate</i>)	P	Brand Preferred; QL(16 GM per 30 day(s) retail)
<i>levalbuterol tartrate</i>	NP	QL(0.5 GM daily; 30 GM per 30 day(s) retail)	VENTOLIN HFA AERS (<i>albuterol sulfate</i>)	P	Brand Preferred; QL(36 GM per 30 day(s) retail)
METAPROTERENOL SULFATE POWD	NC		XOPENEX HFA (<i>levalbuterol tartrate</i>)	NC	QL(0.5 GM daily; 30 GM per 30 day(s) retail)
PERFOROMIST NEBU (<i>formoterol fumarate</i>)	NP		XOPENEX HFA (<i>levalbuterol tartrate</i>)	NP	QL(0.5 GM daily; 30 GM per 30 day(s) retail)
PRIMATENE MIST	NC		Xanthines		
PROAIR DIGIHALER	NP		AMINOPHYLLINE ANHYDROUS POWD	NC	
PROAIR RESPICLICK AEPB	P	QL(2 EA per 30 day(s) retail)	<i>aminophylline SOLN</i>	NC	
SEREVENT DISKUS	P	1 package(s) per fill retail	THEO-24 CP24	C	
STIOLTO RESPIMAT	P		<i>theophylline ELIX</i>	C	
STRIVERDI RESPIMAT	NP		THEOPHYLLINE-ETHYLENEDIAMINE POWD	NC	
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)	<i>theophylline SOLN</i>	C	QL(475 ML per fill 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)	<i>theophylline TB12</i>	C	
			<i>theophylline TB24</i>	C	
			ANTICOAGULANTS - Blood Thinners		
			Coumarin Anticoagulants		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
WARFARIN SODIUM POWD	NC		<i>enoxaparin sodium SOSY 40 MG/0.4ML</i>	P	QL(16.8 ML per 180 day(s) retail); SP
<i>warfarin sodium TABS</i>	P		<i>enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML</i>	P	QL(42 ML per 180 day(s) retail); SP
Direct Factor Xa Inhibitors			<i>enoxaparin sodium SOSY 30 MG/0.3ML</i>	P	QL(12.6 ML per 180 day(s) retail); SP
ELIQUIS DVT/PE STARTER PACK TBPB	P	QL(2.47 EA daily)	<i>fondaparinux sodium</i>	NP	SP
ELIQUIS TABS	P	QL(2 EA daily)	FRAGMIN SOLN 10000 UNIT/4ML, 95000 UNIT/3.8ML	NP	SP
<i>rivaroxaban TABS 2.5 MG</i>	NP		FRAGMIN SOSY	NP	SP
<i>rivaroxaban TABS 2.5 MG</i>	NC		HEPARIN (PORCINE) IN NACL SOLN IV 0.45 %-12500 UNIT/250ML, 0.45 %-25000 UNIT/250ML, 0.45 %-25000 UNIT/500ML	NC	
SAVAYSA	NP		<i>heparin (porcine) in sodium chloride SOLN IV 0.9 %-1000 UNIT/500ML, 0.9 %-2000 UNIT/L</i>	NC	
XARELTO STARTER PACK TBPB	P	Brand Preferred	HEPARIN SOD (PORCINE) IN D5W	NC	
XARELTO SUSR	P	Brand Preferred	<i>heparin sodium (porcine) lock flush 10 UNIT/ML, 100 UNIT/ML</i>	NC	
XARELTO TABS	P	Brand Preferred	HEPARIN SODIUM (PORCINE) PF SOLN IJ	NC	
XARELTO TABS 2.5 MG, 10 MG, 15 MG, 20 MG (<i>rivaroxaban</i>)	P	Brand Preferred	<i>heparin sodium (porcine) SOLN IJ 1000 UNIT/ML, 5000 UNIT/0.5ML, 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML</i>	C	
Heparins And Heparinoid-Like Agents			HEPARIN SODIUM (PORCINE) SOSY IJ	C	
ARIXTRA (<i>fondaparinux sodium</i>)	NP	SP	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>enoxaparin sodium SOLN IJ 300 MG/3ML</i>	P	QL(126 ML per 180 day(s) retail); SP			
<i>enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML</i>	NC	QL(42 ML per 180 day(s) retail); SP			
<i>enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML</i>	NC	QL(33.6 ML per 180 day(s) retail); SP			
<i>enoxaparin sodium SOSY 60 MG/0.6ML</i>	P	QL(25.2 ML per 180 day(s) retail); SP			
<i>enoxaparin sodium SOSY 40 MG/0.4ML</i>	NC	QL(16.8 ML per 180 day(s) retail); SP			
<i>enoxaparin sodium SOSY 30 MG/0.3ML</i>	NC	QL(12.6 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			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
LOVENOX SOLN IJ 300 MG/3ML (<i>enoxaparin sodium</i>)	NP	QL(126 ML per 180 day(s) retail); SP	LOVENOX SOSY 100 MG/ML, 150 MG/ML (<i>enoxaparin sodium</i>)	NP	QL(42 ML per 180 day(s) retail); SP
LOVENOX SOSY 30 MG/0.3ML (<i>enoxaparin sodium</i>)	NP	QL(12.6 ML per 180 day(s) retail); SP	In Vitro/Lock Anticoagulants		
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	DEFENCATH	NC	
LOVENOX SOSY 60 MG/0.6ML (<i>enoxaparin sodium</i>)	NP	QL(25.2 ML per 180 day(s) retail); SP	Thrombin Inhibitors		
LOVENOX SOSY 40 MG/0.4ML (<i>enoxaparin sodium</i>)	NP	QL(16.8 ML per 180 day(s) retail); SP	<i>argatroban</i>	NC	
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	ARGATROBAN	NC	
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	ARGATROBAN IN SODIUM CHLORIDE	NC	
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	BIVALIRUDIN RTU SOLN (<i>bivalirudin trifluoroacetate</i>)	NC	
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	<i>bivalirudin trifluoroacetate SOLN</i>	NC	
LOVENOX SOSY 80 MG/0.8ML (<i>enoxaparin sodium</i>)	NC	QL(33.6 ML per 180 day(s) retail); SP	<i>bivalirudin trifluoroacetate SOLR</i>	NC	
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	<i>dabigatran etexilate mesylate CAPS</i>	NP	Brand Preferred
			<i>dabigatran etexilate mesylate CAPS</i>	NP	
			PRADAXA CAPS (<i>dabigatran etexilate mesylate</i>)	P	Brand Preferred
			PRADAXA PACK	NP	Brand Preferred; SP
			ANTICONVULSANTS - Drugs to Treat Seizures		
			AMPA Glutamate Receptor Antagonists		
			FYCOMPA SUSP	NC	
			FYCOMPA SUSP	PA	PA
			FYCOMPA TABS	NC	
			FYCOMPA TABS	PA	PA
			Anticonvulsants - Benzodiazepines		
			<i>clobazam SUSP</i>	P	PA
			<i>clobazam SUSP</i>	NC	
			<i>clobazam TABS</i>	P	PA
			<i>clonazepam TABS</i>	C	QL(4 EA daily)
			<i>clonazepam TBDP</i>	NC	

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

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
LAMICTAL ODT TBDP (<i>lamotrigine</i>)	NP		MOTPOLY XR CP24	NP	
LAMICTAL STARTER KIT 25 MG (<i>lamotrigine</i>)	NP		MYSOLINE (<i>primidone</i>)	NP	
LAMICTAL XR KIT	NP		NEURONTIN CAPS (<i>gabapentin</i>)	NP	QL(9 EA daily)
LAMICTAL XR TB24 (<i>lamotrigine</i>)	NP	QL(1 EA daily)	NEURONTIN SOLN (<i>gabapentin</i>)	NP	
LAMICTAL CHEW (<i>lamotrigine</i>)	NP		NEURONTIN TABS 600 MG (<i>gabapentin</i>)	NP	QL(6 EA daily)
LAMICTAL TABS (<i>lamotrigine</i>)	NP		NEURONTIN TABS 800 MG (<i>gabapentin</i>)	NP	QL(4 EA daily)
<i>lamotrigine CHEW</i>	P		<i>oxcarbazepine SUSP</i>	NC	Brand Preferred
<i>lamotrigine KIT 25 MG</i>	NP		<i>oxcarbazepine SUSP</i>	NP	Brand Preferred
<i>lamotrigine TABS</i>	NP		<i>oxcarbazepine SUSP</i>	NP	
<i>lamotrigine TABS</i>	P		<i>oxcarbazepine TABS</i>	P	
<i>lamotrigine TB24</i>	P	QL(1 EA daily)	<i>oxcarbazepine TB24</i>	NP	
<i>lamotrigine TBDP</i>	P		OXTELLAR XR TB24 (<i>oxcarbazepine</i>)	NP	
LEVETIRACETAM IN NACL	NC		<i>pregabalin CAPS</i>	P	
<i>levetiracetam in sodium chloride</i>	NC		<i>pregabalin CAPS</i>	NC	
<i>levetiracetam SOLN PO 100 MG/ML, 500 MG/5ML</i>	P	QL(16 ML daily)	<i>pregabalin SOLN</i>	NP	
<i>levetiracetam SOLN PO 100 MG/ML</i>	NC	QL(16 ML daily)	<i>primidone</i>	P	
<i>levetiracetam SOLN IV 500 MG/5ML</i>	NC		QUDEXY XR CS24 (<i>topiramate</i>)	NP	
<i>levetiracetam TABS 1000 MG</i>	P		<i>rufinamide SUSP</i>	NP	Brand Preferred; SP
<i>levetiracetam TABS 250 MG, 750 MG</i>	P	QL(4 EA daily)	<i>rufinamide TABS</i>	NP	Brand Preferred; SP
<i>levetiracetam TABS 500 MG</i>	P	QL(6 EA daily)	SPRITAM TB3D	NP	
<i>levetiracetam TB24</i>	P		SPRITAM TB3D	NP	
LEVETIRACETAM TB3D	NP		TEGRETOL SUSP (<i>carbamazepine</i>)	NP	
LYRICA CAPS (<i>pregabalin</i>)	NP		TEGRETOL TABS (<i>carbamazepine</i>)	NP	
LYRICA SOLN (<i>pregabalin</i>)	NP		TEGRETOL-XR TB12 (<i>carbamazepine</i>)	P	Brand Preferred
LYRICA SOLN (<i>pregabalin</i>)	NC		TOPAMAX SPRINKLE CPSP 15 MG (<i>topiramate</i>)	NP	QL(6 EA daily)
			TOPAMAX SPRINKLE CPSP 25 MG (<i>topiramate</i>)	NP	QL(8 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TOPAMAX TABS 200 MG (<i>topiramate</i>)	NP	QL(2 EA daily)	XCOPRI (250 MG DAILY DOSE) TBPk	NP	
TOPAMAX TABS 100 MG (<i>topiramate</i>)	NP	QL(4 EA daily)	XCOPRI (350 MG DAILY DOSE) TBPk	NP	
TOPAMAX TABS 25 MG, 50 MG (<i>topiramate</i>)	NP	QL(6 EA daily)	XCOPRI TABS	NP	
<i>topiramate</i> CP24	NP		XCOPRI TBPk	NP	
<i>topiramate</i> CPSP 50 MG	P		GABA Modulators		
<i>topiramate</i> CPSP 15 MG	P	QL(6 EA daily)	SABRIL PACK (<i>vigabatrin</i>)	PA	Brand Preferred; SP; PA
<i>topiramate</i> CPSP 25 MG	P	QL(8 EA daily)	SABRIL TABS (<i>vigabatrin</i>)	PA	Brand Preferred; SP; PA
<i>topiramate</i> CS24	NP		<i>tiagabine hcl</i>	PA	PA
<i>topiramate</i> TABS 200 MG	P	QL(2 EA daily)	<i>vigabatrin</i> PACK	PA	Brand Preferred; SP; PA
<i>topiramate</i> TABS 25 MG, 50 MG	P	QL(6 EA daily)	<i>vigabatrin</i> PACK	NP	Brand Preferred; SP
<i>topiramate</i> TABS 25 MG, 50 MG	NC	QL(6 EA daily)	<i>vigabatrin</i> TABS	NP	Brand Preferred; SP
<i>topiramate</i> TABS 200 MG	NC	QL(2 EA daily)	VIGAFYDE SOLN	NP	SP
<i>topiramate</i> TABS 100 MG	NC	QL(4 EA daily)	Hydantoins		
<i>topiramate</i> TABS 100 MG	P	QL(4 EA daily)	DILANTIN	NP	
TRILEPTAL SUSP (<i>oxcarbazepine</i>)	P	Brand Preferred	DILANTIN (<i>phenytoin sodium extended</i>)	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>fosphenytoin sodium</i>	NC	
VIMPAT TABS (<i>lacosamide</i>)	NP	PA	<i>phenytoin sodium extended</i> 200 MG, 300 MG	NP	
ZONISADE SUSP	NP		<i>phenytoin sodium extended</i> 100 MG, 200 MG, 300 MG	P	
<i>zonisamide</i> CAPS	P		PHENYTOIN SODIUM POWD	NC	
ZTALMY	NP		<i>phenytoin sodium SOLN</i>	NC	
Carbamates			<i>phenytoin CHEW</i>	P	
<i>felbamate</i> SUSP	P		<i>phenytoin</i> SUSP	NC	
<i>felbamate</i> TABS	P				
FELBATOL SUSP (<i>felbamate</i>)	NC				
FELBATOL TABS (<i>felbamate</i>)	NP				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>phenytoin SUSP 125 MG/5ML</i>	P		<i>valproate sodium SOLN IV 100 MG/ML, 500 MG/5ML</i>	C	PA
Succinimides			<i>valproate sodium SOLN PO 250 MG/5ML</i>	P	
<i>CELONTIN (methsuximide)</i>	P	Brand Preferred	<i>valproate sodium SOLN PO 250 MG/5ML</i>	NC	
<i>ethosuximide CAPS</i>	P		<i>valproate sodium SOLN PO 500 MG/10ML</i>	NP	
<i>ethosuximide SOLN</i>	P		<i>valproic acid CAPS</i>	P	
<i>methsuximide</i>	NP	Brand Preferred	ANTIDEPRESSANTS - Drugs to Treat Depression		
<i>ZARONTIN CAPS (ethosuximide)</i>	NP		Alpha-2 Receptor Antagonists (Tetracyclics)		
<i>ZARONTIN SOLN (ethosuximide)</i>	NP		<i>mirtazapine TABS 30 MG</i>	P	QL(1.5 EA daily)
Valproic Acid			<i>mirtazapine TABS 15 MG</i>	P	QL(3 EA daily)
<i>DEPAKOTE ER TB24 250 MG (divalproex sodium)</i>	NP	QL(3 EA daily)	<i>mirtazapine TABS 7.5 MG, 45 MG</i>	P	QL(1 EA daily)
<i>DEPAKOTE ER TB24 500 MG (divalproex sodium)</i>	NP	QL(7 EA daily)	<i>mirtazapine TBDP 30 MG</i>	P	QL(1.5 EA daily)
<i>DEPAKOTE SPRINKLES CSDR (divalproex sodium)</i>	NP	QL(8 EA daily)	<i>mirtazapine TBDP 15 MG</i>	P	QL(3 EA daily)
<i>DEPAKOTE TBEC 125 MG (divalproex sodium)</i>	NP	QL(2 EA daily)	<i>mirtazapine TBDP 45 MG</i>	P	QL(1 EA daily)
<i>DEPAKOTE TBEC 250 MG (divalproex sodium)</i>	NP	QL(3 EA daily)	<i>REMERON SOLTAB TBDP 30 MG (mirtazapine)</i>	NP	QL(1.5 EA daily)
<i>DEPAKOTE TBEC 500 MG (divalproex sodium)</i>	NP	QL(7 EA daily)	<i>REMERON SOLTAB TBDP 15 MG (mirtazapine)</i>	NP	QL(3 EA daily)
<i>DEPAKOTE TBEC 250 MG (divalproex sodium)</i>	NC	QL(3 EA daily)	<i>REMERON SOLTAB TBDP 45 MG (mirtazapine)</i>	NP	QL(1 EA daily)
<i>divalproex sodium CSDR</i>	P	QL(8 EA daily)	<i>REMERON TABS 15 MG (mirtazapine)</i>	NP	QL(3 EA daily)
<i>divalproex sodium TB24 500 MG</i>	P	QL(7 EA daily)	<i>REMERON TABS 30 MG (mirtazapine)</i>	NP	QL(1.5 EA daily)
<i>divalproex sodium TB24 250 MG</i>	P	QL(3 EA daily)	Antidepressant Combinations		
<i>divalproex sodium TBEC 250 MG</i>	P	QL(3 EA daily)	<i>AUVELITY</i>	NP	
<i>divalproex sodium TBEC 125 MG</i>	P	QL(2 EA daily)	Antidepressants - Misc.		
<i>divalproex sodium TBEC 500 MG</i>	P	QL(7 EA daily)	<i>APLENZIN</i>	NP	
			<i>bupropion hcl TABS</i>	P	QL(3 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>bupropion hcl TB12 150 MG</i>	P	QL(3 EA daily)	CELEXA TABS 20 MG (<i>citalopram hydrobromide</i>)	NP	QL(2 EA daily); AL(At least 7 yrs old)
<i>bupropion hcl TB12 200 MG</i>	P	QL(2 EA daily)	CELEXA TABS 40 MG (<i>citalopram hydrobromide</i>)	NP	QL(1 EA daily); AL(At least 7 yrs old)
<i>bupropion hcl TB12 100 MG</i>	P	QL(4 EA daily)	CELEXA TABS 10 MG (<i>citalopram hydrobromide</i>)	NP	QL(4 EA daily)
<i>bupropion hcl TB24 150 MG, 450 MG</i>	NC		CITALOPRAM HYDROBROMIDE CAPS	NP	
<i>bupropion hcl TB24 300 MG</i>	P	QL(1 EA daily)	<i>citalopram hydrobromide SOLN</i>	P	
<i>bupropion hcl TB24 300 MG</i>	NC	QL(1 EA daily)	<i>citalopram hydrobromide SOLN</i>	NC	
<i>bupropion hcl TB24 450 MG</i>	NP		<i>citalopram hydrobromide TABS 20 MG</i>	P	QL(2 EA daily); AL(At least 7 yrs old)
<i>bupropion hcl TB24 150 MG</i>	P	QL(3 EA daily)	<i>citalopram hydrobromide TABS 10 MG</i>	P	QL(4 EA daily)
<i>bupropion hcl TB24 150 MG</i>	NC	QL(3 EA daily)	<i>citalopram hydrobromide TABS 40 MG</i>	P	QL(1 EA daily); AL(At least 7 yrs old)
FORFIVO XL TB24 (<i>bupropion hcl</i>)	NP		<i>escitalopram oxalate SOLN</i>	NP	
WELLBUTRIN SR TB12 200 MG (<i>bupropion hcl</i>)	NP	QL(2 EA daily)	<i>escitalopram oxalate SOLN</i>	NC	
WELLBUTRIN SR TB12 100 MG (<i>bupropion hcl</i>)	NP	QL(4 EA daily)	<i>escitalopram oxalate TABS 5 MG</i>	NC	QL(4 EA daily)
WELLBUTRIN SR TB12 150 MG (<i>bupropion hcl</i>)	NP	QL(3 EA daily)	<i>escitalopram oxalate TABS 20 MG</i>	P	QL(1 EA daily); AL(At least 7 yrs old)
WELLBUTRIN XL TB24 150 MG (<i>bupropion hcl</i>)	NP	QL(3 EA daily)	<i>escitalopram oxalate TABS 5 MG</i>	P	QL(4 EA daily)
WELLBUTRIN XL TB24 300 MG (<i>bupropion hcl</i>)	NP	QL(1 EA daily)	<i>escitalopram oxalate TABS 10 MG</i>	P	QL(2 EA daily); AL(At least 7 yrs old)
GABA Receptor Modulator - Neuroactive Steroid			<i>escitalopram oxalate TABS 20 MG</i>	NC	QL(2 EA daily); AL(At least 7 yrs old)
ZURZUVAE	NP	SP	<i>escitalopram oxalate TABS 10 MG</i>	NC	QL(2 EA daily); AL(At least 7 yrs old)
Monoamine Oxidase Inhibitors (MAOIs)			<i>fluoxetine hcl CAPS 40 MG</i>	P	QL(2 EA daily); AL(At least 7 yrs old)
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)					

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>fluoxetine hcl CAPS 10 MG, 20 MG</i>	P	QL(4 EA daily)	PAXIL CR TB24 (<i>paroxetine hcl</i>)	NP	QL(1 EA daily); AL(At least 7 yrs old)
<i>fluoxetine hcl CAPS 10 MG, 20 MG</i>	NC	QL(4 EA daily)	PAXIL SUSP (<i>paroxetine hcl</i>)	NP	QL(40 ML daily)
<i>fluoxetine hcl CPDR</i>	NP		PAXIL TABS 10 MG (<i>paroxetine hcl</i>)	NP	QL(6 EA daily)
<i>fluoxetine hcl SOLN</i>	P	QL(120 ML per fill retail)	PAXIL TABS 20 MG (<i>paroxetine hcl</i>)	NP	QL(3 EA daily)
<i>fluoxetine hcl SOLN</i>	NC	QL(120 ML per fill retail)	PAXIL TABS 30 MG, 40 MG (<i>paroxetine hcl</i>)	NP	QL(2 EA daily); AL(At least 7 yrs old)
<i>fluoxetine hcl TABS 20 MG</i>	P	QL(4 EA daily)	PROZAC CAPS 40 MG (<i>fluoxetine hcl</i>)	NP	QL(2 EA daily); AL(At least 7 yrs old)
<i>fluoxetine hcl TABS 60 MG</i>	NP		PROZAC CAPS 10 MG, 20 MG (<i>fluoxetine hcl</i>)	NP	QL(4 EA daily)
<i>fluoxetine hcl TABS 10 MG</i>	P	QL(1 EA daily); AL(At least 7 yrs old)	SERTRALINE HCL CAPS	NP	
FLUOXETINE HCL TABS (<i>fluoxetine hcl</i>)	NP		<i>sertraline hcl CONC</i>	NP	QL(186 ML per 31 day(s) retail)
<i>fluvoxamine maleate CP24</i>	NP		<i>sertraline hcl TABS 100 MG</i>	NC	QL(2 EA daily); AL(At least 7 yrs old)
<i>fluvoxamine maleate TABS 100 MG</i>	P	QL(3 EA daily)	<i>sertraline hcl TABS 25 MG, 50 MG</i>	P	QL(4 EA daily)
<i>fluvoxamine maleate TABS 25 MG, 50 MG</i>	P	QL(2 EA daily); AL(At least 7 yrs old)	<i>sertraline hcl TABS 100 MG</i>	P	QL(2 EA daily); AL(At least 7 yrs old)
LEXAPRO TABS 5 MG (<i>escitalopram oxalate</i>)	NP	QL(4 EA daily)	<i>sertraline hcl TABS 25 MG, 50 MG</i>	NC	QL(4 EA daily)
LEXAPRO TABS 10 MG (<i>escitalopram oxalate</i>)	NP	QL(2 EA daily); AL(At least 7 yrs old)	ZOLOFT CONC (<i>sertraline hcl</i>)	NP	QL(186 ML per 31 day(s) retail)
LEXAPRO TABS 20 MG (<i>escitalopram oxalate</i>)	NP	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)
<i>paroxetine hcl SUSP</i>	NP	QL(40 ML daily)	ZOLOFT TABS 25 MG, 50 MG (<i>sertraline hcl</i>)	NP	QL(4 EA daily)
<i>paroxetine hcl TABS 20 MG</i>	P	QL(3 EA daily)	Serotonin Modulators		
<i>paroxetine hcl TABS 30 MG, 40 MG</i>	P	QL(2 EA daily); AL(At least 7 yrs old)	<i>nefazodone hcl</i>	P	
<i>paroxetine hcl TABS 10 MG</i>	P	QL(6 EA daily)	RALDESY SOLN PO 10 MG/ML	NP	
<i>paroxetine hcl TB24</i>	NP	QL(1 EA daily); AL(At least 7 yrs old)	TRAZODONE HCL POWD	NC	
			<i>trazodone hcl TABS 50 MG, 100 MG, 150 MG</i>	P	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>trazodone hcl TABS 300 MG</i>	P	QL(2 EA daily)	PRISTIQ 100 MG (<i>desvenlafaxine succinate</i>)	NP	QL(4 EA daily)
TRINTELLIX	NP	QL(1 EA daily); AL(At least 18 yrs old)	VENLAFAXINE BESYLATE ER	NP	
VIIBRYD TABS (<i>vilazodone hcl</i>)	NP	QL(1 EA daily)	<i>venlafaxine hcl CP24 150 MG</i>	P	QL(2 EA daily)
<i>vilazodone hcl TABS</i>	P	QL(1 EA daily)	<i>venlafaxine hcl CP24 37.5 MG</i>	P	QL(4 EA daily)
Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)			<i>venlafaxine hcl CP24 75 MG</i>	P	QL(5 EA daily)
CYMBALTA CPEP (<i>duloxetine hcl</i>)	NP	QL(1 EA daily); AL(At least 7 yrs old)	<i>venlafaxine hcl TABS</i>	P	
DESVENLAFAXINE ER	NP		<i>venlafaxine hcl TB24 150 MG</i>	NP	QL(1 EA daily)
<i>desvenlafaxine succinate 25 MG, 50 MG</i>	P	QL(1 EA daily)	<i>venlafaxine hcl TB24 37.5 MG, 75 MG, 225 MG</i>	NC	QL(1 EA daily); AL(At least 7 yrs old)
<i>desvenlafaxine succinate 100 MG</i>	P	QL(4 EA daily)	<i>venlafaxine hcl TB24 37.5 MG, 75 MG, 225 MG</i>	NP	QL(1 EA daily); AL(At least 7 yrs old)
DRIZALMA SPRINKLE CSDR	NP		Tricyclic Agents		
<i>duloxetine hcl CPEP 40 MG</i>	NC		<i>amitriptyline hcl TABS</i>	C	
<i>duloxetine hcl CPEP 20 MG, 30 MG, 60 MG</i>	P	QL(1 EA daily); AL(At least 7 yrs old)	<i>amoxapine</i>	C	
<i>duloxetine hcl CPEP 40 MG</i>	NP		ANAFRANIL (<i>clomipramine hcl</i>)	NC	
<i>duloxetine hcl CPEP 20 MG, 30 MG, 60 MG</i>	NC	QL(1 EA daily); AL(At least 7 yrs old)	<i>clomipramine hcl 75 MG</i>	C	
EFFEXOR XR CP24 75 MG (<i>venlafaxine hcl</i>)	NP	QL(5 EA daily)	<i>clomipramine hcl 25 MG, 50 MG</i>	NC	
EFFEXOR XR CP24 37.5 MG (<i>venlafaxine hcl</i>)	NP	QL(4 EA daily)	DESIPRAMINE HCL POWD	NC	
EFFEXOR XR CP24 150 MG (<i>venlafaxine hcl</i>)	NP	QL(2 EA daily)	<i>desipramine hcl TABS 25 MG</i>	C	QL(2 EA daily)
FETZIMA TITRATION C4PK	NP		<i>desipramine hcl TABS 10 MG, 50 MG, 75 MG, 100 MG, 150 MG</i>	C	
FETZIMA CP24	NP		<i>doxepin hcl CAPS</i>	C	
PRISTIQ 25 MG, 50 MG (<i>desvenlafaxine succinate</i>)	NP	QL(1 EA daily)	<i>doxepin hcl CONC</i>	C	
			IMIPRAMINE HCL POWD	NC	
			<i>imipramine hcl TABS</i>	C	
			<i>imipramine pamoate</i>	NC	
			NORPRAMIN TABS 10 MG (<i>desipramine hcl</i>)	NC	

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

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
XIGDUO XR (dapagliflozin propanediol-metformin hcl)	P	Brand Preferred	BAQSIMI TWO PACK POWD	P	
XULTOPHY	NP		diazoxide	NP	
ZITUVIMET XR TB24	NP		glucagon (rdna)	P	QL(4 EA per 365 day(s) retail)
ZITUVIMET TABS	NP		GLUCAGON EMERGENCY	NP	
Biguanides			GVOKE HYOPEN 1-PACK SOAJ	P	
GLUMETZA TB24 (metformin hcl)	NP		GVOKE HYOPEN 2-PACK SOAJ	P	
metformin hcl SOLN	NP		GVOKE KIT SOLN	NP	
metformin hcl TABS 850 MG	P	QL(3 EA daily)	GVOKE PFS SOSY 1 MG/0.2ML	NP	
metformin hcl TABS 500 MG	NC	QL(5 EA daily)	PROGLYCEM (diazoxide)	P	
metformin hcl TABS 500 MG	P	QL(5 EA daily)	ZEGALOGUE SOAJ	P	
metformin hcl TABS 1000 MG	P	QL(2 EA daily)	ZEGALOGUE SOSY	P	
metformin hcl TABS 850 MG	NC	QL(3 EA daily)	Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
metformin hcl TABS 625 MG	NP		alogliptin benzoate	NP	QL(1 EA daily)
metformin hcl TABS 750 MG	P		JANUVIA	P	ST
metformin hcl TABS 1000 MG	NC	QL(2 EA daily)	NESINA (alogliptin benzoate)	NP	QL(1 EA daily)
metformin hcl TB24 750 MG	P	QL(3 EA daily)	ONGLYZA (saxagliptin hcl)	NC	QL(1 EA daily)
metformin hcl TB24 500 MG	P	QL(4 EA daily)	saxagliptin hcl	NP	QL(1 EA daily)
metformin hcl TB24 500 MG, 1000 MG	NP		SITAGLIPTIN	NP	
RIOMET SOLN (metformin hcl)	NP		TRADJENTA	P	ST
Diabetic Other			ZITUVIO	NP	
BAQSIMI ONE PACK POWD	NC		Dopamine Receptor Agonists - Antidiabetic		
BAQSIMI ONE PACK POWD	P		CYCLOSET	NC	
BAQSIMI TWO PACK POWD	NC		Incretin Mimetic Agents		
			BYDUREON BCISE AUIJ	NP	QL(3.4 ML per 28 day(s) retail)
			BYETTA 10 MCG PEN SOPN 10 MCG/0.04ML (exenatide)	NP	QL(2.4 ML per 31 day(s) retail); AL(At least 18 yrs old)

Drug Name	Drug Tier	Requirements/Limits
BYETTA 5 MCG PEN SOPN	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)
EXENATIDE SOPN 5 MCG/0.02ML	NP	QL(1.2 ML per 31 day(s) retail); AL(At least 18 yrs old)
<i>liraglutide</i>	NP	QL(12 ML per 28 day(s) retail); AL(At least 10 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
RYBELSUS TABS	NP	
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	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail; 30 ML per 31 days mail)
ADMELOG SOLN IJ	NP	USE BRAND NAME or Authorized Generic; 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	Brand Preferred
FIASP FLEXTOUCH SOPN	NP	
FIASP PENFILL SOCT	NP	
FIASP PUMPCART SOCT	NC	
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 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 KWIKPEN SOPN 200 UNIT/ML	P	USE BRAND NAME or Authorized Generic

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
HUMALOG MIX 50/50 KWIKPEN SUPN	P	USE BRAND NAME or Authorized Generic	HUMULIN R U-500 KWIKPEN SOPN SC	P	
HUMALOG MIX 75/25 KWIKPEN SUPN	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)	HUMULIN R SOLN IJ	P	Limit 40mls per month
HUMALOG MIX 75/25 SUSP	P	USE BRAND NAME or Authorized Generic	HUMULIN R SOLN IJ	NC	Limit 40mls per month
HUMALOG TEMPO PEN SOPN	P	USE BRAND NAME or Authorized Generic	INSULIN ASP PROT & ASP FLEXPEN SUPN	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)
HUMALOG SOCT	P	USE BRAND NAME or Authorized Generic	INSULIN ASPART FLEXPEN SOPN	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 ASPART PENFILL SOCT	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)
HUMALOG SOLN IJ	NC	USE BRAND NAME or Authorized Generic; QL(30 ML per 30 day(s) retail; 30 ML per 30 days mail)	INSULIN ASPART PROT & ASPART SUSP	P	Brand Preferred; QL(40 ML per 31 day(s) retail)
HUMULIN 70/30 KWIKPEN SUPN	P	QL(1 ML daily)	INSULIN ASPART SOLN IJ	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)
HUMULIN 70/30 SUSP	P	Limit 40mls per month	INSULIN DEGLUDEC FLEXTOUCH SOPN 100 UNIT/ML	NP	Brand Preferred; QL(1.5 ML daily)
HUMULIN N KWIKPEN SUPN	P	QL(1 ML daily)	INSULIN DEGLUDEC FLEXTOUCH SOPN 200 UNIT/ML	NP	Brand Preferred; QL(0.9 ML daily)
HUMULIN N SUSP	P	Limit 40mls per month	INSULIN DEGLUDEC SOLN	NP	Brand Preferred; QL(1.5 ML daily)
HUMULIN R U-500 (CONCENTRATED) SOLN SC	P		INSULIN GLARGINE MAX SOLOSTAR SOPN	NP	

Drug Name	Drug Tier	Requirements/ Limits
INSULIN GLARGINE SOLOSTAR SOPN 300 UNIT/ML	NP	
INSULIN GLARGINE SOLOSTAR SOPN 100 UNIT/ML	NC	Brand Preferred
INSULIN GLARGINE SOLN	NC	Brand Preferred
INSULIN GLARGINE-YFGN SOLN	NC	Brand Preferred; QL(30 ML per 31 day(s) retail; 30 ML per 31 days mail)
INSULIN GLARGINE-YFGN SOLN	NP	Brand Preferred; QL(30 ML per 31 day(s) retail; 30 ML per 31 days mail)
INSULIN GLARGINE-YFGN SOPN	NP	Brand Preferred; QL(30 ML per 31 day(s) retail; 30 ML per 31 days mail)
INSULIN GLARGINE-YFGN SOPN	NC	Brand Preferred; QL(30 ML per 31 day(s) retail; 30 ML per 31 days mail)
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 LISPRO JUNIOR KWIKPEN SOPN	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)

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

Drug Name	Drug Tier	Requirements/ Limits
NOVOLIN R FLEXPEN SOPN IJ	NP	
NOVOLIN R RELION SOLN IJ	NP	
NOVOLIN R SOLN IJ	NP	Limit 40mls per month
NOVOLOG 70/30 FLEXPEN RELION SUPN	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)
NOVOLOG FLEXPEN RELION SOPN	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)
NOVOLOG FLEXPEN SOPN	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)
NOVOLOG MIX 70/30 FLEXPEN SUPN	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)
NOVOLOG MIX 70/30 RELION SUSP	P	USE BRAND NAME or Authorized Generic
NOVOLOG MIX 70/30 SUSP	P	USE BRAND NAME or Authorized Generic
NOVOLOG PENFILL SOCT	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)

Drug Name	Drug Tier	Requirements/ Limits
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	Brand Preferred
SEMGLEE (YFGN) SOLN	NC	Brand Preferred; QL(30 ML per 31 day(s) retail; 30 ML per 31 days mail)
SEMGLEE (YFGN) SOLN	NP	Brand Preferred; QL(30 ML per 31 day(s) retail; 30 ML per 31 days mail)
SEMGLEE (YFGN) SOPN	NC	Brand Preferred; QL(30 ML per 31 day(s) retail; 30 ML per 31 days mail)
SEMGLEE (YFGN) SOPN	NP	Brand Preferred; 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 100 UNIT/ML	P	Brand Preferred; QL(1.5 ML daily)

Drug Name	Drug Tier	Requirements/ Limits
TRESIBA FLEXTOUCH SOPN 200 UNIT/ML	P	Brand Preferred; QL(0.9 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	
Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors		
<i>dapagliflozin propanediol</i> 10 MG	NP	ST
<i>dapagliflozin propanediol</i> 5 MG	NP	Brand Preferred; 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</i> 1 MG, 2 MG	P	QL(4 EA daily)
<i>glimepiride</i> 3 MG	P	
<i>glimepiride</i> 4 MG	NC	QL(2 EA daily)
<i>glimepiride</i> 4 MG	P	QL(2 EA daily)
GLIPIZIDE POWD	NC	
<i>glipizide</i> TABS	P	
<i>glipizide</i> TB24	P	
GLUCOTROL XL TB24 2.5 MG (<i>glipizide</i>)	NC	
GLUCOTROL XL TB24 5 MG, 10 MG (<i>glipizide</i>)	NP	
<i>glyburide micronized</i> 1.5 MG, 3 MG, 6 MG	P	

Drug Name	Drug Tier	Requirements/ Limits
GLYBURIDE POWD	NC	
<i>glyburide</i> TABS	P	
GLYNASE (<i>glyburide micronized</i>)	NC	
ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea		
Antidiarrheal - Chloride Channel Antagonists		
MYTESI	NC	
Antidiarrheal/Probiotic Agents - Misc.		
BISMUTH SUBGALLATE POWD	NC	RX/OTC
<i>bismuth subsalicylate</i> CHEW 262 MG	C	
<i>bismuth subsalicylate</i> SUSP 525 MG/15ML, 1050 MG/30ML	C	
PEPTO-BISMOL MAX STRENGTH SUSP (<i>bismuth subsalicylate</i>)	NC	
PEPTO-BISMOL TO-GO CHEW (<i>bismuth subsalicylate</i>)	NC	
PEPTO-BISMOL CHEW (<i>bismuth subsalicylate</i>)	NC	
Antiperistaltic Agents		
<i>diphenoxylate w/ atropine</i> LIQD	C	
<i>diphenoxylate w/ atropine</i> TABS	C	
IMODIUM A-D CAPS (<i>loperamide hcl</i>)	NC	QL(8 EA daily); RX/OTC
IMODIUM A-D TABS (<i>loperamide hcl</i>)	NC	QL(8 EA daily)
LOMOTIL TABS (<i>diphenoxylate w/ atropine</i>)	NC	
<i>loperamide hcl</i> CAPS	C	QL(8 EA daily); RX/OTC
LOPERAMIDE HCL POWD	NC	

Drug Name	Drug Tier	Requirements/ Limits
<i>loperamide hcl TABS</i>	C	QL(8 EA daily)
MOTOFEN	NC	
<i>opium tincture</i>	NC	
Gastrointestinal Adsorbents		
KAOLIN	NC	RX/OTC
PECTIN	NC	RX/OTC
ANTIDOTES AND SPECIFIC ANTAGONISTS		
Antidote Combinations		
PREVDUO	NC	
Antidotes - Chelating Agents		
CHEMET	C	
<i>deferasirox PACK</i>	C	SP; PA
<i>deferasirox TABS</i>	C	SP; PA
<i>deferasirox TBSO</i>	C	SP; PA
<i>deferiprone TABS</i>	NC	SP
EXJADE TBSO (<i>deferasirox</i>)	NC	SP; PA
JADENU SPRINKLE PACK (<i>deferasirox</i>)	NC	SP; PA
JADENU TABS (<i>deferasirox</i>)	NC	SP; PA
Antidotes and Specific Antagonists		
<i>acetylcysteine (antidote) SOLN</i>	NC	
CHARCOAL ACTIVATED POWD	NC	RX/OTC
CHARCOAL POWD	NC	RX/OTC
EDETATE CALCIUM DISODIUM POWD	NC	
EDETATE CALCIUM DISODIUM SOLN	NC	
<i>fomepizole 1.5 GM/1.5ML</i>	NC	
<i>methylene blue (antidote) SOLN IV</i>	NC	
PRAXBIND	NC	
PROTOPAM CHLORIDE SOLR	NC	

Drug Name	Drug Tier	Requirements/ Limits
Benzodiazepine Antagonists		
<i>flumazenil</i>	NC	
Opioid Antagonists		
KLOXXADO LIQD	NP	
NALMEFENE HCL IJ	NC	
<i>naloxone hcl LIQD</i>	NC	Brand Preferred; QL(4 EA per 90 day(s) retail); RX/OTC
<i>naloxone hcl LIQD</i>	NP	QL(4 EA per 90 day(s) retail); RX/OTC
<i>naloxone hcl LIQD</i>	NP	Brand Preferred; QL(4 EA per 90 day(s) retail); RX/OTC
<i>naloxone hcl SOCT</i>	P	QL(2 ML per 90 day(s) retail)
<i>naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML</i>	P	QL(2 ML per 90 day(s) retail)
<i>naloxone hcl SOSY 2 MG/2ML</i>	P	QL(4 ML per 90 day(s) retail)
<i>naloxone hcl SOSY 0.4 MG/ML</i>	P	
<i>naltrexone hcl</i>	C	
NARCAN LIQD (<i>naloxone hcl</i>)	P	Brand Preferred; QL(4 EA per 90 day(s) retail); RX/OTC
OPVEE NA	NP	
REXTOVY LIQD	NP	
VIVITROL	P	QL(1 EA per 30 day(s) retail); SP
ZIMHI SOSY	NP	
ANTIEMETICS - Drugs to Treat Nausea and Vomiting		
5-HT3 Receptor Antagonists		
ANZEMET TABS 50 MG	NP	

Drug Name	Drug Tier	Requirements/ Limits
<i>granisetron hcl SOLN IV 1 MG/ML, 4 MG/4ML</i>	NC	
<i>granisetron hcl TABS</i>	NP	
<i>ondansetron hcl SOLN PO 4 MG/5ML</i>	P	QL(50 ML per 31 day(s) retail)
<i>ondansetron hcl SOLN IJ</i>	C	
<i>ondansetron hcl SOSY</i>	C	
<i>ondansetron hcl TABS 4 MG, 8 MG</i>	P	QL(20 EA per 31 day(s) retail)
<i>ondansetron TBDP 16 MG</i>	P	
<i>ondansetron TBDP 4 MG, 8 MG</i>	P	QL(20 EA per 31 day(s) retail)
<i>palonosetron hcl SOLN</i>	NC	
<i>palonosetron hcl SOSY</i>	NC	
POSFREA SOLN	NC	
SANCUSO PTCH	NP	
SUSTOL PRSY	NC	
Antiemetics - Anticholinergic		
ANTIVERT CHEW (<i>meclizine hcl</i>)	NP	RX/OTC
ANTIVERT TABS 50 MG (<i>meclizine hcl</i>)	NP	
DIMENHYDRINATE SOLN	NC	
<i>meclizine hcl CHEW</i>	NC	RX/OTC
MECLIZINE HCL POWD	NC	
<i>meclizine hcl TABS 12.5 MG, 25 MG, 50 MG</i>	NP	RX/OTC
<i>meclizine hcl TABS 12.5 MG, 25 MG</i>	NC	RX/OTC
<i>scopolamine</i>	NP	Brand Preferred
TIGAN SOLN	NC	
TRANSDERM-SCOP (<i>scopolamine</i>)	P	Brand Preferred
<i>trimethobenzamide hcl CAPS</i>	NP	
Antiemetics - Antidopaminergic		
BARHEMSYS	NC	

Drug Name	Drug Tier	Requirements/ Limits
Antiemetics - Miscellaneous		
AKYNZEO	NP	
AKYNZEO (READY-TO-USE) SOLN	NC	
AKYNZEO (TO-BE-DILUTED) SOLN	NC	
AKYNZEO SOLR	NC	
BONJESTA TBCR	NP	
DICLEGIS TBEC (<i>doxylamine-pyridoxine</i>)	NP	
<i>doxylamine-pyridoxine TBEC</i>	NP	
<i>dronabinol CAPS</i>	NP	
MARINOL CAPS 2.5 MG (<i>dronabinol</i>)	NP	
Substance P/Neurokinin 1 (NK1) Receptor Antagonists		
APONVIE EMUL	NC	
<i>aprepitant CAPS</i>	P	
<i>aprepitant MISC</i>	P	
EMEND BIPACK CAPS 80 MG (<i>aprepitant</i>)	NP	
EMEND TRIPACK CAPS (<i>aprepitant</i>)	NP	
EMEND SUSR	NP	
FOCINVEZ SOLN	NC	
<i>fosaprepitant dimeglumine SOLR</i>	NC	
ANTIFUNGALS - Drugs to Treat Fungal Infections		
Antifungal - Glucan Synthesis Inhibitors		
BREXAFEMME	NP	
<i>caspofungin acetate</i>	NC	
CASPOFUNGIN ACETATE	NC	
ERAXIS	NC	
<i>micalfungin sodium</i>	NC	
MICAFUNGIN SODIUM	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MICAFUNGIN SODIUM-NACL	NC		<i>posaconazole SOLN</i>	NC	
REZZAYO	NC		<i>posaconazole SUSP</i>	NC	
Antifungals			<i>posaconazole TBEC</i>	NC	
ABELCET	NC		SPORANOX CAPS (<i>itraconazole</i>)	NP	QL(1 EA daily)
<i>amphotericin b IV</i>	NC		SPORANOX SOLN (<i>itraconazole</i>)	NP	
<i>amphotericin b liposome</i>	NC		TOLSURA CAPS	NC	
<i>flucytosine</i>	NC		VFEND SUSR (<i>voriconazole</i>)	NP	
<i>griseofulvin microsize SUSP</i>	P		VFEND TABS (<i>voriconazole</i>)	NP	
<i>griseofulvin microsize TABS</i>	NP		VIVJOA	NC	
<i>griseofulvin ultramicrosize</i>	P		<i>voriconazole SOLR</i>	NC	
<i>nystatin TABS</i>	P	QL(6 EA daily)	VORICONAZOLE SOLR	NC	
<i>terbinafine hcl TABS</i>	P	QL(1 EA daily; 90 EA per 120 day(s) retail)	<i>voriconazole SUSR</i>	NP	
Imidazole-Related Antifungals			<i>voriconazole TABS</i>	NP	
CRESEMBA CAPS	NP		ANTIHIISTAMINES - Drugs to Treat Allergies		
CRESEMBA SOLR	NC		Antihistamines - Alkylamines		
DIFLUCAN SUSR 40 MG/ML (<i>fluconazole</i>)	NP	QL(70 ML per fill retail)	BROMPHENIRAMINE MALEATE POWD	NC	
DIFLUCAN TABS 100 MG, 200 MG (<i>fluconazole</i>)	NP		CHLORPHENIRAMINE MALEATE POWD	NC	
<i>fluconazole in nacl 0.9 %-200 MG/100ML, 0.9 %-400 MG/200ML</i>	NC		<i>chlorpheniramine maleate SYRP</i>	C	
<i>fluconazole SUSR</i>	P	QL(70 ML per fill retail)	CHLOR-TRIMETON SYRP (<i>chlorpheniramine maleate</i>)	NC	
<i>fluconazole TABS 50 MG</i>	P	QL(3 EA per 14 day(s) retail)	<i>dexchlorpheniramine maleate SOLN</i>	C	
<i>fluconazole TABS 100 MG, 200 MG</i>	P		Antihistamines - Ethanolamines		
<i>fluconazole TABS 150 MG</i>	P	QL(2 EA per fill retail)	BENADRYL ALLERGY ULTRATABS TABS (<i>diphenhydramine hcl</i>)	NC	QL(4 EA daily)
<i>itraconazole CAPS</i>	NP	QL(1 EA daily)	BENADRYL ALLERGY CAPS (<i>diphenhydramine hcl</i>)	NC	QL(4 EA daily)
<i>itraconazole SOLN</i>	NP		BENADRYL ALLERGY TABS (<i>diphenhydramine hcl</i>)	NC	QL(4 EA daily)
<i>ketoconazole</i>	NP				
MICONAZOLE	NC				
NOXAFIL PACK	NC				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>carbinoxamine maleate SOLN</i>	NC		ALLEGRA ALLERGY TABS 180 MG (<i>fexofenadine hcl</i>)	NC	QL(1 EA daily)
<i>carbinoxamine maleate SUER</i>	NC		<i>cetirizine hcl CHEW</i>	C	QL(1 EA daily)
<i>carbinoxamine maleate TABS 4 MG</i>	NC		<i>cetirizine hcl SOLN PO</i>	P	QL(300 ML per fill retail); AL(Up to 12 yrs old); RX/OTC
CARBINOXAMINE MALEATE TABS	NC		<i>cetirizine hcl TABS</i>	NC	QL(1 EA daily)
CLEMASTINE FUMARATE POWD	NC		<i>cetirizine hcl TABS</i>	P	QL(1 EA daily)
<i>clemastine fumarate SYRP</i>	NC		CLARINEX TABS (<i>desloratadine</i>)	NP	
<i>clemastine fumarate TABS 2.68 MG</i>	NC		CLARITIN CAPS (<i>loratadine</i>)	NC	
<i>diphenhydramine hcl CAPS</i>	C	QL(4 EA daily)	<i>desloratadine TABS</i>	NP	
<i>diphenhydramine hcl CHEW</i>	NC		<i>desloratadine TBDP</i>	NP	AL(Up to 12 yrs old)
<i>diphenhydramine hcl ELIX 12.5 MG/5ML</i>	C	QL(240 ML per fill retail)	<i>fexofenadine hcl TABS 60 MG</i>	C	QL(2 EA daily)
DIPHENHYDRAMINE HCL POWD	NC		<i>fexofenadine hcl TABS 180 MG</i>	C	QL(1 EA daily)
<i>diphenhydramine hcl SOLN 50 MG/ML</i>	NC		<i>levocetirizine dihydrochloride SOLN</i>	NP	AL(Up to 12 yrs old); RX/OTC
<i>diphenhydramine hcl TABS 25 MG</i>	C	QL(4 EA daily)	<i>levocetirizine dihydrochloride TABS</i>	P	QL(1 EA daily); RX/OTC
DOXYLAMINE SUCCINATE POWD	NC	RX/OTC	<i>levocetirizine dihydrochloride TABS</i>	NC	QL(1 EA daily); RX/OTC
RYVENT TABS	NC		<i>loratadine CAPS</i>	NC	
Antihistamines - Ethylenediamines			<i>loratadine CHEW</i>	P	
PEDIACLEAR 8 CHILDRENS LIQD	NC		<i>loratadine TABS</i>	NC	QL(1 EA daily)
PYRILAMINE MALEATE CRYST	NC		<i>loratadine TABS</i>	P	QL(1 EA daily)
PYRILAMINE MALEATE POWD	NC		<i>loratadine TBDP 10 MG</i>	P	QL(1 EA daily); AL(Up to 12 yrs old)
TRIPLELENAMINE HCL	NC		ZYRTEC CHILDRENS ALLERGY CHEW 10 MG (<i>cetirizine hcl</i>)	NC	QL(1 EA daily)
Antihistamines - Non-Sedating			ZYRTEC CHEW 10 MG (<i>cetirizine hcl</i>)	NC	QL(1 EA daily)
ALLEGRA ALLERGY TABS 60 MG (<i>fexofenadine hcl</i>)	NC	QL(2 EA daily)	Antihistamines - Phenothiazines		
			<i>promethazine hcl SOLN PO 6.25 MG/5ML</i>	NC	QL(240 ML per fill retail); AL(At least 2 yrs old)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<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>cholestyramine POWD</i>	P	
<i>promethazine hcl SOLN IJ 25 MG/ML, 50 MG/ML</i>	NC		<i>colesevelam hcl PACK</i>	NC	
<i>promethazine hcl SUPP</i>	P	QL(12 EA per fill retail); AL(At least 2 yrs old)	<i>colesevelam hcl PACK</i>	NP	
<i>promethazine hcl TABS</i>	P	AL(At least 2 yrs old)	<i>colesevelam hcl TABS</i>	NC	
Antihistamines - Piperidines			<i>colesevelam hcl TABS</i>	NP	
<i>cyproheptadine hcl SYRP</i>	C		COLESTID GRAN (<i>colestipol hcl</i>)	NP	
<i>cyproheptadine hcl TABS</i>	C		COLESTID TABS (<i>colestipol hcl</i>)	NP	
ANTHYPERLIPIDEMICS - Drugs to Treat High Cholesterol			<i>colestipol hcl GRAN</i>	P	
Adenosine Triphosphate-Citrate Lyase (ACL) Inhibitors			<i>colestipol hcl PACK</i>	P	
NEXLETOL	NC		<i>colestipol hcl TABS</i>	P	
Angiopoietin-like Protein Inhibitors			QUESTRAN LIGHT POWD (<i>cholestyramine light</i>)	NP	
EVKEEZA	NC	SP	QUESTRAN PACK (<i>cholestyramine</i>)	NP	
Antihyperlipidemics - Combinations			QUESTRAN POWD (<i>cholestyramine</i>)	NP	
<i>ezetimibe-simvastatin</i>	NP	QL(1 EA daily)	WELCHOL PACK (<i>colesevelam hcl</i>)	NP	
NEXLIZET	NC		WELCHOL TABS (<i>colesevelam hcl</i>)	NP	
VYTORIN (<i>ezetimibe-simvastatin</i>)	NP	QL(1 EA daily)	Fibric Acid Derivatives		
Antihyperlipidemics - Misc.			<i>choline fenofibrate</i>	NP	
<i>icosapent ethyl</i>	P		<i>fenofibrate micronized 134 MG, 200 MG</i>	NP	QL(1 EA daily)
<i>omega-3-acid ethyl esters</i>	P		<i>fenofibrate micronized 67 MG</i>	NP	QL(2 EA daily)
Bile Acid Sequestrants			<i>fenofibrate micronized 43 MG, 90 MG, 130 MG</i>	NP	
<i>cholestyramine light PACK</i>	NP		<i>fenofibrate CAPS</i>	NP	
<i>cholestyramine light PACK</i>	P		<i>fenofibrate TABS 160 MG</i>	NP	QL(1 EA daily)
<i>cholestyramine light POWD</i>	P		<i>fenofibrate TABS 40 MG, 120 MG</i>	NP	
<i>cholestyramine light POWD</i>	NP		<i>fenofibrate TABS 54 MG</i>	NP	QL(3 EA daily)
<i>cholestyramine PACK</i>	P		<i>fenofibrate TABS 48 MG, 145 MG</i>	P	
			<i>fenofibric acid</i>	NP	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FENOGLIDE TABS (fenofibrate)	NP		rosuvastatin calcium TABS	P	QL(1 EA daily)
FIBRICOR (fenofibric acid)	NP		simvastatin TABS 80 MG	P	
GEMFIBROZIL POWD	NC		simvastatin TABS 5 MG, 10 MG, 20 MG, 40 MG	P	QL(1 EA daily)
gemfibrozil TABS	P	QL(2 EA daily)	simvastatin TABS 5 MG, 10 MG, 20 MG, 40 MG	NC	QL(1 EA daily)
gemfibrozil TABS	NC	QL(2 EA daily)	ZOCOR TABS 10 MG, 20 MG, 40 MG (simvastatin)	NP	QL(1 EA daily)
LIPOFEN CAPS (fenofibrate)	NP		ZYPITAMAG 2 MG, 4 MG	NP	
LOPID TABS (gemfibrozil)	NP	QL(2 EA daily)	Intestinal Cholesterol Absorption Inhibitors		
TRICOR TABS (fenofibrate)	NP		ezetimibe	P	
TRILIPIX (choline fenofibrate)	NP		ZETIA (ezetimibe)	NP	
HMG CoA Reductase Inhibitors			Nicotinic Acid Derivatives		
ALTOPREV TB24 20 MG, 40 MG, 60 MG	NP		niacin (antihyperlipidemic) TBCR	NP	
ATORVALIQ SUSP	NP		ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure		
atorvastatin calcium TABS	NC	QL(1 EA daily)	ACE Inhibitors		
atorvastatin calcium TABS	P	QL(1 EA daily)	ACCUPRIL (quinapril hcl)	NP	
CRESTOR TABS (rosuvastatin calcium)	NP	QL(1 EA daily)	ALTACE CAPS 1.25 MG, 2.5 MG, 5 MG, 10 MG (ramipril)	NP	QL(2 EA daily)
EZALLOR SPRINKLE CPSP	NP		benazepril hcl 40 MG	P	QL(2 EA daily)
FLOLIPID SUSP	NP		benazepril hcl 5 MG, 10 MG, 20 MG	P	QL(1 EA daily)
fluvastatin sodium CAPS	P		captopril	NC	QL(3 EA daily)
fluvastatin sodium TB24	NP		captopril	P	QL(3 EA daily)
LESCOL XL TB24 (fluvastatin sodium)	NP		enalapril maleate SOLN	NP	
LIPITOR TABS (atorvastatin calcium)	NC	QL(1 EA daily)	enalapril maleate TABS	NC	QL(2 EA daily)
LIPITOR TABS (atorvastatin calcium)	NP	QL(1 EA daily)	enalapril maleate TABS	P	QL(2 EA daily)
LIVALO (pitavastatin calcium)	NP		enalaprilat SOLN	NC	
lovastatin TABS 40 MG	P	QL(2 EA daily)	EPANED SOLN (enalapril maleate)	NP	
lovastatin TABS 10 MG, 20 MG	P	QL(1 EA daily)	fosinopril sodium	NP	QL(1 EA daily)
pitavastatin calcium	NP		lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG	P	
pravastatin sodium	P	QL(1 EA daily)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
LOTENSIN 40 MG (benazepril hcl)	NP	QL(2 EA daily)	valsartan TABS	NC	QL(1 EA daily)
LOTENSIN 10 MG, 20 MG (benazepril hcl)	NP	QL(1 EA daily)	valsartan TABS	P	QL(1 EA daily)
moexipril hcl	NP		Antiadrenergic Antihypertensives		
perindopril erbumine	NP		CARDURA (doxazosin mesylate)	NP	
QBRELIS SOLN	NP		CLONIDINE HCL POWD	NC	
quinapril hcl	NP		clonidine hcl TABS	P	
ramipril CAPS	NP	QL(2 EA daily)	clonidine PTWK	P	
trandolapril 1 MG, 2 MG	NP	QL(1 EA daily)	clonidine TB24	NP	
trandolapril 4 MG	NP	QL(2 EA daily)	doxazosin mesylate	P	
VASOTEC TABS (enalapril maleate)	NP	QL(2 EA daily)	guanfacine hcl	P	
ZESTRIL TABS (lisinopril)	NP		methyldopa TABS	P	
Agents for Pheochromocytoma			methyldopa TABS 500 MG	C	
phenoxybenzamine hcl	NC		MINIPRESS CAPS (prazosin hcl)	NC	
phentolamine mesylate SOLR	NC		NEXICLON XR TB24 (clonidine)	NP	
Angiotensin II Receptor Antagonists			prazosin hcl CAPS	C	
ATACAND (candesartan cilexetil)	NP		PRAZOSIN HCL POWD	NC	
AVAPRO 150 MG, 300 MG (irbesartan)	NP	QL(1 EA daily)	RESERPINE POWD	NC	
BENICAR (olmesartan medoxomil)	NP	QL(1 EA daily)	terazosin hcl	P	
candesartan cilexetil	NP		TEZRULY PO 1 MG/ML	NP	
COZAAR (losartan potassium)	NP	QL(1 EA daily)	Antihypertensive Combinations		
DIOVAN TABS (valsartan)	NP	QL(1 EA daily)	ACCURETIC 12.5 MG-20 MG (quinapril-hydrochlorothiazide)	NP	QL(4 EA daily)
EDARBI	NP		ACCURETIC 12.5 MG-10 MG (quinapril-hydrochlorothiazide)	NP	QL(3 EA daily)
irbesartan	NC	QL(1 EA daily)	amlodipine besylate-benazepril hcl	P	QL(1 EA daily)
irbesartan	P	QL(1 EA daily)	amlodipine besylate-olmesartan medoxomil	NP	ST
losartan potassium	P	QL(1 EA daily)	amlodipine besylate-olmesartan medoxomil	NC	
MICARDIS (telmisartan)	NP		amlodipine besylate-valsartan	P	
olmesartan medoxomil	P	QL(1 EA daily)			
olmesartan medoxomil	NC	QL(1 EA daily)			
telmisartan	P				
valsartan SOLN	NP				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>amlodipine-valsartan-hydrochlorothiazide</i>	P		<i>HYZAAR (losartan potassium & hydrochlorothiazide)</i>	NP	QL(1 EA daily)
<i>ATACAND HCT (candesartan cilexetil-hydrochlorothiazide)</i>	NP		<i>irbesartan-hydrochlorothiazide</i>	P	QL(1 EA daily)
<i>atenolol & chlorthalidone</i>	P	QL(2 EA daily)	<i>irbesartan-hydrochlorothiazide</i>	NC	QL(1 EA daily)
<i>AVALIDE (irbesartan-hydrochlorothiazide)</i>	NP	QL(1 EA daily)	<i>lisinopril & hydrochlorothiazide</i>	NC	
<i>AZOR (amlodipine besylate-olmesartan medoxomil)</i>	NP	ST	<i>lisinopril & hydrochlorothiazide</i>	P	
<i>benazepril & hydrochlorothiazide</i>	P	QL(1 EA daily)	<i>losartan potassium & hydrochlorothiazide</i>	P	QL(1 EA daily)
<i>BENICAR HCT (olmesartan medoxomil-hydrochlorothiazide)</i>	P	Brand Preferred; QL(1 EA daily)	<i>losartan potassium & hydrochlorothiazide</i>	NC	QL(1 EA daily)
<i>bisoprolol & hydrochlorothiazide 6.25 MG-10 MG, 6.25 MG-5 MG</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>bisoprolol & hydrochlorothiazide 6.25 MG-2.5 MG</i>	P		<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>candesartan cilexetil-hydrochlorothiazide</i>	NP		<i>metoprolol & hydrochlorothiazide TABS 50 MG-100 MG</i>	NP	QL(1 EA daily)
<i>captopril & hydrochlorothiazide 15 MG-25 MG, 15 MG-50 MG, 25 MG-25 MG</i>	NP	QL(2 EA daily)	<i>metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 25 MG-50 MG</i>	NP	QL(2 EA daily)
<i>captopril & hydrochlorothiazide 25 MG-50 MG</i>	NP	QL(3 EA daily)	<i>MICARDIS HCT (telmisartan-hydrochlorothiazide)</i>	NP	QL(1 EA daily)
<i>DIOVAN HCT (valsartan-hydrochlorothiazide)</i>	NP	QL(1 EA daily)	<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>	NP	ST
<i>EDARBYCLOR</i>	NP		<i>olmesartan medoxomil-hydrochlorothiazide</i>	NP	QL(1 EA daily)
<i>enalapril maleate & hydrochlorothiazide</i>	P	QL(2 EA daily)	<i>olmesartan medoxomil-hydrochlorothiazide</i>	NP	Brand Preferred; QL(1 EA daily)
<i>EXFORGE (amlodipine besylate-valsartan)</i>	NP		<i>quinapril-hydrochlorothiazide 25 MG-20 MG</i>	NP	QL(2 EA daily)
<i>EXFORGE HCT (amlodipine-valsartan-hydrochlorothiazide)</i>	NP				
<i>fosinopril sodium & hydrochlorothiazide</i>	NP	QL(1 EA daily)			

Drug Name	Drug Tier	Requirements/ Limits
<i>quinapril-hydrochlorothiazide 12.5 MG-20 MG</i>	NP	QL(4 EA daily)
<i>quinapril-hydrochlorothiazide 12.5 MG-10 MG</i>	NP	QL(3 EA daily)
TEKTURNA HCT	NC	ST
<i>telmisartan-amlodipine</i>	NP	ST
<i>telmisartan-hydrochlorothiazide</i>	P	QL(1 EA daily)
TENORETIC 100 (<i>atenolol & chlorthalidone</i>)	NP	QL(2 EA daily)
TENORETIC 50 (<i>atenolol & chlorthalidone</i>)	NP	QL(2 EA daily)
<i>trandolapril-verapamil hcl</i>	P	
TRIBENZOR (<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>)	NP	ST
<i>valsartan-hydrochlorothiazide</i>	P	QL(1 EA daily)
VASERETIC 25 MG-10 MG (<i>enalapril maleate & hydrochlorothiazide</i>)	NP	QL(2 EA daily)
ZESTORETIC (<i>lisinopril & hydrochlorothiazide</i>)	NP	
ZIAC 6.25 MG-2.5 MG (<i>bisoprolol & hydrochlorothiazide</i>)	NC	
ZIAC 6.25 MG-10 MG, 6.25 MG-5 MG (<i>bisoprolol & hydrochlorothiazide</i>)	NC	QL(1 EA daily)
Direct Renin Inhibitors		
<i>aliskiren fumarate</i>	NP	Brand Preferred; ST
TEKTURNA (<i>aliskiren fumarate</i>)	P	Brand Preferred; ST
Endothelin Receptor Antagonists		
TRYVIO	NC	
Selective Aldosterone Receptor Antagonists (SARAs)		
<i>eplerenone</i>	NC	

Drug Name	Drug Tier	Requirements/ Limits
Vasodilators		
<i>hydralazine hcl SOLN</i>	NC	
<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)
<i>nitroprusside sodium</i>	NC	
<i>nitroprusside sodium-sodium chloride</i>	NC	
ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections		
Anti-infective Agents - Misc.		
AEMCOLO	NP	
LIKMEZ SUSP	NP	
<i>metronidazole CAPS</i>	P	
<i>metronidazole SOLN</i>	NC	
<i>metronidazole TABS</i>	P	
<i>pentamidine isethionate IJ</i>	NC	
<i>tinidazole 500 MG</i>	NC	ST
<i>tinidazole</i>	NP	ST
TRIMETHOPRIM POWD	NC	
<i>trimethoprim TABS</i>	C	
XIFAXAN	NP	
Anti-infective Misc. - Combinations		
BACTRIM DS TABS (<i>sulfamethoxazole-trimethoprim</i>)	NC	
BACTRIM TABS (<i>sulfamethoxazole-trimethoprim</i>)	NC	
<i>methenamine-hyoscamine-methylene blue-sodium phosphate TABS</i>	NC	
<i>methenamine-hyosc-methylene blue-benzoic acid-phenyl sal</i>	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>methenamine-hyosc-methylene blue-sod phos-phenyl sal CAPS</i>	NC		Glycopeptides		
<i>methenamine-hyosc-methylene blue-sod phos-phenyl sal TABS 81 MG</i>	NC		DALVANCE	NC	
<i>methenamine-hyosc-methylene blue-sod phos-phenyl sal TABS 81.6 MG</i>	C		FIRVANQ SOLR PO (<i>vancomycin hcl</i>)	NP	QL(300 ML per fill retail; 300 per fill mail)
<i>sulfamethoxazole-trimethoprim SOLN</i>	NC		FIRVANQ SOLR PO 50 MG/ML (<i>vancomycin hcl</i>)	NC	QL(300 ML per fill retail; 300 per fill mail)
<i>sulfamethoxazole-trimethoprim SUSP</i>	C		KIMYRSA	NC	
<i>sulfamethoxazole-trimethoprim TABS</i>	C		ORBACTIV	NC	
URETRON D/S TABS 81.6 MG	C		VANCOCIN CAPS 250 MG (<i>vancomycin hcl</i>)	NP	QL(8 EA daily)
URIBEL	NC		VANCOCIN CAPS 125 MG (<i>vancomycin hcl</i>)	NP	QL(4 EA daily)
Antiprotozoal Agents			VANCOMYCIN HCL IN DEXTROSE 1 GM/200ML-5 %, 1.25 GM/250ML-5 %, 1.5 GM/300ML-5 %, 500 MG/100ML-5 %, 750 MG/150ML-5 %	NC	
<i>atovaquone</i>	NC		VANCOMYCIN HCL IN NACL SOLN 1 GM/200ML-0.9 %, 500 MG/100ML-0.9 %, 750 MG/150ML-0.9 %	NC	
LAMPIT	NC		<i>vancomycin hcl CAPS 125 MG</i>	NC	QL(4 EA daily)
<i>nitazoxanide TABS</i>	NP	ST	<i>vancomycin hcl CAPS 250 MG</i>	P	QL(8 EA daily)
Carbapenems			<i>vancomycin hcl CAPS 125 MG</i>	P	QL(4 EA daily)
<i>imipenem-cilastatin IV</i>	NC		VANCOMYCIN HCL SOLN IV	NC	
<i>meropenem</i>	NC		<i>vancomycin hcl SOLR IV 1.25 GM, 1.5 GM, 5 GM, 10 GM, 750 MG</i>	NC	
MEROPENEM	NC		<i>vancomycin hcl SOLR IV 1 GM</i>	C	QL(14 EA per fill retail)
MEROPENEM-SODIUM CHLORIDE	NC		<i>vancomycin hcl SOLR IV 500 MG</i>	C	QL(14 EA per 31 day(s) retail)
RECARBRIO	NC		<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)
Chloramphenicols					
<i>chloramphenicol sodium succinate</i>	NC				
Cyclic Lipopeptides					
CUBICIN RF (<i>daptomycin</i>)	NC				
<i>daptomycin</i>	NC				
DAPTOMYCIN	NC				
DAPTOMYCIN-SODIUM CHLORIDE	NC				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
VANCOMYCIN HCL SOLR IV 500 MG	C	QL(14 EA per 31 day(s) retail)	<i>linezolid TABS</i>	NC	
VANCOMYCIN HCL SOLR IV 1.25 GM, 1.5 GM, 1.75 GM, 2 GM, 5 GM, 10 GM, 750 MG	NC		SIVEXTRO SOLR	NC	
VANCOMYCIN HCL SOLR IV 1 GM	C	QL(14 EA per fill retail)	SIVEXTRO TABS	C	QL(6 EA per fill retail); PA
VIBATIV 750 MG	NC		ZYVOX SOLN	NC	
Leprostatics			Polymyxins		
<i>dapsone</i>	C		<i>colistimethate sodium</i>	NC	
Lincosamides			POLYMYXIN B SULFATE POWD	NC	
CLEOCIN (<i>clindamycin palmitate hydrochloride</i>)	NC	QL(300 ML per fill retail)	<i>polymyxin b sulfate SOLR</i>	NC	
CLEOCIN (<i>clindamycin hcl</i>)	NC		Urinary Anti-infectives		
CLEOCIN PHOSPHATE SOLN IJ	NC		<i>fosfomycin tromethamine</i>	NC	
<i>clindamycin hcl 75 MG</i>	NC		MACROBID (<i>nitrofurantoin monohyd macro</i>)	NC	
<i>clindamycin hcl 150 MG, 300 MG</i>	C		MACRODANTIN (<i>nitrofurantoin macrocrystal</i>)	NC	
<i>clindamycin palmitate hydrochloride</i>	C	QL(300 ML per fill retail)	<i>methenamine hippurate</i>	NC	
<i>clindamycin phosphate in d5w</i>	NC		<i>methenamine mandelate</i>	C	
<i>clindamycin phosphate SOLN IJ 9 GM/60ML, 300 MG/2ML, 600 MG/4ML, 900 MG/6ML, 9000 MG/60ML</i>	NC		MONUROL (<i>fosfomycin tromethamine</i>)	NC	
<i>lincomycin hcl</i>	NC		NALIDIXIC ACID	NC	
Monobactams			<i>nitrofurantoin</i>	C	QL(40 ML daily)
<i>aztreonam</i>	NC		NITROFURANTOIN	NC	QL(40 ML daily)
CAYSTON	NP	SP	<i>nitrofurantoin macrocrystal 50 MG, 100 MG</i>	C	
Oxazolidinones			<i>nitrofurantoin macrocrystal 25 MG</i>	NC	
LINEZOLID IN SODIUM CHLORIDE	NC		<i>nitrofurantoin monohyd macro</i>	C	
<i>linezolid SOLN</i>	NC		ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)		
<i>linezolid SUSR</i>	NC		Antimalarial Combinations		
			<i>atovaquone-proguanil hcl</i>	NC	
			COARTEM	C	QL(24 EA per fill retail)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Antimalarials			NEOSTIGMINE METHYLSULFATE RFID SOLN IV 10 MG/10ML	NC	
ARTESUNATE	NC		<i>neostigmine methylsulfate SOLN IV 5 MG/10ML, 10 MG/10ML</i>	NC	
CHLOROQUINE PHOSPHATE POWD	NC		NEOSTIGMINE METHYLSULFATE SOLN IV 5 MG/10ML, 10 MG/10ML	NC	
<i>chloroquine phosphate TABS 500 MG</i>	C	QL(1 EA daily)	<i>neostigmine methylsulfate SOSY</i>	NC	
<i>chloroquine phosphate TABS 250 MG</i>	C		NEOSTIGMINE METHYLSULFATE SOSY 3 MG/3ML, 5 MG/5ML	NC	
<i>hydroxychloroquine sulfate 300 MG, 400 MG</i>	NC		<i>pyridostigmine bromide SOLN PO</i>	NC	
<i>hydroxychloroquine sulfate 100 MG, 200 MG</i>	C		<i>pyridostigmine bromide TABS 30 MG</i>	NC	
KRINTAFEL	C	QL(0.67 EA daily)	<i>pyridostigmine bromide TABS 60 MG</i>	C	
<i>mefloquine hcl</i>	C		<i>pyridostigmine bromide TBCR</i>	C	
MEPACRINE	NC		REGONOL SOLN IV	NC	
PLAQUENIL (<i>hydroxychloroquine sulfate</i>)	NC		ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)		
<i>primaquine phosphate TABS</i>	C		Antimycobacterial Agents		
PRIMAQUINE PHOSPHATE TABS (<i>primaquine phosphate</i>)	NC		AMINOSALICYLIC ACID-4 POWD	NC	
QUALAQUIN CAPS (<i>quinine sulfate</i>)	NC		<i>cycloserine</i>	NC	
QUINACRINE HCL	NC		ETHAMBUTOL HCL POWD	NC	
QUININE SULFATE DIHYDRATE POWD	NC		<i>ethambutol hcl TABS</i>	C	
<i>quinine sulfate CAPS 324 MG</i>	NC		ISONIAZID POWD	NC	
QUININE SULFATE POWD	NC		<i>isoniazid SOLN</i>	NC	
SOVUNA 300 MG	NC		<i>isoniazid SYRP</i>	C	
SOVUNA 200 MG	C		<i>isoniazid TABS</i>	C	
ANTIMYASTHENIC/CHOLINERGIC AGENTS			MYAMBUTOL TABS 400 MG (<i>ethambutol hcl</i>)	NC	
Antimyasthenic/Cholinergic Agents			MYCOBUTIN (<i>rifabutin</i>)	NC	
MESTINON TABS (<i>pyridostigmine bromide</i>)	NC		PRETOMANID	NC	
MESTINON TBCR (<i>pyridostigmine bromide</i>)	NC				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PRIFTIN	NC		TEPYLUTE IV 15 MG/1.5ML, 100 MG/10ML	NC	
<i>pyrazinamide</i>	C		ZANOSAR	NC	
<i>rifabutin</i>	C		ZEPZELCA	NC	SP
<i>rifampin CAPS</i>	C		Antimetabolites		
<i>rifampin SOLR</i>	NC		<i>clofarabine</i>	NC	
SIRTURO	NC		CLOLAR (<i>clofarabine</i>)	NC	
TRECTOR	C		<i>fluorouracil</i>	NC	
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer			<i>gemcitabine hcl SOLN</i>	NC	
Alkylating Agents			<i>gemcitabine hcl SOLR</i>	NC	
BICNU (<i>carmustine</i>)	NC		INFUGEM	NC	
<i>busulfan SOLN</i>	NC		JYLAMVO SOLN PO	NP	SP
<i>carboplatin SOLN 50 MG/5ML, 150 MG/15ML, 450 MG/45ML, 600 MG/60ML, 1000 MG/100ML</i>	NC	SP	<i>mercaptopurine SUSP 2000 MG/100ML</i>	C	
<i>carmustine</i>	NC		<i>mercaptopurine TABS</i>	C	
CARMUSTINE	NC		<i>methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML</i>	P	
<i>cyclophosphamide CAPS</i>	NC		<i>methotrexate sodium SOLR</i>	P	
CYCLOPHOSPHAMIDE SOLN	NC	SP	<i>methotrexate sodium TABS 2.5 MG</i>	P	
<i>cyclophosphamide SOLR IJ</i>	NC	SP	METHOTREXATE POWD	NC	
CYCLOPHOSPHAMIDE TABS	NC		<i>nelarabine</i>	NC	
FRINDOVYX SOLN	NC	SP	PEMRYDI RTU SOLN	NC	SP
GLEOSTINE 10 MG, 40 MG, 100 MG	NC		PURIXAN SUSP 2000 MG/100ML (<i>mercaptopurine</i>)	NC	
GLIADEL WAFER	NC		TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	NP	
IFEX SOLR	NC		XATMEP SOLN PO	NP	
<i>ifosfamide SOLN</i>	NC		Antineoplastic - Angiogenesis Inhibitors		
<i>ifosfamide SOLR</i>	NC		MVASI	C	SP; PA
IFOSFAMIDE SOLR	NC		ZIRABEV	C	SP; PA
LEUKERAN	C		Antineoplastic - Antibodies		
MYLERAN TABS	C		DANYELZA	NC	
<i>oxaliplatin SOLN</i>	NC				
<i>oxaliplatin SOLR</i>	NC				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
EMRELIS SOLR IV 20 MG, 100 MG	NC		AROMASIN (<i>exemestane</i>)	NC	
ENHERTU	C	SP; PA	<i>bicalutamide</i>	C	QL(1 EA daily)
KIMMTRAK	NC	SP	CASODEX (<i>bicalutamide</i>)	NC	QL(1 EA daily)
MONJUVI	NC	SP	ERLEADA	NC	SP
OPDIVO	NC	SP	EULEXIN	C	
PADCEV	C	SP; PA	<i>exemestane</i>	C	
POLIVY	NC	SP	FARESTON (<i>toremifene citrate</i>)	NC	PA
RITUXAN	NC	SP	FEMARA (<i>letrozole</i>)	NC	
RUXIENCE	C	SP; PA	<i>fulvestrant SOSY</i>	NC	
RYBREVA	NC	SP	<i>letrozole</i>	C	
SARCLISA	NC	SP	<i>leuprolide acetate (3 month) INJ 22.5 MG</i>	NC	
TRUXIMA	C	SP; PA	LUTRATE DEPOT INJ 22.5 MG	NC	
UNITUXIN	NC	SP	MEGESTROL ACETATE POWD	NC	
VYLOY	NC	SP	<i>megestrol acetate SUSP</i>	P	
Antineoplastic - Anti-HER2 Agents			<i>megestrol acetate SUSP 40 MG/ML, 400 MG/10ML</i>	NC	
HERCEPTIN 150 MG	NC	SP	<i>megestrol acetate TABS</i>	C	
HERZUMA	NC	SP	<i>nilutamide</i>	NC	
KANJINTI	C	SP; PA	NUBEQA	NC	SP
OGIVRI	C	SP; PA	SOLTAMOX SOLN	NC	
ONTRUZANT	NC	SP	<i>tamoxifen citrate TABS</i>	C	
TRAZIMERA 420 MG	C	SP; PA	<i>toremifene citrate</i>	C	PA
TRAZIMERA 150 MG	NC	SP	ZYTIGA (<i>abiraterone acetate</i>)	NC	SP; PA
Antineoplastic - Cellular Immunotherapy			Antineoplastic - Hypoxia-Inducible Factor Inhibitors		
ABECMA	NC	SP	WELIREG	NC	SP
BREYANZI	NC	SP	Antineoplastic - Immunomodulators		
CARVYKTI	NC	SP	LEVAMISOLE HCL	NC	
KYMRIAH	NC	SP	Antineoplastic - Menin Inhibitors		
OMISIRGE	NC		REVUFORJ 25 MG	NC	
PROVENGE	NC	SP	Antineoplastic - PDGFR-alpha Inhibitors		
TECARTUS	NC	SP			
YESCARTA	NC	SP			
Antineoplastic - Hormonal and Related Agents					
<i>abiraterone acetate</i>	C	SP; PA			
<i>anastrozole</i>	C				
ARIMIDEX (<i>anastrozole</i>)	NC				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
AYVAKIT	NC	SP	OJEMDA TABS	NC	SP
Antineoplastic - XPO1 Inhibitors			ROZLYTREK CAPS	C	SP; PA
XPOVIO (60 MG TWICE WEEKLY)	NC	SP	TALZENNA	NC	SP
XPOVIO (80 MG TWICE WEEKLY)	NC	SP	TAZVERIK	NC	SP
Antineoplastic Antibiotics			TEPMETKO	NC	SP
<i>bleomycin sulfate</i>	NC		Antineoplastic Enzymes		
COSMEGEN (<i>dactinomycin</i>)	NC		ASPARLAS	C	SP; PA
<i>dactinomycin</i>	NC		RYLAZE	NC	SP
<i>doxorubicin hcl liposomal SUSP</i>	NC		Antineoplastic Radiopharmaceuticals		
<i>doxorubicin hcl SOLN</i>	NC		STRONTIUM CHLORIDE SR-89	NC	
<i>doxorubicin hcl SOLR 10 MG, 50 MG</i>	NC		XOFIGO	NC	
<i>idarubicin hcl</i>	NC		Antineoplastics Misc.		
JELMYTO SOLR UL	NC		<i>dacarbazine SOLR</i>	NC	
<i>mitomycin SOLR IV</i>	NC		ELZONRIS	NC	
Antineoplastic Combinations			HYDREA (<i>hydroxyurea</i>)	NC	
HERCEPTIN HYLECTA	NC	SP	<i>hydroxyurea</i>	P	
INQOVI	NC	SP	NIPENT	NC	
PHESGO	C	SP; PA	TICE BCG	NC	
RITUXAN HYCELA	NC	SP	Chemotherapy Adjuncts		
Antineoplastic Enzyme Inhibitors			ELITEK	NC	
BRAFTOVI 75 MG	C	SP; PA	Chemotherapy Rescue/Antidote/Protective Agents		
BRUKINSA	NC	SP	COSELA	NC	
GAVRETO	NC	SP	<i>leucovorin calcium SOLN IJ 100 MG/10ML, 500 MG/50ML</i>	NC	
IBRANCE CAPS	C	SP; PA	<i>leucovorin calcium SOLR</i>	NC	
IBRANCE TABS	C	SP; PA	<i>leucovorin calcium TABS</i>	C	
ICLUSIG	C	QL(1 EA daily); SP; PA	PEDMARK	NC	
INREBIC	C	SP; PA	Mitotic Inhibitors		
LUMAKRAS	NC	SP	ETOPOPHOS	NC	
MEKTOVI	C	SP; PA	<i>paclitaxel 30 MG/5ML, 100 MG/16.7ML, 150 MG/25ML, 300 MG/50ML</i>	NC	
OGSIVEO	NC	SP	<i>vinblastine sulfate SOLN</i>	NC	
OJEMDA SUSR	NC	SP	<i>vinorelbine tartrate</i>	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease			DUOPA SUSP	NC	
Antiparkinson Adjunctive Therapy			INBRIJA CAPS	NC	
<i>carbidopa</i>	C		LEVODOPA POWD	NC	
LODOSYN (<i>carbidopa</i>)	NC		NEUPRO	NP	
NOURIANZ	NC		OSMOLEX ER TB24 129 MG, 193 MG	NP	
Antiparkinson Anticholinergics			PARLODEL CAPS (<i>bromocriptine mesylate</i>)	NC	
<i>benztropine mesylate</i> SOLN	NC		PARLODEL TABS (<i>bromocriptine mesylate</i>)	NC	
<i>benztropine mesylate</i> TABS	C		<i>pramipexole dihydrochloride</i> TABS	P	QL(3 EA daily); AL(At least 18 yrs old)
<i>trihexyphenidyl hcl</i> SOLN	C	QL(16.67 ML daily)	<i>pramipexole dihydrochloride</i> TB24	NP	
<i>trihexyphenidyl hcl</i> TABS	C		<i>pramipexole dihydrochloride</i> TB24 0.375 MG, 0.75 MG, 1.5 MG, 2.25 MG, 3 MG, 3.75 MG	NC	
Antiparkinson COMT Inhibitors			<i>ropinirole hydrochloride</i> TABS 0.5 MG, 1 MG, 2 MG, 5 MG	P	QL(3 EA daily)
COMTAN (<i>entacapone</i>)	NC		<i>ropinirole hydrochloride</i> TABS 0.25 MG, 3 MG, 4 MG	P	QL(6 EA daily)
<i>entacapone</i>	NC		<i>ropinirole hydrochloride</i> TB24	NP	
ONGENTYS	NC		RYTARY CPCR	NC	
<i>tolcapone</i>	NC		SINEMET TABS 100 MG-10 MG, 100 MG-25 MG (<i>carbidopa-levodopa</i>)	NC	
Antiparkinson Dopaminergics			STALEVO 100 (<i>carbidopa-levodopa-entacapone</i>)	NC	
<i>amantadine hcl</i> CAPS	C		STALEVO 125 (<i>carbidopa-levodopa-entacapone</i>)	NC	
<i>amantadine hcl</i> SOLN	C		STALEVO 150 (<i>carbidopa-levodopa-entacapone</i>)	NC	
<i>amantadine hcl</i> TABS	NC		STALEVO 200 (<i>carbidopa-levodopa-entacapone</i>)	NC	
<i>bromocriptine mesylate</i> CAPS	C				
BROMOCRIPTINE MESYLATE POWD	NC				
<i>bromocriptine mesylate</i> TABS 2.5 MG	C				
<i>carbidopa-levodopa-entacapone</i>	NC				
<i>carbidopa-levodopa</i> TABS	C				
<i>carbidopa-levodopa</i> TBCR	C				
<i>carbidopa-levodopa</i> TBDP	NC				
CREXONT CPCR	NC				
DHIVY TABS	C				

Drug Name	Drug Tier	Requirements/ Limits
STALEVO 50 (<i>carbidopa-levodopa-entacapone</i>)	NC	
STALEVO 75 (<i>carbidopa-levodopa-entacapone</i>)	NC	
VYALEV SOLN SC	NC	SP
Antiparkinson Monoamine Oxidase Inhibitors		
<i>rasagiline mesylate</i>	NC	
<i>selegiline hcl CAPS</i>	C	
SELEGILINE HCL POWD	NC	
<i>selegiline hcl TABS</i>	C	
ZELAPAR TBDP	NC	
ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders		
Antimanic Agents		
<i>lithium</i>	C	QL(10 ML daily)
<i>lithium carbonate CAPS</i>	C	
LITHIUM CARBONATE POWD	C	
<i>lithium carbonate TABS</i>	C	
<i>lithium carbonate TBCR</i>	C	
LITHOBID TBCR (<i>lithium carbonate</i>)	NC	
Antipsychotics - Misc.		
CAPLYTA	NP	AL(At least 18 yrs old); ST
EQUETRO	NP	
GEODON (<i>ziprasidone mesylate</i>)	NC	AL(At least 18 yrs old); ST
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)
NUPLAZID CAPS	NP	QL(1 EA daily); AL(At least 18 yrs old); ST

Drug Name	Drug Tier	Requirements/ Limits
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 117 MG/0.75ML	NP	QL(1.5 ML per 28 day(s) retail); AL(At least 18 yrs old); SP
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 234 MG/1.5ML	NP	QL(3 ML per 28 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
ERZOFRI 351 MG/2.25ML	NP	AL(At least 18 yrs old); SP
FANAPT	NP	AL(At least 18 yrs old); ST
FANAPT TITRATION PACK	NP	AL(At least 18 yrs old); ST
INVEGA 3 MG, 6 MG, 9 MG (<i>paliperidone</i>)	NP	AL(At least 12 yrs old); ST
INVEGA HAFYERA	P	AL(At least 18 yrs old); SP
INVEGA SUSTENNA 234 MG/1.5ML	P	QL(3 ML per 28 day(s) retail); AL(At least 18 yrs old); SP

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
INVEGA SUSTENNA 39 MG/0.25ML	P	QL(0.25 ML per 28 day(s) retail); 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 156 MG/ML	P	QL(2 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)
INVEGA SUSTENNA 117 MG/0.75ML	P	QL(1.5 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 78 MG/0.5ML	P	QL(0.5 ML per 28 day(s) retail); AL(At least 18 yrs old); SP	<i>risperidone microspheres</i>	NC	2 max fill(s) 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	<i>risperidone SOLN</i>	P	QL(4 ML daily); AL(At least 7 yrs old)
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	<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)
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	<i>risperidone TABS 0.25 MG</i>	P	QL(4 EA daily); AL(At least 7 yrs old); ST
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	<i>risperidone TBDP</i>	P	QL(2 EA daily); AL(At least 7 yrs old)
<i>paliperidone</i>	NP	AL(At least 12 yrs old); ST	RYKINDO SRER	NP	AL(At least 18 yrs old); SP
PERSERIS PRSY	P	QL(1 EA per 28 day(s) retail); AL(At least 18 yrs old); SP	UZEDY SUSY	NP	AL(At least 18 yrs old); SP
Butyrophenones					
HALDOL DECANOATE (<i>haloperidol decanoate</i>)				NC	
<i>haloperidol decanoate</i>				C	
<i>haloperidol lactate CONC</i>				C	
<i>haloperidol lactate SOLN</i>				NC	
<i>haloperidol TABS 0.5 MG, 1 MG, 2 MG, 5 MG, 10 MG</i>				C	QL(3 EA daily)
<i>haloperidol TABS 20 MG</i>				C	
Dibenzapines					
ADASUVE				NP	AL(At least 18 yrs old); ST

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>asenapine maleate</i>	NP	Brand Preferred; AL(At least 10 yrs old)	<i>quetiapine fumarate TABS 300 MG, 400 MG</i>	P	QL(2 EA daily); AL(At least 10 yrs old)
<i>clozapine TABS 100 MG</i>	NC	QL(9 EA daily); AL(At least 18 yrs old)	<i>quetiapine fumarate TABS 300 MG, 400 MG</i>	NC	QL(2 EA daily); AL(At least 10 yrs old)
<i>clozapine TABS 100 MG</i>	P	QL(9 EA daily); AL(At least 18 yrs old)	<i>quetiapine fumarate TABS 150 MG</i>	P	AL(At least 10 yrs old); ST
<i>clozapine TABS 25 MG, 50 MG, 200 MG</i>	P	QL(3 EA daily); AL(At least 18 yrs old)	<i>quetiapine fumarate TB24</i>	P	AL(At least 10 yrs old)
<i>clozapine TABS 25 MG, 50 MG, 200 MG</i>	NC	QL(3 EA daily); AL(At least 18 yrs old)	<i>quetiapine fumarate TB24</i>	NC	AL(At least 10 yrs old)
<i>clozapine TBDP</i>	NP	AL(At least 18 yrs old); ST	SAPHRIS 5 MG, 10 MG (<i>asenapine maleate</i>)	NC	Brand Preferred; AL(At least 10 yrs old)
CLOZARIL TABS 100 MG (<i>clozapine</i>)	NP	QL(9 EA daily); AL(At least 18 yrs old)	SAPHRIS (<i>asenapine maleate</i>)	P	Brand Preferred; AL(At least 10 yrs old)
CLOZARIL TABS 25 MG, 50 MG, 200 MG (<i>clozapine</i>)	NP	QL(3 EA daily); AL(At least 18 yrs old)	SECUADO	NP	AL(At least 18 yrs old); ST
<i>loxapine succinate</i>	C	QL(4 EA daily); AL(At least 18 yrs old)	SEROQUEL XR TB24 (<i>quetiapine fumarate</i>)	NP	AL(At least 10 yrs old)
<i>olanzapine SOLR</i>	NC	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>olanzapine TABS 2.5 MG, 5 MG</i>	P	QL(4 EA daily); 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>olanzapine TABS 15 MG, 20 MG</i>	P	QL(1 EA daily); AL(At least 10 yrs old)	VERSACLOZ SUSP	NP	AL(At least 18 yrs old); ST
<i>olanzapine TABS 7.5 MG, 10 MG</i>	P	QL(2 EA daily); AL(At least 10 yrs old)	ZYPREXA ZYDIS TBDP (<i>olanzapine</i>)	NC	AL(At least 10 yrs old); ST
<i>olanzapine TABS 15 MG, 20 MG</i>	NC	QL(1 EA daily); AL(At least 10 yrs old)	ZYPREXA TABS 20 MG (<i>olanzapine</i>)	NP	QL(1 EA daily); AL(At least 10 yrs old)
<i>olanzapine TBDP</i>	NP	AL(At least 10 yrs old); ST	ZYPREXA TABS 15 MG, 20 MG (<i>olanzapine</i>)	NC	QL(1 EA daily); AL(At least 10 yrs old)
<i>olanzapine TBDP</i>	NC	AL(At least 10 yrs old); ST	ZYPREXA TABS 7.5 MG, 10 MG (<i>olanzapine</i>)	NC	QL(2 EA daily); AL(At least 10 yrs old)
<i>quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG</i>	P	QL(4 EA daily); AL(At least 10 yrs old)	ZYPREXA TABS 2.5 MG, 5 MG (<i>olanzapine</i>)	NC	QL(4 EA daily); AL(At least 10 yrs old)
Dihydroindolones					

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>molindone hcl</i>	NC	AL(At least 12 yrs old)	ABILIFY MAINTENA SRER	P	QL(1 EA per 28 day(s) retail); AL(At least 18 yrs old); SP
Muscarinic Agents			ABILIFY MAINTENA SRER	P	QL(1 EA per 28 day(s) retail); AL(At least 18 yrs old)
COBENFY STARTER PACK CPPK	NP	AL(At least 18 yrs old); ST	ABILIFY MYCITE MAINTENANCE KIT	NP	AL(At least 18 yrs old); SP; ST
COBENFY CAPS	NP	AL(At least 18 yrs old)	ABILIFY MYCITE STARTER KIT	NP	AL(At least 18 yrs old); SP; ST
Phenothiazines			ABILIFY TABS 5 MG (<i>aripiprazole</i>)	NP	QL(1.5 EA daily); AL(At least 7 yrs old)
<i>chlorpromazine hcl CONC</i>	NC		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>chlorpromazine hcl SOLN</i>	NC		<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>chlorpromazine hcl TABS 10 MG</i>	C	QL(10 EA daily)	<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>chlorpromazine hcl TABS 25 MG, 50 MG, 100 MG, 200 MG</i>	C	QL(3 EA daily)	<i>aripiprazole TABS 5 MG</i>	NC	QL(1.5 EA daily); AL(At least 7 yrs old)
<i>fluphenazine decanoate</i>	C		<i>aripiprazole TABS 2 MG, 10 MG, 15 MG, 20 MG, 30 MG</i>	NC	QL(1 EA daily); AL(At least 7 yrs old)
<i>fluphenazine hcl CONC</i>	NC		<i>aripiprazole TABS 5 MG</i>	P	QL(1.5 EA daily); AL(At least 7 yrs old)
<i>fluphenazine hcl ELIX</i>	NC		<i>aripiprazole TBDP</i>	NP	QL(1 EA daily); AL(At least 7 yrs old); ST
<i>fluphenazine hcl SOLN</i>	NC		ARISTADA 882 MG/3.2ML	P	QL(3.2 ML per 28 day(s) retail); AL(At least 18 yrs old); SP
<i>fluphenazine hcl TABS</i>	C				
<i>perphenazine TABS</i>	C	QL(4 EA daily); AL(At least 12 yrs old)			
<i>prochlorperazine</i>	NC				
<i>prochlorperazine</i>	NP				
<i>prochlorperazine</i>	P				
<i>prochlorperazine edisylate 10 MG/2ML</i>	NC				
PROCHLORPERAZINE MALEATE POWD	NC				
<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			

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ARISTADA 662 MG/2.4ML	P	QL(2.4 ML per 28 day(s) retail); AL(At least 18 yrs old); SP	POVIDONE-IODINE PREP PADS	NC	
ARISTADA 441 MG/1.6ML	P	QL(1.6 ML per 28 day(s) retail); AL(At least 18 yrs old); SP	POVIDONE-IODINE PADS	NC	
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	Mercury Antiseptics		
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	THIMEROSAL POWD	NC	
OPIPZA FILM	NP	AL(At least 7 yrs old); ST	Silver Antiseptics		
REXULTI	NP	AL(At least 13 yrs old); ST	SILVER PROTEIN MILD	NC	
Thioxanthenes			ANTIVIRALS - Drugs to Treat Viral Infections		
<i>thiothixene</i>	C	QL(3 EA daily)	Antiretrovirals		
ANTISEPTICS & DISINFECTANTS			<i>abacavir sulfate-lamivudine</i>	P	QL(1 EA daily)
Antiseptics & Disinfectants			<i>abacavir sulfate-lamivudine</i>	NC	QL(1 EA daily)
CETYLICIDE-G CONC	NC		<i>abacavir sulfate SOLN</i>	P	QL(30 ML daily)
PHENOL CRYST	NC		<i>abacavir sulfate TABS</i>	P	QL(2 EA daily)
PHENOL LIQD XX 89 %	NC		<i>abacavir sulfate TABS</i>	C	QL(2 EA daily)
Chlorine Antiseptics			APRETUDE	NC	
<i>chlorhexidine gluconate SOLN EX</i>	NC		APTIVUS CAPS	P	QL(4 EA daily)
CLORPACTIN	NC		<i>atazanavir sulfate CAPS 200 MG</i>	C	QL(2 EA daily)
<i>sodium hypochlorite SOLN EX 0.25 %, 0.5 %</i>	NC		<i>atazanavir sulfate CAPS 300 MG</i>	P	
Iodine Antiseptics			<i>atazanavir sulfate CAPS 150 MG, 200 MG</i>	P	QL(2 EA daily)
LUGOLS STRONG IODINE SOLN	NC		BIKTARVY	P	QL(1 EA daily)
			CABENUVA	NC	
			CIMDUO	P	QL(1 EA daily)
			COMBIVIR (<i>lamivudine-zidovudine</i>)	NC	
			COMPLERA 200 MG-300 MG-25 MG (<i>emtricitabine- rilpivirine-tenofovir disoproxil fumarate</i>)	P	QL(1 EA daily)
			<i>darunavir TABS 800 MG</i>	P	QL(1 EA daily)
			<i>darunavir TABS 600 MG</i>	P	QL(2 EA daily)
			DELSTRIGO	P	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
DESCOVY 120 MG-15 MG	P	QL(1 EA daily); PA	<i>etravirine 200 MG</i>	P	QL(2 EA daily)
DESCOVY 200 MG-25 MG	P	QL(1 EA daily)	<i>etravirine 100 MG</i>	C	QL(4 EA daily)
DOVATO	P	QL(1 EA daily)	<i>etravirine 200 MG</i>	C	QL(2 EA daily)
EDURANT	P	QL(1 EA daily)	EVOTAZ	P	QL(1 EA daily)
EDURANT PED PO 2.5 MG	P		<i>fosamprenavir calcium TABS</i>	P	QL(4 EA daily)
<i>efavirenz CAPS 200 MG</i>	P	QL(1 EA daily)	FUZEON SOLR	NP	SP
<i>efavirenz CAPS 50 MG</i>	P	QL(2 EA daily)	GENVOYA	P	QL(1 EA daily)
<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	P	QL(1 EA daily)	INTELENCE 200 MG (<i>etravirine</i>)	P	QL(2 EA daily)
<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	P	QL(1 EA daily)	INTELENCE	P	QL(4 EA daily)
<i>efavirenz TABS</i>	P	QL(1 EA daily)	INTELENCE (<i>etravirine</i>)	P	QL(4 EA daily)
<i>efavirenz TABS</i>	C	QL(1 EA daily)	ISENTRESS HD TABS	P	
<i>emtricitabine CAPS</i>	P	QL(1 EA daily)	ISENTRESS CHEW 100 MG	P	QL(6 EA daily)
<i>emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG</i>	C	QL(1 EA daily)	ISENTRESS CHEW 25 MG	P	QL(12 EA daily)
<i>emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG</i>	P		ISENTRESS PACK	P	QL(2 EA daily)
<i>emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG</i>	P	QL(1 EA daily)	ISENTRESS TABS	P	QL(2 EA daily)
EMTRIVA CAPS (<i>emtricitabine</i>)	P	QL(1 EA daily)	JULUCA	P	QL(1 EA daily)
EMTRIVA SOLN	P	QL(24 ML daily)	KALETRA SOLN	P	QL(16 ML daily)
EPIVIR SOLN (<i>lamivudine</i>)	P	QL(30 ML daily)	KALETRA TABS 25 MG-100 MG (<i>lopinavir-ritonavir</i>)	P	QL(4 EA daily)
EPIVIR TABS 300 MG (<i>lamivudine</i>)	P	QL(1 EA daily)	KALETRA TABS 50 MG-200 MG (<i>lopinavir-ritonavir</i>)	P	QL(6 EA daily)
EPIVIR TABS 150 MG (<i>lamivudine</i>)	P	QL(2 EA daily)	<i>lamivudine SOLN</i>	C	QL(30 ML daily)
EPZICOM (<i>abacavir sulfate-lamivudine</i>)	NC	QL(1 EA daily)	<i>lamivudine SOLN</i>	P	QL(30 ML daily)
<i>etravirine 100 MG</i>	P	QL(4 EA daily)	<i>lamivudine TABS 150 MG</i>	P	QL(2 EA daily)
			<i>lamivudine TABS 300 MG</i>	P	QL(1 EA daily)
			<i>lamivudine TABS 150 MG</i>	C	QL(2 EA daily)
			<i>lamivudine-zidovudine</i>	P	
			LEXIVA SUSP	C	QL(56 ML daily)
			LEXIVA TABS (<i>fosamprenavir calcium</i>)	NC	QL(4 EA daily)
			<i>lopinavir-ritonavir SOLN</i>	P	QL(16 ML daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>lopinavir-ritonavir TABS 50 MG-200 MG</i>	P	QL(6 EA daily)	SELZENTRY SOLN	P	QL(35 ML daily)
<i>lopinavir-ritonavir TABS 25 MG-100 MG</i>	P	QL(4 EA daily)	SELZENTRY TABS 150 MG (<i>maraviroc</i>)	P	QL(2 EA daily)
<i>maraviroc TABS 300 MG</i>	C	QL(4 EA daily)	SELZENTRY TABS 300 MG (<i>maraviroc</i>)	P	QL(4 EA daily)
<i>maraviroc TABS 300 MG</i>	P	QL(4 EA daily)	SELZENTRY TABS 25 MG, 75 MG	NC	
<i>maraviroc TABS 150 MG</i>	C	QL(2 EA daily)	STRIBILD	P	QL(1 EA daily)
<i>maraviroc TABS 150 MG</i>	P	QL(2 EA daily)	SUNLENCA TABS PO 300 MG	NC	SP
<i>nevirapine SUSP</i>	P	QL(40 ML daily)	SYMFI (<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	P	QL(1 EA daily)
<i>nevirapine TABS</i>	P	QL(2 EA daily)	SYMFI LO (<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	P	QL(1 EA daily)
<i>nevirapine TB24 100 MG</i>	P	QL(3 EA daily)	SYMTUZA	P	
<i>nevirapine TB24 400 MG</i>	P	QL(1 EA daily)	<i>tenofovir disoproxil fumarate TABS</i>	C	QL(1 EA daily)
NORVIR PACK	P		<i>tenofovir disoproxil fumarate TABS</i>	P	QL(1 EA daily)
NORVIR TABS (<i>ritonavir</i>)	P	QL(12 EA daily)	TIVICAY PD TBSO	P	
ODEFSEY	P		TIVICAY TABS 50 MG	P	
PIFELTRO	P	QL(1 EA daily)	TIVICAY TABS 10 MG, 25 MG	NC	
PREZCOBIX	P	QL(1 EA daily)	TRIUMEQ PD TBSO	P	
PREZISTA SUSP	P	QL(12 ML daily)	TRIUMEQ TABS	P	QL(1 EA daily); AL(At least 18 yrs old)
PREZISTA TABS 800 MG (<i>darunavir</i>)	P	QL(1 EA daily)	TRIZIVIR	NC	QL(2 EA daily)
PREZISTA TABS (<i>darunavir</i>)	P	QL(2 EA daily)	TRUVADA 200 MG-300 MG (<i>emtricitabine-tenofovir disoproxil fumarate</i>)	P	QL(1 EA daily)
PREZISTA TABS 150 MG	P	QL(3 EA daily)	TRUVADA 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG (<i>emtricitabine-tenofovir disoproxil fumarate</i>)	P	
PREZISTA TABS 75 MG, 600 MG	P	QL(2 EA daily)	TYBOST	P	QL(1 EA daily); AL(At least 18 yrs old)
RETROVIR CAPS (<i>zidovudine</i>)	P	QL(6 EA daily)	VIRACEPT TABS 250 MG	P	QL(9 EA daily)
RETROVIR SOLN	NC				
RETROVIR SYRP (<i>zidovudine</i>)	P	QL(60 ML daily)			
REYATAZ CAPS 200 MG (<i>atazanavir sulfate</i>)	P	QL(2 EA daily)			
REYATAZ CAPS 300 MG (<i>atazanavir sulfate</i>)	P				
REYATAZ PACK	P	QL(6 EA daily)			
<i>ritonavir TABS</i>	P	QL(12 EA daily)			
RUKOBIA	P	PA			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
VIRACEPT TABS 625 MG	P	QL(4 EA daily)	<i>ganciclovir sodium SOLR</i>	NC	
VIREAD POWD	P	QL(8 GM daily)	VALCYTE TABS (<i>valganciclovir hcl</i>)	NC	QL(2 EA daily)
VIREAD TABS	P	QL(1 EA daily)	<i>valganciclovir hcl SOLR</i>	NC	
VIREAD TABS (<i>tenofovir disoproxil fumarate</i>)	P	QL(1 EA daily)	<i>valganciclovir hcl TABS</i>	C	QL(2 EA daily)
ZIAGEN SOLN (<i>abacavir sulfate</i>)	P	QL(30 ML daily)	Hepatitis Agents		
ZIAGEN TABS (<i>abacavir sulfate</i>)	C	QL(2 EA daily)	<i>adefovir dipivoxil</i>	NP	
<i>zidovudine CAPS</i>	P	QL(6 EA daily)	BARACLUDE SOLN	P	
<i>zidovudine SYRP</i>	P	QL(60 ML daily)	BARACLUDE TABS (<i>entecavir</i>)	NP	
<i>zidovudine TABS</i>	P	QL(2 EA daily)	<i>entecavir TABS</i>	P	
Antiviral Combinations			EPCLUSA PACK	PA	SP; PA
PAXLOVID	NC		EPCLUSA TABS 50 MG-200 MG	PA	SP; PA
PAXLOVID (150/100)	C	QL(20 EA per 90 day(s) retail; 20 EA per 90 days mail)	EPCLUSA TABS 100 MG-400 MG	NP	QL(1 EA daily); SP
PAXLOVID (150/100)	C	QL(2 EA per 90 day(s) retail; 2 EA per 90 days mail)	HARVONI PACK	NP	SP
PAXLOVID (150/100)	C		HARVONI TABS	NP	SP
PAXLOVID (300/100)	C	QL(3 EA per 90 day(s) retail; 3 EA per 90 days mail)	HARVONI TABS	NP	SP
PAXLOVID (300/100)	C		<i>lamivudine (hbv) TABS</i>	P	
PAXLOVID (300/100)	C	QL(30 EA per 90 day(s) retail; 30 EA per 90 days mail)	LEDIPASVIR-SOFOSBUVIR TABS	NP	SP
CMV Agents			MAVYRET PACK	PA	QL(6 EA daily); SP; PA
<i>cidofovir</i>	NC		MAVYRET TABS	PA	QL(3 EA daily); SP; PA
<i>foscarnet sodium 6000 MG/250ML</i>	NC		PEGASYS SOLN	NP	SP
FOSCAVIR 6000 MG/250ML (<i>foscarnet sodium</i>)	NC		PEGASYS SOSY	NP	SP
GANCICLOVIR SODIUM SOLN	NC		<i>ribavirin (hepatitis c) CAPS</i>	NP	SP
			<i>ribavirin (hepatitis c) TABS 200 MG</i>	NP	SP
			SOFOSBUVIR-VELPATASVIR TABS	PA	QL(1 EA daily); SP; PA
			SOVALDI PACK	NP	SP
			SOVALDI TABS	NP	SP
			VEMLIDY	NP	SP
			VOSEVI	PA	SP; PA
			ZEPATIER	NP	SP

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Herpes Agents			<i>oseltamivir phosphate SUSR</i>	C	QL(120 ML per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail
<i>acyclovir sodium SOLN</i>	NC		RAPIVAB	NC	
<i>acyclovir CAPS</i>	P	QL(50 EA per 31 day(s) retail)	RELENZA DISKHALER	C	1 package(s) per 31 day(s) retail; AL(At least 5 yrs old)
<i>acyclovir SUSP</i>	NC	QL(400 ML per 31 day(s) retail; 400 ML per 31 days mail)	<i>rimantadine hydrochloride TABS</i>	NC	
<i>acyclovir SUSP</i>	P	QL(400 ML per 31 day(s) retail; 400 ML per 31 days mail)	TAMIFLU CAPS 45 MG, 75 MG (<i>oseltamivir phosphate</i>)	NC	QL(10 EA per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail
<i>acyclovir TABS PO 800 MG</i>	NC	QL(50 EA per 31 day(s) retail)	TAMIFLU CAPS 30 MG (<i>oseltamivir phosphate</i>)	NC	QL(20 EA per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail
<i>acyclovir TABS PO 400 MG</i>	P	QL(3 EA daily)	TAMIFLU SUSR (<i>oseltamivir phosphate</i>)	NC	QL(120 ML per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail
<i>acyclovir TABS PO 800 MG</i>	P	QL(50 EA per 31 day(s) retail)	XOFLUZA (40 MG DOSE) 40 MG	NC	
<i>acyclovir TABS PO 400 MG</i>	NC	QL(3 EA daily)	XOFLUZA (80 MG DOSE) 80 MG	NC	
<i>famciclovir</i>	NP		Misc. Antivirals		
SITAVIG TABS BU	NC		LAGEVRIO	NC	
<i>valacyclovir hcl 1 GM</i>	P	QL(42 EA per 21 day(s) retail)	REMDESIVIR SOLR 100 MG	NC	
<i>valacyclovir hcl 500 MG</i>	NC	QL(2 EA daily)	VEKLURY SOLR	NC	
<i>valacyclovir hcl 500 MG</i>	P	QL(2 EA daily)	Respiratory Syncytial Virus (RSV) Agents		
VALTREX 1 GM (<i>valacyclovir hcl</i>)	NP	QL(42 EA per 21 day(s) retail)	<i>ribavirin</i>	NC	
VALTREX 500 MG (<i>valacyclovir hcl</i>)	NP	QL(2 EA daily)	VIRAZOLE (<i>ribavirin</i>)	NC	
Influenza Agents			BETA BLOCKERS - Drugs to Treat High Blood Pressure		
<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	Alpha-Beta Blockers		
<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>carvedilol 25 MG</i>	P	QL(4 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>carvedilol</i> 3.125 MG, 6.25 MG, 12.5 MG	P	QL(2 EA daily)	KAPSPARGO SPRINKLE CS24	NP	
<i>carvedilol phosphate</i>	NP	QL(1 EA daily)	LOPRESSOR TABS 100 MG (<i>metoprolol tartrate</i>)	NP	QL(4.5 EA daily)
COREG 25 MG (<i>carvedilol</i>)	NC	QL(4 EA daily)	LOPRESSOR TABS 50 MG (<i>metoprolol tartrate</i>)	NP	QL(4 EA daily)
COREG 3.125 MG, 6.25 MG, 12.5 MG (<i>carvedilol</i>)	NC	QL(2 EA daily)	<i>metoprolol succinate</i> TB24 200 MG	P	QL(2 EA daily)
LABETALOL HCL- DEXTROSE	NC		<i>metoprolol succinate</i> TB24 200 MG	NC	QL(2 EA daily)
LABETALOL HCL- SODIUM CHLORIDE	NC		<i>metoprolol succinate</i> TB24 25 MG, 50 MG, 100 MG	P	QL(4 EA daily)
<i>labetalol hcl</i> SOLN	NC		<i>metoprolol succinate</i> TB24 25 MG, 50 MG, 100 MG	NC	QL(4 EA daily)
LABETALOL HCL SOLN	NC		METOPROLOL TARTRATE POWD	NC	
LABETALOL HCL SOSY 10 MG/2ML	NC		<i>metoprolol tartrate</i> SOLN IV 5 MG/5ML	NC	
<i>labetalol hcl</i> TABS 200 MG	P	QL(6 EA daily)	<i>metoprolol tartrate</i> TABS 100 MG	P	QL(4.5 EA daily)
<i>labetalol hcl</i> TABS 100 MG	P	QL(3 EA daily)	<i>metoprolol tartrate</i> TABS 25 MG, 50 MG	P	QL(4 EA daily)
<i>labetalol hcl</i> TABS 300 MG	P	QL(8 EA daily)	<i>metoprolol tartrate</i> TABS 37.5 MG, 75 MG	P	
<i>labetalol hcl</i> TABS 400 MG	P		<i>nebivolol hcl</i>	NP	
Beta Blockers Cardio-Selective			TENORMIN TABS (<i>atenolol</i>)	NP	QL(2 EA daily)
<i>acebutolol hcl</i> CAPS	P		TOPROL XL TB24 25 MG, 50 MG, 100 MG (<i>metoprolol succinate</i>)	NP	QL(4 EA daily)
ACEBUTOLOL HCL POWD	NC		TOPROL XL TB24 200 MG (<i>metoprolol succinate</i>)	NP	QL(2 EA daily)
ATENOLOL POWD	NC		Beta Blockers Non-Selective		
<i>atenolol</i> TABS	P	QL(2 EA daily)	BETAPACE AF (<i>sotalol hcl</i> (<i>afib/af</i>)))	NP	QL(2 EA daily)
<i>betaxolol hcl</i>	NP		BETAPACE TABS 80 MG, 120 MG, 160 MG (<i>sotalol hcl</i>)	NP	
<i>bisoprolol fumarate</i> 2.5 MG	P		HEMANGEOL SOLN PO	NP	SP
<i>bisoprolol fumarate</i>	P	QL(1 EA daily)			
BYSTOLIC (<i>nebivolol hcl</i>)	NP				
<i>esmolol hcl-sodium chloride</i>	NC				
<i>esmolol hcl</i> SOLN 100 MG/10ML	NC				
ESMOLOL HCL SOLN	NC				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
INDERAL LA CP24 (<i>propranolol hcl</i>)	NP	QL(2 EA daily)	CARDIZEM CD CP24 360 MG (<i>diltiazem hcl coated beads</i>)	NP	
INDERAL XL	NP		CARDIZEM LA TB24 (<i>diltiazem hcl</i>)	NP	
INNOPRAN XL	NP		CARDIZEM TABS 30 MG, 60 MG, 120 MG (<i>diltiazem hcl</i>)	NP	QL(3 EA daily)
NADOLOL POWD	NC		CLEVIPREX 25 MG/50ML, 50 MG/100ML	NC	
<i>nadolol TABS 20 MG, 40 MG, 80 MG</i>	P	QL(2 EA daily)	<i>diltiazem hcl coated beads CP24 360 MG</i>	NC	
<i>pindolol TABS</i>	NP		<i>diltiazem hcl coated beads CP24 240 MG</i>	P	QL(2 EA daily)
<i>propranolol hcl CP24</i>	P	QL(2 EA daily)	<i>diltiazem hcl coated beads CP24 120 MG, 180 MG, 300 MG</i>	NC	QL(1 EA daily)
PROPRANOLOL HCL POWD	NC		<i>diltiazem hcl coated beads CP24 360 MG</i>	P	
<i>propranolol hcl SOLN IV 1 MG/ML</i>	NC		<i>diltiazem hcl coated beads CP24 120 MG, 180 MG, 300 MG</i>	P	QL(1 EA daily)
<i>propranolol hcl SOLN PO 20 MG/5ML, 40 MG/5ML</i>	P		<i>diltiazem hcl coated beads CP24 240 MG</i>	NC	QL(2 EA daily)
<i>propranolol hcl TABS</i>	P		<i>diltiazem hcl extended release beads 120 MG, 180 MG, 300 MG, 360 MG, 420 MG</i>	P	QL(1 EA daily)
<i>sotalol hcl (afib/afl)</i>	P	QL(2 EA daily)	<i>diltiazem hcl extended release beads 240 MG</i>	P	QL(2 EA daily)
<i>sotalol hcl TABS</i>	NC		<i>diltiazem hcl CP12</i>	P	QL(2 EA daily)
<i>sotalol hcl TABS</i>	P		<i>diltiazem hcl CP24 120 MG, 180 MG</i>	P	QL(1 EA daily)
SOTYLIZE SOLN PO	NP		<i>diltiazem hcl CP24 240 MG</i>	P	QL(2 EA daily)
TIMOLOL MALEATE POWD	NC		DILTIAZEM HCL-SODIUM CHLORIDE	NC	
<i>timolol maleate TABS</i>	NP		<i>diltiazem hcl SOLN</i>	NC	
CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure			DILTIAZEM HCL SOLR	NC	
Calcium Channel Blockers			<i>diltiazem hcl TABS</i>	P	QL(3 EA daily)
<i>amlodipine besylate TABS</i>	P	QL(1 EA daily)	<i>diltiazem hcl TB24</i>	P	
<i>amlodipine besylate TABS</i>	NC	QL(1 EA daily)			
CARDENE IV SOLN 0.83 %-40 MG/200ML, 0.86 %-20 MG/200ML	NC				
CARDIZEM CD CP24 120 MG, 180 MG, 300 MG (<i>diltiazem hcl coated beads</i>)	NP	QL(1 EA daily)			
CARDIZEM CD CP24 240 MG (<i>diltiazem hcl coated beads</i>)	NP	QL(2 EA daily)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>diltiazem hcl TB24 180 MG, 240 MG, 300 MG, 360 MG, 420 MG</i>	NP		<i>verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG</i>	P	QL(1 EA daily)
<i>felodipine</i>	NC	QL(1 EA daily)	<i>verapamil hcl CP24 100 MG, 200 MG, 300 MG</i>	NP	
<i>felodipine</i>	P	QL(1 EA daily)	VERAPAMIL HCL POWD	NC	
<i>isradipine CAPS</i>	P		<i>verapamil hcl SOLN 2.5 MG/ML</i>	NC	
KATERZIA	NP		<i>verapamil hcl TABS</i>	P	QL(3 EA daily)
<i>levamlodipine maleate</i>	NP		<i>verapamil hcl TBCR</i>	P	QL(2 EA daily)
<i>nicardipine hcl in sodium chloride SOLN</i>	NC		VERELAN PM CP24 (<i>verapamil hcl</i>)	NP	
<i>nicardipine hcl CAPS</i>	P		CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm		
<i>nicardipine hcl SOLN</i>	NC		Cardiac Glycosides		
NICARDIPINE HCL SOLN (<i>nicardipine hcl</i>)	NC		<i>digoxin SOLN IJ 0.25 MG/ML</i>	NC	
<i>nifedipine CAPS</i>	NP	QL(4 EA daily)	<i>digoxin SOLN PO 0.05 MG/ML</i>	C	
<i>nifedipine TB24 60 MG</i>	P	QL(2 EA daily)	<i>digoxin TABS 62.5 MCG</i>	NC	
<i>nifedipine TB24 30 MG, 90 MG</i>	P	QL(1 EA daily)	<i>digoxin TABS 125 MCG, 250 MCG</i>	C	
<i>nimodipine CAPS</i>	NP		LANOXIN PEDIATRIC SOLN IJ	NC	
<i>nimodipine SOLN</i>	NP		LANOXIN TABS 62.5 MCG, 125 MCG, 250 MCG (<i>digoxin</i>)	NC	
<i>nisoldipine</i>	NP		Inotropes		
NORLIQVA SOLN	NP		<i>dobutamine hcl 12.5 MG/ML, 250 MG/20ML</i>	NC	
NORVASC TABS (<i>amlodipine besylate</i>)	NP	QL(1 EA daily)	DOBUTAMINE-DEXTROSE	NC	
NYMALIZE SOLN 6 MG/ML	NP		<i>dopamine hcl 40 MG/ML</i>	NC	
PROCARDIA XL TB24 60 MG (<i>nifedipine</i>)	NP	QL(2 EA daily)	DOPAMINE-DEXTROSE	NC	
PROCARDIA XL TB24 30 MG, 90 MG (<i>nifedipine</i>)	NP	QL(1 EA daily)	<i>milrinone lactate</i>	NC	
SULAR 8.5 MG, 17 MG, 34 MG (<i>nisoldipine</i>)	NP		<i>milrinone lactate in dextrose</i>	NC	
TIAZAC 240 MG (<i>diltiazem hcl extended release beads</i>)	NP	QL(2 EA daily)	CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions		
TIAZAC 120 MG, 180 MG, 300 MG, 360 MG, 420 MG (<i>diltiazem hcl extended release beads</i>)	NP	QL(1 EA daily)			
VERAPAMIL HCL ER CP24 (<i>verapamil hcl</i>)	NP				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Cardioplegic Solutions			<i>isosorbide dinitrate-hydralazine hcl</i>	NC	
CARDIOPLEGIA IND PLASMA-TROMET	NC		OPSYNVI	NP	SP
CARDIOPLEGIA INDUCTION HIGH K	NC		Cardiovascular Sodium-Glucose Co-Transporter 2 Inhibitors		
CARDIOPLEGIA INDUCTION LOW DEX	NC		INPEFA	NP	
CARDIOPLEGIA INDUCTION NON-ENR	NC		Impotence Agents		
CARDIOPLEGIA MAIN LOW DEXTROSE	NC		CAVERJECT IMPULSE KIT	NC	
CARDIOPLEGIA MAIN LOW TROMETHA	NC		CAVERJECT SOLR	NC	
CARDIOPLEGIA MAIN PLASMA-TROME	NC		CIALIS (<i>tadalafil</i>)	NC	
CARDIOPLEGIA MAINTENANCE	NC		EDEX KIT	NC	
CARDIOPLEGIA REPERFUSATE 4:1	NC		MUSE PLLT 250 MCG, 500 MCG, 1000 MCG	NC	
<i>cardioplegic soln</i>	NC		<i>tadalafil</i>	NC	
MICROPLEGIA MSA-MSG	NC		<i>varденаfil hcl TABS</i>	NC	
Cardiovascular Agents Misc. - Combinations			<i>varденаfil hcl TBDP</i>	NC	
<i>amlodipine besylate-atorvastatin calcium</i>	NP		Peripheral Vasodilators		
CADUET 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>)	NC		NYLIDRIN HCL	NC	
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		PAPAVERINE HCL POWD	NC	
ENTRESTO CPSP	P		<i>papaverine hcl SOLN</i>	NC	
ENTRESTO TABS	P	Brand Preferred	Prostaglandin Vasodilators		
			<i>alprostadi SOLN IJ 500 MCG/ML</i>	NC	
			ORENITRAM MONTH 1 TEPK	NP	SP
			ORENITRAM MONTH 2 TEPK	NP	SP
			ORENITRAM MONTH 3 TEPK	NP	SP
			ORENITRAM TBCR	NP	SP
			Pulmonary Hypertension - Activin Signaling Inhibitor		
			WINREVAIR	NC	SP
			Pulmonary Hypertension - Endothelin Receptor		

Drug Name	Drug Tier	Requirements/ Limits
Antagonists		
<i>ambrisentan</i>	P	SP
<i>bosentan TABS</i>	P	SP
LETAIRIS (<i>ambrisentan</i>)	NP	SP
OPSUMIT	NP	SP
TRACLEER TABS (<i>bosentan</i>)	NP	SP
TRACLEER TBSO	NP	SP
Pulmonary Hypertension - Phosphodiesterase Inhibitors		
ADCIRCA TABS (<i>tadalafil (pulmonary hypertension)</i>)	NP	SP
REVATIO SUSR (<i>sildenafil citrate (pulmonary hypertension)</i>)	NP	SP
REVATIO TABS (<i>sildenafil citrate (pulmonary hypertension)</i>)	NP	SP
<i>sildenafil citrate (pulmonary hypertension) SUSR</i>	NP	SP
<i>sildenafil citrate (pulmonary hypertension) TABS</i>	PA	PA
<i>sildenafil citrate (pulmonary hypertension) TABS</i>	PA	SP; PA
<i>tadalafil (pulmonary hypertension) TABS</i>	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

Drug Name	Drug Tier	Requirements/ Limits
Sinus Node Inhibitors		
<i>ivabradine hcl TABS</i>	NC	
Transthyretin Stabilizers		
VYNDAMAX	C	SP; PA
Vasoactive Soluble Guanylate Cyclase Stimulator (sGC)		
VERQUVO	NC	
CEPHALOSPORINS - Drugs to Treat Bacterial Infections		
Cephalosporin Combinations		
AVYCAZ	NC	
ZERBAXA	NC	
Cephalosporins - 1st Generation		
<i>cefadroxil CAPS</i>	NP	
<i>cefadroxil SUSR</i>	NP	
<i>cefadroxil TABS</i>	NP	
CEFAZOLIN SODIUM-DEXTROSE SOLN 4 %-1 GM/50ML, 4 %-2 GM/100ML, 4 %-3 GM/150ML	NC	
CEFAZOLIN SODIUM-DEXTROSE SOLR	NC	
<i>cefazolin sodium SOLR IJ 1 GM, 2 GM, 3 GM, 10 GM, 500 MG</i>	NC	
CEFAZOLIN SODIUM SOLR IV 2 GM, 3 GM	NC	
<i>cephalexin CAPS 250 MG, 500 MG</i>	C	
<i>cephalexin CAPS 750 MG</i>	NC	
<i>cephalexin SUSR</i>	C	
<i>cephalexin TABS</i>	NC	
Cephalosporins - 2nd Generation		
CEFACLOR ER TB12	NP	
<i>cefaclor CAPS</i>	NP	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>cefaclor SUSR 125 MG/5ML, 375 MG/5ML</i>	NP		CEFTRIAZONE SODIUM- DEXTROSE	NC	
<i>cefotetan disodium IJ 1 GM, 2 GM</i>	NC		Cephalosporins - 4th Generation		
<i>cefoxitin sodium IV</i>	NC		CEFEPIME HCL SOLN	NC	
CEFOXITIN SODIUM- DEXTROSE	NC		<i>cefepime hcl SOLR IJ 1 GM</i>	NC	
<i>cefprozil SUSR 250 MG/5ML</i>	P	1 package(s) per fill retail; AL(Up to 12 yrs old)	CEFEPIME-DEXTROSE	NC	
<i>cefprozil SUSR 125 MG/5ML</i>	P	2 package(s) per fill retail; AL(Up to 12 yrs old)	Cephalosporins - 5th Generation		
<i>cefprozil TABS</i>	P	QL(20 EA per fill retail)	TEFLARO	NC	
<i>cefuroxime axetil TABS</i>	P	QL(20 EA per fill retail)	Cephalosporins - Siderophores		
<i>cefuroxime sodium IJ 750 MG</i>	NC		FETROJA	NC	
Cephalosporins - 3rd Generation			CHEMICALS		
<i>cefdinir CAPS</i>	P	QL(20 EA per fill retail)	Acids, Bases, & Buffers		
<i>cefdinir SUSR</i>	P	1 package(s) per fill retail	ACETIC ACID 3 %, 5 %	NC	
<i>cefixime CAPS</i>	NP		ACETIC ACID GLACIAL	NC	RX/OTC
<i>cefixime SUSR</i>	NP		AMMONIUM HYDROXIDE	NC	RX/OTC
<i>cefpodoxime proxetil SUSR</i>	NP		FUMARIC ACID	NC	
<i>cefpodoxime proxetil TABS</i>	NP		GLYCOLIC ACID CRYST	NC	RX/OTC
<i>ceftazidime IJ 1 GM, 6 GM</i>	NC		GLYCOLIC ACID GRAN	NC	
CEFTAZIDIME AND DEXTROSE	NC		HYDROCHLORIC ACID	NC	
<i>ceftriaxone sodium IJ 2 GM</i>	NC		LACTIC ACID 85 %, 88 %	NC	RX/OTC
<i>ceftriaxone sodium IJ 1 GM, 250 MG, 500 MG</i>	C	QL(3 EA per fill retail); 1 max fill(s) per 31 day(s) retail	NITRIC ACID	NC	
<i>ceftriaxone sodium in dextrose</i>	NC		OXALIC ACID (BULK)	NC	
			OXALIC ACID DIHYDRATE	NC	
			PHOSPHORIC ACID	NC	
			POTASSIUM HYDROXIDE PLLT	NC	RX/OTC
			POTASSIUM HYDROXIDE SOLN XX 10 %, 20 %, 45 %	NC	
			SODIUM BORATE (BULK) POWD	NC	RX/OTC
			SODIUM BORATE DECAHYDRATE POWD	NC	RX/OTC
			SODIUM CARBONATE ANHYDROUS	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SODIUM CARBONATE MONOHYDRATE	NC		ACETYL HEXAPEPTIDE-8 SOLN	NC	
SODIUM HYDROXIDE PLLT	NC	RX/OTC	ACETYLCHOLINE CHLORIDE	NC	
SULFURIC ACID (BULK)	NC		ACETYL-D-GLUCOSAMINE	NC	
TARTARIC ACID (BULK) GRAN	NC	RX/OTC	ACETYL-L-CARNITINE HCL	NC	RX/OTC
TARTARIC ACID (BULK) POWD	NC		ACTIPHYTE OF ALGAE GL	NC	
Bulk Chemicals			ACYCLOVIR	NC	
BIORE HYDRATING MOISTURIZER	NC		ADEMATIONINE DISULF TOSYLATE	NC	
CUCUMBER MELON	NC		ADENOSINE	NC	
DRAKKAR NOIR	NC		AGAR POWD	NC	
FRESH LINEN FRAGRANCE	NC		ALASKAN RED ALGAE	NC	
NATAPRES LIQD	NC		ALBENDAZOLE	NC	
POLYETHYLENE GLYCOL 600 (BULK) LIQD	NC		ALDOSTERONE	NC	
VICTORIAS SECRET VANILLA LACE	NC		ALGINIC ACID	NC	
Bulk Chemicals - A's			ALKYL BENZOATE C12-15	NC	
9-AMINOACRIDINE HCL	NC		ALLOPURINOL	NC	
ACARBOSE	NC		ALOE VERA FREEZE DRIED POWD	NC	RX/OTC
ACEPROMAZINE MALEATE	NC		ALOE VERA LEAF POWD	NC	RX/OTC
ACESULFAME POTASSIUM	NC	RX/OTC	ALOE VERA OIL	NC	
ACETAMINOPHEN CRYST	NC		ALOE VERA POWD	NC	RX/OTC
ACETAMINOPHEN GRAN	NC		ALPHA-KETOGLUTARIC ACID CRYST	NC	
ACETAMINOPHEN POWD	NC	RX/OTC	ALPHA-KETOGLUTARIC ACID POWD	NC	
ACETARSONE	NC		ALPHA-LIPOIC ACID	NC	RX/OTC
ACETAZOLAMIDE CRYST	NC		ALPRAZOLAM	NC	
ACETAZOLAMIDE POWD	NC		ALTRENOGEST	NC	
ACETYL DIPEPTIDE-1 CETYL ESTER	NC		ALUMINUM ACETATE BASIC	NC	
ACETYL HEXAPEPTIDE-8 POWD	NC		ALUMINUM CHLOROHYDRATE	NC	RX/OTC
			AMANTADINE HCL	NC	
			AMERICAN GINSENG	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
AMINOCAPROIC ACID	NC		AVOCADO OIL	NC	
AMINOLEVULINIC ACID HCL POWD	NC		AZELAIC ACID FLAK	NC	RX/OTC
AMINOPROPYL RACEMETHYL PHOS	NC		AZELAIC ACID POWD	NC	RX/OTC
AMITRIPTYLINE HCL POWD	NC		AZELASTINE HCL	NC	
AMLEXANOX	NC		AZITHROMYCIN	NC	
AMLODIPINE BESYLATE	NC		AZITHROMYCIN DIHYDRATE	NC	
AMMONIUM LAURYL SULFATE	NC		BLUE AGAVE ORGANIC	NC	
AMMONIUM MOLYBDATE TETRAHYD	NC		DL-ALPHA LIPOIC ACID	NC	RX/OTC
ANASTROZOLE	NC		L-ARGININE HCL	NC	RX/OTC
ANDROSTENEDIONE	NC		LIPOIC ACID	NC	RX/OTC
ANISINDIONE	NC		MAGNASWEET 110 LIQD	NC	
ANTIMONY POTASSIUM TARTRATE	NC		MAGNASWEET 135 POWD	NC	
ANTIMONY TRICHLORIDE CRYST	NC		SODIUM 4-AMINOSALICYLATE	NC	
ANTIMONY TRISULFIDE	NC		Bulk Chemicals - B's		
ANTIPYRINE CRYST	NC		BACITRACIN MICRONIZED	NC	
ANTIPYRINE POWD	NC		BASIC FUCHSIN HCL	NC	RX/OTC
APOMORPHINE HCL	NC		BECLOMETHASONE DIPROPIONATE	NC	
ARBUTIN ALPHA	NC		<i>belladonna (bulk) TINC</i>	NC	
ARGININE HCL	NC	RX/OTC	BELLADONNA EXTRACT POWD	NC	
ARNICA	NC		BELLADONNA TINC	NC	
ARSENIC TRIOXIDE	NC		BENACTYZINE HCL	NC	
ASCORBIC ACID CASSAVE POWD	NC	RX/OTC	BENAZEPRIL HCL	NC	
ASCORBIC ACID GRAN	NC	RX/OTC	BENFOTIAMINE	NC	
ASCORBIC ACID POWD	NC	RX/OTC	BENZETHONIUM CHLORIDE	NC	
ASCORBYL PALMITATE	NC	RX/OTC	BENZOCAINE	NC	RX/OTC
ASPARAGINE MONOHYDRATE	NC		BENZOIN GUM	NC	
ATORVASTATIN CALCIUM	NC		BENZOQUINONE (PARA)	NC	
ATTAPULGITE	NC		BETA CAROTENE BEAD	NC	
AVIPTADIL ACETATE	NC		BETA CYCLODEXTRIN	NC	
			BETA GLUCAN	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
BETAHISTINE DIHYDROCHLORIDE	NC		BUTYL ALCOHOL	NC	
BETAHISTINE HCL	NC		BUTYLATED HYDROXYANISOLE POWD	NC	
BETAINE ANHYDROUS	NC	RX/OTC	BUTYLENE GLYCOL	NC	
BETAINE HCL	NC		TINOGARD TL	NC	
BETAMETHASONE ACETATE	NC		Bulk Chemicals - C's		
BETANAPHTHOL	NC		ACTIPHYTE OF CUCUMBER	NC	
BETHANECHOL CHLORIDE	NC		ADRENOCHROME SEMICARBAZONE	NC	
BIMATOPROST	NC		ADRENOCORTICOTROP HIC HORMONE	NC	
BIOTIN	NC	RX/OTC	AVICEL PH 101 MICRO CELLULOSE POWD	NC	RX/OTC
BIOTIN-D	NC	RX/OTC	AVICEL PH 105 MICRO CELLULOSE POWD	NC	RX/OTC
BISABOLOL, ALPHA-L	NC		BIOFLAVONOID CITRUS	NC	
BISMUTH CITRATE (BULK)	NC	RX/OTC	CALCIPOTRIENE	NC	
BISOPROLOL FUMARATE	NC		CALCIPOTRIENE MONOHYDRATE	NC	
BITTER ORANGE	NC		CALCIPOTRIOL	NC	
BORON AMORPHOUS FINE	NC		CALCITRIOL	NC	
BORON CITRATE	NC		CALCITRIOL IN ALMOND OIL	NC	
BOSWELLIA SERRATA EXTRACT	NC		CALCIUM ACETATE CRYST	NC	
BRILLIANT GREEN POWD	NC	RX/OTC	CALCIUM ACETATE POWD	NC	
BRIMONIDINE TARTRATE	NC		CALCIUM ALGINATE	NC	
BROMFENAC SODIUM MISC	NC		CALCIUM AMINO ACID CHELATE GRAN	NC	
BROMFENAC SODIUM POWD	NC		CALCIUM CHLORIDE ANHYDROUS POWD	NC	
BUDESONIDE	NC		CALCIUM CITRATE TETRAHYDRATE POWD	NC	RX/OTC
BUFLOMEDIL HCL	NC		CALCIUM CITRATE POWD	NC	RX/OTC
BUPRENORPHINE HCL	NC		CALCIUM FRUCTOBORATE	NC	
BUPROPION HCL	NC		CALCIUM GLUBIONATE	NC	
BUSPIRONE HCL	NC				
BUTALBITAL	NC				
BUTORPHANOL TARTRATE	NC				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CALCIUM GLYCEROPHOSPHATE	NC		CEFTAZIDIME	NC	
CALCIUM LEVULINATE DIHYDRATE	NC		CEFTAZIDIME WITH SOD CARBONATE	NC	
CALCIUM OXIDE	NC		CEFTRIAZONE SODIUM	NC	
CALCIUM PROPIONATE	NC		CELECOXIB	NC	
CALCIUM PYRUVATE	NC		CELLULASE (BULK) 5000 UNIT/GM	NC	RX/OTC
CALCIUM SACCHARATE	NC		CELLULOSE CARMELLOSE SODIUM	NC	
CALCIUM SILICATE	NC		CELLULOSE CRYSTALS	NC	RX/OTC
CALCIUM STEARATE	NC		CELLULOSE POWDER	NC	RX/OTC
CALCIUM THIOGLYCOLATE	NC		CERESIN WAX	NC	
CANADIAN BALSAM	NC	RX/OTC	CESIUM CHLORIDE	NC	
CANNABIDIOL	NC		CETEARYL ALCOHOL-CETEARETH 20	NC	
CAPRYLIC ACID	NC		CETOSTEARYL ALCOHOL	NC	
CAPRYLIC CAPRIC TRIGLYCERIDE	NC		CETYL MYRISTOLEATE OIL	NC	
CAPSAICIN PALMITATE	NC		CETYL MYRISTOLEATE POWDER	NC	
CAPTOPRIL	NC		CETYL MYRISTOLEATE WAX	NC	
CARBACHOL	NC		CETYLPYRIDINIUM CHLORIDE	NC	
CARBAMIDE PEROXIDE	NC	RX/OTC	CHICKEN PROTEIN	NC	
CARBAZOCHROME	NC		CHLORAMBUCIL	NC	
CARBIMAZOLE	NC		CHLORAMPHENICOL PALMITATE	NC	
CARBOMER 934P	NC	RX/OTC	CHLORAMPHENICOL POWDER	NC	
CARBOMER 934P RESIN	NC	RX/OTC	CHLORHEXIDINE DIACETATE	NC	
CARBOMER 940	NC	RX/OTC	CHLOROPHYLLIN SODIUM COPPER	NC	
CARBOMER 940 NF	NC	RX/OTC	CHLOROTHIAZIDE	NC	
CARBOMER 941	NC	RX/OTC	CHLOROXINE	NC	
CARBOMER 980 NF	NC	RX/OTC	CHLOROXYLENOL	NC	
CARBOMER HOMOPOLYMER TYPE C	NC	RX/OTC	CHLORPROMAZINE HCL	NC	
CARBOPOL 940	NC	RX/OTC			
CARBOPOL 940 NF	NC	RX/OTC			
CARDAMOM	NC				
CARMINE	NC				
CARNAUBA WAX	NC				
CARNOSINE L	NC				
CASTOR OIL SULFATED	NC				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CHOLECALCIFEROL CRYST	NC		CLINDAMYCIN HCL MONOHYDRATE	NC	
CHOLECALCIFEROL POWD	NC	RX/OTC	CLINDAMYCIN PHOSPHATE POWD	NC	
CHOLESTEROL FLAK	NC		CLOFAZIMINE	NC	
CHOLESTEROL POWD	NC	RX/OTC	CLOMIPRAMINE HCL	NC	
CHOLESTYRAMINE	NC		CLONAZEPAM	NC	
CHOLINE CHLORIDE	NC		CLOPIDOGREL BISULFATE	NC	
CHOLINE MAG TRISALICYLATE	NC		CLORSULON	NC	
CHONDROITIN SULFATE SODIUM	NC	RX/OTC	COBALT GLUCONATE	NC	
CHORIONIC GONADOTROPIN	NC		COBAMAMIDE	NC	RX/OTC
CHROMIC CHLORIDE CRYST	NC	RX/OTC	COCAMIDE DEA	NC	
CHROMIUM CHLORIDE POWD	NC		COLHIBIN	NC	
CHROMIUM K SULFATE DODECAHYD	NC		COLISTIMETHATE SODIUM	NC	
CHROMIUM PICOLINATE	NC	RX/OTC	COLLAGEN HYDROLYSATE	NC	
CHROMIUM POLYNICOTINATE	NC		COPPER GLUCONATE	NC	
CHRYSIN	NC	RX/OTC	COPPER GLYCINATE	NC	
CICLOPIROX	NC		CORAL CALCIUM	NC	
CIDOFOVIR	NC		CORN OIL	NC	RX/OTC
CINNAMON BARK	NC		COUMARIN	NC	
CIPROFLOXACIN	NC		CRANBERRY	NC	
CIPROFLOXACIN HCL	NC		CREATINE	NC	
CISAPRIDE	NC		CREATINE MONOHYDRATE	NC	RX/OTC
CISPLATIN	NC		CREATININE	NC	RX/OTC
CITICOLINE	NC		CRESOL	NC	
CITRULLINE	NC	RX/OTC	CROSCARMELLOSE SODIUM	NC	
CITRUS BIOFLAVONOIDS 13 %	NC		CROTAMITON	NC	
CLARITHROMYCIN	NC		CROTON OIL	NC	RX/OTC
CLEMIZOLE HCL	NC		CUPUACU BUTTER	NC	
CLIDINIUM BROMIDE	NC		CYANOCOBALAMIN CRYST	NC	RX/OTC
CLINDAMYCIN HCL	NC		CYANOCOBALAMIN POWD	NC	
			CYCLANDELTATE	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CYCLOBENZAPRINE HCL	NC		VITAMIN D3 POWD	NC	RX/OTC
CYCLOMETHICONE	NC		YLANG-YLANG OIL FRAGRANCE	NC	
CYCLOPENTASILOX-PEG/PPG DIMETH	NC		Bulk Chemicals - D's		
CYCLOPENTOLATE HCL	NC		2-DEOXY-D-GLUCOSE	NC	
CYCLOPHOSPHAMIDE	NC		CALCIUM HYDROXYAPATITE	NC	
CYCLOSERINE	NC		DANTROLENE SODIUM	NC	
CYCLOSPORINE	NC		DAPIPRAZOLE HCL	NC	
CYCLOSPORINE A	NC		DAPSONE	NC	
CYPROHEPTADINE HCL	NC		DEHYDROCHOLIC ACID	NC	
CYSTEAMINE HCL	NC		DEMECARIUM BROMIDE	NC	
DIETHYLENE GLYCOL MONOETHYL ET	NC	RX/OTC	DENATONIUM BENZOATE	NC	
ETHOXY DIGLYCOL	NC	RX/OTC	DEOXYCHOLIC ACID	NC	
ETHOXY ETHOXY ETHANOL REAGENT	NC	RX/OTC	DESICCATED BEEF LIVER	NC	
FREEDOM ESTERDERM	NC		DESMOPRESSIN ACETATE	NC	
HUMAN CHORIONIC GONADOTROPIN	NC		DESOXIMETASONE	NC	
L-CARNOSINE	NC		DESOXYCORTICOSTER ONE ACETATE	NC	
L-CITRULLINE	NC	RX/OTC	DEVILS CLAW	NC	
L-CYSTEINE HCL	NC	RX/OTC	DEXAMETHASONE	NC	
L-CYSTEINE CRYST	NC		DEXAMETHASONE ACETATE	NC	
L-CYSTEINE POWD	NC		DEXAMETHASONE BASE	NC	
LOCUST BEAN GUM	NC		DEXAMETHASONE ISONICOTINATE	NC	
MICROCRYSTAL CELLULOSE NF 101 POWD	NC	RX/OTC	DEXAMETHASONE SODIUM PHOSPHATE	NC	
MICROCRYSTAL CELLULOSE NF 102 POWD	NC	RX/OTC	DEXCHLORPHENIRAMIN E MALEATE	NC	
MICROCRYSTAL CELLULOSE NF 105 POWD	NC	RX/OTC	DEXPANTHENOL LIQD	NC	
SPECPED SOLN	NC		DEXPANTHENOL POWD	NC	
UREA PEROXIDE	NC	RX/OTC	DEXTRAN 40000	NC	
VITAMIN D3 LIQD 2400 UNIT/ML, 1000000 UNIT/GM	NC		DEXTRAN 75000	NC	
			DEXTROMETHORPHAN	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
DIAMINOPYRIDINE	NC		DIPHENIDOL HCL	NC	
DIAZEPAM	NC		DIPHENYLCYCLOPROPE NONE (BULK) 98 %	NC	
DIAZOXIDE	NC		DIPYRIDAMOLE	NC	
DIBUCAINE	NC		DISOPHENOL	NC	
DIBUCAINE HCL	NC		DISULFIRAM	NC	
DICHLORALPHENAZONE	NC		DIVALPROEX SODIUM	NC	
DICHLOROACETIC ACID	NC		DMAE BITARTRATE	NC	
DICLAZURIL	NC		D-MANNOSE	NC	
DICLOFENAC SODIUM POWD	NC		DOCOSANOL	NC	
DICYCLOMINE HCL	NC		DOPAMINE HCL	NC	
DIETHANOLAMINE	NC		DORZOLAMIDE HCL	NC	
DIETHYL PHTHALATE	NC		DOW CORNING 1501 FLUID	NC	
DIETHYL TOLUAMIDE	NC		DOXEPIN HCL	NC	
DIETHYLCARBAMAZINE CITRATE	NC		DOXYCYCLINE MONOHYDRATE	NC	
DIETHYLPROPION HCL	NC		D-RIBOSE	NC	
DIETHYLSTILBESTROL	NC		DULOXETINE HCL	NC	
DIGOXIN MICRONIZED POWD	NC		DUTASTERIDE	NC	
DIGOXIN POWD	NC		DYCLONINE HCL CRYST	NC	
DIHYDROCODEINE BITARTRATE	NC		DYCLONINE HCL POWD	NC	
DIHYDROXYACETONE (1,3) DIMER	NC		DYPHYLLINE	NC	
DIINDOLYLMETHANE	NC		GERMALL PLUS LIQD	NC	
DIIDO-L-THYRONINE 3,5	NC		PCCA DMAE COMPLEX	NC	
DILTIAZEM HCL	NC		PROSTAGLANDIN E2	NC	
DIMETHYL FUMARATE	NC		RIBOSE (D)	NC	
DIMETHYL SILOXANE HYDROXYALKYL	NC		SYN-AKE	NC	
DIMETHYLACETAMIDE	NC		Bulk Chemicals - E's		
DIMETHYLAMINOETHANOL	NC		ECONAZOLE NITRATE	NC	
DIMETHYLGLYCINE HCL	NC	RX/OTC	EDROPHONIUM CHLORIDE	NC	
DIOGENIN	NC		EFLORNITHINE HCL	NC	
DIOSMIN	NC		EMU OIL	NC	
DIOXYBENZONE	NC		ENALAPRIL MALEATE	NC	
			ENCLOMIPHENE CITRATE POWD XX	NC	
			ENROFLOXACIN	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
EPINEPHRINE BITARTRATE	NC		FERRIC AMMONIUM CITRATE	NC	
ERGOLOID MESYLATES	NC		FERRIC CHLORIDE HEXAHYDRATE MISC	NC	
ERLOTINIB HCL (BULK)	NC		FERRIC SUBSULFATE (BULK) POWD	NC	
ERYTHROMYCIN ESTOLATE	NC		FERRIC SUBSULFATE (BULK) SOLN	NC	RX/OTC
ESCITALOPRAM OXALATE	NC		FERRIC SULFATE	NC	
ESTRADIOL BENZOATE	NC		FERROUS BISGLYCINATE CHELATE	NC	
ESTRADIOL CYPIONATE	NC		FERROUS FUMARATE	NC	
ESTRADIOL HEMIHYDRATE (BULK)	NC		FERROUS GLUCONATE DIHYDRATE GRAN	NC	
ESTRADIOL MICRONIZED	NC		FERROUS GLUCONATE DIHYDRATE POWD	NC	
ESTRADIOL VALERATE POWD	NC		FERROUS GLUCONATE POWD	NC	
ESTRADIOL POWD	NC		FERULIC ACID	NC	
ESTRIOL	NC		FEVERFEW	NC	
ESTRIOL MICRONIZED	NC		FEXOFENADINE HCL	NC	
ESTRONE CRYST	NC		FINASTERIDE CRYST	NC	
ESTRONE POWD	NC		FINASTERIDE POWD	NC	
ETHOSUXIMIDE	NC		FLIBANSERIN	NC	
ETHYL OLEATE	NC	RX/OTC	FLUCONAZOLE	NC	
ETHYL VANILLIN	NC		FLUCYTOSINE	NC	
ETHYLCELLULOSE	NC		FLUMAZENIL	NC	
ETHYLENEDIAMINE	NC		FLUNIXIN MEGLUMINE	NC	
ETOMIDATE	NC		FLUOROURACIL	NC	
EUCALYPTOL	NC	RX/OTC	FLUOXETINE HCL	NC	
GREEN TEA	NC		FLUPHENAZINE DECANOATE LIQD	NC	
Bulk Chemicals - F's			FLUPHENAZINE DECANOATE POWD	NC	
4-AMINOPYRIDINE	NC		FLUTICASONE PROPIONATE	NC	
4-METHYLPYRAZOLE	NC		FORMOTEROL FUMARATE	NC	
5-FLUOROURACIL	NC				
DALFAMPRIDINE	NC				
FAMCICLOVIR	NC				
FAMOTIDINE	NC				
FENBENDAZOLE	NC				
FENOFIBRATE	NC				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FORMOTEROL FUMARATE DIHYDRATE	NC		GRAPE SEED OIL	NC	RX/OTC
FORSKOLIN	NC		GREEN SOAP	NC	
FURAZOLIDONE	NC		GREEN TEA EXTRACT LIQD	NC	
SIBERIAN PINE OIL	NC		GREEN TEA OIL FRAGRANCE	NC	
Bulk Chemicals - G's			GRISEOFULVIN MICRONIZED	NC	
4-AMINOBUTYRIC ACID	NC		GRISEOFULVIN MICROSIZE	NC	
ARLACEL 165	NC		GUANABENZ ACETATE	NC	
EGCG POWD	NC		GUANETHIDINE SULFATE	NC	
GABAPENTIN	NC		GUANIDINEACETIC ACID	NC	
GALACTOSE	NC		GUAR GUM	NC	
GAMMA-AMINOBUTYRIC ACID	NC		GUARANA SEED EXTRACT	NC	
GARDENIA FRAGRANCE	NC		GYMNEMA SYLVESTRIS LEAF	NC	
GATIFLOXACIN	NC		Bulk Chemicals - H's		
GENISTEIN	NC		ACTIPHYTE OF IVY	NC	
GINSENG ROOT	NC		HALOPERIDOL	NC	
GLUCONOLACTONE	NC		HALOPERIDOL DECANOATE	NC	
GLUCOSAMINE HCL	NC	RX/OTC	HAWTHORN BERRY	NC	
GLUCOSAMINE SULFATE	NC	RX/OTC	HEMATOXYLIN	NC	
GLUCOSAMINE SULFATE NA CL	NC		HEPARIN SODIUM	NC	
GLUCOSAMINE SULFATE POTASSIUM	NC		HEPES	NC	
GLUTARALDEHYDE IN WATER LIQD	NC		HEPTAMINOL	NC	
GLYCEROL MONOOLEATE	NC		HISTAMINE PHOSPHATE CRYSTALS	NC	
GLYCERYL MONOSTEARATE FLAK	NC	RX/OTC	HONEY ALMOND FRAGRANCE	NC	
GLYCOFUROL	NC		HUPERZINE SERRATE A	NC	
GLYCOPYRROLATE	NC		HYALURONATE SODIUM	NC	
GLYCOSAMINOGLYCANS	NC		HYALURONIC ACID	NC	
GLYCYRRHIZIC ACID	NC		HYALURONIC ACID SODIUM	NC	
GOLD SODIUM THIOMALATE	NC		HYDRALAZINE HCL	NC	
GRAMICIDIN D	NC				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
HYDRAZINE SULFATE	NC		METHOCEL E4M PREMIUM CR	NC	RX/OTC
HYDROCODONE BITARTRATE CRYSTALS	NC		METHOCEL K100 PREMIUM	NC	RX/OTC
HYDROCODONE BITARTRATE POWDER	NC		METHOCEL K100M PREMIUM	NC	RX/OTC
HYDROCORTISONE	NC		SODIUM HYALURONATE	NC	
HYDROCORTISONE ACETATE	NC		WITCH HAZEL	NC	
HYDROCORTISONE HEMISUCCINATE	NC		Bulk Chemicals - I's		
HYDROCORTISONE MICRONIZED	NC		CERAPHYL SLK	NC	
HYDROFLUORIC ACID	NC		IDEBENONE	NC	
HYDROXOCOBALAMIN	NC	RX/OTC	IDOXURIDINE	NC	
HYDROXOCOBALAMIN HCL	NC		IMIDUREA	NC	
HYDROXYAMPHETAMINE HBR	NC		IMIQUIMOD	NC	
HYDROXYCHLOROQUINE SULFATE	NC		INDOCYANINE GREEN	NC	
HYDROXYETHYL CELLULOSE POWDER	NC		INDOLE-3-CARBINOL	NC	RX/OTC
HYDROXYETHYL METHACRYLATE	NC		INOSITOL	NC	
HYDROXYPROGESTERONE CAPROATE	NC		INOSITOL HEXANICOTINATE	NC	RX/OTC
HYDROXYPROPYL CELLULOSE	NC	RX/OTC	IODINE RESUBLIMED GRAN	NC	
HYDROXYPROPYL METHYLCELLULOSE	NC	RX/OTC	IODINE STRONG (LUGOL'S)	NC	RX/OTC
HYDROXYPROPYL-BETA-CYCLODEXTRIN	NC		IODINE CRYSTALS	NC	
HYDROXYUREA	P		IODINE FLAKE	NC	
HYDROXYZINE HCL	NC		IOPANOIC ACID	NC	
HYPROMELLOSE	NC	RX/OTC	ISOMETHEPTENE MUCATE	NC	
HYPROMELLOSE METHOCEL K100M	NC	RX/OTC	ISOPROPYL MYRISTATE	NC	
METHOCEL E4M	NC	RX/OTC	ISOPROTERENOL HCL	NC	
METHOCEL E4M PREMIUM	NC	RX/OTC	ISOSORBIDE	NC	
			ISOTRETINOIN	NC	
			ISOXSUPRINE HCL	NC	
			ITRACONAZOLE	NC	
			IVERMECTIN	NC	
			LIPACTIVE INCA INCHI WO	NC	
			Bulk Chemicals - J's		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
JASMINE FRAGRANCE	NC		LEMON BIOFLAVANOID	NC	
JOJOBA OIL	NC		LETROZOLE	NC	
Bulk Chemicals - K's			LEUCOVORIN CALCIUM	NC	
7-KETO DHEA	NC	RX/OTC	LEUPROLIDE ACETATE	NC	
ACTIPHYTE OF SEA KELP	NC		LEVALBUTEROL HCL	NC	
ACTIPHYTE OF SUGAR KELP	NC		LEVETIRACETAM	NC	
KANAMYCIN SULFATE	NC		LEVOCARNITINE	NC	RX/OTC
KETAMINE HCL	NC		LEVOCETIRIZINE DIHYDROCHLORIDE	NC	
KETOPROFEN POWD	NC		LEVOFLOXACIN	NC	
KETOROLAC TROMETHAMINE	NC		LEVOFLOXACIN HEMIHYDRATE	NC	
KETOTIFEN FUMARATE	NC		LEVOMEFOLATE CALCIUM	NC	
KETOTIFEN HYDROGEN FUMARATE	NC		LEVOMEFOLATE GLUCOSAMINE	NC	
KINETIN	NC		LEVORPHANOL TARTRATE	NC	
KIWI FRAGRANCE	NC		LEVOTHYROXINE SODIUM	NC	
KUDZU	NC		LICORICE DEGLYCYRRHIZINATED	NC	
Bulk Chemicals - L's			LIDOCAINE BASE POWD	NC	
ACIDOPHILUS LACTOBACILLUS	NC		LIDOCAINE HCL	NC	
CALCIUM FOLINATE	NC		LIDOCAINE HCL MONOHYDRATE	NC	
CARNITINE (L)	NC	RX/OTC	LIDOCAINE CRYST	NC	
LABETALOL HCL	NC		LIDOCAINE POWD	NC	
LACTASE 5000	NC		LIMONENE	NC	
LAMOTRIGINE	NC		LINCOMYCIN HCL	NC	
LANSOPRAZOLE	NC	RX/OTC	LINOLEIC ACID	NC	
LATANOPROST OIL	NC		LIOETHYRONINE	NC	
LATANOPROST POWD	NC		LIOETHYRONINE SODIUM	NC	
LAURETH-9 POLIDOCANOL	NC		LISINOPRIL	NC	
LAURIC ACID	NC		LITHIUM CITRATE TETRAHYDRATE	NC	
L-CARNITINE	NC	RX/OTC	L-LYSINE HCL POWD	NC	RX/OTC
L-CARNITINE HCL	NC		L-METHYLFOLATE CALCIUM	NC	
LEAD TETROXIDE	NC				
LEFLUNOMIDE	NC				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
LORATADINE	NC	RX/OTC	MAGNESIUM MALATE	NC	
LORAZEPAM	NC		MAGNESIUM PHOSPHATE	NC	
LOSARTAN POTASSIUM	NC		MALEIC ACID	NC	
LOVASTATIN	NC		MALIC ACID	NC	RX/OTC
L-SELENOMETHIONINE	NC		MALTODEXTRIN	NC	
L-SELENOMETHIONINE BLEND	NC		MANDELIC ACID	NC	
LUTEIN BEAD	NC		MANGANESE CHLORIDE	NC	
LUTEIN POWD	NC		MANGANESE GLUCONATE	NC	
PCCA T3 SODIUM	NC		MANGANESE SULFATE	NC	
PCCA T4 SODIUM	NC		MECAMYLAMINE HCL	NC	
PINENE (L-ALPHA)	NC		MECHLORETHAMINE HCL	NC	
Bulk Chemicals - M's			MECLOFENOXATE HCL	NC	
2-METHOXYESTRADIOL	NC		MEDIUM CHAIN TRIGLYCERIDES	NC	
5-METHYLTETRAHYDROFOLATE CALC	NC	RX/OTC	MEDROXYPROGESTERONE ACE MICRO	NC	
DIMETHYL SULFONE POWD	NC		MEDROXYPROGESTERONE ACETATE	NC	
L-GLUTAMIC ACID MONOSOD SALT	NC		MEDROXYPROGESTERONE MICRONIZED	NC	
MACA ROOT	NC		MEGLUMINE	NC	
MAFENIDE ACETATE	NC		MELOXICAM	NC	
MAFENIDE HCL	NC		MENADIONE	NC	
MAGNESIUM ALUMINUM SILICATE	NC		MEQUINOL	NC	
MAGNESIUM AMINO ACID CHELATE	NC		MERCAPTOPURINE	NC	
MAGNESIUM ASCORBATE	NC		MERCAPTOPURINE MONOHYDRATE	NC	
MAGNESIUM BISGLYCINATE DIHYD	NC		METACRESOL ACETATE	NC	
MAGNESIUM CITRATE	NC	RX/OTC	METFORMIN HCL	NC	
MAGNESIUM GLUCONATE	NC		METHACHOLINE CHLORIDE CRYST	NC	
MAGNESIUM GLYCINATE	NC		METHACHOLINE CHLORIDE POWD	NC	
MAGNESIUM HYDROXIDE	NC		METHACRYLIC ACID COPOLYMER A	NC	
			METHANESULFONIC ACID	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
METHOCARBAMOL	NC		MOMETASONE FUROATE	NC	
METHOXYAMINE HYDROCHLORIDE	NC		MONOBENZONE	NC	
METHOXYETHANOL	NC		MONOETHANOLAMINE	NC	
METHSCOPOLAMINE BROMIDE	NC		MONTELUKAST SODIUM	NC	
METHSCOPOLAMINE NITRATE	NC		MORANTEL TARTRATE	NC	
METHYL METHACRYLATE CROSSPOLY	NC		MOXIFLOXACIN HCL	NC	
METHYL SULFONE CRYSTALS	NC	RX/OTC	MOXISYLYTE HCL	NC	
METHYLCOBALAMIN	NC	RX/OTC	MUPIROCIN	NC	
METHYLENE CHLORIDE	NC		MYCOPHENOLATE MOFETIL	NC	
METHYLMETHACRYL CROSSPOLYMER	NC		VITAMIN K2	NC	
METHYLPHENIDATE HCL	NC		Bulk Chemicals - N's		
METHYLPYRROLIDONE	NC		NABUMETONE	NC	
METHYLSULFONYLMETHANE CRYSTALS	NC	RX/OTC	N-ACETYL-L-CARNOSINE	NC	
METHYLSULFONYLMETHANE POWDER	NC		NADH	NC	
METHYSERGIDE MALEATE	NC		NALBUPHINE HCL	NC	
METRONIDAZOLE	NC		NALOXONE HCL	NC	
METRONIDAZOLE BENZOATE	NC		NALOXONE HCL DIHYDRATE	NC	
MEXILETINE HCL	NC		NALTREXONE	NC	
MIDAZOLAM	NC		NALTREXONE HCL	NC	
MILK THISTLE	NC		NALTREXONE HCL ANHYDROUS	NC	
MIRTAZAPINE	NC		NALTREXONE HCL DIHYDRATE	NC	
MISOPROSTOL	NC		NALTREXONE HCL MICRONIZED	NC	
MISOPROSTOL-HPMC	NC		NANDROLONE DECANOATE	NC	
MITOMYCIN	NC		NAPHAZOLINE HCL POWDER	NC	
MITOTANE	NC		NEOSTIGMINE METHYLSULFATE	NC	
MODAFINIL	NC		NETTLE LEAF	NC	
MOLYBDENUM	NC		NICLOSAMIDE	NC	
			NICOTINAMIDE ADENINE DINUCLEOTIDE	NC	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
NICOTINAMIDE RIBOSIDE CHLORIDE	NC		OXYTOCIN	NC	
NICOTINE POLACRILEX	NC	RX/OTC	OXYTOCIN ACETATE	NC	
NICOTINE TARTRATE	NC		TRITON X-100	NC	
NIFEDIPINE	NC		Bulk Chemicals - P's		
NIFEDIPINE MICRONIZED	NC		BRIJ 30	NC	
NIMODIPINE	NC		BRIJ 35 WAX	NC	
NITAZOXANIDE	NC		BRIJ 700 WAX	NC	
NITROFURANTOIN ANHYDROUS	NC		BRIJ 93	NC	
NITROFURANTOIN MONOHYDRATE	NC		BRIJ C20 WAX	NC	
NONOXYNOL-9	NC		BRIJ S20 WAX	NC	
NOREPINEPHRINE BITARTRATE	NC		COSMOCIL CQ LIQD	NC	
NORETHINDRONE	NC		DL-PANTHENOL	NC	
NYSTATIN	NC		DL-PANTHENOL ALCOHOL	NC	
Bulk Chemicals - O's			PALMAROSA	NC	
HYDROXYQUINOLINE SULFATE	NC		PALMITOYL PENTAPEPTIDE-3	NC	
L-ORNITHINE HYDROCHLORIDE	NC	RX/OTC	PALMITOYL TRIPEPTIDE-3	NC	
OCTINOXATE	NC		PANCREATIN	NC	
OCTISALATE	NC		PANTHENOL	NC	
OCTYL STEARATE	NC		PANTOPRAZOLE SODIUM	NC	
OLMESARTAN MEDOXOMIL	NC		PAPAIN	NC	
ONDANSETRON HCL	NC		PARACHLOROPHENOL	NC	
ORIGANUM OIL	NC		PARAFORMALDEHYDE	NC	
ORLISTAT	NC		PAROMOMYCIN SULFATE	NC	
ORNITHINE HCL	NC	RX/OTC	PEARBERRY FRAGRANCE	NC	
OSELTAMIVIR PHOSPHATE	NC		PEG 400 MONOSTEARATE	NC	
OXANDROLONE	NC		PEG-40 CASTOR OIL	NC	
OXYBUTYNIN CHLORIDE	NC		PENCICLOVIR (BULK)	NC	
OXYMETAZOLINE HCL	NC		PENICILLAMINE	NC	
OXYTETRACYCLINE DIHYDRATE	NC		PENNYROYAL OIL	NC	
			PENTOSAN POLYSULFATE SODIUM	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PENTOXIFYLLINE	NC		PIRACETAM	NC	
PENTYLENE GLYCOL	NC		PODOFILOX	NC	
PENTYLENETETRAZOLE	NC		POLYACRYLATE CROSSPOLYMER-6	NC	
PERFLUORODECALIN	NC		POLYHEXAMETHYLENE BIGUANIDE SOLN	NC	
PERGOLIDE MESYLATE	NC		POLYOXYL 40 HYD CASTOR OIL	NC	
PERMETHRIN LIQD	NC		POLYVINYL ALCOHOL	NC	
PERPHENAZINE	NC		POLYVINYLPIRROLIDONE K-30	NC	
PEUCEDANUM OSTRUTHIUM EXTRACT	NC		POLYVINYLPIRROLIDONE K-90	NC	
PHENELZINE SULFATE	NC		POMEGRANATE SEED	NC	
PHENINDIONE	NC		PONAZURIL	NC	
PHENIRAMINE MALEATE POWD	NC		POTASSIUM ACETATE CRYSTALS	NC	RX/OTC
PHENOLSULFONIC ACID	NC		POTASSIUM ACETATE POWD	NC	
PHENOXYBENZAMINE HCL	NC		POTASSIUM ASPARTATE	NC	
PHENOXYETHANOL	NC		POTASSIUM AZELAOLYL DIGLYCINATE	NC	
PHENTERMINE HCL	NC		POTASSIUM BENZOATE	NC	
PHENTOLAMINE MESYLATE	NC		POTASSIUM IODIDE CRYSTALS	NC	RX/OTC
PHENYL SALICYLATE	NC		POTASSIUM IODIDE GRAN	NC	
PHENYLETHYL ALCOHOL	NC		POTASSIUM IODIDE POWD	NC	
PHENYLETHYLAMINE HCL	NC		POTASSIUM METABISULFITE POWD	NC	
PHENYLTOLOXAMINE CITRATE	NC		POTASSIUM PERMANGANATE GRAN	NC	RX/OTC
PHENYTOIN	NC		POTASSIUM PHOSPHATE DIBASIC GRAN	NC	
PHOSPHATIDYLCHOLINE	NC	RX/OTC	POTASSIUM PHOSPHATE MONOBASIC CRYSTALS	NC	
PHOSPHATIDYLSERINE	NC				
PHYTIC ACID IN WATER	NC				
PHYTONADIONE CRYSTALS	NC				
PHYTONADIONE LIQD	NC	RX/OTC			
PIMOBENDAN	NC				
PINE BARK EXTRACT	NC				
PINE NEEDLE OIL	NC				
PINEAPPLE EXTRACT	NC				
PIPERINE	NC				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
POTASSIUM PHOSPHATE MONOBASIC POWD	NC		PROPARACAINE HCL	NC	
POTASSIUM SODIUM TARTRATE GRAN	NC		PROPYL GALLATE	NC	
POTASSIUM SODIUM TARTRATE POWD	NC		PROPYLENE GLYCOL	NC	RX/OTC
POTASSIUM SULFATE	NC		PROPYLENE GLYCOL MONOSTEARATE	NC	
POVIDONE	NC		PROPYLTHIOURACIL	NC	
POVIDONE K-30	NC		PROTAMINE SULFATE	NC	
POVIDONE-IODINE FLAK	NC		PROTEASE	NC	
POVIDONE-IODINE POWD	NC		PSYLLIUM HUSK	NC	
POWDER SCENT FRAGRANCE	NC		PULLULAN	NC	
PRALIDOXIME CHLORIDE	NC		PYRANTEL PAMOATE	NC	
PRAZIQUANTEL POWD	NC		PYRAZINAMIDE	NC	
PREGABALIN	NC		PYRIDOSTIGMINE BROMIDE	NC	
PRILOCAINE	NC		PYRIDOXAL-5 PHOSPHATE	NC	RX/OTC
PRILOCAINE HCL	NC		PYRIDOXAL-5- PHOSPHATE	NC	RX/OTC
PRIMIDONE	NC		PYRIMETHAMINE	NC	
PROCARBAZINE HCL	NC		VITAMIN K1 POWD	NC	
PROCHLORPERAZINE EDISYLATE	NC		ZINC PYRITHIONE	NC	
PROFLAVINE HEMISULFATE	NC		Bulk Chemicals - Q's		
PROGESTERONE MICRONIZED	NC		QUATERNIUM-15	NC	
PROGESTERONE MILLED POWD	NC		QUERCETIN DIHYDRATE	NC	
PROGESTERONE WETTABLE (SOY) POWD	NC		QUININE HCL DIHYDRATE	NC	
PROGESTERONE WETTABLE POWD	NC		Bulk Chemicals - R's		
PROGESTERONE POWD	NC		RACEPINEPHRINE HCL	NC	RX/OTC
PROMAZINE HCL	NC		RAPESEED OIL	NC	
PROMETHAZINE HCL POWD	NC		RASAGILINE MESYLATE	NC	
PROPANEDIOL	NC		RAUWOLFIA SERPENTINA	NC	
			RED YEAST RICE	NC	RX/OTC
			RED YEAST RICE EXTRACT	NC	RX/OTC
			RESVERATROL	NC	
			RETINAL	NC	
			RIBAVIRIN	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
RIBOFLAVIN	NC	RX/OTC	NOURISIL GEL	NC	
RIBOFLAVIN 5-PHOSPHATE SODIUM	NC	RX/OTC	PMX-1184 SILICONE LIQD	NC	RX/OTC
RIBOFLAVIN-5-PHOSPHATE SODIUM	NC	RX/OTC	SACCHARIN CALCIUM	NC	
RIFAMPIN	NC		SAGE LEAF	NC	
RIFAXIMIN	NC		SALICYLIC ACID CRYSTALS	NC	
ROCURONIUM BROMIDE	NC		SALICYLIC ACID POWD	NC	RX/OTC
RONIDAZOLE	NC		SALICYLIC ACID SOLN	NC	
ROPIVACAINE HCL	NC		SALSALATE	NC	
ROSE BENGAL B	NC		SAW PALMETTO BERRY POWD	NC	
ROSUVASTATIN CALCIUM	NC		SCARLET RED	NC	
RUBIDIUM CHLORIDE	NC		SECRETIN-MANNITOL	NC	
RUTIN	NC		SELENIUM SULFIDE	NC	
Bulk Chemicals - S's			SELENIUM YEAST	NC	
AC DERMAPEPTIDE	NC		SENNA EXTR	NC	
CALCIUM SACCHARIN	NC		SERMORELIN ACETATE	NC	
CETYL ESTERS WAX	NC		SEROTONIN HCL	NC	
COPASIL GEL	NC		SERTRALINE HCL	NC	
DEOXYCHOLIC ACID SODIUM	NC		SHARK CARTILAGE	NC	
DIBUTYL SQUARATE LIQD	NC	RX/OTC	SHOWER FRESH FRAGRANCE	NC	
DIMERCAPTOSUCCINIC ACID CRYSTALS	NC		SIBERIAN GINSENG	NC	
DIMERCAPTOSUCCINIC ACID POWD	NC		SILDENAFIL CITRATE	NC	
DL-3-HYDROXYBUTYRIC ACID SOD	NC		SILICONE BLEND CUSTOM PSTE	NC	
DOW CORNING 200 LIQD	NC	RX/OTC	SILICONE ELASTOMER BLEND GEL	NC	
L-ASPARTIC ACID SODIUM	NC	RX/OTC	SILICONE ELASTOMER BLEND LIQD	NC	RX/OTC
LECITHIN SOYA GRAN	NC		SILICONE FLUID 556 LIQD	NC	RX/OTC
LECITHIN SOYA POWD	NC		SILVER SULFADIAZINE	NC	
L-SERINE	NC	RX/OTC	SIMVASTATIN	NC	
NICE PURE BAKING SODA	NC	RX/OTC	SINCALIDE IN MANNITOL	NC	
			SIROLIMUS	NC	
			SODIUM ACETATE TRIHYDRATE	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SODIUM ALGINATE	NC		SODIUM MONOFLUOROPHOSPHATE	NC	
SODIUM ASCORBYL PHOS DIHYDRATE	NC		SODIUM NITRATE (BULK) GRAN	NC	
SODIUM ASPARTATE	NC		SODIUM NITRATE (BULK) POWD	NC	
SODIUM ASPARTATE MONOHYDRATE	NC	RX/OTC	SODIUM OLEATE	NC	
SODIUM BICARBONATE	NC	RX/OTC	SODIUM PHENYLBUTYRATE	NC	
SODIUM BISULFITE	NC	RX/OTC	SODIUM PHOSPHATE DIBASIC HEPTA CRYSTALS	NC	
SODIUM BITARTRATE MONOHYDRATE	NC		SODIUM PHOSPHATE DIBASIC HEPTA POWD	NC	
SODIUM CAPRATE	NC		SODIUM PHOSPHATE DIBASIC CRYSTALS	NC	
SODIUM CAPRYLATE	NC		SODIUM PHOSPHATE DIBASIC GRAN	NC	RX/OTC
SODIUM CHLORITE FLAK	NC		SODIUM PHOSPHATE DIBASIC POWD	NC	
SODIUM CITRATE DIHYDRATE GRAN	NC		SODIUM PHOSPHATE MONOBASIC GRAN	NC	
SODIUM CITRATE DIHYDRATE POWD	NC		SODIUM PHOSPHATE MONOBASIC POWD	NC	RX/OTC
SODIUM COCOYL GLUTAMATE	NC		SODIUM PHOSPHATE TRIBASIC CRYSTALS	NC	
SODIUM DEHYDROACETATE	NC		SODIUM PHOSPHATE TRIBASIC POWD	NC	
SODIUM DEOXYCHOLATE	NC		SODIUM PIDOLATE	NC	
SODIUM DIACETATE	NC		SODIUM PROPIONATE	NC	RX/OTC
SODIUM DICHLOROACETATE	NC		SODIUM SELENITE	NC	
SODIUM FLUORIDE	NC		SODIUM STARCH GLYCOLATE	NC	
SODIUM FLUOROPHOSPHATE	NC		SODIUM STEARATE	NC	
SODIUM GLUCONATE	NC		SODIUM STEARYL FUMARATE	NC	
SODIUM IODIDE GRAN	NC		SODIUM SUCCINATE	NC	
SODIUM LACTATE 60 %	NC		SODIUM TARTRATE DIHYDRATE	NC	
SODIUM LAURETH SULFATE	NC		SODIUM TETRADECYL SULFATE POWD	NC	
SODIUM METABISULFITE GRAN	NC	RX/OTC			
SODIUM METABISULFITE POWD	NC				
SODIUM MOLYBDATE	NC				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SODIUM TETRADECYL SULFATE SOLN 27 %	NC		SUCROSE OCTAACETATE	NC	
SODIUM THIOSALICYLATE	NC		SUFENTANIL CITRATE	NC	
SORAFENIB TOSYLATE (BULK)	NC		SULFACETAMIDE	NC	
SORBITAN MONOLAURATE	NC		SULFADIMETHOXINE	NC	
SORBITAN MONOOLEATE	NC		SULFAMERAZINE	NC	
SORBITAN MONOPALMITATE	NC		SULFOSALICYLIC ACID DIHYDRATE	NC	
SOYABEAN CASEIN DIGEST MEDIUM	NC		SULFUR PRECIPITATED (BULK) POWD	NC	RX/OTC
SOYBEAN LECITHIN GRAN	NC		SULFUR SUBLIMED (BULK) POWD	NC	RX/OTC
SPAN 80	NC		SULPIRIDE	NC	
SPIRULINA	NC		SUMATRIPTAN	NC	
SQUALANE LIQD	NC		SUMATRIPTAN SUCCINATE	NC	
SQUALANE OIL	NC		SUPEROXIDE DISMUTASE POWD	NC	
SQUALENE	NC		SUPEROXIDE DISMUTASE SOLN	NC	
SQUARIC ACID	NC		TRUCLEAR STEVIA PLUS	NC	RX/OTC
SQUARIC ACID DI-N-BUTYL ESTER POWD	NC		Bulk Chemicals - T's		
SQUARIC ACID IN BUTANOL LIQD	NC	RX/OTC	CURCUMIN	NC	
ST JOHNS WORT	NC		CURCUMIN EXTRACT	NC	
STANNOUS CHLORIDE DIHYDRATE	NC		NATURAL MIXED TOCOPHEROLS	NC	
STANOZOLOL	NC		RENOVAGE	NC	
STEVIA EXTRACT	NC	RX/OTC	TACROLIMUS	NC	
STEVIOL GLYCOSIDES	NC		TADALAFIL	NC	
STEVIOSIDE EXTR	NC		TAMOXIFEN CITRATE	NC	
STRONTIUM CHLORIDE CRYST	NC		TAMOXIFEN CITRATE MICRONIZED	NC	
SUCCIMER DMSA POWD	NC		TAZAROTENE	NC	
SUCCINIC ACID	NC		TEA COCOYL GLUTAMINE	NC	
SUCCINYLCHOLINE CHLORIDE	NC		TEA TREE OIL	NC	RX/OTC
			TERBINAFINE HCL	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TESTOSTERONE CYPIONATE	NC		TRANEXAMIC ACID	NC	RX/OTC
TESTOSTERONE ENANTHATE	NC		TRANILAST CRYSTALS	NC	
TESTOSTERONE MICRONIZED CRYSTALS	NC		TRANILAST POWDER	NC	
TESTOSTERONE MICRONIZED POWDER	NC		TRIACETIN	NC	
TESTOSTERONE PROPIONATE	NC		TRIAMCINOLONE	NC	
TESTOSTERONE POWDER	NC		TRIAMCINOLONE HEXACETONIDE	NC	
TETRACAINE	NC		TRICHLORMETHIAZIDE	NC	
TETRACAINE HCL	NC		TRICHLOROACETIC ACID CRYSTALS	NC	RX/OTC
TETRAHYDROBIOPTERIN DIHCL	NC		TRICHLOROACETIC ACID POWDER	NC	
TETRAHYDROZOLINE HCL	NC		TRICLOSAN	NC	
THEANINE	NC		TRIETHANOLAMINE LAURYL SULFATE	NC	
THEOBROMINE	NC		TRIETHANOLAMINE SALICYLATE	NC	
THIOGUANINE	NC		TRILOSTANE	NC	
THIORIDAZINE HCL	NC		TRIMEPRAZINE TARTRATE	NC	
THYMUS	NC		TRIMETHOXYBENZAMIDE HCL	NC	
THYROID (PORCINE)	NC		TRIOXSALEN	NC	
TICARCILLIN-POT CLAVULANATE	NC		TRIPROlidine HCL	NC	
TITANIUM DIOXIDE LIQUID	NC		TROMETHAMINE	NC	
TITANIUM DIOXIDE POWDER	NC		TROPOLONE	NC	
TIZANIDINE HCL	NC		TRYPSIN POWDER	NC	
TOBRAMYCIN	NC		TURMERIC	NC	
TOCOTRIENOLS	NC		TURMERIC ROOT	NC	
TOFACITINIB CITRATE	NC		TYLOSIN TARTRATE	NC	
TOLAZOLINE HCL	NC		TYLOXAPOL	NC	
TOLTRAZURIL	NC		XILOGEL	NC	
TOLU BALSAM MISC	NC		Bulk Chemicals - U's		
TOLUIDINE BLUE O POWDER	NC		UBIQUINOL	NC	
TOPIRAMATE	NC		UREA BEAD	NC	RX/OTC
TRAMADOL HCL	NC		UREA POWDER	NC	RX/OTC
			URIDINE	NC	
			URSODIOL	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Bulk Chemicals - V's			XYLAZINE HCL	NC	
ALPHA-TOCOPHEROL	NC		XYLITOL	NC	RX/OTC
RETINOL MOLECULAR FILM OIL	NC		XYLOMETAZOLINE HCL	NC	
Bulk Chemicals - Y's			YEAST EXTRACT	NC	
SODIUM VALPROATE	NC		YOHIMBINE HCL	NC	
TOCOPHERYL ACID SUCC D-ALPHA	NC	RX/OTC	Bulk Chemicals - Z's		
VALACYCLOVIR HCL	NC		ZEAXANTHIN	NC	
VALERIAN ROOT POWD	NC		ZINC ACETATE	NC	RX/OTC
VALPROATE SODIUM	NC		ZINC CHLORIDE GRAN	NC	RX/OTC
VALPROIC ACID POWD	NC		ZINC CITRATE	NC	
VANADIUM	NC		ZINC GLUCONATE POWD	NC	
VANADYL SULFATE HYDRATE	NC	RX/OTC	ZINC MONOMETHIONINE	NC	
VANCOMYCIN HCL	NC		ZINC OXIDE	NC	RX/OTC
VANILLIN CRYST	NC		ZINC PICOLINATE	NC	
VANILLIN POWD	NC		ZINC UNDECYLENATE	NC	
VARDENAFIL HCL	NC		ZIRCONIUM OXIDE	NC	
VEEGUM	NC		ZONISAMIDE	NC	
VIDARABINE	NC		Liquids		
VINPOCETINE	NC		ACETONE	NC	RX/OTC
VITAMIN A ACETATE BEAD	NC		ACTIPHYTE OF LEMONGRASS	NC	
VITAMIN A PALMITATE	NC	RX/OTC	ALCOHOL ANHYDROUS	NC	
VITAMIN A POWD	NC		<i>alcohol, rubbing XX</i>	NC	
VITAMIN E	NC		ALCOHOL, USP	NC	RX/OTC
VITAMIN E ACETATE	NC	RX/OTC	ALMOND OIL (SWEET)	NC	RX/OTC
VITAMIN E SUCCINATE	NC	RX/OTC	AMMONIUM LACTATE	NC	
VORICONAZOLE	NC		ANISE	NC	
Bulk Chemicals - W's			BASE G ALMOND OIL (SWEET)	NC	RX/OTC
SEPICALM VG	NC		BAY OIL	NC	
WHEY PROTEIN ISOLATE	NC		BENZYL BENZOATE	NC	RX/OTC
WHITE KIDNEY BEAN EXTRACT	NC		BERGAMOT OIL	NC	
WHITE WILLOW BARK	NC		CAMPBOR SPIRIT (BULK) 10 %	NC	
Bulk Chemicals - X					

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CASTOR OIL	NC	RX/OTC	GRAPEFRUIT OIL	NC	
CEDAR LEAF OIL	NC		GUAIACOL	NC	
CEDARWOOD OIL	NC		HM ISOPROPYL ALCOHOL XX	NC	RX/OTC
CELERY SEED	NC		ISOPROPANOL XX	NC	RX/OTC
CHLORHEXIDINE GLUCONATE	NC		<i>isopropyl alcohol XX 91 %, 99 %</i>	NC	
CHLOROFORM	NC	RX/OTC	ISOPROPYL ALCOHOL XX 100 %, 70 %	NC	RX/OTC
CINNAMON OIL	NC		ISOPROPYL ALCOHOL (RUBBING) XX	NC	
CITRONELLA OIL	NC	RX/OTC	<i>isopropyl alcohol, rubbing XX</i>	NC	
CLOVE OIL	NC	RX/OTC	ISOPROPYL PALMITATE (BULK)	NC	RX/OTC
COCONUT OIL	NC	RX/OTC	JUNIPER TAR	NC	
COTTONSEED OIL	NC	RX/OTC	LAVENDER OIL	NC	RX/OTC
CRYOSERV	NC	RX/OTC	LEMON OIL	NC	
DIMETHYL SULFOXIDE	NC	RX/OTC	LEMONGRASS OIL	NC	
ETHANOL	NC	RX/OTC	LIME OIL	NC	RX/OTC
ETHER	NC		LINSEED OIL	NC	
ETHYL ALCOHOL 95 %, 100 %	NC	RX/OTC	MACADAMIA NUT OIL	NC	
EUCALYPTUS OIL	NC	RX/OTC	METHANOL	NC	RX/OTC
EUGENOL	NC	RX/OTC	METHYL ALCOHOL	NC	RX/OTC
FT NAIL POLISH REMOVER	NC	RX/OTC	MUSTARD OIL	NC	
FT SWEET OIL	NC	RX/OTC	NIAOULI	NC	
GERANIUM OIL	NC	RX/OTC	OLIVE OIL	NC	RX/OTC
GLYCERINE LIQD	NC	RX/OTC	ORANGE OIL	NC	
GLYCERIN LIQD	NC	RX/OTC	PEANUT OIL	NC	RX/OTC
GLYCERIN SOLN	NC		PEPPERMINT OIL	NC	RX/OTC
GLYCEROL FORMAL LIQD	NC	RX/OTC	PEPPERMINT SPIRIT (BULK)	NC	
GLYCINE SOYA PROTEIN	NC		PINE OIL	NC	
GNP CINNAMON	NC		PINE TAR LIQD	NC	
GNP EUCALYPTUS	NC	RX/OTC	POLYSORBATE 20	NC	RX/OTC
GNP PEPPERMINT SPIRIT	NC		POLYSORBATE 40	NC	
GNP SODIUM SILICATE	NC		POLYSORBATE 60	NC	
GOODSENSE ISOPROPYL ALCOHOL XX	NC	RX/OTC	POLYSORBATE 80	NC	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PRETZ SOLN	NC		5-HYDROXY-L-TRYPTOPHAN	NC	
QC CAMPHOR SPIRIT	NC		ALLANTOIN	NC	RX/OTC
QC CASTOR OIL	NC	RX/OTC	ALPROSTADIL	NC	
QC SWEET OIL	NC	RX/OTC	ALUM AMMONIUM (BULK)	NC	
QUASSIA VINEGAR MS	NC		ALUMINUM AMMONIUM SULFATE	NC	
ROSE OIL (BULK)	NC	RX/OTC	ALUMINUM HYDROXIDE DRIED GEL	NC	RX/OTC
ROSEMARY OIL	NC	RX/OTC	ALUMINUM HYDROXIDE GEL	NC	RX/OTC
SAFFLOWER OIL	NC	RX/OTC	ALUMINUM POTASSIUM SULFATE POWD	NC	RX/OTC
SASSAFRAS OIL	NC		ALUMINUM SULFATE CRYST	NC	
SESAME OIL	NC	RX/OTC	ALUMINUM SULFATE GRAN	NC	
SM CAMPHOR SPIRIT	NC		AMMONIUM BROMIDE GRAN	NC	
SM ISOPROPYL ALCOHOL XX	NC	RX/OTC	AMMONIUM BROMIDE POWD	NC	
SM SWEET OIL	NC	RX/OTC	AMMONIUM CARBONATE (BULK) POWD	NC	
SOYBEAN OIL OIL	NC	RX/OTC	AMMONIUM CHLORIDE	NC	RX/OTC
SPEARMINT OIL	NC	RX/OTC	AMMONIUM PHOSPHATE DIBASIC GRAN	NC	
SWEET OIL	NC	RX/OTC	AMMONIUM SULFATE	NC	
TANGERINE	NC		ASPARTIC ACID	NC	RX/OTC
TANGERINE OIL	NC		BHT GRAN	NC	
TURPENTINE	NC		BISMUTH SUBCARBONATE	NC	RX/OTC
TURPENTINE OIL	NC		BISMUTH SUBNITRATE	NC	RX/OTC
UNDECYLENIC ACID	NC	RX/OTC	BISMUTH SUBSALICYLATE	NC	RX/OTC
WA-001 EXPERIMENTAL SOIL SURFA	NC		BORIC ACID NF POWD	NC	RX/OTC
Semi-Solids			BORIC ACID TOPICAL POWD	NC	RX/OTC
COAL TAR EXTRACT SOLN	NC	RX/OTC	BORIC ACID CRYST	NC	
COAL TAR LIQD	NC				
COAL TAR SOLN	NC	RX/OTC			
COAL TAR TAR	NC				
PERUVIAN BALSAM LIQD	NC				
PERUVIAN BALSAM MISC	NC				
PERUVIAN BALSAM POWD	NC				
Solids					

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
BORIC ACID POWD	NC	RX/OTC	DIMENHYDRINATE	NC	
BUTYLATED HYDROXYTOLUENE CRYSTALS	NC		DIMERCAPTOPROPANE-SULFONATE NA	NC	
BUTYLATED HYDROXYTOLUENE GRAN	NC		DINITROCHLORO BENZENE	NC	
BUTYLATED HYDROXYTOLUENE POWD	NC		DOCUSATE SODIUM-SOD BENZOATE	NC	
CALCIUM HYDROXIDE	NC	RX/OTC	EDETATE ACID	NC	
CALCIUM SULFATE	NC	RX/OTC	EDETATE DISODIUM	NC	RX/OTC
CALCIUM SULFATE HEMIHYDRATE	NC	RX/OTC	EDETATE DISODIUM DIHYDRATE	NC	RX/OTC
CAPSICUM OLEORESIN LIQD	NC		EDETATE SODIUM	NC	
CARBIDOPA	NC		EDETIC ACID	NC	
CARBIDOPA ANHYDROUS	NC		EPINEPHRINE	NC	
CARBOXYMETHYLCELLULOSE SODIUM GRAN	NC		EPINEPHRINE BASE	NC	
CARBOXYMETHYLCELLULOSE SODIUM POWD	NC	RX/OTC	FLUORESCEIN	NC	
CATNIP	NC		FLUORESCEIN SODIUM	NC	
CITRIC ACID ANHYDROUS GRAN	NC	RX/OTC	FULLERS EARTH (BULK)	NC	RX/OTC
CITRIC ACID ANHYDROUS POWD	NC	RX/OTC	GERMANIUM SESQUIOXIDE	NC	
CITRIC ACID MONOHYDRATE GRAN	NC	RX/OTC	GINGER ROOT	NC	
CITRIC ACID MONOHYDRATE POWD	NC		GNP BORIC ACID POWD	NC	RX/OTC
CITRIC ACID POWD	NC	RX/OTC	HM BORIC ACID POWD	NC	RX/OTC
COENZYME Q10	NC	RX/OTC	HOMATROPINE METHYLBROMIDE POWD	NC	
CORN STARCH	NC	RX/OTC	HYDROXYTRYPTOPHAN (BULK)	NC	
DEHYDROEPIANDROSTERONE MICRO	NC		HYDROXYTRYPTOPHAN L-5	NC	
DEHYDROEPIANDROSTERONE POWD	NC	RX/OTC	IODOFORM	NC	RX/OTC
DHEA MICRONIZED	NC		KETOCONAZOLE	NC	
DHEA POWD	NC	RX/OTC	KOJIC ACID	NC	RX/OTC
			L-ASPARTIC ACID	NC	RX/OTC
			LEAD ACETATE TRIHYDRATE POWD	NC	
			LICORICE ROOT POWD	NC	
			L-MENTHOL	NC	RX/OTC
			MANNITOL	NC	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MELATONIN	NC	RX/OTC	PRASTERONE MICRONIZED	NC	
MENADIONE SODIUM BISULFITE CRYSTALS	NC		PREGNENOLONE	NC	
MENTHOL	NC	RX/OTC	PREGNENOLONE MICRONIZED	NC	
METHENAMINE MANDELATE	NC		PROSTAGLANDIN E1	NC	
METHENAMINE POWDER	NC		PUMICE (FLOUR)	NC	
METHYLENE BLUE	NC		PYROGALLOL	NC	
MINOXIDIL	NC		PYRUVIC ACID LIQUID	NC	RX/OTC
OXYBENZONE	NC		PYRUVIC ACID POWDER	NC	
PHENYLMERCURIC ACETATE	NC		QC BORIC ACID POWDER	NC	RX/OTC
PHENYLMERCURIC NITRATE	NC		QUINIDINE SULFATE DIHYDRATE CRYSTALS	NC	
PILOCARPINE HCL POWDER	NC		RESORCINOL CRYSTALS	NC	RX/OTC
PILOCARPINE NITRATE CRYSTALS	NC		RESORCINOL POWDER	NC	RX/OTC
PILOCARPINE NITRATE POWDER	NC		ROSIN MISC	NC	
POTASH SULFURATED LUMP MISC	NC		ROSIN POWDER	NC	
POTASSIUM ALUM POWDER	NC	RX/OTC	SILICA GEL	NC	RX/OTC
POTASSIUM BITARTRATE (BULK)	NC	RX/OTC	SILICON DIOXIDE (SYLOID 244FP) POWDER	NC	
POTASSIUM BROMIDE CRYSTALS	NC	RX/OTC	SILICON DIOXIDE POWDER	NC	
POTASSIUM BROMIDE GRANULES	NC		SM BORIC ACID POWDER	NC	RX/OTC
POTASSIUM BROMIDE POWDER	NC		SODIUM BICARBONATE-NACL	NC	
POTASSIUM GLUCONATE ANHYDROUS	NC	RX/OTC	SODIUM BROMIDE	NC	RX/OTC
POTASSIUM NITRATE GRANULES	NC		SODIUM BUTYRATE	NC	RX/OTC
POTASSIUM NITRATE POWDER	NC		SODIUM CACODYLATE	NC	
POTASSIUM PERCHLORATE	NC		SODIUM NITRITE	NC	RX/OTC
			SODIUM PERBORATE CRYSTALS	NC	
			SODIUM PERBORATE GRANULES	NC	
			SODIUM PERBORATE POWDER	NC	RX/OTC
			SODIUM SULFATE POWDER	NC	
			SODIUM SULFITE	NC	RX/OTC
			SORBITOL	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
STANNOUS FLUORIDE POWD	NC		GENERESS FE (norethindrone & ethinyl estradiol-fe)	NC	
STARCH	NC	RX/OTC	levonorgestrel & eth estradiol TABS	C	
STARCH RICE	NC	RX/OTC	levonorgestrel-eth estradiol (triphasic)	C	
STRONTIUM NITRATE	NC		levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG	C	
SUCROSE CRYSTALS	NC		levonorgestrel-ethinyl estradiol (91-day)	NC	
SUCROSE POWD	NC		levonorgestrel-ethinyl estradiol (continuous)	NC	
SULFANILAMIDE	NC		levonorgestrel-ethinyl estradiol-iron	NC	
TALC	NC	RX/OTC	LO LOESTRIN FE TABS	NC	
THEOPHYLLINE	NC	RX/OTC	LOSEASONIQUE (levonorgestrel-ethinyl estradiol (91-day))	NC	
THEOPHYLLINE ANHYDROUS	NC	RX/OTC	MINASTRIN 24 FE CHEW (norethin acet & estrad-fe)	NC	
THYMOL	NC	RX/OTC	MIRCETTE (desogestrel-ethinyl estradiol (biphasic))	NC	
THYMOL IODIDE	NC		NATAZIA	NC	
THYMOL IODIDE PURIFIED	NC		NEXTSTELLIS	NC	
TINIDAZOLE	NC		norethin acet & estrad-fe CAPS	NC	
UBIDECARENONE	NC	RX/OTC	norethin acet & estrad-fe CHEW	NC	
WAXY MAIZE STARCH N-200	NC	RX/OTC	norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG	C	
CONTRACEPTIVES - Drugs to Prevent Pregnancy			norethindrone & eth estradiol	C	
Combination Contraceptives - Oral			norethindrone & ethinyl estradiol-fe	C	
desogestrel & ethinyl estradiol	C		norethindrone acet & eth estra TABS	C	
desogestrel-ethinyl estradiol (biphasic)	C		norethindrone acetate-ethinyl estradiol-fe	C	
desogestrel-ethinyl estradiol (triphasic)	C				
drospirenone-ethinyl estradiol 0.03 MG-3 MG	C				
drospirenone-ethinyl estradiol 0.02 MG-3 MG	C	QL(1 EA daily)			
drospirenone-ethinyl estradiol-levomefolate calcium	NC				
ethynodiol diacet & eth estrad 50 MCG-1 MG	C	QL(1 EA daily)			
ethynodiol diacet & eth estrad 35 MCG-1 MG	C				
FEMLYV TBP	NC				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>norethindrone-eth estradiol (triphasic)</i>	C		PLAN B ONE-STEP (<i>levonorgestrel (emergency oc)</i>)	NC	QL(1 EA per 21 day(s) retail); 4 max fill(s) per 365 day(s) retail
<i>norgestimate-ethinyl estradiol</i>	C		Progestin Contraceptives - Injectable		
<i>norgestimate-ethinyl estradiol (triphasic)</i>	C		DEPO-PROVERA SUSP IM (<i>medroxyprogesterone acetate (contraceptive)</i>)	NC	QL(1 ML per fill retail)
<i>norgestrel & ethinyl estradiol 30 MCG-0.3 MG</i>	C	QL(2 EA daily)	DEPO-PROVERA SUSY IM (<i>medroxyprogesterone acetate (contraceptive)</i>)	NC	QL(1 ML per fill retail)
QUARTETTE (<i>levonorgestrel-ethinyl estradiol (91-day)</i>)	NC		DEPO-SUBQ PROVERA 104 SUSY SC	C	QL(1 ML per fill retail)
SEASONIQUE (<i>levonorgestrel-ethinyl estradiol (91-day)</i>)	NC		<i>medroxyprogesterone acetate (contraceptive) SUSP IM</i>	C	QL(1 ML per fill retail)
TYBLUME CHEW	C		<i>medroxyprogesterone acetate (contraceptive) SUSY IM</i>	C	QL(1 ML per fill retail)
YASMIN 28 (<i>drospirenone-ethinyl estradiol</i>)	NC		Progestin Contraceptives - Oral		
YAZ (<i>drospirenone-ethinyl estradiol</i>)	NC	QL(1 EA daily)	<i>norethindrone (contraceptive)</i>	C	
Combination Contraceptives - Transdermal			OPILL	NC	
<i>norelgestromin-ethinyl estradiol</i>	C		SLYND	NC	
TWIRLA	NC		CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions		
Combination Contraceptives - Vaginal			Glucocorticosteroids		
ANNOVERA	NC		ACTIVE INJECTION D KIT	NC	
<i>etonogestrel-ethinyl estradiol</i>	C	QL(6 EA per fill retail)	AGAMREE	NP	SP
NUVARING (<i>etonogestrel-ethinyl estradiol</i>)	NC	QL(6 EA per fill retail)	ALKINDI SPRINKLE CPSP	NP	
Emergency Contraceptives			BETAMETHASONE COMBO SUSP 3 MG/ML-3 MG/ML	NC	
ELLA	C	QL(4 EA per 365 day(s) retail)	BETAMETHASONE SOD PHOS & ACET SUSP 3 MG/ML-3 MG/ML	NC	
<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			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>betamethasone sod phosphate & acetate SUSP</i>	NC		<i>dexamethasone TABS</i>	P	
BETAMETHASONE SODIUM PHOSPHATE POWD	NC		<i>dexamethasone TBPk</i>	NP	
<i>budesonide CPEP</i>	P		<i>dexamethasone TBPk</i>	P	
<i>budesonide TB24</i>	NP		DOUBLEDEX KIT	NC	
CORTEF TABS (<i>hydrocortisone</i>)	NP		EMFLAZA SUSP (<i>deflazacort</i>)	NP	SP
CORTISONE ACETATE POWD	NC		EMFLAZA TABS (<i>deflazacort</i>)	NP	SP
CORTISONE ACETATE TABS	P		EOHILIA SUSP	NP	
<i>deflazacort SUSP</i>	NP	SP	HEMADY TABS	NP	
<i>deflazacort TABS</i>	NP		<i>hydrocortisone sod succinate 100 MG</i>	NC	
<i>deflazacort TABS</i>	NP	SP	<i>hydrocortisone TABS</i>	P	
DEPO-MEDROL SUSP	NC		KENALOG-10 SUSP	NC	
DEXAMETHASONE INTENSOL CONC	NP		KENALOG-80 SUSP	NC	
<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)	MAS CARE-PAK KIT	NC	
<i>dexamethasone sodium phosphate SOLN IJ 10 MG/ML, 100 MG/10ML</i>	NC		MEDROL TABS	NP	
DEXAMETHASONE SODIUM PHOSPHATE SOLN IJ 10 MG/ML	NC		MEDROL TABS (<i>methylprednisolone</i>)	NP	
DEXAMETHASONE SODIUM PHOSPHATE SOLN IJ 4 MG/ML	C	QL(150 ML per 31 day(s) retail)	MEDROL TBPk (<i>methylprednisolone</i>)	NP	
<i>dexamethasone sodium phosphate SOSY IJ 4 MG/ML</i>	C	QL(150 ML per 31 day(s) retail)	METHYLPREDNISOLON E ACETATE POWD	NC	
<i>dexamethasone sodium phosphate SOSY IJ 10 MG/ML</i>	NC		<i>methylprednisolone acetate SUSP</i>	NC	
<i>dexamethasone ELIX</i>	P		METHYLPREDNISOLON E ACETATE SUSP 40 MG/ML, 80 MG/ML	NC	
<i>dexamethasone SOLN</i>	P		<i>methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG</i>	NC	
<i>dexamethasone TABS 1.5 MG, 4 MG</i>	NC		METHYLPREDNISOLON E POWD	NC	
			<i>methylprednisolone TABS</i>	P	
			<i>methylprednisolone TBPk</i>	P	
			PREDNISOLONE ACETATE POWD	NC	
			PREDNISOLONE ANHYDROUS POWD	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PREDNISOLONE SODIUM PHOSPHATE POWD	NC		TRIAMCINOLONE DIACETATE	NC	
<i>prednisolone sodium phosphate SOLN 5 MG/5ML, 15 MG/5ML</i>	NC		UCERIS TB24 (<i>budesonide</i>)	NP	
<i>prednisolone sodium phosphate SOLN 20 MG/5ML</i>	P	QL(150 ML per fill retail)	Mineralocorticoids		
<i>prednisolone sodium phosphate SOLN 5 MG/5ML, 10 MG/5ML, 15 MG/5ML, 25 MG/5ML</i>	P		FLUDROCORTISONE ACETATE POWD	NC	
<i>prednisolone sodium phosphate TBDP 10 MG, 15 MG</i>	NC		<i>fludrocortisone acetate TABS</i>	C	
PREDNISOLONE POWD	NC		COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms		
<i>prednisolone SOLN</i>	P		Antitussives		
<i>prednisolone SOLN</i>	NC		<i>benzonatate 100 MG</i>	C	QL(6 EA daily); AL(At least 10 yrs old)
<i>prednisolone SOLN</i>	NP		<i>benzonatate 150 MG</i>	NC	
<i>prednisolone TABS</i>	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)
PREDNISONE INTENSOL CONC	NP		DELSYM COUGH CHILDRENS SUER (<i>dextromethorphan polistirex</i>)	NC	QL(240 ML per 6 day(s) retail)
PREDNISONE POWD	NC		DELSYM SUER (<i>dextromethorphan polistirex</i>)	NC	QL(240 ML per 6 day(s) retail)
<i>prednisone SOLN</i>	P		DEXTROMETHORPHAN HBR MONOHD CRY	NC	
<i>prednisone TABS</i>	NC		DEXTROMETHORPHAN HBR MONOHD POWD	NC	
<i>prednisone TABS</i>	P		<i>dextromethorphan hbr LIQD 15 MG/5ML, 30 MG/10ML</i>	NC	
<i>prednisone TBP</i>	P		DEXTROMETHORPHAN HBR POWD	NC	
RAYOS TBEC	NP		<i>dextromethorphan polistirex SUER</i>	C	QL(240 ML per 6 day(s) retail)
SOLU-CORTEF	NC		HYCODAN SOLN (<i>hydrocodone bitartrate-homatropine methylbromide</i>)	NC	AL(At least 18 yrs old)
SOLU-MEDROL	NC				
SOLU-MEDROL (PF)	NC				
TARPEYO CPDR	NP	SP			
TOPIDEX KIT	NC				
<i>triamcinolone acetate SUSP 40 MG/ML</i>	NC				
TRIAMCINOLONE ACETONIDE SUSP 40 MG/ML, 80 MG/ML	NC				
TRIAMCINOLONE DIACET MICRONIZE	NC				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>hydrocodone bitartrate-homatropine methylbromide SOLN</i>	C	AL(At least 18 yrs old)	<i>dextromethorphan-guaifenesin LIQD 100 MG/5ML-10 MG/5ML, 150 MG/7.5ML-15 MG/7.5ML, 200 MG/10ML-20 MG/10ML</i>	C	QL(240 ML per fill retail)
<i>hydrocodone bitartrate-homatropine methylbromide TABS</i>	NC		<i>dextromethorphan-guaifenesin SYRP 100 MG/5ML-10 MG/5ML, 200 MG/10ML-20 MG/10ML</i>	C	QL(240 ML per fill retail)
Cough/Cold/Allergy Combinations			<i>dextromethorphan-guaifenesin TB12 600 MG-30 MG</i>	C	QL(2 EA daily)
ALAHIST D	NC		<i>dextromethorphan-phenylephrine-acetaminophen CAPS</i>	C	
ALAHIST DM LIQD	NC		ED BRON GP LIQD	C	QL(240 ML per 6 day(s) retail)
ALAHIST PE TABS	NC		ENDAL	NC	
<i>brompheniramine & phenyleph ELIX</i>	C	QL(120 ML per fill retail); 1 max fill(s) per 31 day(s) retail	<i>guaifenesin-codeine SOLN</i>	C	
<i>brompheniramine-dextromethorphan LIQD PO</i>	NC		<i>guaifenesin-codeine SYRP</i>	C	
<i>cetirizine-pseudoephedrine</i>	C	QL(2 EA daily)	HISTEX-DM SYRP	NC	
CLARINEX-D 12 HOUR TB12	NP		<i>hydrocodone polistirex-chlorpheniramine polistirex SUER</i>	NC	
CLARITIN-D 12 HOUR TB12 (<i>loratadine & pseudoephedrine</i>)	NC	QL(2 EA daily)	LOHIST-D LIQD	C	
CORICIDIN HBP TABS (<i>dextromethorphan-acetaminophen-chlorpheniramine</i>)	NC		<i>loratadine & pseudoephedrine TB12</i>	C	QL(2 EA daily)
COUGH & CHEST CONGESTION DM SYRP	NC		MAXI-TUSS PE MAX LIQD	C	QL(240 ML per 6 day(s) retail)
DECONEX DMX TABS 10 MG-400 MG-17.5 MG	NC		MUCINEX D MAX STRENGTH TB12 (<i>pseudoephedrine-guaifenesin</i>)	NC	
<i>dextromethorphan-acetaminophen-chlorpheniramine TABS 325 MG-2 MG-10 MG</i>	NC		MUCINEX DM TB12 (<i>dextromethorphan-guaifenesin</i>)	NC	QL(2 EA daily)
<i>dextromethorphan-guaifenesin LIQD 200 MG/20ML-20 MG/20ML</i>	NC		MUCINEX D TB12 (<i>pseudoephedrine-guaifenesin</i>)	NC	QL(210 EA per fill retail)
<i>dextromethorphan-guaifenesin LIQD 100 MG/5ML-5 MG/5ML, 200 MG/5ML-10 MG/5ML, 400 MG/20ML-20 MG/20ML</i>	C				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MUCINEX FAST-MAX COLD/FLU MS CAPS (phenylephrine-dm-gg w/ apap)	NC		ROBITUSSIN SEVERE MULTI-SYMP 10 MG/20ML-400 MG/20ML-650 MG/20ML-20 MG/20ML	NC	
NINJACOF-D	NC		ROBITUSSIN SEVERE NIGHTTIME LIQD	NC	
phenylephrine-chlorphen-dm LIQD 10 MG/5ML-4 MG/5ML-15 MG/5ML	C	QL(240 ML per fill retail)	THERAFLU FLU RELIEF MAX STR THPK PO	NC	
phenylephrine-dm-gg w/ apap CAPS	NC		THERAFLU SEVERE COLD NIGHTTIME CHEW PO	NC	
phenylephrine-doxylamine-dextromethorphan-acetaminophen CAPS	NC		TRIPONEL LIQD	NC	
POLY HIST FORTE 10 MG-10.5 MG	NC		TRIPONEL SYRP	NC	
POLYTUSSIN DM LIQD	NC		TUSNEL PEDIATRIC LIQD 1.25 MG/ML-25 MG/ML, 50 MG/5ML-5 MG/5ML-15 MG/5ML	NC	
promethazine & phenylephrine SYRP	C	QL(240 ML per 6 day(s) retail); AL(At least 2 yrs old)	TUSNEL-DM PEDIATRIC LIQD 1.25 MG/ML-25 MG/ML-2.5 MG/ML	NC	
promethazine w/codeine SOLN	C	QL(240 ML per fill retail); AL(At least 18 yrs old)	TUXARIN ER TB12	NC	
promethazine w/codeine SYRP	C	QL(240 ML per fill retail); AL(At least 18 yrs old)	VANACOF 2	NC	
promethazine-dm SYRP	C	QL(240 ML per fill retail); AL(At least 2 yrs old)	VANACOF CP LIQD	NC	
promethazine-phenylephrine-codeine	C	QL(240 ML per fill retail); AL(At least 18 yrs old)	VANACOF DMX LIQD	NC	
pseudoephed-bromphen-dm SYRP 10 MG/5ML-30 MG/5ML-2 MG/5ML	C	QL(240 ML per fill retail)	VANACOF XP LIQD	NC	
pseudoephedrine-guaifenesin TB12 1200 MG-120 MG	C		ZYRTEC-D ALLERGY & CONGESTION (cetirizine-pseudoephedrine)	NC	QL(2 EA daily)
pseudoephedrine-guaifenesin TB12 600 MG-60 MG	C	QL(210 EA per fill retail)	ZYRTEC-D ALLERGY & SINUS (cetirizine-pseudoephedrine)	NC	QL(2 EA daily)
			Expectorants		
			BROMHEXINE HCL	NC	
			GUAIFENESIN POWD	NC	
			guaifenesin TB12 600 MG	C	QL(40 EA per fill retail); 1 max fill(s) per 31 day(s) retail
			guaifenesin TB12 1200 MG	C	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MUCINEX MAXIMUM STRENGTH TB12 (<i>guaifenesin</i>)	NC		<i>adapalene GEL 0.3 %</i>	P	
MUCINEX TB12 (<i>guaifenesin</i>)	NC	QL(40 EA per fill retail); 1 max fill(s) per 31 day(s) retail	AKLIEF	NP	
<i>potassium iodide (expectorant) SOLN</i>	C		ALTRENO LOTN	NP	
SSKI SOLN (<i>potassium iodide (expectorant)</i>)	NC		ARAZLO LOTN	NP	
TERPIN HYDRATE	NC		ATRALIN GEL (<i>tretinoin</i>)	NP	Brand Preferred
TERPIN HYDRATE MONOHYDRATE	NC		AVAR LS CLEANSER LIQD (<i>sulfacetamide sodium w/ sulfur</i>)	NP	
Misc. Respiratory Inhalants			AVAR-E LS CREA (<i>sulfacetamide sodium w/ sulfur</i>)	NP	
<i>sodium chloride (inhalant) NEBU 0.9 %, 10 %</i>	C		BENZAMYCIN GEL (<i>benzoyl peroxide-erythromycin</i>)	NP	
Mucolytics			BENZOYL PEROXIDE HYDROUS POWD	NC	
ACETYLCYSTEINE POWD	NC		<i>benzoyl peroxide-erythromycin GEL</i>	NP	
<i>acetylcysteine SOLN</i>	C		<i>benzoyl peroxide-erythromycin GEL</i>	NC	
N-ACETYL-L-CYSTEINE POWD	NC		<i>benzoyl peroxide GEL 2.5 %, 5 %, 10 %</i>	C	
DERMATOLOGICALS - Drugs to Treat Skin Conditions			<i>benzoyl peroxide LIQD 5 %, 10 %</i>	P	
Acne Products			<i>benzoyl peroxide LOTN 5 %, 10 %</i>	C	
ABSORICA 10 MG, 20 MG, 30 MG, 40 MG (<i>isotretinoin</i>)	NC	QL(2 EA daily); AL(At least 12 yrs old); PA	BENZOYL PEROXIDE POWD	NC	
ABSORICA LD	NC		CABTREO	NP	
ACANYA GEL (<i>clindamycin phosphate-benzoyl peroxide</i>)	NP		CLEOCIN-T LOTN (<i>clindamycin phosphate (topical)</i>)	NP	
<i>adapalene-benzoyl peroxide GEL 2.5 %-0.1 %</i>	NC		CLINDACIN ETZ	NC	
<i>adapalene-benzoyl peroxide GEL</i>	NP		CLINDACIN PAC	NC	
<i>adapalene CREA</i>	NP		CLINDAGEL GEL (<i>clindamycin phosphate (topical)</i>)	NP	QL(60 ML per fill retail; 60 per fill mail)
<i>adapalene GEL 0.3 %</i>	NP		<i>clindamycin phosphate (topical) FOAM</i>	NP	
			<i>clindamycin phosphate (topical) GEL</i>	NP	QL(60 ML per fill retail; 60 per fill mail)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>clindamycin phosphate (topical) LOTN</i>	NP		<i>isotretinoin 10 MG, 20 MG, 30 MG, 40 MG</i>	C	QL(2 EA daily); AL(At least 12 yrs old); PA
<i>clindamycin phosphate (topical) SOLN</i>	P		KLARON (<i>sulfacetamide sodium (acne)</i>)	NP	QL(118 ML per fill retail)
<i>clindamycin phosphate (topical) SWAB</i>	NP		ONEXTON GEL (<i>clindamycin phosphate-benzoyl peroxide</i>)	NP	
<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	P		RETIN-A MICRO (<i>tretinoin microsphere</i>)	NP	Brand Preferred
<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	NP		RETIN-A MICRO PUMP	NP	Brand Preferred
<i>clindamycin phosphate-benzoyl peroxide GEL</i>	NP		RETIN-A MICRO PUMP (<i>tretinoin microsphere</i>)	NP	Brand Preferred
<i>clindamycin phosphate-tretinoin</i>	NP		RETIN-A CREA (<i>tretinoin</i>)	P	Brand Preferred; QL(20 GM per fill retail); AL(Up to 35 yrs old)
<i>dapsone (topical)</i>	NP		RETIN-A GEL 0.01 % (<i>tretinoin</i>)	P	Brand Preferred; QL(45 GM per fill retail); AL(Up to 35 yrs old)
DIFFERIN CREA (<i>adapalene</i>)	NP		RETIN-A GEL 0.025 % (<i>tretinoin</i>)	P	Brand Preferred; AL(Up to 35 yrs old)
DIFFERIN GEL (<i>adapalene</i>)	NP	RX/OTC	RETINOIC ACID POWD	NC	
DIFFERIN LOTN	NP		<i>sulfacetamide sodium (acne)</i>	NP	QL(118 ML per fill retail)
EPIDUO FORTE GEL (<i>adapalene-benzoyl peroxide</i>)	NC		<i>sulfacetamide sodium w/ sulfur CREA 10 %-2 %, 10 %-5 %</i>	NP	
EPIDUO FORTE GEL (<i>adapalene-benzoyl peroxide</i>)	NP		<i>sulfacetamide sodium w/ sulfur EMUL 10 %-1 %</i>	NP	
EPSOLAY CREA	NP		<i>sulfacetamide sodium w/ sulfur FOAM</i>	NP	
ERYGEL GEL (<i>erythromycin (acne aid)</i>)	NP	1 package(s) per fill retail	<i>sulfacetamide sodium w/ sulfur LIQD</i>	NP	
<i>erythromycin (acne aid) GEL</i>	NP	1 package(s) per fill retail	<i>sulfacetamide sodium w/ sulfur LOTN 9.8 %-4.8 %</i>	NP	
<i>erythromycin (acne aid) PADS</i>	P				
<i>erythromycin (acne aid) SOLN</i>	P				
<i>erythromycin (acne aid) SOLN</i>	NC				
FABIOR FOAM	NP				
<i>isotretinoin 25 MG, 35 MG</i>	NC				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>sulfacetamide sodium w/ sulfur LOTN 10 %-5 %</i>	NP	1 package(s) per 31 day(s) retail	TRETINOIN POWD	NC	
<i>sulfacetamide sodium w/ sulfur PADS 10 %-4 %</i>	NP		TWYNEO	NP	
<i>sulfacetamide sodium w/ sulfur PADS 10 %-4 %</i>	NC		WINLEVI	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	ZIANA (<i>clindamycin phosphate-tretinoin</i>)	NP	
<i>sulfacetamide sodium w/ sulfur SUSP 8 %-4 %</i>	NP		ZMA CLEAR SUSP	NP	
<i>sulfacetamide sodium-sulfur in urea vehicle EMUL 10 %-10 %-4 %</i>	NP		Agents for External Genital and Perianal Warts		
SULFACETAMIDE SODIUM-SULFUR SUSP	NP		VEREGEN	NP	
SUMADAN	NP		Antibiotics - Topical		
SUMADAN WASH LIQD (<i>sulfacetamide sodium w/ sulfur</i>)	NP		<i>bacitracin (topical) OINT</i>	C	1 package(s) per fill retail
SUMADAN XLT KIT	NP		<i>bacitracin zinc OINT</i>	C	1 package(s) per fill retail
SUMAXIN CP	NP		BACITRACIN ZINC POWD	NC	
SUMAXIN PADS	NP		<i>bacitracin-polymyxin b OINT</i>	NC	
TAZAROTENE FOAM	NP		BACITRACIN POWD	NC	
<i>tretinoin microsphere</i>	NP	Brand Preferred	CENTANY AT KIT	NP	
<i>tretinoin CREA 0.025 %, 0.05 %, 0.1 %</i>	NP	Brand Preferred; QL(20 GM per fill retail); AL(Up to 35 yrs old)	<i>gentamicin sulfate (topical) CREA</i>	C	QL(1 GM daily; 30 GM per fill retail)
<i>tretinoin GEL 0.05 %</i>	NP	Brand Preferred	<i>gentamicin sulfate (topical) OINT</i>	P	QL(1 GM daily; 30 GM per fill retail)
<i>tretinoin GEL 0.025 %</i>	NP	Brand Preferred; AL(Up to 35 yrs old)	GENTAMICIN SULFATE POWD	NC	
<i>tretinoin GEL 0.01 %</i>	NP	Brand Preferred; QL(45 GM per fill retail); AL(Up to 35 yrs old)	<i>mupirocin calcium (topical)</i>	NP	1 package(s) per 31 day(s) retail
			<i>mupirocin OINT</i>	NC	QL(30 GM per 31 day(s) retail)
			<i>mupirocin OINT</i>	P	QL(30 GM per 31 day(s) retail)
			NEOMYCIN SULFATE	NC	
			<i>neomycin-bacitracin-polymyxin OINT</i>	C	QL(60 GM per 31 day(s) retail)
			<i>neomycin-polymyxin w/ pramoxine</i>	C	1 package(s) per fill retail
			NEOSPORIN ORIGINAL OINT (<i>neomycin-bacitracin-polymyxin</i>)	NC	QL(60 EA per 31 day(s) retail)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
NEOSPORIN PLUS PAIN RELIEF MS (<i>neomycin-polymyxin w/ pramoxine</i>)	NC	1 package(s) per fill retail	CLOTRIMAZOLE CRYSTALS	NC	
NEO-SYNALAR	NC		CLOTRIMAZOLE POWDER	NC	
NEO-SYNALAR	NC		<i>econazole nitrate CREAM</i>	P	QL(30 GM per fill retail)
TETRACYCLINE HCL	NC		ERTACZO	NP	
XEPI	NP		GENTIAN VIOLET POWDER	NC	
Antifungals - Topical			<i>iodoquinol-hcl</i>	NC	
BENZOIC ACID CRYSTALS	NC	RX/OTC	JUBLIA	NP	
BENZOIC ACID POWDER	NC		<i>ketoconazole (topical) CREAM</i>	P	1 package(s) per 31 day(s) retail
<i>ciclopirox olamine CREAM</i>	P		<i>ketoconazole (topical) FOAM</i>	NP	
CICLOPIROX OLAMINE POWDER	NC		<i>ketoconazole (topical) SHAM 2 %</i>	P	QL(120 ML per fill retail)
<i>ciclopirox olamine SUSPENSION</i>	P		KETODAN	NP	
<i>ciclopirox GEL</i>	NP		LAMISIL AT ATHLETES FOOT CREAM (<i>terbinafine hcl (topical)</i>)	NC	
<i>ciclopirox KIT</i>	NP		LAMISIL AT JOCK ITCH CREAM (<i>terbinafine hcl (topical)</i>)	NC	
<i>ciclopirox SHAM</i>	NP		LAMISIL AT CREAM (<i>terbinafine hcl (topical)</i>)	NC	
<i>ciclopirox SOLN</i>	P		LOPROX	NP	
<i>ciclopirox SOLN</i>	NP		LOPROX SUSPENSION (<i>ciclopirox olamine</i>)	NP	
CLIOQUINOL POWDER	NC	RX/OTC	<i>luliconazole</i>	NP	
<i>clotrimazole (topical) CREAM</i>	NC	QL(60 GM per 31 day(s) retail; 60 GM per 31 days mail); RX/OTC	LUZU (<i>luliconazole</i>)	NP	
<i>clotrimazole (topical) CREAM</i>	P	QL(60 GM per 31 day(s) retail; 60 GM per 31 days mail); RX/OTC	MICATIN CREAM (<i>miconazole nitrate (topical)</i>)	NC	QL(200 GM per 31 day(s) retail)
<i>clotrimazole (topical) SOLN</i>	NC	1 package(s) per fill retail; RX/OTC	<i>miconazole nitrate (topical) CREAM</i>	C	QL(200 GM per 31 day(s) retail)
<i>clotrimazole (topical) SOLN</i>	P	1 package(s) per fill retail; RX/OTC	MICONAZOLE NITRATE POWDER XX	NC	
<i>clotrimazole w/ betamethasone CREAM</i>	P	QL(45 GM per 31 day(s) retail)	<i>miconazole-zinc oxide-white petrolatum</i>	NP	
<i>clotrimazole w/ betamethasone LOTN</i>	NC	QL(31 ML per 31 day(s) retail)	<i>naftifine hcl CREAM</i>	NP	
<i>clotrimazole w/ betamethasone LOTN</i>	P	QL(31 ML per 31 day(s) retail)	<i>naftifine hcl GEL 2 %</i>	NP	
			NAFTIN GEL	NP	

Drug Name	Drug Tier	Requirements/ Limits
NAFTIN GEL (<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	
TINACTIN CREA (<i>tolnaftate</i>)	NC	QL(30 GM per fill retail)
<i>tolnaftate CREA</i>	C	QL(30 GM per fill retail)
TOLNAFTATE POWD XX	NC	
TRIPENICOL C CREA	NC	
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>	NC	QL(6.68 GM daily); RX/OTC
<i>diclofenac sodium (topical) GEL EX</i>	P	QL(6.68 GM daily); RX/OTC
<i>diclofenac sodium (topical) SOLN EX</i>	NP	
<i>diclofenac sodium (topical) SOLN EX 1.5 %</i>	NC	
DICLOGEN	NC	
DICLOTREX	NC	
DICLOTREX II	NC	

Drug Name	Drug Tier	Requirements/ Limits
LIXOFEN KIT	NC	
PENNSAID SOLN EX 2 % (<i>diclofenac sodium (topical)</i>)	NP	
Antineoplastic or Premalignant Lesion Agents - Topical		
AMELUZ GEL	NC	
CARAC CREA	C	
<i>diclofenac sodium (actinic keratoses) EX</i>	NC	
EFUDEX CREA (<i>fluorouracil (topical)</i>)	NC	QL(40 GM per 31 day(s) retail)
<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
CAMPBOR CRYST	NC	RX/OTC
CAMPBOR GRAN	NC	RX/OTC
<i>doxepin hcl (antipruritic)</i>	NC	
SARNA LOTN (<i>camphor & menthol</i>)	NC	1 package(s) per fill retail
Antipsoriatics		
<i>acitretin</i>	NC	
ANTHRALIN POWD	NC	
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	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>calcipotriene SOLN</i>	P	1 package(s) per fill retail; 1 max fill(s) per 31 day(s) retail	<i>tazarotene GEL</i>	NP	1 package(s) per fill retail; AL(Up to 18 yrs old)
<i>calcitriol (topical)</i>	NP		TREMFYA ONE-PRESS SOAJ 100 MG/ML	NP	SP
COSENTYX (300 MG DOSE) SOSY	NP	SP	TREMFYA PEN SOAJ 100 MG/ML	NP	
COSENTYX SENSOREADY (300 MG) SOAJ	NP	SP	USTEKINUMAB-AEKN SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	
COSENTYX SENSOREADY PEN SOAJ	NP	SP	USTEKINUMAB SOSY 45 MG/0.5ML, 90 MG/ML	NP	
COSENTYX UNOREADY SOAJ	NP	SP	USTEKINUMAB-TTWE	NP	
COSENTYX SOSY	NP	SP	VECTICAL (<i>calcitriol (topical)</i>)	NP	
ILUMYA	NC	SP	VTAMA	NP	
<i>methoxsalen rapid</i>	NC		YESINTEK SOLN 45 MG/0.5ML	NP	SP
OTULFI SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	SP	YESINTEK SOSY	NP	SP
PYZCHIVA 45 MG/0.5ML, 90 MG/ML	NP	SP	Antiseborrheic Products		
SELARSDI SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	SP	OVACE PLUS WASH GEL (<i>sulfacetamide sodium</i>)	NP	
SILIQ	NP	SP	OVACE PLUS WASH LIQD (<i>sulfacetamide sodium</i>)	NP	
SKYRIZI PEN SOAJ	NP	SP	OVACE PLUS CREA	NP	
SKYRIZI SOSY	NP	SP	OVACE PLUS LOTN	NP	
SORILUX FOAM	NP		OVACE PLUS SHAM (<i>sulfacetamide sodium</i>)	NP	
SOTYKTU	NP	SP	OVACE WASH LIQD (<i>sulfacetamide sodium</i>)	NP	
SPEVIGO SOSY	NP	SP	<i>selenium sulfide LOTN 1 %</i>	C	1 package(s) per fill retail
STELARA SOSY	NP	SP	<i>selenium sulfide LOTN 2.5 %</i>	C	1 package(s) per fill retail; 1 max fill(s) per 30 day(s) retail
STEQEYMA	NP	SP	<i>selenium sulfide SHAM 1 %</i>	C	1 package(s) per fill retail
TALTZ SOAJ	NP	SP	<i>selenium sulfide SHAM 2.25 %</i>	NC	
TALTZ SOSY	NP	SP			
<i>tazarotene CREA 0.1 %</i>	NP	1 package(s) per fill retail; AL(Up to 18 yrs old)			
<i>tazarotene CREA 0.05 %</i>	NP	AL(Up to 18 yrs old)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SELSUN BLUE CARE MENS MAX STR LOTN (<i>selenium sulfide</i>)	NC	1 package(s) per fill retail	SULFAMYLON CREA	NC	
SELSUN BLUE DAILY LOTN (<i>selenium sulfide</i>)	NC	1 package(s) per fill retail	SULFAMYLON PACK 5 % (<i>mafenide acetate</i>)	NC	
SELSUN BLUE MEDICATED LOTN (<i>selenium sulfide</i>)	NC	1 package(s) per fill retail	Cauterizing Agents		
SELSUN BLUE MOISTURIZING LOTN (<i>selenium sulfide</i>)	NC	1 package(s) per fill retail	CHLOROACETIC ACID POWD	NC	
SELSUN BLUE LOTN (<i>selenium sulfide</i>)	NC	1 package(s) per fill retail	SILVER NITRATE CRYST	NC	RX/OTC
<i>sulfacetamide sodium GEL</i>	NP		<i>silver nitrate SOLN</i>	NC	
<i>sulfacetamide sodium LIQD</i>	NP		SILVER NITRATE SOLN 0.5 %	NC	
SULFACETAMIDE SODIUM POWD	NC		Corticosteroids - Topical		
<i>sulfacetamide sodium SHAM 10 %</i>	NP		<i>alclometasone dipropionate CREA</i>	P	
Antivirals - Topical			<i>alclometasone dipropionate CREA</i>	NC	
<i>acyclovir topical CREA</i>	P	1 package(s) per 31 day(s) retail	<i>alclometasone dipropionate OINT</i>	P	
<i>acyclovir topical OINT</i>	NP	1 package(s) per fill retail	<i>amcinonide CREA</i>	NP	
DENAVIR (<i>penciclovir</i>)	NP		APEXICON E CREA	NP	
<i>penciclovir</i>	NP		<i>betamethasone dipropionate (topical) CREA</i>	P	1 package(s) per 30 day(s) retail
XERESE	NP		<i>betamethasone dipropionate (topical) LOTN</i>	P	
ZOVIRAX CREA (<i>acyclovir topical</i>)	NP	1 package(s) per 31 day(s) retail	<i>betamethasone dipropionate (topical) OINT</i>	NP	
ZOVIRAX OINT (<i>acyclovir topical</i>)	NP	1 package(s) per fill retail	<i>betamethasone dipropionate augmented CREA</i>	P	1 package(s) per fill retail
Burn Products			<i>betamethasone dipropionate augmented GEL 0.05 %</i>	NP	
<i>mafenide acetate PACK</i>	NC		<i>betamethasone dipropionate augmented LOTN</i>	NP	
NITROFURAZONE	NC		<i>betamethasone dipropionate augmented OINT</i>	NP	
RAYASORE KIT	NC		BETAMETHASONE DIPROPIONATE POWD	NC	
SILVADENE (<i>silver sulfadiazine</i>)	NC				
<i>silver sulfadiazine</i>	C				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>betamethasone valerate CREA</i>	P		<i>clobetasol propionate SHAM</i>	NP	
<i>betamethasone valerate FOAM</i>	NP		<i>clobetasol propionate SOLN 0.05 %</i>	P	1 package(s) per fill retail
<i>betamethasone valerate LOTN</i>	P		CLOBEX SPRAY LIQD (<i>clobetasol propionate</i>)	NP	
<i>betamethasone valerate OINT</i>	NP		CLOBEX SHAM (<i>clobetasol propionate</i>)	NP	
BETAMETHASONE VALERATE POWD	NC		<i>clocortolone pivalate</i>	NP	
BRYHALI LOTN	NP		CLODAN	NC	
<i>calcipotriene-betamethasone dipropionate OINT</i>	NP		CLODERM (<i>clocortolone pivalate</i>)	NC	
<i>calcipotriene-betamethasone dipropionate SUSP</i>	NP		DERMA-SMOOTH/FS BODY OIL (<i>fluocinolone acetonide</i>)	NP	
CAPEX SHAM	NP		DERMA-SMOOTH/FS SCALP OIL (<i>fluocinolone acetonide</i>)	NP	
CLOBETASOL 17 PROPIONATE POWD	NC		<i>desonide CREA</i>	P	QL(2 GM daily)
<i>clobetasol propionate emollient base 0.05 %</i>	P	1 package(s) per fill retail	<i>desonide LOTN</i>	P	
<i>clobetasol propionate emollient base 0.05 %</i>	NC	1 package(s) per fill retail	<i>desonide OINT</i>	P	QL(2 GM daily)
<i>clobetasol propionate emulsion</i>	NP		DESONIDE POWD	NC	
<i>clobetasol propionate CREA 0.05 %</i>	P	1 package(s) per fill retail	DESOWEN CREA (<i>desonide</i>)	NC	QL(2 GM daily)
<i>clobetasol propionate CREA 0.025 %</i>	P		<i>desoximetasone CREA</i>	NP	1 package(s) per fill retail
<i>clobetasol propionate FOAM</i>	NP		<i>desoximetasone GEL</i>	NP	
<i>clobetasol propionate GEL 0.05 %</i>	P	1 package(s) per fill retail	<i>desoximetasone LIQD</i>	NP	
<i>clobetasol propionate LIQD</i>	NP		<i>desoximetasone OINT</i>	NC	
<i>clobetasol propionate LOTN</i>	NP		<i>desoximetasone OINT</i>	NP	
<i>clobetasol propionate OINT 0.05 %</i>	P	1 package(s) per fill retail	<i>diflorasone diacetate CREA</i>	NP	
CLOBETASOL PROPIONATE POWD	NC		<i>diflorasone diacetate OINT</i>	NP	
			DIPROLENE OINT (<i>betamethasone dipropionate augmented</i>)	NP	
			DUOBRII	NP	
			ENSTILAR FOAM	NP	
			EPIFOAM FOAM	C	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>fluocinolone acetonide CREA</i>	NP		<i>halobetasol propionate OINT</i>	P	
<i>fluocinolone acetonide OIL</i>	P		HALOG CREA (<i>halcinonide</i>)	NP	
<i>fluocinolone acetonide OINT</i>	NP		HALOG OINT	NP	
FLUOCINOLONE ACETONIDE POWD	NC		HYDROCORT LOTION COMPLETE KIT THPK	NC	
<i>fluocinolone acetonide SOLN</i>	NP		<i>hydrocortisone (topical) CREA 0.5 %</i>	C	1 package(s) per fill retail
<i>fluocinonide emulsified base</i>	P	1 package(s) per fill retail	<i>hydrocortisone (topical) CREA 1 %</i>	P	1 package(s) per fill retail; RX/OTC
<i>fluocinonide CREA 0.05 %</i>	P	1 package(s) per fill retail	<i>hydrocortisone (topical) CREA 2.5 %</i>	P	QL(120 GM per 31 day(s) retail)
<i>fluocinonide CREA 0.1 %</i>	P		<i>hydrocortisone (topical) CREA 1 %</i>	NC	1 package(s) per fill retail; RX/OTC
<i>fluocinonide GEL</i>	P	1 package(s) per fill retail	<i>hydrocortisone (topical) LOTN 2.5 %</i>	P	1 package(s) per fill retail
<i>fluocinonide OINT</i>	NP	1 package(s) per fill retail	<i>hydrocortisone (topical) OINT 1 %</i>	P	QL(2 GM daily); 1 package(s) per 31 day(s) retail; RX/OTC
FLUOCINONIDE POWD	NC		<i>hydrocortisone (topical) OINT 2.5 %</i>	P	
<i>fluocinonide SOLN</i>	P	1 package(s) per fill retail	<i>hydrocortisone (topical) OINT 1 %</i>	NC	QL(2 GM daily); 1 package(s) per 31 day(s) retail; RX/OTC
<i>fluocinonide SOLN</i>	NC	1 package(s) per fill retail	<i>hydrocortisone (topical) SOLN 2.5 %</i>	NP	
<i>flurandrenolide LOTN</i>	NP		<i>hydrocortisone (topical) SOLN 2.5 %</i>	NC	
<i>fluticasone propionate CREA 0.05 %</i>	NP	1 package(s) per 31 day(s) retail	<i>hydrocortisone acetate (topical) OINT</i>	NC	
<i>fluticasone propionate CREA 0.05 %</i>	NC	1 package(s) per 31 day(s) retail	<i>hydrocortisone butyrate hydrophilic lipo base</i>	NC	
<i>fluticasone propionate LOTN</i>	NP		<i>hydrocortisone butyrate CREA</i>	NP	
<i>fluticasone propionate OINT</i>	NP	1 package(s) per fill retail	<i>hydrocortisone butyrate LOTN</i>	NP	
<i>halcinonide CREA</i>	NP		<i>hydrocortisone butyrate LOTN</i>	NC	
<i>halcinonide SOLN 0.1 %</i>	NP				
<i>halobetasol propionate CREA</i>	NC				
<i>halobetasol propionate CREA</i>	P				
<i>halobetasol propionate FOAM</i>	NP				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>hydrocortisone butyrate OINT</i>	P		TACLONEX SUSP (<i>calcipotriene-betamethasone dipropionate</i>)	NP	
<i>hydrocortisone butyrate SOLN</i>	P		TOPICORT SPRAY LIQD (<i>desoximetasone</i>)	NP	
HYDROCORTISONE COMPLETE KIT THPK	NC		TOPICORT CREA (<i>desoximetasone</i>)	NP	1 package(s) per fill retail
<i>hydrocortisone valerate CREA</i>	P		TOPICORT GEL (<i>desoximetasone</i>)	NP	
<i>hydrocortisone valerate OINT</i>	NP		TOPICORT OINT (<i>desoximetasone</i>)	NP	
<i>hydrocortisone valerate OINT</i>	NC		TOVET	NC	
HYDROXYM GEL	NP		<i>triamcinolone acetonide (topical)</i> AERS	NP	
IMPEKLO LOTN	NC		<i>triamcinolone acetonide (topical)</i> CREA 0.1 %	P	
KENALOG AERS (<i>triamcinolone acetonide (topical)</i>)	NP		<i>triamcinolone acetonide (topical)</i> CREA 0.025 %	P	QL(30 GM per fill retail)
LOCOID LIPOCREAM	NP		<i>triamcinolone acetonide (topical)</i> CREA 0.5 %	P	1 package(s) per fill retail
LOCOID LOTN (<i>hydrocortisone butyrate</i>)	NP		<i>triamcinolone acetonide (topical)</i> LOTN	P	1 package(s) per fill retail
<i>mometasone furoate CREA</i>	P	1 package(s) per fill retail	<i>triamcinolone acetonide (topical)</i> LOTN	NC	1 package(s) per fill retail
<i>mometasone furoate OINT</i>	P	1 package(s) per fill retail	<i>triamcinolone acetonide (topical)</i> OINT 0.05 %, 0.1 %	P	
<i>mometasone furoate SOLN</i>	NC	1 package(s) per fill retail	<i>triamcinolone acetonide (topical)</i> OINT 0.025 %, 0.5 %	P	1 package(s) per fill retail
<i>mometasone furoate SOLN</i>	P	1 package(s) per fill retail	<i>triamcinolone acetonide (topical)</i> OINT 0.05 %	NC	
PANDEL	NP		TRIAMCINOLONE ACETONIDE POWD	NC	
SYNALAR (CREAM)	NC		ULTRAVATE LOTN	NP	
SYNALAR (OINTMENT)	NC		VANOS CREA (<i>fluocinonide</i>)	NP	
SYNALAR TS	NC		Eczema Agents		
SYNALAR CREA (<i>fluocinolone acetonide</i>)	NP		ADBRY SOAJ	PA	SP; PA
SYNALAR OINT (<i>fluocinolone acetonide</i>)	NP		ADBRY SOSY	PA	SP; PA
SYNALAR SOLN (<i>fluocinolone acetonide</i>)	NP		CIBINQO	NP	SP
TACLONEX OINT (<i>calcipotriene-betamethasone dipropionate</i>)	NC				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SALICATE LIQD	NC		GNP CALAMINE PLUS AERO	NC	
<i>salicylic acid FOAM</i>	NC		LIDAFLEX PTCH	NC	
<i>salicylic acid GEL 6 %</i>	C		<i>lidocaine hcl CREA 3 %, 4 %</i>	C	1 package(s) per fill retail
<i>salicylic acid LIQD 2 %, 17 %, 27.5 %</i>	NC		<i>lidocaine hcl GEL 2 %, 2.8 %</i>	NC	RX/OTC
SALICYLIC ACID OINT	NP	RX/OTC	<i>lidocaine hcl GEL 2 %</i>	C	
SALIMEZ CREA	NC		<i>lidocaine hcl PRSY</i>	NC	
SALYCIM CREA	NC		<i>lidocaine hcl SOLN</i>	NC	
YCANTH SOLN	NC		<i>lidocaine CREA 4 %</i>	C	1 package(s) per fill retail
Liniments			<i>lidocaine OINT 5 %</i>	NC	
<i>camphor-menthol-methyl salicylate GEL</i>	NC		<i>lidocaine-prilocaine CREA</i>	C	1 package(s) per fill retail
<i>camphor-menthol-methyl salicylate PTCH EX 3.1 %-10 %-6 %</i>	NC		<i>lidocaine-prilocaine KIT</i>	NC	
<i>menthol-methyl salicylate (liniments) PTCH</i>	NC		<i>lidocaine PTCH 4 %, 5 %</i>	NC	
MENTICAM CREA	NC		LIDOPURE PATCH	NC	
METHYLTEN CREA	NC		LIDOTRAL CREA	NC	
WINTERGREEN OIL OIL XX	NC		LIDOTRAN CREA	NC	
Local Anesthetics - Topical			LMX 4 CREA (<i>lidocaine</i>)	NC	1 package(s) per fill retail
BRUSELIX CREA	NC		PLIAGLIS CREA	NC	
BURN RELIEF GEL	NC		PRAMOXINE HCL POWD	NC	
<i>capsaicin CREA 0.025 %, 0.075 %, 0.1 %</i>	C	1 package(s) per fill retail	QUTENZA	NC	
CAPSAICIN CREA	NC		QUTENZA (2 PATCH)	NC	
CAPSAICIN POWD 95 %, 98.3 %	NC	RX/OTC	QUTENZA (4 PATCH)	NC	
<i>capsaicin PTCH</i>	NC		XYLIDERM	NC	
CAPZASIN-HP CREA (<i>capsaicin</i>)	NC	1 package(s) per fill retail	ZTLIDO PTCH	NC	
CIRCATA CREA	NC		Misc. Dermatological Products		
COCAINE HCL POWD	NC		GENADUR KIT CO	NC	
DERMACINRX CIRCATRIX CREA	NC		Misc. Topical		
<i>dibucaine</i>	C	1 package(s) per fill retail	ALUMINUM CHLORIDE ANHYDROUS POWD	NC	RX/OTC
			ALUMINUM CHLORIDE HEXAHYDRATE CRYST	NC	RX/OTC
			ALUMINUM CHLORIDE HEXAHYDRATE POWD	NC	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ALUMINUM CHLORIDE CRYST	NC	RX/OTC	<i>metronidazole (topical) CREA</i>	P	QL(45 GM per 31 day(s) retail)
CALAMINE POWD XX	NC	RX/OTC	<i>metronidazole (topical) GEL 1 %</i>	NP	
COZIMA CREA	NC		<i>metronidazole (topical) GEL 0.75 %</i>	P	QL(45 GM per 31 day(s) retail)
<i>ethyl alcohol (skin cleanser) GEL</i>	NC		<i>metronidazole (topical) GEL 1 %</i>	P	
ICHTHAMMOL POWD	NC		<i>metronidazole (topical) LOTN</i>	P	
QC CALAMINE LOTN	NC		MIRVASO (<i>brimonidine tartrate (topical)</i>)	NP	
SCARTRATE	NC		NORITATE CREA	NP	
TANNIC ACID	NC	RX/OTC	ORACEA (<i>doxycycline (rosacea)</i>)	NP	
XERAC AC	NC		RHOFADE	NP	
<i>zinc oxide (topical) OINT 20 %</i>	C	1 package(s) per fill retail	SOOLANTRA (<i>ivermectin (rosacea)</i>)	NP	
ZINCTRAL PSTE	NC		Scabicides & Pediculicides		
Phosphodiesterase 4 (PDE4) Inhibitors - Topical			<i>crotamiton LOTN</i>	NP	1 package(s) per fill retail
EUCRISA	NP		ELIMITE CREA (<i>permethrin</i>)	NP	QL(60 GM per fill retail)
ZORYVE CREA EX	NP		<i>malathion</i>	NP	QL(59 ML per fill retail); 2 max fill(s) per 31 day(s) retail
ZORYVE FOAM EX	NC		NATROBA (<i>spinosad</i>)	P	Brand Preferred
Pigmenting-Depigmenting Agents			OVIDE (<i>malathion</i>)	NP	QL(59 ML per fill retail); 2 max fill(s) per 31 day(s) retail
HYDROQUINONE POWD	NC		<i>permethrin CREA</i>	P	QL(60 GM per fill retail)
METHOXSALEN POWD	NC		<i>permethrin LIQD EX</i>	P	
Protectives Against UV Radiation			<i>pyrethrins-piperonyl butoxide SHAM 4 %-0.33 %</i>	C	
SCENESSE	NC		<i>spinosad</i>	NP	Brand Preferred
Rosacea Agents			VANALICE GEL	NC	
<i>azelaic acid GEL</i>	P		Tar Products		
<i>brimonidine tartrate (topical)</i>	NP				
<i>doxycycline (rosacea)</i>	NP				
FINACEA FOAM	NP				
FINACEA GEL (<i>azelaic acid</i>)	NC				
<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				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
coal tar extract SHAM 0.5 %	C		THYROGEN 0.9 MG	NC	SP
DHS TAR GEL SHAM (coal tar extract)	NC		Diagnostic Radiopharmaceuticals		
DHS TAR SHAM (coal tar extract)	NC		AMYVID	NC	
Wound Care Products			AXUMIN	NC	
ABRAVO EMUL	NC		CARDIOLITE	NC	
ATOPAVO EMUL	NC		FLYRCADO	NC	
AVO CREAM EMUL	NC		ILLUCCIX CONFIGURATION A KIT	NC	
B & C OINT	NC		ILLUCCIX CONFIGURATION B KIT	NC	
BALSAM PERU-CASTOR OIL OINT	NC		LEU TECHNELITE	NC	
BIAFINE EMUL	NC		LOCAMETZ KIT	NC	
BPCO OINT	NC		NETSPOT	NC	
FILSUVEZ	NC		POSLUMA	NC	
SONAFINE EMUL	NC		PYLARIFY SOSY	NC	
VENELEX OINT	NC		TAUVID	NC	
DIAGNOSTIC PRODUCTS			TECHNELITE	NC	
Diagnostic Biologicals			TECHNETIUM TC 99M SESTAMIBI	NC	
APLISOL	NC		XENON XE 133	NC	
TUBERSOL	NC		Diagnostic Tests		
Diagnostic Drugs			ACCU-CHEK AVIVA PLUS STRP	P	RX/OTC
adenosine (diagnostic)	NC		ACCU-CHEK GUIDE TEST STRP	P	RX/OTC
BLUDIGO IV	NC		ACCU-CHEK SMARTVIEW STRP	P	RX/OTC
dipyridamole (diagnostic)	NC		AGAMATRIX PRESTO TEST STRP	NC	RX/OTC
GLEOLAN	NC		ALBUSTIX STRP	NC	
GLUCAGON HCL (DIAGNOSTIC)	NC		CARESENS N GLUCOSE TEST STRP	NP	RX/OTC
isosulfan blue	NC		CHEMSTRIP K STRP	C	
KINEVAC	NC		CHEMSTRIP MICRAL STRP	NC	
LUMISIGHT	NC		CHOLESTEROL AND LIPID TEST	NC	
MACRILEN	NC		CLINISTIX KIDNEY HEALTH	NC	
METOPIRONE	NC				
regadenoson	NC				
R-GENE 10	NC				
SINCALIDE	NC				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CONTOUR PLUS TEST STRP	NP	RX/OTC	ONETOUCH ULTRA STRP	P	RX/OTC
CVS TRUE METRIX GLUCOSE TEST STRP	NC	RX/OTC	ONETOUCH VERIO STRP	P	RX/OTC
CVS TRUE METRIX GLUCOSE TEST STRP	NP	RX/OTC	PRECISION XTRA BLOOD GLUCOSE STRP	NP	RX/OTC
DX1 ORAGENOMIC DNA SCREEN	NC		PRO DNA COLLECTION	NC	
DX2 ORAGENOMIC DNA SCREEN	NC		PROFESSIONAL DNA COLLECTION	NC	
EASY MAX BLOOD GLUCOSE TEST STRP	NP	RX/OTC	PTS PANELS CHOL+GLU TEST	NC	
EMBRACE WAVE BLOOD GLUCOSE STRP	NP	RX/OTC	PTS PANELS LIPID PANEL+EGLU	NC	
FENTANYL FE	NC		QUICK TOUCH BLOOD GLUCOSE TEST STRP	NC	RX/OTC
FREESTYLE INSULINX TEST STRP	NP	RX/OTC	RELION GLUCOSE TEST STRIPS STRP	NP	RX/OTC
FREESTYLE LITE TEST STRP	NP	RX/OTC	RELION KETONE TEST STRP	C	
FREESTYLE PRECISION NEO TEST STRP	NP	RX/OTC	UDSX MEDICATED SYSTEM	NC	
FREESTYLE TEST STRP	NP	RX/OTC	UDSXMP MEDICATED SYSTEM	NC	
HOME PAP KIT	NC		VIVAGUARD INO TEST STRIPS STRP	NP	RX/OTC
IHEALTH BLOOD GLUCOSE TEST STR STRP	NP	RX/OTC	Miscellaneous Contrast Media		
INFLAMMATION TEST	NC		DEFINITY	NC	
KETONE TEST STRP	C		DEFINITY RT	NC	
KETOSTIX STRP	C		EOVIST	NC	
MEDICATED DNA COLLECTION	NC		GADAVIST SOSY	NC	
MEDICATED DNA COLLECTION 2	NC		<i>gadobutrol SOLN</i>	NC	
MILKSCREEN FOR BREASTFEEDING	NC		<i>gadoterate meglumine SOLN</i>	NC	
MM BLULINK GLUCOSE TEST STRP	NP	RX/OTC	<i>gadoterate meglumine SOSY</i>	NC	
ONETOUCH ULTRA BLUE TEST STRP	P	RX/OTC	OMNISCAN SOLN IV	NC	
ONETOUCH ULTRA TEST STRP	P	RX/OTC	OPTISON	NC	
			Radiographic Contrast Media		
			<i>diatrizoate meglumine & sodium PO</i>	NC	

Drug Name	Drug Tier	Requirements/ Limits
<i>iodixanol</i>	NC	
<i>iopamidol IV</i>	NC	
OMNIPAQUE SOLN IJ 180 MG/ML, 240 MG/ML, 300 MG/ML	NC	
ULTRAVIST 62 %, 77 %	NC	
VISIPAQUE (<i>iodixanol</i>)	NC	
DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS		
Dietary Management Products		
CEREFOLIN	NC	
CEREFOLIN BRAIN WELLNESS	NC	
CEREFOLIN NAC 600 MG-2 MG-6 MG-90.314 MG	NC	
ELFOLATE PLUS TABS	NC	
FOLBIC RF TABS	NC	
FOLTANX RF	NC	
FOLTANX TABS	NC	
FOLTX TABS	NC	
L-METHYLFOLATE CA ME-CBL NAC	NC	
L-METHYLFOLATE-ALGAE-B12-B6	NC	
L-METHYL-MC	NC	
METAFOLBIC	NC	
METAFOLBIC PLUS	NC	
METAFOLBIC PLUS RF	NC	
METANX	NC	
METHYLFOL-ALGAE-B12-ACETYLCYST	NC	
Nutritional Substitutes		
ASPARTAME (FOR COMPOUNDING)	NC	RX/OTC
ASPARTAME (NUTRASWEET)	NC	RX/OTC
SACCHARIN POWD	NC	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes		
Digestive Enzymes		
CREON CPEP	P	Smart PA
CREON CPEP 15000 UNIT-9500 UNIT-3000 UNIT	P	
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	NC	Smart PA
<i>lactase TABS 3000 UNIT, 9000 UNIT</i>	NC	
PEPSIN	NC	
PERTZYE CPEP	NP	
VIOKACE TABS	NP	
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	
Gastric Acidifiers		
L-GLUTAMIC ACID HCL POWD	NC	
DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure		
Carbonic Anhydrase Inhibitors		
<i>acetazolamide sodium</i>	NC	
<i>acetazolamide CP12</i>	C	
<i>acetazolamide TABS</i>	C	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>dichlorphenamide</i>	NC	SP	<i>furosemide TABS</i>	C	
METHAZOLAMIDE POWD	NC		LASIX TABS (<i>furosemide</i>)	NC	
<i>methazolamide TABS</i>	C		SOAANZ TABS 20 MG	C	
Diuretic Combinations			SODIUM EDECRIN (<i>ethacrynate sodium</i>)	NC	
ALDACTAZIDE (<i>spironolactone & hydrochlorothiazide</i>)	NC		<i>torsemide TABS 5 MG, 10 MG, 100 MG</i>	C	QL(1 EA daily)
<i>amiloride & hydrochlorothiazide</i>	C	QL(1 EA daily)	<i>torsemide TABS 20 MG</i>	C	
MAXZIDE-25 TABS (<i>triamterene & hydrochlorothiazide</i>)	NC	QL(2 EA daily)	Osmotic Diuretics		
MAXZIDE TABS (<i>triamterene & hydrochlorothiazide</i>)	NC		<i>mannitol 10 %, 15 %, 20 %, 25 %</i>	NC	
<i>spironolactone & hydrochlorothiazide</i>	C		Potassium Sparing Diuretics		
<i>triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG</i>	C		ALDACTONE TABS (<i>spironolactone</i>)	NC	
<i>triamterene & hydrochlorothiazide TABS 50 MG-75 MG</i>	C		AMILORIDE HCL POWD	NC	
<i>triamterene & hydrochlorothiazide TABS 25 MG-37.5 MG</i>	C	QL(2 EA daily)	<i>amiloride hcl TABS</i>	C	QL(4 EA daily)
Loop Diuretics			SPIRONOLACTONE POWD	NC	
<i>bumetanide SOLN 0.25 MG/ML</i>	NC		<i>spironolactone SUSP</i>	NC	
<i>bumetanide TABS</i>	C		<i>spironolactone TABS</i>	C	
BUMEX TABS 0.5 MG (<i>bumetanide</i>)	NC		<i>triamterene CAPS</i>	NC	
<i>ethacrynate sodium</i>	NC		TRIAMTERENE POWD	NC	
<i>ethacrynic acid</i>	NC		Thiazides and Thiazide-Like Diuretics		
FUROSEMIDE POWD	NC		<i>chlorothiazide sodium</i>	NC	
<i>furosemide SOLN IJ 10 MG/ML</i>	NC		<i>chlorthalidone 25 MG, 50 MG</i>	C	
<i>furosemide SOLN PO 8 MG/ML, 10 MG/ML</i>	C		DIURIL SUSP	NC	
FUROSEMIDE SOLN IJ	NC		HEMICLOR 12.5 MG	NC	
			<i>hydrochlorothiazide CAPS</i>	C	
			HYDROCHLOROTHIAZIDE POWD	NC	
			<i>hydrochlorothiazide TABS 12.5 MG</i>	NC	
			<i>hydrochlorothiazide TABS 25 MG, 50 MG</i>	C	
			<i>indapamide TABS 1.25 MG, 2.5 MG</i>	C	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
INZIRQO SUSR PO 10 MG/ML	NC		<i>risedronate sodium TABS 35 MG</i>	NP	QL(4 EA per 28 day(s) retail)
<i>metolazone</i>	C		<i>risedronate sodium TABS 150 MG</i>	NP	
THALITONE	NC		<i>risedronate sodium TBEC</i>	NP	QL(4 EA per 28 day(s) retail)
ENDOCRINE AND METABOLIC AGENTS - MISC.			<i>teriparatide SOPN</i>	P	SP
- Drugs to Treat Bone Disease and Regulate Hormones			TERIPARATIDE SOPN	P	SP
Bone Density Regulators			TYMLOS	NP	SP
ACTONEL TABS 150 MG (<i>risedronate sodium</i>)	NP		Corticotropin		
ACTONEL TABS 35 MG (<i>risedronate sodium</i>)	NP	QL(4 EA per 28 day(s) retail)	ACTHAR GEL PEN SC 40 UNIT/0.5ML, 80 UNIT/ML	NC	SP
<i>alendronate sodium SOLN</i>	NP	QL(10.8 ML daily)	Fertility Regulators		
<i>alendronate sodium TABS 10 MG</i>	P	QL(1 EA daily)	CLOMIPHENE CITRATE POWD	NC	
<i>alendronate sodium TABS 35 MG, 70 MG</i>	P	QL(0.15 EA daily)	GnRH/LHRH Antagonists		
ATELVIA TBEC (<i>risedronate sodium</i>)	NP	QL(4 EA per 28 day(s) retail)	ORILISSA	NC	SP
BINOSTO TBEF	NP		Growth Hormone Releasing Hormones (GHRH)		
<i>calcitonin (salmon) NA</i>	P	1 package(s) per fill retail	EGRIFTA SV	NC	SP
<i>calcitonin (salmon) IJ</i>	C	QL(2 ML per fill retail)	Growth Hormones		
FORTEO SOPN (<i>teriparatide</i>)	NP	SP	GENOTROPIN MINIQUICK PRSY	PA	SP; PA
FOSAMAX PLUS D	NP		GENOTROPIN CART SC	PA	SP; PA
FOSAMAX TABS 70 MG (<i>alendronate sodium</i>)	NP	QL(0.15 EA daily)	HUMATROPE CART IJ	NP	SP
<i>ibandronate sodium TABS</i>	NC		NGENLA	NP	SP
<i>ibandronate sodium TABS</i>	P		NORDITROPIN FLEXPPO SOPN	PA	SP; PA
JUBBONTI SOSY SC 60 MG/ML	NP		NUTROPIN AQ NUSPIN 10 SOPN	NP	SP
MIACALCIN IJ (<i>calcitonin (salmon)</i>)	NC	QL(2 ML per fill retail)	NUTROPIN AQ NUSPIN 20 SOPN	NP	SP
PROLIA SOSY	NP	SP	NUTROPIN AQ NUSPIN 5 SOPN	NP	SP
<i>risedronate sodium TABS 5 MG, 30 MG</i>	NP	QL(1 EA daily)	OMNITROPE SOCT	NP	SP
			OMNITROPE SOLR SC	NC	SP
			OMNITROPE SOLR SC	NP	SP
			SEROSTIM SC 4 MG, 5 MG, 6 MG	NP	SP

Drug Name	Drug Tier	Requirements/Limits
SKYTROFA	NP	SP
SOGROYA	NP	SP
ZOMACTON SOLR SC	NP	SP
Hormone Receptor Modulators		
EVISTA (<i>raloxifene hcl</i>)	NP	QL(1 EA daily)
OSPHEA	NC	
<i>raloxifene hcl</i>	NP	QL(1 EA daily)
Insulin-Like Growth Factors (Somatomedins)		
INCRELEX	NP	SP
LHRH/GnRH Agonist Analog Pituitary Suppressants		
FENSOLVI (6 MONTH) SC	C	SP; PA
Menopausal Symptoms Suppressants		
VEOZAH	NC	
Metabolic Modifiers		
AMMONUL (<i>sod benzoate & sod phenylacetate</i>)	NC	
BRINEURA	NC	SP
<i>calcitriol CAPS</i>	C	
<i>calcitriol SOLN IV</i>	NC	
<i>carglumic acid</i>	NC	SP
CARNITOR SF SOLN PO (<i>levocarnitine (metabolic modifiers)</i>)	NC	QL(30 ML daily)
CARNITOR SOLN PO 1 GM/10ML (<i>levocarnitine (metabolic modifiers)</i>)	NC	QL(30 ML daily)
CARNITOR TABS (<i>levocarnitine (metabolic modifiers)</i>)	NC	QL(3 EA daily)
<i>doxercalciferol CAPS</i>	NC	
<i>doxercalciferol SOLN</i>	NC	
GALAFOLD	C	QL(0.5 EA daily); SP; PA

Drug Name	Drug Tier	Requirements/Limits
<i>levocarnitine (metabolic modifiers) SOLN IV 200 MG/ML</i>	NC	
<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)
NEXVIAZYME	NC	SP
NULIBRY	NC	SP
<i>paricalcitol CAPS</i>	NC	
PHEBURANE PLLT	NC	
RAYALDEE	NC	
ROCALTROL CAPS (<i>calcitriol</i>)	NC	
<i>sod benzoate & sod phenylacetate</i>	NC	
VYKAT XR TB24 PO 25 MG, 75 MG, 150 MG	NC	SP
XPHOZAH	NP	SP
Mineralocorticoid Receptor Antagonists		
KERENDIA	NC	
Posterior Pituitary Hormones		
DDAVP TABS (<i>desmopressin acetate</i>)	NC	QL(6 EA daily)
<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)
NOCDURNA SUBL	NC	
VASOPRESSIN-SODIUM CHLORIDE SOLN	NC	
<i>vasopressin SOLN IV</i>	NC	
VASOSTRICT SOLN	NC	
Prolactin Inhibitors		
<i>cabergoline</i>	NC	
Somatostatic Agents		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>octreotide acetate KIT</i>	C	SP; PA	CLIMARA PTWK 0.025 MG/24HR, 0.0375 MG/24HR, 0.05 MG/24HR, 0.06 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (<i>estradiol</i>)	NC	Limit 4 patches per month; QL(0.143 EA daily)
<i>octreotide acetate SOSY</i>	NC	SP	DEPO-ESTRADIOL	NC	
SANDOSTATIN LAR DEPOT KIT (<i>octreotide acetate</i>)	NC	SP; PA	ELESTRIN GEL	NC	
Vasopressin Receptor Antagonists			ESTRACE TABS (<i>estradiol</i>)	NC	
VAPRISOL	NC		<i>estradiol valerate</i>	NC	
ESTROGENS - Hormone Replacement/Modifying Drugs			<i>estradiol GEL</i>	NC	
Estrogen Combinations			<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)
ACTIVELLA TABS 1 MG-0.5 MG (<i>estradiol & norethindrone acetate</i>)	NC	QL(1 EA daily)	<i>estradiol PTTW 0.0375 MG/24HR</i>	C	QL(0.286 EA daily)
ANGELIQ	NC		<i>estradiol PTWK</i>	C	Limit 4 patches per month; QL(0.143 EA daily)
BIJUVA	NC		<i>estradiol TABS</i>	C	
CLIMARA PRO	NC		ETHINYL ESTRADIOL	NC	
COMBIPATCH PTTW	C	Limit 8 patches per month; QL(0.286 EA daily)	EVAMIST SOLN	NC	
DUAVEE	NC		MENEST	NC	
<i>esterified estrogens & methyltestosterone 1.25 MG-0.625 MG</i>	NC		MENOSTAR PTWK	NC	
<i>estradiol & norethindrone acetate TABS</i>	C	QL(1 EA daily)	MINIVELLE PTTW 0.0375 MG/24HR (<i>estradiol</i>)	NC	QL(0.286 EA daily)
MYFEMBREE	NC		MINIVELLE PTTW 0.025 MG/24HR, 0.05 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (<i>estradiol</i>)	NC	Limit 8 patches per month; QL(0.286 EA daily)
<i>norethindrone acetate-ethinyl estradiol</i>	C		PREMARIN SOLR	NC	
ORIAHNN	NC		PREMARIN TABS	C	QL(1 EA daily)
PREMPHASE	NC		VIVELLE-DOT PTTW 0.025 MG/24HR, 0.05 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (<i>estradiol</i>)	NC	Limit 8 patches per month; QL(0.286 EA daily)
PREMPRO	C		VIVELLE-DOT PTTW 0.0375 MG/24HR (<i>estradiol</i>)	NC	QL(0.286 EA daily)
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)			

Drug Name	Drug Tier	Requirements/ Limits
FLUOROQUINOLONES - Drugs to Treat Bacterial Infections		
Fluoroquinolones		
BAXDELA TABS	NP	
<i>ciprofloxacin hcl TABS 250 MG, 500 MG, 750 MG</i>	NC	
<i>ciprofloxacin hcl TABS 250 MG, 500 MG, 750 MG</i>	P	
<i>ciprofloxacin in d5w</i>	NC	
CIPRO SUSR	NP	
CIPRO TABS 250 MG, 500 MG (<i>ciprofloxacin hcl</i>)	NP	
<i>levofloxacin in d5w</i>	NC	
<i>levofloxacin SOLN PO</i>	NP	
<i>levofloxacin TABS</i>	P	QL(14 EA per fill retail)
<i>moxifloxacin hcl in sodium chloride</i>	NC	
MOXIFLOXACIN HCL SOLN 400 MG/250ML	NC	
<i>moxifloxacin hcl TABS</i>	NC	
<i>moxifloxacin hcl TABS</i>	NP	
<i>ofloxacin 300 MG</i>	NP	
<i>ofloxacin 400 MG</i>	NP	QL(56 EA per fill retail)
GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs		
5-HT4 Receptor Agonists		
MOTEGRITY (<i>prucalopride succinate</i>)	NP	
<i>prucalopride succinate</i>	NP	
Agents for Chronic Idiopathic Constipation (CIC)		
TRULANCE	NP	
Antiflatulents		

Drug Name	Drug Tier	Requirements/ Limits
MYLICON INFANTS GAS RELIEF SUSP (<i>simethicone</i>)	NC	
PHAZYME ULTIMATE CAPS	NC	
<i>simethicone CHEW 80 MG</i>	C	
SIMETHICONE LIQD XX	NC	RX/OTC
<i>simethicone SUSP</i>	C	
Gallstone Solubilizing Agents		
RELTONE CAPS	NC	
URSO 250 TABS (<i>ursodiol</i>)	NC	QL(7 EA daily)
<i>ursodiol CAPS</i>	C	
URSODIOL CAPS	NC	
<i>ursodiol TABS 250 MG</i>	C	QL(7 EA daily)
<i>ursodiol TABS 500 MG</i>	NC	
Gastrointestinal Antiallergy Agents		
<i>cromolyn sodium (mastocytosis)</i>	NC	
Gastrointestinal Chloride Channel Activators		
AMITIZA (<i>lubiprostone</i>)	NP	
<i>lubiprostone</i>	P	
Gastrointestinal Stimulants		
GIMOTI SOLN NA	NP	SP
METOCLOPRAMIDE HCL MONOHYDRATE	NC	
METOCLOPRAMIDE HCL POWD	NC	
<i>metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML</i>	P	
<i>metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML</i>	NC	
<i>metoclopramide hcl TABS</i>	NC	
<i>metoclopramide hcl TABS</i>	P	
REGLAN TABS (<i>metoclopramide hcl</i>)	NP	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Hepatotropics			<i>mesalamine CPCR</i>	NP	Brand Preferred
REZDIFFRA	NC	SP	<i>mesalamine CPDR</i>	NP	
Ileal Bile Acid Transporter (IBAT) Inhibitors			<i>mesalamine ENEM</i>	P	QL(60 ML daily)
BYLVAY (PELLETS) CPSP	NC	SP	MESALAMINE POWD	NC	RX/OTC
BYLVAY CAPS	NC	SP	<i>mesalamine SUPP</i>	P	
LIVMARLI PO 10 MG, 15 MG, 20 MG, 30 MG	NC		<i>mesalamine TBEC 800 MG</i>	NP	QL(3 EA daily)
Inflammatory Bowel Agents			<i>mesalamine TBEC 1.2 GM</i>	NP	
AMINOSALICYLIC ACID-5 POWD	NC	RX/OTC	OMVOH (300 MG DOSE) SOAJ	NP	SP
APRISO CP24 (<i>mesalamine</i>)	P	Brand Preferred	OMVOH (300 MG DOSE) SOSY	NP	SP
AVSOLA	C	SP; PA	OMVOH SOAJ	NP	SP
AZULFIDINE EN-TABS TBEC (<i>sulfasalazine</i>)	NP		OMVOH SOSY	NP	SP
AZULFIDINE TABS (<i>sulfasalazine</i>)	NP		PENTASA CPCR	P	Brand Preferred
<i>balsalazide disodium</i> CAPS	P	QL(9 EA daily)	RENFLEXIS	C	SP; PA
CANASA SUPP (<i>mesalamine</i>)	NP		ROWASA (<i>mesalamine w/ cleanser</i>)	NP	
CIMZIA (2 SYRINGE) PSKT	NP	SP	SFROWASA ENEM	NP	
CIMZIA KIT	NP	SP	SKYRIZI SOCT	NP	SP
CIMZIA-STARTER PSKT	NP	SP	STELARA 130 MG/26ML	NC	SP
COLAZAL CAPS (<i>balsalazide disodium</i>)	NP	QL(9 EA daily)	SULFASALAZINE POWD	NC	
DELZICOL CPDR (<i>mesalamine</i>)	NP		<i>sulfasalazine TABS</i>	P	
DIPENTUM	NP		<i>sulfasalazine TBEC</i>	P	
ENTYVIO PEN SOAJ	NP	SP	TREMFYA CROHNS INDUCTION SOAJ SC 200 MG/2ML	NP	
INFLECTRA SOLR	C	SP; PA	TREMFYA PEN SOAJ SC 200 MG/2ML	NP	SP
LIALDA TBEC (<i>mesalamine</i>)	NP		TREMFYA SOLN IV	NC	SP
<i>mesalamine w/ cleanser</i>	NP		TREMFYA SOSY SC	NP	SP
<i>mesalamine CP24</i>	NC	Brand Preferred	USTEKINUMAB 130 MG/26ML	NP	SP
<i>mesalamine CP24</i>	NP	Brand Preferred	VELSIPITY	NP	SP
			ZYMFENTRA (1 PEN) AJKT	NP	SP

Drug Name	Drug Tier	Requirements/ Limits
ZYMFENTRA (2 PEN) AJKT	NP	SP
ZYMFENTRA (2 SYRINGE) PSKT	NP	SP
Intestinal Acidifiers		
<i>lactulose (encephalopathy)</i>	P	
<i>lactulose (encephalopathy)</i>	NC	
Irritable Bowel Syndrome (IBS) Agents		
<i>alosetron hcl</i>	NP	
<i>alosetron hcl</i>	NC	
IBSRELA	NP	
LINZESS	P	
LOTRONEX (<i>alosetron hcl</i>)	NP	
VIBERZI	NP	
Live Fecal Microbiota		
REBYOTA	NC	
Peripheral Opioid Receptor Antagonists		
<i>alvimopan</i>	NC	
ENTEREG (<i>alvimopan</i>)	NC	
MOVANTIK	P	
MOVANTIK	NC	
RELISTOR SOLN	NP	
RELISTOR TABS	NP	
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>	NP	RX/OTC
<i>calcium acetate (phosphate binder) TABS</i>	P	RX/OTC
<i>ferric citrate</i>	NC	

Drug Name	Drug Tier	Requirements/ Limits
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>)	NC	
RENVELA TABS (<i>sevelamer carbonate</i>)	NP	
<i>sevelamer carbonate PACK</i>	NP	
<i>sevelamer carbonate TABS</i>	P	
<i>sevelamer carbonate TABS</i>	NC	
<i>sevelamer hcl</i>	NP	
VELPHORO	NP	
GENERAL ANESTHETICS		
Anesthetics - Misc.		
DIPRIVAN EMUL	NC	
<i>etomidate</i>	NC	
<i>ketamine hcl SOLN IJ</i>	NC	
KETAMINE HCL SOLN IJ 10 MG/ML, 100 MG/ML	NC	
<i>propofol EMUL 200 MG/20ML, 500 MG/50ML, 1000 MG/100ML</i>	NC	
Barbiturate Anesthetics		
<i>methohexital sodium SOLR</i>	NC	
Volatile Anesthetics		
<i>desflurane</i>	NC	
<i>isoflurane</i>	NC	
<i>sevoflurane</i>	NC	
GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive Organs and Urinary System		

Drug Name	Drug Tier	Requirements/ Limits
Acidifiers		
K-PHOS NO 2	NC	
Alkalinizers		
ORACIT	NC	
ORAL CITRATE	NC	
<i>pot & sod citrates w/citric ac SOLN</i>	NC	
<i>potassium citrate (alkalinizer) TBCR</i>	C	
<i>potassium citrate (alkalinizer) TBCR 15 MEQ, 1620 MG</i>	NC	
POTASSIUM CITRATE MONOHYDRATE GRAN	NC	RX/OTC
POTASSIUM CITRATE GRAN	NC	RX/OTC
POTASSIUM CITRATE POWD	NC	
SOD CITRATE-CITRIC ACID	C	QL(16.67 ML daily); RX/OTC
<i>sodium citrate & citric acid</i>	C	QL(16.67 ML daily); RX/OTC
SODIUM CITRATE ANHYDROUS POWD	NC	
SODIUM CITRATE CRYST	NC	
SODIUM CITRATE GRAN XX	NC	RX/OTC
UROCIT-K 10 TBCR (<i>potassium citrate (alkalinizer)</i>)	NC	
UROCIT-K 5 TBCR (<i>potassium citrate (alkalinizer)</i>)	NC	
Genitourinary Irrigants		
<i>acetic acid 0.25 %</i>	NC	
<i>glycine (gu irrigant) SOLN 1.5 %</i>	NC	
GLYCINE POWD	NC	RX/OTC
<i>neomycin/polymyxin b gu</i>	NC	

Drug Name	Drug Tier	Requirements/ Limits
<i>sodium chloride (gu irrigant) 0.9 %</i>	C	
SORBITOL 3 %	NC	
SORBITOL-MANNITOL 2.7 GM/100ML-0.54 GM/100ML	NC	
IgA Nephropathy (IgAN) Agents		
VANRAFIA TABS PO 0.75 MG	NC	SP
Interstitial Cystitis Agents		
ELMIRON CAPS	NC	
RIMSO-50	NC	
Prostatic Hypertrophy Agents		
<i>alfuzosin hcl</i>	P	
CARDURA XL	NP	
<i>dutasteride</i>	P	
<i>dutasteride-tamsulosin hcl</i>	NP	
<i>finasteride</i>	NC	QL(1 EA daily)
<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>	NC	QL(2 EA daily)
<i>tamsulosin hcl</i>	P	QL(2 EA daily)
Urinary Analgesics		
PHENAZOPYRIDINE HCL POWD	NC	
<i>phenazopyridine hcl TABS 100 MG, 200 MG</i>	C	
PYRIDIUM TABS (<i>phenazopyridine hcl</i>)	NC	
Urinary Stone Agents		
LITHOSTAT	NC	
GOUT AGENTS - Drugs to Treat Gout		
Gout Agent Combinations		
<i>colchicine w/ probenecid</i>	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>colchicine w/ probenecid</i>	P		Bradykinin B2 Receptor Antagonists		
Gout Agents			FIRAZYR SOSY (<i>icatibant acetate</i>)	NC	SP; PA
<i>allopurinol 200 MG</i>	NP		<i>icatibant acetate SOSY</i>	C	SP; PA
<i>allopurinol 100 MG, 300 MG</i>	P		Complement Inhibitors		
<i>allopurinol sodium</i>	NC		BERINERT KIT	NC	SP
<i>colchicine CAPS</i>	NP		CINRYZE SOLR IV	NC	SP
COLCHICINE POWD	NC		HAEGARDA SOLR SC	C	SP; PA
<i>colchicine TABS</i>	P	QL(6 EA per fill retail); 1 max fill(s) per 31 day(s) retail	PIASKY	NC	SP
COLCRYS TABS (<i>colchicine</i>)	NP	QL(6 EA per fill retail); 1 max fill(s) per 31 day(s) retail	RUCONEST	NC	SP
<i>febuxostat</i>	NP		TAVNEOS	NP	SP
GLOPERBA SOLN PO	NP		VOYDEYA TABS	NC	SP
MITIGARE CAPS (<i>colchicine</i>)	NP		VOYDEYA TBPB	NC	SP
ULORIC (<i>febuxostat</i>)	NP		Hematorheologic Agents		
ZYLOPRIM 100 MG (<i>allopurinol</i>)	NP		<i>pentoxifylline</i>	C	
Uricosurics			Plasma Expanders		
<i>probenecid</i>	P		<i>dextran 40 in d5w</i>	NC	
HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders			<i>dextran 40 in saline</i>	NC	
Aminolevulinate Synthase 1-Directed siRNA			HESPAN (<i>hetastarch (hes /0.7 or /0.75) in sodium chloride</i>)	NC	
GIVLAARI	C	SP; PA	<i>hetastarch (hes /0.7 or /0.75) in sodium chloride</i>	NC	
Antihemophilic Products			HEXTEND	NC	
HEMLIBRA	NC	SP	Plasma Kallikrein Inhibitors		
NUWIQ KIT	NC	SP	KALBITOR	NC	SP
NUWIQ SOLR	NC	SP	TAKHZYRO SOLN	NC	SP
QFITLIA SOAJ SC 50 MG/0.5ML	NC	SP	TAKHZYRO SOSY	NC	SP
QFITLIA SOLN SC 20 MG/0.2ML	NC	SP	Plasma Proteins		
SEVENFACT	NC	SP	ALBUKED 25	NC	
			ALBUKED 5	NC	
			ALBUMIN HUMAN	NC	
			ALBUMINEX	NC	
			ALBUMIN-ZLB	NC	
			ALBURX	NC	

Drug Name	Drug Tier	Requirements/Limits
ALBUTEIN	NC	
FLEXBUMIN	NC	
HUMAN ALBUMIN GRIFOLS	NC	
KEDBUMIN	NC	
OCTAPLAS BLOOD GROUP A	NC	
OCTAPLAS BLOOD GROUP AB	NC	
OCTAPLAS BLOOD GROUP B	NC	
OCTAPLAS BLOOD GROUP O	NC	
PLASBUMIN-25	NC	
PLASBUMIN-5	NC	
Platelet Aggregation Inhibitors		
AGGRASTAT 3.75 MG/15ML	NC	
<i>anagrelide hcl</i>	NC	
<i>aspirin-dipyridamole</i>	NP	
BRILINTA 60 MG, 90 MG (<i>ticagrelor</i>)	P	QL(2 EA daily)
<i>cilostazol</i>	C	QL(2 EA daily)
<i>clopidogrel bisulfate 75 MG</i>	P	QL(1 EA daily)
<i>clopidogrel bisulfate 300 MG</i>	P	
<i>dipyridamole</i>	NC	
<i>dipyridamole</i>	NP	
EFFIENT (<i>prasugrel hcl</i>)	NP	QL(1 EA daily)
<i>eptifibatide</i>	NC	
KENGREAL	NC	
PLAVIX 75 MG (<i>clopidogrel bisulfate</i>)	NP	QL(1 EA daily)
<i>prasugrel hcl</i>	P	QL(1 EA daily)
<i>ticagrelor 60 MG, 90 MG</i>	NP	QL(2 EA daily)
<i>tirofiban hcl in sodium chloride</i>	NC	
Protamine		

Drug Name	Drug Tier	Requirements/Limits
<i>protamine sulfate</i>	NC	
Thrombolytic Enzymes		
ACTIVASE IV	NC	
CATHFLO ACTIVASE IJ	NC	
RETAVASE HALF-KIT	NC	
TNKASE	NC	
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	Brand Preferred
ENDARI (<i>glutamine sickle cell</i>)	PA	SP; PA
<i>glutamine (sickle cell)</i>	PA	SP; PA
LYFGENIA	PA	SP; PA
SIKLOS TABS	P	Brand Preferred
XROMI SOLN PO 100 MG/ML	P	SP
Cobalamins		
<i>cyanocobalamin SOLN IJ 1000 MCG/ML</i>	C	QL(10 ML per 270 day(s) retail)
<i>cyanocobalamin SOLN NA 500 MCG/0.1ML</i>	NC	
<i>hydroxocobalamin acetate SOLN</i>	NC	
Folic Acid/Folates		
FOLIC ACID POWD	NC	RX/OTC
<i>folic acid SOLN</i>	NC	
<i>folic acid TABS 1 MG</i>	C	RX/OTC
<i>folic acid TABS 400 MCG</i>	C	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Hematopoietic Growth Factors			<i>folic acid-vitamin b6-vitamin b12 TABS 10 MG-800 MCG-115 MCG, 25 MG-2.2 MG-1 MG, 25 MG-2.5 MG-1 MG</i>	NC	RX/OTC
ARANESP (ALBUMIN FREE) SOLN	NP	SP	FOLITE	NC	
ARANESP (ALBUMIN FREE) SOSY	NP	SP	FOLIVANE-F	NC	
<i>eltrombopag olamine PACK 12.5 MG, 25 MG</i>	NC	SP	FOLIVANE-PLUS	NC	
EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	P	SP	FOLIXAPURE TABS	NC	
MIRCERA	NP	SP	FOLIXATE TABS	NC	
PROCRIT	NP	SP	FOLTREXYL TABS	NC	
PROCRIT	NP	SP	HEMOCYTE PLUS CAPS	NC	
REBLOZYL	C	SP	INTEGRA F	NC	
RETACRIT	P	SP	INTEGRA PLUS	NC	
VAFSEO	NP	SP	IRON FOLATE PLUS	NC	
ZARXIO	C	SP; PA	IRON FOLATE-F	NC	
ZIEXTENZO	NC	SP	<i>iron-folic acid-vitamin c-vitamin b6-vitamin b12-zinc</i>	NC	
Hematopoietic Mixtures			IROSPAN 24/6	NC	
ACTIVE FE	NC		NEPHRON FA	NC	
BENTIVITE TABS	NC		NIFEREX TABS	NC	
BP VIT 3	NC		NUFERA TABS	NC	
CENTRATEX CAPS	NC		TALIVA	NC	
CORVITE 150 TABS	NC		TARON FORTE	NC	
CORVITE FE TABS	NC		TULIVITE TABS	NC	
DERMACINRX DOTREMINE TABS	NC		VITAMEZ	NC	
DERMACINRX FOLTAMIN TABS	NC		Iron		
<i>fe fum-iron polysacch complex-fa-b complex-c-zn-mn-cu</i>	NC		ACCRUFER	NC	
FERIVA 21/7 (WITH DOCUSATE) 175 MG-400 MCG-12 MCG-150 MG-50 MG-600 MCG-10 MG-75 MG	NC		FER-IN-SOL SOLN (<i>ferrous sulfate</i>)	NC	QL(3.4 ML daily)
FERIVAFA	NC		FERRIMIN 150 TABS	NC	
FOLDITAM TABS	NC		<i>ferrous fumarate TABS</i>	C	QL(2 EA daily)
			FERROUS GLUCONATE TABS 324 MG	C	QL(3.34 EA daily)
			FERROUS SULFATE GRAN	NC	RX/OTC
			FERROUS SULFATE POWD	NC	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>ferrous sulfate SOLN 300 MG/5ML, 325 MG/5ML</i>	NC		ARTISS SOLN	NC	
<i>ferrous sulfate SOLN 15 MG/ML, 15 MG/ML</i>	C	QL(3.4 ML daily)	ASTRINGYN	NC	
<i>ferrous sulfate SOLN 220 MG/5ML, 300 MG/6.8ML</i>	C		GEL-FLOW	NC	
<i>ferrous sulfate TABS 325 MG, 65 MG, 325 MG</i>	C		GELFOAM COMPRESSED SIZE 100 MISC EX	NC	
<i>ferrous sulfate TBEC</i>	C		GELFOAM DENTAL PACK SIZE 4 MISC EX	NC	
FERROUS SULFATE TBEC (<i>ferrous sulfate</i>)	NC		GELFOAM SPONGE SIZE 100 MISC EX	NC	
<i>ferumoxytol</i>	NC		GELFOAM SPONGE SIZE 200 MISC EX	NC	
HEMATEX LIQD	NC		GELFOAM SPONGE SIZE 50 MISC EX	NC	
INFED	NC		GELFOAM SPONGE MISC EX	NC	
INJECTAFER	NC		GELFOAM-JMI POWDER	NC	
IRON CHEWS PEDIATRIC CHEW	C		GELFOAM POWD MT	NC	
MONOFERRIC	NC		RECOTHROM	NC	
<i>polysaccharide iron complex CAPS</i>	C	QL(1 EA daily)	RECOTHROM SPRAY KIT	NC	
<i>sodium ferric gluconate complex in sucrose</i>	NC		THROMBI-GEL 10	NC	
VENOFER	NC		THROMBI-GEL 100	NC	
HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders			THROMBI-GEL 40	NC	
Hemostatics - Systemic			THROMBIN-JMI EPISTAXIS KIT	NC	
TRANEXAMIC ACID-NACL	NC		THROMBIN-JMI KIT	NC	
<i>tranexamic acid-sodium chloride</i>	NC		THROMBIN-JMI SOLR	NC	
<i>tranexamic acid SOLN 1000 MG/10ML</i>	NC		THROMBI-PAD	NC	
<i>tranexamic acid TABS</i>	C	QL(30 EA per 5 day(s) retail); 1 max fill(s) per 31 day(s) retail; AL(At least 12 yrs old)	TISSEEL KIT	NC	
Hemostatics - Topical			TISSEEL SOLN	NC	
ARTISS KIT	NC		HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
			Antihistamine Hypnotics		
			<i>diphenhydramine hcl (sleep) TABS 25 MG</i>	C	QL(1 EA daily)
			<i>doxylamine succinate (sleep)</i>	C	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
GNP PAIN RELIEF NIGHTTIME	NC		HALCION 0.25 MG (<i>triazolam</i>)	NC	
UNISOM SLEEPTABS (<i>doxylamine succinate (sleep)</i>)	NC		HALCION 0.25 MG (<i>triazolam</i>)	NP	
Barbiturate Hypnotics			IGALMI FILM	NP	
AMYTAL SODIUM	NC		LUNESTA (<i>eszopiclone</i>)	NC	
PENTOBARBITAL SODIUM POWD	NC		MIDAZOLAM HCL-SODIUM CHLORIDE SOLN IV 0.8 %-100 MG/100ML	NC	
<i>pentobarbital sodium SOLN</i>	NC		<i>midazolam hcl SOLN IJ</i>	C	
PHENOBARBITAL SODIUM POWD	NC		MIDAZOLAM HCL SOLN IJ	C	
<i>phenobarbital sodium SOLN</i>	NC		<i>midazolam hcl SYRP</i>	NC	
<i>phenobarbital ELIX</i>	C		<i>midazolam-sodium chloride</i>	NC	
PHENOBARBITAL POWD	NC		MIDAZOLAM-SODIUM CHLORIDE	NC	
<i>phenobarbital TABS</i>	C		MIDAZOLAM-SODIUM CHLORIDE (PF)	NC	
Hypnotics - Tricyclic Agents			PRECEDEX SOLN	NC	
<i>doxepin hcl (sleep)</i>	NP		<i>quazepam</i>	NP	
Non-Barbiturate Hypnotics			RESTORIL 7.5 MG, 22.5 MG (<i>temazepam</i>)	NP	
AMBIEN CR TBCR (<i>zolpidem tartrate</i>)	NP		RESTORIL 15 MG, 30 MG (<i>temazepam</i>)	NP	QL(1 EA daily); AL(At least 18 yrs old)
AMBIEN TABS (<i>zolpidem tartrate</i>)	NP	QL(1 EA daily)	<i>temazepam 7.5 MG, 22.5 MG</i>	P	
BYFAVO	NC		<i>temazepam 15 MG, 30 MG</i>	NC	QL(1 EA daily); AL(At least 18 yrs old)
CHLORAL HYDRATE CRYST	NC		<i>temazepam 15 MG, 30 MG</i>	P	QL(1 EA daily); AL(At least 18 yrs old)
<i>dexmedetomidine hcl in sodium chloride SOLN</i>	NC		<i>triazolam</i>	NP	
DEXMEDETOMIDINE HCL-DEXTROSE	NC		<i>zaleplon 5 MG</i>	NP	QL(1 EA daily); AL(At least 18 yrs old)
<i>dexmedetomidine hcl SOLN</i>	NC		<i>zaleplon 10 MG</i>	NP	QL(2 EA daily); AL(At least 18 yrs old)
DORAL (<i>quazepam</i>)	NP		ZOLPIDEM TARTRATE CAPS	NP	
EDLUAR SUBL	NP				
<i>estazolam</i>	NP				
<i>eszopiclone</i>	NP				
<i>flurazepam hcl</i>	NP	QL(1 EA daily)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>zolpidem tartrate SUBL</i>	NP		<i>sennosides-docusate sodium TABS</i>	C	QL(4 EA daily)
<i>zolpidem tartrate TABS</i>	P	QL(1 EA daily)	SENOKOT LAXATIVE	NC	
<i>zolpidem tartrate TBCR</i>	NC		SENOKOT S TABS (<i>sennosides-docusate sodium</i>)	NC	QL(4 EA daily)
<i>zolpidem tartrate TBCR</i>	NP		<i>sodium sulfate-potassium sulfate-magnesium sulfate</i>	NP	
Orexin Receptor Antagonists			<i>sodium sulfate-potassium sulfate-magnesium sulfate</i>	NC	
BELSOMRA	NP		SUFLAVE	NP	
DAYVIGO	NP		SUPREP BOWEL PREP KIT (<i>sodium sulfate-potassium sulfate-magnesium sulfate</i>)	NP	
QUVIVIQ	NP		SUTAB	NP	
Selective Melatonin Receptor Agonists			Laxatives - Miscellaneous		
HETLIOZ LQ SUSP	NP	SP	GLYCERIN (ADULT) SUPP (<i>glycerin (laxative)</i>)	NC	
HETLIOZ CAPS (<i>tasimelteon</i>)	NP	SP	<i>glycerin (laxative) SUPP 2 GM</i>	C	
<i>ramelteon</i>	NP		<i>lactulose PACK</i>	NP	
ROZEREM (<i>ramelteon</i>)	NP		<i>lactulose SOLN</i>	P	
<i>tasimelteon CAPS</i>	NP	SP	<i>lactulose SOLN</i>	NC	
LAXATIVES - Bowel Treatment Drugs			<i>polyethylene glycol 3350 PACK</i>	P	
Bulk Laxatives			<i>polyethylene glycol 3350 POWD</i>	P	QL(34 GM daily)
<i>calcium polycarbophil TABS</i>	C	QL(10 EA daily)	Lubricant Laxatives		
Laxative Combinations			MINERAL OIL HEAVY OIL XX	NC	RX/OTC
CLENPIQ SOLN 12 GM/175ML-3.5 GM/175ML-10 MG/175ML	NC		MINERAL OIL LIGHT XX	NC	RX/OTC
GOLYTELY SOLR (<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate</i>)	NP	1 package(s) per fill retail	MINERAL OIL OIL XX	NC	RX/OTC
MOVIPREP (<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid</i>)	NP		MURI-LUBE XX	NC	RX/OTC
<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid</i>	NP		Saline Laxatives		
<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR</i>	P	1 package(s) per fill retail	CVS EPSOM SALT GRAN XX	NC	
<i>peg 3350-potassium chloride-sod bicarbonate-sod chloride</i>	NP	1 package(s) per fill retail	EPSOM SALT GRAN XX	NC	
PLENVU	NP		EPSOM SALT POWD	NC	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
EQL EPSOM SALT GRAN XX	NC		COLACE CLEAR CAPS (<i>docusate sodium</i>)	NC	
FLEET ENEMA ENEM (<i>sodium phosphates</i>)	NC		COLACE CAPS 100 MG (<i>docusate sodium</i>)	NC	QL(3 EA daily)
FLEET PEDIATRIC ENEM (<i>sodium phosphates</i>)	NC		<i>docusate sodium</i> CAPS 50 MG	C	
FLEET SALINE ENEMA ENEM (<i>sodium phosphates</i>)	NC		<i>docusate sodium</i> CAPS 100 MG, 250 MG	C	QL(3 EA daily)
<i>magnesium citrate</i> 1.745 GM/30ML	P		<i>docusate sodium</i> LIQD 50 MG/5ML, 100 MG/10ML	C	
<i>magnesium hydroxide</i> SUSP 7.75 %, 400 MG/5ML, 1200 MG/15ML, 2400 MG/30ML	C	QL(32 ML daily)	DOCUSATE SODIUM POWD	NC	
MAGNESIUM SULFATE POWD	NC	RX/OTC	DOCUSATE SODIUM SYRP	C	
OSMOPREP	NC		<i>docusate sodium</i> TABS	C	
RA EPSOM SALT GRAN XX	NC		LOCAL ANESTHETICS-Parenteral - Drugs for Numbing		
<i>sodium phosphates</i> ENEM	C		Local Anesthetic Combinations		
Stimulant Laxatives			<i>bupivacaine</i> w/ <i>epinephrine</i> SOLN 1 :200000-0.25 %, 1 :200000-0.5 %	NC	
BISACODYL POWD	NC		BUPIVACAINE-EPINEPHRINE SOLN	NC	
<i>bisacodyl</i> SUPP	C	QL(12 EA per fill retail)	<i>lidocaine</i> w/ <i>epinephrine</i> SOLN	NC	
<i>bisacodyl</i> TBEC	C	QL(1 EA daily)	LIDOCAINE-EPINEPHRINE SOLN 1 %-1:100000, 2 %-1:200000	NC	
DULCOLAX PINK LAXATIVE TBEC (<i>bisacodyl</i>)	NC	QL(1 EA daily)	SENSORCAINE-MPF/EPINEPHRINE SOLN	NC	
DULCOLAX SUPP (<i>bisacodyl</i>)	NC	QL(12 EA per fill retail)	XYLOCAINE-MPF/EPINEPHRINE SOLN	NC	
DULCOLAX TBEC (<i>bisacodyl</i>)	NC	QL(1 EA daily)	Local Anesthetics - Amides		
<i>sennosides</i> TABS 8.6 MG	C		BUPIVACAINE FISIOPHARMA SOLN IJ	NC	
SENOKOT KIDS GUMMIES CHEW	NC		BUPIVACAINE HCL (BULK) SOLN XX	NC	
SENOKOT LAXATIVE GUMMIES CHEW	NC				
SENOKOT TABS (<i>sennosides</i>)	NC				
Surfactant Laxatives					

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
BUPIVACAINE HCL POWD	NC		<i>azithromycin TABS 250 MG</i>	P	QL(6 EA per fill retail)
<i>bupivacaine hcl SOLN IJ</i>	NC		<i>azithromycin TABS 600 MG</i>	NC	QL(8 EA per 28 day(s) retail)
BUPIVACAINE HCL SOLN IJ 0.25 %, 0.5 %	NC		<i>azithromycin TABS 500 MG</i>	NC	QL(4 EA daily)
<i>bupivacaine in dextrose SOLN</i>	NC		<i>azithromycin TABS 600 MG</i>	P	QL(8 EA per 28 day(s) retail)
EXPAREL	NC		<i>azithromycin TABS 500 MG</i>	P	QL(4 EA daily)
<i>lidocaine hcl (local anesth.) SOLN</i>	NC		ZITHROMAX TRI-PAK TABS (<i>azithromycin</i>)	NP	QL(4 EA daily)
<i>lidocaine hcl (local anesth.) SOSY IJ 100 MG/5ML</i>	NC		ZITHROMAX Z-PAK TABS (<i>azithromycin</i>)	NP	QL(6 EA per fill retail)
LIDOCAINE HCL SOLN	NC		ZITHROMAX PACK	NP	QL(2 EA per fill retail)
LIDOCAINE HCL SOSY IJ 60 MG/3ML, 100 MG/5ML	NC		ZITHROMAX SUSR 200 MG/5ML (<i>azithromycin</i>)	NP	QL(60 ML per fill retail)
MEPIVACAINE HCL POWD	NC		ZITHROMAX SUSR 100 MG/5ML (<i>azithromycin</i>)	NP	1 package(s) per fill retail
<i>mepivacaine hcl SOLN 1 %, 1.5 %, 2 %</i>	NC		ZITHROMAX TABS 500 MG (<i>azithromycin</i>)	NP	QL(4 EA daily)
<i>ropivacaine hcl SOLN IJ</i>	NC		ZITHROMAX TABS 250 MG (<i>azithromycin</i>)	NP	QL(6 EA per fill retail)
Local Anesthetics - Esters			Clarithromycin		
<i>chloroprocaine hcl IJ</i>	NC		<i>clarithromycin SUSR 125 MG/5ML</i>	P	1 package(s) per fill retail
COLOROTEKAL IT	NC		<i>clarithromycin SUSR 250 MG/5ML</i>	P	2 package(s) per fill retail
NESACAINE IJ 1 %, 2 %	NC		<i>clarithromycin TABS</i>	P	QL(28 EA per fill retail)
PROCAINE HCL CRYST	NC		<i>clarithromycin TB24</i>	NP	QL(14 EA per fill retail)
PROCAINE HCL POWD	NC		Erythromycins		
<i>tetracaine hcl SOLN</i>	NC		E.E.S. GRANULES SUSR (<i>erythromycin ethylsuccinate</i>)	NP	
MACROLIDES - Drugs to Treat Bacterial Infections			ERYPED 200 SUSR (<i>erythromycin ethylsuccinate</i>)	NP	
Azithromycin			ERYPED 400 SUSR (<i>erythromycin ethylsuccinate</i>)	NP	
<i>azithromycin PACK</i>	P	QL(2 EA per fill retail)			
<i>azithromycin SOLR</i>	NC				
<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 250 MG</i>	NC	QL(6 EA per fill retail)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>erythromycin base CPEP</i>	NP		ADVOCATE BLOOD GLUCOSE MONITOR DEVI	NC	QL(1 EA per 365 day(s) retail)
ERYTHROMYCIN BASE POWD	NC		ADVOCATE BLOOD GLUCOSE SYSTEM KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
<i>erythromycin base TABS</i>	NP		ADVOCATE REDI-CODE+ DEVI	NC	QL(1 EA per 365 day(s) retail)
<i>erythromycin base TBEC</i>	NP		ADVOCATE REDI-CODE DEVI	NC	QL(1 EA per 365 day(s) retail)
ERYTHROMYCIN ETHYLSUCCINATE POWD	NC		ADVOCATE REDI-CODE KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
<i>erythromycin ethylsuccinate SUSR</i>	P		ADVOCATE SAFETY LANCETS 21G	NC	RX/OTC
<i>erythromycin ethylsuccinate TABS</i>	NP		ADVOCATE SAFETY LANCETS 23G	NC	RX/OTC
<i>erythromycin lactobionate 500 MG</i>	NC		ADVOCATE SAFETY LANCETS 28G	NC	RX/OTC
<i>erythromycin stearate TABS 250 MG</i>	P		AGAMATRIX JAZZ WIRELESS 2 KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
ERYTHROMYCIN POWD	NC		AGAMATRIX PRESTO KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
Fidaxomicin			ASSURE 4 METER DEVI	NC	QL(1 EA per 365 day(s) retail)
DIFICID SUSR	P	Brand Preferred	ASSURE HAEMOLANCE PLUS HIGH	NC	RX/OTC
DIFICID TABS	P	Brand Preferred	ASSURE HAEMOLANCE PLUS LOW	NC	RX/OTC
MEDICAL DEVICES AND SUPPLIES			ASSURE HAEMOLANCE PLUS MICRO	NC	RX/OTC
Diabetic Supplies			ASSURE HAEMOLANCE PLUS NORMAL	NC	RX/OTC
ACCU-CHEK AVIVA PLUS KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	ASSURE HAEMOLANCE PLUS PED	NC	RX/OTC
ACCU-CHEK GUIDE ME KIT	P	QL(1 EA per 365 day(s) retail); RX/OTC	ASSURE PLATINUM METER DEVI	NC	QL(1 EA per 365 day(s) retail)
ACCU-CHEK GUIDE KIT	P	QL(1 EA per 365 day(s) retail); RX/OTC	ASSURE PRISM MULTI METER DEVI	NC	QL(1 EA per 365 day(s) retail)
ACCU-CHEK SOFTCLIX LANCETS	P	RX/OTC			
ADVANCE INTUITION METER DEVI	NC	QL(1 EA per 365 day(s) retail)			
ADVANCE INTUITION MONITOR KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC			
ADVANCE MICRO-DRAW METER DEVI	NC	QL(1 EA per 365 day(s) retail)			

Drug Name	Drug Tier	Requirements/ Limits
ASSURE PRO BLOOD GLUCOSE METER DEVI	NC	QL(1 EA per 365 day(s) retail)
BD LANCET ULTRAFINE 30G	NC	RX/OTC
BD LANCET ULTRAFINE 33G	NC	RX/OTC
BD LATITUDE DIABETES KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
BD LOGIC BLOOD GLUCOSE MONITOR KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
BIGFOOT UNITY PROGRAM KIT	NC	RX/OTC
BIOTEL CARE BLOOD GLUCOSE SYST KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
BIOTEL CARE BLOOD GLUCOSE KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
BLOOD GLUCOSE MONITOR SYSTEM KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
BLOOD GLUCOSE MONITORING 333 DEVI	NC	QL(1 EA per 365 day(s) retail)
BLOOD GLUCOSE SYSTEM PAK KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
BLULINK GLUCOSE MONITORING SYS DEVI	NC	QL(1 EA per 365 day(s) retail)
CAREONE BLOOD GLUCOSE SYSTEM KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
CARESENS CONTROL SOLUTION A/B SOLN	NC	
CARESENS N FELIZ BT DEVI	NC	QL(1 EA per 365 day(s) retail)
CARESENS N FELIZ DEVI	NC	QL(1 EA per 365 day(s) retail)
CARESENS N GLUCOSE SYSTEM DEVI	NC	QL(1 EA per 365 day(s) retail)

Drug Name	Drug Tier	Requirements/ Limits
CARESENS N PLUS BT KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
CARESENS N VOICE SYSTEM DEVI	NC	QL(1 EA per 365 day(s) retail)
CARETOUCH MONITOR SYSTEM KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
CHEMSTRIP BG LOG BOOK MISC	NC	RX/OTC
CLEVER CHEK AUTO-CODE SYSTEM DEVI	NC	QL(1 EA per 365 day(s) retail)
CLEVER CHEK AUTO-CODE VOICE DEVI	NC	QL(1 EA per 365 day(s) retail)
CLEVER CHEK SYSTEM KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
CLEVER CHOICE AUTO-CODE SYSTEM DEVI	NC	QL(1 EA per 365 day(s) retail)
CLEVER CHOICE MICRO SYSTEM KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
CLEVER CHOICE MINI SYSTEM DEVI	NC	QL(1 EA per 365 day(s) retail)
CLEVER CHOICE TALK SYSTEM DEVI	NC	QL(1 EA per 365 day(s) retail)
CONTOUR MONITOR DEVI	NC	QL(1 EA per 365 day(s) retail)
CONTOUR NEXT EZ KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
CONTOUR NEXT GEN MONITOR DEVI	NC	QL(1 EA per 365 day(s) retail)
CONTOUR NEXT GEN MONITOR KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
CONTOUR NEXT LINK KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CONTOUR NEXT MONITOR KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	DIABETES MONITOR DIGIT ADD-ON KIT	NC	RX/OTC
CONTOUR NEXT ONE DEVI	NC	QL(1 EA per 365 day(s) retail)	DIABETES MONITOR DIGIT SOLN KIT	NC	RX/OTC
CONTOUR PLUS BLUE KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	DIATHRIVE BLOOD GLUCOSE METER DEVI	NC	QL(1 EA per 365 day(s) retail)
COOL MONITOR KIT KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	DIATHRIVE+ GLUCOSE MONITOR DEVI	NC	QL(1 EA per 365 day(s) retail)
COOL MONITOR DEVI	NC	QL(1 EA per 365 day(s) retail)	DIATRUE PLUS BLOOD GLUCOSE DEVI	NC	QL(1 EA per 365 day(s) retail)
CVS BLOOD GLUCOSE METER DEVI	NC	QL(1 EA per 365 day(s) retail)	DROPSAFE ACTI-LANCE 23G	NC	RX/OTC
CVS BLOOD GLUCOSE METER KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	EASY MAX T1 GLUCOSE SYSTEM KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
D-CARE GLUCOMETER KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	EASY PLUS II GLUCOSE SYSTEM DEVI	NC	QL(1 EA per 365 day(s) retail)
DEXCOM G6 RECEIVER	PA	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); PA	EASY STEP GLUCOSE MONITOR DEVI	NC	QL(1 EA per 365 day(s) retail)
DEXCOM G6 SENSOR	PA	3 package(s) per 90 day(s) retail; 3 package(s) per 90 day(s) mail; PA	EASY TALK BLOOD GLUCOSE SYSTEM DEVI	NC	QL(1 EA per 365 day(s) retail)
DEXCOM G6 TRANSMITTER	PA	QL(1 EA per 90 day(s) retail; 1 EA per 90 days mail); PA	EASY TOUCH GLUCOSE SYSTEM KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
DEXCOM G7 RECEIVER	PA	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); PA	EASY TOUCH HEALTHPRO GLUCOSE KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
DEXCOM G7 SENSOR	PA	QL(9 EA per 90 day(s) retail); PA	EASY TOUCH HEALTHPRO HIGH/LOW LIQD	NC	
DIABETES CARE KIT	NC	RX/OTC	EASY TRAK BLOOD GLUCOSE SYSTEM DEVI	NC	QL(1 EA per 365 day(s) retail)
			EASY TRAK II BLOOD GLUCOSE SYS DEVI	NC	QL(1 EA per 365 day(s) retail)
			EASYMAX NG BLOOD GLUCOSE DEVI	NC	QL(1 EA per 365 day(s) retail)
			EASYMAX NG BLOOD GLUCOSE KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
EASYMAX V BLOOD GLUCOSE DEVI	NC	QL(1 EA per 365 day(s) retail)	ENLITE GLUCOSE SENSOR	NC	QL(3 EA per 90 day(s) retail; 3 EA per 90 days mail)
EASYPRO BLOOD GLUCOSE MONITOR KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	EVERSENSE 365 SENSOR/HOLDER	NC	QL(3 EA per 90 day(s) retail; 3 EA per 90 days mail)
EASYPRO PLUS KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	EVERSENSE 365 SMART TRANSMIT	NC	QL(1 EA per 90 day(s) retail; 1 EA per 90 days mail)
ELEMENT AUTOCODE SYSTEM KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	EVERSENSE E3 SENSOR/HOLDER	NC	QL(3 EA per 90 day(s) retail; 3 EA per 90 days mail)
ELEMENT COMPACT GLUCOSE SYSTEM DEVI	NC	QL(1 EA per 365 day(s) retail)	EVERSENSE E3 SMART TRANSMITTER	NC	QL(1 EA per 90 day(s) retail; 1 EA per 90 days mail)
ELEMENT COMPACT V GLUCOSE SYS DEVI	NC	QL(1 EA per 365 day(s) retail)	EVERSENSE SENSOR/HOLDER	NC	QL(3 EA per 90 day(s) retail; 3 EA per 90 days mail)
ELEMENT PLUS DEVI	NC	QL(1 EA per 365 day(s) retail)	EVERSENSE SMART TRANSMITTER	NC	QL(1 EA per 90 day(s) retail; 1 EA per 90 days mail)
EMBRACE BLOOD GLUCOSE MONITOR DEVI	NC	QL(1 EA per 365 day(s) retail)	EVOLUTION AUTOCODE DEVI	NC	QL(1 EA per 365 day(s) retail)
EMBRACE EVO GLUCOSE MONITOR DEVI	NC	QL(1 EA per 365 day(s) retail)	FIFTY50 GLUCOSE METER 2.0 KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
EMBRACE EVO GLUCOSE MONITORING KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	FORA 6 CONNECT DEVI	NC	
EMBRACE PRO GLUCOSE METER DEVI	NC	QL(1 EA per 365 day(s) retail)	FORA G20 BLOOD GLUCOSE SYSTEM KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
EMBRACE TALK BLOOD GLUCOSE DEVI	NC	QL(1 EA per 365 day(s) retail)	FORA G30A BLOOD GLUCOSE SYSTEM DEVI	NC	QL(1 EA per 365 day(s) retail)
EMBRACE TALK MONITORING SYSTEM KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	FORA GD20 BLOOD GLUCOSE SYSTEM DEVI	NC	QL(1 EA per 365 day(s) retail)
EMBRACE WAVE BLOOD GLUCOSE DEVI	NC	QL(1 EA per 365 day(s) retail)	FORA GD50 BLOOD GLUCOSE SYSTEM DEVI	NC	QL(1 EA per 365 day(s) retail)
EMBRACE WAVE GLUCOSE METER DEVI	NC	QL(1 EA per 365 day(s) retail)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FORA GTEL BLOOD GLUCOSE SYSTEM DEVI	NC	QL(1 EA per 365 day(s) retail)	FREESTYLE LIBRE 14 DAY READER	PA	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); PA
FORA PREMIUM V10 BLE SYSTEM DEVI	NC	QL(1 EA per 365 day(s) retail)	FREESTYLE LIBRE 14 DAY SENSOR	PA	QL(6 EA per 90 day(s) retail); PA
FORA TEST N' GO ADVANCE DEVI	NC		FREESTYLE LIBRE 2 PLUS SENSOR	PA	QL(6 EA per 90 day(s) retail; 6 EA per 90 days mail); PA
FORA TEST N' GO MONITOR DEVI	NC	QL(1 EA per 365 day(s) retail)	FREESTYLE LIBRE 2 READER	PA	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); PA
FORA TN'G ADVANCE PRO DEVI	NC		FREESTYLE LIBRE 2 SENSOR	PA	QL(6 EA per 90 day(s) retail); PA
FORA TN'G VOICE KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	FREESTYLE LIBRE 3 PLUS SENSOR	PA	QL(6 EA per 90 day(s) retail; 6 EA per 90 days mail); PA
FORA V10 BLOOD GLUCOSE SYSTEM DEVI	NC	QL(1 EA per 365 day(s) retail)	FREESTYLE LIBRE 3 READER	PA	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); PA
FORA V12 BLOOD GLUCOSE SYSTEM DEVI	NC	QL(1 EA per 365 day(s) retail)	FREESTYLE LIBRE 3 SENSOR	PA	QL(6 EA per 90 day(s) retail); PA
FORA V20 BLOOD GLUCOSE SYSTEM DEVI	NC	QL(1 EA per 365 day(s) retail)	FREESTYLE LIBRE READER	NC	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail)
FORA V30A BLOOD GLUCOSE SYSTEM DEVI	NC	QL(1 EA per 365 day(s) retail)	FREESTYLE LITE DEVI	NC	QL(1 EA per 365 day(s) retail)
FORA V30A BLOOD GLUCOSE SYSTEM KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	FREESTYLE LITE KIT	NP	QL(1 EA per 365 day(s) retail); RX/OTC
FORACARE GD40 MONITOR DEVI	NC	QL(1 EA per 365 day(s) retail)	FREESTYLE PRECISION NEO SYSTEM KIT	NP	QL(1 EA per 365 day(s) retail); RX/OTC
FORACARE PREMIUM V10 DEVI	NC	QL(1 EA per 365 day(s) retail)	GE100 BLOOD GLUCOSE SYSTEM DEVI	NC	QL(1 EA per 365 day(s) retail)
FORACARE TEST N GO MONITOR DEVI	NC	QL(1 EA per 365 day(s) retail)			
FORTISCARE T1 GLUCOSE SYSTEM DEVI	NC	QL(1 EA per 365 day(s) retail)			
FREESTYLE FREEDOM LITE KIT	NP	QL(1 EA per 365 day(s) retail); RX/OTC			
FREESTYLE FREEDOM LITE KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
GE100 BLOOD GLUCOSE SYSTEM KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	GLUCOCOM MONITOR KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
GHT BLOOD GLUCOSE MONITOR KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	GLUCONAVII BLOOD GLUCOSE SYS KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
GLUCO PERFECT 3 METER DEVI	NC	QL(1 EA per 365 day(s) retail)	GNP EASY TOUCH GLUCOSE METER DEVI	NC	QL(1 EA per 365 day(s) retail)
GLUCOCARD 01 BLOOD GLUCOSE DEVI	NC	QL(1 EA per 365 day(s) retail)	GNP TRUE METRIX AIR METER KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
GLUCOCARD 01 BLOOD GLUCOSE KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	GNP TRUE METRIX GLUCOSE METER KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
GLUCOCARD 01-MINI GLUCOSE KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	GOJJI MULTI-FUNCTIONAL SYSTEM DEVI	NC	
GLUCOCARD EXPRESSION MONITOR KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	GOJJI MULTI-FUNCTIONAL SYSTEM KIT	NC	
GLUCOCARD SHINE CONNEX KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	GOODSENSE BLOOD GLUCOSE KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
GLUCOCARD SHINE EXPRESS KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	GUARDIAN 4 GLUCOSE SENSOR	NC	QL(3 EA per 90 day(s) retail; 3 EA per 90 days mail)
GLUCOCARD SHINE XL DEVI	NC	QL(1 EA per 365 day(s) retail)	GUARDIAN 4 TRANSMITTER	NC	QL(1 EA per 90 day(s) retail; 1 EA per 90 days mail)
GLUCOCARD SHINE DEVI	NC	QL(1 EA per 365 day(s) retail)	GUARDIAN CONNECT TRANSMITTER	NC	QL(1 EA per 90 day(s) retail; 1 EA per 90 days mail)
GLUCOCARD SHINE KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	GUARDIAN LINK 3 TRANSMITTER	NC	QL(1 EA per 90 day(s) retail; 1 EA per 90 days mail)
GLUCOCARD VITAL MONITOR KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	GUARDIAN REAL-TIME REPLACE PED	NC	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail)
GLUCOCARD X-METER KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	GUARDIAN SENSOR (3)	NC	QL(3 EA per 90 day(s) retail; 3 EA per 90 days mail)
GLUCOCOM AUTOLINK TELEMONITOR MISC	NC	RX/OTC			
GLUCOCOM BLOOD GLUCOSE MONITOR DEVI	NC	QL(1 EA per 365 day(s) retail)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
GUARDIAN SENSOR 3	NC	QL(3 EA per 90 day(s) retail; 3 EA per 90 days mail)	MEIJER BLOOD GLUCOSE KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
HEALTHPRO BLOOD GLUCOSE MONITO KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	MEIJER ESSENTIAL BLOOD GLUCOSE KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
HM EMBRACE TALK SYSTEM KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	MEIJER PREMIUM BLOOD GLUCOSE KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
HW EMBRACE PRO GLUCOSE METER DEVI	NC	QL(1 EA per 365 day(s) retail)	MEIJER TRUE2GO BLOOD GLUCOSE KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
HW EMBRACE TALK BLOOD GLUCOSE DEVI	NC	QL(1 EA per 365 day(s) retail)	MEIJER TRUERESULT GLUCOSE SYS KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
IGLUCOSE MONITORING SYSTEM KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	MEIJER TRUETRACK GLUCOSE SYS KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
IHEALTH CONTROL SOLUTION LIQD	NC		MICRODOT BLOOD GLUCOSE SYSTEM KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
IHEALTH GLUCO+ KIT 100 KIT	NC	RX/OTC	MINILINK REAL-TIME TRANSMITTER	NC	QL(1 EA per 90 day(s) retail; 1 EA per 90 days mail)
IHEALTH GLUCO+ KIT 10 KIT	NC	RX/OTC	MINIMED 630G GUARDIAN PRESS	NC	QL(1 EA per 90 day(s) retail; 1 EA per 90 days mail)
IN TOUCH DEVI	NC	QL(1 EA per 365 day(s) retail)	MM BLOOD GLUCOSE SYSTEM KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
INFINITY BLOOD GLUCOSE SYSTEM KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	MM BLULINK GLUCOSE MONIT SYS DEVI	NC	QL(1 EA per 365 day(s) retail)
INFINITY CONTROL SOLN	NC		MM EASY TOUCH GLUCOSE METER KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
INFINITY VOICE KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	MOBILE LANCETS 30G	NC	RX/OTC
KROGER BLOOD GLUCOSE KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	MYGLUCOHEALTH BLOOD GLUCOSE KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
KROGER PREMIUM BLOOD GLUCOSE KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	NOVA MAX BLOOD GLUCOSE SYSTEM DEVI	NC	QL(1 EA per 365 day(s) retail)
LANCETS SUPER THIN	NC	RX/OTC	NOVA MAX BLOOD GLUCOSE SYSTEM KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
LIBERTY BLOOD GLUCOSE METER DEVI	NC	QL(1 EA per 365 day(s) retail)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
OMNIPOD 5 DEXG7G6 INTRO GEN 5 KIT	PA	QL(1 EA per 365 day(s) retail); PA	ONETOUCH VERIO FLEX SYSTEM KIT	P	QL(1 EA per 365 day(s) retail); RX/OTC
OMNIPOD 5 DEXG7G6 PODS GEN 5 MISC	PA	6 package(s) per 90 day(s) retail; 6 package(s) per 90 day(s) mail; PA	ONETOUCH VERIO REFLECT KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
OMNIPOD 5 G7 INTRO (GEN 5) KIT	PA	PA	ONETOUCH VERIO LIQD	C	
OMNIPOD 5 G7 PODS (GEN 5) MISC	PA	PA	PARADIGM REAL-TIME TRANSMITTER	NC	QL(1 EA per 90 day(s) retail; 1 EA per 90 days mail)
OMNIPOD CLASSIC PODS (GEN 3) MISC	NC		PERFECT POINT SAFETY LANCETS	NC	RX/OTC
OMNIPOD DASH INTRO (GEN 4) KIT	PA	QL(1 EA per 365 day(s) retail); PA	PHARMACIST CHOICE AUTOCODE SYS KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
OMNIPOD DASH PDM (GEN 4) KIT	NC		PHARMACIST CHOICE MINI SYSTEM DEVI	NC	QL(1 EA per 365 day(s) retail)
OMNIPOD DASH PODS (GEN 4) MISC	PA	6 package(s) per 90 day(s) retail; 6 package(s) per 90 day(s) mail; PA	PIP BLOOD GLUCOSE MONITORING DEVI	NC	QL(1 EA per 365 day(s) retail)
OMNIPOD GO KIT	NC		POCKETCHEM EZ SYSTEM KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
OMNIPOD GO KIT	NC		POGO AUTOMATIC BLOOD GLUCOSE DEVI	NC	QL(1 EA per 365 day(s) retail)
OMNIPOD POD PALS	NC		PRECISION XTRA-GLUCOSE/KETONE DEVI	NC	
ON CALL EXPRESS MONITORING SYS KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	PRECISION XTRA KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
ONE DROP BLOOD GLUCOSE MONITOR KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	PRO VOICE V8 GLUCOSE SYSTEM DEVI	NC	QL(1 EA per 365 day(s) retail)
ONETOUCH DELICA PLUS LANCET30G	P	RX/OTC	PRO VOICE V9 GLUCOSE SYSTEM DEVI	NC	QL(1 EA per 365 day(s) retail)
ONETOUCH DELICA PLUS LANCET33G	P	RX/OTC	PRODIGY AUTOCODE BLOOD GLUCOSE DEVI	NC	QL(1 EA per 365 day(s) retail)
ONETOUCH ULTRA 2 KIT	P	QL(1 EA per 365 day(s) retail); RX/OTC	PRODIGY AUTOCODE BLOOD GLUCOSE KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
ONETOUCH ULTRA CONTROL LIQD	C		PRODIGY NO CODING BLOOD GLUC KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
PRODIGY POCKET BLOOD GLUCOSE KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
PRODIGY VOICE BLOOD GLUCOSE KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
QUICK TOUCH BLOOD GLUCOSE KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
QUICKTEK/METER KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
QUINTET AC BLOOD GLUCOSE DEVI	NC	QL(1 EA per 365 day(s) retail)
QUINTET BLOOD GLUCOSE SYSTEM DEVI	NC	QL(1 EA per 365 day(s) retail)
REFUAH PLUS MONITORING SYSTEM KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
RELION CONFIRM GLUCOSE MONITOR KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
RELION MICRO KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
RELION PREMIER BLU MONITOR DEVI	NC	QL(1 EA per 365 day(s) retail)
RELION PREMIER CLASSIC DEVI	NC	QL(1 EA per 365 day(s) retail)
RELION PREMIER COMPACT SYSTEM KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
RELION PREMIER VOICE MONITOR DEVI	NC	QL(1 EA per 365 day(s) retail)
RELION PRIME MONITOR DEVI	NC	QL(1 EA per 365 day(s) retail)
RELION TRUE MET AIR GLUC METER KIT	P	QL(1 EA per 365 day(s) retail); RX/OTC
RELION ULTIMA GLUCOSE SYSTEM KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
REXALL BLOOD GLUCOSE SYSTEM KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
RIGHTEST GM100 BLOOD GLUCOSE KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
RIGHTEST GM300 BLOOD GLUCOSE KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
RIGHTEST GM550 BLOOD GLUCOSE KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
RIGHTEST GT333 BLOOD GLUCOSE DEVI	NC	QL(1 EA per 365 day(s) retail)
SIMPLERA SENSOR	NC	
SIMPLERA SYNC SENSOR	NC	
SIMPLERA SYSTEM	NC	
SMART SENSE PREMIUM SYSTEM KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
SMART SENSE VALUE GLUCOSE SYS KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
SMARTEST EJECT STARTER KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
SMARTEST EJECT DEVI	NC	QL(1 EA per 365 day(s) retail)
SMARTEST PERSONA STARTER KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
SMARTEST PRONTO STARTER KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
SMARTEST PROTEGE STARTER KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
SMARTEST PROTEGE DEVI	NC	QL(1 EA per 365 day(s) retail)
SOLUS V2 BLOOD GLUCOSE SYSTEM DEVI	NC	QL(1 EA per 365 day(s) retail)
SOLUS V2 BLOOD GLUCOSE SYSTEM KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SUPREME II CONFIDENCE PADDLES MISC	NC	RX/OTC	TRUETRACK SMART SYSTEM KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
TECHLITE LANCETS	NC	RX/OTC	UNISTIK 1	NC	RX/OTC
TECHLITE LANCETS 30G	NC	RX/OTC	UNISTIK 2	NC	RX/OTC
TEMPO SMART BUTTON MISC	NC	RX/OTC	UNISTIK 2 COMFORT	NC	RX/OTC
TEMPO WELCOME KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	UNISTIK 2 EXTRA	NC	RX/OTC
TGT BLOOD GLUCOSE MONITORING KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	UNISTIK 2 NEONATAL	NC	RX/OTC
TRACER II 3 VOLT BATTERY MISC	NC	RX/OTC	UNISTIK 2 NORMAL	NC	RX/OTC
TRUE FOCUS BLOOD GLUCOSE METER DEVI	NC	QL(1 EA per 365 day(s) retail)	UNISTIK 2 SUPER	NC	RX/OTC
TRUE METRIX AIR GLUCOSE METER DEVI	NC	QL(1 EA per 365 day(s) retail)	UNISTIK 3	NC	RX/OTC
TRUE METRIX AIR GLUCOSE METER KIT	P	QL(1 EA per 365 day(s) retail); RX/OTC	UNISTIK 3 COMFORT	NC	RX/OTC
TRUE METRIX AIR GLUCOSE METER KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	UNISTIK 3 EXTRA	NC	RX/OTC
TRUE METRIX GO GLUCOSE METER KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	UNISTIK 3 NEONATAL	NC	RX/OTC
TRUE METRIX METER DEVI	NC	QL(1 EA per 365 day(s) retail)	UNISTIK 3 NORMAL	NC	RX/OTC
TRUE METRIX METER KIT	P	QL(1 EA per 365 day(s) retail); RX/OTC	UNISTIK CZT COMFORT	NC	RX/OTC
TRUE METRIX METER KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	UNISTIK CZT NORMAL	NC	RX/OTC
TRUERESULT BLOOD GLUCOSE KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	UNISTIK NORMAL	NC	RX/OTC
TRUETRACK BLOOD GLUCOSE DEVI	NC	QL(1 EA per 365 day(s) retail)	VERASENS BLOOD GLUCOSE METER DEVI	NC	QL(1 EA per 365 day(s) retail)
TRUETRACK BLOOD GLUCOSE KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC	VERASENS BLOOD GLUCOSE SYSTEM KIT	NC	QL(1 EA per 365 day(s) retail); RX/OTC
			V-GO 20 KIT	NC	
			V-GO 30 KIT	NC	
			V-GO 40 KIT	NC	
			VIVAGUARD INO CONTROL SOLUTION LIQD	NC	
			VIVAGUARD INO GLUCOSE METER DEVI	NC	QL(1 EA per 365 day(s) retail)
			VIVAGUARD INO SMART GLUC METER DEVI	NC	QL(1 EA per 365 day(s) retail)
			Parenteral Therapy Supplies		
			ADVOCATE INSULIN PEN NEEDLE	NC	QL(5 EA daily); RX/OTC
			AQINJECT PEN NEEDLE	NC	QL(5 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ASSURE ID DUO PRO PEN NEEDLES	NC	QL(5 EA daily); RX/OTC	BD PEN MISC	NC	RX/OTC
ASSURE ID INSULIN SAFETY SYR	NC	RX/OTC	BD PLASTIPAK SYRINGE	NC	RX/OTC
ASSURE ID PRO PEN NEEDLES	NC	QL(5 EA daily); RX/OTC	BD PRECISIONGLIDE NEEDLE	NC	
AUTOPEN DEVI	NC	RX/OTC	BD SAFETYGLIDE ALLERGY SYRINGE MISC	NC	RX/OTC
BARDIA BULB IRRIGATION SYRINGE	NC	RX/OTC	BD SAFETYGLIDE INSULIN SYRINGE	NC	RX/OTC
BARDIA PISTON IRRIGATION SYR	NC	RX/OTC	BD SAFETYGLIDE NEEDLE	NC	RX/OTC
BD ALLERGIST TRAY KIT	NC	RX/OTC	BD SAFETYGLIDE SHIELDED NEEDLE	NC	
BD ALLERGY SYRINGE MISC	NC		BD SAFETYGLIDE SYRINGE/NEEDLE MISC	NC	
BD AUTOSHIELD DUO	C	QL(5 EA daily); RX/OTC	BD SYRINGE BLUNT CANNULA 17G	NC	RX/OTC
BD CONTROL SYRING LUER-LOK	NC	RX/OTC	BD SYRINGE DUAL CANNULA	NC	RX/OTC
BD DISP NEEDLE	NC	RX/OTC	BD SYRINGE LUER SLIP TIP	NC	RX/OTC
BD DISP NEEDLES	NC	RX/OTC	BD SYRINGE LUER-LOK	NC	RX/OTC
BD ECLIPSE LUER-LOK NEEDLE	NC	RX/OTC	BD SYRINGE SLIP TIP	NC	RX/OTC
BD ECLIPSE NEEDLE	NC	RX/OTC	BD SYRINGE/NEEDLE	NC	RX/OTC
BD ECLIPSE SYRINGE	NC	RX/OTC	BD TB SYRINGE MISC	NC	
BD ECLIPSE SYRINGE/NEEDLE	NC	RX/OTC	BD VEO INSULIN SYR ULTRAFINE	NC	RX/OTC
BD FILTER NEEDLE	NC	RX/OTC	CAREPOINT POLY HUB NEEDLE	NC	RX/OTC
BD FILTER NEEDLE/5 MICRON	NC	RX/OTC	CAREPOINT SAFETY 1ST NEEDLE	NC	RX/OTC
BD HYPODERMIC NEEDLE	NC	RX/OTC	CAREPOINT SAFETY1ST SYR/NEEDLE	NC	
BD INSULIN SYRINGE U-500	NC		CAREPOINT SYRINGE CATHETER TIP	NC	RX/OTC
BD INTEGRA NEEDLE	NC	RX/OTC	CAREPOINT SYRINGE LUER LOCK	NC	RX/OTC
BD INTEGRA SYRINGE	NC	RX/OTC	CAREPOINT SYRINGE LUER SLIP	NC	RX/OTC
BD LUER-LOCK SYRINGE	NC	RX/OTC	CAREPOINT TUBERCLN SYR/LUER SL MISC	NC	RX/OTC
BD LUER-LOK SYRINGE	NC	RX/OTC			
BD PEN MINI MISC	NC	RX/OTC			
BD PEN NEEDLE NANO U/F	NC	QL(5 EA daily); RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CARETOUCH CATHETER TIP SYRINGE	NC	RX/OTC	EASY TOUCH FLIPLOCK SAFETY SYR	NC	
CARETOUCH HYPODERMIC NEEDLE	NC	RX/OTC	EASY TOUCH FLURINGE	NC	RX/OTC
CARETOUCH LUER LOCK	NC	RX/OTC	EASY TOUCH FLURINGE FLIPLOCK	NC	RX/OTC
CARETOUCH LUER LOCK SYR/NEEDLE	NC	RX/OTC	EASY TOUCH FLURINGE SHEATHLOCK	NC	RX/OTC
CARETOUCH LUER SLIP	NC	RX/OTC	EASY TOUCH HYPODERMIC NEEDLE	NC	RX/OTC
CEQUR SIMPLICITY 2U DEVI	NC	RX/OTC	EASY TOUCH PEN NEEDLES	NC	
CEQUR SIMPLICITY INSERTER MISC	NC		EASY TOUCH SAFETY SYRINGE	NC	RX/OTC
COMFORT EZ INSULIN SYRINGE	NC	RX/OTC	EASY TOUCH SHEATHLOCK SYRINGE	NC	
CRONO SYRINGE	NC		EASY TOUCH SYRINGE BARREL	NC	RX/OTC
DEFLUX METAL NEEDLE	NC		EASY TOUCH TB FLIPLOCK SYRINGE MISC	NC	
DROPLET INSULIN SYRINGE	NC		EASY TOUCH TB SHEATHLOCK SYR MISC	NC	RX/OTC
DROPLET MICRON	NC		EASYPPOINT NEEDLE	NC	RX/OTC
DROPLET PEN NEEDLES	NC	QL(5 EA daily); RX/OTC	EASYPPOINT NEEDLE/SYRINGE	NC	RX/OTC
DROPSAFE SAFETY SYRINGE/NEEDLE	NC	RX/OTC	EMBECTA AUTOSHIELD DUO	C	QL(5 EA daily); RX/OTC
DROPSAFE SICURA	NC	RX/OTC	EMBECTA INS SYR U/F 1/2 UNIT	NC	RX/OTC
EASY COMFORT INSULIN SYRINGE	NC		EMBECTA INSULIN SYR ULTRAFINE	NC	RX/OTC
EASY COMFORT PEN NEEDLES	NC		EMBECTA INSULIN SYR ULTRAFINE	C	RX/OTC
EASY COMFORT PEN NEEDLES	NC	QL(5 EA daily); RX/OTC	EMBECTA INSULIN SYRINGE U-500	NC	
EASY GLIDE CATH TIP SYRINGE	NC	RX/OTC	EMBECTA PEN NEEDLE NANO	C	QL(5 EA daily); RX/OTC
EASY GLIDE LUER LOCK SYRINGE	NC	RX/OTC	EMBECTA PEN NEEDLE NANO 2 GEN	C	QL(5 EA daily); RX/OTC
EASY GLIDE SLIP LOCK SYRINGE	NC	RX/OTC	EMBECTA PEN NEEDLE ULTRAFINE	C	QL(5 EA daily)
EASY TOUCH ALLERGY SYRINGE MISC	NC	RX/OTC			
EASY TOUCH FLIPLOCK NEEDLES	NC				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FLOW-EZE VENTED NEEDLE	NC		MONOJECT HYPODERMIC NEEDLE	NC	RX/OTC
GLOBAL EASY GLIDE INSULIN SYR	NC	RX/OTC	MONOJECT INTRODUCER NEEDLE	NC	
GNP PEN NEEDLES	NC	QL(5 EA daily); RX/OTC	MONOJECT LIFESHIELD SYRINGE	NC	RX/OTC
HYPODERMIC NEEDLE	NC	RX/OTC	MONOJECT MAGELLAN SAFETY NDL	NC	RX/OTC
INPEN 100-BLUE-LILLY-HUMALOG DEVI	NC	RX/OTC	MONOJECT MAGELLAN SYRINGE	NC	RX/OTC
INPEN 100-BLUE-NOVOLOG-FIASP DEVI	NC	RX/OTC	MONOJECT MEDICATION TRANSF NDL	NC	
INPEN 100-GREY-LILLY-HUMALOG DEVI	NC	RX/OTC	MONOJECT PHARMACY TRAY	NC	RX/OTC
INPEN 100-GREY-NOVOLOG-FIASP DEVI	NC	RX/OTC	MONOJECT PISTON SYRINGE	NC	
INPEN 100-PINK-LILLY-HUMALOG DEVI	NC	RX/OTC	MONOJECT SOFTPACK/CATH TIP	NC	RX/OTC
INPEN 100-PINK-NOVOLOG-FIASP DEVI	NC	RX/OTC	MONOJECT SOFTPACK/LLOCK	NC	RX/OTC
INSUPEN PEN NEEDLES	NC	QL(5 EA daily); RX/OTC	MONOJECT SOFTPACK/LTIP	NC	RX/OTC
J-TIP KIT W/VIAL ADAPTERS KIT	NC		MONOJECT SOFTPACK/RG LOCK	NC	RX/OTC
LUER LOCK SAFETY SYRINGES	NC	RX/OTC	MONOJECT SOFTPACK/RG LUER	NC	RX/OTC
MAGELLAN SYRINGE-SAFETY NEEDLE	NC		MONOJECT SYRINGE	NC	RX/OTC
MAGELLAN TUBERCULIN SYRINGE MISC	NC	RX/OTC	MONOJECT SYRINGE CATH TIP	NC	RX/OTC
MONOJECT ALLERGIST TRAY KIT	NC		MONOJECT SYRINGE ECC LUER	NC	RX/OTC
MONOJECT BLUNTIP CANNULA	NC	RX/OTC	MONOJECT SYRINGE ECCENTRIC TIP	NC	RX/OTC
MONOJECT BLUNTIP SYR/CANNULA	NC	RX/OTC	MONOJECT SYRINGE LUER LOCK	NC	
MONOJECT CONTROL SYRINGE	NC	RX/OTC	MONOJECT SYRINGE LUER-LOCK TIP	NC	
MONOJECT FILTER ASPIRATOR	NC	RX/OTC	MONOJECT SYRINGE PHARMACY TRAY	NC	RX/OTC
MONOJECT FILTER NEEDLE	NC	RX/OTC	MONOJECT SYRINGE REG LUER	NC	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MONOJECT SYRINGE REGULAR TIP	NC	RX/OTC	TECHLITE PEN NEEDLES	NC	QL(5 EA daily); RX/OTC
MONOJECT SYRINGE TOOMEY TYPE	NC	RX/OTC	TECHLITE PLUS PEN NEEDLES	NC	QL(5 EA daily); RX/OTC
MONOJECT TB SAFETY SYRINGE MISC	NC	RX/OTC	TOOMEY SYRINGE	NC	
MONOJECT TB SYRINGE	NC	RX/OTC	TRUE COMFORT INSULIN SYRINGE	NC	
NOKOR VENTED NEEDLE	NC	RX/OTC	TRUE COMFORT PEN NEEDLES	NC	QL(5 EA daily); RX/OTC
NORM-JECT LUER LOCK SYRINGE	NC	RX/OTC	TRUE COMFORT PRO INSULIN SYR	NC	
NORM-JECT LUER SLIP SYRINGE	NC	RX/OTC	TRUE COMFORT PRO PEN NEEDLES	NC	QL(5 EA daily); RX/OTC
NOVOPEN ECHO DEVI	NC	RX/OTC	TRUE COMFORT SAFETY PEN NEEDLE	NC	QL(5 EA daily); RX/OTC
PATIENT SAFE SYRINGE	NC	RX/OTC	ULTICARE SYRINGE	NC	
PEN NEEDLE/5-BEVEL TIP	NC	QL(5 EA daily); RX/OTC	ULTICARE TUBERCULIN SAFETY SYR	NC	
PEN NEEDLES	NC	QL(5 EA daily); RX/OTC	ULTIGUARD SAFEPACK PEN NEEDLE	NC	QL(5 EA daily); RX/OTC
PERFECT POINT SAFETY NEEDLE	NC	RX/OTC	UNIFINE OTC PEN NEEDLES	NC	QL(5 EA daily); RX/OTC
POLY HUB NEEDLE	NC	RX/OTC	UNIFINE PROTECT PEN NEEDLE	NC	QL(5 EA daily); RX/OTC
QUICK TOUCH INSULIN PEN NEEDLE	NC	QL(5 EA daily); RX/OTC	UNIFINE SAFECONTROL PEN NEEDLE	NC	QL(5 EA daily); RX/OTC
RELION INSULIN SYRINGE	NC	RX/OTC	VANISHPOINT ALLERGY TRAY KIT	NC	RX/OTC
SECURESAFE HYPODERMIC NEEDLE	NC	RX/OTC	VANISHPOINT SAFETY SYRINGE	NC	
SECURESAFE SYRINGE/NEEDLE	NC		VANISHPOINT SYRINGE	NC	RX/OTC
SURE COMFORT PEN NEEDLES	NC	QL(5 EA daily); RX/OTC	VANISHPOINT TUBERCULIN SYRINGE MISC	NC	RX/OTC
SYRINGE DISPOSABLE	NC	RX/OTC	VERIFINE PLUS PEN NEEDLE	NC	QL(5 EA daily); RX/OTC
SYRINGE ECCENTRIC TIP	NC	RX/OTC	VERISAFE SAFE STERILE SYRINGE	NC	RX/OTC
SYRINGE LUER LOCK	NC	RX/OTC	VERISAFE SAFETY STERILE NEEDLE	NC	RX/OTC
SYRINGE LUER SLIP	NC	RX/OTC	YALE DISP NEEDLES	NC	
SYRINGE/HYPODERMIC SAFETY	NC	RX/OTC	Respiratory Therapy Supplies		
TECHLITE INSULIN SYRINGE	NC	RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
AEROCHAMBER HOLDING CHAMBER DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	AEROCHAMBER Z-STAT PLUS/LARGE 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/MEDIUM 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	AEROCHAMBER Z-STAT PLUS/SMALL MISC	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	AEROCHAMBER Z-STAT PLUS MISC	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	AEROVENT PLUS 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/ADULT 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 COMFORT CHAMBER/CHILD 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 LARGE 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	BREATHE EASE MEDIUM DEVI	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	BREATHE EASE SMALL DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLO-VU SMALL MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC	BREATHERRITE VALVED MDI CHAMBER DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLO-VU W/MASK MISC	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
AEROCHAMBER PLUS FLO-VU MISC	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
AEROCHAMBER PLUS FLOW VU MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC	COMPACT SPACE CHAMBER/MED MASK DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
AEROCHAMBER W/FLOWSIGNAL 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
AEROCHAMBER Z-STAT PLUS CHAMBR MISC	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

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
EASIVENT MASK LARGE MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC	INSPIREASE RESERVOIR BAGS	C	QL(3 EA per 180 day(s) retail)
EASIVENT MASK MEDIUM MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC	INSPIREASE 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	MASK VORTEX/CHILD/FROG	C	QL(2 EA per 360 day(s) retail); RX/OTC
EASIVENT MISC	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
EQ SPACE CHAMBER ANTI-STATIC L DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	MICROCHAMBER 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	MICROCHAMBER 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	MICROSPACER 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 DEVI	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	OPTICHAMBER DIAMOND-LG MASK 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	OPTICHAMBER DIAMOND-MD MASK MISC	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	OPTICHAMBER DIAMOND MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC
FLEXICHAMBER 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
INSPIRACHAMBER/LARGE DEVI	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
INSPIRACHAMBER/MEDIUM DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	PANDA MASK MEDIUM	C	QL(2 EA per 360 day(s) retail); RX/OTC
INSPIRACHAMBER/MOUTHPIECE 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
INSPIRACHAMBER/SMALL 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

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PARI VORTEX PEDIATRIC 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
PEDIATRIC PANDA MASK	C	QL(2 EA per 360 day(s) retail); RX/OTC	MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches		
POCKET CHAMBER DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	Calcitonin Gene-Related Peptide (CGRP) Receptor Antag		
POCKET SPACER DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	AIMOVIG	NP	SP
PRO COMFORT SPACER ADULT MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC	AJOVY SOAJ	NP	SP
PRO COMFORT SPACER CHILD MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC	AJOVY SOSY	NP	SP
PRO COMFORT SPACER INFANT DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	EMGALITY (300 MG DOSE) SOSY	NP	SP
PROCARE SPACER/ADULT MASK DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	EMGALITY SOAJ	PA	SP; PA
PROCARE SPACER/CHILD MASK DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	EMGALITY SOSY	PA	SP; PA
PROCHAMBER VHC DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	NURTEC	NP	
PURE COMFORT SPACER CHAMBER DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	QULIPTA	NP	
RITEFLO DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	UBRELVY	PA	PA
VORTEX HOLD CHMBR/MASK/CHILD DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	ZAVZPRET	NP	
VORTEX HOLD CHMBR/MASK/TODDLER DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	Migraine Combinations		
VORTEX VALVE CHAMBER-PEDI MASK DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	<i>ergotamine w/ caffeine SUPP</i>	NC	
			<i>sumatriptan-naproxen sodium</i>	NP	
			SYMBRAVO TABS PO	NP	
			Migraine Products		
			DIHYDROERGOTAMINE MESYLATE CRYST	NC	
			DIHYDROERGOTAMINE MESYLATE POWD	NC	
			ERGOMAR SUBL	NC	
			ERGOTAMINE TARTRATE POWD	NC	
			Migraine Products - NSAIDs		
			<i>diclofenac potassium (migraine)</i>	NC	
			ELYXYB	NC	
			Serotonin Agonists		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>almotriptan malate</i>	NP		REL PAX 20 MG (<i>eletriptan hydrobromide</i>)	P	QL(6 EA per 31 day(s) retail)
<i>eletriptan hydrobromide</i>	NP	Brand Preferred; QL(6 EA per 31 day(s) retail)	REL PAX (<i>eletriptan hydrobromide</i>)	P	Brand Preferred ; QL(6 EA per 31 day(s) retail)
FROVA (<i>frovatriptan succinate</i>)	NP		REL PAX (<i>eletriptan hydrobromide</i>)	P	Brand Preferred; QL(6 EA per 31 day(s) retail)
<i>frovatriptan succinate</i>	NP		REYVOW	NC	
IMITREX 5 MG/ACT (<i>sumatriptan</i>)	NC	5 MG/ACT; Brand Preferred; QL(6 EA per 31 day(s) retail); AL(At least 12 yrs old)	<i>rizatriptan benzoate TABS</i>	P	QL(12 EA per 31 day(s) retail); AL(At least 6 yrs old)
IMITREX STATDOSE REFILL SOCT 6 MG/0.5ML (<i>sumatriptan succinate</i>)	NP	QL(2 ML per 31 day(s) retail); AL(At least 12 yrs old)	<i>rizatriptan benzoate TABS</i>	NC	QL(12 EA per 31 day(s) retail); AL(At least 6 yrs old)
IMITREX STATDOSE REFILL SOCT 4 MG/0.5ML (<i>sumatriptan succinate</i>)	NP		<i>rizatriptan benzoate TBDP</i>	P	QL(12 EA per 31 day(s) retail); AL(At least 6 yrs old)
IMITREX STATDOSE SYSTEM SOAJ 4 MG/0.5ML (<i>sumatriptan succinate</i>)	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 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 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 TABS (<i>sumatriptan succinate</i>)	NP	QL(9 EA 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)
MAXALT-MLT TBDP 10 MG (<i>rizatriptan benzoate</i>)	NP	QL(12 EA per 31 day(s) retail); AL(At least 6 yrs old)	<i>sumatriptan succinate SOAJ 6 MG/0.5ML</i>	NC	QL(2 ML per 31 day(s) retail); AL(At least 12 yrs old)
MAXALT TABS 10 MG (<i>rizatriptan benzoate</i>)	NP	QL(12 EA per 31 day(s) retail); AL(At least 6 yrs old)	<i>sumatriptan succinate SOAJ 4 MG/0.5ML</i>	NC	
<i>naratriptan hcl</i>	NP	QL(9 EA per 31 day(s) retail); AL(At least 18 yrs old)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>sumatriptan succinate</i> SOCT 6 MG/0.5ML	P	QL(2 ML per 31 day(s) retail); AL(At least 12 yrs old)	SODIUM ACETATE GRAN	NC	
<i>sumatriptan succinate</i> SOLN 6 MG/0.5ML	P	QL(2.5 ML per 30 day(s) retail); AL(At least 12 yrs old)	SODIUM ACETATE POWD	NC	RX/OTC
<i>sumatriptan succinate</i> SOLN 6 MG/0.5ML	NC	QL(2.5 ML per 30 day(s) retail); AL(At least 12 yrs old)	<i>sodium acetate SOLN</i>	NC	
			<i>sodium bicarbonate IV 4.2 %, 7.5 %, 8.4 %</i>	NC	
			SODIUM BICARBONATE IV	NC	
			<i>tromethamine</i>	NC	
			TROMETHAMINE	NC	
<i>sumatriptan succinate</i> TABS 25 MG, 100 MG	NC	QL(9 EA per 31 day(s) retail); AL(At least 12 yrs old)	Calcium		
<i>sumatriptan succinate</i> TABS	P	QL(9 EA per 31 day(s) retail); AL(At least 12 yrs old)	CA PHOSPHATE DIBASIC DIHYD	NC	
TOSYMRA	NP	Brand Preferred	CALCIUM CARBONATE EXTRA LIGHT POWD XX	NC	RX/OTC
ZEMBRACE SYMTOUCH SOAJ	NP		CALCIUM CARBONATE LIGHT POWD XX	NC	RX/OTC
<i>zolmitriptan SOLN 2.5 MG</i>	NP		<i>calcium carbonate-cholecalciferol TABS 200 UNIT-500 MG, 5 MCG-500 MG, 500 MG-5 MCG</i>	C	
<i>zolmitriptan SOLN 5 MG</i>	NP	QL(6 EA per 31 day(s) retail); AL(At least 12 yrs old)	<i>calcium carbonate-cholecalciferol TABS 10 MCG-600 MG, 400 UNIT-600 MG</i>	C	QL(2 EA daily)
<i>zolmitriptan TABS</i>	NP	QL(6 EA per 31 day(s) retail)	CALCIUM CARBONATE POWD XX	NC	RX/OTC
<i>zolmitriptan TBDP</i>	NC	QL(6 EA per 31 day(s) retail)	<i>calcium carbonate TABS</i>	NC	
<i>zolmitriptan TBDP</i>	NP	QL(6 EA per 31 day(s) retail)	<i>calcium chloride (dihydrate) SOLN</i>	NC	
ZOMIG SOLN 5 MG (<i>zolmitriptan</i>)	NP	QL(6 EA per 31 day(s) retail); AL(At least 12 yrs old)	CALCIUM CHLORIDE ANHYDROUS GRAN	NC	
ZOMIG SOLN 2.5 MG (<i>zolmitriptan</i>)	NP		CALCIUM CHLORIDE DIHYDRATE GRAN	NC	
			CALCIUM CHLORIDE DIHYDRATE POWD	NC	
MINERALS & ELECTROLYTES			CALCIUM CHLORIDE SOLN	NC	
Bicarbonates			CALCIUM GLUCONATE ANHYDROUS POWD	NC	RX/OTC
SODIUM ACETATE CRYST	NC				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CALCIUM GLUCONATE MONOHYDRATE POWD	NC	RX/OTC	<i>dextrose w/ sodium chloride 0.45 %-2.5 %, 0.9 %-5 %, 10 %-0.45 %, 5 %-0.2 %, 5 %-0.225 %, 5 %-0.3 %, 5 %-0.33 %, 5 %-0.45 %, 5 %-0.9 %</i>	NC	
CALCIUM GLUCONATE-NACL SOLN 1 GM/100ML-0.8 %, 1 GM/50ML-0.675 %, 2 GM/100ML-0.675 %	NC		DEXTROSE-NACL	NC	
CALCIUM GLUCONATE POWD	NC	RX/OTC	DEXTROSE-SODIUM CHLORIDE	NC	
<i>calcium gluconate-sodium chloride SOLN</i>	NC		DRIPDROP HYDRATION PACK	NC	
<i>calcium gluconate SOLN</i>	NC		DRIPDROP PACK	NC	
CALCIUM LACTATE PENTAHYDRATE	NC		<i>electrolyte-148</i>	NC	
CALCIUM PHOSPHATE DIBASIC	NC		<i>electrolyte-a</i>	NC	
CALCIUM PHOSPHATE TRIBASIC	NC	RX/OTC	EMERGEN-C ELECTRO MIX PACK	NC	
LIQUICAL PLUS LIQD	NC		ENFAMIL ENFALYTE SOLN	C	
<i>oyster shell</i>	C		ENSURE RAPID HYDRATION PACK	NC	
Electrolyte Mixtures			EQUALYTE SOLN (<i>oral electrolytes</i>)	NC	
BIOLYTE PACK	NC		FT ELECTROLYTE SOLN	C	
BIOLYTE SOLN	C		GNP ELECTROLYTE POWDER PACK	NC	
CERALYTE 50 POTASSIUM FREE PACK	NC		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	
CERALYTE 50 PACK	NC		GOODSENSE ELECTROLYTE ADV CARE SOLN	C	
CERALYTE 70 PACK	NC		GOODSENSE ELECTROLYTE VARIETY PACK	NC	
CERALYTE 90 PACK	NC		HYDRALYTE FREEZER POPS SOLN	C	
CERASPORT ENDURANCE PACK	NC		HYDRALYTE PACK	NC	
CERASPORT EX1 PACK	NC				
CERASPORT EX1 SOLN	C				
CERASPORT PLUS PACK	NC				
CERASPORT PACK	NC				
CERASPORT SOLN	C				
DEXTROSE 5%/ELECTROLYTE #48	NC				
<i>dextrose in lactated ringers</i>	NC				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
HYDRALYTE SOLN	C		PEDIALYTE SOLN (<i>oral electrolytes</i>)	NC	
HYDRATING ELECTROLYTE PACK	NC		PEDIA-POP PACK	NC	
IONOSOL-MB IN D5W	NC		PEDIATRIC ELECTROLYTE PACK	NC	
ISOLYTE-P IN D5W	NC		PLASMA-LYTE 148 27 MEQ/L-23 MEQ/L-98 MEQ/L-140 MEQ/L-3 MEQ/L-5 MEQ/L	NC	
ISOLYTE-S	NC		<i>potassium chloride in dextrose</i>	NC	
ISOLYTE-S PH 7.4	NC		<i>potassium chloride in dextrose & sodium chloride 5 %-0.075 %-0.45 %, 5 %-0.15 %-0.225 %, 5 %-0.15 %-0.9 %, 5 %-10 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.2 %, 5 %-20 MEQ/L-0.225 %, 5 %-20 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.9 %, 5 %-30 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.9 %</i>	NC	
KCL-LACTATED RINGERS-D5W	NC		<i>potassium chloride in nacl 20 MEQ/L-0.45 %, 20 MEQ/L-0.9 %, 40 MEQ/L-0.9 %</i>	NC	
KINDERLYTE IMMUNITY PACK	NC		<i>ringer's</i>	NC	
KINDERLYTE PREMAX PACK	NC		TPN ELECTROLYTES CONC	NC	
KINDERLYTE PREMAX SOLN	C		TRUELYTE SOLN	C	
KINDERLYTE PACK	NC		Fluoride		
KINDERLYTE SOLN	C		<i>sodium fluoride CHEW</i>	C	
<i>lactated ringer's</i>	NC		<i>sodium fluoride SOLN 0.5 MG/ML, 0.5 MG/ML</i>	C	RX/OTC
LIQUID I.V. PACK	NC		SOLUVITA SOLN	C	RX/OTC
NORMALYTE PACK	NC		Magnesium		
NORMOSOL-M IN D5W	NC		MAGNESIUM CARBONATE HEAVY POWD XX	NC	RX/OTC
NORMOSOL-R 27 MEQ/L-23 MEQ/L-98 MEQ/L-140 MEQ/L-3 MEQ/L-5 MEQ/L	NC		MAGNESIUM CARBONATE POWD XX	NC	RX/OTC
NORMOSOL-R IN D5W	NC				
NORMOSOL-R PH 7.4	NC				
<i>oral electrolytes SOLN</i>	C				
PEDIALYTE ADVANCED CARE SOLN (<i>oral electrolytes</i>)	NC				
PEDIALYTE FREEZER POPS SOLN (<i>oral electrolytes</i>)	NC				
PEDIALYTE IMMUNE SUPPORT SOLN	C				
PEDIALYTE SINGLES SOLN (<i>oral electrolytes</i>)	NC				
PEDIALYTE SPARKLING RUSH PACK	NC				
PEDIALYTE PACK	NC				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MAGNESIUM CHLORIDE CRY	NC		EFFER-K	NC	
MAGNESIUM CHLORIDE POWD	NC	RX/OTC	K-TAB TBCR 10 MEQ, 20 MEQ (<i>potassium chloride</i>)	NC	
<i>magnesium chloride SOLN</i>	NC		K-TAB TBCR 10 MEQ, 20 MEQ (<i>potassium chloride</i>)	NC	
<i>magnesium oxide (mg supplement) TABS 241.5 MG, 400 MG, 400 MG</i>	C		POKONZA PACK PO	NC	
<i>magnesium sulfate IV</i>	NC		<i>potassium acetate SOLN 2 MEQ/ML</i>	NC	
MAGNESIUM SULFATE IJ 50 %	NC		POTASSIUM ACETATE SOLN 2 MEQ/ML	NC	
<i>magnesium sulfate in dextrose</i>	NC		POTASSIUM BICARBONATE GRAN	NC	
MAGOX 400 TABS (<i>magnesium oxide (mg supplement)</i>)	NC		POTASSIUM BICARBONATE POWD	NC	
SLOWMAG MG MUSCLE HLTH/RECOVER CHEW	NC		<i>potassium bicarbonate TBEF</i>	C	
Manganese			<i>potassium chloride microencapsulated crystals er</i>	C	
<i>manganese chloride</i>	NC		<i>potassium chloride CPCR 10 MEQ</i>	C	
Phosphate			<i>potassium chloride CPCR 8 MEQ</i>	C	QL(1 EA daily)
K-PHOS-NEUTRAL (<i>pot phosphate monobasic w/ sod phosphate dibasic & monobasic</i>)	NC	QL(8 EA daily)	POTASSIUM CHLORIDE CRY	NC	
<i>pot phosphate monobasic w/ sod phosphate dibasic & monobasic</i>	C	QL(8 EA daily)	POTASSIUM CHLORIDE GRAN	NC	RX/OTC
<i>potassium phosphate monobasic TABS</i>	NC		<i>potassium chloride PACK PO 20 MEQ</i>	C	
<i>potassium phosphates</i>	NC		POTASSIUM CHLORIDE POWD	NC	
POTASSIUM PHOSPHATES(71 MEQ K)	NC		<i>potassium chloride SOLN IV</i>	NC	
POTASSIUM PHOSPHATES-NACL	NC		<i>potassium chloride SOLN PO 10 %, 20 %, 10 %</i>	C	
<i>sodium phosphates (sodium phosphate dibasic & monobasic)</i>	NC		<i>potassium chloride TBCR 15 MEQ, 20 MEQ</i>	NC	
Potassium			<i>potassium chloride TBCR 8 MEQ, 10 MEQ</i>	C	
			Sodium		
			SODIUM CHLORIDE GRAN	NC	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SODIUM CHLORIDE POWD	NC		CHYMOTRYPSIN (ALPHA)	NC	
<i>sodium chloride SOLN IV 0.45 %, 0.9 %, 3 %, 4 MEQ/ML, 5 %</i>	NC		HYLENEX	NC	
SODIUM CHLORIDE SOLN IV	NC		VITRASE SOLN	NC	
Trace Minerals			Immunomodulators		
<i>chromic chloride</i>	NC		JOENJA	NC	
COPPER SULFATE CRYST	NC		REZUROCK	NP	SP
<i>cupric chloride</i>	NC		VYVGART HYTRULO SC	NC	SP
CUPRIC SULFATE GRAN	NC		Immunosuppressive Agents		
CUPRIC SULFATE POWD	NC	RX/OTC	ASTAGRAF XL CP24	NP	
MULTRY	NC		AZATHIOPRINE SODIUM	NC	
<i>selenious acid</i>	NC		AZATHIOPRINE POWD	NC	
SELENIOS ACID	NC		<i>azathioprine TABS 75 MG, 100 MG</i>	NP	
TRALEMENT	NC		<i>azathioprine TABS</i>	P	
Zinc			CELLCEPT CAPS (<i>mycophenolate mofetil</i>)	NP	
GALZIN	NC		CELLCEPT SUSR (<i>mycophenolate mofetil</i>)	NP	
<i>zinc chloride SOLN</i>	NC		CELLCEPT TABS (<i>mycophenolate mofetil</i>)	NP	
ZINC SULFATE HEPTAHYDRATE	NC	RX/OTC	<i>cyclosporine modified (for microemulsion) CAPS</i>	P	
ZINC SULFATE MONOHYDRATE	NC	RX/OTC	<i>cyclosporine modified (for microemulsion) SOLN</i>	P	
ZINC SULFATE GRAN	NC		<i>cyclosporine CAPS</i>	P	USE BRAND NAME or Authorized Generic
<i>zinc sulfate SOLN</i>	NC		<i>cyclosporine SOLN IV 50 MG/ML</i>	NC	
MISCELLANEOUS THERAPEUTIC CLASSES			ENSPRYNG	NP	SP
Chelating Agents			ENVARUS XR TB24	NP	
DEPEN TITRATABS TABS (<i>penicillamine</i>)	NC		<i>everolimus (immunosuppressant)</i>	NP	
<i>penicillamine CAPS</i>	NC		IMURAN TABS (<i>azathioprine</i>)	NP	
<i>penicillamine TABS</i>	C		LUPKYNIS	NC	SP
Enzymes			<i>mycophenolate mofetil hcl</i>	NC	
AMPHADASE	NC				
BROMELAIN POWD	NC	RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>mycophenolate mofetil CAPS</i>	NC		<i>lactated ringer's (irrigation)</i>	NC	
<i>mycophenolate mofetil CAPS</i>	P		<i>ringer's irrigation</i>	NC	
<i>mycophenolate mofetil SUSR</i>	P		<i>water for irrigation, sterile</i>	NC	
<i>mycophenolate mofetil TABS</i>	P		Misc Natural Products		
<i>mycophenolate sodium</i>	P		BLUES AWAY LQPK	NC	
<i>mycophenolate sodium</i>	NC		ELDERBERRY ZINC/VIT C/IMMUNE LOZG	NC	
MYFORTIC (<i>mycophenolate sodium</i>)	NP		MORNINGSICKLESS LOZG	NC	
MYHIBBIN SUSP	NP		SAMBUCUS ELDERBERRY IMMUNE LOZG	NC	
NEORAL CAPS (<i>cyclosporine modified (for microemulsion)</i>)	NP		SAMBUCUS ELDERBERRY VITAMIN C LOZG	NC	
NEORAL SOLN (<i>cyclosporine modified (for microemulsion)</i>)	NP		SAMBUCUS ELDERBERRY ZINC LOZG	NC	
PROGRAF CAPS (<i>tacrolimus</i>)	NP		SAMBUCUS ELDERBERRY LOZG	NC	
PROGRAF PACK	NP		STOMACH SETTLE LOZG	NC	
PROGRAF SOLN	NC		UPSPRING STOMACH SETTLE LOZG	NC	
RAPAMUNE TABS (<i>sirolimus</i>)	P		Miscellaneous Therapeutic Classes		
SANDIMMUNE CAPS (<i>cyclosporine</i>)	P		ADENOSINE-5-MONOPHOSPHATE	NC	
SANDIMMUNE SOLN PO 100 MG/ML	P	QL(8 ML daily)	ADENOSINE-5-TRIPHOSPHATE	NC	
SANDIMMUNE SOLN IV 50 MG/ML	NC		Peritoneal Dialysis Solutions		
SIMULECT	NC		DELFLEX-LC/1.5% DEXTROSE	NC	
<i>sirolimus SOLN</i>	P		DELFLEX-LC/2.5% DEXTROSE	NC	
<i>sirolimus TABS</i>	P		DELFLEX-LC/4.25% DEXTROSE	NC	
<i>tacrolimus CAPS</i>	P		DELFLEX-SM/1.5% DEXTROSE	NC	
UPLIZNA	NC	SP	DELFLEX-SM/2.5% DEXTROSE	NC	
ZORTRESS (<i>everolimus (immunosuppressant)</i>)	NP				
Irrigation Solutions					
<i>irrigation solutions, physiological</i>	NC				

Drug Name	Drug Tier	Requirements/ Limits
DIANEAL LOW CALCIUM/1.5% DEX	NC	
DIANEAL LOW CALCIUM/2.5% DEX	NC	
DIANEAL LOW CALCIUM/4.25% DEX	NC	
DIANEAL PD-2/1.5% DEXTROSE	NC	
DIANEAL PD-2/2.5% DEXTROSE	NC	
DIANEAL PD-2/4.25% DEXTROSE	NC	
EXTRANEAL	NC	
ULTRABAG/DIANEAL PD-2/1.5% DEX	NC	
ULTRABAG/DIANEAL PD-2/2.5% DEX	NC	
ULTRABAG/DIANEAL PD-2/4.25% DEX	NC	
ULTRABAG/DIANEAL/2.5% DEXTROSE	NC	
ULTRABAG/DIANEAL/4.25% DEX	NC	
Potassium Removing Agents		
LOKELMA	P	Brand Preferred
<i>sodium polystyrene sulfonate POWD</i>	P	
<i>sodium polystyrene sulfonate SUSP CO 15 GM/60ML</i>	P	
VELTASSA	P	Brand Preferred
Sclerosing Agents		
<i>sodium tetradecyl sulfate</i>	NC	
Systemic Lupus Erythematosus Agents		
SAPHNELO	NC	SP
Uremic Pruritus Agents		
KORSUVA	NC	
MOUTH/THROAT/DENTAL AGENTS		

Drug Name	Drug Tier	Requirements/ Limits
Anesthetics Topical Oral		
<i>lidocaine hcl (mouth-throat) 2 %</i>	C	QL(100 ML per fill retail)
<i>lidocaine hcl (mouth-throat) 4 %</i>	NC	
Anti-infectives - Throat		
AMPHOTERICIN B	NC	
<i>clotrimazole</i>	NC	
NYSTATIN (<i>nystatin (mouth-throat)</i>)	P	2 package(s) per fill retail
<i>nystatin (mouth-throat)</i>	P	2 package(s) per fill retail
<i>nystatin (mouth-throat)</i>	NC	2 package(s) per fill retail
ORAVIG	NC	
Antiseptics - Mouth/Throat		
BETADINE ANTISEPTIC GARGLE	NC	
BETADINE ANTISEPTIC RINSE	NC	
<i>chlorhexidine gluconate (mouth-throat)</i>	C	
PERIDEX (<i>chlorhexidine gluconate (mouth-throat)</i>)	NC	
Dental Products		
DENTA 5000 PLUS SENSITIVE GEL	NC	
FLUORIDEX SENSITIVITY RELIEF GEL	NC	
FLUORIMAX 5000 SENSITIVE GEL	NC	
FRAICHE 5000 PREVI	NC	
PREVIDENT 5000 BOOSTER PLUS PSTE DT (<i>sodium fluoride (dental)</i>)	NC	QL(113 ML per 60 day(s) retail)
PREVIDENT 5000 DRY MOUTH GEL (<i>sodium fluoride (dental)</i>)	NC	QL(113 ML per 60 day(s) retail)

Drug Name	Drug Tier	Requirements/ Limits
PREVIDENT 5000 ENAMEL PROTECT GEL	NC	
PREVIDENT 5000 KIDS PSTE DT (<i>sodium fluoride (dental)</i>)	NC	QL(113 ML per 60 day(s) retail)
PREVIDENT 5000 ORTHO DEFENSE PSTE DT (<i>sodium fluoride (dental)</i>)	NC	QL(113 ML per 60 day(s) retail)
PREVIDENT 5000 PLUS CREA (<i>sodium fluoride (dental)</i>)	NC	QL(113 GM per 60 day(s) retail)
PREVIDENT 5000 SENSITIVE GEL	NC	
PREVIDENT GEL (<i>sodium fluoride (dental)</i>)	NC	QL(113 GM per 60 day(s) retail)
SOD FLUORIDE-POTASSIUM NITRATE GEL	NC	
<i>sodium fluoride (dental) CREA</i>	C	QL(113 GM per 60 day(s) retail)
<i>sodium fluoride (dental) GEL</i>	C	QL(113 GM per 60 day(s) retail)
<i>sodium fluoride (dental) PSTE DT</i>	C	QL(113 GM per 60 day(s) retail)
<i>sodium fluoride (dental) SOLN 0.2 %</i>	NC	
SODIUM FLUORIDE 5000 ENAMEL GEL	NC	
SODIUM FLUORIDE 5000 SENSITIVE GEL	NC	
ZINC ACETATE	NC	
Steroids - Mouth/Throat/Dental		
<i>triamcinolone acetonide (mouth)</i>	C	1 package(s) per fill retail
Throat Products - Misc.		
<i>cevimeline hcl</i>	NC	
<i>pilocarpine hcl (oral) 5 MG</i>	C	QL(6 EA daily)
<i>pilocarpine hcl (oral) 7.5 MG</i>	NC	
SALAGEN 5 MG (<i>pilocarpine hcl (oral)</i>)	NC	QL(6 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
MULTIVITAMINS		
B-Complex Vitamins		
<i>b-complex vitamins CAPS</i>	C	QL(1 EA daily)
<i>b-complex vitamins TABS</i>	C	QL(1 EA daily)
B-Complex w/ Folic Acid		
<i>b-complex w/ c & folic acid CAPS</i>	C	QL(1 EA daily); RX/OTC
<i>b-complex w/ folic acid CAPS</i>	NC	RX/OTC
DIALYVITE 3000	NC	
DIALYVITE 5000	NC	
DIALYVITE 800 PLUS D WAFR	NC	
DIALYVITE/ZINC	NC	
NEPHPLEX RX	NC	
VITAL-D RX	NC	
Multiple Vitamins w/ Calcium		
<i>multiple vitamins w/ calcium TABS</i>	C	QL(1 EA daily)
ONE-A-DAY WOMENS FORMULA TABS (<i>multiple vitamins w/ calcium</i>)	NC	QL(1 EA daily)
Multiple Vitamins w/ Iron		
DAVIMET-IRON CHEW	NC	
Multiple Vitamins w/ Minerals		
ACTIVNUTRIENTS PERFORMANCE CAPS	C	QL(1 EA daily); RX/OTC
ACTIVNUTRIENTS W/O IRON CAPS	C	QL(1 EA daily); RX/OTC
ACTIVNUTRIENTS CAPS	C	QL(1 EA daily); RX/OTC
ALIVE EVERYDAY IMMUNE HEALTH CAPS	C	QL(1 EA daily); RX/OTC
ALIVE HAIR, SKIN & NAILS CAPS	C	QL(1 EA daily); RX/OTC
APETIBEX CAPS	C	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
APPE-CURB CAPS	C	QL(1 EA daily); RX/OTC	DEKAS PLUS OCEAN CAPS	C	QL(1 EA daily); RX/OTC
BARIATRIC MULTIVITAMINS/IRON CAPS	C	QL(1 EA daily); RX/OTC	DEKAS PLUS CAPS	C	QL(1 EA daily); RX/OTC
BARIATRIC MULTIVITAMINS CAPS	C	QL(1 EA daily); RX/OTC	DEPLIN MA CAPS	C	QL(1 EA daily); RX/OTC
BIO-35 GLUTEN-FREE CAPS	C	QL(1 EA daily); RX/OTC	DEXATLAN CAPS	C	QL(1 EA daily); RX/OTC
BIO-35 IRON FREE CAPS	C	QL(1 EA daily); RX/OTC	EYE HEALTH AREDS 2 CAPS	C	QL(1 EA daily); RX/OTC
BIOCAL CAPS	C	QL(1 EA daily); RX/OTC	EYE HEALTH CAPS	C	QL(1 EA daily); RX/OTC
BIOTECT PLUS CAPS	C	QL(1 EA daily); RX/OTC	EYE MULTIVITAMIN CAPS	C	QL(1 EA daily); RX/OTC
BONEUP 3 PER DAY CAPS	C	QL(1 EA daily); RX/OTC	FOLAGENT DHA CAPS	C	QL(1 EA daily); RX/OTC
BONEUP CAPS	C	QL(1 EA daily); RX/OTC	FOLAMED DHA CAPS	C	QL(1 EA daily); RX/OTC
BOOSTNOW IMMUNE SUPPORT CAPS	C	QL(1 EA daily); RX/OTC	FT EYE HEALTH CAPS	C	QL(1 EA daily); RX/OTC
CELEBRATE MULTI-COMplete 18 CAPS	C	QL(1 EA daily); RX/OTC	GENADEK STEP 1 CAPS	C	QL(1 EA daily); RX/OTC
CELEBRATE MULTI-COMplete 36 CAPS	C	QL(1 EA daily); RX/OTC	GENADEK STEP 2 CAPS	C	QL(1 EA daily); RX/OTC
CELEBRATE MULTI-COMplete 45 CAPS	C	QL(1 EA daily); RX/OTC	HAIR/SKIN/NAILS CAPS	C	QL(1 EA daily); RX/OTC
CELEBRATE MULTI-COMplete 60 CAPS	C	QL(1 EA daily); RX/OTC	HEALTHY EYES SUPERVISION 2 CAPS	C	QL(1 EA daily); RX/OTC
CHOICEFUL MULTIVITAMIN CAPS	C	QL(1 EA daily); RX/OTC	IMMUNE ESSENTIALS DAILY CAPS	C	QL(1 EA daily); RX/OTC
CULTURELLE PROBIOTIC MEN DAILY CAPS	C	QL(1 EA daily); RX/OTC	MENATROL CAPS	C	QL(1 EA daily); RX/OTC
CVS ADULT 50+ EYE HEALTH CAPS	C	QL(1 EA daily); RX/OTC	MENS 50+ ADVANCED CAPS	C	QL(1 EA daily); RX/OTC
CVS EYE HEALTH ADULT 50+ CAPS	C	QL(1 EA daily); RX/OTC	MOOD FOOD ES CAPS	C	QL(1 EA daily); RX/OTC
CVS IMMUNE SUPPORT CAPS	C	QL(1 EA daily); RX/OTC	MOOD FOOD CAPS	C	QL(1 EA daily); RX/OTC
CVS VISION HEALTH CAPS	C	QL(1 EA daily); RX/OTC	MULTIA CAPS	C	QL(1 EA daily); RX/OTC
DECUBI-VITE CAPS	C	QL(1 EA daily); RX/OTC	<i>multiple vitamins w/ minerals CAPS</i>	C	QL(1 EA daily); RX/OTC
			MVW COMPLETE FORMULATION D3000 CAPS	C	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MVW COMPLETE FORMULATION D5000 CAPS	C	QL(1 EA daily); RX/OTC	PROTEGRA CAPS	C	QL(1 EA daily); RX/OTC
MVW COMPLETE FORMULATION MINIS CAPS	C	QL(1 EA daily); RX/OTC	QC OCUHEALTH VISION SUPPORT 2 CAPS	C	QL(1 EA daily); RX/OTC
MVW COMPLETE FORMULATION CAPS	C	QL(1 EA daily); RX/OTC	REMEDIENT CAPS	C	QL(1 EA daily); RX/OTC
MVW MODULATOR FORMULATION MINI CAPS	C	QL(1 EA daily); RX/OTC	SKIN HAIR & NAILS ADVANCED CAPS	C	QL(1 EA daily); RX/OTC
MVW MODULATOR FORMULATION CAPS	C	QL(1 EA daily); RX/OTC	SUPER ANTIOXIDANT CAPS	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	SUPPORT-500 CAPS	C	QL(1 EA daily); RX/OTC
OCUVITE ADULT 50+ CAPS	C	QL(1 EA daily); RX/OTC	THERAMILL FORTE CAPS	C	QL(1 EA daily); RX/OTC
OCUVITE ADULT FORMULA CAPS	C	QL(1 EA daily); RX/OTC	THERANATAL LACTATION ONE CAPS	C	QL(1 EA daily); RX/OTC
OCUVITE-LUTEIN CAPS	C	QL(1 EA daily); RX/OTC	VISION HEALTH CAPS	C	QL(1 EA daily); RX/OTC
ONE-DAILY MULTI CAPS CAPS	C	QL(1 EA daily); RX/OTC	VISION OPTIMIZER CAPS	C	QL(1 EA daily); RX/OTC
PRESCRIPTION SUPPORT MULTIVIT CAPS	C	QL(1 EA daily); RX/OTC	VISTA ADVANCED AREDS2 FORMULA CAPS	C	QL(1 EA daily); RX/OTC
PRESERVISION AREDS 2+MULTI VIT CAPS	C	QL(1 EA daily); RX/OTC	VISTA ADVANCED DRY EYE FORMULA CAPS	C	QL(1 EA daily); RX/OTC
PRESERVISION AREDS 2 CAPS	C	QL(1 EA daily); RX/OTC	VITABEX PLUS CAPS	C	QL(1 EA daily); RX/OTC
PRESERVISION AREDS CAPS	C	QL(1 EA daily); RX/OTC	VITABEX CAPS	C	QL(1 EA daily); RX/OTC
PRESERVISION/LUTEIN CAPS	C	QL(1 EA daily); RX/OTC	VITEYES CLASSIC ADVANCED CAPS	C	QL(1 EA daily); RX/OTC
PROBIOTICS + BARIATRIC MULTI CAPS	C	QL(1 EA daily); RX/OTC	VITEYES CLASSIC MACULAR SUPPOR CAPS	C	QL(1 EA daily); RX/OTC
PRORENAL + D W/ OMEGA-3 CAPS	C	QL(1 EA daily); RX/OTC	VITEYES CLASSIC+OMEGA-3 CAPS	C	QL(1 EA daily); RX/OTC
PROTECT CARDIO AF CAPS	C	QL(1 EA daily); RX/OTC	Multiple Vitamins w/ Minerals & Fluoride-Iron-Folic Acid		
PROTECT PLUS SO CAPS	C	QL(1 EA daily); RX/OTC	QUFLORA FE	NC	
			Multivitamins		
			ALTRIXA TABS	C	QL(1 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
AMLADEX TABS	C	QL(1 EA daily); RX/OTC	QUINTABS TABS	C	QL(1 EA daily); RX/OTC
DAILY MULTIPLE VITAMINS TABS	C	QL(1 EA daily); RX/OTC	RELCARE TABS	C	QL(1 EA daily); RX/OTC
DAVIMET-M CHEW	C	QL(1 EA daily); RX/OTC	STRESS FORMULA/ZINC/ENERGY TABS	C	QL(1 EA daily); RX/OTC
DERMACINRX DAVIMET 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
FOLCYTEINE TABS	C	QL(1 EA daily); RX/OTC	TM-DAILY VITE TABS	C	QL(1 EA daily); RX/OTC
GENICIN VITA-Q TABS	C	QL(1 EA daily); RX/OTC	TRUE MULTIVITAMIN TABS	C	QL(1 EA daily); RX/OTC
HIGH POTENCY MULTIVITAMIN TABS	C	QL(1 EA daily); RX/OTC	Ped Multi Vitamins w/FI & FE		
MINCORA TABS	C	QL(1 EA daily); RX/OTC	FLORAFOL FE PEDIATRIC SOLN	NC	QL(50 ML per fill retail); AL(Up to 21 yrs old)
MULTI VITAMIN W/D-3 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 TABS	C	QL(1 EA daily); RX/OTC	POLY-VI-FLOR/IRON CHEW	NC	
<i>multiple vitamin TABS</i>	C	QL(1 EA daily); RX/OTC	POLY-VI-FLOR/IRON SUSP	NC	RX/OTC
MULTIVITAMIN ADULT TABS	C	QL(1 EA daily); RX/OTC	QUFLORA FE PEDIATRIC LIQD	NC	
MULTIVITAMIN TABS	C	QL(1 EA daily); RX/OTC	Ped MV w/ Fluoride		
NEOMULTIVITE TABS	C	QL(1 EA daily); RX/OTC	DAVIMET-FLUORIDE CHEW	NC	
OMNICAP TABS	C	QL(1 EA daily); RX/OTC	POLY-VI-FLOR SUSP	NC	
ONE DAILY ESSENTIALS TABS	C	QL(1 EA daily); RX/OTC	QUFLORA GUMMIES CHEW	NC	
ONE DAILY ESSENTIAL TABS	C	QL(1 EA daily); RX/OTC	TRI-VI-FLOR	NC	
ONE VITE DAILY MULTIVITAMIN TABS	C	QL(1 EA daily); RX/OTC	TRI-VI-FLORO	NC	
ONE-A-DAY ADULT VITACRAVES+DHA CHEW	C	QL(1 EA daily); RX/OTC	Ped MV w/ Iron		
ONE-A-DAY ESSENTIAL TABS (<i>multiple vitamin</i>)	NC	QL(1 EA daily); RX/OTC	BPROTECTED PEDIA POLY-VITE/FE SOLN	C	QL(60 ML per fill retail)
ONE-A-DAY MENS TABS (<i>multiple vitamin</i>)	NC	QL(1 EA daily); RX/OTC	ENFAMIL POLY-VI-SOL-IRON SOLN 11 MG/ML	C	QL(60 ML per fill retail)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MULTIVITAMIN DROPS/IRON SOLN	C	QL(60 ML per fill retail)	OB COMPLETE PREMIER	NC	
MULTIVITAMIN INFANT & TODDLER SOLN	C	QL(60 ML per fill retail)	OB COMPLETE/DHA	NC	
POLY-VITE/IRON SOLN	C	QL(60 ML per fill retail)	OB COMPLETE TABS	NC	
Pediatric Multiple Vitamins			PNV-OMEGA	NC	
BPROTECTED PEDIA POLY-VITE SOLN PO	C	QL(50 ML per fill retail)	PREMESISRX	NC	
INFUVITE PEDIATRIC SOLN IV	NC		PRENA1 PEARL	NC	
MULTIVITAMIN INFANT & TODDLER SOLN PO	C	QL(50 ML per fill retail)	<i>prenatal vit w/ ferrous fumarate-l methylfolate-folic acid</i>	NC	
PC PEDIATRIC POLY-VITAMIN DROP SOLN PO	C	QL(50 ML per fill retail)	<i>prenatal vit w/ iron carbonyl-folic acid TABS 120 MG-10 MG-1.25 MG-315 UNIT-15 MCG-3.4 MG-10 MG-1 MG-2 MG-15 MG-10 MG-20 UNIT-2100 UNIT-50 MG, 120 MG-3 MG-30 MCG-1 MG-400 UNIT-8 MCG-3 MG-20 MG-7 MG-3 MG-100 MG-15 MG-3 MG-4000 UNIT-200 MG-150 MCG-30 UNIT-29 MG</i>	NC	
POLY-VI-SOL SOLN PO	C	QL(50 ML per fill retail)	<i>prenatal without a w/ fe fumarate-l methylfolate-fa-dha</i>	NC	
POLY-VITA SOLN PO	C	QL(50 ML per fill retail)	PRENATE	NC	
POLY-VITE PEDIATRIC SOLN PO	C	QL(50 ML per fill retail)	PRENATE AM	NC	
Prenatal Vitamins			PRENATE DHA 90 MG-26 MG-400 MCG-400 UNIT-25 MCG-155 MG-50 MG-300 MG-40 UNIT-600 MCG-18 MG	NC	
CITRANATAL B-CALM 120 MG-25 MG-1 MG-400 UNIT-120 MG-20 MG	NC		PRENATE ELITE 75 MG-21 MG-330 MCG-400 MCG-600 UNIT-13 MCG-3.5 MG-21 MG-3 MG-155 MG-25 MG-15 MG-1.5 MG-2600 UNIT-150 MCG-40 UNIT-600 MCG-20 MG	NC	
CITRANATAL MEDLEY	NC		PRENATE ENHANCE	NC	
C-NATE DHA CAPS	NC				
COMPLETE NATAL DHA	NC				
CONCEPT DHA	NC				
DERMACINRX PRETRATE TABS	NC				
ENBRACE HR	NC				
FOLIVANE-OB	NC				
NATAL PNV TABS	NC				
NEO-VITAL RX TABS	NC				
NESTABS	NC				
NESTABS DHA	NC				
NESTABS ONE	NC				
OB COMPLETE ONE	NC				
OB COMPLETE PETITE	NC				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PRENATE ESSENTIAL 90 MG-26 MG-280 MCG-400 MCG-220 UNIT-13 MCG-155 MG-50 MG-300 MG-150 MCG-10 UNIT-40 MG-600 MCG-18 MG	NC		WESTGEL DHA	NC	
PRENATE MINI 60 MG-26 MG-280 MCG-400 MCG-1000 UNIT-13 MCG-80 MG-25 MG-350 MG-18 MG-150 MCG-10 UNIT-600 MCG-25 MG	NC		Specialty Vitamins Products		
PRENATE PIXIE	NC		ADRENAL MANAGER CAPS	NC	RX/OTC
PRENATE RESTORE	NC		ADRENALIV CAPS	NC	RX/OTC
PRENATVITE COMPLETE TABS	NC		ADRENOID CAPS	NC	RX/OTC
PRENATVITE PLUS TABS	NC		BILBERRY PLUS CAPS	NC	RX/OTC
PRIMACARE	NC		CARDIOPRESS CAPS	NC	RX/OTC
RELNATE DHA CAPS	NC		CHOLASE CONTROL CAPS	NC	RX/OTC
SELECT-OB+DHA MISC	C	QL(1 EA daily)	COLLAGEN ULTRA CAPS	NC	RX/OTC
SELECT-OB CHEW	NC		CORTICARE B CAPS	NC	RX/OTC
TARON-C DHA	NC		FEMQUIL CAPS	NC	RX/OTC
TRISTART DHA	NC		GLYCOTROL COMPLETE CAPS	NC	RX/OTC
VIRT-NATE DHA CAPS	NC		GLYCOTROL CAPS	NC	RX/OTC
VIRT-PN DHA	NC		HEART SAVIOR CAPS	NC	RX/OTC
VITAFOL FE+	NC		IMMUNERX CAPS	NC	RX/OTC
VITAFOL GUMMIES	NC		IMMUNICARE CAPS	NC	RX/OTC
VITAFOL ULTRA	NC		INFLAMEX CAPS	NC	RX/OTC
VITAFOL-OB+DHA MISC	NC		INULOSE BLOOD SUGAR SUPPORT CAPS	NC	RX/OTC
VITAFOL-ONE CAPS	C	QL(1 EA daily)	LIPOTRIAD VISION SUPPORT PLUS CAPS	NC	RX/OTC
VITAMEDMD ONE RX/QUATREFOLIC	NC		LIPOTRIAD VISION SUPPORT CAPS	NC	RX/OTC
VITAPEARL	NC		LIPOTRIAD VISIONARY CAPS	NC	RX/OTC
VIVA DHA CAPS	NC		MEDCAPS DPO CAPS	NC	RX/OTC
WESCAP-C DHA	NC		MEDCAPS GI CAPS	NC	RX/OTC
WESCAP-PN DHA	NC		MEDCAPS IS CAPS	NC	RX/OTC
WESNATAL DHA COMPLETE	NC		MEDCAPS T3 CAPS	NC	RX/OTC
WESNATE DHA CAPS	NC		MEMORALL CAPS	NC	RX/OTC
			METHYL PROTECT CAPS	NC	RX/OTC
			METHYL-GUARD PLUS CAPS	NC	RX/OTC
			METHYL-GUARD CAPS	NC	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MM BIOTIN/KERATIN CAPS	NC	RX/OTC	<i>cyclobenzaprine hcl TABS 7.5 MG</i>	P	QL(4 EA daily)
NITRIVIA CAPS	NC	RX/OTC	<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	NC	QL(3 EA daily)
PRO HERS RX CAPS	NC	RX/OTC	<i>cyclobenzaprine hcl TABS 7.5 MG</i>	NP	QL(4 EA daily)
PRO HIS RX CAPS	NC	RX/OTC	<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	P	QL(3 EA daily)
PRO PCOS RX CAPS	NC	RX/OTC	FLEQSUVY SUSP (<i>baclofen</i>)	NP	
RETAIN VISION CAPS	NC	RX/OTC	LYVISPAH PACK	NP	
SYNERTROPIN CAPS	NC	RX/OTC	<i>metaxalone</i>	NP	
Vitamin Mixtures			<i>metaxalone</i>	NC	
<i>niacinamide w/ zinc-copper-methylfolate-se-cr</i>	NC		METAXALONE 640 MG	NP	
VITAMIN D2 + K1 SOLN	NC		<i>methocarbamol SOLN</i>	NC	
Vitamins w/ Lipotropics			<i>methocarbamol TABS 1000 MG</i>	NP	
ACTIFLOVIT EAR HEALTH TABS	NC		<i>methocarbamol TABS</i>	P	
<i>vitamins w/ lipotropics TABS</i>	NC		ORPHENADRINE CITRATE POWD	NC	
MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms			<i>orphenadrine citrate SOLN 30 MG/ML</i>	NC	
Central Muscle Relaxants			<i>orphenadrine citrate TB12</i>	P	QL(2 EA daily)
AMRIX CP24 (<i>cyclobenzaprine hcl</i>)	NP		SOMA TABS (<i>carisoprodol</i>)	NP	
BACLOFEN (BULK) SOLN XX	NC		<i>tizanidine hcl CAPS</i>	NC	
BACLOFEN REFILL KIT-SYNCHROMED KIT IT 40 MG/20ML	NC		<i>tizanidine hcl CAPS</i>	NP	
BACLOFEN POWD	NC		<i>tizanidine hcl TABS</i>	P	
<i>baclofen SOLN PO 5 MG/5ML, 10 MG/5ML</i>	NP	AL(Up to 12 yrs old)	ZANAFLEX CAPS (<i>tizanidine hcl</i>)	NP	
<i>baclofen SUSP</i>	NP		ZANAFLEX TABS 4 MG (<i>tizanidine hcl</i>)	NP	
<i>baclofen TABS</i>	P		Direct Muscle Relaxants		
CARISOPRODOL POWD	NC		DANTRIUM CAPS 25 MG (<i>dantrolene sodium</i>)	NP	
<i>carisoprodol TABS</i>	NP		<i>dantrolene sodium CAPS</i>	P	
<i>chlorzoxazone TABS</i>	P		<i>dantrolene sodium CAPS</i>	NC	
<i>chlorzoxazone TABS 375 MG, 750 MG</i>	NP		<i>dantrolene sodium SOLR</i>	NC	
<i>cyclobenzaprine hcl CP24</i>	NP		RYANODEX SUSR	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Muscle Relaxant Combinations			<i>ipratropium bromide (nasal) 0.06 %</i>	P	QL(15 ML per 31 day(s) retail)
<i>orphenadrine w/ aspirin & caff</i>	NP		Nasal Steroids		
NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus			<i>budesonide (nasal)</i>	C	QL(9 ML per 31 day(s) retail)
Nasal Agent Combinations			<i>flunisolide (nasal)</i>	NP	QL(25 ML per 31 day(s) retail)
<i>azelastine hcl-fluticasone propionate SUSP</i>	NP		<i>fluticasone propionate (nasal) SUSP</i>	P	1 package(s) per fill retail; RX/OTC
DYMISTA SUSP (<i>azelastine hcl-fluticasone propionate</i>)	NP		<i>fluticasone propionate (nasal) SUSP</i>	NC	1 package(s) per fill retail; RX/OTC
RYALTRIS	NP		<i>mometasone furoate (nasal) SUSP</i>	P	RX/OTC
Nasal Agents - Misc.			NASACORT ALLERGY 24HR AERO (<i>triamcinolone acetonide (nasal)</i>)	NC	QL(17 ML per 31 day(s) retail); AL(At least 2 yrs old)
OCEAN NASAL SPRAY SOLN (<i>saline</i>)	NC	1 package(s) per fill retail	OMNARIS SUSP	NP	
<i>saline SOLN 0.65 %</i>	C	1 package(s) per fill retail	QNASL	NP	
Nasal Anesthetics			QNASL CHILDRENS	NP	
COCAINE HCL 40 MG/ML	NC		SINUVA IMPL	NC	
GOPRELTO	NC		<i>triamcinolone acetonide (nasal) AERO</i>	C	QL(17 ML per 31 day(s) retail); AL(At least 2 yrs old)
NUMBRINO	NC		XHANCE EXHU	NP	
Nasal Antiallergy			ZETONNA AERS	NP	
<i>azelastine hcl 0.15 %</i>	NP	1 package(s) per 31 day(s) retail; RX/OTC	Sympathomimetic Decongestants		
<i>azelastine hcl 0.1 %, 137 MCG/SPRAY</i>	P	1 package(s) per 31 day(s) retail	PHENYLEPHRINE HCL CRYST	NC	
<i>cromolyn sodium (nasal) 5.2 MG/ACT</i>	C	QL(26 ML per 31 day(s) retail)	PHENYLEPHRINE HCL POWD	NC	
NASALCROM (<i>cromolyn sodium (nasal)</i>)	NC	QL(26 ML per 31 day(s) retail)	PHENYLPROPANOLAMINE HCL	NC	
<i>olopatadine hcl (nasal)</i>	NP		PSEUDOEPHEDRINE HCL CRYST	NC	
PATANASE (<i>olopatadine hcl (nasal)</i>)	NC		PSEUDOEPHEDRINE HCL POWD	NC	
Nasal Anticholinergics			<i>pseudoephedrine hcl TABS</i>	C	
<i>ipratropium bromide (nasal) 0.03 %</i>	P	QL(31 ML per 31 day(s) retail)			

Drug Name	Drug Tier	Requirements/ Limits
<i>pseudoephedrine hcl TB12</i>	C	QL(2 EA daily)
NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles		
ALS Agents		
RILUTEK TABS (<i>riluzole</i>)	NC	PA
<i>riluzole</i> TABS	C	PA
Depolarizing Muscle Relaxants		
ANECTINE SOLN	NC	
<i>succinylcholine chloride SOLN</i>	NC	
SUCCINYLCHOLINE CHLORIDE SOLN	NC	
SUCCINYLCHOLINE CHLORIDE SOSY IJ 100 MG/5ML	NC	
Muscular Dystrophy Agents		
AMONDYS 45	NC	SP
VILTEPSO	NC	SP
VYONDYS 53	C	SP; PA
Neuromuscular Blocking Agent - Neurotoxins		
BOTOX IJ	NC	SP
DYSPORE	NC	SP
XEOMIN	NC	SP
Nondepolarizing Muscle Relaxants		
<i>atracurium besylate 50 MG/5ML, 100 MG/10ML</i>	NC	
<i>cisatracurium besylate SOLN</i>	NC	
NIMBEX SOLN (<i>cisatracurium besylate</i>)	NC	
<i>rocuronium bromide SOLN</i>	NC	
<i>vecuronium bromide SOLR</i>	NC	
Spinal Muscular Atrophy Agents (SMA)		
EVRYSDI	NC	SP

Drug Name	Drug Tier	Requirements/ Limits
SPINRAZA	NC	SP
ZOLGENSMA 10.1-10.5 KG	NC	SP
ZOLGENSMA 10.6-11.0 KG	NC	SP
ZOLGENSMA 11.1-11.5 KG	NC	SP
ZOLGENSMA 11.6-12.0 KG	NC	SP
ZOLGENSMA 12.1-12.5 KG	NC	SP
ZOLGENSMA 12.6-13.0 KG	NC	SP
ZOLGENSMA 13.1-13.5 KG	NC	SP
ZOLGENSMA 2.6-3.0 KG	NC	SP
ZOLGENSMA 3.1-3.5 KG	NC	SP
ZOLGENSMA 3.6-4.0 KG	NC	SP
ZOLGENSMA 4.1-4.5 KG	NC	SP
ZOLGENSMA 4.6-5.0 KG	NC	SP
ZOLGENSMA 5.1-5.5 KG	NC	SP
ZOLGENSMA 5.6-6.0 KG	NC	SP
ZOLGENSMA 6.1-6.5 KG	NC	SP
ZOLGENSMA 6.6-7.0 KG	NC	SP
ZOLGENSMA 7.1-7.5 KG	NC	SP
ZOLGENSMA 7.6-8.0 KG	NC	SP
ZOLGENSMA 8.1-8.5 KG	NC	SP
ZOLGENSMA 8.6-9.0 KG	NC	SP
ZOLGENSMA 9.1-9.5 KG	NC	SP
ZOLGENSMA 9.6-10.0 KG	NC	SP
NUTRIENTS		
Carbohydrates		
DEXTROSE ANHYDROUS GRAN	NC	
DEXTROSE ANHYDROUS POWD	NC	RX/OTC
DEXTROSE MONOHYDRATE POWD	NC	RX/OTC
DEXTROSE POWD	NC	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>dextrose SOLN 5 %, 10 %, 50 %, 70 %, 250 MG/ML</i>	NC		CLINIMIX E/DEXTROSE (5/15)	NC	
DEXTROSE SOLN	NC		CLINIMIX E/DEXTROSE (5/20)	NC	
FRUCTOSE GRAN	NC	RX/OTC	CLINIMIX E/DEXTROSE (8/10)	NC	
FRUCTOSE POWD	NC		CLINIMIX E/DEXTROSE (8/14)	NC	
Lipids			CLINIMIX/DEXTROSE (4.25/10)	NC	
CLINOLIPID	NC		CLINIMIX/DEXTROSE (4.25/5)	NC	
INTRALIPID	NC		CLINIMIX/DEXTROSE (5/15)	NC	
INTRALIPID	NC		CLINIMIX/DEXTROSE (5/20)	NC	
NUTRILIPID	NC		CLINIMIX/DEXTROSE (6/5)	NC	
OMEGAVEN	NC		CLINIMIX/DEXTROSE (8/10)	NC	
SMOFLIPID	NC		CLINIMIX/DEXTROSE (8/14)	NC	
Lipotropics			DL-ALANINE POWD	NC	RX/OTC
CHOLINE BITARTRATE CRYST	NC		DL-LEUCINE POWD XX	NC	RX/OTC
CHOLINE BITARTRATE POWD	NC		DL-METHIONINE POWD XX	NC	RX/OTC
LECITHIN GRAN XX	NC	RX/OTC	DL-PHENYLALANINE POWD	NC	RX/OTC
PREGNITUDE	NC		ELCYS	NC	
Misc. Nutritional Substances			GLUTAMINE POWD XX	NC	RX/OTC
<i>omega-3 fatty acids CAPS 1000 MG</i>	C	QL(6 EA daily)	GLUTATHIONE-L REDUCED POWD	NC	RX/OTC
Protein-Carbohydrate-Lipid Combinations			GLUTATHIONE-L POWD	NC	RX/OTC
KABIVEN	NC		GLUTATHIONE POWD	NC	RX/OTC
PERIKABIVEN	NC		L-ALANINE POWD	NC	RX/OTC
Proteins			L-ARGININE POWD XX	NC	RX/OTC
ALANINE POWD	NC	RX/OTC	L-CYSTINE POWD	NC	RX/OTC
<i>amino acid infusion SOLN 15 %</i>	NC		LEUCINE POWD XX	NC	RX/OTC
AMINOSYN-PF 7% SOLN	NC		L-GLUTAMIC ACID	NC	RX/OTC
CLINIMIX E/DEXTROSE (2.75/5)	NC		L-GLUTAMINE CRYST	NC	
CLINIMIX E/DEXTROSE (4.25/10)	NC				
CLINIMIX E/DEXTROSE (4.25/5)	NC				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
L-GLUTAMINE POWD XX	NC	RX/OTC	REFRESH DIGITAL PF	NC	
L-GLUTATHIONE CRYST	NC		REFRESH OPTIVE ADVANCED PF	NC	
L-HISTIDINE	NC	RX/OTC	REFRESH OPTIVE MEGA-3	NC	
L-HISTIDINE MONOHYDROCHLORIDE CRYST	NC		REFRESH RELIEVA PF SOLN	NC	
L-HISTIDINE MONOHYDROCHLORIDE POWD	NC		SYSTANE COMPLETE PF	NC	
L-ISOLEUCINE POWD XX	NC	RX/OTC	SYSTANE PRO PF	NC	
L-LEUCINE POWD XX	NC	RX/OTC	<i>white petrolatum-mineral oil</i>	C	1 package(s) per fill retail
L-METHIONINE POWD XX	NC	RX/OTC	Beta-blockers - Ophthalmic		
L-ORNITHINE POWD	NC		<i>betaxolol hcl (ophth) SOLN</i>	P	1 package(s) per 31 day(s) retail
L-PHENYLALANINE POWD	NC	RX/OTC	BETIMOL	NP	
L-PROLINE POWD	NC	RX/OTC	BETIMOL (<i>timolol</i>)	NP	
L-THREONINE CRYST	NC		BETOPTIC-S SUSP	NP	
L-TRYPTOPHAN POWD	NC	RX/OTC	<i>brimonidine tartrate-timolol maleate</i>	NP	Brand Preferred
L-TYROSINE POWD XX	NC	RX/OTC	<i>carteolol hcl (ophth)</i>	P	1 max fill(s) per 31 day(s) retail
L-VALINE CRYST	NC		COMBIGAN (<i>brimonidine tartrate-timolol maleate</i>)	P	Brand Preferred
L-VALINE POWD XX	NC	RX/OTC	COSOPT (<i>dorzolamide hcl-timolol maleate</i>)	NP	QL(10 ML per 31 day(s) retail)
METHIONINE POWD XX	NC	RX/OTC	COSOPT PF (<i>dorzolamide hcl-timolol maleate</i>)	NP	
PROSOL SOLN	NC		<i>dorzolamide hcl-timolol maleate</i>	P	QL(10 ML per 31 day(s) retail)
TAURINE LIQD	NC		<i>dorzolamide hcl-timolol maleate</i>	NP	
TAURINE POWD	NC		ISTALOL SOLN (<i>timolol maleate (ophth)</i>)	NP	
THREONINE POWD XX	NC	RX/OTC	<i>levobunolol hcl 0.5 %</i>	P	QL(15 ML per 31 day(s) retail)
TRYPTOPHAN POWD	NC	RX/OTC	<i>timolol</i>	NP	
VALINE POWD XX	NC	RX/OTC	<i>timolol maleate (ophth) SOLG 0.25 %</i>	NC	
OPHTHALMIC AGENTS - Drugs to Treat the Eye					
Artificial Tears and Lubricants					
BION TEARS PF	NC				
<i>dextran 70-hypromellose 0.3 %-0.1 %</i>	NC				
FRESHKOTE PF	NC				
LACRISERT	NC				
<i>polyvinyl alcohol 1.4 %</i>	C				
REFRESH	NC				

Drug Name	Drug Tier	Requirements/ Limits
<i>timolol maleate (ophth) SOLG</i>	P	
<i>timolol maleate (ophth) SOLN 0.5 %</i>	NP	
<i>timolol maleate (ophth) SOLN</i>	P	QL(15 ML per 31 day(s) retail)
<i>timolol maleate (ophth) SOLN</i>	NC	QL(15 ML per 31 day(s) retail)
TIMOPTIC OCUDOSE SOLN (<i>timolol maleate (ophth)</i>)	NP	QL(15 EA per 31 day(s) retail)
TIMOPTIC SOLN (<i>timolol maleate (ophth)</i>)	NC	QL(15 ML per 31 day(s) retail)
TIMOPTIC-XE SOLG (<i>timolol maleate (ophth)</i>)	NC	
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 % (<i>atropine sulfate (ophthalmic)</i>)	NC	
ATROPINE SULFATE SOLN 1 %	C	
CYCLOGYL 0.5 %	C	
CYCLOGYL 2 %	C	1 package(s) per 31 day(s) retail
CYCLOGYL (<i>cyclopentolate hcl</i>)	NC	
CYCLOMYDRIL	NC	
<i>cyclopentolate hcl 1 %</i>	C	
ISOPTO ATROPINE SOLN	C	
MYDRIACYL SOLN (<i>tropicamide</i>)	NC	
<i>phenylephrine hcl (mydriatic) SOLN</i>	NC	

Drug Name	Drug Tier	Requirements/ Limits
TROPICAMIDE POWD	NC	
<i>tropicamide SOLN</i>	C	
Miotics		
MIOCHOL-E SOLR	NC	
MIOSTAT IO	NC	
PHOSPHOLINE IODIDE	NC	
<i>pilocarpine hcl SOLN 1 %, 2 %, 4 %</i>	C	
VUITY SOLN	NC	
Ophthalmic - Angiogenesis Inhibitors		
EYLEA SOSY	C	SP; PA
VABYSMO SOLN	NC	SP
Ophthalmic Adrenergic Agents		
ALPHAGAN P (<i>brimonidine tartrate</i>)	P	Brand Preferred
<i>apraclonidine hcl</i>	NP	
<i>brimonidine tartrate 0.1 %, 0.15 %</i>	NP	Brand Preferred
<i>brimonidine tartrate 0.2 %</i>	P	1 package(s) per 31 day(s) retail
IOPIDINE	NP	
IOPIDINE	NC	
LUMIFY	NC	
SIMBRINZA	NP	
Ophthalmic Anti-infectives		
AZASITE	NP	
<i>bacitracin (ophthalmic)</i>	P	QL(4 GM per 31 day(s) retail)
<i>bacitracin-polymyxin b (ophth)</i>	P	QL(4 GM per 31 day(s) retail)
BESIVANCE	NP	
BETADINE OPHTHALMIC PREP	NC	
CILOXAN OINT	NP	1 package(s) per fill retail
<i>ciprofloxacin hcl (ophth) SOLN</i>	P	1 package(s) per fill retail
ERYTHROMYCIN	P	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>erythromycin (ophth)</i>	P		<i>naphazoline w/ pheniramine 0.3 %-0.025 %</i>	C	QL(15 ML per 31 day(s) retail)
<i>gatifloxacin (ophth)</i>	NP		<i>naphazoline w/ pheniramine 0.315 %-0.027 %</i>	C	
<i>gentamicin sulfate (ophth) SOLN</i>	P	2 package(s) per fill retail	<i>naphazoline-glycerin 0.25 %-0.012 %, 0.5 %-0.03 %</i>	NC	
<i>levofloxacin (ophth) 0.5 %</i>	NP		NAPHCN-A (<i>naphazoline w/ pheniramine</i>)	NC	QL(15 ML per 31 day(s) retail)
<i>moxifloxacin hcl (ophth) SOLN OP</i>	P	QL(3 ML per fill retail)	OPCON-A (<i>naphazoline w/ pheniramine</i>)	NC	
NATACYN	NC		<i>tetrahydrozoline hcl (ophth) 0.05 %</i>	C	1 package(s) per 31 day(s) retail
<i>neomycin-bacitracin zn-polymyxin</i>	P	QL(4 GM per 31 day(s) retail)	<i>tetrahydrozoline w/ zinc sulfate</i>	NC	
<i>neomycin-polymyxin-gramicidin</i>	P	1 package(s) per fill retail	<i>tetrahydrozoline-polyethylene glycol-zinc sulfate</i>	NC	
OCUFLOX (<i>ofloxacin (ophth)</i>)	NP	QL(10 ML per 31 day(s) retail)	VISINE RED EYE COMFORT (<i>tetrahydrozoline hcl (ophth)</i>)	NC	1 package(s) per 31 day(s) retail
<i>ofloxacin (ophth)</i>	P	QL(10 ML per 31 day(s) retail)	Ophthalmic Gene Therapy		
<i>polymyxin b-trimethoprim</i>	P	1 package(s) per fill retail; 1 max fill(s) per 30 day(s) retail	LUXTURN A	NC	SP
POLYTRIM (<i>polymyxin b-trimethoprim</i>)	NP	1 package(s) per fill retail; 1 max fill(s) per 30 day(s) retail	Ophthalmic Immunomodulators		
POVIDONE-IODINE	NC		CEQUA SOLN	NP	
<i>sulfacetamide sodium (ophth) OINT</i>	P	QL(4 GM per 31 day(s) retail)	<i>cyclosporine (ophth) EMUL</i>	NP	Brand Preferred
<i>sulfacetamide sodium (ophth) SOLN</i>	C	QL(15 ML per 31 day(s) retail)	RESTASIS MULTIDOSE EMUL	P	Brand Preferred
<i>sulfacetamide sodium (ophth) SOLN</i>	P	QL(15 ML per 31 day(s) retail)	RESTASIS EMUL (<i>cyclosporine (ophth)</i>)	P	Brand Preferred
<i>tobramycin (ophth) SOLN</i>	NP	QL(5 ML per 31 day(s) retail)	VERKAZIA EMUL	NP	
TOBREX OINT	NP		VEVYE SOLN	NP	
<i>trifluridine</i>	C	QL(8 ML per 31 day(s) retail)	Ophthalmic Integrin Antagonists		
VIGAMOX SOLN OP (<i>moxifloxacin hcl (ophth)</i>)	NC	QL(3 ML per fill retail)	XIIDRA	P	
VIGAMOX SOLN OP (<i>moxifloxacin hcl (ophth)</i>)	NP	QL(3 ML per fill retail)	Ophthalmic Kinase Inhibitors		
XDEM VY	NC		RHOPRESSA	P	
ZIRGAN GEL	NC				
Ophthalmic Decongestants					

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ROCKLATAN	P		<i>neomycin-polymy-dexameth OINT</i>	P	QL(4 GM per 31 day(s) retail)
Ophthalmic Local Anesthetics			<i>neomycin-polymy-dexameth SUSP</i>	P	QL(10 ML per 31 day(s) retail)
AKTEN	NC		<i>neomycin-polymy-dexameth SUSP 0.1 %-3.5 MG/ML-10000 UNIT/ML, 0.1 %</i>	P	QL(10 ML per 31 day(s) retail)
<i>proparacaine hcl</i>	NC		<i>neomycin-polymyxin-hc (ophth)</i>	P	QL(15 ML per 31 day(s) retail)
<i>tetracaine hcl (ophth)</i>	C		PRED FORTE (<i>prednisolone acetate (ophth)</i>)	NC	QL(15 ML per 31 day(s) retail)
Ophthalmic Steroids			PRED MILD	C	1 package(s) per 31 day(s) retail
ALREX SUSP (<i>loteprednol etabonate</i>)	NP		<i>prednisolone acetate (ophth)</i>	C	QL(15 ML per 31 day(s) retail)
<i>bacitracin-poly-neomycin-hc</i>	P		PREDNISOLONE ACETATE P-F	C	QL(15 ML per 31 day(s) retail)
<i>dexamethasone sodium phosphate (ophth)</i>	C		PREDNISOLONE SODIUM PHOSPHATE	C	1 package(s) per 31 day(s) retail
<i>difluprednate</i>	NC		<i>sulfacetamide sod-prednisolone SOLN</i>	P	QL(10 ML per 31 day(s) retail)
EYSUVIS SUSP	NP		TOBRADEX ST SUSP	NP	
FLAREX	NC		TOBRADEX OINT	NP	QL(4 GM per 31 day(s) retail)
<i>fluorometholone (ophth) SUSP</i>	C	1 package(s) per 31 day(s) retail	<i>tobramycin-dexamethasone SUSP</i>	P	1 package(s) per 31 day(s) retail
FML FORTE SUSP	NC		ZYLET	NP	
FML LIQUIFILM SUSP (<i>fluorometholone (ophth)</i>)	NC	1 package(s) per 31 day(s) retail	Ophthalmic Surgical Aids		
INVELTYS SUSP	NC		AMVISC PLUS SOSY	NC	
LOTEMAX SM GEL	NC		GELFILM	NC	
LOTEMAX OINT	NC		HEALON5 PRO SOSY	NC	
<i>loteprednol etabonate GEL</i>	NC		OMIDRIA	NC	
<i>loteprednol etabonate SUSP 0.2 %</i>	NP		Ophthalmics - Misc.		
<i>loteprednol etabonate SUSP 0.5 %</i>	NC		ACULAR (<i>ketorolac tromethamine (ophth)</i>)	NP	1 package(s) per 31 day(s) retail
MAXIDEX SUSP OP	NC		ACULAR LS (<i>ketorolac tromethamine (ophth)</i>)	NP	1 max fill(s) per 31 day(s) retail
MAXITROL OINT (<i>neomycin-polymy-dexameth</i>)	NC	QL(4 GM per 31 day(s) retail)			
MAXITROL OINT (<i>neomycin-polymy-dexameth</i>)	NP	QL(4 GM per 31 day(s) retail)			
MAXITROL SUSP (<i>neomycin-polymy-dexameth</i>)	NP	QL(10 ML per 31 day(s) retail)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ACUVAIL	NP		<i>ketorolac tromethamine (ophth) 0.4 %</i>	P	1 max fill(s) per 31 day(s) retail
AK-FLUOR IV 10 %, 25 % (<i>fluorescein sodium injection</i>)	NC		<i>ketorolac tromethamine (ophth) 0.5 %</i>	P	1 package(s) per 31 day(s) retail
<i>azelastine hcl (ophth)</i>	NP	QL(6 ML per 31 day(s) retail)	<i>ketotifen fumarate (ophth) 0.035 %</i>	P	QL(10 ML per 31 day(s) retail)
AZOPT (<i>brinzolamide</i>)	P	Brand Preferred; 1 package(s) per 31 day(s) retail	MIEBO	NP	
<i>bepotastine besilate</i>	NP		NEVANAC	P	
BEPREVE (<i>bepotastine besilate</i>)	NP		<i>olopatadine hcl 0.2 %</i>	P	RX/OTC
BIO GLO STRP	NC		PROLENSA (<i>bromfenac sodium (ophth)</i>)	NP	
<i>brinzolamide</i>	NP	Brand Preferred; 1 package(s) per 31 day(s) retail	ZADITOR 0.035 % (<i>ketotifen fumarate (ophth)</i>)	P	QL(10 ML per 31 day(s) retail)
<i>bromfenac sodium (ophth)</i>	NP		ZERVIAE	NP	
BROMSITE (<i>bromfenac sodium (ophth)</i>)	NP		Prostaglandins - Ophthalmic		
BSS PLUS SOLN	NC		<i>bimatoprost SOLN</i>	NP	
BSS SOLN	NC		DURYSTA IMPL	NC	
<i>cromolyn sodium (ophth)</i>	P	QL(10 ML per 31 day(s) retail)	IDOSE TR IMPL	NC	
CYSTADROPS	NC	SP	IYUZEH SOLN	NP	
<i>diclofenac sodium (ophth)</i>	P	QL(3 ML per 31 day(s) retail)	<i>latanoprost SOLN</i>	P	QL(5 ML per 31 day(s) retail)
<i>dorzolamide hcl</i>	P	QL(10 ML per 31 day(s) retail)	LUMIGAN SOLN 0.01 %	P	Brand Preferred
<i>epinastine hcl (ophth)</i>	NP		<i>tafluprost</i>	NP	
<i>epinastine hcl (ophth)</i>	NC		TRAVATAN Z SOLN (<i>travoprost</i>)	P	Brand Preferred
<i>fluorescein sodium injection IV</i>	NC		<i>travoprost SOLN</i>	NP	Brand Preferred
FLUORESCEIN SODIUM/BENOXINATE	NC		VYZULTA	NP	
FLUOR-I-STRIPS A.T. STRP	NC		XALATAN SOLN (<i>latanoprost</i>)	NP	QL(5 ML per 31 day(s) retail)
<i>flurbiprofen sodium</i>	P	QL(5 ML per 31 day(s) retail)	XALATAN SOLN (<i>latanoprost</i>)	NC	QL(5 ML per 31 day(s) retail)
GLOSTRIPS STRP 1 MG	NC		XELPROS EMUL	NP	
ILEVRO	NP		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)

Drug Name	Drug Tier	Requirements/ Limits
<i>carbamide peroxide (otic) 6.5 %</i>	C	QL(15 ML per 31 day(s) retail)
DEBROX 6.5 % (<i>carbamide peroxide (otic)</i>)	NC	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	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 acetonide</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		
DERMOTIC (<i>fluocinolone acetonide (otic)</i>)	NC	1 package(s) per 31 day(s) retail
<i>fluocinolone acetonide (otic)</i>	C	1 package(s) per 31 day(s) retail
<i>hydrocortisone w/acetic acid</i>	C	QL(20 ML per 31 day(s) retail)
OXYTOCICS - Drugs to Prevent/Control Uterine Bleeding		
Abortifacients/Agents for Cervical Ripening		
<i>carboprost tromethamine SOLN</i>	NC	
CARBOPROST TROMETHAMINE SOSY	NC	
CERVIDIL INST	NC	

Drug Name	Drug Tier	Requirements/ Limits
PREPIDIL GEL	NC	
Oxytocics		
<i>methylergonovine maleate SOLN</i>	NC	
<i>methylergonovine maleate TABS</i>	C	
<i>oxytocin</i>	NC	
PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System		
Antitoxins-Antivenins		
ANTIVENIN LATRODECTUS MACTANS	NC	
ANTIVENIN MICRURUS FULVIUS	NC	
Immune Serums		
ALYGLO	NC	SP
ASCENIV	NC	
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
HYPERHEP B SOLN IM	NC	SP
HYPERHEP B SOSY	NC	SP
HYPERRAB SOLN	NC	
HYPERRHO S/D SOSY IM 1500 UNIT	C	SP
HYPERRHO S/D SOSY IM 250 UNIT	NC	SP
HYPERTET SOSY	NC	
IMOGAM RABIES-HT SOLN 300 UNIT/2ML	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
KEDRAB SOLN	NC		LENTOCILIN SUSR	C	QL(1 EA per 28 day(s) retail)
MICRHOGAM ULTRA-FILTERED PLUS SOSY IM	NC	SP	PENICILLIN G POT IN DEXTROSE	NC	
NABI-HB SOLN IM	NC	SP	<i>penicillin g potassium 5000000 UNIT, 20000000 UNIT</i>	NC	
OCTAGAM SOLN 30 GM/300ML	C	SP; PA	<i>penicillin g sodium</i>	NC	
RHOGAM ULTRA-FILTERED PLUS SOSY IM	C	SP	<i>penicillin v potassium SOLR</i>	C	
RHOPHYLAC SOSY IJ	NC	SP	<i>penicillin v potassium TABS</i>	C	
VARIZIG SOLN	NC		Penicillin Combinations		
WINRHO SDF SOLN 1500 UNIT/1.3ML, 2500 UNIT/2.2ML, 5000 UNIT/4.4ML, 15000 UNIT/13ML	NC	SP	<i>amoxicillin & pot clavulanate CHEW</i>	C	QL(20 EA per fill retail)
XEMBIFY	C	SP; PA	<i>amoxicillin & pot clavulanate SUSR 28.5 MG/5ML-200 MG/5ML, 62.5 MG/5ML-250 MG/5ML</i>	C	1 package(s) per fill retail
Monoclonal Antibodies			<i>amoxicillin & pot clavulanate SUSR 42.9 MG/5ML-600 MG/5ML, 57 MG/5ML-400 MG/5ML</i>	C	2 package(s) per fill retail
SYNAGIS SOLN	C	SP; PA	<i>amoxicillin & pot clavulanate TABS 125 MG-875 MG</i>	C	QL(20 EA per fill retail)
PENICILLINS - Drugs to Treat Bacterial Infections			<i>amoxicillin & pot clavulanate TABS 125 MG-250 MG, 125 MG-500 MG</i>	C	QL(30 EA per fill retail)
Aminopenicillins			<i>amoxicillin & pot clavulanate TB12</i>	C	QL(40 EA per 31 day(s) retail)
AMOXICILLIN TRIHYDRATE POWD	NC		<i>ampicillin & sulbactam sodium IJ 1 GM-0.5 GM, 2 GM-1 GM</i>	NC	
<i>amoxicillin CAPS</i>	C		AUGMENTIN ES-600 SUSR (<i>amoxicillin & pot clavulanate</i>)	NC	2 package(s) per fill retail
<i>amoxicillin CHEW 125 MG, 250 MG</i>	C		AUGMENTIN SUSR 31.25 MG/5ML-125 MG/5ML	C	1 package(s) per fill retail
<i>amoxicillin SUSR</i>	C		AUGMENTIN TABS 125 MG-500 MG (<i>amoxicillin & pot clavulanate</i>)	NC	QL(30 EA per fill retail)
AMOXICILLIN SUSR (<i>amoxicillin</i>)	NC				
<i>amoxicillin TABS 875 MG</i>	C				
<i>amoxicillin TABS 500 MG</i>	NC				
<i>ampicillin sodium IJ 1 GM, 2 GM, 125 MG, 250 MG, 500 MG</i>	NC				
<i>ampicillin CAPS 500 MG</i>	C				
Natural Penicillins					
BICILLIN L-A SUSY	NC				
EXTENCILLINE SUSR	C	QL(1 EA per 28 day(s) retail)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
BICILLIN C-R	NC		EVANS BLUE	NC	
BICILLIN C-R 900/300	NC		FD&C BLUE #2	NC	RX/OTC
<i>piperacillin sodium-tazobactam sodium</i>	NC		FD&C RED #40 ALUMINUM LAKE	NC	
ZOSYN	NC		FD&C YELLOW #5	NC	RX/OTC
Penicillinase-Resistant Penicillins			FD&C YELLOW #6 ALUMINUM LAKE	NC	RX/OTC
<i>dicloxacillin sodium</i>	C		FDC BLUE 1 ALUMINUM LAKE	NC	RX/OTC
<i>nafcillin sodium IV 10 GM</i>	NC		FDC BLUE 1 POWD	NC	RX/OTC
NAFCILLIN SODIUM IN DEXTROSE	NC		FDC BLUE 2	NC	RX/OTC
<i>oxacillin sodium IJ 1 GM, 2 GM</i>	NC		FDC GREEN #3	NC	RX/OTC
OXACILLIN SODIUM IN DEXTROSE 2 GM/50ML	NC		FDC RED #3	NC	RX/OTC
PHARMACEUTICAL ADJUVANTS			FDC RED 40	NC	RX/OTC
Alkalizing Agents			FDC YELLOW 5 ALUMINUM LAKE	NC	RX/OTC
TROLAMINE	NC	RX/OTC	FDC YELLOW 6	NC	RX/OTC
Antimicrobial Agents			FOOD COLOR BLACK	NC	RX/OTC
BENZYL ALCOHOL	NC	RX/OTC	FOOD COLOR BLUE	NC	RX/OTC
BUTYLPARABEN	NC		FOOD COLOR BLUE ROYAL	NC	
CHLOROBUTANOL ANHYDROUS POWD	NC		FOOD COLOR BROWN	NC	RX/OTC
CHLOROBUTANOL HEMIHYDRATE CRYST	NC		FOOD COLOR FLESH	NC	
CHLOROBUTANOL CRYST	NC		FOOD COLOR GREEN LIQD	NC	
CHLOROBUTANOL POWD	NC		FOOD COLOR GREEN POWD	NC	RX/OTC
METHYLPARABEN	NC	RX/OTC	FOOD COLOR LIME GREEN	NC	RX/OTC
POTASSIUM SORBATE CRYST	NC		FOOD COLOR ORANGE	NC	RX/OTC
POTASSIUM SORBATE POWD	NC		FOOD COLOR ORANGE - YELLOW #6	NC	RX/OTC
PROPYLPARABEN	NC	RX/OTC	FOOD COLOR PINK	NC	
SORBIC ACID	NC	RX/OTC	FOOD COLOR RED	NC	
Coloring Agents			FOOD COLOR RED	NC	RX/OTC
AMARANTH	NC		FOOD COLOR VIOLET	NC	
BRILLIANT BLUE G	NC		FOOD COLOR WHITE	NC	
			FOOD COLOR YELLOW	NC	RX/OTC
			FOOD COLOR YELLOW	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FOOD COLOR YELLOW #5 ALUM LAKE	NC	RX/OTC	BENZALDEHYDE	NC	
LISSAMINE GREEN B	NC		BITTER STOP FLAVOR LIQD	NC	RX/OTC
QUINIZARIN GREEN SS	NC		BITTER-BLOC PURE POWD	NC	RX/OTC
SULPHAN BLUE	NC		BITTER-BLOC WS CONCENTRATE POWD	NC	RX/OTC
TRYPAN BLUE	NC		BITTER-BLOC WS/OS LIQUID CONC	NC	RX/OTC
Flavoring Agents			BITTER-BLOC WS CONC	NC	RX/OTC
ALFALFA FLAVOR POWD	NC	RX/OTC	BITTERNESS MASK FLAVOR LIQD	NC	RX/OTC
ALMOND OIL BITTER FLAVOR LIQD	NC	RX/OTC	BITTERNESS REDUCING AGENT POWD	NC	RX/OTC
ANISE EXTRACT LIQD	NC	RX/OTC	BITTERNESS SUPPRESSOR FLAVOR LIQD	NC	RX/OTC
ANISE FLAVOR OIL	NC	RX/OTC	BLACKBERRY FLAVOR LIQD	NC	RX/OTC
APPLE FLAVOR WATER MISCIBLE POWD	NC	RX/OTC	BLOOD ORANGE OS LIQD	NC	RX/OTC
APPLE FLAVOR LIQD	NC	RX/OTC	BLUEBERRY FLAVOR LIQD	NC	RX/OTC
APPLE FLAVOR POWD	NC	RX/OTC	BUBBLE GUM CONCENTRATE LIQD	NC	RX/OTC
APRICOT FLAVOR LIQD	NC	RX/OTC	BUBBLE GUM FLAVOR LIQD	NC	RX/OTC
APRICOT FLAVOR POWD	NC	RX/OTC	BUBBLE GUM OS LIQD	NC	RX/OTC
BACON FLAVOR LIQD	NC	RX/OTC	BUBBLE GUM WS LIQD	NC	RX/OTC
BANANA CONCENTRATE LIQD	NC	RX/OTC	BUTTER FLAVOR LIQD	NC	RX/OTC
BANANA CREAM FLAVOR LIQD	NC	RX/OTC	BUTTER RUM FLAVOR LIQD	NC	RX/OTC
BANANA CREME FLAVOR LIQD	NC	RX/OTC	BUTTERSCOTCH FLAVOR LIQD	NC	RX/OTC
BANANA FLAVOR LIQD	NC	RX/OTC	CARAMEL FLAVOR LIQD	NC	RX/OTC
BEEF (GRILLED) FLAVOR OIL SOL LIQD	NC	RX/OTC	CARAMEL OS LIQD	NC	RX/OTC
BEEF BRAISED NATURAL FLAVOR LIQD	NC	RX/OTC	CHEESE-ADE FLAVOR POWD	NC	RX/OTC
BEEF FLAVOR LIQD	NC	RX/OTC	CHEESECAKE FLAVOR LIQD	NC	RX/OTC
BEEF FLAVOR POWD	NC	RX/OTC	CHERRY FLAVOR LIQD	NC	RX/OTC
BEEF TYPE FLAVOR NATURAL LIQD	NC	RX/OTC			
BEEF TYPE FLAVOR OS LIQD	NC	RX/OTC			
BEEF-ADE POWD	NC	RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CHERRY-ADE FLAVOR POWD	NC	RX/OTC	CREME DEMENTHE FLAVOR LIQD	NC	RX/OTC
CHICKEN (GRILLED) FLAVOR LIQD	NC	RX/OTC	CREME OS LIQD	NC	RX/OTC
CHICKEN BROTH FLAVOR POWD	NC	RX/OTC	ENGLISH TOFFEE FLAVOR LIQD	NC	RX/OTC
CHICKEN CONC FLAVOR LIQD	NC	RX/OTC	EUCALYPTUS FLAVOR OIL	NC	RX/OTC
CHICKEN FLAVOR OIL MISCIBLE LIQD	NC	RX/OTC	EUGENOL FLAVOR LIQD	NC	RX/OTC
CHICKEN FLAVOR OIL SOLUBLE LIQD	NC	RX/OTC	FISH FLAVOR LIQD	NC	RX/OTC
CHICKEN FLAVOR WATER MISCIBLE LIQD	NC	RX/OTC	FLAVOR CONC-CHLORHEXIDINE CONC	NC	RX/OTC
CHICKEN FLAVOR LIQD	NC	RX/OTC	FLAVORX LIQD	NC	RX/OTC
CHICKEN FLAVOR POWD	NC	RX/OTC	GRAPE CONCORD OS LIQD	NC	RX/OTC
CHICKEN ROASTED CONCENTRATE LIQD	NC	RX/OTC	GRAPE FLAVOR LIQD	NC	RX/OTC
CHOCOLATE CONCENTRATE CONC	NC	RX/OTC	GRAPEFRUIT FLAVOR OIL	NC	RX/OTC
CHOCOLATE FLAVOR LIQD	NC	RX/OTC	GREEN APPLE OS LIQD	NC	RX/OTC
CHOCOLATE FLAVOR POWD	NC	RX/OTC	GUAVA FLAVOR LIQD	NC	RX/OTC
CHOCOLATE HAZELNUT FLAVOR LIQD	NC	RX/OTC	HAM FLAVOR LIQD	NC	RX/OTC
CHOCOLATE NATURAL & ARTIFICIAL CONC	NC	RX/OTC	HONEY FLAVOR LIQD	NC	RX/OTC
CINNAMON FLAVOR OIL	NC	RX/OTC	KAHLUA FLAVOR LIQD	NC	RX/OTC
COCONUT FLAVOR LIQD	NC	RX/OTC	LEMON EXTRACT LIQD	NC	RX/OTC
COFFEE FLAVOR LIQD	NC	RX/OTC	LEMON FLAVOR LIQD	NC	RX/OTC
COLA FLAVOR LIQD	NC	RX/OTC	LEMON FLAVOR OIL	NC	RX/OTC
COTTON CANDY FLAVOR LIQD	NC	RX/OTC	LEMONADE FLAVOR OIL	NC	RX/OTC
CRAN-RASPBERRY FLAVOR LIQD	NC	RX/OTC	LEMON-LIME SD POWD	NC	RX/OTC
CREME DE MENTHE FLAVOR LIQD	NC	RX/OTC	LICORICE FLAVOR LIQD	NC	RX/OTC
CREME DE MENTHE FLAVOR OIL	NC	RX/OTC	LIME FLAVOR OIL	NC	RX/OTC
			LIVER CONCENTRATE LIQD	NC	RX/OTC
			LIVER FLAVOR LIQD	NC	RX/OTC
			LIVER FLAVOR POWD	NC	RX/OTC
			MANGO FLAVOR SWEETENED POWD	NC	RX/OTC
			MANGO FLAVOR LIQD	NC	RX/OTC
			MANGO FLAVOR POWD	NC	RX/OTC
			MANGO PASSION FRUIT OS LIQD	NC	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MAPLE FLAVOR LIQD	NC	RX/OTC	PINA COLADA FLAVOR LIQD	NC	RX/OTC
MARSHMALLOW ARTIFICIAL FLAVOR CONC	NC	RX/OTC	PINEAPPLE FLAVOR LIQD	NC	RX/OTC
MARSHMALLOW FLAVOR LIQD	NC	RX/OTC	PRALINES AND CREAM FLAVOR LIQD	NC	RX/OTC
MARSHMALLOW OS LIQD	NC	RX/OTC	PUMPKIN FLAVOR LIQD	NC	RX/OTC
MARSHMALLOW WS LIQD	NC	RX/OTC	RASPBERRY CONCENTRATE CONC	NC	RX/OTC
MINT CHOCOLATE CHIP FLAVOR LIQD	NC	RX/OTC	RASPBERRY FLAVOR ARTIFICIAL CONC	NC	RX/OTC
MOLASSES FLAVOR POWD	NC	RX/OTC	RASPBERRY FLAVOR LIQD	NC	RX/OTC
NATURAL CARAMEL LIQD	NC	RX/OTC	RASPBERRY FLAVOR POWD	NC	RX/OTC
ORANGE CONCENTRATE LIQD	NC	RX/OTC	RASPBERRY OS LIQD	NC	RX/OTC
ORANGE CREAM FLAVOR LIQD	NC	RX/OTC	ROOT BEER FLAVOR LIQD	NC	RX/OTC
ORANGE FLAVOR LIQD	NC	RX/OTC	SARDINE FLAVOR LIQD	NC	RX/OTC
ORANGE FLAVOR POWD	NC	RX/OTC	SHRIMP FLAVOR LIQD	NC	RX/OTC
ORANGE OIL FLAVOR LIQD	NC	RX/OTC	SPEARMINT FLAVOR OIL	NC	RX/OTC
PASSION FRUIT FLAVOR SWEETENED POWD	NC	RX/OTC	SPEARMINT OS LIQD	NC	RX/OTC
PASSION FRUIT FLAVOR POWD	NC	RX/OTC	STEVIA GLYCERITE EXTRACT LIQD	NC	RX/OTC
PCCA SWEETNESS ENHANCER LIQD	NC	RX/OTC	STRAWBERRY FLAVOR LIQD	NC	RX/OTC
PEACH FLAVOR LIQD	NC	RX/OTC	STRAWBERRY OS LIQD	NC	RX/OTC
PEANUT BUTTER FLAVOR LIQD	NC	RX/OTC	SUPER SYNERSWEET FLAVOR POWD	NC	RX/OTC
PEANUT BUTTER FLAVOR OIL	NC	RX/OTC	SWEET CORN FLAVOR CONC	NC	RX/OTC
PEANUT BUTTER OS CONC	NC	RX/OTC	SWEET DROPS LIQD	NC	RX/OTC
PEPPERMINT BURST OS LIQD	NC	RX/OTC	SWEETENING ENHANCER LIQD	NC	RX/OTC
PEPPERMINT FLAVOR OIL	NC	RX/OTC	TANGERINE FLAVOR SWEETENED POWD	NC	RX/OTC
			TANGERINE FLAVOR OIL	NC	RX/OTC
			TANGERINE FLAVOR POWD	NC	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TEABERRY FLAVOR OIL	NC	RX/OTC	BASE GELATIN GUMMY TROCHE	NC	RX/OTC
TRITTAB PEPPERMINT ICE CONC	NC	RX/OTC	COLLODION	NC	RX/OTC
TROPICAL FUSION OS LIQD	NC	RX/OTC	CUSTOM POLYGLYCOL TROCHE BASE WAX	NC	RX/OTC
TROPICAL FUSION WS LIQD	NC	RX/OTC	DEHYDRATED ALCOHOL	NC	RX/OTC
TROPICAL PUNCH FLAVOR LIQD	NC	RX/OTC	FIXED OIL SUSPENSION	NC	RX/OTC
TUNA FLAVOR LIQD	NC	RX/OTC	FOS-A	NC	RX/OTC
TUNA FLAVOR POWD	NC	RX/OTC	FOS-A SWEETENED	NC	RX/OTC
TUNA TYPE FLAVOR OS LIQD	NC	RX/OTC	GUM BASE (GELATIN)	NC	RX/OTC
TUTTI FRUTTI CONCENTRATE CONC	NC	RX/OTC	KLEAR GUMMY BASE	NC	RX/OTC
TUTTI FRUTTI FLAVOR LIQD	NC	RX/OTC	PCCA CUSTOM NATATROCHE HMP WAX	NC	RX/OTC
TUTTI-FRUTTI FLAVOR LIQD	NC	RX/OTC	PCCA CUSTOM TROCHE BASE WAX	NC	RX/OTC
VANILLA BUTTERNUT FLAVOR LIQD	NC	RX/OTC	PCCA FIXED OIL BASE	NC	RX/OTC
VANILLA FLAVOR LIQD	NC	RX/OTC	PCCA NATATROCHE BASE WAX	NC	RX/OTC
VANILLA OS LIQD	NC	RX/OTC	PCCA PRACAMAC BASE OIL	NC	
VANILLIN FLAVOR POWD	NC	RX/OTC	REGENT ALCOHOL	NC	RX/OTC
VERY BERRY OS LIQD	NC	RX/OTC	SODIUM CHLORIDE BACTERIOSTATIC 0.9 %	NC	
VITAMIN/IRON MASKING AGENT LIQD	NC	RX/OTC	SORBITOL XX 70 %	C	RX/OTC
WATERMELON FLAVOR LIQD	NC	RX/OTC	STERILE WATER FOR INJECTION IJ	NC	
WILD CHERRY FLAVOR LIQD	NC	RX/OTC	<i>water for injection, sterile IJ</i>	NC	
WILD CHERRY OS LIQD	NC	RX/OTC	Pharmaceutical Adjuvants Miscellaneous		
WILD CHERRY SD FLAVOR POWD	NC	RX/OTC	METER BUFFER	NC	
Liquid Vehicles			PH BUFFER	NC	
<i>bacteriostatic sodium chloride</i>	NC		Pharmaceutical Excipients		
BACTERIOSTATIC WATER(BENZ ALC)	NC		ACACIA	NC	RX/OTC
			ALKYL ACRYLATE CROSSPOLYMER POWD	NC	RX/OTC
			ARLASILK PHOSPHOLIPID PLN	NC	
			ASTRAGALUS ROOT POWD	NC	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
BACOCALMINE LIQD	NC		GELATIN	NC	
BASE X FLAK	NC		GUM ARABIC	NC	RX/OTC
BEES WAX	NC	RX/OTC	ISOMALT LOLLIPOP BASE	NC	RX/OTC
BEESWAX	NC	RX/OTC	KARAYA GUM	NC	RX/OTC
BEESWAX (YELLOW)	NC	RX/OTC	KRYSTAL SF	NC	
BENTONITE POWD	NC	RX/OTC	LACTOSE	NC	RX/OTC
BITTER DRUG	NC	RX/OTC	LACTOSE ANHYDROUS	NC	RX/OTC
CAMPBOR BLOCKS	NC		LACTOSE HYDROUS	NC	RX/OTC
CAPSORAL W/DYNAMIC STATIC GRD	NC	RX/OTC	LACTOSE MONOHYDRATE	NC	RX/OTC
CAPSUBLEND-H	NC	RX/OTC	LECITHIN-ISOPROPYL PALMITATE SOLN	NC	
CAPSUBLEND-P	NC	RX/OTC	LIPMAX SOLN	NC	
CAPSUBLEND-S	NC	RX/OTC	LIPOIL OIL	NC	
CARRAGEENAN	NC		LIQUIGEL COMPLEX	NC	
CETYL ALCOHOL FLAK	NC	RX/OTC	LOLLIBASE	NC	RX/OTC
CETYL ALCOHOL POWD	NC		LOVO-ODF CUSTOM LIQD	NC	
COCOA BUTTER CREA	NC		LOXORAL BASE	NC	RX/OTC
COCOA BUTTER MISC	NC	RX/OTC	MAGNESIUM STEARATE (BULK)	NC	RX/OTC
COLLASIL OSA POWD	NC	RX/OTC	MEDI-RDT BASE POWD	NC	RX/OTC
DISPERSERX	NC		MEDI-RDT KIT	NC	
ECTOSEAL P2G	NC	RX/OTC	METHYLCELLULOSE GEL	NC	
EFFERVESCENT BASE	NC		METHYLCELLULOSE POWD	NC	RX/OTC
EMULGADE CM	NC		MUCOLOX LIQD	NC	
EMULSIFYING WAX	NC		NAT BITTERNESS	NC	RX/OTC
ETHYL ACETATE	NC		NATURAL BITTERNESS	NC	RX/OTC
EXCELL-RDT SF BASE POWD	NC	RX/OTC	OLEIC ACID LIQD	NC	
FAGRON CAPFILL PRO	NC	RX/OTC	PARAFFIN	NC	RX/OTC
FAGRON DISPERSAPRO	NC	RX/OTC	PARAFFIN WAX BEADS	NC	RX/OTC
FATTYBLEND MISC	NC	RX/OTC	PCCA CUSTOM RDT POWD	NC	RX/OTC
FIZZMIX BASE	NC		PCCA EMULSIFIX-205 BASE	NC	
F-MELT POWD	NC	RX/OTC			
FREEDOM LOLLIPOP BASE MISC	NC				
FREEDOM ODT BASE POWD	NC	RX/OTC			
FREEDOM SIMPLECAP	NC	RX/OTC			
GALEN IQ 900	NC				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PCCA LECITHIN ISOPROPYL PALM SOLN	NC		STEARYL ALCOHOL (BULK) FLAK	NC	
PCCA LOXASPERSE BASE	NC		STEARYL ALCOHOL (BULK) POWD	NC	
PCCA MBK (FATTY ACID) BASE	NC		SUPPOSIBLEND PLLT	NC	RX/OTC
PCCA RAPID DISSOLVE TABLET POWD	NC	RX/OTC	SUPPOSI-PLEX R36 PLLT	NC	RX/OTC
PCCA SORBITOL LOLLIPOP BASE FLAK	NC		SUPPOSI-PLEX V33 PLLT	NC	RX/OTC
PCCA XYLIFOS BASE	NC		SYNAPSIN POWD	NC	RX/OTC
PLURONIC F127 POWD	NC	RX/OTC	TRAGACANTH POWD	NC	RX/OTC
PLURONIC L64 LIQD	NC		TRITTAB	NC	RX/OTC
PLURONIC GEL	NC	RX/OTC	UCARE POLYMER JR-400 POWD	NC	RX/OTC
POLOXAMER 188 POWD	NC	RX/OTC	WAX, WHITE	NC	RX/OTC
POLOXAMER 407 POWD	NC	RX/OTC	WHITE BEES WAX	NC	RX/OTC
POLOX GEL	NC	RX/OTC	WHITE WAX	NC	RX/OTC
POLYBLEND RX MISC	NC	RX/OTC	WITEPSOL PLLT	NC	RX/OTC
POLYMATRIX POWD	NC	RX/OTC	WITEPSOL WAX	NC	
POLYPEG MISC	NC	RX/OTC	XANTHAN GUM	NC	RX/OTC
PROCAP 100HD CAPSULE EXCIPIENT	NC	RX/OTC	YELLOW WAX	NC	RX/OTC
PROCAP 90 CAPSULE EXCIPIENT	NC	RX/OTC	ZINC STEARATE	NC	
RDT BASE POWD	NC	RX/OTC	Semi Solid Vehicles		
RDT-PLUS POWD	NC	RX/OTC	ANHYDROUS GEL BASE	NC	RX/OTC
SEPINEO P 600	NC		BABY SKIN PROTECTANT	NC	RX/OTC
SHEA BUTTER	NC	RX/OTC	BASE A POLYETHYLENE GLYCOL POWD	NC	
SHEA BUTTER ORGANIC	NC	RX/OTC	BASE C POLYETHYLENE GLYCOL 300	NC	RX/OTC
SODIUM BENZOATE	NC	RX/OTC	BASE D POLYETHYL GLYCOL 4600	NC	
SODIUM LAURYL SULFATE (BULK)	NC		BASE D POLYETHYLENE GLYCOL	NC	
SODIUM THIOSULFATE POWD	NC		BHRT BASE	NC	RX/OTC
SORBITOL CANDY BASE CRYST	NC		CHEMSIL K-12	NC	
SPG SUPPOSI-BASE PLLT	NC	RX/OTC	CHEMSIL K-51	NC	RX/OTC
STEARIC ACID FLAK	NC		CHEW-HESIVE	NC	
STEARIC ACID POWD	NC	RX/OTC	CLOVAGEL	NC	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
DAILY MOISTURIZER	NC	RX/OTC	ORA-HESIVE BASE	NC	
DERMASHIELD HYDROGEL	NC	RX/OTC	PCCA GELATIN BASE	NC	
FAGRON VERSIFIX LIQD	NC		PCCA LIPODERM HMW	NC	RX/OTC
FREEDOM ADAPTADERM	NC	RX/OTC	PCCA OCCLUSADERM	NC	RX/OTC
FREEDOM CEPAPRO	NC	RX/OTC	PCCA PERME8 ANHYDROUS	NC	RX/OTC
FREEDOM SILOMAC ANHYDROUS	NC	RX/OTC	PCCA PLASTICIZED BASE	NC	RX/OTC
HORMONE CREAM BASE	NC	RX/OTC	PCCA PLURONIC F127 BASE	NC	
HRT BASE	NC	RX/OTC	PCCA POLOXAMER 407	NC	
HRT BASE (MEN)	NC		PCCA SPIRA-WASH BASE	NC	RX/OTC
HRT BOTANICAL	NC	RX/OTC	PCCA W06 ANHYDROUS TOPICAL	NC	RX/OTC
HRT CREAM	NC	RX/OTC	PEG 300	NC	RX/OTC
HRT CREAM BASE	NC	RX/OTC	PETROLATUM	NC	RX/OTC
HRT CREAM BASE WOMEN	NC	RX/OTC	PETROLEUM JELLY	NC	RX/OTC
HRT ESSENTIAL	NC	RX/OTC	PETROLEUM JELLY BABY	NC	RX/OTC
HRT HEAVY	NC	RX/OTC	PLASTIBASE	NC	RX/OTC
HRT NATURAL	NC		PLASTICIZED BASE	NC	RX/OTC
JELENE	NC	RX/OTC	PLO TRANSDERMAL CREA	NC	
KRIS-ESTER 236	NC		PLURONIC F127	NC	
<i>lanolin XX</i>	C		POLYETHYLENE GLYCOL 1000 LIQD	NC	
LANOLIN XX	C		POLYETHYLENE GLYCOL 1000 POWD	NC	
LANOLIN ALCOHOL WAX	NC		POLYETHYLENE GLYCOL 1450 FLAK	NC	
LANOLIN OIL	NC		POLYETHYLENE GLYCOL 1450 LIQD	NC	RX/OTC
LIP BALM BASE NATURAL	NC		POLYETHYLENE GLYCOL 1450 POWD	NC	
LIOPEN ANHYDROUS	NC		POLYETHYLENE GLYCOL 200	NC	
LIPOSOMAL HAIR	NC	RX/OTC	POLYETHYLENE GLYCOL 300	NC	RX/OTC
LIPOVAN BASE CREA	NC		POLYETHYLENE GLYCOL 3350 GRAN	NC	
LUBRAJEL NP	NC	RX/OTC			
MEDIBASE C	NC	RX/OTC			
NOVAFILM	NC	RX/OTC			
OINTMENT BASE (EMULSIFYING)	NC				
OLEABASE PLASTICIZED	NC	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
POLYETHYLENE GLYCOL 3350 POWD	NC	RX/OTC	VERSAPRO ANHYDROUS BASE	NC	RX/OTC
POLYETHYLENE GLYCOL 400	NC	RX/OTC	WILEY BASIC ELEMENTS BHRT BASE	NC	RX/OTC
POLYETHYLENE GLYCOL 4500	NC		YELLOW PETROLATUM	NC	RX/OTC
POLYETHYLENE GLYCOL 600	NC		ZOSIL	NC	
POLYETHYLENE GLYCOL 8000 GRAN	NC		Surfactants		
POLYETHYLENE GLYCOL 8000 POWD	NC	RX/OTC	MYRJ 53 POWD	NC	RX/OTC
POLYETHYLENE GLYCOL POWD	NC		POLYOXYL 40 STEARATE PLLT	NC	
POLYMAC PROGEL	NC	RX/OTC	POLYOXYL 40 STEARATE POWD	NC	RX/OTC
RA PETROLEUM JELLY	NC	RX/OTC	PROGESTINS - Hormone Replacement/Modifying Drugs		
RENEWCREAM HRT	NC	RX/OTC	Progestins		
SCAR CARE BASE ENHANCED	NC	RX/OTC	AYGESTIN TABS (<i>norethindrone acetate</i>)	NC	
SECURA PROTECTIVE	NC	RX/OTC	<i>medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG</i>	C	
SIMPLGEL 30	NC	RX/OTC	<i>megestrol acetate (appetite)</i>	NP	
SKIN PROTECTANT	NC	RX/OTC	NORETHINDRONE ACETATE POWD	NC	
SUSPENDIT	NC	RX/OTC	<i>norethindrone acetate TABS</i>	C	
TDC MAX CREA	NC		<i>progesterone CAPS</i>	C	QL(1 EA daily)
TOMMY GEL	NC	RX/OTC	<i>progesterone OIL</i>	NC	
TRANSDERMAL PAIN BASE CREA	NC		PROMETRIUM CAPS (<i>progesterone</i>)	NC	QL(1 EA daily)
VERSABASE HRT GEL	NC	RX/OTC	PROVERA 5 MG, 10 MG (<i>medroxyprogesterone acetate</i>)	NC	
VERSABASE CREA	NC		PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions		
VERSABASE FOAM	NC		Agents for Chemical Dependency		
VERSABASE GEL	NC	RX/OTC	<i>acamprosate calcium</i>	NC	
VERSABASE LOTN	NC				
VERSABASE SHAM	NC				
VERSAPENN (AG) ANHYDROUS GEL	NC				
VERSAPENN (AL) ANHYD LIPID GEL	NC				
VERSAPRO	NC				
VERSAPRO	NC	RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>disulfiram 500 MG</i>	NC		<i>memantine hcl SOLN 2 MG/ML</i>	NC	QL(10 ML daily)
<i>disulfiram 250 MG</i>	C		<i>memantine hcl TABS</i>	NP	
<i>lofexidine hcl</i>	NC		<i>memantine hcl TABS</i>	P	QL(2 EA daily)
Anti-Cataleptic Agents			<i>memantine hcl TABS</i>	NC	QL(2 EA daily)
XYWAV	NC	SP	NAMENDA TITRATION PAK TABS (<i>memantine hcl</i>)	NP	Titration pack
Antidementia Agents			NAMENDA XR CP24 14 MG, 21 MG, 28 MG (<i>memantine hcl</i>)	NC	
ADLARITY PTWK	NP		NAMENDA XR CP24 7 MG (<i>memantine hcl</i>)	NP	
ADUHELM	NC	SP	NAMZARIC C4PK	NP	
ARICEPT TABS 5 MG, 10 MG (<i>donepezil hydrochloride</i>)	NP	QL(1 EA daily)	NAMZARIC CP24 (<i>memantine hcl-donepezil hcl</i>)	NP	
ARICEPT TABS 23 MG (<i>donepezil hydrochloride</i>)	NP		NAMZARIC CP24	NP	
<i>donepezil hydrochloride TABS 23 MG</i>	NP		<i>rivastigmine 4.6 MG/24HR, 9.5 MG/24HR</i>	NP	Brand Preferred; QL(1 EA daily)
<i>donepezil hydrochloride TABS 5 MG, 10 MG</i>	NC	QL(1 EA daily)	<i>rivastigmine 13.3 MG/24HR</i>	NP	Brand Preferred
<i>donepezil hydrochloride TABS 5 MG, 10 MG</i>	P	QL(1 EA daily)	<i>rivastigmine tartrate CAPS</i>	P	QL(2 EA daily)
<i>donepezil hydrochloride TABS 23 MG</i>	NC		ZUNVEYL TBEC PO 5 MG, 10 MG, 15 MG	NP	
<i>donepezil hydrochloride TBDP</i>	P		Combination Psychotherapeutics		
EXELON 4.6 MG/24HR, 9.5 MG/24HR (<i>rivastigmine</i>)	P	Brand Preferred; QL(1 EA daily)	<i>chlordiazepoxide-amitriptyline</i>	NC	
EXELON 13.3 MG/24HR (<i>rivastigmine</i>)	P	Brand Preferred	LYBALVI	NP	AL(At least 18 yrs old); ST
<i>galantamine hydrobromide CP24</i>	NP	QL(1 EA daily)	<i>olanzapine-fluoxetine hcl 25 MG-12 MG, 50 MG-12 MG, 50 MG-6 MG</i>	NP	ST
<i>galantamine hydrobromide SOLN</i>	NP	QL(6 ML daily)	<i>olanzapine-fluoxetine hcl 25 MG-3 MG, 25 MG-6 MG</i>	NP	AL(At least 10 yrs old); ST
<i>galantamine hydrobromide TABS</i>	NP	QL(2 EA daily)	<i>perphenazine-amitriptyline</i>	C	QL(4 EA daily)
<i>memantine hcl CP24</i>	NP		Fibromyalgia Agents		
<i>memantine hcl CP24</i>	NC				
<i>memantine hcl-donepezil hcl CP24</i>	NP				
<i>memantine hcl SOLN</i>	P	QL(10 ML daily)			

Drug Name	Drug Tier	Requirements/ Limits
SAVELLA TITRATION PACK MISC	NP	QL(55 EA per 365 day(s) retail)
SAVELLA TABS	NP	QL(2 EA daily)
Metachromatic Leukodystrophy (MLD) Agents		
LENMELDY	NC	SP
Movement Disorder Drug Therapy		
AUSTEDO XR PATIENT TITRATION TEPK	NP	SP
AUSTEDO XR TB24	P	SP
AUSTEDO TABS	P	SP
INGREZZA CAPS	P	SP
INGREZZA CPPK	P	SP
INGREZZA CPSP	P	SP
<i>tetrabenazine</i>	P	SP
XENAZINE (<i>tetrabenazine</i>)	NP	SP
Multiple Sclerosis Agents		
AMPYRA (<i>dalfampridine</i>)	NP	SP
AUBAGIO (<i>teriflunomide</i>)	NP	QL(1 EA daily); SP
AVONEX PEN AJKT	P	SP
AVONEX PREFILLED PSKT	P	SP
BAFIERTAM	NP	SP
BETASERON KIT	P	SP
COPAXONE SOSY 40 MG/ML (<i>glatiramer acetate</i>)	NP	SP
COPAXONE SOSY 20 MG/ML (<i>glatiramer acetate</i>)	P	Brand Preferred; SP
<i>dalfampridine</i>	P	SP
<i>dalfampridine</i>	P	
<i>dimethyl fumarate CDPK</i>	P	SP
<i>dimethyl fumarate CPDR</i>	P	SP
<i>dimethyl fumarate CPDR</i>	P	
<i>fingolimod hcl</i>	P	QL(1 EA daily); SP

Drug Name	Drug Tier	Requirements/ Limits
GILENYA 0.25 MG	NP	SP
GILENYA (<i>fingolimod hcl</i>)	NP	QL(1 EA daily); SP
<i>glatiramer acetate SOSY 20 MG/ML</i>	NP	Brand Preferred; SP
<i>glatiramer acetate SOSY 40 MG/ML</i>	NP	SP
KESIMPTA	PA	SP; PA
MAVENCLAD (10 TABS)	NP	SP
MAVENCLAD (4 TABS)	NP	SP
MAVENCLAD (5 TABS)	NP	SP
MAVENCLAD (6 TABS)	NP	SP
MAVENCLAD (7 TABS)	NP	SP
MAVENCLAD (8 TABS)	NP	SP
MAVENCLAD (9 TABS)	NP	SP
MAYZENT STARTER PACK TBPK 0.25 MG	NP	SP
MAYZENT TABS	NP	SP
PLEGRIDY STARTER PACK SOAJ	NP	SP
PLEGRIDY STARTER PACK SOSY SC	NP	SP
PLEGRIDY SOAJ	NP	SP
PLEGRIDY SOSY IM	NP	SP
PONVORY STARTER PACK TBPK	NP	SP
PONVORY STARTER PACK TBPK	NP	
PONVORY TABS	NP	
PONVORY TABS	NP	SP
REBIF REBIDOSE TITRATION PACK SOAJ	NP	SP
REBIF REBIDOSE SOAJ	NP	SP
REBIF TITRATION PACK SOSY	NP	SP
REBIF SOSY	NP	SP
TASCENSO ODT	NP	SP
TECFIDERA CDPK (<i>dimethyl fumarate</i>)	NP	SP

Drug Name	Drug Tier	Requirements/ Limits
TECFIDERA CPDR (dimethyl fumarate)	NP	SP
teriflunomide	P	QL(1 EA daily); SP
teriflunomide	NC	QL(1 EA daily); SP
VUMERITY	NP	SP
ZEPOSIA 7-DAY STARTER PACK CPPK	NP	SP
ZEPOSIA STARTER KIT CPPK	NP	SP
ZEPOSIA CAPS	NP	SP
Postherpetic Neuralgia (PHN)/Neuropathic Pain Agents		
<i>gabapentin (once-daily)</i> TABS	NP	
GRALISE TABS	NP	
GRALISE TABS (<i>gabapentin (once-daily)</i>)	NP	
LYRICA CR (<i>pregabalin (once-daily)</i>)	NP	
<i>pregabalin (once-daily)</i>	NC	
<i>pregabalin (once-daily)</i>	NP	
Premenstrual Dysphoric Disorder (PMDD) Agents		
<i>fluoxetine hcl (pmdd)</i> TABS	P	
Pseudobulbar Affect (PBA) Agents		
NUEDEXTA	NC	
Psychotherapeutic and Neurological Agents - Misc.		
<i>ergoloid mesylates</i> TABS	NC	
<i>pimozide</i>	NC	
Restless Leg Syndrome (RLS) Agents		
HORIZANT	NP	
Smoking Deterrents		
APO-VARENICLINE TABS 1 MG	C	QL(2 EA daily; 56 EA per 30 day(s) retail)

Drug Name	Drug Tier	Requirements/ Limits
APO-VARENICLINE TABS 0.5 MG	C	QL(2 EA daily)
<i>bupropion hcl (smoking deterrent)</i>	P	Limit: 2 Smoking Cessation Treatments per Year; QL(2 EA daily)
CHANTIX STARTING MONTH PAK TBPK (<i>varenicline tartrate</i>)	NC	QL(2 EA daily; 53 EA per 30 day(s) retail); 2 max fill(s) per 365 day(s) retail
<i>nicotine polacrilex GUM</i>	P	Limit: 2 Smoking Cessation Treatments per Year; QL(24 EA daily)
<i>nicotine polacrilex GUM</i>	P	QL(24 EA daily)
<i>nicotine polacrilex LOZG</i>	P	QL(20 EA daily)
<i>nicotine polacrilex LOZG</i>	NC	Limit: 2 Smoking Cessation Treatments per Year; QL(20 EA daily)
<i>nicotine polacrilex LOZG</i>	P	Limit: 2 Smoking Cessation Treatments per Year; QL(20 EA daily)
NICOTINE KIT	P	Limit: 2 Smoking Cessation Treatments per Year; QL(56 EA per fill retail); 2 max fill(s) per 365 day(s) retail

Drug Name	Drug Tier	Requirements/ Limits
<i>nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR</i>	P	Limit: 2 Smoking Cessation Treatments per Year; QL(1 EA daily)
<i>nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR</i>	P	QL(1 EA daily)
NICOTROL NS SOLN	P	Limit: 2 Smoking Cessation Treatments per Year; QL(4 ML daily); SL
NICOTROL INHA	NC	Limit: 2 Smoking Cessation Treatments per Year; QL(16.8 EA daily); SL
<i>varenicline tartrate TABS 1 MG</i>	C	QL(2 EA daily; 56 EA per 30 day(s) retail)
<i>varenicline tartrate TABS 0.5 MG</i>	C	QL(2 EA daily)
<i>varenicline tartrate TBPk</i>	C	QL(2 EA daily; 53 EA per 30 day(s) retail); 2 max fill(s) per 365 day(s) retail
Transthyretin Amyloidosis Agents		
TEGSEDI	C	SP; PA
Vasomotor Symptom Agents		
<i>paroxetine mesylate (vasomotor)</i>	NP	
RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions		
Alpha-Proteinase Inhibitor (Human)		
ZEMAIRA SOLR 4000 MG, 5000 MG	NC	
Cystic Fibrosis Agents		

Drug Name	Drug Tier	Requirements/ Limits
BRONCHITOL	NC	SP
BRONCHITOL TOLERANCE TEST	NC	SP
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		
ESBRIET CAPS (<i>pirfenidone</i>)	NC	SP; PA
ESBRIET TABS (<i>pirfenidone</i>)	NC	SP; PA
OFEV	C	SP; PA
<i>pirfenidone CAPS</i>	C	SP; PA
<i>pirfenidone TABS</i>	C	SP; PA
Respiratory Agents - Misc.		
CUROSURF TR 120 MG/1.5ML, 240 MG/3ML	NC	
SURVANTA	NC	
SULFONAMIDES - Drugs to Treat Bacterial Infections		
Sulfonamides		
SULFADIAZINE SODIUM	NC	
SULFADIAZINE POWD	NC	
<i>sulfadiazine TABS</i>	NC	
SULFAMETHOXAZOLE	NC	
SULFAMETHOXAZOLE MICRO	NC	
SULFAPYRIDINE	NC	
SULFATHIAZOLE	NC	
SULFISOXIZOLE CRYs	NC	
TETRACYCLINES - Drugs to Treat Bacterial Infections		
Aminomethylcyclines		
NUZYRA SOLR	NC	
NUZYRA TABS	NP	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Fluorocyclines			MINOLIRA TB24	NC	
XERAVA	NC		OXYTETRACYCLINE HCL	NC	
Glycylcyclines			SOLODYN TB24 55 MG, 65 MG, 80 MG, 105 MG, 115 MG (<i>minocycline hcl</i>)	NP	
<i>tigecycline</i>	NC		<i>tetracycline hcl CAPS</i>	P	
TIGECYCLINE	NC		TETRACYCLINE HCL TABS	P	
Tetracyclines			THYROID AGENTS - Drugs to Regulate Thyroid Hormones		
<i>demeclocycline hcl TABS</i>	NP		Antithyroid Agents		
DORYX MPC TBEC 60 MG	NP		METHIMAZOLE POWD	NC	
DORYX TBEC 80 MG, 200 MG (<i>doxycycline hyclate</i>)	NP		<i>methimazole TABS</i>	C	
<i>doxycycline (monohydrate) CAPS</i>	NP		<i>propylthiouracil</i>	C	
<i>doxycycline (monohydrate) CAPS</i>	NC		Thyroid Hormones		
<i>doxycycline (monohydrate) SUSR</i>	NP		ADTHYZA TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	C	
<i>doxycycline (monohydrate) CAPS</i>	NC		ADTHYZA TABS 16.25 MG, 32.5 MG, 65 MG, 97.5 MG, 130 MG	NC	
<i>doxycycline (monohydrate) SUSR</i>	NC		ARMOUR THYROID TABS	C	
<i>doxycycline (monohydrate) TABS</i>	NP		CYTOMEL TABS (<i>liothyronine sodium</i>)	NC	
<i>doxycycline hyclate CAPS</i>	P		ERMEZA SOLN PO	NC	
DOXYCYCLINE HYCLATE POWD	NC		<i>levothyroxine sodium CAPS</i>	NC	
<i>doxycycline hyclate SOLR</i>	NC		LEVOTHYROXINE SODIUM SOLN IV	NC	
<i>doxycycline hyclate TABS</i>	P		LEVOTHYROXINE SODIUM SOLN IV	NC	
<i>doxycycline hyclate TABS</i>	NC		<i>levothyroxine sodium SOLR IV</i>	NC	
<i>doxycycline hyclate TBEC 50 MG, 75 MG, 100 MG, 150 MG</i>	NC		LEVOTHYROXINE SODIUM SOLR IV (<i>levothyroxine sodium</i>)	NC	
<i>doxycycline hyclate TBEC</i>	NP		<i>levothyroxine sodium TABS</i>	C	
MINOCIN SOLR	NC				
<i>minocycline hcl CAPS</i>	P				
MINOCYCLINE HCL POWD	NC				
<i>minocycline hcl TABS</i>	NC				
<i>minocycline hcl TABS</i>	P				
<i>minocycline hcl TB24</i>	NP				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>liothyronine sodium SOLN</i>	NC		ATROPINE SULFATE SOSY IJ 0.25 MG/5ML, 0.5 MG/5ML, 1 MG/10ML	NC	
<i>liothyronine sodium TABS</i>	C		BELLADONNA ALKALOIDS-OPIMUM	NC	
NIVA THYROID TABS	C		BENTYL SOLN IM (<i>dicyclomine hcl</i>)	NC	
NP THYROID TABS	C		<i>chlordiazepoxide hcl-clidinium bromide</i>	NC	
RENTHYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	C		DARTISLA ODT TBDP	NC	
SYNTHROID TABS (<i>levothyroxine sodium</i>)	NC		<i>dicyclomine hcl CAPS</i>	C	
THYQUIDITY SOLN PO	NC		<i>dicyclomine hcl SOLN IM</i>	NC	
THYROID POWD 0.23 %	NC		<i>dicyclomine hcl SOLN PO</i>	C	QL(496 ML per 31 day(s) retail)
THYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	C		<i>dicyclomine hcl TABS</i>	C	
TOXOIDS			GLYCATATE TABS	NC	
Toxoid Combinations			GLYCOPYRROLATE PF SOSY IJ	NC	
ADACEL SUSP	C	QL(0.5 ML per fill retail; 0.5 per fill mail)	<i>glycopyrrolate SOLN IJ</i>	NC	
BOOSTRIX SUSP	C	QL(0.5 ML per fill retail; 0.5 per fill mail)	<i>glycopyrrolate SOSY IJ</i>	NC	
BOOSTRIX SUSY	C	QL(0.5 ML per fill retail; 0.5 per fill mail)	<i>glycopyrrolate TABS 1 MG, 2 MG</i>	C	QL(4 EA daily)
TDVAX SUSP	C	QL(0.5 ML per fill retail; 1.5 per fill mail)	GLYCOPYRROLATE TABS	NC	
TENIVAC INJ	C		GLYRX-PF SOLN IJ	NC	
TETANUS-DIPHThERIA TOXOIDS TD SUSP	C	QL(0.5 ML per fill retail; 1.5 per fill mail)	GLYRX-PF SOSY IJ	NC	
ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions			<i>hyoscyamine sulfate ELIX</i>	C	
Antispasmodics			HYOSCYAMINE SULFATE POWD	NC	
ATROPINE SULFATE MONOHYDRATE	NC		<i>hyoscyamine sulfate SOLN PO 0.125 MG/ML</i>	C	
ATROPINE SULFATE POWD	NC		<i>hyoscyamine sulfate SUBL 0.125 MG</i>	C	
<i>atropine sulfate SOLN IJ 8 MG/20ML</i>	NC		<i>hyoscyamine sulfate TABS 0.125 MG</i>	C	
<i>atropine sulfate SOSY IJ</i>	NC		<i>hyoscyamine sulfate TB12 0.375 MG</i>	C	QL(4 EA daily)
			ISOPROPAMIDE IODIDE	NC	
			LEVBIID TB12 (<i>hyoscyamine sulfate</i>)	NC	QL(4 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
LEVSIN/SL SUBL (hyoscyamine sulfate)	NC		CARAFATE TABS (sucralfate)	NC	QL(4 EA daily)
LEVSIN TABS (hyoscyamine sulfate)	NC		SUCRALFATE POWD	NC	
methscopolamine bromide	NC		sucralfate SUSP	C	QL(420 ML per fill retail)
phenobarbital-hyoscyamine-atropine-scopolamine TABS	NC		sucralfate TABS	C	QL(4 EA daily)
PROPANTHELINE BROMIDE POWD	NC		Proton Pump Inhibitors		
ROBINUL-FORTE TABS (glycopyrrolate)	NC	QL(4 EA daily)	DEXILANT (dexlansoprazole)	P	Brand Preferred
ROBINUL TABS (glycopyrrolate)	NC	QL(4 EA daily)	dexlansoprazole	NP	Brand Preferred
SCOPOLAMINE HBR POWD	NC		esomeprazole magnesium CPDR 40 MG	NP	
H-2 Antagonists			esomeprazole magnesium CPDR 20 MG	NP	QL(2 EA daily); RX/OTC
cimetidine hcl PO 300 MG/5ML	NP		esomeprazole magnesium CPDR 20 MG	NC	QL(2 EA daily); RX/OTC
CIMETIDINE POWD	NC		esomeprazole magnesium PACK	NP	Brand Preferred
cimetidine TABS	NP	RX/OTC	esomeprazole magnesium PACK	NP	
famotidine in nacl SOLN	NC		esomeprazole sodium 40 MG	NC	
famotidine SOLN 20 MG/2ML, 40 MG/4ML, 200 MG/20ML	NC		lansoprazole CPDR 30 MG	NP	QL(2 EA daily)
famotidine SUSR	P		lansoprazole CPDR 15 MG	NP	QL(4 EA daily); RX/OTC
famotidine TABS 20 MG, 40 MG	P	RX/OTC	lansoprazole CPDR 15 MG	NC	QL(4 EA daily); RX/OTC
famotidine TABS 10 MG	C		lansoprazole TBDD	NP	RX/OTC
famotidine TABS 20 MG, 40 MG	NC	RX/OTC	lansoprazole TBDD 15 MG	NC	RX/OTC
nizatidine CAPS	NP		NEXIUM I.V. 40 MG (esomeprazole sodium)	NC	
PEPCID AC TABS (famotidine)	NC		NEXIUM CPDR 20 MG (esomeprazole magnesium)	NP	QL(2 EA daily); RX/OTC
PEPCID TABS (famotidine)	NP	RX/OTC	NEXIUM CPDR 40 MG (esomeprazole magnesium)	NP	
Misc. Anti-Ulcer					
CARAFATE SUSP (sucralfate)	NC	QL(420 ML per fill retail)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
NEXIUM PACK (esomeprazole magnesium)	P	Brand Preferred	amoxicillin-clarithromycin w/ lansoprazole THPK	C	14 day(s) max supply per 365 day(s) retail
omeprazole magnesium TBEC	C	QL(1 EA daily)	bismuth subcitrate potassium-metronidazole-tetracycline	NC	
omeprazole CPDR	P	QL(2 EA daily)	KONVOMEK SUSR	NP	
omeprazole CPDR	NC	QL(2 EA daily)	OMECLAMOX-PAK	NC	
omeprazole TBDD	NC		omeprazole-sodium bicarbonate CAPS	NP	RX/OTC
omeprazole TBEC	C	QL(1 EA daily)	omeprazole-sodium bicarbonate CAPS	NC	
PANTOPRAZOLE SODIUM-NACL	NC		omeprazole-sodium bicarbonate PACK	NP	
pantoprazole sodium PACK	NP	Brand Preferred	omeprazole-sodium bicarbonate PACK	NC	
pantoprazole sodium PACK	NP		TALICIA	NC	
pantoprazole sodium SOLR	NC		VOQUEZNA DUAL PAK	NC	
pantoprazole sodium TBEC 40 MG	P	QL(2 EA daily)	VOQUEZNA TRIPLE PAK	NC	
pantoprazole sodium TBEC 20 MG	P	QL(1 EA daily)	ZEGERID CAPS (omeprazole-sodium bicarbonate)	NP	RX/OTC
PREVACID SOLUTAB TBDD (lansoprazole)	NP	RX/OTC	ZEGERID PACK (omeprazole-sodium bicarbonate)	NP	
PREVACID CPDR 30 MG (lansoprazole)	NP	QL(2 EA daily)	URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms		
PRILOSEC OTC TBEC (omeprazole magnesium)	NC	QL(1 EA daily)	Urinary Antispasmodic - Antimuscarinics (Anticholinergic)		
PRILOSEC PACK	NP		darifenacin hydrobromide	NP	
PROTONIX PACK (pantoprazole sodium)	P	Brand Preferred	DETROL LA CP24 (tolterodine tartrate)	NP	QL(1 EA daily)
PROTONIX TBEC 40 MG (pantoprazole sodium)	NP	QL(2 EA daily)	DETROL TABS (tolterodine tartrate)	NP	QL(2 EA daily)
PROTONIX TBEC 20 MG (pantoprazole sodium)	NP	QL(1 EA daily)	fesoterodine fumarate	P	
rabeprazole sodium TBEC	NP		oxybutynin chloride SOLN	P	
VOQUEZNA	NC		oxybutynin chloride TABS 5 MG	NC	QL(3 EA daily)
Ulcer Drugs - Prostaglandins			oxybutynin chloride TABS 5 MG	P	QL(3 EA daily)
CYTOTEC (misoprostol)	NC	PA			
misoprostol	C	PA			
Ulcer Therapy Combinations					

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>oxybutynin chloride TABS 2.5 MG</i>	P		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)
<i>oxybutynin chloride TB24</i>	P	QL(2 EA daily)			
OXYTROL FOR WOMEN PTTW	NC	RX/OTC			
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)			
TOVIAZ (<i>fesoterodine fumarate</i>)	NP		HIBERIX SOLR IJ	C	
<i>trospium chloride CP24</i>	NP		MENACTRA	C	AL(Up to 55 yrs old)
<i>trospium chloride TABS</i>	NP	QL(2 EA daily)	MENQUADFI 0.5 ML	C	
VESICARE LS SUSP	NP		MENVEO SOLN	C	AL(Up to 55 yrs old)
VESICARE TABS (<i>solifenacin succinate</i>)	NP		MENVEO SOLR	C	AL(Up to 55 yrs old)
Urinary Antispasmodics - Beta-3 Adrenergic Agonists			PEDVAX HIB SUSP	C	
GEMTESA	NP		PENBRAYA	C	AL(Up to 25 yrs old)
<i>mirabegron TB24</i>	NP	Brand Preferred	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)
MYRBETRIQ SRER	NP	Brand Preferred			
MYRBETRIQ TB24 (<i>mirabegron</i>)	P	Brand Preferred	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)
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)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
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)	AFLURIA PRESERVATIVE FREE SUSY	C	1 max fill(s) per 180 day(s) retail
			AFLURIA SUSP	C	1 max fill(s) per 180 day(s) retail
			AREXVY	C	AL(At least 60 yrs old)
			AUDENZ EMUL	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
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)	AUDENZ PRSY	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
			COMIRNATY SUSP	C	
			COMIRNATY SUSY	C	
			ENGERIX-B SUSP 20 MCG/ML	C	3 max fill(s) per 999 day(s) retail
TRUMENBA 0.5 ML	C		ENGERIX-B SUSY	C	3 max fill(s) per 999 day(s) retail
TYPHIM VI SOLN	C				
TYPHIM VI SOSY	C		ERVEBO	C	
VAXCHORA	C		FLUAD	C	1 max fill(s) per 180 day(s) retail
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)	FLUARIX SUSY	C	1 max fill(s) per 180 day(s) retail
			FLUBLOK SOSY	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
VIVOTIF	C		FLUCELVAX SUSP	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
Viral Vaccines			FLUCELVAX SUSY	C	1 max fill(s) per 180 day(s) retail
ABRYSVO	C	AL(At least 60 yrs old)			
ACAM2000	C				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FLULAVAL SUSY	C	1 max fill(s) per 180 day(s) retail	MODERNA COVID-19 VACCINE SUSP	C	
FLUMIST	PA		MRESVIA	C	AL(Up to 60 yrs old)
FLUZONE HIGH-DOSE SUSY	C	1 max fill(s) per 180 day(s) retail; AL(At least 65 yrs old)	NOVAVAX COVID-19 VACCINE SUSP	C	
FLUZONE SUSP	C	1 max fill(s) per 180 day(s) retail	NOVAVAX COVID-19 VACCINE SUSY	C	1 max fill(s) per 180 day(s) mail
FLUZONE SUSY	C	1 max fill(s) per 180 day(s) retail	PFIZER COVID-19 BIVAL 6MO-4YR	C	
GARDASIL 9 SUSP 0.5 ML	C	3 max fill(s) per 999 day(s) retail; AL(Up to 45 yrs old)	PFIZER COVID-19 VAC BIVAL 5-11	C	
GARDASIL 9 SUSY 0.5 ML	C	3 max fill(s) per 999 day(s) retail; AL(Up to 45 yrs old)	PFIZER COVID-19 VAC BIVALENT	C	
HAVRIX 1440 EL U/ML	C		PFIZER COVID-19 VAC-TRIS 5-11Y SUSP	C	
HAVRIX IM 720 EL U/0.5ML	C		PFIZER COVID-19 VAC-TRIS 6M-4Y SUSP	C	
HEPLISAV-B SOSY	C	3 max fill(s) per 999 day(s) retail	PFIZER-BIONT COVID-19 VAC-TRIS SUSP	C	
IMOVAX RABIES SUSR	C		PFIZER-BIONTECH COVID-19 VACC SUSP	C	
IPOLE	C		PREHEVBRIO	C	3 max fill(s) per 999 day(s) retail
IXCHIQ	NC		PRIORIX SUSR	C	
IXIARO	C		RABAVERT	C	
JANSSEN COVID-19 VACCINE	C		RECOMBIVAX HB SUSP	C	3 max fill(s) per 999 day(s) retail
JYNNEOS	C		RECOMBIVAX HB SUSY	C	3 max fill(s) per 999 day(s) retail
M-M-R II SOLR	C		SHINGRIX	C	2 max fill(s) per 999 day(s) retail; AL(At least 50 yrs old)
MODERNA COVID-19 BIVAL 6M-5Y	C		SPIKEVAX COVID-19 VACCINE SUSP	C	
MODERNA COVID-19 BIVALENT	C		SPIKEVAX SUSP	C	
MODERNA COVID-19 VAC 6M-11Y SUSP	C		SPIKEVAX SUSY	C	
MODERNA COVID-19 VAC 6M-11Y SUSY	C		STAMARIL SUSR	C	
			TICOVAC	C	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TWINRIX SUSY	C		MONISTAT 3 COMBINATION PACK KIT (<i>miconazole nitrate vaginal</i>)	NC	1 package(s) per fill retail
VAQTA	C		MONISTAT 7 SIMPLY CURE CREA (<i>miconazole nitrate vaginal</i>)	NC	QL(45 GM per 31 day(s) retail)
VARIVAX SUSR	C	2 max fill(s) per 999 day(s) retail	NUVESSA	NC	
VIMKUNYA SUSY IM 40 MCG/0.8ML	NC		<i>terconazole vaginal CREA</i>	C	
YF-VAX INJ	C		<i>terconazole vaginal SUPP</i>	C	
VAGINAL AND RELATED PRODUCTS			<i>tioconazole vaginal 6.5 %</i>	C	
Miscellaneous Vaginal Products			VANDAZOLE	C	
TRIMO-SAN	NC		XACIATO GEL	NC	
Vaginal Anti-infectives			Vaginal Contraceptive - pH Modulators		
CLEOCIN CREA (<i>clindamycin phosphate vaginal</i>)	NC		PHEXXI	NC	
CLEOCIN SUPP	NC		Vaginal Estrogens		
<i>clindamycin phosphate vaginal CREA</i>	C		ESTRACE CREA (<i>estradiol vaginal</i>)	NC	QL(43 GM per 31 day(s) retail)
CLINDESSE	NC		<i>estradiol vaginal CREA</i>	C	QL(43 GM per 31 day(s) retail)
<i>clotrimazole vaginal CREA 2 %</i>	C	QL(21 GM per 31 day(s) retail)	<i>estradiol vaginal TABS</i>	C	
<i>clotrimazole vaginal CREA 1 %</i>	C	QL(45 GM per 31 day(s) retail)	ESTRING RING	NC	
GYNAZOLE-1	C		FEMRING	NC	
GYNE-LOTRIMIN 3 CREA (<i>clotrimazole vaginal</i>)	NC	QL(21 GM per 31 day(s) retail)	IMVEXXY MAINTENANCE PACK INST	NC	
GYNE-LOTRIMIN CREA (<i>clotrimazole vaginal</i>)	NC	QL(45 GM per 31 day(s) retail)	IMVEXXY STARTER PACK INST	NC	
<i>metronidazole vaginal</i>	C		PREMARIN	C	
MICONAZOLE 7 SUPP 100 MG	C	QL(7 EA per 31 day(s) retail)	VAGIFEM TABS (<i>estradiol vaginal</i>)	NC	
<i>miconazole nitrate vaginal CREA 2 %</i>	C	QL(45 GM per 31 day(s) retail)	Vaginal Progestins		
<i>miconazole nitrate vaginal KIT</i>	C	1 package(s) per fill retail	CRINONE GEL	NC	
<i>miconazole nitrate vaginal SUPP 200 MG</i>	C	QL(3 EA per fill retail; 3 EA per 31 day(s) retail)	VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions		
<i>miconazole nitrate vaginal SUPP 100 MG</i>	C	QL(7 EA per 31 day(s) retail)	Anaphylaxis Therapy Agents		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
AUVI-Q SOAJ 0.3 MG/0.3ML	NP	USE BRAND NAME or Authorized Generic; QL(0.067 EA daily; 4 EA per 365 day(s) retail)	Vasopressors		
AUVI-Q SOAJ 0.1 MG/0.1ML, 0.15 MG/0.15ML	NP	Brand Preferred	ADRENALIN-NACL SOLN	NC	
<i>epinephrine (anaphylaxis) SOAJ</i>	NP	USE BRAND NAME or Authorized Generic; QL(0.067 EA daily; 4 EA per 365 day(s) retail)	ADRENALIN SOLN	NC	
<i>epinephrine (anaphylaxis) SOAJ 0.15 MG/0.15ML</i>	NP	Brand Preferred	BIORPHEN SOLN IV	NC	
<i>epinephrine (anaphylaxis) SOAJ</i>	P	USE BRAND NAME or Authorized Generic; QL(0.067 EA daily; 4 EA per 365 day(s) retail)	EMERPHED SOLN IV	NC	
<i>epinephrine (anaphylaxis) SOLN IJ</i>	NC		EMERPHED SOSY IV	NC	
EPIPEN 2-PAK SOAJ (<i>epinephrine (anaphylaxis)</i>)	P	USE BRAND NAME or Authorized Generic; QL(0.067 EA daily; 4 EA per 365 day(s) retail)	<i>ephedrine sulfate (pressors) SOLN IV</i>	NC	
EPIPEN JR 2-PAK SOAJ (<i>epinephrine (anaphylaxis)</i>)	P	USE BRAND NAME or Authorized Generic; QL(0.067 EA daily; 4 EA per 365 day(s) retail)	EPHEDRINE SULFATE (PRESSORS) SOLN IV	NC	
NEFFY SOLN NA	NC		<i>ephedrine sulfate (pressors) SOSY IV</i>	NC	
			EPHEDRINE SULFATE (PRESSORS) SOSY IV	NC	
			EPINEPHRINE BITARTRATE-NACL SOLN IV	NC	
			EPINEPHRINE-NACL SOLN 4 MG/250ML-0.9 %, 5 MG/250ML-0.9 %, 8 MG/250ML-0.9 %	NC	
			<i>epinephrine SOLN IJ</i>	NC	
			EPINEPHRINE SOLN IJ	NC	
			EPINEPHRINE SOSY IV 1 MG/10ML	NC	
			IMMPHENTIV SOLN IV	NC	
			<i>midodrine hcl</i>	C	
			<i>norepinephrine bitartrate IV</i>	NC	
			NOREPINEPHRINE BITARTRATE IV	NC	
			NOREPINEPHRINE-DEXTROSE SOLN 5 %-16 MG/250ML, 5 %-4 MG/250ML, 5 %-8 MG/250ML	NC	
			NOREPINEPHRINE-SODIUM CHLORIDE SOLN 0.9 %-16 MG/250ML, 0.9 %-4 MG/250ML, 0.9 %-8 MG/250ML	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>phenylephrine hcl (pressors) SOLN IV</i>	NC		B-1 TABS	C	QL(3.34 EA daily)
PHENYLEPHRINE HCL SOLN IV 1 MG/10ML	NC		CALCIUM ASCORBATE POWD	NC	RX/OTC
REZIPRES 47 MG/10ML	NC		CALCIUM PANTOTHENATE POWD	NC	RX/OTC
VITAMINS			NIACINAMIDE POWD	NC	RX/OTC
Oil Soluble Vitamins			<i>niacin CPCR 250 MG</i>	C	
AQUASOL A SOLN 50000 UNIT/ML	NC		NIACIN POWD XX	NC	
<i>cholecalciferol CAPS 1.25 MG, 50000 UNIT</i>	C	QL(8 EA per 31 day(s) retail)	<i>niacin TABS 500 MG</i>	C	
<i>cholecalciferol CAPS</i>	C	QL(100 EA per fill retail)	<i>niacin TBCR</i>	C	
<i>cholecalciferol LIQD PO 10 MCG/ML</i>	C		NICOTINAMIDE POWD	NC	RX/OTC
<i>cholecalciferol LIQD PO 10 MCG/ML, 400 UNIT/ML</i>	NC		PARA-AMINOBENZOIC ACID POWD	NC	
DECARA CAPS	NC		POTASSIUM AMINOBENZOATE POWD	NC	
DRISDOL CAPS (<i>ergocalciferol</i>)	NC		PYRIDOXINE HCL POWD	NC	RX/OTC
<i>ergocalciferol CAPS</i>	C		<i>pyridoxine hcl TABS 25 MG, 50 MG, 100 MG</i>	C	
ERGOCALCIFEROL POWD	NC		<i>riboflavin TABS</i>	C	QL(3.34 EA daily)
<i>ergocalciferol SOLN PO 200 MCG/ML</i>	C	QL(60 ML per 90 day(s) retail)	SLO-NIACIN TBCR (<i>niacin</i>)	NC	
OSTEO-VIT3 LIQD PO	NC		SODIUM ASCORBATE GRAN	NC	
<i>phytonadione SOLN 1 MG/0.5ML, 10 MG/ML</i>	NC		SODIUM ASCORBATE POWD	NC	RX/OTC
<i>phytonadione TABS 5 MG</i>	C		THIAMINE HCL POWD	NC	RX/OTC
<i>vitamin e CAPS 180 MG, 200 UNIT, 400 UNIT, 90 MG, 90 MG, 180 MG</i>	C	QL(2 EA daily)	<i>thiamine hcl SOLN</i>	NC	
VITAMIN E POWD	NC		<i>thiamine hcl TABS 100 MG</i>	C	QL(3.34 EA daily)
Water Soluble Vitamins			THIAMINE MONONITRATE POWD XX	NC	
AMINOBENZOIC ACID POWD	NC		<i>thiamine mononitrate TABS 100 MG</i>	C	QL(3.34 EA daily)
<i>ascorbic acid LIQD</i>	NC		TRUE VITAMIN B1 TABS	NC	
<i>ascorbic acid TABS</i>	C	QL(3.34 EA daily)	TRUE VITAMIN B6 TABS	NC	

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abacavir sulfate SOLN	58	ACCOLATE (zafirlukast)	19	acetaminophen TABS 325 MG, 500 MG	9
abacavir sulfate TABS	58	ACCRUFER	126	acetaminophen w/ codeine SOLN ..	12
abacavir sulfate-lamivudine	58	ACCU-CHEK AVIVA PLUS KIT ..	132	acetaminophen w/ codeine TABS 15 MG-300 MG, 30 MG-300 MG, 60 MG-300 MG	12
ABECMA	51	ACCU-CHEK AVIVA PLUS STRP 113		acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG ...	13
ABELCET	40	ACCU-CHEK GUIDE KIT	132	ACETARSONE	69
ABILIFY ASIMTUFIN PRSY	57	ACCU-CHEK GUIDE ME KIT	132	acetazolamide CP12	115
ABILIFY MAINTENANCE PRSY	57	ACCU-CHEK GUIDE TEST STRP 113		ACETAZOLAMIDE CRYSTALS	69
ABILIFY MAINTENANCE SRER	57	ACCU-CHEK SMARTVIEW STRP 113		ACETAZOLAMIDE POWDER	69
ABILIFY MYCITE MAINTENANCE KIT	57	ACCU-CHEK SOFTCLIX LANCETS 132		acetazolamide sodium	115
ABILIFY MYCITE STARTER KIT ..	57	ACCUPRIL (quinapril hcl)	43	acetazolamide TABS	115
ABILIFY TABS 2 MG, 10 MG, 15 MG, 20 MG, 30 MG (aripiprazole) .	57	ACCURETIC 12.5 MG-10 MG (quinapril-hydrochlorothiazide)	44	acetic acid (otic)	171
ABILIFY TABS 5 MG (aripiprazole) 57		ACCURETIC 12.5 MG-20 MG (quinapril-hydrochlorothiazide)	44	acetic acid 0.25 %	123
abiraterone acetate	51	acebutolol hcl CAPS	63	ACETIC ACID 3 %, 5 %	68
ABRAVO EMUL	113	ACEBUTOLOL HCL POWD	63	ACETIC ACID GLACIAL	68
ABRILADA (1 PEN) AJKT	5	ACEPROMAZINE MALEATE	69		
ABRILADA (2 PEN) AJKT	5				
ABRILADA (2 SYRINGE) PSKT	5				

ACETONE	89	ACTIVE FE	126	ADALIMUMAB-AACF (2 PEN) AJKT .	5
ACETYL DIPEPTIDE-1 CETYL		ACTIVE INJECTION D KIT	95	ADALIMUMAB-AACF (2 SYRINGE)	
ESTER	69	ACTIVELLA TABS 1 MG-0.5 MG		PSKT	5
ACETYL HEXAPEPTIDE-8 POWD		(estradiol & norethindrone acetate)		ADALIMUMAB-AACF(CD/UC/HS	
69		119		STRT) AJKT	5
ACETYL HEXAPEPTIDE-8 SOLN .	69	ACTIVNUTRIENTS CAPS	157	ADALIMUMAB-AACF(PS/UV	
ACETYL SALICYLIC ACID POWD .	9	ACTIVNUTRIENTS		STARTER) AJKT	5
ACETYLCHOLINE CHLORIDE ...	69	PERFORMANCE CAPS	157	ADALIMUMAB-AATY (1 PEN) AJKT .	5
acetylcysteine (antidote) SOLN	38	ACTIVNUTRIENTS W/O IRON		ADALIMUMAB-AATY (2 PEN) AJKT .	5
ACETYLCYSTEINE POWD	100	CAPS	157	ADALIMUMAB-AATY (2 SYRINGE)	
acetylcysteine SOLN	100	ACTONEL TABS 150 MG		PSKT	5
ACETYL-D-GLUCOSAMINE	69	(risedronate sodium)	117	ADALIMUMAB-AATY CD/UC/HS	
ACETYL-L-CARNITINE HCL	69	ACTONEL TABS 35 MG (risedronate		START AJKT 80 MG/0.8ML	5
ACIDOPHILUS LACTOBACILLUS		sodium)	117	ADALIMUMAB-ADAZ SOAJ	5
79		31		ADALIMUMAB-ADAZ SOSY 10	
acitretin	104	ACTOPLUS MET TABS 850 MG-15		MG/0.1ML	5
ACTEMRA ACTPEN SOAJ	6	MG (pioglitazone hcl-metformin hcl)		ADALIMUMAB-ADAZ SOSY	5
ACTEMRA SOLN	6	31		ADALIMUMAB-ADBM (2 PEN) AJKT	
ACTEMRA SOSY	6	ACTOS (pioglitazone hcl)	37	5	
ACTHAR GEL PEN SC 40		ACULAR (ketorolac tromethamine		ADALIMUMAB-ADBM (2 SYRINGE)	
UNIT/0.5ML, 80 UNIT/ML	117	(ophth))	170	PSKT	5
ACTHIB SOLR IM	191	ACULAR LS (ketorolac		ADALIMUMAB-ADBM(CD/UC/HS	
ACTIFLOVIT EAR HEALTH TABS		tromethamine (ophth))	170	STRT) AJKT	5
163		170		ADALIMUMAB-ADBM(PS/UV	
ACTIPHYTE OF ALGAE GL	69	ACUVAIL	171	STARTER) AJKT	5
ACTIPHYTE OF CUCUMBER	71	ACYCLOVIR	69	ADALIMUMAB-FKJP (2 PEN) AJKT .	5
ACTIPHYTE OF IVY	77	acyclovir CAPS	62	ADALIMUMAB-FKJP (2 SYRINGE)	
ACTIPHYTE OF LEMONGRASS .	89	acyclovir sodium SOLN	62	PSKT	5
ACTIPHYTE OF SEA KELP	79	acyclovir SUSP	62	ADALIMUMAB-RYVK (2 PEN) AJKT .	5
ACTIPHYTE OF SUGAR KELP ...	79	acyclovir TABS PO 400 MG	62	ADALIMUMAB-RYVK (2 SYRINGE)	
ACTIQ LPOP (fentanyl citrate)	10	acyclovir TABS PO 800 MG	62	PSKT	5
ACTIVASE IV	125	acyclovir topical CREA	106	ADALIMUMAB-RYVK (2 SYRINGE)	
		acyclovir topical OINT	106	PSKT	5
		ADACEL SUSP	188		
		ADAKVEO	125		

adapalene CREA	100	ADRENALIV CAPS	162	ADVOCATE SAFETY LANCETS 28G	132
adapalene GEL 0.3 %	100	ADRENOCHROME SEMICARBAZONE	71	ADZENYS XR-ODT TBED	1
adapalene-benzoyl peroxide GEL 2.5 %-0.1 %	100	ADRENOCORTICOTROPHIC HORMONE	71	AEMCOLO	46
adapalene-benzoyl peroxide GEL 100		ADRENOID CAPS	162	AEROCHAMBER HOLDING CHAMBER DEVI	146
ADASUVE	55	ADTHYZA TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	187	AEROCHAMBER MINI CHAMBER DEVI	146
ADBRY SOAJ	109	ADTHYZA TABS 16.25 MG, 32.5 MG, 65 MG, 97.5 MG, 130 MG ...	187	AEROCHAMBER MV MISC	146
ADBRY SOSY	109	ADUHELM	183	AEROCHAMBER PLS FLOVU MTHPIECE DEVI	146
ADCIRCA TABS (tadalafil (pulmonary hypertension))	67	ADVAIR DISKUS AEPB (fluticasone- salmeterol)	20	AEROCHAMBER PLUS FLO-VU INTERM DEVI	146
ADDERALL TABS (amphetamine- dextroamphetamine)	1	ADVAIR HFA AERO (fluticasone- salmeterol)	20	AEROCHAMBER PLUS FLO-VU LARGE DEVI	146
ADDERALL XR CP24 (amphetamine-dextroamphetamine) . 1		ADVANCE INTUITION METER DEVI	132	AEROCHAMBER PLUS FLO-VU LARGE MISC	146
adefovir dipivoxil	61	ADVANCE INTUITION MONITOR KIT	132	AEROCHAMBER PLUS FLO-VU MEDIUM DEVI	146
ADEMETIONINE DISULF TOSYLATE	69	ADVANCE MICRO-DRAW METER DEVI	132	AEROCHAMBER PLUS FLO-VU MEDIUM MISC	146
ADEMPAS	67	ADVIL TABS (ibuprofen)	7	AEROCHAMBER PLUS FLO-VU MISC	146
adenosine (diagnostic)	113	ADVOCATE BLOOD GLUCOSE MONITOR DEVI	132	AEROCHAMBER PLUS FLO-VU SMALL DEVI	146
ADENOSINE	69	ADVOCATE BLOOD GLUCOSE SYSTEM KIT	132	AEROCHAMBER PLUS FLO-VU SMALL MISC	146
adenosine SOLN	17	ADVOCATE INSULIN PEN NEEDLE	141	AEROCHAMBER PLUS FLO-VU W/MASK MISC	146
ADENOSINE-5-MONOPHOSPHATE	155	ADVOCATE REDI-CODE DEVI ..	132	AEROCHAMBER PLUS FLOW VU MISC	146
ADENOSINE-5-TRIPHOSPHATE 155		ADVOCATE REDI-CODE+ DEVI	132	AEROCHAMBER W/FLOWSIGNAL MISC	146
ADLARITY PTWK	183	ADVOCATE SAFETY LANCETS 21G	132	AEROCHAMBER Z-STAT PLUS CHAMBR MISC	146
ADMELOG SOLN IJ	33	ADVOCATE SAFETY LANCETS 23G	132		
ADMELOG SOLOSTAR SOPN ...	33				
ADRENAL MANAGER CAPS	162				
ADRENALIN SOLN	195				
ADRENALIN-NACL SOLN	195				

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AEROCHAMBER Z-STAT PLUS/LARGE MISC146	AKTEN170	alclometasone dipropionate OINT 106
AEROCHAMBER Z-STAT PLUS/MEDIUM MISC146	AKYNZEO (READY-TO-USE) SOLN 39	ALCOHOL ANHYDROUS89
AEROCHAMBER Z-STAT PLUS/SMALL MISC146	AKYNZEO (TO-BE-DILUTED) SOLN 39	alcohol, rubbing XX89
AEROVENT PLUS DEVI146	AKYNZEO39	ALCOHOL, USP89
AFLURIA PRESERVATIVE FREE SUSY192	AKYNZEO SOLR39	ALDACTAZIDE (spironolactone & hydrochlorothiazide)116
AFLURIA SUSP192	ALAHIST D98	ALDACTONE TABS (spironolactone)116
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AGAMATRIX JAZZ WIRELESS 2 KIT132	ALAHIST PE TABS98	alendronate sodium SOLN117
AGAMATRIX PRESTO KIT132	ALANINE POWD166	alendronate sodium TABS 10 MG 117
AGAMATRIX PRESTO TEST STRP . 113	ALASKAN RED ALGAE69	alendronate sodium TABS 35 MG, 70 MG117
AGAMREE95	albendazole16	ALEVE ALL DAY STRONG TABS 220 MG (naproxen sodium)7
AGAR POWD69	ALBENDAZOLE69	ALEVE TABS (naproxen sodium) ...7
AGGRASTAT 3.75 MG/15ML125	ALBUKED 25124	ALFALFA FLAVOR POWD175
AIMOVIG148	ALBUKED 5124	alfuzosin hcl123
AIRDUO DIGIHALER20	ALBUMIN HUMAN124	ALGINIC ACID69
AIRDUO RESPICLICK 113/14 AEPB (fluticasone-salmeterol)20	ALBUMINEX124	aliskiren fumarate46
AIRDUO RESPICLICK 232/14 AEPB (fluticasone-salmeterol)20	ALBUMIN-ZLB124	ALIVE EVERYDAY IMMUNE HEALTH CAPS157
AIRDUO RESPICLICK 55/14 AEPB (fluticasone-salmeterol)20	ALBURX124	ALIVE HAIR, SKIN & NAILS CAPS 157
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AJOVY SOAJ148	ALBUTEIN125	ALKYL ACRYLATE CROSSPOLYMER POWD178
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AK-FLUOR IV 10 %, 25 % (fluorescein sodium injection)171	albuterol sulfate NEBU 0.083 % ...20	ALLANTOIN91
	albuterol sulfate NEBU 0.63 MG/3ML, 1.25 MG/3ML20	
	albuterol sulfate NEBU20	
	ALBUTEROL SULFATE POWD ...20	
	albuterol sulfate SYRP20	
	albuterol sulfate TABS20	

ALLEGRA ALLERGY TABS 180 MG (fexofenadine hcl)	41	ALPRAZOLAM	69	HEXAHYDRATE POWD	111
ALLEGRA ALLERGY TABS 60 MG (fexofenadine hcl)	41	ALPRAZOLAM INTENSOL CONC	17	ALUMINUM CHLOROHYDRATE	.69
ALLOPURINOL	69	alprazolam TABS	17	ALUMINUM HYDROXIDE DRIED GEL	91
allopurinol 100 MG, 300 MG	124	alprazolam TB24	17	ALUMINUM HYDROXIDE GEL	...91
allopurinol 200 MG	124	alprazolam TBDP	17	ALUMINUM HYDROXIDE GEL SUSP	16
allopurinol sodium	124	ALPROSTADIL	91	ALUMINUM POTASSIUM SULFATE POWD	91
ALMOND OIL (SWEET)	89	alprostadil SOLN IJ 500 MCG/ML	.66	ALUMINUM SULFATE CRYSTALS	91
ALMOND OIL BITTER FLAVOR LIQD	175	ALREX SUSP (loteprednol etabonate)	170	ALUMINUM SULFATE GRAN	91
almotriptan malate	149	ALTACE CAPS 1.25 MG, 2.5 MG, 5 MG, 10 MG (ramipril)	43	ALVESCO	19
ALOE VERA FREEZE DRIED POWD	69	ALTOPREV TB24 20 MG, 40 MG, 60 MG	43	alvimopan	122
ALOE VERA LEAF POWD	69	ALTRENO LOTN	100	ALYGLO	172
ALOE VERA OIL	69	ALTRENOGEST	69	AMANTADINE HCL	69
ALOE VERA POWD	69	ALTRIXA TABS	159	amantadine hcl CAPS	53
alogliptin benzoate	32	alum & mag hydrox-simethicone LIQD	16	amantadine hcl SOLN	53
alogliptin-metformin hcl	31	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	16	amantadine hcl TABS	53
alogliptin-pioglitazone 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG	31	ALUM AMMONIUM (BULK)	91	AMARANTH	174
ALORA PTTW 0.025 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR ..	119	ALUMINUM ACETATE BASIC	...69	AMBIEN CR TBCR (zolpidem tartrate)	128
alosetron hcl	122	ALUMINUM AMMONIUM SULFATE	91	AMBIEN TABS (zolpidem tartrate) 128	
ALPHAGAN P (brimonidine tartrate) 168		ALUMINUM CHLORIDE		ambrisentan	67
ALPHA-KETOGLUTARIC ACID CRYSTALS	69	ANHYDROUS POWD	111	amcinonide CREA	106
ALPHA-KETOGLUTARIC ACID POWD	69	ALUMINUM CHLORIDE CRYSTALS ..	112	AMELUZ GEL	104
ALPHA-LIPOIC ACID	69	ALUMINUM CHLORIDE HEXAHYDRATE CRYSTALS	111	AMERICAN GINSENG	69
ALPHA-TOCOPHEROL	89	ALUMINUM CHLORIDE		AMIKACIN SULFATE POWD	4
				amikacin sulfate SOLN 1 GM/4ML, 500 MG/2ML	4
				amiloride & hydrochlorothiazide	. 116
				AMILORIDE HCL POWD	116

amiloride hcl TABS	116	amlodipine besylate TABS	64	MG/5ML-400 MG/5ML	173
amino acid infusion SOLN 15 % ..	166	amlodipine besylate-atorvastatin		amoxicillin & pot clavulanate TABS	
AMINO BENZOIC ACID POWD ..	196	calcium	66	125 MG-250 MG, 125 MG-500 MG	173
AMINOCAPROIC ACID	70	amlodipine besylate-benazepril hcl	44	amoxicillin & pot clavulanate TABS	
AMINOLEVULINIC ACID HCL				125 MG-875 MG	173
POWD	70	amlodipine besylate-olmesartan		amoxicillin & pot clavulanate TB12	
AMINOPHYLLINE ANHYDROUS		medoxomil	44	173	
POWD	21	amlodipine besylate-valsartan	44	amoxicillin CAPS	173
aminophylline SOLN	21	amlodipine-valsartan-		amoxicillin CHEW 125 MG, 250 MG .	
AMINOPROPYL RACEMETHYL		hydrochlorothiazide	45	173	
PHOS	70	AMMONIUM BROMIDE GRAN	91	AMOXICILLIN SUSR (amoxicillin)	
AMINOSALICYLIC ACID-4 POWD		AMMONIUM BROMIDE POWD	91	173	
49		AMMONIUM CARBONATE (BULK)		amoxicillin SUSR	173
AMINOSALICYLIC ACID-5 POWD		POWD	91	amoxicillin TABS 500 MG	173
121		AMMONIUM CHLORIDE	91	amoxicillin TABS 875 MG	173
AMINOSYN-PF 7% SOLN	166	AMMONIUM HYDROXIDE	68	AMOXICILLIN TRIHYDRATE POWD	
amiodarone hcl SOLN 150 MG/3ML,		AMMONIUM LACTATE	89	173	
450 MG/9ML, 900 MG/18ML	18	AMMONIUM LAURYL SULFATE .	70	amoxicillin-clarithromycin w/	
amiodarone hcl TABS 100 MG, 400		AMMONIUM MOLYBDATE		lansoprazole THPK	190
MG	18	TETRAHYD	70	AMPHADASE	154
amiodarone hcl TABS 200 MG	18	AMMONIUM PHOSPHATE DIBASIC		amphetamine sulfate TABS	1
AMITIZA (lubiprostone)	120	GRAN	91	amphetamine-dextroamphetamine	
AMITRIPTYLINE HCL POWD	70	AMMONIUM SULFATE	91	CP24 12.5 MG, 25 MG, 37.5 MG, 50	
amitriptyline hcl TABS	30	AMMONUL (sod benzoate & sod		MG	1
AMJEVITA SOAJ	5	phenylacetate)	118	amphetamine-dextroamphetamine	
AMJEVITA SOSY	5	AMONDYS 45	165	CP24 5 MG, 10 MG, 15 MG, 20 MG,	
AMJEVITA-PED 10KG TO <15KG		amoxapine	30	25 MG, 30 MG	1
SOSY	5	amoxicillin & pot clavulanate CHEW .		amphetamine-dextroamphetamine	
AMJEVITA-PED 15KG TO <30KG		173		TABS	1
SOSY	5	amoxicillin & pot clavulanate SUSR		AMPHOTERICIN B	156
AMLADEX TABS	160	28.5 MG/5ML-200 MG/5ML, 62.5		amphotericin b IV	40
AMLEXANOX	70	MG/5ML-250 MG/5ML	173	amphotericin b liposome	40
AMLODIPINE BESYLATE	70	amoxicillin & pot clavulanate SUSR		ampicillin & sulbactam sodium IJ 1	
		42.9 MG/5ML-600 MG/5ML, 57		GM-0.5 GM, 2 GM-1 GM	173

ampicillin CAPS 500 MG 173	ANTIMONY TRICHLORIDE CRYSTALS 70	aprepitant CAPS 39
ampicillin sodium IJ 1 GM, 2 GM, 125 MG, 250 MG, 500 MG 173	ANTIMONY TRISULFIDE 70	aprepitant MISC 39
AMPYRA (dalfampridine) 184	ANTIPYRINE CRYSTALS 70	APRETUDE 58
AMRIX CP24 (cyclobenzaprine hcl) 163	ANTIPYRINE POWDER 70	APRICOT FLAVOR LIQUID 175
AMVISC PLUS SOSY 170	ANTIVENIN LATRODECTUS MACTANS 172	APRICOT FLAVOR POWDER 175
AMYTAL SODIUM 128	ANTIVENIN MICRURUS FULVIUS 172	APRISO CP24 (mesalamine) 121
AMYVID 113	ANTIVERT CHEW (meclizine hcl) .39	APTENSIO XR CP24 (methylphenidate hcl) 2
ANAFRANIL (clomipramine hcl) .. 30	ANTIVERT TABS 50 MG (meclizine hcl) 39	APTIOM 200 MG, 400 MG, 600 MG, 800 MG (eslicarbazepine acetate) .24
anagrelide hcl 125	ANUSOL-HC EX (hydrocortisone (rectal)) 15	APTIVUS CAPS 58
ANALPRAM HC SINGLES CREA EX (hydrocortisone acetate w/ pramoxine) 15	ANZEMET TABS 50 MG 38	AQINJECT PEN NEEDLE 141
anastrozole 51	APETIBEX CAPS 157	AQUASOL A SOLN 50000 UNIT/ML . 196
ANASTROZOLE 70	APEXICON E CREA 106	ARANESP (ALBUMIN FREE) SOLN . 126
ANDROGEL PUMP GEL TD (testosterone) 14	APIDRA SOLN 33	ARANESP (ALBUMIN FREE) SOSY . 126
ANDROSTENEDIONE 70	APIDRA SOLOSTAR SOPN 33	ARAVA (leflunomide) 8
ANECTINE SOLN 165	APLENZIN 27	ARAZLO LOTN 100
ANGELIQ 119	APLISOL 113	ARBUTIN ALPHA 70
ANHYDROUS GEL BASE 180	APOMORPHINE HCL 70	ARCALYST 6
ANISE 89	APONVIE EMUL 39	AREXVY 192
ANISE EXTRACT LIQUID 175	APO-VARENICLINE TABS 0.5 MG 185	arformoterol tartrate 20
ANISE FLAVOR OIL 175	APO-VARENICLINE TABS 1 MG 185	argatroban 23
ANISINDIONE 70	APPE-CURB CAPS 158	ARGATROBAN 23
ANNOVERA 95	APPLE FLAVOR LIQUID 175	ARGATROBAN IN SODIUM CHLORIDE 23
ANORO ELLIPTA 25 MCG/ACT-62.5 MCG/ACT (umeclidinium-vilanterol) 20	APPLE FLAVOR POWDER 175	ARGININE HCL 70
ANTHRALIN POWDER 104	APPLE FLAVOR WATER MISCIBLE POWDER 175	ARICEPT TABS 23 MG (donepezil hydrochloride) 183
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ARIKAYCE	4	ASCORBIC ACID GRAN	70	HIGH	132
ARIMIDEX (anastrozole)	51	ascorbic acid LIQD	196	ASSURE HAEMOLANCE PLUS LOW	132
aripiprazole SOLN PO	57	ASCORBIC ACID POWD	70	ASSURE HAEMOLANCE PLUS MICRO	132
aripiprazole TABS 2 MG, 10 MG, 15 MG, 20 MG, 30 MG	57	ascorbic acid TABS	196	ASSURE HAEMOLANCE PLUS NORMAL	132
aripiprazole TABS 5 MG	57	ASCORBYL PALMITATE	70	ASSURE HAEMOLANCE PLUS PED	132
aripiprazole TBDP	57	asenapine maleate	56	ASSURE ID DUO PRO PEN NEEDLES	142
ARISTADA 1064 MG/3.9ML	58	ASMANEX (120 METERED DOSES) AEPB	19	ASSURE ID INSULIN SAFETY SYR 142	
ARISTADA 441 MG/1.6ML	58	ASMANEX (14 METERED DOSES) AEPB	19	ASSURE ID PRO PEN NEEDLES 142	
ARISTADA 662 MG/2.4ML	58	ASMANEX (30 METERED DOSES) AEPB	19	ASSURE PLATINUM METER DEVI 132	
ARISTADA 882 MG/3.2ML	57	ASMANEX (60 METERED DOSES) AEPB	19	ASSURE PRISM MULTI METER DEVI	132
ARISTADA INITIO	58	ASMANEX HFA AERO	19	ASSURE PRO BLOOD GLUCOSE METER DEVI	133
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ARLACEL 165	77	ASPARLAS	52	ASTRAGALUS ROOT POWD	178
ARLASILK PHOSPHOLIPID PLN 178		ASPARTAME (FOR COMPOUNDING)	115	ASTRINGYN	127
armodafinil	2	ASPARTAME (NUTRASWEET) .	115	ATACAND (candesartan cilexetil) .	44
ARMONAIR DIGIHALER	19	ASPARTIC ACID	91	ATACAND HCT (candesartan cilexetil-hydrochlorothiazide)	45
ARMOUR THYROID TABS	187	aspirin buffered (cal carb-mag carb- mag oxide)	9	atazanavir sulfate CAPS 150 MG, 200 MG	58
ARNICA	70	aspirin CHEW	9	atazanavir sulfate CAPS 200 MG .	58
ARNUITY ELLIPTA	19	aspirin effervescent	9	atazanavir sulfate CAPS 300 MG .	58
AROMASIN (exemestane)	51	ASPIRIN POWD	9	ATELVIA TBEC (risedronate sodium)	117
ARSENIC TRIOXIDE	70	ASPIRIN SUPP 300 MG	9	atenolol & chlorthalidone	45
ARTESUNATE	49	aspirin TABS 325 MG	9		
ARTHROTEC TBEC (diclofenac w/ misoprostol)	7	aspirin TBEC 81 MG, 325 MG	9		
ARTISS KIT	127	aspirin-dipyridamole	125		
ARTISS SOLN	127	ASSURE 4 METER DEVI	132		
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ATENOLOL POWD63	ATTAPULGITE70	AVO CREAM EMUL113
atenolol TABS63	AUBAGIO (teriflunomide)184	AVOCADO OIL70
ATIVAN TABS 0.5 MG, 2 MG (lorazepam) 17	AUDENZ EMUL192	AVONEX PEN AJKT184
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atomoxetine hcl2	AUGMENTIN ES-600 SUSR (amoxicillin & pot clavulanate)173	AVSOLA121
ATOPAVO EMUL113	AUGMENTIN SUSR 31.25 MG/5ML- 125 MG/5ML173	AVYCAZ67
ATORVALIQ SUSP43	AUGMENTIN TABS 125 MG-500 MG (amoxicillin & pot clavulanate)173	AXUMIN113
ATORVASTATIN CALCIUM 70	AURANOFIN 3 MG6	AYGESTIN TABS (norethindrone acetate) 182
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atovaquone47	AUSTEDO TABS184	AZASITE168
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atropine sulfate (ophthalmic) SOLN 168	AUVI-Q SOAJ 0.1 MG/0.1ML, 0.15 MG/0.15ML 195	AZELAIC ACID FLAK70
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BENZOYL PEROXIDE HYDROUS POWD	100	BETAINE HCL	71	BETAPACE TABS 80 MG, 120 MG, 160 MG (sotalol hcl)	63
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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)	66	calcitriol CAPS	118	CALCIUM CHLORIDE DIHYDRATE POWD	150
CADUET 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)	66	calcitriol SOLN IV	118	CALCIUM CHLORIDE SOLN	150
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CAFFEINE POWD	2	CALCIUM AMINO ACID CHELATE GRAN	71	CALCIUM GLUCONATE ANHYDROUS POWD	150
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calcipotriene CREA	104	CALCIUM CARBONATE EXTRA LIGHT POWD XX	150	calcium gluconate SOLN	151
CALCIPOTRIENE FOAM	104	CALCIUM CARBONATE LIGHT POWD XX	150	CALCIUM GLUCONATE-NACL SOLN 1 GM/100ML-0.8 %, 1 GM/50ML-0.675 %, 2 GM/100ML- 0.675 %	151
CALCIPOTRIENE MONOHYDRATE	71	CALCIUM CARBONATE POWD XX .	150	calcium gluconate-sodium chloride SOLN	151
calcipotriene OINT	104	calcium carbonate TABS	150	CALCIUM GLYCEROPHOSPHATE .	72
calcipotriene SOLN	105	calcium carbonate-cholecalciferol TABS 10 MCG-600 MG, 400 UNIT- 600 MG	150	CALCIUM HYDROXIDE	92
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CRESEMBA SOLR	40	CURCUMIN	87	CYCLOMYDRIL	168
CRESOL	73	CURCUMIN EXTRACT	87	CYCLOPENTASILOX-PEG/PPG DIMETH	74
CRESTOR TABS (rosuvastatin calcium)	43	CUROSURF TR 120 MG/1.5ML, 240 MG/3ML	186	CYCLOPENTOLATE HCL	74
CREXONT CPR	53	CUSTOM POLYGLYCOL TROCHE BASE WAX	178	cyclopentolate hcl 1 %	168
CRINONE GEL	194	CVS ADULT 50+ EYE HEALTH CAPS	158	CYCLOPHOSPHAMIDE	74
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cromolyn sodium (nasal) 5.2 MG/ACT	164	CVS BLOOD GLUCOSE METER KIT	134	CYCLOPHOSPHAMIDE SOLN ...	50
		CVS EPSOM SALT GRAN XX ...	129	cyclophosphamide SOLR IJ	50
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DEVILS CLAW	74	dextroamphetamine sulfate TABS 15 MG, 20 MG, 30 MG	1
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DEXAMETHASONE BASE	74	dextroamphetamine sulfate TABS 5 MG, 10 MG	1
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DEXAMETHASONE INTENSOL CONC	96	dextromethorphan hbr LIQD 15 MG/5ML, 30 MG/10ML	97
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DEXAMETHASONE SODIUM PHOSPHATE	74	dextromethorphan polistirex SUER	97
dexamethasone sodium phosphate SOLN IJ 10 MG/ML, 100 MG/10ML	96	dextromethorphan-acetaminophen-chlorpheniramine TABS 325 MG-2 MG-10 MG	98
DEXAMETHASONE SODIUM PHOSPHATE SOLN IJ 10 MG/ML	96	dextromethorphan-guaifenesin LIQD 100 MG/5ML-10 MG/5ML, 150 MG/7.5ML-15 MG/7.5ML, 200 MG/10ML-20 MG/10ML	98
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DEXAMETHASONE SODIUM PHOSPHATE SOLN IJ 4 MG/ML ..	96	dextromethorphan-guaifenesin LIQD 200 MG/20ML-20 MG/20ML	98
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dexamethasone TABS	96		
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dextromethorphan-phenylephrine- acetaminophen CAPS	98	DIACOMIT CAPS 250 MG	24	diazepam CONC	17
DEXTROSE 5%/ELECTROLYTE #48	151	DIACOMIT CAPS 500 MG	24	diazepam SOLN IJ 5 MG/ML, 10 MG/2ML	17
DEXTROSE ANHYDROUS GRAN 165		DIACOMIT PACK 250 MG	24	DIAZEPAM SOLN IJ 5 MG/ML	17
DEXTROSE ANHYDROUS POWD 165		DIACOMIT PACK 500 MG	24	diazepam SOLN PO 5 MG/5ML ...	17
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DEXTROSE MONOHYDRATE POWD	165	DIALYVITE 5000	157	diazoxide	32
DEXTROSE POWD	165	DIALYVITE 800 PLUS D WAFR .	157	DIAZOXIDE	75
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DICLOFENAC SODIUM POWD ...75	DIFLUCAN SUSR 40 MG/ML (fluconazole) 40	DILAUDID TABS 4 MG (hydromorphone hcl)10
diclofenac sodium TB247	DIFLUCAN TABS 100 MG, 200 MG (fluconazole) 40	DILAUDID TABS 8 MG (hydromorphone hcl)10
diclofenac sodium TBEC7	DIFLUNISAL POWD10	DILTIAZEM HCL 75
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DIMETHYL SILOXANE HYDROXYALKYL	75	DIPROLENE OINT (betamethasone dipropionate augmented)	107	D-MANNOSE	75
DIMETHYL SULFONE POWD	80	dipyridamole (diagnostic)	113	dobutamine hcl 12.5 MG/ML, 250 MG/20ML	65
DIMETHYL SULFOXIDE	90	dipyridamole	125	DOBUTAMINE-DEXTROSE	65
DIMETHYLACETAMIDE	75	DIPYRIDAMOLE	75	DOCOSANOL	75
DIMETHYLAMINOETHANOL	75	DISOPHENOL	75	docusate sodium CAPS 100 MG, 250 MG	130
DIMETHYLGLYCINE HCL	75	disopyramide phosphate CAPS ...	17	docusate sodium CAPS 50 MG ..	130
DINITROCHLOROBENZENE	92	DISPERSERX	179	docusate sodium LIQD 50 MG/5ML, 100 MG/10ML	130
DIOGENIN	75	DISULFIRAM	75	DOCUSATE SODIUM POWD	130
DIOSMIN	75	disulfiram 250 MG	183	DOCUSATE SODIUM SYRP	130
DIOVAN HCT (valsartan- hydrochlorothiazide)	45	disulfiram 500 MG	183	docusate sodium TABS	130
DIOVAN TABS (valsartan)	44	DIURIL SUSP	116	DOCUSATE SODIUM-SOD BENZOATE	92
DIOXYBENZONE	75	DIVALPROEX SODIUM	75	dofetilide	18
DIPENTUM	121	divalproex sodium CSDR	27	DOLOBID TABS	10
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doxepin hcl CAPS30	DRIZALMA SPRINKLE CSDR30	DUOBRII107
doxepin hcl CONC30	dronabinol CAPS39	DUOPA SUSP 53
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SENSOR	136	FUROSEMIDE POWD	116	GAMMAGARD S/D LESS IGA SOLR	172
FREESTYLE LIBRE 2 READER	136	furosemide SOLN IJ 10 MG/ML	116	GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	172
FREESTYLE LIBRE 2 SENSOR	136	FUROSEMIDE SOLN IJ	116	GAMUNEX-C 1 GM/10ML, 2.5 GM/25ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	172
FREESTYLE LIBRE 3 PLUS SENSOR	136	furosemide SOLN PO 8 MG/ML, 10 MG/ML	116	GANCICLOVIR SODIUM SOLN ...	61
FREESTYLE LIBRE 3 READER	136	furosemide TABS	116	ganciclovir sodium SOLR	61
FREESTYLE LIBRE 3 SENSOR	136	FUZEON SOLR	59	GARDASIL 9 SUSP 0.5 ML	193
FREESTYLE LIBRE READER ...	136	FYCOMPA SUSP	23	GARDASIL 9 SUSY 0.5 ML	193
FREESTYLE LITE DEVI	136	FYCOMPA TABS	23	GARDENIA FRAGRANCE	77
FREESTYLE LITE KIT	136	gabapentin (once-daily) TABS ...	185	gatifloxacin (ophth)	169
FREESTYLE LITE TEST STRP ..	114	GABAPENTIN	77	GATIFLOXACIN	77
FREESTYLE PRECISION NEO SYSTEM KIT	136	gabapentin CAPS	24	GAVRETO	52
FREESTYLE PRECISION NEO TEST STRP	114	gabapentin SOLN	24	GE100 BLOOD GLUCOSE SYSTEM DEVI	136
FREESTYLE TEST STRP	114	gabapentin TABS 600 MG	24	GE100 BLOOD GLUCOSE SYSTEM KIT	137
FRESH LINEN FRAGRANCE	69	gabapentin TABS 800 MG	24	GELATIN	179
FRESHKOTE PF	167	GABARONE TABS 100 MG, 400 MG	24	GELFILM	170
FRINDOVYX SOLN	50	GADAVIST SOSY	114	GEL-FLOW	127
FROVA (frovatriptan succinate) .	149	gadobutrol SOLN	114	GELFOAM COMPRESSED SIZE 100 MISC EX	127
frovatriptan succinate	149	gadoterate meglumine SOLN	114	GELFOAM DENTAL PACK SIZE 4 MISC EX	127
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FRUCTOSE POWD	166	GALACTOSE	77	GELFOAM SPONGE MISC EX ..	127
FT ELECTROLYTE SOLN	151	GALAFOLD	118	GELFOAM SPONGE SIZE 100 MISC EX	127
FT EYE HEALTH CAPS	158	galantamine hydrobromide CP24	183	GELFOAM SPONGE SIZE 200 MISC EX	127
FT NAIL POLISH REMOVER	90	galantamine hydrobromide SOLN	183	GELFOAM SPONGE SIZE 50 MISC	
FT SWEET OIL	90	galantamine hydrobromide TABS	183		
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GELFOAM-JMI POWDER	127	GERMANIUM SESQUIOXIDE	92	GLUCO PERFECT 3 METER DEVI
gemcitabine hcl SOLN	50	GHT BLOOD GLUCOSE MONITOR		137
gemcitabine hcl SOLR	50	KIT	137	GLUCOCARD 01 BLOOD
GEMFIBROZIL POWD	43	GILENYA (fingolimod hcl)	184	GLUCOSE DEVI
gemfibrozil TABS	43	GILENYA 0.25 MG	184	137
GEMTESA	191	GIMOTI SOLN NA	120	GLUCOCARD 01 BLOOD
GENADEK STEP 1 CAPS	158	GINGER ROOT	92	GLUCOSE KIT
GENADEK STEP 2 CAPS	158	GINSENG ROOT	77	137
GENADUR KIT CO	111	GIVLAARI	124	GLUCOCARD 01-MINI GLUCOSE
GENERESS FE (norethindrone &		glatiramer acetate SOSY 20 MG/ML .	184	KIT
ethinyl estradiol-fe)	94	glatiramer acetate SOSY 40 MG/ML .	184	137
GENICIN VITA-Q TABS	160	GLEOLAN	113	GLUCOCARD SHINE CONNEX KIT .
GENISTEIN	77	GLEOSTINE 10 MG, 40 MG, 100 MG		137
GENOTROPIN CART SC	117		50	GLUCOCARD SHINE DEVI
GENOTROPIN MINQUICK PRSY		GLIADEL WAFER	50	137
117		glimepiride 1 MG, 2 MG	37	GLUCOCARD SHINE EXPRESS KIT
gentamicin in saline 0.8 MG/ML-0.9		glimepiride 3 MG	37	
%, 1 MG/ML-0.9 %, 1.2 MG/ML-0.9		glimepiride 4 MG	37	137
%, 1.6 MG/ML-0.9 %, 2 MG/ML-0.9		GLIPIZIDE POWD	37	GLUCOCARD SHINE KIT
%	4	glipizide TABS	37	137
gentamicin sulfate (ophth) SOLN	169	glipizide TB24	37	GLUCOCARD SHINE XL DEVI ..
gentamicin sulfate (topical) CREA		glipizide-metformin hcl	31	137
102		GLOBAL EASY GLIDE INSULIN		GLUCOCARD VITAL MONITOR KIT
gentamicin sulfate (topical) OINT	102	SYR	144	137
gentamicin sulfate IJ	4	GLOPERBA SOLN PO	124	GLUCOCARD X-METER KIT
GENTAMICIN SULFATE POWD	102	GLOSTRIPS STRP 1 MG	171	137
GENTIAN VIOLET POWD	103	glucagon (rdna)	32	GLUCOCOM AUTOLINK
GENVOYA	59	GLUCAGON EMERGENCY	32	TELEMONITOR MISC
GEODON (ziprasidone hcl)	54	GLUCAGON HCL (DIAGNOSTIC)		137
GEODON (ziprasidone mesylate)	54			GLUCOCOM BLOOD GLUCOSE
GERANIUM OIL	90			MONITOR DEVI
				137
				GLUCOCOM MONITOR KIT
				137
				GLUCONAVII BLOOD GLUCOSE
				SYS KIT
				137
				GLUCONOLACTONE
				77
				GLUCOSAMINE HCL
				77
				GLUCOSAMINE SULFATE
				77
				GLUCOSAMINE SULFATE NACL
				77
				GLUCOSAMINE SULFATE

POTASSIUM 77	GLYCINE SOYA PROTEIN 90	MG/360ML-440 MG/360ML 151
GLUCOTROL XL TB24 2.5 MG (glipizide) 37	GLYCOFUROL 77	GNP EUCALYPTUS 90
GLUCOTROL XL TB24 5 MG, 10 MG (glipizide) 37	GLYCOLIC ACID CRYSTALS 68	GNP PAIN RELIEF NIGHTTIME 128
GLUMETZA TB24 (metformin hcl) .32	GLYCOLIC ACID GRAN 68	GNP PEN NEEDLES 144
glutamine (sickle cell) 125	GLYCOPYRROLATE 77	GNP PEPPERMINT SPIRIT 90
GLUTAMINE POWD XX 166	GLYCOPYRROLATE PF SOSY IJ 188	GNP SODIUM SILICATE 90
GLUTARALDEHYDE IN WATER LIQD 77	glycopyrrolate SOLN IJ 188	GNP TRUE METRIX AIR METER KIT 137
GLUTATHIONE POWD 166	glycopyrrolate SOSY IJ 188	GNP TRUE METRIX GLUCOSE METER KIT 137
GLUTATHIONE-L POWD 166	glycopyrrolate TABS 1 MG, 2 MG 188	GOJJI MULTI-FUNCTIONAL SYSTEM DEVI 137
GLUTATHIONE-L REDUCED POWD 166	GLYCOPYRROLATE TABS 188	GOJJI MULTI-FUNCTIONAL SYSTEM KIT 137
glyburide micronized 1.5 MG, 3 MG, 6 MG 37	GLYCOSAMINOGLYCANS 77	GOLD SODIUM THIOMALATE ... 77
GLYBURIDE POWD 37	GLYCOTROL CAPS 162	GOLYTELY SOLR (peg 3350-kcl-sod bicarb-sod chloride-sod sulfate) .. 129
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glyburide-metformin 31	GLYCYRRHIZIC ACID 77	GOODSENSE BLOOD GLUCOSE KIT 137
GLYCATATE TABS 188	GLYNASE (glyburide micronized) 37	GOODSENSE ELECTROLYTE ADV CARE SOLN 151
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GLYCERIN LIQD 90	GLYXAMBI 31	GOPRELTO 164
GLYCERIN SOLN 90	GNP BORIC ACID POWD 92	GRALISE TABS (gabapentin (once- daily)) 185
GLYCERINE LIQD 90	GNP CALAMINE PLUS AERO ... 111	GRALISE TABS 185
GLYCEROL FORMAL LIQD 90	GNP CINNAMON 90	GRAMICIDIN D 77
GLYCEROL MONOOLEATE 77	GNP EASY TOUCH GLUCOSE METER DEVI 137	granisetron hcl SOLN IV 1 MG/ML, 4 MG/4ML 39
GLYCERYL MONOSTEARATE FLAK 77	GNP ELECTROLYTE POWDER PACK 151	granisetron hcl TABS 39
glycine (gu irrigant) SOLN 1.5 % . 123	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	

GRAPE CONCORD OS LIQD176	137	HALDOL DECANOATE (haloperidol decanoate)55
GRAPE FLAVOR LIQD176	GUARDIAN 4 TRANSMITTER .. 137	halobetasol propionate CREA108
GRAPE SEED OIL77	GUARDIAN CONNECT	halobetasol propionate FOAM108
GRAPEFRUIT FLAVOR OIL 176	TRANSMITTER137	halobetasol propionate OINT108
GRAPEFRUIT OIL 90	GUARDIAN LINK 3 TRANSMITTER	HALOG CREA (halcinonide) 108
GRASSTK SUBL3	137	HALOG OINT108
GREEN APPLE OS LIQD 176	GUARDIAN REAL-TIME REPLACE	HALOPERIDOL 77
GREEN SOAP77	PED 137	haloperidol decanoate 55
GREEN TEA76	GUARDIAN SENSOR (3)137	HALOPERIDOL DECANOATE ... 77
GREEN TEA EXTRACT LIQD77	GUARDIAN SENSOR 3 138	haloperidol lactate CONC 55
GREEN TEA OIL FRAGRANCE ..77	GUAVA FLAVOR LIQD176	haloperidol lactate SOLN 55
GRISOFULVIN MICRONIZED .. 77	GUM ARABIC179	haloperidol TABS 0.5 MG, 1 MG, 2
GRISOFULVIN MICROSIZE 77	GUM BASE (GELATIN)178	MG, 5 MG, 10 MG 55
griseofulvin microsize SUSP40	GVOKE HYPOPEN 1-PACK SOAJ	haloperidol TABS 20 MG 55
griseofulvin microsize TABS40	32	HAM FLAVOR LIQD176
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GUAIACOL90	32	HARVONI TABS61
GUAIFENESIN POWD99	GVOKE KIT SOLN32	HAVRIX 1440 EL U/ML193
guaifenesin TB12 1200 MG99	GVOKE PFS SOSY 1 MG/0.2ML .32	HAVRIX IM 720 EL U/0.5ML 193
guaifenesin TB12 600 MG99	GYMNEMA SYLVESTRIS LEAF ..77	HAWTHORN BERRY 77
guaifenesin-codeine SOLN98	GYNAZOLE-1194	HEALON5 PRO SOSY 170
guaifenesin-codeine SYRP98	GYNE-LOTTRIMIN 3 CREA	HEALTHPRO BLOOD GLUCOSE
GUANABENZ ACETATE77	(clotrimazole vaginal)194	MONITO KIT138
GUANETHIDINE SULFATE77	GYNE-LOTTRIMIN CREA	HEALTHY EYES SUPERVISION 2
guanfacine hcl (adhd)2	(clotrimazole vaginal)194	CAPS 158
guanfacine hcl44	HADLIMA PUSHTOUCH SOAJ5	HEART SAVIOR CAPS162
GUANIDINEACETIC ACID77	HADLIMA SOSY 5	HEMADY TABS96
GUAR GUM77	HAEGARDA SOLR SC124	HEMANGEOL SOLN PO 63
GUARANA SEED EXTRACT 77	HAIR/SKIN/NAILS CAPS158	HEMATEX LIQD127
GUARDIAN 4 GLUCOSE SENSOR .	halcinonide CREA 108	HEMATOXYLIN 77
	halcinonide SOLN 0.1 % 108	
	HALCION 0.25 MG (triazolam) ...128	

HEMICLOR 12.5 MG116	HEXTEND124	HUMALOG KWIKPEN SOPN 200 UNIT/ML33
HEMLIBRA124	HIBERIX SOLR IJ191	HUMALOG MIX 50/50 KWIKPEN SUPN34
HEMOCYTE PLUS CAPS126	HIGH POTENCY MULTIVITAMIN TABS160	HUMALOG MIX 75/25 KWIKPEN SUPN34
HEPARIN (PORCINE) IN NACL SOLN IV 0.45 %-12500 UNIT/250ML, 0.45 %-25000 UNIT/250ML, 0.45 %- 25000 UNIT/500ML22	HISTAMINE PHOSPHATE CRYSTALS77	HUMALOG MIX 75/25 SUSP34
heparin (porcine) in sodium chloride SOLN IV 0.9 %-1000 UNIT/500ML, 0.9 %-2000 UNIT/L22	HISTEX-DM SYRP98	HUMALOG SOCT34
HEPARIN SOD (PORCINE) IN D5W22	HM BORIC ACID POWD92	HUMALOG SOLN IJ34
heparin sodium (porcine) lock flush 10 UNIT/ML, 100 UNIT/ML22	HM EMBRACE TALK SYSTEM KIT 138	HUMALOG TEMPO PEN SOPN ..34
HEPARIN SODIUM (PORCINE) PF SOLN IJ22	HM ISOPROPYL ALCOHOL XX ..90	HUMAN ALBUMIN GRIFOLS ...125
heparin sodium (porcine) SOLN IJ 1000 UNIT/ML, 5000 UNIT/0.5ML, 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML22	HOMATROPINE METHYLBROMIDE POWD92	HUMAN CHORIONIC GONADOTROPIN74
HEPARIN SODIUM (PORCINE) SOSY IJ22	HOME PAP KIT114	HUMATROPE CART IJ117
HEPARIN SODIUM77	HONEY ALMOND FRAGRANCE ..77	HUMIRA (2 PEN) AJKT 40 MG/0.4ML5
HEPES77	HONEY FLAVOR LIQD176	HUMIRA (2 PEN) AJKT 40 MG/0.8ML6
HEPLISAV-B SOSY193	HORIZANT185	HUMIRA (2 PEN) AJKT 80 MG/0.8ML5
HEPTAMINOL77	HORMONE CREAM BASE181	HUMIRA (2 SYRINGE) PSKT 10 MG/0.1ML, 20 MG/0.2ML6
HERCEPTIN 150 MG51	HRT BASE (MEN)181	HUMIRA (2 SYRINGE) PSKT 40 MG/0.4ML6
HERCEPTIN HYLECTA52	HRT BASE181	HUMIRA (2 SYRINGE) PSKT 40 MG/0.8ML6
HERZUMA51	HRT BOTANICAL181	HUMIRA-CD/UC/HS STARTER AJKT 80 MG/0.8ML6
HESPAN (hetastarch (hes /0.7 or /0.75) in sodium chloride)124	HRT CREAM181	HUMIRA-PSORIASIS/UVEIT STARTER AJKT6
hetastarch (hes /0.7 or /0.75) in sodium chloride124	HRT CREAM BASE181	HUMULIN 70/30 KWIKPEN SUPN 34
HETLIOZ CAPS (tasimelteon)129	HRT CREAM BASE WOMEN ...181	HUMULIN 70/30 SUSP34
HETLIOZ LQ SUSP129	HRT ESSENTIAL181	HUMULIN N KWIKPEN SUPN34
	HRT HEAVY181	HUMULIN N SUSP34
	HRT NATURAL181	
	HULIO (2 PEN) AJKT5	
	HULIO (2 SYRINGE) PSKT5	
	HUMALOG JUNIOR KWIKPEN SOPN33	
	HUMALOG KWIKPEN SOPN 100 UNIT/ML33	

HUMULIN R SOLN IJ34	hydrochlorothiazide TABS 25 MG, 50 MG116	hydrocortisone (topical) CREA 0.5 % 108
HUMULIN R U-500 (CONCENTRATED) SOLN SC34	hydrocodone bitartrate CP12 10	hydrocortisone (topical) CREA 1 % 108
HUMULIN R U-500 KWIKPEN SOPN SC34	HYDROCODONE BITARTRATE CRYST78	hydrocortisone (topical) CREA 2.5 % 108
HUPERZINE SERRATE A77	HYDROCODONE BITARTRATE POWD78	hydrocortisone (topical) LOTN 2.5 % . 108
HW EMBRACE PRO GLUCOSE METER DEVI138	hydrocodone bitartrate T24A 10	hydrocortisone (topical) OINT 1 % 108
HW EMBRACE TALK BLOOD GLUCOSE DEVI138	hydrocodone bitartrate-homatropine methylbromide SOLN98	hydrocortisone (topical) OINT 2.5 % . 108
HYALURONATE SODIUM77	hydrocodone bitartrate-homatropine methylbromide TABS98	hydrocortisone (topical) SOLN 2.5 % 108
HYALURONIC ACID77	hydrocodone polistirex-chlorpheniramine polistirex SUER .98	HYDROCORTISONE 78
HYALURONIC ACID SODIUM77	hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML13	hydrocortisone acetate (rectal)15
HYCODAN SOLN (hydrocodone bitartrate-homatropine methylbromide)97	hydrocodone-acetaminophen SOLN 325 MG/15ML-10 MG/15ML13	hydrocortisone acetate (topical) OINT108
HYDRALAZINE HCL77	hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG13	HYDROCORTISONE ACETATE . 78
hydralazine hcl SOLN46	hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG13	hydrocortisone acetate w/ pramoxine CREA EX15
hydralazine hcl TABS46	hydrocodone-acetaminophen TABS 325 MG-2.5 MG13	hydrocortisone butyrate CREA ... 108
HYDRALYTE FREEZER POPS SOLN 151	hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG, 7.5 MG-200 MG . 13	hydrocortisone butyrate hydrophilic lipo base108
HYDRALYTE PACK151	HYDROCORT LOTION COMPLETE KIT THPK108	hydrocortisone butyrate LOTN ... 108
HYDRALYTE SOLN152	hydrocortisone (intrarectal)15	hydrocortisone butyrate OINT109
HYDRATING ELECTROLYTE PACK 152	hydrocortisone (rectal) EX 1 % 15	hydrocortisone butyrate SOLN ... 109
HYDRAZINE SULFATE78	hydrocortisone (rectal) EX 2.5 % .. 15	HYDROCORTISONE COMPLETE KIT THPK109
HYDREA (hydroxyurea)52		HYDROCORTISONE HEMISUCCINATE 78
HYDROCHLORIC ACID 68		HYDROCORTISONE MICRONIZED78
hydrochlorothiazide CAPS116		hydrocortisone sod succinate 100 MG 96
HYDROCHLOROTHIAZIDE POWD 116		
hydrochlorothiazide TABS 12.5 MG 116		

hydrocortisone TABS	96	HYDROXYETHYL CELLULOSE	188
hydrocortisone valerate CREA ...	109	POWD	78
hydrocortisone valerate OINT	109	HYDROXYETHYL METHACRYLATE	78
hydrocortisone w/acetic acid	172		78
HYDROFLUORIC ACID	78	HYDROXYM GEL	109
HYDROMORPHONE HCL (BULK)		HYDROXYPROGESTERONE	
SOLN XX	10	CAPROATE	78
hydromorphone hcl LIQD	10	HYDROXYPROPYL CELLULOSE	78
HYDROMORPHONE HCL PF SOLN		HYDROXYPROPYL	
IJ	10	METHYLCELLULOSE	78
HYDROMORPHONE HCL POWD 10		HYDROXYPROPYL-BETA-	
hydromorphone hcl SOLN IJ 0.2		CYCLOEXT	78
MG/ML, 1 MG/ML, 2 MG/ML, 4		HYDROXYQUINOLINE SULFATE	
MG/ML, 10 MG/ML, 50 MG/5ML, 500		82	
MG/50ML	11	HYDROXYTRYPTOPHAN (BULK)	
HYDROMORPHONE HCL SOLN IJ		92	
11		HYDROXYTRYPTOPHAN L-5 ...	92
HYDROMORPHONE HCL SUPP .	11	hydroxyurea	52
hydromorphone hcl TABS 2 MG ...	11	HYDROXYUREA	78
hydromorphone hcl TABS 4 MG ...	11	HYDROXYZINE HCL	78
hydromorphone hcl TABS 8 MG ...	11	hydroxyzine hcl SOLN 25 MG/ML, 50	
hydromorphone hcl TB24	11	MG/ML	17
HYDROQUINONE POWD	112	HYDROXYZINE HCL SOLN 50	
HYDROXOCOBALAMIN	78	MG/ML	17
hydroxocobalamin acetate SOLN	125	hydroxyzine hcl SYRP	17
HYDROXOCOBALAMIN HCL	78	hydroxyzine hcl TABS	17
HYDROXYAMPHETAMINE HBR .	78	hydroxyzine pamoate CAPS	17
HYDROXYCHLOROQUINE		HYDROXYZINE PAMOATE POWD	
SULFATE	78	17	
hydroxychloroquine sulfate 100 MG,		HYFTOR	110
200 MG	49	HYLENEX	154
hydroxychloroquine sulfate 300 MG,		hyoscyamine sulfate ELIX	188
400 MG	49	HYOSCYAMINE SULFATE POWD	
		hyoscyamine sulfate SOLN PO 0.125	
		MG/ML	188
		hyoscyamine sulfate SUBL 0.125 MG	
			188
		hyoscyamine sulfate TABS 0.125 MG	
			188
		hyoscyamine sulfate TB12 0.375 MG	
		188	
		HYPERHEP B SOLN IM	172
		HYPERHEP B SOSY	172
		HYPERRAB SOLN	172
		HYPERRHO S/D SOSY IM 1500	
		UNIT	172
		HYPERRHO S/D SOSY IM 250 UNIT	
			172
		HYPERTET SOSY	172
		HYPODERMIC NEEDLE	144
		HYPROMELLOSE	78
		HYPROMELLOSE METHOCEL	
		K100M	78
		HYRIMOZ SOAJ	6
		HYRIMOZ SOSY	6
		HYRIMOZ-CROHNS/UC STARTER	
		SOAJ	6
		HYRIMOZ-PED<40KG CROHN	
		STARTER SOSY	6
		HYRIMOZ-PED>=40KG CROHN	
		START SOSY	6
		HYRIMOZ-PLAQ PSOR/UEIT	
		START SOAJ	6
		HYSINGLA ER T24A	11
		HYZAAR (losartan potassium &	
		hydrochlorothiazide)	45

ibandronate sodium TABS	117	ifosfamide SOLN	50	6 MG/0.5ML (sumatriptan succinate) .	149
IBRANCE CAPS	52	ifosfamide SOLR	50	IMITREX STATDOSE SYSTEM	
IBRANCE TABS	52	IFOSFAMIDE SOLR	50	SOAJ 4 MG/0.5ML (sumatriptan	
IBSRELA	122	IGALMI FILM	128	succinate)	149
ibuprofen CHEW	7	IGLUCOSE MONITORING SYSTEM		IMITREX STATDOSE SYSTEM	
ibuprofen lysine	7	KIT	138	SOAJ 6 MG/0.5ML (sumatriptan	
IBUPROFEN POWD	7	IHEALTH BLOOD GLUCOSE TEST		succinate)	149
ibuprofen SUSP 100 MG/5ML, 200		STR STRP	114	IMITREX TABS (sumatriptan	
MG/10ML	7	IHEALTH CONTROL SOLUTION		succinate)	149
ibuprofen SUSP 40 MG/ML, 50		LIQD	138	IMMPHENTIV SOLN IV	195
MG/1.25ML	7	IHEALTH GLUCO+ KIT 10 KIT ...	138	IMMUNE ESSENTIALS DAILY CAPS	
ibuprofen TABS 200 MG	7	IHEALTH GLUCO+ KIT 100 KIT .	138		158
ibuprofen TABS 400 MG, 600 MG,		ILEVRO	171	IMMUNERX CAPS	162
800 MG	7	ILLUCCIX CONFIGURATION A KIT .		IMMUNICARE CAPS	162
ibuprofen-acetaminophen TABS	7	113		IMODIUM A-D CAPS (loperamide	
ibuprofen-famotidine	7	ILLUCCIX CONFIGURATION B KIT .		hcl)	37
ibutilide fumarate	18	113		IMODIUM A-D TABS (loperamide	
icatibant acetate SOSY	124	ILUMYA	105	hcl)	37
ICHTHAMMOL POWD	112	IMCIVREE	2	IMOGAM RABIES-HT SOLN 300	
ICLUSIG	52	IMIDUREA	78	UNIT/2ML	172
icosapent ethyl	42	imipenem-cilastatin IV	47	IMOVAX RABIES SUSR	193
IDACIO (2 PEN) AJKT	6	IMIPRAMINE HCL POWD	30	IMPEKLO LOTN	109
IDACIO (2 SYRINGE) PSKT	6	imipramine hcl TABS	30	IMURAN TABS (azathioprine)	154
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indomethacin CPR 7	INPEN 100-PINK-NOVOLOG-FIASP DEVI 144	INSULIN GLARGINE SOLOSTAR SOPN 300 UNIT/ML 35
INDOMETHACIN POWD 7	INQOVI 52	INSULIN GLARGINE-YFGN SOLN 35
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INVEGA SUSTENNA 39 MG/0.25ML 55	ipratropium bromide SOLN 0.02 % 18	ISOPROPYL ALCOHOL (RUBBING) XX90
INVEGA SUSTENNA 78 MG/0.5ML 55	ipratropium-albuterol SOLN21	ISOPROPYL ALCOHOL XX 100 %, 70 %90
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INVEGA TRINZA 410 MG/1.32ML 55	irbesartan-hydrochlorothiazide45	isopropyl alcohol, rubbing XX90
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ketorolac tromethamine SOLN IM 60 MG/2ML	7	KONVOMEF SUSR	190	lacosamide TABS	24
ketorolac tromethamine TABS	7	KORSUVA	156	LACRISERT	167
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ketotifen fumarate (ophth) 0.035 % 171		K-PHOS-NEUTRAL (pot phosphate monobasic w/ sod phosphate dibasic & monobasic)	153	lactase TABS 3000 UNIT, 9000 UNIT	115
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KETOTIFEN HYDROGEN FUMARATE	79	KRIS-ESTER 236	181	lactated ringer's	152
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KIMYRSA	47	K-TAB TBCR 10 MEQ, 20 MEQ (potassium chloride)	153	LACTOSE	179
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KINDERLYTE PACK	152	KYMRIAH	51	LACTOSE HYDROUS	179
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KIWI FRAGRANCE	79	labetalol hcl TABS 300 MG	63	LAMICTAL ODT KIT (lamotrigine) .	24
KLARON (sulfacetamide sodium (acne))	101	labetalol hcl TABS 400 MG	63	LAMICTAL ODT TBDP (lamotrigine) .	25
KLEAR GUMMY BASE	178	LABETALOL HCL-DEXTROSE ...	63	LAMICTAL STARTER KIT 25 MG (lamotrigine)	25
KLONOPIN TABS (clonazepam) ..	24	LABETALOL HCL-SODIUM CHLORIDE	63	LAMICTAL TABS (lamotrigine)	25
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levamlodipine maleate	65	levofloxacin (ophth) 0.5 %	169	LEVSIN TABS (hyoscyamine sulfate)	189
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LEVEMIR FLEXPEN SOPN	35	LEVOFLOXACIN HEMIHYDRATE 79		LEXAPRO TABS 10 MG (escitalopram oxalate)	29
LEVEMIR SOLN	35	levofloxacin in d5w	120	LEXAPRO TABS 20 MG (escitalopram oxalate)	29
LEVETIRACETAM	79	levofloxacin SOLN PO	120	LEXAPRO TABS 5 MG (escitalopram oxalate)	29
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levetiracetam SOLN PO 100 MG/ML, 500 MG/5ML	25	levonorgestrel & eth estradiol TABS 94		L-GLUTAMIC ACID HCL POWD .	115
levetiracetam SOLN PO 100 MG/ML . 25		levonorgestrel (emergency oc) 1.5 MG	95	L-GLUTAMIC ACID MONOSOD SALT	80
levetiracetam TABS 1000 MG	25	levonorgestrel-eth estradiol (triphasic)	94	L-GLUTAMINE CRYST	166
levetiracetam TABS 250 MG, 750 MG	25	levonorgestrel-ethinyl estradiol (91- day)	94	L-GLUTAMINE POWD XX	167
levetiracetam TABS 500 MG	25	levonorgestrel-ethinyl estradiol (91- day) 0.03 MG-0.15 MG	94	L-GLUTATHIONE CRYST	167
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levocarnitine (metabolic modifiers) SOLN IV 200 MG/ML	118	levorphanol tartrate TABS	11	LIALDA TBEC (mesalamine)	121
levocarnitine (metabolic modifiers) SOLN PO 1 GM/10ML	118	LEVOTHYROXINE SODIUM	79		
levocarnitine (metabolic modifiers) TABs	118	levothyroxine sodium CAPS	187		
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LIBERTY BLOOD GLUCOSE METER DEVI	138	lidocaine in d5w 5 %-4 MG/ML, 5 %- 8 MG/ML	18	LINZESS	122
LIBERVANT FILM	24	lidocaine OINT 5 %	111	LIOETHYRONINE	79
LICORICE DEGLYCYRRHIZINATED	79	LIDOCAINE POWD	79	LIOETHYRONINE SODIUM	79
LICORICE FLAVOR LIQD	176	lidocaine PTCH 4 %, 5 %	111	lioethyronine sodium SOLN	188
LICORICE ROOT POWD	92	lidocaine w/ epinephrine SOLN ...	130	lioethyronine sodium TABS	188
LIDAFLEX PTCH	111	LIDOCAINE-EPINEPHRINE SOLN 1 %-1:100000, 2 %-1:200000	130	LIP BALM BASE NATURAL	181
LIDOCAINE BASE POWD	79	LIDOCAINE-HYDROCORTISONE ACE GEL	15	LIPACTIVE INCA INCHI WO	78
lidocaine CREA 4 %	111	lidocaine-hydrocortisone acetate (rectal) CREA EX	15	LIPITOR TABS (atorvastatin calcium)	43
LIDOCAINE CRYST	79	lidocaine-hydrocortisone acetate (rectal) KIT	15	LIPMAX SOLN	179
LIDOCAINE HCL (CARDIAC) PF SOLN	18	lidocaine-prilocaine CREA	111	LIPOFEN CAPS (fenofibrate)	43
LIDOCAINE HCL (CARDIAC) SOSY 100 MG/5ML	18	lidocaine-prilocaine KIT	111	LIPOIC ACID	70
lidocaine hcl (cardiac) SOSY	18	LIDOPURE PATCH	111	LIPOIL OIL	179
lidocaine hcl (local anesth.) SOLN 131		LIDOTRAL CREA	111	LIOPEN ANHYDROUS	181
lidocaine hcl (local anesth.) SOSY IJ 100 MG/5ML	131	LIDOTRAN CREA	111	LIPOSOMAL HAIR	181
lidocaine hcl (mouth-throat) 2 % ..	156	LIKMEZ SUSP	46	LIPOTRIAD VISION SUPPORT CAPS	162
lidocaine hcl (mouth-throat) 4 % ..	156	LIME FLAVOR OIL	176	LIPOTRIAD VISION SUPPORT PLUS CAPS	162
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lidocaine hcl CREA 3 %, 4 %	111	LIMONENE	79	LIPOVAN BASE CREA	181
lidocaine hcl GEL 2 %, 2.8 %	111	lincomycin hcl	48	LIQUICAL PLUS LIQD	151
lidocaine hcl GEL 2 %	111	LINCOMYCIN HCL	79	LIQUID I.V. PACK	152
LIDOCAINE HCL MONOHYDRATE ..	79	LINEZOLID IN SODIUM CHLORIDE	48	LIQUIGEL COMPLEX	179
lidocaine hcl PRSY	111	linezolid SOLN	48	liraglutide	33
lidocaine hcl SOLN	111	linezolid SUSR	48	lisdexamfetamine dimesylate CAPS 10 MG	1
LIDOCAINE HCL SOLN	131	linezolid TABS	48	lisdexamfetamine dimesylate CAPS 1	
LIDOCAINE HCL SOSY IJ 60 MG/3ML, 100 MG/5ML	131	LINOLEIC ACID	79	lisdexamfetamine dimesylate CHEW . 1	
		LINSEED OIL	90	lisinopril & hydrochlorothiazide ...	45
				LISINOPRIL	79

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L-ISOLEUCINE POWD XX	167	LO LOESTRIN FE TABS	94	loratadine CHEW	41
LISSAMINE GREEN B	175	LOCAMETZ KIT	113	loratadine TABS	41
LITFULO	110	LOCOID LIPOCREAM	109	loratadine TBDP 10 MG	41
lithium	54	LOCOID LOTN (hydrocortisone butyrate)	109	LORAZEPAM	80
lithium carbonate CAPS	54	LOCUST BEAN GUM	74	lorazepam CONC	17
LITHIUM CARBONATE POWD ...	54	LODOSYN (carbidopa)	53	lorazepam SOLN	17
lithium carbonate TABS	54	lofexidine hcl	183	lorazepam TABS 0.5 MG, 2 MG ...	17
lithium carbonate TBCR	54	LOHIST-D LIQD	98	lorazepam TABS 1 MG	17
LITHIUM CITRATE TETRAHYDRATE	79	LOKELMA	156	LOREEV XR CS24	17
LITHOBID TBCR (lithium carbonate) .	54	LOLLIBASE	179	L-ORNITHINE HYDROCHLORIDE	82
LITHOSTAT	123	LOMOTIL TABS (diphenoxylate w/ atropine)	37	L-ORNITHINE POWD	167
LIVALO (pitavastatin calcium)	43	loperamide hcl CAPS	37	losartan potassium & hydrochlorothiazide	45
LIVER CONCENTRATE LIQD ...	176	LOPERAMIDE HCL POWD	37	losartan potassium	44
LIVER FLAVOR LIQD	176	loperamide hcl TABS	38	LOSARTAN POTASSIUM	80
LIVER FLAVOR POWD	176	LOPID TABS (gemfibrozil)	43	LOSEASONIQUE (levonorgestrel-ethinyl estradiol (91-day))	94
LIVMARLI PO 10 MG, 15 MG, 20 MG, 30 MG	121	lopinavir-ritonavir SOLN	59	LOTEMAX OINT	170
LIXOFEN KIT	104	lopinavir-ritonavir TABS 25 MG-100 MG	60	LOTEMAX SM GEL	170
L-LEUCINE POWD XX	167	lopinavir-ritonavir TABS 50 MG-200 MG	60	LOTENSIN 10 MG, 20 MG (benazepril hcl)	44
L-LYSINE HCL POWD	79	LOPRESSOR TABS 100 MG (metoprolol tartrate)	63	LOTENSIN 40 MG (benazepril hcl)	44
L-MENTHOL	92	LOPRESSOR TABS 50 MG (metoprolol tartrate)	63	LOTENSIN HCT 12.5 MG-10 MG, 12.5 MG-20 MG, 25 MG-20 MG (benazepril & hydrochlorothiazide)	45
L-METHIONINE POWD XX	167	LOPROX	103	loteprednol etabonate GEL	170
L-METHYLFOLATE CA ME-CBL NAC	115	LOPROX SUSP (ciclopirox olamine) .	103	loteprednol etabonate SUSP 0.2 %	170
L-METHYLFOLATE CALCIUM ...	79	loratadine & pseudoephedrine TB12 .	98	loteprednol etabonate SUSP 0.5 %	170
L-METHYLFOLATE-ALGAE-B12-B6	115	LORATADINE	80		
L-METHYL-MC	115				

LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (amlodipine besylate-benazepril hcl) . 45	L-TYROSINE POWD XX 167	LYVISPAH PACK 163
LOTRONEX (alosetron hcl) 122	lubiprostone 120	MACA ROOT 80
LOVASTATIN 80	LUBRAJEL NP 181	MACADAMIA NUT OIL 90
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POLYSORBATE 60	90	phosphate dibasic & monobasic .153	%, 5 %-0.15 %-0.225 %, 5 %-0.15 %-
POLYSORBATE 80	90	POTASH SULFURATED LUMP	0.9 %, 5 %-10 MEQ/L-0.45 %, 5 %-
POLYTRIM (polymyxin b-		MISC	20 MEQ/L-0.2 %, 5 %-20 MEQ/L-
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POLY-VI-FLOR SUSP	160	153	0.45 %, 5 %-40 MEQ/L-0.45 %, 5 %-
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83		POTASSIUM ASPARTATE	0.45 %, 20 MEQ/L-0.9 %, 40 MEQ/L-
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QC CALAMINE LOTN	112	QUFLORA FE PEDIATRIC LIQD	160	QUINTET BLOOD GLUCOSE SYSTEM DEVI	140
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QVAR REDIHALER 40 MCG/ACT	20	RAYALDEE	118	REGONOL SOLN IV	49
QVAR REDIHALER 80 MCG/ACT	19	RAYASAL CREA	110	RELAFEN DS	8
RA EPSOM SALT GRAN XX	130	RAYASORE KIT	106	RELCARE TABS	160
RA PETROLEUM JELLY	182	RAYOS TBEC	97	RELENZA DISKHALER	62
RABAVERT	193	RDT BASE POWD	180	RELEXXII TBCR 18 MG, 27 MG, 54 MG	3
rabeprazole sodium TBEC	190	RDT-PLUS POWD	180	RELEXXII TBCR 36 MG	3
RACEPINEPHRINE HCL	84	REBIF REBIDOSE SOAJ	184	RELEXXII TBCR 45 MG, 63 MG, 72 MG (methylphenidate hcl)	3
RAGWITEK SUBL	4	REBIF REBIDOSE TITRATION PACK SOAJ	184	RELEXXII TBCR 45 MG, 63 MG, 72 MG	3
RALDESY SOLN PO 10 MG/ML ..	29	REBIF SOSY	184	RELION CONFIRM GLUCOSE MONITOR KIT	140
raloxifene hcl	118	REBIF TITRATION PACK SOSY	184	RELION GLUCOSE TEST STRIPS STRP	114
ramelteon	129	REBLOZYL	126	RELION INSULIN SYRINGE	145
ramipril CAPS	44	REBYOTA	122	RELION KETONE TEST STRP ..	114
ranolazine TB12	16	RECARBRIO	47	RELION MICRO KIT	140
RAPAFLO (silodosin)	123	RECOMBIVAX HB SUSP	193	RELION PREMIER BLU MONITOR DEVI	140
RAPAMUNE TABS (sirolimus) ...	155	RECOMBIVAX HB SUSY	193	RELION PREMIER CLASSIC DEVI 140	
RAPESEED OIL	84	RECOTHROM	127	RELION PREMIER COMPACT SYSTEM KIT	140
RAPIVAB	62	RECOTHROM SPRAY KIT	127	RELION PREMIER VOICE MONITOR DEVI	140
rasagiline mesylate	54	RED YEAST RICE	84	RELION PRIME MONITOR DEVI 140	
RASAGILINE MESYLATE	84	RED YEAST RICE EXTRACT	84	RELION TRUE MET AIR GLUC METER KIT	140
RASPBERRY CONCENTRATE CONC	177	REFRESH	167	RELION ULTIMA GLUCOSE	
RASPBERRY FLAVOR ARTIFICIAL CONC	177	REFRESH DIGITAL PF	167		
RASPBERRY FLAVOR LIQD	177	REFRESH OPTIVE ADVANCED PF 167			
RASPBERRY FLAVOR POWD ..	177	REFRESH OPTIVE MEGA-3	167		
RASPBERRY OS LIQD	177	REFRESH RELIEVA PF SOLN ..	167		
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		REFUAH PLUS MONITORING SYSTEM KIT	140		
		regadenoson	113		

SYSTEM KIT	140	RESORCINOL CRYSTALS	93	REXALL BLOOD GLUCOSE SYSTEM KIT	140
RELISTOR SOLN	122	RESORCINOL POWD	93	REXTOVY LIQD	38
RELISTOR TABS	122	RESTASIS EMUL (cyclosporine (ophth))	169	REXULTI	58
RELNATE DHA CAPS	162	RESTASIS MULTIDOSE EMUL ..	169	REYATAZ CAPS 200 MG (atazanavir sulfate)	60
RELPAK (eletriptan hydrobromide) 149		RESTORIL 15 MG, 30 MG (temazepam)	128	REYATAZ CAPS 300 MG (atazanavir sulfate)	60
RELPAK 20 MG (eletriptan hydrobromide)	149	RESTORIL 7.5 MG, 22.5 MG (temazepam)	128	REYATAZ PACK	60
RELTONE CAPS	120	RESVERATROL	84	REYVOW	149
REMDESIVIR SOLR 100 MG	62	RETACRIT	126	REZDIFFRA	121
REMEDIENT CAPS	159	RETAINE VISION CAPS	163	REZIPRES 47 MG/10ML	196
REMERON SOLTAB TDBP 15 MG (mirtazapine)	27	RETAVASE HALF-KIT	125	REZUROCK	154
REMERON SOLTAB TDBP 30 MG (mirtazapine)	27	RETIN-A CREA (tretinoin)	101	REZVOGLAR KWIKPEN	36
REMERON SOLTAB TDBP 45 MG (mirtazapine)	27	RETIN-A GEL 0.01 % (tretinoin) .	101	REZZAYO	40
REMERON SOLTAB TDBP 15 MG (mirtazapine)	27	RETIN-A GEL 0.025 % (tretinoin)	101	R-GENE 10	113
REMERON TABS 15 MG (mirtazapine)	27	RETIN-A MICRO (tretinoin microsphere)	101	RHOFADE	112
REMERON TABS 30 MG (mirtazapine)	27	RETIN-A MICRO PUMP (tretinoin microsphere)	101	RHOGAM ULTRA-FILTERED PLUS SOSY IM	173
remifentanyl hcl	12	RETIN-A MICRO PUMP	101	RHOPHYLAC SOSY IJ	173
RENEWCREAM HRT	182	RETINAL	84	RHOPRESSA	169
RENFLEXIS	121	RETINOIC ACID POWD	101	ribavirin (hepatitis c) CAPS	61
RENOVAGE	87	RETINOL MOLECULAR FILM OIL	89	ribavirin (hepatitis c) TABS 200 MG 61	
RENTHYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	188	RETROVIR CAPS (zidovudine) ...	60	ribavirin	62
RENEVELA PACK (sevelamer carbonate)	122	RETROVIR SOLN	60	RIBAVIRIN	84
RENEVELA TABS (sevelamer carbonate)	122	RETROVIR SYRP (zidovudine) ...	60	RIBOFLAVIN	85
repaglinide	37	REVATIO SUSR (sildenafil citrate (pulmonary hypertension))	67	RIBOFLAVIN 5-PHOSPHATE SODIUM	85
RESERPINE POWD	44	REVATIO TABS (sildenafil citrate (pulmonary hypertension))	67	riboflavin TABS	196
		REVUFORJ 25 MG	51	RIBOFLAVIN-5-PHOSPHATE SODIUM	85

RIBOSE (D)	75	RISPERDAL SOLN (risperidone) ..	55	LIQD	99
RIDAURA	6	RISPERDAL TABS 0.5 MG, 1 MG, 2		ROCALTROL CAPS (calcitriol) ...	118
rifabutin	50	MG, 3 MG, 4 MG (risperidone)	55	ROCKLATAN	170
RIFAMPIN	85	risperidone microspheres	55	ROCURONIUM BROMIDE	85
rifampin CAPS	50	risperidone SOLN	55	rocuronium bromide SOLN	165
rifampin SOLR	50	risperidone TABS 0.25 MG	55	roflumilast	19
RIFAXIMIN	85	risperidone TABS 0.5 MG, 1 MG, 2		roflumilast 500 MCG	19
RIGHTEST GM100 BLOOD		MG, 3 MG, 4 MG	55	RONIDAZOLE	85
GLUCOSE KIT	140	risperidone TBDP	55	ROOT BEER FLAVOR LIQD	177
RIGHTEST GM300 BLOOD		RITALIN LA CP24 (methylphenidate		ropinirole hydrochloride TABS 0.25	
GLUCOSE KIT	140	hcl)	3	MG, 3 MG, 4 MG	53
RIGHTEST GM550 BLOOD		RITALIN TABS 10 MG, 20 MG		ropinirole hydrochloride TABS 0.5	
GLUCOSE KIT	140	(methylphenidate hcl)	3	MG, 1 MG, 2 MG, 5 MG	53
RIGHTEST GT333 BLOOD		RITALIN TABS 5 MG		ropinirole hydrochloride TB24	53
GLUCOSE DEVI	140	(methylphenidate hcl)	3	ROPIVACAINE HCL	85
RILUTEK TABS (riluzole)	165	RITEFLO DEVI	148	ropivacaine hcl SOLN IJ	131
riluzole TABS	165	ritonavir TABS	60	ROSE BENGAL B	85
rimantadine hydrochloride TABS ..	62	RITUXAN	51	ROSE OIL (BULK)	91
RIMSO-50	123	RITUXAN HYCELA	52	ROSEMARY OIL	91
ringer's	152	rivaroxaban TABS 2.5 MG	22	ROSIN MISC	93
ringer's irrigation	155	rivastigmine 13.3 MG/24HR	183	ROSIN POWD	93
RINVOQ LQ SOLN	4	rivastigmine 4.6 MG/24HR, 9.5		ROSUVASTATIN CALCIUM	85
RINVOQ TB24	4	MG/24HR	183	rosuvastatin calcium TABS	43
RIOMET SOLN (metformin hcl)	32	rivastigmine tartrate CAPS	183	rowasa (mesalamine w/ cleanser)	
risedronate sodium TABS 150 MG		rizatriptan benzoate TABS	149	121	
117		rizatriptan benzoate TBDP	149	ROXICODONE TABS 15 MG, 30 MG	
risedronate sodium TABS 35 MG	117	ROBINUL TABS (glycopyrrolate) .	189	(oxycodone hcl)	12
risedronate sodium TABS 5 MG, 30		ROBINUL-FORTE TABS		ROXYBOND TABA	12
MG	117	(glycopyrrolate)	189	ROZEREM (ramelteon)	129
risedronate sodium TBEC	117	ROBITUSSIN SEVERE MULTI-		ROZLYTREK CAPS	52
RISPERDAL CONSTA (risperidone		SYMP 10 MG/20ML-400 MG/20ML-		RUBIDIUM CHLORIDE	85
microspheres)	55	650 MG/20ML-20 MG/20ML	99		
		ROBITUSSIN SEVERE NIGHTTIME			

RUCONEST	124	SALICYLIC ACID POWD	85	SAVAYSA	22
rufinamide SUSP	25	SALICYLIC ACID SOLN	85	SAVELLA TABS	184
rufinamide TABS	25	SALIMEZ CREA	111	SAVELLA TITRATION PACK MISC	184
RUKOBIA	60	saline SOLN 0.65 %	164	SAW PALMETTO BERRY POWD	85
RUTIN	85	salsalate	10	saxagliptin hcl	32
RUXIENCE	51	SALSALATE	85	saxagliptin-metformin hcl	31
RYALTRIS	164	SALYCIM CREA	111	SAXENDA	2
RYANODEX SUSR	163	SAMBUCUS ELDERBERRY		SCAR CARE BASE ENHANCED	182
RYBELSUS TABS	33	IMMUNE LOZG	155	SCARLET RED	85
RYBREVANT	51	SAMBUCUS ELDERBERRY LOZG	155	SCARTRATE	112
RYKINDO SRER	55	SAMBUCUS ELDERBERRY		SCENESSE	112
RYLAZE	52	VITAMIN C LOZG	155	scopolamine	39
RYTARY CPR	53	SAMBUCUS ELDERBERRY ZINC		SCOPOLAMINE HBR POWD	189
RYTHMOL SR CP12 (propafenone		LOZG	155	SEASONIQUE (levonorgestrel-	
hcl)	18	SANCUSO PTCH	39	ethinyl estradiol (91-day))	95
RYVENT TABS	41	SANDIMMUNE CAPS (cyclosporine)	155	SECRETIN-MANNITOL	85
SABRIL PACK (vigabatrin)	26	SANDIMMUNE SOLN IV 50 MG/ML .	155	SECUADO	56
SABRIL TABS (vigabatrin)	26	SANDIMMUNE SOLN PO 100		SECURA PROTECTIVE	182
SACCHARIN CALCIUM	85	MG/ML	155	SECURESAFE HYPODERMIC	
SACCHARIN POWD	115	SANDOSTATIN LAR DEPOT KIT		NEEDLE	145
SAFFLOWER OIL	91	(octreotide acetate)	119	SECURESAFE SYRINGE/NEEDLE .	145
SAGE LEAF	85	SAPHNELO	156	SEGLENTIS	14
SALAGEN 5 MG (pilocarpine hcl		SAPHRIS (asenapine maleate) ...	56	SEGLUROMET	31
(oral))	157	SAPHRIS 5 MG, 10 MG (asenapine		SELARSDI SOSY SC 45 MG/0.5ML,	
SALICATE LIQD	111	maleate)	56	90 MG/ML	105
SALICYLIC ACID CRYST	85	SARCLISA	51	SELECT-OB CHEW	162
salicylic acid FOAM	111	SARDINE FLAVOR LIQD	177	SELECT-OB+DHA MISC	162
salicylic acid GEL 6 %	111	SARNA LOTN (camphor & menthol) .	104	selegiline hcl CAPS	54
salicylic acid LIQD 2 %, 17 %, 27.5 %		SASSAFRAS OIL	91	SELEGILINE HCL POWD	54
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SELENIOUS ACID154	SENOKOT LAXATIVE GUMMIES	SFROWASA ENEM 121
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SELZENTRY TABS 150 MG	SEROTONIN HCL85	SILICONE ELASTOMER BLEND
(maraviroc)60	SERTRALINE HCL85	GEL 85
SELZENTRY TABS 25 MG, 75 MG 60	SERTRALINE HCL CAPS29	SILICONE ELASTOMER BLEND LIQD85
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spironolactone SUSP	116	STEARIC ACID FLAK	180	STRIVERDI RESPIMAT	21
spironolactone TABS	116	STEARIC ACID POWD	180	STRONTIUM CHLORIDE CRYST ..	87
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SQUALANE LIQD	87	STEGLUJAN	31	SUBOXONE FILM SL 2 MG-8 MG, 3 MG-12 MG (buprenorphine hcl- naloxone hcl dihydrate)	14
SQUALANE OIL	87	STELARA 130 MG/26ML	121	SUCCIMER DMSA POWD	87
SQUALENE	87	STELARA SOSY	105	SUCCINIC ACID	87
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TAMIFLU CAPS 45 MG, 75 MG (oseltamivir phosphate)	62	TAZAROTENE FOAM	102	telmisartan-amlodipine	46
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TESTIM GEL TD (testosterone) ...	15	TETRAHYDROBIOPTERIN DIHCL		CAPS	159
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testosterone cypionate SOLN IM 100		tetrahydrozoline hcl (ophth) 0.05 %		THIABENDAZOLE POWD	16
MG/ML	15	169		THIAMINE HCL POWD	196
testosterone cypionate SOLN IM 200		TETRAHYDROZOLINE HCL	88	thiamine hcl SOLN	196
MG/ML	15	tetrahydrozoline w/ zinc sulfate ..	169	thiamine hcl TABS 100 MG	196
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MG/ACT, 20.25 MG/1.25GM, 25		TEZSPIRE SOAJ	18	196	
MG/2.5GM, 40.5 MG/2.5GM	15	TEZSPIRE SOSY	18	THIMEROSAL POWD	58
testosterone GEL TD 1 %, 50		TGT BLOOD GLUCOSE		THIOGUANINE	88
MG/5GM	15	MONITORING KIT	141	thioridazine hcl	57
testosterone GEL TD 1.62 %, 1.62 %		THALITONE	117	THIORIDAZINE HCL	88
.....	15	THEANINE	88	thiothixene	58
testosterone GEL TD 1.62 %, 10		THEO-24 CP24	21	THREONINE POWD XX	167
MG/ACT	15	THEOBROMINE	88	THROMBI-GEL 10	127
TESTOSTERONE MICRONIZED		THEOPHYLLINE	94	THROMBI-GEL 100	127
CRYS	88	THEOPHYLLINE ANHYDROUS ..	94	THROMBI-GEL 40	127
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TESTOSTERONE POWD	88	theophylline TB12	21	THROMBIN-JMI SOLR	127
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TD SUSP	188	THERA TABS	160	THYMOL IODIDE PURIFIED	94
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THYQUIDITY SOLN PO	188	TIMOPTIC-XE SOLG (timolol maleate (ophth))	168	tobramycin NEBU	4
THYROGEN 0.9 MG	113	TINACTIN CREA (tolnaftate)	104	TOBRAMYCIN SULFATE POWD ..	4
THYROID (PORCINE)	88	tinidazole	46	tobramycin sulfate SOLN IJ 1.2 GM/30ML, 10 MG/ML, 80 MG/2ML ..	4
THYROID POWD 0.23 %	188	TINIDAZOLE	94	tobramycin sulfate SOLN IJ 2 GM/50ML	4
THYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	188	tinidazole 500 MG	46	tobramycin sulfate SOLR	4
tiagabine hcl	26	TINOGARD TL	71	tobramycin-dexamethasone SUSP 170	
TIAZAC 120 MG, 180 MG, 300 MG, 360 MG, 420 MG (diltiazem hcl extended release beads)	65	tioconazole vaginal 6.5 %	194	TOBREX OINT	169
TIAZAC 240 MG (diltiazem hcl extended release beads)	65	tiotropium bromide monohydrate CAPS	19	TOCOPHERYL ACID SUCC D-ALPHA	89
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TIGAN SOLN	39	TITANIUM DIOXIDE POWD	88	tolmetin sodium CAPS	8
tigecycline	187	TIVICAY PD TBSO	60	tolmetin sodium TABS 600 MG	8
TIGECYCLINE	187	TIVICAY TABS 10 MG, 25 MG	60	tolnaftate CREA	104
TIKOSYN (dofetilide)	18	TIVICAY TABS 50 MG	60	TOLNAFTATE POWD XX	104
timolol	167	TIZANIDINE HCL	88	TOLSURA CAPS	40
timolol maleate (ophth) SOLG 0.25 %	167	tizanidine hcl CAPS	163	tolterodine tartrate CP24	191
timolol maleate (ophth) SOLG	168	tizanidine hcl TABS	163	tolterodine tartrate TABS	191
timolol maleate (ophth) SOLN 0.5 % .	168	TLANDO CAPS	15	TOLTRAZURIL	88
timolol maleate (ophth) SOLN	168	TM-DAILY VITE TABS	160	TOLU BALSAM MISC	88
TIMOLOL MALEATE POWD	64	TNKASE	125	TOLUIDINE BLUE O POWD	88
timolol maleate TABS	64	TOBI NEBU (tobramycin)	4	TOMMY GEL	182
TIMOPTIC OCUDOSE SOLN (timolol maleate (ophth))	168	TOBI PODHALER CAPS	4	TOOMEY SYRINGE	145
		TOBRADEX OINT	170	TOPAMAX SPRINKLE CPSP 15 MG (topiramate)	25
		TOBRADEX ST SUSP	170	TOPAMAX SPRINKLE CPSP 25 MG	
		tobramycin (ophth) SOLN	169		

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UNIT/ML	37	TRIAMCINOLONE ACETONIDE	trihexyphenidyl hcl TABS	53
TRESIBA SOLN	37	SUSP 40 MG/ML, 80 MG/ML	TRIJARDY XR	31
tretinoin CREA 0.025 %, 0.05 %, 0.1		triamcinolone acetonide SUSP 40	TRIKAFTA TBPk	186
%	102	MG/ML	TRILEPTAL SUSP (oxcarbazepine)	
tretinoin GEL 0.01 %	102	TRIAMCINOLONE DIACET	26	
tretinoin GEL 0.025 %	102	MICRONIZE	TRILEPTAL TABS (oxcarbazepine)	
tretinoin GEL 0.05 %	102	TRIAMCINOLONE DIACETATE ..	26	
tretinoin microsphere	102	TRIAMCINOLONE HEXACETONIDE	TRILIPIX (choline fenofibrate)	43
TRETINOIN POWD	102		88	
TREXALL TABS 5 MG, 7.5 MG, 10		triamterene & hydrochlorothiazide	TRILOSTANE	88
MG, 15 MG	50	CAPS 25 MG-37.5 MG	TRIMEPAZINE TARTRATE	88
TRIACETIN	88	triamterene & hydrochlorothiazide	TRIMETHOBENZAMIDE HCL	88
TRIAMCINOLONE	88	TABS 25 MG-37.5 MG	trimethobenzamide hcl CAPS	39
triamcinolone acetonide (mouth) 157		triamterene & hydrochlorothiazide	TRIMETHOPRIM POWD	46
triamcinolone acetonide (nasal)		TABS 50 MG-75 MG	trimethoprim TABS	46
AERO	164	triamterene CAPS	trimipramine maleate CAPS	31
triamcinolone acetonide (topical)		TRIAMTERENE POWD	TRIMIPRAMINE MALEATE POWD	
AERS	109	triazolam	31	
triamcinolone acetonide (topical)		TRIBENZOR (olmesartan	TRIMO-SAN	194
CREA 0.025 %	109	medoxomil-amlodipine-	TRINTELLIX	30
triamcinolone acetonide (topical)		hydrochlorothiazide)	TRIOXSALEN	88
CREA 0.1 %	109	TRICHLORMETHIAZIDE	TRIPLENNAMINE HCL	41
triamcinolone acetonide (topical)		88	TRIPENICOL C CREA	104
CREA 0.5 %	109	TRICHLOROACETIC ACID POWD	TRIPONEL LIQD	99
triamcinolone acetonide (topical)		88	TRIPONEL SYRP	99
LOTN	109	TRICLOSAN	TRIPROLIDINE HCL	88
triamcinolone acetonide (topical)		TRICOR TABS (fenofibrate)	TRISTART DHA	162
OINT 0.025 %, 0.5 %	109	43	TRITON X-100	82
triamcinolone acetonide (topical)		TRIETHANOLAMINE LAURYL	TRITTAB	180
OINT 0.05 %, 0.1 %	109	SULFATE	TRITTAB PEPPERMINT ICE CONC .	
triamcinolone acetonide (topical)		88	178	
OINT 0.05 %	109	TRIETHANOLAMINE SALICYLATE .	TRIUMEQ PD TBSO	60
TRIAMCINOLONE ACETONIDE		88		
POWD	109	trifluoperazine hcl TABS		
		57		
		trifluridine		
		169		
		trihexyphenidyl hcl SOLN		
		53		

TRIUMEQ TABS	60	TRUE METRIX AIR GLUCOSE METER KIT	141	TUDORZA PRESSAIR	19
TRI-VI-FLOR	160	TRUE METRIX GO GLUCOSE METER KIT	141	TULIVITE TABS	126
TRI-VI-FLORO	160	TRUE METRIX METER DEVI	141	TUMS CHEW (calcium carbonate (antacid))	16
TRIZIVIR	60	TRUE METRIX METER KIT	141	TUMS LASTING EFFECTS CHEW (calcium carbonate (antacid))	16
TROKENDI XR CP24 (topiramate)	26	TRUE MULTIVITAMIN TABS	160	TUNA FLAVOR LIQD	178
TROLAMINE	174	TRUE VITAMIN B1 TABS	196	TUNA FLAVOR POWD	178
tromethamine	150	TRUE VITAMIN B6 TABS	196	TUNA TYPE FLAVOR OS LIQD	178
TROMETHAMINE	150	TRUELYTE SOLN	152	TURMERIC	88
TROMETHAMINE	88	TRUERESULT BLOOD GLUCOSE KIT	141	TURMERIC ROOT	88
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TROPICAMIDE POWD	168	TRULANCE	120	TUSNEL-DM PEDIATRIC LIQD 1.25 MG/ML-25 MG/ML-2.5 MG/ML	99
tropicamide SOLN	168	TRULICITY	33	TUTTI FRUTTI CONCENTRATE CONC	178
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TRUE COMFORT PRO INSULIN SYR	145	TRYPTOPHAN POWD	167	TYBLUME CHEW	95
TRUE COMFORT PRO PEN NEEDLES	145	TRYVIO	46	TYBOST	60
TRUE COMFORT SAFETY PEN NEEDLE	145	TUBERSOL	113	TYENNE SOAJ	6
TRUE FOCUS BLOOD GLUCOSE METER DEVI	141			TYENNE SOLN	6
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