

## 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](https://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](mailto: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](mailto: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 हदी 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).

နမူကတိ ကညိ ကျိအယိ, နမနူ ကျိအတိမိစါလါ တလ်ဘူလ်လ်စူ နိတမံဘ်သ့န့လီ. ကိ: 866-433-6041 (TTY: 711)

ማስታወሻ: የጣናገሩት ቋንቋ እማርኛ ከሆነ የትርጉም እርዳታ ድርጅቶች፣ በነጻ ሊያግዝዎት ተዘጋጅተዋል። ወደ ሚክተለው ቁጥር ይደውሉ 1-866-433-6041 (መስማት ለተሳናቸው: 711)።

အကယ်၍ သင်သည် မြန်မာစကားကို ပြောပါက၊ ဘာသာစကား အကူအညီ၊ အခမဲ့၊ သင့် ငွဲ့အတူတူ 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. A total of 90% of the days' supply, or 28 days, must have passed before the prescription can be refilled. Some oncology agents, long-acting injectable antipsychotics, and specialty medications can be refilled at 80% of the days' supply or after 25 days have passed.

## 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](http://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 ATC does not have record that the step through medicine(s) have been tried, then a prior authorization will be required. If Absolute Total Care does not approve the prior authorization request, we will give you information about the grievance and appeal process and your right to a State Fair Hearing. If you or your provider do not agree with our decision, please let us know.

### 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](https://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	<p>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*</p> <p>Limits:</p> <ul style="list-style-type: none"> <li>• Daily Dose Max = 90 MME**</li> <li>• Day Supply Max = 7 days</li> <li>• Must use short-acting opioids before long-acting opioids</li> </ul> <p>*Treatment-Naïve means no opioid fill in last 180 days            **MME = Morphine Milligram Equivalent</p>
Test Strips	<p>Insulin users are limited to 150 strips per 30 days; Non-insulin users are limited to 100 strips per 90 days.</p>

## Contact Information

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

Drug Name	Drug Tier	Requirements/Limits
<b>ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders</b>		
<b>Amphetamines</b>		
ADDERALL XR CP24 (amphetamine-dextroamphetamine)	NP	QL(1 EA daily); AL(At least 6 yrs old)
ADDERALL TABS (amphetamine-dextroamphetamine)	P	QL(2 EA daily); AL(At least 3 yrs old)
ADZENYS XR-ODT TBED 3.1 MG, 6.3 MG, 9.4 MG, 12.5 MG, 15.7 MG, 18.8 MG (amphetamine)	NP	
amphetamine sulfate TABS	NP	
amphetamine-dextroamphetamine CP24 12.5 MG, 25 MG, 37.5 MG, 50 MG	NP	
amphetamine-dextroamphetamine CP24 5 MG, 10 MG, 15 MG, 20 MG, 25 MG, 30 MG	P	QL(1 EA daily); AL(At least 6 yrs old)
amphetamine-dextroamphetamine TABS	P	QL(2 EA daily); AL(At least 3 yrs old)
amphetamine TBED 3.1 MG, 6.3 MG, 9.4 MG, 12.5 MG, 15.7 MG, 18.8 MG	NP	
DEXEDRINE CP24 10 MG, 15 MG (dextroamphetamine sulfate)	NP	QL(2 EA daily); AL(At least 6 yrs old)
dextroamphetamine sulfate CP24 5 MG	P	QL(1 EA daily); AL(At least 6 yrs old)
dextroamphetamine sulfate CP24 10 MG, 15 MG	P	QL(2 EA daily); AL(At least 6 yrs old)
dextroamphetamine sulfate SOLN	NP	

Drug Name	Drug Tier	Requirements/Limits
dextroamphetamine sulfate TABS 5 MG, 10 MG	P	QL(2 EA daily); AL(At least 3 yrs old)
dextroamphetamine sulfate TABS 2.5 MG, 7.5 MG, 15 MG, 20 MG, 30 MG	NP	
dextroamphetamine sulfate TABS 15 MG, 20 MG, 30 MG	P	
dextroamphetamine sulfate TABS 5 MG, 10 MG	NP	QL(2 EA daily); AL(At least 3 yrs old)
DYANAVEL XR SUER	P	
DYANAVEL XR TBCR	NP	
EVEKEO TABS (amphetamine sulfate)	NP	
lisdexamfetamine dimesylate CAPS	NP	Brand Preferred; QL(1 EA daily)
lisdexamfetamine dimesylate CHEW	NP	Brand Preferred
methamphetamine hcl	NP	
MYDAYIS CP24 (amphetamine-dextroamphetamine)	NP	
VYVANSE CAPS	P	Brand Preferred; QL(1 EA daily)
VYVANSE CHEW	P	Brand Preferred
XELSTRYM	NP	
<b>Analeptics</b>		
caffeine citrate SOLN PO	C	Limit 2 fills per Lifetime; QL(45 ML per fill retail); 2 max fill(s) per 999 day(s) retail
<b>Attention-Deficit/Hyperactivity Disorder (ADHD) Agents</b>		
atomoxetine hcl	P	AL(At least 6 yrs old)

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Drug Name	Drug Tier	Requirements/Limits
<i>clonidine hcl (adhd) TB12</i>	P	
<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	
QELBREE	NP	
STRATTERA ( <i>atomoxetine hcl</i> )	NP	AL(At least 6 yrs old)
Dopamine and Norepinephrine Reuptake Inhibitors (DNRIs)		
SUNOSI	NP	
Histamine H3-Receptor Antagonist/Inverse Agonists		
WAKIX	NP	SP
Stimulants - Misc.		
APTENSIO XR CP24 ( <i>methylphenidate hcl</i> )	NP	
<i>armodafinil</i>	PA	PA
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	

Drug Name	Drug Tier	Requirements/Limits
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	
<i>methylphenidate hcl CP24</i>	NP	
<i>methylphenidate hcl CP24 10 MG, 20 MG, 30 MG, 40 MG, 60 MG</i>	P	
<i>methylphenidate hcl CPCR</i>	P	QL(1 EA daily); AL(At least 6 yrs old)
<i>methylphenidate hcl SOLN</i>	P	
<i>methylphenidate hcl TABS 5 MG</i>	P	QL(6 EA daily); AL(At least 3 yrs old)
<i>methylphenidate hcl TABS 10 MG, 20 MG</i>	P	QL(3 EA daily); AL(At least 3 yrs old)
<i>methylphenidate hcl TB24 36 MG</i>	P	QL(2 EA daily)
<i>methylphenidate hcl TB24 18 MG, 27 MG, 54 MG</i>	P	QL(1 EA daily)
<i>methylphenidate hcl TBCR 18 MG, 27 MG, 54 MG</i>	P	QL(1 EA daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TBCR 45 MG, 63 MG, 72 MG</i>	NP	
<i>methylphenidate hcl TBCR 10 MG, 20 MG, 36 MG</i>	P	QL(2 EA daily); AL(At least 6 yrs old)
<i>methylphenidate PTCH</i>	NP	Brand Preferred
<i>modafinil</i>	PA	PA
NUVIGIL ( <i>armodafinil</i> )	NP	
PROVIGIL ( <i>modafinil</i> )	NP	
QUILLICHEW ER CHER	P	
QUILLIVANT XR SRER	P	

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Drug Name	Drug Tier	Requirements/Limits
RELEXXII TBCR 18 MG, 27 MG, 54 MG	NP	QL(1 EA daily); AL(At least 6 yrs old)
RELEXXII TBCR 45 MG, 63 MG, 72 MG	NP	
RELEXXII TBCR 45 MG, 63 MG, 72 MG (methylphenidate hcl)	NP	
RELEXXII TBCR 36 MG	NP	QL(2 EA daily); AL(At least 6 yrs old)
RITALIN LA CP24 (methylphenidate hcl)	NP	
RITALIN TABS 10 MG, 20 MG (methylphenidate hcl)	NP	QL(3 EA daily); AL(At least 3 yrs old)
RITALIN TABS 5 MG (methylphenidate hcl)	NP	QL(6 EA daily); AL(At least 3 yrs old)
<b>ALLERGENIC EXTRACTS/BIOLOGICALS MISC</b>		
Allergenic Extracts		
GRASTEK SUBL	C	QL(1 EA daily); AL(At least 5 yrs old - Up to 65 yrs old)
RAGWITEK SUBL	C	QL(1 EA daily); AL(At least 18 yrs old - Up to 65 yrs old)
<b>AMEBICIDES</b>		
Amebicides		
SOLOSEC	NP	ST
<b>AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections</b>		
Aminoglycosides		
ARIKAYCE	NP	SP
BETHKIS NEBU (tobramycin)	NP	SP
KITABIS PAK (W/ NEBULIZER) NEBU 300 MG/5ML (tobramycin)	NP	SP
neomycin sulfate TABS	NP	

Drug Name	Drug Tier	Requirements/Limits
TOBI PODHALER CAPS	PA	SP; PA
TOBI NEBU (tobramycin)	NP	SP
tobramycin sulfate SOLN IJ 1.2 GM/30ML, 10 MG/ML, 80 MG/2ML	C	PA
tobramycin sulfate SOLR	C	PA
tobramycin NEBU	PA	SP; PA
tobramycin NEBU	NP	SP
tobramycin NEBU	PA	PA
<b>ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions</b>		
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
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
Anti-TNF-alpha - Monoclonal Antibodies		
ABRILADA (1 PEN) AJKT	NP	SP
ABRILADA (2 PEN) AJKT	NP	SP
ABRILADA (2 SYRINGE) PSKT	NP	SP

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ADALIMUMAB-AACF (2 PEN) AJKT	NP	SP	ADALIMUMAB-RYVK (2 PEN) AJKT	NP	
ADALIMUMAB-AACF (2 SYRINGE) PSKT	NP	SP	ADALIMUMAB-RYVK (2 SYRINGE) PSKT	NP	SP
ADALIMUMAB-AACF(CD/UC/HS STRT) AJKT	NP	SP	AMJEVITA-PED 10KG TO <15KG SOSY	NP	SP
ADALIMUMAB-AACF(PS/UV STARTER) AJKT	NP	SP	AMJEVITA-PED 15KG TO <30KG SOSY	NP	SP
ADALIMUMAB-AATY (1 PEN) AJKT	NP	SP	AMJEVITA SOAJ	NP	SP
ADALIMUMAB-AATY (2 PEN) AJKT	NP	SP	AMJEVITA SOSY	NP	SP
ADALIMUMAB-AATY (2 SYRINGE) PSKT	NP	SP	CYLTEZO (2 PEN) AJKT	NP	SP
ADALIMUMAB-AATY CD/UC/HS START AJKT 80 MG/0.8ML	NP		CYLTEZO (2 SYRINGE) PSKT	NP	SP
ADALIMUMAB-ADAZ SOAJ	NP	SP	CYLTEZO-CD/UC/HS STARTER AJKT	NP	SP
ADALIMUMAB-ADAZ SOSY	NP	SP	CYLTEZO-PSORIASIS/UV STARTER AJKT	NP	SP
ADALIMUMAB-ADAZ SOSY 10 MG/0.1ML	NP		HADLIMA PUSHTOUCH SOAJ	NP	SP
ADALIMUMAB-ADBM (2 PEN) AJKT	NP	SP	HADLIMA SOSY	NP	SP
ADALIMUMAB-ADBM (2 SYRINGE) PSKT	NP	SP	HULIO (2 PEN) AJKT	NP	SP
ADALIMUMAB-ADBM(CD/UC/HS STRT) AJKT	NP	SP	HULIO (2 SYRINGE) PSKT	NP	SP
ADALIMUMAB-ADBM(PS/UV STARTER) AJKT	NP	SP	HUMIRA (2 PEN) AJKT 80 MG/0.8ML	P	QL(2 EA per 28 day(s) retail; 2 EA per 28 days mail); AL(At least 2 yrs old); SP
ADALIMUMAB-FKJP (2 PEN) AJKT	NP	SP	HUMIRA (2 PEN) AJKT 40 MG/0.8ML	P	QL(0.14 EA daily; 4 EA per 28 day(s) retail); AL(At least 2 yrs old); SP
ADALIMUMAB-FKJP (2 SYRINGE) PSKT	NP	SP	HUMIRA (2 PEN) AJKT 40 MG/0.4ML	P	QL(4 EA per 28 day(s) retail); AL(At least 2 yrs old); SP
ADALIMUMAB-RYVK (1 PEN) AJKT 80 MG/0.8ML	NP		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
ADALIMUMAB-RYVK (2 PEN) AJKT	NP	SP			

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

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

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Drug Name	Drug Tier	Requirements/Limits
VIMOVO 500 MG-20 MG ( <i>naproxen-esomeprazole magnesium</i> )	NP	
VYSCOXA PO 10 MG/ML	NP	AL(At least 2 yrs old)
ZYBIC SUSP 7.5 MG/5ML ( <i>meloxicam</i> )	NP	
Phosphodiesterase 4 (PDE4) Inhibitors		
OTEZLA XR TB24 PO 75 MG	NP	SP
OTEZLA/OTEZLA XR INITIATION PK TBPk	NP	1 package(s) per 365 day(s) retail; 1 package(s) per 365 day(s) mail; AL(At least 6 yrs old); SP
OTEZLA TABS 30 MG	NP	QL(2 EA daily); AL(At least 6 yrs old); SP
OTEZLA TABS 20 MG	NP	SP
OTEZLA TBPk	NP	1 package(s) per 365 day(s) retail; 1 package(s) per 365 day(s) mail; AL(At least 6 yrs old); SP
Pyrimidine Synthesis Inhibitors		
<i>leflunomide</i>	C	QL(1 EA daily)
Selective Costimulation Modulators		
ORENCIA CLICKJECT SOAJ	NP	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

Drug Name	Drug Tier	Requirements/Limits
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 50 MG/ML	P	QL(8 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
<b>ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions</b>		
Analgesic Combinations		
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG</i>	C	QL(4 EA daily)
<i>butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG</i>	C	QL(4 EA daily)
<i>butalbital-acetaminophen TABS 50 MG-325 MG</i>	C	
<i>butalbital-aspirin-caffeine CAPS</i>	C	QL(4 EA daily)
Analgesics - Sodium Channel Pain Signal Inhibitors		
JOURNAVX	P	Does not exceed healthplan QL; QL(29 EA per fill retail; 29 per fill mail); 14 day(s) max supply per 60 day(s) retail; 14 day(s) max supply per 60 day(s) mail; AL(At least 18 yrs old)

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<b>Analgesics Other</b>			DILAUDID TABS 8 MG (hydromorphone hcl)	NP	Opioid Smart PA; QL(4 EA daily)
acetaminophen CHEW	C		DILAUDID TABS 2 MG (hydromorphone hcl)	NP	Opioid Smart PA; QL(8 EA daily)
acetaminophen LIQD 160 MG/5ML	C		DILAUDID TABS 4 MG (hydromorphone hcl)	NP	Opioid Smart PA
acetaminophen SOLN PO 160 MG/5ML, 325 MG/10.15ML, 650 MG/20.3ML	C	QL(240 ML per fill retail)	fentanyl citrate LPOP 200 MCG, 1200 MCG	NP	Opioid Smart PA
acetaminophen SUPP 120 MG, 650 MG	C	QL(12 EA per 31 day(s) retail)	fentanyl citrate TABS 400 MCG, 600 MCG, 800 MCG	NP	Opioid Smart PA
acetaminophen SUSP 160 MG/5ML, 650 MG/20.3ML	C		fentanyl PT72 37.5 MCG/HR, 62.5 MCG/HR, 87.5 MCG/HR	NP	
acetaminophen TABS 325 MG, 500 MG	C		fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR	P	QL(0.34 EA daily)
FEVERALL JUNIOR STRENGTH SUPP	C	QL(12 EA per 31 day(s) retail)	hydrocodone bitartrate CP12	NP	Opioid Smart PA
<b>Salicylates</b>			hydrocodone bitartrate T24A	NP	Opioid Smart PA
aspirin buffered (cal carb-mag carb-mag oxide)	C		hydromorphone hcl LIQD	P	Opioid Smart PA
aspirin CHEW	C		HYDROMORPHONE HCL SUPP	P	Opioid Smart PA; QL(2 EA daily)
ASPIRIN SUPP 300 MG	C	QL(12 EA per 31 day(s) retail)	hydromorphone hcl TABS 2 MG	P	Opioid Smart PA; QL(8 EA daily)
aspirin TABS 325 MG	C		hydromorphone hcl TABS 8 MG	P	Opioid Smart PA; QL(4 EA daily)
aspirin TBEC 81 MG, 325 MG	C		hydromorphone hcl TABS 4 MG	P	Opioid Smart PA
diflunisal TABS	NP		hydromorphone hcl TB24	NP	Opioid Smart PA
salsalate	C		HYSINGLA ER T24A 20 MG, 30 MG, 40 MG, 60 MG, 80 MG, 100 MG	NP	Opioid Smart PA
<b>ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions</b>			levorphanol tartrate TABS	NP	
<b>Opioid Agonists</b>			levorphanol tartrate TABS	NP	Opioid Smart PA
codeine sulfate TABS 30 MG	P	Opioid Smart PA; AL(At least 12 yrs old)			
CODEINE SULFATE TABS	P	Opioid Smart PA; AL(At least 12 yrs old)			
CONZIP CP24 (tramadol hcl)	NP	Opioid Smart PA			
DILAUDID LIQD (hydromorphone hcl)	NP	Opioid Smart PA			

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

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>tramadol hcl TABS 100 MG</i>	NP	Opioid Smart PA	<i>FIORICET/CODEINE 30 MG-40 MG-50 MG-300 MG (butalbital-acetaminophen-caffeine w/ codeine)</i>	NP	Opioid Smart PA
<i>tramadol hcl TB24</i>	P	Opioid Smart PA	<i>hydrocodone-acetaminophen SOLN</i>	P	
<i>tramadol hcl TB24</i>	NP	Opioid Smart PA	<i>hydrocodone-acetaminophen SOLN 325 MG/15ML-10 MG/15ML</i>	P	Opioid Smart PA
<i>tramadol hcl TB24</i>	P		<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)
<b>Opioid Combinations</b>			<i>hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG</i>	P	Opioid Smart PA
<i>acetaminophen w/ codeine SOLN</i>	P	QL(30 ML daily); AL(At least 12 yrs old)	<i>hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	P	QL(10 EA daily)
<i>acetaminophen w/ codeine SOLN</i>	P	Opioid Smart PA; QL(30 ML daily); AL(At least 12 yrs old)	<i>hydrocodone-acetaminophen TABS 325 MG-2.5 MG</i>	P	
<i>acetaminophen w/ codeine TABS</i>	P	QL(6 EA daily); AL(At least 12 yrs old)	<i>hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	P	Opioid Smart PA; QL(10 EA daily)
<i>acetaminophen w/ codeine TABS 15 MG-300 MG, 30 MG-300 MG, 60 MG-300 MG</i>	P	Opioid Smart PA; QL(6 EA daily); AL(At least 12 yrs old)	<i>hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG, 7.5 MG-200 MG</i>	P	Opioid Smart PA
<i>acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG</i>	NP	Opioid Smart PA	<b>NALOCET TABS</b>	NP	Opioid Smart PA
<i>butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG</i>	P	Opioid Smart PA; QL(4 EA daily); AL(At least 12 yrs old)	<i>oxycodone w/ acetaminophen TABS</i>	P	QL(6 EA daily)
<i>butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-300 MG</i>	P	Opioid Smart PA	<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>butalbital-aspirin-caffeine w/cod</i>	P	Opioid Smart PA; QL(4 EA daily); AL(At least 12 yrs old)	<i>oxycodone w/ acetaminophen TABS 325 MG-2.5 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)			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PERCOCET TABS 325 MG-2.5 MG ( <i>oxycodone w/ acetaminophen</i> )	NP	Opioid Smart PA	<i>buprenorphine hcl-naloxone hcl dihydrate</i> SUBL 2 MG-8 MG	P	Opioid Smart PA; QL(3 EA daily); AL(At least 16 yrs old)
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)	<i>buprenorphine hcl-naloxone hcl dihydrate</i> SUBL 0.5 MG-2 MG	P	Opioid Smart PA; QL(12 EA daily); AL(At least 16 yrs old)
PROLATE SOLN	NP	Opioid Smart PA	<i>buprenorphine hcl</i> SUBL	P	Opioid Smart PA
PROLATE TABS	NP	Opioid Smart PA	<i>buprenorphine hcl</i> SUBL	P	
SEGLENTIS	NP	Opioid Smart PA	<i>buprenorphine</i> PTWK	NP	Brand Preferred; Opioid Smart PA
<i>tramadol-acetaminophen</i>	P	Opioid Smart PA; QL(4 EA daily); AL(At least 18 yrs old)	<i>butorphanol tartrate</i> NA 10 MG/ML	NP	Opioid Smart PA
Opioid Partial Agonists			BUTRANS PTWK ( <i>buprenorphine</i> )	P	Brand Preferred; Opioid Smart PA
BELBUCA FILM	NP	Opioid Smart PA	<i>pentazocine w/ naloxone hcl</i>	NP	Opioid Smart PA
BRIXADI (WEEKLY) SOSY	P	Opioid Smart PA; SP	SUBLOCADE 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	SUBOXONE FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG ( <i>buprenorphine hcl-naloxone hcl dihydrate</i> )	P	Brand Preferred; Opioid Smart PA; QL(3 EA daily); AL(At least 16 yrs old)
<i>buprenorphine hcl-naloxone hcl dihydrate</i> FILM SL	NP	Brand Preferred; QL(3 EA daily); AL(At least 16 yrs old)	SUBOXONE FILM SL 3 MG-12 MG ( <i>buprenorphine hcl-naloxone hcl dihydrate</i> )	P	Brand Preferred; Opioid Smart PA; QL(2 EA daily); AL(At least 16 yrs old)
<i>buprenorphine hcl-naloxone hcl dihydrate</i> FILM SL 3 MG-12 MG	NP	Brand Preferred; Opioid Smart PA; QL(2 EA daily); AL(At least 16 yrs old)	ZUBSOLV SUBL	NP	Opioid Smart PA; AL(At least 16 yrs old)
<i>buprenorphine hcl-naloxone hcl dihydrate</i> FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG	NP	Brand Preferred; Opioid Smart PA; QL(3 EA daily); AL(At least 16 yrs old)	<b>ANDROGENS-ANABOLIC - Drugs to Regulate Hormones</b>		
			Androgens		

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Drug Name	Drug Tier	Requirements/Limits
ANDROGEL PUMP GEL TD ( <i>testosterone</i> )	NP	
<i>methyltestosterone TABS</i>	C	
NATESTO GEL NA	NP	
TESTIM GEL TD ( <i>testosterone</i> )	PA	Brand Preferred; PA
<i>testosterone cypionate SOLN IM 100 MG/ML</i>	C	QL(0.2858 ML daily)
<i>testosterone cypionate SOLN IM 200 MG/ML</i>	C	QL(4 ML per 31 day(s) retail)
<i>testosterone enanthate SOLN IM</i>	C	QL(0.1429 ML daily)
<i>testosterone GEL TD 1.62 %, 1.62 %</i>	PA	PA
<i>testosterone GEL TD 1 %, 10 MG/ACT, 20.25 MG/1.25GM, 25 MG/2.5GM, 40.5 MG/2.5GM</i>	NP	
<i>testosterone GEL TD 1 %, 50 MG/5GM</i>	NP	Brand Preferred
<i>testosterone SOLN</i>	NP	
VOGELXO PUMP GEL TD ( <i>testosterone</i> )	NP	
VOGELXO GEL TD ( <i>testosterone</i> )	NP	
<b>ANORECTAL AND RELATED PRODUCTS - Rectal Drugs to Treat Pain, Swelling and Itching</b>		
Intrarectal Steroids		
<i>budesonide (intrarectal)</i>	NP	
<i>hydrocortisone (intrarectal)</i>	C	
Rectal Steroids		
<i>hydrocortisone (rectal) EX 1 %</i>	C	1 package(s) per fill retail; RX/OTC
<i>hydrocortisone (rectal) EX 2.5 %</i>	C	
PREPARATION H EX 1 %	C	1 package(s) per fill retail; RX/OTC

Drug Name	Drug Tier	Requirements/Limits
PREPARATION H SOOTHING RELIEF EX 1 %	C	1 package(s) per fill retail; RX/OTC
<b>ANTACIDS</b>		
Antacid Combinations		
<i>alum &amp; mag hydrox-simethicone LIQD</i>	C	QL(24 ML daily)
<i>alum &amp; mag hydrox-simethicone SUSP 1200 MG/30ML-120 MG/30ML-1200 MG/30ML, 200 MG/5ML-20 MG/5ML-200 MG/5ML, 400 MG/10ML-40 MG/10ML-400 MG/10ML</i>	C	QL(24 ML daily)
Antacids - Aluminum Salts		
ALUMINUM HYDROXIDE GEL SUSP	C	
Antacids - Bicarbonate		
<i>sodium bicarbonate (antacid) TABS 325 MG, 650 MG</i>	C	QL(3.34 EA daily)
Antacids - Calcium Salts		
<i>calcium carbonate (antacid) CHEW 500 MG</i>	C	
Antacids - Magnesium Salts		
<i>magnesium oxide TABS 400 MG</i>	C	
<b>ANTHELMINTICS - Drugs to Treat Worm Infections</b>		
Anthelmintics		
EMVERM CHEW	C	QL(1 EA per fill retail)
<b>ANTIANGINAL AGENTS - Drugs to Treat Chest Pain</b>		
Antianginals-Other		
ASPRUZYO SPRINKLE PACK	NP	

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Drug Name	Drug Tier	Requirements/Limits
<i>ranolazine TB12</i>	P	
<b>Nitrates</b>		
<i>isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG</i>	C	
<i>isosorbide mononitrate TABS</i>	C	QL(2 EA daily)
ISOSORBIDE MONONITRATE TABS	C	QL(2 EA daily)
<i>isosorbide mononitrate TB24</i>	C	QL(1 EA daily)
NITRO-BID OINT	C	
<i>nitroglycerin CPCR</i>	C	
<i>nitroglycerin PT24</i>	C	
<i>nitroglycerin SUBL</i>	C	
<b>ANTI-ANXIETY AGENTS - Drugs to Treat Anxiety</b>		
<b>Antianxiety Agents - Misc.</b>		
<i>buspirone hcl 5 MG, 10 MG</i>	C	QL(6 EA daily)
<i>buspirone hcl 7.5 MG, 30 MG</i>	C	QL(3 EA daily)
<i>buspirone hcl 15 MG</i>	C	QL(4 EA daily)
<i>hydroxyzine hcl SYRP</i>	C	
<i>hydroxyzine hcl TABS</i>	C	
<i>hydroxyzine pamoate CAPS</i>	C	
<i>meprobamate</i>	C	
<b>Benzodiazepines</b>		
<i>alprazolam TABS</i>	C	QL(3 EA daily)
<i>chlordiazepoxide hcl CAPS</i>	C	QL(4 EA daily)
<i>clorazepate dipotassium TABS</i>	C	QL(3 EA daily)
<i>diazepam SOLN PO 5 MG/5ML</i>	C	
<i>diazepam TABS</i>	C	QL(4 EA daily)
<i>lorazepam TABS 0.5 MG, 2 MG</i>	C	QL(3 EA daily)
<i>lorazepam TABS 1 MG</i>	C	QL(4 EA daily)

Drug Name	Drug Tier	Requirements/Limits
<i>oxazepam CAPS</i>	C	QL(4 EA daily)
<b>ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms</b>		
<b>Antiarrhythmics Type I-A</b>		
<i>disopyramide phosphate CAPS</i>	C	
NORPACE CR CP12 150 MG	C	
<i>quinidine gluconate TBCR</i>	C	
<i>quinidine sulfate TABS</i>	C	
<b>Antiarrhythmics Type I-B</b>		
<i>mexiletine hcl</i>	C	
<b>Antiarrhythmics Type I-C</b>		
<i>flecainide acetate</i>	C	
<i>propafenone hcl CP12</i>	C	
<i>propafenone hcl TABS</i>	C	
<b>Antiarrhythmics Type III</b>		
<i>amiodarone hcl TABS 200 MG</i>	C	
<i>dofetilide</i>	C	
<b>ANTI-ASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions</b>		
<b>Antiasthmatic - Monoclonal Antibodies</b>		
FASENRA PEN SOAJ	PA	SP; PA
FASENRA SOSY	PA	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	SP; PA
XOLAIR SOSY 75 MG/0.5ML, 150 MG/ML	PA	PA
XOLAIR SOSY	PA	SP; PA
<b>Anti-Inflammatory Agents</b>		

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Drug Name	Drug Tier	Requirements/Limits
<i>cromolyn sodium NEBU</i>	C	QL(8 ML daily)
Bronchodilators - Anticholinergics		
ATROVENT HFA	P	1 package(s) per 31 day(s) retail
INCRUSE ELLIPTA	P	1 package(s) per 31 day(s) retail
<i>ipratropium bromide SOLN 0.02 %</i>	P	QL(375 ML per 25 day(s) retail)
SPIRIVA HANDIHALER CAPS IN ( <i>tiotropium bromide</i> )	P	Brand Preferred
SPIRIVA RESPIMAT AERS IN	NP	
<i>tiotropium bromide CAPS IN 18 MCG</i>	NP	Brand Preferred
TUDORZA PRESSAIR	NP	1 package(s) per 31 day(s) retail
YUPELRI	NP	
Leukotriene Modulators		
ACCOLATE ( <i>zafirlukast</i> )	NP	
<i>montelukast sodium CHEW</i>	P	QL(1 EA daily)
<i>montelukast sodium PACK</i>	P	QL(1 EA daily)
<i>montelukast sodium TABS</i>	P	QL(1 EA daily)
SINGULAIR CHEW ( <i>montelukast sodium</i> )	NP	QL(1 EA daily)
SINGULAIR PACK ( <i>montelukast sodium</i> )	NP	QL(1 EA daily)
SINGULAIR TABS ( <i>montelukast sodium</i> )	NP	QL(1 EA daily)
<i>zafirlukast</i>	P	
<i>zileuton TB12</i>	NP	
ZYFLO TABS	NP	
Phosphodiesterase 3 & 4 (PDE3 & PDE4) Inhibitors		
OHTUVAYRE	NP	SP

Drug Name	Drug Tier	Requirements/Limits
Selective Phosphodiesterase 4 (PDE4) Inhibitors		
DALIRESP ( <i>roflumilast</i> )	NP	QL(1 EA daily)
<i>roflumilast</i>	NP	QL(1 EA daily)
Steroid Inhalants		
ALVESCO	P	
ARNUITY ELLIPTA 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT ( <i>fluticasone furoate (inhalation)</i> )	P	Brand Preferred; QL(1 EA daily)
ASMANEX (120 METERED DOSES) AEPB	P	
ASMANEX (14 METERED DOSES) AEPB	P	
ASMANEX (30 METERED DOSES) AEPB	P	
ASMANEX (60 METERED DOSES) AEPB	P	
ASMANEX HFA AERO	P	QL(0.44 GM 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>budesonide (inhalation) SUSP 1 MG/2ML</i>	P	QL(60 ML per 31 day(s) retail); AL(Up to 8 yrs old)
<i>fluticasone furoate (inhalation) 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT</i>	NP	QL(1 EA daily)
<i>fluticasone propionate (inhalation) AEPB</i>	NP	
<i>fluticasone propionate hfa 44 MCG/ACT</i>	P	QL(11 GM per 25 day(s) retail)
<i>fluticasone propionate hfa 110 MCG/ACT, 220 MCG/ACT</i>	P	QL(12 GM per 25 day(s) retail)
PULMICORT FLEXHALER AEPB	P	1 package(s) per fill retail
PULMICORT FLEXHALER AEPB	P	1 package(s) per fill retail

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PULMICORT SUSP 1 MG/2ML ( <i>budesonide (inhalation)</i> )	NP	QL(60 ML per 31 day(s) retail); AL(Up to 8 yrs old)	<i>albuterol sulfate NEBU 0.083 %</i>	P	QL(12.5 ML daily)
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)	<i>albuterol sulfate NEBU</i>	P	
QVAR REDIHALER 40 MCG/ACT	P	QL(0.36 GM daily)	<i>albuterol sulfate SYRP</i>	P	
QVAR REDIHALER 80 MCG/ACT	P	QL(0.72 GM daily)	<i>albuterol sulfate TABS</i>	P	
Sympathomimetics			ANORO ELLIPTA 25 MCG/ACT-62.5 MCG/ACT ( <i>umeclidinium-vilanterol</i> )	P	Brand Preferred
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>arformoterol tartrate</i>	P	
ADVAIR HFA AERO ( <i>fluticasone-salmeterol</i> )	P	Brand Preferred	BEVESPI AEROSPHERE	NP	
AIRDUO RESPICLICK 113/14 AEPB ( <i>fluticasone-salmeterol</i> )	NP		BREO ELLIPTA ( <i>fluticasone furoate-vilanterol</i> )	NP	
AIRDUO RESPICLICK 232/14 AEPB ( <i>fluticasone-salmeterol</i> )	NP		BREO ELLIPTA	NP	
AIRDUO RESPICLICK 55/14 AEPB ( <i>fluticasone-salmeterol</i> )	NP		BREZTRI AEROSPHERE	NP	
AIRSUPRA	NP		BROVANA ( <i>arformoterol tartrate</i> )	NP	
<i>albuterol sulfate AERS</i>	P	QL(36 GM per 30 day(s) retail; 36 GM per 30 days mail)	<i>budesonide-formoterol fumarate dihydrate</i>	NP	Brand Preferred; QL(30.9 GM per 30 day(s) retail)
<i>albuterol sulfate AERS</i>	P	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>	P	QL(17 GM per 30 day(s) retail; 17 GM per 30 days mail)	COMBIVENT RESPIMAT AERS	P	QL(4 GM per 31 day(s) retail)
<i>albuterol sulfate NEBU 0.63 MG/3ML, 1.25 MG/3ML</i>	P	QL(375 ML per 31 day(s) retail)	DUAKLIR PRESSAIR	NP	
			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)
			<i>fluticasone furoate-vilanterol</i>	NP	
			<i>fluticasone-salmeterol AEPB 113 MCG/ACT-14 MCG/ACT, 232 MCG/ACT-14 MCG/ACT, 55 MCG/ACT-14 MCG/ACT</i>	NP	

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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)	VENTOLIN HFA AERS ( <i>albuterol sulfate</i> )	P	QL(16 GM per 30 day(s) retail)
<i>fluticasone-salmeterol</i> AERO	NP		XOPENEX HFA ( <i>levalbuterol tartrate</i> )	NP	QL(0.5 GM daily; 30 GM per 30 day(s) retail)
<i>formoterol fumarate</i> NEBU	NP		<b>Xanthines</b>		
<i>ipratropium-albuterol</i> SOLN	P	QL(12 ML daily)	THEO-24 CP24	C	
<i>levalbuterol hcl</i>	NP		<i>theophylline</i> ELIX	C	
<i>levalbuterol tartrate</i>	NP	QL(0.5 GM daily; 30 GM per 30 day(s) retail)	<i>theophylline</i> SOLN	C	QL(475 ML per fill retail)
PERFOROMIST NEBU ( <i>formoterol fumarate</i> )	NP		<i>theophylline</i> TB12 300 MG, 450 MG	C	
PROAIR RESPICLICK AEPB	P	QL(2 EA per 30 day(s) retail)	<i>theophylline</i> TB24	C	
SEREVENT DISKUS	P	1 package(s) per fill retail	<b>ANTICOAGULANTS - Blood Thinners</b>		
STIOLTO RESPIMAT	P		<b>Coumarin Anticoagulants</b>		
STRIVERDI RESPIMAT	NP		<i>warfarin sodium</i> TABS	P	
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)	<b>Direct Factor Xa Inhibitors</b>		
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)	ELIQUIS (1.5 MG PACK) TBSO PO	P	
SYMBICORT ( <i>budesonide-formoterol fumarate dihydrate</i> )	P	Brand Preferred; QL(30.6 GM per 30 day(s) retail)	ELIQUIS (2 MG PACK) TBSO PO	P	
<i>terbutaline sulfate</i> TABS	NP	ST	ELIQUIS DVT/PE STARTER PACK TBPK	P	QL(2.47 EA daily)
TRELEGY ELLIPTA	NP		ELIQUIS CPSP PO 0.15 MG	P	
<i>umeclidinium-vilanterol</i>	NP		ELIQUIS TABS	P	QL(2 EA daily)
VENTOLIN HFA AERS ( <i>albuterol sulfate</i> )	P	QL(36 GM per 30 day(s) retail)	ELIQUIS TBSO PO 0.5 MG	P	
			<i>rivaroxaban</i> SUSR 1 MG/ML	NP	Brand Preferred
			<i>rivaroxaban</i> TABS 2.5 MG	NP	Brand Preferred
			SAVAYSA	NP	
			XARELTO STARTER PACK TBPK	P	
			XARELTO SUSR 1 MG/ML ( <i>rivaroxaban</i> )	P	Brand Preferred
			XARELTO TABS 10 MG, 15 MG, 20 MG	P	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
XARELTO TABS 2.5 MG (rivaroxaban)	P	Brand Preferred	LOVENOX SOLN IJ 300 MG/3ML (enoxaparin sodium)	NP	Max 42 syringes in 180 days; QL(126 ML per 180 day(s) retail); SP
Heparins And Heparinoid-Like Agents			LOVENOX SOSY 60 MG/0.6ML (enoxaparin sodium)	NP	Max 42 syringes in 180 days; QL(25.2 ML per 180 day(s) retail); SP
ARIXTRA (fondaparinux sodium)	NP	SP	LOVENOX SOSY 100 MG/ML, 150 MG/ML (enoxaparin sodium)	NP	Max 42 syringes in 180 days; QL(42 ML per 180 day(s) retail); SP
enoxaparin sodium SOLN IJ 300 MG/3ML	P	QL(126 ML per 180 day(s) retail); SP	LOVENOX SOSY 30 MG/0.3ML (enoxaparin sodium)	NP	QL(12.6 ML per 180 day(s) retail); SP
enoxaparin sodium SOSY 30 MG/0.3ML	P	QL(12.6 ML per 180 day(s) retail); SP	LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML (enoxaparin sodium)	NP	QL(33.6 ML per 180 day(s) retail); SP
enoxaparin sodium SOSY 40 MG/0.4ML	P	QL(16.8 ML per 180 day(s) retail)	LOVENOX SOSY 100 MG/ML, 150 MG/ML (enoxaparin sodium)	NP	QL(42 ML per 180 day(s) retail); SP
enoxaparin sodium SOSY 40 MG/0.4ML	P	QL(16.8 ML per 180 day(s) retail); SP	LOVENOX SOSY 30 MG/0.3ML (enoxaparin sodium)	NP	Max 42 syringes in 180 days; QL(12.6 ML per 180 day(s) retail); SP
enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML	P	QL(42 ML per 180 day(s) retail); SP	LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML (enoxaparin sodium)	NP	QL(33.6 ML per 180 day(s) retail); SP
enoxaparin sodium SOSY 60 MG/0.6ML	P	QL(25.2 ML per 180 day(s) retail); SP	LOVENOX SOSY 100 MG/ML, 150 MG/ML (enoxaparin sodium)	NP	QL(42 ML per 180 day(s) retail); SP
enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML	P	QL(33.6 ML per 180 day(s) retail); SP	LOVENOX SOSY 30 MG/0.3ML (enoxaparin sodium)	NP	Max 42 syringes in 180 days; QL(12.6 ML per 180 day(s) retail); SP
fondaparinux sodium	NP	SP	LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML (enoxaparin sodium)	NP	Max 42 syringes in 180 days; QL(33.6 ML per 180 day(s) retail); SP
FRAGMIN SOLN 10000 UNIT/4ML, 95000 UNIT/3.8ML	NP	SP	LOVENOX SOSY 40 MG/0.4ML (enoxaparin sodium)	NP	QL(16.8 ML per 180 day(s) retail); SP
FRAGMIN SOSY	NP	SP	LOVENOX SOSY 40 MG/0.4ML (enoxaparin sodium)	NP	Max 42 syringes in 180 days; QL(16.8 ML per 180 day(s) retail); SP
heparin sodium (porcine) SOLN IJ 1000 UNIT/ML, 5000 UNIT/0.5ML, 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	C				
HEPARIN SODIUM (PORCINE) SOSY IJ	C				
LOVENOX SOLN IJ 300 MG/3ML (enoxaparin sodium)	NP	QL(126 ML per 180 day(s) retail); SP			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
LOVENOX SOSY 60 MG/0.6ML ( <i>enoxaparin sodium</i> )	NP	QL(25.2 ML per 180 day(s) retail); SP	VALTOCO 15 MG DOSE LQPK 7.5 MG/0.1ML	P	QL(10 EA per 30 day(s) retail)
Thrombin Inhibitors			VALTOCO 20 MG DOSE LQPK 10 MG/0.1ML	P	QL(10 EA per 30 day(s) retail)
<i>dabigatran etexilate mesylate</i> CAPS	NP	Brand Preferred	VALTOCO 5 MG DOSE LIQD	P	QL(10 EA per 30 day(s) retail)
PRADAXA CAPS ( <i>dabigatran etexilate mesylate</i> )	P	Brand Preferred	Anticonvulsants - Misc.		
PRADAXA PACK	NP	SP	APTIOM 200 MG, 400 MG, 600 MG, 800 MG ( <i>eslicarbazepine acetate</i> )	NP	
<b>ANTICONVULSANTS - Drugs to Treat Seizures</b>			BANZEL SUSP ( <i>rufinamide</i> )	NP	SP; PA
AMPA Glutamate Receptor Antagonists			BANZEL TABS ( <i>rufinamide</i> )	PA	Brand Preferred; SP; PA
FYCOMPA SUSP 0.5 MG/ML ( <i>perampanel</i> )	PA	Brand Preferred; PA	BRIVIACT SOLN PO 10 MG/ML ( <i>brivaracetam</i> )	NP	SP
FYCOMPA TABS 2 MG, 4 MG, 6 MG, 8 MG, 10 MG, 12 MG ( <i>perampanel</i> )	PA	Brand Preferred; PA	BRIVIACT TABS 10 MG, 25 MG, 50 MG, 75 MG, 100 MG ( <i>brivaracetam</i> )	NP	SP
<i>perampanel SUSP 0.5 MG/ML</i>	NP	Brand Preferred	<i>carbamazepine CHEW</i>	P	
<i>perampanel TABS 2 MG, 4 MG, 6 MG, 8 MG, 10 MG, 12 MG</i>	NP	Brand Preferred	<i>carbamazepine CP12</i>	NP	Brand Preferred
Anticonvulsants - Benzodiazepines			<i>carbamazepine SUSP</i>	P	
<i>clobazam SUSP</i>	P	PA	<i>carbamazepine TABS</i>	P	
<i>clobazam TABS</i>	P		<i>carbamazepine TB12</i>	NP	Brand Preferred
<i>clobazam TABS</i>	P	PA	CARBATROL CP12 ( <i>carbamazepine</i> )	P	Brand Preferred
<i>clonazepam TABS</i>	C	QL(4 EA daily)	DIACOMIT CAPS 250 MG	NP	QL(12 EA daily); SP
<i>diazepam (anticonvulsant) GEL 10 MG, 20 MG</i>	P	QL(1 EA per fill retail); AL(At least 2 yrs old)	DIACOMIT CAPS 500 MG	NP	QL(6 EA daily); SP
<i>diazepam (anticonvulsant) GEL 10 MG, 20 MG</i>	P	QL(1 EA per fill retail); AL(At least 2 yrs old)	DIACOMIT PACK 250 MG	NP	QL(12 EA daily); SP
LIBERVANT FILM	NP		DIACOMIT PACK 500 MG	NP	QL(6 EA daily); SP
NAYZILAM	P	QL(10 EA per 30 day(s) retail)	ELEPSIA XR TB24	NP	
ONFI SUSP ( <i>clobazam</i> )	NP		EPIDIOLEX	NP	SP
ONFI TABS ( <i>clobazam</i> )	NP		EPRONTIA SOLN 25 MG/ML ( <i>topiramate</i> )	NP	
SYMPAZAN FILM	NP		<i>eslicarbazepine acetate 200 MG, 400 MG, 600 MG, 800 MG</i>	NP	
VALTOCO 10 MG DOSE LIQD	P	QL(10 EA per 30 day(s) retail)			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
FINTEPLA	NP	SP	<i>levetiracetam SOLN PO 100 MG/ML, 500 MG/5ML</i>	P	QL(16 ML daily)
<i>gabapentin CAPS</i>	P	QL(9 EA daily)	<i>levetiracetam TABS 250 MG, 750 MG</i>	P	QL(4 EA daily)
<i>gabapentin SOLN</i>	P		<i>levetiracetam TABS 1000 MG</i>	P	
<i>gabapentin TABS 800 MG</i>	P	QL(4 EA daily)	<i>levetiracetam TABS 500 MG</i>	P	QL(6 EA daily)
<i>gabapentin TABS 600 MG</i>	P	QL(6 EA daily)	<i>levetiracetam TB24</i>	P	
GABARONE TABS 100 MG, 400 MG	NP		<i>levetiracetam TB3D 250 MG, 500 MG</i>	NP	
KEPPRA XR TB24 ( <i>levetiracetam</i> )	NP		LEVETIRACETAM TB3D	NP	
KEPPRA SOLN PO 100 MG/ML ( <i>levetiracetam</i> )	NP	QL(16 ML daily)	LYRICA CAPS ( <i>pregabalin</i> )	NP	
KEPPRA TABS 250 MG, 750 MG ( <i>levetiracetam</i> )	NP	QL(4 EA daily)	LYRICA SOLN ( <i>pregabalin</i> )	NP	
KEPPRA TABS 500 MG ( <i>levetiracetam</i> )	NP	QL(6 EA daily)	MOTPOLY XR CP24	NP	
KEPPRA TABS 1000 MG ( <i>levetiracetam</i> )	NP		NEURONTIN CAPS ( <i>gabapentin</i> )	NP	QL(9 EA daily)
<i>lacosamide SOLN PO 10 MG/ML, 50 MG/5ML, 100 MG/10ML</i>	P		NEURONTIN SOLN ( <i>gabapentin</i> )	NP	
<i>lacosamide TABS</i>	P		NEURONTIN TABS 600 MG ( <i>gabapentin</i> )	NP	QL(6 EA daily)
LAMICTAL ODT KIT ( <i>lamotrigine</i> )	NP		NEURONTIN TABS 800 MG ( <i>gabapentin</i> )	NP	QL(4 EA daily)
LAMICTAL ODT TBDP ( <i>lamotrigine</i> )	NP		<i>oxcarbazepine SUSP</i>	NP	Brand Preferred
LAMICTAL STARTER KIT 25 MG ( <i>lamotrigine</i> )	NP		<i>oxcarbazepine TABS</i>	P	
LAMICTAL XR KIT	NP		<i>oxcarbazepine TB24</i>	NP	
LAMICTAL XR TB24 ( <i>lamotrigine</i> )	NP	QL(1 EA daily)	OXTELLAR XR TB24 ( <i>oxcarbazepine</i> )	NP	
LAMICTAL CHEW ( <i>lamotrigine</i> )	NP		<i>pregabalin CAPS</i>	P	
LAMICTAL TABS ( <i>lamotrigine</i> )	NP		<i>pregabalin SOLN</i>	NP	
<i>lamotrigine CHEW</i>	P		<i>primidone</i>	P	
<i>lamotrigine KIT 25 MG</i>	NP		QUDEXY XR CS24 ( <i>topiramate</i> )	NP	
<i>lamotrigine TABS</i>	P		<i>rufinamide SUSP</i>	PA	SP; PA
<i>lamotrigine TABS</i>	NP		<i>rufinamide SUSP</i>	PA	PA
<i>lamotrigine TB24</i>	P	QL(1 EA daily)	<i>rufinamide TABS</i>	NP	Brand Preferred; SP
<i>lamotrigine TBDP</i>	P		SPRITAM TB3D	NP	

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Drug Name	Drug Tier	Requirements/Limits
SPRITAM TB3D 250 MG, 500 MG, 750 MG, 1000 MG ( <i>levetiracetam</i> )	NP	
SUBVENITE SUSP PO 10 MG/ML	NP	
TEGRETOL SUSP ( <i>carbamazepine</i> )	NP	
TEGRETOL TABS ( <i>carbamazepine</i> )	NP	
TEGRETOL-XR TB12 ( <i>carbamazepine</i> )	P	Brand Preferred
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)
TOPAMAX TABS 25 MG, 50 MG ( <i>topiramate</i> )	NP	QL(6 EA daily)
TOPAMAX TABS 100 MG ( <i>topiramate</i> )	NP	QL(4 EA daily)
TOPAMAX TABS 200 MG ( <i>topiramate</i> )	NP	QL(2 EA daily)
<i>topiramate</i> CP24	NP	
<i>topiramate</i> CPSP 15 MG	P	QL(6 EA daily)
<i>topiramate</i> CPSP 25 MG	P	QL(8 EA daily)
<i>topiramate</i> CPSP 50 MG	P	
<i>topiramate</i> CS24	NP	
<i>topiramate</i> SOLN 25 MG/ML	NP	
<i>topiramate</i> TABS 25 MG, 50 MG	P	QL(6 EA daily)
<i>topiramate</i> TABS 100 MG	P	QL(4 EA daily)
<i>topiramate</i> TABS 200 MG	P	QL(2 EA daily)
TRILEPTAL SUSP ( <i>oxcarbazepine</i> )	P	Brand Preferred
TRILEPTAL TABS ( <i>oxcarbazepine</i> )	NP	
TROKENDI XR CP24 ( <i>topiramate</i> )	NP	
VIMPAT SOLN PO 10 MG/ML ( <i>lacosamide</i> )	NP	PA

Drug Name	Drug Tier	Requirements/Limits
VIMPAT TABS ( <i>lacosamide</i> )	NP	PA
ZONISADE SUSP	NP	
<i>zonisamide</i> CAPS	P	
ZTALMY	NP	
Carbamates		
<i>felbamate</i> SUSP	P	
<i>felbamate</i> TABS	P	
FELBATOL TABS ( <i>felbamate</i> )	NP	
XCOPRI (250 MG DAILY DOSE) TBPK	NP	
XCOPRI (350 MG DAILY DOSE) TBPK	NP	
XCOPRI TABS	NP	
XCOPRI TBPK	NP	
GABA Modulators		
SABRIL PACK ( <i>vigabatrin</i> )	PA	Brand Preferred; SP; PA
SABRIL TABS ( <i>vigabatrin</i> )	NP	SP; PA
<i>tiagabine</i> hcl	PA	PA
<i>vigabatrin</i> PACK	PA	Brand Preferred; SP; PA
<i>vigabatrin</i> PACK	NP	Brand Preferred; SP
<i>vigabatrin</i> TABS	PA	SP; PA
<i>vigabatrin</i> TABS	NP	SP
VIGAFYDE SOLN	NP	SP
Hydantoins		
DILANTIN ( <i>phenytoin sodium extended</i> )	NP	
DILANTIN	NP	
DILANTIN INFATABS CHEW ( <i>phenytoin</i> )	NP	
DILANTIN-125 SUSP ( <i>phenytoin</i> )	NP	
DILANTIN SUSP ( <i>phenytoin</i> )	NP	

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Drug Name	Drug Tier	Requirements/Limits
<i>phenytoin sodium extended 200 MG, 300 MG</i>	NP	
<i>phenytoin sodium extended 100 MG, 200 MG, 300 MG</i>	P	
<i>phenytoin CHEW</i>	P	
<i>phenytoin SUSP 125 MG/5ML</i>	P	
<b>Succinimides</b>		
CELONTIN ( <i>methsuximide</i> )	P	Brand Preferred
<i>ethosuximide CAPS</i>	P	
<i>ethosuximide SOLN</i>	P	
<i>methsuximide</i>	NP	Brand Preferred
ZARONTIN CAPS ( <i>ethosuximide</i> )	NP	
ZARONTIN SOLN ( <i>ethosuximide</i> )	NP	
<b>Valproic Acid</b>		
DEPAKOTE ER TB24 250 MG ( <i>divalproex sodium</i> )	NP	QL(3 EA daily)
DEPAKOTE ER TB24 500 MG ( <i>divalproex sodium</i> )	NP	QL(7 EA daily)
DEPAKOTE SPRINKLES CSDR ( <i>divalproex sodium</i> )	NP	QL(8 EA daily)
DEPAKOTE TBEC 250 MG ( <i>divalproex sodium</i> )	NP	QL(3 EA daily)
DEPAKOTE TBEC 125 MG ( <i>divalproex sodium</i> )	NP	QL(2 EA daily)
DEPAKOTE TBEC 500 MG ( <i>divalproex sodium</i> )	NP	QL(7 EA daily)
<i>divalproex sodium CSDR</i>	P	QL(8 EA daily)
<i>divalproex sodium TB24 250 MG</i>	P	QL(3 EA daily)
<i>divalproex sodium TB24 500 MG</i>	P	QL(7 EA daily)
<i>divalproex sodium TBEC 500 MG</i>	P	QL(7 EA daily)

Drug Name	Drug Tier	Requirements/Limits
<i>divalproex sodium TBEC 250 MG</i>	P	QL(3 EA daily)
<i>divalproex sodium TBEC 125 MG</i>	P	QL(2 EA daily)
<i>valproate sodium SOLN IV 100 MG/ML, 500 MG/5ML</i>	C	PA
<i>valproate sodium SOLN PO 250 MG/5ML, 500 MG/10ML</i>	P	
<i>valproic acid CAPS</i>	P	
<b>ANTIDEPRESSANTS - Drugs to Treat Depression</b>		
<b>Alpha-2 Receptor Antagonists (Tetracyclics)</b>		
<i>mirtazapine TABS 15 MG</i>	P	QL(3 EA daily)
<i>mirtazapine TABS 7.5 MG, 45 MG</i>	P	QL(1 EA daily)
<i>mirtazapine TABS 30 MG</i>	P	QL(1.5 EA daily)
<i>mirtazapine TBDP 30 MG</i>	P	QL(1.5 EA daily)
<i>mirtazapine TBDP 15 MG</i>	P	QL(3 EA daily)
<i>mirtazapine TBDP 45 MG</i>	P	QL(1 EA daily)
REMERON SOLTAB TBDP 45 MG ( <i>mirtazapine</i> )	NP	QL(1 EA daily)
REMERON SOLTAB TBDP 15 MG ( <i>mirtazapine</i> )	NP	QL(3 EA daily)
REMERON SOLTAB TBDP 30 MG ( <i>mirtazapine</i> )	NP	QL(1.5 EA daily)
REMERON TABS 30 MG ( <i>mirtazapine</i> )	NP	QL(1.5 EA daily)
REMERON TABS 15 MG ( <i>mirtazapine</i> )	NP	QL(3 EA daily)
<b>Antidepressant Combinations</b>		
AUVELITY	NP	
<b>Antidepressants - Misc.</b>		
<i>bupropion hcl TABS</i>	P	QL(3 EA daily)
<i>bupropion hcl TB12 200 MG</i>	P	QL(2 EA daily)

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>bupropion hcl TB12 150 MG</i>	P	QL(3 EA daily)	<i>citalopram hydrobromide TABS 10 MG</i>	P	QL(4 EA daily)
<i>bupropion hcl TB12 100 MG</i>	P	QL(4 EA daily)	<i>citalopram hydrobromide TABS 20 MG</i>	P	QL(2 EA daily); AL(At least 7 yrs old)
<i>bupropion hcl TB24 450 MG</i>	NP		<i>citalopram hydrobromide TABS 40 MG</i>	P	QL(1 EA daily); AL(At least 7 yrs old)
<i>bupropion hcl TB24 300 MG</i>	P	QL(1 EA daily)	ESCITALOPRAM OXALATE CAPS PO 15 MG	NP	
<i>bupropion hcl TB24 150 MG</i>	P	QL(3 EA daily)	<i>escitalopram oxalate SOLN</i>	NP	
FORFIVO XL TB24 ( <i>bupropion hcl</i> )	NP		<i>escitalopram oxalate TABS 5 MG</i>	P	QL(4 EA daily)
WELLBUTRIN SR TB12 150 MG ( <i>bupropion hcl</i> )	NP	QL(3 EA daily)	<i>escitalopram oxalate TABS 10 MG</i>	P	QL(2 EA daily); AL(At least 7 yrs old)
WELLBUTRIN SR TB12 100 MG ( <i>bupropion hcl</i> )	NP	QL(4 EA daily)	<i>escitalopram oxalate TABS 20 MG</i>	P	QL(1 EA daily); AL(At least 7 yrs old)
WELLBUTRIN SR TB12 200 MG ( <i>bupropion hcl</i> )	NP	QL(2 EA daily)	<i>fluoxetine hcl CAPS 10 MG, 20 MG</i>	P	QL(4 EA daily)
GABA Receptor Modulator - Neuroactive Steroid			<i>fluoxetine hcl CAPS 40 MG</i>	P	QL(2 EA daily); AL(At least 7 yrs old)
ZURZUVAE	NP	SP	<i>fluoxetine hcl CPDR</i>	NP	
Monoamine Oxidase Inhibitors (MAOIs)			<i>fluoxetine hcl SOLN</i>	P	QL(120 ML per fill retail)
EMSAM	NP		<i>fluoxetine hcl TABS 10 MG</i>	P	QL(1 EA daily); AL(At least 7 yrs old)
MARPLAN	NP		<i>fluoxetine hcl TABS 60 MG</i>	NP	
NARDIL ( <i>phenelzine sulfate</i> )	NP		<i>fluoxetine hcl TABS 20 MG</i>	P	QL(4 EA daily)
<i>phenelzine sulfate</i>	P		FLUOXETINE HCL TABS ( <i>fluoxetine hcl</i> )	NP	
<i>tranylcypromine sulfate</i>	NP		<i>fluvoxamine maleate CP24</i>	NP	
Selective Serotonin Reuptake Inhibitors (SSRIs)			<i>fluvoxamine maleate TABS 25 MG, 50 MG</i>	P	QL(2 EA daily); AL(At least 7 yrs old)
CELEXA TABS 10 MG ( <i>citalopram hydrobromide</i> )	NP	QL(4 EA daily)	<i>fluvoxamine maleate TABS 100 MG</i>	P	QL(3 EA daily)
CELEXA TABS 40 MG ( <i>citalopram hydrobromide</i> )	NP	QL(1 EA daily); AL(At least 7 yrs old)			
CELEXA TABS 20 MG ( <i>citalopram hydrobromide</i> )	NP	QL(2 EA daily); AL(At least 7 yrs old)			
CITALOPRAM HYDROBROMIDE CAPS	NP				
<i>citalopram hydrobromide SOLN</i>	P				

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Drug Name	Drug Tier	Requirements/Limits
LEXAPRO TABS 20 MG (escitalopram oxalate)	NP	QL(1 EA daily); AL(At least 7 yrs old)
LEXAPRO TABS 5 MG (escitalopram oxalate)	NP	QL(4 EA daily)
LEXAPRO TABS 10 MG (escitalopram oxalate)	NP	QL(2 EA daily); AL(At least 7 yrs old)
paroxetine hcl SUSP	NP	QL(40 ML daily)
paroxetine hcl TABS 20 MG	P	QL(3 EA daily)
paroxetine hcl TABS 10 MG	P	QL(6 EA daily)
paroxetine hcl TABS 30 MG, 40 MG	P	QL(2 EA daily); AL(At least 7 yrs old)
paroxetine hcl TB24	NP	QL(1 EA daily); AL(At least 7 yrs old)
PAXIL CR TB24 (paroxetine hcl)	NP	QL(1 EA daily); AL(At least 7 yrs old)
PAXIL SUSP (paroxetine hcl)	NP	QL(40 ML daily)
PAXIL TABS 30 MG, 40 MG (paroxetine hcl)	NP	QL(2 EA daily); AL(At least 7 yrs old)
PAXIL TABS 20 MG (paroxetine hcl)	NP	QL(3 EA daily)
PAXIL TABS 10 MG (paroxetine hcl)	NP	QL(6 EA daily)
PROZAC CAPS 40 MG (fluoxetine hcl)	NP	QL(2 EA daily); AL(At least 7 yrs old)
PROZAC CAPS 10 MG, 20 MG (fluoxetine hcl)	NP	QL(4 EA daily)
sertraline hcl CAPS 150 MG, 200 MG	NP	
SERTRALINE HCL CAPS 150 MG, 200 MG (sertraline hcl)	NP	
sertraline hcl CONC	NP	QL(186 ML per 31 day(s) retail)
sertraline hcl TABS 100 MG	P	QL(2 EA daily); AL(At least 7 yrs old)

Drug Name	Drug Tier	Requirements/Limits
sertraline hcl TABS 25 MG, 50 MG	P	QL(4 EA daily)
ZOLOFT CONC (sertraline hcl)	NP	QL(186 ML per 31 day(s) retail)
ZOLOFT TABS 25 MG, 50 MG (sertraline hcl)	NP	QL(4 EA daily)
ZOLOFT TABS 100 MG (sertraline hcl)	NP	QL(2 EA daily); AL(At least 7 yrs old)
Serotonin Modulators		
EXXUA TITRATION PACK TB24 PO 18.2 MG	NP	AL(At least 18 yrs old)
EXXUA TB24 PO 18.2 MG, 36.3 MG, 54.5 MG, 72.6 MG	NP	AL(At least 18 yrs old)
nefazodone hcl	P	
RALDESY SOLN PO 10 MG/ML	NP	
trazodone hcl TABS 300 MG	P	QL(2 EA daily)
trazodone hcl TABS 50 MG, 100 MG, 150 MG	P	
TRINTELLIX	NP	QL(1 EA daily); AL(At least 18 yrs old)
VIIBRYD TABS (vilazodone hcl)	NP	QL(1 EA daily)
vilazodone hcl TABS	P	QL(1 EA daily)
Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)		
CYMBALTA CPEP (duloxetine hcl)	NP	QL(1 EA daily); AL(At least 7 yrs old)
DESVENLAFAXINE ER	NP	
desvenlafaxine succinate 100 MG	P	QL(4 EA daily)
desvenlafaxine succinate 25 MG, 50 MG	P	QL(1 EA daily)
DRIZALMA SPRINKLE CSDR	NP	

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Drug Name	Drug Tier	Requirements/Limits
<i>duloxetine hcl CPEP 20 MG, 30 MG, 60 MG</i>	P	QL(1 EA daily); AL(At least 7 yrs old)
<i>duloxetine hcl CPEP 40 MG</i>	NP	
EFFEXOR XR CP24 75 MG ( <i>venlafaxine hcl</i> )	NP	QL(5 EA daily)
EFFEXOR XR CP24 37.5 MG ( <i>venlafaxine hcl</i> )	NP	QL(4 EA daily)
EFFEXOR XR CP24 150 MG ( <i>venlafaxine hcl</i> )	NP	QL(2 EA daily)
FETZIMA TITRATION C4PK	NP	
FETZIMA CP24	NP	
PRISTIQ 100 MG ( <i>desvenlafaxine succinate</i> )	NP	QL(4 EA daily)
PRISTIQ 25 MG, 50 MG ( <i>desvenlafaxine succinate</i> )	NP	QL(1 EA daily)
VENLAFAXINE BESYLATE ER	NP	
<i>venlafaxine hcl CP24 75 MG</i>	P	QL(5 EA daily)
<i>venlafaxine hcl CP24 37.5 MG</i>	P	QL(4 EA daily)
<i>venlafaxine hcl CP24 150 MG</i>	P	QL(2 EA daily)
<i>venlafaxine hcl TABS</i>	P	
<i>venlafaxine hcl TB24 150 MG</i>	NP	QL(1 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)
<b>Tricyclic Agents</b>		
<i>amitriptyline hcl TABS</i>	C	
<i>amoxapine</i>	C	
<i>clomipramine hcl 75 MG</i>	C	
<i>desipramine hcl TABS 10 MG, 50 MG, 75 MG, 100 MG, 150 MG</i>	C	

Drug Name	Drug Tier	Requirements/Limits
<i>desipramine hcl TABS 25 MG</i>	C	QL(2 EA daily)
<i>doxepin hcl CAPS</i>	C	
<i>doxepin hcl CONC</i>	C	
<i>imipramine hcl TABS</i>	C	
<i>nortriptyline hcl CAPS</i>	C	
<i>nortriptyline hcl SOLN</i>	C	QL(20 ML daily)
<b>ANTIDIABETICS - Drugs to Regulate Blood Sugar</b>		
<b>Alpha-Glucosidase Inhibitors</b>		
<i>acarbose</i>	P	
<i>miglitol</i>	NP	
<b>Antidiabetic - Amylin Analogs</b>		
SYMLINPEN 120 SOPN	P	QL(11 ML per 31 day(s) retail; 11 ML per 31 days mail); ST
SYMLINPEN 60 SOPN	P	QL(6 ML per 31 day(s) retail; 6 ML per 31 days mail); ST
<b>Antidiabetic Combinations</b>		
ACTOPLUS MET TABS 850 MG-15 MG ( <i>pioglitazone hcl-metformin hcl</i> )	NP	QL(2 EA daily)
<i>alogliptin-metformin hcl</i>	NP	QL(2 EA daily)
<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)
<i>dapagliflozin propanediol-metformin hcl</i>	NP	Brand Preferred
DUETACT ( <i>pioglitazone hcl-glimepiride</i> )	NP	
<i>glipizide-metformin hcl</i>	NP	
<i>glyburide-metformin</i>	P	
GLYXAMBI	NP	
INVOKAMET XR TB24	NP	
INVOKAMET TABS	P	ST

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
JANUMET XR TB24	NP		<i>metformin hcl TABS 1000 MG</i>	P	QL(2 EA daily)
JANUMET TABS	P	ST	<i>metformin hcl TB24 500 MG, 1000 MG</i>	NP	
JENTADUETO XR TB24	NP		<i>metformin hcl TB24 750 MG</i>	P	QL(3 EA daily)
JENTADUETO TABS	P	ST	<i>metformin hcl TB24 500 MG</i>	P	QL(4 EA daily)
<i>pioglitazone hcl-glimepiride</i>	NP		RIOMET SOLN ( <i>metformin hcl</i> )	NP	
<i>pioglitazone hcl-metformin hcl TABS</i>	NP	QL(2 EA daily)	<b>Diabetic Other</b>		
QTERN	NP		BAQSIMI ONE PACK POWD	P	
<i>saxagliptin-metformin hcl</i>	NP	QL(1 EA daily)	BAQSIMI TWO PACK POWD	P	
SEGLUROMET	NP	QL(2 EA daily)	<i>dextrose (diabetic use) CHEW 4 GM</i>	C	Limit 50 ea per 31 days retail; QL(50 EA per 31 day(s) retail)
SITAGLIPT BASE-METFORM HCL ER TB24	NP		<i>diazoxide</i>	NP	Brand Preferred
SITAGLIPTIN BASE-METFORMIN HCL TABS	NP		GLUCAGON EMERGENCY	NP	
SOLIQUA	NP	QL(18 ML per 31 day(s) retail)	GLUCAGON EMERGENCY SOLR IJ 1 MG ( <i>glucagon</i> )	P	QL(4 EA per 365 day(s) retail)
STEGLUJAN	NP		<i>glucagon SOLR IJ 1 MG</i>	P	QL(4 EA per 365 day(s) retail)
SYNJARDY XR TB24	NP		GVOKE HYPOPEN 1-PACK SOAJ	P	
SYNJARDY TABS	NP		GVOKE HYPOPEN 2-PACK SOAJ	P	
TRIJARDY XR	NP		GVOKE KIT SOLN	NP	
XIGDUO XR 1000 MG-2.5 MG, 500 MG-10 MG, 500 MG-5 MG	P	ST	GVOKE PFS SOSY 1 MG/0.2ML	NP	
XIGDUO XR ( <i>dapagliflozin propanediol-metformin hcl</i> )	P	Brand Preferred	PROGLYCEM ( <i>diazoxide</i> )	P	Brand Preferred
XULTOPHY	NP		TRUEPLUS GLUCOSE ON THE GO CHEW	C	Limit 50 ea per 31 days retail; QL(50 EA per 31 day(s) retail)
ZITUVIMET XR TB24	NP				
ZITUVIMET TABS	NP				
<b>Biguanides</b>					
<i>metformin hcl SOLN</i>	NP				
<i>metformin hcl TABS 625 MG</i>	NP				
<i>metformin hcl TABS 500 MG</i>	P	QL(5 EA daily)			
<i>metformin hcl TABS 850 MG</i>	P	QL(3 EA daily)			
<i>metformin hcl TABS 750 MG</i>	P				

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TRUEPLUS GLUCOSE CHEW	C	Limit 50 ea per 31 days retail; QL(50 EA per 31 day(s) retail)	MOUNJARO	NP	
ZEGALOGUE SOAJ	P		OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN	PA	PA
ZEGALOGUE SOSY	P		OZEMPIC (1 MG/DOSE) SOPN 4 MG/3ML	PA	PA
Dipeptidyl Peptidase-4 (DPP-4) Inhibitors			OZEMPIC (2 MG/DOSE) SOPN	PA	PA
<i>alogliptin benzoate</i>	NP	QL(1 EA daily)	TRULICITY	PA	QL(2 ML per 28 day(s) retail); PA
BRYNOVIN SOLN PO 25 MG/ML	NP		VICTOZA ( <i>liraglutide</i> )	PA	Brand Preferred; QL(12 ML per 28 day(s) retail); AL(At least 10 yrs old); PA
JANUVIA	P	ST	Insulin		
<i>saxagliptin hcl</i>	NP	QL(1 EA daily)	ADMELOG SOLOSTAR SOPN	NP	QL(30 ML per 31 day(s) retail; 30 ML per 31 days mail)
SITAGLIPTIN	NP		ADMELOG SOLN IJ	NP	QL(30 ML per 30 day(s) retail; 30 ML per 30 days mail)
TRADJENTA	P	ST	AFREZZA POWD	NP	
ZITUVIO	NP		APIDRA SOLOSTAR SOPN	P	
Incretin Mimetic Agents			APIDRA SOLN	NP	
BYDUREON BCISE AUJ	NP	QL(3.4 ML per 28 day(s) retail)	BASAGLAR KWIKPEN SOPN	NP	
BYETTA 10 MCG PEN SOPN 10 MCG/0.04ML ( <i>exenatide</i> )	NP	QL(2.4 ML per 31 day(s) retail); AL(At least 18 yrs old)	BASAGLAR TEMPO PEN SOPN	NP	
BYETTA 5 MCG PEN SOPN 5 MCG/0.02ML ( <i>exenatide</i> )	NP	QL(1.2 ML per 31 day(s) retail); AL(At least 18 yrs old)	FIASP FLEXTOUCH SOPN	NP	
<i>exenatide SOPN 10 MCG/0.04ML</i>	NP	QL(2.4 ML per 31 day(s) retail); AL(At least 18 yrs old)	FIASP PENFILL SOCT	NP	
<i>exenatide SOPN 5 MCG/0.02ML</i>	NP	QL(1.2 ML per 31 day(s) retail); AL(At least 18 yrs old)	FIASP SOLN	NP	
<i>liraglutide</i>	NP	Brand Preferred; QL(12 ML per 28 day(s) retail); AL(At least 10 yrs old)	HUMALOG JUNIOR KWIKPEN SOPN	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)

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

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
INSULIN GLARGINE SOLOSTAR SOPN 300 UNIT/ML	NP		LYUMJEV KWIKPEN SOPN	NP	
INSULIN GLARGINE-YFGN SOLN	NP	QL(30 ML per 31 day(s) retail; 30 ML per 31 days mail)	LYUMJEV TEMPO PEN SOPN	NP	
INSULIN GLARGINE-YFGN SOPN	NP	QL(30 ML per 31 day(s) retail; 30 ML per 31 days mail)	LYUMJEV SOLN	NP	
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)	MERIOLOG SOLOSTAR SOPN SC 100 UNIT/ML	NP	
INSULIN LISPRO JUNIOR KWIKPEN SOPN	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)	MERIOLOG SOLN SC 100 UNIT/ML	NP	
INSULIN LISPRO PROT & LISPRO SUPN	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)	NOVOLIN 70/30 FLEXPEN RELION SUPN	NP	QL(1 ML daily)
INSULIN LISPRO SOLN IJ	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 30 day(s) retail; 30 ML per 30 days mail)	NOVOLIN 70/30 FLEXPEN SUPN	NP	QL(1 ML daily)
KIRSTY SOLN IJ 100 UNIT/ML	NP		NOVOLIN 70/30 RELION SUSP	NP	Limit 40mls per month
KIRSTY SOPN SC 100 UNIT/ML	NP		NOVOLIN 70/30 SUSP	NP	Limit 40mls per month
LANTUS SOLOSTAR SOPN	P	Brand Preferred	NOVOLIN N FLEXPEN RELION SUPN	NP	QL(1 ML daily)
LANTUS SOLN	P	Brand Preferred	NOVOLIN N FLEXPEN SUPN	NP	QL(1 ML daily)
			NOVOLIN N RELION SUSP	NP	Limit 40mls per month
			NOVOLIN N SUSP	NP	Limit 40mls per month
			NOVOLIN R FLEXPEN RELION SOPN IJ	NP	
			NOVOLIN R FLEXPEN SOPN IJ	NP	
			NOVOLIN R RELION SOLN IJ	NP	Limit 40mls per month
			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)

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
NOVOLOG FLEXPEN SOPN	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)	TOUJEO SOLOSTAR SOPN	NP	
NOVOLOG MIX 70/30 FLEXPEN SUPN	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)	TRESIBA FLEXTOUCH SOPN 100 UNIT/ML	P	QL(1.5 ML daily)
NOVOLOG MIX 70/30 RELION SUSP	P	USE BRAND NAME or Authorized Generic	TRESIBA FLEXTOUCH SOPN 200 UNIT/ML	P	QL(0.9 ML daily)
NOVOLOG MIX 70/30 SUSP	P	USE BRAND NAME or Authorized Generic	TRESIBA SOLN	P	Brand Preferred; QL(1.5 ML daily)
NOVOLOG PENFILL SOCT	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)	Insulin Sensitizing Agents		
NOVOLOG RELION SOLN IJ	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)	ACTOS ( <i>pioglitazone hcl</i> )	NP	QL(1 EA daily)
NOVOLOG SOLN IJ	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)	<i>pioglitazone hcl</i>	P	QL(1 EA daily)
REZVOGLAR KWIKPEN	NP		Meglitinide Analogues		
SEMGLEE (YFGN) SOLN	NP	QL(30 ML per 31 day(s) retail; 30 ML per 31 days mail)	<i>nateglinide</i>	P	QL(3 EA daily)
SEMGLEE (YFGN) SOPN	NP	QL(30 ML per 31 day(s) retail; 30 ML per 31 days mail)	<i>repaglinide</i>	NP	
TOUJEO MAX SOLOSTAR SOPN	NP		Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors		
			<i>dapagliflozin propanediol</i>	NP	ST
			FARXIGA ( <i>dapagliflozin propanediol</i> )	P	Brand Preferred; ST
			INVOKANA	P	ST
			JARDIANCE	P	ST
			STEGLATRO	NP	QL(1 EA daily)
			Sulfonylureas		
			<i>glimepiride 3 MG</i>	P	
			<i>glimepiride 4 MG</i>	P	QL(2 EA daily)
			<i>glimepiride 1 MG, 2 MG</i>	P	QL(4 EA daily)
			<i>glipizide TABS</i>	P	
			<i>glipizide TB24</i>	P	
			GLUCOTROL XL TB24 5 MG, 10 MG ( <i>glipizide</i> )	NP	
			<i>glyburide micronized 1.5 MG, 3 MG, 6 MG</i>	P	
			<i>glyburide TABS</i>	P	
ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea					

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Drug Name	Drug Tier	Requirements/Limits
<b>Antidiarrheal/Probiotic Agents - Misc.</b>		
<i>bismuth subsalicylate CHEW 262 MG</i>	C	
<i>bismuth subsalicylate SUSP 525 MG/15ML, 1050 MG/30ML</i>	C	
<b>Antiperistaltic Agents</b>		
<i>diphenoxylate w/ atropine LIQD</i>	C	
<i>diphenoxylate w/ atropine TABS</i>	C	
<i>loperamide hcl CAPS</i>	C	QL(8 EA daily); RX/OTC
<i>loperamide hcl TABS</i>	C	QL(8 EA daily)
<b>ANTIDOTES AND SPECIFIC ANTAGONISTS</b>		
<b>Antidotes - Chelating Agents</b>		
CHEMET	C	
<i>deferasirox PACK</i>	C	SP; PA
<i>deferasirox TABS</i>	C	SP; PA
<i>deferasirox TBSO</i>	C	SP; PA
<b>Opioid Antagonists</b>		
KLOXXADO LIQD	NP	
<i>naloxone hcl LIQD</i>	P	Brand Preferred; 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	

Drug Name	Drug Tier	Requirements/Limits
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	
ZURNAI IJ 1.5 MG/0.5ML	NP	
<b>ANTIEMETICS - Drugs to Treat Nausea and Vomiting</b>		
<b>5-HT3 Receptor Antagonists</b>		
<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; 20 EA per 31 days mail)
SANCUSO PTCH	NP	
<b>Antiemetics - Anticholinergic</b>		
ANTIVERT CHEW ( <i>meclizine hcl</i> )	NP	RX/OTC
ANTIVERT TABS 50 MG ( <i>meclizine hcl</i> )	NP	
<i>dimenhydrinate TABS</i>	C	QL(24 EA per fill retail)
<i>meclizine hcl TABS 12.5 MG, 25 MG, 50 MG</i>	NP	RX/OTC
<i>scopolamine</i>	P	
TRANSDERM SCOP 1 MG/3DAYS ( <i>scopolamine</i> )	NP	

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Drug Name	Drug Tier	Requirements/Limits
TRANSDERM-SCOP (scopolamine)	NP	
trimethobenzamide hcl CAPS	NP	
Antiemetics - Miscellaneous		
AKYNZEO	NP	
BONJESTA TBCR	NP	
DICLEGIS TBEC (doxylamine-pyridoxine)	NP	
doxylamine-pyridoxine TBEC	NP	
dronabinol CAPS	NP	
MARINOL CAPS 2.5 MG (dronabinol)	NP	
Substance P/Neurokinin 1 (NK1) Receptor Antagonists		
aprepitant CAPS	P	
EMEND BIPACK CAPS 80 MG (aprepitant)	NP	
EMEND TRIPACK CAPS (aprepitant)	NP	
EMEND SUSR	NP	
<b>ANTIFUNGALS - Drugs to Treat Fungal Infections</b>		
Antifungal - Glucan Synthesis Inhibitors		
BREXAFEMME	NP	
Antifungals		
griseofulvin microsize SUSP	P	
griseofulvin microsize TABS	NP	
griseofulvin ultramicrosize	P	
nystatin TABS	P	QL(6 EA daily)
terbinafine hcl TABS	P	QL(1 EA daily; 90 EA per 120 day(s) retail)
Imidazole-Related Antifungals		
CRESEMBA CAPS	NP	

Drug Name	Drug Tier	Requirements/Limits
DIFLUCAN SUSR 40 MG/ML (fluconazole)	NP	QL(70 ML per fill retail)
fluconazole SUSR	P	QL(70 ML per fill retail)
fluconazole TABS 100 MG, 200 MG	P	
fluconazole TABS 150 MG	P	QL(2 EA per fill retail)
fluconazole TABS 50 MG	P	QL(3 EA per 14 day(s) retail)
itraconazole CAPS	NP	QL(1 EA daily)
itraconazole SOLN	NP	
ketoconazole	NP	
SPORANOX CAPS (itraconazole)	NP	QL(1 EA daily)
SPORANOX SOLN (itraconazole)	NP	
VFEND SUSR (voriconazole)	NP	
voriconazole SUSR	NP	
voriconazole TABS	NP	
<b>ANTI-HISTAMINES - Drugs to Treat Allergies</b>		
Antihistamines - Alkylamines		
chlorpheniramine maleate SYRP	C	
chlorpheniramine maleate TABS	C	QL(120 EA per fill retail)
dexchlorpheniramine maleate SOLN	C	
Antihistamines - Ethanolamines		
diphenhydramine hcl CAPS	C	QL(4 EA daily)
diphenhydramine hcl ELIX 12.5 MG/5ML	C	QL(240 ML per fill retail)
diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML	C	QL(240 ML per fill retail)
diphenhydramine hcl TABS 25 MG	C	QL(4 EA daily)
Antihistamines - Non-Sedating		

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>cetirizine hcl CHEW</i>	C	QL(1 EA daily)	<i>ezetimibe-simvastatin</i>	NP	QL(1 EA daily)
<i>cetirizine hcl SOLN PO</i>	P	QL(300 ML per fill retail); AL(Up to 12 yrs old); RX/OTC	VYTORIN ( <i>ezetimibe-simvastatin</i> )	NP	QL(1 EA daily)
<i>cetirizine hcl TABS</i>	P	QL(1 EA daily)	Antihyperlipidemics - Misc.		
CLARINEX TABS ( <i>desloratadine</i> )	NP		<i>icosapent ethyl</i>	P	
DESLORATADINE SOLN PO 0.5 MG/ML	NP		<i>omega-3-acid ethyl esters</i>	P	
<i>desloratadine TABS</i>	NP		Bile Acid Sequestrants		
<i>desloratadine TBDP</i>	NP	AL(Up to 12 yrs old)	<i>cholestyramine light PACK</i>	P	
<i>fexofenadine hcl TABS 180 MG</i>	C	QL(1 EA daily)	<i>cholestyramine light PACK</i>	NP	
<i>fexofenadine hcl TABS 60 MG</i>	C	QL(2 EA daily)	<i>cholestyramine light POWD</i>	P	
<i>levocetirizine dihydrochloride SOLN</i>	NP	AL(Up to 12 yrs old); RX/OTC	<i>cholestyramine light POWD</i>	NP	
<i>levocetirizine dihydrochloride TABS</i>	P	QL(1 EA daily); RX/OTC	<i>cholestyramine PACK</i>	P	
<i>loratadine CHEW</i>	P		<i>cholestyramine POWD</i>	P	
<i>loratadine TABS</i>	P	QL(1 EA daily)	<i>colesevelam hcl PACK</i>	NP	
<i>loratadine TBDP 10 MG</i>	P	QL(1 EA daily); AL(Up to 12 yrs old)	<i>colesevelam hcl TABS</i>	NP	
Antihistamines - Phenothiazines			COLESTID GRAN ( <i>colestipol hcl</i> )	NP	
<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)	COLESTID TABS ( <i>colestipol hcl</i> )	NP	
<i>promethazine hcl SUPP</i>	P	QL(12 EA per fill retail); AL(At least 2 yrs old)	<i>colestipol hcl GRAN</i>	P	
<i>promethazine hcl TABS</i>	P	AL(At least 2 yrs old)	<i>colestipol hcl PACK</i>	P	
Antihistamines - Piperidines			<i>colestipol hcl TABS</i>	P	
<i>cyproheptadine hcl SYRP</i>	C		QUESTRAN LIGHT POWD ( <i>cholestyramine light</i> )	NP	
<i>cyproheptadine hcl TABS</i>	C		QUESTRAN PACK ( <i>cholestyramine</i> )	NP	
ANTHYPERLIPIDEMICS - Drugs to Treat High Cholesterol			QUESTRAN POWD ( <i>cholestyramine</i> )	NP	
Antihyperlipidemics - Combinations			WELCHOL PACK ( <i>colesevelam hcl</i> )	NP	
			WELCHOL TABS ( <i>colesevelam hcl</i> )	NP	
			Fibric Acid Derivatives		
			<i>choline fenofibrate</i>	NP	

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Drug Name	Drug Tier	Requirements/Limits
<i>fenofibrate micronized 67 MG</i>	NP	QL(2 EA daily)
<i>fenofibrate micronized 43 MG, 130 MG</i>	NP	
<i>fenofibrate micronized 134 MG, 200 MG</i>	NP	QL(1 EA daily)
<i>fenofibrate CAPS</i>	NP	
<i>fenofibrate TABS 40 MG, 120 MG</i>	NP	
<i>fenofibrate TABS 54 MG</i>	NP	QL(3 EA daily)
<i>fenofibrate TABS 160 MG</i>	NP	QL(1 EA daily)
<i>fenofibrate TABS 48 MG, 145 MG</i>	P	
<i>fenofibric acid</i>	NP	
FIBRICOR ( <i>fenofibric acid</i> )	NP	
<i>gemfibrozil TABS</i>	P	QL(2 EA daily)
LIPOFEN CAPS ( <i>fenofibrate</i> )	NP	
LOPID TABS ( <i>gemfibrozil</i> )	NP	QL(2 EA daily)
TRICOR TABS 145 MG ( <i>fenofibrate</i> )	NP	
HMG CoA Reductase Inhibitors		
ALTOPREV TB24 20 MG, 40 MG, 60 MG	NP	
ATORVALIQ SUSP	NP	
<i>atorvastatin calcium TABS</i>	P	QL(1 EA daily)
CRESTOR TABS ( <i>rosuvastatin calcium</i> )	NP	QL(1 EA daily)
EZALLOR SPRINKLE CPSP	NP	
<i>fluvastatin sodium CAPS</i>	P	
<i>fluvastatin sodium TB24</i>	NP	
LESCOL XL TB24 ( <i>fluvastatin sodium</i> )	NP	
LIPITOR TABS ( <i>atorvastatin calcium</i> )	NP	QL(1 EA daily)
LIVALO ( <i>pitavastatin calcium</i> )	NP	
<i>lovastatin TABS 40 MG</i>	P	QL(2 EA daily)

Drug Name	Drug Tier	Requirements/Limits
<i>lovastatin TABS 10 MG, 20 MG</i>	P	QL(1 EA daily)
<i>pitavastatin calcium</i>	NP	
<i>pravastatin sodium</i>	P	QL(1 EA daily)
<i>rosuvastatin calcium TABS</i>	P	QL(1 EA daily)
<i>simvastatin TABS 5 MG, 10 MG, 20 MG, 40 MG</i>	P	QL(1 EA daily)
<i>simvastatin TABS 80 MG</i>	P	
ZOCOR TABS 10 MG, 20 MG, 40 MG ( <i>simvastatin</i> )	NP	QL(1 EA daily)
ZYPITAMAG 2 MG, 4 MG	NP	
Intestinal Cholesterol Absorption Inhibitors		
<i>ezetimibe</i>	P	
ZETIA ( <i>ezetimibe</i> )	NP	
<b>ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure</b>		
ACE Inhibitors		
ACCUPRIL ( <i>quinapril hcl</i> )	NP	
ALTACE CAPS 1.25 MG, 5 MG, 10 MG ( <i>ramipril</i> )	NP	QL(2 EA daily)
<i>benazepril hcl 40 MG</i>	P	QL(2 EA daily)
<i>benazepril hcl 5 MG, 10 MG, 20 MG</i>	P	QL(1 EA daily)
<i>captopril</i>	P	QL(3 EA daily)
<i>enalapril maleate SOLN</i>	NP	
<i>enalapril maleate TABS</i>	P	QL(2 EA daily)
EPANED SOLN ( <i>enalapril maleate</i> )	NP	
<i>fosinopril sodium</i>	NP	QL(1 EA daily)
<i>lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG</i>	P	
LOTENSIN 40 MG ( <i>benazepril hcl</i> )	NP	QL(2 EA daily)
LOTENSIN 10 MG, 20 MG ( <i>benazepril hcl</i> )	NP	QL(1 EA daily)
<i>moexipril hcl</i>	NP	
<i>perindopril erbumine</i>	NP	

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Drug Name	Drug Tier	Requirements/Limits
QBRELIS SOLN	NP	
<i>quinapril hcl</i>	NP	
<i>ramipril CAPS</i>	P	QL(2 EA daily)
<i>trandolapril 4 MG</i>	NP	QL(2 EA daily)
<i>trandolapril 1 MG, 2 MG</i>	NP	QL(1 EA daily)
ZESTRIL TABS ( <i>lisinopril</i> )	NP	
Angiotensin II Receptor Antagonists		
ARB LI PO 10 MG/ML	NP	
ATACAND ( <i>candesartan cilexetil</i> )	NP	
AVAPRO 150 MG, 300 MG ( <i>irbesartan</i> )	NP	QL(1 EA daily)
BENICAR ( <i>olmesartan medoxomil</i> )	NP	QL(1 EA daily)
<i>candesartan cilexetil</i>	NP	
COZAAR ( <i>losartan potassium</i> )	NP	QL(1 EA daily)
DIOVAN TABS ( <i>valsartan</i> )	NP	QL(1 EA daily)
EDARBI	NP	
<i>irbesartan</i>	P	QL(1 EA daily)
<i>losartan potassium</i>	P	QL(1 EA daily)
MICARDIS ( <i>telmisartan</i> )	NP	
<i>olmesartan medoxomil</i>	P	QL(1 EA daily)
<i>telmisartan</i>	P	
<i>valsartan SOLN</i>	NP	
<i>valsartan TABS</i>	P	QL(1 EA daily)
Antiadrenergic Antihypertensives		
CARDURA ( <i>doxazosin mesylate</i> )	NP	
<i>clonidine hcl TABS</i>	P	
<i>clonidine PTWK</i>	P	
<i>clonidine TB24</i>	NP	
<i>doxazosin mesylate</i>	P	
<i>guanfacine hcl</i>	P	
JAVADIN SOLN PO 0.02 MG/ML	NP	
<i>methyl dopa TABS 500 MG</i>	C	

Drug Name	Drug Tier	Requirements/Limits
<i>methyl dopa TABS</i>	P	
NEXICLON XR TB24 ( <i>clonidine</i> )	NP	
<i>prazosin hcl CAPS</i>	C	
<i>terazosin hcl</i>	P	
TEZRULY PO 1 MG/ML	NP	
Antihypertensive Combinations		
ACCURETIC 12.5 MG-10 MG ( <i>quinapril-hydrochlorothiazide</i> )	NP	QL(3 EA daily)
ACCURETIC 12.5 MG-20 MG ( <i>quinapril-hydrochlorothiazide</i> )	NP	QL(4 EA daily)
<i>amlodipine besylate-benazepril hcl</i>	P	QL(1 EA daily)
<i>amlodipine besylate-olmesartan medoxomil</i>	NP	
<i>amlodipine besylate-olmesartan medoxomil</i>	NP	ST
<i>amlodipine besylate-valsartan 5 MG-160 MG</i>	P	
<i>amlodipine besylate-valsartan 10 MG-160 MG, 10 MG-320 MG, 5 MG-320 MG</i>	P	
<i>amlodipine-valsartan-hydrochlorothiazide</i>	P	
ATACAND HCT ( <i>candesartan cilexetil-hydrochlorothiazide</i> )	NP	
<i>atenolol &amp; chlorthalidone</i>	P	QL(2 EA daily)
AVALIDE ( <i>irbesartan-hydrochlorothiazide</i> )	NP	QL(1 EA daily)
AZOR ( <i>amlodipine besylate-olmesartan medoxomil</i> )	NP	ST
<i>benazepril &amp; hydrochlorothiazide</i>	P	QL(1 EA daily)
BENICAR HCT ( <i>olmesartan medoxomil-hydrochlorothiazide</i> )	NP	QL(1 EA daily)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>bisoprolol &amp; hydrochlorothiazide 6.25 MG-2.5 MG</i>	P		LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG ( <i>amlodipine besylate-benazepril hcl</i> )	NP	QL(1 EA daily)
<i>bisoprolol &amp; hydrochlorothiazide 6.25 MG-10 MG, 6.25 MG-5 MG</i>	P	QL(1 EA daily)	<i>metoprolol &amp; hydrochlorothiazide TABS 25 MG-100 MG, 25 MG-50 MG</i>	NP	QL(2 EA daily)
<i>candesartan cilexetil-hydrochlorothiazide</i>	NP		<i>metoprolol &amp; hydrochlorothiazide TABS 50 MG-100 MG</i>	NP	QL(1 EA daily)
<i>captopril &amp; hydrochlorothiazide 15 MG-25 MG, 15 MG-50 MG, 25 MG-25 MG</i>	NP	QL(2 EA daily)	MICARDIS HCT ( <i>telmisartan-hydrochlorothiazide</i> )	NP	QL(1 EA daily)
<i>captopril &amp; hydrochlorothiazide 25 MG-50 MG</i>	NP	QL(3 EA daily)	<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>	NP	
DIOVAN HCT ( <i>valsartan-hydrochlorothiazide</i> )	NP	QL(1 EA daily)	<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>	NP	ST
EDARBYCLOR	NP		<i>olmesartan medoxomil-hydrochlorothiazide</i>	P	QL(1 EA daily)
<i>enalapril maleate &amp; hydrochlorothiazide</i>	P	QL(2 EA daily)	<i>quinapril-hydrochlorothiazide 25 MG-20 MG</i>	NP	QL(2 EA daily)
EXFORGE ( <i>amlodipine besylate-valsartan</i> )	NP		<i>quinapril-hydrochlorothiazide 12.5 MG-20 MG</i>	NP	QL(4 EA daily)
EXFORGE HCT ( <i>amlodipine-valsartan-hydrochlorothiazide</i> )	NP		<i>quinapril-hydrochlorothiazide 12.5 MG-10 MG</i>	NP	QL(3 EA daily)
<i>fosinopril sodium &amp; hydrochlorothiazide</i>	NP	QL(1 EA daily)	<i>telmisartan-amlodipine</i>	NP	ST
HYZAAR ( <i>losartan potassium &amp; hydrochlorothiazide</i> )	NP	QL(1 EA daily)	<i>telmisartan-hydrochlorothiazide</i>	P	QL(1 EA daily)
<i>irbesartan-hydrochlorothiazide</i>	P	QL(1 EA daily)	TENORETIC 100 ( <i>atenolol &amp; chlorthalidone</i> )	NP	QL(2 EA daily)
<i>lisinopril &amp; hydrochlorothiazide</i>	P		TENORETIC 50 ( <i>atenolol &amp; chlorthalidone</i> )	NP	QL(2 EA daily)
<i>losartan potassium &amp; hydrochlorothiazide</i>	P	QL(1 EA daily)	<i>trandolapril-verapamil hcl</i>	P	
LOTENSIN HCT 12.5 MG-10 MG, 12.5 MG-20 MG, 25 MG-20 MG ( <i>benazepril &amp; hydrochlorothiazide</i> )	NP	QL(1 EA daily)	TRIBENZOR ( <i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i> )	NP	ST

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>valsartan-hydrochlorothiazide</i>	P	QL(1 EA daily)	VANCOGIN CAPS 250 MG ( <i>vancomycin hcl</i> )	NP	QL(8 EA daily); ST
ZESTORETIC ( <i>lisinopril &amp; hydrochlorothiazide</i> )	NP		VANCOGIN CAPS 125 MG ( <i>vancomycin hcl</i> )	NP	QL(4 EA daily); ST
Direct Renin Inhibitors			<i>vancomycin hcl CAPS 125 MG</i>	P	QL(4 EA daily); ST
<i>aliskiren fumarate</i>	NP	Brand Preferred; ST	<i>vancomycin hcl CAPS 250 MG</i>	P	QL(8 EA daily); ST
TEKTURNA ( <i>aliskiren fumarate</i> )	P	Brand Preferred; ST	<i>vancomycin hcl CAPS 250 MG</i>	P	QL(8 EA daily)
Vasodilators			<i>vancomycin hcl CAPS 125 MG</i>	P	QL(4 EA daily)
<i>hydralazine hcl TABS</i>	C		<i>vancomycin hcl SOLR PO 25 MG/ML, 50 MG/ML, 250 MG/5ML</i>	P	QL(300 ML per fill retail; 300 per fill mail); ST
<i>minoxidil 2.5 MG</i>	C	QL(3 EA daily)	<i>vancomycin hcl SOLR IV 500 MG</i>	C	QL(14 EA per 31 day(s) retail)
<i>minoxidil 10 MG</i>	C	QL(10 EA daily)	<i>vancomycin hcl SOLR IV 1 GM</i>	C	QL(14 EA per fill retail)
<b>ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections</b>			VANCOMYCIN HCL SOLR IV 1 GM	C	QL(14 EA per fill retail)
Anti-infective Agents - Misc.			VANCOMYCIN HCL SOLR IV 500 MG	C	QL(14 EA per 31 day(s) retail)
FLAGYL CAPS ( <i>metronidazole</i> )	NP		Leprostotics		
LIKMEZ SUSP	NP		<i>dapsone</i>	C	
<i>metronidazole CAPS</i>	P		Lincosamides		
<i>metronidazole TABS</i>	P		<i>clindamycin hcl 150 MG, 300 MG</i>	C	
<i>tinidazole</i>	NP	ST	<i>clindamycin palmitate hydrochloride</i>	C	QL(300 ML per fill retail)
<i>trimethoprim TABS</i>	C		Monobactams		
Anti-infective Misc. - Combinations			CAYSTON	NP	SP
<i>methenamine-hyosc-methylene blue-sod phospheryl sal TABS 81.6 MG</i>	C		Oxazolidinones		
<i>sulfamethoxazole-trimethoprim SUSP</i>	C		SIVEXTRO TABS	C	QL(6 EA per fill retail); PA
<i>sulfamethoxazole-trimethoprim TABS</i>	C		Urinary Anti-infectives		
Antiprotozoal Agents			<i>methenamine mandelate</i>	C	
<i>nitazoxanide TABS</i>	NP	ST	<i>nitrofurantoin</i>	C	QL(40 ML daily)
Glycopeptides					
FIRVANQ SOLR PO ( <i>vancomycin hcl</i> )	NP	QL(300 ML per fill retail; 300 per fill mail); ST			

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Drug Name	Drug Tier	Requirements/Limits
<i>nitrofurantoin macrocrystal 50 MG, 100 MG</i>	C	
<i>nitrofurantoin monohydrate macro</i>	C	
<b>ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)</b>		
Antimalarial Combinations		
COARTEM	C	QL(24 EA per fill retail)
Antimalarials		
<i>chloroquine phosphate TABS 500 MG</i>	C	QL(1 EA daily)
<i>chloroquine phosphate TABS 250 MG</i>	C	
<i>hydroxychloroquine sulfate 100 MG, 200 MG</i>	C	
KRINTAFEL	C	QL(0.67 EA daily)
<i>mefloquine hcl</i>	C	
<i>primaquine phosphate TABS</i>	C	
SOVUNA 200 MG	C	
<b>ANTIMYASTHENIC/CHOLINERGIC AGENTS</b>		
Antimyasthenic/Cholinergic Agents		
<i>pyridostigmine bromide TABS 60 MG</i>	C	
<i>pyridostigmine bromide TBCR</i>	C	
<b>ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)</b>		
Antimycobacterial Agents		
<i>ethambutol hcl TABS</i>	C	
<i>isoniazid SYRP</i>	C	
<i>isoniazid TABS</i>	C	
<i>pyrazinamide</i>	C	
<i>rifabutin</i>	C	
<i>rifampin CAPS</i>	C	

Drug Name	Drug Tier	Requirements/Limits
<b>ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer</b>		
Antimetabolites		
JYLAMVO SOLN PO	NP	SP
<i>mercaptopurine SUSP 2000 MG/100ML</i>	C	
<i>mercaptopurine TABS</i>	C	
<i>methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML</i>	P	
<i>methotrexate sodium SOLR</i>	P	
<i>methotrexate sodium TABS 2.5 MG</i>	P	
TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	NP	
XATMEP SOLN PO	NP	
Antineoplastic - Angiogenesis Inhibitors		
MVASI	C	SP; PA
ZIRABEV	C	SP; PA
Antineoplastic - Antibodies		
ENHERTU	C	SP; PA
PADCEV	C	SP; PA
RUXIENCE	C	SP; PA
TRUXIMA	C	SP; PA
Antineoplastic - Anti-HER2 Agents		
KANJINTI	C	SP; PA
OGIVRI	C	SP; PA
TRAZIMERA 420 MG	C	SP; PA
Antineoplastic - Hormonal and Related Agents		
<i>abiraterone acetate</i>	C	SP; PA
<i>anastrozole</i>	C	
<i>bicalutamide</i>	C	QL(1 EA daily)
<i>exemestane</i>	C	
<i>letrozole</i>	C	

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Drug Name	Drug Tier	Requirements/Limits
<i>megestrol acetate SUSP</i>	P	
<i>megestrol acetate TABS</i>	C	
<i>tamoxifen citrate TABS</i>	C	
<i>toremifene citrate</i>	C	PA
<b>Antineoplastic Combinations</b>		
PHEGO	C	SP; PA
<b>Antineoplastic Enzyme Inhibitors</b>		
BRAFTOVI 75 MG	C	SP; PA
IBRANCE CAPS	C	SP; PA
IBRANCE TABS	C	SP; PA
ICLUSIG	C	QL(1 EA daily); SP; PA
INREBIC	C	SP; PA
MEKTOVI	C	SP; PA
ROZLYTREK CAPS	C	SP; PA
<b>Antineoplastic Enzymes</b>		
ASPARLAS	C	SP; PA
<b>Antineoplastics Misc.</b>		
<i>hydroxyurea</i>	P	
<b>Chemotherapy Rescue/Antidote/Protective Agents</b>		
<i>leucovorin calcium TABS</i>	C	
<b>ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease</b>		
<b>Antiparkinson Adjunctive Therapy</b>		
<i>carbidopa</i>	C	
<b>Antiparkinson Anticholinergics</b>		
<i>benztropine mesylate TABS</i>	C	
<i>trihexyphenidyl hcl SOLN</i>	C	QL(16.67 ML daily)
<i>trihexyphenidyl hcl TABS</i>	C	
<b>Antiparkinson Dopaminergics</b>		
<i>amantadine hcl CAPS</i>	C	
<i>amantadine hcl SOLN</i>	C	

Drug Name	Drug Tier	Requirements/Limits
<i>bromocriptine mesylate CAPS</i>	C	
<i>bromocriptine mesylate TABS 2.5 MG</i>	C	
<i>carbidopa-levodopa TABS</i>	C	
<i>carbidopa-levodopa TBCR</i>	C	
DHIVY TABS	C	
MIRAPEX ER TB24 2.25 MG, 3 MG, 3.75 MG ( <i>pramipexole dihydrochloride</i> )	NP	
NEUPRO	NP	
OSMOLEX ER TB24 129 MG, 193 MG	NP	
<i>pramipexole dihydrochloride TABS</i>	P	QL(3 EA daily); AL(At least 18 yrs old)
<i>pramipexole dihydrochloride TB24</i>	NP	
<i>ropinirole hydrochloride TABS 0.25 MG, 3 MG, 4 MG</i>	P	QL(6 EA daily)
<i>ropinirole hydrochloride TABS 0.5 MG, 1 MG, 2 MG, 5 MG</i>	P	QL(3 EA daily)
<i>ropinirole hydrochloride TB24</i>	NP	
<b>Antiparkinson Monoamine Oxidase Inhibitors</b>		
<i>selegiline hcl CAPS</i>	C	
<i>selegiline hcl TABS</i>	C	
<b>ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders</b>		
<b>Antimanic Agents</b>		
<i>lithium</i>	C	QL(10 ML daily)
<i>lithium carbonate CAPS</i>	C	
<i>lithium carbonate TABS</i>	C	
<i>lithium carbonate TBCR</i>	C	
<b>Antipsychotics - Misc.</b>		

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CAPLYTA	NP	AL(At least 18 yrs old); ST	ERZOFRI 117 MG/0.75ML	NP	QL(1.5 ML per 28 day(s) retail); AL(At least 18 yrs old); SP
EQUETRO	NP		ERZOFRI 234 MG/1.5ML	NP	QL(3 ML per 28 day(s) retail); AL(At least 18 yrs old); SP
GEODON ( <i>ziprasidone hcl</i> )	NP	QL(2 EA daily); AL(At least 18 yrs old)	FANAPT	NP	AL(At least 18 yrs old); ST
LATUDA ( <i>lurasidone hcl</i> )	NP	AL(At least 10 yrs old)	FANAPT TITRATION PACK A	NP	AL(At least 18 yrs old); ST
<i>lurasidone hcl</i>	P	AL(At least 10 yrs old)	FANAPT TITRATION PACK B	NP	
<i>lurasidone hcl</i>	P	AL(At least 10 yrs old)	FANAPT TITRATION PACK C	NP	
NUPLAZID CAPS	NP	QL(1 EA daily); 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
NUPLAZID TABS 10 MG	NP	QL(1 EA daily); AL(At least 18 yrs old); ST	INVEGA HAFYERA	P	AL(At least 18 yrs old); SP
VRAYLAR CAPS 0.5 MG, 0.75 MG	P		INVEGA SUSTENNA 39 MG/0.25ML	P	QL(0.25 ML per 28 day(s) retail); AL(At least 18 yrs old); SP
VRAYLAR CAPS	P	AL(At least 18 yrs old)	INVEGA SUSTENNA 234 MG/1.5ML	P	QL(3 ML per 28 day(s) retail); AL(At least 18 yrs old); SP
<i>ziprasidone hcl</i>	P	QL(2 EA daily); AL(At least 18 yrs old)	INVEGA SUSTENNA 117 MG/0.75ML	P	QL(1.5 ML per 28 day(s) retail); AL(At least 18 yrs old); SP
<i>ziprasidone mesylate</i>	NP	AL(At least 18 yrs old); ST	INVEGA SUSTENNA 78 MG/0.5ML	P	QL(0.5 ML per 28 day(s) retail); AL(At least 18 yrs old); SP
Benzisoxazoles			INVEGA SUSTENNA 156 MG/ML	P	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			
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 156 MG/ML	NP	QL(2 ML per 28 day(s) retail); AL(At least 18 yrs old); SP			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
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 0.25 MG</i>	P	QL(4 EA daily); AL(At least 7 yrs old); ST
			<i>risperidone TABS</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 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG</i>	P	QL(4 EA daily); AL(At least 7 yrs old)
			<i>risperidone TBDP</i>	P	QL(2 EA daily); AL(At least 7 yrs old)
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	RYKINDO SRER	NP	AL(At least 18 yrs old); SP
			UZEDY SUSY	P	AL(At least 18 yrs old); SP
			Butyrophenones		
			<i>haloperidol decanoate</i>	C	
			<i>haloperidol lactate CONC</i>	C	
			<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
			<i>asenapine maleate</i>	P	AL(At least 10 yrs old)
			<i>clozapine TABS 200 MG</i>	P	QL(4 EA daily); AL(At least 18 yrs old)
			<i>clozapine TABS 25 MG, 50 MG</i>	P	QL(3 EA daily); AL(At least 18 yrs old)
			<i>clozapine TABS 100 MG</i>	P	QL(9 EA daily); AL(At least 18 yrs old)
			<i>clozapine TBDP 150 MG</i>	NP	QL(6 EA daily); AL(At least 18 yrs old)
			<i>clozapine TBDP 100 MG</i>	NP	QL(9 EA daily); AL(At least 18 yrs old)
			<i>clozapine TBDP 150 MG</i>	NP	QL(6 EA daily); AL(At least 18 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>paliperidone</i>	NP	AL(At least 12 yrs old)			
<i>paliperidone</i>	NP	AL(At least 12 yrs old); ST			
PERSERIS PRSY	P	QL(1 EA per 28 day(s) retail); AL(At least 18 yrs old); SP			
RISPERDAL CONSTA ( <i>risperidone microspheres</i> )	P	2 max fill(s) per 28 day(s) retail; AL(At least 18 yrs old); SP			
RISPERDAL SOLN ( <i>risperidone</i> )	NP	QL(4 ML daily); AL(At least 7 yrs old); ST			
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)			
<i>risperidone SOLN</i>	P	QL(4 ML daily); AL(At least 7 yrs old)			
<i>risperidone SOLN</i>	P	QL(4 ML daily); AL(At least 7 yrs old); ST			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>clozapine TBDP 200 MG</i>	NP	QL(4 EA daily); AL(At least 18 yrs old); ST	SAPHRIS ( <i>asenapine maleate</i> )	NP	AL(At least 10 yrs old)
<i>clozapine TBDP 12.5 MG, 25 MG</i>	NP	QL(3 EA daily); AL(At least 18 yrs old)	SECUADO	NP	AL(At least 18 yrs old); ST
<i>clozapine TBDP 12.5 MG, 25 MG</i>	NP	QL(3 EA daily); AL(At least 18 yrs old); ST	SEROQUEL XR TB24 ( <i>quetiapine fumarate</i> )	NP	AL(At least 10 yrs old)
<i>clozapine TBDP 100 MG</i>	NP	QL(9 EA daily); 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>clozapine TBDP 200 MG</i>	NP	QL(4 EA daily); AL(At least 18 yrs old)	SEROQUEL TABS 300 MG, 400 MG ( <i>quetiapine fumarate</i> )	NP	QL(2 EA daily); AL(At least 10 yrs old)
CLOZARIL TABS 200 MG ( <i>clozapine</i> )	NP	QL(4 EA daily); AL(At least 18 yrs old)	VERSACLOZ SUSP	NP	QL(18 ML daily); AL(At least 18 yrs old); ST
CLOZARIL TABS 100 MG ( <i>clozapine</i> )	NP	QL(9 EA daily); AL(At least 18 yrs old)	ZYPREXA RELPREVV	NP	AL(At least 18 yrs old); SP
CLOZARIL TABS 25 MG, 50 MG ( <i>clozapine</i> )	NP	QL(3 EA daily); AL(At least 18 yrs old)	ZYPREXA SOLR ( <i>olanzapine</i> )	NP	AL(At least 18 yrs old); ST
<i>loxapine succinate</i>	C	QL(4 EA daily); AL(At least 18 yrs old)	ZYPREXA TABS 20 MG ( <i>olanzapine</i> )	NP	QL(1 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)	ZYPREXA TABS 2.5 MG, 5 MG ( <i>olanzapine</i> )	NP	QL(4 EA daily); AL(At least 10 yrs old)
<i>olanzapine TABS 7.5 MG, 10 MG</i>	P	QL(2 EA daily); AL(At least 10 yrs old)	<b>Muscarinic Agents</b>		
<i>olanzapine TABS 2.5 MG, 5 MG</i>	P	QL(4 EA daily); AL(At least 10 yrs old)	COBENFY STARTER PACK CPPK	NP	AL(At least 18 yrs old); ST
<i>olanzapine TBDP</i>	NP	AL(At least 10 yrs old); ST	COBENFY CAPS	NP	AL(At least 18 yrs old)
<i>quetiapine fumarate TABS 150 MG</i>	P	AL(At least 10 yrs old); ST	<b>Phenothiazines</b>		
<i>quetiapine fumarate TABS 300 MG, 400 MG</i>	P	QL(2 EA daily); AL(At least 10 yrs old)	<i>chlorpromazine hcl TABS 25 MG, 50 MG, 100 MG, 200 MG</i>	C	QL(3 EA daily)
<i>quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG</i>	P	QL(4 EA daily); AL(At least 10 yrs old)	<i>chlorpromazine hcl TABS 10 MG</i>	C	QL(10 EA daily)
<i>quetiapine fumarate TB24</i>	P	AL(At least 10 yrs old)	<i>fluphenazine decanoate</i>	C	
			<i>fluphenazine hcl TABS</i>	C	
			<i>perphenazine TABS</i>	C	QL(4 EA daily); AL(At least 12 yrs old)
			<i>prochlorperazine</i>	NP	
			<i>prochlorperazine</i>	P	

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Drug Name	Drug Tier	Requirements/Limits
<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)
<b>Quinolinone Derivatives</b>		
ABILIFY ASIMTUFII PRSY	P	AL(At least 18 yrs old); SP
ABILIFY MAINTENA PRSY	P	QL(1 EA per 28 day(s) retail); AL(At least 18 yrs old); SP
ABILIFY MAINTENA SRER	P	QL(1 EA per 28 day(s) retail); AL(At least 18 yrs old)
ABILIFY MAINTENA SRER	P	QL(1 EA per 28 day(s) retail); AL(At least 18 yrs old); SP
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)
ABILIFY TABS 5 MG ( <i>aripiprazole</i> )	NP	QL(1.5 EA daily); AL(At least 7 yrs old)
<i>aripiprazole SOLN PO</i>	NP	QL(750 ML per 31 day(s) retail; 750 ML per 31 days mail); AL(At least 7 yrs old)
<i>aripiprazole SOLN PO</i>	NP	QL(750 ML per 31 day(s) retail; 750 ML per 31 days mail); AL(At least 7 yrs old); ST
<i>aripiprazole TABS 5 MG</i>	P	QL(1.5 EA daily); AL(At least 7 yrs old)
<i>aripiprazole TABS 2 MG, 10 MG, 15 MG, 20 MG, 30 MG</i>	P	QL(1 EA daily); AL(At least 7 yrs old)
<i>aripiprazole TBDP</i>	NP	QL(1 EA daily); AL(At least 7 yrs old); ST

Drug Name	Drug Tier	Requirements/Limits
ARISTADA 662 MG/2.4ML	P	QL(2.4 ML per 28 day(s) retail); AL(At least 18 yrs old); SP
ARISTADA 882 MG/3.2ML	P	QL(3.2 ML per 28 day(s) retail); AL(At least 18 yrs old); SP
ARISTADA 1064 MG/3.9ML	P	QL(4 ML per fill retail; 4 per fill mail); 1 max fill(s) per 56 day(s) retail; 1 max fill(s) per 56 day(s) mail; AL(At least 18 yrs old)
ARISTADA 441 MG/1.6ML	P	QL(1.6 ML per 28 day(s) retail); AL(At least 18 yrs old); SP
ARISTADA INITIO	P	QL(2.5 ML per fill retail; 2.5 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; AL(At least 18 yrs old); SP
OPIPZA FILM	NP	AL(At least 7 yrs old); ST
REXULTI	NP	AL(At least 13 yrs old); ST
<b>Thioxanthenes</b>		
<i>thiothixene</i>	C	QL(3 EA daily)
<b>ANTISEPTICS &amp; DISINFECTANTS</b>		
<b>Chlorine Antiseptics</b>		
<i>chlorhexidine gluconate SOLN EX 4 %</i>	C	
<b>ANTIVIRALS - Drugs to Treat Viral Infections</b>		
<b>Antiretrovirals</b>		

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>abacavir sulfate-lamivudine</i>	P	QL(1 EA daily)	<i>emtricitabine- rilpivirine-tenofovir disoproxil fumarate</i>	P	QL(1 EA daily)
<i>abacavir sulfate SOLN</i>	P	QL(30 ML daily)	<i>emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG</i>	C	QL(1 EA daily)
<i>abacavir sulfate TABS</i>	P	QL(2 EA daily)	<i>emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG</i>	P	
<i>abacavir sulfate TABS</i>	C	QL(2 EA daily)	<i>emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG</i>	P	QL(1 EA daily)
APTIVUS CAPS	P	QL(4 EA daily)	EMTRIVA CAPS ( <i>emtricitabine</i> )	P	QL(1 EA daily)
<i>atazanavir sulfate CAPS 150 MG, 200 MG</i>	P	QL(2 EA daily)	EMTRIVA SOLN	P	QL(24 ML daily)
<i>atazanavir sulfate CAPS 300 MG</i>	P		EPIVIR SOLN ( <i>lamivudine</i> )	P	QL(30 ML daily)
BIKTARVY	P	QL(1 EA daily)	EPIVIR TABS 300 MG ( <i>lamivudine</i> )	P	QL(1 EA daily)
CIMDUO	P	QL(1 EA daily)	EPIVIR TABS 150 MG ( <i>lamivudine</i> )	P	QL(2 EA daily)
COMPLERA 200 MG-300 MG-25 MG ( <i>emtricitabine- rilpivirine-tenofovir disoproxil fumarate</i> )	P	QL(1 EA daily)	<i>etravirine 200 MG</i>	P	QL(2 EA daily)
<i>darunavir TABS 600 MG</i>	P	QL(2 EA daily)	<i>etravirine 100 MG</i>	P	QL(4 EA daily)
<i>darunavir TABS 800 MG</i>	P	QL(1 EA daily)	EVOTAZ	P	QL(1 EA daily)
<i>darunavir TABS 600 MG</i>	C	QL(2 EA daily)	<i>fosamprenavir calcium TABS</i>	P	QL(4 EA daily)
<i>darunavir TABS 800 MG</i>	P	QL(1 EA daily)	FUZEON SOLR	NP	SP
DELSTRIGO	P	QL(1 EA daily)	GENVOYA	P	QL(1 EA daily)
DESCOVY 200 MG-25 MG	P	QL(1 EA daily)	INTELENCE	P	QL(4 EA daily)
DESCOVY 120 MG-15 MG	P	QL(1 EA daily); PA	INTELENCE ( <i>etravirine</i> )	P	QL(4 EA daily)
DOVATO	P	QL(1 EA daily)	INTELENCE 200 MG ( <i>etravirine</i> )	P	QL(2 EA daily)
EDURANT	P	QL(1 EA daily)	ISENTRESS HD TABS	P	
EDURANT PED PO 2.5 MG	P		ISENTRESS CHEW 25 MG	P	QL(12 EA daily)
<i>efavirenz CAPS 200 MG</i>	C	QL(1 EA daily)	ISENTRESS CHEW 100 MG	P	QL(6 EA daily)
<i>efavirenz CAPS 50 MG</i>	C	QL(2 EA daily)	ISENTRESS PACK	P	QL(2 EA daily)
<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	P	QL(1 EA daily)	ISENTRESS TABS	P	QL(2 EA daily)
<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	P	QL(1 EA daily)	JULUCA	P	QL(1 EA daily)
<i>efavirenz TABS</i>	C	QL(1 EA daily)			
<i>efavirenz TABS</i>	P	QL(1 EA daily)			
<i>emtricitabine CAPS</i>	P	QL(1 EA daily)			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
KALETRA SOLN	P	QL(16 ML daily)	PREZCOBIX	P	QL(1 EA daily)
KALETRA TABS 25 MG-100 MG ( <i>lopinavir-ritonavir</i> )	P	QL(4 EA daily)	PREZISTA SUSP	P	QL(12 ML daily)
KALETRA TABS 50 MG-200 MG ( <i>lopinavir-ritonavir</i> )	P	QL(6 EA daily)	PREZISTA TABS ( <i>darunavir</i> )	P	QL(2 EA daily)
KALETRA TABS 25 MG-100 MG ( <i>lopinavir-ritonavir</i> )	P	QL(4 EA daily)	PREZISTA TABS 800 MG ( <i>darunavir</i> )	P	QL(1 EA daily)
KALETRA TABS 50 MG-200 MG ( <i>lopinavir-ritonavir</i> )	P	QL(6 EA daily)	PREZISTA TABS 150 MG	P	QL(3 EA daily)
<i>lamivudine SOLN</i>	C	QL(30 ML daily)	PREZISTA TABS 75 MG, 600 MG	P	QL(2 EA daily)
<i>lamivudine SOLN</i>	P	QL(30 ML daily)	RETROVIR CAPS ( <i>zidovudine</i> )	P	QL(6 EA daily)
<i>lamivudine TABS 300 MG</i>	P	QL(1 EA daily)	RETROVIR SYRP ( <i>zidovudine</i> )	P	QL(60 ML daily)
<i>lamivudine TABS 150 MG</i>	P	QL(2 EA daily)	REYATAZ CAPS 200 MG ( <i>atazanavir sulfate</i> )	P	QL(2 EA daily)
<i>lamivudine TABS 150 MG</i>	C	QL(2 EA daily)	REYATAZ CAPS 300 MG ( <i>atazanavir sulfate</i> )	P	
<i>lamivudine-zidovudine</i>	P		REYATAZ PACK	P	QL(6 EA daily)
<i>lopinavir-ritonavir SOLN</i>	P	QL(16 ML daily)	<i>ritonavir TABS</i>	P	QL(12 EA daily)
<i>lopinavir-ritonavir TABS 25 MG-100 MG</i>	P	QL(4 EA daily)	RUKOBIA	P	
<i>lopinavir-ritonavir TABS 50 MG-200 MG</i>	P	QL(6 EA daily)	SELZENTRY SOLN	P	QL(35 ML daily)
<i>maraviroc TABS 300 MG</i>	C	QL(4 EA daily)	SELZENTRY TABS 150 MG ( <i>maraviroc</i> )	P	QL(2 EA daily)
<i>maraviroc TABS 300 MG</i>	P	QL(4 EA daily)	SELZENTRY TABS 300 MG ( <i>maraviroc</i> )	P	QL(4 EA daily)
<i>maraviroc TABS 150 MG</i>	P	QL(2 EA daily)	STRIBILD	P	QL(1 EA daily)
<i>maraviroc TABS 150 MG</i>	C	QL(2 EA daily)	SYMFI ( <i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i> )	P	QL(1 EA daily)
<i>nevirapine SUSP</i>	P	QL(40 ML daily)	SYMFI LO ( <i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i> )	P	QL(1 EA daily)
<i>nevirapine TABS</i>	P	QL(2 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)			
PREZCOBIX	P				

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Drug Name	Drug Tier	Requirements/Limits
TRIUMEQ PD TBSO	P	
TRIUMEQ TABS	P	QL(1 EA daily); AL(At least 18 yrs old)
TRUVADA 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG ( <i>emtricitabine-tenofovir disoproxil fumarate</i> )	P	
TRUVADA 200 MG-300 MG ( <i>emtricitabine-tenofovir disoproxil fumarate</i> )	P	QL(1 EA daily)
TYBOST	P	QL(1 EA daily); AL(At least 18 yrs old)
VIRACEPT TABS 250 MG	P	QL(9 EA daily)
VIRACEPT TABS 625 MG	P	QL(4 EA daily)
VIREAD POWD	P	QL(8 GM daily)
VIREAD TABS	P	QL(1 EA daily)
VIREAD TABS ( <i>tenofovir disoproxil fumarate</i> )	P	QL(1 EA daily)
ZIAGEN SOLN ( <i>abacavir sulfate</i> )	P	QL(30 ML daily)
<i>zidovudine CAPS</i>	P	QL(6 EA daily)
<i>zidovudine SYRP</i>	P	QL(60 ML daily)
<i>zidovudine TABS</i>	P	QL(2 EA daily)
<b>Antiviral Combinations</b>		
PAXLOVID (150/100)	C	1 package(s) per 90 day(s) retail; 1 package(s) per 90 day(s) mail; AL(At least 18 yrs old)
PAXLOVID (150/100)	P	1 package(s) per 90 day(s) retail; 1 package(s) per 90 day(s) mail; AL(At least 18 yrs old)

Drug Name	Drug Tier	Requirements/Limits
PAXLOVID (300/100 & 150/100)	P	1 package(s) per 90 day(s) retail; 1 package(s) per 90 day(s) mail; AL(At least 18 yrs old)
PAXLOVID (300/100)	C	1 package(s) per 90 day(s) retail; 1 package(s) per 90 day(s) mail; AL(At least 18 yrs old)
PAXLOVID (300/100)	P	1 package(s) per 90 day(s) retail; 1 package(s) per 90 day(s) mail; AL(At least 18 yrs old)
<b>CMV Agents</b>		
<i>valganciclovir hcl TABS</i>	C	QL(2 EA daily)
<b>Hepatitis Agents</b>		
<i>adefovir dipivoxil</i>	NP	
BARACLUDE SOLN	P	
BARACLUDE TABS ( <i>entecavir</i> )	NP	
<i>entecavir TABS</i>	P	
EPCLUSA PACK	PA	SP; PA
EPCLUSA TABS 50 MG-200 MG	PA	SP; PA
EPCLUSA TABS 100 MG-400 MG	NP	QL(1 EA daily); SP
HARVONI PACK	NP	SP
HARVONI TABS	NP	SP
HARVONI TABS	NP	SP
<i>lamivudine (hbv) TABS</i>	P	
LEDIPASVIR-SOFOSBUVIR TABS	NP	SP
MAVYRET PACK	PA	QL(6 EA daily); SP; PA
MAVYRET TABS	PA	QL(3 EA daily); SP; PA

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

Drug Name	Drug Tier	Requirements/Limits
<i>oseltamivir phosphate CAPS 45 MG, 75 MG</i>	C	QL(10 EA per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail
<i>oseltamivir phosphate SUSR</i>	C	QL(120 ML per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail
RELENZA DISKHALER	C	1 package(s) per 31 day(s) retail; AL(At least 5 yrs old)
<b>BETA BLOCKERS - Drugs to Treat High Blood Pressure</b>		
Alpha-Beta Blockers		
<i>carvedilol 3.125 MG, 6.25 MG, 12.5 MG</i>	P	QL(2 EA daily)
<i>carvedilol 25 MG</i>	P	QL(4 EA daily)
<i>carvedilol phosphate</i>	NP	QL(1 EA daily)
<i>labetalol hcl TABS 100 MG</i>	P	QL(3 EA daily)
<i>labetalol hcl TABS 200 MG</i>	P	QL(6 EA daily)
<i>labetalol hcl TABS 300 MG</i>	P	QL(8 EA daily)
<i>labetalol hcl TABS 400 MG</i>	P	
Beta Blockers Cardio-Selective		
<i>acebutolol hcl CAPS</i>	P	
<i>atenolol TABS</i>	P	QL(2 EA daily)
<i>betaxolol hcl</i>	NP	
<i>bisoprolol fumarate</i>	P	QL(1 EA daily)
<i>bisoprolol fumarate 2.5 MG</i>	P	
BYSTOLIC ( <i>nebivolol hcl</i> )	NP	
KAPSPARGO SPRINKLE CS24	NP	
LOPRESSOR SOLN PO 10 MG/ML	NP	

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Drug Name	Drug Tier	Requirements/Limits
LOPRESSOR TABS 12.5 MG	NP	
LOPRESSOR TABS 100 MG ( <i>metoprolol tartrate</i> )	NP	QL(4.5 EA daily)
LOPRESSOR TABS 50 MG ( <i>metoprolol tartrate</i> )	NP	QL(4 EA daily)
<i>metoprolol succinate</i> TB24 25 MG, 50 MG, 100 MG	P	QL(4 EA daily)
<i>metoprolol succinate</i> TB24 200 MG	P	QL(2 EA daily)
<i>metoprolol tartrate</i> TABS 100 MG	P	QL(4.5 EA daily)
<i>metoprolol tartrate</i> TABS 25 MG, 50 MG	P	QL(4 EA daily)
<i>metoprolol tartrate</i> TABS 12.5 MG, 37.5 MG, 75 MG	P	
<i>nebivolol hcl</i>	NP	
TENORMIN TABS ( <i>atenolol</i> )	NP	QL(2 EA daily)
TOPROL XL TB24 200 MG ( <i>metoprolol succinate</i> )	NP	QL(2 EA daily)
TOPROL XL TB24 25 MG, 50 MG, 100 MG ( <i>metoprolol succinate</i> )	NP	QL(4 EA daily)
<b>Beta Blockers Non-Selective</b>		
BETAPACE AF ( <i>sotalol hcl (afib/afll)</i> )	NP	QL(2 EA daily)
BETAPACE TABS 80 MG, 120 MG, 160 MG ( <i>sotalol hcl</i> )	NP	
HEMANGEOL SOLN PO	NP	SP
INDERAL LA CP24 ( <i>propranolol hcl</i> )	NP	QL(2 EA daily)
INDERAL XL	NP	
INNOPRAN XL	NP	
<i>nadolol</i> TABS 20 MG, 40 MG, 80 MG	P	QL(2 EA daily)
<i>pindolol</i> TABS	NP	
<i>propranolol hcl</i> CP24	P	QL(2 EA daily)

Drug Name	Drug Tier	Requirements/Limits
<i>propranolol hcl</i> SOLN PO 20 MG/5ML, 40 MG/5ML	P	
<i>propranolol hcl</i> TABS	P	
<i>sotalol hcl (afib/afll)</i>	P	QL(2 EA daily)
<i>sotalol hcl</i> TABS	P	
SOTYLIZE SOLN PO	NP	
<i>timolol maleate</i> TABS	NP	
<b>CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure</b>		
<b>Calcium Channel Blockers</b>		
<i>amlodipine besylate</i> TABS	P	QL(1 EA daily)
<i>diltiazem hcl coated beads</i> CP24 240 MG	P	QL(2 EA daily)
<i>diltiazem hcl coated beads</i> CP24 360 MG	P	
<i>diltiazem hcl coated beads</i> CP24 120 MG, 180 MG, 300 MG	P	QL(1 EA daily)
<i>diltiazem hcl extended release beads</i> 240 MG	P	QL(2 EA daily)
<i>diltiazem hcl extended release beads</i> 120 MG, 180 MG, 300 MG, 360 MG, 420 MG	P	QL(1 EA daily)
<i>diltiazem hcl</i> CP12	P	QL(2 EA daily)
<i>diltiazem hcl</i> CP24 120 MG, 180 MG	P	QL(1 EA daily)
<i>diltiazem hcl</i> CP24 240 MG	P	QL(2 EA daily)
<i>diltiazem hcl</i> TABS	P	QL(3 EA daily)
<i>diltiazem hcl</i> TB24 180 MG, 240 MG, 300 MG, 360 MG, 420 MG	NP	
<i>diltiazem hcl</i> TB24	P	
<i>felodipine</i>	P	QL(1 EA daily)
<i>isradipine</i> CAPS	P	
KATERZIA	NP	
<i>levamlodipine maleate</i>	NP	
<i>nicardipine hcl</i> CAPS	P	
<i>nifedipine</i> CAPS	NP	QL(4 EA daily)

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Drug Name	Drug Tier	Requirements/Limits
<i>nifedipine TB24 30 MG, 90 MG</i>	P	QL(1 EA daily)
<i>nifedipine TB24 60 MG</i>	P	QL(2 EA daily)
<i>nimodipine CAPS</i>	NP	
<i>nimodipine SOLN</i>	NP	
<i>nisoldipine</i>	NP	
NORLIQVA SOLN	NP	
NORVASC TABS ( <i>amlodipine besylate</i> )	NP	QL(1 EA daily)
NYMALIZE SOLN 6 MG/ML	NP	
PROCARDIA XL TB24 30 MG, 90 MG ( <i>nifedipine</i> )	NP	QL(1 EA daily)
PROCARDIA XL TB24 60 MG ( <i>nifedipine</i> )	NP	QL(2 EA daily)
SDAMLO SOLR PO 2.5 MG, 5 MG, 10 MG	NP	
SULAR 8.5 MG, 17 MG, 34 MG ( <i>nisoldipine</i> )	NP	
VERAPAMIL HCL ER CP24 ( <i>verapamil hcl</i> )	NP	
<i>verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG</i>	P	QL(1 EA daily)
<i>verapamil hcl CP24 100 MG, 200 MG, 300 MG</i>	NP	
<i>verapamil hcl TABS</i>	P	QL(3 EA daily)
<i>verapamil hcl TBCR</i>	P	QL(2 EA daily)
<b>CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm</b>		
Cardiac Glycosides		
<i>digoxin SOLN PO 0.05 MG/ML</i>	C	
<i>digoxin TABS 125 MCG, 250 MCG</i>	C	
<b>CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions</b>		
Cardiovascular Agents Misc. - Combinations		

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

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<b>Inhibitors</b>			<i>cephalexin CAPS</i>	P	
ADCIRCA TABS ( <i>tadalafil (pulmonary hypertension)</i> )	NP	SP	<i>cephalexin SUSR</i>	P	
LIQREV SUSP	NP	SP	<i>cephalexin TABS</i>	P	
REVATIO TABS ( <i>sildenafil citrate (pulmonary hypertension)</i> )	NP	SP	<b>Cephalosporins - 2nd Generation</b>		
<i>sildenafil citrate (pulmonary hypertension) SUSR</i>	NP	SP	CEFACTOR ER TB12	NP	
<i>sildenafil citrate (pulmonary hypertension) TABS</i>	PA	PA	<i>cefactor CAPS</i>	P	
<i>sildenafil citrate (pulmonary hypertension) TABS</i>	PA	SP; PA	<i>cefprozil SUSR 250 MG/5ML</i>	P	1 package(s) per fill retail; AL(Up to 12 yrs old)
<i>tadalafil (pulmonary hypertension) TABS</i>	PA	SP; PA	<i>cefprozil SUSR 125 MG/5ML</i>	P	2 package(s) per fill retail; AL(Up to 12 yrs old)
TADLIQ SUSP	NP	SP	<i>cefprozil TABS</i>	P	QL(20 EA per fill retail)
<b>Pulmonary Hypertension - Prostacyclin Receptor Agonist</b>			<i>cefuroxime axetil TABS 250 MG</i>	P	QL(20 EA per fill retail; 20 per fill mail)
UPTRAVI TITRATION TBPK	NP	SP	<i>cefuroxime axetil TABS 500 MG</i>	P	QL(20 EA per fill retail)
UPTRAVI SOLR	C	SP; PA	<b>Cephalosporins - 3rd Generation</b>		
UPTRAVI TABS	NP	SP	<i>cefdinir CAPS</i>	P	QL(20 EA per fill retail)
<b>Pulmonary Hypertension - Sol Guanylate Cyclase Stimulator</b>			<i>cefdinir SUSR</i>	P	1 package(s) per fill retail
ADEMPAS	NP	SP	<i>cefixime CAPS</i>	P	
<b>Transthyretin Stabilizers</b>			<i>cefixime SUSR</i>	P	
VYNDAMAX	C	SP; PA	<i>cefixime TABS</i>	P	
<b>CEPHALOSPORINS - Drugs to Treat Bacterial Infections</b>			<i>cefpodoxime proxetil SUSR</i>	P	
<b>Cephalosporins - 1st Generation</b>			<i>cefpodoxime proxetil TABS</i>	P	
<i>cefadroxil CAPS</i>	P		<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
<i>cefadroxil SUSR</i>	P		<b>CHEMICALS</b>		
<i>cefadroxil TABS</i>	NP		<b>Bulk Chemicals - H's</b>		
<i>cephalexin CAPS</i>	P		HYDROXYUREA	P	
			<b>CONTRACEPTIVES - Drugs to Prevent Pregnancy</b>		

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

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

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CORTISONE ACETATE TABS	P		<i>prednisolone sodium phosphate SOLN 5 MG/5ML, 10 MG/5ML, 15 MG/5ML, 25 MG/5ML</i>	P	
<i>deflazacort SUSP</i>	NP		PREDNISOLONE SODIUM PHOSPHATE TBDP 10 MG, 15 MG, 30 MG	P	
<i>deflazacort SUSP</i>	NP	SP	<i>prednisolone SOLN</i>	NP	
<i>deflazacort TABS</i>	NP		<i>prednisolone SOLN</i>	P	
<i>deflazacort TABS</i>	NP	SP	<i>prednisolone TABS</i>	NP	
DEXAMETHASONE INTENSOL CONC	NP		PREDNISONE INTENSOL CONC	NP	
<i>dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML</i>	C	QL(150 ML per 31 day(s) retail)	<i>prednisone SOLN</i>	P	
<i>dexamethasone sodium phosphate SOSY IJ 4 MG/ML</i>	C	QL(150 ML per 31 day(s) retail)	<i>prednisone TABS</i>	P	
<i>dexamethasone ELIX</i>	P		<i>prednisone TBEC 1 MG, 2 MG</i>	NP	
<i>dexamethasone SOLN</i>	P		<i>prednisone TBPK</i>	P	
<i>dexamethasone TABS</i>	P		RAYOS TBEC	NP	
<i>dexamethasone TBPK</i>	NP		TARPEYO CPDR	NP	SP
<i>dexamethasone TBPK</i>	P		<b>Mineralocorticoids</b>		
EMFLAZA SUSP ( <i>deflazacort</i> )	NP	SP	<i>fludrocortisone acetate TABS</i>	C	
EMFLAZA TABS ( <i>deflazacort</i> )	NP	SP	<b>COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms</b>		
EOHILIA SUSP	NP		<b>Antitussives</b>		
HEMADY TABS	NP		<i>benzonatate 100 MG</i>	C	QL(6 EA daily); AL(At least 10 yrs old)
<i>hydrocortisone TABS</i>	P		<i>benzonatate 200 MG</i>	C	QL(3 EA daily); 1 max fill(s) per 31 day(s) retail; AL(At least 10 yrs old)
KHINDIVI SOLN PO 1 MG/ML	NP	PA	<i>dextromethorphan polistirex SUER</i>	C	QL(240 ML per 6 day(s) retail)
MEDROL TABS ( <i>methylprednisolone</i> )	NP		<i>hydrocodone bitartrate-homatropine methylbromide SOLN</i>	C	AL(At least 18 yrs old)
MEDROL TABS	NP		<b>Cough/Cold/Allergy Combinations</b>		
MEDROL TBPK ( <i>methylprednisolone</i> )	NP				
<i>methylprednisolone TABS</i>	P				
<i>methylprednisolone TBPK</i>	P				
<i>prednisolone sodium phosphate SOLN 20 MG/5ML</i>	P	QL(150 ML per fill retail)			

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Drug Name	Drug Tier	Requirements/Limits
<i>brompheniramine &amp; phenyleph ELIX</i>	C	QL(120 ML per fill retail); 1 max fill(s) per 31 day(s) retail
<i>cetirizine-pseudoephedrine</i>	C	QL(2 EA daily)
CLARINEX-D 12 HOUR TB12	NP	
<i>dextromethorphan-guaifenesin LIQD 100 MG/5ML-5 MG/5ML, 200 MG/5ML-30 MG/5ML, 400 MG/20ML-20 MG/20ML</i>	C	
<i>dextromethorphan-guaifenesin LIQD 100 MG/5ML-10 MG/5ML, 150 MG/7.5ML-15 MG/7.5ML, 200 MG/10ML-20 MG/10ML, 200 MG/5ML-10 MG/5ML</i>	C	QL(240 EA per fill retail)
<i>dextromethorphan-guaifenesin SYRP 100 MG/5ML-10 MG/5ML, 200 MG/10ML-20 MG/10ML</i>	C	QL(240 ML per fill retail)
<i>dextromethorphan-guaifenesin TB12 600 MG-30 MG</i>	C	QL(2 EA daily)
<i>dextromethorphan-phenylephrine-acetaminophen CAPS</i>	C	
<i>guaifenesin-codeine SOLN</i>	C	
<i>guaifenesin-codeine SYRP</i>	C	
LOHIST-D LIQD	C	
<i>loratadine &amp; pseudoephedrine TB12</i>	C	QL(2 EA daily)
<i>loratadine &amp; pseudoephedrine TB24</i>	C	QL(1 EA daily)
<i>phenylephrine-chlorphen-dm LIQD 10 MG/5ML-4 MG/5ML-15 MG/5ML</i>	C	QL(240 ML per fill retail)
<i>phenylephrine-guaifenesin LIQD 5 MG/5ML-100 MG/5ML</i>	C	QL(240 ML per 6 day(s) retail)

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

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Acne Products			<i>clindamycin phosphate (topical) SOLN</i>	P	
<i>adapalene-benzoyl peroxide GEL</i>	NP		<i>clindamycin phosphate (topical) SWAB</i>	NP	
<i>adapalene CREA</i>	NP		<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	P	
<i>adapalene GEL 0.3 %</i>	P		<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	NP	
<i>adapalene GEL</i>	NP	RX/OTC	<i>clindamycin phosphate-benzoyl peroxide GEL</i>	NP	
AKLIEF	NP		<i>clindamycin phosphate-tretinoin</i>	NP	
AVAR CLEANSER LIQD 10 %-5 % ( <i>sulfacetamide sodium w/ sulfur</i> )	NP		<i>dapsone (topical)</i>	NP	
AVAR LS CLEANSER LIQD ( <i>sulfacetamide sodium w/ sulfur</i> )	NP		DIFFERIN CREA ( <i>adapalene</i> )	NP	
AVAR-E EMOLLIENT CREA 10 %-5 % ( <i>sulfacetamide sodium w/ sulfur</i> )	NP		DIFFERIN GEL ( <i>adapalene</i> )	NP	
<i>benzoyl peroxide-erythromycin GEL</i>	NP		DIFFERIN LOTN	NP	
<i>benzoyl peroxide FOAM 10 %</i>	P		EPIDUO FORTE GEL ( <i>adapalene-benzoyl peroxide</i> )	NP	
<i>benzoyl peroxide GEL 2.5 %, 5 %, 10 %</i>	C		EPSOLAY CREA	NP	
BENZOYL PEROXIDE GEL	C		<i>erythromycin (acne aid) GEL</i>	NP	1 package(s) per fill retail
<i>benzoyl peroxide LIQD 5 %, 10 %</i>	P		<i>erythromycin (acne aid) PADS</i>	P	
<i>benzoyl peroxide LOTN 5 %, 10 %</i>	C		<i>erythromycin (acne aid) SOLN</i>	P	
BENZOYL PEROXIDE LOTN 5 %, 10 %	C		FABIOR FOAM	NP	
CLEOCIN-T LOTN ( <i>clindamycin phosphate (topical)</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) FOAM</i>	NP		SSS 10-5 CREA 10 %-5 % ( <i>sulfacetamide sodium w/ sulfur</i> )	NP	
<i>clindamycin phosphate (topical) GEL</i>	NP	QL(60 ML per fill retail; 60 per fill mail)	<i>sulfacetamide sodium (acne)</i>	NP	QL(118 ML per fill retail)
<i>clindamycin phosphate (topical) LOTN</i>	NP		<i>sulfacetamide sodium w/ sulfur CREA 10 %-2 %, 10 %-5 %</i>	NP	

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Drug Name	Drug Tier	Requirements/Limits
<i>sulfacetamide sodium w/ sulfur EMUL 10 %-1 %</i>	NP	
<i>sulfacetamide sodium w/ sulfur FOAM</i>	NP	
<i>sulfacetamide sodium w/ sulfur LIQD</i>	NP	
<i>sulfacetamide sodium w/ sulfur LOTN 9.8 %-4.8 %</i>	NP	
<i>sulfacetamide sodium w/ sulfur LOTN 10 %-5 %</i>	NP	1 package(s) per 31 day(s) retail
<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
<i>sulfacetamide sodium w/ sulfur SUSP 8 %-4 %</i>	NP	
SULFACETAMIDE SODIUM-SULFUR SUSP	NP	
SUMADAN	NP	
SUMADAN WASH LIQD ( <i>sulfacetamide sodium w/ sulfur</i> )	NP	
SUMAXIN CP	NP	
SUMAXIN PADS	NP	
TAZAROTENE FOAM	NP	
<i>tretinoin microsphere</i>	NP	
<i>tretinoin CREA 0.025 %, 0.05 %, 0.1 %</i>	P	QL(20 GM per fill retail); AL(Up to 35 yrs old)
<i>tretinoin GEL 0.01 %</i>	P	QL(45 GM per fill retail); AL(Up to 35 yrs old)
<i>tretinoin GEL 0.01 %, 0.025 %</i>	P	AL(Up to 35 yrs old)
<i>tretinoin GEL 0.01 %</i>	P	QL(30 GM per fill retail); AL(Up to 35 yrs old)
<i>tretinoin GEL 0.05 %</i>	NP	
TWYNEO	NP	
WINLEVI	NP	

Drug Name	Drug Tier	Requirements/Limits
Agents for External Genital and Perianal Warts		
VEREGEN	NP	
Antibiotics - Topical		
<i>bacitracin (topical) OINT</i>	C	1 package(s) per fill retail
<i>bacitracin zinc OINT</i>	C	1 package(s) per fill retail
CENTANY AT KIT	NP	
<i>gentamicin sulfate (topical) CREA</i>	C	QL(1 GM daily; 30 GM per fill retail)
<i>gentamicin sulfate (topical) OINT</i>	P	QL(1 GM daily; 30 GM per fill retail)
<i>mupirocin calcium (topical)</i>	NP	1 package(s) per 31 day(s) retail
<i>mupirocin OINT</i>	P	QL(30 GM per 31 day(s) retail)
<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
XEPI	NP	
Antifungals - Topical		
<i>ciclopirox olamine CREA</i>	P	
<i>ciclopirox olamine SUSP</i>	P	
<i>ciclopirox GEL</i>	NP	
<i>ciclopirox KIT</i>	NP	
<i>ciclopirox SHAM</i>	NP	
<i>ciclopirox SOLN</i>	NP	
<i>ciclopirox SOLN</i>	P	
<i>clotrimazole (topical) CREA</i>	P	QL(60 GM per 31 day(s) retail; 60 GM per 31 days mail); RX/OTC
<i>clotrimazole (topical) SOLN</i>	P	1 package(s) per fill retail; RX/OTC
<i>clotrimazole w/ betamethasone CREA</i>	P	QL(45 GM per 31 day(s) retail)

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Drug Name	Drug Tier	Requirements/Limits
<i>clotrimazole w/ betamethasone LOTN</i>	P	QL(31 ML per 31 day(s) retail)
<i>econazole nitrate CREA</i>	P	QL(30 GM per fill retail)
ECONAZOLE NITRATE FOAM 1 %	NP	
ERTACZO	NP	
<i>ketoconazole (topical) CREA</i>	P	1 package(s) per 31 day(s) retail
<i>ketoconazole (topical) FOAM</i>	NP	
<i>ketoconazole (topical) SHAM 2 %</i>	P	QL(120 ML per fill retail)
<i>miconazole nitrate (topical) CREA</i>	C	QL(200 GM per 31 day(s) retail)
<i>miconazole-zinc oxide-white petrolatum</i>	NP	
<i>naftifine hcl CREA</i>	NP	
<i>naftifine hcl GEL 2 %</i>	NP	
NAFTIN GEL 2 % ( <i>naftifine hcl</i> )	NP	
<i>nystatin (topical) CREA</i>	P	1 package(s) per 31 day(s) retail
<i>nystatin (topical) OINT</i>	P	1 package(s) per fill retail
<i>nystatin (topical) POWD EX</i>	P	1 package(s) per 31 day(s) retail
<i>nystatin-triamcinolone CREA</i>	P	1 package(s) per fill retail
<i>nystatin-triamcinolone OINT</i>	P	1 package(s) per fill retail
<i>oxiconazole nitrate CREA</i>	NP	
OXISTAT LOTN	NP	
<i>tavaborole</i>	NP	
<i>terbinafine hcl (topical) CREA</i>	C	
<i>tolnaftate CREA</i>	C	QL(30 GM per fill retail)
VUSION ( <i>miconazole-zinc oxide-white petrolatum</i> )	NP	

Drug Name	Drug Tier	Requirements/Limits
Anti-inflammatory Agents - Topical		
<i>diclofenac epolamine PTCH EX</i>	NP	
<i>diclofenac sodium (topical) GEL EX</i>	P	QL(6.68 GM daily); RX/OTC
<i>diclofenac sodium (topical) SOLN EX</i>	NP	
PENNSAID SOLN EX 2 % ( <i>diclofenac sodium (topical)</i> )	NP	
Antineoplastic or Premalignant Lesion Agents - Topical		
<i>fluorouracil (topical) CREA 0.5 %</i>	C	
<i>fluorouracil (topical) CREA 5 %</i>	C	QL(40 GM per 31 day(s) retail)
<i>fluorouracil (topical) SOLN</i>	C	QL(10 ML per 31 day(s) retail)
Antipruritics - Topical		
<i>camphor &amp; menthol LOTN</i>	C	1 package(s) per fill retail
Antipsoriatics		
BIMZELX SOAJ	NP	SP
BIMZELX SOSY	NP	SP
<i>calcipotriene CREA</i>	P	1 package(s) per fill retail; 1 max fill(s) per 31 day(s) retail
CALCIPOTRIENE FOAM	NP	
<i>calcipotriene OINT</i>	P	
<i>calcipotriene SOLN</i>	P	1 package(s) per fill retail; 1 max fill(s) per 31 day(s) retail
<i>calcitriol (topical)</i>	NP	
COSENTYX (300 MG DOSE) SOSY	NP	SP
COSENTYX SENSOREADY (300 MG) SOAJ	NP	SP

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Drug Name	Drug Tier	Requirements/Limits
COSENTYX SENSOREADY PEN SOAJ	NP	SP
COSENTYX UNOREADY SOAJ	NP	SP
COSENTYX SOSY	NP	SP
IMULDOSA SOSY SC 45 MG/0.5ML	NP	
IMULDOSA SOSY SC 90 MG/ML	NP	SP
OTULFI SOLN SC 45 MG/0.5ML	NP	SP
OTULFI SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	SP
PYZCHIVA 45 MG/0.5ML, 90 MG/ML	NP	SP
PYZCHIVA SC 45 MG/0.5ML	NP	SP
SELARSDI SOLN SC 45 MG/0.5ML	NP	SP
SELARSDI SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	AL(At least 6 yrs old); SP
SKYRIZI PEN SOAJ	NP	SP
SKYRIZI SOSY	NP	SP
SORILUX FOAM	NP	
SOTYKTU	NP	SP
SPEVIGO SOSY	NP	SP
STARJEMZA SOLN SC 45 MG/0.5ML	NP	SP
STARJEMZA SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	SP
STELARA SOSY	NP	SP
STEQEYMA	NP	SP
TALTZ SOAJ	NP	SP
TALTZ SOSY	NP	SP
<i>tazarotene CREA</i>	NP	1 package(s) per fill retail; AL(Up to 18 yrs old)

Drug Name	Drug Tier	Requirements/Limits
<i>tazarotene GEL</i>	NP	1 package(s) per fill retail; AL(Up to 18 yrs old)
TREMFYA ONE-PRESS SOPN SC 100 MG/ML	NP	SP
TREMFYA PEN SOAJ 100 MG/ML	NP	
USTEKINUMAB-AAUZ SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	
USTEKINUMAB-AEKN SOSY SC 45 MG/0.5ML, 90 MG/ML	NP	AL(At least 6 yrs old)
USTEKINUMAB SOSY 45 MG/0.5ML, 90 MG/ML	NP	
USTEKINUMAB-TTWE	NP	
VECTICAL ( <i>calcitriol (topical)</i> )	NP	
VTAMA	NP	
YESINTEK SOLN 45 MG/0.5ML	NP	SP
YESINTEK SOSY	NP	SP
Antiseborrheic Products		
OVACE PLUS WASH GEL ( <i>sulfacetamide sodium</i> )	NP	
OVACE PLUS WASH LIQD ( <i>sulfacetamide sodium</i> )	NP	
OVACE PLUS CREA	NP	
OVACE PLUS LOTN	NP	
OVACE PLUS SHAM ( <i>sulfacetamide sodium</i> )	NP	
OVACE WASH LIQD ( <i>sulfacetamide sodium</i> )	NP	
<i>selenium sulfide LOTN 2.5 %</i>	C	1 package(s) per fill retail; 1 max fill(s) per 30 day(s) retail
<i>selenium sulfide LOTN 1 %</i>	C	1 package(s) per fill retail
<i>selenium sulfide SHAM 1 %</i>	C	1 package(s) per fill retail

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>sulfacetamide sodium GEL</i>	NP		<i>betamethasone dipropionate augmented OINT</i>	NP	
<i>sulfacetamide sodium LIQD</i>	NP		<i>betamethasone valerate CREA</i>	P	
<i>sulfacetamide sodium SHAM 10 %</i>	NP		<i>betamethasone valerate FOAM</i>	NP	
Antivirals - Topical			<i>betamethasone valerate LOTN</i>	P	
<i>acyclovir topical CREA</i>	P	1 package(s) per 31 day(s) retail	<i>betamethasone valerate OINT</i>	NP	
<i>acyclovir topical OINT</i>	NP	1 package(s) per fill retail	<i>calcipotriene-betamethasone dipropionate OINT</i>	NP	
DENAVIR ( <i>penciclovir</i> )	NP		<i>calcipotriene-betamethasone dipropionate SUSP</i>	NP	
<i>penciclovir</i>	NP		CAPEX SHAM	NP	
Burn Products			<i>clobetasol propionate emollient base 0.05 %</i>	P	1 package(s) per fill retail
<i>silver sulfadiazine</i>	C		<i>clobetasol propionate emulsion</i>	NP	
Corticosteroids - Topical			<i>clobetasol propionate CREA 0.025 %</i>	P	
<i>alclometasone dipropionate CREA</i>	P		<i>clobetasol propionate CREA 0.05 %</i>	P	1 package(s) per fill retail
<i>alclometasone dipropionate OINT</i>	P		<i>clobetasol propionate FOAM</i>	NP	
<i>amcinonide CREA</i>	NP		<i>clobetasol propionate GEL 0.05 %</i>	P	1 package(s) per fill retail
APEXICON E CREA	NP		<i>clobetasol propionate LIQD</i>	NP	
<i>betamethasone dipropionate (topical) CREA</i>	P	1 package(s) per 30 day(s) retail	<i>clobetasol propionate LOTN</i>	NP	
<i>betamethasone dipropionate (topical) LOTN</i>	P		<i>clobetasol propionate OINT 0.05 %</i>	P	1 package(s) per fill retail
<i>betamethasone dipropionate (topical) OINT</i>	NP		<i>clobetasol propionate SHAM</i>	NP	
<i>betamethasone dipropionate augmented CREA</i>	P	1 package(s) per fill retail	<i>clobetasol propionate SOLN 0.05 %</i>	P	1 package(s) per fill retail
<i>betamethasone dipropionate augmented GEL 0.05 %</i>	NP		CLOBEX SPRAY LIQD ( <i>clobetasol propionate</i> )	NP	
<i>betamethasone dipropionate augmented LOTN</i>	NP				

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CLOBEX SHAM (clobetasol propionate)	NP		fluocinonide OINT	NP	1 package(s) per fill retail
clocortolone pivalate	NP		fluocinonide SOLN	P	1 package(s) per fill retail
DERMA-SMOOTH/FS BODY OIL (fluocinolone acetonide)	NP		flurandrenolide CREA	NP	
DERMA-SMOOTH/FS SCALP OIL (fluocinolone acetonide)	NP		flurandrenolide LOTN	NP	
desonide CREA	P	QL(2 GM daily)	fluticasone propionate CREA 0.05 %	P	1 package(s) per 31 day(s) retail
desonide LOTN	P		fluticasone propionate LOTN	NP	
desonide OINT	P	QL(2 GM daily)	fluticasone propionate OINT	P	1 package(s) per fill retail
desoximetasone CREA	NP	1 package(s) per fill retail	halcinonide CREA	NP	
desoximetasone GEL	NP		halcinonide SOLN 0.1 %	NP	
desoximetasone LIQD	NP		halobetasol propionate CREA	P	
desoximetasone OINT	NP		halobetasol propionate FOAM	NP	
diflorasone diacetate CREA	NP		halobetasol propionate OINT	P	
diflorasone diacetate OINT	NP		HALOG CREA (halcinonide)	NP	
DIPROLENE OINT (betamethasone dipropionate augmented)	NP		HALOG SOLN 0.1 % (halcinonide)	NP	
ENSTILAR FOAM	NP		hydrocortisone (topical) CREA 2.5 %	P	QL(120 GM per 31 day(s) retail)
EPIFOAM FOAM	C		hydrocortisone (topical) CREA 0.5 %	C	1 package(s) per fill retail
fluocinolone acetonide CREA	P		hydrocortisone (topical) CREA 1 %	P	1 package(s) per fill retail; RX/OTC
fluocinolone acetonide OIL	P		hydrocortisone (topical) LOTN 2.5 %	P	1 package(s) per fill retail
fluocinolone acetonide OINT	P		hydrocortisone (topical) OINT 2.5 %	P	
fluocinolone acetonide SOLN	P		hydrocortisone (topical) OINT 1 %	P	QL(2 GM daily); 1 package(s) per 31 day(s) retail; RX/OTC
fluocinonide emulsified base	P	1 package(s) per fill retail	hydrocortisone (topical) SOLN 2.5 %	NP	
fluocinonide CREA 0.05 %	P	1 package(s) per fill retail			
fluocinonide CREA 0.1 %	P				
fluocinonide GEL	P	1 package(s) per fill retail			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>hydrocortisone butyrate</i> CREA	NP		<i>triamcinolone acetonide (topical)</i> CREA 0.025 %	P	QL(30 GM per fill retail)
<i>hydrocortisone butyrate</i> LOTN	NP		<i>triamcinolone acetonide (topical)</i> CREA 0.1 %	P	
<i>hydrocortisone butyrate</i> OINT	P		<i>triamcinolone acetonide (topical)</i> LOTN	P	1 package(s) per fill retail
<i>hydrocortisone butyrate</i> SOLN	P		<i>triamcinolone acetonide (topical)</i> OINT 0.05 %, 0.1 %	P	
<i>hydrocortisone valerate</i> CREA	P		<i>triamcinolone acetonide (topical)</i> OINT 0.025 %, 0.5 %	P	1 package(s) per fill retail
<i>hydrocortisone valerate</i> OINT	NP		ULTRAVATE LOTN	NP	
HYDROXYM GEL	NP		<b>Eczema Agents</b>		
KENALOG AERS ( <i>triamcinolone acetonide (topical)</i> )	NP		ADBRY SOAJ	PA	SP; PA
<i>mometasone furoate</i> CREA	P	1 package(s) per fill retail	ADBRY SOSY	PA	SP; PA
<i>mometasone furoate</i> OINT	P	1 package(s) per fill retail	ANZUPGO CREA EX 20 MG/GM	NP	
<i>mometasone furoate</i> SOLN	P	1 package(s) per fill retail	CIBINQO	NP	SP
PANDEL	NP		DUPIXENT SOAJ	PA	SP; PA
SYNALAR CREA ( <i>fluocinolone acetonide</i> )	NP		DUPIXENT SOSY 200 MG/1.14ML, 300 MG/2ML	PA	SP; PA
SYNALAR OINT ( <i>fluocinolone acetonide</i> )	NP		EBGLYSS SOAJ	NP	
TACLONEX SUSP ( <i>calcipotriene-betamethasone dipropionate</i> )	NP		EBGLYSS SOAJ	NP	SP
TOPICORT SPRAY LIQD ( <i>desoximetasone</i> )	NP		EBGLYSS SOSY	NP	SP
TOPICORT CREA ( <i>desoximetasone</i> )	NP	1 package(s) per fill retail	OPZELURA	NP	QL(240 GM per 365 day(s) retail; 240 GM per 365 days mail); AL(At least 2 yrs old)
TOPICORT GEL ( <i>desoximetasone</i> )	NP		<b>Emollient/Keratolytic Agents</b>		
TOPICORT OINT ( <i>desoximetasone</i> )	NP		GORDONS UREA CREA 40 %	C	RX/OTC
<i>triamcinolone acetonide (topical)</i> AERS	NP		<i>urea</i> CREA 40 %	C	RX/OTC
<i>triamcinolone acetonide (topical)</i> CREA 0.5 %	P	1 package(s) per fill retail	UREA CREA	C	RX/OTC
			<b>Emollients</b>		
			AQUA LACTEN LOTN	C	
			AQUAMED LOTN	C	
			CAM LOTN	C	

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Drug Name	Drug Tier	Requirements/Limits
<i>emollient</i> LOTN	C	
EUCERIN ORIGINAL HEALING LOTN	C	
EUCERIN PLUS LOTN	C	
EUCERIN PROFESSIONAL REPAIR LOTN	C	
EUCERIN LOTN	C	
GOLD BOND ULTIMATE SOFTENING LOTN	C	
HYDRAZONE LOTION LOTN	C	
KERI ADVANCED MOISTURE THERAPY LOTN	C	
KERI BASIC ESSENTIALS LOTN	C	
KERI NOURISHING SHEA BUTTER LOTN	C	
KERI ORIGINAL LOTN	C	
KERI OVERNIGHT LOTN	C	
KERI RENEWAL MILK BODY LOTN	C	
KERI RENEWAL SKIN FIRING LOTN	C	
KERI RENEWAL STRETCH MARK LOTN	C	
KERI SENSITIVE SKIN LOTN	C	
<i>lactic acid (ammonium lactate)</i> CREA	C	QL(385 GM per 31 day(s) retail); RX/OTC
<i>lactic acid (ammonium lactate)</i> LOTN 12 %	C	QL(567 GM per 31 day(s) retail); RX/OTC
LUBRIDERM LOTN	C	
NIVEA VISAGE LOTN	C	
NIVEA LOTN	C	
RESTA LITE LOTN	C	
Hair Growth Agents		
LEQSELVI TABS PO 8 MG	NP	SP

Drug Name	Drug Tier	Requirements/Limits
LITFULO	NP	SP
Immunomodulating Agents - Systemic		
NEMLUVIO	NP	SP
Immunomodulating Agents - Topical		
<i>imiquimod</i> 3.75 %	NP	
<i>imiquimod</i> 5 %	P	QL(48 EA per 180 day(s) retail)
Immunosuppressive Agents - Topical		
HYFTOR	NP	
<i>pimecrolimus</i>	P	QL(100 GM per 31 day(s) retail; 100 GM per 31 days mail); AL(At least 2 yrs old)
<i>tacrolimus (topical)</i> OINT 0.1 %	P	QL(100 GM per 31 day(s) retail; 100 GM per 31 days mail); AL(At least 16 yrs old)
<i>tacrolimus (topical)</i> OINT 0.03 %	P	QL(100 GM per 31 day(s) retail; 100 GM per 31 days mail); AL(At least 2 yrs old)
Keratolytic/Antimitotic/Vesicant Agents		
CONDYLOX GEL ( <i>podofilox</i> )	NP	
DERMACINRX SALICYLIC ACID GEL 6 %	C	
<i>podofilox</i> GEL	NP	
<i>podofilox</i> SOLN	NP	
<i>salicylic acid</i> GEL 6 %	C	
SALICYLIC ACID OINT	NP	RX/OTC
Local Anesthetics - Topical		
<i>capsaicin</i> CREA 0.025 %, 0.035 %, 0.075 %, 0.1 %	C	1 package(s) per fill retail

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Drug Name	Drug Tier	Requirements/Limits
DERMACINRX LIDOCAINE CREA 3 %	C	1 package(s) per fill retail; RX/OTC
<i>dibucaine</i>	C	1 package(s) per fill retail
<i>lidocaine hcl CREA 3 %, 4 %</i>	C	1 package(s) per fill retail
<i>lidocaine hcl GEL 2 %</i>	C	QL(1 ML daily; 30 ML per fill retail)
<i>lidocaine CREA 4 %</i>	C	1 package(s) per fill retail
<i>lidocaine-prilocaine CREA</i>	C	1 package(s) per fill retail
Misc. Topical		
<i>zinc oxide (topical) OINT 20 %</i>	C	1 package(s) per fill retail
Phosphodiesterase 4 (PDE4) Inhibitors - Topical		
EUCRISA	NP	
ZORYVE CREA EX	NP	AL(At least 2 yrs old)
ZORYVE FOAM EX	NP	AL(At least 9 yrs old)
Rosacea Agents		
<i>azelaic acid GEL</i>	P	
<i>brimonidine tartrate (topical)</i>	NP	
<i>doxycycline (rosacea)</i>	NP	
FINACEA FOAM	NP	
<i>ivermectin (rosacea)</i>	NP	
METROCREAM CREA ( <i>metronidazole (topical)</i> )	NP	QL(45 GM per 31 day(s) retail)
METROGEL GEL 1 % ( <i>metronidazole (topical)</i> )	NP	
<i>metronidazole (topical) CREA</i>	P	QL(45 GM per 31 day(s) retail)
<i>metronidazole (topical) GEL 0.75 %</i>	P	QL(45 GM per 31 day(s) retail)
<i>metronidazole (topical) GEL 1 %</i>	P	
<i>metronidazole (topical) GEL 1 %</i>	NP	

Drug Name	Drug Tier	Requirements/Limits
<i>metronidazole (topical) LOTN</i>	P	
MIRVASO ( <i>brimonidine tartrate (topical)</i> )	NP	
ORACEA ( <i>doxycycline (rosacea)</i> )	NP	
RHOFADE	NP	
SOOLANTRA ( <i>ivermectin (rosacea)</i> )	NP	
Scabicides & Pediculicides		
<i>crotamiton LOTN</i>	NP	1 package(s) per fill retail
ELIMITE CREA ( <i>permethrin</i> )	NP	QL(60 GM per fill retail)
<i>malathion</i>	NP	QL(59 ML per fill retail); 2 max fill(s) per 31 day(s) retail
NATROBA ( <i>spinosad</i> )	P	Brand Preferred
NATROBA ( <i>spinosad</i> )	P	
OVIDE ( <i>malathion</i> )	NP	QL(59 ML per fill retail); 2 max fill(s) per 31 day(s) retail
<i>permethrin CREA</i>	P	QL(60 GM per fill retail)
PERMETHRIN CREA 5 % ( <i>permethrin</i> )	P	QL(60 GM per fill retail)
<i>permethrin LIQD EX</i>	P	
<i>pyrethrins-piperonyl butoxide SHAM 4 %-0.33 %</i>	C	
<i>spinosad</i>	NP	Brand Preferred
Tar Products		
<i>coal tar extract SHAM 0.5 %</i>	C	
<b>DIAGNOSTIC PRODUCTS</b>		
Diagnostic Tests		
ACCU-CHEK AVIVA PLUS STRP	P	RX/OTC

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Drug Name	Drug Tier	Requirements/Limits
ACCU-CHEK GUIDE TEST STRP	P	RX/OTC
ACCU-CHEK SMARTVIEW STRP	P	RX/OTC
CHEMSTRIP K STRP	C	
KETONE TEST STRP	C	
KETOSTIX STRP	C	
RELION KETONE TEST STRP	C	
RELION TRUE METRIX TEST STRIPS STRP	P	RX/OTC
TRUE METRIX BLOOD GLUCOSE TEST STRP	P	RX/OTC
<b>DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes</b>		
Digestive Enzymes		
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	P	Smart PA
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	
<b>DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure</b>		

Drug Name	Drug Tier	Requirements/Limits
<b>Carbonic Anhydrase Inhibitors</b>		
<i>acetazolamide CP12</i>	C	
<i>acetazolamide TABS</i>	C	
<i>methazolamide TABS</i>	C	
<b>Diuretic Combinations</b>		
<i>amiloride &amp; hydrochlorothiazide</i>	C	QL(1 EA daily)
<i>spironolactone &amp; hydrochlorothiazide</i>	C	
<i>triamterene &amp; hydrochlorothiazide CAPS 25 MG-37.5 MG</i>	C	
<i>triamterene &amp; hydrochlorothiazide TABS 25 MG-37.5 MG</i>	C	QL(2 EA daily)
<i>triamterene &amp; hydrochlorothiazide TABS 50 MG-75 MG</i>	C	
<b>Loop Diuretics</b>		
<i>bumetanide TABS</i>	C	
<i>furosemide SOLN PO 8 MG/ML, 10 MG/ML</i>	C	
<i>furosemide TABS</i>	C	
<i>torseamide TABS 20 MG</i>	C	
<i>torseamide TABS 5 MG, 10 MG, 100 MG</i>	C	QL(1 EA daily)
<b>Potassium Sparing Diuretics</b>		
<i>amiloride hcl TABS</i>	C	QL(4 EA daily)
<i>spironolactone TABS</i>	C	
<b>Thiazides and Thiazide-Like Diuretics</b>		
<i>chlorthalidone 25 MG, 50 MG</i>	C	
<i>hydrochlorothiazide CAPS</i>	C	
<i>hydrochlorothiazide TABS 25 MG, 50 MG</i>	C	
<i>indapamide TABS 1.25 MG, 2.5 MG</i>	C	
<i>metolazone</i>	C	

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

Drug Name	Drug Tier	Requirements/Limits
TERIPARATIDE SOPN	P	SP
TYMLOS	NP	SP
<b>Growth Hormones</b>		
GENOTROPIN MINIQUICK PRSY	PA	SP; PA
GENOTROPIN CART SC	PA	SP; PA
HUMATROPE CART IJ	NP	SP
NGENLA	NP	SP
NORDITROPIN FLEXPRO SOPN	PA	SP; PA
NUTROPIN AQ NUSPIN 10 SOPN	NP	SP
NUTROPIN AQ NUSPIN 20 SOPN	NP	SP
NUTROPIN AQ NUSPIN 5 SOPN	NP	SP
OMNITROPE SOCT	NP	SP
OMNITROPE SOLR SC	NP	SP
SEROSTIM SC 4 MG, 5 MG, 6 MG	NP	SP
SKYTROFA	NP	SP
SOGROYA	NP	SP
ZOMACTON SOLR SC	NP	SP
<b>Hormone Receptor Modulators</b>		
EVISTA <i>(raloxifene hcl)</i>	NP	QL(1 EA daily)
<i>raloxifene hcl</i>	NP	QL(1 EA daily)
<b>Insulin-Like Growth Factors (Somatomedins)</b>		
INCRELEX	NP	
INCRELEX	NP	SP
<b>LHRH/GnRH Agonist Analog Pituitary Suppressants</b>		
FENSOLVI (6 MONTH) SC	C	SP; PA
<b>Metabolic Modifiers</b>		
<i>calcitriol CAPS</i>	C	
GALAFOLD	C	QL(0.5 EA daily); SP; PA

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

Drug Name	Drug Tier	Requirements/Limits
<i>estradiol PTWK</i>	C	Limit 4 patches per month; QL(0.143 EA daily)
<i>estradiol TABS</i>	C	
<i>estrogens, conjugated TABS 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG</i>	C	QL(1 EA daily)
<b>FLUOROQUINOLONES - Drugs to Treat Bacterial Infections</b>		
Fluoroquinolones		
BAXDELA TABS	NP	
<i>ciprofloxacin hcl TABS 250 MG, 500 MG, 750 MG</i>	P	
CIPRO SUSR	NP	
CIPRO TABS 250 MG, 500 MG ( <i>ciprofloxacin hcl</i> )	NP	
<i>levofloxacin SOLN PO</i>	NP	
<i>levofloxacin TABS</i>	P	QL(14 EA per fill retail)
<i>moxifloxacin hcl TABS</i>	NP	
<i>ofloxacin 300 MG</i>	NP	
<i>ofloxacin 400 MG</i>	NP	QL(56 EA per fill retail)
<b>GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs</b>		
5-HT4 Receptor Agonists		
MOTTEGRITY ( <i>prucalopride succinate</i> )	NP	
<i>prucalopride succinate</i>	NP	
Antiflatulents		
<i>simethicone CHEW 80 MG</i>	C	
<i>simethicone SUSP</i>	C	
Bile Acid Synthesis Disorder Agents		
CTEXLI TABS PO 250 MG	C	PA
Gallstone Solubilizing Agents		

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Drug Name	Drug Tier	Requirements/Limits
<i>ursodiol CAPS</i>	C	
<i>ursodiol TABS 250 MG</i>	C	QL(7 EA daily)
Gastrointestinal Chloride Channel Activators		
AMITIZA ( <i>lubiprostone</i> )	NP	
<i>lubiprostone</i>	P	
Gastrointestinal Stimulants		
GIMOTI SOLN NA	NP	SP
<i>metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML</i>	P	
<i>metoclopramide hcl TABS</i>	P	
REGLAN TABS ( <i>metoclopramide hcl</i> )	NP	
Inflammatory Bowel Agents		
AVSOLA	C	SP; PA
AZULFIDINE EN-TABS TBEC ( <i>sulfasalazine</i> )	NP	
AZULFIDINE TABS ( <i>sulfasalazine</i> )	NP	
<i>balsalazide disodium CAPS</i>	P	QL(9 EA daily)
CANASA SUPP ( <i>mesalamine</i> )	NP	
CIMZIA (1 SYRINGE) PSKT 200 MG/ML	NP	
CIMZIA (2 SYRINGE) PSKT	NP	SP
CIMZIA KIT	NP	SP
CIMZIA-STARTER PSKT	NP	SP
DIPENTUM	NP	
ENTYVIO PEN SOAJ	NP	SP
INFLECTRA SOLR	C	SP; PA
LIALDA TBEC ( <i>mesalamine</i> )	NP	
<i>mesalamine w/ cleanser</i>	NP	
<i>mesalamine CP24</i>	P	
<i>mesalamine CPCR</i>	NP	Brand Preferred
<i>mesalamine CPDR</i>	NP	

Drug Name	Drug Tier	Requirements/Limits
<i>mesalamine ENEM</i>	P	QL(60 ML daily)
<i>mesalamine SUPP</i>	P	
<i>mesalamine TBEC 800 MG</i>	NP	QL(3 EA daily)
<i>mesalamine TBEC 1.2 GM</i>	NP	
OMVOH (300 MG DOSE) SOAJ	NP	SP
OMVOH (300 MG DOSE) SOSY	NP	SP
OMVOH SOAJ	NP	SP
OMVOH SOSY	NP	SP
PENTASA CPCR 250 MG	P	
PENTASA CPCR ( <i>mesalamine</i> )	P	Brand Preferred
RENFLEXIS	C	SP; PA
ROWASA ( <i>mesalamine w/ cleanser</i> )	NP	
SFROWASA ENEM	NP	
SKYRIZI SOCT	NP	SP
<i>sulfasalazine TABS</i>	P	
<i>sulfasalazine TBEC</i>	P	
TREMFYA PEN SOAJ SC 200 MG/2ML	NP	SP
TREMFYA-CD/UC INDUCTION SOAJ SC 200 MG/2ML	NP	
TREMFYA SOSY SC	NP	SP
USTEKINUMAB 130 MG/26ML	NP	SP
VELSIPITY	NP	SP
ZYMFENTRA (1 PEN) AJKT	NP	SP
ZYMFENTRA (2 PEN) AJKT	NP	SP
ZYMFENTRA (2 SYRINGE) PSKT	NP	SP
Intestinal Acidifiers		

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Drug Name	Drug Tier	Requirements/Limits
<i>lactulose (encephalopathy)</i>	P	
Irritable Bowel Syndrome (IBS) Agents		
<i>alosetron hcl</i>	NP	
IBSRELA	NP	
LINZESS	P	
LOTRONEX ( <i>alosetron hcl</i> )	NP	
VIBERZI	NP	
Peripheral Opioid Receptor Antagonists		
MOVANTIK	P	
SYMPROIC	NP	
Phosphate Binder Agents		
AURYXIA 210 MG ( <i>ferric citrate</i> )	NP	
<i>calcium acetate (phosphate binder) CAPS</i>	P	
<i>calcium acetate (phosphate binder) TABS</i>	NP	RX/OTC
<i>calcium acetate (phosphate binder) TABS</i>	P	RX/OTC
FOSRENOL CHEW ( <i>lanthanum carbonate</i> )	NP	
FOSRENOL PACK	NP	
<i>lanthanum carbonate CHEW</i>	NP	
RENVELA PACK ( <i>sevelamer carbonate</i> )	NP	
RENVELA TABS ( <i>sevelamer carbonate</i> )	NP	
<i>sevelamer carbonate PACK</i>	NP	
<i>sevelamer carbonate TABS</i>	P	
<i>sevelamer hcl</i>	NP	
VELPHORO	NP	
<b>GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive Organs and Urinary System</b>		

Drug Name	Drug Tier	Requirements/Limits
Alkalinizers		
<i>potassium citrate (alkalinizer) TBCR</i>	C	
<i>sodium citrate &amp; citric acid</i>	C	QL(16.67 ML daily); RX/OTC
Genitourinary Irrigants		
<i>sodium chloride (gu irrigant) 0.9 %</i>	C	
Prostatic Hypertrophy Agents		
<i>alfuzosin hcl</i>	P	
CARDURA XL	NP	
<i>dutasteride</i>	P	
<i>dutasteride-tamsulosin hcl</i>	NP	
<i>finasteride</i>	P	QL(1 EA daily)
JALYN ( <i>dutasteride-tamsulosin hcl</i> )	NP	
PROSCAR ( <i>finasteride</i> )	NP	QL(1 EA daily)
RAPAFLO ( <i>silodosin</i> )	NP	
<i>silodosin</i>	NP	
<i>tamsulosin hcl</i>	P	QL(2 EA daily)
Urinary Analgesics		
<i>phenazopyridine hcl TABS 100 MG, 200 MG</i>	C	
<b>GOUT AGENTS - Drugs to Treat Gout</b>		
Gout Agent Combinations		
<i>colchicine w/ probenecid</i>	P	
Gout Agents		
<i>allopurinol 100 MG, 300 MG</i>	P	
<i>allopurinol 200 MG</i>	NP	
<i>colchicine CAPS</i>	NP	
<i>colchicine TABS</i>	P	QL(6 EA per fill retail); 1 max fill(s) per 31 day(s) retail
<i>febuxostat</i>	NP	
GLOPERBA SOLN PO	NP	

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

Drug Name	Drug Tier	Requirements/Limits
Agents for Gaucher Disease		
CERDELGA	C	SP; PA
CEREZYME 400 UNIT	C	SP; PA
Agents for Sickle Cell Disease		
ADAKVEO	C	SP; PA
CASGEVY	PA	SP; PA
DROXIA CAPS	P	
ENDARI ( <i>glutamine sickle cell</i> )	PA	SP; PA
<i>glutamine sickle cell</i>	PA	SP; PA
LYFGENIA	PA	SP; PA
SIKLOS TABS	P	
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)
Folic Acid/Folates		
<i>folic acid TABS 400 MCG</i>	C	QL(1 EA daily)
<i>folic acid TABS 1 MG</i>	C	RX/OTC
Hematopoietic Growth Factors		
ARANESP (ALBUMIN FREE) SOLN	NP	SP
ARANESP (ALBUMIN FREE) SOSY	NP	SP
EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	P	SP
EPOGEN 10000 UNIT/ML, 20000 UNIT/ML	P	
MIRCERA	NP	SP
PROCRIT	NP	SP
PROCRIT	NP	SP
REBLOZYL	C	SP
RETACRIT	P	SP
VAFSEO	NP	SP

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Drug Name	Drug Tier	Requirements/Limits
ZARXIO	C	SP; PA
Iron		
<i>ferrous fumarate TABS</i>	C	QL(2 EA daily)
<i>ferrous gluconate TABS 324 MG</i>	C	QL(3.34 EA daily)
<i>ferrous sulfate SOLN 15 MG/ML, 15 MG/ML</i>	C	QL(3.4 ML daily)
<i>ferrous sulfate SOLN 220 MG/5ML, 300 MG/6.8ML</i>	C	
<i>ferrous sulfate TABS 325 MG, 65 MG, 325 MG</i>	C	
<i>ferrous sulfate TBEC</i>	C	
IRON CHEWS PEDIATRIC CHEW	C	
<i>polysaccharide iron complex CAPS</i>	C	QL(1 EA daily)
<b>HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders</b>		
Hemostatics - Systemic		
<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)
<b>HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS</b>		
Antihistamine Hypnotics		
<i>diphenhydramine hcl (sleep) TABS 25 MG</i>	C	QL(1 EA daily)
<i>doxylamine succinate (sleep)</i>	C	
Barbiturate Hypnotics		
<i>phenobarbital ELIX</i>	C	
<i>phenobarbital TABS</i>	C	
Hypnotics - Tricyclic Agents		
<i>doxepin hcl (sleep)</i>	NP	
Non-Barbiturate Hypnotics		

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

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

Drug Name	Drug Tier	Requirements/Limits
<i>glycerin (laxative)</i> SUPP 2 GM	C	
<i>lactulose</i> PACK	NP	
<i>lactulose</i> SOLN	P	
<i>polyethylene glycol 3350</i> PACK	P	
<i>polyethylene glycol 3350</i> POWD	P	QL(34 GM daily)
<b>Saline Laxatives</b>		
<i>magnesium citrate</i> 1.745 GM/30ML	P	
<i>magnesium hydroxide</i> SUSP 7.75 %, 400 MG/5ML, 1200 MG/15ML, 2400 MG/30ML	C	QL(32 ML daily)
<i>sodium phosphates</i> ENEM	C	
<b>Stimulant Laxatives</b>		
<i>bisacodyl</i> SUPP	C	QL(12 EA per fill retail)
<i>bisacodyl</i> TBEC	C	QL(1 EA daily)
<i>sennosides</i> TABS 8.6 MG	C	
<b>Surfactant Laxatives</b>		
<i>docusate sodium</i> CAPS 50 MG	C	
<i>docusate sodium</i> CAPS 100 MG, 250 MG	C	QL(3 EA daily)
<i>docusate sodium</i> LIQD 50 MG/5ML, 100 MG/10ML	C	
DOCUSATE SODIUM SYRP	C	
<i>docusate sodium</i> TABS	C	
<b>MACROLIDES - Drugs to Treat Bacterial Infections</b>		
<b>Azithromycin</b>		
<i>azithromycin</i> PACK	P	QL(2 EA per fill retail)
<i>azithromycin</i> SUSR 100 MG/5ML	P	1 package(s) per fill retail
<i>azithromycin</i> SUSR 200 MG/5ML	P	QL(60 ML per fill retail)

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Drug Name	Drug Tier	Requirements/Limits
<i>azithromycin TABS 250 MG</i>	P	QL(6 EA per fill retail)
<i>azithromycin TABS 500 MG</i>	P	QL(4 EA daily)
<i>azithromycin TABS 600 MG</i>	P	QL(8 EA per 28 day(s) retail)
ZITHROMAX TRI-PAK TABS ( <i>azithromycin</i> )	NP	QL(4 EA daily)
ZITHROMAX Z-PAK TABS ( <i>azithromycin</i> )	NP	QL(6 EA per fill retail)
ZITHROMAX PACK	NP	QL(2 EA per fill retail)
ZITHROMAX SUSR 100 MG/5ML ( <i>azithromycin</i> )	NP	1 package(s) per fill retail
ZITHROMAX SUSR 200 MG/5ML ( <i>azithromycin</i> )	NP	QL(60 ML per fill retail)
ZITHROMAX TABS 250 MG ( <i>azithromycin</i> )	NP	QL(6 EA per fill retail)
ZITHROMAX TABS 500 MG ( <i>azithromycin</i> )	NP	QL(4 EA daily)
Clarithromycin		
<i>clarithromycin SUSR 125 MG/5ML</i>	P	1 package(s) per fill retail
<i>clarithromycin SUSR 250 MG/5ML</i>	P	2 package(s) per fill retail
<i>clarithromycin TABS</i>	P	QL(28 EA per fill retail)
<i>clarithromycin TB24</i>	NP	QL(14 EA per fill retail)
Erythromycins		
E.E.S. GRANULES SUSR ( <i>erythromycin ethylsuccinate</i> )	NP	
ERYPED 200 SUSR ( <i>erythromycin ethylsuccinate</i> )	NP	
ERYPED 400 SUSR ( <i>erythromycin ethylsuccinate</i> )	NP	
<i>erythromycin base CPEP</i>	NP	
<i>erythromycin base TABS</i>	NP	
<i>erythromycin base TBEC</i>	NP	

Drug Name	Drug Tier	Requirements/Limits
<i>erythromycin ethylsuccinate SUSR</i>	P	
<i>erythromycin ethylsuccinate TABS</i>	NP	
<i>erythromycin stearate TABS 250 MG</i>	P	
Fidaxomicin		
DIFICID SUSR	P	
DIFICID TABS 200 MG ( <i>fidaxomicin</i> )	P	Brand Preferred
<i>fidaxomicin TABS 200 MG</i>	NP	Brand Preferred
<b>MEDICAL DEVICES AND SUPPLIES</b>		
Diabetic Supplies		
ACCU-CHEK GUIDE ME KIT	P	QL(1 EA per 365 day(s) retail); RX/OTC
ACCU-CHEK GUIDE KIT	P	QL(1 EA per 365 day(s) retail); RX/OTC
ACCU-CHEK SOFTCLIX LANCETS	P	RX/OTC
DEXCOM G6 RECEIVER	PA	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); PA
DEXCOM G6 SENSOR	PA	3 package(s) per 90 day(s) retail; 3 package(s) per 90 day(s) mail; PA
DEXCOM G6 TRANSMITTER	PA	QL(1 EA per 90 day(s) retail; 1 EA per 90 days mail); PA
DEXCOM G7 15 DAY SENSOR	PA	QL(2 EA per 30 day(s) retail; 2 EA per 30 days mail); AL(At least 18 yrs old); PA

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
DEXCOM G7 RECEIVER	PA	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); PA	OMNIPOD 5 G7 INTRO (GEN 5) KIT	PA	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); PA
DEXCOM G7 SENSOR	PA	QL(9 EA per 90 day(s) retail); PA	OMNIPOD 5 G7 PODS (GEN 5) MISC	PA	2 package(s) per 30 day(s) retail; 2 package(s) per 30 day(s) mail; PA
FREESTYLE LIBRE 14 DAY SENSOR	PA	QL(6 EA per 90 day(s) retail); PA	OMNIPOD 5 LIBRE2 G6 INTRO GEN5 KIT	PA	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); PA
FREESTYLE LIBRE 2 PLUS SENSOR	PA	QL(6 EA per 90 day(s) retail; 6 EA per 90 days mail); PA	OMNIPOD 5 LIBRE2 PLUS G6 PODS MISC	PA	2 package(s) per 30 day(s) retail; 2 package(s) per 30 day(s) mail; PA
FREESTYLE LIBRE 2 READER	PA	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); PA	OMNIPOD DASH PODS (GEN 4) MISC	PA	2 package(s) per 30 day(s) retail; 2 package(s) per 30 day(s) mail; PA
FREESTYLE LIBRE 2 SENSOR	PA	QL(6 EA per 90 day(s) retail); PA	RELION TRUE MET AIR GLUC METER KIT	P	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	TRUE METRIX AIR GLUCOSE METER KIT	P	QL(1 EA per 365 day(s) retail); RX/OTC
FREESTYLE LIBRE 3 READER	PA	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); PA	TRUE METRIX METER KIT	P	QL(1 EA per 365 day(s) retail); RX/OTC
FREESTYLE LIBRE 3 SENSOR	PA	QL(6 EA per 90 day(s) retail); PA	TRUEPLUS LANCETS 28G	P	RX/OTC
OMNIPOD 5 DEXG7G6 INTRO GEN 5 KIT	PA	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); PA	TRUEPLUS LANCETS 30G	P	RX/OTC
OMNIPOD 5 DEXG7G6 PODS GEN 5 MISC	PA	2 package(s) per 30 day(s) retail; 2 package(s) per 30 day(s) mail; PA	TRUEPLUS LANCETS 33G	P	RX/OTC
<b>Parenteral Therapy Supplies</b>					
AQ INSULIN SYRINGE				C	QL(5 EA daily); RX/OTC
ASSURE ID INSULIN SAFETY SYR				C	QL(5 EA daily); RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
BD AUTOSHIELD DUO	C	QL(5 EA daily); RX/OTC	EASY TOUCH SHEATHLOCK SYRINGE	C	QL(5 EA daily); RX/OTC
BD INSULIN SYR ULTRAFINE II	C	QL(5 EA daily); RX/OTC	EMBECTA INSULIN SYR ULTRAFINE	C	QL(5 EA daily); RX/OTC
BD INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	EMBECTA INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
BD INSULIN SYRINGE MICROFINE	C	QL(5 EA daily); RX/OTC	EMBECTA PEN NEEDLE ULTRAFINE	C	QL(5 EA daily)
BD INSULIN SYRINGE U/F	C	QL(5 EA daily); RX/OTC	FIFTY50 SUPERIOR COMFORT SYR	C	QL(5 EA daily); RX/OTC
BD INSULIN SYRINGE ULTRAFINE	C	QL(5 EA daily)	GLUCOPRO INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
BD PEN NEEDLE MICRO ULTRAFINE	C	QL(5 EA daily)	GNP INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
BD PEN NEEDLE MINI ULTRAFINE	C	QL(5 EA daily); RX/OTC	GNP INSULIN SYRINGES	C	QL(5 EA daily); RX/OTC
BD PEN NEEDLE NANO 2ND GEN	C	QL(5 EA daily); RX/OTC	GNP INSULIN SYRINGES 28GX1/2"	C	QL(5 EA daily); RX/OTC
BD PEN NEEDLE NANO ULTRAFINE	C	QL(5 EA daily); RX/OTC	GNP INSULIN SYRINGES 29GX1/2"	C	QL(5 EA daily); RX/OTC
BD PEN NEEDLE ORIG ULTRAFINE	C	QL(5 EA daily)	GNP INSULIN SYRINGES 30GX5/16"	C	QL(5 EA daily); RX/OTC
BD PEN NEEDLE SHORT ULTRAFINE	C	QL(5 EA daily); RX/OTC	GNP INSULIN SYRINGES 31GX5/16"	C	QL(5 EA daily); RX/OTC
BD VEO INSULIN SYR ULTRAFINE	C	QL(5 EA daily); RX/OTC	GNP ULTRA COM INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
CAREONE INSULIN SYRINGE	C	QL(5 EA daily)	HEALTHWISE INSULIN SYR/NEEDLE	C	QL(5 EA daily); RX/OTC
CARETOUCH INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	HM ULTICARE INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
COMFORT EZ INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
DROPLET INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	INSULIN SYRINGE- NEEDLE U-100	C	QL(5 EA daily); RX/OTC
EASY TOUCH FLIPLOCK INSULIN SY	C	QL(5 EA daily); RX/OTC	KINRAY INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
EASY TOUCH INSULIN BARRELS	C	QL(5 EA daily); RX/OTC	LITETOUCH INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
EASY TOUCH INSULIN SAFETY SYR	C	QL(5 EA daily); RX/OTC	MAGELLAN INSULIN SAFETY SYR	C	QL(5 EA daily); RX/OTC
EASY TOUCH INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	MAXI-COMFORT INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MAXICOMFORT SYR 27G X 1/2"	C	QL(5 EA daily); RX/OTC	ULTRA FLO INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
MEDIC INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	ULTRACARE INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
MM INSULIN SYRINGE/NEEDLE	C	QL(5 EA daily); RX/OTC	ULTRA-THIN II INS SYR SHORT	C	QL(5 EA daily); RX/OTC
MONOJECT INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	ULTRA-THIN II INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
MONOJECT ULTRA COMFORT SYRINGE	C	QL(5 EA daily); RX/OTC	<b>Respiratory Therapy Supplies</b>		
PRECISION SURE-DOSE SYRINGE	C	QL(5 EA daily); RX/OTC	AEROCHAMBER HOLDING CHAMBER DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
PRODIGY INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	AEROCHAMBER MINI CHAMBER DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
PX INSULIN SYRINGE	C	QL(5 EA daily)	AEROCHAMBER MV MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC
REALITY INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	AEROCHAMBER PLS FLOVU MTHPIECE DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
RELION INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	AEROCHAMBER PLUS FLO-VU INTERM DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
SB INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	AEROCHAMBER PLUS FLO-VU LARGE DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
SECURESAFE INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	AEROCHAMBER PLUS FLO-VU LARGE MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC
SURE COMFORT INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	AEROCHAMBER PLUS FLO-VU MEDIUM DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
TECHLITE INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	AEROCHAMBER PLUS FLO-VU MEDIUM MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC
TRUE COMFORT INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	AEROCHAMBER PLUS FLO-VU SMALL DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
TRUE COMFORT PRO INSULIN SYR	C	QL(5 EA daily); RX/OTC	AEROCHAMBER PLUS FLO-VU SMALL MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC
TRUEPLUS 5-BEVEL PEN NEEDLES	C	QL(5 EA daily)	AEROCHAMBER PLUS FLOW VU MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC
TRUEPLUS INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC			
TRUEPLUS PEN NEEDLES	C	QL(5 EA daily); RX/OTC			
ULTRA COMFORT INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC			
ULTRA FLO INSULIN SYR 1/2 UNIT	C	QL(5 EA daily); RX/OTC			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
AEROCHAMBER W/FLOWSIGNAL 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 Z-STAT PLUS CHAMBR 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/LARGE 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
AEROCHAMBER Z-STAT PLUS/MEDIUM MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC	EASIVENT MASK LARGE MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC
AEROCHAMBER Z-STAT PLUS/SMALL MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC	EASIVENT MASK MEDIUM MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC
AEROCHAMBER Z-STAT PLUS 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
AEROCHAMBER2GO ANTI-STATIC DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	EASIVENT MISC	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	EQ SPACE CHAMBER ANTI-STATIC L 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	EQ SPACE CHAMBER ANTI-STATIC M DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
BREATHE COMFORT CHAMBER/CHILD DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	EQ SPACE CHAMBER ANTI-STATIC S 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	EQ SPACE CHAMBER ANTI-STATIC DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
BREATHE EASE MEDIUM DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	FLEXICHAMBER ADULT MASK/SMALL	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	FLEXICHAMBER CHILD MASK/LARGE	C	QL(2 EA per 360 day(s) retail); RX/OTC
BREATHERITE VALVED MDI CHAMBER DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	FLEXICHAMBER CHILD MASK/SMALL	C	QL(2 EA per 360 day(s) retail); RX/OTC
CLEVER CHOICE HOLDING CHAMBER DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	FLEXICHAMBER DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
COMPACT SPACE CHAMBER/LG MASK DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	INSPIREASE RESERVOIR BAGS	C	QL(3 EA per 180 day(s) retail)

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
INSPIREASE MISC	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
MASK VORTEX/CHILD/FROG	C	QL(2 EA per 360 day(s) retail); RX/OTC	POCKET CHAMBER DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
MASK VORTEX/TODDLER/LAD YBUG	C	QL(2 EA per 360 day(s) retail); RX/OTC	POCKET SPACER 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	PRO COMFORT SPACER ADULT MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC
MICROCHAMBER MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC	PRO COMFORT SPACER CHILD MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC
MICROSPACER MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC	PRO COMFORT SPACER INFANT 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	PROCARE SPACER/ADULT MASK DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
OPTICHAMBER DIAMOND-LG MASK DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	PROCARE SPACER/CHILD MASK DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
OPTICHAMBER DIAMOND-MD MASK MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC	PROCHAMBER VHC DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
OPTICHAMBER DIAMOND MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC	PURE COMFORT SPACER CHAMBER 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	RITEFLO 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	VORTEX HOLD CHMBR/MASK/CHILD 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	VORTEX HOLD CHMBR/MASK/TODDLER DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
PANDA MASK SMALL	C	QL(2 EA per 360 day(s) retail); RX/OTC	VORTEX VALVE CHAMBER-PEDI MASK DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
PARI VORTEX ADULT MASK	C	QL(2 EA per 360 day(s) retail); RX/OTC	VORTEX VALVED HOLDING CHAMBER DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
PARI VORTEX PEDIATRIC MASK	C	QL(2 EA per 360 day(s) retail); RX/OTC	<b>MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches</b>		

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Calcitonin Gene-Related Peptide (CGRP) Receptor Antag			IMITREX STATDOSE SYSTEM SOAJ 4 MG/0.5ML	NP	
AIMOVIG	NP	SP	IMITREX TABS ( <i>sumatriptan succinate</i> )	NP	QL(9 EA per 31 day(s) retail); AL(At least 12 yrs old)
AJOVY SOAJ	PA	SP; PA	MAXALT-MLT TBDP 10 MG ( <i>rizatriptan benzoate</i> )	NP	QL(12 EA per 31 day(s) retail); AL(At least 6 yrs old)
AJOVY SOSY	PA	SP; PA	MAXALT TABS 10 MG ( <i>rizatriptan benzoate</i> )	NP	QL(12 EA per 31 day(s) retail); AL(At least 6 yrs old)
EMGALITY (300 MG DOSE) SOSY	NP	SP	<i>naratriptan hcl</i>	NP	QL(9 EA per 31 day(s) retail); AL(At least 18 yrs old)
EMGALITY SOAJ	PA	SP; PA	RELPAK ( <i>eletriptan hydrobromide</i> )	P	Brand Preferred ; QL(6 EA per 31 day(s) retail)
EMGALITY SOSY	PA	SP; PA	RELPAK ( <i>eletriptan hydrobromide</i> )	P	Brand Preferred; QL(6 EA per 31 day(s) retail)
NURTEC	NP		<i>rizatriptan benzoate TABS</i>	P	QL(12 EA per 31 day(s) retail); AL(At least 6 yrs old)
QULIPTA	PA	PA	<i>rizatriptan benzoate TBDP</i>	P	QL(12 EA per 31 day(s) retail); AL(At least 6 yrs old)
UBRELVY	PA	PA	<i>sumatriptan 5 MG/ACT</i>	NP	5 MG/ACT; QL(6 EA per 31 day(s) retail); AL(At least 12 yrs old)
ZAVZPRET	NP		<i>sumatriptan 20 MG/ACT</i>	NP	20 MG/ACT; QL(6 EA per 31 day(s) retail); AL(At least 12 yrs old)
Migraine Combinations			<i>sumatriptan succinate SOAJ 6 MG/0.5ML</i>	P	QL(2 ML per 31 day(s) retail); AL(At least 12 yrs old)
<i>ergotamine w/ caffeine TABS</i>	C	AL(At least 18 yrs old)	Serotonin Agonists		
<i>sumatriptan-naproxen sodium</i>	NP		<i>almotriptan malate</i>	NP	
SYMBRAVO TABS PO	NP		<i>eletriptan hydrobromide</i>	NP	Brand Preferred; QL(6 EA per 31 day(s) retail)
Serotonin Agonists			FROVA ( <i>frovatriptan succinate</i> )	NP	
<i>almotriptan malate</i>	NP		<i>frovatriptan succinate</i>	NP	
<i>eletriptan hydrobromide</i>	NP	Brand Preferred; QL(6 EA per 31 day(s) retail)	IMITREX STATDOSE REFILL SOCT 6 MG/0.5ML	NP	QL(2 ML per 31 day(s) retail); AL(At least 12 yrs old)
FROVA ( <i>frovatriptan succinate</i> )	NP		IMITREX STATDOSE REFILL SOCT 4 MG/0.5ML	NP	
<i>frovatriptan succinate</i>	NP		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)
IMITREX STATDOSE REFILL SOCT 6 MG/0.5ML	NP	QL(2 ML per 31 day(s) retail); AL(At least 12 yrs old)			
IMITREX STATDOSE REFILL SOCT 4 MG/0.5ML	NP				
IMITREX STATDOSE SYSTEM SOAJ 6 MG/0.5ML ( <i>sumatriptan succinate</i> )	NP	QL(2 ML per 31 day(s) retail); AL(At least 12 yrs old)			
			<i>sumatriptan succinate SOAJ 6 MG/0.5ML</i>	P	QL(2 ML per 31 day(s) retail); AL(At least 12 yrs old)

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Drug Name	Drug Tier	Requirements/Limits
<i>sumatriptan succinate SOAJ 4 MG/0.5ML</i>	P	
<i>sumatriptan succinate SOCT 6 MG/0.5ML</i>	P	QL(2 ML per 31 day(s) retail); AL(At least 12 yrs old)
<i>sumatriptan succinate SOCT 4 MG/0.5ML</i>	P	
<i>sumatriptan succinate SOLN 6 MG/0.5ML</i>	P	QL(2.5 ML per 30 day(s) retail); AL(At least 12 yrs old)
<i>sumatriptan succinate TABS</i>	P	QL(9 EA per 31 day(s) retail); AL(At least 12 yrs old)
TOSYMRA	NP	
ZEMBRACE SYMTOUCH SOAJ	NP	
<i>zolmitriptan SOLN 5 MG</i>	NP	QL(6 EA per 31 day(s) retail); AL(At least 12 yrs old)
<i>zolmitriptan SOLN 2.5 MG</i>	NP	
<i>zolmitriptan TABS</i>	NP	QL(6 EA per 31 day(s) retail)
<i>zolmitriptan TBDP</i>	NP	QL(6 EA per 31 day(s) retail)
ZOMIG SOLN 5 MG ( <i>zolmitriptan</i> )	NP	QL(6 EA per 31 day(s) retail); AL(At least 12 yrs old)
ZOMIG SOLN 2.5 MG ( <i>zolmitriptan</i> )	NP	
<b>MINERALS &amp; ELECTROLYTES</b>		
<b>Calcium</b>		
<i>calcium carbonate-cholecalciferol TABS 200 UNIT-500 MG, 5 MCG-500 MG, 500 MG-5 MCG</i>	C	
<i>calcium carbonate-cholecalciferol TABS 10 MCG-600 MG, 400 UNIT-600 MG</i>	C	QL(2 EA daily)

Drug Name	Drug Tier	Requirements/Limits
<i>oyster shell</i>	C	
<b>Electrolyte Mixtures</b>		
<i>oral electrolytes SOLN</i>	C	
<b>Fluoride</b>		
<i>sodium fluoride CHEW</i>	C	
<i>sodium fluoride SOLN 0.5 MG/ML</i>	C	RX/OTC
SODIUM FLUORIDE SOLN 0.5 MG/ML	C	RX/OTC
<b>Magnesium</b>		
<i>magnesium oxide (mg supplement) TABS</i>	C	
<b>Phosphate</b>		
<i>pot phosphate monobasic w/ sod phosphate dibasic &amp; monobasic</i>	C	QL(8 EA daily); RX/OTC
WES-PHOS 250 NEUTRAL 852 MG-155 MG-130 MG	C	QL(8 EA daily); RX/OTC
<b>Potassium</b>		
EFFER-K TBEF 25 MEQ	C	
<i>potassium bicarbonate TBEF</i>	C	
<i>potassium chloride microencapsulated crystals er</i>	C	
<i>potassium chloride CPCR 10 MEQ</i>	C	
<i>potassium chloride CPCR 8 MEQ</i>	C	QL(1 EA daily)
<i>potassium chloride PACK PO 20 MEQ</i>	C	
<i>potassium chloride SOLN PO 10 %, 20 %, 10 %</i>	C	
<i>potassium chloride TBCR</i>	C	
<b>MISCELLANEOUS THERAPEUTIC CLASSES</b>		
<b>Chelating Agents</b>		
<i>penicillamine TABS</i>	C	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Immunomodulators			NEORAL SOLN (cyclosporine modified (for microemulsion))	NP	
REZUROCK	NP	SP	PROGRAF CAPS (tacrolimus)	NP	
RHAPSIDO TABS PO 25 MG	NP	AL(At least 18 yrs old); SP	PROGRAF PACK	NP	
Immunosuppressive Agents			SANDIMMUNE CAPS (cyclosporine)	P	
ASTAGRAF XL CP24	NP		sirolimus SOLN	P	
azathioprine TABS	P		sirolimus TABS	P	
CELLCEPT CAPS (mycophenolate mofetil)	NP		tacrolimus CAPS	P	
CELLCEPT SUSR (mycophenolate mofetil)	NP		ZORTRESS (everolimus (immunosuppressant))	NP	
CELLCEPT TABS (mycophenolate mofetil)	NP		Potassium Removing Agents		
cyclosporine modified (for microemulsion) CAPS	P		LOKELMA	P	
cyclosporine modified (for microemulsion) SOLN	P		sodium polystyrene sulfonate POWD	P	
cyclosporine CAPS	P	USE BRAND NAME or Authorized Generic	sodium polystyrene sulfonate SUSP CO 15 GM/60ML	P	
ENSPRYNG	NP	SP	sodium polystyrene sulfonate SUSP PR 30 GM/120ML	P	
ENVARUSUS XR TB24	NP		VELTASSA 1 GM, 8.4 GM, 16.8 GM	P	
everolimus (immunosuppressant)	NP		<b>MOUTH/THROAT/DENTAL AGENTS</b>		
IMURAN TABS (azathioprine)	NP		Anesthetics Topical Oral		
mycophenolate mofetil CAPS	P		lidocaine hcl (mouth-throat) 2 %	C	QL(100 ML per fill retail)
mycophenolate mofetil SUSR	P		Anti-infectives - Throat		
mycophenolate mofetil TABS	P		NYSTATIN (nystatin (mouth-throat))	P	2 package(s) per fill retail
mycophenolate sodium	P		nystatin (mouth-throat)	P	2 package(s) per fill retail
MYFORTIC (mycophenolate sodium)	NP		Antiseptics - Mouth/Throat		
MYHIBBIN SUSP	NP		chlorhexidine gluconate (mouth-throat)	C	
NEORAL CAPS (cyclosporine modified (for microemulsion))	NP		Dental Products		

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>sodium fluoride (dental) CREA</i>	C	QL(113 GM per 60 day(s) retail)	EQL ONE DAILY WOMENS TABS 60 MG-2 MG-30 MCG-400 MCG-800 UNIT-6 MCG-1.7 MG-25 MCG-10 MG-2500 UNIT-5 MG-18 MG-1.5 MG-15 MG-50 MG-120 MCG-450 MG-30 UNIT-2 MG-2 MG-20 MCG, 60 MG-2 MG-30 MCG-400 MCG-800 UNIT-6 MCG-1.7 MG-25 MCG-10 MG-2500 UNIT-5 MG-18 MG-1.5 MG-15 MG-50 MG-450 MG-30 UNIT-2 MG-2 MG-120 MCG-20 MCG	C	QL(1 EA daily)
<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 ML per 60 day(s) retail)			
Steroids - Mouth/Throat/Dental			ESSENTIAL ONE DAILY MULTIVIT TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-3000 UNIT-10 MG-1.5 MG-45 MG-30 UNIT	C	QL(1 EA daily)
<i>triamcinolone acetonide (mouth)</i>	C	1 package(s) per fill retail			
Throat Products - Misc.			GNP ONE DAILY WOMENS HEALTH TABS 60 MG-2 MG-30 MCG-400 MCG-800 UNIT-6 MCG-1.7 MG-25 MCG-10 MG-2500 UNIT-5 MG-18 MG-450 MG-1.5 MG-50 MG-15 MG-30 UNIT-2 MG-120 MCG-2 MG-20 MCG	C	QL(1 EA daily)
<i>pilocarpine hcl (oral) 5 MG</i>	C	QL(6 EA daily)			
<b>MULTIVITAMINS</b>			Multiple Vitamins w/ Minerals		
B-Complex Vitamins			50+ ADULT EYE HEALTH CAPS 150 MG-30 UNIT-5 MG-1 MG-1 MG-9 MG-90 MG-160 MG-250 MG	C	QL(1 EA daily); RX/OTC
<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/ C					
<i>b complex w/ c CAPS</i>	C	RX/OTC			
LUMAVEX CAPS	C	RX/OTC			
LUNAVIRA CAPS	C	RX/OTC			
B-Complex w/ Folic Acid					
<i>b-complex w/ c &amp; folic acid CAPS</i>	C	QL(1 EA daily); RX/OTC			
MYNEPHRON CAPS 1 MG	C	QL(1 EA daily); RX/OTC			
RENAL CAPS 1 MG	C	QL(1 EA daily); RX/OTC			
RENO CAPS CAPS 1 MG	C	QL(1 EA daily); RX/OTC			
TRIPHROCAPS CAPS 1 MG	C	QL(1 EA daily); RX/OTC			
Multiple Vitamins w/ Calcium					

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
A THRU Z ADVANCED ADULT TABS 60 MG-2 MG-30 MCG-400 MCG- 400 UNIT-6 MCG-1.7 MG- 25 MCG-20 MG-3500 UNIT-10 MG-18 MG-1.5 MG-11 MG-75 MCG-50 MG-2 MG-200 MG-80 MG- 45 MCG-150 MCG-30 UNIT-20 MG-0.5 MG-5 MCG-10 MCG-2.3 MG-55 MCG-10 MCG-35 MCG-72 MG	C	QL(1 EA daily); RX/OTC	A THRU Z ADVANCED TABS 60 MG-2 MG-30 MCG-400 MCG-400 UNIT- 6 MCG-1.7 MG-25 MCG- 20 MG-3500 UNIT-10 MG- 18 MG-1.5 MG-11 MG-75 MCG-50 MG-2 MG-200 MG-80 MG-45 MCG-150 MCG-30 UNIT-20 MG-0.5 MG-5 MCG-10 MCG-2.3 MG-55 MCG-10 MCG-35 MCG-72 MG, 60 MG-2 MG-30 MCG-400 MCG- 400 UNIT-6 MCG-1.7 MG- 25 MCG-20 MG-3500 UNIT-10 MG-18 MG-1.5 MG-50 MG-11 MG-75 MCG-2 MG-80 MG-200 MG-45 MCG-150 MCG-30 UNIT-20 MG-0.5 MG-5 MCG-10 MCG-2.3 MG-55 MCG-10 MCG-35 MCG-72 MG, 90 MG-2 MG-30 MCG-500 MCG-400 UNIT- 6 MCG-1.7 MG-20 MG- 250 MCG-3500 UNIT-10 MG-18 MG-200 MG-300 MCG-1.5 MG-100 MG-11 MG-0.9 MG-80 MG-150 MCG-150 MCG-45 MCG- 30 UNIT-109 MG-5 MCG- 10 MCG-2.3 MG-35 MCG- 25 MCG-55 MCG-10 MCG-72 MG-2 MG, 90 MG-2 MG-30 MCG-500 MCG-400 UNIT-6 MCG- 1.7 MG-25 MCG-20 MG- 250 MCG-3500 UNIT-10 MG-18 MG-300 MCG-1.5 MG-100 MG-11 MG-150 MCG-2 MG-80 MG-200 MG-45 MCG-150 MCG-30 UNIT-109 MG-0.9 MG-5 MCG-10 MCG-2.3 MG-55 MCG-10 MCG-35 MCG-72 MG	C	QL(1 EA daily); RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
A THRU Z HIGH POTENCY TABS 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-250 MCG-3500 UNIT-10 MG-18 MG-162 MG-300 MCG-1.5 MG-100 MG-15 MG-2 MG-80 MG-150 MCG-150 MCG-75 MCG-30 UNIT-109 MG-5 MCG-10 MCG-2 MG-120 MCG-25 MCG-20 MCG-10 MCG-72 MG-2 MG	C	QL(1 EA daily); RX/OTC	A THRU Z SELECT ADVANCED TABS 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-300 MCG-1.5 MG-11 MG-150 MCG-50 MG-220 MG-80 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG-2 MG, 90 MG-3 MG-30 MCG-500 MCG-1.5 MG-500 UNIT-25 MCG-10 MG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-300 MCG-50 MG-2.3 MG-45 MCG-5 MCG-80 MG-2 MG-150 MCG-45 MCG-0.9 MG-10 MCG-11 MG-220 MG-150 MCG-110 MG-55 MCG-50 UNIT-72 MG, 90 MG-3 MG-30 MCG-500 MCG-500 UNIT-25 MCG-10 MG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-300 MCG-1.5 MG-11 MG-150 MCG-2 MG-50 MG-45 MCG-80 MG-220 MG-150 MCG-50 UNIT-110 MG-0.9 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG	C	QL(1 EA daily); RX/OTC
A THRU Z SELECT 50+ ADVANCED TABS 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-300 MCG-1.5 MG-11 MG-150 MCG-50 MG-2 MG-220 MG-80 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG	C	QL(1 EA daily); RX/OTC	A THRU Z SELECT 50+ MENS TABS 120 MG-6 MG-30 MCG-300 MCG-600 UNIT-100 MCG-1.7 MG-60 MCG-20 MG-300 MCG-3500 UNIT-10 MG-600 MCG-1.5 MG-15 MG-150 MCG-50 MG-2 MG-250 MG-80 MG-50 MCG-150 MCG-60 UNIT-20 MG-0.7 MG-5 MCG-4 MG-100 MCG-10 MCG-60 MCG-72 MG	C	QL(1 EA daily); RX/OTC
			A THRU Z SELECT ULTIMATE WOMEN TABS 100 MG-5 MG-30 MCG-400 MCG-800 UNIT-50 MCG-1.1 MG-50 MCG-14 MG-300 MCG-3500 UNIT-5 MG-8 MG-1.1 MG-15 MG-150 MCG-50 MG-80 MG-500 MG-50 MCG-150 MCG-35 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-50 MCG-72 MG-2 MG	C	QL(1 EA daily); RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
A THRU Z SELECT TABS 60 MG-3 MG-30 MCG-400 MCG-400 UNIT-25 MCG- 1.7 MG-20 MG-250 MCG- 3500 UNIT-10 MG-200 MG-300 MCG-1.5 MG-100 MG-15 MG-2 MG-80 MG- 150 MCG-150 MCG-75 MCG-45 UNIT-48 MG-5 MCG-2 MG-150 MCG-10 MCG-20 MCG-10 MCG-72 MG-2 MG, 60 MG-3 MG- 30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG- 2500 UNIT-10 MG-220 MG-300 MCG-1.5 MG-50 MG-11 MG-150 MCG-2 MG-80 MG-100 MCG-45 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG, 90 MG-3 MG-30 MCG-500 MCG-500 UNIT- 25 MCG-1.7 MG-30 MCG- 20 MG-250 MCG-2500 UNIT-10 MG-300 MCG- 1.5 MG-50 MG-11 MG-150 MCG-2 MG-80 MG-220 MG-150 MCG-45 MCG-50 UNIT-0.9 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG	C	QL(1 EA daily); RX/OTC	ABC COMPLETE MENS TABS	C	QL(1 EA daily); RX/OTC
			ABC COMPLETE SENIOR 50+ TABS	C	QL(1 EA daily); RX/OTC
			ABC COMPLETE SENIOR MENS 50+ TABS	C	QL(1 EA daily); RX/OTC
			ABC COMPLETE SENIOR WOMENS 50+ TABS	C	QL(1 EA daily); RX/OTC
			ABC COMPLETE WOMENS TABS	C	QL(1 EA daily); RX/OTC
			ACTICAL CAPS	C	QL(1 EA daily); RX/OTC
			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
			ADVANCED EYE HEALTH CAPS	C	QL(1 EA daily); RX/OTC
			AFLORA TABS	C	QL(1 EA daily); RX/OTC
			ALIVE CALCIUM BONE SUPPORT TABS	C	QL(1 EA daily); RX/OTC
			ALIVE DAILY ENERGY TABS	C	QL(1 EA daily); RX/OTC
			ALIVE DIABETIC MULTIVITAMIN TABS	C	QL(1 EA daily); RX/OTC
			ALIVE ENERGY 50+ TABS	C	QL(1 EA daily); RX/OTC
			ALIVE EVERYDAY IMMUNE HEALTH CAPS	C	QL(1 EA daily); RX/OTC
			ALIVE GARDEN GOODNESS TABS	C	QL(1 EA daily); RX/OTC
			ALIVE HAIR, SKIN & NAILS CAPS	C	QL(1 EA daily); RX/OTC
			ALIVE MAX 6 POTENCY CAPS	C	QL(1 EA daily); RX/OTC
			ALIVE MENS 50+ ULTRA TABS	C	QL(1 EA daily); RX/OTC
			ALIVE MENS 50+ TABS	C	QL(1 EA daily); RX/OTC
A THRU Z ULTIMATE MENS TABS 90 MG-2 MG-40 MCG-200 MCG- 600 UNIT-6 MCG-1.3 MG- 60 MCG-16 MG-3500 UNIT-15 MG-8 MG-600 MCG-1.2 MG-11 MG-150 MCG-100 MG-2 MG-210 MG-80 MG-50 MCG-150 MCG-45 UNIT-20 MG-0.9 MG-5 MCG-10 MCG-2.3 MG-100 MCG-10 MCG-35 MCG-72 MG	C	QL(1 EA daily); RX/OTC			
ABC COMPLETE ADULT TABS	C	QL(1 EA daily); RX/OTC			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ALIVE MENS COMPLETE MULTI TABS	C	QL(1 EA daily); RX/OTC	AZO HORMONAL HEALTH HAPPY CYCL TABS	C	QL(1 EA daily); RX/OTC
ALIVE MENS ULTRA TABS	C	QL(1 EA daily); RX/OTC	BACMIN TABS	C	QL(1 EA daily); RX/OTC
ALIVE ONCE DAILY WOMENS TABS	C	QL(1 EA daily); RX/OTC	BARIATRIC MULTIVITAMINS/IRON CAPS	C	QL(1 EA daily); RX/OTC
ALIVE ULTRA POTENCY ADULT TABS	C	QL(1 EA daily); RX/OTC	BARIATRIC MULTIVITAMINS CAPS	C	QL(1 EA daily); RX/OTC
ALIVE ULTRA POTENCY WOMENS 50+ TABS	C	QL(1 EA daily); RX/OTC	BARIATRIC MULTIVITAMINS TABS	C	QL(1 EA daily); RX/OTC
ALIVE WOMENS 50+ COMPLETE MV TABS	C	QL(1 EA daily); RX/OTC	BASIC AM TABS	C	QL(1 EA daily); RX/OTC
ALIVE WOMENS ENERGY TABS	C	QL(1 EA daily); RX/OTC	BASIC PM TABS	C	QL(1 EA daily); RX/OTC
ALPHA BETIC TABS	C	QL(1 EA daily); RX/OTC	BIO-35 GLUTEN-FREE CAPS	C	QL(1 EA daily); RX/OTC
AMORYN MOOD BOOSTER CAPS 10 MG-25 MG-20 MG-300 MCG-400 UNIT-15 MG-70 MCG-30 MCG-90 MG-18 MG	C	QL(1 EA daily); RX/OTC	BIO-35 IRON FREE CAPS	C	QL(1 EA daily); RX/OTC
ANTIOXIDANT A/C/E/SELENIUM TABS 200 MG-200 UNIT-25 MCG-10000 UNIT	C	QL(1 EA daily); RX/OTC	BIOCAL CAPS	C	QL(1 EA daily); RX/OTC
ANTIOXIDANT FORMULA/MINERALS CAPS 250 MG-7.5 MG-1 MG-10000 UNIT-200 UNIT-1.5 MG-15 MCG	C	QL(1 EA daily); RX/OTC	BIOCEL TABS 500 MG-25 MG-300 MCG-1 MG-200 UNIT-25 MG-25 MG-50 MG-5000 UNIT-25 MG-33 MG-125 MG-100 UNIT-60 MG-10 MG-50 MCG	C	QL(1 EA daily); RX/OTC
ANTIOXIDANT FORMULA TABS	C	QL(1 EA daily); RX/OTC	BIOTECT PLUS CAPS	C	QL(1 EA daily); RX/OTC
ANTIOXIDANT VITAMINS TABS 60 MG-30 UNIT-2 MG-40 MG-40 MCG-5000 UNIT	C	QL(1 EA daily); RX/OTC	BLOOD SUGAR MANAGER TABS	C	QL(1 EA daily); RX/OTC
APETIBEX CAPS	C	QL(1 EA daily); RX/OTC	BODY/HAIR/SKIN/NAILS CAPS 20 MG-0.667 MG-200 MCG-133.333 MCG-6.667 MG-0.5 MG-2 MCG-0.567 MG-166.667 MG-33.333 MG-5 MG-20 MG-3 MG-0.667 MG-33.333 MG-1.667 MG-3.333 MG-2000 UNIT-133.333 MG-66.667 MG-50 MCG-83.333 MG-10 UNIT	C	QL(1 EA daily); RX/OTC
APPE-CURB CAPS	C	QL(1 EA daily); RX/OTC	BONEUP 3 PER DAY CAPS	C	QL(1 EA daily); RX/OTC
AZO HORMONAL HEALTH CYCLE CARE TABS	C	QL(1 EA daily); RX/OTC			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits	
BONEUP VEGETARIAN TABS	C	QL(1 EA daily); RX/OTC	CENTRAVITES TABS 60 MG-2 MG-30 MCG-400 MCG-6 MCG-10 MG-1.7 MG-20 MG-1.5 MG-400 UNIT-18 MG-100 MG-3.5 MG-160 MCG-5 MCG-80 MG-2 MG-150 MCG-65 MCG-2 MG-10 MCG-15 MG-162 MG-150 MCG-30 UNIT-109 MG-20 MCG-10 MCG-5000 UNIT-25 MCG-72 MG	C	QL(1 EA daily); RX/OTC	
BONEUP CAPS	C	QL(1 EA daily); RX/OTC		CENTRUM CARDIO TABS	C	QL(1 EA daily); RX/OTC
BOOSTNOW IMMUNE SUPPORT CAPS	C	QL(1 EA daily); RX/OTC		CENTRUM MENOPAUSE HOT FLASH TABS	C	QL(1 EA daily); RX/OTC
B-PLEX PLUS TABS 500 MG-25 MG-0.15 MG-0.8 MG-50 MCG-25 MG-20 MG-100 MG-5000 UNIT-27 MG-20 MG-50 MG-22.5 MG-3 MG-5 MG-0.1 MG-30 UNIT	C	QL(1 EA daily); RX/OTC		CENTRUM MEN TABS	C	QL(1 EA daily); RX/OTC
CELEBRATE MULTI-COMplete 18 CAPS	C	QL(1 EA daily); RX/OTC		CENTRUM MINIS ADULTS 50+ TABS	C	QL(1 EA daily); RX/OTC
CELEBRATE MULTI-COMplete 36 CAPS	C	QL(1 EA daily); RX/OTC		CENTRUM MINIS MEN 50+ TABS	C	QL(1 EA daily); RX/OTC
CELEBRATE MULTI-COMplete 45 CAPS	C	QL(1 EA daily); RX/OTC		CENTRUM MINIS WOMEN 50+ TABS	C	QL(1 EA daily); RX/OTC
CELEBRATE MULTI-COMplete 60 CAPS	C	QL(1 EA daily); RX/OTC		CENTRUM MINIS WOMEN IMMUNE SUP TABS	C	QL(1 EA daily); RX/OTC
CENTAVITE A-Z COMPLETE-MINERAL TABS 90 MG-3 MG-35 MCG-0.4 MG-3 MG-9 MCG-10 MG-3.4 MG-30 MG-5000 UNIT-400 UNIT-30 UNIT-1250 UNIT-27 MG-100 MG-5 MG-15 MCG-7.5 MG-15 MCG-2 MG-15 MG-40 MG-150 MCG-31 MG-10 MCG-7.5 MG	C	QL(1 EA daily); RX/OTC		CENTRUM SILVER ULTRA WOMENS TABS	C	QL(1 EA daily); RX/OTC
CENTRAVITES 50 PLUS TABS	C	QL(1 EA daily); RX/OTC		CENTRUM SPECIALIST HEART TABS	C	QL(1 EA daily); RX/OTC
CENTRAVITES ADULTS TABS	C	QL(1 EA daily); RX/OTC		CENTRUM SPECIALIST IMMUNE TABS	C	QL(1 EA daily); RX/OTC
				CENTRUM SPECIALIST VISION TABS	C	QL(1 EA daily); RX/OTC
				CENTRUM ULTRA WOMENS TABS	C	QL(1 EA daily); RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CENTURY MATURE TABS 90 MG-3 MG-30 MCG-500 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-300 MCG-1.5 MG-11 MG-150 MCG-50 MG-80 MG-2 MG-220 MG-45 MCG-150 MCG-50 UNIT-110 MG-0.9 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG	C	QL(1 EA daily); RX/OTC	COMPANION TABS 100 MG-5 MG-30 MCG-30 UNIT-400 MCG-30 MCG-3500 UNIT-5 MG-100 MG-20 MG-10 MG-100 MG-5 MG-100 MG-15 MG-2 MG-250 MCG-2 MG-10 MCG-75 MCG-150 MCG-120 MCG-20 MCG	C	QL(1 EA daily); RX/OTC
CENTURY TABS 90 MG-2 MG-30 MCG-500 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-250 MCG-3500 UNIT-10 MG-18 MG-300 MCG-1.5 MG-11 MG-150 MCG-100 MG-2 MG-200 MG-80 MG-45 MCG-150 MCG-30 UNIT-109 MG-0.9 MG-5 MCG-10 MCG-2.3 MG-55 MCG-10 MCG-35 MCG-72 MG	C	QL(1 EA daily); RX/OTC	COMPETE TABS 90 MG-20.6 MG-0.4 MG-9 MCG-2.6 MG-30 MG-5000 UNIT-2 MG-400 UNIT-45 UNIT-27 MG-22.5 MG	C	QL(1 EA daily); RX/OTC
CEROVITE SENIOR TABS 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-300 MCG-1.5 MG-50 MG-11 MG-150 MCG-80 MG-220 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG-2 MG	C	QL(1 EA daily); RX/OTC	CORAL CALCIUM PLUS CAPS	C	QL(1 EA daily); RX/OTC
CERTAVITE SENIOR/ANTIOXIDANT TABS	C	QL(1 EA daily); RX/OTC	CULTURELLE PROBIOTIC MEN DAILY CAPS	C	QL(1 EA daily); RX/OTC
CERTAVITE SENIOR TABS	C	QL(1 EA daily); RX/OTC	CVS ADULT 50+ EYE HEALTH CAPS	C	QL(1 EA daily); RX/OTC
CERTAVITE/ANTIOXIDANTS TABS	C	QL(1 EA daily); RX/OTC	CVS DAILY MULTIPLE FOR MEN TABS 60 MG-3 MG-75 MCG-400 MCG-700 UNIT-18 MCG-1.7 MG-20 MCG-18 MG-3500 UNIT-16 MG-300 MCG-1.35 MG-140 MG-15 MG-2 MG-210 MG-22.5 UNIT-2 MG-120 MCG-110 MCG	C	QL(1 EA daily); RX/OTC
CHOICEFUL MULTIVITAMIN CAPS	C	QL(1 EA daily); RX/OTC	CVS DAILY MULTIPLE WOMEN 50+ TABS 120 MG-6 MG-30 MCG-400 MCG-1000 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-15 MG-500 MG-4.5 MG-50 MG-24 MG-90 MCG-150 MCG-30 UNIT-2.2 MG-4.2 MG-180 MCG-3500 UNIT-27 MCG	C	QL(1 EA daily); RX/OTC
CITRACAL +D3 TABS	C	QL(1 EA daily); RX/OTC	CVS DAILY MULTIV/MINERAL MENS TABS	C	QL(1 EA daily); RX/OTC
			CVS DAILY MULTIVITAMIN MENS TABS	C	QL(1 EA daily); RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CVS DAILY MULTIVITAMIN WOMENS TABS	C	QL(1 EA daily); RX/OTC	CVS SPECTRAVITE ADULT 50+ TABS	C	QL(1 EA daily); RX/OTC
CVS EYE HEALTH & LUTEIN TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG	C	QL(1 EA daily); RX/OTC	CVS SPECTRAVITE ADULTS TABS	C	QL(1 EA daily); RX/OTC
CVS EYE HEALTH ADULT 50+ CAPS	C	QL(1 EA daily); RX/OTC	CVS SPECTRAVITE ADVANCED TABS 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-3500 UNIT-10 MG-18 MG-1.5 MG-50 MG-11 MG-200 MG-80 MG-45 MCG-150 MCG-30 UNIT-20 MG-0.5 MG-5 MCG-10 MCG-2.3 MG-75 MCG-55 MCG-10 MCG-35 MCG-72 MG-2 MG, 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-3500 UNIT-10 MG-18 MG-1.5 MG-50 MG-11 MG-80 MG-200 MG-45 MCG-150 MCG-30 UNIT-20 MG-0.5 MG-5 MCG-10 MCG-2.3 MG-75 MCG-55 MCG-10 MCG-35 MCG-72 MG-2 MG	C	QL(1 EA daily); RX/OTC
CVS IMMUNE SUPPORT CAPS	C	QL(1 EA daily); RX/OTC			
CVS ONE DAILY ESSENTIAL TABS 60 MG-2 MG-0.4 MG-1.5 MG-400 UNIT-6 MCG-1.7 MG-20 MG-3000 UNIT-10 MG-45 MG-30 UNIT	C	QL(1 EA daily); RX/OTC			
CVS ONE DAILY MENS 50+ ADV TABS	C	QL(1 EA daily); RX/OTC			
CVS ONE DAILY MENS FORMULA TABS 60 MG-3 MG-75 MCG-400 MCG-700 UNIT-18 MCG-1.7 MG-20 MCG-18 MG-16 MG-300 MCG-1.35 MG-15 MG-2 MG-140 MG-210 MG-22.5 UNIT-2 MG-3500 UNIT-110 MCG-120 MCG	C	QL(1 EA daily); RX/OTC			
CVS ONE DAILY WOMENS 50+ ADV TABS	C	QL(1 EA daily); RX/OTC			
CVS ONE DAILY WOMENS FORMULA TABS 75 MG-1.7 MG-1000 MCG-400 MCG-25 MCG-6 MCG-1.3 MG-25 MCG-16 MG-700 MCG-5 MG-18 MG-380 MG-1.2 MG-8 MG-0.9 MG-150 MCG-7.5 MG-1.8 MG-25 MCG-27.5 MCG, 75 MG-1.7 MG-1000 MCG-400 MCG-25 MCG-6 MCG-1.3 MG-25 MCG-16 MG-700 MCG-5 MG-18 MG-380 MG-1.2 MG-8 MG-0.9 MG-7.5 MG-150 MCG-1.8 MG-25 MCG-27.5 MCG	C	QL(1 EA daily); RX/OTC			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CVS SPECTRAVITE MEN 50+ TABS 120 MG-30 MCG-300 MCG-1.5 MG-20 MG-6 MG-10 MG-1.7 MG-300 MCG-600 MCG-25 MCG-27 MG-75 MG-4 MG-50 MCG-5 MCG-80 MG-2 MG-60 MCG-0.5 MG-10 MCG-15 MG-210 MG-150 MCG-20 MG-21 MCG-1050 MCG-60 MCG-100 MCG-72 MG, 120 MG-6 MG-30 MCG-27 MG-300 MCG-25 MCG-100 MCG-1.7 MG-60 MCG-20 MG-300 MCG-1050 MCG-10 MG-600 MCG-1.5 MG-75 MG-15 MG-210 MG-80 MG-50 MCG-150 MCG-20 MG-0.5 MG-5 MCG-4 MG-21 MCG-10 MCG-60 MCG-72 MG-2 MG	C	QL(1 EA daily); RX/OTC	CVS SPECTRAVITE ULTRA MEN 50+ TABS	C	QL(1 EA daily); RX/OTC
			CVS SPECTRAVITE ULTRA MENS TABS	C	QL(1 EA daily); RX/OTC
			CVS SPECTRAVITE ULTRA WOMEN TABS	C	QL(1 EA daily); RX/OTC
			CVS SPECTRAVITE WOMEN 50+ TABS 100 MG-30 MCG-400 MCG-1.1 MG-14 MG-5 MG-5 MG-1.1 MG-300 MCG-25 MCG-17.5 MG-8 MG-100 MG-2.3 MG-50 MCG-5 MCG-80 MG-2 MG-52 MCG-0.5 MG-10 MCG-15 MG-300 MG-150 MCG-20 MG-22 MCG-1052 MCG-50 MCG-50 MCG-72 MG, 100 MG-5 MG-30 MCG-400 MCG-25 MCG-50 MCG-1.1 MG-50 MCG-14 MG-300 MCG-1052 MCG-5 MG-8 MG-1.1 MG-100 MG-15 MG-300 MG-80 MG-50 MCG-150 MCG-17.5 MG-20 MG-0.5 MG-5 MCG-2.3 MG-22 MCG-10 MCG-52 MCG-72 MG-2 MG	C	QL(1 EA daily); RX/OTC
CVS SPECTRAVITE MEN TABS 90 MG-2 MG-40 MCG-200 MCG-25 MCG-6 MCG-1.3 MG-60 MCG-16 MG-900 MCG-15 MG-8 MG-600 MCG-1.2 MG-100 MG-11 MG-210 MG-80 MG-50 MCG-150 MCG-45 MG-20 MG-0.9 MG-5 MCG-10 MCG-2.3 MG-100 MCG-10 MCG-35 MCG-72 MG-2 MG	C	QL(1 EA daily); RX/OTC	CVS SPECTRAVITE WOMENS SENIOR TABS 100 MG-5 MG-30 MCG-400 MCG-800 UNIT-50 MCG-1.1 MG-50 MCG-14 MG-300 MCG-3500 UNIT-5 MG-8 MG-1.1 MG-50 MG-15 MG-80 MG-150 MCG-500 MG-50 MCG-150 MCG-35 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-50 MCG-72 MG-2 MG	C	QL(1 EA daily); RX/OTC
CVS SPECTRAVITE SENIOR TABS 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-300 MCG-1.5 MG-50 MG-11 MG-80 MG-150 MCG-220 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG-2 MG	C	QL(1 EA daily); RX/OTC			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CVS SPECTRAVITE WOMEN TABS 75 MG-40 MCG-400 MCG-1.1 MG-14 MG-2 MG-15 MG-1.1 MG-25 MCG-15.8 MG-18 MG-100 MG-1.8 MG-50 MCG-80 MG-32 MCG-0.5 MG-8 MG-200 MG-150 MCG-20 MG-18 MCG-1050 MCG-50 MCG-6 MCG-72 MG	C	QL(1 EA daily); RX/OTC	DAILY MULTIPLE VITAMINS/MIN TABS 400 UNIT-60 MG-2 MG-30 MCG-400 MCG-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-1.5 MG-100 MG-10 MCG-130 MG-40 MG-150 MCG-30 UNIT-100 MG-15 MG-2 MG-2.5 MG-10 MCG-10 MCG	C	QL(1 EA daily); RX/OTC
CVS VISION HEALTH CAPS	C	QL(1 EA daily); RX/OTC	DAILY MULTIVITAMIN CAPS 2 MG-30 MCG-30 UNIT-200 MCG-2000 UNIT-6 MCG-10 MG-1.7 MG-100 MCG-20 MG-2 MG-30 MG-500 MCG-1 MG-1.5 MG-15 MG-40 MG-120 MG-2 MG-5000 UNIT-75 MCG-150 MCG-120 MCG-70 MCG	C	QL(1 EA daily); RX/OTC
CVS WOMENS ACTIVE DAILY TABS 60 MG-3.2 MG-30 MCG-400 MCG-800 UNIT-9.5 MCG-2.7 MG-25 MCG-10 MG-2500 UNIT-5 MG-18 MG-2.4 MG-50 MG-15 MG-2 MG-300 MG-30 UNIT-2 MG-120 MCG-20 MCG-180 MG	C	QL(1 EA daily); RX/OTC	DAYAVITE TABS	C	QL(1 EA daily); RX/OTC
DAILY BETIC TABS 60 MG-2.5 MG-75 MCG-200 MCG-50 MG-200 UNIT-5 MCG-2500 UNIT-1.7 MG-20 MG-250 MCG-10 MG-100 MG-1.5 MG-100 MG-30 UNIT-50 MG-75 MCG-7.5 MG-2.5 MG-25 MCG-50 MCG-100 MCG	C	QL(1 EA daily); RX/OTC	DECUBI-VITE CAPS	C	QL(1 EA daily); RX/OTC
DAILY COMBO MULTI VITAMINS TABS 400 UNIT-60 MG-2 MG-0.4 MG-20 MG-6 MCG-10 MG-1.7 MG-1.5 MG-30 UNIT-27 MG-15 MG-450 MG-5000 UNIT	C	QL(1 EA daily); RX/OTC	DEKAS PLUS OCEAN CAPS	C	QL(1 EA daily); RX/OTC
			DEKAS PLUS CAPS	C	QL(1 EA daily); RX/OTC
			DEPLIN MA CAPS	C	QL(1 EA daily); RX/OTC
			DEPLINPRO MOOD HEALTH CAPS	C	QL(1 EA daily); RX/OTC
			DERMACINRX MULTITAM TABS	C	QL(1 EA daily); RX/OTC
			DERMACINRX RIBOTIN-E TABS	C	QL(1 EA daily); RX/OTC
			DERMACINRX ZINTREXYL-C TABS	C	QL(1 EA daily); RX/OTC
			DERMAVITE TABS	C	QL(1 EA daily); RX/OTC
			DEXATRAN CAPS	C	QL(1 EA daily); RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
DIABETES HEALTH FORMULA TABS 90 MG-3 MG-300 MCG-500 MCG-600 UNIT-30 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-1.5 MG-1.5 MG-50 MG-150 MCG-220 MG-80 MG-2 MG-45 MCG-150 MCG-50 UNIT-110 MG-5 MCG-2.3 MG-35 MCG-10 MCG-600 MCG-72 MG-12 MG, 90 MG-3 MG-300 MCG-500 MCG-600 UNIT-30 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-1.5 MG-1.5 MG-50 MG-45 MCG-5 MCG-150 MCG-10 MCG-220 MG-80 MG-2 MG-150 MCG-50 UNIT-110 MG-35 MCG-2.3 MG-200 MCG-72 MG-12 MG	C	QL(1 EA daily); RX/OTC	EQ COMPLETE MULTIVIT ADULT 50+ TABS 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-220 MG-300 MCG-1.5 MG-11 MG-150 MCG-50 UNIT-50 MG-80 MG-45 MCG-150 MCG-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG-2 MG, 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-220 MG-300 MCG-1.5 MG-11 MG-150 MCG-50 UNIT-50 MG-80 MG-45 MCG-150 MCG-20 MG-0.5 MG-5 MCG-2.3 MG-45 MCG-55 MCG-10 MCG-72 MG-2 MG	C	QL(1 EA daily); RX/OTC
DIALYVITE 800/ULTRA D TABS 80 MG-10 MG-300 MCG-800 MCG-2000 UNIT-6 MCG-10 MG-1.7 MG-20 MG-1.5 MG-15 MG-30 UNIT-70 MCG	C	QL(1 EA daily); RX/OTC	EQ COMPLETE MULTIVITAMIN-ADULT TABS	C	QL(1 EA daily); RX/OTC
DIALYVITE SUPREME D TABS	C	QL(1 EA daily); RX/OTC	EQ ONE DAILY MENS 50+ TABS	C	QL(1 EA daily); RX/OTC
DIATROL TABS	C	QL(1 EA daily); RX/OTC	EQ ONE DAILY MENS HEALTH TABS	C	QL(1 EA daily); RX/OTC
DRY EYE FORMULA CAPS 33.333 MG-3.333 MG-16.667 UNIT-6.667 MG-133.333 MG-166.667 MG	C	QL(1 EA daily); RX/OTC	EQ ONE DAILY WOMENS 50+ TABS	C	QL(1 EA daily); RX/OTC
			EQ ONE DAILY WOMENS HEALTH TABS	C	QL(1 EA daily); RX/OTC
			EQ VISION FORMULA 50+ CAPS 150 MG-30 UNIT-5 MG-1 MG-1 MG-9 MG-90 MG-160 MG-250 MG	C	QL(1 EA daily); RX/OTC
			EQL CENTURY MATURE ADULTS 50+ TABS	C	QL(1 EA daily); RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
EQL CENTURY MATURE MEN 50+ TABS 120 MG-6 MG-30 MCG-300 MCG-600 UNIT-100 MCG-10 MG-1.7 MG-60 MCG-20 MG-300 MCG-3500 UNIT-600 MCG-1.5 MG-15 MG-0.7 MG-50 MG-5 MCG-250 MG-80 MG-15 MG-50 MCG-150 MCG-20 MG-4 MG-60 UNIT-100 MCG-72 MG-10 MCG-60 MCG-150 MCG	C	QL(1 EA daily); RX/OTC	EQL CENTURY TABS 90 MG-2 MG-30 MCG-500 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-250 MCG-3500 UNIT-10 MG-18 MG-300 MCG-1.5 MG-11 MG-150 MCG-100 MG-80 MG-200 MG-45 MCG-150 MCG-30 UNIT-109 MG-0.9 MG-5 MCG-10 MCG-2.3 MG-55 MCG-10 MCG-35 MCG-72 MG-2 MG	C	QL(1 EA daily); RX/OTC
EQL CENTURY MATURE WOMEN 50+ TABS 100 MG-5 MG-30 MCG-400 MCG-800 UNIT-50 MCG-5 MG-1.1 MG-50 MCG-14 MG-300 MCG-3500 UNIT-8 MG-1.1 MG-15 MG-0.5 MG-50 MG-5 MCG-500 MG-80 MG-15 MG-50 MCG-150 MCG-20 MG-2.3 MG-35 UNIT-55 MCG-72 MG-10 MCG-50 MCG-150 MCG	C	QL(1 EA daily); RX/OTC	EQL ONE DAILY MENS 50+ ADVANCE TABS 120 MG-6 MG-30 MCG-400 MCG-700 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-3500 UNIT-15 MG-120 MG-370 MCG-4.5 MG-24 MG-2.2 MG-110 MG-90 MCG-150 MCG-25.5 UNIT-4.2 MG-180 MCG-117 MCG	C	QL(1 EA daily); RX/OTC
EQL CENTURY MATURE TABS 90 MG-3 MG-30 MCG-500 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-300 MCG-1.5 MG-11 MG-150 MCG-50 MG-2 MG-220 MG-80 MG-45 MCG-150 MCG-50 UNIT-110 MG-0.9 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG	C	QL(1 EA daily); RX/OTC	EQL ONE DAILY MENS HEALTH TABS 400 UNIT-90 MG-3 MG-30 MCG-400 MCG-18 MCG-1.7 MG-20 MCG-16 MG-3500 UNIT-5 MG-210 MG-0.6 MG-1.2 MG-15 MG-2 MG-120 MG-100 MG-45 UNIT-2 MG-120 MCG-105 MCG	C	QL(1 EA daily); RX/OTC
EQL CENTURY MENS TABS	C	QL(1 EA daily); RX/OTC	EQL ONE DAILY MENS TABS	C	QL(1 EA daily); RX/OTC
EQL CENTURY WOMENS TABS	C	QL(1 EA daily); RX/OTC	EQL ONE DAILY WOMENS 50+ ADV TABS 120 MG-6 MG-30 MCG-400 MCG-1000 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-3500 UNIT-15 MG-500 MG-4.5 MG-24 MG-2.2 MG-50 MG-90 MCG-150 MCG-30 UNIT-4.2 MG-180 MCG-27 MCG	C	QL(1 EA daily); RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
EQL VISION FORMULA TABS 200 MG-40 MG-2 MG-1000 UNIT-60 UNIT- 55 MCG	C	QL(1 EA daily); RX/OTC	FITNESS TABS FOR MEN AM/PM TABS	C	QL(1 EA daily); RX/OTC
ESSENTIAL BALANCE TABS 120 MG-2 MG-30 MCG-400 MCG-400 UNIT- 6 MCG-1.7 MG-250 MCG- 3000 UNIT-10 MG-9 MG- 1.5 MG-15 MG-2 MG-150 MCG-20 MG-100 MG-40 MG-2 MG-100 MG-25 MCG-150 MCG-50 UNIT- 77 MG-5 MCG-10 MCG-2 MG-120 MCG-25 MCG-25 MCG-10 MCG-36 MG	C	QL(1 EA daily); RX/OTC	FITNESS TABS FOR WOMEN AM/PM TABS	C	QL(1 EA daily); RX/OTC
			FLORRAVITE TABS	C	QL(1 EA daily); RX/OTC
			FLORRAXYL TABS	C	QL(1 EA daily); RX/OTC
			FOLAGENT DHA CAPS	C	QL(1 EA daily); RX/OTC
			FOLAMAX TABS	C	QL(1 EA daily); RX/OTC
			FOLAMED DHA CAPS	C	QL(1 EA daily); RX/OTC
			FOLAPRIME TABS	C	QL(1 EA daily); RX/OTC
			FOLASYNC DHA CAPS	C	QL(1 EA daily); RX/OTC
ESSENTIA TABS 100 MG-6 MG-30 MCG-400 MCG-2000 UNIT-25 MCG- 3000 UNIT-10 MG-100 MCG-100 MG-25 MG-10 MG-18 MG-100 MG-10 MG-100 MG-15 MG-2 MG- 250 MCG-60 UNIT-2 MG- 10 MCG-75 MCG-150 MCG-70 MCG-100 MCG	C	QL(1 EA daily); RX/OTC	FOLIFLEX TABS	C	QL(1 EA daily); RX/OTC
			FOLITIN-Z TABS	C	QL(1 EA daily); RX/OTC
			FREEDAVITE TABS	C	QL(1 EA daily); RX/OTC
			FT CENTURY 50+ TABS	C	QL(1 EA daily); RX/OTC
			FT CENTURY ADULTS TABS	C	QL(1 EA daily); RX/OTC
			FT CENTURY MEN 50+ TABS	C	QL(1 EA daily); RX/OTC
			FT CENTURY MEN TABS	C	QL(1 EA daily); RX/OTC
			FT CENTURY WOMEN 50+ TABS	C	QL(1 EA daily); RX/OTC
			FT CENTURY WOMEN TABS	C	QL(1 EA daily); RX/OTC
			FT EYE HEALTH CAPS	C	QL(1 EA daily); RX/OTC
ESTROVEN MENOPAUSE SUPPLEMENT TABS	C	QL(1 EA daily); RX/OTC	FT EYE HEALTH TABS	C	QL(1 EA daily); RX/OTC
EYE HEALTH + LUTEIN TABS	C	QL(1 EA daily); RX/OTC	FT HAIR SKIN & NAILS EXTRA STR TABS	C	QL(1 EA daily); RX/OTC
EYE HEALTH AREDS 2 CAPS	C	QL(1 EA daily); RX/OTC	FT ONE DAILY MENS 50+ TABS	C	QL(1 EA daily); RX/OTC
EYE HEALTH CAPS	C	QL(1 EA daily); RX/OTC	FT ONE DAILY MENS TABS	C	QL(1 EA daily); RX/OTC
EYE MULTIVITAMIN/SODIUM TABS	C	QL(1 EA daily); RX/OTC			
EYE VITAMINS CAPS 60 MG-6 MG-15 MG-2 MG-30 UNIT-22 MG	C	QL(1 EA daily); RX/OTC			
EYE-VITES TABS 60 MG- 40 MG-2 MG-5000 UNIT- 30 UNIT-40 MCG	C	QL(1 EA daily); RX/OTC			
FINAZOL TABS	C	QL(1 EA daily); RX/OTC			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits	
FT ONE DAILY WOMENS 50+ TABS	C	QL(1 EA daily); RX/OTC	GNP CENTURY MATURE WOMEN'S 50+ TABS 100 MG-5 MG-30 MCG-400 MCG-25 MCG-50 MCG-1.1 MG-50 MCG-14 MG-300 MCG-5 MG-8 MG-1.1 MG-100 MG-15 MG-80 MG-300 MG-50 MCG-150 MCG-15.8 MG-20 MG-0.5 MG-2.3 MG-1050 MCG-22 MCG-52 MCG-72 MG	C	QL(1 EA daily); RX/OTC	
FT ONE DAILY WOMENS TABS	C	QL(1 EA daily); RX/OTC		GNP HAIR/SKIN/NAILS TABS 50 MG-3.5 MG-6.5 MG-25 MCG-25 MCG-7.5 MG-7.2 MG-50 UNIT-25 MCG-2500 UNIT-5 MG-25 MG-10 MG-10 MG-15 MG-3.3 MG-10 MG-5 MG-20 MG-0.5 MG-150 MCG-25 UNIT-54 MG-73 MG-897 MCG-10 MG-50 MG-0.6 MG-10 MG	C	QL(1 EA daily); RX/OTC
GERI-FREEDA SENIOR FORMULA TABS	C	QL(1 EA daily); RX/OTC			GNP HEALTHY EYES SUPERVISION 2 CAPS 250 MG-5 MG-1 MG-40 MG-1 MG-200 UNIT	C
GERIVITE COMPLETE TABS 60 MG-2 MG-45 MCG-400 MCG-20 MG-1.5 MG-6 MCG-10 MG-1.7 MG-400 UNIT-30 UNIT-18 MG-100 MG-2.5 MG-15 MCG-5 MCG-37.5 MG-80 MCG-15 MCG-2 MG-10 MCG-15 MG-162 MG-150 MCG-125 MG-15 MCG-10 MCG-6000 UNIT-25 MCG-34 MG	C	QL(1 EA daily); RX/OTC	GNP HEALTHY EYES TABS 200 MG-2 MG-27 MG-2 MG-40 MG-185 MG-55 MCG-300 MCG, 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG	C	QL(1 EA daily); RX/OTC	
GNP CENTURY ADULT FORMULA TABS 60 MG-30 MCG-400 MCG-1.5 MG-20 MG-2 MG-10 MG-1.7 MG-25 MCG-13.5 MG-18 MG-50 MG-2.3 MG-45 MCG-80 MG-35 MCG-0.5 MG-11 MG-200 MG-150 MCG-20 MG-55 MCG-1050 MCG-25 MCG-6 MCG-72 MG	C	QL(1 EA daily); RX/OTC				
GNP CENTURY ADULTS MEN TABS	C	QL(1 EA daily); RX/OTC				
GNP CENTURY ADULTS WOMEN TABS	C	QL(1 EA daily); RX/OTC				
GNP CENTURY ADULT TABS	C	QL(1 EA daily); RX/OTC				
GNP CENTURY MATURE ADULTS 50+ TABS	C	QL(1 EA daily); RX/OTC				
GNP CENTURY MATURE MEN'S 50+ TABS	C	QL(1 EA daily); RX/OTC				

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
GNP MEGA MULTI FOR MEN TABS 150 MG-125 MCG-200 MCG-15 MG-15 MG-2.5 MG-5 MG-5 MG-15 MG-15 MG-15 MG-5 MG-250 MCG-5 MG-175 MCG-2.5 MCG-33.5 MG-25 MG-50 MG-2.5 MG-25 MCG-1 MG-12.5 MG-105 MG-75 MCG-50 MCG-25 MG-1500 MCG-37.5 MCG-12.5 MG-15 MCG-5 MCG-35 MG-15 MG-35 MG-35 MG-15 MG-25 MG-25 MG, 150 MG-25 MG-15 MG-125 MCG-50 UNIT-200 MCG-2.5 MG-5 MG-100 UNIT-15 MCG-15 MG-37.5 MCG-5 MG-5 MG-15 MG-250 MCG-15 MG-5 MG-175 MCG-15 MG-50 MG-12.5 MG-1 MG-100 MG-2.5 MG-5000 UNIT-75 MCG-25 MG-12.5 MG-25 MCG-5 MCG-15 MG-15 MG-35 MG-35 MG-50 MCG-35 MG-25 MG-25 MG	C	QL(1 EA daily); RX/OTC	GNP ONE DAILY MENS HEALTH 50+ TABS 120 MG-6 MG-30 MCG-400 MCG-400 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-2500 UNIT-15 MG-120 MG-600 MCG-4.5 MG-100 MG-22.5 MG-40 MG-90 MCG-150 MCG-33 UNIT-2 MG-180 MCG-4 MG-105 MCG-120 MG	C	QL(1 EA daily); RX/OTC
			GNP ONE DAILY MENS/LYCOPENE TABS 90 MG-3 MG-30 MCG-400 MCG-400 UNIT-18 MCG-1.7 MG-20 MCG-16 MG-3500 UNIT-5 MG-210 MG-600 MCG-1.2 MG-120 MG-15 MG-2 MG-100 MG-45 UNIT-2 MG-120 MCG-105 MCG	C	QL(1 EA daily); RX/OTC
			GNP ONE DAILY WOMENS 50+ TABS 60 MG-6 MG-30 MCG-400 MCG-800 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-15 MG-405 MG-4.5 MG-50 MG-22.5 MG-90 MCG-150 MCG-33 UNIT-2 MG-180 MCG-4 MG-2500 UNIT-20 MCG-120 MG	C	QL(1 EA daily); RX/OTC
GNP MEGA MULTI FOR WOMEN TABS 100 MG-40 MG-40 MCG-50 UNIT-200 MCG-200 UNIT-40 MCG-5000 UNIT-40 MG-37.5 MCG-5 MG-10 MCG-40 MG-250 MCG-40 MG-5 MG-250 MG-40 MG-100 MG-7.5 MG-12.5 MG-13.5 MG-2.5 MG-25 MCG-1 MG-50 MCG-1 MG-50 MCG-75 MCG-12.5 MG-1 MG-1 MG-25 MG	C	QL(1 EA daily); RX/OTC	GNP ONE DAILY WOMENS TABS 60 MG-120 MG-3.2 MG-30 MCG-400 MCG-800 UNIT-9.5 MCG-2.7 MG-25 MCG-10 MG-2500 UNIT-5 MG-18 MG-300 MG-2.4 MG-50 MG-15 MG-22.5 UNIT-2 MG-2 MG-120 MCG-20 MCG-50 MG	C	QL(1 EA daily); RX/OTC
GNP ONE DAILY MAXIMUM TABS	C	QL(1 EA daily); RX/OTC	GNP THERAPEUTIC-M TABS	C	QL(1 EA daily); RX/OTC
			HAIR SKIN & NAILS ADVANCED TABS	C	QL(1 EA daily); RX/OTC
			HAIR SKIN & NAILS TABS	C	QL(1 EA daily); RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
HAIR SKIN AND NAILS FORMULA TABS 30 MG-2.5 MG-2500 MCG-100 MCG-5 MG-2.5 MG-500 UNIT-4 MCG-2500 UNIT-2.5 MG-5 MG-15 MG-12.5 MG-7.5 MG-5 MG-4 MG-130 MG-3.75 MG-1 MG-25 MG-7.5 UNIT-64 MG-15 MG-5 MG-50 MG-1.5 MG-25 MG	C	QL(1 EA daily); RX/OTC	HI-KOVITE 2-PART FORMULA TABS 400 UNIT-200 MG-10 MG-30 MCG-400 MCG-10 MG-10 MCG-5000 UNIT-10 MG-10 MG-100 MG-10 MG-9 MG-0.5 MG-7.5 MG-35 MG-60 MG-30 UNIT-1 MG-120 MG-75 MCG-17.5 MCG-10 MG-10 MG	C	QL(1 EA daily); RX/OTC
HAIR SKIN NAILS CAPS 30 MG-1.667 MG-1666.667 MCG-10 UNIT-133.333 MCG-666.667 UNIT-2.667 MCG-1666.667 UNIT-1.667 MG-8.333 MG-5 MG-3.333 MG-1.667 MG-2.5 MG-10 MG-0.333 MG-10 MG-1 MG-20 MG-8.333 MG-4.167 MCG	C	QL(1 EA daily); RX/OTC	HM COMPLETE MEN TABS	C	QL(1 EA daily); RX/OTC
HAIR/SKIN/NAILS CAPS	C	QL(1 EA daily); RX/OTC	HYLAZINC TABS	C	QL(1 EA daily); RX/OTC
HAIR/SKIN/NAILS TABS	C	QL(1 EA daily); RX/OTC	ICAPS AREDS FORMULA TABS	C	QL(1 EA daily); RX/OTC
HEAD CARE PROACTIVE HEALTH TABS	C	QL(1 EA daily); RX/OTC	ICAPS LUTEIN & OMEGA-3 CAPS 240 MCG-1.2 MG-16 MG-1.3 MG-2.4 MCG-1.3 MG-10 MG-600 MCG-45 MG-2 MG-10 UNIT-2.3 MG-0.9 MG-7 MG-1 MG-34 MCG-280 MG	C	QL(1 EA daily); RX/OTC
HEALTHY EYES SUPERVISION 2 CAPS	C	QL(1 EA daily); RX/OTC	ICAPS MV TABS 128 MG-7.5 MCG-100 MCG-0.5 MG-100 UNIT-1.5 MCG-2.5 MG-6.25 MCG-2.5 MG-1.67 MG-2.5 MG-0.83 MG-83.25 MG-0.075 MG-0.38 MG-25 MG-21.15 MG-0.9 MG-18.75 MCG-30 MCG-37.5 MCG-107.5 UNIT-35 MG-0.5 MG-10 MCG	C	QL(1 EA daily); RX/OTC
HEALTHY EYES/LUTEIN-ZEAXANTHIN CAPS 60 MG-13.5 MG-6 MG-15 MG	C	QL(1 EA daily); RX/OTC	ICAPS CAPS 226 MG-34.8 MG-0.8 MG-14320 UNIT-200 MG	C	QL(1 EA daily); RX/OTC
HEALTHY EYES TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG	C	QL(1 EA daily); RX/OTC	IMMUNE ESSENTIALS DAILY CAPS	C	QL(1 EA daily); RX/OTC
HIGH POTENCY MULTIVIT/FA TABS	C	QL(1 EA daily); RX/OTC	I-VITE TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG	C	QL(1 EA daily); RX/OTC
			JOINT HEALTH & BONE STRENGTH TABS	C	QL(1 EA daily); RX/OTC
			KEYFOLIC TABS	C	QL(1 EA daily); RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
KEYLOSA TABS	C	QL(1 EA daily); RX/OTC	KP MENS 50+ DAILY FORMULA TABS 120 MG- 6 MG-30 MCG-400 MCG- 700 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-3500 UNIT-15 MG-120 MG-370 MCG-4.5 MG-110 MG-24 MG-90 MCG-150 MCG-30 UNIT-2.2 MG-4.2 MG-180 MCG-117 MCG, 60 MG-6 MG-30 MCG-400 MCG- 700 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-2500 UNIT-15 MG-300 MG-4.5 MG-100 MG-22.5 MG-120 MG-90 MCG-150 MCG- 22.5 UNIT-2 MG-4 MG- 180 MCG-110 MCG-120 MG	C	QL(1 EA daily); RX/OTC
KP ADULTS 50+ DAILY FORMULA TABS 60 MG-3 MG-30 MCG-400 MCG- 500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG- 300 MCG-1.5 MG-50 MG- 11 MG-80 MG-150 MCG- 220 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG-2 MG, 60 MG-3 MG- 30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG- 2500 UNIT-10 MG-300 MCG-1.5 MG-50 MG-11 MG-80 MG-150 MCG-220 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MG-72 MG-2 MG	C	QL(1 EA daily); RX/OTC	KP MENS DAILY FORMULA TABS 60 MG-3 MG-30 MCG-400 MCG- 700 UNIT-18 MCG-1.7 MG-20 MCG-16 MG-3500 UNIT-5 MG-300 MCG-1.2 MG-120 MG-15 MG-2 MG- 100 MG-210 MG-22.5 UNIT-2 MG-120 MCG-110 MCG, 60 MG-3 MG-75 MCG-400 MCG-700 UNIT- 18 MCG-1.7 MG-20 MCG- 18 MG-3500 UNIT-16 MG- 210 MG-300 MCG-1.35 MG-140 MG-15 MG-2 MG- 22.5 UNIT-2 MG-120 MCG-110 MCG	C	QL(1 EA daily); RX/OTC
KP ADULTS DAILY FORMULA TABS 60 MG-2 MG-30 MCG-400 MCG- 400 UNIT-6 MCG-1.7 MG- 25 MCG-20 MG-3500 UNIT-10 MG-18 MG-1.5 MG-50 MG-11 MG-80 MG- 75 MCG-200 MG-45 MCG-150 MCG-30 UNIT- 20 MG-0.5 MG-5 MCG-10 MCG-2.3 MG-55 MCG-10 MCG-35 MCG-72 MG-2 MG, 60 MG-2 MG-30 MCG-400 UNIT-1.7 MG- 25 MCG-20 MG-3500 UNIT-10 MG-18 MG-1.5 MG-50 MG-11 MG-80 MG- 200 MG-45 MCG-150 MCG-30 UNIT-20 MG-0.5 MG-5 MCG-10 MCG-2.3 MG-75 MCG-55 MCG-10 MCG-35 MG-72 MG-2 MG	C	QL(1 EA daily); RX/OTC	KP VISION FORMULA/LUTEIN TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT- 55 MCG	C	QL(1 EA daily); RX/OTC
			KP VISION FORMULA TABS 60 MG-40 MG-1000 UNIT-30 UNIT-2 MG-40 MCG	C	QL(1 EA daily); RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
KP WOMENS 50+ DAILY FORMULA TABS 120 MG-6 MG-30 MCG-400 MCG-1000 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-3500 UNIT-10 MG-500 MG-4.5 MG-50 MG-24 MG-2.2 MG-90 MCG-150 MCG-30 UNIT-4.2 MG-180 MCG-27 MCG, 60 MG-6 MG-30 MCG-400 MCG-1000 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-2500 UNIT-15 MG-4.5 MG-50 MG-22.5 MG-500 MG-90 MCG-150 MCG-22.5 UNIT-2 MG-4 MG-180 MCG-20 MCG-120 MG	C	QL(1 EA daily); RX/OTC	LYSIPLEX PLUS TABS 166.667 MG-333.333 MG-16.667 MG-50 MCG-333.333 MCG-16.667 MG-133.333 MG-16.667 MG-133.333 UNIT-16.667 MCG-133.333 MG-66.667 MG-16.667 MG-5 MG-1666.667 UNIT-66.667 MG-5 MG-66.667 UNIT-5 MCG-26.667 MG-3.333 MG-1.667 MG-0.667 MG-33.333 MCG	C	QL(1 EA daily); RX/OTC
KP WOMENS DAILY FORMULA TABS 60 MG-2 MG-30 MCG-400 MCG-1000 UNIT-6 MCG-1.7 MG-25 MCG-10 MG-2500 UNIT-5 MG-18 MG-1.5 MG-50 MG-15 MG-500 MG-22.5 UNIT-2 MG-2 MG-120 MCG-20 MCG, 60 MG-2 MG-30 MCG-400 MCG-1000 UNIT-6 MCG-1.7 MG-25 MCG-10 MG-2500 UNIT-5 MG-18 MG-500 MG-1.6 MG-50 MG-15 MG-22.5 UNIT-2 MG-2 MG-120 MCG-20 MCG	C	QL(1 EA daily); RX/OTC	MACULAR HEALTH FORMULA CAPS 250 MG-10 MG-100 MCG-10 MG-500 UNIT-5 MG-5 MG-1 MG-1 MG-20 MG-25 MCG-200 UNIT-7.5 MG-10 MG	C	QL(1 EA daily); RX/OTC
K-PAX IMMUNE PROFESSIONAL ST TABS	C	QL(1 EA daily); RX/OTC	MACUVITE EYE CARE TABS 113 MG-17.4 MG-0.4 MG-100 UNIT-7160 UNIT	C	QL(1 EA daily); RX/OTC
LIVER DETOX TABS	C	QL(1 EA daily); RX/OTC	MACUVITE TABS 60 MG-40 MG-2 MG-40 MCG-30 UNIT-5000 UNIT	C	QL(1 EA daily); RX/OTC
LUTEIN-ZEAXANTHIN TABS 60 MG-5 MG-1 MG-15 MG-1 MG-750 MCG-20 MG	C	QL(1 EA daily); RX/OTC			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MAXIMUM DAILY GREEN TABS 333.333 MG-8.333 MG-16.666 MCG-133.333 MCG-8.333 MG-8.333 MG-133.333 UNIT-8.333 MCG-8.333 MG-8.333 MG-8.333 MG-8.333 MG-8.333 MG-8.333 MG-6.666 MG-8.333 MG-1.333 MG-333.333 MG-83.333 UNIT-33.333 MG-5000 UNIT-5 MG-33.333 MG-1.333 MG-16.666 MCG-20 MG-0.333 MG-33.333 MCG-0.333 MG-5 MG-83.333 MG-50 MCG-10 MG-25 MCG-3.333 MG-33.333 MG-8.333 MG-1.666 MG-6.666 MG-6.666 MG-1.666 MG-0.833 MG-11.666 MG-3.333 MG-1.666 MG-33.333 MG-3.333 MG-3.333 MG-3.333 MG-16.666 MG-33.333 MG-33.333 MG-3.333 MG-3.333 MG-8.333 MG	C	QL(1 EA daily); RX/OTC	MEIJER ADVANCED FORMULA TABS 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-250 MCG-3500 UNIT-10 MG-150 MCG-300 MCG-1.5 MG-15 MG-150 MCG-100 MG-162 MG-80 MG-75 MCG-30 UNIT-10 MCG-2 MG-120 MCG-20 MCG-10 MCG-72 MG-2 MG, 60 MG-3 MG-30 MCG-400 MCG-400 UNIT-25 MCG-1.7 MG-10 MCG-20 MG-250 MCG-3500 UNIT-10 MG-300 MCG-1.5 MG-15 MG-2 MG-150 MCG-100 MG-200 MG-80 MG-75 MCG-150 MCG-45 UNIT-48 MG-5 MCG-2 MG-150 MCG-20 MCG-10 MCG-72 MG-2 MG	C	QL(1 EA daily); RX/OTC
MEDI TAB TABS	C	QL(1 EA daily); RX/OTC	MENATROL CAPS	C	QL(1 EA daily); RX/OTC
MEGA MULTI FOR WOMEN TABS	C	QL(1 EA daily); RX/OTC	MENS 50+ ADVANCED CAPS	C	QL(1 EA daily); RX/OTC
MEGA MULTI MEN TABS	C	QL(1 EA daily); RX/OTC	MENS 50+ MULTIVITAMIN TABS	C	QL(1 EA daily); RX/OTC
MEGAVITE FRUITS & VEGGIES TABS	C	QL(1 EA daily); RX/OTC	MENS LIFE PACK TABS 300 MCG-200 UNIT-10 MG-10 MG-9 MG-10 MG-2.5 MG-15 MG-1 MG-50 MG-11.25 MG-1 MG-2500 UNIT-15 UNIT-75 MG-37.5 MCG-2.5 MG-2.5 MG-12.5 MCG, 400 UNIT-10 MG-10 MG-5000 UNIT-18 MG-10 MG-5 MG-30 MG-2 MG-100 MG-22.5 MG-2 MG-150 MG-30 UNIT-150 MG-75 MCG-5 MG-5 MG-25 MCG	C	QL(1 EA daily); RX/OTC
MEGAVITE GOLDEN YEARS 55+ TABS	C	QL(1 EA daily); RX/OTC	MENS MULTI HEALTH FORMULA TABS	C	QL(1 EA daily); RX/OTC
			MENS MULTIVITAMIN TABS	C	QL(1 EA daily); RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MOOD FOOD ES CAPS	C	QL(1 EA daily); RX/OTC	MULTI FOR HER 50+ TABS 180 MG-6 MG-30 MCG-400 MCG-1000 UNIT-25 MCG-10 MG-1.7 MG-80 MCG-1.5 MG-15 MG-20 MG-100 MG-120 MCG-2 MG-200 MG-150 MCG-75 MCG-4 MG-60 UNIT-2500 UNIT-70 MCG	C	QL(1 EA daily); RX/OTC
MOOD FOOD CAPS	C	QL(1 EA daily); RX/OTC		C	QL(1 EA daily); RX/OTC
MULTI COMPLETE/IRON TABS 180 MG-2 MG-30 MG-400 MCG-1000 UNIT- 6 MCG-1.7 MG-80 MCG- 20 MG-2500 UNIT-10 MG- 18 MG-162 MG-1.5 MG-15 MG-100 MG-75 MCG-150 MCG-50 UNIT-2 MG-4 MG-120 MCG-70 MCG	C	QL(1 EA daily); RX/OTC	MULTI FOR HER CAPS 60 MG-2 MG-30 MCG-600 MCG-1000 UNIT-6 MCG- 1.7 MG-40 MCG-20 MG- 10 MG-18 MG-1.5 MG-40 MG-15 MG-2 MG-2500 UNIT-100 MG-45 MCG- 150 MCG-50 UNIT-4 MG- 120 MCG-20 MCG, 60 MG-2 MG-30 MCG-600 MCG-1000 UNIT-6 MCG- 1.7 MG-40 MCG-20 MG- 10 MG-18 MG-100 MG-1.5 MG-40 MG-15 MG-2 MG- 2500 UNIT-45 MCG-150 MCG-50 UNIT-4 MG-120 MCG-20 MCG	C	QL(1 EA daily); RX/OTC
MULTI COMPLETE CAPS 60 MG-2 MG-30 MCG-400 MCG-1000 UNIT-6 MCG- 1.7 MG-40 MCG-20 MG- 10 MG-18 MG-1.5 MG-40 MG-15 MG-2 MG-2500 UNIT-100 MG-45 MCG- 150 MCG-50 UNIT-4 MG- 120 MCG-20 MCG	C	QL(1 EA daily); RX/OTC	MULTI FOR HER TABS 120 MG-2 MG-30 MCG- 400 MCG-6 MCG-10 MG- 1.7 MG-100 MCG-250 MCG-3000 UNIT-1.5 MG- 100 MG-15 MG-150 MCG- 400 UNIT-20 MG-18 MG- 40 MG-10 MCG-120 MCG-2 MG-10 MCG-150 MCG-25 MCG-77 MG-5 MCG-2 MG-50 UNIT-25 MCG-250 MG-36 MG-2 MG	C	QL(1 EA daily); RX/OTC
MULTI FOR HER 50+ CAPS 60 MG-6 MG-30 MCG-400 MCG-1000 UNIT-25 MCG-1.7 MG-80 MCG-20 MG-10 MG-1.5 MG-100 MG-15 MG-2 MG- 2500 UNIT-200 MG-75 MCG-150 MCG-60 UNIT-4 MG-120 MCG-70 MCG, 60 MG-6 MG-30 MCG-400 MCG-1000 UNIT-25 MCG- 1.7 MG-80 MCG-20 MG- 10 MG-200 MG-1.5 MG- 100 MG-15 MG-2 MG- 2500 UNIT-75 MCG-150 MCG-60 UNIT-4 MG-120 MCG-70 MCG, 60 MG-6 MG-30 MCG-60 UNIT-400 MCG-1000 UNIT-25 MCG- 1.7 MG-80 MCG-20 MG- 10 MG-1.5 MG-100 MG-15 MG-2 MG-2500 UNIT-200 MG-75 MCG-150 MCG-4 MG-120 MCG-70 MCG	C	QL(1 EA daily); RX/OTC	MULTI FOR HIM 50+ TABS 180 MG-6 MG-30 MCG-400 MCG-1000 UNIT-25 MCG-10 MG-1.7 MG-80 MCG-1.5 MG-15 MG-20 MG-100 MG-120 MCG-2 MG-162 MG-150 MCG-75 MCG-4 MG-60 UNIT-2500 UNIT-105 MCG	C	QL(1 EA daily); RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MULTI FOR HIM CAPS 60 MG-4 MG-30 MCG-400 MCG-1000 UNIT-18 MCG-1.7 MG-40 MCG-20 MG-10 MG-1.5 MG-40 MG-15 MG-2 MG-2500 UNIT-100 MG-45 MCG-150 MCG-50 UNIT-4 MG-120 MCG-40 MCG, 60 MG-4 MG-30 MCG-400 MCG-25 MCG-18 MCG-1.7 MG-40 MCG-20 MG-10 MG-100 MG-1.5 MG-40 MG-15 MG-2 MG-750 MCG-45 MCG-150 MCG-22.5 MG-4 MG-120 MCG-40 MCG	C	QL(1 EA daily); RX/OTC	MULTIPLE VIT/MINERALS/NO IRON TABS 60 MG-1 MG-400 MCG-400 UNIT-1 MCG-5 MG-2.5 MG-15 MG-5000 UNIT-2.5 MG-2.5 MG-100 MG-75 MCG-15 UNIT-80 MG-1.5 MG-0.37 MG-0.5 MG	C	QL(1 EA daily); RX/OTC
MULTI FOR HIM TABS 180 MG-4 MG-30 MCG-400 MCG-1000 UNIT-18 MCG-10 MG-1.7 MG-80 MCG-1.5 MG-100 MG-15 MG-20 MG-120 MCG-2 MG-162 MG-150 MCG-75 MCG-4 MG-50 UNIT-2500 UNIT-70 MCG	C	QL(1 EA daily); RX/OTC	<i>multiple vitamins w/ minerals CAPS</i>	C	QL(1 EA daily); RX/OTC
MULTI VITAMIN/MINERALS TABS 60 MG-1 MG-400 MCG-400 UNIT-1 MCG-2.5 MG-15 MG-5000 UNIT-5 MG-7.5 MG-2.5 MG-100 MG-75 MCG-15 UNIT-80 MG-1.5 MG-0.375 MG-0.5 MG, 90 MG-3 MG-45 MCG-400 MCG-400 UNIT-9 MCG-2.6 MG-25 MCG-20 MG-10 MG-27 MG-2.25 MG-100 MG-15 MG-5000 UNIT-30 MG-162 MG-150 MCG-34 UNIT-125 MG-2 MG-5 MG-27 MG-25 MCG-25 MCG-300 MCG-25 MCG	C	QL(1 EA daily); RX/OTC	<i>multiple vitamins w/ minerals TABS</i>	C	QL(1 EA daily); RX/OTC
MULTIA CAPS	C	QL(1 EA daily); RX/OTC	MULTIPLE VITAMINS/WOMENS TABS 60 MG-2 MG-400 MCG-1.5 MG-20 MG-6 MCG-10 MG-1.7 MG-400 UNIT-30 UNIT-27 MG-15 MG-450 MG-5000 UNIT	C	QL(1 EA daily); RX/OTC
			MULTIPRO CAPS 25 MG-300 MCG-1000 MCG-10 MCG-10 MCG-3 MG-2 MG-5 MG-32 MG-2 MG-7 MG-6 MG-30 MG-315 MG-1 MG-30 MG	C	QL(1 EA daily); RX/OTC
			MULTITOL-M TABS	C	QL(1 EA daily); RX/OTC
			MULTIVITAMIN ADULT (MINERALS) TABS	C	QL(1 EA daily); RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MULTIVITAMIN ADULTS 50+ TABS 60 MG-3 MG-30 MCG-400 MCG-12.5 MCG-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-750 MCG-10 MG-300 MCG-1.5 MG-50 MG-11 MG-150 MCG-80 MG-220 MG-45 MCG-150 MCG-22.75 MG-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG-2 MG, 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-220 MG-300 MCG-1.5 MG-11 MG-150 MCG-50 MG-80 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-45 MCG-55 MCG-10 MCG-72 MG-2 MG, 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-220 MG-300 MCG-1.5 MG-11 MG-150 MCG-50 UNIT-50 MG-80 MG-45 MCG-150 MCG-20 MG-0.5 MG-5 MCG-2.3 MG-45 MCG-55 MCG-10 MCG-72 MG-2 MG, 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-300 MCG-1.5 MG-50 MG-11 MG-150 MCG-80 MG-220 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG-2 MG, 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-250 MCG-2500 UNIT-10 MG-220 MG-300 MCG-1.5 MG-11 MG-20 MG-50 MG-	C	QL(1 EA daily); RX/OTC	80 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-19 MCG-10 MCG-50 MCG-72 MG-2 MG		
			MULTIVITAMIN ADULTS TABS 60 MG-2 MG-30 MCG-400 MCG-10 MCG-6 MCG-1.7 MG-25 MCG-20 MG-10 MG-18 MG-1.5 MG-50 MG-11 MG-80 MG-200 MG-45 MCG-150 MCG-13.5 MG-20 MG-0.5 MG-5 MCG-10 MCG-2.3 MG-75 MCG-1050 MCG-55 MCG-10 MCG-35 MCG-72 MG-2 MG, 60 MG-30 MCG-400 MCG-1.5 MG-20 MG-2 MG-10 MG-1.7 MG-25 MCG-13.5 MG-18 MG-50 MG-2.3 MG-45 MCG-80 MG-2 MG-10 MCG-35 MCG-0.5 MG-10 MCG-11 MG-200 MG-150 MCG-20 MG-55 MCG-1050 MCG-25 MCG-6 MCG-72 MG	C	QL(1 EA daily); RX/OTC
			MULTIVITAMIN HEALTH FORM/CA/FE TABS	C	QL(1 EA daily); RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MULTIVITAMIN MEN 50+ TABS 120 MG-30 MCG-300 MCG-1.5 MG-20 MG-6 MG-10 MG-1.7 MG-300 MCG-600 MCG-25 MCG-27 MG-75 MG-4 MG-50 MCG-80 MG-60 MCG-0.5 MG-15 MG-210 MG-150 MCG-20 MG-21 MCG-1050 MCG-60 MCG-100 MCG-72 MG, 120 MG-30 MCG-400 MCG-4.5 MG-20 MG-6 MG-15 MG-3.4 MG-370 MCG-17.5 MCG-11.4 MG-110 MG-4.2 MG-90 MCG-180 MCG-2.2 MG-24 MG-120 MG-150 MCG-117 MCG-940 MCG-20 MCG-25 MCG, 120 MG-6 MG-30 MCG-27 MG-300 MCG-25 MCG-100 MCG-1.7 MG-60 MCG-20 MG-300 MCG-10 MG-600 MCG-1.5 MG-75 MG-15 MG-80 MG-210 MG-50 MCG-150 MCG-20 MG-0.5 MG-5 MCG-4 MG-1050 MCG-21 MCG-10 MCG-60 MCG-72 MG-2 MG, 120 MG-6 MG-30 MCG-300 MCG-600 UNIT-100 MCG-1.7 MG-60 MCG-20 MG-300 MCG-3500 UNIT-10 MG-600 MCG-1.5 MG-75 MG-15 MG-210 MG-80 MG-50 MCG-150 MCG-60 UNIT-20 MG-0.5 MG-4 MG-21 MCG-60 MCG-72 MG	C	QL(1 EA daily); RX/OTC	MULTIVITAMIN WOMEN 50+ TABS 100 MG-30 MCG-400 MCG-1.1 MG-14 MG-5 MG-5 MG-1.1 MG-300 MCG-25 MCG-15.8 MG-8 MG-100 MG-2.3 MG-50 MCG-80 MG-52 MCG-0.5 MG-15 MG-300 MG-150 MCG-20 MG-22 MCG-1050 MCG-50 MCG-50 MCG-72 MG, 100 MG-5 MG-30 MCG-400 MCG-14 MG-25 MCG-50 MCG-1.1 MG-50 MCG-300 MCG-1050 MCG-5 MG-8 MG-1.1 MG-15 MG-100 MG-2 MG-300 MG-80 MG-50 MCG-150 MCG-15.7 MG-20 MG-2.3 MG-22 MCG-0.5 MG-10 MCG-52 MCG-72 MG, 100 MG-5 MG-30 MCG-400 MCG-800 UNIT-50 MCG-1.1 MG-50 MCG-14 MG-300 MCG-3500 UNIT-5 MG-8 MG-1.1 MG-15 MG-35 UNIT-50 MG-500 MG-80 MG-150 MG-20 MG-0.5 MG-5 MCG-2.3 MG-150 MCG-55 MCG-50 MCG-10 MCG-50 MCG-72 MG-2 MG, 100 MG-5 MG-30 MCG-400 MCG-800 UNIT-50 MCG-1.1 MG-50 MCG-14 MG-300 MCG-3500 UNIT-5 MG-8 MG-300 MG-1.1 MG-15 MG-35 UNIT-100 MG-80 MG-150 MCG-20 MG-0.5 MG-5 MCG-2.3 MG-22 MCG-50 MCG-10 MCG-52 MCG-72 MG-2 MG	C	QL(1 EA daily); RX/OTC
MULTIVITAMIN MEN TABS	C	QL(1 EA daily); RX/OTC			
MULTI-VITAMIN MONOCAPS TABS	C	QL(1 EA daily); RX/OTC			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MULTIVITAMIN WOMENS 50+ ADV TABS 120 MG-30 MCG-400 MCG-4.5 MG-20 MG-6 MG-15 MG-3.4 MG-25 MCG-13.5 MG-50 MG-4.2 MG-90 MCG-180 MCG-2.2 MG-24 MG-300 MG-150 MCG-27 MCG-940 MCG-20 MCG-25 MCG	C	QL(1 EA daily); RX/OTC	MYAMULTI TABS 60 MG-3 MG-30 MCG-400 MCG-1.7 MG-6 MCG-10 MG-2 MG-20 MG-5000 UNIT-400 UNIT-30 UNIT-18 MG-100 MG-2.5 MG-25 MCG-5 MCG-40 MG-10 MCG-150 MCG-25 MCG-2 MG-10 MCG-15 MG-162 MG-150 MCG-125 MG-25 MCG-10 MCG-25 MCG-36.3 MG	C	QL(1 EA daily); RX/OTC
MULTIVITAMIN WOMEN TABS	C	QL(1 EA daily); RX/OTC	NAT-RUL THERAVITE-M TABS	C	QL(1 EA daily); RX/OTC
MULTI-VITAMIN/MINERALS TABS 60 MG-2 MG-0.4 MG-20 MG-1.2 MG-6 MCG-1.7 MG-400 UNIT-15 MG-100 MG-160 MG-150 MCG-18 MG-125 MG-5000 UNIT	C	QL(1 EA daily); RX/OTC	NATRUL-VITES TABS	C	QL(1 EA daily); RX/OTC
MULTIVITAMIN/ZINC STRESS TABS	C	QL(1 EA daily); RX/OTC	NEOVITE TABS	C	QL(1 EA daily); RX/OTC
MULTIVITAMIN-MINERALS TABS	C	QL(1 EA daily); RX/OTC	NICADAN TABS	C	QL(1 EA daily); RX/OTC
MVW COMPLETE FORMULATION D3000 CAPS	C	QL(1 EA daily); RX/OTC	NICAZEL FORTE TABS	C	QL(1 EA daily); RX/OTC
MVW COMPLETE FORMULATION D5000 CAPS	C	QL(1 EA daily); RX/OTC	NICAZEL TABS	C	QL(1 EA daily); RX/OTC
MVW COMPLETE FORMULATION MINIS CAPS	C	QL(1 EA daily); RX/OTC	NO IRON MULT VITAMIN-MINERALS TABS	C	QL(1 EA daily); RX/OTC
MVW COMPLETE FORMULATION CAPS	C	QL(1 EA daily); RX/OTC	NUTRALYN TABS	C	QL(1 EA daily); RX/OTC
MVW MODULATOR FORMULATION MINI CAPS	C	QL(1 EA daily); RX/OTC	NUTRICAP TABS	C	QL(1 EA daily); RX/OTC
MVW MODULATOR FORMULATION CAPS	C	QL(1 EA daily); RX/OTC	NUTRIFAC ZX TABS 500 MG-25 MG-200 MCG-1000 MCG-50 MCG-25 MG-20 MG-100 MG-5000 UNIT-20 MG-50 MG-20 MG-400 UNIT-50 UNIT-2.5 MG-66 MG-50 MCG-5 MG-200 MCG	C	QL(1 EA daily); RX/OTC
			OCULAR VITAMINS TABS	C	QL(1 EA daily); RX/OTC
			OCUTABS-LUTEIN TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG	C	QL(1 EA daily); RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
OCUTABS TABS 113 MG-17.4 MG-0.4 MG-100 UNIT-7160 UNIT, 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG	C	QL(1 EA daily); RX/OTC	ONE A DAY POSTNATAL 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	ONE A DAY TRIPLE IMMUNE SUPPRT TABS	C	QL(1 EA daily); RX/OTC
OCUVITE ADULT 50+ CAPS	C	QL(1 EA daily); RX/OTC	ONE A DAY WOMEN 50 PLUS TABS	C	QL(1 EA daily); RX/OTC
OCUVITE ADULT FORMULA CAPS	C	QL(1 EA daily); RX/OTC	ONE DAILY 50 PLUS TABS 120 MG-6 MG-30 MCG-400 MCG-400 UNIT-30 MCG-3.4 MG-20 MCG-20 MG-5000 UNIT-15 MG-120 MG-4.5 MG-22.5 MG-2 MG-100 MG-37.5 MG-90 MCG-150 MCG-60 UNIT-4 MG-180 MCG-105 MCG-34 MG	C	QL(1 EA daily); RX/OTC
OCUVITE EXTRA TABS 200 MG-5 MG-3 MG-40 MG-40 MG-2 MG-5 MG-50 UNIT-6000 UNIT-40 MCG	C	QL(1 EA daily); RX/OTC	ONE DAILY CALCIUM/IRON TABS 400 UNIT-60 MG-2 MG-400 MCG-1.5 MG-6 MCG-10 MG-1.7 MG-20 MG-2500 UNIT-2500 UNIT-27 MG-15 MG-450 MG-30 UNIT	C	QL(1 EA daily); RX/OTC
OCUVITE EYE + MULTI TABS 75 MG-1 MG-15 MCG-200 MCG-200 UNIT-3 MCG-0.85 MG-15 MCG-10 MG-5 MG-5 MG-1 MG-150 MCG-1 MG-0.75 MG-11.5 MG-500 UNIT-50 MG-100 MG-37.5 MCG-75 MCG-25 UNIT-7 MG-60 MCG-1 MG-35 MCG	C	QL(1 EA daily); RX/OTC	ONE DAILY COMPLETE FOR MEN TABS 60 MG-3 MG-75 MCG-400 MCG-700 UNIT-18 MCG-1.7 MG-20 MCG-18 MG-3500 UNIT-16 MG-210 MG-300 MCG-1.35 MG-140 MG-15 MG-2 MG-22.5 UNIT-2 MG-120 MCG-110 MCG	C	QL(1 EA daily); RX/OTC
OCUVITE EYE HEALTH FORMULA CAPS 150 MG-30 UNIT-5 MG-1 MG-1 MG-9 MG-90 MG-160 MG-250 MG	C	QL(1 EA daily); RX/OTC	ONE DAILY COMPLETE TABS 60 MG-2 MG-30 MCG-400 MCG-20 MG-1.5 MG-6 MCG-10 MG-1.7 MG-5000 UNIT-400 UNIT-30 UNIT-18 MG-100 MG-2.5 MG-10 MCG-37.5 MG-10 MCG-2 MG-15 MG-130 MG-150 MCG-100 MG-10 MCG-34 MG	C	QL(1 EA daily); RX/OTC
OCUVITE EYE PERFORMANCE CAPS	C	QL(1 EA daily); RX/OTC			
OCUVITE-LUTEIN CAPS	C	QL(1 EA daily); RX/OTC			
OCUVITE-LUTEIN TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG	C	QL(1 EA daily); RX/OTC			
ONCOVITE TABS	C	QL(1 EA daily); RX/OTC			
ONE A DAY ENERGY TABS	C	QL(1 EA daily); RX/OTC			
ONE A DAY MEN 50 PLUS TABS	C	QL(1 EA daily); RX/OTC			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ONE DAILY FOR MEN 50+ ADVANCED TABS 120 MG-6 MG-30 MCG-400 MCG-400 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-2500 UNIT-15 MG-120 MG-600 MCG-4.5 MG-100 MG-22.5 MG-40 MG-90 MCG-150 MCG-33 UNIT-2 MG-4 MG-180 MCG-105 MCG-120 MG	C	QL(1 EA daily); RX/OTC	ONE DAILY HEALTHY WEIGHT ADV TABS 60 MG-10 MG-2.5 MG-400 MCG-400 UNIT-7.5 MCG-2.1 MG-80 MCG-25 MG-2500 UNIT-12.5 MG-18 MG-200 MG-1.9 MG-15 MG-50 MG-30 UNIT-2 MG-2 MG-200 MCG-70 MCG	C	QL(1 EA daily); RX/OTC
ONE DAILY FOR MEN/LYCOPENE TABS 90 MG-3 MG-30 MCG-400 MCG-400 UNIT-18 MCG-1.7 MG-20 MCG-16 MG-3500 UNIT-5 MG-210 MG-600 MCG-1.2 MG-120 MG-15 MG-2 MG-100 MG-45 UNIT-2 MG-120 MCG-105 MCG	C	QL(1 EA daily); RX/OTC	ONE DAILY HEALTHY WEIGHT TABS 60 MG-2.5 MG-400 MCG-400 UNIT-7.5 MCG-2.125 MG-25 MG-12.5 MG-18 MG-300 MG-1.9 MG-50 MG-15 MG-2500 UNIT-30 UNIT-2 MG-2 MG-200 MCG-80 MCG-70 MCG-32 MG, 60 MG-3 MG-30 MCG-400 MCG-400 UNIT-25 MCG-1.7 MG-20 MG-250 MCG-3500 UNIT-10 MG-200 MG-300 MCG-1.5 MG-100 MG-15 MG-2 MG-80 MG-150 MCG-150 MCG-75 MCG-45 UNIT-48 MG-5 MCG-2 MG-150 MCG-10 MCG-20 MCG-10 MCG-72 MG-2 MG	C	QL(1 EA daily); RX/OTC
ONE DAILY FOR WOMEN 50+ ADV TABS 60 MG-6 MG-30 MCG-400 MCG-800 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-2500 UNIT-15 MG-405 MG-4.5 MG-50 MG-22.5 MG-90 MCG-150 MCG-33 UNIT-2 MG-4 MG-180 MCG-20 MCG-120 MG	C	QL(1 EA daily); RX/OTC	ONE DAILY MAXIMUM TABS 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-2500 UNIT-10 MG-18 MG-1.5 MG-100 MG-15 MG-150 MCG-162 MG-80 MG-160 MCG-150 MCG-30 UNIT-109 MG-2 MG-5 MCG-10 MCG-65 MCG-3.5 MG-20 MCG-10 MCG-72 MG-2 MG	C	QL(1 EA daily); RX/OTC
ONE DAILY FOR WOMEN TABS 60 MG-2 MG-30 MCG-400 MCG-1000 UNIT-6 MCG-1.7 MG-25 MCG-10 MG-2500 UNIT-5 MG-18 MG-450 MG-1.5 MG-15 MG-50 MG-30 UNIT-2 MG-2 MG-120 MCG-20 MCG, 60 MG-2 MG-30 MCG-400 MCG-1000 UNIT-6 MCG-1.7 MG-25 MCG-10 MG-2500 UNIT-5 MG-18 MG-450 MG-1.5 MG-50 MG-15 MG-30 UNIT-2 MG-2 MG-120 MCG-20 MCG	C	QL(1 EA daily); RX/OTC	ONE DAILY MEN FORMULA W/O IRON TABS	C	QL(1 EA daily); RX/OTC
			ONE DAILY MENS 50+ MULTIVIT TABS	C	QL(1 EA daily); RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ONE DAILY MENS 50+/LYCOPENE TABS 120 MG-6 MG-30 MCG-25.5 UNIT-400 MCG-700 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-3500 UNIT-15 MG-120 MG-370 MCG-4.5 MG-24 MG-110 MG-90 MCG-150 MCG-2.2 MG-4.2 MG-180 MCG-117 MCG	C	QL(1 EA daily); RX/OTC	ONE DAILY MULTIVITAMIN MEN TABS 60 MG-3 MG-75 MCG-400 MCG-700 UNIT-18 MCG-1.7 MG-20 MCG-18 MG-3500 UNIT-16 MG-300 MCG-1.35 MG-15 MG-2 MG-22.5 UNIT-140 MG-210 MG-2 MG-120 MCG-110 MCG	C	QL(1 EA daily); RX/OTC
ONE DAILY MENS HEALTH TABS 60 MG-3 MG-30 MCG-400 MCG-700 UNIT-18 MCG-1.7 MG-20 MCG-16 MG-3500 UNIT-5 MG-210 MG-300 MCG-1.2 MG-120 MG-15 MG-2 MG-22.5 UNIT-2 MG-120 MCG-110 MCG	C	QL(1 EA daily); RX/OTC	ONE DAILY MULTIVITAMIN WOMEN TABS	C	QL(1 EA daily); RX/OTC
ONE DAILY MENS TABS 90 MG-3 MG-30 MCG-400 MCG-400 UNIT-18 MCG-1.7 MG-16 MG-3500 UNIT-5 MG-210 MG-600 MCG-1.2 MG-120 MG-15 MG-2 MG-100 MG-45 UNIT-2 MG-120 MCG-20 MCG-105 MCG, 99 MG-43 MCG-240 MCG-1.32 MG-17.6 MG-2.17 MG-15.5 MG-1.43 MG-210 MG-300 MCG-25 MCG-15 MG-120 MG-2.3 MG-35 MCG-0.9 MG-11 MG-150 MCG-55 MCG-900 MCG-30 MCG-6.24 MCG-408 MCG	C	QL(1 EA daily); RX/OTC	ONE DAILY WOMENS 50 PLUS TABS 75 MG-3 MG-30 MCG-400 MCG-400 UNIT-18 MCG-1.7 MG-14 MG-3000 UNIT-5 MG-240 MG-1.1 MG-120 MG-15 MG-2 MG-100 MG-33 UNIT-2 MG-120 MCG-20 MCG-70 MCG-10 MG	C	QL(1 EA daily); RX/OTC
ONE DAILY MULTIVIT/IRON-FREE TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-3000 UNIT-10 MG-1.5 MG-45 MG-30 UNIT	C	QL(1 EA daily); RX/OTC	ONE DAILY WOMENS 50+ TABS 60 MG-6 MG-30 MCG-400 MCG-800 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-15 MG-405 MG-4.5 MG-50 MG-22.5 MG-90 MCG-150 MCG-33 UNIT-2 MG-180 MCG-4 MG-2500 UNIT-20 MCG-120 MG	C	QL(1 EA daily); RX/OTC
			ONE DAILY WOMENS TABS	C	QL(1 EA daily); RX/OTC
			ONE DAILY/MINERALS TABS 50 MG-1 MG-100 MCG-1.5 MG-3 MCG-1.7 MG-20 MG-5000 UNIT-400 UNIT-5 MG-1 MG-125 MG-150 MCG-10 UNIT	C	QL(1 EA daily); RX/OTC
			ONE-A-DAY ENERGY TABS	C	QL(1 EA daily); RX/OTC
			ONE-A-DAY MENOPAUSE FORMULA TABS	C	QL(1 EA daily); RX/OTC
			ONE-A-DAY MENS (MINERALS) TABS	C	QL(1 EA daily); RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ONE-A-DAY MENS 50+ ADVANTAGE TABS	C	QL(1 EA daily); RX/OTC	OPURITY TABS	C	QL(1 EA daily); RX/OTC
ONE-A-DAY MENS 50+ TABS	C	QL(1 EA daily); RX/OTC	OSTEOPRIME PLUS TABS	C	QL(1 EA daily); RX/OTC
ONE-A-DAY MENS HEALTH FORMULA TABS	C	QL(1 EA daily); RX/OTC	OSTEOPRIME ULTRA TABS 30 MG-6.25 MG-200 MCG-5 MG-200 UNIT-12.5 MCG-5 MG-75 MCG-12.5 MG-5 MG-0.5 MG-5 MG-11.25 MCG-1.25 MG-75 MG-3.75 MG-0.75 MG-200 MG-12.5 MCG-32 MG-25 MCG-1.5 MG-5 MG-1.75 MG-50 MCG	C	QL(1 EA daily); RX/OTC
ONE-A-DAY MENS PRO EDGE TABS	C	QL(1 EA daily); RX/OTC		C	QL(1 EA daily); RX/OTC
ONE-A-DAY PROACTIVE 65+ TABS	C	QL(1 EA daily); RX/OTC		C	QL(1 EA daily); RX/OTC
ONE-A-DAY TEEN ADVANTAGE/HIM TABS	C	QL(1 EA daily); RX/OTC	PARVLEX TABS	C	QL(1 EA daily); RX/OTC
ONE-A-DAY WOMENS 50+ TABS	C	QL(1 EA daily); RX/OTC	PHYTOMULTI TABS	C	QL(1 EA daily); RX/OTC
ONE-A-DAY WOMENS TABS	C	QL(1 EA daily); RX/OTC	PRESCRIPTION SUPPORT MULTIVIT CAPS	C	QL(1 EA daily); RX/OTC
ONE-DAILY MULTI CAPS CAPS	C	QL(1 EA daily); RX/OTC	PRESERVISION AREDS 2+COQ10 CAPS	C	QL(1 EA daily); RX/OTC
ONE-DAILY MULTI-VIT/MINERAL TABS 50 MG-2 MG-20 MG-1 MG-1 MG-2.5 MG-10 MCG-4.5 MG-10 MG-1 MG-5 MCG-3.75 MG-150 MCG-5 MCG-1500 MCG-1 MCG	C	QL(1 EA daily); RX/OTC	PRESERVISION AREDS 2+MULTI VIT CAPS	C	QL(1 EA daily); RX/OTC
ONEVITE TABS	C	QL(1 EA daily); RX/OTC	PRESERVISION AREDS 2 CAPS	C	QL(1 EA daily); RX/OTC
OPTIC-VITES WITH LUTEIN TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG	C	QL(1 EA daily); RX/OTC	PRESERVISION AREDS CAPS	C	QL(1 EA daily); RX/OTC
OPTIC-VITES TABS 60 MG-40 MG-2 MG-30 UNIT-5000 UNIT-40 MCG	C	QL(1 EA daily); RX/OTC	PRESERVISION AREDS TABS	C	QL(1 EA daily); RX/OTC
OPTIMUM PMS TABS 250 MG-4.16 MG-33.3 MCG-4.16 MG-10.4 MCG-2083.3 UNIT-4.16 MG-52.08 MG-4.16 MG-4.16 MG-16.7 UNIT-2.5 MG-41.7 MG-1.67 MG-7.9 MG-16.7 MCG-0.08 MG-4.16 MG-12.5 MCG-16.7 MCG-16.7 UNIT	C	QL(1 EA daily); RX/OTC	PRESERVISION/LUTEIN CAPS	C	QL(1 EA daily); RX/OTC
			PREVENT CAPS	C	QL(1 EA daily); RX/OTC
			PREV-RX TABS	C	QL(1 EA daily); RX/OTC
			PROBIOTICS + BARIATRIC MULTI CAPS	C	QL(1 EA daily); RX/OTC
			PRO-CAL TABS	C	QL(1 EA daily); RX/OTC
			PROCERV HP TABS	C	QL(1 EA daily); RX/OTC
			PROFOLA TABS	C	QL(1 EA daily); RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PRORENAL + D W/ OMEGA-3 CAPS	C	QL(1 EA daily); RX/OTC	QC MULTI-VITE 50 & OVER TABS 60 MG-3 MG-30 MCG-400 MCG- 500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG- 300 MCG-1.5 MG-50 MG- 11 MG-80 MG-150 MCG- 220 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG-2 MG	C	QL(1 EA daily); RX/OTC
PRORENAL + D TABS	C	QL(1 EA daily); RX/OTC		C	QL(1 EA daily); RX/OTC
PROSIGHT TABS 60 MG- 40 MG-2 MG-30 MG-5000 UNIT-40 MCG	C	QL(1 EA daily); RX/OTC		C	QL(1 EA daily); RX/OTC
PROTECT CARDIO AF CAPS	C	QL(1 EA daily); RX/OTC		C	QL(1 EA daily); RX/OTC
PROTECT PLUS SO CAPS	C	QL(1 EA daily); RX/OTC		C	QL(1 EA daily); RX/OTC
PROTEGRA CAPS	C	QL(1 EA daily); RX/OTC		C	QL(1 EA daily); RX/OTC
PROVIT TABS	C	QL(1 EA daily); RX/OTC		C	QL(1 EA daily); RX/OTC
QC DAILY MULTIVIT/MULTIMINERA L TABS 50 MG-2 MG-30 MCG-400 MCG-400 UNIT- 6 MCG-2500 UNIT-1.7 MG-25 MCG-20 MG-10 MG-18 MG-1.5 MG-100 MG-15 MG-150 MCG-80 MG-2 MG-162 MG-160 MCG-150 MCG-30 UNIT- 109 MG-2 MG-5 MCG-10 MCG-3.5 MG-65 MCG-20 MCG-10 MCG-72 MG	C	QL(1 EA daily); RX/OTC		C	QL(1 EA daily); RX/OTC
QC HAIR SKIN & NAILS TABS 50 MG-50 MG-3.5 MG-6.5 MG-25 MCG-25 UNIT-25 MCG-7.5 MG-7.2 MG-50 UNIT-25 MCG- 2500 UNIT-15 MG-5 MG- 25 MG-10 MG-3.3 MG-10 MG-5 MG-10 MG-20 MG- 0.6 MG-150 MCG-54 MG- 70 MG-897 MCG-0.6 MG	C	QL(1 EA daily); RX/OTC		C	QL(1 EA daily); RX/OTC
QC MENS DAILY MULTIVITAMIN TABS 90 MG-3 MG-30 MCG-400 MCG-400 UNIT-18 MCG- 1.7 MG-20 MCG-16 MG- 3500 UNIT-5 MG-210 MG- 600 MCG-1.2 MG-120 MG-15 MG-2 MG-100 MG- 45 UNIT-2 MG-120 MCG- 105 MCG	C	QL(1 EA daily); RX/OTC		QUIN B STRONG TABS	C
			QUINTABS-M TABS	C	QL(1 EA daily); RX/OTC
			RAYAVIT TABS	C	QL(1 EA daily); RX/OTC
			REMEDIENT CAPS	C	QL(1 EA daily); RX/OTC
			RENAL MULTIVITAMIN TABS	C	QL(1 EA daily); RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
RENAPLEX-D TABS	C	QL(1 EA daily); RX/OTC	STROVITE ONE TABS	C	QL(1 EA daily); RX/OTC
RENAPLEX TABS 60 MG-10 MG-300 MCG-800 MCG-6 MCG-1.7 MG-20 MG-10 MG-1.5 MG-12.5 MG	C	QL(1 EA daily); RX/OTC	SUPER ANTIOXIDANT CAPS	C	QL(1 EA daily); RX/OTC
SENIOR TABS TABS 60 MG-3 MG-30 MCG-400 MCG-1.5 MG-20 MG-25 MCG-10 MG-1.7 MG-250 MCG-300 MCG-400 UNIT-45 UNIT-100 MG-2 MG-75 MCG-5 MCG-80 MG-2 MG-150 MCG-150 MCG-2 MG-10 MCG-15 MG-200 MG-150 MCG-48 MG-20 MCG-3500 UNIT-10 MCG-72 MG	C	QL(1 EA daily); RX/OTC	SUPER ANTIOXIDANTS PROTECTOR CAPS 500 MG-400 UNIT-25000 UNIT-50 MCG	C	QL(1 EA daily); RX/OTC
SENTRY SENIOR MENS 50+ TABS	C	QL(1 EA daily); RX/OTC	SUPER AYTINAL 50 PLUS TABS 120 MG-2 MG-30 MCG-400 MCG-1.5 MG-400 UNIT-12 MCG-10 MG-1.7 MG-20 MG-275 MCG-9 MG-225 MG-100 MG-15 MG-2 MG-150 MCG-75 MCG-150 MCG-50 UNIT-2 MG-5000 UNIT-80 MCG-70 MCG-120 MCG-25 MG-25 MG	C	QL(1 EA daily); RX/OTC
SENTRY SENIOR/LUTEIN TABS	C	QL(1 EA daily); RX/OTC	SUPER AYTINAL TABS 90 MG-5 MG-40 MCG-400 MCG-400 UNIT-12 MCG-10 MG-5 MG-30 MG-275 MCG-3500 UNIT-25 MG-300 MCG-5 MG-100 MG-15 MG-3 MG-7.7 MG-150 MCG-50 MCG-162 MG-150 MCG-2 MG-50 MCG-30 UNIT-125 MG-5 MCG-10 MCG-7.5 MG-25 MCG-50 MCG-10 MCG-7 MG	C	QL(1 EA daily); RX/OTC
SENTRY SENIOR TABS	C	QL(1 EA daily); RX/OTC	SUPER D-ZINC-SELENIUM-COPPER TABS	C	QL(1 EA daily); RX/OTC
SENTRY TABS	C	QL(1 EA daily); RX/OTC	SUPER THERA VITE M TABS 90 MG-3 MG-35 MCG-0.4 MG-3 MG-9 MCG-10 MG-3.4 MG-30 MG-5000 UNIT-400 UNIT-30 UNIT-1250 UNIT-27 MG-100 MG-5 MG-15 MCG-7.5 MG-15 MCG-2 MG-15 MG-40 MG-150 MCG-31 MG-10 MCG-7.5 MG	C	QL(1 EA daily); RX/OTC
SIDEROL TABS	C	QL(1 EA daily); RX/OTC			
SKIN HAIR & NAILS ADVANCED CAPS	C	QL(1 EA daily); RX/OTC			
SOLO TABS	C	QL(1 EA daily); RX/OTC			
SPECTRAVITE TABS	C	QL(1 EA daily); RX/OTC			
STRESS B COMPLEX/ANTIOXID/ZIN C TABS 500 MG-45 MCG-400 MCG-10 MG-100 MG-5 MG-20 MG-10 MG-13.5 MG-3 MG-24 MG-77 MG-12 MCG	C	QL(1 EA daily); RX/OTC			
STRESSTABS ADVANCED TABS 30 MG-5 MG-400 MCG-400 UNIT-50 MCG-2500 UNIT-1.5 MG-20 MG-1.5 MG-30 MG-20 MG-15 UNIT	C	QL(1 EA daily); RX/OTC			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SUPER VITA-MINS TABS 250 MG-5 MG-0.4 MG-10 MG-6 MCG-20 MG-10 MG-100 MG-400 UNIT-30 UNIT-24 MG-100 MG-1.25 MG-2 MG-15 MG-0.161 MG-150 MCG-0.125 MG- 10000 UNIT	C	QL(1 EA daily); RX/OTC	THERABASIC-M TABS 400 UNIT-90 MG-3 MG-35 MCG-0.4 MG-9 MCG-10 MG-3.4 MG-30 MG-5000 UNIT-27 MG-3 MG-100 MG-1250 UNIT-15 MCG- 7.5 MG-15 MCG-40 MG- 15 MG-150 MCG-30 UNIT-31 MG-2 MG-10 MCG-5 MG-7.5 MG	C	QL(1 EA daily); RX/OTC
SUPERIOR MENS MULTI TABS	C	QL(1 EA daily); RX/OTC	THERAGRAN-M ADVANCED 50 PLUS TABS	C	QL(1 EA daily); RX/OTC
SUPERIOR WOMENS MULTI TABS	C	QL(1 EA daily); RX/OTC	THERAGRAN-M ADVANCED TABS	C	QL(1 EA daily); RX/OTC
SUPPORT-500 CAPS	C	QL(1 EA daily); RX/OTC	THERAGRAN-M PREMIER 50 PLUS TABS	C	QL(1 EA daily); RX/OTC
SYSTANE ICAPS AREDS2 CAPS 250 MG-5 MG-1 MG-1 MG-12.5 MG- 200 UNIT	C	QL(1 EA daily); RX/OTC	THERAGRAN-M PREMIER TABS	C	QL(1 EA daily); RX/OTC
SYSTANE ICAPS AREDS2 TABS	C	QL(1 EA daily); RX/OTC	THERAGRAN-M TABS	C	QL(1 EA daily); RX/OTC
THERA VITAL M TABS 90 MG-3 MG-30 MCG-0.4 MG-3 MG-9 MCG-10 MG- 3.4 MG-20 MG-2500 UNIT-400 UNIT-30 UNIT- 2500 UNIT-27 MG-100 MG-5 MG-15 MCG-7.5 MG-15 MCG-2 MG-15 MG-40 MG-150 MCG-31 MG-10 MCG-7.5 MG	C	QL(1 EA daily); RX/OTC	THERA-M PLUS MV W/BETA-CAROT TABS	C	QL(1 EA daily); RX/OTC
THERA VITAL-M TABS 120 MG-3 MG-15 MCG- 400 MCG-400 UNIT-9 MCG-3.4 MG-30 MG-5500 UNIT-10 MG-18 MG-3 MG-100 MG-15 MG-2 MG- 40 MG-7.5 MG-15 MCG- 150 MCG-30 UNIT-31 MG-5 MG-15 MCG-10 MCG	C	QL(1 EA daily); RX/OTC	THERAMILL FORTE CAPS	C	QL(1 EA daily); RX/OTC
			THERANATAL LACTATION ONE CAPS	C	QL(1 EA daily); RX/OTC
			THERAPEUTIC FORMULA/HEMATINICS TABS 3.3 MG-0.33 MG-50 MCG-3.3 MG-33.3 MG- 100 MG-11.7 MG-66.7 MG-3.3 MG-41.7 MG-140 UNIT-5 UNIT-0.67 MG- 1400 UNIT	C	QL(1 EA daily); RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
THERAPEUTIC-M TABS 90 MG-2 MG-30 MCG-400 MCG-1.5 MG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-9 MG-60 MG-2 MG-15 MCG-8 MG- 15 MCG-2 MG-15 MG-40 MG-150 MCG-10 MCG-30 UNIT-8 MG, 90 MG-30 MCG-400 MCG-3 MG-20 MG-6 MG-10 MG-3.4 MG- 10 MCG-27 MG-9 MG-100 MG-2 MG-75 MCG-11 MG-2 MG-10 MCG-150 MCG-50 MCG-2 MG-10 MCG-15 MG-145 MG-150 MCG-35 MG-70 MCG- 1500 MCG-28 MCG-12 MCG-8 MG	C	QL(1 EA daily); RX/OTC	THERATRUM COMPLETE TABS 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG- 1.7 MG-20 MG-250 MCG- 5000 UNIT-10 MG-18 MG- 1.5 MG-100 MG-15 MG-80 MG-2 MG-150 MCG-162 MG-150 MCG-75 MCG-30 UNIT-108 MG-2 MG-72 MG-5 MCG-10 MCG-2 MG-120 MCG-25 MCG-20 MCG-10 MCG, 60 MG-2 MG-30 MCG-400 MCG- 400 UNIT-6 MCG-1.7 MG- 25 MCG-20 MG-250 MCG-3500 UNIT-10 MG- 18 MG-300 MCG-1.5 MG- 100 MG-15 MG-80 MG- 150 MCG-162 MG-72 MG- 75 MCG-150 MCG-30 UNIT-109 MG-2 MG-5 MCG-10 MCG-2 MG-120 MCG-20 MCG-10 MCG-2 MG	C	QL(1 EA daily); RX/OTC
THERA-TABS M TABS	C	QL(1 EA daily); RX/OTC	THERA-VITE MAX-M TABS	C	QL(1 EA daily); RX/OTC
THERATRUM COMPLETE 50 PLUS TABS 60 MG-3 MG-30 MCG-400 MCG-400 UNIT- 25 MCG-1.7 MG-10 MCG- 20 MG-250 MCG-3500 UNIT-10 MG-300 MCG- 1.5 MG-100 MG-15 MG- 150 MCG-200 MG-80 MG- 75 MCG-150 MCG-48 MG-2 MG-5 MCG-2 MG- 150 MCG-45 UNIT-20 MCG-10 MCG-72 MG-2 MG	C	QL(1 EA daily); RX/OTC	THRIVE FOR LIFE WOMENS TABS 60 MG-6 MG-300 MCG-400 MCG- 1000 UNIT-18 MCG-5.1 MG-60 MCG-20 MG-100 MCG-3500 UNIT-15 MG- 18 MG-500 MG-700 MCG- 4.5 MG-50 MG-15 MG-75 MCG-150 MCG-30 UNIT-2 MG-2 MG-70 MCG-120 MCG-150 MCG	C	QL(1 EA daily); RX/OTC
			T-VITES TABS	C	QL(1 EA daily); RX/OTC
			UDAMIN SP TABS 12.5 MG-1000 MCG-250 MCG- 2.5 MG-17 MG-7.5 MG- 100 MCG-75 UNIT-320 MG	C	QL(1 EA daily); RX/OTC
			ULTRA BONEUP TABS	C	QL(1 EA daily); RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ULTRA FREEDA/IRON TABS 133.333 UNIT- 1666.667 UNIT-16.667 MG-100 MCG-66.667 UNIT-266.667 MCG- 16.667 MG-33.333 MCG- 16.667 MG-33.333 MG- 33.333 MG-6 MG-333.333 MG-3.333 MG-33.333 MG- 4.167 MCG-11.667 MG- 66.667 MCG-7.5 MG- 83.333 MG-50 MCG- 33.333 MCG-33.333 MG	C	QL(1 EA daily); RX/OTC	ULTRACHOICE ADV FORMULA MATURE TABS 120 MG-6 MG-60 MCG-400 MCG-4.5 MG- 400 UNIT-24 MCG-10 MG-5.1 MG-40 MG-275 MCG-18 MG-300 MCG- 100 MG-15 MG-3.5 MG- 0.5 MG-100 MG-2 MG-13 MCG-1 MG-200 MCG-165 MG-150 MCG-200 MCG- 60 UNIT-80 MG-6.5 MCG- 10 MG-2 MG-7.5 MG-5000 UNIT-80 MCG-200 MCG- 90 MG-13 MCG-2 MG-5 MG-25 MG-10 MG-1 MG- 0.5 MG-1 MG-25 MG-1 MG-1 MG	C	QL(1 EA daily); RX/OTC
ULTRA FREEDA TABS 133.333 UNIT-16.667 MG- 100 MCG-266.667 MCG- 16.667 MG-33.333 MCG- 1666.667 UNIT-16.667 MG-33.333 MG-33.333 MG-333.333 MG-3.333 MG-33.333 MG-11.667 MG-7.5 MG-83.333 MG-50 MCG-33.333 MCG-33.333 MG-66.667 UNIT-4.167 MCG-66.667 MCG	C	QL(1 EA daily); RX/OTC	ULTRACHOICE ADVANCED FORMULA TABS 120 MG-6 MG-60 MCG-400 MCG-4.5 MG- 400 UNIT-18 MCG-10 MG-5.1 MG-40 MG-275 MCG-18 MG-300 MCG- 100 MG-15 MG-3.5 MG-80 MG-2 MG-13 MCG-200 MCG-200 MCG-165 MG- 150 MCG-200 MCG-60 UNIT-80 MG-6.5 MCG-10 MG-5 MG-7.5 MG-5000 UNIT-80 MCG-200 MCG- 72 MG-13 MCG-10 MG-25 MG-5 MG-10 MG-25 MG-5 MG-1 MG	C	QL(1 EA daily); RX/OTC
ULTRA MULTI FORMULA/IRON CAPS 40 MG-1.333 MG-200 MCG-266.667 MCG-4 MG-1000 UNIT-33.333 MCG-1.133 MG-3.333 MG-3.333 MG-16.667 MG- 3333.333 UNIT-6.667 MG- 15 MG-33.333 MG-10 MG- 10 UNIT-133.333 MG-50 MCG-0.667 MG-40 MCG- 10 MG-25 MCG-5 MG-10 MG-1 MG-23.333 MCG-10 MG	C	QL(1 EA daily); RX/OTC	VENEXA FE TABS	C	QL(1 EA daily); RX/OTC
			VENEXA TABS	C	QL(1 EA daily); RX/OTC
			VENTRIXYL FE TABS	C	QL(1 EA daily); RX/OTC
			VENTRIXYL TABS	C	QL(1 EA daily); RX/OTC
			VIC-FORTE CAPS 150 MG-2 MG-1 MG-10 MCG- 8000 UNIT-5 MG-25 MG- 10 MG-10 MG-50 UNIT-80 MG-70 MG-4 MG	C	QL(1 EA daily); RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
VISION FORMULA 2 CAPS 250 MG-5 MG-1 MG-10 MG-1 MG-90 MG	C	QL(1 EA daily); RX/OTC	VITACORE TABS	C	QL(1 EA daily); RX/OTC
VISION FORMULA/LUTEIN TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG	C	QL(1 EA daily); RX/OTC	VITAMIN D3 COMPLETE TABS	C	QL(1 EA daily); RX/OTC
VISION HEALTH CAPS	C	QL(1 EA daily); RX/OTC	VITA-MIN CAPS 85 MG-1.7 MG-42.3 MCG-8.3 UNIT-255 MCG-106.3 UNIT-3.3 MCG-5.7 MG-1 MG-11.3 MG-1 MG-42.3 MG-56.7 MG-2.7 MG-4.3 MCG-56.7 MG-14 MCG-4.3 MG-42.3 MCG-14 MCG-2973 UNIT	C	QL(1 EA daily); RX/OTC
VISION OPTIMIZER CAPS	C	QL(1 EA daily); RX/OTC	VITAMINS A-D-E/SELENIUM TABS 400 UNIT-10000 UNIT-100 UNIT-50 MCG	C	QL(1 EA daily); RX/OTC
VISION VITAMINS TABS 60 MG-40 MG-2 MG-30 UNIT-5000 UNIT-40 MCG	C	QL(1 EA daily); RX/OTC	VITASANA TABS	C	QL(1 EA daily); RX/OTC
VISTA ADVANCED AREDS2 FORMULA CAPS	C	QL(1 EA daily); RX/OTC	VITATRUM TABS	C	QL(1 EA daily); RX/OTC
VISTA ADVANCED DRY EYE FORMULA CAPS	C	QL(1 EA daily); RX/OTC	VITEYES AREDS 2 FORMULA +MULTI CAPS	C	QL(1 EA daily); RX/OTC
VITA HAIR TABS 300 MCG-400 MCG-35 MG-6 MCG-100 MG-125 MG-65 MG-30 MG-18 MG-5 MG-2 MG-15 MG-150 MCG	C	QL(1 EA daily); RX/OTC	VITEYES AREDS 2 FORMULA CAPS	C	QL(1 EA daily); RX/OTC
VITA S FORTE TABS 400 UNIT-500 MG-25 MG-0.15 MG-1 MG-50 MCG-25 MG-20 MG-100 MG-10 MG-20 MG-50 MG-15 MG-3 MG-20 MCG-60 UNIT-50 MCG-0.05 MG	C	QL(1 EA daily); RX/OTC	VITEYES CLASSIC ADVANCED CAPS	C	QL(1 EA daily); RX/OTC
VITABASIC COMPLETE TABS	C	QL(1 EA daily); RX/OTC	VITEYES CLASSIC MACULAR SUPPOR CAPS	C	QL(1 EA daily); RX/OTC
VITABASIC SENIOR TABS	C	QL(1 EA daily); RX/OTC	VITEYES CLASSIC MULTIVITAMIN TABS	C	QL(1 EA daily); RX/OTC
VITABEX PLUS CAPS	C	QL(1 EA daily); RX/OTC	VITEYES CLASSIC+OMEGA-3 CAPS	C	QL(1 EA daily); RX/OTC
VITABEX CAPS	C	QL(1 EA daily); RX/OTC			
VITACEL TABS 500 MG-300 MCG-100 UNIT-1 MG-25 MG-25 MG-25 MG-50 MG-5000 UNIT-25 MG-33 MG-200 UNIT-125 MG-80 MG-10 MG-50 MCG	C	QL(1 EA daily); RX/OTC			

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VITEYES COMPLETE CAPS 83.3 MG-16.7 MG-50 MCG-133.3 MCG-3.3 MG-25 MG-66.7 UNIT-833.3 UNIT-1.67 MG-16.7 MCG-41.7 MG-83.3 MG-1.67 MG-8.3 MG-0.67 MG-3.3 MG-0.5 MG-0.33 MG-4 MG-33.3 MG-33.3 MCG-66.7 UNIT-0.83 MG-33.3 MG-20.8 MCG-1.67 MCG-16.5 MG-0.33 MG-33.3 MCG-33.3 MG-16.7 MCG-6.7 MG-83.3 MG-166.7 MCG-33.3 MCG-20 MG-6.7 MG-20 MG-33.3 MG	C	QL(1 EA daily); RX/OTC	WOMENS 50+ ADVANCED CAPS 72 MG-6 MG-30 MCG-400 MCG-1000 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-9.5 MG-2500 UNIT-20 MG-21 MG-10 MG-100 MCG-234 MCG-4.5 MG-4 MG-22.5 MG-2 MG-16 MG-150 MCG-150 MCG-33 UNIT-5 MCG-10 MCG-180 MCG-105 MCG-552 MCG-6 MG-10 MCG-2 MG-4 MG-90 MCG	C	QL(1 EA daily); RX/OTC
VITEYES OPTIC NERVE SUPPORT TABS	C	QL(1 EA daily); RX/OTC	WOMENS 50+ MULTI VITAMIN TABS	C	QL(1 EA daily); RX/OTC
VITRAMYN TABS	C	QL(1 EA daily); RX/OTC	WOMENS DAILY FORMULA TABS 60 MG-2 MG-30 MCG-400 MCG-1000 UNIT-6 MCG-1.7 MG-25 MCG-10 MG-2500 UNIT-5 MG-18 MG-500 MG-1.5 MG-50 MG-15 MG-22.5 UNIT-2 MG-2 MG-120 MCG-20 MCG	C	QL(1 EA daily); RX/OTC
VITRANOL FE TABS	C	QL(1 EA daily); RX/OTC	WOMENS LIFE PACK TABS 400 MCG-400 UNIT-25 MCG-10 MG-10 MG-250 MCG-3500 UNIT-18 MG-10 MG-300 MCG-2 MG-80 MG-150 MCG-0.75 MCG-150 MCG-30 UNIT-109 MG-2 MG-5 MCG-10 MCG-120 MCG-20 MCG-10 MCG-72 MG-2 MG-30 MG, 400 UNIT-25 MCG-10 MG-10 MG-250 MCG-3500 UNIT-18 MG-10 MG-300 MCG-2 MG-150 MCG-75 MCG-150 MCG-30 UNIT-109 MG-2 MG-5 MCG-10 MCG-2 MG-120 MCG-20 MCG-10 MCG	C	QL(1 EA daily); RX/OTC
VITRANOL TABS	C	QL(1 EA daily); RX/OTC			
VITREXATE FE TABS	C	QL(1 EA daily); RX/OTC			
VITREXATE TABS	C	QL(1 EA daily); RX/OTC			
VITREXYL + IRON TABS	C	QL(1 EA daily); RX/OTC			
VITREXYL TABS	C	QL(1 EA daily); RX/OTC			
VITRUM 50+ ADULT-MULTI TABS	C	QL(1 EA daily); RX/OTC			
VITRUM 50+ SENIOR MULTI TABS	C	QL(1 EA daily); RX/OTC			
WELLFOLA TABS	C	QL(1 EA daily); RX/OTC			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
WOMENS MULTI CAPS 72 MG-4 MG-30 MCG-600 MCG-1000 UNIT-15 MCG- 1.7 MG-20 MCG-20 MG- 9.5 MG-2500 UNIT-20 MG-18 MG-21 MG-10 MG- 100 MCG-234 MCG-3 MG-4 MG-15 MG-2 MG-16 MG-150 MCG-150 MCG- 33 UNIT-5 MCG-10 MCG- 120 MCG-70 MCG-552 MCG-6 MG-10 MCG-2 MG-2 MG-75 MCG	C	QL(1 EA daily); RX/OTC	DAILY VITAMINS TABS 60 MG-2 MG-0.4 MG-1.5 MG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT	C	QL(1 EA daily); RX/OTC
WOMENS MULTIVITAMIN TABS 75 MG-1.7 MG- 1000 MCG-400 MCG-25 MCG-6 MCG-1.3 MG-25 MCG-16 MG-665 MCG-5 MG-18 MG-380 MG-1.2 MG-8 MG-0.9 MG-150 MCG-3.4 MG-1.8 MG-25 MCG-27.5 MCG	C	QL(1 EA daily); RX/OTC	DAILY VITES TABS 60 MG-2 MG-0.4 MG-1.5 MG- 6 MCG-5000 UNIT-10 MG-1.7 MG-20 MG-400 UNIT-30 UNIT	C	QL(1 EA daily); RX/OTC
YELETS TEENAGE FORMULA TABS	C	QL(1 EA daily); RX/OTC	DAILY VITE TABS 400 UNIT-60 MG-2 MG-30 UNIT-400 MCG-6 MCG- 1.7 MG-20 MG-5000 UNIT-10 MG-1.5 MG, 60 MG-2 MG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-1.5 MG-30 UNIT	C	QL(1 EA daily); RX/OTC
Multivitamins			DAILY-VITE MULTIVITAMIN TABS 60 MG-2 MG-400 MCG-20 MG-1.5 MG-10 MCG-6 MCG-1.7 MG-1500 MCG	C	QL(1 EA daily); RX/OTC
ALTRIXA TABS	C	QL(1 EA daily); RX/OTC	DAILY-VITE TABS 60 MG- 2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-3000 UNIT-10 MG-1.5 MG-45 MG-30 UNIT	C	QL(1 EA daily); RX/OTC
AMLADEX TABS	C	QL(1 EA daily); RX/OTC	DAVIMET-M CHEW	C	QL(1 EA daily); RX/OTC
ANTI-OXIDANT TABS 250 MG-200 UNIT-10000 UNIT	C	QL(1 EA daily); RX/OTC	DERMACINRX DAVIMET CHEW	C	QL(1 EA daily); RX/OTC
CENTRUM MENOPAUSE MIND/MOOD TABS	C	QL(1 EA daily); RX/OTC	DERMACINRX MULTIVITAMIN CHEW	C	QL(1 EA daily); RX/OTC
DAILY MULTIPLE VITAMINS TABS	C	QL(1 EA daily); RX/OTC	ESTROFACTORS TABS	C	QL(1 EA daily); RX/OTC
DAILY VALUE MULTIVITAMIN TABS 400 UNIT-60 MG-2 MG-300 MCG-30 UNIT-400 MCG- 1.5 MG-6 MCG-5000 UNIT-1.7 MG-20 MG-10 MG, 400 UNIT-60 MG-2 MG-300 MCG-400 MCG- 1.5 MG-6 MCG-5000 UNIT-1.7 MG-20 MG-10 MG-30 UNIT	C	QL(1 EA daily); RX/OTC	FOLACHEW CHEW	C	QL(1 EA daily); RX/OTC
			FOLAWISE TABS	C	QL(1 EA daily); RX/OTC
			FOLCYTEINE TABS	C	QL(1 EA daily); RX/OTC
			GENICIN VITA-Q TABS	C	QL(1 EA daily); RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
GNP ESSENTIAL ONE DAILY TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-75 MG-1.5 MG-30 UNIT	C	QL(1 EA daily); RX/OTC	MULTIVITAMIN ADULT TABS	C	QL(1 EA daily); RX/OTC
HEALTHY HAIR/SKIN/NAILS TABS 2 MG-2000 MCG-400 MCG-25 MG-100 MG-25 MCG-1.7 MG-10 MG-40 MG-1.5 MG-50 MG-2500 UNIT-50 MG-50 MG	C	QL(1 EA daily); RX/OTC	MULTIVITAMIN IRON-FREE TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-3000 UNIT-10 MG-45 MG-1.5 MG-30 UNIT	C	QL(1 EA daily); RX/OTC
HIGH POTENCY MULTIVITAMIN TABS	C	QL(1 EA daily); RX/OTC	MULTIVITAMIN TABS	C	QL(1 EA daily); RX/OTC
MINCORA TABS	C	QL(1 EA daily); RX/OTC	MULTI-VITAMIN TABS 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-1.5 MG-30 UNIT	C	QL(1 EA daily); RX/OTC
MULTI VITAMIN W/D-3 TABS	C	QL(1 EA daily); RX/OTC	NEOMULTIVITE TABS	C	QL(1 EA daily); RX/OTC
MULTI VITAMIN TABS	C	QL(1 EA daily); RX/OTC	NEWVITE TABS	C	QL(1 EA daily); RX/OTC
MULTIPLE VITAMIN-FOLIC ACID TABS 60 MG-2 MG-400 MCG-1.5 MG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 UNIT	C	QL(1 EA daily); RX/OTC	OMNICAP TABS	C	QL(1 EA daily); RX/OTC
MULTIPLE VITAMINS ESSENTIAL TABS 60 MG-2 MG-0.4 MG-20 MG-1.5 MG-6 MCG-10 MG-1.7 MG-400 UNIT-30 UNIT-5000 UNIT	C	QL(1 EA daily); RX/OTC	ONCE DAILY TABS 400 UNIT-50 MG-1 MG-2 MG-1 MCG-5000 UNIT-1 MG-2.5 MG-20 MG	C	QL(1 EA daily); RX/OTC
MULTIPLE VITAMINS TABS 60 MG-2 MG-400 MCG-1.5 MG-400 UNIT-6 MCG-10 MG-1.7 MG-20 MG-5000 UNIT-30 UNIT, 60 MG-2 MG-400 MCG-400 UNIT-1.7 MG-20 MG-10 MG-1.5 MG-30 UNIT-5000 UNIT, 60 MG-400 MCG-2 MG-6 MCG-10 MG-1.7 MG-20 MG-5000 UNIT-1.5 MG-400 UNIT-30 UNIT	C	QL(1 EA daily); RX/OTC	ONE DAILY ESSENTIALS TABS	C	QL(1 EA daily); RX/OTC
<i>multiple vitamin TABS</i>	C	QL(1 EA daily); RX/OTC	ONE DAILY ESSENTIAL TABS	C	QL(1 EA daily); RX/OTC
			ONE DAILY MULTIVITAMIN ADULT TABS 60 MG-2 MG-0.4 MG-1.5 MG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT	C	QL(1 EA daily); RX/OTC
			ONE DAILY TABS 60 MG-2 MG-1.5 MG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT	C	QL(1 EA daily); RX/OTC
			ONE VITE DAILY MULTIVITAMIN TABS	C	QL(1 EA daily); RX/OTC
			ONE-A-DAY ADULT VITACRAVES+DHA CHEW	C	QL(1 EA daily); RX/OTC

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ONE-DAILY MULTI VITAMINS TABS 50 MG-20 MG-1 MG-1.5 MG-400 UNIT-3 MCG-1 MG-1.7 MG-4000 UNIT-60 MG	C	QL(1 EA daily); RX/OTC	THERA TABS	C	QL(1 EA daily); RX/OTC
ONE-DAILY MULTI-VITAMIN TABS 50 MG-1 MG-1.5 MG-10 MCG-3 MCG-1.7 MG-20 MG-1200 MCG-1 MG-60 MG	C	QL(1 EA daily); RX/OTC	THERA-TABS TABS 90 MG-3 MG-30 MCG-400 MCG-3 MG-20 MG-400 UNIT-9 MCG-5000 UNIT-10 MG-3.4 MG-30 UNIT	C	QL(1 EA daily); RX/OTC
QC ESSENTIALS TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-1.5 MG-30 UNIT	C	QL(1 EA daily); RX/OTC	THEREMS TABS	C	QL(1 EA daily); RX/OTC
QUINTABS TABS	C	QL(1 EA daily); RX/OTC	TM-DAILY VITE TABS	C	QL(1 EA daily); RX/OTC
RELCARE TABS	C	QL(1 EA daily); RX/OTC	TRUE DAILY VITE TABS 60 MG-400 MCG-1.5 MG-20 MG-2 MG-1.7 MG-10 MCG-1500 MCG-6 MCG	C	QL(1 EA daily); RX/OTC
STRESS FORMULA/ZINC/ENERGY TABS	C	QL(1 EA daily); RX/OTC	TRUE MULTIVITAMIN TABS	C	QL(1 EA daily); RX/OTC
STRESS FORMULA TABS 500 MG-3 MG-45 MCG-400 MCG-12 MCG-20 MG-10 MG-100 MG-10 MG-30 UNIT, 500 MG-5 MG-45 MCG-400 MCG-12 MCG-10 MG-100 MG-20 MG-10 MG-30 UNIT, 500 MG-5 MG-45 MCG-400 MCG-15 MG-12 MCG-20 MG-10 MG-100 MG-30 UNIT	C	QL(1 EA daily); RX/OTC	VIREXA TABS	C	QL(1 EA daily); RX/OTC
STRESSTABS ENERGY TABS	C	QL(1 EA daily); RX/OTC	VIT E-VIT C-BETA CAROTENE TABS 250 MG-5000 UNIT-200 UNIT	C	QL(1 EA daily); RX/OTC
TAB-A-VITE/BETA CAROTENE TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-3000 UNIT-10 MG-1.5 MG-45 MG-30 UNIT	C	QL(1 EA daily); RX/OTC	VITALEE TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-3000 UNIT-10 MG-1.5 MG-30 UNIT	C	QL(1 EA daily); RX/OTC
TAB-A-VITE TABS 60 MG-2 MG-400 MCG-20 MG-1.5 MG-10 MCG-6 MCG-1.7 MG-1500 MCG	C	QL(1 EA daily); RX/OTC	VITRAX TABS	C	QL(1 EA daily); RX/OTC
			<b>Ped Multi Vitamins w/Fl &amp; FE</b>		
			<i>ped multivitamins w/fl &amp; iron SOLN</i>	C	QL(50 ML per fill retail); AL(Up to 21 yrs old); RX/OTC
			<b>Ped MV w/ Iron</b>		
			BPROTECTED PEDIA POLY-VITE/FE SOLN	C	QL(60 ML per fill retail)
			ENFAMIL POLY-VI-SOL-IRON SOLN 11 MG/ML	C	QL(60 ML per fill retail)
			MULTIVITAMIN DROPS/IRON SOLN	C	QL(60 ML per fill retail)
			MULTIVITAMIN INFANT & TODDLER SOLN	C	QL(60 ML per fill retail)
			POLY-VITE/IRON SOLN	C	QL(60 ML per fill retail)

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Pediatric Multiple Vitamins			A THRU Z ADVANTAGE TABS 120 MG-6 MG-50 MCG-60 UNIT-400 MCG-400 UNIT-18 MCG-5.1 MG-25 MCG-40 MG-3500 UNIT-12 MG-18 MG-4.5 MG-40 MG-11 MG-60 MCG-4 MG-100 MG-80 MG-75 MCG-150 MCG-48 MG-0.9 MG-5 MCG-10 MCG-4 MG-70 MCG-10 MCG-120 MCG-72 MG-50 MG-60 MG, 400 UNIT-120 MG-6 MG-40 MCG-60 UNIT-400 MCG-18 MCG-5.1 MG-25 MCG-40 MG-5000 UNIT-10 MG-18 MG-4.5 MG-40 MG-15 MG-2 MG-80 MG-60 MCG-100 MG-150 MCG-75 MCG-48 MG-72 MG-5 MCG-10 MCG-4 MG-120 MCG-70 MCG-10 MCG-4 MG-60 MG-50 MG	C	QL(1 EA daily); RX/OTC
BPROTECTED PEDIA POLY-VITE SOLN PO	C	QL(50 ML per fill retail)			
MULTIVITAMIN INFANT & TODDLER SOLN PO	C	QL(50 ML per fill retail)			
PC PEDIATRIC POLY-VITAMIN DROP SOLN PO	C	QL(50 ML per fill retail)			
POLY-VI-SOL SOLN PO	C	QL(50 ML per fill retail)			
POLY-VITA SOLN PO	C	QL(50 ML per fill retail)			
POLY-VITE PEDIATRIC SOLN PO	C	QL(50 ML per fill retail)			
Prenatal Vitamins			ADRENAL STRESS CALM TABS	C	QL(1 EA daily); RX/OTC
KPN PRENATAL TABS	C	QL(1 EA daily)			
<i>prenatal vit w/ docusate-iron carbonyl-folic acid TABS</i>	C	QL(1 EA daily)			
SELECT-OB+DHA MISC	C	QL(1 EA daily)			
VITAFOL-ONE CAPS	C	QL(1 EA daily)			
Specialty Vitamins Products			ALLERWELL ALLERGY FORMULA TABS	C	QL(1 EA daily); RX/OTC
			BIOTIN PLUS KERATIN TABS	C	QL(1 EA daily); RX/OTC
			BRAIN MIGHT/DHA & CO Q10 TABS	C	QL(1 EA daily); RX/OTC
			CENTRUM PERFORMANCE TABS	C	QL(1 EA daily); RX/OTC
			CENTRUM SPECIALIST ENERGY TABS	C	QL(1 EA daily); RX/OTC
			CVS HAIR/SKIN/NAILS TABS	C	QL(1 EA daily); RX/OTC
			CVS MENOPAUSE SUPPORT TABS	C	QL(1 EA daily); RX/OTC
			ELON MATRIX 5000 COMPLETE TABS	C	QL(1 EA daily); RX/OTC
			ELON MATRIX 5000 TABS	C	QL(1 EA daily); RX/OTC
			ELON MATRIX COMPLETE TABS	C	QL(1 EA daily); RX/OTC

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ELON MATRIX PLUS TABS	C	QL(1 EA daily); RX/OTC	VITAMINS FOR HAIR TABS 111 MCG-400 MCG-35 MG-250 MG-50 MG-100 MG-30 MG-15 MG-15 MG-0.15 MG-5 MG-10 MG-6 MCG-5 UNIT	C	QL(1 EA daily); RX/OTC
ELON R3 TABS	C	QL(1 EA daily); RX/OTC	Vitamins w/ Lipotropics		
GLP-DLAX TABS	C	QL(1 EA daily); RX/OTC	<i>vitamins w/ lipotropics CAPS</i>	C	QL(1 EA daily)
HAIR NOURISHING SUPPLEMENT TABS	C	QL(1 EA daily); RX/OTC	<b>MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms</b>		
HEALTHY HEART COMPLEX TABS	C	QL(1 EA daily); RX/OTC	Central Muscle Relaxants		
HEART TABS TABS	C	QL(1 EA daily); RX/OTC	AMRIX CP24 (cyclobenzaprine hcl)	NP	
LIPIDSHIELD PLUS TABS	C	QL(1 EA daily); RX/OTC	<i>baclofen SOLN PO 5 MG/5ML, 10 MG/5ML</i>	NP	
MEMORY COMPLEX BRAIN HEALTH TABS	C	QL(1 EA daily); RX/OTC	<i>baclofen SUSP</i>	NP	
METAVEX TABS	C	QL(1 EA daily); RX/OTC	<i>baclofen TABS</i>	P	
MG PLUS PROTEIN TABS	C	QL(1 EA daily); RX/OTC	<i>carisoprodol TABS</i>	NP	
MIL ADREGEN TABS	C	QL(1 EA daily); RX/OTC	<i>chlorzoxazone TABS</i>	P	
NERVIVE NERVE RELIEF TABS	C	QL(1 EA daily); RX/OTC	<i>cyclobenzaprine hcl CP24</i>	NP	
<i>specialty vitamins products TABS</i>	C	QL(1 EA daily); RX/OTC	<i>cyclobenzaprine hcl TABS 7.5 MG</i>	NP	QL(4 EA daily)
SYNVERA TABS	C	QL(1 EA daily); RX/OTC	<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	P	QL(3 EA daily)
ULTIMATE FAT BURNER TABS 5 MG-12.5 MG-5 MCG-5 MG-12.5 MG-5 MG-25 MG-10 MG-125 MCG-10 MG-150 MG-25 MG-25 MG-100 MG-25 MG	C	QL(1 EA daily); RX/OTC	<i>cyclobenzaprine hcl TABS 7.5 MG</i>	P	QL(4 EA daily)
UPSPRING HE NATAL TABS	C	QL(1 EA daily); RX/OTC	FLEQSUVY SUSP (baclofen)	NP	
VARISAN VITALITY TABS 25 MG-30 MG-25 UNIT-8 MCG-30 MG-40 MG-25 MG-10 MG-100 MG-100 MG-100 MG	C	QL(1 EA daily); RX/OTC	LYVISPAH PACK	NP	
			<i>metaxalone</i>	NP	
			METAXALONE 640 MG	NP	
			<i>methocarbamol TABS 1000 MG</i>	NP	
			<i>methocarbamol TABS</i>	P	
			ONTRALFY SOLN PO 2 MG/5ML	NP	
			<i>orphenadrine citrate TB12</i>	P	QL(2 EA daily)
			OZOBAX DS SOLN PO (baclofen)	NP	

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Drug Name	Drug Tier	Requirements/Limits
SOMA TABS (carisoprodol)	NP	
tizanidine hcl CAPS	NP	
TIZANIDINE HCL CAPS 8 MG	NP	
tizanidine hcl TABS	P	
ZANAFLEX CAPS	NP	
ZANAFLEX CAPS (tizanidine hcl)	NP	
ZANAFLEX TABS 4 MG (tizanidine hcl)	NP	
Direct Muscle Relaxants		
DANTRIUM CAPS 25 MG (dantrolene sodium)	NP	
dantrolene sodium CAPS	P	
Muscle Relaxant Combinations		
orphenadrine w/ aspirin & caff	NP	
<b>NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus</b>		
Nasal Agent Combinations		
azelastine hcl-fluticasone propionate SUSP	NP	
DYMISTA SUSP (azelastine hcl-fluticasone propionate)	NP	
RYALTRIS	NP	
Nasal Agents - Misc.		
saline SOLN 0.65 %	C	1 package(s) per fill retail
Nasal Antiallergy		
azelastine hcl 0.1 %, 137 MCG/SPRAY	P	1 package(s) per 31 day(s) retail; 1 package(s) per 31 day(s) mail
azelastine hcl 0.15 %	NP	1 package(s) per 31 day(s) retail; RX/OTC

Drug Name	Drug Tier	Requirements/Limits
cromolyn sodium (nasal) 5.2 MG/ACT	C	QL(26 ML per 31 day(s) retail)
olopatadine hcl (nasal)	NP	
Nasal Anticholinergics		
ipratropium bromide (nasal) 0.03 %	P	QL(31 ML per 31 day(s) retail)
ipratropium bromide (nasal) 0.06 %	P	QL(15 ML per 31 day(s) retail)
Nasal Steroids		
budesonide (nasal)	C	QL(9 ML per 31 day(s) retail)
flunisolide (nasal)	NP	QL(25 ML per 31 day(s) retail)
fluticasone propionate (nasal) SUSP	P	1 package(s) per fill retail; RX/OTC
mometasone furoate (nasal) SUSP	P	RX/OTC
OMNARIS SUSP	NP	
QNASL	NP	
QNASL CHILDRENS	NP	
triamcinolone acetonide (nasal) AERO	C	QL(17 ML per 31 day(s) retail); AL(At least 2 yrs old)
XHANCE EXHU	NP	
Sympathomimetic Decongestants		
pseudoephedrine hcl TABS	C	
pseudoephedrine hcl TB12	C	QL(2 EA daily)
<b>NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles</b>		
ALS Agents		
riluzole TABS	C	PA
Muscular Dystrophy Agents		
VYONDYS 53	C	SP; PA
<b>NUTRIENTS</b>		
Misc. Nutritional Substances		

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Drug Name	Drug Tier	Requirements/Limits
<i>omega-3 fatty acids CAPS 1000 MG</i>	C	QL(6 EA daily)
<b>OPHTHALMIC AGENTS - Drugs to Treat the Eye</b>		
<b>Artificial Tears and Lubricants</b>		
<i>polyvinyl alcohol 1.4 %</i>	C	
<i>white petrolatum-mineral oil</i>	C	1 package(s) per fill retail
<b>Beta-blockers - Ophthalmic</b>		
<i>betaxolol hcl (ophth) SOLN</i>	P	1 package(s) per 31 day(s) retail
BETIMOL	NP	
BETIMOL ( <i>timolol</i> )	NP	
BETOPTIC-S SUSP	NP	
<i>brimonidine tartrate-timolol maleate</i>	NP	Brand Preferred
<i>carteolol hcl (ophth)</i>	P	1 max fill(s) per 31 day(s) retail
COMBIGAN ( <i>brimonidine tartrate-timolol maleate</i> )	P	Brand Preferred
COSOPT ( <i>dorzolamide hcl-timolol maleate</i> )	NP	QL(10 ML per 31 day(s) retail)
COSOPT PF ( <i>dorzolamide hcl-timolol maleate</i> )	NP	
<i>dorzolamide hcl-timolol maleate</i>	NP	
<i>dorzolamide hcl-timolol maleate</i>	P	QL(10 ML per 31 day(s) retail)
ISTALOL SOLN ( <i>timolol maleate (ophth)</i> )	NP	
<i>levobunolol hcl 0.5 %</i>	P	QL(15 ML per 31 day(s) retail)
<i>timolol</i>	NP	
<i>timolol maleate (ophth) SOLG</i>	P	
<i>timolol maleate (ophth) SOLN 0.5 %</i>	NP	
<i>timolol maleate (ophth) SOLN</i>	P	QL(15 ML per 31 day(s) retail)

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

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>bacitracin-polymyxin b (ophth)</i>	P	QL(4 GM per 31 day(s) retail)	<i>naphazoline w/ pheniramine 0.315 %-0.027 %</i>	C	QL(15 ML per 31 day(s) retail; 15 ML per 31 days mail)
<i>besifloxacin hcl 0.6 %</i>	NP		<i>naphazoline w/ pheniramine 0.3 %-0.025 %</i>	C	QL(15 ML per 31 day(s) retail)
BESIVANCE 0.6 % ( <i>besifloxacin hcl</i> )	NP		<i>tetrahydrozoline hcl (ophth) 0.05 %</i>	C	1 package(s) per 31 day(s) retail
CILOXAN OINT	NP	1 package(s) per fill retail	<b>Ophthalmic Immunomodulators</b>		
<i>ciprofloxacin hcl (ophth) SOLN</i>	P	1 package(s) per fill retail	CEQUA SOLN	NP	
<i>erythromycin (ophth)</i>	P		<i>cyclosporine (ophth) EMUL</i>	NP	Brand Preferred
<i>gatifloxacin (ophth)</i>	NP		RESTASIS MULTIDOSE EMUL	P	
<i>gentamicin sulfate (ophth) SOLN</i>	P	2 package(s) per fill retail	RESTASIS EMUL ( <i>cyclosporine (ophth)</i> )	P	Brand Preferred
<i>levofloxacin (ophth) 0.5 %</i>	NP		VERKAZIA EMUL	NP	
<i>moxifloxacin hcl (ophth) SOLN OP</i>	P	QL(3 ML per fill retail)	VEVYE SOLN	NP	
<i>neomycin-bacitracin zn-polymyxin</i>	P	QL(4 GM per 31 day(s) retail)	<b>Ophthalmic Integrin Antagonists</b>		
<i>neomycin-polymyxin-gramicidin</i>	P	1 package(s) per fill retail	XIIDRA	P	
OCUFLOX ( <i>ofloxacin (ophth)</i> )	NP	QL(10 ML per 31 day(s) retail)	<b>Ophthalmic Kinase Inhibitors</b>		
<i>ofloxacin (ophth)</i>	P	QL(10 ML per 31 day(s) retail)	RHOPRESSA	P	
<i>polymyxin b-trimethoprim</i>	P	1 package(s) per fill retail; 1 max fill(s) per 30 day(s) retail	ROCKLATAN	P	
<i>sulfacetamide sodium (ophth) OINT</i>	P	QL(4 GM per 31 day(s) retail)	<b>Ophthalmic Local Anesthetics</b>		
<i>sulfacetamide sodium (ophth) SOLN</i>	C	QL(15 ML per 31 day(s) retail)	ALTACAINE 0.5 % ( <i>tetracaine hcl (ophth)</i> )	C	
<i>sulfacetamide sodium (ophth) SOLN</i>	P	QL(15 ML per 31 day(s) retail)	TETRACAINE HCL 0.5 %	C	
<i>tobramycin (ophth) SOLN</i>	NP	QL(5 ML per 31 day(s) retail)	<i>tetracaine hcl (ophth)</i>	C	
TOBREX OINT	NP		<b>Ophthalmic Steroids</b>		
<i>trifluridine</i>	C	QL(8 ML per 31 day(s) retail)	ALREX SUSP ( <i>loteprednol etabonate</i> )	NP	
VIGAMOX SOLN OP ( <i>moxifloxacin hcl (ophth)</i> )	NP	QL(3 ML per fill retail)	<i>bacitracin-poly-neomycin-hc</i>	P	
<b>Ophthalmic Decongestants</b>			<i>dexamethasone sodium phosphate (ophth)</i>	P	
			<i>difluprednate</i>	NP	Brand Preferred

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
DUREZOL (difluprednate)	P	Brand Preferred	PRED MILD	P	1 package(s) per 31 day(s) retail
EYSUVIS SUSP	NP		<i>prednisolone acetate (ophth)</i>	P	QL(15 ML per 31 day(s) retail)
FLAREX	P		PREDNISOLONE ACETATE P-F	C	QL(15 ML per 31 day(s) retail)
<i>fluorometholone (ophth) SUSP</i>	P	1 package(s) per 31 day(s) retail	PREDNISOLONE SODIUM PHOSPHATE	NP	1 package(s) per 31 day(s) retail
FML FORTE SUSP	NP		<i>sulfacetamide sod-prednisolone SOLN</i>	P	QL(10 ML per 31 day(s) retail)
FML LIQUIFILM SUSP ( <i>fluorometholone (ophth)</i> )	NP	1 package(s) per 31 day(s) retail	TOBRADEX ST SUSP	NP	
INVELTYS SUSP	NP		TOBRADEX OINT	NP	QL(4 GM per 31 day(s) retail)
LOTEMAX SM GEL	NP		<i>tobramycin-dexamethasone SUSP</i>	P	1 package(s) per 31 day(s) retail
LOTEMAX GEL ( <i>loteprednol etabonate</i> )	NP		ZYLET 0.3 %-0.5 % ( <i>loteprednol etabonate-tobramycin</i> )	NP	
LOTEMAX OINT	NP		Ophthalmics - Misc.		
LOTEMAX SUSP ( <i>loteprednol etabonate</i> )	NP		ACULAR ( <i>ketorolac tromethamine (ophth)</i> )	NP	1 package(s) per 31 day(s) retail
<i>loteprednol etabonate GEL</i>	NP		ACULAR LS ( <i>ketorolac tromethamine (ophth)</i> )	NP	1 max fill(s) per 31 day(s) retail
<i>loteprednol etabonate SUSP</i>	NP		ACUVAIL	NP	
<i>loteprednol etabonate-tobramycin</i>	NP		<i>azelastine hcl (ophth)</i>	NP	QL(6 ML per 31 day(s) retail)
MAXIDEX SUSP OP	P		AZOPT ( <i>brinzolamide</i> )	P	Brand Preferred; 1 package(s) per 31 day(s) retail
MAXITROL OINT ( <i>neomycin-polymyx-dexameth</i> )	NP	QL(4 GM per 31 day(s) retail)	<i>bepotastine besilate</i>	NP	
MAXITROL SUSP ( <i>neomycin-polymyx-dexameth</i> )	NP	QL(10 ML per 31 day(s) retail)	BEPREVE ( <i>bepotastine besilate</i> )	NP	
MAXITROL SUSP ( <i>neomycin-polymyx-dexameth</i> )	NP	QL(10 ML per 31 day(s) retail)	<i>brinzolamide</i>	NP	Brand Preferred; 1 package(s) per 31 day(s) retail
<i>neomycin-polymyx-dexameth OINT</i>	P	QL(4 GM per 31 day(s) retail)	<i>bromfenac sodium (ophth)</i>	NP	
<i>neomycin-polymyx-dexameth SUSP</i>	P	QL(10 ML per 31 day(s) retail)	BROMSITE ( <i>bromfenac sodium (ophth)</i> )	NP	
<i>neomycin-polymyxin-hc (ophth)</i>	P	QL(15 ML per 31 day(s) retail)			
PRED FORTE ( <i>prednisolone acetate (ophth)</i> )	NP	QL(15 ML per 31 day(s) retail)			

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Drug Name	Drug Tier	Requirements/Limits
<i>cromolyn sodium (ophth)</i>	P	QL(10 ML per 31 day(s) retail)
<i>diclofenac sodium (ophth)</i>	P	QL(3 ML per 31 day(s) retail)
<i>dorzolamide hcl</i>	P	QL(10 ML per 31 day(s) retail)
<i>epinastine hcl (ophth)</i>	NP	
<i>flurbiprofen sodium</i>	P	QL(5 ML per 31 day(s) retail)
ILEVRO	NP	
<i>ketorolac tromethamine (ophth) 0.5 %</i>	P	1 package(s) per 31 day(s) retail
<i>ketorolac tromethamine (ophth) 0.4 %</i>	P	1 max fill(s) per 31 day(s) retail
<i>ketotifen fumarate (ophth) 0.035 %</i>	P	QL(10 ML per 31 day(s) retail)
MIEBO	NP	
NEVANAC	P	
<i>olopatadine hcl</i>	P	
PROLENSA ( <i>bromfenac sodium (ophth)</i> )	NP	
TRYPTYR SOLN OP 0.003 %	NP	
ZERVIATE	NP	
Prostaglandins - Ophthalmic		
<i>bimatoprost SOLN</i>	NP	
IYUZEH SOLN	NP	
<i>latanoprost SOLN</i>	P	QL(5 ML per 31 day(s) retail)
LUMIGAN SOLN 0.01 %	P	
<i>tafluprost</i>	NP	
TRAVATAN Z SOLN ( <i>travoprost</i> )	P	Brand Preferred
<i>travoprost SOLN</i>	NP	Brand Preferred
VYZULTA	NP	
XALATAN SOLN ( <i>latanoprost</i> )	NP	QL(5 ML per 31 day(s) retail)
XELPROS EMUL	NP	
ZIOPTAN ( <i>tafluprost</i> )	NP	
<b>OTIC AGENTS - Drugs to Treat the Ear</b>		

Drug Name	Drug Tier	Requirements/Limits
Otic Agents - Miscellaneous		
<i>acetic acid (otic)</i>	C	QL(15 ML per 31 day(s) retail)
<i>carbamide peroxide (otic) 6.5 %</i>	C	QL(15 ML per 31 day(s) retail)
Otic Anti-infectives		
<i>ciprofloxacin hcl (otic)</i>	NP	
<i>ofloxacin (otic)</i>	P	1 package(s) per fill retail
Otic Combinations		
CIPRO HC 1 %-0.2 % ( <i>ciprofloxacin-hydrocortisone</i> )	NP	
<i>ciprofloxacin-dexamethasone</i>	P	QL(7.5 ML per fill retail); 1 max fill(s) per 30 day(s) retail
<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 acetamide</i>	NP	
<i>ciprofloxacin-hydrocortisone</i>	NP	
CORTISPORIN-TC	NP	
<i>neomycin-polymyxin-hc (otic) SOLN</i>	P	QL(10 ML per fill retail)
<i>neomycin-polymyxin-hc (otic) SUSP</i>	P	1 package(s) per fill retail
Otic Steroids		
<i>fluocinolone acetamide (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)
<b>OXYTOCICS - Drugs to Prevent/Control Uterine Bleeding</b>		
Oxytocics		

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Drug Name	Drug Tier	Requirements/Limits
<i>methylergonovine maleate</i> TABS	C	
<b>PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System</b>		
Immune Serums		
GAMMAGARD	C	SP; PA
GAMMAGARD ERC 5 GM/50ML, 10 GM/100ML	C	SP; PA
GAMMAGARD S/D LESS IGA SOLR	C	SP; PA
GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	C	SP; PA
GAMUNEX-C 1 GM/10ML, 2.5 GM/25ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	C	SP; PA
HYPERRHO SOSY IM 1500 UNIT	C	SP
OCTAGAM SOLN 30 GM/300ML	C	SP; PA
RHOGAM ULTRA-FILTERED PLUS SOSY IM	C	SP
XEMBIFY	C	SP; PA
<b>PENICILLINS - Drugs to Treat Bacterial Infections</b>		
Amidinopenicillins		
PIVYA TABS PO 185 MG	NP	
Aminopenicillins		
<i>amoxicillin</i> CAPS	P	
<i>amoxicillin</i> CAPS	P	
<i>amoxicillin</i> CHEW 125 MG, 250 MG	P	
<i>amoxicillin</i> SUSR	P	
<i>amoxicillin</i> TABS	P	
<i>ampicillin</i> CAPS 500 MG	P	
Natural Penicillins		

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

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

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

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

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Drug Name	Drug Tier	Requirements/Limits
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	
PONVORY STARTER PACK TBPK	NP	SP
PONVORY TABS	NP	SP
PONVORY TABS	NP	
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 (dimethyl fumarate)	NP	SP
TECFIDERA CPDR (dimethyl fumarate)	NP	SP
<i>teriflunomide</i>	P	QL(1 EA daily); SP
TYRUKO CONC IV 300 MG/15ML	C	AL(At least 18 yrs old); SP; PA
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) TABS</i>	NP	

Drug Name	Drug Tier	Requirements/Limits
GRALISE TABS ( <i>gabapentin (once-daily)</i> )	NP	
LYRICA CR ( <i>pregabalin (once-daily)</i> )	NP	
<i>pregabalin (once-daily)</i>	NP	
Premenstrual Dysphoric Disorder (PMDD) Agents		
<i>fluoxetine hcl (pmdd) TABS 20 MG</i>	P	QL(1 EA daily)
<i>fluoxetine hcl (pmdd) TABS 10 MG</i>	P	QL(2 EA daily)
Restless Leg Syndrome (RLS) Agents		
HORIZANT	NP	
Smoking Deterrents		
<i>bupropion hcl (smoking deterrent)</i>	P	QL(2 EA daily)
CHANTIX CONTINUING MONTH PAK TABS ( <i>varenicline tartrate</i> )	P	QL(2 EA daily; 56 EA per 30 day(s) retail)
CHANTIX STARTING MONTH PAK TBPK ( <i>varenicline tartrate</i> )	P	QL(2 EA daily; 53 EA per 30 day(s) retail)
CHANTIX TABS 1 MG ( <i>varenicline tartrate</i> )	P	QL(2 EA daily; 56 EA per 30 day(s) retail)
CHANTIX TABS 0.5 MG ( <i>varenicline tartrate</i> )	P	QL(2 EA daily)
<i>nicotine polacrilex GUM</i>	P	QL(24 EA daily)
<i>nicotine polacrilex LOZG</i>	P	QL(20 EA daily)
NICOTINE KIT	P	QL(56 EA per fill retail)
<i>nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR</i>	P	QL(1 EA daily)
NICOTROL NS SOLN	P	QL(4 ML daily)
<i>varenicline tartrate TABS 1 MG</i>	P	QL(2 EA daily; 56 EA per 30 day(s) retail)
<i>varenicline tartrate TABS 0.5 MG</i>	P	QL(2 EA daily)

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Drug Name	Drug Tier	Requirements/Limits
<i>varenicline tartrate</i> TBPK	P	QL(2 EA daily; 53 EA per 30 day(s) retail)
Transthyretin Amyloidosis Agents		
TEGSEDI	C	SP; PA
Vasomotor Symptom Agents		
<i>paroxetine mesylate (vasomotor)</i>	NP	
<b>RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions</b>		
Cystic Fibrosis Agents		
ORKAMBI PACK	C	SP; PA
ORKAMBI TABS	C	SP; PA
SYMDEKO	C	SP; PA
TRIKAFTA TBPK	C	QL(3 EA daily); SP; PA
Pulmonary Fibrosis Agents		
OFEV	C	SP; PA
<i>pirfenidone</i> CAPS	C	SP; PA
<i>pirfenidone</i> TABS	C	SP; PA
<b>TETRACYCLINES - Drugs to Treat Bacterial Infections</b>		
Aminomethylcyclines		
NUZYRA TABS	NP	
Tetracyclines		
<i>demeclocycline hcl</i> TABS	NP	
DORYX MPC TBEC 60 MG	NP	
<i>doxycycline (monohydrate)</i> CAPS	NP	
<i>doxycycline (monohydrate)</i> SUSR	NP	
<i>doxycycline (monohydrate)</i> TABS	NP	
<i>doxycycline hyclate</i> CAPS	P	
<i>doxycycline hyclate</i> TABS	P	
<i>doxycycline hyclate</i> TBEC	NP	

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

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

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Drug Name	Drug Tier	Requirements/Limits
<i>pantoprazole sodium</i> PACK	NP	Brand Preferred
<i>pantoprazole sodium</i> TBEC 40 MG	P	QL(2 EA daily)
<i>pantoprazole sodium</i> TBEC 20 MG	P	QL(1 EA daily)
PREVACID SOLUTAB TBDD ( <i>lansoprazole</i> )	NP	RX/OTC
PREVACID CPDR 30 MG ( <i>lansoprazole</i> )	NP	QL(2 EA daily)
PRILOSEC PACK	NP	
PROTONIX PACK ( <i>pantoprazole sodium</i> )	P	Brand Preferred
PROTONIX TBEC 20 MG ( <i>pantoprazole sodium</i> )	NP	QL(1 EA daily)
PROTONIX TBEC 40 MG ( <i>pantoprazole sodium</i> )	NP	QL(2 EA daily)
<i>rabeprazole sodium</i> TBEC	NP	
Ulcer Drugs - Prostaglandins		
<i>misoprostol</i>	C	PA
Ulcer Therapy Combinations		
<i>amoxicillin-clarithromycin</i> w/ <i>lansoprazole</i> THPK	C	14 day(s) max supply per 365 day(s) retail
KONVOMEK SUSR	NP	
<i>omeprazole-sodium bicarbonate</i> CAPS	NP	RX/OTC
<i>omeprazole-sodium bicarbonate</i> PACK	NP	
<b>URINARY ANTISPASMODICS - Drugs to Treat</b>		
<b>Miscellaneous Bladder Spasms</b>		
Urinary Antispasmodic - Antimuscarinics (Anticholinergic)		
<i>darifenacin hydrobromide</i>	NP	
<i>fesoterodine fumarate</i>	P	
<i>oxybutynin chloride</i> SOLN	P	
<i>oxybutynin chloride</i> TABS 5 MG	P	QL(3 EA daily)

Drug Name	Drug Tier	Requirements/Limits
<i>oxybutynin chloride</i> TABS 2.5 MG	P	
<i>oxybutynin chloride</i> TB24	P	QL(2 EA daily)
OXYTROL PTTW	NP	RX/OTC
<i>solifenacin succinate</i> TABS	P	
<i>tolterodine tartrate</i> CP24	NP	QL(1 EA daily)
<i>tolterodine tartrate</i> TABS	NP	QL(2 EA daily)
TOVIAZ ( <i>fesoterodine fumarate</i> )	NP	
<i>tropium chloride</i> CP24	NP	
<i>tropium chloride</i> TABS	NP	QL(2 EA daily)
VESICARE LS SUSP	NP	
VESICARE TABS ( <i>solifenacin succinate</i> )	NP	
Urinary Antispasmodics - Beta-3 Adrenergic Agonists		
GEMTESA	NP	
<i>mirabegron</i> TB24	NP	Brand Preferred
MYRBETRIQ SRER	NP	
MYRBETRIQ TB24 ( <i>mirabegron</i> )	P	Brand Preferred
Urinary Antispasmodics - Cholinergic Agonists		
<i>bethanechol chloride</i>	C	
Urinary Antispasmodics - Direct Muscle Relaxants		
<i>flavoxate hcl</i>	NP	
<b>VACCINES</b>		
Bacterial Vaccines		
ACTHIB SOLR IM	C	
BCG VACCINE	C	
BEXSERO 0.5 ML	C	
BIOTHRAX	C	AL(Up to 65 yrs old)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
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)	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)
HIBERIX SOLR IJ	C		PREVNAR 20	C	Max 1 per lifetime; QL(0.5 ML per fill retail; 0.5 per fill mail); 1 max fill(s) per 720 day(s) retail; 1 max fill(s) per 720 day(s) mail; AL(At least 19 yrs old)
MENQUADFI 0.5 ML	C				
MENVEO SOLN	C	AL(Up to 55 yrs old)			
MENVEO SOLR	C	AL(Up to 55 yrs old)			
PEDVAX HIB SUSP	C				
PENBRAYA	C	AL(Up to 25 yrs old)			
PENMENVY SUSR IM	C				
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)			
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)	TYPHIM VI SOLN	C	
			TYPHIM VI SOSY	C	
			VAXCHORA	C	
			VAXNEUVANCE	C	Max 1 per lifetime; QL(0.5 ML per fill retail; 0.5 per fill mail); 1 max fill(s) per 720 day(s) retail; 1 max fill(s) per 720 day(s) mail; AL(At least 19 yrs old)
			VIVOTIF	C	
			Viral Vaccines		
			ABRYSVO	C	AL(At least 60 yrs old)
			ACAM2000	C	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
AFLURIA PRESERVATIVE FREE SUSY	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail	FLUCELVAX SUSP	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
AFLURIA SUSP	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail	FLUCELVAX SUSY	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
AREXVY	C	AL(At least 60 yrs old)	FLULAVAL SUSY	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
COMIRNATY 5-11 YEARS SUSP 10 MCG/0.3ML	C		FLUMIST	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
COMIRNATY SUSY	C		FLUZONE HIGH-DOSE QUADRIVALENT	C	
ENGERIX-B SUSP 20 MCG/ML	C	3 max fill(s) per 999 day(s) retail	FLUZONE HIGH-DOSE SUSY	C	QL(0.5 ML per fill retail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
ENGERIX-B SUSY	C	3 max fill(s) per 999 day(s) retail	FLUZONE QUADRIVALENT SUSY	C	
ERVEBO	C		FLUZONE SUSP	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
FLUAD	C	QL(0.5 ML per fill retail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail	FLUZONE SUSY	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
FLUAD QUADRIVALENT	C		GARDASIL 9 SUSP 0.5 ML	C	3 max fill(s) per 999 day(s) retail; AL(Up to 45 yrs old)
FLUARIX QUADRIVALENT SUSY	C		GARDASIL 9 SUSY 0.5 ML	C	3 max fill(s) per 999 day(s) retail; AL(Up to 45 yrs old)
FLUARIX SUSY	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail			
FLUBLOK QUADRIVALENT	C				
FLUBLOK SOSY	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail			
FLUCELVAX QUADRIVALENT SUSY	C				

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
HAVRIX IM 720 EL U/0.5ML, 1440 EL U/ML	C		SHINGRIX	C	2 max fill(s) per 999 day(s) retail; AL(At least 50 yrs old)
HEPLISAV-B SOSY	C	3 max fill(s) per 999 day(s) retail	SPIKEVAX 6M-11Y SUSY 25 MCG/0.25ML	C	
IMOVAX RABIES SUSR	C		SPIKEVAX SUSY	C	
IPOL IJ	C		STAMARIL SUSR	C	
IXIARO	C		TICOVAC	C	
JYNNEOS	C		TWINRIX SUSY	C	
M-M-R II SOLR	C		VAQTA	C	
MNEXSPIKE SUSY 10 MCG/0.2ML	C		VAQTA IM 25 UNIT/0.5ML, 50 UNIT/ML	C	
MODERNA COVID-19 BIVALENT	C		VARIVAX SUSR	C	2 max fill(s) per 999 day(s) retail
MODERNA COVID-19 VACCINE SUSP	C		YF-VAX SUSR	C	
MRESVIA	C	AL(Up to 60 yrs old)	<b>VAGINAL AND RELATED PRODUCTS</b>		
NUVAXOVID COVID-19 VACCINE SUSY 5 MCG/0.5ML	C	1 max fill(s) per 180 day(s) mail	Vaginal Anti-infectives		
PFIZER COVID-19 VAC BIVALENT	C		<i>clindamycin phosphate vaginal CREA</i>	C	
PFIZER COVID-19 VAC-TRIS 5-11Y SUSP	C		<i>clotrimazole vaginal CREA 2 %</i>	C	QL(21 GM per 31 day(s) retail)
PFIZER-BIONT COVID-19 VAC-TRIS SUSP	C		<i>clotrimazole vaginal CREA 1 %</i>	C	QL(45 GM per 31 day(s) retail)
PFIZER-BIONTECH COVID-19 VACC SUSP	C		GYNAZOLE-1	C	
PREHEVBRIO	C	3 max fill(s) per 999 day(s) retail	<i>metronidazole vaginal</i>	C	
PRIORIX SUSR	C		MICONAZOLE 7 SUPP 100 MG	C	QL(7 EA per 31 day(s) retail)
RABAVERT	C		<i>miconazole nitrate vaginal CREA 2 %</i>	C	QL(45 GM per 31 day(s) retail)
RECOMBIVAX HB SUSP	C	3 max fill(s) per 999 day(s) retail	<i>miconazole nitrate vaginal KIT</i>	C	1 package(s) per fill retail
RECOMBIVAX HB SUSY	C	3 max fill(s) per 999 day(s) retail	<i>miconazole nitrate vaginal SUPP 200 MG</i>	C	QL(3 EA per fill retail; 3 EA per 31 day(s) retail)
			<i>miconazole nitrate vaginal SUPP 100 MG</i>	C	QL(7 EA per 31 day(s) retail)
			<i>terconazole vaginal CREA</i>	C	
			<i>terconazole vaginal SUPP</i>	C	

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Drug Name	Drug Tier	Requirements/Limits
<i>tioconazole vaginal 6.5 %</i>	C	
VANDAZOLE	C	
Vaginal Estrogens		
<i>estradiol vaginal CREA</i>	C	QL(43 GM per 31 day(s) retail)
<i>estradiol vaginal TABS</i>	C	
PREMARIN	C	
<b>VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions</b>		
Anaphylaxis Therapy Agents		
AUVI-Q SOAJ 0.1 MG/0.1ML, 0.15 MG/0.15ML	NP	
AUVI-Q SOAJ 0.3 MG/0.3ML	NP	QL(0.067 EA daily; 4 EA per 365 day(s) retail)
<i>epinephrine (anaphylaxis) SOAJ 0.15 MG/0.15ML</i>	NP	
<i>epinephrine (anaphylaxis) SOAJ</i>	NP	Brand Preferred; QL(0.067 EA daily; 4 EA per 365 day(s) retail)
<i>epinephrine (anaphylaxis) SOAJ</i>	P	Brand Preferred; QL(0.067 EA daily; 4 EA per 365 day(s) retail)
<i>epinephrine (anaphylaxis) SOAJ 0.3 MG/0.3ML</i>	NP	QL(0.067 EA daily; 4 EA per 365 day(s) retail)
EPIPEN 2-PAK SOAJ ( <i>epinephrine (anaphylaxis)</i> )	P	Brand Preferred; QL(0.067 EA daily; 4 EA per 365 day(s) retail)

Drug Name	Drug Tier	Requirements/Limits
EPIPEN JR 2-PAK SOAJ ( <i>epinephrine (anaphylaxis)</i> )	P	Brand Preferred; QL(0.067 EA daily; 4 EA per 365 day(s) retail)
Vasopressors		
<i>midodrine hcl</i>	C	
<b>VITAMINS</b>		
Oil Soluble Vitamins		
<i>cholecalciferol CAPS</i>	C	QL(100 EA per fill retail)
<i>cholecalciferol CAPS 125 MCG, 5000 UNIT, 125 MCG</i>	C	QL(2 EA daily)
<i>cholecalciferol CAPS 1.25 MG, 1250 MCG, 50000 UNIT</i>	C	QL(8 EA per 31 day(s) retail)
<i>cholecalciferol LIQD PO 10 MCG/ML</i>	C	
<i>ergocalciferol CAPS</i>	C	
<i>ergocalciferol SOLN PO 200 MCG/ML</i>	C	QL(60 ML per 90 day(s) retail)
<i>phytonadione TABS 5 MG</i>	C	
<i>vitamin e CAPS 100 UNIT, 180 MG, 200 UNIT, 400 UNIT, 45 MG, 90 MG, 90 MG, 180 MG</i>	C	QL(2 EA daily)
Water Soluble Vitamins		
<i>ascorbic acid TABS</i>	C	QL(3.34 EA daily)
B-1 TABS	C	QL(3.34 EA daily)
NIACIN ER TBCR	C	
<i>niacin CPCR 250 MG, 500 MG</i>	C	
<i>niacin TABS 500 MG</i>	C	
<i>niacin TBCR</i>	C	
<i>pyridoxine hcl TABS 25 MG, 50 MG, 100 MG</i>	C	
<i>riboflavin TABS</i>	C	QL(3.34 EA daily)

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Drug Name	Drug Tier	Requirements/ Limits
<i>thiamine hcl TABS 50 MG, 250 MG</i>	C	
<i>thiamine hcl TABS 100 MG</i>	C	QL(3.34 EA daily)
<i>thiamine mononitrate TABS 100 MG</i>	C	QL(3.34 EA daily)

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ADALIMUMAB-AATY (2 SYRINGE) PSKT .....	4	ADDERALL TABS (amphetamine- dextroamphetamine) .....	1	AEROCHAMBER PLUS FLO-VU MEDIUM MISC .....	73
ADALIMUMAB-AATY CD/UC/HS START AJKT 80 MG/0.8ML .....	4	ADDERALL XR CP24 (amphetamine-dextroamphetamine) .	1	AEROCHAMBER PLUS FLO-VU	
ADALIMUMAB-ADAZ SOAJ .....	4				

SMALL DEVI .....	73	AJOVY SOAJ .....	76	ALIVE MENS 50+ TABS .....	82
AEROCHAMBER PLUS FLO-VU SMALL MISC .....	73	AJOVY SOSY .....	76	ALIVE MENS 50+ ULTRA TABS ..	82
AEROCHAMBER PLUS FLOW VU MISC .....	73	AKLIEF .....	53	ALIVE MENS COMPLETE MULTI TABS .....	83
AEROCHAMBER W/FLOWSIGNAL MISC .....	74	AKYNZEO .....	31	ALIVE MENS ULTRA TABS .....	83
AEROCHAMBER Z-STAT PLUS CHAMBR MISC .....	74	albuterol sulfate AERS .....	15	ALIVE ONCE DAILY WOMENS TABS .....	83
AEROCHAMBER Z-STAT PLUS MISC .....	74	albuterol sulfate NEBU 0.083 % ..	15	ALIVE ULTRA POTENCY ADULT TABS .....	83
AEROCHAMBER Z-STAT PLUS/LARGE MISC .....	74	albuterol sulfate NEBU 0.63 MG/3ML, 1.25 MG/3ML .....	15	ALIVE ULTRA POTENCY WOMENS 50+ TABS .....	83
AEROCHAMBER Z-STAT PLUS/MEDIUM MISC .....	74	albuterol sulfate NEBU .....	15	ALIVE WOMENS 50+ COMPLETE MV TABS .....	83
AEROCHAMBER Z-STAT PLUS/SMALL MISC .....	74	albuterol sulfate SYRP .....	15	ALIVE WOMENS ENERGY TABS	83
AEROCHAMBER2GO ANTI-STATIC DEVI .....	74	albuterol sulfate TABS .....	15	ALKINDI SPRINKLE CPSP .....	50
AEROVENT PLUS DEVI .....	74	alclometasone dipropionate CREA	57	ALLERWELL ALLERGY FORMULA TABS .....	117
AFLORA TABS .....	82	alclometasone dipropionate OINT	57	allopurinol 100 MG, 300 MG .....	66
AFLURIA PRESERVATIVE FREE SUSY .....	132	alendronate sodium SOLN .....	63	allopurinol 200 MG .....	66
AFLURIA SUSP .....	132	alendronate sodium TABS 10 MG	63	almotriptan malate .....	76
AFREZZA POWD .....	26	alendronate sodium TABS 35 MG, 70 MG .....	63	aogliptin benzoate .....	26
AGAMREE .....	50	alfuzosin hcl .....	66	aogliptin-metformin hcl .....	24
AIMOVIG .....	76	aliskiren fumarate .....	36	aogliptin-pioglitazone 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG .....	24
AIRDUO RESPICLICK 113/14 AEPB (fluticasone-salmeterol) .....	15	ALIVE CALCIUM BONE SUPPORT TABS .....	82	ALORA PTTW 0.025 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR ...	64
AIRDUO RESPICLICK 232/14 AEPB (fluticasone-salmeterol) .....	15	ALIVE DAILY ENERGY TABS ....	82	alosectron hcl .....	66
AIRDUO RESPICLICK 55/14 AEPB (fluticasone-salmeterol) .....	15	ALIVE DIABETIC MULTIVITAMIN TABS .....	82	ALPHA BETIC TABS .....	83
AIRSUPRA .....	15	ALIVE ENERGY 50+ TABS .....	82	ALPHAGAN P (brimonidine tartrate) 120	
		ALIVE EVERYDAY IMMUNE HEALTH CAPS .....	82	alprazolam TABS .....	13
		ALIVE GARDEN GOODNESS TABS	82	ALREX SUSP (loteprednol etabonate) .....	121
		ALIVE HAIR, SKIN & NAILS CAPS	82		
		ALIVE MAX 6 POTENCY CAPS ...	82		

ALTACAINE 0.5 % (tetracaine hcl (ophth)) .....	121	AMJEVITA-PED 15KG TO <30KG SOSY .....	4	amoxicillin & pot clavulanate TB12	124
ALTACE CAPS 1.25 MG, 5 MG, 10 MG (ramipril) .....	33	AMLADEX TABS .....	114	amoxicillin CAPS .....	124
ALTOPREV TB24 20 MG, 40 MG, 60 MG .....	33	amlodipine besylate TABS .....	47	amoxicillin CHEW 125 MG, 250 MG .	124
ALTRIXA TABS .....	114	amlodipine besylate-atorvastatin calcium .....	48	amoxicillin SUSR .....	124
alum & mag hydrox-simethicone LIQD .....	12	amlodipine besylate-benazepril hcl	34	amoxicillin TABS .....	124
alum & mag hydrox-simethicone SUSP 1200 MG/30ML-1200 MG/30ML-200 MG/5ML-200 MG/5ML, 400 MG/10ML-400 MG/10ML-400 MG/10ML .....	12	amlodipine besylate-olmesartan medoxomil .....	34	amoxicillin-clarithromycin w/ lansoprazole THPK .....	130
ALUMINUM HYDROXIDE GEL SUSP .....	12	amlodipine besylate-valsartan 10 MG-160 MG, 10 MG-320 MG, 5 MG-320 MG .....	34	amphetamine sulfate TABS .....	1
ALVESCO .....	14	amlodipine besylate-valsartan 5 MG-160 MG .....	34	amphetamine TBED 3.1 MG, 6.3 MG, 9.4 MG, 12.5 MG, 15.7 MG, 18.8 MG .....	1
amantadine hcl CAPS .....	38	amlodipine-valsartan-hydrochlorothiazide .....	34	amphetamine-dextroamphetamine CP24 12.5 MG, 25 MG, 37.5 MG, 50 MG .....	1
amantadine hcl SOLN .....	38	AMORYN MOOD BOOSTER CAPS 10 MG-25 MG-20 MG-300 MCG-400 MCG-90 MG-18 MG .....	83	amphetamine-dextroamphetamine CP24 5 MG, 10 MG, 15 MG, 20 MG, 25 MG, 30 MG .....	1
AMBIEN CR TBCR (zolpidem tartrate) .....	68	UNIT-15 MG-70 MCG-30 MCG-90 MCG-18 MG .....	83	amphetamine-dextroamphetamine TABS .....	1
AMBIEN TABS (zolpidem tartrate)	68	amoxapine .....	24	ampicillin CAPS 500 MG .....	124
ambrisentan .....	48	amoxicillin & pot clavulanate CHEW .	124	AMPYRA (dalfampridine) .....	126
amcinonide CREA .....	57	amoxicillin & pot clavulanate SUSR 28.5 MG/5ML-200 MG/5ML, 62.5 MG/5ML-250 MG/5ML .....	124	AMRIX CP24 (cyclobenzaprine hcl)	118
amiloride & hydrochlorothiazide ..	62	amoxicillin & pot clavulanate SUSR 42.9 MG/5ML-600 MG/5ML, 57 MG/5ML-400 MG/5ML .....	124	anastrozole .....	37
amiloride hcl TABS .....	62	amoxicillin & pot clavulanate SUSR 57 MG/5ML-400 MG/5ML .....	124	ANDROGEL PUMP GEL TD (testosterone) .....	12
amiodarone hcl TABS 200 MG .....	13	amoxicillin & pot clavulanate SUSR 57 MG/5ML-400 MG/5ML .....	124	ANORO ELLIPTA 25 MCG/ACT-62.5 MCG/ACT (umeclidinium-vilanterol)	15
AMITIZA (lubiprostone) .....	65	AMJEVITA SOAJ .....	4	ANTIOXIDANT A/C/E/SELENIUM TABS 200 MG-200 UNIT-25 MCG-10000 UNIT .....	83
amitriptyline hcl TABS .....	24	AMJEVITA SOSY .....	4	ANTIOXIDANT FORMULA TABS .	83
AMJEVITA SOAJ .....	4	AMJEVITA-PED 10KG TO <15KG SOSY .....	4		
AMJEVITA SOSY .....	4				
AMJEVITA-PED 10KG TO <15KG SOSY .....	4				

ANTIOXIDANT FORMULA/MINERALS CAPS 250 MG-7.5 MG-1 MG-10000 UNIT-200 UNIT-1.5 MG-15 MCG .....83	AREXVY ..... 132	ASMANEX (60 METERED DOSES) AEPB .....14
ANTI-OXIDANT TABS 250 MG-200 UNIT-10000 UNIT ..... 114	arformoterol tartrate ..... 15	ASMANEX HFA AERO ..... 14
ANTIOXIDANT VITAMINS TABS 60 MG-30 UNIT-2 MG-40 MG-40 MCG- 5000 UNIT .....83	ARICEPT TABS 23 MG (donepezil hydrochloride) .....125	ASPARLAS .....38
ANTIVERT CHEW (meclizine hcl) .30	ARICEPT TABS 5 MG, 10 MG (donepezil hydrochloride) .....125	aspirin buffered (cal carb-mag carb- mag oxide) .....8
ANTIVERT TABS 50 MG (meclizine hcl) ..... 30	ARIKAYCE .....3	aspirin CHEW ..... 8
ANZUPGO CREA EX 20 MG/GM . 59	aripiprazole SOLN PO ..... 42	ASPIRIN SUPP 300 MG ..... 8
APETIBEX CAPS .....83	aripiprazole TABS 2 MG, 10 MG, 15 MG, 20 MG, 30 MG ..... 42	aspirin TABS 325 MG ..... 8
APEXICON E CREA .....57	aripiprazole TABS 5 MG ..... 42	aspirin TBEC 81 MG, 325 MG ..... 8
APIDRA SOLN .....26	aripiprazole TBDP ..... 42	aspirin-dipyridamole .....67
APIDRA SOLOSTAR SOPN .....26	ARISTADA 1064 MG/3.9ML .....42	ASPRUZYO SPRINKLE PACK ....12
APPE-CURB CAPS .....83	ARISTADA 441 MG/1.6ML ..... 42	ASSURE ID INSULIN SAFETY SYR 71
apraclonidine hcl ..... 120	ARISTADA 662 MG/2.4ML ..... 42	ASTAGRAF XL CP24 .....78
aprepitant CAPS .....31	ARISTADA 882 MG/3.2ML ..... 42	ATACAND (candesartan cilexetil) .34
APTENSIO XR CP24 (methylphenidate hcl) ..... 2	ARISTADA INITIO ..... 42	ATACAND HCT (candesartan cilexetil-hydrochlorothiazide) ..... 34
APTIOM 200 MG, 400 MG, 600 MG, 800 MG (eslicarbazepine acetate) .18	ARIXTRA (fondaparinux sodium) . 17	atazanavir sulfate CAPS 150 MG, 200 MG ..... 43
APTIVUS CAPS ..... 43	armodafinil .....2	atazanavir sulfate CAPS 300 MG .43
AQ INSULIN SYRINGE ..... 71	ARMOUR THYROID TABS ..... 128	ATELVIA TBEC (risedronate sodium) .....63
AQUA LACTEN LOTN .....59	ARNUITY ELLIPTA 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT (fluticasone furoate (inhalation)) ... 14	atenolol & chlorthalidone .....34
AQUAMED LOTN .....59	ARTHROTEC TBEC (diclofenac w/ misoprostol) ..... 5	atenolol TABS .....46
ARANESP (ALBUMIN FREE) SOLN . 67	ascorbic acid TABS .....134	atomoxetine hcl .....1
ARANESP (ALBUMIN FREE) SOSY . 67	asenapine maleate ..... 40	ATORVALIQ SUSP ..... 33
ARBLI PO 10 MG/ML .....34	ASMANEX (120 METERED DOSES) AEPB .....14	atorvastatin calcium TABS .....33
ARCALYST .....5	ASMANEX (14 METERED DOSES) AEPB .....14	atropine sulfate (ophthalmic) OINT 120
	ASMANEX (30 METERED DOSES) AEPB .....14	atropine sulfate (ophthalmic) SOLN 120
		ATROPINE SULFATE SOLN 1 %

120	azelaic acid GEL .....	61	baclofen SOLN PO 5 MG/5ML, 10 MG/5ML .....	118	
ATROVENT HFA .....	14	azelastine hcl (ophth) .....	122	baclofen SUSP .....	118
AUBAGIO (teriflunomide) .....	126	azelastine hcl 0.1 %, 137 MCG/SPRAY .....	119	baclofen TABS .....	118
AUGMENTIN ES-600 SUSR (amoxicillin & pot clavulanate) ....	124	azelastine hcl 0.15 % .....	119	BACMIN TABS .....	83
AUGMENTIN SUSR 31.25 MG/5ML- 125 MG/5ML .....	124	azelastine hcl-fluticasone propionate SUSP .....	119	BAFIERTAM .....	126
AUGMENTIN TABS 125 MG-500 MG (amoxicillin & pot clavulanate) ....	125	azithromycin PACK .....	69	balsalazide disodium CAPS .....	65
AURYXIA 210 MG (ferric citrate) ..	66	azithromycin SUSR 100 MG/5ML .	69	BANZEL SUSP (rufinamide) .....	18
AUSTEDO TABS .....	126	azithromycin SUSR 200 MG/5ML .	69	BANZEL TABS (rufinamide) .....	18
AUSTEDO XR PATIENT TITRATION TEPK .....	126	azithromycin TABS 250 MG .....	70	BAQSIMI ONE PACK POWD .....	25
AUSTEDO XR TB24 .....	126	azithromycin TABS 500 MG .....	70	BAQSIMI TWO PACK POWD .....	25
AUVELITY .....	21	azithromycin TABS 600 MG .....	70	BARACLUDE SOLN .....	45
AUVI-Q SOAJ 0.1 MG/0.1ML, 0.15 MG/0.15ML .....	134	AZO HORMONAL HEALTH CYCLE CARE TABS .....	83	BARACLUDE TABS (entecavir) ...	45
AUVI-Q SOAJ 0.3 MG/0.3ML ....	134	AZO HORMONAL HEALTH HAPPY CYCL TABS .....	83	BARIATRIC MULTIVITAMINS CAPS 83	
AVALIDE (irbesartan- hydrochlorothiazide) .....	34	AZOPT (brinzolamide) .....	122	BARIATRIC MULTIVITAMINS TABS .	83
AVAPRO 150 MG, 300 MG (irbesartan) .....	34	AZOR (amlodipine besylate- olmesartan medoxomil) .....	34	BARIATRIC MULTIVITAMINS/IRON CAPS .....	83
AVAR CLEANSER LIQD 10 %-5 % (sulfacetamide sodium w/ sulfur) ..	53	AZSTARYS .....	2	BASAGLAR KWIKPEN SOPN ....	26
AVAR LS CLEANSER LIQD (sulfacetamide sodium w/ sulfur) ..	53	AZULFIDINE EN-TABS TBEC (sulfasalazine) .....	65	BASAGLAR TEMPO PEN SOPN .	26
AVAR-E EMOLLIENT CREA 10 %-5 % (sulfacetamide sodium w/ sulfur) 53		AZULFIDINE TABS (sulfasalazine) 65		BASIC AM TABS .....	83
AVONEX PEN AJKT .....	126	b complex w/ c CAPS .....	79	BASIC PM TABS .....	83
AVONEX PREFILLED PSKT .....	126	B-1 TABS .....	134	BAXDELA TABS .....	64
AVSOLA .....	65	bacitracin (ophthalmic) .....	120	BCG VACCINE .....	130
AZASITE .....	120	bacitracin (topical) OINT .....	54	b-complex vitamins CAPS .....	79
azathioprine TABS .....	78	bacitracin zinc OINT .....	54	b-complex vitamins TABS .....	79
		bacitracin-polymyxin b (ophth) ...	121	b-complex w/ c & folic acid CAPS .	79
		bacitracin-poly-neomycin-hc .....	121	BD AUTOSHIELD DUO .....	72
				BD INSULIN SYR ULTRAFINE II .	72
				BD INSULIN SYRINGE .....	72

BD INSULIN SYRINGE MICROFINE .....72	BENZOYL PEROXIDE GEL .....53	.....47
BD INSULIN SYRINGE U/F .....72	benzoyl peroxide LIQD 5 %, 10 % .53	BETAPACE TABS 80 MG, 120 MG, 160 MG (sotalol hcl) ..... 47
BD INSULIN SYRINGE ULTRAFINE .....72	benzoyl peroxide LOTN 5 %, 10 % 53	BETASERON KIT ..... 126
BD PEN NEEDLE MICRO ULTRAFINE .....72	BENZOYL PEROXIDE LOTN 5 %, 10 % .....53	betaxolol hcl (ophth) SOLN .....120
BD PEN NEEDLE MINI ULTRAFINE .....72	benzoyl peroxide-erythromycin GEL . 53	betaxolol hcl .....46
BD PEN NEEDLE NANO 2ND GEN . 72	benztropine mesylate TABS ..... 38	bethanechol chloride .....130
BD PEN NEEDLE NANO ULTRAFINE .....72	bepotastine besilate .....122	BETHKIS NEBU (tobramycin) ..... 3
BD PEN NEEDLE ORIG ULTRAFINE .....72	BEPREVE (bepotastine besilate) 122	BETIMOL (timolol) ..... 120
BD PEN NEEDLE SHORT ULTRAFINE .....72	besifloxacin hcl 0.6 % .....121	BETIMOL .....120
BD VEO INSULIN SYR ULTRAFINE .....72	BESIVANCE 0.6 % (besifloxacin hcl) 121	BETOPTIC-S SUSP .....120
BELBUCA FILM .....11	betamethasone dipropionate (topical) CREA .....57	BEVESPI AEROSPHERE .....15
BELSOMRA .....68	betamethasone dipropionate (topical) LOTN .....57	BEXSERO 0.5 ML ..... 130
benazepril & hydrochlorothiazide .34	betamethasone dipropionate (topical) OINT .....57	bicalutamide .....37
benazepril hcl 40 MG .....33	betamethasone dipropionate augmented CREA .....57	BIKTARVY ..... 43
benazepril hcl 5 MG, 10 MG, 20 MG . 33	betamethasone dipropionate augmented GEL 0.05 % ..... 57	bimatoprost SOLN .....123
BENICAR (olmesartan medoxomil) 34	betamethasone dipropionate augmented LOTN .....57	BIMZELX SOAJ .....55
BENICAR HCT (olmesartan medoxomil-hydrochlorothiazide) ..34	betamethasone dipropionate augmented OINT .....57	BIMZELX SOSY ..... 55
benzonatate 100 MG .....51	betamethasone valerate CREA ...57	BINOSTO TBEF ..... 63
benzonatate 200 MG .....51	betamethasone valerate FOAM ... 57	BIO-35 GLUTEN-FREE CAPS .... 83
benzoyl peroxide FOAM 10 % .....53	betamethasone valerate LOTN ....57	BIO-35 IRON FREE CAPS ..... 83
benzoyl peroxide GEL 2.5 %, 5 %, 10 % .....53	betamethasone valerate OINT ....57	BIOCAL CAPS .....83
	BETAPACE AF (sotalol hcl (afib/af))	BIOCEL TABS 500 MG-25 MG-300 MCG-1 MG-200 UNIT-25 MG-25 MG-50 MG-5000 UNIT-25 MG-33 MG-125 MG-100 UNIT-60 MG-10 MG-50 MCG ..... 83
		BIOTECT PLUS CAPS ..... 83
		BIOTHRAX .....130
		BIOTIN PLUS KERATIN TABS ...117
		bisacodyl SUPP .....69
		bisacodyl TBEC .....69

bismuth subsalicylate CHEW 262 MG .....30	MG-0.1 MG-30 UNIT .....84	MG, 75 MG, 100 MG (brivaracetam) . 18
bismuth subsalicylate SUSP 525 MG/15ML, 1050 MG/30ML ..... 30	BPROTECTED PEDIA POLY-VITE SOLN PO ..... 117	BRIXADI (WEEKLY) SOSY .....11
bisoprolol & hydrochlorothiazide 6.25 MG-10 MG, 6.25 MG-5 MG .....35	BPROTECTED PEDIA POLY- VITE/FE SOLN ..... 116	BRIXADI SOSY 64 MG/0.18ML, 96 MG/0.27ML, 128 MG/0.36ML .....11
bisoprolol & hydrochlorothiazide 6.25 MG-2.5 MG .....35	BRAFTOVI 75 MG .....38	bromfenac sodium (ophth) .....122
bisoprolol fumarate .....46	BRAIN MIGHT/DHA & CO Q10 TABS .....117	bromocriptine mesylate CAPS .....38
bisoprolol fumarate 2.5 MG .....46	BREATHE COMFORT CHAMBER/ADULT DEVI .....74	bromocriptine mesylate TABS 2.5 MG ..... 38
BLOOD SUGAR MANAGER TABS 83	BREATHE COMFORT CHAMBER/CHILD DEVI .....74	brompheniramine & phenyleph ELIX . 52
BODY/HAIR/SKIN/NAILS CAPS 20 MG-0.667 MG-200 MCG-133.333 MCG-6.667 MG-0.5 MG-2 MCG- 0.567 MG-166.667 MG-33.333 MG-5 MG-20 MG-3 MG-0.667 MG-33.333 MG-1.667 MG-3.333 MG-2000 UNIT- 133.333 MG-66.667 MG-50 MCG- 83.333 MG-10 UNIT ..... 83	BREATHE EASE LARGE DEVI ...74	BROMSITE (bromfenac sodium (ophth)) ..... 122
BONEUP 3 PER DAY CAPS ..... 83	BREATHE EASE MEDIUM DEVI ..74	BROVANA (arformoterol tartrate) .15
BONEUP CAPS .....84	BREATHE EASE SMALL DEVI ....74	BRYNOVIN SOLN PO 25 MG/ML .26
BONEUP VEGETARIAN TABS ...84	BREATHERITE VALVED MDI CHAMBER DEVI .....74	budesonide (inhalation) SUSP 0.25 MG/2ML, 0.5 MG/2ML ..... 14
BONJESTA TBCR .....31	BREO ELLIPTA (fluticasone furoate- vilanterol) .....15	budesonide (inhalation) SUSP 1 MG/2ML .....14
BONSITY SOPN 560 MCG/2.24ML 63	BREO ELLIPTA ..... 15	budesonide (intrarectal) .....12
BOOSTNOW IMMUNE SUPPORT CAPS .....84	BREXAFEMME .....31	budesonide (nasal) .....119
BOOSTRIX SUSP .....129	BREZTRI AEROSPHERE .....15	budesonide CPEP ..... 50
BOOSTRIX SUSY .....129	BRILINTA 60 MG, 90 MG (ticagrelor) 67	budesonide TB24 .....50
bosentan TABS .....48	brimonidine tartrate (topical) .....61	budesonide-formoterol fumarate dihydrate .....15
bosentan TBSO 32 MG .....48	brimonidine tartrate 0.1 %, 0.15 % 120	bumetanide TABS .....62
B-PLEX PLUS TABS 500 MG-25 MG-0.15 MG-0.8 MG-50 MCG-25 MG-20 MG-100 MG-5000 UNIT-27 MG-20 MG-50 MG-22.5 MG-3 MG-5	brimonidine tartrate 0.2 % .....120	buprenorphine hcl SUBL .....11
	brimonidine tartrate-timolol maleate . 120	buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG .....11
	brinzolamide ..... 122	buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG ...11
	BRIVIACT SOLN PO 10 MG/ML (brivaracetam) .....18	buprenorphine hcl-naloxone hcl dihydrate FILM SL ..... 11
	BRIVIACT TABS 10 MG, 25 MG, 50	

buprenorphine hcl-naloxone hcl dihydrate SUBL 0.5 MG-2 MG .....11	11	calcium carbonate-cholecalciferol TABS 200 UNIT-500 MG, 5 MCG- 500 MG, 500 MG-5 MCG .....77
buprenorphine hcl-naloxone hcl dihydrate SUBL 2 MG-8 MG .....11	BYDUREON BCISE AUIJ .....26	calcium polycarbophil TABS .....69
buprenorphine PTWK .....11	BYETTA 10 MCG PEN SOPN 10 MCG/0.04ML (exenatide) .....26	CAM LOTN .....59
bupropion hcl (smoking deterrent) 127	BYETTA 5 MCG PEN SOPN 5 MCG/0.02ML (exenatide) .....26	camphor & menthol LOTN .....55
bupropion hcl TABS .....21	BYSTOLIC (neбиволol hcl) .....46	CANASA SUPP (mesalamine) ....65
bupropion hcl TB12 100 MG .....22	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) ....48	candesartan cilexetil .....34
bupropion hcl TB12 150 MG .....22		candesartan cilexetil- hydrochlorothiazide .....35
bupropion hcl TB12 200 MG .....21	caffeine citrate SOLN PO .....1	CAPEX SHAM .....57
bupropion hcl TB24 150 MG .....22	calcipotriene CREA .....55	CAPLYTA .....39
bupropion hcl TB24 300 MG .....22	CALCIPOTRIENE FOAM .....55	capsaicin CREA 0.025 %, 0.035 %, 0.075 %, 0.1 % .....60
bupropion hcl TB24 450 MG .....22	calcipotriene OINT .....55	captopril & hydrochlorothiazide 15 MG-25 MG, 15 MG-50 MG, 25 MG- 25 MG .....35
buspironе hcl 15 MG .....13	calcipotriene SOLN .....55	captopril & hydrochlorothiazide 25 MG-50 MG .....35
buspironе hcl 5 MG, 10 MG .....13	calcipotriene-betamethasone dipropionate OINT .....57	captopril .....33
buspironе hcl 7.5 MG, 30 MG .....13	calcipotriene-betamethasone dipropionate SUSP .....57	CAPVAXIVE .....131
butalbital-acetaminophen TABS 50 MG-325 MG .....7	calcitonin (salmon) IJ .....63	carbamazepine CHEW .....18
butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG .....7	calcitonin (salmon) NA .....63	carbamazepine CP12 .....18
butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG .....7	calcitriol (topical) .....55	carbamazepine SUSP .....18
butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-300 MG .....10	calcitriol CAPS .....63	carbamazepine TABS .....18
butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG .....10	calcium acetate (phosphate binder) CAPS .....66	carbamazepine TB12 .....18
butalbital-aspirin-caffeine CAPS ....7	calcium acetate (phosphate binder) TABS .....66	carbamide peroxide (otic) 6.5 % ..123
butalbital-aspirin-caffeine w/cod ...10	calcium carbonate (antacid) CHEW 500 MG .....12	CARBATROL CP12 (carbamazepine) .....18
butorphanol tartrate NA 10 MG/ML 11	calcium carbonate-cholecalciferol TABS 10 MCG-600 MG, 400 UNIT- 600 MG .....77	carbidopa .....38
BUTRANS PTWK (buprenorphine)		carbidopa-levodopa TABS .....38
		carbidopa-levodopa TBCR .....38
		CARDURA (doxazosin mesylate) .34

CARDURA XL .....	66	CELEBRATE MULTI-COMPLETE 18 CAPS .....	84	MCG-80 MG-2 MG-150 MCG-65
CAREONE INSULIN SYRINGE ...	72	CELEBRATE MULTI-COMPLETE 36 CAPS .....	84	MCG-2 MG-10 MCG-15 MG-162
CARETOUCH INSULIN SYRINGE	72	CELEBRATE MULTI-COMPLETE 45 CAPS .....	84	MG-150 MCG-30 UNIT-109 MG-20
carisoprodol TABS .....	118	CELEBRATE MULTI-COMPLETE 60 CAPS .....	84	MCG-10 MCG-5000 UNIT-25 MCG-72 MG .....
carteolol hcl (ophth) .....	120	celecoxib .....	6	CENTRUM CARDIO TABS .....
carvedilol 25 MG .....	46	CELEXA TABS 10 MG (citalopram hydrobromide) .....	22	CENTRUM MEN TABS .....
carvedilol 3.125 MG, 6.25 MG, 12.5 MG .....	46	CELEXA TABS 20 MG (citalopram hydrobromide) .....	22	CENTRUM MENOPAUSE HOT FLASH TABS .....
carvedilol phosphate .....	46	CELEXA TABS 40 MG (citalopram hydrobromide) .....	22	CENTRUM MENOPAUSE MIND/MOOD TABS .....
CASGEVY .....	67	CELLCEPT CAPS (mycophenolate mofetil) .....	78	114
CAYSTON .....	36	CELLCEPT SUSR (mycophenolate mofetil) .....	78	CENTRUM MINIS ADULTS 50+ TABS .....
cefaclor CAPS .....	49	CELLCEPT TABS (mycophenolate mofetil) .....	78	84
CEFACTOR ER TB12 .....	49	CELONTIN (methsuximide) .....	21	CENTRUM MINIS MEN 50+ TABS
cefadroxil CAPS .....	49	CENTANY AT KIT .....	54	84
cefadroxil SUSR .....	49	CENTAVITE A-Z COMPLETE-MINERAL TABS 90 MG-3 MG-35 MCG-0.4 MG-3 MG-9 MCG-10 MG-3.4 MG-30 MG-5000 UNIT-400 UNIT-30 UNIT-1250 UNIT-27 MG-100 MG-5 MG-15 MCG-7.5 MG-15 MCG-2 MG-15 MG-40 MG-150 MCG-31 MG-10 MCG-7.5 MG .....	84	CENTRUM MINIS WOMEN 50+ TABS .....
cefadroxil TABS .....	49			84
cefdinir CAPS .....	49			CENTRUM MINIS WOMEN IMMUNE SUP TABS .....
cefdinir SUSR .....	49			84
cefixime CAPS .....	49			CENTRUM PERFORMANCE TABS .
cefixime SUSR .....	49			117
cefixime TABS .....	49			CENTRUM SILVER ULTRA WOMENS TABS .....
cefpodoxime proxetil SUSR .....	49			84
cefpodoxime proxetil TABS .....	49			CENTRUM SPECIALIST ENERGY TABS .....
cefprozil SUSR 125 MG/5ML .....	49			117
cefprozil SUSR 250 MG/5ML .....	49			CENTRUM SPECIALIST HEART TABS .....
cefprozil TABS .....	49			84
ceftriaxone sodium IJ 1 GM, 250 MG, 500 MG .....	49			CENTRUM SPECIALIST IMMUNE TABS .....
cefuroxime axetil TABS 250 MG ..	49			84
cefuroxime axetil TABS 500 MG ..	49			CENTRUM SPECIALIST VISION TABS .....
				84
				CENTRUM ULTRA WOMENS TABS
				84
				CENTURY MATURE TABS 90 MG-3 MG-30 MCG-500 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-300 MCG-

1.5 MG-11 MG-150 MCG-50 MG-80 MG-2 MG-220 MG-45 MCG-150 MCG-50 UNIT-110 MG-0.9 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG .....85	CHANTIX CONTINUING MONTH PAK TABS (varenicline tartrate) ..127	134	cholestyramine light PACK ..... 32
CENTURY TABS 90 MG-2 MG-30 MCG-500 MCG-400 UNIT-6 MCG- 1.7 MG-25 MCG-20 MG-250 MCG- 3500 UNIT-10 MG-18 MG-300 MCG- 1.5 MG-11 MG-150 MCG-100 MG-2 MG-200 MG-80 MG-45 MCG-150 MCG-30 UNIT-109 MG-0.9 MG-5 MCG-10 MCG-2.3 MG-55 MCG-10 MCG-35 MCG-72 MG .....85	CHANTIX STARTING MONTH PAK TBPK (varenicline tartrate) ..... 127		cholestyramine light POWD ..... 32
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cephalexin SUSR ..... 49	CHANTIX TABS 1 MG (varenicline tartrate) ..... 127		cholestyramine POWD ..... 32
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CERDELGA ..... 67	chlordiazepoxide hcl CAPS .....13		ciclopirox GEL ..... 54
CEREZYME 400 UNIT .....67	chlorhexidine gluconate (mouth- throat) .....78		ciclopirox KIT ..... 54
CEROVITE SENIOR TABS 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-300 MCG- 1.5 MG-50 MG-11 MG-150 MCG-80 MG-220 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG-2 MG .....85	chlorhexidine gluconate SOLN EX 4 % ..... 42		ciclopirox olamine CREA ..... 54
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CERTAVITE SENIOR/ANTIOXIDANT TABS ....85	chloroquine phosphate TABS 500 MG ..... 37		ciclopirox SHAM ..... 54
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cetirizine hcl SOLN PO ..... 32	chlorpromazine hcl TABS 10 MG ..41		CILOXAN OINT .....121
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	chlorzoxazone TABS ..... 118		cimetidine TABS .....129
	CHOICEFUL MULTIVITAMIN CAPS . 85		CIMZIA (1 SYRINGE) PSKT 200 MG/ML ..... 65
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	cholecalciferol CAPS 125 MCG, 5000 UNIT, 125 MCG .....134		CIMZIA KIT ..... 65
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			CIPRO SUSR ..... 64
			CIPRO TABS 250 MG, 500 MG (ciprofloxacin hcl) ..... 64
			ciprofloxacin hcl (ophth) SOLN ...121
			ciprofloxacin hcl (otic) .....123
			ciprofloxacin hcl TABS 250 MG, 500

MG, 750 MG .....	64	clindamycin phosphate (topical) GEL	propionate) .....	58
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ciprofloxacin-fluocinolone acetonide .		clindamycin phosphate (topical)	propionate) .....	57
123		LOTN .....		58
ciprofloxacin-hydrocortisone .....	123	clindamycin phosphate (topical)	clomipramine hcl 75 MG .....	24
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CITALOPRAM HYDROBROMIDE		clindamycin phosphate (topical)	clonazepam TABS .....	18
CAPS .....	22	SWAB .....		2
citalopram hydrobromide SOLN ...	22	clindamycin phosphate vaginal CREA	clonidine hcl (adhd) TB12 .....	2
citalopram hydrobromide TABS 10		.....	clonidine hcl TABS .....	34
MG .....	22	.....	clonidine PTWK .....	34
citalopram hydrobromide TABS 20		clindamycin phosphate-benzoyl	clonidine TB24 .....	34
MG .....	22	peroxide (refrigerate) .....		67
citalopram hydrobromide TABS 40		.....	clopidogrel bisulfate 300 MG .....	67
MG .....	22	clindamycin phosphate-benzoyl	clopidogrel bisulfate 75 MG .....	67
		peroxide GEL .....		13
CITRACAL +D3 TABS .....	85	.....	clorazepate dipotassium TABS ....	13
cladribine (multiple sclerosis) 10 MG .		clindamycin phosphate-tretinoin ..	clotrimazole (topical) CREA .....	54
126		53	clotrimazole (topical) SOLN .....	54
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CLARINEX-D 12 HOUR TB12 .....	52	.....	clotrimazole vaginal CREA 2 % ..	133
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clarithromycin SUSR 250 MG/5ML	70	.....	clotrimazole w/ betamethasone	
clarithromycin TABS .....	70	clobetasol propionate CREA 0.025 %	CREA .....	54
clarithromycin TB24 .....	70	.....		55
CLENPIQ SOLN 12 GM/175ML-3.5		clobetasol propionate CREA 0.05 % .	clotrimazole w/ betamethasone	
GM/175ML-10 MG/175ML .....	69	57	LOTN .....	55
CLEOCIN-T LOTN (clindamycin		clobetasol propionate emollient base	clozapine TABS 100 MG .....	40
phosphate (topical)) .....	53	0.05 % .....	clozapine TABS 200 MG .....	40
CLEVER CHOICE HOLDING		.....	clozapine TABS 25 MG, 50 MG ...	40
CHAMBER DEVI .....	74	clobetasol propionate emulsion ...	clozapine TABS 25 MG, 50 MG .	41
clindamycin hcl 150 MG, 300 MG .	36	.....	clozapine TBDP 100 MG .....	41
clindamycin palmitate hydrochloride .	36	clobetasol propionate FOAM .....	clozapine TBDP 100 MG .....	41
		.....	clozapine TBDP 12.5 MG, 25 MG .	41
clindamycin phosphate (topical)		clobetasol propionate GEL 0.05 %	clozapine TBDP 150 MG .....	40
FOAM .....	53	57	clozapine TBDP 200 MG .....	41
		clobetasol propionate LIQD .....		41
		.....	CLOZARIL TABS 100 MG	
		clobetasol propionate LOTN .....	(clozapine) .....	41
		.....		
		clobetasol propionate OINT 0.05 %		
		57		
		clobetasol propionate SHAM .....		
		57		
		clobetasol propionate SOLN 0.05 % .		
		57		
		CLOBEX SHAM (clobetasol		

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CLOZARIL TABS 25 MG, 50 MG (clozapine) .....	41	COMPACT SPACE CHAMBER/MED MASK DEVI .....	74	COSENTYX SENSOREADY PEN SOAJ .....	56
coal tar extract SHAM 0.5 % .....	61	COMPACT SPACE CHAMBER/SM MASK DEVI .....	74	COSENTYX SOSY .....	56
COARTEM .....	37	COMPANION TABS 100 MG-5 MG- 30 MCG-30 UNIT-400 MCG-30		COSENTYX UNOREADY SOAJ ..	56
COBENFY CAPS .....	41	MCG-3500 UNIT-5 MG-100 MG-20 MG-10 MG-100 MG-5 MG-100 MG- 15 MG-2 MG-250 MCG-2 MG-10		COSOPT (dorzolamide hcl-timolol maleate) .....	120
COBENFY STARTER PACK CPPK 41		MCG-75 MCG-150 MCG-120 MCG- 20 MCG .....	85	COSOPT PF (dorzolamide hcl- timolol maleate) .....	120
codeine sulfate TABS 30 MG .....	8	COMPETE TABS 90 MG-20.6 MG- 0.4 MG-9 MCG-2.6 MG-30 MG-5000 UNIT-2 MG-400 UNIT-45 UNIT-27 MG-22.5 MG .....	85	COTEMPLA XR-ODT TBED .....	2
CODEINE SULFATE TABS .....	8	COMPLERA 200 MG-300 MG-25 MG (emtricitabine-rilpivirine-tenofovir disoproxil fumarate) .....	43	COXANTO CAPS (oxaprozin) .....	6
colchicine CAPS .....	66	CONCERTA TBCR 18 MG, 27 MG, 54 MG (methylphenidate hcl) .....	2	COZAAR (losartan potassium) ...	34
colchicine TABS .....	66	CONCERTA TBCR 36 MG (methylphenidate hcl) .....	2	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 ...	62
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colesevelam hcl PACK .....	32	CONZIP CP24 (tramadol hcl) .....	8	CRESEMBA CAPS .....	31
colesevelam hcl TABS .....	32	COPAXONE SOSY 20 MG/ML (glatiramer acetate) .....	126	CRESTOR TABS (rosuvastatin calcium) .....	33
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COLESTID TABS (colestipol hcl) ..	32	CORAL CALCIUM PLUS CAPS ..	85	cromolyn sodium (ophth) .....	123
colestipol hcl GRAN .....	32	CORTEF TABS (hydrocortisone) ..	50	cromolyn sodium NEBU .....	14
colestipol hcl PACK .....	32	CORTISONE ACETATE TABS ....	51	crotamiton LOTN .....	61
colestipol hcl TABS .....	32	CORTISPORIN-TC .....	123	CTEXLI TABS PO 250 MG .....	64
COMBIGAN (brimonidine tartrate- timolol maleate) .....	120	COSENTYX (300 MG DOSE) SOSY .	55	CULTURELLE PROBIOTIC MEN DAILY CAPS .....	85
COMBIPATCH PTTW .....	64	COSENTYX SENSOREADY (300		CVS ADULT 50+ EYE HEALTH CAPS .....	85
COMBIVENT RESPIMAT AERS ..	15			CVS DAILY MULTIPLE FOR MEN TABS 60 MG-3 MG-75 MCG-400 MCG-700 UNIT-18 MCG-1.7 MG-20	
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COMIRNATY 5-11 YEARS SUSP 10 MCG/0.3ML .....	132				
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MCG-18 MG-3500 UNIT-16 MG-300 MCG-1.35 MG-140 MG-15 MG-2 MG-210 MG-22.5 UNIT-2 MG-120 MCG-110 MCG ..... 85	CVS ONE DAILY WOMENS 50+ ADV TABS ..... 86	72 MG, 120 MG-6 MG-30 MCG-27 MG-300 MCG-25 MCG-100 MCG-1.7 MG-60 MCG-20 MG-300 MCG-1050 MCG-10 MG-600 MCG-1.5 MG-75 MG-15 MG-210 MG-80 MG-50 MCG- 150 MCG-20 MG-0.5 MG-5 MCG-4 MG-21 MCG-10 MCG-60 MCG-72 MG-2 MG ..... 87
CVS DAILY MULTIPLE WOMEN 50+ TABS 120 MG-6 MG-30 MCG-400 MCG-1000 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-15 MG-500 MG-4.5 MG-50 MG-24 MG-90 MCG-150 MCG-30 UNIT-2.2 MG-4.2 MG-180 MCG-3500 UNIT-27 MCG ..... 85	CVS ONE DAILY WOMENS FORMULA TABS 75 MG-1.7 MG- 1000 MCG-400 MCG-25 MCG-6 MCG-1.3 MG-25 MCG-16 MG-700 MCG-5 MG-18 MG-380 MG-1.2 MG- 8 MG-0.9 MG-150 MCG-7.5 MG-1.8 MG-25 MCG-27.5 MCG, 75 MG-1.7 MG-1000 MCG-400 MCG-25 MCG-6 MCG-1.3 MG-25 MCG-16 MG-700 MCG-5 MG-18 MG-380 MG-1.2 MG- 8 MG-0.9 MG-7.5 MG-150 MCG-1.8 MG-25 MCG-27.5 MCG ..... 86	CVS SPECTRAVITE MEN TABS 90 MG-2 MG-40 MCG-200 MCG-25 MCG-6 MCG-1.3 MG-60 MCG-16 MG-900 MCG-15 MG-8 MG-600 MCG-1.2 MG-100 MG-11 MG-210 MG-80 MG-50 MCG-150 MCG-45 MG-20 MG-0.9 MG-5 MCG-10 MCG- 2.3 MG-100 MCG-10 MCG-35 MCG- 72 MG-2 MG ..... 87
CVS DAILY MULTIV/MINERAL MENS TABS ..... 85	CVS SPECTRAVITE ADULT 50+ TABS ..... 86	CVS SPECTRAVITE SENIOR TABS 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG- 300 MCG-1.5 MG-50 MG-11 MG-80 MG-150 MCG-220 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG-2 MG ..... 87
CVS DAILY MULTIVITAMIN MENS TABS ..... 85	CVS SPECTRAVITE ADULTS TABS 86	CVS SPECTRAVITE ULTRA MEN 50+ TABS ..... 87
CVS DAILY MULTIVITAMIN WOMENS TABS ..... 86	CVS SPECTRAVITE ADVANCED TABS 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-3500 UNIT-10 MG-18 MG-1.5 MG-50 MG-11 MG-200 MG- 80 MG-45 MCG-150 MCG-30 UNIT- 20 MG-0.5 MG-5 MCG-10 MCG-2.3 MG-75 MCG-55 MCG-10 MCG-35 MCG-72 MG-2 MG, 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG- 1.7 MG-25 MCG-20 MG-3500 UNIT- 10 MG-18 MG-1.5 MG-50 MG-11 MG-80 MG-200 MG-45 MCG-150 MCG-30 UNIT-20 MG-0.5 MG-5 MCG-10 MCG-2.3 MG-75 MCG-55 MCG-10 MCG-35 MCG-72 MG-2 MG ..... 86	CVS SPECTRAVITE ULTRA MENS TABS ..... 87
CVS EYE HEALTH & LUTEIN TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG ..... 86	CVS SPECTRAVITE ULTRA WOMEN TABS ..... 87	CVS SPECTRAVITE WOMEN 50+ TABS 100 MG-30 MCG-400 MCG- 1.1 MG-14 MG-5 MG-5 MG-1.1 MG- 300 MCG-25 MCG-17.5 MG-8 MG- 100 MG-2.3 MG-50 MCG-5 MCG-80 MG-2 MG-52 MCG-0.5 MG-10 MCG- 15 MG-300 MG-150 MCG-20 MG-22 MCG-1052 MCG-50 MCG-50 MCG- 72 MG, 100 MG-5 MG-30 MCG-400 MCG-25 MCG-50 MCG-1.1 MG-50
CVS EYE HEALTH ADULT 50+ CAPS ..... 86	CVS SPECTRAVITE MEN 50+ TABS 120 MG-30 MCG-300 MCG-1.5 MG- 20 MG-6 MG-10 MG-1.7 MG-300 MCG-600 MCG-25 MCG-27 MG-75 MG-4 MG-50 MCG-5 MCG-80 MG-2 MG-60 MCG-0.5 MG-10 MCG-15 MG-210 MG-150 MCG-20 MG-21 MCG-1050 MCG-60 MCG-100 MCG-	
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CVS IMMUNE SUPPORT CAPS .. 86		
CVS MENOPAUSE SUPPORT TABS ..... 117		
CVS ONE DAILY ESSENTIAL TABS 60 MG-2 MG-0.4 MG-1.5 MG-400 UNIT-6 MCG-1.7 MG-20 MG-3000 UNIT-10 MG-45 MG-30 UNIT ..... 86		
CVS ONE DAILY MENS 50+ ADV TABS ..... 86		
CVS ONE DAILY MENS FORMULA TABS 60 MG-3 MG-75 MCG-400 MCG-700 UNIT-18 MCG-1.7 MG-20 MCG-18 MG-16 MG-300 MCG-1.35 MG-15 MG-2 MG-140 MG-210 MG- 22.5 UNIT-2 MG-3500 UNIT-110 MCG-120 MCG ..... 86		

MCG-14 MG-300 MCG-1052 MCG-5 MG-8 MG-1.1 MG-100 MG-15 MG- 300 MG-80 MG-50 MCG-150 MCG- 17.5 MG-20 MG-0.5 MG-5 MCG-2.3 MG-22 MCG-10 MCG-52 MCG-72 MG-2 MG .....87	CYCLOGYL 2 % .....120	MG-5000 UNIT-10 MG-1.5 MG-100 MG-10 MCG-130 MG-40 MG-150 MCG-30 UNIT-100 MG-15 MG-2 MG-2.5 MG-10 MCG-10 MCG .....88
CVS SPECTRAVITE WOMEN TABS 75 MG-40 MCG-400 MCG-1.1 MG- 14 MG-2 MG-15 MG-1.1 MG-25 MCG-15.8 MG-18 MG-100 MG-1.8 MG-50 MCG-80 MG-32 MCG-0.5 MG-8 MG-200 MG-150 MCG-20 MG- 18 MCG-1050 MCG-50 MCG-6 MCG-72 MG .....88	cyclopentolate hcl 1 % .....120	DAILY MULTIVITAMIN CAPS 2 MG- 30 MCG-30 UNIT-200 MCG-2000 UNIT-6 MCG-10 MG-1.7 MG-100 MCG-20 MG-2 MG-30 MG-500 MCG-1 MG-1.5 MG-15 MG-40 MG- 120 MG-2 MG-5000 UNIT-75 MCG- 150 MCG-120 MCG-70 MCG .....88
CVS SPECTRAVITE WOMENS SENIOR TABS 100 MG-5 MG-30 MCG-400 MCG-800 UNIT-50 MCG- 1.1 MG-50 MCG-14 MG-300 MCG- 3500 UNIT-5 MG-8 MG-1.1 MG-50 MG-15 MG-80 MG-150 MCG-500 MG-50 MCG-150 MCG-35 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-50 MCG-72 MG-2 MG .....87	cyclosporine (ophth) EMUL .....121	DAILY VALUE MULTIVITAMIN TABS 400 UNIT-60 MG-2 MG-300 MCG-30 UNIT-400 MCG-1.5 MG-6 MCG-5000 UNIT-1.7 MG-20 MG-10 MG, 400 UNIT-60 MG-2 MG-300 MCG-400 MCG-1.5 MG-6 MCG-5000 UNIT-1.7 MG-20 MG-10 MG-30 UNIT .....114
CVS VISION HEALTH CAPS .....88	cyclosporine CAPS ..... 78	DAILY VITAMINS TABS 60 MG-2 MG-0.4 MG-1.5 MG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT .114
CVS WOMENS ACTIVE DAILY TABs 60 MG-3.2 MG-30 MCG-400 MCG-800 UNIT-9.5 MCG-2.7 MG-25 MCG-10 MG-2500 UNIT-5 MG-18 MG-2.4 MG-50 MG-15 MG-2 MG-300 MG-30 UNIT-2 MG-120 MCG-20 MCG-180 MG .....88	cyclosporine modified (for microemulsion) CAPS ..... 78	DAILY VITE TABS 400 UNIT-60 MG- 2 MG-30 UNIT-400 MCG-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-1.5 MG, 60 MG-2 MG-400 UNIT-6 MCG- 1.7 MG-20 MG-5000 UNIT-10 MG- 1.5 MG-30 UNIT ..... 114
cyanocobalamin SOLN IJ 1000 MCG/ML .....67	cyclosporine modified (for microemulsion) SOLN ..... 78	DAILY VITES TABS 60 MG-2 MG- 0.4 MG-1.5 MG-6 MCG-5000 UNIT- 10 MG-1.7 MG-20 MG-400 UNIT-30 UNIT ..... 114
cyclobenzaprine hcl CP24 .....118	CYLTEZO (2 PEN) AJKT ..... 4	DAILY-VITE MULTIVITAMIN TABS 60 MG-2 MG-400 MCG-20 MG-1.5 MG-10 MCG-6 MCG-1.7 MG-1500 MCG ..... 114
cyclobenzaprine hcl TABS 5 MG, 10 MG ..... 118	CYLTEZO (2 SYRINGE) PSKT .....4	DAILY-VITE TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-3000 UNIT-10 MG-1.5 MG-45 MG-30 UNIT ..... 114
cyclobenzaprine hcl TABS 7.5 MG 118	CYLTEZO-CD/UC/HS STARTER AJKT .....4	dalfampridine .....126
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	CYMBALTA CPEP (duloxetine hcl) 23	
	cyproheptadine hcl SYRP .....32	
	cyproheptadine hcl TABS .....32	
	dabigatran etexilate mesylate CAPS . 18	
	DAILY BETIC TABS 60 MG-2.5 MG- 75 MCG-200 MCG-50 MG-200 UNIT- 5 MCG-2500 UNIT-1.7 MG-20 MG- 250 MCG-10 MG-100 MG-1.5 MG- 100 MG-30 UNIT-50 MG-75 MCG- 7.5 MG-2.5 MG-25 MCG-50 MCG- 100 MCG .....88	
	DAILY COMBO MULTI VITAMINS TABs 400 UNIT-60 MG-2 MG-0.4 MG-20 MG-6 MCG-10 MG-1.7 MG- 1.5 MG-30 UNIT-27 MG-15 MG-450 MG-5000 UNIT .....88	
	DAILY MULTIPLE VITAMINS TABS . 114	
	DAILY MULTIPLE VITAMINS/MIN TABs 400 UNIT-60 MG-2 MG-30 MCG-400 MCG-6 MCG-1.7 MG-20	

DANTRIUM CAPS 25 MG (dantrolene sodium) .....	119	DEPAKOTE SPRINKLES CSDR (divalproex sodium) .....	21	DESLORATADINE SOLN PO 0.5 MG/ML .....	32
dantrolene sodium CAPS .....	119	DEPAKOTE TBEC 125 MG (divalproex sodium) .....	21	desloratadine TABS .....	32
dapagliflozin propanediol .....	29	DEPAKOTE TBEC 250 MG (divalproex sodium) .....	21	desloratadine TBDP .....	32
dapagliflozin propanediol-metformin hcl .....	24	DEPAKOTE TBEC 500 MG (divalproex sodium) .....	21	desmopressin acetate spray .....	64
dapsone (topical) .....	53	DEPLIN MA CAPS .....	88	desmopressin acetate spray refrigerated 0.01 % .....	64
dapsone .....	36	DEPLINPRO MOOD HEALTH CAPS 88		desmopressin acetate TABS .....	64
darifenacin hydrobromide .....	130	DEPO-SUBQ PROVERA 104 SUSY SC .....	50	desogestrel & ethinyl estradiol .....	50
darunavir TABS 600 MG .....	43	DERMACINRX DAVIMET CHEW 114		desogestrel-ethinyl estradiol (biphasic) .....	50
darunavir TABS 800 MG .....	43	DERMACINRX LIDOCAINE CREA 3 % .....	61	desogestrel-ethinyl estradiol (triphasic) .....	50
DAVIMET-M CHEW .....	114	DERMACINRX MULTITAM TABS .....	88	desonide CREA .....	58
DAYAVITE TABS .....	88	DERMACINRX MULTIVITAMIN CHEW .....	114	desonide LOTN .....	58
DAYPRO TABS (oxaprozin) .....	6	DERMACINRX RIBOTIN-E TABS .....	88	desonide OINT .....	58
DAYTRANA PTCH (methylphenidate) .....	2	DERMACINRX SALICYLIC ACID GEL 6 % .....	60	desoximetasone CREA .....	58
DAYVIGO .....	68	DERMACINRX ZINTREXYL-C TABS .....	88	desoximetasone GEL .....	58
DECUBI-VITE CAPS .....	88	DERMA-SMOOTH/FS BODY OIL (fluocinolone acetonide) .....	58	desoximetasone LIQD .....	58
deferasirox PACK .....	30	DERMA-SMOOTH/FS SCALP OIL (fluocinolone acetonide) .....	58	desoximetasone OINT .....	58
deferasirox TABS .....	30	DERMAVITE TABS .....	88	DESVENLAFAXINE ER .....	23
deferasirox TBSO .....	30	DESCOVY 120 MG-15 MG .....	43	desvenlafaxine succinate 100 MG .....	23
deflazacort SUSP .....	51	DESCOVY 200 MG-25 MG .....	43	desvenlafaxine succinate 25 MG, 50 MG .....	23
deflazacort TABS .....	51	desipramine hcl TABS 10 MG, 50 MG, 75 MG, 100 MG, 150 MG .....	24	dexamethasone ELIX .....	51
DEKAS PLUS CAPS .....	88	desipramine hcl TABS 25 MG .....	24	DEXAMETHASONE INTENSOL CONC .....	51
DEKAS PLUS OCEAN CAPS .....	88			dexamethasone sodium phosphate (ophth) .....	121
DELSTRIGO .....	43			dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML .....	51
demeclocycline hcl TABS .....	128			dexamethasone sodium phosphate	
DENAVIR (penciclovir) .....	57				
DEPAKOTE ER TB24 250 MG (divalproex sodium) .....	21				
DEPAKOTE ER TB24 500 MG (divalproex sodium) .....	21				

SOSY IJ 4 MG/ML .....	51	dextromethorphan-guaifenesin LIQD 100 MG/5ML-10 MG/5ML, 150 MG/7.5ML-15 MG/7.5ML, 200 MG/10ML-20 MG/10ML, 200 MG/5ML-10 MG/5ML .....	52	DIALYVITE 800/ULTRA D TABS 80 MG-10 MG-300 MCG-800 MCG- 2000 UNIT-6 MCG-10 MG-1.7 MG- 20 MG-1.5 MG-15 MG-30 UNIT-70 MCG .....	89
dexamethasone SOLN .....	51	dextromethorphan-guaifenesin LIQD 100 MG/5ML-5 MG/5ML, 200 MG/5ML-30 MG/5ML, 400 MG/20ML- 20 MG/20ML .....	52	DIALYVITE SUPREME D TABS ...	89
dexamethasone TABS .....	51	dextromethorphan-guaifenesin SYRP 100 MG/5ML-10 MG/5ML, 200 MG/10ML-20 MG/10ML .....	52	DIATROL TABS .....	89
dexamethasone TBPK .....	51	dextromethorphan-guaifenesin TB12 600 MG-30 MG .....	52	diazepam (anticonvulsant) GEL 10 MG, 20 MG .....	18
DEXATLAN CAPS .....	88	dextromethorphan-phenylephrine- acetaminophen CAPS .....	52	diazepam SOLN PO 5 MG/5ML ...	13
dexchlorpheniramine maleate SOLN . 31		dextrose (diabetic use) CHEW 4 GM . 25		diazepam TABS .....	13
DEXCOM G6 RECEIVER .....	70	DHIVY TABS .....	38	diazoxide .....	25
DEXCOM G6 SENSOR .....	70	DIABETES HEALTH FORMULA TABs 90 MG-3 MG-300 MCG-500 MCG-600 UNIT-30 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT- 10 MG-1.5 MG-1.5 MG-50 MG-150 MCG-220 MG-80 MG-2 MG-45 MCG-150 MCG-50 UNIT-110 MG-5 MCG-2.3 MG-35 MCG-10 MCG-600 MCG-72 MG-12 MG, 90 MG-3 MG- 300 MCG-500 MCG-600 UNIT-30 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG-1.5 MG-1.5 MG-50 MG-45 MCG-5 MCG-150 MCG-10 MCG-220 MG-80 MG-2 MG-150 MCG-50 UNIT-110 MG-35 MCG-2.3 MG-200 MCG-72 MG-12 MG .....	89	dibucaine .....	61
DEXCOM G6 TRANSMITTER ....	70			DICLEGIS TBEC (doxylamine- pyridoxine) .....	31
DEXCOM G7 15 DAY SENSOR ..	70			diclofenac epolamine PTCH EX ...	55
DEXCOM G7 RECEIVER .....	71			diclofenac potassium CAPS .....	6
DEXCOM G7 SENSOR .....	71			diclofenac potassium TABS .....	6
DEXEDRINE CP24 10 MG, 15 MG (dextroamphetamine sulfate) .....	1			diclofenac sodium (ophth) .....	123
DEXILANT (dexlansoprazole) ...	129			diclofenac sodium (topical) GEL EX 55	
dexlansoprazole .....	129			diclofenac sodium (topical) SOLN EX .....	55
dexmethylphenidate hcl CP24 .....	2			diclofenac sodium TB24 .....	6
dexmethylphenidate hcl TABS .....	2			diclofenac sodium TBEC .....	6
dextroamphetamine sulfate CP24 10 MG, 15 MG .....	1			diclofenac w/ misoprostol TBEC ....	6
dextroamphetamine sulfate CP24 5 MG .....	1			dicloxacillin sodium .....	125
dextroamphetamine sulfate SOLN ..	1			dicyclomine hcl CAPS .....	129
dextroamphetamine sulfate TABS 15 MG, 20 MG, 30 MG .....	1			dicyclomine hcl SOLN PO .....	129
dextroamphetamine sulfate TABS 2.5 MG, 7.5 MG, 15 MG, 20 MG, 30 MG . 1				dicyclomine hcl TABS .....	129
dextroamphetamine sulfate TABS 5 MG, 10 MG .....	1	DIACOMIT CAPS 250 MG .....	18	DIFFERIN CREA (adapalene) ....	53
dextromethorphan polistirex SUER 51		DIACOMIT CAPS 500 MG .....	18	DIFFERIN GEL (adapalene) .....	53
		DIACOMIT PACK 250 MG .....	18	DIFFERIN LOTN .....	53
		DIACOMIT PACK 500 MG .....	18		

DIFICID SUSR .....	70	diltiazem hcl CP24 120 MG, 180 MG 47	disopyramide phosphate CAPS ...	13
DIFICID TABS 200 MG (fidaxomicin) 70		diltiazem hcl CP24 240 MG .....	disulfiram 250 MG .....	125
diflorasone diacetate CREA .....	58	diltiazem hcl extended release beads 120 MG, 180 MG, 300 MG, 360 MG, 420 MG .....	divalproex sodium CSDR .....	21
diflorasone diacetate OINT .....	58	diltiazem hcl extended release beads 240 MG .....	divalproex sodium TB24 250 MG ..	21
DIFLUCAN SUSR 40 MG/ML (fluconazole) .....	31	diltiazem hcl TABS .....	divalproex sodium TB24 500 MG ..	21
diflunisal TABS .....	8	diltiazem hcl TB24 180 MG, 240 MG, 300 MG, 360 MG, 420 MG .....	divalproex sodium TBEC 125 MG ..	21
difluprednate .....	121	diltiazem hcl TB24 .....	divalproex sodium TBEC 250 MG ..	21
digoxin SOLN PO 0.05 MG/ML ....	48	dimenhydrinate TABS .....	divalproex sodium TBEC 500 MG ..	21
digoxin TABS 125 MCG, 250 MCG 48		dimethyl fumarate CDPK .....	docusate sodium CAPS 100 MG, 250 MG .....	69
DILANTIN (phenytoin sodium extended) .....	20	dimethyl fumarate CPDR .....	docusate sodium CAPS 50 MG ...	69
DILANTIN .....	20	DIOVAN HCT (valsartan- hydrochlorothiazide) .....	docusate sodium LIQD 50 MG/5ML, 100 MG/10ML .....	69
DILANTIN INFATABS CHEW (phenytoin) .....	20	DIOVAN TABS (valsartan) .....	DOCUSATE SODIUM SYRP .....	69
DILANTIN SUSP (phenytoin) .....	20	DIPENTUM .....	docusate sodium TABS .....	69
DILANTIN-125 SUSP (phenytoin) .	20	diphenhydramine hcl (sleep) TABS 25 MG .....	dofetilide .....	13
DILAUDID LIQD (hydromorphone hcl) .....	8	diphenhydramine hcl CAPS .....	donepezil hydrochloride TABS 23 MG .....	125
DILAUDID TABS 2 MG (hydromorphone hcl) .....	8	diphenhydramine hcl ELIX 12.5 MG/5ML .....	donepezil hydrochloride TABS 5 MG, 10 MG .....	125
DILAUDID TABS 4 MG (hydromorphone hcl) .....	8	diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML .....	donepezil hydrochloride TBDP ...	125
DILAUDID TABS 8 MG (hydromorphone hcl) .....	8	diphenhydramine hcl TABS 25 MG 31	DORAL (quazepam) .....	68
diltiazem hcl coated beads CP24 120 MG, 180 MG, 300 MG .....	47	diphenoxylate w/ atropine LIQD ...	DORYX MPC TBEC 60 MG .....	128
diltiazem hcl coated beads CP24 240 MG .....	47	diphenoxylate w/ atropine TABS ...	dorzolamide hcl .....	123
diltiazem hcl coated beads CP24 360 MG .....	47	DIPROLENE OINT (betamethasone dipropionate augmented) .....	dorzolamide hcl-timolol maleate .	120
diltiazem hcl CP12 .....	47	dipyridamole .....	DOVATO .....	43

doxycycline (monohydrate) SUSR 128	DUREZOL (difluprednate) ..... 122	efavirenz CAPS 200 MG ..... 43
doxycycline (monohydrate) TABS 128	dutasteride ..... 66	efavirenz CAPS 50 MG ..... 43
doxycycline (rosacea) ..... 61	dutasteride-tamsulosin hcl ..... 66	efavirenz TABS ..... 43
doxycycline hyclate CAPS ..... 128	DYANAVEL XR SUER ..... 1	efavirenz-emtricitabine-tenofovir disoproxil fumarate ..... 43
doxycycline hyclate TABS ..... 128	DYANAVEL XR TBCR ..... 1	efavirenz-lamivudine-tenofovir disoproxil fumarate ..... 43
doxycycline hyclate TBEC ..... 128	DYMISTA SUSP (azelastine hcl- fluticasone propionate) ..... 119	EFFER-K TBEF 25 MEQ ..... 77
doxylamine succinate (sleep) ..... 68	E.E.S. GRANULES SUSR (erythromycin ethylsuccinate) ..... 70	EFFEXOR XR CP24 150 MG (venlafaxine hcl) ..... 24
doxylamine-pyridoxine TBEC ..... 31	EASIVENT MASK LARGE MISC .. 74	EFFEXOR XR CP24 37.5 MG (venlafaxine hcl) ..... 24
DRIZALMA SPRINKLE CSDR .... 23	EASIVENT MASK MEDIUM MISC 74	EFFEXOR XR CP24 75 MG (venlafaxine hcl) ..... 24
dronabinol CAPS ..... 31	EASIVENT MASK SMALL MISC .. 74	EFFIENT (prasugrel hcl) ..... 67
DROPLET INSULIN SYRINGE ... 72	EASIVENT MISC ..... 74	ELEPSIA XR TB24 ..... 18
drospirenone-ethinyl estradiol 0.02 MG-3 MG ..... 50	EASY TOUCH FLIPLOCK INSULIN SY ..... 72	eletriptan hydrobromide ..... 76
drospirenone-ethinyl estradiol 0.03 MG-3 MG ..... 50	EASY TOUCH INSULIN BARRELS . 72	ELIMITE CREA (permethrin) ..... 61
DROXIA CAPS ..... 67	EASY TOUCH INSULIN SAFETY SYR ..... 72	ELIQUIS (1.5 MG PACK) TBSO PO . 16
DRY EYE FORMULA CAPS 33.333 MG-3.333 MG-16.667 UNIT-6.667 MG-133.333 MG-166.667 MG ..... 89	EASY TOUCH INSULIN SYRINGE 72	ELIQUIS (2 MG PACK) TBSO PO .16
DUAKLIR PRESSAIR ..... 15	EASY TOUCH SHEATHLOCK SYRINGE ..... 72	ELIQUIS CPSP PO 0.15 MG ..... 16
DUETACT (pioglitazone hcl- glimepiride) ..... 24	EBGLYSS SOAJ ..... 59	ELIQUIS DVT/PE STARTER PACK TBPK ..... 16
DULERA ..... 15	EBGLYSS SOSY ..... 59	ELIQUIS TABS ..... 16
DULERA 100 MCG/ACT-5 MCG/ACT, 200 MCG/ACT-5 MCG/ACT ..... 15	econazole nitrate CREA ..... 55	ELIQUIS TBSO PO 0.5 MG ..... 16
duloxetine hcl CPEP 20 MG, 30 MG, 60 MG ..... 24	ECONAZOLE NITRATE FOAM 1 % . 55	ELLA ..... 50
duloxetine hcl CPEP 40 MG ..... 24	EDARBI ..... 34	ELON MATRIX 5000 COMPLETE TABS ..... 117
DUPIXENT SOAJ ..... 59	EDARBYCLOR ..... 35	ELON MATRIX 5000 TABS ..... 117
DUPIXENT SOSY 200 MG/1.14ML, 300 MG/2ML ..... 59	EDLUAR SUBL ..... 68	ELON MATRIX COMPLETE TABS 117
	EDURANT ..... 43	ELON MATRIX PLUS TABS ..... 118
	EDURANT PED PO 2.5 MG ..... 43	

ELON R3 TABS .....	118	enalapril maleate TABS .....	33	EOHILIA SUSP .....	51
EMBECTA INSULIN SYR ULTRAFINE .....	72	ENBREL MINI SOCT .....	7	EPANED SOLN (enalapril maleate) 33	
EMBECTA INSULIN SYRINGE ...	72	ENBREL SOLN .....	7	EPCLUSA PACK .....	45
EMBECTA PEN NEEDLE ULTRAFINE .....	72	ENBREL SOSY 25 MG/0.5ML .....	7	EPCLUSA TABS 100 MG-400 MG	45
EMEND BIPACK CAPS 80 MG (aprepitant) .....	31	ENBREL SOSY 50 MG/ML .....	7	EPCLUSA TABS 50 MG-200 MG .	45
EMEND SUSR .....	31	ENBREL SURECLICK SOAJ .....	7	EPIDIOLEX .....	18
EMEND TRIPACK CAPS (aprepitant) .....	31	ENDARI (glutamine (sickle cell)) .	67	EPIDUO FORTE GEL (adapalene- benzoyl peroxide) .....	53
EMFLAZA SUSP (deflazacort) ....	51	ENFAMIL POLY-VI-SOL-IRON SOLN 11 MG/ML .....	116	EPIFOAM FOAM .....	58
EMFLAZA TABS (deflazacort) ....	51	ENGERIX-B SUSP 20 MCG/ML .	132	epinastine hcl (ophth) .....	123
EMGALITY (300 MG DOSE) SOSY 76		ENGERIX-B SUSY .....	132	epinephrine (anaphylaxis) SOAJ 0.15 MG/0.15ML .....	134
EMGALITY SOAJ .....	76	ENHERTU .....	37	epinephrine (anaphylaxis) SOAJ 0.3 MG/0.3ML .....	134
EMGALITY SOSY .....	76	enoxaparin sodium SOLN IJ 300 MG/3ML .....	17	epinephrine (anaphylaxis) SOAJ .	134
emollient LOTN .....	60	enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML .....	17	EPIPEN 2-PAK SOAJ (epinephrine (anaphylaxis)) .....	134
EMSAM .....	22	enoxaparin sodium SOSY 30 MG/0.3ML .....	17	EPIPEN JR 2-PAK SOAJ (epinephrine (anaphylaxis)) .....	134
emtricitabine CAPS .....	43	enoxaparin sodium SOSY 40 MG/0.4ML .....	17	EPIVIR SOLN (lamivudine) .....	43
emtricitabine- rilpivirine-tenofovir disoproxil fumarate .....	43	enoxaparin sodium SOSY 60 MG/0.6ML .....	17	EPIVIR TABS 150 MG (lamivudine) 43	
emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG- 200 MG, 167 MG-250 MG .....	43	enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML .....	17	EPIVIR TABS 300 MG (lamivudine) 43	
emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG .....	43	ENSPRYNG .....	78	EPOGEN 10000 UNIT/ML, 20000 UNIT/ML .....	67
EMTRIVA CAPS (emtricitabine) ...	43	ENSTILAR FOAM .....	58	EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML .....	67
EMTRIVA SOLN .....	43	entecavir TABS .....	45	EPRONTIA SOLN 25 MG/ML (topiramate) .....	18
EMVERM CHEW .....	12	ENTRESTO CPSP .....	48	EPSOLAY CREA .....	53
enalapril maleate & hydrochlorothiazide .....	35	ENTRESTO TABS 103 MG-97 MG, 26 MG-24 MG, 51 MG-49 MG (sacubitril-valsartan) .....	48	EQ COMPLETE MULTIVIT ADULT	
enalapril maleate SOLN .....	33	ENTYVIO PEN SOAJ .....	65		
		ENVARUSUS XR TB24 .....	78		

50+ TABS 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT- 10 MG-220 MG-300 MCG-1.5 MG-11 MG-150 MCG-50 UNIT-50 MG-80 MG-45 MCG-150 MCG-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG-2 MG, 60 MG- 3 MG-30 MCG-400 MCG-500 UNIT- 25 MCG-1.7 MG-30 MCG-20 MG- 250 MCG-2500 UNIT-10 MG-220 MG-300 MCG-1.5 MG-11 MG-150 MCG-50 UNIT-50 MG-80 MG-45 MCG-150 MCG-20 MG-20 MG-0.5 MG-5 MCG-2.3 MG-45 MCG-55 MCG-10 MCG-72 MG-2 MG .....89	TABS 120 MG-6 MG-30 MCG-300 MCG-600 UNIT-100 MCG-10 MG-1.7 MG-60 MCG-20 MG-300 MCG-3500 UNIT-600 MCG-1.5 MG-15 MG-0.7 MG-50 MG-5 MCG-250 MG-80 MG- 15 MG-50 MCG-150 MCG-20 MG-4 MG-60 UNIT-100 MCG-72 MG-10 MCG-60 MCG-150 MCG .....90	MG-2.2 MG-110 MG-90 MCG-150 MCG-25.5 UNIT-4.2 MG-180 MCG- 117 MCG .....90
EQ COMPLETE MULTIVITAMIN- ADULT TABS .....89	EQL CENTURY MATURE TABS 90 MG-3 MG-30 MCG-500 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT-10 MG- 300 MCG-1.5 MG-11 MG-150 MCG- 50 MG-2 MG-220 MG-80 MG-45 MCG-150 MCG-50 UNIT-110 MG-0.9 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG .....90	EQL ONE DAILY MENS HEALTH TABS 400 UNIT-90 MG-3 MG-30 MCG-400 MCG-18 MCG-1.7 MG-20 MCG-16 MG-3500 UNIT-5 MG-210 MG-0.6 MG-1.2 MG-15 MG-2 MG- 120 MG-100 MG-45 UNIT-2 MG-120 MCG-105 MCG .....90
EQ ONE DAILY MENS 50+ TABS .89	EQL CENTURY MATURE WOMEN 50+ TABS 100 MG-5 MG-30 MCG- 400 MCG-800 UNIT-50 MCG-5 MG- 1.1 MG-50 MCG-14 MG-300 MCG- 3500 UNIT-8 MG-1.1 MG-15 MG-0.5 MG-50 MG-5 MCG-500 MG-80 MG- 15 MG-50 MCG-150 MCG-20 MG- 2.3 MG-35 UNIT-55 MCG-72 MG-10 MCG-50 MCG-150 MCG .....90	EQL ONE DAILY MENS TABS ....90
EQ ONE DAILY MENS HEALTH TABS .....89	EQL CENTURY MENS TABS .....90	EQL ONE DAILY WOMENS 50+ ADV TABS 120 MG-6 MG-30 MCG- 400 MCG-1000 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-3500 UNIT-15 MG-500 MG-4.5 MG-24 MG-2.2 MG- 50 MG-90 MCG-150 MCG-30 UNIT- 4.2 MG-180 MCG-27 MCG .....90
EQ ONE DAILY WOMENS 50+ TABS .....89	EQL CENTURY TABS 90 MG-2 MG- 30 MCG-500 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-250 MCG-3500 UNIT-10 MG-18 MG-300 MCG-1.5 MG-11 MG-150 MCG-100 MG-80 MG-200 MG-45 MCG-150 MCG-30 UNIT-109 MG-0.9 MG-5 MCG-10 MCG-2.3 MG-55 MCG-10 MCG-35 MCG-72 MG-2 MG .....90	EQL ONE DAILY WOMENS TABS 60 MG-2 MG-30 MCG-400 MCG-800 UNIT-6 MCG-1.7 MG-25 MCG-10 MG-2500 UNIT-5 MG-18 MG-1.5 MG-15 MG-50 MG-120 MCG-450 MG-30 UNIT-2 MG-2 MG-20 MCG, 60 MG-2 MG-30 MCG-400 MCG-800 UNIT-6 MCG-1.7 MG-25 MCG-10 MG-2500 UNIT-5 MG-18 MG-1.5 MG-15 MG-50 MG-450 MG-30 UNIT- 2 MG-2 MG-120 MCG-20 MCG ... 79
EQ ONE DAILY WOMENS HEALTH TABS .....89	EQL CENTURY WOMENS TABS .90	EQL VISION FORMULA TABS 200 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG .....91
EQ SPACE CHAMBER ANTI- STATIC DEVI .....74	EQL ONE DAILY MENS 50+ ADVANCE TABS 120 MG-6 MG-30 MCG-400 MCG-700 UNIT-25 MCG- 3.4 MG-20 MCG-20 MG-3500 UNIT- 15 MG-120 MG-370 MCG-4.5 MG-24	EQUETRO .....39
EQ SPACE CHAMBER ANTI- STATIC L DEVI .....74		ergocalciferol CAPS .....134
EQ SPACE CHAMBER ANTI- STATIC M DEVI .....74		ergocalciferol SOLN PO 200 MCG/ML .....134
EQ SPACE CHAMBER ANTI- STATIC S DEVI .....74		ergotamine w/ caffeine TABS .....76
EQ VISION FORMULA 50+ CAPS 150 MG-30 UNIT-5 MG-1 MG-1 MG- 9 MG-90 MG-160 MG-250 MG ....89		ERTACZO .....55
EQL CENTURY MATURE ADULTS 50+ TABS .....89		ERVEBO .....132
EQL CENTURY MATURE MEN 50+		

ERYPED 200 SUSR (erythromycin ethylsuccinate) .....	70	MG .....	129	estrogens, conjugated TABS 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG .....	64
ERYPED 400 SUSR (erythromycin ethylsuccinate) .....	70	esomeprazole magnesium CPDR 40 MG .....	129	ESTROVEN MENOPAUSE SUPPLEMENT TABS .....	91
erythromycin (acne aid) GEL .....	53	esomeprazole magnesium PACK .....	129	eszopiclone .....	68
erythromycin (acne aid) PADS .....	53	ESSENTIA TABS 100 MG-6 MG-30 MCG-400 MCG-2000 UNIT-25 MCG-3000 UNIT-10 MG-100 MCG-100 MG-25 MG-10 MG-18 MG-100 MG-10 MG-100 MG-15 MG-2 MG-250 MCG-60 UNIT-2 MG-10 MCG-75 MCG-150 MCG-70 MCG-100 MCG .....	91	ethambutol hcl TABS .....	37
erythromycin (ophth) .....	121	ESSENTIAL BALANCE TABS 120 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-250 MCG-3000 UNIT-10 MG-9 MG-1.5 MG-15 MG-2 MG-150 MCG-20 MG-100 MG-40 MG-2 MG-100 MG-25 MCG-150 MCG-50 UNIT-77 MG-5 MCG-10 MCG-2 MG-120 MCG-25 MCG-25 MCG-10 MCG-36 MG .....	91	ethosuximide CAPS .....	21
erythromycin base CPEP .....	70	ESSENTIAL ONE DAILY MULTIVIT TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-3000 UNIT-10 MG-1.5 MG-45 MG-30 UNIT .....	79	ethosuximide SOLN .....	21
erythromycin base TABS .....	70	estazolam .....	68	ethynodiol diacet & eth estrad 35 MCG-1 MG .....	50
erythromycin base TBEC .....	70	estradiol & norethindrone acetate TABS .....	64	ethynodiol diacet & eth estrad 50 MCG-1 MG .....	50
erythromycin ethylsuccinate SUSR 70		estradiol PTTW 0.025 MG/24HR, 0.05 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR .....	64	etodolac CAPS .....	6
erythromycin ethylsuccinate TABS 70		estradiol PTTW 0.0375 MG/24HR .....	64	etodolac TABS .....	6
erythromycin stearate TABS 250 MG 70		estradiol PTWK .....	64	etodolac TB24 .....	6
ERZOFRI 117 MG/0.75ML .....	39	estradiol TABS .....	64	etonogestrel-ethinyl estradiol .....	50
ERZOFRI 156 MG/ML .....	39	estradiol vaginal CREA .....	134	etravirine 100 MG .....	43
ERZOFRI 234 MG/1.5ML .....	39	estradiol vaginal TABS .....	134	etravirine 200 MG .....	43
ERZOFRI 351 MG/2.25ML .....	39	ESTROFACTORS TABS .....	114	EUCERIN LOTN .....	60
ERZOFRI 39 MG/0.25ML .....	39			EUCERIN ORIGINAL HEALING LOTN .....	60
ERZOFRI 78 MG/0.5ML .....	39			EUCERIN PLUS LOTN .....	60
ESCITALOPRAM OXALATE CAPS PO 15 MG .....	22			EUCERIN PROFESSIONAL REPAIR LOTN .....	60
escitalopram oxalate SOLN .....	22			EUCRISA .....	61
escitalopram oxalate TABS 10 MG 22				EVEKEO TABS (amphetamine sulfate) .....	1
escitalopram oxalate TABS 20 MG 22				everolimus (immunosuppressant) .....	78
escitalopram oxalate TABS 5 MG . 22				EVEXITHROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG, 180 MG .....	128
eslicarbazepine acetate 200 MG, 400 MG, 600 MG, 800 MG .....	18			EVISTA (raloxifene hcl) .....	63
esomeprazole magnesium CPDR 20					

EVOTAZ .....	43	famotidine SUSR .....	129	FENOPRON CAPS .....	6
EXELON 13.3 MG/24HR (rivastigmine) .....	125	famotidine TABS 10 MG .....	129	FENSOLVI (6 MONTH) SC .....	63
EXELON 4.6 MG/24HR, 9.5 MG/24HR (rivastigmine) .....	125	famotidine TABS 20 MG, 40 MG ..	129	fentanyl citrate LPOP 200 MCG, 1200 MCG .....	8
exemestane .....	37	FANAPT .....	39	fentanyl citrate TABS 400 MCG, 600 MCG, 800 MCG .....	8
exenatide SOPN 10 MCG/0.04ML ..	26	FANAPT TITRATION PACK A .....	39	fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR .....	8
exenatide SOPN 5 MCG/0.02ML ..	26	FANAPT TITRATION PACK B .....	39	fentanyl PT72 37.5 MCG/HR, 62.5 MCG/HR, 87.5 MCG/HR .....	8
EXFORGE (amlodipine besylate- valsartan) .....	35	FANAPT TITRATION PACK C .....	39	FARXIGA (dapagliflozin propanediol) .....	29
EXFORGE HCT (amlodipine- valsartan-hydrochlorothiazide) ..	35	FARXIGA (dapagliflozin propanediol) .....	29	FASENRA PEN SOAJ .....	13
EXTENCILLINE SUSR .....	124	FASENRA SOSY .....	13	febuxostat .....	66
EXXUA TB24 PO 18.2 MG, 36.3 MG, 54.5 MG, 72.6 MG .....	23	FELBATOL TABS (felbamate) .....	20	felbamate SUSP .....	20
EXXUA TITRATION PACK TB24 PO 18.2 MG .....	23	FELDENE CAPS 20 MG (piroxicam) . 6	6	felbamate TABS .....	20
EYE HEALTH + LUTEIN TABS .....	91	felodipine .....	47	FELBATOL TABS (felbamate) .....	20
EYE HEALTH AREDS 2 CAPS .....	91	fenofibrate CAPS .....	33	FELDENE CAPS 20 MG (piroxicam) . 6	6
EYE HEALTH CAPS .....	91	fenofibrate micronized 134 MG, 200 MG .....	33	felodipine .....	47
EYE MULTIVITAMIN/SODIUM TABS .....	91	fenofibrate micronized 43 MG, 130 MG .....	33	fenofibrate CAPS .....	33
EYE VITAMINS CAPS 60 MG-6 MG- 15 MG-2 MG-30 UNIT-22 MG .....	91	fenofibrate micronized 67 MG .....	33	fenofibrate micronized 134 MG, 200 MG .....	33
EYE-VITES TABS 60 MG-40 MG-2 MG-5000 UNIT-30 UNIT-40 MCG ..	91	fenofibrate TABS 160 MG .....	33	fenofibrate micronized 43 MG, 130 MG .....	33
EYLEA SOSY .....	120	fenofibrate TABS 40 MG, 120 MG ..	33	fenofibrate micronized 67 MG .....	33
EYSUVIS SUSP .....	122	fenofibrate TABS 48 MG, 145 MG ..	33	fenofibrate TABS 160 MG .....	33
EZALLOR SPRINKLE CPSP .....	33	fenofibrate TABS 54 MG .....	33	fenofibrate TABS 40 MG, 120 MG ..	33
ezetimibe .....	33	fenofibric acid .....	33	fenofibrate TABS 48 MG, 145 MG ..	33
ezetimibe-simvastatin .....	32	fenopronfen calcium CAPS 400 MG .	6	fenofibrate TABS 54 MG .....	33
FABIOR FOAM .....	53	fenopronfen calcium TABS .....	6	fenofibric acid .....	33
famciclovir .....	46			fenopronfen calcium CAPS 400 MG .	6

SYR .....	72	132	fluorouracil (topical) SOLN .....	55
FINACEA FOAM .....	61	FLUARIX SUSY .....	132	fluoxetine hcl (pmdd) TABS 10 MG
finasteride .....	66	FLUBLOK QUADRIVALENT .....	132	127
FINAZOL TABS .....	91	FLUBLOK SOSY .....	132	fluoxetine hcl (pmdd) TABS 20 MG
fingolimod hcl .....	126	FLUCELVAX QUADRIVALENT		127
FINTEPLA .....	19	SUSY .....	132	fluoxetine hcl CAPS 10 MG, 20 MG
FIORICET/CODEINE 30 MG-40 MG-		FLUCELVAX SUSP .....	132	22
50 MG-300 MG (butalbital-		FLUCELVAX SUSY .....	132	fluoxetine hcl CAPS 40 MG .....
acetaminophen-caffeine w/ codeine) .		fluconazole SUSR .....	31	22
10		fluconazole TABS 100 MG, 200 MG .	31	fluoxetine hcl SOLN .....
FIRVANQ SOLR PO (vancomycin		31		22
hcl) .....	36	fluconazole TABS 150 MG .....	31	FLUOXETINE HCL TABS (fluoxetine
FITNESS TABS FOR MEN AM/PM		fluconazole TABS 50 MG .....	31	hcl) .....
TABS .....	91	fludrocortisone acetate TABS .....	51	22
FITNESS TABS FOR WOMEN		FLULAVAL SUSY .....	132	fluoxetine hcl TABS 10 MG .....
AM/PM TABS .....	91	FLUMIST .....	132	22
FLAGYL CAPS (metronidazole) ...	36	flunisolide (nasal) .....	119	fluoxetine hcl TABS 20 MG .....
FLAREX .....	122	fluocinolone acetonide (otic) .....	123	22
flavoxate hcl .....	130	fluocinolone acetonide CREA .....	58	fluoxetine hcl TABS 60 MG .....
flecainide acetate .....	13	fluocinolone acetonide OIL .....	58	22
FLEQSUVY SUSP (baclofen) ....	118	fluocinolone acetonide OINT .....	58	fluphenazine decanoate .....
FLEXICHAMBER ADULT		fluocinolone acetonide SOLN .....	58	41
MASK/SMALL .....	74	fluocinonide CREA 0.05 % .....	58	fluphenazine hcl TABS .....
FLEXICHAMBER CHILD		fluocinonide CREA 0.1 % .....	58	41
MASK/LARGE .....	74	fluocinonide emulsified base .....	58	flurandrenolide CREA .....
FLEXICHAMBER CHILD		fluocinonide GEL .....	58	58
MASK/SMALL .....	74	fluocinonide OINT .....	58	flurandrenolide LOTN .....
FLEXICHAMBER DEVI .....	74	fluocinonide SOLN .....	58	58
FLORRAVITE TABS .....	91	fluorometholone (ophth) SUSP ...	122	flurazepam hcl .....
FLORRAXYL TABS .....	91	fluorouracil (topical) CREA 0.5 % .	55	68
FLUAD .....	132	fluorouracil (topical) CREA 5 % ...	55	123
FLUAD QUADRIVALENT .....	132			flurbiprofen sodium .....
FLUARIX QUADRIVALENT SUSY				123
				flurbiprofen TABS 100 MG .....
				6
				fluticasone furoate (inhalation) 50
				MCG/ACT, 100 MCG/ACT, 200
				MCG/ACT .....
				14
				fluticasone furoate-vilanterol .....
				15
				fluticasone propionate (inhalation)
				AEPB .....
				14
				fluticasone propionate (nasal) SUSP .
				119
				fluticasone propionate CREA 0.05 %
				58
				fluticasone propionate hfa 110

MCG/ACT, 220 MCG/ACT	14	FOLACHEW CHEW	114	SENSOR	71
fluticasone propionate hfa 44 MCG/ACT	14	FOLAGENT DHA CAPS	91	FREESTYLE LIBRE 2 PLUS SENSOR	71
fluticasone propionate LOTN	58	FOLAMAX TABS	91	FREESTYLE LIBRE 2 READER	71
fluticasone propionate OINT	58	FOLAMED DHA CAPS	91	FREESTYLE LIBRE 2 SENSOR	71
fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT	16	FOLAPRIME TABS	91	FREESTYLE LIBRE 3 PLUS SENSOR	71
fluticasone-salmeterol AEPB 113 MCG/ACT-14 MCG/ACT, 232 MCG/ACT-14 MCG/ACT, 55 MCG/ACT-14 MCG/ACT	15	FOLASYNC DHA CAPS	91	FREESTYLE LIBRE 3 READER	71
fluticasone-salmeterol AERO	16	FOLAWISE TABS	114	FREESTYLE LIBRE 3 SENSOR	71
fluvastatin sodium CAPS	33	FOLCYTEINE TABS	114	FROVA (frovatriptan succinate)	76
fluvastatin sodium TB24	33	folic acid TABS 1 MG	67	frovatriptan succinate	76
fluvoxamine maleate CP24	22	folic acid TABS 400 MCG	67	FT CENTURY 50+ TABS	91
fluvoxamine maleate TABS 100 MG . 22		FOLIFLEX TABS	91	FT CENTURY ADULTS TABS	91
fluvoxamine maleate TABS 25 MG, 50 MG	22	FOLITIN-Z TABS	91	FT CENTURY MEN 50+ TABS	91
FLUZONE HIGH-DOSE QUADRIVALENT	132	fondaparinux sodium	17	FT CENTURY MEN TABS	91
FLUZONE HIGH-DOSE SUSY	132	FORFIVO XL TB24 (bupropion hcl) 22		FT CENTURY WOMEN 50+ TABS 91	
FLUZONE QUADRIVALENT SUSY 132		formoterol fumarate NEBU	16	FT CENTURY WOMEN TABS	91
FLUZONE SUSP	132	FORTEO SOPN (teriparatide)	63	FT EYE HEALTH CAPS	91
FLUZONE SUSY	132	FOSAMAX PLUS D	63	FT EYE HEALTH TABS	91
FML FORTE SUSP	122	FOSAMAX TABS 70 MG (alendronate sodium)	63	FT HAIR SKIN & NAILS EXTRA STR TABS	91
FML LIQUIFILM SUSP (fluorometholone (ophth))	122	fosamprenavir calcium TABS	43	FT ONE DAILY MENS 50+ TABS	91
FOCALIN TABS (dexmethylphenidate hcl)	2	fosinopril sodium & hydrochlorothiazide	35	FT ONE DAILY MENS TABS	91
FOCALIN XR CP24 (dexmethylphenidate hcl)	2	fosinopril sodium	33	FT ONE DAILY WOMENS 50+ TABS	92
		FOSRENOL CHEW (lanthanum carbonate)	66	FT ONE DAILY WOMENS TABS	92
		FOSRENOL PACK	66	furosemide SOLN PO 8 MG/ML, 10 MG/ML	62
		FRAGMIN SOLN 10000 UNIT/4ML, 95000 UNIT/3.8ML	17	furosemide TABS	62
		FRAGMIN SOSY	17	FUZEON SOLR	43
		FREEDAVIDE TABS	91	FYCOMPA SUSP 0.5 MG/ML	
		FREESTYLE LIBRE 14 DAY			

(perampanel) .....	18	GENOTROPIN CART SC .....	63	GLUCAGON EMERGENCY .....	25
FYCOMPA TABS 2 MG, 4 MG, 6 MG, 8 MG, 10 MG, 12 MG (perampanel) .....	18	GENOTROPIN MINIQUICK PRSY	63	GLUCAGON EMERGENCY SOLR IJ 1 MG (glucagon) .....	25
gabapentin (once-daily) TABS ...	127	gentamicin sulfate (ophth) SOLN	.121	glucagon SOLR IJ 1 MG .....	25
gabapentin CAPS .....	19	gentamicin sulfate (topical) CREA	.54	GLUCOPRO INSULIN SYRINGE	.72
gabapentin SOLN .....	19	gentamicin sulfate (topical) OINT	.54	GLUCOTROL XL TB24 5 MG, 10 MG (glipizide) .....	29
gabapentin TABS 600 MG .....	19	GENVOYA .....	43	glutamine (sickle cell) .....	67
gabapentin TABS 800 MG .....	19	GEODON (ziprasidone hcl) .....	39	glyburide micronized 1.5 MG, 3 MG, 6 MG .....	29
GABARONE TABS 100 MG, 400 MG .....	19	GERI-FREEDA SENIOR FORMULA TABS .....	92	glyburide TABS .....	29
GALAFOLD .....	63	GERIVITE COMPLETE TABS 60 MG-2 MG-45 MCG-400 MCG-20 MG-1.5 MG-6 MCG-10 MG-1.7 MG- 400 UNIT-30 UNIT-18 MG-100 MG- 2.5 MG-15 MCG-5 MCG-37.5 MG-80 MCG-15 MCG-2 MG-10 MCG-15 MG-162 MG-150 MCG-125 MG-15 MCG-10 MCG-6000 UNIT-25 MCG- 34 MG .....	92	glyburide-metformin .....	24
galantamine hydrobromide CP24	125	GILENYA (fingolimod hcl) .....	126	glycerin (laxative) SUPP 2 GM ....	69
galantamine hydrobromide SOLN 125		GILENYA 0.25 MG .....	126	glycopyrrolate TABS 1 MG, 2 MG 129	
galantamine hydrobromide TABS	125	GIMOTI SOLN NA .....	65	GLYXAMBI .....	24
GAMMAGARD .....	124	GIVLAARI .....	67	GNP CENTURY ADULT FORMULA TABS 60 MG-30 MCG-400 MCG-1.5 MG-20 MG-2 MG-10 MG-1.7 MG-25 MCG-13.5 MG-18 MG-50 MG-2.3 MG-45 MCG-80 MG-35 MCG-0.5 MG-11 MG-200 MG-150 MCG-20 MG-55 MCG-1050 MCG-25 MCG-6 MCG-72 MG .....	92
GAMMAGARD ERC 5 GM/50ML, 10 GM/100ML .....	124	glatiramer acetate SOSY 20 MG/ML . 126		GNP CENTURY ADULT TABS ....	92
GAMMAGARD S/D LESS IGA SOLR .....	124	glatiramer acetate SOSY 40 MG/ML . 126		GNP CENTURY ADULTS MEN TABS .....	92
GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML .....	124	glimepiride 1 MG, 2 MG .....	29	GNP CENTURY ADULTS WOMEN TABS .....	92
GAMUNEX-C 1 GM/10ML, 2.5 GM/25ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML .....	124	glimepiride 3 MG .....	29	GNP CENTURY MATURE ADULTS 50+ TABS .....	92
GARDASIL 9 SUSP 0.5 ML .....	132	glimepiride 4 MG .....	29	GNP CENTURY MATURE MEN'S 50+ TABS .....	92
GARDASIL 9 SUSY 0.5 ML .....	132	glipizide TABS .....	29	GNP CENTURY MATURE WOMEN'S 50+ TABS 100 MG-5 MG- 30 MCG-400 MCG-25 MCG-50	
gatifloxacin (ophth) .....	121	glipizide TB24 .....	29		
gemfibrozil TABS .....	33	glipizide-metformin hcl .....	24		
GEMTESA .....	130	GLOPERBA SOLN PO .....	66		
GENICIN VITA-Q TABS .....	114	GLP-DLAX TABS .....	118		

MCG-1.1 MG-50 MCG-14 MG-300 MCG-5 MG-8 MG-1.1 MG-100 MG- 15 MG-80 MG-300 MG-50 MCG-150 MCG-15.8 MG-20 MG-0.5 MG-2.3 MG-1050 MCG-22 MCG-52 MCG-72 MG ..... 92	MG-175 MCG-2.5 MCG-33.5 MG-25 MG-50 MG-2.5 MG-25 MCG-1 MG- 12.5 MG-105 MG-75 MCG-50 MCG- 25 MG-1500 MCG-37.5 MCG-12.5 MG-15 MCG-5 MCG-35 MG-15 MG- 35 MG-35 MG-15 MG-25 MG-25 MG, 150 MG-25 MG-15 MG-125 MCG-50 UNIT-200 MCG-2.5 MG-5 MG-100 UNIT-15 MCG-15 MG-37.5 MCG-5 MG-5 MG-15 MG-250 MCG-15 MG-5 MG-175 MCG-15 MG-50 MG-12.5 MG-1 MG-100 MG-2.5 MG-5000 UNIT-75 MCG-25 MG-12.5 MG-25 MCG-5 MCG-15 MG-15 MG-35 MG- 35 MG-50 MCG-35 MG-25 MG-25 MG ..... 93	GNP ONE DAILY WOMENS 50+ TABS 60 MG-6 MG-30 MCG-400 MCG-800 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-15 MG-405 MG-4.5 MG-50 MG-22.5 MG-90 MCG-150 MCG-33 UNIT-2 MG-180 MCG-4 MG-2500 UNIT-20 MCG-120 MG . 93
GNP ESSENTIAL ONE DAILY TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-75 MG-1.5 MG-30 UNIT ..... 115	GNP ONE DAILY WOMENS HEALTH TABS 60 MG-2 MG-30 MCG-400 MCG-800 UNIT-6 MCG- 1.7 MG-25 MCG-10 MG-2500 UNIT- 5 MG-18 MG-450 MG-1.5 MG-50 MG-15 MG-30 UNIT-2 MG-120 MCG-2 MG-20 MCG ..... 79	GNP ONE DAILY WOMENS TABS 60 MG-120 MG-3.2 MG-30 MCG-400 MCG-800 UNIT-9.5 MCG-2.7 MG-25 MCG-10 MG-2500 UNIT-5 MG-18 MG-300 MG-2.4 MG-50 MG-15 MG- 22.5 UNIT-2 MG-2 MG-120 MCG-20 MCG-50 MG ..... 93
GNP HAIR/SKIN/NAILS TABS 50 MG-3.5 MG-6.5 MG-25 MCG-25 MCG-7.5 MG-7.2 MG-50 UNIT-25 MCG-2500 UNIT-5 MG-25 MG-10 MG-10 MG-15 MG-3.3 MG-10 MG-5 MG-20 MG-0.5 MG-150 MCG-25 UNIT-54 MG-73 MG-897 MCG-10 MG-50 MG-0.6 MG-10 MG ..... 92	GNP MEGA MULTI FOR WOMEN TABS 100 MG-40 MG-40 MCG-50 UNIT-200 MCG-200 UNIT-40 MCG- 5000 UNIT-40 MG-37.5 MCG-5 MG- 10 MCG-40 MG-250 MCG-40 MG-5 MG-250 MG-40 MG-100 MG-7.5 MG- 12.5 MG-13.5 MG-2.5 MG-25 MCG-1 MG-50 MCG-1 MG-50 MCG-75 MCG-12.5 MG-1 MG-1 MG-25 MG 93	GNP THERAPEUTIC-M TABS .... 93
GNP HEALTHY EYES SUPERVISION 2 CAPS 250 MG-5 MG-1 MG-40 MG-1 MG-200 UNIT 92	GNP ONE DAILY MAXIMUM TABS 93	GNP ULTRA COM INSULIN SYRINGE ..... 72
GNP HEALTHY EYES TABS 200 MG-2 MG-27 MG-2 MG-40 MG-185 MG-55 MCG-300 MCG, 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG ..... 92	GNP ONE DAILY MENS HEALTH 50+ TABS 120 MG-6 MG-30 MCG- 400 MCG-400 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-2500 UNIT-15 MG-120 MG-600 MCG-4.5 MG-100 MG-22.5 MG-40 MG-90 MCG-150 MCG-33 UNIT-2 MG-180 MCG-4 MG-105 MCG-120 MG ..... 93	GOLD BOND ULTIMATE SOFTENING LOTN ..... 60
GNP INSULIN SYRINGE ..... 72	GNP ONE DAILY MENS/LYCOPENE TABS 90 MG-3 MG-30 MCG-400 MCG-400 UNIT-18 MCG-1.7 MG-20 MCG-16 MG-3500 UNIT-5 MG-210 MG-600 MCG-1.2 MG-120 MG-15 MG-2 MG-100 MG-45 UNIT-2 MG- 120 MCG-105 MCG ..... 93	GOLYTELY SOLR (peg 3350-kcl-sod bicarb-sod chloride-sod sulfate) ... 69
GNP INSULIN SYRINGES ..... 72		GORDONS UREA CREA 40 % ... 59
GNP INSULIN SYRINGES 28GX1/2" ..... 72		GRALISE TABS (gabapentin (once- daily)) ..... 127
GNP INSULIN SYRINGES 29GX1/2" ..... 72		granisetron hcl TABS ..... 30
GNP INSULIN SYRINGES 30GX5/16" ..... 72		GRASTEK SUBL ..... 3
GNP INSULIN SYRINGES 31GX5/16" ..... 72		griseofulvin microsize SUSP ..... 31
GNP MEGA MULTI FOR MEN TABS 150 MG-125 MCG-200 MCG-15 MG- 15 MG-2.5 MG-5 MG-5 MG-15 MG- 15 MG-15 MG-5 MG-250 MCG-5		griseofulvin microsize TABS ..... 31
		griseofulvin ultramicrosize ..... 31
		guaifenesin TB12 1200 MG ..... 52
		guaifenesin TB12 600 MG ..... 52

guaifenesin-codeine SOLN .....	52	HAIR/SKIN/NAILS TABS .....	94	MG-1.5 MG-50 MG-2500 UNIT-50 MG-50 MG .....	115
guaifenesin-codeine SYRP .....	52	halcinonide CREA .....	58	HEALTHY HEART COMPLEX TABS 118	
guanfacine hcl (adhd) .....	2	halcinonide SOLN 0.1 % .....	58	HEART TABS TABS .....	118
guanfacine hcl .....	34	HALCION 0.25 MG (triazolam) ....	68	HEMADY TABS .....	51
GVOKE HYPOPEN 1-PACK SOAJ 25		halobetasol propionate CREA .....	58	HEMANGEOL SOLN PO .....	47
GVOKE HYPOPEN 2-PACK SOAJ 25		halobetasol propionate FOAM .....	58	heparin sodium (porcine) SOLN IJ 1000 UNIT/ML, 5000 UNIT/0.5ML, 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML .....	17
GVOKE KIT SOLN .....	25	halobetasol propionate OINT .....	58	HEPARIN SODIUM (PORCINE) SOSY IJ .....	17
GVOKE PFS SOSY 1 MG/0.2ML ..	25	HALOG CREA (halcinonide) .....	58	HEPLISAV-B SOSY .....	133
GYNAZOLE-1 .....	133	HALOG SOLN 0.1 % (halcinonide) 58		HETLIOZ CAPS (tasimelteon) .....	69
HADLIMA PUSHTOUCH SOAJ ....	4	haloperidol decanoate .....	40	HETLIOZ LQ SUSP .....	69
HADLIMA SOSY .....	4	haloperidol lactate CONC .....	40	HIBERIX SOLR IJ .....	131
HAEGARDA SOLR SC .....	67	haloperidol TABS 0.5 MG, 1 MG, 2 MG, 5 MG, 10 MG .....	40	HIGH POTENCY MULTIVIT/FA TABs .....	94
HAIR NOURISHING SUPPLEMENT TABs .....	118	haloperidol TABS 20 MG .....	40	HIGH POTENCY MULTIVITAMIN TABs .....	115
HAIR SKIN & NAILS ADVANCED TABs .....	93	HARVONI PACK .....	45	HI-KOVITE 2-PART FORMULA TABs 400 UNIT-200 MG-10 MG-30 MCG-400 MCG-10 MG-10 MCG- 5000 UNIT-10 MG-10 MG-100 MG- 10 MG-9 MG-0.5 MG-7.5 MG-35 MG- 60 MG-30 UNIT-1 MG-120 MG-75 MCG-17.5 MCG-10 MG-10 MG ...	94
HAIR SKIN & NAILS TABs .....	93	HARVONI TABs .....	45		
HAIR SKIN AND NAILS FORMULA TABs 30 MG-2.5 MG-2500 MCG-100 MCG-5 MG-2.5 MG-500 UNIT-4 MCG-2500 UNIT-2.5 MG-5 MG-15 MG-12.5 MG-7.5 MG-5 MG-4 MG- 130 MG-3.75 MG-1 MG-25 MG-7.5 UNIT-64 MG-15 MG-5 MG-50 MG- 1.5 MG-25 MG .....	94	HAVRIX IM 720 EL U/0.5ML, 1440 EL U/ML .....	133	HM COMPLETE MEN TABs .....	94
HAIR SKIN NAILS CAPs 30 MG- 1.667 MG-1666.667 MCG-10 UNIT- 133.333 MCG-666.667 UNIT-2.667 MCG-1666.667 UNIT-1.667 MG- 8.333 MG-5 MG-3.333 MG-1.667 MG-2.5 MG-10 MG-0.333 MG-10 MG-1 MG-20 MG-8.333 MG-4.167 MCG .....	94	HEAD CARE PROACTIVE HEALTH TABs .....	94	HM ULTICARE INSULIN SYRINGE . 72	
HAIR/SKIN/NAILS CAPs .....	94	HEALTHWISE INSULIN SYR/NEEDLE .....	72	HORIZANT .....	127
		HEALTHY EYES SUPERVISION 2 CAPs .....	94	HULIO (2 PEN) AJKT .....	4
		HEALTHY EYES TABs 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG .....	94	HULIO (2 SYRINGE) PSKT .....	4
		HEALTHY EYES/LUTEIN- ZEAXANTHIN CAPs 60 MG-13.5 MG-6 MG-15 MG .....	94	HUMALOG JUNIOR KWIKPEN	

SOPN .....	26	HUMULIN R SOLN IJ .....	27	hydrocortisone (rectal) EX 2.5 % ..	12
HUMALOG KWIKPEN SOPN 100 UNIT/ML .....	27	HUMULIN R U-500 (CONCENTRATED) SOLN SC ....	27	hydrocortisone (topical) CREA 0.5 %	58
HUMALOG KWIKPEN SOPN 200 UNIT/ML .....	27	HUMULIN R U-500 KWIKPEN SOPN SC .....	27	hydrocortisone (topical) CREA 1 %	58
HUMALOG MIX 50/50 KWIKPEN SUPN .....	27	hydralazine hcl TABS .....	36	hydrocortisone (topical) CREA 2.5 %	58
HUMALOG MIX 75/25 KWIKPEN SUPN .....	27	HYDRAZONE LOTION LOTN .....	60	hydrocortisone (topical) LOTN 2.5 % .	58
HUMALOG MIX 75/25 SUSP .....	27	hydrochlorothiazide CAPS .....	62	hydrocortisone (topical) OINT 1 % .	58
HUMALOG SOCT .....	27	hydrochlorothiazide TABS 25 MG, 50 MG .....	62	hydrocortisone (topical) OINT 2.5 % .	58
HUMALOG SOLN IJ .....	27	hydrocodone bitartrate CP12 .....	8	hydrocortisone (topical) SOLN 2.5 %	58
HUMALOG TEMPO PEN SOPN ..	27	hydrocodone bitartrate T24A .....	8	hydrocortisone butyrate CREA ....	59
HUMATROPE CART IJ .....	63	hydrocodone bitartrate-homatropine methylbromide SOLN .....	51	hydrocortisone butyrate LOTN ....	59
HUMIRA (2 PEN) AJKT 40 MG/0.4ML .....	4	hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML .....	10	hydrocortisone butyrate OINT .....	59
HUMIRA (2 PEN) AJKT 40 MG/0.8ML .....	4	hydrocodone-acetaminophen SOLN 325 MG/15ML-10 MG/15ML .....	10	hydrocortisone butyrate SOLN ....	59
HUMIRA (2 PEN) AJKT 80 MG/0.8ML .....	4	hydrocodone-acetaminophen SOLN . 10		hydrocortisone TABS .....	51
HUMIRA (2 SYRINGE) PSKT 10 MG/0.1ML, 20 MG/0.2ML .....	4	hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG .....	10	hydrocortisone valerate CREA ....	59
HUMIRA (2 SYRINGE) PSKT 40 MG/0.4ML .....	5	hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG .....	10	hydrocortisone valerate OINT .....	59
HUMIRA (2 SYRINGE) PSKT 40 MG/0.8ML .....	5	hydrocodone-acetaminophen TABS 325 MG-2.5 MG .....	10	hydrocortisone w/acetic acid .....	123
HUMIRA-CD/UC/HS STARTER AJKT 80 MG/0.8ML .....	5	hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG, 7.5 MG-200 MG . 10		hydromorphone hcl LIQD .....	8
HUMIRA-PSORIASIS/UVEIT STARTER AJKT .....	5	hydrocortisone (intrarectal) .....	12	HYDROMORPHONE HCL SUPP ...	8
HUMULIN 70/30 KWIKPEN SUPN	27	hydrocortisone (rectal) EX 1 % ....	12	hydromorphone hcl TABS 2 MG ....	8
HUMULIN 70/30 SUSP .....	27	hydroxychloroquine sulfate 100 MG, 200 MG .....	37	hydromorphone hcl TABS 4 MG ....	8
HUMULIN N KWIKPEN SUPN ....	27	HYDROXYM GEL .....	59	hydromorphone hcl TABS 8 MG ....	8
HUMULIN N SUSP .....	27	hydroxyurea .....	38	hydromorphone hcl TB24 .....	8

HYDROXYUREA .....	49	IBRANCE CAPS .....	38	AJKT .....	5
hydroxyzine hcl SYRP .....	13	IBRANCE TABS .....	38	IDACIO-PSORIASIS STARTER AJKT .....	5
hydroxyzine hcl TABS .....	13	IBSRELA .....	66	IGALMI FILM .....	68
hydroxyzine pamoate CAPS .....	13	ibuprofen CHEW .....	6	ILEVRO .....	123
HYFTOR .....	60	ibuprofen SUSP 100 MG/5ML, 200 MG/10ML .....	6	imipramine hcl TABS .....	24
HYLAZINC TABS .....	94	ibuprofen SUSP 40 MG/ML, 50 MG/1.25ML .....	6	imiquimod 3.75 % .....	60
hyoscyamine sulfate ELIX .....	129	ibuprofen TABS 200 MG .....	6	imiquimod 5 % .....	60
hyoscyamine sulfate SOLN PO 0.125 MG/ML .....	129	ibuprofen TABS 300 MG .....	6	IMITREX STATDOSE REFILL SOCT 4 MG/0.5ML .....	76
hyoscyamine sulfate SUBL 0.125 MG .....	129	ibuprofen TABS 400 MG, 600 MG, 800 MG .....	6	IMITREX STATDOSE REFILL SOCT 6 MG/0.5ML .....	76
hyoscyamine sulfate TABS 0.125 MG .....	129	ibuprofen-famotidine .....	6	IMITREX STATDOSE SYSTEM SOAJ 4 MG/0.5ML .....	76
hyoscyamine sulfate TB12 0.375 MG 129		ICAPS AREDS FORMULA TABS .94		IMITREX STATDOSE SYSTEM SOAJ 6 MG/0.5ML (sumatriptan succinate) .....	76
hyoscyamine sulfate TBDP 0.125 MG .....	129	ICAPS CAPS 226 MG-34.8 MG-0.8 MG-14320 UNIT-200 MG .....	94	IMITREX TABS (sumatriptan succinate) .....	76
HYPERRHO SOSY IM 1500 UNIT 124		ICAPS LUTEIN & OMEGA-3 CAPS 240 MCG-1.2 MG-16 MG-1.3 MG-2.4 MCG-1.3 MG-10 MG-600 MCG-45 MG-2 MG-10 UNIT-2.3 MG-0.9 MG-7 MG-1 MG-34 MCG-280 MG .....	94	IMMUNE ESSENTIALS DAILY CAPS .....	94
HYRIMOZ SOAJ .....	5	ICAPS MV TABS 128 MG-7.5 MCG- 100 MCG-0.5 MG-100 UNIT-1.5 MCG-2.5 MG-6.25 MCG-2.5 MG- 1.67 MG-2.5 MG-0.83 MG-83.25 MG- 0.075 MG-0.38 MG-25 MG-21.15 MG-0.9 MG-18.75 MCG-30 MCG- 37.5 MCG-107.5 UNIT-35 MG-0.5 MG-10 MCG .....	94	IMOVAX RABIES SUSR .....	133
HYRIMOZ SOSY .....	5	icatibant acetate SOSY .....	67	IMULDOSA SOSY SC 45 MG/0.5ML 56	
HYRIMOZ-CROHNS/UC STARTER SOAJ .....	5	ICLUSIG .....	38	IMULDOSA SOSY SC 90 MG/ML .56	
HYRIMOZ-PED<40KG CROHN STARTER SOSY .....	5	icosapent ethyl .....	32	IMURAN TABS (azathioprine) .....	78
HYRIMOZ-PED>=40KG CROHN START SOSY .....	5	IDACIO (2 PEN) AJKT .....	5	INCRELEX .....	63
HYRIMOZ-PLAQ PSOR/UEVIT START SOAJ .....	5	IDACIO (2 SYRINGE) PSKT .....	5	INCRUSE ELLIPTA .....	14
HYSINGLA ER T24A 20 MG, 30 MG, 40 MG, 60 MG, 80 MG, 100 MG ....	8	IDACIO-CROHNS/UC STARTER		indapamide TABS 1.25 MG, 2.5 MG . 62	
HYZAAR (losartan potassium & hydrochlorothiazide) .....	35			INDERAL LA CP24 (propranolol hcl) . 47	
ibandronate sodium TABS .....	63			INDERAL XL .....	47
				indomethacin CAPS 25 MG, 50 MG 6	

indomethacin CPCR .....	6	INSULIN GLARGINE-YFGN SOPN	28	INVOKAMET TABS .....	24
indomethacin SUPP .....	6	INSULIN LISPRO (1 UNIT DIAL)		INVOKAMET XR TB24 .....	24
indomethacin SUSP .....	6	SOPN .....	28	INVOKANA .....	29
INFLECTRA SOLR .....	65	INSULIN LISPRO JUNIOR		IOPIDINE .....	120
INGREZZA CAPS .....	126	KWIKPEN SOPN .....	28	IPOL IJ .....	133
INGREZZA CPPK .....	126	INSULIN LISPRO PROT & LISPRO		ipratropium bromide (nasal) 0.03 %	
INGREZZA CPSP .....	126	SUPN .....	28	119	
INNOPRAN XL .....	47	INSULIN LISPRO SOLN IJ .....	28	ipratropium bromide (nasal) 0.06 %	
INPEFA .....	48	INSULIN SYRINGE .....	72	119	
INREBIC .....	38	INSULIN SYRINGE-NEEDLE U-100		ipratropium bromide SOLN 0.02 %	14
INSPIREASE MISC .....	75	72		ipratropium-albuterol SOLN .....	16
INSPIREASE RESERVOIR BAGS		INTELENCE (etravirine) .....	43	irbesartan .....	34
74		INTELENCE .....	43	irbesartan-hydrochlorothiazide ...	35
INSULIN ASP PROT & ASP		INTELENCE 200 MG (etravirine) ..	43	IRON CHEWS PEDIATRIC CHEW	
FLEXPEN SUPN .....	27	INTUNIV (guanfacine hcl (adhd)) ..	2	68	
INSULIN ASPART FLEXPEN SOPN .		INVEGA 3 MG, 6 MG, 9 MG		ISENTRESS CHEW 100 MG .....	43
27		(paliperidone) .....	39	ISENTRESS CHEW 25 MG .....	43
INSULIN ASPART PENFILL SOCT		INVEGA HAFYERA .....	39	ISENTRESS HD TABS .....	43
27		INVEGA SUSTENNA 117		ISENTRESS PACK .....	43
INSULIN ASPART PROT & ASPART		MG/0.75ML .....	39	ISENTRESS TABS .....	43
SUSP .....	27	INVEGA SUSTENNA 156 MG/ML	39	isoniazid SYRP .....	37
INSULIN ASPART SOLN IJ .....	27	INVEGA SUSTENNA 234 MG/1.5ML		isoniazid TABS .....	37
INSULIN DEGLUDEC FLEXTOUCH		39		isosorbide dinitrate TABS 5 MG, 10	
SOPN 100 UNIT/ML .....	27	INVEGA SUSTENNA 39 MG/0.25ML	39	MG, 20 MG, 30 MG .....	13
INSULIN DEGLUDEC FLEXTOUCH		INVEGA SUSTENNA 78 MG/0.5ML		isosorbide mononitrate TABS .....	13
SOPN 200 UNIT/ML .....	27	39		ISOSORBIDE MONONITRATE	
INSULIN DEGLUDEC SOLN .....	27	INVEGA TRINZA 273 MG/0.88ML	40	TABS .....	13
INSULIN GLARGINE MAX		INVEGA TRINZA 410 MG/1.32ML	40	isosorbide mononitrate TB24 .....	13
SOLOSTAR SOPN .....	27	INVEGA TRINZA 546 MG/1.75ML	40	isotretinoin 10 MG, 20 MG, 30 MG,	
INSULIN GLARGINE SOLOSTAR		INVEGA TRINZA 819 MG/2.63ML	40	40 MG .....	53
SOPN 300 UNIT/ML .....	28	INVELTYS SUSP .....	122	isradipine CAPS .....	47
INSULIN GLARGINE-YFGN SOLN				ISTALOL SOLN (timolol maleate	
28					

(ophth)) .....	120	KENALOG AERS (triamcinolone acetonide (topical)) .....	59	ketorolac tromethamine (ophth) 0.4 % .....	123
itraconazole CAPS .....	31	KEPPRA SOLN PO 100 MG/ML (levetiracetam) .....	19	ketorolac tromethamine (ophth) 0.5 % .....	123
itraconazole SOLN .....	31	KEPPRA TABS 1000 MG (levetiracetam) .....	19	ketorolac tromethamine TABS .....	6
ivermectin (rosacea) .....	61	KEPPRA TABS 250 MG, 750 MG (levetiracetam) .....	19	KETOSTIX STRP .....	62
I-VITE TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG .	94	KEPPRA TABS 500 MG (levetiracetam) .....	19	ketotifen fumarate (ophth) 0.035 % 123	
IXIARO .....	133	KEPPRA XR TB24 (levetiracetam) 19		KEVZARA SOAJ .....	5
IYUZEH SOLN .....	123	KERI ADVANCED MOISTURE THERAPY LOTN .....	60	KEVZARA SOSY .....	5
JALYN (dutasteride-tamsulosin hcl) . 66		KERI BASIC ESSENTIALS LOTN .	60	KEYFOLIC TABS .....	94
JANUMET TABS .....	25	KERI NOURISHING SHEA BUTTER LOTN .....	60	KEYLOSA TABS .....	95
JANUMET XR TB24 .....	25	KERI ORIGINAL LOTN .....	60	KHINDIVI SOLN PO 1 MG/ML ....	51
JANUVIA .....	26	KERI OVERNIGHT LOTN .....	60	KINERET SOSY .....	5
JARDIANCE .....	29	KERI RENEWAL MILK BODY LOTN . 60		KINRAY INSULIN SYRINGE .....	72
JAVADIN SOLN PO 0.02 MG/ML .	34	KERI RENEWAL SKIN FIRING LOTN .....	60	KIRSTY SOLN IJ 100 UNIT/ML ...	28
JENTADUETO TABS .....	25	KERI SENSITIVE SKIN LOTN ....	60	KIRSTY SOPN SC 100 UNIT/ML ..	28
JENTADUETO XR TB24 .....	25	KESIMPTA .....	126	KITABIS PAK (W/ NEBULIZER) NEBU 300 MG/5ML (tobramycin) ...	3
JOINT HEALTH & BONE STRENGTH TABS .....	94	ketoconazole (topical) CREA .....	55	KLOXXADO LIQD .....	30
JORNAY PM CP24 .....	2	ketoconazole (topical) FOAM .....	55	KONVOMEPEP SUSR .....	130
JOURNAVX .....	7	ketoconazole (topical) SHAM 2 % .	55	KP ADULTS 50+ DAILY FORMULA TABS 60 MG-3 MG-30 MCG-400 MCG-500 UNIT-25 MCG-1.7 MG-30 MCG-20 MG-250 MCG-2500 UNIT- 10 MG-300 MCG-1.5 MG-50 MG-11 MG-80 MG-150 MCG-220 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45 MCG-72 MG-2 MG, 60 MG- 3 MG-30 MCG-400 MCG-500 UNIT- 25 MCG-1.7 MG-30 MCG-20 MG- 250 MCG-2500 UNIT-10 MG-300 MCG-1.5 MG-50 MG-11 MG-80 MG- 150 MCG-220 MG-45 MCG-150 MCG-50 UNIT-20 MG-0.5 MG-5 MCG-2.3 MG-55 MCG-10 MCG-45	
JULUCA .....	43	ketoprofen CAPS 25 MG .....	6		
JYLAMVO SOLN PO .....	37	ketoprofen CP24 .....	6		
JYNNEOS .....	133				
KALETRA SOLN .....	44				
KALETRA TABS 25 MG-100 MG (lopinavir-ritonavir) .....	44				
KALETRA TABS 50 MG-200 MG (lopinavir-ritonavir) .....	44				
KANJINTI .....	37				
KAPSPARGO SPRINKLE CS24 ...	46				
KATERZIA .....	47				

MG-72 MG-2 MG .....	95	40 MG-1000 UNIT-30 UNIT-2 MG-40 MCG .....	95	lacosamide TABS .....	19
KP ADULTS DAILY FORMULA		KP VISION FORMULA/LUTEIN		lactic acid (ammonium lactate) CREA .....	60
TABS 60 MG-2 MG-30 MCG-400		TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG .....	95	lactic acid (ammonium lactate) LOTN 12 % .....	60
MCG-400 UNIT-6 MCG-1.7 MG-25		KP WOMENS 50+ DAILY FORMULA		lactulose (encephalopathy) .....	66
MCG-20 MG-3500 UNIT-10 MG-18		TABS 120 MG-6 MG-30 MCG-400		lactulose PACK .....	69
MG-1.5 MG-50 MG-11 MG-80 MG-75		MCG-1000 UNIT-25 MCG-3.4 MG-20		lactulose SOLN .....	69
MCG-200 MG-45 MCG-150 MCG-30		MCG-20 MG-3500 UNIT-10 MG-500		LAMICTAL CHEW (lamotrigine) ...	19
UNIT-20 MG-0.5 MG-5 MCG-10		MG-4.5 MG-50 MG-24 MG-2.2 MG-90		LAMICTAL ODT KIT (lamotrigine) .	19
MCG-2.3 MG-55 MCG-10 MCG-35		MCG-150 MCG-30 UNIT-4.2 MG-180		LAMICTAL ODT TBDP (lamotrigine) .	19
MCG-72 MG-2 MG, 60 MG-2 MG-30		MCG-27 MCG, 60 MG-6 MG-30		LAMICTAL STARTER KIT 25 MG (lamotrigine) .....	19
MCG-400 UNIT-1.7 MG-25 MCG-20		MCG-400 MCG-1000 UNIT-25 MCG-3.4		LAMICTAL TABS (lamotrigine) ....	19
MG-3500 UNIT-10 MG-18 MG-1.5		MG-20 MCG-20 MG-2500 UNIT-15		LAMICTAL XR KIT .....	19
MG-50 MG-11 MG-80 MG-200 MG-45		MG-4.5 MG-50 MG-22.5 MG-500		LAMICTAL XR TB24 (lamotrigine) .	19
MCG-150 MCG-30 UNIT-20 MG-0.5		MG-90 MCG-150 MCG-22.5 UNIT-2		lamivudine (hbv) TABS .....	45
MG-5 MCG-10 MCG-2.3 MG-75		MG-4 MG-180 MCG-20 MCG-120		lamivudine SOLN .....	44
MCG-55 MCG-10 MCG-35 MG-72		MG .....	96	lamivudine TABS 150 MG .....	44
MG-2 MG .....	95	KP WOMENS DAILY FORMULA		lamivudine TABS 300 MG .....	44
KP MENS 50+ DAILY FORMULA		TABS 60 MG-2 MG-30 MCG-400		lamivudine-zidovudine .....	44
TABS 120 MG-6 MG-30 MCG-400		MCG-1000 UNIT-6 MCG-1.7 MG-25		lamotrigine CHEW .....	19
MCG-700 UNIT-25 MCG-3.4 MG-20		MCG-10 MG-2500 UNIT-5 MG-18		lamotrigine KIT 25 MG .....	19
MCG-20 MG-3500 UNIT-15 MG-120		MG-1.5 MG-50 MG-15 MG-500 MG-22.5		lamotrigine TABS .....	19
MG-370 MCG-4.5 MG-110 MG-24		UNIT-2 MG-2 MG-120 MCG-20		lamotrigine TB24 .....	19
MG-90 MCG-150 MCG-30 UNIT-2.2		MCG, 60 MG-2 MG-30 MCG-400		lamotrigine TBDP .....	19
MG-4.2 MG-180 MCG-117 MCG, 60		MCG-1000 UNIT-6 MCG-1.7 MG-25		LANOLIN XX .....	125
MG-6 MG-30 MCG-400 MCG-700		MCG-10 MG-2500 UNIT-5 MG-18		lansoprazole CPDR 15 MG .....	129
UNIT-25 MCG-3.4 MG-20 MCG-20		MG-500 MG-1.6 MG-50 MG-15 MG-22.5		lansoprazole CPDR 30 MG .....	129
MG-2500 UNIT-15 MG-300 MG-4.5		UNIT-2 MG-2 MG-120 MCG-20		lansoprazole TBDD .....	129
MG-100 MG-22.5 MG-120 MG-90		MCG .....	96		
MCG-150 MCG-22.5 UNIT-2 MG-4		K-PAX IMMUNE PROFESSIONAL			
MG-180 MCG-110 MCG-120 MG .	95	ST TABS .....	96		
KP MENS DAILY FORMULA TABS		KPN PRENATAL TABS .....	117		
60 MG-3 MG-30 MCG-400 MCG-700		KRINTAFEL .....	37		
UNIT-18 MCG-1.7 MG-20 MCG-16		labetalol hcl TABS 100 MG .....	46		
MG-3500 UNIT-5 MG-300 MCG-1.2		labetalol hcl TABS 200 MG .....	46		
MG-120 MG-15 MG-2 MG-100 MG-210		labetalol hcl TABS 300 MG .....	46		
MG-22.5 UNIT-2 MG-120 MCG-110		labetalol hcl TABS 400 MG .....	46		
MCG, 60 MG-3 MG-75 MCG-400		lacosamide SOLN PO 10 MG/ML, 50			
MCG-700 UNIT-18 MCG-1.7 MG-20		MG/5ML, 100 MG/10ML .....	19		
MCG-18 MG-3500 UNIT-16 MG-210					
MG-300 MCG-1.35 MG-140 MG-15					
MG-2 MG-22.5 UNIT-2 MG-120					
MCG-110 MCG .....	95				
KP VISION FORMULA TABS 60 MG-					

lanthanum carbonate CHEW .....	66	TABS .....	64	liothyronine sodium TABS .....	128
LANTUS SOLN .....	28	levocetirizine dihydrochloride SOLN	32	LIPIDSHIELD PLUS TABS .....	118
LANTUS SOLOSTAR SOPN .....	28	levocetirizine dihydrochloride TABS	32	LIPITOR TABS (atorvastatin calcium)	.....33
latanoprost SOLN .....	123	levofloxacin (ophth) 0.5 % .....	121	LIPOFEN CAPS (fenofibrate) .....	33
LATUDA (lurasidone hcl) .....	39	levofloxacin SOLN PO .....	64	LIQREV SUSP .....	49
LEDIPASVIR-SOFOSBUVIR TABS	45	levofloxacin TABS .....	64	liraglutide .....	26
leflunomide .....	7	levonorgestrel & eth estradiol TABS	50	lisdexamfetamine dimesylate CAPS 1	
LENTOCILIN SUSR .....	124	levonorgestrel (emergency oc) 1.5	MG .....	lisdexamfetamine dimesylate CHEW .	1
LEQSELVI TABS PO 8 MG .....	60	levonorgestrel-eth estradiol	(triphasic) .....	lisinopril & hydrochlorothiazide ....	35
LESCOL XL TB24 (fluvastatin	sodium) .....	33	levonorgestrel-eth estradiol (91-	lisinopril TABS 2.5 MG, 5 MG, 10	MG, 20 MG, 30 MG, 40 MG .....
LETAIRIS (ambrisentan) .....	48	levonorgestrel-ethinyl estradiol (91-	day) 0.03 MG-0.15 MG .....	50	LITETOUCH INSULIN SYRINGE .72
letrozole .....	37	levorphanol tartrate TABS .....	8	LITFULO .....	60
leucovorin calcium TABS .....	38	levothyroxine sodium TABS .....	128	lithium .....	38
levabuterol hcl .....	16	LEXAPRO TABS 10 MG	(escitalopram oxalate) .....	23	lithium carbonate CAPS .....
levabuterol tartrate .....	16	LEXAPRO TABS 20 MG	(escitalopram oxalate) .....	23	lithium carbonate TABS .....
levamlodipine maleate .....	47	LEXAPRO TABS 5 MG (escitalopram	oxalate) .....	23	lithium carbonate TBCR .....
levetiracetam SOLN PO 100 MG/ML,	500 MG/5ML .....	19	LIALDA TBEC (mesalamine) .....	65	LIVALO (pitavastatin calcium) ....
levetiracetam TABS 1000 MG .....	19	LIBERVANT FILM .....	18	LIVER DETOX TABS .....	96
levetiracetam TABS 250 MG, 750	MG .....	19	lidocaine CREA 4 % .....	61	LOHIST-D LIQD .....
levetiracetam TABS 500 MG .....	19	lidocaine hcl (mouth-throat) 2 % ...	78	LOKELMA .....	78
levetiracetam TB24 .....	19	lidocaine hcl CREA 3 %, 4 % .....	61	loperamide hcl CAPS .....	30
levetiracetam TB3D 250 MG, 500	MG .....	19	lidocaine hcl GEL 2 % .....	61	loperamide hcl TABS .....
LEVETIRACETAM TB3D .....	19	lidocaine-prilocaine CREA .....	61	LOPID TABS (gemfibrozil) .....	33
levobunolol hcl 0.5 % .....	120	LIKMEZ SUSP .....	36	lopinavir-ritonavir SOLN .....	44
levocarnitine (metabolic modifiers)	SOLN PO 1 GM/10ML .....	64	LINZESS .....	66	lopinavir-ritonavir TABS 25 MG-100
levocarnitine (metabolic modifiers)					MG .....
					44
					LOPRESSOR SOLN PO 10 MG/ML .

46	122	LYBALVI .....	125
LOPRESSOR TABS 100 MG (metoprolol tartrate) .....	47	LYFGENIA .....	67
LOPRESSOR TABS 12.5 MG .....	47	LYRICA CAPS (pregabalin) .....	19
LOPRESSOR TABS 50 MG (metoprolol tartrate) .....	47	LYRICA CR (pregabalin (once- daily)) .....	127
loratadine & pseudoephedrine TB12 .	52	LYRICA SOLN (pregabalin) .....	19
loratadine & pseudoephedrine TB24 .	52	LYSIPLEX PLUS TABS 166.667 MG- 333.333 MG-16.667 MG-50 MCG- 333.333 MCG-16.667 MG-133.333 MG-16.667 MG-133.333 UNIT- 16.667 MCG-133.333 MG-66.667 MG-16.667 MG-5 MG-1666.667 UNIT-66.667 MG-5 MG-66.667 UNIT-5 MCG-26.667 MG-3.333 MG- 1.667 MG-0.667 MG-33.333 MCG	96
loratadine CHEW .....	32	LYUMJEV KWIKPEN SOPN .....	28
loratadine TABS .....	32	LYUMJEV SOLN .....	28
loratadine TBDP 10 MG .....	32	LYUMJEV TEMPO PEN SOPN ...	28
lorazepam TABS 0.5 MG, 2 MG ...	13	LYVISPAH PACK .....	118
lorazepam TABS 1 MG .....	13	MACULAR HEALTH FORMULA CAPS 250 MG-10 MG-100 MCG-10 MG-500 UNIT-5 MG-5 MG-1 MG-1 MG-20 MG-25 MCG-200 UNIT-7.5 MG-10 MG .....	96
losartan potassium & hydrochlorothiazide .....	35	MACUVITE EYE CARE TABS 113 MG-17.4 MG-0.4 MG-100 UNIT-7160 UNIT .....	96
losartan potassium .....	34	MACUVITE TABS 60 MG-40 MG-2 MG-40 MCG-30 UNIT-5000 UNIT	.96
LOTEMAX GEL (loteprednol etabonate) .....	122	MAGELLAN INSULIN SAFETY SYR .....	72
LOTEMAX OINT .....	122	magnesium citrate 1.745 GM/30ML	69
LOTEMAX SM GEL .....	122	magnesium hydroxide SUSP 7.75 %, 400 MG/5ML, 1200 MG/15ML, 2400 MG/30ML .....	69
LOTEMAX SUSP (loteprednol etabonate) .....	122	magnesium oxide (mg supplement)	
LOTENSIN 10 MG, 20 MG (benazepril hcl) .....	33		
LOTENSIN 40 MG (benazepril hcl)	33		
LOTENSIN HCT 12.5 MG-10 MG, 12.5 MG-20 MG, 25 MG-20 MG (benazepril & hydrochlorothiazide)	35		
loteprednol etabonate GEL .....	122		
loteprednol etabonate SUSP .....	122		
loteprednol etabonate-tobramycin			
LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (amlodipine besylate-benazepril hcl) .	35		
LOTRONEX (alosetron hcl) .....	66		
lovastatin TABS 10 MG, 20 MG ...	33		
lovastatin TABS 40 MG .....	33		
LOVENOX SOLN IJ 300 MG/3ML (enoxaparin sodium) .....	17		
LOVENOX SOSY 100 MG/ML, 150 MG/ML (enoxaparin sodium) .....	17		
LOVENOX SOSY 30 MG/0.3ML (enoxaparin sodium) .....	17		
LOVENOX SOSY 40 MG/0.4ML (enoxaparin sodium) .....	17		
LOVENOX SOSY 60 MG/0.6ML (enoxaparin sodium) .....	17		
LOVENOX SOSY 60 MG/0.6ML (enoxaparin sodium) .....	18		
LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML (enoxaparin sodium) ...	17		
loxapine succinate .....	41		
lubiprostone .....	65		
LUBRIDERM LOTN .....	60		
LUMAVEX CAPS .....	79		
LUMIGAN SOLN 0.01 % .....	123		
LUNAVIRA CAPS .....	79		
lurasidone hcl .....	39		
LURBIRO TABS 100 MG (flurbiprofen) .....	6		
LUTEIN-ZEAXANTHIN TABS 60 MG-5 MG-1 MG-15 MG-1 MG-750 MCG-20 MG .....	96		

TABS .....	77	MAXICOMFORT SYR 27G X 1/2" .....	73	medroxyprogesterone acetate (contraceptive) SUSP IM .....	50
magnesium oxide TABS 400 MG ..	12	MAXIDEX SUSP OP .....	122	medroxyprogesterone acetate (contraceptive) SUSY IM .....	50
malathion .....	61	MAXIMUM DAILY GREEN TABS 333.333 MG-8.333 MG-16.666 MCG- 133.333 MCG-8.333 MG-8.333 MG- 133.333 UNIT-8.333 MCG-8.333 MG-8.333 MG-8.333 MG-8.333 MG- 8.333 MG-8.333 MG-8.333 MG-6.666 MG-8.333 MG-1.333 MG-333.333 MG-83.333 UNIT-33.333 MG-5000 UNIT-5 MG-33.333 MG-1.333 MG- 16.666 MCG-20 MG-0.333 MG- 33.333 MCG-0.333 MG-5 MG-83.333 MG-50 MCG-10 MG-25 MCG-3.333 MG-33.333 MG-8.333 MG-1.666 MG- 6.666 MG-6.666 MG-1.666 MG-0.833 MG-11.666 MG-3.333 MG-1.666 MG- 33.333 MG-3.333 MG-3.333 MG- 3.333 MG-16.666 MG-33.333 MG- 33.333 MG-3.333 MG-3.333 MG- 3.333 MG-8.333 MG .....	97	mefenamic acid CAPS .....	6
maraviroc TABS 150 MG .....	44			mefloquine hcl .....	37
maraviroc TABS 300 MG .....	44			MEGA MULTI FOR WOMEN TABS 97	
MARINOL CAPS 2.5 MG (dronabinol) .....	31			MEGA MULTI MEN TABS .....	97
MARPLAN .....	22			MEGAVITE FRUITS & VEGGIES TABS .....	97
MASK VORTEX/CHILD/FROG ...	75			MEGAVITE GOLDEN YEARS 55+ TABS .....	97
MASK VORTEX/TODDLER/LADYBUG ..	75			megestrol acetate (appetite) .....	125
MAVENCLAD (10 TABS) 10 MG (cladribine (multiple sclerosis)) ...	126			megestrol acetate SUSP .....	38
MAVENCLAD (4 TABS) 10 MG (cladribine (multiple sclerosis)) ...	126			megestrol acetate TABS .....	38
MAVENCLAD (5 TABS) 10 MG (cladribine (multiple sclerosis)) ...	126	MAXITROL OINT (neomycin-polymy- dexameth) .....	122	MEIJER ADVANCED FORMULA TABS 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-250 MCG-3500 UNIT- 10 MG-150 MCG-300 MCG-1.5 MG- 15 MG-150 MCG-100 MG-162 MG- 80 MG-75 MCG-30 UNIT-10 MCG-2 MG-120 MCG-20 MCG-10 MCG-72 MG-2 MG, 60 MG-3 MG-30 MCG- 400 MCG-400 UNIT-25 MCG-1.7 MG-10 MCG-20 MG-250 MCG-3500 UNIT-10 MG-300 MCG-1.5 MG-15 MG-2 MG-150 MCG-100 MG-200 MG-80 MG-75 MCG-150 MCG-45 UNIT-48 MG-5 MCG-2 MG-150 MCG-20 MCG-10 MCG-72 MG-2 MG .....	97
MAVENCLAD (6 TABS) 10 MG (cladribine (multiple sclerosis)) ...	126	MAXITROL SUSP (neomycin- polymy-dexameth) .....	122	MEKTOVI .....	38
MAVENCLAD (7 TABS) 10 MG (cladribine (multiple sclerosis)) ...	126	MAYZENT STARTER PACK TBPK 0.25 MG .....	127	meloxicam CAPS .....	6
MAVENCLAD (8 TABS) 10 MG (cladribine (multiple sclerosis)) ...	126	MAYZENT TABS .....	127	meloxicam TABS .....	6
MAVENCLAD (9 TABS) 10 MG (cladribine (multiple sclerosis)) ...	126	meclizine hcl TABS 12.5 MG, 25 MG, 50 MG .....	30		
MAVYRET PACK .....	45	meclofenamate sodium CAPS .....	6		
MAVYRET TABS .....	45	MEDI TAB TABS .....	97		
MAVYRET TABS .....	46	MEDIC INSULIN SYRINGE .....	73		
MAXALT TABS 10 MG (rizatriptan benzoate) .....	76	MEDROL TABS (methylprednisolone) .....	51		
MAXALT-MLT TBDP 10 MG (rizatriptan benzoate) .....	76	MEDROL TABS .....	51		
MAXI-COMFORT INSULIN SYRINGE .....	72	MEDROL TBPK (methylprednisolone) .....	51		

memantine hcl CP24 .....	125	MERILOG SOLOSTAR SOPN SC	methimazole TABS .....	128
memantine hcl SOLN .....	125	100 UNIT/ML .....	28	methocarbamol TABS 1000 MG .
memantine hcl TABS .....	125	mesalamine CP24 .....	65	methocarbamol TABS .....
memantine hcl-donepezil hcl CP24		mesalamine CPCR .....	65	118
125		mesalamine CPDR .....	65	
MEMORY COMPLEX BRAIN		mesalamine ENEM .....	65	methotrexate sodium SOLN 1
HEALTH TABS .....	118	mesalamine SUPP .....	65	GM/40ML, 50 MG/2ML, 250
MENATROL CAPS .....	97	mesalamine TBEC 1.2 GM .....	65	MG/10ML, 1000 MG/40ML .....
MENQUADFI 0.5 ML .....	131	mesalamine TBEC 800 MG .....	65	37
MENS 50+ ADVANCED CAPS ....	97	mesalamine w/ cleanser .....	65	methotrexate sodium SOLR .....
MENS 50+ MULTIVITAMIN TABS .	97	METAVEX TABS .....	118	37
MENS LIFE PACK TABS 300 MCG-		metaxalone .....	118	methotrexate sodium TABS 2.5 MG
200 UNIT-10 MG-10 MG-9 MG-10		METAXALONE 640 MG .....	118	37
MG-2.5 MG-15 MG-1 MG-50 MG-		metformin hcl SOLN .....	25	methsuximide .....
11.25 MG-1 MG-2500 UNIT-15		metformin hcl TABS 1000 MG ....	25	21
UNIT-75 MG-37.5 MCG-2.5 MG-2.5		metformin hcl TABS 500 MG .....	25	methyldopa TABS 500 MG .....
MG-12.5 MCG, 400 UNIT-10 MG-10		metformin hcl TABS 625 MG .....	25	34
MG-5000 UNIT-18 MG-10 MG-5 MG-		metformin hcl TABS 750 MG .....	25	methyldopa TABS .....
30 MG-2 MG-100 MG-22.5 MG-2		metformin hcl TABS 850 MG .....	25	34
MG-150 MG-30 UNIT-150 MG-75		metformin hcl TB24 500 MG, 1000		methylergonovine maleate TABS 124
MCG-5 MG-5 MG-25 MCG .....	97	MG .....	25	METHYLIN SOLN (methylphenidate
MENS MULTI HEALTH FORMULA		metformin hcl TB24 500 MG .....	25	hcl) .....
TABS .....	97	metformin hcl TB24 750 MG .....	25	2
MENS MULTIVITAMIN TABS .....	97	methadone hcl TABS 10 MG .....	9	methyphenidate hcl CHEW .....
MENVEO SOLN .....	131	methadone hcl TABS 5 MG .....	9	2
MENVEO SOLR .....	131	methamphetamine hcl .....	1	methyphenidate hcl CP24 10 MG, 20
meperidine hcl SOLN PO 50		methazolamide TABS .....	62	MG, 30 MG, 40 MG, 60 MG .....
MG/5ML .....	9	methenamine mandelate .....	36	2
meperidine hcl TABS 50 MG .....	9	methenamine-hyosc-methylene blue-		methyphenidate hcl CP24 .....
meprobamate .....	13	sod phos-phenyl sal TABS 81.6 MG .		2
mercaptopurine SUSP 2000		36		methyphenidate hcl CPCR .....
MG/100ML .....	37			2
mercaptopurine TABS .....	37			methyphenidate hcl SOLN .....
MERILOG SOLN SC 100 UNIT/ML				2
28				methyphenidate hcl TABS 10 MG,
				20 MG .....
				2
				methyphenidate hcl TABS 5 MG ...
				2
				methyphenidate hcl TB24 18 MG, 27
				MG, 54 MG .....
				2
				methyphenidate hcl TB24 36 MG ..
				2
				methyphenidate hcl TBCR 10 MG,
				20 MG, 36 MG .....
				2
				methyphenidate hcl TBCR 18 MG,
				27 MG, 54 MG .....
				2
				methyphenidate hcl TBCR 45 MG,
				63 MG, 72 MG .....
				2

methylphenidate PTCH .....	2	mexiletine hcl .....	13	MIRAPEX ER TB24 2.25 MG, 3 MG, 3.75 MG (pramipexole dihydrochloride) .....	38
methylprednisolone TABS .....	51	MG PLUS PROTEIN TABS .....	118	MIRCERA .....	67
methylprednisolone TBPk .....	51	MICARDIS (telmisartan) .....	34	mirtazapine TABS 15 MG .....	21
methyltestosterone TABS .....	12	MICARDIS HCT (telmisartan- hydrochlorothiazide) .....	35	mirtazapine TABS 30 MG .....	21
metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML .....	65	MICONAZOLE 7 SUPP 100 MG .	133	mirtazapine TABS 7.5 MG, 45 MG	21
metoclopramide hcl TABS .....	65	miconazole nitrate (topical) CREA .	55	mirtazapine TBDP 15 MG .....	21
metolazone .....	62	miconazole nitrate vaginal CREA 2 % .....	133	mirtazapine TBDP 30 MG .....	21
metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 25 MG-50 MG .....	35	miconazole nitrate vaginal KIT ...	133	mirtazapine TBDP 45 MG .....	21
metoprolol & hydrochlorothiazide TABS 50 MG-100 MG .....	35	miconazole nitrate vaginal SUPP 100 MG .....	133	MIRVASO (brimonidine tartrate (topical)) .....	61
metoprolol succinate TB24 200 MG 47		miconazole nitrate vaginal SUPP 200 MG .....	133	misoprostol .....	130
metoprolol succinate TB24 25 MG, 50 MG, 100 MG .....	47	miconazole-zinc oxide-white petrolatum .....	55	MITIGARE CAPS (colchicine) .....	67
metoprolol tartrate TABS 100 MG .	47	MICROCHAMBER DEVI .....	75	MM INSULIN SYRINGE/NEEDLE	73
metoprolol tartrate TABS 12.5 MG, 37.5 MG, 75 MG .....	47	MICROCHAMBER MISC .....	75	M-M-R II SOLR .....	133
metoprolol tartrate TABS 25 MG, 50 MG .....	47	MICROSPACER MISC .....	75	MNEXSPIKE SUSY 10 MCG/0.2ML . 133	
METROCREAM CREA (metronidazole (topical)) .....	61	midazolam hcl SOLN IJ .....	68	modafinil .....	2
METROGEL GEL 1 % (metronidazole (topical)) .....	61	MIDAZOLAM HCL SOLN IJ .....	68	MODERNA COVID-19 BIVALENT 133	
metronidazole (topical) CREA .....	61	midodrine hcl .....	134	MODERNA COVID-19 VACCINE SUSP .....	133
metronidazole (topical) GEL 0.75 % 61		MIEBO .....	123	moexipril hcl .....	33
metronidazole (topical) GEL 1 % ..	61	miglitol .....	24	mometasone furoate (nasal) SUSP 119	
metronidazole (topical) LOTN .....	61	MIL ADREGEN TABS .....	118	mometasone furoate CREA .....	59
metronidazole CAPS .....	36	MINCORA TABS .....	115	mometasone furoate OINT .....	59
metronidazole TABS .....	36	minocycline hcl CAPS .....	128	mometasone furoate SOLN .....	59
metronidazole vaginal .....	133	minocycline hcl TABS .....	128	MONOJECT INSULIN SYRINGE .	73
		minocycline hcl TB24 .....	128	MONOJECT ULTRA COMFORT SYRINGE .....	73
		minoxidil 10 MG .....	36	montelukast sodium CHEW .....	14
		minoxidil 2.5 MG .....	36		
		mirabegron TB24 .....	130		

montelukast sodium PACK .....	14	MULTI COMPLETE/IRON TABS 180	MULTI FOR HER TABS 120 MG-2
montelukast sodium TABS .....	14	MG-2 MG-30 MG-400 MCG-1000	MG-30 MCG-400 MCG-6 MCG-10
MOOD FOOD CAPS .....	98	UNIT-6 MCG-1.7 MG-80 MCG-20	MG-1.7 MG-100 MCG-250 MCG-
MOOD FOOD ES CAPS .....	98	MG-2500 UNIT-10 MG-18 MG-162	3000 UNIT-1.5 MG-100 MG-15 MG-
morphine sulfate beads .....	9	MG-1.5 MG-15 MG-100 MG-75	150 MCG-400 UNIT-20 MG-18 MG-
morphine sulfate CP24 10 MG, 20		MCG-150 MCG-50 UNIT-2 MG-4	40 MG-10 MCG-120 MCG-2 MG-10
MG, 30 MG, 50 MG, 60 MG, 80 MG,		MG-120 MCG-70 MCG .....	MCG-150 MCG-25 MCG-77 MG-5
100 MG .....	9		MCG-2 MG-50 UNIT-25 MCG-250
morphine sulfate SOLN PO 10		MULTI FOR HER 50+ CAPS 60 MG-	MG-36 MG-2 MG .....
MG/5ML, 20 MG/5ML .....	9	6 MG-30 MCG-400 MCG-1000 UNIT-	
morphine sulfate SOLN PO 10		25 MCG-1.7 MG-80 MCG-20 MG-10	MULTI FOR HIM 50+ TABS 180 MG-
MG/5ML .....	9	MG-1.5 MG-100 MG-15 MG-2 MG-	6 MG-30 MCG-400 MCG-1000 UNIT-
morphine sulfate SOLN PO 100		2500 UNIT-200 MG-75 MCG-150	25 MCG-10 MG-1.7 MG-80 MCG-1.5
MG/5ML .....	9	MCG-60 UNIT-4 MG-120 MCG-70	MG-15 MG-20 MG-100 MG-120
morphine sulfate SUPP .....	9	MCG, 60 MG-6 MG-30 MCG-400	MCG-2 MG-162 MG-150 MCG-75
morphine sulfate TABS .....	9	MCG-1000 UNIT-25 MCG-1.7 MG-80	MCG-4 MG-60 UNIT-2500 UNIT-105
morphine sulfate TBCR .....	9	MCG-20 MG-10 MG-200 MG-1.5	MCG .....
MOTTEGRITY (prucalopride		MG-100 MG-15 MG-2 MG-2500	
succinate) .....	64	UNIT-75 MCG-150 MCG-60 UNIT-4	MULTI FOR HIM CAPS 60 MG-4
MOTPOLY XR CP24 .....	19	MG-120 MCG-70 MCG, 60 MG-6	MG-30 MCG-400 MCG-1000 UNIT-
MOUNJARO .....	26	MG-30 MCG-60 UNIT-400 MCG-	18 MCG-1.7 MG-40 MCG-20 MG-10
MOVANTIK .....	66	1000 UNIT-25 MCG-1.7 MG-80	MG-1.5 MG-40 MG-15 MG-2 MG-
moxifloxacin hcl (ophth) SOLN OP		MCG-20 MG-10 MG-1.5 MG-100	2500 UNIT-100 MG-45 MCG-150
121 .....	64	MG-15 MG-2 MG-2500 UNIT-200	MCG-50 UNIT-4 MG-120 MCG-40
moxifloxacin hcl TABS .....	64	MG-75 MCG-150 MCG-4 MG-120	MCG, 60 MG-4 MG-30 MCG-400
MRESVIA .....	133	MCG-70 MCG .....	MCG-25 MCG-18 MCG-1.7 MG-40
MS CONTIN TBCR (morphine			MCG-20 MG-10 MG-100 MG-1.5
sulfate) .....	9	MULTI FOR HER 50+ TABS 180	MG-40 MG-15 MG-2 MG-750 MCG-
MULTI COMPLETE CAPS 60 MG-2		MG-6 MG-30 MCG-400 MCG-1000	45 MCG-150 MCG-22.5 MG-4 MG-
MG-30 MCG-400 MCG-1000 UNIT-6		UNIT-25 MCG-10 MG-1.7 MG-80	120 MCG-40 MCG .....
MCG-1.7 MG-40 MCG-20 MG-10		MCG-1.5 MG-15 MG-20 MG-100	
MG-18 MG-1.5 MG-40 MG-15 MG-2		MG-120 MCG-2 MG-200 MG-150	MULTI FOR HIM TABS 180 MG-4
MG-2500 UNIT-100 MG-45 MCG-		MCG-75 MCG-4 MG-60 UNIT-2500	MG-30 MCG-400 MCG-1000 UNIT-
150 MCG-50 UNIT-4 MG-120 MCG-		UNIT-70 MCG .....	18 MCG-10 MG-1.7 MG-80 MCG-1.5
20 MCG .....	98		MG-100 MG-15 MG-20 MG-120
MULTI COMPLETE/IRON TABS 180		MULTI FOR HER CAPS 60 MG-2	MCG-2 MG-162 MG-150 MCG-75
MG-2 MG-30 MG-400 MCG-1000		MG-30 MCG-600 MCG-1000 UNIT-6	MCG-4 MG-50 UNIT-2500 UNIT-70
UNIT-6 MCG-1.7 MG-80 MCG-20		MCG-1.7 MG-40 MCG-20 MG-10	MCG .....
MG-2500 UNIT-10 MG-18 MG-162		MG-18 MG-1.5 MG-40 MG-15 MG-2	MULTI VITAMIN TABS .....
MG-1.5 MG-15 MG-100 MG-75		MG-2500 UNIT-100 MG-45 MCG-	115
MCG-150 MCG-50 UNIT-2 MG-4		150 MCG-50 UNIT-4 MG-120 MCG-	MULTI VITAMIN W/D-3 TABS ...
MG-120 MCG-70 MCG .....	98	20 MCG, 60 MG-2 MG-30 MCG-600	115
MULTI FOR HER 50+ CAPS 60 MG-		MCG-1000 UNIT-6 MCG-1.7 MG-40	MULTI VITAMIN/MINERALS TABS
6 MG-30 MCG-400 MCG-1000 UNIT-		MCG-20 MG-10 MG-18 MG-100 MG-	60 MG-1 MG-400 MCG-400 UNIT-1
25 MCG-1.7 MG-80 MCG-20 MG-10		1.5 MG-40 MG-15 MG-2 MG-2500	MCG-2.5 MG-15 MG-5000 UNIT-5
MG-1.5 MG-100 MG-15 MG-2 MG-		UNIT-45 MCG-150 MCG-50 UNIT-4	MG-7.5 MG-2.5 MG-100 MG-75
2500 UNIT-200 MG-75 MCG-150		MG-120 MCG-20 MCG .....	MCG-15 UNIT-80 MG-1.5 MG-0.375
MCG-60 UNIT-4 MG-120 MCG-70			
MCG, 60 MG-6 MG-30 MCG-400			
MCG-1000 UNIT-25 MCG-1.7 MG-80			
MCG-20 MG-10 MG-200 MG-1.5			
MG-100 MG-15 MG-2 MG-2500			
UNIT-75 MCG-150 MCG-60 UNIT-4			
MG-120 MCG-70 MCG, 60 MG-6			
MG-30 MCG-60 UNIT-400 MCG-			
1000 UNIT-25 MCG-1.7 MG-80			
MCG-20 MG-10 MG-1.5 MG-100			
MG-15 MG-2 MG-2500 UNIT-200			
MG-75 MCG-150 MCG-4 MG-120			
MCG-70 MCG .....	98		
MULTI FOR HER 50+ TABS 180			
MG-6 MG-30 MCG-400 MCG-1000			
UNIT-25 MCG-10 MG-1.7 MG-80			
MCG-1.5 MG-15 MG-20 MG-100			
MG-120 MCG-2 MG-200 MG-150			
MCG-75 MCG-4 MG-60 UNIT-2500			
UNIT-70 MCG .....	98		
MULTI FOR HER CAPS 60 MG-2			
MG-30 MCG-600 MCG-1000 UNIT-6			
MCG-1.7 MG-40 MCG-20 MG-10			
MG-18 MG-1.5 MG-40 MG-15 MG-2			
MG-2500 UNIT-100 MG-45 MCG-			
150 MCG-50 UNIT-4 MG-120 MCG-			
20 MCG, 60 MG-2 MG-30 MCG-600			
MCG-1000 UNIT-6 MCG-1.7 MG-40			
MCG-20 MG-10 MG-18 MG-100 MG-			
1.5 MG-40 MG-15 MG-2 MG-2500			
UNIT-45 MCG-150 MCG-50 UNIT-4			
MG-120 MCG-20 MCG .....	98		



MG-3.4 MG-370 MCG-17.5 MCG-11.4 MG-110 MG-4.2 MG-90 MCG-180 MCG-2.2 MG-24 MG-120 MG-150 MCG-117 MCG-940 MCG-20 MCG-25 MCG, 120 MG-6 MG-30 MCG-27 MG-300 MCG-25 MCG-100 MCG-1.7 MG-60 MCG-20 MG-300 MCG-10 MG-600 MCG-1.5 MG-75 MG-15 MG-80 MG-210 MG-50 MCG-150 MCG-20 MG-0.5 MG-5 MCG-4 MG-1050 MCG-21 MCG-10 MCG-60 MCG-72 MG-2 MG, 120 MG-6 MG-30 MCG-300 MCG-600 UNIT-100 MCG-1.7 MG-60 MCG-20 MG-300 MCG-3500 UNIT-10 MG-600 MCG-1.5 MG-75 MG-15 MG-210 MG-80 MG-50 MCG-150 MCG-60 UNIT-20 MG-0.5 MG-4 MG-21 MCG-60 MCG-72 MG .....101	MCG-1.1 MG-50 MCG-14 MG-300 MCG-3500 UNIT-5 MG-8 MG-1.1 MG-15 MG-35 UNIT-50 MG-500 MG-80 MG-150 MG-20 MG-0.5 MG-5 MCG-2.3 MG-150 MCG-55 MCG-50 MCG-10 MCG-50 MCG-72 MG-2 MG, 100 MG-5 MG-30 MCG-400 MCG-800 UNIT-50 MCG-1.1 MG-50 MCG-14 MG-300 MCG-3500 UNIT-5 MG-8 MG-300 MG-1.1 MG-15 MG-35 UNIT-100 MG-80 MG-150 MCG-20 MG-0.5 MG-5 MCG-2.3 MG-22 MCG-50 MCG-10 MCG-52 MCG-72 MG-2 MG ..... 101	MVW COMPLETE FORMULATION MINIS CAPS .....102
MULTIVITAMIN MEN TABS .....101	MULTIVITAMIN WOMEN TABS . 102	MVW MODULATOR FORMULATION CAPS ..... 102
MULTI-VITAMIN MONOCAPS TABS 101	MULTIVITAMIN WOMENS 50+ ADV TABS 120 MG-30 MCG-400 MCG-4.5 MG-20 MG-6 MG-15 MG-3.4 MG-25 MCG-13.5 MG-50 MG-4.2 MG-90 MCG-180 MCG-2.2 MG-24 MG-300 MG-150 MCG-27 MCG-940 MCG-20 MCG-25 MCG ..... 102	MVW MODULATOR FORMULATION MINI CAPS .....102
MULTI-VITAMIN TABS 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT-10 MG-1.5 MG-30 UNIT ..... 115	MULTI-VITAMIN/MINERALS TABS 60 MG-2 MG-0.4 MG-20 MG-1.2 MG-6 MCG-1.7 MG-400 UNIT-15 MG-100 MG-160 MG-150 MCG-18 MG-125 MG-5000 UNIT .....102	MYAMULTI TABS 60 MG-3 MG-30 MCG-400 MCG-1.7 MG-6 MCG-10 MG-2 MG-20 MG-5000 UNIT-400 UNIT-30 UNIT-18 MG-100 MG-2.5 MG-25 MCG-5 MCG-40 MG-10 MCG-150 MCG-25 MCG-2 MG-10 MCG-15 MG-162 MG-150 MCG-125 MG-25 MCG-10 MCG-25 MCG-36.3 MG .....102
MULTIVITAMIN TABS .....115	MULTIVITAMIN/ZINC STRESS TABS .....102	mycophenolate mofetil CAPS .....78
MULTIVITAMIN WOMEN 50+ TABS 100 MG-30 MCG-400 MCG-1.1 MG-14 MG-5 MG-5 MG-1.1 MG-300 MCG-25 MCG-15.8 MG-8 MG-100 MG-2.3 MG-50 MCG-80 MG-52 MCG-0.5 MG-15 MG-300 MG-150 MCG-20 MG-22 MCG-1050 MCG-50 MCG-50 MCG-72 MG, 100 MG-5 MG-30 MCG-400 MCG-14 MG-25 MCG-50 MCG-1.1 MG-50 MCG-300 MCG-1050 MCG-5 MG-8 MG-1.1 MG-15 MG-100 MG-2 MG-300 MG-80 MG-50 MCG-150 MCG-15.7 MG-20 MG-2.3 MG-22 MCG-0.5 MG-10 MCG-52 MCG-72 MG, 100 MG-5 MG-30 MCG-400 MCG-800 UNIT-50	MULTIVITAMIN-MINERALS TABS 102	mycophenolate mofetil SUSR ..... 78
	mupirocin calcium (topical) .....54	mycophenolate mofetil TABS .....78
	mupirocin OINT ..... 54	mycophenolate sodium .....78
	MVASI .....37	MYDAYIS CP24 (amphetamine-dextroamphetamine) ..... 1
	MVW COMPLETE FORMULATION CAPS ..... 102	MYFORTIC (mycophenolate sodium) .....78
	MVW COMPLETE FORMULATION D3000 CAPS ..... 102	MYHIBBIN SUSP ..... 78
	MVW COMPLETE FORMULATION D5000 CAPS ..... 102	MYNEPHRON CAPS 1 MG .....79
		MYRBETRIQ SRER ..... 130
		MYRBETRIQ TB24 (mirabegron) 130
		nabumetone ..... 6
		nadolol TABS 20 MG, 40 MG, 80 MG .....47
		naftifine hcl CREA ..... 55
		naftifine hcl GEL 2 % ..... 55
		NAFTIN GEL 2 % (naftifine hcl) ... 55
		NALFON CAPS (fenoprofen calcium) ..... 6

NALFON TABS 600 MG	6	NATESTO GEL NA	12	NEUPRO	38
NALOCET TABS	10	NATROBA (spinosad)	61	NEURONTIN CAPS (gabapentin)	19
naloxone hcl LIQD	30	NAT-RUL THERAVITE-M TABS	102	NEURONTIN SOLN (gabapentin)	19
naloxone hcl SOCT	30	NATRUL-VITES TABS	102	NEURONTIN TABS 600 MG (gabapentin)	19
naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML	30	NAYZILAM	18	NEURONTIN TABS 800 MG (gabapentin)	19
naloxone hcl SOSY 0.4 MG/ML	30	nebivolol hcl	47	NEVANAC	123
naloxone hcl SOSY 2 MG/2ML	30	nefazodone hcl	23	nevirapine SUSP	44
naltrexone hcl	30	NEMLUVIO	60	nevirapine TABS	44
NAMZARIC CP24 (memantine hcl- donepezil hcl)	125	NEOMULTIVITE TABS	115	nevirapine TB24 400 MG	44
NAMZARIC CP24	125	neomycin sulfate TABS	3	NEWVITE TABS	115
naphazoline w/ pheniramine 0.3 %- 0.025 %	121	neomycin-bacitracin zn-polymyxin 121		NEXICLON XR TB24 (clonidine)	34
naphazoline w/ pheniramine 0.315 %-0.027 %	121	neomycin-bacitracin-polymyxin OINT 54		NEXIUM CPDR 20 MG (esomeprazole magnesium)	129
NAPRELAN TB24 (naproxen sodium)	6	neomycin-polymy-dexameth OINT 122		NEXIUM CPDR 40 MG (esomeprazole magnesium)	129
NAPROSYN SUSP (naproxen)	6	neomycin-polymy-dexameth SUSP 122		NEXIUM PACK (esomeprazole magnesium)	129
naproxen sodium TABS 220 MG	6	neomycin-polymyxin w/ pramoxine 54		NGENLA	63
naproxen sodium TABS 275 MG, 550 MG	6	neomycin-polymyxin-gramicidin	121	niacin CPCR 250 MG, 500 MG	134
naproxen sodium TB24	6	neomycin-polymyxin-hc (ophth)	122	NIACIN ER TBCR	134
naproxen SUSP	6	neomycin-polymyxin-hc (otic) SOLN	123	niacin TABS 500 MG	134
naproxen TABS	6	neomycin-polymyxin-hc (otic) SUSP	123	niacin TBCR	134
naproxen TBEC	6	NEORAL CAPS (cyclosporine modified (for microemulsion))	78	NICADAN TABS	102
naproxen-esomeprazole magnesium	6	NEORAL SOLN (cyclosporine modified (for microemulsion))	78	nicardipine hcl CAPS	47
naratriptan hcl	76	NEOVITE TABS	102	NICAZEL FORTE TABS	102
NARCAN LIQD (naloxone hcl)	30	NERVIVE NERVE RELIEF TABS	118	NICAZEL TABS	102
NARDIL (phenelzine sulfate)	22			NICOTINE KIT	127
nateglinide	29			nicotine polacrilex GUM	127
				nicotine polacrilex LOZG	127
				nicotine PT24 TD 7 MG/24HR, 14	

MG/24HR, 21 MG/24HR .....	127	norethindrone acet & eth estra TABS 50	SOPN IJ .....	28
NICOTROL NS SOLN .....	127	norethindrone acetate TABS .....	125	NOVOLIN R FLEXPEN SOPN IJ ..
nifedipine CAPS .....	47	norethindrone acetate-ethinyl estradiol .....	64	NOVOLIN R RELION SOLN IJ ....
nifedipine TB24 30 MG, 90 MG ...	48	norethindrone acetate-ethinyl estradiol-fe .....	50	NOVOLIN R SOLN IJ .....
nifedipine TB24 60 MG .....	48	norethindrone-eth estradiol (triphasic) .....	50	NOVOLOG 70/30 FLEXPEN RELION SUPN .....
nimodipine CAPS .....	48	norgestimate-ethinyl estradiol (triphasic) .....	50	NOVOLOG FLEXPEN RELION SOPN .....
nimodipine SOLN .....	48	norgestimate-ethinyl estradiol ....	50	NOVOLOG FLEXPEN SOPN .....
nisoldipine .....	48	norgestrel & ethinyl estradiol 30 MCG-0.3 MG .....	50	NOVOLOG MIX 70/30 FLEXPEN SUPN .....
nitazoxanide TABS .....	36	NORLIQVA SOLN .....	48	NOVOLOG MIX 70/30 RELION SUSP .....
NITRO-BID OINT .....	13	NORPACE CR CP12 150 MG .....	13	NOVOLOG MIX 70/30 SUSP .....
nitrofurantoin .....	36	nortriptyline hcl CAPS .....	24	NOVOLOG PENFILL SOCT .....
nitrofurantoin macrocrystal 50 MG, 100 MG .....	37	nortriptyline hcl SOLN .....	24	NOVOLOG RELION SOLN IJ .....
nitrofurantoin monohyd macro ....	37	NORVASC TABS (amlodipine besylate) .....	48	NOVOLOG SOLN IJ .....
nitroglycerin CPR .....	13	NORVIR PACK .....	44	NP THYROID TABS .....
nitroglycerin PT24 .....	13	NORVIR TABS (ritonavir) .....	44	NUCALA SOAJ .....
nitroglycerin SUBL .....	13	NOVOLIN 70/30 FLEXPEN RELION SUPN .....	28	NUCALA SOLR .....
NIVA THYROID TABS .....	128	NOVOLIN 70/30 FLEXPEN SUPN	28	NUCALA SOSY .....
NIVEA LOTN .....	60	NOVOLIN 70/30 RELION SUSP ..	28	NULEV TBDP 0.125 MG (hyoscyamine sulfate) .....
NIVEA VISAGE LOTN .....	60	NOVOLIN 70/30 SUSP .....	28	NUPLAZID CAPS .....
nizatidine CAPS .....	129	NOVOLIN N FLEXPEN RELION SUPN .....	28	NUPLAZID TABS 10 MG .....
NO IRON MULT VITAMIN- MINERALS TABS .....	102	NOVOLIN N FLEXPEN SUPN ....	28	NURTEC .....
NORDITROPIN FLEXPEN SOPN	63	NOVOLIN N RELION SUSP .....	28	NUTRALYN TABS .....
norelgestromin-ethinyl estradiol ..	50	NOVOLIN N SUSP .....	28	NUTRICAP TABS .....
norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG .....	50	NOVOLIN R FLEXPEN RELION		NUTRIFAC ZX TABS 500 MG-25 MG-200 MCG-1000 MCG-50 MCG- 25 MG-20 MG-100 MG-5000 UNIT- 20 MG-50 MG-20 MG-400 UNIT-50 UNIT-2.5 MG-66 MG-50 MCG-5 MG-
norethindrone & eth estradiol .....	50			
norethindrone & ethinyl estradiol-fe 50				
norethindrone (contraceptive) .....	50			

200 MCG .....	102	OCUVITE ADULT 50+ CAPS .....	103	olanzapine TBP .....	41
NUTROPIN AQ NUSPIN 10 SOPN 63		OCUVITE ADULT FORMULA CAPS .	103	olanzapine-fluoxetine hcl 25 MG-12 MG, 50 MG-12 MG, 50 MG-6 MG	126
NUTROPIN AQ NUSPIN 20 SOPN 63		OCUVITE EXTRA TABS 200 MG-5 MG-3 MG-40 MG-40 MG-2 MG-5 MG-50 UNIT-6000 UNIT-40 MCG	103	olanzapine-fluoxetine hcl 25 MG-3 MG, 25 MG-6 MG .....	126
NUTROPIN AQ NUSPIN 5 SOPN .63		OCUVITE EYE + MULTI TABS 75 MG-1 MG-15 MCG-200 MCG-200 UNIT-3 MCG-0.85 MG-15 MCG-10 MG-5 MG-5 MG-1 MG-150 MCG-1 MG-0.75 MG-11.5 MG-500 UNIT-50 MG-100 MG-37.5 MCG-75 MCG-25 UNIT-7 MG-60 MCG-1 MG-35 MCG .	103	olmesartan medoxomil .....	34
NUVAXOVID COVID-19 VACCINE SUSY 5 MCG/0.5ML .....	133	OCUVITE EYE HEALTH FORMULA CAPS 150 MG-30 UNIT-5 MG-1 MG- 1 MG-9 MG-90 MG-160 MG-250 MG	103	olmesartan medoxomil-amlodipine- hydrochlorothiazide .....	35
NUVIGIL (armodafinil) .....	2	OCUVITE EYE PERFORMANCE CAPS .....	103	olmesartan medoxomil- hydrochlorothiazide .....	35
NUZYRA TABS .....	128	OCUVITE-LUTEIN CAPS .....	103	olopatadine hcl (nasal) .....	119
NYMALIZE SOLN 6 MG/ML .....	48	OCUVITE-LUTEIN TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG .....	103	olopatadine hcl .....	123
NYSTATIN (nystatin (mouth-throat)) . 78		ODEFSEY .....	44	OLUMIANT .....	3
nystatin (mouth-throat) .....	78	OFEV .....	128	omega-3 fatty acids CAPS 1000 MG .	120
nystatin (topical) CREA .....	55	ofloxacin (ophth) .....	121	omega-3-acid ethyl esters .....	32
nystatin (topical) OINT .....	55	ofloxacin (otic) .....	123	omeprazole CPDR .....	129
nystatin (topical) POWD EX .....	55	ofloxacin 300 MG .....	64	omeprazole magnesium TBEC ...	129
nystatin TABS .....	31	ofloxacin 400 MG .....	64	omeprazole TBEC .....	129
nystatin-triamcinolone CREA .....	55	OGIVRI .....	37	omeprazole-sodium bicarbonate CAPS .....	130
nystatin-triamcinolone OINT .....	55	OHTUVAYRE .....	14	omeprazole-sodium bicarbonate PACK .....	130
OCTAGAM SOLN 30 GM/300ML	124	olanzapine TABS 15 MG, 20 MG ..	41	OMNARIS SUSP .....	119
octreotide acetate KIT .....	64	olanzapine TABS 2.5 MG, 5 MG ..	41	OMNICAP TABS .....	115
OCUFLOX (ofloxacin (ophth)) ...	121	olanzapine TABS 7.5 MG, 10 MG .	41	OMNIPOD 5 DEXG7G6 INTRO GEN 5 KIT .....	71
OCULAR VITAMINS TABS .....	102			OMNIPOD 5 DEXG7G6 PODS GEN 5 MISC .....	71
OCUTABS TABS 113 MG-17.4 MG- 0.4 MG-100 UNIT-7160 UNIT, 200 MG-2 MG-40 MG-2 MG-1000 UNIT- 60 UNIT-55 MCG .....	103			OMNIPOD 5 G7 INTRO (GEN 5) KIT 71	
OCUTABS-LUTEIN TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG .....	102			OMNIPOD 5 G7 PODS (GEN 5) MISC .....	71
OCUVEL CAPS 250 MG-0.5 MG-5 MG-1 MG-40 MG-1 MG-200 UNIT 103					

OMNIPOD 5 LIBRE2 G6 INTRO GEN5 KIT .....	71	30 MCG-3.4 MG-20 MCG-20 MG- 5000 UNIT-15 MG-120 MG-4.5 MG- 22.5 MG-2 MG-100 MG-37.5 MG-90 MCG-150 MCG-60 UNIT-4 MG-180 MCG-105 MCG-34 MG .....	103	ONE DAILY FOR WOMEN 50+ ADV TABS 60 MG-6 MG-30 MCG-400 MCG-800 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-2500 UNIT-15 MG-405 MG-4.5 MG-50 MG-22.5 MG-90 MCG-150 MCG-33 UNIT-2 MG-4 MG-180 MCG-20 MCG-120 MG .	104
OMNIPOD 5 LIBRE2 PLUS G6 PODS MISC .....	71	ONE DAILY CALCIUM/IRON TABS 400 UNIT-60 MG-2 MG-400 MCG- 1.5 MG-6 MCG-10 MG-1.7 MG-20 MG-2500 UNIT-2500 UNIT-27 MG- 15 MG-450 MG-30 UNIT .....	103	ONE DAILY FOR WOMEN TABS 60 MG-2 MG-30 MCG-400 MCG-1000 UNIT-6 MCG-1.7 MG-25 MCG-10 MG-2500 UNIT-5 MG-18 MG-450 MG-1.5 MG-15 MG-50 MG-30 UNIT- 2 MG-2 MG-120 MCG-20 MCG, 60 MG-2 MG-30 MCG-400 MCG-1000 UNIT-6 MCG-1.7 MG-25 MCG-10 MG-2500 UNIT-5 MG-18 MG-450 MG-1.5 MG-50 MG-15 MG-30 UNIT- 2 MG-2 MG-120 MCG-20 MCG ..	104
OMNITROPE SOCT .....	63	ONE DAILY COMPLETE FOR MEN TABS 60 MG-3 MG-75 MCG-400 MCG-700 UNIT-18 MCG-1.7 MG-20 MCG-18 MG-3500 UNIT-16 MG-210 MG-300 MCG-1.35 MG-140 MG-15 MG-2 MG-22.5 UNIT-2 MG-120 MCG-110 MCG .....	103	ONE DAILY COMPLETE TABS 60 MG-2 MG-30 MCG-400 MCG-20 MG-1.5 MG-6 MCG-10 MG-1.7 MG- 5000 UNIT-400 UNIT-30 UNIT-18 MG-100 MG-2.5 MG-10 MCG-37.5 MG-10 MCG-2 MG-15 MG-130 MG- 150 MCG-100 MG-10 MCG-34 MG	103
OMNITROPE SOLR SC .....	63	ONE DAILY COMPLETE TABS 60 MG-2 MG-30 MCG-400 MCG-20 MG-1.5 MG-6 MCG-10 MG-1.7 MG- 5000 UNIT-400 UNIT-30 UNIT-18 MG-100 MG-2.5 MG-10 MCG-37.5 MG-10 MCG-2 MG-15 MG-130 MG- 150 MCG-100 MG-10 MCG-34 MG	103	ONE DAILY HEALTHY WEIGHT ADV TABS 60 MG-10 MG-2.5 MG- 400 MCG-400 UNIT-7.5 MCG-2.1 MG-80 MCG-25 MG-2500 UNIT-12.5 MG-18 MG-200 MG-1.9 MG-15 MG- 50 MG-30 UNIT-2 MG-2 MG-200 MCG-70 MCG .....	104
OMVOH (300 MG DOSE) SOAJ ...	65	ONE DAILY ESSENTIAL TABS ..	115	ONE DAILY HEALTHY WEIGHT TABS 60 MG-2.5 MG-400 MCG-400 UNIT-7.5 MCG-2.125 MG-25 MG- 12.5 MG-18 MG-300 MG-1.9 MG-50 MG-15 MG-2500 UNIT-30 UNIT-2 MG-2 MG-200 MCG-80 MCG-70 MCG-32 MG, 60 MG-3 MG-30 MCG- 400 MCG-400 UNIT-25 MCG-1.7 MG-20 MG-250 MCG-3500 UNIT-10 MG-200 MG-300 MCG-1.5 MG-100 MG-15 MG-2 MG-80 MG-150 MCG- 150 MCG-75 MCG-45 UNIT-48 MG-5 MCG-2 MG-150 MCG-10 MCG-20 MCG-10 MCG-72 MG-2 MG .....	104
OMVOH (300 MG DOSE) SOSY ..	65	ONE DAILY ESSENTIALS TABS	115	ONE DAILY MAXIMUM TABS 60 MG-2 MG-30 MCG-400 MCG-400 UNIT-6 MCG-1.7 MG-25 MCG-20 MG-2500 UNIT-10 MG-18 MG-1.5	
OMVOH SOAJ .....	65	ONE DAILY FOR MEN 50+ ADVANCED TABS 120 MG-6 MG-30 MCG-400 MCG-400 UNIT-25 MCG- 3.4 MG-20 MCG-20 MG-2500 UNIT- 15 MG-120 MG-600 MCG-4.5 MG- 100 MG-22.5 MG-40 MG-90 MCG- 150 MCG-33 UNIT-2 MG-4 MG-180 MCG-105 MCG-120 MG .....	104		
OMVOH SOSY .....	65	ONE DAILY FOR MEN/LYCOPENE TABS 90 MG-3 MG-30 MCG-400 MCG-400 UNIT-18 MCG-1.7 MG-20 MCG-16 MG-3500 UNIT-5 MG-210 MG-600 MCG-1.2 MG-120 MG-15 MG-2 MG-100 MG-45 UNIT-2 MG- 120 MCG-105 MCG .....	104		
ONCE DAILY TABS 400 UNIT-50 MG-1 MG-2 MG-1 MCG-5000 UNIT- 1 MG-2.5 MG-20 MG .....	115				
ONCOVITE TABS .....	103				
ondansetron hcl SOLN IJ .....	30				
ondansetron hcl SOLN PO 4 MG/5ML .....	30				
ondansetron hcl SOSY .....	30				
ondansetron hcl TABS 4 MG, 8 MG 30					
ondansetron TDBP 16 MG .....	30				
ondansetron TDBP 4 MG, 8 MG ...	30				
ONE A DAY ENERGY TABS .....	103				
ONE A DAY MEN 50 PLUS TABS 103					
ONE A DAY POSTNATAL CAPS	103				
ONE A DAY TRIPLE IMMUNE SUPPRT TABS .....	103				
ONE A DAY WOMEN 50 PLUS TABS .....	103				
ONE DAILY 50 PLUS TABS 120 MG- 6 MG-30 MCG-400 MCG-400 UNIT-					

MG-100 MG-15 MG-150 MCG-162 MG-80 MG-160 MCG-150 MCG-30 UNIT-109 MG-2 MG-5 MCG-10 MCG-65 MCG-3.5 MG-20 MCG-10 MCG-72 MG-2 MG ..... 104	400 UNIT-6 MCG-1.7 MG-20 MG- 5000 UNIT ..... 115	FORMULA TABS ..... 105
ONE DAILY MEN FORMULA W/O IRON TABS ..... 104	ONE DAILY MULTIVITAMIN MEN TABS 60 MG-3 MG-75 MCG-400 MCG-700 UNIT-18 MCG-1.7 MG-20 MCG-18 MG-3500 UNIT-16 MG-300 MCG-1.35 MG-15 MG-2 MG-22.5 UNIT-140 MG-210 MG-2 MG-120 MCG-110 MCG ..... 105	ONE-A-DAY MENS (MINERALS) TABS ..... 105
ONE DAILY MENS 50+ MULTIVIT TABS ..... 104	ONE DAILY MULTIVITAMIN WOMEN TABS ..... 105	ONE-A-DAY MENS 50+ ADVANTAGE TABS ..... 106
ONE DAILY MENS 50+/LYCOPENE TABS 120 MG-6 MG-30 MCG-25.5 UNIT-400 MCG-700 UNIT-25 MCG- 3.4 MG-20 MCG-20 MG-3500 UNIT- 15 MG-120 MG-370 MCG-4.5 MG-24 MG-110 MG-90 MCG-150 MCG-2.2 MG-4.2 MG-180 MCG-117 MCG ..... 105	ONE DAILY TABS 60 MG-2 MG-1.5 MG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT ..... 115	ONE-A-DAY MENS 50+ TABS ... 106
ONE DAILY MENS HEALTH TABS 60 MG-3 MG-30 MCG-400 MCG-700 UNIT-18 MCG-1.7 MG-20 MCG-16 MG-3500 UNIT-5 MG-210 MG-300 MCG-1.2 MG-120 MG-15 MG-2 MG- 22.5 UNIT-2 MG-120 MCG-110 MCG ..... 105	ONE DAILY WOMENS 50 PLUS TABS 75 MG-3 MG-30 MCG-400 MCG-400 UNIT-18 MCG-1.7 MG-14 MG-3000 UNIT-5 MG-240 MG-1.1 MG-120 MG-15 MG-2 MG-100 MG- 33 UNIT-2 MG-120 MCG-20 MCG-70 MCG-10 MG ..... 105	ONE-A-DAY MENS HEALTH FORMULA TABS ..... 106
ONE DAILY MENS TABS 90 MG-3 MG-30 MCG-400 MCG-400 UNIT-18 MCG-1.7 MG-16 MG-3500 UNIT-5 MG-210 MG-600 MCG-1.2 MG-120 MG-15 MG-2 MG-100 MG-45 UNIT-2 MG-120 MCG-20 MCG-105 MCG, 99 MG-43 MCG-240 MCG-1.32 MG- 17.6 MG-2.17 MG-15.5 MG-1.43 MG- 210 MG-300 MCG-25 MCG-15 MG- 120 MG-2.3 MG-35 MCG-0.9 MG-11 MG-150 MCG-55 MCG-900 MCG-30 MCG-6.24 MCG-408 MCG ..... 105	ONE DAILY WOMENS 50+ TABS 60 MG-6 MG-30 MCG-400 MCG-800 UNIT-25 MCG-3.4 MG-20 MCG-20 MG-15 MG-405 MG-4.5 MG-50 MG- 22.5 MG-90 MCG-150 MCG-33 UNIT-2 MG-180 MCG-4 MG-2500 UNIT-20 MCG-120 MG ..... 105	ONE-A-DAY TEEN ADVANTAGE/HIM TABS ..... 106
ONE DAILY MULTIVIT/IRON-FREE TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-3000 UNIT-10 MG-1.5 MG-45 MG-30 UNIT ..... 105	ONE DAILY WOMENS TABS .... 105	ONE-A-DAY WOMENS 50+ TABS 106
ONE DAILY MULTIVITAMIN ADULT TABS 60 MG-2 MG-0.4 MG-1.5 MG- ..... 105	ONE DAILY/MINERALS TABS 50 MG-1 MG-100 MCG-1.5 MG-3 MCG- 1.7 MG-20 MG-5000 UNIT-400 UNIT-5 MG-1 MG-125 MG-150 MCG-10 UNIT ..... 105	ONE-A-DAY WOMENS TABS ... 106
	ONE VITE DAILY MULTIVITAMIN TABS ..... 115	ONE-DAILY MULTI CAPS CAPS 106
	ONE-A-DAY ADULT VITACRAVES+DHA CHEW ..... 115	ONE-DAILY MULTI VITAMINS TABS 50 MG-20 MG-1 MG-1.5 MG-400 UNIT-3 MCG-1 MG-1.7 MG-4000 UNIT-60 MG ..... 116
	ONE-A-DAY ENERGY TABS .... 105	ONE-DAILY MULTI-VIT/MINERAL TABS 50 MG-2 MG-20 MG-1 MG-1 MG-2.5 MG-10 MCG-4.5 MG-10 MG- 1 MG-5 MCG-3.75 MG-150 MCG-5 MCG-1500 MCG-1 MCG ..... 106
	ONE-A-DAY MENOPAUSE	ONE-DAILY MULTI-VITAMIN TABS 50 MG-1 MG-1.5 MG-10 MCG-3 MCG-1.7 MG-20 MG-1200 MCG-1 MG-60 MG ..... 116

ONYDA XR SUER .....	2	ORENITRAM MONTH 3 TEPK ....	48	OTULFI SOLN SC 45 MG/0.5ML ..	56
OPIPZA FILM .....	42	ORENITRAM TBCR .....	48	OTULFI SOSY SC 45 MG/0.5ML, 90	
OPSUMIT .....	48	ORKAMBI PACK .....	128	MG/ML .....	56
OPSYNVI .....	48	ORKAMBI TABS .....	128	OVACE PLUS CREA .....	56
OPTICHAMBER DIAMOND DEVI .	75	orphenadrine citrate TB12 .....	118	OVACE PLUS LOTN .....	56
OPTICHAMBER DIAMOND MISC .	75	orphenadrine w/ aspirin & caff ...	119	OVACE PLUS SHAM (sulfacetamide	
OPTICHAMBER DIAMOND-LG		OSCIMIN SUBL 0.125 MG		sodium) .....	56
MASK DEVI .....	75	(hyoscyamine sulfate) .....	129	OVACE PLUS WASH GEL	
OPTICHAMBER DIAMOND-MD		OSCIMIN TABS 0.125 MG		(sulfacetamide sodium) .....	56
MASK MISC .....	75	(hyoscyamine sulfate) .....	129	OVACE PLUS WASH LIQD	
OPTICHAMBER DIAMOND-SM		oseltamivir phosphate CAPS 30 MG .		(sulfacetamide sodium) .....	56
MASK MISC .....	75	46		OVACE WASH LIQD (sulfacetamide	
OPTIC-VITES TABS 60 MG-40 MG-2		oseltamivir phosphate CAPS 45 MG,		sodium) .....	56
MG-30 UNIT-5000 UNIT-40 MCG		75 MG .....	46	OVIDE (malathion) .....	61
106		oseltamivir phosphate SUSR .....	46	oxaprozin CAPS .....	6
OPTIC-VITES WITH LUTEIN TABS		OSMOLEX ER TB24 129 MG, 193		oxaprozin TABS .....	6
200 MG-2 MG-40 MG-2 MG-1000		MG .....	38	oxazepam CAPS .....	13
UNIT-60 UNIT-55 MCG .....	106	OSTEOPRIME PLUS TABS .....	106	oxcarbazepine SUSP .....	19
OPTIMUM PMS TABS 250 MG-4.16		OSTEOPRIME ULTRA TABS 30		oxcarbazepine TABS .....	19
MG-33.3 MCG-4.16 MG-10.4 MCG-		MG-6.25 MG-200 MCG-5 MG-200		oxcarbazepine TB24 .....	19
2083.3 UNIT-4.16 MG-52.08 MG-		UNIT-12.5 MCG-5 MG-75 MCG-12.5		oxiconazole nitrate CREA .....	55
4.16 MG-4.16 MG-16.7 UNIT-2.5		MG-5 MG-0.5 MG-5 MG-11.25 MCG-		OXISTAT LOTN .....	55
MG-41.7 MG-1.67 MG-7.9 MG-16.7		1.25 MG-75 MG-3.75 MG-0.75 MG-		OXTELLAR XR TB24	
MCG-0.08 MG-4.16 MG-12.5 MCG-		200 MG-12.5 MCG-32 MG-25 MCG-		(oxcarbazepine) .....	19
16.7 MCG-16.7 UNIT .....	106	1.5 MG-5 MG-1.75 MG-50 MCG .	106	oxybutynin chloride SOLN .....	130
OPURITY TABS .....	106	OTEZLA TABS 20 MG .....	7	oxybutynin chloride TABS 2.5 MG	
OPVEE NA .....	30	OTEZLA TABS 30 MG .....	7	130	
OPZELURA .....	59	OTEZLA TBPK .....	7	oxybutynin chloride TABS 5 MG .	130
ORACEA (doxycycline (rosacea))	61	OTEZLA XR TB24 PO 75 MG .....	7	oxybutynin chloride TB24 .....	130
oral electrolytes SOLN .....	77	OTEZLA/OTEZLA XR INITIATION		oxycodone hcl CAPS .....	9
ORENCIA CLICKJECT SOAJ .....	7	PK TBPK .....	7	oxycodone hcl CONC 100 MG/5ML	9
ORENCIA SOSY .....	7	OTREXUP SOAJ 10 MG/0.4ML, 12.5		oxycodone hcl SOLN .....	9
ORENITRAM MONTH 1 TEPK ....	48	MG/0.4ML, 15 MG/0.4ML, 17.5			
ORENITRAM MONTH 2 TEPK ....	48	MG/0.4ML, 20 MG/0.4ML, 22.5			
		MG/0.4ML, 25 MG/0.4ML .....	3		

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PANDA MASK LARGE .....75	PAXLOVID (300/100 & 150/100) .45	PERCOCET TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG (oxycodone w/ acetaminophen) ... 11
PANDA MASK MEDIUM .....75	PAXLOVID (300/100) ..... 45	PERCOCET TABS 325 MG-2.5 MG (oxycodone w/ acetaminophen) ... 11
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MG/5ML-100 MG/5ML .....	52	PNEUMOVAX 23 SOLN .....	131	potassium citrate (alkalinizer) TBCR .	66
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PRED FORTE (prednisolone acetate (ophth)) .....	122	PREPARATION H SOOTHING RELIEF EX 1 % .....	12	PRISTIQ 25 MG, 50 MG (desvenlafaxine succinate) .....	24
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PREDNISOLONE SODIUM PHOSPHATE .....	122	PRESERVISION AREDS 2+MULTI VIT CAPS .....	106	PROAIR RESPICLICK AEPB .....	16
prednisolone sodium phosphate SOLN 20 MG/5ML .....	51	PRESERVISION AREDS CAPS .	106	probenecid .....	67
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saline SOLN 0.65 % .....	119				
salsalate .....	8				

sertraline hcl TABS 100 MG .....	23	SINGULAIR CHEW (montelukast sodium) .....	14	sodium phosphates ENEM .....	69
sertraline hcl TABS 25 MG, 50 MG 23		SINGULAIR PACK (montelukast sodium) .....	14	sodium polystyrene sulfonate POWD 78	
sevelamer carbonate PACK .....	66	SINGULAIR TABS (montelukast sodium) .....	14	sodium polystyrene sulfonate SUSP CO 15 GM/60ML .....	78
sevelamer carbonate TABS .....	66	sirolimus SOLN .....	78	sodium polystyrene sulfonate SUSP PR 30 GM/120ML .....	78
sevelamer hcl .....	66	sirolimus TABS .....	78	sodium sulfate-potassium sulfate-magnesium sulfate .....	69
SFROWASA ENEM .....	65	SITAGLIPT BASE-METFORM HCL ER TB24 .....	25	SOFOSBUVIR-VELPATASVIR TABS .....	46
SHINGRIX .....	133	SITAGLIPTIN .....	26	SOGROYA .....	63
SIDEROL TABS .....	108	SITAGLIPTIN BASE-METFORMIN HCL TABS .....	25	solifenacin succinate TABS .....	130
SIGNACAL TABS 0.5 MG-75 UNIT-125 MG-13.63 MG-0.75 MG-15 MG-250 MG-0.25 MCG-0.25 MG-0.25 MG .....	79	SIVEXTRO TABS .....	36	SOLQUA .....	25
SIKLOS TABS .....	67	SKIN HAIR & NAILS ADVANCED CAPS .....	108	SOLO TABS .....	108
sildenafil citrate (pulmonary hypertension) SUSR .....	49	SKYRIZI PEN SOAJ .....	56	SOLOSEC .....	3
sildenafil citrate (pulmonary hypertension) TABS .....	49	SKYRIZI SOCT .....	65	SOMA TABS (carisoprodol) .....	119
silodosin .....	66	SKYRIZI SOSY .....	56	SOOLANTRA (ivermectin (rosacea)) .....	61
silver sulfadiazine .....	57	SKYTROFA .....	63	SORBITOL XX .....	125
SIMBRINZA .....	120	sodium bicarbonate (antacid) TABS 325 MG, 650 MG .....	12	SORILUX FOAM .....	56
simethicone CHEW 80 MG .....	64	sodium chloride (gu irrigant) 0.9 % .....	66	sotalol hcl (afib/afll) .....	47
simethicone SUSP .....	64	sodium chloride (inhalant) NEBU 0.9 %, 3 %, 10 % .....	52	sotalol hcl TABS .....	47
SIMLANDI (1 PEN) AJKT .....	5	sodium citrate & citric acid .....	66	SOTYKTU .....	56
SIMLANDI (1 SYRINGE) PSKT .....	5	sodium fluoride (dental) CREA ....	79	SOTYLIZE SOLN PO .....	47
SIMLANDI (2 PEN) AJKT .....	5	sodium fluoride (dental) GEL .....	79	SOVALDI PACK .....	46
SIMLANDI (2 SYRINGE) PSKT .....	5	sodium fluoride (dental) PSTE DT .....	79	SOVALDI TABS .....	46
SIMPONI SOAJ .....	5	sodium fluoride CHEW .....	77	SOVUNA 200 MG .....	37
SIMPONI SOSY .....	5	sodium fluoride SOLN 0.5 MG/ML .....	77	specialty vitamins products TABS 118	
simvastatin TABS 5 MG, 10 MG, 20 MG, 40 MG .....	33	SODIUM FLUORIDE SOLN 0.5 MG/ML .....	77	SPECTRAVITE TABS .....	108
simvastatin TABS 80 MG .....	33			SPEVIGO SOSY .....	56

SPIKEVAX 6M-11Y SUSY 25 MCG/0.25ML .....	133	STRESS FORMULA TABS 500 MG-3 MG-45 MCG-400 MCG-12 MCG-20 MG-10 MG-100 MG-10 MG-30 UNIT, 500 MG-5 MG-45 MCG-400 MCG-12 MCG-10 MG-100 MG-20 MG-10 MG-30 UNIT, 500 MG-5 MG-45 MCG-400 MCG-15 MG-12 MCG-20 MG-10 MG-100 MG-30 UNIT .....	116	121	sulfacetamide sodium GEL .....	57
SPIKEVAX SUSY .....	133	STRESS FORMULA/ZINC/ENERGY TABS .....	116		sulfacetamide sodium LIQD .....	57
spinosad .....	61	STRESSTABS ADVANCED TABS 30 MG-5 MG-400 MCG-400 UNIT-50 MCG-2500 UNIT-1.5 MG-20 MG-1.5 MG-30 MG-20 MG-15 UNIT .....	108		sulfacetamide sodium SHAM 10 %	57
SPIRIVA HANDIHALER CAPS IN (tiotropium bromide) .....	14	STRESSTABS ENERGY TABS .....	116		sulfacetamide sodium w/ sulfur CREA 10 %-2 %, 10 %-5 % .....	53
SPIRIVA RESPIMAT AERS IN .....	14	STRIBILD .....	44		sulfacetamide sodium w/ sulfur EMUL 10 %-1 % .....	54
spironolactone & hydrochlorothiazide .....	62	STRIVERDI RESPIMAT .....	16		sulfacetamide sodium w/ sulfur FOAM .....	54
spironolactone TABS .....	62	STROVITE ONE TABS .....	108		sulfacetamide sodium w/ sulfur LIQD	54
SPORANOX CAPS (itraconazole) .	31	SUBLOCADE SOSY .....	11		sulfacetamide sodium w/ sulfur LOTN 10 %-5 % .....	54
SPORANOX SOLN (itraconazole) .	31	SUBOXONE FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG (buprenorphine hcl-naloxone hcl dihydrate) .....	11		sulfacetamide sodium w/ sulfur LOTN 9.8 %-4.8 % .....	54
SPRITAM TB3D 250 MG, 500 MG, 750 MG, 1000 MG (levetiracetam) 20		SUBOXONE FILM SL 3 MG-12 MG (buprenorphine hcl-naloxone hcl dihydrate) .....	11		sulfacetamide sodium w/ sulfur SUSP 10 %-5 % .....	54
SPRITAM TB3D .....	19	SUBVENITE SUSP PO 10 MG/ML 20			sulfacetamide sodium w/ sulfur SUSP 8 %-4 % .....	54
SSS 10-5 CREA 10 %-5 % (sulfacetamide sodium w/ sulfur) ..	53	sucrafate SUSP .....	129		SULFACETAMIDE SODIUM-SULFUR SUSP .....	54
STAMARIL SUSR .....	133	sucrafate TABS .....	129		sulfacetamide sod-prednisolone SOLN .....	122
STARJEMZA SOLN SC 45 MG/0.5ML .....	56	SUFLAVE .....	69		sulfamethoxazole-trimethoprim SUSP .....	36
STARJEMZA SOSY SC 45 MG/0.5ML, 90 MG/ML .....	56	SULAR 8.5 MG, 17 MG, 34 MG (nisoldipine) .....	48		sulfamethoxazole-trimethoprim TABS .....	36
STEGLATRO .....	29	sulfacetamide sodium (acne) .....	53		sulfasalazine TABS .....	65
STEGLUJAN .....	25	sulfacetamide sodium (ophth) OINT	121		sulfasalazine TBEC .....	65
STELARA SOSY .....	56	sulfacetamide sodium (ophth) SOLN .			sulindac TABS .....	6
STEQEYMA .....	56				SUMADAN .....	54
STIOLTO RESPIMAT .....	16				SUMADAN WASH LIQD (sulfacetamide sodium w/ sulfur) ..	54
STRATTERA (atomoxetine hcl) .....	2					
STRESS B COMPLEX/ANTIOXID/ZINC TABS 500 MG-45 MCG-400 MCG-10 MG-100 MG-5 MG-20 MG-10 MG-13.5 MG-3 MG-24 MG-77 MG-12 MCG 108						

sumatriptan 20 MG/ACT .....	76	SUPER D-ZINC-SELENIUM-COPPER TABS .....	108	SYMFI LO (efavirenz-lamivudine-tenofovir disoproxil fumarate) .....	44
sumatriptan 5 MG/ACT .....	76	SUPER THERA VITE M TABS 90 MG-3 MG-35 MCG-0.4 MG-3 MG-9 MCG-10 MG-3.4 MG-30 MG-5000 UNIT-400 UNIT-30 UNIT-1250 UNIT-27 MG-100 MG-5 MG-15 MCG-7.5 MG-15 MCG-2 MG-15 MG-40 MG-150 MCG-31 MG-10 MCG-7.5 MG 108		SYMLINPEN 120 SOPN .....	24
sumatriptan succinate SOAJ 4 MG/0.5ML .....	77			SYMLINPEN 60 SOPN .....	24
sumatriptan succinate SOAJ 6 MG/0.5ML .....	76			SYMPAZAN FILM .....	18
sumatriptan succinate SOCT 4 MG/0.5ML .....	77			SYMPROIC .....	66
sumatriptan succinate SOCT 6 MG/0.5ML .....	77	SUPER VITA-MINS TABS 250 MG-5 MG-0.4 MG-10 MG-6 MCG-20 MG-10 MG-100 MG-400 UNIT-30 UNIT-24 MG-100 MG-1.25 MG-2 MG-15 MG-0.161 MG-150 MCG-0.125 MG-10000 UNIT .....	109	SYMTUZA .....	44
sumatriptan succinate SOLN 6 MG/0.5ML .....	77			SYNALAR CREA (fluocinolone acetonide) .....	59
sumatriptan succinate TABS .....	77			SYNALAR OINT (fluocinolone acetonide) .....	59
sumatriptan-naproxen sodium ....	76	SUPERIOR MENS MULTI TABS .109		SYNJARDY TABS .....	25
SUMAXIN CP .....	54	SUPERIOR WOMENS MULTI TABS 109		SYNJARDY XR TB24 .....	25
SUMAXIN PADS .....	54	SUPPORT-500 CAPS .....	109	SYNVERA TABS .....	118
SUNOSI .....	2	SUPREP BOWEL PREP KIT (sodium sulfate-potassium sulfate-magnesium sulfate) .....	69	SYSTANE ICAPS AREDS2 CAPS 250 MG-5 MG-1 MG-1 MG-12.5 MG-200 UNIT .....	109
SUPER ANTIOXIDANT CAPS ...	108			SYSTANE ICAPS AREDS2 TABS 109	
SUPER ANTIOXIDANTS PROTECTOR CAPS 500 MG-400 UNIT-25000 UNIT-50 MCG .....	108	SURE COMFORT INSULIN SYRINGE .....	73	TAB-A-VITE TABS 60 MG-2 MG-400 MCG-20 MG-1.5 MG-10 MCG-6 MCG-1.7 MG-1500 MCG .....	116
SUPER AYTINAL 50 PLUS TABS 120 MG-2 MG-30 MCG-400 MCG-1.5 MG-400 UNIT-12 MCG-10 MG-1.7 MG-20 MG-275 MCG-9 MG-225 MG-100 MG-15 MG-2 MG-150 MCG-75 MCG-150 MCG-50 UNIT-2 MG-5000 UNIT-80 MCG-70 MCG-120 MCG-25 MG-25 MG .....	108	SUTAB .....	69	TAB-A-VITE/BETA CAROTENE TABS 60 MG-2 MG-400 MCG-400 UNIT-6 MCG-1.7 MG-20 MG-3000 UNIT-10 MG-1.5 MG-45 MG-30 UNIT .....	116
SUPER AYTINAL TABS 90 MG-5 MG-40 MCG-400 MCG-400 UNIT-12 MCG-10 MG-5 MG-30 MG-275 MCG-3500 UNIT-25 MG-300 MCG-5 MG-100 MG-15 MG-3 MG-7.7 MG-150 MCG-50 MCG-162 MG-150 MCG-2 MG-50 MCG-30 UNIT-125 MG-5 MCG-10 MCG-7.5 MG-25 MCG-50 MCG-10 MCG-7 MG ....	108	SYMBICORT (budesonide-formoterol fumarate dihydrate) .....	16	TACLONEX SUSP (calcipotriene-betamethasone dipropionate) .....	59
		SYMBICORT 160 MCG/ACT-4.5 MCG/ACT (budesonide-formoterol fumarate dihydrate) .....	16	tacrolimus (topical) OINT 0.03 % ..	60
		SYMBICORT 80 MCG/ACT-4.5 MCG/ACT (budesonide-formoterol fumarate dihydrate) .....	16	tacrolimus (topical) OINT 0.1 % ...	60
		SYMBRAVO TABS PO .....	76	tacrolimus CAPS .....	78
		SYMDEKO .....	128	tadalafil (pulmonary hypertension) TABS .....	49
		SYMFI (efavirenz-lamivudine-tenofovir disoproxil fumarate) .....	44	TADLIQ SUSP .....	49

tafluprost .....	123	44	TETRACAINE HCL 0.5 % .....	121	
TALTZ SOAJ .....	56	TENORETIC 100 (atenolol & chlorthalidone) .....	35	tetracycline hcl CAPS .....	128
TALTZ SOSY .....	56	TENORETIC 50 (atenolol & chlorthalidone) .....	35	TETRACYCLINE HCL TABS .....	128
tamoxifen citrate TABS .....	38	TENORMIN TABS (atenolol) .....	47	tetrahydrozoline hcl (ophth) 0.05 %	121
tamsulosin hcl .....	66	terazosin hcl .....	34	TEZRULY PO 1 MG/ML .....	34
TARPEYO CPDR .....	51	terbinafine hcl (topical) CREA .....	55	TEZSPIRE SOAJ .....	13
TASCENSO ODT .....	127	terbinafine hcl TABS .....	31	TEZSPIRE SOSY .....	13
tasimelteon CAPS .....	69	terbutaline sulfate TABS .....	16	THEO-24 CP24 .....	16
tavaborole .....	55	terconazole vaginal CREA .....	133	theophylline ELIX .....	16
TAVNEOS .....	67	terconazole vaginal SUPP .....	133	theophylline SOLN .....	16
tazarotene CREA .....	56	teriflunomide .....	127	theophylline TB12 300 MG, 450 MG .	16
TAZAROTENE FOAM .....	54	teriparatide SOPN .....	63	theophylline TB24 .....	16
tazarotene GEL .....	56	TERIPARATIDE SOPN .....	63	THERA TABS .....	116
TECFIDERA CDPK (dimethyl fumarate) .....	127	TESTIM GEL TD (testosterone) ...	12	THERA VITAL M TABS 90 MG-3	
TECFIDERA CPDR (dimethyl fumarate) .....	127	testosterone cypionate SOLN IM 100	MG/ML .....	MG-30 MCG-0.4 MG-3 MG-9 MCG-	
TECHLITE INSULIN SYRINGE ...	73	testosterone cypionate SOLN IM 200	MG/ML .....	10 MG-3.4 MG-20 MG-2500 UNIT-	
TEGRETOL SUSP (carbamazepine) .	20	testosterone enanthate SOLN IM ..	12	400 UNIT-30 UNIT-2500 UNIT-27	
TEGRETOL TABS (carbamazepine) .	20	testosterone GEL TD 1 %, 10	MG/ACT, 20.25 MG/1.25GM, 25	MG-100 MG-5 MG-15 MCG-7.5 MG-	
TEGRETOL-XR TB12 (carbamazepine) .....	20	MG/2.5GM, 40.5 MG/2.5GM .....	12	15 MCG-2 MG-15 MG-40 MG-150	
TEGSEDI .....	128	testosterone GEL TD 1 %, 50	MG/5GM .....	MCG-31 MG-10 MCG-7.5 MG ...	109
TEKTURNA (aliskiren fumarate) ..	36	testosterone GEL TD 1.62 %, 1.62 %	.....	THERA VITAL-M TABS 120 MG-3	
telmisartan .....	34	.....	12	MG-15 MCG-400 MCG-400 UNIT-9	
telmisartan-amlodipine .....	35	testosterone SOLN .....	12	MCG-3.4 MG-30 MG-5500 UNIT-10	
telmisartan-hydrochlorothiazide ...	35	TETANUS-DIPHTHERIA TOXOIDS		MG-18 MG-3 MG-100 MG-15 MG-2	
temazepam 15 MG, 30 MG .....	68	TD SUSP .....	129	MG-40 MG-7.5 MG-15 MCG-150	
temazepam 7.5 MG, 22.5 MG .....	68	tetrabenazine .....	126	MCG-30 UNIT-31 MG-5 MG-15	
tenofovir disoproxil fumarate TABS		tetracaine hcl (ophth) .....	121	MCG-10 MCG .....	109
				THERABASIC-M TABS 400 UNIT-90	
				MG-3 MG-35 MCG-0.4 MG-9 MCG-	
				10 MG-3.4 MG-30 MG-5000 UNIT-27	
				MG-3 MG-100 MG-1250 UNIT-15	
				MCG-7.5 MG-15 MCG-40 MG-15	
				MG-150 MCG-30 UNIT-31 MG-2	
				MG-10 MCG-5 MG-7.5 MG .....	109
				THERAGRAN-M ADVANCED 50	

PLUS TABS .....	109	TABS 60 MG-3 MG-30 MCG-400	MCG-30 UNIT-2 MG-2 MG-70 MCG-
THERAGRAN-M ADVANCED TABS .	109	MCG-400 UNIT-25 MCG-1.7 MG-10	120 MCG-150 MCG .....
THERAGRAN-M PREMIER 50 PLUS		MCG-20 MG-250 MCG-3500 UNIT-	110
TABS .....	109	10 MG-300 MCG-1.5 MG-100 MG-15	THYROID TABS 15 MG, 30 MG, 60
THERAGRAN-M PREMIER TABS		MG-150 MCG-200 MG-80 MG-75	MG, 90 MG, 120 MG .....
109		MCG-150 MCG-48 MG-2 MG-5	128
THERAGRAN-M TABS .....	109	MCG-2 MG-150 MCG-45 UNIT-20	tiagabine hcl .....
THERA-M PLUS MV W/BETA-		MCG-10 MCG-72 MG-2 MG .....	20
CAROT TABS .....	109	110	ticagrelor 60 MG, 90 MG .....
THERAMILL FORTE CAPS .....	109	THERATRUM COMPLETE TABS 60	67
THERANATAL LACTATION ONE		MG-2 MG-30 MCG-400 MCG-400	TICOVAC .....
CAPS .....	109	UNIT-6 MCG-1.7 MG-20 MG-250	133
THERAPEUTIC		MCG-5000 UNIT-10 MG-18 MG-1.5	timolol .....
FORMULA/HEMATINICS TABS 3.3		MG-100 MG-15 MG-80 MG-2 MG-	120
MG-0.33 MG-50 MCG-3.3 MG-33.3		150 MCG-162 MG-150 MCG-75	timolol maleate (ophth) SOLG ....
MG-100 MG-11.7 MG-66.7 MG-3.3		MCG-30 UNIT-108 MG-2 MG-72	120
MG-41.7 MG-140 UNIT-5 UNIT-0.67		MG-5 MCG-10 MCG-2 MG-120	timolol maleate (ophth) SOLN 0.5 % .
MG-1400 UNIT .....	109	MCG-25 MCG-20 MCG-10 MCG, 60	120
THERAPEUTIC-M TABS 90 MG-2		MG-2 MG-30 MCG-400 MCG-400	timolol maleate (ophth) SOLN ....
MG-30 MCG-400 MCG-1.5 MG-400		UNIT-6 MCG-1.7 MG-25 MCG-20	120
UNIT-6 MCG-1.7 MG-20 MG-5000		MG-250 MCG-3500 UNIT-10 MG-18	timolol maleate TABS .....
UNIT-10 MG-9 MG-60 MG-2 MG-15		MG-300 MCG-1.5 MG-100 MG-15	47
MCG-8 MG-15 MCG-2 MG-15 MG-		MG-80 MG-150 MCG-162 MG-72	TIMOPTIC OCUDOSE SOLN (timolol
40 MG-150 MCG-10 MCG-30 UNIT-8		MG-75 MCG-150 MCG-30 UNIT-109	maleate (ophth)) .....
MG, 90 MG-30 MCG-400 MCG-3		MG-2 MG-5 MCG-10 MCG-2 MG-	120
MG-20 MG-6 MG-10 MG-3.4 MG-10		120 MCG-20 MCG-10 MCG-2 MG	tinidazole .....
MCG-27 MG-9 MG-100 MG-2 MG-75		110	36
MCG-11 MG-2 MG-10 MCG-150		THERA-VITE MAX-M TABS .....	134
MCG-50 MCG-2 MG-10 MCG-15		110	tiotropium bromide CAPS IN 18 MCG
MG-145 MG-150 MCG-35 MG-70		THEREMS TABS .....	14
MCG-1500 MCG-28 MCG-12 MCG-8		116	TIVICAY PD TBSO .....
MG .....	110	thiamine hcl TABS 100 MG .....	44
THERA-TABS M TABS .....	110	135	TIVICAY TABS 50 MG .....
THERA-TABS TABS 90 MG-3 MG-		thiamine hcl TABS 50 MG, 250 MG	44
30 MCG-400 MCG-3 MG-20 MG-400		135	TIZANIDINE HCL CAPS 8 MG ...
UNIT-9 MCG-5000 UNIT-10 MG-3.4		thiamine mononitrate TABS 100 MG .	119
MG-30 UNIT .....	116	135	tizanidine hcl CAPS .....
THERATRUM COMPLETE 50 PLUS		thioridazine hcl .....	119
		42	tizanidine hcl TABS .....
		42	119
		THRIVE FOR LIFE WOMENS TABS	TM-DAILY VITE TABS .....
		60 MG-6 MG-300 MCG-400 MCG-	116
		1000 UNIT-18 MCG-5.1 MG-60	TOBI NEBU (tobramycin) .....
		MCG-20 MG-100 MCG-3500 UNIT-	3
		15 MG-18 MG-500 MG-700 MCG-4.5	TOBI PODHALER CAPS .....
		MG-50 MG-15 MG-75 MCG-150	3
			TOBRADEX OINT .....
			122
			TOBRADEX ST SUSP .....
			122
			tobramycin (ophth) SOLN .....
			121
			tobramycin NEBU .....
			3
			tobramycin sulfate SOLN IJ 1.2

GM/30ML, 10 MG/ML, 80 MG/2ML .3	topiramate CS24 .....20	tramadol-acetaminophen .....11
tobramycin sulfate SOLR .....3	topiramate SOLN 25 MG/ML ..... 20	trandolapril 1 MG, 2 MG ..... 34
tobramycin-dexamethasone SUSP 122	topiramate TABS 100 MG ..... 20	trandolapril 4 MG ..... 34
TOBREX OINT ..... 121	topiramate TABS 200 MG ..... 20	trandolapril-verapamil hcl ..... 35
tolmetin sodium CAPS .....6	topiramate TABS 25 MG, 50 MG ..20	tranexamic acid TABS ..... 68
tolmetin sodium TABS 600 MG .....6	TOPROL XL TB24 200 MG (metoprolol succinate) ..... 47	TRANSDERM SCOP 1 MG/3DAYS (scopolamine) .....30
tolnaftate CREA .....55	TOPROL XL TB24 25 MG, 50 MG, 100 MG (metoprolol succinate) ...47	TRANSDERM-SCOP (scopolamine) 31
tolterodine tartrate CP24 ..... 130	toremifene citrate .....38	tranylcypromine sulfate ..... 22
tolterodine tartrate TABS ..... 130	toremide TABS 20 MG .....62	TRAVATAN Z SOLN (travoprost) 123
TONMYA SUBL SL 2.8 MG .....126	toremide TABS 5 MG, 10 MG, 100 MG ..... 62	travoprost SOLN .....123
TOPAMAX SPRINKLE CPSP 15 MG (topiramate) .....20	TOSYMRA .....77	TRAZIMERA 420 MG .....37
TOPAMAX SPRINKLE CPSP 25 MG (topiramate) .....20	TOUJEO MAX SOLOSTAR SOPN 29	trazodone hcl TABS 300 MG ..... 23
TOPAMAX TABS 100 MG (topiramate) .....20	TOUJEO SOLOSTAR SOPN .....29	trazodone hcl TABS 50 MG, 100 MG, 150 MG ..... 23
TOPAMAX TABS 200 MG (topiramate) .....20	TOVIAZ (fesoterodine fumarate) 130	TRELEGY ELLIPTA .....16
TOPAMAX TABS 25 MG, 50 MG (topiramate) .....20	TRACLEER TABS (bosentan) ....48	TREMFYA ONE-PRESS SOPN SC 100 MG/ML ..... 56
TOPICORT CREA (desoximetasone) .....59	TRACLEER TBSO 32 MG (bosentan) .....48	TREMFYA PEN SOAJ 100 MG/ML 56
TOPICORT GEL (desoximetasone) 59	TRADJENTA ..... 26	TREMFYA PEN SOAJ SC 200 MG/2ML .....65
TOPICORT OINT (desoximetasone) . 59	tramadol hcl CP24 100 MG, 200 MG, 300 MG .....9	TREMFYA SOSY SC ..... 65
TOPICORT SPRAY LIQD (desoximetasone) .....59	TRAMADOL HCL SOLN (tramadol hcl) .....9	TREMFYA-CD/UC INDUCTION SOAJ SC 200 MG/2ML ..... 65
topiramate CP24 .....20	tramadol hcl SOLN .....9	TRESIBA FLEXTOUCH SOPN 100 UNIT/ML ..... 29
topiramate CPSP 15 MG ..... 20	tramadol hcl TABS 100 MG .....10	TRESIBA FLEXTOUCH SOPN 200 UNIT/ML ..... 29
topiramate CPSP 25 MG ..... 20	tramadol hcl TABS 25 MG ..... 9	TRESIBA SOLN ..... 29
topiramate CPSP 50 MG ..... 20	tramadol hcl TABS 50 MG ..... 9	tretinoin CREA 0.025 %, 0.05 %, 0.1 % ..... 54
	tramadol hcl TABS 75 MG, 100 MG 9	
	tramadol hcl TB24 .....10	

tretinoin GEL 0.01 %, 0.025 %	54	trifluoperazine hcl TABS	42	TRUEPLUS 5-BEVEL PEN NEEDLES	73
tretinoin GEL 0.01 %	54	trifluridine	121	TRUEPLUS GLUCOSE CHEW	26
tretinoin GEL 0.05 %	54	trihexyphenidyl hcl SOLN	38	TRUEPLUS GLUCOSE ON THE GO CHEW	25
tretinoin microsphere	54	trihexyphenidyl hcl TABS	38	TRUEPLUS INSULIN SYRINGE	73
TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	37	TRIJARDY XR	25	TRUEPLUS LANCETS 28G	71
triamcinolone acetonide (mouth)	79	TRIKAFTA TBPK	128	TRUEPLUS LANCETS 30G	71
triamcinolone acetonide (nasal) AERO	119	TRILEPTAL SUSP (oxcarbazepine) 20		TRUEPLUS LANCETS 33G	71
triamcinolone acetonide (topical) AERS	59	TRILEPTAL TABS (oxcarbazepine) 20		TRUEPLUS PEN NEEDLES	73
triamcinolone acetonide (topical) CREA 0.025 %	59	trimethobenzamide hcl CAPS	31	TRULICITY	26
triamcinolone acetonide (topical) CREA 0.1 %	59	trimethoprim TABS	36	TRUMENBA 0.5 ML	131
triamcinolone acetonide (topical) CREA 0.5 %	59	TRINTELLIX	23	TRUVADA 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG (emtricitabine-tenofovir disoproxil fumarate)	45
triamcinolone acetonide (topical) LOTN	59	TRIPHROCAPS CAPS 1 MG	79	TRUVADA 200 MG-300 MG (emtricitabine-tenofovir disoproxil fumarate)	45
triamcinolone acetonide (topical) OINT 0.025 %, 0.5 %	59	TRIUMEQ PD TBSO	45	TRUXIMA	37
triamcinolone acetonide (topical) OINT 0.05 %, 0.1 %	59	TRIUMEQ TABS	45	TRYPTYR SOLN OP 0.003 %	123
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triamterene & hydrochlorothiazide TABS 25 MG-37.5 MG	62	tropicamide SOLN	120	T-VITES TABS	110
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triazolam	68	tropium chloride TABS	130	TWYNEO	54
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TRICOR TABS 145 MG (fenofibrate)	33	TRUE COMFORT PRO INSULIN SYR	73	TYBOST	45
		TRUE DAILY VITE TABS 60 MG-400 MCG-1.5 MG-20 MG-2 MG-1.7 MG- 10 MCG-1500 MCG-6 MCG	116	TYENNE SOAJ	5
		TRUE METRIX AIR GLUCOSE METER KIT	71	TYENNE SOSY	5
		TRUE METRIX BLOOD GLUCOSE TEST STRP	62	TYMLOS	63
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MG-10 MG, 500 MG-5 MG .....	25	ZARONTIN SOLN (ethosuximide) .21	ziprasidone hcl .....	39	
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XOLAIR SOSY .....	13	ZEGALOGUE SOSY .....	ZITHROMAX SUSR 100 MG/5ML (azithromycin) .....	70	
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XROMI SOLN PO 100 MG/ML ....	67	ZEPATIER .....	46	ZITHROMAX TABS 500 MG (azithromycin) .....	70
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YELETS TEENAGE FORMULA TABS .....	114	ZEPOSIA CAPS .....	127	ZITHROMAX Z-PAK TABS (azithromycin) .....	70
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YUPELRI .....	14	zidovudine SYRP .....	45	zolmitriptan TBDP .....	77
YUSIMRY .....	5	zidovudine TABS .....	45	ZOLOFT CONC (sertraline hcl) ...	23
zafirlukast .....	14	zileuton TB12 .....	14	ZOLOFT TABS 100 MG (sertraline hcl) .....	23
zaleplon 10 MG .....	68	ZIMHI SOSY .....	30	ZOLOFT TABS 25 MG, 50 MG (sertraline hcl) .....	23
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