

Comprehensive Drug List

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

Comprehensive Drug List Medication Locator Instructions:

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

Notice of Non-Discrimination

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

Absolute Total Care:

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

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

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

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

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

1557 Coordinator

PO Box 31384, Tampa, FL 33631

855-577-8234 (TTY: 711)

FAX: 866-388-1769

SM_Section1557Coord@centene.com

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

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

U.S. Department of Health and Human Services

200 Independence Avenue, SW

Room 509F, HHH Building

Washington, D.C. 20201

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

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

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

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

Language Services

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

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

إذا كانت لغتك الأساسية غير اللغة الانكليزية فان خدمات المساعدات اللغوية متوفرة لك مجاناً. اتصل على الرقم:
1-866-433-6041 (رقم هاتف الصم والبكم 711)

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

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

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

Se você fala português do Brasil, os serviços de assistência em sua língua 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).

နမ့်ကတိ၊ ကညိ ကျိအယိ၊ နမန့် ကျိအတံမၤစၢလၢ တလံာ်ဘျုးလၢကံစ့၊ နိတံမၤဘျုးသ့န့ၣ်လီၤ။ ကိး
866-433-6041 (TTY: 711)

ማስታወሻ: የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም እርዳታ ድርጅቶች፣ በነጻ ሊያገዝዎት ተዘጋጅተዋል። ወደ ሚክተለው ቁጥር ይደውሉ 1-866-433-6041 (መስማት ለተሳናቸው፡ 711)።

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

Pharmacy Program

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

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

Comprehensive Drug List (CDL)

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

Pharmacy Benefit Manager

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

Specialty Drugs

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

AcariaHealth Specialty Pharmacy provides the following services:

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

Dispensing Limits

Most drugs are limited to a maximum of 31 days' supply. Select preferred drugs used to treat conditions such as, but not limited to, diabetes, hypertension and high cholesterol may be eligible for up to a maximum of 90 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. 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

On the pharmacy benefit, Absolute Total Care only covers rebated drugs that are in the Medicaid Drug Rebate program and that are Food and Drug Administration (FDA) approved. 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.”

Effective January 1, 2026, all 340B designated pharmacies under the Absolute Total Care Medicaid health plan must declare a claim as either 340B or non-340B by providing the appropriate code in the Submission Clarification Code (SCC) field. Each claim must include one of the following:

- If the claim is being filled with 340B stock, the pharmacy must include an SCC 20 designation.
- If the claim is being filled with non-340B stock, then the pharmacy must include an SCC 02 designation.
- If a claim is submitted without an SCC 02 or SCC 20, the claim will be rejected with the following reject code and secondary message:
 - Reject 70 – “SCC 20 or 02 Req'd. Resubmit with SCC 20 if 340B claim or resubmit with SCC 02 if not 340B.

This edit will apply to all claims at 340B pharmacies for all NDCs without exception. Member Prior Authorizations will not be able to override this edit. Pharmacies can override by entering either SCC 02 or 20 in one of the three available SCC fields. Transition/Emergency Supply logic will not be allowed to override this edit if applicable.

Newly-Approved Products

Absolute Total Care reviews new drugs before adding them to the CDL. While the new drugs are being reviewed, access to them will be considered through the PA review process. If Absolute Total Care does not approve PA, we will notify the member and their practitioner. We will also provide information about the appeal process.

Over-The-Counter (OTC) Medications

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

Generic Drugs

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

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

Drug Efficacy Study Implementation (DESI) Drugs

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

Filling a Prescription

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

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

Copayments

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

Drug Tiers

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

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

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

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

Abbreviations

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

Abbreviations		
AL	Age Limit	Drug is limited to specific age.
QL	Quantity Limit	There is a limit on the amount of drug covered per prescription or within a specific timeframe.
Max Day(s) Supply	Day(s) Supply	There is a limit on the amount of the drug that is covered per time period.
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"> • Daily Dose Max = 90 MME** • Day Supply Max = 7 days • Must use short-acting opioids before long-acting opioids <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: www.absolutetotalcare.com</p>
AcariaHealth Specialty Pharmacy	<p>Phone: 1-855-535-1815</p> <p>Fax: 1-855-217-0926</p> <p>Website: www.acariahealth.com</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
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders		
Amphetamines		
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	
Analeptics		
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
Attention-Deficit/Hyperactivity Disorder (ADHD) Agents		
atomoxetine hcl	P	AL(At least 6 yrs old)

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>clonidine hcl (adhd) TB12</i>	P		FOCALIN TABS (<i>dexmethylphenidate hcl</i>)	NP	QL(2 EA daily); AL(At least 6 yrs old)
<i>guanfacine hcl (adhd)</i>	P	QL(1 EA daily); AL(At least 6 yrs old)	JORNAY PM CP24	NP	
INTUNIV (<i>guanfacine hcl (adhd)</i>)	NP	QL(1 EA daily); AL(At least 6 yrs old)	METHYLIN SOLN (<i>methylphenidate hcl</i>)	NP	
ONYDA XR SUER	NP		<i>methylphenidate hcl CHEW</i>	NP	
QELBREE	NP		<i>methylphenidate hcl CP24 10 MG, 20 MG, 30 MG, 40 MG, 60 MG</i>	P	
STRATTERA (<i>atomoxetine hcl</i>)	NP	AL(At least 6 yrs old)	<i>methylphenidate hcl CP24</i>	NP	
Dopamine and Norepinephrine Reuptake Inhibitors (DNRIs)			<i>methylphenidate hcl CPCR</i>	P	QL(1 EA daily); AL(At least 6 yrs old)
SUNOSI	NP		<i>methylphenidate hcl SOLN</i>	P	
Histamine H3-Receptor Antagonist/Inverse Agonists			<i>methylphenidate hcl TABS 5 MG</i>	P	QL(6 EA daily); AL(At least 3 yrs old)
WAKIX	NP	SP	<i>methylphenidate hcl TABS 10 MG, 20 MG</i>	P	QL(3 EA daily); AL(At least 3 yrs old)
Stimulants - Misc.			<i>methylphenidate hcl TB24 18 MG, 27 MG, 54 MG</i>	P	QL(1 EA daily)
APTENSIO XR CP24 (<i>methylphenidate hcl</i>)	NP		<i>methylphenidate hcl TB24 36 MG</i>	P	QL(2 EA daily)
<i>armodafinil</i>	PA	PA	<i>methylphenidate hcl TBCR 18 MG, 27 MG, 54 MG</i>	P	QL(1 EA daily); AL(At least 6 yrs old)
AZSTARYS	NP		<i>methylphenidate hcl TBCR 10 MG, 20 MG, 36 MG</i>	P	QL(2 EA daily); AL(At least 6 yrs old)
CONCERTA TBCR 18 MG, 27 MG, 54 MG (<i>methylphenidate hcl</i>)	NP	QL(1 EA daily); AL(At least 6 yrs old)	<i>methylphenidate hcl TBCR 45 MG, 63 MG, 72 MG</i>	NP	
CONCERTA TBCR 36 MG (<i>methylphenidate hcl</i>)	NP	QL(2 EA daily); AL(At least 6 yrs old)	<i>methylphenidate PTCH</i>	NP	
COTEMPLA XR-ODT TBED	NP		<i>modafinil</i>	PA	PA
DAYTRANA PTCH (<i>methylphenidate</i>)	NP		NUVIGIL (<i>armodafinil</i>)	NP	
<i>dexmethylphenidate hcl CP24</i>	P		PROVIGIL (<i>modafinil</i>)	NP	
<i>dexmethylphenidate hcl TABS</i>	P	QL(2 EA daily); AL(At least 6 yrs old)	QUILLICHEW ER CHER	P	
FOCALIN XR CP24 (<i>dexmethylphenidate hcl</i>)	NP		QUILLIVANT XR SRER	P	

Updated April 2026

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

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

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
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 10 MG/0.1ML	NP		CYLTEZO-PSORIASIS/UV STARTER AJKT	NP	SP
ADALIMUMAB-ADAZ SOSY	NP	SP	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 40 MG/0.4ML	P	QL(4 EA per 28 day(s) retail); 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 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-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			
ADALIMUMAB-RYVK (2 PEN) AJKT	NP				

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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
HUMIRA (2 SYRINGE) PSKT 40 MG/0.4ML	P	QL(4 EA per 28 day(s) retail); 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
HUMIRA-PSORIASIS/UEVIT STARTER AJKT	P	QL(3 EA per 365 day(s) retail); AL(At least 2 yrs old); SP
HYRIMOZ-CROHNS/UC STARTER SOAJ	NP	SP
HYRIMOZ-PED<40KG CROHN STARTER SOSY	NP	SP
HYRIMOZ-PED>=40KG CROHN START SOSY	NP	SP
HYRIMOZ-PLAQ PSOR/UEVIT START SOAJ	NP	SP
HYRIMOZ SOAJ	NP	SP
HYRIMOZ SOSY	NP	SP
IDACIO (2 PEN) AJKT	NP	SP
IDACIO (2 SYRINGE) PSKT	NP	SP
IDACIO-CROHNS/UC STARTER AJKT	NP	SP
IDACIO-PSORIASIS STARTER AJKT	NP	SP
SIMLANDI (1 PEN) AJKT	NP	SP
SIMLANDI (1 SYRINGE) PSKT	NP	SP
SIMLANDI (2 PEN) AJKT	NP	SP
SIMLANDI (2 SYRINGE) PSKT	NP	SP

Drug Name	Drug Tier	Requirements/Limits
SIMPONI SOAJ	NP	QL(1 ML per 28 day(s) retail; 1 ML per 28 days mail); 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
YUFLYMA (1 PEN) AJKT	NP	SP
YUFLYMA (2 PEN) AJKT	NP	SP
YUFLYMA (2 SYRINGE) PSKT	NP	SP
YUFLYMA-CD/UC/HS STARTER AJKT	NP	SP
YUSIMRY	NP	SP
YUSIMRY	NP	
Interleukin-1 Blockers		
ARCALYST	NP	SP
Interleukin-1 Receptor Antagonist (IL-1Ra)		
KINERET SOSY	NP	SP
Interleukin-6 Receptor Inhibitors		
ACTEMRA ACTPEN SOAJ	NP	SP
ACTEMRA SOLN	C	SP; PA
ACTEMRA SOSY	NP	SP
AVTOZMA SOAJ SC 162 MG/0.9ML	NP	
AVTOZMA SOSY SC 162 MG/0.9ML	NP	
KEVZARA SOAJ	NP	SP
KEVZARA SOSY	NP	SP
TYENNE SOAJ	NP	
TYENNE SOAJ	NP	SP
TYENNE SOSY	NP	
TYENNE SOSY	NP	SP
Nonsteroidal Anti-inflammatory Agents (NSAIDs)		

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

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Drug Name	Drug Tier	Requirements/Limits
<i>tolmetin sodium CAPS</i>	NP	
<i>tolmetin sodium TABS 600 MG</i>	NP	
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 TBP	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 20 MG	NP	SP
OTEZLA TABS 30 MG	NP	QL(2 EA daily); AL(At least 6 yrs old); SP
OTEZLA TBP	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		

Drug Name	Drug Tier	Requirements/Limits
ENBREL MINI SOCT	P	QL(8 ML per 28 day(s) retail); AL(At least 2 yrs old); SP
ENBREL SURECLICK SOAJ	P	QL(8 ML per 28 day(s) retail); AL(At least 2 yrs old); SP
ENBREL SOLN	P	QL(4 ML per 28 day(s) retail); AL(At least 2 yrs old); SP
ENBREL SOSY 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
ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions		
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		

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Drug Name	Drug Tier	Requirements/Limits
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)
Analgesics Other		
<i>acetaminophen CHEW</i>	C	
<i>acetaminophen LIQD 160 MG/5ML</i>	C	
<i>acetaminophen SOLN PO 160 MG/5ML, 325 MG/10.15ML, 650 MG/20.3ML</i>	C	QL(240 ML per fill retail)
<i>acetaminophen SUPP 120 MG, 650 MG</i>	C	QL(12 EA per 31 day(s) retail)
<i>acetaminophen SUSP 160 MG/5ML, 650 MG/20.3ML</i>	C	
<i>acetaminophen TABS 325 MG, 500 MG</i>	C	
FEVERALL JUNIOR STRENGTH SUPP	C	QL(12 EA per 31 day(s) retail)
Salicylates		
<i>aspirin buffered (cal carb-mag carb-mag oxide)</i>	C	
<i>aspirin CHEW</i>	C	
ASPIRIN SUPP 300 MG	C	QL(12 EA per 31 day(s) retail)
<i>aspirin TABS 325 MG</i>	C	
<i>aspirin TBEC 81 MG, 325 MG</i>	C	
<i>diflunisal TABS</i>	NP	
<i>salsalate</i>	C	

ANALGESICS - OPIOID - Drugs to Treat Pain,

Drug Name	Drug Tier	Requirements/Limits
Muscle and Joint Conditions		
Opioid Agonists		
<i>codeine sulfate TABS 30 MG</i>	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 (<i>tramadol hcl</i>)	NP	Opioid Smart PA
DILAUDID LIQD (<i>hydromorphone hcl</i>)	NP	Opioid Smart PA
DILAUDID TABS 4 MG (<i>hydromorphone hcl</i>)	NP	Opioid Smart PA
DILAUDID TABS 8 MG (<i>hydromorphone hcl</i>)	NP	Opioid Smart PA; QL(4 EA daily)
DILAUDID TABS 2 MG (<i>hydromorphone hcl</i>)	NP	Opioid Smart PA; QL(8 EA daily)
<i>fentanyl citrate LPOP 200 MCG, 1200 MCG</i>	NP	Opioid Smart PA
<i>fentanyl citrate TABS 400 MCG, 600 MCG, 800 MCG</i>	NP	Opioid Smart PA
<i>fentanyl PT72 37.5 MCG/HR, 62.5 MCG/HR, 87.5 MCG/HR</i>	NP	
<i>fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR</i>	P	QL(0.34 EA daily)
<i>hydrocodone bitartrate CP12</i>	NP	Opioid Smart PA
<i>hydrocodone bitartrate T24A</i>	NP	Opioid Smart PA
<i>hydromorphone hcl LIQD</i>	P	Opioid Smart PA
HYDROMORPHONE HCL SUPP	P	Opioid Smart PA; QL(2 EA daily)
<i>hydromorphone hcl TABS 2 MG</i>	P	Opioid Smart PA; QL(8 EA daily)

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>hydromorphone hcl TABS 8 MG</i>	P	Opioid Smart PA; QL(4 EA daily)	MS CONTIN TBCR (<i>morphine sulfate</i>)	NP	Opioid Smart PA; QL(3 EA daily)
<i>hydromorphone hcl TABS 4 MG</i>	P	Opioid Smart PA	<i>oxycodone hcl CAPS</i>	P	Opioid Smart PA; QL(6 EA daily)
<i>hydromorphone hcl TB24</i>	NP	Opioid Smart PA	<i>oxycodone hcl CONC 100 MG/5ML</i>	P	Opioid Smart PA; QL(4 ML daily)
HYSINGLA ER T24A 20 MG, 30 MG, 40 MG, 60 MG, 80 MG, 100 MG	NP	Opioid Smart PA	<i>oxycodone hcl CONC 100 MG/5ML</i>	P	QL(4 ML daily)
<i>levorphanol tartrate TABS</i>	NP		<i>oxycodone hcl SOLN</i>	P	Opioid Smart PA
<i>levorphanol tartrate TABS</i>	NP	Opioid Smart PA	<i>oxycodone hcl SOLN</i>	P	
<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 10 MG</i>	C	Opioid Smart PA; QL(10 EA daily); PA	OXYCONTIN T12A 10 MG, 15 MG, 30 MG, 60 MG	P	Opioid Smart PA
<i>methadone hcl TABS 5 MG</i>	C	Opioid Smart PA; QL(4 EA daily); PA	OXYCONTIN T12A 20 MG, 40 MG, 80 MG	P	Brand Preferred; 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 10 MG/5ML, 20 MG/5ML</i>	P	Opioid Smart PA; QL(16.67 ML daily)	QDOLO SOLN (<i>tramadol hcl</i>)	NP	Opioid Smart PA
<i>morphine sulfate SOLN PO 10 MG/5ML</i>	P	QL(16.67 ML daily)	ROXICODONE TABS 15 MG, 30 MG (<i>oxycodone hcl</i>)	NP	Opioid Smart PA; QL(6 EA daily)
<i>morphine sulfate SOLN PO 100 MG/5ML</i>	P	Opioid Smart PA	ROXYBOND TABA 5 MG	NP	Opioid Smart PA; QL(6 EA daily)
<i>morphine sulfate SUPP</i>	P	Opioid Smart PA; QL(0.78 EA daily)	ROXYBOND TABA 10 MG, 15 MG, 30 MG	NP	Opioid Smart PA
<i>morphine sulfate TABS</i>	P	Opioid Smart PA; QL(6 EA daily)	TAPENTADOL HCL ER TB12 50 MG, 100 MG, 150 MG, 200 MG, 250 MG	NP	Opioid Smart PA
<i>morphine sulfate TBCR</i>	P	Opioid Smart PA; QL(3 EA daily)	<i>tapentadol hcl TABS 50 MG, 75 MG, 100 MG</i>	NP	Opioid Smart PA

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Drug Name	Drug Tier	Requirements/Limits
<i>tramadol hcl CP24 100 MG, 200 MG, 300 MG</i>	NP	Opioid Smart PA
<i>tramadol hcl SOLN</i>	NP	Opioid Smart PA
TRAMADOL HCL SOLN (<i>tramadol hcl</i>)	NP	Opioid Smart PA
<i>tramadol hcl TABS 50 MG</i>	P	Opioid Smart PA; QL(8 EA daily); AL(At least 18 yrs old)
<i>tramadol hcl TABS 75 MG, 100 MG</i>	NP	
<i>tramadol hcl TABS 25 MG</i>	P	Opioid Smart PA
<i>tramadol hcl TABS 50 MG</i>	P	QL(8 EA daily); AL(At least 18 yrs old)
<i>tramadol hcl TB24</i>	P	Opioid Smart PA
<i>tramadol hcl TB24</i>	P	
<i>tramadol hcl TB24</i>	NP	Opioid Smart PA
Opioid Combinations		
<i>acetaminophen w/ codeine SOLN</i>	P	Opioid Smart PA; QL(30 ML daily); AL(At least 12 yrs old)
<i>acetaminophen w/ codeine SOLN</i>	P	QL(30 ML daily); AL(At least 12 yrs old)
<i>acetaminophen w/ codeine TABS</i>	P	QL(6 EA daily); AL(At least 12 yrs old)
<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>acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG</i>	NP	Opioid Smart PA

Drug Name	Drug Tier	Requirements/Limits
<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>butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-300 MG</i>	P	Opioid Smart PA
<i>butalbital-aspirin-caffeine w/cod</i>	NP	Opioid Smart PA; QL(4 EA daily); AL(At least 12 yrs old)
<i>butalbital-aspirin-caffeine w/cod</i>	P	Opioid Smart PA; QL(4 EA daily); AL(At least 12 yrs old)
FIORICET/CODEINE 30 MG-40 MG-50 MG-300 MG (<i>butalbital-acetaminophen-caffeine w/ codeine</i>)	NP	Opioid Smart PA
<i>hydrocodone-acetaminophen SOLN</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)
<i>hydrocodone-acetaminophen SOLN 325 MG/15ML-10 MG/15ML</i>	P	Opioid Smart PA
<i>hydrocodone-acetaminophen TABS 325 MG-2.5 MG</i>	P	
<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>hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	P	QL(10 EA daily)

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Drug Name	Drug Tier	Requirements/Limits
<i>hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG</i>	P	Opioid Smart PA
<i>hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG, 7.5 MG-200 MG</i>	P	Opioid Smart PA
NALOCET TABS	NP	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>oxycodone w/ acetaminophen TABS 325 MG-2.5 MG</i>	P	Opioid Smart PA
<i>oxycodone w/ acetaminophen TABS</i>	P	QL(6 EA daily)
PERCOCET TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG (<i>oxycodone w/ acetaminophen</i>)	NP	Opioid Smart PA; QL(6 EA daily)
PERCOCET TABS 325 MG-2.5 MG (<i>oxycodone w/ acetaminophen</i>)	NP	Opioid Smart PA
PROLATE SOLN	NP	Opioid Smart PA
PROLATE TABS	NP	Opioid Smart PA
SEGLENTIS	NP	Opioid Smart PA
<i>tramadol-acetaminophen</i>	P	Opioid Smart PA; QL(4 EA daily); AL(At least 18 yrs old)
Opioid Partial Agonists		
BELBUCA FILM	NP	Opioid Smart PA
BRIXADI (WEEKLY) SOSY	P	Opioid Smart PA; SP
BRIXADI SOSY 64 MG/0.18ML, 96 MG/0.27ML, 128 MG/0.36ML	P	Opioid Smart PA; SP

Drug Name	Drug Tier	Requirements/Limits
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL</i>	NP	Brand Preferred; QL(3 EA daily); AL(At least 16 yrs old)
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG</i>	NP	Brand Preferred; Opioid Smart PA; QL(3 EA daily); AL(At least 16 yrs old)
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG</i>	NP	Brand Preferred; Opioid Smart PA; QL(2 EA daily); AL(At least 16 yrs old)
<i>buprenorphine hcl-naloxone hcl dihydrate SUBL 0.5 MG-2 MG</i>	P	Opioid Smart PA; QL(12 EA daily); AL(At least 16 yrs old)
<i>buprenorphine hcl-naloxone hcl dihydrate SUBL 2 MG-8 MG</i>	P	Opioid Smart PA; QL(3 EA daily); AL(At least 16 yrs old)
<i>buprenorphine hcl SUBL</i>	P	
<i>buprenorphine hcl SUBL</i>	P	Opioid Smart PA
<i>buprenorphine PTWK</i>	NP	Brand Preferred; Opioid Smart PA
<i>butorphanol tartrate NA 10 MG/ML</i>	NP	Opioid Smart PA
BUTRANS PTWK (<i>buprenorphine</i>)	P	Brand Preferred; Opioid Smart PA
<i>pentazocine w/ naloxone hcl</i>	NP	Opioid Smart PA
SUBLOCADE SOSY	P	Opioid Smart PA; SP

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Drug Name	Drug Tier	Requirements/Limits
SUBOXONE FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	P	Brand Preferred; Opioid Smart PA; QL(3 EA daily); AL(At least 16 yrs old)
SUBOXONE FILM SL 3 MG-12 MG (<i>buprenorphine hcl-naloxone hcl dihydrate</i>)	P	Brand Preferred; Opioid Smart PA; QL(2 EA daily); AL(At least 16 yrs old)
ZUBSOLV SUBL	NP	Opioid Smart PA; AL(At least 16 yrs old)
ANDROGENS-ANABOLIC - Drugs to Regulate Hormones		
Androgens		
ANDROGEL PUMP GEL TD (<i>testosterone</i>)	NP	
<i>methyltestosterone TABS</i>	C	
NATESTO GEL NA	NP	
TESTIM GEL TD (<i>testosterone</i>)	PA	Brand Preferred; PA
<i>testosterone cypionate SOLN IM 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 %, 50 MG/5GM</i>	NP	Brand Preferred
<i>testosterone GEL TD 1 %, 10 MG/ACT, 20.25 MG/1.25GM, 25 MG/2.5GM, 40.5 MG/2.5GM</i>	NP	
<i>testosterone SOLN</i>	NP	
VOGELXO PUMP GEL TD (<i>testosterone</i>)	NP	

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

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Drug Name	Drug Tier	Requirements/Limits
<i>calcium carbonate (antacid) CHEW 500 MG</i>	C	
Antacids - Magnesium Salts		
<i>magnesium oxide TABS 400 MG</i>	C	
ANTHELMINTICS - Drugs to Treat Worm Infections		
Anthelmintics		
EMVERM CHEW	C	QL(1 EA per fill retail)
ANTIANGINAL AGENTS - Drugs to Treat Chest Pain		
Antianginals-Other		
ASPRUZYO SPRINKLE PACK	NP	
<i>ranolazine TB12</i>	P	
Nitrates		
<i>isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG</i>	C	
<i>isosorbide mononitrate TABS</i>	C	QL(2 EA daily)
ISOSORBIDE MONONITRATE TABS	C	QL(2 EA daily)
<i>isosorbide mononitrate TB24</i>	C	QL(1 EA daily)
NITRO-BID OINT	C	
<i>nitroglycerin CPCR</i>	C	
<i>nitroglycerin PT24</i>	C	
<i>nitroglycerin SUBL</i>	C	
ANTIANGIETY AGENTS - Drugs to Treat Anxiety		
Antianxiety Agents - Misc.		
<i>buspirone hcl 15 MG</i>	C	QL(4 EA daily)
<i>buspirone hcl 7.5 MG, 30 MG</i>	C	QL(3 EA daily)
<i>buspirone hcl 5 MG, 10 MG</i>	C	QL(6 EA daily)

Drug Name	Drug Tier	Requirements/Limits
<i>hydroxyzine hcl SYRP</i>	C	
<i>hydroxyzine hcl TABS</i>	C	
<i>hydroxyzine pamoate CAPS</i>	C	
<i>meprobamate</i>	C	
Benzodiazepines		
<i>alprazolam TABS</i>	C	QL(3 EA daily)
<i>chlordiazepoxide hcl CAPS</i>	C	QL(4 EA daily)
<i>clorazepate dipotassium TABS</i>	C	QL(3 EA daily)
<i>diazepam SOLN PO 5 MG/5ML</i>	C	
<i>diazepam TABS</i>	C	QL(4 EA daily)
<i>lorazepam TABS 1 MG</i>	C	QL(4 EA daily)
<i>lorazepam TABS 0.5 MG, 2 MG</i>	C	QL(3 EA daily)
<i>oxazepam CAPS</i>	C	QL(4 EA daily)
ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms		
Antiarrhythmics Type I-A		
<i>disopyramide phosphate CAPS</i>	C	
NORPACE CR CP12 150 MG	C	
<i>quinidine gluconate TBCR</i>	C	
<i>quinidine sulfate TABS</i>	C	
Antiarrhythmics Type I-B		
<i>mexiletine hcl</i>	C	
Antiarrhythmics Type I-C		
<i>flecainide acetate</i>	C	
<i>propafenone hcl CP12</i>	C	
<i>propafenone hcl TABS</i>	C	
Antiarrhythmics Type III		
<i>amiodarone hcl TABS 200 MG</i>	C	
<i>dofetilide</i>	C	

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Drug Name	Drug Tier	Requirements/Limits
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions		
Antiasthmatic - Monoclonal Antibodies		
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
Anti-Inflammatory Agents		
<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	

Drug Name	Drug Tier	Requirements/Limits
<i>montelukast sodium CHEW</i>	P	QL(1 EA daily)
<i>montelukast sodium PACK</i>	P	QL(1 EA daily); MP
<i>montelukast sodium TABS</i>	P	QL(1 EA daily); MP
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	MP
<i>zileuton TB12</i>	NP	
ZYFLO TABS	NP	
Phosphodiesterase 3 & 4 (PDE3 & PDE4) Inhibitors		
OHTUVAYRE	NP	SP
Selective Phosphodiesterase 4 (PDE4) Inhibitors		
DALIRESP (<i>roflumilast</i>)	NP	QL(1 EA daily)
<i>roflumilast</i>	NP	QL(1 EA daily)
Steroid Inhalants		
ALVESCO	P	
ARNUITY ELLIPTA 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT (<i>fluticasone furoate (inhalation)</i>)	P	Brand Preferred; QL(1 EA daily)
ASMANEX (120 METERED DOSES) AEPB	P	
ASMANEX (14 METERED DOSES) AEPB	P	
ASMANEX (30 METERED DOSES) AEPB	P	
ASMANEX (60 METERED DOSES) AEPB	P	
ASMANEX HFA AERO	P	QL(0.44 GM daily)

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<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)	AIRDUO RESPICLICK 113/14 AEPB (<i>fluticasone-salmeterol</i>)	NP	
<i>budesonide (inhalation) SUSP 1 MG/2ML</i>	P	QL(60 ML per 31 day(s) retail); AL(Up to 8 yrs old)	AIRDUO RESPICLICK 232/14 AEPB (<i>fluticasone-salmeterol</i>)	NP	
<i>fluticasone furoate (inhalation) 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT</i>	NP	QL(1 EA daily)	AIRDUO RESPICLICK 55/14 AEPB (<i>fluticasone-salmeterol</i>)	NP	
<i>fluticasone propionate (inhalation) AEPB</i>	NP		AIRSUPRA	NP	
<i>fluticasone propionate hfa 110 MCG/ACT, 220 MCG/ACT</i>	P	QL(12 GM per 25 day(s) retail)	<i>albuterol sulfate AERS</i>	P	QL(13.4 GM per 30 day(s) retail)
<i>fluticasone propionate hfa 44 MCG/ACT</i>	P	QL(11 GM per 25 day(s) retail)	<i>albuterol sulfate AERS</i>	P	QL(36 GM per 30 day(s) retail; 36 GM per 30 days mail)
PULMICORT FLEXHALER AEPB	P	1 package(s) per fill retail	<i>albuterol sulfate AERS</i>	P	QL(17 GM per 30 day(s) retail; 17 GM per 30 days mail)
PULMICORT FLEXHALER AEPB	P	1 package(s) per fill retail	<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	
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 0.63 MG/3ML, 1.25 MG/3ML</i>	P	QL(375 ML per 31 day(s) retail)
QVAR REDHALER 40 MCG/ACT	P	QL(0.36 GM daily)	<i>albuterol sulfate SYRP</i>	P	
QVAR REDHALER 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	
			BREO ELLIPTA	NP	
			BREO ELLIPTA (<i>fluticasone furoate-vilanterol</i>)	NP	
			BREZTRI AEROSPHERE	NP	
			BROVANA (<i>arformoterol tartrate</i>)	NP	

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Drug Name	Drug Tier	Requirements/Limits
<i>budesonide-formoterol fumarate dihydrate</i>	NP	Brand Preferred; QL(30.9 GM per 30 day(s) retail)
<i>budesonide-formoterol fumarate dihydrate</i>	NP	Brand Preferred; QL(30.6 GM per 30 day(s) retail)
COMBIVENT RESPIMAT AERS	P	QL(4 GM 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	
<i>fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT</i>	NP	Brand Preferred; QL(60 EA per 30 day(s) retail); AL(At least 4 yrs old)
<i>fluticasone-salmeterol AERO</i>	NP	
<i>formoterol fumarate NEBU</i>	NP	
<i>ipratropium-albuterol SOLN</i>	P	QL(12 ML daily)
<i>levalbuterol hcl</i>	NP	
<i>levalbuterol tartrate</i>	NP	QL(0.5 GM daily; 30 GM per 30 day(s) retail)
PERFOROMIST NEBU (<i>formoterol fumarate</i>)	NP	

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

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Direct Factor Xa Inhibitors			<i>enoxaparin sodium SOSY 60 MG/0.6ML</i>	P	QL(25.2 ML per 180 day(s) retail); SP
ELIQUIS (1.5 MG PACK) TBSO PO	P		<i>enoxaparin sodium SOSY 40 MG/0.4ML</i>	P	QL(16.8 ML per 180 day(s) retail)
ELIQUIS (2 MG PACK) TBSO PO	P		<i>fondaparinux sodium</i>	NP	SP
ELIQUIS DVT/PE STARTER PACK TBPK	P	QL(2.47 EA daily)	FRAGMIN SOLN 10000 UNIT/4ML, 95000 UNIT/3.8ML	NP	SP
ELIQUIS CPSP PO 0.15 MG	P		FRAGMIN SOSY	NP	SP
ELIQUIS TABS	P	QL(2 EA daily)	<i>heparin sodium (porcine) SOLN IJ 1000 UNIT/ML, 5000 UNIT/0.5ML, 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML</i>	C	
ELIQUIS TBSO PO 0.5 MG	P		HEPARIN SODIUM (PORCINE) SOSY IJ	C	
<i>rivaroxaban SUSR 1 MG/ML</i>	NP	Brand Preferred	LOVENOX SOLN IJ 300 MG/3ML (<i>enoxaparin sodium</i>)	NP	Max 42 syringes in 180 days; QL(126 ML per 180 day(s) retail); SP
<i>rivaroxaban TABS 2.5 MG</i>	NP	Brand Preferred	LOVENOX SOLN IJ 300 MG/3ML (<i>enoxaparin sodium</i>)	NP	QL(126 ML per 180 day(s) retail); SP
SAVAYSA	NP		LOVENOX SOSY 40 MG/0.4ML (<i>enoxaparin sodium</i>)	NP	Max 42 syringes in 180 days; QL(16.8 ML per 180 day(s) retail); SP
XARELTO STARTER PACK TBPK	P		LOVENOX SOSY 30 MG/0.3ML (<i>enoxaparin sodium</i>)	NP	QL(12.6 ML per 180 day(s) retail); SP
XARELTO SUSR 1 MG/ML (<i>rivaroxaban</i>)	P	Brand Preferred	LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML (<i>enoxaparin sodium</i>)	NP	Max 42 syringes in 180 days; QL(33.6 ML per 180 day(s) retail); SP
XARELTO TABS 2.5 MG (<i>rivaroxaban</i>)	P	Brand Preferred	LOVENOX SOSY 30 MG/0.3ML (<i>enoxaparin sodium</i>)	NP	Max 42 syringes in 180 days; QL(12.6 ML per 180 day(s) retail); SP
XARELTO TABS 10 MG, 15 MG, 20 MG	P		Heparins And Heparinoid-Like Agents		
Heparins And Heparinoid-Like Agents			ARIXTRA (<i>fondaparinux sodium</i>)	NP	SP
<i>enoxaparin sodium SOLN IJ 300 MG/3ML</i>	P	QL(126 ML per 180 day(s) retail); SP	<i>enoxaparin sodium SOSY 30 MG/0.3ML</i>	P	QL(12.6 ML per 180 day(s) retail); SP
<i>enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML</i>	P	QL(42 ML per 180 day(s) retail); SP	<i>enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML</i>	P	QL(33.6 ML per 180 day(s) retail); SP
<i>enoxaparin sodium SOSY 40 MG/0.4ML</i>	P	QL(16.8 ML per 180 day(s) retail); SP			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
LOVENOX SOSY 40 MG/0.4ML (<i>enoxaparin sodium</i>)	NP	QL(16.8 ML per 180 day(s) retail); SP	Anticonvulsants - Benzodiazepines		
LOVENOX SOSY 100 MG/ML, 150 MG/ML (<i>enoxaparin sodium</i>)	NP	QL(42 ML per 180 day(s) retail); SP	<i>clobazam SUSP</i>	P	PA
LOVENOX SOSY 60 MG/0.6ML (<i>enoxaparin sodium</i>)	NP	Max 42 syringes in 180 days; QL(25.2 ML per 180 day(s) retail); SP	<i>clobazam TABS</i>	P	PA
LOVENOX SOSY 100 MG/ML, 150 MG/ML (<i>enoxaparin sodium</i>)	NP	Max 42 syringes in 180 days; QL(42 ML per 180 day(s) retail); SP	<i>clobazam TABS</i>	P	
LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML (<i>enoxaparin sodium</i>)	NP	QL(33.6 ML per 180 day(s) retail); SP	<i>clonazepam TABS</i>	C	QL(4 EA daily)
LOVENOX SOSY 60 MG/0.6ML (<i>enoxaparin sodium</i>)	NP	QL(25.2 ML per 180 day(s) retail); SP	<i>diazepam (anticonvulsant) GEL 10 MG, 20 MG</i>	P	QL(1 EA per fill retail); AL(At least 2 yrs old)
Thrombin Inhibitors			<i>diazepam (anticonvulsant) GEL 10 MG, 20 MG</i>	P	QL(1 EA per fill retail); AL(At least 2 yrs old)
<i>dabigatran etexilate mesylate CAPS</i>	NP	Brand Preferred	LIBERVANT FILM	NP	
PRADAXA CAPS (<i>dabigatran etexilate mesylate</i>)	P	Brand Preferred	NAYZILAM	P	QL(10 EA per 30 day(s) retail)
PRADAXA PACK	NP	SP	ONFI SUSP (<i>clobazam</i>)	NP	
ANTICONVULSANTS - Drugs to Treat Seizures			ONFI TABS (<i>clobazam</i>)	NP	
AMPA Glutamate Receptor Antagonists			SYMPAZAN FILM	NP	
FYCOMPA SUSP 0.5 MG/ML (<i>perampanel</i>)	PA	Brand Preferred; PA	VALTOCO 10 MG DOSE LIQD	P	QL(10 EA per 30 day(s) retail)
FYCOMPA TABS 2 MG, 4 MG, 6 MG, 8 MG, 10 MG, 12 MG (<i>perampanel</i>)	PA	Brand Preferred; PA	VALTOCO 15 MG DOSE LQPK 7.5 MG/0.1ML	P	QL(10 EA per 30 day(s) retail)
<i>perampanel SUSP 0.5 MG/ML</i>	NP	Brand Preferred	VALTOCO 20 MG DOSE LQPK 10 MG/0.1ML	P	QL(10 EA per 30 day(s) retail)
<i>perampanel TABS 2 MG, 4 MG, 6 MG, 8 MG, 10 MG, 12 MG</i>	NP	Brand Preferred	VALTOCO 5 MG DOSE LIQD	P	QL(10 EA per 30 day(s) retail)
			Anticonvulsants - Misc.		
			APTIOM 200 MG, 400 MG, 600 MG, 800 MG (<i>eslicarbazepine acetate</i>)	NP	
			BANZEL SUSP (<i>rufinamide</i>)	NP	SP; PA
			BANZEL TABS (<i>rufinamide</i>)	PA	Brand Preferred; SP; PA
			<i>brivaracetam SOLN PO 10 MG/ML</i>	NP	
			<i>brivaracetam TABS 10 MG, 25 MG, 50 MG, 75 MG, 100 MG</i>	NP	
			BRIVIACT SOLN PO 10 MG/ML (<i>brivaracetam</i>)	NP	SP

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
BRIVIACT TABS 10 MG, 25 MG, 50 MG, 75 MG, 100 MG (<i>brivaracetam</i>)	NP	SP	KEPPRA TABS 500 MG (<i>levetiracetam</i>)	NP	QL(6 EA daily)
<i>carbamazepine CHEW</i>	P		<i>licosamide SOLN PO 10 MG/ML, 50 MG/5ML, 100 MG/10ML</i>	P	
<i>carbamazepine CP12</i>	NP	Brand Preferred	<i>licosamide TABS</i>	P	
<i>carbamazepine SUSP</i>	NP		LAMICTAL ODT KIT (<i>lamotrigine</i>)	NP	
<i>carbamazepine TABS</i>	P		LAMICTAL ODT TBDP (<i>lamotrigine</i>)	NP	
<i>carbamazepine TB12</i>	NP	Brand Preferred	LAMICTAL STARTER KIT 25 MG (<i>lamotrigine</i>)	NP	
CARBATROL CP12 (<i>carbamazepine</i>)	P	Brand Preferred	LAMICTAL XR KIT	NP	
DIACOMIT CAPS 250 MG	NP	QL(12 EA daily); SP	LAMICTAL XR TB24 (<i>lamotrigine</i>)	NP	QL(1 EA daily)
DIACOMIT CAPS 500 MG	NP	QL(6 EA daily); SP	LAMICTAL CHEW (<i>lamotrigine</i>)	NP	
DIACOMIT PACK 500 MG	NP	QL(6 EA daily); SP	LAMICTAL TABS (<i>lamotrigine</i>)	NP	
DIACOMIT PACK 250 MG	NP	QL(12 EA daily); SP	<i>lamotrigine CHEW</i>	P	
ELEPSIA XR TB24	NP		<i>lamotrigine KIT 25 MG</i>	NP	
EPIDIOLEX	NP	SP	<i>lamotrigine TABS</i>	NP	
EPRONTIA SOLN 25 MG/ML (<i>topiramate</i>)	NP		<i>lamotrigine TABS</i>	P	
<i>eslicarbazepine acetate 200 MG, 400 MG, 600 MG, 800 MG</i>	NP		<i>lamotrigine TB24</i>	P	QL(1 EA daily)
FINTEPLA	NP	SP	<i>lamotrigine TBDP</i>	P	
<i>gabapentin CAPS</i>	P	QL(9 EA daily)	<i>levetiracetam SOLN PO 100 MG/ML, 500 MG/5ML</i>	P	QL(16 ML daily)
<i>gabapentin SOLN</i>	P		<i>levetiracetam TABS 250 MG, 750 MG</i>	P	QL(4 EA daily)
<i>gabapentin TABS 600 MG</i>	P	QL(6 EA daily)	<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)
GABARONE TABS 100 MG, 400 MG	NP		<i>levetiracetam TB24</i>	P	
KEPPRA XR TB24 (<i>levetiracetam</i>)	NP		<i>levetiracetam TB3D 250 MG, 500 MG</i>	NP	
KEPPRA SOLN PO 100 MG/ML (<i>levetiracetam</i>)	NP	QL(16 ML daily)	LYRICA CAPS (<i>pregabalin</i>)	NP	
KEPPRA TABS 1000 MG (<i>levetiracetam</i>)	NP		LYRICA SOLN (<i>pregabalin</i>)	NP	
KEPPRA TABS 250 MG, 750 MG (<i>levetiracetam</i>)	NP	QL(4 EA daily)	MOTPOLY XR CP24	NP	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
NEURONTIN CAPS (gabapentin)	NP	QL(9 EA daily)	TOPAMAX TABS 200 MG (topiramate)	NP	QL(2 EA daily)
NEURONTIN SOLN (gabapentin)	NP		TOPAMAX TABS 25 MG, 50 MG (topiramate)	NP	QL(6 EA daily)
NEURONTIN TABS 800 MG (gabapentin)	NP	QL(4 EA daily)	topiramate CP24	NP	
NEURONTIN TABS 600 MG (gabapentin)	NP	QL(6 EA daily)	topiramate CPSP 25 MG	P	QL(8 EA daily)
oxcarbazepine SUSP	NP	Brand Preferred	topiramate CPSP 15 MG	P	QL(6 EA daily)
oxcarbazepine TABS	P		topiramate CPSP 50 MG	P	
oxcarbazepine TB24	NP		topiramate CS24	NP	
OXTELLAR XR TB24 (oxcarbazepine)	NP		topiramate SOLN 25 MG/ML	NP	
pregabalin CAPS	P		topiramate TABS 100 MG	P	QL(4 EA daily)
pregabalin SOLN	NP		topiramate TABS 200 MG	P	QL(2 EA daily)
primidone	P		topiramate TABS 25 MG, 50 MG	P	QL(6 EA daily)
QUDEXY XR CS24 (topiramate)	NP		TRILEPTAL SUSP (oxcarbazepine)	P	Brand Preferred
rufinamide SUSP	PA	SP; PA	TRILEPTAL TABS (oxcarbazepine)	NP	
rufinamide SUSP	PA	PA	TROKENDI XR CP24 (topiramate)	NP	
rufinamide TABS	NP	Brand Preferred; SP	VIMPAT SOLN PO 10 MG/ML (lacosamide)	NP	PA
SPRITAM TB3D 250 MG, 500 MG, 750 MG, 1000 MG (levetiracetam)	NP		VIMPAT TABS (lacosamide)	NP	PA
SPRITAM TB3D	NP		ZONISADE SUSP	NP	
SUBVENITE SUSP PO 10 MG/ML	NP		zonisamide CAPS	P	
TEGRETOL SUSP (carbamazepine)	NP		ZTALMY	NP	
TEGRETOL TABS (carbamazepine)	NP		Carbamates		
TEGRETOL-XR TB12 (carbamazepine)	P	Brand Preferred	felbamate SUSP	P	
TOPAMAX SPRINKLE CPSP 15 MG (topiramate)	NP	QL(6 EA daily)	felbamate TABS	P	
TOPAMAX SPRINKLE CPSP 25 MG (topiramate)	NP	QL(8 EA daily)	FELBATOL TABS (felbamate)	NP	
TOPAMAX TABS 100 MG (topiramate)	NP	QL(4 EA daily)	XCOPRI (250 MG DAILY DOSE) TBPk	NP	
			XCOPRI (350 MG DAILY DOSE) TBPk	NP	
			XCOPRI TABS	NP	
			XCOPRI TBPk	NP	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
GABA Modulators			ZARONTIN CAPS <i>(ethosuximide)</i>	NP	
SABRIL PACK <i>(vigabatrin)</i>	PA	Brand Preferred; SP; PA	ZARONTIN SOLN <i>(ethosuximide)</i>	NP	
SABRIL TABS <i>(vigabatrin)</i>	NP	SP; PA	Valproic Acid		
<i>tiagabine hcl</i>	PA	PA	DEPAKOTE ER TB24 500 MG <i>(divalproex sodium)</i>	NP	QL(7 EA daily)
<i>vigabatrin PACK</i>	PA	Brand Preferred; SP; PA	DEPAKOTE ER TB24 250 MG <i>(divalproex sodium)</i>	NP	QL(3 EA daily)
<i>vigabatrin PACK</i>	NP	Brand Preferred; SP	DEPAKOTE SPRINKLES CSDR <i>(divalproex sodium)</i>	NP	QL(8 EA daily)
<i>vigabatrin TABS</i>	NP	SP	DEPAKOTE TBEC 250 MG <i>(divalproex sodium)</i>	NP	QL(3 EA daily)
<i>vigabatrin TABS</i>	PA	SP; PA	DEPAKOTE TBEC 500 MG <i>(divalproex sodium)</i>	NP	QL(7 EA daily)
VIGAFYDE SOLN	NP	SP	DEPAKOTE TBEC 125 MG <i>(divalproex sodium)</i>	NP	QL(2 EA daily)
Hydantoins			<i>divalproex sodium CSDR</i>	P	QL(8 EA daily)
DILANTIN <i>(phenytoin sodium extended)</i>	NP		<i>divalproex sodium TB24 500 MG</i>	P	QL(7 EA daily)
DILANTIN	NP		<i>divalproex sodium TB24 250 MG</i>	P	QL(3 EA daily)
DILANTIN INFATABS CHEW <i>(phenytoin)</i>	NP		<i>divalproex sodium TBEC 250 MG</i>	P	QL(3 EA daily)
DILANTIN-125 SUSP <i>(phenytoin)</i>	NP		<i>divalproex sodium TBEC 500 MG</i>	P	QL(7 EA daily)
DILANTIN SUSP <i>(phenytoin)</i>	NP		<i>divalproex sodium TBEC 125 MG</i>	P	QL(2 EA daily)
<i>phenytoin sodium extended 100 MG, 200 MG, 300 MG</i>	P		<i>valproate sodium SOLN PO 250 MG/5ML, 500 MG/10ML</i>	P	
<i>phenytoin sodium extended 200 MG, 300 MG</i>	NP		<i>valproate sodium SOLN IV 100 MG/ML, 500 MG/5ML</i>	C	PA
<i>phenytoin CHEW</i>	P		<i>valproic acid CAPS</i>	P	
<i>phenytoin SUSP 125 MG/5ML</i>	P		ANTIDEPRESSANTS - Drugs to Treat Depression		
Succinimides			Alpha-2 Receptor Antagonists (Tetracyclics)		
CELONTIN <i>(methsuximide)</i>	P	Brand Preferred	<i>mirtazapine TABS 30 MG</i>	P	QL(1.5 EA daily)
<i>ethosuximide CAPS</i>	P				
<i>ethosuximide SOLN</i>	P				
<i>methsuximide</i>	NP	Brand Preferred			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>mirtazapine</i> TABS 7.5 MG, 45 MG	P	QL(1 EA daily)	WELLBUTRIN SR TB12 100 MG (<i>bupropion hcl</i>)	NP	QL(4 EA daily)
<i>mirtazapine</i> TABS 15 MG	P	QL(3 EA daily)	WELLBUTRIN SR TB12 150 MG (<i>bupropion hcl</i>)	NP	QL(3 EA daily)
<i>mirtazapine</i> TBDP 15 MG	P	QL(3 EA daily)	GABA Receptor Modulator - Neuroactive Steroid		
<i>mirtazapine</i> TBDP 30 MG	P	QL(1.5 EA daily)	ZURZUVAE	NP	SP
<i>mirtazapine</i> TBDP 45 MG	P	QL(1 EA daily)	Monoamine Oxidase Inhibitors (MAOIs)		
REMERON SOLTAB TBDP 15 MG (<i>mirtazapine</i>)	NP	QL(3 EA daily)	EMSAM	NP	
REMERON SOLTAB TBDP 45 MG (<i>mirtazapine</i>)	NP	QL(1 EA daily)	MARPLAN	NP	
REMERON SOLTAB TBDP 30 MG (<i>mirtazapine</i>)	NP	QL(1.5 EA daily)	NARDIL (<i>phenelzine sulfate</i>)	NP	
REMERON TABS 15 MG (<i>mirtazapine</i>)	NP	QL(3 EA daily)	<i>phenelzine sulfate</i>	P	
REMERON TABS 30 MG (<i>mirtazapine</i>)	NP	QL(1.5 EA daily)	<i>tranylcypromine sulfate</i>	NP	
Antidepressant Combinations			Selective Serotonin Reuptake Inhibitors (SSRIs)		
AUVELITY	NP		CELEXA TABS 10 MG (<i>citalopram hydrobromide</i>)	NP	QL(4 EA daily)
Antidepressants - Misc.			CELEXA TABS 20 MG (<i>citalopram hydrobromide</i>)	NP	QL(2 EA daily); AL(At least 7 yrs old)
<i>bupropion hcl</i> TABS	P	QL(3 EA daily)	CELEXA TABS 40 MG (<i>citalopram hydrobromide</i>)	NP	QL(1 EA daily); AL(At least 7 yrs old)
<i>bupropion hcl</i> TB12 200 MG	P	QL(2 EA daily)	CITALOPRAM HYDROBROMIDE CAPS 30 MG (<i>citalopram hydrobromide</i>)	NP	
<i>bupropion hcl</i> TB12 150 MG	P	QL(3 EA daily)	<i>citalopram hydrobromide</i> SOLN	P	
<i>bupropion hcl</i> TB12 100 MG	P	QL(4 EA daily)	<i>citalopram hydrobromide</i> TABS 20 MG	P	QL(2 EA daily); AL(At least 7 yrs old)
<i>bupropion hcl</i> TB24 150 MG	P	QL(3 EA daily)	<i>citalopram hydrobromide</i> TABS 40 MG	P	QL(1 EA daily); AL(At least 7 yrs old)
<i>bupropion hcl</i> TB24 450 MG	NP		<i>citalopram hydrobromide</i> TABS 10 MG	P	QL(4 EA daily)
<i>bupropion hcl</i> TB24 300 MG	P	QL(1 EA daily)	ESCITALOPRAM OXALATE CAPS PO 15 MG	NP	
FORFIVO XL TB24 (<i>bupropion hcl</i>)	NP		<i>escitalopram oxalate</i> SOLN	NP	
WELLBUTRIN SR TB12 200 MG (<i>bupropion hcl</i>)	NP	QL(2 EA daily)			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>escitalopram oxalate TABS 5 MG</i>	P	QL(4 EA daily)	<i>paroxetine hcl TABS 30 MG, 40 MG</i>	P	QL(2 EA daily); AL(At least 7 yrs old)
<i>escitalopram oxalate TABS 10 MG</i>	P	QL(2 EA daily); AL(At least 7 yrs old)	<i>paroxetine hcl TABS 10 MG</i>	P	QL(6 EA daily)
<i>escitalopram oxalate TABS 20 MG</i>	P	QL(1 EA daily); AL(At least 7 yrs old)	<i>paroxetine hcl TB24</i>	NP	QL(1 EA daily); AL(At least 7 yrs old)
<i>fluoxetine hcl CAPS 10 MG, 20 MG</i>	P	QL(4 EA daily)	PAXIL CR TB24 (<i>paroxetine hcl</i>)	NP	QL(1 EA daily); AL(At least 7 yrs old)
<i>fluoxetine hcl CAPS 40 MG</i>	P	QL(2 EA daily); AL(At least 7 yrs old)	PAXIL SUSP (<i>paroxetine hcl</i>)	NP	QL(40 ML daily)
<i>fluoxetine hcl CPDR</i>	NP		PAXIL TABS 20 MG (<i>paroxetine hcl</i>)	NP	QL(3 EA daily)
<i>fluoxetine hcl SOLN</i>	P	QL(120 ML per fill retail)	PAXIL TABS 30 MG, 40 MG (<i>paroxetine hcl</i>)	NP	QL(2 EA daily); AL(At least 7 yrs old)
<i>fluoxetine hcl TABS 60 MG</i>	NP		PAXIL TABS 10 MG (<i>paroxetine hcl</i>)	NP	QL(6 EA daily)
<i>fluoxetine hcl TABS 10 MG</i>	P	QL(1 EA daily); AL(At least 7 yrs old)	PROZAC CAPS 40 MG (<i>fluoxetine hcl</i>)	NP	QL(2 EA daily); AL(At least 7 yrs old)
<i>fluoxetine hcl TABS 20 MG</i>	P	QL(4 EA daily)	PROZAC CAPS 10 MG, 20 MG (<i>fluoxetine hcl</i>)	NP	QL(4 EA daily)
FLUOXETINE HCL TABS (<i>fluoxetine hcl</i>)	NP		<i>sertraline hcl CAPS 150 MG, 200 MG</i>	NP	
<i>fluvoxamine maleate CP24</i>	NP		SERTRALINE HCL CAPS 150 MG, 200 MG (<i>sertraline hcl</i>)	NP	
<i>fluvoxamine maleate TABS 100 MG</i>	P	QL(3 EA daily)	<i>sertraline hcl CONC</i>	NP	QL(186 ML per 31 day(s) retail)
<i>fluvoxamine maleate TABS 25 MG, 50 MG</i>	P	QL(2 EA daily); AL(At least 7 yrs old)	<i>sertraline hcl TABS 100 MG</i>	P	QL(2 EA daily); AL(At least 7 yrs old)
LEXAPRO TABS 20 MG (<i>escitalopram oxalate</i>)	NP	QL(1 EA daily); AL(At least 7 yrs old)	<i>sertraline hcl TABS 25 MG, 50 MG</i>	P	QL(4 EA daily)
LEXAPRO TABS 5 MG (<i>escitalopram oxalate</i>)	NP	QL(4 EA daily)	ZOLOFT CONC (<i>sertraline hcl</i>)	NP	QL(186 ML per 31 day(s) retail)
LEXAPRO TABS 10 MG (<i>escitalopram oxalate</i>)	NP	QL(2 EA daily); AL(At least 7 yrs old)	ZOLOFT TABS 25 MG, 50 MG (<i>sertraline hcl</i>)	NP	QL(4 EA daily)
<i>paroxetine hcl SUSP</i>	NP	QL(40 ML daily)	ZOLOFT TABS 100 MG (<i>sertraline hcl</i>)	NP	QL(2 EA daily); AL(At least 7 yrs old)
<i>paroxetine hcl TABS 20 MG</i>	P	QL(3 EA daily)			

Serotonin Modulators

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EXXUA TITRATION PACK TB24 PO 18.2 MG	NP	AL(At least 18 yrs old)	FETZIMA CP24	NP	
EXXUA TB24 PO 18.2 MG, 36.3 MG, 54.5 MG, 72.6 MG	NP	AL(At least 18 yrs old)	PRISTIQ 100 MG (desvenlafaxine succinate)	NP	QL(4 EA daily)
nefazodone hcl	P		PRISTIQ 25 MG, 50 MG (desvenlafaxine succinate)	NP	QL(1 EA daily)
RALDESY SOLN PO 10 MG/ML	NP		VENLAFAXINE BESYLATE ER	NP	
trazodone hcl TABS 300 MG	P	QL(2 EA daily)	venlafaxine hcl CP24 37.5 MG	P	QL(4 EA daily)
trazodone hcl TABS 50 MG, 100 MG, 150 MG	P		venlafaxine hcl CP24 75 MG	P	QL(5 EA daily)
TRINTELLIX	NP	QL(1 EA daily); AL(At least 18 yrs old)	venlafaxine hcl CP24 150 MG	P	QL(2 EA daily)
VIIBRYD TABS (vilazodone hcl)	NP	QL(1 EA daily)	venlafaxine hcl TABS	P	
vilazodone hcl TABS	P	QL(1 EA daily)	venlafaxine hcl TB24 37.5 MG, 75 MG, 225 MG	NP	QL(1 EA daily); AL(At least 7 yrs old)
Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)			venlafaxine hcl TB24 150 MG	NP	QL(1 EA daily)
CYMBALTA CPEP (duloxetine hcl)	NP	QL(1 EA daily); AL(At least 7 yrs old)	Tricyclic Agents		
DESVENLAFAXINE ER	NP		amitriptyline hcl TABS	C	
desvenlafaxine succinate 25 MG, 50 MG	P	QL(1 EA daily)	amoxapine	C	
desvenlafaxine succinate 100 MG	P	QL(4 EA daily)	clomipramine hcl 75 MG	C	
DRIZALMA SPRINKLE CSDR	NP		desipramine hcl TABS 25 MG	C	QL(2 EA daily)
duloxetine hcl CPEP 40 MG	NP		desipramine hcl TABS 10 MG, 50 MG, 75 MG, 100 MG, 150 MG	C	
duloxetine hcl CPEP 20 MG, 30 MG, 60 MG	P	QL(1 EA daily); AL(At least 7 yrs old)	doxepin hcl CAPS	C	
EFFEXOR XR CP24 75 MG (venlafaxine hcl)	NP	QL(5 EA daily)	doxepin hcl CONC	C	
EFFEXOR XR CP24 37.5 MG (venlafaxine hcl)	NP	QL(4 EA daily)	imipramine hcl TABS	C	
EFFEXOR XR CP24 150 MG (venlafaxine hcl)	NP	QL(2 EA daily)	nortriptyline hcl CAPS	C	
FETZIMA TITRATION C4PK	NP		nortriptyline hcl SOLN	C	QL(20 ML daily)
ANTIDIABETICS - Drugs to Regulate Blood Sugar					
Alpha-Glucosidase Inhibitors					
acarbose				P	
miglitol				NP	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Antidiabetic - Amylin Analogs			SITAGLIPTIN BASE-METFORMIN HCL TABS	NP	
SYMLINPEN 120 SOPN	P	QL(11 ML per 31 day(s) retail; 11 ML per 31 days mail); ST	SOLIQUA	NP	QL(18 ML per 31 day(s) retail)
SYMLINPEN 60 SOPN	P	QL(6 ML per 31 day(s) retail; 6 ML per 31 days mail); ST	STEGLUJAN	NP	
Antidiabetic Combinations			SYNJARDY XR TB24	NP	
ACTOPLUS MET TABS 850 MG-15 MG (<i>pioglitazone hcl-metformin hcl</i>)	NP	QL(2 EA daily)	SYNJARDY TABS	NP	
<i>alogliptin-metformin hcl</i>	NP	QL(2 EA daily)	TRIJARDY XR	NP	
<i>alogliptin-pioglitazone 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG</i>	NP	QL(1 EA daily)	XIGDUO XR 1000 MG-2.5 MG, 500 MG-10 MG, 500 MG-5 MG	P	ST
<i>dapagliflozin propanediol-metformin hcl</i>	NP	Brand Preferred	XIGDUO XR (<i>dapagliflozin propanediol-metformin hcl</i>)	P	Brand Preferred
DUETACT (<i>pioglitazone hcl-glimepiride</i>)	NP		XULTOPHY	NP	
<i>glipizide-metformin hcl</i>	NP		ZITUVIMET XR TB24	NP	
<i>glyburide-metformin</i>	P		ZITUVIMET TABS	NP	
GLYXAMBI	NP		Biguanides		
INVOKAMET XR TB24	NP		<i>metformin hcl SOLN</i>	NP	
INVOKAMET TABS	P	ST	<i>metformin hcl TABS 1000 MG</i>	P	QL(2 EA daily); MP
JANUMET XR TB24	NP		<i>metformin hcl TABS 625 MG, 750 MG</i>	NP	
JANUMET TABS	P	ST	<i>metformin hcl TABS 850 MG</i>	P	QL(3 EA daily); MP
JENTADUETO XR TB24	NP		<i>metformin hcl TABS 500 MG</i>	P	QL(5 EA daily); MP
JENTADUETO TABS	P	ST	<i>metformin hcl TB24 500 MG</i>	P	QL(4 EA daily)
<i>pioglitazone hcl-glimepiride</i>	NP		<i>metformin hcl TB24 500 MG, 1000 MG</i>	NP	MP
<i>pioglitazone hcl-metformin hcl TABS</i>	NP	QL(2 EA daily)	<i>metformin hcl TB24 750 MG</i>	P	QL(3 EA daily)
QTERN	NP		RIOMET SOLN (<i>metformin hcl</i>)	NP	
<i>saxagliptin-metformin hcl</i>	NP	QL(1 EA daily)	Diabetic Other		
SEGLUROMET	NP	QL(2 EA daily)	BAQSIMI ONE PACK POWD	P	
SITAGLIPT BASE-METFORM HCL ER TB24	NP		BAQSIMI TWO PACK POWD	P	

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Drug Name	Drug Tier	Requirements/Limits
<i>dextrose (diabetic use) CHEW 4 GM</i>	C	Limit 50 ea per 31 days retail; QL(50 EA per 31 day(s) retail)
<i>diazoxide</i>	NP	Brand Preferred
GLUCAGON EMERGENCY	NP	
<i>glucagon SOLR IJ 1 MG</i>	P	QL(4 EA per 365 day(s) retail)
GVOKE HYPOPEN 1-PACK SOAJ	P	
GVOKE HYPOPEN 2-PACK SOAJ	P	
GVOKE KIT SOLN	NP	
GVOKE PFS SOSY 1 MG/0.2ML	NP	
PROGLYCEM (<i>diazoxide</i>)	P	Brand Preferred
TRUEPLUS GLUCOSE ON THE GO CHEW	C	Limit 50 ea per 31 days retail; QL(50 EA per 31 day(s) retail)
TRUEPLUS GLUCOSE CHEW	C	Limit 50 ea per 31 days retail; QL(50 EA per 31 day(s) retail)
ZEGALOGUE SOAJ	P	
ZEGALOGUE SOSY	P	
Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
<i>alogliptin benzoate</i>	NP	QL(1 EA daily)
BRYNOVIN SOLN PO 25 MG/ML	NP	
JANUVIA	P	ST
<i>saxagliptin hcl</i>	NP	QL(1 EA daily)
SITAGLIPTIN	NP	
TRADJENTA	P	ST
ZITUVIO	NP	
Incretin Mimetic Agents		
BYDUREON BCISE AUIJ	NP	QL(3.4 ML per 28 day(s) retail)

Drug Name	Drug Tier	Requirements/Limits
<i>exenatide SOPN 10 MCG/0.04ML</i>	NP	QL(2.4 ML per 31 day(s) retail); AL(At least 18 yrs old)
<i>exenatide SOPN 5 MCG/0.02ML</i>	NP	QL(1.2 ML per 31 day(s) retail); AL(At least 18 yrs old)
<i>liraglutide</i>	NP	Brand Preferred; QL(12 ML per 28 day(s) retail); AL(At least 10 yrs old)
MOUNJARO	NP	
OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN	PA	PA
OZEMPIC (1 MG/DOSE) SOPN 4 MG/3ML	PA	PA
OZEMPIC (2 MG/DOSE) SOPN	PA	PA
TRULICITY	PA	QL(2 ML per 28 day(s) retail); PA
VICTOZA (<i>liraglutide</i>)	PA	Brand Preferred; QL(12 ML per 28 day(s) retail); AL(At least 10 yrs old); PA
Insulin		
ADMELOG SOLOSTAR SOPN	NP	QL(30 ML per 31 day(s) retail; 30 ML per 31 days mail)
ADMELOG SOLN IJ	NP	QL(30 ML per 30 day(s) retail; 30 ML per 30 days mail)
AFREZZA POWD	NP	
APIDRA SOLOSTAR SOPN	P	
APIDRA SOLN	NP	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
BASAGLAR KWIKPEN SOPN	NP		HUMALOG SOLN IJ	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 30 day(s) retail; 30 ML per 30 days mail)
BASAGLAR TEMPO PEN SOPN	NP				
FIASP FLEXTOUCH SOPN	NP				
FIASP PENFILL SOCT	NP				
FIASP SOLN	NP		HUMULIN 70/30 KWIKPEN SUPN	P	QL(1 ML daily)
HUMALOG JUNIOR KWIKPEN SOPN	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)	HUMULIN 70/30 SUSP	P	Limit 40mls per month
HUMALOG KWIKPEN SOPN 200 UNIT/ML	P	USE BRAND NAME or Authorized Generic	HUMULIN N KWIKPEN SUPN	P	QL(1 ML daily)
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 N SUSP	P	Limit 40mls per month
HUMALOG MIX 50/50 KWIKPEN SUPN	P	USE BRAND NAME or Authorized Generic	HUMULIN R U-500 (CONCENTRATED) SOLN 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 U-500 KWIKPEN SOPN SC	P	
HUMALOG MIX 75/25 SUSP	P	USE BRAND NAME or Authorized Generic	HUMULIN R SOLN IJ	P	Limit 40mls per month
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 SOLN IJ	P	USE BRAND NAME or Authorized Generic; QL(30 ML per 31 day(s) retail)
			INSULIN DEGLUDEC FLEXTOUCH SOPN 200 UNIT/ML	NP	QL(0.9 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)	MERILOG 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)	MERILOG 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 200 UNIT/ML	P	QL(0.9 ML daily)
NOVOLOG MIX 70/30 RELION SUSP	P	USE BRAND NAME or Authorized Generic	TRESIBA FLEXTOUCH SOPN 100 UNIT/ML	P	QL(1.5 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 1 MG, 2 MG</i>	P	QL(4 EA daily); MP
			<i>glimepiride 4 MG</i>	P	QL(2 EA daily); MP
			<i>glimepiride 3 MG</i>	P	MP
			<i>glipizide TABS</i>	P	MP
			<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	MP
			ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea		

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Drug Name	Drug Tier	Requirements/Limits
Antidiarrheal/Probiotic Agents - Misc.		
<i>bismuth subsalicylate CHEW 262 MG</i>	C	
<i>bismuth subsalicylate SUSP 525 MG/15ML, 1050 MG/30ML</i>	C	
Antiperistaltic Agents		
<i>diphenoxylate w/ atropine LIQD</i>	C	
<i>diphenoxylate w/ atropine TABS</i>	C	
<i>loperamide hcl CAPS</i>	C	QL(8 EA daily); RX/OTC
<i>loperamide hcl TABS</i>	C	QL(8 EA daily)
ANTIDOTES AND SPECIFIC ANTAGONISTS		
Antidotes - Chelating Agents		
CHEMET	C	
<i>deferasirox PACK</i>	C	SP; PA
<i>deferasirox TABS</i>	C	SP; PA
<i>deferasirox TBSO</i>	C	SP; PA
Opioid Antagonists		
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	
ANTIEMETICS - Drugs to Treat Nausea and Vomiting		
5-HT3 Receptor Antagonists		
<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 4 MG, 8 MG</i>	P	QL(20 EA per 31 day(s) retail; 20 EA per 31 days mail)
<i>ondansetron TBDP 16 MG</i>	P	
SANCUSO PTCH	NP	
Antiemetics - Anticholinergic		
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	
ANTIFUNGALS - Drugs to Treat Fungal Infections		
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	
DIFLUCAN SUSR 40 MG/ML (fluconazole)	NP	QL(70 ML per fill retail)
fluconazole SUSR	P	QL(70 ML per fill retail)

Drug Name	Drug Tier	Requirements/Limits
fluconazole TABS 150 MG	P	QL(2 EA per fill retail)
fluconazole TABS 100 MG, 200 MG	P	
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	
ANTIHISTAMINES - Drugs to Treat Allergies		
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		
cetirizine hcl CHEW	C	QL(1 EA daily)

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Drug Name	Drug Tier	Requirements/Limits
<i>cetirizine hcl SOLN PO</i>	P	QL(300 ML per fill retail); AL(Up to 12 yrs old); RX/OTC
<i>cetirizine hcl TABS</i>	P	QL(1 EA daily)
CLARINEX TABS (<i>desloratadine</i>)	NP	
DESLORATADINE SOLN PO 0.5 MG/ML	NP	
<i>desloratadine TABS</i>	NP	
<i>desloratadine TBDP</i>	NP	AL(Up to 12 yrs old)
<i>fexofenadine hcl TABS 180 MG</i>	C	QL(1 EA daily)
<i>fexofenadine hcl TABS 60 MG</i>	C	QL(2 EA daily)
<i>levocetirizine dihydrochloride SOLN</i>	NP	AL(Up to 12 yrs old); RX/OTC
<i>levocetirizine dihydrochloride TABS</i>	P	QL(1 EA daily); RX/OTC
<i>loratadine CHEW</i>	P	
<i>loratadine TABS</i>	P	QL(1 EA daily)
<i>loratadine TBDP 10 MG</i>	P	QL(1 EA daily); AL(Up to 12 yrs old)
Antihistamines - Phenothiazines		
<i>promethazine hcl SOLN PO 6.25 MG/5ML, 12.5 MG/10ML</i>	P	QL(240 ML per fill retail); AL(At least 2 yrs old)
<i>promethazine hcl SUPP</i>	P	QL(12 EA per fill retail); AL(At least 2 yrs old)
<i>promethazine hcl TABS</i>	P	AL(At least 2 yrs old)
Antihistamines - Piperidines		
<i>cyproheptadine hcl SYRP</i>	C	
<i>cyproheptadine hcl TABS</i>	C	
ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol		
Antihyperlipidemics - Combinations		
<i>ezetimibe-simvastatin</i>	NP	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/Limits
VYTORIN (<i>ezetimibe-simvastatin</i>)	NP	QL(1 EA daily)
Antihyperlipidemics - Misc.		
<i>icosapent ethyl</i>	P	
<i>omega-3-acid ethyl esters</i>	P	
Bile Acid Sequestrants		
<i>cholestyramine light PACK</i>	NP	
<i>cholestyramine light PACK</i>	P	
<i>cholestyramine light POWD</i>	P	
<i>cholestyramine light POWD</i>	NP	
<i>cholestyramine PACK</i>	P	
<i>cholestyramine POWD</i>	P	
<i>colesevelam hcl PACK</i>	NP	
<i>colesevelam hcl TABS</i>	NP	
COLESTID GRAN (<i>colestipol hcl</i>)	NP	
COLESTID TABS (<i>colestipol hcl</i>)	NP	
<i>colestipol hcl GRAN</i>	P	
<i>colestipol hcl PACK</i>	P	
<i>colestipol hcl TABS</i>	P	
QUESTRAN LIGHT POWD (<i>cholestyramine light</i>)	NP	
QUESTRAN PACK (<i>cholestyramine</i>)	NP	
QUESTRAN POWD (<i>cholestyramine</i>)	NP	
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 43 MG, 130 MG</i>	NP	
<i>fenofibrate micronized 67 MG</i>	NP	QL(2 EA daily)
<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 48 MG, 145 MG</i>	P	
<i>fenofibrate TABS 54 MG</i>	NP	QL(3 EA daily)
<i>fenofibrate TABS 160 MG</i>	NP	QL(1 EA daily)
<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	MP
<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	

Drug Name	Drug Tier	Requirements/Limits
<i>lovastatin TABS 40 MG</i>	P	QL(2 EA daily); MP
<i>lovastatin TABS 10 MG, 20 MG</i>	P	QL(1 EA daily); MP
<i>pitavastatin calcium</i>	NP	
<i>pravastatin sodium</i>	P	QL(1 EA daily); MP
<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	
Proprotein Convertase Subtilisin/Kexin Type 9 Inhibitors		
PRALUENT SOAJ	NP	QL(2 ML per 28 day(s) retail; 2 ML per 28 days mail); AL(At least 8 yrs old); SP
REPATHA PUSHTRONEX SYSTEM SOCT	PA	QL(7 ML per 28 day(s) retail; 7 ML per 28 days mail); AL(At least 10 yrs old); SP; PA
REPATHA SURECLICK SOAJ	PA	QL(2 ML per 28 day(s) retail; 2 ML per 28 days mail); AL(At least 10 yrs old); SP; PA
REPATHA SOSY	PA	QL(2 ML per 28 day(s) retail; 2 ML per 28 days mail); AL(At least 10 yrs old); SP; PA

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Drug Name	Drug Tier	Requirements/Limits
ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure		
ACE Inhibitors		
ACCUPRIL (<i>quinapril hcl</i>)	NP	
ALTACE CAPS 1.25 MG, 5 MG, 10 MG (<i>ramipril</i>)	NP	QL(2 EA daily)
<i>benazepril hcl 40 MG</i>	P	QL(2 EA daily); MP
<i>benazepril hcl 5 MG, 10 MG, 20 MG</i>	P	QL(1 EA daily); MP
<i>captopril</i>	P	QL(3 EA daily); MP
<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	MP
LOTENSIN 10 MG, 20 MG (<i>benazepril hcl</i>)	NP	QL(1 EA daily)
LOTENSIN 40 MG (<i>benazepril hcl</i>)	NP	QL(2 EA daily)
<i>moexipril hcl</i>	NP	
<i>perindopril erbumine</i>	NP	
QBRELIS SOLN	NP	
<i>quinapril hcl</i>	NP	
<i>ramipril CAPS</i>	P	QL(2 EA daily)
<i>trandolapril 1 MG, 2 MG</i>	NP	QL(1 EA daily)
<i>trandolapril 4 MG</i>	NP	QL(2 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)

Drug Name	Drug Tier	Requirements/Limits
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); MP
MICARDIS (<i>telmisartan</i>)	NP	
<i>olmesartan medoxomil</i>	P	QL(1 EA daily); MP
<i>telmisartan</i>	P	MP
<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>methyldopa TABS</i>	P	
<i>methyldopa TABS 500 MG</i>	C	
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)

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ACCURETIC 12.5 MG-20 MG (<i>quinapril-hydrochlorothiazide</i>)	NP	QL(4 EA daily)	<i>captopril & hydrochlorothiazide 15 MG-25 MG, 15 MG-50 MG, 25 MG-25 MG</i>	NP	QL(2 EA daily); MP
<i>amlodipine besylate-benazepril hcl</i>	P	QL(1 EA daily)	<i>captopril & hydrochlorothiazide 25 MG-50 MG</i>	NP	QL(3 EA daily); MP
<i>amlodipine besylate-olmesartan medoxomil</i>	NP		DIOVAN HCT (<i>valsartan-hydrochlorothiazide</i>)	NP	QL(1 EA daily)
<i>amlodipine besylate-olmesartan medoxomil</i>	NP	ST	EDARBYCLOR	NP	
<i>amlodipine besylate-valsartan 10 MG-160 MG, 10 MG-320 MG, 5 MG-320 MG</i>	P		<i>enalapril maleate & hydrochlorothiazide</i>	P	QL(2 EA daily); MP
<i>amlodipine besylate-valsartan 5 MG-160 MG</i>	P		EXFORGE (<i>amlodipine besylate-valsartan</i>)	NP	
<i>amlodipine-valsartan-hydrochlorothiazide</i>	P		EXFORGE HCT (<i>amlodipine-valsartan-hydrochlorothiazide</i>)	NP	
ATACAND HCT (<i>candesartan cilexetil-hydrochlorothiazide</i>)	NP		<i>fosinopril sodium & hydrochlorothiazide</i>	NP	QL(1 EA daily)
<i>atenolol & chlorthalidone</i>	P	QL(2 EA daily); MP	HYZAAR (<i>losartan potassium & hydrochlorothiazide</i>)	NP	QL(1 EA daily)
AVALIDE (<i>irbesartan-hydrochlorothiazide</i>)	NP	QL(1 EA daily)	<i>irbesartan-hydrochlorothiazide</i>	P	QL(1 EA daily)
AZOR (<i>amlodipine besylate-olmesartan medoxomil</i>)	NP	ST	<i>lisinopril & hydrochlorothiazide</i>	P	MP
<i>benazepril & hydrochlorothiazide</i>	P	QL(1 EA daily); MP	<i>losartan potassium & hydrochlorothiazide</i>	P	QL(1 EA daily); MP
BENICAR HCT (<i>olmesartan medoxomil-hydrochlorothiazide</i>)	NP	QL(1 EA daily)	LOTENSIN HCT 12.5 MG-10 MG, 12.5 MG-20 MG, 25 MG-20 MG (<i>benazepril & hydrochlorothiazide</i>)	NP	QL(1 EA daily)
<i>bisoprolol & hydrochlorothiazide 6.25 MG-10 MG, 6.25 MG-5 MG</i>	P	QL(1 EA daily); MP	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 & hydrochlorothiazide 6.25 MG-2.5 MG</i>	P	MP	<i>metoprolol & hydrochlorothiazide TABS 50 MG-100 MG</i>	NP	QL(1 EA daily)
<i>candesartan cilexetil-hydrochlorothiazide</i>	NP		<i>metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 25 MG-50 MG</i>	NP	QL(2 EA daily)

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Drug Name	Drug Tier	Requirements/Limits
MICARDIS HCT (telmisartan-hydrochlorothiazide)	NP	QL(1 EA daily)
olmesartan medoxomil-amlodipine-hydrochlorothiazide	NP	ST
olmesartan medoxomil-amlodipine-hydrochlorothiazide	NP	
olmesartan medoxomil-hydrochlorothiazide	P	QL(1 EA daily)
quinapril-hydrochlorothiazide 12.5 MG-20 MG	NP	QL(4 EA daily)
quinapril-hydrochlorothiazide 25 MG-20 MG	NP	QL(2 EA daily)
quinapril-hydrochlorothiazide 12.5 MG-10 MG	NP	QL(3 EA daily)
telmisartan-amlodipine	NP	ST
telmisartan-hydrochlorothiazide	P	QL(1 EA daily)
TENORETIC 100 (atenolol & chlorthalidone)	NP	QL(2 EA daily)
TENORETIC 50 (atenolol & chlorthalidone)	NP	QL(2 EA daily)
trandolapril-verapamil hcl	P	MP
TRIBENZOR (olmesartan medoxomil-amlodipine-hydrochlorothiazide)	NP	ST
valsartan-hydrochlorothiazide	P	QL(1 EA daily)
ZESTORETIC (lisinopril & hydrochlorothiazide)	NP	
Direct Renin Inhibitors		
aliskiren fumarate	NP	Brand Preferred; ST
TEKTURNA (aliskiren fumarate)	P	Brand Preferred; ST
Vasodilators		
hydralazine hcl TABS	C	

Drug Name	Drug Tier	Requirements/Limits
minoxidil 10 MG	C	QL(10 EA daily)
minoxidil 2.5 MG	C	QL(3 EA daily)
ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections		
Anti-infective Agents - Misc.		
LIKMEZ SUSP	NP	
metronidazole CAPS	P	
metronidazole TABS	P	
tinidazole	NP	ST
trimethoprim TABS	C	
Anti-infective Misc. - Combinations		
methenamine-hyosc-methylene blue-sod phospheryl sal TABS 81.6 MG	C	
sulfamethoxazole-trimethoprim SUSP	C	
sulfamethoxazole-trimethoprim TABS	C	
Antiprotozoal Agents		
nitazoxanide TABS	NP	ST
Glycopeptides		
FIRVANQ SOLR PO (vancomycin hcl)	NP	QL(300 ML per fill retail; 300 per fill mail); ST
VANCOGIN CAPS 250 MG (vancomycin hcl)	NP	QL(8 EA daily); ST
VANCOGIN CAPS 125 MG (vancomycin hcl)	NP	QL(4 EA daily); ST
vancomycin hcl CAPS 250 MG	P	QL(8 EA daily); ST
vancomycin hcl CAPS 125 MG	P	QL(4 EA daily)
vancomycin hcl CAPS 250 MG	P	QL(8 EA daily)
vancomycin hcl CAPS 125 MG	P	QL(4 EA daily); ST
vancomycin hcl SOLR IV 500 MG	C	QL(14 EA per 31 day(s) retail)

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Drug Name	Drug Tier	Requirements/Limits
<i>vancomycin hcl SOLR IV 1 GM</i>	C	QL(14 EA per fill retail)
<i>vancomycin hcl SOLR PO 25 MG/ML, 50 MG/ML, 250 MG/5ML</i>	P	QL(300 ML per fill retail; 300 per fill mail); ST
VANCOMYCIN HCL SOLR IV 1 GM	C	QL(14 EA per fill retail)
VANCOMYCIN HCL SOLR IV 500 MG	C	QL(14 EA per 31 day(s) retail)
Leprostatics		
<i>dapsone</i>	C	
Lincosamides		
<i>clindamycin hcl 150 MG, 300 MG</i>	C	
<i>clindamycin palmitate hydrochloride</i>	C	QL(300 ML per fill retail)
Monobactams		
CAYSTON	NP	SP
Oxazolidinones		
SIVEXTRO TABS	C	QL(6 EA per fill retail); PA
Penems		
ORLYNVAH TABS PO	C	SP; PA
Urinary Anti-infectives		
BLUJEP A TABS PO 750 MG	C	PA
<i>methenamine mandelate</i>	C	
<i>nitrofurantoin</i>	C	QL(40 ML daily)
<i>nitrofurantoin macrocrystal 50 MG, 100 MG</i>	C	
<i>nitrofurantoin monohydrate macro</i>	C	
ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)		
Antimalarial Combinations		

Drug Name	Drug Tier	Requirements/Limits
COARTEM	C	QL(24 EA per fill retail)
Antimalarials		
<i>chloroquine phosphate TABS 250 MG</i>	C	
<i>chloroquine phosphate TABS 500 MG</i>	C	QL(1 EA daily)
<i>hydroxychloroquine sulfate 100 MG, 200 MG</i>	C	
KRINTAFEL	C	QL(0.67 EA daily)
<i>mefloquine hcl</i>	C	
<i>primaquine phosphate TABS</i>	C	
SOVUNA 200 MG	C	
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
Antimyasthenic/Cholinergic Agents		
<i>pyridostigmine bromide TABS 60 MG</i>	C	
<i>pyridostigmine bromide TBCR</i>	C	
ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)		
Antimycobacterial Agents		
<i>ethambutol hcl TABS</i>	C	
<i>isoniazid SYRP</i>	C	
<i>isoniazid TABS</i>	C	
<i>pyrazinamide</i>	C	
<i>rifabutin</i>	C	
<i>rifampin CAPS</i>	C	
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer		
Antimetabolites		
JYLAMVO SOLN PO	NP	SP
<i>mercaptopurine SUSP 2000 MG/100ML</i>	C	
<i>mercaptopurine TABS</i>	C	

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Drug Name	Drug Tier	Requirements/Limits
<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	
<i>megestrol acetate SUSP</i>	P	
<i>megestrol acetate TABS</i>	C	
<i>tamoxifen citrate TABS</i>	C	
<i>toremifene citrate</i>	C	PA
Antineoplastic Combinations		
PHESGO	C	SP; PA
Antineoplastic Enzyme Inhibitors		

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

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Drug Name	Drug Tier	Requirements/Limits
<i>apomorphine hydrochloride SOCT</i>	NP	SP
<i>bromocriptine mesylate CAPS</i>	P	
<i>bromocriptine mesylate TABS 2.5 MG</i>	P	
<i>carbidopa-levodopa CPCR</i>	NP	
<i>carbidopa-levodopa-entacapone</i>	NP	
<i>carbidopa-levodopa TABS</i>	P	
<i>carbidopa-levodopa TABS 100 MG-25 MG</i>	C	
<i>carbidopa-levodopa TBCR</i>	P	
<i>carbidopa-levodopa TBDP</i>	P	
CREXONT CPCR	NP	
DHIVY TABS	NP	
DUOPA SUSP	NP	
GOCOVRI CP24	NP	SP
INBRIJA CAPS	NP	
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 0.5 MG, 1 MG, 2 MG, 5 MG</i>	P	QL(3 EA daily)
<i>ropinirole hydrochloride TABS 0.25 MG, 3 MG, 4 MG</i>	P	QL(6 EA daily)
<i>ropinirole hydrochloride TB24</i>	NP	
RYTARY CPCR	NP	

Drug Name	Drug Tier	Requirements/Limits
SINEMET TABS 100 MG-10 MG, 100 MG-25 MG (<i>carbidopa-levodopa</i>)	NP	
Antiparkinson Monoamine Oxidase Inhibitors		
AZILECT (<i>rasagiline mesylate</i>)	NP	
<i>rasagiline mesylate</i>	NP	
<i>selegiline hcl CAPS</i>	P	
<i>selegiline hcl TABS</i>	P	
XADAGO	NP	
ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders		
Antimanic Agents		
<i>lithium</i>	C	QL(10 ML daily)
<i>lithium carbonate CAPS</i>	C	
<i>lithium carbonate TABS</i>	C	
<i>lithium carbonate TBCR</i>	C	
Antipsychotics - Misc.		
CAPLYTA	NP	AL(At least 18 yrs old); ST
EQUETRO	NP	
GEODON (<i>ziprasidone hcl</i>)	NP	QL(2 EA daily); AL(At least 18 yrs old)
LATUDA (<i>lurasidone hcl</i>)	NP	AL(At least 10 yrs old)
<i>lurasidone hcl</i>	P	AL(At least 10 yrs old)
<i>lurasidone hcl</i>	P	AL(At least 10 yrs old)
NUPLAZID CAPS	NP	QL(1 EA daily); AL(At least 18 yrs old); ST
NUPLAZID TABS 10 MG	NP	QL(1 EA daily); AL(At least 18 yrs old); ST
VRAYLAR CAPS 0.5 MG, 0.75 MG	P	
VRAYLAR CAPS	P	AL(At least 18 yrs old)

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>ziprasidone hcl</i>	P	QL(2 EA daily); AL(At least 18 yrs old)	INVEGA SUSTENNA 78 MG/0.5ML	P	QL(0.5 ML per 28 day(s) retail); AL(At least 18 yrs old); SP
<i>ziprasidone mesylate</i>	NP	AL(At least 18 yrs old); ST			
Benzisoxazoles			INVEGA SUSTENNA 39 MG/0.25ML	P	QL(0.25 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 156 MG/ML	NP	QL(2 ML per 28 day(s) retail); AL(At least 18 yrs old); SP	INVEGA SUSTENNA 117 MG/0.75ML	P	QL(1.5 ML per 28 day(s) retail); AL(At least 18 yrs old); SP
ERZOFRI 117 MG/0.75ML	NP	QL(1.5 ML per 28 day(s) retail); AL(At least 18 yrs old); SP			
ERZOFRI 39 MG/0.25ML	NP	QL(0.25 ML per 28 day(s) retail); AL(At least 18 yrs old); SP	INVEGA SUSTENNA 156 MG/ML	P	QL(2 ML per 28 day(s) retail); AL(At least 18 yrs old); SP
ERZOFRI 234 MG/1.5ML	NP	QL(3 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	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
FANAPT	NP	AL(At least 18 yrs old); ST			
FANAPT TITRATION PACK A	NP	AL(At least 18 yrs old); ST	INVEGA TRINZA 819 MG/2.63ML	P	QL(2.7 ML per fill retail); 1 max fill(s) per 84 day(s) retail; AL(At least 18 yrs old); SP
FANAPT TITRATION PACK B	NP				
FANAPT TITRATION PACK C	NP		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
INVEGA 3 MG, 6 MG, 9 MG (<i>paliperidone</i>)	NP	AL(At least 12 yrs old); ST			
INVEGA HAFYERA	P	AL(At least 18 yrs old); SP	<i>paliperidone</i>	NP	AL(At least 12 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>paliperidone</i>	NP	AL(At least 12 yrs old); ST

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PERSERIS PRSY	P	QL(1 EA per 28 day(s) retail); AL(At least 18 yrs old); SP	<i>haloperidol decanoate</i>	C	
RISPERDAL CONSTA (<i>risperidone microspheres</i>)	P	2 max fill(s) per 28 day(s) retail; AL(At least 18 yrs old); SP	<i>haloperidol lactate CONC</i>	C	
RISPERDAL SOLN (<i>risperidone</i>)	NP	QL(4 ML daily); AL(At least 7 yrs old); ST	<i>haloperidol TABS 0.5 MG, 1 MG, 2 MG, 5 MG, 10 MG</i>	C	QL(3 EA daily)
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>haloperidol TABS 20 MG</i>	C	
<i>risperidone microspheres</i>	NP	Brand Preferred; 2 max fill(s) per 28 day(s) retail; AL(At least 18 yrs old)	Dibenzapines		
<i>risperidone microspheres</i>	NP	Brand Preferred; 2 max fill(s) per 28 day(s) retail; AL(At least 18 yrs old); SP	ADASUVE	NP	AL(At least 18 yrs old); ST
<i>risperidone SOLN</i>	P	QL(4 ML daily); AL(At least 7 yrs old); ST	<i>asenapine maleate</i>	P	AL(At least 10 yrs old)
<i>risperidone SOLN</i>	P	QL(4 ML daily); AL(At least 7 yrs old)	<i>clozapine TABS 100 MG</i>	P	QL(9 EA daily); AL(At least 18 yrs old)
<i>risperidone TABS 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG</i>	P	QL(4 EA daily); AL(At least 7 yrs old)	<i>clozapine TABS 200 MG</i>	P	QL(4 EA daily); AL(At least 18 yrs old)
<i>risperidone TABS</i>	P	QL(4 EA daily); AL(At least 7 yrs old)	<i>clozapine TABS 25 MG, 50 MG</i>	P	QL(3 EA daily); AL(At least 18 yrs old)
<i>risperidone TABS 0.25 MG</i>	P	QL(4 EA daily); AL(At least 7 yrs old); ST	<i>clozapine TBDP 150 MG</i>	NP	QL(6 EA daily); AL(At least 18 yrs old); ST
<i>risperidone TBDP</i>	P	QL(2 EA daily); AL(At least 7 yrs old)	<i>clozapine TBDP 100 MG</i>	NP	QL(9 EA daily); AL(At least 18 yrs old); ST
RYKINDO SRER	NP	AL(At least 18 yrs old); SP	<i>clozapine TBDP 200 MG</i>	NP	QL(4 EA daily); AL(At least 18 yrs old)
UZEDY SUSY	P	AL(At least 18 yrs old); SP	<i>clozapine TBDP 100 MG</i>	NP	QL(9 EA daily); AL(At least 18 yrs old)
Butyrophenones			<i>clozapine TBDP 12.5 MG, 25 MG</i>	NP	QL(3 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 200 MG</i>	NP	QL(4 EA daily); 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
			CLOZARIL TABS 200 MG (<i>clozapine</i>)	NP	QL(4 EA daily); AL(At least 18 yrs old)

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

Drug Name	Drug Tier	Requirements/Limits
VERSACLOZ SUSP	NP	QL(18 ML daily); AL(At least 18 yrs old); ST
ZYPREXA RELPREVV	NP	AL(At least 18 yrs old); SP
ZYPREXA SOLR (<i>olanzapine</i>)	NP	AL(At least 18 yrs old); ST
ZYPREXA TABS 20 MG (<i>olanzapine</i>)	NP	QL(1 EA daily); AL(At least 10 yrs old)
ZYPREXA TABS 2.5 MG, 5 MG (<i>olanzapine</i>)	NP	QL(4 EA daily); AL(At least 10 yrs old)
Muscarinic Agents		
COBENFY STARTER PACK CPPK	NP	AL(At least 18 yrs old); ST
COBENFY CAPS	NP	AL(At least 18 yrs old)
Phenothiazines		
<i>chlorpromazine hcl TABS 10 MG</i>	C	QL(10 EA daily)
<i>chlorpromazine hcl TABS 25 MG, 50 MG, 100 MG, 200 MG</i>	C	QL(3 EA daily)
<i>fluphenazine decanoate</i>	C	
<i>fluphenazine hcl TABS</i>	C	
<i>perphenazine TABS</i>	C	QL(4 EA daily); AL(At least 12 yrs old)
<i>prochlorperazine</i>	P	
<i>prochlorperazine</i>	NP	
<i>prochlorperazine maleate TABS</i>	P	
<i>thioridazine hcl</i>	C	QL(3 EA daily)
<i>trifluoperazine hcl TABS</i>	C	QL(2 EA daily)
Quinolinone Derivatives		
ABILIFY ASIMTUFII PRSY	P	AL(At least 18 yrs old); SP
ABILIFY MAINTENA PRSY	P	QL(1 EA per 28 day(s) retail); AL(At least 18 yrs old); SP

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ABILIFY MAINTENA SRER	P	QL(1 EA 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)
ABILIFY MAINTENA SRER	P	QL(1 EA per 28 day(s) retail); 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
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)	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
<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	OPIPZA FILM	NP	AL(At least 7 yrs old); ST
<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)	REXULTI	NP	AL(At least 13 yrs old); ST
<i>aripiprazole TABS 5 MG</i>	P	QL(1.5 EA daily); AL(At least 7 yrs old)	Thioxanthenes		
<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>thiothixene</i>	C	QL(3 EA daily)
<i>aripiprazole TBDP</i>	NP	QL(1 EA daily); AL(At least 7 yrs old); ST	ANTISEPTICS & DISINFECTANTS		
ARISTADA 882 MG/3.2ML	P	QL(3.2 ML per 28 day(s) retail); AL(At least 18 yrs old); SP	Chlorine Antiseptics		
ARISTADA 662 MG/2.4ML	P	QL(2.4 ML per 28 day(s) retail); AL(At least 18 yrs old); SP	<i>chlorhexidine gluconate SOLN EX 4 %</i>	C	
			ANTIVIRALS - Drugs to Treat Viral Infections		
			Antiretrovirals		
			<i>abacavir sulfate-lamivudine</i>	P	QL(1 EA daily)
			<i>abacavir sulfate SOLN</i>	P	QL(30 ML daily)
			<i>abacavir sulfate TABS</i>	P	QL(2 EA daily)
			<i>abacavir sulfate TABS</i>	C	QL(2 EA daily)
			APTIVUS CAPS	P	QL(4 EA daily)

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>atazanavir sulfate CAPS 300 MG</i>	P		<i>emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG</i>	P	
<i>atazanavir sulfate CAPS 150 MG, 200 MG</i>	P	QL(2 EA daily)	<i>emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG</i>	C	QL(1 EA daily)
BIKTARVY	P	QL(1 EA daily)	EMTRIVA CAPS (<i>emtricitabine</i>)	P	QL(1 EA daily)
CIMDUO	P	QL(1 EA daily)	EMTRIVA SOLN	P	QL(24 ML daily)
COMPLERA 200 MG-300 MG-25 MG (<i>emtricitabine-rilpivirine-tenofovir disoproxil fumarate</i>)	P	QL(1 EA daily)	EPIVIR SOLN (<i>lamivudine</i>)	P	QL(30 ML daily)
<i>darunavir TABS 800 MG</i>	P	QL(1 EA daily)	EPIVIR TABS 150 MG (<i>lamivudine</i>)	P	QL(2 EA daily)
<i>darunavir TABS 800 MG</i>	P	QL(1 EA daily)	EPIVIR TABS 300 MG (<i>lamivudine</i>)	P	QL(1 EA daily)
<i>darunavir TABS 600 MG</i>	C	QL(2 EA daily)	<i>etravirine 100 MG</i>	P	QL(4 EA daily)
<i>darunavir TABS 600 MG</i>	P	QL(2 EA daily)	<i>etravirine 200 MG</i>	P	QL(2 EA daily)
DELSTRIGO	P	QL(1 EA daily)	EVOTAZ	P	QL(1 EA daily)
DESCOVY 200 MG-25 MG	P	QL(1 EA daily)	<i>fosamprenavir calcium TABS</i>	P	QL(4 EA daily)
DESCOVY 120 MG-15 MG	P	QL(1 EA daily); PA	FUZEON SOLR	NP	SP
DOVATO	P	QL(1 EA daily)	GENVOYA	P	QL(1 EA daily)
EDURANT 25 MG (<i>rilpivirine hcl</i>)	P	QL(1 EA daily)	INTELENCE 200 MG (<i>etravirine</i>)	P	QL(2 EA daily)
EDURANT PED PO 2.5 MG	P		INTELENCE	P	QL(4 EA daily)
<i>efavirenz CAPS 50 MG</i>	C	QL(2 EA daily)	INTELENCE (<i>etravirine</i>)	P	QL(4 EA daily)
<i>efavirenz CAPS 200 MG</i>	C	QL(1 EA daily)	ISENTRESS HD TABS	P	
<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	P	QL(1 EA daily)	ISENTRESS CHEW 100 MG	P	QL(6 EA daily)
<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	P	QL(1 EA daily)	ISENTRESS CHEW 25 MG	P	QL(12 EA daily)
<i>efavirenz TABS</i>	P	QL(1 EA daily)	ISENTRESS PACK	P	QL(2 EA daily)
<i>efavirenz TABS</i>	C	QL(1 EA daily)	ISENTRESS TABS	P	QL(2 EA daily)
<i>emtricitabine CAPS</i>	P	QL(1 EA daily)	JULUCA	P	QL(1 EA daily)
<i>emtricitabine-rilpivirine-tenofovir disoproxil fumarate</i>	P	QL(1 EA daily)	KALETRA SOLN	P	QL(16 ML daily)
<i>emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG</i>	P	QL(1 EA daily)	KALETRA TABS 50 MG-200 MG (<i>lopinavir-ritonavir</i>)	P	QL(6 EA daily)

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
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 (<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 150 MG	P	QL(3 EA daily)
<i>lamivudine</i> SOLN	P	QL(30 ML daily)	RETROVIR CAPS (<i>zidovudine</i>)	P	QL(6 EA daily)
<i>lamivudine</i> SOLN	C	QL(30 ML daily)	RETROVIR SYRP (<i>zidovudine</i>)	P	QL(60 ML daily)
<i>lamivudine</i> TABS 150 MG	C	QL(2 EA daily)	REYATAZ CAPS 300 MG (<i>atazanavir sulfate</i>)	P	
<i>lamivudine</i> TABS 150 MG	P	QL(2 EA daily)	REYATAZ CAPS 200 MG (<i>atazanavir sulfate</i>)	P	QL(2 EA daily)
<i>lamivudine</i> TABS 300 MG	P	QL(1 EA daily)	REYATAZ PACK	P	QL(6 EA daily)
<i>lamivudine-zidovudine</i>	P		<i>rilpivirine hcl</i> 25 MG	P	QL(1 EA daily)
<i>lopinavir-ritonavir</i> SOLN	P	QL(16 ML daily)	<i>ritonavir</i> TABS	P	QL(12 EA daily)
<i>lopinavir-ritonavir</i> TABS 25 MG-100 MG	P	QL(4 EA daily)	RUKOBIA	P	
<i>lopinavir-ritonavir</i> TABS 50 MG-200 MG	P	QL(6 EA daily)	SELZENTRY SOLN	P	QL(35 ML daily)
<i>maraviroc</i> TABS 300 MG	P	QL(4 EA daily)	SELZENTRY TABS 300 MG (<i>maraviroc</i>)	P	QL(4 EA daily)
<i>maraviroc</i> TABS 150 MG	C	QL(2 EA daily)	SELZENTRY TABS 150 MG (<i>maraviroc</i>)	P	QL(2 EA daily)
<i>maraviroc</i> TABS 150 MG	P	QL(2 EA daily)	STRIBILD	P	QL(1 EA daily)
<i>maraviroc</i> TABS 300 MG	C	QL(4 EA daily)	SYMFI (<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	P	QL(1 EA daily)
<i>nevirapine</i> SUSP	P	QL(40 ML daily)	SYMFI LO (<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	P	QL(1 EA daily)
<i>nevirapine</i> TABS	P	QL(2 EA daily)	SYMTUZA	P	
<i>nevirapine</i> TB24 400 MG	P	QL(1 EA daily)	<i>tenofovir disoproxil fumarate</i> TABS	P	QL(1 EA daily)
NORVIR PACK	P		<i>tenofovir disoproxil fumarate</i> TABS	C	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)	TRIUMEQ PD TBSO	P	
PREZCOBIX	P		TRIUMEQ TABS	P	QL(1 EA daily); AL(At least 18 yrs old)
PREZCOBIX	P	QL(1 EA daily)			
PREZISTA SUSP	P	QL(12 ML daily)			
PREZISTA TABS 75 MG, 600 MG	P	QL(2 EA daily)			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TRUVADA 200 MG-300 MG (<i>emtricitabine-tenofovir disoproxil fumarate</i>)	P	QL(1 EA daily)	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)
TRUVADA 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG (<i>emtricitabine-tenofovir disoproxil fumarate</i>)	P		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)
TYBOST	P	QL(1 EA daily); AL(At least 18 yrs old)	CMV Agents		
VIRACEPT TABS 250 MG	P	QL(9 EA daily)	<i>valganciclovir hcl</i> TABS	C	QL(2 EA daily)
VIRACEPT TABS 625 MG	P	QL(4 EA daily)	Hepatitis Agents		
VIREAD POWD	P	QL(8 GM daily)	<i>adefovir dipivoxil</i>	NP	
VIREAD TABS	P	QL(1 EA daily)	BARACLUDE SOLN	P	
VIREAD TABS (<i>tenofovir disoproxil fumarate</i>)	P	QL(1 EA daily)	BARACLUDE TABS (<i>entecavir</i>)	NP	
ZIAGEN SOLN (<i>abacavir sulfate</i>)	P	QL(30 ML daily)	<i>entecavir</i> TABS	P	
<i>zidovudine</i> CAPS	P	QL(6 EA daily)	EPCLUSA PACK	PA	SP; PA
<i>zidovudine</i> SYRP	P	QL(60 ML daily)	EPCLUSA TABS 100 MG-400 MG	NP	QL(1 EA daily); SP
<i>zidovudine</i> TABS	P	QL(2 EA daily)	EPCLUSA TABS 50 MG-200 MG	PA	SP; PA
Antiviral Combinations			HARVONI PACK	NP	SP
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)	HARVONI TABS	NP	SP
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)	HARVONI TABS	NP	SP
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)	<i>lamivudine (hbv)</i> TABS	P	
			LEDIPASVIR-SOFOSBUVIR TABS	NP	SP
			MAVYRET PACK	PA	QL(6 EA daily); SP; PA
			MAVYRET TABS	PA	QL(3 EA daily); SP; PA
			MAVYRET TABS	PA	QL(3 EA daily); PA
			PEGASYS SOLN	NP	SP
			PEGASYS SOSY	NP	SP

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Drug Name	Drug Tier	Requirements/Limits
<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 1 GM</i>	P	QL(42 EA per 21 day(s) retail)
<i>valacyclovir hcl 500 MG</i>	P	QL(2 EA daily)
VALTREX 1 GM (<i>valacyclovir hcl</i>)	NP	QL(42 EA per 21 day(s) retail)
VALTREX 500 MG (<i>valacyclovir hcl</i>)	NP	QL(2 EA daily)
Human Papillomavirus (HPV) Agents		
PAPZIMEOS SUSP SC	C	SP; PA
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)
BETA BLOCKERS - Drugs to Treat High Blood Pressure		
Alpha-Beta Blockers		
<i>carvedilol 25 MG</i>	P	QL(4 EA daily); MP
<i>carvedilol 3.125 MG, 6.25 MG, 12.5 MG</i>	P	QL(2 EA daily); MP
<i>carvedilol phosphate</i>	NP	QL(1 EA daily); MP
<i>labetalol hcl TABS 100 MG</i>	P	QL(3 EA daily); MP
<i>labetalol hcl TABS 200 MG</i>	P	QL(6 EA daily); MP
<i>labetalol hcl TABS 400 MG</i>	P	MP
<i>labetalol hcl TABS 300 MG</i>	P	QL(8 EA daily); MP
Beta Blockers Cardio-Selective		
<i>acebutolol hcl CAPS</i>	P	
<i>atenolol TABS</i>	P	QL(2 EA daily); MP
<i>betaxolol hcl</i>	NP	
<i>bisoprolol fumarate 2.5 MG</i>	P	MP
<i>bisoprolol fumarate</i>	P	QL(1 EA daily); MP
BYSTOLIC (<i>nebivolol hcl</i>)	NP	
KAPSPARGO SPRINKLE CS24	NP	

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Drug Name	Drug Tier	Requirements/Limits
LOPRESSOR SOLN PO 10 MG/ML	NP	
LOPRESSOR TABS 100 MG (<i>metoprolol tartrate</i>)	NP	QL(4.5 EA daily)
LOPRESSOR TABS 12.5 MG	NP	
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); MP
<i>metoprolol succinate</i> TB24 200 MG	P	QL(2 EA daily); MP
<i>metoprolol tartrate</i> TABS 25 MG, 50 MG	P	QL(4 EA daily); MP
<i>metoprolol tartrate</i> TABS 12.5 MG, 37.5 MG, 75 MG	P	MP
<i>metoprolol tartrate</i> TABS 100 MG	P	QL(4.5 EA daily); MP
<i>nebivolol hcl</i>	NP	
TENORMIN TABS (<i>atenolol</i>)	NP	QL(2 EA daily)
TOPROL XL TB24 25 MG, 50 MG, 100 MG (<i>metoprolol succinate</i>)	NP	QL(4 EA daily)
TOPROL XL TB24 200 MG (<i>metoprolol succinate</i>)	NP	QL(2 EA daily)
Beta Blockers Non-Selective		
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	

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

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Drug Name	Drug Tier	Requirements/Limits
<i>nicardipine hcl CAPS</i>	P	
<i>nifedipine CAPS</i>	NP	QL(4 EA daily)
<i>nifedipine TB24 60 MG</i>	P	QL(2 EA daily)
<i>nifedipine TB24 30 MG, 90 MG</i>	P	QL(1 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 60 MG (<i>nifedipine</i>)	NP	QL(2 EA daily)
PROCARDIA XL TB24 30 MG, 90 MG (<i>nifedipine</i>)	NP	QL(1 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 100 MG, 200 MG, 300 MG</i>	NP	
<i>verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG</i>	P	QL(1 EA daily)
<i>verapamil hcl TABS</i>	P	QL(3 EA daily)
<i>verapamil hcl TBCR</i>	P	QL(2 EA daily)

CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm

Cardiac Glycosides

<i>digoxin SOLN PO 0.05 MG/ML</i>	C	
<i>digoxin TABS 125 MCG, 250 MCG</i>	C	

CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions

Drug Name	Drug Tier	Requirements/Limits
Cardiovascular Agents Misc. - Combinations		
<i>amlodipine besylate-atorvastatin calcium</i>	NP	
CADUET 10 MG-10 MG, 10 MG-20 MG, 10 MG-40 MG, 10 MG-80 MG, 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG (<i>amlodipine besylate-atorvastatin calcium</i>)	NP	
ENTRESTO CPSP	NP	
ENTRESTO TABS 103 MG-97 MG, 26 MG-24 MG, 51 MG-49 MG (<i>sacubitril-valsartan</i>)	NP	
OPSYNVI	NP	SP
<i>sacubitril-valsartan TABS</i>	P	
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

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Drug Name	Drug Tier	Requirements/Limits
Pulmonary Hypertension - Phosphodiesterase Inhibitors		
ADCIRCA TABS (<i>tadalafil (pulmonary hypertension)</i>)	NP	SP
LIQREV SUSP	NP	SP
REVATIO TABS (<i>sildenafil citrate (pulmonary hypertension)</i>)	NP	SP
<i>sildenafil citrate (pulmonary hypertension) SUSR</i>	NP	SP
<i>sildenafil citrate (pulmonary hypertension) TABS</i>	PA	SP; PA
<i>sildenafil citrate (pulmonary hypertension) TABS</i>	PA	PA
<i>tadalafil (pulmonary hypertension) TABS</i>	PA	SP; PA
TADLIQ SUSP	NP	SP
Pulmonary Hypertension - Prostacyclin Receptor Agonist		
UPTRAVI TITRATION TBPK	NP	SP
UPTRAVI SOLR	C	SP; PA
UPTRAVI TABS	NP	SP
Pulmonary Hypertension - Sol Guanylate Cyclase Stimulator		
ADEMPAS	NP	SP
Transthyretin Stabilizers		
VYNDAMAX	C	SP; PA
CEPHALOSPORINS - Drugs to Treat Bacterial Infections		
Cephalosporins - 1st Generation		
<i>cefadroxil CAPS</i>	P	
<i>cefadroxil SUSR</i>	P	
<i>cefadroxil TABS</i>	NP	

Drug Name	Drug Tier	Requirements/Limits
<i>cephalexin CAPS</i>	P	
<i>cephalexin CAPS</i>	P	
<i>cephalexin SUSR</i>	P	
<i>cephalexin TABS</i>	P	
Cephalosporins - 2nd Generation		
CEFACTOR ER TB12	NP	
<i>cefaclor CAPS</i>	P	
<i>cefprozil SUSR 125 MG/5ML</i>	P	2 package(s) per fill retail; AL(Up to 12 yrs old)
<i>cefprozil SUSR 250 MG/5ML</i>	P	1 package(s) per fill retail; AL(Up to 12 yrs old)
<i>cefprozil TABS</i>	P	QL(20 EA per fill retail)
<i>cefuroxime axetil TABS 250 MG</i>	P	QL(20 EA per fill retail; 20 per fill mail)
<i>cefuroxime axetil TABS 500 MG</i>	P	QL(20 EA per fill retail)
Cephalosporins - 3rd Generation		
<i>cefdinir CAPS</i>	P	QL(20 EA per fill retail)
<i>cefdinir SUSR</i>	P	1 package(s) per fill retail
<i>cefixime CAPS</i>	P	
<i>cefixime SUSR</i>	P	
<i>cefixime TABS</i>	P	
<i>cefpodoxime proxetil SUSR</i>	P	
<i>cefpodoxime proxetil TABS</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
CHEMICALS		
Bulk Chemicals - H's		
HYDROXYUREA	P	
CONTRACEPTIVES - Drugs to Prevent Pregnancy		

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

Drug Name	Drug Tier	Requirements/Limits
TYBLUME CHEW	C	
Combination Contraceptives - Transdermal		
<i>norelgestromin-ethinyl estradiol</i>	C	
Combination Contraceptives - Vaginal		
<i>etonogestrel-ethinyl estradiol</i>	C	QL(6 EA per fill retail)
Emergency Contraceptives		
ELLA	C	QL(4 EA per 365 day(s) retail)
<i>levonorgestrel (emergency oc) 1.5 MG</i>	C	QL(1 EA per 21 day(s) retail); 4 max fill(s) per 365 day(s) retail
Progestin Contraceptives - Injectable		
DEPO-SUBQ PROVERA 104 SUSY SC	C	QL(1 ML per fill retail; 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)
Progestin Contraceptives - Oral		
<i>norethindrone (contraceptive)</i>	C	
CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions		
Glucocorticosteroids		
AGAMREE	NP	SP
ALKINDI SPRINKLE CPSP	NP	
<i>budesonide CPEP</i>	P	
<i>budesonide TB24</i>	NP	
CORTEF TABS (<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	SP	PREDNISOLONE SODIUM PHOSPHATE TBDP 10 MG, 15 MG, 30 MG	P	
<i>deflazacort SUSP</i>	NP		<i>prednisolone SOLN</i>	NP	
<i>deflazacort TABS</i>	NP	SP	<i>prednisolone SOLN</i>	P	
<i>deflazacort TABS</i>	NP		<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		Mineralocorticoids		
EMFLAZA SUSP (<i>deflazacort</i>)	NP	SP	<i>fludrocortisone acetate TABS</i>	C	
EMFLAZA TABS (<i>deflazacort</i>)	NP	SP	COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms		
EOHILIA SUSP	NP		Antitussives		
HEMADY TABS	NP		<i>benzonatate 100 MG</i>	C	QL(6 EA daily); AL(At least 10 yrs old)
HEMADY TABS	NP		<i>benzonatate 200 MG</i>	C	QL(3 EA daily); 1 max fill(s) per 31 day(s) retail; AL(At least 10 yrs old)
<i>hydrocortisone TABS</i>	P		<i>dextromethorphan polistirex SUER</i>	C	QL(240 ML per 6 day(s) retail)
KHINDIVI SOLN PO 1 MG/ML	NP	PA	<i>hydrocodone bitartrate-homatropine methylbromide SOLN</i>	C	AL(At least 18 yrs old)
MEDROL TABS	NP		Cough/Cold/Allergy Combinations		
MEDROL TABS (<i>methylprednisolone</i>)	NP				
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	Drug Name	Drug Tier	Requirements/Limits
<i>brompheniramine & phenyleph ELIX</i>	C	QL(120 ML per fill retail); 1 max fill(s) per 31 day(s) retail	<i>phenylephrine-guaifenesin LIQD 5 MG/5ML-100 MG/5ML</i>	C	QL(240 ML per 6 day(s) retail)
<i>cetirizine-pseudoephedrine</i>	C	QL(2 EA daily)	<i>promethazine & phenylephrine SYRP</i>	C	QL(240 ML per 6 day(s) retail); AL(At least 2 yrs old)
CLARINEX-D 12 HOUR TB12	NP		<i>promethazine w/codeine SOLN</i>	C	QL(240 ML per fill retail); AL(At least 18 yrs old)
<i>dextromethorphan-guaifenesin LIQD 100 MG/5ML-5 MG/5ML, 400 MG/20ML-20 MG/20ML</i>	C		<i>promethazine w/codeine SYRP</i>	C	QL(240 ML per fill retail); AL(At least 18 yrs old)
<i>dextromethorphan-guaifenesin LIQD 100 MG/5ML-10 MG/5ML, 150 MG/7.5ML-15 MG/7.5ML, 200 MG/10ML-20 MG/10ML, 200 MG/5ML-10 MG/5ML</i>	C	QL(240 EA per fill retail)	<i>promethazine-dm SYRP</i>	C	QL(240 ML per fill retail); AL(At least 2 yrs old)
<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>promethazine-phenylephrine-codeine</i>	C	QL(240 ML per fill retail); AL(At least 18 yrs old)
<i>dextromethorphan-guaifenesin TB12 600 MG-30 MG</i>	C	QL(2 EA daily)	<i>pseudoephed-bromphen-dm SYRP 10 MG/5ML-30 MG/5ML-2 MG/5ML</i>	C	QL(240 ML per fill retail)
<i>dextromethorphan-phenylephrine-acetaminophen CAPS</i>	C		<i>pseudoephedrine-guaifenesin TB12 1200 MG-120 MG</i>	C	
<i>guaifenesin-codeine SOLN</i>	C		<i>pseudoephedrine-guaifenesin TB12 600 MG-60 MG</i>	C	QL(210 EA per fill retail)
LOHIST-D LIQD	C		Expectorants		
<i>loratadine & pseudoephedrine TB12</i>	C	QL(2 EA daily)	<i>guaifenesin TB12 600 MG</i>	C	QL(40 EA per fill retail); 1 max fill(s) per 31 day(s) retail
<i>loratadine & pseudoephedrine TB24</i>	C	QL(1 EA daily)	<i>guaifenesin TB12 1200 MG</i>	C	
MAXI-TUSS PE ELIX 5 MG/5ML-2 MG/5ML	C	QL(120 ML per fill retail); 1 max fill(s) per 31 day(s) retail	<i>potassium iodide (expectorant) SOLN</i>	C	
<i>phenylephrine-chlorphen-dm LIQD 10 MG/5ML-4 MG/5ML-15 MG/5ML</i>	C	QL(240 ML per fill retail)	Misc. Respiratory Inhalants		
			<i>sodium chloride (inhalant) NEBU 0.9 %, 3 %, 10 %</i>	C	
			Mucolytics		
			<i>acetylcysteine SOLN</i>	C	

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

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Drug Name	Drug Tier	Requirements/Limits
<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(30 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 0.05 %</i>	NP	
<i>tretinoin GEL 0.01 %, 0.025 %</i>	P	AL(Up to 35 yrs old)
TWYNEO	NP	
WINLEVI	NP	
Agents for External Genital and Perianal Warts		

Drug Name	Drug Tier	Requirements/Limits
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)
<i>clotrimazole w/ betamethasone LOTN</i>	P	QL(31 ML per 31 day(s) retail)

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Drug Name	Drug Tier	Requirements/Limits
<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	
Anti-inflammatory Agents - Topical		

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

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

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<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		Burn Products		
Burn Products			<i>silver sulfadiazine</i>	C	
Corticosteroids - Topical			Corticosteroids - Topical		
<i>alclometasone dipropionate CREA</i>	P		<i>clobetasol propionate emollient base 0.05 %</i>	P	1 package(s) per fill retail
<i>alclometasone dipropionate OINT</i>	P		<i>clobetasol propionate emulsion</i>	NP	
<i>amcinonide CREA</i>	NP		<i>clobetasol propionate CREA 0.025 %</i>	P	
APEXICON E CREA	NP		<i>clobetasol propionate CREA 0.05 %</i>	P	1 package(s) per fill retail
<i>betamethasone dipropionate (topical) CREA</i>	P	1 package(s) per 30 day(s) retail	<i>clobetasol propionate FOAM</i>	NP	
<i>betamethasone dipropionate (topical) LOTN</i>	P		<i>clobetasol propionate GEL 0.05 %</i>	P	1 package(s) per fill retail
<i>betamethasone dipropionate (topical) OINT</i>	NP		<i>clobetasol propionate LIQD</i>	NP	
<i>betamethasone dipropionate augmented CREA</i>	P	1 package(s) per fill retail	<i>clobetasol propionate LOTN</i>	NP	
<i>betamethasone dipropionate augmented GEL 0.05 %</i>	NP		<i>clobetasol propionate OINT 0.05 %</i>	P	1 package(s) per fill retail
<i>betamethasone dipropionate augmented LOTN</i>	NP		<i>clobetasol propionate SHAM</i>	NP	
<i>betamethasone dipropionate augmented OINT</i>	NP		<i>clobetasol propionate SOLN 0.05 %</i>	P	1 package(s) per fill retail
			CLOBEX SPRAY LIQD (<i>clobetasol propionate</i>)	NP	
			CLOBEX SHAM (<i>clobetasol propionate</i>)	NP	
			<i>clocortolone pivalate</i>	NP	

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

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Drug Name	Drug Tier	Requirements/Limits
<i>hydrocortisone butyrate OINT</i>	P	
<i>hydrocortisone butyrate SOLN</i>	P	
<i>hydrocortisone valerate CREA</i>	P	
<i>hydrocortisone valerate OINT</i>	NP	
HYDROXYM GEL	NP	
KENALOG AERS (<i>triamcinolone acetonide (topical)</i>)	NP	1 package(s) per fill retail
LEXETTE FOAM (<i>halobetasol propionate</i>)	NP	
<i>mometasone furoate CREA</i>	P	1 package(s) per fill retail
<i>mometasone furoate OINT</i>	P	1 package(s) per fill retail
<i>mometasone furoate SOLN</i>	P	1 package(s) per fill retail
PANDEL	NP	
SYNALAR CREA (<i>fluocinolone acetonide</i>)	NP	
SYNALAR OINT (<i>fluocinolone acetonide</i>)	NP	
TACLONEX SUSP (<i>calcipotriene-betamethasone dipropionate</i>)	NP	
TOPICORT SPRAY LIQD (<i>desoximetasone</i>)	NP	
TOPICORT CREA (<i>desoximetasone</i>)	NP	1 package(s) per fill retail
TOPICORT GEL (<i>desoximetasone</i>)	NP	
TOPICORT OINT (<i>desoximetasone</i>)	NP	
<i>triamcinolone acetonide (topical) AERS</i>	NP	1 package(s) per fill retail
<i>triamcinolone acetonide (topical) CREA</i>	P	1 package(s) per fill retail
<i>triamcinolone acetonide (topical) LOTN</i>	P	1 package(s) per fill retail

Drug Name	Drug Tier	Requirements/Limits
<i>triamcinolone acetonide (topical) OINT</i>	P	1 package(s) per fill retail
ULTRAVATE LOTN	NP	
ULTRAVATE LOTN	NP	
Eczema Agents		
ADBRY SOAJ	PA	SP; PA
ADBRY SOSY	PA	SP; PA
ANZUPGO CREA EX 20 MG/GM	NP	
CIBINQO	NP	SP
DUPIXENT SOAJ	PA	SP; PA
DUPIXENT SOSY 200 MG/1.14ML	PA	PA
DUPIXENT SOSY 200 MG/1.14ML, 300 MG/2ML	PA	SP; PA
EBGLYSS SOAJ	NP	SP
EBGLYSS SOAJ	NP	
EBGLYSS SOSY	NP	SP
OPZELURA	NP	QL(240 GM per 365 day(s) retail; 240 GM per 365 days mail); AL(At least 2 yrs old)
Emollient/Keratolytic Agents		
GORDONS UREA CREA 40 %	C	RX/OTC
<i>urea CREA 40 %</i>	C	RX/OTC
Emollients		
AQUA LACTEN LOTN	C	
AQUAMED LOTN	C	
CAM LOTN	C	
<i>emollient LOTN</i>	C	
EUCERIN ORIGINAL HEALING LOTN	C	
EUCERIN PLUS LOTN	C	
EUCERIN PROFESSIONAL REPAIR LOTN	C	

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Drug Name	Drug Tier	Requirements/Limits
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 FIRMING LOTN	C	
KERI RENEWAL STRETCH MARK LOTN	C	
KERI SENSITIVE SKIN LOTN	C	
<i>lactic acid (ammonium lactate) CREA</i>	C	QL(385 GM per 31 day(s) retail); RX/OTC
<i>lactic acid (ammonium lactate) LOTN 12 %</i>	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
LITFULO	NP	SP
Immunomodulating Agents - Systemic		
NEMLUVIO	NP	SP
Immunomodulating Agents - Topical		
<i>imiquimod 3.75 %</i>	NP	

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

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Drug Name	Drug Tier	Requirements/Limits
<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	
<i>metronidazole (topical) LOTN</i>	P	
MIRVASO (<i>brimonidine tartrate (topical)</i>)	NP	
ORACEA (<i>doxycycline (rosacea)</i>)	NP	

Drug Name	Drug Tier	Requirements/Limits
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	
NATROBA (<i>spinosad</i>)	P	Brand Preferred
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	
DIAGNOSTIC PRODUCTS		
Diagnostic Tests		
ACCU-CHEK AVIVA PLUS STRP	P	RX/OTC
ACCU-CHEK GUIDE TEST STRP	P	RX/OTC
ACCU-CHEK SMARTVIEW STRP	P	RX/OTC
CHEMSTRIP K STRP	C	
KETONE TEST STRP	C	

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Drug Name	Drug Tier	Requirements/Limits
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
DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes		
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	
DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure		
Carbonic Anhydrase Inhibitors		
<i>acetazolamide CP12</i>	C	
<i>acetazolamide TABS</i>	C	
<i>methazolamide TABS</i>	C	
Diuretic Combinations		

Drug Name	Drug Tier	Requirements/Limits
<i>amiloride & hydrochlorothiazide</i>	C	QL(1 EA daily)
<i>spironolactone & hydrochlorothiazide</i>	C	
<i>triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG</i>	C	
<i>triamterene & hydrochlorothiazide TABS 25 MG-37.5 MG</i>	C	QL(2 EA daily)
<i>triamterene & hydrochlorothiazide TABS 50 MG-75 MG</i>	C	
Loop Diuretics		
<i>bumetanide TABS</i>	C	
ENBUMYST SOLN 0.5 MG/0.1ML	C	PA
<i>furosemide SOLN PO 8 MG/ML, 10 MG/ML</i>	C	
<i>furosemide TABS</i>	C	
<i>torseamide TABS 5 MG, 10 MG, 100 MG</i>	C	QL(1 EA daily)
<i>torseamide TABS 20 MG</i>	C	
Potassium Sparing Diuretics		
<i>amiloride hcl TABS</i>	C	QL(4 EA daily)
<i>spironolactone TABS</i>	C	
Thiazides and Thiazide-Like Diuretics		
<i>chlorthalidone 25 MG, 50 MG</i>	C	
<i>hydrochlorothiazide CAPS</i>	C	
<i>hydrochlorothiazide TABS 25 MG, 50 MG</i>	C	
<i>indapamide TABS 1.25 MG, 2.5 MG</i>	C	
<i>metolazone</i>	C	
ENDOCRINE AND METABOLIC AGENTS - MISC. - Drugs to Treat Bone Disease and Regulate Hormones		
Bone Density Regulators		

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Drug Name	Drug Tier	Requirements/Limits
ACTONEL TABS 150 MG <i>(risedronate sodium)</i>	NP	
ACTONEL TABS 35 MG <i>(risedronate sodium)</i>	NP	QL(4 EA per 28 day(s) retail)
<i>alendronate sodium SOLN</i>	NP	QL(10.8 ML daily)
<i>alendronate sodium TABS 35 MG, 70 MG</i>	P	QL(0.15 EA daily)
<i>alendronate sodium TABS 10 MG</i>	P	QL(1 EA daily)
ATELVIA TBEC <i>(risedronate sodium)</i>	NP	QL(4 EA per 28 day(s) retail)
BINOSTO TBEF	NP	
BONSITY SOPN 560 MCG/2.24ML	NP	
<i>calcitonin (salmon) NA</i>	P	1 package(s) per fill retail
<i>calcitonin (salmon) IJ</i>	C	QL(2 ML per fill retail)
FORTEO SOPN <i>(teriparatide)</i>	NP	
FORTEO SOPN <i>(teriparatide)</i>	NP	SP
FOSAMAX PLUS D	NP	
FOSAMAX TABS 70 MG <i>(alendronate sodium)</i>	NP	QL(0.15 EA daily)
<i>ibandronate sodium TABS</i>	P	
<i>risedronate sodium TABS 5 MG, 30 MG</i>	NP	QL(1 EA daily)
<i>risedronate sodium TABS 150 MG</i>	NP	
<i>risedronate sodium TABS 35 MG</i>	NP	QL(4 EA per 28 day(s) retail)
<i>risedronate sodium TBEC</i>	NP	QL(4 EA per 28 day(s) retail)
<i>teriparatide SOPN</i>	P	
<i>teriparatide SOPN</i>	P	SP
TERIPARATIDE SOPN	P	SP
TYMLOS	NP	SP
Growth Hormones		
GENOTROPIN MINIQUICK PRSY	PA	SP; PA

Drug Name	Drug Tier	Requirements/Limits
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
Hormone Receptor Modulators		
EVISTA <i>(raloxifene hcl)</i>	NP	QL(1 EA daily)
<i>raloxifene hcl</i>	NP	QL(1 EA daily)
Insulin-Like Growth Factors (Somatomedins)		
INCRELEX	NP	
INCRELEX	NP	SP
LHRH/GnRH Agonist Analog Pituitary Suppressants		
FENSOLVI (6 MONTH) SC	C	SP; PA
Metabolic Modifiers		
<i>calcitriol CAPS</i>	C	
CARBAGLU <i>(carglumic acid)</i>	PA	Brand Preferred; SP; PA
<i>carglumic acid</i>	NP	Brand Preferred; SP
FORZINITY SOLN SC 280 MG/3.5ML	C	SP; PA
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)
SEPHIENCE PACK PO 250 MG, 1000 MG	C	SP; PA
XPHOZAH	NP	SP
Posterior Pituitary Hormones		
<i>desmopressin acetate spray</i>	C	QL(5 ML per fill retail); PA
<i>desmopressin acetate spray refrigerated 0.01 %</i>	C	QL(5 ML per fill retail); PA
<i>desmopressin acetate TABS</i>	C	QL(6 EA daily)
Somatostatic Agents		
<i>octreotide acetate KIT</i>	C	SP; PA
ESTROGENS - Hormone Replacement/Modifying Drugs		
Estrogen Combinations		
COMBIPATCH PTTW	C	Limit 8 patches per month; QL(0.286 EA daily)
<i>estradiol & norethindrone acetate TABS</i>	C	QL(1 EA daily)
<i>norethindrone acetate-ethinyl estradiol</i>	C	
PREMPRO	C	
Estrogens		
ALORA PTTW 0.025 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR	C	Limit 8 patches per month; QL(0.286 EA daily)
<i>estradiol PTTW 0.025 MG/24HR, 0.05 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR</i>	C	Limit 8 patches per month; QL(0.286 EA daily)
<i>estradiol PTTW 0.0375 MG/24HR</i>	C	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)
FLUOROQUINOLONES - Drugs to Treat Bacterial Infections		
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 400 MG</i>	NP	QL(56 EA per fill retail)
<i>ofloxacin 300 MG</i>	NP	
GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs		
5-HT4 Receptor Agonists		
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 (<i>mesalamine</i>)	P	Brand Preferred
PENTASA CPCR 250 MG	P	
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	
GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive Organs and Urinary System		

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

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Drug Name	Drug Tier	Requirements/Limits
ULORIC (<i>febuxostat</i>)	NP	
Uricosurics		
<i>probenecid</i>	P	
HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders		
Aminolevulinate Synthase 1-Directed siRNA		
GIVLAARI	C	SP; PA
Bradykinin B2 Receptor Antagonists		
<i>icatibant acetate SOSY</i>	C	SP; PA
Complement Inhibitors		
HAEGARDA SOLR SC	C	SP; PA
TAVNEOS	NP	SP
Hemataologic - Tyrosine Kinase Inhibitors		
WAYRILZ TABS PO 400 MG	C	SP; PA
Hematorheologic Agents		
<i>pentoxifylline</i>	C	
Plasma Kallikrein Inhibitors		
EKTERLY TABS PO 300 MG	C	SP; PA
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)

Drug Name	Drug Tier	Requirements/Limits
<i>ticagrelor 60 MG, 90 MG</i>	NP	Brand Preferred; QL(2 EA daily)
HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders		
Agents for Gaucher Disease		
CERDELGA	C	SP; PA
CEREZYME 400 UNIT	C	SP; PA
Agents for Sickle Cell Disease		
ADAKVEO	C	SP; PA
CASGEVY	PA	SP; PA
DROXIA CAPS	P	
ENDARI (<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 1 MG</i>	C	RX/OTC
<i>folic acid TABS 400 MCG</i>	C	QL(1 EA daily)
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

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Drug Name	Drug Tier	Requirements/Limits
PROCRIT	NP	SP
PROCRIT	NP	SP
REBLOZYL	C	SP
RETACRIT	P	SP
VAFSEO	NP	SP
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 220 MG/5ML, 300 MG/6.8ML</i>	C	
<i>ferrous sulfate SOLN 15 MG/ML, 15 MG/ML</i>	C	QL(3.4 ML daily)
<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)
HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders		
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)
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
Antihistamine Hypnotics		
<i>diphenhydramine hcl (sleep) TABS 25 MG</i>	C	QL(1 EA daily)
<i>doxylamine succinate (sleep)</i>	C	
Barbiturate Hypnotics		

Drug Name	Drug Tier	Requirements/Limits
<i>phenobarbital ELIX</i>	C	
PHENOBARBITAL ELIX 20 MG/5ML, 30 MG/7.5ML, 60 MG/15ML	C	
<i>phenobarbital TABS</i>	C	
Hypnotics - Tricyclic Agents		
<i>doxepin hcl (sleep)</i>	NP	
Non-Barbiturate Hypnotics		
AMBIEN CR TBCR (<i>zolpidem tartrate</i>)	NP	
AMBIEN TABS (<i>zolpidem tartrate</i>)	NP	QL(1 EA daily)
DORAL (<i>quazepam</i>)	NP	
EDLUAR SUBL	NP	
<i>estazolam</i>	NP	
<i>eszopiclone</i>	NP	
<i>flurazepam hcl</i>	NP	QL(1 EA daily)
HALCION 0.25 MG (<i>triazolam</i>)	NP	
IGALMI FILM	NP	
<i>midazolam hcl SOLN IJ</i>	C	
MIDAZOLAM HCL SOLN IJ	C	
<i>quazepam</i>	NP	
RESTORIL 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 15 MG, 30 MG</i>	P	QL(1 EA daily); AL(At least 18 yrs old)
<i>temazepam 7.5 MG, 22.5 MG</i>	P	
<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)

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

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

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

Drug Name	Drug Tier	Requirements/Limits
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	
<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
MEDICAL DEVICES AND SUPPLIES		
Diabetic Supplies		
ACCU-CHEK GUIDE ME KIT	P	QL(1 EA per 365 day(s) retail); RX/OTC
ACCU-CHEK GUIDE KIT	P	QL(1 EA per 365 day(s) retail); RX/OTC
ACCU-CHEK SOFTCLIX LANCETS	P	RX/OTC
DEXCOM G6 RECEIVER	PA	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); PA

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
DEXCOM G6 SENSOR	PA	3 package(s) per 90 day(s) retail; 3 package(s) per 90 day(s) mail; PA	FREESTYLE LIBRE 3 SENSOR	PA	QL(6 EA per 90 day(s) retail); PA
DEXCOM G6 TRANSMITTER	PA	QL(1 EA per 90 day(s) retail; 1 EA per 90 days mail); PA	OMNIPOD 5 DEXG7G6 INTRO GEN 5 KIT	PA	QL(1 EA per 365 day(s) retail; 1 EA per 365 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	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
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			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TRUE METRIX METER KIT	P	QL(1 EA per 365 day(s) retail); RX/OTC	CARETOUCH INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
TRUEPLUS LANCETS 28G	P	RX/OTC	COMFORT EZ INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
TRUEPLUS LANCETS 30G	P	RX/OTC	DROPLET INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
TRUEPLUS LANCETS 33G	P	RX/OTC	EASY TOUCH FLIPLOCK INSULIN SY	C	QL(5 EA daily); RX/OTC
Parenteral Therapy Supplies			EASY TOUCH INSULIN BARRELS	C	QL(5 EA daily); RX/OTC
AQ INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	EASY TOUCH INSULIN SAFETY SYR	C	QL(5 EA daily); RX/OTC
ASSURE ID INSULIN SAFETY SYR	C	QL(5 EA daily); RX/OTC	EASY TOUCH INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
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 AUTOSHIELD DUO	C	QL(5 EA daily); RX/OTC
BD INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	EMBECTA INSULIN SYR ULTRAFINE	C	QL(5 EA daily); RX/OTC
BD INSULIN SYRINGE MICROFINE	C	QL(5 EA daily); RX/OTC	EMBECTA INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
BD INSULIN SYRINGE U/F	C	QL(5 EA daily); RX/OTC	EMBECTA PEN NEEDLE NANO	C	QL(5 EA daily); RX/OTC
BD INSULIN SYRINGE ULTRAFINE	C	QL(5 EA daily)	EMBECTA PEN NEEDLE NANO 2 GEN	C	QL(5 EA daily); RX/OTC
BD PEN NEEDLE MICRO ULTRAFINE	C	QL(5 EA daily)	EMBECTA PEN NEEDLE ULTRAFINE	C	QL(5 EA daily)
BD PEN NEEDLE MINI ULTRAFINE	C	QL(5 EA daily); RX/OTC	FIFTY50 SUPERIOR COMFORT SYR	C	QL(5 EA daily); RX/OTC
BD PEN NEEDLE NANO 2ND GEN	C	QL(5 EA daily); RX/OTC	GLUCOPRO INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
BD PEN NEEDLE NANO ULTRAFINE	C	QL(5 EA daily); RX/OTC	GNP INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
BD PEN NEEDLE ORIG ULTRAFINE	C	QL(5 EA daily)	GNP INSULIN SYRINGES	C	QL(5 EA daily); RX/OTC
BD PEN NEEDLE SHORT ULTRAFINE	C	QL(5 EA daily); RX/OTC	GNP INSULIN SYRINGES 28GX1/2"	C	QL(5 EA daily); RX/OTC
BD VEO INSULIN SYR ULTRAFINE	C	QL(5 EA daily); RX/OTC	GNP INSULIN SYRINGES 29GX1/2"	C	QL(5 EA daily); RX/OTC
CAREONE INSULIN SYRINGE	C	QL(5 EA daily)	GNP INSULIN SYRINGES 30GX5/16"	C	QL(5 EA daily); RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
GNP INSULIN SYRINGES 31GX5/16"	C	QL(5 EA daily); RX/OTC	SURE COMFORT INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
GNP ULTRA COM INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	TECHLITE INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
HEALTHWISE INSULIN SYR/NEEDLE	C	QL(5 EA daily); RX/OTC	TRUE COMFORT INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
HM ULTICARE INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	TRUE COMFORT PRO INSULIN SYR	C	QL(5 EA daily); RX/OTC
INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	TRUEPLUS 5-BEVEL PEN NEEDLES	C	QL(5 EA daily)
INSULIN SYRINGE-NEEDLE U-100	C	QL(5 EA daily); RX/OTC	TRUEPLUS INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
KINRAY INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	TRUEPLUS PEN NEEDLES	C	QL(5 EA daily); RX/OTC
LITETOUCH INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	ULTRA FLO INSULIN SYR 1/2 UNIT	C	QL(5 EA daily); RX/OTC
MAGELLAN INSULIN SAFETY SYR	C	QL(5 EA daily); RX/OTC	ULTRA FLO INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
MAXI-COMFORT INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	ULTRACARE INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
MAXICOMFORT SYR 27G X 1/2"	C	QL(5 EA daily); RX/OTC	ULTRA-THIN II INS SYR SHORT	C	QL(5 EA daily); RX/OTC
MEDIC INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	ULTRA-THIN II INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC
MM INSULIN SYRINGE/NEEDLE	C	QL(5 EA daily); RX/OTC	Respiratory Therapy Supplies		
MONOJECT INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC	AEROCHAMBER HOLDING CHAMBER DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
MONOJECT ULTRA COMFORT SYRINGE	C	QL(5 EA daily); RX/OTC	AEROCHAMBER MINI CHAMBER DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
PRECISION SURE-DOSE SYRINGE	C	QL(5 EA daily); RX/OTC	AEROCHAMBER MV MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC
PRODIGY 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
PX INSULIN SYRINGE	C	QL(5 EA daily)	AEROCHAMBER PLUS FLO-VU INTERM DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
REALITY 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
RELION INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC			
SB INSULIN SYRINGE	C	QL(5 EA daily); RX/OTC			
SECURESAFE 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
AEROCHAMBER PLUS FLO-VU LARGE MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC	BREATHE EASE LARGE DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLO-VU MEDIUM DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	BREATHE EASE MEDIUM DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLO-VU MEDIUM MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC	BREATHE EASE SMALL DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLO-VU SMALL DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	BREATHERITE VALVED MDI CHAMBER DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLO-VU SMALL MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC	CLEVER CHOICE HOLDING CHAMBER DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
AEROCHAMBER PLUS FLOW VU MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC	COMPACT SPACE CHAMBER/LG MASK DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
AEROCHAMBER W/FLOWSIGNAL MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC	COMPACT SPACE CHAMBER/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

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EQ SPACE CHAMBER ANTI-STATIC DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC	OPTICHAMBER DIAMOND-SM MASK MISC	C	QL(2 EA per 360 day(s) retail); RX/OTC
FLEXICHAMBER ADULT MASK/SMALL	C	QL(2 EA per 360 day(s) retail); RX/OTC	PANDA MASK LARGE	C	QL(2 EA per 360 day(s) retail); RX/OTC
FLEXICHAMBER CHILD MASK/LARGE	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
FLEXICHAMBER CHILD MASK/SMALL	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
FLEXICHAMBER 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
INSPIREASE RESERVOIR BAGS	C	QL(3 EA per 180 day(s) retail)	PARI VORTEX PEDIATRIC MASK	C	QL(2 EA per 360 day(s) retail); RX/OTC
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

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Drug Name	Drug Tier	Requirements/Limits
RITEFLO DEVI	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
VORTEX HOLD CHMBR/MASK/TODDLER DEVI	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
VORTEX VALVED HOLDING CHAMBER DEVI	C	QL(2 EA per 360 day(s) retail); RX/OTC
MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches		
Calcitonin Gene-Related Peptide (CGRP) Receptor Antag		
AIMOVIG	NP	SP
AJOVY SOAJ	PA	SP; PA
AJOVY SOSY	PA	SP; PA
EMGALITY (300 MG DOSE) SOSY	NP	SP
EMGALITY SOAJ	PA	SP; PA
EMGALITY SOSY	PA	SP; PA
NURTEC	NP	
QULIPTA	PA	PA
UBRELVY	PA	PA
ZAVZPRET	NP	
Migraine Combinations		
<i>ergotamine w/ caffeine TABS</i>	C	AL(At least 18 yrs old)
<i>sumatriptan-naproxen sodium</i>	NP	
SYMBRAVO TABS PO	NP	
Migraine Products - NSAIDs		
<i>diclofenac potassium (migraine)</i>	NP	

Drug Name	Drug Tier	Requirements/Limits
ELYXYB	NP	
Serotonin Agonists		
<i>almotriptan malate</i>	NP	
<i>eletriptan hydrobromide</i>	NP	Brand Preferred; QL(6 EA per 31 day(s) retail)
FROVA (<i>frovatriptan succinate</i>)	NP	
<i>frovatriptan succinate</i>	NP	
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 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)
IMITREX TABS (<i>sumatriptan succinate</i>)	NP	QL(9 EA per 31 day(s) retail); AL(At least 12 yrs old)
MAXALT-MLT TBDP 10 MG (<i>rizatriptan benzoate</i>)	NP	QL(12 EA per 31 day(s) retail); AL(At least 6 yrs old)
MAXALT TABS 10 MG (<i>rizatriptan benzoate</i>)	NP	QL(12 EA per 31 day(s) retail); AL(At least 6 yrs old)
<i>naratriptan hcl</i>	NP	QL(9 EA per 31 day(s) retail); AL(At least 18 yrs old)
RELPAX (<i>eletriptan hydrobromide</i>)	P	Brand Preferred ; QL(6 EA per 31 day(s) retail)

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
RELPAx (<i>eletriptan hydrobromide</i>)	P	Brand Preferred; QL(6 EA per 31 day(s) retail)	<i>zolmitriptan SOLN 5 MG</i>	NP	QL(6 EA per 31 day(s) retail); AL(At least 12 yrs old)
REYVOW	NP		<i>zolmitriptan SOLN 2.5 MG</i>	NP	
<i>rizatriptan benzoate TABS</i>	P	QL(12 EA per 31 day(s) retail); AL(At least 6 yrs old)	<i>zolmitriptan TABS</i>	NP	QL(6 EA per 31 day(s) retail)
<i>rizatriptan benzoate TBDP</i>	P	QL(12 EA per 31 day(s) retail); AL(At least 6 yrs old)	<i>zolmitriptan TBDP</i>	NP	QL(6 EA per 31 day(s) retail)
<i>sumatriptan 20 MG/ACT</i>	NP	20 MG/ACT; QL(6 EA per 31 day(s) retail); AL(At least 12 yrs old)	ZOMIG SOLN 5 MG (<i>zolmitriptan</i>)	NP	QL(6 EA per 31 day(s) retail); AL(At least 12 yrs old)
<i>sumatriptan 5 MG/ACT</i>	NP	5 MG/ACT; QL(6 EA per 31 day(s) retail); AL(At least 12 yrs old)	ZOMIG SOLN 2.5 MG (<i>zolmitriptan</i>)	NP	
<i>sumatriptan succinate SOAJ 4 MG/0.5ML</i>	P		MINERALS & ELECTROLYTES		
<i>sumatriptan succinate SOAJ 6 MG/0.5ML</i>	P	QL(2 ML per 31 day(s) retail); AL(At least 12 yrs old)	Calcium		
<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>calcium carbonate-cholecalciferol TABS 10 MCG-600 MG, 400 UNIT-600 MG</i>	C	QL(2 EA daily)
<i>sumatriptan succinate SOCT 4 MG/0.5ML</i>	P		<i>calcium carbonate-cholecalciferol TABS 200 UNIT-500 MG, 5 MCG-500 MG, 500 MG-5 MCG</i>	C	
<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>oyster shell</i>	C	
<i>sumatriptan succinate TABS</i>	P	QL(9 EA per 31 day(s) retail); AL(At least 12 yrs old)	Electrolyte Mixtures		
TOSYMRA	NP		<i>oral electrolytes SOLN</i>	C	
ZEMBRACE SYMTOUCH SOAJ	NP		Fluoride		
			<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
			Magnesium		
			<i>magnesium oxide (mg supplement) TABS</i>	C	
			Phosphate		
			<i>pot phosphate monobasic w/ sod phosphate dibasic & monobasic</i>	C	QL(8 EA daily); RX/OTC

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
WES-PHOS 250 NEUTRAL 852 MG-155 MG-130 MG	C	QL(8 EA daily); RX/OTC	<i>cyclosporine CAPS</i>	P	USE BRAND NAME or Authorized Generic SP
Potassium			ENSPRYNG	NP	
EFFER-K TBEF 25 MEQ	C		ENVARBUS XR TB24	NP	
<i>potassium bicarbonate TBEF</i>	C		<i>everolimus (immunosuppressant)</i>	NP	
<i>potassium chloride microencapsulated crystals er</i>	C		IMURAN TABS (<i>azathioprine</i>)	NP	
<i>potassium chloride CPCR 10 MEQ</i>	C		<i>mycophenolate mofetil CAPS</i>	P	
<i>potassium chloride CPCR 8 MEQ</i>	C	QL(1 EA daily)	<i>mycophenolate mofetil SUSR</i>	P	
<i>potassium chloride PACK PO 20 MEQ</i>	C		<i>mycophenolate mofetil TABs</i>	P	
<i>potassium chloride SOLN PO 10 %, 20 %, 10 %</i>	C		<i>mycophenolate sodium</i>	P	
<i>potassium chloride TBCR</i>	C		MYFORTIC (<i>mycophenolate sodium</i>)	NP	
MISCELLANEOUS THERAPEUTIC CLASSES			MYHIBBIN SUSP	NP	
Chelating Agents			NEORAL CAPS (<i>cyclosporine modified (for microemulsion)</i>)	NP	
<i>penicillamine TABS</i>	C		NEORAL SOLN (<i>cyclosporine modified (for microemulsion)</i>)	NP	
Immunomodulators			PROGRAF CAPS (<i>tacrolimus</i>)	NP	
REZUROCK	NP	SP	PROGRAF PACK	NP	
RHAPSIDO TABS PO 25 MG	NP	AL(At least 18 yrs old); SP	SANDIMMUNE CAPS (<i>cyclosporine</i>)	P	
Immunosuppressive Agents			<i>sirolimus SOLN</i>	P	
ASTAGRAF XL CP24	NP		<i>sirolimus TABS</i>	P	
<i>azathioprine TABS</i>	P		<i>tacrolimus CAPS</i>	P	
CELLCEPT CAPS (<i>mycophenolate mofetil</i>)	NP		ZORTRESS (<i>everolimus (immunosuppressant)</i>)	NP	
CELLCEPT SUSR (<i>mycophenolate mofetil</i>)	NP		Potassium Removing Agents		
CELLCEPT TABS (<i>mycophenolate mofetil</i>)	NP		LOKELMA	P	
<i>cyclosporine modified (for microemulsion) CAPS</i>	P		<i>sodium polystyrene sulfonate POWD</i>	P	
<i>cyclosporine modified (for microemulsion) SOLN</i>	P				

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Drug Name	Drug Tier	Requirements/Limits
<i>sodium polystyrene sulfonate SUSP CO 15 GM/60ML</i>	P	
<i>sodium polystyrene sulfonate SUSP CO 15 GM/60ML</i>	C	
<i>sodium polystyrene sulfonate SUSP PR 30 GM/120ML</i>	P	
VELTASSA 1 GM, 8.4 GM, 16.8 GM	P	
MOUTH/THROAT/DENTAL AGENTS		
Anesthetics Topical Oral		
<i>lidocaine hcl (mouth-throat) 2 %</i>	C	QL(100 ML per fill retail)
Anti-infectives - Throat		
NYSTATIN (<i>nystatin (mouth-throat)</i>)	P	2 package(s) per fill retail
<i>nystatin (mouth-throat)</i>	P	2 package(s) per fill retail
Antiseptics - Mouth/Throat		
<i>chlorhexidine gluconate (mouth-throat)</i>	C	
Dental Products		
<i>sodium fluoride (dental) CREA</i>	C	QL(113 GM per 60 day(s) retail)
<i>sodium fluoride (dental) GEL</i>	C	QL(113 GM per 60 day(s) retail)
<i>sodium fluoride (dental) PSTE DT</i>	C	QL(113 ML per 60 day(s) retail)
Steroids - Mouth/Throat/Dental		
<i>triamcinolone acetonide (mouth)</i>	C	1 package(s) per fill retail
Throat Products - Misc.		
<i>pilocarpine hcl (oral) 5 MG</i>	C	QL(6 EA daily)
MULTIVITAMINS		
B-Complex Vitamins		
<i>b-complex vitamins CAPS</i>	C	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/Limits
<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 & 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		
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)
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)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
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)	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
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	C	QL(1 EA daily)			
Multiple Vitamins w/ Minerals					
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			
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			

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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 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
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			

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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-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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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
			PRESERVISION AREDS 2 CAPS	C	QL(1 EA daily); RX/OTC
ONEVITE TABS	C	QL(1 EA daily); RX/OTC	PRESERVISION AREDS 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 TABS	C	QL(1 EA daily); RX/OTC
			PRESERVISION/LUTEIN 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	PREVENT CAPS	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	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/MULTIMINERAL 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		QC WOMENS DAILY MULTIVITAMIN TABS 60 MG-2 MG-30 MCG-400 MCG-500 UNIT-5 MCG-2500 UNIT-1.7 MG-25 MCG-10 MG-5 MG-15 MG-450 MG-5 MG-50 MG-15 MG-30 UNIT-2 MG-2 MG-120 MCG-20 MCG	C
			QUIN B STRONG TABS	C	QL(1 EA daily); RX/OTC
			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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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 MINI 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 AREDS 2 FORMULA CAPS	C	QL(1 EA daily); RX/OTC
VITABASIC COMPLETE TABS	C	QL(1 EA daily); RX/OTC	VITEYES CLASSIC ADVANCED CAPS	C	QL(1 EA daily); RX/OTC
VITABASIC SENIOR TABS	C	QL(1 EA daily); RX/OTC	VITEYES CLASSIC MACULAR SUPPOR CAPS	C	QL(1 EA daily); RX/OTC
VITABEX PLUS CAPS	C	QL(1 EA daily); RX/OTC	VITEYES CLASSIC MULTIVITAMIN TABS	C	QL(1 EA daily); RX/OTC
VITABEX CAPS	C	QL(1 EA daily); RX/OTC	VITEYES CLASSIC+OMEGA-3 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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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
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			

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

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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
			Ped Multi Vitamins w/Fl & FE		
			<i>ped multivitamins w/fl & iron SOLN</i>	C	QL(50 ML per fill retail); AL(Up to 21 yrs old); RX/OTC
			Ped MV w/ Iron		
			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	MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms		
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>	P	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>	NP	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 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	
NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus		
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 0.15 %	NP	1 package(s) per 31 day(s) retail; RX/OTC
azelastine hcl 0.1 %, 137 MCG/SPRAY	P	1 package(s) per 31 day(s) retail; 1 package(s) per 31 day(s) mail
olopatadine hcl (nasal)	NP	
Nasal Anticholinergics		

Drug Name	Drug Tier	Requirements/Limits
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)
NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles		
ALS Agents		
riluzole TABS	C	PA
Muscular Dystrophy Agents		
VYONDYS 53	C	SP; PA
NUTRIENTS		
Misc. Nutritional Substances		
omega-3 fatty acids CAPS 1000 MG	C	QL(6 EA daily)
OPHTHALMIC AGENTS - Drugs to Treat the Eye		
Artificial Tears and Lubricants		

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Drug Name	Drug Tier	Requirements/Limits
<i>polyvinyl alcohol 1.4 %</i>	C	
<i>white petrolatum-mineral oil</i>	C	1 package(s) per fill retail
Beta-blockers - Ophthalmic		
<i>betaxolol hcl (ophth) SOLN</i>	P	1 package(s) per 31 day(s) retail
BETIMOL (<i>timolol</i>)	NP	
BETIMOL	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>	P	QL(10 ML per 31 day(s) retail)
<i>dorzolamide hcl-timolol maleate</i>	NP	
ISTALOL SOLN (<i>timolol maleate (ophth)</i>)	NP	
<i>levobunolol hcl 0.5 %</i>	P	QL(15 ML per 31 day(s) retail)
<i>timolol</i>	NP	
<i>timolol maleate (ophth) SOLG</i>	P	
<i>timolol maleate (ophth) SOLN 0.5 %</i>	NP	
<i>timolol maleate (ophth) SOLN</i>	P	QL(15 ML per 31 day(s) retail)
TIMOPTIC OCUDOSE SOLN (<i>timolol maleate (ophth)</i>)	NP	QL(15 EA per 31 day(s) retail)
Cholinergic Agonists		
TYRVAYA	NP	

Drug Name	Drug Tier	Requirements/Limits
Cycloplegic Mydriatics		
<i>atropine sulfate (ophthalmic) OINT</i>	C	QL(4 GM per fill retail)
<i>atropine sulfate (ophthalmic) SOLN</i>	C	
ATROPINE SULFATE SOLN 1 %	C	
CYCLOGYL 0.5 %	C	
CYCLOGYL 2 %	C	1 package(s) per 31 day(s) retail
<i>cyclopentolate hcl 1 %</i>	C	
<i>tropicamide SOLN</i>	C	
Miotics		
<i>pilocarpine hcl SOLN 1 %, 2 %, 4 %</i>	C	
Ophthalmic - Angiogenesis Inhibitors		
EYLEA SOSY	C	SP; PA
Ophthalmic Adrenergic Agents		
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	
Ophthalmic Anti-infectives		
AZASITE	NP	
<i>bacitracin (ophthalmic)</i>	P	QL(4 GM per 31 day(s) retail)
<i>bacitracin-polymyxin b (ophth)</i>	P	QL(4 GM per 31 day(s) retail)
<i>besifloxacin hcl 0.6 %</i>	NP	
BESIVANCE 0.6 % (<i>besifloxacin hcl</i>)	NP	

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Drug Name	Drug Tier	Requirements/Limits
CILOXAN OINT	NP	1 package(s) per fill retail
<i>ciprofloxacin hcl (ophth) SOLN</i>	P	1 package(s) per fill retail
<i>erythromycin (ophth)</i>	P	
<i>gatifloxacin (ophth)</i>	NP	
<i>gentamicin sulfate (ophth) SOLN</i>	P	2 package(s) per fill retail
<i>levofloxacin (ophth) 0.5 %</i>	NP	
<i>moxifloxacin hcl (ophth) SOLN OP</i>	P	QL(3 ML per fill retail)
<i>neomycin-bacitracin zn-polymyxin</i>	P	QL(4 GM per 31 day(s) retail)
<i>neomycin-polymyxin-gramicidin</i>	P	1 package(s) per fill retail
OCUFLOX (<i>ofloxacin (ophth)</i>)	NP	QL(10 ML per 31 day(s) retail)
<i>ofloxacin (ophth)</i>	P	QL(10 ML per 31 day(s) retail)
<i>polymyxin b-trimethoprim</i>	P	1 package(s) per fill retail; 1 max fill(s) per 30 day(s) retail
<i>sulfacetamide sodium (ophth) OINT</i>	P	QL(4 GM per 31 day(s) retail)
<i>sulfacetamide sodium (ophth) SOLN</i>	C	QL(15 ML per 31 day(s) retail)
<i>sulfacetamide sodium (ophth) SOLN</i>	P	QL(15 ML per 31 day(s) retail)
<i>tobramycin (ophth) SOLN</i>	NP	QL(5 ML per 31 day(s) retail)
TOBREX OINT	NP	
<i>trifluridine</i>	C	QL(8 ML per 31 day(s) retail)
VIGAMOX SOLN OP (<i>moxifloxacin hcl (ophth)</i>)	NP	QL(3 ML per fill retail)
Ophthalmic Decongestants		
<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>naphazoline w/ pheniramine 0.3 %-0.025 %</i>	C	QL(15 ML per 31 day(s) retail)

Drug Name	Drug Tier	Requirements/Limits
<i>tetrahydrozoline hcl (ophth) 0.05 %</i>	C	1 package(s) per 31 day(s) retail
Ophthalmic Immunomodulators		
CEQUA SOLN	NP	
<i>cyclosporine (ophth) EMUL</i>	NP	Brand Preferred
RESTASIS MULTIDOSE EMUL	P	
RESTASIS EMUL (<i>cyclosporine (ophth)</i>)	P	Brand Preferred
VERKAZIA EMUL	NP	
VEVYE SOLN	NP	
Ophthalmic Integrin Antagonists		
XIIDRA	P	
Ophthalmic Kinase Inhibitors		
RHOPRESSA	P	
ROCKLATAN	P	
Ophthalmic Local Anesthetics		
ALTACAINE 0.5 % (<i>tetracaine hcl (ophth)</i>)	C	
TETRACAINE HCL 0.5 %	C	
<i>tetracaine hcl (ophth)</i>	C	
Ophthalmic Steroids		
ALREX SUSP (<i>loteprednol etabonate</i>)	NP	
<i>bacitracin-poly-neomycin-hc</i>	P	
<i>dexamethasone sodium phosphate (ophth)</i>	P	
<i>difluprednate</i>	NP	Brand Preferred
DUREZOL (<i>difluprednate</i>)	P	Brand Preferred
EYSUVIS SUSP	NP	
FLAREX	P	
<i>fluorometholone (ophth) SUSP</i>	P	1 package(s) per 31 day(s) retail

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
FML FORTE SUSP	NP		TOBRADEX ST SUSP	NP	
FML LIQUIFILM SUSP (fluorometholone (ophth))	NP	1 package(s) per 31 day(s) retail	TOBRADEX OINT	NP	QL(4 GM per 31 day(s) retail)
INVELTYS SUSP	NP		<i>tobramycin-dexamethasone SUSP</i>	P	1 package(s) per 31 day(s) retail
LOTEMAX SM GEL	NP		ZYLET 0.3 %-0.5 % (loteprednol etabonate-tobramycin)	NP	
LOTEMAX GEL (loteprednol etabonate)	NP		Ophthalmics - Misc.		
LOTEMAX OINT	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 SUSP (neomycin-polymyx-dexameth)	NP	QL(10 ML per 31 day(s) retail)	<i>bepotastine besilate</i>	NP	
MAXITROL SUSP (neomycin-polymyx-dexameth)	NP	QL(10 ML per 31 day(s) retail)	BEPREVE (<i>bepotastine besilate</i>)	NP	
<i>neomycin-polymyx-dexameth OINT</i>	P	QL(4 GM per 31 day(s) retail)	<i>brinzolamide</i>	NP	Brand Preferred; 1 package(s) per 31 day(s) retail
<i>neomycin-polymyx-dexameth SUSP</i>	P	QL(10 ML per 31 day(s) retail)	<i>bromfenac sodium (ophth)</i>	NP	
<i>neomycin-polymyxin-hc (ophth)</i>	P	QL(15 ML per 31 day(s) retail)	BROMSITE (<i>bromfenac sodium (ophth)</i>)	NP	
PRED FORTE (prednisolone acetate (ophth))	NP	QL(15 ML per 31 day(s) retail)	<i>cromolyn sodium (ophth)</i>	P	QL(10 ML per 31 day(s) retail)
PRED MILD	P	1 package(s) per 31 day(s) retail	<i>diclofenac sodium (ophth)</i>	P	QL(3 ML per 31 day(s) retail)
<i>prednisolone acetate (ophth)</i>	P	QL(15 ML per 31 day(s) retail)	<i>dorzolamide hcl</i>	P	QL(10 ML per 31 day(s) retail)
PREDNISOLONE ACETATE P-F	C	QL(15 ML per 31 day(s) retail)	<i>epinastine hcl (ophth)</i>	NP	
PREDNISOLONE SODIUM PHOSPHATE	NP	1 package(s) per 31 day(s) retail	<i>flurbiprofen sodium</i>	P	QL(5 ML per 31 day(s) retail)
<i>sulfacetamide sod-prednisolone SOLN</i>	P	QL(10 ML per 31 day(s) retail)	ILEVRO	NP	
			<i>ketorolac tromethamine (ophth) 0.5 %</i>	P	1 package(s) per 31 day(s) retail

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Drug Name	Drug Tier	Requirements/Limits
<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	
OTIC AGENTS - Drugs to Treat the Ear		
Otic Agents - Miscellaneous		
<i>acetic acid (otic)</i>	C	QL(15 ML per 31 day(s) retail)
<i>carbamide peroxide (otic) 6.5 %</i>	C	QL(15 ML per 31 day(s) retail)
Otic Anti-infectives		
<i>ciprofloxacin hcl (otic)</i>	NP	
<i>ofloxacin (otic)</i>	P	1 package(s) per fill retail
Otic Combinations		

Drug Name	Drug Tier	Requirements/Limits
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)
OXYTOCICS - Drugs to Prevent/Control Uterine Bleeding		
Oxytocics		
<i>methylergonovine maleate TABS</i>	C	
PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System		
Immune Serums		
GAMMAGARD	C	SP; PA
GAMMAGARD ERC 5 GM/50ML, 10 GM/100ML	C	SP; PA

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
GAMMAGARD S/D LESS IGA SOLR	C	SP; PA	<i>amoxicillin & pot clavulanate SUSR 42.9 MG/5ML-600 MG/5ML, 57 MG/5ML-400 MG/5ML</i>	P	2 package(s) per fill retail
GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	C	SP; PA	<i>amoxicillin & pot clavulanate SUSR 28.5 MG/5ML-200 MG/5ML, 62.5 MG/5ML-250 MG/5ML</i>	P	1 package(s) per fill retail
GAMUNEX-C 1 GM/10ML, 2.5 GM/25ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	C	SP; PA	<i>amoxicillin & pot clavulanate SUSR 57 MG/5ML-400 MG/5ML</i>	C	2 package(s) per fill retail
HYPERRHO SOSY IM 1500 UNIT	C	SP	<i>amoxicillin & pot clavulanate SUSR 42.9 MG/5ML-600 MG/5ML, 57 MG/5ML-400 MG/5ML</i>	P	2 package(s) per fill retail
OCTAGAM SOLN 30 GM/300ML	C	SP; PA	<i>amoxicillin & pot clavulanate SUSR 42.9 MG/5ML-600 MG/5ML, 57 MG/5ML-400 MG/5ML</i>	P	2 package(s) per fill retail
RHOGAM ULTRA-FILTERED PLUS SOSY IM	C	SP	<i>amoxicillin & pot clavulanate TABS 125 MG-875 MG</i>	P	QL(20 EA per fill retail)
XEMBIFY	C	SP; PA	<i>amoxicillin & pot clavulanate TABS 125 MG-250 MG, 125 MG-500 MG</i>	P	QL(30 EA per fill retail)
PENICILLINS - Drugs to Treat Bacterial Infections					
Amidinopenicillins					
PIVYA TABS PO 185 MG	NP		<i>amoxicillin & pot clavulanate TB12</i>	P	QL(40 EA per 31 day(s) retail)
Aminopenicillins					
<i>amoxicillin CAPS</i>	P		AUGMENTIN ES-600 SUSR (<i>amoxicillin & pot clavulanate</i>)	NP	2 package(s) per fill retail
<i>amoxicillin CAPS</i>	P		AUGMENTIN SUSR 31.25 MG/5ML-125 MG/5ML	NP	1 package(s) per fill retail
<i>amoxicillin CHEW 125 MG, 250 MG</i>	P		AUGMENTIN SUSR 31.25 MG/5ML-125 MG/5ML	NP	1 package(s) per fill retail
<i>amoxicillin SUSR</i>	P		AUGMENTIN TABS 125 MG-500 MG (<i>amoxicillin & pot clavulanate</i>)	NP	QL(30 EA per fill retail)
<i>amoxicillin TABS</i>	P		Penicillinase-Resistant Penicillins		
<i>ampicillin CAPS 500 MG</i>	P		<i>dicloxacillin sodium</i>	P	
PHARMACEUTICAL ADJUVANTS					
Natural Penicillins					
EXTENCILLINE SUSR	C	QL(1 EA per 28 day(s) retail)	Liquid Vehicles		
LENTOCILIN SUSR	C	QL(1 EA per 28 day(s) retail)	SORBITOL XX	C	RX/OTC
<i>penicillin v potassium SOLR</i>	P		Semi Solid Vehicles		
<i>penicillin v potassium TABS</i>	P		LANOLIN XX	C	
Penicillin Combinations					
<i>amoxicillin & pot clavulanate CHEW</i>	P	QL(20 EA per fill retail)			

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Drug Name	Drug Tier	Requirements/Limits
PROGESTINS - Hormone Replacement/Modifying Drugs		
Progestins		
<i>medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG</i>	C	
<i>megestrol acetate (appetite)</i>	NP	
<i>norethindrone acetate TABS</i>	C	
<i>progesterone CAPS</i>	C	QL(1 EA daily)
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions		
Agents for Chemical Dependency		
<i>disulfiram 250 MG</i>	C	
Antidementia Agents		
ADLARITY PTWK	NP	
ARICEPT TABS 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 5 MG, 10 MG</i>	P	QL(1 EA daily)
<i>donepezil hydrochloride TABS 23 MG</i>	NP	
<i>donepezil hydrochloride TBDP</i>	P	
EXELON 4.6 MG/24HR, 9.5 MG/24HR (<i>rivastigmine</i>)	P	Brand Preferred; QL(1 EA daily)
EXELON 4.6 MG/24HR, 9.5 MG/24HR (<i>rivastigmine</i>)	P	QL(1 EA daily)
EXELON 13.3 MG/24HR (<i>rivastigmine</i>)	P	
EXELON 13.3 MG/24HR (<i>rivastigmine</i>)	P	Brand Preferred

Drug Name	Drug Tier	Requirements/Limits
<i>galantamine hydrobromide CP24</i>	NP	QL(1 EA daily)
<i>galantamine hydrobromide SOLN</i>	NP	QL(6 ML daily)
<i>galantamine hydrobromide TABS</i>	NP	QL(2 EA daily)
<i>memantine hcl CP24</i>	NP	
<i>memantine hcl-donepezil hcl CP24</i>	NP	
<i>memantine hcl SOLN</i>	P	QL(10 ML daily)
<i>memantine hcl TABS</i>	NP	
<i>memantine hcl TABS</i>	P	QL(2 EA daily)
NAMZARIC CP24 (<i>memantine hcl-donepezil hcl</i>)	NP	
NAMZARIC CP24	NP	
<i>rivastigmine 4.6 MG/24HR, 9.5 MG/24HR</i>	NP	Brand Preferred; QL(1 EA daily)
<i>rivastigmine 13.3 MG/24HR</i>	NP	Brand Preferred
<i>rivastigmine tartrate CAPS</i>	P	QL(2 EA daily)
ZUNVEYL TBEC PO 5 MG, 10 MG, 15 MG	NP	
Combination Psychotherapeutics		
LYBALVI	NP	AL(At least 18 yrs old); ST
<i>olanzapine-fluoxetine hcl 25 MG-3 MG, 25 MG-6 MG</i>	NP	AL(At least 10 yrs old); ST
<i>olanzapine-fluoxetine hcl 25 MG-12 MG, 50 MG-12 MG, 50 MG-6 MG</i>	NP	ST
<i>perphenazine-amitriptyline</i>	C	QL(4 EA daily)
Fibromyalgia Agents		
SAVELLA TITRATION PACK MISC (<i>milnacipran hcl</i>)	NP	QL(55 EA per 365 day(s) retail)

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SAVELLA TABS 12.5 MG, 25 MG, 50 MG, 100 MG (<i>milnacipran hcl</i>)	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		MAVENCLAD (7 TABS) 10 MG (<i> cladribine (multiple sclerosis)</i>)	NP	SP
AMPYRA (<i>dalfampridine</i>)	NP	SP	MAVENCLAD (8 TABS) 10 MG (<i> cladribine (multiple sclerosis)</i>)	NP	SP
AUBAGIO (<i>teriflunomide</i>)	NP	QL(1 EA daily); SP	MAVENCLAD (9 TABS) 10 MG (<i> cladribine (multiple sclerosis)</i>)	NP	SP
AVONEX PEN AJKT	P	SP	MAYZENT STARTER PACK TBPK 0.25 MG	NP	SP
AVONEX PREFILLED PSKT	P	SP	MAYZENT TABS	NP	SP
BAFIERTAM	NP	SP	PLEGRIDY STARTER PACK SOAJ	NP	SP
BETASERON KIT	P	SP	PLEGRIDY STARTER PACK SOSY SC	NP	SP
<i> cladribine (multiple sclerosis) 10 MG</i>	NP				
COPAXONE SOSY 20 MG/ML (<i> glatiramer acetate</i>)	P	Brand Preferred; SP			
COPAXONE SOSY 40 MG/ML (<i> glatiramer acetate</i>)	NP	SP			
<i>dalfampridine</i>	P				
<i>dalfampridine</i>	P	SP			
<i>dimethyl fumarate CDPK</i>	P	SP			
<i>dimethyl fumarate CPDR</i>	P				

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Drug Name	Drug Tier	Requirements/Limits
PLEGRIDY SOAJ	NP	SP
PLEGRIDY SOSY IM	NP	SP
PONVORY STARTER PACK TBPK	NP	
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
teriflunomide	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	
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)

Drug Name	Drug Tier	Requirements/Limits
<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)
<i>varenicline tartrate TBPK</i>	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	

RESPIRATORY AGENTS - MISC. - Drugs to Treat

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Drug Name	Drug Tier	Requirements/Limits
Lung Conditions		
Cystic Fibrosis Agents		
ORKAMBI PACK	C	SP; PA
ORKAMBI TABS	C	SP; PA
SYMDEKO	C	SP; PA
TRIKAFTA TBPk	C	QL(3 EA daily); SP; PA
Pulmonary Fibrosis Agents		
OFEV	C	SP; PA
<i>pirfenidone CAPS</i>	C	SP; PA
<i>pirfenidone TABS</i>	C	SP; PA
Respiratory Agents - Misc.		
BRINSUPRI TABS PO 10 MG, 25 MG	C	SP; PA
TETRACYCLINES - Drugs to Treat Bacterial Infections		
Aminomethylcyclines		
NUZYRA TABS	NP	
Tetracyclines		
<i>demeclocycline hcl TABS</i>	NP	
DORYX MPC TBEC 60 MG	NP	
<i>doxycycline (monohydrate) CAPS</i>	NP	
<i>doxycycline (monohydrate) SUSR</i>	NP	
<i>doxycycline (monohydrate) TABS</i>	NP	
<i>doxycycline hyclate CAPS</i>	P	
<i>doxycycline hyclate TABS</i>	P	
<i>doxycycline hyclate TBEC</i>	NP	
<i>minocycline hcl CAPS</i>	P	
<i>minocycline hcl TABS</i>	P	
<i>minocycline hcl TB24</i>	NP	
<i>tetracycline hcl CAPS</i>	P	

Drug Name	Drug Tier	Requirements/Limits
TETRACYCLINE HCL TABS	P	
THYROID AGENTS - Drugs to Regulate Thyroid Hormones		
Antithyroid Agents		
<i>methimazole TABS</i>	C	
<i>propylthiouracil</i>	C	
Thyroid Hormones		
ADTHYZA TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	C	
ARMOUR THYROID TABS	C	
EVEXITHROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG, 180 MG	C	
<i>levothyroxine sodium TABS</i>	C	
<i>liothyronine sodium TABS</i>	C	
NIVA THYROID TABS	C	
NP THYROID TABS	C	
RENTHYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	C	
THYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	C	
TOXOIDS		
Toxoid Combinations		
ADACEL SUSP	C	QL(0.5 ML per fill retail; 0.5 per fill mail)
ADACEL SUSY 2 LF/0.5ML-5 LF/0.5ML-15.5 MCG/0.5ML	C	QL(0.5 ML per fill retail; 0.5 per fill mail)
BOOSTRIX SUSP	C	QL(0.5 ML per fill retail; 0.5 per fill mail)
BOOSTRIX SUSY	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
TETANUS-DIPHtheria TOXoids TD SUSP	C	QL(0.5 ML per fill retail; 0.5 per fill mail)	ranitidine hcl TABS 150 MG	NP	QL(2 EA daily)
ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions			Misc. Anti-Ulcer		
Antispasmodics			sucralfate SUSP		
dicyclomine hcl CAPS	C			C	QL(420 ML per fill retail)
dicyclomine hcl SOLN PO	C	QL(496 ML per 31 day(s) retail)	sucralfate TABS		
dicyclomine hcl TABS	C		Proton Pump Inhibitors		
glycopyrrolate TABS 1 MG, 2 MG	C	QL(4 EA daily)	DEXILANT (dexlansoprazole)		
hyoscyamine sulfate ELIX	C		dexlansoprazole		
hyoscyamine sulfate SOLN PO 0.125 MG/ML	C		esomeprazole magnesium CPDR 20 MG		
hyoscyamine sulfate SUBL 0.125 MG	C		esomeprazole magnesium CPDR 40 MG		
hyoscyamine sulfate TABS 0.125 MG	C		esomeprazole magnesium PACK		
hyoscyamine sulfate TB12 0.375 MG	C	QL(4 EA daily)	lansoprazole CPDR 15 MG		
hyoscyamine sulfate TBDP 0.125 MG	C		lansoprazole CPDR 30 MG		
NULEV TBDP 0.125 MG (hyoscyamine sulfate)	C		lansoprazole TBDD		
OSCIMIN SUBL 0.125 MG (hyoscyamine sulfate)	C		NEXIUM CPDR 20 MG (esomeprazole magnesium)		
OSCIMIN TABS 0.125 MG (hyoscyamine sulfate)	C		NEXIUM CPDR 40 MG (esomeprazole magnesium)		
H-2 Antagonists			NEXIUM PACK (esomeprazole magnesium)		
cimetidine hcl PO 300 MG/5ML	NP		omeprazole magnesium TBEC		
cimetidine TABS	NP	RX/OTC	omeprazole CPDR		
famotidine SUSR	P		omeprazole TBEC		
famotidine TABS 20 MG, 40 MG	P	RX/OTC	pantoprazole sodium PACK		
famotidine TABS 10 MG	C		pantoprazole sodium TBEC 40 MG		
nizatidine CAPS	NP		pantoprazole sodium TBEC 20 MG		
ranitidine hcl TABS 300 MG	NP	QL(1 EA daily)			

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

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

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Drug Name	Drug Tier	Requirements/Limits
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)
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)

Drug Name	Drug Tier	Requirements/Limits
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)
TRUMENBA 0.5 ML	C	
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	
AFLURIA PRESERVATIVE FREE SUSY	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
AFLURIA SUSP	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
AREXVY	C	AL(At least 60 yrs old)
COMIRNATY 5-11 YEARS SUSP 10 MCG/0.3ML	C	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
COMIRNATY SUSY	C		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 SUSP 20 MCG/ML	C	3 max fill(s) per 999 day(s) retail	FLUZONE SUSP	C	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 SUSY	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
ERVEBO	C		GARDASIL 9 SUSP 0.5 ML	C	3 max fill(s) per 999 day(s) retail; AL(Up to 45 yrs old)
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	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	HAVRIX IM 720 EL U/0.5ML, 1440 EL U/ML	C	
FLUBLOK SOSY	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail	HEPLISAV-B SOSY	C	3 max fill(s) per 999 day(s) retail
FLUCELVAX SUSP	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail	IMOVAX RABIES SUSR	C	
FLUCELVAX SUSY	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail	IPOL IJ	C	
FLULAVAL SUSY	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail	IXIARO	C	
FLUMIST	C	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail	JYNNEOS	C	
			M-M-R II SOLR	C	
			MNEXSPIKE SUSY 10 MCG/0.2ML	C	
			MRESVIA	C	AL(Up to 60 yrs old)
			NUVAXOVID COVID-19 VACCINE SUSY 5 MCG/0.5ML	C	1 max fill(s) per 180 day(s) mail
			PREHEVBRIO	C	3 max fill(s) per 999 day(s) retail
			PRIORIX SUSR	C	
			RABAVERT	C	

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Drug Name	Drug Tier	Requirements/Limits
RECOMBIVAX HB SUSP	C	3 max fill(s) per 999 day(s) retail
RECOMBIVAX HB SUSY	C	3 max fill(s) per 999 day(s) retail
SHINGRIX	C	2 max fill(s) per 999 day(s) retail; AL(At least 50 yrs old)
SPIKEVAX 6M-11Y SUSY 25 MCG/0.25ML	C	
SPIKEVAX SUSY	C	
STAMARIL SUSR	C	
TICOVAC	C	
TWINRIX SUSY	C	
VAQTA	C	
VAQTA IM 25 UNIT/0.5ML, 50 UNIT/ML	C	
VARIVAX SUSR	C	2 max fill(s) per 999 day(s) retail
YF-VAX SUSR	C	
VAGINAL AND RELATED PRODUCTS		
Vaginal Anti-infectives		
<i>clindamycin phosphate vaginal CREA</i>	C	
<i>clotrimazole vaginal CREA 1 %</i>	C	QL(45 GM per 31 day(s) retail)
<i>clotrimazole vaginal CREA 2 %</i>	C	QL(21 GM per 31 day(s) retail)
GYNAZOLE-1	C	
<i>metronidazole vaginal</i>	C	
MICONAZOLE 7 SUPP 100 MG	C	QL(7 EA per 31 day(s) retail)
<i>miconazole nitrate vaginal CREA 2 %</i>	C	QL(45 GM per 31 day(s) retail)
<i>miconazole nitrate vaginal KIT</i>	C	1 package(s) per fill retail
<i>miconazole nitrate vaginal SUPP 100 MG</i>	C	QL(7 EA per 31 day(s) retail)

Drug Name	Drug Tier	Requirements/Limits
<i>miconazole nitrate vaginal SUPP 200 MG</i>	C	QL(3 EA per fill retail; 3 EA per 31 day(s) retail)
<i>terconazole vaginal CREA</i>	C	
<i>terconazole vaginal SUPP</i>	C	
<i>tioconazole vaginal 6.5 %</i>	C	
VANDAZOLE	C	
Vaginal Estrogens		
<i>estradiol vaginal CREA</i>	C	QL(43 GM per 31 day(s) retail)
<i>estradiol vaginal TABS</i>	C	
PREMARIN	C	
VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions		
Anaphylaxis Therapy Agents		
AUVI-Q SOAJ 0.3 MG/0.3ML	NP	QL(0.067 EA daily; 4 EA per 365 day(s) retail)
AUVI-Q SOAJ 0.1 MG/0.1ML, 0.15 MG/0.15ML	NP	
<i>epinephrine (anaphylaxis) SOAJ 0.3 MG/0.3ML</i>	NP	QL(0.067 EA daily; 4 EA per 365 day(s) retail)
<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 0.15 MG/0.15ML</i>	NP	

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

Drug Name	Drug Tier	Requirements/Limits
niacin TBCR	C	
pyridoxine hcl TABS 25 MG, 50 MG, 100 MG	C	
riboflavin TABS	C	QL(3.34 EA daily)
thiamine hcl TABS 100 MG	C	QL(3.34 EA daily)
thiamine hcl TABS 50 MG, 250 MG	C	
thiamine mononitrate TABS 100 MG	C	QL(3.34 EA daily)

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50+ ADULT EYE HEALTH CAPS 150 MG-30 UNIT-5 MG-1 MG-1 MG-9 MG-90 MG-160 MG-250 MG 81	MG 81	50 MCG-150 MCG-60 UNIT-20 MG- 0.7 MG-5 MCG-4 MG-100 MCG-10 MCG-60 MCG-72 MG 82
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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 MG83	ABILIFY ASIMTUFII PRSY 42	MG/20.3ML8
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ACULAR (ketorolac tromethamine (ophth))	123	ADALIMUMAB-ADBM (2 PEN) AJKT 4	4	ADLARITY PTWK	126
ACULAR LS (ketorolac tromethamine (ophth))	123	ADALIMUMAB-ADBM (2 SYRINGE) PSKT	4	ADMELOG SOLN IJ	26
ACUVAIL	123	ADALIMUMAB-ADBM(CD/UC/HS STRT) AJKT	4	ADMELOG SOLOSTAR SOPN	26
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acyclovir TABS PO 800 MG	47	ADALIMUMAB-RYVK (1 PEN) AJKT 80 MG/0.8ML	4	ADVAIR HFA AERO (fluticasone- salmeterol)	15
acyclovir topical CREA	58	ADALIMUMAB-RYVK (2 PEN) AJKT 4	4	ADVANCED EYE HEALTH CAPS	83
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ADALIMUMAB-AATY (2 PEN) AJKT	4	ADALIMUMAB-ADAZ SOAJ	4	AEROCHAMBER PLUS FLO-VU MEDIUM MISC	75
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ADALIMUMAB-ADAZ SOAJ	4	ADBRY SOSY	60		
		ADCIRCA TABS (tadalafil (pulmonary hypertension))	50		
		ADDERALL TABS (amphetamine- dextroamphetamine)	1		
		ADDERALL XR CP24 (amphetamine-dextroamphetamine)	1		

SMALL DEVI	75	AJOVY SOAJ	77	ALIVE MENS 50+ TABS	83
AEROCHAMBER PLUS FLO-VU SMALL MISC	75	AJOVY SOSY	77	ALIVE MENS 50+ ULTRA TABS ..	83
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AEROCHAMBER Z-STAT PLUS CHAMBR MISC	75	albuterol sulfate AERS	15	ALIVE ONCE DAILY WOMENS TABS	84
AEROCHAMBER Z-STAT PLUS MISC	75	albuterol sulfate NEBU 0.083 % ..	15	ALIVE ULTRA POTENCY ADULT TABS	84
AEROCHAMBER Z-STAT PLUS/LARGE MISC	75	albuterol sulfate NEBU 0.63 MG/3ML, 1.25 MG/3ML	15	ALIVE ULTRA POTENCY WOMENS 50+ TABS	84
AEROCHAMBER Z-STAT PLUS/MEDIUM MISC	75	albuterol sulfate NEBU	15	ALIVE WOMENS 50+ COMPLETE MV TABS	84
AEROCHAMBER Z-STAT PLUS/SMALL MISC	75	albuterol sulfate SYRP	15	ALIVE WOMENS ENERGY TABS	84
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AFLURIA SUSP	132	alendronate sodium TABS 10 MG	64	almotriptan malate	77
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ALTACAINE 0.5 % (tetracaine hcl (ophth))	SOSY	125 MG-875 MG	122	4	125
ALTACE CAPS 1.25 MG, 5 MG, 10 MG (ramipril)	AMJEVITA-PED 15KG TO <30KG SOSY	amoxicillin & pot clavulanate TB12	34	4	125
ALTOPREV TB24 20 MG, 40 MG, 60 MG	AMLADEX TABS	amoxicillin CAPS	33	115	125
ALTRIXA TABS	amlodipine besylate TABS	amoxicillin CHEW 125 MG, 250 MG	115	48	125
alum & mag hydrox-simethicone LIQD	amlodipine besylate-atorvastatin calcium	amoxicillin SUSR	12	49	125
alum & mag hydrox-simethicone SUSP 1200 MG/30ML-1200 MG/30ML-200 MG/30ML, 200 MG/5ML-20 MG/5ML-200 MG/5ML, 400 MG/10ML-40 MG/10ML-400 MG/10ML	amlodipine besylate-benazepril hcl 35	amoxicillin TABS	12	35	125
ALUMINUM HYDROXIDE GEL SUSP	amlodipine besylate-olmesartan medoxomil	amoxicillin-clarithromycin w/ lansoprazole THPK	12	35	131
ALVESCO	amlodipine besylate-valsartan 10 MG-160 MG, 10 MG-320 MG, 5 MG-320 MG	amphetamine sulfate TABS	14	35	1
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amantadine hcl SOLN	amlodipine-valsartan-hydrochlorothiazide	amphetamine-dextroamphetamine CP24 12.5 MG, 25 MG, 37.5 MG, 50 MG	38	35	1
amantadine hcl TABS	AMORYN MOOD BOOSTER CAPS 10 MG-25 MG-20 MG-300 MCG-400 MCG-90 MCG-18 MG	amphetamine-dextroamphetamine CP24 5 MG, 10 MG, 15 MG, 20 MG, 25 MG, 30 MG	38	84	1
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ambrisentan	amoxicillin & pot clavulanate SUSR 28.5 MG/5ML-200 MG/5ML, 62.5 MG/5ML-250 MG/5ML	AMPYRA (dalfampridine)	49	125	127
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BD INSULIN SYR ULTRAFINE II .	73	benzoyl peroxide LIQD 5 %, 10 % .	BETAPACE TABS 80 MG, 120 MG, 160 MG (sotalol hcl)	48
BD INSULIN SYRINGE	73	benzoyl peroxide LOTN 5 %, 10 % 54	BETASERON KIT	127
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BD INSULIN SYRINGE U/F	73	benzoyl peroxide-erythromycin GEL . 54	betaxolol hcl	47
BD INSULIN SYRINGE ULTRAFINE	73	benztropine mesylate TABS	bethanechol chloride	131
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BELSOMRA	70	betamethasone dipropionate augmented GEL 0.05 %	bimatoprost SOLN	124
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bisacodyl TBEC	70		
bismuth subsalicylate CHEW 262 MG	30	
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bisoprolol & hydrochlorothiazide 6.25	MG-10 MG, 6.25 MG-5 MG	35	
bisoprolol & hydrochlorothiazide 6.25	MG-2.5 MG	35	
bisoprolol fumarate	47		
bisoprolol fumarate 2.5 MG	47		
BLOOD SUGAR MANAGER TABS	84		
BLUJEP A TABS PO 750 MG	37		
BODY/HAIR/SKIN/NAI LS 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	84	
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	MG-0.15 MG-0.8 MG-50 MCG-25		
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	BREATHE COMFORT		
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	BREATHE EASE MEDIUM DEVI ..	75	
	BREATHE EASE SMALL DEVI ...	75	
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	CHAMBER DEVI	75	
	BREO ELLIPTA (fluticasone furoate-		
	vilanterol)	15	
	BREO ELLIPTA	15	
	BREZTRI AEROSPHERE	15	
	BRILINTA 60 MG, 90 MG (ticagrelor)		
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	brimonidine tartrate 0.1 %, 0.15 %		
	brimonidine tartrate 0.2 %	121	
	brimonidine tartrate-timolol maleate .		
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	BRINSUPRI TABS PO 10 MG, 25		
	MG	129	
	brinzolamide	123	
	brivaracetam SOLN PO 10 MG/ML		
	18		
	brivaracetam TABS 10 MG, 25 MG,		
	50 MG, 75 MG, 100 MG	18	
	BRIVIACT SOLN PO 10 MG/ML		
	(brivaracetam)	18	
	BRIVIACT TABS 10 MG, 25 MG, 50		
	MG, 75 MG, 100 MG (brivaracetam) .		
	19		
	BRIXADI (WEEKLY) SOSY	11	
	BRIXADI SOSY 64 MG/0.18ML, 96		
	MG/0.27ML, 128 MG/0.36ML	11	
	bromfenac sodium (ophth)	123	
	bromocriptine mesylate CAPS	39	
	bromocriptine mesylate TABS 2.5		
	MG	39	
	brompheniramine & phenyleph ELIX .		
	53		
	BROMSITE (bromfenac sodium		
	(ophth))	123	
	BROVANA (arformoterol tartrate) .		
	15		
	BRYNOVIN SOLN PO 25 MG/ML .		
	26		
	budesonide (inhalation) SUSP 0.25		
	MG/2ML, 0.5 MG/2ML	15	
	budesonide (inhalation) SUSP 1		
	MG/2ML	15	
	budesonide (intrarectal)	12	

budesonide (nasal)	120	butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG	7	calcitriol CAPS	64
budesonide CPEP	51	butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG	7	calcium acetate (phosphate binder) CAPS	67
budesonide TB24	51	butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-300 MG	10	calcium acetate (phosphate binder) TABS	67
budesonide-formoterol fumarate dihydrate	16	butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG	10	calcium carbonate (antacid) CHEW 500 MG	13
bumetanide TABS	63	butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG	10	calcium carbonate-cholecalciferol TABS 10 MCG-600 MG, 400 UNIT- 600 MG	78
buprenorphine hcl SUBL	11	butalbital-aspirin-caffeine CAPS	7	calcium carbonate-cholecalciferol TABS 200 UNIT-500 MG, 5 MCG- 500 MG, 500 MG-5 MCG	78
buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG	11	butalbital-aspirin-caffeine w/cod ...	10	calcium polycarbophil TABS	70
buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG ...	11	butorphanol tartrate NA 10 MG/ML 11		CAM LOTN	60
buprenorphine hcl-naloxone hcl dihydrate FILM SL	11	BUTRANS PTWK (buprenorphine) 11		camphor & menthol LOTN	56
buprenorphine hcl-naloxone hcl dihydrate SUBL 0.5 MG-2 MG	11	BYDUREON BCISE AUIJ	26	CANASA SUPP (mesalamine)	66
buprenorphine hcl-naloxone hcl dihydrate SUBL 2 MG-8 MG	11	BYSTOLIC (nebivolol hcl)	47	candesartan cilexetil	34
buprenorphine PTWK	11	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)	49	candesartan cilexetil- hydrochlorothiazide	35
bupropion hcl (smoking deterrent) 128		caffeine citrate SOLN PO	1	CAPEX SHAM	58
bupropion hcl TABS	22	calcipotriene CREA	56	CAPLYTA	39
bupropion hcl TB12 100 MG	22	CALCIPOTRIENE FOAM	56	capsaicin CREA 0.025 %, 0.035 %, 0.075 %, 0.1 %	61
bupropion hcl TB12 150 MG	22	calcipotriene OINT	56	captopril & hydrochlorothiazide 15 MG-25 MG, 15 MG-50 MG, 25 MG- 25 MG	35
bupropion hcl TB12 200 MG	22	calcipotriene SOLN	56	captopril & hydrochlorothiazide 25 MG-50 MG	35
bupropion hcl TB24 150 MG	22	calcipotriene-betamethasone dipropionate OINT	58	captopril	34
bupropion hcl TB24 300 MG	22	calcipotriene-betamethasone dipropionate SUSP	58	CAPVAXIVE	131
bupropion hcl TB24 450 MG	22	calcitonin (salmon) IJ	64	CARBAGLU (carglumic acid)	64
buspiron hcl 15 MG	13	calcitonin (salmon) NA	64	carbamazepine CHEW	19
buspiron hcl 5 MG, 10 MG	13	calcitriol (topical)	56	carbamazepine CP12	19
buspiron hcl 7.5 MG, 30 MG	13				
butalbital-acetaminophen TABS 50 MG-325 MG	7				

carbamazepine SUSP	19	cefadroxil SUSR	50	mofetil)	79
carbamazepine TABS	19	cefadroxil TABS	50	CELLCEPT SUSR (mycophenolate mofetil)	79
carbamazepine TB12	19	cefdinir CAPS	50	CELLCEPT TABS (mycophenolate mofetil)	79
carbamide peroxide (otic) 6.5 % ..	124	cefdinir SUSR	50	CELONTIN (methsuximide)	21
CARBATROL CP12 (carbamazepine)	19	cefixime CAPS	50	CENTANY AT KIT	55
carbidopa	38	cefixime SUSR	50	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	85
carbidopa-levodopa CPCR	39	cefixime TABS	50	CENTRAVITES 50 PLUS TABS ...	85
carbidopa-levodopa TABS 100 MG- 25 MG	39	cefpodoxime proxetil SUSR	50	CENTRAVITES ADULTS TABS ...	85
carbidopa-levodopa TABS	39	cefpodoxime proxetil TABS	50	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	85
carbidopa-levodopa TBCR	39	cefprozil SUSR 125 MG/5ML	50	CENTRUM CARDIO TABS	85
carbidopa-levodopa TBCR	39	cefprozil SUSR 250 MG/5ML	50	CENTRUM MEN TABS	85
carbidopa-levodopa TBDP	39	cefprozil TABS	50	CENTRUM MENOPAUSE HOT FLASH TABS	85
carbidopa-levodopa-entacapone ..	39	ceftriaxone sodium IJ 1 GM, 250 MG, 500 MG	50	CENTRUM MENOPAUSE MIND/MOOD TABS	115
CARDURA (doxazosin mesylate) .	34	cefuroxime axetil TABS 250 MG ..	50	CENTRUM MINIS ADULTS 50+ TABS	85
CARDURA XL	67	cefuroxime axetil TABS 500 MG ..	50	CENTRUM MINIS MEN 50+ TABS 85	
CAREONE INSULIN SYRINGE ...	73	CELEBRATE MULTI-COMplete 18 CAPS	85	CENTRUM MINIS WOMEN 50+ TABS	85
CARETOUCH INSULIN SYRINGE 73		CELEBRATE MULTI-COMplete 36 CAPS	85		
carglumic acid	64	CELEBRATE MULTI-COMplete 45 CAPS	85		
carisoprodol TABS	119	CELEBRATE MULTI-COMplete 60 CAPS	85		
carteolol hcl (ophth)	121	CELEBREX (celecoxib)	6		
carvedilol 25 MG	47	celecoxib	6		
carvedilol 3.125 MG, 6.25 MG, 12.5 MG	47	CELEXA TABS 10 MG (citalopram hydrobromide)	22		
carvedilol phosphate	47	CELEXA TABS 20 MG (citalopram hydrobromide)	22		
CASGEVY	68	CELEXA TABS 40 MG (citalopram hydrobromide)	22		
CAYSTON	37	CELLCEPT CAPS (mycophenolate			
cefaclor CAPS	50				
CEFACTOR ER TB12	50				
cefadroxil CAPS	50				

CENTRUM MINIS WOMEN IMMUNE SUP TABS	85	CERDELGA	68	chloroquine phosphate TABS 250 MG	37
CENTRUM PERFORMANCE TABS . 118		CEREZYME 400 UNIT	68	chloroquine phosphate TABS 500 MG	37
CENTRUM SILVER ULTRA WOMENS TABS	85	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	86	chlorpheniramine maleate SYRP ..	31
CENTRUM SPECIALIST ENERGY TABS	118			chlorpheniramine maleate TABS ..	31
CENTRUM SPECIALIST HEART TABS	85	CERTAVITE SENIOR TABS	86	chlorpromazine hcl TABS 10 MG ..	42
CENTRUM SPECIALIST IMMUNE TABS	85	CERTAVITE SENIOR/ANTIOXIDANT TABS ...	86	chlorpromazine hcl TABS 25 MG, 50 MG, 100 MG, 200 MG	42
CENTRUM SPECIALIST VISION TABS	85	CERTAVITE/ANTIOXIDANTS TABS .	86	chlorthalidone 25 MG, 50 MG	63
CENTRUM ULTRA WOMENS TABS	85			chlorzoxazone TABS	119
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	86	cetirizine hcl CHEW	31	CHOICEFUL MULTIVITAMIN CAPS .	86
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	86	cetirizine hcl SOLN PO	32	cholecalciferol CAPS 1.25 MG, 1250 MCG, 50000 UNIT	135
cephalexin CAPS	50	cetirizine hcl TABS	32	cholecalciferol CAPS 125 MCG, 5000 UNIT, 125 MCG	135
cephalexin SUSR	50	cetirizine-pseudoephedrine	53	cholecalciferol CAPS	135
cephalexin TABS	50	CHANTIX CONTINUING MONTH PAK TABS (varenicline tartrate) ..	128	cholecalciferol LIQD PO 10 MCG/ML	135
CEQUA SOLN	122	CHANTIX STARTING MONTH PAK TBPK (varenicline tartrate)	128	cholestyramine light PACK	32
		CHANTIX TABS 0.5 MG (varenicline tartrate)	128	cholestyramine light POWD	32
		CHANTIX TABS 1 MG (varenicline tartrate)	128	cholestyramine PACK	32
		CHEMET	30	cholestyramine POWD	32
		CHEMSTRIP K STRP	62	choline fenofibrate	32
		chlordiazepoxide hcl CAPS	13	CIBINQO	60
		chlorhexidine gluconate (mouth-throat)	80	ciclopirox GEL	55
		chlorhexidine gluconate SOLN EX 4 %	43	ciclopirox KIT	55
				ciclopirox olamine CREA	55
				ciclopirox olamine SUSP	55
				ciclopirox SHAM	55
				ciclopirox SOLN	55

cilostazol	68	CITRACAL +D3 TABS	86	clindamycin phosphate-tretinoin ..	54
CILOXAN OINT	122	cladribine (multiple sclerosis) 10 MG .	127	clobazam SUSP	18
CIMDUO	44	CLARINEX TABS (desloratadine) .	32	clobazam TABS	18
cimetidine hcl PO 300 MG/5ML ..	130	CLARINEX-D 12 HOUR TB12	53	clobetasol propionate CREA 0.025 %	58
cimetidine TABS	130	clarithromycin SUSR 125 MG/5ML	71	58
CIMZIA (1 SYRINGE) PSKT 200		clarithromycin SUSR 250 MG/5ML	71	clobetasol propionate CREA 0.05 % .	58
MG/ML	66	clarithromycin TABS	71	0.05 %	58
CIMZIA (2 SYRINGE) PSKT	66	clarithromycin TB24	71	clobetasol propionate emollient base	58
CIMZIA KIT	66	CLENPIQ SOLN 12 GM/175ML-3.5		0.05 %	58
CIMZIA-STARTER PSKT	66	GM/175ML-10 MG/175ML	70	clobetasol propionate emulsion ...	58
CIPRO HC 1 %-0.2 % (ciprofloxacin-		CLEOCIN-T LOTN (clindamycin		clobetasol propionate FOAM	58
hydrocortisone)	124	phosphate (topical))	54	clobetasol propionate GEL 0.05 %	58
CIPRO SUSR	65	CLEVER CHOICE HOLDING		clobetasol propionate LIQD	58
CIPRO TABS 250 MG, 500 MG		CHAMBER DEVI	75	clobetasol propionate LOTN	58
(ciprofloxacin hcl)	65	clindamycin hcl 150 MG, 300 MG .	37	clobetasol propionate OINT 0.05 %	58
ciprofloxacin hcl (ophth) SOLN ...	122	clindamycin palmitate hydrochloride .	37	58	
ciprofloxacin hcl (otic)	124	clindamycin phosphate (topical)		clobetasol propionate SHAM	58
ciprofloxacin hcl TABS 250 MG, 500		FOAM	54	clobetasol propionate SOLN 0.05 % .	58
MG, 750 MG	65	clindamycin phosphate (topical) GEL	54	58	
ciprofloxacin-dexamethasone	124	clindamycin phosphate (topical)		CLOBEX SHAM (clobetasol	
ciprofloxacin-fluocinolone acetonide .	124	LOTN	54	propionate)	58
124		clindamycin phosphate (topical)		CLOBEX SPRAY LIQD (clobetasol	
ciprofloxacin-hydrocortisone	124	SOLN	54	propionate)	58
CITALOPRAM HYDROBROMIDE		clindamycin phosphate (topical)		clocortolone pivalate	58
CAPS 30 MG (citalopram		SWAB	54	clomipramine hcl 75 MG	24
hydrobromide)	22	clindamycin phosphate vaginal CREA		clonazepam TABS	18
citalopram hydrobromide SOLN ...	22	134	clonidine hcl (adhd) TB12	2
citalopram hydrobromide TABS 10		clindamycin phosphate-benzoyl		clonidine hcl TABS	34
MG	22	peroxide (refrigerate)	54	clonidine PTWK	34
citalopram hydrobromide TABS 20		clindamycin phosphate-benzoyl		clonidine TB24	34
MG	22	peroxide GEL	54	clopidogrel bisulfate 300 MG	68
citalopram hydrobromide TABS 40				clopidogrel bisulfate 75 MG	68
MG	22				

clorazepate dipotassium TABS	13	colesevelam hcl PACK	32	COMPLERA 200 MG-300 MG-25 MG (emtricitabine- rilpivirine-tenofovir disoproxil fumarate)	44
clotrimazole (topical) CREA	55	colesevelam hcl TABS	32	CONCERTA TBCR 18 MG, 27 MG, 54 MG (methylphenidate hcl)	2
clotrimazole (topical) SOLN	55	COLESTID GRAN (colestipol hcl)	32	CONCERTA TBCR 36 MG (methylphenidate hcl)	2
clotrimazole vaginal CREA 1 %	134	COLESTID TABS (colestipol hcl)	32	CONDYLOX GEL (podofilox)	61
clotrimazole vaginal CREA 2 %	134	colestipol hcl GRAN	32	CONZIP CP24 (tramadol hcl)	8
clotrimazole w/ betamethasone CREA	55	colestipol hcl PACK	32	COPAXONE SOSY 20 MG/ML (glatiramer acetate)	127
clotrimazole w/ betamethasone LOTN	55	colestipol hcl TABS	32	COPAXONE SOSY 40 MG/ML (glatiramer acetate)	127
clozapine TABS 100 MG	41	COMBIGAN (brimonidine tartrate- timolol maleate)	121	CORAL CALCIUM PLUS CAPS	86
clozapine TABS 200 MG	41	COMBIPATCH PTTW	65	CORTEF TABS (hydrocortisone)	51
clozapine TABS 25 MG, 50 MG	41	COMBIVENT RESPIMAT AERS	16	CORTISONE ACETATE TABS	52
clozapine TBDP 100 MG	41	COMFORT EZ INSULIN SYRINGE	73	CORTISPORIN-TC	124
clozapine TBDP 12.5 MG, 25 MG	41	COMIRNATY 5-11 YEARS SUSP 10 MCG/0.3ML	132	COSENTYX (300 MG DOSE) SOSY	56
clozapine TBDP 150 MG	41	COMIRNATY SUSY	133	COSENTYX SENSOREADY (300 MG) SOAJ	56
clozapine TBDP 200 MG	41	COMPACT SPACE CHAMBER DEVI	75	COSENTYX SENSOREADY PEN SOAJ	56
CLOZARIL TABS 100 MG (clozapine)	42	COMPACT SPACE CHAMBER/LG MASK DEVI	75	COSENTYX SOSY	57
CLOZARIL TABS 200 MG (clozapine)	41	COMPACT SPACE CHAMBER/MED MASK DEVI	75	COSENTYX UNOREADY SOAJ	57
CLOZARIL TABS 25 MG, 50 MG (clozapine)	42	COMPACT SPACE CHAMBER/SM MASK DEVI	75	COSOPT (dorzolamide hcl-timolol maleate)	121
coal tar extract SHAM 0.5 %	62	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	86	COSOPT PF (dorzolamide hcl- timolol maleate)	121
COARTEM	37	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	86	COTEMPLA XR-ODT TBED	2
COBENFY CAPS	42			COXANTO CAPS (oxaprozin)	6
COBENFY STARTER PACK CPPK 42				COZAAR (losartan potassium)	34
codeine sulfate TABS 30 MG	8			CREON CPEP 120000 UNIT-76000 UNIT-24000 UNIT, 180000 UNIT-	
CODEINE SULFATE TABS	8				
colchicine CAPS	67				
colchicine TABS	67				
colchicine w/ probenecid	67				

114000 UNIT-36000 UNIT, 30000 UNIT-19000 UNIT-6000 UNIT, 60000 UNIT-38000 UNIT-12000 UNIT 63	CVS EYE HEALTH & LUTEIN TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG 87	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 87
CREON CPEP 15000 UNIT-9500 UNIT-3000 UNIT 63	CVS EYE HEALTH ADULT 50+ CAPS 87	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 88
CRESEMBA CAPS 31	CVS HAIR/SKIN/NAILS TABS ... 118	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 88
CRESTOR TABS (rosuvastatin calcium) 33	CVS IMMUNE SUPPORT CAPS .. 87	CVS SPECTRAVITE SENIOR TABS 60 MG-3 MG-30 MCG-400 MCG-500 87
CREXONT CPCR 39	CVS MENOPAUSE SUPPORT TABS 118	
cromolyn sodium (ophth) 123	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 87	
cromolyn sodium NEBU 14	CVS ONE DAILY MENS 50+ ADV TABS 87	
crotamiton LOTN 62	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 87	
CTEXLI TABS PO 250 MG 65	CVS ONE DAILY WOMENS 50+ ADV TABS 87	
CULTURELLE PROBIOTIC MEN DAILY CAPS 86	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 87	
CVS ADULT 50+ EYE HEALTH CAPS 86		
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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 86		
CVS DAILY MULTIV/MINERAL MENS TABS 86		
CVS DAILY MULTIVITAMIN MENS TABS 86		
CVS DAILY MULTIVITAMIN WOMENS TABS 87		

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 MG88	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 MG88	24
CVS SPECTRAVITE ULTRA MEN 50+ TABS88	CVS VISION HEALTH CAPS89	cyproheptadine hcl SYRP 32
CVS SPECTRAVITE ULTRA MENS TABS88	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 89	cyproheptadine hcl TABS32
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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 MG88	cyclobenzaprine hcl CP24119	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 MCG89
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 MG89	cyclobenzaprine hcl TABS 5 MG, 10 MG119	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 UNIT89
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	cyclobenzaprine hcl TABS 7.5 MG 119	DAILY MULTIPLE VITAMINS TABS . 115
	CYCLOGYL 0.5 %121	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 MCG89
	CYCLOGYL 2 %121	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 MCG89
	cyclopentolate hcl 1 %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 UNIT115
	cyclosporine (ophth) EMUL122	
	cyclosporine CAPS 79	
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	cyclosporine modified (for microemulsion) SOLN 79	
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	CYLTEZO (2 SYRINGE) PSKT4	
	CYLTEZO-CD/UC/HS STARTER AJKT4	
	CYLTEZO-PSORIASIS/UV STARTER AJKT4	
	CYMBALTA CPEP (duloxetine hcl)	

DAILY VITAMINS TABS 60 MG-2 MG-0.4 MG-1.5 MG-400 UNIT-6 MCG-1.7 MG-20 MG-5000 UNIT .115	DAYPRO TABS (oxaprozin) 6 115	DERMACINRX LIDOCAINE CREA 3 % 61
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 115	DAYTRANA PTCH (methylphenidate) 2	DERMACINRX MULTITAM TABS .89
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 115	DAYVIGO 70	DERMACINRX MULTIVITAMIN CHEW 115
DAILY-VITE MULTIVITAMIN TABS 60 MG-2 MG-400 MCG-20 MG-1.5 MG-10 MCG-6 MCG-1.7 MG-1500 MCG 115	DECUBI-VITE CAPS 89	DERMACINRX RIBOTIN-E TABS .89
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 115	deferasirox PACK 30	DERMACINRX SALICYLIC ACID GEL 6 % 61
dalfampridine 127	deferasirox TABS 30	DERMACINRX ZINTREXYL-C TABS 89
DALIRESP (roflumilast) 14	deferasirox TBSO 30	DERMA-SMOOTH/FS BODY OIL (fluocinolone acetonide) 59
DANTRIUM CAPS 25 MG (dantrolene sodium) 120	deflazacort SUSP 52	DERMA-SMOOTH/FS SCALP OIL (fluocinolone acetonide) 59
dantrolene sodium CAPS 120	deflazacort TABS 52	DERMAVITE TABS 89
dapagliflozin propanediol 29	DEKAS PLUS CAPS 89	DESCOVY 120 MG-15 MG 44
dapagliflozin propanediol-metformin hcl 25	DEKAS PLUS OCEAN CAPS 89	DESCOVY 200 MG-25 MG 44
dapsone (topical) 54	DELSTRIGO 44	desipramine hcl TABS 10 MG, 50 MG, 75 MG, 100 MG, 150 MG 24
dapsone 37	demeclocycline hcl TABS 129	desipramine hcl TABS 25 MG 24
darifenacin hydrobromide 131	DENAVIR (penciclovir) 58	DES LorATADINE SOLN PO 0.5 MG/ML 32
darunavir TABS 600 MG 44	DEPAKOTE ER TB24 250 MG (divalproex sodium) 21	desloratadine TABS 32
darunavir TABS 800 MG 44	DEPAKOTE ER TB24 500 MG (divalproex sodium) 21	desloratadine TBDP 32
DAVIMET-M CHEW 115	DEPAKOTE SPRINKLES CSDR (divalproex sodium) 21	desmopressin acetate spray 65
DAYAVITE TABS 89	DEPAKOTE TBEC 125 MG (divalproex sodium) 21	desmopressin acetate spray refrigerated 0.01 % 65
	DEPAKOTE TBEC 250 MG (divalproex sodium) 21	desmopressin acetate TABS 65
	DEPAKOTE TBEC 500 MG (divalproex sodium) 21	desogestrel & ethinyl estradiol 51
	DEPLIN MA CAPS 89	desogestrel-ethinyl estradiol (biphasic) 51
	DEPLINPRO MOOD HEALTH CAPS 89	desogestrel-ethinyl estradiol (triphasic) 51
	DEPO-SUBQ PROVERA 104 SUSY SC 51	
	DERMACINRX DAVIMET CHEW	

desonide CREA	59	DEXCOM G7 SENSOR	72	dextrose (diabetic use) CHEW 4 GM .	26
desonide LOTN	59	DEXEDRINE CP24 10 MG, 15 MG		DHIVY TABS	39
desonide OINT	59	(dextroamphetamine sulfate)	1	DIABETES HEALTH FORMULA	
desoximetasone CREA	59	DEXILANT (dexlansoprazole) ...	130	TABS 90 MG-3 MG-300 MCG-500	
desoximetasone GEL	59	dexlansoprazole	130	MCG-600 UNIT-30 MCG-1.7 MG-30	
desoximetasone LIQD	59	dexmethylphenidate hcl CP24	2	MCG-20 MG-250 MCG-2500 UNIT-	
desoximetasone OINT	59	dexmethylphenidate hcl TABS	2	10 MG-1.5 MG-1.5 MG-50 MG-150	
DESVENLAFAXINE ER	24	dextroamphetamine sulfate CP24 10		MCG-220 MG-80 MG-2 MG-45	
desvenlafaxine succinate 100 MG	24	MG, 15 MG	1	MCG-150 MCG-50 UNIT-110 MG-5	
desvenlafaxine succinate 25 MG, 50		dextroamphetamine sulfate CP24 5		MCG-2.3 MG-35 MCG-10 MCG-600	
MG	24	MG	1	MCG-72 MG-12 MG, 90 MG-3 MG-	
dexamethasone ELIX	52	dextroamphetamine sulfate SOLN ..	1	300 MCG-500 MCG-600 UNIT-30	
DEXAMETHASONE INTENSOL		dextroamphetamine sulfate TABS 15		MCG-1.7 MG-30 MCG-20 MG-250	
CONC	52	MG, 20 MG, 30 MG	1	MCG-2500 UNIT-10 MG-1.5 MG-1.5	
dexamethasone sodium phosphate		dextroamphetamine sulfate TABS 2.5		MG-50 MG-45 MCG-5 MCG-150	
(ophth)	122	MG, 7.5 MG, 15 MG, 20 MG, 30 MG .		MCG-10 MCG-220 MG-80 MG-2	
dexamethasone sodium phosphate		1		MG-150 MCG-50 UNIT-110 MG-35	
SOLN IJ 4 MG/ML, 20 MG/5ML, 120		dextroamphetamine sulfate TABS 5		MCG-2.3 MG-200 MCG-72 MG-12	
MG/30ML	52	MG, 10 MG	1	MG	90
dexamethasone sodium phosphate		dextromethorphan polistirex SUER		DIACOMIT CAPS 250 MG	19
SOSY IJ 4 MG/ML	52	52		DIACOMIT CAPS 500 MG	19
dexamethasone SOLN	52	dextromethorphan-guaifenesin LIQD		DIACOMIT PACK 250 MG	19
dexamethasone TABS	52	100 MG/5ML-10 MG/5ML, 150		DIACOMIT PACK 500 MG	19
dexamethasone TBPK	52	MG/7.5ML-15 MG/7.5ML, 200		DIALYVITE 800/ULTRA D TABS 80	
DEXATLAN CAPS	89	MG/10ML-20 MG/10ML, 200		MG-10 MG-300 MCG-800 MCG-	
dexchlorpheniramine maleate SOLN .		MG/5ML-10 MG/5ML	53	2000 UNIT-6 MCG-10 MG-1.7 MG-	
31		dextromethorphan-guaifenesin LIQD		20 MG-1.5 MG-15 MG-30 UNIT-70	
DEXCOM G6 RECEIVER	71	100 MG/5ML-5 MG/5ML, 400		MCG	90
DEXCOM G6 SENSOR	72	MG/20ML-20 MG/20ML	53	DIALYVITE SUPREME D TABS ..	90
DEXCOM G6 TRANSMITTER	72	dextromethorphan-guaifenesin SYRP		DIATROL TABS	90
DEXCOM G7 15 DAY SENSOR ..	72	100 MG/5ML-10 MG/5ML, 200		diazepam (anticonvulsant) GEL 10	
DEXCOM G7 RECEIVER	72	MG/10ML-20 MG/10ML	53	MG, 20 MG	18
		dextromethorphan-guaifenesin TB12		diazepam SOLN PO 5 MG/5ML ...	13
		600 MG-30 MG	53	diazepam TABS	13
		dextromethorphan-phenylephrine-		diazoxide	26
		acetaminophen CAPS	53	dibucaine	61
				DICLEGIS TBEC (doxylamine-	

pyridoxine)	31	DILANTIN (phenytoin sodium extended)	21	dimethyl fumarate CDPK	127
diclofenac epolamine PTCH EX ...	56	DILANTIN	21	dimethyl fumarate CPDR	127
diclofenac potassium (migraine) ..	77	DILANTIN INFATABS CHEW (phenytoin)	21	DIOVAN HCT (valsartan-hydrochlorothiazide)	35
diclofenac potassium CAPS	6	DILANTIN SUSP (phenytoin)	21	DIOVAN TABS (valsartan)	34
diclofenac potassium TABS	6	DILANTIN-125 SUSP (phenytoin) .	21	DIPENTUM	66
diclofenac sodium (ophth)	123	DILAUDID LIQD (hydromorphone hcl)	8	diphenhydramine hcl (sleep) TABS 25 MG	69
diclofenac sodium (topical) GEL EX 56		DILAUDID TABS 2 MG (hydromorphone hcl)	8	diphenhydramine hcl CAPS	31
diclofenac sodium (topical) SOLN EX	56	DILAUDID TABS 4 MG (hydromorphone hcl)	8	diphenhydramine hcl ELIX 12.5 MG/5ML	31
diclofenac sodium TB24	6	DILAUDID TABS 8 MG (hydromorphone hcl)	8	diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML	31
diclofenac sodium TBEC	6	diltiazem hcl coated beads CP24 120 MG, 180 MG, 300 MG	48	diphenhydramine hcl TABS 25 MG 31	
diclofenac w/ misoprostol TBEC	6	diltiazem hcl coated beads CP24 240 MG	48	diphenoxylate w/ atropine LIQD ...	30
dicloxacillin sodium	125	diltiazem hcl CP12	48	diphenoxylate w/ atropine TABS ...	30
dicyclomine hcl CAPS	130	diltiazem hcl CP24 120 MG, 180 MG 48		DIPROLENE OINT (betamethasone dipropionate augmented)	59
dicyclomine hcl SOLN PO	130	diltiazem hcl CP24 240 MG	48	dipyridamole	68
dicyclomine hcl TABS	130	diltiazem hcl extended release beads 120 MG, 180 MG, 300 MG, 360 MG, 420 MG	48	disopyramide phosphate CAPS ...	13
DIFFERIN CREA (adapalene)	54	diltiazem hcl extended release beads 240 MG	48	disulfiram 250 MG	126
DIFFERIN GEL (adapalene)	54	diltiazem hcl TABS	48	divalproex sodium CSDR	21
DIFFERIN LOTN	54	diltiazem hcl TB24 180 MG, 240 MG, 300 MG, 360 MG, 420 MG	48	divalproex sodium TB24 250 MG ..	21
DIFICID SUSR	71	dimenhydrinate TABS	30	divalproex sodium TB24 500 MG ..	21
DIFICID TABS 200 MG (fidaxomicin) 71				divalproex sodium TBEC 125 MG ..	21
diflorasone diacetate CREA	59			divalproex sodium TBEC 250 MG ..	21
diflorasone diacetate OINT	59			divalproex sodium TBEC 500 MG ..	21
DIFLUCAN SUSR 40 MG/ML (fluconazole)	31			docusate sodium CAPS 100 MG, 250 MG	70
diflunisal TABS	8			docusate sodium CAPS 50 MG ...	70
difluprednate	122			docusate sodium LIQD 50 MG/5ML,	
digoxin SOLN PO 0.05 MG/ML	49				
digoxin TABS 125 MCG, 250 MCG 49					

100 MG/10ML	70	DROPLET INSULIN SYRINGE ...	73	EASIVENT MASK LARGE MISC ..	75
DOCUSATE SODIUM SYRP	70	drosiprenone-ethinyl estradiol 0.02		EASIVENT MASK MEDIUM MISC	75
docusate sodium TABS	71	MG-3 MG	51	EASIVENT MASK SMALL MISC ..	75
dofetilide	13	drosiprenone-ethinyl estradiol 0.03		EASIVENT MISC	75
donepezil hydrochloride TABS 23		MG-3 MG	51	EASY TOUCH FLIPLOCK INSULIN	
MG	126	DROXIA CAPS	68	SY	73
donepezil hydrochloride TABS 5 MG,		DRY EYE FORMULA CAPS 33.333		EASY TOUCH INSULIN BARRELS .	
10 MG	126	MG-3.333 MG-16.667 UNIT-6.667		73	
donepezil hydrochloride TBDP ...	126	MG-133.333 MG-166.667 MG	90	EASY TOUCH INSULIN SAFETY	
DORAL (quazepam)	69	DUAKLIR PRESSAIR	16	SYR	73
DORYX MPC TBEC 60 MG	129	DUETACT (pioglitazone hcl-		EASY TOUCH INSULIN SYRINGE	
dorzolamide hcl	123	glimepiride)	25	73	
dorzolamide hcl-timolol maleate .	121	DULERA	16	EASY TOUCH SHEATHLOCK	
DOVATO	44	DULERA 100 MCG/ACT-5		SYRINGE	73
doxazosin mesylate	34	MCG/ACT, 200 MCG/ACT-5		EBGLYSS SOAJ	60
doxepin hcl (sleep)	69	MCG/ACT	16	EBGLYSS SOSY	60
doxepin hcl CAPS	24	duloxetine hcl CPEP 20 MG, 30 MG,		econazole nitrate CREA	56
doxepin hcl CONC	24	60 MG	24	ECONAZOLE NITRATE FOAM 1 % .	
doxycycline (monohydrate) CAPS		duloxetine hcl CPEP 40 MG	24	56	
129		DUOPA SUSP	39	EDARBI	34
doxycycline (monohydrate) SUSR		DUPIXENT SOAJ	60	EDARBYCLOR	35
129		DUPIXENT SOSY 200 MG/1.14ML,		EDLUAR SUBL	69
doxycycline (monohydrate) TABS		300 MG/2ML	60	EDURANT 25 MG (rilpivirine hcl) .	44
129		DUPIXENT SOSY 200 MG/1.14ML		EDURANT PED PO 2.5 MG	44
doxycycline (rosacea)	62	60		efavirenz CAPS 200 MG	44
doxycycline hyclate CAPS	129	DUREZOL (difluprednate)	122	efavirenz CAPS 50 MG	44
doxycycline hyclate TABS	129	dutasteride	67	efavirenz TABS	44
doxycycline hyclate TBEC	129	dutasteride-tamsulosin hcl	67	efavirenz-emtricitabine-tenofovir	
doxylamine succinate (sleep)	69	DYANAVEL XR SUER	1	disoproxil fumarate	44
doxylamine-pyridoxine TBEC	31	DYANAVEL XR TBCR	1	efavirenz-lamivudine-tenofovir	
DRIZALMA SPRINKLE CSDR	24	DYMISTA SUSP (azelastine hcl-		disoproxil fumarate	44
dronabinol CAPS	31	fluticasone propionate)	120	EFFER-K TBEF 25 MEQ	79
		E.E.S. GRANULES SUSR		EFFEXOR XR CP24 150 MG	
		(erythromycin ethylsuccinate)	71		

(venlafaxine hcl)	24	EMBECTA PEN NEEDLE NANO 2 GEN	73	ENBREL SOLN	7
EFFEXOR XR CP24 37.5 MG (venlafaxine hcl)	24	EMBECTA PEN NEEDLE ULTRAFINE	73	ENBREL SOSY 25 MG/0.5ML	7
EFFEXOR XR CP24 75 MG (venlafaxine hcl)	24	EMEND BIPACK CAPS 80 MG (aprepitant)	31	ENBREL SOSY 50 MG/ML	7
EFFIENT (prasugrel hcl)	68	EMEND SUSR	31	ENBREL SURECLICK SOAJ	7
EKTERLY TABS PO 300 MG	68	EMEND TRIPACK CAPS (aprepitant)	31	ENBUMYST SOLN 0.5 MG/0.1ML	63
ELEPSIA XR TB24	19	EMFLAZA SUSP (deflazacort)	52	ENDARI (glutamine (sickle cell))	68
eletriptan hydrobromide	77	EMFLAZA TABS (deflazacort)	52	ENFAMIL POLY-VI-SOL-IRON SOLN 11 MG/ML	117
ELIMITE CREA (permethrin)	62	EMGALITY (300 MG DOSE) SOSY 77		ENGERIX-B SUSP 20 MCG/ML	133
ELIQUIS (1.5 MG PACK) TBSO PO 17		EMGALITY SOAJ	77	ENGERIX-B SUSY	133
ELIQUIS (2 MG PACK) TBSO PO	17	EMGALITY SOSY	77	ENHERTU	38
ELIQUIS CPSP PO 0.15 MG	17	emollient LOTN	60	enoxaparin sodium SOLN IJ 300 MG/3ML	17
ELIQUIS DVT/PE STARTER PACK TBPK	17	EMSAM	22	enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML	17
ELIQUIS TABS	17	emtricitabine CAPS	44	enoxaparin sodium SOSY 30 MG/0.3ML	17
ELIQUIS TBSO PO 0.5 MG	17	emtricitabine-rilpivirine-tenofovir disoproxil fumarate	44	enoxaparin sodium SOSY 40 MG/0.4ML	17
ELLA	51	emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG	44	enoxaparin sodium SOSY 60 MG/0.6ML	17
ELON MATRIX 5000 COMPLETE TABS	118	emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG	44	enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML	17
ELON MATRIX 5000 TABS	118	EMTRIVA CAPS (emtricitabine)	44	ENSPRYNG	79
ELON MATRIX COMPLETE TABS 118		EMTRIVA SOLN	44	ENSTILAR FOAM	59
ELON MATRIX PLUS TABS	119	EMVERM CHEW	13	entacapone	38
ELON R3 TABS	119	enalapril maleate & hydrochlorothiazide	35	entecavir TABS	46
ELYXYB	77	enalapril maleate SOLN	34	ENTRESTO CPSP	49
EMBECTA AUTOSHIELD DUO	73	enalapril maleate TABS	34	ENTRESTO TABS 103 MG-97 MG, 26 MG-24 MG, 51 MG-49 MG (sacubitril-valsartan)	49
EMBECTA INSULIN SYR ULTRAFINE	73	ENBREL MINI SOCT	7	ENTYVIO PEN SOAJ	66
EMBECTA INSULIN SYRINGE	73			ENVARUSUS XR TB24	79
EMBECTA PEN NEEDLE NANO	73				

EOHILIA SUSP	52	50+ TABS 60 MG-3 MG-30 MCG-400	TABS 120 MG-6 MG-30 MCG-300
EPANED SOLN (enalapril maleate)	34	MCG-500 UNIT-25 MCG-1.7 MG-30	MCG-600 UNIT-100 MCG-10 MG-1.7
EPCLUSA PACK	46	MCG-20 MG-250 MCG-2500 UNIT-	MG-60 MCG-20 MG-300 MCG-3500
EPCLUSA TABS 100 MG-400 MG	46	10 MG-220 MG-300 MCG-1.5 MG-11	UNIT-600 MCG-1.5 MG-15 MG-0.7
EPCLUSA TABS 50 MG-200 MG	46	MG-150 MCG-50 UNIT-50 MG-80	MG-50 MG-5 MCG-250 MG-80 MG-
EPIDIOLEX	19	MG-45 MCG-150 MCG-20 MG-0.5	15 MG-50 MCG-150 MCG-20 MG-4
EPIDUO FORTE GEL (adapalene-	54	MG-5 MCG-2.3 MG-55 MCG-10	MG-60 UNIT-100 MCG-72 MG-10
benzoyl peroxide)	54	MCG-45 MCG-72 MG-2 MG, 60 MG-	MCG-60 MCG-150 MCG 91
EPIFOAM FOAM	59	3 MG-30 MCG-400 MCG-500 UNIT-	EQL CENTURY MATURE TABS 90
epinastine hcl (ophth)	123	25 MCG-1.7 MG-30 MCG-20 MG-	MG-3 MG-30 MCG-500 MCG-500
epinephrine (anaphylaxis) SOAJ 0.15	134	250 MCG-2500 UNIT-10 MG-220	UNIT-25 MCG-1.7 MG-30 MCG-20
MG/0.15ML	134	MG-300 MCG-1.5 MG-11 MG-150	MG-250 MCG-2500 UNIT-10 MG-
epinephrine (anaphylaxis) SOAJ 0.3	134	MCG-50 UNIT-50 MG-80 MG-45	300 MCG-1.5 MG-11 MG-150 MCG-
MG/0.3ML	134	MCG-150 MCG-20 MG-20 MG-0.5	50 MG-2 MG-220 MG-80 MG-45
epinephrine (anaphylaxis) SOAJ .134	134	MG-5 MCG-2.3 MG-45 MCG-55	MCG-150 MCG-50 UNIT-110 MG-0.9
EPIPEN 2-PAK SOAJ (epinephrine	135	MCG-10 MCG-72 MG-2 MG 90	MG-5 MCG-2.3 MG-55 MCG-10
(anaphylaxis))	135	EQ COMPLETE MULTIVITAMIN-	MCG-45 MCG-72 MG 91
EPIPEN JR 2-PAK SOAJ	135	ADULT TABS	EQL CENTURY MATURE WOMEN
(epinephrine (anaphylaxis))	135	EQ ONE DAILY MENS 50+ TABS	50+ TABS 100 MG-5 MG-30 MCG-
EPIVIR SOLN (lamivudine)	44	EQ ONE DAILY MENS HEALTH	400 MCG-800 UNIT-50 MCG-5 MG-
EPIVIR TABS 150 MG (lamivudine)	44	TABS	1.1 MG-50 MCG-14 MG-300 MCG-
EPIVIR TABS 300 MG (lamivudine)	44	EQ ONE DAILY WOMENS 50+	3500 UNIT-8 MG-1.1 MG-15 MG-0.5
EPOGEN 10000 UNIT/ML, 20000	68	TABS	MG-50 MG-5 MCG-500 MG-80 MG-
UNIT/ML	68	EQ ONE DAILY WOMENS HEALTH	15 MG-50 MCG-150 MCG-20 MG-
EPOGEN 2000 UNIT/ML, 3000	68	TABS	2.3 MG-35 UNIT-55 MCG-72 MG-10
UNIT/ML, 4000 UNIT/ML, 10000	68	EQ ONE DAILY WOMENS HEALTH	MCG-50 MCG-150 MCG 91
UNIT/ML, 20000 UNIT/ML	68	TABS	EQL CENTURY MENS TABS 91
EPRONTIA SOLN 25 MG/ML	19	EQ SPACE CHAMBER ANTI-	EQL CENTURY TABS 90 MG-2 MG-
(topiramate)	19	STATIC DEVI	30 MCG-500 MCG-400 UNIT-6
EPSOLAY CREA	54	EQ SPACE CHAMBER ANTI-	MCG-1.7 MG-25 MCG-20 MG-250
EQ COMPLETE MULTIVIT ADULT	90	STATIC L DEVI	MCG-3500 UNIT-10 MG-18 MG-300
	90	EQ SPACE CHAMBER ANTI-	MCG-1.5 MG-11 MG-150 MCG-100
	90	STATIC M DEVI	MG-80 MG-200 MG-45 MCG-150
	90	EQ SPACE CHAMBER ANTI-	MCG-30 UNIT-109 MG-0.9 MG-5
	90	STATIC S DEVI	MCG-10 MCG-2.3 MG-55 MCG-10
	90	EQ VISION FORMULA 50+ CAPS	MCG-35 MCG-72 MG-2 MG 91
	90	150 MG-30 UNIT-5 MG-1 MG-1 MG-	EQL CENTURY WOMENS TABS .91
	90	9 MG-90 MG-160 MG-250 MG	EQL ONE DAILY MENS 50+
	90	EQ CENTURY MATURE ADULTS	ADVANCE TABS 120 MG-6 MG-30
	90	50+ TABS	MCG-400 MCG-700 UNIT-25 MCG-
	90	EQL CENTURY MATURE MEN 50+	3.4 MG-20 MCG-20 MG-3500 UNIT-
	90		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 MCG91	ERYPED 200 SUSR (erythromycin ethylsuccinate) 71	MG 130
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 91	ERYPED 400 SUSR (erythromycin ethylsuccinate) 71	esomeprazole magnesium CPDR 40 MG 130
EQL ONE DAILY MENS TABS 91	erythromycin (acne aid) GEL 54	esomeprazole magnesium PACK 130
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 91	erythromycin (acne aid) PADS 54	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 92
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 ... 80	erythromycin (acne aid) SOLN 54	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 92
EQL VISION FORMULA TABS 200 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG92	erythromycin (ophth) 122	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 UNIT80
EQUETRO39	erythromycin base CPEP 71	estazolam 69
ergocalciferol CAPS 135	erythromycin base TABS 71	estradiol & norethindrone acetate TABS 65
ergocalciferol SOLN PO 200 MCG/ML 135	erythromycin base TBEC 71	estradiol PTTW 0.025 MG/24HR, 0.05 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR 65
ergotamine w/ caffeine TABS77	erythromycin ethylsuccinate SUSR 71	estradiol PTTW 0.0375 MG/24HR .65
ERTACZO56	erythromycin ethylsuccinate TABS 71	estradiol PTWK 65
ERVEBO 133	erythromycin stearate TABS 250 MG 71	estradiol TABS 65
	ERZOFRI 117 MG/0.75ML 40	estradiol vaginal CREA 134
	ERZOFRI 156 MG/ML 40	estradiol vaginal TABS 134
	ERZOFRI 234 MG/1.5ML 40	ESTROFACTORS TABS 115
	ERZOFRI 351 MG/2.25ML 40	
	ERZOFRI 39 MG/0.25ML 40	
	ERZOFRI 78 MG/0.5ML 40	
	ESCITALOPRAM OXALATE CAPS PO 15 MG 22	
	escitalopram oxalate SOLN 22	
	escitalopram oxalate TABS 10 MG 23	
	escitalopram oxalate TABS 20 MG 23	
	escitalopram oxalate TABS 5 MG . 23	
	eslicarbazepine acetate 200 MG, 400 MG, 600 MG, 800 MG 19	
	esomeprazole magnesium CPDR 20	

estrogens, conjugated TABS 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG	65	EVOTAZ	44	famotidine TABS 10 MG	130
ESTROVEN MENOPAUSE SUPPLEMENT TABS	92	EXELON 13.3 MG/24HR (rivastigmine)	126	famotidine TABS 20 MG, 40 MG ..	130
eszopiclone	69	EXELON 4.6 MG/24HR, 9.5 MG/24HR (rivastigmine)	126	FANAPT	40
ethambutol hcl TABS	37	exemestane	38	FANAPT TITRATION PACK A	40
ethosuximide CAPS	21	exenatide SOPN 10 MCG/0.04ML ..	26	FANAPT TITRATION PACK B	40
ethosuximide SOLN	21	exenatide SOPN 5 MCG/0.02ML ..	26	FANAPT TITRATION PACK C	40
ethynodiol diacet & eth estrad 35 MCG-1 MG	51	EXFORGE (amlodipine besylate-valsartan)	35	FARXIGA (dapagliflozin propanediol)	29
ethynodiol diacet & eth estrad 50 MCG-1 MG	51	EXFORGE HCT (amlodipine-valsartan-hydrochlorothiazide)	35	FASENRA PEN SOAJ	14
etodolac CAPS	6	EXTENCILLINE SUSR	125	FASENRA SOSY	14
etodolac TABS	6	EXXUA TB24 PO 18.2 MG, 36.3 MG, 54.5 MG, 72.6 MG	24	febuxostat	67
etodolac TB24	6	EXXUA TITRATION PACK TB24 PO 18.2 MG	24	felbamate SUSP	20
etonogestrel-ethinyl estradiol	51	EYE HEALTH + LUTEIN TABS	92	felbamate TABS	20
etravirine 100 MG	44	EYE HEALTH AREDS 2 CAPS	92	FELBATOL TABS (felbamate)	20
etravirine 200 MG	44	EYE HEALTH CAPS	92	FELDENE CAPS 20 MG (piroxicam) .	6
EUCERIN LOTN	61	EYE MULTIVITAMIN/SODIUM TABS	92	felodipine	48
EUCERIN ORIGINAL HEALING LOTN	60	EYE VITAMINS CAPS 60 MG-6 MG-15 MG-2 MG-30 UNIT-22 MG	92	fenofibrate CAPS	33
EUCERIN PLUS LOTN	60	EYE-VITES TABS 60 MG-40 MG-2 MG-5000 UNIT-30 UNIT-40 MCG ..	92	fenofibrate micronized 134 MG, 200 MG	33
EUCERIN PROFESSIONAL REPAIR LOTN	60	EYLEA SOSY	121	fenofibrate micronized 43 MG, 130 MG	33
EUCRISA	62	EYSUVIS SUSP	122	fenofibrate micronized 67 MG	33
EVEKEO TABS (amphetamine sulfate)	1	EZALLOR SPRINKLE CPSP	33	fenofibrate TABS 160 MG	33
everolimus (immunosuppressant) ..	79	ezetimibe	33	fenofibrate TABS 40 MG, 120 MG ..	33
EVEXITHROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG, 180 MG	129	ezetimibe-simvastatin	32	fenofibrate TABS 48 MG, 145 MG ..	33
EVISTA (raloxifene hcl)	64	famciclovir	47	fenofibrate TABS 54 MG	33
		famotidine SUSR	130	fenofibric acid	33

FENSOLVI (6 MONTH) SC	64	FINACEA FOAM	62	fluconazole SUSR	31
fentanyl citrate LPOP 200 MCG, 1200 MCG	8	finasteride	67	fluconazole TABS 100 MG, 200 MG .	31
fentanyl citrate TABS 400 MCG, 600 MCG, 800 MCG	8	FINAZOL TABS	92	fluconazole TABS 150 MG	31
fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR	8	fingolimod hcl	127	fluconazole TABS 50 MG	31
fentanyl PT72 37.5 MCG/HR, 62.5 MCG/HR, 87.5 MCG/HR	8	FINTEPLA	19	fludrocortisone acetate TABS	52
ferrous fumarate TABS	69	FIORICET/CODEINE 30 MG-40 MG- 50 MG-300 MG (butalbital- acetaminophen-caffeine w/ codeine) .	10	FLULAVAL SUSY	133
ferrous gluconate TABS 324 MG ..	69	FIRVANQ SOLR PO (vancomycin hcl)	36	FLUMIST	133
ferrous sulfate SOLN 15 MG/ML, 15 MG/ML	69	FITNESS TABS FOR MEN AM/PM TABS	92	flunisolide (nasal)	120
ferrous sulfate SOLN 220 MG/5ML, 300 MG/6.8ML	69	FITNESS TABS FOR WOMEN AM/PM TABS	92	fluocinolone acetonide (otic)	124
ferrous sulfate TABS 325 MG, 65 MG, 325 MG	69	FLAREX	122	fluocinolone acetonide CREA	59
ferrous sulfate TBEC	69	flavoxate hcl	131	fluocinolone acetonide OIL	59
fesoterodine fumarate	131	flecainide acetate	13	fluocinolone acetonide OINT	59
FETZIMA CP24	24	FLEQSUVY SUSP (baclofen)	119	fluocinonide CREA 0.05 %	59
FETZIMA TITRATION C4PK	24	FLEXICHAMBER ADULT MASK/SMALL	76	fluocinonide CREA 0.1 %	59
FEVERALL JUNIOR STRENGTH SUPP	8	FLEXICHAMBER CHILD MASK/LARGE	76	fluocinonide emulsified base	59
fexofenadine hcl TABS 180 MG ...	32	FLEXICHAMBER CHILD MASK/SMALL	76	fluocinonide GEL	59
fexofenadine hcl TABS 60 MG	32	FLEXICHAMBER DEVI	76	fluocinonide OINT	59
FIASP FLEXTOUCH SOPN	27	FLORRAVITE TABS	92	fluocinonide SOLN	59
FIASP PENFILL SOCT	27	FLORRAXYL TABS	92	fluorometholone (ophth) SUSP ...	122
FIASP SOLN	27	FLUAD	133	fluorouracil (topical) CREA 0.5 % ..	56
FIBRICOR (fenofibric acid)	33	FLUARIX SUSY	133	fluorouracil (topical) CREA 5 % ...	56
fidaxomicin TABS 200 MG	71	FLUBLOK SOSY	133	fluorouracil (topical) SOLN	56
FIFTY50 SUPERIOR COMFORT SYR	73	FLUCELVAX SUSP	133	fluoxetine hcl (pmdd) TABS 10 MG 128	
		FLUCELVAX SUSY	133	fluoxetine hcl (pmdd) TABS 20 MG 128	
				fluoxetine hcl CAPS 10 MG, 20 MG 23	
				fluoxetine hcl CAPS 40 MG	23

fluoxetine hcl CPDR	23	fluticasone-salmeterol AEPB 113 MCG/ACT-14 MCG/ACT, 232 MCG/ACT-14 MCG/ACT, 55 MCG/ACT-14 MCG/ACT	16	FOLITIN-Z TABS	92
fluoxetine hcl SOLN	23	fluticasone-salmeterol AERO	16	fondaparinux sodium	17
FLUOXETINE HCL TABS (fluoxetine hcl)	23	fluvastatin sodium CAPS	33	FORFIVO XL TB24 (bupropion hcl) 22	
fluoxetine hcl TABS 10 MG	23	fluvastatin sodium TB24	33	formoterol fumarate NEBU	16
fluoxetine hcl TABS 20 MG	23	fluvoxamine maleate CP24	23	FORTEO SOPN (teriparatide)	64
fluoxetine hcl TABS 60 MG	23	fluvoxamine maleate TABS 100 MG . 23		FORZINITY SOLN SC 280 MG/3.5ML	64
fluphenazine decanoate	42	fluvoxamine maleate TABS 25 MG, 50 MG	23	FOSAMAX PLUS D	64
fluphenazine hcl TABS	42	FLUZONE HIGH-DOSE SUSY ...	133	FOSAMAX TABS 70 MG (alendronate sodium)	64
flurandrenolide CREA	59	FLUZONE SUSP	133	fosamprenavir calcium TABS	44
flurandrenolide LOTN	59	FLUZONE SUSY	133	fosinopril sodium & hydrochlorothiazide	35
flurazepam hcl	69	FML FORTE SUSP	123	fosinopril sodium	34
flurbiprofen sodium	123	FML LIQUIFILM SUSP (fluorometholone (ophth))	123	FOSRENOL CHEW (lanthanum carbonate)	67
flurbiprofen TABS 100 MG	6	FOCALIN TABS (dexmethylphenidate hcl)	2	FOSRENOL PACK	67
fluticasone furoate (inhalation) 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT	15	FOCALIN XR CP24 (dexmethylphenidate hcl)	2	FRAGMIN SOLN 10000 UNIT/4ML, 95000 UNIT/3.8ML	17
fluticasone furoate-vilanterol	16	FOLACHEW CHEW	115	FRAGMIN SOSY	17
fluticasone propionate (inhalation) AEPB	15	FOLAGENT DHA CAPS	92	FREEDAVITE TABS	92
fluticasone propionate (nasal) SUSP . 120		FOLAMED DHA CAPS	92	FREESTYLE LIBRE 14 DAY SENSOR	72
fluticasone propionate CREA 0.05 % 59		FOLAPRIME TABS	92	FREESTYLE LIBRE 2 PLUS SENSOR	72
fluticasone propionate hfa 110 MCG/ACT, 220 MCG/ACT	15	FOLASYNC DHA CAPS	92	FREESTYLE LIBRE 2 READER ..	72
fluticasone propionate hfa 44 MCG/ACT	15	FOLAWISE TABS	115	FREESTYLE LIBRE 2 SENSOR ..	72
fluticasone propionate LOTN	59	FOLCYTEINE TABS	115	FREESTYLE LIBRE 3 PLUS SENSOR	72
fluticasone propionate OINT	59	folic acid TABS 1 MG	68	FREESTYLE LIBRE 3 READER ..	72
fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT	16	folic acid TABS 400 MCG	68	FREESTYLE LIBRE 3 SENSOR ..	72
		FOLIFLEX TABS	92	FROVA (frovatriptan succinate) ...	77

frovatriptan succinate	77	GALAFOLD	64	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	93
FT CENTURY 50+ TABS	92	galantamine hydrobromide CP24	126		
FT CENTURY ADULTS TABS	92	galantamine hydrobromide SOLN	126		
FT CENTURY MEN 50+ TABS	92	galantamine hydrobromide TABS	126	GILENYA (fingolimod hcl)	127
FT CENTURY MEN TABS	92	GAMMAGARD	124	GILENYA 0.25 MG	127
FT CENTURY WOMEN 50+ TABS	92	GAMMAGARD ERC 5 GM/50ML, 10 GM/100ML	124	GIMOTI SOLN NA	66
FT CENTURY WOMEN TABS	92	GAMMAGARD S/D LESS IGA SOLR	125	GIVLAARI	68
FT EYE HEALTH CAPS	92	GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	125	glatiramer acetate SOSY 20 MG/ML	127
FT EYE HEALTH TABS	92	GAMUNEX-C 1 GM/10ML, 2.5 GM/25ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	125	glatiramer acetate SOSY 40 MG/ML	127
FT HAIR SKIN & NAILS EXTRA STR TABS	92	GARDASIL 9 SUSP 0.5 ML	133	glimepiride 1 MG, 2 MG	29
FT ONE DAILY MENS 50+ TABS	92	GARDASIL 9 SUSY 0.5 ML	133	glimepiride 3 MG	29
FT ONE DAILY MENS TABS	92	gatifloxacin (ophth)	122	glimepiride 4 MG	29
FT ONE DAILY WOMENS 50+ TABS	93	gemfibrozil TABS	33	glipizide TABS	29
FT ONE DAILY WOMENS TABS	93	GEMTESA	131	glipizide TB24	29
furosemide SOLN PO 8 MG/ML, 10 MG/ML	63	GENOTROPIN CART SC	64	glipizide-metformin hcl	25
furosemide TABS	63	GENOTROPIN MINIQUICK PRSY	64	GLOPERBA SOLN PO	67
FUZEON SOLR	44	gentamicin sulfate (ophth) SOLN	122	GLP-DLAX TABS	119
FYCOMPA SUSP 0.5 MG/ML (perampanel)	18	gentamicin sulfate (topical) CREA	55	GLUCAGON EMERGENCY	26
FYCOMPA TABS 2 MG, 4 MG, 6 MG, 8 MG, 10 MG, 12 MG (perampanel)	18	gentamicin sulfate (topical) OINT	55	glucagon SOLR IJ 1 MG	26
gabapentin (once-daily) TABS	128	GENVOYA	44	GLUCOPRO INSULIN SYRINGE	73
gabapentin CAPS	19	GEODON (ziprasidone hcl)	39	GLUCOTROL XL TB24 5 MG, 10 MG (glipizide)	29
gabapentin SOLN	19	GERI-FREEDA SENIOR FORMULA TABS	93	glutamine (sickle cell)	68
gabapentin TABS 600 MG	19	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-		glyburide micronized 1.5 MG, 3 MG, 6 MG	29
gabapentin TABS 800 MG	19			glyburide TABS	29
GABARONE TABS 100 MG, 400 MG	19			glyburide-metformin	25
				glycerin (laxative) SUPP 2 GM	70
				glycopyrrolate TABS 1 MG, 2 MG	

130		
GLYXAMBI	25	
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	93	
GNP CENTURY ADULT TABS	93	
GNP CENTURY ADULTS MEN TABS	93	
GNP CENTURY ADULTS WOMEN TABS	93	
GNP CENTURY MATURE ADULTS 50+ TABS	93	
GNP CENTURY MATURE MEN'S 50+ TABS	93	
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	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	116	
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	93	
GNP HEALTHY EYES SUPERVISION 2 CAPS 250 MG-5 MG-1 MG-40 MG-1 MG-200 UNIT	93	
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	93	
GNP INSULIN SYRINGE	73	
GNP INSULIN SYRINGES	73	
GNP INSULIN SYRINGES 28GX1/2"	73	
GNP INSULIN SYRINGES 29GX1/2"	73	
GNP INSULIN SYRINGES 30GX5/16"	73	
GNP INSULIN SYRINGES 31GX5/16"	74	
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	94	
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	94	
GNP ONE DAILY MAXIMUM TABS	94	
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	94	
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	94	
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 .	94	
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	81	
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	94	HAEGARDA SOLR SC	68	MG, 5 MG, 10 MG	41
GNP THERAPEUTIC-M TABS	94	HAIR NOURISHING SUPPLEMENT TABS	119	haloperidol TABS 20 MG	41
GNP ULTRA COM INSULIN SYRINGE	74	HAIR SKIN & NAILS ADVANCED TABS	94	HARVONI PACK	46
GOCOVRI CP24	39	HAIR SKIN & NAILS TABS	94	HARVONI TABS	46
GOLD BOND ULTIMATE SOFTENING LOTN	61	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	95	HAVRIX IM 720 EL U/0.5ML, 1440 EL U/ML	133
GOLYTELY SOLR (peg 3350-kcl-sod bicarb-sod chloride-sod sulfate) ...	70	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	95	HEAD CARE PROACTIVE HEALTH TABS	95
GORDONS UREA CREA 40 % ...	60	HAIR/SKIN/NAILS CAPS	95	HEALTHWISE INSULIN SYR/NEEDLE	74
GRALISE TABS (gabapentin (once-daily))	128	HAIR/SKIN/NAILS TABS	95	HEALTHY EYES SUPERVISION 2 CAPS	95
granisetron hcl TABS	30	halcinonide CREA	59	HEALTHY EYES TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG	95
GRASTEK SUBL	3	halcinonide SOLN 0.1 %	59	HEALTHY EYES/LUTEIN-ZEAXANTHIN CAPS 60 MG-13.5 MG-6 MG-15 MG	95
griseofulvin microsize SUSP	31	HALCION 0.25 MG (triazolam) ...	69	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	116
griseofulvin microsize TABS	31	halobetasol propionate CREA	59	HEALTHY HEART COMPLEX TABS	119
griseofulvin ultramicrosize	31	halobetasol propionate FOAM	59	HEART TABS TABS	119
guaifenesin TB12 1200 MG	53	halobetasol propionate OINT	59	HEMADY TABS	52
guaifenesin TB12 600 MG	53	HALOG CREA (halcinonide)	59	HEMANGEOL SOLN PO	48
guaifenesin-codeine SOLN	53	HALOG SOLN 0.1 % (halcinonide)	59	heparin sodium (porcine) SOLN IJ 1000 UNIT/ML, 5000 UNIT/0.5ML, 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	17
guanfacine hcl (adhd)	2	haloperidol decanoate	41	HEPARIN SODIUM (PORCINE) SOSY IJ	17
guanfacine hcl	34	haloperidol lactate CONC	41	HEPLISAV-B SOSY	133
GVOKE HYOPEN 1-PACK SOAJ 26		haloperidol TABS 0.5 MG, 1 MG, 2		HETLIOZ CAPS (tasimelteon)	70
GVOKE HYOPEN 2-PACK SOAJ 26					
GVOKE KIT SOLN	26				
GVOKE PFS SOSY 1 MG/0.2ML ..	26				
GYNAZOLE-1	134				
HADLIMA PUSHTOUCH SOAJ	4				
HADLIMA SOSY	4				

HETLIOZ LQ SUSP	70	MG/0.4ML	4	108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML	10
HIBERIX SOLR IJ	131	HUMIRA (2 PEN) AJKT 40 MG/0.8ML	4	hydrocodone-acetaminophen SOLN 325 MG/15ML-10 MG/15ML	10
HIGH POTENCY MULTIVIT/FA TABS	95	HUMIRA (2 PEN) AJKT 80 MG/0.8ML	4	hydrocodone-acetaminophen SOLN . 10	
HIGH POTENCY MULTIVITAMIN TABS	116	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	11
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	95	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
HM COMPLETE MEN TABS	95	HUMIRA-CD/UC/HS STARTER AJKT 80 MG/0.8ML	5	hydrocodone-acetaminophen TABS 325 MG-2.5 MG	10
HM ULTICARE INSULIN SYRINGE 74		HUMIRA-PSORIASIS/UEVEIT STARTER AJKT	5	hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG, 7.5 MG-200 MG	11
HORIZANT	128	HUMULIN 70/30 KWIKPEN SUPN	27	hydrocortisone (intrarectal)	12
HULIO (2 PEN) AJKT	4	HUMULIN 70/30 SUSP	27	hydrocortisone (rectal) EX 1 %	12
HULIO (2 SYRINGE) PSKT	4	HUMULIN N KWIKPEN SUPN	27	hydrocortisone (rectal) EX 2.5 %	12
HUMALOG JUNIOR KWIKPEN SOPN	27	HUMULIN N SUSP	27	hydrocortisone (topical) CREA 0.5 %	59
HUMALOG KWIKPEN SOPN 100 UNIT/ML	27	HUMULIN R SOLN IJ	27	hydrocortisone (topical) CREA 1 %	59
HUMALOG KWIKPEN SOPN 200 UNIT/ML	27	HUMULIN R U-500 (CONCENTRATED) SOLN SC	27	hydrocortisone (topical) CREA 2.5 %	59
HUMALOG MIX 50/50 KWIKPEN SUPN	27	HUMULIN R U-500 KWIKPEN SOPN SC	27	hydrocortisone (topical) LOTN 2.5 %	59
HUMALOG MIX 75/25 KWIKPEN SUPN	27	hydralazine hcl TABS	36	hydrocortisone (topical) OINT 1 %	59
HUMALOG MIX 75/25 SUSP	27	HYDRAZONE LOTION LOTN	61	hydrocortisone (topical) OINT 2.5 %	59
HUMALOG SOCT	27	hydrochlorothiazide CAPS	63	hydrocortisone (topical) SOLN 2.5 %	59
HUMALOG SOLN IJ	27	hydrochlorothiazide TABS 25 MG, 50 MG	63	hydrocortisone butyrate CREA	59
HUMALOG TEMPO PEN SOPN	27	hydrocodone bitartrate CP12	8	hydrocortisone butyrate LOTN	59
HUMATROPE CART IJ	64	hydrocodone bitartrate T24A	8		
HUMIRA (2 PEN) AJKT 40		hydrocodone bitartrate-homatropine methylbromide SOLN	52		
		hydrocodone-acetaminophen SOLN			

hydrocortisone butyrate OINT 60	130	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 95
hydrocortisone butyrate SOLN 60	HYPERRHO SOSY IM 1500 UNIT		
hydrocortisone TABS 52	125		
hydrocortisone valerate CREA 60	HYRIMOZ SOAJ 5		
hydrocortisone valerate OINT 60	HYRIMOZ SOSY 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 95	
hydrocortisone w/acetic acid 124	HYRIMOZ-CROHNS/UC STARTER SOAJ 5		
hydromorphone hcl LIQD 8	HYRIMOZ-PED<40KG CROHN STARTER SOSY 5		
HYDROMORPHONE HCL SUPP ... 8	HYRIMOZ-PED>=40KG CROHN START SOSY 5		
hydromorphone hcl TABS 2 MG ... 8	HYRIMOZ-PLAQ PSOR/UEVIT START SOAJ 5	icatibant acetate SOSY 68	
hydromorphone hcl TABS 4 MG ... 9		ICLUSIG 38	
hydromorphone hcl TABS 8 MG ... 9	HYSINGLA ER T24A 20 MG, 30 MG, 40 MG, 60 MG, 80 MG, 100 MG 9	icosapent ethyl 32	
hydromorphone hcl TB24 9		IDACIO (2 PEN) AJKT 5	
hydroxychloroquine sulfate 100 MG, 200 MG 37	HYZAAR (losartan potassium & hydrochlorothiazide) 35	IDACIO (2 SYRINGE) PSKT 5	
HYDROXYM GEL 60	ibandronate sodium TABS 64	IDACIO-CROHNS/UC STARTER AJKT 5	
hydroxyurea 38	IBRANCE CAPS 38	IDACIO-PSORIASIS STARTER AJKT 5	
HYDROXYUREA 50	IBRANCE TABS 38	IGALMI FILM 69	
hydroxyzine hcl SYRP 13	IBSRELA 67	ILEVRO 123	
hydroxyzine hcl TABS 13	ibuprofen CHEW 6	imipramine hcl TABS 24	
hydroxyzine pamoate CAPS 13	ibuprofen SUSP 100 MG/5ML, 200 MG/10ML 6	imiquimod 3.75 % 61	
HYFTOR 61	ibuprofen SUSP 50 MG/1.25ML ... 6	imiquimod 5 % 61	
HYLAZINC TABS 95	ibuprofen TABS 200 MG 6	IMITREX STATDOSE REFILL SOCT 4 MG/0.5ML 77	
hyoscyamine sulfate ELIX 130	ibuprofen TABS 300 MG 6	IMITREX STATDOSE REFILL SOCT 6 MG/0.5ML 77	
hyoscyamine sulfate SOLN PO 0.125 MG/ML 130	ibuprofen TABS 400 MG, 600 MG, 800 MG 6	IMITREX STATDOSE SYSTEM SOAJ 4 MG/0.5ML 77	
hyoscyamine sulfate SUBL 0.125 MG 130	ibuprofen-famotidine 6	IMITREX STATDOSE SYSTEM SOAJ 6 MG/0.5ML (sumatriptan succinate) 77	
hyoscyamine sulfate TABS 0.125 MG 130	ICAPS AREDS FORMULA TABS . 95		
hyoscyamine sulfate TB12 0.375 MG 130	ICAPS CAPS 226 MG-34.8 MG-0.8 MG-14320 UNIT-200 MG 95		
hyoscyamine sulfate TBDP 0.125 MG			

IMITREX TABS (sumatriptan succinate)	77	INVEGA SUSTENNA 156 MG/ML	.40
IMMUNE ESSENTIALS DAILY CAPS	95	INVEGA SUSTENNA 234 MG/1.5ML	40
IMOVAX RABIES SUSR	133	INVEGA SUSTENNA 39 MG/0.25ML	40
IMULDOSA SOSY SC 45 MG/0.5ML	57	INVEGA SUSTENNA 78 MG/0.5ML	40
IMULDOSA SOSY SC 90 MG/ML	.57	INVEGA TRINZA 273 MG/0.88ML	40
IMURAN TABS (azathioprine)	79	INVEGA TRINZA 410 MG/1.32ML	40
INBRIJA CAPS	39	INVEGA TRINZA 546 MG/1.75ML	40
INCRELEX	64	INVEGA TRINZA 819 MG/2.63ML	40
INCRUSE ELLIPTA	14	INVELTYS SUSP	123
indapamide TABS 1.25 MG, 2.5 MG	.63	INVOKAMET TABS	25
INDERAL LA CP24 (propranolol hcl)	.48	INVOKAMET XR TB24	25
INDERAL XL	48	INVOKANA	29
indomethacin CAPS 25 MG, 50 MG	6	IOPIDINE	121
indomethacin CPR	6	IPOL IJ	133
indomethacin SUPP	6	ipratropium bromide (nasal) 0.03 %	120
indomethacin SUSP	6	ipratropium bromide (nasal) 0.06 %	120
INFLECTRA SOLR	66	ipratropium bromide SOLN 0.02 %	14
INGREZZA CAPS	127	ipratropium-albuterol SOLN	16
INGREZZA CPPK	127	irbesartan	34
INGREZZA CPSP	127	irbesartan-hydrochlorothiazide	...35
INNOPRAN XL	48	IRON CHEWS PEDIATRIC CHEW	69
INPEFA	49	ISENTRESS CHEW 100 MG	44
INREBIC	38	ISENTRESS CHEW 25 MG	44
INSPIREASE MISC	76	ISENTRESS HD TABS	44
INSPIREASE RESERVOIR BAGS	76	ISENTRESS PACK	44
INSULIN ASPART FLEXPEN SOPN	.40	ISENTRESS TABS	44
INSULIN ASPART SOLN IJ	27		
INSULIN DEGLUDEC FLEXTOUCH SOPN 100 UNIT/ML	27		
INSULIN DEGLUDEC FLEXTOUCH SOPN 200 UNIT/ML	27		
INSULIN DEGLUDEC SOLN	27		
INSULIN GLARGINE MAX SOLOSTAR SOPN	27		
INSULIN GLARGINE SOLOSTAR SOPN 300 UNIT/ML	28		
INSULIN GLARGINE-YFGN SOLN	28		
INSULIN GLARGINE-YFGN SOPN	28		
INSULIN LISPRO (1 UNIT DIAL) SOPN	28		
INSULIN LISPRO JUNIOR KWIKPEN SOPN	28		
INSULIN LISPRO PROT & LISPRO SUPN	28		
INSULIN LISPRO SOLN IJ	28		
INSULIN SYRINGE	74		
INSULIN SYRINGE-NEEDLE U-100	74		
INTELENCE (etravirine)	44		
INTELENCE	44		
INTELENCE 200 MG (etravirine)	..44		
INTUNIV (guanfacine hcl (adhd))	..2		
INVEGA 3 MG, 6 MG, 9 MG (paliperidone)	40		
INVEGA HAFYERA	40		
INVEGA SUSTENNA 117 MG/0.75ML	40		

isoniazid SYRP	37	JYLAMVO SOLN PO	37	KERI RENEWAL STRETCH MARK LOTN	61
isoniazid TABS	37	JYNNEOS	133	KERI SENSITIVE SKIN LOTN	61
isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG	13	KALETRA SOLN	44	KESIMPTA	127
isosorbide mononitrate TABS	13	KALETRA TABS 25 MG-100 MG (lopinavir-ritonavir)	45	ketoconazole (topical) CREA	56
ISOSORBIDE MONONITRATE TABS	13	KALETRA TABS 50 MG-200 MG (lopinavir-ritonavir)	44	ketoconazole (topical) FOAM	56
isosorbide mononitrate TB24	13	KALETRA TABS 50 MG-200 MG (lopinavir-ritonavir)	45	ketoconazole (topical) SHAM 2 %	56
isotretinoin 10 MG, 20 MG, 30 MG, 40 MG	54	KANJINTI	38	ketoconazole	31
isradipine CAPS	48	KAPSPARGO SPRINKLE CS24	47	KETONE TEST STRP	62
ISTALOL SOLN (timolol maleate (ophth))	121	KATERZIA	48	ketoprofen CAPS 25 MG, 50 MG ...	6
itraconazole CAPS	31	KENALOG AERS (triamcinolone acetone (topical))	60	ketoprofen CP24	6
itraconazole SOLN	31	KEPPRA SOLN PO 100 MG/ML (levetiracetam)	19	ketorolac tromethamine (ophth) 0.4 %	124
ivermectin (rosacea)	62	KEPPRA TABS 1000 MG (levetiracetam)	19	ketorolac tromethamine (ophth) 0.5 %	123
I-VITE TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG	95	KEPPRA TABS 250 MG, 750 MG (levetiracetam)	19	ketorolac tromethamine TABS	6
IXIARO	133	KEPPRA TABS 500 MG (levetiracetam)	19	KETOSTIX STRP	63
IYUZEH SOLN	124	KEPPRA XR TB24 (levetiracetam)	19	ketotifen fumarate (ophth) 0.035 % 124	
JANUMET TABS	25	KERI ADVANCED MOISTURE THERAPY LOTN	61	KEVZARA SOAJ	5
JANUMET XR TB24	25	KERI BASIC ESSENTIALS LOTN	61	KEVZARA SOSY	5
JANUVIA	26	KERI NOURISHING SHEA BUTTER LOTN	61	KEYFOLIC TABS	95
JARDIANCE	29	KERI ORIGINAL LOTN	61	KEYLOSA TABS	96
JAVADIN SOLN PO 0.02 MG/ML	34	KERI OVERNIGHT LOTN	61	KHINDIVI SOLN PO 1 MG/ML	52
JENTADUETO TABS	25	KERI RENEWAL MILK BODY LOTN	61	KINERET SOSY	5
JENTADUETO XR TB24	25	KERI RENEWAL SKIN FIRMING LOTN	61	KINRAY INSULIN SYRINGE	74
JOINT HEALTH & BONE STRENGTH TABS	95			KIRSTY SOLN IJ 100 UNIT/ML ...	28
JORNAY PM CP24	2			KIRSTY SOPN SC 100 UNIT/ML ..	28
JOURNAVX	8			KITABIS PAK (W/ NEBULIZER) NEBU 300 MG/5ML (tobramycin) ...	3
JULUCA	44			KLOXXADO LIQD	30
				KONVOMEK SUSR	131

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 MG96	MCG-150 MCG-22.5 UNIT-2 MG-4 MG-180 MCG-110 MCG-120 MG .96	22.5 UNIT-2 MG-2 MG-120 MCG-20 MCG97
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lamivudine TABS 300 MG	45	levetiracetam TABS 1000 MG	19	oxalate)	23
lamivudine-zidovudine	45	levetiracetam TABS 250 MG, 750 MG	19	LEXETTE FOAM (halobetasol propionate)	60
lamotrigine CHEW	19	levetiracetam TABS 500 MG	19	LIALDA TBEC (mesalamine)	66
lamotrigine KIT 25 MG	19	levetiracetam TB24	19	LIBERVANT FILM	18
lamotrigine TABS	19	levetiracetam TB3D 250 MG, 500 MG	19	lidocaine CREA 4 %	62
lamotrigine TB24	19	levobunolol hcl 0.5 %	121	lidocaine hcl (mouth-throat) 2 %	80
lamotrigine TBDP	19	levocarnitine (metabolic modifiers) SOLN PO 1 GM/10ML	65	lidocaine hcl CREA 3 %, 4 %	61
LANOLIN XX	125	levocarnitine (metabolic modifiers) TABS	65	lidocaine hcl GEL 2 %	62
lansoprazole CPDR 15 MG	130	levocetirizine dihydrochloride SOLN 32		lidocaine-prilocaine CREA	62
lansoprazole CPDR 30 MG	130	levocetirizine dihydrochloride TABS 32		LIKMEZ SUSP	36
lansoprazole TBDD	130	levofloxacin (ophth) 0.5 %	122	LINZESS	67
lanthanum carbonate CHEW	67	levofloxacin SOLN PO	65	liothyronine sodium TABS	129
LANTUS SOLN	28	levofloxacin TABS	65	LIPIDSHIELD PLUS TABS	119
LANTUS SOLOSTAR SOPN	28	levonorgestrel & eth estradiol TABS 51		LIPITOR TABS (atorvastatin calcium)	33
latanoprost SOLN	124	levonorgestrel (emergency oc) 1.5 MG	51	LIPOFEN CAPS (fenofibrate)	33
LATUDA (lurasidone hcl)	39	levonorgestrel-eth estradiol (triphasic)	51	LIQREV SUSP	50
LEDIPASVIR-SOFOSBUVIR TABS 46		levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG	51	liraglutide	26
leflunomide	7	levorphanol tartrate TABS	9	lisdexamfetamine dimesylate CAPS 1	
LENTOCILIN SUSR	125	levothyroxine sodium TABS	129	lisdexamfetamine dimesylate CHEW 1	
LEQSELVI TABS PO 8 MG	61	LEXAPRO TABS 10 MG (escitalopram oxalate)	23	lisinopril & hydrochlorothiazide	35
LESCOL XL TB24 (fluvastatin sodium)	33	LEXAPRO TABS 20 MG (escitalopram oxalate)	23	lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG	34
LETAIRIS (ambrisentan)	49	LEXAPRO TABS 5 MG (escitalopram		LITETOUCH INSULIN SYRINGE	74
letrozole	38			LITFULO	61
leucovorin calcium TABS	38			lithium	39
levalbuterol hcl	16			lithium carbonate CAPS	39
levalbuterol tartrate	16			lithium carbonate TABS	39
levamlodipine maleate	48			lithium carbonate TBCR	39
levetiracetam SOLN PO 100 MG/ML, 500 MG/5ML	19				

LIVALO (pitavastatin calcium)	33	LOTEMAX OINT	123	MG/0.8ML (enoxaparin sodium) . . .	18
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LOHIST-D LIQD	53	LOTENSIN 10 MG, 20 MG (benazepril hcl)	34	lubiprostone	66
LOKELMA	79	LOTENSIN 40 MG (benazepril hcl) 34		LUBRIDERM LOTN	61
loperamide hcl CAPS	30	LOTENSIN HCT 12.5 MG-10 MG, 12.5 MG-20 MG, 25 MG-20 MG (benazepril & hydrochlorothiazide) 35		LUMAVEX CAPS	80
loperamide hcl TABS	30	loteprednol etabonate GEL	123	LUMIGAN SOLN 0.01 %	124
LOPID TABS (gemfibrozil)	33	loteprednol etabonate SUSP	123	LUNAVIRA CAPS	80
lopinavir-ritonavir SOLN	45	loteprednol etabonate-tobramycin 123		lurasidone hcl	39
lopinavir-ritonavir TABS 25 MG-100 MG	45	LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (amlodipine besylate-benazepril hcl) .	35	LURBIRO TABS 100 MG (flurbiprofen)	6
lopinavir-ritonavir TABS 50 MG-200 MG	45	LOTRONEX (alosetron hcl)	67	LUTEIN-ZEAXANTHIN TABS 60 MG-5 MG-1 MG-15 MG-1 MG-750 MCG-20 MG	97
LOPRESSOR SOLN PO 10 MG/ML .	48	lovastatin TABS 10 MG, 20 MG . . .	33	LYBALVI	126
LOPRESSOR TABS 100 MG (metoprolol tartrate)	48	lovastatin TABS 40 MG	33	LYFGENIA	68
LOPRESSOR TABS 12.5 MG	48	LOVENOX SOLN IJ 300 MG/3ML (enoxaparin sodium)	17	LYRICA CAPS (pregabalin)	19
LOPRESSOR TABS 50 MG (metoprolol tartrate)	48	LOVENOX SOSY 100 MG/ML, 150 MG/ML (enoxaparin sodium)	18	LYRICA CR (pregabalin (once- daily))	128
loratadine & pseudoephedrine TB12 .	53	LOVENOX SOSY 30 MG/0.3ML (enoxaparin sodium)	17	LYRICA SOLN (pregabalin)	19
loratadine & pseudoephedrine TB24 .	53	LOVENOX SOSY 40 MG/0.4ML (enoxaparin sodium)	17	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	97
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loratadine TABS	32	LOVENOX SOSY 60 MG/0.6ML (enoxaparin sodium)	18	LYUMJEV SOLN	28
loratadine TBDP 10 MG	32	LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML (enoxaparin sodium) . . .	17	LYUMJEV TEMPO PEN SOPN . . .	28
lorazepam TABS 0.5 MG, 2 MG . . .	13	LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML (enoxaparin sodium) . . .	17	LYVISPAH PACK	119
lorazepam TABS 1 MG	13	LOTEMAX GEL (loteprednol etabonate)	123	MACULAR HEALTH FORMULA CAPS 250 MG-10 MG-100 MCG-10 MG-500 UNIT-5 MG-5 MG-1 MG-1	
losartan potassium & hydrochlorothiazide	35				
losartan potassium	34				

MG-20 MG-25 MCG-200 UNIT-7.5	(cladribine (multiple sclerosis)) ... 127	0.25 MG 127
MG-10 MG 97	MAVENCLAD (8 TABS) 10 MG	MAYZENT TABS 127
MACUVITE EYE CARE TABS 113	(cladribine (multiple sclerosis)) ... 127	meclizine hcl TABS 12.5 MG, 25 MG,
MG-17.4 MG-0.4 MG-100 UNIT-7160	MAVENCLAD (9 TABS) 10 MG	50 MG 30
UNIT 97	(cladribine (multiple sclerosis)) ... 127	meclofenamate sodium CAPS 6
MACUVITE TABS 60 MG-40 MG-2	MAVYRET PACK 46	MEDI TAB TABS 98
MG-40 MCG-30 UNIT-5000 UNIT .97	MAVYRET TABS 46	MEDIC INSULIN SYRINGE 74
MAGELLAN INSULIN SAFETY SYR	MAXALT TABS 10 MG (rizatriptan	MEDROL TABS
..... 74	benzoate) 77	(methylprednisolone) 52
magnesium citrate 1.745 GM/30ML	MAXALT-MLT TBDP 10 MG	MEDROL TABS 52
70	(rizatriptan benzoate) 77	MEDROL TBPK
magnesium hydroxide SUSP 7.75 %,	MAXI-COMFORT INSULIN	(methylprednisolone) 52
400 MG/5ML, 1200 MG/15ML, 2400	SYRINGE 74	medroxyprogesterone acetate
MG/30ML 70	MAXICOMFORT SYR 27G X 1/2" 74	(contraceptive) SUSP IM 51
magnesium oxide (mg supplement)	MAXIDEX SUSP OP 123	medroxyprogesterone acetate
TABS 78	MAXIMUM DAILY GREEN TABS	(contraceptive) SUSY IM 51
magnesium oxide TABS 400 MG .. 13	333.333 MG-8.333 MG-16.666 MCG-	medroxyprogesterone acetate 2.5
malathion 62	133.333 MCG-8.333 MG-8.333 MG-	MG, 5 MG, 10 MG 126
maraviroc TABS 150 MG 45	133.333 UNIT-8.333 MCG-8.333	mefenamic acid CAPS 6
maraviroc TABS 300 MG 45	MG-8.333 MG-8.333 MG-8.333 MG-	mefloquine hcl 37
MARINOL CAPS 2.5 MG	8.333 MG-8.333 MG-8.333 MG-6.666	MEGA MULTI FOR WOMEN TABS
(dronabinol) 31	MG-8.333 MG-1.333 MG-333.333	98
MARPLAN 22	MG-83.333 UNIT-33.333 MG-5000	MEGA MULTI MEN TABS 98
MASK VORTEX/CHILD/FROG ... 76	UNIT-5 MG-33.333 MG-1.333 MG-	MEGAVITE FRUITS & VEGGIES
MASK	16.666 MCG-20 MG-0.333 MG-	TABS 98
VORTEX/TODDLER/LADYBUG .. 76	33.333 MCG-0.333 MG-5 MG-83.333	MEGAVITE GOLDEN YEARS 55+
MAVENCLAD (10 TABS) 10 MG	MG-50 MCG-10 MG-25 MCG-3.333	TABS 98
(cladribine (multiple sclerosis)) ... 127	MG-33.333 MG-8.333 MG-1.666 MG-	megestrol acetate (appetite) 126
MAVENCLAD (4 TABS) 10 MG	6.666 MG-6.666 MG-1.666 MG-0.833	megestrol acetate SUSP 38
(cladribine (multiple sclerosis)) ... 127	MG-11.666 MG-3.333 MG-1.666 MG-	megestrol acetate TABS 38
MAVENCLAD (5 TABS) 10 MG	33.333 MG-3.333 MG-3.333 MG-	MEIJER ADVANCED FORMULA
(cladribine (multiple sclerosis)) ... 127	3.333 MG-16.666 MG-33.333 MG-	TABS 60 MG-2 MG-30 MCG-400
MAVENCLAD (6 TABS) 10 MG	33.333 MG-3.333 MG-3.333 MG-	MCG-400 UNIT-6 MCG-1.7 MG-25
(cladribine (multiple sclerosis)) ... 127	3.333 MG-8.333 MG 98	MCG-20 MG-250 MCG-3500 UNIT-
MAVENCLAD (7 TABS) 10 MG	MAXITROL SUSP (neomycin-	
	polymy-dexameth) 123	
	MAXI-TUSS PE ELIX 5 MG/5ML-2	
	MG/5ML 53	
	MAYZENT STARTER PACK TBPK	

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	TABS	98	metformin hcl TB24 500 MG, 1000 MG	25
MEKTOVI	MENS MULTIVITAMIN TABS	98	metformin hcl TB24 500 MG	25
meloxicam CAPS	MENVEO SOLN	132	metformin hcl TB24 750 MG	25
meloxicam TABS	MENVEO SOLR	132	methadone hcl TABS 10 MG	9
memantine hcl CP24	meperidine hcl SOLN PO 50 MG/5ML	9	methadone hcl TABS 5 MG	9
memantine hcl SOLN	meperidine hcl TABS 50 MG	9	methamphetamine hcl	1
memantine hcl TABS	meprobamate	13	methazolamide TABS	63
memantine hcl-donepezil hcl CP24 126	mercaptopurine SUSP 2000 MG/100ML	37	methenamine mandelate	37
MEMORY COMPLEX BRAIN HEALTH TABS	mercaptopurine TABS	37	methenamine-hyosc-methylene blue-sod phos-phenyl sal TABS 81.6 MG	36
MENATROL CAPS	MERILOG SOLN SC 100 UNIT/ML 28	37	methimazole TABS	129
MENQUADFI 0.5 ML	MERILOG SOLOSTAR SOPN SC 100 UNIT/ML	28	methocarbamol TABS 1000 MG	119
MENS 50+ ADVANCED CAPS	mesalamine CP24	66	methocarbamol TABS	119
MENS 50+ MULTIVITAMIN TABS	mesalamine CPCR	66	methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML	38
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	mesalamine CPDR	66	methotrexate sodium SOLR	38
MENS MULTI HEALTH FORMULA	mesalamine ENEM	66	methotrexate sodium TABS 2.5 MG	38
	mesalamine SUPP	66	methsuximide	21
	mesalamine TBEC 1.2 GM	66	methylidopa TABS 500 MG	34
	mesalamine TBEC 800 MG	66	methylidopa TABS	34
	mesalamine w/ cleanser	66	methylergonovine maleate TABS	124
	METAVEX TABS	119	METHYLIN SOLN (methylphenidate hcl)	2
	metaxalone	119	methylphenidate hcl CHEW	2
	METAXALONE 640 MG	119	methylphenidate hcl CP24 10 MG, 20 MG, 30 MG, 40 MG, 60 MG	2
	metformin hcl SOLN	25	methylphenidate hcl CP24	2
	metformin hcl TABS 1000 MG	25	methylphenidate hcl CPCR	2
	metformin hcl TABS 500 MG	25	methylphenidate hcl SOLN	2
	metformin hcl TABS 625 MG, 750 MG	25		
	metformin hcl TABS 850 MG	25		

methylphenidate hcl TABS 10 MG, 20 MG	2	METROCREAM CREA (metronidazole (topical))	62	midodrine hcl	135
methylphenidate hcl TABS 5 MG ...	2	METROGEL GEL 1 % (metronidazole (topical))	62	MIEBO	124
methylphenidate hcl TB24 18 MG, 27 MG, 54 MG	2	metronidazole (topical) CREA	62	miglitol	24
methylphenidate hcl TB24 36 MG ..	2	metronidazole (topical) GEL 0.75 % 62		MIL ADREGEN TABS	119
methylphenidate hcl TBCR 10 MG, 20 MG, 36 MG	2	metronidazole (topical) GEL 1 % ..	62	MINCORA TABS	116
methylphenidate hcl TBCR 18 MG, 27 MG, 54 MG	2	metronidazole (topical) LOTN	62	minocycline hcl CAPS	129
methylphenidate hcl TBCR 45 MG, 63 MG, 72 MG	2	metronidazole CAPS	36	minocycline hcl TABS	129
methylphenidate PTCH	2	metronidazole TABS	36	minoxidil 10 MG	36
methylprednisolone TABS	52	metronidazole vaginal	134	minoxidil 2.5 MG	36
methylprednisolone TBPK	52	mexiletine hcl	13	mirabegron TB24	131
methyltestosterone TABS	12	MG PLUS PROTEIN TABS	119	MIRAPEX ER TB24 2.25 MG, 3 MG, 3.75 MG (pramipexole dihydrochloride)	39
metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML	66	MICARDIS (telmisartan)	34	MIRCERA	68
metoclopramide hcl TABS	66	MICARDIS HCT (telmisartan- hydrochlorothiazide)	36	mirtazapine TABS 15 MG	22
metolazone	63	MICONAZOLE 7 SUPP 100 MG .	134	mirtazapine TABS 30 MG	21
metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 25 MG-50 MG	35	miconazole nitrate (topical) CREA .	56	mirtazapine TABS 7.5 MG, 45 MG	22
metoprolol & hydrochlorothiazide TABS 50 MG-100 MG	35	miconazole nitrate vaginal CREA 2 %	134	mirtazapine TBDP 15 MG	22
metoprolol succinate TB24 200 MG 48		miconazole nitrate vaginal KIT ...	134	mirtazapine TBDP 30 MG	22
metoprolol succinate TB24 25 MG, 50 MG, 100 MG	48	miconazole nitrate vaginal SUPP 100 MG	134	mirtazapine TBDP 45 MG	22
metoprolol tartrate TABS 100 MG .	48	miconazole nitrate vaginal SUPP 200 MG	134	MIRVASO (brimonidine tartrate (topical))	62
metoprolol tartrate TABS 12.5 MG, 37.5 MG, 75 MG	48	miconazole-zinc oxide-white petrolatum	56	misoprostol	131
metoprolol tartrate TABS 25 MG, 50 MG	48	MICROCHAMBER DEVI	76	MITIGARE CAPS (colchicine)	67
		MICROCHAMBER MISC	76	MM INSULIN SYRINGE/NEEDLE	74
		MICROSPACER MISC	76	M-M-R II SOLR	133
		midazolam hcl SOLN IJ	69	MNEXSPIKE SUSY 10 MCG/0.2ML .	133
		MIDAZOLAM HCL SOLN IJ	69	modafinil	2
				moexipril hcl	34

mometasone furoate (nasal) SUSP 120	moxifloxacin hcl TABS 65	UNIT-70 MCG 99
mometasone furoate CREA 60	MRESVIA 133	MULTI FOR HER CAPS 60 MG-2
mometasone furoate OINT 60	MS CONTIN TBCR (morphine sulfate) 9	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 99
mometasone furoate SOLN 60	MULTI COMPLETE CAPS 60 MG-2	MULTI FOR HER TABS 120 MG-2
MONOJECT INSULIN SYRINGE .74	MG-30 MCG-400 MCG-1000 UNIT-6	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 99
MONOJECT ULTRA COMFORT SYRINGE 74	MG-1.7 MG-40 MCG-20 MG-10	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 99
montelukast sodium CHEW 14	MG-18 MG-1.5 MG-40 MG-15 MG-2	MULTI FOR HIM CAPS 60 MG-4
montelukast sodium PACK 14	MG-2500 UNIT-100 MG-45 MCG- 150 MCG-50 UNIT-4 MG-120 MCG- 20 MCG 99	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 100
montelukast sodium TABS 14	MULTI COMPLETE/IRON TABS 180	MULTI FOR HIM TABS 180 MG-4
MOOD FOOD CAPS 99	MG-2 MG-30 MG-400 MCG-1000	MULTI FOR HIM TABS 180 MG-4
MOOD FOOD ES CAPS 99	UNIT-6 MCG-1.7 MG-80 MCG-20	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 99
morphine sulfate beads 9	MG-2500 UNIT-10 MG-18 MG-162	MULTI FOR HIM CAPS 60 MG-4
morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG 9	MG-1.5 MG-15 MG-100 MG-75	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 100
morphine sulfate SOLN PO 10 MG/5ML, 20 MG/5ML 9	MCG-150 MCG-50 UNIT-2 MG-4	MULTI FOR HIM TABS 180 MG-4
morphine sulfate SOLN PO 10 MG/5ML 9	MG-120 MCG-70 MCG 99	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 99
morphine sulfate SOLN PO 100 MG/5ML 9	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 99	MULTI FOR HIM CAPS 60 MG-4
morphine sulfate SUPP 9	MULTI FOR HER 50+ TABS 180	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 100
morphine sulfate TABS 9	MG-6 MG-30 MCG-400 MCG-1000	MULTI FOR HIM TABS 180 MG-4
morphine sulfate TBCR 9	UNIT-25 MCG-10 MG-1.7 MG-80	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 99
MOTTEGRITY (prucalopride succinate) 65	MCG-1.5 MG-15 MG-20 MG-100	MULTI FOR HIM CAPS 60 MG-4
MOTPOLY XR CP24 19	MG-120 MCG-2 MG-200 MG-150	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 100
MOUNJARO 26	MCG-75 MCG-4 MG-60 UNIT-2500	MULTI FOR HIM TABS 180 MG-4
MOVANTIK 67		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 99
moxifloxacin hcl (ophth) SOLN OP 122		MULTI FOR HIM TABS 180 MG-4

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 100	MG-400 MCG-2 MG-6 MCG-10 MG- 1.7 MG-20 MG-5000 UNIT-1.5 MG- 400 UNIT-30 UNIT116	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- 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 MG101
MULTI VITAMIN TABS 116	multiple vitamins w/ minerals CAPS 100	
MULTI VITAMIN W/D-3 TABS ... 116	multiple vitamins w/ minerals TABS 100	
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 100	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 UNIT100	
MULTIA CAPS100	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 100	
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 MG100	MULTITOL-M TABS 100	
multiple vitamin TABS 116	MULTIVITAMIN ADULT (MINERALS) TABS100	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 101
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 UNIT116	MULTIVITAMIN ADULT TABS ... 116	MULTIVITAMIN DROPS/IRON SOLN117
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 UNIT116	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	MULTIVITAMIN HEALTH FORM/CA/FE TABS101
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		MULTIVITAMIN INFANT & TODDLER SOLN PO118
		MULTIVITAMIN INFANT & TODDLER SOLN117

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	116	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	102	MULTIVITAMIN MINERALS TABS 103 mupirocin calcium (topical)55 mupirocin OINT 55 MVASI38 MVW COMPLETE FORMULATION CAPS 103 MVW COMPLETE FORMULATION D3000 CAPS 103 MVW COMPLETE FORMULATION D5000 CAPS 103 MVW COMPLETE FORMULATION MINIS CAPS103 MVW MODULATOR FORMULATION CAPS 103 MVW MODULATOR FORMULATION MINI CAPS103 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 MG103 mycophenolate mofetil CAPS79 mycophenolate mofetil SUSR 79 mycophenolate mofetil TABS79 mycophenolate sodium79 MYDAYIS CP24 (amphetamine- dextroamphetamine) 1 MYFORTIC (mycophenolate sodium)79 MYHIBBIN SUSP 79 MYNEPHRON CAPS 1 MG 80
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	102	MULTIVITAMIN WOMEN TABS . 103 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 103 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 UNIT103 MULTIVITAMIN/ZINC STRESS TABS103		
MULTIVITAMIN MEN TABS102 MULTI-VITAMIN MONOCAPS TABS 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 116 MULTIVITAMIN TABS116 MULTIVITAMIN WOMEN 50+ TABS 100 MG-30 MCG-400 MCG-1.1 MG-				

MYRBETRIQ SRER	131	naproxen SUSP	6	124
MYRBETRIQ TB24 (mirabegron)	131	naproxen TABS	6	neomycin-polymyxin-hc (otic) SUSP .
nabumetone	6	naproxen TBEC	6	124
nadolol TABS 20 MG, 40 MG, 80 MG	48	naproxen-esomeprazole magnesium	6	NEORAL CAPS (cyclosporine
.....	48	6	modified (for microemulsion))
naftifine hcl CREA	56	naratriptan hcl	77	NEORAL SOLN (cyclosporine
naftifine hcl GEL 2 %	56	NARCAN LIQD (naloxone hcl)	30	modified (for microemulsion))
NAFTIN GEL 2 % (naftifine hcl) ...	56	NARDIL (phenelzine sulfate)	22	NEOVITE TABS
NALFON CAPS (fenoprofen calcium)	6	nateglinide	29	103
.....	6	NATESTO GEL NA	12	NERVIVE NERVE RELIEF TABS
NALFON TABS 600 MG	6	NATROBA (spinosad)	62	119
NALOCET TABS	11	NAT-RUL THERAVITE-M TABS .	103	NEUPRO
naloxone hcl LIQD	30	NATRUL-VITES TABS	103	39
naloxone hcl SOCT	30	NAYZILAM	18	NEURONTIN CAPS (gabapentin) .20
naloxone hcl SOLN 0.4 MG/ML, 4	30	nebivolol hcl	48	NEURONTIN SOLN (gabapentin) .20
MG/10ML	30	nefazodone hcl	24	NEURONTIN TABS 600 MG
naloxone hcl SOSY 0.4 MG/ML ...	30	NEMLUVIO	61	(gabapentin)
naloxone hcl SOSY 2 MG/2ML ...	30	NEOMULTIVITE TABS	116	20
naltrexone hcl	30	neomycin sulfate TABS	3	NEURONTIN TABS 800 MG
NAMZARIC CP24 (memantine hcl-	126	neomycin-bacitracin zn-polymyxin	122	(gabapentin)
donepezil hcl)	126	122	55	20
NAMZARIC CP24	126	neomycin-bacitracin-polymyxin OINT	55	NEURONTIN TABS 800 MG
naphazoline w/ pheniramine 0.3 %-	122	55	123	(gabapentin)
0.025 %	122	neomycin-polymy-dexameth OINT	123	20
naphazoline w/ pheniramine 0.315	122	123	123	NEURONTIN TABS 800 MG
%-0.027 %	122	neomycin-polymy-dexameth SUSP	123	(gabapentin)
NAPRELAN TB24 (naproxen sodium)	6	123	55	20
.....	6	neomycin-polymyxin w/ pramoxine	55	NEURONTIN TABS 800 MG
NAPROSYN SUSP (naproxen)	6	55	122	(gabapentin)
naproxen sodium TABS 220 MG ...	6	neomycin-polymyxin-gramicidin .	122	20
naproxen sodium TABS 275 MG, 550	6	122	123	NEURONTIN TABS 800 MG
MG	6	neomycin-polymyxin-hc (ophth) .	123	(gabapentin)
naproxen sodium TB24	6	123	123	20
	6	neomycin-polymyxin-hc (otic) SOLN .	123	NEURONTIN TABS 800 MG

niacin TBCR	135	MINERALS TABS	103	NOVOLIN 70/30 FLEXPEN RELION SUPN	28
NICADAN TABS	103	NORDITROPIN FLEXPEN SOPN	64	NOVOLIN 70/30 FLEXPEN SUPN	28
nicardipine hcl CAPS	49	norelgestromin-ethinyl estradiol	51	NOVOLIN 70/30 RELION SUSP	28
NICAZEL FORTE TABS	103	norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG	51	NOVOLIN 70/30 SUSP	28
NICAZEL TABS	103	norethindrone & eth estradiol	51	NOVOLIN N FLEXPEN RELION SUPN	28
NICOTINE KIT	128	norethindrone & ethinyl estradiol-fe 51	51	NOVOLIN N FLEXPEN SUPN	28
nicotine polacrilex GUM	128	norethindrone (contraceptive)	51	NOVOLIN N RELION SUSP	28
nicotine polacrilex LOZG	128	norethindrone acet & eth estra TABS 51	51	NOVOLIN N SUSP	28
nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR	128	norethindrone acetate TABS	126	NOVOLIN R FLEXPEN RELION SOPN IJ	28
NICOTROL NS SOLN	128	norethindrone acetate-ethinyl estradiol	65	NOVOLIN R FLEXPEN SOPN IJ	28
nifedipine CAPS	49	norethindrone acetate-ethinyl estradiol-fe	51	NOVOLIN R RELION SOLN IJ	28
nifedipine TB24 30 MG, 90 MG	49	norethindrone-eth estradiol (triphasic)	51	NOVOLIN R SOLN IJ	28
nifedipine TB24 60 MG	49	norgestimate-ethinyl estradiol (triphasic)	51	NOVOLOG 70/30 FLEXPEN RELION SUPN	28
nimodipine CAPS	49	norgestimate-ethinyl estradiol	51	NOVOLOG FLEXPEN RELION SOPN	28
nimodipine SOLN	49	norgestrel & ethinyl estradiol 30 MCG-0.3 MG	51	NOVOLOG FLEXPEN SOPN	29
nisoldipine	49	NORLIQVA SOLN	49	NOVOLOG MIX 70/30 FLEXPEN SUPN	29
nitazoxanide TABS	36	NORPACE CR CP12 150 MG	13	NOVOLOG MIX 70/30 RELION SUSP	29
NITRO-BID OINT	13	nortriptyline hcl CAPS	24	NOVOLOG MIX 70/30 SUSP	29
nitrofurantoin	37	nortriptyline hcl SOLN	24	NOVOLOG PENFILL SOCT	29
nitrofurantoin macrocrystal 50 MG, 100 MG	37	NORVASC TABS (amlodipine besylate)	49	NOVOLOG RELION SOLN IJ	29
nitrofurantoin monohyd macro	37	NORVIR PACK	45	NOVOLOG SOLN IJ	29
nitroglycerin CPR	13	NORVIR TABS (ritonavir)	45	NP THYROID TABS	129
nitroglycerin PT24	13	NOURIANZ	38	NUCALA SOAJ	14
nitroglycerin SUBL	13			NUCALA SOLR	14
NIVA THYROID TABS	129			NUCALA SOSY	14
NIVEA LOTN	61				
NIVEA VISAGE LOTN	61				
nizatidine CAPS	130				
NO IRON MULT VITAMIN-					

NULEV TBDP 0.125 MG (hyoscyamine sulfate)	130	octreotide acetate KIT	65	ODEFSEY	45
NUPLAZID CAPS	39	OCUFLOX (ofloxacin (ophth)) ...	122	OFEV	129
NUPLAZID TABS 10 MG	39	OCULAR VITAMINS TABS	103	ofloxacin (ophth)	122
NURTEC	77	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	104	ofloxacin (otic)	124
NUTRALYN TABS	103	OCUTABS-LUTEIN TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG	103	ofloxacin 300 MG	65
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	103	OCUVEL CAPS 250 MG-0.5 MG-5 MG-1 MG-40 MG-1 MG-200 UNIT 104		ofloxacin 400 MG	65
NUTROPIN AQ NUSPIN 10 SOPN 64		OCUVITE ADULT 50+ CAPS	104	OGIVRI	38
NUTROPIN AQ NUSPIN 20 SOPN 64		OCUVITE ADULT FORMULA CAPS . 104		OHTUVAYRE	14
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NUVAXOVID COVID-19 VACCINE SUSY 5 MCG/0.5ML	133	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 . 104		olanzapine TABS 2.5 MG, 5 MG ..	42
NUVIGIL (armodafinil)	2	OCUVITE EYE HEALTH FORMULA CAPS 150 MG-30 UNIT-5 MG-1 MG- 1 MG-9 MG-90 MG-160 MG-250 MG 104		olanzapine TABS 7.5 MG, 10 MG .	42
NUZYRA TABS	129	OCUVITE EYE PERFORMANCE CAPS	104	olanzapine TBDP	42
NYMALIZE SOLN 6 MG/ML	49	OCUVITE-LUTEIN CAPS	104	olanzapine-fluoxetine hcl 25 MG-12 MG, 50 MG-12 MG, 50 MG-6 MG 126	
NYSTATIN (nystatin (mouth-throat)) . 80		OCUVITE-LUTEIN TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG	104	olanzapine-fluoxetine hcl 25 MG-3 MG, 25 MG-6 MG	126
nystatin (mouth-throat)	80			olmesartan medoxomil	34
nystatin (topical) CREA	56			olmesartan medoxomil-amlodipine- hydrochlorothiazide	36
nystatin (topical) OINT	56			olmesartan medoxomil- hydrochlorothiazide	36
nystatin (topical) POWD EX	56			olopatadine hcl (nasal)	120
nystatin TABS	31			olopatadine hcl	124
nystatin-triamcinolone CREA	56			OLUMIANT	3
nystatin-triamcinolone OINT	56			omega-3 fatty acids CAPS 1000 MG . 120	
OCTAGAM SOLN 30 GM/300ML 125				omega-3-acid ethyl esters	32

CAPS	131	30	ONE DAILY ESSENTIALS TABS	116	
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OMNARIS SUSP	120	ondansetron TBDP 4 MG, 8 MG ...	30	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	105
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QELBREE	2	quetiapine fumarate TABS 300 MG, 400 MG	42	ranitidine hcl TABS 150 MG	130
QNASL	120	quetiapine fumarate TB24	42	ranitidine hcl TABS 300 MG	130
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		QUILLIVANT XR SRER	2	RAPAFLO (silodosin)	67
		QUIN B STRONG TABS	108	rasagiline mesylate	39
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		quinapril-hydrochlorothiazide 12.5 MG-10 MG	36	RAYAVIT TABS	108
		quinapril-hydrochlorothiazide 12.5 MG-20 MG	36	RAYOS TBEC	52
		quinapril-hydrochlorothiazide 25 MG- 20 MG	36	REALITY INSULIN SYRINGE	74
		quinidine gluconate TBCR	13	REBIF REBIDOSE SOAJ	128
		quinidine sulfate TABS	13	REBIF REBIDOSE TITRATION PACK SOAJ	128
		QUINTABS TABS	117	REBIF SOSY	128
		QUINTABS-M TABS	108	REBIF TITRATION PACK SOSY .	128
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		QVAR REDHALER 40 MCG/ACT	.15	RECOMBIVAX HB SUSY	134
				REGLAN TABS (metoclopramide hcl)	66
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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 ..	109	REXULTI	43	risedronate sodium TABS 5 MG, 30 MG	64
		REYATAZ CAPS 200 MG (atazanavir sulfate)	45	risedronate sodium TBEC	64
		REYATAZ CAPS 300 MG (atazanavir sulfate)	45	RISPERDAL CONSTA (risperidone microspheres)	41
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				RISPERDAL TABS 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG (risperidone) ...	41
				risperidone microspheres	41
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risperidone TABS 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG	ROZEREM (ramelteon)	SECUADO
risperidone TABS	ROZLYTREK CAPS	SECURESAFE INSULIN SYRINGE
risperidone TBDP	rufinamide SUSP	74
RITALIN TABS 10 MG, 20 MG (methylphenidate hcl)	rufinamide TABS	SEGLENTIS
RITALIN TABS 5 MG (methylphenidate hcl)	RUKOBIA	SEGLUROMET
RITEFLO DEVI	RUXIENCE	SELARSDI SOLN SC 45 MG/0.5ML
ritonavir TABS	RYALTRIS	57
rivaroxaban SUSR 1 MG/ML	RYKINDO SRER	SELARSDI SOSY SC 45 MG/0.5ML, 90 MG/ML
rivaroxaban TABS 2.5 MG	RYTARY CPCR	SELECT-OB+DHA MISC
rivastigmine 13.3 MG/24HR	SABRIL PACK (vigabatrin)	selegiline hcl CAPS
rivastigmine 4.6 MG/24HR, 9.5 MG/24HR	SABRIL TABS (vigabatrin)	selegiline hcl TABS
rivastigmine tartrate CAPS	sacubitril-valsartan TABS	selenium sulfide LOTN 1 %
rizatriptan benzoate TABS	salicylic acid GEL 6 %	selenium sulfide LOTN 2.5 %
rizatriptan benzoate TBDP	SALICYLIC ACID OINT	selenium sulfide SHAM 1 %
ROCKLATAN	saline SOLN 0.65 %	SELZENTRY SOLN
roflumilast	salsalate	SELZENTRY TABS 150 MG (maraviroc)
ropinirole hydrochloride TABS 0.25 MG, 3 MG, 4 MG	SANCUSO PTCH	SELZENTRY TABS 300 MG (maraviroc)
ropinirole hydrochloride TABS 0.5 MG, 1 MG, 2 MG, 5 MG	SANDIMMUNE CAPS (cyclosporine)	SEMGLEE (YFGN) SOLN
ropinirole hydrochloride TB24	79	SEMGLEE (YFGN) SOPN
rosuvastatin calcium TABS	SAPHRIS (asenapine maleate)	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
ROWASA (mesalamine w/ cleanser) 66	SAVAYSA	senosides TABS 8.6 MG
ROXICODONE TABS 15 MG, 30 MG (oxycodone hcl)	SAVELLA TABS 12.5 MG, 25 MG, 50 MG, 100 MG (milnacipran hcl)	senosides-docusate sodium TABS
ROXYBOND TABA 10 MG, 15 MG, 30 MG	SAVELLA TITRATION PACK MISC (milnacipran hcl)	70
	saxagliptin hcl	
	saxagliptin-metformin hcl	
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sertraline hcl CAPS 150 MG, 200 MG23	SIMLANDI (2 PEN) AJKT 5	sodium chloride (inhalant) NEBU 0.9 %, 3 %, 10 %53
sertraline hcl CONC 23	SIMLANDI (2 SYRINGE) PSKT5	sodium citrate & citric acid 67
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sertraline hcl TABS 25 MG, 50 MG 23	SIMPONI SOSY5	sodium fluoride (dental) GEL 80
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sevelamer carbonate TABS 67	simvastatin TABS 80 MG33	sodium fluoride CHEW78
sevelamer hcl67	SINEMET TABS 100 MG-10 MG, 100 MG-25 MG (carbidopa-levodopa)39	sodium fluoride SOLN 0.5 MG/ML .78
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SHINGRIX134	SINGULAIR PACK (montelukast sodium)14	sodium phosphates ENEM 70
	SINGULAIR TABS (montelukast sodium)14	sodium polystyrene sulfonate POWD 79
	sirolimus SOLN 79	sodium polystyrene sulfonate SUSP CO 15 GM/60ML80
		sodium polystyrene sulfonate SUSP PR 30 GM/120ML80

sodium sulfate-potassium sulfate-magnesium sulfate	70	spironolactone & hydrochlorothiazide	63	TABS	117
SOFOSBUVIR-VELPATASVIR TABS	47	spironolactone TABS	63	STRESSTABS ADVANCED TABS	
SOGROYA	64	SPORANOX CAPS (itraconazole) .	31	30 MG-5 MG-400 MCG-400 UNIT-50	
solifenacin succinate TABS	131	SPORANOX SOLN (itraconazole) .	31	MCG-2500 UNIT-1.5 MG-20 MG-1.5	
SOLIQUA	25	SPRITAM TB3D 250 MG, 500 MG,		MG-30 MG-20 MG-15 UNIT	109
SOLO TABS	109	750 MG, 1000 MG (levetiracetam) 20		STRESSTABS ENERGY TABS ..	117
SOLOSEC	3	SPRITAM TB3D	20	STRIBILD	45
SOMA TABS (carisoprodol)	120	SSS 10-5 CREA 10 %-5 %		STRIVERDI RESPIMAT	16
SOOLANTRA (ivermectin (rosacea))		(sulfacetamide sodium w/ sulfur) ..	54	STROVITE ONE TABS	109
.....	62	STAMARIL SUSR	134	SUBLOCADE SOSY	11
SORBITOL XX	125	STARJEMZA SOLN SC 45		SUBOXONE FILM SL 0.5 MG-2 MG,	
SORILUX FOAM	57	MG/0.5ML	57	1 MG-4 MG, 2 MG-8 MG	
sotalol hcl (afib/af)	48	STARJEMZA SOSY SC 45		(buprenorphine hcl-naloxone hcl	
sotalol hcl TABS	48	MG/0.5ML, 90 MG/ML	57	dihydrate)	12
SOTYKTU	57	STEGLATRO	29	SUBOXONE FILM SL 3 MG-12 MG	
SOTYLIZE SOLN PO	48	STEGLUJAN	25	(buprenorphine hcl-naloxone hcl	
SOVALDI PACK	47	STELARA SOSY	57	dihydrate)	12
SOVALDI TABS	47	STEQEYMA	57	SUBVENITE SUSP PO 10 MG/ML	
SOVUNA 200 MG	37	STIOLTO RESPIMAT	16	20	
specialty vitamins products TABS		STRATTERA (atomoxetine hcl)	2	sucalfate SUSP	130
119		STRESS B		sucalfate TABS	130
SPECTRAVITE TABS	109	COMPLEX/ANTIOXID/ZINC TABS		SUFLAVE	70
SPEVIGO SOSY	57	500 MG-45 MCG-400 MCG-10 MG-		SULAR 8.5 MG, 17 MG, 34 MG	
SPIKEVAX 6M-11Y SUSY 25		100 MG-5 MG-20 MG-10 MG-13.5		(nisoldipine)	49
MCG/0.25ML	134	MG-3 MG-24 MG-77 MG-12 MCG		sulfacetamide sodium (acne)	54
SPIKEVAX SUSY	134	109		sulfacetamide sodium (ophth) OINT	
spinosad	62	STRESS FORMULA TABS 500 MG-		122	
SPIRIVA HANDIHALER CAPS IN		3 MG-45 MCG-400 MCG-12 MCG-20		sulfacetamide sodium (ophth) SOLN .	
(tiotropium bromide)	14	MG-10 MG-100 MG-10 MG-30 UNIT,		122	
SPIRIVA RESPIMAT AERS IN	14	500 MG-5 MG-45 MCG-400 MCG-12		sulfacetamide sodium GEL	57
		MCG-10 MG-100 MG-20 MG-10 MG-		sulfacetamide sodium LIQD	58
		30 UNIT, 500 MG-5 MG-45 MCG-400		sulfacetamide sodium SHAM 10 %	
		MCG-15 MG-12 MCG-20 MG-10		58	
		MG-100 MG-30 UNIT	117	sulfacetamide sodium w/ sulfur	
		STRESS FORMULA/ZINC/ENERGY		CREA 10 %-2 %, 10 %-5 %	54

sulfacetamide sodium w/ sulfur EMUL 10 %-1 %	54	MG/0.5ML	78	150 MCG-31 MG-10 MCG-7.5 MG 109
sulfacetamide sodium w/ sulfur FOAM	55	MG/0.5ML	78	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
sulfacetamide sodium w/ sulfur LIQD 55		MG/0.5ML	78	110
sulfacetamide sodium w/ sulfur LOTN 10 %-5 %	55	sumatriptan succinate TABS	78	SUPERIOR MENS MULTI TABS .110
sulfacetamide sodium w/ sulfur LOTN 9.8 %-4.8 %	55	sumatriptan-naproxen sodium	77	SUPERIOR WOMENS MULTI TABS 110
sulfacetamide sodium w/ sulfur SUSP 10 %-5 %	55	SUMAXIN CP	55	SUPPORT-500 CAPS
sulfacetamide sodium w/ sulfur SUSP 8 %-4 %	55	SUMAXIN PADS	55	110
SULFACETAMIDE SODIUM- SULFUR SUSP	55	SUNOSI	2	SUPREP BOWEL PREP KIT (sodium sulfate-potassium sulfate- magnesium sulfate)
sulfacetamide sod-prednisolone SOLN	123	SUPER ANTIOXIDANT CAPS ...	109	70
sulfamethoxazole-trimethoprim SUSP	36	SUPER ANTIOXIDANTS PROTECTOR CAPS 500 MG-400 UNIT-25000 UNIT-50 MCG	109	SURE COMFORT INSULIN SYRINGE
sulfamethoxazole-trimethoprim TABS	36	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	109	74
sulfasalazine TABS	66	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	109	16
sulfasalazine TBEC	66	SUPER D-ZINC-SELENIUM- COPPER TABS	109	16
sulindac TABS	6	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-		16
SUMADAN	55			16
SUMADAN WASH LIQD (sulfacetamide sodium w/ sulfur) ..	55			77
sumatriptan 20 MG/ACT	78			129
sumatriptan 5 MG/ACT	78			45
sumatriptan succinate SOAJ 4 MG/0.5ML	78			45
sumatriptan succinate SOAJ 6 MG/0.5ML	78			25
sumatriptan succinate SOCT 4				25
				18
				67

SYMTUZA	45	TAPENTADOL HCL ER TB12 50 MG, 100 MG, 150 MG, 200 MG, 250 MG	9	TENORETIC 100 (atenolol & chlorthalidone)	36
SYNALAR CREA (fluocinolone acetoneide)	60	tapentadol hcl TABS 50 MG, 75 MG, 100 MG	9	TENORETIC 50 (atenolol & chlorthalidone)	36
SYNALAR OINT (fluocinolone acetoneide)	60	TARPEYO CPDR	52	TENORMIN TABS (atenolol)	48
SYNJARDY TABS	25	TASCENSO ODT	128	terazosin hcl	34
SYNJARDY XR TB24	25	tasimelteon CAPS	70	terbinafine hcl (topical) CREA	56
SYNVERA TABS	119	tavaborole	56	terbinafine hcl TABS	31
SYSTANE ICAPS AREDS2 CAPS 250 MG-5 MG-1 MG-1 MG-12.5 MG- 200 UNIT	110	TAVNEOS	68	terbutaline sulfate TABS	16
SYSTANE ICAPS AREDS2 TABS 110		tazarotene CREA	57	terconazole vaginal CREA	134
TAB-A-VITE TABS 60 MG-2 MG-400 MCG-20 MG-1.5 MG-10 MCG-6 MCG-1.7 MG-1500 MCG	117	TAZAROTENE FOAM	55	terconazole vaginal SUPP	134
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	117	tazarotene GEL	57	teriflunomide	128
TACLONEX SUSP (calcipotriene- betamethasone dipropionate)	60	TECFIDERA CDPK (dimethyl fumarate)	128	teriparatide SOPN	64
tacrolimus (topical) OINT 0.03 % ..	61	TECFIDERA CPDR (dimethyl fumarate)	128	TERIPARATIDE SOPN	64
tacrolimus (topical) OINT 0.1 % ...	61	TECHLITE INSULIN SYRINGE ...	74	TESTIM GEL TD (testosterone) ...	12
tacrolimus CAPS	79	TEGRETOL SUSP (carbamazepine) . 20		testosterone cypionate SOLN IM 100 MG/ML	12
tadalafil (pulmonary hypertension) TABS	50	TEGRETOL TABS (carbamazepine) . 20		testosterone cypionate SOLN IM 200 MG/ML	12
TADLIQ SUSP	50	TEGRETOL-XR TB12 (carbamazepine)	20	testosterone enanthate SOLN IM ..	12
tafluprost	124	TEGSEDI	128	testosterone GEL TD 1 %, 10 MG/ACT, 20.25 MG/1.25GM, 25 MG/2.5GM, 40.5 MG/2.5GM	12
TALTZ SOAJ	57	TEKTURNA (aliskiren fumarate) ..	36	testosterone GEL TD 1 %, 50 MG/5GM	12
TALTZ SOSY	57	telmisartan	34	testosterone GEL TD 1.62 %, 1.62 %	12
tamoxifen citrate TABS	38	telmisartan-amlodipine	36	testosterone SOLN	12
tamsulosin hcl	67	telmisartan-hydrochlorothiazide ...	36	TETANUS-DIPHTHERIA TOXOIDS TD SUSP	130
		temazepam 15 MG, 30 MG	69	tetrabenazine	127
		temazepam 7.5 MG, 22.5 MG	69	tetracaine hcl (ophth)	122
		tenofovir disoproxil fumarate TABS 45		TETRACAINE HCL 0.5 %	122

tetracycline hcl CAPS	129	THERAGRAN-M ADVANCED TABS .	MCG-20 MG-250 MCG-3500 UNIT-
TETRACYCLINE HCL TABS	129	110	10 MG-300 MCG-1.5 MG-100 MG-15
tetrahydrozoline hcl (ophth) 0.05 %		THERAGRAN-M PREMIER 50 PLUS	MG-150 MCG-200 MG-80 MG-75
122		TABS	MCG-150 MCG-48 MG-2 MG-5
TEZRULY PO 1 MG/ML	34		MCG-2 MG-150 MCG-45 UNIT-20
TEZSPIRE SOAJ	14	THERAGRAN-M PREMIER TABS	MCG-10 MCG-72 MG-2 MG
TEZSPIRE SOSY	14	110	.111
THEO-24 CP24	16	THERAGRAN-M TABS	THERATRUM COMPLETE TABS 60
theophylline ELIX	16	110	MG-2 MG-30 MCG-400 MCG-400
theophylline SOLN	16	THERA-M PLUS MV W/BETA-	UNIT-6 MCG-1.7 MG-20 MG-250
theophylline TB12 300 MG, 450 MG .		CAROT TABS	MCG-5000 UNIT-10 MG-18 MG-1.5
16		110	MG-100 MG-15 MG-80 MG-2 MG-
theophylline TB24	16	THERAMILL FORTE CAPS	150 MCG-162 MG-150 MCG-75
THERA TABS	117	110	MCG-30 UNIT-108 MG-2 MG-72
THERA VITAL M TABS 90 MG-3		THERANATAL LACTATION ONE	MG-5 MCG-10 MCG-2 MG-120
MG-30 MCG-0.4 MG-3 MG-9 MCG-		CAPS	MCG-25 MCG-20 MCG-10 MCG, 60
10 MG-3.4 MG-20 MG-2500 UNIT-			MG-2 MG-30 MCG-400 MCG-400
400 UNIT-30 UNIT-2500 UNIT-27		THERAPEUTIC	UNIT-6 MCG-1.7 MG-25 MCG-20
MG-100 MG-5 MG-15 MCG-7.5 MG-		FORMULA/HEMATINICS TABS 3.3	MG-250 MCG-3500 UNIT-10 MG-18
15 MCG-2 MG-15 MG-40 MG-150		MG-0.33 MG-50 MCG-3.3 MG-33.3	MG-300 MCG-1.5 MG-100 MG-15
MCG-31 MG-10 MCG-7.5 MG ...	110	MG-100 MG-11.7 MG-66.7 MG-3.3	MG-80 MG-150 MCG-162 MG-72
THERA VITAL-M TABS 120 MG-3		MG-41.7 MG-140 UNIT-5 UNIT-0.67	MG-75 MCG-150 MCG-30 UNIT-109
MG-15 MCG-400 MCG-400 UNIT-9		MG-1400 UNIT	MG-2 MG-5 MCG-10 MCG-2 MG-
MCG-3.4 MG-30 MG-5500 UNIT-10		110	120 MCG-20 MCG-10 MCG-2 MG
MG-18 MG-3 MG-100 MG-15 MG-2		THERAPEUTIC-M TABS 90 MG-2	111
MG-40 MG-7.5 MG-15 MCG-150		MG-30 MCG-400 MCG-1.5 MG-400	THERA-VITE MAX-M TABS
MCG-30 UNIT-31 MG-5 MG-15		UNIT-6 MCG-1.7 MG-20 MG-5000	.111
MCG-10 MCG	110	UNIT-10 MG-9 MG-60 MG-2 MG-15	THEREMS TABS
THERABASIC-M TABS 400 UNIT-90		MCG-8 MG-15 MCG-2 MG-15 MG-	117
MG-3 MG-35 MCG-0.4 MG-9 MCG-		40 MG-150 MCG-10 MCG-30 UNIT-8	thiamine hcl TABS 100 MG
10 MG-3.4 MG-30 MG-5000 UNIT-27		MG, 90 MG-30 MCG-400 MCG-3	.135
MG-3 MG-100 MG-1250 UNIT-15		MG-20 MG-6 MG-10 MG-3.4 MG-10	thiamine hcl TABS 50 MG, 250 MG
MCG-7.5 MG-15 MCG-40 MG-15		MCG-27 MG-9 MG-100 MG-2 MG-75	135
MG-150 MCG-30 UNIT-31 MG-2		MCG-11 MG-2 MG-10 MCG-150	thiamine mononitrate TABS 100 MG .
MG-10 MCG-5 MG-7.5 MG	110	MCG-50 MCG-2 MG-10 MCG-15	135
THERAGRAN-M ADVANCED 50		MG-145 MG-150 MCG-35 MG-70	thioridazine hcl
PLUS TABS	110	MCG-1500 MCG-28 MCG-12 MCG-8	42
		MG	thiothixene
		111	43
		THERA-TABS M TABS	THRIVE FOR LIFE WOMENS TABS
		111	60 MG-6 MG-300 MCG-400 MCG-
		THERA-TABS TABS 90 MG-3 MG-	1000 UNIT-18 MCG-5.1 MG-60
		30 MCG-400 MCG-3 MG-20 MG-400	MCG-20 MG-100 MCG-3500 UNIT-
		UNIT-9 MCG-5000 UNIT-10 MG-3.4	15 MG-18 MG-500 MG-700 MCG-4.5
		MG-30 UNIT	MG-50 MG-15 MG-75 MCG-150
		117	MCG-30 UNIT-2 MG-2 MG-70 MCG-
		THERATRUM COMPLETE 50 PLUS	120 MCG-150 MCG
		TABS 60 MG-3 MG-30 MCG-400	111
		MCG-400 UNIT-25 MCG-1.7 MG-10	

THYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	129	tiagabine hcl	21	ticagrelor 60 MG, 90 MG	68	TICOVAC	134	timolol	121	timolol maleate (ophth) SOLG	121	timolol maleate (ophth) SOLN 0.5 % .	121	timolol maleate (ophth) SOLN	121	timolol maleate TABS	48	TIMOPTIC OCUDOSE SOLN (timolol maleate (ophth))	121	tinidazole	36	tioconazole vaginal 6.5 %	134	tiotropium bromide CAPS IN 18 MCG	14	TIVICAY PD TBSO	45	TIVICAY TABS 50 MG	45	tizanidine hcl CAPS	120	tizanidine hcl TABS	120	TM-DAILY VITE TABS	117	TOBI NEBU (tobramycin)	3	TOBI PODHALER CAPS	3	TOBRADEX OINT	123	TOBRADEX ST SUSP	123	tobramycin (ophth) SOLN	122	tobramycin NEBU	3	tobramycin sulfate SOLN IJ 1.2 GM/30ML, 10 MG/ML, 80 MG/2ML .	3	tobramycin sulfate SOLR	3	tobramycin-dexamethasone SUSP		topiramate TABS 100 MG	20	topiramate TABS 200 MG	20	topiramate TABS 25 MG, 50 MG ..	20	TOPROL XL TB24 200 MG (metoprolol succinate)	48	TOPROL XL TB24 25 MG, 50 MG, 100 MG (metoprolol succinate)	48	toremifene citrate	38	torsemide TABS 20 MG	63	torsemide TABS 5 MG, 10 MG, 100 MG	63	TOSYMRA	78	TOUJEO MAX SOLOSTAR SOPN	29	TOUJEO SOLOSTAR SOPN	29	TOVIAZ (fesoterodine fumarate)	131	TRACLEER TABS (bosentan)	49	TRACLEER TBSO 32 MG (bosentan)	49	TRADJENTA	26	tramadol hcl CP24 100 MG, 200 MG, 300 MG	10	TRAMADOL HCL SOLN (tramadol hcl)	10	tramadol hcl SOLN	10	tramadol hcl TABS 25 MG	10	tramadol hcl TABS 50 MG	10	tramadol hcl TABS 75 MG, 100 MG	10	tramadol hcl TB24	10	tramadol-acetaminophen	11	trandolapril 1 MG, 2 MG	34	trandolapril 4 MG	34
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trandolapril-verapamil hcl	36	tretinoin microsphere	55	TRILEPTAL TABS (oxcarbazepine)	20
tranexamic acid TABS	69	TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	38	trimethobenzamide hcl CAPS	31
TRANSDERM SCOP 1 MG/3DAYS (scopolamine)	30	triamcinolone acetonide (mouth)	80	trimethoprim TABS	36
TRANSDERM-SCOP (scopolamine) 31		triamcinolone acetonide (nasal) AERO	120	TRINTELLIX	24
tranylcypromine sulfate	22	triamcinolone acetonide (topical) AERS	60	TRIPHROCAPS CAPS 1 MG	80
TRAVATAN Z SOLN (travoprost)	124	triamcinolone acetonide (topical) CREA	60	TRIUMEQ PD TBSO	45
travoprost SOLN	124	triamcinolone acetonide (topical) LOTN	60	TRIUMEQ TABS	45
TRAZIMERA 420 MG	38	triamcinolone acetonide (topical) OINT	60	TROKENDI XR CP24 (topiramate)	20
trazodone hcl TABS 300 MG	24	triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG	63	tropicamide SOLN	121
trazodone hcl TABS 50 MG, 100 MG, 150 MG	24	triamterene & hydrochlorothiazide TABS 25 MG-37.5 MG	63	trospium chloride CP24	131
TRELEGY ELLIPTA	16	triamterene & hydrochlorothiazide TABS 50 MG-75 MG	63	trospium chloride TABS	131
TREMFYA ONE-PRESS SOPN SC 100 MG/ML	57	triazolam	69	TRUE COMFORT INSULIN SYRINGE	74
TREMFYA PEN SOAJ 100 MG/ML	57	TRIBENZOR (olmesartan medoxomil-amlodipine-hydrochlorothiazide)	36	TRUE COMFORT PRO INSULIN SYR	74
TREMFYA PEN SOAJ SC 200 MG/2ML	66	TRICOR TABS 145 MG (fenofibrate)	33	TRUE DAILY VITE TABS 60 MG-400 MCG-1.5 MG-20 MG-2 MG-1.7 MG-10 MCG-1500 MCG-6 MCG	117
TREMFYA SOSY SC	66	trifluoperazine hcl TABS	42	TRUE METRIX AIR GLUCOSE METER KIT	72
TREMFYA-CD/UC INDUCTION SOAJ SC 200 MG/2ML	66	trifluridine	122	TRUE METRIX BLOOD GLUCOSE TEST STRP	63
TRESIBA FLEXTOUCH SOPN 100 UNIT/ML	29	trihexyphenidyl hcl SOLN	38	TRUE METRIX METER KIT	73
TRESIBA FLEXTOUCH SOPN 200 UNIT/ML	29	trihexyphenidyl hcl TABS	38	TRUE MULTIVITAMIN TABS	117
TRESIBA SOLN	29	TRIJARDY XR	25	TRUEPLUS 5-BEVEL PEN NEEDLES	74
tretinoin CREA 0.025 %, 0.05 %, 0.1 %	55	TRIKAFTA TBPK	129	TRUEPLUS GLUCOSE CHEW	26
tretinoin GEL 0.01 %, 0.025 %	55	TRILEPTAL SUSP (oxcarbazepine)	20	TRUEPLUS GLUCOSE ON THE GO CHEW	26
tretinoin GEL 0.01 %	55			TRUEPLUS INSULIN SYRINGE	74
tretinoin GEL 0.05 %	55			TRUEPLUS LANCETS 28G	73
				TRUEPLUS LANCETS 30G	73

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MG/0.5ML, 90 MG/ML	57	vancomycin hcl SOLR IV 1 GM ...	37	venlafaxine hcl CP24 75 MG	24
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USTEKINUMAB-TTWE	57	vancomycin hcl SOLR IV 500 MG .	36	venlafaxine hcl TB24 150 MG	24
USTEKINUMAB-TTWE SC	57	VANCOMYCIN HCL SOLR IV 500 MG	37	venlafaxine hcl TB24 37.5 MG, 75 MG, 225 MG	24
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valacyclovir hcl 1 GM	47	VAQTA	134	VENTRIXYL TABS	112
valacyclovir hcl 500 MG	47	VAQTA IM 25 UNIT/0.5ML, 50 UNIT/ML	134	verapamil hcl CP24 100 MG, 200 MG, 300 MG	49
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VIMOVO 500 MG-20 MG (naproxen- esomeprazole magnesium)	7	113	VITASANA TABS
VIMPAT SOLN PO 10 MG/ML (lacosamide)	20	VITABASIC COMPLETE TABS ..	VITATRUM TABS
VIMPAT TABS (lacosamide)	20	113	VITEYES AREDS 2 FORMULA +MULTI CAPS
VIOKACE TABS	63	VITABASIC SENIOR TABS	113
VIRACEPT TABS 250 MG	46	VITABEX CAPS	VITEYES AREDS 2 FORMULA CAPS
VIRACEPT TABS 625 MG	46	113	VITEYES AREDS 2 FORMULA MINI CAPS
VIREAD POWD	46	VITABEX PLUS CAPS	113
VIREAD TABS (tenofovir disoproxil fumarate)	46	113	VITEYES CLASSIC ADVANCED CAPS
VIREAD TABS	46	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	113
VIREXA TABS	117	113	VITEYES CLASSIC MACULAR SUPPOR CAPS
VISION FORMULA 2 CAPS 250 MG- 5 MG-1 MG-10 MG-1 MG-90 MG	113	VITACORE TABS	113
VISION FORMULA/LUTEIN TABS 200 MG-2 MG-40 MG-2 MG-1000 UNIT-60 UNIT-55 MCG	113	VITAFOL-ONE CAPS	VITEYES CLASSIC MULTIVITAMIN TABS
VISION HEALTH CAPS	113	118	113
VISION OPTIMIZER CAPS	113	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	VITEYES CLASSIC+OMEGA-3 CAPS
VISION VITAMINS TABS 60 MG-40 MG-2 MG-30 UNIT-5000 UNIT-40 MCG	113	117	113
VISTA ADVANCED AREDS2 FORMULA CAPS	113	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 ..	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
VISTA ADVANCED DRY EYE FORMULA CAPS	113	135	114
VIT E-VIT C-BETA CAROTENE TABS 250 MG-5000 UNIT-200 UNIT	113	VITAMIN D3 COMPLETE TABS ..	VITEYES OPTIC NERVE SUPPORT TABS
		113	114
		vitamin e CAPS 100 UNIT, 180 MG, 200 UNIT, 400 UNIT, 45 MG, 90 MG, 90 MG, 180 MG	VITRAMYN TABS
		113	114
		VITAMINS A-D-E/SELENIUM TABS 400 UNIT-10000 UNIT-100 UNIT-50 MCG	VITRANOL FE TABS
		113	114

VITRANOL TABS	114	VYNDAMAX	50	WOMENS 50+ MULTI VITAMIN TABS	114
VITRAX TABS	117	VYONDYS 53	120	WOMENS DAILY FORMULA TABS 60 MG-2 MG-30 MCG-400 MCG-	
VITREXATE FE TABS	114	VYSCOXA PO 10 MG/ML	7	1000 UNIT-6 MCG-1.7 MG-25 MCG-	
VITREXATE TABS	114	VYTORIN (ezetimibe-simvastatin)	32	10 MG-2500 UNIT-5 MG-18 MG-500	
VITREXYL + IRON TABS	114	VYVANSE CAPS	1	MG-1.5 MG-50 MG-15 MG-22.5	
VITREXYL TABS	114	VYVANSE CHEW	1	UNIT-2 MG-2 MG-120 MCG-20 MCG	114
VITRUM 50+ ADULT-MULTI TABS 114		VYZULTA	124	WOMENS LIFE PACK TABS 400	
VITRUM 50+ SENIOR MULTI TABS . 114		WAKIX	2	MCG-400 UNIT-25 MCG-10 MG-10	
VIVITROL	30	warfarin sodium TABS	16	MG-250 MCG-3500 UNIT-18 MG-10	
VIVOTIF	132	WAYRILZ TABS PO 400 MG	68	MG-300 MCG-2 MG-80 MG-150	
VOGELXO GEL TD (testosterone) 12		WELCHOL PACK (colesevelam hcl) . 32		MCG-0.75 MCG-150 MCG-30 UNIT-	
VOGELXO PUMP GEL TD (testosterone)	12	WELCHOL TABS (colesevelam hcl) . 32		109 MG-2 MG-5 MCG-10 MCG-120	
voriconazole SUSR	31	WELLBUTRIN SR TB12 100 MG (bupropion hcl)	22	MCG-20 MCG-10 MCG-72 MG-2	
voriconazole TABS	31	WELLBUTRIN SR TB12 150 MG (bupropion hcl)	22	MG-30 MG, 400 UNIT-25 MCG-10	
VORTEX HOLD CHMBR/MASK/CHILD DEVI	77	WELLBUTRIN SR TB12 200 MG (bupropion hcl)	22	MG-10 MG-250 MCG-3500 UNIT-18	
VORTEX HOLD CHMBR/MASK/TODDLER DEVI ..	77	WELLFOLA TABS	114	MG-10 MG-300 MCG-2 MG-150	
VORTEX VALVE CHAMBER-PEDI MASK DEVI	77	WES-PHOS 250 NEUTRAL 852 MG- 155 MG-130 MG	79	MCG-75 MCG-150 MCG-30 UNIT-	
VORTEX VALVED HOLDING CHAMBER DEVI	77	white petrolatum-mineral oil	121	109 MG-2 MG-5 MCG-10 MCG-2	
VOSEVI	47	WINLEVI	55	MG-120 MCG-20 MCG-10 MCG .	114
VRAYLAR CAPS 0.5 MG, 0.75 MG 39		WOMENS 50+ ADVANCED CAPS 72 MG-6 MG-30 MCG-400 MCG-		MG-10 MCG-2 MG-2 MG-75 MCG	115
VRAYLAR CAPS	39	1000 UNIT-25 MCG-3.4 MG-20		115	
VTAMA	57	MCG-20 MG-9.5 MG-2500 UNIT-20		WOMENS MULTIVITAMIN TABS 75	
VUMERITY	128	MG-21 MG-10 MG-100 MCG-234		MG-1.7 MG-1000 MCG-400 MCG-25	
VUSION (miconazole-zinc oxide- white petrolatum)	56	MCG-4.5 MG-4 MG-22.5 MG-2 MG- 16 MG-150 MCG-150 MCG-33 UNIT-		MG-6 MCG-1.3 MG-25 MCG-16	
		5 MCG-10 MCG-180 MCG-105		MG-665 MCG-5 MG-18 MG-380 MG-	
		MCG-552 MCG-6 MG-10 MCG-2		1.2 MG-8 MG-0.9 MG-150 MCG-3.4	
		MG-4 MG-90 MCG	114	MG-1.8 MG-25 MCG-27.5 MCG .	115
				XADAGO	39
				XALATAN SOLN (latanoprost) ...	124
				XARELTO STARTER PACK TBPK	17

XARELTO SUSR 1 MG/ML (rivaroxaban)	17	XPHOZAH	65	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	63
XARELTO TABS 10 MG, 15 MG, 20 MG	17	XROMI SOLN PO 100 MG/ML	68		
XARELTO TABS 2.5 MG (rivaroxaban)	17	XULTOPHY	25		
XATMEP SOLN PO	38	YELETS TEENAGE FORMULA TABS	115		
XCOPRI (250 MG DAILY DOSE) TBPk	20	YESINTEK SOLN 45 MG/0.5ML ..	57		
XCOPRI (350 MG DAILY DOSE) TBPk	20	YESINTEK SOSY	57	ZEPATIER	47
XCOPRI TABS	20	YF-VAX SUSR	134	ZEPOSIA 7-DAY STARTER PACK CPPK	128
XCOPRI TBPk	20	YUFLYMA (1 PEN) AJKT	5	ZEPOSIA CAPS	128
XELJANZ SOLN	3	YUFLYMA (2 PEN) AJKT	5	ZEPOSIA STARTER KIT CPPK ..	128
XELJANZ TABS	3	YUFLYMA (2 SYRINGE) PSKT	5	ZERVIAE	124
XELJANZ XR TB24	3	YUFLYMA-CD/UC/HS STARTER AJKT	5	ZESTORETIC (lisinopril & hydrochlorothiazide)	36
XELPROS EMUL	124	YUPELRI	14	ZESTRIL TABS (lisinopril)	34
XELSTRYM	1	YUSIMRY	5	ZETIA (ezetimibe)	33
XEMBIFY	125	zafirlukast	14	ZIAGEN SOLN (abacavir sulfate) .	46
XENAZINE (tetrabenazine)	127	zaleplon 10 MG	69	zidovudine CAPS	46
XEPI	55	zaleplon 5 MG	69	zidovudine SYRP	46
XHANCE EXHU	120	ZANAFLEX CAPS (tizanidine hcl) 120	120	zidovudine TABS	46
XIGDUO XR (dapagliflozin propanediol-metformin hcl)	25	ZANAFLEX CAPS	120	zileuton TB12	14
XIGDUO XR 1000 MG-2.5 MG, 500 MG-10 MG, 500 MG-5 MG	25	ZANAFLEX TABS 4 MG (tizanidine hcl)	120	ZIMHI SOSY	30
XIIDRA	122	ZARONTIN CAPS (ethosuximide) .	21	zinc oxide (topical) OINT 20 %	62
XOLAIR SOAJ	14	ZARONTIN SOLN (ethosuximide) .	21	ZIOPTAN (tafluprost)	124
XOLAIR SOSY 75 MG/0.5ML, 150 MG/ML	14	ZARXIO	69	ziprasidone hcl	40
XOLAIR SOSY	14	ZAVZPRET	77	ziprasidone mesylate	40
XOPENEX HFA (levalbuterol tartrate)	16	ZEGALOGUE SOAJ	26	ZIRABEV	38
		ZEGALOGUE SOSY	26	ZITHROMAX PACK	71
		ZEMBRACE SYMTOUCH SOAJ ..	78	ZITHROMAX SUSR 100 MG/5ML (azithromycin)	71
		ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-		ZITHROMAX SUSR 200 MG/5ML (azithromycin)	71

ZITHROMAX TABS 250 MG (azithromycin)	(immunosuppressant)	79
ZITHROMAX TABS 500 MG (azithromycin)	ZORYVE CREA EX	62
ZITHROMAX TRI-PAK TABS (azithromycin)	ZORYVE FOAM EX	62
ZITHROMAX Z-PAK TABS (azithromycin)	ZTALMY	20
ZITUVIMET TABS	ZUBSOLV SUBL	12
ZITUVIMET XR TB24	ZUNVEYL TBEC PO 5 MG, 10 MG, 15 MG	126
ZITUVIO	ZURNAI IJ 1.5 MG/0.5ML	30
ZOCOR TABS 10 MG, 20 MG, 40 MG (simvastatin)	ZURZUVAE	22
zolmitriptan SOLN 2.5 MG	ZYBIC SUSP 7.5 MG/5ML (meloxicam)	7
zolmitriptan SOLN 5 MG	ZYFLO TABS	14
zolmitriptan TABS	ZYLET 0.3 %-0.5 % (loteprednol etabonate-tobramycin)	123
zolmitriptan TBDP	ZYMFENTRA (1 PEN) AJKT	66
ZOLOFT CONC (sertraline hcl)	ZYMFENTRA (2 PEN) AJKT	66
ZOLOFT TABS 100 MG (sertraline hcl)	ZYMFENTRA (2 SYRINGE) PSKT	66
ZOLOFT TABS 25 MG, 50 MG (sertraline hcl)	ZYPITAMAG 2 MG, 4 MG	33
ZOLPIDEM TARTRATE CAPS	ZYPREXA RELPREVV	42
zolpidem tartrate SUBL	ZYPREXA SOLR (olanzapine)	42
zolpidem tartrate TABS	ZYPREXA TABS 2.5 MG, 5 MG (olanzapine)	42
zolpidem tartrate TBCR	ZYPREXA TABS 20 MG (olanzapine)	42
ZOMACTON SOLR SC		
ZOMIG SOLN 2.5 MG (zolmitriptan) . 78		
ZOMIG SOLN 5 MG (zolmitriptan) .78		
ZONISADE SUSP		20
zonisamide CAPS		20
ZORTRESS (everolimus		